

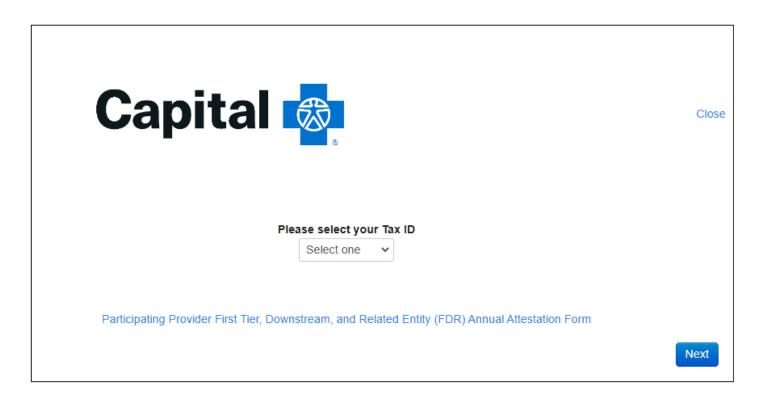
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Current functionality as of December 2024

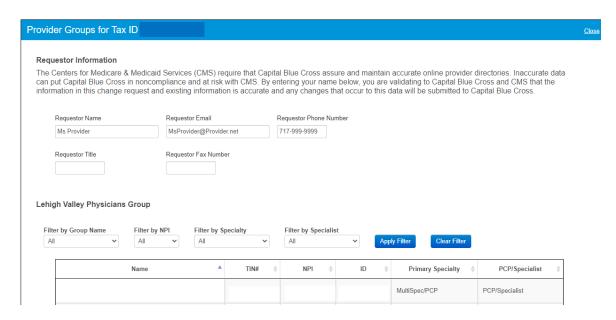
- Update Electronic Funds Transfer (EFT) information.
- · Group name change.
- Change primary address.
 - o Third party authority contact information.
- Change remittance address.
- Change SSA address/contacts.
- Change/add:
 - o Additional site locations.
 - o Correspondence address.
 - Medical records address and contact.
 - IVR address.
- Group office hours.
- Terminate alternate address.
- Openness status by product by practitioner.
- Change directory indicators by address by practitioner.
- View product participation.
- · Change practitioner:
 - o Name (FN, MI, LN).
 - o Gender.
 - Languages.
- View status of request.
- New or existing provider to an existing group.
- New group.
- Group terminations.
- Practitioner terminations.
- Provider attestation.



The provider will be identified at Availity® log in and the Tax ID drop down will populate based on the log in information.

Select the appropriate tax ID for review and click *Next*. To add a new group with a TIN not already associated with the log in, select *Add New TIN* from the drop down and click *Next*.





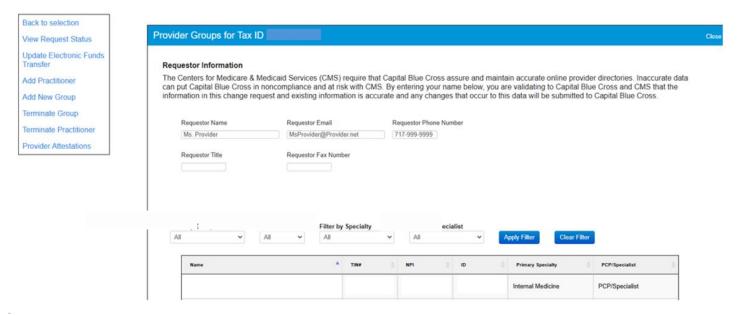
After a TIN is selected, the main provider selection screen is displayed. To make any selections, first enter the requestor name, requestor email, and requestor phone number. The requestor title and requestor fax number are optional fields. Once the requester information is entered, select a specific group or go directly to update or submit any requests options by selecting the appropriate selection on the left side toolbar. Click *Back to selection* to return to the Tax ID selection screen.

Notes:

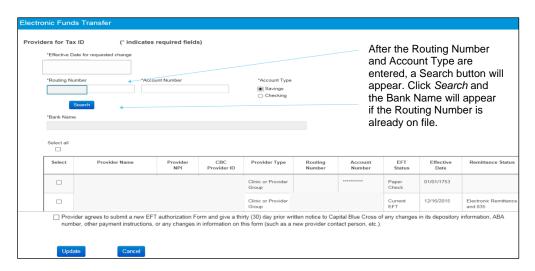
- In the top right of each screen is the *Close* option. *Close* will exit the user completely from the tool.
- Required fields are denoted with an asterisk.

Electronic Funds Transfer

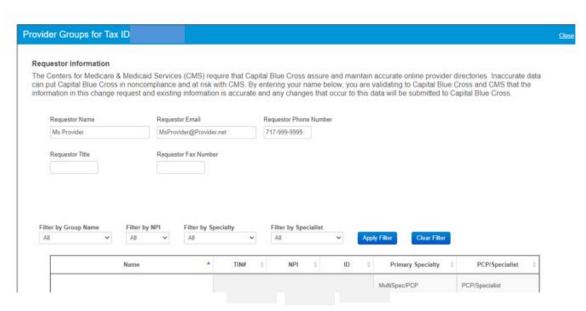
To update Electronic Funds Transfer (EFT) information, once the requestor information is entered, select *Update Electronic Funds Transfer* selection from the left side toolbar.



Current EFT settings are displayed along with a list of providers under the TIN. To change or add banking information, enter the Effective Date, Bank Routing Number, Account Number, and Account Type. Select Search, if bank name is available, it will auto-populate, otherwise it will be a freeform text box where data will need to be entered. Changes can be applied to individual providers or to all providers under the TIN by clicking Select all. The user must attest to the change by clicking the attestation box prior to selecting Update. Click Update and return to the main screen. Click Cancel to discard the request and return to the main menu.



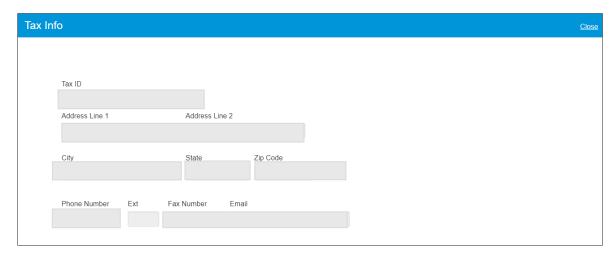




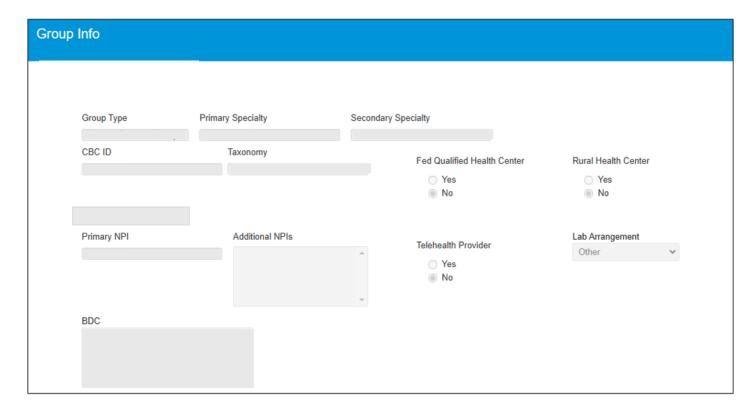
To access specific provider information such as tax information, addresses, contacts, and networks, click on a provider name highlighted in blue, located under the name column.

Tax information



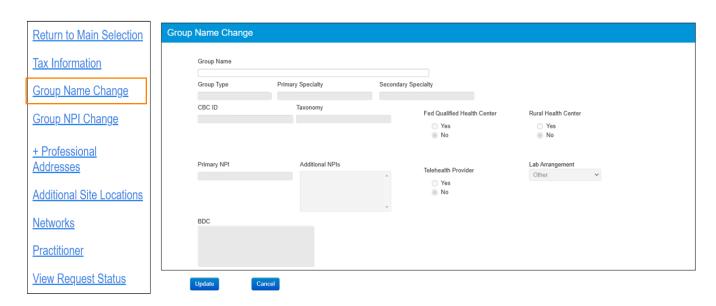


Tax Information displays the selected group tax information. The Tax Information screen is read-only. Any tax changes should be communicated through the group's provider engagement consultant. If you are unsure which provider engagement consultant is assigned to your practice, please visit Provider Engagement Consultant look up tool (CapitalBlueCross.com) and enter your NPI or Tax ID to identify your designated point of contact at Capital Blue Cross.



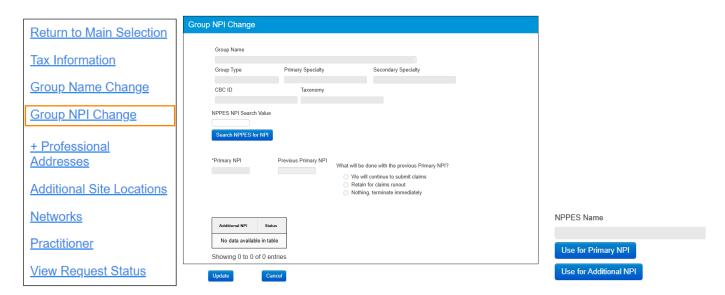
The Group Info screen displays high-level group information and is read-only. Any changes will need to be communicated through the group's Provider Engagement Consultant.

Group name change



Once the group is selected, click *Group Name Change* located on the left-hand toolbar. Enter the updated DBA name under group name. Click *Update* to submit the change. Click *Cancel* to return to the main screen without submitting any updates.

Group NPI change



Once the group is selected, click *Group NPI Change* located on the left-hand toolbar. To change the NPI, enter the new NPI and click *Search NPPES for NPI*. When search is completed, it will present the NPPES Name and additional options for the newly entered NPI.

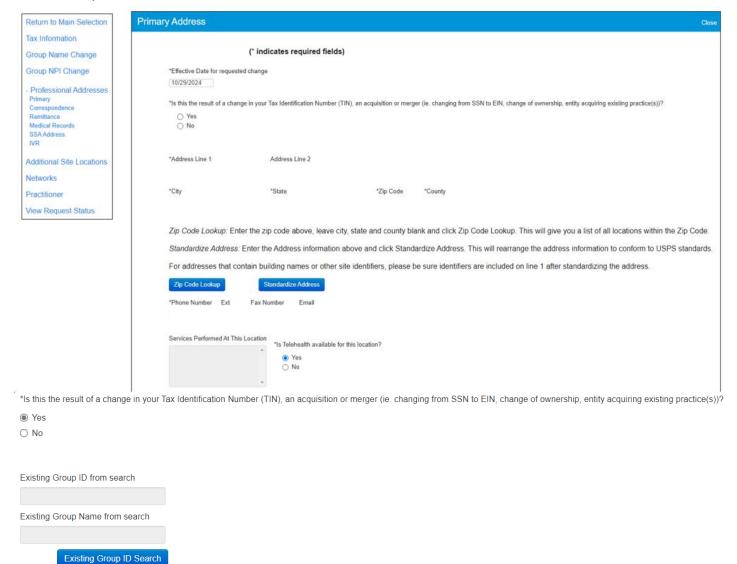
If the NPI is found on NPPES, the NPPES name is returned. The provider can then decide to use the new NPI as the Primary NPI or as an Additional NPI (ANPI).

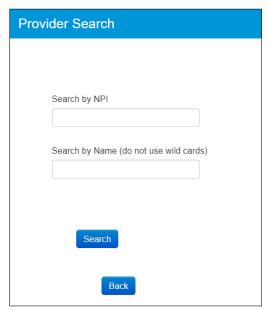
If primary is selected, choose one of the three options instructing how we are to handle the previous primary NPI that was on the group. For we will continue to submit claims selection, the NPI would be retained as an Additional NPI (ANPI). Retain for claims runout would add previous NPI as a Historical NPI (HNPI). Nothing, terminate immediately will delete the NPI from the record. The user can also make changes to their ANPIs by changing the current ANPI status.

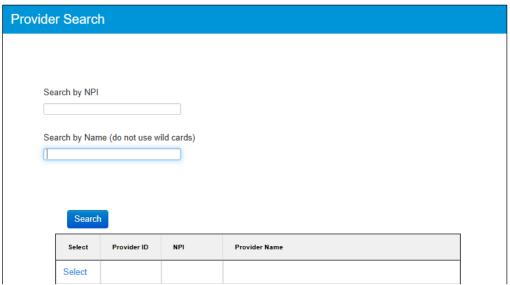
Click update to submit the change. *Cancel* will return to the main screen without submitting any updates. If a new NPI was entered, the value will need to be deleted, and a selection will need to be entered prior to being able to click *Cancel*.

Primary address

Once the group is selected click the + button beside Professional Addresses to view all the address options available. Selecting *Primary* will display the current active primary address information. The primary address can be updated but not terminated. Effective date for requested change defaults to the current date but is updatable.



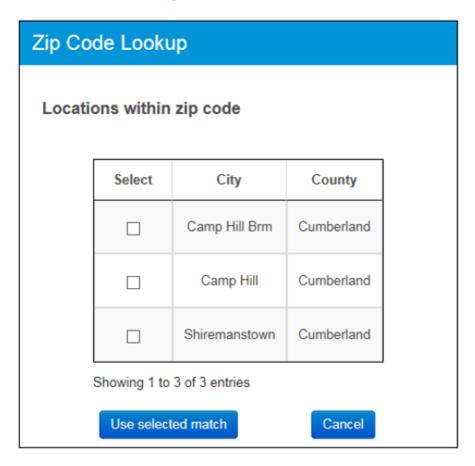




A response to the following question is required when making changes to the primary address. Is this the result of a change in your Tax Identification Number (TIN), an acquisition or merger (i.e., change from SNN to EIN, change of ownership, entity acquiring existing practice(s))? If the answer is yes, click the *Existing Group ID* search button. Search by NPI or search by name, then select *Search*, which will return provider results. If the provider is in the search results, click *Select*. If the update is not connected to an acquisition or merger, answer no.

Users are encouraged to use the ZIP Code lookup option for address changes, which will help determine city and county based upon the ZIP Code entered. Standardize address option is required on all address changes.

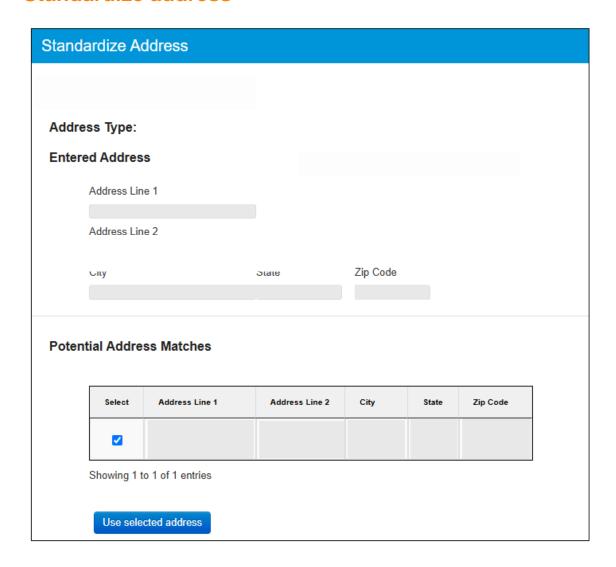
ZIP Code lookup



To perform a ZIP Code Lookup, address line 1 and the ZIP Code must be entered on the main screen. After *Zip Code Lookup* is clicked, this box is displayed. Select which city and county are correct by clicking *Select* next to the appropriate row. Click *Use selected match* to return to the address screen. Click *Cancel* to close the box, discard any selections, and return to the address screen.

Note: ZIP Code Lookup is available on each of the address screens.

Standardize address



Address standardization will align the entered address with USPS standards. If multiple addresses are found, multiple rows will appear. Select the desired address and click *Use selected address*. The Standardize Address box is closed, and the Primary Address screen is displayed.

Primary address continued

Services Performed At This Location	*Is Telehealth available for this location • Yes • No	n?
Handicapped Accessible? Print In D Yes No Yes N Third Party Authority - if the TP		ast Name/Company field
First Name	Last Name / Company	Middle Initial
Title		
Phone	Phone Ext	Fax
Web address		

Existing services will be displayed; however, they cannot be added to or removed from the group at this time. *Is Telehealth available for this location* requires a response when initiating changes to the address. Handicap indicators and Third-party authority information can be updated. Print in directory indicators cannot be changed at the group level and are driven by practitioner level selections.

Hours of	Operation (0:00)	Clear office hours	Clone office hours
Sunday	V		
Monday			
Tuesday		V	
Wednesday			
Thursday		V	
Friday		V	V
Saturday	V	V	

Office hours can be entered day by day or by entering one day's hours on Sunday hours, then click *Clone office hours* if the hours apply to all days. Click *Clear office hours* to delete all hours.

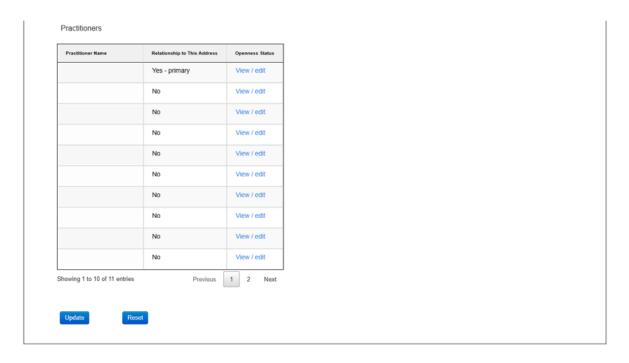
Network Description	Effective Date	Termination Date	Description
CHIP HMO Network	07-01-2012		Open to New Patients
KHP Commercial HMO Network	07-01-2012		Open to New Patients
Medicare Advantage PPO Network	07-01-2012		Open to New Patients
CareConnect Network	10-01-2013		Open to New Patients
POS Network	07-01-2012		Open to New Patients
PPO Network	07-01-2012		Open to New Patients
Medicare Advantage HMO Network	07-01-2012		Open to New Patients
Traditional/Indemnity Network	07-01-2012		Open to New Patients

Showing 1 to 8 of 8 entries

Previous 1

Next

Group Level Open Status is displayed by product and is informational only. Group Level Open Status is a rollup of the combined Practitioner Level Open Status.



A list of active practitioners is displayed along with their relationship to the address. If the practitioner carries the address, Yes will be displayed. No indicates the provider is not servicing members at the address. Yes - primary indicates the address is the practitioner's primary address. To change the practitioner's address relationship, directory indicator, or openness status, click View/edit beside the practitioner's name. If no changes are being made to the practitioner, Update will submit address changes and must be clicked for all group level and practitioner level changes. Click Reset to return the screen to its original state.

Practitioner openness status

Practitioner Openness Status
Currently affiliated with this address? Yes - primary
Select an action
 No address affiliation change Remove from this address Make Primary - retain existing primary address Make Primary - terminate existing primary address Add to this address
Print in Directory?
Yes
○ No

The Practitioner Openness Status screen allows the user to change the practitioner's address relationship, address directory indicator, and openness status by product.

Address relationship:

- No address affiliation change: The relationship to the address remains as is.
- Remove from this address: Practitioner is not seeing patients at this address, therefore, should no longer be affiliated. If this is the practitioner's primary address, a new primary address must be selected prior to removing.
- Make Primary retain existing primary address: This address will be marked as the new primary and the existing primary address will be added as an alternate address.
- **Make Primary terminate existing primary address:** This address will be marked as the new primary and the existing primary address will be terminated.
- Add to this address: Adds this address as an additional site to the practitioner.

Activity to any of these options is evaluated once the request is submitted, allowing for possible group level changes. Example: if all practitioners are currently not printing in the directory, the group is currently not printing in the directory. A change is made to one practitioner, making that practitioner display in the directory, which then will change the group's directory indicator to print in the directory.

Network Description	Effective Date	Termination Date	Action
			Open to New Patients
	06-15-2020		Accepts Existing Patients
			Closed

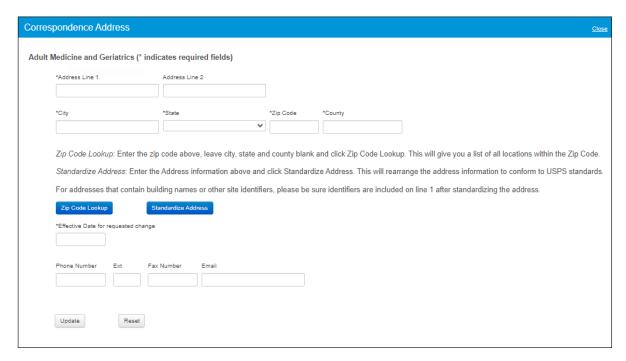
Each product a practitioner participates with is displayed along with the network effective date, termination date, and product openness. The user can change openness status for one or all products. Changes are evaluated upon submission, which may change the group's network product openness status.

Click *Apply* to submit the practitioner change. However, to submit the full change, click *Update* on the group's primary address screen. If *Update* is not clicked at group level, neither group level changes nor practitioner level changes will be submitted. Click *Cancel* to discard changes and return to the group's primary address screen.

Correspondence address

This address is used for mailings to the provider (letters, not checks).

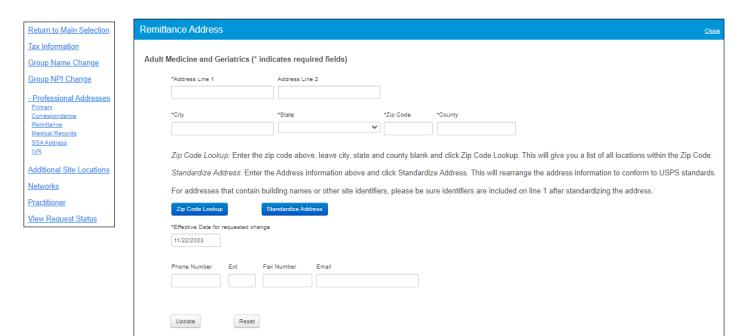




Currently active correspondence address information is displayed. The correspondence address can be updated but not terminated, or a new address can be added if one does not exist. Users are encouraged to use the ZIP Code Lookup option. Standardize Address option is required on all address changes. Click *Update* to submit the request or *Reset* to return the screen to its original state and discard any updates.

Remittance address

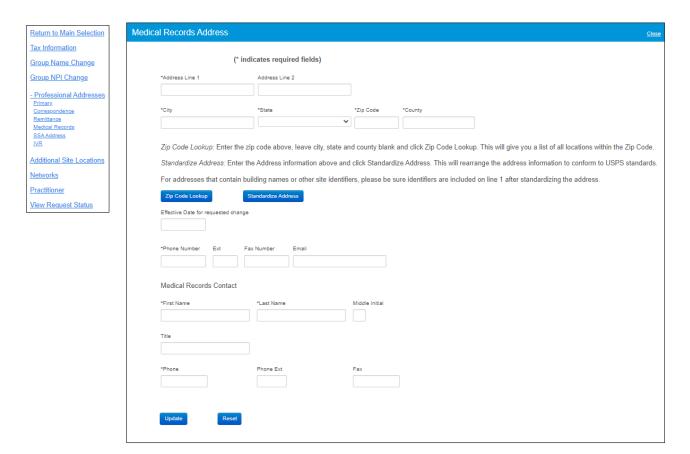
This is used when information needs to be mailed to provider regarding payments or tax documents.



Currently active remittance address information is displayed. The remittance address can be updated but not terminated, or a new address can be added if one does not exist. Users are encouraged to use the ZIP Code Lookup option. Standardize address option is required on all address changes. Click *Update* to submit the request or *Reset* to return the screen to its original state and discard any updates.

Medical records address

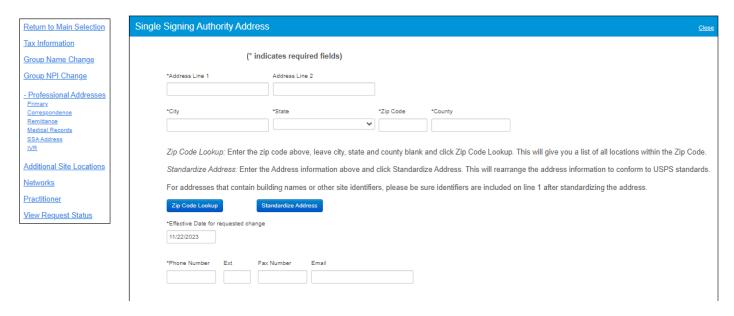
This address is for the location and contact names of where medical records are stored.



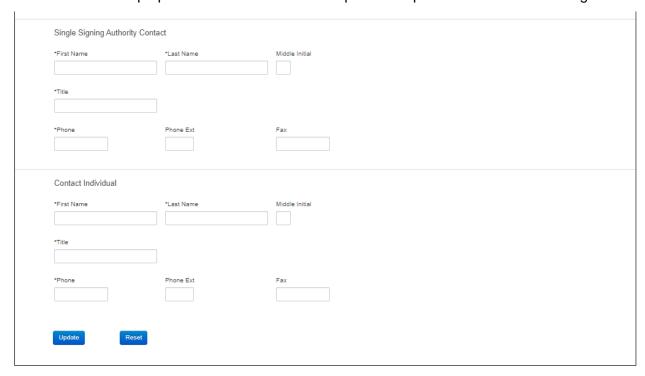
Currently active medical records address information is displayed. The medical records address can be updated but not terminated, or a new address can be added if one does not exist. Users are encouraged to use the ZIP Code Lookup option. Standardize address option is required on all address changes. Click *Update* to submit the request or *Reset* to return the screen to its original state and discard any updates

Single Signing Authority (SSA) address

This address is used when sending information related to contract/agreement.



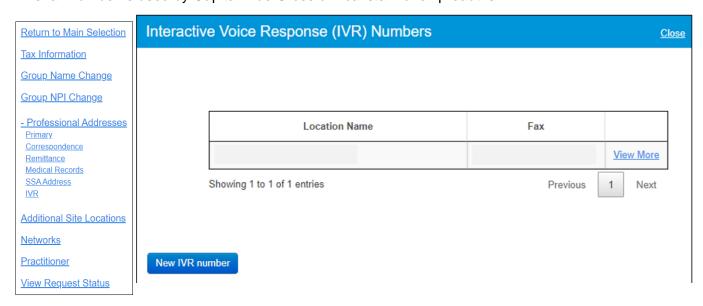
Currently active SSA address information is displayed. The SSA address can be updated but not terminated. *Effective Date for requested change* defaults to the current date but is updatable. Users are encouraged to use the ZIP Code Lookup option. Standardize address option is required on all address changes.



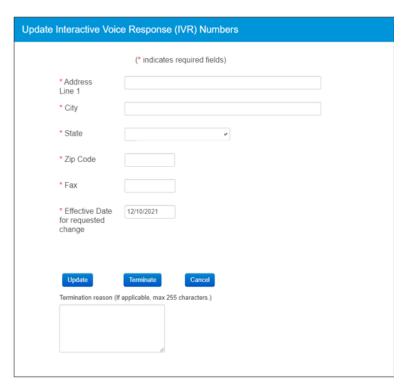
Currently active SSA and contact information is displayed. Changes can be made with all asterisk marked fields being required. Click *Update* to submit the request or *Reset* to discard any changes.

Interactive voice response (IVR) numbers

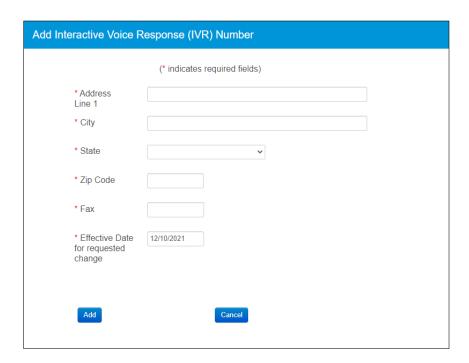
This fax number is used by Capital Blue Cross clinical staff for all preauths.



Currently active IVR information is displayed. Changes can be made by clicking *View More* located beside *existing IVR*.



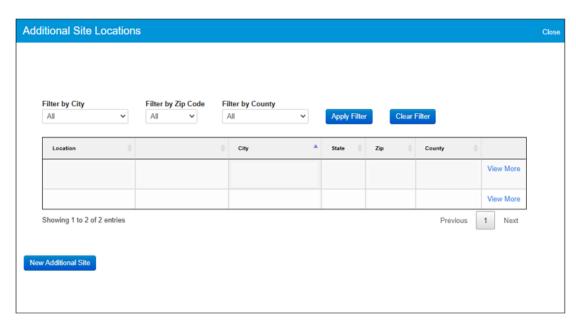
Changes can be made with all asterisk marked fields being required. Click *Update* to submit the request, *Terminate* to term the existing record, or *Cancel* to exit the screen and discard changes.



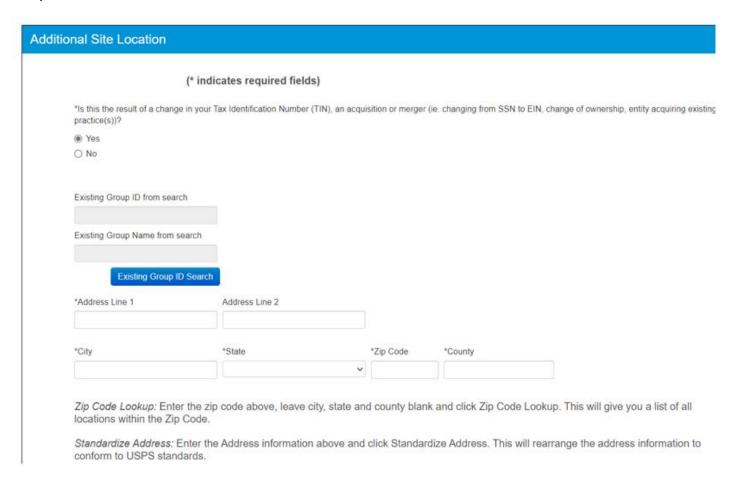
New IVRs can be added with all asterisk marked fields being required. Click *Add* to submit the request or *Cancel* to exit the screen and discard changes.

Additional site locations

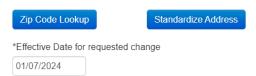




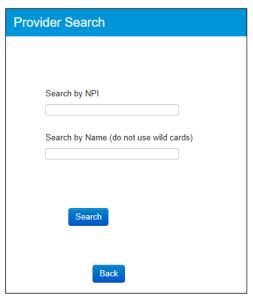
Additional site locations are displayed and can be filtered by city, ZIP Code, or county. Once the desired address is found, click *View More* located beside the desired address to display the full address, where it can be updated or terminated. Click *New Additional Site* to enter new site address information.

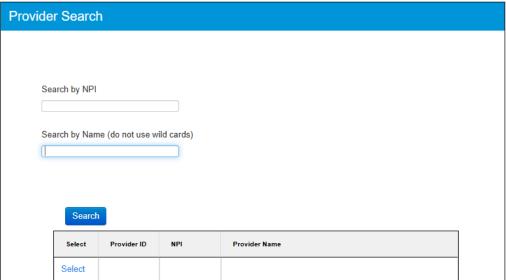


For addresses that contain building names or other site identifiers, please be sure identifiers are included on line 1 after standardizing the address.



Currently active additional site address information is displayed. Effective date for requested change defaults to the current date but is updatable.





A response to the following question is required when making changes to the existing alternate address or adding a new alternate location: is this the result of a change in your Tax Identification Number (TIN), an acquisition or merger (i.e., changing from SSN to EIN, change of ownership, entity acquiring existing practice(s))? If the answer is yes, click the *Existing Group ID* search button. Search by NPI or Search by name, then select *Search*, which will return provider results. If the provider is in the search results, click *Select*. If the update is not connected to an acquisition or merger, answer no.

*Phone Number Ext	Fax Number	Email	
Web address			
*Is Telehealth available fo	r this location?		
O Yes			
○ No			
Handicapped Accessible?	Print In Directory?		
Yes No	Yes No		
163 110	163 140		
Hours of O	peration (0:00)	Clear office hours	Clone office hours
Sunday	v	•	•
Monday	~	•	· .
Tuesday	•		~
Wednesday	•		~
Thursday	•		~
Friday	•		~

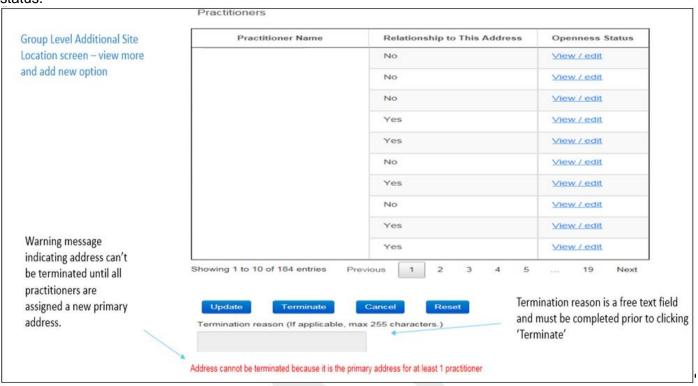
A response to the following questions is required when making changes to an address: Is Telehealth available for this location?, Handicapped Accessible?

At the Group Level Additional Site Location screen, Handicap indicators can be updated but print in directory indicators cannot. Print in Directory indicators are a rollup of all practitioner directory indicators.

Office hours hour required for service locations and can be entered day by day or after entering one day's hours, click *Clone Office Hours* to copy the same hours to all days. Click *Clear Office Hours* to delete all hours.

Group Level Additional Site Location screen – view more	Office Status			
and add new option	Network Description	Effective Date	Termination Date	Description
	CHIP HMO Network	07-01-2012		Open to New Patients
	KHP Commercial HMO Network	07-01-2012		Open to New Patients
	Medicare Advantage HMO Network	07-01-2012		Open to New Patients
	Medicare Advantage PPO Network	07-01-2012		Open to New Patients
	POS Network	07-01-2012		Open to New Patients
	PPO Network	07-01-2012		Open to New Patients
	Traditional/Indemnity Network	07-01-2012		Open to New Patients

Group level open status is displayed by product and is informational only. Group level open status is a rollup of the combined practitioner level open status and can be changed by updating individual practitioners' openness status.



A list of active practitioners is displayed along with their relationship to the address. If the practitioner carries the address, Yes will be displayed. *No* indicates the provider is not serving members at the address and Yes - *primary* indicates the address is the practitioner's primary address.

To change the practitioner's address relationship, directory indicator, or openness status, click *View/edit*. If no changes are being made to the practitioner, click *Update* to submit address changes. Click *Terminate* to terminate the address and provide the required termination reason. Click *Cancel* to return to the main Additional Site Location selection screen or *Reset* to return the screen to its original state. If at least one

practitioner has an address that is primary, a warning message is displayed, and that location cannot be terminated. A new primary site will need to be selected for the practitioner(s) before terminating the address.

ractitioner Openness Status			
Currently affiliated with this address Select an action No address affiliation change Remove from this address Make Primary - retain existing primary Make Primary - terminate existing primary Add to this address Print in Directory? Yes No	y address		
Network Description	Effective Date	Termination Date	Action
			Open to New Patients

The Practitioner Openness Status screen allows the user to change the practitioner's address relationship, address directory indicator, and openness status by product.

Address relationship:

- No address affiliation change: The relationship to the address remains as is.
- Remove from this address: Practitioner is not seeing patients at this address therefor should no longer be affiliated. If this is the practitioner's primary address a new primary address must be selected prior to removing.
- Make Primary retain existing primary address: This address will be marked as the new primary and the existing primary address will be added as an alternate address.
- Make Primary terminate existing primary address: This address will be marked as the new primary and the existing primary address will be terminated.
- Add to this address: Adds this address as an additional site to the practitioner.

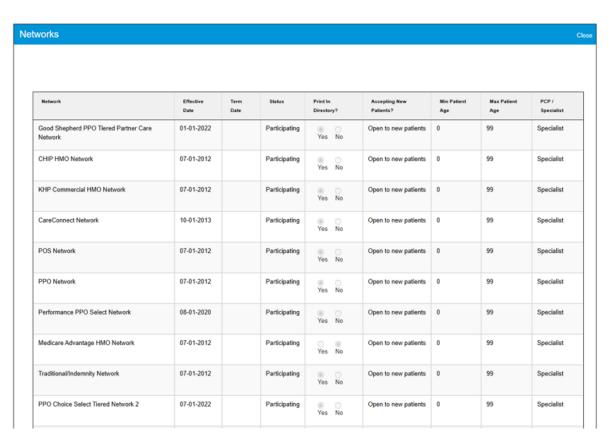
Activity to any of these options is evaluated once the request is submitted, allowing for possible group level changes. Example: if all practitioners are currently not printing in the directory, the group is currently not printing in the directory. A change is made to one practitioner, making that practitioner display in the directory, which then will change the group's directory indicator to print in the directory.

Each product a practitioner participates with is displayed along with the network effective date, termination date, and product openness. The user can change openness status for one or all products. Changes are evaluated upon submission and may change the group's network product openness status.

Clicking *Apply* submits the practitioner change; however, to submit the full change you must also click *Update* on the Group Level Additional Site Address screen. If *Update* is not clicked at group level, neither group level changes nor practitioner level changes will be submitted. Click *Cancel* to discard changes and return to the Group Additional Site Location screen.

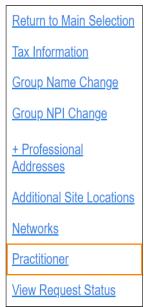
Networks

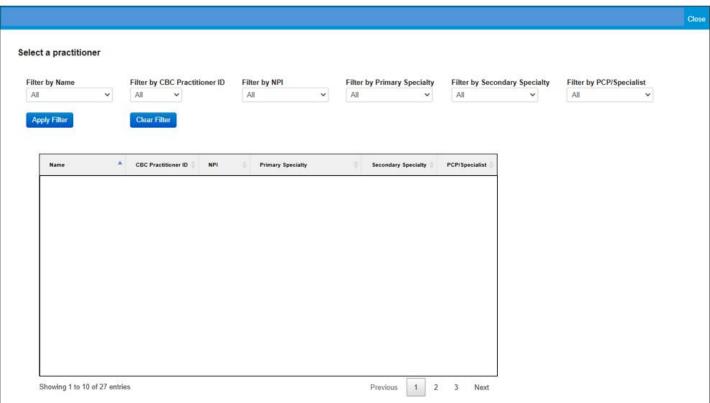




Network participation, Effective Date, Print in Directory, Accepting New Patients, Min/Max patient age ranges, and PCP/Specialist status by product is displayed. Changes cannot be made from this screen and is informational only.

Practitioner

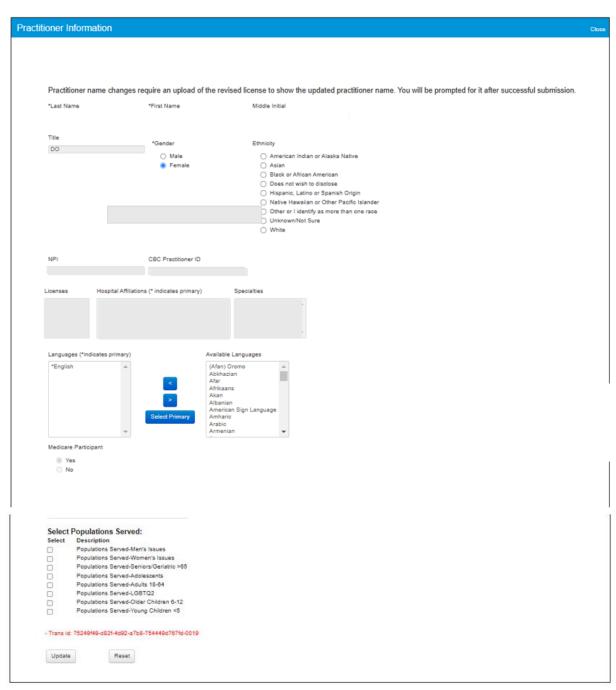




When *Practitioner* is clicked, all active group practitioners are displayed. A practitioner can be selected by clicking on the practitioner's name. Practitioners can also be found by filtering the list by Name, Capital Blue Cross Practitioner ID, NPI, Primary or Secondary Specialty, or by type (PCP vs. Specialist). Click *Back to selection* to return to the main group selection menu.

Practitioner information

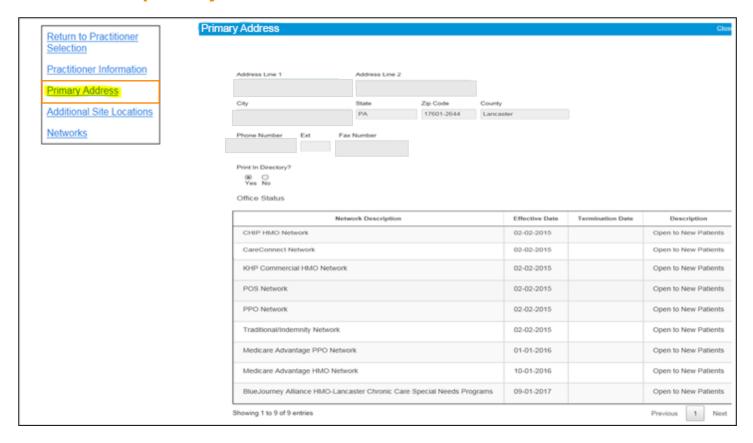




Practitioner Information displays current practitioner data. Updates are available for practitioner's name, gender, ethnicity, languages and populations served only. Title, NPI, CBC Practitioner ID, licenses, hospital affiliations and specialties are informational only.

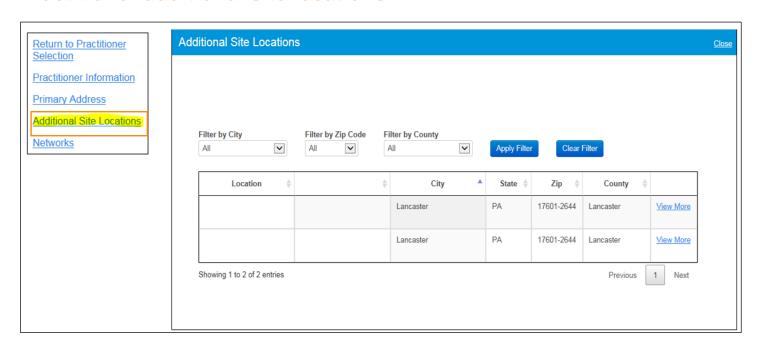
To add or remove a language, highlight a language from the Languages box or Available Languages box and use the center arrows to make changes. The primary language can be changed by highlighting a language in the Languages box and clicking *Select Primary*. Ethnicity and populations served are available to be updated but is not required information. Click *Update* to submit the request and return to the main practitioner selection menu or *Reset* to discard any changes.

Practitioner primary address

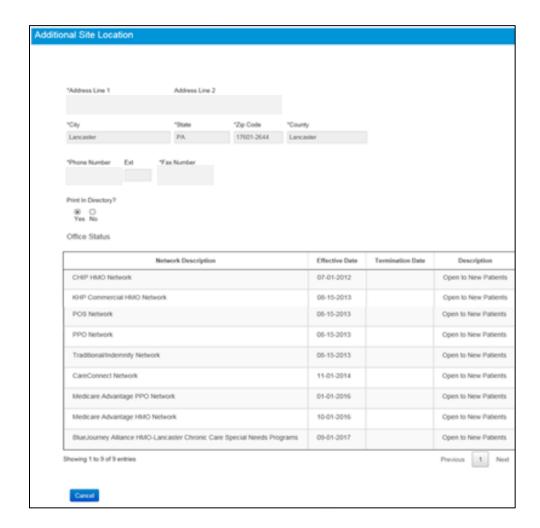


Address, directory indicators, product participation, and openness status is displayed and is informational only. Practitioner primary address changes can be made by accessing the address from the Group Level Primary or Alternate Address menu options.

Practitioner additional site locations



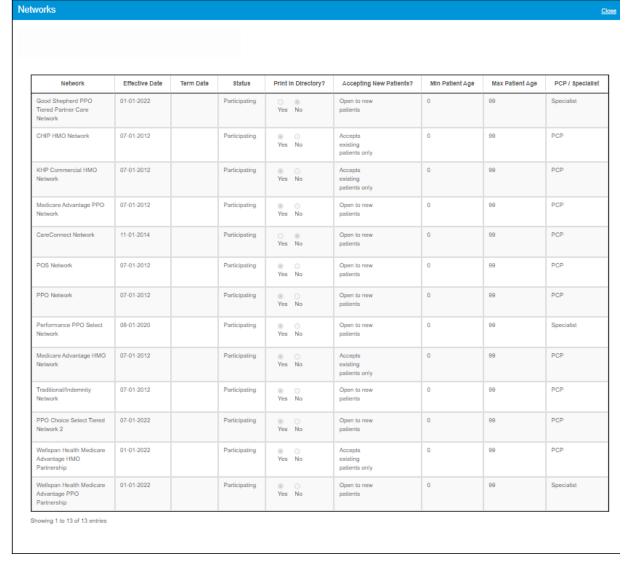
Additional site locations are displayed and can be filtered by city, ZIP Code, or county. Once the desired address is found, click *View More* to display the full address. From the Practitioner Selection menu, additional site locations are informational only. If changes are needed, the address must be accessed from the Group Level Primary Address or Additional Site Location menu options.



Address, directory indicators, product participation, and openness status are displayed and are informational only.

Pracititioner networks





Network participation is displayed and is informational only.

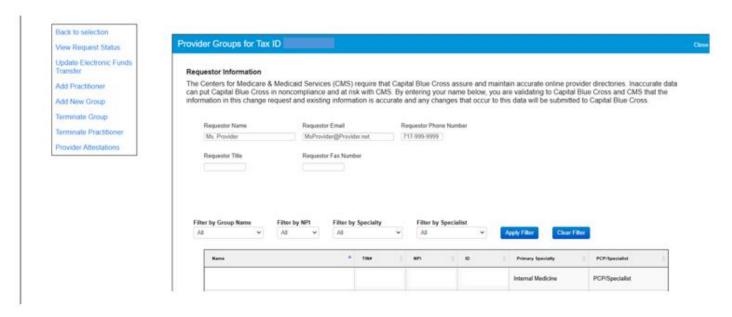
View request status



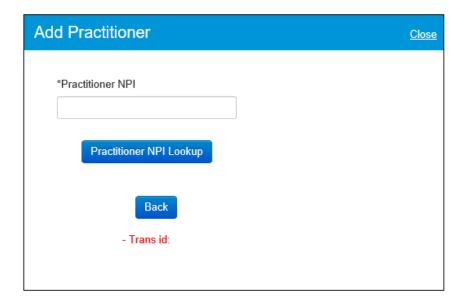


At any time, all submitted requests can be viewed. The View Request Status screen shows who submitted the request, the date submitted, a brief description of the request, and the status. The tracking ID is helpful if questions arise around the request. The user receives email notifications when a change is submitted, when a change is completed, or if the request is canceled. If the change is canceled, an email is received and will include a description of why the request was canceled. All emails include a brief description of the change request including the provider's name and the change effective date.

Add a new or existing practitioner to an existing group

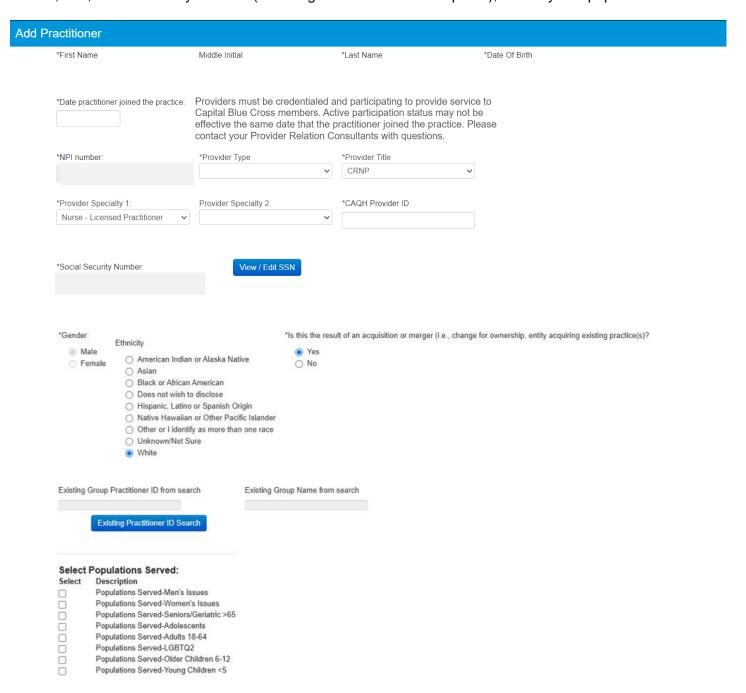


After entering the requester's name, email address, and phone number, click *Add Practitioner* located on the left hand toolbar.



Enter practitioner's NPI and click Practitioner NPI Lookup. This lookup uses NPPES to validate the NPI listed. .

Complete all mandatory (*) fields. If the practitioner is already in our system name existing information will be displayed NPI and gender are read only. The following information can be updated for existing providers: date of birth, NPI, Social Security Number (selecting *View / Edit SSN* to update), ethnicity and populations served.







New Licenses



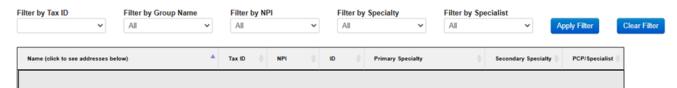
Languages



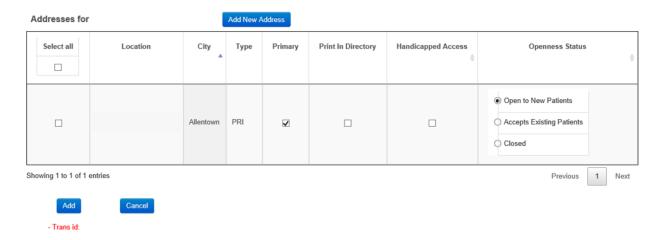
Hospital Affiliations (* indicates primary)



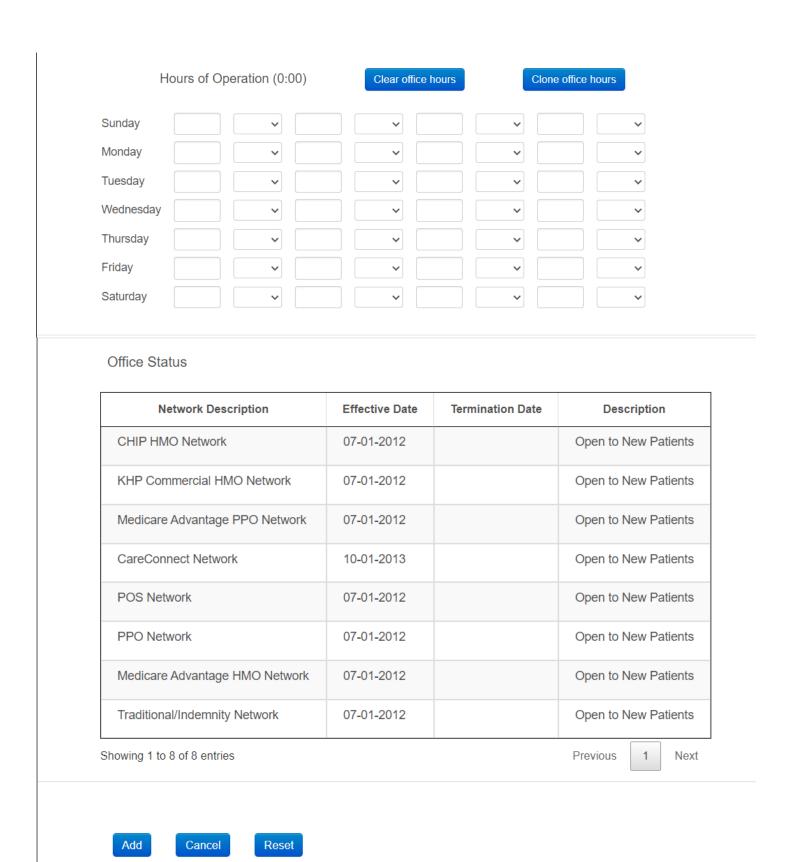
Groups



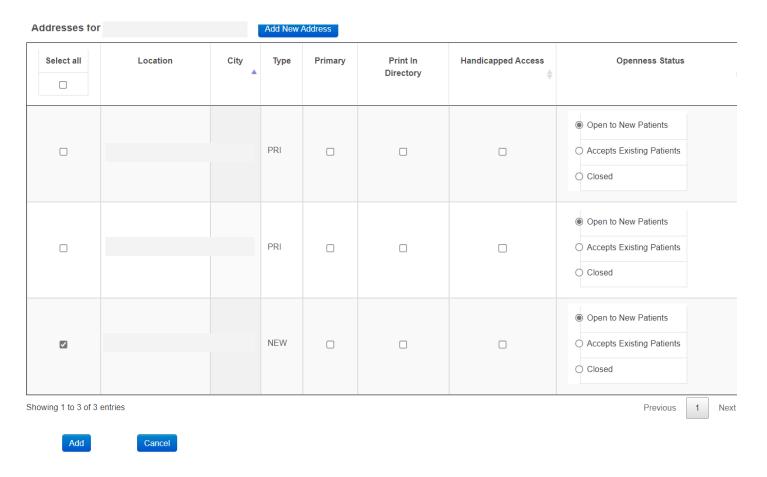
Click on the group the practitioner is being added. If there are multiple practice sites, one or all the sites may be chosen, but one must be chosen as the practitioner's primary site. Practitioner is only able to print in four locations at the group. If the practitioner is being linked to a new location on the group, click *Add New Address* and complete the mandatory information. When completed, click *Add*.



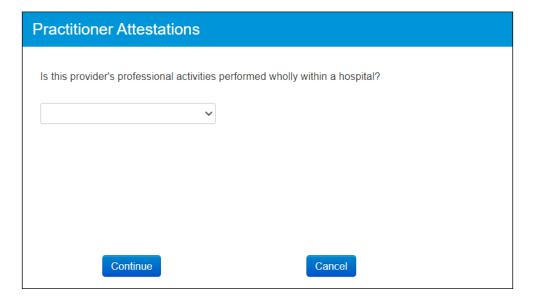
New Additional Site Location for Practitioner Adult Medicine and Geriatrics (* indicates required fields) *Address Line 1 Address Line 2 *City *State *County *Zip Code Zip Code Lookup: Enter the zip code above, leave city, state and county blank and click Zip Code Lookup. This will give you a list of all locations within the Zip Code. Standardize Address: Enter the Address information above and click Standardize Address. This will rearrange the address information to conform to USPS standards. For addresses that contain building names or other site identifiers, please be sure identifiers are included on line 1 after standardizing the address. Zip Code Lookup Standardize Address *Phone Number Ext Fax Number Email Web address *Is Telehealth available for this location? O Yes O No Handicapped Accessible? Print In Directory? Yes No Yes No



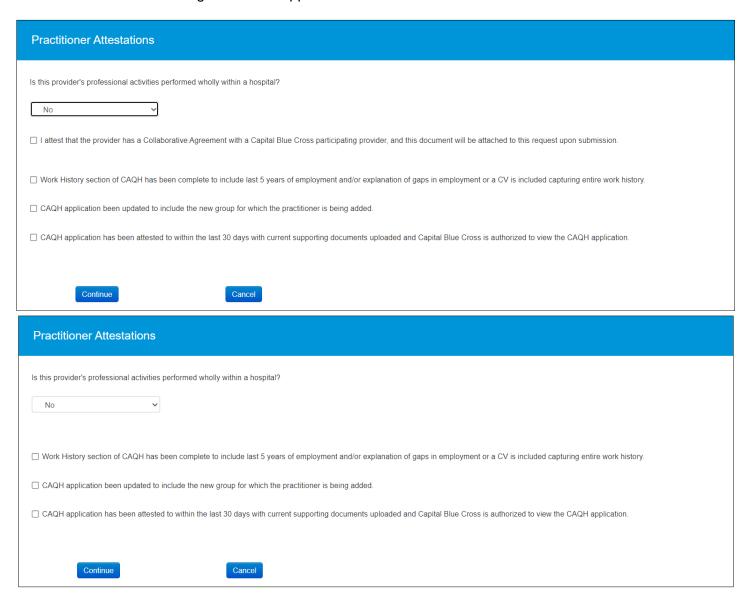
When Add is clicked, a second screen will appear where the information entered may be reviewed.



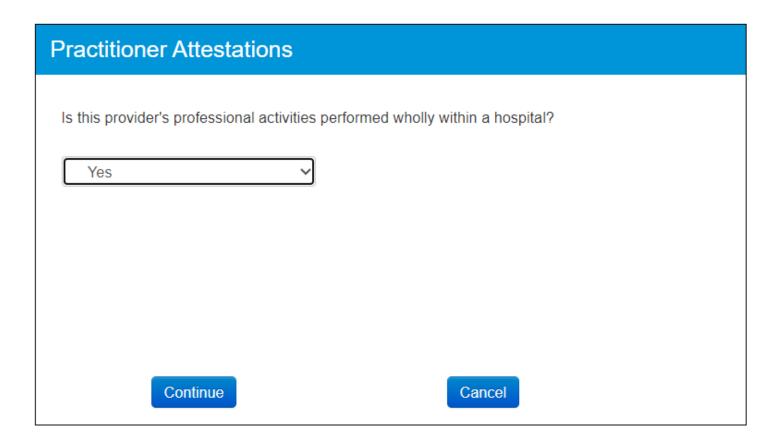
When all information has been verified, click *Add*, the Practitioner Attestations screen will appear, use the drop down to select yes or no, then select continue.



If No is selected the following screen will appear.

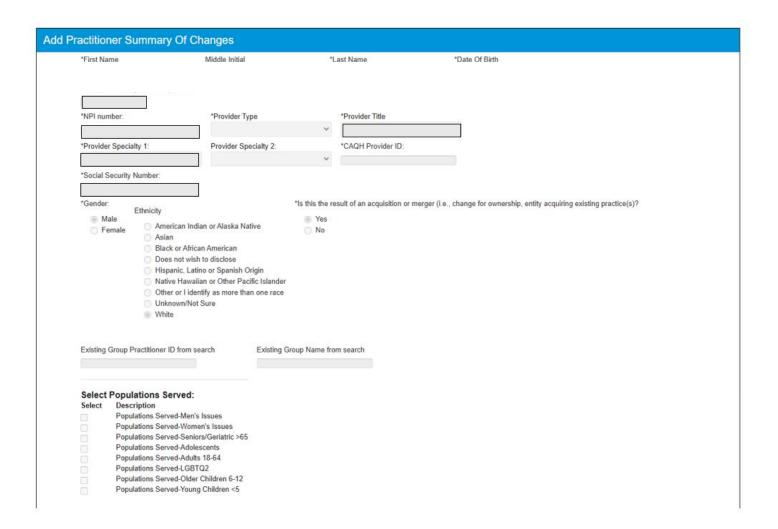


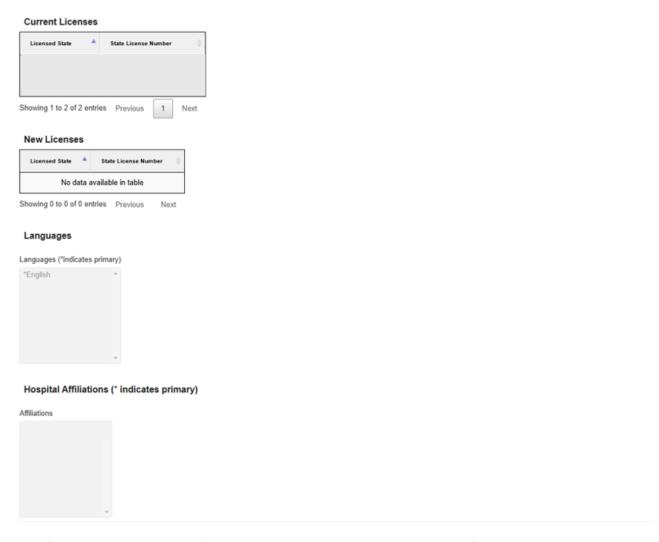
Depending on the provider type, will determine which screen will be displayed. After completing this screen, click *Continue*. Clicking *Cancel* will take you back to the previous page discarding the information on the Attestation page. The Add Practitioner Summary of Changes screen will appear, at the bottom of the screen select *Process Update* to process or *Return* to return to the previous page.



If Yes is selected, click *Continue*. Clicking *Cancel* will take you back to the previous page discarding the information on the Attestation page.

The Add Practitioner Summary of Changes screen will appear, at the bottom of the screen select *Process Update* to process or *Return* to return to the previous page.





When all information has been verified, click *Process Update* at the bottom of the page or *Return* to return to the previous page. If you click *Process Update* and errors are on the Add Practitioner screen it will take you back to the previous page allowing you to update any of the mandatory information.

Adding a new group

Important information before you begin this request:

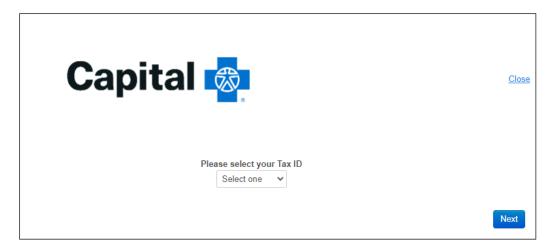
If you start the request and leave before finalizing, you may lose all the information that was entered. It is important that you have all the information available when starting the request.

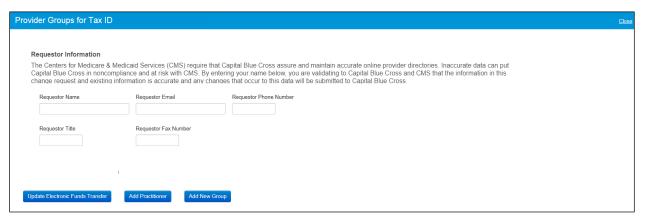
The following information is required when requesting a new group:

- W9.
- Third Party Authority information (if applicable).
- All new group information along with all practitioners' demographics that will be added to the group.
- EFT banking information.

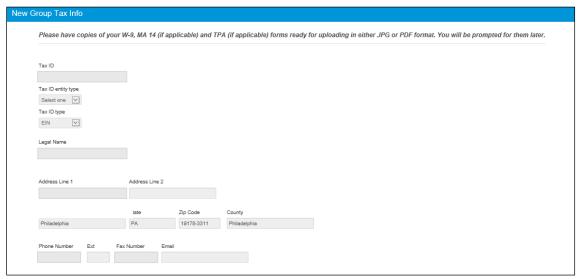
Select an existing tax ID or add a new tax ID, then click Next.

Read the disclaimer below and enter the requester's information, then click Add New Group.



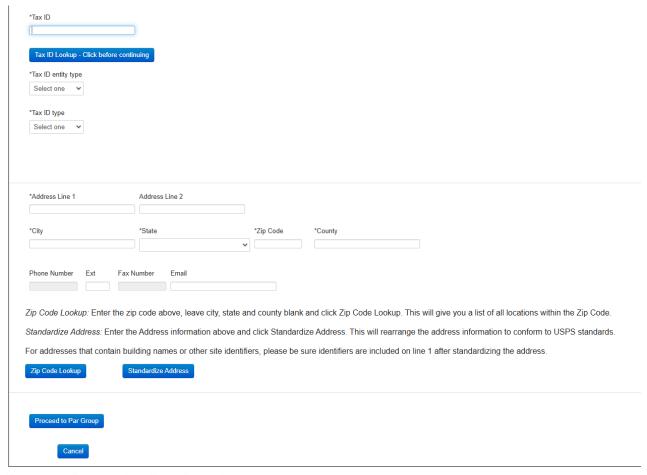


Tax ID information



If Tax ID was selected the Tax Info section will be read only.

Add new TIN selection.



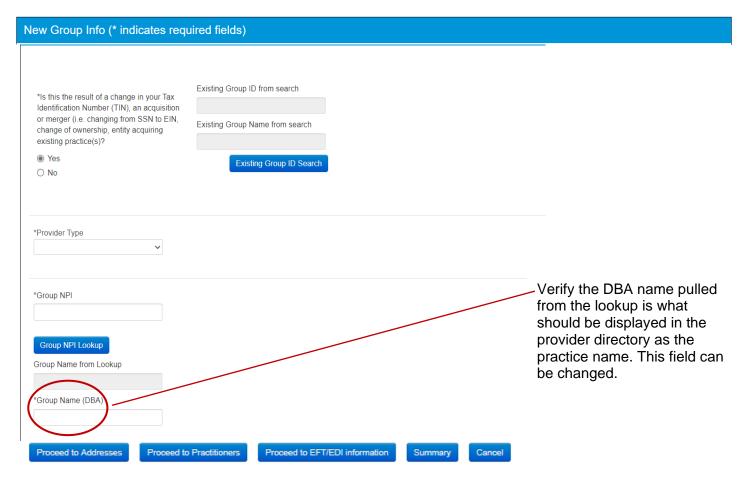
Enter tax ID and click Tax ID Lookup.

If information is available, the screen will be auto display and made read only.

If Tax ID entered is new all asterisked information will need to be completed before proceeding.

ZIP Code Lookup can be used to help determine city and county combination. Standardization is required for all addresses.

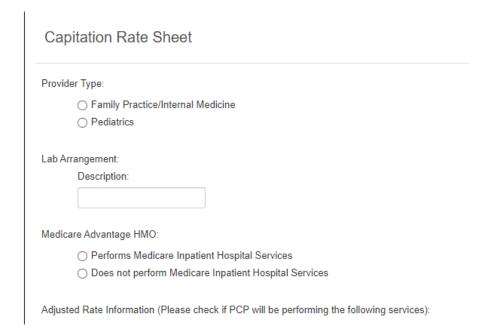
Proceed to Par Group will take you to the next stop, Cancel will return you to the Tax Selection screen.



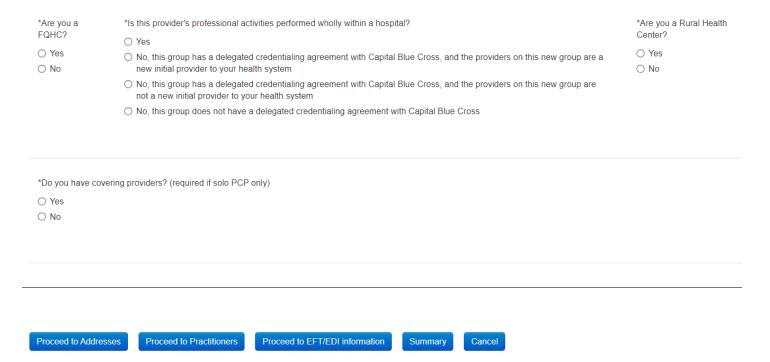
Provider Type Options: Primary Care Physician, Primary Care Physician/Specialist, Specialist, Urgent Care Center and Virtual Care Only.

Virtual Care providers groups are defined as provider groups offering services solely online without any onsite locations.

If the Provider Type is Primary Care Physician or Primary Care Physician/Specialist, additional information is required prior to proceeding.



Additional information is required prior to proceeding. FQHC designation, Rural Health Center designation and details on where the provider performs their services.

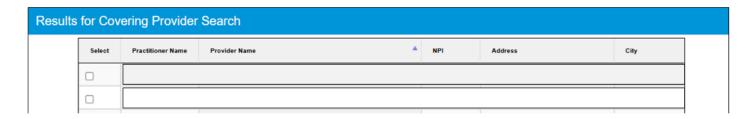


If the new group is a primary care physician or a primary care physician/specialist and only one provider is being added to the group, the request will require covering provider arrangements.

Covering provider arrangements



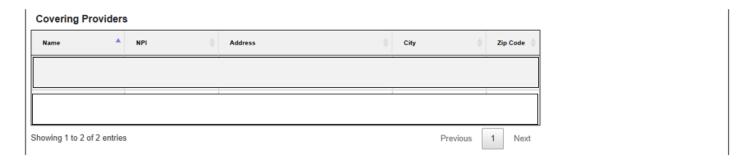
Searching functionality is available to locate the covering provider. Searching by NPI and name are available to locate a provider group or practitioner. Click *Search* once information is entered.



Search will take you to a results page. Locate the provider group or practitioner you are searching for and select. Selection can be one to many.



Once covering provider(s) is/are selected, click *Add Selected Covering Providers*. This will add the covering provider to the Covering Providers box displayed on the screen.



Once all the covering providers are selected and displayed in the Covering Providers box, click *Back* if display is correct. If wrong providers are selected, *Clear* selected covering providers can be used to remove those displayed in the Covering Providers box and will keep you on the results page.

Covering providers search can be used as many times as needed to gather all the necessary covering provider arrangements.

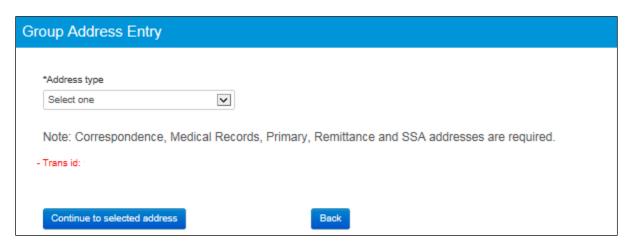
When the New Group information is completed, select *Proceed to Addresses* button at the bottom of the page.



Add addresses

Select the address type from the drop-down menu and click Continue to selected address.

Required addresses consist of correspondence, medical records, primary, remittance, and SSA addresses.

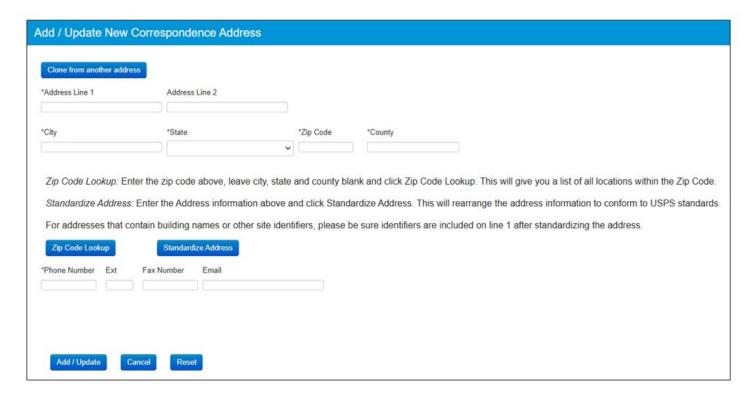


Select the address type in the drop down that is being completed and click *Continue* which will take you to the selected address entry screen.

Correspondence address

This address is used for mailings to the provider (letters, not checks).

In this section, enter the correspondence address for the new group. All required fields must be completed which is indicated by the asterisk on the page. You may use *Clone from another address* if additional addresses have already been provided and it is the same as this new correspondence address that is being entered. Users are encouraged to use the ZIP Code Lookup option if information is needed for the city and county combinations for the ZIP Code entered. Standardize address option is required on all addresses.

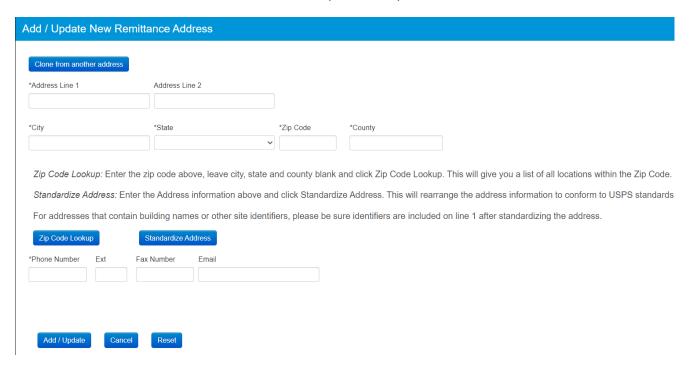


Once address is entered and standardization has been completed, click *Add/Update* to accept the correspondence address. *Cancel* will not retain information entered and will return to the previous Address Selection screen. *Reset* will clear the page and allow the user to re-enter the address information.

Remittance address

This is used when information needs to be mailed to provider regarding payments or tax documents.

In this section, enter the remittance address for the new group. All required fields must be completed which is indicated by the asterisk on the page. You may use *Clone from another address* if additional addresses have already been provided and it is the same as this new Remittance Address that is being entered. Users are encouraged to use the ZIP Code Lookup option if information is needed for the city and county combinations for the ZIP Code entered. Standardize address option is required on all addresses.

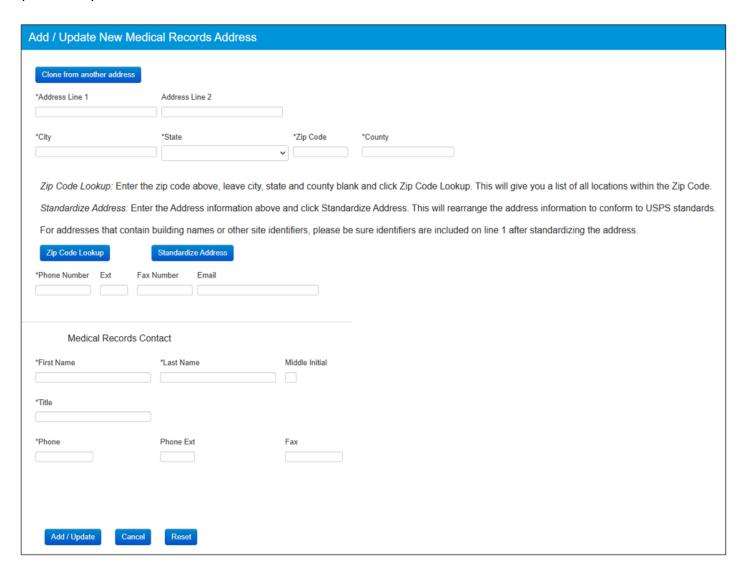


Once address is entered and standardization has been completed, click *Add/Update* to accept the remittance address. *Cancel* will not retain information entered and will return to the previous Address Selection screen. *Reset* will clear the page and allow the user to re-enter the address information.

Medical records address

This address is for the location and contact names of where medical records are stored.

In this section, enter the medical records address for the new group. All required fields must be completed which is indicated by the asterisk on the page. You may use *Clone from another address* if additional addresses have already been provided and it is the same as this new medical records address that is being entered. *Clone* will not contain previous contacts. Users are encouraged to use the ZIP Code Lookup option if information is needed for the city and county combinations for the ZIP Code entered. Standardize address option is required on all addresses.

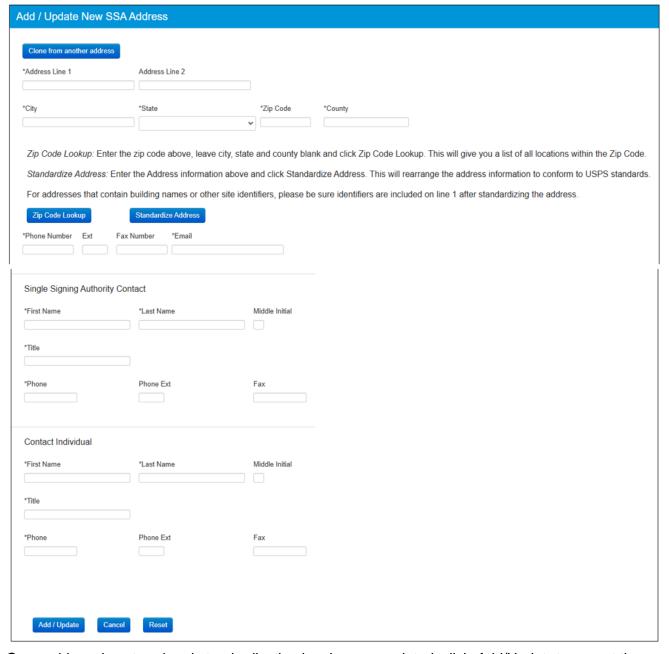


Once address is entered and standardization has been completed, click *Add/Update* to accept the medical records address. *Cancel* will not retain information entered and will return to the previous Address Selection screen. *Reset* will clear the page and allow the user to re-enter the address information.

Single Signing Authority (SSA) address

This address is used when sending information related to contract/agreement.

In this section, enter the Single Signing Authority (SSA) Address for the new group. All required fields must be completed which is indicated by the asterisk on the page. You may use *Clone from another address* if additional addresses have already been provided and it is the same as this new SSA Address that is being entered. Clone will not contain previous contacts. Users are encouraged to use the ZIP Code Lookup option if information is needed for the city and county combinations for the ZIP Code entered. Standardize address option is required on all addresses. Email address entered for this address is used for contractual related correspondence.

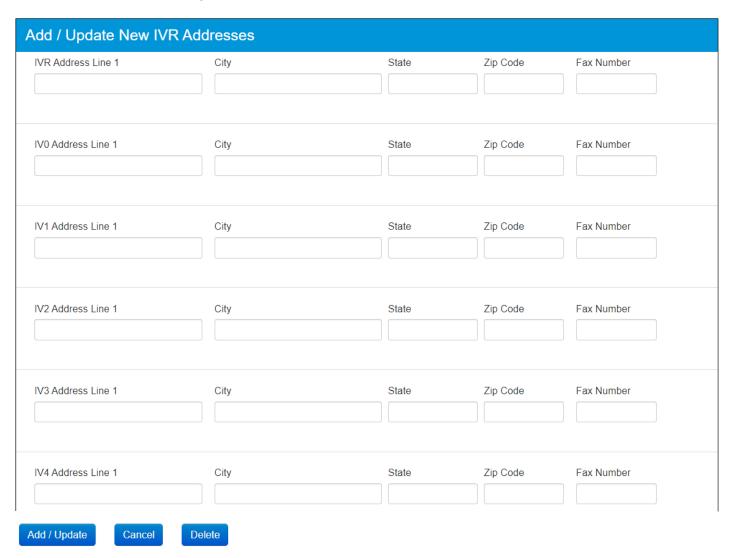


Once address is entered and standardization has been completed, click *Add/Update* to accept the medical records address. *Cancel* will not retain information entered and will return to the previous Address Selection screen. *Reset* will clear the page and allow the user to re-enter the address information.

Interactive voice response (IVR) numbers

This fax number is used by Capital Blue Cross clinical staff for all preauths.

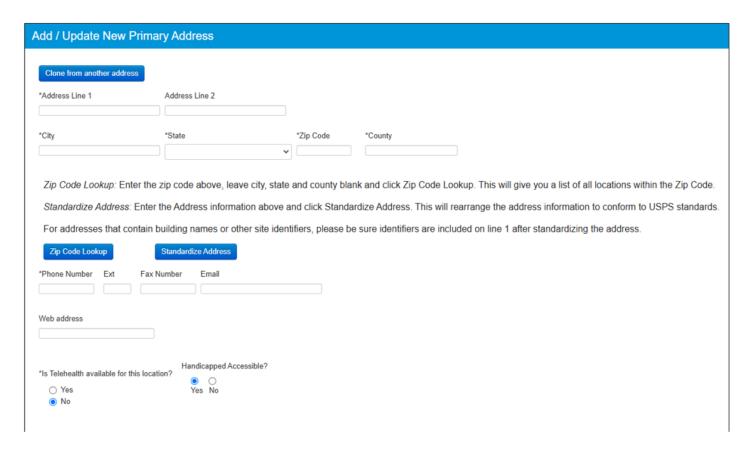
Address Line 1, City, State, ZIP Code, and Fax Number is required when entering an IVR record. One to many can be entered with the new group request.

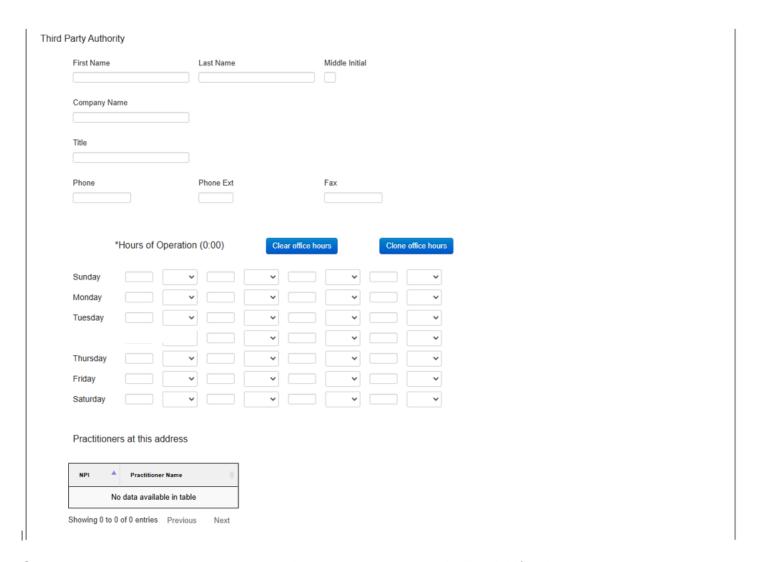


Once all data elements are entered, click *Add/Update* to accept the IVR record(s). *Cancel* will not retain information entered and will return to the previous Address Selection screen. *Delete* will clear the page and allow the user to re-enter the information.

Primary address

In this section, enter the primary address of the new group, handicapped accessibility, telehealth accessibility, web address, third party authority (if applicable) and office hours. All required fields must be completed which is indicated by the asterisk on the page. You may use *Clone from another address* if additional addresses have already been provided and it is the same as this new primary address. Users are encouraged to use the ZIP Code Lookup option if information is needed for the city and county combinations for the ZIP Code entered. Standardize address option is required on all addresses.



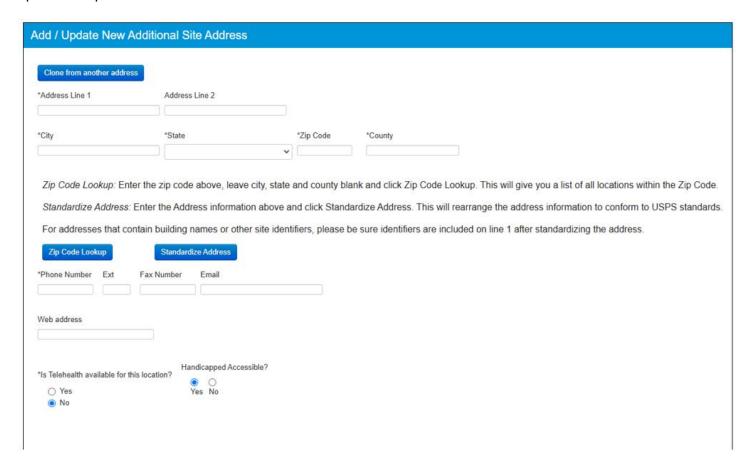


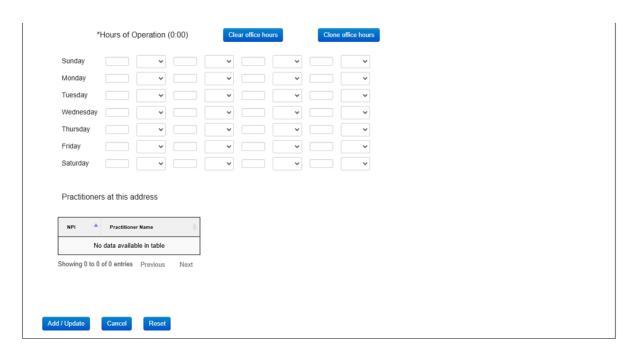
Once address is entered and standardization has been completed, click *Add/Update* to accept the primary address. *Cancel* will not retain information entered and will return to the previous Address Selection screen. *Reset* will clear the page and allow the user to re-enter the address information.

Additional site address

If the new group has more than one service location, select address option add additional site to enter all additional service locations.

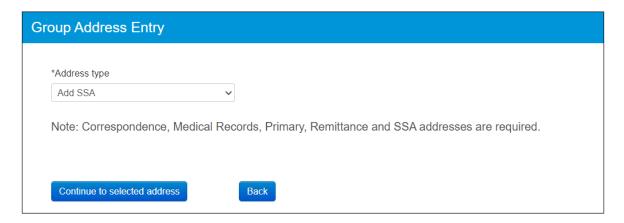
In this section, enter the additional site information for the new group. All required fields must be completed which is indicated by the asterisk on the page. Users are encouraged to use the ZIP Code Lookup option if information is needed for the City and County combinations for the ZIP Code entered. Standardize address option is required on all addresses.





Once address is entered and standardization has been completed, click *Add/Update* to accept the alternate address. *Cancel* will not retain information entered and will return to the previous address selection screen. *Reset* will clear the page and allow the user to re-enter the address information.

Once all addresses are complete, select the *Back* button on the Group Address Entry screen to continue.



If all required addresses have not been entered a message that indicates "in progress" will be displayed.



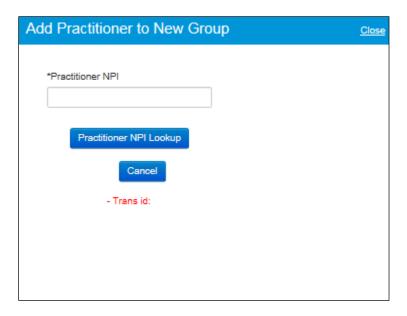
Note: When a task is completed, the word "Completed" is shown above the buttons at the bottom of the page.



Click Proceed to Practitioners at the bottom the page for the ability to add practitioners to the new group.

Add practitioners to new group

Enter the practitioner's NPI that will be added to the group and select *Practitioner NPI Lookup* to proceed. NPI Lookup will validate NPI entered against NPPES.



Practitioner information

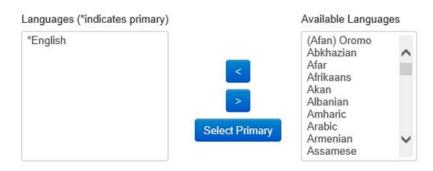
Add Practitioner to New Group

Complete all mandatory (*) fields. If the practitioner is already in our system name, NPI and gender will be read only. If any of this information is incorrect, the group the practitioner is linked to will need to update this information. If practitioner is already in our system the following information will be updatable: name, date of birth, Social Security Number (by selecting *View/Edit SNN* button), ethnicity and populations served. Depending on the provider title, will determine which questions will appear below the Social Security Number box. These questions are mandatory and must be completed to continue.

	*First Name	Middle Initial	*Last Name	*Date Of Birth	
	*Date practitioner joined the practice: *NPI number: *Provider Specialty 1: Nurse - Licensed Practitioner	Providers must be credentialed a Capital Blue Cross members. Act effective the same date that the p contact your Provider Relation Co	tive participation status may not boractitioner joined the practice. Pl	De Company of the Com	
	*Social Security Number:	View / Edit SSN			
	☐ I attest that the provider has a Colla	borative Agreement with a Capital Blue Cr	ross participating provider, and this docu	ment will be attached to this request upon submission.	
	☐ Work History section of CAQH has t	peen complete to include last 5 years of er	mployment and/or explanation of gaps in	employment or a CV is included capturing entire work history.	
	☐ CAQH application been updated to	include the new group for which the practi	tioner is being added.		
	CAQH application has been attested	d to within the last 30 days with current su	pporting documents uploaded and Capit	al Blue Cross is authorized to view the CAQH application.	
Add P	ractitioner to New Group				Close
	*First Name	Middle Initial	*Last Name	*Date Of Birth	
	*Date practitioner joined the practi	Capital Blue Cross memb effective the same date th	tialed and participating to pro ers. Active participation status at the practitioner joined the ation Consultants with question	s may not be practice. Please	
	*NPI number:	*Provider Type	*Provider Title		
			∨ MD	~	
	*Provider Specialty 1:	Provider Specialty 2:	*CAQH Provider ID:		
	Family Practice	~	•		
	*Social Security Number:	View / Edit SSN			
	☐ Work History section of CAQH	has been complete to include last 5 y	ears of employment and/or explanat	ion of gaps in employment or a CV is included capturing entire work history.	
		has been complete to include last 5 y		tion of gaps in employment or a CV is included capturing entire work history.	

*Gender:	The latest and the la
Male Female	Ethnicity American Indian or Alaska Native Asian Black or African American Does not wish to disclose Hispanic, Latino or Spanish Origin Native Hawaiian or Other Pacific Islander Other or I identify as more than one race
	Unknown/Not Sure White
Select Des Pop	
	1 of 1 entries Previous 1 Next
New Licen	
No	o data available in table
_	O of 0 entries Previous Next
License State	e: License ID: License Effective Date:
Add	Id New License Clear New Licenses

Languages





Provider information (continued)

Addresses - one address must be selected as primary



If more than one address is being added to this new group all addresses will display. You have the option to select one to many locations. Each practitioner must be linked to at least one location and one address indicated as their primary location.

Click *Assign* if you are adding more than one practitioner. Which will take you back to the Practitioner NPI search screen. If you are only adding one practitioner, click *Done*.

EFT/EDI information

Electronic Transaction Info

Select the Proceed to EFT/EDI information button at the bottom of the page.



Enter the electronic transaction information below. Enter routing number and click *Search*. If information is available, it will return bank name as readable only. If no information is returned, bank name will need to be completed. Enter account number and account type. Review EDI information and select the appropriate options.

oviders for Tax ID			
*Routing Number	*Account Number	*Account Type O Savings Checking	
Search Search			
*Bank Name			
number, other payment instruc	tions, or any changes in information on this form) day prior written notice to Capits in (such as a new provider contac	al Blue Cross of any changes in its depository information, ABA tt person, etc.).
lectronic Data Interchange (E	DI) Election Form		
Provider Preference for grouping Tax Identification Nur	(bulking) Claim Payment Remittance Advice		
Method of Retrieval			
Name Phone Number		Contact Name Email	
/endor			
Name		Contact Name	
Phone Number		Email	
	ons you wish to receive electronically fr		AIC, CAAC and Keystone Health Plan Central:
Submission of HIPAA-complia	ant ANSI 837P (Professional Claims)		
Submission of HIPAA-compli	ant ANSI 837I (Institutional Claims)		
☐ Submission of HIPAA-compli	ant ANSI 270/271 (Eligibility)		
Submission of HIPAA-compli	ant ANSI 276/277 (Claim status)		
Submission of HIPAA-complia	ant ANSI 278 (Health Services Review)		
☐ Receipt of HIPAA-compliant A	NSI 835 (Remittance)		

(Other (describe):
rece	ou enroll in one or more of the above electronic services, you agree to receive all your reports electronically for the selected service(s), and you will no longer elive a paper report by mail at any time. For the Statement of Remittance service, you will be able to access the most recent twelve (12) months of online reports, ch shall be available for quick, convenient access.
info	Provider understands that Capital Blue Cross will be relying on this representation for claims processing purposes and for purposes of releasing confidential rmation. Provider confirms that the Agent has signed a written agreement pursuant to which it has agreed to preserve any information which is received from ital Blue Cross as confidential, and in accordance with all laws and regulations.
all d	her, in consideration of Capital Blue Cross' acceptance of the Agent, the Provider agrees that it will indemnify and hold Capital Blue Cross harmless for any and lamages, claims, and expenses that Capital Blue Cross may incur or that may be asserted against Capital Blue Cross as a result of the negligent or intentional ons of the Agent in carrying out its duties in connection with the purposes noted above.
Сар	ital Blue Cross shall be entitled to rely on this until revoked in writing.
	vider understands that Capital Blue Cross reserves the right to modify its policies relating to the release of confidential information, including the release of the scriber information to providers or their Agents, at any time.
	Accept

When completed, select the *Accept* button at the bottom of the page. Cancel will not retain the information entered and return you to the previous screen.

