# QUALITY IMPROVEMENT COMMITTEE or ACTIVITY REPORT

Name of Reporting Committee or Activity:

Monitoring or Meeting Period:

Credentialing Committee

<u>December 6, 2017</u>

### Areas of Review or Committee Activity

Credentialing of new applicants and recredentialing of existing network practitioners

## **Findings and Analysis**

Initial Credentialing (excludes delegated practitioners)		
Number initial practitioners credentialed	22	
Initial practitioners credentialed within 180 days of attestation signature	100%	100%
Recredentialing		
Number practitioners due to be recredentialed	19	
Number practitioners recredentialed within 36-month timeline	19	
% recredentialed timely	100%	100%
Number of Quality of Care issues requiring mid-cycle consideration	0	
Percentage of all practitioners reviewed for ongoing sanctions or licensure limitations or issues	100%	100%
Terminated/Rejected/Suspended/Denied		
Existing practitioners terminated with cause	0	
New practitioners denied for cause	0	
Number of Fair Hearings	0	
Number of B&P Code 805 filings	0	
Total number of practitioners in network (excludes delegated providers) as of 11/30/17	198	

	Stanford	LPCH	NT 20	NT 40	NT 50	NT 60
Total # of Initial Creds	154	93	33	81	9	5
Total # of Recreds	172	111	43	182	15	9
	Stanford	LPCH	NT 20	NT 40	NT 50	NT 60
(For Quality of Care ONLY)						
Total # of Suspension	0	0	0	0	0	0
Total # of Terminations	0	0	0	0	0	0
Total # of Resignations	0	0	0	0	0	0
Total # of practitioners	769	780	732	700	380	118

Note: This is a count of single providers in their credentialed networks. A provider belonging to multiple networks will be counted for each network once.

### Actions Taken

- 1. All current network practitioners and providers were monitored on an ongoing basis for licensing issues, sanctions, validated quality of care issues and opt-out exclusion. No currently credentialed practitioner or provider had an identified issue on any of the exclusion lists or licensing boards.
- 2. Staff education conducted regarding the recredentialing of practitioners within the required 36month timeframe. Procedure review of mailing pre-populated recredentialing applications six months prior to due date reviewed.

#### **Outcomes & Re-measurement**

Weekly re-measurement will be conducted on recredentialing applications to measure compliance