CareFirst
Family of health care plans

Council for Affordable Quality Healthcare (CAQH) ProView

MEDICAL DATA SHEET

The purpose of the CAQH ProView Application is to eliminate the need for individual credentialing applications for each individual insurance company and allows electronic access to the credentialing documents.

Step 1: Go to **CAQH ProView** and complete the online credentialing application.
Already have a CAQH ID? Please indicate it here. _____

Step 2: Complete this form and fax it to Provider Information & Credentialing at **410-872-4107**.

Step 3: CareFirst will begin the credentialing process.

Last Name	**First Name**		**M.I.**
Date of Birth	**Social Security #**		
Degree	**License #**		**State**
Practice Name			
Street Address			
City		**State**	**Zip Code**
Telephone #	**Fax #**		
Email	**Tax Identification #**		

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