PROVIDER*Update*





REGULATORY

JUNE 20, 2019

| UPDATE 19-459

3 PAGES

Newly Contracting Medi-Cal Providers: Take Training and Sign Attestation Form

Newly contracting Medi-Cal providers must complete required Medi-Cal training, and sign and return the training attestation form as part of the contracting and credentialing process

Participating physician groups (PPGs) delegated to perform credentialing on behalf of Health Net* and CalViva Health must make sure that newly contracting Medi-Cal providers complete the three steps below. In addition, ancillary providers and physicians who are newly contracting for Medi-Cal must also perform the following steps:

- 1 Complete required provider training.
- 2 Sign the training attestation form.
- 3 Return the signed form as part of the contracting and credentialing package to the health plan before the newly contracting provider can be activated in the health plan's system of record with an active status date.

A newly contracting provider is a provider who has:

- A Fulfilled all credentialing and contracting requirements to be entered into the health plan's contract systems with an active status date.
- B Ended their relationship with the health plan at least 30 calendar days prior to establishing a new contractual relationship and new active status date.

Medi-Cal providers who are changing or adding PPG affiliations or who are making demographic or specialty changes are not considered newly contracting providers.

Sign training attestation form

The training attestation form is a required part of the provider contracting and credentialing process. It is now a line item on the packet's credentialing checklist. The newly contracting Medi-Cal provider who completed the trainings must sign the form. Staff members cannot sign the form on behalf of a provider, and providers cannot waive required trainings. A copy of the training attestation form is attached for reference.

Get training materials and forms online

Providers can access educational training materials and the training attestation form online on the provider website at provider.healthnet.com under *Provider Support > New Provider Onboarding Packets > CalViva Health Medi-Cal New Provider Resources*.

THIS UPDATE APPLIES TO MEDI-CAL PROVIDERS:

- Physicians
- Participating Physician GroupsHospitals
- Ancillary Providers

PROVIDER SERVICES 1-888-893-1569 www.healthnet.com

In-person training

In-person training is available. Providers who would prefer in-person training may contact Provider Relations by email at hn provider relations@healthnet.com to request a training session.

Additional information

Providers are encouraged to access the provider portal online at provider.healthnet.com for real-time information, including eligibility verification, claims status, prior authorization status, plan summaries, and more.

If you have questions regarding the information contained in this update, contact CalViva Health at 1-888-893-1569.





CERTIFICATE OF NEW PROVIDER TRAINING

I have received, reviewed and completed the New Provider Training from Health Net,* on behalf of CalViva Health. I understand the essential components of CalViva Health's Medi-Cal plan, including basic information about public health programs available to CalViva Health Medi-Cal members, CalViva Health's quality improvement program, and interpreter services and provider tools to care for diverse populations.

In addition, I understand my responsibilities related to CalViva Health's Medi-Cal managed care program services, policies and procedures, and ways to communicate between providers, members and CalViva Health. I understand how to access and find information about Medi-Cal benefits and services, claims and payment policies, California Children's Services (CCS)-eligible conditions and referral processes, case management services, tools to care for a diverse population, and operations manuals, located on the provider website under *Working with Health Net > Contractual > Policy Library > Go to the Provider Library*.

The training was completed: (Must check one)	
Self-guided (Online/hard copy)	
Instructor-led (Online/in-person)	
Provider name (PRINT)	Tax identification number (TIN)
Provider signature	Date training completed
Telephone number	Email address

In order to complete the enrollment of your contract, sign, date and complete this certification, and submit with your contract documents. Note: Failure to complete this certification may result in a delay in becoming an active provider for CalViva Health and Health Net.