

Aetna Better Health of Louisiana is making progress in redefining health care in America. Making health care more accessible, affordable, and convenient, we pride ourselves on focusing on integrating behavioral health and physical health components. This newsletter disseminates updates, resources, and articles for you – our providers. This is a place where you can share your voice. If you are interested in contributing to the newsletter, have ideas or suggestions, or you and your organization are interested in partnering with primary care organizations to integrate behavioral and physical health to treat the person as a whole, please contact Brian Guess at [GuessB@aetna.com](mailto:GuessB@aetna.com).



## SELF-CARE

### Crouching yoga, hidden benefits

By Brian Guess, LPC

In a world that has become fast-paced, it is difficult to stay still or sit in one place beyond a few minutes. You may think, “I need to be doing something,” “I feel guilty just sitting,” or “I’d rather just get on my phone.” And then there’s yoga. On the surface, it just looks like sitting on the floor and stretching, but is there more to it than that?

Yoga is an ancient discipline that enhances one’s physical, mental, emotional, and spiritual wellbeing. It is an easily accessible and gentle form of physical activity that focuses on stretching, posture, breathing, and meditation. A 2022 study showed that adding 15-minute yoga workout to your daily fitness routine can reduce systolic blood pressure twice as much compared to a simple 15-minute stretching routine, as

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### Crouching yoga, hidden benefits, *(continued from previous page)*

well as reduce resting heart rate and 10-year cardiovascular risk assessed using Reynold's Risk score, which is a person's risk of having a heart attack before age 60<sup>1</sup>.

Yoga is beneficial to improving strength and flexibility, of course. But there are many other less obvious benefits:

- **Reduces chronic pain.** Yoga can have a positive impact on lower back pain, arthritis, fibromyalgia, and neck pain. Additionally, the American College of Physicians (ACP) recommends yoga as the go-to treatment for chronic lower back pain – before medication<sup>2</sup>.
- **Sharpens cognitive functioning.** Studies have found that yoga can have positive effects on executive functioning, the set of skills you need to set goals, follow multi-step directions, and stay focused<sup>2</sup>.
- **Decreases stress and inflammation.** Stress is both mentally and physically damaging. Stress causes muscle tension, raises blood pressure, and forces your body to produce cortisol, the stress hormone that increases inflammation. Yoga puts your body at ease and gives it a chance to rest from the effects of stress.
- **Can produce weight loss.** Yoga can speed up your metabolism and burn calories. But more

importantly, it can promote being more mindful of what you eat. Research shows that people who practice yoga for a minimum of 30 minutes once a week for at least four years gain less weight in midlife than people who do not do yoga routinely<sup>2</sup>.

While yoga may not be helpful for all medical conditions and every person, people of all age groups and body types can practice yoga. It does not need to be a complex and lengthy routine. You can even skip the intimidating classes and simply do yoga at home. Here are some beginner yoga videos you can watch and do at home:

- You can try a **five-minute yoga stretch** if you have a mat
- You can even do a quick five-minute stretch while **standing without a mat**
- Here's a **30-minute yoga session** you can do at home if you have more time

#### Sources:

<sup>1</sup>Lidicker, G. (January 8, 2023). **Yoga vs. stretching: new science says one is even better for well-being.** Mindbodygreen.

<sup>2</sup>Ellis, Rachel. (January 21, 2023). **How doing yoga affects your body and brain – 4 important benefits.** Fortune Well.



## Clinical practice guidelines

Aetna Better Health adopts clinical practice guidelines to help our practitioners make decisions about appropriate health care for specific clinical circumstances and behavioral healthcare services.

These guidelines are based on the health needs of our membership and on opportunities for improvement identified as part of the quality improvement (QI) program. Our clinical guidelines represent current professional standards, supported by scientific evidence and research. Guidelines are available for preventive services, as well as for the management of chronic diseases, including behavioral health conditions, to assist in developing treatment plans for members and to assist our members with their healthcare decisions.

Our guidelines are reviewed and approved by the Chief Medical Officer (CMO), Quality Management/Utilization Management (QM/UM) Committee and, if necessary, external consultants. All guidelines, preventive, physical and behavioral, are reviewed at least every two years, or as often as new information is available. We also evaluate providers' adherence to the guidelines at least annually, primarily through monitoring relevant HEDIS measures.

For the most up-to-date version of our preventive and clinical practice guidelines, go to **AetnaBetterHealth.com/Louisiana**, click on "providers," and find the "guidelines tab", or call **1-855-242-0802** and our Medical Management or Quality Management department will assist you.



## Behavioral health (BH) & applied behavioral analyst (ABA) provider monitoring teams

Name	Title	Email
Shawn Allen, LPC	Clinical Advisor	AllenS21@aetna.com
Chrysen Banks	Analyst, Health Care QM	BanksC@aetna.com
James Bognar	Senior Manager, Quality Management	bognarj1@aetna.com
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Brandi Thomas-Scott, LPC	Provider Quality Monitoring Manager	Thomas-scottB1@aetna.com



## Getting triggered as a counselor

By Lindsey Phillips

The term countertransference has been debated since Sigmund Freud first argued that it was something taboo – a personal obstacle that would harm the therapeutic relationship. Today, counselors acknowledge that countertransference is inevitable. Counselors are human and prone to having their own issues emerge, often without them even realizing it. Sessions can trigger past experiences, unresolved issues, implicit beliefs and an array of emotions.

“There’s no way counselors can really extricate themselves and their personality from the [therapeutic] process,” says Peter Allen, a licensed professional counselor (LPC) and integrated care supervisor at Brightways Counseling Group in Madras, Oregon. “That doesn’t mean we’re always talking about ‘me’ [in session]. But it means that I’m acknowledging that I’m coming in with a lot of baggage and perceptions about things that have to be managed.”

