

# Important information



## Reminder: claims submission and timely filing

Aetna Better Health®  
of Oklahoma

**Date:** June 24, 2025

**To:** All Provider Partners

**From:** Aetna Better Health® of Oklahoma Provider Relations

Dear Provider Partners,

As part of your contractual obligations with Aetna Better Health, all claims for services provided to our members must be submitted within the required timeframes outlined below. Please review and ensure compliance with these timely filing requirements:

### New claim submissions

Claims must be filed on a valid claim form within **six (6) months** from the date services were performed, unless a specific contractual exception applies.

Note: For hospital inpatient claims, the "date of service" refers to the member's discharge date.

### Claim resubmissions

When resubmission is necessary, claims must be resubmitted within an additional **six (6) months** from the original date of service.

The recipient of this fax may make a request to opt-out of receiving telemarketing fax transmissions from Aetna. There are numerous ways you may opt-out: The recipient may call toll-free 877-265-2711 and/or fax the opt-out request to 1-888-263-9488, at any time, 24 hours a day/7 days a week. The recipient may also send an opt-out request via email to [do\\_not\\_call@aetna.com](mailto:do_not_call@aetna.com). An opt out request is only valid if it (1) identifies the number to which the request relates, and (2) if the person/entity making the request does not, subsequent to the request, provide express invitation or permission to Aetna to send facsimile advertisements to such person/entity at that particular number. Aetna is required by law to honor an opt-out request within thirty days of receipt. An opt out request will not opt you out of purely informational, non-advertisements, such as prior authorization requests and notices.

### Connect with us

Has your office relocated or changed a fax or phone number lately?

Do you offer telehealth services?

Would you prefer to receive the notices via email rather than fax?

For questions call the provider services team at:

Toll Free: **1-844-365-4385**  
**[ABHOKProviderEngagement@Aetna.com](mailto:ABHOKProviderEngagement@Aetna.com)**

This provider update has been sent to:

Provider type(s) -

- ☒ IPA/Medical groups
- ☒ Primary care providers
- ☒ Specialist providers
- ☒ Hospitals
- ☒ Ancillary
- ☒ SNF
- ☒ DME
- ☒ Home health

Line of business:

- ☒ SoonerSelect

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### Exceptions to resubmission deadline

The six-month resubmission deadline may be extended only under the following circumstances:

- Administrative correction or action taken by Aetna Better Health to resolve a dispute
- Reversal of member eligibility determination
- Investigation for provider fraud or abuse
- Court order or hearing decision

### Important notice

Failure to submit claims within the prescribed timeframes may result in payment delays and/or claim denials.

Thank you for your prompt attention to this important notification.

For questions regarding this communication, please contact Provider Relations at:

[\*\*ABHOKProviderEngagement@aetna.com\*\*](mailto:ABHOKProviderEngagement@aetna.com)

Be well,

**Aetna Better Health® of Oklahoma**