



Providers Applying for Network Participation

Professional health care providers can be reimbursed for claims at network allowable charges and member benefit options during the credentialing process, and the claims are paid directly to the provider. Blue Cross sets up qualifying providers for this reimbursement when they meet the following criteria:

- This provision does not apply for solo practitioners.
- Provider must be applying for network participation to join a provider group that already has an executed group agreement on file with Blue Cross for the same provider type.
For Example: A nurse practitioner (NP) applying for network participation must be joining a provider group that already has an executed allied health agreement on file with Blue Cross.
- NPs must submit a copy of the collaborating agreement with a physician. Collaborating physician must participate in the same networks as the NP.
- Physician assistants (PAs) must submit a copy of intent to practice agreement with a physician that participates in the same networks as the PA.
- If reimbursement during credentialing criteria is met, reimbursement during credentialing is backdated up to one month prior to the date of application receipt.

Expedited Processing

Expedited processing applies to a limited group of professional providers only. In most cases, this applies to practitioners with admitting privileges or admitting arrangements.

Louisiana law allows professional providers a 30-day expedited application processing. To be eligible for expedited processing, providers must meet the following criteria:

- Providers who are:
 - Already credentialed with Blue Cross and are joining a new group, or
 - Are not yet credentialed but are joining a provider group that already has an executed group agreement on file with Blue Cross for the same provider type.
For Example: An NP applying for network participation must be joining a provider group that already has an executed allied health agreement on file with Blue Cross.
- Provider must have admitting privileges to a network hospital or an approved exception. The following specialties are viewed as an exception: hospital based anesthesiology, hospital based pathology, hospital based radiology, podiatric medicine, dermatology, allergy and immunology, psychiatry, addiction psychiatry, sleep medicine, physical medicine and rehabilitation (physiatry), medical genetics and radiology providers that “read films” only on patients that are directed to a diagnostic facility by another provider, all pediatric subspecialties for the above specialties, physical therapy, occupational therapy and speech language pathology. Consulting privileges are required for infectious disease.

-over-



- When applicable, provider must list their admitting privileges information in the hospital affiliations section on the appropriate credentialing application.
- Blue Cross credentialing policy allows certain eligible providers to have an arrangement with a hospitalist group to admit their patients in lieu of their own hospital privileges. A copy of the arrangement must be submitted with the credentialing application.
- Agree to hold our members harmless for payments above the allowable amount.

To request expedited processing, include the following with the initial credentialing application:

- Letter asking Blue Cross to invoke the expedited process.
- The letter must:
 1. Include your agreement to hold our members harmless for payments above the allowable amount.
 2. Identify the provider group name.
 3. Be on company letterhead and signed by the provider or an authorized representative. An electronic signature is acceptable.
- When applicable, signed admitting privileges agreement to a network hospital.

Write the letter requesting expedited processing similar to the sample below:

{Date}

Dear Blue Cross and Blue Shield of Louisiana:

In accordance with the Louisiana law extending certain requirements for credentialing of health care providers, please accept this written request for expedited processing for **{provider's name}** as a new provider at **{provider's group name}** at our group contract rate and with in-network benefits. **{Provider's group name}** agrees that all contract provisions, including holding covered members harmless for charges beyond the Blue Cross allowable amount, and the member's cost share amount (deductible, coinsurance and/or copayment, as applicable) will apply to the new provider.

{Signature of the provider}

How to submit your letter of request

Complete and submit your letter of request with the initial credentialing application via DocuSign®. If using the Louisiana Standardized Credentialing Application (LSCA), it is available online at www.bcbsla.com/providers, then click "Network Enrollment."

Contact us

For questions regarding this Louisiana law, contact our Provider Credentialing Department at 1-800-716-2299, option 2 or PCDMstatus@bcbsla.com.