Credentialing and recredentialing for health care professionals

Frequently asked questions

Overview

We've created this document to help make the credentialing and recredentialing process as easy as possible for you and to answer questions we often receive from individual health care professionals, such as physicians and licensed independent practitioners.

The information included covers the industry standards used, the credentialing organizations and other pertinent details you'll need as you apply to become an in-network health care professional with UnitedHealthcare. For some specialties, UnitedHealthcare works with partners who handle credentialing and contracting on our behalf. Please follow the instructions below to start the process:

- Vision care providers — ophthalmologists and optometrists — may contract with UnitedHealthcare in 2 ways:
  - Contact UHN to provide medical services (within the scope of your licensure)
  - Contact UnitedHealthcare Vision Network/Spectera Vision Network to provide routine vision services. To get started, visit **spectera.com** or call 800-638-3120.

- Mental health or substance abuse practitioners: Contact Optum Behavioral Health Solutions. To start, go to **providerexpress.com** or call 800-817-4705.

- Dental care providers: Contact Dental Benefit Providers. To start, go to **dbp.optum.com** or call 800-822-5353.

- Chiropractor, Outpatient Therapy Provider/Clinic (Physical/Occupational/Speech) or an Alternative Medicine Provider: Contact OptumHealth Physical Health. To start, go to **MyOptumHealthPhysicalHealth.com** or call 800-873-4575.

Key points

Credentialing is required for all licensed individual health care professionals in order to participate in the UnitedHealthcare networks and prior to seeing UnitedHealthcare members.

UnitedHealthcare follows industry standards for credentialing and recredentialing of health care professionals.

Credentialing standards are set by the National Committee for Quality Assurance (NCQA) and the Centers for Medicare & Medicaid Services (CMS).

UnitedHealthcare contracts with the Council for Affordable Quality Healthcare (CAQH), as well as other state-specific entities, to collect the credentialing and recredentialing application data, and with Aperture CVO to verify required elements of the credentialing application and process.

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Frequently asked questions
Credentialing and recredentialing basics

What is credentialing?

The credentialing process is the health care industry standard to collect and verify each health care professional's qualifications.

Why is credentialing important?

Credentialing assesses qualifications, relevant training, licensure, certification and/or registration to practice for each health care professional who participates in UnitedHealthcare networks. We use this process to help make sure those in our network have the credentials we require to care for our members.

When does credentialing occur?

Credentialing occurs before a health care professional is considered eligible to participate in UnitedHealthcare networks.

Who sets credentialing standards and criteria?

Credentialing standards are set by the NCQA, as well as specific state and federal regulations for participation in the Medicaid and Medicare programs. UnitedHealthcare credentialing process complies with these standards.

Some states may have additional requirements as part of the credentialing and recredentialing process.

What do I need to provide to complete the credentialing process?

Please ensure that all necessary parts of the credentialing application are completed and provide the following:

Training and education

• Practitioner degree (M.D., DO, DPM), post-graduate education or training
• Details of medical or professional education and training
• Completion of residency program in the designated specialty

Licensing and certification

• Current license or certification in the state(s) in which the care provider will be practicing (no temporary licenses)
• National Provider Identifier (NPI) number
• Active Drug Enforcement Administration (DEA) number and/or Controlled Dangerous Substances (CDS) certificate or acceptable substitute (if required)
• Medicare/Medicaid participation eligibility or certification (if applicable)

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Work history details

- Five-year work history
  - If there are any gaps longer than 6 months, please explain
- Statement of work limitations, license history and sanctions (only required if you are applying to join UnitedHealthcare Medicare and Medicaid plans). The statement must include:
  - Any limitations in ability to perform the functions of the position, with or without accommodation
  - History of loss of license and/or felony convictions
  - History of loss or limitation of privileges or disciplinary activity
- W-9 form
- Hospital staff privileges

Insurance

- Active professional liability (malpractice) insurance (face sheet required) or a state-approved alternative
- Malpractice history (summary of any pending or settled malpractice cases)

Other

- Credentialing contact information or valid email address
- Other credentialing requirements, such as AMA profile or criminal history review, as required by law

Credentialing authorities

- Notification if this provider has ever been a delegated provider prior to this credentialing application
- Passing score on state site visit (if required)
- A list of UnitedHealthcare network hospitals where you have admitting privileges or the name of a UnitedHealthcare participating care provider who is willing to admit on your behalf

Credentialing for Medicaid and state programs (UnitedHealthcare Community Plan)

- State-specific credentialing and recredentialing information on how to join the UnitedHealthcare Community Plan network can be found in the care provider manual

During the credentialing process, we may request more information from you than what was included in your application. Requirements may vary based on your location, care provider type or specialty. If we ask for any additional information, we'll supply the required forms and instructions.

