



Credentialing Criteria- Pharmacist

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Last Review Date: 3/2021
Last Revision Date: 11/2017
Next Review Date: 3/2022
Owner: Credentialing Manager
Approving Authority: Corporate Credentials Committee

Document Overview

Collaborative drug therapy management (CDTM) is the practice of pharmacy in which a pharmacist performs certain pharmaceutical-related patient care functions for a specific patient. Pharmacists engaged in CDTM and direct patient care shall possess the education, training, and experience necessary to function effectively, efficiently, and responsibly in that role. Each provider that applies for participation will be evaluated using the following criteria established by the Corporate Credentials Committee.

Criteria

1. Graduation with a Pharmacy Doctorate (Pharm.D.) or Bachelor of Science in Pharmacy (B.S. Pharm) from an accredited school of pharmacy as recognized by national, state or local requirements to obtain licensure, registration or certification to practice pharmacy.
2. Current and unrestricted license to practice pharmacy in Kansas. The licensure must be at full clinical level of practice. Full clinical level is defined as an unrestricted license that is not subject to limitation on the scope of practice ordinarily granted all other applicants for similar specialty in the granting jurisdiction. A licensure with limitation or restrictions, whether or not on probation, does not meet the definition of full clinical level of practice.
3. Any review/action taken by the licensing board will be reviewed on an individual basis.
4. All pharmacist providers must supply documentation of successful completion of:
 - a. Postgraduate year one pharmacy residency (PGY1), OR
 - b. Earned a Board of Pharmacy Specialties (BPS) or Commission for Certification in Geriatric Pharmacy (CCGP) certificate, OR
 - c. In lieu of PGY1, BPS or CCGP, at least three years of documented experience involving direct patient care.
5. In order to participate as a contracting provider with BCBSKS, all providers must be in agreement to complete the CAQH credentialing application.
6. Current professional liability coverage which meets or exceeds minimum limits as established by the State of Kansas
7. In instances when there is a history of involvement in a malpractice suit(s), arbitration, or settlement during the 10 year period preceding the initial credentialing process, or the interval between re-credentialing process, evidence that this history does not demonstrate probable future sub-standard performance.
8. Absence of patterns of behavior to suggest quality of care concerns.
9. No sanctions placed upon him/her by Medicaid, Medicare, or exclusion by Federal Employee Health Benefit Program. If applicant has such history, applicant will be denied credentialing if applicant: (1) is currently excluded, suspended, or otherwise ineligible to participate in any

state or federal healthcare programs, including but not limited to Medicare, Medicaid or Federal Employee Health Benefit Program or (2) has been convicted of a criminal offense related to the provision of health care items or services and has not been reinstated in a state or federal health care program, after a period of exclusion, suspension, or ineligibility.

10. No disciplinary actions pending or imposed.
11. Absence of any felony convictions. Any misdemeanor or court-martial convictions will be reviewed on an individual basis.
12. No current drug or alcohol abuse. Absence of a history of chemical dependency/substance abuse. For those applicants who have such history, evidence that the applicant is participating in, or has completed a prescribed, monitored treatment program, and that no further current chemical dependency or substance abuse exists.
13. The Credentials Committee shall evaluate all information submitted, including but not limited to supporting documentation provided by the provider during the application process, when determining a decision to approve or deny a provider's credentialing status.
14. The Credentials Committee shall be responsible for evaluating provider applications that do not meet all criteria and give thoughtful consideration to both the credentialing elements and all information provided before making a final Credentials Committee determination.

The above criteria must be maintained on an on-going basis by all providers who contract with Blue Cross and Blue Shield of Kansas.

References

Related Forms

Revision Log

<i>Effective Date</i>	<i>Description of Change</i>	<i>Revision Approved By</i>
11/2017	New Policy	Corporate Credentials Committee
3/2018	Review of Policy	Steering Committee
12/2018	Annual Review	Corporate Credentials Committee
01/23/2019	Annual Review	Corporate Credentials Committee
03/04/2019	Annual Review	Steering Committee
02/26/2019	Annual Review	Corporate Credentials Committee
03/02/2020	Annual Review	Steering Committee
02/24/2021	Annual Review	Corporate Credentials Committee
03/08/2021	Annual Review	Steering Committee

Associated Procedures

<i>Procedure Number</i>	<i>Procedure Name</i>