

**Policy Name: Nurse Practitioner Credentialing Policy (HHP-11)****Effective Date:****Approved by the Board:** [June 26, 2013]**Previous Versions:** None**Approval Signature:** **Name:** Douglas Kwock, M.D.**Title:** President/Chair**Definitions:**

**"Advance Practice Registered Nurse" or "APRN"** means an advanced practice nurse who is nationally board certified by certifying organizations such as the American Nurses Association and licensed as a APRN by the state of Hawai'i.

**"HHP"** means Hawai'i Health Partners, LLC.

**"HHP Patient(s)"** means an individual who is enrolled in a health plan or product sponsored or administered by a commercial or government health care insurer or any self-insured health plans that have contracted with HHP to participate in quality and incentive programs related to the furnishing of medically necessary items and services to such individual.

**"NPDB"** means the National Practitioner Data Bank maintained by the U.S. Department of Health and Human Services.

**"OIG"** means the U.S. Department of Health and Human Services Office of Inspector General.

**"Participation Agreement"** means a written agreement with HHP to provide covered services to HHP Patients.

**"Physician Participant(s)"** means a Hawai'i-licensed physician in active clinical practice who has entered into and has a current Participation Agreement with HHP or who has been employed by an entity that has entered into and has a current Participation Agreement with HHP and is a participating physician thereunder.

**"Provider"** means a physician or allied health professional who has been credentialed and approved by the Board as a participant with HHP and has not had his or her Participation Agreement or joinder agreement terminated.

**Purpose:**

This policy defines the criteria and practice by which APRNs may be included in the HHP network and establishes practice standards for APRNs. This policy requires all APRNs to fulfill the following requirements:

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- 1) Be board certified by a nationally recognized licensing board such as the American Nurses' Association. Grandfathering of non-boarded APRNs will not be permitted even if allowable by state law.
- 2) Have a written agreement with a collaborating physician who is a Physician Participant.
- 3) Meet the credentialing criteria in this policy.

### **Policy / Procedure:**

#### **I. Practice Requirements**

- A. APRNs must meet the standards related to APRNs as outlined in the Participation Agreement and HHP policies which establish standards for Providers on access to and availability of health care. They may work under the supervision of either primary care physicians or specialists with their work requirements being delineated by the supervising agreement between the physician and the APRN.
- B. APRNs practicing in the State of Hawai'i must provide services at the same location as the APRN's collaborating physician; the collaborating physician provides the continuing medical management required; and a HHP Patient who selects a practice with a APRN shall be informed that the practice has APRNs which the HHP Patient may see on occasion.

#### **II. Credentialing Criteria**

In addition to meeting all necessary state requirements for licensure as a APRN, applicants must also meet the HHP credentialing criteria listed below.

- A. License to practice
  - License to practice is verified directly from the State of Hawai'i Department of Commerce and Consumer Affairs (DCCA), Professional and Vocational Licensing Division.
  - The license must be valid, current, unencumbered and in effect at the time the file is ready for review and decision-making.
- B. Board certification
  - All APRNs must be board certified.
  - If a APRN states that he/she is board certified, credentialing staff must verify current board certification and document the expiration date within the APRN's file. If the APRN's board certification does not expire, lifetime status must be verified and documented in the APRN's file.
  - Board certification must be current at the time the credentialing file is ready for review and decision-making.
- C. Work history
  - The APRN shall provide a minimum of five (5) years of relevant work history through the APRN's application or curriculum vitae and such other information as may be requested. There is no primary-source verification of the work history requirement.
  - Relevant experience includes work as a health professional. If the APRN has practiced fewer than five (5) years from the date of verification of work history, it starts at the time of initial licensure. Experience working as a non-APRN health professional should be included.
  - A gap in work history exceeding six (6) months must be clarified orally or in writing. A gap over one (1) year must be clarified in writing.

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- D. Professional liability insurance coverage
  - Professional liability insurance coverage must include a minimum coverage limit required by the Participation Agreement and HHP policy. Professional liability insurance coverage must be current at the time the file is ready for review and decision-making.
  - For APRN's with federal tort coverage, the application need not contain the current amount of malpractice insurance coverage. An attestation from the APRN or a copy of the federal tort letter meets the requirement.
- E. Professional liability claims settlement history
  - Obtain written confirmation of the past five (5) years of history of malpractice settlements from the NPDB.
  - The professional liability claims settlement history must be no older than one hundred and eighty (180) days at the time of review and decision-making.
- F. Sanctions, restrictions or limitations in scope of practice, as defined by the State Board of Medical Examiners or licensing agent
  - Review of information on sanctions, restrictions on licensure and limitations in scope of practice must cover the most recent five (5) year period available through the data source. If the APRN is licensed in more than one state in the most recent five (5) year period, the query must include all states in which they worked.
  - Information regarding sanctions, restrictions or limitations in scope of practice must be no older than 180 days at the time of review and decision-making.
- G. Medicare and Medicaid sanctions
  - Review of information on sanctions, restrictions on licensure and limitations in scope of practice must cover the most recent five (5) year period available through the OIG, the System for Award Management (SAM) and the NPDB.
  - Information regarding sanction, restriction or limitations in scope of practice must be no older than one hundred and eighty (180) days at the time of review and decision-making.
- H. Application with attestation
  - The application includes a current and signed attestation that is no older than one hundred and eighty (180) days at the time of review and decision-making.
  - Negative information regarding the APRN's ability to provide services (e.g., any inability to perform the essential functions of the position with or without accommodation, illegal drug use, loss of license or felony convictions, loss of limitation of clinical privileges or disciplinary action at all facilities or organizations with which the APRN has had privileges) must be explained in writing by the APRN before being forwarded for review and decision-making.
- I. Written Agreement with Physician Participant
  - Must be provided at the time of initial credentialing with the APRN's application.
- J. Recommendation and Decision-Making Process. In considering an APRN's application to participate in HHP, the HHP Medical Director and Credentialing Committee shall follow the "Recommendation and Decision-Making Process" described in the Physician Credentialing Policy (HHP-10).

### **Related Documents:**

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