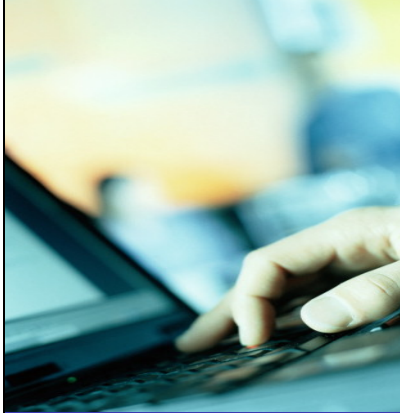


We want you to know[®]



Electronic Remittance Advice/ Electronic Funds Transfer (ERA/EFT)

Aetna Provider eSolutionsSM



Why should you enroll in Aetna ERA / EFT?

- Get paid up to 7 days faster than with paper Explanation of Benefits and checks by choosing electronic delivery of your claims payment information and funds
- Reduce paperwork by receiving your EOB information electronically
- Improve your financial management by shortening your number of days outstanding
- Automate manual processes with appropriate software from your vendor

Electronic Remittance Advice (ERA) Overview

Electronic remittance advice is an electronic transaction that enables you to receive claims payment information electronically. The ERA files are transmitted to our vendors in the HIPAA mandated ASC X12 835 4010 A1 format. Our ERA files are intended to replace the paper Explanation of Benefits (EOB) after 30 days; however, we provide a test/trial period to allow you to evaluate the process. If you are not satisfied with Aetna ERA, you can cancel at any time and continue with paper EOBs and checks.

Some highlights of the ERA transaction are:

- ERA is available for all Aetna benefits plans, with the exception of Strategic Resource Company (SRC) members. Your current payment frequency will not change.
- To post your ERAs electronically, you will need to have software from your vendor and work with them to properly configure the software.
- We are able to separate ERA files for the same TIN by billing address if needed.
- You can access a printable version of the ERA for COB purposes on our secure provider website via NaviNet[®] at: <https://navinet.navimedix.com>
- Printable versions of the ERA, similar to your paper EOBs, may also be available from your vendor in PDF or TXT format.

Electronic Funds Transfer (EFT) Overview

Electronic funds transfer enables you to receive claims payments electronically. EFT deposits fast, confidential, secure claims payments into one or multiple designated bank accounts. Some highlights of the EFT transaction are:

- There is a 10-day pre-note period for EFTs to verify bank account information, and allow a smooth transition from paper checks to EFT.
- Once we release payment, it will be approximately 3 business days before an EFT is issued to the settlement of funds to your account(s).
- Once initial setup is complete, the EFT is posted to your account 24 hours after being received and processed by our financial institution.
- The originator trace number found in the EFT addenda record links the EFT and ERA together. This trace number may be considered the check number for comparison. You must work with your bank if you wish to be notified when EFTs settle to your account.

ERA / EFT Helpful Hints

- You do not need to have a vendor or clearing-house to enroll in Aetna ERA/EFT. You will find free solutions as well as fee- based solutions.
- We do not offer EFT alone, but you can receive ERA without EFT. With ERA only, you may find it difficult to match your ERAs with paper checks.
- It is very important that you notify us of any changes to your ERA/EFT Enrollment form both prior to and after enrollment. This includes any changes to your TIN#, billing address or bank account.

E.cap & PIP Payments

- Capitation (CAP) and Provider Incentive Payment (PIP) payments are available via EFT.
- EFTs for PIP and CAP payments are transmitted separately from claims.
- Electronic Membership Rosters for CAP are available under the Practice and Patience Reports section of the secure website, available through www.aetna.com.

- Our overpayment recovery does not change once you enroll in EFT. We will only reverse an EFT deposit from your account if it is a duplicate or erroneous EFT.