New group summary

The next step is reviewing the summary to ensure the information entered is accurate.

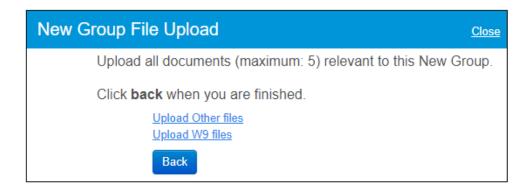


After the summary is reviewed and if no changes are needed, click the *Submit* button at the bottom of the page. Or if changes are needed, click the *Back* button and select the appropriate action to make any necessary updates.



New group submission

After Submit is clicked, the following screen appears:



Click *Upload W9 files* to attach the W9 for the group. Any other files can be loaded by clicking *Upload Other files*. File types that may be uploaded are: PDF, JPG, JPEG, JPE, or JIF. (File/document types that cannot be uploaded are Word, Excel, emails, etc.)



Click *Choose* to navigate to the destination of the saved documents. Double click on the document to be attached.



The name of the file will appear. Click *Upload*, then click on upper right *X* to close this box.

If additional documents need to be uploaded, choose the second document that has been saved and begin the same process again until all documents have been uploaded. Four attachments can be added during one upload process, but you can use the upload process (from the New Group File Upload page) as many times as needed to attach all the necessary documents. Once all documents have been uploaded, click *Back*.

Conclusion

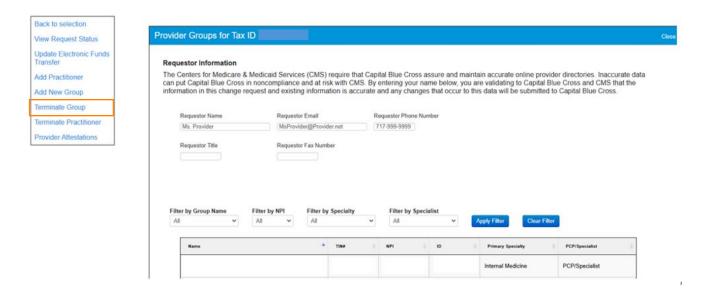
Your transaction has been accepted.

Go to top of application

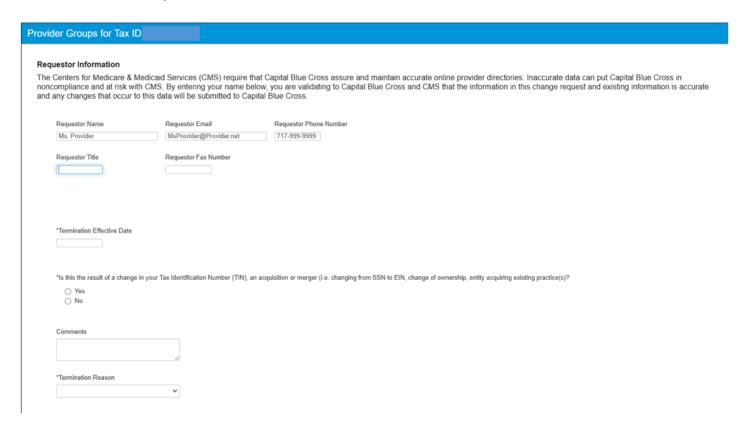
Confirmation that the new group request has been successfully entered and submitted. An automated email will be sent to the email entered at the beginning of the task indicating the request has been received. Please check email to ensure automated email is received, reviewing Junk folder if necessary to locate. Automated emails will be received throughout the process of the new group request. Click *Go to top of application* to navigate back to the search criteria screen.

Group terminations

Complete requester information.



Select Terminate Group from the menu bar.



Requestor information entered on the main page will transfer to the Group Termination screen. The requestor information can be altered on this page.

*Termination Effective Date 12/20/2023			
*Is this the result of a change in your Tax Identification Number (TIN Yes No	l), an acquisition or merger (i.e. char	nging from SSN to EIN, change of own	nership, entity acquiring existing practice(s)?
New Group ID from search New Group Name from search New Group ID Search			
Provider Search			
Search by NPI			
Search by Name (do not use wild cards)			
Search			
Back			
Comments			
*Termination Reason			
~			
ter by Croup Name Eilfer by NDI	Filter by CPC ID	Eilter by Chasialty	Filter by Par Status
tter by Group Name Filter by NPI All	Filter by CBC ID All	Filter by Specialty All	Filter by Par Status
Apply Filter Clear Filter			

Termination Effective Date: Enter termination date.

Note: This is not a guarantee that this date will be applied based on Capital Blue Cross' termination policy. Answer Acquisition/Merger question.

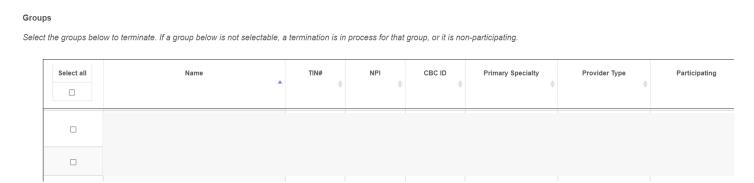
Yes or No Response: Is this the result of a change in your Tax Identification Number (TIN), an acquisition or merger (i.e. changing from SSN to EIN, change of ownership, entity acquiring existing practice(s))?

If Yes, additional information is required. Search functionality is displayed to locate the new group that was already created due to this acquisition/merger.

Comments: Can be entered on the request but are not required.

Termination Reason: Select from the drop-down option

Select: Select the group(s) for termination. This action will terminate the group(s) selected completely from the network.



Once the group(s) have been selected, continue with the *Submit termination* button or use the *Back* button to return to the previous page.



Please verify the group(s) selected are to be terminated, priort to proceeding.

Once validation is completed, select *Proceed* to complete the request. If changes are identified in the validation, click *Modify* to change the request, or *Back* to return to the previous screen without any submission.



The message below will appear at the bottom of the screen as an indicator that your transaction was received.

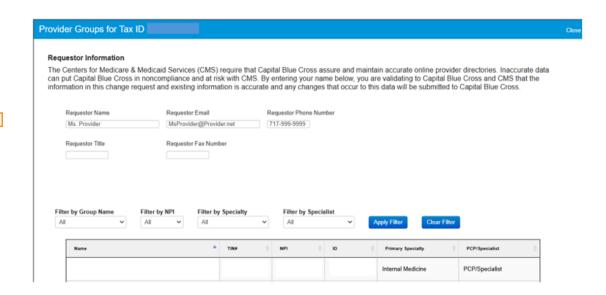
Termination submitted - Trans id:

An automated email will be sent to the email entered at the beginning of the task indicating the request has been received additional notifications will be received throughout the process.

Practitioner terminations

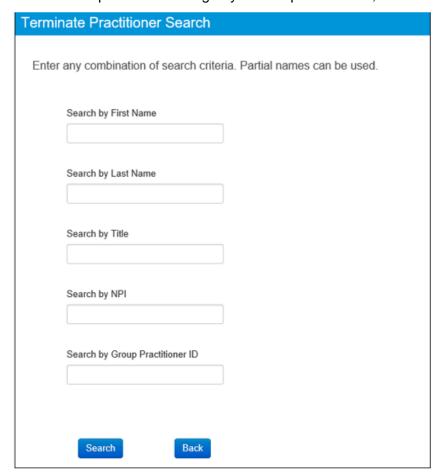
Complete requester information.





Select Terminate Practitioner from the menu bar.

Search for the practitioner using any of the options below, then click Search.



Select the applicable practitioner (depending on what the search criterion is, there may be only one result).



Termination Effective Date: Enter termination date.

Note: This is not a guarantee that this date will be applied based on Capital Blue Cross' termination policy.

Comments: Can be entered on the request but are not required.

Termination Reason: Select from the drop-down option.

Yes or No Response: Is this the result of a change in your Tax Identification Number (TIN), an acquisition or merger (i.e. changing from SSN to EIN, change of ownership, entity acquiring existing practice(s))?

If Yes, additional information is required. Search functionality is displayed to locate the new practitioner record that was already created due to this acquisition/merger.

Terminate Practitioner
Practitioner to be terminated:
*Termination Effective Date
Comments
*Termination Reason
*Is this the result of an acquisition or merger (i.e., change for ownership, entity acquiring existing practice(s)? Yes No
Existing Group Practitioner ID from search Existing Group Name from search
New Practitioner ID Search
Filter by Group Name All All Clear Filter Filter by CBC ID Filter by Par Status Filter by Par Status Filter by Specialty Filter by Group CBC ID All Clear Filter Filter by CBC ID All Clear Filter Filter by Par Status Filter by Specialty All All Clear Filter Filter by Specialty Filter by Group CBC ID All All Clear Filter Filter by Specialty Filter by Specialty All All All Clear Filter Filter by Specialty Filter by Group CBC ID All All
Groups Select the groups from which to terminate the Practitioner. If a group is unselectable, another action is in process. *Practitioner is the only practitioner at the group. Please go to Group Terms and terminate at the group level.
Select all Group Name Group NPI Group CBC Status Group Primary Specialty Group Secondary Group Prac CBC Specialty Group Prac CBC ID
Showing 1 to 1 of 1 entries
Showing 1 to 1 of 1 entries Submit termination Back

Select: Select the group(s) from which the practitioner should be terminated. This action will terminate the practitioner completely from the network for the group(s) selected.

Submit Request: Select the *Submit termination* button or *Back* to return to the previous screen.

Please verify the group(s) selected are those the practitioner is to be terminated from, prior to proceeding.

Once validation is completed, select *Proceed* to complete the request. If changes are identified in the validation, click *Modify* to change the request, or *Back* to return to the previous screen without any submission.



The message below will appear at the bottom of the screen as an indicator that your transaction was received.

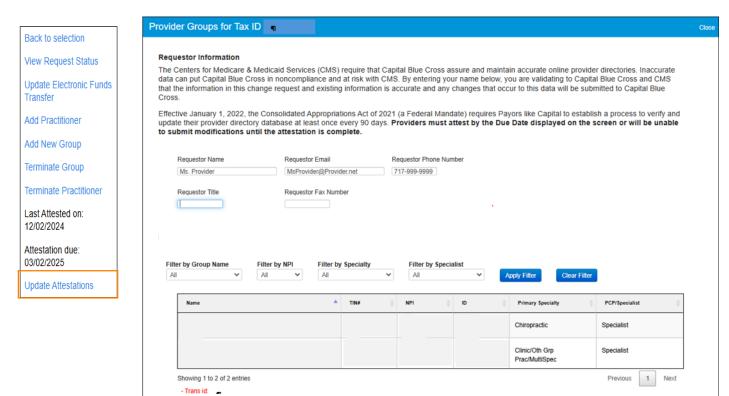
Termination submitted - Trans id:

An automated email will be sent to the email entered at the beginning of the task indicating the request has been received additional notifications will be received throughout the process.

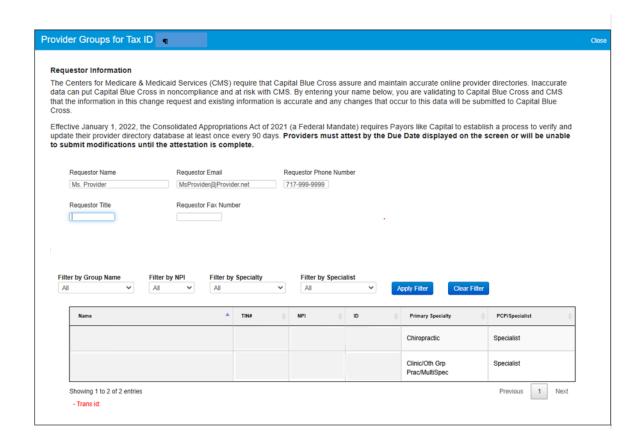
Provider attestation

Complete required requestor information: requestor name, requestor email, and requestor phone number.

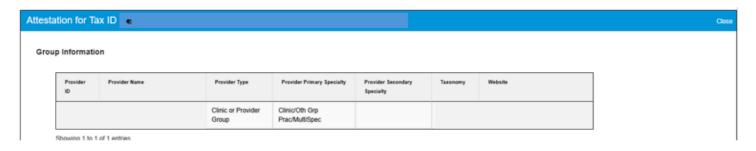
Please note, if you start the request and leave before finalizing, you may lose all the information that was entered.



Select Update Attestation from the Menu Bar.

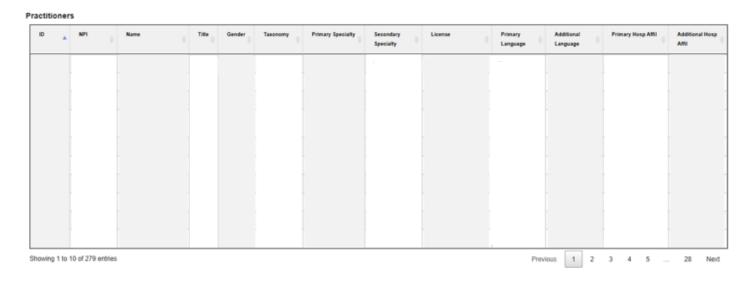


Select group name for each group listed to begin reviewing the necessary data that must be attested to. Please note, there may be several groups to review ("Groups" includes all participating groups associated with the Tax ID selected when logging into the application, which is also available at the top of the screen).



Network	Effective Date	Term Date	Status	Print In Directory?	Accepting New Patients?	Min Patient Age	Max Patient Age	PCP / Specialist
CHIP HMO Network	03-01-2023		Participating	Yes No	Open to new patients		99	Specialist
KHP Commercial HMO Network	07-01-2013		Participating	Yes No	Open to new patients		99	Specialist
Medicare Advantage PPO Network	03-01-2023		Participating	Yes No	Open to new patients		99	Specialist
CareConnect Network	10-01-2013		Participating	Yes No	Open to new patients		99	Specialist
POS Network	07-01-2013		Participating	Yes No	Open to new patients		99	Specialist
PPO Network	07-01-2013		Participating	Yes No	Open to new patients		99	Specialist
Performance PPO Select Network	08-01-2020		Participating	Yes No	Open to new patients		99	Specialist
Medicare Advantage HMO Network	03-01-2023		Participating	Yes No	Open to new patients		99	Specialist
Traditional/Indemnity Network	07-01-2013		Participating	Yes No	Open to new patients		99	Specialist
PPO Choice Select Tiered Network 2	07-01-2022		Participating	Yes No	Open to new patients		99	Specialist
Wellspan Health Medicare Advantage HMO Partnership	03-01-2023		Participating	Yes No	Open to new patients		99	Specialist

Once you select the Group Name, the above informational screens will appear which shows data for the selected group and networks. This high-level group level information is display only, to make any changes to group name, please see **Group Name Change**.



