

Workers' Comp

The Art of Creating a Physician Peer Review Panel: Contracting and Training

March 11, 2019 4 MIN READ

Jackie Payne

This article is the second in a two-part series about best practices for building a physician peer review panel. Click here to read the first article in the series, The Art of Creating a Physician Peer Review Panel, Part I. In part I of the series, we discussed the first steps of developing a physician peer review panel including determining candidates for the panel and some basic steps to credentialing, including validating state licenses, experience, knowledge and other factors. Some organizations outsource this process while others perform what is referred to as a primary source verification, meaning the organization is responsible for verifying the credentials of the provider. Having limited or no malpractice issues, and no sanctions against ones medical-practicing license are just a few parameters required to meet and pass the credentialing process. Furthermore, as part of the credentialing process, it's important to verify all of the credentials of the reviewer. Documentations to support the validity of the qualifications of the reviewer can include a curriculum vitae—or CV; an application showing experience, training, education; copies of licenses (which are then primary source verified); DEA licenses, copies of insurance policies, etc. Additionally, other items that may be requested include copies of government issued IDs, the candidate to appear in front of a notary public or other identity processes. Once the candidate has passed the credentialing process, the next steps are contracting and training.

Contracting the Ideal Physician Advisor

Contracting is vital to ensure that both the physician in candidacy and the hiring company agree to the essential elements of the relationship. Many organizations have different philosophies surrounding contracting that directs the need for specific terms and conditions. A few of these are:

- length of the agreement
- scope of services to be performed
- reimbursements for the services
- terms and conditions
- service level agreement terms

- security requirements
- indemnification

Tracking the requirements and documentation that fall under these categories can get cumbersome. For managed care companies with their own physician advisor and peer review panel, having a <u>medical management software solution</u> that supports tracking of these requirements can create a simple and more <u>seamless way to produce documentation</u> for auditing purposes, and can track re-credentialing activities. Additionally, this software platform is helpful when it comes to <u>URAC</u> and client audits of the peer review files. It streamlines the process and can help shorten the time that is required for the audit to be conducted.

Learn more about Mitchell's ReviewStat medical management software solution.

Learn More

Training the Credentialed Candidate and Tips for Monitoring Performance

Once the physician is under contract, it's time to begin the training process. This can be done through effective communication and education of the respective parties. In addition to having your organization's medical personnel train the contracted physician on accreditation guidelines, required components of the review and the client specific requirements, the organization's medical director should also be involved in the interview process, establishing a training program, and providing additional documentation related to specific treatments.

We have found that it is quite efficient and successful to train physician advisors using a method that provides structured follow-up monitoring and mentoring.

In Mitchell's experience and through years of experimentation with the development of physician advisors, we have found that it is quite efficient and successful to train physician advisors using a method that provides structured follow-up monitoring and mentoring. Ongoing training and communication with the medical director and support staff is critical in helping deliver consistent value and quality services to clients. The two-way dialogue between physician and medical director helps establish a rapport to support candid conversations and constructive feedback which helps maintain the level of quality; and also allows visibility into whether or not the physician has a continuing desire to remain on the panel.

The two-way dialogue between physician and medical director helps establish a rapport to support candid conversations and constructive feedback which helps maintain the level of quality.

There are many tools we suggest exploring from a training and communication perspective. Integrating newsletters, individual quality review feedback, webinar sessions and round table participation are great ways to maintain engagement between all parties while increasing two-way communication. This also provides an opportunity to keep the physician advisor panel up to date on recent regulatory changes and treatment trends. In order to develop an effective physician peer review panel, your organization should follow a comprehensive strategy that starts at candidate selection and moves through to training and implementation. The success of the physician peer review panel hinges upon the definition of the reviewer's role, the selection of the proper candidates, contracting, and the ongoing training process. The process is ultimately a hands-on experience in which expectations are communicated clearly and the execution of those requirements are verified regularly. When it's working well, it is very gratifying to participating physicians, clients, and ultimately those directly affected by the outcome: the injured worker.

For more content about medical management, visit the links below:

https://www.mpower.mitchell.com/the-art-of-creating-a-physician-peer-review-panel-part-1/https://www.mpower.mitchell.com/technology-data-enhance-medical-management/https://www.mpower.mitchell.com/urac-accreditation-california-sb1160/



©2022 Enlyte Group, LLC.

mitchell | genex | coventry