



## **Aetna Better Health® Premier Plan MMAI-** **Provider Notice: New review process for DRG claims**

Dear Providers,

Aetna Better Health® Premier Plan wants to inform providers about a new process for diagnosis-related group (DRG) claims.

For admission dates on or after **September 22<sup>nd</sup>, 2025**, we'll perform pre-payment coding reviews for DRG claims. We want to ensure the claims correctly show the services you provide to our members.

### **Helpful tips to ensure you get paid correctly**

To make sure we review your claims quickly and accurately, please give us the necessary clinical information up front. After we get your claim, we will:

- Review DRG facility claims based on case history.
- Check to ensure the ICD diagnosis and procedure codes show the appropriate DRG was billed.

### **Questions?**

If you have general questions about this communication, please contact our **Provider Experience Department**:

**By Phone:** 1-866-600-2139 (TTY: 711)

**By Email:** [COEProviderServices@aetna.com](mailto:COEProviderServices@aetna.com)