

~~June 5, 2025~~ ~~May 22, 2025~~ ~~April 10, 2025~~

Aetna Better Health of Louisiana is making an update to Effective 05/15/2025, prior authorization (PA) requirements ~~will change~~ for the following certain prosthetic and pathology code(s).

~~Effective [XX/XX/XXXX], PA is required for the medical code(s) listed below will require PA by Aetna Better Health of Louisiana for Aetna-ABHLA Louisiana members. Failure to properly request and secure PA may result in a claim denial. Federal and state law, as well as state contract language and Centers for Medicare & Medicaid Services guidelines, including definitions and specific contract provisions/exclusions, take precedence over these PA rules and must be considered first when determining coverage. Non-compliance with new requirements may result in denied claims.~~


~~Precertification/prior authorization requirements will be added for the following code(s):~~ ~~7~~

CODE	CODE CATEGORY	DESCRIPTION
<u>L5782</u>	HCPCS - PROSTHETIC PROCED	Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system, heavy-duty
<u>L6629</u>	HCPCS - PROSTHETIC PROCED	Upper extremity addition, quick disconnect lamination collar with coupling piece, Otto Bock or equal
<u>L6632</u>	HCPCS - PROSTHETIC PROCED	Upper extremity addition, latex suspension sleeve, each
<u>L6680</u>	HCPCS - PROSTHETIC PROCED	Upper extremity addition, test socket, wrist disarticulation or below elbow
<u>L6881</u>	HCPCS - PROSTHETIC PROCED	Automatic grasp feature, addition to upper limb electric prosthetic terminal device
<u>L6882</u>	HCPCS - PROSTHETIC PROCED	Microprocessor control feature, addition to upper limb prosthetic terminal device
<u>L6890</u>	HCPCS - PROSTHETIC PROCED	Addition to upper extremity prosthesis, glove for terminal HCPCS - PROSTHETIC PROCED device, any material, prefabricated, includes fitting and adjustment
<u>L7007</u>	HCPCS - PROSTHETIC PROCED	Electric hand, switch or myoelectric controlled, adult
<u>L7008</u>	HCPCS - PROSTHETIC PROCED	Electric hand, switch or myoelectric, controlled, pediatric
<u>L7009</u>	HCPCS - PROSTHETIC PROCED	Electric hook, switch or myoelectric controlled, adult
<u>L7040</u>	HCPCS - PROSTHETIC PROCED	Prehensile actuator, switch controlled

L7045	HCPCS - PROSTHETIC PROCED	Electric hook, switch or myoelectric controlled, pediatric
L7185	HCPCS - PROSTHETIC PROCED	Electronic elbow, adolescent, Variety Village or equal, switch controlled
L7186	HCPCS - PROSTHETIC PROCED	Electronic elbow, child, Variety Village or equal, switch controlled
L7259	HCPCS - PROSTHETIC PROCED	Electronic wrist rotator, any type
L7400	HCPCS - PROSTHETIC PROCED	Addition to upper extremity prosthesis, below elbow/wrist disarticulation, ultra-light material (titanium, carbon fiber or equal)
L7401	HCPCS - PROSTHETIC PROCED	Addition to upper extremity prosthesis, above elbow disarticulation, ultra-light material (titanium, carbon fiber or equal)
L7402	HCPCS - PROSTHETIC PROCED	Addition to upper extremity prosthesis, shoulder disarticulation/interscapular thoracic, ultra-light material (titanium, carbon fiber or equal)
L7403	HCPCS - PROSTHETIC PROCED	Addition to upper extremity prosthesis, below elbow/wrist disarticulation, acrylic material
L7404	HCPCS - PROSTHETIC PROCED	Addition to upper extremity prosthesis, above elbow disarticulation, acrylic material
L7405	HCPCS - PROSTHETIC PROCED	Addition to upper extremity prosthesis, shoulder disarticulation/interscapular thoracic, acrylic material
L8607	HCPCS - PROSTHETIC PROCED	Injectable bulking agent for vocal cord medialization, 0.1 ml, includes shipping and necessary supplies
L8631	HCPCS - PROSTHETIC PROCED	Metacarpal phalangeal joint replacement, two or more pieces, metal (e.g., stainless steel or cobalt chrome), ceramic-like material (e.g., pyrocarbon), for surgical implantation (all sizes, includes entire system)
P9604	HCPCS - PATH & LAB	Travel allowance, one way in connection with medically necessary laboratory specimen collection drawn from homebound or nursing homebound patient; prorated trip charge
T2013	HCPCS - STATE MEDICAID AGENCY	Habilitation, educational, waiver; per hour

Beginning ~~[XX/XX/XXXX]~~, Precertification/PA is required ~~if the for requests is for cpt codes listed noting any of the above codes.~~

~~To~~ You can request precertification/~~prior authorization~~ PA, you may use through any one of the following methods: 

- Web: Once logged in to via the Availity ~~Essentials Provider Portal at~~ <https://apps.availity.com/web/onboarding/availity-fr-ui/#/loginat> ~~[https://Availity.com] (is this accurate for availity).~~
- Fax:- 1--844-227-9205 (Outpatient) 
- Phone: 1-855-242-0802 (TTY:711)

Not all precertification/~~prior authorization~~ PA requirements for the noted codes are listed herein this notification. Detailed precertification/~~prior authorization~~ PA requirements are available on the ABHLA provider website to providers on at <https://www.aetnabetterhealth.com/louisiana/providers/prior-authorization.html> ~~on the Prior Authorization site tab or.~~ Providers may also call Provider Services at ~~(xxx-xxx-xxxx)~~ **1-855-242-0802** for assistance. ~~with precertification/prior authorization requirements.~~

Federal and state law, as well as state contract language, and Centers for Medicare & Medicaid Services guidelines, including definitions and specific contract provisions/exclusions, take precedence over these PA rules and must be considered first when determining coverage. Non-compliance with new requirements may result in denied claims.

Questions and Support:

For questions, please contact LAProvider@AETNA.com or call 1-855-242-0802 and follow the prompts.