

April 2021

The Aetna Better Health Plan of Louisiana Claims Submission Portal is Getting an Upgrade!

Aetna Better Health of Louisiana (ABHLA) is pleased to announce the availability of our new and improved solution for verifying member information and submitting claims to Aetna Better Health. Within the next two months, ConnectCenter will replace Emdeon Office, giving you a more reliable, more complete way to submit claims, at no cost to you.

Go [here](#) to begin setting up your account. Once you have received your new credentials, you may immediately begin checking eligibility. Claim submission will be available to you within one business day of setting up your account. Be sure to bookmark the new login page:

<https://physician.connectcenter.changehealthcare.com/#/site/home?payer=214562>.

You will be able to use your ConnectCenter and Emdeon Office accounts at the same time until 5/31/2021. After that date, most of your Emdeon Office account will be deactivated. However, we will provide continued access to old claims by allowing you to log in directly to the Reporting & Analytics feature, within Emdeon Office. See [Ensuring Long Term Access to Claims](#) in this notification for details.

To ensure that you have as much time as possible to transition to ConnectCenter, we highly recommend that you start using it immediately. Refer to the [Resources](#) section in this notification for user guides and to the [Frequently Asked Questions](#) section to help answer any questions you might have.

ConnectCenter includes the following improvements over Emdeon Office:

- Allows both data entry of claims and uploading of 837 files.
- Allows submission of secondary and tertiary claims.
- Supports institutional claims.
- Fully validates claims created online in real-time, allowing for correction in real-time.
- Whether you upload your claims or create them online, your claim reports are integrated with the claim correction screen for ease in follow-up.
- Provides dashboard and work list views, making managing your billing to-do list a snap.
- Provides on-shore customer support by online chat and phone.

Resources

Visit the following links to learn more about ConnectCenter. Be sure to bookmark the links in your browser for future reference.

- [Signing Up](#)
- [Getting Started With Claims](#)
- [Uploading 837 Claims](#)
- [Keying a Professional \(CMS1500\) Claim Online](#)
- [Keying an Institutional \(UB04\) Claim Online](#)
- [Getting Started With Eligibility](#)
- [Getting Started With Claim Status](#)
- [Getting Started with Provider Management](#)

Ensuring Long Term Access to Old Claims

If you wish to retain access to old claims after May 31st, you must establish a Reporting & Analytics account that can be accessed independently of Emdeon Office.

IMPORTANT: Although all claims in Reporting & Analytics remain accessible for 15 months from the date of claim submission, you will be unable to access them after May 31st unless you follow the procedure below to create a user account on access.emdeon.com.

Create a Reporting & Analytics Account

1. Visit <https://access.emdeon.com>, then click Forgot Password.
2. Provide your email address and the same Username you use to access the Emdeon Office Aetna Better Health portal.
Your new password will be emailed to the address you provided.
3. Make note of the Username and Password you received.
4. Bookmark access.emdeon.com in your browser to access Reporting & Analytics in the future.

If you are unable to obtain a new password using the above procedure, please contact customer support for assistance at (877) 667-1512, option 2.

Whether you log in to Reporting & Analytics via access.emdeon.com or access it from the Claims > Reporting & Analytics menu option in the old portal, the functionality will be the same. Both options will allow you to view the details of and track the statuses of claims submitted in Emdeon Office. Rejected claims can be corrected and resubmitted from within Reporting & Analytics.

Frequently Asked Questions

Q. When will I receive my new password?

- A. Your password will be emailed to you within a few hours of the time that you sign up for ConnectCenter. You will likely receive a separate welcome email prior to receiving your new password. If you are eager to get started and don't want to wait for your password to be delivered, you can use the Forgot Password? link on the ConnectCenter login page to choose a new password. Do keep in mind, however, that you must wait one business day after your account is created before you may submit claims.

Q. What is my vendor code?

- A. If you access the ConnectCenter sign-up screen from the ConnectCenter login page, rather than from the link included above, you will be required to enter a vendor code before you can sign up. The vendor code that you should enter is 214562. For your convenience, this code will be automatically supplied when you access the Sign Up process from [here](#), or from the button provided on the Office login page. FYI, the vendor code 214562 will also be referred to in ConnectCenter as your biller code. This identifier indicates that your account is sponsored by Aetna Better Health Plan.

Q. Why doesn't the Next button work when I try to Sign Up? What do I do when I get the error: "You must select a feature before continuing"?

A. On the first page of the Sign Up screen, please be sure to select the radio buttons next to "\$0.00 per Transaction" in each row. Do not select the circles next to "NA" as doing so would prevent you from obtaining access to corresponding feature.

Q. How do I associate the providers in my office to my new account?

A. To add your providers, log into ConnectCenter. From the main menu, select Admin > Provider Management. For more details see [Getting Started with Provider Management](#). Note, that the first time you access Provider Management to add providers, click "search" on the opening page without entering ANY data in any of the fields provided. This tip and additional instructions are available in the Getting Started guide.

Q. How do I use Provider Management if I am an atypical provider and do not have an NPI?

A. When creating or editing a provider, atypical providers should change the ID Type field from NPI to API, and then enter the atypical provider identifier into the ID field. In some cases, the atypical ID may be your Tax ID. Whether your atypical provider ID and tax ID are the same or different, you can also enter your Tax ID in a separate Tax ID field. When performing an eligibility inquiry, provider information will use an NPI if you have one, followed by a Tax ID if there is no NPI. Atypical ID will be selected only for provider records that do not contain NPI or Tax ID. When using the provider directory to help create a claim, only NPI is currently retrieved.

Q. What is a submitter ID? What is a Biller ID?

A. ConnectCenter assigns an ID called a submitter ID to each provider office or provider organization. This arbitrary 6 digit number is displayed next to the name of your practice at the top of the ConnectCenter window. While you don't need to memorize the number, it will be included on most reports and also in service interactions with our customer support team. The billing ID identifies your account as sponsored by Aetna Better Health Plan and will be shared by your account and all other accounts also sponsored by Aetna Better Health.

Need Help?

- Call (800) 527-8133, option 2 for questions about:
 - submitting NEW claims
 - eligibility
 - claim status
- Call (877) 667-1512, option 2 for questions about:
 - the status of OLD claims
 - access to Reporting & Analytics