



## Network Notification

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**Date:** June 6, 2011

**Number:** OH-P-2011-32

**To:** Ohio Providers

**From:** CareSource

**Subject:** Requesting a Contract and Updating Provider Information Changes

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Our goal is to make it easier for providers to request a new contract and update their information when doing business with CareSource.

### **Provider Information Change**

Advance written notice of status changes, such as a change in address, phone, or adding or deleting a provider to your practice helps us keep our records current and are critical for claims processing.

### **Timeline of Changes:**

<b>Type of Change</b>	<b>Minimum Notice Required</b>
New providers or deleting providers*	Immediate
Phone number change	10 calendar days
Address change	60 calendar days
Providers leave the practice	60 calendar days
Change in capacity to accept members	60 calendar days

### **Why is this Important?**

This information is critical to process your claims. In addition, it ensures our directories are up-to-date, and reduces unnecessary calls to your practice. This information is also reportable to Medicaid and Medicare.

## How to Submit Changes to CareSource:

- **Email:** [providermaintenance@caresource.com](mailto:providermaintenance@caresource.com)
- **Fax:** 937-396-3076
- **Mail:** CareSource  
PO Box 8738  
Dayton, OH 45401-8738  
Attn: Provider Maintenance

## Request a Contract with CareSource

Providers who would like to set up a new contract with CareSource should send a completed [New Contract Provider Information Form](#) and a copy of your W-9:

- **Email:** [newcontract@caresource.com](mailto:newcontract@caresource.com)
- **Fax:** 937-396-3290
- **Mail:** CareSource  
PO Box 8738  
Dayton, OH 45401-8738  
Attn: New Contract