



STARTING YOUR PRIVATE PRACTICE & BECOMING A NETWORK PROVIDER

WEBINAR SERIES PART 1 OF 2

Get Started! Learn how to establish a successful private practice and start accepting health insurances

HELLO

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Owner of Food Jonezi for 5 + years

FAVORITE PART OF OWNING A BUSINESS: Freedom of being creative and building a brand that shares my story with clients, partners and the community.

LEAST FAVORITE PART OF OWNING A BUSINESS: Paperwork, meeting important filing deadlines, management and making tough decisions.



OBJECTIVES



Participants will learn the basic requirements to establish a private practice



Participants will learn the steps to become a network provider.



The background of the image features a composite of silhouettes of business professionals in a meeting, shaking hands, and a city skyline with prominent skyscrapers. The scene is overlaid with a translucent geometric pattern of white lines forming a grid of triangles. The word "FIRST" is centered in a teal, sans-serif font. Below the text is a horizontal bar composed of seven colored segments: teal, yellow, magenta, orange, green, and purple. The overall color palette is warm, with orange and yellow tones dominating the lower half and cooler blue and teal tones in the upper half.

FIRST



ESTABLISH YOUR BUSINESS



CREATE A BUSINESS NAME

Establish a 'Legal' and 'Doing Business As' Name or both



DEVELOP A BUSINESS PLAN

- ✓ What is Your Business Vision, Mission and Purpose
- ✓ Creating financial plan and an operational structure
- ✓ Determine whether you want to have a location or virtual services
- ✓ Trademark your logo or Patent your product (This process is very expensive but is worth it)
- ✓ Recommendations: Speak with a trademark attorney to ask questions



SECOND

DETERMINE BUSINESS STRUCTURE



Limited Liability Company (LLC), Nonprofit, Corporation (C corp), S corporation (S corp), B corporation (B corp), Nonprofit Corporation

RECOMMENDATIONS: Speak with an accountant or tax lawyer to direct you in the right path.



REGISTER FOR AN EIN NUMBER BY IRS. (IT IS FREE!)

Link to IRS: <https://www.irs.gov/businesses/small-businesses-self-employed/apply-for-an-employer-identification-number-ein-online>



REGISTER BUSINESS IN YOUR HOME STATE

- ✓ For example: The Department of Consumer and Regulatory Affairs (www.dcrd.dc.gov)
- ✓ Apply for business license or permit to legally provide services in your local area

DETERMINE BUSINESS STRUCTURE. CONT.



Open a business account. Keep personal funds separate



Register your business for ESSP (whether you have a contractors (1099), part-time or full-time employees (W2))

RECOMMENDATIONS: Contact Department of Employment Services to learn your local state guidelines



Complete your business page under state's office of tax and revenue. Enables you to file for Sales and Use Tax Returns – Form FR-800) Sale taxes are filed quarterly



Make sure you are in compliant to receive your Clean Hands Certification with your state. You do not owe any outstanding fees i.e parking, moving violation tickets, unpaid taxes, both federal and state taxes are accurately done and submitted on time

WHICH BUSINESS STRUCTURE IS RIGHT FOR YOU?



FOR PROFIT



Operates with the goal of making money



Serves their customers by selling a product or service



Business owner earns an income from the for-profit and may also pay shareholders and investors from the profits



SOLE PROPRIETORSHIP



It is easy to form and gives you complete control of your business



Automatically considered to be a sole proprietorship if you do business activities but don't register as any other kind of business



Business assets and liabilities are not separate from your personal assets and liabilities



Can be held personally liable for the debts and obligations of the business



PARTNERSHIPS



Are the simplest structure for two or more people to own a business together



Two common kinds of partnerships: limited partnerships (LP) and limited liability partnerships (LLP)



PARTNERSHIPS



LIMITED PARTNERSHIPS

Only one general partner with unlimited liability, and other partners have limited liability



LIMITED LIABILITY PARTNERSHIPS

Similar to limited partnerships but give limited liability to everyone owner.



Protects each partner from debts against the partnership, they won't be responsible for the actions of other partners



LIMITED LIABILITY COMPANY (LLC)



Protects you from personal liability in most instances, your personal assets- like your vehicle, house, and saving accounts. Not at risk in case your LLC faces bankruptcy or lawsuits



Can be a good choice for medium- or higher-risk businesses, owners with significant personal assets they want to be protected, and owners who want to pay a lower tax rate than they would with a corporation



CORPORATION



Called “C corp” is a legal entity that’s separate from its owner. Corporations can make a profit, be taxed, and can be held legally liable



Corporations offer the strongest protection to its owner from personal liability, but the cost to form a corporation is higher than other structures



Requires more extensive record-keeping, operational processes and reporting



Corporations pay income tax on their profits





S CORPORATION



Called “S corp,” is a special type of corporation that’s designed to avoid the double taxation drawback of regular C corps



S corps must file with the IRS to get S corp status, a different process from registering with their state



S corps can be a good choice for a business that would otherwise be a C corp, but meet the criteria to file as an S corp





BENEFIT CORPORATION



Called a B corp,” is a for-profit corporation recognized by a majority of U.S. states



B corps are different from C corps in purpose, accountability, and transparency, but aren't different in how they're taxed



Driven by both mission and profit



Requires B corps to submit annual benefit reports that demonstrate their contribution to the public good



COOPERATIVE (Co-Op)



Is a business or organization owned by and operated for the benefit of those using its services



Profits and earnings generated by the cooperative and distributed among the members, also known as user owners



Elected board of directors and officers run the cooperative while regular members have voting power to control the direction of the cooperative



Members can become part of the cooperative by purchasing shares, though the amount of shares they hold does not affect the weight of their vote



NON-PROFIT



Organized to do charity, education, religious and literary or scientific work. Because their work benefits the public, nonprofits can receive tax-exempt status, meaning they don't pay state or federal taxes income taxes on any profits it makes



Follow organizational rules that are very similar to C corp. Nonprofits can't distribute profits to members or political campaigns



Often called 501 (c) (3) corporations. A reference to the section of Internal Revenue Code that commonly used to grant tax-exempt status



QUICK REFERENCE: BUSINESS STRUCTURE SUMMARY

BUSINESS STRUCTURE	OWNERSHIP	LIABILITY	TAXES
Sole Proprietorship	One person	Unlimited Personal Liability	Personal tax only
Partnerships	Two or more people	Unlimited personal liability unless structured as a limited partnership	Self-employment tax (except for limited partners) Personal tax
Limited Liability Company (LLC)	One or more people	Owners are not personally liable	Self employment Personal tax or corporate tax
Corporation (C-corp) (Is a legal entity that separate from it owners)	One or more people	Owners are not personally liable	Corporate tax
Corporation (S corp)	One or more people, but no more than 100, and all must be U.S. citizens	Owners are not personally liable	Personal tax
Benefit Corporation (B corp)	One or more people	Owners are not personally liable	Corporate tax
Non-profit Corporation	One or more people	Owners are not personally liable	Tax-exempt, but corporate profits can't be distributed.



REFERENCE: Small Business Administration: www.sba.com

The background of the slide features a close-up of two hands shaking in a firm grip. The hand on the left is wearing a blue sleeve, while the hand on the right is wearing a white sleeve. The background is a light blue-grey color with a pattern of white hexagons. Some hexagons have small colored dots (teal, orange, black, blue) at their vertices. A semi-transparent white rectangular box is centered over the handshake.

NEXT





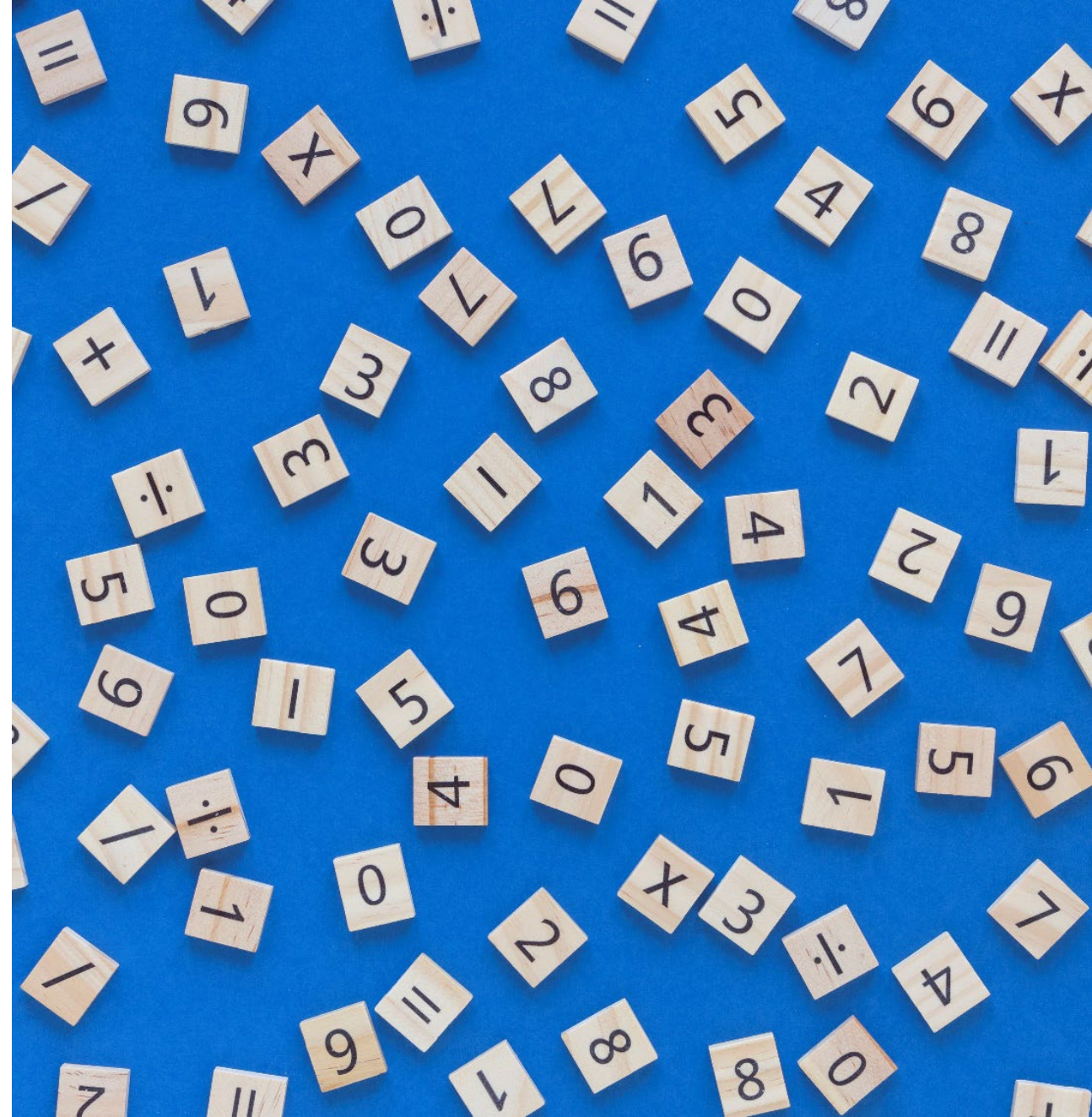
BECOME A PROVIDER

REGISTER FOR A NATIONAL PROVIDER IDENTIFICATION (NPI)



WHAT IS A NPI NUMBER AND WHY IT'S IMPORTANT

- ✓ Is a 10-digit number that is a unique identification number for covered health care providers.
- ✓ Must be used in the administrative and financial transactions adopted under HIPAA. For example: selecting a clearinghouse for billing insurances.
- ✓ Does not carry other information about healthcare providers, such as the state in which they live or their medical specialty.
- ✓ Must be used in lieu of legacy provider identifiers in the HIPAA standards transactions.





Organization NPI is needed to apply as a Medicare Provider



FOLLOW AND COMPLETE ALL REQUIRED STEPS TO OBTAIN YOUR NPI NUMBERS

- ✓ **IMPORTANT:** Determine your taxonomy code (identifies your practice classification and specialization)
- ✓ For example, general practitioner for nutrition and dietetics is 133V000005

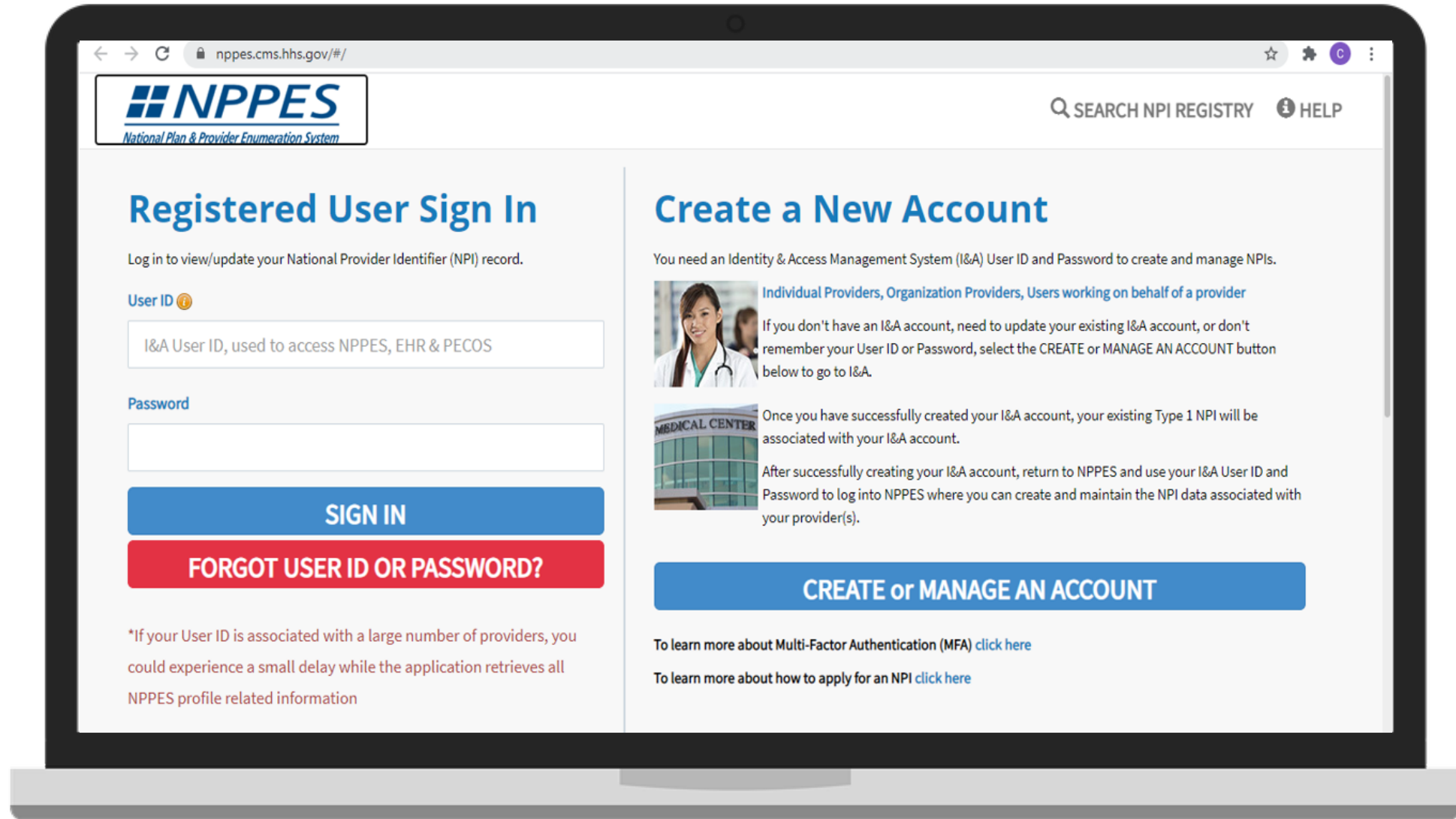


Apply online at CMS & HHS National Plan & Provider Enumeration System (NPPES) :

