

**YALE-NEW HAVEN HOSPITAL
DEPARTMENT OF PHYSICIAN SERVICES
YALE NEW HAVEN COMMUNITY MEDICAL GROUP
APPLICANT/MEMBERS ACCESS TO FILES & CORRECTION OF
INFORMATION**

Purpose: The purpose of this policy is three-fold:

- to identify the circumstances under which a current CMG member or applicant for membership may have access to the contents of his/her file
- to outline the process by which a physician is notified of any information obtained during the credentialing/re-credentialing process that varies substantially from the information submitted by the physician and to confirm the physician's right to correct erroneous information
- to outline the process by which an applicant may request the status of his/her credentialing application

Scope: This policy shall apply to all current and prospective members and shall be posted on the YNH-CMG website and included in the new application materials.

Policy: Current members or applicants may have access to or correct information in their CMG files and may request the status of their credentialing applications in accordance with the guidelines set forth in the "Procedure" outlined below.

Procedure:

A. Access to Files

Current or prospective members of the CMG who wish to review the contents of their file may request to do so by contacting the YNH Department of Physician Services by phone or in writing. Access will be permitted upon reasonable notice and during regular business hours consistent with the following guidelines:

- (1) Physicians are permitted to review the file only in the presence of the President of the CMG, Chair of the Credentialing Committee, Executive Director, Director of Physician Services or Network Credentialing Coordinator.
- (2) If present, any confidential letters of recommendation or information protected under peer review are not accessible.
- (3) Members/applicants may not remove or photocopy any items from the file.
- (4) Members/applicants are not permitted to make any notations on documents in the file. A physician may, however, provide a written statement to be added to the file.

B. Right of Notification and Correction of Information

In the event that credentialing/re-credentialing information obtained from sources other than the physician him/herself varies substantially from that provided by the physician in his/her application, the Network Credentialing Coordinator or another member of the Department of Physician Services he/she designates will contact the physician directly by

phone within ten business days and note the contact on the *Credentialing Checklist*. Inconsistencies will be explained as appropriate and the physician will be provided with an opportunity to submit additional information clarifying the discrepancy. Additional information will be required to be submitted in writing and directed to the Network Credentialing Coordinator or Director, Physician Services prior to the Credentialing Committee meeting at which the individual is scheduled for presentation. Documentation is placed in the applicant's file.

Examples of potential areas of inconsistency include, but are not limited to, actions on a license, hospital privileges, malpractice claims history or board certification decisions.

C. Right to Request Status of Credentialing Application

Applicants are entitled to request the status of their credentialing applications. The Network Credentialing Coordinator responds to requests by applicants for the status of their credentialing applications by phone, fax, or email. At that time, the applicant is notified of any information that is outstanding or any additional documentation that is needed.

Policy G
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