



2025 M St. NW, Suite 800 • Washington, DC 20036
Tel: (202) 367-1196 • Fax: (202) 367-2196
info@namss.org • www.namss.org

July 23, 2010

Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-3227-P

RIN 0938-AQ05

Medicare and Medicaid Programs: Proposed Changes Affecting Hospital and Critical Access Hospital (CAH) Conditions of Participation (CoPs): Credentialing and Privileging of Telemedicine Physicians and Practitioners

To Whom It May Concern:

The National Association Medical Staff Services represents medical services professionals, responsible for managing the credentialing and privileging of licensed independent health care providers. NAMSS supports policies and practices that promote safe credentialing and privileging, while being both time- and cost-efficient. NAMSS identified the telemedicine credentialing and privileging process under the current Hospital and Critical Access Hospital Conditions of Participation (CoPs) as a process that is redundant, creating a waste of time and resources.

NAMSS supports the proposed rule released by CMS which would substantially reduce the redundancies under the current telemedicine policy. We believe that this will save time and resources, especially in facilities that have smaller credentialing staffs and budgets. This rule will promote the adoption of telemedicine services, which will provide communities with greater access to care.

Although NAMSS is in support of the proposed rule, there are several issues and recommendations that we encourage CMS to consider before the final rule is issued:

- NAMSS requests guidance on how to verify whether or not a distant-site hospital is a Medicare-participating hospital in good standing.
- How is “periodic appraisal” defined under the proposed rule? Will this be in accordance with current standards for reappointment, or will hospitals be required to set a separate appraisal schedule for telemedicine providers?

- The proposed rule states that a hospital may only rely on the credentialing and privileging decisions of another hospital. Several hospitals utilizing telemedicine providers currently rely on providers from companies such as Nighthawk. Clarification is requested as to whether or not hospitals will be allowed to accept credentialing performed by ambulatory care groups, even if they are accredited by The Joint Commission.

Clarification of these issues would greatly assist medical services professionals in applying the requirements of this proposed rule in their hospitals. NAMSS commends CMS for taking steps to eliminate redundancies in the credentialing process.

Sincerely,

A handwritten signature in cursive script that reads "Karen Reed, Ph.D., CPMSM".

Karen Reed, Ph.D., CPMSM
NAMSS President