

Facility Credentialing and Recredentialing

Reviewed Facilities

Harvard Pilgrim or its delegates complete a standardized process of data collection and evaluation of facilities prior to contracting to provide care to members. The same credentialing procedures are followed for all Harvard Pilgrim facilities. If the facility is not accredited and does not have a Department of Public Health (DPH)/Centers for Medicare & Medicaid Services (CMS) survey, then it does not meet Harvard Pilgrim's criteria for affiliation and therefore, cannot be contracted. Physical Therapy (PT), Speech Therapy (ST), and Occupational Therapy (OT) groups do not require accreditation or survey.

The following types of facilities are credentialed:

- Acute care hospitals, including critical care access hospitals
- Acute rehabilitation hospitals
- Applied Behavioral Analysis organizations
- Behavioral health facilities providing mental health or substance abuse services in an inpatient, residential or ambulatory setting
- Cardiac rehabilitation services
- Clinics, including convenience care clinics (e.g., Minute Clinics), Rural Health Clinics, Federally Qualified Health Centers, Public Health Agency, Urgent Care Centers
- Comprehensive Outpatient Rehab Facility (CORF)
- End stage renal disease treatment facility (ESRD) (e.g., Dialysis Centers)
- Freestanding surgical centers (includes family planning and assisted reproductive technology)
- Rehab agency/PT/OT/ST (functional therapy groups)
- Home health care & home infusion provider
- Hospice provider
- Hyperbaric centers
- Independent laboratory, including general outpatient labs, genetics labs, sleep labs
- Inpatient mental health hospitals
- Radiology, including Independent diagnostic testing facility, supplier of portable x-ray services
- Skilled nursing facility (SNF)
- Supplier-Diabetes Prevention

Initial Credentialing Process

At the direction of the Harvard Pilgrim contracting department, a facility credentialing application is sent to the facility to assist in gathering relevant information. Information provided by the facility is reviewed by credentialing specialists to determine if the facility meets Harvard Pilgrim standards. All information is evaluated by the credentialing staff.

The Credentialing Committee or designee makes a final decision on all initial facility applications, to either approve, give time-limited approval, or deny.

Recredentialing Process

All facilities under contract with Harvard Pilgrim will undergo a recredentialing review every three years or more often if deemed necessary by the Credentialing Committee or credentialing department. The review process and standards for recredentialing are the same as those for initial credentialing, except where otherwise noted, and include:

- Gathering specific data from facilities regarding current licensure and accreditation
- Monitoring member complaints, clinical occurrences, and incident reporting data to evaluate facilities on a continual basis
- Reviewing recent accreditation report, if not accredited, review of the DPH/CMS survey results
- Immediately investigating serious incidents, which may include a site visit to the facility

The Credentialing Committee or designee makes a final decision on all recredentialing applications, to either approve, give time-limited approval, or terminate.

Requirements

The following data elements are required for credentialing/recredentialing:

- Applicable accreditation letter, grid, summary report and acceptance letter (if applicable), or other accrediting body summary report (if applicable) (see *Accreditation Agencies* for list of approved accrediting bodies)
- Current state license (if applicable)
- Facility's most recent DPH/CMS survey result (for non-accredited facilities only)
- Copy of Medicare and Medicaid certification (if applicable)
- Absence of Medicare sanctions

If the Organizational provider participates in Medicare/Medicaid, Medicare/Medicaid certification and an absence of Medicare/Medicaid Sanctions verified via the following sources:

- Lists of Medicare/Medicaid certified providers prepared by CMS
- Letters from the State or Medicare/Medicaid fiscal intermediaries
- Letters to the provider from Medicare/Medicaid, CMS

Non-Accredited Facilities

Non-accredited facilities will be required to submit additional information, including their most recent DPH/CMS site visit report. If the facility is not accredited, and does not have a DPH/CMS survey, then it does not meet Harvard Pilgrim's criteria for affiliation and therefore, cannot be contracted. Physical Therapy (PT), Speech Therapy (ST) and Occupational Therapy (OT) groups do not require accreditation or survey.

Other Information

Additional data will be gathered from internal Harvard Pilgrim sources, including member complaints about a facility, clinical occurrence reports and incident report data.

Facility Site Visit Exception

There are two exceptions to the facility site visit requirement as follows:

- Facilities accredited by a Harvard Pilgrim-recognized accreditation agency do not require a survey.
- Site visits and survey results provided by regulatory agencies (e.g., DPH/CMS) are acceptable.

