



Briefings on

Credentialing

The monthly newsletter
for medical staff services
professionals

—INSIDE—

LOA policy language

On p. 3, see sample language for a leave of absence policy that acknowledges medical staff members called to active military duty.

'Designated source' disclaimer

Turn to p. 5 to see the language included on the CertiFACTS Web site that confirms it's a legitimate designated source for board-certification information.

JCAHO experience shared

On p. 6, an MSSP from Chicago tells readers what happened during the credentials interview of her hospital's recent JCAHO survey.

Survey survival tips

Find out four great ways to prepare for your upcoming JCAHO survey. See p. 7.

How to handle physicians called to active military duty

Include military deployment in your leave of absence policy

Your facility should prepare to assist physicians who must temporarily leave their practice for military duty.

Industry insiders advise medical staff services professionals (MSSPs) and physician leaders to handle these individuals through their hospitals' leave of absence (LOA) process.

Your medical staff bylaws should outline the general process for requesting an LOA and returning to practice once it's over. At the same

time, your LOA policy should allow for flexibility when special circumstances arise, military or otherwise, insiders say. Most important, make sure your policies take into account JCAHO standard **MS.5.11** (reappointment cannot exceed a two-year period). If a physician's reappointment expires during his or her leave, make every effort to collect the necessary reapplication materials on time and be sure to document those efforts.

Facilitate the LOA

If a physician on your

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JCAHO says hospitals can accept primary-source data from designees

Make sure the designee is legit, document appropriately

Effective immediately, hospitals may accept credentials information provided by an organization that is designated by a primary source as its agent, according to the January *Joint Commission Perspectives*. This change is reflected in the intent statement of Medical Staff standards **MS.5.4.3.1–MS.5.4.3.2** in the *Comprehensive Accreditation Manual for Hospitals*.

Although this tweak to the standards seems reasonable and simple to follow, industry insiders

urge medical staff services professionals (MSSPs) to use caution when collecting primary-source information from so-called "designated organizations." Don't assume that every Web site or telephone hotline that claims to provide credentialing data on behalf of a primary source is legitimate.

Do your homework and keep documentation in the medical staff office that shows you are indeed using an official, acceptable designated source.

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a hospital is unable to contact an applicant's medical school for degree verification, the JCAHO will accept verification from one of the following equivalent sources:

- The American Medical Association Physician Masterfile
- The American Osteopathic Association Physician Profiles
- The Education Commission for Foreign Medical Graduates (for foreign medical schools)

Make sure designee is legit

Once you're clear on the difference between "designated" and "equivalent" sources, make sure the designated sources you're using or plan to use are indeed legitimate. This step entails a quick phone call or e-mail to the primary source itself (e.g., a medical school) to confirm that it has authorized Entity X (e.g., the National Student Clearinghouse) to provide credentials information to health care organizations on its behalf.

"The Internet is so vast, and so many [Web] sites claim to provide credentials information that it would be easy for someone—especially an MSSP new to the field—to use a source that's not really a designated source," Giles cautions.

If you don't use a legitimate designated source, it could mean trouble with the JCAHO.

Document, document, document

After you've confirmed the legitimacy of a designated source, get that confirmation in writing from the primary source, industry insiders say. They strongly recommend taking this precaution, even though it's not included in the JCAHO standards.

"Any time you deal with a regulator, the more documentation you have to protect yourself, the better," says **Judi Atkins**, consultant with McKenna & Associates in Charleston, WV.

"Get a written letter directly from the primary source," suggests Schirling. "Or if the designated source's Web site has a notice or disclaimer explaining its relationship with the primary source, print it out for documentation."

For example, the National Student Clearinghouse provides documentation for hospitals and other organizations upon request. Requests must be submitted by e-mail to degreeverify@studentclearinghouse.org.

See also the box below for the disclaimer language from the CertiFACTS Web site. ■

Designated source disclaimer

Below is the disclaimer language included on the Web site of CertiFACTS Online (www.certifacts.org), a contracted designated source of the American Board of Medical Specialties (ABMS). Medical staff services professionals can print out this language as documentation that CertiFACTS is indeed a legitimate designated source.

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Note: The CertiFACTS Web site also includes official letters from the JCAHO and NCQA stating that both accreditors accept this service as a designated source. To view these letters, go to www.certifacts.org/jcabonca.htm. ■

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