



How to Attest or Update Your Provider Directory Information

Background

In service of our members/your patients and in compliance with federal and state law, all contracted providers, facilities, and practitioners must attest to the accuracy of their provider directory information every 90 days and update information when needed.

What you need to know

Because the 2021 Consolidated Appropriations Act (CAA) requires health plans to update member-facing provider directory information within 48 hours of receipt:

- Attestation as to the accuracy of your provider directory information must be made on Provider Connection.
- When changes are required to your provider directory information, you have two options for how to make and submit them:
 - 1. Via the Provider & Practitioner Profiles section on Provider Connection.
 - 2. In the official Blue Shield Provider Demographics Update Excel Spreadsheet uploaded to Provider Connection.

Blue Shield Promise Medi-Cal providers are not required to follow this process if using SFTP to transfer EDI 274 data. However, if you are a Medi-Cal provider and do not use SFTP and/or serve members in any other plan type, you must attest and update.

What you need to do today

- Establish a Provider Connection account if you do not already have one. The <u>Provider</u> <u>Connection FAQ</u> at the end of this document will walk you through the registration process. It also tells you what to do if you experience website access issues.
- Review this document to understand how to attest and/or update your provider directory information so that it complies with federal and state law. A clickable table of contents is provided on the next page.

Will you reject my provider directory attestation/updates if I submit by email?

For a limited time, Blue Shield will still accept attestation/updates submitted on the new *Provider Data Validation Spreadsheet* via the Provider Information and Enrollment standard intake email. However, processing time and accuracy may be compromised as we must manually address these submissions. To comply with federally required turnaround times and provide you with the best service possible, attesting and updating via Provider Connection is preferred. Click <u>here</u> for a blank *Provider Data Validation Spreadsheet*.





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Overview of key steps

In addition to establishing a Provider Connection account and/or ensuring your existing account is operational, review the follow steps so that you can understand how to attest and update your provider directory information online.*

- 1. Provider Connection Account Managers automatically have access to their provider directory data. If desired, the Account Manager can assign data access privileges to one or more users who can then validate and attest to the accuracy of provider directory information and update information when needed. (See <u>Step 1</u> for detailed information.)
- 2. Every 90 days, the Account Manager or assigned user attests to the accuracy of provider directory information for each Tax ID (TIN) or Social Security Number (SSN). Provider Connection displays an alert on the home page and in the Provider & Practioner Profiles section when it is time to attest. (See <u>Step 2</u> for detailed information.)
 - In this document, we use the abbreviation "TIN" to refer to both Tax ID and SSN.
- 3. When it is necessary to make updates to provider directory information, the Account Manager or assigned user does so either directly on Provider Connection or by downloading their *Provider Data Validation Spreadsheet* from Provider Connection, editing as necessary, and uploading the file back to the website. (See <u>Step 3</u> for detailed information.)

Blue Shield will send "attest now" and reminder notifications on a rolling 90-day cadence. **Providers who do not respond to these notifications may be suppressed from Blue Shield's Find a Doctor online directory.** If your data is suppressed, log in to Provider Connection and attest/update your data. This will reinstate your information in our online directory.

* **Blue Shield Promise Medi-Cal providers** are not required to follow this process if using SFTP to transfer EDI 274 data. However, if you are a Medi-Cal provider and do not use SFTP and/or serve members in any other plan type, you must attest and update as described above.

Step 1: Assign provider/practitioner data access privileges if desired

A Provider Connection Account Manager can assign provider demographic information access privileges to one or more of their users. This allows someone other than the Account Manager to attest to the accuracy of provider directory information every 90 days and/or to make updates as needed.

Instructions

- 1. Log in to Provider Connection (Account Manager*).
- 2. Click Account management in the upper right corner.
- 3. Click Manage your user accounts under Manage user accounts.

	Assign access to EXISTING user		Assign access to NEW user
4.	Click the View link next to the user's name you wish to give access.	4.	Click Create user account and complete the fields to establish the account.
5.	Slide the Provider & practitioner data button to the right. It turns blue.	5.	Slide the Provider & practitioner data button to the right. It turns blue.
6.	Select Tax ID(s) if not already selected.	4	Click Continue
7.	Click Save .	0.	
		7.	Select at least one TIN. Click Save .
	8. A link to the Provider & Practitioner I navigation bar.	Prof	iles section will appear in the user's top

* Only commercial and MSO Account Managers can update provider directory information and/or assign privileges.

