PROVIDER FILE MANAGEMENT OVERVIEW

*Not applicable to New York

PROVIDER FILE MANAGEMENT

The Provider File Management (PFM) tool allows professional providers to view and make changes to their practice information. Changes to your practice information will be updated in real-time.

Since Highmark uses this information for member directories and claims processing, it is vitally important that Highmark has the most up-to-date and accurate information about your practice. This information includes but is not limited to each address, physician name, gender, specialty, hospital affiliations, board certifications, if the physician is accepting new patients, languages spoken by the physician/clinical staff, office locations and any and all requirements set forth in the provider contract(s) with Highmark. The Highmark Provider Directory is used for members to make informed decisions when selecting a provider. Updates made via this application may take 7-10 business days to display in the Online Provider Directory.

Table of Contents

INTRODUCTION TO PROVIDER FILE MANAGEMENT

PFM permits you to update the following:

- Add practitioners
- Edit practitioners
- Delete practitioners
- Add addresses
- Edit address characteristics (DBA name, Suite/Room & address type)
- Delete addresses
- Initiate the credentialing process and update specialty

PFM will not permit you to update the following:

- Name changes to group or practitioners
- Change originally submitted effective/termination date
- Create a new group
- Terminate a group
- Change primary affiliation
- Add additional networks
- Add a new mid-level practitioner (ie: PA, CRNP, CRNA & CNM)

> In order to make these changes, click "Help" on the PFM main page to be routed to your regional Provider Resource Center. From there, click Forms>Provider Information Management Forms and complete the appropriate form.

- Edit an existing address (street address, building/location, city, state, zip and effective date)
- Updates to Facility/Ancillary providers (see FAQ page)

HELPFUL TIPS

- As you move throughout the PFM page, take note to the informational icons that provide additional information that will assist you when making your updates.
- Instructional business rule pop -up windows will guide you through your processes. Please read them carefully.
- There is no Start/Save option. All updates, additions, etc., must be done in one login session.
- As you open multiple addresses/practitioners, you will see a tab for each. To avoid confusion, it would be best to close the tabs as you are done making changes or reviewing them.
- If you have more than one billing provider in the drop-down list and you would like to review a different billing provider, click "Change Group" to select a different group.
- To quickly view a snapshot of the address/practitioner information, click on the next to the address or practitioner to expand.
- If practice locations are in different regions, you must access the correct Highmark Plan to verify practitioners Medicare network participation, ie: Med Adv. West – HBCBS, Med Adv. Central – HBS.

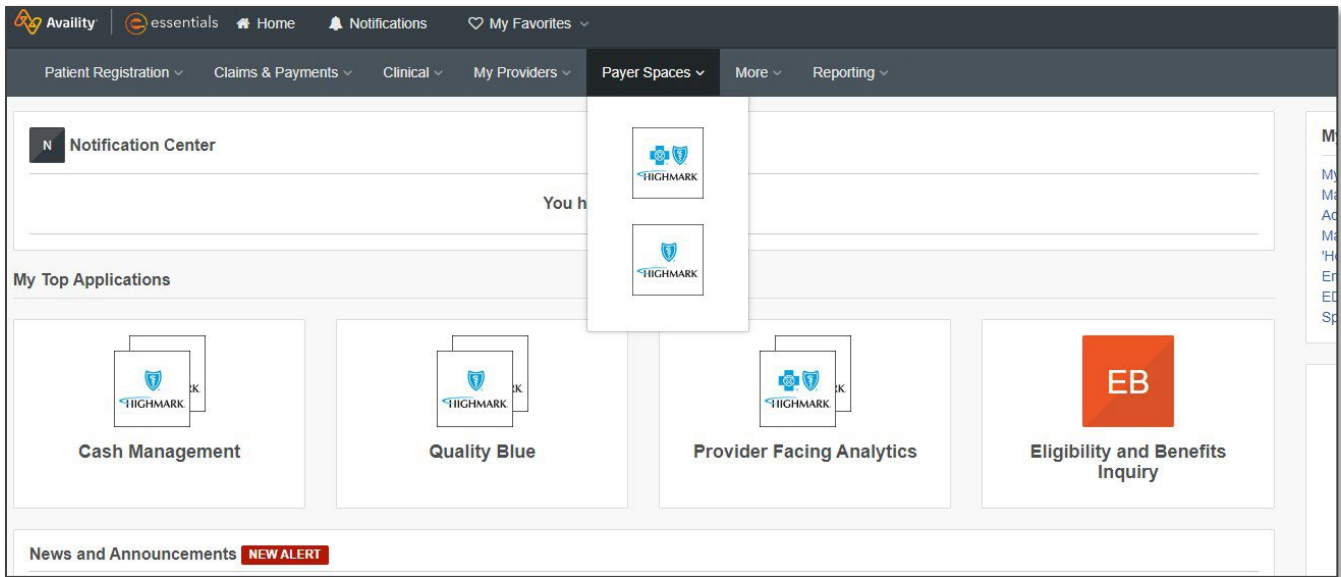# ACCESSING PROVIDER FILE MANAGEMENT IN AVAILITY
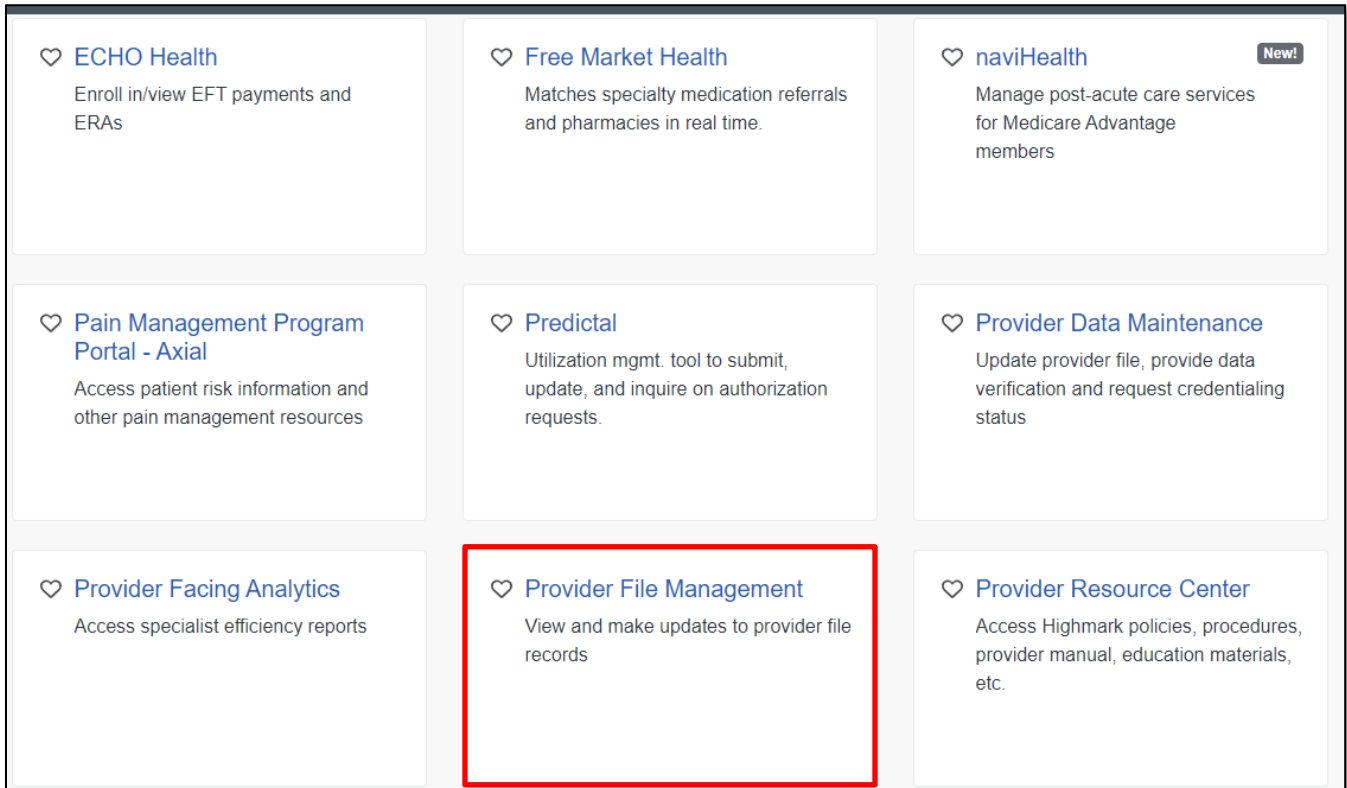
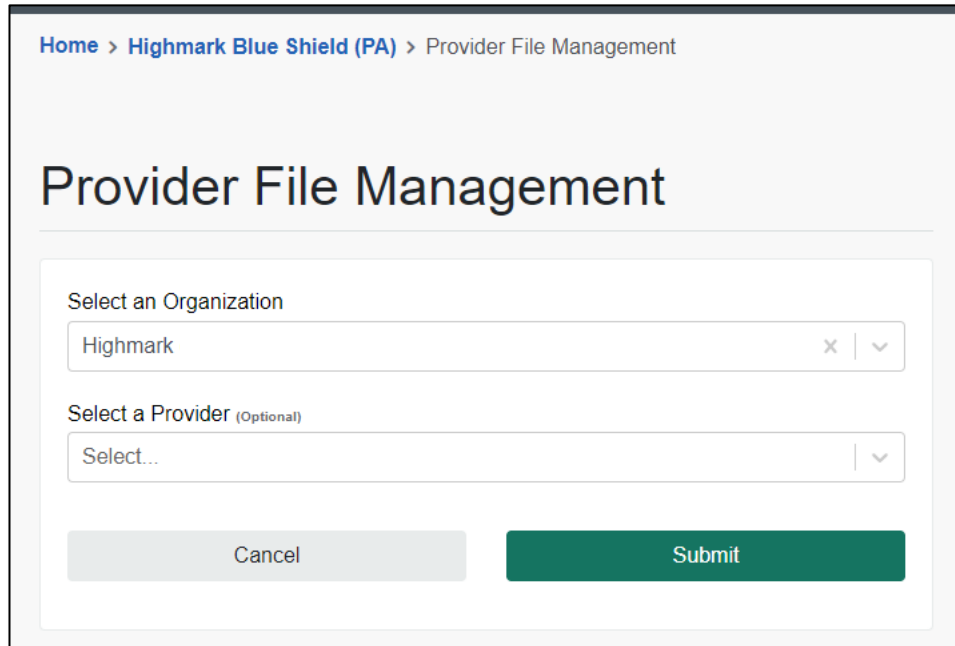Enter your