

Title: Board Certification Assessment

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Location: Saint Joseph Regional Medical Center (SJPMC)		Department: Centralized Credentials

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POLICY:

1. This policy is to define the options of the Medical Staff when board certification lapses or is not achieved within the relevant timeframes as set forth in the Credentials Policy Article 2.A.1.1 and 2.A.1.m.
2. If an existing Medical Staff physician, dentist, or podiatrist (hereinafter, a “Practitioner”) was on the Medical Staff prior to January 1, 2007, was not board certified in their primary area of practice as of January 1, 2007, in their primary area of practice at SJPMC by the appropriate specialty/subspecialty board of the ABMS, the AOA, the Commission on Dental Accreditation, or the American Board of Podiatric Orthopedics and Primary Podiatric Medicine or the American Board of Podiatric Surgery, and has not otherwise obtained board certification since January 1, 2007, then the Practitioner is grandfathered and is not required to be board certified. All other Medical Staff Practitioners, including any Medical Staff Practitioners who applied for staff appointment after January 1, 2007, or was on staff prior to January 1, 2007 and has since achieved board certification, must maintain board certification in their primary area of practice.

PROCEDURE:

- A. Initial Certification
 - 1) Per Article 2.A.1.1, in order to remain eligible, those Practitioners who apply after January 1, 2007 must achieve board certification in their primary area of practice at SJPMC by the appropriate specialty/subspecialty board within 5 years from the date of completion of their residency or fellowship training.
 - 2) If such Practitioner fails to obtain this initial certification within the specified timeframe, then that Practitioner will undergo FPPE with additional training as determined by the Credentials Committee until certification is obtained.
 - 3) FPPE will be reviewed quarterly by the Credentials Committee.
- B. Recertification:
 - 1) Per Article 2.A.1.m, all Practitioners required to be board certified must maintain board certification in their primary area of practice at SJPMC by the appropriate specialty/subspecialty.
 - 2) Recertification will be addressed on an ongoing basis at the time of expiration.
 - 3) If a Practitioner that is required to be board certified fails to maintain their board certification, then that Practitioner will undergo FPPE with additional training as determined by the Credentials Committee until certification is obtained.
 - 4) FPPE will be reviewed quarterly by the Credentials Committee.
- C. If the Practitioner refuses to comply with FPPE and training to obtain or maintain board certification in their primary area of specialty/subspecialty, then further action on the Practitioner’s privileges will be addressed as result of behavioral issues.

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- D. Board recertification requirements are not applicable to those Practitioners who solely volunteer at Sister Maura Brannick Health Center or Saint Joseph Health Center.
3. EFM Certification for all providers who deliver babies
- A. Initial Certification within 12 months
- 1) 6 Months prior notification to be sent stating they will be placed on an FPPE and are in jeopardy of having their OB privileges suspended if they do not gain initial certification by x date. FPPE will include retrospective strip reads.
 - 2) If not EFM certified within 12 months their OB privileges will be administratively suspended because they are not eligible for the privilege.
- B. Recertification – If there is a lapse in certification:
- 1) FPPE to follow NCC requirements:
 - a) One-Time Extension Process – Including:
 - (1) Provider will be placed on an FPPE until certification is regained including retrospective strip reads
 - (2) NCC requires a fee prior to expiration date
 - b) Lapse Process – Including:
 - (1) Provider will be placed on an FPPE until certification is regained including retrospective strip reads
 - (2) NCC requires a fee, CME and recertification to be complete within 12 months of expiration date
 - 2) Providers who do not follow a and b above will have their OB privileges suspended.
- C. If the Practitioner refuses to comply with FPPE including all recommendation, then further action on the Practitioner's obstetric privileges will be addressed as result of behavior issues.

References/Standards:

- Policy Origin Date: October 2011
- Review Date: December 2012, December 2015 (M), February 2016 (P), December 2018 (M), April 2019 (M & P), June 2019 (M)
- Revised Date: April 2019, June 2019 (M)
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