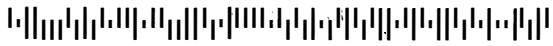




Three Sugar Creek Center, Suite 300
Sugar Land, TX 77478

SA-22621B



Important information for your office

000300



As published in the March 1, 2020, edition of Aetna OfficeLink Updates™

Changes to our National Precertification List (NPL)

Effective July 1, 2020, the following precertification changes apply:

- We'll require precertification for the following:
 - Functional endoscopic sinus surgery (FESS)
 - Revision of shoulder arthroplasty
 - Arthrodesis for spine deformity
 - Kyphectomy
- We'll require precertification for the following drugs:
 - Avastin® (bevacizumab)
 - Belrapzo™ (bendamustine HCl)
 - Bendeka® (bendamustine HCl)
 - Feraheme® (ferumoxytol)
 - Injectafer® (ferric carboxymaltose injection)
 - Mvasi™ (bevacizumab-awwb)
 - Sandostatin® (octreotide)
 - Somatuline® (lanreotide)
 - Treanda® (bendamustine hydrochloride)
 - Zirabev™ (bevacizumab-bvzr)
 - Zoladex® (goserelin)
 - Zulresso™ (brexanolone)



- We'll require precertification for the drug and site of care for the following drugs:
 - Bavencio® (avelumab)
 - Imfinzi® (durvalumab)
 - Keytruda® (pembrolizumab)
 - Libtayo® (cemiplimab-rwlc)
 - Opdivo® (nivolumab)
 - Tecentriq® (atezolizumab)
 - Yervoy® (ipilimumab)

The following new-to-market drugs require precertification:

- Rinvoq™ (upadacitinib) — precertification required, effective November 1, 2019. This drug is included in the immunologic agent class.
- Synjoyn™ (1% sodium hyaluronate) — precertification required, effective November 5, 2019. This drug is included in the viscosupplement class.
- Triluron™ (1% sodium hyaluronate) — precertification required, effective November 5, 2019. This drug is included in the viscosupplement class.
- Beovu® (brolucizumab-dbl) — precertification required, effective January 1, 2020. This drug is included in the ophthalmic medical injectable class.
- Xembify® (immune globulin-klhw) — precertification for both the drug and the site of care required, effective January 1, 2020.
- Givlaari™ (givosiran) — precertification for both the drug and site of care required, effective February 1, 2020.

We encourage you to submit precertification requests at least two weeks before the scheduled services.

To save time, request precertification electronically — it's fast and simple. Most precertification requests can be submitted electronically through the provider website or by using your Electronic Medical Record (EMR) system portal. You can find more information about precertification under the General Information section of the [**NPL**](#).

Changes to commercial drug lists begin on July 1, 2020

On **July 1**, we'll update our pharmacy drug lists.

You'll be able to view the changes as early as May 1, 2020. They'll be available then on our [**Formularies & Pharmacy Clinical Policy Bulletins**](#) page.

Ways to request a drug prior authorization

- Submit your completed request form through our **provider website**.
- Fax your completed **prior authorization request form** to **1-877-269-9916**.
- Call the Aetna Pharmacy Precertification Unit at **1-855-240-0535 (TTY: 711)**.

These changes will affect all Pharmacy Management drug lists, precertification, quantity limits and step-therapy programs.

For more information, call the Aetna Pharmacy Management Provider Help Line at **1-800-238-6279 (TTY: 711) (1-800-AETNA RX)**.

Our new provider portal on Availity®

You told us you wanted one efficient workflow to communicate with payers. So, we teamed up with Availity to streamline the process and give you new tools, too.

Our transition to the new portal will be by state. You may have already heard from us. If not, no worries! We'll be in contact with you very soon. You'll also be hearing directly from Availity.

Want more information?

Visit the **Aetna® landing page** on Availity. You can enroll in a free webinar, where we'll show you how to register, how to get started and best practices for optimizing the tools available.

Availity will become our sole provider portal on April 30, 2020.

If you're already registered with Availity for another payer, you're all set. You can use your existing log-in credentials to get started with Aetna.

We look forward to working with you!

Individual service codes and service grouping updates

Individual service codes will be re-assigned within contract service groupings. Changes to an individual provider's compensation will depend on the presence or absence of specific service groupings within their contract. These changes are outlined below:

Unless otherwise indicated, all updates will be effective **June 1, 2020**.



