

EXHIBIT A:

(A) Electronic Application Submission

Health insurers (or designee) must adopt and implement a standard credentialing application including a process for the electronic submission of a credentialing application. To the greatest extent possible, by December 31, 2019 health insurers must establish an electronic process to submit supporting documentation for a credentialing.

(C) Acknowledgements

Health insurers must provide written or electronic acknowledgement to an applicant **within 7** calendar days after the insurer's receipt of the application, if complete or incomplete. If the insurer has not received any response providing the requested information within 30 calendar days, the insurer may deem the application withdrawn.

(F) Availability of Credentialing Information; Policies

An insurer must make the following nonproprietary information available to all applicants for credentialing and must post the information on its website: (a) the applicable credentialing policies and procedures; (b) a list of all the information required to be included in an application; (c) a checklist of materials that must be submitted in the credentialing process; (d) designated contact information, including a designated point of contact, an e-mail address and a telephone number to address any credentialing inquiries.

(F) Availability of Credentialing Information; Policies

On completion of the credentialing process, a health insurer shall make all nonproprietary information pertaining to a provider's credentialing application and final decision available to the applicant on request, if allowed by law.