

Module 8

Appealing Credentialing Decisions

Appealing credentialing decisions

“Appeal” means a request by a Licensed Independent Practitioner, to reconsider a Professional Competence or conduct decision that affects a Licensed Independent Practitioner, participation in the Health care facility.

- Providers have the right to appeal credentialing determinations with which they disagree.
- The process for appealing credentialing result is outlined in the credentialing notification letter.

Appealing credentialing decisions

- An appeal is a formal request by a practitioner to request reconsideration of any adverse action.
- A hearing is a formal proceeding at which evidence and argument are presented on the matter to a person or body having decision-making authority.
- The purpose of a hearing is to provide the opportunity for each side of a dispute, and particularly the person deprived of this or her membership or privileges, to present its position.

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To comply with this policy, applicant responsibility is to: Follow the instructions outlined in the ineligibility letter to appeal an ineligibility determination.

Credentialing office responsible to:

1. Notify the candidate in a timely manner of the determination that if He/ She do not meet credentialing criteria.
2. Consider any appeals submitted in accordance with the instructions outlined in the ineligibility notification letter.

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Practitioner appeal rights:

- 1) Health care organization uses objective evidence and patient-care considerations when deciding the course of action for practitioners who do not meet quality standards.
- 2) Health care organization must notify authorities as appropriate of practitioners' terminations or suspension.
- 3) Health care organization Notification to Authorities of Practitioner Disciplinary Actions describes the process for handling quality of care issues and related decisions.