



Provider Newsletter

Spring/Summer 2022



AetnaBetterHealth.com/Pennsylvania



AetnaBetterHealth® of Pennsylvania
Aetna Better Health® Kids

In this issue

Aetna Better Health® Kids (CHIP) Keeps Growing 2

HealthChoices Re-Procurement Updates 3

Maintaining Accurate Provider Rosters, Service Locations and Contact Info 3

Is Your Office Contact Information Current? 3

Provider Contract General Obligations Reminder 3

We've Improved the Provider Enrollment and Credentialing Process 3

Do We Have Your Email Address? 3

Did You Miss an MAB? 4

Reminder: New Member "FFS Eligibility Window" 4

Address Change 4

Recent Provider Notices 4

Need to Update Your Provider Info? 4

Understanding Provider Contract Requirements 5

New Over The Counter (OTC) Benefit for Aetna Better Health® Kids Members! 6

Long-Acting Reversible Contraception (LARC) ... 7

Culture Competency 9

No Cost Dental OTC Products 11

Languages Spoken by our CHIP Enrollees 11

Grievances Submitted by Providers 12

Issues that Affect Multiple Claims? We can help! 12

Member Rights & Responsibilities 12

Summer of Smiles 13

Updated Tele-dentistry Guidelines and Dental Fee Schedule 14

HealthChoices Re-Procurement Updates 14

Calling All Dental Providers: Why Choose Aetna Better Health® Kids? 14

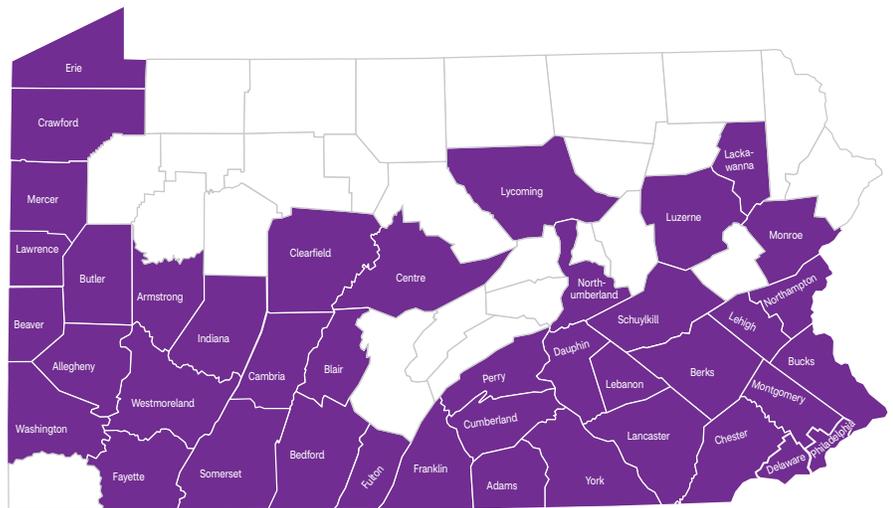


Aetna Better Health® Kids (CHIP) Keeps Growing

Aetna Better Health® Kids (CHIP) is now in 41 Pennsylvania counties

Our services are geared towards meeting the health care needs of our members as they grow and develop.

Our CHIP plan, Aetna Better Health® Kids, is not affected by the recent HealthChoices re-procurement changes. We continue to serve CHIP members in our covered counties and contract with CHIP providers. If you are not currently participating or credentialed to service CHIP members, we can help you become a CHIP provider. Contact your provider representative, email MedicaidProviderRelations@Aetna.com or call Provider Relations at **1-866-638-1232**.



 Aetna Better Health® Kids (CHIP) available



HealthChoices Re-Procurement Updates

On September 1, 2022, Aetna Better Health® of Pennsylvania will no longer serve Medicaid members across the Commonwealth. We will however continue serving our Aetna Better Health® Kids CHIP members in our coverage counties as we continue to grow membership and our provider network.

Click [here](#) for information and resources about the HealthChoices re-procurement. Then select the HealthChoices Updates tab.

Check out our recent [provider webinar](#) to learn more about our Medicaid closure



Is Your Office Contact Information Current?

Make sure your contact information is current with us. Just fill out the practitioner information change form and fax it to **1-860-754-5435** or email it to ABHProviderRelationsMailbox@Aetna.com.

If you have to make changes to 10+ providers, use our provider roster worksheet. Remember to fill out the entire worksheet. This will allow us to timely update your provider records along with meeting state and NCQA requirements. Once you've updated the spreadsheet, email it to ABHProviderRelationsMailbox@Aetna.com.



Maintaining Accurate Provider Rosters, Service Locations and Contact Information

Network providers should contact their Provider Relations Consultant or Provider Services with changes to their demographic information. Providers can verify their demographic data at any time using the Aetna Better Health® “real-time” [provider network directory](#).

Requests for changes to address, phone number, or tax ID, or additions and/or deletions to group practices, must be made through the online [provider change form](#).

You can also update us via a [paper change form](#).



Email the form:
ABHProviderRelationsMailbox@Aetna.com



Mail form to:
Aetna Better Health® of Pennsylvania
Aetna Better Health® Kids
Attention: Provider Relations
1425 Union Meeting Road
Blue Bell, PA 19422



We've Improved the Provider Enrollment and Credentialing Process

We've updated our Join our Network page on our website to make it easier to navigate and find what you're looking for easier. We even added a fillable form you can save and email to us if you are adding multiple providers to a group contract. [Check it out!](#)



Do We Have Your Email Address?

Several months ago we started sending your practice important communication updates via email and then to fax, then your physical address. We need your current email address to get provider updates to you quicker and more efficiently. Be sure to give your Provider Rep an email for your practice. It will keep you “in the know” about Aetna Better Health® of Pennsylvania!



Did you miss an MAB?

If you missed a recent Medical Assistance Bulletin, just go to www.dhs.pa.gov.



Recent Provider Notices

Stay up to date with our recent provider notices.

Check our NOTICES page often to stay up to date with changes that may affect you by visiting: AetnaBetterHealth.com/pennsylvania/providers/notices.

The Notices are divided into five categories to make it easier to see what you are interested in finding. Check it out today!



Reminder: New Member “FFS Eligibility Window”

Did you know?

As part of your PA Medical Assistance agreement, providers are obligated to see/treat future Aetna Better Health® members in the “Fee For Service (FFS) Window.” This window is the 2-4 week period prior to the MCO effective date.

If you have any questions about this requirement, just call Provider Relations at **1-866-638-1232**.



Need to Update Your Provider Info?

We’ve made changing your demographic information easier! We now have an online form you can fill out and hit submit and that’s it! The process is easier, quicker and more accurate. [Update your info today!](#)



Address Change Complaints, Grievances and Appeals

The Aetna Better Health® of Pennsylvania **Complaints, Grievances and Appeals (CGA) mailing address changed**. There are now two different addresses for member CGA and a different provider CGA address.

Aetna Better Health® of Pennsylvania Complaints, Grievances and Appeals

New Address:

**Member
Appeals**

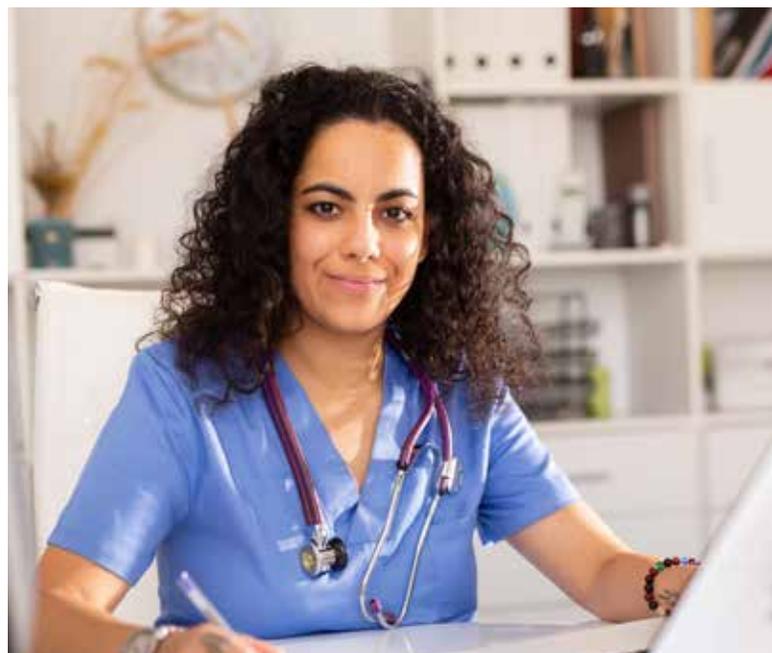
PO Box 81139
5801 Postal Road
Cleveland, OH 44181

