



# Provider Newsletter

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### Suggestions?



Contact us at 317.237.5770 or visit our [website](#)



Submit Articles or Announcements!!



Health Plans



## IU Health Plan Services & InteCare, Inc. Partnership

We are pleased to announce that InteCare is partnering with Indiana University Health Plan Services, LLC ("IU Health Plan") to provide IU Health with a statewide behavioral health/addictions provider network! InteCare will serve as IU Health's delegated behavioral health credentialing and contracting entity. This network will service the Indiana University Health Plan Commercial Insurance, Medicare Advantage and State of Indiana Exchange Products.

InteCare is excited and honored to be working with this highly respected Hoosier Health Plan, and look forward to a positive and long lasting partnership.

If you have any questions about the credentialing or contracting process, please feel free to call us toll free at 1-844-542-1705 or if local at 317-472-7825.

# Welcome!

## Introducing Our New SSVF Team Member



If your organization would like to submit articles or announcements for the InteCare Provider Newsletter please send your articles to:

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Psy.D., CEO

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46250

InteCare is pleased to introduce our newest member of the Supportive Services for Veteran Families team, Annalyn Bergin. Annalyn serves as the SSVF Program Assistant for the InteCare SSVF program and recently located to Indianapolis after living in Germany and California. She was born in the Philippines and raised in Guam. She is a three time Combat Veteran deploying to Uzbekistan, Kuwait and Iraq. She served 6 years in the US Army and is currently in the Indiana National Guard. She has a Masters in Emergency Management and has over 14 years' experience working with Veterans, families and service members in private, federal and nonprofit sectors. She is married to a US Army Veteran and enjoys traveling and traveled to over 9 countries last year. We are very proud to have her as a part of InteCare, so please join us in welcoming her to the team!

## InteCare's 2014 Provider Satisfaction Survey



Each year InteCare sends out a request to Providers to complete our annual satisfaction survey. The most recent survey was conducted in March 2015 and here are some of the results:

**Overall Satisfaction** - For 2014, 87% of Providers reported they are satisfied with InteCare. Our target was 85% and we have now exceeded our goal for 4 years in a row.

**Courtesy and Helpfulness of Staff** - this was the highest rated item on the survey with a score of 97.4%. Excellent customer service is what we strive for and we will continue to work towards 100%.

**Timeliness of the Credentialing Process** - this was the lowest rated item on our survey with a rating of 74.5%. As you may know Credentialing is a very detailed process that can often take up to 6 months to complete. To learn more about the process and the differences between insurers please see the accompanying article in this newsletter titled "How the Credentialing Process Works"

Although we only send out our survey once a year, we are always interested in your feedback. You can contact us anytime through our website or by clicking the suggestion box on the left of this newsletter.

## How the Credentialing Process Works



Who doesn't love a good sport's reference in an article? Since the NBA and NHL have recently ended and the MLB is in full swing, I feel it only appropriate to use baseball to analogize the credentialing process.

So let's play ball.

The important roles of the pitcher and catcher in baseball is a good illustration to describe the tedious workings of the credentialing process between the provider's office and insurance company.

### Credentialing Staff

**Pitchers-** Admin staff at provider's office

Gathers provider documents and sends it off to the catchers

**Catchers-** Admin staff at an insurance company

Accepts providers documents from the pitchers for processing

The "catchers" or insurance companies may "signal for another pitch" by going back to the "pitchers" for additional and/or missing items. If this happens, the already lengthy credentialing processing time (30 - 180 days from the time all the completed paperwork has been received) could create the dreaded "rain delay."

For example, Dr. Smith completed her application and submitted it to Insurance Company A on 12/10/2014. On

1/10/15, Insurance Company A contacts the provider with a request for a W9 and a copy of her liability insurance. Dr. Smith was so busy she didn't notice that Insurance Company A asked for these two items on the application. Dr. Smith gathers these documents, but doesn't fax them to Insurance Company A until 2/10/15. February 10, 2015 is when the clock starts ticking and Insurance Company A could have Dr. Smith application finished anytime between March 10, 2015 to August 10, 2015 (180 days). So from 12/10/14 (when she began working) until potentially August 10, 2015 Dr. Smith is considered out-of-network with Insurance Company A, therefore claim's rejections are possible if Dr. Smith is seeing clients during those eight months.

The above example illustrates how important it is for the pitchers to send accurate and complete documentation to the catchers, as well as making sure the catchers are on top of their game by tenacious fielding of calls and emails, keeping up with the provider's credentialing status. Despite the pitchers tenacity, however, some of your behemoth insurance companies on average process near that 180 day mark.

I hope this article helps to explain the credentialing process and timelines. Submitting accurate paperwork timely and follow-ups are key. Many payors will give a provider three chances (strikes) to submit additional info if necessary. You do not want this to happen, if you strike out they will require you to start the process all over again. So get your paperwork in on time, don't strike out and once you are paneled it is a homerun!



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