



# Aetna Better Health® of Maryland

## New P.O. Box Address and Vendor for Paper Claim and Claim Correspondence – Effective 3/15/2022

P.O. Box **#61538** Will No Longer Be Valid Starting **March 15th, 2022**.

A key factor in getting claims processed in a timely manner is correct claims submission, and ABH provides multiple options for you to choose from, including the sending of paper claims through the mail.

Aetna will be replacing the current vendor, Change Healthcare (CHC), with Conduent for services related to the receipt and imaging of all paper claim and claim correspondence. The change in vendor requires a change in the P.O. Box number and physical location to which any Aetna Medicaid paper claim and correspondence are currently sent, specifically from **P.O. Box #61538 in Phoenix, AZ** to **P.O. Box #982968 in El Paso, TX**.

We are making you aware that the new P.O. box, **#982968**, will be live and reflected electronically anywhere the P.O. box address is currently listed on **March 15th, 2022**. Once the new P.O. Box is live, mail must be sent to the following address:

### **New P.O. Box**

Aetna Better Health of Maryland  
P.O. Box 982968  
El Paso, TX 79998-2968

Mail will be forwarded from the old P.O. Box to the new P.O. Box for 12 months after **3/15/2022**. To assist us in processing and paying claims efficiently, accurately, and timely, the health plan highly encourages practitioners and providers to submit claims electronically, when possible.

Additional details can be found in the sections below. If you have any questions about our claim submission process you can contact our Provider Relations Department at 1-866-827-2710.

Thank you,  
Aetna Better Health of Maryland

## Additional Provider Education Regarding Change

Aetna Better Health uses the TriZetto QNXT® system to process and adjudicate claims. Both electronic and paper claims submissions are accepted. To assist us in processing and paying claims efficiently, accurately, and timely, the health plan highly encourages practitioners and providers to submit claims electronically, when possible.

### How to File a Claim

**Source:** ABH MD Provider Manual

#### Claims Submission/Claims Filing Formats

Providers can elect to file claims with Aetna Better Health of Maryland in either an electronic or a hard copy format. Claims must be submitted using either the CM 1500 or UB 04 formats, based on your provider type as detailed below.

#### Electronic Claims Submission

In an effort to streamline and refine claims processing and improve claims payment turnaround time, Aetna Better Health of Maryland encourages providers to electronically submit claims, through Change Healthcare (formerly Emdeon).

Please use the Payer ID number **128MD** when submitting claims to Aetna Better Health of Maryland for both CMS 1500 and UB 04 forms. You can submit claims by visiting Change Healthcare (formerly Emdeon) at [www.changehealthcare.com/](http://www.changehealthcare.com/). Before submitting a claim through your clearinghouse, please verify that your clearinghouse is compatible with Change Healthcare (formerly Emdeon).

#### Important points to remember

- Aetna Better Health of Maryland does not accept direct submissions in the claims processing system from its providers.
- Aetna Better Health of Maryland does not perform any 837 testing directly with its providers but performs such testing with Change Healthcare (formerly Emdeon).
- For electronic resubmissions, providers must submit a frequency code of seven or eight. Any claims with a frequency code of five will not be paid.

#### Paper Claims Submission

Providers can submit hard copy CM 1500 or UB 04 claims directly to us via mail to the following address:

Current Mailbox	New Mailbox (Effective 3/15/2022)
Aetna Better Health of Maryland P.O. Box 61538 Phoenix, AZ 85082-1538	Aetna Better Health of Maryland P.O. Box 982968 El Paso, TX 79998-2968

Please see below for a communication shared with Providers in March of 2021 regarding the switch from Emdeon Office to ConnectCenter.

## **The Aetna Better Health Plan of Maryland Has a New Provider Portal!**

We are pleased to announce the availability of a solution for verifying member information and submitting claims to Aetna Better Health. This online solution, ConnectCenter provides a comprehensive way to submit Aetna Better Health claims, at no cost. Get started TODAY! Go here to get started right now. You will be able to setup a new account in just seconds. Once you have received your new credentials, you may immediately begin checking eligibility. Claim submission will be available to you within one business day of setting up your account. Be sure to bookmark the new login page:

<https://physician.connectcenter.changehealthcare.com/#/site/home?payer=214570>

Here are a few of the features you can look forward to with ConnectCenter:

- Verify member eligibility in real-time
- Claims can be created through online data entry or by uploading 837 files created in a practice management or similar system.
- Secondary and tertiary claims can be submitted
- Both Professional and Institutional claims are supported
- Claims are fully validated in real-time so that you can correct them immediately after creating or uploading them.
- Whether you upload your claims or create them online, your claim reports are integrated with the claim correction screen for ease in follow-up
- Dashboard and work list views makes managing your billing to-do list a snap
- On-shore customer support available through online chat (as well as by phone)

### **Resources**

User guides and similar materials are available to help answer any questions you might have.

