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# Provider Newsletter

Summer 2021

## Dental Services for Our Members

### LIBERTY Dental Plan

Aetna Better Health of New Jersey uses LIBERTY Dental Plan to provide dental services to our members. LIBERTY Dental Plan is responsible for covering routine and specialty dental services, the administration of the dental network, and claim payment for dental services. You can reach LIBERTY Dental Plan at 1-855-225-1727, Monday – Friday from 8 a.m. to 8 p.m.

Network dentists can view the [LIBERTY Dental Plan provider web portal](#).

Members do not need a referral to see a network dental provider. You can view LIBERTY Dental Plan's [online provider search](#) to find a dentist.

### Additional Resources:

- The NJFC Directory of Dentists Treating Children under the Age of 6 ([PDF](#))
- NJ FamilyCare Dental Services Clinical Criteria ([PDF](#))
- Directory of Dentists Treating Members with Intellectual and Developmental Disabilities Adult ([PDF](#))
- Directory of Dentists Treating Members with Intellectual and Developmental Disabilities Child ([PDF](#))

**Compliance is mandatory. Failure to comply may result in a provider's contract with an MCO being terminated.**

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Managed Care network providers under contract with NJ FamilyCare Medicaid managed care organizations (MCOs) are required to enroll with the NJFC Medicaid fee-for-service (FFS) program in accordance with 21st Century Cures Act requirements. Network providers are those providers enrolled in any or all of the 5 NJFC Medicaid MCOs. MCO providers currently enrolled in the NJFC Medicaid FFS program need not take any action.

- Network providers are required to submit a completed 21st Century Cures Act application to DXC Technology.
- 7 out of 10 network providers have successfully enrolled in the FFS program.
- Providers under contract with multiple MCOs are only required to submit a single 21st Century Cures Act application to DXC Technology.
- **To download a 21st Century Cures Act application:**
  - Go to [www.njmmis.com](http://www.njmmis.com)
  - Select "Provider Enrollment Applications"
  - Then select "21st Century Cures Act Application" as the "Provider Type."
- NJFC MCO providers who are eligible to serve **FFS beneficiaries** and wish to do so must complete a full NJFC FFS enrollment application in order to be enrolled as a FFS Medicaid Provider.
  - This application can be found at [www.njmmis.com](http://www.njmmis.com) under "Provider Enrollment Application."
  - Please note there are some Provider Types that are not eligible to enroll in FFS Medicaid.
- Providers who choose to serve only **Medicaid MCO beneficiaries** are referred to as 21st Century Cures registered or ROPA (referring, ordering, prescribing or attending) providers in the NJFC FFS program.
  - 21st Century Cures registered providers are **not eligible** to receive NJFC FFS payments.
  - 21st Century Cures registered providers are not required to provide services to NJFC FFS beneficiaries.
  - 21st Century Cures providers shall not be listed in the NJFC FFS Provider Directory and will not be assigned a FFS Medicaid ID number.



**DXC Technology  
Provider Enrollment Unit  
609-588-6036**

How to submit the 21st Century Cures application and credentials:



**Mail**  
DXC Technology Provider Enrollment Unit  
P.O. Box 4804  
Trenton, NJ 08650



**Fax**  
609-584-1192

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### Every child enrolled in the NJ FamilyCare program (Medicaid), must be given a blood lead test at the following ages:

- Complete a blood lead test at 12 months of age (between 9-18 months)
- AND again at 24 months of age (between 18-26 months)
- Children between 26 and 72 months of age who have NOT previously had a blood lead test should be tested immediately.

Capillary (finger-stick) specimen, such as LabCorp’s MedTox filter paper and venous specimen testing are both acceptable. Venous specimen testing must be completed at a NJ licensed commercial lab.

Children with elevated blood lead levels (**5 µg/dl or greater**) should be reported to the health plan and referred to the plan’s **Lead Case Management Program**. Our Program emphasizes prevention, continuity of care, coordination of care, and links members to services as necessary across providers and settings.



### Lead Case Management Program is a free covered benefit for our members!

#### Refer members to the program by:

- Calling Provider Services at **1-855-232-3596**
- Sending the completed blood lead test(s) to the plans secure fax line at **1-959-282-1622**.

## Here's a HEDIS Lead Screening Tip!

Blood lead screenings should be completed **on or before child's second birthday!** Any blood lead test **after the age of 2** is considered **late** in HEDIS reporting.

**Lead Test CPT Code: 83655**

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## Verbal Risk Assessment

The Verbal Risk Assessment should be asked at every visit with children who are between six (6) months of age and seventy-two (72) months of age.

**The assessment should include, at minimum, the following types of questions:**

- Does your child live in or regularly visit a house built before 1978? Does the house have chipping or peeling paint?
- Was your child's day care center/preschool/ babysitter's home built before 1978? Does that day care center/preschool/babysitter's house have chipping or peeling paint?
- Does your child live in or regularly visit a house built before 1978 with recent, ongoing, or planned renovations or remodeling?
- Have any of your children or their playmates had lead poisoning?
- Does your child frequently come in contact with an adult who works with lead? Examples of professions that have lead exposures are construction, welding, pottery, or other trades practiced in your community.
- Do you give your child home or folk remedies that contain lead?

**\*Medicaid health plans are required to contact providers with lead screening rates of less than eighty (80) percent for two (2) or more consecutive six (6) month periods**

**Providers will be placed on Corrective Action if demonstrable improvement is not achieved and additional action may be implemented, which may include reassignment of at-risk children to another primary care provider.**

**A child's level of risk for exposure to lead depends upon the answers to the questions listed.**

**NO** If all answers are negative, risk is considered low for high exposure. All children at low risk need blood lead testing completed at 12 months of age and again at 24 months of age.

**YES** If any answer is yes or 'I don't know', risk is considered high. All children at high risk need a blood lead test immediately, even if younger than 6 months of age.

The questions must be asked at every subsequent visit since risk can change.



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## New Mandates on Maternity Services

### Doula services now covered for members

We are pleased to share updates on New Jersey's implementation of doula benefits. Attached is the Medicaid Newsletter on the program and also the next steps for providers interested in offering Doula Services. Once a doula is enrolled in NJ Medicaid and has their Medicaid FFS identification number, please email [Joseph Manger](#), Chief Operating Officer, so he can arrange for a contracting representative reach out to you to walk you through our simplified enrollment process.

- Volume 30 Number 23 Doula Services ([PDF](#))
- 2020-12-01 NJFC Doula Steps ([PDF](#))
- [NJ DHS Doula Care](#)

### Non-payment for early non-medically indicated early elective deliveries (EEDs)

Public Law 2019, Chapter 87 prohibits NJFC Medicaid reimbursement for professional and hospital, as well as clinic claims, for non-medically indicated early elective deliveries. Obstetricians and midwives are encouraged to share educational materials with their patients to ensure their understanding of the risks associated with early elective deliveries. Effective January 1, 2021, neither NJ Medicaid nor Aetna Better Health of New Jersey will reimburse providers for non-medically indicated early elective deliveries (EEDs). Please refer to the attached newsletter for details on the requirements.

- Newsletter 30-21 Non reimbursement for EED ([PDF](#))

### Perinatal Risk Assessment (PRA) Required for Reimbursement of Prenatal Care

Effective for claims with service dates on or after January 1, 2021, a provider shall not receive reimbursement for prenatal services provided to a pregnant NJFC Medicaid beneficiary until the First Visit PRA Plus form is submitted to FHI for that beneficiary. Please note that PRAs must be transmitted to FHI and FHI will record them and share them with Aetna Better Health of NJ so we can make sure claims will pay if a PRA is present.

- Newsletter 30-24 Perinatal Risk Assessment (PRA) Required for Reimbursement ([PDF](#))

**The most serious side effect associated with opioids is the risk of death stemming from depression of the central nervous system (CNS) and thus respiration.**

A growing body of research has documented that medications which depress the CNS may contribute to significantly increased risk of death when combined with opioids. In 2016, the FDA implemented black box warnings on labeling for opioids and benzodiazepines to warn patients and providers of the dangers of that specific combination.

While not issuing black box warnings on all drugs with CNS depressant effects, the FDA policy statement did reference studies which indicate that any CNS depressant, not only benzodiazepines, may be a contributing factor to opioid overdose and death.<sup>1</sup> Numerous antipsychotic medications have CNS depressant properties. One study in JAMA suggests that opioids were involved in 58% of overall deaths involving antipsychotics.<sup>2</sup> There are numerous CYP450 liver enzyme interactions involving antipsychotics and opioids. Changes in the opioid dose or formulation may impact the potency of the antipsychotic and vice versa. Patients receiving antipsychotic medication may also have a greater likelihood of struggling with issues related to addiction or abuse of opioids.<sup>3</sup> For these reasons, it is critically important that prescribers of either opioids or antipsychotics assess the patient for this combination and adjust therapy accordingly.

## What can be done?

CMS has already issued a requirement that states monitor the concurrent use of opioids and antipsychotics as required by the SUPPORT for Patients and Communities Act. It is hoped that this will increase the coordination of care between behavioral health and pain management providers.

Opioids involved in 58% of overdose deaths involving antipsychotics.