<https://nppes.cms.hhs.gov/#/>



References: <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/NPI-What-You-Need-To-Know.pdf>



BEFORE REGISTERING WITH CAQH



DOCUMENTS YOU NEED TO GET TOGETHER



Current Resume or CV (Document to show work history), include past supervisors and managers



List of High Schools, Colleges/University/ Internship (complete addresses, phones and fax number to registration office, years completed or graduated)



Professional Business Licenses/Certifications i.e. Food Manager Certification



Professional Business and Liability & MalPractice Insurance (2-5M general aggregate) For example: The Hartford, Proliability by Mercer Insurance



Three (3) References to Contact with contact information (addresses and best number to reach)

STARTING A BUSINESS



EIN number



7. Business address (including address of all correspondences if they are different)



Billing company address and contact information if outsourcing



credentialing contact and addressing billing, hours of operation, phone/fax



Bank/Financial Institution address and contact information



Individual and Group/Organization NPI



CAQH PROCESS?



The council is a collective of health plans that works together to streamline the business of healthcare



Allows commercial health insurance companies to use a single online database source to start credentialing healthcare professionals as providers

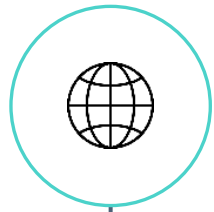


CAQH stores important information on all healthcare providers



All healthcare professionals are **REQUIRED** to complete the CAQH application (and keep their information updated every four months) to keep their CAQH identification number and stay credentialed with insurance companies

COMPLETING THE APPLICATION



01

Go to Website:
<https://proview.caqh.org/Login/Index?ReturnUrl=%2f>



02

Create a username
and password (and
store in a safe
place)



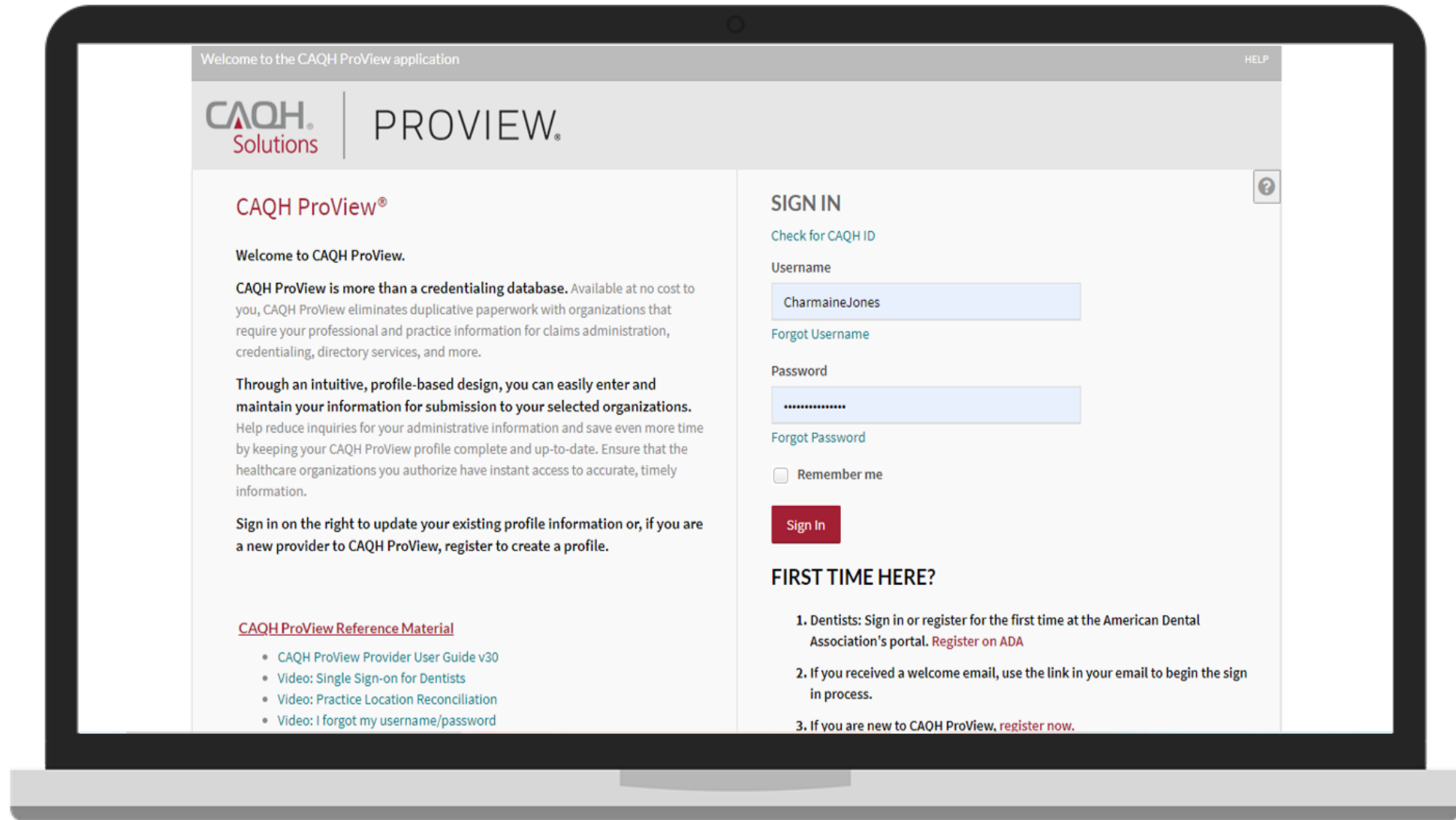
03

Complete your
CAQH application



04

Don't forget to
ATTEST (update)
your information
every four month





WHAT IS CREDENTIALING?



ACCORDING TO THE JOINT COMMISSION

Credentialing is the process of obtaining, verifying and assessing the qualifications of a practitioner to provide care or services in or for a health care organization. Credentials are documented evidences of licensure, education, training, experience, or other qualification.





THEN



DETERMINE WHICH HEALTH PLANS TO BECOME CREDENTIALLED WITH

- ✓ For example: Commercial health plans i.e. Aetna, Carefirst(Blue Cross Blue Shields), Cigna etc.
- ✓ State Medicaid or Managed Care Organizations (MCO's) and Medicare



Visit websites of each health plans. Apply and complete the application to become credentialed as a provider with insurance company.



Credentialing process may take up to 15-45 days. Be patient.

COMPLETED CAQH PROCESS ALREADY?

FOR HOSPITAL OR CLINICAL-BASED DIETITIANS MAY ALREADY BE CREDENTIALLED



Reach out to health plan and explain that you are already a provider and need to be listed under your 'own' Individual and Company NPI number, and EIN (tax ID) number



TO BECOME A PROVIDER UNDER YOUR OWN COMPANY, HEALTH PLAN MAY REQUEST

- ✓ Complete a new application
- ✓ Fax or mail a signed letter on a company's letter head document (A representative of the health plan will give you details to include in the letter)



AGREEING AND NEGOTIATING CONTRACTS





After credentialing and the insurance company accepts you into their network of providers, you will receive



A Health Plan Network Provider Agreement. This agreement is between the health plan and the provider who is providing services to planned members



Commercial health plans agreement does not include agreements or provisions for Medicare or Medicaid plans



Includes: providers manuals, reimbursement rates, billing and payments, network participation, provider licensing and insurance, provider credentialing, maintenance of record, termination, and state contracting and filing requirements



TOP 5

HEALTH PLAN'S OBLIGATIONS



WHEN REVIEWING HEALTH PLAN OBLIGATION CONSIDER THE FOLLOWING

1

Does the contract require the health plan's network name and logo to appear on all members identification cards?

