UnitedHealthcare
Enrollment & Credentialing 101

2021 IHCP Works Annual Seminar

Presented by: Jodie Hattery – Vice President Provider Relations, United Healthcare | Belen Stewart - Senior Provider Advocate, Optum Behavioral Health | Keisha Brown - Network Solutions Director, United Healthcare Vision | Paul Curry - Provider Advocate, United Healthcare Dental

October 5, 6 and 7th 2021

United Healthcare®

Network Participation Process – Medical, Behavioral Health, Vision & Dental

Agenda:

- How to Credential
- How to Contract
- How to Enroll
- How to Check the Status of your Application
- Questions and Answers

Medical

Participation in UnitedHealthcare Medical Provider Network

- UnitedHealthcare continues to contract providers in all specialties for its Hoosier Care Connect provider network

- Credentialing begins the process

- Upon completion of credentialing, the contracting process begins

- Provider enrollment data in the State enrollment system and UnitedHealthcare's enrollment system must match

- www.uhcprovider.com/INcommunityplan.

How to Credential with UnitedHealthcare: Practitioners

- Practitioners must be enrolled with the Indiana Health Coverage Programs (IHCP)

- Go to https://www.in.gov/medicaid/providers/provider-enrollment/ to complete the IHCP enrollment application

- Practitioners use the Request for Participation (RFP) Portal

- Complete the online RFP in its entirety and submit

- Make sure to include your CAQH number

- Contact networkhelp@uhc.com OR Provider Services at 1-877-610-8795 with questions or status request

- If provider is a Primary Medical Provider (PMP), submit PMP information via the IHCP MCE Practitioner Enrollment Form

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 UnitedHealthcare: Facility

- Facilities must be enrolled with the IHCP first

- Go to https://www.in.gov/medicaid/providers/provider-enrollment/. to complete the IHCP enrollment application

- Complete the UnitedHealthcare facility application in its entirety and submit

- Include facilities' full name, Tax ID, NPI, CAQH ID and description of request

- Contact networkhelp@uhc.com OR Provider Services at 1-877-610-8795 with questions or status request

Facility Credentialing and Recredentialing Application instructions

Facility Credentialing and Recredentialing Application instructions

The Facility Credentialing and Recredentialing Application on the following pages must be completed for each location you are seeking to be credentialed and contracted with UnitedHealthcare.

Please include the following items for each location with your completed/signed application:

- ☐ Copy of current state license (if applicable)
- ☐ Evidence of current Medicare certification, including verification of survey completed within the last 36 months (if applicable)
- ☐ All appropriate accreditation certificates or letters for each location, including verification of survey completed within the last 36 months (if applicable)
- ☐ Copy of declaration sheet or certificate of insurance for current professional malpractice and comprehensive general liability insurance policies

If you have questions about this application process, please email **networkhelp@uhc.com**. Include your facility's full name, National Provider Identifier (NPI) number, tax identification number (TIN) and brief description of your request. A UnitedHealthcare representative will contact you within two business days from the receipt of your

How to Credential with UnitedHealthcare: Physical Health Providers

- Chiropractors or Free-standing Outpatient Therapy Clinics (PT, OT and/or ST)

- https://www.uhcprovider.com/en/resource-library/Join-Our-Network/join-get-started.html

- To get started, go to MyOptumHealthPhysicalHealth.com and then click on "Interested in Becoming a Provider"

- Or call 1-800-873-4575

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.

The Credentialing Program has been developed in accordance with state and federal requirements and accreditation guidelines. In accordance with those standards, UnitedHealthcare members will not be referred and/or assigned to you until the credentialing process and contracting process have been completed.

How to Enroll with UnitedHealthcare

- On initial contracting, your enrollment data is validated by your UnitedHealthcare contractor

- If the provider is joining a medical group already contracted, that provider will be added once credentialing is approved

- Always provide UnitedHealthcare with accurate provider enrollment data that matches the IHCP

- Ensure the provider is already added to the medical group on IHCP Healthcare Portal (Portal) before adding to your UnitedHealthcare contract: https://portal.indianamedicaid.com/hcp/Default.aspx?alias=portal.indianamedicaid.com/hcp/provider

Step 3: Get contracted

Contracting is a separate process from credentialing – but to help keep things moving, we'll start the contracting process with you while you're working through credentialing.

