

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 quarterly 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 April 30, 2020.

Step 1 – Visit **mvphealthcare.com** and select *Members*, 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 changes, missing addresses, and phone number changes; and
- Other changes that affect availability to patients. (e.g. handicap accessible, specialty changes)

Step 3 – If demographic information is incorrect, please access the Online Provider Change of Information form at **mvphealthcare.com/demographics** and submit the correct information to MVP. Delegated providers should contact their delegate administrator to update their 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 – A reference number will be provided to you once the form is submitted. Please keep this for your records and use it when requesting the 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.

Note – this only applies to credentialed physicians. Registered Mid-Level Providers and Hospitalist Physicians based solely in the hospital will not be listed in the online directory. These providers can disregard this notice

Demographic Data Reminder

As outlined on pg. 54-55 of MVPs **Provider Resource Manual** under Provider Responsibilities, it is required that Providers maintain their demographic information with MVP. Per MVP contracts providers must notify MVP of any demographic changes. Failure to notify MVP in a timely manner may result in claims denials. Providers must also notify MVP 60 days prior to terminating their contract without cause. Providers should review their contracts as some may require more than 60 days notification. Updating provider demographic information with MVP is easy, just go to **mvphealthcare.com/demographics** and submit the online form.

To receive future FastFax messages by email, send a request to **MVPFastFax@mvphealthcare.com**.

To view all faxed messages, visit mvphealthcare.com/FastFax.

Questions? Contact your MVP Professional Relations Representative or call the MVP Customer Care Center for Provider Services at **1-800-684-9286**.

