



HealthCare Administrative Solutions, Inc. Credentialing Manual

Disclaimer

This manual is intended to provide general information about provider credentialing procedures. The information contained herein was written by HCAS with the assistance of provider representatives and is made available to users as a courtesy. While HCAS believes that the information in this manual is accurate and up-to-date, HCAS disclaims any warranty concerning its accuracy, timeliness, and completeness and users must understand and agree that neither HCAS nor any of its participating organizations are responsible or liable for any claim, loss, or damage resulting from its use.

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1. Introduction

The purpose of this manual is to assist providers and credentialing administrators to complete the credentialing process for HCAS participating health plans.

Helpful hints can be found throughout the manual and are noted with a checkmark “✓”.

Resource documents are included in the back of this manual.

About HCAS

HealthCare Administrative Solutions, Inc. (HCAS) is a non-profit entity founded by several Massachusetts health plans to collaborate on administrative simplification initiatives and operates in several New England states.

Participating organizations include:

- Blue Cross Blue Shield of Massachusetts
- Boston Medical Center HealthNet Plan
- Fallon Community Health Plan
- Harvard Pilgrim Health Care
- Health New England
- Medical Network
- Neighborhood Health Plan
- Network Health
- Tufts Health Plan

Additional HCAS information can be found at www.hcasma.org.

Credentialing Process Overview

HCAS implemented a centralized and streamlined provider credentialing process as its first initiative. The process offers a single point-of-entry for providers to submit credentialing applications that HCAS participating health plans use to verify a provider’s qualifications prior to network participation. As all health plans are required to credential and recredential their managed care network providers on a regular basis, there are significant efficiencies gained by centralizing and streamlining the process. Among its benefits the HCAS process allows providers to complete a credentialing application one time for multiple health plans.

Initial Credentialing

Initial credentialing is one of the key components of a process that each health plan utilizes when a provider seeks to join a health plan network. Providers must successfully complete the credentialing process prior to an affiliation with a health plan.

Recredentialing

Providers are recredentialled every two years by HCAS health plans in New England including Massachusetts, Rhode Island, and New Hampshire. HCAS uses birth month and odd/even birth year to determine when a provider is due for recredentialing. For example, if a provider was born in March of 1968, that provider would be due for recredentialing in March of 2008. Using this methodology, providers have predictability regarding an upcoming recredentialing event and can pro-actively update their applications in CAQH. Beginning in 2009, providers who have a primary practice location in the state of Maine are recredentialled every three years.

Credentialing Exceptions

Pathologists, Emergency Medicine, Radiologists, and Anesthesiologists (commonly referred to as ERAP or PEAR providers) may be exempt from the health plan credentialing and recredentialing process if they practice exclusively within a hospital setting, and in cases where a health plan does not have an additional need to review the physician's credentials. Please contact individual health plans to learn more about health plan-specific credentialing exceptions.

Components of the Credentialing Process

Collection of Application Data

- HCAS participating health plans partner with CAQH® to collect and store credentialing information that includes application data and supporting documents.
- The Universal Provider DataSource (UPD) is the database operated by CAQH that stores provider credentialing information.
- Section 3 describes details of the CAQH process.

Primary Source Verification

- Primary source verification is the process by which specific credentials are verified using accepted industry methods and begins once an application and all supporting documents have been received.
- The primary source verification process is completed by Aperture Credentialing, Inc. (Aperture). Aperture is a national credentials verification organization (CVO) certified by the National Committee for Quality Assurance (NCQA).
- Section 4 describes details of the primary source verification process completed by Aperture.

Health Plan Committee Decision

Once a health plan has received credentialing information, including confirmation that the application and primary source verification was successfully completed and all plan-specific documentation requirements have been met, an individual health plan will make an independent credentialing decision based on the organization's policies and procedures.

2. Starting the Process to Add a New Provider

Health Plan Enrollment

The first step is for the provider to contact a health plan(s) to request network participation. This initiates the health plan's specific enrollment process.

Health Plan Required Documents

Each HCAS participating health plan has its own company-specific policies and contract requirements for managed care network participation. For a list of the participating HCAS health plan required documents you may contact the health plan directly or go to:

1. www.hcasma.org
2. Select "Resources"
3. Scroll down to "Resource Documents"
4. Select "Health Plan Contracting and Enrollment Required Documents List"

3. CAQH Process

You may complete a credentialing application in CAQH using one of the following methods:

Online: (Recommended) The online credentialing application can be accessed at <https://upd.caqh.org/oas/> or through the HCAS Website at www.hcasma.org. Click on the “Resources” page and select “Login to the Universal Provider Database”.

Fax: If you are a new provider to CAQH, you may choose to fax your application to CAQH at (866) 293-0414.

Online Application Overview

Benefits of the Online System

Online data entry using the UPD simplifies the task of data submission with features that simplify the online data entry session. The online process:

- prompts the user for information in an easy interview style
- contains an audit feature that reviews responses and notifies the user of potential errors or missing information
- provides contact information for colleges, medical schools, and hospitals through convenient drop down directories
- allows the user to save the work and return to it later

General Information on UPD Navigation

- **Turn Off Computer’s Pop-up Software**
Personal computer pop-up software may prevent online users from accessing certain UPD features including the “add” function that allows addition of multiple training affiliations, CMEs and license information.
- **Audit Feature**
Before or after data entry, select the “Audit” button at the bottom of each page. This highlights the required fields that must be entered in the database for an application to be considered complete versus those fields that are optional. A red asterisk “*” will appear next to required fields. Use of this feature reduces completion time.
- **Use the “Back” and “Next” Buttons at the Bottom of Each Page**
Use the “Back” and “Next” buttons on the bottom of the page to navigate backward or forward within the application. Do not use the “Back” button on your Internet navigation toolbar that controls your internet session and may terminate your UPD session.

Security

CAQH is committed to keeping physician information in a confidential and secure system. The Universal Provider Datasource fully complies with all laws and regulations relating to the privacy of individually identifiable health information. A password-protected Web site ensures that only authorized medical practice staff has access to submit or update credentialing information. And

providers control which participating organizations are authorized to view their data. Furthermore, CAQH uses industry-leading technology to protect providers credentialing data and the privacy of system users, including:

- redundant firewalls that protect all network traffic
- secure Internet accesses to application screens
- secure 128-bit Secure Socket Layer (SSL) encryption
- automatic encoding of all information exchanges
- routine tape back-ups, stored off-site, to protect all volatile system data

For more information related to security, privacy or confidentiality, go to <https://upd.caqh.org/oas/>.

Demographic Changes

HCAS participating health plans do not use CAQH for demographic changes such as a change in billing address. These changes should be submitted directly the health plans in which you have a contract via the plan-specific demographic data maintenance process. Questions regarding plan-specific procedures should be directed to a health plan's provider enrollment department.

Practice Administrator Module

If a provider belongs to a large organization, consider using the Practice Administrator Module. This system enables credentialing administrators to enter practice locations, hospital affiliation and malpractice information in one location that can be imported into individual provider records.

The Practice Administrator Module can be accessed at: <https://upd.caqh.org/pmm/>.

UPD Standard Notifications

The UPD system generates standard notifications notifying a provider when the application is complete, missing information, or requires updating. Notifications are sent to the primary method of contact (fax or email), as designed by the provider as included in the provider's CAQH record. A list of standard notifications can be found in Appendix G.

The UPD notifications contain:

- provider name
- CAQH ID number
- notification title in the subject line
- CAQH contact information

Authorization Process

The Authorize tab allows users to authorize a health plan(s) access to the provider's credentialing information.

Health plans will not have access to a provider's credentialing information unless the provider or designee authorizes the health plan(s). Not checking off a health plan(s) in this section may cause delays in the credentialing process.

- ✓ **Helpful Hint:** A health plan will not be listed as a choice in CAQH until the health plan receives information from the provider and notifies CAQH that the provider is seeking to join the health plan's network.

Obtaining CAQH Login Information

New CAQH Providers

If a provider is being credentialed with a health plan for the first time and does not have an existing record in the UPD for any of the health plans that use the CAQH database, a notification by a health plan to CAQH will trigger mailing of a welcome packet. The welcome packet is mailed to the address supplied to CAQH by the health plan (that is collected from the provider or designee) and will contain the provider's CAQH ID number, and instructions on how to login to CAQH.

The following materials are included in the welcome packet:

- CAQH Cover Letter Appendix B
- CAQH Credentialing Checklist Appendix C

- ✓ **Helpful Hint:** Large health care organizations or practices may elect to instruct mail rooms to direct CAQH mail to the credentialing staff office.

Provider with an Existing CAQH Record

If the provider has a preexisting record in the UPD, a welcome packet will not be generated as the provider has received introductory materials at an earlier time. The CAQH ID number, user name and password may be obtained by using one of the following methods:

- Directly from the provider
- Provider's previous employer

How to Enter Application Information

The UPD Quick Reference Guide has step by step instructions for the CAQH data entry process. This document may be accessed at: <https://upd.caqh.org/OAS/>.

Completing an application and submitting all required attachments to CAQH for initial credentialing and recredentialing is key. Successful completion prevents requests for missing or expired information from Aperture during the primary source verification process, and reduces rework.

How to Submit Supporting Documents to CAQH

Please fax required supporting documents that supplement the credentialing application to CAQH with the provider-specific CAQH fax cover sheet. It is important to use the fax cover sheet specific to the individual provider that contains the provider's CAQH ID number and bar code. This information is uploaded into the CAQH provider record when the accompanying fax cover sheet is completed and submitted. No information is printed or reproduced on paper. Consequently, typical problems, such as paper jams and memory overload are avoided.

Cover Sheet Information

Individualized cover sheets can be found:

- online by clicking on the "Attachments" tab in the UPD
- contact the CAQH Help Desk at 1-888-599-1771

Individual cover sheets contain the following:

- provider-specific CAQH ID number
- provider-specific bar code
- description and coding of attachments

It is important to submit required credentialing documents to CAQH as these documents are necessary for the credentialing process. The required documents for health plan initial credentialing and recredentialing events are listed below. If these documents are not submitted through the CAQH the credentialing process will be delayed and require follow-up by Aperture that will attempt to collect these documents during the primary source verification process.

Initial Credentialing Required Documents

- Consent and Release Form
- Malpractice Face Sheet
 - ✓ **Helpful Hint:** Malpractice face sheets must include a provider's name, coverage amounts and to and from dates of coverage.
- Curriculum Vitae* must include five years of work history in month/year format and explanation of gaps of six months or greater.
- Hospital Verification Letter* (MDs and DOs only)

This letter is required and must be submitted from the physician's primary hospital stating the physician has been credentialed in accordance with 243 CMR 3.05 and, for a non-Massachusetts physician, by the hospital in accordance with Joint Commission requirements.

✓ **Helpful Hint:** Missing hospital verification information is the leading cause of credentialing delays. Additional information on submission of individual hospital letters to CAQH, and hospital submission of physician lists (i.e. rosters) to Aperture can be found in Appendix D.

* The application may be deemed complete in the CAQH system before this document is submitted, and follow-up will occur during the primary source verification process.

Recredentialing Required Documents

- Malpractice Face Sheet

✓ **Helpful Hint:** Malpractice face sheets must include a provider's name, coverage amounts and to and from dates of coverage.

- Hospital Verification Letter* (MDs and DOs only)

This letter is required and must be submitted from the physician's primary hospital stating the physician has been credentialed in accordance with 243 CMR 3.05 and, for a non-Massachusetts physician, by the hospital in accordance with Joint Commission requirements.

✓ **Helpful Hint:** Missing hospital verification information is the leading cause of credentialing delays. Additional information on submission of individual hospital letters to CAQH, and hospital submission of physician lists (i.e. rosters) to Aperture can be found in Appendix D.

CAQH Notification of Missing or Illegible Documents:

If faxed information is missing or rejected the provider will receive a CAQH notification titled "CAQH Supporting Documents Missing" or "Provider Fax Submission Illegible or Incomplete". The information included in this notification can be found in Appendix G.

CAQH Complete Application Notification

A CAQH notification titled "CAQH Confirmation: Application Complete" will be sent to the provider or credentialing administrator when the application data and required attachments are complete in the UPD. The information included in this notification can be found in Appendix G.

Checking Provider Status in CAQH

A description of application statuses in CAQH is located on the next page. This may be useful information for providers who contact the CAQH help desk for assistance. Note: A provider's status will appear in the activity log of the provider's record in CAQH.

* The application may be deemed complete in the CAQH system before this document is submitted, and follow-up will occur during the primary source verification process.

| CAQH Status: | Description: |
|------------------------------|--|
| New Provider | Provider has been entered into system by a plan and has not been sent a registration kit. |
| Initial Outreach | Provider has been sent outreach but has not yet registered with UPD or called help desk. |
| Alternate Outreach | Provider has been messaged at a secondary location after attempts are made to primary office location. |
| First Provider Contact | Provider has called or logged into UPD. |
| Application Data Submitted | Provider has progressed through UPD and “attested” or faxed in paper app. Still waiting for supporting docs. |
| Application Problem | Problem letter outstanding. (e.g., paper application doesn’t pass audit conditions) |
| Initial Application Complete | Information has been attested to and supporting documents received. |
| Reattestation | Information in system has been attested to. |
| Expired Attestation | Attestation expires if greater than 120 days old. |
| Undeliverable | Unable to outreach to provider due to lack of valid information. |
| Returned Mail | Registration kit mailing is returned from U.S. Postal Service due to poor mailing address, or provider no longer at the address. |
| Deceased/Retired | CAQH Help Desk is notified that provider is deceased or has retired from practice. |
| Opt Out | Provider has asked to be removed from the CAQH database. |
| Non-responder | Provider has this indicator marked after numerous attempts have been made when the provider's status is “Initial” or “Alternate Outreach”, “First Provider Contact”, “Application Data Submitted”, “Expired Attestation” or “Application Problem”. |

Re-attesting to Provider Data in CAQH

The CAQH system will prompt the provider to re-attest to the accuracy and completeness of the data every 120 days via email or fax using the primary method of contact information the provider includes in his or her CAQH record.

If a provider’s record has not been attested to after a period of time, the status changes to expired and the data cannot be used for primary source verification.

Listed below are system notifications generated by CAQH on the re-attestation process. The notification details can be found in Appendix G.

- 15 day Reattestation Notice
- 10 day Reattestation Notice
- 5 day Reattestation Notice
- CAQH Reattestation Successful Notice
- CAQH Data Expiration Notice
- CAQH Expired Attestation

When Re-attesting to data on CAQH, please be sure to review the provider's supporting documents by clicking on the *Attachments* tab at the top of the page. Scroll down and review the provider's *Supporting Documents Received* that are on file. Click on the link for each document to ensure that all materials are current and nothing has expired. If a renewable document has expired, you will need to update this information. Below is a list of the most common documents that have effective dates and may expire. This is a partial list and does not represent a full list of documents that may expire.

- License
- DEA
- Malpractice Insurance
- Board Certifications

If data is up-to-date in the CAQH system and the provider has authorized all contracted health plans to access the credentialing data he/she will not receive a recredentialing notification. Over 68% of provider applications are up-to-date in CAQH and move directly to the primary source verification phase when their applications are due for review.

If a provider does not respond to CAQH notices to update the application, the provider is considered a non-responder by the CAQH system and will receive a notification to complete the CAQH application process as described earlier in this manual. This notification is printed on HCAS letterhead. A sample notification can be located in Appendix E.

4. Primary Source Verification Process

Overview

The primary source verification process is conducted by Aperture Credentialing, Inc., a national credentials verification organization (CVO).

Aperture conducts the primary source verification process on behalf of the HCAS participating health plans according to state, federal, and applicable health plans accreditation requirements.

Aperture Notification

Initial Credentialing: Health plans notify Aperture to begin the primary source verification process for a provider(s) during the health plan enrollment process.

Recredentialing: Aperture utilizes the provider's date of birth in CAQH to initiate the recredentialing process every two years. Providers that practice in the state of Maine are recredentialed every three years using an alternate cycle.

CAQH Incomplete Application Notifications

If an initial or recredentialing application is in process with Aperture and the provider has not yet updated CAQH, a follow-up letter will be sent to the provider with a reminder that CAQH needs to be completed. Aperture conducts up to two follow-up attempts to collect necessary information.

Follow-up letters are printed on HCAS letterhead. A sample notification letter is included as Appendix E.

Missing Information Requests

During the primary source verification process, Aperture may contact a provider or designee to submit missing, incomplete, or outdated information via phone or fax. Completing the online application and submitting required attachments to CAQH will prevent missing information request notifications from being generated. See Section 3 that describes the CAQH process.

The most common missing information requests sent by Aperture include:

- current malpractice face sheet and/or information including coverage amounts and dates of coverage
- updated provider signature on release form
- current DEA certificate(s) if unable to obtain verification or waiver
- DEA registration (and/or) information for all states in which the provider has an office location (per Federal requirements)
- confirmation of primary hospital affiliation (MDs and DOs only)
- work history information including start and end dates for each place employed in a month/year format

- information required to query the National Practitioner Data Bank, and/or the Federation of State Medical Boards including:
 - state license number
 - licensing state
 - date of birth
 - degree (i.e., MD, DO, etc)
 - graduate school (graduation month and year)

Notification Methods

Missing information requests are distributed via phone, mail, fax or Email. A sample notification is included as Appendix F.

Requests will be distributed to the contact designated in the Credentialing drop down menu on the Answer tab in CAQH.

Questions regarding notifications should be directed to Aperture staff at 1-800-398-0335, Option 4.

5. Health Plan Committee Decision

Aperture returns the file to a health plan after completion of the primary source verification process. Some health plans may have additional verification requirements such as a review of advanced training that would be verified by a health plan.

Each health plan makes its credentialing decision independently based on plan-specific policies and procedures.

Practitioner Rights Notification:

Providers have the right to receive the status of their credentialing upon request by contacting a health plan(s) directly.

6. Contact Information

| Description | Contact |
|--|--|
| <p>Checking status of a credentialing application</p> | <p>Blue Cross Blue Shield of Massachusetts: Phone: 1-800-419-4419</p> <p>Boston Medical Center HealthNet Plan: Provider Processing Center Phone: 1-888-566-0008 Fax: 1-617-897-0818 Email: BMCHP.providerprocessingcenter@bmchp.org</p> <p>Fallon Community Health Plan: Phone: 1-866-275-3247, Option 4 Email: askfchp@fchp.org</p> <p>Health New England: Phone: 1-800-842-4464</p> <p>Harvard Pilgrim Health Care: Phone: 1-800-708-4414 Email: provider_callcenter@hphc.org</p> <p>Medical Network: Phone: 1-207-773-5116 ext. 108 Email: cbelliveau@mainemednet.com</p> <p>Neighborhood Health Plan: Phone: 1-800-462-5449 Email: memberservices@nhp.org</p> <p>Network Health: Phone: 1-888 257-1985 Email: credentialing@network-health.org</p> <p>Tufts Health Plan: Phone: 1-888-306-6307</p> |
| <p>The Universal Provider DataSource (UPD) Support</p> <ul style="list-style-type: none"> • Providers using the Online Application System • Practice managers using the Practice Administrator Module • Questions regarding faxed applications and supporting documents • Application requests • General UPD questions | <p>Phone: 1-888-599-1771 Fax: 1-866-293-0414 Email: caqh.updhelp@acsgs.com</p> |
| <p>CVO Questions and Support</p> | <p>Phone: 1-800-398-0335. Option 4 Fax: 1-800-485-9592</p> |

7. Resource Documents

Appendix A: Glossary

| Acronym or Term: | Full Name: | Definition: |
|-------------------|--|--|
| Aperture | Aperture Credentialing, Inc. | Provides primary source verification services to HCAS participating plans. |
| CAQH [®] | CAQH | Designers of the Universal Provider DataSource, or UPD (see definition below). |
| CVO | Credential Verification Organization | A business that verifies credentials on behalf of health plans. |
| HCAS | Health Care Administrative Solutions, Inc. | An independent organization of Massachusetts health plans created to collaborate on streamlining administrative functions. |
| OAS | Online Application System | Synonymous with Universal Provider DataSource (UPD)—see below. Used to enter provider data for credentialing purposes. |
| PSV | Primary Source Verification | Service to verify provider credentials based on the original source. |
| UPD | Universal Provider DataSource | A national, centralized database. Providers submit and update their credentialing data to the UPD. Participating health plans draw credentialing data from this common database. |

Appendix B: CAQH Cover Letter

«MailCode»

«FirstName» «MiddleInitial» «LastName» «Suffix»

«Address»

CAQH Provider ID: «ProviderID»

«Address2»

«City», «State» «Zip»-«ExtZip»

Dear «FirstName» «LastName»,

At the request of one of the healthcare organizations with which you are contracted, or are in the process of contracting, please find enclosed the necessary information you will need to begin using the Universal Provider DataSource[®]. This secure, online service has been provided to you by many of the nation's leading health plans and other organizations to help streamline your credentialing paperwork. A current listing of participating organizations can be found at http://www.caqh.org/ucd_health_participating.php.

How the Universal Provider DataSource Works:

1. Participating health plans and other organizations submit a request to CAQH to include you in this national initiative.
2. To register, log on to www.caqh.org/cred using the CAQH Provider ID found at the top of this letter. Click on "Logging in for the first time," which is located on the right side of the screen.
3. You submit one standard application to a single database that meets the credentialing data needs of the dozens of participating organizations. You can submit your information online or via a toll-free fax number.
4. With your permission, participating organizations access your information and review according to their respective policies and procedures.
5. You can update your information at any time and release your updated information to participating organizations.

Note: You can only transmit your data to organizations with which you are already contracted or are in the process of contracting. Using the Universal Provider DataSource does not grant participation or constitute applying for participation with any organization. If you would like to participate with any other organizations, you must first contact the organization(s) directly to request a participation contract.

Each participating organization continues to review and verify data, and makes an independent decision as to whether or not you meet its standards for participation.

A step-by-step checklist that walks you through the entire process, along with important background information, is also enclosed for your reference. Even if it is not time for you to be recredentialed, by completing the CAQH Universal Provider DataSource application now, you will only need to update to confirm your information remains accurate when the time comes.

To learn more about CAQH and the Universal Provider DataSource initiative, visit the CAQH Website at www.CAQH.org, where you can view an online demonstration of the application process. A current listing of participating organizations can be found at http://www.caqh.org/ucd_health_participating.php.

Alternatively, you may call the CAQH Help Desk at 888-599-1771 which is available Monday through Thursday from 7:00 a.m. to 9:00 p.m. (ET) and Friday from 7:00 a.m. to 7:00 p.m. (ET) to provide assistance with any questions you may have.

Sincerely,

CAQH

Using the CAQH Universal Credentialing DataSource does not grant participation or constitute applying for participation with any organization. If you would like to participate with any of these organizations, you must first contact the organization(s) directly to request a participating contract.

Appendix C: CAQH Credentialing Checklist

Checklist for Practice Administrators/Managers

“Universal Provider DataSource gets me through the credentialing process faster.”

What you will need

To make this process even easier, we’ve developed the following checklist of items you’ll need to complete the application. Please gather the following information (if applicable) before you sit down and begin the online application:

- o Your CAQH Provider ID number (located on this kit’s cover letter)
- o A previously completed credentialing application
- o A list of all previous practice locations
- o A copy of your curriculum vitae
- o A copy of your medical license
- o A copy of your DEA certificate
- o A copy of your CDS certificate
- o A copy of your IRS Form W-9
- o Various identification numbers (UPIN, Medicare, Medicaid, etc.)
- o A copy of your malpractice insurance face sheet and summary of any pending and settled cases

Getting Started

If you are entering credentialing information for an individual provider:

- o Open Internet browser
- o In the address box located at the top of your browser window, type: www.caqh.org/cred
- o Select the “Logging in for the first time?” link
- o Enter the provider’s CAQH Provider ID number (located at the top right of the cover letter)
- o Enter one of the identifiers requested
- o Complete the online application

If you are entering credentialing information for multiple providers in your practice:

The CAQH Practice Manager Module—a feature of Universal Provider DataSource—will make your data entry task much easier. By creating a “template” with information that is common across providers in your group, you can “import” this generic record into an individual provider’s application.

Once you are ready to begin entering information:

- o Open Internet browser
- o In the address box located at the top of your browser window, type the following address:
<https://upd.caqh.org/pmm>
- o Register by establishing your username and password as directed

Questions?

If you have questions about the application process, please contact the CAQH Help Desk at **888-599-1771** or by sending an email to caqh.updhelp@acsgs.com.

Why is the CAQH Universal Provider DataSource important to me?

Healthcare organizations such as health plans and hospitals evaluate healthcare providers to confirm those providers under contract are adequately trained, certified and/or licensed to provide care. One of the most important parts of the credentialing process is the collection and verification of data from the provider regarding his or her education, training, experience, practice history, location, disclosure of any issues impacting the ability to provide care and other background information.

The CAQH Universal Provider Data source will greatly help reduce the amount of administrative time required in this process by using a uniform application. Providers need only fill out one application, which can then be shared with all the participating organizations with whom the provider contracts. A completed, currently attested file can be used by the credentialing organization at the time of recredentialing, eliminating the need for the provider to complete a lengthy form.

How will my confidentiality be maintained within the database?

The confidentiality and security of provider information and the privacy of system users are critical priorities for CAQH. The CAQH Universal Provider Data source is designed to be compliant with laws, rules and regulations relating to the privacy of individually identifiable health information. In addition, CAQH complies with applicable laws and regulations pertaining to confidentiality and security in the development of the database and the data collection process. The CAQH database is housed in a secure Network Operations Center, which is controlled by electronic key cards, and access is limited to engineers and monitoring staff. All network traffic to and from the center is routed through redundant firewalls for complete security to the database and online systems. Secure Internet accesses to application screens, use of passwords, electronic signatures/certificates, and powerful 128-bit Secure Socket Layer (SSL) encryption are used to ensure only authenticated use of the system. Only password -authenticated users have access to their restricted data over connections that automatically encode all information exchanges. Virus detection mechanisms are used to ensure that the database and the Websites are free of all viruses. Routine tape back-ups protect all volatile system data and are secured in an off-site storage facility.

Why do I need to review and attest to my information three times a year?

Because many participating organizations use this system for recredentialing and ongoing updating of provider directory records, it is important that the database contains the most accurate and up-to-date information. You will be sent automatic reminders to review and attest to the accuracy of your data. This is easily accomplished through a quick online. By checking and attesting to your data three times a year, participating organizations can access current information at the time of recredentialing or database updates, without having to contact you for the information.

Can I use the CAQH database to report any changes to my practice such as address, phone numbers, and new associates?

Yes. You may make these changes at any time. Remember that only health plans and other organizations that participate in the CAQH Universal Provider Data source and that you have authorized to access your information will receive any changes. You still need to contact non-participating plans directly.

Can any participating organization access my data?

No. You control which organizations have access to your application information. When completing the application, you will indicate which participating healthcare organizations will be authorized to access your application data.

What if I participate with a health plan that is not participating in the CAQH Universal Provider Data source?

If you are contracted with a health plan that is not participating in the CAQH Universal Provider Data source, you can print a copy of the application and send it to that plan via mail or fax. All healthcare organizations and health plans are invited to participate in the CAQH Universal Provider Data source, regardless of whether they are members of CAQH.

I'm a MAC user. Can I access the online application?

Yes. Other MAC users have found that using one of the following browsers allowed successful completion of their application. If you find you have difficulty even after using one of the recommended browsers, please contact the Help Desk.

Safari – Apple Browser <http://www.apple.com/safari/download/>

Netscape v7 <http://channels.netscape.com/ns/browsers/archive70x.jsp>

Internet Explorer for MAC <http://www.microsoft.com/mac/downloads.aspx#IE>

Appendix D: Credentialing Opportunities



Provider Service Simplified

Credentialing Opportunities

HCAS has identified two areas that can further improve credentialing processing times. The first is receipt of a document verifying hospital privileges by the CVO and the second is provider use of electronic signatures in CAQH.

I. Hospital Privileges Documentation: In Massachusetts, a credentialing application must include a document validating hospital privileges to be considered complete. The following measures can be taken by hospitals to provide the hospital verification documentation.

Submission of hospital letters through CAQH: Hospital medical staff offices that coordinate credentialing on behalf of a provider have the option to fax the hospital letter to CAQH along with other credentialing supporting documents. If the letter is not included in the physician's online CAQH record when the application is deemed complete the application will be sent to the CVO for processing without this critical element. If this occurs the CVO will first check the hospital roster (see description below) for validation of hospital privileges. If a provider is not listed on the roster or the hospital does not submit rosters to the CVO, the CVO will contact the hospital medical staff office for the individual hospital letter needed during the primary source verification process.

Submission of Rosters to the CVO on a Monthly Basis: As described above, the CVO will check a hospital roster of staff physicians to verify hospital privileges before contacting the hospital for an individual hospital letter. The roster can be sent via email to RapidRoster@aperturedata.com or can be faxed to (502) 326-5372. The roster must contain the following information:

- The facility name must appear on all pages of the roster, or on a cover letter.
- A cover letter is addressed directly to Aperture and states that all providers who appear on the roster have clinical privileges that are in good standing (or have met requirements of appointment or reappointment according to medical staff bylaws) and that all providers have been credentialed according to Massachusetts regulation 243 CMR 3.05 of the Board of Registration in Medicine, if applicable.
- The cover letter and the roster are dated.
- The roster must include Staff Category and indicate which of the providers/categories have admitting rights.
- Optional information may be included such as Appointment and Reappointment Dates.

II. Hospital Use of Electronic Signatures in CAQH: During the credentialing process, a physician's authorization and release form is required to obtain third party verifications during the primary source verification process. Electronic signatures eliminate the need for the CVO to collect a written authorization and release form from the provider and can accelerate the application data gathering process. Listed below is information regarding electronic signatures:

- The use of an electronic signature is accepted by the National Committee for Quality Assurance (NCQA).
- The attached document issued by CAQH contains an overview of the CAQH electronic signature process. Please note that a hard copy of the authorization and release form is required the first time a provider is uses the CAQH system.



Appendix E: Application Follow up Letter

Subject: IMPORTANT CREDENTIALING INFORMATION from
HealthCare Administrative Solutions, Inc. (HCAS, www.hcasma.org)

«FirstName» «MiddleName» «LastName»
«CorrespondenceAddress»
«CorrespondenceAddress2»
«CorrespondenceCity», «CorrespondenceState» «CorrespondenceZip»

Provider Name: «FirstName» «MiddleName» «LastName»
CAQH Provider ID: «ProviderID»

HCAS participating plans use the CAQH® Universal Provider Data source (UPD) to collect and store credentialing information and supporting documents. One or more of the HCAS participating health plans is in the process of credentialing you to begin or continue participation in its provider network(s). However, your CAQH record is incomplete. To continue this process, please complete your credentialing application in CAQH, designate the health plan(s) that you authorize to access your information, and fax supporting documents to CAQH. Once you have submitted your application and supporting documents, the primary source verification process will occur.

Credentialing application data and supporting documents must be submitted within 30 days of receipt of this letter.

You may complete a credentialing application using one of the following methods:

1) Online – recommended. Please register and login to the CAQH Universal Provider Data source (UPD) at <https://upd.caqh.org/oas/>. You will see an electronic version of either the Integrated Massachusetts Application (IMA), or the applicable credentialing application for providers who do not reside in Massachusetts. HCAS recommends using the audit feature at the bottom of each page to highlight data elements required within the application that can accelerate the data-entry session.

2) Fax. If you are a new provider to CAQH, you may choose to fax your application information to CAQH at (866) 293-0414.

Submission of Supporting Documents

Supporting documents may be faxed to CAQH at (866) 293-0414. The following documents are required for Massachusetts providers; requirements may vary for other states.

- The first time you enter the system, a signed and dated Authorization and Release Form. Future recredentialing cycles you will be able to attest online.
- An up-to-date Curriculum Vitae (CV)—initial credentialing only.
- A current malpractice face sheet.
- Two (2) reference letters where applicable (i.e., non-hospital affiliated providers).

If you have any questions about completing the CAQH application process, please call the toll-free Provider Help Desk at (888) 599-1771. CAQH representatives are available Monday through Thursday from 7:00 a.m. to 9:00 p.m., and Friday from 7:00 a.m. to 7:00 p.m. ET.

This communication is intended only for the person or entity to which it is addressed and may contain confidential and/or privileged material. Any review, retransmission, dissemination or other use of, or taking of any action in reliance upon, this information by persons or entities other than the intended recipient is prohibited. If you received this in error, please destroy this communication.

Appendix F: Aperture Missing Information Notification



| Aperture's Easy Response System |
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| Fax: Fax your response with this cover page to 1-866-293-0421 |
| Call: Talk to our Customer Service Representatives by calling 1-800-398-0335 |
| Mail: Send your response with this cover page to: Aperture PO Box 221049 Louisville, KY 40252-1049 |

1/9/2008

URGENT

Credentials Request For:
DIANA CURTSINGER

Client(s) Requesting Information:
Appropriate HCAS Plan Name

CURTSINGER CARE
9613 SR 113
BERLIN HEIGHTS, WI 44814

Purpose of this communication:

In order to process your credentialing application to renew your participation with the provider network(s) listed above, please provide the below information and return within three (3) business days.

Item (s) Requested:

IMPORTANT: Please include this bar-coded cover sheet in your response to this request. The bar code is a unique code that corresponds to your credentialing file. Thank you for your assistance.

Confidentiality Notice

The documents accompanying this telecopy transmission contain confidential information. This information is intended only for use by the individual or entity named above. The recipient of this information is prohibited from disclosing this information to any other unauthorized party. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or action taken in reliance on the contents of these documents is strictly prohibited. If you have received this telecopy in error, please notify the sender immediately to arrange for return of these documents.

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| 4 | 110 | <p>To: Provider name, Provider ID Subject: CAQH Application Not Completed</p> <hr/> <p>Our records indicate that you registered with the CAQH Universal Provider DataSource or requested a Paper Application on {{StatusDate}}, but we have not received your application submission. Please use the following link https://upd.caqh.org/oas to access the Universal Provider DataSource.</p> <p>If you prefer to complete a paper application and/or need additional assistance in getting started, please contact the Provider Help Desk at caqh.updhelp@acsgs.com or (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please include your CAQH provider ID in e-mail messages or have it available when you use our toll-free support.</p> <p>Thank you for your interest in the CAQH Universal Provider DataSource. The CAQH credentialing initiative is focused on simplifying the credentialing application process for practitioners and participating organizations. The system has been designed to ensure the credentialing application process is efficient for you as a provider, and it is to your benefit that you take advantage of this system.</p> |
| 5 | 111 | <p>To: Provider name, Provider ID Subject: CAQH Application Not Completed</p> <p>Our records indicate that you registered with the CAQH Universal Provider DataSource or requested a Paper Application on {{StatusDate}}, but we have not received your application submission. Please use the following link https://upd.caqh.org/oas to access the Universal Provider DataSource. This is the final reminder before your status will be changed to "Non-Responsive".</p> <p>If you prefer to complete a paper application and/or need additional assistance in getting started, please contact the Provider Help Desk at caqh.updhelp@acsgs.com or (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please include your CAQH provider ID in e-mail messages or have it available when you use our toll-free support.</p> <p>Thank you for your interest in the CAQH Universal Provider DataSource. The CAQH credentialing initiative is focused on simplifying the credentialing application process for practitioners and participating organizations. The system has been designed to ensure</p> |

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| | | the credentialing application process is efficient for you as a provider, and it is to your benefit that you take advantage of this system. |
| 7 | 145 | <p>To: Provider name, Provider ID Subject: CAQH Application Follow-up</p> <p>We have processed and audited your CAQH credentialing application. During the audit process, an omission with your application was identified. You will receive a detailed explanation and instructions for resolution via your preferred method of contact (fax or email) within the next week. During this processing time, the Help Desk will not have access to your data.</p> <p>If you have questions, please contact the Help Desk at caqh.updhelp@acsgs.com or you may call toll-free 888-599-1771. Please include your CAQH provider ID in e-mail messages or have it available when you use our toll-free support.</p> <p>Thank you for using the CAQH Universal Provider DataSource.</p> |
| 8 | | <p>Sample text of letter on CAQH letterhead:</p> <p>Dear Dr. _____:</p> <p>Thank you for submitting your credentialing application materials to the Council for Affordable Quality Healthcare (CAQH). As of the date of this letter, we have not received all of the information necessary to forward your application to the health plan(s) you designated. In order to complete your application, we ask that you review each of the problems listed below and provider responses directly inside the box(es) provided. Please be certain to write legibly. Please send only one letter per fax.</p> <p><i>In answering the questions below, use only this form. Please do not send attachments or other documents.</i></p> <ol style="list-style-type: none"> <p><i>Location:</i> Page 2: State License #1 – State <i>Problem:</i> Please select the state that issued your license.</p> <p>_____</p> <p><i>Location:</i> Page 2: State Controlled Substance #1-Expiration Date <i>Problem:</i> Please enter your CDS expiration date(MMDDYYYY)</p> <p>_____</p> <p>Attestation: The information contained with this letter shall serve as a permanent addendum to my application submitted on _____ and shall be subject to all terms and conditions set forth in the Standard Authorization, Attestation, and Release. By my signature below, I certify that all information provided</p> |

