Credentialing resource guide

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Aetna Better Health®
of Oklahoma

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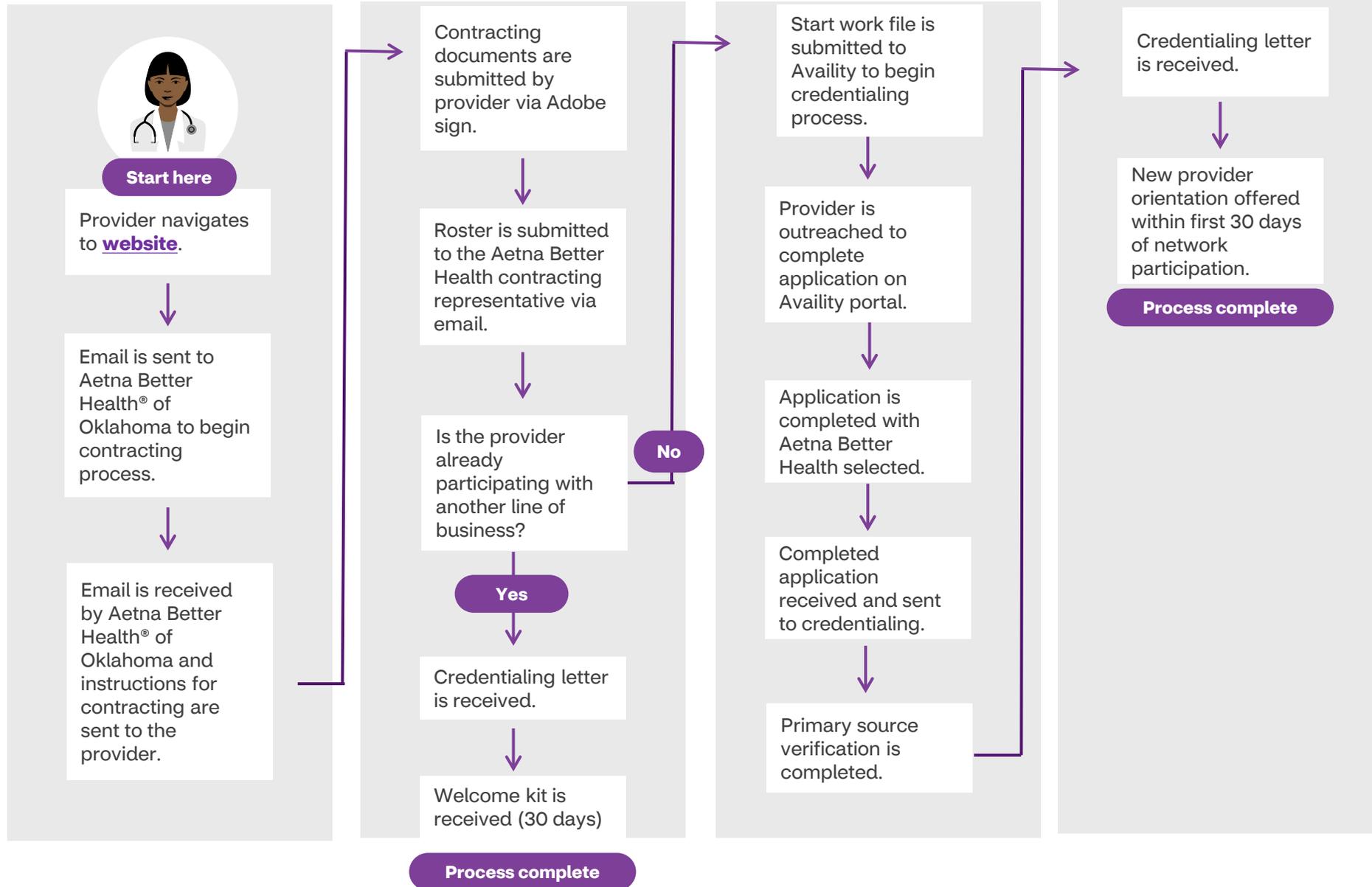
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Workflow for providers

Provider process

NOTE: **This workflow is not applicable to providers that do not require credentialing.** Providers in this category simply need to submit a roster.

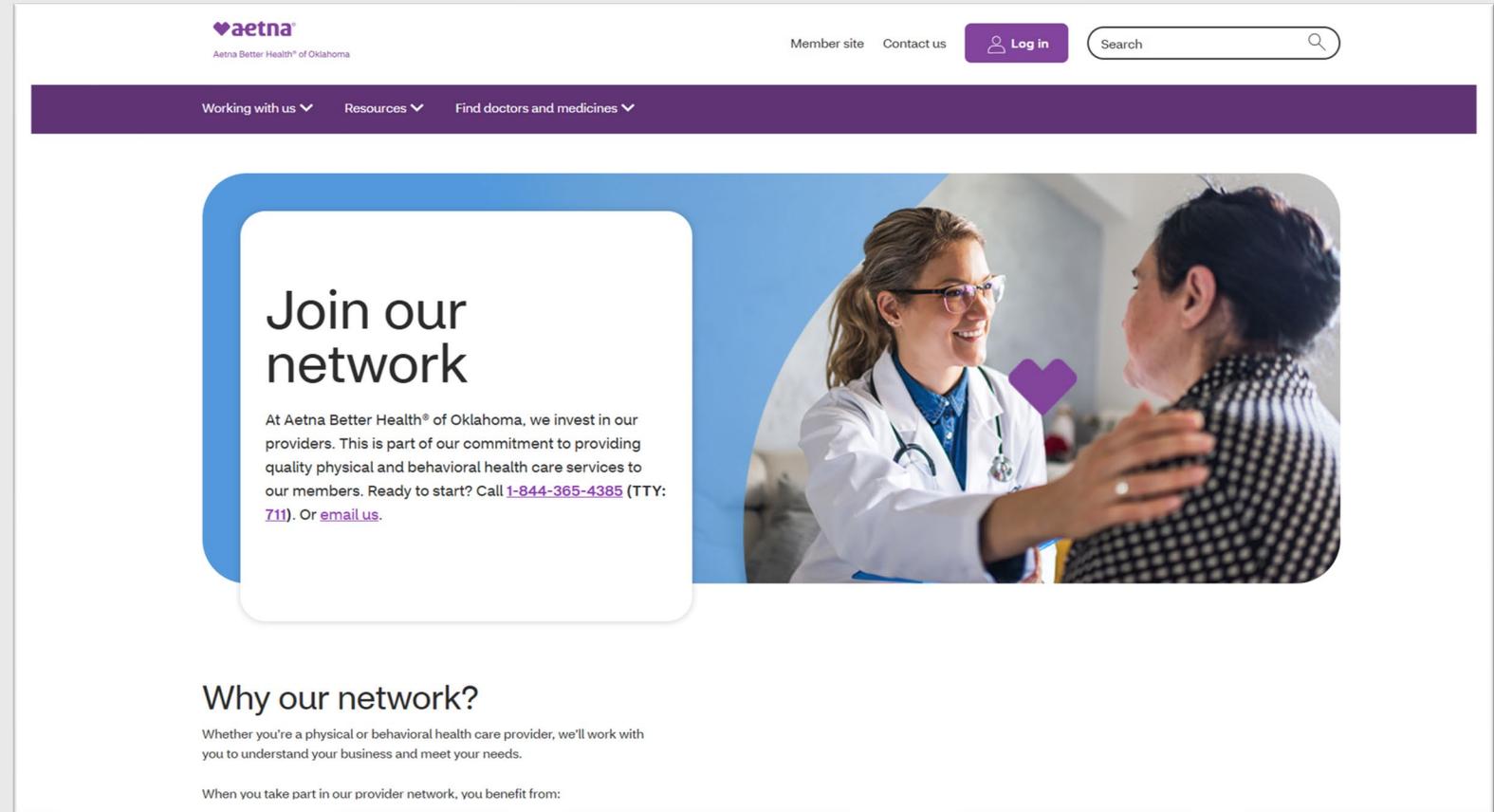For a complete list of excluded providers, refer to page 15.

Start here

Provider navigates to **website**.

↓

Email is sent to Aetna Better Health® of Oklahoma to begin contracting process.

↓

Email is received by Aetna Better Health® of Oklahoma and instructions for contracting are sent to the provider.

→

Contracting documents are submitted by provider via Adobe sign.

↓

Roster is submitted to the Aetna Better Health contracting representative via email.

↓

Is the provider already participating with another line of business?

No →

Yes ↓

Credentialing letter is received.

↓

Welcome kit is received (30 days)

Process complete

Start work file is submitted to Availity to begin credentialing process.

↓

Provider is outreached to complete application on Availity portal.

↓

Application is completed with Aetna Better Health selected.

↓

Completed application received and sent to credentialing.

↓

Primary source verification is completed.

→

Credentialing letter is received.

↓

New provider orientation offered within first 30 days of network participation.

Process complete

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Enroll with OHCA

[Click here]

OKLAHOMA Health Care Authority

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Oklahoma Health Care Authority › Providers › Provider Enrollment

Enrollment

Provider Contracts	ATTENTION:
If you have questions: • Call toll free (800) 522-0114, option 5 for Provider Contracts (Hours: 8 a.m. – 5 p.m. Mon., Tues., Thurs., Fri., and 1 – 5 p.m. Wed.)	Please remember that all SoonerCare-contracted providers are responsible for keeping their provider file current.
• Email us	Please make sure your email address(es), phone number(s) and location are up to date, so you can receive all pertinent OHCA communications. Thank you.

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Submitting Aetna Better Health contracting request

Email us at **ABHOKNetworkManagement@Aetna.com**

A contract manager will reach out with the necessary documents to complete an agreement.

Submitting a credentialing application

Already credentialed
If the provider is credentialed with Aetna under another line of business (e.g., Commercial or Medicare), no additional credentialing is required.

Not yet credentialed
Providers may submit contract applications to OHCA and contract and credentialing requests to health plans at the same time. While these processes may run concurrently, contract effective dates with OHCA and the health plan may differ. Health plans must comply with NCQA standards, meaning you cannot be active in the network until credentialing (if applicable) is complete. Credentialing **cannot be completed** until OHCA issues a valid Provider ID, and health plans cannot backdate credentialing. Please follow the "Workflow for Providers" to begin the contracting and credentialing process.

Outreach
Availity will make up to three attempts via email to obtain missing information. Once a clean credentialing submission is received, the information is sent to credentialing team for primary source verification.

Decision
After credentialing is completed and approved, an approval letter will be emailed to the contact on file.

Recredentialing
Providers will be recredentialed every three years from the date of their last approval. Providers will receive a notification prior to the recredentialing due date as a reminder to complete the process

Provider credentialing application checklist
Avoid common mistakes—submit a complete application the first time

To ensure your credentialing application is processed quickly and without delays, please review this checklist before submitting:

Update your CAQH profile (if applicable)
- Confirm all information in your CAQH profile is current and complete.

Complete the Availity application
- Make sure your Availity application is fully filled out and submitted.

Attach proof of professional liability insurance
- Include a current copy of your professional liability insurance documentation.

Include a provider roster
- Ensure that the latest roster has been provided via **Contact Us**
- NOTE: Only additions, terminations or changes need to be on the roster.

Double-check all attachments
- Verify that all required documents are attached and uploaded correctly.

Helpful tips:
- The application system is designed to prevent incomplete submissions, but incorrect or missing attachments can still cause delays.

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Provider orientation

Aetna Better Health® of Oklahoma Provider Engagement Orientation
2025
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Have questions?

Find your assigned Provider Experience Representative at: **Aetna Better Health of Oklahoma Provider Engagement**

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Contacting us online

- Visit our **website** and click "**Contact Us**" at the top of the page.
- Scroll to the bottom and select **still need support.**
- Select the correct inquiry type:
  - ○ *New contract request* – use when a provider or group is seeking to establish a contracted relationship with Aetna Better Health.
  - ○ *Provider enrollment or adds to existing PAR group* – use to enroll new providers to or add providers under an existing agreement with Aetna Better Health of Oklahoma.
  - ○ *Provider demographic data update* – use to submit update to provider information such as address, phone, fax, or cultural competency.
  - ○ *Delegated group updates* – use by an entity with a delegated credentialing agreement to update its provider roster or related data.
  - ○ *Directory maintenance* – use to correct or update provider information displayed in the member-facing provider directory.
- Complete all required fields and upload your W-9 and supporting documents including a copy of the updated roster.
- Submit your request.

New provider groups

Step 1

Enroll with OHCA

All providers in the group must be contracted with OHCA (with an active Medicaid ID) to serve SoonerSelect members.

Step 2

Submit contracting request

Submit an Aetna Better Health contracting request through the website. A contracting representative will contact you with required documents.

Step 3

Submit credentialing application

Complete credentialing application for providers not already credentialed with another Aetna line of business through the Availity portal.

Step 4

Receive credentialing approval

Respond to any outreach from Availity. Once approved, you will receive a letter confirming the credentialing effective date.

Step 5

Scheduling new provider orientation

Within 30 days of the agreement effective date, a provider engagement network manager will offer to schedule an orientation and provide the executed agreement.

Contracting and credentialing overview

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Adding providers to existing contracts

Step 1

Enroll with OHCA

All providers in the group must be contracted with OHCA (with an active Medicaid ID) to serve SoonerSelect members.

Step 2

Submit updated Aetna Better Health roster

Submit an updated Aetna Better Health roster for the group through the Aetna Better Health of Oklahoma website.

Step 3

Submit credentialing application

Complete credentialing applications for providers not already credentialed for another line of business through the Availity portal. Availity will follow-up if additional information is needed.

Step 4

Receive credentialing approval

Respond to any outreach from Availity. Once approved, you will receive a letter confirming the credentialing effective date.
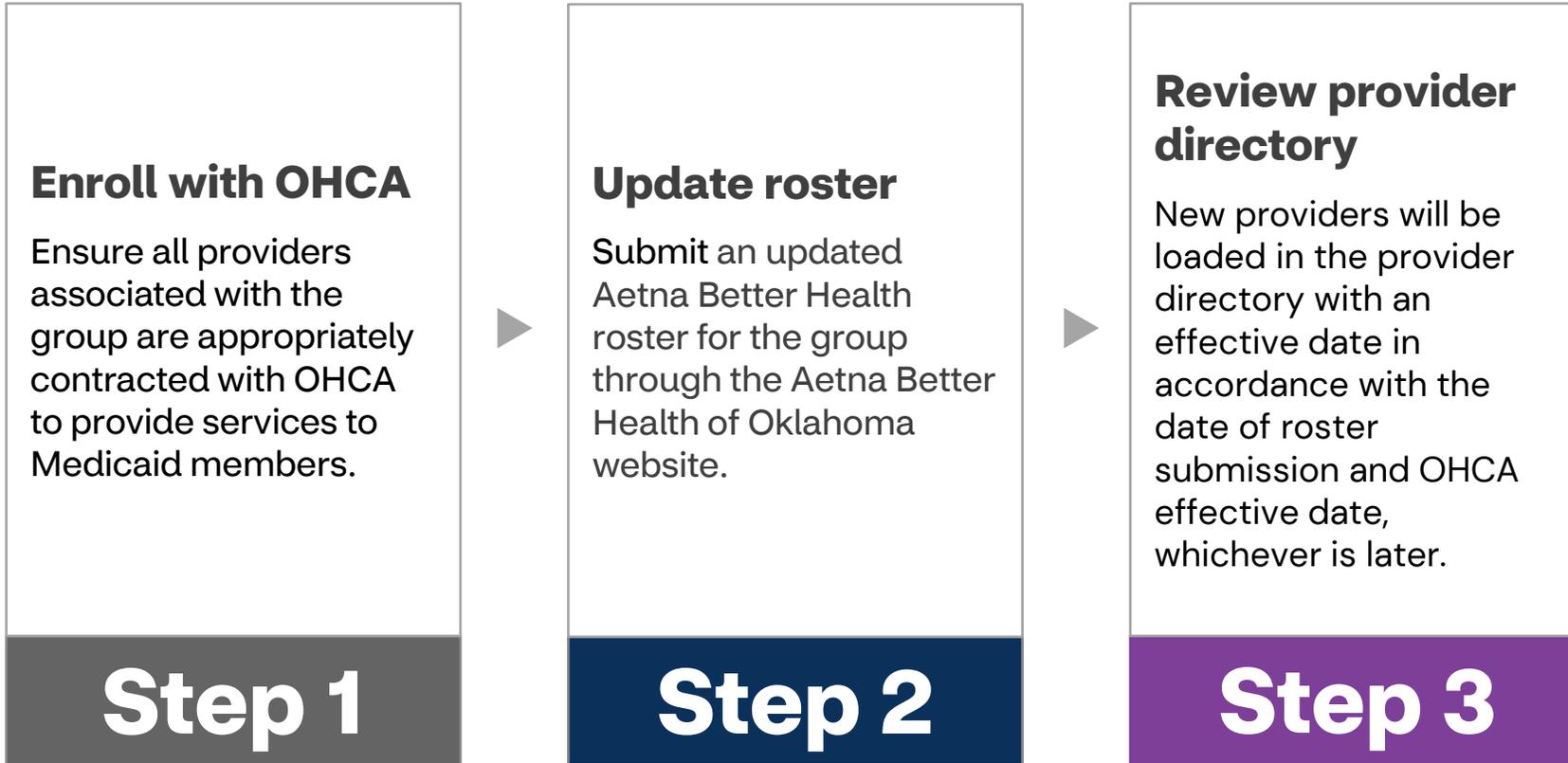
Notes
Providers who have previously credentialed with another Aetna lines of business:
- Providers credentialed under another Aetna line of business **do not** need to complete a new application through Availity
- A credentialing letter will be issued confirming the last approval date
- Providers must re-credential within their existing credentialing cycle

