Name: August 2024 OLU monthly
 Subject: Aetna monthly OfficeLink Updates, August 2024 -- policy changes and updates
 Preheader: Learn about important policy updates, material changes and amendments

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August 2024

This month's 90-day notices and related reminders

We regularly review and adjust our clinical, payment and coding policies. Review our policies and claim edits on our provider portal on Availity[®].* Just go to **Payer Space > Resources > Expanded Claim Edits**. Or you may visit <u>Aetna.com</u> to see them.



Changes to our National Precertification List (NPL)

This update applies to our commercial and Medicare members.

Effective August 1, 2024, we'll require precertification for the following:

- Anktiva[®] (nogapendekin alfa inbakicept-pmln) (J3490, J3590, C9399, J9999)
- Beqvez[™] (fidanacogene elaparvovec-dzkt) (J3490, J3590, C9399)

Effective November 1, 2024, we'll require precertification for the following:

Krystexxa® (pegloticase) (J2507)

Effective November 1, 2024, we'll require site-of-care precertification for the following drug, which currently requires precertification:

 Vyvgart Hytrulo (efgartigimod alfa and hyaluronidase-qvfc) (J9334)

Submitting precertification requests

Be sure to submit precertification requests at least two weeks in advance and include the actual date of service in the request. To save time, request precertification online. Doing so is fast, secure and simple.

You can submit most requests online through our **provider portal on Availity**.* Or you can use your practice's Electronic Medical Record (EMR) system if it's set up for electronic precertification requests. Use our "Search by CPT® code" search function on our **Precertification Lists** page to find out if the code requires **precertification**.**

If you need precertification for a specialty drug for a commercial or Medicare member, submit your request through Novologix[®], also available on Availity[®].

Note to Texas providers: Changes described in this article will be implemented for fully insured plans written in the state of Texas only if such changes are in accordance with applicable regulatory requirements. Changes for all other plans will be as outlined in this article.

Note to Maine providers: For commercial plans, your effective date for routine changes described in this article will be the statutory date of January 1, April 1, July 1 or October 1, whichever date follows the effective date(s) referred to in this article. Changes required by state or federal law, or pursuant to revisions of Current Procedural Terminology (CPT[®]) codes published by the American Medical Association, may be effective outside the statutory dates outlined above.



Services billed with a diagnosis considered not covered

Reminder: Aetna[®] will deny services when billed with a diagnosis considered not covered per standard plan exclusions.

Note to Texas providers: Changes described in this article will be implemented for fully insured plans written in the state of Texas only if such changes are in accordance with applicable regulatory requirements. Changes for all other plans will be as outlined in this article.



Disposable hearing aids coverage

Reminder: Aetna® does not cover disposable hearing aids (that is, HCPC V5262 or V5263), since they are considered not covered per standard plan exclusions.

Note to Texas providers: Changes described in this article will be implemented for fully insured plans written in the state of Texas only if such changes are in accordance with applicable regulatory requirements. Changes for all other plans will be as outlined in this article.



Certain services allowed in specific places of service

Reminder: Certain procedure codes are allowable only in specific places of service, according to the AMA CPT Manual and CMS. Code examples include but are not limited to:

- Physical Therapy Services Provided in an Inpatient
 or Outpatient Hospital
- Place of Service Coding for Physician Services

Note to Texas providers: Changes described in this article will be implemented for fully insured plans written in the state of Texas only if such changes are in accordance with applicable regulatory requirements. Changes for all other plans will be as outlined in this article.



You can always find this information on our

provider portal on Availity.*

You can also use our Code Edit Lookup tools on Availity[®]. Just go to **Payer Space > Applications > Code Edit Lookup Tools**. And keep your Aetna provider ID number handy to access them.

Availity portal

*Availity® is available only to providers in the U.S. and its territories.

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