



About Aetna Assure Premier Plus (HMO D - SNP)¹

Aetna Assure Premier Plus (HMO D-SNP) is a Fully Integrated Dual Eligible Special Needs Plan. It is a special type of Medicare Advantage Plan that provides both Medicare and Medicaid health benefits to New Jersey Members who qualify for Medicare and NJ FamilyCare (Medicaid services) and who live in our plan's service area.

Aetna Assure Premier Plus (HMO D-SNP) covers all of the Member's Medicare, NJ FamilyCare (Medicaid), Managed Long Term Services and Supports, and prescription drug benefits, including Medicare Part D, and extra benefits, in one health plan, with one identification card, and no deductibles, coinsurance, or copays for plan-covered services or prescription drugs.

Member Eligibility and Benefits

Who is eligible for NJ FIDE-SNP?

- Eligible for Medicare; entitled to Medicare Parts A and B;
- Eligible for NJ FamilyCare (Medicaid);
- Have QMB+ or FBDE (Full Benefit Dual Eligible) status; and
- Live in the plan's service area which consists of the following New Jersey Counties: *Bergen, Camden, Essex, Hudson, Mercer, Middlesex, Monmouth, Ocean, Passaic, and Union.*

What Care Management Services do FIDE-SNP Members Receive?

Members enrolled in a FIDE-SNP plan have a dedicated care manager who will serve as their main point of contact with the plan. The Care Manager will lead an **Interdisciplinary Care Team (ICT)** that works together to help each Member receive the most appropriate, highest quality of care. Each Member has an **Individualized Care Plan (ICP)** based on the results of their comprehensive **Health Risk Assessment (HRA)**.

When can a Member enroll in a FIDE-SNP?

FIDE-SNP Members have Special Enrollment Periods (SEP) which allow them to **enroll, disenroll or switch** plans once a quarter for the first three quarters of the year. Enrollment changes become effective the first day of the following month.

What if a Member loses Eligibility?

If a Member loses their Medicaid eligibility, our plan will continue to cover the Member's Medicare benefits for a period of deemed eligibility for six (6) months. The plan will also continue to cover Medicare cost-sharing during this time, however, during this period, Medicaid-only benefits may not be covered by our plan. To find out if a benefit is Medicaid only, or to find out if it will be covered, you can call 1-844-362-0934. This period of deemed eligibility begins the first day of the month after we learn of the loss of eligibility. If, at the end of the six (6) month period of deemed eligibility, the Member's Medicaid eligibility has not been regained

¹ Aetna Assure Premier Plus (HMO D-SNP) is a HMO Medicare Advantage Dual Eligible Special Needs plan with a Medicare contract and a contract with the State of New Jersey Medicaid Program. Enrollment in Aetna Assure Premier Plus (HMO D-SNP) depends on contract renewal. Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Aetna Life Insurance Company and its affiliates (Aetna).

and the member has not enrolled in a different plan, we will disenroll the member from our plan and they will be enrolled back in Original Medicare.

What if I'm not a Medicaid Participating Provider?

Aetna Assure Premier Plus (HMO D-SNP) is a Medicare Advantage plan. You are not required to become a Medicaid participating Provider or service NJ Familycare Fee-for-Service beneficiaries. However, you are required to register with the state Medicaid program by completing The 21st Century Cures Act Enrollment. The link for The 21st Century Cures Act application for enrollment can be accessed at: www.njmmis.com.

Download and complete your application. Once complete, providers will need to follow the instructions to the NJ Medicaid Provider Enrollment office for processing (per the instructions on the application). Should you have questions about the NJ FamilyCare Program enrollment process please contact the NJMMIS provider enrollment unit at **609-588-6036**. The mailing address to submit the application and credentials is: Molina Medicaid Solutions Provider Enrollment P.O. Box 4804 Trenton, NJ 08650. The completed application with credentials can also be faxed to: **609-584-1192**.

Am I Required to see FIDE-SNP Members?

Yes. If your practice is open to new patients, you are required to see these Members.

What Services and Benefits are covered in our FIDE-SNP?

- All covered Medicare and Medicaid Services
- Prescription Drugs including Medicare Part D
- Dental
- Vision
- Hearing
- Non-emergency transportation
- Managed Long Term Services & Support
- Behavioral Health
- Care Management
- Supplemental benefits include:
 - A fitness program through SilverSneakers
 - Home delivered meals following an in-patient stay
 - Over the counter (OTC) products
 - Health Foods Grocery card for those with certain chronic conditions
 - Aetna 24-hour Nurseline
 - MinuteClinic® Video Visits

Things to remember:

FIDE-SNP Members should show their Member ID card each time they visit their doctor or facility. Members must select a primary care physician to coordinate their care. Members may only see providers in the Aetna Assure Premier Plus (HMO D-SNP) network. No out-of-network benefits exist for these plans unless the member follows the approval process by contacting Member Services directly. Members do not need referrals to see in-network providers

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Provider Claim Processing

Can I balance bill a member?

