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CREDENTIALING 101

NCQA Standards Overview
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CREDENTIALING POLICIES

CR 1 - Practitioner Credentialing Guidelines
Element A- Factors 1-11

Factor 1


- The types of practitioners it credentials and recredentials

Factor 2

- The verification sources it uses to verify credentialing information

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CREDENTIALING POLICIES

CR 1 - Practitioner Credentialing Guidelines
Element A- Factors 1-11

Factor 3

- Criteria for credentialing and recredentialing

Factor 4

- The process for making credentialing and recredentialing decisions


Factor 5

- The process for managing credentialing files that meet the organization's established criteria

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CREDENTIALING POLICIES

CR 1 - Practitioner Credentialing Guidelines
Element A- Factors 1-11

Factor 6

- Nondiscriminatory credentialing and recredentialing
- ✓ Statement, Monitoring and Preventing

Factor 7

- Notify provider of information that varies substantially


Factor 8

- Notification of credentialing decision within 60 days

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CREDENTIALING POLICIES

CR 1 - Practitioner Credentialing Guidelines
Element A- Factors 1-11

Factor 9

- Medical director or physician responsible for credentialing

Factor 10

- Securing the confidentiality of all information in the credentialing process


Factor 11

- Practitioner directories and member materials are consistent with credentialing data

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CREDENTIALING POLICIES

CR 1 - Practitioner Rights
Element B Factors 1-3

Factor 1

- Right to review information submitted to report the credentialing application

Factor 2

- Right to correct erroneous information


Factor 3

- Right to receive the status of application

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CREDENTIALING POLICIES

CR 1 - Credentialing System Controls
Element C Factors 1-5

Factor 1

- How primary source verification information is received, dated and stored

Factor 2

- How modified information is tracked and dated


Factor 3

- Staff authorized to modify/delete information when appropriate

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CREDENTIALING POLICIES

CR 1 - Credentialing System Controls
Element C Factors 1-5

Factor 4

- Security controls to protect unauthorized modification


Factor 5

- Auditing process for identifying and assessing risks

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POLICIES / MINUTES

CR 2 - Credentialing Committee
Element A Factors 1-3

Factor 1

- Participating practitioners provide advice for credentialing decisions

Factor 2


- Committee review for files that do not meet thresholds

Factor 3

- Review of files that meet established thresholds

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FILE EVIDENCE

CR 3 - Credentialing Verification
Element A Factors 1-6

Factor 1

- Current and valid License to practice

Factor 2


- Valid DEA or CDS in the each state of practice

Factor 3

- Verification of the highest level of Education and Training

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FILE EVIDENCE

CR 3 - Credentialing Verification
Element A Factors 1-6

Factor 4

- Board Certification status, if applicable

Factor 5


- Work history – the most recent 5 years

Factor 6

- Malpractice History from malpractice carrier or NPDB

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FILE EVIDENCE

CR 3 - Credentialing Verification
Element B Factors 1-2

Factor 1


- Verify state sanctions, restrictions on licensure and limitations on scope of practice
- ✓ State licensing board, FSMB, Chiro Board, etc.

Factor 2

- Verify Medicare/ Medicaid Sanctions
- ✓ Medicaid/Medicare intermediary, OIG, NPDB, FSMB, etc.

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FILE EVIDENCE

CR 3 - Credentialing Application
Element C Factors 1-6

Factor 1

- Reasons for inability to perform the essential functions of the position

Factor 2


- Lack of present illegal drug use

Factor 3

- History of loss of license and felony convictions

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FILE EVIDENCE

CR 3 - Credentialing Verification
Element C Factors 1-6

Factor 4

- History of loss or limitation of privileges or disciplinary actions

Factor 5


- Current malpractice coverage

Factor 6

- Correct and Completeness of the application

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FILE EVIDENCE


CR 4 - ReCredentialing Cycle length
Element A

The length of the recredentialing cycle is within the required 36-month time frame.

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File Documentation CR 5 – CR 8

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CREDENTIALING VERIFICATION DOCUMENTATION

Appropriate Documentation- any combination of the following


- Documents signed (or initialed) and dated by the verifier
- A signed (or initialed) and dated checklist for each PSV element
- A single signature and date, if it applies to all verifications with a statement

Unless otherwise indicated all elements above were reviewed by: NAME: DATE:

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CREDENTIALING VERIFICATION DOCUMENTATION

Appropriate Documentation- automated credentialing system

- Electronic signature or unique electronic identifier of staff
 - ✓ Can only be entered by the signatory
 - ✓ The system must identify the individual verifying the information and the date of verification.
 (see example)

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CREDENTIALING VERIFICATION DOCUMENTATION 2019 Annual Conference

