GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2009

H HOUSE DRH50276-LN-111 (3/9)

Short Title: Provider Credentialing/Insurers. (Public)

Sponsors: Representative Stewart.

Referred to:

A BILL TO BE ENTITLED

AN ACT PERTAINING TO THE CREDENTIALING OF HEALTH CARE PROVIDERS UNDER HEALTH BENEFIT PLANS.

The General Assembly of North Carolina enacts:

1 2

 SECTION 1. G.S. 58-3-230 reads as rewritten:

"§ 58-3-230. Uniform provider credentialing.

- (a) An insurer that provides a health benefit plan and that credentials providers for its networks shall maintain a process to assess and verify the qualifications of a licensed health care practitioner within 60 days of receipt of a completed provider credentialing application form approved by the Commissioner. If the insurer has not completed the provider credentialing application form within 60 days of receipt of the form, then the insurer shall issue a temporary credential to the applicant if the applicant has a valid North Carolina professional or occupational license to provide the health care services to which the credential would apply. The temporary credential shall remain in effect until the provider's credentialing application is approved or denied by the insurer. When a health care practitioner joins a practice that is under contract with an insurer to participate in a health benefit plan, the effective date of the health care practitioner's participation in the health benefit plan network shall be the date the insurer approves the practitioner's credentialing application.
- (b) The Commissioner shall by rule adopt a uniform provider credentialing application form that will provide health benefit plans with the information necessary to adequately assess and verify the qualifications of an applicant. The Commissioner may update the uniform provider credentialing application form, as necessary. No insurer that provides a health benefit plan may require an applicant to submit information that is not required by the uniform provider credentialing application form.
- (c) As used in this section, the terms "health benefit plan" and "insurer" shall have the meaning provided under G.S. 58-3-167."
 - **SECTION 2.** This act becomes effective October 1, 2009.

