

## How to Join the Health Choice Network

Health Choice Arizona (HCA) currently services the following counties: Apache, Coconino, Gila, Maricopa, Mohave, Navajo, Pinal, and Yavapai. Together we are highly motivated and compassionate people, using advanced systems and technology to become the healthcare provider of choice.

Health Choice Arizona (HCA) is committed in providing quality healthcare services to our Members and communities we serve.

Our credentialing and contracting process is one way to help us achieve that goal. Below are helpful tips for consideration and/or to become eligible to join the Health Choice network when submitting the required documentation to Health Choice:

- Correctly and completely fill out and submit the Appropriate AzAHP Form(s), otherwise known as credentialing applications. The forms are:
  1. Practitioner form- used by individual providers/ practitioners that bill as such.
  2. Organizational Form and Application (2 forms) – used by facilities, ASCs, and other ancillary provider types that do not have individual providers billing.
- Please ensure your CAQH application and attestation is up to date and that Health Choice is authorized to access your data.
- The contracting review/ analysis process can take up to 45 days to complete for network determination.
- With network approval to contract, credentialing will be initiated. The credentialing process can take up to 90 days to complete.
- During the credentialing process, new providers will receive a Network Agreement (contract) for review, signature, and return. The agreement will need to be signed and returned timely to ensure execution.
- Upon the completion of the credentialing process, the provider will receive a fully executed copy of their agreement (contract) with a welcome letter advising of their effective date.

### To assist you better, we have attached instructions for:

1. A New Provider Contract Request
2. New Providers Joining an Existing Group Contract

**Please call Health Choice if you have any questions at (800) 322-8670**



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## A New Provider Contract Request

If you are interested in participating in Health Choice networks, you must complete the following steps and return the required documentation:

Please fax a Letter of Interest (LOI) to Health Choice at (480) 760-4975. The LOI needs to be on the provider's letterhead and must include the following:

- Number of providers in your practice.
- Network Affiliation(s)
- Geographic location(s) and hours of operation.
- Provider specialty and Subspecialty services.

Please submit the following forms with your LOI (*PDFs below Opens in New Window*):

- [W-9 Form](#)
- [AzAHP Practitioner Credentialing Form](#)
- [AzAHP Organizational Credentialing Form](#)

**Providers must NOT schedule or render services to Health Choice members until the contracting and credentialing process is complete and the provider receives a copy of the fully executed Agreement.**

## New Providers Joining an Existing Group Contract

Providers joining an existing group must complete the following steps and provide the required documents to be added to an existing contract.

Please fax a Cover Letter to Health Choice at (480) 760-4975. The Cover Letter should explain the reason for submitting the following:

Provider(s) joining your group contract and effective date.

- [W-9 Form](#)
- [AzAHP Practitioner Credentialing Form](#)
- To avoid credentialing delays, please ensure the CAQH application and attestation is up to date and that Health Choice is authorized to access your data.

**The Credentialing and Provider loading process can take approximately 90 days for completion.**

**New Providers joining the group must NOT render services to Health Choice members until they are notified of the participation effective date by the Provider Service Representative.**



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