Aetna ERA/EFT Enrollment – What To Expect

- Complete the [ERA Enrollment Form](#) below and return it to your Aetna ERA Specialist by faxing it to 860-754-9122. Once you have faxed your enrollment form, you will be contacted via e-mail or phone by an ERA specialist within 4 weeks.
- Once your enrollment form is received by an ERA specialist, he/she will review your demographic information in our provider database for accuracy. You may receive an ERA Enrollment Report if there are multiple billing addresses under the same TIN#.
- There may be different enrollment procedures depending on your vendor selection, so please contact the vendor of your choice. A list of vendors to whom we transmit ERA files can be found in the Aetna Electronic Transaction Vendor Grid.
- If you have questions about the enrollment, setup or implementation of ERA/EFT, contact your vendor or your Aetna ERA specialist.

Testing

- We can set up a trial or test period for ERA if you are not comfortable with the transition from paper to electronic remittance, but it is not mandatory. You may also need to test your posting software to ensure it is set up properly.
- The typical trial or test period can last from a few days to a couple of weeks. During the trial or test period, you will continue to receive paper EOBs and checks.
- The data you receive during testing is live data, so it will match the paper EOBs you receive several days later in the mail. After the initial trial period, you will stop receiving ERA files. Multiple trial/test periods can be set up if needed. Complete deployment will depend on your comfort level and the amount of testing needed with your vendor.

Production

- Depending on your familiarity with ERA or a successful trial/test, you may choose to move forward with production ERA and EFT.
- As mentioned before, there is a 10-day pre-note period for EFT. You will not receive funds electronically for approximately 10 days after the ERA effective date. If your bank account was previously pre-noted by Aetna, EFT will begin immediately.
- If you want ERA and EFT to begin on the same day, just let your ERA specialist know, and he/she can request specific effective dates.

- Upon successful implementation of the ERA transaction, we will continue to send both paper EOBs and ERAs for approximately 30 days, during which time your ERA specialist will be your contact for any assistance you may require. When you decide to proceed with production, we will notify you of the specific date on which we will stop mailing you paper EOBs.
- Health care professionals are responsible for working directly with their banking institutions to reconcile EFTs and to ensure that all the necessary information posts to their patient accounts.
- Once you have successfully transitioned from paper EOBs and checks to ERA and EFT, your ERA specialist will provide you with the name of an EDI consultant who will be your contact for future support.

Support Tools

Electronic EOB

- Please register on our secure provider website via NaviNet[®] at: <https://navinet.navimedix.com> for access to this tool.
- For a demo of the electronic EOB tool, please visit http://www.aetna.com/provider/explanation_benefits.html.

ERA Inquiry

- Please register on our secure provider website via NaviNet[®] at: <https://navinet.navimedix.com> for access to this tool.
- This website is a tool for providers who do not receive their ERA files directly on our secure provider website via NaviNet[®] or through another vendor that offers a printable file for secondary filing.
- ERA Inquiry also helps ensure you are receiving all of your ERA files from your vendor.



Electronic Remittance Advice and Electronic Funds Transfer Enrollment

Please use this guide to prepare and complete your ERA/EFT enrollment request. Missing or incomplete information within the enrollment form will delay the benefits of participating in ERA and EFT. The following is a reference guide only, do not fax with the completed enrollment form.

- Ready to get started?**
 - Click on the following link to access the most current version of the ERA/EFT enrollment form.
http://www.aetna.com/provider/medical/resource_med/forms_med/forms.html

- Are you using one enrollment form per tax id?**
 - Enrollment forms containing more than one tax id will be returned.

- Did you remember to put the NPI # on the enrollment form?**
 - Having a valid NPI on file aids in the processing of your claims.

- If enrolling for EFT, have you attached a voided check or bank letter?**
 - Enrollment requests cannot be processed without this information.
 - A voided check must accompany the form; a copy of the Deposit Slip will not be accepted.
 - The banking information on the voided check/bank letter must match what is listed on the enrollment form.

