



Aetna Better Health[®] of New Jersey

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Provider Newsletter

Fall 2026

Behavioral Health Benefit Changes

Starting January 1, 2027, the following services will be covered through Aetna Better Health of New Jersey as part of NJ FamilyCare benefits:

- Substance use disorder short-term residential services
- Substance use disorder long-term residential services
- Non-hospital-based withdrawal management or detoxification in a residential setting
- Opioid treatment program services

These services have previously been covered by Fee-For-Service Medicaid for most NJ FamilyCare/Medicaid members, and Aetna Better Health of New Jersey did not have direct contact with the Provider. This change builds upon NJ FamilyCare's effort to coordinate physical health and behavioral health services through one health plan. This effort began on January 1, 2025, when certain outpatient mental health and substance use disorder services moved to NJ FamilyCare health plans.

Help us keep our Provider Directory accurate

If you notice incorrect or outdated information, please submit a correction request using the [Report incorrect info form](#). Thank you for helping us maintain accurate provider information for our members and community partners.



Aetna Better Health
of New Jersey

Member Language Profile: Understanding Our Members' Communication Needs

Communication and language barriers are associated with inadequate quality of care and poor clinical outcomes, such as higher hospital readmission rates and reduced medication adherence. People with limited English proficiency or those who experience limited vision or hearing may need an interpreter, and those with vision impairment may need materials presented in alternative formats while receiving care in order to ensure equitable care.

Primary language is reported by members upon enrollment. While most our members' primary languages are Unknown (56.13%), 32% are English-speaking followed by Spanish at 7%.

	Top Ten Languages Reported at Enrollment	2025	
		#	% of Membership
1	ENGLISH	36,579	31.97%
2	SPANISH	8,012	7.00%
3	HAITIANCREOLE	287	0.25%
4	PORTUGUESE	196	0.17%
5	ARABIC	195	0.17%
6	TURKISH	161	0.14%
7	RUSSIAN	146	0.13%
8	MANDARIN	144	0.13%
9	GUJARATI	114	0.10%
10	FRENCH	102	0.9%
	NOT REPORTED	3,432	3.25%
	UNKNOWN	64,219	56.13%

To assist with translation and interpretation services, you or the member can call our Interpretation Services at **1-800-385-4104 (TTY: 711)**.

For more information on our member demographics, please see Aetna Better Health of New Jersey's 2025 Population Assessment found on [Availity](#).

Clinical Education Hub

We've created a [clinical educational hub](#) for you that features courses on health equity and related topics. The hub provides resources and activities to empower you with the knowledge and tools you need for everyday interactions with your patients. You can access these free accredited courses on demand to earn digital badges in:

- Culturally Responsive Care
- LGBTQ+ Responsive Care
- Culturally Responsive Behavioral Health Care
- Person-Centered Care Champion
- Healthy Aging Care Champion
- Women's Health Care Champion

Family Planning

This article outlines the expectations of participating health care providers related to family planning services and minors' rights to consent and confidentiality.

Please note this article relates to expectations under participating provider contracts with Aetna Better Health of New Jersey and is not legal or compliance advice.

In accordance with maintaining and implementing our Quality Assessment and Performance (QAPI) program, participating health care providers must:

- Maintain medical records in a current, detailed, organized and comprehensive manner in accordance with customary medical practice, applicable laws, and accreditation standards.
 - Establish a policy/procedure for *managing minor patients' right to consent and confidentiality related to family planning*.
 - Provide a copy of this policy/procedure to Aetna Better Health® of New Jersey for audit purposes and upon request.