Jessie Guest, a licensed clinical mental health counselor and supervisor in North Carolina, views countertransference through Charles Gelso and Jeffrey Hayes’ definition, which she summarizes as an “inevitable, unresolved conflict that leads to misdirected feelings toward a client that can be triggered by the content of the session [or] the client’s personality or appearance.”

Although countertransference is more widely acknowledged today, counselors, especially those early in their careers, often struggle to disclose it, Guest says, because they are either unaware of it or they fear it will make them appear incompetent to others in the profession. Having negative feelings about a client can also make counselors question themselves – both as people and professionals – because they believe that as helpers, they should always be happy and nice, adds Guest, an American Counseling Association member whose specialties include play therapy, trauma and countertransference.

How counselors handle their countertransference “can either be helpful or hinder the therapeutic relationship,” says Guest, who is a registered play therapist and supervisor. “We all have experiences, and people are going to poke those experiences. . . . But it’s our job to be aware of it and take the time to reflect on those things so it can be helpful instead of harmful for our clients.”

Read the article in its entirety at:

<https://ct.counseling.org/2022/05/getting-triggered-as-a-counselor/>





## Adapted from: Practicing with compassionate care: a missing piece in behavior analytic training

By Ashley Kemmerer, MS, BCBA

Becoming and practicing behavior analysis is often synonymous with a strong understanding of the technical components of behavior change procedures. But while our technical skills and competence in these areas is important to our practice, there is an element of our training that is missing. That element is the ability to practice compassionate care.

### What is compassionate care?

There is no technical definition in behavior analysis to describe compassionate care, but the components involved have been identified. Taylor et al. (2018) describe that compassionate care involves interpersonal skills related to sympathy, empathy, and compassion. Generally, compassionate care refers to the ability to put yourself in the shoes of those you are working with and provide meaningful support based on those feelings.

### Why is it important?

Many of us are working with families who are in varying stages of life with a child that has a diagnosis. Whether they just received the diagnosis or have had years of therapies and supports, it can be a major stressor. There is evidence from other fields such as medicine and mental health that compassionate care can lead to increased patient satisfaction, adherence to treatment, enhanced quality of information gathered, and improved clinical outcomes (Taylor et al., 2018). Our ability to practice compassionate care could greatly improve parents' adherence to treatment plans and participation in parent training.

It is also important to remember that our ethics code speaks to the importance of client and caregiver relationships, clear communication, and client preference. A behavior analyst practicing with compassionate care will likely be more successful at adhering closely to those ethical codes.

Lastly, working to practice compassionate care can also potentially improve the overall job satisfaction and happiness of behavior analysts.

### How do we put compassionate care into practice?

Work on improving your own perspective taking skills. It may be helpful to use elements of Acceptance and Commitment Therapy and mindfulness to achieve this.

- Focus heavily on the individuality of each of your clients.
- Become a “behavioral artist” by embodying these seven characteristics:
  1. Likes people and is good at establishing rapport
  2. Has “perceptive sensitivity” and attends to very subtle changes in their client
  3. Actively avoids failure and sees difficult clients as a manageable challenge (genuinely wants their clients to succeed)
  4. Has a sense of humor
  5. Is optimistic and sees behavior change in a “glass half-full” context
  6. Is thick-skinned: doesn't take negative client actions towards themselves personally; maintains objectivity and positivity
  7. Is “self-actualized”: does whatever is necessary (creativity) and appropriate to facilitate and produce positive behavior change

Making our own behavior changes will benefit our clients as well as our own well-being and satisfaction as a behavior analytic practitioner. It will certainly take practice, but we all know that behavior change is possible with the right strategies put into place.

Read the article in its entirety at:

<https://autismspectrumnews.org/practicing-with-compassionate-care-a-missing-piece-in-behavior-analytic-training/>



## PROVIDER MONITORING

### Prescription monitoring program (PMP)

Louisiana Act No. 76 requires prescribers to utilize and conduct patient specific queries in the PMP upon writing the first prescription for a controlled substance, and then every 90 days if treatment continues (exceptions may be requested from the Pharmacy Board). The physician will print the PMP query and file it as a part of the recipient's record. Additional PMP queries are encouraged to be conducted at the prescriber's discretion.

The Centers for Disease Control and Prevention (CDC) Clinical Practice Guideline for Prescribing Opioids for Pain recommends that clinicians use particular caution when prescribing benzodiazepines concurrently with opioids and consider whether benefits outweigh risks. Taking opioids in combination with other central nervous system depressants – such as benzodiazepines, alcohol, or xylazine – increases the risk of life-threatening overdose.

Steps for prescribers and dispensers to sign up and access Louisiana's PMP directly:

1. Type <https://louisiana.pmpaware.net/login> in your web browser
2. Select *Create an Account* to begin the process.

#### Find more information about Louisiana's PMP:

1. Go to the Louisiana Board of Pharmacy website at [www.pharmacy.la.gov](http://www.pharmacy.la.gov).

2. Click on *(PMP) Prescription Monitoring Program*.
3. Browse the available information linked on that page, including a quick reference guide for patient data search.

For a complete list of drugs listed within the therapeutic classes, please see the State Preferred Drug List here: <https://ldh.la.gov/assets/HealthyLa/Pharmacy/PDL.pdf>.

