Abbreviations used in this document:

CVO – Credential Verification Organization
BFFSP- Bureau of Fee-For-Service Programs
BPI- Bureau of Program Integrity
CDS – Controlled Dangerous Substance
DEA – Drug Enforcement Administration
DPW – Department of Public Welfare
FFS- Fee-For-Service
HIPDB – Health Integrity and Protection Data Bank
MA – Medical Assistance
NPDB – National Physician’s Data Bank
OMAP – Office of Medical Assistance Programs
PRC – Peer Review Committee

Article I - OVERVIEW

The PRC is a confidential standing committee that serves in an advisory capacity to the BFFSP. It is responsible for making recommendations regarding the initial credentialing, recredentialing, and quality of care reviews. The PRC ensures that final credentialing recommendations and quality of care recommendations meet the nationally recognized credentialing standards and quality of care standards.

Article II - PURPOSE

The purposes of the PRC are to: (1) assure that practitioners enrolled as MA providers in the FFS and ACCESS Plus delivery systems have the necessary credentials based on solid professional and documentary evidence and that they are qualified to provide both safe and clinically sound services; (2) provide clinical perspective in the area of credentialing related to the qualifications of MA providers; and (3) provide enhanced professional evaluation of quality of care rendered based on generally accepted community standards of care.
Article III – MEMBERSHIP

Section I – Appointment:
The PRC will consist of eight permanent members, including the Chair. An Ad
Hoc professional specialist member may be appointed at the discretion of the
Chair. The Chair votes only to break ties. A nonvoting Executive Liaison Officer
will complete committee membership. The voting members will be selected from
the following specialties:
1. Family Practice
2. Internal Medicine
3. Pediatrics
4. Obstetrics/Gynecology
5. Psychiatry and/or Neurology
6. Cardiology
7. Chief Medical Officer of OMAP (Chair)

All voting members appointed by the Chair shall be licensed in Pennsylvania in
their respective fields, actively practicing, and participating in the Pennsylvania
MA Program. The members will be appointed by the Chair and will be chosen by
specialty, board certification, experience treating MA recipients, number of years
in practice and, at the discretion of the Chair, state residency.

Section II – Term:
Each PRC member will be appointed for a two-year term with the option of
reappointment by the Chair for an unlimited number of two-year terms.

New members may be appointed when an existing member’s term expires, or
when there is a vacancy on the PRC.

Section III – Officers:
The Executive Liaison Officer shall be an executive level employee for OMAP.
The role of the Executive Liaison Officer will be to provide administrative
support at a confidential level to the Chair.

The Chair will be the Chief Medical Officer. The Chief Medical Officer will
appoint a Medical Director in the BFFSP to serve as acting Chair of the
committee in his absence. The role of the Chair will be to set the agenda, to set
and monitor discussion time-frames of agenda items, to moderate workflow
during the meeting, and to serve as a tie-breaker. The Chair will also be
responsible to call additional meetings of the PRC, if necessary, and to set them
with assistance from the Executive Liaison Officer.

Section IV - Termination and Resignation:
Termination of a member from the PRC may be considered as the result of two
consecutive unexcused or three consecutive excused absences from meetings, not
disclosing a conflict of interest, or professional misconduct. The termination of a
PRC member may also be considered based upon recommendation to the Chair by two or more voting members. The Chair will make the final determination regarding all termination decisions.

A PRC member may resign by submitting written notice to the Chair.

Article IV – PROCESS

Section I - Reviews of Initial Credentialing and Periodic Recredentialing:
A. The CVO will compile the following information concerning providers who seek to enroll in the MA Program. For those providers already enrolled in the MA program and who provide services to recipients in the FFS and ACCESS Plus delivery systems, the CVO will compile updated information once every three years, and as set forth in Section II. The information compiled by the CVO will consist of:
- Whether the provider has a license to practice,
- Verification of the provider’s professional education,
- If the provider is a physician, information on the provider’s residency and Board Certification,
- Information on the provider’s malpractice insurance coverage,
- Information on the provider’s malpractice claims history,
- Information on DEA or CDS registration,
- Whether the provider has been sanctioned by his/her licensing Board,
- Whether the provider has been sanctioned or precluded by Medicare or by any state Medicaid agency,
- Information from the NPDB query, HIPDB or other similar reporting agency,
- Information on the provider’s work history.
B. The CVO will forward the information to the BFFSSP, which will provide it to the Chair of the PRC or designee. The Chair of the PRC or designee will review the material to determine if any of the information warrants follow-up and review by the PRC. If not, the file will be sent back to the BFFSP for further processing. The Chair may request that BFFSP gather additional information to be added to the file before determining if any of the information warrants follow-up and review by the PRC. If the Chair or designee determines that there is information in the file that warrants follow-up and review, the file will be referred to the PRC. Examples of the type of information that may warrant follow-up and review are:
- An action taken by the provider’s Board of Licensure,
- Any change in or limitation of a provider’s ability to receive payment from any payor for certain types of services,
- Any malpractice history which may be considered an unusual pattern for the specialty such as three new cases in the past 12 months,
- Mental health or substance abuse concerns, sexual misconduct concerns,
- Any misdemeanor or felony criminal charges,
Any other activity reported to the NPDB, Healthcare Integrity and Protection Data Bank or similar reporting organizations.

C. Matters referred by the Chair to the PRC will be reviewed at the next scheduled PRC meeting.

D. If the PRC requests additional information after the initial PRC review, BFFSP will gather the requested information and present it to the Chair.

E. Additional information received by the Chair will be reviewed by the PRC at the next scheduled PRC meeting.

F. The PRC will make recommendations to BFFSP, which may include but are not limited to:
   - Approving the provider’s credentials,
   - Instituting quality improvement activities,
   - Ongoing monitoring of such quality improvement activities,
   - Reviewing of a provider’s credentials and/or quality of care more frequently than three years,
   - Limiting the types of services or procedures for which a provider will receive payment from the MA program, or
   - Preventing a provider from enrolling or to remain enrolled in the MA Program.

G. The Chair, at his or her discretion, may appoint to the PRC an Ad Hoc voting member of a provider type or specialty which is the same as that of the practitioner referred to the PRC.

Section II - Reviews other than Initial Credentialing and Periodic Recredentialing

The Chair may refer other matters to the PRC for its review. These referrals may be based on information the CVO obtains outside of the initial or periodic recredentialing process, such as an action taken by the provider’s licensing or certification board, or information contained in a NPDB report. The BFFSP may also receive information from other bureaus within OMAP, other agencies, contracted entities, or consumers, which may raise concerns about the quality of care being provided by the clinician.

These matters will be referred to the PRC in the manner set forth in Section I.

Article V - MEETINGS

Section I – Frequency:

The PRC will meet monthly, provided there is a referral from the Chair or designee. Meetings will be held at least quarterly and be scheduled for a calendar year.

Additional meetings may be called by the Chair. At the request of the Chair, the Executive Liaison Officer will notify committee members of the additional meeting.
Due to the confidential nature of the Committee each member is expected to attend as many PRC meetings as possible in person.

Section II – Procedure:
The PRC will review all files of providers who have been referred by the Chair or his designee, to make a recommendation to approve or deny the initial application for participation as a provider for the FFS and ACCESS Plus delivery systems under the MA Program. During the recredentialing process the PRC will review all referred files to assure the ongoing maintenance of qualifications to continue as a provider for the FFS and ACCESS Plus delivery systems under the MA Program. The PRC will review referred information to evaluate the quality of care rendered.

The Committee members will be given notice/reminder of the meeting at least five business days prior to its occurrence. Each member will receive the agenda prior to the meeting.

At the close of each meeting all meeting materials will be collected by the Executive Liaison Officer and disposed of accordingly.

Section III – Minutes:
The minutes from each meeting will be distributed at the following meeting and voted upon for approval. All minutes are considered to be highly confidential.

Article VI - QUORUM
The presence of four voting PRC members (including the Chair or acting Chair) will be considered a quorum.

A simple majority of the voting members present will determine the Committee’s recommendation.

Article VII - CONFLICT OF INTEREST
PRC members are responsible to divulge conflicts of interest as soon as they are aware that such a conflict exists. Examples of conflicts of interest are financial interests, personal and workplace relationships. Financial interests are being in a position to gain or lose financially from the outcome of the recommendation (e.g. hold stock in the company of an industry partner or the provider under review is a competitor). Workplace relationships may be defined as being employed by the same institution or company as the provider under review. Personal relationships may be defined as being a close personal friend or relative of the applicant. The member is required only to divulge that a conflict exists, and is not required to
provide details regarding the specific nature of the conflict. The PRC member
must exclude him/herself from discussion of, or voting on, the issue involved.
This includes, but is not limited to, refraining from: a) deliberation or debate; b)
making recommendations; c) volunteering advice; and d) participating in the
recommendation making process in any way.

Each member will be expected to sign a conflict of interest statement.

**Article VIII – CONFIDENTIALITY**

All information reviewed and matters discussed during meetings are confidential
and members of the PRC must not disclose any such information or matters to
unauthorized persons.

Each member will be expected to sign a confidentiality statement.

**Article IX - AMENDMENTS**

Amendments to the by-laws of the PRC may be decided by majority vote at any
Committee meeting. Proposed amendments must be submitted in writing, in
advance of a scheduled meeting of the PRC, to be included on the agenda.

Please provide feedback to Holly Alexander at halexander@state.pa.us by COB
October 12, 2006.