

THURSDAY, NOVEMBER 14

7:00 TO 8:00 AM – BREAKFAST

8:00 AM TO 12:00 PM – SEMINAR SESSION

8:00 TO 10:00 AM –

- Credentialing Jeopardy
- Credentials Committee Meeting Agenda
 - o Applications of Dr. Hotmas and Dr. Sconder

10:00 TO 10:15 AM – BREAK

10:15 AM TO 12:00 PM –

- Take Home Tips on Credentialing
 - o Develop Good Policies
 - o Align Your Contracting and Credentialing Processes
 - o Develop and Use Threshold Eligibility Criteria
 - o Use Waivers Sparingly
 - o Automatic Relinquishment
 - o Don't Process Incomplete Applications
 - o Manage Misrepresentations and Omissions
 - o Use the Telephone
 - o Speak No Evil Has a Cost
 - o Make Reappointment Meaningful

12:00 PM – DAY 1 ADJOURNS

5:30 TO 6:30 PM – COCKTAIL PARTY
(NEOPOLITAN BALLROOM)**FRIDAY, NOVEMBER 15**

7:00 TO 8:00 AM – BREAKFAST

8:00 AM TO 12:00 PM – SEMINAR SESSION

8:00 TO 9:05 AM –

- Credentials Committee Meeting
 - o Review & Approval of Meeting Minutes
 - o Conflicts of Interest
 - o Dr. Meddleson Access to Credentials File

9:05 AM TO 9:30 AM –

- Wheel of Misfortune

9:30 TO 10:15 AM –

- Clinical Privileges
 - o Introduction & Privileging Bingo
 - o Temporary Privileges
 - o Dr. Paul Monary Case Study (Criteria for Privileges)

10:15 TO 10:30 AM – BREAK

- Clinical Privileges *cont.*
 - o Justin Bourne, M.D. Case Study (Privileges that Cross Specialty Lines)
 - o Walt Wiley, M.D. Case Study (Privileges for New Procedures)
 - o Telemedicine

11:20 AM TO 12:00 PM

- Legal Protections

12:00 PM – DAY 2 ADJOURNS

SATURDAY, NOVEMBER 16

6:00 TO 7:00 AM – BREAKFAST

7:00 TO 11:00 AM – SEMINAR SESSION

7:00 TO 7:50 AM –

- I Wish I Had Your Bylaws

7:50 TO 8:30 AM –

- Credentialing and Privileging APPs and DPs

8:30 TO 9:15 AM –

- Dealing with Disruptive Behavior

9:15 TO 9:30 AM – BREAK

9:30 TO 10:15 AM –

- Practitioner Health

10:15 TO 10:45 AM –

- System Credentialing

10:45 TO 11:00 AM –

- Final Tips

11:00 AM – SEMINAR ADJOURNS

Please Note: *The attire for the seminar sessions is casual and comfortable.*

FACULTY BIOS

LAUREN M. MASSUCCI

LMASSUCCI@HORTYSPRINGER.COM

LAUREN M. MASSUCCI is a partner with the law firm of Horty, Springer & Mattern, P.C. in Pittsburgh, Pennsylvania. She works extensively with hospitals and their medical staffs in addressing a broad range of medical staff issues relating to practitioner credentialing, behavior, health and competence. She also assists them with peer review investigations, hearings, the development of medical staff governance documents and other related policies, and regulatory and compliance issues. In addition, she has assisted in litigation involving medical staff matters.

Ms. Massucci has served as an editor for the third, fourth and fifth editions of the American Health Law Association *Peer Review Guidebook* and the first edition of the American Health Law Association *The Complete Medical Staff, Peer Review, and Hearing Guidebook*. She is a member of the Allegheny County, Pennsylvania and American Bar Associations. Ms. Massucci has conducted several HorthySpringer audio conferences on various topics and is currently a faculty member of the HorthySpringer seminar *Credentialing for Excellence*.

HALA MOUZAFFAR

HMOUZAFFAR@HORTYSPRINGER.COM

HALA MOUZAFFAR is an associate attorney with the law firm of Horty, Springer & Mattern, P.C. in Pittsburgh, Pennsylvania. She handles projects from each of the firm's practice areas, assisting clients on a broad range of corporate, regulatory, and transactional matters.

Hala is an editor and assistant editor of the firm's *Health Law Express*, a weekly e newsletter on the latest health law developments. She also served as an editor for the first edition of the American Health Law Association *The Complete Medical Staff, Peer Review, and Hearing Guidebook*. Hala is also the cohost of *The Kickback Chronicles*, a segment on the firm's podcast, *Health Law Expressions*, that discusses fraud in the healthcare industry. She is also a current faculty member of the HorthySpringer national seminar *Credentialing for Excellence* and has previously served as a faculty member for the HorthySpringer seminar *Hospital-Physician Contracts and Compliance Clinic*.

Hala earned her J.D. from the University of Pittsburgh School of Law and obtained the school's Certificate of Advanced Study in Health Law. While there, she served as a member of the University of Pittsburgh Law Review and as the publication's first Executive Editor for the Online Edition. Prior to attending law school, Hala obtained her B.S. in Neuroscience with a Certificate in the Conceptual Foundations of Medicine from the University of Pittsburgh.

CONFLICT OF INTEREST DISCLOSURE

No planners, members of the planning committee, speakers, presenters, authors, content reviewers and/or anyone else in a position to control the content of this education activity have relevant financial relationships to disclose.

No relevant financial relationships with commercial entities were disclosed by:

Lauren Massucci, Partner
Horty, Springer & Mattern, P.C.

Hala Mouzaffar, Associate
Horty, Springer & Mattern, P.C.

DISCLAIMER STATEMENT

The information presented at this activity represents the views and opinions of the individual presenters, and does not constitute the opinion or endorsement of, or promotion by, the UPMC Center for Continuing Education in the Health Sciences, UPMC / University of Pittsburgh Medical Center or Affiliates and University of Pittsburgh School of Medicine. Reasonable efforts have been taken intending for educational subject matter to be presented in a balanced, unbiased fashion and in compliance with regulatory requirements. However, each program attendee must always use his/her own personal and professional judgment when considering further application of this information, particularly as it may relate to patient diagnostic or treatment decisions including, without limitation, FDA-approved uses and any off-label uses.

CME/ACCREDITATION

In support of improving patient care, this activity has been planned and implemented by the University of Pittsburgh and HartySpringer Seminars. The University of Pittsburgh is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

This activity is approved for the following credit: *AMA PRA Category 1 Credit™*. Other health care professionals will receive a certificate of attendance confirming the number of contact hours commensurate with the extent of participation in this activity.

The University of Pittsburgh designates this live activity for a maximum of 11.25 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

NAMSS Accreditation

This program has been approved by the National Association Medical Staff Services for up to 11.25 hours continuing education credit(s). Accreditation of this educational content in no way implies endorsement or sponsorship by NAMSS.

Target Audience

- Credentials Committee members
- Medical Staff Officers
- VPMAs, CMOs
- Department Chiefs
- Medical Staff Professionals
- Management involved in credentialing
- Board and Medical Staff members who serve on the Professional Affairs, Performance Improvement or Quality Committee

Educational Intent

This program is intended for individuals who are responsible for credentialing and recredentialing. Upon completion of this program, participants should be able to identify legal issues that affect credentialing and should be able to define the benefits of having policies and procedures to address problem practitioners. Participants should also gain insight into the process and procedure for the credentialing and recredentialing of physicians and allied health professionals.

Slide Text

Table of Contents

Las Vegas, NV 2024

	Page No.
Credentialing Jeopardy.....	1
Credentials Committee Meeting.....	1
Take Home Tips on Credentialing.....	14
Credentials Committee Meeting Day 2.....	38
Wheel of Misfortune.....	54
Clinical Privileges.....	55
Legal Protections.....	85
I Wish I Had Your Bylaws.....	94
Credentialing and Privileging APPs and DPs.....	107
Dealing with Unprofessional Behavior.....	122
Practitioner Health.....	142
System Credentialing.....	166
Final Tips.....	175

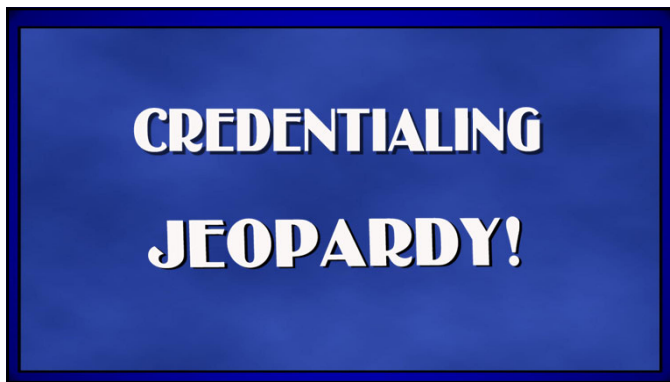
Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



1



2

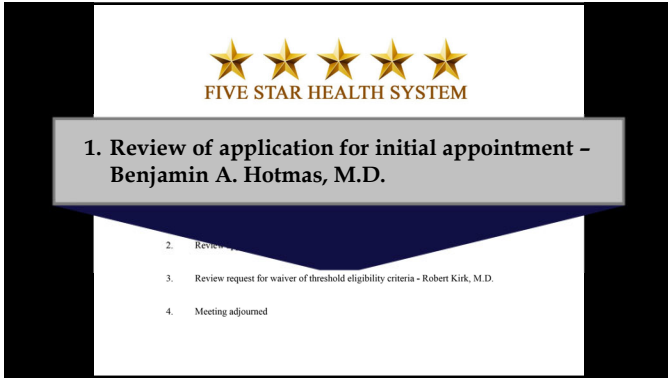


3

Credentialing for Excellence

Las Vegas, NV

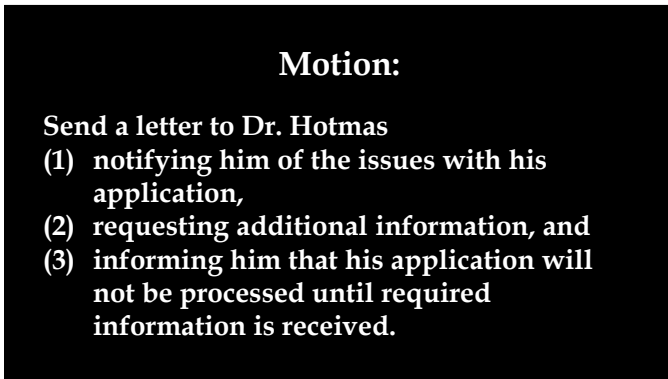
November 14-16, 2024



4



5



6

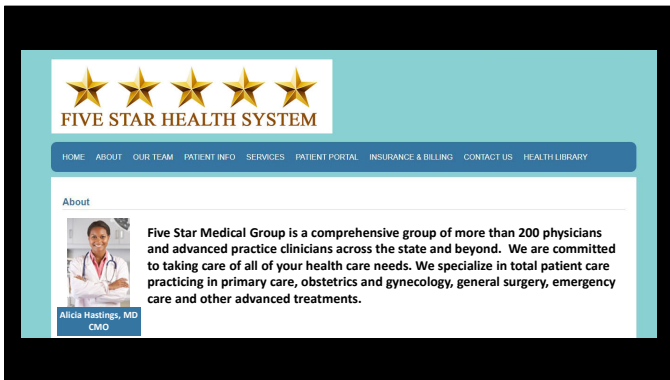
Credentialing for Excellence

Las Vegas, NV

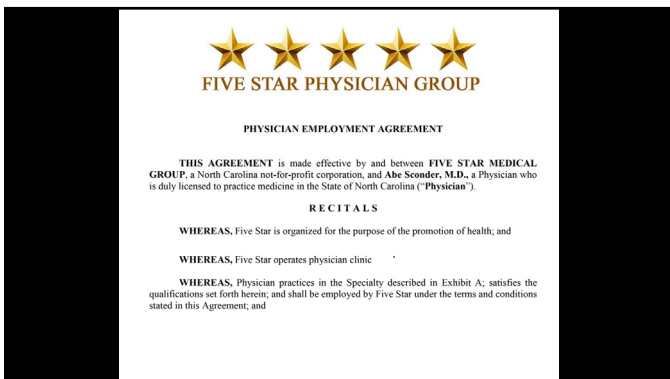
November 14-16, 2024



7



8

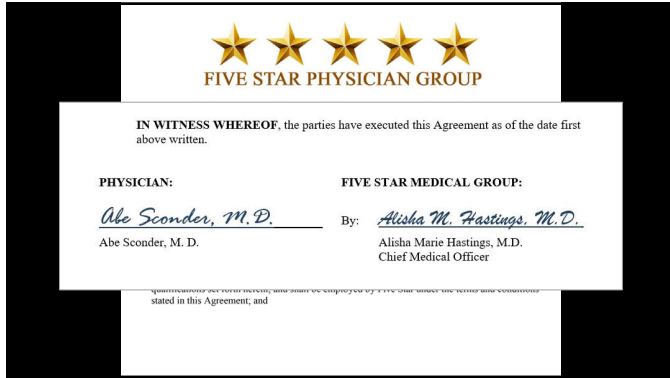


9

Credentialing for Excellence

Las Vegas, NV

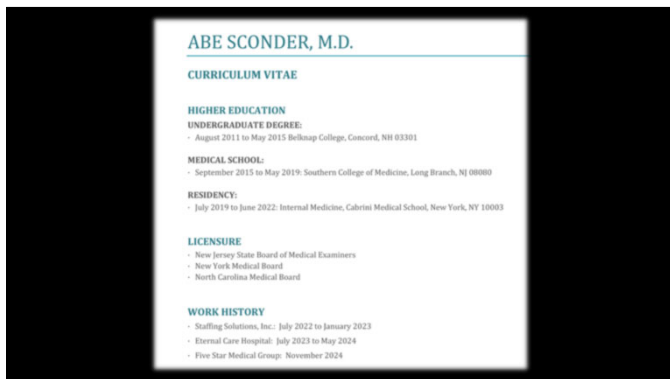
November 14-16, 2024



10



11

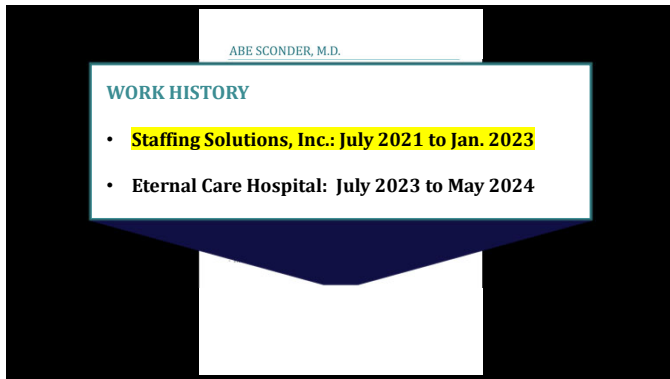


12

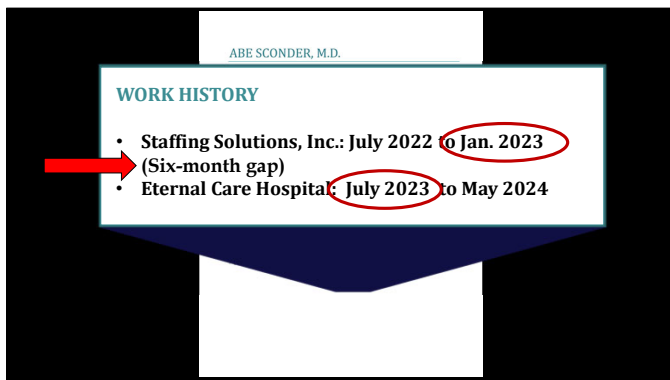
Credentialing for Excellence

Las Vegas, NV

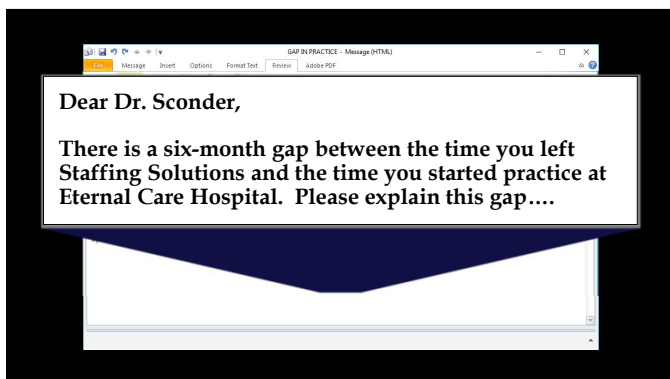
November 14-16, 2024



13



14

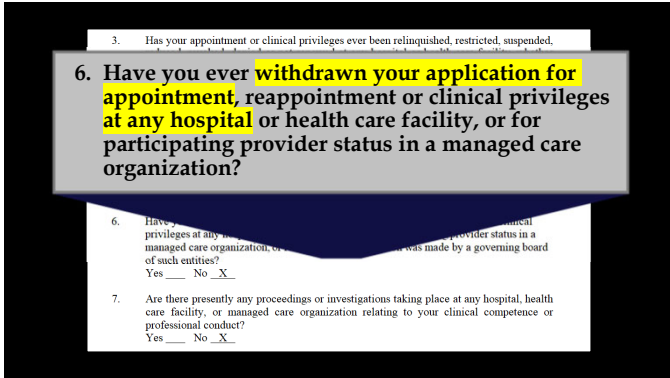


15

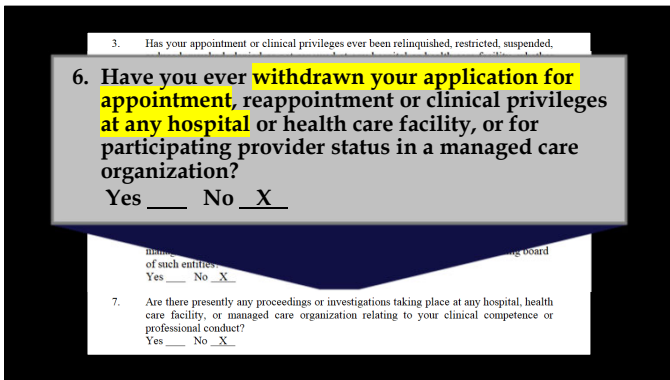
Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



16



17

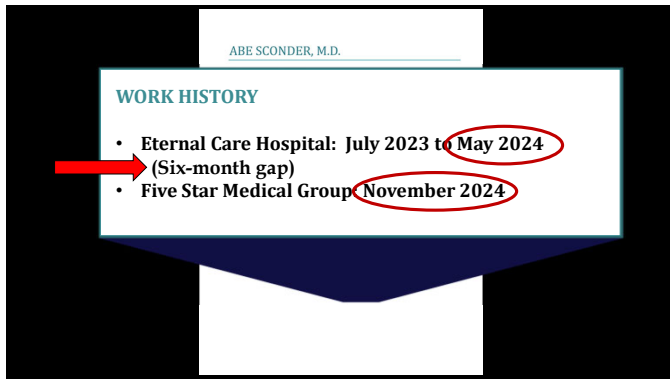


18

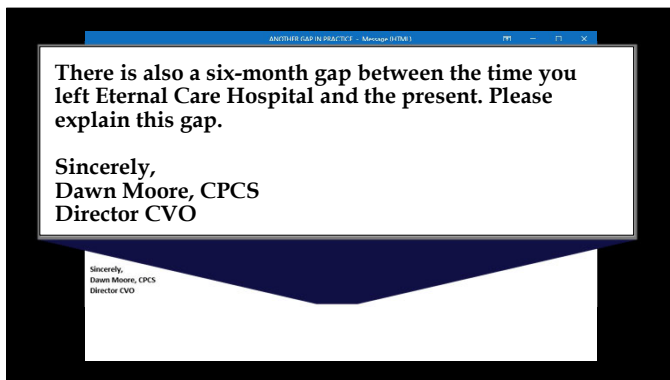
Credentialing for Excellence

Las Vegas, NV

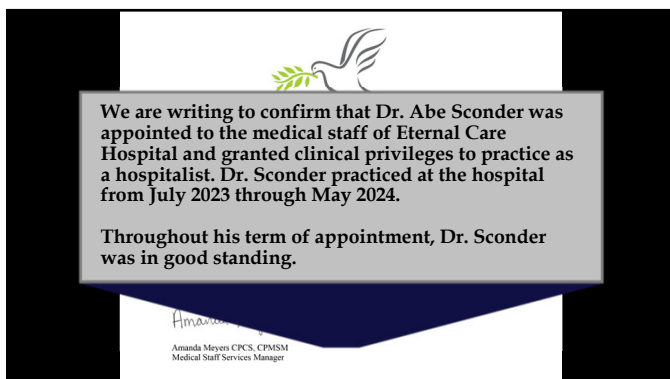
November 14-16, 2024



19



20

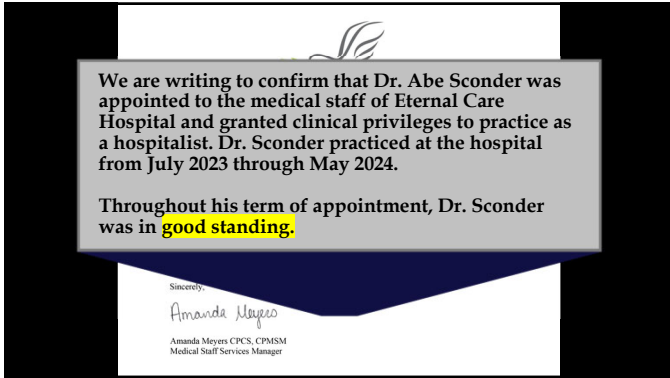


21

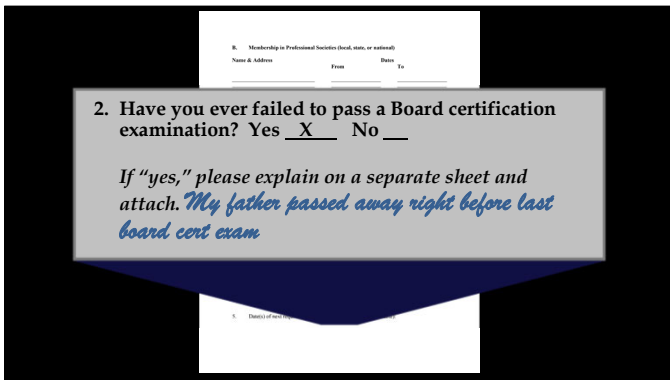
Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



22



23



24

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Issues:

- Hospitals worked as locum tenens
- 6-month gap after locum tenens
- Three Midnight Medical Center
- Need more information from Eternal Care Hospital
- Less than two years at Eternal Care Hospital
- 6-month gap after Eternal Care Hospital
- Not board certified

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

25

FIVE STAR HEALTH SYSTEM



Dear Dr. Sconder:

A number of issues have been identified by a preliminary review of your application for medical staff appointment and clinical privileges to practice at Five Star Health System.

Further information is required to complete your application. Please provide the following information that is needed before your application can be reviewed. Please include the number and name of each location you are requesting.

I. Locum Tenens

According to your application, you worked with Staffing Solutions for a year after completing your residency training. It is our practice to confirm through primary sources all practice locations. Therefore, it will be necessary for you to complete Section V of the application with respect to each hospital where you practiced as a locum tenens for Staffing Solutions. A clear copy of Section V is enclosed. If you need more space, please attach an additional sheet.

26

FIVE STAR HEALTH SYSTEM

CREDENTIALING

The Credentials Policy clearly places the burden of furnishing information on the applicant. The Credentials Policy also states that an applicant has "the burden of producing information deemed adequate by the hospital for a proper evaluation of current competence, character, ethics, and other qualifications, and resolving any doubts."

Further information is required to complete your application. Please provide the following information that is needed before your application can be reviewed. Please include the number and name of each location you are requesting.

I. Locum Tenens

According to your application, you worked with Staffing Solutions for a year after completing your residency training. It is our practice to confirm through primary sources all practice locations. Therefore, it will be necessary for you to complete Section V of the application with respect to each hospital where you practiced as a locum tenens for Staffing Solutions. A clear copy of Section V is enclosed. If you need more space, please attach an additional sheet.

