

# AETNA BETTER HEALTH® OF KENTUCKY PROVIDER NEWSLETTER

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## IN THE NEWS!

### AETNA IN THE HEALTH EXCHANGE

Aetna has made a business decision to cease operations on the Health Insurance Exchange in 11 states across the country in 2017, including Kentucky. It has no impact to our Medicaid plan, Aetna Better Health of Kentucky.

This decision only impacts Aetna's individual commercial products that are sold on the exchange. Aetna's commercial segment will communicate options to impacted members before the 2017 open enrollment period begins, and provide resources to assist them in transitioning to other plans as appropriate. Aetna's Medicaid members in Kentucky will continue to have quality healthcare benefits, and we will continue to work with providers to deliver a quality managed care

### CHANGES FROM EVICORE FOR PRIOR AUTHORIZATIONS



Letters have been mailed to cardiology and pain management providers telling you about prior authorization changes from eviCore.

For full details on musculoskeletal and cardiology prior authorizations see pages 2 and 3!

### UPDATE TO MEDICAL NECESSITY CRITERIA FOR BEHAVIORAL HEALTH

Pursuant to contractual changes with the Department of Medicaid Services (DMS), Section 21.2 "National Standards for Medical Necessity Review", this notice is to advise you of a change that became effective **September 1, 2016**.

Per the contract, "The Contractor shall adopt Interqual or Milliman for Medical Necessity except that the Contractor shall utilize the American Society of Addiction medicine (ASAM) for sub-

stance use," Aetna Better Health of Kentucky adopted Milliman Care Guidelines, 20<sup>th</sup> Edition, for behavioral health utilization management decisions as of September 1, 2016. ASAM will continue to be utilized for all requests for substance use disorders. Educational material for the use of MCG is available on our website <https://www.aetnabetterhealth.com/kentucky>





## PRIOR AUTHORIZATION UPDATE

Effective **September 26, 2016**, Aetna Better Health of Kentucky members will require prior authorization for Cardiology services from eviCore healthcare for dates of service 10/03/2016 and after. Services performed without authorization may be denied for payment, and you may not seek reimbursement from members.

New Authorization is required for:

- **Myocardial Perfusion Imaging**
- **Echo**
- **Echo Stress**
- **Diagnostic Heart Catheterization**

**Only elective and scheduled procedures require prior authorization. Services performed in conjunction with an inpatient stay, 23-hour observation or emergency room visit are not subject to these authorization requirements.**

## PAIN MANAGEMENT UPDATE

Beginning **September 26, 2016**, online requests for Aetna Better Health of Kentucky Musculoskeletal procedures will be initiated via the eviCore web portal located at <https://evicore.com/Pages/ProviderLogin.aspx>.

You will need to complete a brief one-time registration to access the web portal. Utilizing the web is the quickest, most efficient way to initiate a request and obtain the status of an existing request. Please note: the contact phone and fax numbers will change as well, please see below:

Have questions about requesting authorizations? Attend our online orientation, see facing page for details! The orientation schedule, program training resources, Clinical Guidelines, CPT codes managed, and fax request forms are available at <http://www.medsolutions.com/implementation/abhky>. Please email our client services department at [clientservices@eviCore.com](mailto:clientservices@eviCore.com) if you have any questions or need more information.



## HOW TO REQUEST AN AUTHORIZATION

To request an authorization, submit your request online, by phone or fax:

- Log onto [www.evicore.com/Pages/ProviderLogin.aspx](http://www.evicore.com/Pages/ProviderLogin.aspx)
- Call us at **1-888-693-3211**
- Fax an eviCore healthcare request form (available online) to **1-844-822-3862**

**For urgent requests:** If services are required in less than 48 hours due to medically urgent conditions, please call our toll-free number for expedited authorization reviews. Be sure to tell our representative the authorization is for medically urgent care.

## WEB ORIENTATION SESSIONS

eviCore healthcare will be leading orientation sessions designed to assist you and your staff with the case creation process. We encourage you to attend one of these informative sessions to ensure your understanding of the new precertification process and to review the registration process for the web portal.

## ORIENTATION SESSION INVITATION

During these sessions, we will discuss in detail the precertification requirements for Aetna Better Health of Kentucky's members and how to locate additional training materials to navigate the eviCore web portal, <https://evicore.com/Pages/ProviderLogin.aspx>. Topics to be discussed include the new prior authorization process, accessing information from the website and a review of the Quick Reference Guide. Time and participation permitting, this orientation session will be followed by a question-and-answer session. We encourage you to attend one of these informative sessions to ensure your understanding of the new precertification process.

