



# Teamwork



[AetnaBetterHealth.com/Maryland](https://AetnaBetterHealth.com/Maryland)

Aetna Better Health of Maryland

## Encourage your female patients to schedule a well-woman checkup

We know they are busy caring for their families, working outside the home and engaging in community activities. Remind them that they matter, and we want them to stay healthy.

Well-woman checkups are a covered benefit for Aetna Better Health of Maryland members. Getting a well-

woman checkup each year can help detect any problems early, when they are easier to treat.

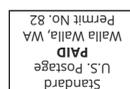
Encourage your patients to call their OB-GYN or primary care provider to schedule a well-woman checkup today!

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- Member rewards eligibility information
- Helping members who are experiencing homelessness
- When to submit claim disputes instead of appeals

Winter 2021

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Aetna Better Health® of Maryland  
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## Help for patients at risk of diabetes

Aetna Better Health of Maryland is offering a Diabetes Prevention Program to patients with prediabetes. This lifestyle change program is recognized by the Centers for Disease Control and Prevention and teaches patients how to eat healthy, exercise and deal with stress to reduce the risk of developing type 2 diabetes.

Visit [AetnaBetterHealth.com/maryland/providers/member-benefits-coverage.html](https://www.aetna.com/betterhealth/maryland/providers/member-benefits-coverage.html) to learn more about the program.

Do you have members who qualify? Contact us at [WellnessAndPrevention@Aetna.com](mailto:WellnessAndPrevention@Aetna.com), or call **1-866-827-2710 (TTY: 711)** and ask to speak with a care manager.

## Aetna Better Health's Provider Portal is now on Availity

We'd like you to start using our new Medicaid provider portal in advance of discontinuing the existing provider portal.

### Get registered for the portal

If you're already registered with Availity for another payer, you're all set. You can use your existing login credentials to get started with Aetna Better Health.

Not registered yet? That's OK. Visit [Availity.com/AetnaProviders](https://www.availity.com/AetnaProviders).

The new portal allows you to do many things like:

- Authorization search: view authorization requests
- Search remittances: EOB PDF for claim payment information
- Search member eligibility and benefits
- Generate a list of members assigned to a PCP with the panel roster
- Determine if prior authorization (PA) is required with the PA requirement search tool
- Care management: review care plans, assessments and clinical records
- Use the provider deliverable manager



- Register for electronic funds transfer (EFT)
- Register for electronic remittance advice (ERA)
- View business intelligence reports
- View electronic claims submission and status updates
- View appeals/grievance submission and status updates
- See claims payments and verification of your information on E-Prep

To ensure correct claims payments, all practice managers/providers must verify and update their practice information in the E-Prep Portal to have their encounters submitted cleanly without any error code reason. You can go to [eprep.health.maryland.gov](https://www.eprep.health.maryland.gov) to access the E-Prep Portal.



Questions? Email us at [MarylandProviderRelationsDepartment@Aetna.com](mailto:MarylandProviderRelationsDepartment@Aetna.com).

## Our members may be eligible for gift cards

Aetna Better Health of Maryland's Member Incentive Program provides gift cards to eligible members who receive preventive screenings and other care. See the chart below for eligibility information.

Program	Eligible members	Member rewards
Breast cancer screening	Women ages 50 to 74 who receive a mammogram during the year	\$25 once every 2 years
Cervical cancer screening	Women ages 21 to 64 who complete their regular Pap smear testing during the year	\$25 once every 3 years (Pap test only) or every 5 years (Pap and HPV test)
Prenatal and postpartum care (Promise Program*)	Women who complete at least 7 of their regular prenatal visits and complete a postpartum visit between 7 and 84 days after delivery	\$10 for completing their prenatal visits and \$25 for completing their postpartum visit

*\*The Promise Program is available to members through Aetna Better Health of Maryland Care Management. This program helps members learn how to take care of themselves and their baby. They get support and help throughout their pregnancy. Our Promise Program is a benefit for members before and after giving birth.*

## Discover our community development events

We enjoy meeting our members in the communities where they live, work and play. Here are a few of the events/meetings scheduled for the coming months:



Let's connect. To learn more about our community development team and how our partnership can help you, reach out to us today at **1-866-827-2710 (TTY: 711)**.

