



Aetna Better Health® of Illinois Provider E-newsletter

Fall 2026

It's flu season

Flu season is here, and it's time to remind members to get their annual flu shot. Vaccination remains one of the most effective ways to protect against serious illness and reduce the spread of the flu.

Key messages to share with members include:

- The flu shot helps prevent serious illness and hospitalization related to influenza.
- Getting vaccinated helps protect those most at risk, including infants, young children and individuals with underlying health conditions.
- Getting a shot by the end of October helps provide protection during peak flu season.

Flu shots are covered at no cost to members.

Breast cancer awareness

October is Breast Cancer Awareness Month, a good time to remind members to complete their breast cancer screening. Breast cancer is the most common cancer among American women, aside from skin cancers. Early detection through regular screenings significantly reduces mortality, improves treatment options and lowers healthcare costs. Providers can earn incentives through our [**Pay-for-Performance \(P4P\) program**](#) when breast cancer screening care gaps are closed.

Medicaid rule changes for noncitizens

Federal Medicaid rules are changing. As of **October 1, 2026**, some noncitizens, including but not limited to refugees, asylees, humanitarian parolees and survivors of trafficking or domestic violence no longer qualify for federally funded Medicaid.

The following groups will remain eligible: naturalized citizens, lawful permanent residents who meet the 5-year requirement, certain Cuban and Haitian entrants, COFA migrants (from Marshall Islands, Micronesia

or Palau), children under 19 years old, pregnant people and individuals currently enrolled in a state-funded program, including AATV, VTTC and HBIS.

Individuals who lose Medicaid coverage can still get primary and preventive care. Federally Qualified Health Centers and free/charitable clinics serve uninsured and underinsured individuals regardless of immigration status or ability to pay. Find locations at IllinoisFreeClinics.org and IPHCA.org/health-center-locator.

[Visit the HFS Federal Resource Center](#)



Doula service billing reminder

Doulas serving Illinois Medicaid members should use the [HFS Doula Fee Schedule](#) and review it regularly for updates. Covered services include prenatal education, labor and delivery support, postpartum education and advocacy, postpartum visit attendance, newborn visit facilitation, and support following miscarriage or abortion. Group prenatal and postpartum education services may be billed using the applicable HQ modifier. Telehealth services are allowed for certain doula services using GT (audio/video) or 93 (audio-only) modifiers with the appropriate place-of-service code. Providers should ensure all billing requirements are met, including documentation requirements for postpartum visit services.

Bill-IQ: Your AI-powered Medicaid billing assistant

Bill-IQ is a Conversational AI Provider Support Agent. This innovative AI tool is designed to help health care providers navigate the complex landscape of Illinois Medicaid billing guidelines, leveraging the comprehensive Illinois Association of Medicaid Health Plans (IAMHP) billing manual. By reducing administrative burdens, Bill-IQ empowers providers to focus more on what matters most — member care.

Access the Bill-IQ tool via the [Availity Provider Portal](#), the Aetna Better Health of Illinois [website](#) or directly at the [Bill-IQ website](#).

Annual training attestation

As part of your contractual obligations with Aetna Better Health of Illinois, providers are required to complete annual Cultural Competency training. To ensure compliance, providers must submit an attestation confirming completion of this training each year. Attestations may be submitted using our electronic form, or if the training was completed through another MCO, we will accept their attestation form as well. Thank you for your continued commitment to providing high-quality, culturally competent care.

[Complete the attestation form](#)



Upcoming provider education

Provider Summits

These quarterly meetings help keep you informed and engaged with our health plan.

**Thursday, November 5, 2026
10:00 AM – 12:00 PM CT**

**Thursday, November 19, 2026
1:00 – 3:00 PM CT**

[Register here](#)



Lactation consultant services billing update

Lactation consultants providing services to Illinois Medicaid members should review the current [HFS Lactation Consultant Fee Schedule](#) prior to submitting claims. Covered billing codes include S9443 for individual lactation consultation services and additional modifiers for group services. Telehealth delivery is also permitted for eligible lactation services when billed with the appropriate modifiers (GT for audio/video or 93 for audio-only) and applicable place-of-service codes. Providers should maintain documentation supporting the service provided and follow HFS billing requirements.

