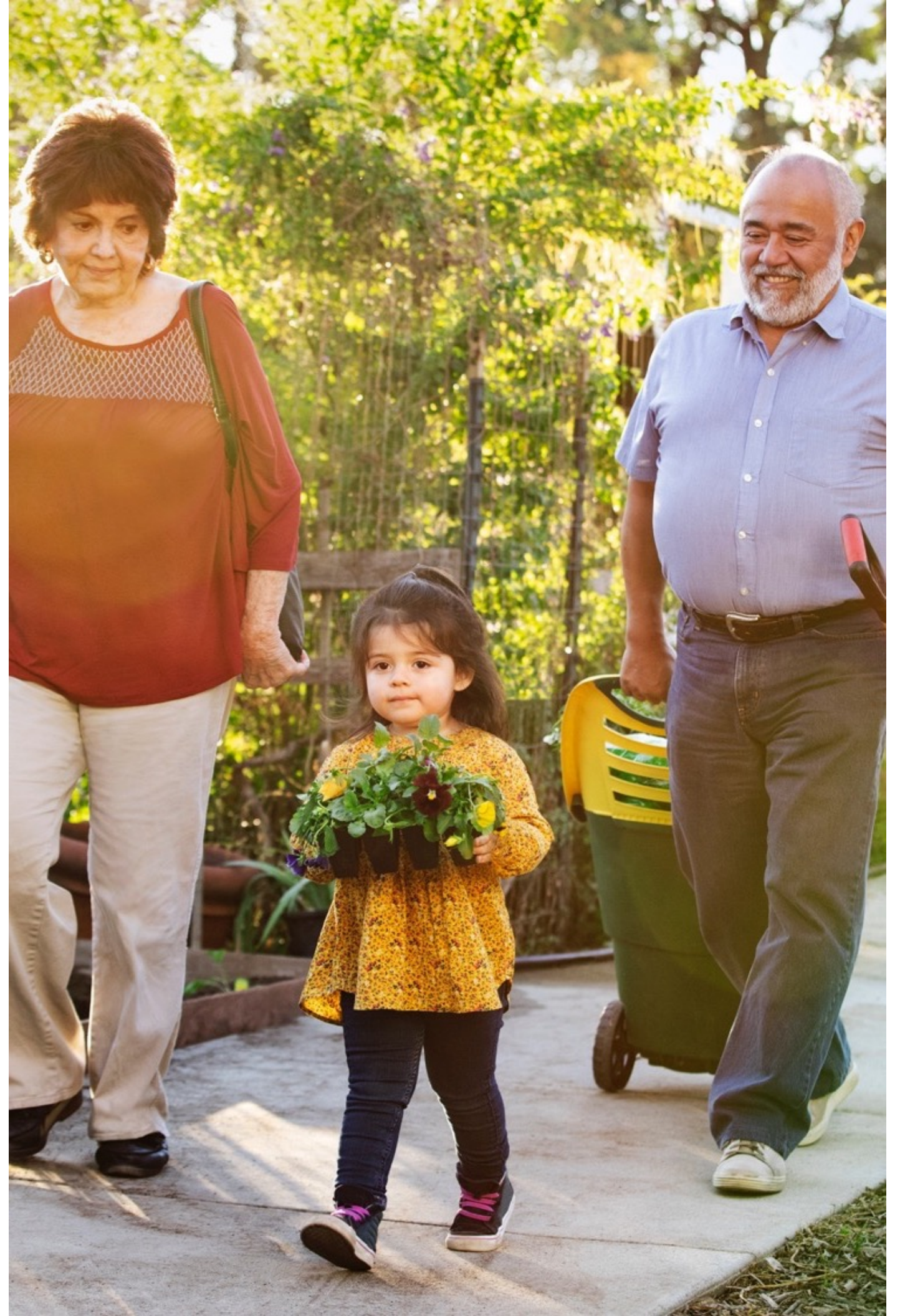


Aetna Assure Premier Plus (HMO D-SNP)

New Jersey Provider Overview



Aetna Assure Premier Plus (HMO D-SNP) Overview for Providers Agenda

- FIDE SNP Program Overview
- Comparison of D-SNP Product Types
- Plan Goals & Objectives
- Plan Service Area & Member Eligibility
- Plan Program Features
- Member ID Card
- Prior Authorizations
- FDR Requirement for Medicare Certified Providers
- Helpful Contacts
- Contracting with Aetna Assure Premier Plus (HMO D-SNP)
- Billing & Claims Information
- Secure Provider Portal Features
- Provider Site Resources

Aetna Assure Premier Plus (HMO D-SNP)

What is a FIDE SNP?

