



Remote EMR Access Service Registration Form

Highmark Blue Cross Blue Shield (Highmark BCBS) partners with Wellpoint companies to administer certain services to Medicaid Managed Care (MMC), Health and Recovery Plan (HARP), Child Health Plus (CHPlus), and Essential Plan members. Please note, this information is specific to the MMC, HARP, CHPlus, and Essential Plan programs only.

Instructions: Complete all fields below and email this form along with any other documents based on your answers below to [Highmark BCBS Member Access](#).

Provider facility:
Street address:
City, State, ZIP code:
Phone:
Fax:
Office email:
Website:
TIN(s):
NPI number:
Insurance accepted: (Select all that apply.) <input type="checkbox"/> Commercial <input type="checkbox"/> Medicare <input type="checkbox"/> Medicaid
EMR system name:
Access forms required? (If yes, send forms when returning this document): <input type="checkbox"/> Yes <input type="checkbox"/> No
Provider list/roster available? (If yes, send forms when returning this document): <input type="checkbox"/> Yes <input type="checkbox"/> No
Location list/roster available? (If yes, send forms when returning this document): <input type="checkbox"/> Yes <input type="checkbox"/> No
Contact name:
Contact email:
Contact phone:
IT contact email (if different than above):
IT contact phone (if different than above):
Any providers or locations affiliated with your group but not in the EMR system? <input type="checkbox"/> Yes <input type="checkbox"/> No

providerpublic.mybcbswny.com

Wellpoint Partnership Plan, LLC provides management services for Highmark Blue Cross Blue Shield's managed Medicaid.

Highmark Western and Northeastern New York Inc. d/b/a Highmark Blue Cross Blue Shield is an independent licensee of the Blue Cross Blue Shield Association.

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Optional comments: