



The ultimate guide to establishing delegated agreements with Medallion

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As your business grows, so does the complexity of managing high volumes of complex enrollment workflows to support your revenue cycle. This is exacerbated by time-consuming processes that don't scale, like having to chase down providers for information or keeping payer data and requirements scattered across multiple software tools or spreadsheets. If you find yourself regularly searching for answers about where your providers are in the credentialing process or whether your organization is at a high risk of revenue getting tied up in claims denials due to non-par issues, it's time to implement some standardization across your credentialing and enrollment processes.

Why delegated agreements are your advantage

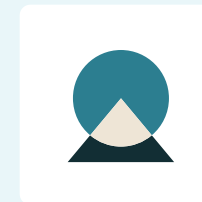
Delegated agreements are legally binding documents that are mutually agreed upon by health plans and provider groups. These documents outline the responsibilities of both parties, including the assessment and evaluation of the credentialing program. By having a delegated agreement in place, you will have the authority to credential your providers, which will help you avoid delays caused by health plans that are backlogged with verifications and enrollments.

Achieving delegated agreements is a necessary strategy for your organization because it provides you with:



Speed

Your providers are participating providers/accept assignments (PAR) within the time it takes to credential rather than the 90-120 standard timeline for direct enrollment.



Control

You now own the end-to-end process of enrolling your providers into your payer contracts.




Revenue

Your providers can now provide in-network care faster.



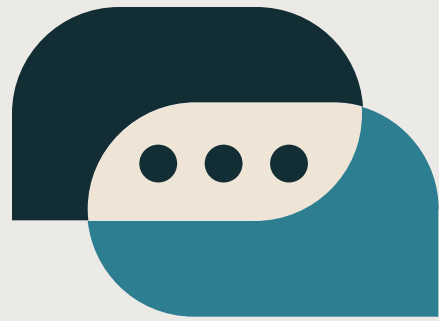
Determining where to begin is often the hardest part. Let's break down the four common barriers to entry and how Medallion helps you.

Barrier	Challenge	Your advantage with  Medallion
Time to go through the delegation process.	As payers bear the inherent risk in a delegated agreement, the process is intentionally rigorous. Payers necessitate intricate procedures, encompassing the documentation of policies, the establishment of credentialing committees, and the compilation of comprehensive, compliant credential files. This meticulous approach is crucial in demonstrating to the payer the provider's capability to undertake delegated credentialing.	We guide you through the requirements for the delegation process by taking the lead on documentation and credentialing, and advising on the committee structure required for submission.
Reporting capabilities to satisfy payer audits	When undergoing an audit, it is essential for groups seeking delegation to submit necessary information to the auditing payers. Properly organized documentation is crucial, as it ensures an efficient process and facilitates the maintenance of a delegated agreement.	You'll have access to built-in reporting and credentialing documentation standards.
Expertise in achieving a delegate agreement and operating a compliance credentialing program.	In the complex landscape of healthcare, navigating the intricacies of becoming delegated is not as simple as a quick online search. Valuable industry knowledge is indispensable when establishing a delegated credentialing program. Additionally, a significant aspect of the delegation audit involves scrutinizing policies and procedures for compliance.	We're bringing ~100 years of experience to the table, streamlining the processes of achieving delegation and running credentialing on their providers.
Certification of credentialing compliance	While not mandatory for some plans, certification serves as a valuable asset, expediting entry into delegated credentialing. Payers leverage certification as a risk-mitigation tool, ensuring that the provider entity can uphold a compliant program, thereby streamlining the process and enhancing overall efficiency.	We are NCQA certified!



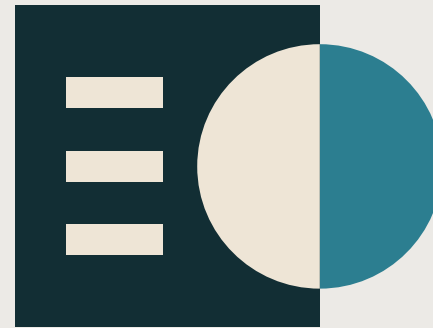
A three-step breakdown of what your path to delegation looks like with Medallion

1



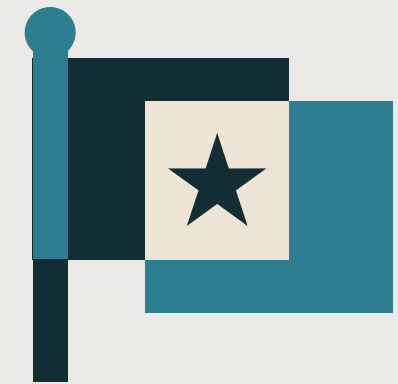
The process begins with you: To start the delegation process, your organization must communicate directly with the payer(s) with which you would like to become delegated.

2



From here, the payer(s) will send you the necessary documentation of requirements you will need to fulfill to achieve delegation. Having these documents in hand from the start will speed up the process and allow us to move more efficiently towards delegation.

3



Once they are obtained, our team will work with you to provide industry knowledge on specific payer requirements and any nuances that may be unclear.



Connecting strategy to execution

Part I: Capture and surface policies and procedures

Getting delegated starts by working with you to **write and finalize the policies and procedures** that are required by the payer(s). We already have templated policies to kickstart this process and can assist in drafting new documents as needed.

Medallion's policies are formatted to meet all requirements of NCQA standards, and we also have access to URAC standards and state requirements, allowing us to easily edit standard policies and procedures to meet those requirements, as needed by the payer.

