



Aetna Better Health of Kentucky
435 N Whittington Pkwy, Suite 275
Louisville, KY 40223

August 18, 2026

Aetna Better Health® of Kentucky

Review and Alignment of Prior Authorization (PA) Requirements for Select Codes

Effective September 18, 2026, Aetna Better Health of Kentucky is realigning select procedure codes to align with corporate prior authorization (PA) standards.

As part of this initiative, the codes listed below will be updated to remove prior authorization requirements.

Codes Transitioning to PA = No

The following procedure codes will no longer require prior authorization (PA):

- 42975
- 81402
- G0398, G0400
- P9603, P9604
- Q4116

What This Means for Providers

- Prior authorization will not be required for the codes listed above when billed in accordance with applicable guidelines
- Providers should continue to ensure:
 - Services are medically necessary
 - Services are appropriately documented
 - Claims are submitted according to standard billing requirements

You can access ProPAT and additional PA guidance on our provider website: AetnaBetterHealth.com/Kentucky/providers/prior-authorization.html

Codes Transitioning to PA = Yes

The following procedure codes will require prior authorization (PA):

- 22212
- 22216
- 22226
- 21175

What This Means for Providers

Prior authorization will be required for the codes listed above.

Thank you for your valued partnership in caring for our Aetna Better Health of Kentucky Members.

Thank you for your continued partnership in serving Kentucky Medicaid members.

Questions?

If you have general questions about this communication, contact Provider Relations at **1-855-300-5528** (TTY: 711). We're here for you Monday through Friday, 7 AM to 7 PM ET.