



DEPARTMENT OF MENTAL HEALTH POLICY/PROCEDURE

SUBJECT CREDENTIALING/RE-CREDENTIALING OF DMH PHYSICIAN EMPLOYEES	POLICY NO. 613.1	EFFECTIVE DATE 09/01/04	PAGE 1 of 10
APPROVED BY: <div style="text-align: right;">Director</div>	SUPERSEDES	ORIGINAL ISSUE DATE 01/15/04	DISTRIBUTION LEVEL(S) 1

PURPOSE

- 1.1 To establish an internal credentialing process to ensure that physicians presently employed or being considered for employment meet the standards of employment established by the Department of Mental Health.
- 1.2 To outline the standards, requirements, and guidelines for the credentialing/recredentialing of the County of Los Angeles Department of Mental Health (DMH) licensed physician employees.

DEFINITIONS

- 2.1 **Credentialing:** The formal process of collecting and verifying the professional credentials and qualifications of licensed physicians and evaluating them to determine whether the licensed physicians meet and/or continue to meet the criteria covered in Sections 5.1 and 7.1 of this policy.
- 2.2 **Recredentialing:** Re-verification that DMH physician employees continue to meet DMH credentialing criteria once every three years.
- 2.3 **Credentialing Verification Organization (CVO):** A private entity that conducts a primary source verification to validate the credentials of healthcare professionals.
- 2.4 **Credentialing Applicant:** The term credentialing applicant refers to Board eligible or Board certified physicians who are licensed by the State of California and who are either current non-credentialed DMH employees, DMH employees requiring re-credentialing, or prospective physician employees.
 - 2.4.1 **Board eligible physicians:** Board eligible physicians are those physicians who have completed residency training but are not yet board certified by the American Board of Medical Specialties.
 - 2.4.2 **Board certified physicians:** Board certified physicians are those physicians who have completed residency training and are certified by the Board of Medical Specialties.



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- 2.4.3 Current non-credentialed physician employees: Current non-credentialed employees are those DMH physician employees who have not been credentialed. They shall be referred to as physician employees throughout this policy.
- 2.4.4 Prospective physician employees: Prospective physician employees are candidates who have been selected from a certification list for possible DMH employment.
- 2.5 Credentialing Timeframe: The process of credentialing ordinarily should be completed within five (5) to thirty (30) business days for prospective employees and within thirty (30) calendar days for current employees after the completed credentialing packet is received by the CVO. The process of completing recredentialing ordinarily should occur within thirty (30) calendar days after the completed credentialing packet is received by the CVO.
- 2.6 Credentialing Packet: The credentialing packet contains the credentialing application, credentialing requirements, and instructions.
- 2.7 Credentialing Materials: All documents returned by the CVO after the primary source verification has been completed, including the original credentialing application with required documentation, all documents collected through the primary source verification process, and the CVO's summary report of their findings.
- 2.8 Credentialing Review Committee (CRC): The body authorized by the Director of the Department of Mental Health, to determine if current physician employees and prospective physician employees meet DMH credentialing criteria.

POLICY

- 3.1 Only Board eligible or Board certified physicians who are licensed by the State of California, who meet the credentialing standards and requirements established by this policy shall be approved to be employed by DMH.
 - 3.1.1 Scope of Practitioners:
 - 3.1.1.1 Chief Mental Health Psychiatrist
 - 3.1.1.2 Clinic Physician, M.D.
 - 3.1.1.3 Consulting Specialist, M.D.
 - 3.1.1.4 Deputy Director, M.D., M.H.
 - 3.1.1.5 Medical Director, M.D., M.H.
 - 3.1.1.6 MH Clinical District Chief, M.D.



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- 3.1.1.7 Mental Health Consultant, M.D.
- 3.1.1.8 Mental Health Psychiatrist
- 3.1.1.9 Physician Specialist, M.D.
- 3.1.1.10 Physician, M.D.
- 3.1.1.11 Physician, Post Graduate
- 3.1.1.12 Senior Physician, M.D.
- 3.1.1.13 Supervising Mental Health Psychiatrist
- 3.1.1.14 Other practitioners may be added from time to time as needed and appropriate.

PROCEDURE

Processing Credentialing Applications

- 4.1 The Human Resources Bureau (HRB) shall provide the Office of the Medical Director (OMD) with the names of all credentialing applicants.
- 4.2 OMD shall notify physician employees of the credentialing/re-credentialing requirement.
- 4.3 OMD shall provide the CVO with a list of credentialing applicants for the credentialing process.
 - 4.3.1 Physician employees shall be processed beginning with the most recently hired or at the discretion of the Medical Director, should special circumstances arise.
 - 4.3.2 Prospective physician employees shall begin the credentialing process once they are reachable on a certification list for possible DMH employment. This shall occur concurrent with the commencement of the personnel action form approval process. The prospective employee must successfully complete the credentialing process before an offer of employment can be made.
- 4.4 The CVO will distribute the credentialing packets to credentialing applicants. It is the responsibility of the CVO to follow up with each credentialing applicant in order to ensure that the CVO receives a completed credentialing packet, including the presence of:
 - 4.4.1 a completed signed Credentialing Application;
 - 4.4.2 a copy of a current California State Physician and Surgeon's License authorized by the Board of Medical Examiners of the State of California;



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- 4.4.3 a copy of the certificate of completion of residency training for physicians who are not Board certified;
- 4.4.4 a copy of the certificate of completion of Fellowship training, if applicable;
- 4.4.5 a copy of the Board certification, if applicable;
- 4.4.6 a copy of a current, valid and unrestricted Controlled Substance Registration Certificate authorized by the United States Department of Justice, Drug Enforcement Administration (DEA certificate);
- 4.4.7 a copy of the Education Commission for Foreign Medical Graduates (ECFMG) certificate, if applicable;
- 4.4.8 a current curriculum vitae;
- 4.4.9 a written explanation for any gaps in employment history greater than six (6) months; and
- 4.4.10 a detailed explanation for any affirmative answer to a professional liability or attestation question.
- 4.5 It is the responsibility of each credentialing applicant to provide a completed Credentialing Packet to the CVO in a timely fashion.
 - 4.5.1 Credentialing applicants who are prospective physician employees and do not respond to the CVO's request for submission of the credentialing packet within 15 business days after the postmarked date shall not be considered for employment until their packet is complete.
 - 4.5.2 Credentialing applicants who are physician employees and do not respond to the CVO's request for submission of the credentialing packet within 15 business days after the postmarked date shall be referred to the HRB for employment review in accordance with DMH Policy 605.1 and other personnel policies and procedures that may apply.
- 4.6 Once a completed credentialing packet is received, the CVO shall begin the credentialing process.
 - 4.6.1 Graduation from an accredited medical school shall be verified with the American Medical Association Masterfile or through the California Department of Consumer Affairs.



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- 4.6.2 Valid and current California State Physician and Surgeon’s License shall be verified with the Medical Board of California or the Osteopathic Medical Board of California.
- 4.6.3 Physician Board certification shall be verified with the American Board of Medical Specialties or the American Medical Association Masterfile.
- 4.6.4 Board eligibility shall be verified with the American Medical Association website or Masterfile to determine completion of residency training.
- 4.6.5 Completion of an accredited Fellowship program for Board certified applicants shall be verified with the American Board of Medical Specialties or the American Medical Association Masterfile.
- 4.6.6 Completion of an accredited Fellowship program for Board eligible applicants shall be verified with the training institution.
- 4.6.7 Valid and current DEA certification shall be verified with the American Medical Association Masterfile or through the National Technical Information Service (NTIS).
- 4.6.8 For international medical school graduates who graduated prior to 1986, verification shall be with the medical school. For international medical school graduates who graduated 1986 or later, certification by the ECFMG shall be verified with the ECFMG.
- 4.6.9 Written clarification shall be obtained when gaps greater than six months exist in work history by the physician.
- 4.6.10 History of malpractice resulting in settlements or judgments paid by or on behalf of the practitioner over the past five (5) years shall be verified with the National Practitioner Data Bank (NPDB).
- 4.6.11 Eligibility to participate in Federally funded health care programs shall be verified with the Office of the Inspector General and the Medi-Cal Suspended and Ineligible list.
- 4.6.12 Adverse licensure and clinical privileges actions shall be verified with the NPDB and the institution, if applicable.
- 4.7 Credentialing applicants shall have the right, upon request to be informed of the status of their credentialing application by contacting the DMH Credentialing Coordinator.

