

Provider Newsletter

Spring 2024

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Vaccines for Children (VFC)

Aetna Better Health® of Michigan is working to ensure all children receive immunizations timely and consistently to help them get a healthy start in their health care journey. To support you in this effort, Aetna now offers an incentive for providers successfully enrolled in the Vaccines for Children (VFC) Program as part of our 2024 Pay-for-Quality Program. Pediatric providers that successfully enroll in VFC and remain enrolled through the end of 2024 will be incentivized per member per month on their pediatric population.

For more information on the 2024 VFC Incentive or Pay-for-Quality Program, visit our website www.AetnaBetterHealth.com/Michigan/providers/news. The Michigan's Vaccines for Children (VFC) Provider Manual detailing enrollment, resources and storage and handling can be found at www.michigan.gov/vfc.





Hep C testing

Hepatitis C, a liver infection caused by the hepatitis C virus (HCV), is transmitted through the blood or body fluids that contain infected blood. More than half of individuals who become infected with HCV will develop chronic infection; however, most people infected won't show any symptoms. Aetna in alignment with the CDC testing guidelines recommends Hepatitis C testing be a part of your routine care procedure including:

✓ **Universal hepatitis C screening:**

- Hepatitis C screening at least once in a lifetime for all adults aged 18 years and older, except in settings where the prevalence of HCV infection (HCV RNA-positive/detected) is less than 0.1%*
- Hepatitis C testing for all pregnant people during each pregnancy, except in settings where the prevalence of HCV infection (HCV RNA-positive/detected) is less than 0.1%*

✓ **One-time hepatitis C testing regardless of age or setting prevalence among people with recognized conditions or exposures:**

- People with HIV
- People who ever injected drugs and shared needles, syringes, or other drug preparation equipment, including those who injected once or a few times many years ago
- People with selected medical conditions, including:
 - people who ever received maintenance hemodialysis
 - people with persistently abnormal ALT levels
- Prior recipients of transfusions or organ transplants, including:
 - people who received clotting factor concentrates produced before 1987
 - people who received a transfusion of blood or blood components before July 1992
 - people who received an organ transplant before July 1992
 - people who were notified that they received blood from a donor who later tested positive for HCV infection

- Health care, emergency medical, and public safety personnel after needle sticks, sharps, or mucosal exposures to HCV-positive blood [PDF – 177 KB]
- Children born to mothers with HCV infection

✓ **Routine periodic testing for people with ongoing risk factors, while risk factors persist:**

- People who currently inject drugs and share needles, syringes, or other drug preparation equipment
- People with selected medical conditions, including:
 - people who ever received maintenance hemodialysis

✓ **Any person who requests hepatitis C testing** should receive it, regardless of disclosure of risk, because many persons may be reluctant to disclose stigmatizing risks.

Additional Hepatitis C resources can be found on MDHHS website at Michigan.gov/WeTreatHepC

Aetna encourages our Provider Partners to enroll any patient being treated for Hepatitis C with Mavyret® in MDHHS' Mavyret Nurse Ambassador Program which helps patients understand their diagnosis, treatment goals and the importance of lab tests after treatment. Mavyret® is the only DAA available without Prior Authorization (PA). PA criteria is still effective and PA forms are still required for other DAAs. PA requests for other DAAs will also require a patient-specific, clinically significant reason why the member cannot use Mavyret®.

Provider Audits ♥

Aetna Better Health of Michigan has several provider data projects underway with our state partners. As we work to enhance the member experience by ensuring our provider information is up to date and accurate, you may receive calls from our Provider Relations team. We will do our best to be cognizant of your time and competing priorities as you continue to offer the best care to our members. We thank you in advance for your help, support and continued partnership!





Doulas are a covered Medicaid benefit

If you support a pregnant member, please be sure to share information on doula services. We cover different types of doula services, including community-based doulas, prenatal doulas, labor and birth doulas, and postpartum doulas. For a full list of covered services please see MDHHS Policy Bulletin: MMP 22-47. A doula is a trained birth professional who helps families have safe, healthy and positive birth experiences. Doulas provide non-clinical emotional, physical, and informational support to pregnant people and their families before, during, and after birth. Doula services have been shown to positively impact the social determinants of health, support birth equity, and decrease existing health and racial disparities. With your support, we can work to reduce infant and maternal mortality and birth inequities. You can also refer members to Mae, a digital health platform that can assist in matching members with a doula specializing in culturally specific pregnancy care. For more information on Doulas, just go to www.AetnaBetterHealth.com/Michigan/find-provider and scroll to middle of the page and look for “Doula.”

Active and Fit benefit

Spring is here! It's a great time to set new health goals and create plans to achieve them. If you are caring for one of our members, please remind them of their access to the Active&Fit Enterprise™ program. With the Active&Fit Enterprise program, members can enjoy:

- Membership at a participating fitness center
- Workout plans to help start an exercise routine
- A variety of on-demand workout videos on the website
- The Active&Fit Connected!™ tool for tracking activity

Members can either go to www.ActiveandFit.com or call **1-866-316-3784** to learn more.

The Active&Fit Enterprise program is provided by American Specialty Health Fitness, Inc. (ASH Fitness), a subsidiary of American Specialty Health Incorporated (ASH). Active&Fit Enterprise and Active&Fit Connected! are trademarks of ASH and used with permission herein. Fitness center participation may vary by location and is subject to change.



Non-emergency Medical Transportation is available

We recognize that transportation can be a barrier for our members getting consistent, quality care. Aetna Better Health of Michigan members have access to transportation benefits through Access2Care if they need help getting to and from appointments. If you have members in your care that are struggling, please remind them of this benefit and have them call our member services line at **1-866-316-3784** to get connected directly with Access2Care.



Dental Coverage

Dental benefits for adult Medicaid beneficiaries were expanded and redesigned in the spring of 2023. Providers may be eligible for incentives for members that we see diagnostic and preventive dental services as part of our 2024 Pay-For-Quality Program. We are asking all providers to remind our members to ensure they know about the benefit and the importance of oral health and how it directly impacts overall wellbeing. The following services are covered:



X-rays



Deep teeth cleanings



Teeth cleanings



Sealants



Fillings



Root canals



Extractions



Crowns



Dentures



Care to keep your gums healthy

Members can call our member services line at **1-866-316-3784** to be connected with a dental provider.

Kidney Health

As part of our Chronic Kidney Disease Prevention Strategy, Aetna Better Health of Michigan encourages the use of laboratory tests to screen patients with diabetes or hypertension for Chronic Kidney Disease (CKD), and to consider the same screening for other conditions with increased risk of CKD. CKD affects 15% of the United States (U.S.) population, including more than one million adults in Michigan age 20 and older, yet fewer than 1 in 10 are aware of their diagnosis. Health disparities for CKD are prominent. With your help, we hope to reduce the gap. As part of your standard care, when you have a patient living with diabetes or hypertension, complete an eGFR (estimated glomerular filtration rate) to test for how well the kidneys are filtering and functioning and the uACR (urine microalbumin creatinine ratio) to screen for possible kidney damage.

Description	Codes
Estimated Glomerular Filtration Rate (eGFR)	CPT: 80047, 80048, 80050, 80053, 80069, 82565
Urine Creatinine Lab	CPT: 82570
Quantitative Urine Albumin	CPT: 82043
Urine Albumin Creatinine Ratio Lab Test	LOINC: 13705-9, 9318-7, 76401-9, 32294-1, 44292-1, 14958-3, 14959-1, 59159-4, 30000-4, 77253-3, 89998-9, 77254-1

Pharmacy

The Michigan Department of Health and Human Services (MDHHS) implemented a Single Pharmacy Drug List (PDL) back in 2020 and it affects all Michigan Medicaid Health Plans including Aetna Better Health. The PDL contains a listing of drugs that are covered by Michigan Medicaid as preferred and non-preferred. The link to the complete PDL can be found on our website at www.AetnaBetterHealth.com/Michigan/providers/medicaid/pharmacy. The link provides access to the pharmacy management procedures.

Not all covered drugs are listed on the PDL, MDHSS still covers drugs through the Michigan Medicaid Common Formulary. A link to the common formulary may also be found on our website.

Please review the formulary for any restrictions or recommendations regarding prescription drugs before prescribing a medication to an Aetna Better Health of Michigan patient such as quantity limits and step therapy protocols. Drugs not listed on the PDL/CF will require a prior authorization for an exception and should include an explanation of why a non-formulary drug is needed and include relevant medical records. MDHSS has a list of PDL/CF criteria which can be found on our website.

An overhead photograph showing two individuals seated at a light-colored table. On the left, a man in a dark blue button-down shirt is looking down. On the right, a woman with dark curly hair, wearing a black top and a maroon skirt, is also looking down. A black laptop is open on the table between them, and a white disposable coffee cup is to the left of the laptop. The background is a grey carpeted floor.

Health Equity Training is available for providers

CVSH has worked with a vendor, **CME Outfitters**, to create an educational hub that provides resources and educational activities to illuminate health equity challenges and empower health care practitioners with the knowledge and tools they need to advance equitable care in their patient interactions. The current course library is approved for continuing education (CE). CE is valid for physicians (MD/DO), advance practice practitioners (Nurse Practitioners and Physician Assistants), Nurses (RN and LPN/LVN), Clinical Supports (Medical Assistants and Nursing Assistants), as well as behavioral health practitioners. To access the courses, simply register at the course link below.

These courses can be leveraged by both CVSH clinical colleagues and our provider networks.

Health Equity Clinician Learning Hub:

<https://www.cmeoutfitters.com/cvs-health-dei-education-hub/>

Understand enrollees' rights and responsibilities

It is important for providers and staff to understand Aetna Better Health Members' rights and responsibilities. Aetna Better Health of Michigan members have a right to:

- Receive information about Aetna, our services, our practitioners and providers, and member rights and responsibilities
- Be treated with respect and recognition of their dignity and right to privacy
- Participate with practitioners in making decisions about their health care
- Have a candid discussion of appropriate or medically necessary treatment options based on their conditions, regardless of cost or benefit coverage
- Voice complaints or appeals about Aetna or the care we provide
- Make recommendations regarding Aetna's member rights and responsibilities policy

Our members have a responsibility to:

- Supply information (to the extent possible) that Aetna and our practitioners and providers need in order to provide care
- Follow plans and instructions for care plans agreed upon with their practitioners
- Understand their health problems and participate in developing mutually agreed-upon treatment goals, to the degree possible

Member rights and responsibilities are available in your Provider Manual and in the Member Handbook. You can access the information on our website at www.AetnaBetterHealth.com/Michigan. If you or an enrollee have any questions or would like a copy of the rights and responsibilities, call Member Services toll-free at **1-866-316-3784 (TTY: 711)**, 24 hours a day, 7 days a week.

Quality Assurance Performance Improvement

Our QM staff develops and implements an annual work plan, which specifies projected QM activities, timelines for completion and adherence to required NCQA standards. Based on the work plan, we conduct a yearly QM Program evaluation, which assesses the impact and effectiveness of QM activities. Recommendations for Performance Improvement Plans are also part of the annual QM Program evaluation.

Per NCQA Quality Standards and MDHHS contractual guidance, per Section XI, Quality Improvement Program Development and Annual Effectiveness Review, information on the effectiveness of the QAPI program must be provided annually to Network Providers. The QAPI documents are accessible via the Quality Assurance section of the Aetna Better Health of Michigan Website at:

[Quality Assurance | Aetna Better Health of Michigan](#). Links to the Quality Improvement Program Documents will also be included in the Provider Newsletters annually.

You may request a complete copy of our Quality Improvement Program by contacting the Quality Department at **1-855-737-0770 (TTY 711)**, Monday - Friday from 8 AM - 5 PM.