

AETNA BETTER HEALTH® OF FLORIDA

1340 Concord Terrace

Sunrise FL, 33323

www.aetnabetterhealth.com/florida



Provider Bulletin

Subject: Preventive Dental Benefits for Medicaid Enrollees
Products: Medicaid

Date: December 8, 2017

REMARKS:

- Urgent
 For your review
 Reply ASAP
 Please comment

Dear Provider,

Aetna Better Health of Florida (ABHFL) offers preventive dental benefits for Medicaid-enrolled children and adults at no cost to the member. Children and adults are eligible to receive one free dental exam and cleaning every 6 months.

As a primary care physician, we know that your patients rely upon your guidance for better health and well-being. We need your help to encourage ABHFL members to utilize their preventive dental benefits at least twice a year to maintain good oral health.

To assist you, we have placed an Oral Health Risk Assessment Tool that was created by the American Academy of Pediatrics to the ABHFL website. This tool can be found at:

<https://www.aetnabetterhealth.com/florida/providers/library>

This tool can be used as a guide in what to look for when examining a patient’s mouth.

MCNA Dental Plans is the dental benefits manager for ABHFL. They offer scheduling assistance to members through the MCNA Member Hotline at 1-800-281-9724 (TTY 1-800-955-8771). They can assist your patients in English, Spanish, Creole, and other languages upon request. Members may also visit MCNA’s website at www.mcna.net to search for a dentist online.

Should you have questions or require additional information, please contact Provider Relations at 800-441-5501, email FLMedicaidProviderRelations@aetna.com, or fax 844-235-1340.

CONFIDENTIALITY NOTICE: This message is intended only for the user of the individual or entity to which it is addressed and may contain confidential and proprietary information. If you are not the intended recipient of the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is prohibited. If you received this communication in error, please notify the sender at the phone number above.

NOTICE TO RECIPIENT(S) OF INFORMATION:

Information disclosed to you pertaining to alcohol or drug abuse treatment is protected by federal confidentiality rules (42 CFR Part 2), which prohibit any further disclosure of this information by you without express written consent of the person to whom it pertains of as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose. The federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.