



MVP Provider Participation Guide

Your guide to initiating and retaining
participation with MVP Health Care.[®]

Updated December 2020

How to Become a Participating Provider

This Provider Participation Guide is a step-by-step reference tool for understanding the credentialing and registration processes, as well as recredentialing, and maintaining your Provider information with MVP.

MVP requires that all Providers complete the credentialing or registration process to participate in our network. MVP will not reimburse Providers as in-network if they have not completed the credentialing or registration process.

If a Participating Provider, who is already credentialed with MVP, is joining an MVP provider group, please complete the online **Provider Change of Information Form**. The provider does not need to complete the credential process again.

By partnering with top practitioners, MVP Health Care is able to provide our members access to the highest quality health care.



Visit CAQH at **proview.caqh.org**.

- If you do not already have an existing CAQH application, follow the steps on the website to create an application.
- Ensure that the Primary Practice State in which you practice is listed. If the Primary Practice State of your CAQH application is listed as Massachusetts, you must complete the **MVP Supplemental Provider Credentialing Application**.

Confirm the fields listed below are complete on the CAQH application.

Personal Information: This section must be complete, including any previous names used and your email address.

License, DEA, and New York State Medicaid ID (MMIS#):

- All current and previous licenses must be listed, as well as a license for each state in which you will practice and provide services to MVP Members.
- Current DEA for each state in which you will provide services for MVP Members.
- Providers must have an active or pending New York State MMIS# to participate with and be reimbursed for services provided to MVP Medicaid Managed Care, MVP Child Health Plus, and MVP Harmonious Health Care Plan® (HARP) Members. To apply, please visit: **emedny.org/info/providerenrollment**.

Education and Training: Include all education and training with completion date of each.

Specialty: Specialty for which you are applying; note that MVP recognizes only ABMS/AOA Physician Specialty boards.

Practice Information: List all of your current practice information and addresses.

Hospital Affiliation: MVP requires Physicians, Podiatrists, Naturopaths, CNMs, and NPs to have admitting privileges or other acceptable arrangements at an MVP-participating hospital.

Please note, Diagnostic Radiologists and Ancillary Providers do not require hospital affiliation.

- The hospital must participate for all the lines of business for which you are requesting to be contracted.
- If you do not have privileges at an MVP-participating hospital, you must complete the **MVP Practitioner Continuity of Care (COC) Statement** indicating who will admit on your behalf.
- Physicians practicing in an Urgent Care facility do not need admitting privileges if the MVP participating Urgent Care facility's transfer protocol has been approved by MVP. This can be verified by your own Urgent Care Center's credentialing contact.

Malpractice Information: MVP requires Providers to have \$1.0/\$3.0 million coverage in malpractice insurance.

- Ensure your current malpractice insurance certificate is uploaded to your CAQH application.

Credentialing Contact Information: Confirm information is complete on CAQH application.

Work History: You must include the start and end dates of all places of employment, including your current employer. If there are any gaps of more than six months, you must provide an explanation.

Disclosure Questions: Providers must complete this section. For the most timely processing, make sure that:

- All malpractice cases are disclosed;
- Any reports that would include malpractice case settlements made to NPDB are disclosed.

Required Supporting Documents: All required supporting documents must be up-to-date and uploaded to your application:

- Attestation signed and dated (signature stamps are not acceptable).
- Copy of license for all states in which you will provide service to MVP Members.
- Copy of DEA for each state in which you will practice.
- Current Malpractice Face Sheet.
- Copy of **W-9**.



After reviewing your CAQH application, complete the attestation process and grant MVP access to your application. Leaving any of the fields blank or incomplete may cause a delay in your credentialing application with MVP.

Step 2

Complete the Credentialing or Registration Processes

The following Providers should complete the **Provider Application Request** form.

