

Behavioral Analysis (BA) Services



It is important for Aetna Better Health of Florida to make sure that our providers have the most current information regarding our services. This document will help you find BA information quickly and efficiently.

<p><u>Serving Regions</u></p> <p>Region D (6) – Tampa: Hardee, Highlands, Hillsborough, Manatee and Polk.</p> <p>Region E (7) – Orlando: Brevard, Orange, Osceola and Seminole.</p> <p>Region I (11) – Miami: Miami Dade and Monroe.</p>	<p><u>Behavioral Services Network (BSN)</u></p> <p>Contracting and Credentialing Information Behavioral Services Network, Inc Email: info@bsnnet.com Phone: 305-907-7470 Non-PAR Providers may apply on the BSN website:</p> <ul style="list-style-type: none"> • https://providers.bsnnet.com/auth/register 		
<p><u>Provider Engagement</u></p> <p>Provider Team is available Monday through Friday 7:30AM to 7:00 PM EST.</p> <ul style="list-style-type: none"> • Medicaid (MMA): 1-800-441-5501 (TTY: 711) <p>FLProviderEngagement@aetna.com</p>	<p><u>Direct Contact Information</u></p> <table border="0"> <tr> <td>Denise Castro Director, Provider Relations Phone: 786-412-1710 Email: castrod@aetna.com</td> <td>Yudisleydis Perez (Yudi) MGR, Provider Relations Phone: 786-417-0860 Email: Perezy@aetna.com</td> </tr> </table>	Denise Castro Director, Provider Relations Phone: 786-412-1710 Email: castrod@aetna.com	Yudisleydis Perez (Yudi) MGR, Provider Relations Phone: 786-417-0860 Email: Perezy@aetna.com
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<p><u>Provider Training Materials</u></p> <ul style="list-style-type: none"> • ABHFL provides a variety of trainings including ongoing billing, reimbursement, website, availability, prior authorizations, grievance and appeals, provider manual updates, continuity of care period, and many more topics. • All provider trainings are uploaded to our ABHFL website and can be located on our provider training and orientation section on our website: https://www.aetnabetterhealth.com/florida/providers/training-orientation.html <p>Invitations to the trainings are sent via fax blast/email</p>	<p><u>Continuity of Care (COC) Period</u></p> <ul style="list-style-type: none"> • During the initial continuity of care period beginning on February 1, 2025, ABHFL will honor any prior authorizations for behavior analysis services for the entirety of the continuity of care period (a minimum of ninety (90) days). • Any existing prior authorizations that may expire during the initial continuity of care period will be extended for the remainder of the continuity of care period. • For enrollees that change plans during the initial continuity of care period, ABHFL will coordinate with the previous plan to ensure existing prior authorizations is honored. 		
<p><u>EFT/ERA Registration</u></p> <p>To enroll in EFT/ERA Registration Services (EERS) visit Aetna Better Health ECHO portal.</p> <ul style="list-style-type: none"> • Support Team Phone: 1-888-834-3511 (TTY:711) <p>Email: allpayer@echohealthinc.com</p>	<p><u>Prior Authorization</u></p> <ul style="list-style-type: none"> • Prior Auth MMA/: 1-800-441-5501 (TTY:711) • Prior Authorization page: https://www.aetnabetterhealth.com/florida/providers/material-s-forms.html • Fax MMA: 1-800-441-5501 <p>Fax Behavioral Health -MMA: 1-833-365-2474</p>		
<p><u>Submission of Electronic and Paper Claims</u></p> <ul style="list-style-type: none"> • Electronic Submissions <ul style="list-style-type: none"> - Availability: https://availability.com/ - ID for EDI: 128FL - Real Time Payer ID: ABHFL • Paper Claims <ul style="list-style-type: none"> - All paper claims can be mailed to: Aetna Better Health of Florida Inc. PO Box 982960 El Paso, TX 79998-2960 • Out of Network Providers - Out of network providers have 365 for claims submission. • Claims Inquiry/Claims Research (CICR) MMA: 1-800-441-5501 (TTY: 711) 	<p><u>Billing and Reimbursement</u></p> <ul style="list-style-type: none"> • During the Continuity of Care (COC) Period <ul style="list-style-type: none"> ○ BA Reimbursement is based on the amount that each individual provider is receiving prior to COC and for 90 days. ○ Bill form type: HCFA 1500. • Process Reimbursement outside of COC would be based on provider's contracted rate. • Non-Participating providers Non-Participating providers will be reimbursed at the rate received for services rendered to the member immediately prior to the member transitioning for a minimum of ninety (90) days. • Timeline of Reimbursement from Receipt of a Clean Claim ABH-FL currently issues payments to providers three (3) days per week. Electronically submitted clean claims are paid or denied no later than 15 days after submission. Non-electronically submitted clean claims are paid or denied no later than 20 days after submission. 		