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**I. SCOPE**

This policy applies to (1) Canopy Health, LLC (“Canopy Health”) and its subsidiaries and affiliates (each, an “Affiliate”); and (2) any other entity or organization with which Canopy Health contracts for such entity or organization to perform provider credentialing on Canopy Health’s behalf (each a “Contractor”). To the extent that any Contractors perform functions set forth herein, references to “Canopy Health” or the “Credentialing Department” shall be interpreted to refer to such Contractors.

**II. PURPOSE**

The purpose of this procedure is to ensure that all providers of medical or ancillary services maintain current licensure, specifically state license and DEA, if applicable.

**III. DEFINITIONS**

**Credentialing Peer Review Committee:** A group of providers selected by Canopy Health that evaluates the qualifications and makes the final determination regarding the status of providers applying for participation in Canopy Health’s network, and evaluate the necessity, quality or utilization of care rendered by providers in the network. Peer review is conducted by other health care providers from the same discipline or with similar or essentially equal qualifications who are not in direct economic competition with the health care professional under review.


**Participating Provider:** Any practitioner or organization that is contracted or employed by Canopy Health to render services to members.

**IV. POLICY**

- A. It is the policy of Canopy Health that all active participating providers maintain current state-specific licenses and DEA licenses, if applicable. In instances where MDs/DOs do not have current DEA licenses, DEA coverage must be provided per the standards detailed in CD 1003 and CD 1004.

**V. PROCEDURE**

- A. At the time of credentialing or recredentialing, all licensure information is entered in the credentialing database and primary source verified per the standards detailed in CD 1003 and CD 1004.
- B. Canopy Health will monitor the expiration dates of the state medical license, business license and DEA license through a monthly report generated from credentialing database for all Participating Providers credentialed by Canopy. Canopy will follow

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up with applicable Participating Providers or primary sources to obtain state license, business license and/or DEA license renewal information prior to or upon the expiration of such licenses.

- C. Canopy Health will monitor officially published changes in Participating Providers' state medical licensure and DEA licensure status through a monthly review of the NPDB. By the 15<sup>th</sup> of the month, Canopy will run a Participating Provider roster and compare the list against the NPDB.
- D. If any Participating Provider has a change in state medical licensure or DEA licensure status identified through the monthly review (e.g. expiration of license without renewal, loss of licensure, restriction on licensure, etc.), the CD will flag the provider for further review by the CPRC and/or Medical Director.
  - 1. This information will be presented at the next CPRC meeting, or to the Medical Director if immediate action is required, for review and final decision, e.g. monitoring of provider, termination from network, etc.

## VI. ENFORCEMENT

All employees whose responsibilities are affected by this policy are expected to be familiar with the basic procedures and responsibilities created by this policy. Failure to comply with this policy will be subject to appropriate performance management pursuant to all applicable policies and procedures, up to and including termination. Such performance management may also include modification of compensation, including any merit or discretionary compensation awards, as allowed by applicable law.

## VII. REFERENCES

- A. NCQA – CR 3
- B. NCQA – CR 5

### REVISION HISTORY:

Version Date	Edited By	Reason for Change
01/01/2017	M. Durbin	Create Policy
11/01/2018	R. Scott	Revisions for NCQA Standards
101/01/2019	R. Scott	Updated to explicitly list details related to sanctions reporting.