

Frequently Asked Questions (FAQs)

TOPIC	Question & Answer
Provider Website	Provider website for Kansas, aetnabetterhealth.com/kansas/providers
Provider Manual	Provider Manual, aetnabetterhealth.com/kansas/providers/manual
Authorization information on the provider website	<ul style="list-style-type: none"> • Authorization information aetnabetterhealth.com/kansas/providers/resources/authorization • Want to see if a procedure code requires authorization? aetnabetterhealth.com/kansas/providers/authorization-search
ERA/835	<p>Post remits electronically with an 835-file? Information on how to register to post electronic remits can be found here:</p> <ul style="list-style-type: none"> • Complete the ERA registration form located on the provider website under forms ERA, aetnabetterhealth.com/kansas/providers/resources/forms • E-mail the completed form to ProviderExperience_KS@aetna.com <p>If you have questions about completing the ERA registration form, please reach out to the Provider Relations team at 1-855-221-5656 or email questions to ProviderExperience_KS@aetna.com.</p>
EFT	<p>If a Provider wishes to receive payments electronically the information needed to register to receive payments electronically can be found here:</p> <ul style="list-style-type: none"> • Complete the EFT registration form located on the provider website under forms, then EFT aetnabetterhealth.com/kansas/providers/resources/forms • E-mail the completed form to KSFinanceEFTEnrollment@aetna.com <p>Questions about completing the EFT registration form? Send an email to KSFinanceEFTEnrollment@aetna.com to get answer to questions about the EFT process.</p> <p>Reminder, don't forget to include all group/facility NPIs numbers where applicable.</p>

Secure Provider Portal	<p>The provider portal allows the provider to review eligibility, submit and review authorizations, check claims status and communicate with Aetna Better Health of Kansas. Here is the information needed to complete secure provider portal registration:</p> <ul style="list-style-type: none"> • Complete the Provider Web Portal Registration Form located on the provider website under Forms, aetnabetterhealth.com/kansas/providers/resources/forms • E-mail the completed form to ProviderExperience_KS@aetna.com <p>Once registration has been processed, two (2) e-mails related to your portal account access will be sent to you. The e-mail may take up to 24 hours to be generated; please check trash and spam filters as well:</p> <ul style="list-style-type: none"> • One (1) e-mail will include username and provider ID information • One (1) e-mail will include a link with which to verify username and provider number • Once account is verified, go to the provider website to access the Secure Provider Portal aetnabetterhealth.com/kansas/providers/portal
Claim Submission	<p>Claim submission information available on our website aetnabetterhealth.com/kansas/providers/resources/claims</p>
Contact Aetna Better Health via Phone	<p>For general inquiries call 1-855-221-5656 select * for providers and follow the prompts to be routed to the Provider Services Call Center Team.</p>
Contact Aetna Better Health via e-mail	<p>Provider Experience: ProviderExperience_KS@Aetna.com</p> <p>Contracting: Contracting_KS@Aetna.com</p> <p>Case Management: AetnaBetterHealthKSCM@Aetna.com</p>
Locating provider liaisons	<p>Go to aetnabetterhealth.com/kansas/providers Select For Providers at the top of the page.</p> <p>Scroll down to select:</p> <ul style="list-style-type: none"> • Contact Your Provider Experience Representative/provider liaison

<p>Role of the provider liaison</p>	<p>How your provider liaison can help you</p> <p>Provider liaisons are tasked with educating providers about policies and processes as well as handle other inquiries:</p> <ul style="list-style-type: none"> • Claims questions, inquiries and reconsiderations • Review claims or remittance advice • Submitting prior authorizations through the Secure Web Portal (Note: Providers may also call Utilization Management department 1-855-221-5656 or fax prior authorizations directly to: 1-855-225-4102) • Locating forms • Finding a participating provider or specialist • Assisting with provider contracting • Provide information about how to update location /address changes, provider terminations; via the KMAP system • Obtaining a secure web portal ID or member care Login ID • Schedule trainings • Schedule site visits/meetings with provider’s liaison
<p>Aetna Better Health Contracting/ Credentialing</p>	<p>Visit aetnabetterhealth.com/kansas/providers/join to obtain information about joining the Aetna Better Health of Kansas network.</p> <p>There are many great reasons to join the Aetna Better Health of Kansas network:</p> <ul style="list-style-type: none"> • Provider Experience staff work hard to understand business issues and meet providers’ needs, whether a primary care physician or a home- and community-based provider • Ongoing support and learning opportunities • Claims are processed in a timely and efficient manner • Receive competitive compensation • Access to advanced technology that can help enhance patient care <p>To be an Aetna Better Health of Kansas network provider, start by registering at the Kansas Medicaid Assistance Program (KMAP) enrollment system. This is a requirement of the Title 42 Code of Federal Regulations (CFR) §438.602(b)(1). This rule applies to all provider types and specialties and is inclusive of the billing, rendering, ordering, prescribing, referring, sponsoring, and attending providers.</p> <p>To register, please visit the website below to locate the Kansas Medicaid Assistance Program (KMAP) enrollment page.</p> <p>KMAP- Enrollment and Contract Status 1-800-933-6593, Monday through Friday 8 a.m. - 5 p.m. Central time, excluding State holidays.</p>

Dental services and vision services are provided through [SkyGen](#). To contract directly with SkyGen, please call the SkyGen Contracting Team at **1-800-508-6965**.

Questions about if becoming a participating provider, please call **1-855-221-5656**. The provider service call center staff will assist you. If they are unable to verify your information, please contact your provider liaison.

