

## NORTHCARE NETWORK

<b>POLICY TITLE:</b> Credentialing - Privileging	<b>CATEGORY:</b> Provider Network Management	
<b>EFFECTIVE DATE:</b> 2/7/07	<b>BOARD APPROVAL DATE:</b> 7/13/16	
<b>REVIEW DATE:</b> 2/3/25	<b>REVISION(S) TO POLICY STATEMENT:</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>OTHER REVISION(S):</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>RESPONSIBLE PARTY:</b> Provider Network Specialist	<b>CEO APPROVAL DATE:</b> 2/4/25 Megan Rooney, CEO	

### **APPLIES TO**

NorthCare Network Personnel  
Network Providers

### **POLICY**

NorthCare Network requires all participating health care professionals to have a documented review and approval of their clinical privileges to assure services provided to the network members are delivered by qualified and competent staff. Privileging must be granted based on appropriate training, supervision, and consultation to support the scope of work according to primary eligibility groups served by the provider.

### **PURPOSE**

To ensure individual providers are operating within their scope of practice and engaging in clinical activities that they are qualified to provide. NorthCare Network provides direction for standard clinical privileging across the network.

### **DEFINITIONS**

1. ***Credentialing – Individual Practitioners:*** (As defined by the American Society of Addiction Medicine and the American Managed Behavioral Healthcare Association) The process of reviewing, verifying, and evaluating a practitioner's credentials (i.e., professional education, clinical training, licensure, board and other certification, clinical experience, letters of reference, other professional qualifications, and disciplinary actions) to establish the presence of the specialized professional background required for membership, affiliation, or a position within a healthcare organization or system. The result of credentialing is that a practitioner is granted membership in a medical staff or provider panel.
2. ***Credentialing – Organizational Providers:*** The process of validating that the organizational provider is licensed or certified as necessary to operate in the State and has not been excluded from Medicaid or Medicare participation and that the organization properly credentials their directly employed and subcontracted direct service providers.
3. ***Peer Clinical Review (Specific to this policy):*** Clinical review conducted by appropriate health professionals when a request for a service or support was not approved/certified during initial clinical review.

4. **Privileging** - The process of determining a health care professional's current skill and competence to perform specific diagnostic or therapeutic procedures that the professional requests to perform as a participant in or an affiliate of a healthcare facility or system. The result of privileging is that a practitioner is permitted by a healthcare organization or network to conduct those specific procedures (as defined by the American Society of Addiction Medicine and the American Managed Behavioral Healthcare Association). For purposes of this policy, NorthCare this definition has been expanded to include individuals who must be privileged to perform behavioral health services that do not require specific degrees or state licensure, but staff must obtain certifications required by the Michigan Department of Health and Human Services.
  
5. **Senior Clinical Staff:** The appointed leadership role of at least one senior clinical staff person who has: current, unrestricted clinical license(s); qualifications to perform clinical oversight for the services provided; five years' post -graduate experience in direct patient care; and Board certification (if the senior clinical staff person is an M.D. or D.O.).

## **REFERENCES**

- 42 CFR, (Balanced Budget Act of 1997), 438.214
- Medicaid Provider Manual
- MDHHS/PIHP Contract  
<https://www.michigan.gov/mdhhs/doing-business/contractor>
- MDHHS Policies & Practice Guidelines - Provider Credentialing  
<https://www.michigan.gov/mdhhs/keep-mi-healthy/mentalhealth/mentalhealth/practiceguidelines>
- PIHP/CMHSP Network Provider Agreement
- NorthCare Network Policies/Plan(s) as applicable:

## **HISTORY**

REVISION DATE: 2/13/13, 9/3/13, 3/12/14, 5/5/15, 8/13/15, 5/17/16, 3/16/17, 2/4/20, 12/28/20, 1/11/22, 9/11/23, 7/1/24, 2/3/25

REVIEW DATE: 1/13/11, 3/20/13, 4/1/14, 5/14/14, 5/5/15, 8/13/15, 5/17/16, 3/16/17, 1/24/18, 11/26/18, 2/4/20, 12/28/20, 1/11/22, 11/2/22, 9/11/23, 7/1/24, 2/3/25

CEO APPROVAL DATE: 3/20/13, 9/3/13, 4/1/14, 5/14/14, 5/5/15, 9/1/15, 5/31/16, 4/4/17, 2/12/18, 12/4/18, 2/26/20, 1/5/21, 2/1/22, 12/6/22, 10/23/23, 8/6/24, 2/4/25

BOARD APPROVAL DATE: 2/7/07, 6/11/14, 7/13/16

## **PROCEDURES**

### A. NorthCare Network Responsibilities:

1. NorthCare Network Credentialing Committee will privilege all credentialed health care professionals, employed and under contract, to ensure they meet the requisite qualifications, education, experience, training, and supervision applicable to their scope of work.
  
2. Initial Privileging is completed as part of the credentialing process. Ongoing privileging is reviewed/completed as part of the annual performance review; and when duties/responsibilities change in terms of primary eligibility group a person is working with and/or scope of clinical practice. National and state standards for specific clinical programs or treatments are followed by NorthCare Network and

network providers. Initial Privileging will be granted by the Committee based on information provided to the Committee on the NorthCare Privileging Form.

3. Temporary Privileges may be granted at time of hire or contract, at time of a change in clinical privileges and/or when a need for temporary privileging is identified, e.g., staff shortage. Temporary privileges must not exceed 150 days.
4. Ongoing privileging will be reviewed and approved by the Committee based on:
  - a. The annual performance evaluation demonstrating the necessary licensing, certification, and training requirements to maintain privileges for the coming year.
  - b. Clinical privileging changes when job duties are added that require specific training and certification.

**B. Network Provider Responsibilities**

1. Initial Privileging will be granted by the organization's Credentialing Committee.
2. Ongoing privileging will be reviewed and approved by the Organization's Credentialing Committee based on:
  - a. The annual performance evaluation demonstrating the necessary licensing, certification, and training requirements to maintain privileges for the coming year.
  - b. Clinical privileging changes when job duties are added that require specific training and certification.
3. Upon request, organizational providers are to provide policies, procedures or guidelines that outline how scope of practice is determined for health care professionals within their organization.