To begin, we send our **standard policy templates** to give you insight into policy formats and make any large-scale changes before we draft the nuanced language associated with your practice. Once we have drafted the initial policies and procedures, we will work together regularly to edit and finalize them. Once finalized, **you are responsible for reviewing and approving** each document.

Part II: Streamline credentialing

This is the easy part! You are able to request credential files for their providers once:

- The **Delegated Credentialing Agreement**, which outlines each of our responsibilities and complies with NCQA and payer standards is reviewed and signed by your team.
- NPDB is set up, and bulk upload of your provider information is complete.
- Policies and Procedures are completed and approved.

Medallion completes **NCQA credential files within 3 days**.

Part III: Balance credentialing committee management

As part of the delegated credentialing agreement, payers require the delegated organization to have a Credentialing Committee: the group responsible for approving or denying providers who go through the credentialing process.

Medallion advises on identifying committee members, ongoing committee meetings, and **best practices for committee structure and operation**, including:

- Configurable in-platform credential file categories and committee review cadences.
- Automated notification of file outcomes, curated to your organization's preferences.
- Real-time and asynchronous training sessions for committee members to efficiently navigate our platform to streamline file review, voting and documentation.

Once we have credentialed your full first batch of providers, the committee can have its first meeting.

Part IV: Standardize payer submission

We've made it! It is finally time to submit to payers. We work hand in hand with you to fulfill the requirements to **finalize the submission** for a delegated agreement, including the completion of audit forms and reporting and completing a provider roster for submission.





Get ongoing delegated agreement support throughout the audit process

Payers will audit your organization upon submission of their completed application to become delegated, and standardly once a year after that. Some payers may also initiate random audits throughout the year. We can support your organization whenever an audit comes up.

An audit generally entails a review of your policies and procedures, credentialing committee function, credentialing workflows, and quality oversight processes. The payer may request changes or updates to the organization's previously approved policies and procedures, etc. The audit process is involved and tedious, as it is the payer's means to assess and manage the risk of delegating credentialing to your organization.

Our credentialing operations team will provide hands-on audit support to you throughout the audit process, including:

- Participation in and advising on payer communications.
- Compilation and organization of all required documentation and reporting for the payer's review.
- Creation of provider roster and associated documentation of provider credential files, as requested by the payer.
- Updates of policies and procedures, committee function, credential requirements, and/or quality assurance processes, as needed.



Frequently asked questions about delegated credentialing

What legal support does a company need, if any?

In-house counsel participation in the delegation process is not mandatory for most organizations. Some organizations that already have an in-house counsel responsible for overseeing compliance processes may review delegation agreements for any language concerns and make redline edits if necessary. If your organization prefers to have in-house counsel involved, your counsel does not need prior experience in reviewing delegation agreements to assess language related to risks and redlines. Typically, these agreements are straightforward, ranging from 10 to 15 pages, and often do not require extensive revisions.

Are there any hidden setup costs to expect in addition to a Medallion's costs?

At Medallion, transparency is key. We provide upfront pricing details. Customers may encounter external costs, like maintaining an in-house credentialing specialist/s or setting up policies and procedures, which involves committee meetings and payer training development to ensure your organization is set up effectively.

How much time does it typically take to set up all the necessary policies and procedures?

For most of our clients, we've seen it usually takes 1-2 months.

What potential risks are there if an organization goes delegated?

One of the main risks involved in this process is not having your organization fully prepared for all the policies, processes, and compliance requirements. If you proceed without having these things in place, it can lead to wasted time and human capital in pursuing delegation. Therefore, it is crucial to partner with a trusted organization like Medallion to ensure that there are no unexpected surprises throughout the process.



Frequently asked questions about delegated credentialing

How many full-time employees should be assigned to this process, and what factors can affect this number?

The number of employees needed will depend on the size of your organization and the level of service you require. However, based on our experience, we have observed that customers with over 30 locations and 500 providers have been able to manage their credentialing process effectively with a team of two members and Medallion's support.

Who would typically be involved in my company throughout the delegation process?

To ensure a smooth credentialing process, it is common to involve multiple departments within your company. This typically includes HR, clinicians and clinical leadership, compliance, legal, and credentialing teams. Working collaboratively, and with Medallion's support, these teams can establish the necessary processes for success. Once the processes are set in place, you can expect to see significant time savings in the credentialing process.

How does an organization indicate to payers they want to pursue delegation?

You should start by reaching out to whoever is your current credentialing contact at the payers you want to pursue delegation with. They will be able to point you in the right direction. Once you have the right contact, most payers have an initial application or questionnaire that needs to be completed first. This form can typically be obtained by speaking with your payer relations representative. Once the initial request is completed, Medallion will support you with the pre-delegation audit, which is the next step.



Successful teams partner with Medallion

Only Medallion, the leading provider network management platform to unify and offer transparent end-to-end automation workflows for credentialing, enrollment, and monitoring, empowers healthcare teams and their providers to operate three times more efficiently. Get a first-hand look and discover why over 300 businesses like Family Care Center trust Medallion to get their providers credentialed 3.5x faster.

[Visit medallion.co to learn more.](https://medallion.co)

Credentialing

+ Request Credentialing

Re-Cre NPI

Licenses

In pro DEA

Education & Training

Board Certification

Charl OIG

Denv Application

Emer: Application & Attestation

River Medicare Opt-Out

Sam I NPDB

Closed Files

Credentialing File	Requested	Actions
Credential	May 8, 2022	Send to Clean Files v
Credential	May 2, 2022	Send to Flagged Files v
Credential	Apr 28, 2022	Send to Clean Files v
Credential	Apr 27, 2022	Send to Flagged Files v
Credential	Apr 22, 2022	Send to Clean Files v