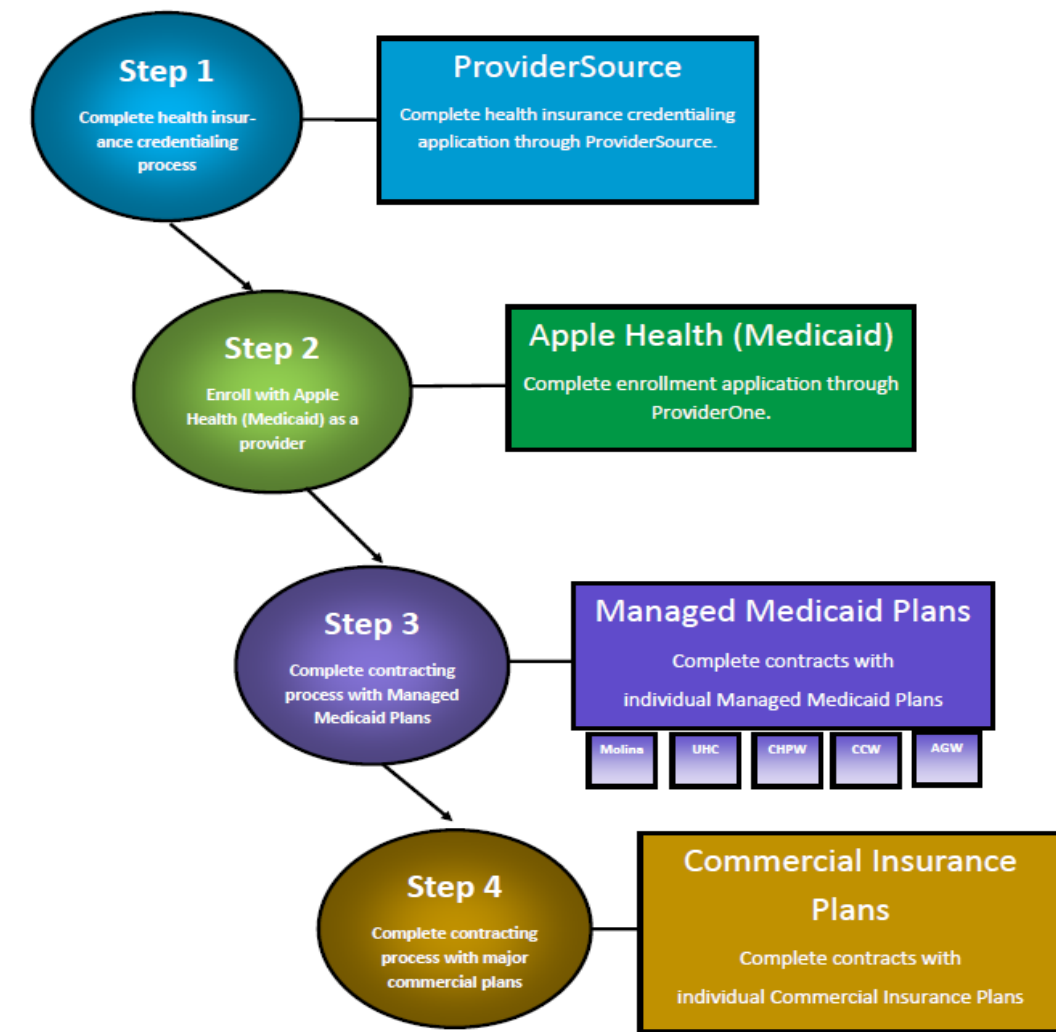


Health Insurance Credentialling and Billing for PrEP Pharmacies

Overview: To streamline the health insurance credentialling process for PIPAR's PrEP pharmacies, the following guidance and resources on credentialling are provided below. Training resources on billing for HIV prevention services are also included. This document covers:

- [Overview of the health insurance credentialling process:](#) Visual pathway
- [Step One:](#) ProviderSource
- [Step Two:](#) Apple Health (Medicaid)
- [Step Three:](#) Managed Medicaid Plans
- [Step Four:](#) Commercial Insurance Plans
- [Other](#) support and resources:
 - The PrEP Drug Assistance Program (PrEP DAP)
 - Billing Support and Training Resources

Overview of the health insurance credentialling process



Step One: ProviderSource

- **Overview:**
 - Under Senate Bill 5346, ProviderSource is the single source for health plans, hospitals, and other healthcare organizations in the region for credentialing.
 - Each health plan still manages their own credentialing and privileging process, but they collect all data and documents needed via ProviderSource.
 - Credentialing with ProviderSource is required in order to become credentialed as a provider with health insurance plans/networks in the state.
- **Program Webpage:** <https://www.onehealthport.com/credentialing/about-providersource>
- **Guidance on completing application:**
 - **Step 1:** Register your organization (pharmacy) if not already registered: <https://www.onehealthport.com/sso/register-your-organization>
 - **Step 2:** Identify a Credentialing Administrator and nominate and/or affiliate providers: The Credentialing Administrator will manage the credentialing application and all information for your organization. They will either “nominate” (add new) providers to ProviderSource or “affiliate” (add existing) providers in ProviderSource in order to affiliate them to the organization account. See guidance covering this step: https://www.onehealthport.com/sites/default/files/SSO/ProviderSource_GettingStarted.pdf
 - **Step 3:** Complete the ProviderSource applications. Each pharmacist will complete a ProviderSource application after their Credentialing Manager either nominates or affiliates them to the organization account (step 2). Step-by-step guidance for completing the ProviderSource application: https://www.providersource.com/Resource/Manual/Providersource%20Manual_Standard_V1.0.pdf
 - *Note that pharmacists should identify which managed care and commercial plans they will allow ProviderSource to share credentialing information with. Pharmacists will still need to apply (separately) to each plan after their ProviderSource application is approved.*
 - **FAQs/Videos:** Additional FAQs and guidance videos can be found here: <https://www.providersource.com/Help/FAQs.aspx>
 - **For ProviderSource support services:** Please contact (855) 252-4314 (option 1) or email provider.support@medversant.com

Step Two: Apple Health (Medicaid):

- **Overview:** In Washington State, Medicaid is called Apple Health and is administered through the Health Care Authority (HCA). Credentialing with Apple Health (Medicaid) is managed through ProviderOne.
- **Program Webpage:** <https://www.hca.wa.gov/billers-providers-partners/apple-health-medicaid-providers/enroll-billing-provider>
- **Two applications are required to become credentialed with Apple Health:**
 - i. Billing Provider Application (Enrollment Type: Facility/Agency/Organization/Institution, FAOI). Completed once on behalf of each entity/organization with its own unique Tax ID Number (TIN) and organizational/store NPI.
 - ii. Servicing Provider Application. Completed for each pharmacist being credentialed.
- **Guidance on completing applications:**
 - i. Billing Provider Application:
 - Step-by-step guidance on completing the application: <https://www.hca.wa.gov/assets/billers-and-providers/p1provuser-manual-enroll-FAOI.pdf>
 - Include all pharmacy locations (in “Add Locations” section) where pharmacists will be billing under the TIN (or organizational NPI) that the application is filed under. *Each pharmacist added as a servicing provider must be affiliated with a specific billing location.*
 - Choose enrollment type: Facility/Agency/Organization/Institution (FAOI).
 - Organization (Pharmacy) completes enrollment application as a billing provider.
 - Each entity with its own unique TIN and/or unique organizational or store NPI should complete this application (i.e., if each pharmacy location has a different TIN or NPI, each pharmacy must complete a separate application).
 - The taxonomy code is a combination of the provider type, specialty and subspecialty: The first two digits are the provider type, the next two digits are the provider specialty, and the next five digits are the provider subspecialty. The last character is reserved for future use so will be displayed as an X.
 - EDI Submission Method:
 - If you plan to submit claims using a billing software program and then upload claims into ProviderOne (the credentialing and billing platform) select “Web Batch.”
 - If you will use a 3rd party or clearing house to submit claims, select “Billing Agent/Clearinghouse.”
 - If you plan to submit claims manually (direct data entry into ProviderOne), select “Web Interactive.”
 - EDI Billing Software Details:
 - This step is only required if you selected “Web Batch” or “FTP Secured Batch” as the EDI Submission Method. *You do not need to enter in billing software details if you plan to submit claims manually (direct data entry) into ProviderOne’s portal.*
 - The Core Provider Agreement, debarment statement, W-9, and other required forms in the final page of the application are uploaded in the final step of this application.

- ii. Servicing Provider Application.
- Step-by-step guidance for completing this application can be found here: <https://www.hca.wa.gov/assets/billers-and-providers/p1provuser-manual-enroll-servicing.pdf>
 - One Servicing Provider application is completed for each pharmacist.
 - Pharmacist(s) must apply as a non-billing provider within this application.
 - This application can be initiated as soon as the application ID is obtained from the Billing Provider Application (step i above) but should not be submitted until the Billing Provider Application is approved (*Servicing Provider applications without an enrolled Billing Provider will be denied*).
 - Each pharmacist must complete and sign the four documents below as part of the last step of this application:
 - [Core Provider Agreement](#)
 - [Debarment Statement](#)
 - [W-9](#)
 - [Trading Partner Agreement](#)

Step Three: Managed Medicaid Plans:

- **Overview:** There are [5 managed Medicaid plans](#) in Washington State, and most Apple Health (Medicaid) patients in Washington state receive care through one of these plans. The managed Medicaid plans are:
 - Molina Healthcare of Washington (MHW)
 - United Healthcare Community Plan (UHC)
 - Community Health Plan of Washington ([CHPW](#))
 - Coordinated Care of Washington ([CCW](#))
 - Amerigroup of Washington ([AMG](#))
- Most Medicaid patients who reside within King and Pierce counties are members of either Molina or United Health Care Community Plan (UHC) of Washington. Guidance for contracting with these plans are below. Links to the three other plans are included above.
- To identify which MCOs in your region service the most Medicaid patients, you can view the Apple Health managed care plan service area map (https://www.hca.wa.gov/assets/free-or-low-cost/service_area_map.pdf) and also the enrollment reports on the HCA website here: <https://www.hca.wa.gov/about-hca/apple-health-medicaid-and-managed-care-reports>
- Before you apply to join a managed Medicaid plan's network, you must have billing and rendering pharmacies (and pharmacists) registered with Apple Health (Step 2 above) and with ProviderSource (Step 1 above).

- **Guidance on completing the Molina Healthcare of Washington (MHW) application:**
 - The MHW credentialing process includes completion of two forms (details outlined below):
 - i. Complete the [Contract Request Form](#) and submit it along with a [W-9](#) to the plan at: MHWProviderContracting@MolinaHealthcare.com.
 - a. The first 3 boxes of the application should be filled in with agency/pharmacy information (pharmacy NPI, etc) and the last box at the bottom should be filled in with the individual pharmacist(s) information (NPI, etc). You can add additional pharmacists to the contract by completing the "Add Provider/Mini Application" (see below).
 - ii. Complete the [Add Provider/Mini Application](#) form and send it to the plan at: MHWProviderContracting@molinahealthcare.com
 - a. Each additional pharmacist should complete and submit this form. Indicate the group number/information referenced in the Contract Request Form.
 - For more information about MHW and to review their Provider Manual, please visit: <http://www.molinahealthcare.com/providers/wa/medicaid/manual/provman.aspx>

- **Guidance in completing United Health Care's (UHC) application:**
 - Complete and send the provider roster (see [Appendix](#) below) along with a [W-9](#) to the plan contacts in bullet 3 below.
 - List all providers you wish to add to the network on the provider roster.
 - Within the email, indicate that the pharmacists listed on the roster would like to be in contract within the plan.
 - Once you send this information, UHC will review information from the roster and prepare and send each pharmacist a draft provider agreement to sign.
 - Plan Contacts:
 - Tiffany Miller: tiffany-miller@uhc.com (Pharmacy Contracting Specialist for UHC of WA)
 - Alexa Mendezona: alexa.mendezona@uhc.com , (Contractor who manages all pharmacist-provider contracts for UHC)

