

THE BOARD OF SUPERVISORS OF THE COUNTY OF STANISLAUS
ACTION AGENDA SUMMARY

DEPT: BEHAVIORAL HEALTH AND RECOVERY SERVICES BOARD AGENDA # *B-1
Urgent Routine X AGENDA DATE February 13, 2001
CEO Concurs with Recommendation YES NO 4/5 Vote Required YES NO X
(Information Attached)

SUBJECT: APPROVAL OF CANDIDATES FOR CREDENTIALING BY STANISLAUS COUNTY
BEHAVIORAL HEALTH AND RECOVERY SERVICES MANAGED CARE DIVISION

- STAFF RECOMMENDATIONS:
1. APPROVE THE ATTACHED LIST OF PROVIDERS WHO ARE BEING CREDENTIALLED BY THE MANAGED CARE DIVISION OF STANISLAUS COUNTY BEHAVIORAL HEALTH AND RECOVERY SERVICES AS BEHAVIORAL HEALTH PANEL PROVIDERS FOR NATIONAL HEALTH PLANS
 2. AUTHORIZE THE CHAIRMAN OF THE BOARD OF SUPERVISORS TO SIGN THE ATTACHED FORM

FISCAL IMPACT: The present action has no fiscal impact.

BOARD ACTION No. 2001-97
On motion of Supervisor Blom, Seconded by Supervisor Caruso,
and approved by the following vote,
Ayes: Supervisors: Mayfield, Blom, Simon, Caruso, and Chair Paul
Noes: Supervisors: None
Excused or Absent: Supervisors: None
Abstaining: Supervisor: None
1) X Approved as recommended
2) Denied
3) Approved as amended
Motion:

Christine Ferraro File No.
Clerk By: Deputy

APPROVAL OF CANDIDATES FOR CREDENTIALING BY STANISLAUS COUNTY
BEHAVIORAL HEALTH AND RECOVERY SERVICES MANAGED CARE DIVISION

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DISCUSSION: Stanislaus County Behavioral Health and Recovery Services' Managed Care Division has been delegated the responsibility of credentialing and re-credentialing providers for the National Health Plans provider panel for behavioral health services. In addition, the organization has been delegated by the State Department of Mental Health the role of credentialing mental health providers for the Medi-Cal provider panel. These responsibilities are stipulated in the contractual obligations outlined by the National Health Plans contract with Stanislaus County and by the contract with the State Department of Mental Health, respectively.

Behavioral Health and Recovery Services has been credentialing providers for provider panels for more than four years. This process requires extensive background review and current verification of experience for each candidate. The Credentialing Committee operates according to standards established by the National Committee for Quality Assurance (NCQA) in performing this obligation. These credentialing standards are very difficult to meet, but the use of the NCQA criteria is becoming standard practice for HMO's. NCQA requires that the delegated activities, e.g., credentialing, be reviewed and sanctioned by the governing boards of the organizations which handle these activities. For this reason, the list of providers who are pending credentialing or re-credentialing is being brought to the Board of Supervisors for review and approval. The goal is to meet the expectations established by NCQA for 100% of the candidates that are credentialed.

To execute this function, the Managed Care Division has developed a Credentialing Committee that includes staff and private providers who participate on provider panels. The Credentialing Committee operates according to the Quality Improvement Program document, which was approved by the Board on September 17, 1996. The Credentialing Committee reviews all applications and documents submitted by the applicants. The recommendations of the Credentialing Committee are sent to the Managed Care Services Quality Improvement Council and then to Senior Leadership of the organization. Once approved at both of these levels, the recommendations are sent to the Board of Supervisors.

By adhering to these credentialing standards, the organization is engaging in a "best practice" in the field of managed care.

**POLICY
ISSUE:** These activities are in accordance with the Board priority of promoting excellence and efficiency in government operations and with the organization's strategic goal of continued public/private partnerships in providing behavioral health services.

**STAFFING
IMPACT:** There is no impact on staffing.



Larry B. Poaster, Ph.D.
Director

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**NATIONAL HEALTH PLANS
PROVIDER PANEL**

Initial Provider Credentialing

APPLICANTS	CC¹	QIC²	SL³
Gilbert Eggen, DO	1/23/01	1/29/01	1/29/01

APPROVED BY:

Board of Supervisors

February 13, 2001

Date

¹ CC = Approved by SCDMH Managed Care Services Credentialing Committee

² QIC = Approved by SCDMH Managed Care Services Quality Improvement Committee

³ SL = Approved by SCDMH Senior Leadership Committee