CASE STUDY

Multifaceted Engagement Leads to Credentialing, Privileging, and Bylaws Improvements



CLIENT

A 25-bed, physician-owned surgical hospital in the Midwest.

BACKGROUND & CHALLENGES

The organization's Chief Executive Officer/General Counsel and Credentials Chair both attended one of **The Greeley Company's** national seminars, The Credentialing Solution, in San Diego in early 2015. They were impressed with the content of the seminar and followed up with The Greeley Company about conducting a gap analysis between their existing processes and leading practices, with the goal of making improvements based on Greeley methodologies.

During a subsequent scoping call to discuss the consulting engagement with Greeley, the organization:

- Described their concerns around the process for appointment and reappointment and desire for Greeley to help make it more thorough and effective and incorporate best practices.
- Explained that they currently utilize a laundry list privileging model and would like assistance on how to transition to core privileging.
- Requested that Greeley assist with the development of policies to guide medical staff leaders in handling low- and no-volume practitioners and the aging practitioner.
- Discussed their need for an off-site bylaws review.

GREELEY'S FINDINGS & SOLUTIONS

The Greeley Company brought to the project a unique combination of capabilities including:

- State-of-the-art credentialing methodology and proprietary scoring for a highly effective MSSD
- Industry-leading practices in criteria-based core privileging
- Regulatory and accreditation expertise and knowledge of leading practices for bylaws review
- A comprehensive team of nationally respected, experienced credentialing consultants

Greeley evaluated the organization and provided several services to meet the client's needs and goals, as follows:

- **Credentialing assessment**: Assessment of the organization's credentialing processes revealed:
 - Noncompliance with CMS requirements in a handful of areas
 - Risk to the organization due to expired licenses
 - Significant opportunities for improving staff skill sets and competencies
 - Lack of operational policies and procedures
 - Outdated, paper-dependent processes with suboptimal utilization of technology

Greeley provided an executive summary of recommendations for the above; including a road map with steps needed to achieve compliance, mitigate risk, and design a highly effective MSSD and credentialing/privileging process.

- **Privileging forms and interviews**: Greeley identified non-compliant privileging forms for seven specialties and replaced them with criteria-based core privileging forms to achieve compliance with CMS requirements.
- Facilitation of two policies with credentials committee members: Greeley helped the credentials committee create new, state-of-the-art policies for low- and no-volume practitioners and the aging physician.
- Offsite bylaws review: A Greeley physician expert reviewed the organization's bylaws, which included:
 - A pre-review conference call to discuss specific areas of concern and questions
 - A two-layered review of the bylaws to identify:
 - Any changes necessary to comply with CMS
 - Recommendations for modifications the organization might want consider that reflect leading practices
 - A one-hour follow-up conference call to discuss the recommended changes

The Greeley reviewer delivered a redlined version of the bylaws within two weeks of receiving them from the organization. The redlined bylaws identified regulatory-related changes (with comments and references to the regulations) and also suggested best

practices the organization might choose to consider. For example, the reviewer suggested that the organization consider moving certain more detailed sections from the bylaws and placing them in other documents that do not have as onerous adoption and amendment processes as the bylaws have.

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