

Aetna Better Health® of Ohio
7400 West Campus Road
New Albany, OH 43054



Aetna Better Health® of Ohio

New P.O. Box Address and Vendor for Paper Claim and Claim Correspondence – Effective 4/3/2023

P.O. Box **#64205** Will No Longer Be Valid Starting **April 3rd, 2023**

A key factor in getting claims processed in a timely manner is correct claims submission, and ABH provides multiple options for you to choose from, including the sending of paper claims through the mail.

Aetna will be replacing the current vendor, Change Healthcare (CHC), with Conduent for services related to the receipt and imaging of all paper claim and claim correspondence. The change in vendor requires a change in the P.O. Box number and physical location to which any Aetna Medicaid paper claim and correspondence are currently sent, specifically from **P.O. Box #64205 in Phoenix, AZ** to **P.O. Box #982966 in El Paso, TX**.

We are making you aware that the new P.O. box, **#982966**, will be live and reflected electronically anywhere the P.O. box address is currently listed on **April 3rd, 2023**. Once the new P.O. Box is live, mail must be sent to the following address:

New P.O. Box

Aetna Better Health of Ohio
P.O. Box 982966
El Paso, TX 79998-2966

Mail will be forwarded from the old P.O. Box to the new P.O. Box for 12 months after **4/3/2023**. To assist us in processing and paying claims efficiently, accurately, and timely, the health plan highly encourages practitioners and providers to submit claims electronically, when possible.

Additional details can be found in the sections below. If you have any questions about our claim submission process you can contact our Provider Experience Department at 1-855-364-0974.



Important Plan Addresses & Contacts – Beginning 4/3/2023

Type	Physical Address	Phone	Online/Fax/Other
CLAIMS & CLAIMS CORRESPONDENCE		MAIL TO → EL PASO, TEXAS	
Paper Claims & Claim Correspondence	Aetna Better Health of Ohio P.O. Box 982966 El Paso, TX 79998-2966	N/A	Submit claims online or resubmissions through ConnectCenter. Submitter ID# 50023 Provider ID# 0082400
Resubmissions	Aetna Better Health of Ohio P.O. Box 982966 El Paso, TX 79998-2966	N/A	Resubmitted claims should have “resubmission” marked clearly on the claim form to avoid being denied as a duplicate.
Disputes (Reconsiderations) Participating providers	Aetna Better Health of Ohio Attn: PAR Provider Disputes P.O. Box 982966 El Paso, TX 79998-2966		Use the PAR Provider Claims Dispute Form on the plan website. Can also submit a Reconsideration via the secure web portal .
GRIEVANCES & APPEALS		MAIL TO → CLEVELAND, OHIO	
Appeals Non-Participating providers	Aetna Better Health of Ohio Attn: Grievance & Appeals PO Box 818070 Cleveland, OH 44181	Verbal Appeal: 1-855-364-0974	
Grievances Both network and out-of-network providers	Aetna Better Health of Ohio Attn: Grievance & Appeals PO Box 818070 Cleveland, OH 44181	Verbal Grievance: 1-855-364-0974	