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.]