It’s time to verify your patients’ eligibility.

A new year means new plans. Find out what’s new and different.

Get the details of their 2021 health plan.

Some of your patients may have new plans. Or their plans may have changed from last year. They may have different financial obligations or a new ID number. Use the Eligibility and Benefits Inquiry transaction to get details on their new plans.

Ask your patients for their current ID card. If they don’t have one, you can still verify their eligibility using their full first and last names and date of birth. And you can print an electronic copy of their ID card, if you need it. Make sure our response matches your patient’s information. And be sure to use their current ID number when submitting claims, authorizations/precertifications or referrals.

Be sure to follow this guidance for patients who received a new member ID number on January 1, 2021:

- **For services on or before December 31, 2020,** make sure to use their old ID number. For example, our Medicare members may have had ID numbers beginning with “ME.”

- **For services on or after January 1, 2021,** ask your patient if they were sent a new ID card or if they have a new ID number. If so, use that new ID number if you need to request a service, like an authorization (precertification). For example, some of our Medicare members may have had their ID numbers changed from ones beginning with “ME” to ones beginning with “1010” or “1011.”

While it’s a good idea to verify patient eligibility at the beginning of the year, it’s best to verify their eligibility before every visit.

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