After reviewing networks, practitioners associated with the group selected will be displayed. Please note, there may be several pages of practitioners, each grouping of practitioners will need to be validated for accuracy. If any information needs to change under the practitioner section, select the hyperlinked name to submit any

necessary changes. Updates are available for the following categories: Name, Gender, Ethnicity, Languages, Population Served.

	(* indicates req	uired fields)
	www.sooms.dulide	Touristic Africa Strategies (Ex-
Practitioner name change submission.	s require an upload of the re-	vised license to show the updated practitioner name. You will be prompted for it after successful
Last Name	*First Name	Middle Initial
d S		
Title	Manday	Finalists
PT	*Gender Male	Ethnicity American Indian or Alaska Native
	O Female	O Asian
		Black or African American Does not wish to disclose
		Hispanic, Latino or Spanish Origin Native Hawaiian or Other Pacific Islander
		Other or I identify as more than one race
		Unknown/Not Sure White
		2777 April 1971
NPI	CBC Practitioner ID	
censes Hospital Affiliations (*	indicates primary) Specialties	
*	Physical There	apy -
*	*	*
Languages ("indicates primary)	Availab	ele Languages
"English ^	(Afan)) Oromo A
	Abkha Afar Afrika	
	Akan Albani	
		ican Sign Language
*	Arabic Armer	c .
Medicare Participant	To Account	
⊕ Yes		
○ No		
Select Populations Serv	ed:	
Select Description Populations Served-		
Populations Served-Populations Served-	Women's Issues Seniors/Geriatric >65	
Populations Served- Populations Served-	Adolescents	
Populations Served-	LGBTQ2	
Populations Served-Populations Served-		
Trans id: 556de3df-1cdf-4b25-8	3930-450645e5d6e7-0015	

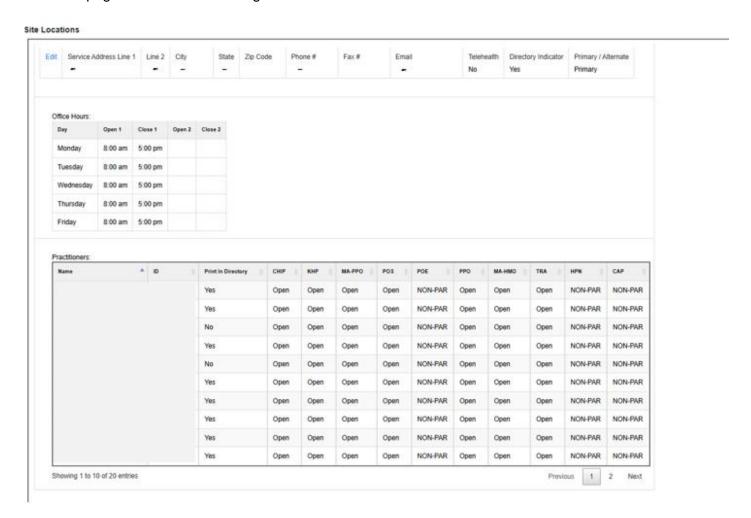
Update the practitioner information that contained discrepancies and select *Update* to save and submit all necessary changes. Name changes require attestation validation before submission can be received, message will appear on the screen.

Please note, *Reset* will take the screen back to the original state and *Return to Attestation* will NOT submit any changes and will return the user back to the attestation screen.

This function can be repeated for all practitioners that need to be corrected.



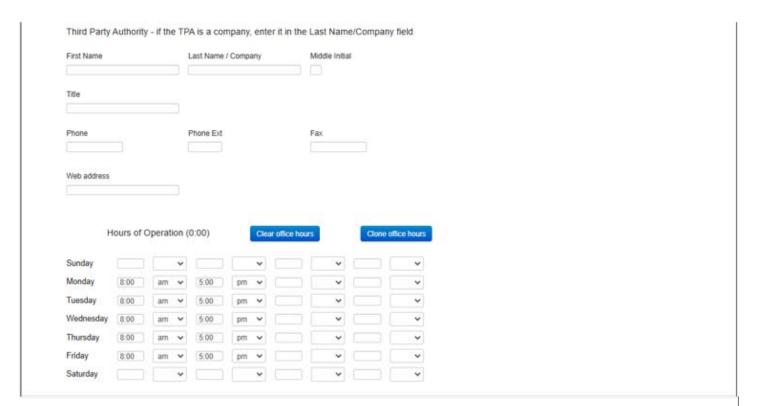
After the practitioner information is updated and submitted, select *Return to Attestation* to go back to the Group Information page to continue reviewing the attestation information.



After reviewing all practitioners, next the service locations which will be displayed. Showing the primary address, the associated office hours and the practitioners affiliated with this service location. Please note, there may be several pages of practitioners affiliated with the location; each grouping of practitioners will need to be validated for accuracy before completing attestation. To edit address, office hours or practitioner affiliations (including office status), select *Edit*.

Edit, will present you with the address screen allowing for updates to be submitted.

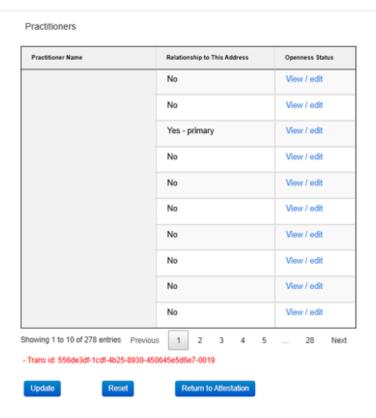
rimary Address Close
(* indicates required fields)
*Effective Date for requested change 11/25/2024
"Is this the result of a change in your Tax Identification Number (TIN), an acquisition or merger (ie. changing from SSN to EIN, change of ownership, entity acquiring existing practice(s))? Yes No
*Address Line 1 Address Line 2
*City
Zip Code Lookup: Enter the zip code above, leave city, state and county blank and click Zip Code Lookup. This will give you a list of all locations within the Zip Code. Standardize Address: Enter the Address information above and click Standardize Address. This will rearrange the address information to conform to USPS standards. For addresses that contain building names or other site identifiers, please be sure identifiers are included on line 1 after standardizing the address.
Zip Code Lookup Standardize Address
*Phone Number Ext Fax Number Email —
Services Performed At This Location *Is Telehealth available for this location? Yes No
Handicapped Accessible? Print In Directory? Tyes No Yes No



Office Status

Network Description	Effective Date	Termination Date	Description
CHIP HMO Network	03-01-2023		Open to New Patients
KHP Commercial HMO Network	07-01-2013		Open to New Patients
Medicare Advantage PPO Network	03-01-2023		Open to New Patients
CareConnect Network	10-01-2013		Open to New Patients
POS Network	07-01-2013		Open to New Patients
PPO Network	07-01-2013		Open to New Patients
Medicare Advantage HMO Network	03-01-2023		Open to New Patients
Traditional/Indemnity Network	07-01-2013		Open to New Patients

Showing 1 to 8 of 8 entries Previous 1 Next



All information can be edited. Please note, there may be several pages for office status and practitioner affiliations.

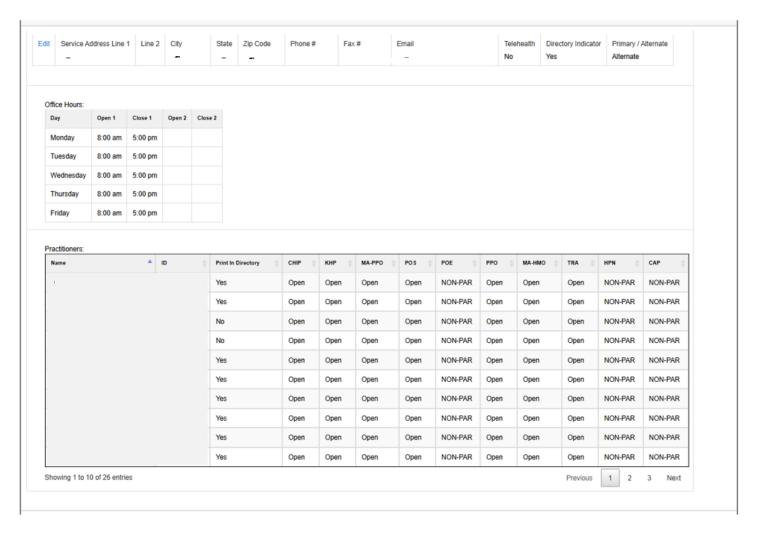
Once all changes are made, select *Update* to save and submit any necessary updates.

Please note, *Reset* will return the screen back to its original state and *Return to Attestation* will NOT submit any changes and will return the user back to the attestation screen.



Address cannot be terminated because it is the primary address for at least 1 practitioner

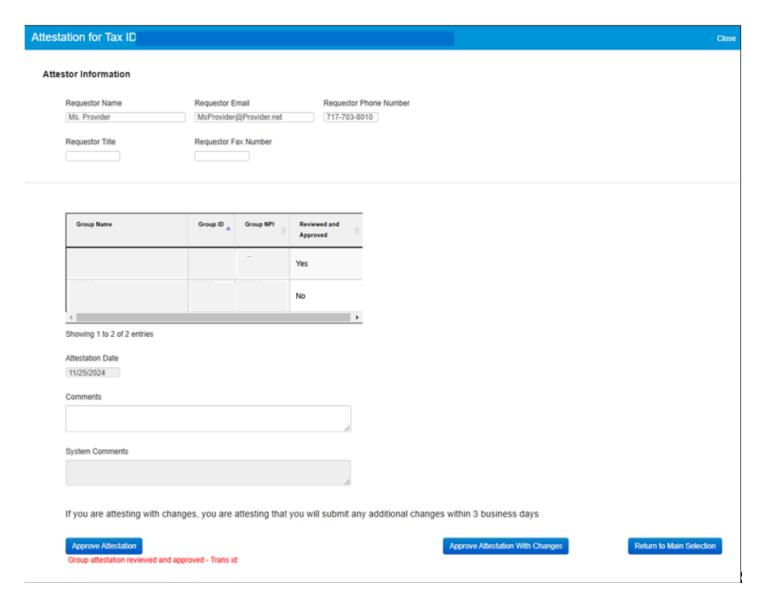
After the address information is updated and submitted, select *Return to Attestation* to go back to the Group Information page to continue reviewing the attestation information.



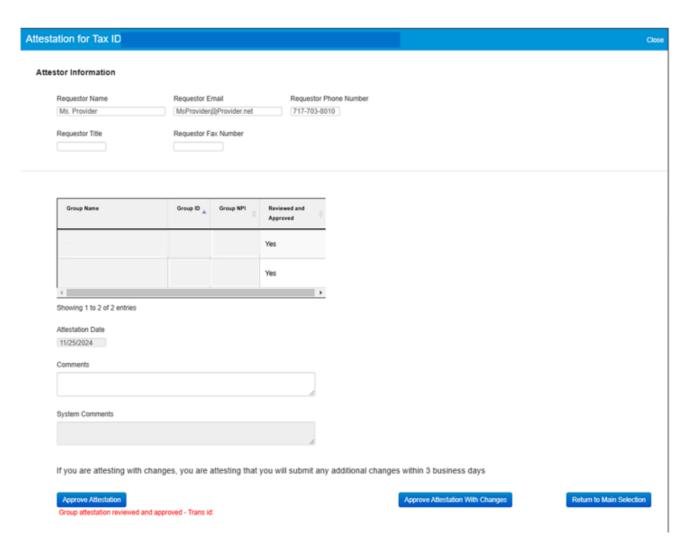
The last part to review is all alternate service locations. Please note, there may be several pages of Practitioners affiliated with these service locations, each grouping of practitioners will need to be validated for accuracy before completing attestation.



Once all information has been reviewed and any necessary updates are submitted, click *Submit Attestation* which will complete the check for this group. If *Cancel* is selected, it will return the user back to the previous participating attestation listing screen.



Once you click *Submit Attestation* for the group reviewed, the user will be returned to the Attestation screen to continue reviewing any additional groups associated with the Tax ID selected. The group that was just reviewed and approved, will be marked with a "Yes" under the Reviewed and Approve column. Each group listed must be reviewed by completing the steps above to review for accuracy and submit updates for any discrepancies. Please note, there may be several groups to review.



Once all groups listed have been reviewed, the column labeled Reviewed and Approved will contain 'Yes' listed next to each group name. To submit the attestation, select *Approve Attestation* if all information is accurate or any necessary changes have been submitted or *Approve Attestation with Changes* if changes are identified and cannot be submitted at this time. Attestation is not submitted until the *Approve Attestation or Approve Attestation With Changes* button is selected. An automated email is received when the attestation is completed.

Approve Attestation indicates all information is accurate and no further changes need to be made OR changes that needed to be made, have been made prior to approving the attestation.

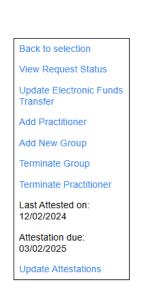
Approve Attestation with Changes indicates that all groups have been reviewed and changes need to be made but cannot be completed at this time. Detailed comments are required to indicate the necessary changes that will be submitted at a later date. Please note, you have three business days to make any necessary updates to the group information before the account will not be able to make any other changes in the application.

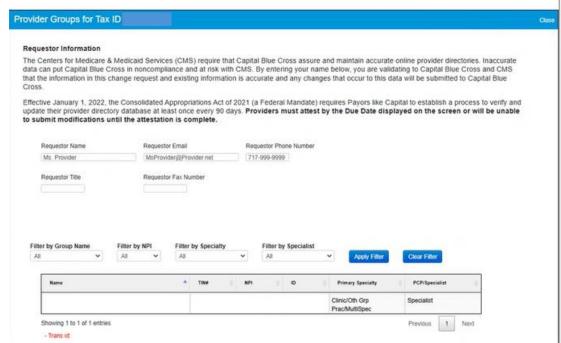
Attestation submitted - Trans id: 556de3df-1cdf-4b25-8930-450645e5d6e7-0022

Once you select *Approve Attestation* or *Approve Attestation with Changes*, the attestation request will be submitted and you will be returned to the Main Screen.

Return to Main Selection will remove any 'Review and Approved' records that have been reviewed and return you to the Main Screen, which will NOT submit the attestation request.

Attestation past due





If an attestation is not received within the 90 days from, the 'Last Attested on' text will appear in red and functionality of the tool will not be available until the outstanding attestation is reviewed and submitted. Once the attestation is submitted, all functionality will be available. Attestation is not submitted until the *Approve Attestation* or *Approve Attestation With Changes* button is selected. An automated email is received when the attestation is completed.

