

Umpqua Health Network Participation Enrollment Process

Contracting Process and Timeline

Inquiry received from Provider/Facility

0-2 Business Days Contract Specialist sends Questionnaire to Provider/Facility

Clock Starts Provider/Facility returns Questionnaire & supporting documents

1 Week – 2 Months Questionnaire is reviewed for a decision by UH Leadership

1 Week Provider/Facility is notified of decision in writing

Varies by contract terms Contract is drafted and sent to Provider/Facility for signature

Credentialing Process and Timeline

1-2 business days Credentialing and information packet sent to provider

Clock Starts Provider/Facility returns completed credentialing packet

Up to 2 months UHN Credentialing Committee reviews packet and makes determination

-2 business days Provider/Facility notified of outcome

4-6 weeks Provider info uploaded into UHA systems

Contact Info

Credentialing Specialist

- Credentialing@UmpquaHealth.com
- Office: (541) 229-7067
- Confidential Fax: (541) 229-4782
- Contract Specialist
 - UHContracting@UmpquaHealth.com
 - Office: (541) 957-3094
 - Fax: (541) 440-6306
- Provider Network
 - UHNProviderServices@UmpquaHealth.com
 - Office: (541) 229-7077
 - Confidential Fax: (541) 229-4782

UHN Contracting & Credentialing Contacts:

Provider Contracting FAQ's	
Who are we?	Umpqua Health Alliance (UHA) is one of 16 coordinated care organizations (CCO) contracted with the Oregon Health Authority (OHA) to coordinate the physical, behavioral, and dental health care services of Medicaid or Oregon Health Plan (OHP) members in a designated service area. UHA services the membership population within Douglas County, Oregon.
What is Umpqua Health Network (UHN)?	UHN is the entity that contracts and credentials the network of providers who see the UHA members, including ancillary providers (i.e., durable medical equipment), hospitals, and facilities, such as home health, skilled nursing facilities, hospice, and laboratories. The UHN Agreement currently encompasses UHA (OHP), and Atrio Medicare Advantage Plans.
Who can become a contracted provider with UHN?	While anyone who provides services covered by UHN may apply to be a contracted provider, applying does not guarantee that a contract will be awarded.
What goes in to deciding if I'm awarded a contract or not?	UHA takes a multi-faceted approach when determining network adequacy. Most importantly being patient need.
What is the first step?	PROVIDERS: To begin the process of joining our panel of providers, please email UHNProviderServices@UmpquaHealth.com to request the Provider Request Questionnaire. Individual providers will return the Questionnaire along with a copy of their Oregon practitioner license, resume/CV, and any board certifications, if applicable. FACILITIES: Please email UHNProvicerServices@UmpquaHealth.com and request a Facility Request Questionnaire. Please return a copy of the
What may cause a delay?	state business license along with the completed Questionnaire. Depending on the provider type and services offered, additional information may be needed. Untimely responses to requested information can extend review and/or decision timelines as negotiations need to be reviewed by Leadership.
How long does the approval/denial process take?	Once all necessary information/documentation is received by UHN, the following is an expected process turnaround timeline: • Established Group: Up to 2 weeks • New Group: Up to 2 months
What's Next?	For newly approved groups, the Contract Specialist will begin to generate the contract. Please note that if additional contract negotiations are needed, any changes will need to be approved by Leadership and will require extra time. The Contract Specialist will email a Provider Network Agreement for signature. Once the signed agreement is received, it will be countersigned by UHN and a fully executed copy sent to the grou designated contact.

For new groups, once the Agreement is finalized, the Credentialing Specialist will reach out to initiate the credentialing process.

Provider Credentialing FAQ's	
What is Credentialing?	A process that health plans are required to do to verify information such as licensure, education, hospital privileges, malpractice coverage, certifications, etc.
Do I need to be Credentialed?	UHN is the entity that contracts and credentials the network of providers who see the UHA members, including ancillary providers (i.e., durable medical equipment), hospitals, and facilities, such as home health, skilled nursing facilities, and hospice. To determine whether you need to be credentialed, you may email <a href="https://doi.org/library/</th></tr><tr><th>How long does the
Credentialing process
take?</th><th>Once all requested documentation is received, UHN has 180 days to complete the credentialing process per National Committee for Quality Assurance (NCQA) Guidelines.</th></tr><tr><th>What barriers may present Credentialing issues?</th><th>The biggest obstacle to completing a credentialing for a provider is not being able to validate information provided on the Oregon Practitioner Credentialing Application (OPCA) (i.e., work history or peer references). Please make sure all information is up to date (including contact phone numbers, email address) and that no sections are left blank.</th></tr><tr><th>Is a site survey required?</th><th>At times. Please contact <u>UHNProviderServices@UmpquaHealth.com</u> to see if a site survey is needed.</th></tr><tr><th>When can I start seeing members?</th><th>You may start seeing patients immediately, however, payment for services provided prior to the completion of our credentialing and contracting process may require an approved prior authorization.</th></tr><tr><th>How do I check the status of my application?</th><th>If it has been longer than 180 days since all necessary documentation was sent, please contact the Credentialing Specialist at (541) 229-7067 or email Credentialing@UmpquaHealth.com
What's next?	Upon approval, a credentialing approval letter will be sent to the provider/group. The Credentialing Specialist will then generate a Provider Information Form (PIF). Once the PIF is returned, please allow 4-6 weeks for internal processing including claims system set-up.
What do I need to do if I am currently credentialed and add/change locations?	Please notify UHN Provider Services at <u>UHNProviderServices@UmpquaHealth.com</u> or fax notice of change to (541) 229-4782 and we will provide you with next steps based on the circumstances.