

Instructions for the use of the Maryland Hospital Credentialing Application

1. The State of Maryland Hospital Credentialing Application shall be used for the purpose of initial application for all staff, both physician and allied health professionals, applying for privileges at a Maryland hospital.
2. Applicants **must contact** the hospital to which they are applying to obtain this application and any specific instructions or additional forms. Each hospital may have additional requirements, supplements and attestations as determined by its Governing Body, Medical Staff Bylaws or credentialing process, which may be included as part of this application and may be necessary for its completion.
3. All entries must be **legible** and **complete**.
4. The application must be complete. Mark “ Not Applicable” in those areas that are not appropriate for specific training, education or experience.
5. Copies of all requested licenses, documents, or explanations must be submitted with the application.
6. Any page of the application may be copied in order to have sufficient space to provide all requested education, training, employment or liability case information.
7. This application must be reviewed, updated and signed when applying to each hospital for employment, medical staff membership or privileges. Each application must have an **original** signature and be dated **within 10 days of submitting the application**.
8. Each hospital must ensure that there are no statements on the form that are not consistent with the hospital’s medical staff by-laws and rules or other policies and procedures.
9. Although the Maryland law allows for this form to be used by hospitals that perform delegated credentialing for managed care organizations in lieu of the Maryland Insurance Administration Uniform Credentialing Form, please check with each managed care organization to determine if that organization will accept this form.
10. Although JCAHO has reviewed this application and every effort has been made to ensure that this application is compliant with JCAHO standards, each hospital has the responsibility to verify the information provided on the application in accordance with JCAHO standards.

Please Note: The Department of Health and Mental Hygiene will periodically review and update this form whenever necessary to meet licensure, federal certification and accrediting body requirements.