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HB 1552 - H AMD 1369 By Representative Cody

ADOPTED 02/17/2020

1 Strike everything after the enacting clause and insert the 2 following:

- 3 "Sec. 1. RCW 48.43.750 and 2016 c 123 s 1 are each amended to 4 read as follows:
 - (1) (a) A health carrier ((shall)) must use the database selected pursuant to RCW 48.165.035 to accept and manage credentialing applications from health care providers. A health carrier may not require a health care provider to submit credentialing information in any format other than through the database selected pursuant to RCW 48.165.035.
 - (b) Effective June 1, 2018, a health carrier shall make a determination approving or denying a credentialing application submitted to the carrier no later than ninety days after receiving a complete application from a health care provider.
 - (c) Effective June 1, 2020, a health carrier shall make a determination approving or denying a credentialing application submitted to the carrier no later than ninety days after receiving a complete application from a health care provider. All determinations made by a health carrier in approving or denying credentialing applications must average no more than sixty days.
 - (d) This section does not require health carriers to approve a credentialing application or to place providers into a network.
 - (2) This section does not apply to health care entities that utilize credentialing delegation arrangements in the credentialing of their health care providers with health carriers.
- 26 (3) For purposes of this section, "credentialing" means the 27 collection, verification, and assessment of whether a health care 28 provider meets relevant licensing, education, and training 29 requirements.
- 30 (4) Nothing in this section creates an oversight or enforcement 31 duty on behalf of the office of the insurance commissioner against a 32 health carrier for failure to comply with the terms of this section.

- NEW SECTION. Sec. 2. A new section is added to chapter 48.43
 RCW to read as follows:
 - (1) If a carrier approves a health care provider's credentialing application, upon completion of the credentialing process, the carrier must reimburse a health care provider under the following circumstances:
 - (a) When credentialing a new health care provider through a new provider contract, the carrier must reimburse the health care provider for covered services provided to the carrier's enrollee retroactively to the date of contract effectiveness if the credentialing process extends beyond the effective date of the new contract.
 - (b) When credentialing a provider to be added to an approved and in-use provider contract where a relationship existed between the carrier and the health care provider or the entity for whom the health care provider is employed or engaged at the time the health care provider submitted the completed credentialing application, the carrier must reimburse the health care provider for covered health care services provided to the carrier's enrollees during the credentialing process beginning when the health care provider submitted a completed credentialing application to the carrier.
 - (2) The health carrier must reimburse the health care provider at the contracted rate for the applicable health benefit plan that the health care provider would have been paid at the time the services were provided if the health care provider were fully credentialed by the carrier.
 - (3) Nothing in this section requires reimbursement of health care provider-rendered services that are not benefits or services covered by the health carrier's health benefit plan.
 - (4) Nothing in this section requires a health carrier to pay reimbursement for any covered medical services provided by a health care provider applicant if the health care provider's credentialing application is not approved or if the carrier and health care provider do not enter into a contractual relationship."
- 35 Correct the title.

EFFECT: Removes changes to the required credentialing timeline to restore current law. Modifies requirements for when a carrier must

reimburse a health care provider for services provided during the credentialing process.

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