TITLE: Reappointment Process – Advanced Practice Professional

REFERENCE: TJC MS 06.01.03; 06.01.05; 06.01.07; 06.01.09

POLICY:
It is the policy of the UC San Diego Health System (UCSDHS) to promote quality patient care by exercising due care clinical privileges. UCSDHS is committed to making every reasonable effort to collect and evaluate relevant information about applicants, and to make the credentialing decisions that follow reasonably from the information available.

PROCEDURE:
All Advanced Practice Professional Staff shall be reappointed to the Medical Staff biennially for a period not to exceed two (2) years. Medical Staff Administration shall maintain records of the appointment status and send a reappointment application to the practitioner at least 120 days prior to the expiration of his/her current appointment.

1. DOCUMENTATION REQUIRED: To be complete, the applicant must provide all the information requested in the application for reappointment, including:

A. Letter of recommendation from the Department Chair or Division Chief;
B. Copy of current ART/BART certificate.
C. Names and addresses of Two (2) peer references who can attest to the applicant’s current professional competence and health status with regard to privileges requested on the basis of personal knowledge with the prior 24 month period. A peer references is someone with the equal qualifications, training, and the same professional discipline as the applicant. UCSDMC MSA shall solicit written recommendations from the names provided.
D. Copy of applicant’s Performance Evaluation;
E. Application processing fee;
F. Proof of TB screening performed within the past twelve (12) months;
G. Proof of respiratory mask fit testing within the past twelve (12) months;
H. Updated curriculum vitae using mm/yyyy format for each work history experience with an explanation of any work gaps greater than three (3) months.
I. Updated delineation of privileges form.
J. Updated standardized procedures are required for Nurse Practitioners and Nurse Midwives for procedures where a UCSD Standardized Procedure does not exist.
K. Physician Assistants will provide an updated physician services agreement;
L. Signed acknowledgment of receipt of and agreement to comply with the Bylaws, Rules and Regulations;
M. Information as to whether the applicant’s licensure, membership status or clinical privileges have ever been revoked, suspended, reduced or not renewed by or voluntarily surrendered to or by any hospital or health care institution or governmental agency since completion of the last application form;
N. Information on any malpractice or professional liability actions involving the applicant since completion of the last application form, including a consent to the release of information by the applicant’s malpractice insurance carrier(s) and as applicable to include a copy of the judgment entered and a copy of the final settlement.
O. Statement regarding applicant’s physical and mental health and evidence of ability to perform privileges requested;
P. Consent of the applicant to the inspection of records and documents pertinent to his/her licensure, specific training experience, current competence and health status;
Q. The names and addresses of all current employment/professional affiliations.

2. REAPPOINTMENT PACKET PREPARATION: At least four (4) months prior to the expiration of the current Staff appointment, an online reapplication packet is launched and two emails are sent to the Advanced Practice Professional:

A. The first email will provide an electronic link to the Practitioner Home Page to access the application, and the second email will advise them of their personal password.
B. The Practitioner Home Page: Upon login the practitioner will have access to the pre-populated; application and appropriate delineation of privileges form(s)

RETURNED APPLICATION FOR REAPPOINTMENT
Upon receipt, the reappointment materials will be reviewed for verification of completeness. An email request will be sent for the applicant to provide any missing information as identified.

SECOND NOTICE
A. Six weeks following the mailing date, the practitioner will be notified with a “Courtesy Notice.” A late fee will be assessed to all members who have not returned the reappointment materials with the notification that continued lack of response will be deemed a voluntary resignation.
B. Six weeks after the mailing of the “Second and Final Notice”, all non-responses will be processed as voluntary resignations for failure to complete the reappointment process.

PRIMARY SOURCE VERIFICATION OF INFORMATION: all supplied information shall be verified with the primary source whenever feasible by Medical Staff Administration as outlined in MSP 006, Verification by Primary Source – Medical Staff and Advanced Practice Professionals

Status updates are sent to each practitioner with a copy to their department requesting assistance in obtaining outstanding responses. A request will be sent to the re-applicant to provide within 14 days any missing information as identified. The practitioner, department will be notified that if responses are not received by the due date indicated, the practitioner shall be deemed to have resigned.

Ultimate Responsibility - The reapplicant has the ultimate responsibility to ensure responses are received by Medical Staff Administration in a timely manner to process the application.

ADDITIONAL FOLLOW-UP IS REQUIRED FOR:
A. Open or pending claims, settlements, arbitration awards and judgments;
B. Written explanation by the practitioner on questions requesting clarification.
C. Written explanation on practitioner discrepancies; the practitioner has the right to correct erroneous information.
D. Upon request, the practitioner has the right to be informed of the status of his/her reappointment application.
E. The practitioner has the right to review only the information that the practitioner submitted for reappointment or that was sent to the practitioner from Medical Staff Administration regarding his/her reappointment application (see Medical Staff Administration Department policy: Access to Credentials Files);
F. Adverse information report from the licensing board or National Practitioner Data Bank;
G. Requests for new/additional privileges may require documentation of training and experience.

COMPLETED RE-CREDENTIALING REVIEW AND APPROVAL PROCESS:
Upon completion of the re-credentialing process, Medical Staff Administration shall analyze the file and prepare for Interdisciplinary Practice Committee review.
The Interdisciplinary Practice Committee shall review and act upon the department's written recommendation except that the Committee may return the application to the department or applicant for additional information or justification in which case the period of review may be extended until the appropriate information has been submitted.

**Credentials Committee Review**
The Credentials Committee will act on the Interdisciplinary Practice Committee's report and recommendations at its next regularly scheduled meeting. The Credentials Committee shall forward to the next regularly scheduled Medical Staff Executive Committee, a written report recommending the clinical privileges to be granted.

**Medical Staff Executive Committee Review**
The Medical Staff Executive Committee (MSEC) shall review and act upon the Credentials Committee's report and recommendations at its next regularly scheduled meeting. The MSEC may request additional information, return the matter to the Credentials Committee for further investigation, and/or elect to interview the applicant.

The MSEC shall forward to the Governing Body, a written report and recommendation as to Advance Practitioner Professional staff appointment and, if reappointment is recommended, as to department affiliation, clinical privileges to be granted, and any special conditions to be attached to the reappointment. The MSEC may also defer action on the application. The reasons for each recommendation shall be stated.

**Governing Body, UCSD Medical Center**
The Executive Governing Body, or a subcommittee composed of at least two members of the Executive Governing Body, shall act on the recommendation of the Medical Staff Executive Committee within sixty (60) days. The CEO, UCSDHS shall notify the Advanced Practice Professional in writing of either:

A. Reappointment to the Advanced Practice Professional Staff, including any change in clinical privileges, conditions or modifications imposed, or
B. Non-reappointment to the Advanced Practice Professional Staff with a statement of the basis for this decision. An explanation of the appeal mechanism as set forth in Medical Staff Rules and Regulations, Article VI as applicable.

**Medical Staff Administration**
A. Delineation of Privileges forms will be posted on the UCSDHS Intranet.
B. The Medical Staff Administration and hospital databases are updated with demographic data for the new appointee.
C. The reappointment shall be incorporated into the credential files.

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<th>APPROVALS:</th>
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