



Community outreach

Our community outreach department can normally be found in the community attending health fairs and community events geared towards educating existing and potential members about our plan. In addition to providing an overview of our plan, community outreach educates our communities on CHIP/Medicaid, Texas Health Steps, and Accelerated Services for Farmworker Children. Our outreach team can also be a great asset to any provider office offering a number of services geared for members to enhance not only their experience with our plan but with the provider as well. Here are a few of the services we offer:

- **Member education** – One-on-one education session with a member that must be conducted in a private room at the provider’s office. Community outreach will normally coordinate a date/time with a provider when multiple members are scheduled.
- **Re-enrollment assistance** – Members can call **2-1-1 Texas** or visit yourtexasbenefits.com/learn/home to renew their Medicaid benefits.
- **Provider education** – Education sessions for provider offices to assist in the identification of children of migrant farmworkers in order to help them receive the health care services their child/children may need.
- **Farmworker children** – Farmworker children have parents or guardians

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who meet the state definition of a migratory agricultural worker, generally defined as an individual:

1. Whose principal employment is in agriculture on a seasonal basis.
2. Who has been so employed within the last 24 months.
3. Who performs any activity directly related to the production or processing of crops, dairy products, poultry, or livestock for initial commercial sale or as a principal means of personal subsistence.
4. Who establishes for the purpose of such employment a temporary abode.

Source: Texas Health and Human Services Commission, Uniform Managed Care Contract Terms & Conditions, Version 1.17, p. 11

- **Farmworker children referral process** – Providers who identify farmworker children members can contact Member Services at **1-888-672-2277** so we can provide additional outreach and assistance if needed.

For more information on our value-added services and programs, call 1-877-751-9951 or visit:

- **What Does Medicaid Cover? | Aetna Medicaid Texas**
- **What Does STAR Kids Cover? | Aetna Medicaid Texas**
- **What Does CHIP Cover? | Aetna Medicaid Texas**



Member Advocates

Our member advocate team can normally be found working with members to ensure that they have the best healthcare experience possible. In addition to providing an overview of our plan, member advocates educate our members on benefits available for STAR/CHIP/STAR Kids coverage, Texas Health Steps, renewal and Accelerated Services for Farmworker Children. Here are some of the services our outreach team offers:

- **Questions about coverage** – Our member advocate team can assist members in obtaining answers to questions about their coverage.
- **Re-enrollment assistance** – Call **2-1-1 Texas** or visit yourtexasbenefits.com/learn/home.
- **Member Advisory Group meetings** – Our member advocate team schedules quarterly STAR Member Advisory Group Meetings and welcomes all STAR members to attend.
- **Member Baby Shower program** – Members can learn about our Maternity Care Program. Access to great information to help with pregnancy. The

schedule can be found by at aetnabetterhealth.com/texas/wellness/women/pregnancy.

- **Diapers for Dads program** – Members can learn about our Maternity Care Program, with great information to help soon-to-be fathers. The schedule can be found at aetnabetterhealth.com/texas/wellness/women/pregnancy.
- **CVS HealthHUB™ Events** – Our member advocate team schedules weekly health education events at local CVS HealthHUBs, providing member education on STAR/CHIP/STAR Kids coverage, Texas Health Steps, renewal, accelerated services for farmworker children and the latest on COVID-19 and vaccination incentives.

To get connected with a member advocate, members can call the number on the back of their member ID card. They can leave a message in our Member Advocate Mailbox at **1-800-327-0016** and we will return the call within 1-2 business days. Members who are deaf or hard of hearing should call **1-800-735-2989**.

Prior authorization guidance when Aetna Better Health of Texas is secondary

To minimize the administrative burden on our providers, Aetna Better Health of Texas recently updated its prior authorization process. When Aetna Better Health is a secondary payor and providers expect that the primary payor will allow the service, no authorization is required. Providers should not submit a request for authorization.

If providers believe that the service will not be allowable by the primary payor, providers can indicate as such on their request to ensure that it is processed without additional questions from our intake team.

If a primary payor has a known benefit limit, only units and dates of services beyond the known limit should be submitted for authorization by Aetna Better Health.

We recognize that providers may have uncertainty about the coverage, limitations and processes of primary payors. As a result, we will review post-service authorization requests if providers receive unexpected claims result from the primary payor. Providers should ensure they made a good faith effort to follow primary payor policies.