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| | | <p>by me in this letter is true and correct to the best of my knowledge and belief.</p> <p>Signature_____ Date_____</p> <p>Please be certain to answer all questions, or additional follow up may be required. When complete, fax all pages of this letter and all supporting documents (if applicable) to CAQH at 1-866-293-0414. If you have questions, please do not hesitate to contact the CAQH Provider Help Desk at 1-888-599-1771 between 7:00am to 7:00pm EST. Call agents cannot take your information over the phone; however, we will be happy to assist you with any other questions about your application.</p> <p>Sincerely, CAQH Application Follow Up Team</p> |
| 9 | | See #8 for sample letter |
| 10 | 113 | <p>To: Provider name, Provider ID Subject: CAQH Supporting Documents Missing</p> <p>Your data file indicates that you submitted your application data on {{AttestDate}}, but have yet to fax in all of your supporting documents or the faxed image may be illegible. Please access the following link to the CAQH Universal Provider DataSource https://upd.caqh.org/oas to obtain your personalized fax coversheet. The fax coversheet is located on the Attachment section online. Please use this when submitting the documents listed below.</p> <p>The following documents are required to complete your application: {{MissingDocuments}}</p> <p>If you are unable to access the system or are experiencing difficulty, please call the toll-free Provider Help Desk, (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please have your CAQH provider ID available.</p> <p>Thank you for participating in the CAQH Universal Provider DataSource. The CAQH credentialing initiative is focused on simplifying the credentialing application process for practitioners and participating organizations.</p> |
| 11 | 114 | <p>To: Provider name, Provider ID Subject: CAQH Supporting Documents Missing</p> <p>Your data file indicates that you submitted your application data on {{AttestDate}}, but have yet to fax in all of your supporting documents or the faxed image may be illegible. Please note that your application is not complete without the supporting documentation.</p> <p>Please access the following link to the CAQH Universal Provider</p> |

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| | | <p>DataSource https://upd.caqh.org/oas to obtain your personalized fax coversheet. The fax coversheet is located on the Attachment section online. Please use this when submitting the documents listed below.</p> <p>The following documents are required to complete your application: {{MissingDocuments}}</p> <p>If you are unable to access the system or are experiencing difficulty, please call the toll-free Provider Help Desk, (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please have your CAQH provider ID available.</p> <p>Thank you for participating in the CAQH Universal Provider DataSource. The CAQH credentialing initiative is focused on simplifying the credentialing application process for practitioners and participating organizations. The system has been designed to ensure the credentialing application process is efficient for you as a provider, and it is to your benefit that you take advantage of this system.</p> |
| 12 | 115 | <p>To: Provider name, Provider ID Subject: CAQH Supporting Documents Missing</p> <p>Your data file indicates that you submitted your application data on {{AttestDate}}, but have yet to fax in all of your supporting documents or the faxed image may be illegible. Please note that your application is not complete without the supporting documentation. This is the final reminder before your status will be changed to "Non-Responsive".</p> <p>Please access the following link to the CAQH Universal Provider DataSource https://upd.caqh.org/oas to obtain your personalized fax coversheet. The fax coversheet is located on the Attachment section online. Please use this when submitting the documents listed below.</p> <p>The following documents are required to complete your application: {{MissingDocuments}}</p> <p>If you are unable to access the system or are experiencing difficulty, please call the toll-free Provider Help Desk, (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please have your CAQH provider ID available.</p> <p>Thank you for participating in the CAQH Universal Provider DataSource. The CAQH credentialing initiative is focused on simplifying the credentialing application process for practitioners and participating organizations. The system has been designed to ensure the credentialing application process is efficient for you as a provider, and it is to your benefit that you take advantage of this system.</p> |

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| 13 | 116 | <p>To: Provider name, Provider ID Subject: CAQH Documentation Submission Successful</p> <p>Thank you for participating in the CAQH Universal Provider DataSource! Your supporting documents will now proceed through a Quality Review check for illegible or missing documentation. We will notify you if any documents need to be resubmitted or if any are outstanding.</p> <p>We now have the following documents on file: {{CurrentDocuments}}</p> <p>Please note, your application will not be considered complete until you receive our confirmation notification marked "Application Complete".</p> |
| 14 | 123 | <p>To: Provider name, Provider ID Subject: CAQH Confirmation: Application Complete</p> <p>Thank you for participating in the CAQH Universal Provider DataSource! We are pleased to inform you that your data file and supporting documentation are complete. We have notified all authorized participating plans of this new status.</p> <p>We would like to remind you that complete provider files require a new attestation every 120 days even when no changes to your file are necessary. For your convenience, we will begin sending you email or fax reminders 2 weeks prior to your reattest anniversary date, encouraging you to review and reattest to the accuracy of the information in your file.</p> <p>You may login to the Universal Provider DataSource anytime you would like to review or update and reattest to your data on file. The following link will provide easy access https://upd.caqh.org/oas.</p> <p>Please contact us with your questions at caqh.updhelp@acsgs.com or through our toll-free Provider Help Desk (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please include your CAQH provider ID in e-mail messages or have it available when you use our toll-free support.</p> |
| 15 | 124 | <p>To: Provider name, Provider ID Subject: CAQH Non-Responsive Status</p> <p>The CAQH credentialing initiative is focused on simplifying the credentialing application process for practitioners and participating organizations. The system has been designed to ensure the credentialing application process is efficient for you as a provider, and it is to your benefit that you take advantage of this system.</p> |

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| | | <p>Your record indicates that you have failed to respond to previous messages in order to complete your application and/or attest to the data. For this reason, your status has been marked "Non-Responsive" and your application data is not available for retrieval from authorized participating Plans.</p> <p>To reactivate your data file you may access the CAQH Universal Provider DataSource https://upd.caqh.org/oas, then review, complete and attest to the accuracy of the information. Instructions located on the Home and Start Page will assist you in logging into the system, navigating to your individual record and completing the application.</p> <p>If you are unable to access the system you may request your current application data via fax by calling this toll-free Provider Help Desk, (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please have your CAQH provider ID available.</p> |
| 16 | 125 | <p>To: Provider name, Provider ID Subject: 15 Day CAQH Reattestation Notice</p> <p>Thank you for participating in the CAQH Universal Provider DataSource! This message is to notify you that you should review your credentialing data in the Universal Provider DataSource, make any necessary updates, and complete a new attestation within the next 15 days. This re-attestation process is designed to ensure that your information is kept up-to-date so participating health plans and other organizations can use it for their credentialing processes, as well as for other purposes such as keeping directories current. We ask that you re-attest three times per year. You can complete this process in a few mouse clicks. If you do not re-attest, many participating organizations may be required to contact you directly for credentialing materials.</p> <p>To complete the re-attestation process, please follow these steps:</p> <ol style="list-style-type: none"> 1. Log onto the Online Application System (https://upd.caqh.org/oas) using your Username and Password. 2. Check the Attachments tab to see if any supporting documents (e.g., DEA certificate or proof of professional liability insurance) need to be updated. If so, please be sure to update the appropriate expiration date by going to that section(s), updating the field(s), and click the 'Audit' button at the bottom of page. 3. Go to the Audit tab and select Run Audit. 4. Go to the Attest tab, and follow the quick 3-step attestation process to finalize your updates. <p>Tips:</p> <ul style="list-style-type: none"> - You can always click on the Answer tab to make any |

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| | | <p>additional changes. Just remember to follow the above process afterwards to finalize your edits.</p> <ul style="list-style-type: none"> - Be sure to send in any supporting documents (e.g., DEA certificate or proof of professional liability insurance) that need to be updated. You do not need to fax an updated Authorization, Attestation and Release form. For other documents, print a Fax Cover Sheet, attach your updated documents, and fax to (866) 293-0414 (toll free). <p>If you are unable to access the system or experiencing difficulty, please call the toll-free Provider Help Desk, (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please have your CAQH provider ID available.</p> |
| 17 | 126 | <p>To: Provider name, Provider ID Subject: 10 Day CAQH Reattestation Notice</p> <p>Thank you for participating in the CAQH Universal Provider DataSource! This message is to notify you that you should review your information in the Universal Provider DataSource within the next 10 days. If you do not re-attest, many participating organizations may be required to contact you directly for credentialing materials.</p> <p>To complete the re-attestation process, please follow these steps:</p> <ol style="list-style-type: none"> 1. Log onto the Online Application System (https://upd.caqh.org/oas) using your Username and Password. 2. Check the Attachments tab to see if any supporting documents (e.g., DEA certificate or proof of professional liability insurance) need to be updated. If so, please be sure to update the appropriate expiration date by going to that section(s), updating the field(s), and click the 'Audit' button at the bottom of page. 3. Go to the Audit tab and select Run Audit. 4. Go to the Attest tab, and follow the quick 3-step attestation process to finalize your updates. <p>Tips:</p> <ul style="list-style-type: none"> - You can always click on the Answer tab to make any additional changes. Just remember to follow the above process afterwards to finalize your edits. - Be sure to send in any supporting documents (e.g., DEA certificate or proof of professional liability insurance) that need to be updated. You do not need to fax an updated Authorization, Attestation and Release form. For other documents, print a Fax Cover Sheet, attach your updated documents, and fax to (866) 293-0414 (toll free). <p>If you are unable to access the system or experiencing difficulty, please call the toll-free Provider Help Desk, (888) 599-1771 (Help</p> |

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| | | Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please have your CAQH provider ID available. |
| 18 | 127 | <p>To: Provider name, Provider ID Subject: 5 Day CAQH Reattestation Notice</p> <p>Thank you for participating in the CAQH Universal Provider DataSource! This message is to notify you that you should review your information in the Universal Provider DataSource within the next 5 days. If you do not re-attest, many participating organizations may be required to contact you directly for credentialing materials.</p> <p>To complete the re-attestation process, please follow these steps:</p> <ol style="list-style-type: none"> 1. Log onto the Online Application System (https://upd.caqh.org/oas) using your Username and Password. 2. Check the Attachments tab to see if any supporting documents (e.g., DEA certificate or proof of professional liability insurance) need to be updated. If so, please be sure to update the appropriate expiration date by going to that section(s), updating the field(s), and click the ‘Audit’ button at the bottom of page. 3. Go to the Audit tab and select Run Audit. 4. Go to the Attest tab, and follow the quick 3-step attestation process to finalize your updates. <p>Tips:</p> <ul style="list-style-type: none"> - You can always click on the Answer tab to make any additional changes. Just remember to follow the above process afterwards to finalize your edits. - Be sure to send in any supporting documents (e.g., DEA certificate or proof of professional liability insurance) that need to be updated. You do not need to fax an updated Authorization, Attestation and Release form. For other documents, print a Fax Cover Sheet, attach your updated documents, and fax to (866) 293-0414 (toll free). <p>If you are unable to access the system or experiencing difficulty, please call the toll-free Provider Help Desk, (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please have your CAQH provider ID available.</p> |
| 19 | 128 | <p>To: Provider name, Provider ID Subject: CAQH Data Expiration Notice</p> <p>Thank you for participating in the CAQH Universal Provider DataSource! This message is to notify you that your attestation has expired. As a result, your credentialing information may be too old for authorized health plans and other organizations to use for their credentialing processes. As you may know, accrediting bodies and state agencies require that these organizations use current information</p> |

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| | | <p>for these processes. You can quickly update your attestation in a few mouse clicks. If you do not re-attest, many participating organizations may be required to contact you directly for credentialing materials.</p> <p>To complete the re-attestation process, please follow these steps:</p> <ol style="list-style-type: none"> 1. Log onto the Online Application System (https://upd.caqh.org/oas) using your Username and Password. 2. Check the Attachments tab to see if any supporting documents (e.g., DEA certificate or proof of professional liability insurance) need to be updated. If so, please be sure to update the appropriate expiration date by going to that section(s), updating the field(s), and click the ‘Audit’ button at the bottom of page. 3. Go to the Audit tab and select Run Audit. 4. Go to the Attest tab, and follow the quick 3-step attestation process to finalize your updates. <p>Tips:</p> <ul style="list-style-type: none"> - You can always click on the Answer tab to make any additional changes. Just remember to follow the above process afterwards to finalize your edits. - Be sure to send in any supporting documents (e.g., DEA certificate or proof of professional liability insurance) that need to be updated. You do not need to fax an updated Authorization, Attestation and Release form. For other documents, print a Fax Cover Sheet, attach your updated documents, and fax to (866) 293-0414 (toll free). <p>If you are unable to access the system or experiencing difficulty, please call the toll-free Provider Help Desk, (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please have your CAQH provider ID available.</p> |
| 20 | 129 | <p>To: Provider name, Provider ID Subject: CAQH Data Expiration Notice</p> <p>Thank you for participating in the CAQH Universal Provider DataSource! This message is to notify you that your attestation expired 14 days ago. If you do not re-attest, many participating organizations may be required to contact you directly to refresh outdated credentialing materials.</p> <p>To complete the re-attestation process, please follow these steps:</p> <ol style="list-style-type: none"> 1. Log onto the Online Application System (https://upd.caqh.org/oas) using your Username and Password. 2. Check the Attachments tab to see if any supporting documents (e.g., DEA certificate or proof of professional liability insurance) need to be updated. If so, please be sure to update the appropriate expiration date by going to that section(s), updating the |

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| | | <p>field(s), and click the ‘Audit’ button at the bottom of page.</p> <ol style="list-style-type: none"> 3. Go to the Audit tab and select Run Audit. 4. Go to the Attest tab, and follow the quick 3-step attestation process to finalize your updates. <p>Tips:</p> <ul style="list-style-type: none"> - You can always click on the Answer tab to make any additional changes. Just remember to follow the above process afterwards to finalize your edits. - Be sure to send in any supporting documents (e.g., DEA certificate or proof of professional liability insurance) that need to be updated. You do not need to fax an updated Authorization, Attestation and Release form. For other documents, print a Fax Cover Sheet, attach your updated documents, and fax to (866) 293-0414 (toll free). <p>If you are unable to access the system or experiencing difficulty, please call the toll-free Provider Help Desk, (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please have your CAQH provider ID available.</p> |
| 21 | 130 | <p>To: Provider name, Provider ID Subject: CAQH Data Expiration Notice</p> <p>Thank you for participating in the CAQH Universal Provider DataSource! This message is to notify you that your attestation expired 28 days ago. If you do not re-attest, many participating organizations may be required to contact you directly to refresh outdated credentialing materials.</p> <p>To complete the re-attestation process, please follow these steps:</p> <ol style="list-style-type: none"> 1. Log onto the Online Application System (https://upd.caqh.org/oas) using your Username and Password. 2. Check the Attachments tab to see if any supporting documents (e.g., DEA certificate or proof of professional liability insurance) need to be updated. If so, please be sure to update the appropriate expiration date by going to that section(s), updating the field(s), and click the ‘Audit’ button at the bottom of page. 3. Go to the Audit tab and select Run Audit. 4. Go to the Attest tab, and follow the quick 3-step attestation process to finalize your updates. <p>Tips:</p> <ul style="list-style-type: none"> - You can always click on the Answer tab to make any additional changes. Just remember to follow the above process afterwards to finalize your edits. - Be sure to send in any supporting documents (e.g., DEA certificate or proof of professional liability insurance) that need to be updated. You do not need to fax an updated Authorization, |

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| | | <p>Attestation and Release form. For other documents, print a Fax Cover Sheet, attach your updated documents, and fax to (866) 293-0414 (toll free).</p> <p>If you are unable to access the system or experiencing difficulty, please call the toll-free Provider Help Desk, (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please have your CAQH provider ID available.</p> |
| 22 | 131 | <p>To: Provider name, Provider ID Subject: CAQH Data Expiration Notice</p> <p>Thank you for participating in the CAQH Universal Provider DataSource! This message is to notify you that your attestation expired 42 days ago. If you do not re-attest, many participating organizations may be required to contact you directly to refresh outdated credentialing materials.</p> <p>To complete the re-attestation process, please follow these steps:</p> <ol style="list-style-type: none"> 1. Log onto the Online Application System (https://upd.caqh.org/oas) using your Username and Password. 2. Check the Attachments tab to see if any supporting documents (e.g., DEA certificate or proof of professional liability insurance) need to be updated. If so, please be sure to update the appropriate expiration date by going to that section(s), updating the field(s), and click the 'Audit' button at the bottom of page. 3. Go to the Audit tab and select Run Audit. 4. Go to the Attest tab, and follow the quick 3-step attestation process to finalize your updates. <p>Tips:</p> <ul style="list-style-type: none"> - You can always click on the Answer tab to make any additional changes. Just remember to follow the above process afterwards to finalize your edits. - Be sure to send in any supporting documents (e.g., DEA certificate or proof of professional liability insurance) that need to be updated. You do not need to fax an updated Authorization, Attestation and Release form. For other documents, print a Fax Cover Sheet, attach your updated documents, and fax to (866) 293-0414 (toll free). <p>If you are unable to access the system or experiencing difficulty, please call the toll-free Provider Help Desk, (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please have your CAQH provider ID available.</p> |
| 23 | 132 | <p>To: Provider name, Provider ID Subject: CAQH Reattestation Successful</p> |

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| | | <p>Thank you for participating in the CAQH Universal Provider DataSource! We are pleased to confirm that the reattestation for your application data was successful. Any changes made to your application data in the CAQH Data Repository have been provided to your authorized Plans in order to update their provider files.</p> <p>We would like to remind you that complete provider files require a new attestation every 120 days even when no changes to your file are necessary. For your convenience, we will begin sending you e-mail or fax reminders 2 weeks prior to your reattest anniversary date, encouraging you to review and reattest to the accuracy of the information in your file.</p> <p>You may login to the CAQH Universal Provider DataSource anytime you would like to review or update and reattest to your application data. The following link will provide easy access https://upd.caqh.org/oas.</p> <p>Please contact us with your questions at caqh.updhelp@acsgs.com or through our toll-free Provider Help Desk (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays).</p> |
| 25 | 139 | <p>To: Provider name, Provider ID Subject: CAQH - New Organization Requesting Access to Your Information</p> <p>Thank you for participating in the CAQH Universal Provider DataSource! The following organization would like to access your information electronically so that you do not have to complete a separate paper application:</p> <p>{{NewPlans}}</p> <p>If you would like to authorize release of your information to this organization, please take the following steps:</p> <ol style="list-style-type: none"> 1. Log onto the Online Application System (https://upd.caqh.org/oas) using your Username and Password. 2. Go to the Authorization tab, check the box next to the aforementioned organization, and click on the Next button. 3. Follow the quick 3-step attestation process to finalize your edits. <p>We will notify the aforementioned organization if you allow access to your record. Please note that your authorization is required before any organizations can access your information.</p> <p>For assistance, please contact our toll-free Provider Help Desk at caqh.updhelp@acsgs.com or (888) 599-1771 (Help Desk hours: 7am-9pm EST). Please have your CAQH Provider ID available when you</p> |

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| | | call. |
| 26 | 5 | <p>To: Provider name, Provider ID Subject: CAQH – Password Change</p> <p>We have processed a request to change your unique password for the Universal Provider DataSource.</p> <p>Please store your password in a secure location. If you lose your password or would like to change it, follow the Edit Account Info link on the start page and follow the instructions provided.</p> <p>If you have questions, please refer to the online help at https://upd.caqh.org/oas. You may also contact the Help Desk at caqh.updhelp@acsgs.com or toll-free at 888-599-1771. Please include your CAQH provider ID in e-mail messages or have it available when you use our toll-free support.</p> <p>Thank you for participating in CAQH.</p> |
| 27 | 153 | <p>To: Provider name, Provider ID Subject: Provider Fax Submission Illegible or Incomplete</p> <p>Your data file indicates that you submitted documents or application pages on [{{ OutstandingDocsDate }}], but these documents were unable to be processed either because the faxed image was illegible or there are missing required fields. Please re-fax your documents as soon as possible. The following documents are required to complete your application:</p> <p>{{ OutstandingDocs }}</p> <p>If you have any questions, please call the toll-free Provider Help Desk, (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday-Thursday, 7am-7pm EST Friday). Please have your CAQH Provider ID number available.</p> <p>Thank you for participating in the CAQH Universal Provider DataSource. The CAQH credentialing initiative is focused on simplifying the credentialing application process for practitioners and participating organizations.</p> |
| 28 | 163 | <p>To: Provider name, Provider ID Subject: CAQH Expired Attestation</p> |

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| | | <p>Thank you for using the CAQH Universal Provider DataSource! The CAQH Universal Provider DataSource is focused on simplifying the credentialing application process for practitioners and participating organizations. The system has been designed to ensure the credentialing application process is efficient for you as a provider, and it is to your benefit that you take advantage of this system.</p> <p>Your record indicates you have just completed all the application requirements; however, your attestation is now expired. As a result, your application data is not available for retrieval by authorized participating Plans.</p> <p>To make your data file current and complete, please access the CAQH Universal Provider DataSource http://www.caqh.org/cred, and login to the system. Instructions located on the Home and Start Page will assist you in logging into the system. Click on the 'Re-Attest' bubble to be taken to the 'Reattestation' page. Follow the three steps on that screen to Review, Review Complete and Attest.</p> <p>This is all you need to do to make your application available to authorized participating Plans.</p> <p>If you are unable to access the system you may request your current application data via fax by calling this toll-free Provider Help Desk, (888) 599-1771 (Help Desk hours: 7am-9pm EST Monday - Thursday and 7am-7pm EST on Fridays). Please have your CAQH provider ID available.</p> |
| 29 | 19 | <p>To: Provider name, Provider ID Subject: CAQH Request for Password</p> <p>Your password for the Universal Provider DataSource is: {{Password}}</p> <p>Please store your password in a secure location.</p> <p>If you have questions, please refer to the online help at https://upd.caqh.org/oas. You may also contact the Help Desk at caqh.updhelp@acsgs.com or toll-free at 888-599-1771. Please include your CAQH provider ID in e-mail messages or have it available when you use our toll-free support.</p> <p>Thank you for participating in CAQH.</p> |