Statement of Policy
It is the policy of Central City Concern Health Services to establish an efficient and consistent credentialing method to meet applicable regulating standards when processing applications for Licensed or Certified Health Care Practitioners, as well as non-licensed mental health clinical staff.¹

Scope
The credentialing policy will be uniformly applied to all initial applications for appointment and reapplications with CCC Health Services.

Administration and Oversight
This policy will be reviewed biennially by the CCC Board of Directors, Senior Medical Director, and the Health Services Compliance Officer, and revised as needed.

The Human Resources and Billing & Credentialing departments are jointly responsible for implementing and administering this policy in collaboration with CCC Medical Directors as indicated.

The Human Resources department is responsible for managing and coordinating the maintenance and distribution of this policy.

Procedures: Primary and Secondary Source Verification

1. It is the responsibility of the Human Resources department to conduct primary and secondary source verifications of licenses, certifications, and education required for employment.

2. Upon receipt of a complete application, the Human Resources department will seek to verify, collect, and document the applicant’s credentials prior to employment commencing.

3. As part of the pre-employment screening process, Human Resources will gather the following:
   a. I-9 identification;
   b. Tuberculosis test results;
   c. Urinanalysis test results, per the Drug- and Alcohol-Free Workplace Policy;
   d.Signed packet forms, included signed job description;
   e. Documentation to support verification of ability to work in the United States;
   f. Documentation to support verification of licensure, certifications, and education; and
   g. Documentation to support background checks, including criminal history checks as described in the Employee Background Check Policy.

4. Regarding (f) above, a photocopy of the applicant’s credential is not sufficient evidence for confirming the credential. Confirmation of education and/or training must be received from one of the following primary sources, in descending order of preference:

¹ OAR 309-032-1520(1); ORS 67.100; OAR 851-031-0006
a. Confirmation from Pacific Screening, with a status of verified. A report with a status of verified with discrepancies may be accepted so long as the discrepancies are not substantive;
b. Confirmation by the state licensing agency, if the state licensing agency performs primary source verification of professional school training as outlined in this policy.
c. Confirmation from a specialty board or registry, if the board or registry performs primary source verification of education and training; or
d. Confirmation from the professional school.

5. The American Medical Association (AMA) Physician Profile Service may be accessed in lieu of direct primary source verifications for training programs only for licensed independent practitioners.

6. All employees in licensed positions at CCC must have current active status with the appropriate State of Oregon licensing board at the time of hire. Licensing boards recognized by CCC are:
   a. State of Oregon Medical Board;
      i. Medical Doctor (MD);
      ii. Doctor of Osteopathy (DO);
      iii. Doctor of Podiatric Medicine (DPM);
   b. Acupuncturist (LAc);
   c. Physician Assistant (PA);
   d. State of Oregon Occupational Therapy Licensing Board;
   e. State of Oregon Board of Naturopathic Medicine;
   f. State of Oregon Board of Nursing;
   g. State of Oregon Physical Therapist Licensing Board;
   h. State of Oregon Board of Licensed Professional Counselors; and
   i. State of Oregon Board of Licensed Social Workers.

7. Physicians providing patient care for services at Central City Concern must be licensed by the State of Oregon Medical Board and be certified by a specialty board that is approved by the American Board of Medical Specialties (ABMS).

8. These standards regarding verification will also be applied to experience in lieu of education in qualifying QHMAAs, as defined in OAR 309-16-0005(58). Confirmation of experience or competence must be received from one of the following:
   a. Confirmation of education and/or competence from a previous employer; or
   b. Confirmation of competence by a CCC clinical supervisor of skills based on direct personal observation.

9. Verifying information by telephone is acceptable given the following information is documented on the Telephone Reference Check form:
   a. The date of the conversation;
   b. The name and title of the person providing the information;
   c. The name of the organization when appropriate (e.g., the school, certifying board, employing organization);
   d. The specific information provided;
   e. The date and signature of the person receiving the information.

10. Once all of the above have been verified, including primary source verification of licensure, credentials, and education, Human Resources will notify the manager that the new hire has completed the pre-employment process and may begin work.

11. Primary source license, certification, and education verification is documented in the Training section of the personnel file as well as in the Human Resources Information System (HRIS) database.
**Procedures: Billing & Credentialing Department Responsibilities**

1. It is the responsibility of the Billing & Credentialing department to credential providers with insurers. To facilitate that process, the Human Resources department will provide the Billing & Credentialing department with all necessary pre-employment documentation.

2. Human Resources will provide copies of verified licenses and credentials to the Billing & Credentialing department no later than the new hire’s first day of work.

3. The following clinical new hire types must, in addition to meeting with Human Resources for a pre-employment screening, meet with the Billing & Credentialing department following New Employee Orientation:
   - a. Medical doctor (MD);
   - b. Licensed clinical social worker (LCSW);
   - c. Registered nurse (RN) or licensed practical nurse (LPN);
   - d. Qualified mental health associate (QMHA) or qualified mental health professional (QMHP)
   - e. Nurse practitioners (PMHNP, FNP, ANP, etc.)
   - f. Naturopathic doctor (ND);
   - g. Physician’s assistant (PA);
   - h. Doctor of osteopathy (DO);
   - i. Psychologist (Psy.D. or Ph.D.); and
   - j. Certified nurse-midwife (CNM).

4. The following clinical new hire types do not have to meet with the Billing & Credentialing department:
   - a. Master’s-level social worker (MSW), unless working as a QMHP;
   - b. Licensed acupuncturist (LAc); and
   - c. Certified alcohol and drug counselor (CADC).

**Procedures: Assessing Claims History**

1. During the pre-employment screening of a new provider, the Credentialing Specialist will search the National Provider Data Bank (NPDB) for a history of actions against the applicant. The results of this search will be provided to Human Resources for review.

2. The HR department will conduct an initial review of the NPDB search results. Any actions filed which have at one time resulted in the suspension or revocation of the applicant’s license will be reviewed by the Medical Director of the applicable CCC site. The Medical Director will be involved with the HR department to determine whether the applicant can meet the job requirements and whether any actions against the applicant are in excess of what is considered normal.

3. This review of NPDB results will occur every two years for existing providers. All contract and temporary providers will also complete this review process upon initiation of the contract and every two years thereafter.
APPROVED BY:

Dean Gisvold,
Chair, CCC Board of Directors

3/21/2012

Date

Rachel Solotaroff,
Senior Medical Director

3/26/2012

Date

Sarah Goforth,
Senior Director of Integrated Behavioral Healthcare

3/22/12

Date

Leslie Tallyn,
Health Services Compliance Officer

3/22/12

Date