

**San Bernardino County  
Department of Behavioral Health**

**Credentialing Policy**

**Effective Date** 07/01/1994  
**Revision Date** 04/10/2019

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**Policy**

It is the policy of the Department of Behavioral Health (DBH) that all County-employed providers, contract agency providers and individually contracted providers (including Fee for Service (FFS) providers) who are licensed, registered, waived, and/or certified, that are rendering services under the Mental Health Plan (MHP) and Drug Medi-Cal Organized-Delivery System (DMS-ODS), complete the required screening and enrollment process upon hire and every three (3) years thereafter. The internal-uniform credentialing/re-credentialing process is managed through coordination between DBH Medical Services, Quality Management (QM) and the Office of Compliance (Compliance), to ensure all providers who are licensed, registered, waived, and/or certified are screened and cleared to render services. DBH contract partners must ensure licensed, registered, waived, and/or certified service providers rendering services at their agencies are also screened and cleared to render services as specified herein. DBH and DBH contract partners will ensure all service providers are appropriately licensed, registered, waived, and/or certified; qualified according to legal, professional and technical standards; and absent of any exclusion from participation of any federally-funded health care program(s). DBH contract providers are required to conduct all applicable credentialing and re-credentialing requirements, as referenced herein, and as outlined in their individual contract agreement terms.

**Purpose**

To outline the uniform credentialing/re-credentialing process performed by DBH, and required of DBH contractors, in accordance with 42 Code of Federal Regulations (CFR) Part 438.24 and Department of Health Care Services (DHCS) Information Notice (IN) 18-019. DBH conducts the credentialing/re-credentialing process, and requires contract partners to do so as well, to assure provider qualifications and clearance, and implement quality improvement requirements specified in State agreements. This policy outlines DBH's methodology to ensure providers meet legal, professional and technical standards, and are clear to render direct services.

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# San Bernardino County Department of Behavioral Health

## Credentialing Policy, Continued

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**Definition(s)**      **Credentialing:** The process of establishing the qualifications of licensed professionals, organizational members or organizations, and assessing their background and legitimacy. The process is generally an objective evaluation of a provider's current licensure, training or experience, competence, and ability to provide particular services or perform particular procedures.

**Staff Master:** A Department-operated registry that collects and maintains all pertinent billing information related to service providers and their credentials.

**Service Provider requiring credentialing:** Individual that provides mental health treatment or substance use disorder treatment and recovery services who is licensed, registered, waived, and/or certified. DBH service providers requiring credentialing include County-employed providers, contract agency providers, individually contracted providers, and FFS providers.

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**Credentialing  
Application  
Packet**

All potential and actual DBH-employed or individually contracted service providers (including FFS) who are licensed, registered, waived, and/or certified, must complete and submit the credentialing application packet in its entirety to QM Access Unit, and include the required support documentation as specified below.

- Provider Demographic Information (thoroughly completed)
- Curriculum Vitae (inclusive of education and current/past work history)
- Original copy of license and/or board certification, or partially-completed waiver application (for consideration, if applicable)\*
- Original copy of doctoral certificate, diploma or transcripts indicating completion of education, as required per the provider type\*
- Original copy of medical residency certificate and/or special training completed, as required per the provider type\*
- Original copy of transcripts indicating continuing education completion, as required per the provider type\*
- Confirmation hospital and/or clinic privileges are in good standing
- History of any suspension or curtailment of hospital and/or clinic privileges
- Current copy of Drug Enforcement Administration certificate (with number)
- Current National Provider Identifier number
- Copy of current malpractice insurance in an adequate amount, as required for the particular provider type
- History of liability claims against provider
- Conflict of Interest Disclosure Statement
- Credentialing application fee (FFS only)
- Service site certification form and fee (FFS only)
- Provider service agreement (FFS only)
- Provider training (FFS only)

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# San Bernardino County Department of Behavioral Health

## Credentialing Policy, Continued

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### Credentialing Application Packet, continued

DBH contract providers are required to conduct all applicable credentialing and re-credentialing requirements, as referenced herein, and as outlined in their individual contract agreement terms. DBH will monitor the credentialing of its contract providers and take appropriate action as outlined in its contract agreement terms, including, but not limited to, the following: corrective action, suspension, sanctions, etc.

**Note:** Original copy documentation referenced above may be verified through the applicable licensing board as the original source of verification. Validity of original source verification by credentialing staff.

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### Provider Credentialing and Re-credentialing Attestation

All DBH potential or current service providers who are licensed, registered, waived, and/or certified must sign the Provider Credentialing and Re-Credentialing Attestation ([Attachment A](#)) at the time of credentialing application submission and every instance upon re-credentialing.

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### Re-credentialing Requirement

All DBH service providers who are licensed, registered, waived, and/or certified must be re-credentialed every three (3) years, including required submission of updated information for review and consideration, as well as completion of a new Attestation form. Additionally, the re-credentialing process will include verification and confirmation of all records referenced in the initial credentialing requirements and any changes that may apply.

A review of quality improvement activities/violations, beneficiary grievances, medical reviews and audits will be conducted upon re-credentialing as well, in coordination by QM, Medical Services and Compliance (which encompass the designated credentialing staff).

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### Additional Verification Sources

In addition to DBH's centralized credentialing/re-credentialing process, verification through the following sources is also utilized:

- Medical Board of California ([MBC](#))
  - California Department of Consumer Affairs (DCA) ([BreEZe](#))
  - National Practitioner Data Bank ([NPDB](#)) query
  - National Plan and Provider Enumeration System ([NPPES](#))
  - California Consortium of Addiction Program and Professionals ([CCAPP](#))
  - California Association of DUI Treatment Programs ([CADTP](#))
  - Other agencies as necessary
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# San Bernardino County Department of Behavioral Health

## Credentialing Policy, Continued

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### Related Policies and Procedures

#### DBH Standard Practice Manual:

- Credentialing Procedure ([QM6008-1](#))
  - Compliance Verification, Monitoring and Auditing Policy ([COM0917](#))
  - Fee For Service Credentialing Procedure ([QM6026](#))
  - HIPAA National Provider Identifier (NPI) Policy ([COM0938](#)) and Procedure ([COM0938-01](#))
  - Ineligible Persons Policy ([COM0933](#)) and Procedure ([COM0933-1](#))
  - Medical Services Credentialing Procedure ([MDS2021](#))
  - Quality of Care Referral Policy ([QM6022](#)) and Procedure ([QM6022-1](#))
  - New Hire Policy ([HR4004](#))
  - Registration & Licensure Requirements for Clinical Therapists ([HR4012](#))
  - Waiver for Pre-Licensed/Out of State Licensed Psychologist ([HR4011](#))
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### Reference(s)

- CA Business and Professions Code, Sections 800-809.9 and 2909
  - CA Code of Regulations, Title 9, Section 1810.435
  - CA Code of Regulations, Title 22, Section 51341.1
  - CA Welfare and Institutions Code, Section 4070
  - California Department of Health Care Services (DHCS), MHSUDS Information Notice 16-058, DHCS Oversight of Certifying Organizations
  - California Department of Health Care Services (DHCS), MHSUDS Information Notice 18-019, DHCA Provider Credentialing and Re-Credentialing for Mental Health Plans (MHPs) and Drug Medi-Cal Organized Delivery System (DMC-ODS) Pilot Counties
  - Code of Federal Regulations, Title 42, Section 438.24
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## Provider Credentialing and Re-credentialing Attestation

I, \_\_\_\_\_, understand and acknowledge my responsibility to disclose and attest to the San Bernardino County- Department of Behavioral Health (MHP and DMC-ODS Plan) any information that applies to the below referenced criteria. (Please complete each section below with a brief explanation. Answer "N/A" if it is not applicable.)

1. Any limitations or inabilities that affect the provider's ability to perform any of the position's essential functions, with or without accommodation.
2. A history of loss of license or felony conviction.
3. A history of loss or limitation of privileges or disciplinary activity.
4. A lack of present illegal drug use.
5. The application's accuracy and completeness.

If not specified above, none of the applicable history and/or limitations exist. I hereby attest that all statements on this disclosure form are true and complete to the best of my knowledge. Should the DBH Credentialing Team discover material proving otherwise, my approved credentials may be subject to reconsideration and/or denial. Additionally, I understand that any false statement or relevant omissions may constitute grounds for reduced, suspended and/or terminated ability to render services under the DBH system of care.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Refusal to sign does not exempt compliance with DBH Credentialing Policy nor the applicable regulations.