

HOUSE BILL NO. HB0082

Provider enrollment-standards.

Sponsored by: Joint Labor, Health & Social Services Interim Committee

A BILL

for

1 AN ACT relating to the insurance code; requiring health  
2 insurance carriers to follow specified guidelines regarding  
3 health care provider credentialing; specifying that health  
4 carriers shall not be required to violate or fail to meet  
5 requirements of a nationally recognized accrediting entity;  
6 providing definitions; specifying applicability; requiring  
7 rulemaking; and providing for effective dates.

8

9 *Be It Enacted by the Legislature of the State of Wyoming:*

10

11 **Section 1.** W.S. 26-56-101 and 26-56-102 are created  
12 to read:

13

14

CHAPTER 56

15

HEALTH CARE PROVIDER CREDENTIALING

1

2           **26-56-101. Definitions.**

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4           (a) As used in this chapter:

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6                   (i) "Applicant" means a health care provider who  
7 submits an application to a health carrier to become  
8 credentialed as a participating health care provider in one  
9 (1) or more of the health carrier's provider networks;

10

11                   (ii) "Application" means an applicant's most  
12 recent application to become credentialed by a health  
13 carrier as a participating health care provider in one (1)  
14 or more of the health carrier's provider networks;

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16                   (iii) "Completed credentialing application"  
17 means a credentialing application that is free of defects  
18 and contains all of the information that, when later  
19 supplemented by verification and documentation gathered by  
20 the health carrier during the primary source verification  
21 process, is necessary for the health carrier to make a  
22 credentialing decision;

23

1           (iv) "Credentialing" means the process by which  
2 a health carrier or its designee collects information  
3 concerning an applicant, assesses whether the applicant  
4 satisfies the requirements to become a participating health  
5 care provider in one (1) or more of the health carrier's  
6 provider networks, verifies all information submitted by  
7 the applicant and approves or denies the applicant's  
8 application;

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10           (v) "Health carrier" means as defined by W.S.  
11 26-13-303(a)(iii) and shall not mean pharmacy benefit  
12 managers as defined by W.S. 26-52-102(a)(vii).

13

14           **26-56-102. Health care provider credentialing;**  
15 **requirements.**

16

17           (a) Within seven (7) calendar days after a health  
18 carrier receives an application for credentialing, the  
19 health carrier shall provide the applicant notice of  
20 receipt of the application in written or electronic form  
21 and contact information for the person reviewing the  
22 application. After receiving an application, a health  
23 carrier shall determine whether the application is

1 complete. If the health carrier determines that the  
2 application is incomplete, the health carrier shall notify  
3 the applicant in writing or by electronic means that the  
4 application is incomplete within thirty (30) calendar days  
5 after the date the health carrier received the application.  
6 The notice shall describe the items that are required to  
7 complete the application. The health care provider shall  
8 submit a completed credentialing application within thirty  
9 (30) calendar days of receiving the notice. Failure of the  
10 health care provider to submit a completed credentialing  
11 application within thirty (30) days of receiving the notice  
12 shall restart the timelines in this subsection.

13

14 (b) A health carrier shall conclude the process of  
15 credentialing an applicant within sixty (60) calendar days  
16 after the health carrier receives the applicant's  
17 application. The sixty (60) calendar day period shall pause  
18 if a health care provider receives notification that their  
19 application is incomplete and shall resume after the health  
20 carrier verifies that the health care provider has  
21 resubmitted a completed credentialing application. A health  
22 carrier shall provide each applicant written or electronic

1 notice of the outcome of the applicant's credentialing at  
2 the conclusion of the credentialing process.

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4 (c) If an applicant becomes credentialed as a  
5 participating health care provider in a health carrier's  
6 network and a fully executed contract between the health  
7 care provider and the health carrier is in effect prior to  
8 covered services being provided, the health carrier shall  
9 reimburse the applicant for all covered reimbursable health  
10 care services provided by the applicant beginning with the  
11 date the health carrier received a completed credentialing  
12 application from the applicant, unless otherwise preempted  
13 by federal law.

14

15 (d) A health carrier shall not be required to approve  
16 any application for credentialing, except as provided by  
17 W.S. 26-22-503.

18

19 **Section 2.** The department of insurance shall  
20 promulgate rules providing for a uniform credentialing  
21 application that shall be used by applicants and health  
22 carriers. Dental and vision insurance are exempt from using  
23 the uniform application.

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2           **Section 3.** Nothing in this act shall require a health  
3 carrier to violate or fail to meet a standard or  
4 requirement of a nationally recognized accrediting entity.

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6           **Section 4.** This act shall apply to applications for  
7 credentialing submitted to health carriers on or after July  
8 1, 2025.

9

10           **Section 5.**

11

12           (a) Except as otherwise provided by subsection (b) of  
13 this section, this act is effective July 1, 2025.

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15           (b) Sections 2 and 5 of this act are effective  
16 immediately upon completion of all acts necessary for a  
17 bill to become law as provided by Article 4, Section 8 of  
18 the Wyoming Constitution.

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(END)