

# PROVIDER BULLETIN



AETNA BETTER HEALTH® OF FLORIDA

261 N. University Drive  
Plantation, FL 33324

[www.AetnaBetterHealth.com/Florida](http://www.AetnaBetterHealth.com/Florida)

Date:	June 28 <sup>th</sup> , 2021
Purpose:	Provider Bulletin: Update providers on COVID-19 Temporary Flexibilities
Subject:	COVID-19 Flexibilities Ending on July 1, 2021
Products:	MMA, LTC, FHK
From:	<u>Provider Relations</u>

Dear Provider,

This notification is to inform all providers that effective July 1<sup>st</sup>, 2021, Aetna Better Health of Florida (ABHFL) will be ending the following temporary flexibilities that were granted during the state emergency 2019 novel coronavirus (COVID-19).

### **Reinstatement of Preadmission Screening and Resident Review (PASRR) Requirements:**

The Agency and Aetna Better Health of Florida waived PASRR processes until further notice through the issuance of [PT 2020-15](#) on March 18, 2020. All required PASRR processes are reinstated effective with any admission on or after July 1, 2021. Retroactively performed screenings or resident reviews must document the reason for the delay in the completion of PASRR requirements. Aetna Better Health of Florida may deny payment based upon the lack of completion of PASRR requirements for new admissions to a nursing facility with an admission date on or after July 1, 2021.

### **Reinstatement of Interfacility Transfer Prior Authorization Requirements:**

With the issuance of [PT 2020-41](#) on July 14, 2020, the Agency and Aetna Better Health of Florida waived service authorization requirements prior to admission for hospital transfers, including:

- inter-facility transfers;
- transfers to a long-term care hospital; and
- transfers to a nursing facility.

In addition, to facilitate non-emergency transportation services needed to aid in these transfers, the Agency and Aetna Better Health of Florida waived the need for prior authorization for non-emergency ambulance transportation services for hospital transfer scenarios as described above.

Prior authorization requirements for the services listed above are reinstated for dates of service on or after July 1, 2021. This guidance does not apply to prior authorization and service limit flexibilities put in place to appropriately evaluate and treat individuals diagnosed with COVID-19. The Agency and Aetna Better Health of Florida will continue to waive prior authorization and service limits for the treatment of COVID-19 through the end of the federal public health emergency.

**Reinstatement of Prior Authorization and Service Limits for Behavioral Health Services**

The Agency and Aetna Better Health of Florida waived Medicaid prior authorization requirements and service limits (frequency and duration) for behavioral health services (this includes targeted case management services) through the issuance of [PT 2020-31](#) on May 5, 2020 and [PT 2020-35](#) on June 12, 2020. Behavioral health services:

- Prior authorization requirements must be reinstated for dates of services on or after July 15, 2021; and
- Service limits must be reinstated for dates of service on or after July 1, 2021.

As prior authorizations and service limits are reinstated, Aetna Better Health of Florida will work closely with providers to ensure continuity of care for medically necessary courses of treatment.

**Ending Provisional Provider Enrollment:**

The Agency and Aetna Better Health of Florida allowed provisional enrollment for in-state and out-of-state providers to address potential workforce shortages in the State through the issuance of [PT 2020-15](#) on March 18, 2020. The availability of provisional enrollment ends on July 1, 2021, prohibiting providers from enrolling through that provisional enrollment process effective July 1, 2021.

Providers currently enrolled through the provisional enrollment process have through December 31, 2021 to enroll in Medicaid. Providers who do not complete the enrollment process by that date will be terminated from Florida Medicaid.

**Ending Temporary Expansion of LTC Service Providers:**

The Agency and Aetna Better Health of Florida provided the temporary expansion of LTC provider qualifications and temporary modification to services during the state of emergency through the issuance of [PT 2020-16](#) on March 20, 2020. Aetna Better Health of Florida will no longer enroll any new LTC service providers under this temporary expansion during the state of emergency effective July 1, 2021.

**Reinstating LTC Face-to-Face Case Management Requirements:**

The Agency and Aetna Better Health of Florida waived all face-to-face case management requirements for LTC enrollees, allowing virtual visits or telephonic contact instead during the pandemic through the issuance of [PT 2020-12](#) on March 12, 2020. Starting October 1, 2021, Aetna Better Health of Florida will reinstate face-to-face visits for new enrollees, annual assessments, and for any enrollee experiencing a significant change.

**Florida Healthy Kids ONLY:**

Effective July 1<sup>st</sup>, 2021, Aetna Better Health of Florida will reinstate all co-payments. Any co-payments through June 30<sup>th</sup>, 2021 will continue to be waived.

**Additional Resources:**

- Statewide Medicaid Managed Care (SMMC) [Policy Transmittal: 2021-20](#).
- For questions or further information, providers can call the Florida Medicaid Helpline at 1-877-254-1055.

We appreciate the excellent care you provide to our members. If you have any questions, please feel free to contact us via e-mail: [FLMedicaidProviderRelations@Aetna.com](mailto:FLMedicaidProviderRelations@Aetna.com). You can also fax us at 1-844-235-1340 or call us through our Provider Relations telephone line: 1-844-528-5815.

Thank you

Aetna Better Health of Florida  
**Provider Relations Department**

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