
Appendix F

Acceptance/continued participation criteria

Certified Nurse Midwife

Amendments to this Appendix F shall be effective as of June 6, 2018 (the “**Policy Effective Date**”).

To be allowed acceptance into or continued participation within the Priority Health network, Certified Nurse Midwives must satisfy the following listed Acceptance/Continued Participation Criteria:

1. Employment by one of the following: a participating OB/GYN physician; a participating physician group that includes an OB/GYN physician; a participating family practitioner that actively performs deliveries and has privileges at a participating hospital to perform deliveries; a participating hospital.
2. Confirmation of an established practice agreement, for medical consultation, collaboration, or referral, to a participating obstetrician/gynecologist or family practitioner who will oversee clinical activities. The physician must have OB/GYN privileges at the hospital where the CNM will practice, and the CNM must establish a formal consultative arrangement with an OB/GYN or family practice physician.
3. Practitioner must hold valid, current, and unrestricted licenses/required certifications issued by the State(s) in which they practice their healing art. Practitioner must provide information regarding any previous loss of license or certification, or any voluntary relinquishment of license or certification, and provide evidence that these earlier incidents do not demonstrate probable future substandard professional performance. A practitioner without a valid license due to suspension or revocation by any State Licensing Board or failure to renew within the allowed grace period will be subject to automatic and immediate termination from the Priority Health network.
4. Practitioner must demonstrate current, stable (consistent work history in the scope of practice), and verifiable work history of the two most recent, consecutive years (including training). Practitioner shall not be admitted to Priority Health network to the extent an unstable work history (absence of consistent work history in the scope of practice), together with other factors in this Appendix F, is determined to bear negatively upon their professional competence or conduct, or ability to successfully participate in the network.
5. Practitioner must provide evidence of their ability to meet the Administrative Standard for After Hours Coverage. Evidence may be supplied via the initial application or through separate written documentation.
6. Practitioner must hold current clinical privileges in good standing (this includes all membership and privilege status categories of Active, Courtesy, Provisional, Temporary, etc.) at a licensed participating hospital or provide evidence that they do not require hospital clinical privileges to deliver satisfactory professional services. Evidence that Priority Health is aware that the practitioner is without clinical privileges and that the practitioner has made arrangements for in-house coverage of his or her Priority Health patients by other participating physicians with privileges at a participating hospital shall suffice to fulfill this requirement.

7. Practitioner must provide information regarding any previous loss of privileges or voluntary relinquishment of privileges at a licensed hospital and provide evidence that these earlier incidents do not demonstrate probable future substandard professional performance.
8. Practitioner must be in good standing under the Medicare and Medicaid programs, adhering to all Medicare and Medicaid requirements including, but not limited to, the requirement to inform Priority Health of any changes to their street address, phone number, and office hours or other changes that affect availability to ensure accuracy of the Priority Health Provider Directory.
9. Current malpractice insurance coverage of \$100,000 per occurrence and \$300,000 aggregate (minimum).
10. Practitioner must have an absence of a history of involvement in a malpractice suit, arbitration, or settlement; or, in the case of a nurse-midwife with this history; evidence must be provided that the history of malpractice involvement is not indicative of probable future substandard professional performance.
11. Practitioner must have an absence of a history of denial or cancellation of professional liability insurance; or, in the case of a nurse-midwife with this history, evidence must be provided that the history is not indicative of probable future substandard professional performance.
12. Practitioner must have an absence of a history of involuntary termination of employment or contract as a health care practitioner; or, in the case of a nurse-midwife with this history, evidence must be provided that this history is not indicative of probable future substandard professional performance.
13. Practitioner must have an absence of a history of professional disciplinary action; or, in the case of a nurse-midwife with this history; evidence must be provided that this history is not indicative of probable future substandard professional performance.
14. Practitioner must have an absence of a history of failing to conduct themselves with a professional demeanor or of engaging in abusive or destructive behavior in professional matters. Nurse-midwife must avoid conduct which reflects adversely on their professional fitness.
15. Practitioners under a group contract whom are terminated from that group are no longer considered contracted with Priority Health and are subject to immediate and automatic termination from the Priority Health network. Certified nurse midwife may contact Priority Health to determine eligibility to contract with Priority Health on an individual basis.
16. Practitioner must have an absence of a history indicating (in the sole discretion of Priority Health) a tendency toward inappropriate utilization management of medical resources.
17. Practitioner must have an absence of a history of indictment or criminal conviction; or, in the case of a practitioner with this history; evidence must be provided, in the form of a comprehensive narrative, to include all information relevant to the action taken and its satisfactory resolution, that this history is not indicative of probable future substandard professional performance. A conviction within the meaning of this criterion shall include a plea or verdict of guilty or a plea of no contest.

The Credentialing Committee, in the exercise of its discretion, shall make the determination of sufficiency based on the information provided. Practitioner shall not be admitted to the Priority Health network to the extent any indictment or criminal conviction, together with other factors in this Appendix, is determined to bear negatively upon their professional competence or conduct, or ability to successfully participate in the network.

18. Practitioner must have an absence of any history, in addition to that specified in other Criteria, that in any way is indicative of probable future substandard professional performance.
19. Practitioner must have an absence, or adequate control of, physical, mental health, or substance abuse problems which may interfere with their ability to practice their profession or facilitate cooperative working relationships, or which may pose a threat to their patients. In conjunction with this requirement, Nurse-midwives must cooperate openly and fully with any required health assessment and must provide any reasonably requested evidence of health status.
20. Practitioner must comply with all Priority Health rules, regulations, bylaws, and the terms of their practitioner participation agreements.
21. Practitioner shall not be known to have made any misrepresentations to Priority Health's Board of Directors, employees, agents, or enrollees regarding the provision of services to enrollees.
22. Practitioner must follow current practice standards for the Certified Nurse Midwife specialty as recognized by the American College of Nurse Midwives Standards for the Practice of Midwifery, Core Competencies for Basic Midwifery Practice, and legislation governing nurse midwifery practice.
23. Nurse-midwife must notify Priority Health immediately if there is any change in employment/practice agreement or hospital status.
24. Effective September 23, 2003, any foreign-born [nurse or physician assistant] entering the United States must submit certification as issued by one of the following approved entities: The Commission on Graduates of Foreign Nursing Schools, The National Board for Certification in Occupational Therapy, The Foreign Credentialing Commission on Physical Therapy, or another such organization that is subsequently approved by the Department of Homeland Security. Certification is required regardless if the applicant is educated and trained in the United States.
25. Practitioner shall not have falsified information on their applications, provided inaccurate information on their applications, failed to respond to requests for additional information or failed to notify the Credentialing Committee regarding relevant changes in their status. Any application not meeting this criteria will be considered incomplete, made inactive and will not be processed.