- Fully Integrated Dual Eligible Special Needs Plans (FIDE SNP) were created by Congress as part of the Affordable Care Act (ACA) in 2010 and permanently authorized in the Bipartisan Budget Act (BBA) of 2018 to promote full integration and coordination of Medicare and Medicaid benefits for dual eligible beneficiaries by a single managed care organization.
- FIDE SNPs must meet the following elements:
 - Enroll special needs individuals entitled to medical assistance under a Medicaid State Plan (full Medicaid Coverage – QMB+, FBDE, SLMB+),
 - Provide dually-eligible beneficiaries access to Medicare and Medicaid benefits under a single managed care organization (one single ID card),
 - Have a CMS approved MIPPA compliant contract with a State Medicaid Agency that includes coverage of specified primary, acute, and long-term care benefits and services,
 - Coordinate the delivery of covered Medicare and Medicaid health and long-term care services, using aligned care management and specialty care network methods for high-risk beneficiaries; and,
 - Employ policies and procedures approved by CMS and the State to coordinate or integrate enrollment, member materials, communications, grievance and appeals, and quality improvement.
- Other features include:
 - \$0 cost sharing for all plan services and prescription drugs with in-network providers
 - May include additional Medicare supplemental benefits to differentiate product in the market
 - Enrollment is voluntary
 - Eligible to receive additional Medicare payments depending on the overall frailty level of their enrollees
 - Beginning 2021; Implement unified appeals & grievance procedures per CMS new rules and templates

Aetna Assure Premier Plus (HMO D-SNP)

Differences Between MMP, D-SNP & FIDE SNP Dual Models

	MMP	D-SNP	FIDE SNP
Authorization	Demonstration	Permanent	Permanent
States, where plan is available	9	40	10
Number of plans (1/2020)	46	348	45
Enrollment (1/2018)	383,098	1,977,848	184,279
Contracting Structure	3-way contract	Separate Medicare and Medicaid contracts	Separate Medicare and Medicaid contracts
Level of Integration	High	Varies widely by state	High
Passive enrollment	Allowed	Allowed to maintain enrollment in integrated care	Allowed to maintain enrollment in integrated care
Sales	Not Allowed	Allowed	Allowed
States can share Medicare Savings	Yes	No	No

Report to the Congress: Medicare and the Health Care System." June 2019, Table 12-2, p.428. MedPac. Available at: http://www.medpac.gov/docs/default-source/reports/jun19_medpac_reporttocongress_sec.pdf?sfvrsn=0

Aetna Assure Premier Plus (HMO D-SNP) Overall Plan Goals & Objectives

Aetna aims to deliver a total connected approach to health that enhances people's lives every day.

Aetna proposes to accomplish this through the following objectives:

