

Health Care Agency Behavioral Health Services Policies and Procedures Section Name: Compliance
Sub Section: Credentialing
Section Number: 07.04.05

Policy Status: New Revised

SIGNATURE DATE APPROVED

Director of Operations

Behavioral Health Services Signature on File 7/13/2020

**SUBJECT:** Individual Provider Credentialing Committee

### **PURPOSE:**

To ensure that providers providing services to Medi-Cal beneficiaries receiving services through the Orange County Medi-Cal Mental Health Plan (hereby referred to as Orange MHP) and/or the Orange County Drug Medi-Cal Organized Delivery System (DMC-ODS) meet the credentialing requirement of those programs.

# **POLICY:**

Behavioral Health Services (BHS) shall have a Credentialing Committee to ensure that providers providing services to Medi-Cal beneficiaries receiving services through the Orange MHP and/or the DMC-ODS undergo a credentialing process that meets the credentialing requirements of those programs. The credentialing process shall assure that initial, ongoing, and terminal reviews of potential or actual providers are performed in accordance with written criteria and procedures.

#### SCOPE:

Staff at County operated and County contracted clinics providing services to Medi-Cal beneficiaries under the Orange MHP and DMC-ODS. Network providers in the County's Administrative Services Organization (ASO) are credentialed by the ASO per contractual obligations.

#### REFERENCES:

DHCS MHSUD Information Notice 18-019 (IN-18-019) - Provider Credentialing and Re-Credentialing for Mental Health Plans (MHPs) and Drug Medi-Cal Organized Delivery System (DMC-ODS) Pilot Counties

BHS P&P BHS Credentialing and Re-Credentialing Requirements

## **DEFINITIONS:**

Credentialing – Credentialing is a uniform process for verifying, through primary source, the education, training, experience, licensure and overall qualifications of behavioral health and substance use disorder services providers.

Credentialing Committee – a multi-disciplinary body approved by the Deputy Agency Director of Behavioral Health Services (BHS), or designee to ensure that providers providing services to Medi-Cal beneficiaries meet or continue to meet credentialing/re-credentialing requirements.

Credentialing Verification Organization (CVO) – an agency delegated to gather, verify and process all information necessary to complete the credentialing and re-credentialing process.

#### PROCEDURE:

- I. Committee Membership
  - A. The Credentialing Committee shall be composed of a multi-disciplinary body approved by the Deputy Agency Director of Behavioral Health Services (BHS), or designee.
  - B. Committee membership may include, at a minimum:
    - 1. Authority and Quality Improvement Services (AQIS), Quality Assurance and Performance Improvement Division Manager and at least one (1) and no more than three (3) AQIS Support Teams Program Managers.
    - 2. Adult and Older Adult Behavioral Health Services (AOABH), at least one (1) and no more than two (2) AOABH Division Managers and at least one (1) and no more than three (3) AOABH Program Managers.
    - 3. Children, Youth and Prevention Behavioral Health Services (CYPBH), at least one (1) and no more than two (2) CYPBH Division Managers and at least one (1) and no more than three (3) CYPBH Program Managers.
    - 4. Behavioral Health Services Medical Director or designee and at least one (1) and no more than three (3) Associate Medical Directors.
    - 5. The committee chair shall be the Quality Assurance and Performance Improvement Division Manager of AQIS or designee.
  - C. Staff support for the credentialing committee shall be provided by AQIS Managed Care Support Team (MCST).
  - D. Credentialing committee members shall be bound by confidentiality in the discharge of their duties and agree to maintain any personally identifiable or sensitive information they may encounter during their participation in the credentialing committee only within this system.
  - E. Committee membership participation will be determined based on the relevant service area under review and not all committee members will need to convene at one time.

# II. Committee Function

- A. Meet at least semi-annually or as needed to:
  - Advise BHS in the development and/or approval of standards for credentialing and re-credentialing of independent professional contractors for the Orange MHP and for DMC-ODS, including the credentialing protocol as appropriate.
  - Develop and maintain policies and procedures (P&P) that include initial credentialing and re-credentialing of County and County contracted employees providing services for the Orange MHP and for DMC-ODS. These P&Ps shall be reviewed and approved by the BHS Director of Operations.
  - 3. Review the results and work flow of the credentialing processes implemented by AQIS MCST and recommend improvements as needed to ensure consistency with the application of the credentialing process.
  - 4. Review and recommend quality improvement or quality assurance activities when individual providers who are credentialed show a history of past or present adverse entries into any of the databases reviewed as part of the credentialing process.