

HB 2508 -- CREDENTIALING BY HEALTH CARRIERS

SPONSOR: Coleman (32)

This bill is related to credentialing of practitioners by health carriers. If a health carrier determines the application is not complete, the health carrier shall have 10 days to request any additional information from the practitioner. The application shall be considered complete upon receipt of the requested additional information.

If a practitioner's application is approved, the health carrier shall provide payments for covered health services performed by the practitioner during the credentialing period. The practitioner shall submit to the health carrier all claims for services provided during the credentialing period, within six months after the health carrier approves the practitioner's credentialing application.

A health carrier shall not require a practitioner to be credentialed in order to receive payments for covered health services if the practitioner is providing coverage for an absent credentialed practitioner during a temporary period, not to exceed 108 days. A health carrier may deny payments if the practitioner providing services of the credentialed practitioner meets certain conditions (Section 376.1578, RSMo).