

To: AmeriHealth Caritas & First Choice Next Providers

Date: July 18, 2023

Subject: Provider Data Information Form (PDIF)

The Provider Data Information Form attestation feature is available in the secure provider portal, NaviNet. This feature allows you to review your provider directory data that we have on file, attest to the accuracy of the information, and make any necessary changes.

You are required to review current provider directory data as it is listed in the directory and submit updates or corrections via the PDIF link on NaviNet. The request for validation occurs every 90 days.

There are many advantages of managing an electronic Provider Data Information Form and we have highlighted a few of those below:

- It promotes more accurate provider directory data for our members, your patients, and potential members and patients.
- It facilitates compliance with the No Surprises Act requirement to validate provider data every 90 days.

Please note: You will be given 30 days to attest to the accuracy of Information or submit any changes. Failure to respond in the specified time frame may result in the removal from our provider directory until you validate your data. The validation process is ONLY utilized for AmeriHealth Caritas & First Choice Next, our Medicaid products are excluded from this process.

- Log on to NaviNet.
- Select appropriate Health Plan (AmeriHealth Caritas Next)
- Click the **Provider Data Information Form (PDIF)** link.
- On the **Provider Selection** screen, click the **“Please Select a Provider”** menu and select a **Provider, and hit “Submit”**.
- You will be taken to the **“Provider Self Service”** screen; in the bottom right portion of the page, click the box entitled **“Proceed to Provider Updates”**.
- Click the box entitled **“PDIF Update”**



- Click the **Location Selection**
- Click the box for the provider(s) for whom you want to attest and/or make changes and click the “Next” box in the bottom right portion of the page
- Review and make changes to the practitioner summaries, if applicable
- Provide **Required Documentation**, if applicable.
- **Attest** and click the “Next” box in the bottom right portion of the page

Provider directory data changes will be reflected within the online provider directory within 14 business days. If the change is not reflected in 14 business days, please contact your Provider Network Management account executive.

For additional guidance on this feature, please call your state’s AmeriHealth Caritas Next Provider Services department.



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