- Signing Up (next section)
- [Getting Started With Claims](#)
- [Keying a Professional \(CMS1500\) Claim Online](#)
- [Keying an Institutional \(UB04\) Claim Online](#)
- [Getting Started With Eligibility](#)
- [Getting Started With Claim Status](#)
- [Getting Started with Provider Management](#)

## **Provider Sign-Up – Getting Started**

Welcome to ConnectCenter.

Before submitting transactions to Change Healthcare you will need to complete the sign-up process. The sign-up process will create your submitter id for ConnectCenter. Because submitter ID is an important identifier that will be needed anytime you contact customer support, it will always be displayed at the top of the ConnectCenter window, after you login.

Signing up for ConnectCenter is easy. To begin the process, simply access the custom URL assigned to Aetna Better Health of Maryland:

<https://physician.connectcenter.changehealthcare.com/#/site/home?vendor=214570>

### **Steps to sign up:**

[Step 1 – Select the Features](#)

[Step 2 – User Setup](#)

[Step 3 – Legal Terms](#)

[Step 4 – Account Setup](#)

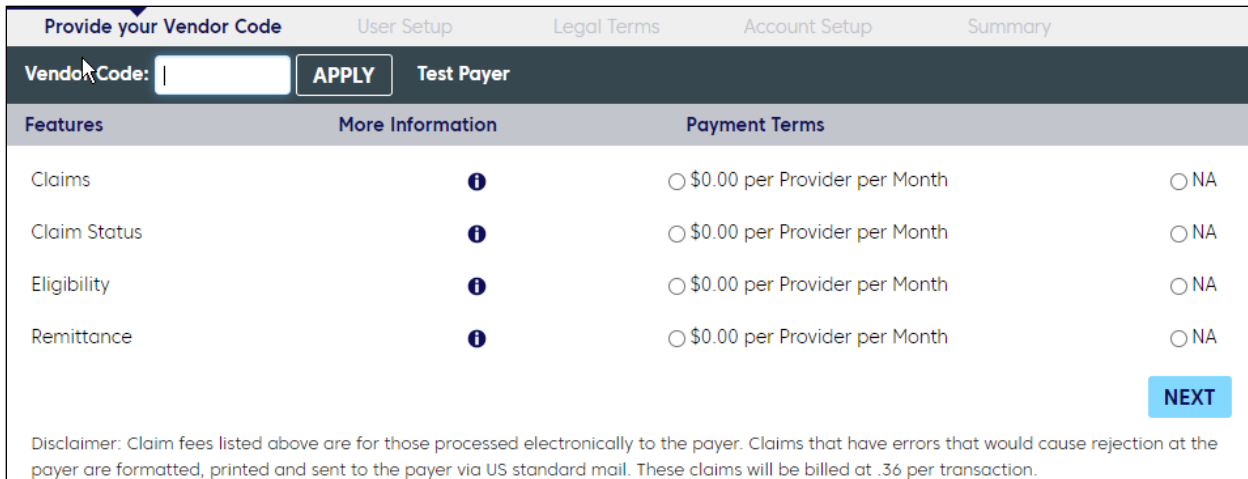
[Step 5 - Summary](#)

## Step 1 – Select the Features

The list of features displayed in the first step depends on what your sponsoring payer has elected to offer.

To select the features you wish to use, click the radio button next to the “**\$0.00 per Prover per Month**” label, for any transaction that is of interest. Select the radio button for Not Applicable (NA), for any feature you do not need.

