Aetna Better Health® of Pennsylvania Aetna Better Health® Kids

Provider Newsletter

WINTER/SPRING 2019



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Claim Submissions Must Include a Taxonomy Code

DHS requires all Medicaid and CHIP providers to have a PROMISe ID for EACH location where you see Medicaid and CHIP patients. Effective immediately, providers billing CMS1500/837P and UB-04/837I submissions for Medicaid/CHIP patients enrolled in with Aetna Better Health of Pennsylvania will be required to bill with the appropriate taxonomy code for rendering, attending and billing providers.

Provider rendering, attending and billing information

Providers should select the taxonomy that best describes the service rendered to the enrollee and be within the scope of licensure for the provider performing the service. Refer to the provider notice on our <u>Provider Notices</u> page for more information.







Lead screening requirements

Lead Screening is an important component of early childhood preventive care. Children from ages 9-11 months and 24 months should receive blood lead screenings. Providers are required to screen children between the ages of 36 and 72 months of age if they have not been previously screened for lead poisoning.

The CDC indicates that there is no safe level of lead in children; and advises that a provider offer education related to preventing lead exposure to families with young children. Providers should manage the condition of a child who is found to have an elevated Blood Lead Level (BLL) that is greater than or equal to 5 μg/dl. Management should include follow-up blood tests and consideration of possible sources of contamination including housing, food, and toys.

Ordering an ELI

For children identified with an elevated blood lead level, a provider should submit a request for an approved Environmental Lead Investigator (ELI) provider to conduct a comprehensive environmental lead investigation.

Comprehensive environmental lead investigation will include:

- · Analysis by use of portable x-ray fluorescence analyzer on all painted surfaces,
- An interview with the family of the child to gather basic information about the habits of the child
- · Written recommendations to the owner of the house/apartment for the immediate and permanent removal or reduction of the lead sources.

The ELI provider must be participating with Aetna Better Health of Pennsylvania and/or Aetna Better Health Kids. Only one ELI is authorized per household.

If an Environmental Lead Investigation (ELI) is needed, an ordering physician can just call our Utilization Management Department (UM) at 1-866-638-1232 to request an authorization and give you our network ELI provider information.



Welcome SKYGEN USA

We now have a new DBM for Aetna Better Health Kids and Aetna Better Health of Pennsylvania. Effective December 1, 2018 for Aetna Better Health Kids (CHIP) and January 1, 2019 for Aetna Better Health of Pennsylvania (Medicaid), SKYGEN USA administers our dental member benefits. You can reach SKYGEN USA by calling provider services at 1-800-508-4892 or 1-866-638-1232.



Recent Provider **Notices**

Stay up to date with our recent provider notices.

Check our **NOTICES** page often to stay up to date with changes that may affect you.



Network 🙎 🙎 Development Update

Welcome to our provider network!

We are excited that our provider network continues to grow. Below are some of the provider groups we have recently added:

- · Good Shepherd Rehab Hospital
- UPMC Magee-Womens Hospital
- UPMC Presbyterian
- UPMC Shadyside
- · Coordinated Health
- · Western Maryland Health System

This growth means more choices for our members. We have added providers in specific areas across the Commonwealth. They'll have even more choices of physicians in these areas.



We would like to remind all providers of the correct mailing addresses and fax numbers for claims and provider appeals. To avoid processing delays, please check your records to ensure you are only using the addresses below.

Claims and Corrected Claims Address

Claims and Corrected Claims should be mailed to the following. All submission to the claims department must include a claim form.

Aetna Better Health of Pennsylvania Attn: Claims PO Box 62198 Phoenix, AZ 85082-2198

Provider Appeals Address

Provider Appeals should be mailed or faxed to the following. All appeals must include a letter or appeal form describing the reason for the appeal.

Aetna Better Health of Pennsylvania Attn: Appeals Dept. 2000 Market Street, Suite 850 Philadelphia, PA 19103 Fax: 1-860-754-1757



PROMISe ID Enrollment to be Required at All Service Locations

Effective July 1, 2019, as required by the Affordable Care Act (ACA) and DHS, all Medicaid and CHIP providers who render services for Medicaid or CHIP beneficiaries, must be enrolled with DHS and have a valid PROMISe Identification Number (PROMISe ID) for each service location at which a provider **operates**. DHS uses the National Provider Identification (NPI) number and taxonomy submitted on claims to validate the enrollment of providers in PROMISe.

Additionally, Aetna Better Health requires all participating Medicaid and CHIP providers contracted with Aetna Better Health who provide services for Medicaid or CHIP beneficiaries and who have not yet enrolled, to promptly enroll with the state of Pennsylvania PROMISe for **all service locations** as soon as possible.

If you need to verify if you are enrolled in PROMISe at all service locations, you can access the DHS online portal at: https://promise.dpw.state.pa.us/portal/Default.aspx?alias=promise.dpw.state.pa.us/ portal/provider

Beginning July 1, 2019 Aetna Better Health will deny claims submitted if an Aetna Better Health contracted Medicaid or CHIP provider has not enrolled in PROMISe at EACH SERVICE LOCATION.

For a copy of the complete DHS notice regarding the enrollment requirement and process, visit http://www.dhs.pa.gov/cs/groups/webcontent/documents/bulletin_admin/c_284208.pdf.

If you have questions regarding this enrollment requirement notice please call Aetna Better Health Provider Relations at 1-866-638-1232.



PA's Governor Wolf Meets With Aetna Better Health COO During Budget Tour



"This program changed my life!" are the words Pennsylvania Governor Tom Wolf heard most often when he visited Misericordia University's Ruth Matthews Bourger Women with Children (WWC) program as part of his budget tour. During the visit, the Governor met with current and former participants of the program to listen to their stories and thoughts about what they want for their future. The Governor also spoke to some of the members of the Advisory Board including Stephanie Ledesma, Aetna Better Health of Pennsylvania Chief Operating Officer.



Pennsylvania 30-Day Readmission Rule Reminder

Aetna Better Health follows the Commonwealth of Pennsylvania guidelines for hospital readmissions. Beginning **September 1, 2016** if an inpatient stay for readmission within 30 days of the first stay for the same diagnosis is denied, we will inform you that the authorization is denied for readmission and the previously approved authorization will be updated to cover the 2nd stay. The facility should **submit a corrected claim using bill type 117** and combine both inpatient stays on a single claim.

Please refer to the **provider notice** on the Aetna Better Health website for additional information about claim submission guidelines for readmissions.

If a formal appeal is needed, please include admission records for both inpatient stays.



2019 HEDIS Webinar Series

You're invited to attend our free HEDIS webinar series.

The goal of the series is to:

- Educate about HEDIS measure specifics
- Explore ways to reduce the burden of medical record review and maximize administrative data capture
- Present NCQA HEDIS reporting codes that will help effectively capture care provided
- Discuss HEDIS measures applicable to certain populations
- Encourage open discussion to learn how other providers are addressing HEDIS and barriers to care
- Strategies for improvement
- Connect you with a single point of contact at the health plan for HEDIS/ Quality questions

Be sure to check your inbox for monthly invites and class registration information.

Please cascade this information to other staff that may benefit from these free webinars.



Please email Madison (<u>MRYonlisky@aetna.com</u>) to be added to the invite list.



To View Previously Recorded HEDIS® Webinar Series Videos

You can watch the January – December 2018 webinars webinars to learn how you can improve HEDIS rates and member health outcomes:

The 2019 Webinar series is also being recorded starting this month. New videos coming soon! Also, you can download a copy of the presentation.

https://www.aetnabetterhealth.com/what/videos

If one of your staff or colleagues wishes to be added to the upcoming webinar invite list please email Madison - MRYonlisky@aetna.com Include in your email to Madison the email address of the person wishing to be added to the invite list. She will email the meeting link.

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January 2019

The early stages of the life cycle – EPSDT and HEDIS, 0-11 year old members

February 2019

The teenage years up to age 21 – HEDIS measures, and a focus on maximizing administrative data capture

March 2019

An in depth look at Aetna's 21 and older male and female membership

April 2019

HEDIS measures with a focus on women and maternity care

May 2019

Caring for members with serious mental illness or serious emotional disturbance

June 2019

Takeaways from the 2018 HEDIS medical record review

July 2019

Coding specific topic: Closing HEDIS gaps administratively cuts down on medical record review

August 2019

Back to school physicals and HEDIS measures for children under 11 years of age and EPSDT

September 2019

Back to school physicals – HEDIS measures affecting 12-21 year old members

October 2019

HEDIS measures affecting 21 and older male and female members

November 2019

HEDIS measures with a focus on women and maternity care

December 2019

Reducing the burden of medical record review preparation for HEDIS 2020

Antiretroviral Medications: Diagnosis Confirmation Requirement Effective April 1, 2019

Effective **4/1/2019**, Aetna Better Health® of Pennsylvania will require confirmation of an HIV diagnosis for antiretroviral medications. This requirement **does not apply to Pre-Exposure Prophylaxis (PrEP)** for HIV (e.g. Truvada®).

In an effort to streamline the process, we are implementing point-of-sale (POS) edits to allow antiretroviral prescriptions to automatically process at the pharmacy if we already have a diagnosis on file. Alternatively, the pharmacist will also be able to confirm your patient's diagnosis by entering the ICD-10 in the pharmacy system. **We strongly encourage you to provide an ICD-10 code on the prescription to assist the pharmacist** in the processing of your patient's prescription **and avoid a rejection for prior authorization**. For your reference, a list of the covered ICD-10 codes is included below*

MEDICATION(S)/DRUG CLASS COVERAGE GUIDELINE		
Antiretrovirals (does not include Truvada®)	Diagnosis* confirmation needed	

Submitting a Pharmacy Prior Authorization

Please submit any Prior Authorization (PA) requests to the **Pharmacy Prior Authorization Department:**

- · Via phone at **1-866-638-1232** or;
- Electronically online at https://www.covermymeds.com/main or;
- · Via Fax at 1-877-309-8077

See the <u>Provider Notice</u> for a complete list of codes.

If you have any questions, please contact the pharmacy call center at 1-866-638-1232.



Complying with Medical Records Requests

Contractually, participating practitioners and providers agree to maintain medical records in a current, detailed, organized and comprehensive manner in accordance with customary medical practice, applicable laws and accreditation standards. Medical records should be easily retrievable but remain secure and only accessible by authorized personnel.

Our contract with practitioners/providers includes a provision informing practitioners/providers of the requirement that regulatory bodies and Aetna Better Health/Aetna Better Health Kids have access to member/enrollees' medical records.

This is particularly important when we are seeking additional information that may not be found in claims to support our quality efforts to continually improve the health and outcomes for our membership.

We ask that you be mindful of requests for medical records and provide timely access to those needed in support of our commitment to data collection and analysis to improve rates such as care for women who are pregnant, EPSDT, immunizations and to support HEDIS and state required performance measures.

Claims Inquiry/ Claims Research Team

Our claims inquiry/claims research team (CICR) will assist you with all claims issues, including:

- Appeals/reconsiderations
- Billing and coding clarification
- Check tracers
- Coordination of benefits (COB) concerns
- Data entry errors
- · Claim denials
- Eligibility issues

- Incorrect claim payment
- Pay-to issues
- Prior authorization
- Remittance advice/ negative remits
- · Claim status
- System issues
- Voided claim issues

If you ever have concerns about your service experience, you can contact one of our highly trained representatives 8 a.m. to 5 p.m. Monday through Friday at 1-866-638-1232, option 3, then 5. For CHIP claims issues, please call 1-800-822-2447. We want to make sure that your experience with CICR exceeds your expectations. If resolution is not reached with a representative, please ask for the assistance of a supervisor.



Where to Send Claim Payment Returns or Refunds

If you would like to return or refund payment of a claim, please mail to:

Aetna Better Health of Pennsylvania Attn: Finance Department 2000 Market Street Suite 850 Philadelphia PA 19103



Provider Appeals

Providers may file an appeal with Aetna Better Health if the provider disputes the resolution of a claim denial or adjudication, or services were provided without the proper authorization.

Note: when submitting the initial prior authorization request, it's important to **submit all clinical information with the initial request**. Providing all clinical information up front will reduce denials related to prior authorization.

