

ROUND 1

1. Medicare requires providers to perform what process every 3-5 years? **Revalidation**
2. According to DNV standards, initial appointments to the medical staff are not to exceed what time period? **36 months**
3. True or False: The Joint Commission standards require that the applicant's participation in continuing education is evaluated and considered on initial appointment to the medical staff. **False. Participating in continuing education must be considered in decisions about reappointment to membership on the medical staff or renewal or revision of individual clinical privileges. The standards do not require this to be evaluated on initial appointment.**
4. According to NCQA standards, on initial application, review of information on sanctions, restrictions on licensure and limitations on scope of practice must cover what period of time? **The most recent five-year period**
5. What are the two elements of Due Process? **Substantive and Procedural**

ROUND 2

1. According to the HCQIA, at what times must the hospital query the National Practitioner Data Bank for a physician, dentist or other health care practitioner? **When applying for a position on its medical staff (initial credentialing), requests for clinical privileges (initial, renewal or new), and every 2 years thereafter.**
2. What medical staff committee(s) is/are required by Joint Commission hospital standards for the medical staff? **Medical Executive Committee**
3. Under Robert's Rules of Order, when more than one motion is proposed, which motion takes precedence? **the most recent motion takes precedence over the ones preceding it**
4. True or False: Voluntary surrender or restriction of clinical privileges for 14 days is reportable to the NPDB. **False**
5. Which specialty is most likely to be granted privileges for surgical management of congenital septal and valvular defects? **Cardiovascular or cardiothoracic surgeon**

ROUND 3

1. URAC standards require the organization to provide a written notification to providers within how many days of the credentialing determination? **10 business days (Note: NCQA requires within 30 calendar days)**
2. NCQA standards require the organization to have written policies and procedures that delineate certain practitioner rights and to communicate these rights to the practitioner. Name the three rights that must be provided to applicants.
 - **Right to correct erroneous information**
 - **Right to receive the status of their credentialing or recredentialing application upon request**
 - **Right to review information submitted to support their application**
3. What is the purpose of the MAC? **A MAC (or Medicare Administrative Contractor) provides regional services on behalf of Medicare, including processing claims, enrolling providers and other activities.**
4. HFAP standards allow a hospital to accept the credentialing and privileging decision of another organization (credentialing/privileging by proxy) for teleradiology services. **True**
5. The case of Darling v. Charleston Memorial Community Hospital was significant in that it set aside a long standing doctrine that was applied to hospitals. What is that doctrine? **Charitable Immunity Doctrine**

ROUND 4

1. CMS Conditions of Participation for Hospitals require that criteria for selection to the medical staff include evaluation of five areas. One of these is competence. Name the four remaining areas. **Character, training, experience, and judgment (Note: remember by using acronym CCJET)**
2. NCQA requires which three factors prior to provisionally credentialing a provider?
 - **PSV of a current, valid license to practice**
 - **PSV of past 5 years of malpractice claims or settlements from the malpractice carrier, or the results of the NPDB query**
 - **A current and signed application with attestation**
3. AAAHC requires a provider to be recredentialed every three years except under what circumstance? **Every 3 years unless state law requires more frequently or if the organization cannot recredential a practitioner within the 36 month time frame because the practitioner is on active military leave, maternity leave, or sabbatical.**
4. How often is the Department of Health and Human services required to report exclusions from participation on Medicare, Medicaid and other Federal health care programs to the NPDB? **Exclusions are reported to the NPDB monthly**
5. What specialty is most likely to be granted privileges for balloon endometrial ablation? **Gynecologist or OB-GYN**

ROUND 5

1. HFAP standards require a specific document to describe the qualifications and criteria that must be met by a candidate in order for the medical staff to recommend appointment and privileges to the governing body. What is that document? **Bylaws or appended credentialing manual**
2. What date does NCQA use when assessing compliance with timeliness requirements for PSV? **NCQA uses the decision date of the Credentialing Committee meeting or medical director sign off on clean files when determining whether the 180 or 365 day requirements were met.**
3. True or False: According to The Joint Commission standards if a medical staff appointee does not return their application in a timely fashion and the result is that the appointment will lapse, temporary privileges can be granted. **False. Temporary privileges cannot be granted for this circumstance.**
4. According to HCQIA, a hospital that fails to report adverse actions may lose its immunity up to what period of time? **Three years**
5. What is the federal law that was enacted for the purpose of encouraging good faith professional review activities? **Healthcare Quality Improvement Act of 1986**