

HealthPartners Credentialing Plan

January 2024

CREREDENTIALING PLAN

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INTRODUCTION

HealthPartners is committed to providing its members with high quality health care. This commitment is achieved in part by establishing and maintaining a credentialing system to assure the selection and maintenance of a network of highly qualified and competent professionals. Such a system includes developing specific, objective criteria intended to reflect professional competency and ascertaining whether or not individual health care professionals meet the criteria.

Credentials, as referred to in this document, are records of an individual's education, training, certifications, licensures, experience, and other professional qualifications. Credentialing is defined as the process of collection, verification, review and evaluation of an individual's credentials.

This Credentialing Plan will be reviewed at least annually by the HealthPartners Credentials Committee, the HealthPartners Chief Medical Officer and the Quality Review Committee. On an annual basis the Credentialing Plan shall be reviewed and approved by the HealthPartners Board of Directors or a designated Board committee.

The credentialing system incorporates three functions. Initial credentialing involves the evaluation of an individual's application for participation as a HealthPartners practitioner. Recredentialing assesses practitioners' qualifications for continued participation with HealthPartners. On-going monitoring includes the continuous monitoring of license actions, Medicare/Medicaid exclusions, as well as member complaint information.

PURPOSE

The purpose of the Credentialing Program is to support a systematic approach to credentialing within HealthPartners. A Credentialing Program includes having in place a written Credentialing Plan, documenting compliance with the Plan, assigning specific credentialing responsibilities to administrative and professional staff, and establishing a mechanism for the periodic review and revision of the Plan. The purpose of the Credentialing Plan is to provide general guidance for the decision-making surrounding acceptance or continued participation of professional staff who are initially seeking association with HealthPartners, who are seeking approval of on-going association, or for whom there is reason to conduct a special review. Specific objectives of the Plan include:

- Setting forth the minimum requirements that must be met for participation as a HealthPartners practitioner and, for those individuals meeting the minimum requirements, the criteria to be used in assessing the qualifications of applicants seeking initial or on-going association with HealthPartners;
- Establishing the processes for verification and evaluation of a practitioner's credentials;
- Establishing the processes for action if a practitioner's credentials do not meet the established criteria.

Unless there are clear and convincing reasons to depart from these guidelines, HealthPartners' Credentials Committee, Quality Review Committee, and staff are expected to adhere to these guidelines.

Nothing contained in the Credentialing Plan shall limit HealthPartners' discretion in accepting, restricting, disciplining, or terminating a practitioner's association with HealthPartners. The Plan may be changed at any time at HealthPartners' sole discretion. Such changes shall be effective on the date of the change for new applicants and existing practitioners.

AUTHORITY

HealthPartners' Board of Directors has final authority and responsibility for the adoption of a Credentialing Plan. On an annual basis the Board shall review and approve the Plan. The Board delegates its responsibility for oversight and administration of the Credentialing Plan to the HealthPartners Chief Medical Officer. In addition to the Credentialing Plan, credentialing staff has in place written policies and

procedures that support implementation of the Credentialing Program. Such policies and procedures are reviewed and approved by the HealthPartners Credentials Committee and Quality Review Committee.

SCOPE OF PLAN

The terms of this Credentialing Plan apply to all individuals who are applying for initial or on-going participation as HealthPartners health plan practitioners. This includes practitioners who either are parties to a HealthPartners Provider contract or are employed by a party with whom HealthPartners has a Provider contract.

The Credentialing Plan covers the following practitioner types:

Allied health professionals, which include nurse midwives, traditional midwives, nurse practitioners, chiropractors, optometrists, physician assistants, psychologists, licensed marriage and family therapists, substance use disorder professionals, licensed independent clinical social workers, licensed professional counselors, board certified behavioral analysts (in states in which BCBA's are licensed), clinical nurse specialists, and medication therapy management (MTM) pharmacists.

Dental practitioners, which include all dentists in a general or specialty practice, dental therapists, and advanced dental therapists.

Primary care practitioners, which include licensed physicians who practice in one of the following medical specialties: family practice, general internal medicine, or pediatrics.

Specialty care practitioners, which include licensed physicians whose practices include but are not limited to one of the following medical or surgical specialties: anesthesiology (pain medicine), subspecialty internal medicine, general or subspecialty surgery, allergy and immunology, dermatology, obstetrics and gynecology, ophthalmology, orthopedics, otolaryngology, podiatry, psychiatry and neurology.

Exceptions to the credentialing process are allowed for practitioners in the following four categories:

1. Practitioners who practice exclusively within an inpatient setting and who provide care or treatment to HealthPartners members only because members receive services from such a hospital, or other inpatient setting. This exception includes practitioners with a specialty type of: anesthesiology, critical care medicine, hospitalist, emergency medicine, inpatient mental health, neonatology, pathology, and radiology.

This exception does not apply to practitioners who are being hired by or who are currently employed by one of HealthPartners related entities and fall under one of the categories above. All such practitioners fall under the scope of the Plan and will be subject to the credentialing process.

2. Practitioners who are not participants in the HealthPartners network to whom limited referrals may be made on a case-by-case basis by participating practitioners or HealthPartners. Such referrals are considered to be out-of-network.
3. Practitioners with whom HealthPartners contracts solely pursuant to its obligation as an administrative services organization ("ASO") to a health plan not underwritten by HealthPartners unless HealthPartners expressly assumes credentialing obligations on behalf of such plan.
4. Locum Tenens practitioners, i.e., practitioners who are filling in temporarily. This exception applies only to locum tenens practitioners who are covering on a short-term basis in an urgent situation (e.g., covering for a practitioner who has an unexpected family or medical leave). Locum tenens status is limited to a cumulative lifetime total of three months' work anywhere in the HealthPartners network. In connection with a state or national emergency, the limit on locum tenens status may be extended to a cumulative lifetime total of six months, if determined

necessary by the chair or vice-chair of the Quality Review Committee. Practitioners who have exhausted their locum tenens eligibility may not practice in the HealthPartners network (other than in the situations described in number 1 above) without first being credentialed. Verification of a valid license in each state where the practitioner will see HealthPartners members and a check for exclusions from state and federal programs will be completed prior to the practitioner seeing HealthPartners members.

Practitioners identified in any of the above categories are beyond the scope of the Credentialing Plan.

Credentialing

To assist with the administration of the processes set forth in the Credentialing Plan a multidisciplinary Credentials Committee has been established by the HealthPartners Chief Medical Officer. The committee is responsible for assuring that each practitioner granted association with HealthPartners possesses the qualifications necessary to deliver quality care to members. The Credentials Committee reports to the Quality Review Committee and any recommendations for denial, termination, or restriction of a practitioner's participation are forwarded to the Quality Review Committee for decision.

The composition, frequency of meetings, membership, and responsibilities of the committees are as follows:

- **Credentials Committee:** This committee is composed of no fewer than eight (8) voting members who can adequately represent the health care specialties to be reviewed. The committee shall meet on a monthly basis. The committee's chair and membership shall be appointed by the HealthPartners' Chief Medical Officer. The Credentials Committee is responsible for the review and evaluation of the credentials of individuals applying for new or on-going participation as HealthPartners practitioners and at any time that concerns arise regarding an individual participating practitioner's credentials and/or practice. [See also: Policy CR 2 Credentials Committee Selection and Policy CR 13 Credentialing Decisions.]
- **Quality Review Committee:** This committee reports to the HealthPartners Quality Council. The HealthPartners Chief Medical Officer is responsible for chairing the Quality Review Committee (QRC) and appointing its members. Members consist of health plan associate medical directors and a community physician. The QRC is responsible for providing direction to the health plan's credentialing and peer review processes; for ensuring health plan practitioners and providers are qualified to provide high quality care to health plan members; and for ensuring the credentialing and quality improvement programs comply with accreditation and state and federal regulatory requirements.

These committees are responsible for the credentialing and recredentialing of dental, primary care, specialty care and allied health practitioners.

Immediate Restriction, Suspension or Termination

The HealthPartners Chief Medical Officer or his/her designee has the authority to immediately restrict, suspend, or terminate the participation status of a practitioner to prevent the threat of imminent danger to the health of any individual. Such immediate restriction, suspension or termination shall not initially exceed fourteen days pending the outcome of an investigation to determine the need for a professional review action. The HealthPartners Chief Medical Officer shall make a good faith effort to consult with the Credentials Committee Chair and/or select HealthPartners Quality Review Committee representatives prior to taking such action. Any immediate restriction, suspension, or termination exceeding fourteen days requires notice to the affected practitioner of the appeals process and right to a hearing. [See also: Policy CR 16 Ongoing Monitoring.]

Delegated Credentialing

The HealthPartners Quality Review Committee may authorize delegated credentialing responsibility and authority to designated group practices or entities where the following conditions are met:

1. The group practice or entity agrees to provide to HealthPartners for review a copy of its Credentialing Plan and/or policies, including documentation of the professional criteria to be

evaluated in the credentialing processes and mechanisms for their verification and review. The criteria and processes must be deemed substantially equivalent to those established by HealthPartners.

2. There is a written agreement that states the scope of delegated activities and delegate's accountabilities to HealthPartners.
3. The group practice or entity agrees to provide HealthPartners with any modifications to its Credentialing Plan and/or policies.
4. The group practice or entity agrees to cooperate with HealthPartners' examination of the Group's credentialing and recredentialing processes at least annually.
5. The group practice or entity agrees to provide HealthPartners with timely updates concerning additions, changes and terminations of its practitioners.

A list of group practices and other organizations or entities to which credentialing responsibility and authority have been delegated is maintained by HealthPartners' credentialing staff. Attached to this Plan is Appendix 2, which is a current list of delegates. [See also: Policy CR 9 Delegation of Credentialing or Recredentialing Activities Health Care Organizations.]

CREDENTIALING PROCESS

Initial Credentialing, Recredentialing and Special Review

Initial credentialing is performed on all practitioners (except those specifically excluded under Scope of Plan) who are beginning a relationship with HealthPartners and who meet the minimum requirements to apply for participation with HealthPartners as outlined in Appendix A. [See also: Policy CR 1 Credentialing Information Collections, and Verification for Initial Credentialing.]

Recredentialing of practitioners is completed at least every thirty-six (36) months. Recredentialing may occur more often if the Quality Review Committee, Credentials Committee, or Credentialing Services Bureau determines that more frequent recredentialing is appropriate. The specific criteria established for each type of practitioner are included in Appendix A. [See also: CR 10 Recredentialing Information Collection and Verification.]

Currently credentialed practitioners who are not due for recredentialing will be subject to special review when the Credentialing Services Bureau becomes aware of licensing or other disciplinary actions, media or other reports concerning unethical or criminal behavior, investigations by the HealthPartners Special Investigations Unit related to findings of fraud, waste and abuse, member complaints leading to a finding of concerns about quality of care, or any other information that indicates the practitioner may not be able to provide safe and appropriate care to HealthPartners members. Once necessary information has been gathered, special review will occur at the next meeting of the Credentials Committee.

