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| **Figure 2.8** | **Sample Job Description: Credentialing Specialist** | |
| **Employee Name:** | | |
| **Position Title:** | Credentialing Specialist | **Effective Date:** 12/2019 |
| **Department:** | Quality Resources | **Last Revision:** 12/2019 |
| **Review Responsibility:** | Director, Quality Resources Department | **FLSA Status:** Nonexempt |
| **Position Summary:**  Provides support to the medical staff, serves as liaison between the medical staff and [Hospital Name] admin- istration, and ensures medical staff is compliant with applicable hospital and [Accreditor] standards.  Assists in:  » Developing, planning, and management of practitioners  » Credentialing/privilege delineation/reappointment programs that ensure the program’s integrity  » Providing general administrative support to the organized medical staff regarding these responsibilities | | |
| **Minimum Qualifications:**  » Associate’s degree from an accredited institution/program (medical staff services sciences program pre- ferred) or other education in business and/or medical staff office procedures  » Certification as medical staff coordinator (CPCS) or eligibility to become certified  » Knowledge of basic medical terminology  » Strong workload organization and management skills  » Comfortable working with a wide variety of healthcare professionals  » Effective written and verbal communication skills  » Technical knowledge of automated support system and maintenance of the same  **Essential Job Functions:**  » Coordinates and provides administrative support to the practitioner initial credentialing and privilege delin- eation activities in accordance with the medical staff policies, bylaws, and rules and regulations so as to ensure that only qualified practitioners provide care at this hospital.  › Initiates information collection, verification, and documentation processes for completed application per established [Hospital Name] medical staff services department policies and procedures.  › Monitors adequacy and quality of potentially sensitive information; seeks additional information when necessary for effective peer review decision-making.  › Coordinates credentialing/peer review/recommendation processes per established policies and procedures.  › Ensures integrity of all paper and electronic practitioner files in accordance with medical staff bylaws, policies, and procedures.  › When applicable and in accordance with medical staff bylaws, policies, and procedures, notifies all appropriate parties of any action taken. | | |

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| **Figure 2.8** | **Sample Job Description: Credentialing Specialist (cont.)** |
| » Plans and develops supporting documentation (e.g., agendas, minutes, credentials reports) for cre- dentials committee and other departments/sections/committees assigned per established policies and  procedures. Organizes and plans with appropriate chairs/chiefs to facilitate meetings and promote education.  » Adheres to professional confidentiality standards in accordance with legal, ethical, and hospital policies  » Ensures data security and confidentiality.  Minimum of three years of credentials coordinator experience in credentialing/recredentialing and privileging processes required.  **Knowledge, Skills, and Abilities:**  » Sound judgment and patience, and professional demeanor at all times  » Ability to handle multiple deadlines and to work in a busy, stressful environment  » Strong organizational skills and the ability to prioritize overlapping and/or conflicting requests  » Ability to use tact and discretion and to maintain confidentiality  » Strong interpersonal verbal and written communication skills | |