



POLICY & PROCEDURE

SECTION: Administrative

SUBJECT: Provider Credentialing / Re-Credentialing

PAGES: 6

EFFECTIVE DATE: 8/2007

REVISION DATE: 1/2016

POLICY

Each provider of mental health and substance abuse services, whether intern, volunteer, employed or subcontracted, must be credentialed by the Davis Behavioral Health Department of Human Resources in accordance with its policies and the policies of the Utah State Department of Human Services and The Utah State Department of Professional and Occupational Licensing. Davis Behavioral Health's certification process also uses as a guideline, standards of the national accreditation agencies i.e. Joint Commission on Accreditation for Healthcare (JCAHO), Commission on Accreditation for Rehabilitation Facilities (CARF), Council on Accreditation of Services for Children and Families, Inc. (COA), Council on Quality Leadership (CQL), and/or state certification.

As of August 1, 2007, each provider who is not currently credentialed and approved to provide community mental health services must complete the following application package.

Attached are the instructions for completing this application. As of August 1, 2007, all forms and checklists must be sent directly to the Department of Human Resources.

PROCEDURES

Providers will find that they will fall into categories for application to this mental health and substance abuse program. The Provider Enrollment Application may be accessed through the Department of Human Resources. Required personnel forms for Medicare/Medicaid verification are:

1. Davis Behavioral Health Employment Application
 - a. The Employment Application is collected during the recruitment process by the Human Resources Director or Human Resources Specialist. It is stored in the employee's personnel file upon hire.
2. BCI Check (if required)
 - a. The Human Resources Specialist completes the BCI application during the initial new hire orientation and annually on the employees' anniversary date.
3. National Provider Identifier (NPI)
 - a. The Human Resources Specialist completes the National Provider Identifier checklist during the initial new hire orientation. Application for the NPI is then completed using the National Plan & Provider Enumeration System website (<https://nppes.cms.hhs.gov>).
4. Certified copy of transcript
 - a. Transcripts are collected with the Employment Application during the recruitment process. They are then stored in the employee's personnel file.
5. Proof of Licensing or Certification
 - a. Copies of licensure and/or certification are obtained during the application process. Licensure through the State of Utah is verified using the Utah Division of Occupational and Professional Licensing's website (<https://secure.utah.gov/llv/llv>).
 - b. Licenses are verified monthly.
6. Non-appearance on regulatory websites (i.e., OIG, etc.)
 - a. Non-appearance on regulatory websites is conducted monthly on the following systems:
 - i. Excluded Parties List System (<http://www.epls.gov/epls/search.do>)
 - ii. United States Department of Health and Human Services List of Excluded Individuals and Entities (<http://exclusions.oig.hhs.gov/>)
 - iii. Office of Foreign Assets Control Specially Designated Nationals and Blocked Persons (<http://www.treas.gov/offices/enforcement/ofac/sdn/t11sdn.pdf>)
7. Request for Taxpayer Identification
 - a. Taxpayer identification is obtained during the initial new hire orientation when the W-4 form is completed.
8. Provider's Policy Manual Competency Certification

- a. Providers are given copies of Davis Behavioral Health, Inc.'s Professionalism Standards as well as its Corporate Compliance Policies during the initial new hire orientation. Acknowledgment forms are signed and submitted to the Human Resources department and are stored in each employee's personnel file.
 - b. Employees access the Employee Handbook via Davis Behavioral Health, Inc.'s intranet site (<http://www.dbh.utah.net>). Employees are required to access the Handbook and complete acknowledgment forms, which are signed and submitted to the Human Resources department and are stored in each employee's personnel file.
 - i. All updated to the Employee Handbook are communicated via e-mail.
 - c. New employees are also given a copy of the Utah Department of Human Services' Code of Conduct upon hire. The signed acknowledgment form is submitted to the Human Resources Department and included in the employee's personnel file.
9. Electronic Funds Transfer Agreement
 - a. Individual providers are not required to complete separate Electronic Funds Transfer Agreements.
 - b. An Electronic Funds Transfer Agreement for Davis Behavioral Health, Inc. has been submitted to Medicaid and funds are currently being transferred for Youth in Custody and Capitated Medicaid.
10. Competence Checklist for Electronic Documentation Standards
 - a. Davis Behavioral Health, Inc. Finance Department verifies that the agency has met the standards.
11. Provider Electronic Funds Transfer Information with an attached voided check or bank specification sheet.
 - a. Funds are not paid directly to individual providers. All funds are paid to Davis Behavioral Health, Inc. and transferred electronically to the agency's accounts.
12. All CEU Credits
 - a. Individual providers maintain record and documentation for all CEU credits completed.

Provider Category	Must Submit	Completed By
New Provider	<ul style="list-style-type: none"> All forms 	<ul style="list-style-type: none"> Human Resource Specialist
Current Provider requesting change of licensing status	<ul style="list-style-type: none"> #4 – Certified Copy of transcript #5 – Proof of Licensing or Certification # 9- Documentation Standards 	<ul style="list-style-type: none"> Submitted by Provider Submitted by Provider; Verified by HR Specialist Maintained and Verified by Finance Department
Current Credentialed Providers	<ul style="list-style-type: none"> Corporate Compliance Competency certification Cultural Competency Certification Annual CEU's Annual Mandatory Training Proof of Attendance Any certification or licensing status changes 	<ul style="list-style-type: none"> Submitted by Provider Training Provided by DBH Management Record Maintained by Provider Training Record Kept in Personnel File License/Certificate Submitted by Provider; Verified by HR

Authorization Authorities

SERVICE IN STATE PLAN	AUTHORIZATION FOR SERVICES IN STATE PLAN	FURNISHED BY	SUPERVISED BY
Diagnostic/Functional Assessment	Physician, LCSW, Licensed Psychologist, APRN, Physician's Assistant or LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	Physician, LCSW, Licensed Psychologist, APRN, or LPC/LMFT that meets criteria for Licensed Mental Health Professional	Physician or LICENSED MENTAL HEALTH PROFESSIONAL
Clinic-Based Crisis Management	Physician, LCSW, Licensed Psychologist, APRN, Physician's Assistant or LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	LICENSED MENTAL HEALTH PROFESSIONAL, LSAC, LSAC or staff under supervision of Licensed Mental Health Professional or LSAC	Physician or LICENSED MENTAL HEALTH PROFESSIONAL
Out-of-Clinic Crisis Management	Physician, LCSW, Licensed Psychologist, APRN, Physician's Assistant or LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	Physician, Licensed Mental Health Professional, LSAC, LSAC or staff under supervision of Licensed Mental Health Professional	Physician or LICENSED MENTAL HEALTH PROFESSIONAL
Crisis Residential Services	Physician	Physician or person under supervision of Physician	Physician
Individual Outpatient Services	Physician, LCSW, Licensed Psychologist, APRN, or LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	Physician, APRN, Licensed Mental Health Professional, LSAC, Case Manager	Physician or LICENSED MENTAL HEALTH PROFESSIONAL
Family Outpatient Services	Physician, LCSW, Licensed Psychologist, APRN, Physician's Assistant or LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	LICENSED MENTAL HEALTH PROFESSIONAL, LSAC,	Physician or LICENSED MENTAL HEALTH PROFESSIONAL
Group Outpatient Services	Physician, LCSW, Licensed Psychologist, APRN, Physician's Assistant or LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	LICENSED MENTAL HEALTH PROFESSIONAL, LSAC or person under supervision of LICENSED MENTAL HEALTH	Physician or LICENSED MENTAL HEALTH PROFESSIONAL
Medication Administration	Physician, APRN, Physician's Assistant	Physician or Licensed Nurse	Physician or AP RN
Ambulatory Detoxification	Physician	Physician or Licensed Nurse	Physician
Physician Assessment	Physician, APRN, Physician's Assistant	Physician	Physician
Nursing Assessment and Care	Physician, APRN, RN, LPN	Licensed Nurse	Physician or RN

