

**Regional Monitoring of Autism Benefit – Applied Behavioral Analysis
Organization Wide Core Standards**

PROVIDER:	DATE OF REVIEW: Click or tap to enter a date.
NAMES OF REVIEWERS:	DATE REPORT SENT TO PROVIDER: Click or tap to enter a date.
CORRECTIVE ACTION REQUIRED: <input type="checkbox"/> Yes <input type="checkbox"/> No	CORRECTIVE ACTION DUE DATE: Click or tap to enter a date.
CORRECTIVE ACTION ACCEPTED: <input type="checkbox"/> Yes <input type="checkbox"/> No	DATE CORRECTIVE ACTION ACCEPTED: Click or tap to enter a date.

Standard	Source	Evidence may include	Score	Evidence Found, Notes, Comments
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General Administration/Staff Qualifications (desk or on-site review)					
4.1	Provider maintains the following insurance policies: <ul style="list-style-type: none"> • Commercial General Liability Insurance \$1M Each Occurrence/\$1M Personal and Advertising Injury, \$2M General Aggregate/\$2M Products/Completed Operations. <i>Note, Contractor must have policy endorsed to add “the SOM, its departments, divisions, offices, commissions, officers, employees, and agents as additional insured using endorsement CG 20 1 0 11 85, or both CG 20 10 12 19 and CG 20 37 12 19</i> • Professional Liability (Errors and Omissions) insurance \$3M each occurrence/\$3M Annual Aggregate • Automobile Liability Insurance (if transporting consumers) • Worker’s Compensation • Employers Liability Insurance \$500,000/each accident; \$500,000 each employee by disease; \$500,000 aggregate disease. • Privacy and Security Liability (Cyber Liability) Insurance \$1M each occurrence/\$1M annual aggregate. Note- provider must have their own policy cover information security and privacy liability, privacy notification costs, 	Contract (section 15)	Policy certificate – can be obtained from PAYOR Contract Manager	<input type="checkbox"/> Yes (2) <input type="checkbox"/> No (0) <input type="checkbox"/> Partial (1) <input type="checkbox"/> NA	

	Standard	Source	Evidence may include	Score	Evidence Found, Notes, Comments
	regulatory defense and penalties, and website media content liability.				
4.2	The provider has a systematic process (i.e., Compliance Plan) in place to ensure that the organization is performing business functions in a manner in compliance with federal and state laws concerning health care billing practices and fraud detection and/or prevention. Note: These regulations include HIPAA, Stark I and II, Medicare/Medicaid anti-kickback statute and False Claims Act.	Contract (section 22 – Compliance Program), 42 CFR 438.608	Compliance Plan Policies Procedures	<input type="checkbox"/> Yes (2) <input type="checkbox"/> No (0) <input type="checkbox"/> Partial (1) <input type="checkbox"/> NA	
4.3	Provider has safeguards established that restrict the use or disclosure of information concerning Consumers.	Contract (section 21 – Consumer Medical Records) Mental Health Code, Section 748, 748a, and 750	Policy/Procedure	<input type="checkbox"/> Yes (2) <input type="checkbox"/> No (0) <input type="checkbox"/> Partial (1) <input type="checkbox"/> NA	
4.4	Provider has a provision for the disposal of consumer protected health information (PHI) that will render the documents unreadable, indecipherable, and otherwise cannot be reconstructed.	HITECH Act, Contract (Section 22 - HIPAA)	Policy/Procedure	<input type="checkbox"/> Yes (2) <input type="checkbox"/> No (0) <input type="checkbox"/> Partial (1) <input type="checkbox"/> NA	
4.5	Provider maintains a comprehensive individual service record system as required by contract record requirements.	Contract (section 21 – Consumer Medical Records), MDHHS Medical Services Administration (MSA) Policy Bulletin Chapter 1, the MDTMB Retention General Schedule #20 Community Mental Health Programs	Policy/Procedure related to retention, privacy and confidentiality	<input type="checkbox"/> Yes (2) <input type="checkbox"/> No (0) <input type="checkbox"/> Partial (1) <input type="checkbox"/> NA	

