



Credentialing Office Policy and Procedure

Title: GOVERNMENTAL EXCLUSIONS / SANCTION CHECK, MEDICARE OPT-OUT, AND MONTHLY MONITORING AND REVIEW OF LICENSURES AND COMPLAINTS	Policy Number: CO 1.8
Regulation Reference: NCQA CR3.B;	Effective Date: 4/1/2012 Last Annual Review Date: 9-29-23 Last Revision Date: 11-17-21 (Revision History on last page)

Policy Statement:

1. To ensure that the Paul L. Foster School of Medicine (PLFSOM) Credentialing Office verifies if a practitioner is excluded from participation in Medicare, Medicaid or other Federal health care programs by the Office of Inspector General or other Federal agency prior to granting membership to the PLFSOM Professional Staff and/or clinical privileges.

PLFSOM is the recipient of reimbursement from several Federal health care programs (Medicare, Medicaid, etc.)

The Federal government has the right to exclude from participation any individual or entity that has been convicted of Medicare and Medicaid program-related crimes, patient abuse crimes, health care fraud felonies or controlled substance felonies. The result of the exclusion is that any healthcare provider who receives reimbursement from a Federal health care program should not employ or contract with the excluded party.

2. It is the goal and responsibilities of the Credentialing Office to verify provider non-participation Medicare opt out in the Federal Medicare Programs when performing credentialing services on behalf of Medicare Advantage Organizations.

In accordance with Chapter 6 of the Medicare Managed Care Manual, section 60.2, “no physician or other practitioner that has opted out of the Medicare program may accept Federal reimbursement for a period of two years”.

It is the policy of the Texas Tech University Health Sciences Center El Paso (TTUHSC EP) (PLFSOM) that employed providers (Providers) may not opt out of any third party or managed care plan with which TTUHSC EP has signed an agreement.

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Procedure:

Initial Appointment and Re-Appointment Process:

1. The Credentialing Office will verify the following databases during the initial credentialing and re-credentialing process to ensure that practitioners excluded from participation in any Federal health care programs by the Office of Inspector General or other Federal agencies (Medicare, Medicaid, etc.) are not granted clinical privileges. The individual querying the data banks will note if the practitioner's name is listed/not listed in the databank. A printed query result, dated and initialed by the individual who completed the query, will be filed in the applicant's credentials file.

- Office of Inspector General (OIG) – U.S. Department of Health & Human Services
<https://exclusions.oig.hhs.gov/>
- Office of Inspector General (OIG) – Texas Health & Human Services Commission
<https://oig.hhsc.state.tx.us/oigportal/EXCLUSIONS.aspx>
- System for Award Management (SAM)
https://www.sam.gov/portal/SAM/?portal:componentId=8e1441a6-72e4-4ab0-86a8-b0884f22dc78&interactionstate=JBPNS_r00ABXc0ABBfanNmQnJpZGdlVmlld0lkAAAAAQATL2pzZi9mdW5jdGlvbmlkAAAHX19FT0ZfXw**&portal:type=action#1
- US Department of the Treasury - Office of Foreign Assets Control (OFAC)
<https://www.treasury.gov/resource-center/sanctions/SDN-List/Pages/default.aspx>
- Sex Offender Registry – Texas Department of Public Safety, and The US Department of Justice - National Sex Offender
<https://records.txdps.state.tx.us/SexOffenderRegistry>
<https://www.nsopw.gov/>

2. Should an individual's name appear as excluded, the Credentialing Office will take the following measures to ascertain correctness as follows:

- Office of Inspector General (OIG) – U.S. Department of Health & Human Services
- Office of Inspector General (OIG) – Texas Health & Human Services Commission
Use the applicant's social security number for confirmation purposes.
- System for Award Management (SAM)
Agency contacts and phone numbers are listed to contact for confirmation purposes. (For individuals – social security numbers and/or birth date are required.)

Should the individual being queried actually be that listed, please notify the Credentials Committee Chair, the Legal Department and MPIP, within two working days.

