

Provider quick reference guide: self-service tools

This guide was created to help providers work with Anthem Blue Cross (Anthem). This communication applies to the Commercial, Medicare, Medicaid, and Medicare-Medicaid Plan (MMP) lines of business.

Self-service tools

Public website: https://www.anthem.com/ca/provider

Commercial:

The provider public website is designed to make navigation easy and more useful for providers. The website holds timely and important information to assist providers.

Go to https://www.anthem.com/ca/provider.

Includes: Provider Forms, Provider Manual, Policies, EDI information, Education and Training, *Provider News*, Contact Us information, Credentialing information, plus more.

Provider forms/guides: Various guides and forms are available under the following headings at https://providers.anthem.com/ca Providers > Forms & Guides:

- Demographic updates: *Provider Maintenance Form*
- Claim adjustment: Claim Re-Process/Inquiry Request
- Claim appeal requests: Provider Dispute Resolution Form

Medicare, Medicaid and Medicare-Medicaid Plan (MMP):

https://providers.anthem.com/ca

Availity Portal: https://availity.com Availity Client Services: 1-800-AVAILITY (1-800-282-4548)

There are an array of valuable online tools through the **Availity Portal**, a secure multi-health plan portal. Please refer to the *Provider Digital Engagement Supplement* to learn more about our efforts to go digital. To access the *Provider Digital Engagement Supplement*, go to **https://availity.com**, select Payer Spaces > Payer tile > Resources (under the Provider Resources column), if needed Select or Change a State at the top right, select Category Digital Tools and scroll to the Provider Digital Engagement Supplement.

The electronic tools and applications include the secure Provider Portal, **Electronic Data Interchange (EDI)** and available business-to-business (B2B) application programming interfaces (APIs).

How to get started:

- Learn about Availity Portal Registration.
- Learn about the **Primary Administrator Duties**.

Chat: Use the Chat tool to ask a question about prior authorization, appeals status, claims, benefits, eligibility, and more. Access via https://availity.com Payer Spaces > Payer tile > Applications > Chat with Payer.

Register for an upcoming webinar session or view a previously recorded webinar:

- 1. Once logged into the **Availity Portal**, select Help & Training > Get Trained.
- * Availity, LLC is an independent company providing administrative support services on behalf of Anthem Blue Cross. AIM Specialty Health is an independent company providing some utilization review services on behalf of Anthem Blue Cross.

Anthem Blue Cross is the trade name of Blue Cross of California. Anthem Blue Cross and Blue Cross of California Partnership Plan, Inc. are independent licensees of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc. Blue Cross of California is contracted with L.A. Care Health Plan to provide Medi-Cal Managed Care services in Los Angeles County. Anthem Blue Cross Cal MediConnect Plan is a health plan that contracts with both Medicare and Medi-Cal to provide benefits of both programs to carelless.

Anthem Blue Cross Health Insurance Company is the trade name of Anthem Insurance Companies, Inc. Anthem Blue Cross, Anthem Blue Cross Life and Health Insurance Company and Anthem Blue Cross Health Insurance Company are independent licensees of the Blue Cross Association. Blue Cross is the trade name of Blue Cross of California. Anthem Blue Cross and Anthem Blue Cross Life and Health Insurance Company are independent licensees of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.

- 2. The Availity Learning Center opens in a new browser tab.
- 3. Search the Catalog by (a) webinar title or (b) a keyword to find a session and enroll.
 - To find a specific live or recorded session quickly, use keywords, for example:
 - o Medical Attachments use keyword medattach
 - o Claims use key word claims
 - Select the **Sessions** tab to scroll the live session calendar or access a recorded webinar.
- 4. After you enroll, you will receive an email with instructions on how to join or access the session.

Support: If you need help, or run into technical difficulties, submit a support ticket through Availity:

- 1. Log in to Availity at https://availity.com
- 2. Select Help & Training > Availity Support
- 3. Select your organization > Continue
- 4. Select Contact Support from the top menu bar then Create Case

Electronic Funds Transfer (EFT) / Electronic Remittance Advice (ERA)

Commercial/Medicare/Medicaid					
Type of transaction:	How to register, update or cancel:	For registration related questions, contact:	To resolve issues after registration, including a decline of a registration, contact:		
EFT	Use the CAQH® Solutions EnrollHub TM	EnrollHub Help Desk at 1-844-815-9763	Provider Customer Service (PCS) through Chat or the number on the back of the member's ID card. • Note: PCS will engage Provider Experience to resolve, only for registrations that decline because the provider is loaded incorrectly in our system. PCS will handle all other issues. Note: Providers should allow 2-4 weeks from successful EFT registration before contacting PCS.		
ERA	Use Availity to manage account changes or new registrations for ERAs (835)	Availity Client Services at 1-800- AVAILITY 1-800-282-4548	Availity Client Services at 1-800-AVAILITY (1-800-282-4548) Note: Please allow 2 to 4 weeks from successful ERA registration.		

New provider joining an existing group

Delegated (IPA/Independent Physician Association) means a provider organization which has a separate contract to act as a credentialing delegate for providers within their organization.

Commercial/Medicare:

Provider submits roster through *Provider Maintenance Form* rather than through Availity's Provider Enrollment application. Under *Organization*, utilize the *Roster of List updates* option.

Medicaid:

Providers must contact their affiliated IPA(s) that are active with Anthem, and request to be added to the Anthem Medicaid Network. For more details on IPAs and Affiliations, please contact your Provider Experience regional office: https://providers.anthem.com/ca

Non-Delegated (Direct/Fee-for-Service)

Commercial/Medicare:

The digital Provider Enrollment application form is available through **Availity**.

- To use the Provider Enrollment application, ensure your provider data on CAQH is current and in a *complete* or *re-attested* status, then;
- Log into Availity > your state > Payer Spaces > Anthem icon > Applications > Provider Enrollment
- New and current **Availity** users should ensure their User ID has been assigned with *Provider Enrollment* functionality to use this tool.
- See your organization's Availity Administrator if you need access. If you don't know your Administrator, contact Availity Client Service 1-800-AVAILITY (800-282-4548).

If you are an Ancillary provider, go to anthem.com > your state > Providers > Join Our Networks > getting started with Anthem.

Include market specific information below if there are certain provider types that follow a different process (see example):

If you are a Chiropractic, Acupuncture, Massage and Registered Dietician provider, please contact American Specialty Health (ASH) at **800-972-4226** or via

https://www.ashlink.com/ASH/public/Providers/Network/join.aspx

Medicaid and Medicare-Medicaid Plan (MMP):

Please visit our Provider Anthem portal, for more information on how to join Anthem as a Fee-For-Service (that is Direct) contracted provider: https://providers.anthem.com/ca

Provider enrollment application status inquiry

Commercial/Medicare:

Once your Provider Enrollment application has been submitted through Availity (follow the steps listed above under "Join our Provider Network"), you will receive an Application ID which starts with "PR-". Check the status of your Provider Enrollment application by logging into Availity > Choose your state > Payer Spaces > Anthem icon > Applications > Provider Enrollment.

Your *My Dashboard* will include your Application ID (aka PR-#) and the following categories: *Recent Applications*, *Incomplete Applications*, and *Submitted Applications*. Once your application is submitted, you will see status messages, including: Submitted, In process, or Ready to See Members.

Before you are Ready to See Members, you must have:

- 1. Passed credentialing (if applicable to your specialty type)
- 2. Received a fully executed contract
- 3. Received a welcome letter that includes your effective date.

Medicaid and Medicare-Medicaid Plan (MMP):

For more details on current contracting status, please contact your Provider Experience regional office for more details by visiting: https://providers.anthem.com/ca

Provider Demographic Changes

If you are an existing provider group and wish to make a demographic change such as updating your address or telephone number, or if you would like to remove a practitioner from your practice, please use the following forms by line of business:

Include market specific information if different from what is outlined:

Commercial/Medicare: Go to https://www.anthem.com/ca > Provider S > Provider Resources > select Provider Maintenance

Go to https://www.anthem.com/ca > Providers > Provider Maintenance > Instruction Presentation placeholder for reference document, if available.

Medicaid: If affiliated with an IPA, please contact your IPA and inform them directly of your demographic updates. IPAs must fill out the online form for Anthem to process your update: *Provider Maintenance Form*.

If you are a Direct/FFS contracted provider with Anthem, please use the PMF tool for your demographic updates: **Provider Maintenance Form.**

Prior authorizations

Commercial/Medicare: The preferred method of submitting a prior authorization is online.