Step Four: Commercial Insurance Plans:

- Once the ProviderSource application is approved, pharmacists can apply to commercial plans.
- To identify which insurance plans your pharmacy should contract with, you can review PBM billing data for your pharmacy to identify which plans service most of your patient population.
- Guidance for applying to the two largest commercial insurance plans in Washington State are linked below.
 - Premera Blue Cross: <https://www.premera.com/wa/provider/reference/join-our-network/>
 - Regence Blue Shield: <https://www.regence.com/home>

Other support and resources

The PrEP Drug Assistance Program (PrEP DAP):

- **Overview:** The PrEP Drug Assistance Program (PrEP DAP) is a Washington state patient assistance program for HIV-negative people who have risk factors that expose them to HIV.
- **Program webpage:**
<https://www.doh.wa.gov/YouandYourFamily/IllnessandDisease/HIV/ClientServices/ADAPandEIP/ResourcesforContractedProviders>
- **Guidance on completing application:**
 - Application: <https://doh.wa.gov/sites/default/files/legacy/Documents/Pubs//410-067-EIPProviderContract.pdf>
 - The PrEP DAP application and contracting process is managed by the Early Intervention Program (EIP) of Washington state.
 - Complete one EIP application for each organization/entity with its own unique TIN.
 - Complete Appendix B if you need to list additional pharmacy locations (any additional locations added here must share the same TIN).
 - Complete the Payee Registration Form and W-9 on behalf of the pharmacy and include the appropriate TIN and other required information
- **PrEP DAP Provider billing guide and other resources:** <https://doh.wa.gov/you-and-your-family/illness-and-disease-z/hiv/hiv-care-client-services/early-intervention-program/resources-contracted-providers>

Billing Support and Training Resources:

- **Washington State Pharmacy Association (WSPA) Billing for Patient Care Services.** The WSPA offers an online training module that guides pharmacists through the health insurance credentialing and billing process. Available here: <https://www.wsparx.org/page/BillingServices>
- **Apple Health (Medicaid) offers additional training resources and training on how to bill and submit claims:**
 - Billing resource guide: <https://www.hca.wa.gov/billers-providers-partners/providerone/providerone-billing-and-resource-guide>
 - Webinars, guidance on submitting claims, billing:
 - <https://www.hca.wa.gov/billers-providers-partners/providerone/webinars>
 - <https://www.hca.wa.gov/billers-providers-partners/providerone/fact-sheets#claim-submission>
- **The National Alliance of State & Territorial AIDS Directors (NASTAD) Billing and Coding Guide.** NASTAD has developed a guide for providers billing and coding for HIV preventative services. Available here: https://nastad.org/sites/default/files/2021-12/PDF_BillingCodingGuide_v5.pdf

Appendix: UHC Provider Roster

Appendix 3 Your Professional Roster

Will you be attaching a copy of your roster to this form? YES NO

NOTE: Please attach additional copies of this page if you need to list additional professionals.

Drafting Note: Under Provider Specialties, you may add additional numbering if the professional has more than 2 (two) specialties that they either support or practice. For NP & PA Professionals, please ensure each have indicated their degree first in the second column and then also indicate their primary & secondary specialties which they support for loading purposes.

Name of Provider Representative Professional(s) (First Name, MI, Last Name)	Degree (MD, DO, NP, PA, other)	Male or Female (M/F)	Provider Specialty(ies)		State License #	Medicaid ID #	NPI #	Foreign Language(s) Spoken	Admitting Hospital(s)
			1) Primary	2) Secondary					
			1)						1)
			2)						2)
			1)						1)
			2)						2)
			1)						1)
			2)						2)
			1)						1)
			2)						2)
			1)						1)
			2)						2)
			1)						1)
			2)						2)

Click here to attach a complete roster: