Council on Credentialing in Pharmacy
Definition of Pharmacy Credentials

The Council on Credentialing in Pharmacy (CCP) provides leadership, guidance, public information, and coordination for the pharmacy profession’s credentialing programs. CCP is working to address this mission by educating pharmacists, other health professionals, payers, employers, and the public about pharmacy’s credentialing programs and their value in enhancing the quality of pharmacy practice and patient care. The primary purpose of this document is to serve as a resource to define pharmacy credentials.

There is often confusion regarding terms used to describe accreditation, certificate, certified, continuing education, credentialing, credentials, privileging, and so forth. Therefore, this document provides definitions for terms commonly used by CCP:

- **Credential**: a) a designation that indicates qualification in a subject or area, or b) documentation of professional qualifications. Academic degrees, state pharmacist licenses, residency certificates, and certifications by credentialing boards are all examples of credentials.
- **Credentialing**: a) the process of granting a credential (a designation that indicates qualifications in a subject or area of expertise) by an entity (i.e., a credential-granting entity/organization), or b) the process by which an organization, institution, or payer obtains, verifies, and assesses an individual’s qualifications to provide a defined service (e.g., a patient care service).
- **Digital badge**: a verifiable, digital representation in an easily shareable format of a physical credential that recognizes proof of achievement. Successful completion of an Accreditation Council for Pharmacy Education (ACPE)-accredited certificate program, certification (such as Board of Pharmacy Specialties (BPS)/board certification), or successful completion of an exam or degree are examples. Digital badges include metadata that may describe how the badge was earned, the date it was earned, who issued it and what the badge represents. Digital badges are a representation of a credential and not a credential unto themselves.
- **Privileging**: The process by which a health care organization, having reviewed an individual health care practitioner’s credentials and performance, and found them to be satisfactory, authorizes that practitioner to perform a specific scope of patient care services within the organization.
- **Certificate**: A document (e.g., letter, card, digital image, or other medium) attesting to the successful completion of the requirements of a credentialing program.¹
- **Certification**: A voluntary, nongovernmental process by which an individual is determined by a certification body (an independent third party that handles a certification process) to have successfully completed the requirements of a certification program and who may be identified to the public and other stakeholders as a certificant. Some regulatory bodies use voluntary certification programs to meet licensure or registration requirements.¹
- **Certificate Program/Certificate Training Program**: A non-degree-granting program that provides instruction and training to aid participants in acquiring specific knowledge, skills, and/or competencies associated with intended outcomes. When the certificate program includes an assessment of learning, it is known as an assessment-based certificate program.¹ In pharmacy, the Accreditation Council for Pharmacy Education further defines certificate programs as “structured and systematic postgraduate educational experiences for pharmacists and technicians that are

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generally smaller in magnitude and shorter in time than degree programs, and that impart knowledge, skills, attitudes, and performance behaviors to meet specific pharmacy practice objectives.”

The difference between a certification and certificate program is outlined later in the document.

- Microcredentialing: 1. noun: The formal recognition awarded to an individual who has demonstrated attainment of a narrow (or specific or limited) scope of knowledge, skills, or abilities. The scope of the microcredential can be as granular as a single skill or competency. 2. verb: To recognize an individual who has demonstrated attainment of a narrow (or specific or limited) scope of knowledge, skills, or competencies.

**Purpose of Credentials**
Credentials serve to document the knowledge, skills, and experience of pharmacists and are part of a comprehensive professional portfolio that includes professional education, licensure, formal post-licensure training, practice experience, and certification. A credential may be granted after verification of competence in an area of study, including an academic degree, license to practice pharmacy, postgraduate training certificate, or evidence of certification. To ensure optimal patient outcomes, specific post-licensure credentials are required of some pharmacists based on the complexity of the care they provide and/or to obtain specific patient care privileges.

**Certification**
There are important differences between “certificates” and “certifications”—those distinctions include but are not limited to the following:

- The content of a professional/personnel certification program is based on knowledge, skills, or competencies an individual is required to demonstrate for effective performance of an occupational or professional role or specific work-related tasks and responsibilities.
- The knowledge, skills, and competencies that are the focus of the certification program are identified through formal study (e.g., job/practice analysis, professional role delineation). Program content is defined by job incumbents and/or employers through the formal job/practice analysis or role delineation process.
- The knowledge, skills, and competencies targeted by the certification program are periodically updated, as needed, based on the findings of a formal study (e.g., job/practice analysis, professional role delineation) to ensure that the certification program continues to reflect current occupational or professional practice.

Many certification programs also undergo accreditation by third parties to assure that best practices in testing and certification are utilized.

**Certificate Program/Continuing Education**
A Certificate Program is primarily focused on facilitating the accomplishment of intended learning outcomes. Although assessment is an integral part of the certificate program, the primary purpose of

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the program is to provide education and training which supports the accomplishment of the intended learning outcomes. The certificate awarded signifies that participants have completed the required education/training and demonstrated accomplishment of the intended learning outcomes.  

