



Consolidated Credentialing Verification Organization (CVO) Initiative

The Texas Association of Health Plans (TAHP) in collaboration with the Texas Medical Association (TMA) and Medicaid 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). The initiative fulfills a long-time, mutual goal of the organizations to help reduce Medicaid barriers and costs. TAHP and TMA selected Aperture Credentialing, LLC, to manage a statewide Credentialing Verification Organization (CVO) contract used by all 19 Medicaid 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 Medicaid 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 Medicaid 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 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 re-credential 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 new 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.

MCO	Contact	Phone Number	Email Address
Aetna Better Health	Joanna Rhodes	214-200-8415	RhodesJH@aetna.com
Amerigroup	Texas Credentialing Team	1-855-817-5783	txcredentialing@amerigroup.com
Blue Cross Blue Shield of Texas	Nicole T. Evans	512-349-4840	Nicole_T_Evans@bcbstx.com
Children's Medical Center	Provider Services	800-947-4969	providerinfo@childrens.com
Cigna	Cindy Forester Jquonda Brown	817-554-5627 770-779-550	Cynthia.forester@healthspring.com Jquonda.brown@healthspring.com
Community First Health Plans	Network Management	210-358-6200	nmcfhp@cfhp.com
Community Health Choice	Jo Lynn Turner	713-295-2461	JoLynn.Turner@CommunityHealthChoice.org
Cook Children's Health Plan	Teresa Hebert Traci Simmons	682-885-5885 682-885-6469	teresa.hebert@cookchildrens.org traci.simmons@cookchildrens.org
Dell Children's Health Plan	Rene Duran Alexandria	512-324-3125	RmDuran@ascension.org ARomero@ascension.org

MCO	Contact	Phone Number	Email Address
	Romero	Option 4	
Driscoll Children's Health Plan	Melinda Lopez Donald Well	361-694-6551 361-694-4349	melinda.lopez@dchstx.org donald.well@dchstx.org
El Paso First	Evelin Lopez	1-877-532-3778 Ext.1014 or 915-298-7198 Ext. 1014	evlopez@elpasohealth.com
FirstCare	Contracting	512-257-6000 Fax: 512-857-0030	contracting@firstcare.com
Molina Healthcare	Contracting Provider Services	1-866-449-6849 1-855-322-4080	texasexpansioncontracting@molinahealthcare.com mhtxproviderservices@molinahealthcare.com
Parkland	Patricia Carney	214-266-2121	Patricia.Carney@phhs.org
Scott & White Health Plan	Stacy Byrd Bobbie Weakly	254 913-8978 254-780-7834	Stacey.Byrd@BSWHealth.org Bobbie.Weakly@BSWHealth.org
Sendero Health Plans	Provider Services	1-855-895-0475	providers@senderohealth.com
Superior HealthPlan	Taylor Isarraraz	1-800-218-7453 x67331	Provider_Operations@centene.com
Texas Children's Health Plan	Letitia Stryk	832-828-1302	Letitia.Stryk@TCHP.US
UnitedHealth	Maria Moreland	888-787-4107	maria_d_moreland@uhc.com



Texas Credentialing Alliance (TCA)

Full Implementation of the CVO to Begin April 2018

Provider Webinar to take place March 1, 2018

The Texas Association of Health Plans (TAHP) in collaboration with the Texas Medical Association (TMA) and Medicaid Managed Care Organizations are excited to announce a joint effort to reduce credentialing burdens for Texas providers including physicians, allied health practitioners, hospitals, facilities and ancillary providers including LTSS (herein we will refer all of these types as providers). TAHP and TMA selected Aperture, LLC, for a statewide Credentialing Verification Organization (CVO) contract used by all 19 Medicaid health plans in Texas to streamline the provider credentialing process. Moving forward, this initiative will be referred to as the **Texas Credentialing Alliance (TCA)**.

What Should Providers Expect in April 2018?

Beginning in April 2018, all new and providers currently contracted with a Medicaid MCO will begin to receive notifications from Aperture regarding initial credentialing events and information about the common recredentialing date.

The CVO will eliminate administrative burdens by adopting a single re-credentialing date (recredentialing must occur no less than every 3 years). For example, if you participate with 3 health plans you would have 3 different recredentialing dates. With a common date, you have one recredentialing date.

To achieve this simplification, you may need to be recredentialed for some MCOs before the 3-year period ends; however, once the common date is established, the recredentialing will reoccur on a 3-year cycle for all MCOs that you participate.

The Texas Association of Health Plans (TAHP) will host a webinar for providers to provide an overview of the process and allow an opportunity for providers to ask questions. The webinar will be held on March 1, 2018 from 1:00 – 3:00 p.m. A recording will be made available for those unable to attend. Instructions for logging on to the webinar are as follows:

Webinar Directions:

Click this link or paste in browser to join the webinar: <https://tahpgm.globalmeet.com/TAHPMeeting>

- A screen that says Welcome to TAHP Meeting will open and ask for your name and email address.
- Please enter your information and click Join Meeting and you will be placed in the webinar.
- A box title CONNECT AUDIO will open and provide 2 options: CALL MY PHONE or CALL MY COMPUTER. Select CALL MY PHONE and enter YOUR phone number in the box provided.
- The system will automatically dial your phone number, and once you answer the call on your phone you will be connected to the meeting.

