

Credentialing Process	1
I. Initial Credentialing Components	1
A. Scope.....	1
B. Confidentiality	1
C. Process.....	1
II. Pre-Employment Credentialing.....	2
A. Required Credentialing Information (4-ACRS-7B-02M)	2
B. Verification of Credentialing Information	3
C. Students and Interns.....	3
III. Periodic Recredentialing.....	3
A. The health care authority will ensure that current licenses and certificates.	3
B. Licensed professional healthcare staff who allow expiration of their license.....	3
IV. References	3
V. Action	4
Referenced Forms	5

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Credentialing Process	ACA Standards: 2-CO-4E-01, 5-ACI-6B-03M, 5-ACI-6B-11, 4-ACRS-4C-18, 4-ACRS-7B-02M		
Steven Harpe, Director Oklahoma Department of Corrections		Signature on File	

Credentialing Process

The Oklahoma Department of Corrections (ODOC) will conduct pre-employment credentialing and periodic credentialing reviews on each licensed healthcare practitioner providing health care services. This process will be used to select and evaluate practitioners who wish to practice within ODOC facilities. Credentialing is used to ensure that the Oklahoma Department of Corrections employs competent and qualified licensed health care practitioners. (2-CO-4E-01, 5-ACI-6B-03M, 4-ACRS-7B-02M)

I. Initial Credentialing Components

A. Scope

1. Credentialing will be required for all licensed practitioners who provide medical care within ODOC facilities. (5-ACI-6B-03M, 4-ACRS-4C-18, 4-ACRS-7B-02M)
2. Privately contracted health care practitioners will also participate in the credentialing process and meet ODOC credentialing requirements. (5-ACI-6B-03M, 4-ACRS-4C-18, 4-ACRS-7B-02M)

B. Confidentiality

Credentialing documents will be placed in the employees' personnel file. (5-ACI-6B-03M, 4-ACRS-4C-18, 4-ACRS-7B-02M)

C. Process

1. The Medical Services Administrative office will verify the certification process for all licensed health care practitioners prior to hiring. Verification will be completed by the Project Manager for health services under the authority of the chief Medical Officer. (4-ACRS-7B-02M)
2. The health care authority as defined in [OP-140101](#) entitled “Organizational Responsibility of Health Services” will maintain certification of current licensure of the licensed health care practitioners at their respective facility as identified by the ODOC position budgeting report. (4-ACRS-7B-02M)
3. The Chief Medical Officer (CMO) or designee will review and interpret the data collected in the credentialing process. The Chief Medical Officer or designee will be authorized to impose practice restrictions upon the applicant or may deny an offer of employment.

The Chief Medical Officer or designee will investigate licensed health care practitioners when there is documented evidence of poor quality care and/or where inappropriate professional behavior has been identified.
4. Contracted private prison vendors will ensure their licensed health care practitioners are credentialed according to this procedure. Consultation will be available through the ODOC Medical Services Administrative office.

II. Pre-Employment Credentialing

A. Required Credentialing Information (4-ACRS-7B-02M)

The “Applicant Questionnaire and Background Investigation Form”, ([OP-110210, Attachment A](#)) will be the primary instrument for collecting required credentialing information. Licensed health care practitioners will submit the following documents, as appropriate, when they submit their “Applicant Questionnaire and Background Investigation Form” ([OP-110210, Attachment A](#)):

1. Copy of current license;
2. Copy of current DEA certificate and Oklahoma Bureau of Narcotics and Dangerous Drugs (OBNDD) certificate;
3. Copy of any board certifications held;
4. Educational training credentials, when applicant is not board certified;
5. Current resume/curriculum vitae, with explanations for any gaps in employment;

6. Copy of current malpractice insurance carrier with address and phone number;
7. Name of all hospitals/facilities where clinical privileges were held;
8. Copy of DD214, if applicable;
9. If applicant has ever practiced in another state, they will provide all the above items for that particular state also; and
10. Report from the National Practitioner's Data Bank.

B. Verification of Credentialing Information

Verification of the collected information will be conducted in accordance with [OP-110210](#) entitled "Background Investigations and Post Conditional Offer of Employment Testing" utilizing the "Applicant Questionnaire and Background Investigation Form" ([OP-110210](#), [Attachment A](#)).

C. Students and Interns

Any students, interns, or residents delivering health care in the facility, as part of a formal training program, work under staff supervision, commensurate with their level of training. There is a written agreement between the facility and training, or educational facility that covers the scope of work, length of agreement, and any legal or liability issues. Students or interns agree in writing to abide by all facility policies, including those relating to the security and confidentiality of information. (5-ACI-6B-11)

III. Periodic Recredentialing

- A. The health care authority will ensure that current licenses and certificates are maintained on file for each licensed health care practitioner(s). (5-ACI-6B-03M, 4-ACRS-7B-02M) If any practitioner's license expires, is not renewed, or is suspended, the health care authority will notify the chief Medical Officer immediately.
- B. Licensed professional healthcare staff who allow expiration of their license through failure to renew on time will be temporarily suspended from duty, and other disciplinary actions may be considered if appropriate while reinstatement of the lapsed license is pursued. It is the responsibility of each licensed healthcare professional to ensure that their license remains active.

IV. References

Policy Statement P-140100 entitled "Inmate Medical, Mental Health and Dental Care"

OP-110210 entitled "Background Investigations and Post Conditional Offer of Employment Testing"

V. Action

The chief Medical Officer is responsible for compliance with this procedure and for the annual review and revisions.

Any exceptions to this procedure will require prior written approval from the agency director.

This procedure will be effective as indicated.

Replaced: OP-140134 entitled "Credentialing Process" dated November 17, 2021

Distribution: Policy and Operations Manual
Agency Website

Referenced Forms

Title

Location

[Attachment A](#)

“Applicant Questionnaire and Background Investigation Form”

[OP-110210](#)