

Title:	Voluntary Resignation and Reinstatement Process (Bylaws Article XI, Section 2)	Page: Page 1 of 4
Policy No:	1 MS 040	Effective Date: 09/28/2018
Approvals	MEC 9/17/2018	DMC Board 9/28/2018

I. SCOPE

DMC Medical Staff members, Corporate Medical Affairs and hospital staff responsible for the credentialing function of medical staff members and allied health professionals.

II. OBJECTIVE

To define a uniform mechanism to process Voluntary Resignations (VR), suspensions and withdrawals for non-compliance with Medical Staff Policies, Bylaws and Rules & Regulations.

III. POLICY

The following shall result in the automatic suspension or withdrawal of clinical privileges or be deemed a voluntary resignation from the Medical Staff and shall not entitle the affected Medical Staff member to the fair hearing and appeal rights specified in the Bylaws, unless otherwise expressly provided.

The CEO of the DMC shall impose the automatic action contemplated under this section following reasonable inquiry and affording the affected Medical Staff member a reasonable opportunity to respond before action is taken.

The affected Medical Staff member shall be informed of the automatic suspension in writing, delivered by personal delivery or U.S. Mail or national courier, which shall set forth the effective date and the reason for the suspension, termination, restriction, or withdrawal.

A. EXPIREABLES

All Medical Staff Members and Allied Health Professionals must maintain and submit **current evidence** of renewed required documentation as defined in MS Policy. Documentation includes but is not limited to:

- Professional License(s) to Practice
- State and Federal Controlled Substance License(s) (where applicable)
- Professional Liability Insurance
- Tuberculosis Evaluation
- Board Certification (where applicable)
- Other Required Certifications (ACLS, ATLS, BLS, PALS, NRP) (where applicable)

Upon expiration of any required items, the practitioner is responsible for promptly submitting current evidence of renewal. The Corporate Medical Affairs Office (CVO) will send two (2) written requests for updated information. The first request shall be sent 30 days prior to expiration. The second and final request shall be sent by certified mail, return receipt requested, on the date of expiration to the physician's preferred mailing address. This letter shall notify the practitioner that if compliance is not achieved within 10 days from the date of the letter, all privileges and/or membership shall be considered voluntarily resigned effective the next JCC meeting. Hospital CMOs, Chiefs of Staff, Departmental Chiefs, SIC's, and site medical staff coordinators will be notified via email that the practitioner may be 'voluntarily resigned' when the second notification is sent. The voluntary resignation (VR) shall proceed through the next series of committee meetings (Credentials, Medical Executive, and Joint Conference (JCC)). If the practitioner submits the requested information prior to the JCC decision, the practitioner shall be removed from the VR list. If the practitioner submits the requested information within 30 days of the Joint Conference Committee (JCC, Board Committee) decision date to VR, they may request reinstatement of membership and privileges without having to reapply. After 30 days, the practitioner will be required to formally reapply for DMC membership and privileges, including payment of the Medical Staff application fee.

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B. MEDICAL STAFF DUES

All Members (Active, Affiliate, and Membership Only Status) must pay annual dues. Members are invoiced for payment of Medical Staff Dues in the 4th quarter of each year. Medical Staff Dues are due January 1st. Two (2) follow up requests for payment are sent, 30 days apart. The third and final request for payment is sent certified mail, return receipt, to the practitioner's preferred mailing address stating that membership and privileges will be considered 'voluntarily resigned' at the next JCC meeting if payment is not received. If the practitioner submits payment within 30 days of the JCC action date, they may request reinstatement of membership and privileges without having to reapply. After 30 days, the practitioner will be required to formally reapply for DMC membership and privileges including payment of the Medical Staff Dues or Application Fee (which ever is greater).