The Credentials Committee or medical director may accept the initial and recredentialing applications of practitioners who meet all established criteria as defined in HealthPartners credentialing policies and procedures. Credentials Committee review and discussion is required for any practitioners who have an identified variance from established criteria or who are subject to special review. Recommendations by the Credentials Committee to deny, restrict, or terminate participation are communicated in writing to the HealthPartners Quality Review Committee, which votes to accept or reject the recommendation of the Credentials Committee. [See also: Policy CR 13 Credentials Committee Decisions.]

The Quality Review Committee makes the final decision regarding denial, termination, or restriction of a practitioner's or provider's participation in the HealthPartners network based on the recommendations of the HealthPartners Credentials Committee or its own evaluation of information from other sources.

All credentialing decisions will be based on HealthPartners professional criteria for acceptance. HealthPartners does not make credentialing decisions based on an applicant's race, ethnic/national

identity, gender, age, sexual orientation, the types of procedures a practitioner performs, or the types of patients a practitioner sees.

Confidentiality

Non-public information collected during the credentialing process is considered confidential. Access to credentialing information is limited to authorized individuals and is accessible to the applicant except for the information protected by Minn. Stat. §§ 145.61–145.67. Individual practitioner credentialing files are kept in a secure location within the HealthPartners Credentialing Services Bureau.

Termination of Practitioners

The Quality Review Committee (QRC) may decide to deny or terminate the participation status of any practitioner. The QRC may rely upon any of the following as a basis for denial or termination.

1. A determination, based upon failure to meet one or more of the HealthPartners Professional Criteria for Acceptance or any other information available to the QRC, that the practitioner has not adequately demonstrated that he or she would provide safe, high-quality care to all HealthPartners members.
2. The practitioner has engaged in uncooperative, unprofessional, or abusive behavior towards one or more HealthPartners members, HealthPartners employees, or members of the Credentials Committee, Quality Review Committee, or Board of Directors.

Termination by HealthPartners Credentialing Staff

HealthPartners Credentialing staff may terminate the credentialing process for a practitioner who has not returned required credentialing information that is necessary to process their application for participation. Credentialing staff may administratively terminate a practitioner who has not returned required recredentialing information that is necessary to process their application for continued participation or information that is required for special review. Credentialing staff may also administratively terminate a practitioner if a clinic with which the practitioner is associated has placed the practitioner on a leave of absence that exceeds 12 months.

Credentialing staff shall immediately terminate a practitioner upon notice that the practitioner's license has been revoked or suspended, that the practitioner has been excluded or precluded from federal or state government programs, or that the practitioner fails to meet the minimum requirements of HealthPartners' Professional Criteria for Acceptance.

Applications from practitioners seeking to participate with HealthPartners will not be processed if the practitioner is currently excluded or precluded from federal or state government programs, or if the practitioner fails to meet the minimum requirements of HealthPartners' Professional Criteria for Acceptance.

Reporting Obligation

See Policy CR 13 Credentials Committee Decisions

APPEALS

Right to Appeal

If a determination is made by the HealthPartners Quality Review Committee to deny or restrict a practitioner's participation request; or to suspend, restrict or revoke a participating practitioner's status, the practitioner is provided with a written explanation of the rationale for the Quality Review Committee's decision and a description of the appeal rights available to him/her. The practitioner is afforded the opportunity to review the information submitted in support of their application unless prohibited by law. During the time an individual's appeal for initial participation is being considered (s)he may not provide care or treatment to HealthPartners members. During the time an individual's appeal for continued participation is being considered (s)he may provide care or treatment to HealthPartners members if there is reasonable belief that there is no significant potential for patient harm.

In addition to restrictive actions or denials imposed by the Quality Review Committee, any immediate restriction, suspension or termination of a practitioner's participating status by the HealthPartners Chief Medical Officer or his/her designee which exceeds fourteen days shall include notification to the practitioner of his/her right to an appeal. An individual may not appeal such a decision if the restriction, suspension, or termination does not exceed fourteen days during which time an investigation is being conducted to determine the need for further action.

Reconsideration Process

If a practitioner's participation request has been denied or restricted or a participating practitioner's participation status has been restricted, suspended, revoked, or terminated, credentialing staff will notify the practitioner of the decision by certified mail. The practitioner may request reconsideration of the determination to the HealthPartners Quality Review Committee. A request for reconsideration must be in writing and received by the Credentialing Services Bureau within 30 days of the practitioner's or clinic's receipt of the notice. Failure to submit a written request for reconsideration within this 30-day period will be deemed a waiver of the practitioner's right to appeal. Such request for reconsideration must address the issues identified by the Quality Review Committee through the provision of additional information and copies of appropriate supporting documentation.

Upon receipt of a request for reconsideration, the Quality Review Committee reviews all new information, including the supporting documentation submitted by the practitioner, and then votes to overturn or uphold the original determination. The decision of the Quality Review Committee is communicated in writing to the practitioner within 14 days of the decision.

If the Quality Review Committee upholds its original decision, the practitioner must be given information concerning his/her right to a hearing and a summary of the rights in the hearing. This process is described below.

Hearing Process

Within 30 days of receipt of notification of the Quality Review Committee adverse decision regarding practitioner's request for reconsideration, the practitioner has the right to request a hearing before an Appeals Committee. If a hearing is requested within the 30 days, the applicant must be given written notice setting forth the following:

1. Date, time and place of the hearing. The hearing date will not be less than thirty (30) days from the date the practitioner receives the hearing notice unless a shorter period is mutually agreed to by the parties.
2. A list of witnesses (if any) expected to testify at the hearing on behalf of HealthPartners.
3. The practitioner's right to representation by an attorney or other person of the applicant's choice.
4. The practitioner's right to have a record made of the proceedings by a court reporter.
5. The practitioner's right to call, examine, and cross-examine witnesses.
6. The practitioner's right to present evidence determined to be relevant by the hearing committee, regardless of its admissibility in a court of law.
7. The practitioner's right to submit a written statement at the close of the hearing.
8. That the practitioner's right to the hearing may be forfeited if the applicant fails, without good cause, to appear.

Appeals Committee

An Appeals Committee shall be an ad hoc committee composed of individuals jointly selected by Credentialing Staff and the Chair or Vice-Chair of the Quality Review Committee. One (1) member shall be a consumer member of the HealthPartners' Board of Directors, and one (1) member shall be a

HealthPartners medical director or Chief Medical Officer. A majority of the Appeals Committee members shall be peers of the affected practitioner and shall not be in direct economic competition with the practitioner. Members of the Appeals Committee, other than the required consumer member of the HealthPartners' Board of Directors, may be network practitioners, members of HealthPartners' Medical Board of Governors or HealthPartners' Technology Assessment Committee, or may be out of network practitioners recommended by the medical or dental director. After listening to and reviewing all evidence, the Committee shall meet and privately discuss the evidence presented for the purpose of making a final determination. The Committee may vote to uphold, reject, or modify the decision of the Quality Review Committee. Decisions will be communicated in writing to the practitioner within 30 days of the decision. Such decisions are final.

HealthPartners Credentialing Plan

Appendix A

Professional Criteria for Acceptance

**PHYSICIANS
PROFESSIONAL CRITERIA FOR ACCEPTANCE**

Physicians must meet the minimum requirements listed below to apply for participation or continued participation with HealthPartners. Participating practitioners who no longer meet these requirements will be terminated from the network and are not eligible to appeal.

1. Be a graduate of an accredited medical or osteopathic school located in the United States, its territories, or Canada, or be a graduate of a medical school approved by the state licensing board.
2. Have a valid, current professional healthcare license – license cannot be suspended or subject to an order to cease or suspend practice - in each state where the practitioner will see HealthPartners members.

Exceptions:

- a) When the state licensing board does not require a license specific to that state because the person is a commissioned medical officer of, a member of, or employed by, the armed forces of the United States, the United States Public Health Service, the Veterans Administration, any federal institution or any federal agency while engaged in the performance of official duties within the state, and the person is licensed in at least one other U.S. state.
 - b) When the state licensing board does not require a license specific to that state in connection with a state or national emergency.
 - c) If the practitioner is providing telemedicine services and is not licensed in the state where members reside, the physician must be licensed in the state from which the telemedicine services are provided and have a telemedicine registration in the state where members reside.
 - d) If the practitioner is authorized by a legally recognized interstate practice compact to provide care in that state
3. Have current professional liability insurance coverage that meets contractually established minimum limits. Exception: those practitioners covered by a State Tort Claims Act or Federal Tort Claims Act through employment by the state or federal government or a Federally Qualified Health Center.
 4. Complete a credentialing application and all associated documents as required by HealthPartners, Inc.
 5. Attest to the lack of present illegal drug use.
 6. Not be currently restricted from receiving payments from any Federal program, including, but not limited to Medicare, MN Medicaid, or third party programs. Exclusion from other state Medicaid programs will be considered failure to meet a credentialing criterion and will be reviewed by the Credentials Committee.

Applicants who meet all the criteria for participation listed below may be approved for participation without review by the Credentials Committee. The Credentials Committee may accept non-compliance with one or more of the criteria if the Committee determines that the non-compliance does not indicate a potential or existing administrative or performance issue. If a participating practitioner becomes non-compliant with one or more of the following criteria after initial credentialing or recredentialing, the practitioner's credentials may be brought to the Credentials Committee for further review.

The criteria for participation include, but are not limited to:

1. Have successfully completed an accredited residency program in the specialty in which (s)he is seeking participation status. This criterion may be waived if the practitioner is Board Certified in the specialty in which he or she is practicing without being required to complete a residency program.
2. Have a valid current Drug Enforcement Agency (DEA) registration for every state in which care will be provided to members unless there is evidence that the practitioner does not require DEA registration to deliver appropriate care within his or her scope of practice.
3. Be Board Certified or actively pursuing Board Certification by the American Board of Medical Specialties, American Osteopathic Association, Royal College of Physicians and Surgeons of Canada or College of Family Physicians of Canada in the specialty or sub-specialty (if applicable) in which (s)he practices.
4. Not have had a professional healthcare license, DEA registration, clinical practice, or staff privileges that have been denied, terminated, stipulated, restricted, refused, limited, suspended, revoked, not renewed, or subject to corrective action by a peer review organization, medical review board, licensing board, hospital, clinic, managed health care plan, military agency, government agency, other administrative body or health related agency or organization.

If any of the above past denials, terminations, stipulations, restrictions, refusals, limitations, suspensions, revocations, corrective actions, or non-renewals apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with all corrective actions and monitoring plans imposed by the limiting/restricting authority. If any present restrictions apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with any corrective action/monitoring plan imposed by the limiting/restricting authority and be willing to provide periodic updates to HealthPartners concerning such compliance.

5. Not have a work history gap or pattern of resignations or terminations of employment/association as a medical practitioner which may suggest potential competency or quality of care problems.
6. Not have a history of conduct that may violate state law or standards of ethical conduct governing the practice of medicine.
7. Not have pending charges or be currently charged with, or convicted of a felony, or misdemeanor.
8. Not have a physical or mental condition that may prevent the practitioner from being able, with or without reasonable accommodation, to perform the essential functions of his or her practice with acceptable skill and without posing a health or safety risk to patients.
9. Not have used alcohol or chemical substance(s), including prescription medications, in a way that may have impaired or limited the practitioner's ability to practice medicine with reasonable skill and safety.
10. Not have engaged in any illegal use of controlled substances including use of illegal controlled substances (e.g. heroin, cocaine) or illegal use of legal controlled substances.
11. Not have a history of malpractice claim activity or other incidents that suggests a potential competency or quality of care problem.
12. Not be involved in a practice that may be regarded by the medical community as medically unsound or otherwise inappropriate.

13. Agree with the practice of medicine in a managed care environment and be willing to cooperate with HealthPartners' administrative procedures and other matters.
14. Not have misrepresented, misstated, or omitted a relevant or material fact in credentialing documents.
15. Not have been found liable, guilty or otherwise responsible for sexual harassment, sexual assault, stalking, and/or other domestic assault or any other charge or claim involving sexually inappropriate behavior.
16. Conduct him or herself in a professional manner by not engaging in unprofessional conduct. Unprofessional conduct is defined as conduct that creates a hostile work environment, is detrimental to the delivery of quality care, or has the potential to adversely affect the health or welfare of patients or staff. Unprofessional conduct may include, but is not limited to, behaviors such as:
 - Verbal attacks leveled at staff which are personal, irrelevant or go beyond the bounds of fair professional comment
 - Impertinent or inappropriate comments or illustrations
 - Conduct or treatment that is disrespectful, abusive, intimidating or insulting
17. Not have practiced without a professional healthcare license or with a lapsed professional healthcare license.

**URGENT CARE PRACTITIONERS
MOONLIGHTING RESIDENTS
PROFESSIONAL CRITERIA FOR ACCEPTANCE**

Urgent care practitioners are defined as residents, fellows, or other physicians who are employed to work urgent care. Urgent care practitioners provide short-term, episodic care for acute conditions and do not provide scheduled follow-up care when the primary care clinic is available.

Moonlighting residents are defined as residents who are practicing outside their residency program in an urgent care clinic or other clinic site.

In order to be accepted as an Urgent Care practitioner or Moonlighting Resident with HealthPartners, the following professional credentials are considered to be minimum requirements.

Physicians must meet the minimum requirements listed below to apply for participation or continued participation with HealthPartners as an urgent care physician or moonlighting resident. Participating practitioners who no longer meet these requirements will be terminated from the network and are not eligible to appeal.

1. Be a graduate of an accredited medical or osteopathic school located in the United States, its territories, or Canada, or be a graduate of a medical school approved by the state licensing board.
2. Have successfully completed at least one year of post-medical school training in an accredited internship/residency program.
3. Have a valid, current professional healthcare license – license cannot be suspended or subject to an order to cease or suspend practice - in each state where the practitioner will see HealthPartners members.

Exception:

- a) When the state licensing board does not require a license specific to that state because the person is a commissioned medical officer of, a member of, or employed by, the armed forces of the United States, the United States Public Health Service, the Veterans Administration, any federal institution or any federal agency while engaged in the performance of official duties within the state, and the person is licensed in at least one other U.S. state.
 - b) When the state licensing board does not require a license specific to that state in connection with a state or national emergency.
 - c) If the practitioner is providing telemedicine services and is not licensed in the state where members reside, the physician must be licensed in the state from which the telemedicine services are provided and have a telemedicine registration in the state where members reside.
 - d) If the practitioner is authorized by a legally recognized interstate practice compact to provide care in that state
4. Have current professional liability insurance coverage that meets contractually established minimum limits. Exception: those practitioners covered by a State Tort Claims Act or Federal Tort Claims Act through employment by the state or federal government or a Federally Qualified Health Center.
 5. Complete a credentialing application and all associated documents as required by HealthPartners, Inc.
 6. Attest to the lack of present illegal drug use.

7. Not be currently restricted from receiving payments from any Federal program, including, but not limited to Medicare, MN Medicaid, or third party programs. Exclusion from other state Medicaid programs will be considered failure to meet a credentialing criterion and will be reviewed by the Credentials Committee.

Applicants who meet all the criteria for participation listed below may be approved for participation without review by the Credentials Committee. The Credentials Committee may accept non-compliance with one or more of the criteria if the Committee determines that the non-compliance does not indicate a potential or existing administrative or performance issue. If a participating practitioner becomes non-compliant with one or more of the following criteria after initial credentialing or recredentialing, the practitioner's credentials may be brought to the Credentials Committee for further review.

The criteria for participation include, but are not limited to:

1. Have a valid current Drug Enforcement Agency (DEA) registration for every state in which care will be provided to members unless there is evidence that the practitioner does not require DEA registration to deliver appropriate care within his or her scope of practice.
1. Not have had a professional healthcare license, DEA registration, clinical practice, or staff privileges that have been denied, terminated, stipulated, restricted, refused, limited, suspended, revoked, not renewed, or subject to corrective action by a peer review organization, medical review board, licensing board, hospital, clinic, managed health care plan, military agency, government agency, other administrative body, or health related agency or organization.

If any of the above past denials, terminations, stipulations, restrictions, refusals, limitations, suspensions, revocations, corrective actions, or non-renewals apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with all corrective actions and monitoring plans imposed by the limiting/restricting authority. If any present restrictions apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with any corrective action/monitoring plan imposed by the limiting/restricting authority and be willing to provide periodic updates to HealthPartners concerning such compliance.
3. Agree with the practice of medicine in a managed care environment and be willing to cooperate with HealthPartners administrative procedures and other matters.
4. Not have a work history gap or pattern of resignations or terminations of employment/association as a medical practitioner which may suggest potential competency or quality of care problems.
5. Not have a history of conduct that may violate state law or standards of ethical conduct governing the practice of medicine.
6. Not have pending charges or be currently charged with, or convicted of a felony, or misdemeanor.
7. Not have a physical or mental condition that may prevent the practitioner from being able, with or without reasonable accommodation, to perform the essential functions of his or her practice with acceptable skill and without posing a health or safety risk to patients.
8. Not have used alcohol or chemical substance(s), including prescription medications, in a way that may have impaired or limited the practitioner's ability to practice medicine with reasonable skill and safety.
9. Not have engaged in any illegal use of controlled substances including use of illegal controlled substances (e.g. heroin, cocaine) or illegal use of legal controlled substances within the last five years.

10. Not have a history of malpractice claim activity or other incidents that suggests a potential competency or quality of care problem.
11. Not be involved in a practice that may be regarded by the medical community as medically unsound or otherwise inappropriate.
12. Not have misrepresented, misstated, or omitted a relevant or material fact in credentialing documents.
13. Not have been found liable, guilty, or otherwise responsible for sexual harassment, sexual assault, stalking, and/or other domestic assault or any other charge or claim involving sexually inappropriate behavior.
14. Conduct him or herself in a professional manner by not engaging in unprofessional conduct. Unprofessional conduct is defined as conduct that creates a hostile work environment, is detrimental to the delivery of quality care, or has the potential to adversely affect the health or welfare of patients or staff. Unprofessional conduct may include, but is not limited to, behaviors such as:
 - Verbal attacks leveled at staff which are personal, irrelevant or go beyond the bounds of fair professional comment
 - Impertinent or inappropriate comments or illustrations
 - Conduct or treatment that is disrespectful, abusive, intimidating or insulting
16. Not have practiced without a professional healthcare license or with a lapsed professional healthcare license.

**DENTISTS
PROFESSIONAL CRITERIA FOR ACCEPTANCE**

Dentists must meet the minimum requirements listed below to apply for participation or continued participation with HealthPartners. Participating practitioners who no longer meet these requirements will be terminated from the network and are not eligible to appeal.

1. Be a graduate from a dental school accredited by the American Dental Association Commission on Accreditation or a dental school accepted by the state licensing board.
2. Have a valid, current professional healthcare license – license cannot be suspended or subject to an order to cease or suspend practice - in each state where the dentist will see HealthPartners members.

Exception:

- a) When the state licensing board does not require a license specific to that state because the person is a commissioned medical officer of, a member of, or employed by, the armed forces of the United States, the United States Public Health Service, the Veterans Administration, any federal institution or any federal agency while engaged in the performance of official duties within the state, and the person is licensed in at least one other U.S. state.
- b) When the state licensing board does not require a license specific to that state in connection with a state or national emergency.
- c) If the dentist is authorized by a legally recognized interstate practice compact to provide care in that state

For dentists with a Limited General Dentistry License, they must have a written practice agreement with a HealthPartners participating supervising dentist. This agreement must meet the specifications of the state licensing board.

3. Have current professional liability insurance coverage that meets contractually established minimum limits. Exception: those practitioners covered by a State Tort Claims Act or Federal Tort Claims Act through employment by the state or federal government or a Federally Qualified Health Center.
4. Attest to the lack of present illegal drug use.
5. Complete a credentialing application and all associated documents as required by HealthPartners, Inc.
6. Not be currently restricted from receiving payments from any Federal program, including, but not limited to Medicare, MN Medicaid, or third party programs. Exclusion from other state Medicaid programs will be considered failure to meet a credentialing criterion and will be reviewed by the Credentials Committee.

Applicants who meet all the criteria for participation listed below may be approved for participation without review by the Credentials Committee. The Credentials Committee may accept non-compliance with one or more of the criteria if the Committee determines that the non-compliance does not indicate a potential or existing administrative or performance issue. If a participating practitioner becomes non-compliant with one or more of the following criteria after initial credentialing or recredentialing, the practitioner's credentials may be brought to the Credentials Committee for further review.

The criteria for participation include, but are not limited to:

1. Have successfully completed an accredited residency program in the specialty in which (s)he is seeking employment. Those specialties which require completion of a residency include:
 - Dental Public Health
 - Endodontics
 - Oral and Maxillofacial Surgery
 - Orthodontics and Dentofacial Orthopedics
 - Pediatric Dentistry
 - Periodontics
 - Prosthodontics
2. Have a valid current Drug Enforcement Agency (DEA) registration for every state in which care will be provided to members. This requirement applies to oral surgeons, periodontists, and endodontists.
3. Be actively pursuing Board Certification or be certified in the specialty in which (s)he practices. Board certification applies to Oral Surgeons Only.
4. Not have had a professional healthcare license, DEA registration, clinical practice, or staff privileges that have been denied, terminated, stipulated, restricted, refused, limited, suspended, revoked, not renewed, or subject to corrective action by a peer review organization, dental review board, licensing board, hospital, clinic, managed health care plan, military agency, government agency, other administrative body or dental related agency or organization.

If any of the above past denials, terminations, stipulations, restrictions, refusals, limitations, suspensions, revocations, corrective actions, or non-renewals apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with all corrective actions and monitoring plans imposed by the limiting/restricting authority. If any present restrictions apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with any corrective action/monitoring plan imposed by the limiting/restricting authority and be willing to provide periodic updates to HealthPartners concerning such compliance.

