



BCBSIL

Health Care Professional Credentials Data Collection Act

Overview

The Health Care Professional Credentials Data Collection Act

The Health Care Professional Credentials Data Collection Act requires hospitals, health care entities and health care plans to use state mandated forms for credentialing, recredentialing and to update physician records. The law is applicable to physicians licensed under the Medical Practice Act in the State of Illinois (M.D.s, D.O.s, Chiropractors). In addition, the Act requires plans to abide by a single cycle for recredentialing physicians.

- **Start Date**

A) The Act requires use of the uniform credentials forms to be used beginning January 1, 2002.

- **Credentialing Forms**

A) Forms are available on the IDPH web site www.idph.state.il.us, under "What's New" or in the "A-Z" topics under C for Credentialing.

- **Time Frames to Credential or Recredential**

A) Health care entities and health care plans shall complete the process of credentialing / recredentialing within 60 days after the submission of all credentials data and completion of the verification of the data.



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Submission of Forms

This is a checklist of the forms that need to be submitted to BCBSIL for credentialing.

- ❑ BCBSIL Credentialing Submission document identifying network and contract information.
- ❑ The State of Illinois Health Care Professional Credentialing and Business Data Gathering Form.
- ❑ BCBSIL Attestation signed and dated within 60 days of submission.
- ❑ BCBSIL Hospital Verification form completed by the Hospital. *
- ❑ Current State Medical License.
- ❑ Current Federal DEA.
- ❑ Current Controlled Substance License.
- ❑ HMO practitioners must submit a Medical Group Service Agreement.

* Forward to the practitioner's primary admitting hospital the "BCBSIL request of Hospital Privileges" to be completed by the hospital staff.

• State of Illinois Single Credentialing Cycle

A) All health care entities and health care plans shall obtain recredentialing data on a health care professional according to the single credentialing cycle beginning July 1, 2002, except:

- (a) when a health care professional submits initial credentials data to a health care entity or health care plan;
- (b) when a health care professional's credentials data change substantively, or
- (c) When a health care entity or health care plan requires recredentialing as a result of patient or quality assurance issues.

B) Data collection for health care entities and health care plans will coincide with a single credentialing cycle that entitles health care entities and

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health care plans to collect recredentialing data once and not more than every 3 years except as noted in section A above.



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Single Cycle continued

- C) will be based on the variable of the last digit of each health care professional's Social Security number;
- D) provides for a one month notification period for each digit during which each health care entity and health care plan notifies those persons being recredentialed and of the time period during which data are expected to be submitted; and

provides for a two-month collection period for each digit during which each health care entity and health care plan receives data from those persons being recredentialed.

The single credentialing cycle reflects a six-month "OPEN" period when health care entities and health care plans can not collect data from a health care professional, except as noted in section A on page 2. This period coincides with the Illinois Department of Public Regulation's licensing schedule of physicians.

The single credentialing cycle is as follows:

2002/2005/2008 ...	
July	OPEN
August	OPEN
September	OPEN
October	OPEN
November	OPEN
December	OPEN



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D) The single credentialing cycle continued:

2003/2006/2009 ...

January	Notification (0's)
February	Collection of data
March	Collection of data
April	Notification (1's)
May	Collection of data
June	Collection of data
July	Notification (2's)
August	Collection of data
September	Collection of data
October	Notification (3's)
November	Collection of data
December	Collection of data

2004/2007/2010 ...

January	Notification (4's)
February	Collection of data
March	Collection of data
April	Notification (5's)
May	Collection of data
June	Collection of data
July	Notification (6's)
August	Collection of data
September	Collection of data
October	Notification (7's)
November	Collection of data
December	Collection of data

2005/2008/2011

January	Notification (8's)
February	Collection of data
March	Collection of data
April	Notification (9's)
May	Collection of data
June	Collection of data

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- E) Once recredentialing is begun in accordance with the single credentialing cycle, a health care entity or health care plan may continue to request data from a health care professional outside of the published single credentialing cycle if it is not submitted by the deadline date published in the schedule.
 - C) All health care entities and health care plans shall monitor, on an ongoing basis, in between recredentialing cycles, information on sanctions, limitations on licensure, and complaints against health care professionals, consistent with guidelines issued by the National Committee for Quality Assurance.
- **Waiver**
 - A) A health care entity or health care plan may apply to the Director via letter for an exemption from the single credentialing cycle.
 - B) The Director shall evaluate the exemption based upon whether the plan is a small or unique health care entity whereby compliance with the single credentialing cycle presents an undue hardship.

- **Attestation and Release Forms**

The Health Care Professional Credentialing Data Collection Form contains an affirmation of information clause whereby applicant acknowledges that any willful falsification or omission of information may be grounds for rejection or termination, in addition to any penalties provided by law.

The regulations permit the use of additional attestation and release forms for each entity to which to provider is applying.



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- **Provider Updates**

Health Care Professionals must use uniform updating forms when making corrections, updates and modifications to his or her credentials data. Physician must provide updated information within five (5) business days as it relates to the following:

- A) License revocation
- B) Federal Drug Enforcement Agency license revocation
- C) Medicare or Medicaid sanctions
- D) Revocation of hospital privileges
- E) Any lapse in professional liability coverage required by a health care entity, health care plan, or hospital
- F) Conviction of a felony

Any other changes in the information provided in the forms must be sent within forty-five (45) days from the date the health care professional "knew of the change"

Please feel free to contact our staff with any questions.



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Definitions

- **Credentials Data** - those data, information, or answers to questions required by a health care entity, health care plan or hospital to complete the credentialing or recredentialing of a health care professional.
- **Credentialing** - Means the process of assessing and validating the qualifications of a health care professional.
- **Health care entity** - Means any of the following entities that require the submission of credentials data in order for a health care professional to participate or provide care as a part of, or in conjunction with, the health care entity:
 1. A health care facility or other health care organization licensed or certified to provide medical or health services in Illinois, other than a hospital;
 2. A health care professional partnership, corporation, limited liability company, professional service corporation or group practice; or
 3. An independent practice association or physician hospital organization.
- **Health care plan** - any entity licensed by the Department of Insurance as a prepaid health care plan or health maintenance organization or as an insurer, which requires the submission of, credentials data.
- **Health care professional** - any person licensed under the Medical Practice Act in the state of Illinois. (MD, DO, Chiropractor)
- **Recredentialing** - the process by which a health care entity or health care plan ensures that a health care professional who is currently credentialed continues to meet the credentialing criteria used by the health care entity, health care plan no more than once every 2 years.

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- **Single cycle** - a process whereby for purposes of recredentialing each health care professional's credentials data are collected by all health care entities and health care plans during the same time period.