

Electronic claim filing submission

Your claim submissions just got easier.



Submitting claims can be easy. You can use [our provider portal on Availity](#) or find a vendor from our list on the site.

Before you submit COB claims

Confirm that your practice management system and your vendor can create or forward coordination of benefits (COB) claims in the full Health Insurance Portability and Accountability Act (HIPAA) standard format (837).

The submission must include payment information received from the primary payer's HIPAA standard electronic remittance advice (ERA).

Or convert the primary payer's payment information received on an Explanation of Benefits (EOB) statement into standard coding used in an ERA.

Let's talk secondary claims

You may not have to submit claims to us after Medicare has paid them.

Medicare will only forward the claims to us for secondary consideration when our member is found within their eligibility files.

Tips for a successful submission

- Enter the member ID number exactly as it appears on the ID card, including any letters. No dashes, suffixes or spaces.
- The billing provider address must be a street address. If you're including a PO box or lockbox, send that information in the "Pay-To Provider" address field.
- Be sure to include a value for "Provider Accepts Assignment" and whether the patient paid for any services received.
- You can submit corrected and voided claims electronically. Just include the originally assigned claims number.
- Include a procedure code description for codes not otherwise classified or listed. Ask your vendor where to include this information.
- You can submit up to 50 service lines for a professional claim and 999 lines for an institutional claim. Just check with your vendor to make sure they don't have limitations.
- When submitting anesthesia claims, enter the number of minutes, not units.
- You don't need to attach anything. We'll contact you if we need more information.



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Submit a claim status transaction

For a successful submission, here's what you'll need to have ready:

- Billing provider ID — National Provider Identifier (NPI) or billing provider tax identification number
- Servicing provider NPI — use the same servicing/rendering NPI that was submitted on the claim you're inquiring about
- Billing and servicing providers' names
- Dates of service and, if you have it, the Aetna® claim number to narrow the search

When the patient is the subscriber or a dependent with a unique member ID number:

- Subscriber ID (member ID or employee badge number) — don't include suffix
- Last name
- Date of birth
- Optional: gender (add it if you think it will help in the patient validation process)
- Meritain only: Amount is required

When the patient is a dependent without a unique member ID number:

- Subscriber ID (member ID or employee badge number) — don't include suffix.
- Subscriber last name
- Patient last name
- Patient date of birth
- Optional: gender (add it if you think it will help in the patient validation process)
- Meritain only: Amount is required

Check on claims status

You can review your reports or use our tools to check claims status.

The Claim Status Inquiry transaction is for single member inquiries. You can search up to 27 months of claim history, and our response will return a maximum of 12 claims up to a total of 26 service lines.

Need claims help?

Depending on your needs, you have a variety of resources:

- If your claim rejects at the vendor level, contact your vendor.
- If you have questions about the status of a claim, use our Claim Status Inquiry tool.
- For claims that have completed the payment process, you may retrieve supplemental claims information using the financial status tool.*
- For questions on submitting electronic claims to a third-party administrator, such as an individual practice association, contact the administrator directly.

Need more help? Use the "Contact us" link on **Aetna.com** or call your vendor's customer service.

*Availability varies by vendor.

To learn more about submitting COB claims electronically, go to **Aetna.com**.



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