BARRY COUNTY COMMUNITY MENTAL HEALTH AUTHORITY
POLICY AND PROCEDURE MANUAL

Policy: 12-D Monitoring Provider Performance and Contract Compliance		Application: BCCMHA Staff and Providers
Approved: _____ Richard Thiemkey, MA Executive Director		
Reviewed 3/6/2025	Revised 3/6/2025	First Effective 8/6/2002

PURPOSE
To enhance service delivery system performance, to monitor and improve outcomes and quality of services provided to clients.

To coordinate performance and compliance reviews among governing and accrediting entities.

POLICY
BCCMHA actively monitors network providers to ensure compliance with the terms of the provider contract through site reviews, post payment claim reviews, and quality reviews. These reports are to be examined to identify performance and other noncompliance issues and will determine if contract violations may have occurred

BCCMHA actively monitors network providers who render Home and Community Based Services (HCBS) to ensure compliance with the HCBS Technical Guide outlined in the Michigan Medicaid Provider Manual.

As part of routine provider monitoring to ensure providers in and out of network have renewed their Michigan licenses and any applicable certifications in a timely basis, monitoring will be completed at a minimum of an annual basis and include review of expired licensure or certification, liability insurance, workman's compensation insurance, and accreditation.
As part of the coordination efforts between SWMBH and BCCMHA, contractual providers will either be audited by the SWMBH Provider Network Team, SWMBH Affiliate Provider Network Team, or BCCMHA Provider Network Team on an annual basis or more often as needed. Information sharing will occur between these entities to ensure contract compliance and quality of service. Results from audits conducted by SWMBH or SWMBH Affiliate will be forwarded or made available to BCCMHA. Those providers not enrolled as a SWMBH provider, but who are a provider for BCCMHA, will be reviewed by BCCMHA's Provider Network Team on an annual basis or more often as needed. Results from these audits may be forwarded to SWMBH Provider Network Team , including any corrective action plans or sanctions per the contract.

PROCEDURES

1. Termination

<u>NOTIFICATION OF ADVERSE ACTION</u>
If a provider's contract status changes, the Provider Network Specialist will notify the Management Team and Customer Service. . .

Staff will notify affected members within 15 days of action and modify plans of service to ensure a smooth transition to another provider. Claims payment will remove the vendor/provider from the system following their process.

REFERENCES

MDHHS
SWMBH
CARF