

Chapter 17

Provider Enrollment

Overview

Chapter 17 outlines UCare's (UCare Minnesota and UCare Wisconsin, Inc.) credentialing and provider set up.

This Chapter Includes:

[Introduction](#)

[Practitioner types that require credentialing](#)

[Practitioner types that do not require credentialing](#)

[Facility types that require credentialing](#)

[Provider Credentialing](#)

[Credentialing Process](#)

[UCare's Credentialing Policy](#)

Introduction

The following link will take you to all of the UCare forms described in this chapter:
<http://www.ucare.org/providers/Pages/Forms.aspx>.

UCare is now part of the Minnesota Credentialing Collaborative (MCC) which provides a centralized, web-based clearinghouse for information used in the credentialing process. The product is an online, easy-to-use way to prepare, save and send the credentialing and re-credentialing application that is accepted by participating Minnesota health plans and hospitals.

Effective January 1, 2011, UCare will require the initial credentialing application to be completed using the ApplySmart System for Minnesota practitioners. If have not enrolled with the MCC to use the ApplySmart system, check with your clinic credentialing staff or go to www.applysmart.net/mccprac. To register, click on “Individual Providers”. Once you have registered, you will receive an email with your User ID and instructions to log into the system and enter your credentialing information. For more information on completing the application, click “Help and Tutorials” on the left navigation bar on the website after you are logged in. Visit www.mncred.org for more information.

UCare is no longer accepting paper applications. Please submit by ApplySmart. (we will accept fax or email application if you are not on ApplySmart)

Effective September 23, 2011 UCare will also no longer be accepting the paper mailed, e-mailed, or faxed MN Uniform Practitioner Change Form. You must complete the “Credentialed Practitioner Add/Change” online form by logging on to <http://www.ucare.org/providers/Pages/Forms.aspx>. This applies to adding or terming, and name changes for credentialed-type practitioners.

Practitioner Types that Require Credentialing

Acupuncturist (as of 1/1/2012)
Bachelor of Medicine and Bachelor of Surgery (MBBS)
Certified Nurse Midwife (CNM)
Dentist (DDS-Medical)
Licensed Clinical Social Worker (LCSW-WI Only)
Licensed Independent Social Worker (LISW)
Licensed Independent Clinical Social Worker (LICSW)
Licensed Psychologist (LP)
Licensed Professional Clinical Counselor (LPCC)
Licensed Marriage and Family Therapist (LMFT)
Optometrists (OD)
Oral & Maxillofacial Surgeons (MD)
Physicians (MD, DO)
Physician Assistant (PA)
Podiatrist (DPM)
Psychologists (PhD, PSYD, Ed D, MA, MS)
Registered Nurse Clinical Specialist (CNS)
Registered Nurse Practitioner (CNP)

Form: [Initial Uniform Credentialing Application](#)
Uniform Re-Credentialing Application
E-mail: credentialinginfo@ucare.org
Fax Number: **612-884-2184**

For the following specialties, please submit credentialing applications to:

- Chiropractic: ChiroCare - www.chirocaremn.org or call **1-888-638-7719**.
- Dental: DentaQuest by calling **1-800-685-9971**.

If you have credentialing questions please contact UCare's Credentialing Department at **612-676-3660**. If you do not reach a live person, your call will be returned within two business days.

[Table of Contents](#)

Practitioners that do not require credentialing

Audiologist

Certified Registered Nurse Anesthetist (CRNA)

Occupational Therapist (OT)

Physical Therapist (PT)

Registered Dieticians (RD)

Residents (no paperwork to submit unless moonlighting)

Speech Language Pathologists (SLP)

Hospital-based practitioners including Pathologists, Radiologists (unless Radiation Oncologists), Anesthesiologists (unless Pain Management), and Emergency room Physicians

Personal Care Assistants (PCA)

Effective October 15, 2010 UCare no longer accepts PCA UMPI Information or Non-Credential Practitioner Add/Change Forms via paper. Requests should be submitted using our online forms which can be found on the UCare web site.

Please allow 30 days for your forms to be reviewed and completed prior to submitting claims and/or calling for a status.

Forms: [PCA UMPI and Non-Credentialed Type Add forms](#)

If there are questions regarding the status of your form, billing, effective dates, or contracting status, please contact the Provider Assistance Center at **612-676-3300** or **1-888-531-1493** toll free.

If you have any questions about how to submit any of the online forms or received an error message when submitting an online form, please contact the Provider Demographic Support Line at **612-676-8959** and leave a message. Your message will be returned within two business days.

