## Stricken language would be deleted from and underlined language would be added to present law. Act 1035 of the Regular Session

1 2	State of Arkansas As Engrossed: S3/8/13 S3/18/13 S3/28/13 S9th General Assembly $As Engrossed: Bill$
3	Regular Session, 2013 SENATE BILL 498
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5	By: Senator Bledsoe
6	By: Representative Ferguson
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8	For An Act To Be Entitled
9	AN ACT TO ALLOW THE ARKANSAS STATE MEDICAL BOARD TO
10	PROVIDE INFORMATION TO CREDENTIALING ORGANIZATIONS
11	INVOLVING PHYSICIAN ASSISTANTS, RADIOLOGY ASSISTANTS,
12	RADIOLOGY PRACTITIONER ASSISTANTS, OCCUPATIONAL
13	THERAPISTS, OCCUPATIONAL THERAPY ASSISTANTS, AND
14	RESPIRATORY CARE PRACTITIONERS; AND FOR OTHER
15	PURPOSES.
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18	Subtitle
19	TO ALLOW THE MEDICAL BOARD TO PROVIDE
20	INFORMATION TO CREDENTIALING
21	ORGANIZATIONS FOR HEALTH CARE
22	PRACTITIONERS.
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25	BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:
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27	SECTION 1. Arkansas Code Title 17, Chapter 95, Subchapter 2, is
28	amended to add an additional section to read as follows:
29	17-95-209. Use of credentialing information.
30	(a) The purpose of this section is to allow the Arkansas State Medical
31	Board to provide information to credentialing organizations.
32	(b) For purposes of this section:
33	(1) "Credentialing information" means:
34	(A) Information regarding a physician assistant's, a
35	radiology assistant's, a radiology practitioner assistant's, an occupational
36	therapist's, an occupational therapy assistant's, or a respiratory care

1	<pre>practitioner's:</pre>	
2	(i) Attestation of the correctness and comple	teness
3	of an application under this section;	
4	(ii) Clinical hospital privileges;	
5	(iii) Current malpractice coverage;	
6	(iv) Drug or alcohol abuse to the extent perm	itted
7	by law;	
8	(v) Education, training, and board certificat	ion;
9	<pre>(vi) Felony convictions;</pre>	
10	(vii) History of appearances before the board	<u>;</u>
11	(viii) History of loss or limitation of privi	<u>leges</u>
12	or disciplinary activity;	
13	(ix) History of Medicare or Medicaid sanction	s or
14	other sanctions;	
15	(x) History of professional liability or malp	<u>ractice</u>
16	claims;	
17	(xi) Loss, surrender, restriction, or suspens	ion of
18	license;	
19	(xii) Professional training, qualifications,	
20	background, practice history, experience, and status of medical licens	<u>e;</u>
21	(xiii) Status of Drug Enforcement Administrat	<u>ion</u>
22	certificate; and	
23	(xiv) Work history; and	
24	(B) Other objective information typically required	<u>by</u>
25	accrediting organizations for the purpose of credentialing health care	<u>!</u>
26	professionals, radiology assistants, radiology practitioner assistants	
27	occupational therapists, occupational therapy assistants, or respirato	ry care
28	practitioners; and	
29	(2) "Credentialing organization" means:	
30	(A) A clinic;	
31	(B) A hospital;	
32	(C) A health maintenance organization;	
33	(D) An insurer;	
34	(E) A managed care organization; and	
35	(F) Another health care organization.	
36	(c) A credentialing organization may utilize credentialing info	rmation

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     provided by the board to evaluate:
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                 (1) Granting or denying the application of a physician
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     assistant, a radiology assistant, a radiology practitioner assistant, an
     occupational therapist, an occupational therapy assistant, or a respiratory
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     care practitioner for affiliation or participation within the organization or
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     its networks;
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                 (2) The quality of services provided by a physician assistant, a
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     radiology assistant, a radiology practitioner assistant, an occupational
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     therapist, an occupational therapy assistant, or a respiratory care
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     practitioner or the physician assistant's, the radiology assistant's, the
     radiology practitioner assistant's, the occupational therapist's, the
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     occupational therapy assistant's, or the respiratory care practitioner's
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     competency or qualifications;
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                 (3) Renewal of the affiliation or participation of a physician
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     assistant, a radiology assistant, a radiology practitioner assistant, an
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     occupational therapist, an occupational therapy assistant, or a respiratory
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     care practitioner; and
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                 (4) The type, extent, or conditions of the physician
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     assistant's, the radiology assistant's, the radiology practitioner
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     assistant's, the occupational therapist's, the occupational therapy
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     assistant's, or the respiratory care practitioner's privileges or
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     participation in the network.
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           (d)(1) The board shall provide to a credentialing organization any
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     credentialing information the board collects concerning a person licensed by
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     the board, if the person authorizes release of the information.
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                 (2) If a person fails or refuses to authorize release of
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     credentialing information under this section, the requesting credentialing
     organization is entitled, on grounds of the failure or refusal, to exclude
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     the person from a privilege, contract, or network of the credentialing
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     organization.
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           (e) This section applies to the following individuals and health
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     practitioners that are licensed by the Arkansas State Medical Board:
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                 (1) Occupational therapists and occupational therapy assistants,
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     licensed under the Arkansas Occupational Therapy Practices Act, § 17-88-101
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(2) Physician assistants, licensed under § 17-105-101 et seq.;

