

Skip to main content

- [Contact us](#)
- [Español](#)

•

## • Explore Aetna sites

- [Individuals & Families](#)
- [Affordable Care Act](#)
- [Medicare](#)
- [Medicaid](#)
- [Providers](#)
- [Employers](#)
- [Agents & Brokers](#)
- [Partners](#)
- [Careers](#)
- [About Us](#)

- [Individuals & Families](#)
- [Affordable Care Act](#)
- [Medicare](#)
- [Medicaid](#)
- [Providers](#)
- [Employers](#)
- [Agents & Brokers](#)
- [Partners](#)
- [Careers](#)
- [About Us](#)

- - [Join our network](#)
    - [Precertification overview](#)
    - [Precertification lists and CPT code search](#)
  - [Forms](#)
  - - [Availity provider portal](#)
    - [Update your data](#)
    - [Utilization management](#)
    - [Provider referral directory](#)
    - [Epic payer platform](#)
  - - [Overview](#)
    - [Smart Compare program](#)
    - [HEDIS measurements](#)
    - [Aetna specialty institutes](#)
    - [Aetna Aexcel designation](#)
    - [CAHPS® survey](#)
- - [Claims, payment & reimbursements](#)
  - [Electronic claims](#)
  - [Disputes and appeals](#)
  - [Cost estimator and fee schedules](#)
  - [Pharmacy claims](#)
  - [Dental claims](#)
- - [Pharmacy services](#)
  - [Update pharmacy data](#)
  - [Find prescription drug coverage](#)
- - - [Clinical policy bulletin overview](#)
    - [Medical clinical policy bulletins](#)
    - [Dental clinical policy bulletins](#)
    - [Pharmacy clinical policy bulletins](#)
  - [Forms](#)
  - [Medicare resources](#)
  - - [Overview](#)

- Educational webinars
- Provider manuals
- Behavioral health trainings
- ▪ State regulations
- ▪ Federal regulations
- ◦ OfficeLink updates newsletter
- Podcasts
- Company news

Login

- 
- 
- 
- 
- 
- 

Login

## Working with us

- Join our network

### • Precertification

- Precertification overview
- Precertification lists and CPT code search
- Forms

### • Existing health care professionals

- Availity provider portal
- Update your data
- Utilization management
- Provider referral directory
- Epic payer platform

### • Patient care programs & quality assurance

- Overview
- Smart Compare program
- HEDIS measurements
- Aetna specialty institutes
- Aetna Aexcel designation
- CAHPS® survey

•

## Claims

- Claims, payment & reimbursements
- Electronic claims
- Disputes and appeals
- Cost estimator and fee schedules
- Pharmacy claims
- Dental claims
- 

## Pharmacy

- Pharmacy services

- Update pharmacy data
- Find prescription drug coverage
- 

## Resources

### • Clinical policy bulletins

- Clinical policy bulletin overview
- Medical clinical policy bulletins
- Dental clinical policy bulletins
- Pharmacy clinical policy bulletins
- Forms
- Medicare resources

### • Education, trainings and manuals

- Overview
- Educational webinars
- Provider manuals
- Behavioral health trainings

### • Regulations

- State regulations
- Federal regulations

•

## News and Insights

- OfficeLink updates newsletter
- Podcasts
- Company news
- 

1. ...
2. OfficeLink Updates Newsletters
3. OfficeLink Updates March 2023 – Behavioral Health Updates
4. Behavioral health supervisory billing

## Behavioral health supervisory billing

Aetna® recognizes that high consumer demand for behavioral health services affects its behavioral health network. As part of our effort to support our providers and improve member access to care, Aetna allows supervisory billing for behavioral health care provided by qualified license-eligible behavioral health clinicians.

Note that we will allow supervisory billing only for in-network behavioral health clinicians, supervisors, groups and facilities.

### What is a qualified license-eligible clinician?

Qualified license-eligible clinicians:

- Have completed all educational requirements for their target license type
- Are actively completing their clinical practice hours required for independent licensure
- Are actively receiving clinical supervision from a qualified supervisor at a frequency and duration commensurate with their caseload

**Example:** A clinician graduates with a master's degree in counseling psychology. She has completed all required educational credit hours to sit for her state licensure exam as a Licensed Independent Social Worker (LICSW). She is required to work a minimum number of clinical hours and receive regular clinical supervision prior to taking the exam. She is eligible for supervisory billing if she receives regular supervision from a qualified clinical supervisor.

## What is a qualified clinical supervisor?

Qualified clinical supervisors are independently licensed behavioral health providers actively credentialed and contracted with Aetna individually and/or under a contracted behavioral health group or facility.

**Example:** A supervisor at a Community Mental Health Center (CMHC) provides regular clinical supervision for master's level, license-eligible employees.

## How to manage claims

Providers may submit claims for services delivered by license-eligible clinicians by listing the licensed supervisor as the rendering clinician. The services rendered must be covered under the member's benefits plan and an individual, group or facility contract with Aetna.

Prior authorization is not required for routine outpatient services such as psychotherapy and medication management.

## Questions?

If you have questions, please call the Provider Contact Center at **1-888-MD AETNA (1-888-632-3862)**\$(tty).

## Legal notices

Aetna is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company and its affiliates (Aetna).

Health benefits and health insurance plans contain exclusions and limitations.

See all legal notices

Also of interest:

- 
- 
-

- 
- AETNA APPS
- CAREERS
- FAQs
- GLOSSARY
- ACCESSIBILITY SERVICES
- PLAN DISCLOSURES
- PROGRAM PROVISIONS
- GRIEVANCE FORM
- NEWS AND ANALYSIS
- HEALTH CARE REFORM
- INVESTOR INFO
- SITE MAP
- TERMS OF USE
- LEGAL NOTICES
- PRIVACY CENTER
- FRAUD, WASTE & ABUSE
- NONDISCRIMINATION NOTICE
- VULNERABILITY DISCLOSURE PROGRAM

©[current-year] Aetna Inc.

For language services, please call the number on your member ID card and request an operator. For other language services: Español-Spanish | Tiếng Việt | Tagalog | Русский | العربية | Kreyòl | Français | Polski | Português | Italiano | Deutsch | فارسی | Other languages ...

## You are now being directed to the AMA site

Links to various non-Aetna sites are provided for your convenience only. Aetna Inc. and its affiliated companies are not responsible or liable for the content, accuracy or privacy practices of linked sites, or for products or services described on these sites.

Continue

## You are now being directed to the Give an Hour site

Links to various non-Aetna sites are provided for your convenience only. Aetna Inc. and its affiliated companies are not responsible or liable for the content, accuracy or privacy practices of linked sites, or for products or services described on these sites.

Continue

## You are now being directed to the CVS Pharmacy® site

Links to various non-Aetna sites are provided for your convenience only. Aetna Inc. and its affiliated companies are not responsible or liable for the content, accuracy or privacy practices of linked sites, or for products or services described on these sites.

Continue

## You are now being directed to the CDC site

Links to various non-Aetna sites are provided for your convenience only. Aetna Inc. and its its affiliated companies are not responsible or liable for the content, accuracy or privacy practices of linked sites, or for products or services described on these sites.

Continue

## **Aetna® is proud to be part of the CVS Health family.**

You are now being directed to the CVS Health site.

Continue

## **You are now being directed to the Apple.com COVID-19 Screening Tool**

Links to various non-Aetna sites are provided for your convenience only. Aetna Inc. and its affiliated companies are not responsible or liable for the content, accuracy, or privacy practices of linked sites, or for products or services described on these sites.

Continue

## **You are now being directed to the US Department of Health and Human Services site**

Links to various non-Aetna sites are provided for your convenience only. Aetna Inc. and its affiliated companies are not responsible or liable for the content, accuracy, or privacy practices of linked sites, or for products or services described on these sites.

Continue

## **You are now being directed to the CVS Health COVID-19 testing site**

Links to various non-Aetna sites are provided for your convenience only. Aetna Inc. and its affiliated companies are not responsible or liable for the content, accuracy, or privacy practices of linked sites, or for products or services described on these sites.

Continue

## **You are now being directed to The Fight Is In Us site**

Links to various non-Aetna sites are provided for your convenience only. Aetna Inc. and its affiliated companies are not responsible or liable for the content, accuracy, or privacy practices of linked sites, or for products or services described on these sites.

Continue

## **You are now leaving the Aetna® website**

Links to various non-Aetna sites are provided for your convenience only. Aetna Inc. and its affiliated companies are not responsible or liable for the content, accuracy, or privacy practices of linked sites, or for products or services described on these sites.

Continue

## **Login**

Please log in to your secure account to get what you need.

Continue

## **You are now leaving the Aetna Medicare website.**

The information you will be accessing is provided by another organization or vendor. If you do not intend to leave our site, close this message.

Continue

## Get a link to download the app

Just enter your mobile number and we'll text you a link to download the Aetna Health<sup>SM</sup> app from the App Store or on Google Play.

Message and data rates may apply\*

**Error or missing data. Please check your entries for an error message.**

MOBILE NUMBER Please be sure to add a 1 before your mobile number, ex: 19876543210

## This search uses the five-tier version of this plan

Each main plan type has more than one subtype. Some subtypes have five tiers of coverage. Others have four tiers, three tiers or two tiers. This search will use the five-tier subtype. It will show you whether a drug is covered or not covered, but the tier information may not be the same as it is for your specific plan. Do you want to continue?

back

Continue

## Applied Behavior Analysis Medical Necessity Guide

**By clicking on "I Accept", I acknowledge and accept that:**

The Applied Behavior Analysis (ABA) Medical Necessity Guide helps determine appropriate (medically necessary) levels and types of care for patients in need of evaluation and treatment for behavioral health conditions. The ABA Medical Necessity Guide does not constitute medical advice. Treating providers are solely responsible for medical advice and treatment of members. Members should discuss any matters related to their coverage or condition with their treating provider.

Each benefit plan defines which services are covered, which are excluded, and which are subject to dollar caps or other limits. Members and their providers will need to consult the member's benefit plan to determine if there are any exclusions or other benefit limitations applicable to this service or supply.

The conclusion that a particular service or supply is medically necessary does not constitute a representation or warranty that this service or supply is covered (i.e., will be paid for by Aetna) for a particular member. The member's benefit plan determines coverage. Some plans exclude coverage for services or supplies that Aetna considers medically necessary.

Please note also that the ABA Medical Necessity Guide may be updated and are, therefore, subject to change.

Medical necessity determinations in connection with coverage decisions are made on a case-by-case basis. In the event that a member disagrees with a coverage determination, member may be eligible for the right to an internal appeal and/or an independent external appeal in accordance with applicable federal or state law.

I Accept

## Aetna® is proud to be part of the CVS® family.

You are now being directed to CVS Caremark® site.

Continue

## ASAM Terms and conditions

By clicking on "I accept", I acknowledge and accept that:

Licensee's use and interpretation of the American Society of Addiction Medicine's ASAM Criteria for Addictive, Substance-Related, and Co-Occurring Conditions does not imply that the American Society of Addiction Medicine has either participated in or concurs with the disposition of a claim for benefits.

This excerpt is provided for use in connection with the review of a claim for benefits and may not be reproduced or used for any other purpose.

Copyright 2015 by the American Society of Addiction Medicine. Reprinted with permission. No third party may copy this document in whole or in part in any format or medium without the prior written consent of ASAM.

I accept

## Precertification lists

By clicking on "I accept", I acknowledge and accept that:

Should the following terms and conditions be acceptable to you, please indicate your agreement and acceptance by selecting the button below labeled "I Accept".

- The term precertification here means the utilization review process to determine whether the requested service, procedure, prescription drug or medical device meets the company's clinical criteria for coverage. It does not mean precertification as defined by Texas law, as a reliable representation of payment of care or services to fully insured HMO and PPO members.
- Applies to: Aetna Choice<sup>®</sup> POS, Aetna Choice POS II, Aetna Medicare<sup>SM</sup> Plan (PPO), Aetna Medicare Plan (HMO), all Aetna HealthFund<sup>®</sup> products, Aetna Health Network Only<sup>SM</sup>, Aetna Health Network Option<sup>SM</sup>, Aetna Open Access<sup>®</sup> Elect Choice<sup>®</sup>, Aetna Open Access HMO, Aetna Open Access Managed Choice<sup>®</sup>, Open Access Aetna Select<sup>SM</sup>, Elect Choice, HMO, Managed Choice POS, Open Choice<sup>®</sup>, Quality Point-of-Service<sup>®</sup> (QPOS<sup>®</sup>), and Aetna Select<sup>SM</sup> benefits plans and all products that may include the Aexcel<sup>®</sup>, Choose and Save<sup>SM</sup>, Aetna Performance Network or Savings Plus networks. Not all plans are offered in all service areas.
- All services deemed "never effective" are excluded from coverage. Aetna defines a service as "never effective" when it is not recognized according to professional standards of safety and effectiveness in the United States for diagnosis, care or treatment. Visit the secure website, available through [www.aetna.com](http://www.aetna.com), for more information. Click on "Claims," "CPT/HCPSC Coding Tool," "Clinical Policy Code Search."
- The five character codes included in the Aetna Precertification Code Search Tool are obtained from Current Procedural Terminology (CPT<sup>®</sup>), copyright 2022 by the American Medical Association (AMA). CPT is developed by the AMA as a listing of descriptive terms and five character identifying codes and modifiers for reporting medical services and procedures performed by physicians.
- The responsibility for the content of Aetna Precertification Code Search Tool is with Aetna and no endorsement by the AMA is intended or should be implied. The AMA disclaims responsibility for any consequences or liability attributable or related to any use, nonuse or interpretation of information contained in Aetna Precertification Code Search Tool. No fee schedules, basic unit values, relative value guides, conversion factors or scales are included in any part of CPT. Any use of CPT outside of Aetna Precertification Code Search Tool should refer to the most Current Procedural Terminology which contains the complete and most current listing of CPT codes and descriptive terms. Applicable FARS/DFARS apply.

### LICENSE FOR USE OF CURRENT PROCEDURAL TERMINOLOGY, FOURTH EDITION ("CPT<sup>®</sup>")

- CPT only Copyright 2022 American Medical Association. All Rights Reserved. CPT is a registered trademark of the American Medical Association. You, your employees and agents are authorized to use CPT only as contained in Aetna Precertification Code Search Tool solely for your own personal use in directly participating in health care programs administered by Aetna, Inc. You acknowledge that AMA holds all copyright, trademark and other rights in CPT. Any use not authorized herein is prohibited, including by way of illustration and not by way of limitation, making copies of CPT for resale



and/or license, transferring copies of CPT to any party not bound by this agreement, creating any modified or derivative work of CPT, or making any commercial use of CPT. License to sue CPT for any use not authorized herein must be obtained through the American Medical Association, CPT Intellectual Property Services, 515 N. State Street, Chicago, Illinois 60610. Applications are available at the American Medical Association Web site, [www.ama-assn.org/go/cpt](http://www.ama-assn.org/go/cpt).

## U.S. Government Rights

- This product includes CPT which is commercial technical data and/or computer data bases and/or commercial computer software and/or commercial computer software documentation, as applicable which were developed exclusively at private expense by the American Medical Association, 515 North State Street, Chicago, Illinois, 60610. U.S. Government rights to use, modify, reproduce, release, perform, display, or disclose these technical data and/or computer data bases and/or computer software and/or computer software documentation are subject to the limited rights restrictions of DFARS 252.227-7015(b)(2) (June 1995) and/or subject to the restrictions of DFARS 227.7202-1(a) (June 1995) and DFARS 227.7202-3(a) (June 1995), as applicable for U.S. Department of Defense procurements and the limited rights restrictions of FAR 52.227-14 (June 1987) and/or subject to the restricted rights provisions of FAR 52.227-14 (June 1987) and FAR 52.227-19 (June 1987), as applicable, and any applicable agency FAR Supplements, for non-Department of Defense Federal procurements.

## Disclaimer of Warranties and Liabilities.

- CPT is provided "as is" without warranty of any kind, either expressed or implied, including but not limited to the implied warranties of merchantability and fitness for a particular purpose. No fee schedules, basic unit, relative values or related listings are included in CPT. The American Medical Association (AMA) does not directly or indirectly practice medicine or dispense medical services. The responsibility for the content of this product is with Aetna, Inc. and no endorsement by the AMA is intended or implied. The AMA disclaims responsibility for any consequences or liability attributable to or related to any use, non-use, or interpretation of information contained or not contained in this product.
- This Agreement will terminate upon notice if you violate its terms. The AMA is a third party beneficiary to this Agreement.
- Should the foregoing terms and conditions be acceptable to you, please indicate your agreement and acceptance by selecting the button labeled "I Accept".
- The information contained on this website and the products outlined here may not reflect product design or product availability in Arizona. Therefore, Arizona residents, members, employers and brokers must contact Aetna directly or their employers for information regarding Aetna products and services.
- This information is neither an offer of coverage nor medical advice. It is only a partial, general description of plan or program benefits and does not constitute a contract. In case of a conflict between your plan documents and this information, the plan documents will govern.

I accept

## Dental clinical policy bulletins

By clicking on "I accept", I acknowledge and accept that:

- Aetna Dental Clinical Policy Bulletins (DCPBs) are developed to assist in administering plan benefits and do not constitute dental advice. Treating providers are solely responsible for dental advice and treatment of members. Members should discuss any Dental Clinical Policy Bulletin (DCPB) related to their coverage or condition with their treating provider.
- While the Dental Clinical Policy Bulletins (DCPBs) are developed to assist in administering plan benefits, they do not constitute a description of plan benefits. The Dental Clinical Policy Bulletins (DCPBs) describe Aetna's current determinations of whether certain services or supplies are medically necessary, based upon a review of available clinical information. Each benefit plan defines which services are covered, which are excluded, and which are subject to dollar caps or other limits. Members and their providers will need to consult the member's benefit plan to determine if there are any exclusions or other benefit limitations applicable to this service or supply. Aetna's conclusion that a particular service or supply is medically necessary does not constitute a representation or warranty that this service or supply is covered (i.e., will be paid for by Aetna). Your benefits plan determines coverage. Some plans exclude coverage for services or supplies that Aetna considers medically necessary. If there is a discrepancy between this policy and a member's plan of benefits,

the benefits plan will govern. In addition, coverage may be mandated by applicable legal requirements of a State or the Federal government.

- Please note also that Dental Clinical Policy Bulletins (DCPBs) are regularly updated and are therefore subject to change.
- Since Dental Clinical Policy Bulletins (DCPBs) can be highly technical and are designed to be used by our professional staff in making clinical determinations in connection with coverage decisions, members should review these Bulletins with their providers so they may fully understand our policies.
- Under certain plans, if more than one service can be used to treat a covered person's dental condition, Aetna may decide to authorize coverage only for a less costly covered service provided that certain terms are met.

I accept

## Medical clinical policy bulletins

By clicking on "I accept", I acknowledge and accept that:

Should the following terms and conditions be acceptable to you, please indicate your agreement and acceptance by selecting the button below labeled "I Accept".

- Aetna Clinical Policy Bulletins (CPBs) are developed to assist in administering plan benefits and do not constitute medical advice. Treating providers are solely responsible for medical advice and treatment of members. Members should discuss any Clinical Policy Bulletin (CPB) related to their coverage or condition with their treating provider.
- While the Clinical Policy Bulletins (CPBs) are developed to assist in administering plan benefits, they do not constitute a description of plan benefits. The Clinical Policy Bulletins (CPBs) express Aetna's determination of whether certain services or supplies are medically necessary, experimental and investigational, or cosmetic. Aetna has reached these conclusions based upon a review of currently available clinical information (including clinical outcome studies in the peer-reviewed published medical literature, regulatory status of the technology, evidence-based guidelines of public health and health research agencies, evidence-based guidelines and positions of leading national health professional organizations, views of physicians practicing in relevant clinical areas, and other relevant factors).
- Aetna makes no representations and accepts no liability with respect to the content of any external information cited or relied upon in the Clinical Policy Bulletins (CPBs). The discussion, analysis, conclusions and positions reflected in the Clinical Policy Bulletins (CPBs), including any reference to a specific provider, product, process or service by name, trademark, manufacturer, constitute Aetna's opinion and are made without any intent to defame. Aetna expressly reserves the right to revise these conclusions as clinical information changes, and welcomes further relevant information including correction of any factual error.
- CPBs include references to standard HIPAA compliant code sets to assist with search functions and to facilitate billing and payment for covered services. New and revised codes are added to the CPBs as they are updated. When billing, you must use the most appropriate code as of the effective date of the submission. Unlisted, unspecified and nonspecific codes should be avoided.
- Each benefit plan defines which services are covered, which are excluded, and which are subject to dollar caps or other limits. Members and their providers will need to consult the member's benefit plan to determine if there are any exclusions or other benefit limitations applicable to this service or supply. The conclusion that a particular service or supply is medically necessary does not constitute a representation or warranty that this service or supply is covered (i.e., will be paid for by Aetna) for a particular member. The member's benefit plan determines coverage. Some plans exclude coverage for services or supplies that Aetna considers medically necessary. If there is a discrepancy between a Clinical Policy Bulletin (CPB) and a member's plan of benefits, the benefits plan will govern.
- In addition, coverage may be mandated by applicable legal requirements of a State, the Federal government or CMS for Medicare and Medicaid members.

See CMS's Medicare Coverage Center

- Please note also that Clinical Policy Bulletins (CPBs) are regularly updated and are therefore subject to change.
- Since Clinical Policy Bulletins (CPBs) can be highly technical and are designed to be used by our professional staff in making clinical determinations in connection with coverage decisions, members should review these Bulletins with their providers so they may fully understand our policies.
- While Clinical Policy Bulletins (CPBs) define Aetna's clinical policy, medical necessity determinations in connection with coverage decisions are made on a case by case basis. In the event that a member disagrees with a coverage determination, Aetna provides its members with the right to appeal the decision. In addition, a member may have an opportunity for an independent external review of coverage denials based on medical necessity or regarding the experimental and investigational status when the service or supply in question for which the member is financially

responsible is \$500 or greater. However, applicable state mandates will take precedence with respect to fully insured plans and self-funded non-ERISA (e.g., government, school boards, church) plans.

See Aetna's External Review Program

- The five character codes included in the Aetna Clinical Policy Bulletins (CPBs) are obtained from Current Procedural Terminology (CPT®), copyright 2015 by the American Medical Association (AMA). CPT is developed by the AMA as a listing of descriptive terms and five character identifying codes and modifiers for reporting medical services and procedures performed by physicians.
- The responsibility for the content of Aetna Clinical Policy Bulletins (CPBs) is with Aetna and no endorsement by the AMA is intended or should be implied. The AMA disclaims responsibility for any consequences or liability attributable or related to any use, nonuse or interpretation of information contained in Aetna Clinical Policy Bulletins (CPBs). No fee schedules, basic unit values, relative value guides, conversion factors or scales are included in any part of CPT. Any use of CPT outside of Aetna Clinical Policy Bulletins (CPBs) should refer to the most current Current Procedural Terminology which contains the complete and most current listing of CPT codes and descriptive terms. Applicable FARS/DFARS apply.

#### LICENSE FOR USE OF CURRENT PROCEDURAL TERMINOLOGY, FOURTH EDITION ("CPT®")

CPT only copyright 2015 American Medical Association. All Rights Reserved. CPT is a registered trademark of the American Medical Association.

You, your employees and agents are authorized to use CPT only as contained in Aetna Clinical Policy Bulletins (CPBs) solely for your own personal use in directly participating in healthcare programs administered by Aetna, Inc. You acknowledge that AMA holds all copyright, trademark and other rights in CPT.

Any use not authorized herein is prohibited, including by way of illustration and not by way of limitation, making copies of CPT for resale and/or license, transferring copies of CPT to any party not bound by this agreement, creating any modified or derivative work of CPT, or making any commercial use of CPT. License to use CPT for any use not authorized herein must be obtained through the American Medical Association, CPT Intellectual Property Services, 515 N. State Street, Chicago, Illinois 60610. Applications are available at the American Medical Association Web site, [www.ama-assn.org/go/cpt](http://www.ama-assn.org/go/cpt).

Go to the American Medical Association Web site

#### U.S. Government Rights

This product includes CPT which is commercial technical data and/or computer data bases and/or commercial computer software and/or commercial computer software documentation, as applicable which were developed exclusively at private expense by the American Medical Association, 515 North State Street, Chicago, Illinois, 60610. U.S. Government rights to use, modify, reproduce, release, perform, display, or disclose these technical data and/or computer data bases and/or computer software and/or computer software documentation are subject to the limited rights restrictions of DFARS 252.227-7015(b)(2) (June 1995) and/or subject to the restrictions of DFARS 227.7202-1(a) (June 1995) and DFARS 227.7202-3(a) (June 1995), as applicable for U.S. Department of Defense procurements and the limited rights restrictions of FAR 52.227-14 (June 1987) and/or subject to the restricted rights provisions of FAR 52.227-14 (June 1987) and FAR 52.227-19 (June 1987), as applicable, and any applicable agency FAR Supplements, for non-Department of Defense Federal procurements.

#### Disclaimer of Warranties and Liabilities.

CPT is provided "as is" without warranty of any kind, either expressed or implied, including but not limited to the implied warranties of merchantability and fitness for a particular purpose. No fee schedules, basic unit, relative values or related listings are included in CPT. The American Medical Association (AMA) does not directly or indirectly practice medicine or dispense medical services. The responsibility for the content of this product is with Aetna, Inc. and no endorsement by the AMA is intended or implied. The AMA disclaims responsibility for any consequences or liability attributable to or related to any use, non-use, or interpretation of information contained or not contained in this product.

This Agreement will terminate upon notice if you violate its terms. The AMA is a third party beneficiary to this Agreement.

Should the foregoing terms and conditions be acceptable to you, please indicate your agreement and acceptance by selecting the button labeled "I Accept".

The information contained on this website and the products outlined here may not reflect product design or product availability in Arizona. Therefore, Arizona residents, members, employers and brokers must contact Aetna directly or their employers for information regarding Aetna products and services.

This information is neither an offer of coverage nor medical advice. It is only a partial, general description of plan or program benefits and does not constitute a contract. In case of a conflict between your plan documents and this information, the plan documents will govern.

I accept

**You are now leaving the Aetna® website.**

We're working with 3Won to process your request for participation. Please select "Continue to ProVault to begin the contracting and credentialing process.

Links to various non-Aetna sites are provided for your convenience only. Aetna Inc. and its affiliates are not responsible or liable for the content, accuracy or privacy practices of linked sites, or for products or services described on these sites.

Continue to ProVault