

1. Return Info to CVS Health

Aetna Better Health of West	Virginia UM	Send form to this Email ABHWVGoldStarProgramRequest@aetna.com
Plan type/product		
Medicaid		
2. Gold Card Code to be Rev	viewed	
Code #1	Code	#5
Code #2	Code	#6
Code #3	Code	# 7
Code #4	Code	#8

3. Provider information

Attending physician's address (street, city, state, ZIP code)			
	ZIP code)		

• At the end of 6 months, the provider will need to submit a new request to extend the codes another 6 months.