credentials to log into Availity.
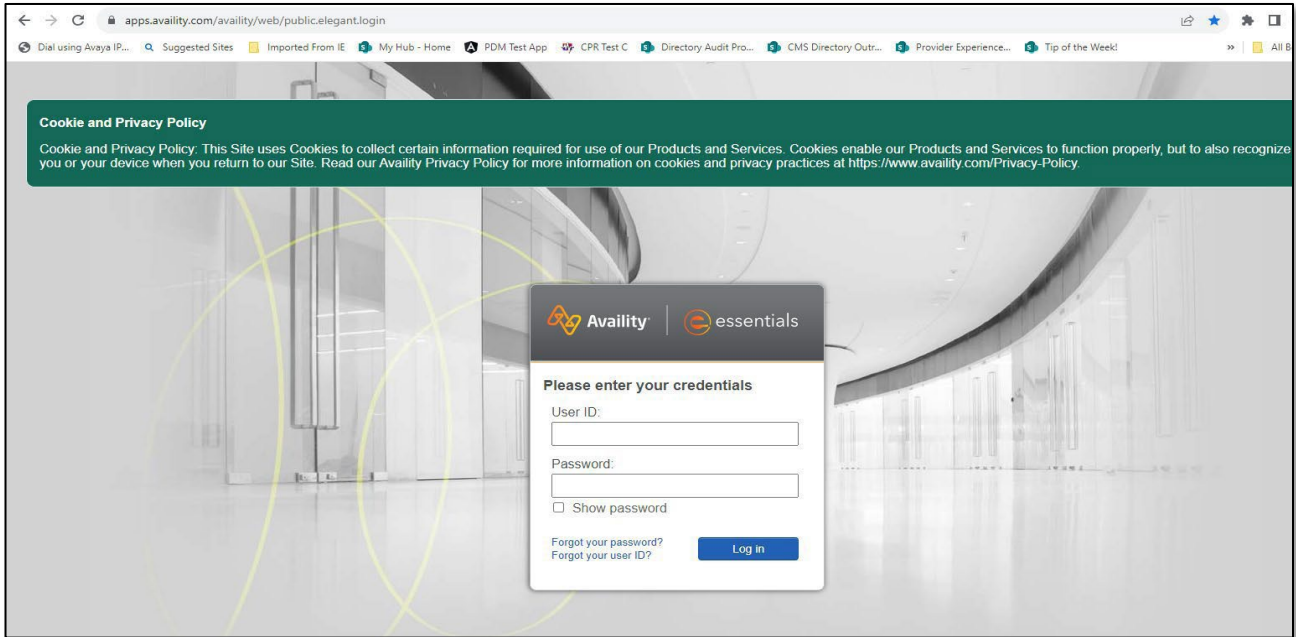
"Click" on Payer Spaces.
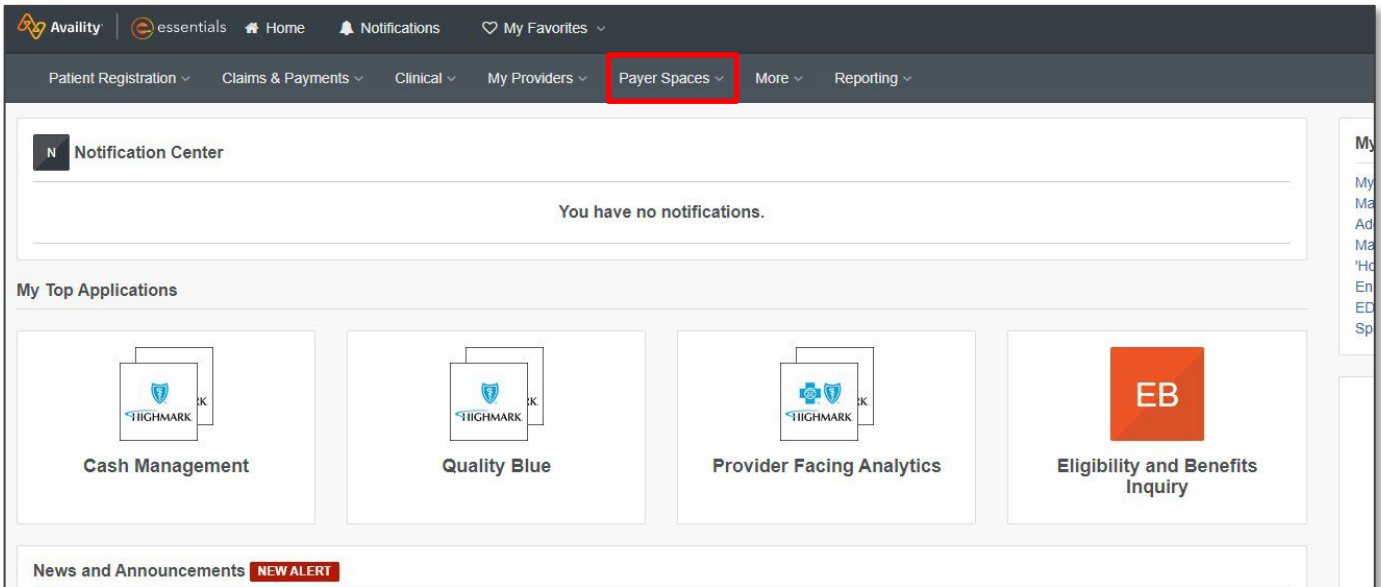
"Select" the appropriate health plan.

Scroll down the page and "Click" on Provider File Management.

"Select" an Organization and "Click" **Submit**.

That will take you into the PFM platform.

After the billing provider number is selected, you'll be taken to the Provider File Management page. You will see six options at the top:
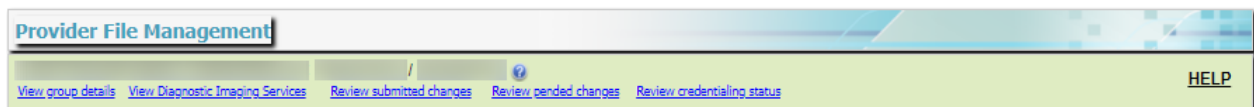
1. **View group details**
   - This link gives a quick snapshot of some general information about the selected group. For example, you will see:
     - Effective date of the group
     - Networks the group participates in
     - Group network specialty/role
     - Tiered benefit level

2. **View diagnostic imaging services**
   - This link shows if a group has been approved through the privileging process to perform specific radiology services. Clicking on this link allows the group to see which Diagnostic Imaging Procedure (DIP) levels are approved for their group.

     Clicking on the arrow next to the DIP Level will allow you to drill down and see the procedures affiliated to that DIP and the effective date the DIP was added to the group.

3. **Review submitted changes**
   - This link provides an overview of the changes that have been submitted in the current

session. To keep a record of this report, you must click print when viewing. The report will not be saved and cannot be retrieved after you log out of your current session.

4. **Review pended changes**
    o This link provides an overview of the changes that could not be processed in real-time and allows the user to monitor the status. Pended changes will be reviewed by the Provider Information Management (PIM) staff. You should receive notification of status of pended request within 7-10 business days.

5. **Review credentialing status**
    o This link provides credentialing / recredentialing status for practitioners within your group. The field titled, "Case Status" will report the progress of the providers credentialing application. In order to see additional details on the case including development items and contact info for the listed processing status, click on the arrow next to the practitioner's name to expand.

    If the group is not listed as the primary affiliation for a practitioner, their credentialing status will not be available to view. Primary affiliations cannot be changed in the provider portal (Availity). These changes must be faxed via a letter to PIM with the practitioner's signature.

6. **Help**
    o This link will route the user to their regional Provider Resource Center (PRC). The PRC contains helpful information and resources to assist with your daily interactions with Highmark members and with Highmark. Once you have entered the Provider Resource Center page, to access forms: click FORMS >Provider Information Management Forms.

LOCATIONS AND PRACTITIONERS TAB

There are five functions you can complete on this page:

- Add a Practitioner
- Add an Address
- Update Location/Practitioner Information ****NEW FUNCTION****
- Request Credentialing/Update Specialty
- Accreditations
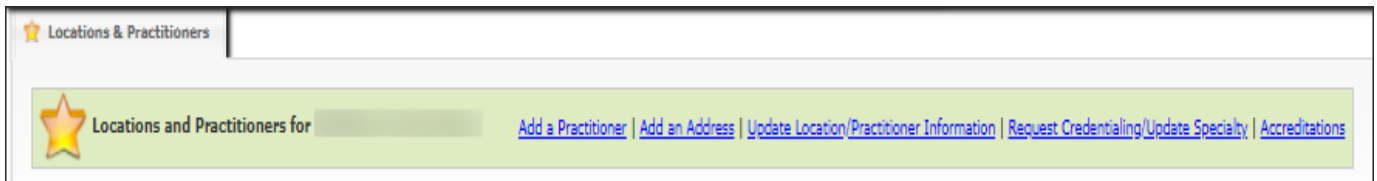
⭐ **Network providers are required by contract to notify Highmark of any status changes.**

Please pay close attention to the "Important" notice (shown below) on the Locations and Practitioners tab. This note reminds you to review and confirm your group's information every three months. Reviewing your information periodically ensures that directories have accurate information and that your claims will process correctly.

It's important to review the addresses and practitioners on file and if correct, place a check in the box: "❑ All information is correct as of (date)" and click "OK". If your information is not correct, follow the processes to update the addresses or practitioners on file. After you have updated your information, return to the Locations and Practitioners tab and attest that your information is correct.

ADD A PRACTITIONER

To add a practitioner, click "Add a Practitioner" on the Locations and Practitioners tab when you need to add an already-credentialed practitioner to your group.

If you add a Practitioner with a future effective date, the Practitioner will show added to the group however networks will not show in PFM until that date.

Important Note: If the provider has never completed an initial credentialing application with Highmark, they must do so before being added to your group. You may request credentialing by clicking the "Request Credentialing/Update Specialty" link on the New Practitioner search page or from the link on the Locations and Practitioners main page.

