

Change Healthcare service interruption update

March 18, 2024

We are grateful to our network providers – and the members you serve – for your patience and flexibility while we work thoughtfully and quickly to restore operations impacted by the Change Healthcare (CHC) service interruption that occurred on Feb. 21. Together, we've made significant progress across all Electronic Data Intake transactions impacted by this health care market event, including claims intake and claims processing, prior authorization intake and provider payments. On the latter for provider payments, we now have solutions in place to get claims payments to providers across all our lines of business, recognizing the disproportionate impact to payment of Medicaid claims.

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 getting claims payments to providers and payments have started.

ECHO Health also will distribute Electronic Remittance Advice (ERA) files for the Medicaid claims payment issued. Providers will receive ERA files based on the information on file and, for those who have not signed up to receive ERA files, they will receive paper remittance files.

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

- 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 <u>here</u>.

Importantly, prior to the recent claims payment solution with ECHO Health and 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.

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. Providers that have enrolled with a new vendor for remittance files for Commercial, IFP and Medicare claims will begin receiving them for claims going back to the start of the service interruption.

Providers that have not enrolled with a new vendor may do so using the forms below.

- ERA/EFT enrollment form for medical providers for Commercial, Individual and Family Plans and Medicare claims.
- <u>ERA/EFT enrollment form</u> for dental providers for
 Commercial, Individual and Family Plans and Medicare 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.

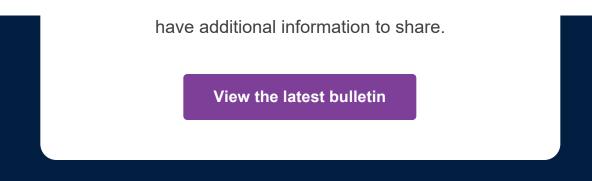
For Commercial, IFP and Medicare medical claims, providers can submit through another **approved clearinghouse** or use our medical provider portal hosted on Availity **here**.

For Medicaid medical claims, providers should use Office Ally.

For dental claims, providers should use NEA/Vyne or Dental Exchange to submit.

Stay informed

We will continue to update the provider bulletin as we



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