Provider Relations Newsletter

Spring 2018

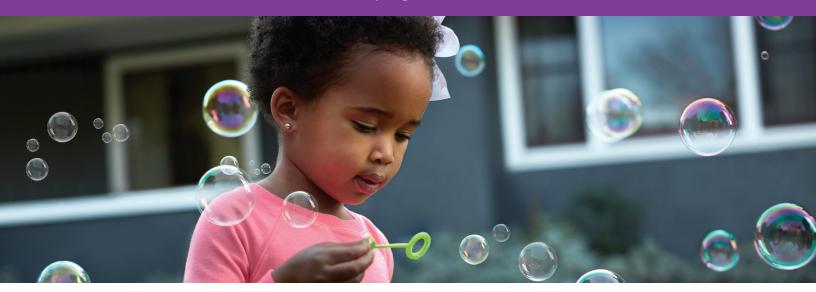


Table of Contents

Has your information changed?1
Website Upgrade1
Applied Behavioral Analysts (ABA) Regional Provider Welcome Meetings 2
ADHD: Clinical Practice Guidelines2
ID Card3
Nurse Line4
Aetna Better Health Provider Manual .4
Prior Authorization Process5
Provider Relations Liaisons6

Has your information changed?

Aetna Better Health of Louisiana is committed to having the most accurate and up-to-date information in our system for you and your group. Please contact our Provider Relations Department with updates to your phone or fax numbers, physical or mailing address, and to add your email address to our system.

For updates or changes to your demographic information, contact our Aetna Better Health of Louisiana Provider Relations by calling **1-855-242-0802**, and selecting option **2** then option **6** or send your update via email at **laprovider@aetna.com**

Website Upgrade

We've heard you! Based on your feedback, we at Aetna Better Health of Louisiana, are currently restructuring our website, aetnabetterhealth.com/louisiana, to create a more effective and efficient navigation process for your convenience. We kindly appreciate your patience as we launch this new project.

Aetna Better Health® of Louisiana



aetnabetterhealth.com/louisiana

Applied Behavioral Analysts (ABA) Regional Provider Welcome Meetings

Aetna Better Health of Louisiana would like to invite you or a representative from your organization to one of our ABA Provider Welcome Meetings. Please come with your questions and concerns, as we will have representatives available to answer your questions regarding contracting, credentialing, prior authorization, and more. Our next newsletter will

have a schedule with dates and times of all ABA Provider Welcome Meetings in your area. We hope to see you there.

For additional questions or concerns, please contact Aetna Better Health of Louisiana Provider Relations by calling **1-855-242-0802**, and selecting option **2** then option 6.

ADHD: Clinical Practice Guidelines

Attention-deficit/hyperactivity disorder (ADHD) is the most common neurobehavioral disorder of childhood and can profoundly affect the academic achievement, well-being, and social interactions of children; the American Academy of Pediatrics first published clinical recommendations for the diagnosis and evaluation of ADHD in children in 2000; recommendations for treatment followed in 2001.

Summary of key action statements:

- 1. The primary care clinician should initiate an evaluation for ADHD for any child 4 through 18 years of age who presents with academic or behavioral problems and symptoms of inattention, hyperactivity, or impulsivity (quality of evidence B/strong recommendation).
- 2. To make a diagnosis of ADHD, the primary care clinician should determine that Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition criteria have been met (including documentation of impairment in more than 1 major setting); information should be obtained primarily from reports from parents or guardians, teachers, and other school and mental health clinicians involved in the child's care. The primary care clinician should also rule out any alternative cause (quality of evidence B/strong recommendation).
- 3. In the evaluation of a child for ADHD, the primary care clinician should include assessment for other conditions that might coexist with ADHD, including emotional or behavioral (e.g., anxiety, depressive, oppositional defiant, and conduct disorders), developmental (e.g., learning and

- language disorders or other neurodevelopmental disorders), and physical (e.g., tics, sleep apnea) conditions (quality of evidence B/strong recommendation).
- 4. The primary care clinician should recognize ADHD as a chronic condition and, therefore, consider children and adolescents with ADHD as children and youth with special health care needs. Management of children and youth with special health care needs should follow the principles of the chronic care model and the medical home (quality of evidence B/strong recommendation).
- 5. Recommendations for treatment of children and youth with ADHD vary depending on the patient's age:
 - a. For preschool-aged children (4-5 years of age), the primary care clinician should prescribe evidence-based parent- and/or teacheradministered behavior therapy as the first line of treatment (quality of evidence A/ strong recommendation) and may prescribe methylphenidate if the behavior interventions do not provide significant improvement and there is moderate-to-severe continuing disturbance in the child's function. In areas where evidence-based behavioral treatments are not available, the clinician needs to weigh the risks of starting medication at an early age against the harm of delaying diagnosis and treatment (quality of evidence B/ recommendation).

ADHD: Clinical Practice Guidelines Continued from page 2

- b. For elementary school-aged children (6-11 years of age), the primary care clinician should prescribe US Food and Drug Administrationapproved medications for ADHD (quality of evidence A/strong recommendation) and/ or evidence-based parent- and/or teacheradministered behavior therapy as treatment for ADHD, preferably both (quality of evidence B/strong recommendation). The evidence is particularly strong for stimulant medications and sufficient but less strong for atomoxetine, extended-release guanfacine, and extendedrelease clonidine (in that order) (quality of evidence A/strong recommendation). The school environment, program, or placement is a part of any treatment plan.
- c. For adolescents (12-18 years of age), the primary care clinician should prescribe Food and Drug Administration-approved medications for ADHD with the assent of the adolescent (quality of evidence A/strong recommendation) and may prescribe behavior therapy as treatment for ADHD (quality of evidence C/recommendation), preferably both.
- 6. The primary care clinician should titrate doses of medication for ADHD to achieve maximum benefit with minimum adverse effects (quality of evidence B/strong recommendation).

ID Card

Members should present their ID card at the time of service.

The member ID card contains the following information:

- Member Name
- Member ID Number
- Date of Birth of Member
- · Member's Gender
- PCP Name
- PCP Phone Number
- Effective Date of Eligibility
- Claims address
- Emergency Contact Information for Member

- Health Plan Name
- Aetna Better Health of Louisiana's website
- Carrier Group Number
- RX Bin Number
- RX PCN Number
- RX Group Number
- · CVS Caremark Number (For Pharmacists use only)

Sample ID Card

Front:

Back:

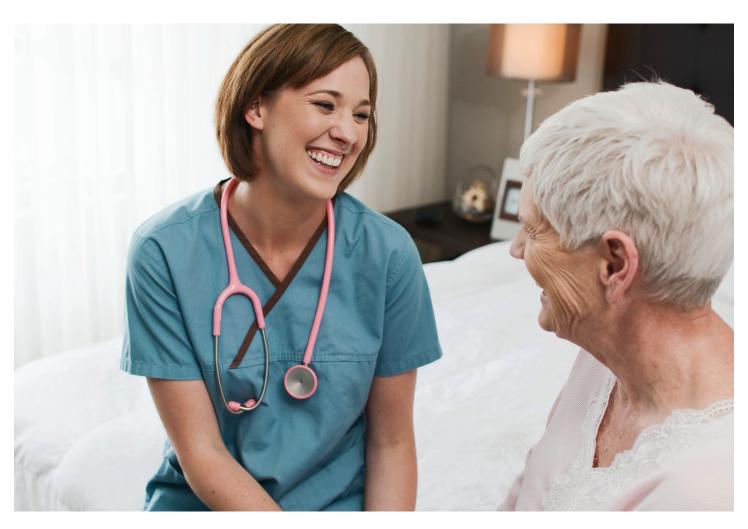
aetna^a Aetna Better Health® of Louisiana **Healthy Louisiana** Member ID# 000000000-00 Date of Birth 00/00/0000 Member Name Last Name, First Name PCP Last Name, First Name PCP Phone/24 Hours 000-000-0000 Effective Date 00/00/0000 Pharmacy Copay \$.50 - \$3 RxBIN: 610591 RxPCN: ADV RxGRP: RX8834 Pharmacist Use Only: 1-855-364-2977 aetnabetterhealth.com/louisiana THIS CARD IS NOT A GUARANTEE OF EUGIBILITY, ENROLLMENT OR PAYMENT.

2400 Veterans Memorial Blvd., Suite 200, Kenner, LA 70062 Member Services & Filing Grievance 24/7 1-855-242-0802, TTY 711 Behavioral Health Crisis Line 24/7 1-855-242-0802 Teladoc - physical telehealth 1-800-835-2362 Breakthrough - behavioral telehealth 1-888-977-5703 Nurse Line 24/7 1-855-242-0802 Pharmacy 1-855-242-0802 Fraud & Abuse Hotline 1-855-725-0288 Report Medicaid Fraud 1-800-488-2917 Emergency cares If you are having an emergency, call 911 or go to the closest hospital. You don't need preapproval for emergency transportation or emergency care in the hospital. Provider Services and Prior Authorization 1-855-242-0802 Send medical / behavioral health claims to Electronic claims P.O. Box 61808 Phoenix, AZ 85082-1808 LAT

Nurse Line

Aetna Better Health of Louisiana offers our members access to a nurse 7 days a week, 24-hours a day to answer their health care questions at **1-855-242-0802**, TTY **711**. The nurse line does not take the place of you

as their PCP. But, if it's late at night or you can't reach your PCP, the nurses can help you decide what to do. The nurses can also give you helpful hints on how to help you feel better and stay healthy.



Aetna Better Health Provider Manual

The Provider Manual serves as a resource and outlines operations for Aetna Better Health of Louisiana's Healthy Louisiana program. Through the Provider Manual, providers should be able to identify information on the majority of issues that may affect working with Aetna Better Health of Louisiana. Medical, dental, and other procedures are clearly denoted within the manual.

Aetna Better Health of Louisiana is updated and made available to providers via the Aetna Better Health website at www.aetnabetterhealth.com/louisiana. Aetna Better Health of Louisiana annually notifies all new and existing participating providers in writing that the Provider Manual is available on the website. The Aetna Better Health of Louisiana Provider Manual is available in hard copy form at no charge by contacting

Provider Services at **1-855-242-0802**. Otherwise, for your convenience Aetna Better Health of Louisiana will make the Provider Manual available on our website at **aetnabetterhealth.com/louisiana**.

The manual is intended to be used as an extension of the Participating Health Provider Agreement, a communication tool and reference guide for providers and their office staff.

For the purpose of the manual, "provider" refers to practitioners (licensed health care professionals who provide health care services) and providers (institutions or organizations that provide services) that have agreed to provide Covered Services to health plan members pursuant to a Participating Health Provider Agreement ("contract").



Prior Authorization Process

Aetna Better Health of Louisiana's pharmacy Prior Authorization (PA) processes are designed to approve only the dispensing of medications deemed medically necessary and appropriate. Our pharmacy PA process will support the most effective medication choices by addressing drug safety concerns, encouraging proper administration of the pharmacy benefit, and determining medical necessity. Typically, we require providers to obtain PA prior to prescribing or dispensing the following:

- · Injectables dispensed by a pharmacy provider
- Non-formulary drugs that are not excluded under a State's Medicaid program
- Prescriptions that do not conform to Aetna Better Health of Louisiana's evidence-based utilization practices (e.g., quantity level limits, age restrictions or step therapy)
- Brand name drug requests, when a "A" rated generic equivalent is available

Aetna Better Health of Louisiana's Medical Director oversees generating adverse decisions, including a complete denial or approval of a different medication. Using specific, evidence-based PA pharmacy review guidelines Aetna Better Health of Louisiana's Medical Director may require additional information prior to making a determination as to the medical necessity of the drug requested. This information may include, but is not limited to, evidence indicating:

- Formulary alternatives have been tried and failed or cannot be tolerated (i.e., step therapy)
- There are no therapeutic alternatives listed in the formulary
- There is no clinical evidence that the proposed treatment is contraindicated (i.e., correctly indicated as established by the Federal Drug Administration (FDA) or as accepted by established drug compendia)

The prescribing provider and member will be appropriately notified of all decisions in accordance with regulatory requirements. Prior to making a final decision, our Medical Director may contact the prescriber to discuss the case or consult with a board certified physician from an appropriate specialty area such as a psychiatrist.

Aetna Better Health of Louisiana will fill prescriptions for a 72-hour supply if the member's prescription has not been filled due to a pending PA decision. Aetna Better Health of Louisiana members must have their prescriptions filled at a network pharmacy to have their prescriptions covered at no cost to them. For a complete list of drugs listed within the therapeutic classes, please visit our website at **aetnabetterhealth.com/louisiana**, under provider, then pharmacy for detailed information on pharmacy.

Provider Relations Liaisons

If you have any issues or concerns, please contact your Aetna Better Health of Louisiana Provider Relations Liaison; listed below by their regional assignment.

Aetna Better Health® of Louisiana **Program Service Area**

Region	Provider Relations Liaison and Email Address	Phone number
1	Kathleen Dickerson <u>DickersonK2@aetna.com</u>	504-462-9986
2	Aieta Davis <u>DavisA12@aetna.com</u>	225-316-3106
3	Eve Serbert SerbertE@aetna.com	504-220-1413
4	Brandy Wilson Wilson B8@aetna.com	504-264-4016
5	Adrian Lozano Lozano A@aetna.com	504-402-3417
6	Jennifer Thurman <u>ThurmanJ@aetna.com</u>	318-413-0725
7	Chemeka Turner <u>TurnerC7@aetna.com</u>	318-349-6493
8	Chemeka Turner <u>TurnerC7@aetna.com</u>	318-349-6493
9	Marion Dunn <u>DunnM7@aetna.com</u>	504-444-6569

For any questions or to contact your Provider Relations Liaison, please contact Aetna Better Health of Louisiana Provider Relations by calling **1-855-242-0802** and selecting option **2** then option **6**.

