

Aetna Better Health® of West Virginia

Provider Information for Claims Submission and Payment

Key Points for Residential Providers

- Providers may submit claims electronical or by paper.
 - Electronic Submission
 - Payer ID # 128WV
 - Change Healthcare is ABH of WV's Clearinghouse
 - Paper Claims are to be Submitted to:
 - Aetna Better Health of WV,
PO Box 67450,
Phoenix, AZ 85082-7450
- Timely filing for initial clean claim is 365 days from DOS
- Timely filing for corrected claims or documents requested for review is 120 days from the original remittance date
- Claim reconsiderations must be submitted with copy of claim and medical records to the claims address above with the reconsideration form, or cover letter stating it is a reconsideration
- Aetna will be following State billing guidelines for H0019 treatment code
 - H0019 should be the first line of the claim, with all billed charges
 - Detail codes should be on subsequent lines with \$0 billed charges
 - Codes billable outside the bundled rate should be submitted on a separate HCFA 1500 form

We trust you and your staff will find these instructions helpful. If you have questions regarding these instructions or other matters related to your Aetna Better Health of WV



participation feel free to contact Sarah White, our Provider Relations Manager (304-348-2089, SEWhite@aetna.com)

