

# Everything you'd like to know about precertifications.

And then some.

Here's a handy Q&A so you can breeze right through precertifications.

## What procedures require precertification?

First, all inpatient stays require it. Looking for a specific procedure? Use our precertification code search tool on [aetna.com/provider](https://aetna.com/provider). Then, choose "CPT Code Search" at the top of the page.

This tool:

- Allows you to enter a valid five-digit CPT or HCPCS code
- Tells you whether precertification is required, based on the code entered
- Gives you information about the precertification process for services by external vendors

## What information is required?

Prepare for a successful precertification request or notification submission by having this information available:

- Provider identifiers
  - The National Provider Identifier (NPI) numbers of the requesting, attending and admitting doctors, as well as the facility NPI. You can find these numbers through the referral directory on our provider website.
  - Contact name and phone number.
- Member ID number and date of birth
- Valid diagnosis code (799 series isn't accepted for notification submission)
- Precertification or notification category
  - Medical: inpatient/outpatient, home health, durable medical equipment, ambulance, office
  - Behavioral health: inpatient/outpatient, home health, ambulance, office
- Place of service

## How do I upload clinical information?

Simply use the Precertification Submission or Precertification Inquiry transaction, or access Precert Status Updates. Select the link, then "+ Add Document," and then "Attach" to send them to us. We'll need about 48 hours to review your documentation.



## How do I change or cancel my request?

Just complete a Precertification Inquiry transaction and click on the “Amend” link in the upper right corner. From there, you can:

- Change an admitting or attending provider, or the facility or vendor
- Add a new diagnosis code (up to five) or a note in the comments field (up to 264 characters)
- Update or change admission details, such as changing the admit date or adding a discharge date
- Add a discharge date (cannot be a future date)
- Update, add or cancel procedure codes (up to five)
- Add an end date (optional)
- Click “Submit” to send us the details

You can cancel if the requested service isn’t needed. Just complete a Precertification Inquiry transaction and click on the “Cancel” link in the upper right corner. You may only change certified events and services.

## What kind of response can I expect from my request?

**Certified in total:** All requested services have been approved.

**Modified:** The request has been approved but has been modified. For example, only a portion of the requested length of stay was approved.

**Rejected:** No certification ID will be returned; however, a unique tracking number is returned for reference purposes. Plus a rejection explanation, along with the information that was in error.

**Pended for medical review:** Most often, the requested services require more review and information. Use the Precertification Inquiry transaction to check its status.

## What kind of response can I expect from my notification?

A successful response will generate a notification receipt number. If it’s rejected:

- No notification receipt number will be returned
- Most information originally included in the notification will be returned
- A rejection explanation, along with the information that was in error, is returned



Whew. That was a lot. You can find answers to other questions on our provider website. Or select “Contact” on [aetna.com](https://www.aetna.com).

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