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POLICY OWNER	Senior Provider Network Manager	EFFECTIVE DATE	01/01/2021
REVIEWERS	Chief Medical Officer, Director of Network Development, Credentialing Committee		
REVISION DATE		NEXT REVIEW DATE	

PURPOSE

To provide a mechanism by which to determine whether Embright should restrict, suspend or terminate a licensed practitioner's ability to provide health care services to Embright members based upon deficiencies in the licensed practitioner's quality of care, or professional conduct which adversely affects or could adversely affect the health, safety or welfare of any Embright member.

POLICY

Only professionally competent licensed practitioners who continuously meet the qualifications and standards established by the Credentialing Committee of Embright shall be allowed to contract with Embright and/or provide health care services to Embright members.

If the Chief Medical Officer and/or Credentialing Committee obtains information or evidence of deficiencies in the quality of care rendered to Embright members by a licensed practitioner or if a licensed practitioner has failed or is failing to comply with or meet Embright qualifications and standards for Embright licensed practitioners. Embright shall follow the procedures set forth below.

Legal Counsel may be consulted by Embright before recommendation or decision which adversely affects a licensed practitioner's privileges or credentialing status become final.

"Adverse action" shall be defined as the reduction, suspension or termination of a practitioner's network participation with Embright.

Procedures:

1. Investigation

- 1.1. **Informal Action:** The Chief Medical Officer and Credentialing Committee may counsel, educate, issue letters of warning censure, or institute retrospective or concurrent monitoring in the course of carrying out their duties without initiating formal corrective or disciplinary action. Counseling, education and warnings to licensed practitioners may be issued orally or in writing. The licensed practitioner shall be given an opportunity to respond in writing and may be given an opportunity to meet with the Chief Medical Officer or Credentialing Committee. Informal actions shall be documented in the licensed practitioner's credentials file. Informal actions shall not constitute a restriction of the licensed practitioner's participation or grounds for a hearing under Embright's Fair Hearing Procedure.
- 1.2. **Criteria for Initiation of Formal Action:** A formal investigation potentially resulting in the restriction, suspension or termination of a licensed practitioner's ability to provide health care services to Embright members may be initiated whenever Embright obtains reliable information which indicates that a licensed practitioner may have exhibited acts, demeanor, or conduct or rendered professional service to Embright members that is/are reasonably likely to be:

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- 1.2.1. detrimental to patient health or safety or to the delivery of quality patient care to Embright members;
- 1.2.2. unethical
- 1.2.3. contrary to Embright's policies and procedures
- 1.2.4. below applicable professional standards
- 1.2.5. disruptive of Embright operations; or
- 1.2.6. an improper use of Embright resources

- 1.3. **Investigation and Review by Chief Medical Officer:** Whenever information suggests that corrective action may be warranted, the Chief Medical Officer or his/her designee shall, on behalf of the Credentialing Committee, promptly investigate the allegations made against the licensed practitioner and review all information received regarding the licensed practitioner. If available, additional relevant information shall be obtained concerning the quality of care rendered by the licensed practitioner and/or the licensed practitioner's professional competence, conduct or services which fail to comply with Embright's qualifications and standards. The Chief Medical Officer or his/her designee may, as deemed appropriate; interview the person involved and give the licensed practitioner an opportunity to furnish information. The information developed during this initial investigation and review shall be presented to the Credentialing Committee for further investigation and review.

Despite the status of any investigation, at all times the Chief Medical Officer shall retain authority and discretion to take whatever intermediate action may be warranted by the circumstances including, but not limited to:

- 1.3.1. allowing the licensed practitioner to render services to Embright members until the investigation and peer review process is completed;
- 1.3.2. placing the licensed practitioner on probationary status with specific restrictions outlined; or
- 1.3.3. immediately suspending the licensed practitioner from any further rendering of services to Embright members.

