

PATHWAYS CMH

POLICY TITLE: Credentialing - Privileging	CATEGORY: Personnel – Employee Guidelines	
EFFECTIVE DATE: June 4, 2014	BOARD APPROVAL DATE: June 6, 2014	
REVIEWED DATE: June 30, 2015	REVISION(S) TO POLICY STATEMENT: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	OTHER REVISION(S): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
RESPONSIBLE PARTY: COO/Human Resources Director	CEO APPROVAL: Mary Swift, CEO	

APPLIES TO:

Pathways Personnel
Pathways Contract Providers

POLICY:

Pathways requires all professional staff to have a documented review and approval of their clinical privileges as needed to assure services provided to Pathways consumers are delivered by qualified and competent staff. Privileging must be granted based on appropriate training, supervision and consultation to support the scope of work according to primary eligibility groups served by the provider. Initially this is done as part of the credentialing process; then as part of the annual performance review; and when duties/responsibilities change in terms of primary eligibility group a person is working with and/or scope of clinical practice. National and state standards for specific clinical programs or treatments are followed by Pathways

Temporary Privileges may be granted at time of hire or contract, at time of a change in clinical privileges and/or when a need for temporary privileging is identified, e.g., staff shortage. Temporary privileges may be granted for up to one year.

PURPOSE:

To ensure Pathways providers are operating within their scope of practice and engaging in clinical activities that they are qualified to provide.

DEFINITIONS:

- Credentialing – Individual Practitioners:*** (As defined by the American Society of Addiction Medicine and the American Managed Behavioral Healthcare Association) The process of reviewing, verifying, and evaluating a practitioner's credentials (i.e., professional education, clinical training, licensure, board and other certification, clinical experience, letters of reference, other professional qualifications, and disciplinary actions) to establish the presence of the specialized professional background required for membership, affiliation, or a position within a healthcare organization or system. The result of credentialing is that a practitioner is granted membership in a medical staff or provider panel.
- Credentialing – Organizational Providers:*** (As defined by MDCH Contract P.6.4.3.1) The process of validating that the organizational provider is licensed or certified as necessary to operate in the State, and has not been excluded from Medicaid or Medicare participation and that the organization properly credentials their directly employed and subcontract direct service providers.

3. **Peer Clinical Review (Specific to this policy):** Clinical review conducted by appropriate health professionals when a request for a service or support was not approved/certified during initial clinical review.
4. **Privileging** - The process of determining a health care professional's current skill and competence to perform specific diagnostic or therapeutic procedures that the professional requests to perform as a participant in or an affiliate of a healthcare facility or system. The result of privileging is that a practitioner is permitted by a healthcare organization or network to conduct those specific procedures (as defined by the American Society of Addiction Medicine and the American Managed Behavioral Healthcare Association).
5. **Senior Clinical Staff** - The appointed leadership role of at least one senior clinical staff person who has: current, unrestricted clinical license(s); qualifications to perform clinical oversight for the services provided; post -graduate experience in direct patient care; and Board certification (if the senior clinical staff person is an M.D. or D.O.).

REFERENCES:

- 42 CFR §438.214
- Balanced Budget Act of 1997
- URAC, Health Plan_v7.2
- Medicaid Provider Manual
- MDCH/PIHP Master Contract (Medicaid Managed Specialty Supports and Services Concurrent 1915(B)(c) Waiver Program), Sections 6.4.1 and 6.4.3
- Medicaid Sub-Contracting Agreement (PIHP/CMHSP Contract) Section XII.
- MDCH Credentialing and Re-Credentialing Processes
- NorthCare Network Policies:
 - Background Check
 - Credentialing and Oversight Committee
 - Credentialing Committee
 - Compliance Plan
 - Delegation Agreement with Member CMHSPs
 - Jail Diversion
 - Sanction
 - Training
- NorthCare Network/Member CMHSP Delegation Agreement
- NorthCare Network Credential-Privileging Policy

HISTORY:

Dates Reviewed: June 30, 2015

Dates Revised: May 19, 2014

Dates Approved: June 4, 2014 (Board)

PROCEDURES:

Pathways' Responsibilities:

- A. Pathways' Credentialing Committee will credential and privilege the Pathways staff who conduct peer clinical reviews for the requisite education, experience, training and supervision to have the authority to review medical necessity determinations for the individuals receiving services in the identified member populations of children with serious emotional disorders; children with developmental disorders; adults with serious mental illness; adults with developmental disorders; and individuals experiencing co-occurring disorders including physical disorders and substance use disorders. The Committee is also responsible for the credentialing and privileging of the clinical staff who are responsible for the delivery of clinical services.
- B. Initial Privileging will be granted by the Committee based on documentation provided to the Committee from the staff responsible for gathering all necessary documentation.
- C. Ongoing privileging will be reviewed and approved by the Committee based on:
 - 1. The annual performance evaluation demonstrating the necessary licensing, certification, and training requirements to maintain privileges for the coming year.
 - 2. Clinical privileging changes when job duties are added that require specific training and certification.
- D. Pathways will report additions, deletions, and changes to staffing privileges to the NorthCare Network PIHP, who holds final approval authority.
- E. Pathways will monitor organizational providers responsible through delegation for continuous credentialing/privileging to assure all requirements for credentialing and privileging have been met. Pathways credentialing will be done minimally every two years and may be included in annual site reviews. The reviews are reported to the Pathways Credentialing Committee to determine final approval for panel inclusion.