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# Aetna OfficeLink Updates

Mid-America Region



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## Options to reach us

Select **Health Care Professionals**

Select Log In/Register

If you have questions after viewing the information online, call us:

- **1-800-624-0756** for HMO-based and Medicare Advantage plans
- **1-888-MDAetna (1-888-632-3862)** for all other benefits plans

## Updates to our National Precertification List

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**Send observation notifications over 24 hours electronically**

# Policy and Coding Updates

## Clinical payment, coding and policy changes

Procedure	Effective date	What's changed
<b>Modifier 59 Distinct Procedural Service</b>	June 1, 2016	Effective June 1, 2016, our Modifier 59 policy will apply to facility claims. When a procedure or service is billed with Modifier 59 on the same date of service as another procedure, Aetna may consider both codes as eligible for payment. Refer to the "Modifier 59 Distinct Procedural Service payment policy and exceptions on our secure provider website under the Claim Payment and Coding Policies section for more information.
<b>Presumptive and Definitive Drug Testing*</b>	January 1, 2016	We will follow the 2016 CMS coding recommendations for definitive and presumptive drug testing. The frequency limit for each (definitive and presumptive) is 8 times per 365 days, from the time the service is first rendered.
<b>Procedure: Payment for professional services</b>	August 1, 2016	According to Aetna policy, professional services billed by a hospital on a UB form are to be denied. When denied, we provide instructions for the services to be rebilled on a HCFA form. This general policy has been in place for E&M codes for several years. In 2008, we made updates to include professional fees for minor surgery codes. But that update was only made to our HMO system. We re now updating our traditional system.



## **Precertification requirement reminder**

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### **When out-of-state patients seek your care**

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### **Be aware of premium grace period for exchange members**

## Follow guidelines for appropriate lab testing

### Medication category

**Angiotensin converting enzyme (ACE) inhibitors  
Angiotensin receptor blockers (ARBs)**

### Annual lab test(s)

Serum potassium and serum creatinine **or**  
Serum potassium and blood urea nitrogen

**Digoxin**

Serum potassium and serum creatinine **or**  
Serum potassium and blood urea nitrogen

**Diuretics**

Serum potassium and serum creatinine **or**  
Serum potassium and blood urea nitrogen

**Anticonvulsants**

Serum concentration for the prescribed drug

## Member ID card on a smartphone is valid



# Office News

Use our secure site to update data about your office

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Limiting radiation exposure in pediatric patients

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Our Office Manual keeps you informed

**Help patients save and stay in network**

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**Compassionate Care Program helps with end-of-life discussions**

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**Note our utilization management policy**

## **Adhering to antidepressant medication treatment plans**

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**Refer patients to our Complex Case Management program**

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**Disease management programs target chronic conditions**

## Improving the quality of ADHD care

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### Medical record audit results for PCPs

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### Accessibility standards for specialty care

## ASA and Government Employees Health Association expand relationship

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**Send ASA claims to the correct payer**

# Learning Opportunities

New and updated courses for physicians, nurses and office staff

Courses:

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Reference Tools:

# Medicare

Keep Medicare Advantage directory information up to date

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Centers for Medicare & Medicaid Services (CMS) compliance changes for 2016

# Pharmacy

## Upcoming changes to our commercial drug lists

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Changes in drug coverage reviews may affect patients

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Where to find our Medicare and Commercial formularies



Route this publication to:

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## Help us collect HEDIS®\* data

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