After recording your electronic signature, you will receive a message that your practitioner has been added to the group or pended to be reviewed by Provider Information Management staff. If you receive a different message, please click on the "Help" link at the top of the PFM page to be directed to your Plans Provider Resource Center and complete the appropriate form.

ADD AN ADDRESS

You may add an address to your group by clicking "Add an Address" on the Location and Practitioners tab. There will be five sections to complete. All required fields will need to be completed. Click "Expand All" to view all fields and "Edit" to answer the questions.

You cannot create a new practice address unless you affiliate it to at least one existing practitioner for the group. If both the address and the only practitioner you will associate with it will be new, click on the "Help" link at the top of the PFM page to be directed to your Plans Provider Resource Center and complete the appropriate form.

1. **Address Characteristics**
   o Effective date will default to current date. You can change the effective date to a future date if needed. Please do not abbreviate when entering address information.

   If you select Main, Check, Lock Box, Credential Mailing or Mailing and another address with the same affiliation already exists, you will receive a message if you continue, and the other address will have the corresponding address type affiliation removed. If it is the only address type affiliation, the address will be termed.

2. **Contacts**
   o Enter all applicable contact information.

   A phone number is required for Main and Practice address types and identified as the Member Access number. The member access number is the number members should call to schedule appointments. This phone number also appears on cards for members covered under products requiring PCP selection (such as HMO members). Changing the PCP member access number will generate new ID cards for all members.

3. **Office Hours and Appointments**
   o Add office hours for each day or click "Copy from Location" if there is another address already listed with the same hours as the new address. Select the appropriate office and click "Copy". By clicking on copy, the office hours on file for the selected office will be pulled in for the new address. You can then make changes to these hours if necessary.

   When you are finished adding the office hours, answer all Appointment and Practice availability questions according to the practice address. Under Appointments, the patient acceptance value you select will initially be affiliated to all applicable networks. Changes can be made to each network after the initial save.

   Under Practice Availability, answer the general practice availability questions according to the practice address; only complete the behavioral health practice availability questions if you have Behavioral Health practitioners in your practice.

4. **Practitioners and Other Clinic Staff**
    o Add the practitioners that will work at this location, or if it is more convenient, you may click "Select a location" and choose which location you would like to copy the practitioners from.

    If the new address you are adding is replacing an existing address, Click on Select a Location button, and choose the location you are replacing and click "Ok". Check the box beside "Terminate practitioner affiliations with selected address". A warning message will appear indicating the selected location will be termed if the address has no other address types. Once you click "Select", you will receive a pop-up box that provides a list of practitioners that can be added to this address. Select the appropriate practitioners and indicate if they e prescribe and accept appointments at this location. Click "OK". Selecting "No" for Accepting Appointments will suppress the practitioner from the location in the directory.

    Under Other clinical staff at this location & electronic medical records, answer all questions according to the practice address.

5. **Office Accessibility and Services**
    o Under Office Accessibility and Services, answer all questions in the three sections according to the practice address.

UPDATE LOCATION/PRACTITIONER INFORMATION
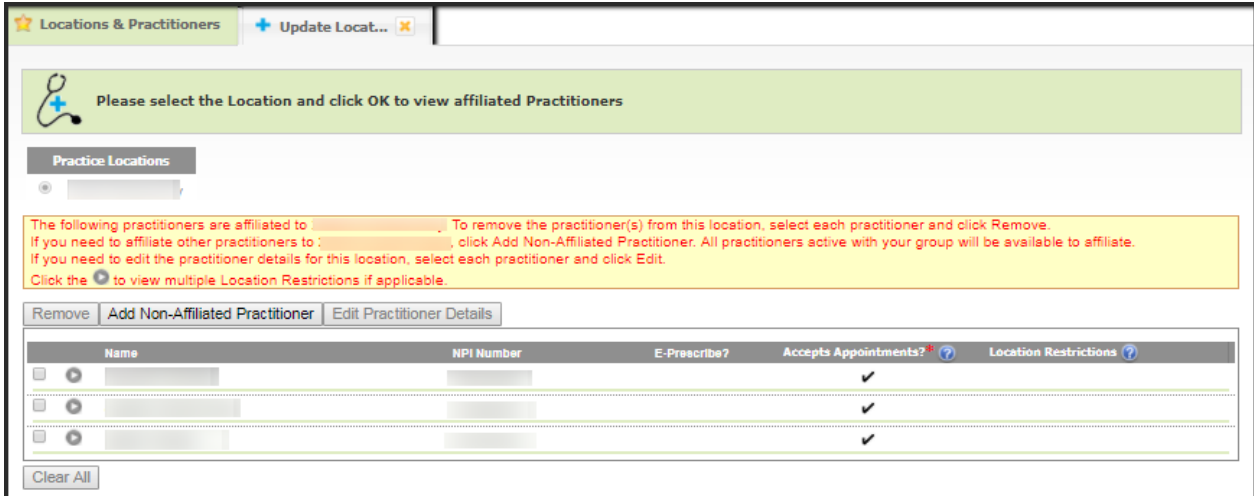
To manage location/practitioner information, click "Update Location/Practitioner Information" on the Location and Practitioners tab. The ability to update location/practitioner information has been removed from editing an address or practitioner.

