



## **Temporary changes to prior authorization and admissions protocols for Aetna Better Health of Michigan**

### **Announcement summary:**

**Aetna Better Health of Michigan temporarily adopted changes to its prior authorization protocols for inpatient admissions to help health care facilities reduce administrative burdens during the COVID-19 pandemic.** Additionally, Aetna Better Health of Michigan changed prior authorization requirements for post-acute care facilities, long-term acute care hospital admissions and acute care hospital admissions.

### **FAQs:**

#### **What changes is Aetna Better Health of Michigan making to its prior authorization and admission protocols?**

Aetna Better Health of Michigan understands health care providers are experiencing increased demands due to the COVID-19 pandemic. To support our members and providers, Aetna is making temporary changes to its prior authorization protocols. Aetna Better Health of Michigan changed prior authorization requirements for post-acute care facilities, long-term acute care hospital admissions and acute care hospital admissions.

#### **Does this liberalization apply to long-term care members moving from long-term care beds to skilled beds?**

Aetna Better Health of Michigan's temporary policy change is in place to reduce administrative burden on the acute care facilities and not delay discharges from the acute hospital facilities. If there is a potential need for a member living in a long-term care facility to move to a skilled level of care, our normal prior authorization policy applies.

#### **Can a provider follow Aetna Better Health of Michigan's standard UM prior authorization protocols instead of following the liberalizations that were put in place for the COVID-19 pandemic?**

Aetna Better Health of Michigan is offering providers the flexibility to follow the standard process of submitting clinical information at the time of admission notification. Aetna will follow its current review process and issue a medical determination. For providers that are unable to submit clinical information at time of admission, Aetna will review those retrospectively unless prohibited by regulation.

Please see Aetna Better Health of Michigan's UM liberalization notification (attached) to confirm which liberalizations apply in Michigan

**Do providers have to choose to follow either the standard UM prior authorization process or the liberalized protocol for the duration of the COVID-19 pandemic?**

Aetna Better Health of Michigan is offering providers the flexibility, on a case by case basis, to follow Aetna's standard or liberalized protocol so providers can determine which approach is appropriate for them given current circumstances.

**How long will this process be in place?**

Changes to reduce prior authorizations protocols for post-acute care and long-term acute care hospital admissions are effective through May 6, 2020.

Temporary changes to reduce prior authorizations protocols for acute care hospital admissions will be effective through May 6, 2020.

Aetna Better Health of Michigan will provide additional communication regarding any extension of policy changes.

**What is required by hospitals when a member is transferred to a different care setting?**

Hospitals are required to supply a patient's medical records to the post-acute setting when the patient is transferred.

**What is required from the post-acute facility once a member is transferred to a different care setting?**

The post-acute facility will need to notify Aetna Better Health of Michigan of the patient's post-acute admission.

**Why is Aetna Better Health of Michigan requesting medical records within three days for post-acute facilities?**

By communicating medical records, Aetna Better Health of Michigan can continue to help providers manage patients and assist in the discharge planning process. Length of stay reviews will still apply.

**Where can I find more information?**

Providers should call their provider services representative for more information.