

Multi-Payer Credentialing through Health Care Administrative Solutions (HCAS)

Credentialing Practices – A Massachusetts Retrospective Physician Credentialing Process Statement of Principles (2004)

Accomplishments:

- *Providers, health plans, and trade groups have collaborated to streamline credentialing process for physicians.*
- *Providers and health plans agreed to develop and utilize a standard credentialing application.*
- *Health plans are abiding by stringent processing timelines for new physician applicants.*
- *Certain hospital-based physicians are exempted from the credentialing process.*

Health plans took the next step to streamline credentialing procedures for physicians and extended the benefits to allied health professionals.

HCAS credentialing benefits for providers...

Simplification

- Physicians and allied health providers submit one standard credentialing application for use by seven HCAS plans, as well as other non-HCAS health plans. The application process, offered through the Coalition for Affordable Quality Healthcare (CAQH), reduces provider mailing costs. A free, online application process is also available.
- Providers only need to follow up with one organization for application status.
- A completed Integrated Massachusetts Application (IMA) can be printed from the CAQH database and submitted to other health plans in Massachusetts that accept the IMA, such as MassHealth.
- Providers determine “ownership” for the credentialing process, so that multiple provider organizations do not credential a provider with the same health plan more than once.

Ease

- Paper, fax, and online options are available. Providers can choose the best option for their business needs.
- Recredentialing every two years takes minutes. Future recredentialing cycles require minimal time and effort to update data elements.
- Prior to the implementation of the HCAS credentialing initiative, 8,000 Massachusetts providers already experienced the benefits of CAQH, and nearly 1,000 new users are added through HCAS each month.

Efficiency

- Health plans pursued a collaborative credentialing solution to avoid seven duplicative, individual credentialing processes.
- One third of monthly HCAS recredentialing activity requires no provider intervention. Up-to-date CAQH application data goes directly to the verification process.
- Providers who are in the CAQH database can move from one hospital to another, or from out-of-state, by merely updating their credentialing information in CAQH. A new credentialing application is not required.



HCAS is listening to you...

- HCAS postponed the project start date until January 2007 to create an early adopter program to provide valuable feedback to HCAS, and to avoid impeding provider NPI preparations.
- HCAS removed a CV requirement for recredentialing physicians and added online enhancements to the CAQH database to further reduce data entry requirements.
- HCAS released a common enrollment form in April 2007, which was created at the request of Massachusetts provider groups. Providers can submit the common form to all seven HCAS health plans, further streamlining provider administrative procedures.

Providers are talking...

Here is some early feedback from providers and credentialing administrators using the new process with HCAS, which went into effect in January 2007:

“HVMA representing over 800 providers thinks the new streamlined system will save time. Feedback indicates this is the way to go!”

Harvard Vanguard Medical Associates

“Once the physicians and office staff begin to use the online process, I think they’ll appreciate what a huge time-saver the whole initiative is for their practice.”

Linda Coyne
Manager, Provider & Payor Relations
Highland Healthcare Associates IPA

“My personal experience with CAQH has been excellent. It is a very intuitive and straightforward process with little to be improved upon.”

Andrew Sciannameo
UMass Memorial Medical Center
Department of Medical Staff Services/Provider Enrollment

“Representing 160 New Hampshire physicians, the First Choice PHO has used CAQH as their preferred credentialing data repository for the past two years. We endorse HCAS and their continued efforts to promote and implement a universal electronic credentialing application for physicians. Their efforts will benefit physician practices by eliminating the repetitive and burdensome processing of paper applications for insurance plan credentialing purposes.”

Joe Loring
Executive Director
First Choice PHO



“Lahey Clinic has been participating in the HCAS Early-Adopter recredentialing process since September 2006.

We have focused our attention on the online submission of credentialing data in an effort to reduce the time it takes for paper to be transported and transmitted from provider to CAQH. After the initial training period for our enrollment coordinators, we have found electronic transmission of data should provide a considerable time-saving for our group. The actual time that our staff spends doing data entry in the required format is considerable, and compared with our prior streamlined processes it seems there is much more up-front time per provider. However, there is less actual provider time required, and we are counting on the fact that the second round of recredentialing will/should be somewhat simpler, as there will be some baseline data in the system already.

We have also recently discovered an unexpected benefit to submitting the data electronically through CAQH: we have found that a good number of the providers requiring recredentialing for another health plan are already entered into the CAQH system. This allows us to print an IMA, and have the provider review the information and sign the attestations—a considerable time-savings compared to having providers complete an additional laborious application on paper.

In summary, Lahey Clinic has found the HCAS/CAQH process for submitting credentialing data electronically to one source to have a positive impact on the credentialing process.”

Lahey Clinic
Burlington, Ma