

# POLICIES AND PROCEDURE MANUAL

Chapter:	Population Health		
Title:	Health Home Provider Policy		
Policy: ⊠ Procedure: □ Page: 1 of 3	Review Cycle: Biennial  Author: Chief Population Health Officer	Adopted Date: 09.10.2024  Review Date:	Related Policies: MSHN SUD Service Provider Procurement Policy

#### Purpose

The purpose of this policy is to outline the selection process and criteria used by Mid-State Health Network (MSHN) for adding new Health Home Partners (HHP) to its Opioid Health Home (OHH) and Behavioral Health Home (BHH) initiatives.

#### **Policy**

1. It is the policy of MSHN to expand health home initiatives in its 21-county region. In furtherance of this policy, MSHN will consider contracting with interested Health Home Partners (HHP) that meet the minimum requirements outlined in the <a href="Michigan Department of Health and Human Services">MICHAIL MICHIGAN MICHIGAN

Opioid Health Home Partners must meet applicable Federal and State licensing standards in addition to Medicaid provider certification and enrollment requirements as either an Opioid Treatment Program (OTP) or an Office Based Opioid Treatment Provider (OBOT). Examples of Opioid Health Home Partners include:

- o Community Mental Health Services Program (CMHSP)
- o Federally Qualified Health Center (FQHC)/Primary Care Safety Net Clinic
- Hospital-based Physician Group
- Physician-based Clinic
- o Physician or Physician Practice
- o Rural Health Clinics
- O Substance Use Disorder (SUD) Provider other than Opioid Treatment Program
- o Tribal Health Center

<u>Behavioral Health Home Partners</u> must enroll or be enrolled in Michigan Medicaid and agree to comply with all Michigan Medicaid program requirements. Examples of Behavioral Health Home Partners include:

- o Community Mental Health Services Program (CHMSP)
- o Federally Qualified Health Center (FQHC)/Primary Care Safety Net Clinic
- o Rural Health Center
- o Tribal Health Center
- Clinical Practices or Clinical Group Practices
- o Community/Behavioral Health Agencies
- Provider organizations that are interested in becoming either a Behavioral Health Home Partner or Opioid Health Home Partner must submit a completed MSHN Provider Network Application and Ownership & Controlling Interest Disclosure Statement (if not already a MSHN-paneled SUD Provider or CMHSP Participant).

- 3. CMHSP Participants may elect to join the Behavioral Health Home initiative at any time. CMHSP Participants will be notified and retain the right of first refusal prior to MSHN selecting new Behavioral Health Home Partners within the CMHSP geographic catchment area.
- 4. If multiple interested provider organizations meet the minimum requirements to become a HHP, MSHN may utilize the following additional selection criteria when necessary to prioritize certain providers for health home expansion:
  - Provider operates an established health home at a different site/location with a demonstrated history of success and is committed to expansion.
  - Provider will expand or increase access to services in underserved area(s), and/or to underserved populations, and/or to populations experiencing disparities in access or outcomes.
  - o Provider demonstrates capacity to increase beneficiary enrollment and projected service utilization volume for the identified health home initiative.
  - Provider holds accreditation from a nationally recognized body specific to a health home, patient-centered medical home, or integrated care [National Committee for Quality Assurance (NCQA), Accreditation Association for Ambulatory Health Care (AAAHC), Joint Commission, Commission on Accreditation of Rehabilitation Facilities (CARF), etc.].
  - Other provider characteristics or performance factors deemed desirable by MSHN.
  - Evaluation of MSHN administrative capacity to support expansion of health home initiatives.
  - o Readiness and experience of provider as evidenced by MSHN pre-contract site review.
- 5. MSHN, in its sole discretion, may restrict or otherwise limit the number of Health Home Partners that can participate in health home initiatives in any portion of or for all of its region. Factors that are considered in these circumstances include, but are not limited to, level(s) of utilization of the same or similar services in the geographic or sub-geographic area to be served, consumer choice considerations, quality, cost, pricing, provider saturation, other market factors or other programmatic considerations.

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:**

AAAHC: Accreditation Association for Ambulatory Health Care'

BHH: Behavioral Health Home

CARF: Commission on Accreditation of Rehabilitation Facilities

CMHSP: Community Mental Health Service Program

<u>FQHC</u>: Federally Qualified Health Center are nonprofit health centers or clinics that serve medically underserved areas and populations.

<u>HHP</u>: Home Health Partners provide comprehensive care management, care coordination, health promotion, comprehensive transitional care and follow-up, individual and family support, and referral to community social services to Medicaid beneficiaries with serious and complex chronic conditions.

MDHHS: Michigan Department of Health and Human Services

MSHN: Mid-State Health Network

NCQA: National Committee for Quality Assurance

OHH: Opioid Health Home

OTP: Outpatient Treatment Programs provide medication-assisted treatment (MAT) for people diagnosed with an opioid use disorder.

<u>OBOT</u>: Office Based Opioid Treatment (OBOT) allows primary care or general health care prescribers with a DATA waiver to dispense or prescribe any Controlled Substances Act (CSA) scheduled III, IV, V medication approved by the Food and Drug Administration (FDA) for the treatment of opioid use disorder.

PIHP: Prepaid Inpatient Health Plan

SUD: Substance Use Disorder

## **References/Legal Authority:**

Medicaid Managed Specialty Supports and Services Contract: Concurrent 1915(B)/(c) Waiver Programs, the Health Michigan Program and Substance Use Disorder Community Grant Programs

MDHHS BHH Handbook

MDHHS OHH Handbook

### **Change Log:**

<b>Date of Change</b>	Description of Change	Responsible Party
10.2023	New Policy	Chief Population Health Officer