



UnitedHealthcare Community Plan

2024 IHCP Works Annual Seminar

Enrollment with UHC

Presented by David Hoover, Provider Services Manager

PCA-03-24-01026-UHN-PRES_05282024

United
Healthcare

Agenda

1. How to Credential
2. How to Check the Status of Your Application
3. Network Effective Date Policy
4. How to Update Demographic Information
5. Open Network Status
6. Questions and Answers



Acronyms

- CAQH – Council for Affordable Quality Healthcare
- IHCP – Indiana Health Coverage Programs
- MCE – Managed Care Entity
- RFP – Request for Participation
- UHC – UnitedHealthcare
- HCBS – Home- and Community-Based Services
- FQHC – Federally Qualified Health Center
- RHC – Rural Health Clinic



Our Service Lines

- UnitedHealthcare
- Optum[®] Behavioral Health
- March[®] Vision Care
- UnitedHealthcare Dental





Medical

Participation in UHC Medical Provider Network

- UHC contracts providers in all specialties for its Hoosier Care Connect and Indiana PathWays for Aging provider network.
- Credentialing begins the process.
- Provider enrollment data in the IHCP and UHC's enrollment system must match.

UnitedHealthcare Community Plan of Indiana Homepage

[Bulletins and Newsletters](#)

[Care Provider Manuals](#)

[Claims and Payments | UnitedHealthcare Community Plan of Indiana](#)

[Eligibility and Benefits](#)

[How to Join the UnitedHealthcare network](#)

[Pharmacy Resources and Physician Administered Drugs | UnitedHealthcare Community Plan of Indiana](#)

UnitedHealthcare Community Plan of Indiana Homepage

We know you don't have time to spare, so we put all the UnitedHealthcare Community Plan resources you need in one place. Use the navigation on the left to quickly find what you're looking for. Be sure to check back frequently for updates.

Prior Authorization and Notification Resources

Current Policies and Clinical Guidelines

Provider Administrative Manual and Guides

UHCprovider.com/INcommunityplan



Provider Type Selection

- Click the appropriate provider type.
- Follow the instructions indicated in the Get Started section.

Ancillary Facilities	▼
Behavioral Health	▼
Dental Providers	▼
Health Care Professionals (excluding Specialists Listed Below)	▼
Home and Community Based Services (HCBS)	▼
Hospitals and Health Care Facilities (including Skilled and Long Term Care Facilities)	▼
Physical Health	▼
Vision	▼

Working with UnitedHealthcare

We encourage health care professionals to use with our online systems and resources. UnitedHealthcare is committed to making it easier for you to work with us, reduce the time it takes for you to perform claim and clinical activities, stay up to date on news and UnitedHealthcare updates – and ultimately, help you get paid faster.



How to Credential with UHC: Practitioners

- Practitioners use the “Request for Participation” or RFP Portal.
- Complete the online RFP in its entirety and submit.
- Make sure to include your CAQH number.
- Contact **Provider Services** Monday-Friday at **877-610-9785** from 8am-8pm EST with questions or to check status.


Join Our Network ^

Thank you for your interest in becoming a network provider with UnitedHealthcare Community Plan of Indiana. In joining our network, you'll become part of a group of health care professionals and facilities who share our commitment to helping Indiana Hoosier Care Connect members live healthier lives and making the health care system better for everyone.

If you have any questions, please contact Provider Services Monday through Friday, 8am to 8pm EST at 877-610-9785.

Step 1: Get started



The first step is to let us know you'd like to join our network – known as submitting a Request for Participation (RFP).

- Submit your request through our [RFP portal](#) 

To participate with UnitedHealthcare Community Plan and Indiana Hoosier Care Connect, you must also be enrolled in Indiana Medicaid:

- Indiana Medicaid [Provider Enrollment](#) 

Managed Care Entity (MCE) enrollment forms

- [IHCP MCE Practitioner Enrollment form](#) 
- [IHCP Hospital and Ancillary Provider Enrollment and Credentialing form](#) 
- [Instructions for Credentialing and Enrollment with IHCP Managed Care Entities](#) 



How to Credential with UHC: Practitioners (cont.)

