

Aetna Better Health® of Kentucky
9900 Corporate Campus Drive, Suite 1000
Louisville, KY 40223



AETNA BETTER HEALTH® OF KENTUCKY

Fax Blast

To:	All Network Providers	Fax:	<<location_fax>>
From:	Provider Relations Pharmacy Requests	Date:	February 3, 2016
Re:	Ultrasound OB Codes Updated Provider Portal Reminder Correct Claims Address	Pages:	2 including cover

Notes:

We appreciate your participation in the Aetna Better Health of Kentucky provider network. Please review the attached information.

This document may contain confidential or privileged information. If you think you have received this message in error, please contact the sender and then destroy this document immediately. Thank you, Aetna Inc.

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To: All Network Providers
From: Provider Relations
Date: February 3, 2016
RE: Pharmacy Requests
Ultrasound OB Codes Updated
Provider Portal Registration Reminder
Correct Claims Address

1. Effective 2/1/16, the health plan will only be processing **pharmacy** requests that are being done in the **Inpatient** or **Outpatient** settings and **Buy and Bill** from the offices. All pharmacy items, including specialty pharmacy items previously reviewed on the medical benefit should now be directed to CVS/Caremark:

Phone: **1-855-300-5528**

Fax: **1-855-799-2550**

CVS/Caremark help desk: **1-855-319-6290**

2. ProPat ultrasound codes have been updated:
76805/76810 - the exception note says: Contact eviCore for notification. Benefit allows one visit for patients 16 weeks gestation or greater. Additional visits require prior auth.

76813/76814 - the exception note says: Contact eviCore for notification. Benefit allows one visit for patients 11-13.6 weeks gestation. Additional visits require prior auth.

3. The provider portal registration forms are located on our website at **www.aetnabetterhealth.com/Kentucky**. Go to "For Providers" and click on "Document Library", you will find the forms there under "Provider Forms".

As an additional reminder, you can fax your completed form to us via fax at **1-855-454-5584**.

Once your registration is received and processed there will be two emails generated.

- The first email confirms that your registration has been received and is in process.
- The second email will be generated within 24 hours and will confirm access information.

4. For clarification, the following is the correct address to mail paper claims:

Aetna Better Health of Kentucky

Attn: Claims

P O Box 65195

Phoenix, AZ 85082-5195