Policy Statement.

UNT Health shall credential and grant initial, renewed or revised privileges or deny privileges to licensed independent practitioners and other licensed practitioners. Before UNT Health can grant privileges, it must ascertain that licensed practitioners have the necessary credentials to perform their privileges. To grant privileges to licensed practitioners, UNT Health must collect, verify, and assess information related to their credentials, including current licensure, relevant training, current competence, and the ability to perform the clinical privileges that they have requested. Medical Staff Members shall exercise only those privileges specifically granted to them by the UNT Health Board.

Application of Policy.

This policy shall apply to all employed or contracted UNT Health licensed independent practitioners and, as designated by UNT Health, other licensed practitioners, the Credentialing office in the Department of Healthcare Quality and Risk Management (“HQRM”), Department Chairs, the Credentials Committee and the UNT Health Board.

Definitions.

1. Application means the packet that includes the Texas Standardized Credentialing Application form and other forms that all practitioners must complete when applying initially or reapplying for credentials and privileges at UNT Health.

2. Applicant means a practitioner applying for medical staff membership for the first time.

3. Credentialing means the process of collecting, reviewing and assessing practitioners’ qualifications and competence for membership on the UNT Health medical staff.

4. Medical Staff Member means a licensed independent practitioner or other licensed practitioner who has been credentialed by UNT Health.

5. Privileging means the process followed to authorize practitioners to provide certain services to patients in a UNT Health clinic within the scope of their qualifications and competencies and based upon the clinical needs of UNT Health.
6. **UNT Health Board** for purposes of this policy, means the voting members of the UNT Health Board or a minimum of two UNT Health Board members who have been delegated the authority by the UNT Health Board to act on behalf of the UNT Health Board.

**Procedures and Responsibilities.**

**A. Credentialing and Privileging**

1. Each clinical department shall maintain a list of privileges for each specialty which have been approved by the Department Chair and the Credentials Committee.

   **Responsible Party:** Department Chairs and Credentials Committee.

2. All Applicants and Medical Staff members who wish to apply to be privileged to practice in a UNT Health clinic must complete an Application and the applicable request for clinical privileges. Those Applicants and Medical Staff Members who will not be practicing in a UNT Health clinic will be credentialed only and will not be granted privileges.

   **Responsible Party:** All Applicants and Medical Staff Members; Credentialing Office

3. The Credentialing office in the HQRM department is responsible for processing all Applications.

   **Responsible Party:** Credentialing office.

4. Before sending an Application to an Applicant, the Credentials office must first receive the offer of employment letter signed by the Applicant or, for contract Applicants, a written request from the Department Chair to initiate the credentialing process. For those Applicants who will be providing services for the Federal Bureau of Prisons, the Contracts Operations and Business Development office shall send the written request to initiate the credentialing process.

   **Responsible Party:** Contracts Operations and Business Office, Department Chairs and Credentialing Office

5. The Credentials office will send a renewal Application to Medical Staff Members at least five months prior to the expiration date of their medical staff membership.

   **Responsible Party:** Credentialing Office

6. Upon receipt of a completed Application from an Applicant or Medical Staff Member, the following information shall be collected and documented:
a. For Applicants only, verification of the identity of the individual by viewing a valid picture identification, i.e., driver’s license or passport.

b. Evidence of training through primary sources, i.e., specialty certifying boards, letters from professional schools, postgraduate or postdoctoral programs or other designated equivalent sources.

c. Evidence of current license, certification or registration as required by law or regulation, without challenges or restrictions, through primary sources or designated agencies.

d. For Applicants, peer and/or faculty recommendations from outside of UNT Health that demonstrate the Applicant’s ability to perform the privileges requested and that demonstrate the applicant’s professional performance, judgment, clinical or technical skills. For Medical Staff Members renewing their medical staff membership, or renewing or revising their privileges, UNT Health performance improvement activities, peer review, Chair recommendations, information related to adherence to UNT Health’s policies, procedures, rules and regulations or other information shall be collected for purposes of this section.

e. Information from the National Practitioner Data Bank (“NPDB”) and the Healthcare Integrity and Protection Data Bank (“HIPDB”).

f. For Applicants, criminal background check results.

g. Evidence of professional liability insurance in the amounts required by UNT Health for medical staff membership.

h. A written statement from the Applicant or Medical Staff Member that no health problems exist that could affect his/her ability to practice or perform requested privileges.

   Responsible Party: Credentials office

7. Completed Applications shall be sent to the appropriate Department Chair for approval and signature. A list of requested privileges, as applicable, shall be included for the Chair’s review and approval.

   Responsible Party: Credentials Office and Department Chairs

8. All completed Applications that have been signed by the department Chairs shall be reviewed by the Credentials Committee. In addition to reviewing and evaluating the information collected by the Credentials Office as outlined in section 4, above, the Credentials Committee will review and evaluate the following information:
a. Any voluntary or involuntary relinquishment of a license or registration.

b. Any voluntary or involuntary termination of medical staff privileges at another organization.

c. Any voluntary or involuntary limitation, reduction or loss of clinical privileges.

d. Any professional liability actions that resulted in a final judgment against the applicant.

e. Any clinical performance that is outside acceptable standards.

**Responsible Party:** Credentials Committee

9. The Credentials Committee shall send its recommendations to the UNT Health Board for final approval.

**Responsible Party:** Credentials Committee and UNT Health Board

10. Medical staff membership and privileges granted shall meet the needs of the population served by UNT Health and shall be consistent with site-specific care, treatment and services provided. Privileges shall be site-specific and granted or denied based upon current, written privileging information and the process outlined in this Policy.

**Responsible Party:** Credentials Committee and UNT Health Board

11. The practitioner shall be given a written list of granted initial, renewed, revised or denied privileges. The list shall include notification that the scope and content of patient services are limited to the privileges contained within the list.

**Responsible Party:** Credentials Committee and UNT Health Board

12. If the Credentials Committee or the UNT Health Board votes to deny credentialing or to revise, deny or revoke any privileges, the applicant or Medical Staff Member shall be entitled to a Fair Hearing and Appeal process as outlined by separate policy.

**Responsible Party:** Credentials Committee

13. Medical staff membership and privileges are granted, renewed or revised for no longer than a three year period.

**Responsible Party:** Credentials Committee and UNT Health Board

14. The credentialing and privileging process is privileged and confidential. All information, records, reports and communications received and generated by or at the direction of the Credentials Committee or the UNT Health Board are privileged
and confidential and shall not be released without permission of the Chair of the Committee or Board in consultation with the General Counsel’s office.

**Responsible Party:** Credentials Office, Credentials Committee and UNT Health Board

### B. Provisional Status

1. Each Medical Staff Member shall be placed on provisional status for a period of at least 3 months upon initial appointment. The Credentials Committee may extend the provisional status period for a period not to exceed a total of 24 months, if necessary.

   **Responsible Party:** Credentials Committee

2. For those Medical Staff Members who will have privileges in a UNT Health clinic, the Credentials Committee shall assign a proctor from the UNT Health medical staff. The proctor should be in the same specialty as the Medical Staff Member, if possible, and shall be responsible for evaluating the Medical Staff member’s ability to perform the privileges in a satisfactory manner.

   **Responsible Party:** Credentials Committee

3. The proctor shall review a minimum of 10 medical records of patients treated by the Medical Staff Member. The review should include observing the Medical Staff member performing procedures, as applicable. The Credentials Committee may require other proctoring activities it deems appropriate at any time during the provisional status period.

   **Responsible Party:** Credentials Committee and Medical Staff Members

4. For those Medical Staff Members who are credentialed at UNT Health but who do not have clinical privileges, the Chair of the Department shall be responsible for monitoring the practitioners in their department during the provisional period in a manner required by the Credentials Committee.

   **Responsible Party:** Credentials Committee, Department Chairs and Medical Staff Members

5. The proctor and, as applicable, the Chair, shall submit an evaluation of the Medical Staff Member to the Credentials Committee on a form and within the time frame designated by the Credentials Committee.
6. The Credentials Committee shall review all evaluations and may either change the Medical Staff Member from provisional status to active status or extend the provisional status period as outlined in this Policy.

   Responsible Party: Credentials Committee

7. If the Credentials Committee or the UNT Health Board votes to revise, deny or revoke any privileges, the Medical Staff Member shall be entitled to a Fair Hearing and Appeal process as outlined by separate policy.

   Responsible Party: Credentials Committee

C. Temporary Privileges

1. At the request of the Department Chair, the Chief Medical Officer and the Chair of the Credentials Committee have the discretion to grant temporary privileges to an Applicant to meet important patient needs. Temporary privileges may not exceed 120 days.

   Responsible Party: Department Chairs, Credentials Committee Chair and Chief Medical Officer

2. The Department Chair shall notify the Credentials office of any Applicant requesting temporary privileges.

   Responsible Party: Department Chairs

3. The Credentialing office shall send an Application to an Applicant.

   Responsible Party: Credentialing office

4. Upon receipt of a completed Application from an applicant, the following information shall be collected and documented:

   a. Verification of the identity of the individual by viewing valid picture identification, i.e., driver’s license or passport.

   b. Evidence of training through primary sources, i.e., specialty certifying boards, letters from professional schools, postgraduate or postdoctoral programs or other designated equivalent sources.
c. Evidence of current license without restriction through primary sources or designated agencies.

d. Evidence of current competence through primary sources or designated agencies.

e. Information from the National Practitioner Data Bank ("NPDB") and the Healthcare Integrity and Protection Data Bank ("HIPDB").

f. Criminal background checks results

g. Evidence of professional liability insurance in the amounts required by UNTHealth for medical staff membership.

h. A written statement from the Applicant that no health problems exist that could affect his/her ability to perform requested privileges.

    **Responsible Party:** Credentials Office

5. Completed Applications shall be sent to the appropriate department Chair for approval and signature. A list of requested clinical privileges shall be included for the Chairs review and approval.

    **Responsible Party:** Credentials Office and Department Chairs

6. All completed Applications that have been signed by the department Chairs shall be reviewed by the Chief Medical Officer and the Chair of the Credentials Committee. In addition to reviewing and evaluating the information collected by the Credentials Office as outlined in section 4, above, the Chief Medical Officer and Chair of the Credentials Committee will review and evaluate the following information:

   a. Any involuntary termination of medical staff privileges at another organization.

   b. Any voluntary or involuntary limitation, reduction or loss of clinical privileges.

   c. Any professional liability actions that resulted in a final judgment against the applicant.

    **Responsible Party:** Credentials Committee Chair and Chief Medical Officer

7. An applicant is not entitled to a Fair Hearing or Appeal if temporary privileges are denied, revised or revoked.

    **Responsible Party:** Credentials Committee Chair and Chief Medical Officer
References and Cross-references.

Fair Hearing and Appeal Plan Policy

Joint Commission Comprehensive Accreditation and Certification Manual - Ambulatory Care

Forms and Tools. None

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