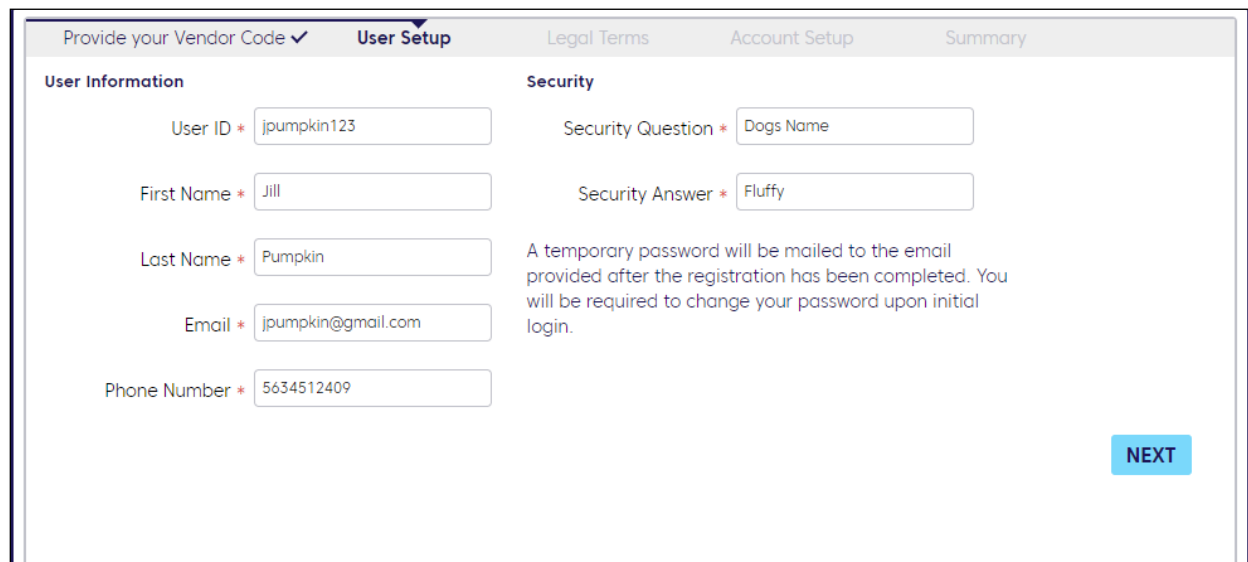
As indicated by the \$0.00 price, each of these features is completely free to you. Note that the disclaimer at the bottom of this page does not apply to you. Paper claims will not be sent.



Features	More Information	Payment Terms
Claims		<input type="radio"/> \$0.00 per Provider per Month <input type="radio"/> NA
Claim Status		<input type="radio"/> \$0.00 per Provider per Month <input type="radio"/> NA
Eligibility		<input type="radio"/> \$0.00 per Provider per Month <input type="radio"/> NA
Remittance		<input type="radio"/> \$0.00 per Provider per Month <input type="radio"/> NA

## Step 2 – User Setup

On the User Setup page, complete the information needed to set up your user id. All fields on this page are required.



User ID *	<input type="text" value="jpumpkin123"/>	Security Question *	<input type="text" value="Dogs Name"/>
First Name *	<input type="text" value="Jill"/>	Security Answer *	<input type="text" value="Fluffy"/>
Last Name *	<input type="text" value="Pumpkin"/>	A temporary password will be mailed to the email provided after the registration has been completed. You will be required to change your password upon initial login.	
Email *	<input type="text" value="jpumpkin@gmail.com"/>		
Phone Number *	<input type="text" value="5634512409"/>		

- User ID
  - Minimum of 5 characters, maximum of 15 characters
  - Character types allowed: alpha, numeric, underscores and dashes
  - Must contain at least one alpha character
  - Is **not** case sensitive (In other words, a user who creates an ID of JOHNDOE will be able to login by entering johndoe on the login screen.)
- First Name

- Maximum of 30 characters
- Last Name
  - Maximum of 30 characters
- Email
  - You must use a valid email address as you will not be able to login unless we can email you your temporary password.
- Phone Number
  - No Dashes or other punctuation marks
- Security Question
- Security Answer

A temporary password will be mailed to you after the registration process has been completed. You will be required to reset your password upon initial login to the website

### Step 3 – Legal Terms

On the **Legal Terms** page, read the terms and conditions for using ConnectCenter.

To use the Services, you must:

Yes, I agree to these terms and conditions.

