

WAC 296-20-01040 Health care provider network continuing requirements. To continue to provide care for workers and be paid for those services, a provider must:

- (1) Provide services without unlawful discrimination;
- (2) Provide services and bill according to federal and state laws and rules, department rules, policies, and billing instructions;
- (3) Maintain material compliance with minimum provider network standards, department credentialing and recredentialing standards, and department's evidence-based coverage decisions and treatment guidelines, policies; and must follow other national treatment guidelines appropriate for their patient;
- (4) Inform the department or an applicable delegated credentialing entity of any material changes to the provider's application or agreement within fourteen calendar days including, but not limited to, changes in:
 - (a) Ownership or business name;
 - (b) Address or telephone number;
 - (c) Professionals practicing under the billing provider number;
 - (d) Any informal or formal disciplinary order, decision, disciplinary action or other action(s), including any criminal action, in any state;
 - (e) Provider clinical privileges;
 - (f) Malpractice claims or professional liability coverage;
- (5) Retain a current professional state license, registration, certification and/or applicable business license for the service being provided, and update the department of all changes;
- (6) Comply with department recredentialing process; and
- (7) Comply with the instructions contained in a department action, including documentation of compliance and participation in mentoring, monitoring, or restrictions.

[Statutory Authority: RCW 51.36.010, 51.04.020, and 51.04.030. WSR 12-02-058, § 296-20-01040, filed 1/3/12, effective 2/3/12.]