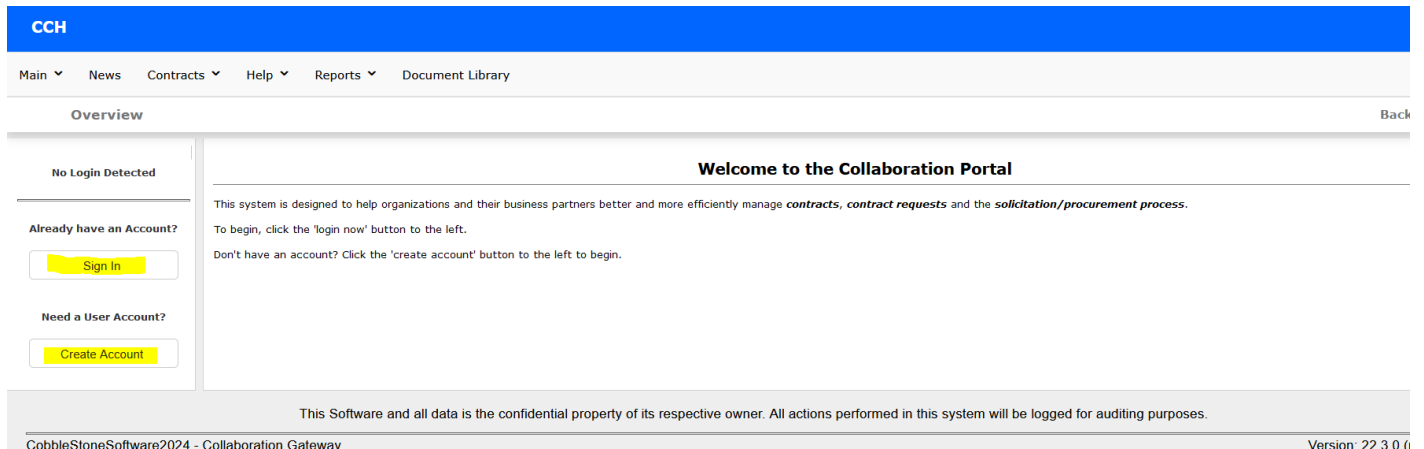


CountyCare Join Our Network Process

Start the contracting process by accessing the vendor client gateway with this link:

<https://cookcountyhealth.cobblestone.software/gateway/>

To create a new provider account, click “Create Account” in the bottom left portion of the screen. Existing providers will need to select “Sign In” and use their credentials.



Enter the required information in the “Company Information” tab and select “Continue” at the bottom to advance to the next page.

The screenshot shows the "Company Information" form. The form is titled "Please enter your company information below. If not applicable, please enter N/A." and has a progress bar at the top with "Company Information" selected, "User Information", and "Finish". The form is divided into several sections: "Details" with fields for Practice Name, Other Notes, Active (Yes/No dropdown), Doing Business As, TIN, NPI, and Medicaid ID; "Address and Contact Information" with fields for Street1, Street2, City, State/Province, Postal Code, Country, Phone, Fax, and Primary Contact Name; "Gateway Log-In" and "Record Info" sections. A yellow "Continue" button is highlighted at the bottom of the form.

Next, fill in the required fields within the “User Information” tab. After doing so, click the check box to agree to the terms and conditions. Then click “Save” at the bottom of the page.

New Account Signup

Please enter your company information below. If not applicable, please enter N/A.

Company Information User Information Finish

Details

*First Name Maik	*Last Name Smallwood	*Username
*Password	*Phone	Title
*Email		

I have read and agree to the [Terms and Conditions](#).

Save

After signing up, you'll be presented with the account signup confirmation message. Now you'll be able to click "Sign In" on the left side of the page using the account you just created.

Once you're logged in, you'll be brought to the "Collaboration Portal Overview" page. This page will have the instructions for the provider on the requirements needed for submitting the contracting request.

To submit the contracting request, in the top menu select "Requests," then select "Create New Request."

To view previously submitted requests, select "View Requests."

***The provider will automatically be activated in the gateway after creating their account. This activation could take up to 5 minutes at most. The system runs on a scheduler and depending on when the account is created will determine how soon the activation occurs. Until the account is activated the provider will be unable to submit the request. Once again this would be 5 minutes at most. ***

CCH

Main ▾ News Contracts ▾ My Dashboard **Requests ▾** Contacts/Users ▾ Electronic Documents ▾ Help ▾ Log Out Reports ▾ Document Library

Home

Create New Request
View Requests

Welcome Malik Smallwood

Collaboration Portal Overview

Hello, please read below to join the CountyCare Network:

1. Click the "Request" drop down and populate the required fields
2. Provide a current signed W9
3. Click on the link below or type it in your search engine to access the Universal IAMHP Roster Template:

[Illinois Association of Medicaid Health Plans \(iamhp.org\)](http://Illinois Association of Medicaid Health Plans (iamhp.org))

Your organization is out of network and services should not be provided to CountyCare members until you receive notice of your in-network status.

Prior authorization is required if services need to be rendered to our members prior to your becoming in-network. Waiver providers must request a service plan

Logout

Refresh

In the drop down, select the “Provider Agreement” request type. After selecting the request type, fill in the required information for the request. Once completed, select “Save & Continue” at the bottom of the page.

Create Request By Type

Requests: [New Request](#)

Details

*Practice Name Test Gateway Company ▾	*Contact Name Malik Smallwood	*Contact Email msmallwood@cobblestonesystems.com
*Contact Phone 732-400-4784	*Billing NPI 	*Billing TIN
*Legacy Medicaid ID 	*BEP Provider -- Select One -- ▾	*Hospital Affiliations Y/N? -- Select One -- ▾
Hospital Affiliations 	*Services 	*Number of facilities from roster
*Number of groups from roster 	*Number of PCPs from roster 	*Number of specialists from roster

Record Info

Requested By Provider Test Gateway Company ▾	Date Entered 9/27/2024 3:01 PM
-------------------------------------------------	-----------------------------------

Save & Continue

Once the record is created, the provider will then be able to upload the necessary documentation in the files/attachments table. They can either select “Browse” to open the file explorer or drop the files in the blue bar.

Important note on roster submissions

Prior to submitting your organization's completed Universal IAMHP Roster to CountyCare, provider groups are required to submit rosters through IAMHP's Pre-Submission Roster Validation Tool located at the link below.

Failure to submit a validated roster will result in a rejection requiring your organization to resubmit your request to join - delaying the contracting process. Please ensure you are submitting only IAMHP validated rosters to CountyCare.

[Illinois Association of Medicaid Health Plans \(iamhp.org\)](http://iamhp.org)

Attached Files, Documents, Images

There are currently no files/attachments on this request.

Upload File(s) Info.

Description:

File Category: -- Select File Category --

Single File Upload: