

# Join Our Networks

## Becoming an Anthem Blue Cross and Blue Shield in Maine Network Provider

Thank you for your interest in becoming a network provider with **Anthem Blue Cross and Blue Shield in Maine**. We look forward to working with you to provide access to quality service for our Members. If you are not participating with us, please read and follow the instructions on this page to submit the [Provider Enrollment Application](#) to request participation.

If you are a Provider or Facility and are **already participating** with us and would like to **make changes** to your participation status or demographic record, please complete the [Provider Maintenance Form](#) or the [Facility Maintenance Form](#). Note: To launch the Provider Maintenance form, you must use Google Chrome.

If you have questions regarding the Provider Enrollment or Provider Maintenance process, please outreach to Provider Service at (800) 832-6011.

Refer to the [Provider Type list](#) for a list of Credentialed, Non-Credentialed, Ancillary, and Health Delivery Organization provider types.

### CREDENTIALIALED AND NON-CREDENTIALIALED PROVIDERS

If you are a *non-Ancillary* type provider, please complete your enrollment through our Digital Provider Enrollment process. Digital Provider Enrollment is the way to apply for participation in Anthem Blue Cross and Blue Shield in Maine's networks. The Digital Provider Enrollment tool is hosted in the Availity Portal and uses the Council for Affordable Quality Healthcare, Inc. (CAQH) ProView® to extract data from the provider's CAQH profile.

If you are *not* one of the provider types requiring Credentialing, you do *not* need to apply for a CAQH ID nor do you need to complete a CAQH application prior to completing Anthem's application for participation. Proceed directly to the Digital Enrollment Application.

The Digital Provider Enrollment Application is located on the Availity Portal at [Availity.com](#). For instructions on how to enroll, please view [the Maine Digital Provider Enrollment Guide](#).

**What is CAQH ProView®?** CAQH ProView® is a sophisticated online database allowing physicians and other health care providers to complete one application and enter credentialing application information into one easy to use database, which helps to eliminate the paperwork and hassle that many providers face during the credentialing process. With the physician's authorization, the information will be shared with participating health plans, such as Anthem, and other participating organizations that require it. The basic information must be provided only once, and updates are easy. Providers are contacted regularly to verify that the information in the database is current. The CAQH application is consistent with the mandated uniform application and complies with state regulations. There is no charge for physicians to use the tool.

Please ensure you have a completed up-to-date credentialing application with CAQH if you require credentialing by Anthem. Be sure to verify that you have granted Anthem permission to access your CAQH application. If you do not currently have a CAQH ID, you may request one directly from CAQH by visiting their website at [CAQH ProView®](#). Important Note: A CAQH ID is required *prior* to completing Anthem's Digital Provider Enrollment Application. If you already have a CAQH ID, proceed directly to Anthem's Digital Provider Enrollment Application.

For information regarding our credentialing process, please visit [Credentialing with Anthem](#) located on this website. If you have questions about the CAQH application process, please contact CAQH directly 888-599-1771. Review your [Practitioner Credentialing Rights](#).

### ANCILLARY PROVIDERS

If you are an Ancillary provider, you do *not* need to apply for a CAQH ID nor do you need to complete a CAQH application prior to completing Anthem's application for participation. Proceed directly to the [New Provider Application Form](#) and complete the Ancillary Provider section, as applicable. We encourage you to review the [New Provider Application Form Instructions](#) for more detailed form specifics and documents required to complete the New Provider Application process.

### HEALTH DELIVERY ORGANIZATIONS (HDOs)

[Health Delivery Organizations \(HDOs\)](#) should apply using the [HDO Application](#).