



## Aetna Better Health<sup>®</sup> of New Jersey

### Contents

Appropriate Testing  
for Pharyngitis (CWP)

New Jersey Head  
Start Program

Depression Screening

Use of Imaging  
Studies for Low Back  
Pain  
(LBP)

Provider Manual &  
Quick Reference  
Guide

Hysterectomy and  
Sterilization Requests

Cultural Competency  
Resources and  
Training

Abuse and Neglect

Provider Toolkit &  
Clinical Practice  
Guidelines

Balance Billing is  
Prohibited

Population Health  
Management  
Programs

Blood Lead Screening  
Requirements

At-Home Lead  
Testing

Lead Care  
Management

Role of Primary Care  
Provider (PCPs) in  
Dental Care

Electronic Verification  
Visits (EVV)

LIBERTY DENTAL:  
2026 Instructions for  
age selection



# Provider Newsletter

## Spring 2026

### Appropriate Testing for Pharyngitis (CWP)

Most cases of pharyngitis are caused by viral infections, and physical examination alone cannot reliably distinguish between viral and streptococcal pharyngitis. Consequently, many children receive unnecessary antibiotics for presumed strep infections. However, a simple lab test available in the office can determine if strep pharyngitis is present. The Rapid Antigen Detection Test (RADT), commonly known as the "rapid strep test," helps avoid the prescription of unnecessary antibiotics. The HEDIS measure evaluates the percentage of children who underwent a rapid strep test before being prescribed antibiotics for pharyngitis.

### New Jersey Head Start Program

New Jersey Head Start Programs offer comprehensive early childhood education, health, nutrition, and parent involvement services to low-income children and their families. These federally funded programs are designed to prepare children from birth to age five for school by enhancing their cognitive, social, and emotional development. Head Start programs in New Jersey provide a variety of services, including educational activities, medical and dental care, healthy meals and snacks, and opportunities for indoor and outdoor play. Additionally, they offer support for children with disabilities and educate parents on making healthy choices for their families. With centers located across all 21 counties, New Jersey Head Start Programs ensure that children from diverse backgrounds receive the support they need to succeed in school and beyond. The impact of these programs on the community is profound. By providing early childhood education and essential services, Head Start programs help break the cycle of poverty, giving children a strong foundation for future academic and personal success. This approach not only benefits individual families but also strengthens the community by fostering a more educated, healthy, and resilient population.

## Depression Screening

Don't forget to screen your patients, our members for depression.

A depression screening is used to:

- Help diagnose depression
- Understand how severe depression may be
- Help figure out what type of depression you have

There are different types of depression. The most common types are:

- Major depression, also called major depressive disorder
  - The symptoms typically make it difficult to work, sleep, study and eat. With major depression, you have symptoms most of the time for at least two weeks.
- Persistent depressive disorder, also called dysthymia
  - The symptoms are less severe than major depression, but they last much longer, usually for at least two years.
- Seasonal affective disorder (SAD)
  - This form of depression usually happens in winter when there's less sunlight. Most people with SAD tend to feel better in the spring and summer.
- Postpartum depression
  - This is major depression that happens after giving birth. It's more severe and lasts longer than mild unhappiness and other mood changes that are often called the "baby blues."
- Major depression may also begin during pregnancy.
  - Depression that happens during or shortly after pregnancy is called "perinatal depression." Medical experts recommend routine depression screening during pregnancy and after birth.

## Use of Imaging Studies for Low Back Pain (LBP)

Aetna Better Health of New Jersey offers a variety of toolkits and provider resources related to HEDIS and CAHPS. To access these valuable tools, please visit our Resources Page. Our website also features Clinical Practice Guidelines that are easy to review, helping providers deliver high-quality, consistent care while effectively utilizing services and resources. These guidelines include treatment protocols for specific conditions and preventive health measures.

Visit our [Resources Page](#) to access some helpful links to support your practice.

## Provider Manual & Quick Reference Guide

You can view the Provider Manual and Quick Reference Guide by visiting [our website](#).



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## Hysterectomy and Sterilization Requests

Hysterectomy is a covered service if the primary medical indication for the hysterectomy is other than sterilization. Specific Medicaid requirements must be met and documented on the Hysterectomy Receipt of Information form (FD 189). A copy of the form is available at on [our website](#). You must attach it to the claim prior to submission. Claims for hysterectomy and sterilization must be sent by mail/paper and cannot be electronic.

We require providers to submit a properly completed FD-189 form with the request for precertification for all non-emergent hysterectomies.

**Claim payment for a hysterectomy that lacks a copy of the Hysterectomy Receipt of Information form may only be made if the physician performing the hysterectomy certifies that:**

- The woman was already sterile and the cause of sterility is stated
- The hysterectomy was required because of a life-threatening emergency and a description of the emergency is stated.

Specific Medicaid requirements must be met and documented on the HHS 687 Consent for Sterilization form. The form must be completed and signed by the member at least 30 days in advance of both female and male sterilization procedures.

If the procedure is performed less than 30 days from the consent form execution date due to a premature birth, the expected date of birth must be noted in the consent form. A copy of the form is on [our website](#). The form must be attached to the claim prior to submission. The individual who has given voluntary consent for a sterilization procedure must be at least 21 years old at the time the consent is obtained and must be a mentally competent person.

## Cultural Competency Resources and Training

**Culture is a major factor in how people respond to health services.**

**It affects their approach to:**

- Coping with illness
- Accessing care
- Taking steps to get well

**Patient satisfaction and even positive health outcomes are directly related to good communication between a member and his or her provider.**

A culturally competent provider effectively communicates with patients and understands their individual concerns. It is important to make sure patients understand their care regimen. Each segment of our population requires special sensitivities and strategies to embrace cultural differences.

**Training resources for you**

As part of our cultural competency program, we encourage you to access information on culturally competent care through the Office of Minority Health's web based program: A Physician's Guide to Culturally Competent Care. You can access this program and other cultural competency resources in the [Cultural competency](#) section of our website.



## Abuse and Neglect

We want to work with you to ensure the safety of your patients, our members. As mandated by New Jersey Administrative Code and New Jersey Statutes Annotated (N.J.A.C. 8:43G-12.10(b), & N.J.S.A. 52:27D-409), all providers who work or have any contact with an Aetna Better Health<sup>®</sup> of New Jersey member are required as “mandated reporters” to report any suspected incidences of physical abuse (domestic violence), neglect, mistreatment, financial exploitation, and any other form of maltreatment of a member to the appropriate state agency. A full version of the New Jersey Administrative Code can be found on the [State of New Jersey Office of Administrative Law’s website](#).

You must also report suspected or known child abuse and/or neglect to the Division of Child Protection and Permanency (DCP&P) and, if relevant, the law enforcement agency where the child resides. Critical incidents must be reported if the:

- Alleged perpetrator is a parent, guardian, foster parent, relative caregiver, paramour, any individual residing in the same home, any person responsible for the child’s welfare at the time of the alleged abuse or neglect, OR
- Any person who came to know the child through an official capacity or position of trust (for example: health care professionals, educational personnel, recreational supervisors, members of the clergy, volunteers or support personnel) in settings where children may be subject to abuse and neglect

For more information on Abuse and Neglect, review Chapter 22 of our [Provider Manual](#).

If the child is in immediate danger, call one of these resources:

- **911**
- **1-877 NJ ABUSE (1-877-652-2873)**
- The Division of Child Protection and Permanency (DCP&P) **1-800-792-8610**

## Provider Toolkit & Clinical Practice Guidelines

Aetna Better Health of New Jersey provides several toolkits and provider resources related to HEDIS and CAHPS. Please visit our [Resources Page](#) to access some helpful links to support your practice. Our website also provides helpful Clinical Practice Guidelines for easy review to help our providers give members high-quality, consistent care with effective use of services and resources. These include treatment protocols for specific conditions, as well as preventive health measures. Please visit our [Clinical Guidelines and policy bulletins](#) for quick access to these guidelines and policies.



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## Balance Billing is Prohibited

**Providers may not bill Aetna Better Health<sup>®</sup> of New Jersey members for any services that are covered by NJ Medicaid and/or Aetna Better Health<sup>®</sup> of New Jersey.**

- Any member copayments you must collect are included in the benefit listing on our website. Please note that copayments are not considered balance billing.
- Per your contract with us, when a provider receives a Medicaid/NJFC FFS or managed care payment, the provider shall accept this payment as payment in full and shall not bill the beneficiary or anyone on the beneficiary's behalf for any additional charges.

