Network Participation Project



Problem Statement

- Providers have expressed frustration with the credentialing process
 - Too slow
 - Lack of communications
 - Repeating the process

Providers intermix credentialing, enrollment, and contracting



Network Participation Process

- There are three distinct processes that make up the network participation process:
 - Enrollment
 - Credentialing
 - Contracting



What is Enrollment?

- The practice of validating the following:
 - Active provider licensure
 - Exclusion status of a provider and any person with an ownership or controlling interest
 - Active National Provider Identifier (NPI)
 - Any other State-specific requirements

Primary Source of Rules = 42 CFR 455

Enrollment =
allows the Medicaid
program to pay
providers



What is Credentialing?

- Verification of individual practitioner elements:
 - DEA registration
 - Education and training
 - Work history
 - Board certification status (where applicable)
 - History of professional liability claims
- Review for sanctions or convictions
 - Medicare/Medicaid sanctions
 - Licensure sanctions

Primary Source of Rules =
National Committee for Quality
Assurance (NCQA)

Credentialing =
allows the MCEs to
verify the qualifications
of individual
practitioners or
organizations

What is Contracting?

The agreed upon rules between a provider and an entity

- Health Plan = Contract
- IHCP = Provider Agreement



Provider Experience Today

IHCP and MCE Enrollment, Credentialing and Contracting



*Note: Order of processes may vary or overlap depending on MCE.



EnCred Project

Goal: universal credentialing solution

• Current Status: Retired (June 20219)





IHCP Listens - Credentialing



IHCP Listens Sessions: Workgroups Interviewed

Provider Group/Association	Date	Participants
Indiana Hospital Association	January 26, 2021	14
Indiana Dental Association	January 28, 2021	11
Indiana Association for Community Mental Health Centers	February 15, 2021	50
Previous EnCred Participant Group	February 22, 2021	15
FSSA LTSS Workgroup: Credentialing	March 22, 2021	5
Indiana Health Care Association	April 13, 2021	10

Additional discussions were held with individual providers throughout February and March.



Primary Concerns

Credentialing standards are not an issue

Main Concern Areas

- Timeframe for completion
- Communication with the health plans
- Enrollment forms
- Effective date



Network Participation Review Project

- Three central components:
 - Development of a new quarterly performance report
 - Formal desk review of health plan process
 - Live sample audit of enrolled providers



Quarterly Report

- "Timeliness to complete requests to join provider network request"
 - Completed (fully enrolled, credentialed, and contracted)
 - Denied (due to credentialing, enrollment, or contract dispute)
 - Still pending
 - Average turnaround time

OMPP received its first report in October 2021



Formal Desk Review

Full end-to-end demonstration of the network participation process

- Asked for the following information:
 - All step-by-step information for the process (from provider's perspective)
 - All maps and screenshots of the process (from the health plan's perspective)
 - All communications provided throughout the process

Live Sample Audit

Health Plan	Overall Status
Anthem	
CareSource	
MDwise	
MHS	
UHC	

Meaning	Color
Minor concerns	
Moderate concerns	
Major concerns	



Summary of Key Areas/Themes



Variation Among Enrollment Forms

	Professional	Facility/Ancillary
Anthem	Provider Maintenance Form (online)	IHCP MCE Hospital/Ancillary Provider Form
CareSource	New Health Partner Form (online)	Hierarchy Form
MDwise	IHCP MCE Practitioner Form	IHCP MCE Hospital/Ancillary Provider Form
MHS	IHCP MCE Practitioner Form	IHCP MCE Hospital/Ancillary Provider Form
UnitedHealthcare	Request for Network Participation (online)	Facility Credentialing and Recredentialing Application

NOTE: All health plans utilize the CAQH form for credentialing.

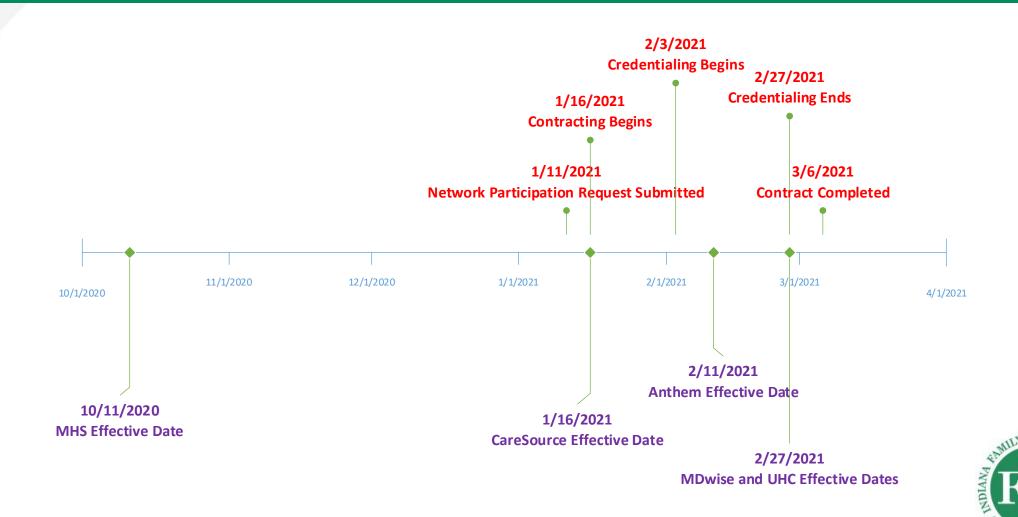


Differences in Effective Date Policy

	Effective Date Policy
Anthem	30 days moving forward from the date a Provider Maintenance Form is received
CareSource	Credentialing approval date (but will retro back to the date of a provider began contract negotiations for brand new contract)
MDwise	Credentialing approval date
MHS	New contract – contract effective date Existing contract – 90 days prior to date the request for participation is made
UnitedHealthcare	Credentialing approval date



Differences in Effective Date Policy



Other Key Areas

Welcome letter storage and delivery

Follow-up and status updates from the plans

Potential internal process gains



Final Requirements



Network Participation Process and Forms

MCE(s) Impacted	Requirement
All	The MCEs will provide a step-by-step process for how providers submit a network participation request. In addition, the MCEs need to clearly outline which network participation request form(s) need to be completed: • MCE-specific request form • IHCP Practitioner/Facility enrollment form Finally, the MCE shall include the most common issues providers make during network participation requests on the MCE's website.



Credentialing

MCE(s) Impacted	Recommendation / Requirement
All	The MCEs must outline the information necessary and steps required to
	be credentialed with the health plan, including what provider types and
	specialties require credentialing



Welcome Letter Standardization

MCE(s) Impacted Requ	uirement
prov • r • r The mai	a minimum, the MCEs are required to include standard language wided by OMPP in all provider welcome letters: network effective date effective date policy reference to provider materials e health plans are required to send out the welcome letter (either by ill or email) within five business days of the network participation occas completion.

Effective Date Policy

MCE(s) Impacted	Requirement
All	The MCEs must follow an OMPP-created standard network effective date policy for all network participation requests.
	The network participation effective date will be the 1 st of the month following a network participation request.
	This effective date should be followed for all provider types and for all delegated provider networks.



Central Repository for Network Participation Correspondence

MCE(s) Impacted	Recommendation
All	The MCE must have a central repository solution for all email and
	written communications that occur during the provider network
	participation process.
	 OMPP reserves the right as always to audit and view all
	correspondence that has occurred regarding a specific network
	participation request.



Network Participation Status Updates

MC	CE(s) Impacted	Requirement
All		The MCEs must assign - for each network participation request - a unique identifier that providers can reference when checking the status of their request. The unique identifier should be provided to the provider at time of the network participation request submission either
		electronically, via email, or via postal mail.



Process Efficiencies

MCE(s) Impacted	Recommendation
All	The MCEs will participate in an annual process improvement project to determine if there are key inefficiencies with any manual component of their process.

