

Policy Name: Credentialing Policy (HHP-10)

Effective Date: March 23, 2016

Approved by the Board: March 23, 2016

Previous Versions: June 26, 2013, September 24, 2013, January 22, 2014, May 27, 2015, February 24, 2016

Approval Signature: _____



Name: Douglas Kwock, M.D.

Title: President/Chair

Definitions:

“Attestation” means a signed statement indicating that a physician personally confirmed the validity, correctness and completeness of his or her credentialing application.

“Committee” means the HHP Recruiting and Credentialing Committee.

“HHP” means Hawaii 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.

“HPH” means Hawaii Pacific Health and its affiliated hospitals.

“Medical Director” means the HHP Medical Director as defined by the Medical Director Job Description.

“Medical Staff Membership” means holding current and unrestricted membership in the medical staff of at least one of the following hospitals: Kapiolani Medical Center for Women & Children; Pali Momi Medical Center; Straub Clinic & Hospital; or Wilcox Memorial Hospital.

“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.

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

“Unencumbered License” means a license that has not had any terms or conditions or other limitations attached to it such as probation or suspension.

Purpose:

Credentialing Policy (HHP-10)

This policy defines the credentialing criteria and the process by which HHP reviews and evaluates the qualifications of applicants (physicians and podiatrists, and Independent Allied Health Providers) applying to become HHP participating providers.

- 1) Each applicant who applies to participate in HHP must satisfy HHP's credentialing criteria prior to the time the applicant first furnishes services as an HHP participant.
- 2) HHP does not make credentialing decisions based on an applicant's race, color, national origin, ancestry, religion, gender, marital status, sexual orientation, age, or the type of procedure or patient in which the applicant specializes.
- 3) HHP or its designee will complete any primary source verification that is required by this policy.
- 4) Applicants will be given the opportunity to clarify any discrepancies found during the review of their application.

Policy / Procedure:

I. Credentialing Criteria and Procedures

A. Criteria for initial credentialing : In addition to meeting all necessary requirements for licensure in Hawai'i, applicants must also meet the following HHP credentialing criteria:

1. License to practice in Hawai'i
 - The license must be verified by the Hawai'i Board of Medical Examiners (Department of Commerce & Consumer Affairs (DCCA), Professional and Vocational Licensing Division.
 - The applicant must possess an Unencumbered License.
2. Drug Enforcement Agency (DEA) and Hawai'i Narcotics Enforcement Division registration
 - If applicant will be prescribing medications, the applicant must be actively registered with the DEA and NED and the applicant must have a DEA and NED Controlled Substances Registration certificate in the locale where the applicant seeks to provide care to HHP patients.
3. Education and training
 - The highest level of education training must be verified. This includes graduation from medical school, residency, fellowship and board certification.
 - Verification of board certification is required only if the applicant states on the credentialing application that he or she is board certified.
 - Because medical specialty boards verify education and training, verification of board certification fully meets the requirement for verification of education and training unless otherwise stated below. If the applicant is not board certified then medical school and residency must be verified.
 - Applicants who did not receive training in a specialty and are not board certified in that specialty will not be credentialed in that specialty but at the highest level of verified training.
4. Board certification
 - All applicants for whom board certification is available must be or have been board certified unless they completed residency and/or fellowship training within the past seven (7) years, and upon successful completion provide this information to the Committee. NOTE: Applicants who completed internship or residency prior to 1980 and who have been in practice in the specialty requested for at least ten (10) years

and completed training in that specialty from an approved program are exempted from the board certification requirement.

