



Managed Mental Health Care Organization for Coos, Curry, Jackson, Josephine, and Klamath Counties
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Credentialing and Re-Credentialing Policy and Procedures

Approval Date: [Board Approved – February 22, 2010](#)
[State Approved: 3/16/2011](#)

Revision History:

I. POLICY DESCRIPTION

The purpose of this policy is to ensure a consistent method for credentialing programs or facilities used to deliver covered services.

The following procedures set forth in this policy should serve as a tool to assist JBH staff, Participating Provider agency staff, OHP Members and/or their Representatives, stakeholders, and regional and/or allied agencies in implementing an efficient system for credentialing providers, programs or facilities.

II. APPLICABILITY

For the purposes of this policy, the term Jefferson Behavioral Health (JBH) includes the Jefferson Behavioral Health staff and its authorized representatives. JBH shall follow this policy as it applies to the OHP mental health services governed by the OHP Mental Health Organization Contract between the State of Oregon and JBH. Contractors and subcontractors follow this policy to the extent that it applies to the mental health services that they provide to JBH Members. The responsibilities outlined in this policy shall also include, but not be limited to, the Local Mental Health Authorities (LMHA) in the JBH service area and any agency delegated with the responsibility for managing mental health services for JBH members in the LMHA's county.

III. GENERAL PROCEDURE FOR CREDENTIALING AND RE-CREDENTIALING PROVIDERS

- A. Responsibility for Credentialing and Re-credentialing providers
 - 1. Credentialing standards shall be set by JBH.

2. JBH delegates the responsibility and processes for credentialing and approving contracted agency staff to the contracted agency.
3. It is the Community Mental Health Programs responsibility to maintain a qualified provider panel and to update JBH on changes in providers.
4. The Directors of JBH's contracted agencies or their designees shall have approval authority in the credentialing process of their own individual contracted practitioners.
5. JBH shall provide oversight over the credentialing process in each of its direct contracted provider agencies and will review those processes yearly at the delegated activities review.
6. The Contractors shall ensure that all of their sub-contractors comply with the requirements set forth in this procedure. Contractors will provide JBH with reports detailing their oversight of sub-contractors at time of re-credentialing reviews
7. CMHP's will develop policies and procedures to ensure nondiscriminatory process for selecting and compensating providers.
8. Each agency provider (i.e., Community Mental Health Programs and Intensive Treatment Providers) shall have a process for credentialing their individual providers.
9. Certain serious felonies and misdemeanors may increase the risk of exploitation and/or abuse of persons in the care of or receiving services from JBH, its affiliates, or subcontractors. Because of this potential, all agencies shall conduct criminal background records' check on all providers of mental health service they credential. Providers must meet state requirements for criminal background checks including OAR 407-007-0000 through 407-007-0380
10. Individuals in paid employment with Member CMHPs to provide billable mental health services should meet the requirements of either a Qualified Mental Health Associate (QMHA) or Qualified Mental Health Professional (QMHP) as defined in definitions.
11. Individual Providers: Individuals providing services through a direct subcontract with either JBH or any of its Member CMHPs shall be licensed, registered, or certified in the State of Oregon to provide services within their appropriate field of expertise, and shall be screened through the U.S Department of Health and Human Services Excluded Provider list.
12. Individual medical practitioners (i.e. M.D, DO., N. P., an P.A and must possess and maintain a current license to practice medicine in the State of Oregon, proof of liability insurance and proof of hospital privileges (if rendering services in an inpatient acute care setting).
13. If an agency is not licensed, registered, or certified and the agency is required to do so, then the provider shall either document the plan to obtain appropriate credentials or

justification as to why the provider is not pursuing credentialing. If a provider has been licensed in the past and does not currently hold a license, registration, or certificate, the provider shall document reasons for suspension or lapse of credential, plans for re-credentialing (if any) and/or reasons for not re-credentialing.

14. Denials and Appeals: Individuals that have not been credentialed shall be given written notification by the agency for the reason of denial.
15. If a provider leaves employment or internship at an agency and then returns, the agency must re-credential the employee at time of re-hire.
16. For purposes of this policy, the responsibilities listed for Participating Providers shall also apply to the LMHA's in JBH's Service Area, to each of which JBH has delegated responsibility for managing non-inpatient or inpatient mental health services for JBH Members in the LMHA's county.