How to request prior authorization

- **Online** – Complete the [Texas standard prior authorization request form \(PDF\)](#) and upload it to the Provider Portal.
- **Visit the Provider Portal**
- **By fax** – Complete the [Texas standard prior authorization request form \(PDF\)](#) and fax it to 1-866-835-9589.

Where to find important pharmacy information

You can access pharmacy information on [AetnaBetterHealth.com/Texas](https://www.aetna.com/betterhealth/texas), select “Provider Site”, click on “Programs and services” and then click on “Pharmacy” to find the following:

- Preferred drug list (PDL)
- Medications that require prior authorization and applicable coverage criteria
- A list and explanation of medications that have limits or quotas.
- Copayment and coinsurance requirements and the medications or classes to which they apply (CHIP members only).
- Procedures for obtaining clinical or PDL prior authorization, generic substitution, preferred brand interchange
- Information on the use of pharmaceutical management procedures
- Criteria used to evaluate new medications for inclusion on the formulary
- A description of the process for requesting a medication coverage exception

Changes to the Texas Medicaid preferred drug list (PDL)

The board made no PDL recommendations at the July 21, 2023, meeting.

- The October DUR board meeting will review the July and October scheduled PDL classes.
- HHSC will incorporate the approved decisions from the October meeting into the PDL published in January, 2024.





Join us for our quarterly luncheon

Aetna Better Health of Texas Provider Relations Team invites you to attend our provider relations quarterly luncheon – Bexar service area

Thursday, September 21

11:30 AM – 1 PM

Café College, 131 El Paso St., San Antonio, TX 78204

Topics: RubiconMD, TMHP, quality, behavior health, provider updates, provider relations news and updates

RSVP by Mon. Sept. 18 to Frances Perez at PerezF@aetna.com.

RSVP as soon as possible, as the room holds only 30 people.



Any changes to your demographic information?

Aetna Better Health of Texas strives to ensure provider directory information is as accurate and current as possible for our members. If you are a provider or provider group and need to update demographic information, please contact us at the emails below.

Contact	Type of update
ABHTXCredentialing@Aetna.com	Adding providers, change of physical address, contracting, credentialing, copies of contract or checking credentialing/contracting status.
TXproviderenrollment@Aetna.com	If you have a delegated roster update.



Help ensure that your patients do not lose their coverage

As you may know, the public health emergency (PHE) related to COVID-19 ended May 11, 2023. States now have 12 months to recertify the eligibility of all Medicaid/CHIP enrollees.

Those who no longer meet eligibility requirements – or those who do not take the steps to confirm their eligibility – will lose their coverage.

Even before the PHE, thousands of people were disenrolled from Medicaid every month for procedural reasons. In many cases, recipients weren't even aware that they needed to recertify their eligibility.

How you can help

Remind your patients to confirm their current contact information with HHSC or caseworker. They can visit the website below for more information and to get started.

Also, **make note of the phone number, 2-1-1 Texas, for your state's Medicaid enrollment office.** Keep it handy at your front desk, billing office or anywhere staff can share with patients.

Thank you for supporting this effort. For more information, visit yourtexasbenefits.com.

Help us ensure that your Aetna patients have timely and appropriate access to care

We want to remind Aetna Better Health providers of the required availability and accessibility standards. Please review the standards listed below.

Level of care	Timeframe
Emergency services	Upon member presentation at the service delivery site
Urgent care appointments	Within 24 hours of request for primary and specialty care
Routine primary care	Within 14 days of request for non-urgent, symptomatic condition
Routine specialty care	Within 21 days of request for non-urgent, symptomatic condition
Adult preventive health physicals/wellness visits for members over the age of 21	Within 90 days of request
Pediatric preventive health physicals/well-child checkups for members under the age of 21, including Texas Health Steps services	As soon as possible for members who are due or overdue for services, in accordance with the Texas Health Steps Periodicity Schedule and the American Academy of Pediatrics guidelines, but in no case later than: <ul style="list-style-type: none"> • 2 weeks of enrollment for newborns • 60 days of new enrollment for all others
Prenatal care/first visit	Within 14 days of request. For high-risk pregnancies or new members in the third trimester, appointments should be offered immediately, but no later than 5 days of request.
Behavioral health visit	Initial outpatient behavioral health visit (child and adult within 14 calendar days)



Appointment availability requirements

After-hours access requirements: the following are acceptable and unacceptable phone arrangements for contacting PCPs after normal business hours.

