



Aetna Better Health[®] of Kansas

Removal of Prior Authorization for Targeted Case Management

Aetna Better Health of Kansas has removed the requirement to obtain prior authorization when billing Healthcare Common Procedure Coding System (HCPCS) code **T1017, Targeted Case Management**, retroactively to dates of service beginning **January 1, 2019**. Providers who received claim denials due to no authorization, do not need to resubmit claims. Aetna Better Health of Kansas will reprocess affected claims.

Updates on the status of claims reprocessing will be available on the KanCare 2.0 Open Claims Resolution Log, Issue #111, available on the KMAP website www.kmap-state-ks.us/Public/homepage.asp under Providers > Bulletins.

Questions?

If you have questions about this communication, please contact Aetna Better Health of Kansas Provider Experience Department at **1-855-221-5656**.