On February 21, Change Healthcare took several of their services offline in response to a cyber security incident they experienced. This is impacting certain Aetna business operations, as well as the operations of other companies nationally. There is no indication that Aetna’s systems have been compromised. We’re committed to ensuring access to care as we navigate through this network disruption. We have business continuity plans in place to minimize disruption of service and apologize for any inconvenience our network providers and members may experience. We will continue to utilize our business continuity plans to minimize disruption until the Change Healthcare services are restored.

Aetna uses Change Healthcare as an intermediary for certain Electronic Data Interchange (EDI) transactions across all of our lines of business. Additionally, we are aware that many of our Aetna network providers may use Change Healthcare to transmit claims information to us. This bulletin provides information to our network providers that are experiencing impact from the Change Healthcare network disruption.

Below is a set of Frequently Asked Questions that address the mitigation plans in place for providers to complete transactions with Aetna during the Change Healthcare service interruption. It is based on what is currently known and we will continue to share additional information as it becomes available.

**What mitigation plans are in place for claims submissions while the service interruption continues?**

**For Aetna Commercial, Individual & Family Plan and Medicare:** We’ve been advising our network providers who directly use Change Healthcare for EDI transactions for Aetna to stay “digital first” and use one of our other business partners for their electronic transactions until Change’s service interruption is resolved. Here is a list of our approved electronic transaction vendors.

Providers can also use our existing medical provider portal hosted by Availity or electronic claims submission.

If providers work through a billing partner, practice management system or other vendor partner, they likely can advise on an alternate connection method for electronic transactions with Aetna.

Finally, when digital submission isn’t possible, providers can also reach out to our Aetna provider contact centers about submitting paper claims. A list of phone numbers is available for providers to select from based on the specific transaction they are calling about.

**For Aetna Better Health (Medicaid) plans:** Providers need to use Office Ally for electronic claims submissions.

**How do network providers get access to Availity?**

Providers need to register to use Availity; many of our network providers already are registered, but do not currently use the portal. Availity offers provider training, and Aetna is considering any additional support needed. It’s important to keep in mind this service interruption has a nationwide industry impact. Availity is a multi-payer portal and has confirmed with Aetna they are prepared to handle an increased volume of digital transactions. You can learn more about Availity here.
How do providers get access to Office Ally?
Providers can register at cms.officeally.com

Will Aetna extend or waive “timely filing” policies on claims processing?
We are assessing the need for this based on current claims submission activity.

How will “timely filing” deadline impacts be handled for claims that may be submitted past a timely filing deadline due to the service interruption?
We are assessing the need for this based on current claims submission activity. Any changes will be communicated to providers.

For providers who are submitting claims through a trading partner or directly to Change Healthcare, will they have to resubmit those claims, or will they ultimately be delivered to Aetna?
We are working to assess the impact to claims that may have been submitted during the service interruption and will provide an update when more information is available.

What alternative methods do providers have to submit “member eligibility and benefits” checks?
For Aetna Commercial, Individual & Family Plan and Medicare: We’ve been advising our network providers who directly use Change Healthcare for EDI transactions for Aetna to stay “digital first” and use one of our other business partners for their electronic transactions until Change’s service interruption is resolved. Here is a list of our approved electronic transaction vendors.

Providers can also use our existing medical provider portal hosted by Availity or dental provider portal hosted by Dental Exchange for member eligibility and benefit checks.

If providers work through a billing partner, practice management system or other vendor partner, they likely can advise on an alternate connection method for electronic transactions to Aetna.

Finally, when digital submission isn’t possible, providers can utilize the Aetna Voice Advantage system. A list of phone numbers is available for providers to select from based on the specific transaction they are calling about.

For Aetna Better Health (Medicaid) plans: Providers need to use Availity to submit electronic member eligibility and benefits.
How can providers submit prior authorizations to Aetna during the Change Healthcare service interruption?

**For Aetna Commercial, Individual & Family Plan and Medicare:** We’ve been advising our network providers who directly use Change Healthcare for EDI transactions for Aetna to stay “digital first” and use one of our other business partners for their electronic transactions until Change’s service interruption is resolved. Here is a list of our approved electronic transaction vendors.

Providers can also use our existing medical provider portal hosted by Availity or dental provider portal hosted by Dental Exchange for electronic prior authorization submissions.

If providers work through a billing partner, practice management system or other vendor partner, they likely can advise on an alternate connection method for electronic transactions to Aetna.

Finally, when digital submission isn’t possible, we recommend that providers call first and, if needed, fax any prior authorization submissions to Aetna. A list of phone numbers is available for providers to select from based on the specific transaction they are calling about.

**For Aetna Better Health (Medicaid) plans:** Providers need to use Availity to submit electronic prior authorization requests.

Will you start to temporarily liberalize some policies such as prior authorization requirements to help further ensure member access to care while the service interruption continues?

We are not liberalizing any policies at this time. We have assessed the situation over the last few days and the alternative processes in place – in addition to available Aetna phone call support – should help us manage this important utilization management step with our network providers during this time. If this changes, we will provide an update.

What mitigation plans are in place for provider payments?

We are aware that some providers across our lines of business and affiliates may not be getting timely payments at this time, and we take this very seriously. At this time, we’re exploring contingency payment options, particularly for providers in our Medicaid plans who receive payment via paper check and are enrolled in the Virtual Credit Card program.

Will interest payments be included in any payments that are past “timely payments” deadlines as a result of this service interruption?

We are working to assess the impact to claim payments and will share more at a later date.