

Anthem Blue Cross and Blue Shield | Serving Hoosier Healthwise, Healthy Indiana Plan, Indiana PathWays for Aging, and Hoosier Care Connect

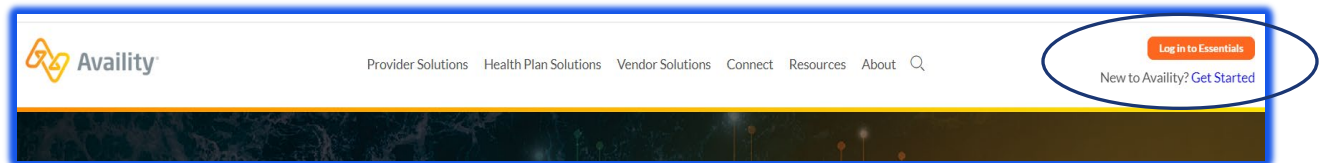
Digital Provider Enrollment Guide for Long-term Services and Supports Providers

What to expect

Anthem has developed a digital provider enrollment (DPE) tool to streamline the network participation and onboarding process. We look forward to continuing to improve the provider's experience in joining the network and will continue to do so as we prepare to launch the Indiana PathWays for Aging program. On average, a provider application that is free from errors takes roughly 20 to 25 minutes. Using this guide as a resource will assist in moving through the application successfully.

Navigating to the DPE tool

To begin the process, navigate to the Availity Essentials page to log in and access the DPE tool through Anthem's Payer Spaces. If you are not currently registered as a provider in Availity Essentials, you will be prompted to register at [Availity.com](https://www.availity.com) prior to completing the application process.



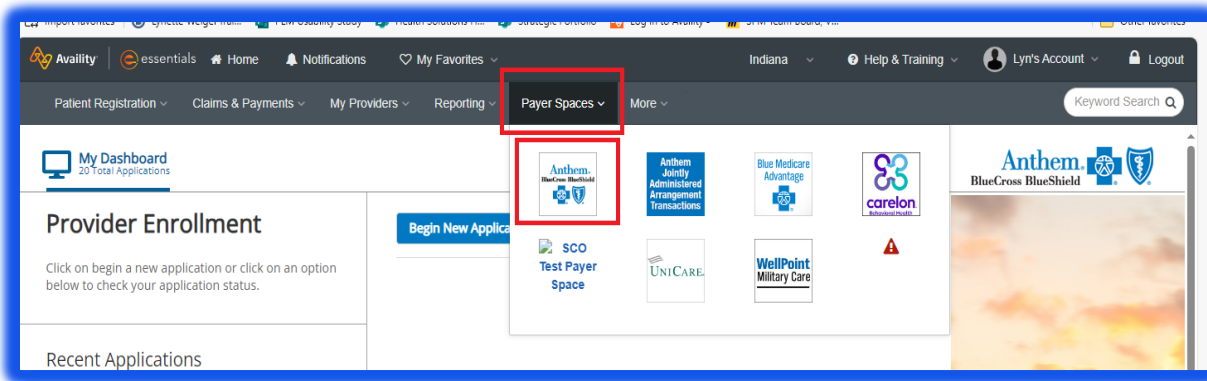
Once logged into Availity Essentials, navigate to **Payer Spaces > Anthem Blue Cross Blue Shield > Provider Enrollment** to begin.

Providers who are contracted with Anthem Blue Cross and Blue Shield to serve Hoosier Healthwise, Healthy Indiana Plan, Indiana PathWays for Aging, and Hoosier Care Connect through an accountable care organization (ACO), participating medical group (PMG) or Independent Physician Association (IPA) are to follow guidelines and practices of the group. This includes but is not limited to authorization, covered benefits and services, and claims submittal. If you have questions, please contact your group administrator or your Anthem network representative.

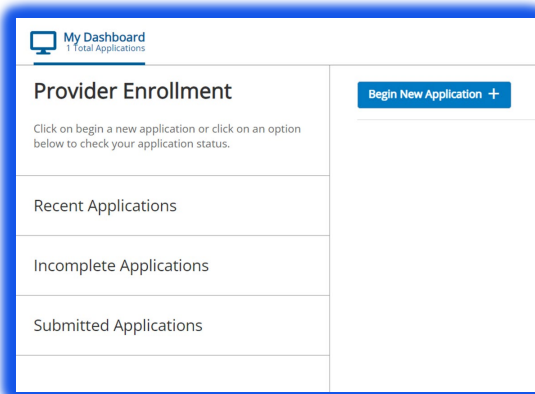
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INBCBS-CD-048073-23 January 2024

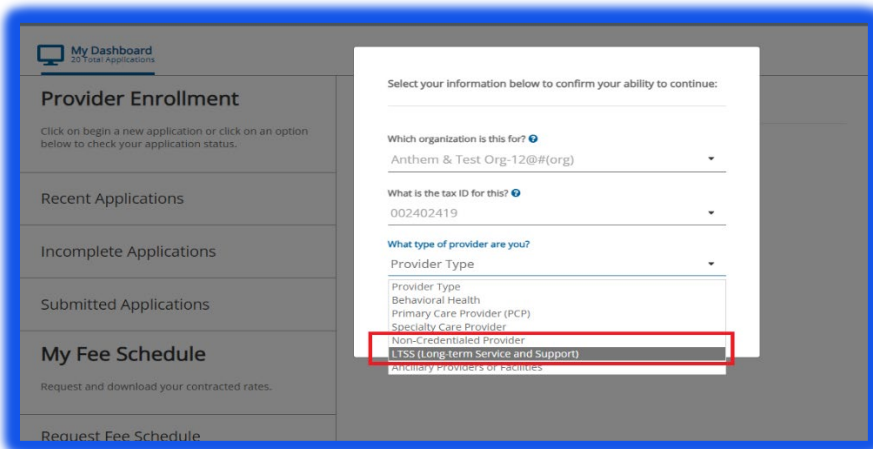
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In the application, select **Begin New Application**.



Choose **LTSS (Long-Term Services and Supports)** from the *Provider Type* drop down menu.



Before you begin an application:

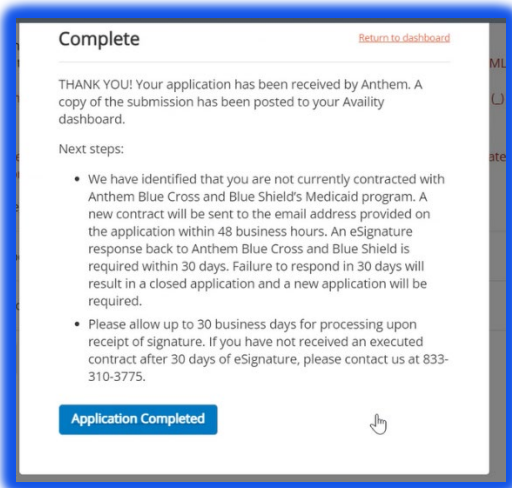
- Ensure that all the necessary supporting documents are present, which includes at a minimum:
 - Current W-9
 - Licensure, if applicable
 - Copy of current Division of Aging (DA) Waiver Provider Certification letter

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- All supporting documents must be ready for upload meaning:
- Supported file types: PDF, TXT, JPG, TIFF, PNG, GIF, CSV, MSWORD, MCEXCEL, MSWORDXML, MSEXCELXML
- File naming requirements: File names cannot contain spaces or special characters except for an underscore (_) and hyphen (-).

What to expect after a submission:



- You will receive a confirmation message when the application has been successfully submitted.
- All applications will be processed within 30 days of receipt:
 - In instances where information is missing or needs to be clarified, one of Anthem's contracting specialists will outreach directly to the application submitter.

Things to know:

- Availity Essentials time requirements: Anthem's DPE tool lives within Availity Essentials. Because of the sensitive information accessible through the Availity Essentials platform, the system will time out after 30 minutes of inactivity. Plan carefully when submitting an application. Allow yourself time to complete the application without large breaks to ensure that the system does not time out.
- All fields are required. There may be fields in the application that are not applicable to your organization, such as certain contacts, addresses, certification, etc.:

For all fields that do not apply to your organization, enter **NA**.

Note: If there's a non-applicable field which also requires a date, use the date that you are filling out the application. For example, if you have not had a site visit, you can indicate **NA** and then choose today's date from the calendar.

- This information is verified against the state's provider file. If your organization is unable to be verified as a waiver provider enrolled with the state, a successful application cannot be submitted.

- The application does not save. If a field is missing when you attempt to submit, the previously entered data will be erased.
- Be sure to double check your work, ensuring that all fields have an entry and attachments are uploaded prior to selecting **Submit**.

Key information for completing the application:

- Choosing a Provider Type:
- **SOLO Practitioner with No Group Affiliation** — Home and community-based (HCBS) agencies/organizations
- Practitioner with Group Affiliation — *Do not choose this option for the Indiana PathWays for Aging Program.*

Facility — nursing facilities

The screenshot shows a form with three radio button options:

- SOLO Practitioner with No Group Affiliation
- Practitioner with Group Affiliation (Organization)
- Facility

Below the options is a text field labeled "Group LPI" and another labeled "Rendering LPI".

Annotations:

- HCBS providers choose **SOLO Practitioner with No Group Affiliation**
- Nursing Facilities only choose **Facility**

- Legacy provider identifier (LPI)/IHCP number — The application asks for the LPI on one page and the IHCP provider number on another. This is asking for the same provider identifier, commonly known as the LPI.

For additional support and assistance, contact us at INMLTSSProviderRelations@Anthem.com or at 833-310-3775