

Clinical Review Criteria Requests

If you have questions and need further assistance, please call Aetna Member Services at 1-800-594-9390 and press "0" at the prompt.

- If you are an existing Aetna Member in the State of New York, or consumer in the State of New York who may be interested in becoming an Aetna member, and need additional information on a specific clinical issue, you may request Clinical Review Criteria by submitting a written request to Aetna Inc. Your written request must contain the following information:

Name, address, telephone number, request for clinical review criteria which Aetna would utilize in making a coverage determination involving a specific condition, treatment or device.

- You may send your written request via US Mail to the following address:
Aetna
CRC Requests
Mailcode F074
One Farr View
Cranbury, NJ 08512

- If you have questions and need further assistance, please call Aetna Member Services at: 1-800-594-9390 and press "0" at the prompt.
- Although Clinical Review Criteria may be used by prospective enrollees to assist in making health plan enrollment decisions, they do not constitute medical advice. Clinical Review Criteria can be highly technical and consumers should review this information with their treating physicians. Coverage decisions are made based on the member's individual benefit plan and consider the individual situation in applying the Clinical Review Criteria.

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