- Has the form been signed by the appropriate individuals?**
 - The form MUST be signed by two people: an *authorized healthcare professional* – MD, CFO, CEO, etc. **AND** a *supervisor-level authorized personnel* – office manager, billing manager, etc.
 - Your enrollment form will be returned if there is only one signature.

- Have you filled out all of the sections marked with asterisks?**
 - Incomplete and/or illegible fields will cause the form to be returned.
 - To ensure form is legible, please type or print all requested information clearly.

- Have a completed form to submit?**
 - Submit only one form per fax. Multiple enrollment requests must be faxed separately. Faxes containing multiple forms will be returned.
 - Completed forms should be faxed to 860-754-9122.
 - Please allow 10-15 business days for processing once an enrollment is received before requesting status. Backlog may occur which could result in a longer processing time.
 - An email confirmation will be sent once setup is complete.



Electronic Remittance Advice and Electronic Funds Transfer Enrollment

Please fax only one TIN per form. A separate form for each TIN must be used.

<i>Check all that apply:</i>	Sections required to be completed	Enroll	Change	Terminate
ERA for Medical Claims	A, B, D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EFT for Medical Claims	A, C, D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EFT for Med Claims & Capitation	A, C, D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ERA and EFT for Medical Claims	A, B, C, D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*** Indicates required fields within each section. Incomplete and/or illegible fields and signatures may cause your enrollment to be delayed.**

A. Practice Information – Please note: Illegible or incomplete fields may cause your enrollment to be delayed.

* Name	* Tax ID Number (TIN)	* Pay to/Billing National Provider Identifier (NPI)
* Contact Name	* Email Address	
* Telephone Number ()	Fax Number ()	
Primary Service Address	Primary Billing Address	

Check Only One

TIN level set up (Do you bill for all claims paid to this tax ID?)

Do you require set up to be split by billing location?

Split by NPI? (Provide 2 or more NPI's). Note: Only to be used if excluding an NPI.

B. Check only one. Please note: ERA replaces your paper EOBs 15-45 days after enrollment.

Yes No Please turn off paper explanation of benefits immediately following ERA set up.

Option 1 – Vendor/Clearinghouse Information - You may only receive Aetna ERAs from one of the vendors listed within the attached link.

See list of vendors at:
http://www.aetna.com/provider/medical/service_med/electronic_med/clearinghouse.html

* Vendor/Clearinghouse Name	Contact Name	
Email Address	Contact Phone Number ()	User Name/App ID/Entity Gen Key/Acct Number (if applicable)

Option 2 – Aetna Secure Provider Website via NaviNet®

* Registration complete? Yes No * User ID(s) _____

Yes No I utilize the Claim EOB Tool on NaviNet to access my EOB's and no longer need paper EOB's mailed

Option 3 – For Aetna EDI ConnectSM ERA Users

Aetna EDI Connect (secure FTP in the X12 format only)

* Registration complete? Yes No

* User ID(s) _____

Do you use a billing service for Aetna EDI Connect? Yes No

C. EFT- Direct Deposit/Banking Information

When enrolling a *new or changed* account for EFT, a voided check or letter from your bank is required.

To take advantage of direct deposit (EFT), your bank must be a participating member of the Automated Clearinghouse Association (ACH). Please note if you require payments to be deposited into multiple bank accounts, you must complete bank account information for each account. Capitation payments made under a single TIN can only be deposited into one bank account. New EFT enrollment or changes to existing EFT banking information will trigger a new EFT pre-note period. The EFT pre-note period will run for 10 days from the effective date. Production will start on day 11. You are responsible for notifying Aetna if your banking information changes.

* **Bank Name** _____ **Address** _____

* **Bank routing number** (9 digits found on check, NOT deposit slip)

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* **Account Number** _____ (voided check or bank letter required)

* **Account type** Savings Checking Deposit Only

* **TIN number of provider associated with above account** _____

If information supplied above is a change request, please provide the following information:

* **Previous Bank Name** _____ **Previous Address** _____

* **Previous Bank Routing Number** (9 digits found on check, NOT deposit slip)

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* **Previous Account Number** _____

* **Account type** Savings Checking

* **TIN number of provider associated with above account** _____

When enrolling a *new or changed* account for EFT, a voided check or letter from your bank is required.

