SUBJECT: Application and Eligibility

PURPOSE: The application of eligibility criteria ensures that all practitioners meet the established credentialing and recredentialing standards. The initial application and attestation indicate a practitioner’s interest in being credentialed and provide information about the applicant that serves as a crucial first step in determining if the applicant meets the established credentialing and recredentialing criteria. The recredentialing application and attestation indicate a practitioner’s interest in remaining credentialed and provide updated information about the practitioner to assist in making the determination of whether he or she continues to meet the established credentialing and recredentialing criteria.

POLICY STATEMENT: The University of Vermont Health Network Credentialing and Enrollment (“UVMHN C&E”) Department establishes eligibility criteria for each type of practitioner. Each practitioner shall meet the established criteria. Practitioners are required to complete an application and attestation statement as to the correctness and completeness of the information they provide. Practitioners are required to update the application information including the attestation at appropriate intervals. The UVMHN C&E Department uses the CAQH application for practitioners.

PROCEDURE:

The UVMHN C&E Department must receive the practitioner’s authorization to release information before obtaining verifications.

Eligible Practitioners

1. The medical practitioner disciplines credentialed, including but not limited to, are:
   1.1. Physicians: Allopathic and Osteopathic.
   1.2. Oral Surgeons.
   1.3. Dentists.
   1.4. Podiatric Physicians.
   1.5. Advanced Practice Nurses:
       1.5.1. Nurse Practitioners.
       1.5.2. Certified Nurse Midwives.
       1.5.3. Certified Registered Nurse Anesthetist.
       1.5.4. Clinical Nurse Specialist.
   1.6. Physician Assistants.
   1.7. Clinical Dieticians.
1.8. Speech Language Pathologists
1.9. Audiologists
1.10. Acupuncturists
1.11. Ambulatory Pharmacist Clinicians
1.12. Other master’s or doctoral level licensed clinicians.

2. The behavioral health practitioner disciplines credentialed:
   2.1. Psychiatrists.
   2.2. Doctoral or master’s level clinical psychologists.
   2.3. Doctoral or master’s level clinical social workers.
   2.4. Doctoral or master’s level clinical psychiatric advanced practice nurses.
   2.5. Other master’s or doctoral level licensed behavioral health clinicians.

3. Hospital certified practitioners enrolled with payors (no payor credentialing or recredentialing is completed for these providers – Enrollment Only):
   3.1. Physical Therapists.
   3.2. Occupational Therapists.
   3.3. Athletic Trainers.

Eligibility Criteria

1. All practitioners must meet the UVMHN C&E Department’s eligibility criteria for initial credentialing and for recredentialing. These criteria are:
   1.1. Current, valid non-temporary, non-training, license to practice in the state in which he or she will treat patients.
   1.2. For prescribing practitioners: Current drug enforcement administration (DEA) registration for each state in which a practitioner practices as a UVM Health Network Health Care Partners employed practitioner. If a prescribing practitioner does not prescribe medications, he or she must submit a written description of a formal arrangement for medication prescription for his or her patients should any of them require medication.
      1.2.1. The following practitioners are not required to hold DEA registration: pathologists, diagnostic radiologists, Certified Registered Nurse Anesthetists (CRNA), Anesthesiology Assistants (AA).
   1.3. Graduation from medical school or appropriate professional school.
   1.4. For physicians: Completion of residency program approved by the Accreditation Council for Graduate Medical Education (ACGME) or by the College of Family Physicians of Canada (CFPC) or the Royal College of Physicians and Surgeons of Canada.
   1.5. For non-physicians: Completion of residency or post-graduate training, if appropriate.
   1.6. Current professional liability (malpractice) insurance with minimum limits of $1 Million/$3 Million.
   1.7. For physicians and other practitioners with hospital privileges: Privileges in good standing at the facility designated by the practitioner.
1.8. For physicians and other practitioners without hospital clinical privileges: documentation of an alternative arrangement with hospital’s hospitalist program or other practitioner with privileges.

1.9. For Certified Nurse Midwives: Written agreement with a physician agreeing to provide consultation, accept referrals and jointly manage care of a woman or newborn who has medical, gynecological or obstetric complications or in accordance with applicable law.

1.10. For Advance Practice Registered Nurses: Written collaboration agreement with a physician or documentation from the licensing board granting independent practitioner status.

1.11. For Diabetic Educators: Certification and continued certification by the National Certification Board for Diabetes Educators.

1.12. For Registered Dieticians: Certification and continued certification by the Commission on Dietetic Registration.

1.13. For Lactation Consultants: Certification and continued certification by the International Certified Lactation Consultant Examiners (IBLCE).

1.14. For Audiologists: Certification and continued certification by the American Board of Audiology (ABA) or the American Speech-Language-Hearing Association (ASHA).

1.15. For Speech Language Pathologists: Certification and continued certification by the American Speech-Language-Hearing Association (ASHA).

1.16. For Licensed Acupuncturists: Certification and continued certification by the National Certification Commission for Acupuncture and Oriental Medicine.

1.17. For Ambulatory Pharmacist Clinicians: Written collaborative practice agreement with a physician, or documentation from the licensing board granting independent practitioner status. Active board certification and continued board certification by the Board of Pharmacy Specialties or Specialty Pharmacy Certification Board. Ambulatory Pharmacist Clinician who are not board certified must be actively in pursuit of acceptable board certification.

Contents of Application

1. The practitioner application includes the following:

   1.1. Practitioner information.

   1.2. Practice location information.

   1.3. Professional liability insurance information.

   1.4. Education and training.

   1.5. Work history.

   1.6. Hospital privileges as applicable.

   1.7. Clinical information including clinical experience and:

      1.7.1. Populations served.

      1.7.2. Specialty areas.

      1.7.3. Languages spoken by practitioner.

   1.8. Questions that address:

      1.8.1. The reason(s) for any inability to perform the essential functions of the position with or without accommodation.
1.8.2. Lack of present illegal drug use.
1.8.3. History of loss of license and felony convictions.
1.8.4. History of loss or limitation of privileges or disciplinary activity.
1.8.5. Current malpractice insurance coverage.

1.9. Attestation as to correctness and completeness of the application.

Practitioner Application Process

1. The UVMHN C&E Department uses the CAQH application which practitioners complete electronically and update prior to submission.

2. The UVMHN C&E Department sends the practitioner the following documents:
   2.1. Information about the application process.
   2.2. An authorization to release information and attestation form which requires practitioner signature.
   2.3. The application or the application addendum form, as appropriate, which requires completion.

3. The practitioner’s application and copies of documents are date stamped upon receipt in the UVMHN C&E Department along with the signature or initials of the individual obtaining the information.

4. The Credentialing Specialist reviews the application and supporting documents and contacts the applicant on incomplete applications for completion within thirty (30) days.
   4.1. Practitioners are required to respond to requests for information and send complete applications and copies of necessary documents to the Credentialing Specialist within fifteen (15) business days of receipt of the application by the UVMHN C&E Department.
   4.2. If a practitioner does not comply with this requirement the Credentialing Specialist will contact the practitioner informing him or her that the credentialing process is delayed until the required information is received.

5. The Credentialing Specialist:
   5.1. Enters the practitioner’s data into the credentialing database and the tracking log.
   5.2. Establishes the practitioner's file by inserting all documents in an individual folder according to the designated order.
   5.3. Initiates the Credentialing Checklist.
   5.4. Conducts primary source verification of credentials.
   5.5. Verifies all credentials.
   5.6. Completes the Credentialing Checklist including the date of review of all credentials and the signature or initials of the reviewer.

6. The Credentialing Specialist reviews the practitioner’s application and attestation for completeness, signature and date. Applications without a signature or date are returned to the practitioner to complete, sign and enter the current date of review by the practitioner within thirty (30) days.

7. The Credentialing Specialist reviews the practitioner’s response to the following items:
   7.1. The reason(s) for any inability to perform the essential functions of the position with or without accommodation.
   7.2. Lack of present illegal drug use.
7.3. History of loss of license or felony convictions. 
7.4. History of loss or limitation of privileges or disciplinary activity. 
7.5. Current malpractice insurance coverage ($1 Million/$3 Million-Minimum).

8. The Credentialing Specialist contacts the practitioner for clarification of any unclear answers to questions on the application or other unclear information. Verbal clarification is documented in the practitioner’s file including the date and signature or initials of the recorder within (30) days.

8.1. Practitioners are required to respond to requests for information within fifteen (15) business days of receipt of the application by the UVMHN C&E Department.

8.2. If a practitioner does not comply with this requirement the practitioner is contacted and informed that the credentialing process will be delayed until the required information is received.

**Practitioner Application Process at Recredentialing**

1. The UVMHN C&E Department updates practitioner application information at least every three (3) years.

2. The Credentialing Specialist initiates the recredentialing process at least three (3) months before the expiration of a practitioner’s appointment by sending the practitioner a request to update his or her CAQH application and complete and return the following documents:

   2.1. The UVMHN C&E Department authorization to release information and attestation form which requires practitioner signature.

   2.2. The application addendum form, as appropriate.

3. The practitioner’s recredentialing application and copies of documents are date stamped upon receipt in the UVMHN C&E Department along with the signature or initials of the individual obtaining the information.

4. The Credentialing Specialist:

   4.1. Enters the practitioner’s data into the credentialing database and the tracking log.

   4.2. Places all documents in the practitioner’s folder in the designated order.

   4.3. Initiates the Recredentialing Checklist.

   4.4. Conducts primary source verification of credentials.

   4.5. Verifies all credentials.

   4.6. Completes the Recredentialing Checklist including the date of review of each credential and the signature or initials of the reviewer.

5. The Credentialing Specialist:

   5.1. Reviews the practitioner’s recredentialing application, attestation and supporting documentation for completeness, signature and date.

   5.2. Reviews the practitioner’s recredentialing application for responses to the following items:

       5.2.1. The reason(s) for any inability to perform the essential functions of the position with or without accommodation.

       5.2.2. Lack of present illegal drug use.

       5.2.3. History of loss of license or felony convictions.

       5.2.4. History of loss or limitation of privileges or disciplinary activity.

       5.2.5. Current malpractice insurance coverage ($1 Million/$3 Million-minimum).
5.3. Contacts the practitioner for clarification of any unclear answers to questions or information on the recredentialing application or supporting documents within thirty (30) days.

5.4. Documents verbal clarification, if any in the practitioner’s file including the date and signature or initials of the recorder.

5.5. For any recredentialing application lacking a signature, date or other information, the practitioner will be contacted to provide the information or to complete, sign and enter the current date of review within thirty (30) days.

5.5.1. Practitioners are required to return any incomplete recredentialing application to the UVMHN C&E Department within fifteen (15) business days of receipt of the incomplete recredentialing application by the UVMHN C&E Department.

5.5.2. If a practitioner does not comply with this requirement, the practitioner is contacted and informed that the credentialing process will be delayed until the required information is received.

Practitioner Responsibilities

1. Maintain a current CAQH online application.

2. Grant the UVMHN C&E Department access to his/her CAQH online application.

3. Respond promptly to all requests for information or documentation.

4. Return completed and signed recredentialing documents at least ninety (90) days prior to his/her recredentialing date.

5. Notify the UVMHN C&E Department of additions, deletions or changes to his/her credentialing/credentialing file with ten (10) business days of any such change.

6. Notify the UVMHN C&E Department of any type of involuntary termination in as soon as possible but no later than five (5) business days of receipt of an involuntary termination notification.

7. Comply with all applicable state and federal laws and regulations, including VT Rule H-09-03, as applicable, NCQA, cooperate with applicable regulatory bodies pertaining to the delivery of health care, and comply with the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), the HIPAA Privacy Rule and regulations found at 45 C.F.R. Parts 160 and 164, including, but not limited to, the requirements at 45 C.F.R. Section 164.50(e).

Payor Notifications

1. The UVMHN C&E Department will notify Payors of additions and terminations of practitioners and any changes to a UVM Health Network Health Care Partners practitioner’s enrollment information.

MONITORING PLAN: Policy will be monitored in accordance with Policy C&E 6 Monitoring Plan.

DEFINITIONS:

“Credentialing Checklist” means the summary form generated by the UVMHN C&E Department staff for each practitioner credential file for use by the Credentials Committee.

“Credentials Committee” means a committee appointed by the (UVMHN C&E) Board of Directors and chaired by the UVMHN C&E Medical Director to credential and recredential practitioners.

“Medical Director” means the UVMHN C&E Medical Director appointed by the UVMHN C&E Board of Directors to be the chairperson to the UVMHN C&E Credentials Committee and to be responsible for the decisions of the Credentials Committee.
“Practitioner” means the UVMHN Health Care Partners billing practitioners, including but not limited to, physicians, oral surgeons, podiatrists, ambulatory pharmacist clinicians, nurse practitioners, physician assistants, psychologists, social workers, other masters’ level clinicians, and all other health care practitioners.

“Recredentialing Checklist” means the summary form generated by the Credentialing and Enrollment Department staff for each practitioner recredential file for use by the Credentials Committee.

“The University of Vermont Health Network’s Health Care Partners” (“UVMHN Health Care Partners”) means The University of Vermont Medical Center, Central Vermont Medical Center, Porter Medical Center, Champlain Valley Physicians Hospital, Elizabethtown Community Hospital, Alice Hyde Medical Center, and any other entity to join UVMHN as a Health Care Partner.

RELATED POLICIES:

- C&E 1 Credentials Plan
- C&E 3 Nondiscrimination
- C&E 5 Clean Files & Provisional Credentialing
- C&E 7 Informing Practitioners
- C&E 8 Practitioner Confidentiality
- C&E 10 Credentialing & Recredentialing Processes

REFERENCES:

- National Committee for Quality Assurance
- Vermont Rule H-2009-03

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REVIEWERS:

- Michael D’Amico, M.D., Medical Director
- Holly Turner, Director Credentialing and Enrollment

OWNER'S NAME:

- Holly Turner, CPCS, CPMSM, Director Credentialing and Enrollment

APPROVING OFFICIAL'S NAME:

- Michael D’Amico, M.D., Medical Director