



## **Network Notification**

Date: July 19, 2017

To: Kentucky Medicaid Health Partners

From: Humana – CareSource®

**Subject: Provider Information Change** 

Advance written notice of status changes, such as a change in address, phone number or an addition or deletion of a physician or other health care provider to your practice helps Humana – CareSource® keep its records current and is critical for claim processing. The following minimum-notice-required timelines for information changes are important for Humana – CareSource to reduce claims processing turnaround times:

## Type of change

## Minimum notice required\*

| Add or delete providers              | Immediate                        |
|--------------------------------------|----------------------------------|
| Provider(s) leave practice           | Immediately upon provider notice |
| Phone number change                  | 10 calendar days                 |
| Address change                       | 60 calendar days                 |
| Change in capacity to accept members | 60 calendar days                 |
| Provider intent to terminate         | 90 calendar days                 |

This information is also reportable to Medicaid and Medicare. If you need to sign up for Medicaid, please email: providermedicaidenrollment@humana.com.

## How to Submit Changes to Humana - CareSource

**Email**: <a href="mailto:chcpr@humana.com">chcpr@humana.com</a> **Fax**: 1-800-626-1686 **Call**: 1-800-457-5683

Mail to: Humana - CareSource

Attn: Provider Maintenance 12501 Lakefront Place Louisville, KY 45202

**KY-HUCP0-0784** 

<sup>\*</sup>Please note: Changes in the Humana – CareSource system are not immediate and may take as long as the time frame listed to implement. As a result, please notify Humana – CareSource of changes as soon as possible to avoid delays in claims processing.