



DME_O&P Network Standards (effective 11.16.2023)

**EviCore Healthcare Standards applicable to your contract*

As part of the eviCore healthcare network, we have designed a comprehensive set of Standards to ensure patients have confidence they will receive the best service available. Please REVIEW all requirements listed within this document prior to applying/reapplying to the network.

- Please contact if you have questions at Credentialing@eviCore.com

-
1. Completed application upon initial and recredentialing cycles. This includes a current signed and dated attestation.
 2. Facility must participate with Medicare and be in good standing, with the exception of facilities that are only supplying wigs. If the facility is contracting for a Medicaid program within eviCore's network, the facility is required to be in good standing with Medicaid.
 3. Facility must hold accreditation with one of the following CMS approved organizations:
 - Accreditation Commission for Health Care, Inc. (ACHC)
 - American Board for Certification in Orthotics & Prosthetics, Inc. (ABCOP)
 - Board of Certification/Accreditation (BOC)
 - Commission on Accreditation of Rehabilitation Facilities (CARF)
 - Community Health Accreditation Partner (CHAP)
 - Healthcare Quality Association on Accreditation (HQAA)
 - National Association of Boards of Pharmacy (NABP)
 - The Compliance Team, Inc.
 - The Joint Commission (TJC)
 4. Facility shall maintain comprehensive general liability insurance at minimum levels required by Payer, but in no event less than \$1,000,000 per claim and \$3,000,000 in annual aggregate.
 5. Facility has not and shall not have been disciplined, suspended, or terminated for cause from a PPO, HMO, or other managed care organization.
 6. Facility must have all appropriate license(s) and certification(s) mandated by governmental regulatory agencies, including, without limitation, any certificate of operation, and certificate of occupancy.
 7. Facility shall maintain appropriate medical records and shall, subject to applicable law,

provide such records to eviCore as deemed necessary by eviCore, in its sole discretion, for purposes of utilization management and/or quality assessment.

8. Exceptions to the requirements can be made on a case-by-case basis to conform to network requirements at the request of a client health plan, providing the facility otherwise meets the remainder of Standards.

