

Credentialing/Recredentialing Criteria Non-Physician HealthCare Practitioner – Licensed Mental Health Counselors

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 will constitute the credentialing/recredentialing criteria for Licensed Mental Health Counselors.

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 Mental Health Counselor 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 Mental Health Counselor. This includes, but is not limited to, 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 a supervised internship.
3. Have appropriate experience and current clinical competence as required by the Plan. This includes but is not limited to having completed at least three thousand (3,000) clock hours of post-degree clinical practice experience providing Mental Health Counseling in a setting acceptable to the New York State Education Department under the supervision of a qualified, licensed mental health professional.
4. Not have been convicted of a felony or crime involving moral turpitude, dishonesty, or false statement, or other acts, which may be grounds for suspension or termination of your rights 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 the services which may be required of members for the specialty practiced by the practitioner.
7. Have \$1,000,000.00 per occurrence/\$3,000,000.00 general aggregate professional liability insurance as required.
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 agrees to absolve the Plan and its personnel from any liability to the practitioner or associate with review and/or evaluation of the practitioner's credentials.
10. Have completed and certified the accuracy of the information provided in the application and provided 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 which 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 a same or 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.