# **PROVIDER***Update*



CONTRACTUAL

**DECEMBER 17, 2018** 

**UPDATE 18-856** 

2 PAGES

## Timely Provider Demographic Data Validation Reminder

Accurate provider information allows for timely access to care

Outdated provider information can create barriers to timely access to care for members. Contracting providers must keep their office information current to ensure Health Net of California, Inc., Health Net Community Solutions, Inc. and Health Net Life Insurance Company (Health Net) members have access to accurate information for scheduling appointments and in selecting providers.

Providers are required to provide advance notification directly to Health Net or through their participating physician group (PPG) when they have changes to their demographic information. On a monthly basis, providers should validate that their demographic information is reflected correctly on the Health Net website at www.healthnet.com under ProviderSearch.

You may receive calls from Health Net or a regulator regarding the status of your contract as well as other demographic information. It is important that an administrator or member of your team who is familiar with the provider's contract details responds to these inquiries. Any request from Health Net or a regulator should be responded to in a timely manner.

#### **DEMOGRAPHIC INFORMATION**

Providers' demographic data include the following:

Name	License number	Email address – used for members and is Health Insurance Portability and Accountability Act (HIPAA) compliant		
Alternate name	National Provider Identifier	Practice website		
Address	Office hours	Hospital affiliation		
Telephone number	Patient age ranges (lowest to highest) seen by provider	Languages other than English spoken by the physician		
Fax number	Specialty	Languages other than English spoken by the office staff		

Panel status – Accepting new patients, accepting existing patients, available by referral only, available only through a hospital or facility, not accepting new patients

Handicap accessibility status for parking (P), exterior building (EB), interior building (IB), restroom (R), exam room (ER), and exam table/scale (T) – if accessibility is not yes to all, then indicate no

#### THIS UPDATE APPLIES TO CALIFORNIA PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

#### LINES OF BUSINESS:

- HMO/POS/HSP
- PPO
- FPO
- Medicare Advantage (HMO)
- Medi-Cal
  - Kern
  - Los Angeles
    - Molina

  - Sacramento
  - San Bernardino
  - San Diego
  - San Joaquin
  - Stanislaus
  - Tulare

#### PROVIDER SERVICES

provider services@healthnet.com

#### EnhancedCare PPO (IFP)

1-844-463-8188

provider.healthnetcalifornia.com

#### EnhancedCare PPO (SBG)

1-844-463-8188

provider.healthnet.com

Health Net Employer Group HMO, POS, HSP, PPO. & EPO

IFP - CommunityCare HMO, PPO, PureCare HSP,

1-800-641-7761

provider.healthnet.com

Pure Care One FPO 1-888-926-2164

#### provider.healthnetcalifornia.com

1-800-929-9224

Medicare (individual)

#### provider.healthnetcalifornia.com

Medicare (employer group)

1-800-929-9224 provider.healthnet.com

Medi-Cal - 1-800-675-6110

provider.healthnet.com

### PROVIDER COMMUNICATIONS

provider.communications@

healthnet com

fax 1-800-937-6086

#### **NOTIFICATION AND MAINTENANCE REQUIREMENTS**

Providers directly contracting with Health Net must notify Health Net of changes by completing the online form or by reaching out to their provider network administrator (PNA). The online form is available on the Health Net provider website at provider.healthnet.com under My Account > Profile > Update Provider Information. Providers must have the Update Provider Information privileges to update and submit changes online. An email, fax, or phone call may also be received from Health Net, or a third party on behalf of Health Net, to validate your demographics. This will occur once or twice a year, depending on the provider type, and response is required in most cases to avoid being removed from the directory.

As stated in the *Provider Participation Agreement (PPA)*, providers are required to provide a minimum of 30 days advance notice of any changes to their demographic information. If the change pertains to the status of accepting new patients, the provider must notify Health Net or the applicable PPG within five business days.

Providers contracting through a PPG must notify the PPG directly of changes, and the PPG notifies Health Net. PPGs must have policies in place that establish and implement processes to collect, maintain and submit their provider demographic changes to Health Net on a real-time basis. Real-time is within 30 days, as recently defined by the Centers for Medicare & Medicaid Services (CMS). Health Net conducts random audits of PPGs to validate processes and policies to ensure they are maintaining provider demographic information on a regular basis.

#### ADDITIONAL INFORMATION

If you have questions regarding the information contained in this update, contact the applicable Health Net Provider Services Center within 60 days at:

Line of Business	Telephone Number	Provider Portal Provider Portal	Email Address
ENHANCEDCARE PPO (IFP)	1-844-463-8188	provider.healthnetcalifornia.com	
ENHANCEDCARE PPO (SBG)	1-844-463-8188	provider.healthnet.com	
HEALTH NET EMPLOYER GROUP HMO, POS, HSP, PPO, & EPO	1-800-641-7761	provider.healthnet.com	
IFP (COMMUNITYCARE HMO, PPO, PURECARE HSP, PURECARE ONE EPO)	1-888-926-2164	provider.healthnetcalifornia.com	provider_services@healthnet.com
MEDICARE (INDIVIDUAL)	1-800-929-9224	provider.healthnetcalifornia.com	
MEDICARE (EMPLOYER GROUP)	1-800-929-9224	provider.healthnet.com	
MEDI-CAL	1-800-675-6110	provider.healthnet.com	N/A