



5225 Canyon Crest Dr. Ste 71-419
Riverside, CA 92507
aneel@harvestmedbilling.com
PH: 949-259-5900 FAX: 833-393-6787

Dear Provider,

Welcome to Harvest Medical Billing. Our team provides thorough and comprehensive billing services; everything from submitting claims to collecting outstanding co-pays. Our goal is to make the payment process as streamlined and clear as possible, so everyone enjoys their experience. We offer a few different service packages; please give us a call to discuss how we can tailor our services to your practice needs.

We look forward to working with you,

Sincerely,

Aneel Kelly, Chief Executive Officer



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Dear Provider,

We are so excited to work with you! To get started, we will need you to complete the following forms and fax or email it back to our office with copies of the following:

- Updated CV
- Medical License
- DEA License
- Driver's License
- Board Certification (if applicable)
- Malpractice Insurance

Full Name: _____

DOB: _____

SSN: _____

NPI: _____

CAQH ID: _____

CAQH Login Information: (If we are managing and updating
your CAQH Application)

Username: _____

Password: _____

PTAN: _____

Mailing Address: _____

Corp Name, Address and TIN/EIN:

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If you, or your corporation, are already credentialed with insurance companies please let us know which ones:

	Aetna
	Beacon/Value Options
	Blue Cross
	Blue Shield
	CalOptima
	Cigna
	Health Net/Managed Health Network (MHN)
	HMC Healthworks
	Humana
	Kaiser
	Magellan
	Medi-cal
	Medicare
	Multiplan
	United Healthcare/Optum
	Tricare

Other(s):



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If there are specific CPT codes, modifiers or add-ons you like to bill with, please let us know:

CPT Code	Modifiers	Add-ons