5. Not have a work history gap or pattern of resignations or terminations of employment/association as a dental practitioner which may suggest potential competency or quality of care problems.
6. Not have a history of conduct that may violate state law or standards of ethical conduct governing the practice of dentistry.
7. Not have pending charges or be currently charged with, or convicted of a felony, or misdemeanor.
8. Not have a physical or mental condition that may prevent the practitioner from being able, with or without reasonable accommodation, to perform the essential functions of his or her practice with acceptable skill and without posing a health or safety risk to patients.
9. Not have used alcohol or chemical substance(s), including prescription medications, in a way that may have impaired or limited the practitioner's ability to practice dentistry with reasonable skill and safety.
10. Not have engaged in any illegal use of controlled substances including use of illegal controlled substances (e.g., heroin, cocaine) or illegal use of legal controlled substances within the last five years.
11. Not have a history of malpractice claim activity or other incidents that suggests a potential competency or quality of care problem.
12. Not be involved in a practice that may be regarded by the dental community as dentally unsound or otherwise inappropriate.

13. Agree with the practice of dentistry in a managed care environment and be willing to cooperate with HealthPartners' administrative procedures and other matters.
14. Not have misrepresented, misstated, or omitted a relevant or material fact in credentialing documents.
15. Attest to the lack of present illegal drug use.
16. Not have been found liable, guilty, or otherwise responsible for sexual harassment, sexual assault, stalking, and/or other domestic assault or any other charge or claim involving sexually inappropriate behavior.
17. Conduct him or herself in a professional manner by not engaging in unprofessional conduct. Unprofessional conduct is defined as conduct that creates a hostile work environment, is detrimental to the delivery of quality care, or has the potential to adversely affect the health or welfare of patients or staff. Unprofessional conduct may include, but is not limited to, behaviors such as:
 - Verbal attacks leveled at staff which are personal, irrelevant or go beyond the bounds of fair professional comment
 - Impertinent or inappropriate comments or illustrations
 - Conduct or treatment that is disrespectful, abusive, intimidating or insulting
18. Not have practiced without a professional healthcare license or with a lapsed professional healthcare license.

**PODIATRISTS
PROFESSIONAL CRITERIA FOR ACCEPTANCE**

A podiatrist may apply to be credentialed for a full range practice or an office-based, non-surgical podiatric practice. Podiatrists must meet the minimum requirements listed below to apply for participation or continued participation with HealthPartners. Participating practitioners who no longer meet these requirements will be terminated from the network and are not eligible to appeal.

1. Be a graduate of a school of podiatric medicine that is accredited by the Council on Podiatric Medical Education.
2. Have a valid, current professional healthcare license – license cannot be suspended or subject to an order to cease or suspend practice - in each state where the practitioner will see HealthPartners members.

Exceptions:

- a) When the state licensing board does not require a license specific to that state because the person is a commissioned medical officer of, a member of, or employed by, the armed forces of the United States, the United States Public Health Service, the Veterans Administration, any federal institution or any federal agency while engaged in the performance of official duties within the state, and the person is licensed in at least one other U.S. state.
 - b) When the state licensing board does not require a license specific to that state in connection with a state or national emergency.
 - c) If the practitioner is authorized by a legally recognized interstate practice compact to provide care in that state
3. Have current professional liability insurance coverage that meets contractually established minimum limits. Exception: those practitioners covered by a State Tort Claims Act or Federal Tort Claims Act through employment by the state or federal government or a Federally Qualified Health Center.
 4. Complete a credentialing application and all associated documents as required by HealthPartners, Inc.
 5. Not be currently restricted from receiving payments from any Federal program, including, but not limited to Medicare, MN Medicaid, or third party programs. Exclusion from other state Medicaid programs will be considered failure to meet a credentialing criterion and will be reviewed by the Credentials Committee.
 6. Attest to the lack of present illegal drug use.

Applicants who meet all the criteria for participation listed below may be approved for participation without review by the Credentials Committee. The Credentials Committee may accept non-compliance with one or more of the criteria if the Committee determines that the non-compliance does not indicate a potential or existing administrative or performance issue. If a participating practitioner becomes non-compliant with one or more of the following criteria after initial credentialing or recredentialing, the practitioner's credentials may be brought to the Credentials Committee for further review.

The criteria for participation include, but are not limited to:

1. If full range practice including surgical privileges is requested:

- a. Have successfully completed an accredited residency program in the specialty in which (s)he is seeking participation status. This criterion may be waived if the practitioner is Board Certified in the specialty in which he or she is practicing without being required to complete a residency program. Applicants who graduated from a podiatric school prior to 1987 may have a one year preceptorship in place of a residency.
 - b. Be board certified by the American Board of Foot and Ankle Surgery, or the American Board of Podiatric Medicine in the specialty or sub-specialty (if applicable) in which (s)he practices.
2. If nonsurgical office based practice is requested:
 - a. Have successfully completed an accredited residency program in the specialty in which (s)he is seeking participation status. This criterion may be waived if the practitioner is Board Certified in the specialty in which he or she is practicing without being required to complete a residency program. Applicants who graduated from a podiatric school prior to 1987 may have a one year preceptorship in place of a residency.
 3. Have a valid, current Drug Enforcement Agency (DEA) registration for every state in which care will be provided to members, unless there is evidence that the practitioner does not require DEA registration to deliver appropriate care within his or her scope of practice.
 4. Not have had a professional healthcare license, DEA registration, clinical practice, or staff privileges that have been denied, terminated, stipulated, restricted, refused, limited, suspended, revoked, not renewed, or subject to corrective action by a peer review organization, professional review board, licensing board, hospital, clinic, managed health care plan, military agency, government agency, other administrative body, or health related agency or organization.

If any of the above past denials, terminations, stipulations, restrictions, refusals, limitations, suspensions, revocations, corrective actions, or non-renewals apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with all corrective actions and monitoring plans imposed by the limiting/restricting authority. If any present restrictions apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with any corrective actions and monitoring plans imposed by the limiting/restricting authority and be willing to provide periodic updates to HealthPartners concerning such compliance.

5. Not have a work history gap or pattern of resignations or terminations of employment/association as a podiatric practitioner which may suggest potential competency or quality of care problems.
6. Not have a history of conduct that may violate state law or standards of ethical conduct governing the practice of podiatry.
7. Not have pending charges or be currently charged with, or convicted of a felony, or misdemeanor.
8. Not have a physical or mental condition that may prevent the practitioner from being able, with or without reasonable accommodation, to perform the essential functions of his or her practice with acceptable skill and without posing a health or safety risk to patients.
9. Not have used alcohol or chemical substance(s), including prescription medications, in a way that may have impaired or limited the practitioner's ability to practice podiatry with reasonable skill and safety.
10. Not have engaged in any illegal use of controlled substances including use of illegal controlled substances (e.g., heroin, cocaine) or illegal use of legal controlled substances within the last five years.
11. Not have a history of malpractice claim activity or other incidents that suggests a potential competency or quality of care problem.

12. Not be involved in a practice that may be regarded by the professional community as medically unsound or otherwise inappropriate.
13. Agree with the practice of podiatric medicine in a managed care environment and be willing to cooperate with HealthPartners' administrative procedures and other matters.
14. Not have misrepresented, misstated, or omitted a relevant or material fact in credentialing documents.
15. Not have been found liable, guilty, or otherwise responsible for sexual harassment, sexual assault, stalking, and/or other domestic assault or any other charge or claim involving sexually inappropriate behavior.
16. Not be currently restricted from receiving payments from any Federal program, including, but not limited to Medicare, Medicaid (any state), or third party programs.
17. Conduct him or herself in a professional manner by not engaging in unprofessional conduct. Unprofessional conduct is defined as conduct that creates a hostile work environment, is detrimental to the delivery of quality care, or has the potential to adversely affect the health or welfare of patients or staff. Unprofessional conduct may include, but is not limited to, behaviors such as:
 - Verbal attacks leveled at staff which are personal, irrelevant or go beyond the bounds of fair professional comment
 - Impertinent or inappropriate comments or illustrations
 - Conduct or treatment that is disrespectful, abusive, intimidating or insulting
19. Not have practiced without a professional healthcare license or with a lapsed professional healthcare license.

CHIROPRACTORS PROFESSIONAL CRITERIA FOR ACCEPTANCE

Chiropractors must meet the minimum requirements listed below to apply for participation or continued participation with HealthPartners. Participating practitioners who no longer meet these requirements will be terminated from the network and are not eligible to appeal.

1. Be a graduate of a college of chiropractic medicine that is accredited by the Council on Chiropractic Education.
2. Have a valid, current professional healthcare license – license cannot be suspended or subject to an order to cease or suspend practice - in each state where the practitioner will see HealthPartners members.

Exceptions:

- a) When the state licensing board does not require a license specific to that state because the person is a commissioned medical officer of, a member of, or employed by, the armed forces of the United States, the United States Public Health Service, the Veterans Administration, any federal institution or any federal agency while engaged in the performance of official duties within the state, and the person is licensed in at least one other U.S. state.
 - b) When the state licensing board does not require a license specific to that state in connection with a state or national emergency.
 - c) If the practitioner is authorized by a legally recognized interstate practice compact to provide care in that state
3. Have current professional liability insurance coverage that meets contractually established minimum limits. Exception: those practitioners covered by a State Tort Claims Act or Federal Tort Claims Act through employment by the state or federal government or a Federally Qualified Health Center.
 4. Complete a credentialing application and all associated documents as required by HealthPartners, Inc.
 5. Not be currently restricted from receiving payments from any Federal program, including, but not limited to Medicare, MN Medicaid, or third party programs. Exclusion from other state Medicaid programs will be considered failure to meet a credentialing criterion and will be reviewed by the Credentials Committee.
 6. Attest to the lack of present illegal drug use.

Applicants who meet all the criteria for participation listed below may be approved for participation without review by the Credentials Committee. The Credentials Committee may accept non-compliance with one or more of the criteria if the Committee determines that the non-compliance does not indicate a potential or existing administrative or performance issue. If a participating practitioner becomes non-compliant with one or more of the following criteria after initial credentialing or recredentialing, the practitioner's credentials may be brought to the Credentials Committee for further review.

The criteria for participation include, but are not limited to:

1. Not have had a professional healthcare license, clinical practice, or staff privileges that have been denied, terminated, stipulated, restricted, refused, limited, suspended, revoked, not renewed, or subject to corrective action by a peer review organization in compliance with the requirements of

Minn. Stat. §§ 145.61–145.67, professional review board, licensing board, hospital, clinic, managed health care plan, military agency, government agency, other administrative body, or health related agency or organization.

If any of the above past denials, terminations, stipulations, restrictions, refusals, limitations, suspensions, revocations, corrective actions, or non-renewals apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with all corrective actions and monitoring plans imposed by the limiting/restricting authority. If any present restrictions apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with any corrective action/monitoring plan imposed by the limiting/restricting authority and be willing to provide periodic updates to HealthPartners concerning such compliance.

