

AEPR00124 First Quarter 2020 Provider Newsletter	
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Provider Newsletter

First Quarter 2020



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OOPS. . .

WE HAVE A CORRECTION!

In our newly released 2020 Provider Manual, on **Page 50**, within the section “**Service Requiring Authorization**”, the last sentence reads: “Requests received or authorization change requests beyond **27 days** post service will be denied for timely notification.

That should read as: Requests received or authorization change requests beyond **7 days** post service will be denied for timely notification.

We appreciate your patience and the online version of our Provider Manual has already been corrected!

WE HAVE A NEW PARTNERSHIP . . . WITH THE KENTUCKY HOSPITAL ASSOCIATION

Effective **January 1, 2020**, a certified Centralized Credentialing Verification Organization (CVO), **Center Care**, began credentialing our network of providers.

For more information, See **Page two** for a list of Frequently Asked Questions..

For additional information please contact your Network Management Manager or email us at kyproviderrelations@aetna.com.

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Announcing new partnership between
The Kentucky Hospital Association

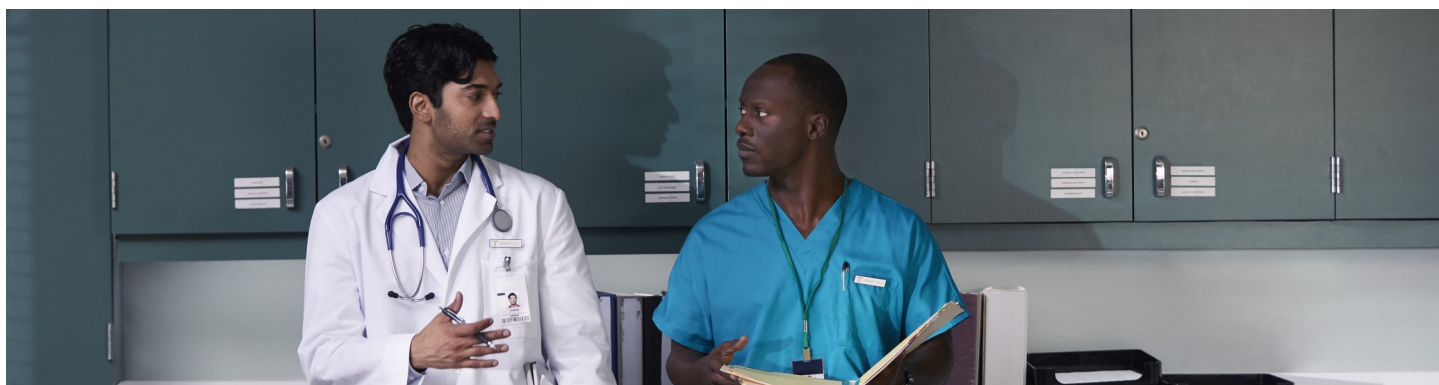
And

Aetna Better Health of Kentucky

Creating an environment for smooth and timely credentialing, provider set up, and maintenance.

Frequently Asked Questions

- Why is Aetna Better Health making this change?
This new streamlined process will result in administrative simplification for Kentucky providers.
- When will the CVO begin accepting provider applications?
The CVO process was implemented on **January 1, 2020**.
- Who will be required to go through credentialing verification process?
All individual practitioners and facilities seeking to enroll with Aetna Better Health will be credentialed and re-credentialed through the new CVO.
- How does a practitioner access an application?
New provider application packets can be found on Aetna Better Health's website at : <https://www.aetnabetterhealth.com/kentucky> under the "For Providers" section.
- Is there a separate contract or agreement needed for the provider?
No, this arrangement does not impact the current provider contract with Aetna Better Health of Kentucky.
- What are the steps to complete the new credentialing process?
Providers must be an active Kentucky Medicaid provider and have a current and active Kentucky Medicaid ID. Providers should verify all documents are accurate, current, and less than 180 days of age upon submission.
Independent Physician Practice Associations (IPA) and Hospital Organizations that currently have a delegated credentialing agreement are excluded from this process.
- For additional information please contact your Network Relations Manager or email kyproviderrelations@aetna.com.



CLINICAL FOCUS

FEBRUARY



National Children's Dental Health Month is scheduled for February in association with the American

Dental Association. The goal is to promote good oral health for children and their caregivers. Look for more resources at [dental health month](#). Colgate has also partnered with the National Dental Association to develop educational resources you can share with your patients. See more here [Educational resources](#).



February is Teen Dating Violence Awareness Month. Many teens begin dating during teenage years. Some will also begin experimenting with drugs and alcohol. Together these can increase the potential for teen dating violence. Each year approximately 1 out of every 10 high school students, or 1.5 million teenagers, experience physical abuse by their boyfriend/girlfriend. This may lead to a vicious cycle, especially if one of the teens has a parent with substance abuse issues. Some warning signs include:

- Doing poorly in school
- Engaging in sexually promiscuous behavior
- Beginning to smoke
- Turning to illicit drugs to escape
- Drinking heavily
- Getting into physical fights
- Attempting suicide

Talk to your teenage patients about the dangers of teen violence and ways they can be safe. Encourage them to seek out a trusted adult if they feel threatened. More info can be found at [teen dating violence month](#).

MARCH



March is designated National Colorectal Cancer Awareness Month. Currently the second leading cause of cancer death in the U.S., screenings detect colorectal cancer early when it is easily and successfully treated. Check out the cancer foundation website for more information at [colorectal cancer](#).

March also brings awareness to National Nutrition Month. Smart food and nutrition choices should be a vital part of everyone's day and at [eat right](#) you will find many resources on dietary guidelines, meal planning, cooking tips, how to eat on a budget as well as much more. Help your patients make sound and informed food choices. Remember small changes can have a big effect over the long run and your patients don't have to feel overwhelmed. Choosing one area to change can encourage your patients to develop wholesome eating habits.



APRIL

April is National Minority Health Month and this year's theme is Active & Healthy, according to the HHS Office of Minority Health (OHM). We encourage you to join OHM in highlighting the benefits of incorporating small amounts of moderate-to-vigorous physical activity into your patients' busy lives. Chronic diseases are often more common among racial and ethnic minority groups and these simple changes can transform their lives and reduce their risk of being diagnosed with one. Learn more at [OMH](#).



ACTIVE & HEALTHY | APRIL 2020



Healthcare fraud, waste and abuse (FWA) can involve physicians, pharmacists, beneficiaries and even medical equipment companies according to the Centers for Medicare & Medicaid Services. Aetna is committed to monitor for Medicaid Fraud. Below is more information on what is considered Medicaid fraud and how we monitor for FWA.

Our Special Investigation Unit's Mission and Purpose:

- To effectively detect, investigate, and prevent health care FWA and recover benefit payments obtained by deceit or misrepresentation.
- To comply with state and federal regulations concerning anti-fraud plans and fraud reporting.

Medicaid fraud is the intentional providing of false information to get Medicaid to pay for medical care or services. Medical identity theft is one type of fraud. It involves using another person's medical card or information to get health care goods, services, or funds.

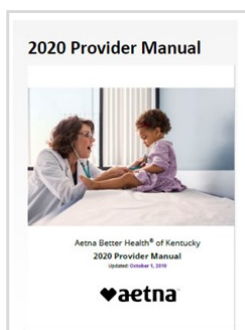
The Special Investigations Unit (SIU) is tasked to conduct investigations involving allegations of FWA. SIU works with our providers, to resolve billing practice issues in order to reduce or eliminate future payment issues, and, where appropriate, to recover overpayments. This can be done by medical record reviews, claims audit and/or onsite provider visits. We work internally with our Network Relations, Utilization Management and Informatics Teams to combat FWA in addition to working with the Department of Medicaid Services to be good stewards of Medicaid dollars.

Below are some types of fraud, and provider and beneficiary examples.