Next

If you agree with the terms and conditions, click 'Yes, I agree to these terms and conditions.' Please note that although these terms contain provisions for payment and price increases, the sponsoring payer has agreed to be responsible for all charges arising from your use of this ConnectCenter account.

### Step 4 – Account Setup

On the Account Setup page, please provide the basic information about your organization. Except for Address Line 2, all fields are required and must be completed.

Provide your Vendor Code ✓    User Setup ✓    Legal Terms ✓    **Account Setup**    Summary

**Organization Address**

Organization Name \* My Business

Address Line 1 \* 123 Main St

Address Line 2

City \* Dubuque

State \* IA

Zipcode \* 52003

**Contact Information**

Contact Person First Name \* Jill

Contact Person Last Name \* Pumpkin

Primary Phone \* 5634567890

Primary Fax \* 5634561234

Email \* jpumpkin@gmail.com

CANCEL    SUBMIT

- Organization Name
  - Maximum 50 characters
  - Allowed character types: alpha, numeric and space characters only
- Address Line 1, Address Line 2
  - Maximum of 50 characters (each)
- City
  - Maximum of 30 characters
- State
- Zip Code
- Contact Person First Name, Contact Person Last Name
  - Maximum of 24 characters (each)
  - Allowed character types: alpha, numeric and space characters only; no other characters allowed
- Primary Phone
  - No Dashes or other punctuation
- Primary Fax
  - No Dashes or other punctuation
  - If your organization does not have a fax number, you can provide a false number as long it follows the phone number format
- Email
  - Must be a valid email address. Maybe the same or different from the previously provided email address.

#### Step 5 – Summary

On the **Summary** page review each of the critical values displayed:

- Submitter ID – Take note of this ConnectCenter generated ID, as it will be needed to identify your practice or facility in the future.
- Biller ID, - This code is the ConnectCenter identifier for the payer sponsoring your use of ConnectCenter. We recommend you record it for future use.
- Submitter Name – Validate that your organization name has been correctly captured.
- User ID- You must use this credential to login to Connect Center.
- Features selected – Validate that all features you wish to use have been selected.

Click 'DONE' when finished.

You will receive TWO emails from Change Healthcare. One containing the Welcome letter and the second containing your temporary password. Using the password from the second email, you must login to ConnectCenter and choose a permanent password.

Please allow up to an hour for these emails to arrive in your inbox.



These emails will be from [DBQTSHENROLLMENTS@CHANGEHEALTHCARE.COM](mailto:DBQTSHENROLLMENTS@CHANGEHEALTHCARE.COM). Please check your spam and junk folders prior to reaching out to Change Healthcare.

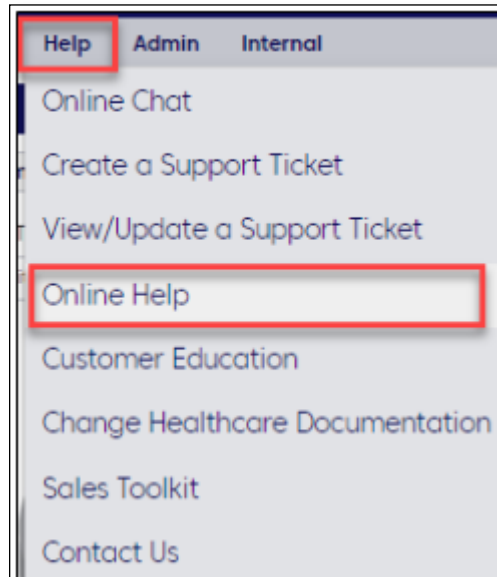
Once you've reset your password, you may begin submitting eligibility and claim status transactions immediately (providing that the payer supports these features and you've elected to use them).

- 📄 Please note that claims submitters must wait one business day after registration to begin submitting claims.

#### Getting Help While Using Connect Center

Once logged in to ConnectCenter, Online Help is available to guide you through populating and submitting claims online.

