# Aetna Better Health® of West Virginia Provider Bulletin

Volume Two January 31, 2020

# What You Need to Know Before Mountain Health Promise Implementation

Effective **March 1, 2020**, Aetna Better Health of West Virginia will assume responsibility for the administration of the Mountain Health Promise (MHP) program. Mountain Health Promise is the program that provides health care and related services to the state's foster children, children adopted from foster care, children in kinship care, previously these individuals were served under the Bureau for Medical Services fee-for-service (FFS) Medicaid program. In addition, children diagnosed with serious emotional disorder (SED) enrolled in the WV Medicaid SED Waiver will be served under the MHP program. Aetna Better Health of West Virginia (Aetna) is proud that it has been selected to be the Managed Care Organization for Mountain Health Promise and we look forward to working with you and multiple other stakeholders in improving the life opportunities for West Virginia's foster children and their families.

### Why is WV Medicaid making this change?

Mountain Health Promise seeks to reduce fragmentation and offer a seamless approach to participants' needs, deliver needed supports and services in the most integrated and cost-effective way possible, provide a continuum of acute care and related services, and implement a comprehensive quality approach across the continuum of care.

#### **Provider Guidance /Instruction**

- Member Notification: Aetna members should have already received one notice briefly
  describing the change and will receive at least one more with extra detail regarding the
  benefits of Mountain Health Promise. You may soon be receiving calls from our
  members related to your Aetna affiliation and participation in the Mountain Health
  Promise program
- Member ID cards: Aetna will be issuing new ID cards for members to use when
  accessing services. Members will receive a plastic card that includes the Mountain Health
  Promise name and logo, the member's ID number, the name of the member's PCP, the
  PCP phone number, and phone numbers for Aetna member services and the crisis
  hotlines. Cards will be re-issued as needed.
- Continuity of Care / Aetna's Authorizations Requirements: During the transition phase
  to managed care, Aetna will not require any additional prior authorization requirements
  for behavioral health, dental, or medical services previously authorized under FFS. All FFS
  prior authorizations will be honored for the entire duration of the authorization.

## **Provider Engagement:**

Aetna has established several methods for information sharing with providers. It is critically important that providers be given accurate and timely information and instruction they require in order to fulfill their network requirements. To achieve this objective, we have established several outreach initiatives. These include:

- Outreach: Our Provider Relations team has already reached out to several provider
  organizations. If you have not been contacted, you can expect a call from one of our
  representatives soon. Our goal is to contact all specialty providers by January 31, 2020.
  At that time an on-site visit will be scheduled. Our Provider Relations associates will also
  be making regular calls to our providers to identify, address and resolve issues as they
  occur.
- **On-Site Visits:** The purpose of on-site visit is to confirm that you have been provided and fully understand what will be expected of you as a member of Aetna's provider network. Visits will also afford you and your agency colleagues the opportunity to address any questions you may have about your network participation. It's important that we begin developing productive working relationships with all new providers. Visits are one step in that process.
- **Virtual Office Chat Sessions:** The Virtual Office Chat Sessions will be held every Friday from 9 AM to 10 AM. Our first session was conducted on Friday, January 24, 2020.

Providers may access the Session by calling **1-844-712-3250 and using Access Code 717 079 411.** Lisa Sentich, an Aetna Provider Relations representative will host the call. Below is a schedule of future sessions including topics we intend to address. If you have problems accessing the session, please send a message to Lisa Sentich at SentichL@aetna.com.

Following a discussion around the key topic, participants will be encouraged to raise questions about the Mountain Health Promise program, or any matters related to their participation in Aetna's provider network.

#### Schedule of Virtual Office Chat Sessions:

Date	Featured Topic
2/7/2020	Billing / Claims
2/14/2020	Introduction/Message from Program Director
	Status check
2/21/2020	Member Service
2/28/2020	Quality
3/6/2020	Go Live Status Check
3/13/2020	TBD
3/20/2020	TBD
3/27/2020	TBD

NOTE: Topics are subject to modification.

#### **Aetna Contacts:**

If you have questions that require immediate attention, feel free to contact one of our Aetna Provider Relations Associates. Attached is a map that identifies the Provider Relations Associate that supports your region, or you may contact **Sarah White, our Provider Relations Manager** (304-348-2089, SEWhite@aetna.com).

Please share a copy of Aetna's Provider Bulletin with others throughout your organization. The information provided is intended to inform you and others on critical program and service matters.