



## Summary of Colorado Provider Credentialing Policy

This summary explains the process used for providers who apply to join the Optum network serving the Colorado members. Optum processes every Colorado network application according to Colorado state law and Optum credentialing standards outlined in the UBH Credentialing Plan: [UBH Cred Plan](#).

- Optum does not retroactively terminate participating network clinicians/ facilities in Colorado.
- Optum accepts the Colorado (CO) Health Care Professional Credential Application (CO Revised Statutes Sect. 25-1-108.7.) which is on the CAQH application database.
- State Medicaid Agency is verified at credentialing and recredentialing.

### **Timely Credentialing of Physicians** (in accordance with [Colorado Revised Statutes 10-16- 705.7](#))

- Within 7 calendar days after a carrier receives an application, the carrier is required to provide a receipt to the physician applicant in written or electronic form.
- Upon receiving an application, a carrier shall promptly determine whether the application is complete. If the carrier determines that the application is incomplete, the carrier shall notify the physician applicant in writing or by electronic means within 10 calendar days. The notice must describe the items that are required to complete the application.
- If a carrier receives a completed application but fails to provide the physician applicant a written or electronic receipt as required (above) the carrier is required to consider the physician applicant a participating physician effective no later than 53 calendar days following the carrier's receipt of the application.
- The carrier is required to conclude the process of credentialing a physician applicant within 60 calendar days after receipt of the completed application.
- The carrier is required to provide each physician applicant written or electronic notice of the outcome of the physician applicant's credentialing within 10 calendar days after the conclusion of the credentialing process.
- After concluding the credentialing process for a physician applicant and making a determination regarding the physician applicant's credentialing application, the carrier shall provide, at the physician applicant's request, all non-proprietary information pertaining to the physician's application and to the final decision regarding the application as outlined in the UBH Credentialing Plan, Section 7.2 – Applicant Rights.
- A carrier may recredential a participating physician if such recredentialing is:
  - Required by federal or state law or by the carrier's accreditation standard; or
  - Permitted by the carrier's contract with the participating physician
  - A carrier shall not require a participating physician to submit an application or participate in a contracting process in order to be recredentialed.
- Except as described in subsection 8 of [Colorado Revised Statutes 10-16-705.7](#), and as may be provided in a contract between a carrier and a participating physician, a carrier shall allow a participating physician to remain credentialed and include the participating physician in the carrier's network unless the carrier discovers information indicating that the participating physician no longer satisfies the carrier's guidelines for participation, in which case, the carrier shall satisfy the requirements described in section 10-16-705(5) before terminating the participating physician's network participation.

**Requirements Specific to Medicaid Providers Only:**

- Optum shall complete the credentialing and contracting processes or deny network admission within ninety (90) days for at least ninety percent (90%) of all Provider applications. The ninety (90) days begins upon the submission of a Provider's written request to contract with the Contractor.
- The contracting and credentialing measurement period ends on the actual date of a signed and fully executed contract or when Optum sends a formal document denying the provider admission to the network. The practice of contract back-dating does not constitute compliance to this process for the purpose of reporting or meeting the measurement period standards.
- The measurement period shall be tolled in the event Optum and the Provider are in active contract negotiations, and Optum has sent written notice to the Provider that the Provider's credentialing application has been approved.
- Optum shall deny the application from the contracting process if a Provider's application is not complete within eighty (80) days. Optum shall notify the Provider if the application is not complete prior to denial of the application.
- Optum shall respond to all Provider inquiries related to their credentialing and contracting within two business days.