Provisional Credentialing of New York State Physicians

State of New York

MVP shall complete review of the health care professional's application to participate in the in-network portion of MVP's network and shall, within 60 days of receiving a Completed Application* and all required documentation to participate in the MVP's network, notify the health care professional as to:

1. Whether s/he is credentialed; or
2. Whether additional time is necessary to make a determination because of a failure of a third party to provide necessary documentation, or if additional information is necessary, the notice to the health care professional must identify all additional information needed by the plan to make its determination. In such instance where additional time is required because of a lack of necessary documentation, the plan shall make every effort to obtain such information as soon as possible and shall make a final determination within 21 days of receiving the necessary documentation.

Note: For applicants that are (1) newly licensed health care professionals or (2) a health care professional who has recently relocated to New York from another state and has not previously practiced in New York; and who are joining a participating group in which all members of the group currently participate with MVP, the applicant shall be eligible for provisional credentialing as of the 61st day of the application if:

- The applicant has submitted a Completed Application and any requested supporting documentation; and
- The applicant provided written notification to the MVP Director of Credentialing, including a statement that in the event the applicant is denied, the applicant or the applicant's group practice:
  1. Shall refund any payments made for in network services provided during the period of provisional credentialing that exceed out-of-network benefits under the insured’s contract with MVP; and
  2. Shall not pursue reimbursement from the insured, except to collect the copayment or coinsurance that otherwise would have been payable had the insured received services from a participating MVP practitioner.

Completed Application* for Credential and Recredential includes: a complete and accurate CAQH application, re-attested to within the last 90 days, plus all supporting documentation including, but not limited to malpractice insurance certificate, continuity of care arrangements that meet MVP criteria for specialty, explanation of any affirmative responses including malpractice suits, an explanation of any work history gaps of over six months, a re-entry plan for all gaps over one year, and MVP’s receipt of all verifications from third party sources. The practitioner is obliged to provide MVP with information sufficiently detailed to render an opinion regarding any affirmative response.

(04/2019)