2

Are the applicable fee schedules incorporated into the contract as attachments? You should have access to the health plan's fee schedule for all services you provide

3

LEARN HOW THE HEALTH PLAN HANDLES FEE SCHEDULE CHANGES

Contracts often will reference annual fee schedule updates or updates due to changes in CPT or HCPCS codes



WHEN REVIEWING HEALTH PLAN OBLIGATION CONSIDER THE FOLLOWING

4

Does the contract provide a prompt-payment provisions

5

Does the contract include a provision that requires the health plan to obtain your written consent to participate in any new benefits plans the health plan offers?

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To read more about these obligations, visit here:
<https://www.aafp.org/fpm/2006/1100/p49.html>





TOP 5 PROVIDER'S OBLIGATIONS



TOP FIVE (5) PROVIDER'S OBLIGATIONS

1

Does the health plan require that contracting providers can provide evening and weekend call coverage?

2

WHAT IS THE TIMELY FILING OR SUBMITTING CLAIMS? IS IT REASONABLE FOR YOUR PRACTICE?

Some health plan will allow up to 12 months for submitting claims; a minimum of 6 months is recommended

3

Does the contract define that claims may be filed on generally accepted claim forms with standard coding and billing practices?



TOP FIVE (5) PROVIDER'S OBLIGATIONS

4

Non-Discrimination clauses against accepting other health plans

5

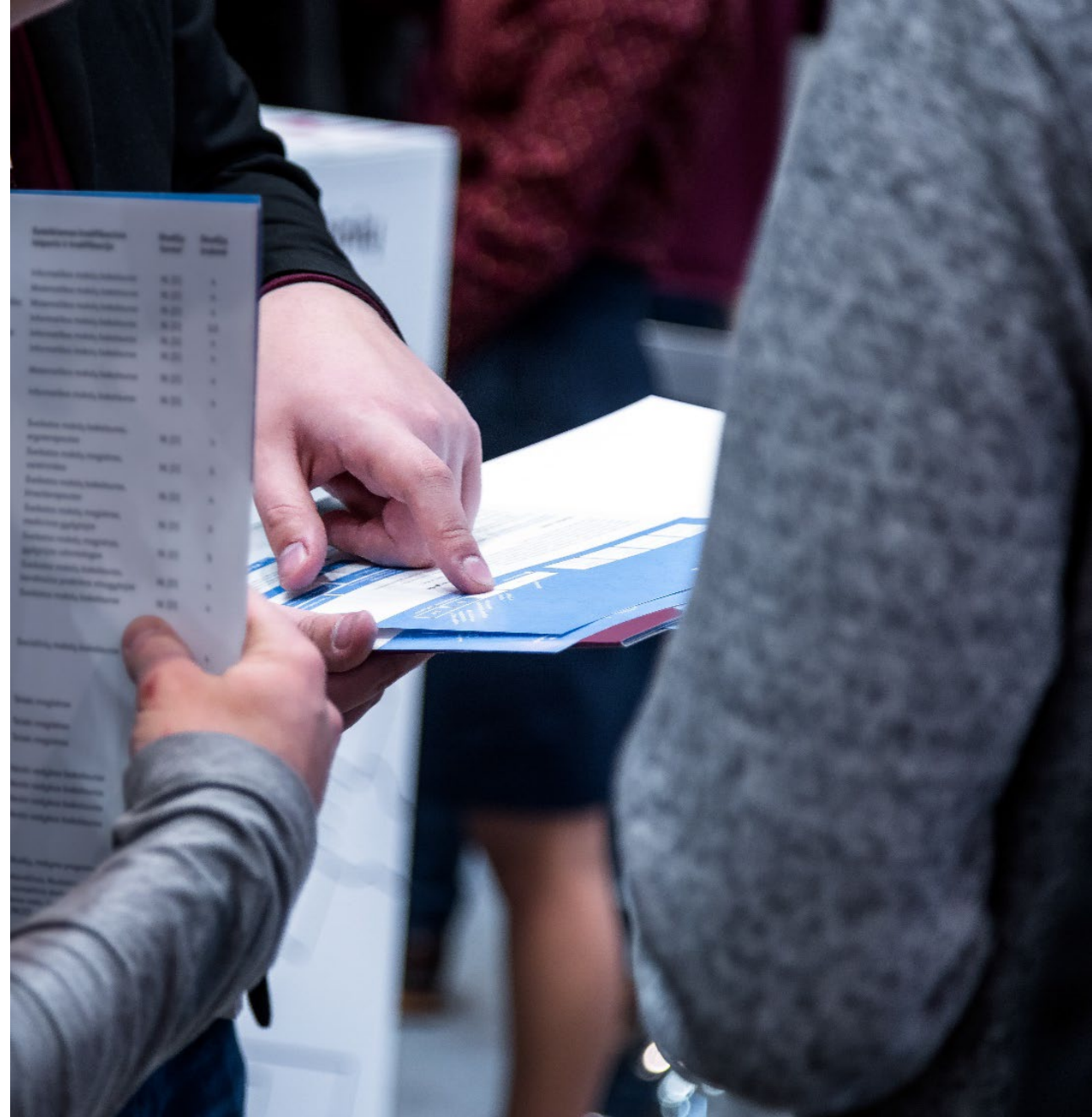
ARE THE HEALTH PLAN'S REQUIREMENTS FOR ACCESS AND RETENTION OF MEDICAL RECORDS REASONABLE?

Can your practice afford printing medical records. Printing costs can add up!

i

To read more on provider's obligations, visit here:

<https://www.aafp.org/fpm/2006/1100/p49.html>





SATISFIED WITH THE CONTRACT

REVIEW AND ACCEPT CONTRACT



If you Agree and Accept all terms and conditions including the reimbursement rates, then sign and submit the contract to health plans.





NOT SATISFIED WITH THE CONTRACT



NEGOTIATE WITH HEALTH PLANS



GATHER AS MUCH INFORMATION BEFORE NEGOTIATING WITH THE HEALTH PLAN

Ask your peers about their experiences working with the health plan. For example, reimbursement rates, if the plan or its payers have processes claims and remitted payment within a reasonable time period



NEGOTIATE WITH HEALTH PLANS



IDENTIFY YOUR LEVERAGE BEFORE NEGOTIATING WITH A HEALTH PLAN

- ✓ Higher reimbursement rates due to high-volume of services or at a minimum ask for a rate comparable to cost of living
- ✓ Changes that will decrease administrative burden to your practice
- ✓ Rate comparison to Medicare
- ✓ Any unique services that will benefit the health plan and its member



NEGOTIATE WITH HEALTH PLANS



Seek help from experts to help you build your case before entering a negotiation or negotiate on your behalf. For example, credentialing and billing services specializing in nutrition and dietetic services

EXAMPLES: Supero Healthcare Solutions.com,
ReimbursementDietitian.com,
NutritionPracticeManagement.com



OTHER ITEMS TO NEGOTIATE

- ① Authorization process for treatment
- ② Period specified for submitting claims
- ③ Period allowed to appeal a denied claim
- ④ Requirements regarding use of oral or injectable drugs



OTHER ITEMS TO NEGOTIATE

5

Time specified for timely payment, and interest paid for late payment

6

Process for adding new service lines or adding new practitioners to the plan

7

Period required for providing notice of modification proposals

8

Cancellation clause, including the advance notice required



RECAP

①

Establish Your Business

②

Determine Business Structure for Tax Filing (i.e., Non-profit, Corporation, LLC)

③

Become a Health Provider

④

Apply for Individual and Organization NPI numbers

⑤

Gather Important Documents before Completing CAQH Application



RECAP

6

Complete CAQH Application

7

Credentialing to become a health provider for health insurance plans

8

Accept contract with health insurance plans if you agree with terms and conditions

9

Negotiate contract with health plans if you do not agree with all terms and conditions



QUESTIONS?





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WEB

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