

## Policy: Expedited Approval

<b>DEPARTMENT SPECIFIC: Only affects one department.</b>							
<b>Folder</b>	Medical Staff Services			<b>Sub-Folder (If Applicable)</b>	Click here to enter text.		
<b>Effective Date</b>	10/8/2002	<b>Approved</b> Approver/Date	<i>Reviewed: Medical Staff Services Manager 2/27/2020; CMO 2/27/2020 Medical Executive Committee 4/25/17; Board of Directors 4/27/17</i>				
<b>Last Reviewed/ Revised Date</b>	2/27/2020	<b>OSHA Category (If Applicable)</b>	Not Applicable	<b>Standard (If Applicable)</b>	MS.06.01.11	<b>Number of pages</b>	<b>3</b>

### **PURPOSE:**

To establish uniform guidelines to govern the expedited approval of applications for appointment or reappointment and the granting, renewal, or modification of privileges for individuals credentialed and privileged to practice at SoutheastHEALTH.

### **SKILL LEVEL:**

Medical Staff Services personnel

### **GUIDELINES:**

In order for granting of privileges to be considered, the application must be complete, verified, and recommended for approval and must meet the criteria set forth in this policy. The approval process may be expedited as detailed in this policy/procedure. The Credentials Committee may request that an appropriate subject-matter expert assess selected applications. At all stages in this review process, the burden is upon the applicant to provide evidence that he/she meets the criteria for membership on the medical staff and for the granting of requested privileges.

If one or more of the following criteria are identified in the course of review, the applicant will not be eligible for expedited appointment, reappointment, or the grant, renewal or modification of clinical privileges:

- Applicant submits an incomplete application
- The Medical Executive Committee makes a final recommendation that is adverse or with limitation

The following situations will be evaluated on a case-by-case basis and usually result in ineligibility for the expedited process:

- There is a current challenge or a previously successful challenge to licensure or registration

- Applicant is found to have experienced an involuntary termination of medical staff membership or involuntary limitation, reduction, denial, or loss of clinical privileges at another organization
- There has been an unusual pattern of, or an excessive number of professional liability actions resulting in a final judgment adverse to the applicant
- Applicant changed medical schools or residency programs or has gaps in training or practice
- Applicant has practiced or been licensed in three (3) or more locations within the past ten (10) years
- Applicant has one (1) or more references that raise concerns or questions
- Discrepancy found between information received from the applicant and references or verified information
- Applicant has an adverse National Practitioner Data Bank report
- The request for clinical privileges is not reasonable based on the applicant's experience, training, and competence, and/or is not in compliance with applicable criteria
- Applicant has been removed from a managed care panel for reasons of unprofessional conduct or quality
- Results of a criminal background check warrant further investigation
- Applicant has documented relevant physical, mental, and/or emotional health problems which could potentially affect his/her ability to carry out the privileges requested

Only under extreme circumstances and when agreed upon by the President of the Medical Staff (or in his absence, his designee) and the hospital President/Chief Executive Officer (or in his absence, other designated representative of the Board of Directors), will deviation from this policy occur.

**PROCEDURE:**

Privileges are granted by action of the Hospital Board of Directors as outlined in the Medical Staff Bylaws. Appointment, reappointment, or the granting, renewal or modification of clinical privileges may be expedited following a positive recommendation from the Medical Executive Committee or by a subcommittee to which the Hospital Board of Directors has delegated the authority to render those decisions. The subcommittee will consist of at least two members of the Hospital Board of Directors selected by the Board's chairman to serve in that capacity. If the subcommittee's decision is to grant the requested appointment, reappointment, or the grant, renewal or modification of clinical privileges, the subcommittee's decision will be considered to be that of the Hospital Board of Directors. If the subcommittee's decision is adverse to the applicant, the application will be referred back to the Medical Executive Committee for further evaluation.

**REFERENCES:**

Sagan, T., MD, JD 2015. Top 45 Medical Staff Policies and Procedures, 5<sup>th</sup> Edition. HC Pro, A division of BLR, Danvers, MA. Section 27.

TJC 06.01.11 Accessed February 27, 2020

**Attachments:**

None