

September 5, 2018

FAX: EM Up Coding and Down Coding

Dear all Aetna Better Health of Louisiana Providers:

In response to an abundance of feedback from our provider community, Aetna Better Health of Louisiana (ABHLA) is currently revising the Evaluation and Management Up Coding and Down Coding Policy both to better align with the intent of the policy and ensure that ABHLA has the appropriate approach in place to properly adjudicate claims where applicable.

We recognize and sincerely apologize for any confusion the policy, and subsequent claim edit, has caused. The policy on our website was in draft form, was not finalized and <u>is not active</u> and has been removed from our site for revisions. The policy was initially uploaded to satisfy the notification period to providers; however, we appreciate that, in our haste to give providers ample notice of the impending policy, we were remiss in not mentioning that it was, in fact, not fully finalized and still in the development phase. We were also remiss in prematurely deploying a claims adjudication edit.

Because you have brought this to our attention, we have taken action in the following ways to rectify the situation:

- We will ensure that we have the appropriate processes in place to properly adjudicate claims;
- We are including an article in our upcoming newsletter as another form of notification to providers of the policy's progression. The next newsletter is scheduled for release on or around 9/7/18;
- Configurations are being currently being updated to remove the automatic down-coding that was occurring when the edit was triggered;
- Impacted claims will be identified and amended to pay the appropriate contractual rate;
- Going forward, we are working to update the system to notify the provider once the edit is triggered and allow them an opportunity to submit medical records and/or other required information to allow the claim to adjudicate, prior to up coding or down coding the claim payment;
- Additionally, providers will have the opportunity to participate in the reconsideration process who wish to challenge this plan's final determinations and/or internally dispute this process through appeals to meet all timely required elements.

We welcome any feedback you may wish to offer us in an effort to improve the policy, including any education regarding correct coding practices that may be beneficial to your office or other providers in general, to ensure an understanding of and compliance with the policy. Again, we thank you for reaching out to us directly and providing us the opportunity to partner together for a solution that works for all parties involved.