

HEALTHWEST

Practice Guideline

No. 12-003

Prepared by:

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Protocol

Subject: Medical Staff Peer Review

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I. Guideline

Medical Peer Review Process

II. Purpose

To provide an organized mechanism of evaluation/assessment of medical staff to identify opportunities to improve performance or education.

III. Application

Medical (Physicians , Physician Assistants) providers

IV. Definitions

Peer: one who has equal standing with another, similar rank, similar job performance.

Peer Review Process: an evaluation by clinicians of the quality and efficiency of care performed by another practitioner/clinician. It is objective in nature and based on medical necessity, appropriateness and efficiency of services.

V. Protocol

A. The peer review process will be supervised by licensed physicians.

1. Physician Assistants may participate in the process under the auspices of physicians.

2. Peer reviews will be performed in good faith by qualified experts.
- B. The peer review process will occur as a chart review.
1. The chart review criteria will be developed by physicians. This criteria will contain objective evidence questions
 2. These chart reviews will occur on a quarterly basis
 - a. The reviews will involve the last 12 months of services.
 - b. The reviews will be documented on Form # Q 036
 3. Charts will be obtained:
 - a. Thru a random sampling of the SAL list
 - b. Each review session will have 8-10 charts available
- C. Response to the chart review:
1. When NO is checked on the review form, a comment will be included, if appropriate. (some answers are self-evident)
 2. Any review containing NO answers will be forwarded to the reviewed medical person for a response within 60 days, then returned to the Peer Review group for its conclusion (acceptance of explanation or recommendations for further discussion, training, or possible consequences.)
 3. Final review decisions will be supported by rationale based on acceptable medical practices.
 4. Peer Review results will be non-punitive unless/until actions:
 - a. have a serious consequence
 - b. the provider is unwilling to correct errors
 - c. the provider is unwilling to obtain the appropriate education needed to eliminate the error in future treatment decisions.
 5. Persistent failure may result in recommendations to revoke privileges and/or terminate medical providers contract with the agency. If this occurs, the provider may challenge the decision through established procedures.
- D. The process will protect the confidentiality of medical information obtained and used in conducting the review.
- E. The process will follow the peer review statutes of the state of Michigan regarding disclosure of findings.
- F. A quarterly summary report will be made available to the Doctors Workgroup through the Quality Assurance Unit. Any data or summary of data obtained for the purpose of Quality Assurance will not identify the provider.

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