## PAIN MANAGEMENT SESSIONS— WEBEX MAY DISPLAY CENTRAL TIMES

Date	Day of the Week	Time
September 13, 2016	Tuesday	11:00 a.m., Eastern Time
September 22, 2016	Thursday	3:00 p.m., Eastern Time
October 4, 2016	Tuesday	1:00 p.m., Eastern Time
October 5, 2016	Wednesday	9:00 a.m., Eastern Time

## PRIOR AUTHORIZATION SESSIONS— WEBEX MAY DISPLAY CENTRAL TIMES

Date	Day of the Week	Time
September 14, 2016	Wednesday	9:00 a.m., Eastern Time
September 16, 2016	Friday	3:00 p.m., Eastern Time
September 21, 2016	Wednesday	10:00 a.m., Eastern Time
September 22, 2016	Thursday	1:00 p.m., Eastern Time
October 3, 2016	Monday	11:00 a.m., Eastern Time
October 7, 2016	Friday	11:00 a.m., Eastern Time
October 11, 2016	Tuesday	12:00 p.m., Eastern Time

## HOW TO REGISTER

Please read the following instructions carefully to register for and participate in a session:

1. Once you have chosen a date and time, please go to <http://medsolutions.webex.com>
2. Click on the "Training Center" tab at the top of the Web page
3. Find the date and time of the conference you wish to attend by clicking the "Upcoming" tab. All of the Provider Orientation Sessions will be named "ABH KY Provider Training Session - Cardiology"
4. Click "Register"
5. Enter the registration information

After you have registered for the conference, you will receive an e-mail containing:

1. The toll-free phone number and pass code you will need for the audio portion of the conference
2. A link to the Web portion of the conference
3. The conference password



**POSITIVE OUTCOMES**

Mary also suffers from extreme depression and feared for her safety. She desperately wanted to leave the unsafe situation and she had no friends or family who had extra room for Mary to stay with them. Mary also told Jessica that she has been unemployed for over a year due to a severe back injury and she has no current income of her own.

Jessica offered to locate a women’s shelter and Mary agreed. With permission from Mary, Jessica discussed Mary’s case with her colleagues and collaboratively the case management team was able to locate the Bethany House Women’s Shelter. Bethany House was able to provide accommodations for the member within 24 hours. Mary was able to safely leave the unstable home life.

At Aetna we want to improve the health care experience of our members. We share the following story as an example of the great teamwork between our staff and our member (the names have been changed to protect the privacy of our member and staff).

Mary is now gaining support from her peers who share similar personal experiences and who are able to offer her perspective and encouragement. The Bethany house also provides the member with some resources for employment, housing assistance and some financial incentives.

Mary was referred to integrated case management from our health risk questionnaire assessment. She was living in an unsafe home environment. Mary confided in her RN case manager, Jessica, that she lived with a boyfriend who was verbally and emotionally abusive and who made physical threats to her.

The positive outcome in Mary’s story, is that Jessica and our case management team worked together to help Mary find a secure living environment and gave her hope for a better future.



**JUST A THOUGHT. . .from CMO, David Hiestand, MD, Ph.D.**

right time, in the right place. In this newsletter you will find information about many of our member programs, including our Integrated Care Management Program. This program includes outreach efforts specific populations including pregnant members with substance use disorders and Foster Care children. Through this program we hope to facilitate and coordinate care to improve health in the Commonwealth of Kentucky.

season and initiatives to increase immunization rates. As most know, the Medicaid population has traditionally had low adherence to recommended influenza immunization recommendations. In addition to the information cited here, we will be providing more resources in the coming months to help achieve higher vaccination rates.

I consider it a great honor to be recently named as the Chief Medical Officer of Aetna Better Health of Kentucky. Our mission is to provide the highest quality service to our members and providers, and as part of that mission we embrace the opportunity for improvement.

For our providers, we strive to provide support so that they may focus on quality patient care. You will also find in this edition information about the upcoming flu

It is my goal that we work collaboratively to achieve better health for Kentuckians. Please feel free to reach out to me if you have questions, comments or concerns.

Yours in good health,  
*David M. Hiestand, MD, PhD*  
 Chief Medical Officer, Aetna Better Health of Kentucky

For our members, we strive to assure that all have access to the right care, at the



## HOW TO ACCESS CASE MANAGEMENT SERVICES FOR MEMBERS

Do you have a patient who you think may benefit from case management? Access to case management can be completed by:

- Sending an email with member name, Aetna Better Health of Kentucky member ID number or DOB via email to: **CCofKYCaseMGMT@aetna.com**
- Sending a fax to **1-855-454-5044**
- Calling Member Services at **1-855-300-5528 Option 3** and then **Option 5**

The member will be evaluated and assessed for Case Management and Disease Management eligibility and services.



## OCTOBER IS BREAST CANCER AWARENESS MONTH

October is Breast Cancer Awareness Month, which is an annual campaign to increase awareness of the disease. While most people are aware of breast cancer, many forget to take the steps to have a plan to detect the disease in its early stages and encourage others to do the same. We have made a lot of progress but still have a long

way to go and need your help!

<http://www.nationalbreastcancer.org/breast-cancer-awareness-month>

For more information about early detection and a Breast Cancer Fact sheet visit: <http://www.cdc.gov/cancer/nbccedp/about.htm>

## NOVEMBER IS SMOKING CESSATION MONTH



**Quit Now Kentucky** offers Kentucky residents free access to online quit tools, support from other tobacco users who are trying to quit, and other info to make your quit attempt easier. To quit smoking is one of the healthiest things a smoker

can do to improve their health. Lets work together to help our patients quit!

- **Ask** every patient about tobacco use
- **Advise** patients to quit with tailored, personalized messages
- **Refer** them to Quit Now Kentucky

To have the quit line contact your patient, go to

[www.QuitNowKentucky.org/providerpartners](http://www.QuitNowKentucky.org/providerpartners) and fill out either the fax referral or provider web referral form at the bottom of the webpage. For telephone counseling, patients can call **1-800-Quit Now**. For online cessation services or more information about quitting, patients can visit [www.QuitNowKentucky.org](http://www.QuitNowKentucky.org).

Please note:

All tobacco cessation products require a prescription.





## OUR SECURE ONLINE PORTAL

Aetna Better Health of Kentucky is dedicated to providing great service to our providers and our members. That's why our HIPAA-compliant web portal is available 24 hours a day. The portal supports the functions and access to information related to:

- Prior authorization submission and status
- Claim payment status
- Member eligibility status
- eReferrals to other registered providers
- Member and provider education and outreach materials

If you're interested in using this secure online tool, you can download a portal registration form from our "For Providers" page at [aetnabetterhealth-kentucky.aetna.com](http://aetnabetterhealth-kentucky.aetna.com), and then go to "Document Library". Simply submit your registration via fax or email. Keep in mind that internet access with a valid e-mail is required for registration.

Remember, provider groups must first register a principal user known as the "Provider-Admin." Once registered, the "Provider-Admin" can add authorized users within each entity or practice.

### Overview of features for members

At [aetnabetterhealth-kentucky.aetna.com](http://aetnabetterhealth-kentucky.aetna.com), members can register for their own secure member portal accounts. However, we've customized the member portal to better meet their needs. Members will have access to:

- **Health and Wellness Appraisal** – This tool will allow members to self-report and track their healthy behaviors and overall physical and behavioral health. The results will provide a summary of the members overall risk and protective factors and allow the comparison of current results to previous results, if applicable. The health assessment can be

completed annually and will be accessible in electronic and print formats.

- **Educational resources and programs** – Members are able to access self-management tools for specific topics such as smoking cessation and weight management.
- **Claim status** – Members and their providers can follow a claim from the beginning to the end, including: current stage in the process, amount approved, amount paid, member cost (if applicable) and the date paid.
- **Pharmacy benefit services** – Members can find out if they have any financial responsibility for a drug, learn how to request an exception for a non-covered drug, request a refill for mail-order medications and find an in-network pharmacy by zip code. They can also figure out drug interactions, side effects and risk for medications and get the generic substitute for a drug.
- **Personalized health plan services information** – Members can now request a member ID card, change PCPs and update their address through the web portal (address update is a feature available for members and providers). Members can also obtain referral and information on authorization requirements. And they can find benefit and financial responsibility information for a specific service.
- **Innovative services information** – Members will be asked to complete a personal health record and complete an enrollment screening to see if they qualify for any disease management or wellness programs.
- **Health information Line** – The Informed Health Line is available 24 hours a day, 7 days a week. Members can call or send a secure message to a registered nurse who can provide medical information and advice. Messages are responded to within 24 hours.
- **Wellness and prevention information** – We encourage healthy living. Our member outreach will continue to include reminders for needed care and missed services, sharing information about evidence-based care guidelines, diagnostic and treatment options, community-based resources and automated outreach efforts with references to web-based self-management tools.

We encourage you to promote the use of the member portal during interactions with your patients. Members can sign up online at [aetnabetterhealth-kentucky.aetna.com](http://aetnabetterhealth-kentucky.aetna.com). Or they can call Member Services at **1-855-300-5528**.

## THE 3 P'S OF FLU—PREPARE, PROD, PREVENT



Even in a relatively mild season, the flu results in numerous hospitalizations, emergency and office visits, and missed school and work. Over the past 35 years, annual flu-related deaths have reached as high as 50,000 in a single season. Healthy kids and adults may be far less likely to suffer the more catastrophic consequences of the flu. However, it poses a risk to the very young, old and chronically ill in our households, schools and workplaces.

As health care professionals, we play a pivotal role in lessening the burden of flu-related suffering. With flu season rapidly approaching, it's time to think about the three P's: Prepare, Prod and Prevent.

### PREPARE



- Become knowledgeable about current ACIP recommendations for this winter: [www.cdc.gov/flu/professionals/acip](http://www.cdc.gov/flu/professionals/acip)
- Order your vaccine stock early
- If possible, create a separate nurse appointment list for patients only seeking flu and pneumonia vaccines
- Allow nurses to administer these vaccines without a doctor visit
- Create a list of alternative sites where flu and pneumonia vaccines are available for your patients (i.e. retail clinics in drug stores, supermarkets and other local options)
- Review current testing and treatment recommendations: [www.cdc.gov/flu/professionals/diagnosis](http://www.cdc.gov/flu/professionals/diagnosis)[www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm](http://www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm)

### PROD



- Include a flu prevention statement in every patient contact
- You can suggest your office staff end every phone conversation with, "Just a reminder, we have flu shots available and strongly encourage that you protect yourself and your family"
- Display flu prevention material prominently in your office and waiting area
- Set an example by being the first in your office to be vaccinated
- See that your office/practice achieves 100 percent immunization of staff and family members as soon as possible
- Identify and actively reach out to high-risk patients

### PREVENT



- Use every patient encounter as an opportunity to immunize (i.e. wellness exams, sports physicals, acute and chronic illness follow-up visits).
- Emphasize to patients the importance of basic infection-control measures (thorough and frequent hand-washing).
- Check to be sure children under five years old and eligible adults have received their pneumonia shots (pneumonia is the leading cause of flu-related deaths).
- Be sure all your patients in long-term care facilities, as well as their family members, are vaccinated.

## INTEGRATED CARE MANAGEMENT SERVICES

The Aetna Medicaid 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 and/or family/ representative's comprehensive care needs to promote quality cost-effective outcomes. ICM is stratified by the complexity of the members' needs: Intensive Case Management (Complex Case Management), Supportive Case Management, and Population Health.

All levels of Care management include assistance to members with the management of chronic conditions (disease management), providing them education and encouragement to learn self-management skills and coordinating access to the appropriate services and supports. We offer Disease Management (DM) services to patients with asthma, diabetes, congestive heart failure (CHF), chronic obstructive pulmonary disease (COPD), coronary artery disease (CAD), depression, and chronic renal disease (CRD).

Aetna Better Health of KY's ICM program can work with your patients to achieve their optimum level of wellness, functional capability, and to identify appropriate providers and facilities. High-risk obstetrics and neonatal concerns are also managed in care management. These programs help patients care for themselves through education, health coaching, and special care.

If you have patients that need integrated care management 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 case manager. Involvement in the ICM program is voluntary. Members have the right to opt out of the ICM program at any time.



## NEONATAL ABSTINENCE SYNDROME (NAS) PROGRAM

Aetna Better Health of Kentucky, believes 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; continue care management with the same Case Manager (CM) for the mother and baby for the first year of the baby's life; and, in cases where the mother was not in CM, engage both while the baby is in the hospital.

The goals of the program are to: identify pregnant woman with Substance Use Disorder (SUD) and refer for treatment (for opiates, replacement therapy is recommended and has been shown to reduce NAS symptoms); reduce the incidence of NAS by providing treatment for SUD during pregnancy; reduce NICU admissions and LOS for NAS; initiate Care Management for the infant while hospitalized, to improve discharge planning and parent/guardian training during the infant's hospital stay; and to support the mother's adherence with Substance Abuse Treatment prenatally and after delivery.

One important program intervention for the health plan care management staff is to offer assistance to providers in facilitating collaboration between primary and specialty care providers via conferencing, and to reimburse for their time.