How the CVO 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 each 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.

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 re-credential separately with multiple MCOs.

Lowers administrative costs for providers and MCOs.

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



Credentialing Verification Organization (CVO) Provider FAQ

1. What is a CVO?

Texas Medical Association (TMA) and Texas Medicaid MCOs proposed a statewide CVO concept to facilitate provider credentialing, which was endorsed during the 84th Texas Legislature in SB 200. The bill established a vision for Texas to streamline the Medicaid provider credentialing process. Texas Association of Health Plans (TAHP) and TMA have selected Aperture, LLC, for a statewide Credentialing Verification Organization (CVO) contract used by 19 Medicaid MCOs.

2. What is Primary Source Verification (PSV)?

PSV is the verification of a provider's reported qualifications by the original source or an approved agent of that source. Aperture will be performing PSV functions on behalf of all Medicaid MCOs.

3. What is Aperture Credentialing, LLC?

Aperture is the nation's largest Credentialing Verification Organization providing services to some of the largest payer and provider organizations in the country. Aperture operates nationwide and also manages several other national, state-based and specialty-based unified credentialing programs. Aperture is National Committee for Quality Assurance (NCQA) Certified and Utilization Review Accreditation Commission (URAC) Accredited for more than 10 years.

Which provider types will be credentialed through the CVO?

All Medicaid provider types will be credentialed through the CVO excluding DMOs and providers who are currently credentialed through a delegation. An example of this includes the majority of pharmacy providers who are credentialed through their Pharmacy Benefit Managers (PBM). Pharmacies who provide a medical service such as DME will continue to be credentialed by their MCO and will participate in the CVO.

Any new provider who is not contracted with an MCO will continue to follow the current process in place for contracting and credentialing.

4. What will change for me in the credentialing process?

For the initial phase of the roll-out beginning in January for some MCOs, the only change a provider should expect is to begin receiving communications from Aperture regarding the credentialing application and PSV functions.

5. Does this new process apply to physicians seeking credentials in MCOs serving dual-eligible Medicare and Medicaid MCO (MMP) patients?

Yes, this process applies to all providers serving Medicaid patients.

6. Who do I contact to pursue an MCO contract?

This process will not change with the introduction of the CVO. You still need to outreach to each MCO to pursue a potential contract. Contact lists can be found on HHSC's website.

7. Will the state's contract outlining the 90-day credentialing timeframe be adhered to?

Yes, all state-mandated timelines will remain in effect.

8. If a provider contacts more than one Medicaid MCO at the same time, who notifies Aperture?

If a provider contacts several of the Medicaid MCOs requesting to join their network, the respective MCO will request the credentialing event on behalf of MCO. Aperture will notify the provider regarding the application and next steps in the CVO process.

9. Does the streamlined credentialing process apply to commercial insurers?

Commercial MCOs are not required to use the CVO, however the goal is to expand the usage of the CVO to these MCOs.

10. Steps for New Providers

1. Contact the MCO to begin the contracting and credentialing process.
2. The MCO will determine whether or not they can add you to their network. If the MCO has room in their network, they will send the credentialing event to Aperture.
3. Aperture will contact you with instructions on filling out the credentialing application through CAQH or paper. Availity will be available as an application portal beginning April 1, 2018.
4. Aperture will reach out to you to collect any missing information or required credentialing documentation for the application.

11. Where will providers find Availity training?

Availity training will be available on MCO websites.

12. Will providers need to create a new account with Availity for MCOs?

Facility providers who choose to fill out their credentialing application electronically will need to create an account with Availity. The functionality to fill out the facility application through CAQH currently does not exist.

All other providers can continue to use either CAQH or Availity to submit their practitioner credentialing applications.

13. How will I know if I'm applying with Aperture or Availity?

Aperture functions as the CVO who performs Primary Source Verification (PSV) on behalf of the plans. Aperture will be reaching out to you with instructions on how to fill out the application either through Availity or CAQH.

**14. How will licensing delays impact credentialing?
In the same way that it would've impacted credentialing prior to the CVO – final credentialing approval can't be granted until a verifiable license is obtained**

The experience with licensing delays do not change as a result of having a CVO. Licenses are a requirement for credentialing/ recredentialing to occur. Any delays in a license will have an impact on a completed application. Until a completed application is received, credentialing cannot begin.

15. Will Aperture log into update CAQH or will Aperture?

Providers will still need to log into their applicable portal to complete the application and update information.

