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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 or provider directory maintenance 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 policy is to define the minimum qualifications, relating to education/training and work experience, required to contract a practitioner as a Primary Care Provider ("PCP") within Canopy Health's network.

### **III. DEFINITIONS**

**AIDS:** Acquired Immunodeficiency Syndrome.

HIV: Human Immunodeficiency Virus.

**Standing Referral:** A standing referral is a referral made by the PCP for more than one (1) visit to a specialist or specialty care center as indicated in an approved treatment plan for a particular diagnosis; allows a member to see a specialist without needing new referrals for each visit; members may request a standing referral for a chronic condition requiring specialized care.

**Category 1 Continuing Education:** For physicians, continuing medical education courses recognized as qualifying for category 1 credit by the Medical Board of California; for nurse practitioners, continuing education contact hours recognized by the California Board of Registered Nursing; for physician assistants, continuing education units approved by the American Association of Physician Assistants.

# IV. POLICY

- A. It is the policy of Canopy Health to identify practitioners in its network who meet the minimum criteria for categorization as HIV/AIDS Specialists as defined below:
- B. HIV/AIDS Specialist means a physician who holds a valid, unrevoked and unsuspended certificate to practice medicine in the state of California and who meets any one of the following four criteria:
  - 1. Is credentialed as an "HIV Specialist" by the American Academy of HIV Medicine
  - 2. Is board certified, or has earned a Certificate of Added Qualification, in the field of HIV medicine granted by a member board of the American Board of Medical

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Specialties, should a member board of that organization establish board certification, or a Certificate of Added Qualification, in the field of HIV medicine

- 3. Is board certified in the field of infectious diseases by a member board of the American Board of Medical Specialties and meets the following qualifications:
  - a. In the immediately preceding 12 months has clinically managed medical care to a minimum of 25 patients who are infected with HIV; and
  - b. In the immediately preceding 12 months has successfully completed a minimum of 15 hours of category 1 continuing medical education in the prevention of HIV infection, combined with diagnosis, treatment, or both, of HIV-infected patients, including a minimum of 5 hours related to antiretroviral therapy per year
- 4. Meets the following qualifications:
  - a. In the immediately preceding 24 months has clinically managed medical care to a minimum of 20 patients who are infected with HIV; and
  - b. Has completed any of the following:
    - (i) In the immediately preceding 12 months has obtained board certification or recertification in the field of infectious diseases from a member board of the American Board of Medical Specialties or In the immediately preceding 12 months has successfully completed a minimum of 30 hours of category 1 continuing medical education in the prevention of HIV infection, combined with diagnosis, treatment, or both, of HIV-infected patients; or
    - (ii) In the immediately preceding 12 months has successfully completed a minimum of 15 hours of category 1 continuing medical education in the prevention of HIV infection, combined with diagnosis, treatment, or both, of HIV-infected patients and has successfully completed the HIV Medicine Competency Maintenance Examination administered by the American Academy of HIV Medicine.
- C. HIV/AIDS Specialists will be identified and captured in the credentialing database during the initial and recredentialing cycles. Furthermore, an annual validation of said practitioners will be completed to ensure their continued qualification as HIV/AIDS Specialists.

## V. PROCEDURE

A. Canopy Health's credentialing department will determine if a provider meets the above criteria for categorization as a HIV/AIDS Specialist during the initial and

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recredentialing cycle by requesting that practitioners complete the HIV Attestation form.

- B. Upon determination of provider's qualifications, Canopy Health will update the credentialing database with this information.
- C. Annually, the Canopy Health Credentialing Department or Contractor will conduct an outreach to all previously identified HIV/AIDS Specialists and other qualifying practitioners, e.g. PCPs, Internists, Pulmonologists, Infectious Disease practitioners.
  - 1. The practitioners will be instructed to complete the Canopy Health HIV/AIDS Specialist Designation form and return it within 30 days of receipt.
  - 2. The practitioners will need to indicate if they do or do not wish to be a designated as HIV/AIDS Specialists.
    - a. Those that do wish to be designated as HIV/AIDS Specialists must indicate which of the four criteria, as mentioned above, they meet that qualifies them for categorization as an HIV/AIDS Specialist.
  - 3. Canopy Health will conduct three outreaches to all providers to ensure timely response.
- D. Once the completed forms are returned to Canopy Health, the Canopy Health Credentialing Department will update the credentialing database and generate a new roster of HIV/AIDS Specialists.
- E. If applicable, this roster will be forwarded to the Canopy Health Utilization Management Department.
- F. A minimum of two years of HIV/AIDS Specialist information will be maintained by the Canopy Health Credentialing Department.

## 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

1. Not applicable