



Aetna Better Health® Kids  
A CHIP Health Plan

## IMPORTANT CHANGE: Member ID Numbers are Changing

The last week of April, all Aetna Better Health Kids members will receive a new Member ID Card in the mail. This card will have a new 10-digit member ID card that replaces their old 9 digit number. Be sure to ask all members for their new ID Card when they visit your practice.

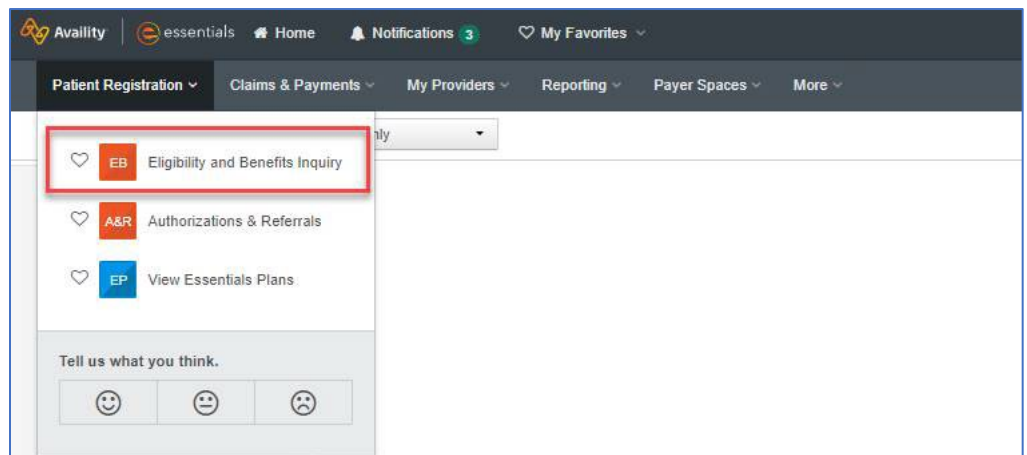
Please be aware that the new ID number is effective on May 1, 2023 and should be used when submitting all claims for Aetna Better Health Kids.

### Other things to Know about this change

Starting May 1, 2023, when you look up Aetna Better Health Kids members eligibility and benefits in the Availity Provider Portal, their old 9 digit ID member will no longer be available, but you can still search for the member's information within Availity.

You will have 2 options. You can search for members using their NEW Member Number. Or, if members don't have their new Member ID Card or new member ID number with them, you can search for them using the patient's date of birth. See the easy step in Availity shown below.

**Step One:** Access Eligibility and Benefits Inquiry under the Patient Registration header



New Request [Watch a quick demo](#)

\* Payer [?](#)  
 AETNA BETTER HEALTH (AETNA MEDICAID) NJ-VA FIDE SNP - DS...

Provider Information  
 Select a Provider [?](#)  
 Search for a Provider

\* NPI [?](#)  
 \_\_\_\_\_

Service Information  
 \* As of Date [?](#)  
 03/24/2023

\* Benefit / Service Type [?](#)  
 Please Select a Benefit/Service Type

Patient Information  
 Patient Search Option [?](#)  
 Patient Last Name, Patient First Name, Date of Birth

\* Patient Last Name Patient Suffix  
 \_\_\_\_\_

\* Patient First Name  
 \_\_\_\_\_

\* Date of Birth  
 \_/ \_/ \_

Gender [?](#)  
 Please Select a Gender

Patient Relationship to Subscriber [?](#)  
 Self

Submit another patient

Submit

**STEP 2:** You can switch the Patient Search Option using the drop down to “Patient Last Name, Patient First Name, Date of Birth.”

**STEP 3:** Populate the required information (NPI, As of Date, Benefit/Service Type, Member ID and DOB) and hit submit. From here the process is over and E&B results will populate

\*Note: For additional guidance, please click the “Watch a quick demo” link at the top of this page in Availity. For the demo to launch, assure that you have any pop-up blockers disabled.

\* Payer [?](#)  
 AETNA BETTER HEALTH (AETNA MEDICAID) NJ-VA FIDE SNP - DS...

Provider Information  
 Select a Provider [?](#)  
 Search for a Provider

\* NPI [?](#)  
 1770532798

Service Information  
 \* As of Date [?](#)  
 03/21/2023

\* Benefit / Service Type [?](#)  
 Health Benefit Plan Coverage

Patient Information  
 Patient Search Option [?](#)  
 Patient ID, Date of Birth

\* Patient ID [?](#)  
 \_\_\_\_\_

\* Date of Birth  
 1

Gender [?](#)  
 Please Select a Gender

Patient Relationship to Subscriber [?](#)  
 Self

Submit another patient

Submit