COMMUNITY MENTAL HEALTH AUTHORITY

ADMINISTRATIVE POLICY AND PROCEDURES MANUAL				
Chapter **Program Quality**	**Section** **Provider Network Management**	**Chapter** **05**	**Section** **05**	**Subject** **02**
Subject **Privileging**	**Authorization**		**Approved: 12/27/16** **Replaces: #03-01-04A** **Dated 07/29/14**	

Updated: October 2024; Reviewed/No Updates: October 2025

I. PURPOSE: To ensure that individual providers are operating within their scope of practice and engaging in clinical activities that they are qualified to provide.

II. APPLICATION: Qualified providers employed directly, contracted, or subcontracted by the Gogebic Community Mental Health Authority (GCMHA).

III. DEFINITIONS:

A. Credentialing – Individual Practitioners: (As defined by the American Society of Addiction Medicine and the American Managed Behavioral Healthcare Association) The process of reviewing, verifying, and evaluating a practitioner's credentials (i.e., professional education, clinical training, licensure, board and other certification, clinical experience, letters of reference, other professional qualifications, and disciplinary actions) to establish the presence of specialized professional background required for membership, affiliation, or a position within a healthcare organization or system. The result of credentialing is that a practitioner is granted membership in a medical staff or provider panel. Delegation of this function to an organizational provider must be monitored for the same standards required for GCMHA's Credentialing Committee.

B. Credentialing – Organizational Providers: (As defined by MDHHS Contract P.7.1.1) The process of validating that the organizational provider is licensed or certified as necessary to operate in the State and has not been excluded from Medicaid or Medicare participation and that the organization properly credentials their directly employed and subcontracted direct service providers.

C. Peer Clinical Review (specific to this policy): Clinical review conducted by appropriate health professionals when a request for a service or support was not approved/certified during initial clinical review.

D. Privileging: The process of determining a health care professional's current skill and competence to perform specific diagnostic or therapeutic procedures that the professional requests to perform as a participant in or an affiliate of a healthcare facility or system. The result of privileging is that a provider is permitted by a healthcare organization or network to conduct those specific procedures (as defined by the American Society of Addiction Medicine and the American Managed Behavioral Healthcare Association). NorthCare Network has expanded this definition to include individuals who must be privileged to perform behavioral health services that do not require specific degrees or state licensure but do require that staff obtain certifications

required by the Michigan Department of Health and Human Services.

E. Senior Clinical Staff Person: The appointed leadership role of the credentialing program of at least one senior clinical staff person who has: current, unrestricted clinical license(s); qualifications to perform clinical oversight for the services provided; five years' post-graduate experience in direct patient care; and Board certification (if the senior clinical staff person is an M.D. or D.O.).

IV. POLICY: GCMHA requires all professional healthcare staff to have a documented review and approval of clinical privileges as needed to ensure that services are delivered by qualified and competent staff. Privileging is granted based on appropriate training, supervision and consultation to support the scope of work according to primary eligibility groups served by the provider.

V. PROCEDURE:

A. GCMHA's Credentialing Committee will privilege all credentialed healthcare professionals employed and under contract to ensure they meet the requisite qualifications, education, experience, training, and supervision, applicable to their scope of work.

1) All privileging will be granted based on information provided on the NorthCare Privileging Form.

2) *Initial* privileging will be granted by GCMHA's Credentialing Committee as part of the credentialing process. Ongoing privileging is reviewed/completed as part of the annual performance review and/or when duties/responsibilities change in terms of the primary eligibility group a person is working with and/or when their scope of clinical practice changes. National and State standards for specific clinical programs or treatments are followed by GCMHA providers.

3) Temporary Privileges may be granted at time of hire or contract, at time of a change in clinical privileges, and/or when a need for temporary privileging is identified, i.e., staff shortage. Temporary privileges may be granted for up to one (1) year.

B. Ongoing privileging will be reviewed and approved by the Credentialing Committee based on:

1) The annual performance evaluation demonstrating the necessary licensing, certification, and training requirements to maintain privileges for the coming year. If required training has not been completed or certification not maintained, privileging cannot be granted, and a goal needs to be added to the performance evaluation with a specified date for review. Upon meeting the goal, privileges can be reviewed and approved.

2) Clinical privileging changes when job duties/responsibilities are added that require specific training and certification.

C. GCMHA will follow the NorthCare standard operating procedure to assure that the current privileging form is entered into the electronic Provider Management System by the Senior Clinical Staff.

1) Staff will use the Staff Member list Attachments link to scan the NorthCare Network Individual Clinical Privileging Form. To access select:
   i. ELMER staff & select appropriate staff record,
   ii. Attachments - Click here to scan a document or click here to upload a file from your PC,
   iii. Documentation Type = NorthCare Clinical Privileging Form and complete the scanning or upload process.

2) Staff will use the Clinical Privileging Certification link to scan in all required Clinical Certifications that support the Clinical Privileging form. To access select:
   i. ELMER staff & select appropriate staff record,
   ii. Credentials - Add certification & certification information and save.
   iii. Select a Staff Certification from the drop-down choices.
   iv. Under Attachments/Uploaded Documentation click Choose Files and then the Scan Attachment or Upload Attachments link to attach the document from your PC.
   v. Document Type = Certificate and complete the scanning or uploading process.

Document	Document Type	Naming Convention
NorthCare Clinical Privileging Form	Credentialing	Clinical Privileges_staff name_YYYY-MM (effective date of Privileging)
NorthCare Clinical Privileging Certifications	Certification Letter or Certificate	Clinical Privileging Certification_YYYY-MM (effective date of the certification)

D. Upon request, contracted organizational providers are to provide policies, procedures, or guidelines that outline how scope of practice is determined for healthcare professionals within their organization.

E. Notification of Adverse Privileging Decision: An individual or organizational provider that is denied privileging shall be informed of the reasons for the adverse privileging decision in writing.

F. Appeal of Adverse Privileging Decision: When privileging of a provider is denied, suspended or terminated for any reason other than lack of need, the provider may appeal the decision according to agency grievance procedures per policy 01-04-47 (which is consistent with applicable Federal and State requirements).

VI. REFERENCES AND LEGAL AUTHORITY: CARF Behavioral Health Standards; 42 CFR (Balanced Budget Act of 1997(, 438.214; URAC, Health Plan Standards, as applicable; Medicaid Provider Manual; NorthCare Policies: Credentialing-Privileging, Background and Exclusion Check, Compliance Plan, Contractual Relationships & Delegation, Credentialing-Program Policy, Credentialing-Committee and Staff Responsibilities, Credentialing-Oversight & Monitoring, Credentialing-Standard Application, NorthCare Network Organizational Framework Document, NorthCare Provider Selection, Training, Sanctions; NorthCare Clinical Privileging Request and

Protocol; NorthCare/CMHSP Delegation Agreement; NorthCare Standard Operating Procedure for Individual Provider Clinical Privileging & Certifications; MDHHS/PIHP Master Contract (Medicaid Managed Specialty Supports and Services Concurrent 1915(b)(c) Waiver Program), Section 7.1, Medicaid Sub-Contracting Agreement (PIHP/CMHSP Contract) Section XII; MDHHS Credentialing and Re-Credentialing Processes, Contract Attachment P.7.1.1

VII. EXHIBITS: NorthCare Clinical Privileging Form