

SAN MATEO COUNTY HEALTH SYSTEM
BEHAVIORAL HEALTH AND RECOVERY SERVICES

DATE: May 18, 1998

BHRS POLICY 98-16

SUBJECT: Credentialing for County Licensed Professionals

AUTHORITY: Divisional; Welfare and Institutions Code, Section 5751.2;
 MH Policy 03-21, New Employees, Eligibility and Orientation; MH
 Policy 03-22, New Professional Contractors, Screening and Orientation

AMENDED: October 29, 1999; December 10, 2003, February 15, 2005; March 13,
 2013; November 13, 2013

APPLICABILITY: Civil Service Staff and Independent Contractors who participate in an
 OHCA (Organized Health Care Arrangement) with San Mateo County
 Behavioral Health and Recovery Services (BHRS).

ATTACHMENTS

- A. Notice of Professional Responsibility to Maintain Current Clinical License
- B. Procedures for Verification of Licenses and Registrations

BACKGROUND

California Mental Health Laws and Regulations (referenced above) provide that “no person shall be employed in local mental health programs . . . to provide services for which such a license is required, unless the person possesses a currently valid license.” In addition to evidence of a valid license, Behavioral Health and Recovery Services (BHRS) has identified other credentialing standards based on those developed by the National Committee for Quality Assurance (NCQA).

PURPOSE

- To establish objective credentialing criteria for licensed professionals employed by or contracted, as a member of the workforce, with BHRS.
- To describe the consequences of non-compliance with credentialing requirements.

DEFINITION

Independent Contractor “who is a member of Behavioral Health and Recovery Services’ workforce” means those independent contractors who are defined as participating in an Organized Health Care Arrangement (OHCA) with BHRS.

POLICY

This policy applies to all Civil Service and contracted psychiatrists, psychologists, licensed clinical social workers, marriage and family therapists, and registered nurses working at County owned or operated behavioral health sites (members of the OHCA). This policy mandates credentialing of all professional staff to take place at the time hiring/contract initiation and when the individual’s license is renewed. An applicant for initial or subsequent credentialing as a licensed professional shall meet the following standards:

STANDARD	MEASURE
Completion of professional services contractor provider application, or county employment application.	On file, confirmed by Payroll Specialist or contract manager.
Current professional license and evidence of any Board Certification; DEA Certificate; Advanced Practice Certificate.	Confirmation by Quality Management (QM) staff with issuing authority.
For independent contractors, evidence of liability coverage as stipulated in contract (minimum coverage is \$1,000,000/\$3,000,000).	Submission of evidence of coverage; review by BHRS staff; further review by legal and Risk Management staff as needed.
Professional references (new applicants only).	Confirmed by staff; follow-up letters may be requested.
Curriculum Vitae (new applicants only).	On file.
Circumstances and outcomes of any current or previous litigation against provider.	Self-Report; report from National Practitioners’ Data Bank; report from any other appropriate source. A positive finding by staff mandates a secondary review by QM Manager, Medical Director, and Deputy Director for Operations.

STANDARD	MEASURE
Eligible for participation in Federal health care programs.	Verification that the provider is not currently excluded by the Office of Inspector General (OIG) or the General Service Administration (GSA) from participation. On-line screening performed by BHRS Administration or QM staff.
Maintenance of current licensure and certifications as needed.	Verified with source; in personnel file.

LICENSE RENEWAL

All staff providing services for which a license is required must maintain and provide evidence of current licensure:

- It is the sole responsibility of the professional staff member to meet all conditions, including completion of Continuing Education Units, which are required to keep his/her license current.
- A staff member must notify his/her licensing board within thirty (30) days of a legal name change; the reissued license with correct legal name should be submitted to behavioral health administration as soon as available to the staff member.
- Staff who cannot show evidence of licensure after the expiration date must notify his/her supervisor and the QM Manager immediately.
- Staff whose license has expired may be reassigned to a position not requiring a license or may be placed on leave, until evidence of license renewal is submitted.
 - o The Director of BHRS or designee will determine the action to be taken.
 - o The immediate service needs of the division will frame this decision. There is no obligation incumbent upon the division to find an alternate work site.
 - o If no alternate appropriate assignment is identified, the staff member shall be placed on leave without pay.
- Failure to obtain evidence of renewal licensure within 30 days from expiration may result in permanent reassignment, demotion or termination.

Approved: Signature on File
 Stephen Kaplan, Director
 Behavioral Health and Recovery Services

Approved: Signature on File
 Robert Cabaj, MD, Medical Director
 Behavioral Health and Recovery Services