27

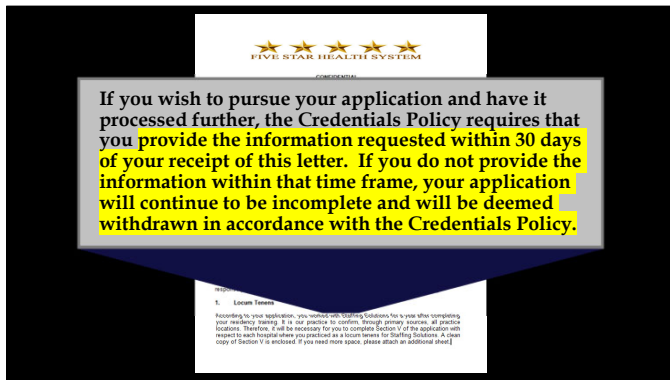
Credentialing for Excellence

Las Vegas, NV

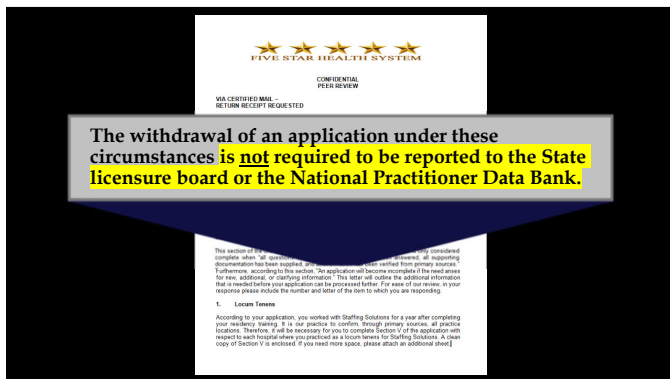
November 14-16, 2024



28



29



30

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Getting more out of references:

- Remind them of credentialing goals
- Remind them of protections
- Plan ahead – ask detailed questions
- Ask about documents
- Ask who else might have information
- Ask about litigation/settlement

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

31

What did we learn from Dr. Caan?

- Dr. Sconder drove a hard bargain with employer
- Nice enough guy
- Things didn't work out, never practiced there
- Made unreasonable demands
- Hospital rethought whether he was right for job
- Submitted application
- MSO had questions, he was slow to respond
- Missed start date, contract pulled
- Didn't repay signing bonus
- Litigation over bonus

33

Issues with sharing information:

- Waiver of peer review privilege
- Claim for breach of confidentiality
- Claim for tortious interference

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

34

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Sharing Non-Privileged Information Among Affiliated Entities

Best Practice:

- Authorization to share information among affiliated entities

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

35

Authorization to Share Information Among Affiliated Entities

Include on :

- Application form
- Bylaws/Credentials Policy

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

36

Sharing Peer Review Information Among Affiliated Entities

- Authorization to share information
- Information sharing policy

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

37

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



38



39



40

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

FIVE STAR HEALTH SYSTEM

Credentialing Committee
Five Star Health System
25 Fall Marsh Way
Wrightsville, North Carolina 27098
Dear Credentialing Committee:

I assure you I did not intentionally misrepresent anything on the application....

I brought a lawsuit against Three Midnight for fraudulently inducing me to accept their employment contract. I incurred expenses in moving and their disaster upended my career. I am confident I will prevail in my suit against them.

response please include the number and letter of the item to which you are responding

1. **Locum Tenens**

According to your application, you worked with Staffing Solutions for a year after completing your residency training. It is our practice to confirm, through primary sources, all practice locations. Therefore, it will be necessary for you to complete Section V of this application with respect to each hospital where you practiced as a locum tenens for Staffing Solutions. A clear copy of Section V is enclosed. If you need more space, please attach an additional sheet.

60. They never had any questions about me but I had plenty of questions about their quality and their ethics.

I've worked twice since my experience at Three Midnight. I don't have any correspondence from them.

I assure you I did not intentionally misrepresent anything on the application. The content fell through first and after that there really was no application to pursue.

41

Credentialing

TIPS

CREDENTIALING OF EXCELLENCE

HORTY SPRINGER

42

DEVELOP GOOD POLICIES & PROCEDURES AND FOLLOW THEM!

43

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

“Good” policies?

- Fair
- Thorough
- Legally compliant
- Easy to use...

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

44

...AND follow them!

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

45

Sadler v. Dimensions Healthcare Corp.

“Where a hospital decision is made in conformity with its bylaws...the action of the hospital is entitled to deference.”

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

46

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

In Re Peer Review Action

"Significant" and "repeated" disregard of Bylaws can result in finding that hospital acted with "malice," resulting in loss of immunity.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

47



48

Sing from the same song sheet:

- Know your counterparts
- Share timelines and checklists
- Share information when possible
- Align incentives

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

49

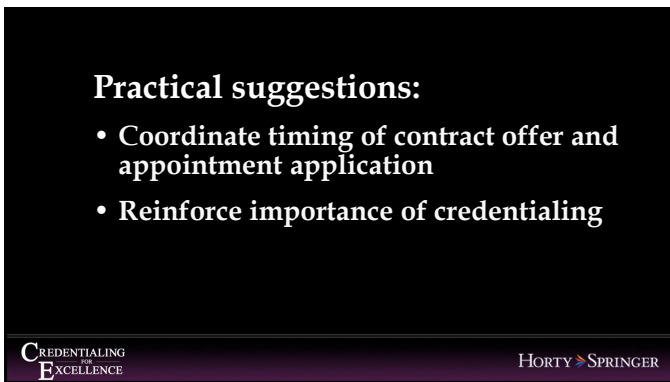
Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



50



51



52

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Objective, threshold eligibility criteria:

- Screen out individuals with a checkered past
- Reduce the risk of discrimination claims
- Help manage NPDB reporting obligations
- Required for all practitioners (as applicable)

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

53

Set the bar high



54

Threshold Criteria

unrestricted
An [^]license to practice medicine
in this state

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

55

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Threshold Criteria

unrestricted
An [^]license to practice medicine
in this state [^] *that has never
been restricted*

CREDENTIALING
FOR
EXCELLENCE HORTY > SPRINGER

56

Threshold Criteria


Have a current, unrestricted license to practice in this state that is not subject to any restrictions, probationary terms, or conditions not generally applicable to all licensees, and have not had a license to practice in any jurisdiction revoked, restricted or suspended by any state licensing agency.

CREDENTIALING
FOR
EXCELLENCE HORTY > SPRINGER

57

Other objective, threshold eligibility criteria:

- Board certification/APP certification
- Not terminated from another staff
- No felony convictions
- Not excluded from Medicare



CREDENTIALING
FOR
EXCELLENCE HORTY > SPRINGER

58

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Threshold Criteria - Vaccine Requirements

To be eligible, an individual must:

"document compliance with immunization and health screening requirements (e.g., TB testing, mandatory vaccines, and infectious agent exposures)."

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

59



60

Pros

- May provide a "second chance" opportunity for a physician
- Ensures hospital, medical staff, and patients do not miss out on talent unnecessarily

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

61

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Cons

- Introduces subjectivity into otherwise objective process
- If implemented inconsistently, risk of challenge

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

62

Best Practices

- Have a defined process
- Place the burden on individual requesting waiver
- Call out in your policy that a refusal to grant a waiver is not a “denial”

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

63

Waiver of Threshold Eligibility Criteria

(a) Any applicant who does not satisfy one or more of the threshold eligibility criteria may request that it be waived. Waivers of threshold eligibility criteria will not be granted routinely. The applicant requesting the waiver bears the burden of demonstrating that they are otherwise qualified and that exceptional circumstances exist. Waivers of threshold eligibility criteria will not be granted routinely.

64

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Waiver of Threshold Eligibility Criteria

(d) Any applicant who does not satisfy one or more of the threshold eligibility criteria may request that it be waived. Waivers of threshold eligibility criteria will not be granted routinely. The applicant requesting the waiver bears the burden of...

(e) The Board's determination regarding whether to grant a waiver is final. A determination not to grant a waiver is not a "denial" of appointment or clinical privileges and the individual who requested the waiver is not entitled to a hearing...

(e) The Board's determination regarding whether to grant a waiver is final. A determination not to grant a waiver is not a "denial" of appointment or clinical privileges and the individual who requested the waiver is not entitled to a hearing. A determination to grant a waiver in a particular case is not intended to set a precedent. A determination to grant a waiver does not mean that appointment will be granted, only that processing of the application can begin.

65

Factors to Consider

- What is the nature of the disqualifying factor?
- Is there more than one disqualifying factor?
- Was the disqualifying factor completely resolved?
- Was the disqualifying factor recent?

CREDENTIALING FOR EXCELLENCE | HORTY > SPRINGER

66

Factors to Consider

- Does the applicant have other exceptional qualifications?
- Is the hospital having a lapse in coverage?
- Is there a need in the community for the services of the applicant?

CREDENTIALING FOR EXCELLENCE | HORTY > SPRINGER

67

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Use Waivers Sparingly

- When *exceptional* circumstances exist
- **NOT** because the threshold criteria are more stringent than you feel comfortable with
- **NOT** because the practitioner has been recruited and/or already moved to town

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

68

Document

- Meeting minutes should reflect the reasons for granting or denying a waiver
- Use objective terms

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

69



70

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Automatic Relinquishment

- External events
- Action or inaction by practitioner related to an objective qualification or condition of appointment and privileges

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

71

Automatic Relinquishment

- Administrative in nature
- No right to hearing and appeal process*
- Not reportable

*Confirm with state law

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

72



Automatic Suspension

73

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Automatic Relinquishment for:

- Failure to complete medical records
- Failure to satisfy threshold eligibility criteria
- Criminal activity
- Failure to attend a mandatory meeting

CREDENTIALING
for
EXCELLENCE

HORTY > SPRINGER

74

Automatic Relinquishment for:

- Failure to comply with request for fitness for practice evaluation or competency assessment
- Failure to provide requested information
- Failure to maintain access to EMR

CREDENTIALING
for
EXCELLENCE

HORTY > SPRINGER

75

Have a Process for Reinstatement

CREDENTIALING
for
EXCELLENCE

HORTY > SPRINGER

76

Credentialing for Excellence

Las Vegas, NV

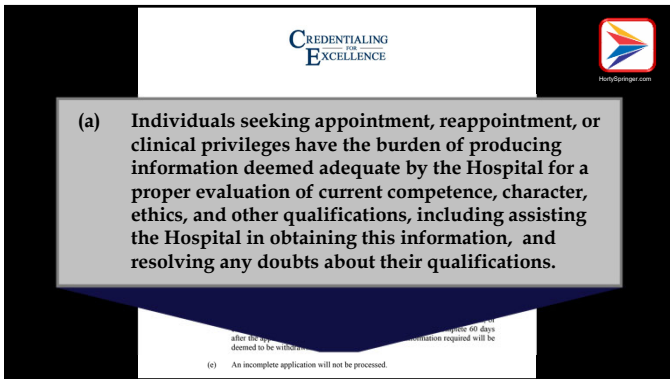
November 14-16, 2024



77



78



79

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

(c) Applicants are responsible for providing a complete application. An application will be complete when all questions on the application form have been answered, all supporting documentation has been supplied (including adequate responses from references and all information requested from third parties for a proper evaluation), and all information has been verified from primary sources.

(e) An incomplete application will not be processed.

80

(d) An application will become incomplete if the need arises for new, additional, or clarifying information. Any application that continues to be incomplete 60 days after the applicant has been notified of the additional information required will be deemed to be withdrawn.

(e) An incomplete application will not be processed.

81

(e) An incomplete application will not be processed.

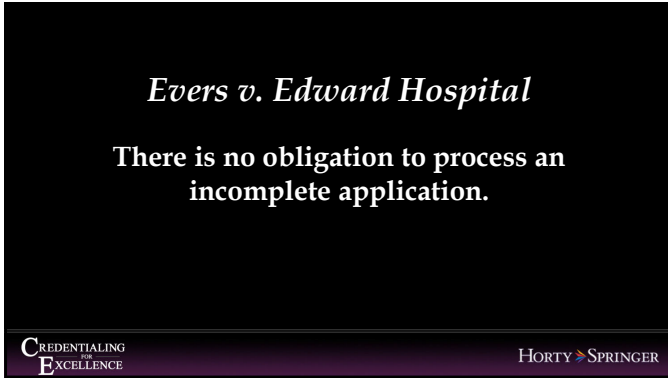
(a) Individuals seeking appointment, reappointment, or clinical privileges have the burden of providing information deemed adequate by the Hospital for a review.

82

Credentialing for Excellence

Las Vegas, NV

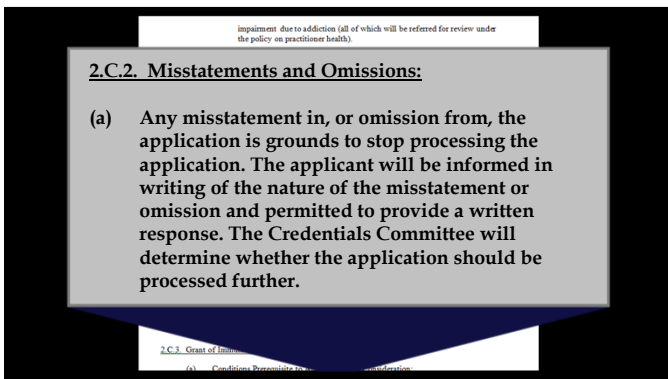
November 14-16, 2024



83



84



85

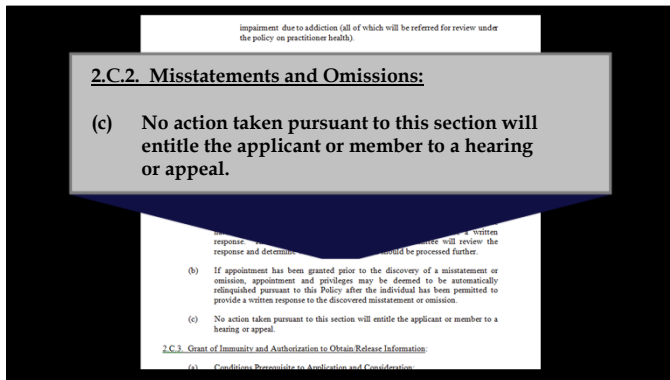
Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



86



87



88

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



89

1. The applicant has completed a(n) General & Vascular Surgery Internship & Residency from 7/1/2006 to 6/1/2011.
 Yes No *If no, please explain: GENERAL SURGERY RESIDENCY*

2. Have you ever been informed of any physical/mental health, drug/alcohol dependencies or other problems of the applicant that have or could potentially impair ability to exercise all or any of the privileges requested? (attached)
 No Yes *If yes, please explain on a separate sheet and attach*

3. Do you have any reservations, concerns or recommendations concerning specific privileges requested by the applicant?
 No Yes *If yes, please explain on a separate sheet and attach*

Please rate the practitioner in the following areas: (Please provide written explanation of any "Fair" or "Poor" ratings)	Excellent	Good	Fair	Poor	Unable to Evaluate
Patient Care is compassionate, appropriate & effective for the treatment of health problems & promotion of health.		✓			
Medical knowledge about established & evolving biomedical, clinical, and social sciences & the application of this knowledge to patient care.		✓			
Evidence-based learning & communication skills that involves investigation & evaluation of their own patient care, appraisal & assimilation of scientific evidence, and improvements in patient care.		✓			
Interpersonal & communication skills that result in effective information exchange & teamwork with patients, their families, and other health care professionals.		✓			
Professionalism, demonstrated through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.		✓			
Systems-based practice, demonstrated by actions that show an awareness of and responsiveness to the larger context & system of healthcare & the ability to effectively call on system resources to provide care that is of optimal value.		✓			

90

**CONFIDENTIAL
PEER REVIEW**

Conversation with most recent Department Chair

"Ridiculous work ethic, I don't know how the guy works so hard. The guy loves what he does and he is good at it.

No interpersonal issues. Never was the subject of any peer review process. You are going to be very happy with him."

Conversation with Fellowing

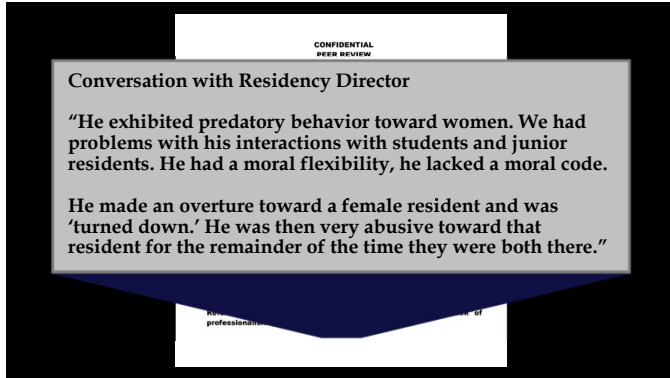
Reference to "multiple issues with personality conflict," "lack of professionalism" and "direct aggression to women."

91

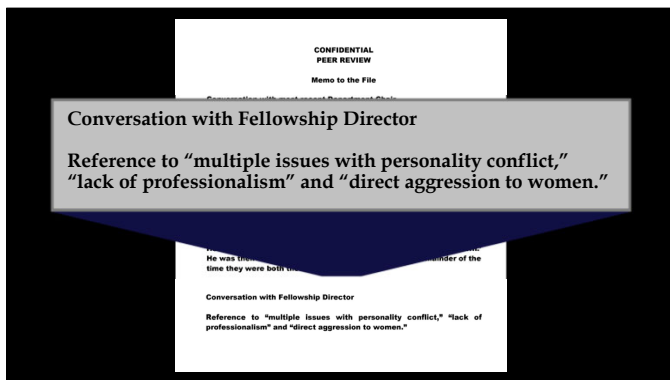
Credentialing for Excellence

Las Vegas, NV

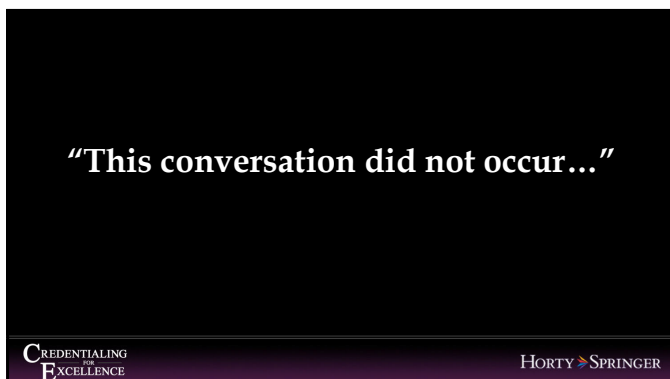
November 14-16, 2024



92



93

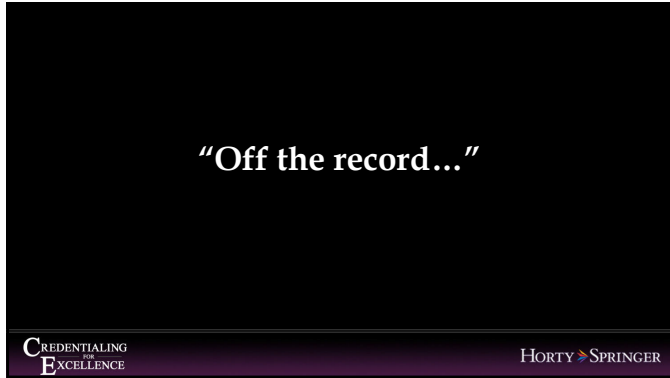


94

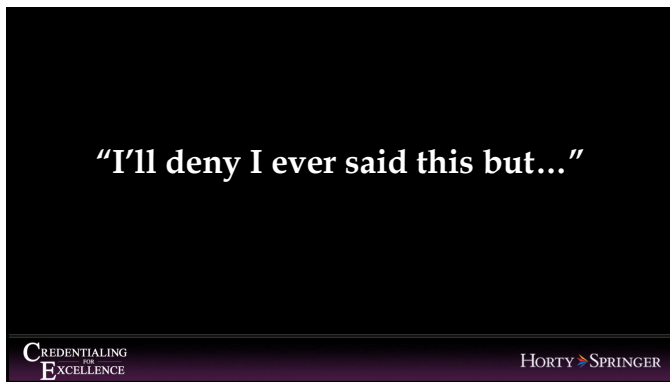
Credentialing for Excellence

Las Vegas, NV

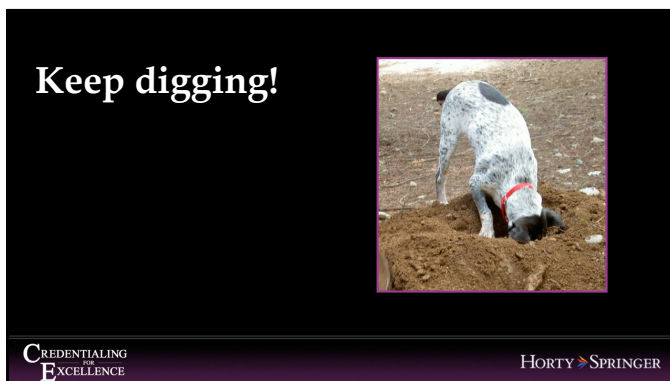
November 14-16, 2024



95



96



97

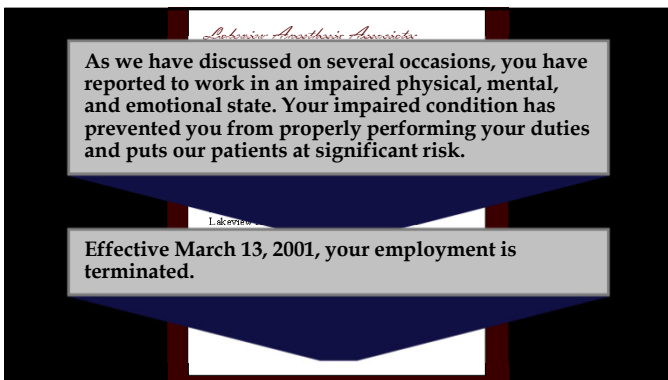
Credentialing for Excellence

Las Vegas, NV

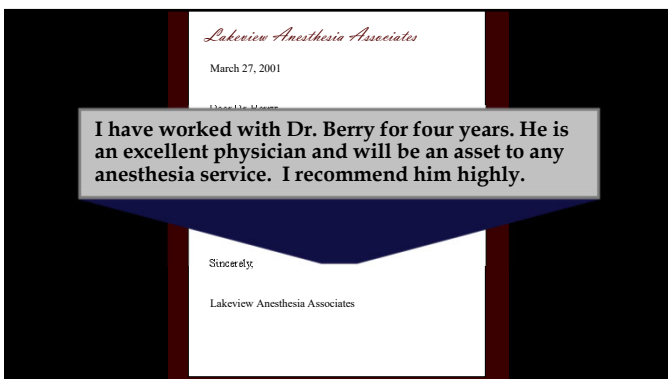
November 14-16, 2024



98



99

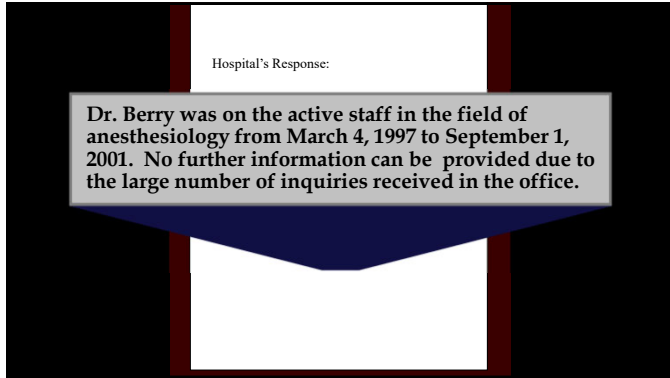


100

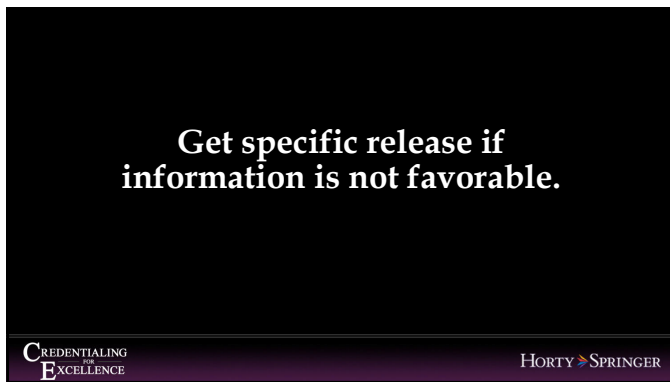
Credentialing for Excellence

Las Vegas, NV

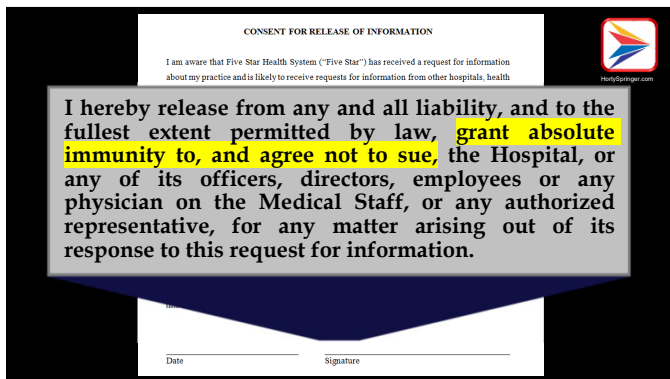
November 14-16, 2024



101



102

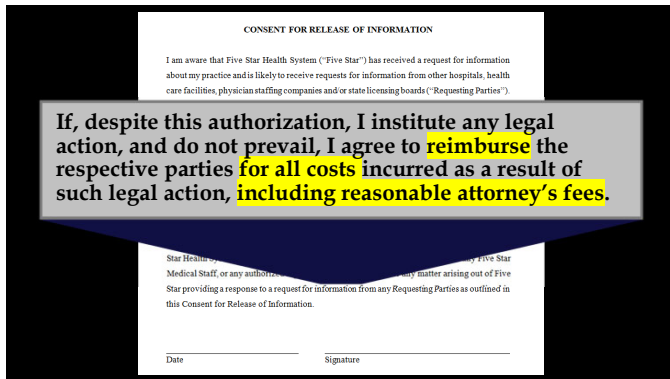


103

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



104



105



106

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Review information generated from peer review, professionalism and health processes



107

OPPE REPORTS

1. Activity during OPPE period
(Reports run at least every 12 months)
2. Performance as measured by Department and Medical Staff data elements *(and thresholds, where possible)*
3. Number of cases reviewed through PPE process and their dispositions
4. Number of concerns addressed pursuant to the Medical Staff Professionalism Policy and the disposition of those matters

108

CONFIDENTIAL PEER REVIEW DOCUMENT
Sample Practitioner History Report
Physician No. XXX

Medical Record #	Occurrence Date	Reason for Referral	Case Description	Disposition	Disposition By
239976	11/17/2019	Specialty Specific Balance	Performance during hysteroscopic procedure	Educational letter regarding patient selection documentation	CSBC
236629	1/14/2020	Specialty Specific Balance	Small bowel perforation during hysteroscopic hysteroscopy	College of consulting regarding patient selection for hysteroscopic procedures	CSBC
237548	1/30/2020	Reported Concern	Complications during hysteroscopic report of post-endometrial biopsy	Referred to CPE	CSBC

109

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Summary Health Report

- Generated if health issue currently being monitored or was addressed during past appointment cycle
- Addresses practitioner's ability to perform Medial Staff duties and safely exercise clinical privileges

CREDENTIALING
for
EXCELLENCE

HORTY > SPRINGER

110

But what about...