Step 2: Attest to provider directory information accuracy every 90 days

The Provider Connection Account Manager(s) – or the user(s) to whom they have assigned provider/practitioner data access – receive an alert when it is time to attest.* A yellow banner will appear at the top of the home page with an "Attest now" link. Attestation can also happen from the Provider & Practitioner Profiles section.

Instructions

- 1. Log in to Provider Connection. 2. Click Attest now in the yellow banner at the top of the home page. This link is also available from the Provider & Practitioner Profiles section. account.
- 3. The attestation pop-up window displays all TINs associated with your provider

	lf your provider data is accurate (i.e., no changes needed)	If your provider data is NOT accurate (i.e., updates are needed)	
4.	 Click the checkbox next to each TIN after validating that provider directory information on file is accurate as is. Use the Select all Tax IDs option if you are attesting to the accuracy of all TINs. 	 Do not click the checkbox next to a TIN if data needs changes. Close the pop-up window or click the No, review data first link. This returns you to the Provider & Practitioner Profiles section. 	÷
5.	Click Submit.	6. Continue to <u>Step 3</u> for further	
6.	An attestation window presents. Click I attest.		
7.	A confirmation presents. If the email address referenced in the confirmation is incorrect, please update your profile information.		

Blue Shield Promise Medi-Cal providers are not required to follow this process if using SFTP to transfer EDI 274 data. However, if you are a Medi-Cal provider and do not use SFTP and/or serve members in any other plan type, you must attest and update.

Step 3: Update provider directory information when needed

Blue Shield offers two options to make updating provider directory information as easy as possible. The links below will take you to step-by-step instructions.*

	Option	Use when
A	<u>Make single updates directly on</u> <u>Provider Connection</u> in the Provider & Practitioner Profiles.	 NOT adding and/or terming a service location or practitioner from the TIN. NOT editing office phone number.
В	<u>Make bulk updates via the pre-</u> <u>populated Provider Data Validation</u> <u>Spreadsheet downloaded from</u> <u>Provider Connection</u> and uploaded back to the website.	 Adding and/or terming a service location or practitioner from the TIN. Editing office phone number.

⁶ Blue Shield Promise Medi-Cal providers are not required to follow this process if using SFTP to transfer EDI 274 data. However, if you are a Medi-Cal provider and do not use SFTP and/or serve members in any other plan type, you must attest and update.

Make single updates directly on Provider Connection

- 1. Log in to Provider Connection and navigate to the Provider & Practitioner Profiles section. For Account Managers, it will be located on your Account Management page. For users granted access, the link will be in your top navigation bar.
- 2. Click Update your provider's information under Provider & Practitioner Profiles.
- 3. Click the **view** link next to the provider record you wish to update.
- 4. The Provider Profile Details screen presents. Click the **pencil** icon next to the field you wish to update.
- 5. A pop-up window presents. Enter or select the new information and click **Request update**. Repeat as necessary to upload all directory changes.
 - Follow this same procedure for updating practitioner records that display on the Practitioner Profile Details screen.
- 6. When you have completed entering all updates and if it is time for you to attest, return to the Provider & practitioner profiles section and click **Attest now**.
- 7. The attestation pop-up window presents with all TINs associated with your provider account. Click the attestation checkbox as appropriate to indicate the provider directory information is accurate. If needed, see <u>Step 2</u> for detailed instructions on attestation.

Make bulk updates via the Provider Data Validation Spreadsheet from Provider Connection

1.	. Log in to Provider Connection and navigate to the Provider & Practitioner Profiles section. For Account Managers, it will be located on your Account Management page. For users granted access, the link will be in your top navigation bar.		
2.	Click Download in the upper right corner above the blue sub-header.		
3.	A Select a Tax ID pop-up window presents with a single TIN or with a drop-down list of TINs from which to choose if you have more than one.		
4.	Select the TIN. (Note, you can only download data for one TIN at a time.)		
5.	Click Download and save. If your file fails t experience issues, please contact the Pro (800) 258-3091.	o download, try again. If you continue to vider Information & Enrollment Team at	
6.	The Provider Data Validation Spreadsheet as ProvDataVal_TIN#_000000001.xlsx. Not file changes the last number in the file nar	t, pre-populated with your data, downloads te that every subsequent download of the me.	
7.	There are two options for completing updates in the spreadsheet*:		
	i. Delta file: Make add/term/updates t	o the pre-populated records as needed.	
	ii. Full file: Replace pre-populated date	a with a full set of your current data.	
	Upload a DELTA file	Upload a FULL file	
F	or both options, you must retain all field na	mes and data elements in the spreadsheet.	
F 8.	or both options, you must retain all field na Follow the instructions on the first tab to make updates to the provider directory information contained in the spreadsheet.	 mes and data elements in the spreadsheet. 8. Follow the instructions on the first tab to replace provider directory information in the spreadsheet with a full set of your current data. 	
F 8.	 or both options, you must retain all field na Follow the instructions on the first tab to make updates to the provider directory information contained in the spreadsheet. Populate the Service Location Add/Term/Update and Service Location Term Date fields for anothe antice (name) 	 mes and data elements in the spreadsheet. 8. Follow the instructions on the first tab to replace provider directory information in the spreadsheet with a full set of your current data. Leave blank the Service Location Add/Term/Update and Service Location Term Date columns: 	
F 8. 9.	 or both options, you must retain all field na Follow the instructions on the first tab to make updates to the provider directory information contained in the spreadsheet. Populate the Service Location Add/Term/Update and Service Location Term Date fields for each entry (row). Save the spreadsheet with the same file name but add "_Delta_File" at the end. (ProvDataVal_TIN#_000000001_Delta_File.xlsx) 	 mes and data elements in the spreadsheet. 8. Follow the instructions on the first tab to replace provider directory information in the spreadsheet with a full set of your current data. Leave blank the Service Location Add/Term/Update and Service Location Term Date columns: If data is in the full file and not in Blue Shield's records, it will be considered an "ADD" update. 	
F 8. 9.	 or both options, you must retain all field na Follow the instructions on the first tab to make updates to the provider directory information contained in the spreadsheet. Populate the Service Location Add/Term/Update and Service Location Term Date fields for each entry (row). Save the spreadsheet with the same file name but add "_Delta_File" at the end. (ProvDataVal_TIN#_000000001_Delta_File.xlsx) 	 mes and data elements in the spreadsheet. 8. Follow the instructions on the first tab to replace provider directory information in the spreadsheet with a full set of your current data. Leave blank the Service Location Add/Term/Update and Service Location Term Date columns: If data is in the full file and not in Blue Shield's records, it will be considered an "ADD" update. If data is in Blue Shield's records and not in the full file, it will be considered a "TERM" update. 	

(Instructions continued on next page)

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- Navigate back to the navigate to the Provider & Practitioner Profiles section and click **Upload** in the upper right corner above the blue sub-header.
- The Upload Provider Data pop-up window presents. Drag and drop or select the saved file and click **Upload**. Note, you must close the file, or it will not upload.
- A banner displays at the top of the *Provider & Practitioner Profiles* section when the upload process is finished.
 - You may receive an error message if you try to upload more than one file at a time or if you submit an incorrect file type.
 - In rare cases, you may receive a "Please try again" message. We encourage you to do so.
- When you have completed uploading the updated spreadsheet and if it is time for you to attest, click **Attest now** from the *Provider & Practitioner Profiles* section.
- The attestation pop-up window presents with all TINs associated with your provider account. Click the attestation checkbox as appropriate to indicate that provider data is accurate. If needed, see <u>Step 2</u> for detailed instructions on attestation.
- You will receive an automated email in two business days to notify you if your data was successfully loaded in the *Find a Doctor* online directory.
 - If it was not loaded, you will need to resubmit the file. Before doing so, please review the Provider Data Validation Spreadsheet you uploaded to insure you have retained the field names and data elements in the file and completed entries according to the instructions on the spreadsheet.
- * You can avoid downloading the spreadsheet each time you need to submit an update.

Click <u>here</u> for a blank *Provider Data Validation Spreadsheet*. When submitting an update, either enter delta data (changes only) or a full set of your data into the spreadsheet, save, and upload the file.

You must retain the field names and data elements in the file and follow the appropriate naming convention and instructions.

Need help?

If after reviewing these instructions you still need help, please contact The Provider Information & Enrollment Team at **(800) 258-3091** Monday through Friday, from 6 a.m. to 6:30 p.m.

Provider Connection Registration/Account Management FAQ

1. What is Provider Connection

The Provider Connection website is your online source for current, detailed member eligibility and benefit information, claims status and payment information, authorization status and submission, Blue Shield/Blue Shield Promise policies and guidelines, and more. Organizations must appoint an Account Manager to establish the account and issue usernames and passwords for their employees.

2. What information do you need to establish a Provider Connection account?

You need a designated Account Manager to register the account and one Tax Identification Number (TIN) or Social Security Number (SSN).

• The Account Manager can add more TINs from the Manage your Provider Connection tax IDs page. This page is accessible to the Account Manager under their Account Management tools once the account is active.

Depending on the account type, you also need the following:

Account type	Data
Provider	 The check/EFT amount for one claim paid in the last three months under the registering TIN/SSN, and one of the following: Check/EFT number or Member ID or Claim number If there are no claims within the last three months, the system asks for the full name and birth date of an eligible Blue Shield member.
Management Services Organization (MSO)	 Claim information as described above. The Business Associate Agreement (BAA) date for each provider's TIN you are registering.
Billing Service	 TINs of the providers for whom you bill. The Business Associate Agreement (BAA) date for each provider's TIN you are registering.

3. How does an Account Manager register for a Provider Connection account?

Account Managers can create an account in five minutes or less.

• Click Log In/Register in the upper right corner of the Provider Connection homepage.

(Answer continued on next page.)

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- The Welcome to Provider Connection screen presents. Click **Create account**. There is a Need help? link available on each page.
- The system directs you through the five-step process to create the initial account:
 - 1. Choosing the account type: Provider, MSO, or Billing.
 - 2. Entering the organization's Tax Identification Number (TIN) or Social Security Number (SSN).
 - 3. Entering claims or member information for Provider and MSO account types.
 - 4. Entering contact information for your organization and yourself.
 - 5. Selecting your username and password.

Before the Account Manager can log in and add users to an account, the following must take place:

Account type	Action
Provider	• Blue Shield verifies the email address by sending the Account Manager a link that allows the Account Manager to login and access the website.
Management Services Organization (MSO)	 Blue Shield verifies the email address by sending the Account Manager a link. Completion and submission of the Terms and Conditions form that presents at the end of the registration process. This form documents your right to access private health care information (PHI) on behalf of Blue Shield for MSO services.
Billing Service	 Blue Shield verifies the email address by sending the Account Manager a link. Completion and submission of the Terms and Conditions form that presents at the end of the registration process. This form documents your right to access private health care information (PHI) on behalf of Blue Shield for billing services. Blue Shield sends an automated email to the Account Manager(s) of each provider linked to a Billing Service registration. The account activates when at least one provider has approved access to its TIN(s). If there is no Account Manager on record, Blue Shield Provider Customer Service contacts the provider.

 Once established, the Account Manager(s) – not Blue Shield – creates user profiles for individuals in their organization. View <u>Provider Connection help</u> on the website for additional instructions.

(Return to table of contents.)

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4. How many Account Managers can my organization have?

After you establish the first Account Manager account on the website, Blue Shield determined the number of Account Managers your organization can register based on your data. Most organizations can have at least two. When the maximum allowed number of Account Managers have registered, Provider Connection displays a message.

5. How do I tell if my organization has an existing Provider Connection account?

If you do not have a username/login for Provider Connection and you are unable to determine internally if your organization has a registered Provider Connection account, contact Provider Services at **(800) 541-6652**. There isn't a specific menu selection for Provider Connection, so feel free to choose any option.

To determine if your organization has an existing account, and to secure the name of the individual who manages that account, have the following information when you call Provider Customer Service:

- The Tax Identification Number (TIN) or Social Security Number (SSN) or Blue Shield Provider Identification Number (PIN) for the account in question
- Claim information submitted in the last 90 days for two different Blue Shield or Blue Shield Promise health plan members under that TIN/SSN or PIN. For each claim, provide:
 - Claim ID or Member ID
 - o Patient's first and last name
 - Service date
 - o Total billed amount

If your organization does not have an existing account, consider registering and becoming the Account Manager for your organization. See questions 2 and 3 above for additional information.

6. How do I get a username/login if I am not the Account Manager?

Contact your organization's Provider Connection Account Manager(s). Once they create a new user profile for you, Blue Shield will email you a temporary password. You have 30 days to visit the site and change your password or the account will be deleted.

7. How do I locate the name of my Provider Connection Account Manager?

If you have a username/login for Provider Connection, log in to the site. Click the round "badge" that contains your initials. It is located at the right of the main navigation. Scroll to the *My account manager* section to see the name and contact information for your Account Manager.

If you do not have username/login and you are unable to determine internally the Account Manager(s) for your Provider Connection account, see question 5.

8. How does my organization remove/replace an existing Account Manager?

The best practice is for the departing Account Manager to transition users to an existing Account Manager or newly registered Account Manager.

When this is not the case, you must request the removal/replacement of a departing Account Manager in writing on company letterhead. Include the following information:

- The Tax Identification Number (TIN) or Social Security Number (SSN) used on the existing account.
- The full name of the departing Account Manager. Additionally, it is helpful to have that Account Manager's username and email address.
- The full name and email address of the new Account Manager plus the desired username.
 - Note, the new Account Manager cannot use the previous Account Manager's email address.

Send the request as a PDF to providerCC@blueshieldca.com or fax to (844) 246-8928.

The new Account Manager receives an email notification after Blue Shield processes the written request. If necessary, Provider Customer Service can help transfer users from the old Account Manager to the new Account Manager.

9. How do I reset my Provider Connection password?

Provider Connection passwords expire every 90 days. The system displays an alert message starting 10 days prior to expiration. Account Managers and users can reset their own passwords before they expire.

To reset your password, log in to the site. Click the round "badge" that contains your initials. It is located at the right of the main navigation. Scroll to the *Password* section and click **Edit**.

Note the following:

- If a user's password is expired or locked, the Account Manager can reset it.
 - A username locks after multiple unsuccessful login attempts.
- It an Account Manager's password is expired or locked, s/he must contact Provider Services at (800) 541-6652 to reset.

10. How do I unlock my TIN and/or reinstate my disabled account?

A provider's Tax Identification Number (TIN) or Social Security Number (SSN) locks after multiple unsuccessful **registration** attempts.

A Provider Connection account disables after six months of inactivity.

To unlock a TIN/SSN or reinstate a disabled Provider Connection account, contact Provider Services at **(800) 541-6652**. There isn't a specific menu selection for Provider Connection, so feel free to choose any option.

You need the following information.

- The TIN/SSN for the account in question.
- Claim information submitted in the last 90 days for two different Blue Shield or Blue Shield Promise health plan members under that TIN/SSN. For each claim you need:
 - o Claim ID or Member ID
 - Patient's first and last name
 - o Service date
 - o Total billed amount
- If your organization does not have claims within the last three months, you must provide the first name, last name, and date of birth of two eligible Blue Shield members.

11. How do I get help working on Provider Connection?

Provider Connection includes an online <u>Help</u> section located in the upper right corner of the website, plus downloadable **Provider Connection Reference Guides** for <u>Blue</u> <u>Shield providers</u> and for <u>Blue Shield Promise providers</u>. These guides are linked on the <u>home page</u> and in the <u>News & Education</u> section of the site.

If you have issues with Provider Connection, contact Provider Services at **(800) 541-6652**. There isn't a specific menu selection for Provider Connection, so feel free to choose any option.

Additionally, you can access the <u>technical support form</u> online from the website (no login required). Response time for this form is typically between 24 to 48 hours.