

Aetna Better Health® of Kansas

Prior Authorization, Retroactive Enrollment and Member MCO Changes

Effective on April 1, 2020, Aetna Better Health of Kansas will implement updated guidelines regarding prior authorization, retroactive enrollment and member Managed Care Organization (MCO) changes. Effective with enrollments received on or after January 1, 2020:

- If a member is retroactively enrolled with Aetna Better Health of Kansas, prior authorization requirements are waived for services provided between the member's retroactive effective date and the date the MCO receives the enrollment. For example, if we are notified on 2/25/2020 that a member will be retroactively enrolled effective on 12/01/19, we will waive the PA requirements for the services received between 12/01/2019 and 2/25/2020.
- If a member is enrolled with Aetna Better Health of Kansas on the date of an approved admission of an Inpatient Hospitalization and the member loses eligibility or changes MCOs during the Inpatient Hospitalization, Aetna Better Health of Kansas is responsible to pay the full Inpatient Hospitalization stay – admission date through discharge date.
- If a member is enrolled with another MCO on the date of admission of an Inpatient Hospitalization and the member becomes enrolled with Aetna Better Health of Kansas during the Inpatient Hospitalization, the facility charges are the responsibility of the MCO the member was enrolled with on the date of admission. Aetna Better Health of Kansas is responsible for professional services beginning with the date of service for which enrollment with Aetna Better Health of Kansas begins.

Questions?

If you have general questions about this communication, please contact our Provider Experience Department:

By Phone: **1-855-221-5656**

By Email: **providerexperienceks@aetna.com**