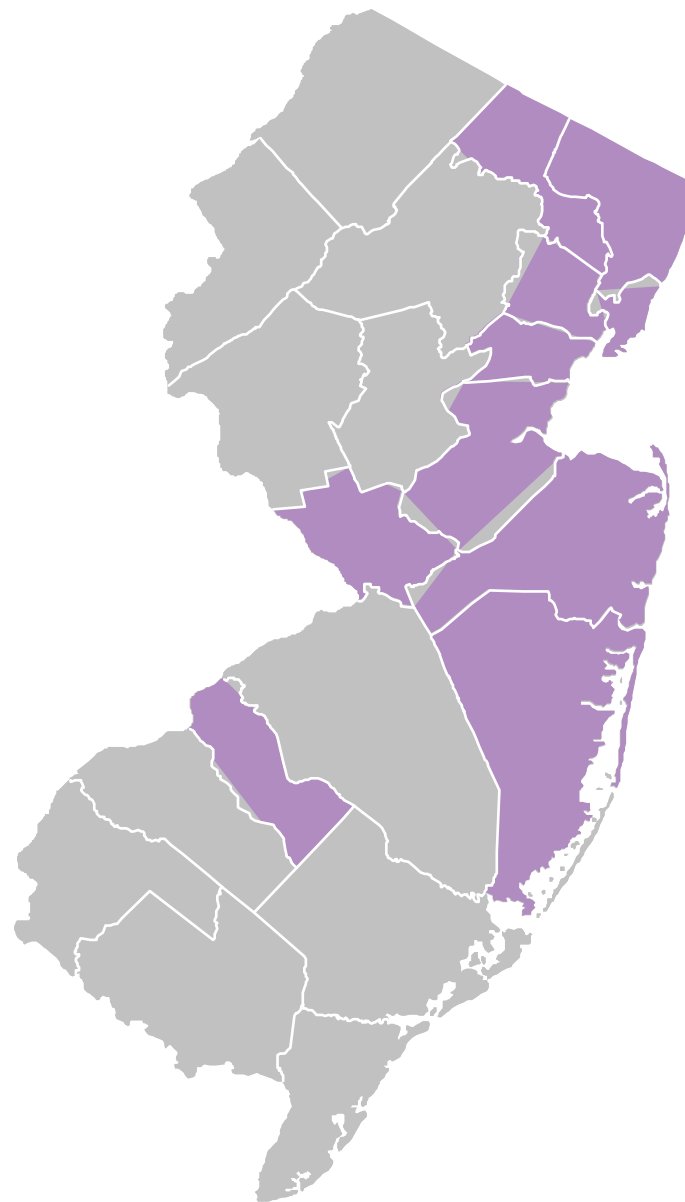
- ❖ Provide total health and wellness delivered by a product design that takes care of the whole person
- ❖ Connect members to products and services that allow the member to stay in their homes safely as long as possible
- ❖ Work with providers to identify opportunities for preventative care, resulting in better management of chronic conditions



Aetna Assure Premier Plus (HMO D-SNP) Plan Service Area & FIDE SNP Eligibility Requirements

New Jersey Aetna Assure Premier Plus (HMO D-SNP) 10 County Service Area

- Bergen
- Camden
- Essex
- Hudson
- Mercer
- Middlesex
- Monmouth
- Ocean
- Passaic
- Union



147,000

Dually eligible people reside in our
2021 FIDE SNP footprint.

Eligibility Requirements:

- Must have Medicare Part A and Part B coverage
- Must Reside in the plan's service area
- Must Have Full Medicaid/NJ FamilyCare coverage
- Must Qualify as a Qualified Medicare Beneficiary Plus (QMB plus) or Full Benefit Dual Eligible (FBDE)

Aetna Assure Premier Plus (HMO D-SNP) Plan Program Features

Benefit Package includes:

- All traditional Medicare benefits
- All traditional Medicaid benefits
- Long Term Services and Supports
- Behavioral Health Services

Aetna Assure Premier Plus (HMO D-SNP) offers additional benefits:



Silver Sneakers to access gyms at \$0 cost sharing



Telehealth thru MinuteClinic® Video Visits for non-urgent illness and conditions



\$210 for Over The Counter (OTC) catalog for health items every 3 months (does not roll over)

Vendors:

- Dental - LIBERTY
- Vision - March
- Pharmacy - CVS Caremark





Aetna Assure Premier Plus (HMO D-SNP) Plan Program Features

Member Benefits:

- ✓ **\$0 cost sharing** services and Rx Drugs when providers are in-network
- ✓ **One Card** covers all Medicare & Medicaid covered services, including Pharmacy Part D Benefits
- ✓ **Extra Aetna benefits** in addition to traditional Medicare or NJ FamilyCare benefits such as:
 - ✓ **Dedicated Care Manager** and Interdisciplinary Care Team
 - ✓ **Customized Plan of Care**, coordinating necessary services that align with our Model of Care

Aetna Assure Premier Plus (HMO D-SNP) One Member Card: Medicare, Medicaid & Pharmacy D

FRONT OF CARD

Aetna Assure Premier Plus (HMO D-SNP)			
Member Name:	<Cardholder Name>	PCP:	\$0 Copay
Member ID:	<Cardholder ID#>	Specialist:	\$0 Copay
Issue Date:	<Issue Date>	Emergency Room:	\$0 Copay
Issuer:	80840	Urgent Care:	\$0 Copay
RxBIN:	61052	Dental:	\$0 Copay
RxPCN:	MEDDAET		
RxGrp:	RXAETD		
PCP Name:	<PCP Name>	H6399-001	
PCP Phone:	<PCP Phone>		

BACK OF CARD

Important Information: In case of an emergency, call 911 or go to the nearest emergency room (ER). Prior authorization is not required for emergency services.

