



# Onboarding & Credentialing Panel Discussion





# **A Strategic Asset for Group Practices: Provider Credentialing, Enrollment, and Payer Contracting**

Tools for successful provider onboarding and maintenance experiences

# Healthcare Practice Group Credentialing and Compliance SMEs



**Christa Bernacchia**

CPCS®

Principal | Berry, Dunn, McNeil  
& Parker, LLC

An accomplished healthcare strategist, relationship builder, and problem solver, Christa leads the credentialing and enrollment division, including the firm's NCQA CVO certification and credentialing consulting initiatives.



**Alan C. Weintraub**

MD, CHFP

Senior Manager | Berry, Dunn,  
McNeil & Parker, LLC

Alan consults with medical practice groups, hospitals, and medical organizations with a focus on practice management, workflow redesign, physician onboarding, and physician experience.



**Sandra Bonola**

MBA

Senior Contracting Manager |  
Berry, Dunn, McNeil & Parker

Sandy provides expertise in payer contract negotiation, contracting strategy, and developing payer partnerships. She also supports healthcare pre- and post-acquisition due diligence.



# Learning objectives



- ▶ Understand best practices for provider credentialing and enrollment
- ▶ Identify ways to improve the provider onboarding and overall provider experience
- ▶ Learn how payer contracting strategies can improve your organization's financial health



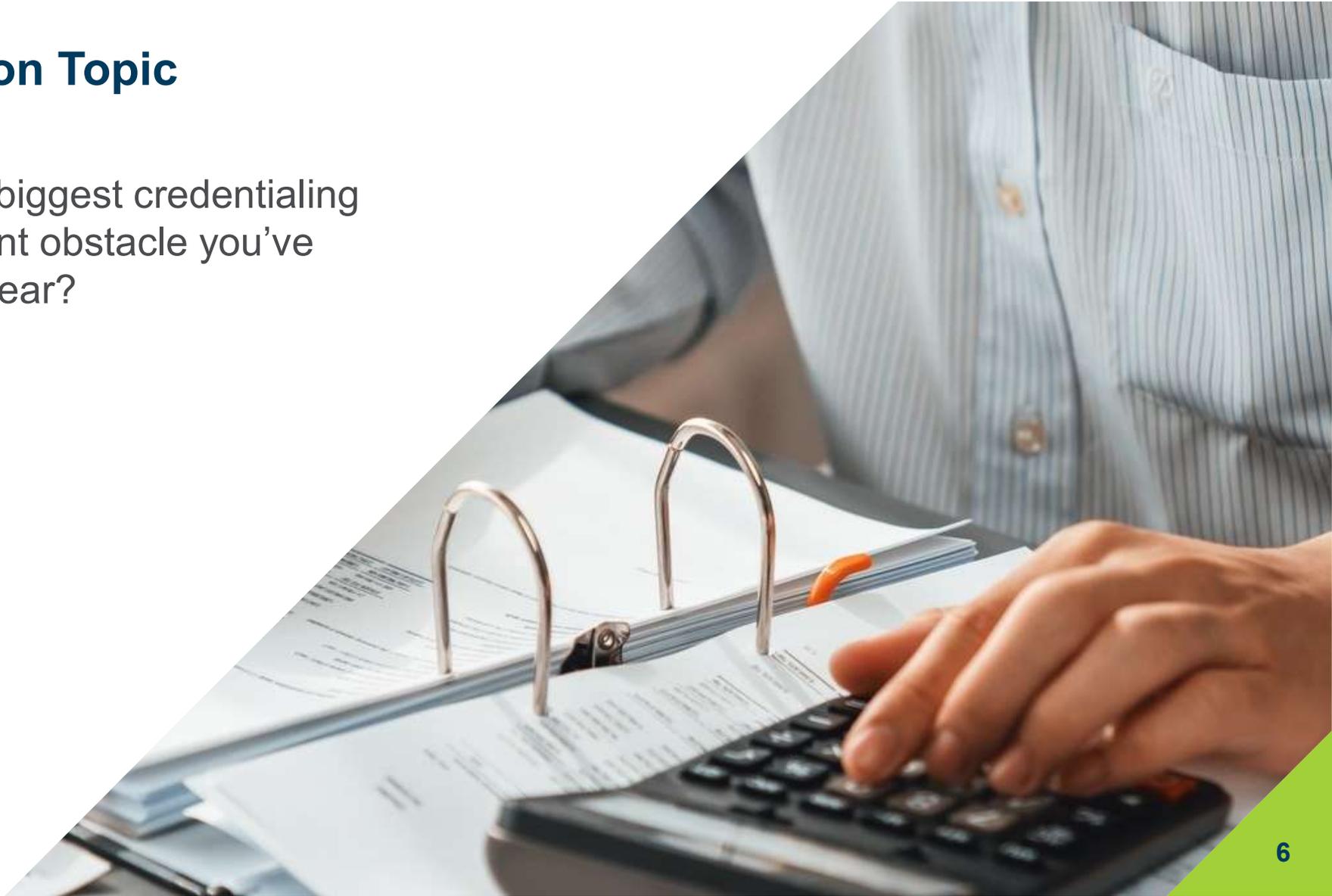
## Provider Credentialing and Enrollment

Why is an efficient credentialing and enrollment process so important?

- ▲ Timelines and trends
- ▲ Working with:
  - Medicare and Medicaid
  - Commercial payers
  - IPAs and PHOs
- ▲ Direct vs. delegated enrollments
- ▲ Hospitals, ASCs, and privileging
- ▲ CVOs
- ▲ CHOWs and COIs
- ▲ Directory updates

## Discussion Topic

What's the biggest credentialing or enrollment obstacle you've faced this year?



# Provider Onboarding and Provider Experience

## A Clinician's Perspective

- ▲ Why is this important to clinicians?
- ▲ Best practices
- ▲ Pitfalls
- ▲ ROI for a well-organized process
- ▲ Cost of onboarding and replacing providers
- ▲ Patient care impact



## Discussion Topic

What kind of feedback are you hearing from your providers about their role in this process?



# Payer Contracting 101

Rates, Negotiations, Value-Based Care



Payer contract assessments



Negotiating payer rates



Measuring market rate competitiveness



Addressing denials



Transparency

## Discussion Topic

Who has had a challenging payer experience in the last month?



# Our mission

Together we commit the best in us to **empower the meaningful growth** of our people, clients, and communities.



# Thank you

## **Christa Bernacchia, CPCS®**

Principal | Berry, Dunn, McNeil & Parker, LLC

[cbernacchia@berrydunn.com](mailto:cbernacchia@berrydunn.com)  
[Christa Bernacchia, CPCS | LinkedIn](#)

## **Alan C. Weintraub, MD, CHFP**

Senior Manager | Berry, Dunn, McNeil & Parker,  
LLC

[alan.weintraub@berrydunn.com](mailto:alan.weintraub@berrydunn.com)  
[Alan Weintraub | LinkedIn](#)

## **Sandra Bonola, MBA**

Senior Contracting Manager | Berry, Dunn, McNeil  
& Parker

[sandra.bonola@berrydunn.com](mailto:sandra.bonola@berrydunn.com)  
[Sandra Bonola | LinkedIn](#)



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# Onboarding Providers: Medical Professional Liability Perspective

Best Practices for Medical Groups for Underwriting Approval and Credentialing

## Underwriting Checklist

- Proposed Start Date
  - Add current date to start credentialing
  - Future effective date (60-90 days out)
  - First date scheduled with patients
- CV
- Licenses
- Insurance Company Application
- Prior Insurance Coverage
  - Loss Runs from prior companies
  - National Practitioner Data Bank Self Query



## Potential Prior Issues -Explanations Needed

- Prior License issues
  - Restricted, suspended, voluntarily surrendered or revoked in any prior state
- DEA or narcotics license
  - Restricted, suspended, voluntarily surrendered or revoked in any prior state
- Licensing Board Sanctions
  - Prior Consent Order, agreed to any prior sanctions by state health department or state licensing board
- Hospital Privileges
  - Ever denied, suspended, non-renewed, revoked, declined or any way restricted
- Prior Complaints
  - Any patient or staff complaints registered against with any employer, hospital or facility, state licensing authority or other governmental body



## Potential Prior Issues - Explanations Needed

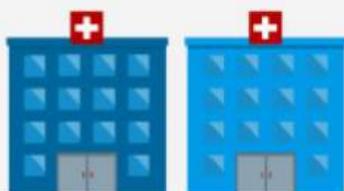
- Convicted of a crime other than traffic violation
- Drug/alcohol addiction or treatment
- Chronic physical limitation / Mental or emotional illness
- Medical Professional Liability insurance coverage
  - Ever cancelled, non-renewed, declined coverage, conditionally renewed
- Medical Malpractice claims
  - Ever been involved in a suit or received a demand from a patient
  - Any claims ever settled, paid or awarded



# The National Practitioner Databank

The NPDB is a web-based repository of reports containing information on medical malpractice payments and certain adverse actions related to healthcare practitioners, providers and suppliers.

## How does the NPDB work?

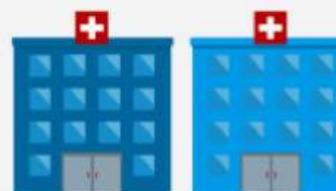


Health care organizations, federal and state agencies, and others are required by law to submit reports.



The NPDB contains  
**1.8 million+**  
reports

Figure as of Dec. 2024



Organizations query for reports when making licensing, hiring, and credentialing decisions.

## How can I see my report?



Report  
Notification

We send a letter to practitioners when an organization submits a report about them. The letter has the report number and access code required to view the report.



Self-Query

Order a Self-Query online to view any reports that match your information.



## The National Practitioner Databank

Only certain kinds of actions may be reported to the NPDB. The NPDB collects information and maintains reports on the following:

- Medical malpractice payments (made on behalf of practitioners)
- Federal and state licensure certification actions
- Adverse clinical privileges actions
- Adverse professional society membership actions
- Negative actions or findings by private accreditation organizations and peer review organizations
- Health care-related criminal convictions and civil judgements
- Exclusions from Medicare/Medicaid or other government health care programs
- Other adjudicated actions or decisions

**A PRACTITIONER'S GUIDE TO THE NPDB**



# Claims History



## **Any prior paid claims**

- Written overview of the details of the claim
- Including date resolved and amount

## **Any prior claims – closed with no payment**

- Written overview of the details of the claim
- Including date resolved

## **Any current pending claim(s)**

- Written overview of the details of the claim
- Status of claim in claim process
- Potential a letter from the defense attorney

Most request a Claims History (Loss Run) from prior insurance companies for last 5 years:

- Any paid claims – Amount paid to settle and amount to defend the claim
- Including date resolved and amount



# Underwriting Searches

## State Licensing Boards

- Provider license profiles

## American Board of Medical Specialties

- Verify Board Certification

## OIG US Health & Human Services

- Exclusion from Medicare, Medicaid or Federal health care programs



## Underwriting - Additional questions

Have any Medical Director responsibilities

- Outside facilities

Treat patients in nursing homes, skilled nursing facilities or assisted living centers

Offer any Medspa services - not covered by insurance

Offer any weightloss services (GLP-1 injections)

Involved in any clinical trials



# Thank you



Founded by physicians in 1984, Integrus Group provides protection and support to help members physicians navigate an increasingly complex healthcare environment. Led by doctors who understand the rewards and challenges of practicing medicine, we're an ally to policyholders when they need it most.

As a mutual company, we share our success with each and every member.



## **Bryan Carter, CRCR**

*Chief Marketing Officer, Integrus Group*

[Bcarter@Integrusgrp.com](mailto:Bcarter@Integrusgrp.com)

[Bryan Carter LinkedIn](#)





# Questions & Answers

