

Amendment No. \_\_\_\_ (for drafter's use only)

	<u>Senate</u>	CHAMBER ACTION	<u>House</u>
1		.	
2		.	
3		.	
4		.	

ORIGINAL STAMP BELOW

11 The Committee on Health & Human Services Appropriations  
12 offered the following:

14 **Amendment (with title amendment)**

15 Delete everything after the enacting clause

17 and insert in lieu thereof:

18 Section 1. Section 455.557, Florida Statutes, is  
19 created to read:

20 455.557 Standardized credentialing for health care  
21 practitioners.--

22 (1) INTENT.--The Legislature recognizes that an  
23 efficient and effective health care practitioner credentialing  
24 program helps to ensure access to quality health care and also  
25 recognizes that health care practitioner credentialing  
26 activities have increased significantly as a result of health  
27 care reform and recent changes in health care delivery and  
28 reimbursement systems. Moreover, the resulting duplication of  
29 health care practitioner credentialing activities is  
30 unnecessarily costly and cumbersome for both the practitioner  
31 and the entity granting practice privileges. Therefore, it is

Amendment No. \_\_\_\_ (for drafter's use only)

1 the intent of this section that a mandatory credentials  
2 verification program be established which provides that, once  
3 a health care practitioner's core credentials data are  
4 collected, validated, maintained, and stored, they need not be  
5 collected again. Mandatory credentialing under this section  
6 shall initially include those individuals licensed under  
7 chapter 458, chapter 459, chapter 460, or chapter 461.  
8 However, the department shall, with the approval of the  
9 applicable board, include other professions under the  
10 jurisdiction of the Division of Medical Quality Assurance in  
11 this credentialing program, provided they meet the  
12 requirements of s. 455.565.

13 (2) DEFINITIONS.--As used in this section, the term:

14 (a) "Advisory council" or "council" means the  
15 Credentials Verification Advisory Council.

16 (b) "Applicant" means an individual applying for  
17 licensure or a current licensee applying for credentialing.

18 (c) "Certified" or "accredited," as applicable, means  
19 approved by a quality assessment program, from the National  
20 Committee for Quality Assurance, the Joint Commission on  
21 Accreditation of Healthcare Organizations, the Utilization  
22 Review Accreditation Commission, or any such other nationally  
23 recognized and accepted organization authorized by the  
24 department, used to assess and certify any credentials  
25 verification program, entity, or organization that verifies  
26 the credentials of any health care practitioner.

27 (d) "Core credentials data" means any professional  
28 education, professional training, peer references, licensure,  
29 Drug Enforcement Administration certification, social security  
30 number, board certification, Educational Commission for  
31 Foreign Medical Graduates information, hospital affiliations,

Amendment No. \_\_\_\_ (for drafter's use only)

1 managed care organization affiliations, other institutional  
2 affiliations, professional society memberships, professional  
3 liability insurance, claims, suits, judgments, or settlements,  
4 Medicare or Medicaid sanctions, civil or criminal law  
5 violations, practitioner profiling data, special conditions of  
6 impairment, or regulatory exemptions not previously reported  
7 to the department in accordance with both s. 455.565 and the  
8 initial licensure reporting requirements specified in the  
9 applicable practice act.

10 (e) "Credentialing" means the process of assessing and  
11 validating the qualifications of a licensed health care  
12 practitioner.

13 (f) "Credentials verification entity" means any  
14 program, entity, or organization that is organized and  
15 certified or accredited for the express purpose of collecting,  
16 verifying, maintaining, storing, and providing to health care  
17 entities a health care practitioner's total core credentials  
18 data, including all corrections, updates, and modifications  
19 thereto, as authorized by the health care practitioner and in  
20 accordance with the provisions of this section. The division,  
21 once certified, shall be considered a credentials verification  
22 entity for all health care practitioners.

23 (g) "Department" means the Department of Health.

24 (h) "Designated credentials verification entity" means  
25 the program, entity, or organization organized and certified  
26 or accredited for the express purpose of collecting,  
27 verifying, maintaining, storing, and providing to health care  
28 entities a health care practitioner's total core credentials  
29 data, including all corrections, updates, and modifications  
30 thereto, which is selected by the health care practitioner as  
31 the credentials verification entity for all inquiries into his

Amendment No. \_\_\_\_ (for drafter's use only)

1 or her credentials, if the health care practitioner chooses to  
2 make such a designation. Notwithstanding any such designation  
3 by a health care practitioner, the division, once certified,  
4 shall also be considered a designated credentials verification  
5 entity for that health care practitioner.

6 (i) "Division" means the Division of Medical Quality  
7 Assurance within the Department of Health.

8 (j) "Health care entity" means:

9 1. Any health care facility or other health care  
10 organization licensed or certified to provide approved medical  
11 and allied health services in Florida; or

12 2. Any entity licensed by the Department of Insurance  
13 as a prepaid health care plan or health maintenance  
14 organization or as an insurer to provide coverage for health  
15 care services through a network of providers.

16 (k) "Health care practitioner" means any person  
17 licensed under chapter 458, chapter 459, chapter 460, or  
18 chapter 461 or any person licensed under a chapter  
19 subsequently made subject to this section by the department  
20 with the approval of the applicable board.

21 (l) "National accrediting organization" means an  
22 organization that awards accreditation or certification to  
23 hospitals, managed care organizations, or other health care  
24 organizations, including, but not limited to, the Joint  
25 Commission on Accreditation of Healthcare Organizations and  
26 the National Committee for Quality Assurance.

27 (m) "Primary source verification" means verification  
28 of professional qualifications based on evidence obtained  
29 directly from the issuing source of the applicable  
30 qualification.

31 (n) "Recredentialing" means the process by which a

Amendment No. \_\_\_\_ (for drafter's use only)

1 credentials verification entity verifies the credentials of a  
2 health care practitioner whose core credentials data,  
3 including all corrections, updates, and modifications thereto,  
4 are currently on file with the entity.

5 (o) "Secondary source verification" means confirmation  
6 of a professional qualification by means other than primary  
7 source verification, as outlined and approved by national  
8 accrediting organizations.

9 (3) STANDARDIZED CREDENTIALS VERIFICATION PROGRAM.--

10 (a) In accordance with the provisions of this section,  
11 the department shall develop standardized forms necessary for  
12 the creation of a standardized system as well as guidelines  
13 for collecting, verifying, maintaining, storing, and providing  
14 core credentials data on health care practitioners through  
15 credentials verification entities, except as otherwise  
16 provided in this section, for the purpose of eliminating  
17 duplication. Once the core credentials data are submitted, the  
18 health care practitioner is not required to resubmit this  
19 initial data when applying for practice privileges with health  
20 care entities. However, as provided in paragraph (d), each  
21 health care practitioner is responsible for providing any  
22 corrections, updates, and modifications to his or her core  
23 credentials data, to ensure that all credentialing data on the  
24 practitioner remains current. Nothing in this paragraph  
25 prevents the designated credentials verification entity from  
26 obtaining all necessary attestation and release form  
27 signatures and dates.

28 (b) There is established a Credentials Verification  
29 Advisory Council, consisting of 13 members, to assist with the  
30 development of guidelines for establishment of the  
31 standardized credentials verification program. The secretary,

Amendment No. \_\_\_\_ (for drafter's use only)

1 or his or her designee, shall serve as one member and chair of  
2 the council and shall appoint the remaining 12 members. Except  
3 for any initial lesser term required to achieve staggering,  
4 such appointments shall be for 4-year staggered terms, with  
5 one 4-year reappointment, as applicable. Three members shall  
6 represent hospitals, and two members shall represent health  
7 maintenance organizations. One member shall represent health  
8 insurance entities. One member shall represent the credentials  
9 verification industry. Two members shall represent physicians  
10 licensed under chapter 458, one member shall represent  
11 osteopathic physicians licensed under chapter 459, one member  
12 shall represent chiropractic physicians licensed under chapter  
13 460, and one member shall represent podiatric physicians  
14 licensed under chapter 461.

15 (c) The department, in consultation with the advisory  
16 council, shall develop standard forms for the initial  
17 reporting of core credentials data for credentialing purposes  
18 and for the subsequent reporting of corrections, updates, and  
19 modifications thereto for recredentialing purposes.

20 (d) Each health care practitioner licensed under  
21 chapter 458, chapter 459, chapter 460, or chapter 461, or any  
22 person licensed under a chapter subsequently made subject to  
23 this section, must report any action or information as defined  
24 in paragraph (2)(d), including any correction, update, or  
25 modification thereto, as soon as possible but not later than  
26 30 days after such action occurs or such information is known,  
27 to the department or his or her designated credentials  
28 verification entity, if any, who must report it to the  
29 department. In addition, a licensee must update, at least  
30 quarterly, his or her data on a form prescribed by the  
31 department.