Tips for submitting provider appeals:

- Use the Provider Appeal Form located on our website; go to <u>www.aetnabetterhealth.com/pennsylvania/providers/forms</u> to download and print the form
- Include the claim number on the appeal
- $\boldsymbol{\cdot}$ State exactly what is being disputed and why the claim should be paid
- Submit appeals in writing to Aetna Better Health by fax or mail within 60 days of the provider remittance date

• Appeals Fax Number: 1-860-754-1757

Appeals Mailing Address: Aetna Better Health of Pennsylvania

Attn: Provider Appeals

2000 Market Street, Suite 850

Philadelphia, PA 19103

Did you know? You can request Code Edit Policy Reconsiderations

Providers can request a reconsideration regarding a code edit policy in situations where the provider's and Aetna Better Health's correct coding policy sources conflict or where they may have a different interpretation of a common correct coding policy source.

All requests for code edit policy reconsiderations must be submitted to Aetna Better Health in writing and should include any source documents and the following:

- A detailed explanation of why you do not agree with Aetna Better Health's current correct coding policy or interpretation
- · Include the supporting alternative policy information and the source where it can be found



Did you miss an MAB?

If you missed a recent Medical Assistance Bulletin, just click here.



Social Determinants of Health (SDOH)

What is SDOH?

Social Determinants of Health is defined as conditions in the places where people live, learn, work, and play affect a wide range of health risks and outcomes.1

Why are Social Determinants of Health so important?

Identification and tracking of SDOH will allow providers, hospitals and health systems to better track patient needs and identify solutions to improve the health of their communities.²

Using SDOH ICD-10 Codes

On the following pages you'll find a list of ICD-10 codes that identify specific Social Determinants of Health. As a care provider, you play an important role in helping identify members who may need additional support beyond medical care. If you're providing care to an Aetna Better Health of Pennsylvania member you may notice a SDOH that may need to be addressed. You can refer to the following list of ICD-10 codes below and include the appropriate code(s) on claims you submit.

By using the SDOH codes you'll be helping us identify areas of opportunity for our members. As a result we can integrate appropriate chronic care management with preventive health while connecting members with needed community services you help identify.

You can also submit a request for Care Management services for our members by emailing PACMReferralMailbox@aetna.com.

¹ Healthy People 2020. Social Determinants of Health

² American Hospital Association, ICD-10-CM Coding for Social Determinants of Health, April 2018 (www.aha.org)

Social Determinants of Health ICD-10 Codes

SDOH Category	ICD-10 Codes (Examples – Not an all-inclusive list)		
Problems related to housing and economic circumstances (Z59)	 Z59.0 Homelessness Z59.1 Inadequate housing Z59.2 Discord with neighbors, lodgers and landlord Z59.3 Problems related to living in residential institutions Z59.4 Lack of adequate food and safe drinking water Z59.5 Extreme poverty Z59.6 Low income Z59.7 Insufficient social insurance and welfare support Z59.8 Other problems related to housing and economic circumstances Z59.9 Problems related to housing and economic circumstances, unspecified 		
Contact with/suspected exposure to hazardous substances (Z77)	Z77.011 Contact with and suspected exposure to leadZ77.090 Contact with and suspected exposure to asbestos		
Problems related to education and literacy (Z55)	 Z55.0 Illiteracy and low level literacy Z55.1 Schooling unavailable and unattainable Z55.3 Underachievement in school Z55.4 Education maladjustment and discord with teachers and classmates Z55.9 Problems related to education and literacy, unspecified 		
Problems related to employment and unemployment (Z56)	 Z56.0 Unemployment, unspecified Z56.1 Change of job Z56.2 Threat of job loss Z56.3 Stressful work schedule Z56.4 Discord with boss and workmates Z56.5 Uncongenial work environment Z56.81 Sexual harassment on the job Z56.82 Military Deployment Status Z56.9 Unspecified problems related to employment 		
Problems related to medical facilities and other health care (Z75)	Z75.3 Unavailability and inaccessibility of health care facilitiesZ75.4 Unavailability and inaccessibility of other helping agencies		
Problems related to other psychosocial circumstances (Z65)	 Z65.0 Conviction in civil and criminal proceedings without imprisonment Z65.1 Imprisonment and other incarceration Z65.2 Problems related to release from prison Z65.3 Problems related to other legal circumstances Z65.4 Victim of crime and terrorism Z65.5 Exposure to disaster, war and other hostilities 		
Occupational Exposure to Risk Factors (Z57)	 Z57.0 Occupational exposure to noise Z57.1 Occupational exposure to radiation Z57.2 Occupational exposure to dust Z57.3 Occupational exposure to other air contaminants Z57.4 Occupational exposure to toxic agents in agriculture Z57.5 Occupational exposure to toxic agents in other industries Z57.6 Occupational exposure to extreme temperature Z57.7 Occupational exposure to vibration 		