2. Not have a work history gap or pattern of resignations or terminations of employment/association as a chiropractic practitioner which may suggest potential competency or quality of care problems.
3. Not have a history of conduct that may violate state law or standards of ethical conduct governing the practice of chiropractic.
4. Not have pending charges or be currently charged with, or convicted of a felony, or misdemeanor.
5. Not have a physical or mental condition that may prevent the practitioner from being able, with or without reasonable accommodation, to perform the essential functions of his or her practice with acceptable skill and without posing a health or safety risk to patients.
6. Not have used alcohol or chemical substance(s), including prescription medications, in a way that may have impaired or limited the practitioner's ability to practice chiropractic with reasonable skill and safety.
7. Not have engaged in any illegal use of controlled substances including use of illegal controlled substances (e.g., heroin, cocaine) or illegal use of legal controlled substances within the last five years.
8. Not have a history of malpractice claim activity or other incidents that suggests a potential competency or quality of care problem.
9. Not be involved in a practice that may be regarded by the professional community as medically unsound or otherwise inappropriate.
10. Agree with the practice of chiropractic in a managed care environment and be willing to cooperate with HealthPartners' administrative procedures and other matters.
11. Not have misrepresented, misstated, or omitted a relevant or material fact in credentialing documents.
12. Not have been found liable, guilty or otherwise responsible for sexual harassment, sexual assault, stalking, and/or other domestic assault or any other charge or claim involving sexually inappropriate behavior.
13. Conduct him or herself in a professional manner by not engaging in unprofessional conduct. Unprofessional conduct is defined as conduct that creates a hostile work environment, is detrimental to the delivery of quality care, or has the potential to adversely affect the health or welfare of patients or staff. Unprofessional conduct may include, but is not limited to, behaviors such as:
 - Verbal attacks leveled at staff which are personal, irrelevant or go beyond the bounds of fair professional comment

- Impertinent or inappropriate comments or illustrations
 - Conduct or treatment that is disrespectful, abusive, intimidating or insulting
14. Not have practiced without a professional healthcare license or with a lapsed professional healthcare license.

MENTAL HEALTH PRACTITIONERS PROFESSIONAL CRITERIA FOR ACCEPTANCE

Practitioners must meet the minimum requirements listed below to apply for participation or continued participation with HealthPartners. Participating practitioners who no longer meet these requirements will be terminated from the network and are not eligible to appeal.

1. Be a graduate of an accredited masters or doctoral program which grants degrees or diplomas in his or her field of practice.
2. Have a valid, current professional healthcare license – license cannot be suspended or subject to an order to cease or suspend practice - in each state where the practitioner will see HealthPartners members.

Exceptions:

- a) When the state licensing board does not require a license specific to that state because the person is a commissioned medical officer of, a member of, or employed by, the armed forces of the United States, the United States Public Health Service, the Veterans Administration, any federal institution or any federal agency while engaged in the performance of official duties within the state, and the person is licensed in at least one other U.S. state.
 - b) When the state licensing board does not require a license specific to that state in connection with a state or national emergency.
 - c) If the practitioner is authorized by a legally recognized interstate practice compact to provide care in that state
3. Have current professional liability insurance coverage that meets contractually established minimum limits. Exception: those practitioners covered by a State Tort Claims Act or Federal Tort Claims Act through employment by the state or federal government or a Federally Qualified Health Center.
 4. Attest to the lack of present illegal drug use.
 5. Complete a credentialing application and all associated documents as required by HealthPartners, Inc.
 6. Not be currently restricted from receiving payments from any Federal program, including, but not limited to Medicare, MN Medicaid, or third party programs. Exclusion from other state Medicaid programs will be considered failure to meet a credentialing criterion and will be reviewed by the Credentials Committee.

Applicants who meet all the criteria for participation listed below may be approved for participation without review by the Credentials Committee. The Credentials Committee may accept non-compliance with one or more of the criteria if the Committee determines that the non-compliance does not indicate a potential or existing administrative or performance issue. If a participating practitioner becomes non-compliant with one or more of the following criteria after initial credentialing or recredentialing, the practitioner's credentials may be brought to the Credentials Committee for further review.

The criteria for participation include, but are not limited to:

1. Behavioral Analysts must be certified by the Behavioral Analyst Certification Board

2. Psychologist prescribers:
 - a. Must be permitted to prescribe under the laws of the state in which they practice
 - b. Must have completed a post-doctoral Master of Science degree in clinical psychopharmacology (MSCP) from an APA designated program (or other program accepted by the state licensing board).
 - c. Must have a valid, current Drug Enforcement Agency (DEA) registration for every state in which care will be provided to members, unless the psychologist will not be prescribing controlled substances.
3. Not have had a professional healthcare license, clinical practice, or staff privileges that have been denied, terminated, stipulated, restricted, refused, limited, suspended, revoked, not renewed, or subject to corrective action by a peer review organization, professional review board, licensing board, hospital, clinic, managed health care plan, military agency, government agency, other administrative body, or health related agency or organization.

If any of the above past denials, terminations, stipulations, restrictions, refusals, limitations, suspensions, revocations, corrective actions, or non-renewals apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with any corrective actions and monitoring plans imposed by the limiting/restricting authority. If any present restrictions apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with all corrective action/monitoring plan imposed by the limiting/restricting authority and be willing to provide periodic updates to HealthPartners concerning such compliance.

4. Not have a work history gap or pattern of resignations or terminations of employment/association as a mental health practitioner which may suggest potential competency or quality of care problems.
5. Not have a history of conduct that may violate state law or standards of ethical conduct governing mental health practice.
6. Not have pending charges or be currently charged with, or convicted of a felony, or misdemeanor.
7. Not have a physical or mental condition that may prevent the practitioner from being able, with or without reasonable accommodation, to perform the essential functions of his or her practice with acceptable skill and without posing a health or safety risk to patients.
8. Not have used alcohol or chemical substance(s), including prescription medications, in a way that may have impaired or limited the practitioner's ability to practice as a mental health practitioner with reasonable skill and safety.
9. Not have engaged in any illegal use of controlled substances including use of illegal controlled substances (e.g., heroin, cocaine) or illegal use of legal controlled substances within the last five years.
10. Not have a history of malpractice claim activity or other incidents that suggests a potential competency or quality of care problem.
11. Not be involved in a practice that may be regarded by the mental health community as unsound or otherwise inappropriate.
12. Agree with the practice of mental health in a managed care environment and be willing to cooperate with HealthPartners' administrative procedures and other matters.

13. Not have misrepresented, misstated, or omitted a relevant or material fact in credentialing documents.
14. Not have been found liable, guilty, or otherwise responsible for sexual harassment, sexual assault, stalking, and/or other domestic assault or any other charge or claim involving sexually inappropriate behavior.
15. Conduct him or herself in a professional manner by not engaging in unprofessional conduct. Unprofessional conduct is defined as conduct that creates a hostile work environment, is detrimental to the delivery of quality care, or has the potential to adversely affect the health or welfare of patients or staff. Unprofessional conduct may include, but is not limited to, behaviors such as:
 - Verbal attacks leveled at staff which are personal, irrelevant or go beyond the bounds of fair professional comment
 - Impertinent or inappropriate comments or illustrations
 - Conduct or treatment that is disrespectful, abusive, intimidating or insulting
16. Not have practiced without a professional healthcare license or with a lapsed professional healthcare license.

LICENSED SUBSTANCE USE DISORDER PROFESSIONALS PROFESSIONAL CRITERIA FOR ACCEPTANCE

Substance use disorder professionals must meet the minimum requirements listed below to apply for participation or continued participation with HealthPartners. Participating practitioners who no longer meet these requirements will be terminated from the network and are not eligible to appeal.

1. Have a valid professional healthcare license – license cannot be suspended or subject to an order to cease or suspend practice - in each state where the practitioner will see HealthPartners members.

Exceptions:

- a) When the state licensing board does not require a license specific to that state because the person is a commissioned medical officer of, a member of, or employed by, the armed forces of the United States, the United States Public Health Service, the Veterans Administration, any federal institution or any federal agency while engaged in the performance of official duties within the state, and the person is licensed in at least one other U.S. state.
 - b) When the state licensing board does not require a license specific to that state in connection with a state or national emergency.
 - c) If the practitioner is authorized by a legally recognized interstate practice compact to provide care in that state
2. Have current professional liability insurance coverage that meets contractually established minimum limits. Exception: those practitioners covered by a State Tort Claims Act or Federal Tort Claims Act through employment by the state or federal government or a Federally Qualified Health Center.
 3. Attest to the lack of present illegal drug use.
 4. Not be currently restricted from receiving payments from any Federal program, including, but not limited to Medicare, MN Medicaid, or third-party programs. Exclusion from other state Medicaid programs will be considered failure to meet a credentialing criterion and will be reviewed by the Credentials Committee.
 5. Complete a credentialing application and all associated documents as required by HealthPartners, Inc.

Applicants who meet all the criteria for participation listed below may be approved for participation without review by the Credentials Committee. The Credentials Committee may accept non-compliance with one or more of the criteria if the Committee determines that the non-compliance does not indicate a potential or existing administrative or performance issue. If a participating practitioner becomes non-compliant with one or more of the following criteria after initial credentialing or recredentialing, the practitioner's credentials may be brought to the Credentials Committee for further review.

The criteria for participation include, but are not limited to:

1. Not have had a professional healthcare license, clinical practice, or staff privileges that have been denied, terminated, stipulated, restricted, refused, limited, suspended, revoked, not renewed or subject to corrective action by a peer review organization, professional review board, licensing board, hospital, clinic, managed health care plan, military agency, government agency, other administrative body, or health related agency or organization.

If any of the above past denials, terminations, stipulations, restrictions, refusals, limitations, suspensions, revocations, corrective actions, or non-renewals apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with all corrective actions and monitoring plans imposed by the limiting/restricting authority. If any present restrictions apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with any corrective action/monitoring plan imposed by the limiting/restricting authority and be willing to provide periodic updates to HealthPartners concerning such compliance.

2. Not have a work history gap or pattern of resignations or terminations of employment/association as a substance use disorder professional which may suggest potential competency or quality of care problems.
3. Not have a history of conduct that may violate state law or standards of ethical conduct governing substance use disorder practice.
4. Not have pending charges or be currently charged with or convicted of a felony, or misdemeanor.
5. Not have a physical or mental condition that may prevent the practitioner from being able, with or without reasonable accommodation, to perform the essential functions of his or her practice with acceptable skill and without posing a health or safety risk to patients.
6. Not have used alcohol or chemical substance(s), including prescription medications, in a way that may have impaired or limited the practitioner's ability to practice as a substance use disorder professional with reasonable skill and safety.
7. Not have engaged in any illegal use of controlled substances including use of illegal controlled substances (e.g., heroin, cocaine) or illegal use of legal controlled substances within the last five years.
8. Not have a history of malpractice claim activity or other incidents that suggests a potential competency or quality of care problem.
9. Not be involved in a practice that may be regarded by the substance use disorder professional community as unsound or otherwise inappropriate.
10. Agree with the practice of substance use disorder treatment in a managed care environment and be willing to cooperate with HealthPartners' administrative procedures and other matters.
11. Not have misrepresented, misstated, or omitted a relevant or material fact in credentialing documents.
12. Not have been found liable, guilty, or otherwise responsible for sexual harassment, sexual assault, stalking, and/or other domestic assault or any other charge or claim involving sexually inappropriate behavior.
13. Conduct him or herself in a professional manner by not engaging in unprofessional conduct. Unprofessional conduct is defined as conduct that creates a hostile work environment, is detrimental to the delivery of quality care, or has the potential to adversely affect the health or welfare of patients or staff. Unprofessional conduct may include, but is not limited to, behaviors such as:
 - Verbal attacks leveled at staff which are personal, irrelevant or go beyond the bounds of fair professional comment
 - Impertinent or inappropriate comments or illustrations
 - Conduct or treatment that is disrespectful, abusive, intimidating or insulting

14. Not have practiced without a professional healthcare license or with a lapsed professional healthcare license.

ADVANCED PRACTICE REGISTERED NURSES
(Certified Nurse Midwives, Certified Nurse Practitioners, Clinical Nurse Specialists, and Certified Registered Nurse Anesthetists practicing pain medicine or administering controlled substances in a clinic setting)
PROFESSIONAL CRITERIA FOR ACCEPTANCE

Nurse midwives, clinical nurse specialists, and nurse practitioners must meet the minimum requirements listed below to apply for participation or continued participation with HealthPartners. Participating practitioners who no longer meet these requirements will be terminated from the network and are not eligible to appeal.

1. Be a graduate of an accredited college of nurse midwifery or other advanced nursing practice program and be certified by a national certification organization acceptable to the state licensing board.
2. Have a valid, current professional healthcare license – license cannot be suspended or subject to an order to cease or suspend practice - in each state where the advanced practice registered nurse will see HealthPartners members.

Exceptions:

- a) When the state licensing board does not require a license specific to that state because the person is a commissioned medical officer of, a member of, or employed by, the armed forces of the United States, the United States Public Health Service, the Veterans Administration, any federal institution or any federal agency while engaged in the performance of official duties within the state, and the person is licensed in at least one other U.S. state.
 - b) When the state licensing board does not require a license specific to that state in connection with a state or national emergency.
 - c) If the advanced practice registered nurse is authorized by a legally recognized interstate practice compact to provide care in that state
3. For certified registered nurse anesthetists (CRNA) practicing pain medicine, have a written prescribing or collaborative agreement with a HealthPartners participating physician when required by the state licensing board and meet any other specified qualifications required by the state licensing board.
 4. Have current professional liability insurance coverage that meets contractually established minimum limits. Exception: those practitioners covered by a State Tort Claims Act or Federal Tort Claims Act through employment by the state or federal government or a Federally Qualified Health Center.
 5. .Attest to the lack of present illegal drug use.
 6. Not be currently restricted from receiving payments from any Federal program, including, but not limited to Medicare, MN Medicaid, or third party programs. Exclusion from other state Medicaid programs will be considered failure to meet a credentialing criterion and will be reviewed by the Credentials Committee.
 7. Complete a credentialing application and all associated documents as required by HealthPartners, Inc.

Applicants who meet all the criteria for participation listed below may be approved for participation without review by the Credentials Committee. The Credentials Committee may accept non-compliance with one or more of the criteria if the Committee determines that the non-compliance does not indicate a potential

or existing administrative or performance issue. If a participating practitioner becomes non-compliant with one or more of the following criteria after initial credentialing or recredentialing, the practitioner's credentials may be brought to the Credentials Committee for further review.

The criteria for participation include, but are not limited to:

1. Have a valid, current Drug Enforcement Agency (DEA) registration for every state in which care will be provided to members, unless there is evidence that the practitioner does not require DEA registration to deliver appropriate care within his or her scope of practice.
2. Not have had a professional healthcare license, DEA registration, clinical practice, or staff privileges that have been denied, terminated, stipulated, restricted, refused, limited, suspended, revoked, not renewed or subject to corrective action by a peer review organization, professional review board, licensing board, hospital, clinic, managed health care plan, military agency, government agency, other administrative body, or health related agency or organization.

If any of the above past denials, terminations, stipulations, restrictions, refusals, limitations, suspensions, revocations, corrective actions, or non-renewals apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with all corrective actions and monitoring plans imposed by the limiting/restricting authority. If any present restrictions apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with any corrective action/monitoring plan imposed by the limiting/restricting authority and be willing to provide periodic updates to HealthPartners concerning such compliance.

3. Not have a work history gap or pattern of resignations or terminations of employment/association as a nurse midwife, clinical nurse specialist or nurse practitioner which may suggest potential competency or quality of care problems.
4. Not have a history of conduct that may violate state law or standards of ethical conduct governing the practice of midwifery or other advanced practice nursing.
5. Not have pending charges or be currently charged with, or convicted of a felony, or misdemeanor.
6. Not have a physical or mental condition that may prevent the practitioner from being able, with or without reasonable accommodation, to perform the essential functions of his or her practice with acceptable skill and without posing a health or safety risk to patients.
7. Not have used alcohol or chemical substance(s), including prescription medications, in a way that may have impaired or limited the practitioner's ability to practice as an advanced practice nurse with reasonable skill and safety.
8. Not have engaged in any illegal use of controlled substances including use of illegal controlled substances (e.g., heroin, cocaine) or illegal use of legal controlled substances within the last five years.
9. Not have a history of malpractice claim activity or other incidents that suggests a potential competency or quality of care problem.
10. Not be involved in a practice that may be regarded by the professional community as unsound or otherwise inappropriate.
11. Agree with the practice of nurse midwifery or other advanced nursing practice in a managed care environment and be willing to cooperate with HealthPartners' administrative procedures and other matters.

12. Not have misrepresented, misstated, or omitted a relevant or material fact in credentialing documents.
13. Not have been found liable, guilty or otherwise responsible for sexual harassment, sexual assault, stalking, and/or other domestic assault or any other charge or claim involving sexually inappropriate behavior.
14. Conduct him or herself in a professional manner by not engaging in unprofessional conduct. Unprofessional conduct is defined as conduct that creates a hostile work environment, is detrimental to the delivery of quality care, or has the potential to adversely affect the health or welfare of patients or staff. Unprofessional conduct may include, but is not limited to, behaviors such as:
 - Verbal attacks leveled at staff which are personal, irrelevant or go beyond the bounds of fair professional comment
 - Impertinent or inappropriate comments or illustrations
 - Conduct or treatment that is disrespectful, abusive, intimidating or insulting
15. Not have practiced without a professional healthcare license or with a lapsed professional healthcare license.

TRADITIONAL MIDWIVES
PROFESSIONAL CRITERIA FOR ACCEPTANCE

Traditional midwives must meet the minimum requirements listed below to apply for participation or continued participation with HealthPartners. Participating practitioners who no longer meet these requirements will be terminated from the network and are not eligible to appeal.

1. Have a valid, current professional healthcare license – license cannot be suspended or subject to an order to cease or suspend practice - in each state where the midwife will see HealthPartners members.
Exception: When the state licensing board does not require a license specific to that state because the person is a commissioned medical officer of, a member of, or employed by, the armed forces of the United States, the United States Public Health Service, the Veterans Administration, any federal institution or any federal agency while engaged in the performance of official duties within the state, and the person is licensed in at least one other U.S. state.
2. Have current certification by the North American Registry of Midwives
3. Be currently certified by the American Heart Association or the American Red Cross for adult and infant cardiopulmonary resuscitation.
4. Have current professional liability insurance coverage that meets contractually established minimum limits. Exception: those practitioners covered by a State Tort Claims Act or Federal Tort Claims Act through employment by the state or federal government or a Federally Qualified Health Center.
5. .Attest to the lack of present illegal drug use.
6. Not be currently restricted from receiving payments from any Federal program, including, but not limited to Medicare, MN Medicaid, or third party programs. Exclusion from other state Medicaid programs will be considered failure to meet a credentialing criterion and will be reviewed by the Credentials Committee.
7. Complete a credentialing application and all associated documents as required by HealthPartners, Inc.

Applicants who meet all the criteria for participation listed below may be approved for participation without review by the Credentials Committee. The Credentials Committee may accept non-compliance with one or more of the criteria if the Committee determines that the non-compliance does not indicate a potential or existing administrative or performance issue. If a participating practitioner becomes non-compliant with one or more of the following criteria after initial credentialing or recredentialing, the practitioner's credentials may be brought to the Credentials Committee for further review.

The criteria for participation include, but are not limited to:

1. Not have had a professional healthcare license, clinical practice, that have been denied, terminated, stipulated, restricted, refused, limited, suspended, revoked, not renewed or subject to corrective action by a peer review organization, professional review board, licensing board, hospital, clinic, managed health care plan, military agency, government agency, other administrative body, or health related agency or organization.

If any of the above past denials, terminations, stipulations, restrictions, refusals, limitations, suspensions, revocations, corrective actions, or non-renewals apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with all corrective actions and monitoring plans imposed by the limiting/restricting authority. If any present restrictions apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with any corrective action/monitoring plan imposed by the limiting/restricting authority and be willing to provide periodic updates to HealthPartners concerning such compliance.

2. Not have a work history gap or pattern of resignations or terminations of employment/association as a midwife which may suggest potential competency or quality of care problems.
3. Not have a history of conduct that may violate state law or standards of ethical conduct governing the practice of midwifery or other advanced practice nursing.
4. Not have pending charges or be currently charged with, or convicted of a felony, or misdemeanor.
5. Not have a physical or mental condition that may prevent the practitioner from being able, with or without reasonable accommodation, to perform the essential functions of his or her practice with acceptable skill and without posing a health or safety risk to patients.
6. Not have used alcohol or chemical substance(s), including prescription medications, in a way that may have impaired or limited the practitioner's ability to practice as a midwife with reasonable skill and safety.
7. Not have engaged in any illegal use of controlled substances including use of illegal controlled substances (e.g., heroin, cocaine) or illegal use of legal controlled substances within the last five years.
8. Not have a history of malpractice claim activity or other incidents that suggests a potential competency or quality of care problem.
9. Not be involved in a practice that may be regarded by the professional community as unsound or otherwise inappropriate.
10. Agree with the practice of midwifery in a managed care environment and be willing to cooperate with HealthPartners' administrative procedures and other matters.
11. Not have misrepresented, misstated, or omitted a relevant or material fact in credentialing documents.
12. Not have been found liable, guilty, or otherwise responsible for sexual harassment, sexual assault, stalking, and/or other domestic assault or any other charge or claim involving sexually inappropriate behavior.
13. Conduct him or herself in a professional manner by not engaging in unprofessional conduct. Unprofessional conduct is defined as conduct that creates a hostile work environment, is detrimental to the delivery of quality care, or has the potential to adversely affect the health or welfare of patients or staff. Unprofessional conduct may include, but is not limited to, behaviors such as:
 - Verbal attacks leveled at staff which are personal, irrelevant or go beyond the bounds of fair professional comment
 - Impertinent or inappropriate comments or illustrations
 - Conduct or treatment that is disrespectful, abusive, intimidating or insulting
14. Not have practiced without a professional healthcare license or with a professional healthcare license.