Aetna Better Health® of Pennsylvania Complaints, Grievances and Appeals

New Address:

**Provider
Appeals**

PO Box 81040
5801 Postal Road
Cleveland, OH 44181





Understanding Provider Contract Requirements

Termination of your provider contract

Below is an excerpt from our Provider Manual that outlines details and responsibilities in the event of provider termination.

Suspended, disbarred from services

We follow termination procedures as set forth in the Provider Agreement. We receive notice from DHS if a participating provider is suspended or terminated from participation in the Medicaid or Medicare Programs. Upon notification, we must immediately act to terminate the provider from participation.

Terminations for loss of licensure and criminal convictions must coincide with the MA effective date of the action.

Termination without cause

Provider Agreements may be terminated by either Party via prior written notice given to the other Party with at least 90 calendar days' notice. In addition to the foregoing, the physician may terminate this Agreement in accordance with the provisions of Section 5.1 of the Provider Agreement.

Termination for breach of contract

The Provider Agreement may be terminated at any time by either party, upon at least 60 calendar days prior written notice of such termination to the other party upon material default or substantial breach by such party of one or more of its obligations hereunder, unless such material default or substantial breach is cured within 60 calendar days of the notice of termination; provided, however, if such material default or substantial breach is incapable of being cured within such 60-calendar-day period, any termination pursuant to the Provider Agreement Termination Provision will be ineffective for the period reasonably necessary to cure such 60-calendar-day period.



NEW

Over-the-Counter (OTC) Benefit for Aetna Better Health® Kids Members!

Now, Aetna Better Health® Kids (CHIP) members have an exclusive OTC benefit. Be sure to remind Aetna Better Health® Kids (CHIP) members about this great benefit. See below for more information about the new benefit.

Only Aetna Better Health® Kids members get a \$30 OTC credit each month.*

*Some restrictions apply.

You choose how to get your monthly OTC items



BY PHONE

Call **1-888-628-2770**,
TTY: 711 to order by phone



ONLINE

Order online at
[CVS.com/otchs/abhkids](https://www.cvs.com/otchs/abhkids)



IN A CVS STORE

Visit a participating
CVS Pharmacy®



Get these OTC items and more at NO COST to you!

- Pain Relievers and First Aid
- Oral and Dental Care
- Cold, Cough and Allergy Remedies
- Anti-Fungals
- Ear and Eye Care
- Vitamins and Minerals
- Feminine hygiene products and tampons
- Miscellaneous products

See the complete list of products on our OTC web page.*



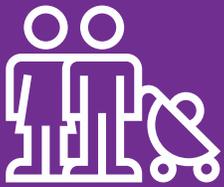
***Visit our OTC web page for more details about the OTC benefit**

aetnabetterhealthpenn.com/otc

Call Aetna Better Health® Kids at **1-800-822-2447** (TTY: 711)



Aetna Better Health® Kids



Long-Acting Reversible Contraception (LARC)



Facts and Talking Points

What are long-acting reversible contraceptives (LARC)?

LARC are types of birth control that offer effective contraception for an extended period of time—anywhere from 1 to 10 years. These methods of birth control include:

- Intrauterine devices (IUDs)
 - Mirena
 - Paragard
- Subdermal contraceptive implants
 - Nexplanon

What are the barriers to LARC access for women?

- Lack of patient knowledge regarding what LARC is, how it works, and the benefits
- Lack of provider educational materials on LARC usage and availability for patients
- Lack of provider training on LARC
- Lack of referrals to Ob/Gyn providers for LARC insertion
- Common misconceptions regarding LARC usage and its link to pelvic inflammatory disease leading to patient and provider discomfort

The American College of Obstetricians and Gynecologists (ACOG) has information on LARC methods and how to access LARC.

www.acog.org/programs/long-acting-reversible-contraception-larc



Benefits of LARC

- Prevention of unplanned pregnancies that can result in later prenatal care, preterm or low birth weight babies
- Minimal maintenance required for the women that use LARC, i.e., no need to take a pill daily
- LARC are safe for women of all ages (even as early as teenage)
- LARC can be inserted within minutes of childbirth
- They are cost effective due to their reduction in unplanned pregnancies
- Return of fertility is rapid following removal
- They are considered a family planning service and are a covered benefit for both Medicaid and CHIP recipients!

LARC are more effective against unplanned pregnancy than contraceptive pills, patches, rings, or condoms.

LARC Reimbursement

Aetna Better Health® of Pennsylvania and Aetna Better Health® Kids have updated the claims payment system to comply with DHS reimbursement guidelines to pay providers for covered LARC and certain family planning services in accordance with MA and CHIP reimbursement practices.

Aetna Better Health® will:

- Reimburse hospitals separately for the cost of the device when inserting a LARC intrauterine device (IUD) or contraceptive implant at the time of an obstetrical delivery in addition to the APR DRG payment that hospitals receive for the delivery.
- Reimburse the professional component fee for insertion of a LARC or contraceptive implant at the time of an obstetrical delivery.
 - Facilities should bill for services on the same inpatient admission claim form. The claim should include the appropriate procedure code(s) as a separate line item(s) on UB-04 form(s).
 - Bill Type 11X
- Reimburse providers according to Medical Assistance (MA) reimbursement guidelines for certain family planning and family-planning related services rendered.
 - Practitioners must bill appropriate procedure code(s) and modifier(s) as a separate line item(s) on CMS-1500 forms.
 - Place of Service 21

Questions?

Reach out to your Provider Relations Representative at **1-866-638-1232** (Medicaid) or **1-800-822-2447 (CHIP)**. You can also reach out to Provider Relations via email at ABHProviderRelationsMailbox@Aetna.com.



Culture Competency

What is Cultural Competency?

Cultural Competency is the ability of individuals, as reflected in personal and organizational responsiveness, to understand the social, linguistic, moral, intellectual and behavioral characteristics of a community or population.

Cultural Competency is also the ability to translate this understanding systematically to enhance the effectiveness of health care delivery to diverse populations.

At Aetna Better Health®, we promote cultural competency and education to help eliminate health care inequalities.

We encourage providers to treat all members with dignity and respect (as required by federal law)* including honoring members' beliefs, being sensitive to cultural diversity, and fostering respect for members' cultural backgrounds.

*Title VI of the Civil Rights Act of 1964 prohibits discrimination based on race, color, and national origin in programs, and activities receiving federal financial assistance, such as Medicaid.

What does it mean to be Culturally Competent?

Cultural Competence is the ability to understand, communicate with and effectively interact with people across cultures.

Cultural competence encompasses:

- Being aware of one's own world view
- Developing positive attitudes towards cultural differences
- Gaining knowledge of different cultural practices and world views

MinorityHealth. (n.d.). Education. Retrieved from: <https://thinkculturalhealth.hhs.gov/education>.

Office of Adolescent Health. (2018, August 28).

Cultural Competence. Retrieved from:

<https://www.hhs.gov/ash/oah/resources-and-training/tpp-and-paf-resources/cultural-competence/index.html>.

Understanding Cultural Competency. (n.d.).

Retrieved from:

<https://www.humanservicesedu.org/cultural-competency.html>.

What are the keys to being culturally competent?

