



Becoming an MHS Health Wisconsin In-Plan Provider *A Quick Reference Guide to Credentialing*

To qualify to participate in the MHS Health Wisconsin Provider Network, a provider must:

- ✓ **Have an effective Wisconsin Medicaid number**
 - ✓ Have a current unlimited/unrestricted medical license in the state where the practice is located
 - ✓ Have an effective NPI number
 - ✓ Have a current DEA certificate
 - ✓ Have a current certificate of malpractice insurance with the appropriate limits of liability as set by the state of Wisconsin for the practice where practitioner is employed
 - ✓ Demonstrate appropriate experience, background, and relevant training for the specialty they will practice as an MHS Health in-plan provider, if application is approved
 - ✓ Have a professional office in one or more counties within the MHS Health certified service area
 - ✓ Provider must list all current hospital affiliations or state if they use hospitalists or if they are clinic based on
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- MHS Health utilizes CAQH for credentialing. Please make sure your CAQH application is current and that you have allowed *Centene* access to your application. MHS Health will make 3 outreach attempts for missing or expired information before your request is closed.
 - Primary Source Verification (PSV) will start once a “clean” application has been received by the Credentialing staff. The applicant has the right to review information submitted to support their credentialing application. If, during the PSV process, MHS Health identifies a discrepancy in information provided by the applicant, the MHS Health credentialing staff will notify the applicant via certified mail. The applicant has the right to correct any erroneous information gathered from outside sources as part of the verification process, however, this does not allow any peer review protected information, such as references, personal recommendations, or other information as stated by Federal Law. If the applicant fails to meet the 10-business day correction timeframe, the credentialing process will be terminated, and the applicant must begin the credentialing process again.
 - The PSV process could require up to 30 days to complete. The **entire** credentialing process, which also includes an on-site visit, if needed, and review by the MHS Health Credentialing Committee (CC), could take up to 60 days. MHS Health credentialing staff will notify all applicants via email within 10 business days of the Credentialing Committee decision of the approval/denial of their application.
 - Applications are not considered approved until they have completed the credentialing and contracting process and you are notified that you may begin to see MHS Health Wisconsin/Network Health members. MHS Health cannot grant any exceptions for applicants who have not completed the credentialing in its entirety.



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- You may email the Credentialing Department to check status at WI_CRED@mhswi.com, please allow 30 days before checking status.
- MHS Health Wisconsin credentials providers in the following categories:
 - Physicians (MD and DO) with the exception of:
 1. Urgent care and ER physicians, hospitalists, radiologists, pathologists and anesthesiologists.
However, you must notify our Provider Data Management Department or visit our website at www.mhswi.com and choose Provider Resources to complete a new provider setup form so that we can load these providers into our system for payment.
 - Pain management (must have the appropriate education/training and will be considered on an individual basis)
 - Physician Assistants (PA)
 - Advance Practice Nurse Prescribers (APNP)
 - Certified Nurse Midwives (CNM)
 - Locum tenens
- MHS Health Wisconsin does **not** credential:
 1. Physical, occupational, or speech therapists, unless they hold an independent contract, and audiologists. However, you must notify our Provider Services Department and complete a New Provider Setup form so we can load these providers into our system for payment.
 - Re-credentialing: Every 36 months, all MHS Health providers will be sent a re-credentialing application 90 days in advance of their last re-credentialing date. To be re-credentialed, all providers must meet the criteria listed in Number 1 above; in addition, a medical record review by MHS Health quality improvement staff may be required.

Last updated March 2022. The above is subject to change at any time per MHS Health guidelines

MHS Health and MHS/NHP refer to MHS Health Wisconsin, its members, and the Medicaid/BadgerCare plan members of Network Health.