

Senate File 2107 - Introduced

SENATE FILE 2107

BY DOTZLER

(COMPANION TO LSB 5784HH BY
LOFGREN)

A BILL FOR

1 An Act requiring acceptance of universal health care
2 practitioner credentialing application forms by certain
3 credentialing entities.
4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. Section 514F.6, Code 2011, is amended by adding
2 the following new subsection:

3 NEW SUBSECTION. 01. *a.* A health insurer, hospital, or
4 other entity that credentials physicians, advanced registered
5 nurse practitioners, physician assistants, or other health
6 care practitioners, shall accept the Iowa statewide universal
7 practitioner credentialing application forms developed and
8 maintained by the Iowa credentialing coalition when submitted
9 by a physician, advanced registered nurse practitioner,
10 physician assistant, or any other health care practitioner
11 applicant required to be credentialed by the credentialing
12 entity.

13 *b.* A health insurer, hospital, or other credentialing
14 entity is not required to use the Iowa statewide universal
15 practitioner credentialing application forms exclusively, and
16 in accepting the universal application forms as required by
17 this subsection, is not precluded from requesting additional
18 information from the applicant necessary to complete the
19 credentialing process consistent with information required by
20 the credentialing entity's own forms.

21 Sec. 2. Section 514F.6, subsection 1, Code 2011, is amended
22 to read as follows:

23 1. The commissioner shall adopt rules to provide for
24 the retrospective payment of clean claims for covered
25 services provided by a physician, advanced registered nurse
26 practitioner, ~~or~~ physician assistant, or other health care
27 practitioner, during the credentialing period, once the
28 physician, advanced registered nurse practitioner, ~~or~~ physician
29 assistant, or other health care practitioner is credentialed.

30 Sec. 3. Section 514F.6, subsection 2, Code 2011, is amended
31 by striking the subsection and inserting in lieu thereof the
32 following:

33 2. As used in this section, unless the context otherwise
34 requires:

35 *a.* "Advanced registered nurse practitioner" means a licensed

1 nurse who is also registered to practice in an advanced role.

2 *b. "Clean claim"* means the same as defined in section
3 507B.4A, subsection 2, paragraph "b".

4 *c. "Credentialing"* means a process through which a
5 credentialing entity makes a determination based on criteria
6 established by the credentialing entity concerning whether a
7 physician, advanced registered nurse practitioner, physician
8 assistant, or other health care practitioner is eligible to
9 provide health care services to a patient and to receive
10 reimbursement for the health care services provided under
11 an agreement entered into between the physician, advanced
12 registered nurse practitioner, physician assistant, or other
13 health care practitioner, and the credentialing entity.

14 *d. "Credentialing period"* means the time period between
15 the credentialing entity's receipt of a physician's, advanced
16 registered nurse practitioner's, physician assistant's, or
17 other health care practitioner's application for credentialing
18 and approval of that application by the credentialing entity.

19 *e. "Health insurer"* means a carrier, as defined in section
20 513B.2.

21 *f. "Hospital"* means the same as defined in section 135B.1.

22 *g. "Physician"* means a licensed doctor of medicine and
23 surgery or a licensed doctor of osteopathic medicine and
24 surgery.

25 *h. "Physician assistant"* means a person who is licensed to
26 practice as a physician assistant under the supervision of one
27 or more physicians.

28 EXPLANATION

29 This bill amends Code section 514F.6 to require a health
30 insurer, hospital, or other entity that credentials physicians,
31 advanced registered nurse practitioners, physician assistants,
32 or other health care practitioners to accept the Iowa
33 statewide universal practitioner credentialing application
34 forms developed and maintained by the Iowa credentialing
35 coalition. A credentialing entity is not required to use the

1 universal credentialing forms exclusively and can request
2 additional information from applicants necessary to complete
3 the credentialing process consistent with information required
4 by the credentialing entity's own forms.

5 The bill also changes the definition of "credentialing"
6 to include a process utilized by any entity, not just health
7 insurers, that credentials physicians, advanced registered
8 nurse practitioners, physician assistants, or other health
9 care practitioners. Corresponding changes are made in other
10 definitions. "Credentialing" is now defined as a process
11 through which a credentialing entity makes a determination
12 based on criteria established by the credentialing entity
13 concerning whether a physician, advanced registered nurse
14 practitioner, physician assistant, or other health care
15 practitioner is eligible to provide health care services to
16 a patient and to receive reimbursement for the health care
17 services provided under an agreement entered into between
18 the physician, advanced registered nurse practitioner,
19 physician assistant, or other health care practitioner, and the
20 credentialing entity.

21 The bill also adds definitions of "health insurer" and
22 "hospital" and reorganizes all the definitions in the Code
23 section so that they are in alphabetical order.