



January 12, 2026

## **Aetna Better Health® of Illinois**

### **Redetermination claims process**

Aetna Better Health® of Illinois wants to support providers with claims-related issues during the redetermination process. This includes claims submittals for members during their redetermination window.

#### **Before providing service**

**Medicaid eligibility should always be confirmed at the time of service in the [HFS MEDI platform \(Recipient Eligibility Verification System\)](#).**

This platform is the most current source for member coverage status.

If a member is assigned to a managed care organization (MCO), the name of the MCO and eligibility dates used during the search will be listed in the “Managed Care Section.” If a member has been removed from Medicaid eligibility, MEDI will not show an MCO assignment.

#### **Who processes claims?**

We've developed a [Redetermination claims process one-pager](#) with info on when Aetna processes claims for members during their redetermination window — and when HFS processes claims.

#### **Questions?**

Please contact your assigned [Provider Relations representative](#) if you have questions.