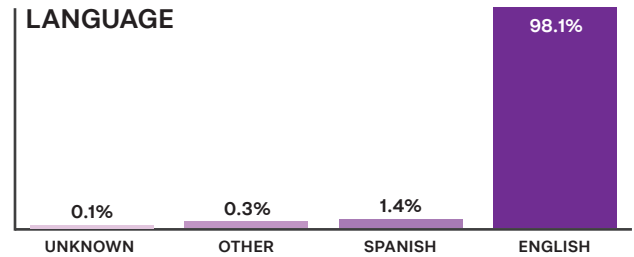
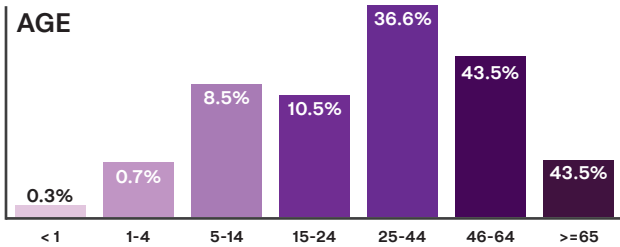


**FOCUS AREA**

## Who are the Aetna Better Health of Louisiana Medicaid members?

As of 1/1/2023, Aetna Better Health of Louisiana had approximately 170,000 Medicaid members. 45.5% (approx. 77,350) are male, and 54.5% (approx. 92,650) are female. The age range is from less than 1 year to over 65 with the age group 25-44 (28.4% or approx. 48,280 members) having the most members.

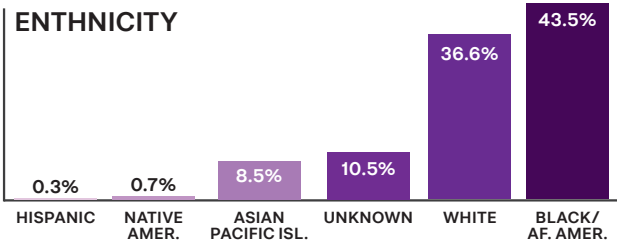
primarily English-speaking (98.1%), approximately 1.8% of our members speak a language other than English or have a vision or hearing impairment. The largest group among these members are those who primarily speak Spanish, at 1.4% of our member population.



The majority of ethnicities enrolled are Black/African American (43.5% or approx. 73,950 members) and White (36.6% or approx. 62,220 members) followed by: Unknown (10.5%), Asian/Pacific Islander (8.5%), American Indian/Alaskan (.07%) and Hispanic (.3%)

To assist providers, our telephonic language interpretation service is available to providers to facilitate member interactions. These services are free to the member and to the provider. If a provider chooses to use another resource for interpretation services, the provider is financially responsible for associated costs.

If a member requests interpretation services, Member Services will assist the member via a three-way call to communicate in the member’s native language. We provide alternative methods of communication for members who are visually impaired, including large print and other formats. Contact Member Services for alternative formats.



Relationship of Aetna Better Health members to the state of Louisiana race and ethnicity:

Race and Ethnicity	ABHLA	Louisiana
White	36.6%	58.0%
Black or African American	43.5%	32.0%
Hispanic or Latino	0.3%	5.0%
Two or more Race	—	2.0%
Asian	8.5%	2.0%
American Indian/Alaskan Native	0.7%	1.0%
Other	10.5%	0.0%

We strongly recommend the use of professional interpreters. We use Language Line Solutions, a telephonic multi-lingual translation service, to offer live language interpretation for languages not spoken by health plan staff, rather than family or friends. Further, we provide member materials using a certified translation vendor, Akorbi, to translate enrollee-facing publications documents and materials into other languages upon request and at no cost to the enrollee. Providers must also deliver information in a manner that is understood by the member.

Communication and language barriers are associated with inadequate quality of care and poor clinical outcomes, such as higher hospital readmission rates and reduced medication adherence. People with limited English proficiency or those who experience limited vision or hearing may need an interpreter, and those with vision impairment may need materials presented in alternative formats to ensure equitable care. While most of our Medicaid members are

We offer sign language and over-the-phone interpreter services at no cost to the provider or member. Please contact us at **1-855-242-0802** for more information on how to schedule these services in advance of an appointment.



## Medical necessity criteria

To support prior authorization decisions, Aetna Better Health uses nationally recognized and community developed evidence-based criteria, applied based on the needs of individual members and characteristics of the local delivery system. Prior authorization staff members that make medical necessity determinations are trained on the criteria, and the criteria is established and reviewed according to our policies and procedures.

Clinical medical necessity determinations are based only on the appropriateness of care and service and the existence of coverage. We do not reward practitioners or other individuals for issuing denials of coverage or care or provide financial incentives of any kind to individuals to encourage decisions that result in underutilization.

For prior authorization of elective inpatient and outpatient medical services, we use the medical review criteria listed below. Criteria sets are reviewed annually for appropriateness to our population needs and updated as applicable when nationally or community-based clinical practice guidelines are updated. The annual review process involves appropriate providers in developing, adopting, or reviewing criteria. The criteria are consistently applied, consider the needs of the members, and allow for consultations with requesting providers when appropriate. Providers may obtain a copy of

the utilization criteria upon request by contacting an Aetna Better Health provider relations representative.

### These are consulted in the following order:

- Criteria required by applicable state or federal regulatory agency
- Applicable Milliman Care Guidelines (MCG) as the primary decision support for most medical diagnoses and conditions
- Aetna Better Health Clinical Policy Bulletins (CPBs)
- Aetna Better Health Policy Council Review: if MCG states “current role remains uncertain” for the requested service, the next criteria in the hierarchy, our CPBs, is consulted and utilized

### For prior authorization of outpatient and inpatient services, Aetna Better Health uses:

- Criteria required by applicable state or federal regulatory agency
- LOCUS/CASII Guidelines/American Society of Addiction Medicine (ASAM)
- Aetna Better Health Clinical Policy Bulletins (CPBs)
- Aetna Better Health Clinical Policy Council Review: medical, dental, and behavioral health management criteria and practice guidelines are disseminated to all affected providers upon request, and upon request, to members and potential members



## Member rights and responsibilities

Our members have both rights *and* responsibilities. NCQA and contractual requirements require MCOs to provide these to our providers.

### Member rights

- Be treated with respect and with consideration for your dignity and privacy.
- Participate with provider in making decisions regarding your health care, including the right to refuse treatment for religious reasons or for any other reason.
- Talk about appropriate or medically necessary treatment options for your conditions. This should happen even if it's not a covered benefit and no matter how much it costs.
- Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation.
- Be able to request and receive a copy of your medical records, (one copy free of charge) and request that they be amended or corrected.
- Receive health care services that are accessible, are comparable in amount, duration, and scope to those provided under Medicaid fee-for-service, and are sufficient in amount, duration and scope to reasonably be expected to achieve the purpose for which the services are furnished.
- Receive services that are appropriate and are not denied or reduced solely because of diagnosis, type of illness, or medical condition.
- Receive all information in a manner and format that you can understand.
- Receive assistance from both LDH and Healthy Louisiana in understanding the requirements and benefits of Aetna Better Health.
- Receive oral interpretation services free of charge for all non-English languages.
- Be notified that oral interpretation is available to you free of charge and how to access those services.
- As a potential member, to receive information about the Healthy Louisiana program, which populations may or may not enroll in the program, and Aetna Better Health's responsibilities.
- To receive information on Aetna Better Health's services, such as:
  - Benefits covered
  - What to do to get benefits, including any authorization requirements
  - Any amounts you must pay (co-pays)
  - Service area
  - Names, locations, telephone numbers of and non-English language spoken by current contracted providers
  - How and when you can change PCPs or see other providers
  - Providers not accepting new patients; and
  - Benefits not offered by Aetna Better Health but that you can get under Medicaid.
- Receive information about your disenrollment rights at least annually.
- Receive notice of any changes in your benefits and services. You are informed at least 30 days before the change takes place.
- Receive information on grievance, appeal, and State Fair Hearing procedures.
- Voice complaints, grievances, or file appeals about Aetna Better Health or the care you get.
- Receive information on emergency and after-hours coverage, such as:
  - What is/are an emergency medical condition, emergency services, and post-stabilization services
  - That emergency services do not require prior authorization
  - The process and procedures for obtaining emergency services; The locations of any emergency settings and other locations where providers and hospitals provide emergency services and post-stabilization services covered under the contract
  - Your right to use any hospital or other setting for emergency care; and
  - Post-stabilization care services rules.
- Receive our policy on referrals for specialty care and other benefits not provided by your PCP.
- Tell us what you think about our rights and responsibilities policy. You have the right to receive this information from us upon request.
- Have your privacy protected.
- Exercise these rights without being treated negatively by Aetna Better Health, our providers, or LDH.

## Member rights and responsibilities *(continued from previous page)*

### Member responsibilities

- Use your ID cards when you go to health care appointments or get services and do not let anyone else use your cards. Let us know if you lose your ID card or if it is stolen.
- Know the name of your PCP and your case manager if you have one.
- Know about your health care and the steps to take to get care.
- Do not utilize the emergency room for non-emergent services.
- Tell us when you make changes to your address or telephone number.
- Tell LDH when there are changes in your family size or income.
- Understand your health problems and participate in setting your health goals with your provider.
- Let your providers know if your health changes.
- Be respectful to the health care providers who are giving you care.
- Schedule your appointments during office hours when you can. Be on time. Call if you are going to be late to or miss your appointment.
- Give your health care providers all the information they need.
- Tell the plan and LDH about your concerns, questions, or problems.
- Ask for more information if you do not understand your care or health condition.
- Talk to your providers about the care you need. Ask if there are other options and how they can help. Ask about risks and costs of other options.
- Follow your provider's advice. If you do not want to, let your provider know why.
- Tell us about any other insurance you have. Tell us if you are applying for any new benefits.
- Give your doctor a copy of your living will or advance directive.
- Get all the preventive care you need to stay healthy. Live a healthy lifestyle. Avoid unhealthy activities
- If you don't agree with a provider and want to complain, follow the steps to file a grievance.



### Consumer Assessment of Healthcare Providers and Systems (CAHPS)

Aetna Better Health uses many resources to influence healthcare outcomes and help make people healthier. One of these resources is the Consumer Assessment of Healthcare Providers and Systems, known as CAHPS.

CAHPS is a survey tool for collecting standardized information that demonstrates how well our health plan meets our members' needs. Members report their satisfaction with their health care and services, including their experience with providers, specialists, and our health plan. Overall, it tells us how members rate the quality of health care they receive.

A high CAHPS result will allow members to compare one health plan to another. Currently, Aetna Better Health has a 3.5 star rating comparable with all other plans providing services in Louisiana and is the only plan to increase its rating in 2022.

### CAHPS survey objectives

ABHLA has a strong commitment to providing quality care and services. ABHLA uses CAHPS results in many ways to improve the member's

experience. After analyzing CAHPS results, cross-functional teams develop initiatives to improve different areas.

### CAHPS helps us:

- Capture member-reported experiences with the health plan, healthcare services and providers
- Measure how well the health plan is meeting members' expectations and goals
- Determine which areas of service have the greatest effect on members' overall satisfaction
- Identify the strengths and weaknesses of our health plan and target areas for improvement
- Meet our contractual requirements
- Maintain NCQA accreditation
- Continue to put the member at the center of all we do

### CAHPS process

The CAHPS survey is conducted annually from February through May. Both adult and child surveys are administered; however, only the child survey is submitted for accreditation.

### CAHPS measures

There are nine CAHPS measures, with two or more questions applying to each measure. Any remaining questions are supplemental (additional information), state required, or administrative.

### Composite measures include:

- Getting needed care for member
- Getting care quickly
- Coordination of care
- Customer service
- How well doctors communicate

### Rating measures

In the rating measures, they rate their health plan, health care, personal doctor and specialist on a scale of 0-10.

- Health plan
- Health care
- Personal doctor
- Specialist seen most often

### Effectiveness of care

Effectiveness of care measures specific programs, like vaccinations and tobacco cessation.

- Flu vaccinations (adults 18-64)
- Advising smokers/tobacco users to quit
- Discussing cessation medications
- Discussion cessation strategies

### Factors impacting CAHPS outcomes

- Different factors can affect member experience and CAHPS scores. For example:
  - Formulary and tier changes
  - Office staff experience
  - Provider network changes and plan changes

- Consider the question: “How often was it easy to get the care, tests and treatment.” Responses used to answer the question – Never, Sometimes, Usually and Always. A respondent could reflect:
  - Medical experiences with Aetna Better Health network
  - PCPs, specialists, and facilities
  - Perceived barriers to getting lab tests, dialysis treatment or drug treatments
- The personal definition of what consists of care, tests or treatment will vary from person to person.

### Who uses CAHPS?

#### NCQA accreditation and rating

- NCQA calculates Aetna Better Health’s accreditation level each year. Until 2020, NCQA used a points system to determine the accreditation level, ranking plans as being excellent, commendable, accredited, provisional, or denied.
- Now, health plans are rated with 0 to 5 stars based exclusively on HEDIS (Healthcare Effectiveness Data and Information) and CAHPS scores. Note that this star rating is completely unrelated to the star rating used for Medicare programs.
- Aetna Better Health accreditation status and star rating are public information and found on the internet.

#### Members

- CAHPS supports members in assessing health plans and choosing the plan that best meets their needs. This information is available:
  - On the internet
  - Provided in open enrollment materials
- The survey gives Aetna Better Health members an opportunity to:
  - Express their satisfaction with the health plan
  - Identify areas that need improvement

#### Providers

- Use reported scores to assess the overall performance of all health plans.
- Assists in decisions regarding which health plans to contract with. CAHPS results are available to providers on the internet.



## Provider Relations

Our Provider Services Department serves as a liaison between the health plan and the provider community. Each Louisiana Department of Health Region in the state has one or more regional representatives.

### Physical Health Provider Relations Representatives

Name	Phone	Email	Region	Parishes	Provider Groups
Keiwana Hymel	504-264-8445	HymelK@aetna.com	1	Orleans, Jefferson	Tulane, LCMC
Elizabeth Thomas	225-348-2089	Thomase12@aetna.com	1	St. Bernard, Plaquemines	
Drakara Judson	225-433-3756	Judsond@aetna.com	2	East Baton Rouge, West Baton Rouge	FMOL
Sheri Smith	225-461-1769	Smiths80@aetna.com	2/3	Iberville, Ascension, East Feliciana, West Feliciana, Point Coupee, St. John, St. Charles, Lafourche, Assumption, St. James, St. Mary, Terrebonne	Healthlink
Kristen Hollier	337-458-6963	Hollierk@aetna.com	4/5	St. Landry, Evangeline, Acadia, Lafayette, St. Martin, Iberia, Vermillion, Jefferson Davis, Calcasieu, Cameron, Allen, Beauregard	
Elizabeth Thomas	225-348-2089	Thomase12@aetna.com	6	Avoyelles, Rapides, Vernon, Grant, Winn, LaSalle, Catahoula, Concordia	
Whitney Walker	318-540-4017	WalkerW@aetna.com	7	Sabine, Natchitoches, DeSoto, Red River, Caddo, Bossier, Webster, Claiborne, Bienville	
Tonya Nelson	318-314-4037	NelsonT1@aetna.com	8	Tensas, Franklin, Caldwell, Jackson, Lincoln, Union, Ouachita, Richland, Madison, East Carroll, West Carroll, Morehouse	
Elizabeth Oubre	985-645-1550	Oubree@aetna.com	9	St. Tammany, Tangipahoa, Washington, St. Helena, Livingston	
Kellie Hebert Claims Educator	985-348-5763	Hebertk@aetna.com			Ochsner Health System, Claims State Complaints
Tiffanie Lemonds Sr. Manager	225-348-3808	Lemondst@aetna.com			State Complaints
Courtney Lewis LD Director	225-326-4840	Lewisc8@aetna.com			State Complaints

## Provider Relations *(continued from previous page)*

### Behavioral Health Provider Relations Representatives

Name	Phone	Email	Region	Parishes
Jennifer Thurman	318-413-0725	Thurmanj@aetna.com	2, 4, 5	West Feliciana, East Feliciana, West Baton Rouge, East Baton Rouge, Pointe Coupee, Iberville, Ascension, St. Landry, Evangeline, Acadia, Lafayette, St. Martin, Iberia, Vermillion, Allen, Beauregard, Jefferson Davis, Calcasieu, Cameron
Brandy Wilson	504-264-4016	Wilsonb@aetna.com	1, 3, 9, 10	Orleans, St. Bernard, Plaquemines, Jefferson, St. Tammany, Tangipahoa, Washington, St. Helena, Livingston, St. John, St. Charles, St. James, Assumption, St. Mary, Terrebonne, Lafourche
Shalonda Schiele	318-758-0289	Schieles@aetna.com	6, 7, 8	Avoyelles, Rapides, Vernon, Grant, Winn, LaSalle, Catahoula, Concordia, Tensas, Franklin, Caldwell, Jackson, Lincoln, Union, Ouachita, Richland, Madison, East Carroll, West Carroll, Morehouse, Sabine, Natchitoches, DeSoto, Red River, Caddo, Bossier, Webster, Claiborne, Bienville

### Training and CEs Provider quality monitoring tool training

At the recommendation of Louisiana Department of Health, the six managed care organizations (MCOs), have developed an updated and standardized Provider Quality Monitoring Tool. This unified approach ensures that elements required from providers are universal among the MCOs. It is vital for providers to be informed of the updates and revisions made in the Provider Quality Monitoring Tool. To ensure this, all MCOs are offering training sessions based on specific provider types. During the training sessions, you will have the opportunity to ask questions about the updates and revisions. Although the training sessions are offered by different MCOs, the information provided is applicable to all MCOs. You do not have to be contracted with the hosting MCO to attend the training.