**NOTE:** Providers can make payment arrangements with a member for services that are not covered by NJ Medicaid and Aetna Better Health<sup>®</sup> of New Jersey only when they notify the member in writing in advance of providing the service(s), and the member agrees. We want to make sure you are aware of these requirements because we value your partnership with us.

Federal and State laws are clear that providers are prohibited from balance billing Medicaid beneficiaries (42 USC 1395w-4(g)(3)(A), 42 USC 1395cc(a)(1)(A), 42 USC 1396a(n), 42 U.S.C. § 1396u-2(b)(6), 42 CFR 438.106, NJAC 11:24-9.1(d)9 and/or 15.2(b)7ii.

Before you decide to send accounts to any collection agency you may be using, it is critical that you **NOT** include Aetna Better Health<sup>®</sup> of New Jersey member accounts.

**Providers who balance bill members could face the following consequences:**

- Termination from the ABHNJ network
- Referral to the NJ Medicaid Fraud Division to open an investigation into the provider's action
- Referral to the Federal Department of Health & Human Services, US Office of Inspector General (HHS-OIG).

## Population Health Management Programs

Population health management programs are available to help support members in their health care journey. We have special programs available for members who are managing conditions or just trying to stay healthy. Any provider caring for a member can make a referral if they believe it may be of value to a member.

You can learn about these programs online [Population Health Management Programs | Aetna Medicaid New Jersey](#) or in your provider handbook. You can also call **1-855-232-3596 (TTY: 711)**.



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## Blood Lead Screening Requirements

**Every child enrolled in NJ FamilyCare program, must be given a blood lead test at the following ages:**

- Complete a blood lead test at 12 months of age (between 9-18 months)
- AND again at 24 months of age (between 18-26 month)
- Children between 26 and 72 months of age who have NOT previously had a blood lead test should be tested immediately.

Capillary (finger-stick) specimen, such as LabCorp's MedTox filter paper and venous specimen testing are both acceptable. Venous specimen testing must be completed at a NJ licensed commercial lab. Children with elevated blood lead levels (5 ug/dl or greater) should be reported to the health plan and referred to the plan's Lead Case Management Program. Our Program emphasizes prevention, continuity of care, coordination of care, and links members to services as necessary across providers and settings.

## At-Home Lead Testing

We have partnered with **LabCorp & Professional Technicians, Inc. (PTI)**, a reliable mobile laboratory, to complete lab collection services for lead testing in our member's home. Testing will be performed by a trained technician with just two drops of blood from the child's finger. This is a covered service at no cost to the member.

To order at-home lead testing, fax the doctor's order for a lead test directly to the mobile laboratory, PTI, at **1-215-364-0459**.

### **Be sure to include:**

- Your LabCorp Client Account number, if applicable
- Diagnosis codes
- And patient demographic information (name/DOB/address/phone/gender).

PTI will contact the patient to schedule a home visit for lab collection and results will be sent directly to your office once processed.

For questions regarding lead screening services through PTI, contact PTI directly by calling **1-215-364-4911** or contact **Provider Services 1-855-232-3596 (TTY: 711)**.

## Lead Case Management

Members have access to this program at no extra cost. If a child has elevated blood lead levels of 5 ug/dL or greater, you'll want to refer them to this program. Our team will coordinate care with the local health departments to identify environmental hazards. We'll talk with the member's family about their health concerns and goals. And they'll get a personalized care plan to help guide them every step of the way.

### **To refer a child to our Lead Care Management Program:**

- Call Member Service at **1-855-232-3596**
- Fax the completed lead test(s) to us directly: **959-282-1622**.

Be sure to include a note that says you're referring the member for Lead Care Management.



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## Role of Primary Care Providers (PCPs) in Dental Care

Primary Care Providers (PCPs) are essential in promoting dental health. They perform basic oral screenings, remind members of the need for two annual preventive dental visits, and conduct yearly cavity assessments for children up to age twenty. PCPs should refer children to a dentist by age one or soon after their first primary tooth erupts. Coordination between behavioral and physical health providers is crucial for accurate diagnosis and treatment of behavioral disorders, ensuring appropriate use of psychotropic medications.

PCPs are encouraged to apply fluoride varnish, perform dental assessments, and promote routine oral health visits. These services can be billed up to four times a year with a CPT code, separate from dental services.

After medical visits, PCPs should refer patients to their dental home, listed on their Aetna Better Health<sup>®</sup> of New Jersey dental ID card.

## Electronic Verification Visits (EVV)

Aetna Better Health of New Jersey values our partnership with your practice to serve the people in the state of New Jersey by providing quality health care and accessible medically-necessary services. Our providers are one of the most critical components of our service delivery approach and we are grateful for your participation. Providers delivering services in the home and community-based setting must meet EVV Phase 2 (Skilled Nursing and Therapy Services) compliance requirements. The six required EVV elements include:

1. Type of service performed;
2. Individual receiving the service;
3. Date of the service;
4. Location of service delivery;
5. Individual providing the service;
6. Time the service begins and ends

The following services requires EVV when rendered in a home or assisted living setting: Skilled Nursing, Home Health, Private Duty Nursing, Personal Care Services (Individual and Group), and Therapies (Speech, Physical, Occupational, Cognitive).

If you are experiencing challenges, or have questions, please email **[AetnaEVVCompliance@Aetna.com](mailto:AetnaEVVCompliance@Aetna.com)**. We want to keep you informed and up-to-date on all pertinent information. For more information, review EVV newsletter 32-28, and Updated Billing Policy for Home Health Care/Personal Care Services newsletter 33-11, located on the State's **[NJMMIS website](#)**.

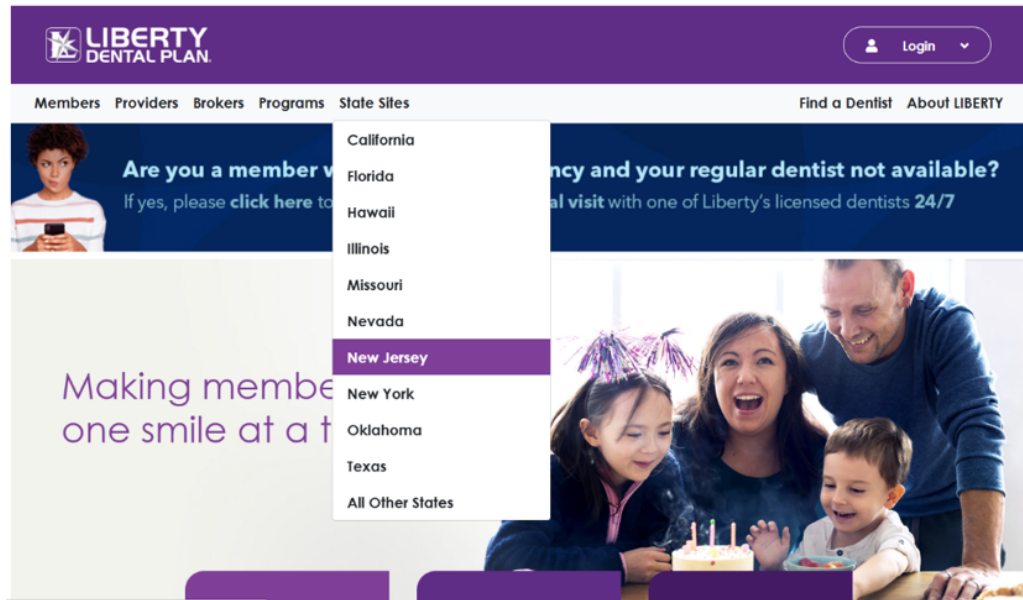


Aetna Better Health  
of New Jersey

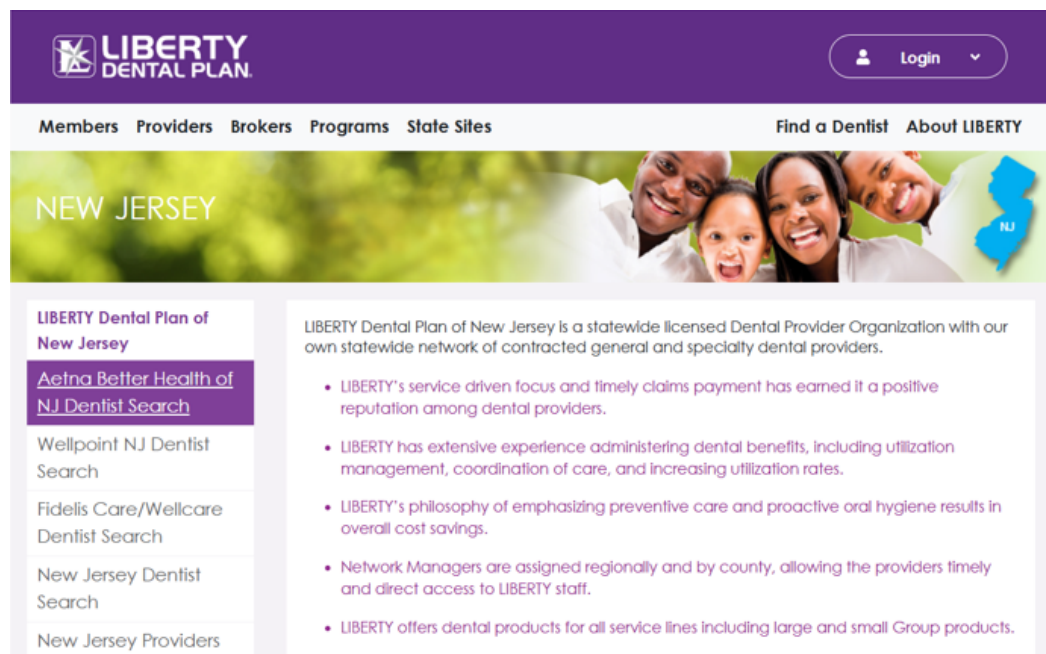
## LIBERTY DENTAL: 2026 Instructions for age selection

We're pleased to share an enhancement to the dental provider search experience that makes it easier to connect our youngest members with appropriate care. Providers can now be identified based on the age of the patient, including the ability to find dental providers who are willing to see children for their first dental visit before 12 months of age. This additional search functionality supports early preventive care and helps ensure families are guided to providers equipped to meet age-specific needs. The steps below outline how to locate dental providers using these new age-based search options.

Start by visiting: [www.libertydentalplan.com](http://www.libertydentalplan.com), and select **New Jersey** from the **State Sites** drop-down.



Click the **Aetna Better Health of New Jersey Dental Search** on the left side of the page.



# LIBERTY DENTAL: 2026 Instructions for age selection

Click the highlighted Click here to **Find a Dentist**.

Need a new dental office home? Click here to request an office transfer. [Request an Office Transfer](#)

- [The NJFC Directory of Dentists Treating Children under the Age of 6](#)
- [The NJFC Directory of Dentists Treating Children Under the Age of 1](#)
- [The NJFC Directory of Dentists Treating Children Age 1-3](#)
- [The NJFC Directory of Dentists Treating Children Age 3-5](#)
- [Directory of Adult Providers](#)
- [Directory of Child Providers](#)
- [Directory of Dentists Treating Members with Intellectual Disabilities Adult](#)
- [Directory of Dentists Treating Members with Intellectual Disabilities Child](#)

[Click here for Find a Dentist](#)

A zip code must be entered and select **Aetna Better Health of New Jersey- NJ Family Care** from **Network** drop down.

Search by Network

Specialty

Address  
  
[Use Current Location](#)

Network

Dentist last name (optional)

[More Search Options](#)

[Find a dentist](#)

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**EXPLORE** **PROGRAM** **ABOUT** **MEMBER RESOURCES**

<a href="#">Members</a>	<a href="#">Medicaid</a>	<a href="#">Overview</a>	<a href="#">Contact Member Services</a>
<a href="#">Providers</a>	<a href="#">Medi-Cal</a>	<a href="#">Careers</a>	<a href="#">Find a Dentist</a>
<a href="#">Brokers</a>	<a href="#">Commercial</a>	<a href="#">Compliance</a>	<a href="#">Download Mobile App</a>

# LIBERTY DENTAL: 2026 Instructions for age selection

Click the + sign for **More Search Options**.

Search by Network

Specialty:  Your regular dentist for checkups, cleanings, and fixing cavities. Your dentist can help you find a specialty dentist if you need one.

Address:  [Use Current Location](#)

Network:  [More Search Options](#)

Dentist last name (optional):

Select **Patient age range** drop-down. Select all applicable ages and select **Find a dentist** to view the providers.

Optional

Dentist race:  Languages spoken:

Dentist ethnicity:  Office hours:

Special needs:  Patient age range:

Accepting new patients:  Teledentistry:

**Select All**  
Less than 12 months (less than 1 year)  
Between 12 and 35 months (between 1-3 years)  
Between 36 and 71 months (between 3-5 years)  
More than 72 months (more than 5 years)