
HOUSE BILL 1552

State of Washington

66th Legislature

2019 Regular Session

By Representatives Dolan, Doglio, Fey, Senn, Appleton, Robinson, Ryu, Jinkins, Macri, and Leavitt

Read first time 01/24/19. Referred to Committee on Health Care & Wellness.

1 AN ACT Relating to health care provider credentialing by health
2 carriers; amending RCW 48.43.750; and adding a new section to chapter
3 48.43 RCW.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 **Sec. 1.** RCW 48.43.750 and 2016 c 123 s 1 are each amended to
6 read as follows:

7 (1)(a) A health carrier (~~shall~~) must use the database selected
8 pursuant to RCW 48.165.035 to accept and manage credentialing
9 applications from health care providers. A health carrier may not
10 require a health care provider to submit credentialing information in
11 any format other than through the database selected pursuant to RCW
12 48.165.035.

13 (b) Effective June 1, 2018, a health carrier shall make a
14 determination approving or denying a credentialing application
15 submitted to the carrier no later than ninety days after receiving a
16 complete application from a health care provider.

17 (c) Effective (~~June~~) January 1, 2020, a health carrier shall
18 make a determination approving or denying a credentialing application
19 submitted to the carrier no later than (~~ninety~~) forty-five days
20 after receiving a complete application from a health care provider.
21 (~~All determinations made by a health carrier in approving or denying~~

1 ~~credentialing applications must average no more than sixty days.)~~
2 For purposes of the forty-five day timeline, an application is
3 complete once it has been attested by the applicant and submitted.
4 Health carriers may not extend the forty-five day timeline based upon
5 requests for supplemental information from the applicant.

6 (d) This section does not require health carriers to approve a
7 credentialing application or to place providers into a network.

8 (2) This section does not apply to health care entities that
9 utilize credentialing delegation arrangements in the credentialing of
10 their health care providers with health carriers.

11 (3) For purposes of this section, "credentialing" means the
12 collection, verification, and assessment of whether a health care
13 provider meets relevant licensing, education, and training
14 requirements.

15 (4) Nothing in this section creates an oversight or enforcement
16 duty on behalf of the office of the insurance commissioner against a
17 health carrier for failure to comply with the terms of this section.

18 NEW SECTION. Sec. 2. A new section is added to chapter 48.43
19 RCW to read as follows:

20 (1) A health carrier that credentials a health care provider in
21 its network shall reimburse the health care provider for covered
22 health care services provided to the carrier's enrollees during the
23 credentialing process beginning when the health care provider
24 submitted a completed credentialing application to the carrier if:

25 (a) The health care provider's credentialing application is
26 approved by the carrier; and

27 (b) A contractual relationship existed between the carrier and
28 the health care provider or the entity for whom the health care
29 provider is employed or engaged at the time the health care provider
30 submitted the credentialing application.

31 (2) The health carrier must reimburse the health care provider at
32 the in-network rate for the applicable health benefit plan that the
33 health care provider would have been paid at the time the services
34 were provided if the health care provider were fully credentialed by
35 the carrier.

36 (3) Nothing in this section requires reimbursement of health care
37 provider-rendered services that are not benefits or services covered
38 by the health carrier's health benefit plan.

1 (4) Nothing in this section requires a health carrier to pay
2 reimbursement for any covered medical services provided by a health
3 care provider applicant if the health care provider's credentialing
4 application is not approved or if the carrier and health care
5 provider do not enter into a contractual relationship.

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