

# Minimum Requirements for Credentialing

---

Eligibility for participation is based on the following minimum requirements:

1. A current, valid unrestricted license/certification or authorization to practice.
2. No restrictions on licensure, registration/certification or authorization to practice, including but not limited to, probationary status, chaperon requirements or prescribing limitations.
3. A current, valid, unrestricted DEA Registration **or** CDS Certificate (for prescribing applicants).
4. Clinical privileges at a FCH contracted hospital **or** an In Patient Covering (if applicable).
  - Primary Care Attending Coverage: Each primary care practitioner/group is required to assure a 365 days, 24 hour inpatient coverage schedule for patients requiring hospitalization from their practice/group or an identified Hospitalists Program. All physicians providing call coverage for inpatients need to have privileges in good standing at the appropriate institution.
  - Specialty Consultation and Attending Coverage: Each subspecialist/group will assure that subspecialty consultation is available for all patients at identified institutions by specialists who have privileges in good standing. This subspecialty service will be available 365 day a year and 24 hours a day.
5. Graduation from a medical school that is approved by the State Licensing Board or other school that is appropriate to the provider specialty.
6. Completion of a residency program which meets the standards of the Accreditation Committee on Graduate Medical Education or the Council on Post Doctoral Training of the American Osteopathic Association (AOA).
7. Providers practicing in Washington must be board certified in practice specialty or must become board certified within five years of completion of residency training (if applicable).
8. Work history for preceding five years. Please account for any gaps of six months or more.
9. Current malpractice coverage with limits of one million (\$1,000,000) per incident, three million (\$3,000,000) per aggregate.
  - **Self Insured Providers** must provide evidence of “committed assets” in an amount equivalent to a one million (\$1,000,000) per incident and three million (\$3,000,000) per aggregate general comprehensive liability policy. By “committed assets” FCH means that assets that are dedicated solely to the purpose of payment of professional liability claims incurred by any of the Clinic and/or Provider(s), which cannot be accessed by general creditors or any of the Provider(s), and which can reasonably be converted to cash for the payment of professional liability claims resulting in whole or in part from the negligent act or omission of any of the Provider(s) occurring during any period in which the Clinic and/or the Provider(s) is contracted with FCHN.
  - **Doctor of Chiropractic Medicine** - Malpractice coverage limits of two hundred thousand (\$200,000) per incident, six hundred thousand (\$600,000) per aggregate.
10. Proof of professional liability coverage for the past five years, including address and policy numbers.
11. Also reference: *Additional Requirements for Allied HealthCare Providers*
12. If you are practicing in a home base or non traditional setting, please contact the Credentialing Department at (800) 231-6935 Ext. 2106 for additional requirements.