

How to Check Your Application Status Online

One benefit of the CAQH application process is that Credentialing Entities will no longer have the need to make such repetitive contact with you and your office staff; *this frees up your staff's time and saves on office administration costs!* In fact, the only additional contact that may be required is for us to request clarifications or up-to-date documents. And if your application is "clean", it is possible that the next correspondence you receive from BCBSNE is your acceptance letter after the Credentialing Review has been completed. Please refer to the [Credentialing Timeline](#) for estimates of how long you can expect the Credentialing Process to take.

To check your application status, log onto CAQH and navigate to [Your Activity Log](#).



Your Activity Log

Select this button to view account activity.

APPLICATION STATUS TYPES

Initial Outreach

CAQH has sent your Welcome Kit to the address you gave on the Request to Participate Form; it should be arriving very soon in the mail.

Alternate Outreach

CAQH did not hear back after sending your first Welcome Kit. If there is another address possibility, they will attempt to send it to this "alternate" outreach address. **If you see this status, contact CAQH to ensure your address information is accurate.**

Application Data Submitted

You've filled out the online application, but CAQH is still waiting for you to submit the required "supporting documents." **The application will not be forwarded to BCBSNE until this supporting documentation is received by CAQH.**

Application Problem

CAQH has received your application data and the supporting documents, but something is missing or illegible. **Follow-up with CAQH would be required before moving forward with the Credentialing Process.**

Initial Application Complete

CAQH has received all your "supporting documentation" and your online application looks like it's good to go. CAQH will send us your completed application within seven (7)

days. **If you have not authorized BCBSNE as an entity that is allowed to view your online application, CAQH will not send the application to us.**

Reattestation

This means that you've successfully updated and re-attested to your online application data and that no action is currently required on your part. After you initially fill out the online app, re-attestation is required at least once every four (4) months. You will get **e-mails** advising you when it is time to re-attest.

If you are already enrolled in CAQH and have a completed online application, but are now applying to BCBSNE for the first time, please be sure that your CAQH status shows REATTESTATION before submitting your Request to Participate Form to BCBSNE.

Expired Attestation

Your application data is out-of-date! We cannot use the current application data to process your Credentialing.

Undeliverable

CAQH has tried both the Primary and Alternate mailing addresses to send your Welcome Kit but has not heard back from you. If supplied on the Request to Participate Form, they also attempted to reach you via e-mail and/or fax but could not.

Returned Mail

CAQH sent your Welcome Kit to the address on your Request to Participate Form, or an alternate outreach address they had on file. In both/either case, the mail was returned by the USPS stating that the address does exist, but the particular person the mail was addressed to is no longer at that physical location.

Retired

This status indicates that an Office Manager, spouse, etc. has advised CAQH that you are no longer practicing medicine. If this is not the case, contact CAQH immediately.

If your online status notes that your application has been completed and accepted by the CAQH system (Initial Application Complete or Reattestation), and it has been at least seven days since the application was placed in that status, and you have reason to believe there may be an issue with your application, you can contact our

[Credentialing Department](#) for further assistance. In order for us to obtain your application status, the following information must accompany your request:

- Provider name (First M Last)
- Provider specialty Type (ex: MD, PT, LIMHP, etc.)
- Provider SSN (How we locate the provider's database folder)
- Date application was submitted
- Method application was submitted (if other than CAQH)
- Contact person's name, phone number and e-mail address