

4123-6-02.6 Provider access to the HPP-selection by an MCO.

(A) The bureau shall maintain a public list of bureau certified providers. The bureau shall make the list of bureau certified providers available to a requesting party at cost.

(B) A bureau certified provider is eligible for selection by an MCO to participate on the MCO's provider panel. A bureau certified provider may participate in a single MCO or may participate in more than one MCO panel.

(C) A provider identified by an MCO for temporary privileges in its panel of providers that is not a bureau certified provider shall be assisted by the MCO in applying for bureau provider credentialing and certification.

(D) The bureau or MCO shall not discriminate against any category of health care provider when establishing categories of providers for participation in the HPP. However, neither the bureau nor an MCO is required to accept or retain any individual provider in the HPP.

(E) The MCO shall include in its panel a substantial number of the medical, professional, and pharmacy providers currently being utilized by employees. An MCO may limit the number of providers on its MCO provider panel, but must do so based upon objective data approved by the bureau, such as reasonable patient access, community needs, the potential number of employees the MCO is applying to service, and other performance criteria, without discrimination by provider type. An MCO may select out-of-state providers as members of the MCO panel.

(F) A bureau certified provider not selected by an MCO may still provide treatment under the HPP as a bureau certified provider, but must submit to the medical management of the employee's employer's MCO as provided in rule 4123-6-042 of the Administrative Code.

Effective: 1/1/01

Prior Effective Date: 2/16/96