

SUBSTITUTE FOR
HOUSE BILL NO. 5487

A bill to amend 1939 PA 280, entitled
"The social welfare act,"
(MCL 400.1 to 400.119b) by adding section 111m.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 SEC. 111M. (1) THE DEPARTMENT SHALL WORK WITH CONTRACTED
2 HEALTH PLANS TO DO ALL OF THE FOLLOWING:

3 (A) ESTABLISH AND REVISE, AS NECESSARY, A UNIFORM
4 CREDENTIALING PROCESS FOR PROVIDERS OF MEDICAL ASSISTANCE REQUIRED
5 IN THIS SECTION. IN COMPLYING WITH THIS SUBSECTION, THE DEPARTMENT
6 SHALL CONSULT WITH MEDICAL SERVICES PROVIDERS THAT ARE REQUIRED TO
7 ACCEPT CREDENTIALING UNDER THIS SECTION.

8 (B) ENSURE THAT THE UNIFORM CREDENTIALING PROCESS ESTABLISHES
9 A STREAMLINED UNIFORM CREDENTIALING REQUIREMENT FOR AN INDIVIDUAL
10 WHO PROVIDES MEDICAL SERVICES THROUGH A CONTRACTED HEALTH PLAN.

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1 (C) BY 6 MONTHS AFTER THE EFFECTIVE DATE OF THE AMENDATORY ACT
2 THAT ADDED THIS SECTION AND ANNUALLY AFTER THAT DATE, SUBMIT A
3 REPORT TO THE LEGISLATURE THAT DESCRIBES ITS ACTIVITIES UNDER THIS
4 SECTION, INCLUDING ESTABLISHMENT OF AND ANY REVISIONS TO THE
5 UNIFORM CREDENTIALING PROCESS.

6 (2) A MANAGED CARE PROVIDER THAT PROVIDES, EITHER DIRECTLY OR
7 THROUGH A CONTRACT, MEDICAL SERVICES TO MEDICAL ASSISTANCE
8 RECIPIENTS OF THIS STATE MUST COMPLY WITH THE UNIFORM CREDENTIALING
9 PROCESS. ON AND AFTER THE DATE THE UNIFORM CREDENTIALING PROCESS IS
10 CERTIFIED BY THE DIRECTOR OF THE DEPARTMENT AS BEING IN FULL FORCE
11 AND EFFECT, THE DEPARTMENT MUST ENSURE THAT ALL OF THE FORMS AND
12 PROCESSES IT USES THAT RELATE TO PROVIDING MEDICAL SERVICES COMPLY
13 WITH THE UNIFORM CREDENTIALING PROCESS. UNTIL 3 YEARS AFTER THE
14 EFFECTIVE DATE OF THE AMENDATORY ACT THAT ADDED THIS SECTION, THIS
15 SUBSECTION DOES NOT APPLY TO A MANAGED CARE PROVIDER CONTRACTING
16 WITH A HEALTH PLAN IN A REGION THAT IS SERVED BY FEWER THAN 2
17 HEALTH PLANS.

18 [(3) PRIMARY OR SECONDARY CREDENTIAL VERIFICATION REMAINS THE
19 RESPONSIBILITY OF EACH INDIVIDUAL HEALTH PLAN. THIS SECTION DOES NOT
PROHIBIT A MANAGED CARE PLAN FROM APPROVING OR DENYING A MEDICAL
SERVICES PROVIDER'S PARTICIPATION IN THE MANAGED CARE PLAN, OR FROM
COLLECTING ADDITIONAL INFORMATION FROM A MEDICAL SERVICES PROVIDER
NECESSARY TO MEET FEDERAL OR STATE LAW, A REQUIREMENT OF A MANAGED
CARE CONTRACT WITH THE DEPARTMENT, OR PLAN-SPECIFIC METRICS.]

20 (4) AS USED IN THIS SECTION, "UNIFORM CREDENTIALING PROCESS"
21 MEANS THE UNIFORM MEDICAL SERVICE PROVIDER CREDENTIALING PROCESS
22 ESTABLISHED, MAINTAINED, AND REVISED AS REQUIRED IN SUBSECTION
23 (1) (A) THAT MEETS STATE AND FEDERALLY RECOGNIZED STANDARDS.

24 Enacting section 1. This amendatory act takes effect 90 days
25 after the date it is enacted into law.