HOUSE BILL NO. 5344

November 14, 2023, Introduced by Reps. Brabec, Arbit, Coffia, Mentzer, Rheingans, Tsernoglou, Conlin, Martus, MacDonell, Steckloff, Price, Dievendorf, Edwards, Byrnes, Miller, Hope and Aiyash and referred to the Committee on Health Policy.

A bill to amend 1980 PA 350, entitled "The nonprofit health care corporation reform act," (MCL 550.1101 to 550.1704) by adding section 414c.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- Sec. 414c. (1) Subject to subsection (2), a health care corporation shall do all of the following:
- 3 (a) Assess and verify the qualifications of a mental health or 4 substance use disorder provider applying to become a participating
- 5 provider within 60 calendar days of receipt of a complete

- 1 credentialing application and issue a decision in writing to the
- 2 applicant approving or denying the credentialing application not
- 3 later than 60 calendar days after receiving the complete
- 4 credentialing application.
- 5 (b) Within 10 business days after receipt of an incomplete
- 6 credentialing application, send a written notification, via United
- 7 States certified mail, to the applicant requesting any information
- 8 or supporting documentation that the health care corporation
- 9 requires to approve or deny the credentialing application. The
- 10 notice to the applicant must include a full and detailed
- 11 description of all the information or supporting documentation
- 12 required to make the application complete and the name, address,
- 13 and telephone number of a person who serves as the applicant's
- 14 point of contact for completing the credentialing application
- 15 process. Any information required under this section must be
- 16 reasonably related to the information in the application. As used
- 17 in this subdivision, "business day" means a day other than a
- 18 Saturday, a Sunday, or any legal holiday.
- 19 (c) Not later than the 60 calendar days described in
- 20 subdivision (a) or the additional 15 days described in subsection
- 21 (2), load into the health care corporation's provider payment
- 22 system all provider information for an approved mental health or
- 23 substance use disorder provider, including all information needed
- 24 to correctly reimburse a newly approved mental health or substance
- 25 use disorder provider according to the provider's contract. The
- 26 health care corporation shall add the approved provider's data to
- 27 the provider directory upon loading the provider's information into
- 28 the health care corporation's provider payment system.
- 29 (2) A health care corporation may extend the credentialing

- 1 period to assess and issue a determination by an additional 15
- 2 calendar days if, upon review of a complete application, it is
- 3 determined that the circumstance presented, including an admission
- 4 of sanctions by the state licensing board, investigation or felony
- 5 conviction, or revocation of clinical privileges, requires
- 6 additional consideration.
- 7 (3) A health care corporation shall reimburse a mental health
- 8 or substance use disorder provider whose credentialing application
- 9 has not yet been approved or denied for covered mental health or
- 10 substance use disorder services for any claims from the provider
- 11 that the health care corporation receives with a date of service
- 12 more than 60 calendar days after the date on which the health care
- 13 corporation received a complete credentialing application, or 45
- 14 calendar days if the conditions described in subsection (2) are
- 15 met, if:
- 16 (a) The provider has submitted a complete credentialing
- 17 application and any supporting documentation that the health care
- 18 corporation has requested in writing within the time frame
- 19 established in subsection (2).
- 20 (b) The provider has no past or current license sanctions or
- 21 limitations, as reported by the pertinent state licensing and
- 22 regulatory agency, or by a similar out-of-state licensing and
- 23 regulatory entity for a provider licensed in another state.
- 24 (c) The provider has professional liability insurance.
- 25 (d) The health care corporation has failed to approve or deny
- 26 the applicant's complete credentialing application within the time
- 27 frames established by subsection (1)(a) or (2).
- 28 (4) A mental health or substance use disorder provider
- 29 eligible for reimbursement under subsection (3) who, at the time

- 1 services were rendered, was not employed by a practice or group
- 2 that has contracted with the health care corporation to provide
- 3 services at specified rates of reimbursement must be paid by the
- 4 health care corporation at the health care corporation's standard
- 5 in-network reimbursement rate for mental health or substance use
- 6 disorder providers of the same licensure. If the health care
- 7 corporation does not have a standard in-network reimbursement rate
- 8 for the mental health or substance use disorder providers, the
- 9 reimbursement rate paid must be the median reimbursement rate the
- 10 health care corporation pays to mental health or substance use
- 11 disorder providers of the same licensure.
- 12 (5) A mental health or substance use disorder provider
- 13 eligible for reimbursement under subsection (3) who, at the time
- 14 services were rendered, was employed by a practice or group that
- 15 has contracted with the health care corporation to provide services
- 16 at specified rates of reimbursement must be paid by the health care
- 17 corporation in accordance with the terms of that contract for
- 18 providers of the same licensure. If providers of the same licensure
- 19 are already employed by the practice or group that has contracted
- 20 with the health care corporation, the reimbursement rate paid must
- 21 be the median reimbursement rate the health care corporation pays
- 22 to mental health or substance use disorder providers of the same
- 23 licensure.
- 24 (6) If a health care corporation approves the credentialing
- 25 application of a mental health or substance use disorder provider
- 26 within the time frames specified in subsection (1)(a) or (2), the
- 27 health care corporation shall immediately reimburse the provider
- 28 for claims submitted after the date of approval at the
- 29 reimbursement rate specified in the terms and conditions of the

- 1 contract between the health care corporation and the provider.
- 2 (7) This section applies equally to initial credentialing
- 3 applications and applications for recredentialing.
- 4 (8) As used in this section, "mental health or substance use
- 5 disorder provider" means any of the following:
- 6 (a) A physician licensed under part 170 or 175 of the public
- 7 health code, 1978 PA 368, MCL 333.17001 to 333.17097 and 333.17501
- 8 to 333.17556, who specializes in psychiatry, addiction medicine, or
- 9 any subspecialty of psychiatry or addiction medicine.
- 10 (b) A psychologist licensed under part 182 of the public
- 11 health code, 1978 PA 368, MCL 333.18201 to 333.18237.
- 12 (c) A licensed bachelor's social worker or licensed master's
- 13 social worker licensed under part 185 of the public health code,
- 14 1978 PA 368, MCL 333.18501 to 333.18518.
- 15 (d) A marriage and family therapist licensed under part 169 of
- 16 the public health code, 1978 PA 368, MCL 333.16901 to 333.16915.
- 17 (e) A licensed professional counselor or limited licensed
- 18 counselor licensed under part 181 of the public health code, 1978
- 19 PA 368, MCL 333.18101 to 333.18117.
- 20 (f) A behavior analyst or assistant behavior analyst licensed
- 21 under part 182A of the public health code, 1978 PA 368, MCL
- 22 333.18251 to 333.18267.
- 23 Enacting section 1. This amendatory act does not take effect
- 24 unless Senate Bill No. or House Bill No. 5343 (request no.
- 25 02614'23) of the 102nd Legislature is enacted into law.