I. PURPOSE: To (1) perform adequate background checks as required by law on all HHSC employees and independent contractors\(^1\), including: (i) physicians and other individual healthcare providers as defined by the Medicare or Medicaid programs; (ii) employees; and (iii) contractors; and (2) require adherence with JCAHO standards in the credentialing and privileging of healthcare providers.

II. POLICY STATEMENT: State and federal laws make HHSC responsible for activities at its facilities which are related to the delivery of health care services, and billing and collecting for those services from patients and third party payers, most notably including the Medicare and Medicaid programs. The federal laws in particular prohibit the submission of claims for reimbursement by unlicensed providers, as well as the submission of false or erroneous claims. HHSC recognizes the importance of these laws, and shall take steps necessary to provide for the integrity of all claims submitted for health care services performed by HHSC. HHSC shall, in part, accomplish these goals by conducting hiring and credentialing procedures and background checks in accordance with this policy.

In addition, JCAHO has established standards for the credentialing of healthcare providers. It is the policy of HHSC that all facilities shall adhere to those standards in the credentialing and privileging of healthcare providers.

III. HIRING AND CREDENTIALING PROCEDURES:

A. Voluntary Disclosure:

1. As part of the hiring and initial and reappointment credentialing processes, HHSC shall require all prospective personnel to disclose whether they have been convicted of any of the following types of crimes\(^2\):

   a. Crimes relating to the delivery of an item or service under a health care program;

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\(^1\) Hereinafter, the term "personnel" shall include all three categories of persons and entities providing goods or services to HHSC facilities.
b. Crimes of patient abuse or neglect;

c. Felonies or misdemeanor crimes of fraud, theft, embezzlement, breach of fiduciary responsibility, or other financial misconduct in connection with a health care program;

d. Felonies or misdemeanor crimes relating to the manufacture, distribution, prescription or dispensing of a controlled substance;

e. Crimes relating to the obstruction of an investigation of any of the offenses listed in items 1 through 4 above; and

f. Debarment from participation in federal healthcare programs.

2. All personnel shall be further required to notify their facility at any time they have been convicted of any of the crimes stated above.

B. **Background Checks:** In order to determine if prospective personnel have been convicted of certain types of crimes, or have been listed as debarred, excluded or otherwise ineligible for participation in federal health care programs, HHSC or its credentials verification service contractor shall conduct background checks on all prospective personnel. The screening requirements and other procedures adopted by the following federal agencies shall be followed: Office of the Inspector General of the Department of Health and Human Services, General Services Administration, Food and Drug Administration, and Drug Enforcement Administration. In addition to these background checks, HHSC shall confer with persons listed as references and prior employers.

Background checks shall be conducted on existing personnel on a semi-annual basis and at the time of reappointment for healthcare providers by checking the applicable State and federal data banks.

C. **Employment, Credentialing or Contracting Qualifications:** HHSC shall comply with all federal and State laws that prohibit the contracting or hiring of healthcare personnel due to a history of illegal or improper acts. No employee or contractor shall be engaged or retained who is debarred or excluded, as defined in the Social Security Act. No physician or other healthcare provider shall be granted medical staff membership or privileges as long as the provider remains on the excluded list. Should a healthcare provider on staff be debarred or excluded, his/her membership and/or privileges shall automatically cease.

D. **Documentation:** HHSC Human Resources departments shall retain detailed written records of any and all background checks and other screening procedures conducted with respect to each HHSC employee. Contracting officers shall keep records of background checks on contractors with the contract file. The medical staff office of each

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2 “Conviction” means a court judgment of conviction, a finding of guilty by a court, an accepted plea of guilty or nolo contendere, or the participation in a first offender, deferred adjudication, or other arrangement or program where the judgment of conviction has been withheld.
facility shall keep records of the background checks on the healthcare providers who are subject to the medical staff credentialing process.

E. JCAHO Standards: All facilities shall comply with JCAHO standards in the credentialing and privileging of physicians. Temporary privileges (as provided in the medical staff bylaws) may be granted for a limited time only.

F. Effect on Medical Staff Bylaws: Notwithstanding the above, the procedures described in this policy shall be in addition to, and not in lieu of, any similar procedures set forth in the medical staff bylaws with regard to physicians and other providers.