



UnitedHealthcare Community Plan of Indiana

How to check the status of a Network Participation request

Please email OptumHealth Physical Health at netdevpubsec@optum.com or call 800-873-4575. You can also speak with your contractor. Be sure to have your NPI or TIN available.

How to Join OptumHealth Physical Health Provider Network

Thank you for your interest in joining the OptumHealth Physical Health Provider Network. OptumHealth Physical Health handles contracting, credentialing and enrollment for chiropractors, outpatient therapy providers (occupational, speech and physical therapy) or alternative medicine providers. If you work in this specialty area, the process to join our network begins with OptumHealth Physical Health. To start the network participation request process, follow the guidelines below.

New health care professionals/groups

- Go to the [OptumHealth Physical Health website](#) and on the right side of the page, click on “Interested in Becoming a Provider?” to complete a request for information for network participation
- Select one of the following options:
 - I am a health care provider and would like information about joining an OptumHealth Physical Health network
 - I am a new therapist joining an existing Optum contracted group
 - I am a health care provider and would like to become a Managed Physical Health Network Provider (The Empire Plan) ONLY
- Then complete the required fields and click Submit
- You can also call OptumHealth Physical Health at 800-873-4575

Existing contracted groups/facilities

You must send a Letter of Interest to OptumHealth Physical Health to add Medicaid (UnitedHealthcare Community Plan) to your contract.

- Email: netdevpubsec@optum.com
- Fax to 855-277-9173

The Letter of Intent must include the following:

- Group Name or Provider Name
- Tax ID Number



- NPI Number
- Place of Service Address
- Phone Number
- Fax Number
- Email Address

All health care professionals

You must also be enrolled with Indiana Health Coverage Programs (IHCP). If you haven't already done so, complete your <https://www.in.gov/medicaid/providers/provider-enrollment/> to become a provider with the IHCP.

Within 3 business days, you will be contacted via Adobe Sign with additional information and next steps:

- **New health care professionals/groups** – you'll receive a full OptumHealth network participation request packet with all documents required to join the network, including a contract
- **Existing contracted groups/facilities** – you'll receive only the documents needed to add a new therapist to an existing contract, or (if applicable) to add Medicaid (UnitedHealthcare Community Plan) to your contract

Credentialing

Credentialing is the process of reviewing the qualifications and appropriateness of a provider to join the health plan's network. Credentialing requirements and processes will follow all National Committee for Quality Assurance (NCQA) guidelines.

OptumHealth Physical Health utilizes CAQH to obtain primary source verification for credentialing. You can start the application process at [CAQH.org](https://www.caqh.org) – either by updating an existing application or creating one (if you don't have an existing application). Please ensure that all CAQH information is up to date and attested to before submitting a request for participation.

During the credentialing process, OptumHealth Physical Health will work with you to verify your qualifications, practice history, certifications and registration to practice in a health care field.

Credentialing is required for all alternative medicine practitioners, outpatient occupational, physical and speech therapy practitioners, and chiropractors to participate in the UnitedHealthcare Community Plan and Indiana Hoosier Care Connect network.

The following are required for a provider credentialing application to be considered complete:



- IHCP [practitioner enrollment form](#)
- Signed credentialing application attestation within 180 days
- Personal information and professional IDs
- Education and training
- Practice locations
- Professional liability insurance with limits
- Five-year work history, with explanation of gaps of 6 months or more
- Disclosure questionnaire, including any explanations for affirmative answers, if applicable

If there are any questions about your credentialing application, OptumHealth Physical Health will contact you via email to address them. If you have questions about the credentialing process, need assistance or to check status of a Network Participation request please email cred_ohcs@optum.com. You can also call OptumHealth Physical Health at 800-873-4575.

Contracting

Contracting/Negotiating is the process of the provider and managed care entity (MCE) formally executing an agreement that outlines reimbursement rates, scope of services, etc. for the provider to deliver medical services.

The OptumHealth Physical Health contracting process starts automatically when you submit a [requestion for information](#) for network participation.

Here's what you can expect:

- **New health care professionals/groups** – The OptumHealth Physical Health participation agreement (contract) is included in the full OptumHealth network participation request packet you receive via Adobe Sign.
- **Existing contracted groups/facilities** – you'll receive only the documents needed to add a new therapist to an existing contract, or (if applicable) to add Medicaid (UnitedHealthcare Community Plan) to your contract

You can review the contract, sign it and return to OptumHealth Physical Health via Adobe Sign.

Once OptumHealth Physical Health receives a signed agreement from you, we'll countersign the participation agreement and send you a copy, along with the date you can begin seeing Indiana Hoosier Care Connect members as a network provider (your effective date).



- If your credentialing application has not been completed and approved prior to returning a signed contract to OptumHealth Physical Health, you will not receive a countersigned contract until credentialing is complete.
- For more details on how your effective date is determined, please review the “Network participation effective date policy” found in the under UnitedHealthcare Community Plan of Indiana Network Effective Date Policy on the [OptumHealth Physical Health website](#).

The enrollment process starts automatically once your credentialing is complete and approved, and once we receive a signed contract from you. In this process, the fully executed contract and provider demographics information are loaded into the OptumHealth Physical Health claims system. You are also added to the provider directory.

If there are any questions, OptumHealth Physical Health will contact you within 5 business days.

Tips for Applying to the Network

Below are some tips to ensure a smooth application process and to avoid experiencing any delays in application, contracting or the credentialing process.

Category	Issue(s)	Requirement
CAQH	<ul style="list-style-type: none"> • Your CAQH profile status is incomplete or expired. • We do not have authorization to access your CAQH application. Log into the CAQH ProView Provider portal, go to the user account setting menu and review the Authorization section to update your preferences. Be sure to authorize UnitedHealthcare. • Information in your completed CAQH profile needs to be updated (Examples include practice information, credentialing contact information, license and professional liability insurance effective and expiration dates) 	The information on CAQH must match the information you provide on your application.
Attached Documents	<ul style="list-style-type: none"> • Attaching the wrong document • Not signing the W-9 form or providing an incorrect Tax ID number 	Providing all the correct and completed documents is required.



Document Return	<ul style="list-style-type: none">• Slow response time to requested information	Missing documents are signed and returned as quickly as possible.
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Questions

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