SDOH Category	ICD-10 Codes (<i>Examples – Not an all-inclusive list</i>)	
Problems related to social environment (Z60)	 Z60.0 Problems of adjustment to life-cycle transitions Z60.2 Problems related to living alone Z60.3 Acculturation Difficulty Z60.4 Social exclusion and rejection Z60.5 Target of (perceived) adverse discrimination and persecution Z60.8 Other problems related to social environment Z60.9 Problems related to social environment, unspecified 	
Other Problems related to primary support group, including family circumstances (Z63)	 Z63.3 Absence of family member Z63.4 Disappearance and death of a family member Z63.5 Disruption of family by separation and divorce Z63.6 Dependent relative needing care at home Z63.7 Other stressful live events affecting family and household Z63.71 Stress on family due to return of family member from military deployment Z63.72 Alcoholism and drug addiction in family 	
Problems related to certain psychosocial circumstances (Z64)	Z64.0 Problems related to unwanted pregnancyZ64.1 Problems related to multiparityZ64.4 Discord with counselors	
Problems related to upbringing (Z62)	 Z62.0 Inadequate parental supervision and control Z62.1 Parental overprotection Z62.2 Upbringing away from parents Z62.21 Child in welfare custody Z62.22 Institutional upbringing Z62.3 Hostility towards and scapegoating of child Z62.6 Inappropriate (excessive) parental pressure Z62.8 Other specified problems related to upbringing Z62.81 Personal history of abuse in childhood Z62.812 Personal history of neglect in childhood Z62.819 Personal history of unspecified abuse in childhood Z62.82 Parent-child conflict Z62.891 Sibling rivalry 	





Pharmacy Updates

Please refer to the provider website or provider manual for pharmacy information:

- A complete list of pharmaceuticals (formulary), monthly changes, limits and quotas
- How to use the pharmaceutical management procedures
- How to provide information for exception requests Generic substitutions, therapeutic interchange and step-therapy protocols



Effective February 4, 2019, Aetna Better Health of Pennsylvania made changes to our drug formulary for the antidiabetic rapid-acting insulin drug class.

- Admelog (insulin lispro) will be the preferred rapid-acting insulin product and will be available as both a vial and a SoloStar pen
- The SoloStar pen formulation will have a maximum age limit of 18 years
- The vial will be the preferred formulation for adults
- All other rapid-acting insulins will be non-preferred
 - Humalog vial and KwikPen (insulin lispro) and Novolog vial and FlexPen (insulin aspart) will be removed from the formulary
 - Apidra (insulin glulisine) and Fiasp (insulin aspart) will remain non-formulary

All members and providers affected by these formulary changes will be notified by the health plan via mail. The clinical resources provided below can help prescribers understand the clinical rationale behind these changes and in transitioning members to available formulary alternatives.

CLINICAL RATIONALE

Admelog is FDA approved as a rapid-acting human insulin analog indicated to improve glycemic control in adults and pediatric patients 3 years and older with type 1 diabetes mellitus (T1DM) and adults with type 2 diabetes mellitus (T2DM).

- Admelog is the first approved short-acting 'follow-on' mealtime insulin product. It is considered a "follow-on" brand to Humalog, similar to how Basaglar is considered a "follow-on" brand to Lantus.
- Since Admelog is not FDA approved as a generic, it cannot be automatically interchanged by the pharmacy without a new prescription from the provider

All rapid-acting insulin products have shown similar side effect profiles and produced comparable improvements in glycemic control.

