River Valley
Health & Dental Center
471 Hepburn St
Williamsport, PA 17701
(570) 567-5400
www.rivervalleyhealthanddental.org

March 11, 2021

Kimberly Wetherhold
Board Chair
Susquehanna Community Health and Dental Clinic, Inc.
471 Hepburn Street
Williamsport, PA 17701

RE: Reappointment & Initial Credentialing & Privileging:
Lisa McClintock , RPh – Reappointment
Crystal Harrison, PHDHP – Initial
David Uhrik, DDS – Initial
Norma A. Cruz-Luna, MD - Initial

Dear Ms. Wetherhold:

On behalf of the QA/QI Committee, it is our pleasure to recommend approval of the referenced providers for reappointment/initial appointment to the dental/medical staff based on the Committee's review of their applications and the results of the credentialing verification process.

In addition, their requests for medical practice privileges were also reviewed and found suitable for granting the delineation of privileges as requested.

Please do not hesitate to contact me with questions or for further information.

Sincerely,

Kayla Richardson, M.D.
Chairman
QA/QI Committee

Credentialing Process Results Report – Crystal Harrison, PHDHP

Credentialing/Privileging Task	Method of Verification	Results
Initial Credentialing & Privileging	Public Health Hygienist	Date: 03/09/21
LICENSE/REGISTRATION/ CERTIFICATION	www.licensepa.state.pa.us PHDH001199	Issued: 2/27/2021 Expires: 3/31/2023
EDUCATION	Telephonic verification: Transcipt or service	Graduation/Degree Conferred: In file
RELEVANT TRAINING/RESIDENCY		
CURRENT COMPETENCE (Applicable to both credentialing and Privileging) (See Delineation Form for Privileging)	Written Peer recommendations: by prior supervisor /etc. Dental Director review	Recommendation/Verifications in file
HEALTH FITNESS CONFIRMATION	Statement confirmed by Medical Director/	Statement in File
Government issued Picture ID	Copy of original by Center Staff	ID#/Description Photo In file
Immunization and PPD Status	Secondary source/Secondary source Copy of record by Center staff	
DEA registration (as applicable)	Secondary source/Secondary source Original or copy of record by Center staff	N/A
Hospital Admitting Privileges (as applicable)	Secondary source/Secondary source	
Life support Training (as applicable)	Secondary source/Secondary source Original or copy of record by Center staff	Expires 1/31/2023
National Practitioner Data Bank query		Verification in file
OIG Suspension/Debarment	https://exclusions.oig.hhs.gov/	Search noted
Application/Delineation of Privileges	Request by Provider-Peer Review and or performance improvement data	Recommendation Signed/Letter from QA Committee included in file
Board Approval (Applicable to both credentialing and privileging	Board action documented in minutes	
NEXT PRIVILEDGING DATE:		2/2023

Credentialing Process Results Report – Lisa McClintock, RPh

Credentialing/Privileging Task	Method of Verification	Results
Initial Credentialing & Privileging	Pharmacist	Date: 03/09/21
LICENSE/REGISTRATION/ CERTIFICATION	www.licensepa.state.pa.us RP437285	Issued: 10/05/2001 Expires: 9/30/2022
EDUCATION	Telephonic verification: Transcipt or service	Graduation/Degree Conferred: In file
RELEVANT TRAINING/RESIDENCY		
CURRENT COMPETENCE (Applicable to both credentialing and Privileging) (See Delineation Form for Privileging)	Written Peer recommendations: by prior supervisor /etc. Chief Medical Officer review	Recommendation/Verifications in file
HEALTH FITNESS CONFIRMATION	Statement confirmed by Medical Director/	Statement in File
Government issued Picture ID	Copy of original by Center Staff	ID#/Description Photo In file
Immunization and PPD Status	Secondary source/Secondary source Copy of record by Center staff	
DEA registration (as applicable)	Secondary source/Secondary source Original or copy of record by Center staff	N/A
Hospital Admitting Privileges (as applicable)	Secondary source/Secondary source	
Life support Training (as applicable)	Secondary source/Secondary source Original or copy of record by Center staff	Expires 2/28/2023
National Practitioner Data Bank query		Verification in file
OIG Suspension/Debarment	https://exclusions.oig.hhs.gov/	Search noted
Application/Delineation of Privileges	Request by Provider-Peer Review and or performance improvement data	Recommendation Signed/Letter from QA Committee included in file
Board Approval (Applicable to both credentialing and privileging	Board action documented in minutes	
NEXT PRIVILEDGING DATE:		2/2023

Credentialing Process Results Report – David J. Uhrik, Dentist

Credentialing/Privileging Task	Method of Verification	Results
Initial Credentialing & Privileging	Dentist	Date: 03/09/21
LICENSE/REGISTRATION/ CERTIFICATION	www.licensepa.state.pa.us DS031214L	Issued: 03/17/2000 Expires: 3/31/2021 Renewal pending
EDUCATION	Telephonic verification: Transcipt or service	Graduation/Degree Conferred: In file
RELEVANT TRAINING/RESIDENCY		
CURRENT COMPETENCE (Applicable to both credentialing and Privileging) (See Delineation Form for Privileging)	Written Peer recommendations: by prior supervisor /etc. Chief Medical Officer review	Recommendation/Verifications in file
HEALTH FITNESS CONFIRMATION	Statement confirmed by Medical Director/	Statement in File
Government issued Picture ID	Copy of original by Center Staff	ID#/Description Photo In file
Immunization and PPD Status	Secondary source/Secondary source Copy of record by Center staff	
DEA registration (as applicable)	Secondary source/Secondary source Original or copy of record by Center staff	BU3759113 Expires 5/31/2023
Hospital Admitting Privileges (as applicable)	Secondary source/Secondary source	
Life support Training (as applicable)	Secondary source/Secondary source Original or copy of record by Center staff	Recertification Pending
National Practitioner Data Bank query		Verification in file
OIG Suspension/Debarment	https://exclusions.oig.hhs.gov/	Search noted
Application/Delineation of Privileges	Request by Provider-Peer Review and or performance improvement data	Recommendation Signed/Letter from QA Committee included in file
Board Approval (Applicable to both credentialing and privileging	Board action documented in minutes	
NEXT PRIVILEDGING DATE:		2/2023

Credentialing Process Results Report – Norma Cruz Luna, MD

Credentialing/Privileging Task	Method of Verification	Results
Initial Credentialing & Privileging	Psychiatrist	Date: 03/09/21
LICENSE/REGISTRATION/ CERTIFICATION	www.licensepa.state.pa.us MD441743	Issued: 01/10/2011 Expires: 12/31/2022
EDUCATION	Telephonic verification: Transcipt or service	Graduation/Degree Conferred: AMA Profile
RELEVANT TRAINING/RESIDENCY		
CURRENT COMPETENCE (Applicable to both credentialing and Privileging) (See Delineation Form for Privileging)	Written Peer recommendations: by prior supervisor /etc. Chief Medical Officer review	Recommendation/Verifications in file
HEALTH FITNESS CONFIRMATION	Statement confirmed by Medical Director/	Statement in File
Government issued Picture ID	Copy of original by Center Staff	ID#/Description Photo In file
Immunization and PPD Status	Secondary source/Secondary source Copy of record by Center staff	
DEA registration (as applicable)	Secondary source/Secondary source Original or copy of record by Center staff	FC2481238 Expires 8/31/2022
Hospital Admitting Privileges (as applicable)	Secondary source/Secondary source	
Life support Training (as applicable)	Secondary source/Secondary source Original or copy of record by Center staff	Expires 08/2022
National Practitioner Data Bank query		Verification in file
OIG Suspension/Debarment	https://exclusions.oig.hhs.gov/	Search noted
Application/Delineation of Privileges	Request by Provider-Peer Review and or performance improvement data	Recommendation Signed/Letter from QA Committee included in file
Board Approval (Applicable to both credentialing and privileging	Board action documented in minutes	
NEXT PRIVILEDGING DATE:		2/2023