

**EVOLENT HEALTH LLC
POLICY AND PROCEDURE**



POLICY NUMBER: NVR.014.E.KY
REVISION DATE: 05/30/2019
PAGE NUMBER: 1 of 3

POLICY TITLE: Practitioner Sanctioning and Reporting
DEPARTMENT: Provider Credentialing
ORIGINAL DATE: February 2016

Approver(s): Sharlee LeBleu, Director, Credentialing Operations

Policy Review Committee Approval Date: May 30, 2019

Product Applicability: mark all applicable products below:

COMMERCIAL	<input type="checkbox"/> HMO <input type="checkbox"/> PPO <i>Products:</i> <input type="checkbox"/> Small <i>Exchange:</i> <input type="checkbox"/> Shop <input type="checkbox"/> All <input type="checkbox"/> Indiv. <input type="checkbox"/> Indiv. <input type="checkbox"/> Large				
	<i>States:</i> <input type="checkbox"/> GA <input type="checkbox"/> MD <input type="checkbox"/> OH <input type="checkbox"/> TX <input type="checkbox"/> _____				
GOVERNMENT PROGRAMS	<input type="checkbox"/> MA HMO <input type="checkbox"/> MA C-SNP <input checked="" type="checkbox"/> MA D-SNP <input type="checkbox"/> MSSP <input type="checkbox"/> Next Gen ACO <input type="checkbox"/> MA All				
	<input checked="" type="checkbox"/> Medicaid <i>States:</i> <input type="checkbox"/> DC <input checked="" type="checkbox"/> KY <input type="checkbox"/> MD <input type="checkbox"/> _____				
OTHER	<input type="checkbox"/> Self-funded/ASO				

Regulatory Requirements: Kentucky Department for Medicaid Services Contract Section 28.2 and Appendix J.

Related Documents: NVR.010.E Practitioner Credentialing and Recredentialing and NVR.013.E Ongoing Monitoring of Sanctions.

PURPOSE

The purpose of this policy is to provide guidance for the scope and limitations of credentialing sanctions taken against practitioners and detail a process for external notification when sanctions have been taken.

DEFINITIONS

Credentialing: The process of reviewing and evaluating the qualifications of licensed independent practitioners to provide services to health plan members. Eligibility is determined by the extent to which applicants meet defined requirements for education, licensure, professional standing, service availability, and accessibility, as well as, for conformity to the utilization and quality improvement requirements.

Recredentialing: The process of evaluating performance monitoring data and reverifies

the credentialing information that is subject to change over time.

Sanctions: Adverse actions taken against a practitioner's participating status with a health plan for a serious deviation from, or repeated non-compliance with, the health plan's quality standards; deviations from recognized treatment patterns of the organized medical community; and/or action or conduct of the practitioner which affects or could affect adversely the health or welfare of a patient.

POLICY

It is the policy of Evolent Health (Evolent) to evaluate practitioners against adopted credentialing and recredentialing policies and procedures. Corrective action plans may be required or sanctions may be imposed as a result of a practitioner's failure in part or whole to meet the standards set forth in the policies. Failure to meet the standards include recredentialing review by the health plan's Credentialing Peer Review Committee, in which the Committee feels that the practitioner's practice patterns are not conducive to providing high quality care or services to a client's members. The health plan's Credentialing Peer Review Committee may recommend actions up to and including termination from the provider network. Evolent reports all adverse actions relative to the professional competence or professional conduct of the practitioner to the Department for Medicaid Services (DMS), State Medical Licensure Board and the National Practitioner Data Bank (NPDB) when the sanction is to last longer than 30 days.

PROCEDURE

- I. Practitioner Sanctioning
 - a. At any time during the credentialing or recredentialing process, the health plan's Credentialing Peer Review Committee may take the following actions without further approval:
 - i. Require a corrective action plan from the practitioner when trends in care or services provided have been noted.
 - ii. Require a letter of explanation regarding events considered to be of serious deviation from acceptable levels of care or services provided.
 - iii. Require more frequent updates regarding ongoing trends of the practitioner following an agreed upon corrective action plan.
 - iv. Recommend face to face follow up from the Health Plan's Chief Medical Officer to discuss issues identified by the Health Plan's Credentialing Committee.
 - v. Request additional site visits to be performed for a specified period of time.

vi. Adjust the length of time between the current review and the next scheduled recredentialing review.

b. At any time during the recredentialing process, the health plan's Credentialing Peer Review Committee may recommend limiting new patients to the practitioner's panel or terminating the practitioner from the provider network following the practitioner's ongoing failure to cooperate with or meet any of the recredentialing activities or requirements.

II. External Notification of Sanctions Imposed

a. The health plan prepares an adverse action report for submission to the State Medical Licensure Board, NPDB, and any other required state or federal agency if formal sanctions are imposed for matters of professional competence or professional conduct and if the sanction is for a period longer than 30 days.

RECORD RETENTION

Records Retention for Evolent Health documents, regardless of medium, are provided within the Evolent Health records retention policy and as indicated in CORP.028.E Records Retention Policy and Procedure.

REVIEW HISTORY

DESCRIPTION OF REVIEW / REVISION	DATE REVISED
New Policy	12/2016
Added citation	11/2017
Change of Ownership and adding Peer Review to Cred Committee	05/2018
- Annual Review & Structural Adoption - Change of Policy Ownership from Joel Scott to Sharlee LeBleu	05/30/2019