Aetna credentialing checklist

Participation request to first claim · contact numbers checked against Aetna's own pages · the route varies by provider type, location and network need

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Clinician	CAQH Provider ID	Date requested	Owner

BEFORE YOU APPLY

- [ ] Confirm the correct Aetna behavioral health application route.
- [ ] Gather current licenses, insurance documents and practice details.
- [ ] Prepare individual NPI (Type 1) and group NPI, if applicable.
- [ ] Prepare tax identification information and the W-9, as requested.
- [ ] Review and complete the CAQH profile, then attest.

APPLICATION AND REVIEW

- [ ] Submit Aetna's request to join the network.
- [ ] Authorize Aetna to access your CAQH profile.
- [ ] Monitor the email account used for credentialing.
- [ ] Respond promptly to every request for clarification.
- [ ] Complete credentialing and contracting requirements.
- [ ] Follow up through Aetna's official channels if the application stalls.

WHAT COSTS THE MOST TIME

Treating CAQH as the application	Registering with CAQH does not submit a request to Aetna.
Applying through the wrong route	Behavioral health may not use the same pathway as medical.
Leaving CAQH stale	An incomplete or lapsed profile stalls verification silently.
Missing an information request	Watch the mailbox on the application, not a personal one.
Assuming every plan is included	Approval covers the networks named in the agreement, not all of them.
Billing before the effective date	Earlier dates of service may not be paid at in-network rates.

AFTER APPROVAL, BEFORE THE FIRST CLAIM

- [ ] Obtain written confirmation of the effective date.
- [ ] Confirm which networks and products the agreement covers.
- [ ] Verify individual and group billing information.
- [ ] Check that NPI, group affiliation, tax ID and service location are linked.
- [ ] Set up the appropriate Availity access.
- [ ] Confirm the correct payer destination for each plan.
- [ ] Verify timely-filing and claim-submission requirements.
- [ ] Check the provider directory before scaling claims volume.

THE ORDER AETNA DESCRIBES

1	Check eligibility — review the network application options for behavioral health providers.
2	Request participation through Aetna's online form.
3	Complete CAQH: review, upload documents, attest.
4	Authorize Aetna to access the CAQH information.
5	Complete contracting and credentialing; review contract terms.
6	Confirm activation: effective date, plans, billing details, provider record.
7	Prepare operations: Availity, eligibility and benefits, claims requirements.

AETNA PROVIDER CONTACTS

Network and credentialing support	**1-800-353-1232**	
Non-Medicare plans, including individual and family	**1-888-632-3862**	
Medicare medical and dental plans	**1-800-624-0756**	
Availity Client Services (portal registration, technical help)	**1-800-282-4548**	Mon–Fri, 8am–8pm ET

Two of these are easy to transpose. Aetna also publishes 1-800-872-3862, which is a different line. Check the digits before dialing.

> **Availity is not credentialing.** It is the portal for day-to-day transactions — eligibility, claims, authorizations, claim status. Registering for it does not advance network participation, contracting or the credentialing decision.
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> **One payer ID does not cover every Aetna product.** Verify the claim destination from the member's plan details and your clearinghouse or Availity setup, and confirm the timely-filing limit that applies to the contract you signed.

Sources: Aetna, Join the Aetna network · Joining the provider network FAQs · Contact Aetna · Availity provider portal (aetna.com). Supa: Aetna credentialing guide, heysupa.com/blog/aetna-credentialing