- · All rapid-acting insulin products display similar pharmacokinetic characteristics and can be dosed at a 1:1 conversion ratio
- · More frequent blood glucose monitoring is recommended when switching insulin products to prevent adverse reactions including hypoglycemia

REFERENCES

- · Admelog [package insert]. Bridgewater, NJ; Sanofi-Aventis. December 2017.
- FDA approves Admelog, the first short-acting "follow-on" insulin product to treat diabetes. FDA. February 2018. Another Insulin Lispro (Admelog) for Diabetes. The Medical Letter. June 2018.
- Clinical Resource, Comparison of Insulins. Pharmacist's Letter/Prescriber's Letter. December 2017.



Admelog Frequently Asked Questions (FAQs)

What formulary changes are being made to the rapid acting insulin drug class?

- Effective February 4th, 2019, Admelog will be the preferred rapid acting insulin
- The Admelog SoloStar pen will be covered for members < 18 years of age
- Admelog vials will be covered for adults
- All other rapid acting insulins will require prior authorization

What is Admelog, and how does it work?

- Admelog is a rapid-acting mealtime insulin that helps to control blood sugar. It is designed to mimic the body's natural insulin response to blood sugar spikes after meals. It does this by increasing the uptake of glucose by the skeletal muscle and fat and reducing the production of glucose by the liver.
- Admelog should be taken 15 minutes before or immediately after a meal

What is the active ingredient in Admelog?

 Admelog contains insulin lispro (100 units/mL), which is a synthetic insulin

Is Admelog a generic version of insulin lispro?

- Admelog is an insulin lispro "follow-on" brand to Humalog. It is not FDA approved as a generic
- Since Admelog is not a generic, it cannot be substituted at the pharmacy without a new prescription

How are Admelog and Humalog similar?

- · Admelog and Humalog are both:
- Rapid-acting mealtime insulins that help control blood sugar when a patient eats
- Injected within 15 minutes before or immediately after a meal, and both help lower HbA1C and reduce spikes in blood glucose
- Dosed in a 1:1 ratio, meaning that a patient should be on the same dose of either Admelog or Humalog
- Stored at room temperature and are good for up to 28 days after the first use

What are the possible side effects of Admelog?

• The most common side effects with insulin lispro injections in clinical trials were hypoglycemia and allergic reactions, including injection site reactions, itching, rash, and skin thickening or pits at the injection site (lipodystrophy)

What are the options for administering Admelog in the body?

 Admelog is supplied as both a vial and a SoloStar prefilled disposable injection pen. It can be given as a subcutaneous injection, a subcutaneous infusion (e.g., with insulin pump), or as an IV infusion

If a member uses the Admelog vial or SoloStar pen, where on the body should it be injected?

- Admelog can be injected in 4 areas on the body: anywhere in the stomach area (except for a 2-inch radius around the bellybutton), in the fatty tissue on the other back of the upper arm, in the thigh (away from the knee), or on the buttocks.
- Rotate injection sites with each injection to avoid irritation on the body.

What types of needles should be prescribed for use with the SoloStar pen?

- Only needles that are compatible with Admelog SoloStar pens should be prescribed
- Needles from BD, such as BD Ultra-Fine, can be used. BD Ultra-Fine pen needles are covered on the Aetna Medicaid formulary

REFERENCES

- Admelog [package insert]. Bridgewater, NJ;
 Sanofi-Aventis. December 2017.
- Humalog [package insert]. Indianapolis, IN: Eli Lilly and Company; 2017.
- About Admelog. Sanofi. August 2018. https://www.admelog.com/about-admelog.
- FDA approves Admelog, the first short-acting "follow-on" insulin product to treat diabetes. FDA. February 2018.

