



Enrollment Success Guide



How it works

Your Kareo Success Coach will be with you every step of the way!



Provider Enrollment Preparation

Weeks 1&2

1. Collect insurance information.
 2. Submit enrollment request(s).
- Incomplete research or inaccurate signatures will impact the next steps.*



Provider Enrollment Actions

Weeks 1 through 3

3. Complete required actions from your Kareo Success Coach.
4. Fulfill enrollment actions (i.e. execute agreement signatures and portal login set up).



Enrollment Approval Process

Weeks 2 through 6

5. Insurance receives and processes your request for enrollment.
6. Providers may need to follow up with the insurance company to receive confirmation of enrollment status.

Each insurance has differing completion times and may only provide updates to the provider by mail or fax.



Provider Enrollment Approved!

Weeks 4+

- Submit claims
 - Receive ERAs
- Claims must be submitted, processed and paid to receive ERAs.*



Provider Enrollment Preparation - Weeks 1 & 2

1. Insurance information collection:

As the provider, you need to identify the exact practice information as credentialed and on file with Medicare.

If any submitted details do not match the information on file in Medicare's system, the enrollment will be denied and will delay your ability to send and/or receive ERAs.

- Practice name (include DBA)
- Practice address (Have you moved recently? If so, has the new address been updated with Medicare? If not, we will need your old address.)
- Medicare PTAN for billing NPI (Please contact Medicare if you are unsure of this information. They will mail you a physical letter to the address on file.)
- Name of authorized contact on file with Medicare (the source of guidance is NPPES.)

2. Submit enrollment request:

- Complete an **enrollment request** for each billing NPI that claims are sent with.
- No request is needed for any rendering NPIs.

Kareo Setup



How we're helping:

Your Success Coach will review and process request for enrollment.

- Identify any additional information needed from the provider.
- Review and clarify PTANs (different Medicare companies will assign different PTANs).
- Generate insurance specific agreements.
- Forward any action required to the provider.



Provider Enrollment Actions - Weeks 1-3

3. Complete required actions:

If necessary, respond to the request from your Kareo Success Coach for additional information.

4. Action items:

- **Sign agreements and return to Kareo** via fax, as instructed by your Success Coach.
- **Obtain portal logins** as needed to complete your enrollment set up. For example, NordionMedicare requires the provider to complete enrollment through EDISS portal.

This must be done by the provider and not Kareo.

Kareo Setup



How we're helping:

Your Enrollment Specialist will submit all signed agreements to insurance companies.

- **Returned agreements** are reviewed for completion and accuracy to best of knowledge. *Any information crossed out will require a new form to be generated.*
- The complete agreement is forwarded via fax to Medicare.



Enrollment Approval Process - Weeks 2-6

5. Insurance action items:

Medicare receives and processes the request for enrollment.

The average turnaround time for Medicare is 10-20 days once they receive the completed agreement.

6. Provider action items:

- Some Medicare companies will only provide updates to the provider.
- Providers may receive a faxed letter of approval or may need to call the Medicare company and speak with a representative.

Kareo Setup



How we're helping:

Your Enrollment Specialist will reach out to Medicare to verify your enrollment approval status.



Provider Enrollment Approved - Weeks 4+

Submit Claims:

Review Kareo claim settings and update as necessary.

Receive ERAs:

- **ERAs** will deliver as soon as the insurance company sets the clearinghouse as the receiver of the files.

Claims must be submitted, processed and paid to receive ERAs.

Kareo Setup



How we're helping:

Your Success Coach will walk you through setup and confirm your critical account settings.



Provider Enrollment Preparation - Weeks 1 & 2

1. Insurance information collection:

As the provider, you need to identify the exact practice information as credentialed and on file with Medicaid.

If any submitted details do not match the information on file in Medicaid's system, the enrollment will be denied and will delay your ability to send and/or receive ERAs.

- Practice name (include DBA)
- Practice address (Have you moved recently? If so, has the new address been updated with Medicaid? If not, we will need your old address.)
- Medicaid provider number for billing NPI (Please contact Medicaid if you are unsure of this information.)
- Name of authorized contact on file with Medicaid (the source of guidance is NPPES)

2. Submit enrollment request:

- Complete an **enrollment request** for each billing NPI that claims are sent with.
- Only Medicaid NY requires rendering NPI enrollment.

Kareo Setup



How we're helping:

Your Success Coach will review and process request for enrollment.

- Identify any additional information needed from the provider (usually clarification of provider numbers).
- Generate insurance specific agreements.
- Forward any action required to the provider.



Provider Enrollment Actions - Weeks 1-3

3. Complete required actions:

If necessary, respond to the request from your Kareo Success Coach for additional information.

4. Action items:

- **Sign agreements and return to Kareo** by mail or fax, as instructed by your Success Coach.
- Examples for your information:
 - Medicaid NY and Medicaid LA require a notary stamp on the agreement.
 - Medicaid CA requires signatures from both the provider and the clearinghouse. The signatures must be the physical signature in BLUE ink.
- **Obtain portal logins** as needed to complete the enrollment set up.
- Example for your information:
 - Medicaid GA and Medicaid NC

Kareo Setup



How we're helping:

Your Enrollment Specialist will submit all signed agreements to insurance companies.

- **Returned agreements** are reviewed for completion and accuracy to best of knowledge. *Any information crossed out will require a new form to be generated.*
- The complete agreement is forwarded by mail or fax per Medicaid instructions.
- Some agreements require to be sent to the clearinghouse for signature first before submission such as Medicaid CA.



Enrollment Approval Process - Weeks 3-8

5. Insurance action items:

Medicaid receives and processes the request for enrollment.

The average turnaround time for Medicaid is 20-30 days once they receive the completed agreement.

6. Provider action items:

- Some Medicaid companies will only provide updates to the provider.
- Providers may receive a faxed letter of approval or may need to call the Medicaid company and speak with a representative.

Kareo Setup



How we're helping:

Your Enrollment Specialist will reach out to Medicaid to verify your enrollment approval status.



Provider Enrollments Approved - Week 1+ or 10+

Submit Claims:

Review Kareo claim settings and update as necessary.

Some Medicaid companies do not require enrollments in order to submit claims.

- Example for your information:
 - Medicaid TX and Medicaid IL

Receive ERAs:

- **ERAs** will deliver as soon as the insurance company sets the clearinghouse as the receiver of the files.

Claims must be submitted, processed and paid to receive ERAs.

Kareo Setup



How we're helping:

Your Success Coach will walk you through setup and confirm your critical account settings.



Provider Enrollment Preparation - Weeks 1-2

1. Insurance information collection:

As the provider, you need to identify the exact practice information as credentialed and on file with BCBS.

If any submitted details do not match the information on file in BCBS's system, the enrollment will be denied and will delay your ability to send and/or receive ERAs.

- Practice name (include DBA)
- Practice address (Have you moved recently? If so, has the new address been updated with BCBS? If not, we will need your old address.)
- BCBS provider number for billing NPI (Please contact BCBS if you are unsure of this information.)

2. Submit enrollment request:

- Complete an **enrollment request** for each billing NPI that claims are sent with.

Kareo Setup



How we're helping:

Your Success Coach will review and process request for enrollment.

- Identify any additional information needed from the provider (usually clarification around provider numbers).
- Generate insurance specific agreements.
- Forward any action required to the provider.



Provider Enrollment Actions - Weeks 1-3

3. Complete required actions:

If necessary, respond to the request from your Kareo Success Coach for additional information.

4. Action items:

- Sign agreements and return to Kareo via fax or mail, as instructed by your Success Coach and Kareo team.
- Complete any steps instructed by your Success Coach and Kareo team.

Kareo Setup



How we're helping:

Your Enrollment Specialist will submit all signed agreements to insurance companies.

- **Returned agreements** are reviewed for completion and accuracy to best of knowledge. *Any information crossed out will require a new form to be generated.*
- The complete agreement is forwarded via fax to BCBS.



Enrollment Approval Process - Weeks 2-8

5. Insurance action items:

BCBS receives and processes the request for enrollment.

The average turnaround time for BCBS is 10-30 days once they receive the completed agreement.

6. Provider action items:

- Some BCBS companies may contact the provider's office to authorize the change in clearinghouse for ERAs.

Kareo Setup



How we're helping:

Your Enrollment Specialist will reach out to BCBS to verify your enrollment approval status.



Provider Enrollment Approved - Week 4+ or 10+

Submit Claims:

Review Kareo claim settings and update as necessary.

Some BCBS companies do not require enrollments in order to submit claims.

- Example for your information:
 - Anthem BCBS in CA, CO, VA
 - BCBS FL
 - BCBS NY
 - BCBS TX

Receive ERAs:

- **ERAs** will deliver as soon as the insurance company sets the clearinghouse as the receiver of the files.

Claims must be submitted, processed and paid to receive ERAs.

Kareo Setup



How we're helping:

Your Success Coach will walk you through setup and confirm your critical account settings.



Provider Enrollment Preparation - Weeks 1-2

1. Insurance information collection:

As the provider, you need to identify the exact practice information as credentialed and on file with the insurance company.

If any submitted details do not match the information on file in the insurance company's system, the enrollment will be denied and will delay your ability to send and/or receive ERAs.

- Practice name (include DBA)
- Practice address (Have you moved recently? If so, has the new address been updated with the insurance carrier? If not, we will need your old address).
- Tax ID/ NPI
- If applicable, provider number for billing NPI

2. Submit enrollment request:

- Complete an **enrollment request** for each billing NPI that claims are sent with.

Kareo Setup



How we're helping:

Your Success Coach will review and process request for enrollment.

- Identify any additional information needed from the provider (usually clarification around provider numbers).
- Generate insurance specific agreements.
- Forward any action required to the provider.



Provider Enrollment Actions - Weeks 1-3

3. Complete required actions:

If necessary, respond to the request from your Kareo Success Coach for additional information.

4. Action items:

- **Sign agreements and return to Kareo** via mail or fax, as instructed by your Success Coach.
- **Obtain portal logins** as needed to complete your enrollment set up. For example, PaySpan and CAQH EnrollHub require that the provider enroll for ERA/EFT setup.

This must be done by the provider and not Kareo.

Kareo Setup



How we're helping:

Your Enrollment Specialist will submit all signed agreements to insurance companies.

- Returned agreements are reviewed for completion and accuracy to best of knowledge. *Any information crossed out will require a new form to be generated.*
- The complete agreement is forwarded via fax to the insurance company.



Enrollment Approval Process - Weeks 2-8

5. Insurance action items:

The insurance company receives and processes the request for enrollment.

The average turnaround time for commercial insurance is 10-30 days once they receive the completed agreement.

Exception: Tricare has up to a 45-60 day turnaround.

6. Provider action items:

- Some insurance companies will only provide updates to the provider by phone or email to authorize changes in the clearing house for ERAs.
- Providers may need to call the insurance company and speak with a representative.

Kareo Setup



How we're helping:

Your Enrollment Specialist will reach out to the insurance company to verify your enrollment approval status.



Provider Enrollments Approved - Week 1+ or 10+

Submit Claims:

Review Kareo claim settings and update as necessary.
Some commercial insurance companies do not require enrollments in order to submit claims.

Receive ERAs:

- **ERAs** will deliver as soon as the insurance company sets the clearinghouse as the receiver of the files.
Claims must be submitted, processed and paid to receive ERAs.

Kareo Setup



How we're helping:

Your Success Coach will walk you through setup and confirm your critical account settings.

