


PROVIDER BULLETIN

 AETNA BETTER HEALTH® OF FLORIDA 261 N. University Drive Plantation, FL 33324 www.AetnaBetterHealth.com/Florida	Date:	July 24, 2020
	Purpose:	Provider Bulletin: Inform providers of ABHFL Custodial and Skilled SNF Providers Prior Authorization process
	Subject:	Prior Authorization Process for Custodial Care and Skilled Nursing Facility
	Products:	All Lines of Business (MMA, LTC)
	From:	<u>Provider Relations</u>

Dear Provider,

This communication is to inform you that Aetna Better Health of Florida (ABHFL) Medicaid has separate processes when requesting a Prior Authorization for Custodial Care at a Nursing Facility and for Skilled Nursing Facility services for Acute Rehabilitation.

Please review the attached notice that contains detailed information regarding ABHFL authorization process including:

1. Custodial Care Authorizations
2. Skilled SNF/Rehabilitation Authorizations
3. COVID-19 Prior Authorization Requirements for Hospital Transfers

Additional Resources can be located on our website: AetnaBetterHealth.com/florida under for providers, authorizations.

- [Aetna Better Health of Florida Authorization Form](#)

We appreciate the excellent care you provide to our members. If you have any questions please feel free to contact us via e-mail: FLMedicaidProviderRelations@Aetna.com. You can also fax us at 1-844-235-1340 or call us through our Provider Relations telephone line: 1-844-528-5815.

Thank you

Aetna Better Health of Florida
Provider Relations Department

CONFIDENTIALITY NOTICE: This message is intended only for the user of the individual or entity to which it is addressed and may contain confidential and proprietary information. If you are not the intended recipient of the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is prohibited. If you received this communication in error, please notify the sender at the phone number above. NOTICE TO RECIPIENT(S) OF INFORMATION: Information disclosed to you pertaining to alcohol or drug abuse treatment is protected by federal confidentiality rules (42 CFR Part 2), which prohibit any further disclosure of this information by you without express written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose. The federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.

www.AetnaBetterHealth.com/florida

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Proprietary

Aetna Better Health of Florida Prior Authorizations

1. Custodial Care Authorizations

This is applicable to members who are not receiving skilled services and are waiting for LTC benefits

- Aetna Better Health of Florida Medicaid requires that you **complete the attached Prior Authorization form and fax along with the PASRR, DCF 2506a, ACHA 3008, and Cares Assessment forms to: 1-860-607-8056**
- Authorization requests may be approved for 1 month at a time, up to 120 days, provided that the requested documentation is submitted, and the nursing facility is actively working with the member and state to obtain LTC
- All authorization requests must be for continuous dates unless there is a reasonable explanation for a gap, such as the member being hospitalized
- The date of admission and prior coverage payer information are required
- Retrospective requests must be submitted to the Health Plan within 90 days of initial service date (start date); if you do not submit your request within 90 days, you will need to submit with the claim and complete clinical records
- Aetna Better Health will respond with a determination as quickly as possible, however the turnaround time for a Standard Determination is 7 calendar days and for Retrospective Requests, 30 calendar days

2. Skilled SNF/Rehabilitation Authorizations

- All requests for a SNF for rehabilitation (skilled) **admissions must be called into Aetna at 1-800-441-5501**. Choose the Provider option to be routed to Prior Authorization
- **Aetna Better Health requires an initial telephone notification so that we can expedite your request**
- Members should not be transferred to a skilled facility for rehabilitation **without prior authorization from the health plan**
- Upon call in, you will be asked to fax clinical documentation and the PASSR to Concurrent Review for an expedited review, **1-844-878-3583**
- **Aetna will make every effort to return a determination within 24 hours of your request for authorization.**

3. COVID-19 Prior Authorization Requirements for Hospital Transfers

During the COVID-19 state of emergency, Aetna Better Health of Florida (ABHFL) is committed to ensuring that Medicaid recipients diagnosed with the 2019 novel coronavirus (COVID-19) receive all the care needed to address their symptoms.

- To facilitate prompt hospital discharges and to ensure adequate inpatient hospital capacity in response to COVID-19, Aetna Better Health of Florida is waiving service authorization requirements prior to admission for hospital transfers, including:
 - inter-facility transfers:
 - transfers to a long-term care hospital; and
 - transfers to a nursing facility.
- This applies when the receiving facility is a participating provider or non-participating provider in ABHFL network.
- **Aetna Better Health of Florida requires the receiving facility to notify us of the admission within forty-eight (48) hours of the admission.**
 - At that point, Aetna Better Health of Florida may request additional clinical information to begin concurrent/continued stay reviews to facilitate care coordination and discharge planning.
- For more information regarding COVID-19 Prior Authorization Requirements for Hospital Transfers please refer to the provider notice distributed on July 14, 2020.
 - [COVID-19 Waiver of Prior Authorization Requirements for Hospital Transfers](#)