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Real-time precertification status messages

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Below is a list of possible status messages when submitting Precertification Add, Notification or Inquiry transactions. For help on these messages, follow the directions in the "Action" column. Or you may contact your vendor or clearinghouse. You can also send us an e-mail using the "Contact Us" link on **www.aetna.com**.

Status or action message	Possible reasons for error	Action
Authorization/ Access Restrictions (AAA = 41)	Inquiry transaction only: We are unable to find the National Provider Identifier (NPI) submitted for the requesting provider in any of the member's existing precertification events. Therefore, the requesting provider does not have privilege to inquire on the member's information.	Please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and preferred provider organization (PPO)-based benefits plans. • **1-800-624-0756** for calls related to health maintenance organization (HMO)-based benefits plans.
Authorization Number Not Found (AAA = AA)	The Certification Number submitted is not valid or found in the database.	Verify the Certification Number and submitted member ID and resubmit the request. If entered correctly, please call the appropriate number below and select the option for precertification: • **1-888-MD AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans. OR Enter the request without the Certification Number.
Cancelled No Prior Approval (HCR01/03 = C/0N) + message	Inquiry transaction only: This error will always be accompanied with the following message: THE EVENT ASSOCIATED WITH THIS REFERENCE NUMBER HAS BEEN VOIDED OR IS INCOMPLETE	For any questions on medical review decisions, please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.

Status or action message	Possible reasons for error	Action
Certification Information Does Not Match Patient (AAA = CI)	The Certification Number submitted does not correspond with the member ID submitted with the request.	Enter the correct Certification Number. Enter the request without the Certification Number. Please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.
Certified in Total (HCR01 = A1)	Not applicable	No further action required.
Certified-Partial (HCR01 = A2)	Not applicable	Please review decision for each service to determine what has been certified in total, pended or not certified.
Contact Payer (HCR01 = CT)	The procedure code entered may be considered experimental, cosmetic or investigational. The error will always be accompanied with the following message: THE REQUESTED SERVICE DOES NOT REQUIRE PRECERTIFICATION BUT MAY NOT BE ELIGIBLE FOR COVERAGE UNDER THE MEMBERS PLAN PLEASE REFER TO ONLINE CLINICAL POLICY BULLETINS USING THE AETNA WEBSITE AND CONTACT PROVIDER SERVICES Inquiry transaction only: Internal processing is requesting that the provider contact Patient Management.	Refer to **www.aetna.com/health-care-professionals/clinical-policy-bulletins.html** or contact the Provider Service Center using the telephone numbers below. For any questions on medical review decisions, please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.
Date of Birth follows Date of Service or Date of Admission (AAA = 60)	The date of birth is later than the date of service or admission date.	Verify the date of service and/or the date of admission and resubmit the request.

Status or action message	Possible reasons for error	Action
Date of Service Not within Allowable Inquiry Period **Resubmission Not Allowed** (AAA = 62)	The date of service is greater than 30 days from the date of the transaction request.	Resubmit the request when the actual date of the admission or service is less than 30 days away.
Duplicate Patient ID Number (AAA = 68)	More than 50 members were identified. Multiple patients/members found. Multiple matches on family member.	Please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.
Input Error **Please Correct and Resubmit** (AAA = 33)	The data submitted was not valid when processed: • Length of stay was >99 days. • Number of units was >999. • Invalid place of service code. • Invalid service/bed type. • Provider role was not valid for the service requested. • Invalid procedure code was submitted for the selected place of service. • ICD-9 and ICD-10 codes were submitted in the same transaction. • Diagnosis code was invalid or missing from the request.	Please correct the data and resubmit the request. In most instances, the response will display the error code. If you are unable to determine the reason for the error, please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.
Invalid/Missing Date-of-Birth (AAA = 58)	Date is not in valid format.	Correct the date format and resubmit the request.
Invalid/Missing Date(s) of Service **Please Correct and Resubmit** (AAA = 57)	Date is not in valid format. Date is (+ or –) 365 days from transaction date.	Correct date format and resubmit the request. If service date is greater than 1 year (365 days) after transaction date or greater than 1 year (365 days) before transaction date, please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.

