

HCAS PLAN SPECIFIC CONTACT INFORMATION

Please review the HCAS Website www.HCASMA.org for the most up to date and relevant information, resources, and contact information			
Health Plan	Join The Network	Submit Provider Enrollment Request	Credentialing
Blue Cross Blue Shield of MA	Become a Blue Cross Provider	Fax: 617-246-4227 Email: NetworkManagement@bcbsma.com	Credentialing application questions should be directed to CAQH at 888-599-1771
Fallon Health	Fallon Letter if Intent (LOI)	Fax: 508-368-9902 Email: providerdataupdate@fallonhealth.org	Credentialing application questions should be directed to CAQH at 888-599-1771
Point32Health: Harvard Pilgrim Health Care	Join the network Point32Health LOI submit via Email	Fax: 617-972-9591 Email: PPC@point32health.org	Credentialing questions can be submitted to the same contacts for Provider Enrollment
Point32Health: Tufts Health Plan	Join the network Point32Health Application submit via Email	Fax: 617-972-9591 Email: Provider_Information_Dept@point32health.org	Credentialing questions can be submitted to the same contacts for Provider Enrollment
Mass General Brigham Health Plan	Join our network Mass General Brigham Health Plan Application submit via Intake Form	Fax: 617-52-1982 Email: HealthPlanPEC@mgb.org	Credentialing questions can be submitted to the same contacts for Provider Enrollment
WellSense Health Plan	MA: Join Our Network Providers - Massachusetts WellSense Health Plan Application submit via Email	Fax: 617-897-0818 Email: providerprocessingcenter@wellsense.org	Credentialing application questions should be directed to CAQH at 888-599-1771
Health New England	Become a Provider Health New England PContracting@HNE.com	Fax: 413-233-3175 Email: providerprocessingcenter@wellsense.org	Credentialing questions can be submitted to the same contacts for Provider Enrollment



MASSACHUSETTS MEDICAID REMINDER: NON-BILLING

The 21st Century Cures Act requires that all Medicaid managed care network providers (not just those billing fee-for-service), be enrolled with the state Medicaid agency. These regulations require states to screen & enroll all Medicaid providers, including managed care network providers, to strengthen program integrity

- All providers who wish to participate in any health plan's Medicaid Network must also be "known" to MassHealth & receive their provider ID inclusive of their practice Provider ID/Service Location (PIDSL).
- This applies to Mass Medicaid ACO, MCO, & Duals Products
- Providers do not have to participate with MassHealth directly
- Providers who wish to enroll as "non-billing" providers to participate in a health plan's network should fill out the "MCE Non-Billing Network Only" Contract with Mass Health:
 - **Individuals:** <https://www.mass.gov/doc/nonbilling-orp-provider-contract-and-application-3/download>
 - **Entities:** <https://www.mass.gov/doc/masshealth-nonbilling-managed-care-entity-mce-network-only-provider-contract-3/download>

An internet search of "Mass Health Non-Billing" will pull up the resources

MAMSS: PROVIDER ENROLLMENT PANEL DISCUSSION

MAMSS 43rd Annual Spring Conference

May 7th 2026



PANELISTS

Sandy Dussault, Credentialing Manager: Fallon Health

Deb Draheim, CPCS Senior Credentialing Manager/Compliance
Consultant : Blue Cross & Blue Sheild of MA



Next stop: Medical Staff Office!

UNDERSTANDING THE DIFFERENCES BETWEEN CONTRACTING, PROVIDER ENROLLMENT & CREDENTIALING

Contracting

Establishes the legal & financial relationship between the provider & the health plan Practices can be contracted either via direct agreements, or PHO affiliations

Provider Enrollment

The process by which a provider is set up & maintained in a health plan's systems for claims & provider directory. Inclusive of adds, terms, & changes of provider profiles

Credentialing

Credentialing verifies a provider's education, licenses, certifications, & professional background



HELPFUL HINTS

Submission Method: Please always submit requests via Email (preferred) or Fax. **Please do not mail applications** & requests to Health Plans unless prior agreement is made.

Incomplete Applications & Attestations

CAQH: Incomplete applications and CAQH Profiles frequently cause delays:

- **Personal Email Missing:** Please ensure the CAQH Profile always has the practitioner's personal email
- **Malpractice Insurance:** this is the most common reason for delay. Please ensure Malpractice information is active & loaded to CAQH!
- **Completion of Training:** : If a practitioner has recently completed training, remember that health plans need the official notice of completion before credentialing can be completed.
- **Attestation:** Must have active attestations in CAQH **Hospital Privileges or Admitting Arrangements:** Ensure all hospital privileges are listed & all letters are uploaded. If you do not have hospital privileges, please make sure you indicate your admitting arrangement in CAQH.

Inaccurate Submissions": Please ensure all information on the HCAS or equivalent submission method are clear & filled out. Please ensure the initial submission clearly indicates the role of the provider (PCP, Covering PCP, SPC, Hospital Based

Contracting vs. Enrollment Vs. Credentialing: Not all practitioners require credentialing. Nearly all practitioners require provider enrollment. Please ensure the practice that you are submitting on behalf of is actively contracted with the plan prior to submission. Health plans cannot credential or enroll practitioners to non-participating practices

HELPFUL HINTS



Inquiry Submission Best Practices:

- Always include Practitioner Name, Practitioner NPI, the Billing NPI, & TIN for all status inquiries. **FYI:** *If a practitioner is actively credentialed due to their affiliation to a different billing entity – no additional credentialing is required, however, contracting & provider enrollment activities might be required.*
- To ensure requests are routed correctly, ask for your **enrollment & credentialing** status when asking a health plan for status, and please include the TIN

Contract Affiliation Switches: If a practice is contracted via a PHO agreement & switches PHO affiliations, clear communication from that practice advising on the dates of the PHO termination & the new PHO affiliation should be submitted & coordinated with the PHOs to ensure no disruption for patients or providers. These changes typically do not impact credentialing, unless moving from delegated to non-delegated agreements. Please label these as **Contracting Inquiries**

INQUIRY SUBMISSION TEMPLATE EXAMPLE

Details	Example
Inquiry	Subject: Provider Enrollment & Credentialing Status Request (NPI 1055555555) Body: Could you please advise on the status of credentialing & enrollment activities for the provider Dr. Quality Smith and indicate the effective date that the provider is set up in your system under this TIN? Please indicate if additional information is needed.
Practitioner Name	Dr. Quality Smith
Practitioner NPI	1055555555
Practice Name	Quality Smith LLC
Practice Billing NPI	1255555555
Practice TIN/EIN	55-5555555
Original Submission Date	05/01/2026

