



<b>FACILITY:</b> Sacred Heart Hospital	<b>MANUAL(S):</b> Medical Staff
<b>TITLE:</b> Expedited Credentialing Policy	<b>ORIGINATING DEPARTMENT:</b> Medical Staff
<b>SUPERSEDES:</b> N/A	<b>POLICY NUMBER:</b> 22

**I. POLICY:** It is the policy of Sacred Heart Hospital of the Hospital Sisters of the Third Order of St. Francis and the Medical Staff to maximize the efficiency of the Medical Staff credentialing process wherever possible. Upon receipt of a complete application, reappointment request or modification request with a request for expedited credentialing, and after all credentialing, verification, and documentation collection is complete in the Medical Staff Office; packets that meet criteria will be forwarded for approval.

**II. PURPOSE:** Expedited credentialing is intended to accelerate the credentialing approval process for appointments, reappointments and modifications of privileges that meet minimum approved criteria following completion of the full credentialing process as defined in the Medical Staff Bylaws.

**III. GUIDELINES/PROCEDURES**

**A. An expedited credentialing process may be granted if the following conditions are met:**

1. Medical Staff Office has received a completed application from the applicant requesting expedited credentialing.
2. The file must meet the following criteria:
  - a. No negative or questionable evaluations or recommendations from hospitals, healthcare organizations, practitioners or former employers;
  - b. No discrepancies between information provided by applicant or references.
  - c. Satisfactory completion of all education and training;
  - d. No disciplinary action or legal sanctions;
  - e. No sanctions by third-party payers (e.g., Medicare, Medicaid);
  - f. No malpractice judgments or settlements in the past seven years, or cases in process;
  - g. Unremarkable medical staff/employment history;
  - h. Acceptable health status;
  - i. No prior or pending criminal convictions or pending criminal charges or investigations or felony convictions;
  - j. Clinical privileges requested are consistent with the applicant’s specialty, based on appropriate experience, training, competence and, meet established departmental criteria;
  - k. Appropriate application fees are received;
  - l. Current, unrestricted license/registration/certification to practice within the scope of training/licensure issued by the appropriate [Wisconsin] licensing authority;
  - m. No unexplained time gaps in the applicant’s clinical experience or training;
  - n. The application contains no information which indicates a need for further inquiry or investigation;
3. All verifications and other information are completed by the Medical Staff Office.
4. Review and Approval:
  - a. The Department Chair shall conduct a final review and evaluation of the applicant’s file.
  - b. The file will also be reviewed by at least one of the following or their designee: Credentials Committee Chair, Allied Health Review Panel Chair or Medical Staff President. If the reviewer does not recommend the requested credentialing action, or if the reviewer has questions, the application

## Expedited Credentialing Policy

will not be processed with expedited credentialing, but shall be handled according to the full, routine credentialing process.

- c. Approval is required of the Executive Committee of the Board of Directors. Approvals will be reported at the next Credentials Committee or Allied Health Review Panel meeting.
5. The following non-refundable expedited fees apply in addition to the standard initial appointment application fee or reappointment fee:
    - a. EXPEDITED FEE \$100: Applications received 30 or more days prior to requested start date.
    - b. EXPEDITED FEE \$200: Applications received less than 30 days prior to requested start date.

### **B. Termination of the Expedited Credentialing Process:**

1. An application will not be eligible for consideration for expedited approval if it fails to meet any of the established criteria under this policy. In particular, expedited credentialing will not be used if the file is incomplete, contains current or prior challenges to license registration, involves involuntary termination of medical staff membership at another organization, involves involuntary limitation, reduction, denial, or loss of previous privileges at another institution, involves involuntary exclusion from federal health care programs, such as Medicare and Medicaid, or a history of multiple final judgments adverse to the applicant in professional liability cases.
2. The expedited action processing will be terminated and routine processing resumed if anyone who reviews the file finds that expedited action is not warranted. If expedited approval is given, the file will nevertheless be submitted to the Credentials Committee or Allied Health Review Panel, Medical Executive Committee and Board of Directors at their regularly scheduled meetings for review. Any of those bodies, except the Board of Directors, may rescind an expedited approval for privileges and return the application for routine processing. There will be no right to expedited action and no hearing and appeal rights if expedited action is not taken or if approval given under the expedited action process is rescinded.

### REVIEW AND ENDORSEMENT BY:

Medical Staff Executive Committee: June 20, 2014  
Board of Directors: July 23, 2014

### REVIEW DATES:

Credentials Committee: June 12, 2017  
Medical Executive Committee: June 16, 2017  
Board of Directors: July 13, 2017