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et seq.;

1	(3) Radiology assistants and radiology practitioner assistants
2	licensed under § 17-106-201 et seq.; and
3	(4) Respiratory care practitioners licensed under the Arkansas
4	Respiratory Care Act, § 17-99-101 et seq.
5	(f)(l) The board shall adopt rules establishing and describing the
6	procedures for collection and release of information under this section.
7	(2) The board shall adopt policies and rules after seeking the
8	advice from the following committees:
9	(A) The Arkansas State Occupational Therapy Examining
10	Committee established under § 17-88-201 et seq.;
11	(B) The Arkansas State Respiratory Care Examining
12	Committee established under § 17-99-203 et seq.; and
13	(C) The physician assistant advisory committee established
14	under § 17-105-117.
15	(g)(l) The board may charge a credentialing organization a reasonable
16	fee for the use of the credentialing service established under this section.
17	(2) The fee shall be set after receiving advice from the
18	advisory committee and shall be set at a rate to reimburse the board for the
19	cost of administering this section.
20	(h) The board shall adopt rules establishing a credentialing
21	information system, and the rules shall indicate the procedures for
22	collection and release of credentialing information under this section.
23	(i)(l) The board shall not disclose credentialing information to a
24	party other than the applicable health care provider and the credentialing
25	organization and its designated credentialing and appeals, peer review, and a
26	quality improvement committee or body.
27	(2) Except as permitted in this section, credentialing
28	information shall not be used for a purpose other than review by the board
29	and a credentialing organization of the professional background, competency,
30	qualifications, and credentials or renewal of credentials of a health care
31	provider or appeals of a review by the board or a credentialing agency.
32	(3) Credentialing information is exempt from disclosure under
33	the Freedom of Information Act of 1967, § 25-19-101 et seq.
34	(4) Credentialing information may be disclosed:
35	(A) By the board in a disciplinary hearing before the
36	board or in a trial or appeal of a board action or order;

1	(B) By the board or a credentialing organization to a
2	licensing, regulatory, or disciplinary authority or agencies of the United
3	States, another state, or jurisdiction;
4	(C) In a legal or regulatory proceeding that:
5	(i) Is brought by a health care provider, a
6	representative of the health care provider or a class health care provider, a
7	local, state, or federal agency or authority, or a patient or group or class
8	of patients or an authorized representative or agent of a patient or group or
9	class of patients; and
10	(ii) Challenges the actions, omissions, or conduct
11	of the credentialing organization with respect to credentialing of a health
12	care provider or the grant or denial of an affiliation or participation of
13	the health care provider with or in the credentialing organization or a
14	network of the credentialing organization; or
15	(D) By a party when the party is authorized to disclose
16	credentialing information by the health care provider to whom the
17	credentialing information relates.
18	(5) The evaluation and discussion of credentialing information
19	by a credentialing organization is not subject to discovery and is not
20	admissible under the Arkansas Rules of Civil Procedure or the Freedom of
21	Information Act of 1967, § 25-19-101 et seq.
22	(6) The board may enter into a contractual agreement with a user
23	of the credentialing information system to define the type and form of
24	information to be provided and to give a user assurances of the integrity of
25	the information collected.
26	(7) The board may hire employees, enter into contracts with
27	attorneys, individuals, or corporations for services necessary to implement
28	this section.
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30	SECTION 2. Arkansas Code § 17-95-107(b)(7), concerning fees charged by
31	physician credentialing organizations, is amended to add an additional
32	subdivision to read as follows:
33	(7)(A) The board may charge credentialing organizations a reasonable
34	fee for the use of the credentialing service as established by rule and
35	regulation.
36	(B) The fee shall be set in consultation with the advisory

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1	committee and shall be set at such a rate as will reimburse the board, when
2	added to the credentialing assessments collected from physicians, for the
3	cost of maintaining the credentialing information system.
4	(C) A credentialing organization shall not charge or seek
5	payment of the fee from a physician licensee.
6	(C) (D) The board's costs may not exceed the fees charged
7	by private vendors with a comparable statewide credentialing service.
8	(D)(E) The board may assess each physician licensee an
9	amount not to exceed one hundred dollars (\$100) per year to offset the cost
10	of providing the credentialing service.
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12	/s/Bledsoe
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15	APPROVED: 04/10/2013
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