

Care for Developmentally Disabled Patients

Providing care for developmentally disabled patients can look different than care for the general population. Patients who have developmental disabilities could have sensory issues, communicate differently, or understand information differently. So, it is crucial to consider these factors and modify how we care for this population.

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In this guide, we provide useful information for providers on how to effectively care for the developmental disability population. Our goal is for this population to receive the quality care needed that drive better health outcomes to cover all the facets of their health. In this educational guide, we will share information and tips on how to get patients with developmental disabilities in for appointments, how to find community resources and other reference guides to help you treat this population and more.

What is a Developmental Disability?

Developmental Disabilities is a broad term that includes a range of disabilities that fall into four main categories:

- Sensory related disabilities
- Nervous system disabilities
- Metabolic disabilities
- Degenerative disorders



Developmental disabilities cause limitations in function specifically affecting an individual's mental and physical health while also causing impairment in physical, learning, language, or behavior areas. Developmental disabilities can impact persons of all ages, but they are usually diagnosed before the age of 22. They impact a person's day to day functioning, and usually lasts throughout their lifetime.

Specific Developmental Disability Conditions

Attention-Deficit Disorder (ADD): ADD is considered a common neurodevelopmental disorder for children and typically continues into adulthood. Children with ADHD have difficulty paying attention, can be impulsive, and may be hyperactive.

Autism Spectrum Disorder (ASD): ASD is a disability that causes the child or adult to experience challenges in social, behavioral, and communication areas. Persons with ASD can range from gifted to severely challenged.

Cerebral Palsy (CP): CP is disorder that affects a person physically, specifically impacting their ability to move and sustain balance and posture. It is considered the most common disability in childhood.

Fetal Alcohol Spectrum Disorders (FASDs): FASDs are conditions that are caused by mothers who drink alcohol during pregnancy. They can be prevented if a mother does not drink alcohol while pregnant.

Intellectual Disability: Intellectual Disabilities cause impairments to a person's ability to learn and function at an expected level. It may take longer for children with Intellectual Disabilities to learn, speak, walk, dress, or eat without help.

Muscular Dystrophy: Muscular Dystrophy is considered a muscle disease that is caused by gene mutations. This disability causes impairments in a person's mobility and muscle weakness.

Other conditions include: Fragile X Syndrome, Hearing Loss, Kernicterus, Language and Speech Disorders, Learning Disorders, Tourette Syndrome, and Vision Impairment.

For more information about specific Developmental Disability conditions, please visit [CDC.gov](https://www.cdc.gov).

General Tips to Work with This Population

A developmental disability can affect physical, cognitive, learning, language and behavioral development. This has an impact on how a person grows and functions. These disabilities may impact a person's ability to perform in school, work, and in social settings.

Keep these helpful tips in mind:

- Not all disabilities are visible
- Some people have temporary disabilities
- A person's wheelchair is a part of his or her personal space
- Be an active listener with those who have difficulty speaking
- Use a calm and reassuring voice with short and simple, concrete words for communicating
- Pay attention to both verbal and nonverbal communications
- Acknowledge that the person's feelings are understandable
- Emphasize what the person **can** do



- The person may have trouble performing activities of daily living (ADLs) independently such as bathing, dressing, toileting, or feeding themselves.
- If their physical functioning is impaired, the person may have trouble using their muscles and unable to control muscle movements. This would impair their ability to move from one place to another.
- The person may have trouble communicating with others or has difficulty understanding the speech of others, writing, or reading. Communication difficulties may include the ability to understand social situations. They may have trouble understanding social cues and nonverbal communication.
- The person may have difficulty performing in a work setting which would affect their ability to support themselves independently. They may need to rely on others to care for them. They may feel the inability to make choices for themselves and to control the direction of their own lives.
- The person may have trouble coping with stressors. They may feel angry, frustrated, resentful, depressed, hopeless, guilty, and even embarrassed. They may have a hard time expressing their needs, wants, and feelings to others.

HEDIS Measures and Preventive Care

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)
 HEDIS® Measurement Year 2020 & 2021 Measures

Measure Description: The percentage of members 3-17 years of age who had an outpatient visit with a PCP or OB/Gyn and who had evidence of the following during the measurement year:

- BMI percentile documentation*
- Counseling for nutrition
- Counseling for physical activity

*Because BMI norms for youth vary with age and gender, this measure evaluates whether BMI percentile is assessed rather than an absolute BMI value.

Definitions
 BMI percentile: The percentile ranking based on the CDC's BMI-for-age growth charts, which indicates the relative position of the patient's BMI number among others of the same gender and age.

Strategies for Improvement

- Utilize NCQA coding tips to actively reflect care rendered.
- Document BMI percentile, discussion of nutrition and physical activity during at least one office visit annually e.g. sick visit or well-child exam.
- Document all screenings in the medical record, including follow-ups, results and anticipatory guidance given.

Documentation Requirements
 For documentation in the medical record refer to the following table to identify what meets criteria:

Numerator Codes
 There is a large list of approved NCQA codes used to identify the services included in the WCC measure.

Quality Measure Toolkit
 AetnaBetterHealth.com/Pennsylvania

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HEDIS is data used to measure the timeliness and effectiveness of care members are receiving. This includes access to care, utilization of care, and members' satisfaction with care. It is a Pennsylvania state requirement, and the requirements are followed by NCQA guidelines. HEDIS also evaluates performance in key areas such as quality of care, access to care, satisfaction with the care members receive and provides a clear picture of the outcomes of care members receive in specific areas.