Status or action message	Possible reasons for error	Action
Invalid/Missing Diagnosis Code(s) (AAA = AF)	The ICD-10 diagnosis code submitted was not valid for submission at the time of the transaction request. The submitted ICD-9 diagnosis code is considered invalid after an equivalent ICD-10 diagnosis code was made available.	Please correct the data and resubmit the transaction. In most instances, the response will display the error code. If you are unable to determine the reason for the error, please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.
Invalid/Missing Patient ID **Please Correct and Resubmit** (AAA = 64)	Invalid patient ID • Ensure you are not entering a letter "O" instead of a "zero" or a letter "I" instead of a number "1."	Verify you are entering the correct member ID. Please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.
Invalid/Missing Procedure Code (AAA = AG)	The ICD-10 or ICD-9 procedure code submitted was not valid for submission at the time of the transaction request.	Please correct the data and resubmit the transaction. In most instances, the response will display the error code. If you are unable to determine the reason for the error, please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.
Modified (HCR01 = A6)	The length of stay that was originally requested was modified based on Aetna's internal processing guidelines.	We changed the requested number of days for an inpatient admission. For any questions on medical decision outcomes, please call the appropriate number below and select the option for precertification: • **1-888-MD AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.

Status or action message	Possible reasons for error	Action
No Action Required (HCR01 = NA)	The services requested do not require precertification. The error will always be accompanied with the following message: NO PRECERT REQUIRED PLEASE REFER TO THE PROVIDER CODE SEARCH TOOL ON AETNA WEBSITE THE REQUESTED SERVICE MAY NOT BE ELIGIBLE FOR COVERAGE REFER TO ONLINE CLINICAL POLICY BULLETINS USING AETNA WEBSITE OR CONTACT PROVIDER SERVICES	No action needed, but please review instructions returned in message.
No Certification Information Found (AAA = NC)	Inquiry transaction only: No patient event history was located for the member identified on the request.	Verify the member ID and resubmit the request. If entered correctly, please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.
Not Certified **Certification Responsibility of External Review Organization** (HCR01/03 = A3/0J)	Member ID processed is associated with a delegated group. The services being requested have been delegated for utilization management. Will often be accompanied with the phone number for the external Utilization Management Organization responsible for the member's care.	Call the delegated group (external review organization) associated with this member, or call the telephone number returned in the message. For high-tech radiology procedures, contact the appropriate delegated entity for your area: **MedSolutions** **1-888-693-3211** **www.medsolutionsonline.com** **CareCore** **1-888-647-5940** (Northern NJ) **1-888-622-7329** (Metro NY) **www.carecorenational.com** Or view **www.aetna.com/health-care-professionals/precertification/precertification-lists.html** for additional information.
Not Certified **Duplicate Request** (HCR01/03 = A3/0Q)	A similar current or upcoming event already exists. You might see this message when there is a readmission request within three days of a previous admission. The error will sometimes be accompanied with the following message: POSSIBLE DUPLICATE REQUEST PLEASE CALL AETNA FOR ANY READMISSIONS WITHIN 3 DAYS OF PREVIOUS INPATIENT STAY	Please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.

