

**PACHC Memo 13-06**

**Updated September 16, 2014**

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**Human Resources**

November 25, 2013

**TO:** Chief Executive Officers of Pennsylvania Community Health Centers 16-pt FQHC color.JPG, Rural Health Clinics & Critical Access Hospitals

**FROM:** Cheri Rinehart, President & CEO

**SUBJECT:** Credentialing

**SUMMARY:** PACHC has received feedback from many health centers on the challenges of timely credentialing. In response, PACHC has worked with the PA Department of Public Welfare (DPW) to create a process to expedite credentialing by that agency and is working with DPW to improve managed care organization (MCO) credentialing time frames. In addition, the PA Primary Care Career Center has gathered information on the Council for Affordable Quality Healthcare (CAQH), which offers a central system to improve credentialing efficiency and streamline processes that might be an effective way to expedite MCO credentialing.

**BACKGROUND:**

Timely credentialing is important to maintain access to care and the financial integrity of health centers. Last year, DPW, because of the confluence of a variety of issues, saw the time from application to issuance of a PROMISe identification number increase substantially, and health centers felt the impact. Since Medicaid MCOs will not initiate their credentialing process in the absence of a PROMISe number, MCO credentialing time frames also increased substantially.

**CURRENT STATUS:**

In response to the credentialing challenges health centers were facing, PACHC worked with DPW to develop a process for health centers to request expedited credentialing. DPW has been responsive to these requests and the process has been effective. However, timely MCO credentialing remains a challenge, and even more so because unlike DPW, MCOs will not pay retroactively to the date of application.

PACHC has raised the issue of timeliness (or lack thereof) of MCO credentialing with DPW and the financial strain it is putting on health centers. DPW has convened the MCOs to discuss this issue and has also conducted an MCO credentialing survey. We continue to urge DPW to hold the MCOs to credentialing benchmarks, but to date they have been reluctant to do so, although they are now collecting data and meeting with MCO representatives on this issue.

DPW is also looking at the implications of a recent appellate court decision in favor of New Jersey health centers, which at its core says that MCO approval of payment for an encounter is not a prerequisite to it being an eligible encounter. The court ruled that federal law requires that FQHCs receive timely, full wraparound payments for all Medicaid-eligible claims and states may not delegate to MCOs the responsibility to ensure that they make timely wraparound payments to FQHCs. In 2011, New Jersey proposed to change its wraparound payment process so that FQHCs would be required to obtain payment from Medicaid managed care organizations (MCOs) before claiming wraparound payments. The New Jersey Primary Care Association, represented by Feldesman Tucker Leifer Fidell LLP, challenged the proposal because MCOs often deny claims for reasons unrelated to whether the encounter was covered by Medicaid. It could be inferred that an MCO is defining an eligible encounter by only paying when it is delivered by a provider credentialed by the MCO and since DPW cannot delegate to the MCOs, DPW would be responsible for paying for encounters that occur prior to Medicaid MCO credentialing.

In addition to our advocacy efforts with DPW, PACHC facilitated an MCO panel on credentialing at the 2013 PACHC Annual Conference & Clinical Summit in October in Lancaster. The session was designed to give health center representatives an opportunity to hear directly from MCO representatives about their credentialing processes and receive advice on how timeframes might be reduced. During that educational session, presenters recommended that health centers consider using the system offered by the Council for Affordable Quality Healthcare (CAQH), which allows through a single portal the sharing of the information needed for credentialing with all participating MCOs.

**COUNCIL FOR AFFORDABLE QUALITY HEALTHCARE (CAQH):**

The [Council for Affordable Quality Healthcare](http://caqh.org/about.php) is a non-profit alliance of health plans and trade associations which works to simplify healthcare administration through industry collaboration on public-private initiatives. CAQH strives to be a catalyst for the development of solutions that reduce administrative burden for health plans and providers. CAQH aims to develop solutions that:

* Promote quality interactions between plans, providers and other stakeholders
* Reduce costs and frustrations associated with healthcare administration
* Facilitate administrative healthcare information exchange
* Encourage administrative and clinical data integration

CAQH accomplishes its goals through two major initiatives: the Committee on Operating Rules for Information Exchange (CORE) and Universal Provider Datasource (UPD).

[**Universal Provider Datasource (UPD)**](http://caqh.org/overview.php)**.** CAQH’s UPD is an online provider data-collection service. It streamlines provider data collection by using a standard electronic form that meets the needs of nearly every health plan, hospital and other healthcare organization. UPD enables physicians and other healthcare professionals in all 50 states and the District of Columbia to enter information free-of-charge into a secure central database, then authorize healthcare organizations to access that information. UPD eliminates redundant paperwork and reduces administrative burden.

[**Committee on Operating Rules for Information Exchange (CORE)**](http://caqh.org/CORE_overview.php)**.** CAQH’s CORE participants maintain eligibility and benefits data for more than 150 million commercially insured lives plus Medicare and Medicaid beneficiaries. Working in collaboration they are building consensus on a set of operating rules that will:

* Enhance interoperability between providers and payers
* Streamline eligibility, benefits, and claim data transactions
* Reduce the amount of time and resources providers spend on administrative functions – time better spent with patients

**MEMBER ACTION:**

1. If you urgently need DPW to issue a PROMISe identification number for a provider you have hired, after submitting the PROMISe application to DPW, send an email to [pachc@pachc.org](mailto:pachc@pachc.org) which includes:

* The provider’s name as it appears on the application
* The provider’s NPI and/or Social Security number
* Reason for the request for expedited processing
* When you submitted the application to DPW

1. Consider participating in CAQH

**STEP ONE: *Become a Member***

To participate in the Universal Provider Datasource, you must have a CAQH ID number.  For security and identity protection, you may not self register.  In order to participate, you must ask any of the payers with which you are enrolled to add you to its CAQH roster, which will generate a CAQH provider ID number. Only then can you can go to CAQH and complete the application.  A [full list of health plans, provider groups and hospitals that participate in UPD](http://caqh.org/participatingorgs.php) is available online. If you work with any of them, ask them to be added to their CAQH roster.

Medicaid MCOs that offer plans in Pennsylvania that currently participate in UPD include:

Aetna, Inc.

AmeriChoice

AmeriHealth Mercy

Blue Cross of Northeastern PA

Coventry Health Care

Geisinger Health Plan

Independence Blue Cross

Keystone Mercy Health Plan

Unison Health Plan

UnitedHealthcare

Other notable payers operating in Pennsylvania that currently participate in UPD include:

Highmark Inc.

Davis Vision

**STEP TWO: *CAQH Provider ID***

When the insurance company submits your organization’s information to CAQH via their roster, the organization will be entered in the system and assigned a CAQH Provider ID. A registration kit will automatically be generated and mailed.  The kit will have a CAQH Provider ID and information to get started and complete the application online.

**STEP THREE: Registering to Use the UPD Service**

**Once you have your Provider ID, follow these steps:**

1. Go online to <https://upd.caqh.org/OAS/>
2. Click "Logging in for the first time?"
3. Enter CAQH Provider ID
4. Enter authentication data
5. Create username and password (make sure you write down this login information and keep it in a safe place)

**STEP FOUR: *Re-attesting Your Information***

CAQH will ask you to “re-attest” information in your profile every 120 days or as often as you have data changes that you wish to report. Re-attestation only takes a few minutes.  Not doing this can cause major problems with your ability to accept insurance as regulatory bodies require that a signed attestation is dated within 6 months of all credentialing inquiries. If the attestation goes beyond 6 months, the application becomes invalid.

Please make certain that the contact information on your account is current for CAQH notifications.  If you require assistance, you may contact the **CAQH help desk at 888-599-1771.** A helpful resource, the CAQH [Universal Provider Datasource Provider & Practice Manager Quick Reference Guide](http://www.caqh.org/pdf/UPDbrochure.pdf) is available online.

1. Share Successful Practices. If your health center has found ways to promote timely credentialing, please let us know so that others can benefit from these successful practices.

**PACHC ACTION:** PACHC will continue to advocate for the development of DPW and MCO processes that support timely credentialing and will communicate your requests for expedited credentialing by DPW to that agency. In addition, the PA Primary Care Career Center will continue to work with you to meet your recruitment needs and respond to questions you might have about CAQH or other credentialing issues.

**FOR MORE INFORMATION:** Questions on DPW’s expedited credentialing process or PACHC advocacy on this issue may be directed to Cheri Rinehart at [cheri@pachc.org](mailto:cheri@pachc.org). Questions on other credentialing issues may be directed to Judd Mellinger-Blouch, Director, PA Primary Care Career Center, at judd@pachc.org.