## FOSTER CARE CASE MANAGEMENT TEAM

Our Foster Care Case Management Team works collaboratively with the Department for Community Based Services (DCBS) and other state agencies as well as local agencies and service providers to improve the quality of care for plan members and their families. Case management includes assessment, outreach, and care coordination for children in the Kentucky foster care system. These coordination services are individualized, member-centered, and comprehensive and include:



- Assessments to evaluate the current and ongoing biopsychosocial needs of our members and their families
- Ongoing monitoring of the Plan of Care to include prioritized goals
- Ongoing communication and collaboration with member, guardian/caregiver, primary care provider, specialists, other healthcare and community resources
- Ongoing evaluation of member and family needs
- Assistance with obtaining medication
- Assistance in finding a provider in the member’s area
- Assistance with prior authorizations
- Referrals for behavioral health services
- Assistance in scheduling services such as physical therapy, occupational therapy, speech therapy
- Assistance with claim inquiries
- Resolving eligibility issues
- Identifying member eligibility
- Assisting with provider coverage issues for members with primary insurance

Specially trained personnel provide support for both Behavioral Health Outreach as well as Medical Health Outreach. Behavioral Health team members (Licensed Clinical Social Workers) work with DCBS, focusing on members who go to an inpatient behavioral health facility, members who are being decertified, and members who are preparing to discharge from a behavioral health facility. The Medical Health team (RN) provides support for children who are medically fragile, hospital inpatient, and those at medical risk. All new members in the above areas are individually assessed for care management needs with the goal of coordinating access to needed services and supports. Please contact our staff for assistance with any foster care member needs.

<b>Brittany Brice, MSSW, LCSW</b>	Behavioral Health Case Manager	<b>959-299-7409</b>
<b>Debbie Lorence, MSSW, LCSW</b>	Behavioral Health Case Manager	<b>959-299-7431</b>
<b>Jennifer Lanoue, CSW</b>	Behavioral Health Case Manager	<b>959-299-7430</b>
<b>Mary Tyree, CSW</b>	DCBS/Guardianship Liaison Case Manager	<b>959-299-7447</b>
<b>Janna Cheek, RN</b>	Medically Fragile Case Manager	<b>959-299-7412</b>
<b>Mendy Pridemore, RN</b>	Manager of Health Services	<b>859-608-4818</b>

## HOW DO I CONTACT MY PROVIDER RELATIONS REPRESENTATIVE?

REGION	NAME	TELEPHONE	EMAIL
Region 1	Regina Gullo	502-612-9958	rlgullo@aetna.com
Region 2	Phillip Kemper	502-719-8604	pxkemper@aetna.com
Region 3	Phillip Kemper	502-719-8604	pxkemper@aetna.com
Region 3	Jacqulyne Pack	606-331-1075	jmpack@aetna.com
Region 4	Brad Jones	270-349-0103	JonesB11@aetna.com
Region 5	Tanura Moss	859-381-7404	MossT2@aetna.com
Region 5	Sherry Farris	513-218-7725	sxfarris@aetna.com
Region 6	JoAnn Marston	859-669-6217	jxrose@aetna.com
Region 7	Holly Smith	815-641-7411	SmithHS@aetna.com
Region 8	Jacqulyne Pack	606-331-1075	jmpack@aetna.com
Region 8	Lori Kelley	859-302-6334	KelleyL2@aetna.com
<b>Behavioral Health</b>			
All Regions	Lori Kelley	859-302-6334	KelleyL2@aetna.com
<b>Physician Groups</b>			
TPN, KYPCA, APCP, LCPN, CHP	Abbi Wilson	270-498-1443	axwilson4@aetna.com

<b>IMPORTANT TELEPHONE NUMBERS</b>	
<b>Member Services Department</b>	<b>1-855-300-5528</b>
<b>Prior Authorization Department</b>	<b>1-888-725-4969</b>
<b>Provider Relations Department</b>	<b>1-855-454-0061</b>
<b>State Eligibility Verification</b>	<b>1-855-824-5615</b>
<b>Behavior Health 24/7 Service Line</b>	<b>1-888-604-6106</b>
<b>24-Hour Nurse Line</b>	<b>1-855-620-3924</b>

**NOTICE:** Aetna Better Health of Kentucky employees make clinical decisions regarding healthcare based on the most appropriate care, service available and existence of benefit coverage. Aetna does not reward providers or other employees for any denials of service.

Aetna does not use incentives to encourage barriers to care and service. Aetna prohibits any employee or representative of Aetna from making decisions regarding hiring, promoting, or termination of providers or other individuals based upon the likelihood or perceived likelihood that the individual or group will support or tend to support the denial of benefits.

**Notice:** Aetna Better Health of Kentucky does not reward practitioners or other employees for any denials of service. Aetna Better Health of Kentucky does not encourage or reward clinical decisions that result in decreased services.

### Aetna Better Health® of Kentucky

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