- **Billing for Unnecessary Services or Items:** Intentionally billing for unnecessary medical services or items.
- **Unbundling:** Billing for multiple codes for a group of procedures that are covered in a single global billing code.
- **Upcoding:** Billing for services at a higher level of complexity than provided.
- **Card Sharing:** Knowingly treating and claiming reimbursement for someone other than the eligible beneficiary.
- **Collusion:** Knowingly collaborating with beneficiaries to file false claims for reimbursement.

To report any concerns of fraud, waste, or abuse, email: ABHKYFraudandAbuse@aetna.com.

OUR NEWEST RELEASE. . .THE 2020 PROVIDER MANUAL



Aetna Better Health of Kentucky has released the 2020 Provider Manual. The manual can be found on our website at: <https://www.aetnabetterhealth.com/kentucky/providers/manual>.

The manual contains information about ABH, the services we offer, and contains information that we know you will find helpful.

If you have any questions, simply contact our Network Relations Department, listed on [Pages 8 & 9](#).

INPATIENT ADMISSIONS?

Helpful Tips for our Providers

If you are notifying us about an inpatient admission for physical health, our Utilization Management staff are available Monday - Friday from 8 a.m. – 6 p.m. Notifications for weekend admissions must be sent in by COB the following Monday.

Behavioral health providers may submit notification 24 hours a day / 7 days a week. Weekend admission notifications must be made within 24 hours of admission.

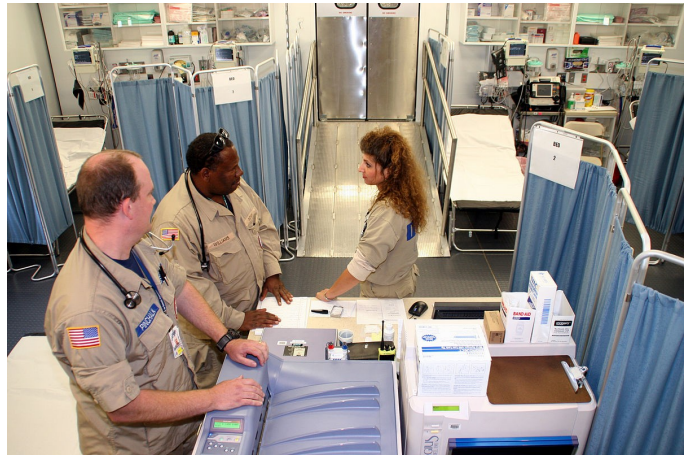
Our notification form is available on our website or you can click [here](#).

Fax the request form to:

- Medical **1-855-454-5579**
- Outpatient Behavioral Health **1-855-301-1564**
- Behavioral Health Psychological and Neuropsychological Testing **1-844-855-0699**
- Call us toll free: Medical: **1-888-725-4969** Behavioral Health: **1-855-300-5528**
- Submit through our 24/7 Secure Provider Portal <http://aetnabetterhealthkentucky.aetna.com/>

⇒ Reminder: no auth required for PAR provider for observation stay (48 hours or less).

⇒ Reminder: no auth required for PAR providers for a delivery of 4 days or less.



WHAT DO WE CONSIDER EXPERIMENTAL AND INVESTIGATIONAL?

A health product or service is deemed experimental if one or more of the following criteria are met:

- Any drug not approved for use by the Food and Drug Administration (FDA); an FDA approved drug prescribed for an off-label use whose effectiveness is unproven based on clinical evidence [68] Proprietary reported in peer-reviewed medical literature; or, any drug that is classified as IND (investigational new drug) by the FDA. As used herein, the definition of off-label prescribing is prescribing prescriptions drugs for treatments other than those stated in the labeling approved by the FDA
- Any health product or service that is subject to Institutional Review Board (IRB) review or approval;
- Any health product or service whose effectiveness is unproven based on clinical evidence reported in peer-reviewed medical literature.



This policy applies to all Aetna Better Health members unless superseded by applicable law.

WE HAVE IMPORTANT NEWS FOR YOU . . .Let's make sure you get it!

We regularly send out email and fax communications to our network providers. If you are not receiving them, please contact your Network Relations Manager for details on how to sign up. See [pages 8 & 9](#) for our Contact List.

PHARMACY UPDATES

Statin Therapy for Patients with Diabetes



WHAT?

According to the 2019 ACC/AHA (American College of Cardiology/ American Heart Association) cholesterol guidelines and the 2020 American Diabetes Association guidelines, moderate- to high- intensity statin therapy should be initiated in members age 40-75 with type 2 diabetes regardless of lipid levels.^{1,2}

WHY?

These members are at substantially increased lifetime risk for ASCVD events and death. Individuals with diabetes also experience greater morbidity and worse survival rates after the onset of clinical ASCVD.

The SPD (Statin Therapy for Patients with Diabetes) HEDIS measure assesses our members with diabetes, aged 40-75, without clinical ASCVD. Members are assessed for both receipt of and adherence to statin therapy.³

Aetna Better Health of Kentucky Formulary Options

High-Intensity
• Atorvastatin 40-80 mg
• Rosuvastatin 20-40 mg*
Moderate-Intensity
• Atorvastatin 10-20 mg
• Rosuvastatin 5-10 mg*
• Simvastatin 20-40 mg
• Pravastatin 40-80 mg
• Lovastatin 40 mg
*Step therapy after trying atorvastatin

References

2019 ACC/AHA Guideline on the Primary Prevention of Cardiovascular Disease. American College of Cardiology. <https://www.acc.org/latest-in-cardiology/ten-points-to-remember/2019/03/07/16/00/2019-acc-aha-guideline-on-primary-prevention-gi-prevention>. Accessed January 23, 2020.

2020 Standards of Medical Care in Diabetes. American Diabetes Association. https://care.diabetesjournals.org/content/diacare/suppl/2019/12/20/43.Supplement_1.DC1/DC_43_S1_2020.pdf. Accessed January 23, 2020.

Statin Therapy for Patients With Cardiovascular Disease and Diabetes. NCQA. <https://www.ncqa.org/hedis/measures/statin-therapy-for-patients-with-cardiovascular-disease-and-diabetes/>. Accessed January 23, 2020.



FORMULARY REMINDERS

On our Aetna Better Health of Kentucky website, <https://www.aetnabetterhealth.com/kentucky/providers/pharmacy/> you will find important and up to date information about our pharmacy program, including:

- A list of pharmaceuticals, including restrictions and preferences
- How to use the pharmaceutical management procedures
- An explanation of limits or quotas
- How prescribing practitioners must provide information to support an exception request
- Process for generic substitution, therapeutic interchange and step-therapy protocols

FORMULARY UPDATES

The following charts list our most recent Formulary Additions, Removals and Updates. This list gets updated monthly, for the complete list please visit our provider tab on the website at <https://www.aetnabetterhealth.com/kentucky/providers/pharmacy/>

January 2020 - Removals
• Ventolin HFA Inhaler (Brand)
December 2019 - Removals
• Digoxin Tabs 62.5mcg, 187.5 mcg
• PreNata Chewable Tab 29-1mg



FLU SEASON CONTINUES

According to the latest statistics from the Department for Public Health in Kentucky, the flu is responsible for 21 deaths this flu season. Flu season can last until May and the CDC recommends everyone over six months old should get a flu shot. Both type A and type B viruses have been detected this year, but type B has been more prevalent among children. Check out the latest fact sheet here [flu](#).

EPSDT

Early and Periodic Screening, Diagnosis and Treatment (EPSDT) is a comprehensive preventive health program for children under the age of 21 who are enrolled in Medicaid. EPSDT ensures children and adolescents receive initial and periodic health assessments through the guidelines listed below:

- **Early:** Assessing and identifying problems early
- **Periodic:** Checking children’s health at periodic, age-appropriate intervals
- **Screening:** Providing physical, mental, development, dental, hearing, vision, and other screening tests to detect potential problems
- **Diagnostic:** Performing diagnostic tests to follow up when a risk is identified, and
- **Treatment:** Control, correct, or reduce health problems found.

