



Credentials Request For:

Provider Name, Title

Address 1

Address 2

City, State Zip

Client Requesting Information:

[Plan Name]

CAQH Provider ID: [01234567]

<https://proview.caqh.org/>

[Insert Date]

Dear: Provider Name, Title

To participate with [Plan Name], as well as to meet compliance obligations, we ask that you complete the credentialing process. Failure to respond may jeopardize your network status.

During the 84th Legislative Session, the Texas Legislature passed SB 200 which mandated a consolidated credentialing process for all Medicaid providers in Texas. MCOs are now contractually required to participate in this endeavor by HHSC. As a part of this process, Aperture Credentialing is sending this letter to you on behalf of your contracted Medicaid health plan. Your timely response is required in order to avoid losing your network status.

We are pleased to participate in an innovative Web-based credentialing application tool that streamlines the credentialing process for health care professionals. The Council for Affordable Quality Healthcare's (CAQH) ProView™ is a Web-based solution (<https://proview.caqh.org/>) that enables health care providers to complete their credentialing application online. In addition, health care providers can control the data stored in the database, easily update their data, and make the data electronically available to [Plan Name].

To submit your credentialing application via the CAQH ProView™ Web-based solution, please visit: <https://proview.caqh.org/>.

If you are in a state other than Texas, please ensure that an office location in Texas is reflected in your application data. If you don't have an office location in Texas, please be sure to include Texas as a practicing state. This will ensure that the Texas Standardized Credentialing Application is provided by CAQH to the Health Plans.

If you are a first-time user or to learn more about CAQH and the ProView™ program, visit the CAQH Web site at <https://proview.caqh.org/>, where you can view an online demonstration of the application process. Alternatively, you may call the CAQH Help Desk at 1-888-599-1771.

After your application is complete on CAQH, Aperture Credentialing, LLC, a credentials verification organization, will retrieve your information and perform primary source verification of your credentials. You may receive requests from Aperture for additional information.

If you have any questions regarding the primary source verification process, you may contact Aperture's Customer Service at 1-855-743-6161 and select option 3.

Thank you for your cooperation in completing this requirement for participation in [Plan Name].

Confidentiality Notice

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