While the Developmental Disability population is complex, monitoring and measuring care delivered is important and must be done for the Developmental Disability population to achieve better health outcomes. Monitoring HEDIS scores is an effective way of helping people with Developmental Disabilities close gaps in care and assist them in getting the necessary preventive care that are needed for early detection. Early intervention can help lead to positive health outcomes.

HEDIS Measures That Encompass Preventive Care

- Well-Child Visits** include health history, physical developmental history, mental development history, physical exam, and health education or anticipatory guidance.
 - W30 (Well-Child Visits in the first 30 months of life)** includes children 15 months of age with six or more visits with their PCP and also includes children 30 months with two or more visits in the last 15 months.
 - WCV (Child and Adolescent Well-Care Visits)** includes the percentage of members ages 3-21 years of age who had at least one comprehensive well-care visit during the measurement year.
- WCC (Weight Assessment and Counseling for Children)** include members 3-17 years of age who had an outpatient visit with a PCP or OB/GYN and have evidence of all three components in the measurement year. The three components are BMI percentile documentation, Counseling for nutrition, and Counseling for physical activity.
- ABA (Adult BMI Assessment)** includes member 18-74 years of age who had an outpatient visit and whose body mass index BMI was documented during the measurement year or the prior year.
- ADV (Annual Dental Visit)** include members 2-20 years of age who had at least one dental visit during the measurement year.
- TOPC (Timeliness of Prenatal Care)** includes the percentage of deliveries during the measurement year that received a prenatal visit in the first trimester on or before the enrollment start date or within 42 days of enrollment in the organization. The measurement year for this measure is October 8th of the previous year to October 7th of the current year.
- PPC (Postpartum Care)** includes the percentage of deliveries between the measurement year (October 8th of the previous year to October 7th of the current year) that completed a postpartum visit on or between 7 to 84 days after delivery.

- **CCS (Cervical Cancer Screening)** Includes women 21-64 years of age who were screened for cervical cancer.
- **BCS (Breast Cancer Screening)** includes women 52 to 74 years of age who had a mammogram to screen for breast cancer.
- **CIS (Child Immunization Status)** includes children 2 years of age who had four diphtheria, tetanus, and acellular pertussis (DTaP); three polio (IPV); one measles, mumps and rubella (MMR); three haemophilus influenza type B (HiB); three hepatitis B (HepB), one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday.
- **IMA (Immunizations for Adolescents)** includes adolescents 13 years of age who had one dose of meningococcal vaccine, one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine, and have completed the human papillomavirus (HPV) vaccine by their 13th birthday.
- **LCS (Lead Screening in Children)** includes children 2 years of age who had one or more capillary or venous lead blood test for lead poisoning on or before their second birthday.

How to Prepare Your Patients for Preventive Care Services

- Build a relationship with the patient and the caregivers
- Explain to the caregiver about how important it is for them to be familiar and reliable with the patient's health
- Ask the caregiver to bring a comforting object from home so it alleviates an anxiety for the patient
- Check for any accommodations that the patient might need. (i.e., make sure to accommodate patient's with sensory issues)
- If a patient is anxious to visit with the doctor, have them come in a few times before the appointment, without any examinations or treatments, so they get acclimated and feel comfortable in the office
- Respect the patient's limits. If they are unable to finish the visit, they may need to come back again
- Prepare office staff for when a new patient with DD will be arriving
- Attempt to schedule the visit time so there is minimal waiting time
- Create an agenda at the beginning of the visit with the patient and caregiver present
- If an exam, immunization, etc., are needed, ask permission to proceed before any intrusion of the patient's personal space
- Explain and warn the patient about what to expect next (i.e., if a procedure needs to be performed immediately, inform the patient)
- Always provide reassurance to the patient and caregiver

EPSDT/Bright Futures Overview

Early and Periodic Screening, Diagnostic and Treatment is the child health component of Medicaid. Children under age 21 who are enrolled in Medicaid are entitled to EPSDT/Bright Futures benefits. These benefits cover preventive and treatment services.

EPSDT/Bright Futures helps to ensure that children and adolescents receive all appropriate preventive, dental, mental health, and developmental services. These services are based on the Bright Futures periodicity schedule.

- **Early:** Assess and identify any problems early.
- **Periodic:** Children’s health is examined at periodic, age-appropriate intervals.
- **Screening:** Provide physical, mental, developmental, dental, hearing, vision, and other screening tests to detect any potential problems.
- **Diagnostic:** Perform diagnostic tests to follow up when a risk is identified.
- **Treatment:** Treat any health problems found. Health care services must be available for any screenings indicating a potential problem.

There are a total of five components to an EPSDT exam. The screening services must include:

- A comprehensive health and developmental history (this include assessing physical and mental health)
- An unclothed physical examination
- Appropriate immunizations – Recommended by the Advisory Committee on Immunization Practices and approved by the Centers for Disease Control and Prevention and the American Academy of Pediatrics
- Laboratory tests (for example a lead screening)
- Health education including anticipatory guidance about child development

In 2006, the AAP introduced guidelines to improve the early identification of developmental delay. The guidelines are:

1. Developmental surveillance should be performed at every visit
 - Surveillance is the process of recognizing children who may be at risk for developmental delays
 - Collects parental and clinician observations.
 - Tracks developmental milestones of the child over time.
2. Periodic, routine formal screenings
 - Focus on all domains of development. Include administering standardized validated screening tools at 9, 18, and 30 months and screening for autism at 18 and 24 months.
3. Further testing or referral for evaluation for concerning screens or surveillance.

