

How do I become a Provider of Health Choice?

Simply log onto our website www.healthchoiceaz.com. Click Providers from the top and scroll down to download the *Request for Participation – AzAHP Practitioner Data Form*. Please refer to Page 5 on instructions for faxing the documents.

What is credentialing?

Credentialing is an industry-standard systematic approach to the collection and verification of a practitioner applicant's professional qualifications. These qualifications include, but are not limited to: review of relevant training, licensure, certification, and/or registration to practice in a health care field, and academic background.

Health Choice utilizes the Council for Affordable Quality Healthcare (CAQH) for gathering credentialing data for physicians and other health care professionals.

PLEASE NOTE: The Health Choice credentialing process is completed before a practitioner is accepted into the Health Choice network. Credentialing and Network Contracting are two separate processes.

What are the steps in the full credentialing process for a new physician?

Our credentialing process includes a review for network need, primary source verification and our credentialing committee review. After receiving a completed application, we perform primary source verification. This portion of the process takes approximately 30 business days to complete. Next, we present your request for participation to our Credentialing Committee. Once approved, we will send notification of the Committee's final credentialing decision within 10 business days. Health Choice will then reach out to the physician to complete the next phase of the network contracting process.

Must the entire CAQH ProView Form be completed?

Yes, you are expected to complete all questions on the CAQH application. The electronic application will present the questions to you in an interview style

approach, with logic that presents the questions that are relevant to your particular specialty or provider type. The entire application must be completed prior to your verification of its accuracy, and before the participating health plans that you have authorized can access it.

How can we contact CAQH for assistance?

CAQH Provider Help Desk is available online at proview.caqh.org, by email at providerhelp@proview.caqh.org and by calling: 888- 599-1771 (Monday through Thursday, 7 AM to 9 PM EST; and Friday 7 AM to 7 PM EST).

What are some common reasons that we may not be credentialed or recredentialed so that we can avoid them?

The physician and other health care professional is encouraged to ensure that:

- CAQH applications are complete (listed Covering Physician/Partners, 5 year work history with explanations for gaps over 3+ months).
- Do not have an expired attestation status.
- All applications having current supporting documentation (DEA cert., liability coverage face sheet) and that nothing is expired.
- You are requesting credentialing only for those specialties in which you are trained (e.g., do not send in a request for pain management with a residency in anesthesia only).
- You have adequate liability coverage as required.

How do we complete recredentialing with Health Choice?

Recredentialing is conducted every three years after initial credentialing to ensure professional qualifications remain valid and current. If you have attested to all of the data in CAQH on the regular interval required, you do not need to do anything. Health Choice simply pulls your information from CAQH to review for updates and changes. Please remember to review, reattest and authorize data access once every four months. If you keep this information up-to-date, Health Choice will only send you a notification letter at the end of the recredentialing process.

How much professional liability (malpractice) insurance does Health Choice require?

Health Choice requires a minimum of \$1,000,000 per occurrence / \$3,000,000 in aggregate to participate.

What are my rights in credentialing?

Physicians and other health care professionals applying for the Health Choice network have the following rights regarding the credentialing process:

- To review the information submitted to support your credentialing application
- To correct erroneous information
- To be informed of the status of your credentialing or recredentialing application; upon request.

How long is the credentialing process?

Health Choice strives to process complete credentialing applications in 60 days or less. It may take longer if you submit an incomplete application or if requested attachments are not submitted with the application.

What if the Credentialing Committee denies my initial application for participation or my recredentialing application?

Health Choice reserves the right to deny an appeals process for initial applicants. However, depending on the reasoning of the Credentialing Committee's decision for denied/termed recredentialing, you will be offered the opportunity to submit an appeal. The recredentialing denial or termination letter will explain your rights, the appeals process and contact information.

How do I check the status of a current credentialing application?



Call us toll-free at 800-322-8670 (Option in order 4, 7) Health Choice maintains accreditation by URAC and our Credentialing Verification Organization (CVO) meets the NCQA standards for health plans.