

CREDENTIALING DELEGATION AGREEMENT

BETWEEN

DEAN HEALTH PLAN, INC.

AND

CARE WISCONSIN FIRST, INC.

RECEIVED
JUL 06 2009
BY: _____

This Credentialing Delegation Agreement ("Agreement") is made and entered into the 1st day of July, 2009 (the "Effective Date"), by and between Dean Health Plan, Inc. ("DHP"), a Wisconsin insurance corporation, and Care Wisconsin First, Inc. ("CW" or "Care Wisconsin"), a Wisconsin not-for-profit insurance corporation organized under Ch 613, Wis. Stats., referred to individually as "Party" or collectively as the "Parties".

RECITALS

WHEREAS, Care Wisconsin Health Plan, Inc. (the "Health Plan"), a subsidiary of Care Wisconsin, operates Family Care Partnership ("Partnership"), a Medicare Advantage Special Needs Plan ("SNP") and Wisconsin Medicaid Program ("WMP"), to provide or arrange for the provision of comprehensive health and long-term care services to eligible persons;

WHEREAS, Care Wisconsin has entered into a Health and Community Supports Contract ("MCO Contract") with the State of Wisconsin represented by its Division of Long Term Care, of the Department of Health Services, hereafter "DHS," to provide or arrange for the provision of certain health and long-term care services to members enrolled in its Family Care program).

WHEREAS, CW desires to delegate certain credentialing and recredentialing functions to DHP for practitioners and organizational providers that will be servicing CW members.

NOW, THEREFORE, in exchange for the mutual promises set forth in this Agreement, and other good and valuable consideration, receipt of which is hereby acknowledged, the Parties agree as follows:

I. CREDENTIALING SERVICES

- A. Credentialing. Commencing on the Effective Date, DHP shall provide to CW credentialing and recredentialing services for prospective and current CW network providers in accordance with all applicable National Committee on Quality Assurance ("NCQA") and Centers for Medicare and Medicaid

Services ("CMS") standards, statutes, laws, rules and regulations (collectively, "Laws") as may be in effect from time to time. DHP shall perform additional credentialing or recredentialing activities for CW beyond the requirements set by NCQA or CMS only if there is attached to this Agreement an Exhibit B, executed by the Parties, listing the specific activities agreed upon.

In the event the NCQA or CMS standards are revised, DHP shall provide credentialing and recredentialing procedures and activities in accordance with the revised standards. If there is a disagreement concerning the NCQA or CMS standards that the Parties cannot resolve, the Parties shall refer the issue to NCQA or CMS, as the case may be, and agree to abide by the written interpretation of NCQA or CMS.

When documentation of primary source verification (defined as; verifying directly with an educational, accrediting, licensing, other entity or NCQA approved entity) is required by NCQA or CMS, DHP shall maintain such documentation in accordance with NCQA or CMS requirements, as the case may be.

Specific credentialing and recredentialing procedures and/or activities to be performed by DHP include:

- Documentation of credentialing policies
- Conduct credentialing committee meetings
- Perform initial primary source verification
- Receive and verify application and attestation
- Check and report on initial sanction information
- Perform recredentialing primary source verification
- Check and report on recredentialing sanction information
- Conduct provider and organizational performance monitoring
- Conduct ongoing monitoring of sanctions and complaints
- DHP provides notification to Authorities and notifies practitioner of appeal rights

- B. Credential Files. DHP shall maintain a credential file on each network provider (that is, a care provider who will provide health and/or long-term care services for Care Wisconsin's members). As necessary, DHP shall allow CW to audit all delegated credentialing and recredentialing files every three years. DHP shall provide CW with copies of all recredentialing policies and procedures, forms and applications used to credential providers in accordance with NCQA and CMS standards, including any updates to these documents, in a timely manner. Notwithstanding these requirements, under no circumstance is DHP required to furnish CW with any credentialing or peer review information, including, but not limited to, documents and deliberations, considered confidential or privileged by Health Care Quality Improvement Act (HCQIA) or state health care services review or peer review laws. Whether such information is privileged will be determined solely by DHP.

C. Completion of Credentialing. The parties understand and agree that the credentialing verification and recommendation for approval or denial process for each network provider shall be deemed complete when all the primary source verifications required by DHP, NCQA or CMS have been completed and DHP's Credentialing Committee (the "Credentials Committee") has taken all actions necessary to approve practitioner/organizational credentialing/recredentialing files. Prior to any final action by the Credentials Committee, DHP shall verify all practitioner information requiring verification by NCQA or CMS within one hundred-eighty (180) days of the date on the Release of Information/Provider Attestation. All practitioners must sign this form when applying for credentialing or recredentialing. It enables DHP to request information to validate their qualifications. DHP shall promptly provide CW with written notice of the results of all credentialing actions.

D. Limitation of Services. DHP shall provide credentialing and recredentialing services for all MDs, DOs, DDSs, DPMs, DCs, ODs, all PhD & Master's level mental health practitioners, Alcohol & Other Drug Abuse (AODA) practitioners (SAC & CSAC), and other licensed independent practitioners. Notwithstanding the foregoing, MDs and DOs who perform as emergency room/urgent care providers exclusively in hospitals are not credentialed by DHP if they are already being credentialed by a hospital, either as a hospital employee or subcontractor. Such non-credentialing by DHP also applies to Anesthesiologists (exception: Anesthesiologists providing Pain Management), Radiologists, Pathologists, Hospitalists, Neonatologists, and Locum Tenens employed or subcontracted by a hospital.

DHP shall provide credentialing and recredentialing services for the following organizational providers: Hospitals, Skilled Nursing and Rehabilitation Facilities, Ambulatory Surgery Centers, and Home Health Agencies.

E. CW Approval. CW reserves the right to approve practitioners and organizational providers and to limit, terminate or suspend individual practitioners and organizational providers from participation in CW's provider network, pursuant to the prior review and recommendations by the CW Credentialing Committee. CW shall give DHP prompt written notice whenever CW terminates or does not approve a practitioner or organizational provider for whom DHP has provided credentialing or recredentialing services to CW.

F. Notice of Disciplinary Action. With respect to changes known by DHP, DHP shall provide CW with notice of any action that results in the reduction, suspension or termination of a DHP practitioner's license or clinical privileges or an organizational provider's license resulting from licensing board disciplinary actions, Medicare or Medicaid sanctions or actions by other agencies that result in the reduction, suspension or termination of practitioner clinical privileges or an organizational provider's ability to provide the

services contemplated by the organizational provider's agreement for services with CW. Notwithstanding the requirements of section I(F), under no circumstance is DHP required to furnish CW with any credentialing or peer review information, including, but not limited to, documents and deliberations, considered confidential or privileged by Health Care Quality Improvement Act (HCQIA) or state health care services review or peer review laws. Whether such information is privileged will be determined solely by DHP.

- G. Exchange of Information. DHP shall provide CW with a monthly report that includes the names of the practitioners and organizational providers acted upon, their specialty and applicable subspecialty, and appointment, re-appointment, or other credentialing action taken by the DHP Credentialing Committee.

Other data elements will be exchanged as mutually agreed upon by CW and DHP to support CW's customer service functions and DHP's performance monitoring. Notwithstanding the requirements of section I(G), under no circumstance is DHP required to furnish CW with any credentialing or peer review information, including, but not limited to, documents and deliberations, considered confidential or privileged by HCQIA or state health care services review or peer review laws. Whether such information is privileged will be determined solely by DHP.

II. AUDITS AND RECORDS

- A. Every three years CW shall audit DHP's credentialing program to ensure compliance with (i) CW's credentialing standards (which adhere to CMS standards); (ii) applicable regulatory standards; and (iii) applicable NCQA standards. Such audit will include:

- Desk review of all policies, procedures, meeting minutes, and standardized letters that apply to DHP's credentialing program, and
- Review of credentialing and recredentialing files, using CMS standards.

