

# CORPORATE POLICY

<b>Manual/Library Name:</b> Administrative	<b>No:</b> ADO.06.01
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<b>Policy Title:</b> Monitoring of the Focused Professional Practice Evaluation/Ongoing Professional Practice Evaluation/Peer Review Process (AD 1.03)	<b>Effective Date:</b> 6/15/22
	<b>Previous Versions:</b> 07/30/19, 11/19/15, 09/27/11, 08/01/08, 12/21/06
	<b>Approved By:</b> Executive Leadership Team
	<b>Approval Date:</b> 6/10/22

## I. Scope:

This policy applies to Tenet Healthcare Corporation and its subsidiaries and affiliates other than Conifer Holdings Inc. and its direct and indirect subsidiaries (each, an “Affiliate”), any other entity or organization in which Tenet or an Affiliate owns a direct or indirect equity interest of greater than 50%, and any entity in which an Affiliate either manages or controls the day-to-day operations of the entity (each, a “Tenet Entity”) (collectively, “Tenet”).

## II. Purpose:

The monitoring process is used to define the critical components for Focused Professional Practice Evaluation, Ongoing Professional Practice Evaluation or Peer Review (“FPPE/OPPE/Peer Review”) that contributes to the preservation and improvement of the quality, performance, effectiveness, and efficiency of patient care.

## III. Policy:

All Tenet Entities will have an effective FPPE/OPPE/Peer Review process.

## IV. Procedure:

A. The following critical components will be incorporated into the FPPE/OPPE/Peer Review process:

1. Consistency
2. Confidentiality
3. Timeliness
4. Comprehensiveness
5. Link to the credentialing process
6. Standards based
7. Quality of technical practice
8. Quality of care as compared to peers

B. The FPPE/OPPE/Peer Review process will be in accordance with The Joint Commission, Federal and State Requirements, and in conjunction with the Tenet Entity’s Medical Staff Bylaws.

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C. The FPPE/OPPE/Peer Review process must include a system to evaluate the privilege-specific competence of the practitioner, prevent, detect and resolve problems, and potential problems through routine monitoring by colleagues.

## V. Enforcement:

All employees whose responsibilities are affected by this policy are expected to be familiar with the basic procedures and responsibilities created by this policy. Failure to comply with this policy will be subject to appropriate performance management pursuant to all applicable policies and procedures, up to and including termination. Such performance management may also include modification of compensation, including any merit or discretionary compensation awards, as allowed by applicable law.

## VI. References:

Centers for Medicare and Medicaid Services, Medicare Condition of Participation for Medical Staff, 42 CFR §482.22 (b)

The Joint Commission Standards Medical Staff Standards