

 Aetna Better Health of Kentucky 9900 Corporate Campus Drive Suite 100 Louisville, KY 40223	Date	June 10, 2025
	To	All Network Providers
	From	Provider Experience
	Subject	TIP Tuesday – TCM
	Document number	Aetna-2240

Targeted Case Management (TCM) – REMINDERS

Targeted Case Management prior authorization will begin 7/1/2025. If TCM is being provided in a rolling month versus a calendar month, this means that 7/1/25 may not represent the first day of the TCM service month.

To accommodate providers that may be providing services in a rolling month, we would like to clarify that **prior authorization is required to reimburse TCM for individuals who have the first day of the service month on or after 7/1/2025.**

Typically, providers submit TCM claims with the “start” and “end” date on the claim as the same date, which represents the last day of the TCM service period. To account for rolling month billing, **if the last day of the TCM service month is 7/1-7/30/25, prior authorization is not required.** For example, if 7/15/25 is the start and end date on the claim, a prior authorization is not required because this would indicate the last day of the TCM service month is 7/15/25.

For new recipients of TCM who are initiating TCM services with a start date on or after 7/1/25, **providers may submit prior authorization requests up to (14) calendar days prior to the intended start date and up to (14) calendar days after the intended start date of the service month.** For a recipient starting TCM on 7/3/2025 for example, the PA request could be submitted any time between 6/19/25 and 7/17/25.

Providers may request up to (3) units/months of TCM per request. You will receive a decision letter outlining the dates.

Providers may submit prior authorization requests for TCM electronically through [Availity Portal](#) or via Fax:

Outpatient Behavioral Health: 855-301-1564

Outpatient SKY Behavioral Health: 833-689-1424

TCM Billing

Note that **Aetna defines a rolling month as a minimum of (28) days** for billing purposes, meaning there must be a **minimum of (28) days** between the end date of service for Targeted Case Management (TCM) and the start date for

the following month of TCM services. This means that the start date on the claim for the next month of TCM services must start on or after the 29th day from the end date of the previous claim for TCM services.

- For example, if a provider bills a TCM claim with an end date of 6/2/25, the next claim for TCM must have a start date on or after 7/1/25
- It is important for providers submitting TCM prior authorization requests to clearly identify the Start and End of the TCM service period being requested.

Documentation & Information to Include with TCM Prior Authorization Requests

In addition to the information included on the prior authorization form, the following will be required.

- Name of the Targeted Case Manager
- Name of the Targeted Case Manager Supervisor
- Type of TCM being requested (HE, UA, TG, HF)
- Recipient Diagnoses
- The date TCM was initiated.
- Copy of the most recent TCM Assessment
- Copy of the most recent TCM Care Plan (or overall care plan that has specific TCM section for TCM goals/objectives).
- Documentation supporting applicable TCM eligibility criteria. For example,
 - A copy of the assessment by a licensed behavioral health professional demonstrating a recipient is meeting diagnosis, disability, and duration criteria for targeted case management for individuals with a severe mental illness (SMI).
 - Documentation of the recipient's chronic or complex physical health diagnosis that is signed and dated by a qualified medical professional for individuals with a mental health or substance use disorder and chronic or complex physical health issues.
 - A copy of the assessment by a licensed behavioral health professional supporting the recipient meets criteria for the designation of Severe Emotional Disability (SED).