Amendment No. \_\_\_\_ (for drafter's use only)

1       (e) An individual applying for licensure under chapter  
2 458, chapter 459, chapter 460, or chapter 461, or any person  
3 applying for licensure under a chapter subsequently made  
4 subject to this section, must submit the individual's initial  
5 core credentials data to a credentials verification entity, if  
6 such information has not already been submitted to the  
7 department or the appropriate licensing board or to any other  
8 credentials verification entity.

9       (f) Applicants may decide which credentials  
10 verification entity they want to process and store their core  
11 credentials data; however, such data shall at all times be  
12 maintained by the department. An applicant may choose not to  
13 designate a credentials verification entity, provided the  
14 applicant has a written agreement with the health care entity  
15 or entities that are responsible for his or her credentialing.  
16 In addition, any licensee may choose to move his or her core  
17 credentials data from one credentials verification entity to  
18 another.

19       (g) Any health care entity that employs, contracts  
20 with, or allows health care practitioners to treat its  
21 patients must use the designated credentials verification  
22 entity to obtain core credentials data on a health care  
23 practitioner applying for privileges with that entity, if the  
24 health care practitioner has made such a designation, or may  
25 use the division in lieu thereof as the designated credentials  
26 verification entity required for obtaining core credentials  
27 data on such health care practitioner. Any additional  
28 information required by the health care entity's credentialing  
29 process may be collected from the primary source of that  
30 information either by the health care entity or its contractee  
31 or by the designated credentials verification entity.

Amendment No. \_\_\_\_ (for drafter's use only)

1           (h) Nothing in this section may be construed to  
2 restrict the right of any health care entity to request  
3 additional information necessary for credentialing.

4           (i) Nothing in this section may be construed to  
5 restrict access to the National Practitioner Data Bank by the  
6 department, any health care entity, or any credentials  
7 verification entity.

8           (j) Nothing in this section may be construed to  
9 restrict in any way the authority of the health care entity to  
10 approve or deny an application for hospital staff membership,  
11 clinical privileges, or managed care network participation.

12           (4) DELEGATION BY CONTRACT.--A health care entity may  
13 contract with any credentials verification entity to perform  
14 the functions required under this section. The submission of  
15 an application for health care privileges with a health care  
16 entity shall constitute authorization for the health care  
17 entity to access the applicant's core credentials data with  
18 the department or the applicant's designated credentials  
19 verification entity, if the applicant has made such a  
20 designation.

21           (5) AVAILABILITY OF DATA COLLECTED.--

22           (a) The department shall make available to a health  
23 care entity or credentials verification entity registered with  
24 the department all core credentials data it collects on any  
25 licensee that is otherwise confidential and exempt from the  
26 provisions of chapter 119 and s. 24(a), Art. I of the State  
27 Constitution, including corrections, updates, and  
28 modifications thereto, if a health care entity submits proof  
29 of the licensee's current pending application for purposes of  
30 credentialing the applicant based on the core credentials data  
31 maintained by the department.



Amendment No. \_\_\_\_ (for drafter's use only)

1           (b) Each credentials verification entity shall make  
2 available to a health care entity the licensee has authorized  
3 to receive the data, and to the department at the credentials  
4 verification entity's actual cost of providing the data, all  
5 core credentials data it collects on any licensee, including  
6 all corrections, updates, and modifications thereto.

7           (c) The department shall charge health care entities  
8 and other credentials verification entities a reasonable fee,  
9 pursuant to the requirements of chapter 119, to access all  
10 credentialing data it maintains on applicants and licensees.  
11 The fee shall be set in consultation with the advisory council  
12 and may not exceed the actual cost of providing the data.

13           (6) DUPLICATION OF DATA PROHIBITED.--

14           (a) A health care entity may not collect or attempt to  
15 collect duplicate core credentials data from any individual  
16 health care practitioner or from any primary source if the  
17 information is already on file with the department or with any  
18 credentials verification entity.

19           (b) A credentials verification entity other than the  
20 department may not attempt to collect duplicate core  
21 credentials data from any individual health care practitioner  
22 if the information is already on file with another credentials  
23 verification entity or with the appropriate licensing board of  
24 another state, provided the other state's credentialing  
25 program meets national standards and is certified or  
26 accredited, as outlined by national accrediting organizations,  
27 and agrees to provide all data collected under such program on  
28 that health care practitioner.