Providers may not bill members for any Medicare or Medicaid covered services.

Will members have Aetna D-SNP and Medicaid plan?

No. Aetna Assure Premier Plus (HMO D-SNP) is a special kind of Medicare Advantage plan that offers all of the services offered by original Medicare and a prescription drug plan, along with all of NJ FamilyCare's (Medicaid) services. Members will receive both their Medicare and Medicaid services from Aetna's FIDE-SNP plan.

Should I bill Medicare or Medicaid?

Providers should bill Aetna FIDE-SNP for amounts due for any services covered under the plan.

Am I in Aetna's FIDE-SNP network?

If you are receiving this communication, then you've been identified as a provider who may support members that reside in our 10 county service area. To check your participation status, please visit our online directory at www.aetnabetterhealth.com/new-jersey-hmosnp/find-provider.

What Number do I use to Submit Electronic Claims?

Please use Submitter ID #46320 when submitting claims.

Policies and Procedures

Do I have to take any Training?

All FIDE-SNP plans are required to have an approved Model of Care. Providers must take a mandatory Model of Care Training required by CMS each year. A simple Attestation Statement is provided within this training document as well to make it easy for you to get credit for completing the course. You can take the training and record your attestation here: www.aetnabetterhealth.com/new-jersey-hmosnp/provider-training-orientation.

Are all Office Staff Required to take the Model of Care training?

All providers and office staff who interact with FIDE-SNP Members are required to complete this training. Please note that attestations are collected on the TIN level.

Where can I get my Patient's Health Information?

Providers can view and download their patients' HRAs and ICPs through our Secure Provider Portal. Instructions for registering and gaining access to the portal are located under 'Resources' on our Provider site located at www.AetnaBetterHealth.com/New-Jersey-hmosnp/providers.

What other Information do I have to Submit?

To support Healthcare Effectiveness Data and Information Set (HEDIS) initiatives, be sure to submit encounter data for the Care for Older Adults (COA) measure. Requirements: Advanced Care Planning (CPTII:

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1157F, 1158F), Functional Status Assessment (CPTII: 1170F), Medication Review (CPTII: 1159F and 1160F must both be submitted on the same claim, same day), Pain Screening (CPTII: 1125F, 1126F).

More information

Where can I find the provider newsletter and updates on policy information?

Our **provider newsletter** can be found here: www.AetnaBetterHealth.com/New-Jersey-hmosnp/providers/newsletters.

Where can I find the Aetna Assure Premier Plus (HMO D-SNP) provider manual?

The Provider Manual is accessible on our website at <https://aetnabetterhealth.com/new-jersey-hmosnp/providers> under the 'Resources' link on the Provider Site.

What does a FIDE-SNP Member ID card looklike?

A sample Member ID card can be found here:

Aetna Assure Premier Plus (HMO D-SNP)				Important Information: In case of an emergency, call 911 or go to the nearest emergency room (ER). Prior authorization is not required for emergency services.	
Member Name: <Cardholder Name>		PCP:	\$0 Copay	For Members	
Member ID: <Cardholder ID#>		Specialist:	\$0 Copay	Member Services:	1-844-362-0934 (TTY: 711)
Issue Date: <Issue Date>		Emergency Room:	\$0 Copay	Behavioral Health Crisis:	1-844-362-0934 (TTY: 711)
Issuer: 80840		Urgent Care:	\$0 Copay	Care Management:	1-844-362-0934 (TTY: 711)
RxBIN: 61052		Dental:	\$0 Copay	24-Hour Nurse Advice:	1-844-362-0934 (TTY: 711)
RxPCN: MEDDAET				Dental Services:	1-844-362-0934 (TTY: 711)
RxGrp: RXAETD				Website:	AetnaBetterHealth.com/New-Jersey-hmosnp
PCP Name: <PCP Name>				For Providers	
PCP Phone: <PCP Phone>		H6399-001		Medical	
				Eligibility Verification:	1-844-362-0934 (TTY: 711)
				Prior Authorization:	1-844-362-0934 (TTY: 711)
				Pharmacy	
				Pharmacy Help Desk:	1-800-338-6279 (TTY: 711)
				Claim Inquiry:	1-844-362-0934 (TTY: 711)
				Submit claims to:	
				Aetna Assure Premier Plus (HMO D-SNP)	
				P.O. Box 51925	
				Phoenix, AZ 85082-1925	

How do I contact Aetna?

For Aetna Assure Premier Plus (HMO D-SNP) call 1-844-362-0934 to address:

- Provider needs
- Prior Authorization for services
- Case Management needs (*NOTE: you may also E-mail Case Management NJ_FIDE_SNP_CM@Aetna.com*)
- **IMPORTANT:** All options from the call tree at the number listed above will be available as of January 1st, 2021

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