

# Aetna® update on Change Healthcare service interruption

Updated on March 18, 2024

On February 21, Change Healthcare took several of their services offline in response to a cyber security incident they experienced. As communicated before, this impacted certain Aetna business operations, and there remains no indication that Aetna's systems have been compromised.

Aetna uses Change Healthcare as an intermediary for certain Electronic Data Interchange (EDI) transactions across all our business lines. Additionally, we are aware that many of our Aetna network providers may use Change Healthcare to transmit claims information to us.

From the start, we committed to ensuring access to care as we navigated the network disruption and advanced on business continuity plans, some of which included new solutions and vendors. As of this week, we've made the following progress:

- Submission of claims for Commercial, Individual and Family Plans and Medicare has moved from Change Healthcare to other approved [clearinghouses](#) or to our existing medical or dental portals. For Medicaid claims, providers are using Office Ally. The claims submission volume we are seeing indicates many providers are successfully using the available channels to submit their claims.
- For payment of Commercial, Individual and Family Plans and Medicare claims, check payments began going as of the end of February and virtual credit card payments will continue over the coming week, with electronic fund transfers continuing normally.
- There was a disproportionate impact to payments of Medicaid claims, and we apologize for that inconvenience. We are using ECHO Health to process Medicaid claims payment to providers and payments have started.
- Prior authorization submissions moved from Change Healthcare to other clearinghouses or to our existing medical or dental portals. The prior authorization submission volume we are seeing indicates many providers are using different channels to submit their prior authorization requests. As such, we are not liberalizing our prior authorization requirements at this time.

This bulletin gives information to our network providers experiencing impact from the Change Healthcare network disruption. Below is a set of Frequently Asked Questions that address the mitigation plans in place for providers to complete transactions with Aetna. We will continue to share additional information as it becomes available.

## **What progress has Aetna made on restoring operations impacted by the Change Healthcare service interruption?**

Since the Change Healthcare service interruption began on Feb. 21, we have focused on transitioning impacted operations as quickly as possible to enable network providers to complete transactions with Aetna. We have also actively worked to keep our network providers, state and federal regulators, members and customers informed based on the latest information.

**Claims submission:** Providers have the ability to use our existing medical provider portal hosted by Availity or dental provider portal hosted by Dental Exchange, or enroll with one of our approved electronic transaction vendors to submit claims to Aetna. For Medicaid claims, providers should use Office Ally. Based on the claims submissions we have received in recent weeks, many providers are successfully using an alternate method to submit their claims.

Prior authorization: Providers have the ability to use our existing medical provider portal hosted by Availity or dental provider portal hosted by Dental Exchange, or enroll with one of [our approved electronic transaction vendors](#) to submit prior authorization requests to Aetna. For Medicaid claims, providers need to use Availity to submit electronic prior authorization requests. Based on the claims submissions we have received in recent weeks, many providers are using an alternate method to submit their prior authorization requests. Because of this, we are not liberalizing our prior authorization requirements at this time.

Provider payment: For Medicaid claims payment, which was disproportionately impacted by the Change Healthcare service interruption, we are using ECHO Health to process Medicaid claims payment to providers, and payments have started. For payment of Commercial, Individual and Family Plans and Medicare claims, check payments began going out as of the end of February and virtual credit card payments will continue going out over the coming week. EFT payment operations were not impacted by the service interruption.

## What mitigation plans are in place for claims submissions while the service interruption continues?

**For Aetna Commercial, Individual & Family Plan and Medicare:** We've been advising our network providers who directly use Change Healthcare for EDI transactions for Aetna to stay "digital first" and use one of our other business partners for their electronic transactions until Change's service interruption is resolved. Here is [a list](#) of our approved electronic transaction vendors.

Providers can also use our existing medical provider portal hosted by [Availity](#) or dental provider portal hosted by [Dental Exchange](#) or electronic claims submission.

If providers work through a billing partner, practice management system or other vendor partner, they likely can advise on an alternate connection method for electronic transactions with Aetna.

Finally, when digital submission isn't possible, providers can also reach out to our Aetna provider contact centers about submitting paper claims. A [list of phone numbers](#) is available for providers to select from based on the specific transaction they are calling about.

**For Aetna Better Health (Medicaid) plans:** Providers need to use Office Ally for electronic claims submissions.

**For plans administered by Meritain Health:** Providers can use one of our other business partners for their electronic transactions until Change Healthcare's service interruption is resolved. Here is a list of our approved electronic transaction vendors. Providers can also use the medical provider portal hosted by Availity. Select Aetna from the [list](#) of payers and claims will be redirected to Meritain Health. In addition, providers can register on the PCH Portal at <https://pchhealth.global/> using the promo code Exela-EDI to submit claims to Meritain Health free of charge. Finally, when digital submission isn't possible, providers can submit paper claims using the mailing instructions on the member's ID card.

## How do network providers get access to Availity?

Providers need to register to use Availity; many of our network providers already are registered, but do not currently use the portal. Availity offers provider training, and Aetna is considering any additional support needed. Availity is a multi-payer portal and has confirmed with Aetna they are prepared to handle an increased volume of digital transactions during the Change Healthcare service interruption, which has had a nationwide industry impact. You can learn more about Availity [here](#).

