Aetna Better Health® of Illinois

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Aetna Better Health® of Illinois

Utilization Management changes to align with new legislation

<u>Illinois SB 3268 (Public Act 103-0593)</u> amends various statutory provisions and establishes new requirements, including authorization requirements (any utilization review, including but not limited to prior authorization, concurrent review and retrospective review). This will require changes to utilization management programs, including inpatient notification requirements, concurrent review, standardization and transparency.

This provision is effective July 1, 2025, and applies to services provided to Aetna Better Health® of Illinois members.

Aetna Better Health® of Illinois has made several process changes to ensure compliance with the required changes.

Notification requirements

Beginning July 1, 2025, admitting hospitals should notify our health plan of emergent hospital inpatient admissions within 48 hours of the date and time of the inpatient admission order.

- If notification requirements are met, utilization review (including concurrent and post-service review) will not be initiated before the end of the 72-hour inpatient stabilization period.
- If notification requirements are not met, utilization review (including concurrent and post-service review) will be initiated at the end of the 48-hour notification period.

How to notify us

Continue to submit notification of inpatient admissions for members using your current method. You can use the <u>Provider Portal</u>, call **1-866-329-4701** (TTY: **711**), or

fax the request to **1-877-668-2074** for physical health and **1-844-528-3453** for behavioral health.

Background on the bill

Illinois SB 3268 amends several provisions within the Illinois Public Aid Code. It includes a range of measures aimed at increasing access to quality health care services, preserving existing health care coverage and continuing to create a more equitable health care system in Illinois. It applies to Medicaid, with additional applicability to some non-Medicaid statutes. Different provisions go into effect at different times.

Questions?

Please contact your assigned **Provider Relations representative** if you have questions.