



AETNA BETTER HEALTH® OF ILLINOIS

Provider Newsletter August 2016, Vol. 5

www.aetnabetterhealth.com/illinois

With questions or concerns, please contact Provider Services at 866-212-2851 "Option 2"



Diabetes Testing Supplies- Must be filled through Pharmacy Only

As of October 1, 2016, all Medicaid members using blood glucose meters and test strips will be required to obtain these products from a network pharmacy. Members will no longer be able to obtain these products from a durable medical equipment vendor.

Aetna Better Health of Illinois has a One Touch exclusive formulary. If your patient is NOT using a One Touch meter, they must meet the following pharmacy prior authorization criteria:

- A documented trial of one month of the preferred test strip, One Touch. There will also be exceptions if the member has documented one of the following physical or mental health disabilities requiring a special monitor:
- Visual impairment- member is legally blind (best corrected visual acuity <20/200) OR
- Requirement for alternative site testing (monitor taking sample from a non-finger tip location – for example, arm) OR
- Other physician or mental disability requiring a special monitor; physician will need to contact the PA Unit

If you need to request an exception for your patient through a Prior Authorization form, please submit a request via phone at 1-866-212-2851 or fax to the pharmacy Prior Authorization department at 1-855-684-5250 for Integrated Care Plan or 1-844-242-0908 for Family Health Plan. Please include supporting clinical documentation with the request.

FluMist

The CDC's Advisory Committee on Immunization Practices (ACIP) made an interim recommendation that the live attenuated influenza vaccine (LAIV), also known as FluMist nasal spray, should not be used for the upcoming 2016-2017 flu season. This decision was based on vaccine effectiveness (VE) data from the 2015-2016 season that found LAIV provided no significant protection against the flu virus among children 2-17 years of age. Findings from the two previous flu seasons (2013-2014 and 2014-2015) also showed less than expected VE for LAIV. The reason for this poor performance is unknown, but theory suggests that the intranasal vaccine may not work as well after repeated exposures. ACIP continues to recommend annual flu vaccines for everyone ages 6 months and older, using either the inactivated influenza vaccine (IIV) or recombinant influenza vaccine (RIV). The recommendation to avoid FluMist will impact the pediatric population the most, since one-third of all flu vaccines given to children in recent years have been intranasal. The ACIP recommendation must be reviewed by CDC's director, and final recommendations on influenza vaccination will be published in a CDC Morbidity and Mortality Weekly Report (MMWR) in late summer or fall. For more information, please see CDC's press release at <http://www.cdc.gov/media/releases/2016/s0622-laiv-flu.html>.

Based on 2016-2017 CDC recommendations, Aetna Better Health of Illinois has removed Flu Mist from the list of vaccines we cover through CVS Broad Vaccine Network and through our medical benefit.

Latest Provider Handbook

We update the provider handbook every year – the latest version is available online at <https://www.aetnabetterhealth.com/Illinois/>.

New Hepatitis C Pharmacy Prior Authorization Criteria

Aetna Better Health of Illinois Medicaid will be using new pharmacy prior authorization criteria for Hepatitis C starting September 1, 2016. The new criteria will allow approval for F3 and F4 Metavir scores and require abstinence from alcohol and illicit drug use for at least 6 months. The criteria will also steer utilization toward our nonformulary preferred product, Zepatier, based on FDA approved indications. New coverage rules also include coverage for members with Hepatitis C who exhibit extra-hepatic manifestations.

HPV Facts

Primary Care Providers are the key to cancer prevention

Know the facts:

Get informed:

- o On the burden of HPV cancers
- o On the importance of HPV vaccination
- o On how to help parents overcome hesitance about HPV vaccination

Commit to the cause:

- o Find ways to help improve HPV vaccination rates by promoting vaccination in your offices
- o Get CDC resources to help raise awareness among parents about the importance of HPV vaccine for preventing cancer

Lead the conversation

- o Learn how to successfully communicate about HPV with the parents of your pre-teen patients
- o Learn how to become an HPV vaccination champion with your colleagues in your community

ZIKA- The Facts

Below is the link to access the Chicago Department of Public Health's new website to support ZIKA awareness and education for both residents and healthcare providers.

http://www.cityofchicago.org/city/en/depts/cdph/supp_info/infectious/get-the-facts--zika.html

Doctors and other healthcare providers are encouraged to download the provider FAQ or visit the CDC's website for providers for the most up to date information. Providers can sign up to receive health alerts at which time they will get any pertinent updates about Zika. Also available for download: #StopZika posters (English and Spanish) for offices and clinics.

