

## PATHWAYS CMH

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

**APPLIES TO:**

Pathways Personnel  
Pathways Contract Providers

**POLICY:**

Pathways requires a credentialing application from every provider that applies for participation as a provider and that falls within the scope of the credentialing program. Pathways utilizes the standard NorthCare application for credentialing and recredentialing of individual practitioners and organizational providers

**PURPOSE:**

To conduct due diligence in the credentialing and recredentialing process utilizing a standard credentialing application that allows equal review and treatment for consideration of participation in the provider network.

**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* - Facilities and other organizational Providers: the process of reviewing, verifying and evaluating the applicant for information including but not limited to: state licensure information; a copy of the facility's liability insurance declaration; additional requirements per Michigan Medicaid Provider rules; a signed and dated attestation of authorized representative for the facility attesting the information is accurate and complete; a signed and dated statement by an authorized representative of NorthCare Network that information in the application will be verified and a current copy of accreditation status.

**REFERENCES:**

- URAC Standard HPv7.1 P-CR
- Michigan Department of Community Mental Health Contract Attachment
- NorthCare PIHP/CMHSP Delegation Agreement
- NorthCare Network Policies

- Credentialing Program
- Credentialing and Oversight
- NorthCare Credentialing – Standard Application Policy

**HISTORY:**

Dates Reviewed: June 30, 2015

Dates Revised:

Dates Approved: June 4, 2014

## PROCEDURES

### A. Individual Practitioner Credentialing Application

1. At the time of initial and recredentialing of Individual practitioners, all individual providers complete the standard NorthCare Network Credentialing Application that contains the following items:
  - a. History of education and professional training, including board certification status
  - b. State licensure information, including current license(s) and history of licensure in all jurisdictions
  - c. Evidence of current Drug Enforcement Agency (DEA) certificate or state controlled dangerous substance certificate, if applicable
  - d. Proof of liability insurance (e.g., declaration page)
  - e. Professional liability claims history
  - f. History of sanctions
  - g. History of loss or limitation of privileges or disciplinary activity
  - h. Hospital affiliations or privileges, if applicable
  - i. Disclosure of any physical, mental or substance abuse problems that could, without reasonable accommodation, impede the provider's ability to provide care according to accepted standards of professional performance or pose a threat to the health or safety of service recipients.
  - j. Lack of present illegal drug use.
  - k. An acknowledgement of the ongoing responsibility to notify the employer in a timely manner of any adverse change in licensure or certification status. As soon as the employee is aware or should have been aware of the change, the employer must be notified.
  - l. An evaluation of the provider's work history for the prior five years
  - m. A signed and dated statement attesting that the information submitted with the application is complete and accurate to the practitioner's knowledge
  - n. A signed and dated statement authorizing the organization to collect any information necessary to verify the information in the credentialing application.
  - o. A list of all current Clinical Privileges held by the applicant will be included with the application.

### B. Facilities, Substance Abuse Programs and Other Organizational Providers Credentialing Applications

1. At the time of initial credentialing and recredentialing, organizational providers complete the standard NorthCare Network Credentialing Application for Organizational Providers that contains at a minimum:
  - a. State licensure information
  - b. A copy of the facility's liability insurance declaration
  - c. Additional requirements per Michigan Medicaid Provider rules
  - d. A signed and dated attestation of authorized representative for the facility attesting the information is accurate and complete
  - e. A signed and dated statement by an authorized representative of NorthCare Network that information in the application will be verified and a current copy of accreditation status will be obtained.

2. Recredentialing: Pathways personnel verify updated applications, review the annual performance report and submit their recommendation to the NorthCare Network Credentialing Committee for final approval to maintain participation in the network.

C. Subcontractors Credentialing:

Pathways may delegate the credentialing and recredentialing administrative functions as specified in the contract. Delegation required adoption of common policies and procedure that comply with NorthCare, MDCH Credentialing Policies and URAC standards to ensure proper credentialing of all organizational and individual providers.