

Aetna Better Health® of Michigan
1333 Gratiot Avenue, Suite 400
Detroit, MI 48207
1-866-316-3784



Notice Date
April 30, 2017

Cross claim payment policy

Dear Aetna Better Health Provider,

Effective **May 30, 2017**, Aetna Better Health of Michigan and Aetna Better Health Premier Plan will implement an enhancement to our claim payment policies that are applied during the claims adjudication process.

Aetna has developed the technology to look across claim types during claims adjudication. This will allow Aetna to correctly adjudicate claims where conflicts may exist between professional (CMS-1500) claims and institutional (CMS-1450) claims.

For example:

- A procedure is reported by a physician in a place of service indicating a physician's office while the same procedure is also reported by an ambulatory surgical center on a facility claim. This conflict would be identified so that the physician receives the appropriate reimbursement.
- A home infusion service is reported for a member indicating the service took place in a patient's home on a CMS-1500 but a CMS-1450 claim indicates that the member was inpatient during that period of time. This conflict would be identified so that the home infusion provider receives appropriate reimbursement.

This new payment policy capability will enable us to evaluate services across claim types in order to more accurately and appropriately adjudicate services.

We're here to help

If you have any questions, call your provider relations representative at **1-855-676-5772**, prompt 2 then prompt 6. Thank you for the quality care you give our members.

Sincerely,

Provider Relations
Aetna Better Health of Michigan