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Aetna Better Health of Pennsylvania						
Administrative Office	2000 Market Street, Suite 850 Philadelphia, PA 19103 1-866-638-1232 (MA) 1-800-822-2447 (CHIP)	Claims Customer Service Contact (CICR)	1-866-638-1232			
Pharmacy	CVS Caremark: 1-866-638-1232	Language Line Services	1-800-385-4104			
Eligibility Verification (by phone)	1-866-638-1232 (MA) 1-800-822-2447 (CHIP)	Complaints, Grievances & Appeals	Complaints Grievance and Appeals 2000 Market Street, Suite 850 Philadelphia, PA 19103 Fax: 1-860-754-1757 Email: PAMedicaidAppeals& Grievance@AETNA.com			
Claim Submission Address/Payor ID	Aetna Better Health PA P.O. Box 62198 Phoenix, AZ 85082-2198 Emdeon Payor ID: 23228	eviCore®	Link: www.medsolutionsonline.com Link: www.Evicore.com Radiology: 1-888-693-3211 Pain Management: 1-888-393-0989 Client Services: 1-800-575-4517			
Prior Authorization Phone and Fax Numbers	P: 1-866-638-1232 F: 1-877 363-8120 Form Link: https://www. aetnabetterhealth.com/ pennsylvania/assets/pdf/ provider/PriorAuthForm-PA_JF_ SP2_FINAL.pdf	Real Time support via Emdeon: Claim Inquiry & Response (276/277); Eligibility Inquiry & Response (270/271); and Health Service Review Inquiry & Response (278)	Emdeon Payor ID: 23228			
Provider Manual	https://www.aetnabetterhealth. com/pennsylvania/providers/ manual	EFT / ERA	Form Link: https://www.aetnabetterhealth. com/pennsylvania/assets/pdf/ provider/provider-forms/ EFT-Authorization EnrollmentForm-PA.pdf			
Website	www.aetnabetterhealth.com/ pennsylvania	Vision	Superior Vision: 1-866-819-4298 www.superiorvision.com			
Provider Web Portal	www.aetnabetterhealth.com/ pennsylvania/providers/portal	Provider Relations, Contracting & Updates	P: 1-866-638-1232 F: 1-860-754-5435 Email: <u>ABHProviderRelations</u> <u>Mailbox@AETNA.com</u>			
Peer to Peer Request	1-959-299-6960	Special Needs Unit	1-855-346-9828			
Member Services	1-866-638-1232 (MA) 1-800-822-2447(CHIP)	Dental	SKYGEN Provider Services: 1-800-508-4892 Website: https://skygenusa.com			
Pennsylvania Departn	Pennsylvania Department of Human Resources					
Dept of Human Services Helpline	1-800-692-7462	Provider Inquiry Hotline	1-800-537-8862 Prompt 4			
Behavioral Health	1-800-433-4459	Pharmacy Hotline	1-800-558-4477 Prompt 1			
OMAP - HealthChoices Program Complaint, Grievance, & Fair Hearings	1-800-798-2339 PO Box 2675 Harrisburg, PA 17105-2675	MA Provider Enrollment Applications / Changes	1-800-537-8862 Prompt 1			
Eligibility Verification System (EVS) – Phone	1-800-766-5387	Outpatient Providers Practitioner Unit	1-800-537-8862 Prompt 1			
Eligibility Verification System (EVS) – Website	http://www.dhs.pa.gov/ provider/ frequentlyaskedquestions/ accesscardsevseligibility questionsandanswers/index. htm	MA Provider Compliance Hotline	1-800-333-0119			

