

MALPH Cross-Jurisdictional Sharing Project (revised Sept 24, 2019)

Medical Director Change Checklist

<i>Date Completed</i>	<i>Initials of Person Completing</i>	<i>Activity</i>
		Prior to the Medical Director Starting
		Submit medical director qualifications to Office of Local Health Services, MDHHS for approval. Identify Coordinator with responsibility for checklist completion and other tasks outlined in the agreement with the Office of Local Health Services.
		Approval of the new medical director may be required by the Board of Health and/or County Board of Commissions.
		Employment agreement between the medical director and local health department finalized.
		Job description reviewed and signed.
		Begin credentialing process (CAQH, CHAMPS & Private Insurance) as soon as agreement for new Medical Director is signed to avoid a lapse in payments between outgoing and incoming Medical Directors.
		NPI, SSN, DOB, Medical License #, Board Certification #, DEA #, hire date, CAQH #, Specialty, previous employer billing/credentialing contact Name/Phone Number/Email (for changing CHAMPS or getting CAQH information).
		CAQH credentialing is a priority.
		Update administrative liability carrier and malpractice carrier with new medical director information. Verification of malpractice coverage is required by CAQH and some third party reimbursement companies.
		Verify incoming Medical Director has completed the Medicare Enrollment Application, CMS- 8550. If not, complete.
		Update TransactRX (Medicare Part D).
		Update Medical Director information for all Purchasing Vendors, especially for Vaccine Vendors.
		If medical director is an independent contractor collect their Tax ID Number, for the accounting department.
		Drug Control License ✓ Needed for each distinct site

		<ul style="list-style-type: none"> ✓ Needed if a site dispenses medications that clients take home, excluding free samples. ✓ Family Planning is the program most frequently impacted by this requirement because of dispensing contraceptives. ✓ License is issued by the Michigan Department of Licensing and Regulatory Affairs – Board of Pharmacy ✓ Expires the same date as the professional license it is associated with.
		Billing
		Add end date for affiliation of previous medical director to CHAMPS and add new medical director to CHAMPS Site; add practice NPI, update checklist, add new contacts. Identify who will be making the changes in CHAMPS.
		<p>If the LPHD is a BCBS Provider the following will need to be updated:</p> <p>BCBS will not accept medical director change until new medical director information is entered into CAQH.</p> <p>BCBS Requirements: (from their website)</p> <ul style="list-style-type: none"> ✓ New Practitioner Enrollment Form – or – Practitioner Change Form ✓ State of MI professional license ✓ Type 1 National Provider Identifier ✓ Social Security Number ✓ Tax Identification Number and Internal Revenue Service document identifying TIN and associated payee name (BCBSM/BCN does not accept W-9s) ✓ CAQH number if available <p>New Practitioner Enrollment Form or Practitioner Change Form, and Standard Affiliation Agreement for each BCBS product.</p>
		Complete all change forms for each health plan contracted with by the LPHD for services.
		If a billing clearinghouse is used by the LPHD (i.e., Networks) the medical director may need to be changed.
		<p>PECOS – Medicare Provider Enrollment Chain and Ownership.</p> <p>https://pecos.cms.hhs.gov</p> <p>PECOS supports the Medicare Provider and Supplier enrollment process by allowing registered users to securely and electronically submit and manage Medicare enrollment information. If the LPHD is using this system the medical director will need to be updated to reflect the change.</p>
		Update Standing Orders to reflect new medical director authorization & approval, and provide to new medical director prior to start date.