Care for Developmentally Disabled Patients

EPSDT/Bright Futures Codes & Assessments												
	Screening	Early	Periodic	Diagnostic	Treatment	Screening	Early	Periodic	Diagnostic	Treatment	Screening	Early
REQUIRED ASSESSMENTS/REQUIRED CODES												
ADOLESCENT CODE PLUS												
REQUIRED ASSESSMENTS												
ASSESSMENTS INDICATED VIA HISTORY OR SYMPTOMS												
REQUIRED PREVENTIVE COUNSELING & CODES												
REFERRAL CODES (BOX 100 OF CMS 1500)												

In Pennsylvania, all children under the age of 5 years old with a suspected developmental delay must be referred to CONNECT for Early Intervention Services. Providers may call the toll-free number at **1-800-692-7288**.





Dental Information for Developmental Disabilities Population (Medicaid)

Pennsylvania Performance Measure

Having access to routine oral healthcare that includes services such as a dental cleaning can ensure a healthy mouth for your patients and our members. Oral healthcare helps patients avoid cavities, gum disease, and wearing of their teeth's enamel. Aetna Better Health measures oral health care for patients with developmental disabilities through the Pennsylvania Performance Measure (PAPM) - Annual Dental Visits for members with Developmental Disabilities (PAPM ADD). This measure assesses the percentage of Medicaid enrollees with a developmental disability age 2 through 20 years of age, that had at least one dental visit during the measurement year. Please see the [attached flyer](#) for more information surrounding the PAPM ADD Measure.

Referrals

If you have a patient with special needs, we can assist you in finding a dentist who specializes in care for these children. Contact SKYGEN USA Customer Service at **1-800-508-4892** for assistance in locating a dental provider in your area that can assist the member in meeting their oral health needs. You can also use the [Dental Provider Search](#).

If using the online search tool, be sure to click on the green "Details" button to the right of each provider's name to check the "Special Needs" status.

Barriers to Care

Understanding barriers to access is essential to ensuring that members receive appropriate care including regular preventive services. We find that although most parents understand the importance of preventive care, many confront seemingly insurmountable barriers to readily comply with preventive care guidelines.

Examples of barriers to preventive care that we have encountered include: cultural or linguistic issues, lack of perceived need if children are not sick, lack of understanding of the benefits of preventive services, competing health-related issues or other family/work priorities, lack of transportation, difficulties with scheduling and other access issues. We work with providers to routinely link members with services designed to enhance access to preventive services, including: facilitating interpreter services, locating a provider who speaks a particular language, arranging transportation to medical appointments, and linking members with other needed community-based support services. Call Provider Services at **1-866-638-1232** for help arranging any of these services.

Strategies for Success

Some strategies for a successful appointment and improving oral health outcomes for members with developmental disabilities include: Determining each patient's mental capabilities and communication skills, involving caregivers in treatment plans, educating in language that patients can understand, repeating instructions as needed, and involving your patients in hands-on demonstration on good oral healthcare habits such as brushing or flossing. In addition, providers can ensure physical comfort during the dental visit, keep appointments short, encourage plenty of water intake and offer the right oral health care tools that your patient and/or caregiver can use.

Dental Oral Healthcare Tips

Homecare plays a pivotal role in oral health, and we can implement strategies to assist the developmental disabilities population (and their caregivers). Be sure to work with members and caregivers to augment oral health care tools such as a toothbrush or floss.

Adapting a toothbrush and making it easier to hold for patients, is certainly important. Electric toothbrushes are an extremely efficient and effective tool in dental homecare. There is a wide range of electric toothbrush offerings on the market, and options to fit nearly every budget. Floss picks or interdental brushes can also be used as flossing aides if a member or caregiver is unable to use the traditional material and technique.

If members are unable to brush and floss their own teeth, caregivers should be involved in an oral hygiene routine. If unable to brush after meals, members and/or their caregivers can use disposable applicator swabs to remove residual food in the mouth, around the teeth. Mouth rinses (especially those that contain fluoride) are beneficial for members of all populations and should be used according to product instructions.

Learn about our [Oral Health Performance Measures](#) for dentists here.



Integrating Care

Members who have Developmental Disabilities could be affected by other chronic medical illnesses and conditions, which could require multiple providers in multiple settings. Quality of care for the individual will improve if all the providers, from multiple care settings, are working as a team. Integrating care delivers expertise from multiple providers in areas, such as mental health, physical health, and substance use. Integration can also decrease the cost of healthcare delivery. Overall, integrated care creates better health outcomes for the patient and improves member and provider experiences.

Before integrating care, providers should be aware of all Privacy rules, such as the Health Insurance Portability and Accountability Act (HIPAA), the Privacy Rule, and practice Protecting Patient's Health Information (PHI). Once the patient gives the okay, and signs a consent form, the provider may begin coordinating care.

The provider may give the **“Treating the whole person, body and mind”** card to the patient or caregiver to assist them with understanding the importance of care coordination. On the next page, there will be a [Whole Person Flyer](#) that keeps track of all the providers that are involved in the patient's care process. The patient or caregiver can fill out their doctor's contact information and address and keep it in a safe place where it can be easily accessible.

