



November 14, 2025

Welcome to America's Physician Groups' *California Update*. Each week APG reports the latest on health care happenings in the Golden State.

Here's what you'll find in this week's edition:

- California Adopts A Uniform [Provider Credentialing Process](#) Under AB 1041
- What's Next For [Provider Directory Data](#) Regulatory Changes, Symphony, And Beyond
- [Shared Clinical Decision Making](#) Guide from the Common Health Coalition
- 2025 APG California Policy & Advocacy [Meeting Dates](#)
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## California Adopts A Uniform Provider Credentialing Process Under AB 1041

After three years of prior attempts, the Legislature has enacted **AB 1041 (Bennett)** to establish a single, uniform credentialing process for California health care providers. Under existing law, health plans and insurers were required to assess and verify a provider's qualifications within **60 days** of receiving a completed credentialing application. Providers frequently criticized the system as fragmented and inconsistent across payers.

**AB 1041** replaces this patchwork approach by creating a standardized process for the **commercial fully insured market**, extending the review timeline to **90 days**, and specifying what constitutes a "complete" application. The bill requires both payers and applicant providers to use the **CAQH credentialing form and portal** for initial credentialing and recredentialing. By mandating a single application format, the bill aims to streamline provider onboarding and enhance the accuracy of provider information through a centralized CAQH database—already used by more than **1.5 million providers nationwide**.

The new credentialing standard will be implemented in 2028. We expect some minimal guidance to be issued by the DMHC and CDI to clarify the exact implementation date.

During development of the bill, **NCQA** and **HICE** reviewed draft language to ensure alignment with existing accreditation standards and to confirm that the legislation would not override payers' internal credentialing procedures. Amendments were made accordingly.

While AB 1041 moves California closer to a unified system, it cannot achieve full uniformity due to **federal preemption** in Medicare, Medicaid, and ERISA-regulated markets. Even so, the CAQH form is widely used in those programs and will continue to serve as a complementary data source.

APG's current [AB 1041 Implementation Guide](#) outlines the scope of the bill, its key provisions, and its impact on existing credentialing workflows. Of particular importance for APG members with delegated credentialing authority, the bill **does not replace internal credentialing processes**. Delegated entities will continue their existing procedures but must now use the CAQH database to retrieve provider information. Applicant providers will, in turn, be required to maintain their CAQH profiles and update them every **four months**.

Both NCQA and HICE were consulted extensively, resulting in amendments to meet accreditation and operational standards. We encourage you to review the implementation guide and share any additional questions or feedback. Our guides are intended to evolve as the implementation process moves forward.



### **What's Next For Provider Directory Data Regulatory Changes, Symphony, And Beyond**

Provider directories are under more scrutiny than ever. But for providers, keeping your information accurate in health plan directories is more than a compliance issue – it affects reimbursements, patient access, and your staff's time.

Join us for a live webinar where leaders from IHA's Symphony Provider Directory, APG, and Availity analyze how providers and plans can better work together to maintain accurate directory data with less manual

burden. We'll also share insights from Symphony's recent work with state and federal regulators and discuss how anticipated regulatory changes, including SB 137, AB 1041, AB 280, and more will impact providers over the coming year.

**Speakers will include:**

- Carrie Bersot, Senior Director, Client Success & Operations, IHA
- Sarah Lally, Director, Strategy & Operations Engagement, IHA

Wednesday, November 19, 2025

12:00 - 1:00 pm PT

To register, click [here](#).



**Shared Clinical Decision Making Guide from the Common Health Coalition**

The CDC [released](#) official COVID-19 vaccine guidance on October 6, confirming that individuals who are not at-risk should consult with their health care providers, who can offer “shared decision making,” on **the benefits of receiving COVID-19 or other vaccines and boosters**. Practically speaking, this means that anyone who wants a COVID booster should be able to get one, as health insurers have also agreed to continue covering the cost of vaccines – maintaining access at pharmacies and doctors’ offices. **To learn more important considerations and requirements on “shared decision making,”** please see this [helpful guide](#) developed by the [Common Health Coalition](#).



**2025 APG California Policy & Advocacy Meeting Dates**

*Members, please mark your calendars for APG's California Policy Forum and California Medi-Cal Forum meetings. You can download APG's 2025 events calendar [here](#).*

California Policy Forum

- **December 5 at 12 - 1pm - rescheduled from November 12 - Register [Here](#)**

California Medi- Cal Forum

- **December 16 at 4 - 5pm, [Register Here](#)**



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### APG California Advocacy Member Resources

- **SB 306 - Prior Authorization Reform [Summary](#) and [Implementation Guide](#)**
- **Tracked Health Care Bills [2025-26](#)**: bills we're following in the California State Legislature
- **Office of Health Care Affordability [regulations](#) and [explanatory slide deck](#)**
- **DMHC Quality and Equity Reporting program [All Plan Letter](#)**

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**For more news and resources, please visit APG's [website](#) or contact a member of APG's California advocacy team.**

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