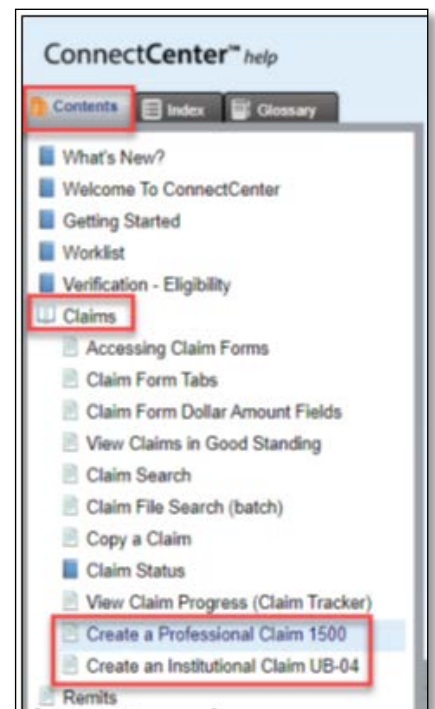
Go to the ConnectCenter **Help** menu and select **Online Help**.



Once Online Help opens, you can navigate to the feature with which you need help. For example, if you have a question about creating a claim, you would open the Claims topic and then select **Create a Professional Claim 1500** or **Create an Institutional Claim UB-04**.

In addition to online help, additional Getting Started guides, like this one, are available on most other key features in Connect Center. The downloadable Getting Started guides may, in some cases, contain details not available in Online Help such as:

- Vendor or Payer IDs associated with your account
- Explanation of the differences between the way something works in Connect Center and the way a similar feature worked in Emdeon Office.





## Frequently Asked Questions

### Q. When will I receive my new password?

A. Your password will be emailed to you within a few hours of the time that you sign up for ConnectCenter. You will likely receive a **separate** welcome email prior to receiving your new password. If you are eager to get started and don't want to wait for your password to be delivered, you can use the [Forgot Password?](#) link on the ConnectCenter login page to choose a new password. Do keep in mind, however, that you must wait one business day after your account is created before you may submit claims.

### Q. What is my Vendor Code?

A. If you access the ConnectCenter sign-up screen from the ConnectCenter login page, rather than from the link included above, you will be required to enter a vendor code before you can sign up. The vendor code that you should enter is **214564**. For your convenience, this code will be automatically supplied when you access the Sign Up process from [here](#), or from the button provided on the Office login page. FYI, the vendor code **214564** will also be referred to in ConnectCenter as your biller code. This identifier indicates that your account is sponsored by Aetna Better Health Plan.

### Q. Why doesn't the Next button work when I try to Sign Up? What do I do when I get the error: "You must select a feature before continuing"?

A. On the first page of the Sign Up screen, please be sure to select the radio buttons next to "\$0.00 per Transaction" in each row. Do not select the circles next to NA as doing so would prevent you from obtaining access to corresponding feature.

### Q. How do I associate the providers in my office to my new account?

A. You should add your providers by logging into ConnectCenter and then choosing Admin, and then Provider Management from the ConnectCenter main menu. For more details see [Getting Started with Provider Management](#). Note, that the first time you access Provider Management to add providers, you should click "search" on the opening page without entering ANY data in any of the fields provided. This tip and additional instructions are available in the Getting Started guide.

### Q. How do I use Provider Management if I am an atypical provider and do not have an NPI?

A. When creating or editing a provider, atypical providers should change the ID Type field from NPI to API, and then enter the atypical provider identifier into the ID field. In some cases the atypical ID may be your Tax ID. Whether your atypical provider ID and tax ID are the same or different, you have the option to also enter your Tax ID in a separate Tax ID field. When performing an eligibility inquiry, provider information will use an NPI if you have one, followed by a Tax ID if there is no NPI. Atypical ID will be selected only for provider records that do not contain NPI or Tax ID. When using the provider directory to help create a claim, only NPI is currently retrieved.

### Q. What is a submitter ID? or a biller ID?

A. ConnectCenter assigns an ID called a submitter ID to each provider office or provider organization. This arbitrary 6 digit number will be displayed next to the name of your practice at the top of the ConnectCenter window. While you don't need to memorize the number, it will be included on most reports and also in service interactions with our customer support team. The billing ID identifies your account as sponsored by Aetna Better Health Plan and will be shared by your account and all other accounts also sponsored by Aetna Better Health.

## Need Help?

- Call (800) 527-8133, option 2 for questions about:
  - submitting NEW claims
  - eligibility
  - claim status
- Call (877) 667-1512, option 2 for questions about:
  - the status of OLD claims
  - access to Reporting & Analytics