

INSURANCE NAME PRODUCT LINES	PRE-CERTIFICATION	MAIN NUMBER	CLAIMS	SERVICES REQUIRING	SERVICES REQUIRING	SERVICES REQUIRING
	NUMBER			PRECERTIFICATION	REFERRAL BY PCP (HMO)	NOTIFICATION
AETNA US HEALTHCARE						
2700 Westchester Ave Purchase NY 10577 http://www.aetnahealthcare.com/ HMO Requires PCP referral to specialist AETNA OPEN ACCESS HMO Member can use PCP but has access to participating specialist w/o PCP. QPOS Option of referral by PCP, or self referral to any provider w deductible/ coinsurance USACCESS (POS) In network PCP referral, or self referral w higher copay, or out of network self referral w deduct/ coinsurance GOLDEN MEDICARE PLAN Works like HMO or QPOS for Medicare eligibles ELECT CHOICE (HMO) Requires PCP referral to specialist AETNA OPEN ACCESS - ELECT CHOICE (POS) permits access to participating specialist w/o PCP. MANAGED CHOICE (POS) Option of referral by PCP, or self referral to any provider w deductible/ coinsurance AETNA OPEN ACCESS - MANAGED CHOICE (POS) permits access to participating specialist w/o PCP. OPEN CHOICE (PPO) No PCP selection req. Member has open access to any provider but higher benefits for using participating provider TRADITIONAL CHOICE (INDEMNITY) Member can use any provider for covered benefits. HELPFUL HINTS Most Aetna U.S. Healthcare plans require pre-certification regardless of whether the plan is the primary or secondary payor Pre-certification requirements vary by plan. Refer to member's ID card for information Traditional choice: Member responsible for filing claim unless Assignment of Benefits Form is completed *** Always refer to member's ID card for additional information. Telephone number and claim address may vary by product line ***	HMO and In-network: ELECT CHOICE, QPOS, MANAGED CHOICE, GOLDEN MEDICARE, USACCESS & AETNA OPEN ACCESS			* All elective and urgent admissions * Any procedure without CPT code * Extended care facility admissions * Home health care visits * Selected DME. * All elective out-network care * Elective transportation by ambulance, plane or medical van. * Cosmetic/ reconstructive procedures * Laser-assisted uvulopalatoplasty (LAUPP) * All hospice care (except Medicare) * Injectable drugs not covered under pharmacy * All SPU or ASU procedures * Abdominal laparoscopies * Orthognathic/ temporomandibular joint tx/ surg * Certain obstetrical studies .(L'il Appleseed) * Genetic testing & counsel; infertility. * Major solid organ transplantations * Stem cell transplant * Dental appliances & implants * CT, Spine, MRI Knee & MRI Spine require precert for non HMO based products. * Mental health, substance abuse or beh health (Aetna uses networks contracted with Aetna) * Investigational/ experimental services ** Beginning 11/01/01 all nuclear medicine, MRI/ MRA, CT Scans & PET Scans will need pre-approval from NYMI Imaging Case Management Program (ICM) for commercial based HMO Plans (HMO, QPOS, US.ACCESS, Aetna Open Access & Self Insured HMO Products).** Tel No: 1-888-622-7329 for precerts Claims should be submitted electronically in NSF format or on HCFA 1500 to NYMI Management Services LLC, PO Box 61012, Anaheim, CA '92803	* Rehabilitation (PT, OT, ST) * Pain management services * Cardiac and Pulmonary rehabilitation * All other DME * All other outpatient procedures * All radiology procedures	* Emergency admissions: within 2 business days
	800-245-1206 FAX 860-636-9134	800-722-7315	AETNA US HEALTHCARE 980 Jolly Road Blue Bell PA 19422			
	OUT-OF-NETWORK: QPOS, MANAGED CHOICE, GOLDEN MEDICARE, USACCESS & OPEN CHOICE					
	Member responsible to contact PATIENT CARE MANAGEMENT for Authorization If he/she elects to go out-of-network or self-refer to any provider Otherwise, the admitting physician is responsible for precertification.					
TRADITIONAL CHOICE			Member responsible to contact PATIENT CARE MANAGEMENT for Authorization Refer to member's ID card for phone # and address			