



Provider Education Bulletin

Spring 2026 edition, day 1 of 2

Supporting you — our trusted providers — and your Aetna® patients on their path to better health is always our top priority. And our quarterly provider education bulletin helps make working with us simpler. We send useful information, tools, tips and resources straight to your inbox. So you can spend more time focusing on your patients' health.

Stay in the know — join our distribution list

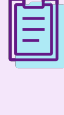
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As always, we welcome your feedback

Just send your comments and ideas for future articles to

NewProviderTraining@Aetna.com.

Thank you for being a part of our network.



Today's news

We're sharing our clinical documentation standards and how they align with our prior authorization (also referred to as precertification) and clinical policy requirements.



Tomorrow's news

We're highlighting our behavioral health Collaborative Care Model and how you can help patients with Substance Use Disorders (SUDs).

Clinical documentation quality supports our prior authorization and clinical policy requirements

What you need to know

We're required to comply with state and regulatory treatment documentation requirements and maintain standards to ensure that care is:

- Appropriately documented
- Clinically supported
- Aligned with coverage and medical necessity criteria

Why clinical documentation quality matters

Clear and complete documentation helps reduce follow-up requests and enables more efficient reviews by clearly supporting medical necessity based on clinical policy criteria. Submitting high-quality supporting documentation also:

- Minimizes the need for additional information requests and peer-to-peer reviews
- Improves turnaround times for prior authorization decisions
- Supports accurate, timely payment

When documentation clearly reflects the patient's clinical journey and rationale for services, we can complete reviews more efficiently and with fewer delays and rework.

Key elements of high-quality clinical documentation

While requirements may vary by service, high-quality documentation generally includes:

- Clear diagnoses and relevant clinical history
- Objective findings and test results that support the requested service
- Clinical rationale aligned to applicable Clinical Policy Bulletins (CPBs)
- Treatment plans and expected outcomes
- Progress notes reflecting response to treatment or changes in condition
- Timely, legible and well-organized records

Help avoid peer-to-peer reviews

Peer-to-peer reviews are often triggered when clinical documentation does not fully support medical necessity at the time of a prior authorization request submission.

To help avoid peer-to-peer reviews:

- Review the applicable [Clinical Policy Bulletin](#) before submitting a request
- Clearly document the diagnosis, clinical rationale, and prior conservative treatment, when required
- Include relevant test results, imaging reports, therapy notes and clinical notes with the initial request
- Ensure that the documentation directly aligns with the criteria for the requested service

Prior authorization resources

Our downloadable Prior Authorizations Resources tip sheet on Availity® combines tools, training and best practices from Aetna® and EviCore healthcare to help your team reduce and eliminate delays and lower operational costs so you can focus more time on patient care.* Simply go to **Availity > Payer Spaces > Aetna Payer Space > Resources**.

Evicore resources are also available within their [Providers' Hub](#).

You'll find training guides like "How to Speed Up Prior Authorization" and "Keys to Avoiding Peer-to-Peer Calls." Plus, you can use their online tools to schedule peer-to-peer discussions, upload clinical information and check case status online.

Where to find more information

For additional guidance, refer to our [Provider Manual](#) or use the provider education and training resources available on [Aetna.com](#) and [EviCore](#). You can also connect with our provider service center by using our [Contact](#) form.

Thank you for your efforts to maintain comprehensive medical records. Your commitment to documentation quality supports patient care, reduces administrative friction and helps enable timely authorization decisions and reimbursement.



We're here for you.

Learn how to do business with us simpler and quicker.

Just attend our **Doing Business with Aetna** webinar on the [second Tuesday](#) or [third Wednesday](#) of each month from 1:00 PM to 2:15 PM ET. Ask questions and get answers on the spot.

We'll show you how to:

- Locate provider manuals, clinical policy bulletins and payment policies
- Access online transactions such as those related to eligibility, benefits, precertification, and claim status/disputes
- Locate Availity® Help and Training
- Access our online forms
- Navigate to our provider referral directory and Medicare directory
- Update your provider data, and much more

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Provider Education Bulletin

Spring 2026 edition, day 2 of 2

This is day two of our provider education spring series. Today's edition focuses on our behavioral health Collaborative Care Model and how you can help patients with Substance Use Disorders (SUDs). So you can get back more time in your day and focus on your patients' care.

We're committed to bringing useful information straight to your inbox. The goal is to help you — our trusted health care providers and staff — stay in the know about processes, guidelines and workflows to better serve our members and get paid faster.

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Today's news

We're highlighting our behavioral health Collaborative Care Model and how you can help patients with Substance Use Disorders (SUDs).

Care coordination contributes to better patient outcomes

We expect our behavioral health providers to work with medical and behavioral health providers, and this collaboration is both reimbursed and audited.

Many of your patients receive care from other behavioral health providers, primary care providers and/or medical specialists. The Collaborative Care Model is an evidence-based practice that leads to better outcomes for patients.

Care coordination improves patient interactions

See the [American Psychiatric Association](#) for information on the importance of the Collaborative Care Model and how it works.

HIPAA guidelines

Note the following [HIPAA guidelines \(PDF\)](#) regarding sharing behavioral health information:

- Health care providers may disclose Protected Health Information (PHI) (whether orally, on paper, by fax or electronically) for purposes of treatment, case management, coordination of care, payment, and health care operations without consent or authorization.*

Please request that patients sign release of information forms for all providers involved in their care. This will help ensure prompt communication between providers when it is necessary.

We expect collaborative care and reimburse for it

The CPT® codes for collaboration include: 99484, 99492, 99493 and 99494.**

We evaluate our behavioral health providers on care collaboration. We do this via our Annual Behavioral Health Practitioner Experience Survey and via treatment record audits. Please see the Coordination of Care section of the current [Aetna Provider and Behavioral Health Manual](#) for more information.

Helping patients with Substance Use Disorders (SUDs)

You are in a unique position to identify SUDs and assist your patients in obtaining the care they need. According to the American Hospital Association, over 46 million Americans age 12 and older report struggling with substance use.¹ You can help start a conversation that could lead to someone getting the care they need. Remember, one conversation may be what leads to someone's recovery.

Knowledge is power

Research, treatments and best practices are always evolving, and Aetna® works to stay updated in this ever-changing landscape. We encourage you to seek out continuing education regarding SUDs.

We offer [training resources](#) to help you understand and identify signs of SUDs.

Screening can make a world of difference

Screening tools can help identify SUDs and assist with a discussion about treatment options. Refer to our [screening tools, treatment options and support resources](#).

If you have a question about our Coordination of Care model or SUDs resources, you can send an email to the [Behavioral Health Quality Management team](#).



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¹American Hospital Association™ (AHA) News. [Survey: Most Americans with substance use disorders don't receive treatment](#). January 6, 2023. Accessed February 3, 2026.

*Covered entities must get patient authorization to disclose separately maintained psychotherapy session notes.

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