

Consolidated Credentialing Verification Organization (CVO) Initiative

The Texas Association of Health Plans (TAHP) in collaboration with the Texas Medical Association (TMA) and HHSC contracted Managed Care Organizations (MCOs) are excited to announce a joint effort to reduce credentialing burdens for all Texas providers including physicians, hospitals, DME providers, facilities and all types of ancillary providers including nursing facilities and other Long-term Services & Supports (LTSS) (herein we will refer to all types as providers). Commercial MCOs are not required to use the CVO, however the goal is to expand the usage of the CVO to these MCOs. The initiative fulfills a long-time, mutual goal of the organizations to help reduce administrative barriers and costs. TAHP and TMA selected Aperture Credentialing, LLC, to manage a statewide Credentialing Verification Organization (CVO) contract used by all Medicaid and CHIP MCOs in Texas to streamline the provider credentialing process, excluding Dental Maintenance Organizations (DMOs) at this time.

The first phase of the project will begin for some MCOs who are ready to begin transitioning their new providers to the CVO in January. Providers who contact the MCOs to begin the contracting and credentialing process will begin receiving communication from Aperture Credentialing, LLC who will collect the credentialing application and required documentation. The anticipated CVO start date for all newly credentialing providers will be April 2018. Additional information regarding re-credentialing and the single re-credentialing date will be forthcoming.

How it Works:

As done today, you will continue directly contacting the plan(s) you wish to contract with, but you do not need to submit a credentialing application to the plan(s). The MCO(s) will notify Aperture, the CVO, to begin the credentialing process with you. Aperture will reach out to providers to start the credentialing process and will also accept the credentialing application and perform the primary source verification (PSV) that includes verification of your application, license and all applicable licenses/documents. Providers may still need to send some information directly to the MCO(s).

The MCOs partnered to achieve another simplification with a soon-to-be released single facility application. This means all MCOs across Texas will use the same applications and you will not need to maintain different applications for facility credentialing with different MCOs.

The Council for Affordable Quality Healthcare (CAQH) will remain available for practitioners and health professionals who currently use it and a new solution will be offered for ancillaries and facilities through Availity beginning April 2018. Paper applications will continue to be accepted by Aperture.

The credentialing process is separate from the contracting process. Providers will still need to engage with the MCO for contracting needs and provide any additional information to complete the credentialing process.

Providers enrolling in Texas Medicaid and CHIP through Texas Medicaid & Healthcare Partnership (TMHP) must still follow the processes as provided by TMHP/HHSC. Providers must complete the enrollment process through TMHP/HHSC prior to credentialing with the MCO(s).

Benefits

Saves time by eliminating duplicative efforts and processes for providers who credential and recredential separately with multiple MCOs.

Lowers administrative costs for providers and MCOs.

Utilizes existing web-based portals with CAQH and Availity to access practitioner credentialing application information, allowing professional providers who use those portals to easily update and maintain their application information for multiple product lines.

What should providers expect for Phase I?

Simplification! The simplified process will positively impact practices and providers, particularly those who contract with multiple MCOs. Specifically, it will help reduce administrative time spent on credentialing application submission and align the credentialing dates across the MCOs.

Practitioners and facilities will begin to receive communications from Aperture in the near future, as the CVO begins performing Primary Source Verifications (PSV) for MCOs in Texas. Again, phase one will begin January 2018 for some MCOs which will include initial credentialing for practitioners who are <u>new</u> to an MCO. Additional information about re-credentialing events will be forthcoming.

Should you have questions about information contained in this notification, please contact the following MCO representatives.

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Cigna	Cindy Forester	817-554- 5627	Cynthia.forester@healthspring.com
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Community First Health Plans	Network Management	210-358- 6200	nmcfhp@cfhp.com
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