MVP FASTFAX News for West Region – Rochester/Buffalo Providers

Online Provider Demographic Information Review Request

The Centers for Medicare and Medicaid Services (CMS) regulation 42 CFR 422.111(b)(3) and (h)(2)(ii), 422.112, 423.128(d)(2) mandates all health plans require its participating provider network perform a guarterly review of its provider demographic information found in the plan's online directory. As a participant with MVP, we are requesting that you review the listed information and ensure it is accurate and up-to-date. Incorrect information can affect the accuracy and availability of provider payments and may also affect the accuracy of member information available on the portal. MVP must be notified of any demographic change requests. Failure to correct demographic information constitutes a breach of your obligations under your participating provider agreement.

Please follow these steps and complete this review no later than July 31, 2018.

Step 1 – Visit <u>myphealthcare.com</u> and select *Members*, and then *Find a Doctor* and then search by *Find a* Doctor.

Step 2 – On the provider search tool, click on Guest and choose one of the products the provider(s) in your practice participate with. Search for the provider(s) in your practice and review the following demographic information for accuracy:

- Ability to accept new patients;
- Street address or missing addresses; •
- Phone number; and •
- Other changes that affect availability to patients. (e.g. handicap accessible, specialty changes) .

Step 3 – If demographic information is incorrect, please access the New Online Provider Change of Information form and submit the correct information to MVP (This form can be found at www.mvphealthcare.com/provider/forms, select Provider Demographic Change Forms and then select Provider Change of Information Form (Submit Online). Delegated providers, please contact your delegate administrator to update your demographic information.

Step 4 – If the update applies to multiple providers in the group, choose contracted group on the form and attach a roster of all providers the change applies to, including the provider's name and NPI.

Step 5 - Once the form is complete click submit, a reference number will be generated, please keep this for your records and use when requesting status of your change.

Step 6 – Log in to CAQH and make any demographic updates to your CAQH profile so it matches the information you are submitting to MVP and re-attest your CAQH.

Questions? Please contact the Customer Care Center for Provider Services. Representatives are available weekdays from 8:30 a.m. - 5:00 p.m. Eastern Time at 1-800-684-9286.

