



Delivered Via Electronic Mail

Mary Moffitt, M.D.  
Chief Medical Officer  
**Aetna - CVS Health**  
151 Farmington Ave  
Hartford, CT 06156

**RE: Prior Authorization for Peripheral Vascular Interventions**

Dear Dr. Moffitt:

The American College of Cardiology (ACC) and the Society for Cardiovascular Angiography and Interventions (SCAI) were recently informed that Aetna will require prior authorization through contractor, eviCore for peripheral vascular interventions effective on September 1, 2023. We are concerned with the lack of understanding of the upcoming requirement by our members and their practices. Numerous members experienced with peripheral vascular disease stated that they were unaware of this new prior authorization mandate. While we appreciate that Aetna recently provided clarification that notice of this policy change was published in its June provider bulletin, we found this information remained challenging to obtain. We have no doubt that our clinicians and their staff also had trouble learning that a significant change was impending. More recently eviCore shared their coverage criteria for our review and accepted several recommended modifications we maintain that the field will need more time to digest these material changes.

Specifically, even with this member feedback and pending criteria review, we believe that most of our membership remains unaware and unprepared for the new prior authorization policy. Thus, we are greatly concerned that the September implementation date will have significant unintended consequences including inappropriate claim denials and subsequent appeals as well as the added administrative burden to the clinician and practice which could lead to a delay or cancellation in the necessary patient care.

The ACC and the SCAI strongly encourage Aetna to implement a 60-day period in which any claims that would be potentially denied for lacking prior authorization would instead be paid out but also trigger a formal notice from Aetna to the clinician that this procedure now requires prior authorization through eviCore. This would serve as a time of clinician and practice education and workflow adjustments while eliminating a burdensome appeals process for all parties.

Finally, we plan to work with eviCore and provide feedback on the following: 1) clinical review of their guidelines and 2) appropriate prior authorization grouping of CPT codes. We have significant concern that improper CPT groupings would require clinicians to retroactively modify and authorize procedures with eviCore post-intervention. Our members often attain prior authorization for a procedure only to

find mid-procedure that additional or alternative services are needed for optimal patient care. Such a change would require a new or modified prior authorization post-procedure or a denied claim appeal.

The American College of Cardiology and the Society for Cardiovascular Angiography and Interventions look forward to working with Aetna and eviCore in review and streamlining the implementation of this new policy. If you have any questions, please feel free to contact Kristin Christensen at [kchristensen@acc.org](mailto:kchristensen@acc.org) or 202.375.6968.

Sincerely,

A handwritten signature in black ink, appearing to read "Hadley Wilson". The signature is fluid and cursive, with a prominent loop at the end.

**B. Hadley Wilson, M.D., F.A.C.C.**  
President  
American College of Cardiology

A handwritten signature in black ink, appearing to read "George Dangas". The signature is cursive and somewhat stylized, with a long horizontal stroke at the end.

**George Dangas, M.D., Ph.D., M.S.C.A.I.**  
President  
Society for Cardiovascular Angiography and Interventions