



State of Arizona
WholeHealth Networks, Inc. (WHN)
Credentialing Guidelines

WholeHealth Networks Inc. (WHN) credentials per NCQA guidelines. Failure to submit these documents will result in delayed processing of your application.

Please return the following information to WHN using one of these methods:

Fax: 1-888-492-1027 Email: provider.updates@tivityhealth.com

- ❑ All credentialing documents may be found at www.wholehealthpro.com and click on the credentialing tab.
- ❑ Completed **WHN credentialing application** with all signature & date lines completed.
- ❑ **NEW PRACTITIONERS ONLY**- WHN Universal Participating Practitioner Agreement with signature (Only first page is needed; keep the other pages for your records)
- ❑ W-9 for verification of each tax identification number used.
- ❑ Copy of current professional liability insurance policy face sheet, showing expiration dates, limits & provider's name.
- ❑ If your application is incomplete, a WHN credentialing coordinator will call to collect the missing credentialing information.
- ❑ Once the WHN Credentialing Committee has accepted your credentialing/recredentialing application, you will receive an Credentialing Welcome Acceptance Letter.
- ❑ You are contractually required to notify us of ALL name, address and TIN additions and terminations 30 days prior to the change. Please send all changes to provider.updates@tivityhealth.com.