6.6.8816 VERIFICATION OF PROVIDER CREDENTIALS

(1) Each health carrier shall establish and describe in its access plan the criteria utilized to review the credentials of the providers in its network. A health carrier must require a provider's credentials to be reviewed prior to the health carrier employing or entering into contractual relationship with a provider and a provider's credentials are to be reverified at least every 3 years thereafter.

Authorizing statute(s): 33-36-105, MCA

Implementing statute(s): 33-36-105, 33-36-201, MCA

History: NEW, 1999 MAR p. 2052, Eff. 9/24/99; TRANS, from 37.108.216, 2023 MAR p. 1401, Eff. 10/21/23.