The following is a list of the dates and times the sessions are offered:

Date & Time (CST)	MCO	Provider Type	MCO Registration Link
April 4 10 AM-noon	ACLA	Inpatient tx providers	<a href="https://amerihealthcaritas.zoom.us/meeting/register/tJ0vc-GsrzgrHdTWmZ3xk135ak3pKp9Cef9P">https://amerihealthcaritas.zoom.us/meeting/register/tJ0vc-GsrzgrHdTWmZ3xk135ak3pKp9Cef9P</a>
April 11 8-10 AM	Humana	ASAM/OTP	<a href="https://humana.zoom.us/webinar/register/WN_1dvOvaBcTNKc4YnG7sBY7w">https://humana.zoom.us/webinar/register/WN_1dvOvaBcTNKc4YnG7sBY7w</a>
April 11 10:30 AM-12:30 PM	Humana	TGH/PRTF	<a href="https://humana.zoom.us/webinar/register/WN_l1rfPeDNRJepTZMe-5A7Jg">https://humana.zoom.us/webinar/register/WN_l1rfPeDNRJepTZMe-5A7Jg</a>
April 12 10 AM-noon	United HealthCare	Crisis providers	<a href="https://optum.webex.com/optum/k2/j.php?MTID=t3c20496d6cac1de18572668c71d1aea5">https://optum.webex.com/optum/k2/j.php?MTID=t3c20496d6cac1de18572668c71d1aea5</a>
April 12 9:30-11:30 AM	Aetna	Individual practitioners and outpatient tx providers	<a href="https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,gi21zaoCEEGBMVu0_ufxWA,Wnf8i82ieEOhoYL3Q1Hsdg,axpPELunZkuncJt6PdEGVg,wb2LFDSO3kq0MJ7yRPuvXA,nWpOzRMXUUmqytEzdfo2zg?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7">https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,gi21zaoCEEGBMVu0_ufxWA,Wnf8i82ieEOhoYL3Q1Hsdg,axpPELunZkuncJt6PdEGVg,wb2LFDSO3kq0MJ7yRPuvXA,nWpOzRMXUUmqytEzdfo2zg?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7</a>

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Provider quality monitoring tool training (continued from previous page)

Date & Time (CST)	MCO	Provider Type	MCO Registration Link
April 12 Noon-1:30 PM	Healthy Blue	PCS providers	<a href="https://attend.webex.com/webappng/sites/attend/webinar/webinarSeries/register/b5730df54fb74dce88a676fd6c836688">https://attend.webex.com/webappng/sites/attend/webinar/webinarSeries/register/b5730df54fb74dce88a676fd6c836688</a>
April 18 9 AM-noon	Louisiana Healthcare Connections	CPST/PSR	<a href="https://attendee.gototraining.com/r/7042936450523836417">https://attendee.gototraining.com/r/7042936450523836417</a>
May 2 10 AM-noon	United HealthCare	CPST/PSR	<a href="https://optum.webex.com/optum/k2/j.php?MTID=tc9bfed3694af5a020f7d0d731d29be81">https://optum.webex.com/optum/k2/j.php?MTID=tc9bfed3694af5a020f7d0d731d29be81</a>
May 9 8-10 AM	Humana	PCS providers	<a href="https://humana.zoom.us/webinar/register/WN_hhGtW9DTT_qLr5EyB4YZ6Q">https://humana.zoom.us/webinar/register/WN_hhGtW9DTT_qLr5EyB4YZ6Q</a>
May 10 11 AM-12:30 PM	Healthy Blue	Inpatient tx providers	<a href="https://attend.webex.com/webappng/sites/attend/webinar/webinarSeries/register/b5730df54fb74dce88a676fd6c836688">https://attend.webex.com/webappng/sites/attend/webinar/webinarSeries/register/b5730df54fb74dce88a676fd6c836688</a>
May 16 9 AM-noon	Louisiana Healthcare Connections	ASAM/OTP	<a href="https://attendee.gototraining.com/r/797898421244529921">https://attendee.gototraining.com/r/797898421244529921</a>
May 16 Noon-2 PM	Aetna	Crisis providers	<a href="https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,gi21zaoCEEGBMVu0_ufxWA,Wnf8i82ieEOhoYL3Q1Hsdg,4IEcxT4WDUWhAT_WVdCCKw,3XBSwNRJFk-s4zmxH8uf0A,lv6wKTZT-kaZW2J2l4fg4Q?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7">https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,gi21zaoCEEGBMVu0_ufxWA,Wnf8i82ieEOhoYL3Q1Hsdg,4IEcxT4WDUWhAT_WVdCCKw,3XBSwNRJFk-s4zmxH8uf0A,lv6wKTZT-kaZW2J2l4fg4Q?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7</a>
May 18 11 AM-1 PM	ACLA	Individual practitioners and outpatient tx providers	<a href="https://amerihealthcaritas.zoom.us/meeting/register/tJEu-d--tqzMsH91WfipibWXHI0p6_GDBVcl2">https://amerihealthcaritas.zoom.us/meeting/register/tJEu-d--tqzMsH91WfipibWXHI0p6_GDBVcl2</a>
May 23 9 AM-noon	Louisiana Healthcare Connections	TGH/PRTF	<a href="https://attendee.gototraining.com/r/7480951096704259329">https://attendee.gototraining.com/r/7480951096704259329</a>
June 1 10-11 AM	United HealthCare	TGH/PRTF	<a href="https://optum.webex.com/optum/k2/j.php?MTID=td09633530251d663a1cb3c38d6ba1e93">https://optum.webex.com/optum/k2/j.php?MTID=td09633530251d663a1cb3c38d6ba1e93</a>
June 6 10 AM-noon	ACLA	Crisis providers	<a href="https://amerihealthcaritas.zoom.us/meeting/register/tJYqce2qpzMpG9Hba7uGXWp88QLEsy6auNn-">https://amerihealthcaritas.zoom.us/meeting/register/tJYqce2qpzMpG9Hba7uGXWp88QLEsy6auNn-</a>
June 7 1-3 PM	United HealthCare	ASAM/OTP	<a href="https://optum.webex.com/optum/k2/j.php?MTID=t40c1077c0c8e1dc16a173987f9b4a0a4">https://optum.webex.com/optum/k2/j.php?MTID=t40c1077c0c8e1dc16a173987f9b4a0a4</a>
June 8 8-10 AM	Humana	Inpatient tx providers	<a href="https://humana.zoom.us/webinar/register/WN_TaSE9G6lQY-WC1-EPxlyug">https://humana.zoom.us/webinar/register/WN_TaSE9G6lQY-WC1-EPxlyug</a>
June 14 10 AM-noon	Aetna	ASAM/OTP	<a href="https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,gi21zaoCEEGBMVu0_ufxWA,Wnf8i82ieEOhoYL3Q1Hsdg,nY_9kBmHuEe58sczlSh-tA,T67aFDaCNUK5ACpMq1wBSw,-qnzDgY3E-OtnXEbquL9Q?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7">https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,gi21zaoCEEGBMVu0_ufxWA,Wnf8i82ieEOhoYL3Q1Hsdg,nY_9kBmHuEe58sczlSh-tA,T67aFDaCNUK5ACpMq1wBSw,-qnzDgY3E-OtnXEbquL9Q?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7</a>

