

Are You Participating in NAMSS PASS™?

By Amy Wade, CPMSM, CPCS

As you are reading this article, we hope that you have become familiar with NAMSS Practitioner Affiliation Sharing Source™ (PASS) and have started participating in this exciting repository of practitioners' affiliation history. If you are not yet a participant, we hope that this article will provide answers to some of your questions, which probably are similar to the questions we have heard expressed at various meetings where we have presented NAMSS PASS™.

First, we are so excited that NAMSS PASS™ has become a reality, as this database has been a dream and a goal in the NAMSS strategic plan for several years. The number of users continues to increase toward our ultimate goal of getting every hospital, surgery center, group medical practice, health plan and other related healthcare entity (HCE) to participate. The more everyone participates, the more comprehensive the database will be for the end users: medical services professionals (MSPs). How awesome to be able to go to **one** location (NAMSS PASS™) and do a primary source verification and obtain an affiliation history and gap analysis on a physician applying for medical staff membership and privileges at your facility. Before NAMSS PASS™, it could sometimes take an MSP days and even weeks to receive an affiliation

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address competencies. NAMSS PASS™ may provide a letter of good standing (according to the Health Care Quality Improvement Act (HCQIA) definition) and an affiliation history and gap analysis, but it does not provide competency information. With various peer review protections afforded by individual states, NAMSS has not yet accomplished having a national repository to house competency information. However, by providing the verified affiliation history, a gap analysis is available to the MSP, which could potentially lead to a "red flag" that would prompt the MSP to pursue further the issue of competency directly with the primary source hospital. While NAMSS PASS™ verifies the affiliations, MSPs should still obtain competency information by requesting peer reference letters from the practitioner's most recent affiliations.

Another common misconception is that healthcare entities (HCEs) will need to revise their bylaws and create a separate release/

acknowledgement section with language that states the practitioner gives consent for the hospital to retrieve as well as disclose their information as a part of the credentialing and recredentialing process. In other words, you already have their permission and it should already be covered in your medical staff bylaws under your credentialing procedures.

Another question is with regard to the uploading of past practitioners that have left your facility. HCEs are encouraged to upload past practitioners and can even elect to provide a third letter, called the "Perpetual Letter," as an option. The letter provides data that was current at the time of the practitioner leaving your facility, as you obviously cannot attest to what happened after that time. Use this feature when you want to export data from an old/legacy system that is no longer updated. You can upload the file once and will not need to worry about keeping it up to date because the information does not change.

While these are just a few of the questions and/or comments we have heard, I encourage you to visit the [NAMSS website](#) for additional information on NAMSS PASS™. The list of FAQs is very comprehensive and is updated regularly as we hear from you. You can also review a video that discusses the NAMSS PASS™ and other valuable resources on the website. Our goal is to get every healthcare entity (HCE) to participate in this exciting endeavor that is becoming a very valuable resource to all MSPs! ■



NAMSS PASS PRACTITIONER AFFILIATION SHARING SOURCE

verification after mailing, faxing or emailing requests to multiple facilities. By using NAMSS PASS™, the process can become more efficient and cost-effective for MSPs, especially when investigating those practitioners who have a history of practicing for many years and in many different locations.

I would like to address some prevalent misconceptions that have been heard during our presentations at various meetings. One of those is that NAMSS PASS™ will

authorization for physicians to sign before they can participate in NAMSS PASS™. There is no need to revise the bylaws or create a separate signed release/authorization to participate in NAMSS PASS™. The NAMSS PASS™ is a tool to streamline and improve the process of verifying affiliation history; it does not change the information already being shared between organizations. With regard to a release, most application forms already include a release, disclosure and

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