- MD or DO
- DDS/DMD—Oral Surgeons only
- Anesthesiologist practicing in a par Ambulatory Surgery Center only or a Pain Management Specialist
- Ancillary Practitioner: Physical Therapist, Occupational Therapist, Speech Therapist, Optometrist, Podiatrist, Certified Diabetic Educator, Audiologist, Registered Dietitian/ Nutritionist, or Registered Nurse First Assistant (RNFA) practicing independently
- Provider Practicing in Vermont Only: Naturopath, Certified Athletic Trainer, Behavioral Health Specialist, Acupuncture, Chiropractor, Anesthesia Assistant (AA), or Advanced Practice Registered Nurse (APRN) wishing to be listed in the directory
- Certified Nurse Midwife (CNM)—practicing independently

- Behavioral Health Provider

MVP would like to know your areas of focus so we can refer Members to the most appropriate provider, and to help our PCPs make behavioral health referrals.

Please visit bit.ly/mvpbhsurvey (URL is case sensitive) to: Indicate your subspecialties or areas of focus, and inform us of the best method of communication (email address or fax number) so we can update you about important notices and policy updates.

- Nurse Practitioner—practicing independently

Nurse Providers interested in becoming credentialed must meet these specific requirements: you must have a minimum of 5 years of experience as an NP (not RN) in your area of license. You must have the “F” qualification for prescriptive privileges on your New York State NP license. You must have a DEA certificate.

If requesting credentialing as a Primary Care Physician (PCP) and you are employed by a physician group, the group must be in support of your participation with MVP as a PCP.

If any of the specific requirements above are not met, you may still meet the MVP criteria to be a registered Nurse Practitioner. Follow the process outlined below to become registered.

* Behavioral Health providers who practice at the New York State Office of Mental Health (OMH) certified facilities can not be credentialed.

* New York State Office of Addiction Services and Supports (OASIS) certified facilities can not be credentialed.



Email the completed form, including any supporting documentation required to MVPPR@mvphealthcare.com.



To view MVP’s credentialing policies, please refer to the Credentialing section of the **Provider Resource Manual**.

The following Providers should complete the **MVP Provider Application Request** form.

- Licensed Master Social Worker (LMSW)
- Hospitalist in the Inpatient setting only and have one of the following specialties: Internal Medicine, Family Practice, Pediatrics, Emergency Medicine, Anesthesia, Critical Care, Neonatologist, Pathologist
- Optician
- Nurse Practitioner (NP)—not practicing independently / affiliated with a group
- Physician Assistant (PA)
- Certified Registered Nurse Anesthetist (CRNA)
- Registered Nurse First Assistant (RNFA) working exclusively in the hospital and who is credentialed and privileged by the hospital (excludes Medicare)
- Provider Practicing in Vermont Only: Advanced Practice Registered Nurse (APRN) not interested in being listed in the provider directory
- NYS Behavioral Health midlevel providers



Email the completed form, including any supporting documentation required to MVPPR@mvphealthcare.com.



To view MVP's registration policies, please refer to the Provider Responsibilities section of the **Provider Resource Manual**.

The following Providers should contact eviCore at **1-800-638-4557**.

- Chiropractor or acupuncture in NY only
- Massage Therapists in NY

The following Providers should contact Healthplex at **1-888-468-2183** or visit **healthplex.com** and select *I Am a Provider*, then *Join Now* under *Prospective Providers*.

- Dentist interested in providing services to MVP Medicaid Managed Care, Child Health Plus, Essential Plan, MVP Harmonious Health Care Plan®, or Dental PPO Members



If you do not see your specialty or area of expertise listed above, please contact us at **MVPPR@mvphealthcare.com** to determine the best process to become a participating practitioner with MVP. You may also call the MVP Customer Care Center for Provider Services at **1-800-684-9286**.

What to Expect Next

Once your credentialing request has been submitted, you will hear from an MVP Representative within 10 business days.

