- (3) (5) If requested by the Department, a hospital shall provide documentation that, prior to employing or granting privileges to a physician, the hospital has complied with the requirements of this subsection and that, prior to renewing employment or privileges, the hospital has complied with the requirements of this subsection.
- (4) (6) If a hospital fails to establish or maintain a eredentialling <u>CREDENTIALING</u> process required under this subsection, the Secretary may impose the following penalties:
 - (i) Delicensure of the hospital; or
 - (ii) \$500 per day for each day the violation continues.

Article - Insurance

15 112.1.

- (a) (1) In this section the following words have the meanings indicated.
 - (2) (i) "Carrier" means:
 - 1. an-insurer:
 - 2. a nonprofit health service plan;
 - 3. a health maintenance organization;
 - 4. a dental-plan-organization; [or]
- 5. A MANAGED CARE ORGANIZATION AS DEFINED IN § 15-101(F) OF THE HEALTH—GENERAL ARTICLE;
- 6. A MANAGED CARE BEHAVIORAL HEALTH CARE ORGANIZATION AS DEFINED IN § 15–127(A)(6) OF THIS TITLE: OR
- [5.] 7. any other person that provides health benefit plans subject to regulation by the State:
- (ii) "Carrier" includes an entity that arranges a provider panel for a carrier.
- (3) "Credentialing intermediary" means a person to whom a carrier has delegated credentialing or recredentialing authority and responsibility.
- (4) "HEALTH CARE FACILITY" HAS THE SAME MEANING AS IN § 19–114 OF THE HEALTH—GENERAL ARTICLE.
- [(4)] (5) "Health care provider" means an individual who is licensed, certified, or otherwise authorized under the Health Occupations Article to provide health care services OR MENTAL HEALTH SERVICES.
- [(5)] (6) "Provider panel" means the providers that contract with a carrier to provide health care services to the enrollees under a health benefit plan of the carrier.