- Any applicant who is not board certified, but meets the remainder of the credentialing criteria, will be grandfathered in without board certification until December 31, 2014. Thereafter, all applicants applying to become participants in HHP must be or have been board certified or meet the exemption described above.
 - The credentialing staff must verify that the applicant is or has been board certified.
5. **Work history**
 - The applicant shall provide a minimum of five (5) years of relevant work history through the applicant's application or curriculum vitae and such other information as may be requested. There is no primary-source verification of the work history requirement.
 - The applicant must explain, in writing, any gap in his or her work history that exceeds six (6) months.
 6. **Medical Staff Membership**
 - The applicant must have and maintain Medical Staff Membership. The credentialing staff must verify that the applicant has Medical Staff Membership at the facility listed on the applicant's application.
 - The applicant is not required to have clinical privileges at an HHP participating hospital unless such privileges are necessary for applicant to practice his or her specialty.
 7. **Professional liability insurance coverage**
 - Professional liability insurance coverage must include a minimum coverage limit required by the Participation Agreement and HHP policy.
 8. **Professional liability claims settlement history**
 - The credentialing staff must query the NPDB for written confirmation of the applicant's history of malpractice settlements.
 - The applicant's professional liability claims settlement history must be no older than one hundred and eighty (180) days at the time of review and decision-making.
 9. **Sanctions, restrictions or limitations in scope of practice, as defined by the Hawai'i Medical Board**
 - The credentialing staff must review information on sanctions, restrictions on licensure and limitations on scope of practice. If the applicant was licensed in more than one (1) state during the most recent five (5) year period, the query must include all states in which he or she worked during such period.
 - Information regarding sanctions, restrictions or limitations on the applicant's scope of practice must be no older than one hundred and eighty (180) days at the time of review and decision-making.
 10. **Medicare and Medicaid participation and sanctions**
 - The credentialing staff must verify that the applicant is a participant in the Medicare and State of Hawai'i Medicaid programs. The Medicare participation requirement will be waived for applicants who limit their patient population to ages under 65.
 - The credentialing staff must review all information on sanctions, restrictions on licensure and limitations in scope of practice available through the OIG, the System for Award Management (SAM) and the NPDB.
 - Information regarding sanctions, restrictions or limitations on the applicant's scope of practice must be no older than one hundred and eighty (180) days at the time of review and decision-making.

Credentialing Policy (HHP-10)

11. Other

- Federation of State Medical Boards
- Regulated Industries Complaint Office
- First Advantage Background Report (Criminal Background Check)

12. Application with attestation

- The application must include a signed Attestation that is no older than one hundred and eighty (180) days at the time of review and decision-making.
- The applicant must explain, in writing, any and all negative information regarding the applicant's ability to provide services before the application is forwarded to the Committee for review and decision-making.

B. Recommendation and Decision-Making Process

1. The Committee will consider and make recommendations to HHP's Board of Managers regarding all applicants.
2. The HHP Board of Managers shall have final decision-making authority with respect to all applicants.
3. All documents in the credentialing file must be valid at the time the applicant begins participation with HHP.
4. If the HHP Board of Managers does not approve an application because the applicant does not meet one or more of the above criteria, the applicant may not reapply for participation until at least one (1) year has passed from the date of the Board's decision.

C. Processing Voluntary Resignations

1. Participating providers who no longer meet credentialing criteria as above will be sent a certified letter from the Recruiting and Credentialing Committee Chair. The participating provider has thirty (30) days from receipt of the request to provide the requested information or clarification. Failure to do so will be deemed a voluntary resignation from participation in HHP. If this occurs, the provider shall be notified in writing by the Board of Managers.
2. Any further application submitted by this provider shall be processed as an initial application.

II. Credentialing Applicants With Medical Staff Membership Without Clinical Privileges

Applicants described in Section I.A.6. are required to provide updated State licensure(s) with expiration date, State and Federal DEA registration indicating coverage for schedules II, IIN, III, IIIN, IV and V with expiration date (exceptions may include Diagnostic Radiologists, Medical Geneticists, Pathologists, and other specialists/subspecialists as determined by the Board of Managers) and Professional Liability Insurance.

The credentialing staff must ensure that the above documents are obtained and meet HPH/HHP standards as part of credentialing criteria.

Related Documents:

HRS § 453-1 et seq. (Medicine and Surgery – Generally)
HAR § 16-93-1 et seq. (Osteopaths)

Credentialing Policy (HHP-10)

HAR § 16-85-1 et seq. (Medical Examiners)

Recruiting and Credentialing Committee – Composition and Functions Policy (HHP-02)

Distribution: