ENROLLED ORIGINAL

AN ACT

Codification
District of
Columbia
Official Code

2001 Edition

2002 Supp.

West Group Publisher

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

To provide for a uniform form to be used by health care providers when submitting an application to be credentialed or re-credentialed for a provider panel of a health insurer; and to amend the Health-Care and Community Residence Facility, Hospice and Home Care Licensure Act of 1983 to require a credentials committee to accept a uniform credentialing form.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the "Health Insurers and Credentialing Intermediaries Uniform Credentialing Form Act of 2002".

New Subchapter III Chapter 32 Title 31

TITLE I. REGULATORY STANDARDS.

Sec. 101. Definitions.

For the purposes of this title, the term:

New § 31-3251

- (1) "Commissioner" means Commissioner of the Department of Insurance and Securities Regulation.
- (2) "Credentialing intermediary" means a person to whom a health insurer has delegated credentialing or recredentialing authority and responsibility.
- (3) "Health benefit plan" means any accident and health insurance policy or certificate, hospital and medical services corporation contract, health maintenance organization subscriber contract, plan provided by a multiple employer welfare arrangement, or plan provided by another benefit arrangement. The term "health benefit plan" does not mean accident only, credit, or disability insurance; coverage of Medicare services or federal employee health plans, pursuant to contracts with the United States government; Medicare supplemental or long-term care insurance; dental only or vision only insurance; specified disease insurance; hospital confinement indemnity coverage; limited benefit health coverage; coverage issued as a supplement to liability insurance, insurance arising out of a workers' compensation or similar law; automobile medical payment insurance; medical expense and loss of income benefits; or insurance under which benefits are payable with or without regard to fault and that is statutorily required to be contained in any liability insurance policy or equivalent self-insurance.
 - (4) "Health care provider" means:

ENROLLED ORIGINAL

- (A) An individual who is licensed, certified, or otherwise authorized to provide health care services by the District of Columbia for a practice set forth under section 102 of the District of Columbia Health Occupations Revision Act of 1985, effective March 25, 1986 (D.C. Law 6-99; D.C. Official Code § 3-1201.02); or
- (B) An agency, organization, facility, or distinct part of any of them, licensed under the Health-Care and Community Residence Facility, Hospice and Home Care Licensure Act of 1983, effective February 24, 1984 (D.C. Law 5-48; D.C. Official Code § 44-501 *et seq.*).
- (5) "Health insurer" means any person that provides one or more health benefit plans or insurance in the District of Columbia, including an insurer, a hospital and medical services corporation, a fraternal benefit society, a health maintenance organization, a multiple employer welfare arrangement, or any other person providing a plan of health insurance subject to the authority of the Commissioner.
- (6) "Provider panel" means providers that contract with a health insurer to provide health care services to the enrollees under a health benefit plan of the health insurer.
- (7) "Uniform credentialing form" means the form designed by the Commissioner, by regulation, for use by a health insurer or its credentialing intermediary for credentialing and re-credentialing of a health care provider for participation on a provider panel.

Sec. 102. Application for becoming credentialed.

New § 31-3252

- (a) A health insurer or its credentialing intermediary shall accept the uniform credentialing form as the sole application for a health care provider to become credentialed or recredentialed for a provider panel of the health insurer.
- (b) A health insurer or its credentialing intermediary shall make the uniform credentialing form available to any health care provider that is to be credentialed or recredentialed by the health insurer or credentialing intermediary.

Sec. 103. Penalties.

New § 31-3253

The Commissioner may impose a penalty not to exceed \$500 against any health insurer for each violation of this title by the health insurer or its credentialing intermediary.

Sec. 104. Regulations.

New of § 31-3254

The Commissioner shall promulgate rules and regulations to implement the provisions of this title.

Sec. 105. Applicability.

New § 31-3255

This act shall apply, 120 days after the promulgation of the final regulations pursuant to section 104, to health insurers, as defined in section 101(5), and any agency, organization, facility, or distinct part thereof, licensed pursuant to the Health-Care and Community Residence

ENROLLED ORIGINAL

Facility, Hospice and Home Care Licensure Act of 1983, effective February 24, 1984 (D.C. Law 5-48; D.C. Official Code § 44-501 *et seq.*).

TITLE II. CONFORMING AMENDMENT TO THE HEALTH-CARE AND COMMUNITY RESIDENCE FACILITY, HOSPICE AND HOME CARE LICENSURE ACT.

Sec. 201. Section 8 (a) of the Health-Care and Community Residence Facility, Hospice and Home Care Licensure Act of 1983, effective February 24, 1984 (D.C. Law 5-48; D.C. Official Code § 44-507), is amended by adding a new sentence at the end to read as follows:

Amend § 44-507

"The credentials committee shall accept the District of Columbia's uniform credentialing form as the sole application for a healthcare provider to become credentialed or recredentialed.".

TITLE III. FISCAL IMPACT STATEMENT.

Sec. 301. Fiscal impact statement.

The Council adopts the fiscal impact statement in the committee report as the fiscal impact statement required by section 602(c)(3) of the District of Columbia Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.2(c)(3)).

TITLE IV. EFFECTIVE DATE.

Sec. 401. Effective date.

This act shall take effect following approval by the Mayor (or in the event of veto by the Mayor, action by the Council to override the veto), a 30-day period of Congressional review as provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.2(c)(1)), and publication in the District of Columbia Register.

Chairman	_
Council of the District of Columbia	
yor	
trict of Columbia	