



POLICY AND PROCEDURE MANUAL

SUBJECT Access System	ACCOUNTABILITY NMRE, NMER Provider Network	Effective Date: March 26, 2014	Pages: 2
REQUIRED BY	BBA Section: PIHP Contract Section: P4.1.1, "Access System Standards" Other:	Last Review Date: July 19, 2019	Past Review Date: May 16, 2016
Policy: <input checked="" type="checkbox"/> Procedure: <input type="checkbox"/>	Review Cycle: Annual Author: NMRE CEO	Responsible Department: Provider Network	Reviewers: NMRE Operations

Definitions

Access: The entry point to the Prepaid Inpatient Health Plan (PIHP), sometimes called an "access center," where Medicaid beneficiaries call or go to request behavioral health.

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

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): The PIHP for Region 2, the 21-counties located in Michigan's northern lower peninsula.

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.

Purpose

The purpose is to ensure the Northern Michigan Regional Entity (NMRE) and its Network Providers maintain adequate and efficient access to appropriate care to mental health, intellectual/developmental disabilities, and substance use disorder services beneficiaries.

Policy

The NMRE will ensure its access system and the access systems of its Network Providers function not only as the front doors for obtaining services but that they provide an opportunity for beneficiaries

with perceived problems resulting from trauma, crisis, or problems with functioning to be heard, understood and provided with options. The Access System will be available and accessible to all individuals on a telephone and a walk-in basis. Access will be welcoming, accepting, and helpful to beneficiaries.

Access assistance will be available 24 hours per day, seven days per week. All access processes, whether delegated or retained, will be consistent with the MDHHS-PIHP contract. Access timeliness will be consistent with the standards established in the contract. The access system will authorize services based on medical necessity.

The access system will ensure that the referral of beneficiaries with co-occurring mental illness and substance use disorders to Network Providers will comply with confidentiality requirements of 42 CFR.

The Access Center unit or function will operate minimally eight hours daily, Monday through Friday, except for holidays.

Approval Signature



NMRE Chief Executive Officer

7/19/19

Date