Credential Tracking

Licensure	Verification
Licensure Type: NP/PA - Licensure Sanctions Chk Licensure Number: [REDACTED] Expiration Date: [REDACTED]	Verification: Yes Sanctions: No Expiration: No Sanctions reported: No
Licensure Type: NP/PA Reciprocity Licensure Number: [REDACTED] Expiration Date: [REDACTED]	Verification: Yes Sanctions: No Expiration: No Sanctions reported: No
Licensure Type: NP/PA Reciprocity Licensure Number: [REDACTED] Expiration Date: 12/31/2017	Verification: Yes Sanctions: No Expiration: No Sanctions reported: No
Licensure Type: NP/PA Reciprocity Licensure Number: [REDACTED] Expiration Date: 02/21/2017	Verification: Yes Sanctions: No Expiration: No Sanctions reported: No
Licensure Type: NP/PA Reciprocity Licensure Number: [REDACTED] Expiration Date: 02/21/2017	Verification: Yes Sanctions: No Expiration: No Sanctions reported: No

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CREDENTIALING VERIFICATION DOCUMENTATION 2019 Annual Conference

	Initial Cred/ Recred	NCOA Verification Time Limit	CMS Time Limit ICE CA	Date / Initialed
Licensure	I / R	180 days	180 days	Yes
DEA/ CDS	I / R	Prior to cred	180 days	Yes
Education/Training	I	No limit/prior to cred	180 days	Yes
Board Certification	I / R	180 days	180 days	Yes
Work History	I	365 days	180 days	Yes
Malpractice History	I / R	180 days	180 days	Yes

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CREDENTIALING VERIFICATION DOCUMENTATION 2019 Annual Conference

	Initial Cred/ Recred	NCOA Verification Time Limit	CMS Time Limit ICE CA	Date / Initialed
Sanctions or limitations on licensure	I/R	180 days	180 days	Yes
Medicaid/Medicare Sanctions	I/R	180 days	180 days	Yes

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CREDENTIALING VERIFICATION DOCUMENTATION		2019 Annual Conference		Industry Collaboration Effort
	Initial Cred/ Recred	NCOA Verification Time Limit	CMS Time Limit ICE CA	Date / Initialed
Inability to perform essential functions	I / R	365 days	180 days	No
Illegal drug use	I / R	365 days	180 days	No
History of loss of licensure/history of felony convictions	I / R	365 days	180 days	No
Limitation of privileges or disciplinary actions	I / R	365 days	180 days	No
Current Malpractice Insurance	I / R	365 days	180 days	Yes
Correctness and completeness of the application	I / R	365 days	180 days	No

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POLICY and EVIDENCE		2019 Annual Conference		Industry Collaboration Effort
CR 5 - Ongoing Monitoring and Interventions Element A Factor 1-5				
Factor 1				
<ul style="list-style-type: none"> Collect and review Medicare/Medicaid Sanctions <ul style="list-style-type: none"> ✓ (Sources - NPDB, FSMB, State Medicaid agency, AMA, OIG, etc.) 				
Factor 2				
<ul style="list-style-type: none"> Collect and review sanctions and limitation on licensure <ul style="list-style-type: none"> ✓ (Appropriate State agency, NPDB, FSMB, etc.) 				

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POLICY and EVIDENCE		2019 Annual Conference		Industry Collaboration Effort
CR 5 - Ongoing Monitoring and Interventions Element A Factor 1-5				
Factor 3				
<ul style="list-style-type: none"> Collect, review and investigate complaints every 6 months 				
Factor 4				
<ul style="list-style-type: none"> Collect, review and monitor for Adverse Events every 6 months 				
Factor 5				
<ul style="list-style-type: none"> Implementing appropriate interventions for poor quality 				

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POLICIES

CR 6 - Notification to Authorities and Practitioner Appeal Rights
Element A Factor 1-2

Factor 1

- Range of actions available to improve practitioner performance
- Report actions to the appropriate authorities

Factor 2

- Making the appeals process known

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POLICIES

CR 7 - Assessment of Organizational Provider
Element A Factor 1-3

Factor 1

- Confirmation with state and federal regulatory bodies

Factor 2

- Confirmation of review and approval by an accrediting body

Factor 3

- Site Visit for unaccredited facilities

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POLICIES

CR 7 - Assessment of Organizational Provider
Element B (Factor 1-4) and C (Factor 1-3)

Element B - Factor 1-4 – Medical Providers

- Hospitals, Home Health Agencies, Skilled Nursing Facilities and Free-Standing Nursing Facilities

Element C - Factor 1-3 – Behavioral Providers

- Inpatient, Residential, Ambulatory

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EVIDENCE

CR 7 - Assessment of Organizational Provider

Element D (Factor 1) and E (Factor 1)