OPTOMETRISTS PROFESSIONAL CRITERIA FOR ACCEPTANCE

Optometrists must meet the minimum requirements listed below to apply for participation or continued participation with HealthPartners. Participating practitioners who no longer meet these requirements will be terminated from the network and are not eligible to appeal.

1. Be a graduate of a college of optometry that is accredited by the Council on Optometric Education of the American Optometric Association.
2. Have a valid, current professional healthcare license – license cannot be suspended or subject to an order to cease or suspend practice - in each state where the optometrist will see HealthPartners members.

Exceptions:

- a) When the state licensing board does not require a license specific to that state because the person is a commissioned medical officer of, a member of, or employed by, the armed forces of the United States, the United States Public Health Service, the Veterans Administration, any federal institution or any federal agency while engaged in the performance of official duties within the state, and the person is licensed in at least one other U.S. state.
 - b) When the state licensing board does not require a license specific to that state in connection with a state or national emergency.
 - c) If the optometrist is authorized by a legally recognized interstate practice compact to provide care in that state
3. Have current professional liability insurance coverage that meets contractually established minimum limits. Exception: those practitioners covered by a State Tort Claims Act or Federal Tort Claims Act through employment by the state or federal government or a Federally Qualified Health Center.
 4. Attest to the lack of present illegal drug use.
 5. Complete a credentialing application and all associated documents as required by HealthPartners, Inc.
 6. Not be currently restricted from receiving payments from any Federal program, including, but not limited to Medicare, MN Medicaid (any state), or third party programs. Exclusion from other state Medicaid programs will be considered failure to meet a credentialing criterion and will be reviewed by the Credentials Committee.

Applicants who meet all the criteria for participation listed below may be approved for participation without review by the Credentials Committee. The Credentials Committee may accept non-compliance with one or more of the criteria if the Committee determines that the non-compliance does not indicate a potential or existing administrative or performance issue. If a participating practitioner becomes non-compliant with one or more of the following criteria after initial credentialing or recredentialing, the practitioner's credentials may be brought to the Credentials Committee for further review.

The criteria for participation include, but are not limited to:

1. Have a level of licensure that, at a minimum, allows use of diagnostic pharmaceuticals

2. Not have had a professional healthcare license, clinical practice, or staff privileges that have been denied, terminated, stipulated, restricted, refused, limited, suspended, revoked, not renewed or subject to corrective action, by a peer review organization, professional review board, licensing board, hospital, clinic, managed health care plan, military agency, government agency, other administrative body, or health related agency or organization.

If any of the above past denials, terminations, stipulations, restrictions, refusals, limitations, suspensions, revocations, corrective actions, or non-renewals apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with all corrective actions and monitoring plans imposed by the limiting/restricting authority. If any present restrictions apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with any corrective action/monitoring plan imposed by the limiting/restricting authority and be willing to provide periodic updates to HealthPartners concerning such compliance.

3. Not have a work history gap or pattern of resignations or terminations of employment/association as an optometric practitioner which may suggest potential competency or quality of care problems.
4. Not have a history of conduct that may violate state law or standards of ethical conduct governing the practice of optometry.
5. Not have pending charges or be currently charged with, or convicted of a felony, or misdemeanor.
6. Not have a physical or mental condition that may prevent the practitioner from being able, with or without reasonable accommodation, to perform the essential functions of his or her practice with acceptable skill and without posing a health or safety risk to patients.
7. Not have used alcohol or chemical substance(s), including prescription medications, in a way that may have impaired or limited the practitioner's ability to practice optometry with reasonable skill and safety.
8. Not have engaged in any illegal use of controlled substances including use of illegal controlled substances (e.g., heroin, cocaine) or illegal use of legal controlled substances within the last five years.
9. Not have a history of malpractice claim activity or other incidents that suggests a potential competency or quality of care problem.
10. Not be involved in a practice that may be regarded by the professional community as optometrically unsound or otherwise inappropriate.
11. Agree with the practice of optometry in a managed care environment and be willing to cooperate with HealthPartners' administrative procedures and other matters.
12. Not have misrepresented, misstated, or omitted a relevant or material fact in credentialing documents.
13. Not have been found liable, guilty, or otherwise responsible for sexual harassment, sexual assault, stalking, and/or other domestic assault or any other charge or claim involving sexually inappropriate behavior.
14. Conduct him or herself in a professional manner by not engaging in unprofessional conduct. Unprofessional conduct is defined as conduct that creates a hostile work environment, is detrimental to the delivery of quality care, or has the potential to adversely affect the health or welfare of patients or staff. Unprofessional conduct may include, but is not limited to, behaviors such as:

- Verbal attacks leveled at staff which are personal, irrelevant or go beyond the bounds of fair professional comment
- Impertinent or inappropriate comments or illustrations
- Conduct or treatment that is disrespectful, abusive, intimidating or insulting

15. Not have practiced without a professional healthcare license or with a lapsed professional healthcare license.

PHYSICIAN ASSISTANTS PROFESSIONAL CRITERIA FOR ACCEPTANCE

Physician Assistants must meet the minimum requirements listed below to apply for participation or continued participation with HealthPartners. Participating practitioners who no longer meet these requirements will be terminated from the network and are not eligible to appeal.

1. Be a graduate of a physician assistant program accredited by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) or its predecessors.
2. Have a valid, current professional healthcare license – license cannot be suspended or subject to an order to cease or suspend practice - for each state where the practitioner will see HealthPartners members.

Exceptions:

- a) When the state licensing board does not require a license specific to that state because the person is a commissioned medical officer of, a member of, or employed by, the armed forces of the United States, the United States Public Health Service, the Veterans Administration, any federal institution or any federal agency while engaged in the performance of official duties within the state, and the person is licensed in at least one other U.S. state.
 - b) When the state licensing board does not require a license specific to that state in connection with a state or national emergency.
 - c) If the practitioner is authorized by a legally recognized interstate practice compact to provide care in that state
3. Have passed the national certification examination administered by the National Commission on Certification of Physician Assistants and maintain that certification, if required by the state licensing board in the states where the practitioner will see HealthPartners members.
 4. Have current professional liability insurance coverage that meets contractually established minimum limits. Exception: those practitioners covered by a State Tort Claims Act or Federal Tort Claims Act through employment by the state or federal government or a Federally Qualified Health Center.
 5. Not be currently restricted from receiving payments from any Federal program, including, but not limited to Medicare, MN Medicaid, or third-party programs. Exclusion from other state Medicaid programs will be considered failure to meet a credentialing criterion and will be reviewed by the Credentials Committee.
 6. Complete a credentialing application and all associated documents as required by HealthPartners, Inc.
 7. Attest to the lack of present illegal drug use.

Applicants who meet all the criteria for participation listed below may be approved for participation without review by the Credentials Committee. The Credentials Committee may accept non-compliance with one or more of the criteria if the Committee determines that the non-compliance does not indicate a potential or existing administrative or performance issue. If a participating practitioner becomes non-compliant with one or more of the following criteria after initial credentialing or recredentialing, the practitioner's credentials may be brought to the Credentials Committee for further review.

The criteria for participation include, but are not limited to:

1. If allowed by state law, have a valid, current Drug Enforcement Agency (DEA) registration for every state in which care will be provided to members, unless there is evidence that the practitioner does not require DEA registration in order to deliver appropriate care within his or her scope of practice.
2. Not have had a professional healthcare license, DEA registration, clinical practice, or staff privileges that have been denied, terminated, stipulated, restricted, refused, limited, suspended, revoked, not renewed or subject to corrective action by a peer review organization, professional review board, licensing board, hospital, clinic, managed health care plan, military agency, government agency, other administrative body, or health related agency or organization.

If any of the above past denials, terminations, stipulations, restrictions, refusals, limitations, suspensions, revocations, corrective actions, or non-renewals apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with any corrective actions and monitoring plans imposed by the limiting/restricting authority. If any present restrictions apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with all corrective action/monitoring plan imposed by the limiting/restricting authority and be willing to provide periodic updates to HealthPartners concerning such compliance.

3. Not have a work history gap or pattern of resignations or terminations of employment/association as a physician assistant which may suggest potential competency or quality of care problems.
4. Not have a history of conduct that may violate state law or standards of ethical conduct governing the practice of physician assistants.
5. Not have pending charges or be currently charged with, or convicted of a felony, or misdemeanor.
6. Not have a physical or mental condition that may prevent the practitioner from being able, with or without reasonable accommodation, to perform the essential functions of his or her practice with acceptable skill and without posing a health or safety risk to patients.
7. Not have used alcohol or chemical substance(s), including prescription medications, in a way that may have impaired or limited the practitioner's ability to practice as a physician assistant with reasonable skill and safety.
8. Not have engaged in any illegal use of controlled substances including use of illegal controlled substances (e.g., heroin, cocaine) or illegal use of legal controlled substances within the last five years.
9. Not have a history of malpractice claim activity or other incidents that suggests a potential competency or quality of care problem.
10. Not be involved in a practice that may be regarded by the professional community as unsound or otherwise inappropriate.
11. Not have misrepresented, misstated, or omitted a relevant or material fact in credentialing documents.
12. Not have been found liable, guilty, or otherwise responsible for sexual harassment, sexual assault, stalking, and/or other domestic assault or any other charge or claim involving sexually inappropriate behavior.
13. Conduct him or herself in a professional manner by not engaging in unprofessional conduct. Unprofessional conduct is defined as conduct that creates a hostile work environment, is detrimental to the delivery of quality care, or has the potential to adversely affect the health or

welfare of patients or staff. Unprofessional conduct may include, but is not limited to, behaviors such as:

- Verbal attacks leveled at staff which are personal, irrelevant or go beyond the bounds of fair professional comment
- Impertinent or inappropriate comments or illustrations
- Conduct or treatment that is disrespectful, abusive, intimidating or insulting

14. Not have practiced without a professional healthcare license or with a lapsed professional healthcare license.

ADVANCED DENTAL THERAPISTS (ADT) AND DENTAL THERAPISTS (DT) PROFESSIONAL CRITERIA FOR ACCEPTANCE

Advanced Dental Therapists and Dental Therapists must meet the minimum requirements listed below to apply for participation or continued participation with HealthPartners. Participating allied practitioners who no longer meet these requirements will be terminated from the network and are not eligible to appeal.