You will receive one or more of the following:

- A contract, if one is required, which will need to be signed and returned to MVP.
- An email informing you of any missing information on your CAQH application. If the application is missing any of the information listed in the email, you will be asked to supply that information within 10 business days. If you do not supply this information to MVP within 10 business days, MVP will close out your application. Once you have all the required information, you may apply again.

After a signed contract is received and your application is under initial review, you will receive an email informing you that your application has been sent to the MVP Credentialing Department for processing and review by our Credentialing Committee. It may take up to 60 days from the date of this notification for the credentialing process to be completed. Please refer to the **Provider Credentialing Rights**. The Credentialing Committee meets during the last week of each month to review applications.

You will receive a welcome letter once approved by the MVP Credentialing Committee.

Providers should not provide services to an MVP member until they have received confirmation that they have been approved as a Participating Provider with MVP.

MVP reviews each provider's credentialing information every three years through our recredentialing process. It is imperative that you keep your CAQH application up to date with your most current information and practice

locations to meet the MVP recredentialing requirements.

MVP's partner, Med Advantage/Advantum Health, may contact Providers directly during the credentialing and recredentialing process to obtain any necessary information to complete the application process.



Questions regarding the applications process? Contact **MVPPR@mvphealthcare.com** or call the MVP Customer Care Center for Provider Services at **1-800-684-9286**.

A male doctor with glasses and a stethoscope around his neck is smiling and looking at a blue folder held by a female colleague. The doctor is wearing a white lab coat over a light blue shirt and a patterned tie. The female colleague is partially visible on the left side of the frame, also wearing a light blue shirt. The background is plain white.

Maintaining Provider Information with MVP

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MVP makes every effort to ensure a provider's information is accurate in our systems. If you or your practice have changes in demographic and/or participation status, it is important to promptly notify MVP.

Notify MVP in the following situations, including, but not limited to:

- You change your demographic information, including if you are moving to a new group, but will remain participating with MVP.
- You change your payment information such as Tax ID or remittance advice.
- You change your specialty.
- You change your name.
- You change address.
- You are leaving the network.
- You are closing your panels.

Complete the Online Provider Change of Information form.

All demographic changes must be submitted online using the form at mvphealthcare.com/demographics. The form will walk you through the required information

based on the change you are submitting. Changes that apply to the group will have the option to upload a roster of Providers to whom the change applies.



Update the Providers CAQH application with any changes you submit to MVP.



Questions regarding the online form should be directed to your Professional Relations Representative, or by email to MVPPR@mvphealthcare.com.



Recredentialing with MVP

Recredentialing with MVP

MVP is required to recredential all providers every three years. To ensure a seamless recredentialing process, your CAQH application must be accurate and complete, and you must have granted MVP access to your application. If your CAQH application has been re-attested to within the past 90 days and the information contained in your application is accurate, you will not need to take any action.

Visit CAQH at proview.caqh.org.

- If you do not already have an existing CAQH application, select *Register Now* and follow the steps to create an application.
- Ensure that the Primary Practice State in which you practice is correct. If the Primary Practice State of your CAQH application is Massachusetts, you must complete the **MVP Supplemental Provider Credentialing Application**.

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Practice Information: List all current practice information and addresses.

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- The hospital must participate for all the lines of business for which you are requesting to be contracted.
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After reviewing your CAQH application, complete the attestation process and grant MVP access to your application. Leaving any of the fields blank or incomplete may cause a delay in your application with MVP.

If we are unable to access your updated CAQH application, MVP will make three attempts to contact you to request that you review, update, and grant MVP access. Failure to meet the recredentialing criteria or **non compliance** with the recredentialing process will result in termination of participation. Non-compliance is defined as not responding to or returning requests for the recredentialing application (a CAQH application that has been re-attested to within the past 90 days and to which MVP has been authorized access) and all supplemental information within 45 days from the date of request. Please refer to the **Provider Credentialing Rights**, to be informed of the process and your rights and obligations..

mvphealthcare.com

