

## **AETNA BETTER HEALTH® OF FLORIDA**

### **Referrals and Prior Authorization**

#### **Referrals**

Your Primary Care Provider (PCP) provides most of your health care. Some health care will be given by other doctors. These doctors are called specialists. Your PCP can send you to a specialist. This is called a referral. If you feel you need to see a specialist, talk to your PCP. Your PCP may also set up the referral visit for you.

Let your PCP know about any care you get, so he/she can help with all your care.

#### **Authorizations (Approvals)**

You do not need approval for family planning services. You must get approval to get care from providers that are out of your network for all other services that are not emergencies.

You do not have to get approvals for in-network services. Your doctors will get these approvals. You do not have to pay for **in-network** services that your doctor does not get approved.

#### **Services that need to be approved (including but not limited to):**

Chemo and Radiation Oncology services	Injectables (pain management injections and/or medication given by a shot)
Chiropractic services	Inpatient and observation stays in the hospital
Clinical trials	Orthotics/Prosthetics
Durable Medical Equipment (DME)	Outpatient surgery
Elective sterilization	Prescription drugs over the number limit or not on the preferred drug list
Enteral feeding supplies and formulas, additives, all pumps	Services from providers not in your network
Genetic or infertility counseling or testing services	Sleep studies
Home based services including home nursing, hospice	Supply based services
Hospital services	Therapies, like physical therapy, speech therapy, occupational therapy
Imaging (scans)	

If you have questions or need approval for out-of-network services, you can call Aetna Better Health of Florida toll free at **1-800-470-3555 (Comprehensive Long Term Care) / 1-800-441-5501 (Medicaid) / 1-844-528-5815 (Florida Healthy Kids)**. More info is in your member handbook.

\*\*\*Please Note\*\*\* The above list of services is broad. Specific services that need to be approved are at the code level. Your provider should use the online Prior Authorization Lookup Tool (ProPAT) for clear direction on when a service needs to be approved.