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## Provider quality monitoring tool training *(continued from previous page)*

Date & Time (CST)	MCO	Provider Type	MCO Registration Link
June 20 1-3 PM	Aetna	CPST/PSR	<a href="https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,gi21zaoCEEGBMVu0_ufxWA,Wnf8i82ieEOhoYL3Q1Hsdg,fk9RExpcxEaeCKxbIEbKow,VHZAn39lqEqQuXDgq8yPAA,pEnevD0tM0Gc4lyL5Wfw7Q?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7">https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,gi21zaoCEEGBMVu0_ufxWA,Wnf8i82ieEOhoYL3Q1Hsdg,fk9RExpcxEaeCKxbIEbKow,VHZAn39lqEqQuXDgq8yPAA,pEnevD0tM0Gc4lyL5Wfw7Q?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7</a>
June 20 9 AM-noon	Louisiana Healthcare Connections	PCS providers	<a href="https://attendee.gototraining.com/r/3043286982628253185">https://attendee.gototraining.com/r/3043286982628253185</a>
June 21 10-11:30 AM	Healthy Blue	Individual practitioners and outpatient tx providers	<a href="https://attend.webex.com/webappng/sites/attend/webinar/webinarSeries/register/b5730df54fb74dce88a676fd6c836688">https://attend.webex.com/webappng/sites/attend/webinar/webinarSeries/register/b5730df54fb74dce88a676fd6c836688</a>

## Person-centered planning training

Person-centered planning is a collaborative process where people using behavioral health services participate in the development of service goals and in the selection of services provided. Person-centered planning is strengths-based and focuses on an individual's abilities, preferences, and goals. Individuals using services and their significant others are core participants in the development of the goals and plans for treatment. To further the utilization of this approach, all MCOs are offering training sessions. During the training sessions you will have the opportunity to ask questions about updates and revisions. Although the training sessions are offered by different MCOs, the information provided is applicable to all MCOs. You do not have to be contracted with the hosting MCO to attend the training.

The following is a list of the dates and times the sessions are offered:

Date & Time (CST)	MCO	MCO Registration Link
Date & Time (CST)	MCO	MCO Registration Link
April 4 10 AM-noon	United Healthcare	<a href="https://optum.webex.com/optum/k2/j.php?MTID=t58b9a23ff3b89bdfd69c2d755850b2d8">https://optum.webex.com/optum/k2/j.php?MTID=t58b9a23ff3b89bdfd69c2d755850b2d8</a>
May 18 9-11:30 AM	Louisiana Healthcare Connections	<a href="https://attendee.gototraining.com/rt/440166815590489857">https://attendee.gototraining.com/rt/440166815590489857</a>
June 6 8:30-10:30 AM	Humana	<a href="https://humana.zoom.us/webinar/register/WN_k9ZKUiSxSvEH6JOPkHtGOA">https://humana.zoom.us/webinar/register/WN_k9ZKUiSxSvEH6JOPkHtGOA</a>

## Applied behavioral analysis provider quality monitoring tool training

At the recommendation of Louisiana Department of Health, the six managed care organizations (MCOs) have developed a standardized Provider Quality Monitoring Tool for applied behavioral analysis services. This unified approach ensures that elements required from providers are universal among the MCOs. It is vital for providers to be informed of the updates and revisions made in the Provider Quality Monitoring Tool. To ensure this, all MCOs are offering training sessions. During the training sessions, you will have the opportunity to ask questions about the updates and revisions. Although the training sessions are offered by different MCOs, the information provided is applicable to all MCOs. You do not have to be contracted with the hosting MCO to attend the training.

