Medical Billing Professionals Support Suite

News > General > New Aetna Requirement for Prior Authorization for DCs and PTs in PA, WV, NY and DE

New Aetna Requirement for Prior Authorization for DCs and PTs in PA, WV, NY and DE

2018-08-22 - Medical Billing Professionals - Comments (0) - General

CORRECTION--New Aetna Requirement for Prior Authorization for DCs and PTs in PA, WV, NY and DE

For our chiropractic and physical therapy clients in PA, WV, NY and DE, effective September 1st Aetna will be requiring you to obtain prior authorizations. For information about this, visit: https://www1.radmd.com/all-health-plans/aetna.aspx. (Note: an earlier version of this notice listed NJ as a state; that is not correct. WV should be listed instead of NJ).

For our Platinum Service providers and for our PremiumPlus providers enrolled in authorization tracking, once you obtain authorization you must submit a ticket in the Support Suite with the authorization number, the date range of the authorization and the number of visits (if listed) that are allowed. If you mistakenly submit billing without providing this info, we will place the claims on hold and advise you to submit a ticket with the required information.

For our Premium and PremiumPlus providers who are NOT enrolled in authorization tracking, if you submit billing for an Aetna patient we will assume you have authorization and we will submit the claim to Aetna. It is your responsibility to ensure you have prior authorization PRIOR to seeing the patient. If you do not have prior authorization and we submit the claim, the claim will deny and you may not be able to resubmit if Aetna then denies back-dated authorization. So as a matter of practice make sure you do NOT see any Aetna patients without first having the required prior authorization.

Steve