

11 NCAC 20 .0404 APPLICATION

For all providers who submit applications to be added to a carrier's network on or after October 1, 2001:

- (1) The definitions in G.S. 58-3-167 are incorporated into this Rule by reference. Each carrier that is an insurer and that issues a health benefit plan shall obtain and retain on file each provider's signed and dated application on the form approved by the Commissioner under G.S. 58-3-230. All other carriers shall obtain and retain on file the provider's signed and dated application on a form provided by the carrier. All required information shall be current upon final approval by the carrier. The application shall include, when applicable:
 - (a) The provider's name, address, and telephone number.
 - (b) Practice information, including call coverage.
 - (c) Education, training and work history.
 - (d) The current provider license, registration, or certification, and the names of other states where the applicant is or has been licensed, registered, or certified.
 - (e) Drug Enforcement Agency (DEA) registration number and prescribing restrictions.
 - (f) Specialty board or other certification.
 - (g) Professional and hospital affiliation.
 - (h) The amount of professional liability coverage and any malpractice history.
 - (i) Any disciplinary actions by medical organizations and regulatory agencies.
 - (j) Any felony or misdemeanor convictions.
 - (k) The type of affiliation requested (for example, primary care, consulting specialists, ambulatory care, etc.).
 - (l) A statement of completeness, veracity, and release of information, signed and dated by the applicant.
 - (m) Letters of reference or recommendation or letters of oversight from supervisors, or both.
- (2) The carrier shall obtain and retain on file the following information regarding facility provider credentials, when applicable:
 - (a) Joint Commission on Accreditation of Healthcare Organization's certification or certification from other accrediting agencies.
 - (b) State licensure.
 - (c) Medicare and Medicaid certification.
 - (d) Evidence of current malpractice insurance.
- (3) No credential item listed in Items (1) or (2) of this Rule shall be construed as a substantive threshold or criterion or as a standard for credentials that must be held by any provider in order to be a network provider.

History Note: Authority G.S. 58-2-40(1); 58-2-131; 58-3-167; 58-3-230; 58-65-1; 58-65-25; 58-65-105; 58-67-5; 58-67-10; 58-67-20; 58-67-35; 58-67-65; 58-67-100; 58-67-140; 58-67-150;
Eff. October 1, 1996;
Temporary Amendment Eff. October 1, 2001;
Amended Eff. May 1, 2008; August 1, 2002.