

# What's prior authorization?

What you need to know for gynecologic conditions



It's a requirement that your provider requests approval before prescribing certain medicines or procedures. During the prior authorization process, it's reviewed against nationally recognized criteria, the highest-quality clinical guidelines and scientific evidence. This helps ensure you're getting the best care for your condition.

## 3 STEPS TO THE PROCESS



A **prior authorization** request is submitted on your behalf.

1



We'll review and make a **decision** quickly. And we'll keep you updated throughout the process.

2



We'll **approve** or **deny** your prior authorization. If denied, we'll work with you and your provider on next steps.

3

## FACTS ABOUT GYNECOLOGIC ISSUES

These are conditions that affect the female reproductive system. It includes problems with the breasts, uterus, ovaries, fallopian tubes, vagina and vulva.

- In the U.S., **25%** of adult women have at least one pelvic disorder
- Common procedures include cervical cryosurgery, colposcopy and hysteroscopy
- About **10%** of U.S. women ages 15 through 44 years have difficulty getting pregnant or staying pregnant

Source: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1380327/>

## KNOW YOUR CHOICES

If you get a denial, know that you have options:



**Talk to your provider.** You'll get a letter from us explaining the reason why your request didn't meet clinical guidelines.



**Ask for a review** between your provider and our medical director. They can further discuss your specific case to meet your specific needs.



**Ask for a formal appeal.** The denial letter will explain the steps you can take when requesting a formal appeal on your decision.



**Count on us for support.** We're here to help you through the process and explain your options. Be sure to check out the Aetna Health<sup>SM</sup> app at [aetna.com/ah\\_app](https://aetna.com/ah_app). It's an easy way to get status updates throughout this process.

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