Awareness - Being aware of your own individual biases and reactions to people who are of a culture or background significantly different from your own. By being aware of your own internal biases you can begin to work towards other aspects of Cultural Competency.

Attitude - The significance of attitude in cultural competence is to delineate the difference between just being aware of cultural differences and actively analyzing your own internal belief systems and developing awareness.

Knowledge - Research into human behavior has shown that our values and beliefs about equality may not line up with our actual behaviors and further we often are ignorant as to the degree of difference between our beliefs and our actions. It has been shown that people who may test well regarding having low prejudices may in fact act with great prejudice when interacting with other cultures.

Understanding this disconnect is why knowledge is considered a key aspect of developing one's own cultural competence.

Skills - This component is about taking practices of cultural competency and repeating them until they become integrated into one's daily behaviors.

The most important aspect of the skills component is having an excellent grasp on effective and respectful communication whether within an organization or between individuals. For example, an often-overlooked aspect of communication is body language and the sometimes-extreme variation in the meaning of gestures between one culture and another.

Once you begin to integrate all four components into your day to day behaviors, your degree of cultural competence will increase dramatically. By being aware of your internal learned biases, having an attitude that reflects a desire to deeply understand your own behavior, showing a high degree of knowledge of the subject and implementing the skills of cultural competency, you'll soon move from the realm of theory and learning to that of active practice.

As the world becomes more global, the need for a high degree of cultural competence will only grow and in few fields will this be a more important trait than in that of Human Services.

Developing your own cultural competency will help you to become the most effective human services worker possible and will greatly increase your chances of gaining and maintaining employment in the field.

At Aetna Better Health®, we understand the importance of cultural competence and believe you do too.

Please visit the U.S. Department of Health and Human Services website ([HHS.gov](https://www.hhs.gov)) for more information and training courses.

Questions?

We're here to help. Just contact Provider Relations at **1-866-638-1232**.

No Cost Dental OTC Products

Aetna Better Health® Kids (CHIP) members can now get Over-the-Counter (OTC) products at no cost at CVS. There are many over the counter products, including dental products for children. Click on the links below to learn more.

[View the Benefit Overview](#)

[Over the Counter Product Catalogue and Guide](#)

[Frequently Asked OTC Questions \(FAQ\)](#)

We invite providers who are not yet contracted with us to join us in serving the CHIP population of Pennsylvania.

To join Aetna Better Health® Kids today contact SKYGEN at **(800) 508-6965** or email at networkdevelopment@skygenusa.com.



Languages Spoken by our CHIP Enrollees

Aetna Better Health® Kids (CHIP) serves Children’s Health Insurance Program enrollees within the Commonwealth of Pennsylvania. Our membership is diverse and while the majority of our members have English as their primary language, we’d like to provide you an overview of other languages spoken by our members. As indicated by the chart below, Spanish is the prevalent non-English language spoken by members of Aetna Better Health® Kids, followed by Russian. If you need translation or interpretation services in any language for your patients, please contact our Member Services Department at **1- 800-822-2447**.

For complete information on languages spoken in specific areas of Pennsylvania, please visit <https://statisticalatlas.com/state/Pennsylvania/Languages>

Language	2020 N=21,604		2021 N=20,158	
	Count	%	Count	%
Spanish	1,311	6.07%	1,160	5.75%
Russian	10	0.05%	9	0.04%
Mandarin	6	0.03%	3	0.01%
Vietnamese	3	0.01%	2	0.01%
Other	270	1.25%	270	1.34%

Grievances Submitted by Providers

When filing a grievance on behalf of a member, please refer to Chapter 14, Member Complaints, grievances and DHS Fair Hearings Overview, in our Provider Manual. Providers can file a grievance on behalf of a member if the member provides their consent in writing to do so. Requests received without the written consent are not eligible for review. Aetna Better Health® of Pennsylvania Complaint, Grievance & Appeal Department will mail the member a consent form. If the form is not returned by the member within 25 calendar days, the request will be closed as ineligible for review. If you have any questions regarding this process, please contact your Provider Relations representative.

Issues that Affect Multiple Claims? We can help!