Element D - Factor 1

- Assessing Medical Providers

Element E - Factor 1

- Assessing Behavioral Health Providers

Organization Name	Organization Type	Confirmation Dates and Statuses		
		Issuance and Renewal	Accrediting Body	Accredited
Mega	Hospital	4/1/2018; Active 4/5/2018; Active	4/1/2018; Active 4/1/2018; Name; Active	Final provider, used not conducted by state or CMO
Downsdown Surgery Center	Free-Standing Surgical Center	3/20/2018; Active 3/16/2018; Active	Name	2/18/2018; CMO Compliant
Direct Physicians	Home Health	3/20/2018; Active 3/17/2018; Active	3/20/2018; Active 3/20/2018; Name; Active	Final provider, used not conducted by state or CMO

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DELEGATION AGREEMENT

CR 8 - Delegation of Credentialing

Element A Factor 1-6

Factor 1

- Is mutually agreed upon

Factor 2

- Describes delegated activities and responsibilities of the delegate

Factor 3

- Requires at least semi-annual reporting

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DELEGATION AGREEMENT

CR 8 - Delegation of Credentialing

Element A Factor 1-6

Factor 4

- Performance Monitoring

Factor 5

- Right to approve, suspend and terminate


Factor 6

- Consequences for failure to perform

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EVIDENCE

CR 8 - Predelegation Evaluation
Element B


Evaluated delegate capacity to meet NCQA requirements before delegation began

- Site Visit
- Telephone consultation
- Documentation review
- Committee Meetings
- Virtual review

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EVIDENCE


CR 8 - Review of Delegate's Credentialing Activities
Element C Factor 1-4

<p><u>Factor 1</u></p> <ul style="list-style-type: none"> ▪ Annually review its delegate's policies and procedures <p><u>Factor 2</u></p> <ul style="list-style-type: none"> ▪ Annual File audit 	<p><u>Factor 3</u></p> <ul style="list-style-type: none"> ▪ Annual evaluation <p><u>Factor 4</u></p> <ul style="list-style-type: none"> ▪ Evaluation of reports
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EVIDENCE

CR 8 - Opportunities for Improvement
Element D

Identify and follow up on opportunities for improvement, if applicable.

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Health Industry Collaboration Effort - reference


Reference the link to the ICE website- library

- The Training Tool can be used as a reference for more details about what provider organization's policies/procedures and file evidence should include.

<http://www.iceforhealth.org/library.asp>

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Q&A

Does anyone have any questions?

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Polling Questions

1. While completing initial credentialing of provider, the address on their DEA was in a different state. The practitioner had supplied a notice they will not write scripts until their new DEA with the appropriate state is received. Is this acceptable to put the file through with this documentation?

- Yes
- No

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Polling Questions

2. NCQA required a minimum of most recent five year work history reviewed at initial credentialing. If the practitioner has fewer than five years of work history, the time frame starts at the initial licensure date.

- a. True
- b. False

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Polling Questions

3. It's appropriate for the credentialing specialist to query the AMA at the time of recredentialing to verify the physicians medical license

- a. True
- b. False

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Polling Questions


4. NCQA accepts a checklist if the checklist includes each of the following for each verification:

- a. The source used
- b. The date of verification
- c. The signature or initials of the person who verified the information
- d. The expiration date and report date, if applicable.
- e. All of the above

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Polling Questions


5. The timeframe between credentialing cycles cannot exceed 36 months from the previous credentialing committee date.

- a. True
- b. False

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Polling Questions


6. If an organization delegates any NCQA-required credentialing activities, there needs to be written delegation agreement that: (select all that apply)

- a. Mutually agreed upon
- b. Describes the delegated activities and responsibilities of both parties
- c. Requires at least semiannual reporting by the delegated entity to the organization

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Polling Questions

- d. Describes the process by which the organization evaluates the delegated performance
- e. Specifies that the organization retains the right to approve, suspend and terminate individual practitioners, providers and sites, even if the organization delegates decision making.
- f. Describes the remedies available to the organization if the delegate entity does not fulfill its obligations, including revocation of the delegation agreement.
- g. All of the above

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Polling Questions

7. As an auditor, the delegate provides a checklist with initial and sources. The file documents are included and the reviewer has dated them, but did not initial. Is this a compliant file?

- a. compliant
- b. non-compliant

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Polling Questions

8. NCQA accepts the practitioner's attestation signature through fax, digital, scanned or photocopied. Signature stamps are not acceptable (unless there is a physical impairment)

- a. True
- b. False

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Polling Questions

9. As an auditor, a checklist is provided with all required items that are dated and initialed by the reviewer. The checklist does not have expiration dates. The actual documents are not included in the file. How would the license element be scored?

- a. compliant
- b. non-compliant

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Polling Questions

10. Are you ready to get your free drink?
a. Yes
b. No

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Session Ended

THANK YOU!

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