

# NHP/NHIC-Credentials Committee Membership & Responsibility

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## **Abstract/Purpose:**

The Credentials Committee shall be comprised of a multispecialty group of currently practicing primary care practitioners and specialists and will consist of not less than six members. A Chairperson shall be appointed and shall serve a minimum two-year term. The Medical Director and appropriate staff will serve as administrative members of the committee. Other participating practitioners, and staff or consultants may be asked to participate as needed in a non-voting capacity i.e., physician specialists, other health care professionals, legal counsel, etc.

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- **POLICY:**

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The Medical Director or designated Associate Medical Director is directly responsible for the Credentialing Program. The Medical Director's responsibilities include:

- oversight of the Credentialing Program
  - monitoring implementation of the Credentialing program
  - evaluation of credentialing policies and procedures
  - involvement in recruitment of committee members
  - coordinating with contracted practitioners in Quality Improvement, Utilization Management, and Credentialing activities, as applicable
  - coordinating and communicating peer review information and decisions to network practitioners
  - monitoring the implementation of the QI process as it relates to quality of care
  - assists in the development of corrective action plans and assure that they are implemented when problems are identified
  - participating in the development of the Quality Improvement Program Description, Annual Evaluation and Work Plan, the Utilization Management Program and Credentialing Program
  - perform individual clinical case reviews (including grievances, complaints and appeals) and make corrective action recommendations on quality of care issues and medical necessity denials
- The Medical Director has delegated the leadership of the Credentials Committee to the chairperson or designee. The Medical Director has further delegated the pre-committee review of credentialing and recredentialing applications to a participating practitioner.

Each member will serve a minimum two-year term. Each member is to sign a Confidentiality Agreement form, which will survive the termination of membership on the Credentials Committee.

A minimum of two-thirds (2/3) participating licensed health care practitioners and one (1)

administrative staff constitutes a quorum. Only participating licensed health care practitioners can vote on credentialing/recredentialing decisions. All members can vote on administrative issues.

The Credentials Committee will hold meetings at least monthly. Each member is to attend all scheduled Credentials Committee meetings on an annual basis. Not maintaining this attendance requirement may result in termination of Committee membership. The Credentials Committee prefers that all routine business be conducted at regular scheduled meeting times, however ad hoc meetings may be called occasionally by the Medical Director or Chairperson. All Committee members are to be notified of an ad hoc meeting and, at a minimum, quorum requirements are to be met. An ad hoc teleconference meeting is acceptable as long as all information to be reviewed is presented and discussed during the teleconference.

A file of the minutes of each meeting shall be maintained and kept in a confidential manner in the Credentialing Department.

Functions of the Credentials Committee are to include, but are not limited to:

- final decision on the credentialing of prospective practitioners and providers
- final decision on the recredentialing of current practitioners and providers
- review the credentials of all practitioners and providers being credentialed or recredentialled who do not meet the organization's established criteria, and to offer advice which the organization considers
- development, implementation and monitoring of action plans for improvement to address discrepancies in practitioner/provider performance
- the Medical Director or designee will notify practitioner and provider of credentialing and recredentialing decision within 60 calendar days of the committee's decision
- initiation, review and recommendation of credentialing/recredentialing policies and procedures.