

POLICY AND PROCEDURE MANUAL

SUBJECT:	ACCOUNTABILITY	Effective Date:	Pages: 2
Pre-delegation	NMRE, NMRE Network Providers	April 25, 2018	
Assessment			
REQUIRED BY	BBA Section: 42 CFR 438.230	Last Review	Past Review
	PIHP Contract Section: Attachment	Date:	Date:
	P7.9.1, Section XV		
	Other:		
Policy: ⊠	Review Cycle: Annual	Responsible	Reviewers:
		Department:	NMRE Board
Procedure: □	Author: Provider Network Manager	Provider Network	of Directors

Definitions

Beneficiary: A person served by the publicly funded behavioral health and substance use disorder system or his/her representative.

CMHSP: Community Mental Health Services Program. For the purposes of this document, a CMHSP member is one or more of the following: AuSable Valley Community Mental Health Authority, Centra Wellness Network, North Country Community Mental Health, Northeast Michigan Community Mental Health Authority, and Northern Lakes Community Mental Health Authority.

Delegation: A formal process by which the organization gives another entity the authority to perform certain functions on its behalf. Although the organization may delegate the authority to perform a function, it may not delegate responsibility for ensuring that the function is performed appropriately.

Delegated Function: A specific PIHP activity that is performed, by contract agreement, by one of its Network Providers. The MDHHS limits the type of activity a PIHP may delegate. The PIHP retains the responsibility for ensuring that the function is performed appropriately.

MDHHS: The Michigan Department of Health and Human Services.

Network Provider: Any provider that receives Medicaid funding directly or indirectly to order, refer, or render covered services as a result of the state's contract with the NMRE, its member CMHSPs, and the Substance Use Disorder provider panel.

Northern Michigan Regional Entity (NMRE) Operations Committee: A committee comprised of the NMRE Chief Executive Officer and the five CEO's/Executive Directors of its Member CMHSPs.

Northern Michigan Regional Entity (NMRE) Quality Oversight Committee: Regional quality improvement committee comprised of NMRE staff and quality leaders from the five Member CMHSPs. Additional Members may be appointed as appropriate, including members from the SUD Provider panel and services beneficiaries.

Purpose

Because the NMRE recognizes that some managed care functions are best performed by Network Providers operating within the communities they serve, it will establish a process to effectively evaluate a Network Provider to perform specific PIHP activities prior to those activities being formally delegated.

Policy

The NMRE will perform a Pre-Delegation Assessment prior to delegating any managed care function to a Network Provider. The agreement between the Network Provider and the NMRE will enumerate which activities will be delegated and their specific expectations, performance standards, and evaluation methods. The NMRE will have final authority to resolve all disputes with Network Providers regarding a delegated function. The NMRE will retain final authority for granting and monitoring any activities that are delegated to Network Providers.

By accepting a PIHP delegated function, the Network Provider agrees to:

- (1) Comply with all applicable federal and state rules, regulations, statutes, including those related to Medicaid;
- (2) Allow the State, CMH, the HHS Inspector General (OIG), the Comptroller General, or their designed to audit, evaluate, and inspect any books, records, contracts, computer or other electronic systems that pertain to any aspect of services and activities performed, or determination of amounts payable under the MHDDS-PIHP contract.
- (3) Make available, for purposes of an audit, evaluation, or inspection, its premises, physical facilities, equipment, books, contracts, computer or electronic systems related to its Medicaid beneficiaries;
 - (a) The right to audit will exist through ten (10) years from the final date of the contract period or from the date of completion of any audit, whichever is later.
 - (b) If the State, CMH, or the HHS Inspector General (OIG) determines that there is a reasonable possibility of fraud or similar risk, the State, CMS, or the HHS Inspector General may inspect, evaluate, and audit the Network Provider at any time.

<u>Approval Signature</u>

NMRE Chief Executive Officer Date

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Procedure

A. Pre-Assessment and Written Agreement

- 1. The delegation of a managed care function will require a Pre-Assessment performed by the PIHP to evaluate the Network Provider's ability to perform the function to be delegated.
- 2. A written agreement between the NMRE and the Network Provider/delegate will include, at a minimum:
 - a. The specific activities to be performed;
 - b. Specific reporting requirements;
 - c. Identification of specific performance criteria;
 - d. Any corrective actions needed based on the Pre-Delegation Assessment;
 - e. Monitoring processes; and
 - f. Provisions for corrective action and/or sanctions, up to an including not granting the delegation.
- 3. The written agreement will be consistent with the requirements of the MDHHS-PIHP Contract and all applicable Federal, State, and local statutes and regulations.
- 4. Dispute resolution will be consistent with the written agreement between the parties.
- 1. Repeat citations will result corrective action, including potential sanctions and/or revocation of the delegation.
- 2. Written evaluations will be reviewed and monitored by QOC.
- 3. Summary evaluation data will be reported to the NMRE Operations Committee and Governing Board.

B. Evaluation

The NMRE's Pre-Delegation Assessment will result in a written evaluation of the Network Provider's compliance with established criteria, historical performance of the function to be delegated, and identification of any corrective actions or improvements expected.

C. Monitoring

The NMRE will monitor Network Providers 'performance with delegated functions annually or as needed, as established in the NMRE "Delegated Functions Monitoring" policy.

4/25/18

Date

Approval Signature

NMRE Chief Executive Officer