

APPENDIX E
ORGANIZATIONAL PROVIDER PARTICIPATION CRITERIA

INDEPENDENT (NON-HOSPITAL OWNED AND OPERATED) SLEEP DISORDERS CENTERS

In order to be considered for membership in the Priority Health network and to be allowed continued participation, a Sleep Disorders Center must provide proof that it satisfies the following listed criteria.

1. Accreditation by the American Academy of Sleep Medicine for Sleep Disorders Centers.
2. Good standing with state and federal regulatory bodies, as applicable.
3. Good standing under the Medicare and Medicaid programs, as applicable.
4. Current professional liability insurance coverage with minimum limits of \$100,000 per occurrence and \$300,000 aggregate.
5. An absence of a history of involvement in a malpractice suit, arbitration, or settlement; or, in the case of an organizational provider with such a history, evidence must be provided that the history of malpractice involvement is not predictive of probable future substandard professional performance which could include a corrective action plan.
6. An absence of a history of denial or cancellation of professional liability insurance; or, in the case of an organizational provider with such a history, evidence must be provided that the history is not indicative of probable future substandard professional performance.
7. An absence of a history of (in the sole discretion of Priority Health) a tendency toward inappropriate utilization of medical resources.
8. An absence of any history, in addition to that specified in other Criteria, that in any way is indicative of probable future substandard professional performance.
9. Compliance with all Priority Health rules, regulations, bylaws, and the terms of its participation agreement.
10. Demonstration of its willingness to provide appropriate and necessary emergency or nonemergency medical treatment within the scope of its services to any patient seeking treatment, regardless of the patient's ability to pay.
11. Organizational providers shall not be known to have made any misrepresentation to Priority Health's Board of Directors, employees, agents, or enrollees regarding the provision of services to enrollees.
12. Organizational provider shall not have falsified information on their applications, provided inaccurate information on their applications, failed to respond to requests for additional information or failed to notify the Credentialing Committee regarding relevant changes in their status. Any application not meeting this criteria will be considered incomplete, made inactive and will not be processed.
13. Organizational provider shall agree to accept assignment of responsibility for credentialing and recredentialing all physicians, nurse midwives, physician assistants, nurse practitioners, and other licensed professionals whom organizational provider directly employs or contracts with per the organizational provider's credentialing and recredentialing policy.
14. Organizational provider must participate with all Priority Health products.