

**MEDICAL SOCIETY**  
of the  
**STATE OF NEW YORK**

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*Division of Governmental Affairs*  
**MEMORANDUM IN SUPPORT**

**PASSED ASSEMBLY**

**A.3077 (GOTTFRIED)**

**ON SENATE FLOOR CALENDAR**

**S.4335 (SALAZAR)**

**AN ACT to amend the public health law and the insurance law in relation to certain application and referral forms for health care plans**

This legislation would amend relevant sections of the Public Health Law and Insurance Law to require the creation and use of uniform credentialing, re-credentialing and referral forms for physicians and other providers to use for the purposes of applying for and being maintained on a health care plan's provider panel and hospital's staff. **The Medical Society of the State of New York supports this bill.**

Physicians and their staff spend an inordinate amount of time completing paperwork and dealing with other bureaucratic hassles for the purposes of being able to render necessary care to their patients. One example of this "hassle factor" is the credentialing and re-credentialing process, where a physician submits paperwork in order to be accepted and maintained on the panel of a health plan, and to be granted employment or staff privileges at a hospital. In this process, physicians present documentation of their professional privileges, licensure, evidence of malpractice insurance and malpractice history to such health care plan or hospital for their review. While we certainly recognize the importance of ensuring that a physician is properly qualified, the current process can be unnecessarily redundant and cumbersome.

While most insurance companies in New York State have signed on to use a single credentialing database maintained by the Coalition for Affordable Quality Healthcare (CAQH), physicians in some instances still must complete company-specific forms. There is no good reason why there should not be in use right now a single standard credentialing and re-credentialing form so multiple forms would not have to be used. This legislation would facilitate and require the use of these standard forms, thereby reducing some of the administrative hassles that physicians now face. Representatives from health care plans, hospitals, and health care providers would be involved in the development of the uniform forms. Certainly, the CAQH form could be adopted as the uniform form.

Importantly as well, this legislation would require the creation of a standard referral form that a primary care physician may use to facilitate care for a patient from a specialist physician. Similar to the credentialing forms, some health care plans may have their own referral forms that are substantially similar, but different enough so that the physician must use each plan's form instead of a single form. A uniform referral form would alleviate further unnecessary administrative hassles that physicians face in attempting to facilitate appropriate care for their patients.

**For all the above reasons, the Medical Society supports this bill and urges its enactment.**

Ma/support  
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