

IDENT:	C&E 5
Type of Document:	Policy
Type of Policy:	Department
Applicability:	All
Owner's Dept:	Credentialing & Enrollment
Title of Owner:	Manager
Title of Approving Official:	UVMHN C&E Medical Director
Date Released (Published):	Amended and Restated 03/16/2018
Next Review Date:	1 year from last Date Approved



**SUBJECT:** Clean Files and Expedited (Fast-Track) Credentialing

**PURPOSE:**

The University of Vermont Health Network Credentialing & Enrollment (“UVMHN C&E”) Department’s Clean File review process expedites the credentialing and recredentialing process for practitioner files that meet all criteria. Expedited credentialing is utilized only in limited circumstances based on need.

**POLICY STATEMENT:** The (UVMHN C&E) Department has established a process to review practitioner files that do not contain any adverse findings. Files meeting established criteria are known as (“Clean Files.”) Criteria shall be defined for meeting the Clean File standard. The Credentials Committee need not review and render an individual decision about each of these practitioners. Clean Files shall be available to the Credentials Committee upon request. The UVMHN C&E Department shall establish processes for expedited credentialing (“fast-track”) when the situation warrants.

**PROCEDURE:**

**Practitioner Files Meeting Criteria**

1. Practitioners for initial credentialing or recredentialing who do not require individual discussion by the Credentials Committee (commonly referred to as “Clean Files”) are those where:
  - 1.1. Eligibility criteria are met without exception.
  - 1.2. All requested information is present.
  - 1.3. No discrepancies exist in the information provided by the practitioner and the information received from verification sources.
  - 1.4. There is no documentation by the practitioner of any inability to perform the essential functions of the position, with or without accommodation.
  - 1.5. The practitioner affirms lack of present illegal drug use.
  - 1.6. There is no history of loss of professional license or felony convictions.
  - 1.7. There is no history of loss or limitation of privileges or disciplinary action(s).
  - 1.8. There is no history of malpractice settlements.
  - 1.9. There are no unexplained work gaps of six (6) months or more.
  - 1.10. There have never been any action(s) against the practitioner’s professional license.
  - 1.11. There has never been any Medicare or Medicaid sanction activity.
  - 1.12. There are no negative reports from credentials verification sources or monitoring agencies.
  - 1.13. There are no substantiated adverse events involving the practitioner.

### **Practitioner Files Not Meeting Criteria**

1. Practitioners for initial credentialing or recredentialing who require individual discussion by the Credentials Committee are those where there is/are:
  - 1.1. Failure of a practitioner to meet eligibility criteria.
  - 1.2. Failure to provide information, blank sections or responses to questions after the information has been requested from the practitioner.
  - 1.3. Discrepancies in information provided by the practitioner and information received from verification sources.
  - 1.4. Indication by the practitioner of any inability to perform the essential functions of the position with accommodation.
  - 1.5. Failure of the practitioner to affirm lack of present illegal drug use.
  - 1.6. Any history of loss of license or felony convictions.
  - 1.7. Any history of loss or limitation of privileges or disciplinary action(s).
  - 1.8. Any history of liability settlements.
  - 1.9. Any unexplained work gaps of six (6) months or more.
  - 1.10. Any history of professional license sanctions.
  - 1.11. Any history of Medicare or Medicaid sanctions.
  - 1.12. Failure of a practitioner to have professional liability insurance coverage in the limits required by the Credentialing and Enrollment Department.
  - 1.13. A substantiated adverse event(s) involving the practitioner.
  - 1.14. Failure of a physician to provide an alternative arrangement for inpatient coverage for patients should any of them require hospitalization; practitioner does not have hospital privileges.

### **Clean File Review Process**

1. The Medical Director actively participates in credentialing and recredentialing activities.
2. The Medical Director or designee:
  - 2.1. Reviews the list of all practitioners who meet the established Clean File criteria.
    - 2.1.1 Enters his or her hand-written signature or initials and the date of the Clean File review on the list of practitioners meeting the Clean File criteria. Provides a unique electronic identifier as evidence of review when the review is via email or other electronic method. This is the credentialing date.
    - 2.1.2 Presents the list of practitioners whose files have been approved by this method to the Credentials Committee.
3. The UVMHN C&E Department notifies Payors of the decision after the Credentials Committee meeting.

### **Expedited (Fast-Track) File Review Process**

1. The Medical Director actively participates in credentialing and recredentialing activities.
2. The Medical Director or designee: Reviews the files of practitioners who meet the established Clean File criteria and for whom a request for expedited credentialing has been received.

- 2.2 Enters his or her hand-written signature or initials and the date of the Clean File review on the list of practitioners meeting the Clean File criteria. This is the credentialing decision date.
  - 2.3 Provides a unique electronic identifier as evidence of review when the review is via email or other electronic method.
  - 2.4 Presents the list of practitioners whose files have been approved by this method to the Credentials Committee.
3. The UVMHN C&E Department notifies Payors of the decision the week the practitioner is approved.

**MONITORING PLAN:** Policy will be monitored in accordance with Policy C&E 6 Ongoing Monitoring.

**DEFINITIONS:**

“Credentials Committee” means a committee appointed by the UVMHN C&E Board of Directors and chaired by the UVMHN C&E Medical Director to credential and recredential practitioners.

“Medical Director” means the practitioner appointed by the UVMHN C&E Board of Directors to be the chairperson to the UVMHN C&E Credentials Committee and to be responsible for the decisions of the Credentials Committee

“Practitioner” means the UVMHN Affiliate employed practitioners, including but not limited to, physicians, oral surgeons, podiatrists, nurse practitioners, physician assistants, psychologists, social workers, other masters’ level clinicians, and all other health care practitioners.

“The University of Vermont Health Network’s Affiliates” (“UVMHN Affiliates”) means The University of Vermont Medical Center, The University of Vermont Medical Group – NY, Central Vermont Medical Center, Champlain Valley Physicians Hospital, Elizabethtown Community Hospital, and any other entity to join UVMHN as an Affiliate.

**RELATED POLICIES:**

- C&E 1 Credentials Plan
- C&E 10 Credentialing & Recredentialing Processes

**REFERENCES:** National Committee for Quality Assurance  
Vermont Rule H-2009-03

<b>Date Reviewed/ Revised/Approved:</b>	Restated/Reformatted from Credentials Plan approved: 2/13/2012, 11/26/2012, 4/19/2013, 10/3/2013, 8/1/2014, 2/20/2015, 7/17/2015, 6/20/2016, 01/20/2017, 03/16/2018
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