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**Aetna Better Health® of Louisiana**

Prior Authorization Department

Phone: 1-855-242-0802 TTY: 711

Fax: 1-844-227-9205

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**To:** DIXIE M **Date:** 04/01/2020**Outbound Fax ID:** 507785-001-01**From:** Deanna P**Auth ID:** N/A**Date Of Birth:****Member ID:****Member Name:****Referring Prov ID:****Referring Prov Name:****Servicing Prov ID:****Servicing Prov Name:** LANE REGIONAL MEDICAL CENTER**Start Date:****End Date:****Subject:** COVID-19

Effective March 17, 2020, and for the duration of the COVID-19 emergency, Healthy Louisiana MCOs have been instructed to suspend all acute care hospital-based utilization management for medical hospitalizations including, but not limited to, service authorizations and concurrent reviews. Aetna Better Health appreciates your facility taking the time to send notification and/or clinical during the COVID-19 emergency. We will keep the documentation on file; however, according to LDH HPA 20-6, we will conduct post-payment reviews of medical hospital admissions and continued during the emergency period with the approval of and coordinated by LDH. Aetna Better Health is available at 1-855-242-0802 to assist with any care coordination or discharge needs.

**Disclaimer:**

The requesting provider is responsible for notifying the specialist of authorization number for approved office visits. Authorization is subject to eligibility on date of service. If member is determined to be ineligible on date of service, the member may be responsible for these services. To ensure proper payment for services rendered, referral provider/facility must verify eligibility on the date of service. This message is intended only for the use of the individual or entity to which it is addressed and may contain confidential and/or proprietary information. If you are not the intended recipient or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is prohibited. If you received this communication in error, please notify the sender at the phone number above.

**NOTICE TO RECIPIENT(S) OF INFORMATION:**

Information disclosed to you pertaining to alcohol or drug abuse treatment is protected by federal confidentiality rules (42 CFR Part 2), which prohibit any further disclosure of this information by you without express written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose. The federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.

This authorization is conditioned upon providers having a valid Louisiana Medicaid Provider Identification Number. If the provider does not have a Louisiana Medicaid Provider Identification Number at the time of the authorization, due diligence by the provider to obtain a Louisiana Medicaid Number is expected, and Coventry Cares of Louisiana will not issue a payment until a Louisiana Medicaid Provider Identification Number is obtained by the provider. Assistance with obtaining the Louisiana Medicaid Provider Identification Number can be obtained by contacting 855-229-6848 (BAYOU4U).