## What should providers do about claims submitted prior to the Change Healthcare service interruption that are still pending or outstanding?

**For Medical claims:** Providers who have pending or outstanding claims that were submitted prior to the Change Healthcare service interruption on Feb. 21 should resubmit those claims and any correlating electronic attachments through another clearinghouse or the Availity portal. Here is [a list](#) of our approved electronic transaction vendors. Providers need to use Office Ally for electronic submission of Medicaid claims.

**For Dental claims:** Providers who have pending or outstanding dental claims that were submitted with attachments prior to the Change Healthcare service interruption on Feb. 21 should resubmit those claims, including attachments, through NEA/Vyne or Dental Exchange. If you have already resubmitted these claims, after Feb. 21, through NEA/Vyne or Dental Exchange, then there is no need to resubmit. If you are unsure where your original claim was submitted, please check with your practice management vendor.

## How do providers get access to Office Ally?

Providers can register at [cms.officeally.com](https://cms.officeally.com)

## Will Aetna extend or waive “timely filing” policies on claims processing?

We are assessing the need for this based on current claims submission activity.

## What alternative methods do providers have to submit “member eligibility and benefits” checks?

**For Aetna Commercial, Individual & Family Plan and Medicare:** We’ve been advising our network providers who directly use Change Healthcare for EDI transactions for Aetna to stay “digital first” and use one of our other business partners for their electronic transactions until Change’s service interruption is resolved. Here is [a list](#) of our approved electronic transaction vendors.

Providers can also use our existing medical provider portal hosted by [Availity](#) or dental provider portal hosted by [Dental Exchange](#) for member eligibility and benefit checks.

If providers work through a billing partner, practice management system or other vendor partner, they likely can advise on an alternate connection method for electronic transactions to Aetna.

Finally, when digital submission isn’t possible, providers can utilize the Aetna Voice Advantage system. A [list of phone numbers](#) is available for providers to select from based on the specific transaction they are calling about.

**For Aetna Better Health (Medicaid) plans:** Providers need to use Availity to submit electronic member eligibility and benefits.

## Will you start to temporarily liberalize some policies such as prior authorization requirements to help further ensure member access to care while the service interruption continues?

We are not liberalizing any policies at this time. We have assessed the situation over the last few days and the alternative processes in place – in addition to available Aetna phone call support – should help us manage this important utilization management step with our network providers during this time. If this changes, we will provide an update.

## For providers who have not been paid yet at this time, will you issue advanced payment?

We take the matter of timely claims payment to our network providers very seriously and we recognize the disproportionate impact of the Change Healthcare service interruption on payment of Medicaid claims. We now have a solution in place with ECHO Health for Medicaid claims payments. We are expediting getting claims payments to providers and payments have started. While claims payments are being processed, Aetna will continue to help alleviate unusually difficult financial circumstances for providers submitting Medicaid claims on a case-by-case basis.

## What mitigation plans are in place for electronic remittance advice (ERA) files?

Providers that are currently enrolled with Change Healthcare to receive their electronic remittance advice (ERA) files for Commercial, Individual and Family Plans and Medicare claims have two options:

- [ERA/EFT enrollment form](#) for medical providers for Commercial, Individual and Family Plans and Medicare claims.
- [ERA/EFT enrollment form](#) for dental providers for Commercial, Individual and Family Plans and Medicare claims.

For Medicaid claim payments, ECHO Health will distribute Electronic Remittance Advice (ERA) files. Providers will receive ERA files electronically based on their information on file and, for those who have not signed up to receive ERA files electronically, they will receive paper ERA files.

Providers who submitted Medicaid claims do not need to take additional action at this time to receive claims payment or remittance files through the new vendor, ECHO Health.

- If you have questions about claims payments, please call the customer service number on your Explanation of Provider Payment.
- Providers that want to update their payment/ERA distribution preferences for Medicaid claims payment may do so [here](#).

Providers cannot create an electronic connection directly with Aetna to receive ERA files; a vendor must be utilized to receive these files.

## What mitigation plans are in place for provider payments?

**Medicaid claims payment:** We've moved to a new vendor, ECHO Health, to process and distribute Medicaid claims payments to providers. Because ECHO Health is a national payment solutions supplier, we were able to readily transition data to support Medicaid claim payment operations after careful system and quality testing. We are expediting claims payments to providers and payments have started.

**Commercial, Individual and Family Plans, and Medicare claims payment:** Please keep in mind that EFT payments for Commercial, IFP and Medicare claims were not impacted by the Change Healthcare service interruption. However, check payments began going out as of the end of February and payments to providers enrolled to receive VCC payment will continue over the coming week. Providers do not need to take additional action to receive check or VCC payment for their submitted claims for Commercial, Individual and Family Plans, or Medicare.

## Will interest payments be included in any payments that are past "timely payments" deadlines as a result of this service interruption?

We are working to assess the impact to claim payments and will share more at a later date.

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