- Online submission and/or to check status: online via the Interactive Care Reviewer (ICR) tool through https://availity.com Patient Registration > Authorization and Referrals
 - Educational materials regarding the ICR tool on https://www.anthem.com/ca > Providers > under the Claims heading, select Prior Authorization > Learn more about ICR
 - o Register to attend the next live ICR Webinar
- Prior authorization requirements search tool: online via Availity:
 - https://availity.com > Payer Spaces > Anthem tile > Applications > Authorization Rules
 Lookup (outpatient only)
- Prior authorization lists: The list of pre-certification/pre-authorization requirements can be accessed online. Go to https://www.anthem.com/ca, and select Providers. Under the *Claims* heading, select Prior Authorization. Select (State) if needed. Select the appropriate link depending on the type of member (Separate lists available for Local, Federal Employee Program (FEP) and BlueCard members.
- Chat: Use the Chat tool to ask a question about prior authorization, appeals status, claims, benefits, eligibility, and more. Access via Availity > Payer Spaces > Payer tile > Applications > Chat
- By phone, reference the number on the back of the member's ID card

Medicaid:

For providers contracted with an IPA (Delegated), please contact your affiliated IPA for details on how to access Prior Authorization for Anthem members. If you need further assistance, you can connect with your regional Provider Experience office for more details. For Fee-For-Service (FFS)/Direct contracted providers, please follow the following steps: https://providers.anthem.com/ca

- Online Submission and/or to check status: online via the Interactive Care Reviewer (ICR) tool through https://availity.com Patient Registration > Authorization and Referrals
 - o Educational materials regarding the ICR tool on https://providers.anthem.com/ca under the Claims heading, select Prior Authorization > Learn more about ICR
 - o Register to attend the next live ICR Webinar
- Prior authorization requirements search tool:
 - https://availity.com > Payer Spaces > Anthem tile > Applications > Precertification Lookup Tool

AIM Specialty Health® (AIM)*

Commercial/Medicare/Medicaid: For AIM managed programs, ordering and servicing physicians may submit a prior authorization request to AIM in one of the following ways:

- 1. Access AIM *ProviderPortal*_{SM} directly at **www.providerportal.com**, available 24/7 to process orders in real-time
- 2. Access AIM via the Availity Web Portal at https://www.availity.com.
- 3. Call the AIM Specialty Health Call Center toll-free number: **877-291-0360**, Monday–Friday, 7 a.m.–5 p.m. PT.

AIM Programs: Visit AIM's program **microsite** to find program information, resources, clinical guidelines, interactive tutorials, worksheets and checklists, FAQs, and access to AIM *ProviderPortal*_{SM}

OptiNet®: The *OptiNet* Registration is an important tool that assists ordering providers in real-time decision support information to enable ordering providers to choose high quality, low-cost imaging providers for their patients. Servicing providers need to complete the *OptiNet* Registration online.

AIM Web Support: For support accessing **www.providerportal.com** or **Opti**Net registration

800-252-2021

Commercial risk adjustment (CRA)					
Commercial					
Anthem's CRA Provider Operations Director – Questions related to our	miriam.mondragon@anthem.co				
CRA retrospective or prospective programs.	m				
Questions related to incentive checks for completed SOAP notes should be	CRAIncentives@anthem.com				
directed to our CRA Incentive Team.					

Provider education and training

Commercial: All our education and training opportunities are available online at https://www.anthem.com/ca Providers > Communications > Education and Training > select one of the following:

- Supplemental Education Materials (SEMs)
- **Provider Seminars** Usually once a year; if upcoming events are available, they will be displayed.
- **Provider Webinars** Usually once a year; if upcoming events are available, they will be displayed.

Register for *Provider News* via email to ensure you are aware of upcoming education and training opportunities.

Medicare, Medicaid and Medicare-Medicaid Plan (MMP):

All of our education and training opportunities are available online by visiting:

https://providers.anthem.com/ca > Resources > Provider Training Academy

Provider Experience Team contact information

Commercial/Medicare: Please use normal channels for questions or issue resolution through the Chat feature on Availity or contacting Provider Customer Service on the back of the member's ID card.

• Chat: Use the Chat tool to ask a question about prior authorization, appeals status, claims, benefits, eligibility, and more. Access via Availity > Payer Spaces > Payer tile > Applications > Chat

If you've followed normal channels and require additional assistance, please reach out to Provider Experience and Contact Us

Medicaid: For more details on current contracting status, please contact your Provider Experience regional office by visiting, and follow the "Join our network" option: https://providers.anthem.com/ca

Provider communications/Provider News registration

Commercial/Medicare/Medicaid:

Register to stay in touch and receive all provider communications and our monthly provider newsletter, *Provider News*, via email. Register now by going to https://www.anthem.com/ca Providers > Communications > News > select Subscribe Now.

Note: *Provider News* emails will come from Anthem Provider Communications. Add ProviderCommunications@email.anthem.com to your safe sender/recipient list to ensure you receive our emails.

Medicare/Medicaid:

Contact your Provider Experience Consultant to be added to our email distribution list. Communications are also available online at https://providers.anthem.com/ca.