Policy and Procedure				
Humana				
Original Issue Date: 06/2019 Po		Policy Number: N/A		Page 1 of 3
Subject: Credentialing and Recredentialing Using a Credentialing Verification Organization (CVO)				
Original Approved By: Jeb Duke		Original Approval Date: 06/23/2019		
Revision Approved By: N/A (N/A if original issue)			Revision Approval Date: N/A (N/A if original issue)	
Change Summary: Original	issue			

Policy Purpose:

This policy defines the credentialing and recredentialing process using a credentialing verification organization (CVO) for selecting and evaluating licensed and independent practitioners and the assessment process for organizational providers who provide care to Humana's members. Consistent with Humana's mission to assist members in achieving life-ling well-being, the goal of this policy is the selection of qualified practitioners and providers.

In certain circumstances, Humana is subject to certain credentialing requirements, such as state and federal regulations, that exceed or differ from those outlined in this policy.

Scope:

Credentialing requirements apply to:

- Practitioners who are licenses, certified, or registered by the state to practice independently (without direction or supervision); and
- Practitioners who have an independent relationship with Humana (an independent relationship exists when Humana directs its members to see a specific practitioner or group of practitioners, including all practitioners whom a member can select as primary care practitioners); and
- Practitioners who provide care to member under Humana's medical, dental, and vision benefits.

Credentialing criteria apply to practitioners in the following settings:

- Individual or group practices,
- Organizational providers,
- Rental networks, and
- Telemedicine.

Procedure:

1. Definitions:

Clean Application	Clean application, as used in KRS 205.532 to 205.536, means a
	credentialing application submitted by a provider to a Credentialing
	Verification Organization (CVO) that is complete and does not lack
	any required substantiating documentation.

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: Credentialing a or Kentucky Med		aling Using a Credentialing Verifi	cation Organizatio
Credentialing Application Date		g Application Date, as used in KRS 2 date that a CVO receives a Clean	
Credentialing Verification Organization	205.532 to 2 verifies the federal and Committee f A. An or subse B. Any I trade that I Mana Depa its Er or pro	g Verification Organization (CVO) 205.536 means an organization tha credentials of providers in a manr state laws and the requirement or Quality Assurance (NCQA). A CV rganization designated by the Depa ection (3) (a) of KRS 205.532 to 205 bona fide, nonprofit, statewide, he association, organized under the has an existing contract with the aged Care Organization (MCO) co ortment to perform credentialing verifi- nollees, providers who are employed poviders who practice at the Enrollees	t gathers data and her consistent with is of the National /O is: artment pursuant to 5.536; and ealth care provider laws of Kentucky, Department or a ontracted with the fication activities for ed by its Enrollees, s' facilities.
Department		means the Department for Medica abinet, or its designee.	id Services (DMS)
Humana	Humana me underwrite o Services an Health Valu	ans Humana, Inc. and its affiliates an or administer health, dental, or visior d Support (LTSS), CarePlus Healt e Management Inc., d/b/a Choice na Behavioral Health Network.	n plans; Long-Term th Plans, Inc., and
Humana Members	plans, LTSS	mbers means participants of health , and programs provided by Human	a.
Organizational Providers	Providers de	escribed as hospitals or other health	care facilities.
Telemedicine		diagnosis and treatment of patie ications technology.	ents by means of
2. Humana's Res			

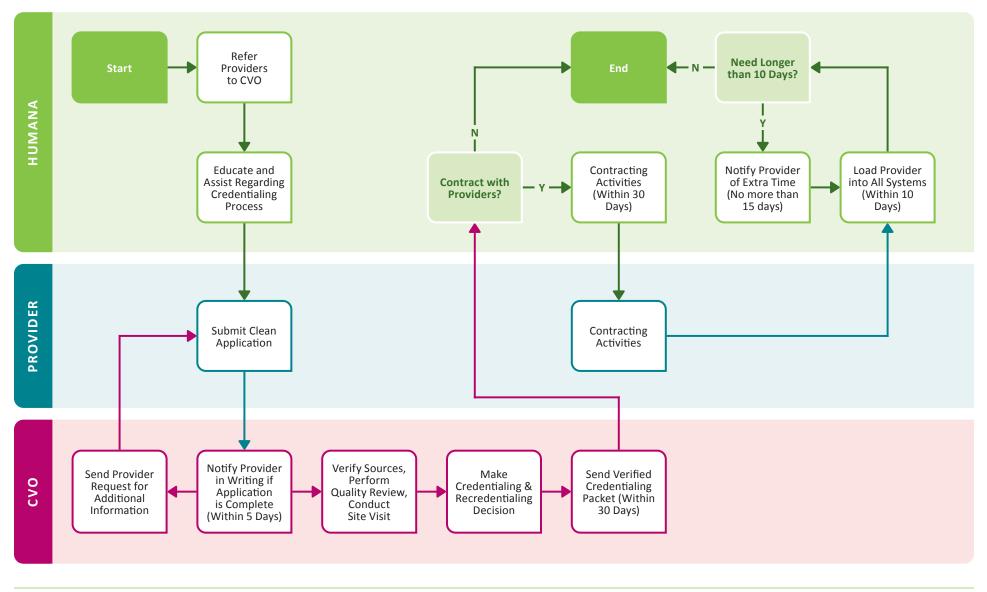
Humana's responsibilities shall include:

- Referral of providers to the CVO to complete credentialing prior to contracting with Humana, and to provide information to Network Providers about the recredentialing process.
- Ongoing education and assistance with credentialing process.
- Methods for receiving verified credentialing packets from the CVO.
- Determining whether to contract with the provider within thirty (30) days of receipt of the verified credentialing packet from the CVO.

<section-header> Characterization Pairs Name Page 3 of 3 Original Issue Date: V6/2019 Pairs Name Page 3 of 3 Object: Credentiating and Recredentiating Using a Credentiating Verification Organization Control Version Version Page 3 of 3 Object: Credentiating and Recredentiating broncessing systems are updated to include the control. Page 3 of 3 Object: Credentiating and Recredentiating provider within ten (10) days of the executed control. Page 3 of 3 Object: Credentiating and Recredentiating troppediation provider within ten (10) days of the executed control. Page 3 of 3 Object: Credentiating and Recredentiating version are evaluation of provider of the executed control. Page 3 of 3 Object: Credentiating and Recredentiating version are evaluation of provider of the executed control. Page 3 of 3 Object: Credentiating and recredentiating information for the CVO monthyl during implementation control. Page 3 of 3 Object: Credentiating services, including: Page 3 of 3 Object: Credentiating and recredentiating information form NCQA-approved proved prov</section-header>		Policy and Procedure		
Original Issue Date: 06/2019 Policy Number: N/A Page 3 of 3 Subject: Credentialing and Recredentialing Using a Credentialing Verification Organization (CVO) for Kentucky Medicaid Ensure Humana's internal processing systems are updated to include the accepted provider as a participating provider within ten (10) days of the executed contract. Notify the provider if additional time beyond the required ten (10) days is needed to load and configure the provider contract, not to exceed an additional fifteen (15) days. Work with the CVO as necessary when a re-evaluation of provider documentation is determined as necessary to maintain participation status. Meet with the Department and/or the CVO monthly during implementation activities, quarterly during ongoing operations, or at a different frequency as requested by the Department, Humana, or CVO about the credentialing process. CVO Responsibilities: Accepts applications, reapplications, and attestations Collects licensure information from NCQA-approved sources Collects education and training information from NCQA-approved sources Collects work history information from NCQA-approved sources Collects work history information from NCQA-approved sources 	Humana			
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 Send credentialing packets to Humana Work with Humana as necessary when a re-evaluation of provider documentation is determined as necessary to maintain participation status. Meet with the Department and/or Humana monthly during implementation activities, quarterly during ongoing operations, or at a different frequency as requested by the Department, Humana, or CVO about the credentialing process. Humana retains the right to approve, suspend, and terminate individual practitioner, providers, and sites where it has delegated decision making. 				

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CVO Credentialing Process Flow



MCO RFP #758 200000202

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Refers Providers to CVO	CVO			
Educate and Assist Providers with Credentialing Process	Accepts Applications, Reapplications, & Atte			
	Verifies Primary Sourc			
	Performs Quality Revie			

Accepts Applications, Reapplications, & Attestations Verifies Primary Sources Performs Quality Review Conducts Site Visits Makes Credentialing & Recredentialing Decisions Sends Credentialing Packet to Humana

Humana

Receives Credentialing Packet from CVO

Makes Contracting Determination

Contracts with Provider

Adds Provider to Systems

Works with CVO

Monitors Recredentialing Timelines