



Directions: Please complete each column with information for each personnel file selected for review and upload completed tool to Box. MSHN staff will verify information provided in this document using actual personnel files during review.

MSHN –Individual Practitioner Credentialing Review Tool	
Provider: Click or tap here to enter text.	Date of Review: Click or tap to enter a date.
Reviewer: Click or tap here to enter text.	

	Staff 1:	Staff 2:	Staff 3:	Staff 4:	Staff 5:	Staff 6:	Staff 7:	Staff 8:
<i>Utilize columns to identify Staff Initials/Title/Date of Hire</i>								
<i>Credentialing Application Date</i>								
<i>Date of Last Credentialing Decision (Recredentialing only)</i>								

Initial Credentialing File Review								
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Application Elements								
1. Application includes education								
2. Application includes 5-year work history								
3. If there are gaps in professional work history, explanation is provided								
4. Attestation- Lack of present illegal drug use								
5. Attestation - Any history of loss of license								
6. Attestation- Any history of felony convictions								
7. Attestation- History of loss or limitation of privileges or disciplinary action.								
8. Attestation- Ability to perform duties of job with or without accommodation.								



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9. Attestation- Correctness and completeness of the application.								
Primary Source Verification (PSV) Completion and Timeliness								
10. State License								
11. Board certification (MCBAP, AMA, etc.), or highest level of credentials attained, if applicable, or completion of any required internships/residency programs, or other postgraduate training								
12. Graduation from an accredited school (If licensed, LARA PSV will meet this PSV).								
13. If the individual practitioner undergoing credentialing is a physician, then physician profile information obtained from the AMA or AOA may be used to satisfy the primary source requirements of 8, 9, and 10 above.								
14. NPDB/HIPDB query or, in lieu of the query, verified all of the following: -Minimum 5-year history of professional liability claims resulting in judgement or settlement. -Disciplinary status with regulatory board or agency. -Medicare/Medicaid sanctions.								
15. Criminal Background Check (indicate source/date)								
16. If CBC check includes history, there is evidence the organization has reviewed to ensure history does not disqualify the provider.								
17. Proof of Liability Coverage (if applicable)								
Credentialing Decision								
18. Credentialing approved by qualified credentialed practitioner and/or credentialing committee								
19. Credentialing decision was made within 90 days of receiving application.								



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20. Evidence of credentialing decision letter (If adverse decision, letter must include appeal information)								
21. If employee was granted temporary privileges, verify all verification was completed as required by initial credentialing. For SUD, a MSHN Temporary privileging form was submitted and is in file if applicable.								
Re-Credentialing File Review								
Application/Attestations								
1. Attestation Lack of present illegal drug use								
2. Attestation- Any history of loss of license								
3. Attestation- Any history of felony convictions								
4. Attestation - Any history of loss or limitation of privileges or disciplinary action.								
5. Attestation- Ability to perform duties of job with or without accommodation.								
6. Attestation- Correctness and completeness of the application.								
Primary Source Verification Completion and Timeliness								
7. State licensure								
8. The PIHP verified board certification, or highest level of credentials attained, if applicable, or completion of any required internships/residency programs, or other postgraduate training.								
9. The PIHP completed a NPDB/HIPDB query, or in lieu of the query, verified all of the following:								



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-Minimum 5-year history of professional liability claims resulting in judgement or settlement. -Disciplinary status with regulatory board or agency. -Medicare/Medicaid sanctions.								
10. If the individual practitioner undergoing credentialing is a physician, then physician profile information obtained from the AMA or AOA may be used to satisfy the primary source requirements of 7,8, and 9 above.								
11. Evidence of current liability insurance at time of credentialing								
Ongoing Monitoring and intervention if appropriate, of provider sanctions, complaints, and quality issues								
12. Medicare/Medicaid Sanctions								
13. State Sanctions or limitations on licensure, registration or certification								
14. Mid-cycle license and certification expirations								
15. Member Concerns which include appeals and grievances (complaints) information.								
16. Quality Issues								
17. Criminal Background Checks (at minimum every 2 years)								
18. If CBC check includes history, there is evidence the organization has reviewed to ensure history does not disqualify the provider.								
19. Mid-Cycle liability insurance expirations								
Recredentialing Decision								
20. Credentialing approved by qualified credentialed practitioner and/or credentialing committee.								
21. Credentialing decision was made within 90 days of receiving application.								
22. Recredentialing was completed timely within 2 years of initial or last credentialing decision.								



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23. If the credentialing was denied, the provider was given written notice of the credentialing decision and the appeal process was included in the letter.								
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Staff Credentialing Findings and Corrective Action

Strengths:

Findings:

Recommendations: