

All Providers and Practitioners have the right to be informed of the status of their credentialing/recredentialing application upon request. Requests should be submitted by calling or emailing your Magnolia Health Contracting or Provider Relations Representative at the number or email address noted below.

During the credentialing and recredentialing process, Magnolia Health will obtain information from various sources (state licensing agencies and National Practitioner Data Bank) to evaluate applications. Provider and Practitioners have the right to review any primary source information that Magnolia Health collects during this process. However, this does not include the release of references, recommendations or other information that is peer review protected.

Should the Provider or Practitioner believe any of the information used in the credentialing/recredentialing process to be erroneous, or should any information gathered as part of the primary source verification process differ from what the Provider or Practitioner submitted on an application, he/she has the right to correct any erroneous information submitted by another party. To request release of such information, a written request must be submitted to the Provider Data Management Department at the email address noted below. Upon receipt of this information, the Provider or Practitioner will have thirty (*30*) *days* to provide a written explanation detailing the error or the difference in information to Magnolia Provider Data Management. Magnolia Health's Credentialing Committee will then include this information as part of the credentialing/recredentialing process.

Requests to release information are to be submitted in writing via email to the Magnolia Provider Data Management Department at <a href="MagnoliaPDM@Centene.com">MagnoliaPDM@Centene.com</a>.