

Behavioral health precertification list

Services requiring precertification*/authorization

Behavioral health services requiring precertification/authorization**

This applies only to services covered under the member's benefits plan.

- · Inpatient admissions
- Residential treatment center (RTC) admissions
- Partial hospitalization programs (PHPs)

- Intensive outpatient programs (IOPs)
- Psychological testing
- Neuropsychological testing
- Outpatient detoxification
- Applied behavior analysis (ABA)
- Transcranial magnetic stimulation (TMS) (effective November 1, 2016)
- *The term precertification means the utilization review process to determine whether the requested service or procedure meets the company's clinical criteria for coverage. It does not mean precertification as defined by Texas law, as a reliable representation of payment of care or services to fully insured health maintenance organization (HMO) and preferred provider organization (PPO) members.
- **Precertification requirements apply unless state law expressly dictates otherwise. Effective **January 1, 2016**, the following services no longer require precertification/authorization: outpatient electroconvulsive therapy (ECT), biofeedback and Amytal interview.



48.03.815.1 D (3/17) aetna.com

How to request precertification/authorization

To get precertification/authorization for mental health, substance abuse or behavioral health services, submit an electronic precertification request on our secure provider website on NaviNet® at https://connect.navinet.net.

Register for the site at. Or you can choose any other website that allows precertification requests from our list at www.aetna.com/provider/vendor.

You can also inquire electronically on previously submitted requests.

Open Choice® and Traditional Choice® plans require precertification for inpatient admissions and residential treatment, although they may not have precertification requirements for additional outpatient procedures listed here.

Exceptions to this policy

This policy applies to all Aetna plans with the exception of:

- Behavioral health benefits plans that we administer, but do not manage
- Self-funded plans with plan sponsors who have expressly purchased precertification requirements

For more information about precertification, go to

www.aetnaelectronicprecert.com.

Applies to*: Aetna Choice® POS, Aetna Choice POS II, Aetna Medicare™ Plan (PPO), Aetna Medicare™ Plan (HMO), all Aetna HealthFund® products, Aetna Health Network Only™, Aetna Health Network Option™, Aetna Open Access® Elect Choice®, Aetna Open Access HMO, Aetna Open Access Managed Choice®, Open Access Aetna Select™, Elect Choice, HMO, Managed Choice POS, Traditional Choice, Open Choice, Quality Point-of-Service® (QPOS®) benefits plans, Choose and Save™, Savings Plus, Aetna Select™ benefits plans and all products that may include the Aexcel® networks** and include the designation Aexcel or Aexcel Plus.

- *Not all plans are offered in all service areas. Aetna HealthFund PPO, Aetna HealthFund Managed Choice, Aexcel, Aetna Choice POS, Aetna Choice POS II, Aetna Medicare plans, Aetna Open Access Managed Choice and QPOS benefits plans may include the option for members to elect to go outside the network and receive reduced benefits.
- **Aexcel is not available with HMO plans. Aexcel designation is only a guide to choosing a physician. Members should confer with their existing physicians before making a decision. Designations have the risk of error and should not be the sole basis for selecting a doctor.

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies (Aetna). Aetna Behavioral Health refers to an internal business unit of Aetna.

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