



General Credentialing Criteria

With exceptions as noted the criteria below apply to all practitioner types and represent the minimum criteria required to meet MVP credentialing requirements.

1. A completed CAQH online application, which contains a signed and current attestation statement and release is required for initial credentialing and at recredentialing. A signature stamp is not acceptable.

The CAQH credentialing and recredentialing application contains a current and signed attestation regarding:

- Reasons for any inability to perform the essential functions of the position, with or without accommodation;
- Lack of present illegal drug use;
- History of loss of license and felony convictions;
- History of loss or limitation of privileges or disciplinary activity;
- Current malpractice insurance coverage; and
- The correctness and completeness of the application.

Applicants must be able to perform the essential functions of the position, with reasonable accommodation, and be free of present illegal drug use. Applicants with a history of license limitations, sanctions, felony convictions, loss or limitations of privileges or disciplinary actions, will be requested to submit, in writing, specific information prior to review by the Credentials Committee.

2. Applicant is obliged to provide MVP with information sufficiently detailed to render an opinion regarding any adverse action taken by a State or Federal agency, another Institution such as the New York State Education Department (NYSED), New York State Office of Professional Medical Conduct (OPMC), US Office of Personnel Management (OPM), or any other applicable regulatory or professional body or any other items on the application as requested by MVP.
3. MVP will obtain a minimum of six years work history from each applicant and review gaps of six months or more with the practitioner. Gaps of six months to one year may be explained via telephone and documented on the CV or application. Applicants must fully document in writing any gaps longer than one year in their work history.
4. Credentialing staff will conduct verifications 180 days prior to the Committee's decision including but not limited to:
 - a. License Status and registration;

- b. License Sanction Activity;
- c. Sanction Activity;
- d. Board certification status;
- e. DEA certificate for each state where the practitioner is treating MVP members, if applicable;
- f. Participation in Medicare;
- g. Education and completion of residency and/or specialty training;
- h. Proof of malpractice insurance coverage in the minimum coverage amounts of \$1 million per incident and \$3 million per aggregate;
- i. Information relating to malpractice settlements or actions;
- j. Unrestricted, active clinical privileges at an MVP participating hospital, if applicable; and
- k. Federal National Practitioner Identification number (NPI number).