

# PROVIDER Update



Health Net®

CONTRACTUAL | JUNE 22, 2017 | UPDATE 17-542 | 1 PAGE

## Timely Provider Demographic Data Validation Reminder

Outdated provider information can create barriers to timely access to care for members. Contracting providers must keep their office information current to ensure Health Net of Arizona, Inc. and Health Net Life Insurance Company (Health Net) members have access to accurate information for scheduling appointments and in selecting providers.

Providers are required to provide advance notification directly to Health Net or through their medical groups or independent practice associations (IPAs) when they have changes to their demographic information. On a monthly basis, providers are required to validate that their demographic information is reflected correctly on the Health Net website at [www.healthnet.com](http://www.healthnet.com) under ProviderSearch.

### DEMOGRAPHIC INFORMATION

Providers' demographic data include the following:

- name
- address
- telephone number
- fax number
- office hours
- languages other than English spoken by the physician
- accepting or not accepting new patients status
- handicap accessibility status for parking (P), exterior building (EB), interior building (IB), restroom (R), exam room (ER), and exam table/scale (T) – if accessibility is not yes to all, then indicate no

### NOTIFICATION AND MAINTENANCE REQUIREMENTS

Providers directly contracting with Health Net must notify Health Net of changes by completing the online form or by reaching out to their provider network administrator (PNA). The online form is available on the Health Net provider website at [provider.healthnet.com](http://provider.healthnet.com) under *My Account > Profile > Update Provider Information*. Providers must have the *Update Provider Information* privileges to update and submit changes online.

Providers contracting through a medical group or IPA must notify the medical group or IPA directly of changes, and the medical group or IPA notifies Health Net. Medical groups and IPAs must have policies in place that establish and implement processes to collect, maintain and submit their provider demographic changes to Health Net on a real-time basis. Real-time is within 30 days, as recently defined by the Centers for Medicare & Medicaid Services (CMS). Health Net conducts random audits of medical groups and IPAs to validate processes and policies to ensure they are maintaining provider demographic information on a regular basis.

THIS UPDATE APPLIES TO ARIZONA PROVIDERS:

- Physicians
- Medical Groups/IPAs
- Hospitals
- Ancillary Providers

LINES OF BUSINESS:

- HMO
- PPO
- CommunityCare HMO
- Centene Corporation Employee Self-Insured PPO Plan
- Medicare Advantage (HMO)
- Ambetter from Health Net (Health Insurance Marketplace)

PROVIDER SERVICES

[az\\_internetproviderinquiries@healthnet.com](mailto:az_internetproviderinquiries@healthnet.com)  
HMO, PPO, POS, Medicare Advantage – 1-800-289-2818  
Ambetter from Health Net (Health Insurance Marketplace) – 1-888-926-1870  
[www.healthnet.com](http://www.healthnet.com)

NATIONAL PROVIDER COMMUNICATIONS

[provider.communications@healthnet.com](mailto:provider.communications@healthnet.com)  
fax 1-800-937-6086

# PROVIDER Update

PLEASE READ, CIRCULATE AND FILE



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