The following is a list of the dates and times sessions are offered:

Date & Time	MCO	MCO Registration Link
April 25 Noon-2 PM	Healthy Blue	<a href="https://attend.webex.com/webappng/sites/attend/webinar/webinarSeries/register/83f531729a244208addec3d1e6bc5b0f">https://attend.webex.com/webappng/sites/attend/webinar/webinarSeries/register/83f531729a244208addec3d1e6bc5b0f</a>
May 2 10 AM-noon	ACLA	<a href="https://amerihealthcaritas.zoom.us/meeting/register/tJYuc-yqrz4oGtGV_mAvdyeac9zk-Bae4EFu">https://amerihealthcaritas.zoom.us/meeting/register/tJYuc-yqrz4oGtGV_mAvdyeac9zk-Bae4EFu</a>
June 7 Noon-2 PM	Aetna	<a href="https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,b5cs8pxX00mlon5IBB1wqA,-2lW1sqzEUWpt3R5QRS4Q,gzH8p836X0qbXkMtiCY5T w,wsxfftA_ZUKYOcOsQsWEQQ,9MZ8TG5-XEGt2Km5AMiotg?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7">https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,b5cs8pxX00mlon5IBB1wqA,-2lW1sqzEUWpt3R5QRS4Q,gzH8p836X0qbXkMtiCY5T w,wsxfftA_ZUKYOcOsQsWEQQ,9MZ8TG5-XEGt2Km5AMiotg?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7</a>

## Physical health medical records training

Title	Date & Time	Training Link
Medical Records Audit Training	April 10 Noon-2 PM	<a href="https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,b5cs8pxX00mlon5IBB1wqA,-2lW1sqzEUWpt3R5QRS4Q,AlXNQaL9yUea8NjLRMjF1w,CawHWKR0sEuDAwHCbXWasg,37Q_3CgPdOaBgAuNjti8UA?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7">https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,b5cs8pxX00mlon5IBB1wqA,-2lW1sqzEUWpt3R5QRS4Q,AlXNQaL9yUea8NjLRMjF1w,CawHWKR0sEuDAwHCbXWasg,37Q_3CgPdOaBgAuNjti8UA?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7</a>
Medical Records Audit Training	April 26 2-4 PM	<a href="https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,b5cs8pxX00mlon5IBB1wqA,-2lW1sqzEUWpt3R5QRS4Q,ScIaF_x74kyTjWHtTRl4wA,Mn11BMGIHkmUHuljsQzUMA,E6igludGRUGm1zxSAsk9vw?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7">https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,b5cs8pxX00mlon5IBB1wqA,-2lW1sqzEUWpt3R5QRS4Q,ScIaF_x74kyTjWHtTRl4wA,Mn11BMGIHkmUHuljsQzUMA,E6igludGRUGm1zxSAsk9vw?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7</a>
Medical Records Audit Training	May 10 2-4 PM	<a href="https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,b5cs8pxX00mlon5IBB1wqA,-2lW1sqzEUWpt3R5QRS4Q,tY_Mtzo7skC8hdQyO7wzyg,UqDBNqdtCEqKlJlrISAn-A,IYVTIfQRe0q1O4OmGuo1LQ?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7">https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,b5cs8pxX00mlon5IBB1wqA,-2lW1sqzEUWpt3R5QRS4Q,tY_Mtzo7skC8hdQyO7wzyg,UqDBNqdtCEqKlJlrISAn-A,IYVTIfQRe0q1O4OmGuo1LQ?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7</a>
Medical Records Audit Training	May 24 10 AM-noon	<a href="https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,b5cs8pxX00mlon5IBB1wqA,-2lW1sqzEUWpt3R5QRS4Q,LzD0C3fJfkq3lgNgsuAadw,K2tWE25GfUqP_6b-UUEHaw,2piefPI9BEC0xG5cI92zig?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7">https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,b5cs8pxX00mlon5IBB1wqA,-2lW1sqzEUWpt3R5QRS4Q,LzD0C3fJfkq3lgNgsuAadw,K2tWE25GfUqP_6b-UUEHaw,2piefPI9BEC0xG5cI92zig?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7</a>
Medical Records Audit Training	June 6 10 AM-noon	<a href="https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,b5cs8pxX00mlon5IBB1wqA,-2lW1sqzEUWpt3R5QRS4Q,Am4X7aKp7UCrjznZR-g-mQ,CYja6xOdxUO2olWTxJGXVA,SVArJe8cd0GcJVPddKA8vQ?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7">https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,b5cs8pxX00mlon5IBB1wqA,-2lW1sqzEUWpt3R5QRS4Q,Am4X7aKp7UCrjznZR-g-mQ,CYja6xOdxUO2olWTxJGXVA,SVArJe8cd0GcJVPddKA8vQ?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7</a>
Medical Records Audit Training	June 21 1-3 PM	<a href="https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,b5cs8pxX00mlon5IBB1wqA,-2lW1sqzEUWpt3R5QRS4Q,JLoMyGAoaUu9wC0yugOZ9g,BaCKvh5IYUKC_chBJ9ycwg,zLbGwRB0hE-LlpvGbrDwVg?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7">https://teams.microsoft.com/registration/uGG7-v46dU65NKR_eCuM1w,b5cs8pxX00mlon5IBB1wqA,-2lW1sqzEUWpt3R5QRS4Q,JLoMyGAoaUu9wC0yugOZ9g,BaCKvh5IYUKC_chBJ9ycwg,zLbGwRB0hE-LlpvGbrDwVg?mode=read&amp;tenantId=fabb61b8-3afe-4e75-b934-a47f782b8cd7</a>