111

5.B. REAPPOINTMENT CRITERIA
5.B.1. Eligibility for Reappointment:

Any member seeking reappointment who has minimal activity at Five Star Health Hospitals must submit such information as may be requested (such as a copy of his or her confidential quality profile from his or her primary hospital, clinical information from his or her private office practice, or a quality profile from a managed care organization or insurer), before the application will be considered complete and processed.

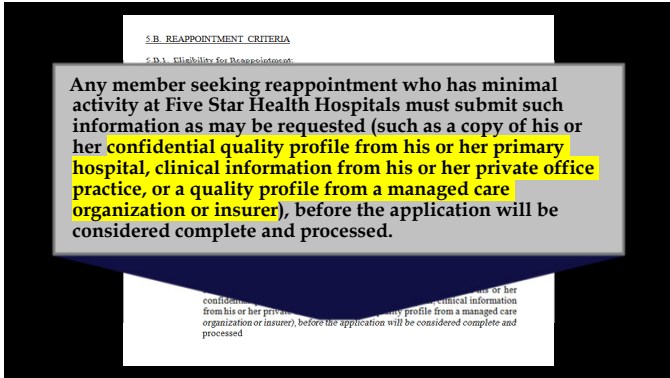
...her
...information
...profile from a managed care
...organization or insurer), before the application will be considered complete and
...processed

112

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



113



114

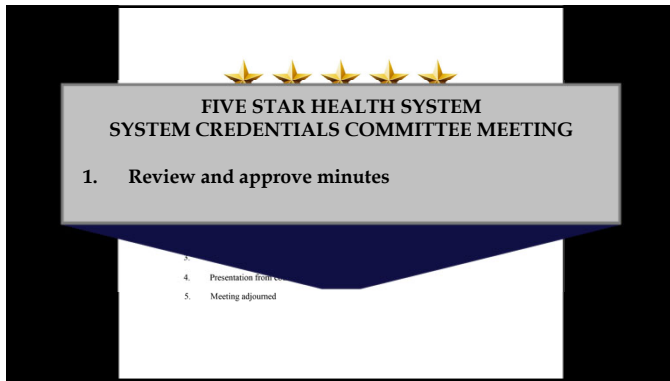


115

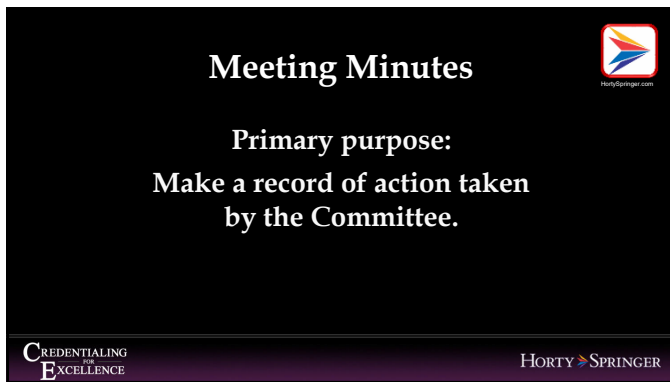
Credentialing for Excellence

Las Vegas, NV

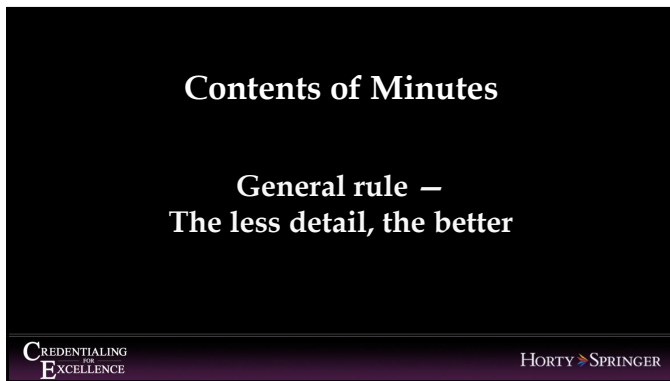
November 14-16, 2024



116



117

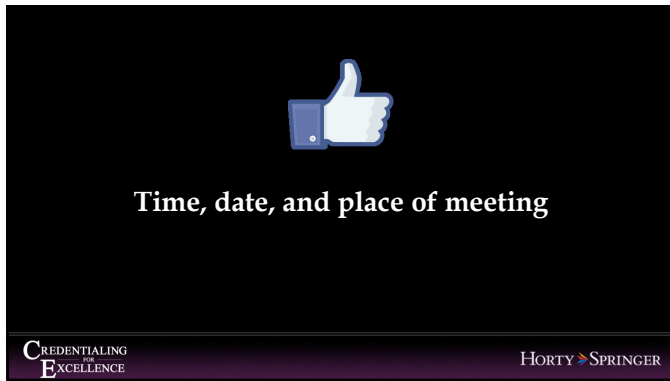


118

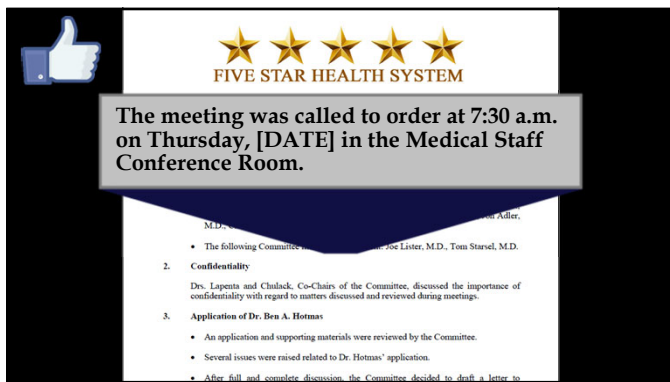
Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



119



120



121

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



- Time, date, and place of meeting
- Confidentiality statement
- Who was in attendance?
- Quorum present
- "After full discussion, [action taken]"

122

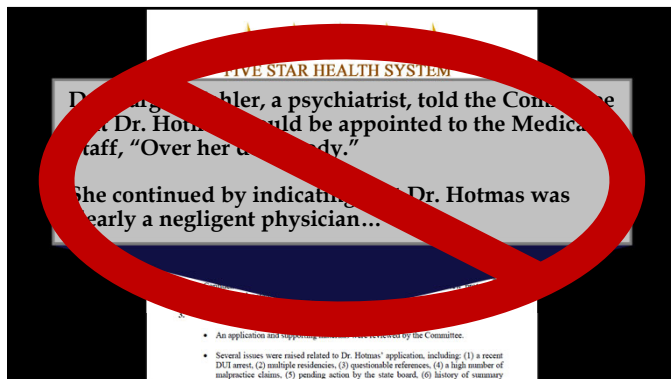


Details of discussion*

CREDENTIALING
OR
EXCELLENCE

HORTY > SPRINGER

123



124

Credentialing for Excellence

Las Vegas, NV


November 14-16, 2024

***EXCEPTIONS**
(situations in which objective details are helpful)

1. Adverse actions
2. Waivers
3. Conflicts of interest

CREDENTIALING FOR EXCELLENCE HORTY & SPRINGER

125



FIVE STAR HEALTH SYSTEM

After full and complete discussion, the Committee decided to grant Dr. Kirk's request for a waiver.... Dr. Kirk is otherwise exceptionally qualified as evidenced by his credentials....

2. Confidentiality
Dr. Lapenta and Chilcick, Co-Chairs of the Committee, discussed the importance of confidentiality with regard to matters discussed and reviewed during meetings. Confidentiality preserves the integrity of the process and any peer review protections available under state and federal law and regulations.

3. Application of Ben A. Hotman, M.D.
• An application and supporting materials were reviewed by the Committee.
• Several issues were raised related to Dr. Hotman's application, including: (1) a recent DUI arrest, (2) multiple residences, (3) questionable references, (4) a high number of

126



- Details of discussion*
- Who said what to whom

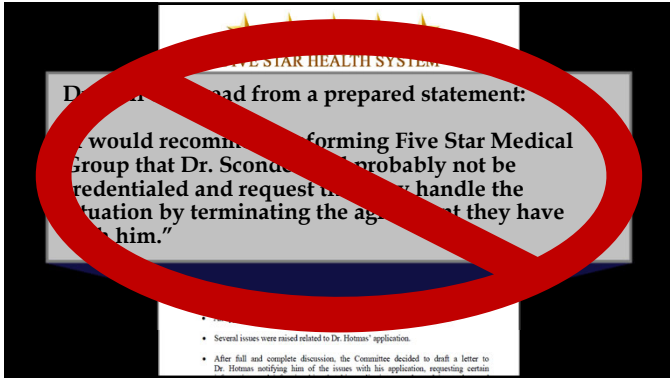
CREDENTIALING FOR EXCELLENCE HORTY & SPRINGER

127

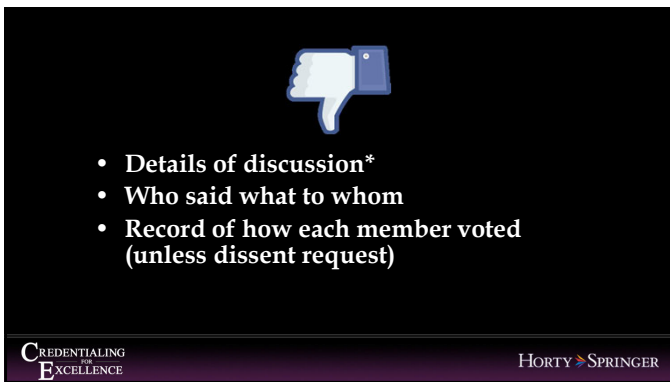
Credentialing for Excellence

Las Vegas, NV

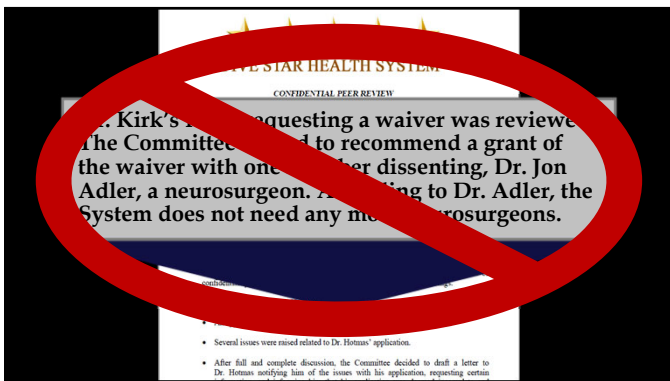
November 14-16, 2024



128



129



130

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Take special care:

- Discussions with attorneys
- Protected health information (HIPAA)

CREDENTIALING
for
EXCELLENCE

HORTY > SPRINGER

131



132

Spotting (and *Managing*) Conflicts of Interest

CREDENTIALING
for
EXCELLENCE

HORTY > SPRINGER

133

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Potential conflicts of interest:

- Family relationship
- Financial relationship
- History of acrimony
- Close friends
- Direct competitor

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

134

Potential conflicts of interest:

- Personally involved in the care of patient
- Reviewed case at prior level
- Raised the concern
- Subject of the review

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

135

General principles:

- No right to compel disqualification
- Identification process (e.g., self disclosure mandatory)
- Should be fair to the physician, and protect the conflicted individual and the integrity of process

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

136

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Guidelines:

- Define potential conflicts
- Define levels of participation
- Define rules

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

137

HORTY > SPRINGER
20 STANWIX STREET, SUITE 405 • PITTSBURGH, PA 15222 • 412.687.7677 • 412.687.7692 (FAX) WWW.HORTYSPRINGER.COM

HORTY, SPENNER & MATTERS, P.C.

CONFLICT OF INTEREST GUIDELINES

Potential	Clinical Specialty	Levels of Participation		Reviewer	Member
		Committee	Member		
Provided care in a role under review (that not subject of review)	Y	Y	Y	N	R
Involvement in prior VIP or disciplinary action	Y	Y	Y	R	N

Y – means the individual may serve in the indicated role, no extra precautions are necessary.

Y – means the individual may generally serve in the indicated role because of checks and balances of multiple levels of review but Chair has power to recuse.

N – means the individual should not serve in the indicated role.

R – means the individual should be recused.

138

Rdzanek v. Hosp. Svc. Dist. No. 3

“...the multiple layers of review of the cases involved...ensured the fairness of the process.”

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

139

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

But keep in mind how the process (e.g., credentialing) works at your Hospital.

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

140

Rules for Recusal

Step 1: Confirm the conflict

Step 2: Participation for unrelated issues and may provide information

Step 3: Excused from meeting

Step 4: Recusal documented in minutes

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

141

Adeduntan v. Hosp. Auth. Clarke County

- Dr. Adeduntan, a vascular surgeon, was required to complete continuing education or arrange for a proctor by Surgical Case Review Committee ("SCRC")
- Competing vascular surgeon was on SCRC

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

142

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Adeduntan v. Hosp. Auth. Clarke County

- However, competing vascular surgeon, even though he provided information to the SCRC, recused himself before recommendation was made
- Charges against competing vascular surgeon dismissed

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

143

Selection of Hearing Panels – Tread Cautiously!

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

144

HCQIA Immunity

No member of the hearing panel (and/or the hearing officer) can be “in direct competition with the physician involved.”

CREDENTIALING
FOR
EXCELLENCE

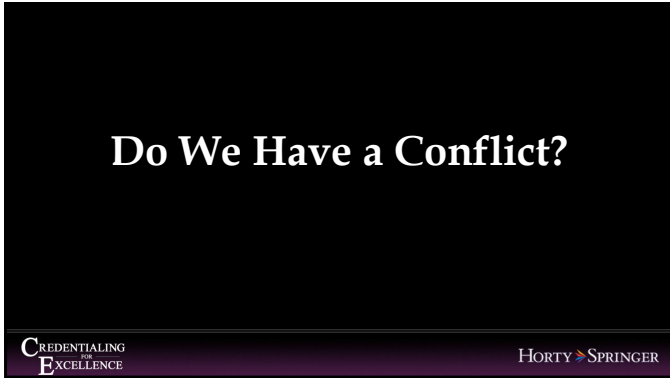
HORTY > SPRINGER

145

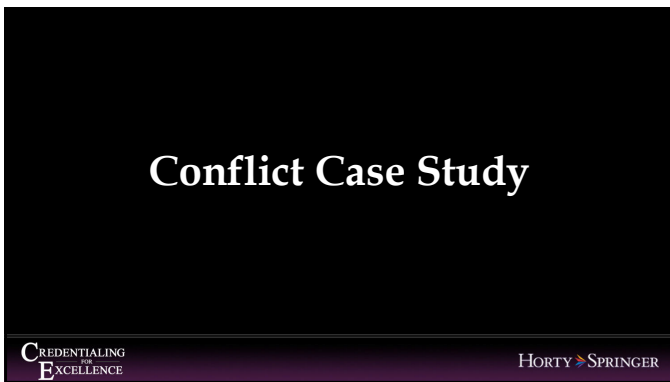
Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



146



147

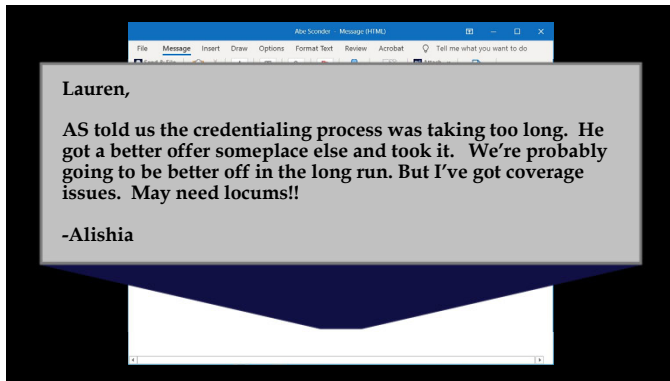


148

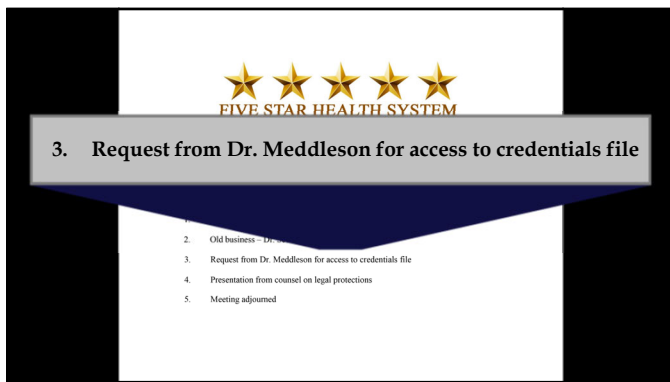
Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



149



150

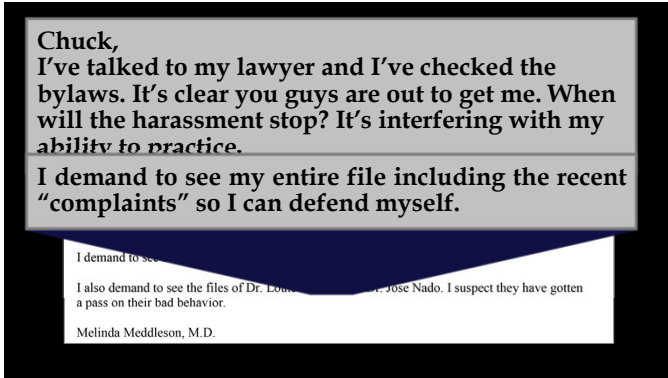


151

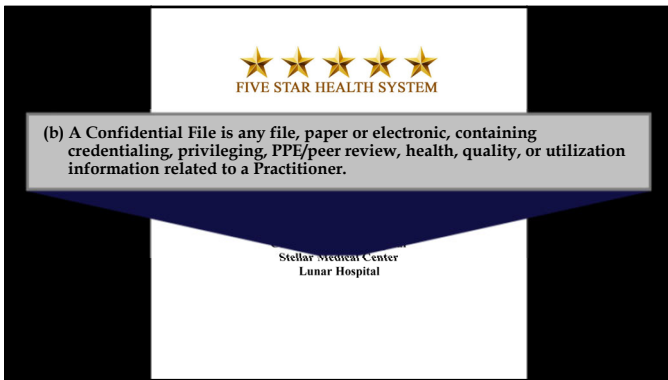
Credentialing for Excellence

Las Vegas, NV

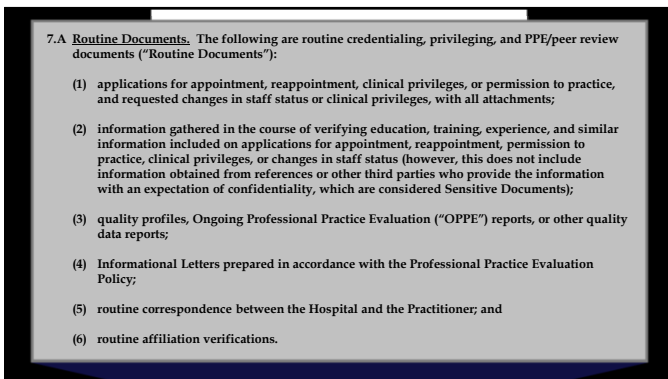
November 14-16, 2024



152



153



154

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

7.B Sensitive Documents. Any document that is not a Routine Document as defined above is a sensitive credentialing, privileging, and PPE/peer review document ("Sensitive Document"). Sensitive Documents include, but are not limited to, the following:

- (1) reported concerns or incident reports concerning the Practitioner submitted by Hospital employees or other Practitioners;
- (2) evaluations or reports completed as part of the credentialing and privileging processes by Department Chairs and other internal reviewers;
- (3) documentation created pursuant to the FPPE Policy to Confirm Practitioner Competence and Professionalism;
- (4) evaluations or reports completed as part of the PPE/peer review process by internal reviewers, proctors, monitors, or external reviewers;
- (5) non-routine affiliation verifications, and all peer references prepared by the Hospital;

155

7.B Sensitive Documents.

- (6) e-mails and other electronic communication, memos to file, correspondence, notes and other documents that reflect the deliberative process of Medical Staff Leaders and Hospital personnel related to credentialing, privileging, or PPE/peer review. Such documents are sensitive because Medical Staff Leaders and Hospital personnel must be willing to engage in open, candid discussions about sensitive issues and explore all available options to effectively and constructively resolve concerns;
- (7) correspondence between the Practitioner and the Hospital related to the PPE/peer review process;
- (8) reports and portions of minutes of peer review committees pertaining to the Practitioner;
- (9) correspondence from references and other third parties, including, but not limited to, letters of reference, confidential evaluation forms, and other documents prepared by external sources concerning the Practitioner's training, clinical practice, professional competence, conduct, or health;
- (10) notations of telephone conversations concerning the Practitioner's qualifications with references and other third parties, including date of conversation, identification of parties to the conversation, and information received and/or discussed;

156

7.B Sensitive Documents.

- (11) correspondence setting forth formal action by the Credentials Committee, Leadership Council, Committee for Professional Enhancement ("CPE"), Medical Executive Committee, or any other committee performing PPE/peer review, including, but not limited to, letters of guidance or education, follow-up letters to collegial counseling discussions, letters of warning, or reprimand, consultation requirements, Voluntary Enhancement Plans, or final adverse actions following completion or waiver of a hearing and appeal;
- (12) all documentation in the Practitioner's confidential health file, including reported concerns related to health, Health Status Assessment Forms and related evaluations of a Practitioner's health; and
- (13) results of queries to the National Practitioner Data Bank.

If there is any doubt about whether a document is a Routine Document or a Sensitive Document, it shall be treated as a Sensitive Document.

157

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

2.C **Scheduling Review.** Practitioners must:

- (1) schedule a specific time to review their Confidential File when either Support Staff or the CMO is available to be present during the review; and
- (2) provide at least ten (10) business days' advance notice so the Support Staff or the CMO can properly prepare the documents.

158

2.D **Access to Sensitive Documents.**

- (2) Redaction and Summary of Sensitive Documents Prior to Review.
 - (a) Sensitive Documents will be redacted or summarized by the CMO or Support Staff so that the identity of any individual who prepared or submitted the document, or who provided information relevant to the matter, can no longer be ascertained.

159

2.D **Access to Sensitive Documents.**

- (1) Signed Form. If any of the documents the Practitioner wishes to review are Sensitive Documents (as defined in Section 7), the Practitioner must sign the Request to Access Confidential File form set forth as Appendix A to this Policy prior to accessing the documents.

160

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

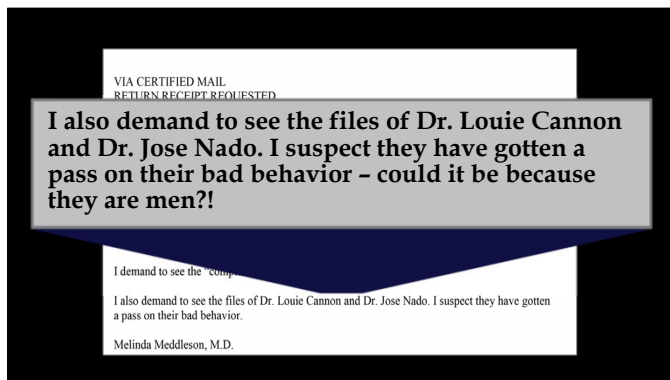
Request to access confidential file form:

- No smart phones/images of documents
- No altering documents but may provide written response or request information be corrected
- Agree to maintain confidentiality
- Agree not to retaliate

CREDENTIALING
for
EXCELLENCE

HORTY > SPRINGER

161



162



163

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



164



165



166

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

**Clinical Privileges = Breadth, scope
and nature of practice**

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

167

Privileging Principle #1
**Confirm competence through
focused professional practice
evaluation process when clinical
privileges initially granted.**

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

168

Privileging Principle #2
Develop the policy first!

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

169

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Privileging Principle #3

There is no single "right" answer to any of your privileging questions.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

170

Clinical Privileges

- Temporary Privileges
- Criteria for Clinical Privileges
- New Procedures
- Advanced Practice Clinicians
- Privileges that Cross Specialty Lines
- Telemedicine Privileges

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

171

TEMPORARY CLINICAL PRIVILEGES

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

172

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Temporary Privileges
New Applicants

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

173

Temporary Privileges
New Applicants:
Application must be both complete and clean.

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

174

Complete Application Means:

- All information received
- All information verified
- Review complete except MEC and Board

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

175

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Clean Application Means:

- No current or previously successful challenges to licensure or registration

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

176

Clean Application Means:

- No involuntary termination of appointment or involuntary limitation, reduction, denial, or loss of clinical privileges at another healthcare facility

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

177

Temporary Privileges

- New applicants
- Important patient care need

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

178

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Important patient care need:

- ✓ Verification of licensure and DEA
- ✓ Verification of competence
- ✓ Relevant training and experience
- ✓ Verification of malpractice insurance
- ✓ Data Bank/OIG exclusion list

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

179

Important patient care need:

- ✓ Recommendation of Department Chair
- ✓ Recommendation of Chief of Staff

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

180

Important patient care need:

- Care of a specific patient
- Proctoring

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

181

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Temporary Privileges

- Important and immediate patient care need
 - Care of a specific patient
 - Proctoring
 - Locum Tenens

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

182

Locum Tenens Privileging Tips

Do your homework!

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

183

PHYSICIAN EVALUATION FORM
CONFIDENTIAL AND PRIVILEGED PER REVIEW DOCUMENT

Please complete all parts of this form. If more space is needed use a separate sheet.

NAME OF APPLICANT _____
NAME OF EVALUATOR _____
NAME OF HOSPITAL _____

I. VERIFICATION OF STATES
Does applicant work at your institution? _____
Applicant's status at your institution: _____

II. EVALUATION
Please base your evaluation of the following factors on the applicant's demonstrated performance. If the answer is "yes" or "some concern," please give details on a separate sheet or add.

	NO CONCERN	SOME CONCERN	UNABLE TO ASSESS
Medical/clinical knowledge			
Keeping current with developments in specialty			
Clinical judgment			
Technical skills and proficiency			
Management of multiple complex problems			
Interpersonal skills, including: Ability to work in a collegial and cooperative manner with others, including nurses and hospital staff Relationship with patients and their families			
Communication skills, including ability to understand, speak and write English Effective communication with patients and families concerning proposed treatment, alternatives and associated consequences			
Timely, comprehensive and legible completion of medical records			

184

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Require:

No current or previously successful challenges to licensure or registration

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

185

Require:

No involuntary termination of appointment or involuntary limitation, reduction, denial, or loss of clinical privileges at another healthcare facility

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

186

Do:

- Criminal background check
- Google search

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

187

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Locum Tenens Privileging Tips

Have an easy exit strategy

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

188

Have an easy exit strategy

- Contract provision
- Bylaws Language

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

189

4.B.3. Withdrawal of Temporary Clinical Privileges:

- (a) The granting of temporary clinical privileges is a courtesy that may be withdrawn by the Chief Executive Officer at any time, after consulting with the Chief of Staff, the Chairperson of the Credentials Committee, or the department chairperson.
- (b) The department chairperson or the Chief of Staff will assign to another member of the Medical Staff responsibility for the care of patients until they are discharged. Whenever possible, consideration will be given to the wishes of the patient in the selection of a substitute physician.

190

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Locum Tenens Privileging Tips

Consider a Locums Staff Category

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

191

Criteria for Clinical Privileges

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

192

Paul Monary, M.D. Case Study

CREDENTIALING
FOR
EXCELLENCE


HORTY > SPRINGER

193

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



The Medical Staff Bylaws must describe the privileging process used that considers *"character, competence, training, individual experience, and judgment"*

- CMS Conditions of Participation

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

194

Grants of clinical privileges are based on a review of *"training, experience, current competence, and ability to perform the requested privilege."*

- The Joint Commission

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

195

The medical staff bylaws should include criteria for determining the privileges to be granted to individual practitioners.

- DNV

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

196

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Vascular surgery *residents* are expected to have done a minimum of 80 endovascular therapeutic procedures and 100 endovascular diagnostic procedures

- Society for Vascular Surgery

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

197

"When there isn't a clear cut standard in the community then the hospital has to decide for themselves."

Nahas v. Shore Medical Center (2019)

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

198

Best Practices

1. Set threshold eligibility criteria for clinical privileges (both core and specialty) in advance
2. Use multi-disciplinary committee to recommend appropriate threshold eligibility criteria for clinical privileges (e.g., Credentials Committee) with input from appropriate specialties
3. Criteria based on literature and research

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

199

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Threshold Eligibility Criteria

Apply to:

1. Initial appointment,
2. Reappointment, and
3. CLINICAL PRIVILEGES!

CREDENTIALING
for
EXCELLENCE

HORTY > SPRINGER

200

Coast Regional Medical Center

Clinical Privileges for Endovascular Procedures

Effective January 1, 2023, to be eligible for clinical privileges to perform endovascular procedures at Coast Regional Medical Center, an applicant must satisfy the following requirements:

- (c) for those applicants whose training was completed within the last two years, have performed a sufficient number of endovascular interventions to demonstrate clinical current competence, including a minimum of 80 endovascular therapeutic procedures and 100 endovascular diagnostic procedures.
- (d) for those applicants whose training was not completed within the last two years, have performed a sufficient number of endovascular interventions in the previous two years to demonstrate current clinical competence, including a minimum of 40 endovascular therapeutic procedures and 50 endovascular diagnostic procedures.

201

Coast Regional Medical Center

Clinical Privileges for Endovascular Procedures

(d) for those applicants whose training was not completed within the last two years, have performed a sufficient number of endovascular interventions in the previous two years to demonstrate current clinical competence, including a minimum of 40 endovascular therapeutic procedures and 50 endovascular diagnostic procedures.

demonstrate current clinical competence for endovascular therapeutic procedures and 50 endovascular diagnostic procedures.

202

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Volume-Based Credentialing

- Eligibility for privileges based on specified number of clinical activities
- Common for surgical and invasive procedures
- Better outcomes associated with higher volume
- May have alternative means for demonstrating competence (e.g., simulation)

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

203

Turf Battles

(Clinical Privileges that Cross Specialty Lines)



204

Justin Bourne, MD Case Study

205

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Unresolved, or poorly resolved, turf battles are likely to end up in court.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

206

**Risks of Poorly Handled
Turf Battles
Patient Safety
Antitrust**

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

207

Patient Safety Risks
Goldenberg v. Woodard

OB/GYN begins performing colonoscopy after attending weekend CME course. Sued for fraud after perforating a patient's colon. Jury award over \$1.5 million.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

208

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Antitrust Risks

Nurse Midwifery Assocs. v. Hibbett

Two nurse midwives sued hospitals and obstetricians for violations of the antitrust laws when their request for privileges to deliver babies was denied.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

209

Antitrust Risks

Nurse Midwifery Assocs. v. Hibbett

One obstetrician stated, "If nurse midwives started delivering babies, the next thing they would want to do is brain surgery."

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

210

Antitrust Risks

Nurse Midwifery Assocs. v. Hibbett

Another said that nurse midwives would get privileges "over his dead body."

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

211

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Antitrust Risks

Nurse Midwifery Assocs. v. Hibbett

Antitrust conspiracy claim allowed to go forward.

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

212

When there is a turf battle, process is the key.

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

213


Clinical Privileges That Cross Specialty Lines:

(a) Requests for clinical privileges that previously have been exercised only by members in another specialty will not be processed until the steps outlined in this section have been completed and a determination has been made regarding the member's eligibility to request the clinical privileges in question.

(2) the clinical privileges requested are appropriate;

(3) the manner of addressing the most common complications that arise, which may be outside of the scope of the clinical privileges that have been granted to the requesting individual;

(4) the extent (time frame and mechanism) of initial focused professional practice evaluation and supervision that should occur if the privileges are granted in order to confirm competence.



214

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Clinical Privileges That Cross Specialty Lines

(a) Requests for clinical privileges that previously have been exercised only by members in another specialty will not be processed until the steps outlined in this section have been completed and a determination has been made regarding the

(b) The individual seeking the privileges will submit a report to the Credentials Committee that specifies the minimum qualifications needed to perform the procedure safely and competently, whether the individual's specialty is performing the clinical privilege at other similar hospitals, and the experiences of those other hospitals.

(4) the extent (time frame and mechanism) of initial focused professional practice evaluation and supervision that should occur if the privileges are granted in order to confirm competence.

215

Clinical Privileges That Cross Specialty Lines

(a) Requests for clinical privileges that previously have been exercised only by members in another specialty will not be processed until the steps outlined in this section have been completed and a determination has been made regarding the member's eligibility to request the clinical privilege(s) in question.

(c) The Credentials Committee, or other appropriate committee, will then conduct additional research and consult with experts, as necessary.

(1) the minimum education, training, and experience necessary to perform the clinical privileges in question;

(2) the clinical indications for when the procedure is appropriate;

(3) the manner of addressing the most common complications that arise, which may be outside of the scope of the clinical privileges that have been granted to the requesting individual;

(4) the extent (time frame and mechanism) of initial focused professional practice evaluation and supervision that should occur if the privileges are granted in order to confirm competence.

216

AAFP

CME Journals Patient Care Med School & Residency Practice Management Advocacy Events AAFP News

"Based upon recent studies, the AAFP has determined that the standard of fifty (50) [colonoscopy] cases as the primary operator be used as a basis for determination of basic competency."

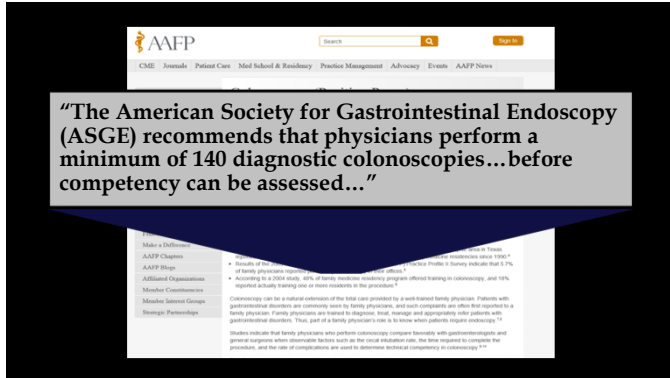
AAFP Chapters
AAFP Office
Additional Organizations
Member Committees
Member Interest Groups
Specialty Fellowship

217

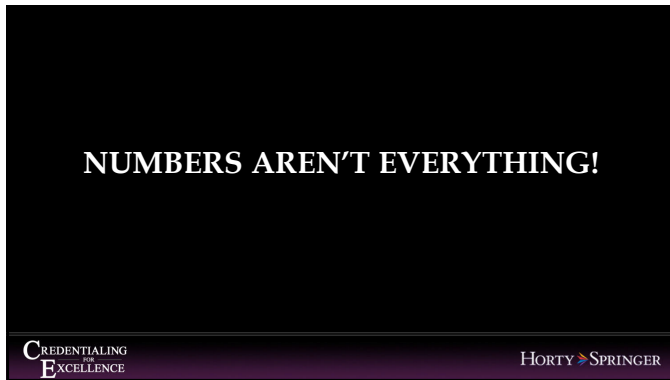
Credentialing for Excellence

Las Vegas, NV

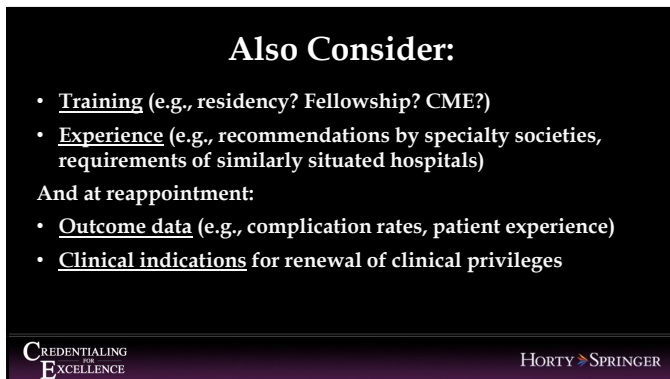
November 14-16, 2024



218



219



220

Credentialing for Excellence

Las Vegas, NV

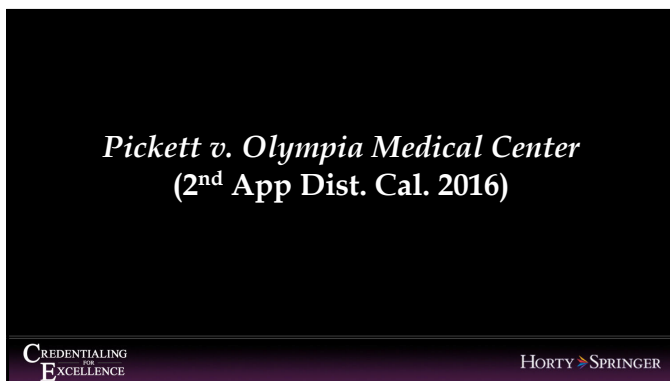
November 14-16, 2024



221



222



223

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Pickett v. Olympia Medical Center
(2nd App Dist. Cal. 2016)

A hospital has a duty of reasonable care to protect patients.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

224

Pickett

Those duties include providing policies and procedures that are reasonably necessary for the treatment of patients.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

225

Pickett

The measure of a hospital's duty is the degree of care, skill, and diligence used by other hospitals in similar circumstances.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

226

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

There are two questions.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

227

There are two questions:

1. Should we do this new procedure or new technique here?

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

228

Factors to consider:

- Clinical indications for new procedure;
- Whether there is empirical evidence of improved patient outcomes or other benefits;
- Whether proficiency is volume-sensitive;

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

229

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Factors to consider:

- Whether the procedure is being performed at similar hospitals; and
- Whether the Hospital has the resources to safely and effectively perform the new procedure.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

230

There are two questions:

1. Should we do this new procedure or new technique here?
2. Is a separate privilege required?

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

231

Factors to consider:

- Is different equipment/technique required?
- Is a special skill set required?

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

232

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

If a separate privilege, Credentials Committee should:

- Develop threshold criteria
- Define elements of FPPE to confirm competence

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

233

Put the burden on the practitioner
seeking to perform the new
procedure to provide a report that
addresses these issues.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

234

Best Practice

Decide policy first **THEN** apply policy to
the practitioner's request

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

235

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

4.A.5. Clinical Privileges for New Procedures

(1) Requests for clinical privileges to perform either a procedure not currently being performed at the Hospital or a new technique to perform an existing procedure, will not be processed until a determination has been made that the procedure will be offered by the Hospital and criteria for the clinical privileges(2) have been

4.A.5. Clinical Privileges for New Procedures:

Requests for clinical privileges to perform either a procedure not currently being performed at the Hospital or a new technique to perform an existing procedure (hereafter, "new procedure") shall not be processed until (1) a determination has been made that the procedure shall be offered by the Hospital, (2) criteria to be eligible to request those clinical privileges have been established as set forth in this Section.

(2)

(3) elements of focused professional practice evaluation.

236

Telemedicine Privileges

CREDENTIALING OR EXCELLENCE

HORTY > SPRINGER

237

Medicare Conditions of Participation permit a streamlined privileging process.

CREDENTIALING OR EXCELLENCE

HORTY > SPRINGER

238

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

COPs require that the hospital have a contract with the distant site.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

239

Agreement with distant site:

- Medicare-participating hospital (or telemedicine entity that furnishes services in compliance with CoPs).
- List of telemedicine provider's privileges at distant site.
- Distant site provider is licensed in state where patient is located.
- Distant site receives performance review of provider's privileges (e.g., review of adverse events and complaints).

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

240

Agreement with distant site:

Also consider language about the exchange of peer review information:

- Should be consistent with, and reference, the state peer review statute.
- Emphasize that credentialing and privileging information is privileged and confidential.
- State that exchange of such information is not a waiver of any applicable privilege.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

241

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

The Joint Commission Twist

The distant site must be a Joint Commission-accredited or Medicare-participating organization.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

242

Other accreditation entities:

- CIHQ, MS-9 - Similar to Medicare CoPs
- DNV-NIAHO, MS.20 - Similar to/same as Medicare CoPs

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

243

Just because you can,
doesn't mean you must.

CREDENTIALING
FOR
EXCELLENCE

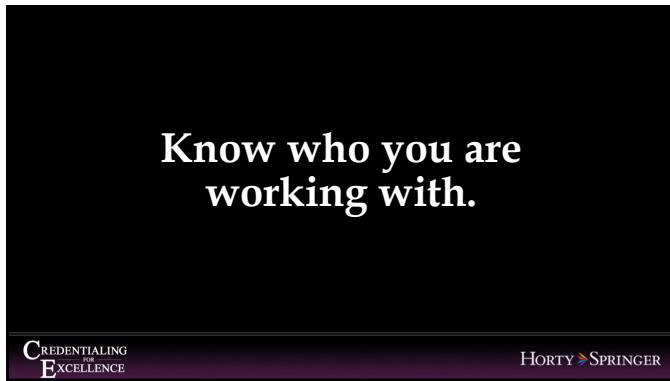
HORTY > SPRINGER

244

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



245



246



247

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Credentialing performed by another hospital is likely to be much more rigorous than credentialing performed by "distant telemedicine entity."

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

248

If telemedicine providers come on-site sometimes, they must be fully credentialed.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

249

Telemedicine practitioners are subject to peer review processes.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

250

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Consider a telemedicine "staff" category.

CREDENTIALING FOR EXCELLENCE

HORTY > SPRINGER

251

TELEMEDICINE STAFF

The Telemedicine Staff is not a category of the Medical Staff, but included in this Article for convenient reference.

Individual appointed to the Telemedicine Staff may be granted privileges in accordance with the Credentials Policy.

(c) must cooperate in performance improvement and ongoing and focused professional practice evaluation activities, and

(d) are required to pay application fees, but not dues.

252

TELEMEDICINE STAFF

I. Qualifications

Any telemedicine privileges that are granted in conjunction with a contractual agreement are coterminous with the agreement.

May attend meetings without vote, no committee service, no rights to serve as a Leader, must cooperate in performance improvement activities.

(c) must cooperate in performance improvement and ongoing and focused professional practice evaluation activities, and

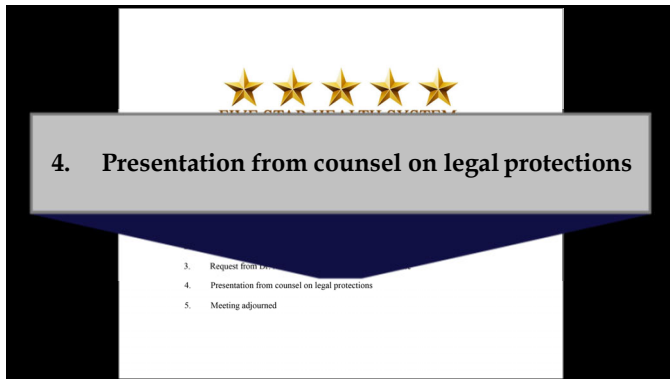
(d) are required to pay application fees, but not dues.

253

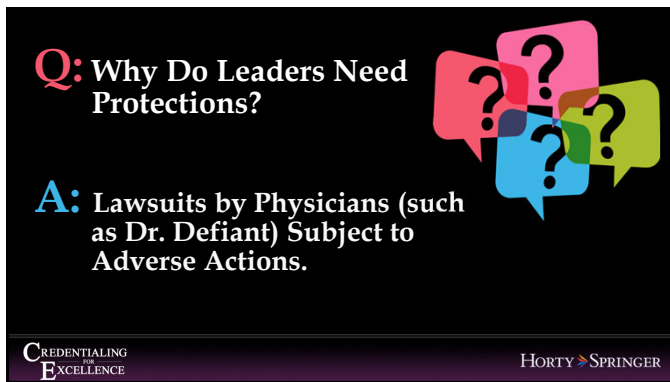
Credentialing for Excellence

Las Vegas, NV

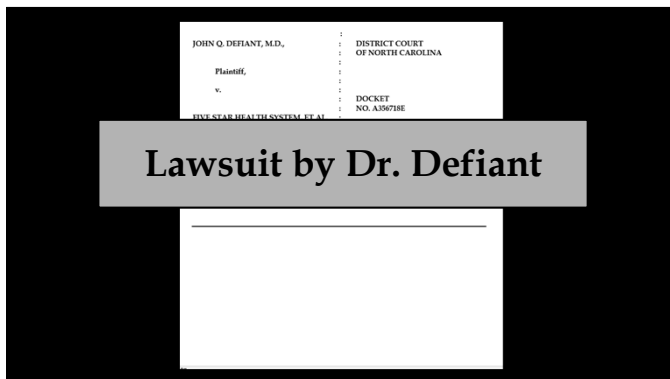
November 14-16, 2024



254



255



256

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Claims brought by Dr. Defiant:

- Defamation
- Antitrust violations
- Interference with business relationships
- Breach of contract
- Violation of the ADEA

CREDENTIALING
OF
EXCELLENCE

HORTY > SPRINGER

257

Other common claims:

- Whistleblower
- Deprivation of fair process

CREDENTIALING
OF
EXCELLENCE

HORTY > SPRINGER

258



Protection!