16. Is Aperture going to be aware of the MCOs that will be obtaining contracts with the state?

As MCOs obtain a contract, they will notify the universe of providers, through their current routine processes. If credentialing is required, and it's within the scope of Aperture's CVO processes, Aperture will perform those functions; if not within the scope, the MCOs are equipped to manage the tasks.

17. We are receiving notices from Aperture for documents that are in CAQH. Does Aperture log into CAQH to get the requested information?

Yes. Aperture will be able to view CAQH based on the granted access from the respective MCO. The Aperture team members will review CAQH first for any missing data before reaching out to the provider.

18. Does this include STAR+PLUS?

Yes, STAR+PLUS providers will be included in the CVO.

19. Does this include medical, dental, BH and vision?

The CVO does not include dental providers and will include all provider types that are not currently credentialed through a delegation. Examples of providers typically credentialed through a delegation include vision, pharmacy, and behavioral health providers.

Behavioral health providers contracted with an MCO who does not use a Behavioral Health Organization (BHO) to perform their credentialing activities will be credentialed through the CVO. Pharmacies who provide a medical service such as DME will continue to be credentialed by their MCO and will participate in the CVO.

Any new provider who is not contracted with an MCO will continue to follow the current process in place for contracting and credentialing.

20. What is the turnaround time for the completion of credentialing?

The 90-day state-mandated timeframe for credentialing will remain in effect.

21. Does this apply to psychologists?

Yes, psychologists are included in the CVO.

22. Does this include acute care?

Yes, acute care is included in the CVO.

23. For those of us already credentialed with multiple MCOs, we don't need to do anything until contacted by Aperture?

Yes, that is correct. Aperture will contact you with instructions for your next credentialing event.

24. For sites that don't have all of their documents posted with change of ownership past the April-December timeframe, is credentialing allowed into 2019?

In order to begin the credentialing process all MCOs need a completed application and that includes the CHOWs. MCOs have communicated this need to HHSC and HHSC is expected assist in communicating the requirements for credentialing related actions.

25. How can we find out what date Aperture has for our renewal date?

Aperture will send a letter approximately 6 months prior to your credentialing due date to inform you that it is time to submit an updated application for recredentialing. The participating MCOs will also have a report which indicates your recredentialing month.

26. Will Aperture and Availity issue instructions on how to get set up correctly.

Aperture will issue a letter which contains the website and instructions for how to access the Availity portal and learning center. There will also be webinars conducted during the 1st week of April.

27. Are the STAR Plus plans posting a list of sites that are deemed to be credentialed?

With the Nursing Facility changes there are no known deemed credentialing providers. As of 4/1, all providers unless you are delegated (e.g. IPA) you will be credentialed or recredentialled through the CVO.

28. We have two different NPIs under the same tax id. Will we be notified at the same time for recredntialing for both?

Notifications to providers are based on when they are due to be recredntialled with the MCOs. If both NPIs were previously credentialed at the same time, and are the earliest date, they will both receive the notification.

29. Can we reach out to Aperture to get started ahead of time?

Reaching out ahead of time to get started won't be necessary. You will receive detailed communications from Aperture with instructions on submitting the necessary documentation well in advance of any credentialing due date.

30. Will we need a different Availity account if we are already using them for our billing clearing house?

If you are currently using Availity, you will not need to establish a separate account. You will be adding a new role to allow for the input of the credentialing application data. Availity will have training materials on their website to assist you in the process and will also be conducting a webinar during the first week of April.

31. Where can we obtain the paper version of the new facility application?

They will be posted on MCOs sites/provider portals and Aperture will send when they are notified of a facility applying for credentialing at an MCO.

32. Can groups have notifications sent to a central location that manages multiple locations?

Yes. The centralized location will need to be reflected in your information to the participating MCO so that outreach is provided to that centralized credentialing location. The MCO will provide that data to Aperture to ensure the most efficient process for PSV.

33. Is Availity specifically for online applications?

Yes, Availity functions as an online application portal.

34. Does the streamline also mean one fee or multiple fees for each of the different types of Medicaid?

No, the CVO introduction applies only to credentialing events and will not impact any current fees associated with enrollment as a

Medicaid provider.

35. If the data is not already in Availity, how will Aperture know when it is all input in order to auto-populate the application?

Aperture and Availity have integrated the application data process. When the application is complete, and required attachments are loaded to Availity, the data and images will be passed directly to Aperture.

36. Under our TIN #, we have 3 NPIs and within an NPI# we have several locations. At which level will we be credentialed?

The process won't change – credentialing is performed by license, not NPI or location, unless the different NPIs and locations have different licenses/credentials.

37. Do you have a list of the MCO's using Availity?

All MCOs will be using Availity for the non-practitioner application. We have 5 current MCOs who will also be using Availity for their practitioner applications:

- El Paso First Health Plan
- Cook Children's Health Plan
- Parkland Community Health Plan
- Scott & White Health Plan
- Texas Children's Health Plan