Electronic Claims Submission
Secure Physician Website – 837 Claim Upload

Frequently Asked Questions

Aetna Provider eSolutions^{SM}

Questions?

Please contact us via email by selecting the "Contact Us" link at the top of the screen.

Q: What is the 837 Claim Upload feature?
A: Located on our secure physician website, the 837 claim upload feature enables the user to send us a batch of Aetna claims directly from his/her practice management system, *free of charge*. The claims are sent in ANSI ASC X12-compliant (American National Standards Institute Accredited Standards Committee X12) 837 format.

Q: What are the advantages of using the 837 Claim Upload feature vs. Direct Data Entry?
A: The Direct Data Entry screen cannot accept data that is exported from a practice management system, meaning the user must manually key the bulk of the data for each claim. The 837 Claim Upload feature not only saves keying time, but also allows multiple claims to be submitted at once.

Q: How do I know if my claims submission system conforms to the ASC X12 standard?
A: Please contact your practice management system vendor or your IT department to inquire about the format in which you submit your commercial electronic claims.

Q: Can I upload claims for payers other than Aetna?
A: No. This site will only support ASC X12 837 standard claims with Aetna as the payer.

Q: Can I upload print image, PDF, Excel, Word files, etc., to this site?
A: No. Only files that conform to the ASC X12 837 standards are supported on this site. These files must be in text format and not images.

Q: What do I need to enter in the sender and receiver ID fields?
A: For the ISA entry:
- Interchange Receiver ID is Aetna's payer ID (60054) as the "Mutually Defined ID" with "ZZ" as the qualifier
- Interchange Sender ID is the submitter's Federal Tax ID with "30" as the qualifier

For the GS segment:
- Application Sender's Code is the submitter's Federal Tax ID
- Application Receiver's Code is Aetna's payer ID, 60054

Q: How large a file can I send; how many claims?
A: The files can be as large as 5MB. Depending on the size of each claim, this usually translates into 3,000 to 5,000 claims per 5MB file.

Q: What validation process does a claims file go through prior to reaching Aetna?
A: First, HealthFusion checks the file for format, to make sure it is ASC X12 HIPAA-compliant. The file then passes through HealthFusion's EDIT program to ensure that the data content meets Aetna's requirements. If the file and claims pass all edits, they are then forwarded to Aetna via HealthFusion.

Q: If my test file is not accepted, what should I do?
A: Please consult with your practice management system vendor to be sure that your file is compliant. We are unable to view your files; therefore, we can't assist with any corrections.

Q: If a claim rejects, how do/should I correct it?
A: It is best to go back into your practice management software to make the corrections. This will prevent future errors and maintain consistent information between the claim and patient records. Once corrected, you can resubmit the claim in a new file.

Q: If one claim is wrong, will my whole file reject?
A: If the claim format for a single claim is not correct, then yes, the file will reject. If the claim data content for a single claim does not comply with our requirements, then only that claim will reject.

Q: Can Aetna see my file once it is uploaded to the site?
A: No, we are not able to see the files once uploaded. The files are actually being uploaded to our vendor, HealthFusion. Once the file is validated, HealthFusion will forward the claims contained within your file to us within their daily file submission.

Q: Will I get back a 997 from Aetna?
A: No, you will not receive a 997 from either us or HealthFusion. You will, however, receive a message after the upload that will tell you the status of the file (Accepted or Failed).

Q: What type of reports will I receive?
A: Within the claim submission transaction, there is an area entitled "Claim Manager." Within Claim Manager, there is a display screen that shows the status of the claims. It first shows the status of the claim at the clearinghouse (HealthFusion) prior to submission to Aetna. Later, the status screen displays any unsolicited 277 (claims status) messages sent to HealthFusion by Aetna.

Q: Can I send UB92 or dental claims to this site?
A: No. This site only allows for the upload of Professional Claims (837P) or HCFA 1500. For institutional submission, please contact our EDI Hotline. To learn more about our Dental Program Management visit:
http://aetnet.aetna.com/dental/customer_service/dpm.htm