

Credentialing Office Policy and Procedure

Title: COMPLAINTS AND OCCURRENCE TRACKING, AND REPORTING TO AUTHORITIES AND HEALTH PLANS	Policy Number: CO 1.12
Regulation Reference: NCQA CR6.A.1; NCQA CR6.A.2;	Effective Date: 05-24-2018 Last Annual Review Date: 11-04-2024 Last Revision Date: 09-27-2018 (Revision History on last page)

Policy Statement:

Texas Tech University Health Sciences Center El Paso (TTUHSCEP) is committed to providing quality care. Addressing and tracking complaints will enhance our ability to provide quality care.

Complaints & Occurrence Tracking:

The Credentialing Office will track complaints by obtaining reports from the Clinical Affairs department of any complaint regarding members of the Professional Staff (from ambulatory clinics) or occurrences directly related to them on a monthly basis. All complaints & occurrences must be tracked and documented to include resolution/action taken or absence of findings, by the Clinical Affairs department.

The Credentialing Office must maintain monthly reports of complaints received. Monthly reports shall include name of provider and date when they were received.

The Clinical Affairs department shall maintain related records and information available for review, if needed by anyone approved and defined under policy CO1.2 Protection of the Confidentiality of Professional Staff Records.

Upon reporting of an occurrence described above, the report must be evaluated by the Office of Quality Improvement and through periodic reporting by the Office of Risk Management for severity categorization. According to this evaluation, TTUHSCEP may be required to implement appropriate actions. These include reporting to the Health Plans within five (5) days of determining the need for an adverse action towards the practitioner.

Reporting to Authorities and Health Plan:

Upon suspension or termination of a member of the Professional Staff, due to deficient clinical or professional performance as determined by the Professional Staff Bylaws, all appropriate authorities must be notified, including State licensing agencies, National Practitioner Data Bank within the established time frames. Health plans must be notified within five (5) days of suspension/termination from the TTUHSCEP Professional Staff.

TTUHSCEP will complete and submit a First Tier, Downstream, and Related Entity (FDR) Certification of Compliance Form on an annual basis, as required by the delegated Health Plan(s).

Policy Number:	CO 1.12	Version Number: 1.0	
2			
Signatory approval on file by:	Approved:	Adam H. Adler, M.D., Chair, TTUHSCEP PLFSOM Credentials Committee	

Revision History			
	Credentials Committee	Dean Approval	
Effective Date:	05-23-18	05-24-18	
Annual Review Date:	03-25-19, 02-25-20, 03-23-21, 02-23-22,	03-26-19, 02-27-20, 03-25-21, 02-25-22, 09-29-23, 11-04-24	
	09-27-23, 10-30-24		
Revision Date:	02-27-18, 09-25-18	02-28-18, 09-27-18	