



Aetna Better Health® of Texas

Quarterly summary is for Quarter Two (December, January, February) 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: **19**
- b) The total number of Providers not compliant with HHSC EVV policy requirements by type: **4**
- 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 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	22 - This care may be covered by another payer per coordination of benefits

- 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.