Status or action message	Possible reasons for error	Action
Not Certified **Inconsistent with Patient's Gender** (HCR01/03 = A3/0Z)	Maternity services will only be processed for females.	For any questions on medical decision outcomes, please call the appropriate number below and select the option for precertification: • **1–888–MD–AETNA (1–888–632–3862)** for calls related to indemnity and PPO-based benefits plans. • **1–800–624–0756** for calls related to HMO-based benefits plans.
Not Certified **Level of Care Not Appropriate** (HCR01/03 = A3/0G)	The place of service entered on the request indicated an ambulatory setting. The place of service, or bed type, was considered Medical, but the member has Behavioral Health benefits only. Neither the Attending provider nor the services submitted were related to Behavioral Health.	Resubmit the request using an inpatient place of service value (21, 31, 34, 51, 55 or 56). Please resubmit using Behavioral Health related data for the place of service or services. Please resubmit using a Behavioral Health related Attending provider or Behavioral Health related services. Or please call the appropriate number below and select the option for precertification: • **1–888–MD–AETNA (1–888–632–3862)** for calls related to indemnity and PPO-based benefits plans. • **1–800–624–0756** for calls related to HMO-based benefits plans.
Not Certified **No Prior Approval** (HCR01/03 = A3/0N)	The services were not certified. The error will always be accompanied with the following message: SEE CORRESPONDENCE FOR DETAILS	For any questions on medical decision outcomes, please call the appropriate number below and select the option for precertification: • **1–888–MD–AETNA (1–888–632–3862)** for calls related to indemnity and PPO-based benefits plans. • **1–800–624–0756** for calls related to HMO-based benefits plans.
Not Certified **Service Inconsistent with Diagnosis** (HCR01/03 = A3/0R)	Maternity events must include both maternity diagnosis and procedure codes.	Correct data entry, or call the appropriate number below and select the option for precertification: • **1–888–MD–AETNA (1–888–632–3862)** for calls related to indemnity and PPO-based benefits plans. • **1–800–624–0756** for calls related to HMO-based benefits plans.
Patient Birth Date Does Not Match That for the Patient in the Database (AAA = 71)	An invalid birth date was submitted.	Verify the date of birth and resubmit the request. Please call the appropriate number below and select the option for precertification: • **1–888–MD–AETNA (1–888–632–3862)** for calls related to indemnity and PPO-based benefits plans. • **1–800–624–0756** for calls related to HMO-based benefits plans.

Status or action message	Possible reasons for error	Action
Not Certified **Services Were Not Considered Due to Other Errors in the Request** (HCR01/03 = A3/25)	The request has been rejected due to other reasons within the same response.	Please evaluate the entire response to identify the root cause for the rejection, correct the errors and resubmit the request.
Patient Birth Date Does Not Match That for the Patient in the Database (AAA = 71)	An invalid birth date was submitted.	Verify the date of birth and resubmit the request. Please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.
Patient Not Eligible **Please Correct and Resubmit** (AAA = 95)	Coverage was terminated prior to the event start date. Event start date is prior to coverage effective date. No active medical coverage was found.	Please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.
Patient Not Found (AAA = 67)	We could not match any member using the submitted member ID. Multiple matches on family member. No medical product found in member file.	Verify the member ID number and resubmit the request. Please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.
Pended **Requires Medical Review** (HCR01 = A4)	All services on the National Precertification List will pend for medical review. Pended responses will sometimes be accompanied with the following message: AETNA NEEDS MORE INFO ABOUT THE SERVICES PROVIDED AND THE PATIENTS CLINICAL STATUS THE FACILITY UR DEPT SHOULD PROVIDE COMPLETE INFO ASAP BUT NOT LATER THAN 48 HOURS FROM THIS SUBMISSION WE WILL MAKE A DETERMINATION BASED ON THE AVAILABLE CLINICAL INFORMATION	Aetna's Patient Management area will review the request and contact the requester. If this is an urgent or emergent situation, enter the record electronically and please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.

Status or action message	Possible reasons for error	Action

Required Application Data Missing
 	
 Please Correct and Resubmit
 	
 (AAA = 15)
	The request could not be processed due to missing required data:
	
	 • Diagnosis code
	 • Procedure code
	 • Admission date
	 • Procedure date, or units
	 • Place of service
	 • Service type (bed type)
	 • Provider role of:
	    – Attending
	    – Admitting
	    – Facility
	    – Vendor
		Please correct the data and resubmit the request.
		
		 If you are unable to determine the reason for the error, please call the appropriate number below and select the option for precertification:
		
		 • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans.
		 • **1-800-624-0756** for calls related to HMO-based benefits plans.

Subscriber Found, Patient Not Found **Please Correct and Resubmit** (AAA = 77)	The subscriber was found, but the patient could not be found during the member search.	Verify the member ID number and resubmit the request. Please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for calls related to HMO-based benefits plans.
Unable to Respond at Current Time **Resubmission Not Allowed** (AAA = 42)	Internal system processing errors.	Attempt the transaction at a later time. Contact your vendor or clearinghouse to ask when the system may be available. If urgent, please call the appropriate number below and select the option for precertification: • **1-888-MD-AETNA (1-888-632-3862)** for calls related to indemnity and PPO-based benefits plans. • **1-800-624-0756** for HMO-based benefits plans.

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