



## **COVID-19 Communications Update: Changes in Prior Authorization/Precertification and Admissions Protocols**

**Please check back daily for any new updates to this important information**

Original notification: May 5, 2020

Last update: May 29, 2020

As states recommence elective services, Aetna is resuming standard prior authorization protocols for Post-Acute and Long-Term Care Hospital Admissions effective May 31, 2020, except in certain states with executive orders or DOI mandates in place.

As previously announced on May 5, 2020, Aetna resumed standard prior authorization protocols for Acute Care admissions effective May 7, 2020, except in certain states with executive orders or DOI mandates in place.

Below are Aetna's updated prior authorization/precertification and admission protocols for Post-Acute Care and Long-Term Care Hospital Admissions (effective May 31, 2020) as well as Acute Care (effective May 7, 2020).

### **Post-Acute Care and Long-Term Care Hospital Admissions**

#### **Standard Authorization Process**

Aetna reminds providers that:

- All Post-Acute admissions require prior authorization approval prior to admission.

*Regulations regarding post-acute care precertification and admissions protocols for Aetna Medicaid members vary by state and, in some cases, may change in light of the current situation. Providers are encouraged to call their provider services representative for additional information.*

- We will continue to waive the three-day prior hospitalization requirement for skilled nursing facility stays as part of our normal course of business.
- Our current policy for Home Health does not require precertification/prior authorization. Aetna plans to continue that process for contracted providers. Refer to Aetna DocFind for our contracted Home Agencies.

**In select states and territories (AK, MA, NY, PR and RI) where there are executive orders or DOI mandates in effect, the following processes remain in place:**

#### **Post-Acute Care**

- Initial precertification/prior authorization for admission to Post-Acute care facilities (including skilled nursing and extended acute rehabilitation) are **waived** for all Commercial and Medicare Advantage (MA) Part C plans.
- The Post-Acute care facilities will be required to **notify** Aetna of the admission within 48 hours. Providers may submit their request electronically through our provider portal on Availity or your preferred EDI vendor using the existing Precertification Request transaction. Providers can also submit their request by calling Aetna directly (refer to the back of the member's ID cards for the correct telephone number).\*
- The Post-Acute care facility would also be required to send medical records for concurrent review within three days of the initial admit. Medical records can be uploaded directly through our provider portal on Availity or sent to Aetna by fax to 1-833-596-0339. Please include the patient's name and Member ID# on the cover sheet.
- Aetna requires:
  - Hospital history and last two to three days progress notes
  - Any information that demonstrates a need for Post-Acute care

*Regulations regarding post-acute care precertification and admissions protocols for Aetna Medicaid members vary by state and, in some cases, may change in light of the current situation. Providers are encouraged to call their provider services representative for additional information.*

- Anticipated Discharge Plan with estimated length of stay
- In addition, Aetna will continue to waive the three-day prior hospitalization requirement for skilled nursing facility stays as part of our normal course of business.
- Our current policy for Home Health does not require precertification. Aetna plans to continue that process for contracted providers. Refer to Aetna DocFind for our contracted Home Agencies.

### **Long-Term Acute Care Hospital Admissions**

- Precertification/Prior authorization for admission to a Long-Term Acute Care Hospital are **waived** for all Commercial and Medicare Advantage (MA) Part C plans.
- The Long-Term Acute Care Hospital will be required to **notify** Aetna of the admission within 48 hours electronically through our provider portal on Availity or your preferred EDI vendor using the existing Precertification Request transaction. Providers can also submit their request by calling Aetna directly (refer to the back of the members' ID cards for the correct telephone number).\*
- Aetna will review claims and clinical information as needed at the time of claims submission unless prohibited by regulation.

### **Timelines for related executive orders:**

Dates for the waivers are as follows:

- AK original effective date March 25, 2020 through June 1, 2020
- MA effective date March 30, 2020
- NY effective date March 25, 2020 through June 18, 2020
- Puerto Rico effective date April 7, 2020
- RI effective date April 29, 2020 through June 26, 2020

*Regulations regarding post-acute care precertification and admissions protocols for Aetna Medicaid members vary by state and, in some cases, may change in light of the current situation. Providers are encouraged to call their provider services representative for additional information.*

## **Acute Care Hospital Admissions**

### **Standard Authorization Process**

Aetna reminds providers that:

- Acute hospitals are required to notify us within 24 hours of the admission and submit clinical information for medical necessity determinations.
- We will continue to waive the three-day prior hospitalization requirement for skilled nursing facility stays as part of our normal course of business.
- Our current policy for Home Health does not require precertification. Aetna plans to continue that process for contracted providers. Refer to Aetna DocFind for our contracted Home Agencies.

**In selected states and territories (AK, AR, DE, MA, NV, NY, PR and RI) where there are executive orders or DOI mandates in effect, the following processes remain in place:**

- Precertification/Prior authorization for admission to an Acute Care facility is waived in the states and territories noted above for all Commercial and Medicare Advantage (MA) Part C plans.
- The Acute Care facilities are encouraged to **notify** Aetna of the admission within 48 hours electronically through our provider portal on Availity or your preferred EDI vendor using the existing Precertification Request transaction. Providers can also submit their request by calling Aetna directly (refer to the back of the members' ID cards for the correct telephone number).\*
  - Aetna will allow facilities that wish to submit clinical information at time of admission to continue with our current clinical reviews process. For all others, Aetna will review claims and clinical information as needed at the time of claims submission unless prohibited by regulation.

*Regulations regarding post-acute care precertification and admissions protocols for Aetna Medicaid members vary by state and, in some cases, may change in light of the current situation. Providers are encouraged to call their provider services representative for additional information.*

### **Timelines for related executive orders:**

Dates for the waivers are as follows:

- AK original effective date March 25, 2020 through June 1, 2020
- AR effective date April 8, 2020
- DE effective date April 14, 2020 through May 31, 2020
- MA effective date April 30, 2020
- NV effective date March 30, 2020
- NY effective date March 25, 2020 through June 18, 2020
- Puerto Rico effective date April 7, 2020
- RI effective date April 29, 2020 through June 26, 2020

\* When submitting requests electronically, providers will receive a response stating their request has pended in Aetna's systems with the following message: "Aetna needs more information about the services provided and the patient's clinical status. The facility or department should provide complete information as soon as possible, but no later than 48 hours from the submission. Aetna will decide based on the available clinical information." Although the message can't be turned off, Aetna will change the status in our systems manually. When inquiring on the event, providers will continue to see the request is pended until the request's status has been changed in our systems. See below for medical records we are requesting.

*Regulations regarding post-acute care precertification and admissions protocols for Aetna Medicaid members vary by state and, in some cases, may change in light of the current situation. Providers are encouraged to call their provider services representative for additional information.*