Credentialing/Recredentialing Criteria
Non-Physician HealthCare Practitioner
LICENSED MARRIAGE AND FAMILY THERAPISTS

In order to be able to treat members, the Plan must assure itself that the practitioners affiliating with the Plan are appropriately credentialed. To that end, the following items constitute the credentialing and recredentialing criteria for Licensed Marriage and Family Therapists.

In addition to the requirements of Policies CR-01A and CR-02A, Licensed Marriage and Family Therapists must meet the following specialty-specific credentialing and recredentialing criteria:

1. Have been and continue to be in good standing in the practitioner community. This includes holding a valid current license to practice as a Marriage and Family Therapist and have such license recognized by the State of New York or the appropriate licensing authority, as proof that the practitioner has met all requirements for licensure and demonstrates the ability to render services to the general public.

2. Must meet the requirements set forth in the Education Law with respect to education and experience to be licensed as a Marriage and Family Therapist. This includes, but is not limited to, (a) holding a master's or higher degree in counseling, or its equivalent, with required coursework in mental health counseling theory and practice, assessment, psychopathology, ethical practice and, (b) a supervised internship accepted by the plan.

3. Have appropriate experience and current clinical competence as required by the Plan. This includes but is not limited to having completed at least six (6) years of post-degree clinical practice experience under the supervision of a qualified, licensed Marriage and Family Therapist.

4. Not have been convicted of a felony or crime involving moral turpitude, dishonesty, or false statement, or other acts that may be grounds for suspension or termination of the practitioner's right to practice.

5. All changes in licensure or alleged medical liability involving any member must be reported to the Plan within ten (10) business days of notification to the practitioner.

6. Have sufficient facilities and support staff needed to provide all services that may be required of members for the specialty practiced by the practitioner.

7. Have professional liability insurance coverage of $1,000,000 per occurrence and $3,000,000 aggregate.

8. Be willing to participate in and accept the results of the Utilization Management and Quality Management Programs.

9. The practitioner must authorize the release of information regarding professional history and agree to absolve the Plan and its personnel from any liability associated with the review and/or evaluation of the practitioner's credentials.

10. Have completed and certified the accuracy of the information provided in the application and provide documentation upon request regarding previous and current challenges to licensure, loss

of membership in any professional organization, and previous and current pending medical liability actions.

11. Be able to provide all services that may be required in a timely manner pursuant to agreement for the designated appointment category.
12. Must have 24/7 coverage for patients. Coverage must be provided by another Plan participating practitioner in the same or a similar specialty.
13. The practitioner must be willing to be listed as a participating practitioner in Plan literature.
14. Applicant will submit three (3) references including at least one (1) reference from a department head or direct supervisor.
15. Be in good mental and physical health.