Facilities types that require credentialing

Ambulatory Surgery Center (Free-Standing Only)

Birthing Centers

Home Health Care Agency

Hospitals

Skilled Nursing Facilities/Nursing Home

Form : [Organizational Provider Assessment Application \(this is not a contracting application\)](#)

E-mail: credentialinginfo@ucare.org

Fax Number: 612-884-2184

[Table of Contents](#)

Provider Credentialing

Credentialing is the process used to determine if an individual or organizational applicant is qualified and competent to render acceptable medical care to UCare members.

All actions related to acceptance, denial, discipline and termination of participation status for an individual or organizations are governed by UCare's Credentialing Policy. To request a copy of the most recent policy, contact the UCare Credentialing Department at 612-676-3660.

Providers should not see UCare members until their credentialing process has been completed. UCare has no obligation to reimburse claims submitted for a practitioner's services until the practitioner has successfully completed the credentialing process.

UCare will collect and verify all credentialing criteria in accordance with the National Committee for Quality Assurance (NCQA), Centers for Medicare & Medicaid (CMS) and Minnesota Department of Health (MDH) standards. Applicants shall cooperate fully in providing all documents requested by UCare.

Credentialing Process

1. The Initial Uniform Credentialing Application can be found at <http://www.ucare.org/providers/Pages/Forms.aspx> or www.applysmart.net/mccprac.
2. Return the completed application to the UCare Credentialing Department with attachments. Applications should be submitted at least one month prior to an individual provider's start date at a clinic. UCare uses a standard 90 day turnaround time and does not retrospectively apply effective dates. Therefore, the sooner completed applications are received, the sooner UCare members can be seen.
3. Applications are evaluated by UCare Credentialing staff to determine eligibility. If it is determined that the provider is eligible to participate as a UCare provider, the verification process is completed by the credentialing staff and approval of "clean" credentialing/recredentialing files is completed by the Medical Director. If there is variation from the established credentialing criteria, a review is completed by the Quality Improvement Advisory and Credentialing Council (QIACC). All new practitioners are notified at time of initial credentialing decision.

The QIACC is established by the Board of Directors to make determinations regarding a provider's credentialing status. The QIACC is comprised of practitioners in the UCare Network. The QIACC meets monthly on the fourth Thursday of the month with the exception of the months of November and December which are combined due to the holidays.

Actions

The QIACC may accept, accept with restriction(s), or deny an applicant's request for participation within the UCare provider network.

The QIACC may request further information from applicants; table an application pending outcome of an investigation or take any other action it deems appropriate.

The UCare Board of Directors has final authority to act on determinations of the QIACC or Appeals Committee regarding individual or organizational participation.

Notification of Initial Credentialing Decision

The applicant is sent an initial notification of the QIACC's determination via the US Postal Service or Email within **45 business days** after the approval date. This notification reports any restrictions that may have been placed on an individual practitioner's participation status. If the QIACC determines restriction(s), the practitioner is given the facts upon which the QIACC has based its decision. If the QIACC makes a determination to deny participation, the applicant is advised and notified of the right to review the information upon which the determination was made and to submit corrections.

Appeals

An individual provider may appeal the QIACC's decision to accept an application with restrictions or to deny an application due to concerns related to professional competency. The practitioner must request a hearing, in writing, within 30 days of notification.

The Appeals Committee conducts a hearing for individual applicants. The Appeals Committee has the authority to uphold, reject or modify the decisions of the QIACC.

Recredentialing

Recredentialing is the process whereby UCare verifies the current status of a participating individual or organizational provider. Recredentialing is performed every three years.

Recredentialing is conditional upon the applicant continuing to meet UCare's credentialing standards and quality performance standards, including but not limited to:

- Member complaints
- Results of quality reviews
- Utilization management information
- Member satisfaction surveys, where applicable
- Medical record reviews, when available

Other Reviews

From time to time UCare may obtain information about licensure actions taken with respect to its individual participating providers.

If such licensure actions indicate a disciplinary action UCare shall take whatever disciplinary or termination actions are appropriate in view of the information obtained.

UCare's Credentialing Policy

UCare's policy on credentialing and recredentialing of providers is available for those who are interested in reviewing it. Within the policy, it outlines the following:

- Purpose.
- Definitions.
- Scope.
- Roles and Functions of UCare Board of Directors, Committees, and Staff.
- Peer Review Protection.
- Criteria for Provider Participation.
- Application Review and Acceptance Process.
- Monitoring Providers.
- Corrective Actions.
- Restriction or Suspension of a Providers.
- Termination of a Provider.
- Credentialing Appeal Process.
- Reporting Requirements.
- Delegated Credentialing.

[Click here to view UCare's Credentialing Policy.](#)

[Table of Contents](#)