29           (7) RELIABILITY OF DATA.--Any credentials verification  
30 entity may rely upon core credentials data, including all  
31 corrections, updates, and modifications thereto, from the

Amendment No. \_\_\_\_ (for drafter's use only)

1 department if the department certifies that the information  
2 was obtained in accordance with primary source verification  
3 procedures; and the department may rely upon core credentials  
4 data, including all corrections, updates, and modifications  
5 thereto, from any credentials verification entity if the  
6 designated credentials verification entity certifies that the  
7 information was obtained in accordance with primary source  
8 verification procedures.

9 (8) STANDARDS AND REGISTRATION.--

10 (a) The department's credentials verification  
11 procedures must meet national standards, as outlined by  
12 national accrediting organizations.

13 (b) Any credentials verification entity that does  
14 business in Florida must meet national standards, as outlined  
15 by national accrediting organizations, and must register with  
16 the department. The department may charge a reasonable  
17 registration fee, not to exceed an amount sufficient to cover  
18 its actual expenses in providing for such registration. Any  
19 credentials verification entity that fails to meet the  
20 standards required to be certified or accredited, fails to  
21 register with the department, or fails to provide data  
22 collected on a health care practitioner may not be selected as  
23 the designated credentials verification entity for any health  
24 care practitioner

25 (9) LIABILITY.--No civil, criminal, or administrative  
26 action may be instituted, and there shall be no liability,  
27 against any health care entity on account of its reliance on  
28 any data obtained from a credentials verification entity.

29 (10) REVIEW.--Before releasing a health care  
30 practitioner's core credentials data from its data bank, a  
31 designated credentials verification entity other than the

Amendment No. \_\_\_\_ (for drafter's use only)

1 department must provide the practitioner up to 30 days to  
2 review such data and make any corrections of fact.

3 (11) VALIDATION OF CREDENTIALS.--Except as otherwise  
4 acceptable to the health care entity and applicable certifying  
5 or accrediting organization listed in paragraph (2)(c), the  
6 department and all credentials verification entities must  
7 perform primary source verification of all credentialing  
8 information submitted to them pursuant to this section;  
9 however, secondary source verification may be utilized if  
10 there is a documented attempt to contact primary sources. The  
11 validation procedures used by the department and credentials  
12 verification entities must meet the standards established by  
13 rule pursuant to this section.

14 (12) LIABILITY INSURANCE REQUIREMENTS.--The  
15 department, in consultation with the Credentials Verification  
16 Advisory Council, shall establish the minimum liability  
17 insurance requirements for each credentials verification  
18 entity doing business in this state.

19 (13) RULES.--The department, in consultation with the  
20 applicable board, shall adopt rules necessary to develop and  
21 implement the standardized credentials verification program  
22 established by this section.

23 Section 2. The Secretary of Health shall reappoint the  
24 task force appointed under section 103 of chapter 97-261, Laws  
25 of Florida. The reappointed task force shall develop  
26 procedures to expand the standardized credentialing program  
27 under section 455.557, Florida Statutes, as created by this  
28 act, to include site visits.

29 Section 3. This act shall take effect July 1, 1999.  
30  
31

Amendment No. \_\_\_\_ (for drafter's use only)

1 ===== T I T L E A M E N D M E N T =====

2 And the title is amended as follows:

3 Delete everything before the enacting clause

4

5 and insert in lieu thereof:

6 A bill to be entitled

7 An act relating to health care practitioners;  
8 creating s. 455.557, F.S.; providing for  
9 standardized credentialing of health care  
10 practitioners; providing intent and  
11 definitions; providing for a standardized  
12 credentials verification program; providing for  
13 delegation of credentialing authority by  
14 contract; providing for availability of data  
15 collected; prohibiting collection of duplicate  
16 data; specifying conditions for reliability of  
17 data; providing for standards and registration,  
18 including a registration fee; preserving health  
19 care entities from liability and certain  
20 actions for reliance on data provided by a  
21 credentials verification entity; providing for  
22 practitioner review of data prior to release;  
23 providing for validation of credentials;  
24 providing liability insurance requirements;  
25 providing for rules; providing for  
26 reappointment of a task force and providing its  
27 purpose; providing an effective date.

28

29

30

31