Job Sheet				
Process Name: Initial Appointment – Internal CL				
Position: Credentialing Liaison (CL)				
Main Steps	**Breakdown Steps**	**Red Flags** *(Items to watch out for, what can go wrong)*	**Why**	**Tips and Tools**
1. Hiring manager notifies CL of new provider. • Hiring manager provides practice locations, start date, and entry point. • See License Type document for types of providers.	1. TBD	• Impact billing. • Delay in privileges.		• Need to update SOM PRC Form.

2. Initial: CL is notified regarding new hire. (as above)
    a. Review Status of Licenses:
	1. Collect licenses from new hire (in the following order):
	  a. State Medical (NM)
	  b. Controlled Substance Registration
	  c. DEA – NM address
	2. Go online to check status:
	  a. NM Medical License
	  b. CSR
	3. Call provider for status:
	  a. NM provider line phone #
	4. Call state medical board to find out reason for delay.
	5. CL communicates to provider (prior to formal offer – discuss with Letter of Offer Team):
	  a. Email (template)
	  b. Face to face
		• Find out if provider has NM license CSR, and NM DEA (if not, will need to apply once accepted the position, could take 3 – 5 months to obtain).	• Updating the license to reflect a NM address is needed for renewal notification.
			• Provider preference to use home or business address.
			• To prepare and engage provider for the credentialing and enrollment process.
			• Meet regulatory requirements.
				• Refer to Job Aide.
				• Communications template.
				• Add template link to clinical affairs website.
				• High level timeframe for the provider.

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3. CL completes CAR form.	1. Information to include on the CAR form:
	  a. Entit(ies) where provider will practice (UNMH, SRMC, UNMMG).
	  b. Practitioner Information
	    • Name/degree
	    • DOB
	    • Email/phone
	    • Specialt(ies)
	  c. Credentialing entry point (where providers was hired, PSA name)
	  d. Privileges to be sent
	  e. Name of Credentialing Liaison
	  f. Enrollment Information
	    • Billing packet?
	    • What clinic location
	    • PCP/Spec
	4. Create an online folder.
	5. Send documents to CVO:
	  a. CAR Form
	  b. CV
	  c. OHP Form (for OHPs only)
		• No credentialing and privileging
		• Delay in start date
			• To initiate credentialing and privileging process
			• Clarify information up front and avoid rework
				• CL Instructions and checklist
				• CAR form updated as of 4/17.

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4.	CAR form sent to: HSC-UNMHS_CVO@salud.unm.edu with attachments (see breakdown steps 3 a – c)	CVO: 1. Review form to ensure accuracy and completeness. 2. Reach out to CL to address any inaccuracy and missing forms.	• Missing anticipated start date and clarifications of privileges, entity.		• Add drop down list for privileging on CAR form and SOM PRC form (TBD).
5.	CVO sends out instructions for application and privileges to provider and cc: CL	1. Provider creates a login and completes applications and privileges. 2. AppCentral will send reminder notices to provider and cc's the primary CL. 3. Application may be sent back to the provider and cc: CL with questions.	• Needs to be completed as soon as possible. • Incomplete/missing practice history (5 years). • Immigration/ citizenship status is not clear. • Signature date is incorrect.		• In order for successful submission of the application, the provider's computer must have the latest browser version. At a minimum IE 8 (Cactus does not support Safari, Chrome, Firefox, etc.).

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6. Follow up and documentation gathering	1. Additional documents to obtain from provider and send to CVO when received or may send with CAR)
	   a. Photo ID
	   b. EOHS
	   c. OSHA/Bloodborne Pathogens training
	   d. *If applicable:*
	     • Activity Logs
	     • Insurance form (COI) for non-employed Providers
	     • Supervising Physician Statement for PA's
	2. Additional documents to be obtained for provider Enrollment (copies of):
	   a. DEA License
	   b. CSR
	   c. Medical License
	   d. Diplomas/Certifications
	   e. Educational Commission for Foreign Medical Graduates (ECFMG)
	   f. Board Certification
	   g. Social Security Card
	3. Create hard copy folder
	   a. Update checklist to track documents received
	4. Two months prior to start date:
	   a. Notify dept contact
	   b. Frequently communicate with new provider
	   c. Forward CVO/MSA reminder emails
				1. Add template link to clinical affairs website.

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7. National Provider Identification (NPI)	1. All providers will need to change their NPI to reflect NM state license.
	2. UNMHS Employed providers only would use the following addresses in #3 and #4.
	3. The mailing address: 933 Bradbury Dr. SE Ste. 2222, ABQ, NM 87106.
	4. Practice location:
	  a. UNMH: 2211 Lomas Blvd. NE, ABQ, NM 87106
	  b. UNMMG: 933 Bradbury Dr. SE Ste. 2222, ABQ, NM 87106
	  c. SRMC: 3001 Broadmoor, Rio Rancho, NM 87144
	5. Remind provider to update the NPI https://nppes.cms.hhs.gov/NPPES/Welcome.do
	(Takes approx. 24-48 hours).
			• Updating the license and taxonomy code is critical for correct billing.
			• Providers will have only one NPI and can have up to 15 taxonomy codes.	

8. Billing Packets:	1. Select applicable billing packet UNMH or UNMMG. If provider is SOM employed then use the UNMMG billing packet. 2. CL sends soft copy of billing packet to provider. 3. As documents are received, load into provider folder (online or paper file). 4. Start sending reminders for items still pending. 5. Review forms for signatures/initials in blue ink and printed single sided.	• Wrong billing packet completed.	• Delay in processing the billing packet.	• Review instruction sheet for required signatures and initials for each page in blue ink. • Verify with hiring official and provider enrollment in blue ink.

	6. Contact provider for corrections or missing information. 7. Send the completed hard copy with attachments to the appropriate provider enrollment coordinator via interoffice mail or courier. 8. If contacted by the appropriate provider enrollment coordinator for edits, return to provider for corrections.			
9. End of committee process (provider credentialed and should be enrolled)	1. Distribute provider ID to the provider, clinic (if appropriate), and coder/contact. 2. Distribute to provider governing body approval letter (cc other as appropriate). 3. Distribute to provider managed care approval letter (cc other as appropriate). 4. Load to online or paper file.			
To be reviewed September 2017 and March 2018				