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# Ascension

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**Owner:** Judy Viczian: Dir Medical Staff  
 Srvcs  
**Policy Area:** Medical Staff  
**Reference Tags:** [Medical Staff \(Structural Category\)](#)  
**Applicability:** Affinity Health System  
 Affinity Medical Group  
 Calumet Medical Center  
 Mercy Medical Center  
 St. Elizabeth Hospital

## Centralized Credentials Committee (CCC) Duties and Responsibilities

### Summary:

To evaluate initial applications and biennial reappointment applications, as applicable by The Joint Commission (TJC), NCQA, and/or CMS Standards and requests for expanded privileges, or change in privileges for Licensed Independent Practitioners and/or Allied Health Professionals (LIP/AHP) seeking membership or privileges at any of the Affinity Health System (AHS) entities to include Affinity Medical Group, Calumet Medical Center, St. Elizabeth Hospital Surgery Center, Mercy Medical Center, and St Elizabeth Hospital. To evaluate initial and reappointment applications from LIP's and/or AHP's, and organizational providers (OP) seeking to participate in the Health Plan. To ensure applicants and reapplicants 1) meet all established credentialing/recredentialing and privileging criteria as defined in the AHS Medical Staff Bylaws, Rules and Regulations, and policies and procedures, and 2) are qualified, demonstrate continued competence, and remain committed to high quality patient care. To recommend action to the Medical Executive Committee (MEC), or its equivalent, on all applications/reapplications. This policy is intended to be used in conjunction with the AHS Medical Staff Bylaws, and Policies and Procedures for credentialing/recredentialing.

### POLICY STATEMENT:

The Centralized Credentialing Committee (CCC) is composed of members from and appointed by each AHS entity. The CCC shall meet monthly at a date, time and location determined by its membership. The CCC must evaluate the request of any LIP and/or AHP desiring privileges or membership at AHS entities.

The application/reapplication, only when the application and all verifications are considered complete, will be forwarded to the CCC for evaluation and recommendation.

### PROCEDURE:

The CCC, within one month upon receiving a completed application/reapplication, shall make a

recommendation to the MEC, or their equivalent, as to whether membership and/or privileges may be granted and any special conditions to be attached to such membership and /or privileges. The CCC may also recommend deferring action. If the CCC recommends denying membership and/or privileges, the report shall be forwarded to the MEC.

**DUTIES:**

- I. Review initial applications for membership/privileges to the Medical/Allied Health Staff.
- II. Review requests for additions/changes to status/privileges from LIP's and/or AHP's.
- III. Review biennial reappointment applications for membership/privileges to the AHS Medical/ Allied Health Staff from LIP's and/or AHP's
- IV. Review initial applications for LIP's and/or AHP's.
- V. Review policies and procedures as required.

**REFERENCES:**

AHS Medical Staff Bylaws

Medical Staff Services Credentialing/Recredentialing policies

EM3 IO\_ID: 13315

**Attachments:**

[Medical Staff Bylaws of Calumet Medical Center](#)

**Approval Signatures**

Approver	Date
Ellen Versteegen: Senior Executive Asst	9/6/2017
Judy Viczian: Dir Medical Staff Srvc	8/25/2017