

Subject: Preferred Home Health Agency
Florida Medicaid Members 21 and over
Miami-Dade

Date: March 12, 2018

REMARKS: Urgent For your review Reply ASAP Please comment

Professional Solutions Home Health Agency, Inc. will become Aetna Better Health of Florida's preferred home health provider **for members 21 and over residing in Dade County.**

Effective **April 1, 2018**, when you are faxing or calling to arrange **new** home health services, please contact **Professional Solutions** directly. There will be no changes to services that have already been initiated or authorized.

Contact Information:

Professional Solutions Home Health Agency
Telephone: 305-262-8220
Fax: 305-262-8219
24 hour on call telephone: 305-989-6339
Email: pshhaintake@gmail.com

Please include the following information:

- ✓ Detailed physician order or prescription – signed and dated
- ✓ Face Sheet
- ✓ Clinical information to support the request
- ✓ A signed plan of care will be needed before the services are initiated

Aetna Better Health will continue to utilize the following providers for DME and Infusions orders:

- DME – SurfMed Telephone: 1-888-201-7873 Fax: 1-888-398-3149
- Infusion – Ambient Telephone: 1-954-389-1126 Fax: 1-954-389-1129

Requests for pediatric home health should be faxed directly to the health plan at 1-860-607-8056.

Should you have questions, or require additional information please contact your Provider Relations Representative at **1-800-441-5501 (MMA)** or **1-844-528-5815 (Florida Healthy Kids)**. You can also reach us via email **FLMedicaidProviderRelations@aetna.com** or fax **1-844-235-1340**.

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.