



**Aetna Better Health
PROVIDER NOTIFICATION**

Aetna Better Health of Texas will change the way the following CPT codes will be processed for the following procedures.

If a prior authorization is not submitted the claim will be denied for no authorization.

Please refer to the provider pre-authorization tool
<https://www.aetnabetterhealth.com/texas/providers/prior-authorization.html>
for the most up to date listing of codes requiring a prior authorization

PLEASE NOTE: THIS NEW PROCESS MAY RESULT IN A CHANGE IN HOW YOUR PRACTICE IS REIMBURSED FOR THESE SERVICES.

WE URGE YOU TO THOROUGHLY REVIEW THE INFORMATION IN THIS DOCUMENT AND IN THE ATTACHED POLICY.

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

Sincerely,
Provider Experience
Aetna Better Health of Texas

The following codes will require prior authorization effective May 01, 2022:

Code	Code Description
J2182	Injection, Mepolizumab, 1 mg