Acceptable	Unacceptable
Office phone is answered after hours by an answering service, in English, Spanish or other languages of the major population groups served, that can contact the PCP or another designated medical practitioner. All calls answered by an answering service must be returned by a provider within 30 minutes.	Office phone is only answered during office hours.
Office phone is answered after normal business hours by a recording in English, Spanish or other languages of the major population groups served, directing the patient to call another number to reach the PCP or another designated provider. Someone must be available to answer the designated provider's phone. Another recording is not acceptable.	Office phone is answered after hours by a recording, which tells the patients to leave a message.
Office phone is transferred after office hours to another location, where someone will answer the phone and be able to contact the PCP or another designated medical practitioner.	Office phone is answered after hours by a recording, which directs patients to go to an emergency room for any services needed.
	Returning after-hour calls outside of 30 minutes.



EFT/ERA registration services (EERS)

Aetna Better Health of Texas is partnering with Change Healthcare to introduce the new EERS, a better and more streamlined way for our providers to access payment services.

What is EERS?

EERS will offer providers a standardized method of electronic payment and remittance while also expediting the payee enrollment and verification process. Providers will be able to use the Change Healthcare tool to manage ETF and ERA enrollments with multiple payers on a single platform.

How does it work?

EERS will give payees multiple ways to set up EFT and ERA in order to receive transactions from multiple payers. If a provider's tax identification number (TIN) is active in multiple states, a single registration will auto-enroll the payee for multiple payers. Registration can also be completed using a national provider identifier (NPI) for payment across multiple accounts. Providers who currently use

Change Healthcare as a clearinghouse will still need to complete EERS enrollment, but providers who currently have an application pending with Change Healthcare will not need to resubmit. Once enrolled, payees will have access to the Change Healthcare user guide to aid in navigation of the new system.

How and when to enroll

All Aetna Better Health plans will migrate payee enrollment and verification to EERS; your individual health plan will reach out with state-specific enrollment deadlines. To enroll in EERS, visit payerenrollservices.com.

For questions or concerns, visit the Change Healthcare FAQ page. You can also contact Change Healthcare at 1-800-956-5190, Monday-Thursday, 8 AM-5 PM CT.

National Suicide Prevention Month

National Suicide Prevention Month began in September 2008. During the month of September, mental health providers and advocates, prevention organizations, and community members unite to share resources and promote suicide prevention awareness. National Suicide Prevention Week and World Suicide Prevention Day also occur in September.

The Centers for Disease Control and Prevention consider suicide a serious public health problem. Suicide rates increased approximately 36% from 2000 to 2021. Suicide was responsible for 48,183 deaths in 2021, which is about one death every 11 minutes. In 2021, an estimated 12.3 million American adults seriously thought about suicide, 3.5 million planned a suicide attempt and 1.7 million attempted suicide.

- In 2021, suicide was among the top 9 leading causes of death for people ages 10-64.
- In 2021, suicide was the second leading cause of death for people ages 10-14 and 20-34.

Everyone can play a role in preventing suicide. If someone you know needs help, **#BeThe1To connect them to hope.**

- Call or text **988**. Trained counselors are available for assistance 24/7/365
- Chat at **988lifeline.org**
- A health provider, friend or family member can also call or text **988** and find out how to help

For health providers:

- Promote awareness of **988**, the National Suicide and Crisis Lifeline **988lifeline.org**.
- Download the **suicide prevention wallet card (PDF)** which identifies warning signs, specific steps to help someone and resources to get help.
- Download the **Language Matters: Talking About Suicide (PDF)**.
- Learn how to support military service members, veterans and their families in a crisis. Download the **Suicide Prevention for Military Service Members and Veterans (PDF)** and **Suicide Prevention for Military Families (PDF)**.

- Learn about connecting with youth to discuss thoughts of suicide. Download the **Youth Suicide Prevention (PDF)** and **Youth Suicide Prevention Wallet Card (PDF)**.
- People with Intellectual and Developmental Disabilities also have thoughts of suicide. To learn more, download the **Suicide Prevention for Individuals with IDD informational flyer (PDF)**.
- Discussions about mental health and checking in with older adults who have experienced a significant loss is important. To learn more, download the **Mental Health in Older Adults (PDF)**.
- People who experience a traumatic brain injury are at increased risk of suicide. To learn more, download the **Traumatic Brain Injury and Suicide Risk flyer (PDF)**.
- The **Texas Suicide Prevention Collaborative** developed the **Texas State Plan for Suicide Prevention 2023-2028** and provides free resources, educational information, phone apps and training.

