



*Credentialing Office Policy and Procedure*

<b>Title: REINSTATEMENT OF CLINICAL MEMBERSHIP AND PRIVILEGES AFTER RECENT INACTIVATION</b>	Policy Number: <b>CO 1.9</b>
Regulation Reference:	<b>Effective Date: 2/28/2018</b> <b>Last Annual Review Date: 9-29-23</b> <b>Last Revision Date: 5-24-18</b> (Revision History on last page)

**Policy Statement:**

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It is the policy of Paul L. Foster School of Medicine (PLFSOM) to implement a process for those practitioners of the professional staff who are inactivated and soon after request reinstatement of their clinical appointment and privileges.

**Procedure:**

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All items verified by copy, oral, written, modem, and Internet must be dated and signed/initialed by a Credentialing Office person who verified the credentials.

1. May request reinstatement only within 6 months from the effective Inactivation date.
2. Signed letter from Department Chair requesting reinstatement of applicant and describing his/her new clinical role.
3. The applicant must supply the Credentialing Office with the following:
  - Signed written request for reinstatement from applicant.
  - Texas Standardized Credentialing Application Forms: Answer questions on Pages 8 and 9, and Sign and initial Attestation and Consent to Release of Information – Pages 11 and 12
  - Completed Delineation of Privilege form specific to the service the applicant is requesting appointment (if applicable)
  - Current copy of malpractice face sheet
  - Any additional education obtained since inactivation from TTUHSCEP
  - Name and addresses of hospital affiliations where he/she has been credentialed since inactivation from TTUHSCEP
  - Name and addresses of institutions where he/she has worked since inactivation from TTUHSCEP
4. The Credentialing Office will date stamp the all documents on the upper right-hand corner upon receipt and will verify from primary source the following:
  - state license/s
  - DEA certificate
  - liability insurance coverage and claims

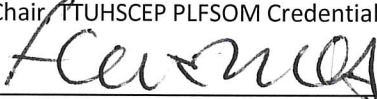
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- NPDB

-Any additional education, hospital affiliation, or employment obtained during the inactivation period.

- a. Office of Inspector General (OIG) – U.S. Department of Health & Human Services
- b. Office of Inspector General (OIG) – Texas Health & Human Services Commission
- c. System for Award Management (SAM)
- d. Medicare Opt Out List Search
- e. Department of Treasury's Office of Foreign Assets Control (OFAC) List
- f. Sex Offender Registry – Texas Department of Public Safety, and National Sex Offender

5. Delineation of Privileges completed. Privileges form(s) will include the following:
  - applicant’s signature and date on form(s),
  - supervising physician signatures, if not a licensed independent practitioner, or if applicable
  - “ Non Applicable” written by the privilege(s) not requested, and documentation of training/experience on privilege(s), if applicable.
  - If prescriptive authority privileges are requested, current and unrestricted DEA certificates are required and will be verified.
6. Upon receipt of all required information, the credentials file will be forwarded to the appropriate Department Chair for review and approval or denial of the application.
7. The Department Chair’s recommendation will be forwarded to the Credentials Committee for review and recommendation, then to the MPIP Policy Committee for review and recommendation, then to the Dean for final decision.
8. Enter into the credentialing database the appropriate appointment date.

Policy Number:	<b>CO 1.9</b>	Version Number: <b>1.0</b>
Signatory approval on file by:	<b>Approved:</b>	Juan B. Figueroa, M.D., Chair, TTUHSCEP PLFSOM Credentials Committee and Director of Clinical Operations 

Revision History		
	Credentials Committee	Dean Approval
Effective Date:	<u>2/27/2018</u>	<u>2/28/2018</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>5-23-18</u>	<u>5-24-18</u>