

**Aetna Better Health® of
Oklahoma**
777 NW 63rd Street, Suite 100
Oklahoma City, OK 73116



May 9, 2024

Notice of Aetna Better Health® of Oklahoma SoonerSelect claims and encounters front end edits

This letter is being shared with you to ensure your medical office is aware of current compliance edits. Together, we can reduce the impact and disruption to your billing operations.

The Oklahoma Health Care Authority is required by the 42 CFR § 438 Subpart H to verify that all providers, provider groups, and affiliations who wish to provide services to SoonerSelect members have their enrollment verified. This requirement applies to contracted Managed Care Organizations (MCOs), as well [aligns to rules 438.6 (b)(1) and 438.6(b)(2)]. In Oklahoma, the Oklahoma Health Care Authority requires contracted MCOs to verify that all providers, provider groups, and their affiliates who wish to provide Medicaid services are actively enrolled in the program prior to rendering services to SoonerSelect members.

Aetna Better Health has prepared clean claim edits to ensure compliance with the Oklahoma Health Care Authority rules and edits. **Aetna Better Health** began enforcement of these edits on April 1, 2024. **The clean claim edits will deny EDI claims and paper claims when a unique effective Medicaid ID cannot be found on the SoonerSelect registry for any of the following provider categories:**

Professional claims - 837P or CMS-1500	Institutional claims - 837I or UB04
Billing provider 2010AA/Box 33A	Billing provider 2010AA or Box 56
Rendering provider 2310B/2420A or Box 24J	Rendering loop 2310D/2420C or Box 79 with 82 Qualifier
Referring provider 2310A/2420F or Box 17B with DN Qualifier	Referring Loop 2310F/2420D or Box 79 with DN Qualifier
Ordering/prescribing provider 2420E or Box 17B with DK Qualifier	N/A
Supervising provider 2310D/2420D or Box 17B with DQ Qualifier	N/A
N/A	Attending provider 2310A or Box 76

Providers are responsible for resolving any State registration issues and are not

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permitted to balance bill the Medicaid subscriber.

Providers of **Aetna Better Health®** SoonerSelect members must be registered with SoonerSelect, using their National Provider Identifier (NPI), Taxonomy Code Practice address and billing address. Registration must occur prior to rendering services to the plan's membership. Atypical providers are not required to have a National Provider ID (NPI). The health plan will perform edits based on the SoonerSelect ID submitted using the G2 qualifier in the rendering and/or billing loops.

Providers can initiate and verify enrollment using this link:

[Oklahoma.gov/OHCA/Providers/Provider-Enrollment](https://oklahoma.gov/OHCA/Providers/Provider-Enrollment)

As of April 1, 2024, providers are required to submit claims with the billing and/or rendering, provider taxonomy codes that are consistent with the registered specialty and services being rendered. **Aetna Better Health** will **DENY** the claim if the taxonomy code is not submitted for either the billing or rendering NPI. **Aetna Better Health** strongly encourages sending the taxonomy codes associated to the referring and attending provider types when included on the claim. Please follow the billing guidelines outlined in:

- [WPC-EDI.com](https://www.wpc-edi.com) when submitting EDI 837I/837P claims
- [NUCC.org](https://www.nucc.org) when submitting professional CMS-1500 claim forms
- [NUBC.org](https://www.nubc.org) when submitting institutional UB-04 claim forms

The following page provides **general taxonomy** billing guidance based on the sources cited above.

EDI submitters

- **Aetna Better Health** is requiring taxonomy submissions in:
 - Professional claim: loop AND segment 2310B-PRV or loop and segment 2000A-PRV, send both when billing and rendering are different.
 - Institutional claim: loop and segment 2000A-PRV

Paper CMS-1500 (v02-12) forms

- **Aetna Better Health** will require taxonomy codes in either Box 24J shaded area or box 33



Rendering provider taxonomy: box 24 J shaded area

Q. DAYS ON LINE	R. SPEC. FREQ. (P)	L. ID. QUAL.	RENDERING PROVIDER ID. #
		ZZ	Taxonomy 10#s
		NPI	10 digit NPI
		NPI	

REF INFORMATION

Billing provider taxonomy: box 33B

Organization Name 1st line	Street Add (2nd line)
Suite (3rd line) and City, state and Zip (Last Line)	
10 digit NPI	ZZ Taxonomy 10#s

APPROVED OMB-0938-1197 FORM 1500 (02-12)

- In addition, **Aetna Better Health®** highly encourages taxonomy be submitted in **Box 17a** with the “ZZ” qualifier when submitting referring provider information as seen below.

Referring provider taxonomy: box 17A

17. NAME OF REFERRING PROVIDER OR OTHER SOURCE	17a. ZZ Taxonomy 10#s
DN Referring Prov LName, FName	17b. NPI 10 digit NPI

19. ADDITIONAL CLAIM INFORMATION (Designated by NUCC)

Paper UB-04 forms

- Aetna Better Health** will require taxonomy codes in **Box 81** is the “B3” qualifier as seen below.

81CCA a	B3	Taxonomy Code
	b	
	c	
	d	

8-0997 **NUBC** National Uniform Billing Committee

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- In addition, **Aetna Better Health®** highly encourages taxonomy be submitted in **Box 76** with the “ZZ” qualifier when submitting attending provider information as seen below.



For each denied claim, **Aetna Better Health** will send a remittance with the appropriate corresponding CARC/RARC codes and descriptions based on the edit that is applied to the claim. Please refer to the table below for edit remittance details.

If you have any questions about our claim submission processes, please contact our Claims Inquiry/Claims Research (CICR) Department by calling **1-844-365-4385**.

Thank you,
Provider Relations

Aetna Better Health
ABHOKProviderEngagement@Aetna.com
AetnaBetterHealth.com/Oklahoma

Resource Links:

- Oklahoma.gov/OHCA/Policies-And-Rules/Xpolicy/Managed-Care/Requirements-For-Managed-Care-Organizations-And-Dental-Benefits-Managers/Provider-Requirements/Provider-Contractsand-Credentialing-Standards.html
- Oklahoma.gov/OHCA/Providers/Updates/Global-Messages/2011-Global-Messages.html
- [2013 Global Messages \(oklahoma.gov\)](http://2013GlobalMessages.oklahoma.gov)
- [Provider Billing and Procedures Manual.pdf \(oklahoma.gov\)](http://ProviderBillingandProceduresManual.pdf.oklahoma.gov)