2. **Recommendation of the Chief Medical Officer**

- 2.1. As soon as practicable after concluding an investigation and review, the Chief Medical Officer shall submit to the Credentialing Committee:
 - 2.1.1. all information, documentation and/or reports reviewed by the Chief Medical Officer;
 - 2.1.2. written findings concerning the results of the investigation and review; and
 - 2.1.3. a written recommendation to take action. Recommended action may include, but is not limited to, the following:

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- 2.1.3.1 No corrective action should be taken, based upon findings that there is not credible evidence for the allegation. Findings should be clearly documented in the licensed practitioner's credentials file.
- 2.1.3.2 Deferring action for a reasonable time.
- 2.1.3.3 Issuing letters of admonition, censure, reprimand, or warning. If any such letter is issued, the licensed practitioner may make a written response which shall be placed in the licensed practitioner's credentials files.
- 2.1.3.4 Imposition of terms of probation or special limitation upon continued participation with Embright, including, but not limited to requirements for co-admissions, mandatory consultation, or monitoring.
- 2.1.3.5 Restriction or limitation of any prerogatives directly related to the licensed practitioner's delivery of care to Embright members.
- 2.1.3.6 Restriction, suspension or termination of licensed practitioner's ability to provide health care services to Embright members. If suspension is recommended, the terms and duration of the suspension and the conditions that must be met before suspension is ended shall be stated.
- 2.1.3.7 Taking other corrective actions deemed necessary and appropriate under the circumstances in accordance with the Embright Corrective Action Plan Policy and Procedure.

2.2 In making a recommendation regarding any licensed practitioner, the Chief Medical Officer may consider any and all relevant factors, including, but not limited to the following:

- 2.2.1 non-compliance with legal requirements applicable to the practice of licensed practitioner's profession;
- 2.2.2 failure to render patient care within the generally recognized professional level of quality and efficiency as established by Embright;
- 2.2.3 identified problems with the licensed practitioner's rendering of professional services to Embright members;
- 2.2.4 physical or mental impairment which affects or could adversely affect the licensed practitioner's ability to practice his or her profession with reasonable skill and safety;
- 2.2.5 evaluation by an objective peer identifying concerns regarding professional competency and qualifications; and
- 2.2.6 violation of ethical principles or licensed practitioner's profession.

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3. **Peer Review Credentialing Committee**

- 3.1. **Review by Peer Review Credentialing Committee:** At the next regularly scheduled meeting after receipt of the Chief Medical Officer's findings and recommendation, the Credentialing Committee shall review the recommendation and all supporting or accompanying information and documentation.

If the Credentialing Committee concludes that further investigation is warranted, it shall direct further investigation to be undertaken. The Credentialing Committee may conduct the investigation itself or may assign the task to an appropriate individual or committee or Embright. If the further investigation is delegated to an individual or committee other than the Credentialing Committee, such individual or committee shall proceed with the investigation in a prompt manner and shall forward a written report of the investigation to the Credentialing Committee as soon as practicable. The report may include recommendations for appropriate corrective action. If the Credentialing Committee concludes action is indicated but no further investigation is necessary, it may proceed to take action.

- 3.2. **Informal Appearance of Licensed practitioner:** Prior to recommending or proposing to take any Adverse Action, the Credentialing Committee may invite the licensed practitioner to appear before the Committee to discuss the proposed adverse recommendation or Adverse Action. The licensed practitioners may present to the Committee whatever relevant written information he or she has concerning the Committee's recommendation or proposed action. The licensed practitioner may be accompanied to the Committee meeting by another licensed practitioner who participates in Embright, to assist him or her in presenting any relevant information. Such licensed practitioner may not be any attorney at law. The appearance before the Credentialing Committee shall be informal and shall not constitute a hearing, and none of the procedural rules provided in Embright's Fair Hearing Procedure shall apply. The Credentialing Committee shall make a record of all such appearances before it.

- 3.3. **Recommendation of the Peer Review Credentialing Committee:** As soon as practicable after conclusion of the Credentialing Committee's investigation and review, the Committee shall make a written recommendation to Embright's Clinical Integration Committee or make any other corrective action the Credentialing Committee deems necessary.

- 3.3.1. **Favorable Recommendation:** If the Credentialing Committee's recommendation is that no corrective action is required, no action will be taken. If a letter of warning, admonition, reprimand or censure should be issued, the Credentialing Committee shall notify the licensed practitioner, in writing. If any such letter is issued, the licensed practitioner may make a written response which shall be placed in the licensed practitioner's credentials files.

