

Aetna Better Health® of Michigan

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Provider Bulletin No 188

AETNA BETTER HEALTH® OF MICHIGAN

TO: Providers
FROM: Provider Experience Team
DATE: June 4, 2021
SUBJECT: Prior Authorization Requirements

Dear Provider,

Effective July 15, 2021, Aetna Better Health of MI will require prior authorization for the following codes J0717, J3380, J0178.

As always, do not hesitate to contact your Aetna Better Health of MI Provider Relations Representative with any questions or comments.

Thanks for all you do!

Sincerely,
Provider Services
Aetna Better Health of MI

CODE	DESCRIPTION
J0717	Injection, certolizumab pegol, 1 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)
J3380	Injection, vedolizumab, 1 mg
J0178	Injection, aflibercept, 1 mg