

MAINE STATE LEGISLATURE

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121st MAINE LEGISLATURE

FIRST REGULAR SESSION-2003

Legislative Document

No. 423

H.P. 331

House of Representatives, February 4, 2003

An Act To Improve the Process of Credentialing Health Care Providers

Reference to the Committee on Insurance and Financial Services suggested and ordered printed.

Millicent M. MacFarland
MILLICENT M. MacFARLAND
Clerk

Presented by Representative MARRACHÉ of Waterville.
Cosponsored by Senator GAGNON of Kennebec and
Representatives: FINCH of Fairfield, GLYNN of South Portland, McLAUGHLIN of Cape Elizabeth, O'NEIL of Saco, PERRY of Calais, SMITH of Van Buren.

Be it enacted by the People of the State of Maine as follows:

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4 **Sec. 1. 24-A MRSA §4303, sub-§2**, as amended by PL 1997, c. 163, §1, is further amended to read:

6 **2. Credentialling.** The credentialling of providers by a carrier ~~offering--a--managed--care--plan~~ is governed by this subsection.
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10 A. The granting of credentials must be based on objective standards that are available to providers upon application for credentialling. A carrier shall consult with appropriately qualified health care professionals in developing its credentialling standards.
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16 B. All credentialling decisions, including those granting, denying or withdrawing credentials, must be in writing. The provider must be provided with all reasons for the denial of an application for credentialling or the withdrawal of credentials. A withdrawal of credentials must be treated as a provider termination and is subject to the requirements of subsection 3-A.
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24 C. A carrier shall establish and maintain an appeal procedure, including the provider's right to a hearing, for dealing with provider concerns relating to the denial of credentialling for not meeting the objective credentialling standards of the plan and the contractual relationship between the carrier and the provider. The superintendent shall determine whether the process provided by a carrier is fair and reasonable. This procedure must be specified in every contract between a carrier and a provider or between a carrier and a provider network if a carrier does not contract with providers individually.
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36 D. A carrier shall make credentialling decisions, including those granting, denying or withdrawing credentials, within 60 days of receiving a completed credentialling application from a provider. For the purposes of this paragraph, an application is completed if the application includes all of the information required by the uniform credentialling application used by carriers and providers in this State, and such attachments to that application as required by the carrier at the time of application. A carrier may not require that a provider have an address within the State before accepting an application. A carrier must accept primary source verification from the Federation of State Medical Boards or its successor organization.
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2 E. If the credentialing application is completed as
4 described in paragraph D and the carrier's decision to grant
6 credentials to a provider is made later than 60 days after
8 receipt of a completed application, the carrier's approval
10 of that provider's credentialing must be retroactive to the
12 date the carrier received the provider's completed
14 application.

SUMMARY

12 This bill sets a time line for provider credentialing by
14 health insurance carriers. It requires carriers to make
16 credentialing decisions within 60 days of receiving a completed
application from a provider.