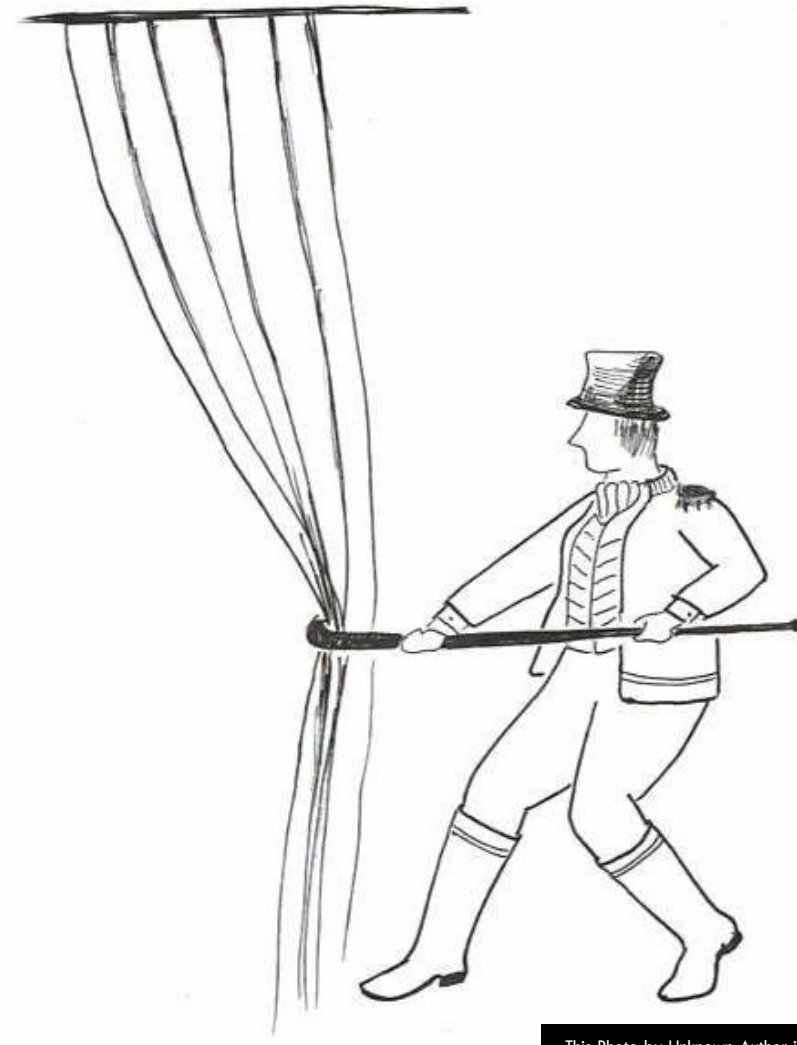


PROVIDER ENROLLMENT: WHAT'S BEHIND THE CURTAIN

Teresa Pequeño, Director of Payor Enrollment



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ABOUT ME



26 years in healthcare industry

18+ years in Credentialing and Provider Enrollment

Currently the Director of Payor Enrollment for MedStar Health

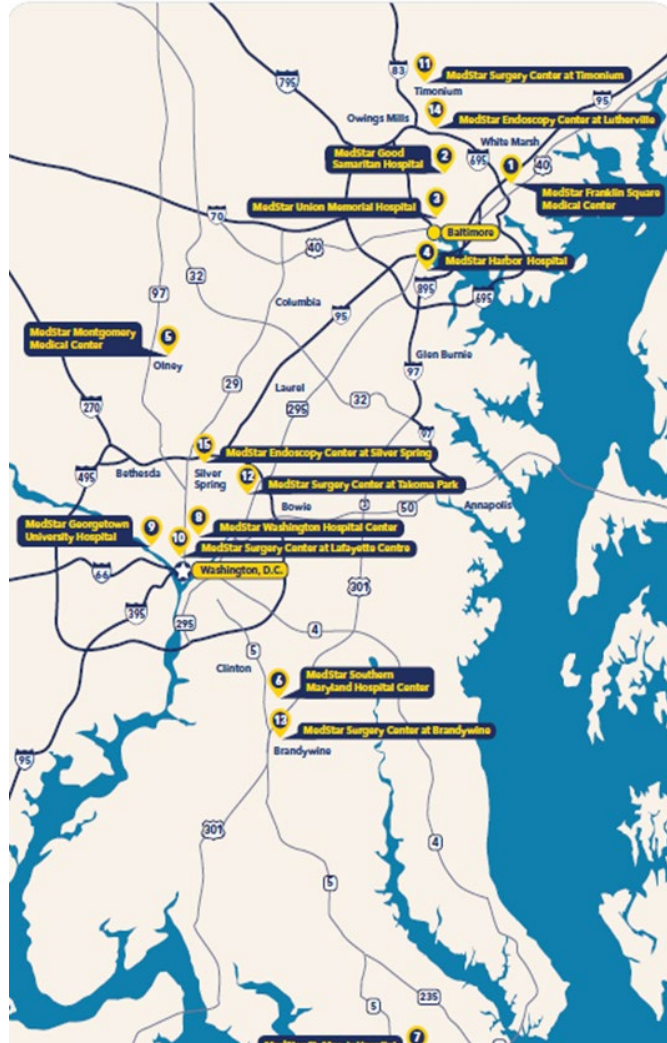
Dog Mom

Boy Mom

Huge bookworm



MedStar Health



Maryland Hospitals

- 1 MedStar Franklin Square Medical Center
- 2 MedStar Good Samaritan Hospital
- 3 MedStar Union Memorial Hospital
- 4 MedStar Harbor Hospital
- 5 MedStar Montgomery Medical Center
- 6 MedStar Southern Maryland Hospital Center
- 7 MedStar St. Mary's Hospital

Washington, D.C. Hospitals

- 8 MedStar Washington Hospital Center
- 9 MedStar Georgetown University Hospital

Ambulatory Surgery Centers

- 10 MedStar Surgery Center at Lafayette Centre
- 11 MedStar Surgery Center at Timonium
- 12 MedStar Surgery Center at Takoma Park
- 13 MedStar Surgery Center at Brandywine

Endoscopy Centers

- 14 MedStar Endoscopy Center at Lutherville
- 15 MedStar Endoscopy Center at Silver Spring

Coming soon:

- MedStar Surgery Center at Annapolis
- MedStar Surgery Center at Bethesda

MedStar Medical Group...by the numbers.

A clinical and operational cornerstone of the MedStar Health Distributed Care Delivery Network

Employed providers

4,380 employed providers*

2,683 employed physicians

1,697 advanced practice providers



2.75 million
patient visits** annually

14.5 million
wRVUs***



40 system and regional service lines

More than **700** access points of care, covering more than **225** zip codes in **17** counties



One of the **largest** medical groups in the country



More than **1,400** providers covering acute care across 10 system hospitals



More than **1,150** residents and fellows

103

residency and fellowship programs



Supported by **1,500** MedStar Health provider teaching faculty



More than **880** providers holding faculty appointments at Georgetown University



More than **400** physicians engaged in research



More than **1,000** research papers published per year

*Source: PeopleSoft and ECHO as of September 2024; does not include residents and fellows

**Source: IDX - FY 2024

***Source: FY 2024 UHC RVUs

Version September 2024



KEY POINTS



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The Similarities between
Credentialing & Enrollment



The Differences between
Credentialing & Enrollment



Types of Credentialing



Types of Enrollment

NEIGHBORHOOD HEALTH

Your hospital has
an opening in their
physician practice.

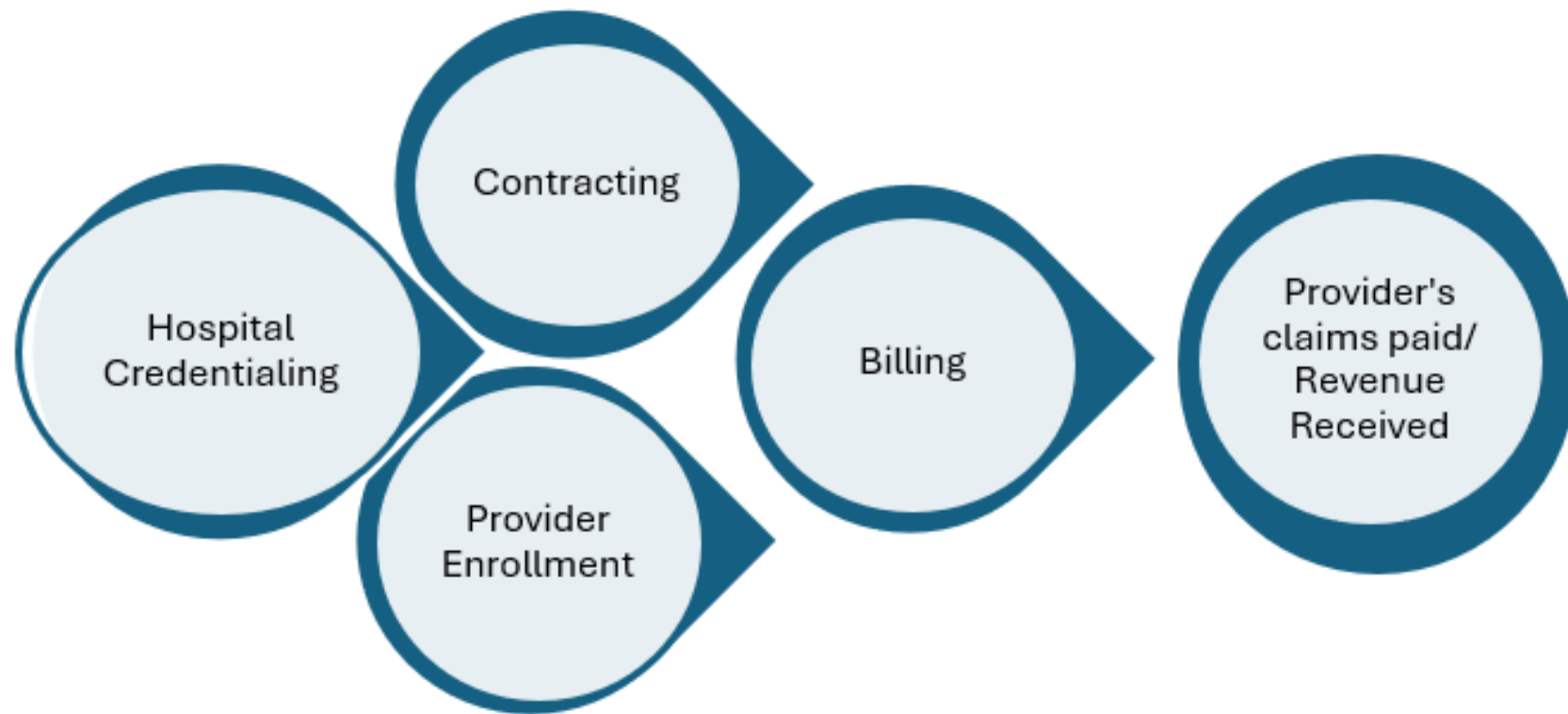


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DR. SALUD HAS BEEN RECRUITED!

What are our next steps?



NAMSS DEFINES:

Credentialing	Provider Enrollment
Credentialing is the process of obtaining, verifying, and assessing the qualifications of a practitioner to provide patient-care services in a healthcare setting and credentials verification organizations.	Provider Enrollment is defined as the process through which healthcare providers apply to participate in insurance networks, government programs like Medicare and Medicaid, and private payers. It is recognized as a core function of the profession and essential for the role of gatekeepers of patient safety.

LET'S LOOK AT THE SIMILARITIES

CREDENTIALING

- REQUIRES THE PROVIDER'S PROFESSIONAL LIFE STORY
- DATA ACCURACY IS A MUST
- CANNOT GET PAID WITHOUT IT
- EVERYONE WONDER WHY IT TAKES SO LONG

ENROLLMENT

- REQUIRES THE PROVIDER'S PROFESSIONAL LIFE STORY
- DATA ACCURACY IS A MUST
- CANNOT GET PAID WITHOUT IT
- EVERYONE WONDER WHY IT TAKES SO LONG

LET'S LOOK AT THE DIFFERENCES

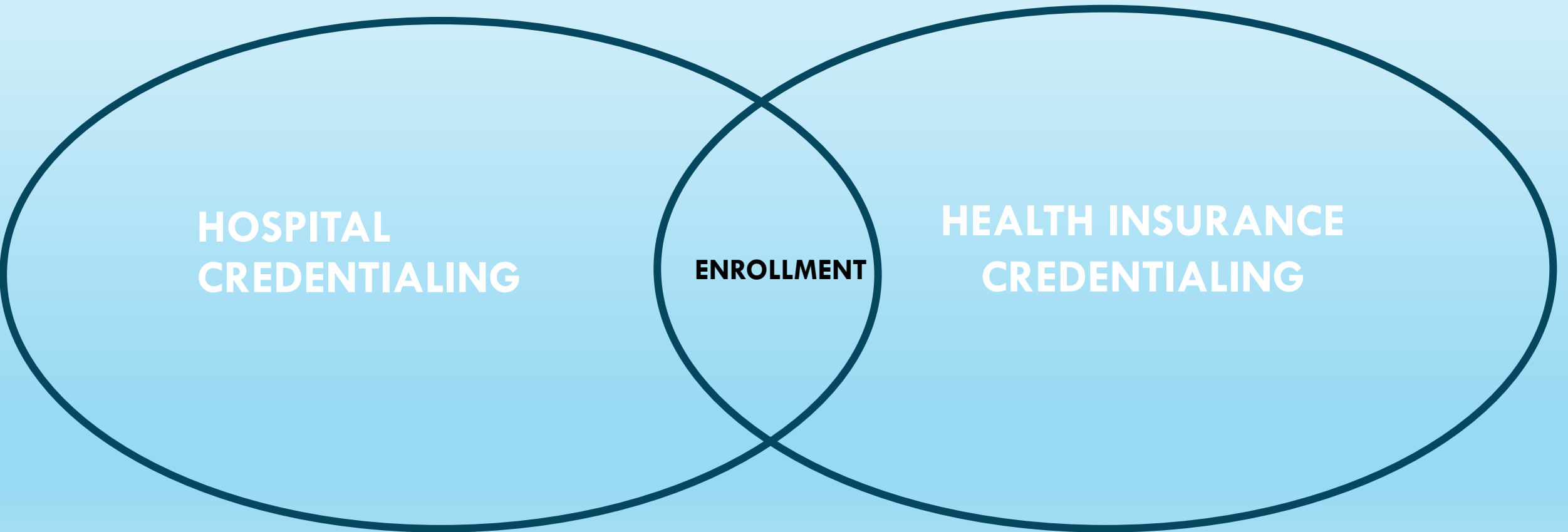
CREDENTIALING

- PRIMARY SOURCE VERIFICATION
- CRED ANALYST RECIEVES ONE APPLICATION PER PROVIDER
- CRED ANALYST PROCESSES APPLICATION PER THEIR ENTITIES BYLAWS OR CRED POLICIES
- CRED ANALYST DECIDES IF PROVIDER'S APPLICATION IS COMPLETE
- CRED TYPE DEPENDENT: EXACT PRACTICE LOCATION AND BILLING INFORMATION NOT NEEDED

ENROLLMENT

- NO PRIMARY SOURCE VERIFICATION
- PE REP MUST SUBMIT SEVERAL APPLICATIONS PER PROVIDER
- PE REP MUST BE FAMILIAR WITH CRED POLICIES FOR EACH HEALTH INSURANCE APPLICATION
- PE REP AT THE MERCY OF CRED ANALYST FOR EACH APPLICATION SUBMITTED
- EXACT PRACTICE LOCATION AND BILLING INFORMATION IS VERY IMPORTANT

IT'S ALL ABOUT PERSPECTIVE





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WAIT...WHAT
DOCUMENTS/DATA DOES DR.
SALUD'S OFFICE NEED?

