

Credentialing and Privileging: What the BPHC wants

Anna Hundt
Vi President - Operations
Family Health Center of Worcester, MA
ahundt@att.net

BPHC Requirements

- Draft PIN from 2000 outlines BPHC requirements for all 330 programs regarding credentialing and privileging all licensed independent providers
- **These requirements particularly important for HCH programs not affiliated with CHCs**

Credentialing

- **The process of obtaining, verifying, and assessing the qualifications of a health care practitioner to provide patient care services in or for a health care organization.”**
- **Joint Commission on Accrediion of Healthcare Organizations**

PSV & Documentation

- **Contacting** schools, residency directors, etc. can **be** done **via** mail or phone.
- Letter5 from the primary source (e.g., a letter from the residency director) is acceptable.
- **If the telephone is used to verify** information there must be a formal, documented protocol in place.

PSV & Databases

- The AMA and most **state** medical societies are considered "designated equivalent sources" by **JCAHO** and they can be used as PSV for **credentials**.
 - American Medical Association (800) 665-2882
 - American Board of Medical Specialists (800) 776-2378
 - National Practitioner Data Bank (800) 767-6732

Competence

- Methods of verification
 - **Letters requested by the HCH** program from applicant's colleagues that address applicant's actual **clinical work**
 - Verify board certification status
 - Documented direct **observation of clinical skills**

Privileges

- Only the governing body can grant privileges
- Privileges must be reviewed every two years
- You must have a policy for curtailing or removing privileges
- Privileges must be time-limited and specific
