



1285 Fern Ridge Parkway, Suite 200
St. Louis, MO 63141

February 1, 2021

Dear Provider:

Prior authorization requirements

Our Enhanced Clinical Review program with eviCore healthcare requires authorization for certain procedures. **Effective May 1, 2021** all providers will be required to obtain authorization for the services listed below. This affects members in our Commercial and Medicare Advantage HMO/PPO Aetna® products.

Services that require preapproval:

- High-tech outpatient diagnostic imaging procedures such as MRI/MRA, nuclear cardiology, PET scan and CT scan, including CTA
- Non-emergent outpatient stress echocardiography
- Non-emergent outpatient diagnostic left and right heart catheterization
- Insertion, removal and upgrade of elective implantable cardioverter defibrillator, cardiac resynchronization therapy defibrillator and implantable pacemaker
- Polysomnography (attended sleep studies)
- Interventional pain management
- Musculoskeletal large joint (hip and knee) arthroplasty procedures
- Radiation Therapy Services:
 - Complex and 3D conformal
 - Stereotactic Radiosurgery (SRS)/Stereotactic Body Radiation Therapy (SBRT)
 - Brachytherapy
 - Hyperthermia
 - Intensity-Modulated Radiation Therapy (IMRT)/Image Guided Radiation Therapy (IGRT)
 - Proton Beam
 - Neutron Beam Therapy and Radiopharmaceuticals

Precertification won't be required for:

- Emergency departments
- Inpatient radiology services
- Outpatient radiology services other than those listed above

For a complete list of procedures requiring an authorization, visit eviCore healthcare at [eviCore.com](https://www.eviCore.com). The requested services are reviewed in accordance with applicable Medicare national coverage determinations and local coverage determinations, nationally recognized clinical and billing guidelines of the American College of Radiology (ACR), American Society of Radiation Oncology, guidelines from other recognized medical societies, any state regulations or mandates and the Aetna Clinical Policy Bulletins (CPBs).

Submitting authorization requests.

Before services are performed, eviCore healthcare's board-certified physicians will review authorization requests for medical necessity. For you to get paid for services, you must send authorization requests before providing services. To review our CPBs, visit [Aetna.com](https://www.aetna.com) and look under the "Helpful Links" section.

Asking eviCore healthcare for approval:

- Go to [eviCore.com](https://www.eviCore.com).
- Call **1-888-693-3211 (TTY: 711)** (7 AM to 8 PM CT, Monday through Friday).
- Fax a request form (available online) to **1-844-822-3862**.

For Radiation Therapy Services only:

- Go to [eviCore.com](https://www.eviCore.com) (after logging in, choose the CareCore National tab).
- Call **1-888-622-7329 (TTY: 711)** (7 AM to 8 PM CT, Monday through Friday).
- Fax a request form (available online) to **1-888-693-3210**.

Urgent requests.

If a member needs services in less than 48 hours due to medically urgent conditions, please call eviCore healthcare for a fast review. Tell the representative the request is for urgent care.

What you should know:

- We recommend that ordering physicians get authorizations and share the approval numbers with the facility performing the procedure when it is scheduled.
- eviCore healthcare will fax their approval decision to the ordering physicians and requested facilities.
- Approvals have authorization numbers, and one or more CPT codes specific to the approved services.
- If the service you ask for is different than what eviCore healthcare approves, the facility must contact eviCore healthcare for review and approval before submitting claims.
- If you perform services without approval, we may deny payment.
- We'll determine coverage under the applicable policy in accordance with the policy's terms and conditions and our policies and procedures.

We're here to help.

If you have questions, call eviCore healthcare at **1-888-693-3211 (TTY: 711)**. Or you can call Provider Services at **1-800-624-0756 (TTY: 711)** for HMO and Medicare Advantage benefits plans. Or **1-888-MDAETNA (1-888-632-3862) (TTY: 711)** for all other plans. You can also see eviCore healthcare's criteria and get request forms at [eviCore.com](https://www.eviCore.com).

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