

July 31, 2026

Aetna Better Health® of Illinois

Claims reprocessing due to denial error

Aetna Better Health® of Illinois identified a system issue that affected the following provider types:

- Long term care facilities
- Hospice and supportive mental health rehabilitation facilities
- Supportive living facilities

Claims were erroneously denied using the below edits:

Edit	EOP denial description
6135	Invalid Category of Service on Patient Credit File
6134	Invalid ProviderID on Patient Credit File
6133	RecipientID Missing from Patient Credit File

We have initiated corrective action and have submitted all affected claims for reprocessing. **No action is required at this time**; impacted claims have been queued to reprocess.

Reprocessing is expected to be completed within 45 days from the date of this notice. You may see corrected payments on subsequent remittance advice(s) as reprocessing is completed. If, after the 45-day window, you find claims that still reflect an invalid denial and did not reprocess, please contact your Provider Relations representative so we can promptly address them.

Please contact your Provider Relations representative to obtain a copy of the MCO claims template to submit any claims that may have been denied erroneously for reprocessing.

We sincerely apologize for the inconvenience and appreciate your patience as we work to resolve this matter. Thank you for your continued partnership and commitment to supporting our members.