

Provider quick reference guide: self-service tools

This communication applies to Medicaid under Anthem Blue Cross and Blue Shield Healthcare Solutions and Medicare Advantage and Commercial plans under Anthem Blue Cross and Blue Shield/Anthem.

Self-service tools	
Public website	
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<p>Provider Interoperability: Various guides and forms are available under the following headings at www.anthem.com > Providers > Forms & Guides:</p> <ul style="list-style-type: none"> Demographics updates: Provider Maintenance Form Claim adjustment: Data Action Request Form Claim appeal requests: Provider Claims Resolution Form 	
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<p>Availability Portal: https://www.availability.com Availability Claim Services: 1-800-455-6217 (1-800-362-4568)</p> <p>Commercial/Medicaid/Medicaid</p> <p>There are an array of valuable online tools through the Availability 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://www.availability.com, select Provider Spaces, Pages tab, Resources (under the Provider Resources column), Download Subject or Change a State at the top right, select Category: Digital Tools and scroll to the Provider Digital Engagement Supplement.</p>	
<p>The documents tools and applications include the secure Provider Portal, Electronic Data Interchange (EDI) and e-claims. Systems to Automate (SCS) application programming interfaces (APIs).</p> <p>How to get started:</p> <ul style="list-style-type: none"> Learn about Availability Portal Registration here. Learn about the Primary Administrator Data Tools. 	
<p>Chat: Use the Chat tool to ask a question about prior authorization, appeals status, claims, benefits, eligibility, and more. Access via https://www.availability.com > Provider Spaces > Pages tab > Applications > Chat with Pages.</p>	
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<p>Support: If Providers need help, or are not receiving information, submit a support ticket through Availability:</p> <ol style="list-style-type: none"> Log into Availability at https://www.availability.com Select Help & Training > Availability Support Select your organization > Continue Select Contact Support from the top menu bar, then Create Case 	

* Availability tool is an independent company providing administrative support services on behalf of Anthem Blue Cross and Blue Shield. All Specialty Health is an independent company providing administrative services on behalf of Anthem Blue Cross and Blue Shield.

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Electronic Funds Transfer (EFT) / Electronic Remittance Advice (ERA)			
Commercial/Medicaid/Medicaid			
Type of transaction	How to register, update or cancel	For registration related questions, contact:	To resolve issues after registration, including a deletion of a registration, contact:
EFT	Use the CAQH® Solutions Knowledge™	Knowledge Help Desk at 800-455-6217	<p>Provider Customer Service (PCS) through Chat or the number on the back of the member's ID card:</p> <ul style="list-style-type: none"> Note: PCS will engage Provider Experience to resolve, only for registrations that include Network. The Provider is limited exclusively to our system. PCS will handle all other issues. <p>Note: Providers should allow 2-4 weeks from successful EFT registration before contacting PCS.</p>
ERA	Use Availability https://www.availability.com to manage account changes or new registrations for ERA (EDI).	Availability Claim Services at 1-800-455-6217 (1-800-362-4568)	<p>Availability Claim Services at 1-800-455-6217 (1-800-362-4568)</p> <p>Note: Please allow 2 to 4 weeks from successful ERA registration.</p>

New providers joining an existing group

Designated users at Provider Organizations which have a separate contract to act as a credentialing delegate for providers within their organization.

Commercial/Medicaid: Provider website under through [Provider Maintenance Form](#) (see www.anthem.com) rather than through Availability. A Provider Enrollment application, Under Claims section, within the Portal of Access system option.

Non-Eligible

Commercial/Medicaid:

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

- To use the Provider Enrollment application, ensure your provider data on CAQH is current and is a complete or traditional status, then:
- Log into **Availability** > your state > **Provider Spaces** > **Anthem.com** > **Applications** > **Provider Enrollment**
- New and current **Availability** users should ensure their User ID has been assigned with Provider Enrollment functionality to use the tool.
- See your organization's **Availability Administrator** if you need access. If you don't have your Administrator, contact Availability Claim Services 1-800-455-6217 (1-800-362-4568).

If you are an **existing** provider, go to www.anthem.com > your state > **Providers** > **Join Our Network** > **getting started with Anthem**.

Medical: <https://providers.anthem.com/medicaid/provider/home>

Provider enrollment application status updates

Commercial/Medicaid/Medicaid

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

Your PE Enrollment will include your Application ID (aka PE-ID) and the following categories: **Active Applications**, **Incomplete Applications**, and **Submitted Applications**. Once your application is submitted, you will see status messages, including **Submitted**, **In progress**, or **Ready to be Members**.

Note: The credentialing process may take 30-60 days. If you have concerns about your application, email the Provider Contracting team at VSPeople@anthem.com for a further update.

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

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

Provider Organization's Network

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 the 15th of business.

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Edith Kenton



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