For Members

Member Services:	1-844-362-0934 (TTY: 711)
Behavioral Health Crisis:	1-844-362-0934 (TTY: 711)
Care Management:	1-844-362-0934 (TTY: 711)
24-Hour Nurse Advice:	1-844-362-0934 (TTY: 711)
Dental Services:	1-844-362-0934 (TTY: 711)
Website:	AetnaBetterHealth.com/New-Jersey-hmosnp

For Providers

Medical	Pharmacy
Eligibility Verification: 1-844-362-0934 (TTY: 711)	Pharmacy Help Desk: 1-800-238-6279 (TTY: 711)
Prior Authorization: 1-844-362-0934 (TTY: 711)	Claim Inquiry: 1-844-362-0934 (TTY: 711)

Submit claims to:
Aetna Assure Premier Plus (HMO D-SNP)
P.O. Box 61925
Phoenix, AZ 85082-1925

Aetna Assure Premier Plus (HMO D-SNP) Prior Authorization

Ways to request a Prior Auth:

- Secure Provider Portal: www.aetnabetterhealth.com/new-jersey-hmosnp click 'Provider Site' in the upper righthand corner. *You can also check the status of any Prior Authorization request submitted thru the portal thru the Secure Provider Portal*
- Fax Form: Print Prior Authorization form located at www.aetnabetterhealth.com/new-jersey-hmosnp click 'Provider Site' in the upper righthand corner, and fax to: 1-833-322-0034
- Call Utilization Management: Call the Aetna Assure Premier Plus (HMO D-SNP) Prior Authorization Department at 1-844-362-0934

Aetna Assure Premier Plus (HMO D-SNP)

Prior Authorization

Decision	Decision/Notification Timeframe
Urgent pre-service approval	Seventy-two (72) hours from receipt of request
Urgent pre-service denial	Seventy-two (72) hours from receipt of request
Non-urgent pre-service approval	Fourteen (14) calendar days from receipt of the request
Non-urgent pre-service denial	Fourteen (14) calendar days from receipt of the request
Urgent concurrent approval	Seventy-two (72) hours of receipt of request
Urgent concurrent denial	Seventy-two (72) hours of receipt of request
Post-service approval	Thirty (30) calendar days from receipt of the request
Post-service denial	Thirty (30) calendar days from receipt of the request

Aetna Assure Premier Plus (HMO D-SNP) FDR Requirement for Medicare Certified Providers

- If you are a participating provider in our network, and you have not already done so, you and your staff must complete the Medicare Compliance FDR Attestation.

<https://www.aetna.com/health-care-professionals/medicare.html>

- Please see link provided for more information on First Tier, Downstream and Related Entities (FDR) Medicare Compliance Program Guide.

<http://www.aetna.com/healthcare-professionals/fdr/medicare-compliance-program-guide.pdf>

Aetna Assure Premier Plus (HMO D-SNP)

Helpful Contacts for Providers

- **Health Plan Administration:** 1-844-362-0934
- *For Vision, Dental, Transportation, and Behavioral questions, please call the Health Plan directly and select the corresponding option.*
- **Prior Authorization:** 1-844-362-0934
- **Claim Inquiry:** 1-844-362-0934
- **CVS (Pharmacy):** 1-800-238-6279
- **Change Healthcare:** 1-800-845-6592

Aetna Assure Premier Plus (HMO D-SNP) Contracting Information

Medicare Certified Providers

- If you are already participating with the HMO Medicare Advantage program and are within the 10-county service area for Aetna Assure Premier Plus (HMO D-SNP), there is no need to sign up as you will automatically be placed in our system.
- If you are interested in applying for participation in our Medicare network, please visit the Medicare website at <https://www.aetna.com/health-care-professionals/join-the-aetna-network.html> and complete the Provider online request form. If you would like to speak to a representative, please contact 1-800-624-0756.

Medicaid-Only Providers

- If you are a provider billing for Medicaid-only covered services within the 10-county service area for Aetna Assure Premier Plus (HMO D-SNP), and would like to join our network, call us at 1-855-232-3596 or send us an email at AetnaBetterHealth-NJ-ProviderServices@aetna.com



Aetna Assure Premier Plus (HMO D-SNP) Billing & Claims Information

Claim Submission Methods

1. Electronic Claims thru Provider's Own Clearinghouse.

- Before submitting a claim through your clearinghouse, please ensure that your clearinghouse is compatible with Change Healthcare, using 837 file format.
- Please use Submitter ID #46320 when submitting electronic claims.

