



NEWS FOR PROFESSIONAL PROVIDERS ONLY (HIPAA 837P Claim Submitters)

HIGHMARK NOW CREDENTIALING DIETITIANS FOR ALL COMMERCIAL NETWORKS

EFFECTIVE 3/3/14

Highmark is committed to making high-quality health care accessible to our members, and as part of that commitment, we now credential and contract directly with dietitians for our commercial networks in Pennsylvania. In the past, dietitians were only eligible to directly participate with our Federal Employee Program (FEP) and Medicare Advantage (MA) networks or as an employed practitioner of a physician's group.

Dietitians currently credentialed for our FEP and MA networks **and** those dietitians not currently participating in any of our networks must complete a CAQH application to become a credentialed provider with Highmark's commercial networks.*

Once credentialed and contracted for all Highmark products, dietitians will be able to submit claims to Highmark for the following procedure codes: 97802, 97803, 97804, G0108, G0109, G0270 and G0271. Reimbursement is based on a member's benefit coverage for nutritional therapy services. Please confirm benefit coverage using NaviNet or the applicable HIPAA electronic transactions prior to providing these services.

If you have any questions about this information, contact your Provider Relations Representative.

ABOUT CAQH

CAQH's Universal Provider Datasource provides a single, national system that allows providers to complete one standardized application that meets the needs of Highmark and other participating health plans and health care organizations.

All Highmark network providers must use CAQH Universal Provider Datasource for credentialing. Request a CAQH ID by visiting **www.highmark.com** and clicking on the Highmark logo for your region. Scroll down to "Helpful Links" and click on *Provider Resource Center*. (If you have a CAQH ID already, please log in to **www.caqh.org/cred** and follow the instruction for logging in for the first time.)

*If a dietitian is currently employed by a physician group and that group will be billing for the services provided by the dietitian, credentialing and direct contracting is not necessary and the dietitian can continue to provide services as they do today. If the dietitian is not employed by a physician practice, then credentialing and direct contracting will be necessary.