It should be further noted that a certificate of attendance without an assessment does not indicate that competency was assessed or reached, only that the individual was present for the activity.

Continuing education for the profession of pharmacy is a structured educational activity designed or intended to support the continuing professional development of pharmacists and/or pharmacy technicians to maintain and enhance their competence. Continuing Pharmacy Education (CPE) should promote problem-solving and critical thinking and be applicable to the safe practice of pharmacy.  

A statement of credit may be awarded at the completion of a continuing education program, certificate program, or other educational activity. A statement of credit serves only as documentation of successful completion of a CPE activity. It does not confer certification nor provide a credential on its own. Currently, CPE Monitor is the official repository for credit and is used by state boards of pharmacy to ascertain if a pharmacist has met the state’s re-licensure requirements related to continuing education.

An important distinction to note is that certification programs are not accredited by ACPE; however, certification programs are accredited by other 3rd party organizations (i.e., National Commission for Certifying Agencies). ACPE accredits continuing education providers who offer certificate programs and require the following attributes:

- A didactic component such as live seminars or home study internet-based materials.
- A hands-on component such as practice experiences, simulations, and/or activities to assure demonstration of the skill or application of the stated professional competency.
- Formative and summative assessment for each program.

Licensure
Licensure is the term used in the United States to denote that the pharmacist has the minimum competencies necessary to function as a pharmacist and to help assure that the public health, safety, and welfare are reasonably protected. In the US, a license is granted by the state boards of pharmacy to pharmacists who have met predetermined criteria, including graduation from an ACPE-accredited pharmacy program and achieving a passing score on assessments (i.e., North American Pharmacist Licensure Examination [NAPLEX], Multistate Pharmacy Jurisprudence Examination [MPJE]). Licensed pharmacists are granted use of the designation and associated acronym (i.e., Registered Pharmacist or RPh). In some countries outside of the US, pharmacist registration is equivalent to licensure. However, registration in the US generally does not connotate that an individual has demonstrated competence. Registration is a process by which a governmental agency grants a status. For example, several states register pharmacy technicians if they meet certain criteria. The requirements for licensure and registration for pharmacists and pharmacy technicians vary from state to state.

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6 [https://www.acpe-accredit.org/pdf/CPEPoliciesProceduresUpdatedFebruary2023FINAL.pdf](https://www.acpe-accredit.org/pdf/CPEPoliciesProceduresUpdatedFebruary2023FINAL.pdf)
**Process of Credentialing and Privileging**

CCP believes that structured processes provided by employers and payers for the credentialing and privileging of pharmacists should be aligned with those of other health care providers. Credentialing and privileging can contribute to the safe and effective delivery of patient care. The following CCP Guiding Principles are offered to achieve this goal.

1. **Licensure.** Licensure of pharmacists should assure entry-level knowledge, skills, attitudes, and values for the provision of patient-centered care and information regarding medications and their proper use. Post-licensure credentials, training, and experience should build on this foundation.

2. **Granting of Credentials.** To ensure sustained program quality and viability over time, and to protect the public and credential holders, credentials should be established through an efficient and effective profession-wide, consensus-building process. The justification for a credential should be based on demonstrated patient/societal need, anticipated/sustained demand, and the availability of appropriate education and training programs to support attaining and maintaining the credential.

3. **Accreditation of Organizations and Programs.** All organizations that grant credentials should be accredited by an appropriate, recognized national or international accrediting body, when such a body exists. Postgraduate education and training programs that involve structured activities should meet established professional standards and be accredited.7

4. **Assessment.** All postgraduate education, training and other credentialing programs should include assessments that measure the knowledge and skills gained from these programs and/or provide evidence that holders of a credential have achieved the required level of competence. These assessments serve to document and assure ongoing program quality for all stakeholders.

5. **Credential Verification.** For all practice settings, employers and payers should be encouraged to adopt and implement credentialing processes (see definition above) that include credential verification and assessment of a pharmacist’s qualifications to provide patient care services. The credentials required by employers and payers can vary. Credentialing processes for pharmacists should be consistent with those applied to other health care providers. Employers use credentialing processes, including credential verification, to ensure that practitioners possess the required knowledge, skills, and experience to perform patient care services for the organization. Payers require a credentialing process, including credential verification, to enroll providers in their networks for payment.

6. **Privileging.** Due to the variability in complexity of care and increasing differentiation of pharmacy practice, CCP believes that pharmacists—like many other patient care providers—should be expected to participate in institutional/organizational privileging processes. These processes should be aligned with those applied to other health care providers and ensure that the necessary competencies are attained and maintained.

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7. Alignment. As outlined in the “CCP Framework for Credentialing in Pharmacy Practice,”\(^8\) pharmacist credentialing should be aligned with the patient populations served, required competencies, and relevant practice domains.

8. CCP supports planned, coordinated efforts by the pharmacy profession to educate pharmacists, other health professionals, employers, payers, and the public about all credentials held by pharmacists and their value to patients and the health care system.

Adopted by the Council on Credentialing in Pharmacy Washington, D.C.