## You can play an important role increasing this coordination in the following ways:

- Regularly screen patients for the combination of opioids and antipsychotics.
- Educate the patient on the signs of sedation or respiratory depression and when they should seek medical attention.
- Screen patients for risk of substance-use disorders, including opioid abuse and misuse, and warn them of the risk for overdose and death associated with the use of additional CNS depressants, including alcohol and illicit or recreational drugs.
- Attempt to contact the other prescriber to establish lines of communication for patients receiving opioids and antipsychotics. Notify each other of dose adjustments or changes for either medication.
- Avoid abrupt discontinuation of opioids to reduce withdrawal symptoms. If dose modification or discontinuation is warranted, try to taper off slowly. The CDC Guideline for Prescribing Opioids for Chronic Pain suggests a dose reduction of 10% every week as a reasonable starting point.<sup>4</sup>

### References

1. Center for Drug Evaluation and Research. "Drug Safety and Availability - FDA Drug Safety Communication: FDA Warns about Serious Risks and Death When Combining Opioid Pain or Cough Medicines with Benzodiazepines; Requires Its Strongest Warning." U S Food and Drug Administration Home Page, Center for Drug Evaluation and Research, <https://www.fda.gov/downloads/Drugs/DrugSafety/UCM518672.pdf>
2. Christopher M. Jones, PharmD, Karin A. Mack, PhD, and Leonard J. Paulozzi, MD, "Pharmaceutical Overdose Deaths, United States, 2010," Journal of the American Medical Association, February 20, 2013, Vol 309, No. 7, p. 658.
3. Jan Klimas PhD MSc, Laura Gorfinkel, Nadia Faribarn MD et al. JAMA Netw Open. 2019 May; 2(5): e193365. Published online 2019 May 3. doi: 10.1001/jamanetworkopen.2019.3365
4. Dowell D, Haegerich TM, Chou R. CDC Guideline for Prescribing Opioids for Chronic Pain — United States, 2016. MMWR Recomm Rep 2016;65(No. RR-1):1–49. DOI: <http://dx.doi.org/10.15585/mmwr.rr6501e1>

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## Upcoming Provider Trainings



### You're Invited!

As a participating provider with Aetna Better Health of New Jersey, we would like to invite you and your office staff to join us for a very important training session about our programs and services. These webinars will provide valuable information on the following: Authorization, claim processing, cultural competency, credentialing, nursing and assisted living and other important topics.

Please visit our [website](#) to choose a date and time that works best for your practice. Scroll to the bottom of the page for topics and meeting time options. Click on the link to register.

Aetna Better Health of New Jersey values our partnership with your practice to serve the people in the state of New Jersey by providing quality health care and accessible, medically-necessary services. Our providers are one of the most critical components of our service delivery approach and we are grateful for your participation. We look forward to speaking with you.



### EVV Billing Training

#### **EVV Billing Training for Aetna Better Health and Aetna Assure Premier Plus (HMO D-SNP) PCA providers and EVV technical contacts**

Aetna Better Health of New Jersey and Aetna Assure Premier Plus (HMO D-SNP) have provided PCA Agency training-billing through HHAX and Readiness for the July 1, 2021 compliance date.

You can view the training slides and pre-recorded training below:

- Training slides ([PDF](#))
- [Pre-recorded training](#)

## Member Rights and Responsibilities

Aetna Better Health of New Jersey members have certain rights and responsibilities. Managed Long Term Services & Support members (MLTSS) have additional rights and responsibilities. It is important that your patients, our members, read and understand each one.

- [Member Rights & Responsibilities](#)

If your patients have any questions, please direct them to call Member Services at **1-855-232-3596 (TTY: 711)**.

## Provider Directories



Each month we update our regional and by-county provider directories. Provider directories can be found on our website. Visit our [Find a Provider](#) webpage to download the provider directories.

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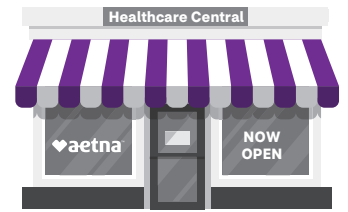
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If you have a patient in need of insurance in the Newark area, direct them to Healthcare Central for help finding coverage.

- Sign up for NJ FamilyCare
- Get assistance with finding a provider
- Understand the renewal process for NJ FamilyCare
- Understand your Aetna Better Health® benefits



Monday–Friday, 10 AM–6 PM  
**959-299-3102** (TTY: 711)

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## Notice

### Notice to Personal Care Assistants, Assisted Living Facilities, Comprehensive Personal Care Homes, and Assisted Living Programs

The New Jersey Fiscal Year 2022 budget has increased several rates that that Aetna Better Health of New Jersey other Medicaid Managed Care Organizations must pay for the following services:

<b>Service</b>	<b>State mandated reimbursement rate</b>
Medical Day Care (Adult Day Health Services) .....	\$86.10 per diem
Personal Care Assistant (PCA) Services.....	\$22.00/ per hour
Assisted Living Facilities.....	\$87.00 per day
Comprehensive Personal Care Homes .....	\$77 per day
Assisted Living Programs .....	\$67 per day

Aetna Better Health of New Jersey will update our payment system to include the new rate effective July 1, 2021. To account for the new rate, Aetna Better Health of New Jersey will retroactively adjust any impacted claim payments for dates of service on or after July 1, 2021. You will not need to resubmit claims, as Aetna Better Health of New Jersey will reprocess based on claims already submitted.

If you have any questions regarding Aetna Better Health of New Jersey implementation of this rate change, please contact Liarra Sanchez, Network Relations Consultant at [SanchezL7@Aetna.com](mailto:SanchezL7@Aetna.com).