

AETNA BETTER HEALTH® KIDS

Frequently asked questions and important facts

CHIP enrollment ID card

AETNA BETTER HEALTH® KIDS			
www.aetnabetterhealth.com/pennsylvania			
HMO			
Member ID# XXXXXXXXXXXXXXX		Date of Birth 00/00/0000	
Member Name XXXXXXXXXXXXX		Sex X	
PCP Last Name, First Name		Effective Date 00/00/0000	
PCP Phone 000-000-0000			

COPAYS			
PA/NP	\$5	ER	\$25
PCP	\$5	UC	\$25
SP	\$10	Brand	\$9
		RxBin 610591	
		RxPCN ADV	
		RxGRP RX8814	

Medicaid rates

Rate sheet:

www.dpw.state.pa.us/publications/forproviders/schedules/mafeeschedules/outpatientfeeschedule/index.htm

Aetna CHIP website

www.aetnabetterhealth.com/pennsylvania

Frequently asked questions

- Q.** How can a provider enroll with Aetna Better Health to provide services to CHIP and Medicaid members?
- A.** To apply for participation, visit www.aetnabetterhealth.com/pennsylvania. Complete the Practitioner Application form. Once we receive your application and if approved, we'll mail an agreement to you.
- Q.** If a provider is already credentialed with Aetna Health Inc. (commercial), will they have to go through the credentialing process again through Aetna Better Health?
- A.** No, if the provider was already credentialed by Aetna Health Inc., they will not have to go through the full credentialing process again. However, they will have to complete the standard Provider Application Screening form located on the Aetna Better Health website. This will be to collect the correct provider information and demographic information.
- Q.** What are the advantages for providers under this change?
- A.** Alignment between Medicaid and CHIP allows for increased management of these two member populations, more efficient claims processing (Medicaid and CHIP processed by Aetna Better Health), additional support of provider incentives including Pay for Performance and easy access to Provider Relations for questions related to both CHIP and Medicaid members.
- Q.** Do the CHIP members go through the Vaccine For Children (VFC) program same as Medicaid members? This applies to PCPs only.
- A.** No, vaccines provided to CHIP Members will NOT be administered through the VFC Program. Rather, PCPs will bill us for directly for the biological with the appropriate biological CPT code and NDC code and we will pay them fee for service. The PCPs should NOT use their VFC drugs to provide vaccines to CHIP members. Again, the CHIP members will have separately identifiable ID cards.
- Q.** Are hearing aids covered for both CHIP and Medicaid members?
- A.** Yes. Hearing Aids are covered for both CHIP and Medicaid; however, CHIP members may only receive the hearing aid every two years
- Q.** For PCP services, will the CHIP reimbursement also be paid at the enhanced Medicare rates under the Affordable Care Act (ACA) for 2013 and 2014?
- A.** No, as outlined in the CHIP Amendment or Exhibit, the enhanced rates will not be paid at the enhanced rates. Under the ACA, MCOs will not be funded the enhanced rates for services provided to CHIP members.
- Q.** Are referrals required for service services the same as they were on the commercial business?
- A.** No. No referrals are required for covered services rendered by participating providers.
- Q.** Where do providers submit claims?
- A.** The Payer Identification number is 23228. The claims address is:
Aetna Better Health Kids
Attn: Claims Department
PO Box 62198
Phoenix, AZ 85082

Q. Are there any changes to the mental health benefits and do they require an authorization?

A.

Behavioral Health Benefits	Limits	Free	Low Cost	Full Cost	Prior Auth Required?	Trades
Mental health outpatient services	50 visits per calendar year.	\$0	\$10	\$25	No. Aetna will pay office visits up to yearly benefit limit.	1 inpatient day is equal to 2 days partial hospitalization or 2 intensive outpatient mental health encounters.
Mental health inpatient stays	Medical, mental health, medically related inpatient rehabilitation, and skilled nursing services are limited to a total of 90 days per calendar year combined.	\$0	\$0	\$0	Yes. If it's an emergency, the facility can obtain a retro-authorization. The facility will also need to perform Concurrent Review with our BH Liaison.	Up to 10 inpatient days may be exchanged for this purpose.
Substance abuse outpatient rehabilitation	90 visits per calendar year	\$0	\$10	\$25	Yes, Notification is required to Generate an Authorization. Aetna Better Health Kids will follow Act 106, for Substance Abuse treatment in Pennsylvania for all CHIP member. The Facility will need a script from a psychologist or psychiatrist stating:	Unused mental health outpatient visits may not be exchanged for additional inpatient days. 2 med check appointments are equal to 1 mental health outpatient visit
Inpatient detoxification	Treatment is limited to 7 days per admission. No limit on the number of admissions.	\$0	\$0	\$0		
Substance abuse inpatient residential rehabilitation	Limited to a total of 90 days per calendar year.	\$0	\$0	\$0	1. the member has a diagnosis of substance abuse as listed in the DSM 2. the level of care and initial length of stay. The member must use a participating provider. Note: Aetna will pay up to the benefit limits, which are above the legal minimum as per Act 106.	
Autism related services	\$36,000 per member per calendar year.	\$0	Copayments based on type of service		Depends on type of service; same criteria as for Physical Health. As per Act 22, Autism services (office visits, inpatient stays, etc.) can't count towards Behavioral Health benefit limits.	

Q. For CHIP only providers are Promised IDs required.

A. No. No Promise IDs are required for those providers who only participate in the CHIP LOB.