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A bill to be entitled An act relating to health care practitioners; requiring the Department of Health to develop guidelines for development of a standardized system for collecting and verifying core credentials of health care practitioners through certified credentials-verification entities; providing definitions; providing for a Credentials Verification Advisory Committee to the department; requiring applicants for licensure under ch. 458, ch. 459, ch. 460, or ch. 461, F.S., to collect and submit initial core-credentials data to a certified credentials-verification entity; authorizing certain health care entities to use a certified credentials-verification entity to obtain core-credentials data on health care practitioners applying for privileges with the entity; requiring the department to make core-credentials data it collects on any licensee available to a credentials-verification entity; requiring the department's procedures to meet national standards; providing that credentialing information furnished by the department must be used solely for credentialing and recredentialing; authorizing the department to charge a reasonable fee; providing that health care practitioners must have an opportunity to review the core-credentials data; requiring the secretary of the department to appoint a task

1 force to develop procedures for site visits; 2 prohibiting health care practitioners from 3 collecting duplicate core-credentials data from individual health care practitioners or from 4 5 originating sources; providing rulemaking 6 authority to the department; providing an 7 effective date. 8 9 Be It Enacted by the Legislature of the State of Florida: 10 11 Section 1. Standardized system of verifying 12 credentials.--13 (1) As used in this section, the term: 14 (a) "Certification" means a quality assessment program 15 from the National Committee for Quality Assurance, the Joint Commission on Accreditation of Healthcare Organizations, and 16 17 other national accreditation organizations used to assess and certify credentials-verification organizations and other 18 19 entities that verify the credentials of health care entities. "Core credentials" means education, training, 20 21 continuing education, references, licensure, drug-enforcement-administration certification, personal 22 identification number, board certification, 23 24 Education-Commission-for-Foreign-Medical-Graduate information, 25 hospital affiliations, managed-care-organization affiliations, other institutional affiliations, professional-society 26 27 memberships, professional liability insurance, claims, suits, Medicare and Medicaid sanctions, civil and criminal law 28 29 violations, practitioner-profiling data, special conditions of 30 impairment, and regulatory exemptions not previously reported

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Statutes, and the initial-licensure reporting requirements specified in the applicable practice act.

- (c) "Credentialing" means the process of assessing and validating the qualifications of a licensed independent health care practitioner to provide patient care services in a health care facility or for any other health care entity.
- (d) "Credentials-verification entity" means any program, entity, or organization that is organized and certified for the expressed purpose of collecting, verifying, maintaining, and providing, as authorized by the health care practitioner in accordance with the provisions of this section, his or her core credentials to health care entities.
  - (e) "Department" means the Department of Health.
- (f) "Health care entity" means any health care
  facility or managed care organization licensed or certified to
  provide approved medical and allied health services in this
  state.
- (g) "Health care practitioner" means any person licensed under chapter 458, chapter 459, chapter 460, or chapter 461, Florida Statutes.
- (h) "Primary-source verification" means verification of professional qualifications based on evidence obtained directly from the issuing source of the qualification.
- (i) "National accrediting organization" means an organization that awards accreditation to hospitals, managed care organizations, or other health care organizations, including the Joint Commission on the Accreditation of Health Care Organizations and the National Committee for Quality Assurance.
- (j) "Recredentialing" means the process by which a credentials-verification entity verifies the credentials of a

health care practitioner whose core credentials are currently on file with the entity.

- (k) "Secondary-source verification" means confirmation of a professional qualification by means other than primary-source verification, as outlined by national accrediting organizations.
- (2)(a) In accordance with the provisions of this section, the department shall develop guidelines for development of a standardized system for collecting and verifying core credentials of health care practitioners through certified credentials-verification entities to eliminate duplication. Once the core credentials are collected, the health care practitioner is not required to resubmit the initial data when applying for practice privileges with health care entities.
- (b) The department shall appoint a nine-member Credentials-Verification Advisory Committee to assist with development of guidelines for development of the credentials-verification program.
- (c) The department, in consultation with the Credentials-Verification Advisory Committee, shall develop a standard from for the reporting of core-credentials data for credentialing and recredentialing.
- (d) Individuals applying for licensure under chapter 458, chapter 459, chapter 460, or chapter 461, Florida

  Statutes, are required to collect and submit initial core-credentials data to a certified credentials-verification entity. Applicants may decide which credentials-verification entity they want to process and store their core-credentials data.

1	(3) Health care entities that employ, contract with,
2	or allow health care practitioners to treat their patients may
3	use a certified credentials-verification entity to obtain
4	core-credentials data on health care practitioners applying
5	for privileges with their entity. Additional information
6	required by the entity's credentialing process may be
7	collected by the health care entity.
8	(4) Health care entities may contract with other
9	entities to perform the functions required under subsection
LO	(2).
L1	(5)(a) The department shall make any core-credentials
L2	data it collects on any licensee available to a
L3	credentials-verification entity on a one-time basis, provided
L4	the licensee authorizes the release of the information.
L5	(b) Credentialing information furnished by the
L6	department must be used solely for credentialing and
L7	recredentialing.
L8	(c) The department may charge credentials-verification
L9	entities a reasonable fee for accessing the core-credentials
20	data it maintains on applicants and licensees. The fee must be
21	set in consultation with the advisory committee and must not
22	exceed the actual cost of providing the data.
23	(6) The credentials-verification entity may rely upon
24	core-credentials data from the department if the department
25	certifies that the information was obtained in accordance with
26	its primary-source verification procedures.
27	(7) The department's credentials-verification
28	procedures must meet national standards, as outlined by
9	national accrediting organizations.

1	(8) Credentials-verification entities that do business
2	in this state shall meet national standards, as outlined by
3	national accrediting organizations.
4	(9) Health care entities shall be held harmless and
5	shall not be liable if they rely on data obtained from a
6	certified credentials-verification entity.
7	(10) Health care practitioners must have an
8	opportunity to review the core-credentials data before it is
9	stored in the data bank of a credentials-verification entity.
10	(11) The secretary of the department shall appoint a
11	task force to develop procedures to expand the standardized
12	credentials-verification program to include site visits.
13	(12) Health care entities may not attempt to collect
14	duplicate core-credentials data from individual health care
15	practitioners or from originating sources.
16	(13) The department shall adopt rules necessary to
17	develop and implement a standardized credentials-verification
18	program.
19	Section 2. This act shall take effect July 1, 1999.
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22	SENATE SUMMARY
23	Requires the Department of Health to develop guidelines
24	for development of a standardized system for collecting and verifying core credentials of health care
25	practitioners through certified credentials-verification entities. Provides procedures, guidelines, standards, and
26	rulemaking authority. Authorizes a fee. (See bill for details.)
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