## PROVIDER ENROLLMENT CHECKLIST FOR PRACTICE ENROLLMENT

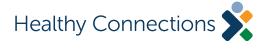
Submit all documentation to Provider.Blue.Enroll@bcbssc.com. Each checklist item is hyper-linked with forms or examples for your reference.

Checklist Items
Application For Clinic/Group/Institution/Location to File Claims or to Change Employer Identification Number (EIN)
IRS Verification of Tax ID (No W-9s) <sup>1</sup>
EFT/ERA Enrollment (Signed Terms/Conditions) <sup>2</sup>
Application for Satellite Location
Clinical Lab Improvement Amendments (CLIA)
Network Contracts from My Insurance Manager® or request them
Additional Items for Medicaid
Medicaid ID Number

Additional documentation may be required depending on the type of group you're enrolling. Contact us for more information.

Please note all individual providers also need to be credentialed. For instructions on credentialing individual providers, please see the Provider Enrollment section of www.SouthCarolinaBlues.com.





<sup>&</sup>lt;sup>1</sup>Only needed if the provider is registering a brand-new Tax ID number.

 $<sup>^{\</sup>rm 2}$  Only needed if the provider is registering a brand-new Tax ID number or a new satellite location.