Providers should contact Provider Relations when they have issues that effect multiple claims to see what can be done first rather than automatically filing an appeal. If you send multiple claims through as appeals, this takes time on the provider to fill out the request multiple times, fax each one individually, and more importantly, it exhausts your only appeal level.

If you first contact your Provider Relations rep, it can usually be handled as a project and you can submit everything on one spread sheet, then, any claims that still don't pay correctly can be appealed.

Member Rights & Responsibilities

Aetna Better Health® of Pennsylvania and Aetna Better Health® Kids maintain policies and procedures that formally address a member's rights and responsibilities. The policies reflect federal and state laws as well as regulatory agency requirements.

Annually, we inform our members of their rights and responsibilities in the member handbook, member newsletter and other mailings. Their Rights and Responsibilities are also posted within the For Members section of our website at [AetnaBetterHealth.com/pennsylvania/members](https://www.aetnabetterhealth.com/pennsylvania/members).

We ensure members can exercise their rights without adversely affecting treatment by participating providers. Members' rights and responsibilities are monitored through our quality management process for tracking grievances and appeals as well as through member surveys. Issues are reviewed by our Service Improvement

Committee and reported to the Quality Management Oversight Committee.

For additional information regarding member rights and responsibilities, visit our website or call your Provider Relations Representative at **1-866-638-1232**.



We're excited that Aetna Better Health® Kids® (CHIP) members have even more reasons to smile this summer! Our summer-long dental event promotes preventive care and rewards members for getting routine preventive care. Learn more below:

Summer of Smiles



Get a gift card when your child gets a no-cost dental check-up. Now through August 31st.

Your no-cost dental visit may include:

- A dental exam
- Cleaning
- X-rays
- Fluoride treatment
- Sealants

Regular dentist visits help keep your child healthy

Now you can get rewarded for it. Gift cards are available for infant, kid and teen members ages 6 months through 18 years.

We can help you find a dentist

Call today to schedule.

Aetna Better Health® Kids Member Services
1-800-822-2447 (TTY: 711)



Scan the QR code or visit us online

[AetnaBetterHealth.com/pennsylvania/members/chip](https://www.aetnabetterhealth.com/pennsylvania/members/chip)

Updated Tele-dentistry Guidelines and Dental Fee Schedule

Starting with dates of service on and after May 2, 2022 procedure codes for counseling services have been added to the MA Program Fee Schedule. This MAB applies to MA enrolled dentists (all specialties), FQHCs, and RHCs that provide dental services to MA beneficiaries in the fee-for-service (FFS) and MA managed care delivery systems. Click [here](#) to read the full bulletin On our [Provider Notices page](#) under Bulletins.



Provider Contract General Obligations Reminder

Section: 1.1 of Provider Contracts General Obligations: (e) - requires all Group Providers in all Provider locations, to provide Covered Services to Members in compliance with the terms of this Agreement; any exceptions must be approved in advance, in writing, by Company (Aetna Better Health® of Pennsylvania).



Calling All Dental Providers: Why Choose Aetna Better Health® Kids?

Besides routine preventive dental services, our members are eligible for a number of additional dental benefits. Dental-related services members may be eligible* to receive are listed below:

- Emergency Tele dentistry Services
- Tele dentistry visits with a dental hygienist
- Full debridement
- Periodontal maintenance
- Nutritional counseling
- Tobacco counseling
- Advanced imaging and x-rays
- Blood glucose level testing
- Fixed space maintainers
- Apicoectomy and RCT retreatments
- Periodontal surgery and tissue grafts
- Root canals
- Inlays/On lays
- Crown lengthening
- Collection and preparation of genetic sample material for laboratory analysis and report
- Collection of microorganisms for culture and sensitivity
- Occlusal Guards
- Pulp vitality testing
- Interim caries arresting medicament application (SDF)
- Esthetic crowns (zirconia, prefabricated esthetic coated stainless steel crown, prefabricated stainless steel crown with resin window)

* Some services require prior authorization and may only be available if they're deemed medically necessary and age appropriate.