



Submit Peer to Peer Requests Electronically within Availity

If you haven't already registered with Availity, please visit the Availity Registration page:

<https://www.availity.com/Essentials-Portal-Registration>

Beginning 9/17, you will be able to submit your Peer to Peer (P2P) request documents through Availity contact messages for Aetna Better Health.

To submit records for your Peer-to-Peer review, following the steps below:

- Log on to Availity; **<https://apps.availity.com/availity/web/public.elegant.login>**
- Select the Aetna Better Health payer space.
- Click on the Medicaid Contact Us Application

The screenshot shows the Availity Applications page. At the top, there are tabs for 'Applications', 'Resources', and 'News and Announcements'. The 'Applications' tab is selected and highlighted with a red box. Below the tabs, there is a disclaimer: 'THESE LINKS MAY RE-DIRECT TO THIRD PARTY SITES AND ARE PROVIDED FOR YOUR CONVENIENCE ONLY. AVAILITY IS NOT RESPONSIBLE FOR THE CONTENT OR SECURITY OF ANY THIRD PARTY SITES AND DOES NOT ENDORSE ANY PRODUCTS OR SERVICES PROVIDED BY THIRD PARTIES!'. Below the disclaimer, there is a grid of application tiles. The tile for 'Medicaid Contact Us' is highlighted with a red box. The tile contains the text: 'Medicaid Contact Us', 'Contact Us through Availity Messaging', and a heart icon. Other tiles include 'Medicaid Appeal and Grievance Status', 'Medicaid Appeals', 'Medicaid Business Intelligence Reports', 'Medicaid Case Management(Dynamo)', 'Medicaid Claim Submission-Connect Center', 'Medicaid Claim Submission-Office Ally', 'Medicaid Grievance', 'Medicaid Panel Roster', 'Medicaid Provider Deliverable Manager', and 'Provider Details'.

- Fill out the form



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- For the “I am contacting Aetna Better Health - Medicaid about” - **Select** “Peer to Peer(P2P)”

The screenshot shows the 'Medicaid Contact Us' form. The dropdown menu for 'I am contacting Aetna Better Health - Medicaid about' is open, and 'Peer to Peer (P2P)' is selected. The form includes fields for Organization, Select a Provider (optional), Provider Name, NPI, Tax ID, and a 'Give Feedback' button. The Aetna logo is in the top right corner.

Medicaid Contact Us

Give Feedback

Organization

Select...

Select a Provider (optional)

Select an Organization first...

Provider Name

Enter Provider's Name...

NPI

Enter NPI...

Tax ID

Manually enter a TIN

Enter manual TIN...

I am contacting Aetna Better Health - Medicaid about:

Peer to Peer (P2P)

General

Change Provider Demographics

Claim Issue

Prior Authorization/Authorization Issue

Member Eligibility Issue

HEDIS Record Submission

Credentialing Inquiry

SIU Record Submission

Close

- In the “**Your message**” field, select the details you are reaching out about.
- Select “Add File”.
- Insert the saved Request Form from your computer.
- Submit.**



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