

	Title: Credentialing and Recredentialing	Version: 2
	Owner: Melissa Mitchell (Director of Production)	Approved: 03/22/2018

Purpose: To establish guidelines for the credentialing and re-credentialing of providers.

Responsibility: Quality Improvement (QI)/Utilization Review (UR) Committee

Scope: Advantage Dental Services, LLC

Definitions: n/a

Forms: n/a

References: 42 CFR 438.100; 42 CFR 438.214; OAR 410-141-3120

Policy:

GENERAL POLICY:

The Dental Care Organization (DCO) is committed to providing quality dental care for enrollees. This Credentialing and Re-Credentialing Policy has been developed as part of the Quality Improvement (QI) Program to ensure each licensed Dentist, Denturist, and Dental Hygienist meets competency standards established as part of the DCO selection, compensation and retention processes. The DCO contracts only with Dentists, Denturists and Expanded Practice Permit Dental Hygienists (“Provider”) who are licensed with their state’s board of dentistry and only where capacity for the DCO allows such contracting.

All licensed providers who have signed contracts or participation agreements with the DCO shall first be credentialed and thereafter re-credentialed no less frequently than every three years. The Vice President of Dental Services, and/or their licensed designee are responsible for credentialing decisions. The QI/UR Committee is responsible for reviewing all credentialing decisions on a bi-monthly basis.

Upon initial contract with the DCO, the Provider shall complete an online credentialing application which is formed from the Oregon Provider Credentialing Application (OPCA), and thereafter shall be re-credentialed at least every three years. The credentialing and re-credentialing process will provide DCO with information necessary to perform a comprehensive review of the Provider’s credentials. The Provider shall have the right to review and correct any credentialing information at any time through a secure login to their credentialing application. Additional information shall be submitted to the DCO and reviewed by the QI/UR Committee, Vice President of Dental Services and/or designee as needed. Once the Provider has submitted all the necessary information, the DCO will commence a review of the Provider’s credentials. Documentation of receipt of the updated information will be stored in the provider’s file.

The Provider Relations Department shall provide administrative oversight to the credentialing and re-credentialing process. The DCO shall not make credentialing and re-credentialing decisions based on an applicant’s race, ethnic/national identity, gender, age, sexual orientation, type or cost of procedure performed, or type of enrollees treated (e.g. Medicaid, or high risk population). All information obtained during the credentialing/re-credentialing process is confidential. At minimum, the credentialing and re-credentialing process shall include:

1. Review of information included in the Provider Dental Credentials Verification form;



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2. Query of the National Practitioner Data Bank (Continuous Query set up on all providers for re-credentialing purposes) ;
3. Query of the US Office of Inspector General (OIG), Excluded Parties List System, and List of Excluded Individuals and Entities (Monthly querying completed for all contracted providers for re-credentialing purposes). The DCO will not hire or contract with any Provider or Organization that is excluded from participating in federal or state healthcare programs. If Advantage Dental denies contracting of a provider based upon Medicaid exclusions, this will be reported to OHA and OIG by the Advantage Dental Compliance Department;
4. A signed attestation from the Provider confirming the accuracy of all information submitted by Provider;
5. Verification of current licensure, including any disciplinary action, by the Provider's State Board of Dentistry and any applicable certifications (Annual querying completed for all contracted for re-credentialing purposes); and
6. Verification of current malpractice insurance policy with correct declarations.
7. The following attestations will be required during the initial credentialing process:
 1. Biological Spore Testing
 2. Seclusion and Restraint
 3. Agreement to Pay Form

During the credentialing/re-credentialing process the Provider may request information as to the status of their credentialing/re-credentialing. The process to responding to such requests includes the timeframe to complete the credentialing/re-credentialing process, not to exceed 60 days from the date the completed application and signed agreement was received.

After review of items 1-6 above, if no outstanding matters are found the file is considered clean and sent for final approval by the, Vice President of Dental Services, and/or their licensed dentist designee. If there are any outstanding matters discovered during this process, the outstanding matters are presented to the Vice President of Dental Services, and/or their licensed designee for review and further consideration as to whether the Provider will be contracted, declined, or terminated. The Provider shall be notified via written letter by mail of the acceptance, denial, or termination of status as a credentialed Provider and has the right to receive the status of their credentialing application upon request. Such letter will include instructions for the Provider's ability to appeal and correct any information given in the credentialing/re-credentialing process.

The Provider Relations Department shall maintain records evidencing the review and verification of each Provider, including records documenting each Provider's academic credentials, licenses or certifications, and reports from the National Practitioner Data Bank and Exclusion Databases.

The Case Management Department shall present any formal complaints or quality of care issues, received or discovered, to the QI/UR Committee for review at the next QI/UR Committee meeting. Upon re-credentialing of contracted providers, the Provider Relations Department shall obtain a list of all complaints for the re-credentialled provider from the Case Management Department. These shall be presented to the Vice President of Dental Services, and/or their licensed designee for review before continuing a contract with the provider.

If DCO delegates any of its responsibilities under this policy and procedure to a third party, DCO shall monitor the third party's compliance with the delegated responsibilities and the third party's performance, deficiencies, or areas for improvement. Upon identification of deficiencies, or areas for improvement, DCO shall cause the third party to take corrective action.



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Provider has the right to receive notice/copy of their rights as described in this policy. Providers can request a copy of the provider's rights by calling the Provider Relations Department, by emailing ProviderRelations@advantagedental.com or by written correspondence.

Approvals:

Date: 03/22/2018

Approved by:

Lorena Reinhart (Executive Assistant), Executive Assistant, Operations

Reviewed and Revised

07/10/2013	Jeanne Dysert	Tamara Kessler	Missy Mitchell	
05/02/2014	Jeanne Dysert	Tamara Kessler	Missy Mitchell	Laura Donadio
02/23/2015	Jeanne Dysert	Tamara Kessler	Missy Mitchell	Laura Donadio
02/23/2016	Jeanne Dysert	Tamara Kessler	Missy Mitchell	Jeff Dover
10/19/2016	Jeanne Dysert	Tamara Kessler	Missy Mitchell	Jeff Dover
02/14/2017	Jeanne Dysert	Tamara Kessler	Missy Mitchell	
07/27/2017	QI/UR Committee			
03/12/2018	Jeanne Dysert	Tamara Kessler	Missy Mitchell	Rose Novak