



# Provider Quick Reference Guide

This guide is intended to be used for quick reference and may not contain all necessary information. For detailed information, refer to the **Aetna Better Health® of Oklahoma** provider manual located at [AetnaBetterHealth.com/Oklahoma/Providers](https://AetnaBetterHealth.com/Oklahoma/Providers)

Tools & resources (effective 4/1/2024)

## Helpful links:

<b>Clinical guidelines</b>	<a href="https://AetnaBetterHealth.com/Oklahoma/Providers/Clinical-Guidelines-Policy-Bulletins">AetnaBetterHealth.com/Oklahoma/Providers/Clinical-Guidelines-Policy-Bulletins</a>
<b>ProPat (Prior Authorizations)</b>	<a href="https://AetnaBetterHealth.com/Oklahoma/Providers/Prior-Authorization">AetnaBetterHealth.com/Oklahoma/Providers/Prior-Authorization</a>
<b>Forms</b>	<a href="https://AetnaBetterHealth.com/Oklahoma/Providers/Materials-Forms">AetnaBetterHealth.com/Oklahoma/Providers/Materials-Forms</a>
<b>Provider education</b>	<a href="https://AetnaBetterHealth.com/Oklahoma/Providers/Training-Orientation">AetnaBetterHealth.com/Oklahoma/Providers/Training-Orientation</a>
<b>Provider manual</b>	<a href="https://AetnaBetterHealth.com/Content/Dam/Aetna/Medicaid/Oklahoma/Pdf/Abhok_provider_manual.pdf">AetnaBetterHealth.com/Content/Dam/Aetna/Medicaid/Oklahoma/Pdf/Abhok_provider_manual.pdf</a>
<b>Updates, announcements &amp; network news</b>	<a href="https://AetnaBetterHealth.com/Oklahoma/Providers/Notices-Newsletters">AetnaBetterHealth.com/Oklahoma/Providers/Notices-Newsletters</a>

## Contracting:

Visit [AetnaBetterHealth.com/Oklahoma](https://AetnaBetterHealth.com/Oklahoma), or scan the QR code below, and choose “Ready to Join” and someone from our Oklahoma Aetna® Network Contracting team will reach out to you.



## **Claims:**

**Participating providers may review the status of a claim by checking Availity or by calling our *Claims Investigation and Research Department (CICR)* at 1-844-365-4385.**

### **Timely Filing of Claim Submissions:**

New Claim Submissions – Claims must be filed on a valid claim form within six (6) months (180 days) from the date of service. Prior to submitting a claim through a clearinghouse, please verify the clearinghouse is compatible with Office Ally.

Claim Resubmission – Claims to be resubmitted, when applicable, within an additional six (6) months (180 days) from the date of service. The only exceptions to the resubmission deadline are the following: a. administrative correction or action by **Aetna Better Health®** taken to resolve a dispute; b. reversal of eligibility determination; c. investigation for fraud or abuse of the provider; or d. court order or hearing decision.

Failure to submit claims within the prescribed period may result in payment delay and/or denial.

### **Electronic Claims Submission:**

Claims can be submitted by visiting **Office Ally** at **[CMS.OfficeAlly.com](https://cms.officeally.com)**

Prior to submitting a claim through a clearinghouse, please verify the clearinghouse is compatible with Office Ally.

**Payer ID number 128OK**

### **Office Ally Support**

Phone #: **360-975-7000**

Website: **[CMS.OfficeAlly.com/Form-Contact-Form-New](https://cms.officeally.com/Form-Contact-Form-New)**

### **Availity offers participating providers the ability to:**

- Use search tool
- Check claims status
- Pull PCP membership assignment
- Verify eligibility
- Download forms for authorization requests
- Submit, verify, and check the status of prior authorization requests

### **Availity Support:**

Phone #: **1-800-282-4548**

Website: **Availity.com**

Registration: **Availity.com/Essentials-Portal-Registration**

Contact Us: **Availity.com/Contact-us**

Training: **Availity.com/Training-and-Education**

### **Paper Claims Submissions:**

**Aetna Better Health of Oklahoma, Inc.**

**PO Box 983110**

**El Paso, TX 79998-3110**

### **Electronic funds transfer (EFT)**

EFT makes it possible for us to deposit electronic payments directly into your bank account. Get started setting up EFT here:

**Enrollments.EchoHealthInc.com/EFTERADirect/AetnaBetterHealth** or on our provider portal.

- Some benefits of setting up an EFT include:
- Improved payment consistency, fast, accurate, and secure transactions

### **Electronic remittance advice (ERA)**

ERA is an electronic file that contains claim payment and remittance information sent to your office. The benefits of an ERA include:

- Reduced manual posting of claim payment info, which saves you time and money, while improving efficiency
- No need for paper explanation of benefits (EOB) statements
- No need for paper explanation of payments (EOP)

### **EFT/ERA via ECHO:**

Phone #: **1-800-956-5190**

To enroll: **Enrollments.EchoHealthInc.com/EFTERADirect/AetnaBetterHealth**

Hours of Operation Monday-Friday 8 AM – 5 PM CT

## **Grievance & Appeals**

### **Provider Dispute**

Network providers may file a payment dispute verbally or in writing direct to **Aetna Better Health**® to resolve billing, payment and other administrative disputes for any reason including but not limited to lost or incomplete claim forms or electronic submissions; requests for additional explanation as to services or treatment rendered by a health care provider; inappropriate or unapproved referrals initiated by the provider; or any other reason for billing disputes. Provider Payment Disputes do not include disputes related to medical necessity.

### **Provider Grievance**

Both network and out-of-network providers may file a formal grievance in writing directly with **Aetna Better Health**® regarding our policies, procedures or any aspect of our administrative functions including dissatisfaction with the resolution of a payment dispute or provider complaint that is not requesting review of an action within **Aetna Better Health**® from when they became aware of the issue.

### **Provider Appeal**

A provider may file a formal appeal in writing, a formal request to reconsider a decision (e.g., utilization review recommendation, administrative action), with **Aetna Better Health**® from the **Aetna Better Health**® Notice of Action. The expiration date to file an appeal is included in the Notice of Action.

### **How to file an Appeal or Grievance**

Phone: **1-844-365-4385**

Fax: **1-833-805-3310**

Online: **Availity.com**

Email: **OKAppealAndGrievance@Aetna.com**

Mail:

**Aetna Better Health of Oklahoma**  
**Attn: Appeal and Grievance Manager**  
**PO Box 81139 5801 Postal Road**  
**Cleveland, OH 44181**

### **Timeframes for grievance & appeals:**

- Standard appeal: within 30 days
- Expedited appeal: within 72 hours
- Standard grievance: within 30 days

## **Pharmacy authorizations**

To review our formulary drug list, prior authorization (PA) criteria, PA forms, and how to submit an electronic PA, providers can visit the pharmacy section of our website.

Phone #: **1-844-365-4385 (TTY: 711)**

Fax #: **1-888-601-8461**

Website:

**[AetnaBetterHealth.com/Oklaoma/Providers/Pharmacy-Prior-Authorization](https://www.aetna.com/betterhealth/oklahoma/providers/pharmacy-prior-authorization)**  
**Online authorizations via Surescripts or Covermymeds®**

## **Important contact information**

### **Provider Engagement**

Phone #: **1-844-365-4385 (TTY: 711)**

Email: **[ABHOKProviderEngagement@Aetna.com](mailto:ABHOKProviderEngagement@Aetna.com)**

Website: **[AetnaBetterHealth.com/Oklaoma](https://www.aetna.com/betterhealth/oklahoma)**

### **Member Services:**

Phone #: **1-844-365-4385 (TTY: 711)**

Website: **[AetnaBetterHealth.com/Oklaoma](https://www.aetna.com/betterhealth/oklahoma)**

### **Grievance & Appeals:**

Phone #: **1-844-365-4385 (TTY: 711)**

Fax #: **1-833-805-3310**

Email: **[OKAppealandGrievance@Aetna.com](mailto:OKAppealandGrievance@Aetna.com)**

Website: **[AetnaBetterHealth.com/Oklaoma](https://www.aetna.com/betterhealth/oklahoma)**

### **Case Management:**

Phone #: **1-844-365-4385 (TTY: 711)**

Fax #: **1-833-898-6542**

Email: **[AetnaBetterHealthOKCM@Aetna.com](mailto:AetnaBetterHealthOKCM@Aetna.com)**

Website: **[AetnaBetterHealth.com/Oklaoma](https://www.aetna.com/betterhealth/oklahoma)**

### **Pharmacy:**

Phone #: **1-844-365-4385 (TTY: 711)**

Fax #: **1-888-601-8461**

Website: **[AetnaBetterHealth.com/Oklaoma](https://www.aetna.com/betterhealth/oklahoma)**

### **UM/Prior Authorizations:**

Phone #: **1-844-365-4385 (TTY: 711)**

Fax #:

- Prior authorization: **1-833-923-0831**
- Concurrent review: **1-833-923-0780**
- Behavioral health: **1-833-923-0829**

Website: **[Aetnabetterhealth.com/Oklaoma](https://www.aetna.com/betterhealth/oklahoma)** or **[Availity.com](https://www.availity.com)**.

**CVS Caremark®:**

Phone #: **1-855-319-6286**

**Transportation/ ModivCare**

Phone#: **1-877-718-4208**

Hours of operation: Monday-Friday 7 AM – 8 PM CT

**NOTE: Transportation must be scheduled 72 hours in advance excluding weekends and state holidays.**

**Vision/EyeMed:**

Phone #: **1-866-4-EYEMED**

**24/7 Nurse Line:**

Phone #: **1-844-365-4385 (TTY: 711)**

**Language Services:**

Language line phone #: **1-855-380-5345**

To request interpreter services call member services at **1-855-380-5345 (TTY: 711)**.

- **Interpretation (face to face)**  
Nationwide network of qualified interpreters offering interpretation in 15+ languages, including American Sign Language (ASL)
- **Interpretation (over the phone)**  
Access to interpreters supporting 200+ languages via telephone

**SoonerCare helpline:**

Phone #: **1-800-987-7767**

**Oklahoma tobacco helpline (tobacco cessation):**

Phone #: **1-800-QUIT-NOW (1-800-784-8669)**

**Abuse, Neglect and Exploitation:**

**Children:**

Oklahoma Department of Human Services (OKDHS) **Statewide 24-hour Child Abuse and Neglect Hotline at 1-800-522-3511.**

**Vulnerable adults:**

Providers must report suspected or known physical abuse (domestic violence), neglect, maltreatment, and financial exploitation of a vulnerable adult immediately to one of the following State agencies:

- The Oklahoma Domestic Violence Hotline at **1-800-522-SAFE (7233)**
- Reporting agencies
- Oklahoma Department of Human Services (OKDHS) **1-800-522-3511** or through this link: **[OurOkDhs.org/s/ReportAbuse](https://www.okdhs.org/s/ReportAbuse)**

## Fraud, Waste & Abuse:

Providers can report suspected fraud, waste, or abuse in the following ways:




By phone to the confidential Aetna Better Health of Oklahoma **1-855-321-3727**

By phone to our confidential Special Investigation Unit (SIU) at **1-800-338-6361**

**You can also report provider fraud to OHCA, at 1-(855) 817-3728 or to the Federal Office of Inspector General in the U.S. Department of Health and Human Services at 1-800-HHS-TIPS (1-800-447-8477).**

## Member ID card:

### Front:

	
<b>Aetna Better Health® of Oklahoma</b>	
Name/Nombre	
Medicaid ID/Identificación de Medicaid	
PCP	
PCP phone/Teléfono	
.....	
Pharmacy coverage RxBIN: 610591   RxPCN: MCAIDADV   RxGRP:881G 	
AetnaBetterHealth.com/Oklahoma	
MED0K1	

### Back:

Member Services and Nurse Line <b>1-844-365-4385 (TTY: 711) 24/7</b> Member Services and Nurse Line <b>1-844-365-4385 (TTY: 711) 24/7</b>
Behavioral Health Crisis line <b>988</b> 24 hours a day, 7 days a week Behavioral Health Crisis line <b>988</b> 24 hours a day, 7 days a week
Hearing impaired <b>711</b> Hearing impaired <b>711</b>
In case of emergency call <b>911</b> or go to the closest emergency room. After treatment, call your PCMH or Dental Home within 24 hours or as soon as possible.
In case of emergency call <b>911</b> or go to the closest emergency room. After treatment, call your PCMH or Dental Home within 24 hours or as soon as possible.
PROVIDERS: Pharmacy, Eligibility, Authorization <b>1-844-365-4385</b>
Submit claims to Aetna Better Health of Oklahoma PO Box 983110 El Paso, TX 79998-3110
Payer ID: 12BOK MED0K2