	Standard	Source	Evidence may include	Score	Evidence Found, Notes, Comments
4.6	Provider has evidence of utilizing data to improve processes and services such as surveys, feedback, internal assessment and evaluation, etc.	Contract section 24 – Quality Improvement Program, Site Reviews, Performance Monitoring	QAPIP, surveys, feedback mechanisms, internal monitoring processes	<input type="checkbox"/> Yes (2) <input type="checkbox"/> No (0) <input type="checkbox"/> Partial (1) <input type="checkbox"/> NA	
4.7	Provider has a system in place for credentialing and recredentialing licensed health care professionals in accordance with MDHHS credentialing and recredentialing processes. Staff file and policies and procedures meet all requirements. <i>*See staff qualification review tool.</i>	MDHHS Contract Medicaid Provider Manual	Policy/Procedure and Sample of records	<input type="checkbox"/> Yes (2) <input type="checkbox"/> No (0) <input type="checkbox"/> Partial (1) <input type="checkbox"/> NA	
4.8	Provider conducts background checks for staff as required. <ul style="list-style-type: none"> • Criminal background (initial and ongoing) • *National Sex Offender registry (initial) • *State Sex Offender registry (initial) • Central registry (initial) • OIG (initial and monthly) • GSA/SAM (initial and monthly) • MI Sanction Provider database (initial and monthly). <i>*New requirement 10/1/23. Staff files prior to this date may not include registry checks.</i>	Autism regional contract, MDHHS/PIHP Contract, MDHHS Credentialing policy	Policy, procedures and/or Sample record review	<input type="checkbox"/> Yes (2) <input type="checkbox"/> No (0) <input type="checkbox"/> Partial (1) <input type="checkbox"/> NA	
4.9	Provider has a written system in place to ensure individuals transporting consumers hold a valid driver’s license appropriate to the class of vehicle being operated	Medicaid Provider Manual – NEMT; Michigan Vehicle Code Act 300 of 1949	Policy/Procedure	<input type="checkbox"/> Yes (2) <input type="checkbox"/> No (0) <input type="checkbox"/> Partial (1) <input type="checkbox"/> NA	
4.10	The provider has a process to ensure that minimum training requirements for staff are met and evidence is documented in staff files.	Contract MSHN Regional Training Grid	Policy/Procedure and/or sample records	<input type="checkbox"/> Yes (2) <input type="checkbox"/> No (0) <input type="checkbox"/> Partial (1) <input type="checkbox"/> NA	
			TOTAL SCORE/%:	Points	%

	Standard	Source	Evidence may include	Score	Evidence Found, Notes, Comments
Limited English Proficiency & Cultural Competence (desk or on-site review)					
5.1	The provider has an administrative policy and procedure in place for identifying and assessing the language needs of individuals served	42 CFR 438.10 42 CFR 438.400 MI Medicaid Manual MDHHS PIHP Contract MDHHS Customer Service Standards	Policy/procedure	<input type="checkbox"/> Yes (2) <input type="checkbox"/> No (0) <input type="checkbox"/> Partial (1) <input type="checkbox"/> NA	
5.2	The provider has a written policy and/or procedure on accessing oral interpretation services, free of charge to consumers and has a process to notify consumers of these services.	MDHHS/PIHP Contract MDHHS Customer Service Standards CMHSP Policy/Procedures	Policy/procedure Tagline posting with top 15 languages; examples of materials in other languages	<input type="checkbox"/> Yes (2) <input type="checkbox"/> No (0) <input type="checkbox"/> Partial (1) <input type="checkbox"/> NA	
5.3	Written materials are available in easily understood manner in alternative formats and in an appropriate manner that takes into consideration the special needs of those who are visually limited or have limited reading proficiency, as required by ADA.	MDHHS/PIHP Contract MDHHS Customer Service Standards CMHSP Policy/Procedures Regional ABA Contract	Examples of materials in alternative formats; 6.9 grade reading level Policy, Procedures	<input type="checkbox"/> Yes (2) <input type="checkbox"/> No (0) <input type="checkbox"/> Partial (1) <input type="checkbox"/> NA	
5.4	The provider has a written policy or procedure on cultural diversity to ensure that services are delivered in a culturally diverse manner to all consumers including those with LEP and diverse cultural and ethnic backgrounds.	MDHHS PIHP Contract Regional ABA Contract	Policy/procedure	<input type="checkbox"/> Yes (2) <input type="checkbox"/> No (0) <input type="checkbox"/> Partial (1) <input type="checkbox"/> NA	
			TOTAL SCORE/%:	Points	%