Subject: Aetna Monthly OfficeLink Updates, August 2022— policy changes and updates **Pre-header:** Learn about important policy updates, material changes and amendments

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Hello there.

We have important news for you.

August 2022

New reminders and 90-day notices

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

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

Changes to our National Precertification List (NPL)

Effective **September 1, 2022**, commercial and Medicare plans will no longer require precertification for the following drug:

Growth hormones

Nutropin AQ® (somatropin)

Please note that the above medication is usually self-administered and therefore will be excluded from the medical benefit unless an exception is granted. For Medicare, coverage determinations will still follow all Centers for Medicare & Medicaid Services (CMS) National and Local Coverage Determinations.

Precertification may still be required through the <u>pharmacy benefit</u> <u>for commercial plans</u> and the <u>Part D drug benefit for Medicare plans</u>.



You can always find these policies on our Availity® provider portal.

Access Availity

Effective **January 1, 2023**, commercial plans will require precertification for the following drugs (Medicare plans currently require precertification):

Immunologic agents

- Cimzia® (certolizumab pegol)
- Ilumya® (tildrakizumab)

Facility routine services, supplies and equipment

This information applies to both commercial and Medicare members.

Effective November 1, 2022, we will administratively deny facility claims submitted with HCPCS codes C1052, C2615, C9359 and C9362 because reimbursement for these supplies is included in the facility payment.

Note to Washington State providers: Your effective date for changes described in this article will be communicated following regulatory review.

Outpatient Consult Code policy (Medicare expansion)

This information applies to Medicare members.

Starting November 1, 2022, Aetna® will no longer reimburse providers for office consultation codes 99241, 99242, 99243, 99244 and 99245.

Note to Washington State providers: Your effective date for changes described in this article will be communicated following regulatory review.

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

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