

HealthLink Professional Standards

As part of the contracting process each Provider must satisfy the applicable selection standards before the Provider is eligible to apply for participation in one or more of HealthLink's programs/networks.

If any applicant does not meet the selection standards outlined below, the applicant's request to participate in HealthLink programs/networks will not be processed.

- 1. Providers must enter into the current Agreement and abide by and comply with all terms and conditions of the Agreement and fulfill all obligations imposed on the Provider under such Agreement. Concurrent with HealthLink's periodic recredentialing, the Provider must enter into the then current written Agreement.
- 2. Providers who participate in the networks or programs of any other corporate affiliate in the Elevance Health family of companies must be in good standing with such affiliates, abiding by and complying with all terms and conditions of the affiliate's provider agreement and fulfill all obligations imposed on the Provider under the affiliate's provider agreement.
- 3. Provider's primary office location must be located within the HealthLink service area.
- 4. Providers must not be restricted from participating in one or more of HealthLink's networks or programs by an exclusive or other arrangement with any person or entity other than HealthLink.
- 5. In certain geographical areas, Providers may be required to participate in one or more of the HealthLink networks or programs through an intermediary with whom HealthLink has an exclusive or other restrictive arrangement.
- Providers must maintain active hospital privileges with at least one or more of the network
 hospitals pertaining to HealthLink's specific networks or programs of interest, where applicable.
 Providers may also access hospital coverage by using the services of in-network hospital-based
 providers.
- 7. Providers who participate in concierge practices must still be available to provide services to Members who participate in HealthLink's networks or programs who are not interested in paying a fee for the additional concierge services. Providers cannot charge Members additional fees, beyond the Member's coinsurance, copay, or deductible for covered services.
- 8. Providers must not receive, give, provide, or condone any incentives or kickbacks, monetary or otherwise, in exchange for the referral of a Member to other providers or facilities.
- 9. Providers must maintain professional liability insurance coverage, on a per occurrence basis, in the amount of \$500,000, and \$1,000,000 in the aggregate. Providers are encouraged to maintain professional liability insurance coverage, on a per occurrence basis, in the amount of \$1,000,000, and \$3,000,000 in the aggregate.
- 10. Providers must be available to treat patients at least twenty (20) hours per week, if the provider's specialty is primary care physician or OB/GYN.
- 11. Providers must offer or arrange for twenty-four (24) hours, seven (7) days per week coverage for HealthLink Members.
- 12. Providers may be excluded from participation if the Provider's application or other information obtained as part of the application or review process:
 - a. is found to be incomplete,
 - b. contains unacceptable information,
 - c. is believed or determined to contain untrue, misrepresented, or fraudulent statements, or

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- d. contains information or is determined to be unacceptable by HealthLink, for any reason(s) listed above, or for any other reason, including, without limitation, the following reasons:
 - i. Provider's liability Claims history or outcomes of litigation raises questions regarding the care that may be provided by the Provider;
 - ii. Provider's background raises questions regarding the ethical conduct of the Provider;
 - iii. Provider's application was previously denied by HealthLink or one of its affiliates within the past thirty-six (36) months;
 - iv. Provider's Agreement or participation under a provider agreement with HealthLink was previously suspended, terminated, or non-renewed;
 - v. review of the Provider's practice indicates that the Provider practices, or provides services, in a manner that might unreasonably increase HealthLink's cost of providing health care services to Members:
 - vi. Provider is in or joining a professional practice or a professional group practice that is currently being investigated by the Special Investigations Unit and/or the Clinical Investigations Unit; or
 - vii. Provider is in or joining a professional practice or a professional group practice that has demonstrated continued non-compliance with HealthLink policies and procedures and/or the policies and procedures of any HealthLink affiliate.