ID Card: Front of card ID Card: Back of card

  

* **Aetna Better Health of Michigan home page website:** <https://www.aetnabetterhealth.com/michigan>
* **Aetna Better Health of Michigan Provider Resources**: <https://www.aetnabetterhealth.com/michigan/providers/>
	+ Join Our Network, Prior Authorization, Provider Manual, Case/Disease Management, Clinical Practice Guidelines, Provider Portal, Forms, News & Notices, Newsletters, Claims, Training, Resources
* **Availity home page web Portal**: [**www.availity.com**](http://www.availity.com)
	+ **Log in to Essentials or call** 1-800-282-4528
* **Availity Portal Tools & Resources:**
	+ Eligibility, Claims, Prior Authorizations, PAR Provider Disputes, Grievance and Appeals, Panel Roster and more
* **How to verify member eligibility, PCP assignment, benefits, co-pays/deductibles:**
	+ - State CHAMPS website:[**www.michigan.gov**](http://www.michigan.gov)
		- ABH Provider Portal:[**https://www.aetnabetterhealth.com/michigan/find-provider**](https://www.aetnabetterhealth.com/michigan/find-provider)
		- Availity Secure Portal: [**www.availity.com**](http://www.availity.com)
* **How to File a Claim:**
	+ **Electronic Claims Submission (EDI)**
		- Electronic Claims Submission: Change Health (Emdeon) is the EDI vendor we use Medicare and Medicaid <https://www.changehealthcare.com/>
		- Payer ID: 128MI
	+ **Paper Claims:**
		- Aetna Better Health OF Michigan PO Box 982963 El Paso, TX 79998-2963
* **Claims Timely Filing:**
	+ New Claim: within 365 days from Date of Service
	+ COB Claim: within 365 from the date of the COB remittance advice
	+ Claim Resubmission: within 180 days from the date of payment or denial
	+ Appeals and reconsiderations: 180 days from the original denial for appeal and reconsiderations
* Prior **Authorization online tool:** <https://www.aetnabetterhealth.com/michigan/providers/prior-authorization>
	+ Select Prior Authorizations to determine if prior authorization (PA) is required
		- Enter CPT or HCPCS Code (s) up to six can be entered
		- Select Plan
			* ABH of Michigan – MMP Duals (Medicare/Medicaid)
			* Michigan Medicaid-Medicaid/Healthy MI
		- Phone: 1-855-676-5772 Fax: 1-844-241-2495
* **Provider Appeal**:
	+ Phone: 866-316-3784 Fax: 866-889-7517
	+ Mail: Aetna Better Health of Michigan Attn: Provider Grievance
		- PO Box 818070 5801 Postal Road Cleveland, OH 44181-0040
	+ Email: MIAppealsandGrievances@aetna.com
	+ Secure Portal: <https://www.aetnabetterhealth.com/michigan/providers/portal>
* **Claims Inquiry Claims Research (CICR) Department:** benefits, eligibility, claim status, appeal status, check tracers, remits, COB, Billing and Coding
	+ MI Duals: 1-855-676-5772 Medicaid/Healthy MI: 1-866-316-3784
* **Vendors:**
	+ CVS Health Pharmacy Benefits Manager: 1-800-552-8159
	+ DentaQuest Dental Benefits Manager: 1-866-316-3784
	+ VSP Vision Benefits Manager: 1-800-877-7195
	+ Medical Transportation Management: 1-844-549-8347
	+ eviCore Health Radiology Benefits Manager: 1-888-693-3211
* **Provider Representatives:**
	+ Patti Pogodzinski: pogodzinskipatti@aetna.com