- 3.3.2. **Adverse Recommendation:** If the Credentialing Committee's recommendation is one that constitutes ground for a hearing under Section 1, Grounds for Hearing, of Embright's Fair Hearing Procedure, i.e. the Committee recommends that the licensed practitioner's ability to provide health care services to Embright members to be restricted, suspended or terminated for reasons relating to deficiencies in the quality of care rendered by the licensed practitioner and/or the licensed practitioner's professional competence or conduct, then the procedures set from the Embright's Fair Hearing Procedure shall apply. Pursuant to such procedures, the Credentialing Committee shall give the licensed practitioner notice of the recommendation and of the licensed

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practitioner's right to request a hearing. The Clinical Integration Committee shall be informed of the Credentialing Committee's adverse recommendation to terminate a licensed practitioner, but shall take no action until either the affected licensed practitioner has waived his or her right to a hearing or the hearing has been completed. If a fair hearing is waived, such Adverse Action will be reported to the National Licensed practitioner Data Bank (NPDB).

3.3.3. **Rights to Reapply:** Licensed practitioners who have been terminated by Embright may reapply under Embright's current criteria, no sooner than 12 months from the date of termination. Embright reserves the right to review the applicant against all current initial credentialing or recredentialing criteria.

3.4. **Initiation by the Managing Directors:** If the Credentialing Committee fails to act upon a recommendation of the Chief Medical Officer, the Clinical Integration Committee may direct the Credentialing Committee to take action. If the Credentialing Committee fails to act in response to the direction of the Clinical Integration Committee, the Clinical Integration Committee may act in place of the Credentialing Committee, but must comply with this Policy and Procedure and Embright's Fair Hearing Procedure.

4. **Summary Action**

4.1. **Criteria for Initiation**

- 4.1.1. Whenever a licensed practitioner's conduct is such that a failure to take action may result in imminent danger to the health or safety of any Embright member, the Chief Medical Officer or his/her designee may summarily restrict or suspend the licensed practitioner's ability to provide health care services to Embright members.
- 4.1.2. Unless otherwise stated, such summary restriction or suspension ("summary action") shall become effective immediately upon imposition and the Chief Medical Officer or his/her designee shall promptly give notice to the affected licensed practitioner and the Credentialing Committee. The notice shall generally describe the reasons for the summary action.
- 4.1.3. The summary action may be limited in duration and shall remain in effect for the period stated or, if none, until resolved as set forth herein. Unless otherwise indicated by the terms of the summary action, the licensed practitioner's patients who are Embright members shall be promptly assigned to another Embright licensed practitioner by the Chief Medical Officer or his/her designee, considering, where feasible, the wishes of the patient and the affected licensed practitioner in the choice of a substitute Embright licensed practitioner.
- 4.1.4. The notice of summary action given to the Credentialing Committee shall constitute a request to initiate corrective action and the procedures set forth in Section 1 through 4 above shall be followed.

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4.2. **Peer Review Credentialing Committee Action:** The affected licensed practitioner may request an interview with the Credentialing Committee. The interview shall be convened as soon as reasonably possible under all circumstances and shall be informal and not constitute a hearing, as that term is used in Embright's Fair Hearing Procedure. The Committee may thereafter continue, modify, or terminate the terms of the summary action. It shall give the licensed practitioner notice of its decision, which shall include the information specified in Embright's Fair Hearing Procedure, Section 2, Notice of Adverse Action.

4.3. **Procedural Rights:** Unless the Chief Medical Officer or Credentialing Committee terminates the summary action, it shall remain in effect until completion of the corrective action and hearing process. When a summary action is continued, the affected licensed practitioner shall be entitled to the procedural rights afforded by Embright's Fair Hearing Procedure.

5. **Automatic Suspension or Limitation:** In the following instances, the licensed practitioner's ability to provide health services to Embright members shall be automatically suspended or limited as described:

5.1. **Licensure**

5.1.1. **Revocation, Suspension or Expiration:** Whenever a licensed practitioner's professional license or other legal credential authorizing practice is revoked, suspended or expired without application pending for renewal, the licensed practitioner's ability to provide health care services to Embright members shall be automatically terminated as the date such action becomes effective.

