

Provider quick reference guide: self-service tools

This communication applies to:

- Anthem HealthKeepers Plus members covered by HealthKeepers, Inc.
 - Medicare Advantage members covered by Anthem Blue Cross and Blue Shield (Anthem)
 - Members of our Commercial plans covered by Anthem.
- Please note, this communication applies to Anthem HealthKeepers Plus Medicaid products offered by HealthKeepers, Inc.

Self-service tools	
Public website:	
<p><i>Commercial:</i> 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 www.anthem.com > Providers. Includes Provider Forms, Provider Manual, Policies, EDI information, Education and Training, Provider News, Contact Us information, Credentialing information, plus more.</p> <p>Provider forms/guides: Various guides and forms are available under the following headings at www.anthem.com > Providers > Forms & Guides:</p> <ul style="list-style-type: none"> • Demographic updates: <i>Provider Maintenance Form</i> • Claim adjustment: <i>Claim Information/Adjustment Request 151 Form</i> • Claim appeal requests: <i>Claim Reconsideration and Appeals</i> 	
<p><i>Medicare:</i></p> <ul style="list-style-type: none"> • https://www.anthem.com/medicareprovider select HMO and PPO Provider Guidebook • https://www.anthem.com/docs/public/inline/ABSCRPM-0010-20.pdf 	
<p><i>Medicaid:</i></p> <ul style="list-style-type: none"> • Claims Overview: https://providers.anthem.com/virginia-provider/home > Claims > Claims Overview • <i>Provider Manual</i> 	
<p>Availity Portal*: https://www.availity.com Availity Client Services: 1-800-AVAILITY (1-800-282-4548)</p> <p><i>Commercial/Medicare/Medicaid</i></p>	
<p>There are an array of valuable online tools through the Availity Essentials, a secure multi-health plan portal. Please refer to the <i>Provider Digital Engagement Supplement</i> to learn more about our efforts to go digital. To access the <i>Provider Digital Engagement Supplement</i>, go to 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.</p> <p>The electronic tools and applications include the secure Provider Portal, Electronic Data Interchange (EDI) and available business-to-business (B2B) application programming interfaces (APIs).</p>	
<p>How to get started:</p> <ul style="list-style-type: none"> • Learn about Availity Essentials Registration. • Learn about the Primary Administrator Duties. 	
<p>Chat: Use the Chat tool to ask a question about prior authorization, appeals status, claims, benefits, eligibility, and more. Access via availity.com > Payer Spaces > Payer tile > <i>Applications</i> > Chat with Payer.</p>	
<p>Register for an upcoming webinar session or view a previously recorded webinar:</p> <ol style="list-style-type: none"> 1. Once logged into the Availity Essentials, select Help & Training > Get Trained. 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. <ul style="list-style-type: none"> • To find a specific live or recorded session quickly, use keywords, for example: <ul style="list-style-type: none"> ○ Medical Attachments — use keyword <i>medattach</i> ○ Claims — use key word <i>claims</i> 	

* 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.

<https://providers.anthem.com/va>

HealthKeepers, Inc. is an independent licensee of the Blue Cross Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc. Anthem HealthKeepers Plus, offered by HealthKeepers, Inc., is a health plan that contracts with the Virginia Department of Medical Assistance Services to provide Medicaid benefits to enrollees.

AVAPEC-2994-21 446-0521-OE-VA Revision: November 2022 CC

- 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 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™	EnrollHub Help Desk at 844-815-9763 or email at efthelp@enrollhub.caqh.org Help desk hours are: <ul style="list-style-type: none"> • 7 a.m.-9 p.m. EST Monday-Thursday • 7 a.m.-7 p.m. EST Friday 	Provider Customer Service (PCS) through Chat or the number on the back of the member’s ID card. <ul style="list-style-type: none"> • 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. <p><i>Note: Providers should allow 2-4 weeks from successful EFT registration before contacting PCS.</i></p>
ERA	Use Availity (availity.com) to manage <i>account changes or new registrations</i> for ERAs (835)	Availity Client Services at 800-AVAILITY (800-282-4548)	Availity Client Services at 800-AVAILITY (800-282-4548) <i>Note: Please allow 2 to 4 weeks from successful ERA registration.</i>

New provider joining an existing group

Non-Delegated

Commercial/Medicare/Medicaid:

The digital Provider Enrollment application form is available through [Availity Essentials](#).

- 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 **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](#) > [Contact our Provider Relations Team](#) > [Select Ancillary Provider Solutions Contact List](#)

Virginia Network Managers Enterprise National Contracting:

https://www.anthem.com/docs/public/inline/VA_CONTACT_00001.pdf

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>

Note: Chiropractors use ASH for HMO network only. Anthem manages PAR/PPO and MA.

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.

Note: The credentialing process may take 90-120 days. If you have concerns about your application, email the Provider Contracting www.anthem.com > Providers > **Contact Us** > Select State – Virginia > Select appropriate contact list.

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 if applicable that includes your effective date.

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:

Commercial/Medicare/Medicaid: Go to www.anthem.com > Choose your state > Providers > Provider Resources > select

Provider Maintenance

Prior Authorizations

Commercial: 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 availity.com > Patient Registration > Authorization and Referrals
 - Educational materials regarding the ICR tool on www.anthem.com > Providers > under the *Claims* heading, select Prior Authorization > Learn more about ICR
 - **Register to attend the next live ICR Webinar**
- Prior authorization requirements search tool: online via Availity:
 - 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 www.anthem.com, 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

Medicare: <https://www.anthem.com/medicareprovider>

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

Medicaid: <https://providers.anthem.com/va>

- Online Submission and/or to check status: online via the Interactive Care Reviewer (ICR) tool through availity.com > Patient Registration > Authorization and Referrals
 - Educational materials regarding the ICR tool on www.anthem.com > Providers > under the *Claims* heading, select Prior Authorization > Learn more about ICR
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AIM Specialty Health® (AIM)

Commercial/Medicare/Medicaid

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 availity.com
3. Call the AIM Specialty Health Call Center toll-free number: **866-789-0158**

AIM Programs: Visit AIM's program **microsite** to find program information, resources, clinical guidelines, interactive tutorials, worksheets & 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 <i>OptiNet</i> registration	800-252-2021
Claim questions: accept/reject, follow up, issue resolution	
If you have claims-related questions, please reference the documents for preferred resources before reaching out to the Provider Experience Team. The documents below outline the information we will need to assist you in escalating an issue on your behalf.	
<i>Commercial:</i> Go to www.anthem.com > Choose your state > Providers > Provider Resources> Policies, Guidelines and Manuals> > select Provider Manual	
<i>Medicare:</i> Go to www.anthem.com > Choose your state > Providers > Medicare Advantage > select HMO & PPO Provider Guidebook	
<i>Medicaid:</i> Go to https://providers.anthem.com/virginia-provider/home > Claims > Claims Submissions and Disputes > Claim Payment Disputes	
Provider education and training	
<i>Commercial:</i> Register for Provider News via email to ensure you are aware of upcoming education and training opportunities.	
<i>Medicare:</i> https://www.anthem.com/medicareprovider	
<i>Medicaid:</i> https://providers.anthem.com/virginia-provider/resources/training-academy	
Provider communications/Provider News registration	
<i>Commercial/Medicare/Medicaid:</i> Register to stay in touch and receive all provider communications and our monthly provider newsletter, <i>Provider News</i> , via email. Register now by going to https://www.anthem.com/provider/news Or www.anthem.com > Providers > Communications > News > select Subscribe Now .	
Note: <i>Provider News</i> emails will come from Anthem Provider Communications. Add ProviderCommunications@email.anthem.com to your safe sender/recipient list to ensure you receive our emails.	
<i>Medicare/Medicaid:</i> Contact your Provider Experience Consultant to be added to our email distribution list. Communications are also available online at: <i>Medicaid:</i> https://providers.anthem.com/virginia-provider/communications <i>Medicare:</i> https://www.anthem.com/provider/medicare-advantage/	

If you have any questions about this communication, call Anthem HealthKeepers Plus Provider Services at **800-901-0020**