Periodicity Schedule			
Infancy	Early Childhood	Middle Childhood	Adolescence
<1 month	15 months	5 years	11 years
2 months	18 months	6 years	12 years
4 months	24 months	8 years	13 years
6 months	30 months	10 years	14 years
9 months	3 years		15 years
12 months	4 years		16 years
			17 years
			18 years
			19 years
			20 years

All eligible members should receive EPSDT services in accordance with state guidelines. We have included the periodicity schedule for your reference. A complete list of components required to meet the EPSDT regulations can be found in our [Provider Manual](#). We can also train your office on requirements for the EPSDT program, please call member services at 1-855-300-5528 and ask to speak with the EPSDT coordinator for more information.

DO YOUR PATIENTS NEED ICM?



Our Integrated Care Management (ICM) Program is a collaborative process of bio psychosocial assessment, planning, facilitation, care coordination, evaluation, and advocacy for service and support options to meet a member’s needs. We offer Disease Management (DM) programs to patients with asthma, diabetes, congestive heart failure (CHF), chronic obstructive pulmonary disease (COPD), coronary artery disease (CAD), depression, and chronic renal disease (CRD).

We believe it is important to have a program to promote the engagement of pregnant women who have significant opiate use or opiate addiction in prenatal care management. Care management will continue with the same Case Manager (CM) for the mother and baby for the first year of the baby’s life. The goal of the program is to identify pregnant woman with Substance Use Disorder (SUD) and refer them for treatment to reduce the incidence of neonatal abstinence syndrome.

We also have a Foster Care Case Management Team that works with the Department for Community Based Services (DCBS), state agencies and service providers to improve the quality of care for plan members and their families. The care management team provides behavioral and medical support for children who are medically fragile, currently hospitalized, and those at medical risk. A case manager will work with DCBS focusing on member’s inpatient status at a behavioral health facility and members who are being decertified. These coordination services are individualized, member-centered and comprehensive.






If you have patients that need ICM or if you have any questions about these services, call Customer Service at **1-855- 300-5528**, Monday through Friday, 7 a.m. to 7 p.m., ET. Just ask to speak to a CM. Involvement in the ICM program is voluntary. Members have the right to opt out of the ICM program at any time.

NETWORK RELATIONS CONTACT INFORMATION & COVERAGE AREA









Aetna Better Health of Kentucky takes great pride in our network of physicians and related professionals who serve our members with the highest level of Quality care and service. We are committed to making sure our providers receive the best and latest information, technology and tools available to ensure their success and their ability to provide for our members. We focus on operational excellence, constantly striving to eliminate redundancy and streamline processes for the benefit and value of all of our partners. Our Network Relations Team is assigned to designated areas throughout the state and are located within the communities in which they serve.

Aetna Better Health of Kentucky also offers a provider services line which can be reached by calling 1 (855) 30-5528, Monday through Friday, 7 am to 7 pm.

	<p>Region 3 <i>Behavioral Health Provider</i></p> <p>All Regions <i>Community Mental Health Centers</i></p>	<p>Dustin Johnson Network Manager 502-648-6526 Johnsod38@aetna.com</p>
<p>Region 5 & 6 <i>Behavioral Health Provider</i></p>		<p>Holly Smith Network Relationship Manager 815-641-7411 Smithh3@aetna.com</p>
	<p>Baptist Health System</p>	<p>Cristy Sheppard Network Manager 502-719-8580 SheppardC1@aetna.com</p>
<p>Regions 1 & 2 <i>Ballard, Caldwell, Calloway, Carlisle, Crittenden, Fulton, Graves, Hickman, Livingston, Lyon, Marshall, McCracken, Christian, Daviess, Hancock, Henderson, Hopkins, McLean, Muhlenberg, Ohio, Todd, Trigg, Union, Webster</i></p> <p>Providers in the state of Indiana</p>		<p>Gina Gullo Network Relationship Manager 502-612-9958 Rlgullo@aetna.com</p>
	<p>Region 3A <i>Breckinridge, Bullitt, Carroll, Grayson, Hardin, Henry, Larue, Marion, Meade, Nelson, Oldham, Shelby, Spencer, Trimble, Washington</i></p> <p>Norton Healthcare System All other states excluding: IN, OH, TN, VA, & WV</p>	<p>Trista Gibson Network Manager 606-305-2705 GibsonT1@aetna.com</p>

