



ABA Provider Training

May 26, 2015



Health Plan of Nevada Medicaid Overview

- Contracted with the Division of Health Care Financing & Policy (DHCFP) since the inception of Medicaid Managed Care in April 1997
- Service areas: Clark & Washoe Counties
- Current membership is approximately 227,000
- Plans:
 - Southern Nevada SmartChoice and Nevada Check Up
 - Northern Nevada Northern Choice and Nevada Check Up



Steps To Becoming a Provider

Provider Questionnaire Form

> Successfully Complete the Credentialing Process

Execute Provider Contract



Provider Questionnaire Form

- Complete the Provider Questionnaire Form and provide a copy of your current W-9 Form.
- Return Provider Questionnaire Form and W-9 Form to:

Health Plan of Nevada Network Management/Provider Relations, Mail Stop 2720-3 P.O. Box 15645 Las Vegas, NV 89114-5645

Or by Fax to **702-266-8809**



Credentialing

- Complete the required credentialing application along with the requested documentation.
- Return credentialing application and supporting documentation to:

Health Plan of Nevada Network Management/Provider Relations, Mail Stop 2720-3 P.O. Box 15645 Las Vegas, NV 89114-5645

Or by Fax to **702-266-8809**

 The credentialing process will take a minimum of 60 days once the completed application and all necessary documents are returned to the Credentialing department.



Provider Contract

- Upon successful completion of the credentialing process, a contract will be forwarded for review and execution.
- Signed contracts should be returned to:

Health Plan of Nevada Network Management/Provider Relations, Mail Stop 2720-3 P.O. Box 15645 Las Vegas, NV 89114-5645

 A fully executed copy of the Agreement will be returned to you for your files along with a listing of your network participation and a corresponding effective date. Please note, the effective date will be determined by HPN.



Welcome!

- Once the contract is fully executed, Providers are assigned a Provider Advocate for assistance in the onboarding process.
- Provider Advocates will assist providers with the following:
 - Referral Requirements
 - @YourService account access
 - General Questions regarding your contract and Health Plan policies.



How To Reach Us

Provider Relations Department

Telephone #: 702-242-7088 or 1-800-745-7065

Hours of Operation:

Monday through Friday 8:00 a.m. to 5:00 p.m. PST.



Questions?



Thank you for your interest!

