MSHN
Mid-State Health Network

Medicaid Subcontract - FY27 Provider Feedback/Change Log

Changes Throughout

- Grammatical, punctuation, formatting, and terminology updates throughout the contract.

II. Agreement Contingent Upon Funding (Pgs. 5-6)

- Added bullet for Stop Work Order Language based on Federal and/or MDHHS directives.

IX. Provider Services and Responsibilities (Pgs. 7-8)

- Item C – Added delegation language indicating PIHP maintains ultimate responsibility with State and Federal guidelines. (HSAG Review)

XVIII Program and Financial Books, Documents, and Records; Audits; Reviews; and Program/Service Evaluations (Pgs. 17-18)

- Item H – Added language noting delegate will make available for evaluation or inspection physical facilities, equipment, books, records, etc. for Medicaid members.

XXVI Conflict of Interest (Pgs. 23-26)

- Item C – Expanded search databases to include other State and Federal lists.
- Item E – Updated GSA link

XXX. Monitoring the Agreement (Pgs. 30-31)

- Item D.(2) – Added letters e and f regarding corrective actions when deficiencies are noted. (HSAG review)

Exhibit A – Delegation Grid (Pgs. 34-60)

- I. Customer Service - Information Requirements and Notices
  - (pg. 35) – Expanded language in the first bullet and added a bullet noting written materials should be available in prevalent non-English languages and include other components to assist with interpretation.
  - (pgs. 36-37) – CMHSP section rewritten to include a broader set of responsibilities.
- VI. Provider Network
  - (pg. 44) – Moved existing language from credentialing section on page 46.
  - (pg. 46) – Added language noting initial HCBS comprehensive settings must occur within 90 days to render HCBS services.
  - (pg. 47) – Added language stating credentialing must also occur when changing to a new position.
- VII. Quality Management
  - Added MDHHS Technical Requirement……and references to HEDIS throughout section.
- VIII. Self Determination renamed Self Direction
  - (pgs. 50-51) – Language updated based on MDHHS contractual guidelines.
- XI. 1915(i) State Plan Amendment
  - Clarification throughout the section noting PIHP does not delegate initial eligibility.
  - Added references to conflict free access and planning throughout section.
- XII Compliance
  - Added references to new reporting requirements throughout.

Exhibit F – Financial and Non-Financial Report (Pgs. 72-75)

- Updated throughout for dates, contacts, etc.

Exhibit G – CMHSP Responsibilities – 24/7/365 Access – Substance Use Disorder (Pgs. 76-79)

- Comprehensive modifications include:
    - Rewording of existing language
    - Added new acronyms as necessary such as MOUD (Medication for Opioid Use Disorder)
    - Clarified language regarding priority populations
    - Expanded language on CMHSP responsibilities for access, documentation, and reporting including timeliness of these areas