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Form #6

NOTICE OF FINAL FILING AND ADOPTION OF A LEGISLATIVE RULE AUTHORIZED BY THE WEST VIRGINIA LEGISLATURE

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THE ABOVE RULE HAS BE AUTHORIZATION IS CITED SECTION §64-5-2(c) THIS RULE IS FILED WITH	EN AUTHORIZED BY THE WEST VIRGINIA LEGISLATURE. O IN (house or senate bill number) SB 341,

TITLE 64

JOINT LEGISLATIVE RULE

THE DEPARTMENT OF HEALTH AND HUMAN RESOURCES AND THE WEST VIRGINIA INSURANCE COMMISSION

SERIES 89

UNIFORM CREDENTIALING OF HEALTH CARE PRACTITIONERS

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TITLE 64

JOINT LEGISLATIVE RULE

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THE DEPARTMENT OF HEALTH AND HUMAN RESOURCEST VIRGINIA AND SECRETARY OF STATE THE WEST VIRGINIA INSURANCE COMMISSION

SERIES 89

UNIFORM CREDENTIALING OF HEALTH CARE PRACTITIONERS

§64-89-1. General.

- 1.1. Scope -- This rule establishes requirements relating to the use of uniform credentialing and recredentialing forms in this State. The W. Va. Code is available in public libraries and on the Legislature's web page, http://www.legis.state.wv.us/.
 - 1.2. Authority. -- W. Va. Code §§16-1A-2 et seq., 16-1-4 and 33-2-10.
 - 1.3. Filing Date. -- December 21, 2004 April 22, 2005
 - 1.4. Effective Date. -- April **3**, 2005
- 1.5. This is a joint rule of the Department of Health and Human Resources and the West Virginia Insurance Commission.

§64-89-2. Application.

2.1. Except as otherwise provided, this rule applies to all hospitals, insurers, managed care organizations, third party administrators, other health care entities that credential health care practitioners in this state and all health care practitioners designated by the secretary and commissioner.

§64-89-3. Definitions.

- 3.1. "Commissioner" means the commissioner of insurance.
- 3.2. "Committee" means the uniform credentialing advisory committee established pursuant to W. Va. Code §16-1A-3.
- 3.3. "Credentialing" means the process of assessing and validating the qualifications of a health care practitioner, including but not limited to, an evaluation of licensure status, education,

training, experience, competence and professional judgment.

- 3.4. "Health Care Entity" means any of the following that require the submission of credentials data:
- 3.4.a. A clinic or other health care facility or organization licensed or certified to provide medical or health care services in this state;
 - 3.4.b. A hospital;
 - 3.4.c. A managed care organization;
 - 3.4.d. A third party administrator;
 - 3.4.e. An insurer;
- 3.4.f. A certified verification organization or any other entity to whom the duties of credentialing or recredentialing have been delegated by another health care entity; and
- 3.4.g. Any other organization that contracts with health care practitioners for health care services and, in the course of its operations, requires practitioners to provide credentialing information.
- 3.5. "Health Care Practitioner" means a health care provider who is licensed, certified, or otherwise authorized to provide health care services, as designated by the secretary and commissioner to be subject to the uniform credentialing and recredentialing forms.
- 3.6. "Recredentialing" means the process by which a hospital, insurer, managed care organization, third party administrator or other health care entity ensures that a health care practitioner who is currently credentialed continues to meet the health care entity's credentialing criteria.
 - 3.7. "Secretary" means the secretary of the department of health and human resources.
- 3.8. "Uniform Credentialing Form" means the form developed by the committee to collect the credentials data commonly requested by health care entities for purposes of credentialing.
- 3.9. "Uniform Recredentialing Form" means the form developed by the committee to collect the credentials data commonly requested by health care entities for purposes of recredentialing.
- §64-89-4. Mandatory Use of Uniform Credentialing Form and Uniform Recredentialing Form.

- 4.1. Beginning July 1, 2003, all health care entities shall use the uniform credentialing form developed by the committee for credentialing health care practitioners and the uniform recredentialing form developed by the committee for recredentialing health care practitioners. No health care entity may require any health care practitioner credentialed by that health care entity prior to July 1, 2003 to reapply using these forms until the date on which the health care practitioner would otherwise be required to reapply or provide updated credentialing information.
- 4.2. The health care practitioners who are required to use the uniform credentialing and uniform recredentialing forms are those designated by the secretary and commissioner.
- 4.3. Once the health care practitioner has completed the uniform credentialing and/or uniform recredentialing forms, he or she may duplicate the forms as necessary for submission to multiple health care entities. The forms shall be accompanied by the following:
- 4.3.a. An affirmation or attestation page that bears an original signature and date and that verifies the accuracy of the information on the form as of the date it is signed; and
- 4.3.b. An original signed authorization to release information to the health care entity relating to the professional qualifications, ethical standing, competence, and mental and physical health of the health care practitioner.
- 4.4. A health care entity may request information in addition to the information provided in the uniform credentialing or uniform recredentialing forms. A request for additional information may not require repetition of the information required in, or substitute another form for, the uniform credentialing or uniform recredentialing forms. Additional information shall be requested by the health care entity on supplemental sheets attached to the uniform forms.
- 4.5. When the uniform credentialing form or uniform recredentialing form is amended as provided in Section 5 of this rule, all health care entities shall use the amended uniform forms to credential or recredential health care practitioners.

§64-89-5. Amendment of Uniform Credentialing and Uniform Recredentialing Forms.

- 5.1. The secretary and the commissioner shall reconvene the committee at least annually to review and recommend any necessary amendments to the uniform credentialing form, the uniform recredentialing form or the list of health care practitioners who must use the uniform forms.
- 5.2. The secretary and the commissioner may, upon recommendation by the committee, jointly propose amendments to the uniform credentialing form, the uniform recredentialing form or the list of health care practitioners.

§64-89-6. Confidentiality of Credentialing and Recredentialing Data.

6.1. Any credentials data collected or obtained by a health care entity during the

credentialing or recredentialing process shall constitute confidential peer review information, as provided by W. Va. Code §30-3C-3, and shall not be disclosed by the health care entity except as provided by law.

§64-89-7. Delegation of Credentialing or Recredentialing Activities.

7.1. Nothing in this rule may be construed to prohibit a health care entity from delegating credentialing or recredentialing activities to another entity, such as a certified verification organization, as long as the entity to whom the activities have been delegated follows the requirements of this rule.

§64-89-8. Violation.

- 8.1. Complaints and allegations of violations of this rule may be filed with either the secretary or the commissioner. If the agency to whom the complaint is addressed determines it to be more appropriate for the other agency to process it, then the secretary or the commissioner may refer it to the other agency for processing.
- 8.2. Notwithstanding any penalty provisions set forth in W. Va. Code §§16-1-18 or 33-3-11, any health care entity that violates the provisions of this rule is subject to the following:
- 8.2.a. An award of actual damages established by the health care practitioner, payable to that health care practitioner; and/or
- 8.2.b. An administrative penalty, payable to the either the Department of Health and Human Resources or the Commissioner, whichever receives the complaint or pursues the action, but not both, in an amount of not less than five hundred (500) dollars and not more than five thousand (5,000) dollars.