

Spring/Summer 2025

Dental OfficeLink Updates™



Welcome to the latest edition of Dental OfficeLink Updates (OLU). As always, we provide you with relevant news for your office.



HIGHLIGHTS IN THIS ISSUE

[Individual and family plans \(IFPs\) now offer embedded adult dental and vision benefits](#)

We include an embedded Adult Dental and Vision benefit in some IFP medical plans in the following markets: Arizona, Florida, Georgia, Illinois (HMO), Indiana, Kansas, Missouri, Nevada, North Carolina, Ohio, Texas and Virginia.

[Register today for Aetna Dental® portal training](#)

The Dental Network team hosts monthly live provider portal training for participating dentists and staff. Register for access to the [Aetna Dental provider portal](#) and the [provider portal training](#).

Our trainings are great for new team members or as a refresher for front desk staff.

[Artificial intelligence \(AI\) in dental care](#)

You witness firsthand how advancements in dental technology transform patient care, improve efficiency and streamline workflows. AI-powered diagnostics and digital manufacturing are reshaping the landscape of modern dentistry.

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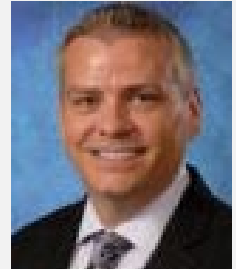
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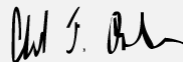
Welcome to the spring/summer edition of Dental OLU

Welcome to the spring/summer edition of the Dental OfficeLink Updates™ (OLU) newsletter. As we step into this season of renewal, we're proud to share updates, opportunities for growth, and innovative strategies and treatments to help your practice flourish.



We're committed to continuously improving our digital tools to help support you and the services you provide. In keeping that commitment, we're excited to announce Medicare portal enhancements to our dental provider portal later this year. These Explanation of Benefits (EOB) response enhancements will allow you to view the waiting period, alternate benefits, shared frequency, and last paid date — just as you can with Commercial EOB responses. Stay tuned for more details as we get closer to the launch date.

You play a crucial role in the ongoing success of our network. I want to thank you for your expertise and commitment to excellence. Together, we're making a positive impact in the communities we serve. Thank you for choosing to be a trusted Aetna Dental® Network provider!

A handwritten signature in black ink, appearing to read "Chad Cressler".

— Chad Cressler
AVP, Network Management, Dental



Notices and important reminders

Comprehensive oral evaluations CDT® code D0150*

These evaluations are typically meant for new patients.

You should report comprehensive oral evaluations only for new patients or for established patients who have been absent from active treatment for three or more years.

If an established patient has had a significant change in health conditions or other unusual circumstances, you could report a comprehensive oral evaluation along with a detailed description of the specific, unique circumstance for that patient.

A comprehensive evaluation is typically appropriate only once per patient and is not a substitution for a routine exam. To avoid denials and re-work, make sure that you use the D0150 code appropriately.

*Current Dental Terminology, © 2024 American Dental Association. All rights reserved.



News for you

Register today for Aetna Dental® portal training

We host monthly training for participating dentists and staff.

The Dental Network team hosts monthly live provider portal training for participating dentists and staff. Register for access to the [Aetna Dental provider portal](#) and the [provider portal training](#).

Our trainings are great for new team members or as a refresher for front desk staff.

Topics include:

- Navigating the Aetna Dental provider portal
- Eligibility and benefits
- Claims management tools
- DMO rosters
- Online resources

We offer a live Q&A at the end of the training.

Illinois: Coverage for major injury to jaw through accident or disease

Beginning January 1, 2026, treatment for a major injury to the jaw will require non-dental insurance coverage.

This law applies only to fully insured health insurance plans with a contract situs in the state of Illinois.

A new Illinois law will require insurers to cover medically necessary care and treatment for a major injury to the jaw through medical coverage. The same member cost-sharing, including a deductible and coinsurance, will apply.

Medically necessary care and treatment to address a major injury to the jaw either through accident or disease coverage will include:

- Oral and facial surgery, including reconstructive services and procedures necessary to improve, restore or maintain vital functions
- Dental implants, crowns or bridges
- Prosthetic treatment such as obturators, speech appliances and feeding appliances
- Orthodontic treatment and management
- Prosthodontic treatment and management
- Otolaryngology treatment and management

For more information, access the [full language of this statute](#).

Questions?

If you need assistance with submission and processing of your claim, please contact the Aetna® Oral Surgery Unit at [1-800-531-7895](tel:1-800-531-7895) (TTY: [711](tel:711)).

Artificial intelligence (AI) in dental care

[Learn more about the benefits of integrating AI into your practice.](#)

You witness firsthand how advancements in dental technology transform patient care, improve efficiency and streamline workflows. AI-powered diagnostics and digital manufacturing are reshaping the landscape of modern dentistry.

Diagnostic accuracy

By analyzing X-rays and scans, AI can enhance diagnostic accuracy, enable the early detection of cavities, periodontal disease and other oral health concerns.

Virtual consultations

This technology allows you to provide assessments, follow-ups and oral health advice remotely. By integrating teledentistry into your practice, you can reach patients in underserved areas, enhancing convenience and continuity of care.

Digital scanning

Digital scanning replaces traditional impressions with greater comfort and precision. Additionally, 3D printing is significantly reducing wait times by making same-day restorations, custom implants and surgical guides a possibility.

We support you

We're here for you as technology advances. We remain committed to supporting you as you implement these innovations and continue to enhance care and improve efficiency for our members.

Individual and family plans (IFPs) now offer embedded adult dental and vision benefits

[These changes began January 1, 2025, in certain markets.](#)

We include an embedded Adult Dental and Vision benefit in some IFP medical plans in the following markets: Arizona, Florida, Georgia, Illinois (HMO), Indiana, Kansas, Missouri, Nevada, North Carolina, Ohio, Texas and Virginia.

Network and participation

Since the dental benefits are embedded in the medical plan, the medical network is displayed prominently on the member ID card.

The embedded Adult Dental benefit always uses the Aetna® PPO dental network.

The ID card

As of January 22, 2025, all newly generated member ID cards show "PPO" after "Adult Dental." Even if they don't, the Adult Dental benefit uses the Aetna PPO dental network.

aetnaCVSHealth.

QHP
OTC Quarterly Allowance

ID PLAN 300015573900
000001-EXTX0546 HMO
RICHARD WARDJYO
PCP/Office: Ceballos, Kevin R
01 VALENTINA WARDJYO
PCP/Office: NO ELECTION

PLAN EFFECTIVE DATE 01/01/2025
Silver 10 Advanced CSR 87
Adult Dental PPO + Vision
PCP \$0
SPC \$35

RX BIN 610502 RX \$3 / \$15 / \$35 / 40% / 50%
RX PCN 00670000 Variable Copays May Apply

AetnaCVSHealth.com PAYER # 60054 DOI

See your plan documents for all plan requirements, including precertification. In an emergency, seek care immediately or call 911. This card doesn't guarantee coverage. Aetna is part of the CVS family of companies.


MEDICAL	IN NET T1	IN NET T2	OUT NET
Deductible - Individual	\$0	N/A	N/A
Deductible - Family	\$0	N/A	N/A
Out of Pocket Max - Individual	\$3,025	N/A	N/A
Out of Pocket Max - Family	\$6,050	N/A	N/A

PHARMACY	IN NET	OUT NET
Deductible - Individual	\$400	N/A
Deductible - Family	\$800	N/A

Member Services 1-844-365-7373 Aetna Health Inc. (a TX corp.)
 Providers Call/Precert 1-888-632-3862
 CVS Health Virtual Care https://aetna/VC

TDD/TTY 711 Submit claims to:
 P.O. Box 981106
 El Paso, TX 79998-1106

20% OFF CVS HEALTH BRAND PRODUCTS IN STORE.
 EXCLUSIONS APPLY.



Questions?

If you have questions regarding a member's coverage or eligibility for dental benefits, call the National Dentist Line at [1-800-451-7715](tel:1-800-451-7715).



Medicare

New Medicare partnerships with LIBERTY Dental Plan

Ensuring our members have access to quality dental services.

This article applies to Oklahoma and New York.

Our new partnerships with LIBERTY Dental Plan demonstrate that we recognize the link between a person's oral health and their overall health. We look forward to this partnership to ensure that our members have access to quality dental services.

The following benefits became effective on January 1, 2025:

- Oklahoma: LIBERTY will help administer our PPO Dual Eligible Special Needs Plans (D-SNPs) Medicare Advantage dental benefits.
- New York state: LIBERTY will help administer our HMO D-SNP FIDE Medicare Advantage dental benefits.

We're here to help

If you have any questions, please contact LIBERTY at [1-866-610-0282](tel:1-866-610-0282). They're available Monday through Friday, 8 AM to 8 PM ET. Contracted LIBERTY providers can verify eligibility, view utilization history and submit claims at [LIBERTY Dental](#).

Contracted LIBERTY providers may also submit claims via electronic data interchange (EDI). Use Payor ID CX063 or submit paper claims to the following address:

ATTN: Claims Department LIBERTY Dental Plan
P.O. Box 15149
Tampa, FL 33684-5149

You may have questions about an Aetna® member who isn't appearing as eligible through our partnership with LIBERTY. If so, just go to the [Contact Aetna](#) page. In the "Call us" column, choose Aetna Service Centers from the drop-down menu and dial the Medicare medical and dental plans number, or visit [Aetna Dental](#).

Claims, eligibility and support — we're here for you

Claims

Submit claims to the address on the member ID card.

By mail

Aetna Medicare
PO Box 981106
El Paso, TX 79998-1106

Electronically

EDI Payer ID#60054

Medicare Advantage claims and eligibility

To confirm eligibility for Aetna® members with a Medicare Advantage plan, log in to [Aetna Dental](#), select Access Electronic Services and follow the prompts or call us at [1-800-624-0756 \(TTY: 711\)](#). Our dedicated Medicare Provider Services team offers personalized customer service and can help you with questions about Medicare dental plan eligibility, benefits and claims.

You can also log into [Aetna Dental](#) to view our 2025 Medicare Quick Reference Guide, which contains plan benefits and claims submission information. Just look for Dental Medicare under the Resources tab.

Skip the phone line

You can now save time by skipping the phone line and instead receive a fax back with member eligibility. Call us at [1-800-624 0756 \(TTY: 711\)](#) and select Coverage and Benefits and follow the prompts. In addition to receiving the member's plan status, effective date, original effective date with Aetna and group information; you'll now see the annual maximum benefit and remaining balance of the allowance. Additionally, you will have the

opportunity to enter any ADA procedure codes and receive benefit information specific to the members plan, including the INN & ONN coverage.

Aetna Dental® Medicare Advantage providers — stay in compliance

CMS requires you to have a compliance program. Read on to understand the requirements and how to comply with them.

Do you know that dentists are considered First Tier, Downstream and Related entities (FDRs) based on your contract with Aetna®? The Centers for Medicare & Medicaid Services (CMS) requires all FDRs to have an effective compliance program.

What are the requirements?

- Distribute either the [CVS Health Code of Conduct \(PDF\)](#) or your own conduct standards or compliance policies to employees/subcontractors.
- Perform exclusion screenings on employees/subcontractors both prior to hiring or contracting and monthly thereafter to ensure that they are not excluded from participating in federal programs. You must enter the names of your employees/subcontractors into both the [Office of Inspector General](#) site and the [Exclusions page of SAM.gov](#) to determine if any of them are excluded. If any of them are, you must remove them from work related to Aetna Medicare, and you must notify Aetna of the exclusion.
- Have a process in place for employees/subcontractors to report compliance and fraud, waste and abuse issues. If any of those issues affect Aetna, you must report the problem to us. To meet this requirement, you may, for example, display our [reporting poster \(PDF\)](#).
- Do you conduct offshore business? Submit this [Offshore Services Attestation form \(PDF\)](#) to our compliance team. Oversee any subcontractor that performs services for Aetna to ensure that the subcontractor complies with the CMS compliance program.

How to comply

More details about CMS compliance requirements and how to meet them are outlined in the [FDR Guidebook \(PDF\)](#), which includes helpful tools such as a checklist that you can use to determine whether you are meeting requirements. If you are not meeting any of these requirements, we encourage you to make corrections to your processes.

Ask questions

[Send us an email](#) and we can work with you to develop a Corrective Action Plan.

Aetna® PPO dentists and Aetna Medicare Advantage

Read on to understand coverage, networks and how to submit claims and confirm eligibility.

Aetna Medicare now has over 3 million members with dental coverage.¹

What you need to know

- You can treat all Aetna Dental Medicare Advantage members who are in plans that use the Aetna Dental PPO Network.
- Medicare members have a combined dental/medical ID card. So, you may see references to HMO, D-SNP, HMO-POS, or PPO.
- You can identify the members plan by contract and Plan Benefit Package (PBP) number, which is located in the lower right-hand corner of the ID card. You can find a list of these numbers in our [Medicare Quick Reference Guide](#).
- Regardless of the medical plan, if the ID card says “Aetna Medicare Dental” in the upper-right-hand corner (see examples above), then the member has a network dental plan. And you’ll be reimbursed in accordance with the PPO fee schedule you have with us.



¹All statistics are from an August 2024 internal Medicare reporting table.

New guidelines for 2025 Individual Medicare dental plans

Our [2025 dental quick reference guide](#) includes a full list of covered dental services.

Dental benefits are embedded in medical plans. For many members, the medical plan may not change but the dental benefits will. Keep in mind that members may report no change to benefits despite having received a notice of changes.

New guidelines

- Medical necessity: We'll require clinical review. For certain services, you'll need to submit documentation such as X-rays and periodontal charting. You can find the requirements in our [Claim Documentation Guidelines \(PDF\)](#). We highly suggest that you submit these services prior to treatment.
- Claims edits: We'll apply our standard claim handling, including alternate benefits where applicable.
- Pre-determinations: You can submit a pre-service claim to get an estimate of benefits prior to treatment. Submit the proposed treatment plan along with any required documentation. We strongly recommend getting an estimate for any treatment plan that will cost more than \$350.
- Please note that you may not bill a member for services that are deemed not covered during medical necessity review unless you inform them beforehand that their Aetna Dental® Medicare plan will not cover the services. In these circumstances, please work directly with the member to determine the best treatment options.

For more information, such as a full list of covered dental services, exclusions and limitations, see the 2025 dental quick reference guide via [Aetna Dental](#) or call us at [1-800-624-0756 \(TTY: 711\)](#).

Periodontal maintenance CDT® code D4910*

[These claims will only be paid if there's a history of the periodontal therapy.](#)

We used to pay periodontal maintenance claims without requiring the history of periodontal therapy. Beginning January 1, 2025, we started to pay periodontal maintenance claims only if we had the history of the periodontal therapy.

To ensure efficient processing of D4910 claims, include the date of service, service codes, and any teeth/quadrants for the prior periodontal therapy by attaching the information to the claim.

Note that having billed previously for D4910 services doesn't constitute prior periodontal therapy.



How to reach us

We're here for you

Did you know that you can submit office changes on our dental portal?

- Update your personal information, including your National Provider Identifier (NPI) and email address
- View dental office guides
- Take continuing education courses
- Add or terminate associates
- Claims via Dental Xchange

Log in or register at [Aetna Dental](#). Once logged in, from the top ribbon, select 'Working with Us' to view information on how to credential a provider, locate our dental forms, update your office information, update your email address, etc.

Phone numbers

National Dentist Hotline

Have a question about the PPO or DMO network, claim status or member eligibility? Call the National Dentist Hotline at [1-800-451-7715](tel:1-800-451-7715) (TTY: [711](tel:711)).

Dentist Contracting Hotline

For PPO contract information or DMO® supplies, call the Dentist Contracting Hotline at [1-800-776-0537](tel:1-800-776-0537) (TTY: [711](tel:711)).

Medicare Dentist Hotline

Have a question or need help with our Medicare plans? Please reach out to our dedicated Medicare Provider Services team. They offer personalized customer service and can help you with Medicare eligibility, claims or dental plan benefits questions. Call [1-800-624-0756](tel:1-800-624-0756) (TTY: [711](tel:711)).

Web and mailing addresses

On the [Aetna Dental website](#), you can:

- Update your personal information, including your National Provider Identifier (NPI) and email address
- View dental office guides
- Take continuing education courses, and more

Claims address:

Aetna Dental
PO Box 14094
Lexington, KY 40512

Aetna PPO grievances and appeals

Call the National Dentist Hotline at [1-800-451-7715 \(TTY: 711\)](#).

California Language Assistance Program

For free interpretation services, call [1-800-525-3148 \(TTY: 711\)](#).

Grievance forms and procedures are available in Spanish on [Aetna Dental](#). You can find additional information about our Language Assistance Program on [Aetna Dental](#).

Comments and suggestions

Please [send us an email](#) if you have comments or suggestions. We welcome them.

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While this information is believed to be accurate as of the print date, it is subject to change. Refer to [AetnaDental.com](https://www.aetnadental.com) for more information about Aetna® networks.

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