

PARTNERSHIP HEALTHPLAN OF CALIFORNIA

POLICY/ PROCEDURE

Policy/Procedure Number: MPCR101			Lead Department: Network Services Business Unit: Credentialing	
Policy/Procedure Title: Ensuring Non-discriminatory Credentialing and Re-credentialing processes			<input checked="" type="checkbox"/> External Policy <input type="checkbox"/> Internal Policy	
Original Date: 04/23/2018		Next Review Date: 02/11/2026 Last Review Date: 02/12/2025		
Applies to:	<input checked="" type="checkbox"/> Medi-Cal	<input checked="" type="checkbox"/> Partnership Advantage	<input type="checkbox"/> Employees	
Reviewing Entities:	<input type="checkbox"/> IQI	<input type="checkbox"/> P & T	<input type="checkbox"/> QUAC	
	<input type="checkbox"/> OPERATIONS	<input type="checkbox"/> EXECUTIVE	<input type="checkbox"/> COMPLIANCE	<input type="checkbox"/> DEPARTMENT
Approving Entities:	<input type="checkbox"/> BOARD	<input type="checkbox"/> COMPLIANCE	<input type="checkbox"/> FINANCE	<input type="checkbox"/> PAC
	<input type="checkbox"/> CEO <input type="checkbox"/> COO	<input checked="" type="checkbox"/> CREDENTIALING	<input type="checkbox"/> DEPT. DIRECTOR/OFFICER	
Approval Signature: <i>Marshall Kubota, MD</i>			Approval Date: 02/12/2025	

I. RELATED POLICIES:

- A. MPCR100 - Credential and Re-Credential Decision Making Process
- B. MPCR200 - The Credentials Committee and CMO Credentialing Program Responsibilities
- C. MPCR300 - Practitioner Credentialing and Re-credentialing Requirements

II. IMPACTED DEPTS:

Network Services

III. DEFINITIONS:

N/A

IV. ATTACHMENTS:

- A. [Attachment A – Non-Discrimination Agreement](#)

V. PURPOSE:

To ensure that all credentialing and re-credentialing decisions are conducted in a nondiscriminatory manner.

POLICY / PROCEDURE:

It is the policy of Partnership HealthPlan of California (Partnership) to have a process in place for ensuring that credentialing and re-credentialing decisions are conducted in a nondiscriminatory manner. Partnership does not base credentialing decisions on an applicant's race, ethnic/national identity, gender, age, sexual orientation or patient type (i.e. Medicaid) in which the practitioner specializes.

Partnership's procedures for monitoring and preventing discriminatory credentialing decisions include but are not limited to:

- i. Maintaining a heterogeneous Credentials Committee membership and requiring those responsible for credentialing decisions to sign a statement affirming that they do not discriminate.
- ii. Periodic audits of credentialing files (in process, denied and approved files) that suggest potential discriminatory practice at selecting practitioners.
- iii. Annual audits of practitioner complaints for evidence of alleged discrimination.

A. Procedure

- 1. Upon appointment to the Credentials Committee and annually thereafter, Credentials Committee members and Partnership staff involved in the credentials process will sign a statement affirming that they do not discriminate. (Attachment A).

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2. Partnership Credential staff is responsible for distributing and maintaining copies of signed statements in a location that is easily accessible.
3. Annually the Credentials Committee will review the Committee membership to confirm the make-up of the Committee is heterogeneous including evaluation of a variety of specialties, gender and ethnic backgrounds.
4. When there is reason for concern, the Committee will identify new members and recommend appointment to the Committee by the Partnership Board of Commissioners.
5. The Committee minutes will reflect annual review and actions taken, if any.
6. Annually Partnership will conduct an audit of credentialing files by evaluating potential discriminatory practices at selecting practitioners, identify potential trends and report findings to the Credentials Committee.

B. Partnership Credentialing staff will:

1. Identify all providers denied credentialing or terminated by the Credentials Committee within the reporting period and document the:
 - a. Specific reasons for denial or termination,
 - b. Specialty
 - c. Gender
 - d. Ethnicity
 - e. Sexual Orientation
 - f. Age
2. Review practitioner complaints regarding the credentials process for alleged discrimination, and document specific complaints and compare them to the denied or terminated analysis and include the specific complaints in the report.
3. Present the report to the Credentials Committee for review and recommendations.

VI. REFERENCES:

NCQA 2025 CR1, Element A, Factor 6

VII. DISTRIBUTION:

Partnership Provider Manual

VIII. POSITION RESPONSIBLE FOR IMPLEMENTING PROCEDURE: Director of Network Services

IX. REVISION DATES: 05/09/2018, 04/10/2019, 03/11/2020, 03/10/2021, 03/09/2022, 03/08/2023, 03/13/2024, 02/12/25

PREVIOUSLY APPLIED TO:

A. MPCR2 (Archived 07/01/2018)