From: OBNotification@caresource.com

Date: December 17, 2020

To: JPOLLEY@TRANSFORMATIONSLLC.NET

Time: 1:26 pm

Subject: CareSource® - Onboarding Application 165234 Submission Complete

Size: 6.7 KB

Thank you for your submission to become a CareSource Provider. The Onboarding form you submitted has been received. Please note your application number in the subject line of this email.

Review of your On-Boarding application will now begin. If your application is approved, the contract will be emailed to the signatory on file. You will need to accept the terms of the contract by providing your electronic signature.

If your submission requires clarification, additional information or is incomplete, you will receive an email notification or a Credentialing Coordinator will contact you within 21 days. To check on the credentialing status, please call 800-488-0134 ext 7235.

Please close the web browser window or current active tab.

Thank you,

CareSource Health Partner Services

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