



Catalyst CVO Credentials Verification Services

Verification Type	Initial	Temporary	Re-credentialing
-------------------	---------	-----------	------------------

Relevant Training

Medical School	Yes	Yes	No
Residency	Yes	May use AMA or AOA Profile	No
Fellowship	Yes	Yes	If completed in the past two years
Teaching Appointment	Yes	Yes	If completed in the past two years
Board Certification	Yes	Yes	Yes

Verification Type	Initial	Temporary	Re-credentialing
-------------------	---------	-----------	------------------

Relevant Experience

Hospital Affiliations	Yes	Yes	Past two years
Professional Work Experience	Past 10 years	As available	Past two years
Military Experience	Yes	As available	Past two years
CV/Work History	Yes	Yes	If additional employment is present

Verification Type	Initial	Temporary	Re-credentialing
-------------------	---------	-----------	------------------

License and Registration

DEA Registration (NTIS database)	Yes	Yes	Yes
Primary State License <small>(Client's State)</small>	Yes	Yes	Yes
Other State Licenses	Yes	Yes	Yes
State Controlled Substance	Yes	Yes	Yes

Verification Type	Initial	Temporary	Re-credentialing
-------------------	---------	-----------	------------------

Peer References

Professional References	3	As available	3
-------------------------	---	--------------	---

Verification Type	Initial	Temporary	Re-credentialing
-------------------	---------	-----------	------------------

Other Verifications

Professional Claims History	Past 5 years	Past 5 years	Past 5 years
Verification of Current and Continuous Insurance (Last 5 years)	Yes	Yes	Yes
NPDB Query	Yes	Yes	Yes
OIG Medicare/Medicaid Exclusions List (State and Federal)	Yes	Yes	Yes
SAM/OFAC Exclusions List	Yes	Yes	Yes

Statement of Health

Statement of Health: An attestation form is sent to the examining physician asking to certify that the applicant is capable of safely and competently providing patient services. Date of last examination is requested as well. *(This is only if requested)*

Monitoring Services between Credentialing Processes

Updating and Verifying Expiring Documents

Primary State License	Yes
DEA Registration/State Controlled Substance	Yes
Insurance Policy	Yes
Board Certifications	Yes
BLS, ACLS, PALS	Yes

Monitoring Discipline and Sanction Reports

Primary State Licensing Board	Yes
Medicare/50 state Medicaid sanctions, OIG, SAM, OFAC, and 50 state board monitoring <i>(monthly or as needed)</i>	Yes