

Submission Checklist

Please fill out the enclosed paperwork and submit by email, fax or mail. Complete all forms in black ink. Use the checklist below to keep track of completed documents. Be sure to make copies for your records.

- **Provider Agreement:** Sign and date. Please use the name found on Line 1 of your W-9. Return all pages of the contract.
- **Compensation Schedule: Include all pages of the:**

Medicaid Compensation Schedule
- **New Health Partner Contract form/ Hierarchy form:** Complete all sections.
- **IRS form W-9:** Sign and Date your current W-9
- **Instamed Network Funding Agreement:** Return to Instamed as instructed in the agreement. You may also register online at www.instamed.com/ERAFT

Contact Information | CareSource

Attn: Contract Administration
P.O. Box 8738
Dayton, Ohio 45401-8738
GANewContracts@CareSource.com
Fax: 844-438-9502



CareSource.com

GA-P-0086

Ready to Join?

Here's How



From expert information to a compassionate ear that listens, CareSource is ready to make a difference. We hope you are too.

1 Sign With Us!

A copy of the Provider Agreement and Compensation Schedule are enclosed. Please sign and return all pages. An executed copy will be sent to you for your records. Upon receipt of the completed documents, we will begin the on-boarding process.

2 Credentialing

Georgia has contracted with HPE for credentialing providers serving the Medicaid population. We will incorporate the HPE information into our on-boarding process for the Medicaid population.

3 Congratulations! You're a CareSource Health Partner

Upon completion of the on-boarding process, you will receive a letter welcoming you to our network. The letter will contain your effective date and your CareSource Provider Billing Number.

4 Timely Payment

We understand accurate and timely payments are important to our health partners. The following forms are essential in making that possible:

New Health Partner Contract Form/
Hierarchy Form – collects required information to begin the on-boarding process

Instated Network Funding Agreement – establishes ERA/EFT. Electronic remittance advice and electronic fund transfers are processed directly to your account

IRS Form W-9 – supports reporting information to the Internal Revenue Service

5 Provider Portal Registration

We want to make it easy for you to do business with us 24 hours a day, 7 days a week. The CareSource Provider Portal is a secure online tool that will help you manage claims, case management, prior authorizations and more.

6 Onboarding Experience

We will reach out to you in the very near future to get better acquainted and address any of your questions. Provider forums, office visits, webinars and orientations will be scheduled over the next few months. Look for an invitation with details.

If you have any questions, we're available to assist you at **1-888-901-0014** or **GANewContracts@Caresource.com**