Minimum Criteria for Accreditation Into the Department of Mental Health

- 5.1 In addition to meeting general Los Angeles County and DMH employee standards, the following minimum criteria must be met for consideration of a credentialing applicant to be employed by



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DMH. Additional criteria listed in Section 7.1 shall not be reviewed unless minimum criteria are met. These minimum criteria are indicated in the credentialing application.

5.1.1 Graduation from an accredited medical school.

5.1.1.1 Physicians who graduated from international medical schools in 1986 or later must have ECFMG certification.

5.1.2 Psychiatrists must have attained Board certification or be eligible for examination to receive certification by the American Board of Psychiatry and Neurology. A copy of the certificate of completion of psychiatric residency training must be submitted with the application materials for those psychiatrists who are not Board certified.

5.1.3 Other physicians must have attained Board certification or be eligible for examination to receive certification by the applicable Board. A copy of the certificate of completion of residency training must be submitted with the application materials for those physicians who are not Board certified.

5.1.4 Psychiatrists working with children and adolescents must have attained Board certification, or be eligible for examination to receive certification, in Child and Adolescent Psychiatry.

5.1.5 Valid, current California State Physician and Surgeon's license authorized by the Board of Medical Examiners of the State of California.

5.1.6 Valid, current, and unrestricted DEA certificate.

5.1.7 Absence of any pending or current disciplinary Board licensure action that has resulted or may result in the reduction, suspension, probation, and/or termination of the physician's license. If an action is pending, minimum criteria are not met until the pending matter is closed with no discipline imposed.

5.1.8 Absence of any current or pending sanctions by Federally funded regulatory agencies including Medicare/Medi-Cal and any other public regulatory agency.

5.1.9 Submission of a completed, signed, and dated Credentialing Application form with all required documents attached as indicated on the application.

5.1.10 Absence of falsification or material omission on the Credentialing Application.



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CVO Notification of an Adverse Determination Regarding Minimum Criteria Requirements

- 6.1 The CVO shall notify HRB and OMD when there is an adverse determination for prospective physician employees regarding minimum requirements.
 - 6.1.1 The CVO shall forward all of the prospective physician employee's credentialing materials to HRB, the Custodian of Records.
- 6.2 OMD shall notify the prospective physician employees of the criteria that were not met and that further consideration of the application will not occur until all minimum requirements have been satisfied.
 - 6.2.1 Applicants who are prospective employees have no right of appeal when the application is denied due to failure to meet minimum credentialing requirements.
- 6.3 The CVO shall notify HRB and OMD when there is an adverse determination for physician employees regarding minimum requirements.
 - 6.3.1 The CVO shall forward all of the physician employee's credentialing materials to the DMH Credentialing Coordinator.
- 6.4 OMD shall notify the physician employee of the minimum criteria that were not met and of his/her right to submit a written response that shall be included in the administrative review by the CRC.
- 6.5 The CRC shall conduct an automatic administrative review when there is an adverse determination for physician employees regarding minimum criteria requirements.

Additional Criteria for Accreditation into the Department of Mental Health

- 7.1 Credentialing applicants who meet the minimum credentialing criteria listed in Section 5.1 shall be reviewed by the CVO for the following additional criteria:
 - 7.1.1 Absence of a history of involvement in malpractice suits, arbitrations, or settlements in the past five (5) years in accordance with the criteria set forth below. Waiver of this requirement can be made only by review of the DMH CRC. Evidence must exist that any such history does not adversely affect the applicant's ability to perform his/her professional duties.
 - 7.1.1.1 No more than three malpractice lawsuits, arbitrations and/or settlements within the last five (5) years greater than \$100,000 in aggregate.



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- 7.1.1.2 No single judgment, arbitration or settlement within the last five (5) years that is greater than \$100,000.
- 7.1.1.3 No licensing Board or Specialty Board action as a result of a malpractice action within the last five (5) years.
- 7.1.1.4 All pending malpractice suits, arbitrations or judgments are reviewed by the DMH CRC.
- 7.1.2 Absence of a history (within the most recent ten (10) years) of disciplinary actions affecting applicant’s professional license, DEA certification, or other required certification. Waiver of this requirement can be made only by review of the CRC. Evidence must exist that any such history does not adversely affect the applicant’s ability to perform his/her professional duties.
- 7.1.3 Absence of a history of sanctions by Federally funded regulatory agencies including Medicare/Medi-Cal and any other public regulatory agency. Waiver of this requirement can be made only by review of the CRC. Evidence must exist that any such history does not adversely affect the applicant’s ability to perform his/her professional duties.
- 7.1.4 Absence of a history of alcohol and chemical dependency/substance abuse. Waiver of this requirement can be made only by review of the CRC. Evidence must exist that any such history does not adversely affect the applicant’s ability to perform his/her professional duties.
- 7.1.5 Absence of a physical or mental impairment that would make the applicant unable, with reasonable accommodations, to provide professional services within his/her area of practice, without posing a direct threat to the health and safety of others. Waiver of this requirement can be made only by review of the CRC. Evidence must exist that any such condition does not adversely affect the applicant’s ability to perform his/her professional duties.
- 7.1.6 Affirmative responses to the attestation questions shall be reviewed by the CRC. Evidence must exist that the subject matter in question does not adversely affect the applicant’s ability to perform his/her professional duties.

CVO Notification of an Adverse Determination Regarding Additional Requirements

- 8.1 The CVO shall notify HRB and OMD when there is an adverse determination for credentialing applicants regarding additional requirements.



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- 8.1.1 The CVO shall forward all credentialing materials to HRB, the Custodian of Records, when no adverse determination is found.
- 8.1.2 The CVO shall forward all credentialing materials to the DMH Credentialing Coordinator when there is an adverse determination.
- 8.2 OMD shall notify all credentialing applicants of the CVO's findings.
 - 8.2.1 When there is an adverse determination, OMD shall notify the credentialing applicant of the criteria that were not met and of the applicant's right to submit a written response that shall be considered in the administrative review by the CRC.
- 8.3 The CRC shall conduct an automatic administrative review when there is an adverse determination.

Referral to the DMH Credentialing Review Committee

- 9.1 Credentialing applications shall be referred to the DMH CRC when:
 - 9.1.1 The credentialing applicant fails to meet the criteria listed in Sections 5.1 and 7.1.
 - 9.1.2 If any aspect of the application process raises concern regarding practice history or personal/professional characteristics that may influence the quality of care rendered by that potential applicant, the file shall be forwarded to the CRC for review.
 - 9.1.3 Current physician employees present special circumstances as defined in Section 3.5 of Policy 613.2, "DMH Physician Employee Credentialing Review Committee".
- 9.2 Referral to the CRC may result in a recommendation to deny credentialing and employment, in accordance with Policy 613.2, "DMH Physician Employee Credentialing Review Committee."

Applicant Credentialing and Approval for Employment with DMH

- 10.1 A credentialing applicant is approved for credentialing after the following requirements have been met:
 - 10.1.1 Application form is completed, accurate, signed, and dated.
 - 10.1.2 All required documents are included with the application form and are current.
 - 10.1.3 All criteria listed in Section 5.1 are met.



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10.1.4 All criteria listed in Section 7.1 are met.

10.2 When both minimum and additional criteria are met, the CVO will notify both OMD and the credentialing applicants of the effective date of accreditation.

AUTHORITY

Department of Mental Health Policy 605.1, Discipline

Department of Mental Health Policy 613.2, Physician Employee Credentialing Review Committee

REVIEW DATE

This policy shall be reviewed on or before September 2009.