The below summarizes the expectations of participating providers under state law:

- Health care providers, that manage health needs of minors, must comply with state laws that govern the right to consent and privacy for minors.
- Minors in the state of NJ have the right to provide consent for:
 - Contraceptives/family planning: with limitations
 - STI care
 - HIV/AIDS care
 - Pregnancy care
 - Mental health outpatient care
 - Alcohol/drug abuse treatment
 - Sexual Assault treatment/examination
- For treatments that minors have a right to provide consent, health care providers are permitted, but not required, to inform the parents/guardians of a minor. Special standards on disclosure include the following:
 - HIV/AIDS: confidential and may only be disclosed with written informed consent of the minor.
 - Mental health information: mental health professionals are limited in disclosing certain information to parents or others without a minor's consent.
 - Drug/alcohol: confidential information between health care provider and minor patient.
 - Sexual assault: parents or guardian must be notified immediately, unless the medical provider feels disclosure would not be in the minor patient's best interest.

CCP - The Contraceptive Care

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Measure description: Postpartum Women measure (CCP) looks at women ages 15 to 44 who had a live birth, and among those, the percentage that:

1. Were provided a most effective or moderately effective method of contraception within 3 and 60 days of delivery.
2. Were provided a long-acting reversible method of contraception (LARC) within 3 and 60 days of delivery.

The first rate is an intermediate outcome measure, and it is desirable to have a high percentage of women who are provided the most effective or moderately effective contraceptive methods during the postpartum period. The second rate is an access measure, and the focus is on making sure that women have access to LARC methods during the postpartum period.

These rates are reported at two points in time: contraceptive provision within 3 days of delivery is used to monitor the provision of contraception in the immediate postpartum period, while contraceptive provision within 60 days of delivery is used to monitor the provision of contraception throughout the postpartum period.

Clinical Policy Bulletins

Clinical Policy Bulletins state our policy about the medical necessity or investigational status of medical technologies and other services to help with coverage decisions. A national review team creates the bulletins and bases them on:

- Published medical literature
- Formal technology assessments
- Structured evidence reviews
- Evidence-based consensus statements
- Expert opinions
- Evidence-based guidelines from professional and public health entities

[Aetna[®] clinical policy bulletins](#) | [Aetna medical clinical policy bulletins](#)



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Role of Primary Care Providers (PCPs) in Dental Care

Primary Care Providers (PCPs) are essential in promoting dental health. They perform basic oral screenings, remind members of the need for two annual preventive dental visits, and conduct yearly cavity assessments for children up to age twenty. PCPs should refer children to a dentist by age one or soon after their first primary tooth erupts. Coordination between behavioral and physical health providers is crucial for accurate diagnosis and treatment of behavioral disorders, ensuring appropriate use of psychotropic medications.

PCPs are encouraged to apply fluoride varnish, perform dental assessments, and promote routine oral health visits. These services can be billed up to four times a year with a CPT code, separate from dental services.

After medical visits, PCPs should refer patients to their dental home, listed on their Aetna Better Health® of New Jersey dental ID card.

Prescribing Opioids



Research shows that opioids are not always the best pain relief options for chronic pain. Safer alternatives that don't use opioids should always be tried if possible.

Our Prior Authorization process assures that, when they are needed, current treatment recommendations are being used. [All Long-Acting opioids require Prior Authorization, review our guides for more information.](#)

All Short Acting opiates in New Jersey have a five-day supply limit for members 18 years and older or a three-day supply limit for members less than 18 years of age. In addition, all opiates are limited to a 90 Morphine Equivalent Dosing (MED) per day. Members with pain due to active cancer, palliative care, or end-of-life care are exempt from these requirements. Evidence of a treatment plan, risk assessment and counseling must be submitted along with a completed Opioid Prior Authorization (PA) form. Visit [our website](#) to download prior authorization form.

Updated Preventive Screening Recommendations

As part of our commitment to delivering high-quality care and ensuring the health and well-being of our members, we would like to inform you of important updates to the preventive screening recommendations based on the latest guidelines from the Centers for Disease Control and Prevention (CDC). These screenings are essential for early detection and prevention of various health conditions, and we encourage you to integrate these recommendations into your practice.