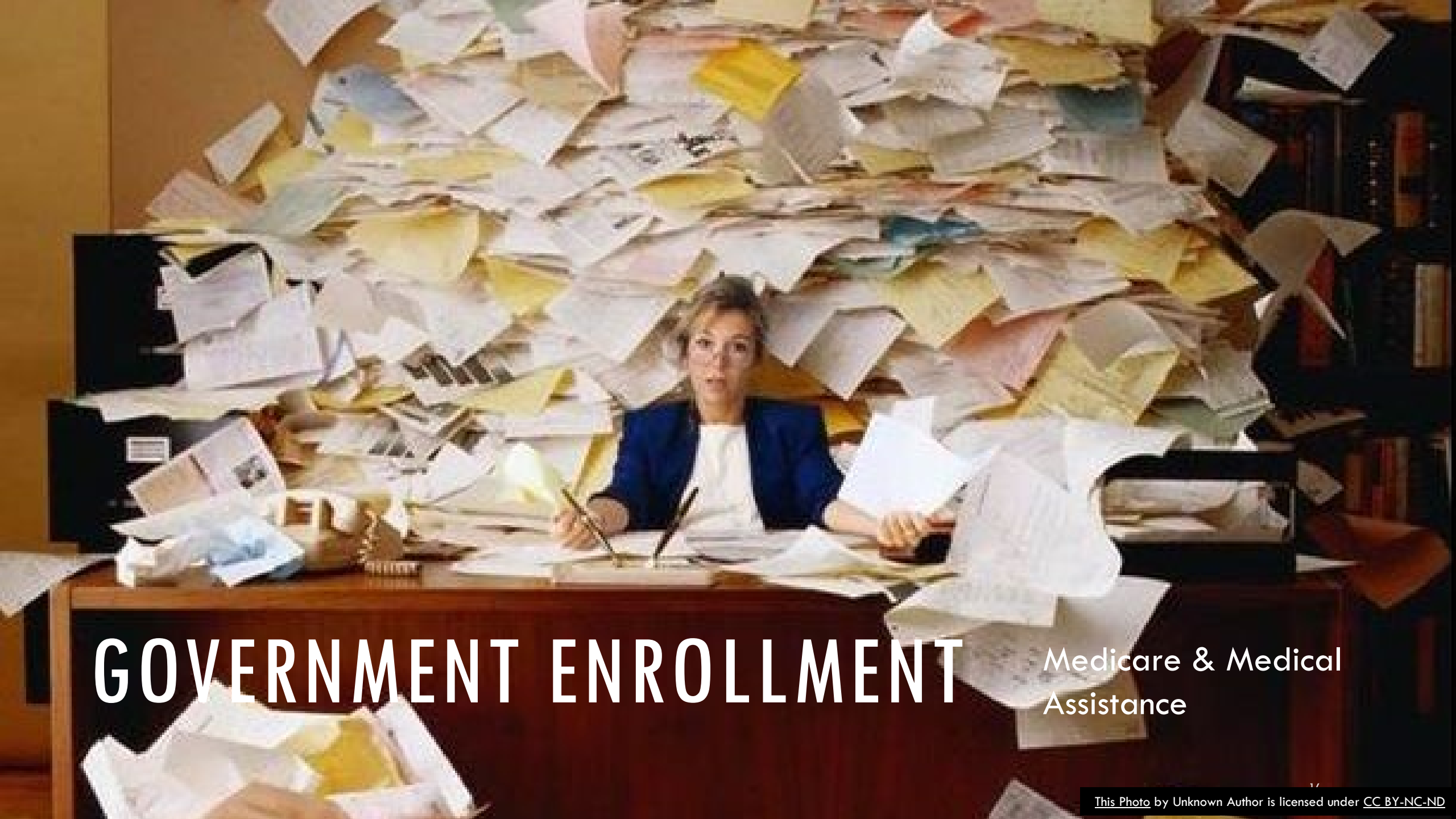
The search is on for
credentialing and
enrollment information.

WHAT IS NEEDED FOR DR. SALUD TO SEE PATIENTS AND RECEIVE PAYMENT FOR SEEING THOSE PATIENTS?

	Application
Hospital Privileges	Maryland Hospital Credentialing Application (plus any applicable hospital specific forms)
Health Insurance Enrollment	CAQH Credentialing Application (may also have health plan specific forms) OR Delegated Roster
Medicare Enrollment	PECOS (Online enrollment) CMS-855I for Physicians and Non-Physician Practitioners, CMS 855B for Clinics and Group Practices
Maryland Medical Assistance (Medicaid) Enrollment	ePREP (Online Enrollment)

WHAT INFORMATION IS NEEDED FOR THE ENROLLMENTS?

	Hospital	Managed Care Health Plans	Medicare	Medical Assistance
Provider Demographics	X	X	X	X
Type I NPI	X	X	X	X
Education & Training	X	X (verified if provider not Board Certified)	X	
Specialty & Board Certification Status	X	X	X (NPs and PAs Only)	
Professional Association Membership Information				
State Medical License	X	X	X	X
DEA	X	X		
CDS	X	X		
Curriculum Vitae	Collected / Not Required			
Practice Locations	Verified / Not Required	X	X	X
Billing/Remittance Data		X	X	X
Hospital Affiliations	X	X		
Professional Liability Insurance (Past and Present)	Verified / Not Required	X (need current COI)		
Sanction History	x	X		
Malpractice Claim History	Verified / Not Required	X	X	X (attestation question)
Criminal/Civil History	X	X		X (attestation question)
Ability to Perform Job		X		
Work History	Verified / Not Required	X (past five years)		
Professional References	X			



GOVERNMENT ENROLLMENT

Medicare & Medical
Assistance

MEDICARE/CMS ENROLLMENT: PECOS

[HTTPS://PECOS.CMS.HHS.GOV/](https://pecos.cms.hhs.gov/)

Initial Enrollment for a Provider Organization

Online Tutorial:

<https://www.youtube.com/embed/IEkcluk-fxA?rel=0&autoplay=0>

Change of Information for a Provider Organization

Online Tutorial:

<https://www.youtube.com/embed/U0fJnhQ0egk?rel=0&autoplay=0>

MEDICARE/CMS ENROLLMENT: PECOS

[HTTPS://PECOS.CMS.HHS.GOV/](https://pecos.cms.hhs.gov/)

Initial Enrollment for an
Individual Provider

Online Tutorial:

<https://www.youtube.com/embed/cGjGmqb3UZQ?rel=0&autoplay=0>

Change of Information for an
Individual Provider

Online Tutorial:

<https://www.youtube.com/embed/eXu skSiS1Y?rel=0&autoplay=0>

MARYLAND MEDICAL ASSISTANCE (MEDICAID)

ePREP Portal

<https://eprep.health.maryland.gov/sso/login.do>

ePREP Instructions and Training

<https://health.maryland.gov/mmcp/provider/Pages/eprepresources.aspx>

Aetna

CareFirst

Cigna

Johns Hopkins
Healthcare

MedStar
Family Choice

United
Healthcare

Wellpoint MD



HEALTH INSURANCE ENROLLMENT

PROVIDER ENROLLMENT METHOD

Individual Provider Application

The screenshot shows the CAQH ProView web application. At the top, there's a navigation bar with 'HOME', 'MANAGE INFORMATION', and 'REVIEW'. A user profile dropdown for 'Diane Hall' (CAQH ID# 13515114) is visible, with options for 'Change Password', 'Authorize', and 'Activity Log'. The main content area displays the user's name and ID, a message center indicating one item is required for attestation, and sections for 'SUPPORTING DOCUMENTS' (showing Professional Liability Insurance) and 'ATTESTATION HISTORY' (showing a recent attestation on 4/7/2015).

Delegated Roster

The screenshot shows an Excel spreadsheet with a header row and multiple data rows. The header row is labeled with columns: LAST NAME, FIRST NAME, DEGREE, MI, SSN, DOB, GENDER, INDIVIDUAL NPI, and PCP STATUS. The data rows are numbered 187 through 195, with the first row (1) containing the text 'LAST NAME' in the first column.

	A	B	C	D	E	F	G	H	I
1	LAST NAME	FIRST NAME	DEGREE	MI	SSN	DOB	GENDER	INDIVIDUAL NPI	PCP STATUS
187									
188									
189									
190									
191									
192									
193									
194									
195									

DELEGATED CREDENTIALING



Defined as when a health care entity grants another health care entity the authority to credential its providers.



Example: CareFirst grants MedStar Health the authority to credential its provider.

- Often used by large health systems
- Can improve enrollment TAT
- Can decrease paperwork
- Can reduce lost or delayed revenue

