

OHCA Screening vs. CE Credentialing

The Oklahoma Health Care Authority's (OHCA) provider enrollment process includes basic screening as required by federal regulation. OHCA does not conduct full credentialing.

What is screening (i.e., provider enrollment)?

Federal regulations require states to screen, enroll and periodically evaluate all network providers in accordance with 42 CFR Part 455, Subparts B and E. Screening is an element of provider enrollment that results in a provider agreement (contract) between the state and a provider.

What is the purpose of screening?

Screening determines whether an individual is eligible to participate in the Medicaid program and ensures a provider has not been previously excluded from participating in any federal program by Medicare, HHS OIG or another state's Medicaid program.

What does screening cover?

Screening includes, but is not limited to:

- Federal database checks (42 CFR § 455.436).
- Verifications, as required, based on the identified screening level of the provider – this may include fingerprinting and/or site visits (42 CFR § 455.450).
- Collection and verification of Oklahoma-specific documents.
- Collection of applicable application fees (42 CFR § 455.460).

What provider specialties are required to complete OHCA screening?

All providers are required to complete OHCA screening processes. Screening is complete when OHCA assigns a provider ID for billing purposes.

Who do I contact if I have questions about OHCA enrollment processes?

- Email: ProviderEnrollment@okhca.org
- Phone: 800-522-0114, option 5

SoonerSelect contracted entities (CEs) conduct full credentialing in accordance with National Committee for Quality Assurance (NCQA) standards.

What is credentialing?

Federal regulations require CEs to implement written policies and procedures for selecting and retaining network providers that meet the minimum requirements. SoonerSelect CEs must also meet the credentialing requirements outlined by NCQA.

What is the purpose of credentialing?

Credentialing determines if the provider is qualified to perform or deliver services in accordance with NCQA standards.

What does credentialing cover?

Credentialing covers, but is not limited to, the verification of licensure, medical education, hospital affiliations and privileges, work history, liability record, practice history and disclosures.

What provider specialties are required to complete CE credentialing?

All providers who wish to render services to members enrolled in a SoonerSelect plan are required to complete credentialing, except for the provider specialties outlined on the following lists:

- Aetna: <https://bit.ly/4qeFdZw>
- Humana: <https://tinyurl.com/excluded-provider-list>
- Oklahoma Complete Health: <https://shorturl.at/wkPwQ>

Important: Exempt providers must still be contracted and provide updated rosters to each SoonerSelect plan with which they wish to be in-network.

Who do I contact if I have questions about CE credentialing processes?

- Aetna: ABHOKProviderEngagement@aetna.com
- Humana: OKMedicaidProviderRelations@humana.com
- Oklahoma Complete Health: Oklahomacompletehealthpr@Oklahomacompletehealth.com

Note: Providers are required to complete SoonerSelect CE contracting and SoonerSelect CE credentialing. SoonerSelect CE contracting is when the provider and the CE agree on contract language, payment terms and effective date. Providers are encouraged to initiate SoonerSelect CE contracting and SoonerSelect CE credentialing simultaneously. For more information on SoonerSelect CE contracting, please refer to each SoonerSelect CE's Credentialing Resource Guide:

- Aetna: <https://bit.ly/47kPtqT>
- Humana: <https://tinyurl.com/Cred-Resource-Guide>
- Oklahoma Complete Health: <https://shorturl.at/ySS3J>

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