

Title: TEMPORARY PRIVILEGES CREDENTIALING

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Location: Saint Joseph Regional Medical Center-Mishawaka (SJRMC)		Department: Medical Staff Services

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POLICY:

1. It shall be the policy of Saint Joseph Regional Medical Center that the following requirements be met in order to provide temporary privileges per the Medical Staff Bylaws for new membership applicants, locum tenens, the treatment of a specific patient or physicians receiving education and training on new procedures or techniques.
2. Temporary privileges will only be considered after confirmation of compliance with TJC standards regarding the use of temporary privileges. Documentation of this compliance will be completed in each instance where any form of temporary privileges has been granted.

PROCEDURE:

- A. Temporary privileges will only be granted in the following situations with appropriate application and verifications completed as identified below. The Department Chairperson and President of the Medical Staff provide review and recommendation with approval granted by the Chief Executive Officer or their designee. In no situation should the initial grant of temporary privileges be for a period exceeding 120 days. Temporary privileges shall expire at the end of the time period for which they are granted. Extensions may be considered per Medical Staff Credentialing Policy.
 - 1) **COMPLETE APPLICATION FOR MEMBERSHIP:**
 - a) Temporary Privileges for physicians applying for regular staff membership - Temporary Privileges are granted upon receipt of a complete and verified application as defined in the Cooperative Credentialing Policy Number 13A in which the applicant’s full membership and privileges are only pending review by the Credentials Committee, Executive Committee and Board of Trustees, OR
 - 2) **PATIENT CARE NEED:**
 - a) Care of Specific Patient (Treatment of a specific patient, not to exceed three patients in a 12-month period), OR
 - b) Locum Tenens, OR
 - c) When necessary to prevent a lack or lapse of services in a needed specialty area, OR
 - d) Physician Receiving Training – Physicians in residency training are excluded. Temporary privileges will be granted according to Joint Commission MS.06.01.13 and upon receipt and verification of current licensure, relevant training or experience, current competence and ability to perform the privileges requested. Evaluation will include documentation of no current or previously successful challenge to licensure or registration, not been subject to involuntary termination of medical staff membership at another organization, not been subject to involuntary limitation, reduction, denial, or loss of clinical privileges.

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- e) Documentation Required for Patient Care Need:
 - (1) Complete Application and Privilege Form
 - (2) Current CV
 - (3) Malpractice Face Sheet with appropriate amounts of coverage
- f) Primary source verification of the following items is also required:
 - (1) One letter of reference from a peer
 - (2) Hospital Appointment Verification – last or most recent activity
 - (3) Malpractice coverage
 - (4) Verification of board certification
 - (5) Current state licensure and controlled substance registration.
 - (6) National Practitioner Data Bank Query
 - (7) Federal Sanction Query / OIG sanction clearance
 - (8) Background Check
 - (9) AMA and/or AOA Profile
- g) There will be times when an emergent need is required for the above reasons. At the request of the CMO, SJHS will follow TJC requirements for temporary privileges for patient care need. These circumstances will apply to physicians who are on the medical staff of Mishawaka or Plymouth hospitals already. TJC MS.06.01.13 temporary privileges for a patient care need requires "current licensure and current competence". In these rare circumstances, along with verifying hospitals credentials file SJHS will verify:
 - (1) Current license
 - (2) Hospital affiliation (Mishawaka or Plymouth)

References/Standards:

- The Joint Commission, FAQ Details, October 2019
- Policy Origin Date: January 1992
- Review Date: February 2010, December 2012, December 2015, December 2018, February 2019 (P), March 2019 (M)
- Revised Date: February 2010, February 2019 (P), March 2019 (M)
- Effective Date: August 2000
- Reviewed/Recommended By: Medical Executive Committee
- Policy 45

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SAINT JOSEPH REGIONAL MEDICAL CENTER

MEMORANDUM

SUBJECT: Temporary Privileges –
CSR and/or DEA Release and Indemnification

After confirmation with legal counsel and administration, an exception to the Credentialing Policy has been made due to the issues with turnaround time for the State to process full State Licensure and Controlled Substance Registration and/or Federation Drug Enforcement Administration.

The hospital has agreed to grant temporary privileges for applicants without a CSR and/or DEA when the following are completed and received.

- Signed CSR/DEA Release and Indemnification (attached)
- Signed statement from the physicians willing to cover the applicant for all narcotic prescription and administration (attached)

Once these items are received, then the normal process for reviewing and granting temporary privileges will be followed.

Notification will be sent to the Pharmacy and the Patient Care Units notifying them of that temporary privileges have been granted with the stipulation that they are not able to order or administer narcotics until a CSR and/or DEA is received.

It is also noted that the applicant is not allowed to take call until a full CSR and/or DEA is received and verified by the Medical Staff Office unless a backup physician is on call.

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**APPLICANT PENDING
CONTROLLED SUBSTANCE REGISTRATION (CSR) AND/OR
FEDERATION DRUG ENFORCEMENT ADMINISTRATION (DEA) AGREEMENT**

An applicant who does not have an Indiana Controlled Substance Registration and/or Federation Drug Enforcement Administration shall have privileges related to the administering of drugs, dispensing of drugs and prescription of drugs, according to Indiana Statute 856 IAC 2-3-5, as assigned below.

(name of applicant - printed)

The above named physician will act as my agent or employee during the dates of his temporary privileges until full Indiana State licensure and Indiana CSR and/or DEA is received. I will co-sign all orders and will be responsible for all actions with regards to drug administration and dispensing during such dates for the above named physician. This applicant is not permitted to write prescriptions during this time.

Printed Name - Principle Physician with Indiana CSR/DEA

Signature - Principle Physician with Indiana CSR/DEA

Date

Printed Name - Principle Physician with Indiana CSR/DEA

Signature - Principle Physician with Indiana CSR/DEA

Date

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**Controlled Substance Registration (CSR) and
Federal Drug Enforcement Administration (DEA)
Release and Indemnification**

I understand that as of the date of the signing of this document I do not have a CSR and/or DEA and I agree until I obtain my CSR and/or DEA not to order or cause to be ordered or administer or cause to be administered controlled substances for any patients for whom I am involved.

I hereby agree to release and indemnify SJRMC – South Bend for any actions or inactions done by me or at my direction that exceed my prescriptive authority until I receive my CSR and/or DEA.

I understand that this release and indemnification is being required as a condition to granting my temporary privileges by SJRMC – South Bend

Applicant Name - printed

Applicant Signature

Date