DELEGATED CREDENTIALING REQUIREMENTS



PRE-DELEGATION
ASSESSMENT



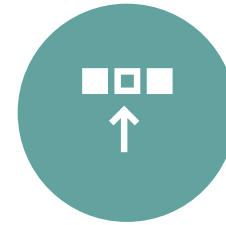
DELEGATION
AGREEMENT



OVERSIGHT
ASSESSMENT
ACTIVITIES



REGULATORY
COMPLIANCE

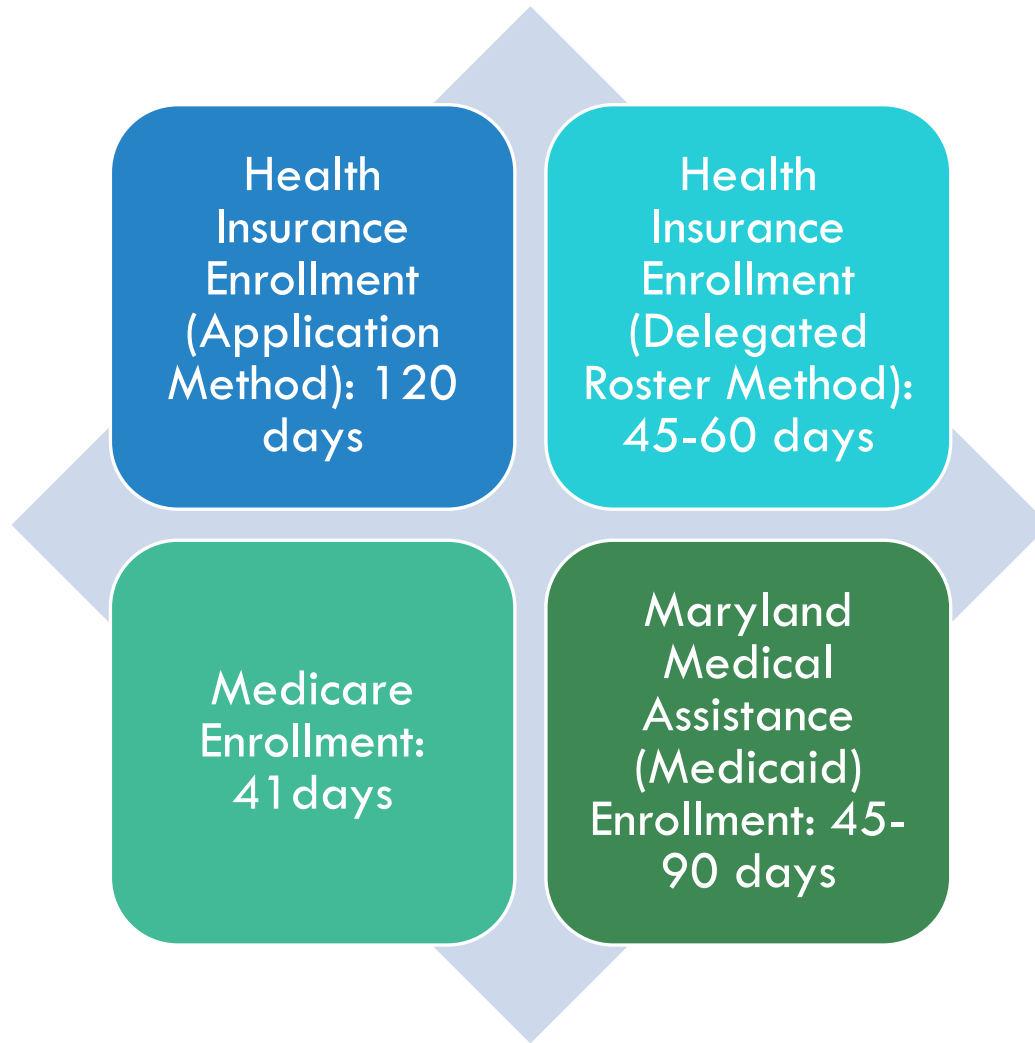


NCQA
COMPLIANCE



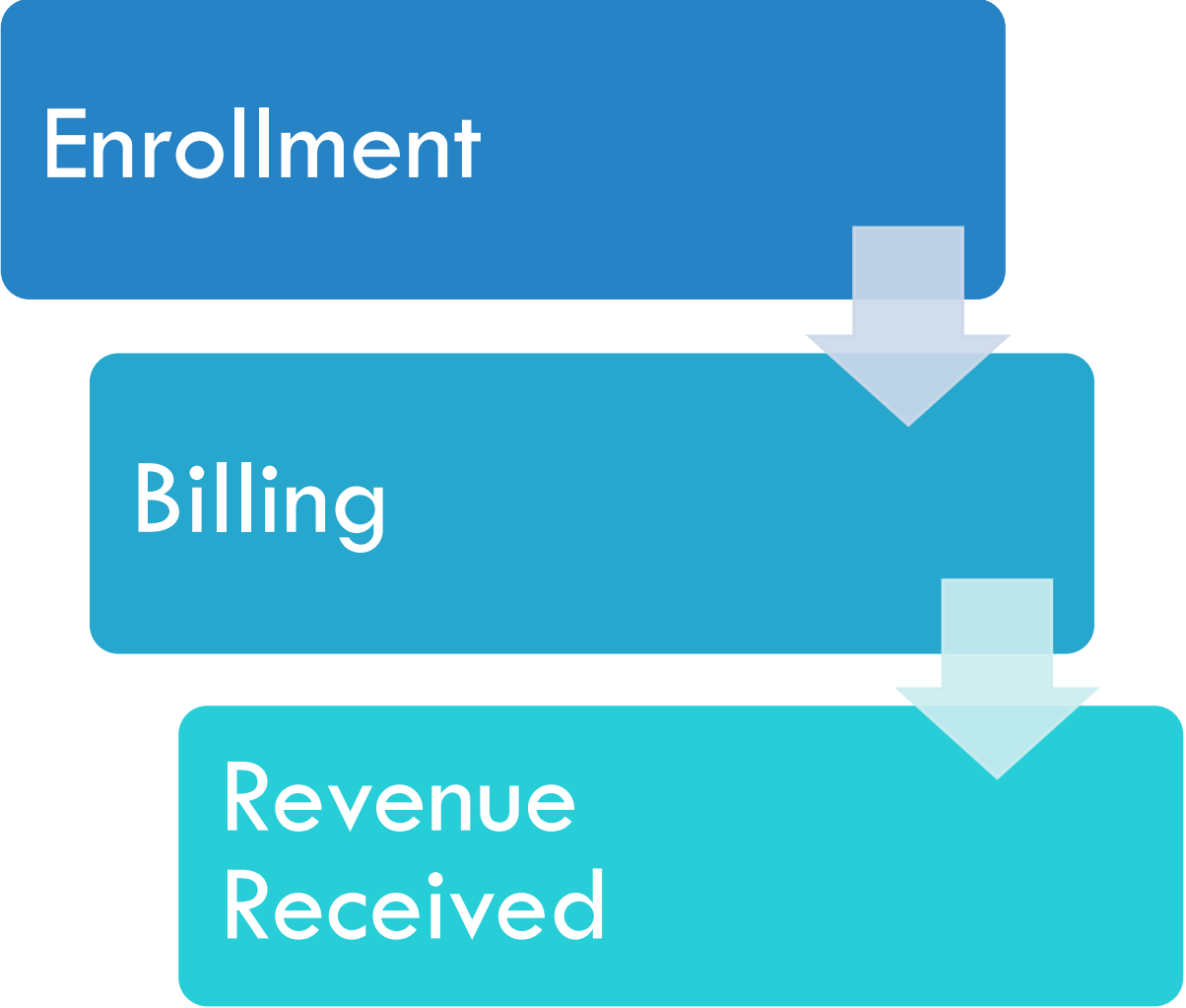
DR. SALUD'S ENROLLMENT HAS BEEN
SUBMITTED

Now what?



ENROLLMENT TIMEFRAMES (ESTIMATES/AVERAGES)

Enrollment



```
graph TD; A[Enrollment] --> B[Billing]; B --> C[Revenue Received];
```

Billing

Revenue
Received

NEXT STEPS

NAMSS CERTIFIED PROVIDER ENROLLMENT SPECIALIST (CPES) CERTIFICATION

- CPES is the first provider enrollment certification on the market, and it gives MSPs and those already practicing provider enrollment an opportunity to demonstrate their skills and knowledge of this topic.
- At the time of application, a candidate must have been or currently be employed or contracted in the profession of provider enrollment for at least 12 consecutive months in the last 24 months and have a total of three years' experience within the past five years.
- The first CPES application window will open in July 2025.
- The first exam will be offered in the beginning in the Fall 2025 testing window.

ENROLLMENT ADVICE

- Organization is a must!
- Keep your provider data current
- Track your applications or rosters
- Set follow up timelines
- Document your follow-up
- Get to know your payer/health plan reps
- Make friends with billing
- Stay up to date with credentialing requirements

THANK YOU!

Questions?

Email:

Teresa.Pequeno@medstar.net