- After credentialing is complete, we'll send you a Participation Agreement (contract) through a secure application called DocuSign. If we don't have a valid email address, we'll mail you the Participation Agreement.
- Once contracting is complete, you'll receive the countersigned agreement with your effective date
- If you're joining a medical group that already has a Participation Agreement, you'll be added to the group agreement once credentialing is approved. A new contract will not be issued.

How to Update IHCP Enrollment Information

- UnitedHealthcare provider data must always match IHCP provider data

- IHCP provider enrollment data can be updated on the IHCP Provider Healthcare Portal

- Make enrollment updates with UnitedHealthcare via paper or electronic methods

Making Updates Using the Provider Healthcare Portal

The IHCP Portal is an internet-based solution that offers enhanced reliability, speed, ease of use, and security to providers and other partners doing business with the IHCP. Providers can use the Portal to view and make updates to their provider profile. Delegates with the proper authorization can also access the Portal to view and update profile information.

Making Updates Using Paper Forms

All provider profile updates may be made using paper forms. You may use stand-alone forms designed for certain updates or resubmit a full IHCP provider packet, detailing the updated information.

- The following table provides links to stand-alone forms used to update your provider profile. Select the appropriate form from the list and download it to your computer and complete it, following the directions provided.
- When you are making updates for which no stand-alone form exists, you must submit your updates using the appropriate IHCP provider packet.
- When you are making numerous changes at the same time, you may submit updates using the IHCP provider packet, rather than using multiple stand-alone forms.

Instructions:

1. Download and complete the appropriate IHCP provider packet or stand-alone form:

    - To submit updates using the **IHCP provider packet,** go to Complete an IHCP Provider Enrollment Application and select your provider type to locate the appropriate packet. Download the packet and then follow the instructions to complete the update.
    - To submit updates using a **stand-alone form**, follow, select the appropriate form from the table below. Download the form and follow the instructions to complete the update. If other changes are needed, select and complete another form.

2. Save a copy of all update forms and other documentation for your records.

3. Mail the update forms and other required documentation to the following address:

UnitedHealthcare: Enrollment Updates with My Practice Profile

- https://www.uhcprovider.com/en/demographics-profiles-attestation/link-my-practice-profile.html

- New users must register

- Tutorials available either live or self-paced

- Can only be used for practitioners

My Practice Profile

Update and Attest to Your Care Provider Demographic Data

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.

Self-Paced User Guide   **Register for Live Training**

Benefits and Features

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

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

Go to My Practice Profile

Behavioral Health

# Optum Behavioral Health Network Providers

Behavioral Health Network providers include:

- Board Certified Behavior Analyst
- Clinical Nurse Specialist
- CSR (Controlled Substance Registration) – Prescriptive Authority – Advanced Practice Registered Nurses with Prescriptive Authority
- Doctor of Osteopathic Medicine
- Health Service Provider in Psychology
- Licensed Clinical Addiction Counselor
- Licensed Clinical Social Worker
- Licensed Marriage and Family Therapist
- Licensed Mental Health Counselor

- Medical Doctor
- Nurse Practitioner
- Physician Assistant
- Registered Nurse
- Community Mental Health Centers
- Rural Health Clinics
- Federally Qualified Health Centers
- Substance Use Disorder Agencies
- Inpatient Facilities

Apply to the Optum Behavioral Health Network

- Providers can begin the online application process at Provider Express - IN Medicaid

- On the top of the home page, click "Our Network"

- Providers must sign and return a behavioral health contract prior to starting the credentialing process

- Providers that offer behavioral health services need to credential once they sign a contract with Optum for behavioral health services