The credentialing process

How do I request credentialing to add a new physician to my group contract with UnitedHealthcare?

Complete a CAQH application and authorize UnitedHealthcare to access your application. Be sure to verify your information is up to date and all documentation is still in effect.

Once your CAQH application is successfully completed, submit a request by signing in to **Onboard Pro** using your One Healthcare ID to start the credentialing process with us. If approved, we will add the new physician to your group contract and tax ID. You do not need to submit a second request to complete the last step.

What is the process to begin credentialing a new health care professional interested in joining the UnitedHealthcare network?

Start by signing in to **Onboard Pro** using your One Healthcare ID to express your interest in becoming a participating health care professional. This should be done no more than 30 days before your effective date at your practice. We will review your request and let you know if we need any additional information. If we're not accepting new applications for participation in our network for your specialty or geographic area, we'll notify you and close your request.

What are my rights in credentialing and recredentialing?

Health care professionals who apply to join UnitedHealthcare networks 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 does UnitedHealthcare gather credentialing data?

UnitedHealthcare uses CAQH Provider Data Portal (previously known as the ProView®) for gathering credentialing data of care providers, excluding the below states:

• CAQH Provider Data Portal is a single-source credentialing application

• CAQH Provider Data Portal is available at no cost to you

• More than 900 participating organizations, including health plans, hospitals and other health care organizations, use CAQH Provider Data Portal. This can make it easy for you to provide credentialing data to multiple organizations through a streamlined process.

For providers in Minnesota, UnitedHealthcare uses either CAQH Provider Data Portal or the Minnesota Credentialing Collaborative's (MCC) ApplySmart to gather credentialing data for care providers.

Where can I check the status of my current credentialing application?

If you have questions about your credentialing status, connect with us through chat 24/7 in the **UnitedHealthcare Provider Portal.**

Your personal dashboard in Onboard Pro will show the real-time status of every enrollment request you've submitted.

How do I get a CAQH provider ID number?

If you don't have a CAQH account, you can set one up before you submit your request for credentialing. Go to **CAQH Provider Data Portal** to get started.

How do I get a Minnesota Credentialing Collaborative (MCC) provider ID number?

Provider ID numbers are not required for MCC applications

Why do I have to submit a request for participation with UnitedHealthcare if I already have a CAQH provider ID number and have authorized UnitedHealthcare to access my application on CAQH Provider Data Portal?

Submitting a request lets us know you are interested in joining our network and allows us to access your application through CAQH Provider Data Portal.

How do I control who can access my credentialing information?

Only health care professionals who have registered with CAQH Provider Data Portal or MCC ApplySmart can authorize organizations to access their information.

• You may select which organizations have access to your information on CAQH Provider Data Portal or MCC ApplySmart

• The CAQH Practice Manager Module allows your office staff to assist you in completing or updating portions of the application by exporting practice location, hospital affiliation and liability information common to a group

• Practice Managers may access this module by visiting **CAQH Provider Data Portal**

Is there anything that might hold up the processing of my credentialing application that I can prevent?

Make sure that your CAQH Provider Data Portal or MCC ApplySmart application is complete and that you re-attest every 90 days to keep the application and information current. This can help avoid delays.

How and when do I need to re-attest to CAQH Provider Data Portal information?

You will receive automatic reminders from CAQH Provider Data Portal every 120 days to review and attest to the accuracy of your data. This quick and easy process makes sure the information UnitedHealthcare has on file for you is correct. You can do this in 1 of 2 ways:

• Log in to **CAQH Provider Data Portal** and review your application

• Call the CAQH Help Desk at 888-599-1771

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I forgot my CAQH Provider Data Portal provider ID number. Can UnitedHealthcare help me retrieve it?

Yes. connect with us through chat 24/7 in the **UnitedHealthcare Provider Portal.**

When is a site visit required?

Certain state Medicaid programs require site visits as part of the process to credential individual practitioners. NCQA may also require a site visit as part of the facility credentialing process in some situations. If a site visit is required, our site visit vendor, United Language Group, will contact you to schedule the visit.

✔ Credentialing timeline

How long does the UnitedHealthcare credentialing process take?

The entire credentialing process generally takes up to 30 calendar days to complete once we have a completed application and all required information. After receiving a completed application, we perform primary source verification. Next, we present your request for participation to our credentialing committee.

Note: The timeline does depend upon response times from medical schools, residencies, specialty boards and hospitals.

Once I'm approved, what are the next steps?

If you are joining a medical group that already participates with UnitedHealthcare on a group contract, you'll be added to the group contract.

If you're a new health care professional interested in joining the UnitedHealthcare network, we may also mail a contract to you within 10 business days of a request for credentialing. This helps streamline the credentialing and contracting process.

If you contract with us for participation in a Medicaid plan, certain state Medicaid agencies may also require you to complete a Disclosure of Ownership Form. If it's required, we will send you the form for completion.

Will a contract be sent out before I complete the credentialing process?

Yes. To streamline the credentialing and contracting process, UnitedHealthcare may also mail a contract to you within 10 business days of a request for credentialing.

• The receipt of the contract for review from UnitedHealthcare is not a confirmation of an approved credentialing application, authorization to see UnitedHealthcare members or confirmation that you participate in the UnitedHealthcare network

• You're required to complete both the credentialing and contracting processes to begin seeing UnitedHealthcare members as an in-network provider

• Please allow up to 60 days for your contract to be loaded into our systems once credentialing is approved and a signed contract has been received. This will prevent your claim from being denied or paid at an out-of-network level.

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If my credentialing isn't approved, what happens?

If you're not approved to join the UnitedHealthcare network, you'll be notified of that decision in writing. It will include information about what you can do if you disagree with our denial of your credentialing application.

Recredentialing information

Why do I have to complete recredentialing?

If recredentialing is not completed, you may not be eligible to continue to participate in the UnitedHealthcare network. Recredentialing is required at least every 3 years by the NCQA, CMS and many states regulatory organizations.

• Recredentialing helps make sure that all health plans have the most up-to-date, accurate information about your education and experience. It also allows you to review the practice locations and contact information e make available to all members.

How do I complete recredentialing with UnitedHealthcare?

UnitedHealthcare automatically starts the process when you approach the 3-year recredentialing cycle. If you maintain a complete and current application and attest to the data every 90 days, there's nothing you need to do. This applies across the CAQH Provider Data Portal and MCC ApplySmart applications. We'll automatically retrieve your information and review it for updates and changes. If the state where you practice requires additional information not included in the standard applications, we'll contact you to obtain it.

Will UnitedHealthcare send advance notification to me when I am up for recredentialing?

As long as your information is kept current at CAQH Provider Data Portal or MCC ApplySmart, we won't notify you when the recredentialing process begins, unless we are required to do so by the state where you practice.

• If your application and information aren't current, we'll notify you at the start of the credentialing process. Notification will come from either UnitedHealthcare or Verisys (formerly Aperture), who we use as our primary source verification vendor.

• If additional information or action is needed, it will be referenced in the notification

• If you don't respond to the first notice you receive, you'll get additional reminders about completing your recredentialing

Online resources and CAQH assistance

Where can I get more information about UnitedHealthcare credentialing and recredentialing criteria?

More information about our credentialing and recredentialing criteria is available at UHCprovider.com/join > **Get Credentialed.**

- **UnitedHealthcare Credentialing Plan 2023–2025**
- **Credentialing Plan State and Credentialing Plan State and Federal Regulatory Addendum: Additional State and Federal Credentialing Requirements**

If I need assistance from CAQH, how do I contact them?

Visit **caqh.org** or call them at 888-599-1771. A list of frequently asked questions is also available.

If I need assistance from Minnesota Credentialing Collaborative (MCC), how do I contact them?

Visit **credentialsmart.net/mcc** or call them at 847-425-4616.

If you have questions about the UnitedHealthcare credentialing process or need assistance, connect with us through chat 24/7 in the **UnitedHealthcare Provider Portal.**