



NAMSS Supports Three-Year Reappointment Cycles for Licensed Independent Practitioners September 2021

NAMSS supports revising regulatory and accreditation policies to extend the reappointment cycle for licensed independent practitioners* (credentialed practitioners) from two years to three years. A three-year practitioner-reappointment cycle would align with health plans' re-credentialing schedules and enable medical services professionals (MSPs) to more effectively perform ongoing professional practice evaluation (OPPE) on credentialed and privileged practitioners.

OPPE and the practitioner-reappointment process requires similar quality assessments, which creates redundancies that hinder effective practitioner evaluation (Appendix A). These similarities require MSPs to perform the same evaluations on the same practitioner for both reappointment and OPPE—almost simultaneously. Extending reappointment to three years would enable MSPs to focus on OPPE between reappointment cycles and more readily take action on performance concerns that OPPE discovers.

A three-year reappointment cycle would also reduce the burdens that overlapping evaluations have upon practitioners, the costs health systems incur from practitioner evaluation, and the amount of time MSPs spend performing redundant administrative tasks. To enable *Tomorrow's MSP*, NAMSS supports systematic changes that reduce these unnecessary costs, redundancies, and inefficiencies so MSPs can use their training to focus exclusively on assessing practitioner performance and clinical privileges, competency, and quality—components that are critical to ensuring patient safety.

*Practitioner is any individual who receives clinical privilege and/or membership by the Governing Board, including, but not limited to, Medical Staff members and Advance-Practice Professionals.

Appendix A

NAMSS Practitioner-Reappointment Position Statement – Appendix A		
Two-Year Reappointment	OPPE and Practitioner Monitoring	Three-Year Reappointment (In Addition to OPPE & Practitioner Monitoring)
License Verification	License Expiration & Status Query	Practitioner application (verifies information, answers all questions, attests application is true and complete).
DEA Verification	DEA Expiration & Status Query	Peer References (If OPPE determines)
State-Controlled Certificate Verification	State-Controlled Certificate Expiration, Status Query	Hospital affiliation reference and/or NAMSS PASS, primary hospital's quality data, if practitioner volume resides at that hospital.
Board-Certification Verification	Board-Certification Expiration, Status Query	NPDB (Continuous Query)
OIG/SAM Query	OIG/SAM Query	<ul style="list-style-type: none"> • Practitioner reviews privileges; may request/withdrawal privileges. • Data showing competence, experience, & training privilege requirements. • MSO determines if practitioner can exercise privileges with/out accommodations. • Includes: application questions, department-chair recommendation; peer reference, MEC recommendation.
Practitioner application (verifies information, answers all requested questions, attests application is true and complete).	Practitioner to notify MSO of status changes, malpractice claims, actions, investigations, etc. (MSO Bylaws)	Review MSO category to MSO bylaws requirements (Membership).
Peer References (If OPPE determines)	Peer references acceptable if quality data is unavailable.	OPPE-collection reports reviewed, added to practitioner's file for considering reappointment/assessing competence to exercise granted privileges.
Hospital Affiliation Reference and/or NAMSS PASS, Primary Hospital's Quality Data, if practitioner's volume resides at that hospital.	NAMSS PASS or NPDB Continuous Query	Review no-volume practitioners, Board recommendation on continuing membership and/or privileges.
NPDB (Continuous Query)	NPDB Query (Continuous Query)	
Malpractice Insurance Coverage Verification	Malpractice Insurance Coverage Expiration & Status Change	
<ul style="list-style-type: none"> • Practitioner reviews privileges; may request/withdrawal privileges. • Data showing competence, experience, training privilege requirements. • MSO determines if practitioner can exercise clinical privileges with/out accommodations. • Includes: application questions, Chair & MEC recommendations; peer reference. 	Clinical Privilege Criteria (monitored through volume data every six-nine months)	
Review MSO category to MSO bylaws requirements (Membership).	N/A	
Review OPPE-collection reports. Add to practitioner's file for considering reappointment/assessing competence to exercise granted privileges.	Review Department/Specialty Data Elements with expected performance parameters. Data Elements may include: <ul style="list-style-type: none"> • Peer-review cases • Informational letters • Professionalism concerns • Patient complaints; patient-satisfaction • Complication rate • Infection rate • Unplanned return to surgery rate • Blood use • Data reported to relevant registries • Compliance with evidence-based protocols • Average length of stay • Readmissions • Compliance with medical record criteria 	
Application (practitioner verifies information, answers all questions, and attests application is true and complete).	Identify no-volume practitioners. OPPE continues; other conditions added to reappointment, clinical privileges (proctoring, retrospective review, co-admission).	