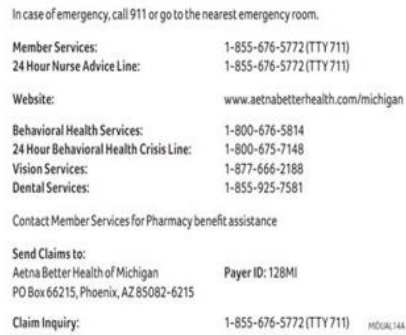


ABH of MI RESOURCES AT A GLANCE

ID Card: Front of card



ID Card: Back of card



- **Aetna Better Health of Michigan home page website:** <https://www.aetnabetterhealth.com/michigan>
- **Aetna Better Health of Michigan Provider Resources:** <https://www.aetnabetterhealth.com/michigan/providers/>
 - Join Our Network, Prior Authorization, Provider Manual, Case/Disease Management, Clinical Practice Guidelines, Provider Portal, Forms, News & Notices, Newsletters, Claims, Training, Resources
- **Availity home page web Portal:** www.availity.com
 - Log in to Essentials or call 1-800-282-4528
- **Availity Portal Tools & Resources:**
 - Eligibility, Claims, Prior Authorizations, PAR Provider Disputes, Grievance and Appeals, Panel Roster and more
- **How to verify member eligibility, PCP assignment, benefits, co-pays/deductibles:**
 - State CHAMPS website: www.michigan.gov
 - ABH Provider Portal: <https://www.aetnabetterhealth.com/michigan/find-provider>
 - Availity Secure Portal: www.availity.com
- **How to File a Claim:**
 - **Electronic Claims Submission (EDI)**
 - Electronic Claims Submission: Change Health (Emdeon) is the EDI vendor we use Medicare and Medicaid <https://www.changehealthcare.com/>
 - Payer ID: 128MI
 - **Paper Claims:**
 - Aetna Better Health OF Michigan PO Box 982963 El Paso, TX 79998-2963
- **Claims Timely Filing:**
 - New Claim: within 365 days from Date of Service
 - COB Claim: within 365 from the date of the COB remittance advice
 - Claim Resubmission: within 180 days from the date of payment or denial
 - Appeals and reconsiderations: 180 days from the original denial for appeal and reconsiderations
- **Prior Authorization online tool:** <https://www.aetnabetterhealth.com/michigan/providers/prior-authorization>
 - Select Prior Authorizations to determine if prior authorization (PA) is required
 - Enter CPT or HCPCS Code (s) up to six can be entered
 - Select Plan
 - ABH of Michigan – MMP Duals (Medicare/Medicaid)
 - Michigan Medicaid-Medicaid/Healthy MI
 - Phone: 1-855-676-5772 Fax: 1-844-241-2495
- **Provider Appeal:**
 - Phone: 866-316-3784 Fax: 866-889-7517
 - Mail: Aetna Better Health of Michigan Attn: Provider Grievance
 - PO Box 818070 5801 Postal Road Cleveland, OH 44181-0040
 - Email: MIAppealsandGrievances@aetna.com
 - Secure Portal: <https://www.aetnabetterhealth.com/michigan/providers/portal>
- **Claims Inquiry Claims Research (CICR) Department:** benefits, eligibility, claim status, appeal status, check tracers, remits, COB, Billing and Coding
 - MI Duals: 1-855-676-5772 Medicaid/Healthy MI: 1-866-316-3784
- **Vendors:**
 - CVS Health Pharmacy Benefits Manager: 1-800-552-8159
 - DentaQuest Dental Benefits Manager: 1-866-316-3784
 - VSP Vision Benefits Manager: 1-800-877-7195
 - Medical Transportation Management: 1-844-549-8347
 - eviCore Health Radiology Benefits Manager: 1-888-693-3211
- **Provider Representatives:**
 - Patti Pogodzinski: pogodzinski@patti@aetna.com