Adding providers to delegated groups

Enroll with OHCA

Ensure all providers associated with the group are appropriately contracted with OHCA to provide services to Medicaid members.

Step 1

▶

Update roster

Submit an updated Aetna Better Health roster for the group through the Aetna Better Health of Oklahoma website.

Step 2

▶

Review provider directory

New providers will be loaded in the provider directory with an effective date in accordance with the date of roster submission and OHCA effective date, whichever is later.

Step 3

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Provider roster clarifications

When adding a provider to an existing group:

- Ensure you are using the Aetna Better Health provided roster template for submissions.

- All updates should reflect in the state file before submitting to Aetna Better Health. Examples include, but are not limited to:
  - Servicing locations
  - Specialty updates
  - Name changes, etc.

- Include only the providers on the roster submissions that require addition or updates.

  – Only submit new groups that have not been previously provided to Aetna Better Health; do not resubmit full rosters that have already been sent, *except for **net new groups***.
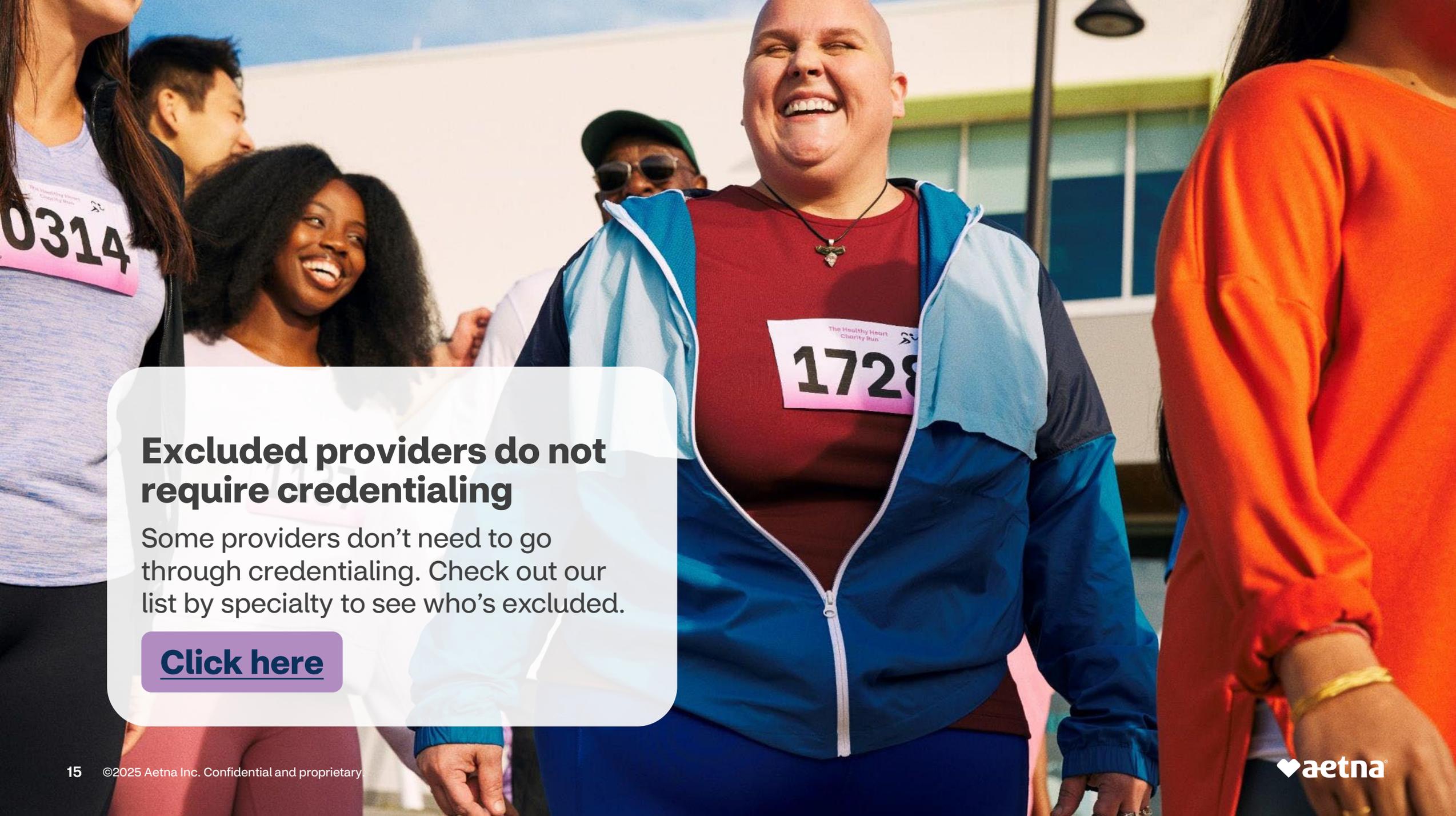
Excluded providers do not require credentialing

Some providers don't need to go through credentialing. Check out our list by specialty to see who's excluded.

[Click here](#)

Uploading your roster

Upload your roster during the application process in Availity.

Find a provider

Can't find your doctor? We're here for you. Call Member Services at 1-844-365-4385 (TTY: 711). We add to our provider list daily.

Looking for pharmacies or vision providers? Just scroll down to "Find local care." Note that you'll get your dental benefits from another plan.

< Back

Tell us what you're looking for

Fill out this form to find providers and health care services near you.

ZIP CODE *

☐ I do not know the ZIP code

You'll need to fill out the provider/facility name OR specialty

PROVIDER / FACILITY NAME

FIND A SPECIALTY
Search

[Find] [Clear]

Find local care

You can use these links to find in-network providers and ph...

Vision care for eye wear and routine eye exams (extra ben...
Find an EyeMed provider online >

Vision care for medical or surgical conditions (standard be...

Fill out the form above to find an ophthalmologist in our net...

Provider directory

We update our printed directories (including the online versions) every month.

You can get a copy of the provider directories by mail. Or get the info you need in a different language or format. Just call Member Services at 1-844-365-4385 (TTY: 711). We're here for you 24 hours a day, 7 days a week. We can also help you find a provider.

Find your provider directory

Provider directories are in groups by region. Different counties make up each group. Look for your county on this list to find your region.

Regions by county ⌄

Find your directory

CHOOSE A DIRECTORY
Choose a region ⌄

[⬇ Provider directory (PDF)]

Our directory includes all types of network providers

Health care providers
Primary care providers, specialists, mental health providers and family planning providers

Facilities
Hospitals, federally qualified health centers (FQHCs), rural health clinics (RHCs) and long-term care, skilled nursing and mental health facilities

Support providers
Adult day services, assisted living, home-delivered meals, home health agencies and home medical equipment providers

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Provider directory

Click here to navigate to the provider directory on our website.

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