

<b>Vermont Psychiatric Care Hospital Policy and Procedure</b>		
<b>Credentialing of VPCH Medical Staff</b>		
Effective: August 2023	Revised:	Due to Review: August 2025

## **POLICY**

Vermont Psychiatric Care Hospital (VPCH) collects information regarding practitioners' current license status, training, experience, competence, and ability to perform the requested privileges and seeks verification to minimize the possibility of granting privileges based on the review of fraudulent documents. Recredentialing will occur in accordance with the VPCH Medical Staff Bylaws.

### **DEFINITIONS (if applicable):**

Credentialing: Credentialing is a process that verifies the qualifications (education/training/experience) and legitimacy of healthcare professionals (e.g., licensure/certification).

Primary Source Verification: Verification of an individual practitioner's reported qualifications in writing by the original source or an approved agent of that source. Methods for conducting primary source verification of credentials include direct correspondence, documented telephone verification, secure electronic verification from the original qualification source, or reports from credentials verification organizations (CVOs) that meet Joint Commission requirements.

Secondary Source Verification: Secondary Source Verification is a process of verifying a specific credential through sources other than the original source. When it is not possible to obtain information from the primary source, reliable secondary sources may be used.

## **PROCEDURE**

### Credentialing

Credentialing involves the collection, verification, and assessment of information regarding three critical parameters:

- Current licensure as required by state and/or federal law. Verification of current licensure shall occur prior to the granting of initial privileges, re-privileging, and at the time of each practitioner's professional license expiration.
- Education and relevant training. Verification informs the organization of the practitioner's clinical knowledge and skillsets. Primary verification sources include the specialty certifying boards, letters from professional schools, and letters from postgraduate education or postdoctoral programs for completion of training. When it is not possible to obtain information from the primary source, reliable secondary sources, such as another hospital that has documented primary source verification, may be used.
- Experience, ability, and current competence to perform the requested privilege(s). These are to be verified by peers knowledgeable about the practitioner's professional performance (patient care, medical/clinical knowledge, practice-based learning and

improvement, interpersonal and communication skills, professionalism, systems-based practice)

For Executive Medical Officer Candidates, the provision of psychiatric services at VPCH are under the direction of a medical director who is board (American Board of Psychiatry and Neurology or American Osteopathic Board of Neurology and Psychiatry) certified or board eligible.

Credentialing is completed by VPCH's Medical Staff Office manager, or their designee, and in conjunction with a contractor for contracted employees. The contractor shall collect and report primary source verification information as delegated by the DMH, however the contractor has no decision-making authority or responsibility regarding DMH's practitioners or the final credentialing and/or privileging at VPCH.

To facilitate smooth operations for both organizations, the parties agree to share relevant documents. All credentialing must be documented and retained by the Medical Staff Office Manager in an individual practitioner file by VPCH. Credentialing files at a minimum must include the following:

- Application
- Practitioner's CV (Curriculum Vitae)
- Primary source license verification through the FSMB (Federation of State Medical Boards) or the applicable licensing board.
- Verification of hospital affiliations. Primary source verification of affiliation/work history for past 7 years. Written confirmation from each institution will be obtained, as appropriate. Verification will include the date of appointment and any restrictions on the scope of privileges, as applicable, if the facility does not charge a fee for verification.
- Current copy of DEA registration (if applicable) and when appropriate verification of the provider's CDS certificate for practitioners and facilities that can prescribe or dispense controlled substances. Verification via the DEA registration website and via written confirmation from the Controlled Substance Act Registration Database, as applicable.
- Primary source verification of education and training including US undergraduate degrees. Educational Commission for Foreign Medical Graduates (ECFMG) primary source verification, as appropriate. American Medical Association (AMA) and American Osteopathic information Association (AOIA) profile will provide primary source verification primarily and as needed directly from the applicable GME office.
- Primary source verification of current clinical competence:
  - Obtain clinical evaluations from program directors if training completed within the last 2 years.
  - Obtain clinical evaluations from:
    - Division or Department Chair for all current affiliations
    - If practitioner has only one current affiliation, and that affiliation has been held for less than 24 months, evaluation will be sought from the Division or Department Chair from the practitioner's previous primary affiliation.
- Primary source verification of nationally recognized board certification for practitioners that state they are board certified. Verification through Board Certified Docs or directly

from the Board. Should the board charge a fee for verification, it shall be passed through to the DMH.

- Verification of malpractice insurance by obtaining face sheets. A copy of the current and previous 10 years malpractice coverage that shows the dates and amounts of coverage will be obtained from the practitioner.
- As applicable to the discipline, verification of malpractice claims history. Primary source verification of all claims history for past 7 years will be obtained directly from the insurer. In addition, the NPDB will be queried.
- Obtain three written peer references known within the last 24 months, directly from primary source.
- Primary source verification of Medicare and Medicaid sanctions, criminal history, and other CMS requirements. The following will be queried:
  - (VCIC) Vermont Criminal Information Center – Record Check
  - (AHS)VAHS Adult Abuse Registry Report
  - (AHS) VAHS Child Abuse Registry Report
  - (SAM) System for Award Management
  - (OFAC) Office of Foreign Assets Control – Blocked Persons
  - (OIG) Office of the Inspector General
  - (NY-OIG) NY Office of the Inspector General
  - (NPDB/HIPDB) National Practitioner Data Bank
  - Medicare Opt-out Report – National Government Services (NGS)
  - FSMB – Federation of State Medical Boards
  - Social Security Death Master File (SSDMF)
- Medical Staff Credentialing Committee Review and Recommendation
- Decision to Credential a practitioner at VPCH

### **Temporary Privileges**

Acceptable circumstances for which granting temporary privileges are limited to:

- To fulfill an important patient care, treatment, and service need, or
- When an applicant for new privileges<sup>^</sup> with a complete application that raises no concerns is awaiting review and approval by the Medical Executive Committee (MEC) and the governing body.

All temporary privileges shall be granted by the Governing Body or authorized designee, providing the applicant has been reviewed and recommended for approval by the Medical Staff and the Medical Director for a period not to exceed 180 days.

An individual with temporary privileges is not considered a member of the VPCH Medical Staff.

### **Tracking and Renewal**

Items required for credentialing that may expire are monitored and kept current. The Medical Staff Office Manager, or their designee, will work in conjunction with contractors as needed to ensure that credentialing files are maintained and up to date.


### **Completed File Storage**

Completed credential files will be stored onsite. VPCH and contractor shall treat all credentialing and recredentialing records and any information provided to it (including but not limited to: personal health information related to the provider or patient of the provider, its provider

applicant, or any verification source) as confidential and shall not disclose or permit to be disclosed confidential information to any person or entity except employees with a need to know in the normal course of their work.

**References (if applicable):**

- VPCH Medical Staff Bylaws
- Columbus Contract

<b>Approved by</b>	<b>Signature</b>	<b>Date</b>
Emily Hawes Commissioner Vermont Department of Mental Health	 <p>DocuSigned by: Emily Hawes C50275615A62462...</p>	8/30/2023