During such audit, DHP shall not furnish CW with any credentialing or peer review information, including, but not limited to, documents and deliberations, considered confidential or privileged by HCQIA or state health care services review or peer review laws. Whether such information is privileged will be determined solely by DHP.

- B. CW shall provide DHP with thirty (30) days' prior written notice of any planned audit and provide a written description of the documents and/or activities to be audited and reviewed at the same time of the written notice.

Within thirty (30) days of the conclusion of an audit conducted by CW, CW will provide DHP with a written report of the audit findings, including any recommendations for performance improvement. If performance deficiencies are noted, CW will work with DHP to develop a corrective action plan to address such deficiencies. In such cases, CW will conduct periodic review, no less frequently than annually, of DHP's performance, to ensure implementation of the corrective action plan and to monitor performance.

- C. CW's Credentialing Committee will review the results of the reports and recommend approval, disapproval or modification of DHP's credentialing program.
- D. In addition to reviews and audits by CW, DHP shall permit appropriate governmental authorities, bodies, agencies, commissions, departments or instrumentalities (together, "Governmental Entity") to audit and review DHP's credentialing program. Such Governmental Entity must possess legal authority to conduct such audit and review.
- E. DHP shall (i) cooperate with any audit or request for information made pursuant to this Article II; (ii) provide CW with complete access to and, upon CW's request, make available to CW the records and files, or copies thereof, related to this Agreement; and (iii) provide CW, within thirty (30) working days, any information that it may reasonably request in connection with this Agreement. Notwithstanding the requirements of section II(E), under no circumstance shall DHP be required to furnish CW with any credentialing or peer review information, including, but not limited to, documents and deliberations, considered confidential or privileged by HCQIA or state health care services review or peer review laws. Whether such information is privileged will be determined solely by DHP.
- F. DHP agrees to provide CW with an annual list of practitioners and organizational providers for which credentialing files are maintained. Upon written request by CW, DHP shall provide CW with a copy of the application of any practitioner or organizational provider who is a CW network provider or an applicant to become a CW network provider. DHP shall provide CW with an annual list of DHS and SMDV practitioners in an electronic format containing provider directory information, degrees, and specialty board certification for practitioners and organizational providers who are network providers for CW.

III. NCQA ACCREDITATION AND CMS STANDARDS

DHP shall perform all credentialing services in a manner that, at a minimum, meets all standards and requirements mutually agreed upon by the Parties,

including, but not limited to, all NCQA and CMS standards and any other laws as may be in effect from time to time.

IV. BILLING AND REIMBURSEMENT

DHP shall send invoices for credentialing and recredentialing services to the following address on a monthly basis:

Controller
Care Wisconsin First, Inc.
2802 International Lane
PO Box 14017
Madison, WI 53708-0017

DHP's invoice shall contain the following information:

1. Name of practitioner or organizational provider
2. Network status of practitioner or organizational provider, i.e. "DHP" or "non-DHP" provider
3. Credentialing status, i.e. "Initial Credentialing" or "Recredentialing."

CW shall reimburse DHP for the services described herein based on the rates described in Exhibit A, Reimbursement Schedule, affixed hereto and made a part hereof.

V. LEGAL COMPLIANCE

- A. DHP shall comply with all applicable federal and state laws related to the services provided under this Agreement, including, but not limited to, State of Wisconsin Civil Rights Compliance and Affirmative Action requirements. DHP hereby covenants to CW that, as of the Effective Date, it possesses all licenses, permits and approvals as are reasonably necessary for it to perform its obligations under this Agreement, except when the absence of such licenses, permits and approvals will not have a material adverse effect on the ability of DHP to perform its obligations under this Agreement.
- B. DHP shall, in each case related to the services provided in this Agreement, assist CW, when practical, in (i) responding to inquiries, complaints, requests or proceedings received from or initiated by any Governmental Entity; (ii) making all required filings with any Governmental Entity; (iii) delivering reports, communications and notices to or from any Governmental Entity; (iv) obtaining and maintaining all licenses, permits

and approvals required under this Agreement. Notwithstanding DHP's assistance referenced above, DHP assumes no responsibility to complete the activities listed in sections (i) through (iv) on behalf of CW. Whether DHP's assistance in such matters is practical shall be solely determined by DHP.

- C. DHP acknowledges that CW is subject to Medicare and WMP laws, regulations, CMS and DHS instructions, and contractual obligations with CMS and DHS, and DHP agrees to assist CW in complying with the terms and conditions of these laws, regulations, instructions, and CW's contracts with CMS and DHS, as modified from time to time by CMS or DHS, as the case may be.
- D. The Parties represent and warrant that, to the best of each Party's knowledge, DHP and CW and their respective owners and employees are not excluded from participation in any federal health care programs, as defined under 42 U.S.C. § 1320a-7b(f), and to each Party's knowledge, there are no pending or threatened governmental investigations that may lead to such exclusion. Each Party agrees to provide written notice to the other Party of the commencement of any such exclusion or investigation within seven (7) business days of first learning of it. All Parties shall have the right to immediately terminate this Agreement upon learning of any such exclusion and shall be kept apprised by the other Party of the status of any such investigation.

VI. TERM AND TERMINATION OF AGREEMENT.

- A. This Agreement shall commence as of the Effective Date and shall continue in full force and effect through December 31, 2010. Thereafter, this Agreement shall automatically renew for additional one (1) year terms, unless otherwise terminated in accordance with this Article VI.
- B. Either Party may terminate this Agreement without cause by providing ninety (90) days' prior written notice of termination to the other Party, provided, however, that if any legal, CMS, NCQA, or other requirement concerning credentialing is modified and the modification must be implemented in less than one hundred-twenty (120) days from receipt of written notice by DHP from CW of such modification, DHP may terminate this Agreement on the date such modification must be implemented by giving written notice within thirty (30) days of receipt of such notice of modification from CW.
- C. Should a Party materially breach any provision of this Agreement, the non-breaching Party may terminate this Agreement by providing the breaching Party with thirty (30) days prior written notice of such termination. During this thirty (30) day notice period, the breaching Party will be allowed to cure

such violation. The provisions contained within this section do not affect the Parties right to terminate this Agreement without cause as provided in Article VI(B) of this Agreement.

- D. This Agreement shall automatically terminate on the date either Party becomes insolvent or is the subject of any bankruptcy or similar proceeding.
- E. This right of termination belonging to any Party hereto shall be in addition to any other remedy to which the terminating Party may be entitled at law, in equity or under this Agreement.

VII. INDEMNIFICATION

- A. DHP shall indemnify and hold CW harmless from any and all costs, claims, demands, liabilities, damages (excluding attorneys' fees and expenses) and other assessments arising out of or caused by any breach of the terms of this Agreement or the negligence or misconduct of DHP, its employees, or any authorized representatives in providing any services under this Agreement.
- B. CW shall indemnify and hold DHP harmless from any and all costs, claims, demands, liabilities, damages (excluding attorneys' fees and expenses) and other assessments arising out of or caused by any breach of the terms of this Agreement or the negligence or misconduct of CW, its employees, or any authorized representatives in providing any services under this Agreement.

VIII. CONFIDENTIALITY

Each Party shall maintain the confidentiality and security of provider credentialing records and files under its control. Each Party shall (i) maintain storage in locked facilities/cabinets; (ii) maintain policies and procedures for security of electronic records; and (iii) require employees with access to credentialing files to sign a statement acknowledging the Party's confidentiality policy. CW shall release to DHP confidential information on any practitioner or organizational provider only upon receipt of written authorization for release of information from such practitioner or organizational provider.

IX. GENERAL PROVISIONS

- A. Amendments. This Agreement shall not be changed, modified, terminated or discharged in whole or in part, except by an instrument in writing signed by the Parties hereto, or their respective successors or assignees.
- B. Assignment. Neither party hereto may assign this Agreement or any of their respective rights or responsibilities hereunder without the prior written approval of the other Party hereto.

- C. Notices. Any notice or communication given pursuant to this Agreement must be in writing and shall be deemed to have been duly given if mailed (by registered or certified mail, postage prepaid, return receipt requested), transmitted by facsimile, or delivered by courier or a recognized overnight delivery service, as follows:

To Care Wisconsin First, Inc.:

To Dean Health Plan, Inc.:

Provider Services Manager
2802 International Lane
PO Box 14017
Madison, WI 53708-0017
Facsimile (608) 245-3571

Director of Quality Improvement
1277 Deming Way
Madison, WI 53717
Facsimile (608) 827-4300

- D. Governing Law. This Agreement will be governed by and construed in accordance with the laws of the State of Wisconsin (without giving effect to principles of conflicts of laws) applicable to a contract executed and to be performed in such state. Each Party to this Agreement hereby consents to personal jurisdiction over itself in state or federal court within Wisconsin.
- E. Entire Agreement. This Agreement contains the sole and entire agreement between the Parties with respect to the subject matter hereof.
- F. Prior Agreements. This Agreement and its exhibits supersede any and all prior agreements, negotiations or understandings, oral or otherwise, regarding the subject matter hereof between the Parties hereto.
- G. Severability. If any provision of this Agreement is determined to be unenforceable or invalid, the remaining provisions of this Agreement shall remain in full force and effect.

CONFIDENTIAL

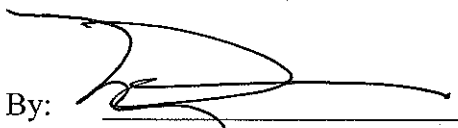
CONFIDENTIAL

IN WITNESS WHEREOF, the Parties have caused this Agreement to be executed by persons authorized to act in their respective names.

CARE WISCONSIN FIRST, INC.

DEAN HEALTH PLAN, INC.

By: _____
Wayne P. Hagenbuch
Vice President of Medical Affairs

By: 
Mary Davis, MD
Chief Medical Officer

Date: _____

Date: 6/30/09

EXHIBIT A

REIMBURSEMENT SCHEDULE

CW will reimburse DHP as shown below for the credentialing and recredentialing services described in this Agreement, upon receipt of a complete, accurate and timely invoice from DHP.


1. [REDACTED] for credentialing and recredentialing a practitioner who is in the DHP provider network, but is not an SMDV or DHS provider, for each three-year credentialing cycle.
2. [REDACTED] for credentialing and recredentialing practitioners who are not in the DHP provider network, for each three-year credentialing cycle.
3. [REDACTED] for credentialing and recredentialing organizational providers who are in the DHP network, for each three-year credentialing cycle.
4. [REDACTED] for credentialing and recredentialing organizational providers who are not in the DHP provider network, for each three-year credentialing cycle.
5. [REDACTED] for credentialing and recredentialing organizational providers, who are not in the DHP network and require an on-site review due to non-accreditation status, i.e. JCAHO, AAAHC, HFAP, CARF or the facility's Casper Report and Quality Indicator Profile Report indicate substandard codes and/or indicates program does not meet requirements. DHP will document the need for conducting a site visit on this basis upon Care Wisconsin's request.
6. When CW requests that a non-DHS (including non-SMDV) provider be credentialed, DHP will promptly invoice CW if the provider has been credentialed or recredentialled in the past twelve months. Otherwise, DHP will not invoice CW until the provider's next scheduled recredentialing has been completed.
7. DHP will bill CW for services related to the credentialing or recredentialing of practitioner or organizational providers that do not meet DHP standards and therefore are not recommended for approved by the DHP Credentialing Committee.

