

POLICIES AND PROCEDURE MANUAL

Chapter:	Quality		
Title:	Monitoring & Oversight of SUD Service Providers Procedure		
Policy: <input type="checkbox"/>	Review Cycle: Biennial	Adopted Date: 01.2016	Related Policies: Monitoring & Oversight Policy
Procedure: <input checked="" type="checkbox"/>	Author: Director of Provider Network Management Systems	Review Date: 03.07.2023	
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Purpose

The purpose of this procedure is to guide Mid-State Health Network (MSHN) in the process for conducting monitoring and oversight of the Substance Use Disorder Service Program (SUDSP) Provider Network to ensure compliance with federal and state regulations.

Procedure

In accordance with the MSHN Monitoring and Oversight Policy, MSHN will conduct reviews of the SUDSP Provider Network.

- A. The SUDSP monitoring schedule will be developed annually and distributed to the SUDSP’s according to the Monitoring and Oversight Policy.
- B. Thirty (30) days prior to the site review, MSHN will send out a review checklist to allow the SUDSP Provider Network sufficient time to prepare and to submit information prior to the review. The checklist will include at a minimum the following:
 - 1. List of agency contacts assigned to applicable site review areas
 - 2. List of current contracts grouped by contract type (e.g. Independent Clinicians, Prevention Providers, Subcontracts, etc.)
 - 3. Description of Critical Incident and/or Sentinel Event Review and Submission Process including root cause analysis as applicable.
 - 4. Agency Policy Regarding subcontracts (if applicable)
 - 5. Copy of Compliance Plan (if different than the MSHN Compliance Plan)
 - 6. List of Adverse Benefit Determination Notices, Grievance and Appeal case files to ensure compliance.
 - 7. List of Policies & Procedures
- C. List of MOU’s (e.g. Referral Agreements) Fifteen (15) business days prior to the review, MSHN will send a list of files selected for review per facility/SUD license that include (treatment providers only):
 - 1. Michigan Mission Based Performance Indicator System (MMBPIS) Selection –Performance Indicators (min.2-max.8) *Note:* Selection will include a review of two records for all indicators; however, one record may be applicable for more than one indicator.
 - 2. Critical Incidents Selection (Residential) – Critical Incidents (min.2- max.8)
 - 3. Adverse Benefit Determination (ABD) Notice Selection – ABD (min.2-max.8)
 - 4. Grievance & Appeal Selection – G&A (min.2-max.8)
 - 5. Chart Review – Selection based on charts selected above. Additional charts may be selected to ensure a sufficient sample of all programs and chart areas will be reviewed. (e.g. MAT, WSS, Case Management, Peer Supports, Detox, Residential)
 - 6. Staff Credentialing and Training

The review will consist of utilizing the following review tools:

Treatment Programs

1. Program Specific – Review of the standards specific to programs offered by the provider.
2. Delegated Managed Care Functions – Review of the delegated managed care functions
3. Chart Review – Review of screening, assessment, individualized treatment plan, enrollee rights and clinical documentation;
4. Staff Training - Review of staff training documentation.
5. Staff Credentialing– Review of the credentialing and re-credentialing files.
6. Adverse Benefit Determination, Grievance and Appeal– Tool
7. Subrecipient Financial review

Prevention Programs

1. Prevention Program Tool:
 - a. Review of needs assessment data used to develop prevention priorities.
 - b. Review of activity sign-in sheets and any other evaluation data collected (i.e. pre/post-test, consumer satisfaction surveys, follow-up surveys)
 - c. Review of minutes for community meetings.
 - d. Review of Research you are basing your prevention activities on, and how you are providing programming based on fidelity.
 - e. Required units of service review
 - f. Review that services match the annual plan
 - g. Review of accuracy and timeliness of MPDS entry.
 - h. Review of any materials produced paid in full or part with Mid-State Health Network funding.
 - i. Staff Training & Credentialing – Review of the primary staff qualifications and annual training
2. SUDSP Corrective Action Plan
3. Group and Coalition Observation Review

Subrecipient Financial review *Note: Evidence listed on tools are examples of possible evidence – other evidence may be acceptable.* An optional pre-review conference will be offered to the provider. The conference will consist of a review of the materials that will be used during the review process.

An exit conference will be scheduled at the end of the review to discuss a summary of the results of the review.

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

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

Applies to

- All Mid-State Health Network Staff
- Selected MSHN Staff, as follows:
 - MSHN CMHSP Participants: Policy Only Policy and Procedure
- Other: Substance Use Disorder Sub-Contracted Providers

Definitions

CIRS: Critical Incident Reporting System

LARA: Licensing and Regulatory Affairs

MDHHS: Michigan Department of Health & Human Service

MMBPIS: Michigan Mission-Based Performance Indicator System

MOU: Memorandum of Understanding

MPDS: Michigan Prevention Data System

MSHN: Mid-State Health Network

SUD: Substance Use Disorder

SUDSP: Substance Use Disorder Service Program

Other Related Materials

References/Legal Authority

- The Code of Federal Regulations (CFRs),
- PIHP managed care administrative delegations made to the SUDSP
- PIHP/SUDSP contract
- PIHP policies, standards, and protocols, including both MDHHS and PIHP ‘practice guidelines.
- Medicaid Provider Manual
- MDHHS/PIHPContract
- Federal Procurement Guidelines (The Office of Federal Procurement Policy (OFPP) – Office of Management and Budget
- MSHN SUD Provider Manual
- LARA SUD Program Rules

Change Log:

Date of Change	Description of Change	Responsible Party
01.2016	New Procedure for SUDSP Site Reviews	Director of Provider Network Mgmt. Systems
03.20.17	Annual Review	Director of Provider Network Mgmt. Systems
03.2018	Annual Review	Director of Compliance, Customer Services & Quality
03.2019	Annual Review-Added financial monitoring language	Quality Manager
04.2020	Inclusion of required documentation for oversight	Quality Manager
11.2022	Biennial Review -Removed documents and steps that are no longer used.	Quality Manager