1. Pap Smear (PN)
 - a. Age Group: 50 and up
 - b. Recommendation: Women aged 50 and older should continue to receive regular Pap smears as part of cervical cancer screening. The frequency of screening may vary based on individual health history and previous results.
2. Zoster Vaccine
 - a. Age Group: 50 and up
 - b. Recommendation: The CDC recommends that adults aged 50 and older receive the shingles vaccine (Zoster) to reduce the risk of shingles and its complications.
3. Mammogram
 - a. Age Group: 40 to 74
 - b. Recommendation: Women aged 40 to 74 should have regular mammograms to screen for breast cancer. The frequency of screening may depend on individual risk factors and previous mammogram results.
4. Colonoscopy
 - a. Age Group: 45 to 75
 - b. Recommendation: Adults aged 45 to 75 should undergo regular colon cancer screenings, including colonoscopy, to detect any abnormalities early. This is especially important for those with a family history of colorectal cancer.
5. Prostate Screening
 - a. Age Group: 55 to 69
 - b. Recommendation: Men aged 55 to 69 should discuss prostate cancer screening with their healthcare provider. Shared decision-making is encouraged to determine the best approach based on individual risk factors.

Action Steps for Providers:

- Review Patient Records: Assess your patient population to identify individuals who are due for these preventive screenings based on the updated age guidelines.
- Educate Patients: Discuss the importance of these screenings with your patients, addressing any concerns they may have and emphasizing the role of early detection in improving health outcomes.



Aetna Better Health®
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Availity Provider Portal

Availity is the Provider Portal for Aetna Better Health of New Jersey. Providers can register for access directly on the [Availity Website](#):

Current functionality of the Medicaid Web Portal has parallel functionality on Availity, including:

- Payer Spaces
- ProPAT
- Change Healthcare Claim Submission Link
- Provider Intake
- Contact Us & Messaging
- Dynamo (Case Management)
- Claim Status Inquiry
- Prior Authorization submission and status lookup
- Grievance Submission
- Eligibility & Benefits
- Appeals Submission
- Enhanced G&A tool
- Grievance and Appeals Status
- Panel Roster
- Provider Deliverable Manager
- Remit PDF
- Ambient (Business Intelligence Reporting)
- Enhanced (electronic) Remit Viewer
- Clear Claim
- Utilization management decision-making criteria

Login, Registration, and Assistance Links

If already registered in Availity, providers can log in and select Aetna Better Health from their list of payers to access the portal and features listed above.

If you have not already registered, now may be a good time to complete registration. Helpful registration resources are provided below:

- Register for Availity www.availity.com/provider-portal-registration
Availity Client Services 1-800-282-4548 (Monday – Friday, 8am – 8pm EST)



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Follow-Up on Missed Appointments: Supporting Member Care

Aetna Better Health of New Jersey reminds providers of the importance of having a documented process for following up with members who miss scheduled appointments, including appointments and referrals identified through EPSDT screenings.

Providers should make reasonable and documented outreach efforts to engage members who miss appointments. Maintaining a policy and documenting outreach activities helps support continuity of care, improves health outcomes, and ensures compliance with state requirements. During medical record audits, providers may be asked to demonstrate their process for following up on missed appointments and the outreach efforts made to re-engage members in care.

Diabetes Care: Working Together to Improve Member

Diabetes continues to be one of the most common chronic conditions affecting our members. Regular monitoring, preventive screenings, and ongoing member engagement can help reduce complications and improve health outcomes. Providers play a critical role in encouraging members to complete recommended services, including A1C testing, retinal eye exams, kidney health monitoring, blood pressure management, and routine follow-up visits.

Aetna Better Health of New Jersey encourages providers to use every member encounter as an opportunity to reinforce the importance of diabetes self-management, medication adherence, healthy lifestyle choices, and preventive care. Timely outreach to members who are overdue for services can help close care gaps and support better long-term health outcomes. Thank you for your partnership in helping our members manage their diabetes and achieve their health goals.