259

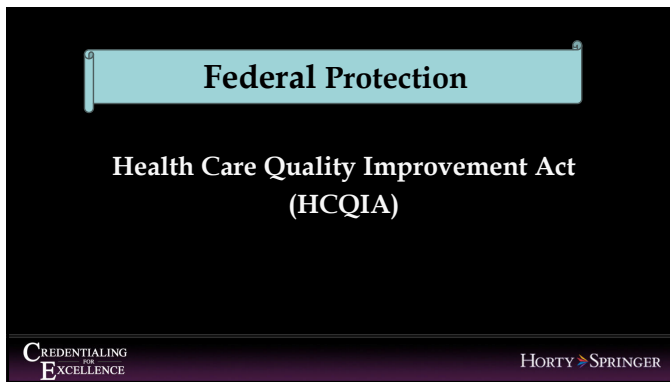
Credentialing for Excellence

Las Vegas, NV

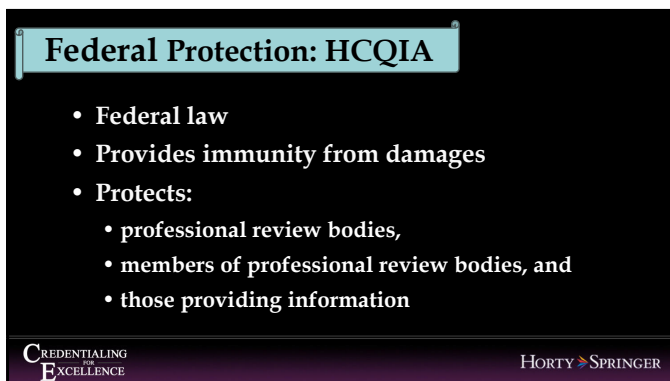
November 14-16, 2024



260



261



262

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Federal Protection: HCQIA

Those providing information to professional review bodies are immune unless:

- Information was false; and
- Knew it was false

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

263

Federal Protection: HCQIA

Professional review bodies:

- Board
- MEC
- Credentials Committee
- Investigating Committees
- Hearing Committees

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

264

Federal Protection: HCQIA

Professional review bodies immune if action taken:

- In the reasonable belief it is furtherance of quality care
- After reasonable investigation
- After notice of action and hearing*
- In the reasonable belief it is justified by the facts known

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

265

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Federal Protection: HCQIA

***Precautionary Suspensions**

If there is imminent danger, notice and hearing can occur after suspension

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

266

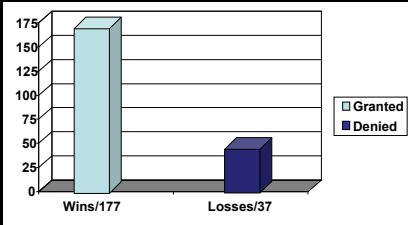
Federal Protection: HCQIA

- ✓ Federal antitrust actions
- ✓ State law claims (e.g., defamation, breach of contract, etc.)
- ✗ Federal and state civil rights actions (e.g., ADA, ADEA & Title VII)
- ✗ Requests for injunction
- ✗ Policy decisions
- ✗ Suits brought by non-physician practitioners

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

267

Immunity Score Card
Total Cases = 214



Category	Count
Wins	177
Losses	37

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

268

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Federal Protection: HCQIA

Courts look favorably on decisions:

- 1) In which you are **fair** to the physician, and
- 2) That are taken to **protect patients**.

CREDENTIALING OF EXCELLENCE HORTY > SPRINGER

269

Kolb v. Northside Hospital

- Plastic surgeon summarily suspended
- Reports of surgeon carrying gun in hospital to ward off assassination attempts
- Numerous mental health concerns (e.g., reincarnation of Lizzie Borden)

CREDENTIALING OF EXCELLENCE HORTY > SPRINGER

270

Kolb v. Northside Hospital

- Surgeon requested a hearing instead of submitting to psychiatric exam
- Suspension upheld
- Surgeon sued, asserting state law claims

CREDENTIALING OF EXCELLENCE HORTY > SPRINGER

271

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Kolb v. Northside Hospital

Court:

- HCQIA immunity applies
- Main concern behind suspension was the gun and safety of patients and staff
- Reasonable investigation - Chair of MEC spoke with surgeon before suspension and witness statements collected after the suspension

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

272

State Protections

- Statutory Immunity
- Peer Review Privilege

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

273

State Protections: Statutory Immunity

- Often conditioned on "good faith" or absence of "malice"
- Generally, not as strong as HCQIA but may offer additional protections

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

274

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



275



276

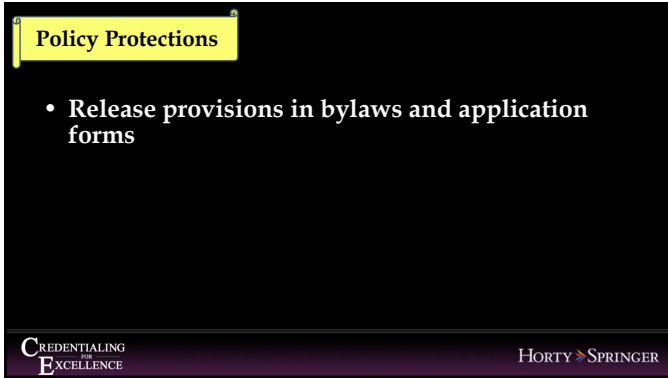


277

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

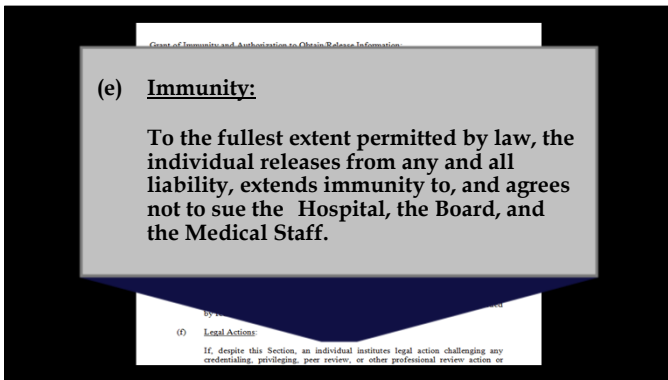


4 Policy Protections 9

- Release provisions in bylaws and application forms

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

278



Grant of Immunity and Authorization to Obtain Release Information

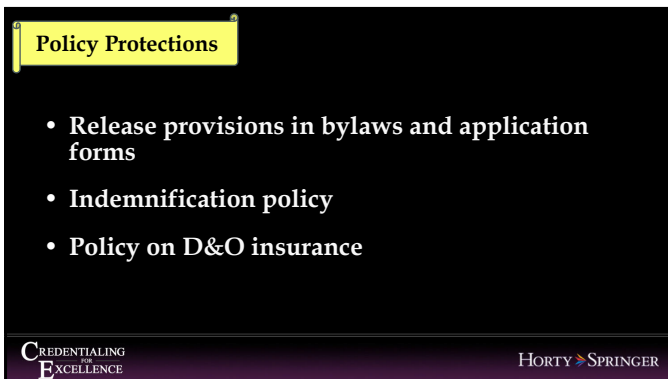
(e) **Immunity:**

To the fullest extent permitted by law, the individual releases from any and all liability, extends immunity to, and agrees not to sue the Hospital, the Board, and the Medical Staff.

Legal Actions

If, despite this Section, an individual institutes legal action challenging any credentialing, privileging, peer review, or other professional review action or

279



4 Policy Protections 9

- Release provisions in bylaws and application forms
- Indemnification policy
- Policy on D&O insurance

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

280

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Welcome to

Credentialing for Excellence

November 14-16, 2024
Las Vegas, NV

Lauren Massucci & Hala Mouzaffar

CREDENTIALING
FOR
EXCELLENCE HORTY > SPRINGER

281

I wish I had ...YOUR BYLAWS

CREDENTIALING
FOR
EXCELLENCE HORTY > SPRINGER

282

Scenario 1: Dr. Laubraker

CREDENTIALING
FOR
EXCELLENCE HORTY > SPRINGER

283

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

**Scenario 1:
Dr. Larry Laubaker**

- “Youthful indiscretions”
- DUI when he was 19
- Receiving stolen property when he was 21
- No other run-ins with the law
- Before the MEC acted, we learn that 6 months ago, Dr. Laubaker was arrested for DUI

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

284

**Look at your Bylaws.
What are you going to do?**

- Recommend denial
- Send application back to Credentials Committee
- Get additional information and then decide whether or not to process application because of misrepresentation
- Appoint with conditions
- Phone a friend

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

285

OCEAN

2.3.3 Burden on the Applicant

(c)The applicant shall attest to the accuracy and completeness of the information provided. Any falsification or omission on the application shall be grounds for denial of Medical Staff appointment.

Getaway Hospital

286

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

7.1.1. Grounds for Hearing

Any one or more of the following actions or recommended actions will constitute grounds for hearing.

- (a) Denial of initial membership
- (b) Denial of reappointment
- (c) Denial of requested clinical privileges

287

2.C.2. Misstatements and Omissions:

- (a) Any misstatement in, or omission from, the application is grounds to stop processing the application. The applicant will be informed in writing of the nature of the misstatement or omission and permitted to provide a written response. The Chief of Staff and Chief Medical Officer will review the response and determine whether the application should be processed further.

288

2.C.2. Misstatements and Omissions:

- (a) Any misstatement in, or omission from, the application is grounds to stop processing the application. The applicant will be informed in writing of the nature of the misstatement or omission and permitted to provide a written response. The Chief of Staff and Chief Medical Officer will review the response and determine whether the application should be processed further.

289

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

2.C.2. Misstatements and Omissions:

(a) Any misstatement in, or omission from, the application is grounds to stop processing the application. The applicant will be informed in writing of the nature of the misstatement or omission and permitted to provide a written response. The Chief of Staff and Chief Medical Officer will review the response and determine whether the application should be processed further.

290

2.C.2. Misstatements and Omissions:

(c) No action taken pursuant to this section will entitle the applicant or member to a hearing or appeal.

Healthy Spirit
Memorial Hospital

291

7.A.2. Actions Not Grounds for Hearing:

None of the following actions constitutes grounds for a hearing...

(k) determination that an application will not be processed due to misstatement or omission

Memorial Hospital

292

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Scenario 2: Dr. Grubbs

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

293

Scenario 2: Dr. Gregory Grubbs

Eight months ago, the State Board entered into a Consent Order in which it was determined that Dr. Grubbs violated the Medical Practice Act by:

- committing malpractice in two cases, and
- failing to maintain timely, legible, accurate medical records.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

294

Scenario 2: Dr. Gregory Grubbs

According to Consent Order, Dr. Grubbs' license was suspended for six months (stayed) and the following conditions were imposed:

- Probation – two years
- 10 CME hours re: medical records
- 20 CME hours re: cervical spine surgery

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

295

Credentialing for Excellence

Las Vegas, NV

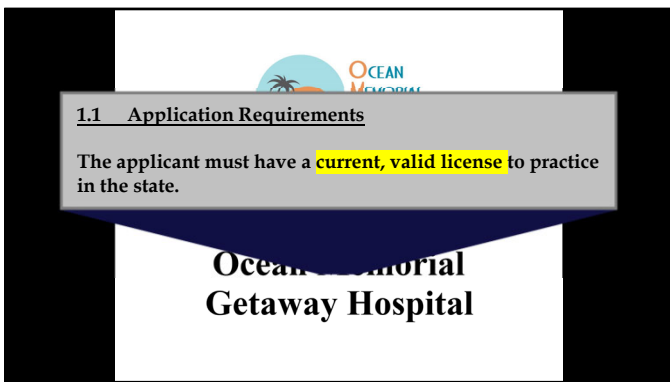
November 14-16, 2024

**Look at your Bylaws.
What are you going to do?**

- Deem him ineligible for continued appointment
- Take disciplinary action because he failed to notify you of the licensure action
- Commence an investigation
- Impose the same conditions on his privileges
- Deem his appointment and privileges to be automatically relinquished

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

296

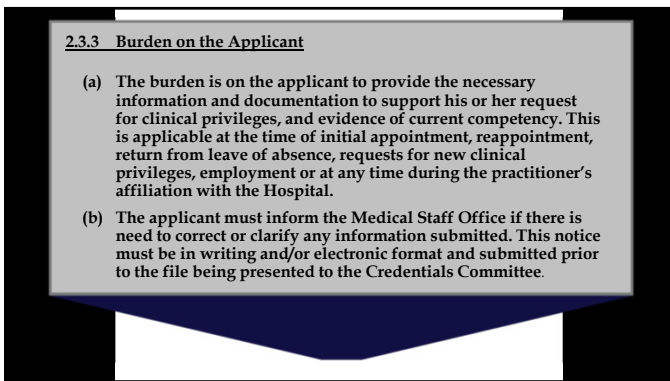


1.1 Application Requirements

The applicant must have a **current, valid license** to practice in the state.

Ocean Memorial
Getaway Hospital

297



2.3.3 Burden on the Applicant

(a) The burden is on the applicant to provide the necessary information and documentation to support his or her request for clinical privileges, and evidence of current competency. This is applicable at the time of initial appointment, reappointment, return from leave of absence, requests for new clinical privileges, employment or at any time during the practitioner's affiliation with the Hospital.

(b) The applicant must inform the Medical Staff Office if there is need to correct or clarify any information submitted. This notice must be in writing and/or electronic format and submitted prior to the file being presented to the Credentials Committee.

298

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

5.5.2 License

Probation
Whenever a member is placed on probation by the applicable licensing authority, his or her applicable membership status, prerogatives, privileges and responsibilities, if any, will automatically become subject to the terms of the probation effective upon, and for at least the term of, the probation.

Getaway Hospital

299

2.A.1 Threshold Eligibility Criteria:

To be eligible to apply for initial appointment, reappointment or clinical privileges, an applicant must, as applicable:

(a) have a current, unrestricted license to practice in the state that is not subject to any restrictions, probationary terms, or conditions not generally applicable to all licensees, and have never had a license to practice denied, revoked, restricted or suspended by any state licensing agency

300

HEALTHY

6.G AUTOMATIC RELINQUISHMENT

(1) Any of the occurrences described in this Section may constitute grounds for the automatic relinquishment of an individual's appointment and clinical privileges...

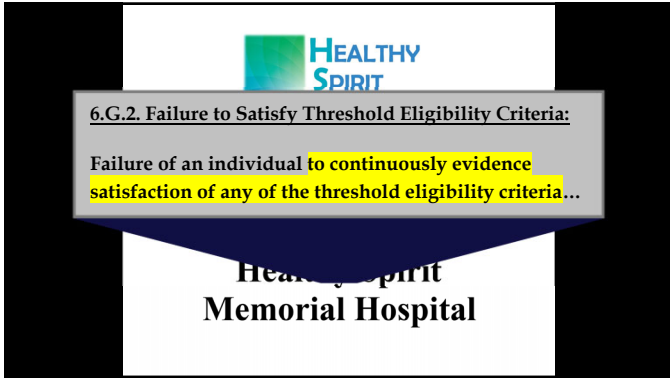
Healthy Spirit Memorial Hospital

301

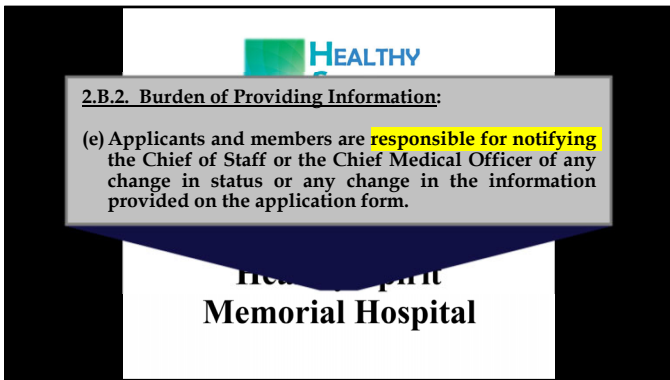
Credentialing for Excellence

Las Vegas, NV

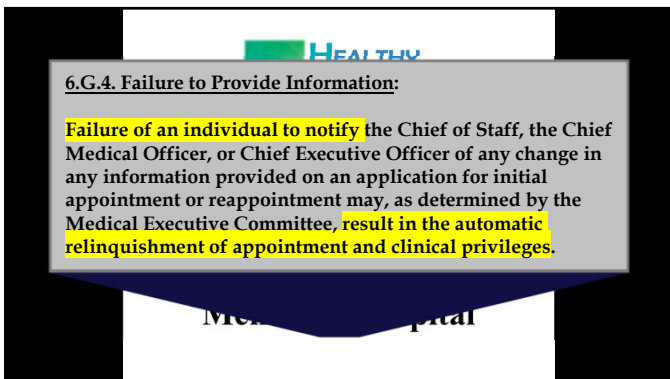
November 14-16, 2024



302



303



304

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Scenario 3: Dr. Vintage

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

305

Scenario 3: Dr. Vivian Vintage

- Recently suffered a stroke
- She's been out of practice for four months
- When CMO called, Dr. Vintage said, "I'm fine," and "I'm looking forward to returning to practice."
- CMO is concerned it'll be a long recovery
- Two weeks later, you see Dr. Vintage's name on the OR schedule

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

306

Look at your Bylaws. What are you going to do?

- Place her on a LOA and tell her she needs to request reinstatement
- Require her to get an evaluation
- Refer to Practitioner Health Policy
- Do nothing and hope for the best!
- A, B and C

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

307

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

6.8.1. Request and Term of Leave:

Medical Staff members may request a voluntary leave of absence from the Medical Staff by submitting a written request, as set forth in Section 1.4.3 to the Medical Executive Committee stating the exact period of time of the leave, which may not be longer than two years. A copy shall be forwarded to the Chief Medical Officer by the President of the Medical Staff....

308

6.8.2. Reinstatement After Leave:

At least thirty (30) days prior to the termination of the leave, or at any earlier time, the member...may request reinstatement by submitting a written request...The member shall submit a written summary of his or her relevant activities during the leave.

Getaway Hospital

309

6.I LEAVES OF ABSENCE

6.I.1. Initiation:

(c) Except for maternity leaves, members must report to the Chief Medical Officer any time they are away from ... patient care responsibilities for longer than 45 days and the reason is related to their physical or mental health or otherwise to their ability to care for patients safely and competently.

310

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

6.I LEAVES OF ABSENCE

6.I.1. Initiation: * * *

(c) Upon becoming aware of such circumstances (whether by report of the Practitioner or otherwise), the Chief Medical Officer, in consultation with the Chief of Staff, may trigger an automatic medical leave of absence at any point after becoming aware of the member's absence from patient care.

Member Hospital

311

6.I LEAVES OF ABSENCE

6.I.3. Reinstatement: * * *

(c) If the leave of absence was for health reasons..., the request for reinstatement must be accompanied by a report from a physician acceptable to the Practitioner Health Committee indicating that the individual is capable of resuming a hospital practice and safely exercising the clinical privileges requested. A request for reinstatement will be processed in accordance with the Practitioner Health Policy.

312

6.I LEAVES OF ABSENCE

6.I.3. Reinstatement: * * *

(c) If the leave of absence was for health reasons..., the request for reinstatement must be accompanied by a report from a physician acceptable to the Practitioner Health Committee indicating that the individual is capable of resuming a hospital practice and safely exercising the clinical privileges requested. A request for reinstatement will be processed in accordance with the Practitioner Health Policy

313

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Scenario 4: Dr. Hurricane

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

314

Scenario 4: Dr. Hannah Hurricane

- Based on a long history of disruptive behavior, Dr. Hurricane's appointment was terminated
- She sued the Hospital and every member of the MEC
- Two years later, while the litigation is pending, Dr. Hurricane calls the Medical Staff Office and announces: "I'm baaaaaaack!"
- She also demands an application

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

315

Look at your Bylaws. What are you going to do?

- Give her an application and process it.
People change!
- Tell her she's ineligible - no application
- Write her a letter asking her to explain how she's changed and why things would be different this time around
- Give her an application, but make sure everyone knows the plan is to deny it

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

316

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

7.4.1. Reapplication After Adverse Appointment Decision:

An applicant or member who has received a final adverse decision regarding appointment or reappointment shall not be eligible to reapply to the Medical Staff for a period of two (2) years.

Any such reapplication shall be processed as an initial application, and the applicant shall submit such additional information as the Staff may require in demonstration that the basis for the earlier adverse action no longer exists.

317

1.1.1 Authorization and Conditions:

By applying for or exercising clinical privileges within the Hospital an applicant or member:

- (c) Agrees to be bound by the provisions of these Bylaws and to waive all legal claims against any representative who acts in accordance with the provisions of these Bylaws.

Getaway Hospital

318

2.A.1. Threshold Eligibility Criteria:

To be eligible to apply for initial appointment, reappointment or clinical privileges, an applicant must:

- (f) have never had Medical Staff...appointment, clinical privileges, or status as a participating provider denied, revoked, or terminated by any health care facility, including this Hospital, or health plan for reasons related to clinical competence or professional conduct...

Memorial Hospital

319

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Bylaws best practices:

- Threshold eligibility criteria
- Misstatements and omissions
- Automatic relinquishments
- Burden/Incomplete Application
- Leaves of absence
- Right to a hearing

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

320

Credentialing and Privileging Advanced Practice Professionals



CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

321

PERSPECTIVES

Hospital Pediatrics (November 2020) *The Role of the Advanced Practice Provider and the Evolving Health Care Landscape*

“The number of APPs per 100 physicians increased from 15.3 in 2001 to 28.2 in 2016. This trend is expected to continue, with a projection of 53.9 APPs per 100 physicians by 2030.”

APP TRAINING AND WORKFORCE

There are currently ~20,000 licensed nurse practitioners (NPs) in the United States. The educational pathway for NP training begins with licensure as a registered nurse (RN), with undergraduate education and clinical training to become a generalist nurse after graduation. (Frequently as a bachelor of science degree in nursing, although one

322

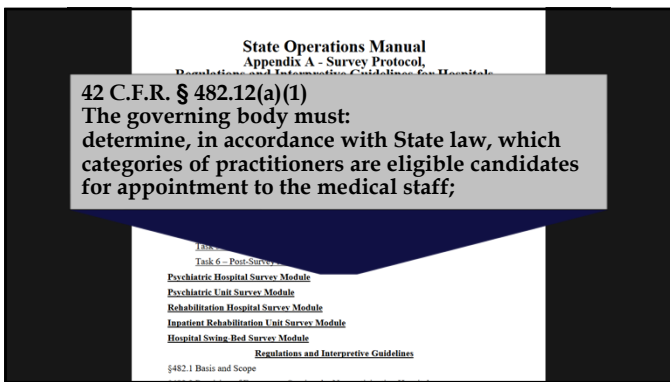
Credentialing for Excellence

Las Vegas, NV

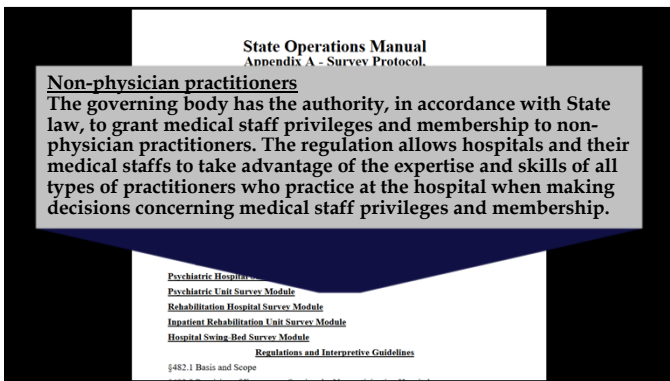
November 14-16, 2024



323



324

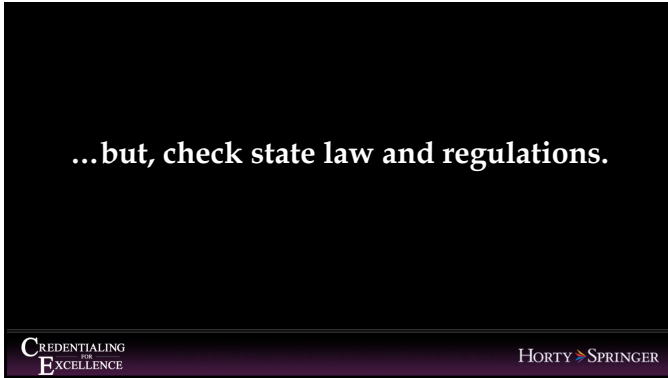


325

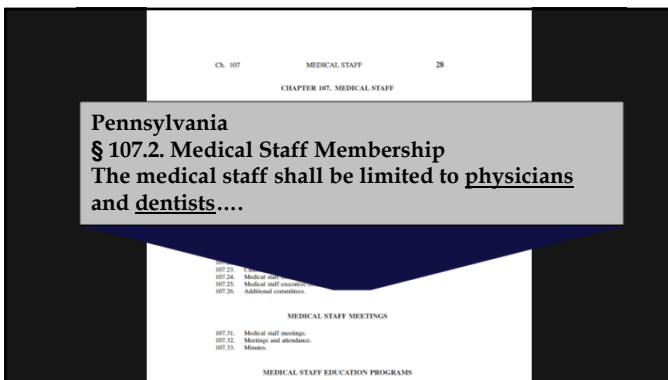
Credentialing for Excellence

Las Vegas, NV

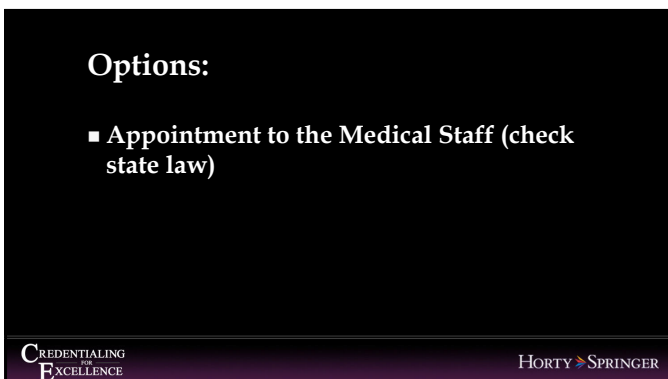
November 14-16, 2024



326



327



328

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

ACTIVE STAFF
Qualifications:

The Active Staff consists of members of the Medical Staff who are physicians, dentists, podiatrists, psychologists, and Advanced Practice Professionals...

329

Options:

- Appointment to the Medical Staff (check state law)
- Separate staff category with limited rights and responsibilities

CREDENTIALING OF EXCELLENCE HORTY > SPRINGER

330

ADVANCED PRACTICE PROFESSIONAL STAFF
Qualifications:

The Advanced Practice Professional Staff consists of advanced practice professionals who are granted clinical privileges at the Hospital

Advanced Practice Professional Staff members:

- May attend and participate in Medical Staff and department meetings without vote
- May not hold office
- May be invited to serve on committees

331

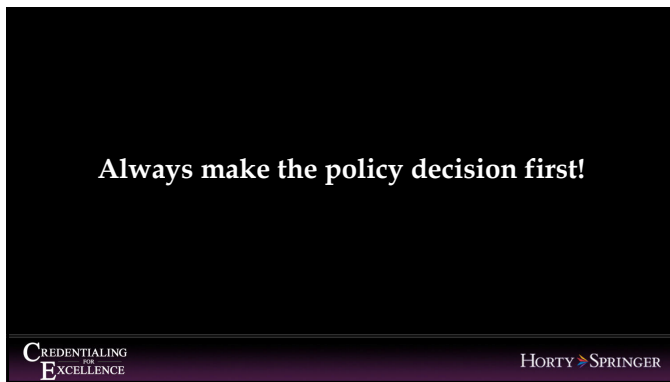
Credentialing for Excellence

Las Vegas, NV

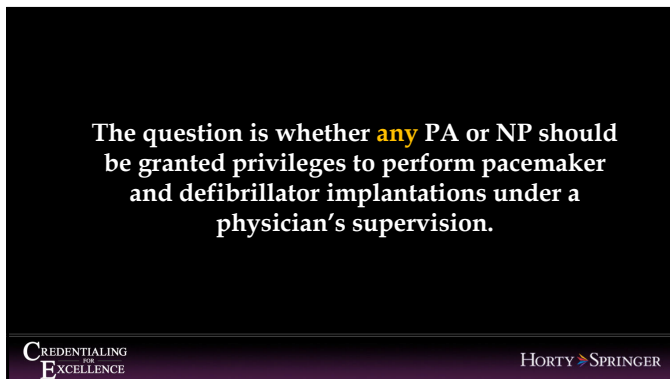
November 14-16, 2024



332



333



334

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

What Does CMS Say?

APPs who provide a “medical level of care” or conduct surgical procedures in the Hospital must be credentialed and *privileged* through the Medical Staff process.

*Director, CMS Survey and Certification Group
Memorandum, November 12, 2004*

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

335

What Is a “Medical Level of Care”?

Beats me. You'll know it when you see it.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

336

“Medical Level of Care”

- Is the APP performing a task that has historically (within the last 20 years) been performed by physicians?
- Could the task that the APP is performing “kill or cause significant harm” to the patient?

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

337

Credentialing for Excellence

Las Vegas, NV





November 14-16, 2024

What information should be considered in making privileging decisions?

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

338




Consider:

-  Are there any national standards?
-  Are there any state requirements?
-  Is there formal training that should be required?
-  What are other hospitals doing?

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

339

Consider:

-  What level of supervision should be required?
-  What are PAs and NPs doing elsewhere in the Hospital?
-  What would patients be told?

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

340

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

State licensing standards create a minimum bar.

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

341

Hospitals can set higher standards.

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

342

Who Is Responsible for Delineating Privileges?

- Credentials Committee?
- Subcommittee?
- Separate committee?

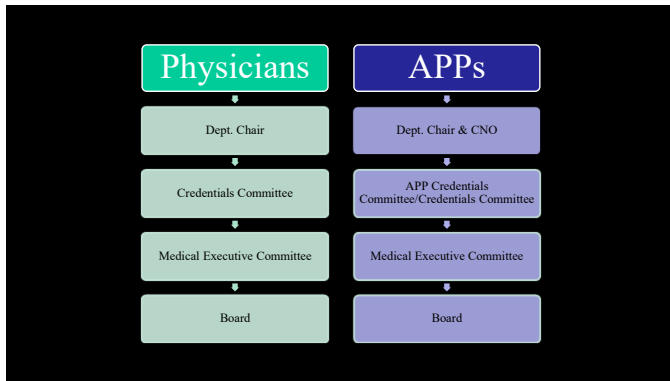
CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

343


Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



344



If DeeDee Doppler was a physician, she would have to demonstrate education, training, experience, and current competence **before** her request for privileges would be granted.

345

Options for Specialty Privileges

- Require prior experience

CREDENTIALING FOR EXCELLENCE | HORTY & SPRINGER

346

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Central Medical Center
Delineation of Clinical Privileges and Procedures

Specialty: Physician Assistant
Basic Education: PA or PA-C

Threshold Eligibility Criteria

To be eligible for clinical privileges to practice at Central Medical Center, a Physician Assistant must meet all of the applicable threshold eligibility criteria described in the Medical Center's Medical Staff Credentials Policy. The individual must also satisfy the following eligibility criteria:

Performing lumbar punctures.

Additional eligibility criteria:
Initial - (1) evidence from another hospital, where the Physician Assistant was granted and recently exercised the privileges, that the Physician Assistant is competent to perform the privileges; OR....

information from the clinical practice evaluation and other performance inputs

The burden of establishing qualifications and current competence for all clinical privileges requested is, at all times, on the Physician Assistant requesting the clinical privileges.

All requests for special privileges must be supported by evidence that the Physician Assistant has the training, experience, and current competence to perform the specific privileges and is able to provide the medical care or services that underlie the privileges in a safe and competent manner. Additional, specific threshold eligibility criteria for initial and renewed grants of special privileges are outlined below.

347

Options for Specialty Privileges

- Require prior experience
- "On-the-job" training with supervising physician

CREDENTIALING OF EXCELLENCE

HORTY > SPRINGER

348

Central Medical Center
Delineation of Clinical Privileges and Procedures

Specialty: Physician Assistant
Basic Education: PA or PA-C

Threshold Eligibility Criteria

To be eligible for clinical privileges to practice at Central Medical Center, a Physician Assistant must meet all of the applicable threshold eligibility criteria described in the Medical Center's Medical Staff Credentials Policy. The individual must also satisfy the following eligibility criteria:

Performing lumbar punctures.

Additional eligibility criteria:
Initial - ...OR (2) successful completion of three lumbar punctures at the Medical Center while directly precepted and assisted by the Physician Assistant's collaborating physician....

information from the clinical practice evaluation and other performance inputs

The burden of establishing qualifications and current competence for all clinical privileges requested is, at all times, on the Physician Assistant requesting the clinical privileges.

All requests for special privileges must be supported by evidence that the Physician Assistant has the training, experience, and current competence to perform the specific privileges and is able to provide the medical care or services that underlie the privileges in a safe and competent manner. Additional, specific threshold eligibility criteria for initial and renewed grants of special privileges are outlined below.

349

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

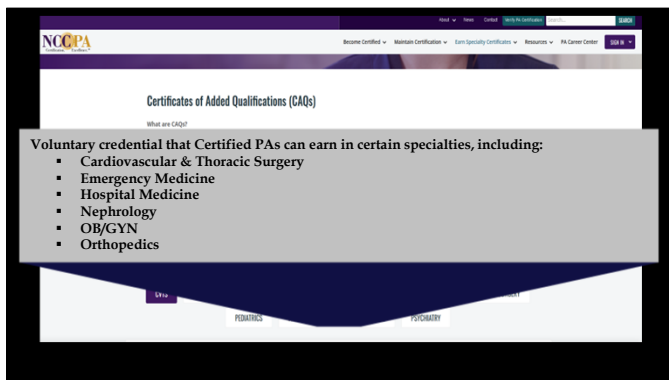
Options for Specialty Privileges

- Require prior experience
- "On-the-job" training with supervising physician
- Require CAQ or postgraduate training

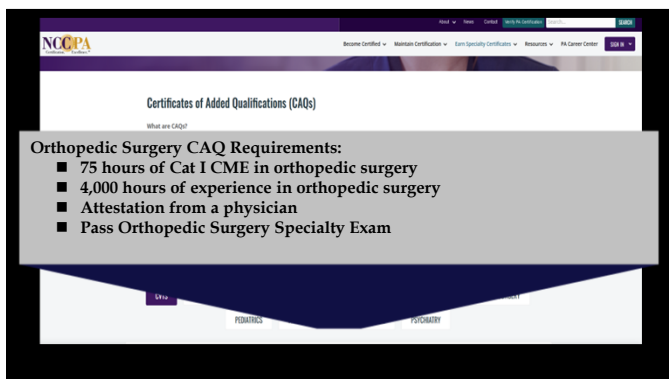
CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

350



351



352

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Options for Specialty Privileges

- Require prior experience
- "On-the-job" training with supervising physician
- Require CAQ or postgraduate training
- Develop internal training program and guidelines for supervising physicians to promote consistency

CREDENTIALING
for
EXCELLENCE

HORTY > SPRINGER

353

Onboarding/Transition for ICU APPs

APPs hired into Intensive Care Services will undergo a detailed and intensive supervisory process described in this document throughout the first year of their employment.

Critical/Intensive Care
Advanced Practice Provider Skills Credentialing and Privileging
Onboarding/Transition to Practice Overview:

credentialing process

Initial Credentialing can be accomplished by:

- ✓ Complete all educational modules
- ✓ Complete required skills lab/simulations (SIM)
- ✓ Complete minimum number of supervised procedures required
- ✓ Completed within the first 6-12 weeks of employment

How this is accomplished:

- At initial employment you will be provided with the list of all required educational modules that need to be completed (6-12 weeks) as well as appropriate case log information
- "See one, do one" → You may initially observe a procedure on the floor. Once educational activities are completed for a specific procedure, you will be able to go to SIM lab and complete simulation

354

Onboarding/Transition for ICU APPs

****If APP has 2+ years of clinical experience as an APP in hospital medicine/critical care, the below onboarding process may be modified at the discretion of the Intensivist Group.**

Critical/Intensive Care
Advanced Practice Provider Skills Credentialing and Privileging
Onboarding/Transition to Practice Overview:

APPs hired into Intensive Care Services, will undergo the detailed and intensive supervisory process, as follows, throughout the first year of their employment. Direct supervision by the medical director and/or attending physician/designee will be required until successful completion of Initial Focused Professional Practice Evaluation (FPPE) along with the completion of the Fundamental Critical Care Course (FCCC) with in the first 6-12 months (dependent on availability of the course). APP will also be

credentialing process

Initial Credentialing can be accomplished by:

- ✓ Complete all educational modules
- ✓ Complete required skills lab/simulations (SIM)
- ✓ Complete minimum number of supervised procedures required
- ✓ Completed within the first 6-12 weeks of employment

How this is accomplished:

- At initial employment you will be provided with the list of all required educational modules that need to be completed (6-12 weeks) as well as appropriate case log information
- "See one, do one" → You may initially observe a procedure on the floor. Once educational activities are completed for a specific procedure, you will be able to go to SIM lab and complete simulation

355

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

**Critical/Intensive Care
Advanced Practice Provider Skills Credentialing and Privileging**

Onboarding/Transition to Practice Overview:
APNs hired into Intensive Care Services, will undergo the detailed and intensive supervisory process, as follows, throughout the first year of their employment. Direct supervision by the medical director.

Initial credentialing is conditioned on completion of the following within the first 6-12 weeks of employment:

- ✓ All required educational modules
- ✓ All required skills lab/simulations (SIM)
- ✓ All required supervised procedures

Initial Credentialing:

- ✓ Complete all educational modules
- ✓ Complete required skills lab/simulations
- ✓ Complete minimum number of supervised procedures required
- ✓ Completed within the first 6-12 weeks of employment

How this is accomplished:

- At initial employment you will be provided with the list of all required educational modules that need to be completed (6-12 weeks) as well as appropriate case-log information
- "See one, do one" → You may initially observe a procedure on the floor. Once educational activities are completed for a specific procedure, you will be able to go to SIM lab and complete simulation

356

Advanced practice professionals who have been granted clinical privileges need to have their performance evaluated through the peer review process.

CREDENTIALING FOR EXCELLENCE **HORTY & SPRINGER**

357

Surgical Assistants

CREDENTIALING FOR EXCELLENCE **HORTY & SPRINGER**

358

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Conditions of Participation

Interpretive Guidelines 42 C.F.R. §482.51(a)(4)

The hospital must specify the surgical privileges for each practitioner that performs surgical tasks. This would include practitioners such as RN first assistants, nurse practitioners, surgical physician assistants and surgical technicians.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

359

DNV

SS.3 PRACTITIONER PRIVILEGES

SR.1 The organization shall have delineated surgical privileges established by the* organization's department of surgery and medical staff and approved by the governing body for each practitioner that performs surgical tasks (see MS.6). This includes practitioners such as MD/DO, dentists, oral surgeons, podiatrists, RN first assistants, nurse practitioners, surgical physician assistants, surgical technicians, etc.

**Effective March 2024*

360

Surgical Tasks

- Opening and closing
- Dissecting tissue
- Removing tissue
- Administering anesthesia
- Implanting devices
- Placing invasive lines

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

361

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Dependent Practitioners

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

362

Dependent Practitioners

- Under the supervision (and direction) of, or in collaboration with a physician
- Do not provide a medical level of care or perform surgical tasks
- Granted a scope of practice

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

363

Dependent Practitioners

- Radiology Assistants
- Private Scrub Technicians
- Perfusionists
- Medical Research Assistants
- Scribes

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

364

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Credentialing Dependent Practitioners

Options:

- Human Resources
- Streamlined Medical Staff process
- Hybrid HR/Medical Staff
- Full Medical Staff Process

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

365

Dealing with Unprofessional Conduct

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

366

No more than 2%-4% of health care
professionals at any level regularly engage in
disruptive behavior.

*Disruptive and Unprofessional Behavior,
Patient Safety Network, September 7, 2019*

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

367

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

In a survey of 840 physicians and physician leaders more than 70% reported that disruptive physician behavior occurs at least once a month, with over 10% reporting that it occurs daily.

Disruptive Physician Behavior, QuantiaMD with the American College of Physician Executives, May 2011

CREDENTIALING
for
EXCELLENCE

HORTY > SPRINGER

368

No Doubt That "Disruptive Conduct" Can Adversely Affect Patient Care

- Accrediting Bodies
- Data
- The Courts

CREDENTIALING
for
EXCELLENCE

HORTY > SPRINGER

369

Issue 40: Behaviors that undermine a culture of safety | Joint Commission



Sentinel Event Alert

January 10, July 19, 2008

July 09, 2008

Behaviors that undermine a culture of safety

Intimidating and disruptive behaviors in health care organizations include reluctance to report errors, interruptions, and impatience with questions, and behaviors that compromise the safety of patients (1, 8, 11, 16) intimidating and disruptive behaviors are tolerated.

Intimidating and disruptive behaviors in health care organizations (1, 2, 7, 8, 9) A survey on intimidation conducted by the Institute for Safe Medication Practices found that 40 percent of clinicians have kept quiet or remained passive during patient care events rather than question a known intimidator (1, 10) While most formal research centers on intimidating and disruptive behaviors among physicians and nurses, there is evidence that these behaviors occur among other health care professionals, such as pharmacists, therapists, and support staff, as well as among administrators (1, 2) Several surveys have found that most care providers have experienced or witnessed intimidating or disruptive behaviors (1, 2, 6, 12, 13) These behaviors are not limited to one gender and occur during interactions within and across disciplines (1, 2, 7) Nor are such behaviors confined to the small number of individuals who habitually exhibit them (2) It is likely that these individuals are not involved in the large majority of episodes of intimidating or disruptive behaviors. It is important that organizations recognize that it is the behaviors that threaten patient safety, irrespective of who engages in them.

370

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Joint Commission L.D.03.01.01

“Leaders create and maintain a culture of safety and quality throughout the hospital.”

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

371

LD.03.01.01

EOP 4

Leaders develop a **code of conduct** that defines acceptable behavior and behaviors that undermine a culture of safety.

EOP 5

Leaders create and implement a **process for managing behaviors** that undermine a culture of safety.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

372

DNV MS.14:

“...unprofessional demeanor and conduct and/or behavior is likely to be detrimental to patient safety or the delivery of quality care or is disruptive to organization operations.”

CREDENTIALING
FOR
EXCELLENCE

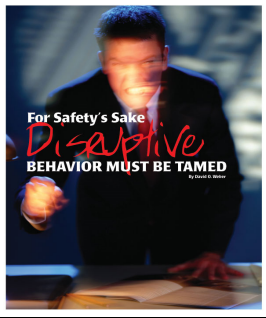
HORTY > SPRINGER

373

Credentialing for Excellence

Las Vegas, NV

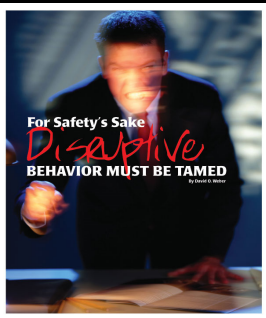
November 14-16, 2024



For Safety's Sake
Disruptive
BEHAVIOR MUST BE TAMED

Institute for Safe Medication Practices surveyed **2,000** health care workers.

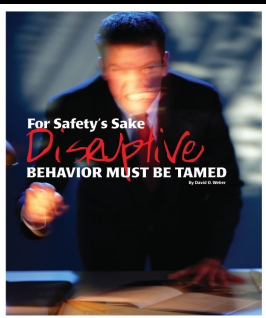
374



For Safety's Sake
Disruptive
BEHAVIOR MUST BE TAMED

50% said they felt pressured into dispensing or giving a drug when they harbored serious doubts about its safety.

375



For Safety's Sake
Disruptive
BEHAVIOR MUST BE TAMED

Two out of five admitted they held their tongues rather than risk setting off a known intimidator.

376

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



7% reported they'd been involved in a medication error during the past year as a direct result.

377



Patients of surgeons who behaved unprofessionally around colleagues tended to have more complications.

JAMA Surgery
June 2019

378

*Leal v. Secretary,
Health and Human Services*

CREDENTIALING FOR EXCELLENCE

HORTY > SPRINGER

379

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

"Dr. Jorge J. Leal, was like Alexander in the classic children's book...

He was having 'a terrible, horrible, no good, very bad day.'"

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

380

"He pitched a fit."

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

381

The Hospital said
Dr. Leal became so
enraged he:

1. broke a telephone
2. shattered the glass on a copy machine
3. shoved a cart into the doors of the operating suite so hard that it damaged one of them

Dr. Leal said he:

1. accidentally broke a telephone when he tripped on its cord
2. closed the lid of a copy machine with 'some force' and the glass cracked
3. moved a cart that was blocking the doors of the operating suite

382

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

The Hospital said Dr. Leal became so enraged he:	Dr. Leal said:
4. threw jelly beans down the hallway in the surgical suite	4. he ate jelly beans, some of which fell on the floor when he tried to throw away flavors he did not like
5. flung a medical chart to the ground	5. when he was handed a chart, some of the loose papers fell to the floor

383

"This urological surgeon, who earns his living wielding a razor-sharp scalpel on some of the most delicate parts of the body, does not have a bad temper - he is just clumsy."

CREDENTIALING OF EXCELLENCE

HORTY > SPRINGER

384

The Hospital **WAS required to report its disciplinary action to the Data Bank, even though its halls were not littered with injured patients."**

CREDENTIALING OF EXCELLENCE

HORTY > SPRINGER

385

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

"The fact that no patients were hit by pieces of the broken telephone, or by the shattered copy machine glass, or by the careening metal cart, or by the flying jelly beans, or by the airborne medical chart, is not dispositive.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

386

"Disruptive and abusive behavior by a physician, even if not resulting in actual or immediate harm to a patient poses a serious threat to patient health or welfare. A physician must work collaboratively with other members of a medical staff in order to provide quality care to patients."

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

387

"A hospital is one place where no one can do his job alone, where better teamwork means better care, and where disruptive behavior threatens lives."

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

388

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Addressing Unprofessional Conduct In The Credentialing Process

- Initial Appointment
- Reappointment

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

389

Consider Conditional Appointment/Reappointment

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

390

Conditional Appointment/Reappointment

- Conditions designed to address concerns and outline expectations for behavior
- Can be short-term
- Monitor for compliance with conditions
- Consequences for violation

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

391

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

**Conditional Appointment/Reappointment
Consequences for Violation**

- Progressive discipline
- Referral to MEC for formal action

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

392

**Conditional
Appointment/Reappointment**

Address in Bylaws/Credentials Policy

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

393

a) Recommendations for reappointment may be subject to an applicant's compliance with specific conditions. These conditions may relate to behavior (e.g., professional code of conduct) or to clinical issues (e.g., general consultation requirements, proctoring, completion of CME requirements). Reappointments may be recommended for periods of less than two [three] years in order to permit closer monitoring of a member's clinical performance, professional conduct, and ongoing qualifications for appointment and privileges.

Reappointment may be recommended for a period of less than two [three] years in order to permit closer monitoring of a member's clinical performance, professional conduct, and ongoing qualifications for appointment and privileges.

394

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Based on a thorough review of concerns that were raised last year about your behavior, the MEC recommended that you be reappointed, on a conditional basis, for one year, with the clinical privileges requested.

395

You must treat all individuals within the Medical Center courteously, respectfully, and with dignity.

396

You must refrain from making humiliating, degrading or demeaning comments (including comments that might be construed as being ethnically insensitive) regarding any patient, nurse, physician or other Hospital personnel.