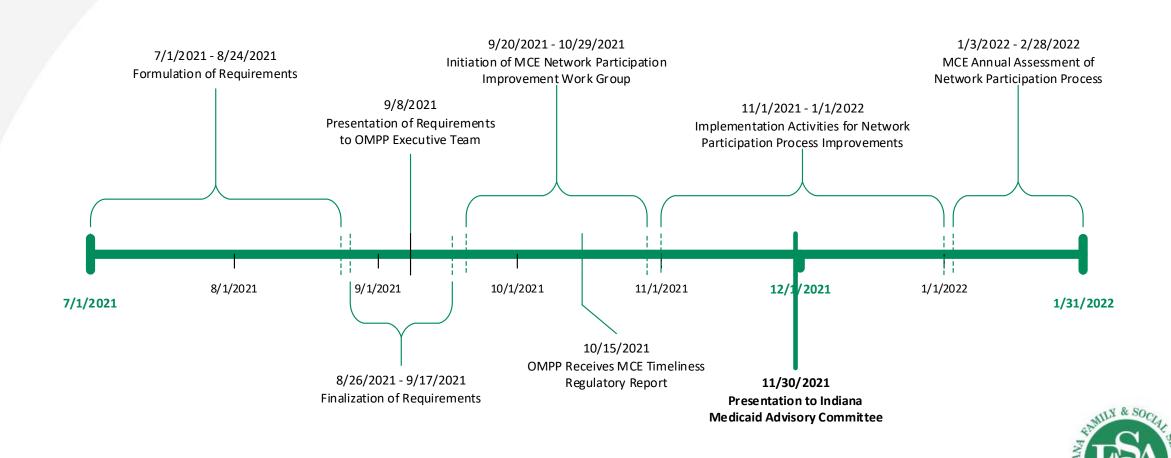


Quick Summary

Month	Requirement
December 1, 2021	 Step-by-step process for network participation Finalizing network participation request forms Credentialing standards
January 1, 2022	 Effective date policy Standardized welcome letter Central repository for network participation request correspondence



Provider Network Participation Process Improvement Timeline



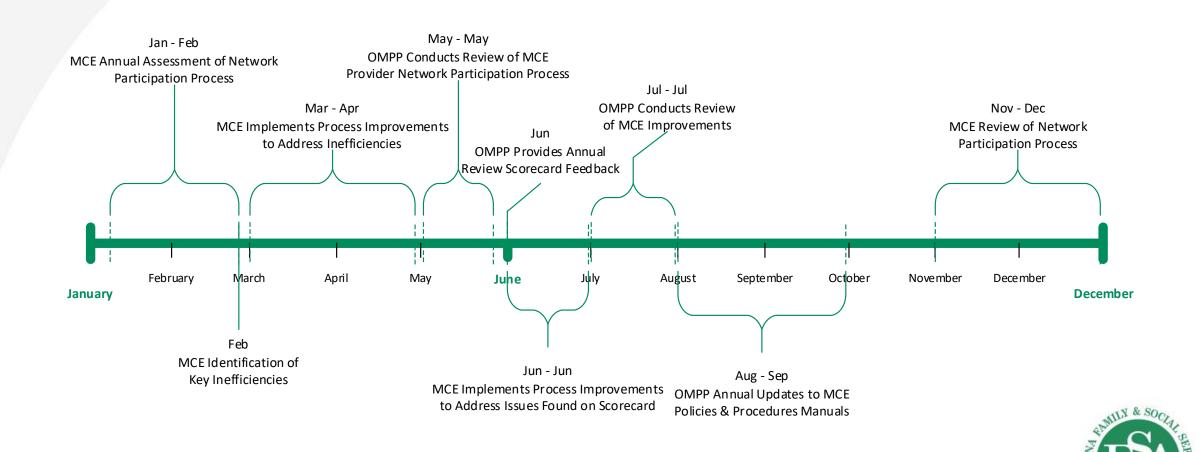
Next Steps

 MCE annual assessment – internal review to determine if there are any key inefficiencies in the network participation process

 OMPP annual compliance review – audit of all components of the network participation review process



Annual Assessment Activity Timeline (Example)



Thank you!

