

BLUE CROSS AND BLUE SHIELD OF KANSAS

# Credentialing Program Plan Description

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# Credentialing Program Plan Description

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## OVERVIEW

The Blue Cross and Blue Shield of Kansas (BCBSKS) Credentialing Program Plan (Plan) shall be comprehensive to ensure that its Applicants meet the standards of professional licensure and certification. The process enables BCBSKS to recruit and retain a quality network of Applicants to serve its members and ensure ongoing access to care. It consistently and periodically assesses and evaluates an Applicant's ability to deliver quality care between credentialing and re-credentialing cycles, and it emphasizes and supports an Applicant's ability to successfully manage the health care of network members in a cost-effective manner. The Credentialing Program enables BCBSKS to ensure that all Applicants are continuously in compliance with BCBSKS policies and procedures and any other applicable regulatory and/or accreditation entity's requirements and/or standards.

## I. PURPOSE

"Applicant" is defined as any Provider or Facility being credentialed or re-credentialed by BCBSKS.

The Plan enables BCBSKS to ensure that all Applicants are continuously in compliance with BCBSKS credentialing policies and procedures. Credentialing/re-credentialing policies and procedures ensure the systematic review of health care Applicants requesting participation with BCBSKS. The Plan includes requirements and procedures for verifying an Applicant by reviewing their qualifications to participate in the BCBSKS Network. The Plan also verifies the Applicants have met eligibility standards and requirements such as education, licensure, professional standing, services, accessibility, utilization and quality.

To maintain compliance with applicable state and federal laws, in verifying applications through credentialing/re-credentialing, by monitoring and reporting credentialing activities to BCBSKS Committees.

The Plan includes guidelines for all BCBSKS credentialing/re-credentialing activities. The guidelines eliminate unfair business practices such as prejudice in favor of or against individual circumstances or actions and promote consistency of interpretation and application of policy requirements. BCBSKS shall not discriminate on the basis of race, sex, age, religion, national origin, sexual orientation or disability, and such will not be considered during the credentialing/re-credentialing process.

The Plan is reviewed and submitted annually to the Corporate Credentials Committee (Committee) and Steering Committee, the executive leadership team of BCBSKS, for approval. The credentialing policies and procedures are reviewed and approved annually by the Committee.

The Plan's effectiveness report will be submitted annually to the Committee. This report will include the following information:

- 1) Number of Applicants credentialed and re-credentialed.

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- 2) Average number of days to process an initial application.
- 3) Number of Applicants that are not in compliance with the re-credentialing schedule of every 36 months.

## II. SCOPE

- A. Licensed Applicants seeking participation in the BCBSKS BlueCAP network shall meet established policy requirements.
- B. The Committee and Steering Committee reviews the Plan requirements annually.

## III. EVALUATION AND ACCOUNTABILITY

### ACCOUNTABLE COMMITTEES

- A. The **Steering Committee**, made up of executive officers of BCBSKS, serves as the oversight authority and has the ultimate responsibility for the Plan. The Steering Committee delegates oversight of the Plan and the responsibility for selection, credentialing and re-credentialing decisions to the Corporate Credentials Committee.
- B. The **Corporate Credentials Committee** which is chaired by the Chief Medical Officer (CMO) reports credentialing and re-credentialing activities to the Steering Committee at least annually. The Corporate Credentials Committee meets monthly to make determinations on all credentialing/re-credentialing applications. All other references to Committee will mean Corporate Credentials Committee.

## IV. MEMBERSHIP

The Corporate Credentials Committee consists of, at a minimum, the following Members:

- A. Chair: Chief Medical Officer (CMO)
- B. Medical Director(s) of BCBSKS
- C. At least one Primary Care Physician who is a BCBSKS participating Provider and has no other role in BCBSKS's management activities.
- D. At least one Specialty Care Physician who is a BCBSKS participating Provider and has no other role in BCBSKS's management activities.
- E. External Committee members must have one of the following: an active practice, be contracting with BCBSKS, and/or Active/Unrestricted License to practice medicine in any United States jurisdiction.

Committee vacancies are filled through appointment by the CMO and BCBSKS staff.

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## V. CONFIDENTIALITY and Conflict of Interest

A. Each member and any other individuals attending Committee meetings shall be required to maintain strict confidentiality of all information communicated during the course of credentialing activities. Every Committee member shall sign a Confidentiality and Conflict of Interest Disclosure Statement annually.

## VI. RESPONSIBILITIES

The Committee is responsible for:

- A. Establishing and periodically reviewing the policies and procedures governing the credentialing operation and criteria for participation.
- B. Ensuring re-credentialing is performed in compliance with the Plan guidelines;
- C. Credentialing Staff will monitor and report activities of state licensing boards for any restrictions, limitations, suspensions, revocations or terminations;
- D. Credentialing Staff will monitor and report sanction, suspensions, revocations and termination activities to ensure due process;
- E. Credentialing staff will report credentialing activities to the Steering Committee at least annually and to external entities (i.e., licensing boards, National Practitioner Data Bank (NPDB) as deemed applicable;
- F. Seeking and evaluating clinical peer input when discussing standards of care for a like specialty Applicant;
- G. Credentialing staff will ensure minutes of all Committee meetings are maintained, including all actions by the Committee;
- H. When reviewing Applicants, BCBSKS shall not discriminate on the basis of race, sex, age, religion, national origin, sexual orientation or disability;
- J. At the time of re-credentialing, staff will conduct an evaluation of Applicant performance information by BCBSKS, including member complaints information collected by the Quality Management Program (QMP).

The Committee Chair, CMO, is the senior clinical person responsible for the oversight of the clinical aspects of the Plan. In addition, the Chair may act on behalf of the Committee and approve all credentialing category "A" applications considered clean and any delegation rosters approved by a delegated entity and submitted for approval by BCBSKS in accordance to Plan standards. In the absence of the CMO, a Medical Director may approve such applications. The Professional Relations Director is responsible for the administrative aspects of the Plan. Credentialing staff provides support for Committee meetings.

### References

- URAC P-CR 2
- URAC P-CR 4

### Related Forms

- Conflict of Interest and Confidentiality Disclosure Statement

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## Revision Log

<i>Effective Date</i>	<i>Description of Change</i>	<i>Revision Approved By</i>
04/01/2013	Final program plan description	Corporate Credentials Committee
03/04/2014	Annual Review	N/A (no changes)
03/25/2015	Revised	Corporate Credentials Committee
03/30/2015	Revised	Steering Committee
02/24/2016	Revised	Corporate Credentials Committee
03/7/2016	Revised	Steering Committee
02/22/2017	Revised	Corporate Credentials Committee
02/27/2017	Annual Review	Steering Committee
01/24/2018	Annual Review	Corporate Credentials Committee
3/5/2018	Annual Review	Steering Committee
1/23/2019	Annual Review	Corporate Credentials Committee
3/4/2019	Annual Review	Steering Committee
02/26/2020	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