



COVID-19 Communications Update (effective April 19, 2021): Changes in Prior Authorization/Precertification and Admissions Protocols for Aetna Better Health of Michigan

Please check back for any new updates to this important information

Standard Authorization Process

Aetna understands that health care systems in Michigan are experiencing increased demand and urgency due to the difficult circumstances created by COVID-19. For this reason, Aetna, a CVS Health company, is applying measures to help members access care and reduce the administrative burden for providers. Skilled Nursing facilities will not require prior authorization at this time.

Temporary changes to reduce prior authorizations protocols are effective from April 19, 2021 through May 9, 2021. At that time, we will re-evaluate status.

Aetna Better Health reminds providers that:

- The SNF's will be required to **notify** Aetna of admissions within 48 hours. Providers may submit their request either by fax or phone. (refer to the back of the member's ID cards for the correct telephone number).

The post-acute care facility would also be required to send medical records for concurrent review within three days of the initial admission. Medical records can be sent to Aetna by fax to 855-734-9393

- Please include the patient's name and Member ID# on the cover sheet.
- Aetna requires:
 - Hospital history and last two to three days progress notes
 - Any information that demonstrates a need for Post-Acute care
 - Anticipated Discharge Plan with estimated length of stay

In addition, Aetna will continue to waive the three-day prior hospitalization requirement for skilled nursing facility stays as part of our normal course of business

Regulations regarding post-acute care precertification and admissions protocols for Aetna Medicaid members vary by state and, in some cases, may change in light of the current situation. Providers are encouraged to call their provider services representative for additional information.