

## SB 594: Update to the Oregon Common Credentialing Program

### What is the Oregon Common Credentialing Program?

Senate Bill (SB) 604 (2013) created the Oregon Common Credentialing Program under the Oregon Health Authority (OHA) to simplify and centralize the administrative processes associated with credentialing health care practitioners. This legislation was sponsored by Senator Alan Bates and Senator Elizabeth Steiner-Hayward, both practicing physicians; and had broad provider, hospital, and health plan support. Under SB 604:

- Health care practitioners or their designees must submit necessary credentialing information into a mandatory electronic web-based common credentialing solution and
- Credentialing organizations (e.g., hospitals, health insurers, and ambulatory surgical centers) must use the solution to obtain that information for their credentialing processes.

### Why is Senate Bill 594 necessary?

Provisions of SB 604 require OHA to procure a solution through a Request for Proposals process and implement an operational credentialing program on January 1, 2016. This requires the OHA to go through a refined IT Stage Gate procurement process managed by the Department of Administrative Services and to procure separate quality assurance services to assess project risks and requirements. Given the complexity of the program and that the procurement process has taken more time than anticipated, flexibility in the implementation date is needed.

SB 594 (2015), also sponsored by Senator Alan Bates, provides this flexibility with the following provisions:

- Health care practitioners will not be required to submit credentialing information to the program until the OHA has established an electronic system and until the date the OHA requires it by rule.
- OHA must consult the Common Credentialing Advisory Group about the implementation date.
- Notice of the adoption of a rule establishing an implementation date must be provided to credentialing organizations and Health Care Regulatory Boards at least six months before the effective date.
- OHA must report to the Legislature on or before February 1, 2016.

SB 594 will ensure a sufficient amount of time for the common credentialing solution to be methodically implemented. In addition, it will allow ample time for credentialing organizations and health practitioners to provide feedback and be thoroughly informed of program requirements prior to the implementation date. Without flexibility in the implementation date, the implementation of common credentialing in Oregon will be more condensed and more complex, and OHA risks failure of the technology component of the Program.

### The Oregon Common Credentialing Program will provide:

- An electronic solution to capture, store, and maintain credentialing information
- A process for practitioners or designees to access the Solution to submit credentialing information to one central location
- A process for credentialing organizations such as health plans, hospitals, and others to access and retrieve complete, validated credentialing information
- A process for Health Care Regulatory Boards to input and access practitioner credentialing information
- The verification of credentialing information from primary sources (e.g., educational institutions, malpractice carriers, etc.)

*The Program will **not** include the process of privileging or credentialing decisions.*

### Work completed to date on the Oregon Common Credentialing Program

- Established a Common Credentialing Advisory Group and engaged other subject matter experts
- Determined common credentialing solution functionality and credentialing requirements
- Developed, released, and analyzed responses to a Request for Information
- Finalized credentialing rules on July 1, 2014