2. Paper claims

- Mail to:

Aetna Assure Premier Plus (HMO D-SNP)
PO Box 61925
Phoenix, AZ 85082

Aetna Assure Premier Plus (HMO D-SNP) Billing & Claims Information

To best ensure timely and accurate payment of your claim, submit a “clean claim”.

A “clean claim” is a claim that can be processed without obtaining additional information from the provider of a service from a third party.

Clean claims are processed according to the following timeframes:

- 90% of clean EDI claims adjudicated within **30 days** of receipt
- 99% of clean paper claims adjudicated within **90 days** of receipt



Aetna Assure Premier Plus (HMO D-SNP) Billing & Claims Information

Claim numbers are assigned using the year and then the Julian date.

- For example, 21001 at the beginning of a claim would indicate that claim was received on the First day of 2021.
- A claim beginning with 21365 would indicate that claim was received on the last day of 2021.

Claim Indicators

- A claim with an “S” indicates it’s the secondary processing (Medicaid) but only if we also processed the Medicare claim within .
- “A” indicates an adjusted claim, while “R” indicates a reversal. Example: 21001E999999A1.

Aetna Assure Premier Plus (HMO D-SNP) Secure Provider Portal Features

HIPAA-compliant web portal is available 24 hours a day. The portal supports the functions and access to information related to:

- Participating Provider Claims Disputes
- Enrollees Eligibility Search
- Panel Roster
- Claims Status Search
- Remittance Advice Search
- Provider Prior Authorization Look up Tool –
 - The tool will also allow providers to: Search Prior Authorization requirements by individual or multiple Current Procedural Terminology/ Healthcare Common Procedure Coding System (CPT/HCPCS) codes simultaneously

Aetna Assure Premier Plus (HMO D-SNP) Secure Provider Portal Features

- This is an example of our Secure Provider Portal.
- Contracted providers can sign up for this self-service site online or using a paper registration form.
- Different levels of access can be assigned to designated staff using different roles.
- Under the “Tasks” menu, providers can review member eligibility, review and submit authorizations, review claims status & payment, and remittances.

The screenshot displays the Aetna Assure Premier Plus (HMO D-SNP) Secure Provider Portal. The interface includes a top navigation bar with links for Home, My Account, Tasks, and Administration. A secondary navigation bar contains Home, Help, FAQ, and Sign Out. The main content area features the Aetna logo and the text "Aetna Assure Premier Plus (HMO D-SNP)". Below the logo, there are sections for "News feed" and "Messages". The "Messages" section indicates "You have 0 Message(s) in your Inbox." A "Resources" section on the right lists links for "Provider Documents", "Find A Provider", "Find A Pharmacy", "Ohio Department of Medicaid", and "Centers for Medicare and Medicaid Services". A footer section contains a "My Account" menu with a large purple arrow pointing to it, and other sections for "Tasks", "Administration", "Health Tools", and "Important Links".

Home | Help | FAQ | Sign Out

Home | My Account | Tasks | Administration

Hello

aetnaTM
Aetna Assure Premier Plus (HMO D-SNP)

Welcome to your secure benefits center

Update Message

News feed

Update News

Messages

You have [0 Message\(s\)](#) in your Inbox.

Resources

[Provider Documents](#)

[Find A Provider](#)

[Find A Pharmacy](#)

[Ohio Department of Medicaid](#)

[Centers for Medicare and Medicaid Services](#)

Download the latest version of Adobe Acrobat Reader [click here.](#)

Select another Health Plan's Medicaid Web Portal

My Account →

Tasks

- Authorization Search
- Claims Search
- Search Remittances
- Search Members
- Panel Roster
- Search Providers

Administration

- User List
- Add Users
- Activity Report
- User Report
- Assign Inbox Roles
- Add Associated Providers
- User Roles

