

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 **August 22, 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