IN WITNESS WHEREOF, the Parties have caused this Agreement to be executed by persons authorized to act in their respective names.

CARE WISCONSIN FIRST, INC.

DEAN HEALTH PLAN, INC.

By: Wayne P. Hagenbuch
Wayne P. Hagenbuch

By: 
Mary Davis, MD
Chief Medical Officer

Vice President of ~~Medical Affairs~~ ^{WPH}
Health Plan Operations ^{07/14/09}

Date: 07/14/2009

Date: 6/30/09

CONFIDENTIAL

CONFIDENTIAL

ORIGINAL

AMENDMENT TO THE
AGREEMENT FOR SERVICES
BETWEEN CARE WISCONSIN FIRST, INC.
AND
DEAN HEALTH PLAN, INC.

This Amendment to the Agreement for Credentialing Services between Care Wisconsin First, Inc. and Dean Health Plan, Inc. shall be amended as follows:

Exhibit A, Reimbursement Included Under This Agreement, shall be revised and restated as follows:

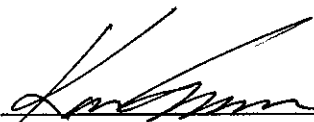
7. DHP will bill CW for services related to the credentialing or recredentialing of practitioners or organizational providers that do not meet DHP standards and therefore are not recommended for approval by the DHP Credentialing Committee.

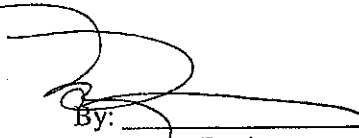
8. DHP will bill CW for services related to the credentialing or recredentialing of practitioners or organizational providers if CW withdraws the credentialing application after DHP's Credentialing Specialist has begun the credentialing process. DHP will not bill CW for services related to the credentialing or recredentialing of practitioners or organizational providers if CW withdraws the credentialing application before DHP's Credentialing Specialist has begun the credentialing process.

IN WITNESS WHEREOF, the undersigned concur with the terms, conditions and understandings as set forth in this Amendment, to be effective as of March 1, 2010.

CARE WISCONSIN FIRST, INC.

DEAN HEALTH PLAN, INC.

By: 
Ken Eimers
Chief Operating Officer

By: 
Mary Davis
Chief Medical Officer

Date: 9/14/10

Date: 8.30.10

**AMENDMENT
TO
CREDENTIALING AGREEMENT**

The Credentialing Delegation Agreement entered into the 1st day of July 2009, by and between Dean Health Plan, Inc. ("DHP"), and Care Wisconsin First, Inc. ("CW" or "Care Wisconsin"), a Wisconsin not-for-profit insurance corporation organized under Chapter 613, Wis. Stats., referred to individually as "Party" or collectively as the "Parties" shall be amended as set forth below.

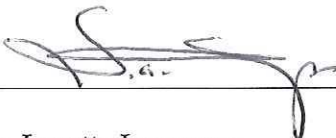
Exhibit A, Reimbursement Schedule shall be deleted and replaced with the attached Exhibit A, Reimbursement Schedule (Effective 11/1/2014).

IN WITNESS WHEREOF, the undersigned concur with the terms, conditions and understandings as set forth in this Amendment, to be effective November 1, 2014.

CARE WISCONSIN FIRST, INC.

DEAN HEALTH PLAN, INC.

By: 

By: 

Name: Terry Metzger

Name: Loretta Lorenzen

Title: Chief Financial and Administrative
Officer

Title: Director - Network
Management

Date: 10/29/2014

Date: 10/31/2014

EXHIBIT A
REIMBURSEMENT SCHEDULE
(Effective 11/1/2014)

CW shall reimburse DHP as stated below for the credentialing and re-credentialing services described in the Agreement.