Treating the whole person, body and mind

Understanding all your health needs

You can be a healthier, happier person when your doctors look at your health from both physical and mental viewpoints.



Physical health means your entire body including dental care.



Mental health means your emotional and spiritual well-being and the conditions where you live, learn, work and play.



Asking your doctors to share your health information

There are strict rules to protect your privacy. These rules may keep your physical health information separate from your mental health information.

Each of your doctors can work together to treat you as a whole person if you ask them to share information about your treatment.

Your doctors can consider all of your health goals when you ask them to share your information. Your privacy would still be protected.

Bring this card to your next visit

Talk to your doctor about all your health care providers working together as a team.

Make the choice to be treated as a whole person.

Member Services: 1-866-638-1232
(TTY PA Relay: 711)



Aetna Better Health® of Pennsylvania

Make a list of all of the health care providers you see:

Name _____

Phone _____

Address _____

Name _____

Phone _____

Address _____

Name _____

Phone _____

Address _____

Name _____

Phone _____

Address _____

Aetna complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, creed, religious affiliation, ancestry, sex gender, gender identity or expression, or sexual orientation.

ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call 1-800-385-4104 (PA Relay: 711).

ATENCIÓN: Si usted habla español, los servicios de ayuda de idioma, sin ningún costo, están disponibles para usted. Llamar al 1-800-385-4104 (PA Relay: 711).

ВНИМАНИЕ: Если Вы говорите на русском языке, Вам предлагаются бесплатные переводческие услуги. Позвоните по номеру 1-800-385-4104 (PA Relay: 711).

PA-18-01-36 (rev 122019)

The Special Needs Unit and Case Management Services

What Is the Special Needs Unit?

The Special Needs Unit (SNU) is a separate unit within the Case Management Department designed to assist members with access to care, coordination of care, and connection with community resources. Special Needs Unit staff act as internal advocates for Aetna Better Health members and assist members directly through our Special Needs Unit hotline and case management services.

Who May Benefit from Special Needs Unit Support?

The Special Needs Unit is open to ALL members regardless of diagnosis or medical condition. “Special need” is a broad and non-categorical term which applies to any member who may benefit from additional support with gaining access to medical services or with managing their care. In some cases, support may be short-term, such as a single call to assist a member with locating a community resource. In other circumstances, support needs may be longer-term and include case management services.

While the Special Needs Unit is open to any member regardless of medical condition or circumstance, below are some indicators that may suggest a referral to our Special Needs Unit:

- Cancer
- Mental health issues
- Sickle cell disease
- Visual, hearing, speech impairment
- Physical disability
- HIV/AIDS
- Substance abuse
- Intellectual disabilities
- Substitute care (foster care)
- Premature birth
- Domestic violence
- Traumatic brain injury
- Autism
- Family planning
- Homelessness
- Transportation barriers

Referrals to the Special Needs Unit

Members may contact the Special Needs Unit directly or they may be referred by family members, primary care providers, specialty care providers, or home care agencies. Referrals also come from community agencies, schools, Children & Youth Offices, Intellectual Disability Offices, and mental health providers.



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Special Needs Unit

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How Does the Special Needs Unit Support Members?

The primary purpose of the Special Needs Unit is to support members with coordination of care and access to care. Here are some of the primary ways that SNU staff support our members:

- Assist with locating providers, obtaining authorizations, scheduling appointments
- Address barriers to care such as transportation, behavioral health needs, or need for community support, and coordinate with community resources
- Collaboration with providers to address member needs
- Disease management
- Assessment of physical, behavioral health, and social needs, including social determinants of health
- Assisting with the transition of care from hospital/inpatient settings back to home, including support with arranging home care services and supports

The Special Needs Unit is designed to provide a timely response to member needs. SNU staff respond to members' needs within 48 hours of contact and collaborate with other departments within Aetna Better Health to resolve member issues as quickly and effectively as possible.

Case Management Services

In some cases, members may benefit from more intensive or ongoing support through case management services. The Case Management Department is staffed by nurses, social workers, and behavioral health specialists with medical and/or behavioral health experience.

Case management services are person-centered, goal-oriented, and include a focus on addressing social determinants of health and barriers to care. Case Managers support members with connecting with providers, better managing their health conditions, coordinating care, accessing transportation and community resources, and developing care plans in partnership with members.

Case Management includes, but is not limited to, programs and support in the following areas:

- Pregnancy
- Asthma
- Heart disease
- Diabetes
- Constructive Obstructive Pulmonary Disease (COPD)
- Care for children with autism and developmental delays
- Lead testing for children
- Mental health
- Hepatitis C
- HIV

Members may be connected with a Case Manager by calling our Special Needs Unit hotline (1-855-346-9828).

How Does the Special Needs Unit Support Providers?

Special Needs Unit staff can assist providers in the following ways:

- Outreach members to assess for needs and possible case management
- Educate members about diagnoses/conditions
- Share community resources with provider office and/or connect members directly with resources
- Locate in-network specialist
- Locate durable medical equipment
- Resolve medication issues

Consider referring a member to the Special Needs Unit or for Case Management services in the following circumstances:

1. Members who are identified to have unmet needs during HEDIS measure reviews.
2. Members that may need support with the following:
 - Psychosocial needs, including social determinants of health
 - Inconsistent attendance at appointments
 - Difficulty adhering to recommended medical care
 - Poorly managed physical conditions

To refer a member to the Special Needs Unit, members or providers may call the SNU line directly at **1-855-346-9828**.

To refer a member for Case Management Services, submit a case management referral form. The form is located with the provider forms on the ABH website. The direct link to the form is [here](#). Once completed, please email the referral form to the Case Management Referral Mailbox:

PACMReferralMailbox@Aetna.com.

Special Needs Unit and Case Management Contact Information

To reach the Special Needs Unit, members or providers may call **1-855-346-9828**. You are encouraged to share the Special Needs Unit hotline directly with members.

SNU staff members are available Monday through Friday from 8 AM to 5 PM. If members need assistance when the Special Needs Unit staff is not available, they may call Member Services at **1-866-638-1232 (PA Relay: 711)**.

To refer a member to the Special Needs Unit, members or providers may call the SNU line directly at **1-855-346-9828**.

You are encouraged to share the Special Needs Unit hotline directly with members.

Early Intervention and CONNECT

Pennsylvania's Early Intervention program provides support and services to children, ages birth to 5, with developmental delays and disabilities. Services are provided at no cost to families and are designed to help each child reach their full potential.

Services are provided in the child's natural environment (e.g., home, community, and/or childcare setting) and may include the following: developmental therapies, support services, parent education, and other family-centered services. Families are assigned to a Service Coordinator to support with developing and coordinating a service plan, connecting families with resources, and supporting with the transition to school.

Getting Your Patients in for Appointments

Barriers to Care and Appropriate Accommodations

Providers may face several barriers to care when working with members with developmental disabilities. Therefore, it is important to not only recognize these barriers, but provide accommodations and attitudes to support positive appointment outcomes. These barriers to care may include communication barriers, time restraints, sensory needs or lack of resources/education for caregivers. In addition to speaking directly with members, it is important for providers to see the individual as a person with unique needs, and not as a "disabled" person. Patients with developmental disabilities may need additional time for appointments, and/or a quiet (or separate) waiting area.

Tips

- Keep appointments at a comfortable timeframe for the patient. Scheduling members with developmental disabilities at the end of the day, with less office commotion, may be beneficial.
- Delivering information, either verbally or via printed material, should be direct, to the point and simple. Be careful to not overload the member or their caregiver with too much information.
- Rather than standing above, and talking downward, communicate at eye-level with members and caregivers.
- Another great tip for providers is to remain open and available; allow the member and caregiver to take time to process information, then ask questions.

Providers can utilize the Aetna Better Health of PA Provider Portal to obtain reports specific to their office and patient base. Be sure to also work with your Quality Practice Liaison to understand HEDIS measures, gaps in care, and opportunities for patient outreach.

Children who would benefit from Early Intervention support should be referred to the CONNECT Helpline: 1-800-692-7288.

The helpline assists families with making a direct link with their county early intervention programs. CONNECT can also support families with locating resources and providing information regarding child development for children ages birth to 5.



Registering with Their County IDD Program and Autism Waivers

Those who have IDD may need long-term services and supports. Most private health insurance and Medicare do not cover these services. These individuals will usually need to be a Medicaid recipient. People who home and community-based services instead of going into institutions.

In Pennsylvania, every county has a Mental Health/Intellectual Disability (MH/ID) office. This county office is where the individual would go to enroll in many different mental health or developmental services. Medicaid funded mental health and developmental services are administered at the county level. Once you are registered with the county MH/ID office then you can access some of these services:

- Early interventions (for individuals younger than 3 years old).
- Behavioral Health Rehabilitation Services – BHRS (i.e. wraparound) for individuals younger than 18 years old. BHRS also provides one on one supports for children with serious emotional or behavioral difficulties.
- Waivers for people with autism, intellectual, and/or developmental disabilities of all ages. These waiver programs can provide additional services for individuals to live independently in their communities.
 - Waivers can provide the following services: community support, skill development, supported employment, therapies, and vehicle modifications.

Community Resources by Region

Developmental Disabilities

According to the Centers for Disease Control and Prevention's (CDC) website, "Developmental disabilities are a group of conditions due to an impairment in physical, learning, language, or behavior areas. These conditions begin during the developmental period, may impact day-to-day functioning, and usually last throughout a person's lifetime." Aetna Better Health offers resources for members with developmental disabilities, like the Special Needs Unit.

Special Needs Unit

At Aetna Better Health, we manage the care of members with special health care needs through our Case Management Unit. The Case Management Unit operates under the direction of our chief medical officer and special needs coordinator. The unit's primary responsibility is to work aggressively to identify and assess special needs members prior to the onset of an adverse event. Our Special Needs Unit staff has direct access to the plan medical director, a behavioral health coordinator and case managers with specialized expertise in the diverse and complex needs of members with chronic and/or complex health conditions.

A Special Needs Unit brochure has been attached, and you can call **1-855-346-9828** with any questions/concerns.

Mental Health, Drug and Alcohol Services

Aetna Better Health recipients receive mental health, drug, and alcohol services through Behavioral Health (BH) Managed Care Organizations (MCO) in each county. Please refer to the Quick Reference Guide on the following page to contact the office in the member's county.

Medical Assistance Transportation Program (MATP)

Please refer recipients needing assistance with transportation to the local county offices listed on the following page. Recipients can use these numbers to obtain information on how to enroll in the MATP program. For more information, visit matp.pa.gov

Check out our 2020 Quick reference Guide below.



