

POLICIES AND PROCEDURE MANUAL

Chapter:	Quality		
Title:	CMHSP Participant Monitoring & Oversight Procedure		
Policy: <input type="checkbox"/>	Review Cycle: Biennial	Adopted Date: 5.18.15	Related Policies: Monitoring & Oversight Policy
Procedure: <input checked="" type="checkbox"/>	Author: Chief Compliance & Quality Officer, Quality Improvement Council	Review Date: 03.04.2025	
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Purpose

The purpose of this procedure is to guide Mid-State Health Network (MSHN) in the process for conducting on site monitoring and oversight of the Provider Network to ensure compliance with federal and state regulations, and to establish a standardized procedure for conducting reviews.

Procedure

In accordance with the MSHN Monitoring and Oversight Policy, MSHN will review the Community Mental Health Service Program (CMHSP) Provider Network.

- A. A monitoring schedule will be developed yearly and distributed to the CMHSP's according to the Monitoring and Oversight Policy.
- B. At least 30 days prior to the scheduled review, MSHN will send out review information to allow the CMHSP Provider Network sufficient time to prepare and to provide documentation prior to the review. The information will include all MSHN monitoring tools and guidance for preparing for the review.
- C. At least fifteen (15) business days prior to the review, MSHN will send the following list of Medicaid cases selected for review throughout the review cycle, that will include:
 1. Michigan Mission Based Performance Indicator System (MMBPIS)
 2. Critical Incidents/Sentinel Events
 3. Grievance & Appeal Selection
 4. Provider Network Selection
 5. BHTEDS/Encounters Selection
 6. Consumer Records
- D. The review process will include, at minimum, the following areas:
 1. All delegated managed care functions
 2. Consumer records
 3. Staff credentials and qualifications/training
 4. Program specific requirements
 5. Provider network contracts and network adequacy Adverse Benefit Determinations,
 6. Grievances and Appeals
 7. MMBPIS
 8. Behavioral Health-Treatment Episode Data Set (BH-TEDS) and Encounters
 9. Critical Incident Reporting System

An optional entrance conference will be offered to the CMHSP. The entrance conference will consist of a review of materials that will be reviewed.

An exit conference will be scheduled at the end of the review to summarize the preliminary results of the review. CMHSPs will be given seven calendar days after the exit conference to provide additional information prior to MSHN finalizing the review.

In accordance with the Monitoring and Oversight Policy, MSHN will provide the CMHSP a written report that includes the results of the review within 30 days of the conclusion.

A survey will be sent to the CMHSP within 30 days of completion to allow feedback regarding the review to ensure MSHN provides an opportunity for continuous quality improvement.

Applies to

- All Mid-State Health Network Staff
- Selected MSHN Staff, as follows:
 - MSHN’s CMHSP Participants: Policy Only Policy and Procedure
 - Other: Sub-contract Providers

Definitions

BH-TEDS: Behavioral Health-Treatment Episode Data Set
CMHSP: Community Mental Health Service Program
MDHHS: Michigan Department of Health & Human Service
MMBPIS: Michigan Mission-Based Performance Indicator System
MSHN: Mid-State Health Network
Provider Network: refers to MSHN CMHSP Participants and SUD providers directly under contract with the MSHN PIHP to provide/arrange for behavioral health services and/or supports. Services and supports may be provided through direct operations or through the CMHSP subcontract arrangements.

Other Related Materials

References/Legal Authority

The Code of Federal Regulations (CFRs)
 PIHP Managed Care Administrative Delegations made to the CMHSP
 PIHP/CMHSP Contract
 PIHP Policies, Standards and Protocols, including both MDHHS and PIHP Practice Guidelines
 Medicaid Provider Manual
 MDHHS/PIHP Contract
 Federal Procurement Guidelines (The Office of Federal Procurement Policy (OFPP) - Office of Management and Budget

Change Log:

Date of Change	Description of Change	Responsible Party
05.18.2015	New Policy	Chief Compliance Officer
02.2016	Annual Review	Director of Compliance, Customer Service & Quality
03.2017	Annual Review	Director of Compliance, Customer Service & Quality
03.2018	Annual Review	Director of Compliance, Customer Service & Quality
03.2019	Annual Review Added the tools to related documents	Director of Compliance, Customer Service & Quality
04.2020	Updated based on changes in requirements for waivers, and performance measurement oversight	Director of Compliance, Customer Service & Quality
03.2021	Updated case selection methodology	Director of Provider Network Management Systems
11.2022	Biennial Review	Quality Manager
11.2024	Biennial Review – revised language to be consistent with current process	Compliance Administrator