

**AMERIHEALTH CARITAS FAMILY OF COMPANIES  
POLICY AND PROCEDURE**

**Subject:** Credentialing/Recredentialing of Providers, Organizational Providers and Non-Traditional Long Term Services and Supports (LTSS) Contractors/Providers

**Policy No:** CP 210.110

**Department:** Enterprise Operations Management

**Current Effective Date:** 3/24/2022

**Last Review Date:** 3/1/2022

**Original Effective Date:** 8/29/2019

**Next Review Date:** 3/24/2022

**Related Departments:** Provider Network Management, Provider Network Operations, Provider Database Maintenance, Quality Management

**Lines of Business:** North Carolina

**Products:** Medicaid and Health Choice

**Policy:**

AmeriHealth Caritas North Carolina (ACNC) is a member of the AmeriHealth Caritas Family of Companies. AmeriHealth Caritas North Carolina, also known as the Prepaid Health Plan “PHP,” adheres to the North Carolina Department of Health and Human Services’ (the “Department”) Medicaid managed care program streamlined approach for the credentialing and recredentialing of providers. AmeriHealth Caritas North Carolina will rely on a provider’s presence on the Medicaid Provider Enrollment File (PEF) for credentialing/recredentialing purposes. Through this standardized credentialing/recredentialing approach, AmeriHealth Caritas North Carolina will not outreach to in-state, bordering (i.e., providers that reside within forty (40) miles of the North Carolina state line), or out of state providers about credentialing/recredentialing in accordance with the direction from the Department in Section V.D.2.g of the RFP. North Carolina state law and the RFP requires PHPs to negotiate in good faith with, and include in the network, all qualified willing providers, except when the PHP is unable to negotiate terms or rates.

Provider/Contactor/Organizational Providers who are not enrolled with the Department as North Carolina Medicaid Providers, consistent with the provider disclosure, screening, and enrollment requirements, will not be contracted with AmeriHealth Caritas North Carolina. AmeriHealth Caritas North Carolina will partner with the Department on a long term model for credentialing to meet National Committee for Quality Assurance (NCQA) compliance.

AmeriHealth Caritas North Carolina

This policy and  
procedure will be presented for review and approval on at least an annual basis to both the Department and AmeriHealth Caritas North Carolina’s Quality Assessment Performance Improvement Committee

(QAPIC). AmeriHealth Caritas North Carolina will submit any significant policy changes to the Department for review and approval at least sixty (60) calendar days prior to implementation.

AmeriHealth Caritas North Carolina is prohibited from employing or contracting with providers excluded from participation in federal health care programs under the Social Security Act.

AmeriHealth Caritas North Carolina credentialing staff abide by policies and procedures for the collection, use, transmission, storage, access to and disclosure of Confidential Information in order to protect the privacy and confidentiality rights of AmeriHealth Caritas North Carolina's Members and Providers and to ensure the appropriate and legitimate use of the information. AmeriHealth Caritas North Carolina is prohibited from using, disclosing or sharing provider credentialing information for any purpose other than use in Medicaid Managed Care without the express, written consent of the provider and the Department.

**Procedure:**

**Initial Credentialing**

AmeriHealth Caritas North Carolina will rely on the enrollment/credentialing of the Department for initial credentialing and will not have its own independent credentialing process. AmeriHealth Caritas North Carolina will accept the PEF as the source for provider eligibility and credentialing status purposes. AmeriHealth Caritas North Carolina matches the provider to the active Medicaid/North Carolina Health Choice (NCHC) provider record by using the National Provider Identifier (NPI), location code, effective date methodology provided by the Department.

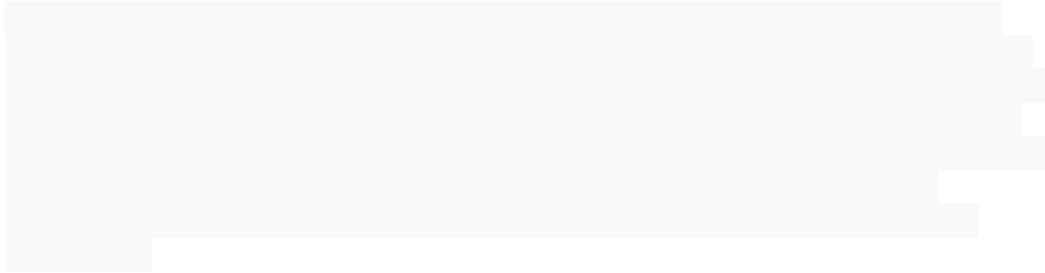
For purposes of Initial Credentialing and Recredentialing,

**Recredentialing**

1. Providers/Contractors/Organizational Providers are recredentialled no less frequently than

every 5 years by the Department during the Provider Credentialing Transition period.

2.



3. AmeriHealth Caritas North Carolina will suspend claims payments to any non-compliant provider for dates of services after the effective date provided by the Department. Claims payment suspension will occur within one (1) business day of receipt of notice from the Department that Provider payment has been suspended for failing to submit re-credentialing documentation to the Department, or for otherwise failing to meet Department requirements.
4. AmeriHealth Caritas North Carolina will reinstate provider payments upon notice of compliance from the Department.
5. If the provider remains non-compliant more than fifty (50) days after suspension, the Department and AmeriHealth Caritas North Carolina will terminate the provider and AmeriHealth Caritas North Carolina will likewise terminate the provider from its network.

NOTE: The PHP will not be liable for interest or penalties for payment suspension at recredentialing.

**Note:** Any provider found to be excluded from Medicare or Medicaid will be terminated immediately from the PHP.

### **Quality Assessment Performance Improvement Committee (QAPIC)**

1. The QAPIC is staffed with participating providers with the goal of representing the range of North Carolina licensed primary care, specialty and Allied Health Practitioners furnishing care to AmeriHealth Caritas North Carolina members. The AmeriHealth Caritas North Carolina Market Chief Medical Officer or physician designee is Chairman of the QAPIC and is licensed in the state of North Carolina.
2. The primary responsibilities of the QAPIC are described more fully in the AmeriHealth Caritas North Carolina Quality Improvement Program Description (reviewed and approved by the Department). Those responsibilities pertinent to credentialing/re-credentialing include:
  - Review and revise Credentialing/Recredentialing policies and procedures at least annually and modify them as necessary.
  - Help ensure that AmeriHealth Caritas North Carolina's Credentialing / Recredentialing policies and procedures are consistently followed and aligned with state policies and procedures.
  - Monitor the credentialing processes to ensure implementation is in accordance with federal, state and NCQA standards.
  - Compare provider performance against quality data, including quality of care and quality of service concerns, and review provider performance at least as often as the

Department's recredentialing cycle. Any severity levels reached as outlined in the Review of Potential Quality of Care Cases policy (QM 154.300NC) will be presented to the QAPIC for review, discussion, and determination.

3. Any provider terminated for reasons of suspected fraud, waste, or abuse are reviewed pursuant to the requirements under the Department Contract.

**NOTE:** This process is based on the AmeriHealth Caritas North Carolina authorizing legislation that provides AmeriHealth Caritas North Carolina must include all willing providers in their network, except when AmeriHealth Caritas North Carolina is unable to negotiate rates.

### **Confidentiality**

1. The Plan-wide policy 168.101 Confidentiality, addresses the overall procedure for confidentiality. On an annual basis all associates must read and sign the policies Associate Confidentiality, Privacy, and Security Agreement. In addition, Policy CP210.106, Security and Confidentiality of Credentialing Information, addresses the specific procedures with regard to the confidentiality of information obtained in the Credentialing/Recredentialing process. All new hires must sign the Affirmation Statement Form in the New Hire Orientation.

### **On-going Monitoring**

1. Through the uniform credentialing process, the Department will screen and enroll, and revalidate, all providers as participating and non-sanctioned Medicaid Providers.
2. AmeriHealth Caritas North Carolina will reconfirm providers' Medicaid eligibility upon receipt of every PEF.
3. AmeriHealth Caritas North Carolina will monitor provider performance against Quality data on an ongoing basis, as outlined in the Quality Improvement Program Description.

### **Provider Network Composition**

1. The AmeriHealth Caritas North Carolina Provider Network Management (PNM) team establishes a network of providers necessary to furnish Covered Services, specific to the North Carolina plan that meets network adequacy requirements to help ensure access for enrollees, including those with limited English proficiency or physical or mental disabilities. The AmeriHealth Caritas North Carolina PNM team is responsible for validating female enrollees have direct access to women's health specialists to provide women's routine and preventive health services.
2. The provider network includes, but is not limited to, hospitals, providers (specialists and primary care), nurse midwives, nurse practitioners, family planning providers, federally qualified health centers, medical specialists, dentists, allied health professionals, ancillary providers, DME providers, home health providers, behavioral health providers, transportation providers, nursing facilities and supportive living facilities, and Long Term Services and Supports, such as adult day programs, home delivered meals and environmental modification services.

3. The AmeriHealth Caritas North Carolina network of contracted, credentialed providers includes adequate numbers of Providers with the training, experience, and skills necessary to furnish quality care to Members in a manner that is accessible and culturally competent.
4. If the provider network is unable to provide necessary services or the need for a second opinion, AmeriHealth Caritas North Carolina will support the arrangement of such services at no cost to the member.

**NOTE:** Refer to Policy CRNM 339.400 - Provider Network Composition and Network Changes

### **Contract Execution**

1. The AmeriHealth Caritas North Carolina contract network management team meets with providers interested in joining the AmeriHealth Caritas North Carolina provider network (potential providers) present on the PEF and supplies a copy of the contracting packet including the Provider Information Form (PIF). The PIF has been developed to collect non-credentialing information necessary for operational purposes not present on the PEF. The PIF will be submitted to NC DHHS for approval and following any material changes to the form. (Attachment A – AmeriHealth Caritas North Carolina Provider Information Form)
2. If the contract negotiation process proceeds to conclusion and completed contract packets are received, the information from the data intake form is shared with appropriate AmeriHealth Caritas North Carolina departments.
3. The provider is accurately and timely loaded into AmeriHealth Caritas North Carolina's claim adjudication and payment system using information from the PEF and PIF.
4. AmeriHealth Caritas North Carolina mails a Welcome Packet and enrollment notice to providers within five business days of executing a contract.
5. If AmeriHealth Caritas North Carolina decides not to contract with a provider, the provider receives written notice of the decision within five business days.
6. AmeriHealth Caritas North Carolina may execute a network provider contract, pending the outcome of the Department screening, enrollment, and revalidation, of up to one hundred twenty days (120), but must terminate a network provider immediately upon notification from the Department that the network provider cannot be enrolled.

### **Oversight**

1. AmeriHealth Caritas North Carolina will meet with the Department, or designated Department vendor, quarterly and as requested regarding the credentialing process and network contracting process.
2. AmeriHealth Caritas North Carolina will publish all previous versions of this policy on the AmeriHealth Caritas North Carolina website including the policy effective date.

### **Related Policies and Procedures:**

1. Security and Confidentiality of Credentialing Information (CP210.106)
2. Provider Network Composition and Network Changes (CPNM339.400)
3. Review of Potential Quality of Care Cases (QM 154.300NC)
4. AmeriHealth Caritas North Carolina Quality Improvement Program Description

**Attachments:**

1. Attachment A –AmeriHealth Caritas North Carolina Provider Information Form

**Approved By:**

Name: \_\_\_\_\_



Date: 3-24-22

**Kathryn Turnbull**  
**Director, Credentialing**

**Attachment A** –AmeriHealth Caritas North Carolina Provider Information Form



**Provider Information Form**

Tax ID:

Category: Select a Category

NPI:

SLC:

List in ACNC Provider Directory?

Accepting Members Age (0-120yr)

Min:

Yes:

Max:

No:

Completed Cultural Competency Training?

Website URL:

Yes  No

**Pay To Address and Billing Contact**

Address:

City:

State:

Zip:

Billing Contact:

Billing Phone:

Billing Fax:

**Language Support:** Select languages available at your location from the list below:

Select Language

Select Language

Select Language

Select Language

Select Language

Select Language

Select Language

Select Language

Other: