

New Credentialing Verification Organization (CVO) Provider FAQ

What is a CVO?

Texas Medical Association (TMA) and Texas Medicaid Managed Care Organizations (MCOs) proposed a statewide CVO concept to facilitate provider credentialing, which was endorsed during the 84th Texas Legislature in SB 200. The bill established a vision for Texas to streamline the Medicaid provider credentialing process. Texas Association of Health Plans (TAHP) and TMA have selected Aperture, LLC, for a statewide CVO contract used by 19 Medicaid MCOs. **Baylor Scott & White Health Plan (BSWHP) will be utilizing Aperture for all lines of business.**

What is Primary Source Verification (PSV)?

PSV is the verification of a provider's reported qualifications by the original source or an approved agent of that source. Aperture will be performing PSV functions on behalf of BSWHP.

Which provider types will be credentialed through the CVO?

All BSWHP non-facility based provider types will be credentialed through the CVO, excluding providers who are currently credentialed through a delegation.

What will change for me in the credentialing process?

The only change a provider should expect is to begin receiving communications from Aperture regarding the credentialing application and PSV functions. BSWHP will also be utilizing the Availity application portal for providers and facilities.

Aperture will also be handling recredentialing of providers, starting with those due in September 2018, and will be getting all providers contracted with the other Texas Medicaid health plans to all be on the same recredentialing cycle.

If a provider contacts more than one Medicaid MCO at the same time, who notifies Aperture?

If a provider contacts several of the Medicaid MCOs requesting to join their network, the respective MCO will request the credentialing event on behalf of MCO. Aperture will notify the provider regarding the application and next steps in the CVO process.