- UHC will complete credentialing within 30 days of the receipt of your completed request.
- Practitioners must be enrolled with Indiana Medicaid.
- Go to the [IHCP Provider Healthcare Portal](#) to complete the IHCP enrollment application.
- Submit managed care information via the MCE Practitioner Enrollment form.


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To participate with UnitedHealthcare Community Plan and Indiana Hoosier Care Connect, you must also be enrolled in Indiana Medicaid:

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Managed Care Entity (MCE) enrollment forms

- [IHCP MCE Practitioner Enrollment form](#) 
- [IHCP Hospital and Ancillary Provider Enrollment and Credentialing form](#) 
- [Instructions for Credentialing and Enrollment with IHCP Managed Care Entities](#) 




How to Credential with UHC: Facility

- Complete the UHC facility application in its entirety and submit.
- Facilities must be enrolled with Indiana Medicaid.
- Go to the [IHCP Provider Healthcare Portal](#) to complete the IHCP enrollment application.
- Include the complete facility name, tax ID, NPI, CAQH ID, and description of request.

Step 1: Get Started

To begin the process

Submit your request to join our network through UnitedHealthcare's [Facility RFP portal open_in_new](#) 

The facility must also be enrolled with Indiana Medicaid. If you haven't already done so, complete your [provider enrollment open_in_new](#)

- NOTE: Federally qualified health centers (FQHCs) and rural health centers (RHCs) should use the practitioner enrollment form for each practitioner

A complete request to join our network must include:

- Active Medicaid ID obtained through IHCP
- [Completed UnitedHealthcare facility application form open_in_new](#)
- Proof of malpractice and general liability insurance
- W-9
- Specialty / Facility Type
- NPI
- Tax ID
- Physical facility address, including suite number if applicable
- ZIP code + 4
- Phone number
- Fax number
- Email address
- Website
- Billing Remittance Address
- Billing Phone Number
- Completed Provider Roster Template (FQHC/RHC only)



How to Credential with UHC: Facility (cont.)

- Contact **Provider Services** Monday-Friday at **877-610-9785** from 8am-8pm EST with questions or to check status.
- Submit managed care information via the MCE Hospital and Ancillary Provider Enrollment and Credentialing form.

Step 1: Get Started

To begin the process

Submit your request to join our network through UnitedHealthcare's [Facility RFP portal](#) [open_in_new](#)

The facility must also be enrolled with Indiana Medicaid. If you haven't already done so, complete your [provider enrollment](#). [open_in_new](#)

- NOTE: Federally qualified health centers (FQHCs) and rural health centers (RHCs) should use the practitioner enrollment form for each practitioner

A complete request to join our network must include:

- Active Medicaid ID obtained through IHCP
- [Completed UnitedHealthcare facility application form](#) [open_in_new](#)
- Proof of malpractice and general liability insurance
- W-9
- Specialty / Facility Type
- NPI
- Tax ID
- Physical facility address, including suite number if applicable
- ZIP code + 4
- Phone number
- Fax number
- Email address
- Website
- Billing Remittance Address
- Billing Phone Number
- Completed Provider Roster Template (FQHC/RHC only)



How to Credential with UHC: Physical Health Providers

- Physical Health providers will start with the credentialing process by accessing the [Optum Physical Health webpage](#).
- Or call Optum Physical Health at 800-873-4575.

Chiropractor, Outpatient Therapy Provider/Clinic (Physical/Occupational/Speech) or an Alternative Medicine Provider

If you work in one of these specialty areas, you'll contact a partner who handles credentialing and contracting on behalf of UnitedHealthcare: Optum Physical Health. (Note that alternative medicine providers (CAM) include acupuncturists, naturopaths and massage therapists.)

To get started, go to MyOptumHealthPhysicalHealth.com  or call 800-873-4575.



What Happens Next:

- We will review the network participation submission within 5 business days.
- Notification will be sent within 5 business days by mail or email if the request is accepted, or if additional information is needed.
- If the request is accepted, a unique ID number will be provided in the communication via email.
- The credentialing process will be completed within 30 days.



What Happens Next: (cont.)

- Within 5 business days of the completion of credentialing, a welcome letter will be issued with the provider's effective date.
- The provider will then be loaded and active across all systems.
- For questions, call **Provider Services** at **877-610-9785**, Monday–Friday 8 a.m.–8 p.m. EST.





HCBS

Eligible Providers

- Adult Day Services (Level 1-3)
- Adult Foster Care
- Assisted Living
- Attendant Care
- Community Transition Services
- Environmental Modifications
- Environmental Modifications Assessment
- Integrated Healthcare Coordination
- Home-Delivered Meals
- Homemaker
- Nutritional Supplements
- Pest Control
- Respite
- Self-Directed Attendant Care
- Specialized Medical Equipment Supplies
- Transportation
- Vehicle Modifications
- Person Emergency Response Systems
- Structured Family Caregiving



Initiating the Contract Process

Send your request to hcbsprovidernetwork@uhc.com and include:

- Provider Name
- Address
- Contact name and phone number
- Contact email
- Tax ID number (TIN)
- Medicaid ID number or Legacy Provider Identifier (LPI)
- Services the provider is certified for



Next Steps

- Our contracting team will send out a demographic form.
 - Please submit it in its entirety.
 - Include information for all locations and LPAs that you wish to contract.
- Our contracting team will review the form and attached information to ensure a clean submission. A request for additional information will be sent within 5 days if needed.
- Provider information submitted will be validated.
 - This validation compares what has been submitted to what is enrolled with Indiana Medicaid.
 - Please ensure services line up with each LPA and the exact address matches the state's information.
- Contract will be sent to the provider via Adobe Sign for signature and then submitted to be loaded.





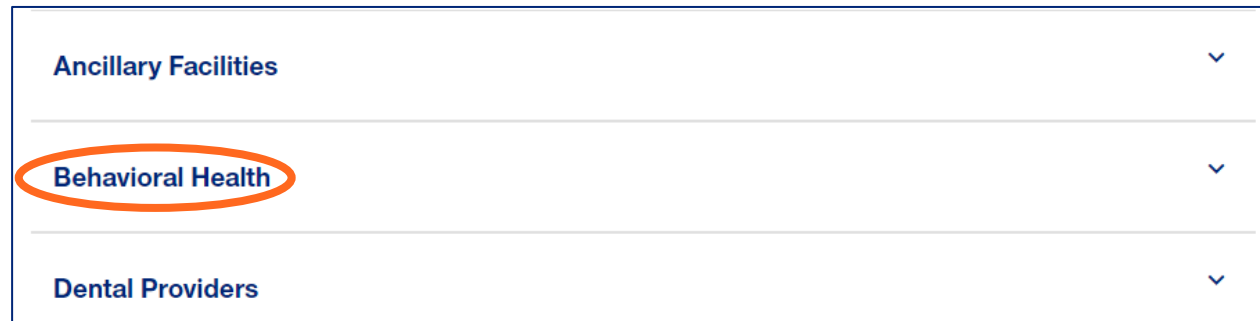
Behavioral Health

Provider Enrollment – Individual Providers



The screenshot shows the homepage for the UnitedHealthcare Community Plan of Indiana. On the left is a navigation menu with the following items: "UnitedHealthcare Community Plan of Indiana Homepage", "Bulletins and Newsletters", "Care Provider Manuals", "Claims and Payments | UnitedHealthcare Community Plan of Indiana", "Eligibility and Benefits", "How to Join the UnitedHealthcare network" (circled in orange), and "Pharmacy Resources and Physician Administered Drugs | UnitedHealthcare Community Plan of Indiana". The main heading is "UnitedHealthcare Community Plan of Indiana Homepage". Below the heading is a paragraph: "We know you don't have time to spare, so we put all the UnitedHealthcare Community Plan resources you need in one place. Use the navigation on the left to quickly find what you're looking for. Be sure to check back frequently for updates." Below this paragraph are three grey boxes with the following text: "Prior Authorization and Notification Resources", "Current Policies and Clinical Guidelines", and "Provider Administrative Manual and Guides".

UHCprovider.com/INcommunityplan



The screenshot shows a dropdown menu with three items: "Ancillary Facilities", "Behavioral Health" (circled in orange), and "Dental Providers". Each item has a downward-pointing chevron icon to its right.



Provider Enrollment – Individual Providers (cont.)

To begin the process	<p>This section applies to behavioral health practitioners, ABA providers and facilities. If you work in this specialty area, the process to join our network begins with Optum Behavioral Health. They handle credentialing and contracting on behalf of UnitedHealthcare.</p>
	<p>To start the network participation request process, go to Optum's Join Our Network page and click on the button associated with your provider type (e.g., individual Clinician, Agency, Facility, Autism/ABA).</p> <ul style="list-style-type: none">• Please complete all fields and submit all applicable information• Make sure all CAQH information is current and attested• Ensure all requested documents are current and accurate• Review the Optum Provider Express Onboarding Process for additional details
	<p>You must also be enrolled with Indiana Health Coverage Programs (IHCP). If you haven't already done so, complete your provider enrollment.</p> <p>A complete request to join the Optum Behavioral Health network must include:</p> <ul style="list-style-type: none">• Active Medicaid ID obtained through IHCP• Current CAQH application, with access granted to UnitedHealthcare• National provider identification (NPI) number• W-9• Phone & fax number• Email address• Physical address, including suite number if applicable• ZIP code + 4

Here's what happens next	<p>Optum Behavioral Health will quickly review your application. Within 5 business days, they'll notify you by mail or email if your request is complete or if they need additional information from you (see the list above outlining what must be included for a request to be considered complete).</p>
How to check the status of a network participation request	<p>If you have questions about the status of an Optum Behavioral Health request for network participation, call 877-614-0484. Please provide your One Healthcare ID for clinicians or your Provider Reference Number for agencies or facilities (provided at time of submission of your request for network participation) to facilitate checking status of your request.</p> <p>For individual practitioners, you can also use your One Healthcare ID to check status throughout the network participation request process using the Initial Credentialing Toolbar on the Provider Express website.</p>
Questions?	<p>If you have questions, call Optum Behavioral Health Solutions at 877-614-0484.</p>





Vision

Enrollment and Credentialing for March Vision Care



- To become a MARCH[®] Vision Care Provider visit: marchvisioncare.com.
- Click on “Join the Network” and complete the online MARCH Provider Application.

- **Enrollment:** To ensure you are eligible for Medicaid claims payment, please comply with the enrollment requirements for Indiana. The Affordable Care Act mandates that state Medicaid agencies require all furnishing, ordering, referring, and prescribing providers enroll as participating providers.
- **Credentialing:** All providers are required to complete an electronic Provider Credentialing Application or submit their CAQH and NPI numbers for credentialing. Providers must have an active Medicaid ID and be correctly enrolled with the state for each active practice location to participate.



Vision Provider Resources: March Vision Care



Reminder – Free COPE accredited CE courses now available: We now offer free COPE accredited CE courses to all providers. [Take a course](#) to get your CE credit today.

1/1

[Provider Resources \(marchvisioncare.com\)](http://marchvisioncare.com)



MARCHTMVIPTM
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DOCTORS & OFFICE STAFF

- [Join Our Network](#)
- [ICD-10 Information](#)
- [Compliance Information](#)
- [Provider Resources](#)
- [Training & Education](#)
- [Update Your Email](#)
- [Check Your Cred Status](#)

[CLICK HERE](#) ▶

HEALTH PLANS

- [Check Eligibility](#)
- [View Benefits](#)
- [Review Claims](#)
- [Access Reports](#)

[CLICK HERE](#) ▶





Dental

How to Enroll with UHC Dental

- UHC contracts providers in all dental specialties for its Hoosier Care Connect provider network.

UHCdental.com

- Select **Join Our Network**.



Dental Benefit
Providers

Medicaid ▾

Medicare Advantage ▾

Claims

News

Join our network

Resources ▾

Sign In ▾

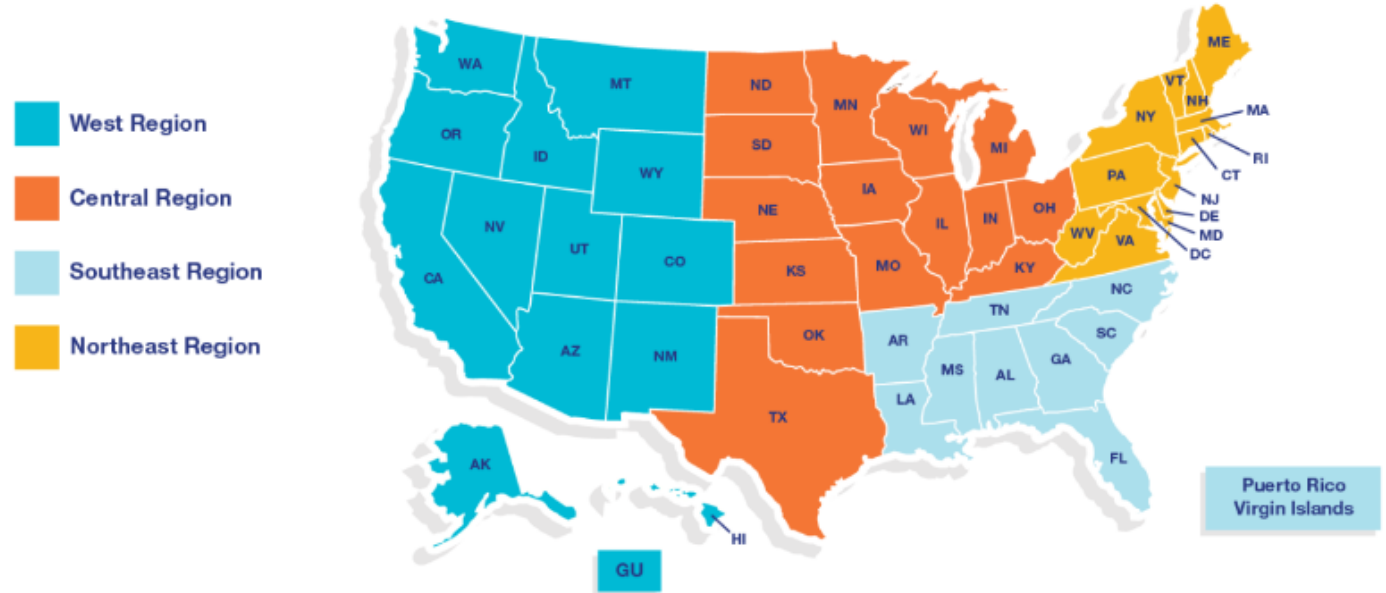
Dental Provider Portal | UnitedHealthcare



How to Enroll with UHC Dental (cont.)

Becoming a part of the UnitedHealthcare/Dental Benefit Providers network is easy.

1. Use the regional map to find your state and identify the correct regional location of your practice
2. Use the following list to select the appropriate region and contact us to request a provider packet
 - o West region: **Contact us**
 - o **Central region: Contact us**
 - o Southeast region: **Contact us**
 - o Northeast region: **Contact us**
3. Fill out the email completely. Consultants should attach their signed Letter of Authorization (LOA) indicating they are representing the practice(s).
4. Send to our team. Be sure to indicate your State and County in the email subject line.



Important note: Only requests to join our network are processed through this email address. If your request does not relate to a provider joining our network or a packet request, please reach out to us at **800-822-5353 for further assistance.*



Dental Credentialing and Re-credentialing

- To become a participating provider, all applicants must be fully credentialed and approved by our Credentialing Committee. In addition, to remain a participating provider, all practitioners must go through periodic re-credentialing approval (typically every 3 years unless otherwise mandated by the state in which you practice).
- For specific credentialing and re-credentialing questions, contact your assigned Provider Advocate or call **Dental Provider Services** Monday-Friday 8 a.m.-11 p.m. EST at **844-402-9118**.
- New providers are credentialed within 30 days.
- A welcome letter will be sent to the practice when credentialing is complete.



How to Check the Status of your Application

- UnitedHealthcare Dental offers two ways a provider can check the status of their credentialing application.
- Contact either:
 - Your assigned Dental Provider Advocate
 - **Dental Provider Services** Monday-Friday 8 a.m.-11 p.m. EST at **844-402-9118**





Network Effective Date

Network Effective Date Policy Creation

- UnitedHealthcare has adopted the effective date policy outlined in [BT2021104](#): IHCP establishes MCE network participation request effective date policy.
- Also see clarification bulletin [BT2021109](#): IHCP clarifies MCE network participation request effective date policy.



Network Effective Date Policy 1 of 3

- The effective date policy applies to any network participation requested received on or after Jan. 1, 2022.
- Under this policy, the effective date for **all health care professionals and facilities** will be the 1st of the month following the receipt of a **complete** network participation request, regardless of the contract execution date or credentialing completion date.
- To be considered complete, all required fields must be completed and all required supporting documentation must be provided.
- The UnitedHealthcare network effective date must be after the IHCP effective date, as required by the IHCP.
- If the provider is not enrolled and effective with the IHCP prior to submitting a complete participation request to UnitedHealthcare, the effective date will be adjusted to match the IHCP effective date.



Network Effective Date Policy 2 of 3

- The effective date policy applies whether the provider or facility is being added to an existing contract or is a brand-new provider who is not part of an existing contract.
- A facility or provider will not be fully effective until all credentialing and/or contracting activities are completed.
- Please hold all claims until the effective date on the welcome letter. This letter will be received when all steps are final.



Network Effective Date Policy 3 of 3

- Welcome letters will be sent within 5 business days of the completed request.
- This policy does not apply to any provider who enters into a delegation agreement.
- FQHCs and RHCs are eligible for earlier effective dates and are not held to the policy rule.





Updating Demographic Information

Update Demographic Information

- UHC provider data must always match Indiana Medicaid provider data.
- Indiana Medicaid provider enrollment data can be updated at: [Indiana Medicaid: Providers: IHCP Provider Enrollment Transactions](#).



My Practice Profile

- [My Practice Profile](#)
- New users must register and will be issued a One HealthCare ID.
- Self-paced tutorials are available on the UHC portal.
- Make enrollment updates with UHC through On Board Pro in our provider portal.
- Correct provider data helps ensure claims are processed accurately.

Home > Provider data updates and attestation > My Practice Profile


My Practice Profile


The My Practice Profile tool on the UnitedHealthcare Provider Portal lets you view, update and attest to the care provider demographic information UnitedHealthcare members see for your organization. Use the tool to make demographic changes just one time, in one place and get those updates into our systems more quickly.

Benefits and features

My Practice Profile makes it easy for authorized users to update the following information:

- Office address(es) and hour
- Phone, fax, email address, and website
- Provider accepting patients / panel status
- Telehealth service
- Provider date of birth
- Hospital and group affiliation
- Ages and genders served
- Languages spoken
- Specialty
- Area of Expertise
- View accepted health insurance plans and effective dates
- Add and remove physicians from your TIN
- National provider identifier (NPI) number
- Professional licenses and degrees
- Provider race and ethnicity
- Address affiliation

[My Practice Profile](#) 

Access the My Practice Profile [self-paced user guide](#). 





Open Network

UnitedHealthcare Community Plan has an Open Network

- While we have an open network, we will not require prior authorization (PA) for members to see out-of-network providers that are enrolled with the IHCP.
- PA is still required for inpatient stays and codes listed on our PA list found at [UHC Indiana PA page](#).
- Out-of-network providers are paid at 100% of the IHCP fee schedule for covered services.
- The out-of-network claim filing limit is 90 days from the date of service.





Appendix

Provider Service Line Website Links

- United Health Community Plan (Medical): uhcprovider.com/INcommunityplan
- UHC Dental: uhcdentalproviders.com
- March Vision: marchvisioncare.com
- Optum Behavioral Health: [Provider Express – Indiana Medicaid](#)





Thank you

Questions?

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United
Healthcare