

Remedy that pain in the neck.

Side effects could include relief and peace of mind.

Our Eligibility and Benefits Inquiry transaction enables health care professionals to request patient eligibility status quickly and securely. Making your daily interactions with us easier and more convenient.

This transaction is available 24/7. It's not available for all plans, such as Meritain Health® and others like them. Plus, it's available to participating and nonparticipating health care providers. You may submit benefits inquiries for up to 27 months before the current date. (If you enter a future date, we'll return benefits as of the current date.)

This data is available to you on our provider website, or through another approved vendor. You can access the list of approved vendors at [aetna.com/provider/vendor](https://www.aetna.com/provider/vendor).

Find benefits information with ease

We include all this information right on your eligibility inquiry response:

- Member ID, group number, plan sponsor name and plan number/plan name
- Active coverage, original effective date of coverage or termination date
- Insurance type/product type
- Access to a member's digital member ID
- Detailed financial information, including remaining amount, deductible, copayment and coinsurance for individual and family levels
- Lifetime and annual maximum and remaining dollar amounts
- Aetna HealthFund® plan information
- Exclusions, plan limits and remaining amounts
- Coordination of benefits information (when applicable)



[aetna.com](https://www.aetna.com)

No stinky ointment required.

Confirm a member's eligibility and covered benefits

- The **date of service** defaults to the current date if it's not entered.
- To **retrieve the most appropriate benefits**, users should select the provider that will be performing the services and submit using the patient's member ID. When the member ID isn't available, use the patient's name and date of birth (DOB). When using this search, it's important that you make sure the benefits details returned are for the right patient.
 - When using the member ID number, prefixes or suffixes are unnecessary. For family-level searches, you only need to enter the member ID.
 - When using the member's name, enter last name, first name and DOB (MM/DD/YYYY).
 - Nonstandard W-ID formats, such as 00123456W, aren't fully supported. In these cases, you must use the ID/DOB or ID/Name search.
- For **provider numbers**, use the doctor's National Provider Identifier (NPI).
- **Service codes** define the types of services that are performed. For example, an inpatient hospital or doctor office visit.

Access digital ID cards

Patients may visit your office without their member ID number or a copy of their card. You can access the electronic image of a member ID card within the Eligibility and Benefits Inquiry response.

Why digital? These cards are accurate and current, give a secure source of benefits information and reduce plastic to help our environment.

Eligibility or digital ID questions? Visit [aetna.com](https://www.aetna.com) and use the "Contact" link at the top of the page.

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