

PROVIDER NOTICE

Provider Relations Department 1-888-895-4998

Reminder to Update Provider Demographic Information

Effective Date: Immediately

Health Plans Affected: Johns Hopkins Advantage MD, Johns Hopkins Employer Health Programs (EHP), Priority Partners, Johns Hopkins US Family Health Plan (USFHP)

Type of Change: Process

Explanation:

If there are any demographic changes in your practice or facility, you are required to notify the Johns Hopkins Provider Relations department by digital online form, email or fax. Please also be sure to notify JHHC about any panel closures and confirm email addresses as JHHC communicates provider notices via email. Information on the forms include changes to telephone numbers, address, suite number and email or fax numbers, as well as PCP panel (open/closed) status changes in your practice or facility.

- **Digital Submission** (preferred): Submit he Online Digital Provider Information Update Form directly from the provider website.
- Email Submission: Fill out the <u>Provider Information Update Form</u>** and email it to <u>ProviderChanges@jhhc.com</u>. This mailbox is monitored daily to collect and process all provider changes.
- Fax Submission: Use this method <u>only</u> if you are using a Social Security Number in place of a Tax ID. Complete the <u>Provider Information Update Form</u>* and fax to 410-762-5302 to ensure identity protection. Do not send digitally or by email.

NOTE: Please submit W-9 requests to w9requests@jhhc.com.

Please call Provider Relations at 888-895-4998 with any questions about the provider changes reporting process.

^{*}This form is located on jhhc.com, under "For Providers" and then under the Forms section of the "Resources and Guidelines" page.