

BLUE CROSS VT CAA DIRECTORY VALIDATION

Update: June 22, 2026

Version 11

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WHY CAA DIRECTORY VALIDATION?

- Maintaining accurate provider information is critically important to ensuring our provider directories are up to date and our members can access care with ease.
- Other providers, including out of State providers use the directory to refer members for specialty care.
- The Consolidated Appropriations Act (CAA) mandates this verification process, and we also must perform this verification to maintain National Committee for Quality Assurance accreditation.

DETAILS ABOUT THE CAA DIRECTORY VALIDATION

- They are sent by email quarterly: January, April, July and October
- Address email is sent from: noreply@onbaseonline.com
- Subject Line: BlueCrossBlueShield of VT Directory Validation

Example:

From: noreply@onbaseonline.com <noreply@onbaseonline.com>
Sent: DATE
To: Email address provider has on file with Blue Cross VT
Subject: BlueCrossBlueShield of VT Directory Validation

Notes:

- Each billing NPI will receive a directory validation email
 - Directory validations are not sent to individual providers, unless they are solo/private practitioners
- If you have one billing NPI but have multiple specialty types, you may receive multiple directory validations. For example, if you are a medical practice but have mental health and substance use providers all under one billing NPI, you will receive two validations, one for the medical and one for the MHSUD.
- The directory validation is sent to the current email address on file identified as your enrollment and credentialing email contact

WHAT NEEDS TO BE DONE

Validation **must** occur within 30 days of receipt, the email you receive will provide the exact date

We have created “Four Easy Steps to CAA Directory Validation” that can be referenced for step by step instructions:

www.bluecrossvt.org/sites/default/files/2025-09/CAA%20Directory%20Validation%20Instructions%20-%20FINAL%20-%20Publication%2009.23.25.pdf

WHAT NEEDS TO BE DONE

- The email contains a link unique to a specific billing NPI number, you need to click on the link
 - Google Chrome works the best
 - This is not a mobile application please use a computer
- Each affiliated provider with the billing NPI will be listed. Review each affiliated provider and details and click the appropriate box(es) for changes. If no changes, make sure to click “No Changes”

If you need to make a change, please check off the appropriate box

Provider Name* Practice Name* Provider Address* Provider Phone* Digital Contact* Accepting Patients* Hospital Affiliation* Taxonomy*
 Provider Specialty* Provider Terminated* All* No Changes*

- There will be one listing without a provider name, this is for your practice, you must validate those details as well

NOTE: Some changes will require additional documentation

WHAT NEEDS TO BE DONE CONT'D

- Lastly, you must check the box with the red asterisk and click the Save/Submit button:

By checking the box below, I certify that I am an authorized agent of the practice listed above and that the above information is complete and accurate, and I agree.

 *

Save/Submit

Reminders:

- Only providers marketed in the on-line provider directory will show on the report - <https://www.bluecrossvt.org/find-doctor>
- All practice types (groups and solo practitioners) must validate information

YOU ARE SET!

Once you click the save/submit button you will receive a message:

“Thank you for your response. Once you close out the browser window your submission is finalized. This is your proof of submission, which you can print and store with your records. No follow up is necessary. If there are any issues, we will outreach to you directly.”

Close out your browser window and you are set!

If you do not receive the message above, something was not completed, please go back and review. It could be that you missed the validation of a provider.

TIMEFRAMES

- You **MUST** complete the CAA Directory Validation within 30 days of the receipt of the email. If you do not the following actions are taken:
 - Practice and affiliated providers are removed from on-line provider directory
 - **Denial of Claims (see next slide)**
 - Could result in termination of contract

- If you identify incorrect information and update in the link the changes will show approximately 5 business days unless additional paperwork is required to make the change.

DENIAL OF CLAIMS

Practices/providers have 30 days each quarter in which to validate directory information, if that does not occur, then claims are denied and will continue to deny until the time directory validation is complete. Below is the schedule:

CAA Released	CAA Validation (specific date will be in email)	Claim Denials
January	By the first of February	March
April	By the first of May	June
July	By the first of August	September
October	By the first of November	December

Note: If a practice/provider received claim denials due to failure or incomplete validation, upon completion of their validation, the practice/provider must submit denied claims from that period of time for consideration of benefits. Timely filing guidelines are applied.

DIDN'T RECEIVE THE EMAIL?

- Check your “junk” or “spam” email files
- Proactive: You can add noreply@onbaseonline.com as a “friend” or “allowed” email address

If you are still not able to locate, email CAA@bcbsvt.com or call provider files at (888) 449-0443 option 2

WHO TO CONTACT

- If you have questions about the process, contact your Provider Relations Consultant – providerrelations@bcbsvt.com or (888) 449-0443 option 1
- If you have questions about the details related to the CAA validation link
 - Email CAA@bcbsvt.com or call provider files at (888) 449-0443 option 2