

**Advisory Committee on Physician Credentialing Information
Room 500A, Public Service Building,
255 Capitol Street NE, Salem Oregon 97310**

June 20, 2006

Members Present: Rebecca Burdg, CPMSM CPCS, Chair; Valery Kriz, CPMSM, Amy Lyons, CPMSM (arrived at 11:20 am), Julie McCann, CPCS; Kerry Gonzales; Joan Brock, RN HCA.

Members Absent: Victor B. Richenstein, MD, Jean Steinberg, CPMSM, CMSR.

Guests: Teresa A. Ward, Mid-Valley IPA; June Myers, Oregon Dental Association.

Staff Present: Alison Little, MD MPH; Dorothy Allen.

I. Call to Order and Introductions

Rebecca Burdg, Chair, called the Advisory Committee on Physician Credentialing Information (ACPCI) meeting to order at 11:03 am in Conference Room 500A of the Public Service Building, 255 Capitol Street NE, Salem, Oregon.

New members Kerry Gonzales, Julie McCann and Joan Brock were introduced. Round table introductions followed.

Ms. Burdg read through sections of House Bill (HB) 2144 that clarify the committee's role and purpose, stressing that committee's direction is to keep the application focused on credentialing and regulatory requirements

Dr. Alison Little reviewed the ACPCI Flowchart for amending the Oregon Practitioner Credentialing and Recredentialing application, enumerating the necessary steps to have changes to the application accepted and finalized. The entire process takes approximately three months.

The flowchart can be found on the ACPCI's website:

http://www.ohppr.state.or.us/advisory/index_advisory.htm

II. Old Committee Business

Review and Approve Minutes

MOTION: To accept the September 13, 2005 Minutes. MOTION CARRIES: 6-0.

Review last application changes

Ms. Burdug reviewed the committee's last year decision to not make any changes to the application.

III. New Committee Business

A. Recommendations for Application Changes

Dr. Little reported there have been no recommendations, at this time, to amend the application.

The committee reviewed the solicitation letter boilerplate, making changes to the dates. Ms. Julie McCann will email Ms. Dorothy Allen the Oregon Association of Medical Staff Services (OAMSS) mailing list for inclusion in the letter mailings. Ms. Allen will provide a PDF version of the finalized letter to Ms. Amy Lyons to be posted on their website.

B. Committee Membership

The committee reviewed the recruitment letter boilerplate, making changes to the dates. A vacancy exists for a Physician Organization representative. Ms. Allen will notify the members in August to report any responses to the recruitment letter.

C. Attestation Questions

The question posed is: *If a professional license in another state becomes inactive, must "yes" be selected?*

Section XX. ATTESTATION QUESTION A. Has your license, certification, or registration to practice your profession, Drug Enforcement Administration (DEA) registration, or narcotic registration/certificate in any jurisdiction ever been denied, limited, suspended, revoked, not renewed, voluntarily or involuntarily relinquished, or subject to stipulated or probationary conditions, or have you ever been fined or received a letter of reprimand or is any such action pending or under review?

The members discussed this question in detail, noting that in their organizations applicants are asked to mark "yes" and offer a written explanation.

Further, this committee has not taken a position on potential legal questions and have left organizations who use the application to interpret each question and made decisions on what is acceptable and not acceptable.

MOTION: To direct Ms. Allen to draft a response to the question's author to be reviewed by Ms. Burdq for her signature. MOTION CARRIES: 6-0.

D. "Attachment A" Question

The question posed is: *Can a private organization create rules directly opposite of the stated instructions?*

Background: A credentialing organization is requiring that a *Attachment A* be signed, even though the ACPCI Application instructions state that a signature is only required if the page or question is applicable.

The members discussed this issue in detail, referred back to HB 2144. It is noted nothing prevents a credentialing organization from have more strict guidelines and requirements. Organizations may also require that an addendum of their creation is completed.

Decision point:

"Intent of this committee is that pages are only signed if applicable; however, a credentialing organization can decide to have more stringent rules, including adding required addendums and requiring additional signatures."

Ms. Allen will advise the question's author of the committee's decision.

E. Taxonomy Codes

Taxonomy codes located in Attachment B.

Family Practice has changed names to Family Medicine. It was suggested that next time changes are made to the application, that the name is changed.

The website should be checked for current version of taxonomy codes to see if there is a new version.

F. Other Discussion

Suggestions:

- Add the Board of Medical Examiner's (BME) licensing number to the application next time there is another updated.
- Change Professional Liability Insurance to 10 years of history, rather than the current 5 year requirement.

Dr. Little announced that she is leaving her position to going to the Center for Evidence Based Research. The Health Services Commission is recruiting for a Medical Director who will assist staffing ACPCI.

