

Provider notice

Change in radiology prior authorization request



Dear Provider,

Effective October 1, 2025, authorization responsibility for the following procedure codes will transition from our vendor, eviCore, to Aetna Better Health of Michigan. These codes will no longer be delegated to eviCore for prior authorization review.

Impacted Procedure Codes:

0200T	PERQ SACRAL AUGMENT UNI +-BALLOON/DEVICE 1+NDL
0201T	PERQ SACRAL AUGMENTATION BI +-BALO/DEVICE 2+NDL
22510	PERQ VERTEBROPLASTY UNI BI INJX CERVICOTHORACIC
22511	PERQ VERTEBROPLASTY UNI BI INJECTION LUMBOSACRAL
22512	VERTEBROPLASTY EACH ADDL CERVICOTHOR LUMBOSACRAL
22513	ERQ VERT AGMNTJ CAVITY CRTJ UNI BI CANNULATION
22514	PERQ VERT AGMNTJ CAVITY CRTJ UNI BI CANNULJ LMBR
22515	PERQ VERT AGMNTJ CAVITY CRTJ UNI BI CANNULJ EACH
62292	NJX CHEMONUCLEOLSS DISKOGRAPY 1+ LMBR

Please submit prior authorization requests for these codes directly to Aetna Better Health of Michigan using one of the following methods:

• Phone: **1-866-874-2567**

• Fax: **866-603-5535**

Online Portal: [Availity](#)

If you have any questions or need assistance, please contact our Prior Authorization department using the contact information above.

Sincerely,

Aetna Better Health of Michigan
Provider Relations Team

AetnaBetterHealth.com/Michigan

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Aetna Better Health of Michigan