C. REAPPOINTMENT

All practitioners granted privileges and/or membership must apply for reappointment as defined in the DMC medical staff bylaws, policies and procedures. As prescribed in policy, Corporate Medical Affairs office shall send three (3) written requests for information to the practitioner. The third request shall be sent certified mail, return receipt requested. This letter shall notify the practitioner that if compliance is not achieved within 10 days from the date of the letter, all privileges and/or membership shall be considered voluntarily resigned effective the next JCC meeting. The voluntary resignation shall proceed through the next series of committee meetings (Credentials, Medical Executive, JCC) for review and approval. If the practitioner submits the requested information prior to the JCC decision, the practitioner shall be removed from the VR list. If the practitioner submits the requested information within 30 days of the decision date, they may request reinstatement of membership and privileges without having to reapply. After 30 days, the practitioner will be required to formally reapply for DMC membership and privileges including payment of the Medical Staff Application Fee.

The practitioner is required to submit their reappointment application packet within established timeframes. If the practitioner does not submit their reappointment application in a timely manner, there may not be enough time to complete the reappointment process; credentials review, department chief(s) review, committee approval, the practitioner's membership and/or privileges may expire. Those privileges can not be extended and the practitioner holds no membership and/or privileges at the DMC. The reappointment processes will continue and upon positive recommendation from the Department Chief(s) and committees, the practitioner may be reinstated/reappointed.

D. MEDICAL RECORD COMPLIANCE (Per MS policy 1 MS 015)

Practitioners are bound by the MS bylaws, rules and regulations and MS policy related to timely completion of their medical records. Non-compliance may lead to voluntary resignation of membership and privileges. If a practitioner has been voluntarily resigned and completes all their medical records within 30 days of JCC action date, they may request reinstatement of membership and privileges without having to reapply. Temporary reinstatement may be granted by the Office of Medical Affairs when all records are complete. Final reinstatement may be granted by the JCC at the following meeting if no further suspension occurs during that 30 day interval. If any delinquent records are not completed until after 30 days, the practitioner will be required to formally reapply for DMC membership and privileges including payment of the Medical Staff Application Fee.

E. LEAVES OF ABSENCE (LOA)

Per the Medical Staff Bylaws, practitioners on LOA are required to contact Corporate Medical Affairs 45 days prior to LOA expiration to provide notification of one of the following:

- Request for reinstatement/reappointment.
- Request a one (1) year extension of LOA
- Resignation

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The Corporate Medical Affairs office shall send three (3) letters to the practitioner to determine their intentions. The third and final request shall be sent certified mail, return receipt requested. This letter shall notify the practitioner that if a request for reinstatement is not received within 10 days from the date of the letter, all privileges and/or membership shall be considered voluntarily resigned effective the next JCC meeting. The voluntarily resignation shall proceed through the next series of committee meetings (Credentials, Medical Executive, JCC). If the practitioner submits the requested information prior to the JCC decision, the practitioner shall be removed from the VR list, however they still do not hold any membership and/or privileges while their reappointment (return from LOA) process takes place. If the practitioner submits the requested information within 30 days of the JCC VR decision date, they may request reinstatement from LOA /reappointment. After 30 days, the practitioner will be required to formally reapply for DMC membership and privileges which shall include payment of Medical Staff Application Fee.

- F. **Felony Conviction:** The Medical Staff membership and clinical privileges of a Member who has been convicted of a felony shall be automatically withdrawn effective immediately, regardless of whether an appeal is filed. The withdrawal is a permanent administrative action.
- G. **Suspension, Exclusion, Debarment or Sanction under any Federal or State Health Care Agency:** The Medical Staff membership and clinical privileges of a Member who has been excluded or debarred under the Medicare or Medicaid program or by any governmental licensing agency, or convicted of any offense related to health care, or listed by a federal or state agency as debarred, excluded or otherwise ineligible for federal or state program participation shall be automatically withdrawn. The withdrawal shall become effective immediately upon such debarment, exclusion, sanction, conviction or listing, regardless of whether an appeal is filed. Fair hearing and appeal rights shall not apply.
- H. **Required Training:** If the Medical Staff member does not participate in required training, his or her membership on the Medical Staff and clinical privileges shall be automatically suspended until such training is completed.
- I. **Compliance with Emergency Department Coverage Requirements:** In the event a Medical Staff Member fails to comply with the Emergency Department coverage requirements established in the Rules and Regulations Section V, his or her Emergency Department clinical privileges shall be automatically suspended until the SIC/Advisory Committee determines that the clinical privileges may be reinstated.
- J. **Peer Review and Quality Management Issues:** In the event a Medical Staff Member fails to respond to questions about quality, professional competence, or professional conduct from a Department, peer review committee, or other body with jurisdiction over quality issues at the Hospital, the affective Member's clinical privileges will be suspended until all quality responses have been received. Likewise, in the event a Member refuses to submit to a mental, physical, or psychological assessment requested by the MEC, the Member's clinical privileges will be automatically suspended until the assessment has been completed and any requested documentation relating to the assessment has been delivered to the MEC.
- K. **Falsification of Application:** In the event it is determined that a Member has falsified information on his or her application for appointment or reappointment, the clinical privileges of the Member shall be automatically suspended.
- L. **Failure to Comply with Reporting Obligations:** In the event that a Member fails to comply with reporting obligations outlined in the Bylaws, his or her clinical privileges shall be automatically suspended until the matter may be resolved by the MEC.

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- M. Loss of Membership or Clinical Privileges at a Tenet Healthcare Facility: In the event a Member's membership or clinical privileges at another Tenet Healthcare facility are denied, revoked, suspended, or terminated for reasons relating to professional competence or conduct, then the Member's clinical privileges and membership at the Hospital shall be automatically terminated or suspended. Likewise, if a Member resigns or restricts his or her privileges at another Tenet Healthcare facility while under an investigation or in order to avoid an investigation related to professionals competence or conduct at that facility, then the Member's clinical privileges at the Hospital shall be automatically withdrawn. The duration and extent of the automatic suspension, withdrawal, or termination of the Member's membership and clinical privileges at the Hospital shall be the same as the action taken at the other Tenet facility.
- N. All practitioners must cooperate with the Medical Staff Committee process for credentialing and/or investigation processes. Failure or refusal to cooperate with the Medical Staff Committee process for credentialing and/or investigation shall be treated as a voluntary resignation.
- O. Voluntary resignation is not considered a disciplinary action and thus is not reportable to the National Practitioner Data Bank.

IV. PROVISIONS

Voluntary resignations are processed through the DMC Medical Staff Committee Structure; Credentials Committee, Medical Executive Committee and final decision by the DMC Joint Conference Committee.

V. ADMINISTRATIVE RESPONSIBILITY

The Corporate Medical Affairs office is responsible for enforcement of this policy.

APPROVAL

This policy has been approved and is duly authorized by Detroit Medical Center, Children's Hospital of Michigan, Detroit Receiving Hospital, Harper/Hutzel Hospital, Huron Valley-Sinai Hospital, Rehabilitation Institute of Michigan, and Sinai-Grace Hospital. The posting of the policy on the DMC intranet signifies that it is in full force and effect.

KEY Search Words

THIS POLICY: is/has been: (check one)

<input type="checkbox"/>	NEW	<input type="checkbox"/>	REVIEWED	<input checked="" type="checkbox"/>	REVISED*
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CHANGES/REVISIONS: List Changes Here

- Added conditions for Temporary Reinstatement and Final Reinstatement regarding voluntary resignation for delinquent medical records.

Supersedes	September 2017	Next Review Date	September 2020
Origination Date	July 2006	History - Review/Revision Dates	July 2006, July 2009, December 2013, September 2017, September 2018
Related Tenet Policy (ies) #'s			
Name of Committee / Title of person(s) responsible for this policy's review and approval process	Corporate Director, CVO/Corporate Medical Affairs		