Attachment C.17.f-2 Procedures for CVO Coordination

UnitedHealthcare will collaborate with the Department to include the use of a new CVO that will be responsible for credentialing and recredentialing Medicaid providers enrolled or seeking to enroll with Kentucky Medicaid. We have prior experience in the shared CVO process across our health plans for Medicaid. For example, when the Arizona Association of Health Plans (AzAHP) launched an initiative in 2012 to reduce the burden of credentialing placed on Arizona physicians, we participated in the development and deployment of a statewide credentialing alliance, working with other state Medicaid partners as a member of the AzAHP. This effort was a useful strategy for alignment of credentialing cycles across all Arizona Medicaid plans, reduced duplication of efforts and provided for administrative simplification. Additionally, as recently as April 2018, our credentialing team implemented processes in conjunction with the Texas Association of Health Plans to implement the CVO for providers. The CVO is used for provider credentialing and recredentialing for Texas Medicaid providers and provides a streamlined approach for all providers participating in the Medicaid program with other MCOs. Given our experience working with the chosen vendor, Aperture, we experienced a seamless implementation of this new CVO process.

Based upon this experience and successful coordination procedures used in these markets, we recommend that once the Department has selected and contracted its preferred CVO(s) for the Kentucky Medicaid Program, a Credentialing Workgroup (Workgroup) be established. The Workgroup would include the Department, the CVO(s) and all Kentucky MCOs. Collectively, we can discuss such critical topics as: simplifying the Medicaid enrollment; provider credentialing process improvements for efficiency and reducing administrative burden; uniform policies; provider submission of a single application; timing; best practices; information sharing; gap analysis; performance standards; linkages; and data type and transfer needs. All can participate in the analysis and design of the data exchange and exchange of files that will need to be transferred between the CVO(s) and each MCO. Data exchange includes initiating orders for files to be processed as well as returned data indicating files have been completed, data elements requiring update in MCO data systems and transfer of full data files containing credentialing information and images processed by the CVO(s).

We are committed to supporting the Commonwealth’s strategic agenda and program goals related to a unified credentialing system for providers, and look forward to partnering with the Department, CVO(s) and other MCOs to establish a successful, streamlined system that will work for everyone.