

Directions: Please complete each column with information for each personnel file selected for review. Upload completed review tool and documentation/evidence to Box.

| MSHN –Individual Practitioner Credentialing Review Tool | |
|---|--|
| Provider: Click or tap here to enter text. | Date of Review: Click or tap to enter a date. |
| Reviewer: Click or tap here to enter text. | |

| Utilize columns to identify Staff Initials/Title/Date of Hire | Staff 1: | Staff 2: | Staff 3: | Staff 4: | Staff 5: | Staff 6: | Staff 7: | Staff 8: |
|--|----------|----------|----------|----------|----------|----------|----------|----------|
| Credentialing File Review | | | | | | | | |
| Required Attestations | | | | | | | | |
| 1. Attestation- Lack of present illegal drug use | | | | | | | | |
| 2. Attestation - Any history of loss of license | | | | | | | | |
| 3. Attestation- Any history of felony convictions | | | | | | | | |
| 4. Attestation- History of loss or limitation of privileges or disciplinary action. | | | | | | | | |
| 5. Attestation- Correctness and completeness of the application. | | | | | | | | |
| Primary Source Verification (PSV) Completion and Timeliness | | | | | | | | |
| 6. State License initially and as needed upon expiration. | | | | | | | | |
| 7. MCBAP certification initially and as needed upon expiration | | | | | | | | |
| 8.Evidence of Medicare/Medicaid Sanction checks initially and ongoing monthly. | | | | | | | | |
| 9.Criminal Background Check (indicate source/dates) Initially and at minimum every 2 years. | | | | | | | | |



Mid-State Health Network

Directions: Please complete each column with information for each personnel file selected for review. Upload completed review tool and documentation/evidence to Box.

| | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| 10. If CBC check includes history, there is evidence the organization has reviewed to ensure history does not disqualify the provider. | | | | | | | | |
| 11. Central Registry check was completed prior to hire (Applicable only for individuals working directly with children). | | | | | | | | |
| 12. National Sex Offender Registry check was completed prior to hire. | | | | | | | | |
| 13. Michigan Sex Offender registry check was completed prior to hire. | | | | | | | | |

| |
|--|
| Staff Credentialing Findings and Corrective Action |
| Strengths: |
| Findings: |
| Recommendations: |