2019 Quick Reference Guide

Mental Health, Drug & Alcohol Services **Medical Assistance Transportation Program (MATP)** Please refer recipients needing assistance with transportation Aetna Better Health recipients receive mental health, drug, and alcohol services through Behavioral Health (BH) Managed Care to these local county offices. Recipients can use these numbers Organizations (MCO) in each county. Please refer to the list to obtain information on how to enroll in the MATP program. below to contact the office in the member's county. For more information, visit matp.pa.gov BH MCO / Phone County BH MCO / Phone County County Phone County Phone CCRHO CCRHO 570-963-6482 Adams Lackawanna Adams 800-632-9063 Lackawanna 800-553-7499 800-553-7499 CCBHO 888-547-6287 800-892-1122 Allegheny Lancaster Allegheny Lancaster 800-553-7499 888-722-8646 VBH VBH Armstrong Lawrence Armstrong 800-468-7771 Lawrence 888-252-5104 877-615-8503 877-615-8503 VBH 717-273-9328 Beaver Lebanon Beaver 800-262-0343 Lebanon 877-615-8503 888-722-8646 MBH Bedford Bedford 814-643-9484 888-253-8333 Lehigh Lehigh 888-207-2911 866-773-7891 ССВНО CCBHO Berks Luzerne Berks 800-383-2278 Luzerne 800-679-4135 800-553-7499 800-553-7499 CCBHO CCBHO Blair 800-458-5552 800-222-2468 Blair Lycoming Lycoming 800-553-7499 800-553-7499 ССВНО ССВНО Bradford McKean Bradford 800-242-3484 McKear 866-282-4968 800-553-7499 800-553-7499 MBH Bucks Mercer Bucks 888-795-0740 Mercer 800-570-6222 888-207-2911 877-615-8503 ССВНО VBH Mifflin Mifflin 800-348-2277 Butler Butler 866-638-0598 877-615-8503 800-553-7499 MBH CCBHO Cambria 888-647-4814 Monroe 888-955-6282 Cambria Monroe 800-553-7499 888-207-2911 CCBHO MRH 215-542-7433 Cameron Montgomery Cameron 866-282-4968 Montgomery 800-553-7499 888-207-2911 ССВНО ССВНО Carbon 800-990-4287 800-632-9063 Carbon Montour Montour 800-553-7499 800-553-7499 ССВНО MBH Centre Northampton Centre 814-355-6807 Northampton 888-253-8333 888-207-2911 800-553-7499 CCBHO ССВНО Chester Northumberland Chester 877-873-8415 Northumberland 800-632-9063 800-553-7499 800-553-7499 ССВНО 800-672-7116 800-632-9063 Clarion Perry Clarion Perry 800-553-7499 888-722-8646 CCBHO CBH Clearfield Philadelphia Clearfield 800-822-2610 Philadelphia 877-835-7412 800-553-7499 888-545-2600 CCBHO CCBHO Pike Clinton 800-206-3006 Pike 866-681-4947 Clinton 800-553-7499 800-553-7499 ССВНО ССВНО Columbia Potter Columbia 800-632-9063 Potter 800-800-2560 800-553-7499 800-553-7499 VBH ССВНО Crawford Schuylkill Crawford 800-210-6226 Schuylkill 888-656-0700 877-615-8503 800-553-7499 800-632-9063 800-632-9063 Cumberland Snyder Cumberland Snyder 888-722-8646 800-553-7499 800-309-8905 800-452-0241 Dauphin Dauphin Somerset Somerset 888-722-8646 866-773-7891 CCBHO MRH Delaware Sullivan Delaware 866-450-3766 Sullivan 800-242-3484 888-207-2911 800-553-7499 CCBHO CCBHO Flk Susquehanna FIk 866-282-4968 Susquehanna 866-278-9332 800-553-7499 800-553-7499 ССВНО ССВНО Frie Tioga Frie 800-323-5579 Tioga 800-242-3484 800-553-7499 800-553-7499 VBH 800-321-7433 800-632-9063 Fayette Union Fayette 877-615-8503 800-553-7499 ССВНО VBH 800-222-1706 814-432-9767 Forest Venango Forest Venango 800-553-7499 877-615-8503 CCRHO Franklin Warren Franklin 800-632-9063 Warren 877-723-9456 866-773-7917 800-553-7499 VBH Fulton Washington Fulton 800-999-0478 Washington 800-331-5058 866-773-7917 877-615-8503 VBH ССВНО Greene Wayne Greene 877-360-7433 Wayne 800-662-0780 877-615-8503 800-553-7499 ССВНО VBH Huntingdon Westmoreland Huntingdon 800-817-3383 Westmoreland 800-242-2706 800-553-7499 877-615-8503 ССВНО 866-278-9332 Indiana Indiana 888-526-6060 Wyoming Wvoming 877-615-8503 800-553-7499 CCBHO CCBHO Jefferson 800-648-3381 York 800-632-9063 lefferson York 800-553-7499 800-553-7499 CCBHO Juniata Juniata 800-348-2277

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