1. Be a graduate of a master's or baccalaureate degree program in Dental Therapy approved by the Board of Dentistry or accredited by the American Dental Association Commission on Dental Accreditation.
2. Have a valid, current professional healthcare license – license cannot be suspended or subject to an order to cease or suspend practice - in Minnesota.
3. Has met the requisite number of hours as a Dental Therapist and successfully passed the ADT examination and has been issued an Advanced Dental Therapy certification (ADTs only).
4. Have a collaborative management agreement with a HealthPartners participating supervising dentist. This agreement must meet the specifications of the state licensing board.
5. Have current professional liability insurance coverage that meets contractually established minimum limits. Exception: those practitioners covered by a State Tort Claims Act or Federal Tort Claims Act through employment by the state or federal government or a Federally Qualified Health Center.
6. Attest to the lack of present illegal drug use.
7. Complete a credentialing application and all associated documents as required by HealthPartners, Inc.
8. Not be currently restricted from receiving payments from any Federal program, including, but not limited to Medicare, MN Medicaid, or third party programs. Exclusion from other state Medicaid programs will be considered failure to meet a credentialing criterion and will be reviewed by the Credentials Committee.

Applicants who meet all the criteria for participation listed below may be approved for participation without review by the Credentials Committee. The Credentials Committee may accept non-compliance with one or more of the criteria if the Committee determines that the non-compliance does not indicate a potential or existing administrative or performance issue. If a participating practitioner becomes non-compliant with one or more of the following criteria after initial credentialing or recredentialing, the practitioner's credentials may be brought to the Credentials Committee for further review.

The criteria for participation include, but are not limited to:

1. Not have had a professional healthcare license, or dental practice that have been denied, terminated, stipulated, restricted, refused, limited, suspended, revoked, not renewed, or subject to corrective action by a peer review organization, dental review board, licensing board, hospital, clinic, managed health care plan, military agency, government agency, other administrative body or dental related agency or organization.

If any of the above past denials, terminations, stipulations, restrictions, refusals, limitations, suspensions, revocations, corrective actions or non-renewals apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with all corrective actions and monitoring plans imposed by the limiting/restricting authority. If any

present restrictions apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with any corrective action/monitoring plan imposed by the limiting/restricting authority and be willing to provide periodic updates to HealthPartners concerning such compliance.

2. Not have a work history gap or pattern of resignations or terminations of employment/association as an allied dental practitioner which may suggest potential competency or quality of care problems.
3. Not have a history of conduct that may violate state law or standards of ethical conduct governing the practice of dentistry.
4. Not have pending charges or be currently charged with, or convicted of a felony, or misdemeanor.
5. Not have a physical or mental condition that may prevent the practitioner from being able, with or without reasonable accommodation, to perform the essential functions of his or her practice with acceptable skill and without posing a health or safety risk to patients.
6. Not have used alcohol or chemical substance(s), including prescription medications, in a way that may have impaired or limited the practitioner's ability to practice dentistry with reasonable skill and safety.
7. Not have engaged in any illegal use of controlled substances including use of illegal controlled substances (e.g., heroin, cocaine) or illegal use of legal controlled substances within the last five years.
8. Not have a history of malpractice claim activity or other incidents that suggests a potential competency or quality of care problem.
9. Not be involved in a practice that may be regarded by the dental community as dentally unsound or otherwise inappropriate.
10. Agree with the practice of dentistry in a managed care environment and be willing to cooperate with HealthPartners' administrative procedures and other matters.
11. Not have misrepresented, misstated, or omitted a relevant or material fact in credentialing documents.
12. Attest to the lack of present illegal drug use.
13. Not have been found liable, guilty, or otherwise responsible for sexual harassment, sexual assault, stalking, and/or other domestic assault or any other charge or claim involving sexually inappropriate behavior.
14. Conduct him or herself in a professional manner by not engaging in unprofessional conduct. Unprofessional conduct is defined as conduct that creates a hostile work environment, is detrimental to the delivery of quality care, or has the potential to adversely affect the health or welfare of patients or staff. Unprofessional conduct may include, but is not limited to, behaviors such as:
 - Verbal attacks leveled at staff which are personal, irrelevant or go beyond the bounds of fair professional comment
 - Impertinent or inappropriate comments or illustrations
 - Conduct or treatment that is disrespectful, abusive, intimidating or insulting
15. Not have practiced without a professional healthcare license or with a lapsed professional healthcare license.

MEDICATION THERAPY MANAGEMENT (MTM) PHARMACISTS PROFESSIONAL CRITERIA FOR ACCEPTANCE

MTM pharmacists must meet the minimum requirements listed below to apply for participation or continued participation with HealthPartners. Participating practitioners who no longer meet these requirements will be terminated from the network and are not eligible to appeal.

1. Be a graduate from a college/school of Pharmacy accredited by the Accreditation Council for Pharmacy Education (ACPE) or other program approved by the Board of Pharmacy. If education was completed prior to May 1996, applicant must provide documentation of completion of a structured and comprehensive MTM training program approved by the Board of Pharmacy and the ACPE (Accreditation Council for Pharmacy Education).
2. Have a valid, current professional healthcare license – license cannot be suspended or subject to an order to cease or suspend practice - in each state where the pharmacist will see HealthPartners members.

Exceptions:

- a. When the state licensing board does not require a license specific to that state because the person is a commissioned medical officer of, a member of, or employed by, the armed forces of the United States, the United States Public Health Service, the Veterans Administration, any federal institution or any federal agency while engaged in the performance of official duties within the state, and the person is licensed in at least one other U.S. state.
 - b. When the state licensing board does not require a license specific to that state in connection with a state or national emergency.
 - c. If the pharmacist is authorized by a legally recognized interstate practice compact to provide care in that state
3. Have current professional liability insurance coverage that meets contractually established minimum limits. Exception: those practitioners covered by a State Tort Claims Act or Federal Tort Claims Act through employment by the state or federal government or a Federally Qualified Health Center.
 4. Attest to the lack of present illegal drug use.
 5. Complete a credentialing application and all associated documents as required by HealthPartners, Inc.
 6. Not be currently restricted from receiving payments from any Federal program, including, but not limited to Medicare, Medicaid (any state), or third party programs.

Applicants who meet all the criteria for participation listed below may be approved for participation without review by the Credentials Committee. The Credentials Committee may accept non-compliance with one or more of the criteria if the Committee determines that the non-compliance does not indicate a potential or existing administrative or performance issue. If a participating practitioner becomes non-compliant with one or more of the following criteria after initial credentialing or recredentialing, the practitioner's credentials may be brought to the Credentials Committee for further review.

The criteria for participation include, but are not limited to:

1. Not have had a professional healthcare license, clinical practice, or staff privileges that have been denied, terminated, stipulated, restricted, refused, limited, suspended, revoked, not renewed or subject to corrective action, by a peer review organization, professional review board, licensing board, hospital, clinic, managed health care plan, military agency, government agency, other administrative body, or health related agency or organization.

If any of the above past denials, terminations, stipulations, restrictions, refusals, limitations, suspensions, revocations, corrective actions, or non-renewals apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with all corrective actions and monitoring plans imposed by the limiting/restricting authority. If any present restrictions apply, the applicant may be considered for participating practitioner status if (s)he can demonstrate compliance with any corrective action/monitoring plan imposed by the limiting/restricting authority and be willing to provide periodic updates to HealthPartners concerning such compliance.

2. Not have a work history gap or pattern of resignations or terminations of employment/association as an MTM pharmacist which may suggest potential competency or quality of care problems.
3. Not have a history of conduct that may violate state law or standards of ethical conduct governing the practice of medication therapy management.
4. Not have pending charges or be currently charged with, or convicted of a felony, or misdemeanor.
5. Not have a physical or mental condition that may prevent the practitioner from being able, with or without reasonable accommodation, to perform the essential functions of his or her practice with acceptable skill and without posing a health or safety risk to patients.
6. Not have used alcohol or chemical substance(s), including prescription medications, in a way that may have impaired or limited the practitioner's ability to practice medication therapy management with reasonable skill and safety.
7. Not have engaged in any illegal use of controlled substances including use of illegal controlled substances (e.g., heroin, cocaine) or illegal use of legal controlled substances within the last five years.
8. Not have a history of malpractice claim activity or other incidents that suggests a potential competency or quality of care problem.
9. Not be involved in a practice that may be regarded by the medication therapy management professional community as unsound or otherwise inappropriate.
10. Agree with the practice of medication therapy management in a managed care environment and be willing to cooperate with HealthPartners' administrative procedures and other matters.
11. Not have misrepresented, misstated, or omitted a relevant or material fact in credentialing documents.
12. Not have been found liable, guilty or otherwise responsible for sexual harassment, sexual assault, stalking, and/or other domestic assault or any other charge or claim involving sexually inappropriate behavior.
13. Conduct him or herself in a professional manner by not engaging in unprofessional conduct. Unprofessional conduct is defined as conduct that creates a hostile work environment, is detrimental to the delivery of quality care, or has the potential to adversely affect the health or welfare of patients or staff. Unprofessional conduct may include, but is not limited to, behaviors such as:

- Verbal attacks leveled at staff which are personal, irrelevant or go beyond the bounds of fair professional comment
 - Impertinent or inappropriate comments or illustrations
 - Conduct or treatment that is disrespectful, abusive, intimidating or insulting
14. Not have practiced without a professional healthcare license or with a lapsed professional healthcare license.

HealthPartners Credentialing Plan

Appendix B

Delegates Delegated Activities

Delegates

Allina Health
Altru Health System
Aspirus Network
Aurora Health Care
Avera Health System
BayCare Clinic
Bellin Memorial Hospital
Capital Vision Services dba myeyedr
Children's Hospital and Health System (WI)
Children's Health Care MN
Cigna
Cigna Behavioral Health
Cigna Dental
Dean Health Plan
Doctor on Demand (telemedicine)
Essentia Health
EyeMed Vision Care (optometrists only)
Fairview Hospital and Healthcare Services
Froedtert Health
Fulcrum Health
Gundersen Health System
HealthPlus (UnityPoint)
LifeStance
Marshfield Clinic (Security Health Plan)
Mayo Clinic Rochester
Mayo Clinic Health System
Medical College of Wisconsin
Medimore (UnityPoint)
Midlands Choice
Monument Health
Oakleaf Medical Network
Olmsted Medical Center
Paramount Health Options
Private Health Care Systems/MultiPlan
Sanford Health System
St. Luke's Hospital of Duluth
StaffCorp (for SwedishAmerican Health System)
Teladoc Physicians (telemedicine)
ThedaCare
UnityPoint Meriter Hospital
University of IA Hospital and Clinics
University of Nebraska
University of Wisconsin Hospitals and Clinic
Winona Health

Delegated activities include:

Scope of credentialing
Credentialing plan and/or policies and procedures
Credentialing committee (including approval or denial of applications)
Application form and disclosure
Authorization and release of information
Primary source verification
Querying process
Ongoing monitoring of sanctions
Disciplinary action
Notification to authorities
Practitioner appeal rights

Recredentialing