SERVICE IN STATE PLAN	AUTHORIZATION FOR SERVICES IN STATE PLAN	FURNISHED BY	SUPERVISED BY
Intensive Outpatient Treatment	Physician or Licensed Psychologists, APRN, LMHP	LMHP,LSAC	Physician or LICENSED MENTAL HEALTH PROFESSIONAL
Substance Abuse Day Treatment Services	Physician, APRN, LMHP	Physician, LSAC, LMPH, HST or staff under the supervision of Licensed Mental Health Professional,	Physician or LICENSED MENTAL HEALTH PROFESSIONAL
Rehabilitative Supports for Individuals in Residential Alternatives	Physician, LCSW, Licensed Psychologist, APRN, LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	Physician, Licensed Mental Health Professional, LSAC, Case Manager or staff under the supervision of Licensed Mental Health Professional, including peer support specialist	LICENSED MENTAL HEALTH PROFESSIONAL
Personal recovery oriented /community support services	Physician, LCSW, Licensed Psychologist, APRN, LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	Physician, APRN,RN, Licensed Mental Health Professional, LSAC, Case Manager or staff under the supervision of Licensed Mental Health Professional, including peer support specialist	LICENSED MENTAL HEALTH PROFESSIONAL or LSAC
Community Outreach	Physician and Licensed Psychologists, APRN, LMHP	The team must include a registered nurse, a Licensed Mental Health Professional, a case manager, and/or a Peer Support Specialists. The team leader must be a licensed clinician.	Physician, LCSW or Licensed Psychologist, APRN
Personal Recovery Oriented Services (PROS)	Physician, LCSW, Licensed Psychologist, APRN, Physician's Assistant or LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	LSAC, Licensed Mental Health Professional, peer support specialist or paraprofessional under the supervision of an LSAC or Licensed Mental Health Professional	LICENSED MENTAL HEALTH PROFESSIONAL

SERVICE IN STATE PLAN	AUTHORIZATION FOR SERVICES IN STATE PLAN	FURNISHED BY	SUPERVISED BY
C&A Day Treatment	Physician, LCSW, Licensed Psychologist, APRN, or LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	LICENSED MENTAL HEALTH PROFESSIONAL, or persons under the supervision of Licensed Mental Health Professional	LICENSED MENTAL HEALTH PROFESSIONAL
Peer Support	Physician, LCSW, Licensed Psychologist, APRN, or LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	LICENSED MENTAL HEALTH PROFESSIONAL, person under the supervision of LICENSED MENTAL HEALTH	LICENSED MENTAL HEALTH PROFESSIONAL
Day Treatment for Children and Adolescents with Severe Emotional Disturbances	Physician, LCSW, Licensed Psychologist, APRN, or LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	A Licensed Mental Health Professional, or an individual under the supervision of a Licensed Mental Health Professional, including a Peer Support Specialist	LICENSED MENTAL HEALTH PROFESSIONAL
Intensive Family Intervention	Physician, LCSW, Licensed Psychologist, APRN, LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	A Licensed Mental Health Professional (or a paraprofessional that works under the supervision of an Licensed Mental Health Professional	LICENSED MENTAL HEALTH PROFESSIONAL
Substance Abuse Adolescent Day Treatment	Physician, LCSW, Licensed Psychologist, APRN, or LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	A LMPH , LSAC, or an individual under the supervision of an LMPH	Licensed Mental Health Professional
B-3 Services	Physician, LCSW, Licensed Psychologist, APRN, or LPC/LMFT that meets criteria for Licensed Mental Health Professional with documentation of two (2) years supervised clinical/work experience in addictive diseases or working with individuals with SPMI and/or SED.	A Licensed Mental Health Professional, or an individual under the supervision of an LMHP	LICENSED MENTAL HEALTH PROFESSIONAL

Credentialing/Re-Credentialing Tracking Log



Name	<input type="text"/>	
License	Select...	
Hire Date	<input type="text"/>	
Log Activity	<input type="checkbox"/> Initial Credentialing	<input type="checkbox"/> Re-Credentialing

Documentation

	Date
Employment/Subcontract Application	<input type="text"/>
Diploma and/or College Transcripts <input type="checkbox"/> N/A	<input type="text"/>
Professional License <input type="checkbox"/> N/A	<input type="text"/>
NPI Notification*	<input type="text"/>

Credentialing/Re-Credentialing Activity

	Date
Professional License Verification (DOPL) <input type="checkbox"/> N/A	<input type="text"/>
System for Award Management (SAM)	<input type="text"/>
LEIE	<input type="text"/>
Office of Foreign Assets Control (OFAC)	<input type="text"/>
BCI (Last Approved Date)	<input type="text"/>

X

Kathy Carson
Human Resources Generalist

* NPI notification will be collected for all new hires and new subcontractors who have previously been assigned a NPI. NPI application will be completed by all employees who have not yet received a NPI. It is the responsibility of all subcontractors to obtain a NPI prior to contracting with DBH.