After selecting a location, the current affiliated practitioners will populate. Only one location can be selected at a time. Click the "Clear" or "Clear All" button to back out of your current choice.

To remove a practitioner or multiple practitioners from the selected location, check the box next to the practitioner(s) and click "Remove".

In order to affiliate additional practitioners to the selected location, click the "Add Non-Affiliated Practitioner" button, select from the active practitioners in your group that are currently not affiliated to the selected location, complete the required Accepts Appointments for each selected practitioner and click "Ok".
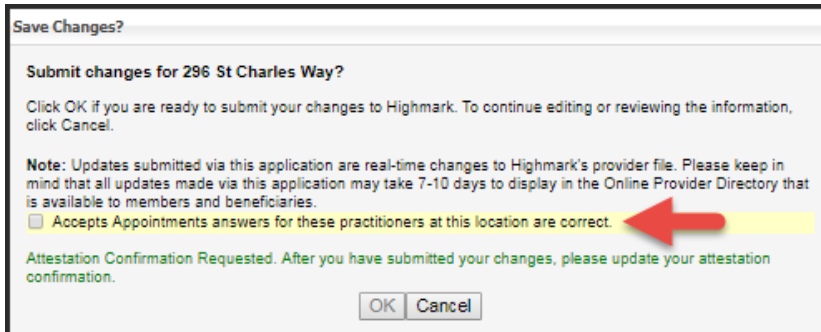
To edit the practitioner details for the selected location, check the box next to the practitioner(s) and click "Edit". Location/Practitioner Restrictions are only viewable at this time. To update Location/Practitioner Restrictions, please visit the Provider Resource Center under Forms>Provider Information Management Forms>Adding a Practice Address or Existing Address Change Forms.

Before saving your changes for the selected address, please verify the Accepts Appointments answers are correct for the affiliated Practitioners, check the box to record your verification then click "Ok"

REQUEST CREDENTIALING/UPDATE SPECIALTY

After completing one of the two processes for CAQH below, to request credentialing for a new practitioner or update the practitioner's specialty, click "Request Credentialing/Update Specialty" on the Locations and Practitioners tab. Please complete all required fields, including your CAQH ID.

- o No CAQH ID – visit CAQH Proview to obtain a CAQH ID. Once you receive a confirmation email with your CAQH ID, log in to Proview using your CAQH ID and complete the CAQH credentialing application. Be sure to add Highmark as an authorized plan or grant global authorization.
- o Existing CAQH ID – log in to CAQH Proview to review and re-attest to your CAQH application. Be sure to add Highmark as an authorized plan or grant global authorization.

Upon completion of the Initial Credentialing Request in PFM, Highmark will send you a confirmation email.

ACCREDITATIONS

To update your group accreditations, click "Accreditations" on the Locations and Practitioners tab and complete all applicable sections.

EDIT AN EXISTING ADDRESS

As you scroll down the Locations and Practitioners page, you will see Locations and Addresses for the selected group. Each address will be listed, along with its status and what type of address it is.

If you need to make a change to any part of the street address with the exception of the Suite/Room, you must add a new address with the changes then delete the existing address.

To review or edit an existing address, either click on the street address or check the box for that line. Checking the box will enable the "Edit" or "Delete" buttons. You will notice the address you are viewing is now on its own tab.

When reviewing the address, if you know what area you need to make your edit, you may simply expand that one heading. You can also click "Expand All" or "Collapse All" to view or close the info under all headings. ★Before submitting, please review, update if necessary and confirm office hours are correct by checking the box under the Office Hours section. ★

Please note the important message: "Plan to complete and submit any updates and new provider, address, and credentialing requests you start during the same session. You will not be able to save updates or requests and submit them at a later session." As you close tabs and do not submit your changes, you will also be prompted be sure that you want to continue without submitting your request.

NEW FEATURES as of 4/2018

1. Under Address Characteristics, the Suite/Room field is now editable.

2. Under Office Hours and Appointments, in addition to updating your patient acceptance at the location/network level for all practitioners in your group, you can now update the patient acceptance at the location/network/practitioner level.

   o Only one Network/Patient Accept can be updated during one submission. Radio buttons shall allow the user to choose the Contracted Network/Accepting Patients value. Once a Network is chosen, all others become disabled. If the user has chosen the incorrect network, the Clear button will empty out the chosen network and the display of the affiliated practitioners.

   o More than one practitioner can be updated. You can select one or all of the Practitioners and their own patient accepting value.

3. Credential Mailing contact information is now editable and available to view.

⭐ **Locations & Practitioners**   ▯ _____ ✖

🏢 **Address Information for** _____
   Submit | Cancel

⚠ Plan to complete and submit any updates and new provider, address, and credentialing requests you start during the same session. You will not be able to save updates or requests and submit them at a later session.

[Expand All] [Collapse All]   * = Required

Address Characteristics   Back to top

Address and effective date

Address:		**Address type** * ❓	**Effective date**	**Termination date**	[Edit]
Effective for this group:	12/01/2014	Check:			
Termination date:		Credential mailing:			
Doing business as:		Lock box:			
		Main:	✔ 12/01/2014		
		Mailing:			
		Practice:	✔ 12/01/2014		

Contacts   Back to top

This address is the main location for Wellspan Cardiology.

Use the table below to update details about contacts at this address. Contacts are only required for practice locations and the main location. **Phone number format: 999-999-9999 X9999**
[Edit] [Delete]   [Add New Row]

	Contact Name	Title	Communication Device Type *	Communication Device Number *	Member Access Number? ❓
☐	_____	NaviNet User	Phone	_____	No
☐			Fax	_____	No
☐	_____	NaviNet User	E-Mail	_____	No

Phone number on member ID cards ❓   [Edit]
Member access number: * _____

Office Hours and Appointments   Back to top

Office Hours * ⭐   [Edit]
Please review office hours, update if necessary, and confirm they are correct for this location.
☐ Office hours for this location are correct.

Use the table below to set and update office hours for this address. Office hours are required for practice locations. **Please enter TIME in hh:mm format.**
[Edit] [Delete] [Copy Row] [Copy From Loc]   [Add New Row]

	Day	Start Time	Stop Time	Frequency
☐	Monday	8:00 AM	2:30 PM	Weekly
☐	Tuesday	8:00 AM	2:30 PM	Weekly
☐	Wednesday	10:00 AM	2:30 PM	Weekly
☐	Thursday	6:30 AM	3:30 PM	Weekly
☐	Friday	10:00 AM	2:30 PM	Weekly

Appointments   [Edit]
Patient age range: 0 Years to 125 Years
Do you accept walk-in appointments at this location? *
Plans and Patient Acceptance for this Location and all affiliated practitioners

Network Name	Accepting Patients *
_____	Open to New Patients ▼
_____	Open to New Patients ▼
_____	Open to New Patients ▼

[Update Patient Accept for Practitioner] ❓

Practice availability   [Edit]
Questions last answered/updated for this location on 10/10/2017

General practice availability *	Yes	No
1. Is Your Practice Able to Accommodate Urgent Care Appointments Within 24 Hours?		
2. Is Your Practice Able to Accommodate Routine Symptomatic Appointments Within 2-7 Days?		
3. Is Your Practice Able to Accommodate Routine Asymptomatic Appointments Within 30 Days?		
4. Is your practice currently able to provide 24-hr coverage based on the following: The ability to provide 24/7 coverage for patients and provide them with triage and appropriate treatment or referrals for treatment 24/7 (exceptions: audiologists, dieticians/nutritionists, occupational therapists, physical therapists, speech/language pathologists, dermatopathologists, non-hospital-based pathologists, non-hospital based oral and maxillofacial pathologists, and preventive medicine specialists). This can be accomplished either directly or through an on-call arrangement with another participating network practitioner of the same or similar specialty, who is a network-credentialed practitioner. Coverage can also be accomplished through an answering service, pager, or via direct telephone access whereby the practitioner (or his/her designee) can be directly accessed, if needed. A referral to a crisis line is not acceptable coverage unless there is an arrangement made between the practitioner and the crisis line whereby the practitioner (or his/her designee) can be contacted directly, if needed. Practitioners who provide care for children under the age of 13 years must provide appropriate pediatric coverage?	✔	

Behavioral health practice availability	Yes	No
1. Is Your Practice Able to Accommodate Provider Care for Non Life Threatening Emergencies Within 6 Hours?	✔	
2. Is Your Practice Able to Accommodate Urgent Care Within 48 Hours?	✔	
3. Is Your Practice Able to Accommodate Appointments for Routine Office Visits Within 10 Business Days?	✔	
4. Is your practice currently able to provide 24-hr coverage based on the following: The ability to provide 24/7 coverage for patients and provide them with triage and appropriate treatment or referrals for treatment 24/7 (exceptions: audiologists, dieticians/nutritionists, occupational therapists, physical therapists, speech/language pathologists, dermatopathologists, non-hospital-based pathologists, non-hospital based oral and maxillofacial pathologists, and preventive medicine specialists). This can be accomplished either directly or through an on-call arrangement with another participating network practitioner of the same or similar specialty, who is a network-credentialed practitioner. Coverage can also be accomplished through an answering service, pager, or via direct telephone access whereby the practitioner (or his/her designee) can be directly accessed, if needed. A referral to a crisis line is not acceptable coverage unless there is an arrangement made between the practitioner and the crisis line whereby the practitioner (or his/her designee) can be contacted directly, if needed. Practitioners who provide care for children under the age of 13 years must provide appropriate pediatric coverage?	✔	

Other clinical staff at this location   Back to top

Other clinical staff at this location & electronic medical records   [Edit]
Clinical staff:
Electronic medical records:

Office Accessibility and Services   Back to top

Location conveniences   [Edit]   **Services offered at this location**   [Edit]
Handicapped accessible: *   Yes
Parking: *
Public transportation: *   Yes

Communication and language services   [Edit]
Languages:
Language services: American Sign Language   Telecommunication Devices

[Submit] [Cancel]

DELETE AN ADDRESS

To delete an address, on the Locations and Practitioners tab check the box next to the address you wish to delete and click "Delete". The current date will display as the effective date. You can change the effective date to a future date if needed.

Important Notes: As long as the practice is not the Main location and all practitioners are affiliated with another location in the group, the location will be termed. IF the location being termed is the only Main/Practice location for the group AND there is only one practitioner in the group, the practitioner will be deleted and the group account will be terminated once reviewed by the Provider Information Management staff.

REVIEW OR EDIT PRACTITIONERS

On the Locations and Practitioners tab, scroll down to the bottom portion of the page to review "Practitioners affiliated with the group". You will see some information about each practitioner including:

- NPI
- status with the group
- if this group is their Primary Affiliation

If this group is not listed as the primary affiliation for the practitioner, there are certain pieces of information for example demographics, languages spoken and education info that cannot be updated.

- Primary affiliations cannot be changed on the provider portal (Availity). These changes must be faxed via a letter to PIM at 800-236-8641 with the practitioner's signature.

To review or edit a practitioner, either click on the practitioner's name or check the box beside their name. Checking the box will enable the "Edit" or "Delete" buttons. When selecting a practitioner to edit, their information will be displayed on its own tab. You can expand only the heading you would like to review or click "Expand All".

A photo of the provider may be uploaded to be posted on the website's online directory under the Demographics and Plan Participation section.

To ensure your group has the correct tiered benefit levels, please make sure to add/update the practitioner's hospital affiliations under the Hospital Affiliations section.

Locations & Practitioners ☒

Practitioner Information for ☐ ❓ - Patient Review
Submit | Cancel

⚠️ Plan to complete and submit any updates and new provider, address, and credentialing requests you start during the same session. You will not be able to save updates or requests and submit them at a later session.

Expand All | Collapse All

* = Required

⚪ **Demographics and Plan Participation**   Back to top

Demographics   Edit   ID numbers
Effective for this group: 08/07/2017   National provider ID: Medical license number:
Gender: Female   Blue Shield ID:
Race:
Ethnicity:

                                                          Plans and specialties for this practitioner in this group ❓
Languages spoken   Edit   **Network Name**   **Specialty**   **Role**   **Effective in Network**
                                                                                        Dermatology   Specialist   01/01/2018
Directory photo ⭐   Dermatology   Specialist   11/14/2017
         Upload a photo of the practitioner. By uploading the photo the practitioner gives consent to publish   Dermatology   08/07/2017
         the photo in the provider online directories of Highmark, the Blue Cross Blue Shield Association   Dermatology   Specialist   11/14/2017
         ("BCBSA"), and/or other BCBSA independent licensee Plans.
         Upload photo | Remove photo   **Tiered Benefit Level**   **Effective Date**
                                                                                                        06/01/2018

⚪ **Behavioral Health Profile**   Back to top

The Practitioner you selected does not have a valid behavioral health specialty.

⚪ **Educational Background**   Back to top

Use the table below to add additional education levels for this practitioner.   Add New Row

Type	Institution	From	To
FELLOWSHIP		07/01/2015	10/01/2016
RESIDENCY		07/01/2012	06/01/2015
INTERNSHIP		07/01/2011	06/30/2012
MEDICAL SCHOOL		07/01/2007	06/01/2011
UNDERGRADUATE		07/01/2003	06/01/2007

⚪ **Hospital Affiliations** ⭐   Back to top

Use the table below to add additional, update, or terminate hospital affiliations for this practitioner.   Add New Row

Name	Hospital Status ❓	Affiliation Type	Affiliation Level	Full Admission	Status	Effective Date	Termination Date
Hospital	Active	Hospital	ACTIVE ▼	☑	Active	08/07/2017	☒

Submit | Cancel

DELETE A PRACTITIONER

To delete a practitioner, on the Locations and Practitioners tab check the box beside the practitioner's name and click "Delete". The current date will display as the deletion date. You can change the deletion date to a past or future date if needed.

IMPORTANT: If you decide to resign from the Highmark network(s), the resignation will trigger automatic letters to Highmark members, who are your patients, via U.S. Mail, notifying them you have terminated and are no longer in network. Please take this into an account before completing this action.

FREQUENTLY ASKED QUESTIONS

How do I update / view Facility information?

Facilities can update their information by accessing the Address/Phone Number Change Form for Facility & Ancillary Providers. This process will formally notify Highmark when a facility anticipates mergers, acquisitions, changes of ownership, legal name changes, new or changed locations or services or related events. This form is available on the Provider Resource Center, when accessed via the provider portal (Availity.) Go to **FORMS** > Miscellaneous Forms > Address/Phone Number Change Form for Facility & Ancillary Providers.

Note: Facility providers need to access the Provider Information link via the provider portal, then click on the Networks tab to see their participation status.

What do I do if I cannot perform an update via the PFM function?

Click on the Help link to be routed to your regional Provider Resource Center (PRC). Once you have entered the Provider Resource Center page, to access forms: click Forms>Provider Information Management Forms and complete the applicable form. Requests in the form of a letter can be faxed to PIM at 800-236-8641 with the practitioner's signature.

- Hospital Based Provider Affirmation Statement - should be accompanied by the Request for Addition / Deletion to Existing Assignment Account form when adding a new practitioner who practices solely at an acute care hospital in an inpatient setting only
- Provider File Maintenance Request – changes to addresses, group name, tax id and NPI
- Request for Addition / Deletion to Existing Assignment Account – add/delete a practitioner from an existing group
- Request for Assignment Account – create a new group