

BARRY COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

POLICY AND PROCEDURE MANUAL

Policy: 12-A Credentialing Records and Investigations		Application: BCCMHA Staff and Providers
Approved: <u><i>Rich Thiemkey</i></u> Richard Thiemkey, MA Executive Director		
Reviewed 5/6/2026	Revised 3/6/2025	First Effective 10/26/2011

PURPOSE

The policy establishes guidelines for confidentiality of the management of records and investigations during the credentialing process. To establish and implement guidelines for the storage, maintenance, and destruction of credentialing documents.

POLICY

BCCMHA will maintain confidentiality in all aspects of its credentialing process. Each credentialed provider will have an individual record maintained and will be kept confidential. Each file shall include the initial credentialing application and supporting documentation, all subsequent re-credentialing applications, information gained through primary source verification and other pertinent information used in credentialing decisions. BCCMHA is to conduct additional review and/or investigation of a provider if the credentialing process reveals information that increases factors that may impact the quality of care, health and safety, or services provided to those individuals served by a BCCMHA contract provider.

PROCEDURES

MANAGEMENT AND STORAGE

Credential files and information, along with minutes and records of the Credential Committee proceedings, will be maintained in a secure environment. Credentialing records will be kept within the Universal Credentialing Module hosted by MDHHS. Other records will be placed in Relias, with limited, administrative access. Access to credentialing information is limited to a “need to know” basis. Access is approved by the Provider Network Specialist.

Hard copies of credentialing files for individuals and organizations are kept for seven years after the termination of the contract. Hard copies of credentialing records may be destroyed by shredding after they have been kept for the minimum of seven years. Electronic credentialing files may be kept indefinitely.

INVESTIGATION

During the course of completing the responsibilities of the credentialing process, BCCMHA administrative staff or Credentialing Committee members may encounter individually identifiable health information. If this occurs, staff and committee members are required to preserve confidentiality.

If information is revealed during the credentialing process that leads the Credentialing Committee or a committee member to believe that the safety of a client could be at risk, the committee may cause the application process or current credentialing to be pended and a review or investigation to begin. Information that may lead to the belief and reporting that a client's safety could be at risk may include, but not limited to:

1. Evidence of malpractice litigation
2. Missing information on the credentialing application
3. Not providing requested information
4. Inconsistent information
5. Annual site review reports
6. Licensing reports

BCCMHA may immediately suspend, pending investigation, the participating status of a provider, who in the opinion of the Executive Director and/or Medical Director, is engaged in behavior or who is practicing in a manner that appears to pose a significant risk to the health, welfare, or safety of clients. The immediate suspension of a network provider will facilitate an expedited investigation and action to ensure the health, welfare, and/or client safety is addressed in a timely and sufficient manner that is relevant to the situation leading to the suspension.

BCCMHA's Provider Network Specialist may contact the provider and request missing information, clarification of inconsistent information, a written explanation of the malpractice litigation, or other pertinent information related to the situation. In addition, a review will be completed of the site review report and subsequent corrective action plan(s). If the evidence submitted by the provider is not deemed sufficient to correct the concerning issue(s), the provider will be asked to present evidence that the issue has been corrected. For other situations the committee may recommend requesting information and the necessary evidence from the provider by the Provider Network Specialist or other designated staff person.

As soon as the review and/or investigation are complete, the information will be brought back to the committee for review. The committee will act upon the information from the review/investigation, make recommendations regarding the provider and forward this to the Executive Director for future action as appropriate. Those network providers whose review and/or investigation results in the suspension of participating as a member of BCCMHA's provider network will be offered the ability to make an appeal and begin the dispute resolution process as outlined in the agency's Provider Network Dispute and Appeals Policy.

REFERENCES

SWMBH Policy