IV. Adjournment

The meeting was adjourned at 12:40 p.m. with a reminder that the next meeting will be Tuesday, September 12, 2006, in Conference Room 500A of the Public Service Building, 255 Capitol Street NE, Salem, Oregon.

Advisory Committee on Physician Credentialing Information
Room 500A, Public Service Building
255 Capitol Street NE, Salem Oregon 97310
September 12, 2006

Members Present: Rebecca Burdg, CPMSM CPCS, Chair; Valery Kriz, CPMSM, Amy Lyons, CPMSM (arrived at 11:20 am), Julie McCann, CPCS; Joan Brock, RN HCA (via teleconference); Victor B. Richenstein, MD, Jean Steinberg, CPMSM, CMSR.

Members Absent: Kerry Gonzales.

Staff Present: Dorothy Allen.

I. Call to Order

Rebecca Burdg, Chair, called the Advisory Committee on Physician Credentialing Information (ACPCI) meeting to order at 11:06 am in Conference Room 500A of the Public Service Building, 255 Capitol Street NE, Salem, Oregon.

Ms. Burdg read through sections of House Bill (HB) 2144 that clarify the committee's role and purpose, stressing that committee's direction is to keep the application focused on credentialing and regulatory requirements. She also reviewed the ACPCI Flowchart for amending the Oregon Practitioner Credentialing and Recredentialing application, enumerating the necessary steps to have changes to the application accepted and finalized. The entire process takes approximately three months.

The flowchart can be found on the ACPCI's website:

http://www.ohppr.state.or.us/advisory/index_advisory.htm

The members also reviewed Amended Oregon Administrative Rule 836-052-0700 which carries language regarding the use of this Advisory Committee's application. It reads in part: (2) Each health care service contractor shall use the application forms adopted in section (1) of this rule. (Please see Attachment A)

II. Old Committee Business

Review of Minutes:

Correction to page 2. Remove the word "both" from section III B. Committee Membership.

MOTION: To accept the June, 20 2006 Minutes with corrections. MOTION CARRIES: 7-0.

Membership Update

A vacancy exists for a Physician Organization representative. Ms. Burdg will contact former member James Kronenberg to see if he is able assist to with the recruitment efforts.

III. New Committee Business

Recommendations for Application Changes

Ms. Burdg, as a reminder, stated that the philosophy of this Committee (ACPCI) is to ensure the Oregon Practitioner Credentialing and Recredentialing Applications are kept as credentialing applications. The focus is to only add what is necessary for credentialing/recredentialing. Ms. Burdg said as they go through the solicited recommendations, the members need to ask themselves whether this is a recommendation for credentialing or would the recommendation be better off as an addendum question. Each health care organization may send out a letter requesting the other information (i.e., languages spoken, billing information, etc). Therefore, the applications are not cluttered with the unnecessary information that may be nice to have but really is not required in order to credential/recredential the practitioner. Also, when the application is changed, credentialing staff state-wide must re-key every application for every provider into the new format. Changes should be made to the application when they are required by a credentialing accreditation or regulatory body.

Suggestions reviewed are as follows:

Suggestion	Discussion	Action
From ACPCI member: Add the definition of 'peer' to Attachment C.	Peer means same training, same discipline. Consider using the exact language of the Joint Commission on Accreditation of Health Care Organizations.	<u>MOTION: To consider adding when the application is next changed. Hold for review next year. MOTION CARRIES: 7-0.</u>
From ACPCI member: Add the Board of Medical Examiner's (BME) licensing number to the application next time there is another update.	Physicians don't have the number generally and credentialing staff look it up online. If this field is left blank, the application is considered incomplete.	<u>MOTION: Do not add to application or consider further. MOTION CARRIES: 7-0.</u>

Suggestion	Discussion	Action
From ACPCI member: Change Professional Liability Insurance to 10 years of history, rather than the current 5 year requirement.	Members consider this a good suggestion, noting that some organizations currently require this on a separate addendum. However, it is not required by a credentialing accreditation or regulatory body.	<u>MOTION: To consider adding when the application is next changed. Hold for review next year. MOTION CARRIES: 7-0.</u>
From Julie Olmstead email: 1) Tentative start date 2) Emergency contact name and number 3) Marital status 4) Spouse name 5) Relationship of references, i.e. colleague, supervisor, etc.	1) Not credentialing related. 2) Not credentialing related. 3) Not credentialing related. 4) Not credentialing related. 5) This change would be helpful but is not a requirement.	1) Do not add or hold for further consideration. 2) Do not add or hold for further consideration 3) Do not add or hold for further consideration 4) Do not add or hold for further consideration <u>MOTION: To consider adding a field to indicate the relationship of reference when the application is next changed. Hold for review next year. MOTION CARRIES: 7-0.</u>
From 2005 Review		
On Page 7 – Section 16: Add areas for phone numbers for hospital or facility.	Facilities change ownership and contact information frequently. Physicians may not have the updated information, especially when they no longer are employed there.	<u>MOTION: To consider adding when the application is next changed. Hold for review next year. MOTION CARRIES: 7-0.</u>
Removal of a “Does Not Apply” checkbox in Section IX Continuing Medical Education of the Recredentialing application.	Suggestion appears cosmetic in nature rather than regulatory.	<u>MOTION: Not to add and to remove from future consideration. MOTION CARRIES: 7-0.</u>
Remove “if available” from all fax number fields.	Suggestion appears cosmetic in nature rather than regulatory.	<u>MOTION: Not to add and to remove from future consideration. MOTION CARRIES: 7-0.</u>

