


Policy and Procedure

	INTEGRIS Health Partners	NUMBER IHP-ADM-002
	INTEGRIS Health Partners Credentialing Policy	Effective Date: 7/6/2023
	Fair Hearing/Appeal Policy	Revised: 08/15/2023

I. Policy Statement

INTEGRIS Health Partners may discipline, terminate, reduce, suspend or limit a Practitioner’s participation in the Network in furtherance of quality health care when the cause of the action is related to clinical competency or professional conduct. INTEGRIS Health Partners must have reasonable belief that the action is warranted by the facts collected and must provide the Practitioner adequate and prompt notice of the reason(s) for the proposed action and the procedures that are followed at a fair hearing, if requested.

INTEGRIS Health Partners in its sole discretion may terminate the participation of any Practitioner without cause or according to the terms of that Practitioner’s written contract or for failure to comply with the administrative requirements and procedures set forth in the IHP Credentialing Policy or for any other reasons deemed appropriate, whether or not these reasons are mentioned in the IHP Credentialing Policy.

II. Purpose/Objective

The purpose of this Policy is to establish procedures when a physician is notified of their appeal rights and requests a fair hearing.

III. Definitions

- a. **INTEGRIS Health Partners (“IHP”)** is INTEGRIS’ Network, composed of employed and independent Practitioners, who care for the populations served under Value-Based Care agreements.
- b. **Network** refers to INTEGRIS Health Partners (“IHP”).
- c. **Network Strategy and Credentials Committee (“NSCC”)** is INTEGRIS Health Partners’ peer review body responsible for administering the credentialing and recredentialing process and takes ownership of ensuring the IHP Network is comprised of Practitioners that collectively provide the range of clinically integrated quality and cost-effective services required to meet the needs of the populations served by IHP.
- d. **Practitioner** means a physician, dentist, or other licensed health care Practitioner.
- e. **Special Notice** means hand delivery, certified mail (return receipt requested), or overnight delivery service providing receipt.


IV. Hearing Rights

a. **Actions that Provide a Right to a Hearing**

A Practitioner is entitled to request a hearing under this Policy whenever one of the following adverse actions occurs:

1. the NSCC recommends one of the following actions:

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- i. Denial of request for initial or renewed participation in the IHP Network as defined in IHP Policy;
 - ii. Revocation of Network Membership in IHP;
 - iii. Suspension of Network Membership for more than 30 days; or
 - iv. Any other decisions that adversely affect a participating Practitioner’s status with the Network for more than 30 days.
2. the IHP President and/or Medical Director issue a precautionary suspension.
- i. The IHP President and/or Medical Director may precautionarily suspend a Practitioner from participation in the Network if immediate action is necessary to protect the interest of patients, employees, or other persons involved with the Network. The precautionary suspension will be effective immediately, with oral or written notice of the suspension provided to the Practitioner as soon as possible.
 - ii. Upon notice of a precautionary suspension, the fair hearing rights in this Policy will apply.
3. any other action by the NSCC, the IHP President and/or the Medical Director that results in a report to the National Practitioner Data Bank.

b. Actions that Do Not Provide a Right to a Hearing

1. A determination that an applicant fails to meet the threshold eligibility qualifications or criteria during the credentialing process does not provide a right to a hearing.
2. The following actions with respect to a Network Practitioner will be considered administrative actions that result in the automatic relinquishment of their status in the Network, with no rights to a hearing or appeal under this Policy:
 - i. The individual’s license to practice has been revoked by the State or federal agency;
 - ii. The individual’s license to practice has been restricted (i.e., is on probation, surrendered, or suspended) by the State or federal agency;
 - iii. The individual’s DEA or CDS certificate has been revoked or suspended;

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- iv. The individual’s Medicare/Medicaid participation has been terminated, sanctioned, or otherwise limited;
 - v. License is not appropriate for independent practice;
 - vi. Insufficient amounts of professional liability coverage;
 - vii. No collaborative agreement (for Nurse Practitioners and Physician Assistants) with a participating physician;
 - viii. Failure to respond to request for credentialing information;
 - ix. Failure to report actions by licensing or regulatory agencies;
 - x. Failure to following IHP operational policies and procedures;
 - xi. Practitioner terminated from delegated entity.
3. Failure to submit a complete application or an application in a timely manner, as described in the IHP Credentialing Policy, does not provide a right to a hearing.
 4. No other actions beyond those described in paragraph (a) above will provide a Network Practitioner with a right to a hearing under this Policy.

