October 2016

The Oregon Common Credentialing Program

An update to the Oregon State Legislature – Senate Bill 594 (2015)

Contents

Introduction

The Oregon Health Authority (OHA) is implementing the Oregon Common Credentialing Program (OCCP) for health care credentialing organizations and practitioners.

Verifying practitioner credentials helps ensure that Oregonians get quality care. Coordinated care organizations (CCOs), health plans, hospitals and other health care organizations must regularly credential and re-credential their providers.

Many credentialing organizations' systems collect and verify required practitioner information for credentialing. This results in duplicated efforts, possible errors and higher operational costs.

In 2013, the Legislature passed a bill requiring OHA to establish a statewide database and program. The purpose was to streamline access to credentialing information. User fees, established by administrative rule, would fund the OCCP. The bill also required OHA to provide an annual legislative update on the program's progress. This report reflects the 2015–2016 updates.

Executive summary

2016 progress overview and next steps

OHA made important strides in 2016 toward implementing the OCCP.

Actions include:

- Contracting with Harris Corporation to serve as a prime vendor that will manage the program's technology procurement and implementation;

- Significantly involving stakeholders in completing the procurement process and selecting Xerox/Medversant to deliver the Common Credentialing database and services; and

- Developing a fee structure for program implementation and operational costs.

Over the next 12 months, OHA will:

- Finalize the contract and begin technology implementation with the selected vendor team;

- Finalize fee amounts and pursue legislative approval for exact fee structure;

- Update rules and communicate program details to stakeholders;

- Recruit early adopters and champions for a successful launch; and

- Launch the Oregon Common Credentialing Program in early 2018.

Background

Health plans, hospitals and other organizations independently collect and verify practitioners' information in order to credential their affiliated health care practitioners. Oregon began to streamline this process by requiring practitioners to use a common credentialing application. This standardized the information collected to credential a practitioner. However, it did not limit the number of information requests credentialing organizations made to a provider. It also did not reduce the need to separately verify practitioner information.

Senate Bill (SB) 604's goal was to create a more efficient process by requiring OHA to establish a program and a database for credentialing organizations to access verified credentialing information.

Legislative requirements and timeline

Under SB 604, health care practitioners or their designees must submit credentialing information into a common credentialing solution. Credentialing organizations must use the solution to obtain that information.

Senators and practicing physicians Alan Bates and Elizabeth Steiner-Hayward sponsored the legislation. The Oregon Medical Association, the Oregon Association for Hospitals and Health Systems, the Oregon Health Leadership Council, and other organizations supported it.

The project required a flexible start date because of its complexity and the prolonged time to find a common credentialing solution vendor. This led to SB 594 that allows OHA to establish a start date via administrative rule if stakeholders have at least six months' notice. More time will ensure the implementation is not rushed and that participants receive thorough information about program requirements and fees before the start date.

Legislative requirements
SB 604 (2013)

- Establish a program and database to provide credentialing organizations access to information necessary for credentialing.

- Convene an advisory group to advise OHA.

- Develop rules on submittals, verifications and fees.

SB 594 (2015)

- Establish implementation date by rule, with at least six months' notice.

Program implementation

Since 2013, OHA has convened a Common Credentialing Advisory Group (CCAG) to:

- Help develop a list of participating health care practitioner types;

- Identify state and federal requirements for credentialing;

- Release and assess a request for information (RFI) in 2014;

- Develop system and programmatic requirements; and

- Establish fee structure principles and preferences.

OHA also worked with stakeholders to develop administrative rules, effective July 1, 2014, that officially established the Oregon Common Credentialing Program (OCCP). The rules also created the following requirements for credentialing organizations and practitioners:

Credentialing organizations are required to:	Health care practitioners are required to:
• Use the solution to obtain practitioner credentialing information and verifications;	• Use the solution to enter credentialing information (a designee may be used);
• Not ask health care practitioners for information that is available in the solution;	• Attest every 120 days that information in the solution is correct or make changes as necessary;
• Pay fees to support program costs.	• Pay fees to support program costs.

Prime vendor onboard

OHA hired Harris Corporation to comply with new policies for managing information technology projects. Harris provides project management and oversight. OHA aligned the OCCP with a portfolio of interrelated technology projects (i.e., Provider Directory and Clinical Quality Metrics Registry). These projects will provide crucial building blocks for statewide Health Information Technology services to support:

- Care coordination,

- Quality improvement,

- Efficient operations and analytics, and

- New models of care and payment in Oregon.

Harris Corporation has successfully partnered with OHA since 2011 to manage and deliver initial components of the state's health information exchange strategy. OHA chose Harris as the prime vendor to work under the direction and approval of OHA's Office of Health Information Technology to manage each project's procurement and implementation. This approach will ensure best practice management of multiple vendors' solutions and reduce the agency's failure risk.

Credentialing vendor selected

Harris Corporation used knowledge from all previous OCCP work to perform a competitive and stakeholder-informed procurement process for a commercial off-the-shelf technology vendor solution for the OCCP. Harris recommended and OHA selected Xerox State Healthcare in partnership with Medversant Technologies.

Stakeholders have participated in vendor product demonstrations and reference (customer) onsite visits throughout the process. This ensures Oregon's solution will meet users' needs and requirements.

Harris is currently working with OHA to negotiate a contract with the vendor. The vendor should be fully on board by January 2017. More information about the procurement process is available at www.oregon.gov/oha/OHIT/occp/Pages/Implementation.aspx.

Fee structure developed

OHA is finalizing a fee structure to ensure adequate revenue for OCCP administration. The fee structure will include the combination of a one-time set-up fee and annual subscription fees for credentialing organizations to pay. Health care practitioners will pay a one-time application fee.

Practitioner panel size will determine the credentialing organization's tiered proposed fee structure. OHA is constructing the tiers based on responses to a June 2016 survey in which credentialing organizations reported their practitioner panel sizes.

OCCP fee structure

Fee	Structure
Credentialing organizations	
One-time set-up fee	Tiered fee based on practitioner panel size
Annual subscription fee	Tiered fee based on practitioner panel size
Expedited credentialing fee	Flat fee per expedite request/practitioner
Health care practitioners	
Initial application fee	Flat fee (one-time)

Stakeholder engagement

Stakeholders have been involved in all OCCP implementation work. The main advisory group, CCAG, has met regularly over the last few years. This group's membership includes practitioners and representatives from credentialing organizations, health care regulatory boards, provider practices, ambulatory surgical centers and independent physician associations.

OHA has regularly consulted a group of subject matter experts from some of the same organization types. Other stakeholders such as professional associations and individual practitioners have also given input. This engagement will continue through and beyond the implementation period.

Next steps

In the coming months, OCCP work will consist of the following:
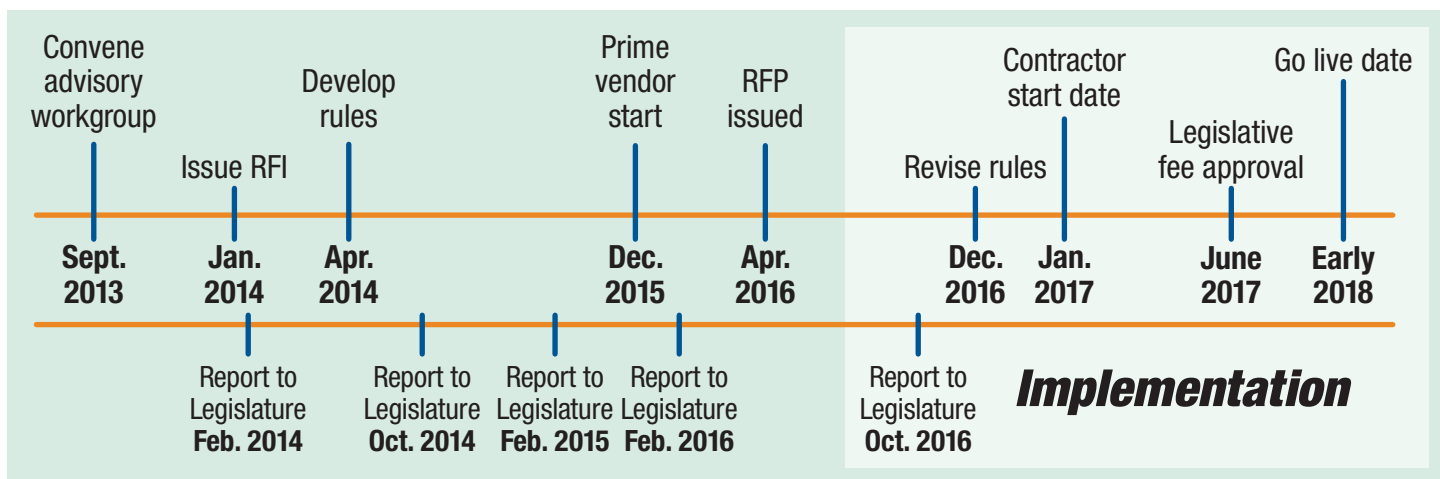
- Vendor negotiations;

- Implementation kickoff;

- Equitable fee structure finalization;

- Administrative rules revisions;

- Programmatic details and policy work; and

- An outreach and marketing campaign.

OHA will work closely with Harris and Xerox/Medversant to implement the best solution for all participants. Stakeholders will be fully engaged in early adoption and other activities through the CCAG and subject matter expert group.

For example, OHA is developing comprehensive and timely communication, change management and adoption plans to inform practitioners and credentialing organizations of upcoming changes to the process of credentialing in Oregon. OHA will also continue to collaborate with key stakeholders to address specific OCCP credentialing needs and challenges to ensure an effective program that will reduce costs and administrative burdens for Oregon's health care industry.

Early 2018 is the anticipated OCCP start date (see below timeline).

Implementation timeline

Convene advisory workgroup		Develop rules		Prime vendor start	RFP issued		Revise rules	Contractor start date	Legislative fee approval	Go live date
	Issue RFI									
Sept. 2013	**Jan. 2014**	**Apr. 2014**		**Dec. 2015**	**Apr. 2016**		**Dec. 2016**	**Jan. 2017**	**June 2017**	**Early 2018**
	Report to Legislature **Feb. 2014**	Report to Legislature **Oct. 2014**	Report to Legislature **Feb. 2015**	Report to Legislature **Feb. 2016**			Report to Legislature **Oct. 2016**	*Implementation*		

Find more information on OCCP legislation and the CCAG at www.oregon.gov/oha/OHIT/occp.

You can get this document in other languages, large print, braille or a format you prefer. Contact the Office of Health Information Technology at 503-373-7859 or email ohit.info@state.or.us. We accept all relay calls or you can dial 711.