

# **TAYLOR STATION SURGICAL CENTER MEDICAL STAFF POLICY & PROCEDURE**

**SUBJECT:** VERIFICATION OF APPLICATION INFORMATION

**PURPOSE:** To establish processes for Medical Staff credentialing

## **RESPONSIBLE**

**PERSON:** Board of Managers, PAC and Credentials Representative

**POLICY:** The following information will be obtained for verification. TSSC may contract with a Central Verification Organization (CVO) to assist with the verification and coordination of applicant information. CVO process must be congruent with TSSC requirements listed below:

- A. A copy of the applicant's contract with his malpractice carrier, or verification directly from the insurance carrier.
- B. Information from all prior and current insurance carriers or the National Practitioner Data Bank (NPDB) concerning claims, suits and settlements (if any) during the past five year.
- C. Administrative and clinical reference questionnaire from all significant practice settings for the previous 10 years.
- D. Written verification of recent clinical work from hospitals, principal employers and other managed care organizations, as applicable including the applicant's privileges and status.
- E. Verification of licensure status in all current or past state of licensure. Verification should be obtained by letter, phone, or computer listing directly from the state agency or a hospital at which the applicant holds privileges.
- F. Information regarding any Medicare/Medicaid sanction obtained from the Department of Health and Human Services Department/Office of Inspector General Cumulative Sanction Reports, State Medical Board, relevant state agencies, or from the Federation of State Medical Boards
- G. Verification of medical school completion with primary source.
- H. A copy of the applicant's DEA card, or verification of DEA status from the National Technical Information Service (NTIS) and/or AMA report.
- I. Verification of board certification, obtained by using the ABMS compendium, by call 800-766-CERY, or by contacting the respective board.
- J. Verification of residency with primary source.
- K. Additional (2) letters of reference from credible individuals who are able to provide information regarding the applicant's current clinical competence, health status and ability to relate to colleagues in an acceptable manner.
- L. Other information deemed necessary.

ORIGINATED: 2/97

REVIEWED: 6/21, 11/22, 6/24

REVISED: 6/21, 11/22, 6/24

APPROVED BY PAC/BOM: 7/21, 11/22

IMPLEMENTED: 7/21, 11/22

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- M. In the event that there is undue delay in obtaining any required information or if clarification of information is needed, the applicant's assistance will be requested. The applicant's failure to adequately respond to a request for assistance will result in termination of the application process. If the required information is not submitted within 45 days of request, the application will be considered void.
- N. When the credentials file is complete, a summary of the applicant's credentials will be sent to the Credentials Representative or other appropriate representatives.
- O. The Credentials Representative will review the applicant's credentials file. The Credentials Representative may request additional information or may schedule an interview with the applicant. In such a case, further processing of the application will be suspended pending receipt of the requested information or completion of the interview.
- P. A personal interview of all new applicants for Medical Staff appointment and practice privileges may be conducted. The applicant may be notified to arrange an interview with the appropriate individual. The Credentials Representative or other designated individuals will conduct the interview.
- Q. The individual who conducts the interview will make a permanent record of the interview, including the general nature of the questions asked, adequacy of answers and practice history. A copy of the interview results will be placed in the applicant's credentials file.
- R. Once the Credentials Representative reviews the credentials file and additional information and/or interview is complete, the request will be acted upon. The Credentials Representative will send its recommendation, favorable or unfavorable, to the Physician Advisory Council. Assistant Manager to Director of HR/Business Operations will send the credentialing representative record through email to the Physician Advisory Council for (2) Poll votes.
- S. The Physician Advisory Council will review the recommendations of the Credentials Representative. The Physician Advisory Council will send its recommendations, favorable or unfavorable to the Board of Manager.
- T. The Board of Managers will review the recommendations of the PAC and Credentials Representative and approve or deny the recommendations. Action by the Board of Managers will be considered the final decision
- U. The applicant will be notified in writing of the final decision. The final decision and notice will include the specific clinical privileges the applicant has been granted and any special conditions attached to the privileges.
- V. Each individual or groups report must state the reasons for such recommendation or action taken, with specific reference to the completed application and any other documentation that was considered.
- W. All individuals and groups that are required to act on an application for privileges must do so in a reasonable and timely manner.

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