



Aetna Better Health® of Texas

Quarterly summary is for Quarter One (September, October, November 2019) of State Fiscal Year 2020.

- a) The total number of Provider compliance oversight reviews completed by type including EVV Usage Reviews, EVV Reason Code Reviews, Required Free Text Reviews, and EVV Allowable Phone Identification Reviews: **20**
- b) The total number of Providers not compliant with HHSC EVV policy requirements by type: **5**
- c) The total number of Providers compliant with HHSC EVV policy requirements by type: **15**
- d) The top five reasons (from zero to five) that the MCO denied EVV-relevant claims including, but not limited to, EVV claims that match result codes returned from the EVV Aggregator:

	Denial Reason
1	EVV Match Denials
2	18 - Duplicate claim/service
3	M86 - Service denied because payment already made for same/similar procedure within set time frame.
4	29 - The time limit for filing has expired
5	58 - Treatment was deemed by the payer to have been rendered in an inappropriate or invalid place of service

- e) The top five reasons (from zero to five) for the MCO Recoupment of EVV relevant claims.

N/A for EVV Recoupment since Aetna Better Health of Texas is Prepay.