

Keep Your Provider Profile Current

Keeping updated contact information is essential for ensuring appropriate access to care for our members.

To avoid a poor experience for our members, we at Healthfirst want to ensure our directory has the most up-to-date information for your practice

As you are aware, we conduct audits throughout the year to ensure you are providing timely access to appointments and that your demographic information is up-to-date.

Remember, your information matters to us, but more importantly it impacts our members. It takes only one wrong phone number or office address for the member to perceive a barrier to accessing their care. Access and availability is essential to our star rating, but more importantly to a healthy and happy member experience. Below are directions for how to easily update your information.

Provider Information

Providers are responsible for contacting Healthfirst to report any changes in their practice. It is essential that Healthfirst maintain an accurate provider database in order to ensure proper payment of claims and capitation, to comply with provider information reporting requirements mandated by governmental and regulatory authorities, and to provide the most up-to-date information on provider choices to our members. Changes and updates should be submitted at least thirty days before the effective date.

Any changes to the following list of items should be reported to Healthfirst via our electronic Demographic Change Form, found on the Secure Provider Portal. Once you have logged in to your account, click on Submit Your Information and complete the electronic

Demographic Change Form:



Update Your Information

[Demographic Change Form](#)

Change or update information in your Healthfirst Provider Records.

Additional documentation can be faxed to Healthfirst at (646) 313-4634,

Attn: Portal Request. Please include a cover sheet.

Changes can be faxed to Healthfirst at **1-646-313-4634/Attn: Demographic Update Request**.

These should be submitted with a fax cover sheet that includes full contact information, along with a comprehensive request on the provider or group letterhead that includes the provider's license number and identifies the practice record for update.

Any supporting documentation (such as a W-9 form or a board certificate) should be faxed with these requests.

- Update in the provider or group name and tax ID number (W-9 required)
- Update in provider/group practice address, zip code, telephone, or fax number (full practice information required)
- Update in the provider/group billing address (W-9 required)
- Update in the member age limits for service at the practice (if applicable)
- Update in NY license, such as a new number, revocation, or suspension (new certificate or information on action required, if applicable)
- Closure of a provider panel (reason for panel closure)
- Update in hospital affiliation (copy of current and active hospital privileges)
- Update or addition of specialty (copy of board certificate or appropriate education information)
- Update in practice's office hours
- Update in provider's board eligibility/board certification status
- Update in participation status
- Update in NY Medicaid Number (if applicable)
- Update in National Provider Identification Number (if applicable)
- Update in wheelchair accessibility
- Update in covering provider
- Update in languages spoken in the provider's office

Please contact your Network Account Manager if you need additional information or have questions.