V. Notice of a Right to a Hearing Under this Policy

- a. When an adverse action is recommended or taken that entitles a Practitioner to a hearing under this Policy, the affected Practitioner will be informed of such within 30 days by the IHP President and/or Medical Director, in writing, by special notice. The following information will be provided to the Practitioner:
 1. a statement of the action recommended or taken and the general reasons for it;
 2. notice that the Practitioner has the right to request a hearing within 30 days of receipt of the notice; and
 3. a copy of this Policy which outlines the rights of the Practitioner in the hearing and appeals processes.
- b. A Practitioner has 30 days following the receipt of such notice to request a hearing, in writing to the IHP President and/or Medical Director, including the name, address, and telephone number of the Practitioner’s counsel, if any. Failure to request a hearing within the time and in the manner required by this Policy will constitute waiver of the right to a hearing, and the adverse action will be considered final.

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VI. Notice of Hearing and Statement of Reasons

- a. When a hearing is requested, the IHP President and/or Medical Director will schedule the hearing and will give written notice, by certified mail, return receipt requested, to the Practitioner who requested the hearing. The notice will include:
 1. the time, place, and date of the hearing;
 2. the name of the Hearing Officer, if known;
 3. a proposed list of witnesses; and
 4. a statement of the specific reasons for the recommendation, as well as the list of patient records and other information supporting the recommendation. This statement and the list of supporting patient record numbers and other supporting information may be revised or amended at any time, even during the hearing, so long as the additional material is relevant.
- b. The hearing will begin no sooner than 30 days after notice of the hearing has been given unless an earlier hearing date has been specifically agreed to in writing by the parties.


VII. Hearing Officer

- a. When a hearing is requested, the IHP President and/or Medical Director, acting for the IHP Board, will appoint a Hearing Officer. The Hearing Officer may be:
 1. a Network Practitioner;
 2. a Practitioner not connected with the Network; or
 3. an attorney who may be legal counsel to the Network.

The Hearing Officer will not have previously participated in the action that led to the hearing or be a relative of, or be in direct economic competition with, the affected Practitioner.

- b. Once selected, the following documents will be provided to the Hearing Officer in advance of the hearing:
 1. a pre-hearing statement that either party may choose to submit;
 2. exhibits offered by the parties (without the need for authentication); and
 3. stipulations agreed to by the parties.

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VIII. Hearing Procedures

- a. At a hearing, both sides will have the right, subject to reasonable limits determined by the Hearing Officer, to:
 1. call and examine witnesses;
 2. introduce exhibits;
 3. cross-examine any witness on any matter relevant to the issues;
 4. rebut any evidence;
 5. be represented by counsel or another individual of their choice who may present the case and call, examine, and cross-examine witnesses; and
 6. submit a post-hearing statement with proposed findings, conclusions and recommendations to the Hearing Officer.
- b. The Network’s representative will first present evidence in support of any recommendation. Thereafter, the burden will shift to the Practitioner who requested the hearing to present evidence.
- c. Failure of the Practitioner who requested the hearing, without good cause, to appear and proceed at the hearing will constitute a waiver of the right to a hearing and the action that triggered the hearing will be considered final.
- d. A record of the hearing will be maintained by a stenographic reporter. The cost of such reporter will be borne by the Network. Copies of the transcript will be available to the Practitioner at the Practitioner’s expense. Oral evidence will be taken on oath or affirmation administered by any authorized person.
- e. The hearing will not be conducted according to rules of evidence. Evidence will not be excluded merely because it is hearsay. Any relevant evidence will be admitted if it is the sort of evidence on which responsible persons are accustomed to rely in the conduct of serious affairs. The guiding principle will be that the record contains information sufficient to determine whether the Practitioner is qualified for participation within the Network.

IX. Hearing Officer’s Conclusion and Recommendation

- a. Within 30 days after final adjournment of the hearing (which may be designated as the time the Hearing Officer receives the hearing transcript or any post-hearing statements, whichever is later), the Hearing Officer will prepare a written statement of his or her findings and recommendation.

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- b. The Hearing Officer will deliver his or her recommendation to the IHP President, who will send a copy of the recommendation to the Practitioner who requested the hearing by special notice.
- c. If the Hearing Officer's findings are favorable to the Practitioner who requested the hearing, the Hearing Officer's recommendation will take effect immediately. If the Hearing Officer's decision is adverse to the Practitioner, the IHP President will inform the Practitioner of a right to request an appeal as described in this Policy.

X. Appeal Procedure

a. Preliminary Issues:


- 1. A Practitioner has 30 days after receiving notice of the Hearing Officer's decision to file a written request for an appellate review. The request must be delivered to the IHP President either in person or by certified or registered mail, and may include a request for a copy of the Hearing Officer's findings and all other material, favorable or unfavorable, if not previously forwarded, that were considered in taking the adverse recommendation or action.
- 2. If an appeal is not requested within 30 days as provided herein, the Practitioner will be deemed to have waived appellate review, and the Hearing Officer's recommendation will be forwarded to the IHP Board for final action.
- 3. The grounds for appeal will be limited to the following: (1) there was substantial failure to comply with this Policy, so as to deny a fair hearing; or (2) the recommendation made by the Hearing Officer was made arbitrarily or capriciously, or was not supported by credible evidence.
- 4. Whenever an appeal is requested, the IHP Board will schedule and arrange for an appeal. The Practitioner will be given special notice of the time, place, and date of the appeal. The appeal will be held as soon as arrangements can reasonably be made, taking into account the schedules of all the Practitioners involved.

b. Nature of Appellate Review:

- 1. The IHP Board will consider the record upon which the recommendation before it was made.
- 2. Each party will have the right to present a written statement in support of its position on appeal. In unusual circumstances, at the discretion of the IHP Board, the parties may also appear in person in order to provide an oral statement.

c. Final Decision of the IHP Board:

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1. The IHP Board may affirm, modify, or reverse the recommendation before it or refer the matter for further review and recommendation.
2. Within 30 days after the appeal, the IHP Board will render a final decision in writing, including specific reasons, and will deliver a copy thereof to the affected Practitioner by special notice. A copy will also be provided to the IHP President for information.
3. No Practitioner will be entitled to more than one hearing and one appellate review on any matter which may be the subject of an appeal.

XI. Peer Review Protection

- a. All the procedures and actions carried out pursuant to this Policy will be performed by “peer review committees” in accordance with Oklahoma law. These committees include, but are not limited to:
 - i. all standing and ad hoc committees, including the Network Strategy and Credentialing Committee;
 - ii. hearing officers, panels, and appellate bodies;
 - iii. IHP’s Board and its committees; and
 - iv. any individual acting for or on behalf of any such entity, including but not limited to IHP’s Program Manager, President, Vice President, Medical Directors, committee chairs and members, all other IHP personnel, and experts or consultants retained to assist in peer review activities.

All oral or written communications, reports, recommendations, actions, and minutes made or taken by peer review committees are confidential and covered by the applicable provisions of Oklahoma law.

- b. All peer review committees will also be deemed to be “professional review bodies” as that term is defined in the Health Care Quality Improvement Act of 1986, 42 U.S.C. §11101 *et seq.*