397

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

★★★★★
FIVE STAR HEALTH SYSTEM

You must use the medical record only to document the clinical aspects pertaining to patient care. You must not make entries in the medical record that relate to the conduct of others, which impugn the quality of care at the Hospital, or which demean, disparage, embarrass or intimidate any patient, nurse, physician, or other Hospital personnel.

emergency department, intensive care unit, and other health
1 © HartySpringer Seminars

398

★★★★★
FIVE STAR HEALTH SYSTEM

You must not yell or raise your voice when speaking with any patient, family member, nurse, physician, or other Hospital personnel.

SALE CERTIFIED MAIL - RETURN RECEIPT REQUESTED
1 © HartySpringer Seminars

399

★★★★★
FIVE STAR HEALTH SYSTEM

You must refrain from publicly criticizing or making derogatory comments regarding the quality of care provided by the Medical Center, any physicians on the Medical Staff, nurses, or any other Medical Center personnel. Any concerns that you have in this regard must be addressed as specified below.

1 © HartySpringer Seminars

400

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

**★★★★★
FIVE STAR HEALTH SYSTEM**

If you have any concerns with the manner in which one of your patients is being treated, or with the behavior of any nurse, other health care professional, or physician, you are directed to address that matter privately and professionally through a confidential report to the Chief Medical Officer or the Chair of the Department of Medicine.

© HartySpringer Seminars

401

**★★★★★
FIVE STAR HEALTH SYSTEM**

You must not retaliate in any way against any individual who may report a quality or behavior concern about you.

(118) You must not retaliate in any way against any individual who may report a quality or behavior concern about you.
(119) You must not retaliate in any way against any individual who may report a quality or behavior concern about you.
(120) Like all other Medical Staff members, you must comply with the expectations for conduct set forth in the Medical Staff Professionalism Policy.

© HartySpringer Seminars

402

**★★★★★
FIVE STAR HEALTH SYSTEM**

If there are any additional reports of unprofessional conduct, the concern will be presented to you in writing and you will be invited to meet with the Leadership Council to provide your input, or to provide your input in writing.

(121) If there are any additional reports of unprofessional conduct, the concern will be presented to you in writing and you will be invited to meet with the Leadership Council to provide your input, or to provide your input in writing.
(122) Like all other Medical Staff members, you must comply with the expectations for conduct set forth in the Medical Staff Professionalism Policy.

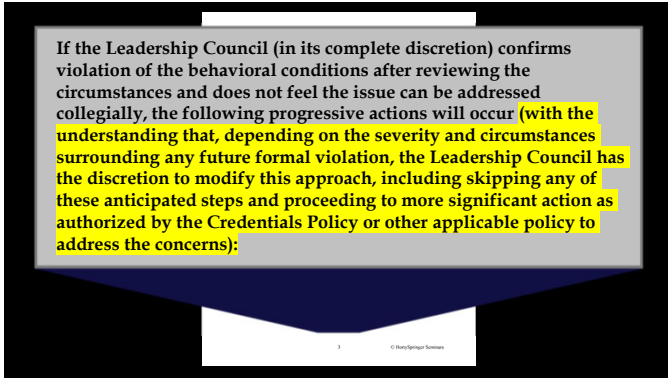
© HartySpringer Seminars

403

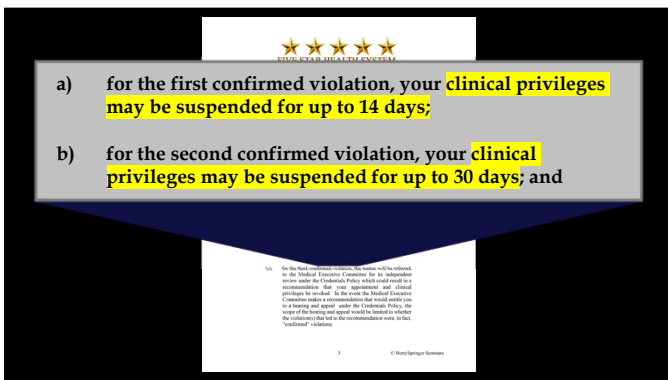
Credentialing for Excellence

Las Vegas, NV

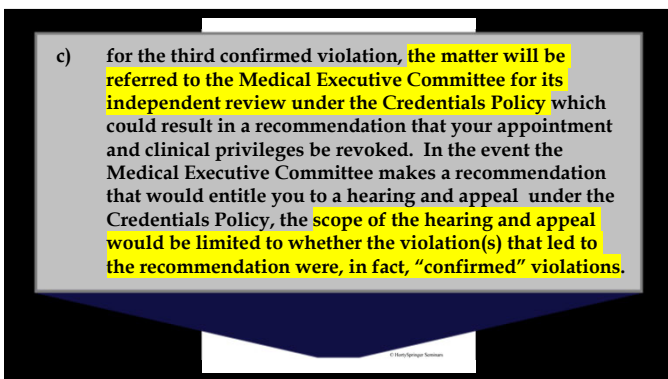
November 14-16, 2024



404



405

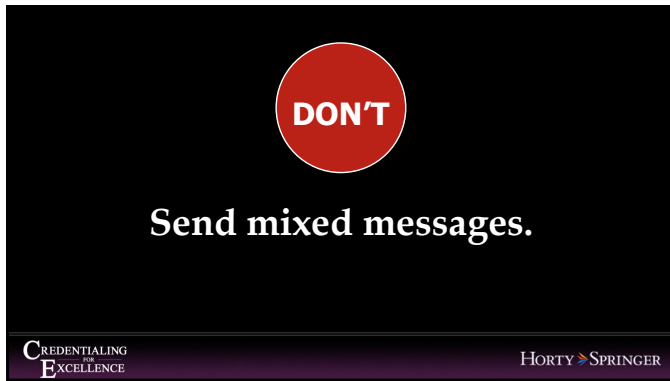


406

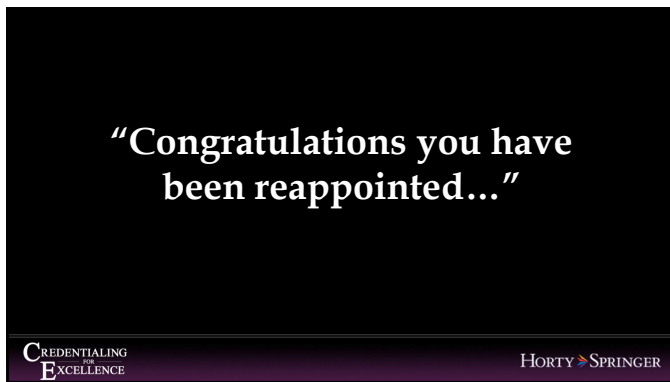
Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



407



408



409

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

DO

**Adopt a Professionalism Policy
(aka Code of Conduct Policy)**

CREDENTIALING FOR EXCELLENCE | HORTY > SPRINGER

410

Professionalism Policy:

- Identifies acceptable and unacceptable behavior
- Defines review process

CREDENTIALING FOR EXCELLENCE | HORTY > SPRINGER

411

Professionalism Policy

```
graph TD; A[Reported Concern re: Conduct] --> B[PPE Specialists]; B --> C[Leadership Council]; C --> D[MEC];
```

- Log-in
- Triage by CMO & MS President/ Department Chair
- Progressive Collegial & Educational Steps including PIPs for Conduct
- Disciplinary Action if Unsuccessful

412

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

DO

Respond to those who report:

- **Thank them/inform concerns being addressed**
- **Process confidential - can't share details**
- **Report any retaliation**

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

413

DO

- **Inform Practitioner of concerns early on and again after further review has been conducted; and**
- **Remind about confidentiality and no retaliation**

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

414

DON'T

Share the identity of the individual reporting the concern.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

415

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

DO

Gather facts

- Review documentation
- Interview witness or others with information
- Review file

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

416

DO

Seek Practitioner's Input Before Act

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

417

DO

Use Progressive Steps to address concerns early.

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

418

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Progressive steps include:

- Informal discussions/mentoring
- Educational letter
- Collegial counseling
- Performance Improvement Plan for Conduct
- Refer to MEC

CREDENTIALING
OF
EXCELLENCE

HORTY > SPRINGER

419

Performance Improvement Plan for Conduct

Elements to consider:

- Personal "Code of Conduct" (*outlines expectations for conduct going forward and consequences for violation*)
- Behavioral Modification Course
- Meeting with Designated Leaders
- Periodic Meetings with Medical Staff Leaders/Mentors
- Review of Literature Regarding Impact of Disruptive Behavior

CREDENTIALING
OF
EXCELLENCE

HORTY > SPRINGER

420

DO

Stay focused on the inappropriate behavior, not its cause.

CREDENTIALING
OF
EXCELLENCE

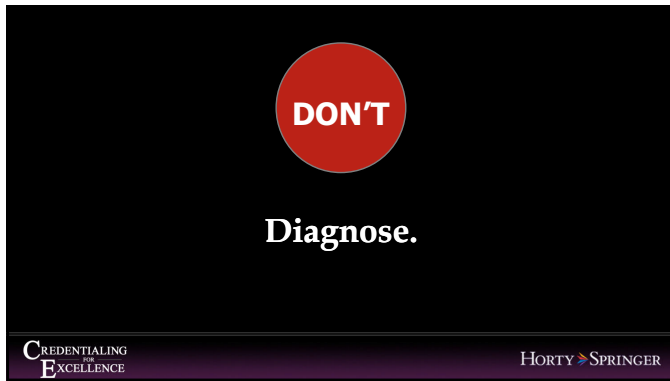
HORTY > SPRINGER

421

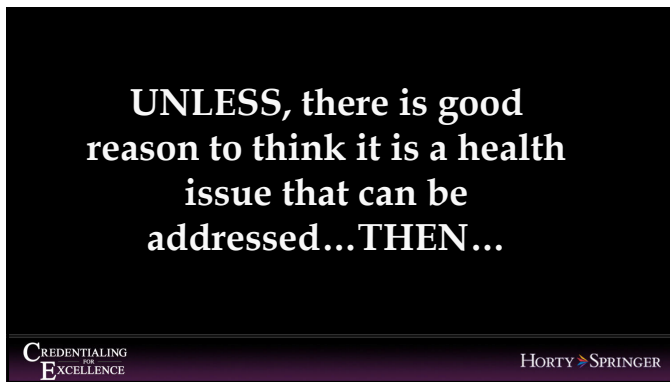
Credentialing for Excellence

Las Vegas, NV

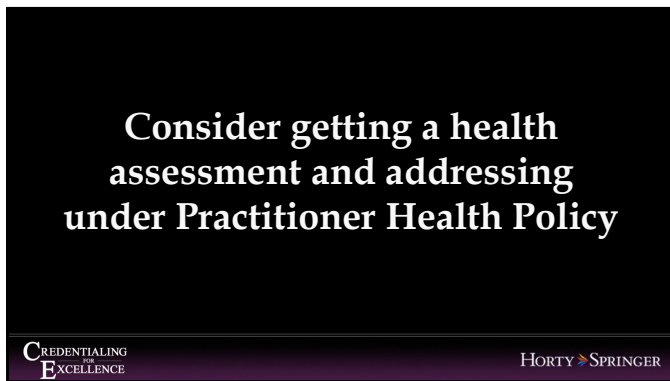
November 14-16, 2024



422



423



424

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Practitioner Health




Helping providers. Protecting patients.

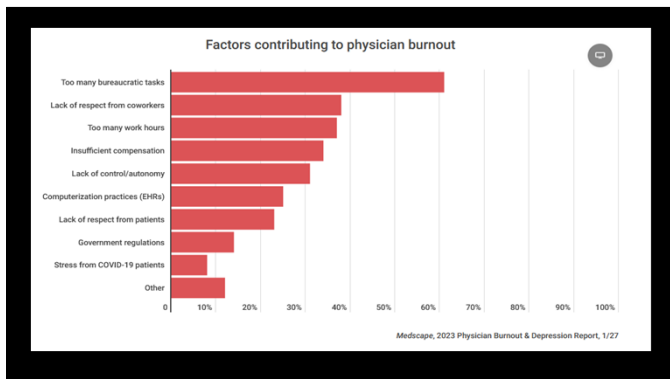
425

**Physician Burnout:
The Silent Scream**

53% of providers surveyed report being burned out.



426

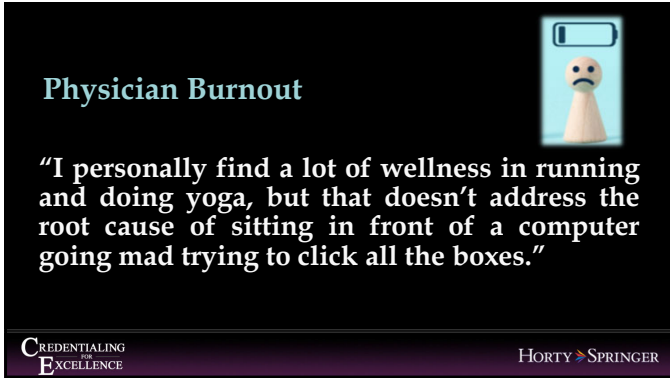


427

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024




Physician Burnout

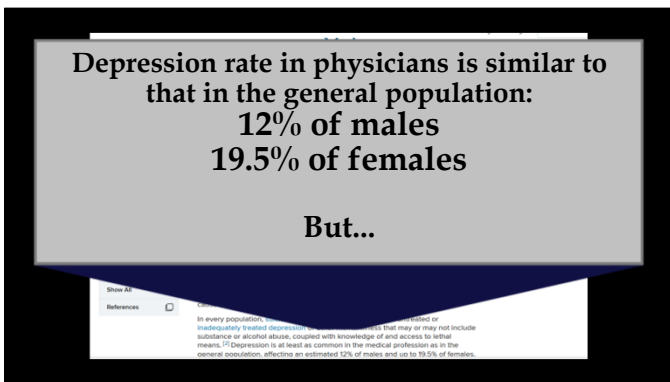
"I personally find a lot of wellness in running and doing yoga, but that doesn't address the root cause of sitting in front of a computer going mad trying to click all the boxes."

CRECREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER



428



Depression rate in physicians is similar to that in the general population:

- 12% of males**
- 19.5% of females**

But...

In every population, depression is underreported or inadequately treated depression, especially in those with knowledge of and access to verbal means. Depression is at least as common in the medical profession as in the general population, affecting an estimated 12% of males and up to 19.5% of females.

429



Physician Suicide

The prevalence of depression in medical populations is probably underestimated.

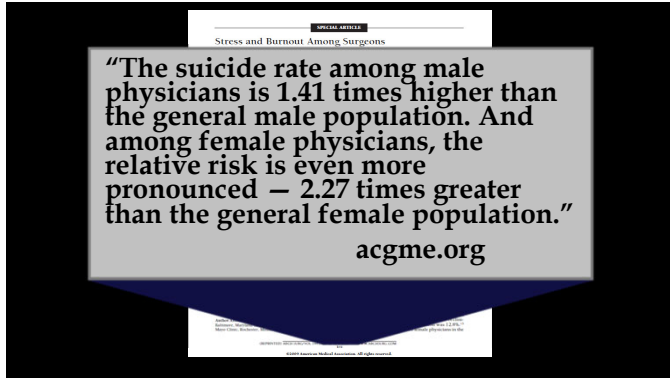
In every population, suicide is almost invariably the result of untreated or inadequately treated depression or other mental illness that may or may not include substance or alcohol abuse, coupled with knowledge of and access to verbal means. Depression is at least as common in the medical profession as in the general population, affecting an estimated 12% of males and up to 19.5% of females.

430

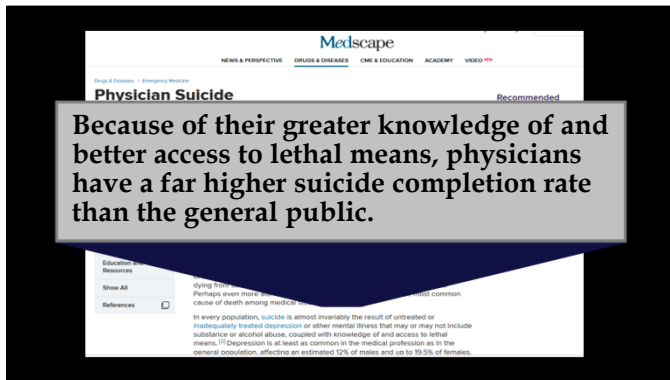
Credentialing for Excellence

Las Vegas, NV

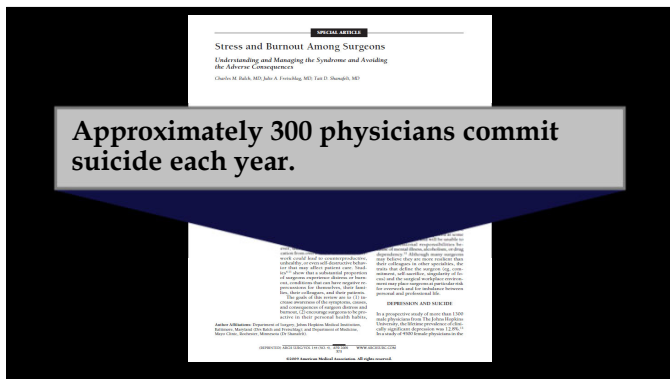
November 14-16, 2024



431



432

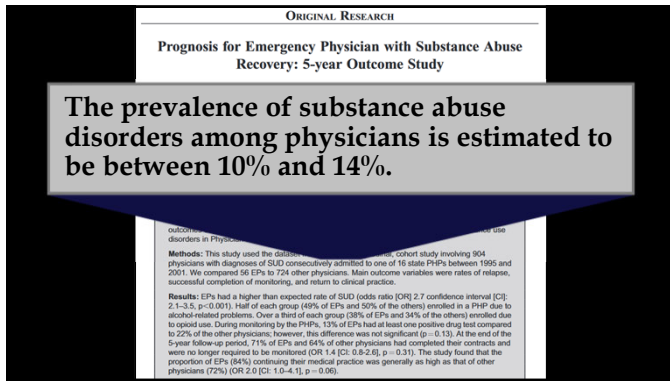


433

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



434



435

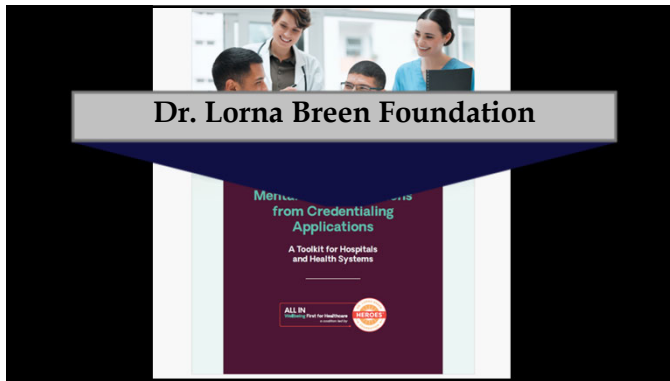


436

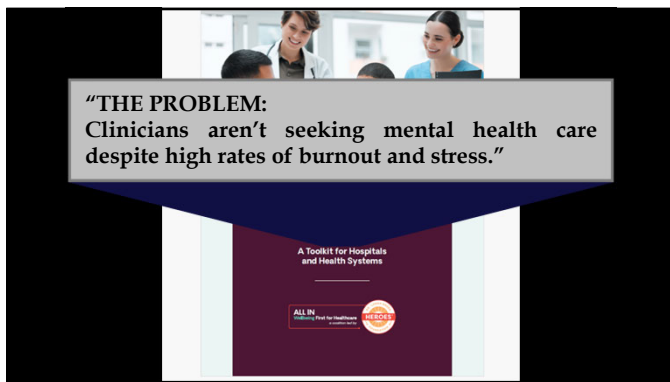
Credentialing for Excellence

Las Vegas, NV

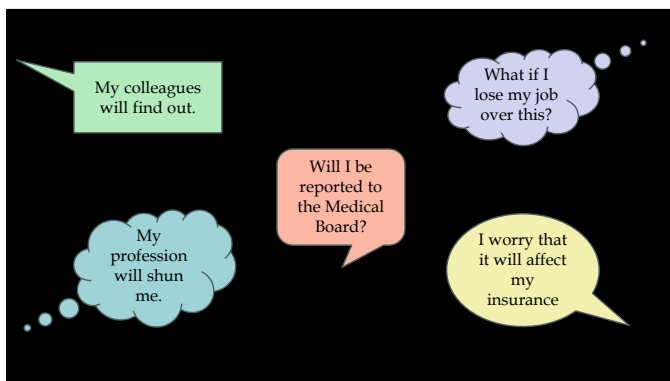
November 14-16, 2024



437



438



439

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

What has changed?

- State licensure bodies are reassessing their applications
- The Joint Commission had revised its standards
- Hospitals are reassessing the questions they ask of applicants

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

440

Credentialing Challenges

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

441

It's not a question of *if* you'll
face a practitioner health
issue...



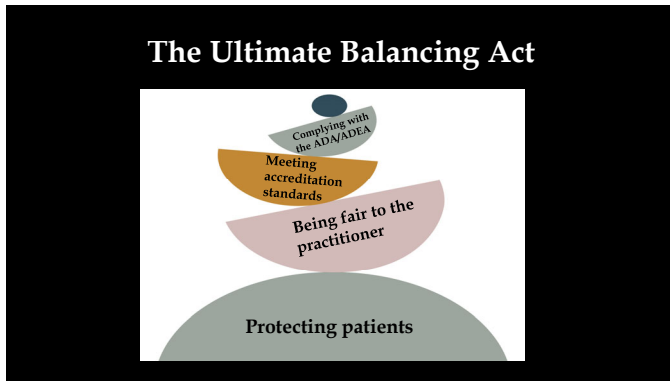
it's a question
of *when*.

442

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



443



444



445

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Credentialing Concerns?

446

Credentialing Concerns?

- Signed employment contract before credentialing started
- 4-month LOA
- Lukewarm reference
- DUI
- Misstatement on application

447

Health Concerns?

448

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Health Concerns?

- 4-month LOA
- Lukewarm reference
- DUI
- Misstatement on application

449

Do the health concerns
create legal concerns?

450

Americans with
Disabilities
Act



451

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

ADA protects **qualified individuals** who:

- Have physical or mental impairment
- Have record of impairment
- Are perceived as having an impairment

452

ADA prohibits pre-offer
"medical examinations and inquiries."

453

Medical Examinations and Inquiries

- Physical examinations
- TB tests
- Other medical examinations or inquiries that are likely to elicit information about a disability

454

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Post-Offer of Employment

After a conditional offer is made, the ADA allows disability-related inquiries and medical examinations so long as they apply to all applicants in the same job category.

CREDENTIALING
OF
EXCELLENCE

HORTY > SPRINGER

455

The Joint Commission

MS.06.01.05

Element of Performance 6

An applicant submits a statement that no health problems exist that could affect his or her ability to perform the privileges requested.*

*Documentation regarding an applicant's health status and his or her ability to practice *should be confirmed.*

CREDENTIALING
OF
EXCELLENCE

HORTY > SPRINGER

456

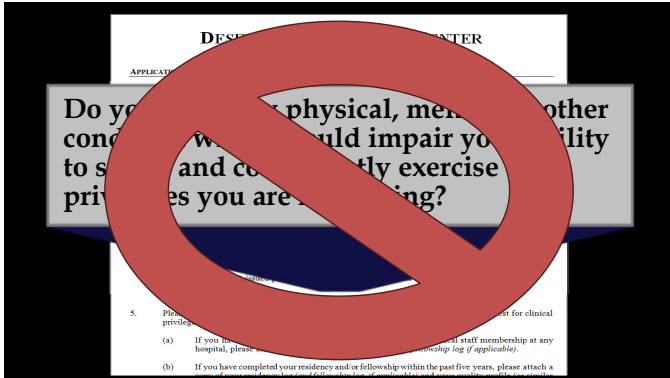
What questions can we ask Dr. Natale without violating the ADA?

457

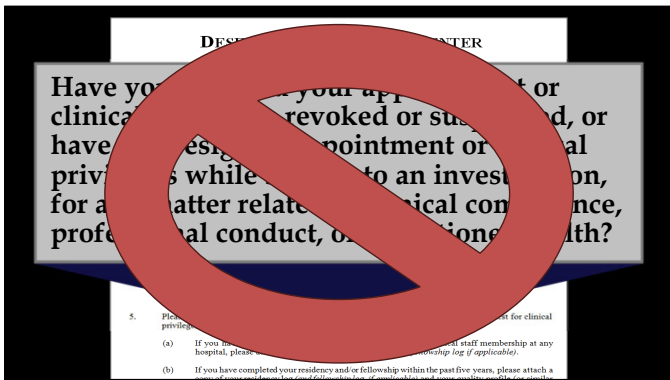
Credentialing for Excellence

Las Vegas, NV

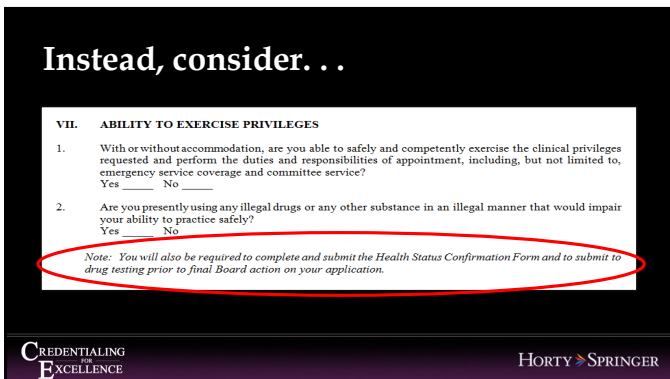
November 14-16, 2024



458



459



460

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Can we ask about...


- Four-month LOA during training?
- Other interruptions in training?
- Hospitalizations?
- Lukewarm peer reference?
- Whether she treated patients while under the influence?

461

Can we ask about...

- Diagnosis of and treatment for alcohol use disorder?
- DUI?
- Participation in State Health Program?

462


CONFIDENTIAL & PRIVILEGED
PEER REVIEW

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

1. Fellowship Training Program

We noted that you took a four-month LOA during your fellowship training program. Please provide a detailed explanation.

While we received your peer evaluation, it is late since of these questions were raised about your practice. The peer evaluation forms are a very important part of the credentialing process because they assist in evaluating an applicant's ability with respect to the six core competencies identified by the ACCME. As such, please explain why you think concerns would be raised about you to these items.

3. DEI

We learned that you had been charged and convicted with a DEI. You failed to disclose this on your application. The Credentialing Policy expressly states that any engagement or entrance to practice is contingent upon the requirements. Please provide a copy of the criminal complaint or charges and any related documentation regarding the resolution of this matter.

4. Health Status

An applicant must have their physical and mental health in order to practice the job they applied for. Therefore, it may be necessary for you to provide additional information related to your current health status as well as your management of any past health issues. You are not required to provide

463

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

2. Peer Evaluation

Your peer evaluations raised about your practice. These are a very important part of the credentialing process because they assist us in evaluating core competencies identified by the ACGME. Please explain why you think concerns would be raised about you in these areas.

3. DUI

We learned that you had been charged and convicted with a DUI. You failed to disclose this on your application. The Credentials Policy expressly states that any misstatements or omissions is grounds to stop processing the application. Please provide a copy of the criminal complaint or charges and any related documentation regarding the resolution of this matter.

4. Health Status

As an applicant you must "have the physical and mental health to exercise the privileges granted." Therefore, it may be necessary for you to provide additional information related to your current health status as well as your management of any past health issues. You are not required to provide

464

3. DUI

We learned that you have been charged with a DUI. You failed to disclose this on your application. The Credentials Policy expressly states that any misstatements are grounds to stop processing the application. Please explain your answer and provide a copy of the criminal complaint or charges and any related documentation regarding this matter.

4. Health Status

As an applicant you must "have the physical and mental health to exercise the privileges granted." Therefore, it may be necessary for you to provide additional information related to your current health status as well as your management of any past health issues. You are not required to provide

465

4. Health Status

As an applicant you must "have the physical and mental health to exercise the privileges granted." You are not required to provide any information about health status at this point in time. Any consideration of your health status will be deferred until after a determination is made regarding whether you are otherwise qualified for appointment and clinical privileges to practice at the Hospital.

4. Health Status

As an applicant you must "have the physical and mental health to exercise the privileges granted." Therefore, it may be necessary for you to provide additional information related to your current health status as well as your management of any past health issues. You are not required to provide

466

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

A slide with a black background. On the left, the text "What if a Health Issue Is Disclosed?" is written in white. On the right, there is a circular graphic containing various white icons representing different health conditions and disabilities, such as a person with a cane, a person with a hearing aid, a person with a prosthetic arm, and a person with a brain scan. At the bottom left, it says "CREDENTIALING FOR EXCELLENCE" and at the bottom right, "HORTY > SPRINGER".

What if a Health Issue Is Disclosed?

CREDENTIALING FOR EXCELLENCE

HORTY > SPRINGER

467

A slide with a black background. On the left is a portrait of a woman in a white lab coat with a stethoscope. To the right of the portrait is a list of bullet points. The text "Redo -- Nikki Natale, M.D." is at the top.

Redo -- Nikki Natale, M.D.

- No qualified reference
- No DUI
- No misrepresentation
- But disclosure that LOA was to address substance use disorder

468

A slide with a black background. At the top, there are five gold stars and the text "FIVE STAR HEALTH SYSTEM". Below that, the word "CONFIDENTIAL" is written in small letters. A large white speech bubble contains the text: "The Credentials Committee has specifically determined that you are otherwise qualified for appointment and clinical privileges." Below the speech bubble, there is a smaller white box with text that is partially obscured but includes the words "Your application for appointment to practice surgery has been considered. The Credentials Committee has specifically determined that you are otherwise qualified for appointment and clinical privileges. This means that a determination has been made that you satisfy established threshold eligibility criteria and you have demonstrated the requisite training, experience, and current competence to exercise the privileges requested."

FIVE STAR HEALTH SYSTEM

CONFIDENTIAL

The Credentials Committee has specifically determined that you are otherwise qualified for appointment and clinical privileges.

Your application for appointment to practice surgery has been considered. The Credentials Committee has specifically determined that you are otherwise qualified for appointment and clinical privileges. This means that a determination has been made that you satisfy established threshold eligibility criteria and you have demonstrated the requisite training, experience, and current competence to exercise the privileges requested.

469

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

FIVE STAR HEALTH SYSTEM

CONFIDENTIAL

The Credentials Committee now wants to follow up on your disclosure regarding your alcohol-related LOA to assess whether you are able to safely and competently practice.

Your appointment and clinical privileges to practice... The Credentials Committee has specifically determined that you are otherwise qualified for appointment and clinical privileges. This means that a determination has been made that you satisfy established threshold eligibility criteria and you have demonstrated the requisite training, experience, and current competence to exercise the privileges requested.

470

FIVE STAR HEALTH SYSTEM

CONFIDENTIAL

Please confirm whether as a part of this assessment and treatment, you were diagnosed as suffering from alcohol use disorder or other drug-related addiction. If so, please confirm the diagnosis and the recommended treatment.

Your appointment and clinical privileges to practice... The Credentials Committee has specifically determined that you are otherwise qualified for appointment and clinical privileges. This means that a determination has been made that you satisfy established threshold eligibility criteria and you have demonstrated the requisite training, experience, and current competence to exercise the privileges requested.

471

FIVE STAR HEALTH SYSTEM

CONFIDENTIAL
PEER REVIEW

VIA E-MAIL
AND FEDERAL EXPRESS

Please also confirm whether you followed through with the recommended treatment.

Your appointment and clinical privileges to practice... The Credentials Committee has specifically determined that you are otherwise qualified for appointment and clinical privileges. This means that a determination has been made that you satisfy established threshold eligibility criteria and you have demonstrated the requisite training, experience, and current competence to exercise the privileges requested.

472

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

After determining that the applicant is otherwise qualified, the Credentials Committee could also require a fitness for practice evaluation.

473

Conditional appointment is an option:

- Appropriate coverage
- Ongoing monitoring
- Sporadic alcohol or drug screens
- Compliance with Physicians Health Program
- Periodic reports of health status
- Attendance at AA/NA meetings

474

Be careful to review allegations of impairment through the Practitioner Health policy.



475

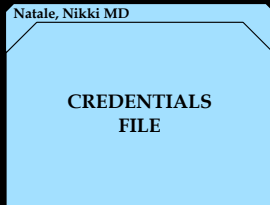
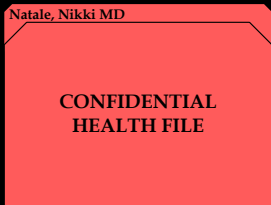
Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Documenting Practitioner Health

476



477

Documentation:

- "Confidential Health File" (separate from Credentials File)
- At reappointment:
 - Medical Staff Office contacts Leadership Council
 - Leadership Council prepares confidential summary health report for the Credentials Committee
 - Leadership Council report includes recommendation regarding ability to safely exercise clinical privileges

478

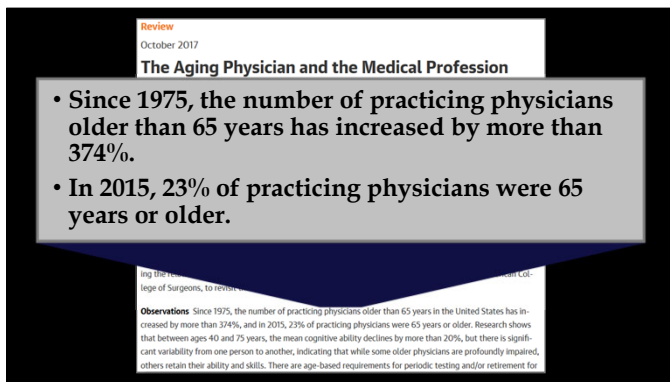
Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



479



480



481

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

"For surgeons older than 60 years...significant differences in mortality rates were largely restricted to those with low procedure volumes... Among high-volume surgeons, however, there were no significant differences in mortality rates...."

— *Annals of Surgery*,
2006; 244(3):353-622

CREDENTIALING
OF
EXCELLENCE

HORTY > SPRINGER

482

Age Discrimination in Employment Act of 1967 (ADEA)

- Applies to "employees" (though some courts are interpreting broadly) over age of 40
- Prohibits employment action based on age
- Applies to mandatory retirement, mandatory testing, etc.

CREDENTIALING
OF
EXCELLENCE

HORTY > SPRINGER

483

Medical Staff Bylaws

4.A.5. Clinical Privileges after Age 65:

- (a) Individuals who desire to exercise clinical privileges after the age of 65 must apply for reappointment on a yearly basis.
- (b) As a part of the annual reappointment process, these members are required to have a physical and mental health assessment performed by a physician who is acceptable to the Credentials Committee....

484

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



485



486



487

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Because of concerns that self-reporting and peer reporting of observed decline in performance would not sufficiently protect patient safety, Hartford Healthcare developed a proactive approach to screen for signs of cognitive decline.

NEJM Catalyst | Innovations in Care Delivery

ARTICLE

staff leader assessment and cognitive screening of all clinicians at the age of 70. A 14-4% incidence of cognitive impairment was observed. This has resulted in the adoption of a collegial approach to assisting, in a humane way, physicians who may have evidence of cognitive decline, yet ensuring that patient safety remains paramount.

488

In all, 13 (out of 118) were identified as meeting the criteria for Mild Cognitive Impairment.

NEJM Catalyst | Innovations in Care Delivery

ARTICLE

productive organizations and physician groups. These organizations have begun to introduce age-based screening for cognitive and physical decline. Medical staff leaders from six hospitals in an integrated delivery system instituted a program of provider assessment and cognitive screening of all clinicians at the age of 70. A 14-4% incidence of cognitive impairment was observed. This has resulted in the adoption of a collegial approach to assisting, in a humane way, physicians who may have evidence of cognitive decline, yet ensuring that patient safety remains paramount.

489

But...

CREDENTIALING FOR EXCELLENCE

HORTY & SPRINGER

490

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

EEOC v. Yale New Haven Hospital
Filed February 11, 2020

Allegation – Yale New Haven violated the ADEA by adopting the Policy and applying it to physicians over the age of 70.

practices. Specifically, the EEOC alleges that Yale New Haven Hospital, Inc. (“YH”) has adopted and implemented what it calls a “Late Career Practitioner Policy” (“the Policy”), that requires any individual age 70 and older (“age 70+”) who applies for, or seeks

491

U.S. Equal Employment Opportunity Commission

January 7, 2021

The EEOC investigation determined that Hennepin Healthcare System’s “Late Career Practitioner Policy” discriminated against practitioners age 70 and older.

The EEOC investigation determined that Hennepin Healthcare System (“HHS”) discriminated against practitioners age 70 and older by requiring them to take additional examinations, in violation of the ADEA and ADA, with administrative remedies exhausted on April 15 and agreed to resolve the investigations through EEOC’s conciliation process.

The resolution provides monetary relief to the affected individuals identified by the EEOC, reimbursement for out-of-pocket costs associated with the exams not covered by insurance, and a commitment from HHS that it will not require employees to undergo medical inquiries that violate the ADEA or ADA.

The company will also provide periodic reporting to the EEOC on the formal complaints related to age

492

COURT & JUSTICE

Jury slaps Cleveland Clinic

Jurors awarded Dr. Katz, a 77-year-old ENT physician, \$1.95 million in compensatory damages, \$325,000 in emotional distress damages and \$26.375 million in punitive damages to send a message to the Clinic after it found that the hospital violated laws against age discrimination and retaliation.

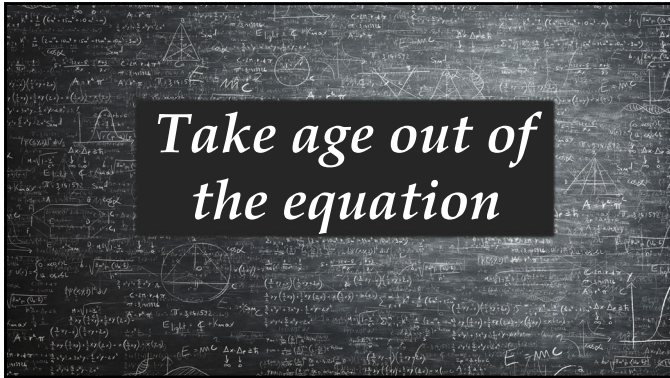
former Cleveland Clinic physician, Dr. Katz, who filed a lawsuit against the hospital for age discrimination and retaliation. The jury awarded Dr. Katz \$1.95 million in compensatory damages, \$325,000 in emotional distress damages, and \$26.375 million in punitive damages. The jury also awarded Dr. Katz \$100,000 in attorney’s fees. The jury found that the hospital violated laws against age discrimination and retaliation.

493

Credentialing for Excellence





Las Vegas, NV

November 14-16, 2024



494

Instead, consider...

-  Enhancing your peer review process
-  Implementing Comprehensive examinations for all at initial appointment and reappointment
-  Requiring 360 evaluations for all practitioners
-  Reducing risk of ADEA violation

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

495

Bona Fide Occupational Qualification ("BFOQ") Exception

Employer can take otherwise prohibited actions where age is a BFOQ.

"Extremely narrow exception to the ADEA's general prohibition of age discrimination in employment."

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

496

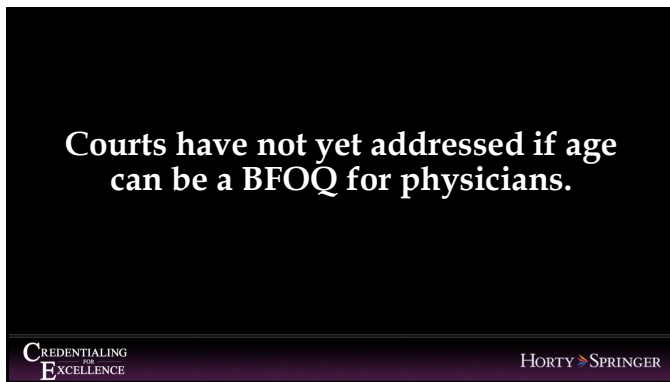
Credentialing for Excellence

Las Vegas, NV

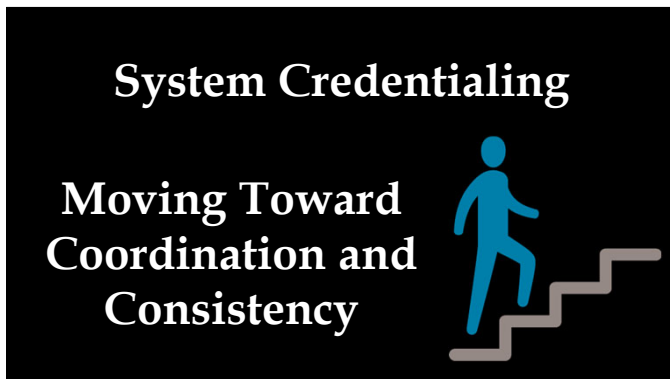
November 14-16, 2024



497



498



499

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

1990s-early 2000s

Many hospital systems tried to coordinate medical staff functions, including credentialing.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

500

In 2012, CMS had said “Each hospital must have a medical staff.”

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

501

In 2014, CMS revisited the issue and adopted new Conditions of Participation, which allowed for greater flexibility, including unification.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

502

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Let form follow function!

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

503

Methods for Achieving Coordination and Consistency:

- System Application Form
- System CVO
- System Credentials Policy
- System Credentials Committee
- Information Sharing Policy
- Good Bylaws/Credentials Policy Language

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

504

System Application Form

Each System Entity requests and obtains the same information from applicants

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

505

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

System CVO

- Primary source verification and collection information from references and third parties only done once.
- Each System Entity receives the same information from primary sources, references and third parties.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

506

System Credentials Policy

- One Credentials Policy for each System Hospital that is adopted by each Medical Staff and amended by agreement of each Medical Executive Committee.
- Each System Hospital has the same standards, criteria and processes in place when evaluating applicants and members qualifications for initial and ongoing membership and clinical privileges.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

507

System Credentials Committee

One Credentials Committee making preliminary recommendations on applicants for each of the System Hospitals

BUT.....

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

508

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Each Medical Staff within System
must have its own separate
Medical Executive Committee

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

509



A "problem" physician applies to Hospital A.
Significant red flags are spotted and he is
sent a letter asking for more information.
After several more letters, the physician
withdraws his application and goes away...

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

510



...but not very far.

He meanders down the road to Hospital B, our
sister hospital, and asks for an application.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

511

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Oops, I forgot to mention that this physician had also applied at Hospital C and was granted appointment and privileges shortly after he withdrew his application at Hospital A?

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

512

System Information Sharing Policy



- Outlines a process for affiliated entities to share information about practitioners in a legally safe and protected manner.
- Defines what information should be "pushed out" to affiliated entities.
- Defines how information should be shared when requested by affiliated entities.

CREDENTIALING
FOR
EXCELLENCE

HORTY > SPRINGER

513



An advanced practice clinician is granted clinical privileges at Hospitals A, B and C.

CREDENTIALING
FOR
EXCELLENCE


HORTY > SPRINGER

514

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



Quality concerns are raised about a staff member at Hospital A. The Peer Review Committee implements a Performance Improvement Plan.

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

515




This Can Be Addressed in Your Bylaws/Credentials Policy!

CREDENTIALING FOR EXCELLENCE HORTY > SPRINGER

516

6.1 Each System Hospital will share information regarding the implementation or occurrence of any of the following with all other System Hospitals at which an individual maintains appointment, clinical privileges, or any other permission to care for patients:



- a) automatic relinquishment or resignation of appointment and clinical privileges;
- b) voluntary agreement to modify clinical privileges or refrain from exercising some, or all, clinical privileges;
- c) denial, suspension, revocation or termination of appointment and/or clinical privileges; and
- d) Performance Improvement Plan.

on all ins for

517

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

6.H. ACTIONS OCCURRING AT OTHER HOSPITALS AND FACILITIES WITHIN THE SYSTEM

(1) Each hospital and health care facility within the System will share information

Upon receipt of notice that any of these actions have occurred at, or been implemented by, any hospital within the System, that action will automatically and immediately take effect at the System Hospital receiving the notice.

(d)

(2) Upon receipt of notice that any of the actions set forth above have occurred at, or been implemented by, any hospital or facility within the System, that action will automatically and immediately take effect at the Medical Center.

518

The MEC may recommend to the Board waiving the automatic effectiveness of any action at the receiving System Hospital. Waivers are within the discretion of the Board and are final. They will be granted only as follows:

- a) Based on a finding that the granting of a waiver will not affect patient safety, quality of care or Hospital operations; and
- b) After a full review of the specific circumstances and documents from the System Hospital where the action occurred. The burden is on the affected Practitioner to provide evidence showing that a waiver is appropriate.

519

And There Is More Good Language!

CREDENTIALING FOR EXCELLENCE

HORTY > SPRINGER

520

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



Medical Staff Leadership has tried a wide variety of collegial efforts with a staff member about whom there are quality concerns. None have worked.

CREDENTIALING
OF
EXCELLENCE

HORTY > SPRINGER

521



The physician practices primarily at Hospital A, but also has privileges at Hospitals B and C. The MEC at Hospital A commences an investigation.

CREDENTIALING
OF
EXCELLENCE

HORTY > SPRINGER

522



Following the investigation, the MEC of Hospital A recommends revocation of appointment and privileges. After a hearing and appeal, this recommendation is upheld by the Board.

CREDENTIALING
OF
EXCELLENCE

HORTY > SPRINGER

523

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024

Threshold Eligibility Criteria:
To be eligible for appointment or reappointment and/or clinical privileges, an applicant must:

(f) have never had appointment or privileges denied, suspended (for more than 30 days) revoked, or terminated by any health care facility for reasons related to clinical competence or professional conduct

524

6.G.2. Failure to Satisfy Threshold Eligibility Criteria:

Failure to Satisfy Threshold Eligibility Criteria:
Failure of an individual to continuously evidence satisfaction of the threshold eligibility criteria will result in automatic relinquishment.

(a) Medicare, Medicaid, or other governmental or private third-party payer fraud or program abuse; (b) controlled substances; (c) illegal drugs; (d) violent act; (e) sexual misconduct; (f) moral turpitude; or (g) child or elder abuse.

525

So Long, Farewell...

CREDENTIALING FOR EXCELLENCE

HORTY & SPRINGER

526

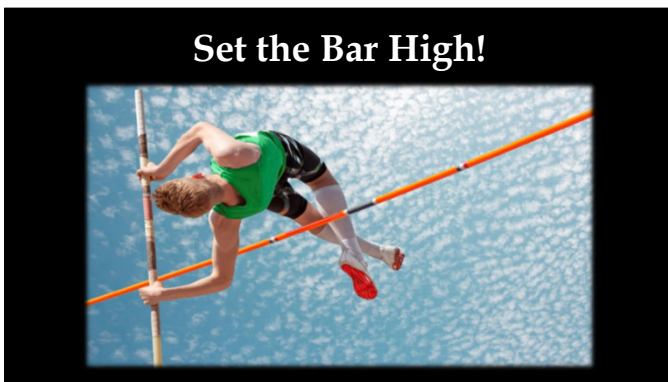
Credentialing for Excellence

Las Vegas, NV

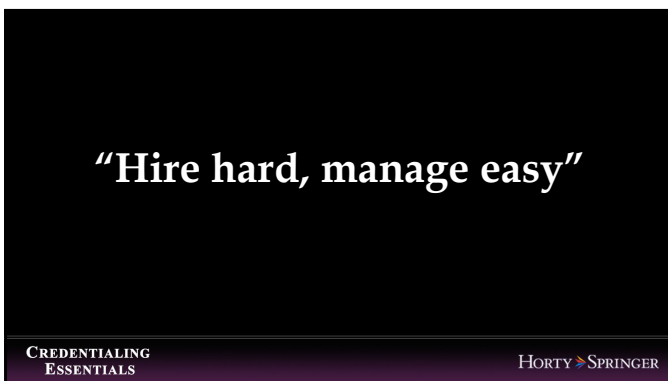
November 14-16, 2024



527



528



529

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



530



531



532

Credentialing for Excellence

Las Vegas, NV

November 14-16, 2024



533



534



535
