



Provider Credentialing Services, Pricing, Milestones, and Estimated Turnaround

This guide outlines credentialing and payer enrollment services offered through **JM Medical Billing & Appeals, LLC**. These services support healthcare practices with provider enrollment, payer credentialing, and ongoing credentialing management to ensure providers remain compliant and able to bill successfully.

Credentialing Services Included:

- ✦ CAQH profile setup, review, and attestations
- ✦ NPI registry verification and updates
- ✦ Commercial insurance payer enrollment applications
- ✦ Medicaid provider enrollment
- ✦ Individual provider and group enrollment configuration
- ✦ EFT / ERA enrollment setup when required
- ✦ Application submission and payer portal uploads
- ✦ Credentialing application tracking
- ✦ Follow-up with payer credentialing departments
- ✦ Provider documentation collection and verification

*Credentialing work is billed by milestone to reflect the actual work completed. JM Medical Billing & Appeals, LLC will provide timely preparation, submission, and follow-up support, but final payer and state approval timelines vary and are not guaranteed. Estimated processing ranges are provided for planning purposes only. **Invoices billed by last day of the month with a due date of the 15th the following month.***

Quick Pricing Overview

Service	Total fee	Billing style	Typical estimated timeline
CAQH setup / cleanup	\$100	2 milestones	2 to 5 business days total
Commercial payer enrollment	\$150 per payer	3 milestones	30 to 120+ days overall
Medicaid enrollment	\$125 per enrollment	3 milestones	30 to 150+ days overall
Ongoing credentialing support	\$32 per hour	Hourly invoice	Ongoing / as requested

Total fee: \$100

Use when a provider needs a first-time CAQH build, profile cleanup, document refresh, or re-attestation preparation.

Phase	What is included	Milestone payment	Timing trigger
Kickoff	Review current profile, confirm gaps, gather required details and documents.	\$50 (50%)	Due at project start
Build or cleanup	Complete profile updates, upload supporting documents, and prepare account for provider review and attestation.	\$50 (50%)	Due when profile is complete and ready for provider attestation

Average Turnaround:
 Usually completed in 2 to 5 business days after all needed documents, answers, and account access are received.

Estimated external processing
 No payer approval cycle is required for CAQH itself, but payer applications may still rely on the updated profile afterward.

2) Commercial payer enrollment

Total fee: \$150 per payer

Recommended for Aetna, UHC, BCBS plans, Cigna, UPMC Health Plan, and similar commercial payer enrollments.

Phase	What is included	Milestone payment	Timing trigger
Kickoff	Payer-specific intake, document checklist review, and application preparation.	\$45 (30%)	Due when the payer is assigned and the project starts
Submission	Application completion, portal upload or mailing, and confirmation that the packet was submitted.	\$60 (40%)	Due once the initial application is submitted
Approval	Follow-up through approval, effective date confirmation, or final participation confirmation within scope.	\$45 (30%)	Due upon approval or final active confirmation

Average Turnaround
 Application preparation and submission are often completed in 3 to 10 business days after the full packet, signatures, and portal access are in hand.

Estimated external processing
 Commercial payers commonly take about 30 to 120+ days after submission. Actual timing varies by payer, state, provider type, corrections requested, and contracting sequence.

3) Medicaid enrollment

Total fee: \$125 per enrollment

Best for state Medicaid enrollments and managed Medicaid setups where the state enrollment must occur before or alongside payer participation.

Phase	What is included	Milestone payment	Timing trigger
Kickoff	State-specific intake review, screening of required documents, and application setup.	\$50 (40%)	Due at project start
Submission	Application filing, portal submission, and upload of required documentation.	\$37.50 (30%)	Due once the Medicaid application is submitted
Approval	Status monitoring through approval, ID assignment, or active enrollment confirmation within scope.	\$37.50 (30%)	Due when the enrollment becomes active or approved

Your turnaround
 State Medicaid applications are often ready to submit in 5 to 10 business days once all documents, signatures, and access items are complete.

Estimated external processing
 Medicaid processing commonly ranges from 30 to 150+ days depending on state workflow, screening level, ownership review, site visit requirements, and correction requests.

4) Ongoing credentialing support

Rate: \$35 per hour

Ongoing Credentialing Support (Optional):

After initial credentialing is complete, many practices retain ongoing credentialing support to maintain payer participation and prevent enrollment disruptions.

- ✦ License and credential renewal tracking
- ✦ CAQH attestations and profile maintenance
- ✦ Payer revalidation and recredentialing management Payer follow-up and status monitoring
- ✦ Adding new providers or payers
- ✦ Credentialing tracker maintenance and reporting

Ongoing Credentialing Support Rate: \$35 per hour

Billed by the last day of the month, due the 15th of the following month.

Typical support structure: 10-15 hours per week depending on practice size and provider volume.

Additional Terms & Conditions

- ✦ Turnaround times begin only after all required documents, signatures, answers, and portal access are received.
- ✦ Milestones for preparation and submission are earned when those work phases are completed, even if payer processing continues afterward.
- ✦ Payer, Medicare, Medicaid, and state processing times are estimates only and remain outside JM Medical Billing & Appeals, LLC's control.
- ✦ Client-caused delays, such as missing documents, unsigned forms, or late portal invitations, pause the projected timeline until all items are received.
- ✦ Substantive changes requested after submission, or rework caused by inaccurate information originally supplied by the client, may be billed separately at the hourly support rate unless otherwise agreed in writing.

I look forward to collaborating with your establishment every step of the way!

Thank you,

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