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Care for Developmentally Disabled Patients



Programs and Resources

2020 Quick Reference Guide

Aetna Better Health® of Pennsylvania

Administrative Office	1425 Union Meeting Road Blue Bell, PA 19422 1-866-638-1232 (MA) 1-800-822-2447 (CHIP)	Complaints, Grievances & Appeals	Complaints Grievance & Appeals PO Box 81040 5801 Postal Road Cleveland, OH 44181 Fax: 1-860-754-1757 Email: PAMedicaidAppeals&Grievance@Aetna.com
Pharmacy	CVS Caremark: 1-866-638-1232		
Eligibility Verification (by phone)	1-866-638-1232 (MA) 1-800-822-2447 (CHIP)		
Claim Submission Address/Payor ID	Aetna Better Health® of Pennsylvania P.O. Box 62198 Phoenix, AZ 85082-2198 Emdeon Payor ID: 23228	eviCore®	Evicore.com Radiology: 1-888-693-3211 Pain Management: 1-888-393-0989 Client Services: 1-800-575-4517
Prior Authorization Phone and Fax Numbers	P: 1-866-638-1232 F: 1-877 363-8120 AetnaBetterHealth.com/Pennsylvania/assets/pdf/provider/PriorAuthForm-NDCCCode_PA_FINAL.pdf	Real Time support via Emdeon: Claim Inquiry & Response (276/277); Eligibility Inquiry & Response (270/271); and Health Service Review Inquiry & Response (278)	Emdeon Payor ID: 23228
Provider Manual	AetnaBetterHealth.com/Pennsylvania/providers/manual	EFT / ERA	AetnaBetterHealth.com/Pennsylvania/assets/pdf/provider/provider-forms/EFT-AuthorizationEnrollmentForm-PA.pdf
Website	AetnaBetterHealth.com/Pennsylvania	Vision	Superior Vision: 1-866-819-4298 SuperiorVision.com
Provider Web Portal	AetnaBetterHealth.com/Pennsylvania/providers/portal	Provider Relations, Contracting & Updates	P: 1-866-638-1232 F: 1-860-754-5435 ABHProviderRelationsMailbox@Aetna.com
Peer to Peer Request	1-959-299-6960	Special Needs Unit	1-855-346-9828
Member Services	1-866-638-1232 (MA) 1-800-822-2447(CHIP)	Dental	SKYGEN Provider Services: 1-800-508-4892 skygenusa.com
Claims Customer Service Contact	(CICR) 1-866-638-1232		
Language Line Services	1-800-385-4104		

Pennsylvania Department of Human Resources

Dept of Human Services Helpline	1-800-692-7462	Provider Inquiry Hotline	1-800-537-8862 Prompt 4
Behavioral Health	1-800-433-4459	Pharmacy Hotline	1-800-558-4477 Prompt 1
OMAP - HealthChoices Program: Complaint, Grievance, & Fair Hearings	1-800-798-2339 PO Box 2675 Harrisburg, PA 17105-2675	MA Provider Enrollment Applications / Changes	1-800-537-8862 Prompt 1
Eligibility Verification System (EVS)	1-800-766-5387 DHS.pa.gov/providers/Providers/Pages/EVI.aspx	Outpatient Providers Practitioner Unit	1-800-537-8862 Prompt 1
		MA Provider Compliance Hotline	1-800-333-0119

[AetnaBetterHealth.com/Pennsylvania](https://www.aetna.com/Pennsylvania)

Revised 11/22/2019 (rev 08/21)



Mental Health, Drug & Alcohol Services

Aetna Better Health® recipients receive mental health, drug, and alcohol services through Behavioral Health (BH) Managed Care Organizations (MCO) in each county. Please refer to the list below to contact the office in the member's county.

Medical Assistance Transportation Program (MATP)

Please refer recipients needing assistance with transportation to these local county offices. Recipients can use these numbers to obtain information on how to enroll in the MATP program. For more information, visit matp.pa.gov.

