



Helpful tips for professional providers

This communication applies to the Commercial, Medicaid, and Medicare Advantage programs from Anthem Blue Cross and Blue Shield (Anthem) in Indiana.

To apply for participation in the following Anthem managed care Indiana and State sponsored business plans, complete the required documentation:

1. Agreement:

- Carefully review the *Agreement*, *Attachments*, and/or *Amendments* and *W-9* provided via email after the Availity* application is submitted and reviewed by Anthem. Additional information regarding our plans can be located at https://www.anthem.com/provider/getting-started/?cnslocale=en_US_in. An overview can be found under *Individual & Family*, *Medicare*, and *Medicaid* at the top of the page.
- The legal name of the group/provider is prepopulated for you. The legal name must be consistent on all documents.
- The medical director or appropriate authorized signatory should sign the *Agreement*. One *Agreement* is needed per tax ID.
- Professional providers located in Indiana, who are eligible to participate in the Indiana Patient Compensation Fund, are required to participate in the Indiana Patient Compensation Fund.
- Do not complete the effective date.** Anthem will complete the effective date upon completion of credentialing and execution of the *Agreement*.
- Please return all pages of the *Agreement* and all *Attachments/Amendments*. Below is a list of the available Indiana networks (if applicable):
 - Blue Traditional, Blue Access (PPO), Blue Preferred (HMO/POS), Medicare Advantage HMO or PPO, Healthy Indiana Plan (HIP), Anthem programs for Medicaid (Hoosier Healthwise and Hoosier Care Connect), Exchange, Workers Comp, Pathway Essentials, HealthSync
- An active Medicaid number from the State of Indiana is a requirement to participate in Anthem programs for Medicaid and HIP. In addition, each practitioner is required to request participation in these networks via the online Application. Please refer to the Indiana Medicaid website for information on how to obtain a Medicaid number: in.gov/medicaid/providers.
- An active Medicare number is a requirement to participate in Medicare Advantage PPO and/or HMO.
- You will receive an executed copy of the *Agreement* upon completion.

2. Credentialing:

* Availity, LLC is an independent company providing administrative support services on behalf of Anthem Blue Cross and Blue Shield. AIM Specialty Health is an independent company providing some utilization review services on behalf of Anthem Blue Cross and Blue Shield.

Anthem Blue Cross and Blue Shield is the trade name of Anthem Insurance Companies, Inc., independent licensee of the Blue Cross and Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc. Providers who are contracted with Anthem Blue Cross and Blue Shield to serve Hoosier Healthwise, Healthy Indiana Plan 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.

- Each provider (if applicable) **must** complete an online CAQH application prior to completing the online application via Availity.
- If you do not already have a CAQH PIN, contact CAQH for assistance on creating a CAQH PIN.
 - Please note that submitting an *Agreement* and a CAQH application does not automatically guarantee participation in the Anthem networks.

3. **Digital Provider Enrollment Application:**

- A new *Application* is needed for each practitioner.
- Please be sure to include a current email address for the practice and remit address(es). We will send many provider notifications electronically, so we need a current email. Please include the primary email for the practice in the practice address section and the primary billing email in the remit address section. It is preferred to have one primary email address and needs to be consistent on all *Applications*. If your email changes, please be sure to notify us so we can update our system accordingly. This is a contractual requirement and is applicable to all demographic data including email.

The following instructions will help guide you in locating the Application (which will direct you to Availity):

- Go to [anthem.com](https://www.anthem.com).
 - Select **Providers**, then select **Getting Started with Anthem** under *Join Our Network*.
 - Be sure site states *Information for Indiana*. (If it does not, please select Indiana as your site/state).
 - Select **Begin Application**.
 - Select the **State, Provider Type**, and answer the Availity question.
 - Log into Availity, select Anthem Blue Cross Blue Shield under Payer Spaces, then select on Provider Enrollment.
- After successful completion of the Application, you will receive a confirmation number. The confirmation number can be used to check the status of your application by contacting your IN Provider Solutions contracting specialist at https://www.anthem.com/docs/public/inline/IN_Master_Contact_Lists.pdf.
 - Providers will be notified within five days via email in the event their network participation request is determined to be incomplete:
 - If additional information is needed, an email will indicate that Anthem received the Application; however, there are updates needed before the application can be completed.

4. **Supporting documents need to be attached to the online application for specialty specific certificates:**

- Certified registered nurse anesthetists (CRNA): Attach a copy of your CRNA certificate to the online application.
- Board certified behavior analyst (BCBA): Attach a copy of your BCBA certificate to the online application.
- Certified surgical first assistant (CSFA): Attach a copy of your CSFA certificate to the online application.

- Licensed clinical addiction counselor (LCAC): Attach a copy of your LCAC certificate to the online application.

5. High tech radiology:

- If the practice will be rendering high tech radiology (MRI, CT, PET, Nuclear Medicine) completion of the AIM Specialty Health®* assessment survey will be required.
- Please contact your Network Development manager at the phone number listed on the attached letter.

6. Designations:

If you are a designated rural health center, retail health clinic, federally qualified health center, opioid treatment, substance use disorder, walk-in clinic, essential community provider, or an urgent care, please be sure to note this information in the appropriate section of your application.