NETWORK RELATIONS Contact Information – CONTINUED

<p>Region 3B <i>Jefferson County</i></p>		<p>Connie Edelen Network Relationship Manager 502-240-2122 Czedelen@aetna.com</p>
	<p>Region 4 <i>Adair, Allen, Barren, Butler, Casey, Clinton, Cumberland, Edmonson, Green, Hart, Logan, McCreary, Metcalfe, Monroe, Pulaski, Russell, Simpson, Taylor, Warren, Wayne</i></p> <p>Providers in the state of Tennessee</p>	<p>Abbi Wilson Network Manager 270-816-0893 Wilsona8@aetna.com</p>
<p>Region 5A <i>Anderson, Bourbon, Boyle, Clark, Fayette, Franklin, Garrard, Harrison, Jessamine, Madison, Mercer, Montgomery, Nicholas, Owen, Powell, Scott, Woodford</i></p>		<p>Jennie Handley Network Manager 513-659-9061 Handleyj@aetna.com</p>
	<p>Region 5B <i>Estill, Jackson, Lincoln, Rockcastle</i></p> <p>Kentucky Primary Care Association (KPCA) Association of Primary Care Physicians (APCP) The Physicians Network (TPN)</p>	<p>Sammie Asher Network Relationship Manager 606-401-1573 Ashers@aetna.com</p>
<p>Region 6 <i>Boone, Campbell, Gallatin, Grant, Kenton, Pendleton</i></p> <p>Region 7 <i>Bath, Boyd, Bracken, Carter, Elliot, Fleming, Greenup, Lawrence, Lewis, Mason, Menifee, Morgan, Robertson, Rowan</i></p> <p>CHI Saint Joseph Medical Group (Kentucky One) Providers in the state of Ohio and West Virginia</p>		<p>Jacquelyne Pack Network Manager 606-331-1075 Jmpack@aetna.com</p>
	<p>Region 8 <i>Bell, Breathitt, Clay, Floyd, Harlan, Johnson, Knott, Knox, Laurel, Lee, Leslie, Letcher, Magoffin, Martin, Owsley, Perry, Pike, Whitley, Wolfe</i></p> <p>Providers in the state of Virginia</p>	<p>Krystal Risner Network Relationship Manager 606-687-0310 Risnerk@aetna.com</p>



Aetna Better Health® of Kentucky

Save time by accessing our online resources.

Be sure to check out our convenient web tools, available 24/7.

Health Plan Website

The health plan website is a resource for members and providers. Providers will find information such as the member handbook, provider manual and the formulary on the health plan website.

Providers can use the website to:

- Access the provider manual
- Access the formulary
- Locate frequently used documents
- Register for and access the provider portal
- Access the Secure Provider Portal
- On-line Provider Directory

Visit the Website at: <https://www.aetnabetterhealth.com/kentucky/>

Secure Provider Portal

The Secure Provider Portal is a web-based platform which connects providers with real-time member information anytime. With a secure log on, providers can perform many functions within the web-based platform. The following information can be obtained from the Secure Provider Portal:

- Member Eligibility Search
- Panel Roster
- Provider List
- Claims Status Search
- Remittance Advice
- Real Time Authorization Tool
- Secure Messages

Access the Portal: <https://www.aetnabetterhealth.com/kentucky/providers/portal>

