

Contents

- 1 Corporate Office New location**
 - How to Get New Clients & Quicker Claim Payments
 - Our Commitment to Providers
- 2 Find Enrollment Forms Fast**
 - Sign Up for EDI
 - Save Time with Provider Portal
 - How to Register for Provider Portal



Our Commitment to Providers

USFHP is dedicated to supporting our brave service members and their families. We deeply value the vital role you play in ensuring the health and well-being of our patients and loved ones.

Our partnership with you is not merely transactional; it is rooted in a shared commitment to providing the highest quality care to those who serve our nation. As part of our on-going dedication to our valued providers, we distribute The Beat, a quarterly newsletter to our provider network and supplement for the bi-annual Provider Pulse Beat.

Curated especially for you, The Beat will equip you with the latest news, details, and developments to help you provide excellent care to USFHP beneficiaries.

We strive to provide the kind of information that will help you care for USFHP members. **Tell us what you'd like to hear from us.**

New Location, Same Excellent Service

Our offices have moved. Please ensure you update your processes & documentations accordingly.

**Saint Vincent Catholic Medical Centers
of New York - Corporate Offices
DBA US Family Health Plan**

530 Seventh Avenue (10th Floor)
New York, NY 10018-4878
(212) 356-4400


Medical Necessity Appeals:

**US Family Health Plan – Appeals
C/O Toney Healthcare Consulting**

3903 Northdale Blvd., Suite 220-E
Tampa, FL 33624

Get New Customers & Faster Claim Payments

Help us help you get new clients and quicker claim payouts by updating demographic changes and billing addresses. Accurate details make it easier for USFHP members to find providers and improve payment processing. Update with a few clicks. Access the Demographic Change Form on the [Provider Portal](#).

 <p>Sign into your provider account</p> <p>Username <input type="text"/></p> <p>Password <input type="password"/></p> <p><input type="button" value="Sign in"/> <input type="button" value="Create account"/></p> <p><small>Forgot your username or password?</small></p> <p><small>For questions about how to use the portal, check out the guide here!</small></p> <p><small>If you still have questions please reach out to the health plan customer service for assistance.</small></p>	<p>WITHIN THE PROVIDER PORTAL, YOU CAN QUICKLY AND EASILY:</p> <ul style="list-style-type: none"> > Check Eligibility > Check a Claim's Status > Find a participating provider > View and request authorization status > Register or update electronic fund transfer (EFT) information > Update your provider demographic information <p>REGISTRATION IS EASY!</p> <p><small>If you need assistance with registering, logging in, verifying eligibility, or another task, use the guide here!. Please note, to enroll, you will need your 9-digit TAX ID or 9-digit EIN, along with an NPI.</small></p> <p><small>If you have additional questions, please reach out to (800) 241-4848. We are available to assist you Monday - Friday 9 A.M. - 6 P.M.</small></p>
---	---



Save Time with Provider Portal

Provider Portal is your one stop shop to save you and your office staff time! It's simple, secure, and available 24/7 for registered providers.

In a matter of clicks you can....

- Check eligibility and claim status
- Find participating providers
- View and request authorization status
- Register or update Electronic Fund Transfer (EFT) details
- Download the Electronic Remittance (ERA) Enrollment Form
- Update Provider Demographic Information

Find Enrollment Forms Fast

Did you know **835 Enrollment Forms** are available on our website via the Provider Portal. Complete in two steps.

1. Log in to your provider portal and select "ERA enrollment form."
2. Send the completed form to Change Healthcare via Email or Fax.
 - a) Email: Batchenrollment@changehealthcare.com
 - b) Fax: (615) 885-3713

Register for Provider Portal in 1-2-3!



US Family Health Plan Trading Partner Enrollment Form

If you are a **provider** and plan to have a billing agent or clearinghouse submit any transactions on your behalf, you **do not** have to fill out this form. Please contact your billing agent or clearinghouse and have them complete this form.

Application Type*
Please choose a selection

Choose why you are submitting this application

Email Address*

Sign up for EDI

Providers, their billing agent, or clearinghouse are encouraged to **sign up for EDI**.

If you are a provider and plan to have a billing agent or clearinghouse submit any transactions on your behalf, you do not have to fill out this form. Please contact your billing agent or clearinghouse and have them complete this form.

1. Access the Provider Portal right on [USFHP's homepage](#) or directly at provider.usfhp.net
2. Click on Create **Account**, and follow the prompts to complete your registration.
3. Have your 9-digit Tax ID and NPI to complete enrollment.

Need additional help? Check out our [how-to guide](#) or call us at (800) 241-4848 during business hours, Monday-Friday, 9 a.m. – 5 p.m.



Visit us at www.usfhp.net

Like us on Facebook <https://www.facebook.com/usfhp.net/timeline>

