



**Health Plan Updates:**

**Fortified Provider Network** will no longer be a plan, they will be ending their plans August 8, 2022.

**Healthsmart Complete PPO** has closed their panels to all providers. They are no longer accepting any providers through ASPA or through a direct contract.

**Health Choice:** ASPA will no longer be assigning an effective date for Health Choice plans, due to internal changes, Health Choice is no longer taking every provider. All new providers need to be reviewed by their contracting dept. who makes the final determination. We recommend that you reach out to the plan for new provider effective dates and do not see any Health Choice patients until you have confirmed there is an effective date assigned.

**Partner-SiteRx** offering free webinars on clinical trials and how to incorporate them into your workflows? Hear from four medical and scientific experts as they discuss various options for your consideration during the **SiteRx Clinical Trials Accessibility Summit**. <https://www.siterx.com/> <https://www.siterx.com/physicians-guide>

**Collaborative Health Systems (CHS) ACO Reach:** CHS is hosting a forum for providers to attend and find out more about CHS and what their ACO will offer to you. This forum will be held July 11<sup>th</sup> from 11:00 to 1:00. WATCH FOR THE INVITE TO COME VIA FAX OR EMAIL. If you are interested and have not received an invite, please contact Karen@azspa.com.

**ASPA Initial Application:** It is very important to attach all requested documents when submitting your application, this will make the credentialing process completed quicker. (see page 2 of the ASPA Application) \* Copy of DEA Certificate: (if applicable) (MUST show ARIZONA address and Current Expiration date) o Documentation of Arizona State License: (showing current expiration date) \* Copy of Current Malpractice Facesheet: (showing current expiration date)(Limits no less than \$1 Million/\$3Million) \* Copy of Workman's Comp AND a Copy of General Liability Facesheets: ( BOTH showing current expiration dates) \* Copy of SAMs certificate: (Sexual Misconduct and Molestation, statement located within your General Liability policy) \* Copy of Curriculum Vitae: with minimum 5 years Work History. All dates (Education and Work History) MUST be in a Month/Year Format. (MM/YYYY) \* Physician Assistants: Please provide a copy of your agreement with your Supervising Physician that is now required by the Licensing Board. \* Proof of CME Hours: (Chiropractors & Physical Therapist ONLY) \* ALL NURSES must be Board Certified. ASPA does not accept Nurses that are not Board Certified. (Please note this is not the same as being licensed with the State of Arizona) \* A Current W9: (showing Billing Address that is listed on the application.) \* Current CLIA Certificate(s): if applicable \* Please provide Current Fraud, Waste and Abuse Certificates for the applicant (See last page of Application) \* NPI Assignment Letter(s) (Please provide BOTH Individual AND Group NPI Letters) o AHCCCS ID Number Approval Letter o Medicare Approval Letter (Letter from Noridian) \* EIN Letter regarding your Tax-ID.