County	BH MCO / Phone	County	BH MCO / Phone	County	Phone	County	Phone
Adams	CCBHO 800-553-7499	Lackawanna	CCBHO 800-553-7499	Adams	800-632-9063	Lackawanna	570-963-6482
Allegheny	CCBHO 800-553-7499	Lancaster	PC 888-722-8646	Allegheny	888-547-6287	Lancaster	800-892-1122
Armstrong	VBH 877-615-8503	Lawrence	VBH 877-615-8503	Armstrong	800-468-7771	Lawrence	888-252-5104
Beaver	VBH 877-615-8503	Lebanon	PC 888-722-8646	Beaver	800-262-0343	Lebanon	717-273-9328
Bedford	PC 866-773-7891	Lehigh	MBH 888-207-2911	Bedford	814-643-9484	Lehigh	888-253-8333
Berks	CCBHO 800-553-7499	Luzerne	CCBHO 800-553-7499	Berks	800-383-2278	Luzerne	800-679-4135
Blair	CCBHO 800-553-7499	Lycoming	CCBHO 800-553-7499	Blair	800-458-5552	Lycoming	800-222-2468
Bradford	CCBHO 800-553-7499	McKean	CCBHO 800-553-7499	Bradford	800-242-3484	McKean	866-282-4968
Bucks	MBH 888-207-2911	Mercer	VBH 877-615-8503	Bucks	888-795-0740	Mercer	800-570-6222
Butler	VBH 877-615-8503	Mifflin	CCBHO 800-553-7499	Butler	866-638-0598	Mifflin	800-348-2277
Cambria	MBH 888-207-2911	Monroe	CCBHO 800-553-7499	Cambria	888-647-4814	Monroe	888-955-6282
Cameron	CCBHO 800-553-7499	Montgomery	MBH 888-207-2911	Cameron	866-282-4968	Montgomery	215-542-7433
Carbon	CCBHO 800-553-7499	Montour	CCBHO 800-553-7499	Carbon	800-990-4287	Montour	800-632-9063
Centre	CCBHO 800-553-7499	Northampton	MBH 888-207-2911	Centre	814-355-6807	Northampton	888-253-8333
Chester	CCBHO 800-553-7499	Northumberland	CCBHO 800-553-7499	Chester	877-873-8415	Northumberland	800-632-9063
Clarion	CCBHO 800-553-7499	Perry	PC 888-722-8646	Clarion	800-672-7116	Perry	800-632-9063
Clearfield	CCBHO 800-553-7499	Philadelphia	CBH 888-545-2600	Clearfield	800-822-2610	Philadelphia	877-835-7412
Clinton	CCBHO 800-553-7499	Pike	CCBHO 800-553-7499	Clinton	800-206-3006	Pike	866-681-4947
Columbia	CCBHO 800-553-7499	Potter	CCBHO 800-553-7499	Columbia	800-632-9063	Potter	800-800-2560
Crawford	VBH 877-615-8503	Schuylkill	CCBHO 800-553-7499	Crawford	800-210-6226	Schuylkill	888-656-0700
Cumberland	PC 888-722-8646	Snyder	CCBHO 800-553-7499	Cumberland	800-632-9063	Snyder	800-632-9063
Dauphin	PC 888-722-8646	Somerset	PC 866-773-7891	Dauphin	800-309-8905	Somerset	800-452-0241
Delaware	MBH 888-207-2911	Sullivan	CCBHO 800-553-7499	Delaware	866-450-3766	Sullivan	800-242-3484
Elk	CCBHO 800-553-7499	Susquehanna	CCBHO 800-553-7499	Elk	866-282-4968	Susquehanna	866-278-9332
Erie	CCBHO 800-553-7499	Tioga	CCBHO 800-553-7499	Erie	800-323-5579	Tioga	800-242-3484
Fayette	VBH 877-615-8503	Union	CCBHO 800-553-7499	Fayette	800-321-7433	Union	800-632-9063
Forest	CCBHO 800-553-7499	Venango	VBH 877-615-8503	Forest	800-222-1706	Venango	814-432-9767
Franklin	PC 866-773-7917	Warren	CCBHO 800-553-7499	Franklin	800-632-9063	Warren	877-723-9456
Fulton	PC 866-773-7917	Washington	VBH 877-615-8503	Fulton	800-999-0478	Washington	800-331-5058
Greene	VBH 877-615-8503	Wayne	CCBHO 800-553-7499	Greene	877-360-7433	Wayne	800-662-0780
Huntingdon	CCBHO 800-553-7499	Westmoreland	VBH 877-615-8503	Huntingdon	800-817-3383	Westmoreland	800-242-2706
Indiana	VBH 877-615-8503	Wyoming	CCBHO 800-553-7499	Indiana	888-526-6060	Wyoming	866-278-9332
Jefferson	CCBHO 800-553-7499	York	CCBHO 800-553-7499	Jefferson	800-648-3381	York	800-632-9063
Juniata	CCBHO 800-553-7499			Juniata	800-348-2277		





Special Needs Unit

Your link to care

You, or a family member, may need more care right now. You may have special needs or a serious medical condition. You can get extra help through our Special Needs Unit. We have care managers who are nurses, social workers and behavioral health specialists. They work with adults and children with special needs. Special needs assistance can be anything from getting transportation to getting complex equipment.

What is a Special Need?

Special needs don't fall into any one category. They can be basic (generic) needs. You don't have to have a certain diagnosis to have a special need. Special needs can happen with any circumstance or situation. They can happen at any time to anyone. They can be short or long term.

Aetna Better Health
Special Needs Unit
1-855-346-9828
(PA Relay: 711)



[AetnaBetterHealth.com/Pennsylvania](https://www.aetna.com/betterhealth/pennsylvania)

PA-18-02-35 (rev012020)

Aetna Better Health® of Pennsylvania
Aetna Better Health® Kids

Special health care needs are issues that can be:

- **Physical** — such as diabetes or a combination of health conditions
- **Developmental** — such as an intellectual disability
- **Behavioral** — such as depression or attention deficit disorder (ADD)
- **Situational** — such as transportation or housing needs.

Special Needs Case Managers can help you:

- Get services and care
- Work with your health care providers, agencies and organizations
Learn more about your condition
- Set up a care plan that's right for you
- Locate community resources
- Get needed transportation.

Who can make a referral to our Special Needs Unit?

Anyone can make a referral to our Special Needs Unit, including:

- Members
- Family
- Doctors
- Mental health/intellectual disability/ substance abuse providers
- Schools
- Community agencies.

Need help? Just call us

If you think you have special health care needs and need someone to help, just call us. Ask for someone in the Special Needs Unit. We're here to help!

Aetna complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, creed, religious affiliation, ancestry, sex gender, gender identity or expression, or sexual orientation.

ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call 1-800-385-4104 (PA Relay: 711).