Health Tools

Important Links

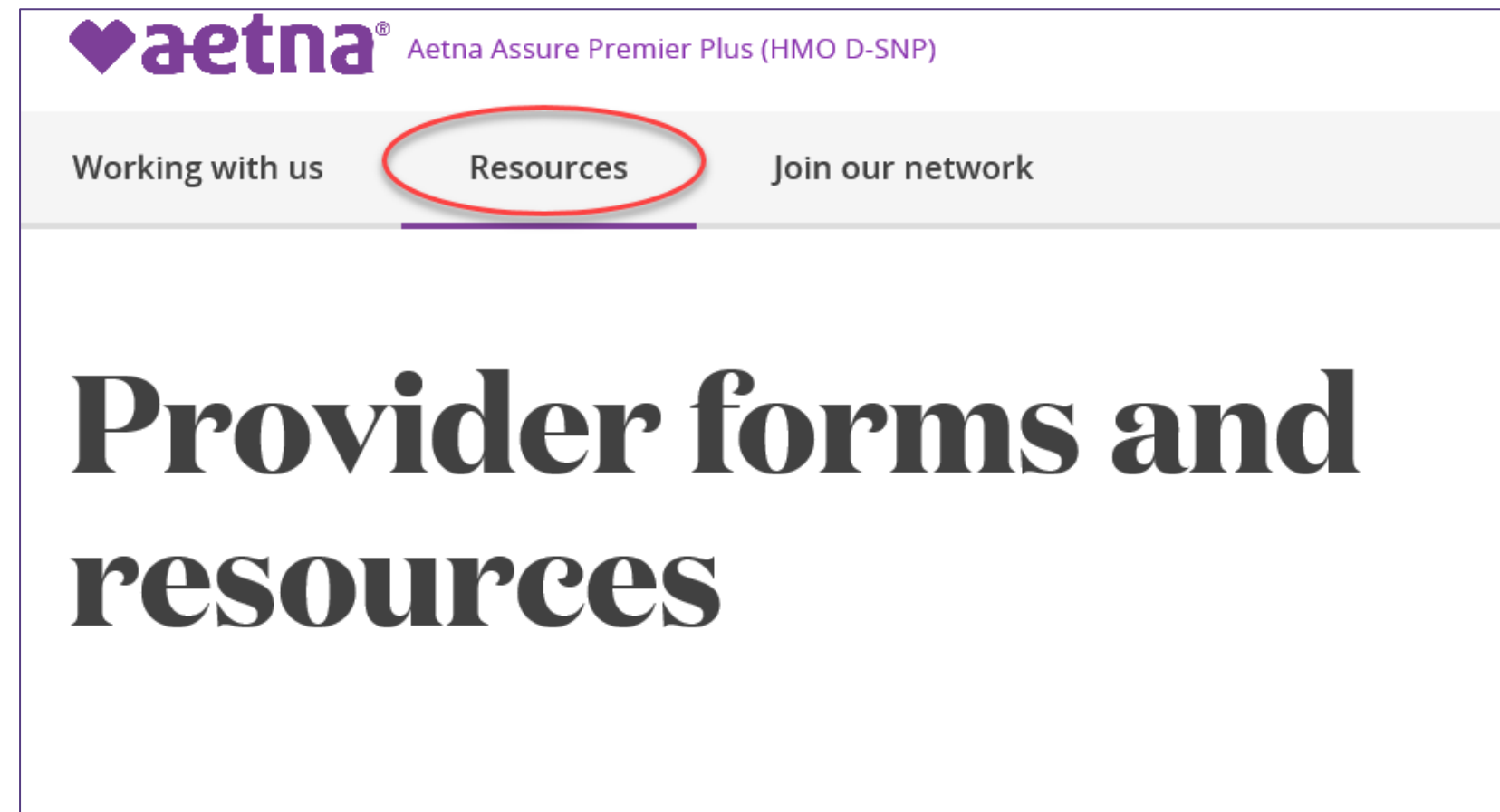
- Authorization Submission User Guide
- FAQ
- Disclaimer
- Sitemap
- Referrals and Authorizations

Aetna Assure Premier Plus (HMO D-SNP) Provider Site Resources

Providers can find all of their resources in one central location on our website at:
www.aetnabetterhealth.com/new-jersey-hmosnp/providers/

Resources Available here include:

- ✓ Provider Handbook
- ✓ Provider Orientation Kit
- ✓ Model of Care Training
- ✓ Portal Registration Form & Instructions
- ✓ Prior Authorization Forms
- ✓ Prior Authorization Criteria
- ✓ Claims Submission Information
- ✓ Claims Submission Portal
- ✓ Dental Forms Tools
- ✓ List of Covered Drugs (Formulary)
- ✓ Dispute Form
- ✓ EFT Form



Questions?



Thank You

aetna[®]