- The contract is fully executed once credentialing is complete

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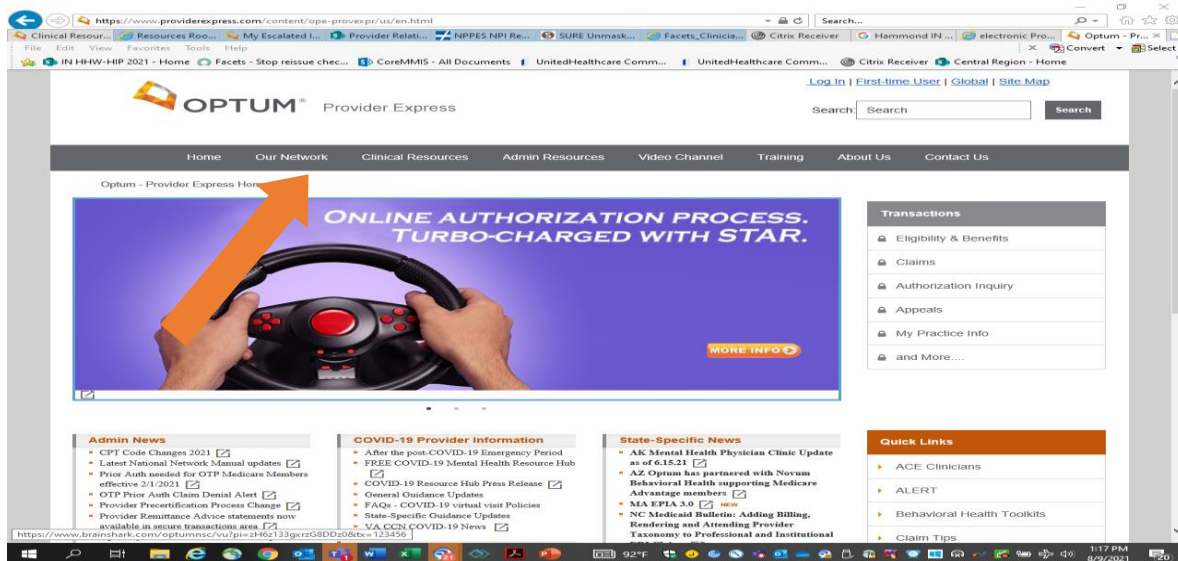
Behavioral Health Practitioner Enrollment

- Individually-Contracted Clinicians: To apply as an individual, you must be a solo clinician or practicing within a group that does not currently have a group agreement with Optum

Provider Express - IN Medicaid

Behavioral Health Practitioner Enrollment

Individually Contracted Clinicians

To verify the provider's license meets the qualifications to Join Our Network, please check License ⬈

CAQH Participation is required in the majority of the states to join our network. If your state requires it, you will be required to enter your CAQH ID # on the credentialing application. To participate in CAQH, please contact: www.CAQH.org

Improve the Speed of Processing - Tips for Applying to the Network

We recently conducted an audit of credentialing application issues. Here's an at-a-glance view of the most common issues that will slow down or lead to the cancellation of the credentialing of your application to join our network.

Category	Issues	Requirement
CAQH	• Your CAQH profile status is incomplete or expired • We do not have authorization to access your CAQH application (log into the CAQH ProView Provider portal, go to the user account setting menu and review the Authorization section to update your preferences to authorize United Behavioral Health/US Behavioral Health Plan) • Information in your completed CAQH profile needs to be updated (Examples include Practice Information, Credentialing Contact information, License and Professional Liability Insurance effective and expiration dates)	The information on CAQH must match the information you provide on the Optum NPRF form.
Attached Documents	• Attaching the wrong document • Not signing the W-9 form or providing an incorrect Tax ID number or EIN • Current Professional Liability Insurance Certificate	Providing all the correct and completed documents is required.
Document Return	Slow response time to requested information. • Individual Contracts • Disclosure of Ownership documents	Missing documents are sent out via DocuSign. Sign and return as quickly as possible.

Continue

After clicking the Continue button you will be prompted to register or login to Provider Express. Once you are logged in to Provider Express, please use the Join Our Network feature in the menu to proceed to the credentialing application.

For help with this process: Registering a Provider Access and Starting the Online Optum Credentialing Application ⬈ 📄

Individual providers – Login to Provider Express and use the Check Initial Credentialing Status under the My Network Status feature in the menu

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Applied Behavioral Analysis (ABA)

- Providers must meet the ABA credentialing requirements
- ABA groups are required to complete an audit prior to credentialing

Individual Board Certified Behavior Analysts – Solo Practitioner

- Board Certified Behavior Analyst (BCBA) requires a master's degree in psychology or behavior analysis with active certification from the national Behavior Analyst Certification Board, *and*
- Medicaid ID
- Compliance with all state autism mandate requirements, as applicable to behavior analysts
- A minimum of six months of supervised experience or training in the treatment of applied behavior analysis/intensive behavior therapies
- Minimum professional liability coverage of $1 million per occurrence / $1 million aggregate