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Periodic Checks

1. Monthly, Institutional Compliance Office conducts a search of the Sanction Lists against all TTUHSC employees, vendors, and contactors, with the results reported to the respective Directors of each area. Should a member of the PLFSOM Professional Staff be listed, notify the Credentials Committee Chair, the Legal Department and MPIP within two working days. The following sanction lists are queried;
 - Any other government exclusion/sanction list necessary to comply with state and/or federal laws.
 - Office of Inspector General (OIG) – U.S. Department of Health & Human Services
<https://exclusions.oig.hhs.gov/>
 - Office of Inspector General (OIG) – Texas Health & Human Services Commission
<https://oig.hhsc.state.tx.us/oigportal/EXCLUSIONS.aspx>
 - System for Award Management (SAM)
https://www.sam.gov/portal/SAM/?portal:componentId=8e1441a6-72e4-4ab0-86a8-b0884f22dc78&interactionstate=JBPNS_r00ABXc0ABBfanNmQnJpZGdlVmlld0lkAAAAAQATL2pzZi9mdW5jdGlvbWFsLmpzcAAHX19FT0ZfXw**&portal:type=action#1

2. The Credentialing Office will obtain, review, and log the following on a monthly basis:
 - Complaints – a report of complaints will be obtained from the Quality department.
 - National Practitioner Data Bank (NPDB) – Obtain any NPDB Summary report.
 - Medicare Opt Out report – review and identify any TTUHSC credentialed providers.
 - Excluded Provider Report – Obtained from Office of Institutional Compliance.
 - OIG Report – Run by Cactus Credentialing system
 - Texas Licensure Board Disciplinary Actions – Run reports from specific providers licensing board.

Medicare Opt-Out

Procedure:

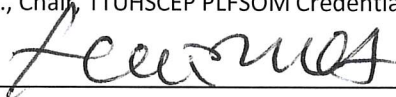
At initial credentialing, TTUHSC EP will query the CMS Opt Out list no more than 180 days in advance of credentials committee vote. The initial credentialing file will contain evidence of the query. The query print-out will be kept in the applicants file with printed date and initialed by verifier.

On a monthly basis the Director of the Credentialing Department at TTUHSC EP, monitors and prints the Opting Out of Medicare (Private Contracting) & Current Opt-Out Listing (https://www.novitas-solutions.com/webcenter/portal/MedicareJH/pagebyid?contentId=00025018&_afLoop=2265267068455012#!%40%40%3F_afLoop%3D2265267068455012%26contentId%3D00025018%26_adf.ctrl-state%3Dfgh2rc2ko_17) of its physicians and other health care practitioners through monthly review of the CMS Opt Out list . Upon written request, TTUHSC EP will provide an update report of its query of the Opt Out list.

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In the event TTUHSC EP discovers that one of its Providers appears on the Opt Out list, TTUHSC EP will take the following actions:

1. TTUHSC EP will timely notify the applicable payers
2. Notify the President/Dean, TTUHSC EP.
3. Notify TTUHSC EP General Counsel’s office in order review and discuss possible administrative and/or disciplinary actions that may be taken against a Provider who has failed to maintain their provider status in payer or managed care plans.

Policy Number:	CO 1.8	Version Number:	1.0
Signatory approval on file by:	Approved:	Juan B. Figueroa, M.D., Chair, TTUHSC EP PLFSOM Credentials Committee and Director of Clinical Operations	

Revision History		
	Credentials Committee	Dean Approval
Effective Date:	<u>4/1/2012</u>	<u>4/1/2012</u>
Annual Review Date:	<u>3-25-19, 2-25-20, 3-23-21, 2-23-22, 9-27-23</u>	<u>3-26-19, 2-27-20, 3-25-21, 2-25-22, 9-29-23</u>
Revision Date:	<u>3-31-16, 2-27-18, 11-16-21</u>	<u>5-28-15, 9-25-15, 3-31-16, 2-28-18, 11-17-21</u>