

Aetna Better Health® of Pennsylvania

Dental Patient Scheduling Request Form

Practice Name:

Location/Address:

Scheduling Contact Person:

Contact's Email:

Contact's Phone:

Please Note: If you are requesting assistance with patient scheduling, this service is for Aetna Better Health of PA members only.

Please indicate preference for block scheduling days:

Would you like the block scheduling day double booked? Yes No

Should a member be interested in scheduling but not on the block day please pick from the following options:

- Will we have access to your schedule to make the appointment
- Prefer a 3 way call with the scheduling service, member and office
- Only schedule for the block day ask members to call office directly

Please provide other specific details in the box below

After completing this form, please save a copy and email the completed request to Carolynn Wahl at WahlC@Aetna.com.

A team member from our patient outreach department will follow up with you.

1-866-638-1232

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