Smoking cessation

According to the CDC, health care providers play a key role in decreasing cigarette smoking, the leading preventable cause of death and disease in the United States. Remind members that quitting tobacco use is a commitment to better health.

Here are resources to share with members who want to quit smoking:

- Call [1-800-QUIT-NOW](tel:1-800-QUIT-NOW) ([1-800-784-8669](tel:1-800-784-8669))
- Text **QUITNOW** to **333888**
- Download the **quitSTART** mobile app



Community Resource Directory

The Community Resource Directory (CRD) is now available to contracted providers through the [Avality Provider Portal](#). This allows providers to create referrals for members to address a full spectrum of Social Determinants of Health needs. Creating a holistic approach of touch points by the care team for members as the CRD interfaces with other platforms, such as Aetna's Care Management documentation and reporting systems, as well as the [Member Portal](#). Data from the CRD relays the top categories requested by member need as well as community organizations to whom have been issued the most referrals overtime.

[Access the CRD](#)

Effective Oct. 1, 2026: New HCBS homemaker service modifiers

HFS has implemented two new modifiers for HCBS In-Home Homemaker Services (S5130) effective October 1, 2026.

- Modifier XE (Separate Encounter): Used for the second and subsequent homemaker visits provided on the same date of service.
- Modifier TF (Enhanced Insurance Rate): Used only by approved homemaker agencies that qualify for the enhanced reimbursement rate for offering insurance to employees.

When applicable, both modifiers may be billed together. Providers should review HFS billing guidance and ensure claims are submitted with the appropriate modifier to support accurate reimbursement and claims processing.

Prior Authorization bundles for oncology

Aetna Better Health of Illinois providers can now request oncology and imaging services together on [Eviti Connect®](#) via prior authorization bundles, streamlining the process and eliminating the need for separate submissions. When eligible, requests are automated, reducing the administrative burden and improving provider and member experience.

[Learn more](#)

We value your feedback

At Aetna Better Health of Illinois, we are committed to providing exceptional service and support to our provider partners. We invite you to complete our [Provider Experience Survey](#) and share your feedback regarding your Provider Relations Representative, training and educational opportunities, online tools and resources, claims support and overall satisfaction with the services we provide.

Your feedback helps us identify opportunities for improvement, enhance the provider experience, and better meet the needs of the providers we serve. The survey should take only a few minutes to complete, and we appreciate your participation.

[Go to the Provider Experience Survey](#)

Appointment and availability standards

Our Provider Manual defines appointment and availability standards for each type of care and specialty. Providers who cannot offer an appointment within the specified timeframes should refer the member to our Member Services team at [1-866-329-4701 \(TTY: 711\)](tel:1-866-329-4701).

Emergency care	Immediately
Urgent care	Within 24 hours
Routine preventive care	Within 5 weeks For infants under 6 months, within 2 weeks
Maternity	1st trimester: 2 weeks 2nd trimester: 1 week 3rd trimester: 3 days
Behavioral health care	Non-life-threatening: Within 6 hours Urgent: Within 48 hours Routine care: Within 10 business days
Post-discharge follow-up	Within 7 days
Office wait times	Not to exceed 45 minutes
After hours	24/7 coverage*

*The following are not compliant for after-hours requirement:

- No answer
- Listed number not in service
- On-hold time exceeds 5 minutes
- Instructing caller to leave message
- Instructing caller to go to ER regardless of situation, without allowing caller to speak with a provider

**Get the Appointments and
Availability Standards**

Find your Provider Relations rep

Your Provider Relations representative is available to assist with provider education, operational questions, resources and navigating health plan processes. Find your rep and their contact information.

We need your latest W-9

We're required to collect a W-9 for every Tax Identification Number (TIN) in our network. [Complete your updated W-9 electronically here.](#)



Find your Provider Relations rep

Submitting your rosters

In-network providers can use our email inbox ABHILProviderUpdateRequests@AETNA.com to submit rosters, demographic updates and other info. Use the updated Universal IAMHP Roster Template provided by the [Illinois Association of Medicaid Health Plans](#).

We're here to help



Email

ABHILProviderRelations@aetna.com



Phone

[1-866-329-4701 \(TTY: 711\)](tel:1-866-329-4701)

Monday through Friday
8:30 AM to 5:00 PM



Online

AetnaBetterHealth.com/Illinois-Medicaid/Providers

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