Claim Denial Resolution

Claims not processing as expected? Providers may file a reconsideration, appeal or a state fair hearing. Here are the details related to this sequentially stepped process:

Reconsideration	Appeal	State Fair Hearing
<p>Why should a provider submit a reconsideration?</p> <ul style="list-style-type: none"> • When a claim underpays or denies inappropriately • It is no longer a requirement to request a reconsideration prior to requesting an appeal 	<p>Why should a provider submit an appeal?</p> <ul style="list-style-type: none"> • When a claim underpays or denies inappropriately • When the reconsideration response letter was denied 	<p>Why should a provider submit a state fair hearing?</p> <ul style="list-style-type: none"> • When a claim underpays or denies inappropriately, and the appeal resolution letter was upheld
<p>When does a reconsideration need to be submitted?</p> <ul style="list-style-type: none"> • 120 calendar days from remit date or letter notification date (plus three calendar days for mailing) 	<p>When does and appeal need to be submitted?</p> <ul style="list-style-type: none"> • 60 calendar days (plus three calendar days for mailing) from the remit date or reconsideration response letter date. 	<p>When does a state fair hearing need to be submitted?</p> <ul style="list-style-type: none"> • 120 calendar days from the appeal response letter date (plus three calendar days for mailing) • An appeal must be denied prior to submitting a request for state fair hearing
<p>How can a reconsideration be submitted?</p> <ul style="list-style-type: none"> • Call Provider Experience at 1-855-221-5656 and request a reconsideration to be filed. • Mail a written request to: Aetna Better Health of Kansas 	<p>How can an appeal be submitted?</p> <ul style="list-style-type: none"> • Mail written request to: Aetna Better Health of Kansas Appeal and Grievance Dept. 9401 Indian Creek Parkway, Suite 1300 Overland Park, KS 66210 • Fax written request to 1-833-857-7050 	<p>How can a state fair hearing be submitted?</p> <ul style="list-style-type: none"> • Mail written requests to: State of Kansas Office of Administrative Hearings 1020 S. Kansas Ave. Topeka, KS 66612-1327

	<p>Attn: Reconsideration 9401 Indian Creek Parkway Overland Park, KS 66210</p> <ul style="list-style-type: none"> • Fax a written request to 1-833-857-7050 		
	<p>What information will the provider receive?</p> <ul style="list-style-type: none"> • A written acknowledgement will be sent to the provider within 10 calendar days of receipt • A written response will be sent to the provider within 30 calendar days of receipt 	<p>What information will the provider receive?</p> <ul style="list-style-type: none"> • A written acknowledgement will be sent to the provider within 10 calendar days of receipt • A written response will be sent to the provider within 30 calendar days of receipt 	<p>What information will the provider receive?</p> <ul style="list-style-type: none"> • A written response letter will be sent to the provider that includes subsequent appeal rights: <ul style="list-style-type: none"> - A State Appeal Committee - A Reconsideration through the KDHE-DHCF Secretary - District Court
<p>Member Value Added Benefits</p>	<p><i>What is a member Value Added Benefit (VAB)?</i></p> <p>VABs are services/benefits that are not routinely covered by state Medicaid benefits such as Adult Dental and Vision Care or rewards to the member for obtaining their physical annually.</p> <p>Details about Aetna Better Health VABs are available at: aetnabetterhealth.com/kansas/members/benefits/value</p>		
<p>Overpayments</p>	<p><i>How can a claims overpayment be resolved?</i></p> <p>Please review the Provider Manual available on our website for specific details. aetnabetterhealth.com/kansas/providers/manual</p>		
<p>Known claims issues</p>	<p><i>Where can a provider go to obtain information about known MCO claims issues?</i></p> <ul style="list-style-type: none"> • KMAP Bulletins contain claim issues • www.kmap-state-ks.us/Public/bulletins/bulletinsearch.asp • View entire listing by clicking on the submit button • Select the current KMAP KanCare 2.0 open or closed resolution log 		
<p>Member PCP assignment</p>	<p><i>How can a member change their assigned PCP?</i></p> <ul style="list-style-type: none"> • A member may call 1-855-221-5656 		

	<ul style="list-style-type: none"> • Member can use the Aetna Better Health mobile app • Secure member portal
How does a member choose a PCP?	<p>Member needs to choose a PCP that is in the Aetna Better Health of Kansas provider network. The provider directory has a list of PCPs to choose from in your area. Our online provider search directory is updated nightly and has the most current provider information.</p> <p>Each eligible family member does not have to have the same PCP. If the member doesn't pick a PCP, we will pick one for them.</p>
How does the member change PCPs?	<p>The member's PCP is an important part of their health care team. We want members and their PCP to work together. However, members are able to change PCPs at any time and for any reason.</p> <p>The following examples are some reasons members may want to change PCPs:</p> <ul style="list-style-type: none"> • Prefer a male or a female doctor • Prefer a doctor who speaks their language • Found an in-network doctor closer to home <p>If a member wants to choose or change PCP to another PCP in our provider network, they may call Member Services at 1-855-221-5656, (TTY: 711). PCP changes may also be completed by using the Aetna Better Health mobile app or through the secure member portal.</p> <p>In most case, PCP changes are updated in our system the same day as the request. Members will receive a new Member ID card that reflects the new PCPs name.</p>
What if a member needs a specialist?	<p>Specialists are providers who treat special types of conditions. Primary Care Providers (PCP) may refer members to a specialist in the Aetna Better Health of Kansas network.</p>
What if the member loses their Member ID card or didn't receive one?	<p>The Member should call Member Services at 1-855-221-5656, (TTY: 711), to receive a new Member ID card. Member IDs may also be requested through the Aetna Better Health mobile app or through the secure member portal.</p>
Updating addresses or adding a provider?	<p>Go out to the new KMAP system and update the address in KMAP. Please contact Aetna Better Health of Kansas as well to ensure we receive the information to update our system accordingly.</p>