Codes	Provider types affected	What's changing
22633, 27130*	Facilities including Acute Short-Term Hospitals and Ambulatory Surgery Centers	Will be assigned to Ambulatory Surgery — Aetna Enhanced Grouper: Category 6 (AEG6) Code will remain assigned to Ambulatory Surgery: Default Rate (DEFAULTSUR). If contract contains an Ambulatory Surgery — Aetna Enhanced Grouper: Category 6 rate it will be applied. If not, then the Ambulatory Surgery Default Rate will be applied.
22633, 27130*	Facilities including Acute Short-Term Hospitals and Ambulatory Surgery Centers	Will be reassigned to Coventry Enhanced Grouper: Grouper 6 - If not listed above, then the Undefined Procedure Rate will be applied. - If the contract contains none of the above provisions, the relevant terms of the contract will rule.
63266, 63267, 63268*	Facilities including Acute Short-Term Hospitals and Ambulatory Surgery Centers	Will be assigned to Ambulatory Surgery — Aetna Enhanced Grouper: Category 5 (AEG5) Code will remain assigned to Ambulatory Surgery: Default Rate (DEFAULTSUR). If contract contains an Ambulatory Surgery — Aetna Enhanced Grouper: Category 6 rate it will be applied. If not, then the Ambulatory Surgery Default Rate will be applied.
63265, 63266, 63267, 63268*	Facilities including Acute Short-Term Hospitals and Ambulatory Surgery Centers	Will be reassigned to Coventry Enhanced Grouper: Grouper 5 - If not listed above, then the Undefined Procedure Rate will be applied. - If the contract contains none of the above provisions, the relevant terms of the contract will rule.
22634*	Facilities including Acute Short-Term Hospitals and Ambulatory Surgery Centers	Will be assigned to Ambulatory Surgery — Aetna Enhanced Grouper: Category 1 (AEG1) Code will remain assigned to Ambulatory Surgery: Default Rate (DEFAULTSUR). If contract contains an Ambulatory Surgery — Aetna Enhanced Grouper: Category 5 rate it will be applied. If not, then the Ambulatory Surgery Default Rate will be applied.

22634*	Facilities including Acute Short-Term Hospitals and Ambulatory Surgery Centers	Will be assigned to Coventry Enhanced Grouper: Grouper 1 • If not listed above, then the Undefined Procedure Rate will be applied. • If the contract contains none of the above provisions, the relevant terms of the contract will rule.
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*Washington state providers: Starred items were subject to regulatory review and separate notification, which will be sent at a future date.

Timely notification for acute rehabilitation centers and skilled nursing facilities

In December, we told you that in March we would begin requesting clinical information for an acute rehabilitation and skilled nursing facility **and administratively deny claims if the requested information was not received. We will not be implementing changes to the policy at this time.** Aetna's concurrent review nurses may request clinical records. When our nurses request clinical records, we ask that you send the clinical information in a timely manner. This ensures that Aetna members will receive appropriate care upon admission to an acute rehab or skilled nursing facility. We will notify you of any future changes.

Third Party Claim and Code Review Program

Effective **June 1, 2020**, you may see new claim edits. These new edits are part of our Third Party Claim and Code Review Program. These edits support our continuing effort to



process claims accurately. You can view these edits on our provider website.

You'll have access to our claim editing disclosure tool. To find out if our new claim edits will apply to your claim, log in to the provider website. Then go to: Aetna Payer Space > Applications > Code Edit Lookup Tools. You'll need to know your Aetna Provider ID Number (PIN).

Note: This is subject to regulatory review and separate notification in Washington state.

Update to our lab policy for in-office surgical pathology

Starting **June 1, 2020**, we are adding procedure codes 88341 and 88344 to our existing in-office surgical pathology lab policy. The current policy already allows these in-office surgical pathology procedure codes: 88300-88314 and 88342.

When can you use these codes?

You can only use these codes if you are Clinical Laboratory Improvement Amendments (CLIA) certified. You must also have one of the following accreditations:

- College of American Pathologists (CAP)
- The Joint Commission (TJC)
- American Osteopathic Association/Healthcare Facilities Accreditation Program (HFAP)

We allow reimbursement of these services performed in the office if providers submit documentation of their CLIA certification. Or if they're listed as a specialty allowed per our published policy.

These procedure code changes do not change the requirement to follow our in-office testing requirements and use participating labs where appropriate.

Update to presumptive or definitive drug test thresholds

We are updating our presumptive and definitive drug testing thresholds to allow up to 20 visits before requiring a medical necessity review for additional visits. Please refer to Clinical Policy Bulletin #965 for additional information and criteria.

Update to our billable services

Effective **June 1, 2020**, we'll allow hemodialysis services billed with modifier KX. You can use this modifier to report services required in excess of the three times per seven-day period.

Use hemodialysis modifier KX

Be sure to include the KX modifier on your bill to us, if necessary. If you don't, you won't be paid for the hemodialysis treatments that exceed the three times per seven-day period.

Note to all providers, including Coventry providers: Go to [Aetna.com](https://www.aetna.com) to view the March 2020 OfficeLink Updates (OLU) online and link to all information in this flyer. Click on "Providers," then click on "News." Remember, OLU comes out in March, June, September and December.

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