5.1.2. **Restriction:** Whenever a licensed practitioner's professional license or other legal credential authorizing practice is limited or restricted by the applicable licensing or certifying authority, the licensed practitioner's ability to provide health care services to Embright members shall automatically be so limited or restricted.

5.1.3. **Probation:** Whenever a licensed practitioner is placed on probation by the applicable licensing or certifying authority, the licensed practitioner's ability to provide health care services to Embright members shall automatically become subject to the same terms and conditions as probation.

5.2. **DEA Certificate**

5.2.1. **Revocation Suspension and Expiration:** Whenever a licensed practitioner's DEA certificate is revoked, limited, suspended, or expired, the licensed practitioner shall automatically be subject to the same terms of revocation, suspension limiting, or expiration divested of the right to prescribe medications covered by the certificate for Embright members.

5.2.2. **Probation:** Whenever a licensed practitioner's DEA certificate is subject to probation, the licensed practitioner's right to prescribe such medications Embright members shall automatically become subject to the same terms of the probation.

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- 5.3. **Cancellation of Professional Liability Insurance:** Failure to maintain professional liability insurance in the minimum amounts required by Embright shall be grounds for automatic suspension of the licensed practitioner's ability to provide health care services to Embright members. The suspension shall be effective until appropriate coverage is reinstated, including coverage of any acts or potential liabilities that may have occurred or arisen during the period of any lapse in coverage.
- 5.4. **Restriction/Suspension/Revocation of Hospital Privileges:** Whenever a licensed practitioner's hospital privileges are restricted, suspended, or revoked the licensed practitioner shall automatically become restricted in the same areas of treatment for Embright members.
- 5.5. **Sanctions:** Should a licensed practitioner's name appear on the Medicare/Medicaid Sanction List, he/she will automatically be suspended for the Embright members. Licensed practitioners who opt out of Medicare will be terminated as required by the Centers for Medicare and Medicaid Services formerly Health Care Financing Authority (HCFA).
- 5.6. **Medical Board of Washington – Adverse Decisions:** The processing of a negative board order report on a licensed practitioner rendering medical services to Embright members will be conducted as follows:
 - 5.6.1 Upon receipt of the Medical Board of Washington a negative board report, or upon receipt of notification of a negative Board Report, the Credentialing Department will completely review the report.
 - 5.6.2 Any individual "board report" which indicates any of the following, will immediately be referred to the Chief Medical Officer for review, recommendations and action prior to the Credentialing Committee meeting:
 - 5.6.2.1. Licensed practitioner's application for staff privileges or membership is denied or rejected for medical disciplinary cause or reason;
 - 5.6.2.2. Licensed practitioner's membership, staff privileges for employment is terminated or revoked for medical disciplinary cause or reason;
 - 5.6.2.3. Restrictions are imposed for voluntarily accepted on staff privileges, membership or employment for cumulative total of thirty (30) days or more any twelve (12) month period, for a medical disciplinary cause or reason;
 - 5.6.2.4. Licensed practitioner surrenders privileges or affiliation while faced with an investigation into possible incompetence or improper professional conduct.
 - 5.6.3. All disciplinary reports will be reviewed by the Credentialing Committee through a summary report;



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5.6.4. The Chief Medical Officer will follow up on the recommendations/actions of the Credentialing Committee.

5.7. **Failure to Complete Corrective Action:** Licensed practitioner who fail to complete any corrective action imposed by any licensing board/agency, state or federal agency or professional review body will immediately be referred to the Chief Medical Officer for review, recommendations and action prior to the Credentialing Committee meeting.

6. **Reporting Serious Quality Deficiencies:** Per Embright's policy, Embright reports to the NPDB and the state licensing examining board in the event of an Adverse Action taken as a result of a quality investigation by Embright which any of the following is identified:

6.1. Deficiency in quality of care and service

6.2. Deficiency in professional competence

6.3. Deficiency in professional conduct

6.4. Patient health, safety or welfare which affects or could adversely affect any member and/or is reasonably likely to be detrimental to the delivery of quality patient care.

7. **Reinstatement of Licensed practitioners Rights to See Members:** At the discretion of Embright, a licensed practitioner may be reinstated with full privileges upon evidence of correction of deficiency as outlined above.