		<p>First Week of Employment</p> <p>Review checklists, timelines, scheduling, and agreement with MDHHS with new medical director (Health Officer and Coordinator).</p> <p>Arrange for Mentor and Mentoring Agreement (consult with MDHHS and/or MAPPP).</p> <p>Update Emergency Afterhours Contact Lists and emergency preparedness information as appropriate</p> <p>Forward new medical director contact information to the MALPH Office and MAPPP Chair.</p>
		<p>Technology</p> <p>LPHD</p> <ul style="list-style-type: none"> ✓ Electronic Health Record Access ✓ E-Mail Access & other supports ✓ Review pertinent websites: LPHD, County and/or District, MDHHS, MDARD, EGLE
		<p>Logins</p> <ul style="list-style-type: none"> ✓ Michigan Disease Surveillance System (MDSS) –MDHHS website ✓ Michigan Health Alert Network (MIHAN) ✓ Michigan Care Improvement Registry (MCIR) ✓ CDC & National Notifiable Diseases Surveillance System (NNDSS)
		<p>Credentialing</p> <p>Council for Affordable Quality Healthcare (CAQH www.caqh.org) appears to be the most frequently used site for provider credentialing by LPHDs.</p> <ul style="list-style-type: none"> ✓ Define roles within the LPHD who will be making changes in CAQH – establish strong communication between the medical director and the person assigned to handle provider credentialing for LPHD. ✓ Collaborate with other health departments if medical director is serving multiple health jurisdictions ✓ Delete previous medical director from CAQH Site as a provider for your practice site/sites. ✓ Add new medical director to CAQH – be sure and list all practice sites if your health department has multiple practice site ✓ CAQH will need the current malpractice insurance fact sheet. Send the <u>Professional Liability Verification Form (PDF)</u> and the Authorization for <u>Release of Information Form (PDF)</u> to your current insurance carriers. Please note that the Professional Liability Verification form needs to be completed by your carrier and faxed to the number on the form. This is taken from BCBS site.

		One – Two Weeks After Hire
		Clinical
		Change CLIA license information if medical director is serving as Laboratory Director <ul style="list-style-type: none"> ✓ Notify in writing, include the CLIA number, the name and address of the facility the old director/new director and the effective date of the change. This notification must be signed by the new laboratory director (medical director if serving as laboratory director). Notification can be e-mailed to BCHS-CLIA @michigan.gov or faxed with a cover page to 517-241-3354. ✓ https://www.michigan.gov/lara/0,4601,7-154-89334_63294_72971_78688-404109--,00.html
		Send notice out to medical community announcing new LPHD medical director.
		Establish and implement plan for back-up coverage
		Investigate hospital privileges
		Pharmacy
		Vaccine ordering requires the Drug Control License of the Medical Director – assure staff who order vaccine are using the correct Drug Control License of MD
		Change Medical Director in E-prescribe information associated with HER.
		Collaborative Practice Agreement
		Many health plans are requiring a Collaborative Practice Agreement between medical directors and mid-levels. The agreements will need to be updated to reflect the new medical director. <ul style="list-style-type: none"> ✓ BCBS is requiring Collaborative Practice Agreements ✓ Having a Collaborative Practice Agreement is a minimum performance indicator for Adolescent Health Centers ✓ Standing Orders signed by the Medical Director have been used as a substitute for a collaborative practice agreement for many public health programs. Medicaid billings for mid-levels requires a collaborative practice agreement. Note: This is only if the NP is billing for services. https://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_42542_42543_42546_42553-87572--,00.html pg. 1607
		Contacts
		Establish Medical Society Contacts
		Facilitate coordination with Community and Hospital Liaisons
		Establish contact with regional/state epidemiologists and their organizations
		Arrange in-person and/or teleconference with MDHHS and Program Managers
		Arrange onsite visits with other local health departments and medical directors.
		Provide MDHHS, MDARD, EGLE and other pertinent program managers contact information.

		One – Two Months after Employment
		Training
		NIMS Training
		<p>Immunization 6 hours required annually per Immunization Minimum Performance Standards</p> <p>✓ Additional CMEs are not required if the LPHD provides international travel vaccine</p>
		<p>MPR 8.5.4 states family planning programs must provide medical services under the supervision of a physician with special training or experience in family planning (42 CFR59.5Fa (b)(6). There is no specific language about what constitutes “special training or experience”. Newly hired medical directors overseeing family planning programs should reach out to their MDHHS Family Planning Consultant and explore the Family Planning National Training Center. https://www.fpntc.org</p>

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