





How do I add a new provider to the network?

Notify us as soon as possible with the provider's name, NPI number and CAQH ID or an Illinois/Iowa Universal Credentialing application via email to <u>mahpcredentialing@mahealthcare.com</u>. Before sending the provider's information please make sure that the CAQH application has been recently attested to and the most current DEA and malpractice insurance certificates are attached to the application. Please include all locations for which you bill for a provider to see our members

What happens after the provider's information is submitted?

The credentialing process is started. We will electronically download the application from CAQH and review the application for any gaps in work history, the malpractice history and also verify license(s), DEA, hospital privileges, education, and malpractice insurance. If we have any questions or need additional documentation, one of our staff will be in contact with you.

Upon receipt of this information, a credentials review will be conducted to ensure compliance with standards. In the event that information on the application varies significantly from information provided by verification sources during the credentialing process, we will contact you. You have the right to review information obtained to evaluate the application and will be provided with an opportunity to review and correct any discrepancy by sending a written response clarifying the discrepancy within 30 days from the date of notification. A letter will be sent documenting receipt of the correction.

All credentialing information will be kept in the strictest of confidence, except as otherwise allowed by law, and utilized only to meet the requirements of our quality assurance programs. At any time during the credentialing process, you may request information regarding the progress of this application by contacting us at <u>mahpcredentialing@mahealthcare.com</u>.

Credentialing will review the information received for disciplinary actions, hospital privilege status, and malpractice suits. For all new providers, claims shall not be submitted until after the provider is approved by the Credentialing Committee who meets the third Tuesday of the month. The Committee will review the files and approve or deny participation.

Will I be notified of the decision for my new provider?

Yes you will be notified within 10 days of the Credentialing Committee meeting by email for approved providers. In the welcome letter information is included to list the effective date of the plans the providers is considered participating. The provider will also be included in the provider directories

Should an individual not be appointed/reappointed as a Participating Practitioner, the procedure outlined for practitioner denial, Administrative Policy and Procedure 18A, will be followed. A letter of explanation will be sent within 60 calendar days of the decision by the CEO and will include instructions for the Fair Hearing and Appellate Review Procedure outlined in PP 18B. A copy of the letter, along with all of the application materials, will be kept on file in the provider's Credentialing file.

I have a provider filling in for another provider, do I need to credential my locum tenen?

No we do not credential Locum Tenen providers. To set up a Locum Tenen Provider, please complete the Locum Tenen form on the provider page of the website under Provider Participation Documents. https://www.mahealthcare.com/pdf/mahp/Locum_Tenen_Provider_Form.pdf

Do you review providers again after they have been initially credentialed?

Yes, providers are reviewed/recredentialed every 2 ½ years. The provider's recredentialing application will be downloaded from CAQH. If the application is expired on CAQH or they do not have a CAQH application, a paper application will be sent via email for the provider to complete or ask that you update their CAQH application. Updated copies of the provider's DEA (if applicable) and malpractice insurance certificates are also needed.

How do I add or term a location for my providers?

Please send the following information for a new location:

Group NPI, Location Name, Address, City, State, Zip Code, Phone number and the providers practicing at the new location. Notification of a new or terminated location can be emailed to <u>mahpcredentialing@mahealthcare.com</u>.

What if I have billing information changes?

If billing information changes, please email the current and changed information with an effective date, and include an updated W9 form to <u>mahpcredentialing@mahealthcare.com</u>.

What do I need to do if I have a provider leave my practice?

Please provide a 30-day notice of a practitioner leaving if possible. Please email the provider's name, NPI and last day worked to <u>mahpcredentialing@mahealthcare.com</u>. Upon receipt of the information the provider will be removed from the provider directories and terminated in the claims payment system.

How do we know that our information is current and up-to-date with the Health Plan?

We will electronically send a Site Questionnaire quarterly. It is a pre-populated Questionnaire with the provider information by practice. This information will need to be verified within two weeks of receipt... If we do not receive the Questionnaire back, we will be removing the providers from the provider directories and the providers will no longer be participating until the questionnaire is returned.

How are we notified of any changes happening within the Health Plan?

We send quarterly newsletters with information on updates regarding claims, pharmacy, authorizations, Credentialing, etc. Please share this newsletter with providers and appropriate staff as this holds valuable information.

How do we know what the processes are for Claims submission, authorizations, etc?

Please refer to the Provider Reference Guide which is updated annually. This can be found on the provider page of our website. <u>https://www.mahealthcare.com/insurance/provider</u>. The password will be sent once contracting is complete. This contains valuable information regarding Member cards, claims submission, Credentialing, authorizations, etc.