ATENCIÓN: Si usted habla español, los servicios de ayuda de idioma, sin ningún costo, están disponibles para usted. Llamar al 1-800-385-4104 (PA Relay: 711).

ВНИМАНИЕ: Если Вы говорите на русском языке, Вам предлагаются бесплатные переводческие услуги. Позвоните по номеру 1-800-385-4104 (PA Relay: 711).



Annual Dental Visits for Members with Developmental Disabilities (ADD)

2020 PAPM Oral Health Performance Measures

What is developmental disability?

A severe, long-term or often lifelong disability that can affect cognitive ability, physical functioning, or both. Developmental disabilities can involve intellectual disability as well as physical disability.

Some common physical disabilities include:

- Blindness from birth
- Cerebral palsy
- Spinal cord injury
- Amputation
- Multiple sclerosis
- Spina bifida
- Musculoskeletal injuries (ex- back injury)
- Arthritis
- Muscular dystrophy

Some disabilities that are both physical and intellectual stemming from genetic or other causes include:

- Down syndrome
- Fetal alcohol syndrome

A common intellectual disability that affects primarily males is:

- Fragile X Syndrome (these patients may also show signs of ADD or autism spectrum disorder)

Importance of oral health care for patients with developmental disability

Some common oral health problems patients with disabilities face include:

- Cavities
- Periodontal disease
- Malocclusion
- Damaging oral habits
- Oral malformations
- Delayed tooth eruption
- Trauma and injury
 - Falls or accidents are common in patients with cerebral palsy or seizure disorders

Diet, poor hygiene habits, prolonged bottle feeding, and medications are common causes of cavities and periodontal disease in this population.

Good oral healthcare habits are important for any patient, especially for patients with a developmental disability. Teaching good oral health care habits and offering treatment services might require adaptation of services you provide every day in your office.

Annual Dental Visits for Members with Developmental Disabilities (ADD)

2020 PAPM Oral Health Performance Measures

Having access to routine oral healthcare that includes services such as a dental cleaning can ensure a healthy mouth for your patients and our members. Oral healthcare helps patients to avoid cavities, gum disease, and wearing of their teeth's enamel. Aetna Better Health measures oral health care for patients with developmental disabilities through the PAPM Oral Health Performance Measure – Annual Dental Visits for Members with Developmental Disabilities (ADD).

We encourage providers to not view a developmental disability as a barrier to oral healthcare.

If you have a patient with special needs, we can assist you in finding a dentist who specializes in care for these children. Contact SkyGen Customer Service at 800-508-4892 for assistance in locating a dental provider in your area that can assist the member in meeting their oral health needs.

PAPM Measure Description

This measure assesses the percentage of Medicaid enrollees with a developmental disability age 2 through 20 years of age, that had at least one dental visit during the measurement year.

*Please note: the CMS Performance Measure *Annual Dental Visits for Members with Developmental Disabilities (ADD)* is not to be confused with the HEDIS measure *Follow-Up Care for Children Prescribed ADHD Medication (ADD)*.

Eligible Population

Ages: 2 through 20 years of age as of December 31st of the measurement year.

Capturing Care

Any claim with a dental practitioner during the measurement year meets criteria. A dental practitioner is defined as follows:

- A practitioner who is a Doctor of Dental Surgery (DDS), a Doctor of Dental Medicine (DMD)
 - Certified and licensed dental hygienists are considered dental practitioners

*Please refer to the oral health coding guide for a listing of codes that will satisfy the ADD Oral Health Performance Measure.

Some strategies for a successful appointment and improving oral health outcomes for members with developmental disabilities

- Determine each patient's mental capabilities and communication skills
 - Involve caregivers in treatment plans
 - Educate in language that patients can understand
 - Repeat instructions as needed
 - Involve your patients in hands-on demonstration on good oral healthcare habits such as brushing or flossing
- For patients with anxiety related to visiting the dentist try some of these things:
 - Keep the appointments short and offer the treatment the patient can tolerate at that time

Annual Dental Visits for Members with Developmental Disabilities (ADD)

2020 PAPM Oral Health Performance Measures

- Allow items that the patient gains comfort from in to the visit such as a stuffed animal or a blanket
- Involve the caregiver by having them sit near the patient and hold the patient's hand
- Offer praise to the patient and reinforce good behavior
- Ensure physical comfort during the dental visit
 - For wheelchair bound patients ask the caregiver about preferences the patient may have such as pillows or padding when being transferred to the exam chair
- Recommend noninvasive preventive measures for cavities such as sealants or fluoride
 - Advocate for water fluoridation in your community
- Encourage plenty of water intake
 - Helps with increasing saliva in the mouth and reducing sugar left from medications on teeth and gums
 - Aids in rinsing out food leftover from meals (food pouching)
- Work with patients and caregivers to augment oral health care tools such as a toothbrush or floss
 - Adapt the toothbrush so it is easier to hold for patients or discuss using an electric toothbrush
 - Encourage the use of floss holders
- For patients unable to brush or floss independently involve caregivers in oral hygiene
 - Consistency is important – might be helpful to practice oral health at the same time each day, location, and position based on that patient's needs
 - Use disposable applicator swabs after meals
- If transportation is an issue for keeping appointments refer patients and caregivers to Medical Assistance Transportation (MATP) - for Medicaid enrollees only
 - Member can call in to Aetna Better Health of Pennsylvania Member Services for assistance: 1-866-638-1232