



## CREDENTIALS VERIFICATION OFFICE AND/OR MEDICAL STAFF SERVICES GUIDE TO HOSPITAL PRIVILEGES/SCOPE OF PRACTICE

### Questions you may have to the credentialing process:

- New Physician or Allied Health Professional joining your practice
- Increase or decrease of privileges
- Reappointment/reauthorization process
- Leave of Absence
- Resignation

Hospitals are highly regulated organizations. The organizations that have some authority over us and an interest in how and what we do are the federal government, The Joint Commission and state regulatory organizations. We are held to strict credentialing standards and it is imperative that we meet every requirement.

The granting of privileges or scope of practice authorizes the doctor or allied health professional to perform certain clinical duties for which he/she is qualified.

### Process of Credentialing:

- Initial application request
  - Complete request form at <https://www.hshs.org/HSWS/For-Providers>
  - Application will be sent electronically to the applicant through an online application website.
  - Initial application fee of \$300.00
- Application submitted - Process begins:
  - Application reviewed for completeness and unexplained time gaps.
  - Verifications are sent to references, hospital and/or clinic affiliations, education and training programs, work history and malpractice carriers for history of malpractice claims.
  - On-line verifications are completed - for example:
    - Licensing boards
    - DEA registration
    - National Practitioner Data Bank
    - Federal State Medical Boards
    - AMA
    - Board certification (ABMS or AOA)
    - Criminal background check
    - Medicare and Medicaid Sanctions
  - Obtain current Immunization record requirements
  - Obtain proof of current malpractice insurance
  - Obtain procedure logs, if applicable
- Continuous follow-up and review of required items to obtain a complete file. Ongoing communication with applicant and clinic managers, if applicable.
- Epic Training & Orientation is also scheduled during this process by Medical Staff Services and applicant.



This process can take 60 to 90 days depending on when the application is submitted to the CVO office and when all the required elements have been received and are considered complete.

The recommendation and approval process can take approximately 30 days to meet the scheduled meeting dates required.

- Completion of file - recommendation and approval process begins with review of the following:
  - Medical Staff Services Manager, if applicable
  - Department Chairperson
  - Credentials Committee
  - Medical Executive Committee
  - Approval by the Board of Directors
- Notification of approval to Physician/Allied Health Professional and Hospital leadership group.
- All Medical Staff appointees and Independent and Advanced Practice Clinicians will be evaluated for a time limited period through our Focused Professional Practice Evaluation (FPPE) process.

#### **How the Physician or Allied Health Professional can help us:**

- Give us as much advance warning as possible. Process should be started approximately four months before their start date.
- Stay in contact with the Credentialing Specialist that is working on your file for updates and missing items still required.
- To expedite references: you can call your professional references, program directors, etc. that were listed on the application to alert them to the hospital inquiries that will soon follow.
- Secure your WI license first then get your state DEA.
- Understand it is the applicants' responsibility to provide the information we need to complete the credentialing file.
- Privileges: Special procedures require evidence of training or experience; criteria may be applicable.
- Be sensitive to our workload and we will be sensitive to yours.

#### **Teamwork:**

It is always exciting and a pleasure to welcome a new physician or allied health professional to our hospital staff. We try to simplify our process whenever possible. If we can work together the end result gets accomplished on time.

#### **Temporary privileges:**

- Temporary privileges are available for patient care need only and should not be thought as a quicker way to get your hospital privileges. The full credentialing process still needs to be completed.



#### Increase of Privileges including Proctoring, if applicable:

- Request in writing to the Medical Staff Services Office indicating the increase of privilege requested and appropriate documentation of training and experience to support the increase. Review and approval process is then initiated by all the appropriate committees. Applicant cannot perform these requested privileges until approved to do so and notified by Medical Staff Services.

#### Decrease of Privileges:

- Request in writing to Medical Staff Services indicating the decrease. Also, can be done at recredentialing time.

#### Sponsoring physician changes:

- Phone call or written statement indicating that your sponsoring/supervising physician has changed. Indicate if you have a new sponsoring/supervising physician and who that is. If no new sponsoring/supervising physician, your privileges/scope of practice will be resigned effective immediately.

#### Leave of Absence:

- Request in writing to Medical Staff Services indicating your request for a leave of absence, from which facilities, effective date and why. This request will be taken to the applicable committees for approval. When you are ready to return from your leave of absence you must send written request to have your privileges reinstated. Medical leaves of absence require completed health assessment.

#### Recredentialing:

- Recredentialing is required at least every two years. Your reappointment or reauthorization packet will be sent to you electronically approximately six months in advance to meet the necessary approval deadlines. You will be completing a new privilege/scope of practice card for the next two years. Please return application and necessary materials required, as soon as possible. You can request an increase or decrease of privileges at this time. Please see required items above for each. At this time your file is reviewed for current competence of the privileges/scope of practice you wish to continue to hold.

#### Resignation of privileges:

- Submit request in writing at least 30 days prior to requested resignation date to Medical Staff Services indicating the effective date you want to resign your privileges/scope of practice and which facilities.

Once the file is complete it will be reviewed for recommendation and approval by the appropriate committees. A letter will follow to the applicant.

**Questions:** Contact HSHS WI Medical Staff Services at 920-433-8208.