

Attention

Aetna Better Health® of Texas Providers



Rider 32 Provider Notification Language

Beginning September 1, 2025, the Texas Health and Human Services Commission (HHSC) will transition Medicaid-only services for dually eligible clients (clients who are eligible for both Medicare and Medicaid) enrolled in Medicaid managed care from a fee-for-service (FFS) to a managed care service delivery system.

Aetna Better Health of Texas will be responsible for the adjudication of these claims.

Provider Responsibilities

Providers must submit claims for Medicaid-only services for dual eligible clients enrolled in Medicaid managed care directly to the MCO. If a provider submits a claim to TMHP in error:

- TMHP will forward the claim to the appropriate MCO; and
- TMHP's claim response will reflect that the claim was forwarded, but TMHP will not issue an Electronic Remittance and Status (ER&S) Report.

TMHP will forward these claims based on dates of service on or after September 1, 2025. TMHP will no longer adjudicate these claims.

Providers should contact the member's MCO directly for claim status updates and questions related to adjudication.

For a list of Medicaid-only services impacted by this change, see the **Rider 32 Procedure Code List**, attached.

FOR QUESTIONS, PLEASE CONTACT:

CHIP

Bexar area	1-800-248-7767 (TTY: 711)
Tarrant area	1-800-245-5380 (TTY: 711)

STAR Kids

Dallas and Tarrant areas	1-844-787-5437 (TTY: 711)
--------------------------	----------------------------------

STAR (Medicaid)

Bexar area	1-866-818-0959 (TTY: 711)
Tarrant area	1-800-306-8612 (TTY: 711)