1. For each three (3)-year credentialing cycle, for credentialing and re-credentialing practitioners who are already participating network practitioners in the DHP provider network and who are neither a St. Mary's Dean Venture nor a Dean Clinic provider, CW shall reimburse DHP [REDACTED] per application.
2. For each three (3)-year credentialing cycle, for credentialing and re-credentialing MD/DO practitioners who are not currently participating practitioners in the DHP provider network, CW shall reimburse DHP the following:
 - 2.1 Initial credentialing, [REDACTED] per application
 - 2.2 Re-credentialing, [REDACTED] per application.
3. For each three (3)-year credentialing cycle, for credentialing and re-credentialing non-MD/DO practitioners who are not currently participating practitioners in the DHP provider network, CW shall reimburse DHP the following:
 - 2.1 Initial credentialing, [REDACTED] per application
 - 2.2 Re-credentialing, [REDACTED] per application.
4. The practitioner credentialing fees built into the DHP credentialing and re-credentialing process include:
 - a. National Practitioner Data Bank (NPDB) query;
 - b. Drug Enforcement Agency license (DEA) verification;
 - c. American Board of Medical Specialties (ABMS) verification;
 - d. Hospital verification fees up to [REDACTED] per MD/DO provider.
5. The following external agency fees incurred by DHP, if applicable for practitioners who are not currently participating practitioners in the DHP provider network, will be passed through to Care Wisconsin, including, but not limited to:
 - a. American Medical Association (AMA) physician profiles;
 - b. American Osteopathic Association (AOA) Profiles;
 - c. American Board of Foot and Ankle Surgeries (ABFAS);
 - d. American Board of Oral and Maxillofacial Surgery (ABOMS);
 - e. Hospital verification fees that amount to over [REDACTED] per MD/DO provider.

6. DHP will pay the fees incurred during the application processing phase and then add these amounts into the Care Wisconsin monthly invoice.

7. For each three (3)-year credentialing cycle, for credentialing and re-credentialing organizational providers who are already participating network providers in the DHP provider network, CW shall reimburse DHP [REDACTED] per application.

8. For each three (3)-year credentialing cycle, for credentialing and re-credentialing organizational providers who are not already participating network providers in the DHP provider network, CW shall reimburse DHP [REDACTED] per application

9. For each three (3)-year credentialing cycle, for credentialing and re-credentialing organizational providers who are not currently participating providers in the DHP provider network and which require on-site review, due to non-accreditation status, i.e. The Joint Commission, AAHC, HFAP, CARF or the facility's Casper Report does not meet current DHP organizational credentialing program requirements, CW shall reimburse DHP [REDACTED]. DHP shall document the need for conducting site visits upon the above basis upon written request from CW.

10. In the event CW requests DHP to provide credentialing services for more than either [REDACTED] initial practitioners or [REDACTED] initial organizational providers within a one (1)-year period, DHP reserves the right to determine whether credentialing services will be provided for such practitioners or organizational providers. This shall be decided upon the time of CW's request.

11. When CW requests that a non-Dean Clinic or non-St. Mary's Dean Venture practitioner or DHP Organizational facility be credentialed, DHP shall promptly invoice CW if the practitioner or organization was credentialed or re-credentialed by DHP within the past twelve (12) months. Otherwise, DHP shall not invoice CW until the practitioner/organizations next-scheduled re-credentialing activity has been completed.

12. DHP shall invoice CW for credentialing or re-credentialing services related to CW-requested practitioners or organizational providers who fail to meet DHP's provider network credentialing standards and therefore are not recommended for approval by the DHP Credentialing Committee.

13. DHP shall invoice CW for services related to credentialing or re-credentialing of practitioners or organizational providers should CW withdraw the credentialing application after DHP's Credentialing Specialist has begun the credentialing process. DHP shall not bill CW for services related to the credentialing or re-credentialing of practitioners or organizational providers if CW withdraws the credentialing request prior to DHP's Credentialing Specialist beginning the credentialing process.

14. The fees contained within this Amendment shall be reviewed every two years, beginning November 1, 2016, and every other year thereafter.