ABA / IBT Groups

- BCBAs must meet standards above and hold Supervisory Certification from the national Behavior Analyst Certification Board if in supervisory role
- Compliance with all state/autism mandate requirements as applicable to behavior analysts/ABA practices
- BCaBAs required to possess an undergraduate degree and must have active certification from the national Behavior Analyst Certification Board
- Behavior Technicians must be a high school graduate and receive appropriate training and supervision by BCBAs
- BCBA on staff providing program oversight
- BCBA performs skills assessments and provides direct supervision of BCaBAs/Behavior Technicians in joint sessions with client and family
- $1 million/occurrence and $3 million/aggregate of professional liability and $1m/$1m of general liability if services are provided in a clinic setting
- $1million/occurrence and $3million/aggregate of professional liability and $1m/$1m of supplemental insurance if the agency provides ambulatory services only (in the patient's home)

Behavioral Health Agency Enrollment

Group with Agency Credentialed Providers: To apply for Agency credentialing, your group must be designated as a Community Mental Health Center (CMHC), Federally Qualified Health Center (FQHC), Rural Health Center (RHC), Opioid Treatment Program (OTP), and/or other Federally or State licensed or certified entity (license or certification is at the organizational level).

- Provider Express - IN Medicaid

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Behavioral Health Provider Groups with Agency Credentialing

In order to apply for Agency credentialing, your group must be designated as a Community Mental Health Center (CMHC), Federally Qualified Health Center (FQHC), Rural Health Center (RHC), Opioid Treatment Program (OTP), and/or other Federally or State licensed or certified entity (license or certification is at the organizational level).

Your organization must have the minimum Liability insurance of $1 million/ $3 Million for both General Liability and Professional Liability.
If you meet these requirements, click here to complete the Agency application.

For questions or help – *contact Network Management at (877) 614-0484*
If your Agency only provides ABA services, click here to complete the Autism/ABA/BCBA application.

Improve the Speed of Processing - Tips for Applying to the Network
- It is important to attach all correct and required documents as applicable
- If not accredited, a site audit will need to be scheduled and conducted
- Please include a signed completed W-9 form
- Please include a Current Liability Insurance Certificate (will not accept expired)

Behavioral Health Facility or Hospital Enrollment

Facility or Hospital-Based: To apply for Facility or Hospital-Based, your facility must offer behavioral health or SUD Inpatient, Residential, Partial Hospitalization or Intensive Outpatient Levels of Care.

- Provider Express - IN Medicaid

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Behavioral Health Facility or Hospital-Based Providers
Facility Application

Do you offer licensed/certified Mental Health and/or Substance Use Disorder (SUD) inpatient and/or lower level of care services (i.e., Inpatient, Detox, Residential, Partial Hospitalization (PHP), and Intensive Outpatient (IOP) programs?

Do you have minimum professional liability coverage of $5 million/$5 million for acute inpatient services, and minimum professional and comprehensive liability coverage of $1 million/$3 million for non-acute inpatient services (unless state requirements vary)?

If meet above requirements, please click on the Facility Application link below to complete and select all applicable Level(s) of Care you provide.

IMPORTANT: For covered facility-based services billed with Revenue Code or Revenue Code + HCPC or CPT code on a UB-O4 form, please complete the Facility Application. For covered facility-based services billed with single HCPC code or HCPC code + CPT code on a CMS 1500 form, please confirm the appropriate application to complete before completing the Facility Application.

Improve the Speed of Processing - Tips for Applying to the Network
- It is important to attach all correct and required documents as applicable.
- Levels of Care will require appropriate state licensure and/or certification to be provided as part of the application process.
- If not accredited, a site audit will need to be scheduled and conducted.
- Please include a signed completed W-9 form.
- Current Liability Insurance Certificate is not expired.

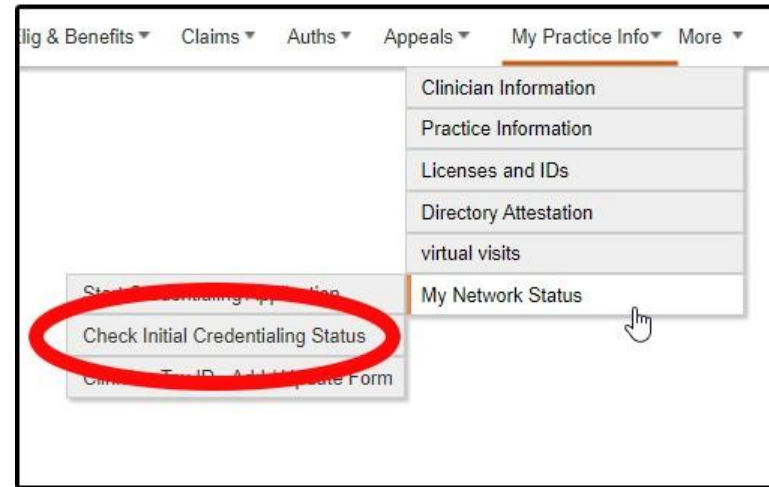# Behavioral Health Practitioner Credentialing Tips

- Ensure your CAQH is accurate and up-to-date.

- Missing documents from Optum can be submitted via Adobe Sign. Sign and return as quickly as possible.

• Check the status of your application with the Credentialing Status Toolbar that is available at Provider Express - IN Medicaid.

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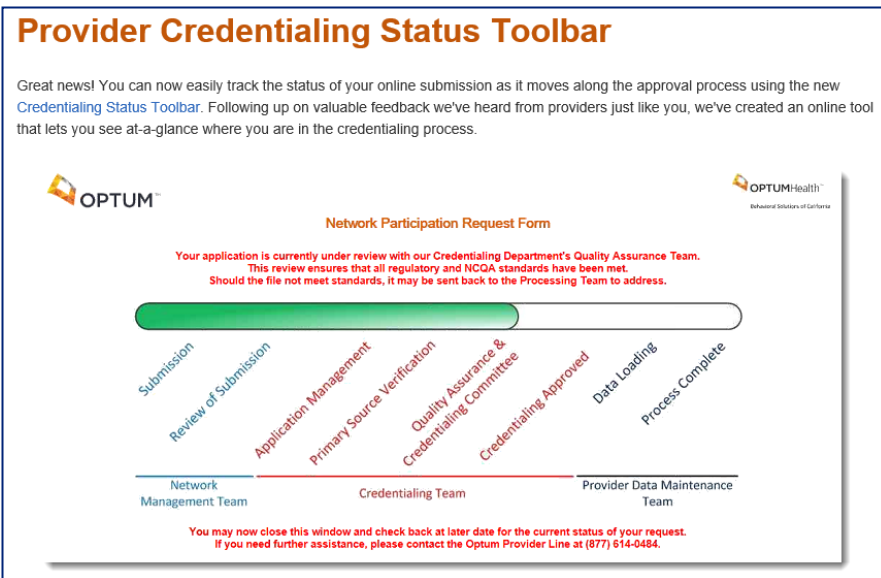
Checking Status – Behavioral Health Practitioner Initial Credentialing

Practitioners – Using the **Initial Credentialing Status Toolbar** you can easily track the status of your online submission as it moves along the approval process. Log into the secure transactions area of Provider Express, hover over *My Practice Info >> My Network Status >> click on Check Initial Credentialing Status*.

Agency or Group Practice, or Facility – contact Network Management at (877) 614-0484.

Vision

Vision Provider Resources: March® Vision Care

Enrollment and Credentialing for March® Vision Care

United Healthcare | MARCH Vision Care

- To become a MARCH® Vision Care provider visit www.marchvisioncare.com click on Join the Network and complete the online Provider Application

- Questions about the status of contracting, credentialing or enrollment can be directed to your network contractor or provider advocate

Contracting: All providers must sign a contract with March® Vision prior to beginning the credentialing process. Once credentialing is complete, March® Vision will fully execute the contract.

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.

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.
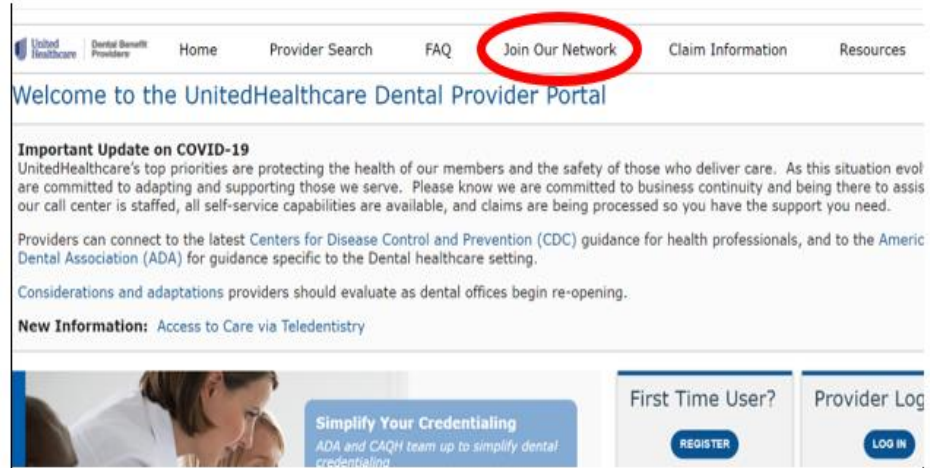
Dental

How to Enroll with UnitedHealthcare Dental

- UnitedHealthcare continues to contract providers in all dental specialties for its Hoosier Care Connect provider network

- Dental Providers – www.uhcdental.com

- Select "Join Our Network".

How to Enroll with UnitedHealthcare Dental (cont.)

- https://uhcdental.com/content/dental-benefits-provider/en/joinournetwork.html

- New providers must sign and return the contract for credentialing to begin

- New providers can be enrolled and credentialed fast

- Once credentialing completed, UnitedHealthcare Dental will fully execute the contract

- Existing providers currently credentialed will not have to recredential until the next recredentialing cycle

- Scroll to the middle of the page and there you will see a link stating, *"Provider Packet Request Form"*. Click the link.

Request a provider packet and get started today.

- Click to access the provider packet request form and email your completed form to one of the following email addresses* that apply to your state and region. Click on the Regional Map below as your guide.
  - Central Region - ce_packetrequest@uhc.com
  - Northeast Region - ne_packetrequest@uhc.com
  - Southeast Region - se_packetrequest@uhc.com
  - West Region - we_packetrequest@uhc.com

Please indicate in the email subject line - "Packet Request [State] [County]".

Regional Map

OR

  - Call our Provider Services Team at **(800) 822-5353**

A Network Contractor will contact you to review dental fees and the application process.

Important Note: *Only the requests to join our network are processed through the email addresses above with the completed Provider Packet Request Form. If your request does not relate to a packet request, please contact our provider services team at **800-822-5353** for further assistance.*

UnitedHealthcare

Provider Packet Request Form

Please complete all fields and email the completed form to the email address* that applies to your state and region: (Refer to the **Regional Map** below as your guide.)

Central Region: **ce_packetrequest@uhc.com**   Northeast Region: **ne_packetrequest@uhc.com**
Southeast Region: **se_packetrequest@uhc.com**   West Region: **we_packetrequest@uhc.com**

Please indicate in the email subject line - **Packet Request [State] [County]**.
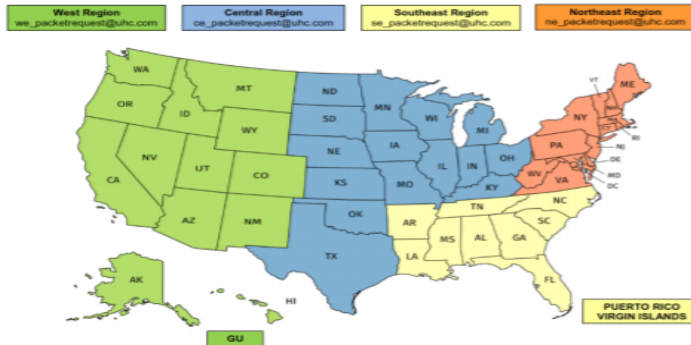
Dentist First Name:	Dentist Last Name:	Associate/Owner:	NPI:	Specialty:

Please check the dental network(s) that you wish to join:
☐PPO (Commercial)   ☐Medicare ☐ Medicaid ☐DHMO/Direct Compensation

Email Address:		Contact Name:	
Practice Name:		Phone Number:	
Address:		County:	
City:		State:	ZIP Code:

Mailing Address: (If Different from Practice Address)

City:		State:	ZIP Code:

Are the Dentists above being added to an existing participating location?   ☐Yes ☐No

Is this a new practice location? ☐Yes   ☐No

Regional Map

West Region we_packetrequest@uhc.com	Central Region ce_packetrequest@uhc.com	Southeast Region se_packetrequest@uhc.com	Northeast Region ne_packetrequest@uhc.com

Important Note: *Only requests to join our network are processed through the email addresses above. If your request does not relate to a provider joining our network or a packet request, please contact our Provider Services Team at 1-800-822-5353 for further assistance.*

V6/2019

Dental Credentialing & Recredentialing

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 recredentialing approval every three (3) years in Indiana.

UnitedHealthcare is committed to supporting the American Dental Association (ADA) and Council for Affordable Quality Healthcare (CAQH) ProView in streamlining the credentialing process and making it easier for you to complete one application for multiple insurance companies and maintain your credentials in a secure and central location at no cost to you.

• If you are new to CAQH ProView, visit ADA.org/godigital to get started.

For specific credentialing & re-credentialing questions, you may contact your assigned Provider Advocate or call Provider Services at **1-844-402-9118**.

How to Check the Status of your Dental Credentialing Application

United Healthcare Dental offers two ways a Provider can check their application/credentialing status.

You may contact either:

- Your assigned Provider Advocate

  and/or

- Provider Services at **844-402-9118**

Provider Reference Appendix

Provider Service Line Website Links

- United Health Community Plan (Medical): www.uhcprovider.com/INcommunityplan

- UnitedHealthcare Dental: www.uhcdentalproviders.com

- March® Vision: www.marchvisioncare.com

- Optum Behavioral Health: Provider Express - IN Medicaid

Meet Your Advocate Teams

Your Medical Network Provider Advocate Team

Cindy Fabian
Manager,
Provider Advocacy
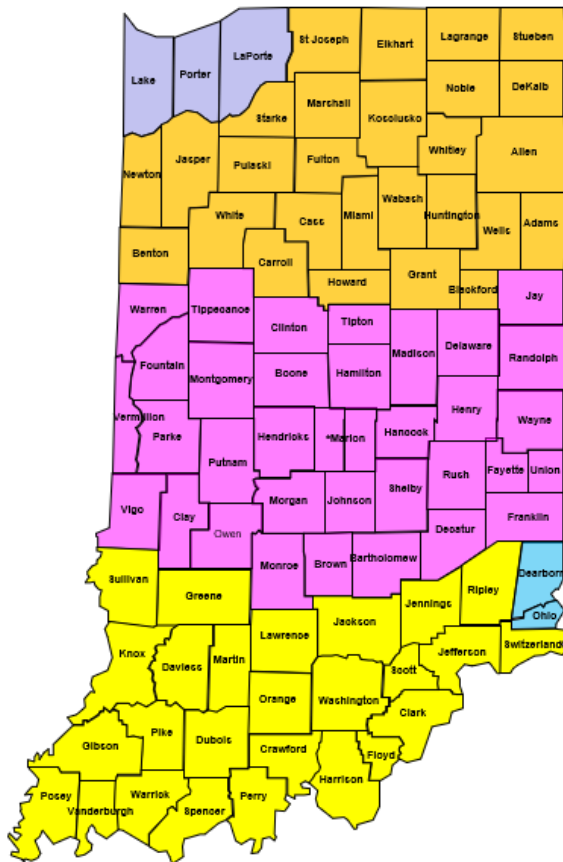312-803-5623
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Kim Berry
Sr Provider Advocate
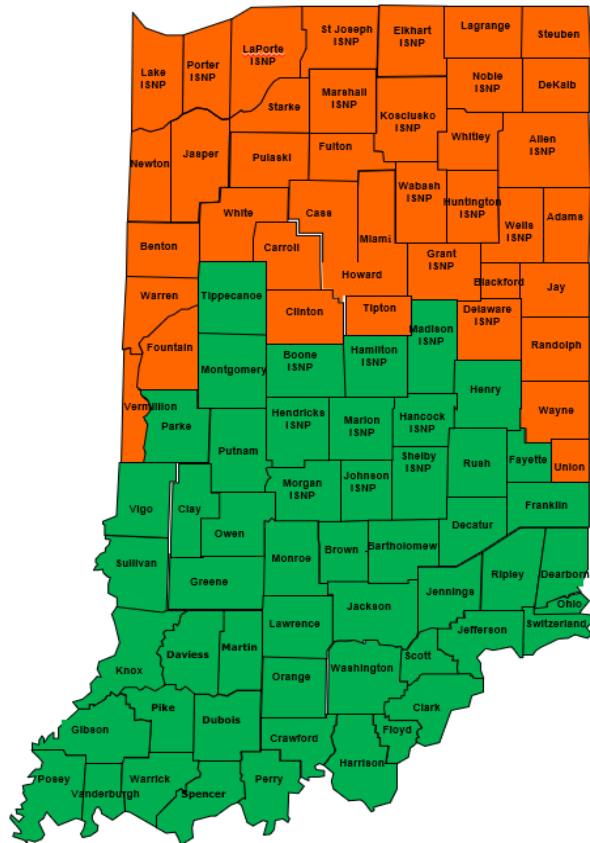612-395-8106
kim_berry@uhc.com

Jodie Hattery
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Your Skilled Nursing Provider Engagement Team

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Tiffany Cashion
Sr Provider Engagement Rep
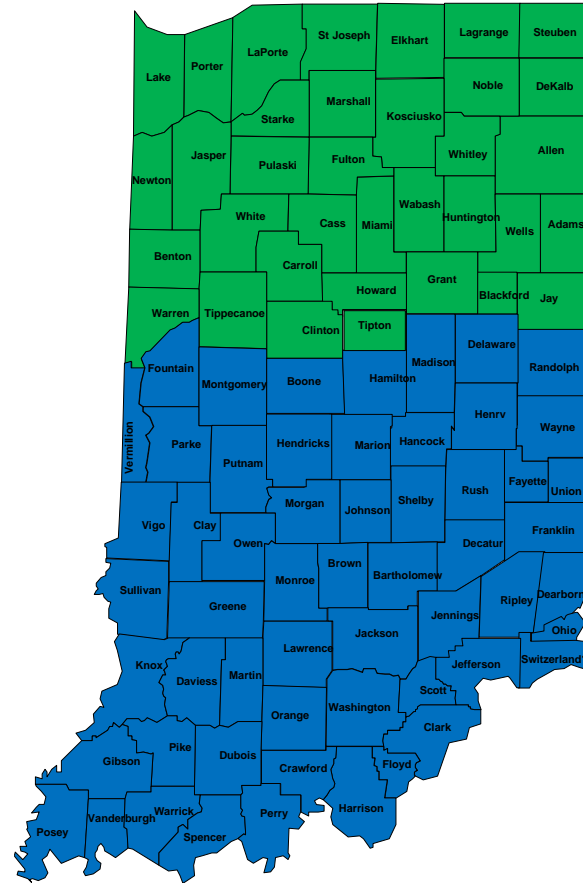317-352-6578
Tiffany.Cashion@optum.com

Lynette Gatewood
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Provider Engagement
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Lynette.Gatewood@optum.com

Your Optum Behavioral Health Advocate Team

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Behavioral Health
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David Hoover
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Your Optum Behavioral Health ABA Advocate

Nacole Thompson
Provider Advocate
ABA Therapy- all counties
952-406-6449
Nacole.Thompson@optum.com

Your March Vision Advocate

Cassandra Pattison
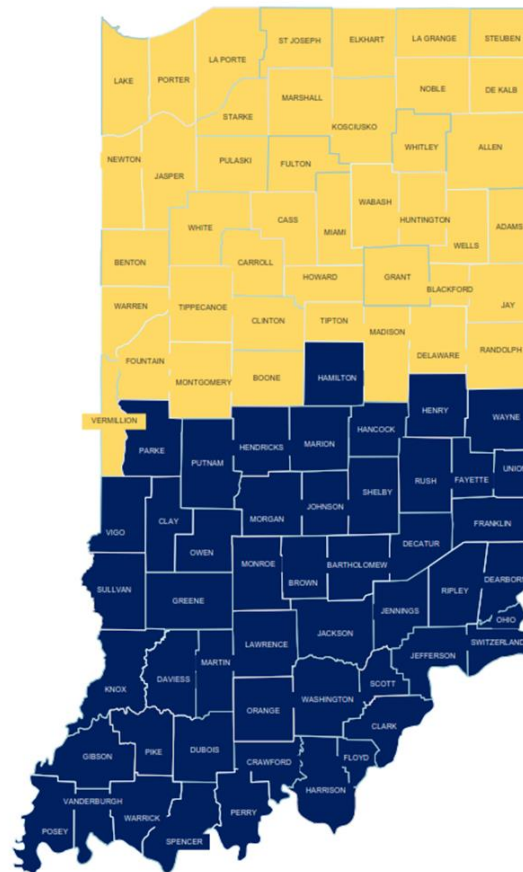**Sr. Provider Relations Advocate**
210-474-5592
Cassandra_Pattison@uhc.com

(Cassandra covers all Indiana counties)

Your Dental Advocate Team

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Provider Advocate
763-283-4522
catrice_campbell@uhc.com

Paul Curry III
Provider Advocate
952-202-2072
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Questions and Answers

Thank you