

### **PROVIDER BULLETIN**

#### Aetna Better Health® of Florida

9675 NW 117<sup>th</sup> Ave, Suite 202 Miami, FL 33178

AetnaBetterHealth.com/Florida

Date:	June 20, 2024
Purpose:	Provider Education
Subject:	Updated Process - Members Eligibility Changes & Claims Submission
Products:	MMA, LTC, FHK
From:	Provider Relations

## Aetna Better Health® of Florida

# Members Eligibility Changes & Claims Submission – Updated Process

Dear Providers,

Aetna Better Health of Florida (ABHFL) would like to inform you that we will be implementing an updated process on how claims are handled when a Member's eligibility changes within the month of service.

#### **Our Current Process**

When a Member's eligibility changes during the month of service, ABHFL automatically splits the claims to pay accordingly.

#### What's Changing?

ABHFL will no longer split claims based on any member's change in eligibility dates with the health plan. Effective August 1<sup>st</sup>, 2024, Providers will be responsible to confirm member's eligibility accordingly to ensure members are eligible at the time of services. Claims submitted to ABHFL will require to be billed accordingly due to eligibility. Failure to follow the updated proper billing process may result in claim denials.

#### When will the updated process begin?

Updated process will be implemented effective August 1st, 2024.

Thank you for your continued participation in the Aetna Better Health of Florida network. Please contact our Provider Services line should you have any questions at:

Phone: MMA: 1-800-441-5501

LTC: **1-844-645-7371** FHK: **1-844-528-5815** 

Email: FLProviderEngagement@aetna.com

Thank you,

#### **Aetna Better Health of Florida**

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.

For providers only, not intended for members distribution and or marketing material.

#### AetnaBetterHealth.com/Florida