Event/meeting name	Date/time	Location	Address
<b>Day at the Market</b>	December 8, 2021, 10 AM to 2 PM	Northeast Market	2101 E. Monument St. Baltimore, MD 21205
<b>CVS Retail Store Event</b>	December 15, 2021, 1 to 4 PM	CVS Store #3166	1503 Potomac Ave. Hagerstown, MD 21742
<b>Capital Area Food Bank Distribution</b>	December 18, 2021, 8:00 to 10:30 AM	Capital Area Food Bank	6300 Brightseat Road Landover, MD 20785
<b>FBCOG: The Collaborative Community Partners Expo</b>	December 18, 2021, 11 AM to 2 PM	FBCOG	6130 Lamont Drive New Carrollton, MD 21740

## Member rights and responsibilities

Aetna Better Health members, their families and guardians have the right to information related to their treatment or treatment options in a manner and language appropriate to the member's condition and ability to understand. To access the specific member rights and responsibilities, call our Provider Relations staff toll-free at **1-866-827-2710 (TTY: 711)**. Check the **AetnaBetterHealth.com/Maryland** website for the full list of these rights and responsibilities.

### Member education opportunities

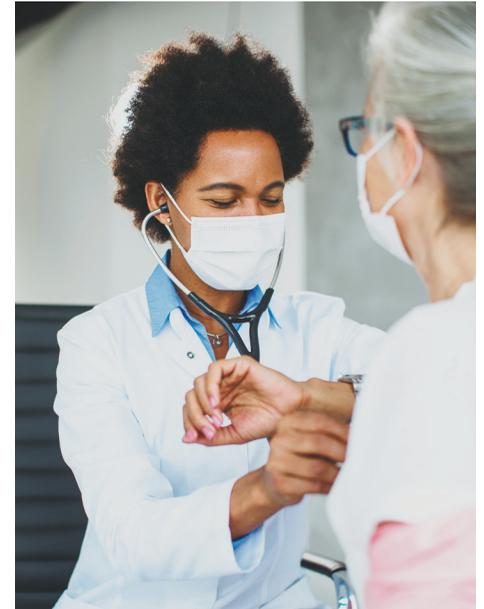
For assistance with member education opportunities, please contact Aetna Better Health Member Services at **1-866-827-2710 (TTY: 711)**.

Also visit our website at **AetnaBetterHealth.com/Maryland/Wellness/Care** for additional information.

## Caring for people experiencing homelessness

Homelessness occurs across the state of Maryland in numbers larger than most people realize. The Code of Maryland Regulations (COMAR) defines "homeless" as a household that lacks a fixed, regular and adequate nighttime residence. Inquiries about residence should be included in the patient's history and updated periodically.

When providing care for someone who is homeless or at risk of homelessness, it is important to consider the correlation of homelessness with poor health outcomes. Studies have shown that trauma is hazardous to one's health, and experiences of trauma are pervasive amongst homeless populations. The experience of homelessness can be traumatizing and decrease life expectancy. Individuals experiencing homelessness are also at higher risk for poor mental health, substance abuse, and infectious and chronic illnesses.



Not having a place to call home is a health care issue. Imagine needing to store essential medications or medical equipment in a refrigerated place and not having one. Lack of access to a safe place to rest, a place to keep healthy foods, a toilet or a place to bathe makes it hard to practice healthy habits.

During our current pandemic, it is difficult for members of homeless communities to practice social distancing, self-isolate, sanitize and practice proper handwashing. Asking our members about their housing status and other social determinants of health can give a clearer picture about their challenges.



