



POLICY AND PROCEDURE MANUAL

SUBJECT Service Authorization	ACCOUNTABILITY NMRE and NMRE Network Providers	Effective Date: 01/01/2022	Pages: 2
REQUIRED BY: 42 CFR §438.210(B)(1-2) 42 CFR §438.210(d)(2)(i-ii)	BBA Section: PIHP Contract Section: Schedule A-1(E)(13) Other: Appeal and Grievance Resolution Processes Technical Requirement IV(b)(1)(b-c)	Last Review Date:	Past Review Date:
Policy: <input checked="" type="checkbox"/> Procedure: <input type="checkbox"/>	Review Cycle: Annual Author: Compliance and Access	Responsible Department: Access	Reviewers: Compliance and Access

Definitions

Authorization of Services: The processing of requests for initial and continuing service delivery.

Beneficiary: A person served by the publicly funded behavioral health and substance use disorder system or his/her representative. For the purposes of this policy, the terms “beneficiary” and “member” are used interchangeably.

Code of Federal Regulations (CFR): The codification of the general and permanent rules published in the Federal Register by the executive departments and agencies of the Federal Government. It is divided into 50 titles that represent broad areas subject to Federal regulation

Community Mental Health Services Program (CMHSP): 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.

MDHHS: 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.

Prepaid Inpatient Health Plan (PIHP): One of ten organizations in Michigan responsible for managing Medicaid services related to behavioral health, development disabilities, and substance use.

SUD Provider Network: Refers to a Substance Use Disorder Provider that is directly under contract with the NMRE to provide services and/or supports.

Purpose

The purpose of this policy is to ensure that Members and providers of Substance Use Disorder (SUD) services and behavioral health services funded in whole or in part by Northern Michigan Regional Entity (NMRE) receive timely authorization decisions and timely notification of delay in the event of a decision that adversely impacts a Medicaid beneficiary.

Policy

- 1) The NMRE will implement a standardized interrater reliability process that includes standardized test case scenarios and reviewing the performance of each individual authorization decision-maker.
- 2) Staff making authorization decisions will have their credentials readily available in the authorization system.
- 3) Standard service authorization decisions will be completed within 14 calendar days from the date of receipt of a standard request for services, with a possible extension of up to 14 additional calendar days if an extension is granted.
- 4) If the NMRE extends the review of the service authorization timeframe NOT at the request of the Member, the NMRE must:
 - a) Make reasonable efforts to give the Member same day oral notice of the delay;
 - b) Within 2 calendar days, provide the Member with written notice of the reason for the decision to extend the timeframe and inform the Member of their right to file a grievance if they disagree with the decision; and
 - c) Issue and carry out its determination as expeditiously as the Member's health condition requires and not later than the required date.
- 5) Expedited authorization decisions will be completed within 72 hours. In the event of an extension, a same day oral notice will be provided to the Member and a written notice will be sent to the Member within 2 calendar days.
- 6) The NMRE will monitor CMHSPs to ensure timely authorization and that authorization decision-makers have appropriate credentials.
- 7) The NMRE's Utilization Management (UM) staff will sign the Utilization Management acknowledgement attestation affirming that the UM Program and Protocol is not structured to provide compensation or incentives to staff making authorization decisions.

Approval Signature



NMRE Chief Executive Officer

11/17/21

Date

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Procedure

A. For Substance Use Disorder (SUD) Services Providers:

Establish standardized test case scenarios to review the performance of each individual authorization decision-maker, taking corrective action when appropriate and using the overall results to conduct targeted training and update policies and process, as necessary, to improve the consistency of authorization decision-making.

B. For Community Mental Health Services Programs (CMHSP):

The CMHSPs are responsible for implementing standardized case scenarios to review the performance of each individual authorization decision-maker, taking corrective action when appropriate and using the overall interrater reliability results to conduct targeted training and update policies and processes, as necessary, to improve the consistency of authorization decision-making.

Approval Signature



NMRE Chief Executive Officer

11/17/21

Date