Investigation of Quality of Care

Harvard Pilgrim may require a site visit at a credentialed facility if one or more serious quality of care issues has been identified, resulting in a need to re-evaluate the facility's credentialing status. Circumstances triggering such a site visit include:

- The facility credentialing committee awarded time-limited credentialing approval or monitored status approval due to quality-of-care issues and the committee deems an on-site assessment of the effectiveness of the facility's corrective actions is necessary.
- The facility has been sanctioned by the State Department of Public Health, or equivalent, for quality-of-care deficiencies (i.e., admissions have been closed, or the facility has been fined by the state Department of Public Health).
- The facility's accreditation agency has withdrawn accreditation, or has taken other significant, adverse action against the facility.
- The facility has experienced a cluster, trend or pattern of quality-of-care problems, as identified by Harvard Pilgrim's clinical occurrence reports, state DPH and/or CMS surveys, member concerns process or analysis of quality indicator information.

Accreditation Agencies

Facilities that are not accredited by one of the agencies listed below must provide a copy of their recent State/CMS Survey. Harvard Pilgrim recognizes the following accreditation agencies:

- Accreditation Association for Ambulatory Health Care (AAAHC)
- Accreditation Commission for Health Care (ACHC)
- American Academy of Sleep Medicine (AASMNET)
- American Association for the Accreditation of Ambulatory Surgery Facilities (AAAASF)
- American Association of Blood Bank (AABB)
- American Board for Certification in Orthotics & Prosthetics, Inc. (ABCOP)
- American College of Radiology (ACR)
- American Registry of Diagnostic Medical Sonogram (ARDMS)
- American Society for Radiation Oncology (ASTRO)
- Autism Commission on Quality (ACQ)
- Behavioral Health Center of Excellence (BHCOE)
- Board of Certification/Accreditation International (BOC)
- Center for Disease Control and Prevention National Diabetes Prevention Program (CDC)
- Centers for Medicare & Medicaid Services (CMS)
- Clinical Laboratory Improvement Amendment (CLIA)
- College of American Pathologist (CAP)
- Commission on Accreditation of Rehabilitation Facilities (CARF)
- Commission on Office Laboratory Accreditation (COLA)
- Community Health Accreditation Program (CHAP)
- Council on Accreditation (COA)
- DNV Healthcare Inc. (NIAHO Hospital Accreditation Program)
- Global Autism Project Accreditation (GAPA)
- Healthcare Quality Association on Accreditation (HQAA)
- Intersocietal Accreditation Commission (IAC)
- Intersocietal Commission for the Accreditation of Nuclear Medicine (ICANL)
- The Joint Commission (TJC) — formally known as JCAHO (Joint Commission on Accreditation of Healthcare Organizations)
- National Abortion Federation (PPFS)
- National Association of Boards of Pharmacy
- Planned Parenthood Federation of America, Inc. (PPFA)
- The American Osteopathic Association's Healthcare Facilities Accreditation Program (HFAP)
- The Compliance Team, Inc.
- The National Board for Accreditation for Orthotics Suppliers (NBAOS)
- Undersea & Hyperbaric Medical Society (UHMS)
- Urgent Care Association of America (UCAOA)
- Utilization Review Accreditation Commission Inc. (URAC)

PUBLICATION HISTORY

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| 10/15/11 | updated accreditation agencies information |
| 03/15/12 | minor edits for clarity |
| 03/15/13 | added facilities to the Reviewed Facilities section; added agencies to the Accreditation Agencies section |
| 06/15/13 | minor edits for clarity |
| 06/15/14 | added urgent care centers to reviewed facilities; added CT information to reviewed facilities and recredentialing process sections |
| 10/15/15 | reviewed; no changes |
| 06/15/16 | added facility credentialing application to the Initial Credentialing Process section |
| 07/15/17 | added Urgent Care Association of America (UCAOA) to the Accreditation Agencies section |
| 04/01/18 | added Centers for Medicare & Medicaid Services (CMS) to the Accreditation Agencies section |
| 09/04/18 | removed facility communication policy and procedure information |
| 11/01/18 | added Medicare/Medicaid sanctions verification sources; administrative edits for clarity |
| 12/03/18 | updated Reviewed Facilities; updated Accreditation Agencies |
| 10/14/20 | updated Accreditation Agencies |
| 05/01/21 | updated Accreditation Agencies |
| 01/01/23 | reviewed; administrative edits |
| 09/01/23 | updated for behavioral health insourcing effective on 11/01/23 |
| 05/01/26 | updated to align with current Point32Health credentialing processes |