

**Title:**

Five Customer Service Points for a Credentialing Service

**Word Count:**

640

**Summary:**

A credentialing verification organization with good customer service responds quickly to questions; has trained staff that is assigned to a particular client; can streamline the credentialing process; has good technology resources; and offers extra support, such as internal audits and tracking license renewals.

**Keywords:**

physician credentialing, doctors credentials, credentialing process

**Article Body:**

Quality credentialing verification organizations (CVO's) create an environment beyond simply generating credentialing reports for medical providers. A CVO with good customer service responds quickly to questions; has trained staff that is assigned to a particular client; can streamline the credentialing process; has good technology resources; and offers extra support, such as internal audits and tracking license renewals. An emphasis on customer service means that the CVO can supply substantive information and support to establish a true working relationship with a medical organization.

There are five areas of a CVO's customer service to consider: flexible credentialing processes which can be adapted in response to client needs; a range of quality services; quick responses to clients; individual support; and solid technology practices. Although some service points, such as a fast response to questions, can seem small, these areas display the quality of the CVO, which will define the long-term relationship between the CVO and its clients.

**<b>Adapting credentialing services to client needs.</b>**

CVOs should be responsive to their clients' needs. The CVO should be accredited by either accrediting organization: National Committee for Quality Assurance (NCQA) or the Utilization Review Accreditation Council (URAC) or comply with their credentialing standards. In addition, the CVO should add new credentialing standards for their clients and should also be able to adapt their credentialing processes by adding special criteria or using a subset of criteria. This flexibility includes making recommendations to streamline processes and working

with clients to determine what they need rather than following a preset checklist.

**<b>Individualized support and quality controls.</b>**

Individualized service means that there is a dedicated representative for each client. There should be a known manager to handle difficult situations and an established route to lodge complaints. All personnel should be trained to perform credentialing reports according to the accrediting organization's standards.

There should also be an established quality control system and regular internal audits for managing feedback, rewarding good service, and evaluating bad practice. The CVO should be able to supply a copy of their quality control policies and practices documentation. If they are accredited by NCQA or URAC, then there is a guarantee that these practices have been reviewed and audited and that their service meets industry standards.

**<b>High quality services.</b>**

Two attributes of quality work are timeliness and thoroughness. Good CVOs will return credentialing reports as quick as industry norms, meaning around 60 days for hospital standards (JCAHO) and 30 days for managed care standards (NCQA and URAC). The credentialing reports will also be complete - no missing data or criteria and with full supporting documentation. CVOs should have an established maximum number of requests they make to organizations for information and other avenues of finding information. Problem files should be brought immediately to the review committee's attention. All of these practices work together to make a thorough credentialing report.

Additionally, good CVOs offer services such as tracking licensing dates and requirements (expirables) and disciplinary actions by various organizations (surveillance); consulting and training classes about credentialing processes; and support during internal audits.

**<b>Quick response to client contact.</b>**

Good CVOs respond to questions within 24 hours. They should answer any questions fully and as quickly and directly as possible rather than postponing or transferring them.

**<b>Technology resources.</b>**

CVOs should be using the most recent technology, such as databases, paperless credentialing, and web access with adequate security and access control.

Customer service is key to creating a good relationship between CVOs and medical

organizations. Quality control policies, flexible credentialing processes and criteria, quick response time, good technology use, and responsiveness to questions and requests are five major areas where a CVO develops good customer relations. All these areas mean the CVO is responsive – that the CVO is paying attention to individual customer needs and consistently doing its best to meet them.