Our Care Management staff can assist members in finding housing and other resources in their communities. Please share our Member Services number, **1-866-827-2710 (TTY: 711)**. We can also be reached by email at **AetnaBetterHealthMDSplNeedsCoord@Aetna.com**. We care and are here to help.

## When to submit a claim dispute

Please submit a claim dispute for claim resubmission (e.g., corrected claims) and reconsiderations. A dispute is an expression of dissatisfaction with any administrative function, including policies and decisions, based on contractual provisions and inclusive of claim disputes.

*Pre-service denials are processed as member appeals and are subject to member policies and time frames.*

### Resubmission

Resubmission is a request for review of a claim denial or payment amount on a claim originally denied because of incorrect coding or missing information that prevents Aetna Better Health from processing the claim.

A corrected claim is an example of a claim resubmission. It

should include a newly added modifier, code change or any change to the original claim. The claim must use the appropriate resubmission type of bill or be marked as a corrected claim. Corrected claims must be submitted within 180 days.

### Reconsideration

Reconsideration is a request from a provider for Aetna Better Health to reconsider its decisions. Examples include the following:

- **Itemized bill.** All claims associated with an itemized bill must be broken out per revenue (rev) code to verify that charges billed on the UB match the charges billed on the itemized bill. Please attach an itemized bill that is broken out by rev code with subtotals.
- **Duplicate claim.** Review request for a claim that

originally had a denial reason of "duplicate." Provide documentation as to why the claim or service is not a duplicate, such as medical records showing that two services were performed.

- **Retro-authorization request.** Claims that were denied due to no authorization on file. Medical records must be included.
- **Coordination of benefits.** Attach primary insurer's explanation of benefits (EOB).
- **Proof of timely filing.** For electronically submitted claims, provide the second level of acceptance report.

Disputes may be submitted via the Availity Portal, called in to Provider Relations at **1-866-827-2710 (TTY: 711)** or mailed to:

Aetna Better Health of Maryland  
Claims and Resubmissions  
P.O. Box 61538  
Phoenix, AZ 85082-1538

## When to submit an appeal

An appeal is a request by a provider to appeal actions of the health plan when the provider:

- Has a request for a retro-authorization of service delivery denied or not acknowledged with reasonable promptness
- Has a claim that has been denied or paid differently than expected and was not resolved to the provider's satisfaction through the provider claim dispute process

*Appeals must be requested within ninety (90) business days from the date of retro-authorization*

*denial or the date of an adverse determination in the provider claim dispute process.*

Please include relevant claims information and any supporting documents (e.g., medical records). Appeals may be submitted via the Availity Portal, faxed to **1-844-312-4257**, sent via secure email to **mdappealsandgrievances@aetna.com** or mailed to:

Aetna Better Health of Maryland  
Attention: Appeals Department  
P.O. Box 81040, 5801 Postal Road  
Cleveland, OH 44181



managers educate members on their specific disease and how to prevent worsening of their illness or any complications. The goal is to maintain or improve their health status.

**The Care Management program provides services to the following populations, but is not limited to:**

- Pregnant and postpartum outreach
- High-risk pregnancy outreach
- Children with special health care needs
- Children in state-supervised care
- Individuals with a physical or developmental disability
- Behavioral health/ substance abuse
- Disease management of conditions such as asthma, diabetes, heart failure, COPD, sickle cell anemia, hepatitis C and HIV/AIDS

If you have concerns about one of your patients and would like to refer them to the Care Management program, call **1-866-827-2710 (TTY: 711)** and ask for the Care Management department or email the Care Management department at **AetnaBetterHealthMDCM@Aetna.com**.

## Integrated Care Management program

Our Care Management department provides support to members based on each individual's risks and unmet needs. These care needs are assessed by licensed nurses, social workers and counselors, as well as nonclinical professionals. We use a bio-psycho-social (BPS) model to help us identify what care our members need. The Care Management staff performs

a health risk assessment to determine the member's medical, behavioral health and bio-psycho-social needs.

Care managers work with the member, member's family, primary care provider, psychiatrist, substance use counselor and any other health care team member to achieve a quality-focused, cost-effective care plan. Care

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## How we make coverage decisions

Utilization management decision-making criteria can be found on our website, **AetnaBetterHealth.com/Maryland**. Or call **1-866-827-2710 (TTY: 711)** and request that a copy of the UM criteria be mailed to you. You can also call to request a free copy of any UM guideline, codes, records, benefit provision, protocol or document used to make a specific UM decision.

## What is vaccine confidence?

The Centers for Disease Control and Prevention (CDC) defines Vaccine Confidence as the trust that patients, parents or providers have in:

- Recommended vaccines
- Providers who administer vaccines
- Processes and policies that lead to vaccine development, licensure, manufacturing and recommendations for use<sup>1</sup>.

Aetna Better Health of Maryland understands how valuable our providers' recommendations are to our members. We encourage you to continue to have effective vaccine conversations with your patients to promote understanding and alleviate fears.

When you discuss issues of vaccine hesitancy with your patients, the CDC recommends starting from a place of empathy and understanding<sup>2</sup>. It may be safe to assume patients want to be vaccinated, but be prepared for questions. We encourage you to give your strong recommendation and address misinformation by sharing key facts. Lastly, listen to and respond to patient questions, as well as continue to proactively explain side effects. Our members, your patients, value your professional insight!

An important note: COVID-19 vaccines and other vaccines may now be administered without regard to timing. This includes simultaneous administration of COVID-19 vaccines and other vaccines on the same day, as well as co-administration within 14 days<sup>3</sup>.

<sup>1</sup><https://www.cdc.gov/vaccines/covid-19/vaccinate-with-confidence.html>

<sup>2</sup><https://www.cdc.gov/vaccines/covid-19/hcp/engaging-patients.html>

<sup>3</sup><https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html>



### Aetna Better Health formulary update

Aetna Better Health's pharmacy drug list is available on our website and contains the most recent changes to the formulary. It is updated on a monthly basis and can be accessed 24 hours a day, 7 days a week. Please visit [AetnaBetterHealth.com/Maryland/providers/pharmacy/drug-list](https://www.aetna.com/better-health/maryland/providers/pharmacy-drug-list) to see the latest version of the pharmacy drug list.

## Fraud, Waste and Abuse

Know the signs — and how to report an incident

Health care fraud means receiving benefits or services that are not approved. Fraud can be committed by a provider, member or employee. Abuse is doing something that results in needless costs. Waste goes beyond fraud and abuse. Activities that are considered fraud, waste and abuse by members, doctors or any health care professional hurt everyone. Most waste does not involve a violation of law.

You can learn more and report fraud, waste or abuse by going online at [AetnaBetterHealth.com/Maryland/fraud-abuse](https://www.aetna.com/betterhealth/maryland/fraud-abuse).

### **Nondiscrimination notice:**

This information can always be found on our website. Go to [AetnaBetterHealth.com/Maryland](https://www.aetna.com/betterhealth/maryland) to access it.



## Check out our website

[AetnaBetterHealth.com/Maryland](https://www.aetna.com/betterhealth/maryland)

What you can find:

- Information about member rights and responsibilities
- Provider handbook
- Provider directory
- Pharmacy/prescription and other health information
- Information about our Care Management program, utilization management program and our quality programs
- Clinical Practice Guidelines
- Affirmative Action and nondiscrimination information



If you do not have internet access, give us a call at **1-866-827-2710 (TTY: 711)** and we can send you a copy of the written information you need.

### Contact us



Aetna Better Health® of Maryland  
509 Progress Drive, Suite 117  
Linthicum, MD 21090-2256

**1-866-827-2710**

Hearing-impaired MD Relay: **711**

This newsletter is published as a community service for the providers of Aetna Better Health® of Maryland. HealthChoice is a program of the Maryland Department of Health. Models may be used in photos and illustrations.

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