Provider Directory Data Explanation and Source Information

Physician Information

1. Name

- Source: This data is collected during the provider's credentialing and re-credentialing processes.
- Frequency of validation: At initial credentialing, and every 36 months upon re-credentialing.
- Limitations: This data is self-reported by the provider, and if there is a change the provider would have to provide the information to the Plan.

2. Gender

- Source: This data is collected during the providers credentialing and re-credentialing processes.
- Frequency of validation: At the time of initial credentialing and every 36 months upon re-credentialing.
- Limitations: This data is self-reported by the provider, and if there is a change the provider would have to provide the information to the Plan.

3. Specialty

- Explanation: An area of focused medicine in which a provider has attained education and training beyond a general medical doctor license.
- Source: This data is collected during the provider's credentialing and re-credentialing processes.
- Frequency of validation: At initial credentialing, and every 36 months upon re-credentialing.
- Limitations: If this data requires change, the provider would have to provide the information to the Plan for validation.

4. Hospital Affiliations

- Explanation: Facility where the provider has admitting privileges.
- Source: This data is collected during the provider's credentialing and re-credentialing processes.
- Frequency of validation: At initial credentialing, and every 36 months upon re-credentialing
- Limitations: If this data requires change, the provider would have to provide the information to the Plan.

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5. Medical Group Affiliations

- Explanation: Practices where the provider renders care and group he (she) associates with.
- Source: This data is collected during the provider's credentialing process and Provider Relations Quarterly Provider Directory Verification Outreach.
- Frequency of validation: Quarterly
- Limitations: This data is self-reported by the provider, and if there is a change the provider would have to provide the information to the Plan.

6. Board Certification

- Explanation: A certification recognizing a provider has met the requirements of a nationally recognized medical/specialty board.
- Source: This data is collected during the provider's credentialing and re-credentialing processes.
- Frequency of validation: At initial credentialing, at expiration and every 36 months upon re-credentialing.
- Limitations: If this data requires change, the provider would have to provide the information to the Plan for validation.

7. Acceptance of New Patients

- Explanation: Whether or not a provider is accepting new patients in their practice.
- Source: This data is collected during the provider's credentialing process and Provider Relations Quarterly Provider Directory Verification Outreach.
- Frequency of validation: Quarterly
- Limitations: This data is self-reported by the provider, and if there is a change the provider would have to provide the information to the Plan.

8. Language Spoken by the Provider or Clinical Staff

- Explanation: Language spoken by the provider, or office staff.
- Source: This data is collected during the provider's credentialing process and Provider Relations Quarterly Provider Directory Verification Outreach.
- Frequency of validation: Quarterly
- Limitations: This data is self-reported by the provider, and if there is a change the provider would have to provide the information to the Plan.

9. Office Locations and phone numbers

- Explanation: Locations and phone numbers of the provider's practices.
- Source: This data is collected during the provider's credentialing and re-credentialing Processes and Provider Relations Quarterly Provider Directory Verification Outreach.
- Frequency of validation: At initial credentialing, and every 36 months upon re-credentialing and Quarterly Provider Directory Verification Outreach.
- Limitations: If data requires an additional change, the provider would have to provide the information to the Plan.

Hospital Information

1. Facility Name

- Source: This data is collected during the facility's data collection process.
- Frequency of validation: At initial credentialing, and every 36 months upon re-credentialing
- Limitations: If data requires change, the provider would have to provide the information to the Plan.

2. Location and phone number

- Source: This data is collected during the facility's data collection process.
- Frequency of validation: At initial credentialing, and every 36 months upon re-credentialing
- Limitations: If data requires change, the provider would have to provide the information to the Plan.

3. Accreditation

- Explanation: Certification that a facility has met the requirements of a nationally recognized accrediting body.
- Source: This data is collected during the facility's data collection process.
- Frequency of validation: At initial credentialing, at renewal, quarterly and every 36 months upon re-credentialing
- Limitations: If data requires change, the provider would have to provide the information to the Plan for validation.

4. Quality Data

- Explanation: Hospital quality data is collected and maintained by State and Federal Agencies.
- Source: The Centers for Medicare and Medicaid Services (CMS) publishes hospital quality data on its website:

  http://www.medicare.gov/hospitalcompare/search.html

- Frequency of validation: At initial credentialing, and every 36 months upon re-credentialing
- Limitations: None.