News you need to know
We want to keep you informed. Below are a few important news items and reminders for you this month.

Cataract surgery requires precertification
In the March newsletter we let you know that cataract surgery procedures need precertification as of July 1, 2021.

Placing cataract surgery on the National Precertification List (NPL) lets us review for medical necessity. This helps our members avoid unnecessary surgery.

Use our provider portal on Availity® to request precertification electronically. You’ll also give us the necessary clinical information. It’s a simple two-step process:

- Submit* your authorization request on Availity using the “Authorization (Precertification) Add” transaction.
- Then, complete a short questionnaire, exclusively on Availity, to provide us with additional clinical information.

You can register for Availity on their website. We also offer training on how to use Availity to submit precertification requests for cataract surgeries electronically. Visit AetnaWebinars.com for a schedule and to register for the “Authorizations on Availity” webinar.

Exceptions: You may submit electronic precertification requests for cataract surgeries for members, except for Medicare members in Florida and Georgia. Use the telephone numbers listed below for Medicare members in those states:
- Georgia Medicare only (MEHMO and MEPO), contact iCare at 1-844-210-7444
- Florida Medicare only (MEHMO and MEPOS), contact iCare at 1-855-373-7627

Quick reminder: You can also use our Code Edit Lookup tools on Availity.

Just go to Payer Space > Applications > Code Edit Lookup Tools. And keep your Aetna® provider ID number (PIN) handy to access them.

Reminder about nonemergency use of the emergency room (ER)

In some cases, we will ask for medical records from a treating facility. We do so when a member goes to the ER for a nonemergent medical condition and the member’s plan limits coverage for nonemergency use of the ER. We review the medical records to see if there are nonclinical or clinical reasons why the member went to the ER. One of our clinicians may approve a claim as emergent. One of our Medical Directors will also review the medical records to see if the ER visit is nonemergent. This will result in limited coverage by the plan.

Changes to our NPL

The following new-to-market drugs require precertification:

- **Ponvory™ (ponesimod)** – Precertification required effective May 1, 2021. This drug is part of the Multiple Sclerosis (MS) drug category.
- **Breyanzi® (lisocabtagene maraleucel)** – Precertification required effective May 7, 2021. This drug is part of the Chimeric Antigen Receptor T-Cell Therapy (CAR-T) drug category.
- **Cosela™ (trilaciclib)** – Precertification required effective May 7, 2021.
- **Evkeeza™ (evinacumab-dgnb)** – Precertification required for the drug and site of care effective May 7, 2021.

**Submitting precertification requests**

Submit precertification requests at least two weeks in advance. Save time by requesting precertification online. Doing so is fast, secure and simple. You can submit most requests online through our provider portal on Availity. Or you can use the Electronic Medical Record (EMR) system portal.

Are you asking for precertification on a specialty drug for a commercial or Medicare member? Then submit your request through Novologix®, also available on Availity.

Not registered for Availity? You can register online or call 1-800-AVAILITY (1-800-282-4548). For one-on-one guided support from us, call 1-866-752-7021 (TTY: 711). Then, ask to talk with the Availity team.

Use our “Search by CPT code” search function on our Precertification Lists website to determine if the code requires precertification.

Learn more about precertification under the “General Information” section of the NPL.
Surgical procedures performed in the ER by ER provider without modifier 54

As of June 1, 2021, we’ll pay 75% of the contracted surgery rate for surgical services done in the ER by an ER specialty provider and billed without modifier 54.

This is different from our December newsletter, where we advised this would be effective March 1, 2021.

National Correct Coding Initiative (NCCI)

The NCCI is a collection of bundling edits created and sponsored by the Centers for Medicare & Medicaid Services (CMS). CCI edits are for services performed by the same provider on the same date of service only. We are updating and adding effective August 1, 2021 based on the NCCI policy.