

CREDENTIALING AND PROVIDER CHANGE INFORMATION

SUMMARY

This section explains the necessity of completing a credentialing application for providers. It also focuses on where to send personal change information.

CREDENTIALING APPLICATION

All providers prior to being contracted must be credentialed. The credentialing process takes from 90-120 days from the date of the received application.

In order to start the credentialing process a provider must submit an intent letter to the contracting department at MCC. This intent letter requires the following information.

- NAME OF THE GROUP (IF APPLICABLE)
- NAME OF PROVIDER OR PROVIDERS ASSOCIATED WITH GROUP
- TIN NUMBER—IDENTIFY IF THIS TIN IS USED FOR IN-PATIENT/OUTPATIENT SERVICES, FACILITY OR PROFESSIONAL CHARGES.
- TYPE OF SERVICES REQUESTED
- SPECIALTY OF PROVIDERS
- CLINICAL ADDRESSES
- BILLING ADDRESS
- CONTACT PERSON
- COPY OF CURRENT W9 FORM

You can expedite the credentialing process by submitting a completed Credentialing application included in this manual. If you require additional copies, or have used or misplaced this copy, *please contact our Provider Relations department at (702) 792-2994 x 275.*

A copy of the application and a W9 form may be printed from the MCC website at www.mccnevada.com.

Please read the Credentialing cover letter in full as it describes the importance of completing the forms properly and in a timely manner.

WHAT IS THE CREDENTIALING PROCESS AND WHY IS IT NECESSARY?

MCC requires all providers to be credentialed pursuant to NCQA guidelines. All information submitted in support of the credentialing application is verified through the applicable state or federal agency, board or hospital. All information relating to the credentialing application is then reviewed by the Credentialing Committee to ensure the quality of the network and the safety of our members.

CREDENTIALING AND RECREDENTIALING INFORMATION (CONT'D)

Once Credentialing has been approved the contracts department will relay effective date and education information to the new provider. Approval of credentialing does not guarantee contract acceptance nor does the approval date for credentialing represent the effective date of contracts for MCC.

DENIAL OF AN APPLICATION FOR CREDENTIALING

Once a provider has completed the credentialing process and the credentialing committee has made a decision to deny the credentialing application. The provider may not reapply for credentialing for a period of 1 year from the date of the credentialing decision. However, the provider does have the ability to appeal a denial if new information changes the pertinent facts.

RECREDENTIALING

The Recredentialing process is a continuous process that starts from the day after completion of your initial credentialing through the completion of your Recredentialing application 3 years later.

MCC is required to monitor all providers for Quality Issues, Sanctions and Restriction information from agencies such as the State Licensing Boards, CMS (Medicare/Medicaid). It is your responsibility as a provider to notify MCC of any adverse actions taken by a Licensing agency, Hospital, CMS (Medicare/Medicaid), or malpractice carrier on your behalf during this 3-year Recredentialing process time within 30 days of notification of such action.

In order to update your information, MCC will require a current copy of the following information:

- State Licensure
- DEA Registration Certificate
- State Pharmacy Certificate
- Current Malpractice Face-sheet
- Current Clinical Address and Phone and Fax Numbers

Please remember to fax these certificates prior to their expiration dates. ***Please fax Board Certification changes and updates to the MCC Provider Relations Department –Credentialing (702) 933-6659.***

Periodically MCC will send to you a form to update your demographic information and to answer a disclosure questionnaire. This information must be completed no later than 3 years from your last credentialing date.

CREDENTIALING AND PROVIDER CHANGE INFORMATION (CONT'D)

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The Recredentialing application is included in this manual. If you require additional copies, or have used or misplaced this copy, *please contact our Provider Relations department at (702) 792-2994 x 484*. A copy of the application may be printed from the MCC website www.mccnevada.com.

Once your Recredentialing update packet has been completed and approved the Recredentialing cycle begins again. You will be notified in writing of your Recredentialing approval date.

If the MCC Credentialing Committee has denied the Recredentialing process the provider will be afforded an appeals process.