Please be aware, follow-up by an Aetna representative to a supervisor-level authorized health care professional may occur to ensure accuracy of banking information.

D. Authorization Agreement – Please read and sign your name below.

Electronic Funds Transfers (EFT)

I hereby authorize Aetna, on behalf of itself and its affiliates, including Aetna Life Insurance Company and Aetna Health Inc. (hereinafter “Company”), to initiate credit entries to the account(s) at the bank(s) listed above for all benefits payments. This agreement will remain in effect until I notify Company of the desire to cancel or change this service or until Company notifies me that this service has been terminated. I understand I must allow reasonable time for my instructions to be executed. I authorize and request the bank(s) listed above to accept any credit entries by Aetna to such account(s) and to credit the same to such account(s).

If Company credits more money than the correct benefits amount to the account, due to duplicate electronic funds transfers (where “duplicate” is defined as multiple electronic funds transfers received for the same services rendered, the same membership and the same dates of service) or erroneous electronic funds transfers (where “erroneous” is defined as complete electronic funds transfers received in error), company will attempt to recover the duplicate or erroneous payment via a debit to your account. If an electronic debit is unsuccessful, or for deposit only accounts, company will pursue settlement via alternate measures.*

* Company strictly adheres to the National Automated Clearing House Association (NACHA) guidelines.

Electronic Remittance Advice (ERA) – Legislative Updates

Certain claims payment/remittance information required by various state requirements cannot be transmitted using the HIPAA-compliant ERA transaction. When state requirements require information that cannot be accommodated in our HIPAA-compliant ERA transaction, we will post details of our state requirements compliance plan on our ERA Inquiry website. You may access these details by clicking “Legislative Updates” on the Welcome page of the ERA Inquiry site. You will be granted access to this site as part of the ERA enrollment process. Thank you for your cooperation in this effort.

Electronic Remittance Advice (ERA) – Pended Claims

When state requirements require information that cannot be accommodated in our HIPAA-compliant ERA transaction, such as information regarding pended claims, health care professionals can obtain this information in other ways:

For pended claims received **electronically**, the request for information is returned in a Claim Status Response (277). However, Aetna is aware that some providers have agreements with their vendor/clearinghouse to receive some, all or none of their unsolicited claims status responses. Therefore, please work with your vendor/clearinghouse to ensure you receive all level 2 claims status responses in order to receive this information. If you prefer, or are unable to receive these responses, you may use the real-time claims status inquiry transaction to obtain this information as well.

For pended claims received on **paper**, a request for more information may be sent by letter or phone call. However, if you have not received any such request within 30 days of a claims submission on paper, please use the claims status inquiry transaction to view this information.

Please work with your Aetna representative if you need assistance using the claims status inquiry transaction. Thank you for your cooperation in this effort.

By signing below, I hereby agree that I have read and agree to the terms and conditions stated above, including Authorization for Direct Deposit of Benefits Payments, Legislative Updates and Pended Claims.

* Authorized health care professional name: _____ * Title _____
Signature _____ * Date _____

Authorized health care professional may be MD, CFO, CEO, etc.

* Supervisor - level authorized personnel:

Signature _____ * Title _____
* Date _____

Supervisor-level authorized personnel may be Office Manager, Billing Manager, etc

* Form completed by _____
* Telephone number () _____ Fax number () _____
* Email address: _____

*** One authorized health care professional AND one supervisor-level authorized personnel signature is required.**

*** Incomplete and/or illegible signatures will cause your enrollment to be delayed**

**Please submit only one form per FAX. Faxes containing multiple forms will be returned.
Fax the completed form, voided check and/or bank letter to Aetna ERA Enrollment at 860-754-9122.**