Transportation Update

Aetna Better Health Members are eligible for transportation reimbursement.

Aetna Better Health will offer mileage reimbursement for members or a family member who provide their own transportation to Doctor's appointment. We will pay \$.30 per mile to and from your Doctor. A doctor's signature is required to be sent to MTM (our transportation vendor) for payment. If you have any questions, please call 1-888-513-1612 to speak to a transportation specialist.

MLTSS Managed Long Term Supports and Services- our newest membership!

Aetna Better Health welcomes Managed Long Term Support and Services (MLTSS) members to our health plan. The MLTSS program is for adults and older adults with disabilities, ages 21 and over, who are eligible for Medicaid and Medicare. As of June, 2016, individuals who had previously opted out of the Medicare Medicaid Alignment Initiative (MMAI) received notification that they must select a health plan to coordinate their Long Term Service and Supports (LTSS). This means that those who elected not to select a health plan for MMAI must now select one to manage their LTSS benefits. Members will receive their Medicaid waiver services through Aetna Better Health, along with a few extra benefits. Our members must live in one of these counties: Cook, DuPage, Kane, Kankakee and Will. Below are some facts about the MLTSS program. If you have additional questions, please contact your Network Account Manager by calling 1--855-849-3201 and follow the prompts.

MLTSS provides value-added benefits are no cost to members and include:

- o Cell Phone
- o Health Education
- o Expanded Meal Benefit
- o Nursing Hot Line
- o Over the counter drugs
- o Respite Care
- o Smoking Cessation
- o Transportation
- o Weight Management

MLTSS is mandatory. Individuals must select a health plan to manage their LTSS benefits (Behavioral Health, Waiver Services, Nursing Facility care, Transportation)

Members can opt out of MLTSS at ANY time and select to be enrolled in the Medicare Medicaid Alignment Initiative



Provider Reminders: Non Discrimination

As an Aetna Better Health of Illinois provider, we are confident you strive to treat all of your patients equally, without regard to differentiating factors.

We would like to take this opportunity to remind you of your responsibility to provide covered services to all Members regardless of race, ethnicity, gender, creed, ancestry, lawful occupation, age, religion, marital status, sexual orientation, mental or physical disability, color, national origin, place of residence, claims experience, evidence of insurability (including conditions arising out of acts of domestic violence), genetic information, health status, source of payment for services, cost or extent of Provider Services required, or any other grounds prohibited by law or your Agreement. Providers are also expected to render covered services to Members in the same location, in the same manner, in accordance with the same standards and within the same time availability regardless of payer (Providers should offer Medicaid Members hours of operation no less than hours offered to Commercial Members or Members of other Medicaid plans).

Should you have any questions concerning this, please do not hesitate to contact your Network Account Manager at 1-866-212-2851, #2.

What is the Provider Engagement Initiative?

The Provider Engagement Initiative was established to build upon our team relationship and to become more engaged with Providers while also improving quality of care to members, quality measures and CAHPS.

Who is the team?

Our Aetna Better Health of Illinois plan has a cross- function team that meets with Providers face to face. The team consists of representation from our Medical Directors, Quality Management, Care Management, Utilization Management, Pharmacy, and Provider Services.

Who are the Providers?

Currently, our Providers consist of the top 10 nursing facilities according to number of residing members, highly utilized PCMH groups, and highly utilized hospitals in Chicago area and hospitals in remote areas of Illinois.

What is discussed?

The team has an internal agenda with topics directly related to their department. Just to name a few....Quality Management addresses reports and best practices, Utilization Management provides information on discharge planning and prior authorization process, Pharmacy addresses the formulary, Care Management touches on the Integrated Care Model and transition of care, Provider Services gives information on any new initiatives on the horizon for our Providers as well as information on upcoming webinars and highlights of newsletter, and the Medical Directors discuss clinical process, medication reconciliation and peer to peer.

What happens after the visit?

There are always items to follow up on after the visit. Each department addresses those concerns and reaches back out to the Provider with an update. The team has been out to visit all 10 nursing facilities, 10 hospitals, and 7 PCMHs thus far. Those Providers have expressed an appreciation for the information sharing and showed a great interest in building upon our team relationship.