Suggestion	Discussion	Action
<p>From Ms. Jean Steinberg: Add the phrase "Have you ever voluntarily or involuntarily left or been discharged from medical school or subsequent training programs?" to the Attestation page.</p>	<p>Ms. Steinberg gave a specific example where this question would have revealed a physician's failure of a residency program. Ms. Burdg shared that the attestation question was carefully written and received a year of legal review before approved. Traditionally, these questions have not been revised. Ms. Brock pointed out, on page 5, <i>XII Residencies</i>: "Did you complete the program?" --For Steinberg's situation if the physician answered yes, that was an untruth. Changing the application may not resolve this particular issue.</p>	<p><u>MOTION: To consider adding when the application is next changed. Hold for review next year. MOTION CARRIES: 6-0</u></p>
<p>Ms. Kriz reports that there is a new version of taxonomy codes available for use.</p>	<p>Taxonomy codes are national specialty codes used by providers to indicate their specialty at the claim level.</p>	<p><u>MOTION: To add when the application is next changed. Hold for review next year. MOTION CARRIES: 7-0.</u></p>
<p><u>Final review of all suggestions</u></p>	<p>None of the suggestions are required by a governing accrediting body.</p>	<p><u>MOTION: To make no changes to the Oregon Practitioner Credentialing and Recredentialing Applications until there are regulatory changes required by a governing accrediting body: MOTION CARRIES: 6:0</u></p>

Membership Renewals

Ms. Amy Lyons and Ms. Joan Brock's terms are expiring but wish to continue serving. Ms. Burdg recommends their reappointment. Ms. Allen will complete the necessary paper work before the year's end.

Adjournment

The meeting was adjourned at 12:43 p.m. with a reminder that the next meeting will be in June, 2007.

ATTACHMENT A

Excerpted from: http://arcweb.sos.state.or.us/rules/0405_Bulletin/0405_ch836_bulletin.html

Adm. Order No.: ID 2-2005

Filed with Sec. of State: 3-1-2005

Certified to be Effective: 3-1-05

Notice Publication Date: 1-1-05

Rules Amended: 836-052-0700

Subject: This rulemaking amends the rule that adopts the Oregon Practitioner Credentialing Application and the Oregon Practitioner Recredentialing Application in order to incorporate recent changes recommended by the Advisory Committee on Physician Credentialing Information in the Office for Oregon Health Plan Policy and Research. The applications allow collection of uniform information needed by health care service contractors to credential and recredential physicians seeking designation as participating providers for health plans. The Director of DCBS and the Director of Human Services are required to adopt identical rules in a timely manner to carry out the recommendations.

The Oregon Practitioner Credentialing Application with the changes incorporated may be accessed at www.ohpr.state.or.us/advisory/CredentialMenu.htm. The Oregon Practitioner Recredentialing Application with the changes incorporated may be accessed at www.ohpr.state.or.us/advisory/RecredentialMenu.htm.

Rules Coordinator: Sue Munson--(503) 947-7272

836-052-0700

Physician Credentialing, Health Care Service Contractors

- (1) The Oregon Practitioner Credentialing Application and the Oregon Practitioner Recredentialing Application, both of which were approved by the Advisory Committee on Physician Credentialing Information (ACPCI) on September 28, 2004, and both of which carry that date, are adopted with respect to health care service contractors as Exhibits 1 and 2 to this rule.
- (2) Each health care service contractor shall use the application forms adopted in section (1) of this rule
- (3) This rule is adopted pursuant to the authority of ORS 442.807 for the purpose of enabling the collection of uniform information necessary for health care service contractors to credential physicians seeking designation as a participating provider for a health plan, thereby implementing ORS 442.800 to 442.807 with respect to health care service contractors.

Stat. Auth.: ORS 442.807

Stats. Implemented: ORS 442.800 - 442.807

Hist.: ID 12-2001, f. & cert. ef. 10-15-01; ID 1-2004, f. & cert. ef. 2-3-04; ID 2-2005, f. & cert. ef. 3-1-05