Minnesota Uniform Practitioner Change Form Instructions



Please make sure:

- You have completed the most recent Minnesota Uniform Practitioner Change Form. The newest form is dated March 2020.
- All items have been addressed on the Minnesota Uniform Practitioner Change Form. Incomplete forms will delay processing time.
- You have all supporting documentation available to send with the form, for example, the
 practitioner's current license. Failure to submit documentation could delay processing time.
- If a practitioner is a Hospitalist only and won't be working in a clinic setting where patients can make direct appointments with them, nor will they be doing any Urgent Care work, check 'Hospitalist' on the form.
- Locum tenens will not be added. Per Blue Cross Blue Shield of Minnesota's Provider Policy and
 Procedure Manual Section 11-38, the definition of a locum tenens is a substitute physician who takes
 over another physician's practice when that regular physician is absent for specific reasons. Those
 reasons include illness, maternity leave, military duty, or sabbatical. Please submit claims under the
 absent physician's provider number or NPI with a Q6 modifier.

Please submit this completed form and any supporting documentation to Provider Data Operations. It would also be helpful to generally indicate in your email or fax to us what type of change you would like to make, for example, "suppressing a practitioner from the provider directory":

Processing:

For requests to add practitioners, once the request has been processed, you will receive notification via email. This notification alone does not indicate that the provider for whom this practitioner is working is contracted as a participating provider. A Participating Provider Service Agreement must be in effect and fully executed by Blue Cross and Blue Shield of Minnesota and the provider in order to be a participating provider. Participating providers will have received countersigned signature pages from Blue Cross and Blue Shield of Minnesota indicating the participating status effective date. You may begin submitting claims for practitioners 2 days after receiving notification of them being added.

Please allow up to 90 days for the processing of completed requests. Submission of incomplete requests will delay processing time.

Complete and save this form, then email to:

provider.data@bluecrossmn.com

Or mail to:

Provider Data Operations PO BOX 982809 EL PASO TX 79998-2809

If you have any questions, contact Provider Service at (651) 662-5200 or 1-800-262-0820