HCAS Credentialing Initiative Frequently Asked Questions

Q. When will HCAS start initial credentialing through Ingenix?
A. Initial credentialing for all providers in all states will begin in July.

Q. Will Ingenix accept the Massachusetts Integrated Application form by mail?
A. Ingenix has agreed to accept the form by mail for two years.

Q. How does the HCAS initiative relate to the National Provider Identification (NPI) project? When can NPI numbers be used?
A. NPI is a separate initiative and each Plan has an implementation strategy. Ingenix will capture NPI numbers as the initiative is rolled out by the Plans.

Q. Does Ingenix have a Web site?
A. The Ingenix Web site is www.ingenix.com.

Q. Has the “go live” date for Massachusetts MD and DO recredentialing through Ingenix changed?
A. We are re-evaluating our credentialing implementation strategy. While we have not completed that process, we can acknowledge that we will be pushing the “go live” date for MD and DO recredentialing back from the originally planned date of 1/1/06. Once we finalize our new plan, we will communicate it widely.

The new “go live” date for Massachusetts MD and DO recredentialing is April 3, 2006.

Q. What is the new credentialing initiative all about?
A. HealthCare Administrative Solutions, Inc. (HCAS), an entity founded by six major Massachusetts health plans in January 2005, has signed a contract with Ingenix, a national Credentialing Verification Organization and provider data management company, to simplify the provider credentialing and recredentialing process.

Ingenix will create a single point of entry for physicians and other practitioners to submit information that HCAS member health plans use to verify their qualifications to treat patients in Massachusetts. Ingenix will perform data collection of most information and primary source verification for credentialing and recredentialing in those states that encompass the plans’ provider networks.

Q. Who is HCAS and what is its role?
A. The HCAS is a nonprofit corporation formed by Blue Cross Blue Shield of Massachusetts, Fallon Community Health Plan, Harvard Pilgrim Health Care, Neighborhood Health Plan,
Network Health and Tufts Health Plan to collaborate on administrative simplification initiatives. HCAS is governed by a board of directors, and operations are executed by committees that focus on operations, information technology, communications, legal services and vendor support.

**Q. Who is funding this new credentialing initiative?**
A. This initiative is being completely funded by the participating health plans.

**Q. Why is HCAS creating this new process for credentialing?**
A. As all health plans are required to credential and recredential their providers, there are significant efficiencies to be gained by centralizing and streamlining the process. Streamlining credentialing allows providers to complete the process once for several health plans instead of doing so for each plan. The benefits to providers include efficiency, cost savings and simplification of processes that allow them to focus less on administration.

For health plans, the new process will improve the consistency and accuracy of applications. For the industry as a whole, the standardization of provider credentialing reduces unnecessary administrative expense.

**Q. Who is Ingenix and why was their product chosen?**
A. HCAS invited a number of companies to compete for this initiative. Ingenix, one of the industry’s leading health information companies, was chosen for its track record of success in providing similar services. Ingenix’s Aperture unit, the nation’s largest Credentials Verification Organization (CVO), will be providing primary source verification.

**Q. When will this new process go into effect?**
A. Work is currently under way to establish a timeline for the implementation of the new process, and details will be shared with providers as soon as they become available.

**Q. Which providers are affected by this new initiative?**
A. Each participating health plan has its own requirements regarding which providers must be credentialed. You are advised to contact each health plan with which you are affiliated for further information.

**Q. How do providers submit their credentialing information?**
A. When a health plan alerts Ingenix that a new provider would like to become affiliated, Ingenix will send him or her a welcome kit with a provider ID (i.e., username and password). The provider then visits the Web site of the Council for Affordable Quality Healthcare (CAQH), www.caqh.org, to access the Universal Credential DataSource (UCD). It is in the UCD that the provider will complete the application.

Physicians will be using the Massachusetts Integrated Application for Initial Credentialing/Appointment, not the CAQH application. The Massachusetts Integrated Application is a standardized application launched in 2004 by the Roundtable, an industry collaborative under the auspices of the Massachusetts Medical Society.
Other clinical staff in Massachusetts will use the Massachusetts Integrated Application online, which will be adapted to non-physicians.

Outside Massachusetts, providers must use the CAQH application.

Also on the site, providers authorize Ingenix to provide to a specific health plan, or to all participating health plans, access to their credentialing data.

**Q. How long will it take to complete the application online?**  
A. The online application is user-friendly, with pull-down menus and help options. It will take about two hours to complete the initial application. All information entered in the application is saved, so the provider can leave the site and return, completing the application in as many sessions as needed.

Further, once the information is entered and the application is complete, it becomes saved in the system, making recredentialing a much easier and faster process.

**Q. If the application is completed online, how will supporting paper documents, such as copies of state licenses and W-9 forms, be submitted?**  
A. Supporting documents that exist in paper form can be faxed to Ingenix. Ingenix will supply the fax number.

**Q. Who do I contact if I have questions concerning the online application?**  
A. The site has a Quick Reference Guide that can help providers complete the online application. Further questions can be directed to the CAQH Help Desk, 888-599-1771.

**Q. When using the UCD, how do I ensure the privacy of my data?**  
A. The UCD operates under strict privacy guidelines. Providers first register with the site before submitting credentialing information, and are asked to authorize health plans, hospitals or other organizations to access their information for credentialing purposes.

**Q. Can paper applications be submitted?**  
A. While providers are encouraged to complete the application online for a faster and more accurate process, they may also submit the application by fax. Ingenix will supply fax information.

**Q. Once Ingenix does primary source verification, does that mean I’m credentialed?**  
A. As the health plans have their own credentialing requirements, they will make their own independent decisions about credentialing.

**Q. How long will it take for a decision to be made?**  
A. The participating health plans have agreed that for 95 percent of physician applications, they will provide 30-day turnaround if the applications are clean and complete. Refer to the Massachusetts Physician Credentialing Fact Sheet, which can be found at www.massmed.org, for a list of required information for the application.
Q. How will I be informed of the credentialing decision?
A. The health plans evaluating your credentialing application will inform you directly of their decision.

Q. What will be the process for recredentialing—will I need to complete a new application?
A. Ingenix will prompt providers to review and update their data every 120 days. When it comes time for recredentialing—it varies by state—Ingenix will have the most recent provider data. The health plans will directly access this information for their recredentialing decision.

Q. I became credentialed recently, do I still need to fill out an application?
A. It has not yet been determined as to whether legacy provider data will be loaded into Ingenix’s system. Details will be shared on this issue as soon as they become available.

Q. My hospital (or physician organization) has a delegation or special agreement. Do I need to submit an application through Ingenix?
A. Each participating health plan will be making its own decision concerning delegation agreements. You will need to contact the plans with which you are affiliated.

Q. Will other health plans be joining this initiative?
A. The goal of subsequent phases of this initiative is to expand the number of participating health plans.

Q. How will further details on this initiative be communicated?
A. Further details will be communicated in a variety of ways. HCAS is currently building a Web site, which will be the central source for information on this credentialing initiative. The participating plans will also be communicating regularly with their provider network through their standard communication vehicles.