B. Credentialing by Contractor Agencies

1. Credentialing of individual practitioners (agency employees or contractors) is delegated to the contracted agency.
 - a. Contractors of mental health outpatient services:
 - (i) Providers shall possess valid licenses or certificates if any are required under any federal, state, or local law, rule, or regulation to deliver outpatient OHP Covered Services in the State of Oregon. The contractor shall verify possession of such required licenses or certificates.
 - b. If an employee or subcontractor is not required to be licensed or certified by a State of Oregon board or licensing agency, then: The individual must meet the definition for Qualified Mental Health Associate or Qualified Mental Health Professional as defined in OAR 309-016-0005 and provide services under the supervision of a Licensed Medical Practitioner; or
 - (i) For individuals not meeting the QMHA or QMHP definition, the contracted agency shall document and certify that the individual's education, experience, competence, and supervision are adequate to permit the individual to perform his or her specific assigned duties. Credentialing of interns follows this procedure.
 - c. Contracted Agency credentialing records shall document academic degrees, licenses, certifications, and/or qualifications of the agency's employees and/or subcontractors. Criminal record reviews shall be completed and documented as described in OAR 407-007-0000 through 407-007-0380
 - d. Services to OHP Members may not be rendered by individuals or entities that are currently excluded from Medicaid participation under Section 1128 or Section 1128A of the Social Security Act. The contracted agency shall not refer OHP Members to such Providers and shall not accept billings for Services to OHP Members submitted by such Providers.

- e. Any action taken to exclude a provider currently employed by or under contract with a member agency shall be reported to JBH, AMH and any OHP member who received care on a regular basis within 15 days.
- f. If a provider or contractor leaves employment or terminates contract at an agency and then returns, the agency must re-credential the employee at time of re-hire or prior to development of a new contract to provide services.

C. Required documentation on each provider

JBH will review credentialing activities including all credentialing documentation kept at contractor agencies. The following list of documentation must be contained in each providers credentialing file.

1. Primary source verification of degrees through official transcripts, licenses and certifications and/or a combination of work, education and training that would justify his/her competencies to meet the qualifications of that position.
2. Fitness determination from criminal records check
3. Verification that provider has been checked against the Excluded Parties List at least every two years.
4. Documented explanation of any history of loss of license, history of disciplinary action and/or previous sanctions by Medicaid or Medicare.
5. For Medical Providers, valid DEA certificate.

IV. OUT OF NETWORK OUTPATIENT SERVICES

Responsibility for Credentialing and Approving Providers

1. Each Participating Provider is responsible for obtaining covered services for OHP members that cannot be provided by the agency or its contractors. The cost of such services to the member cannot exceed the cost for in-network services as specified in the MHO contract. The use of out-of network services should be monitored to determine the need for additional service capacity within the county.
2. Verification of credentialing of out of panel providers for outpatient services is the responsibility of the Contractor. The contractor must ensure that all subcontractor agencies have completed the credentialing process as specified in this policy and relevant OAR's.
 - a. Individual practitioners providing out of panel services must be employed by an agency licensed in the State of Oregon for Medicaid and/or insurance billing, or be individually licensed by the State of Oregon for independent practice. Credentialing files shall include the documentation in Part III, C and evidence of malpractice insurance.
 - b. Out of panel services to OHP Members may not be rendered by individuals or entities that are currently excluded from Medicaid participation.

3. Each Contractor is required to authorize any out of panel outpatient services that are medically necessary. Each contractor agency shall specify a representative to whom such requests are submitted. Refusal of such requests may constitute a denial of services and is subject to all Notice of Action rights and procedures.

V. MONITORING OF INPATIENT FACILITIES

Responsibility for Credentialing and Approving Providers

1. Employees of inpatient hospitals providing direct mental health services under contract with JBH must be credentialed by their employing agency prior to service delivery or receiving reimbursement for services. JBH will accept the hospitals credentialing process if it follows Joint Commission on Accreditation of Healthcare Organizations (JCAHO) standards. Upon request, the hospital will make available to JBH upon request the credentialing files of employees performing work under its contract with JBH.
2. For those Physicians providing care in an inpatient Hospital Psychiatric Setting, JBH will collect proof of liability insurance and evidence of hospital privileges.
3. AMH reviews hospital seclusion and restraint policies. The Quality Improvement Coordinator shall address any concerns about the care of JBH members directly with the hospital and with AMH.