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REGION 10 PIHP

SUBJECT Contract Management	CHAPTER 01	SECTION 06	SUBJECT 03
CHAPTER Administrative	SECTION Provider Network		
WRITTEN BY Lisa K. Morse	REVIEWED BY Kim Wahl & Deidre Slingerland		AUTHORIZED BY PIHP Board

I. APPLICATION:

- ☒ PIHP Board ☒ CMHSP Providers ☒ SUD Providers
☒ PIHP Staff ☐ CMHSP Subcontractors

II. POLICY STATEMENT:

It shall be the policy of Region 10 PIHP to maintain a system of contract management in accordance with applicable federal, state, and local laws and the MDHHS.

III. DEFINITIONS:

Contract Amendment: An authorized change to an already established contract that may include/involve change in service position and budget provision that will require negotiation offer/acceptance.

Contract Manager: Refers to the assigned administrative staff responsible for review and coordination of contract agreements, is engaged in the day-to-day operations of assigned contract services, and maintains oversight of contract service delivery.

Contract Team: This includes, but is not limited to, Chief Financial Officer, Chief Information Officer, Administrative Contract Coordinator, and Administrative Service Coordinator.

Contractual Agreements: A written agreement between two (2) or more parties establishing the parties' responsibilities, duties and obligations that are enforceable by law. This may include contracts, service agreements, letters of understanding and grant projects.

Provider: For the purposes of this policy, "Provider" generally means a provider of Mental Health or Substance Use Disorder services, however, it can also be a "Vendor Provider", e.g. software, telephone system, etc.

Routine Renewal: An authorized continuation of an expiring contract with no significant change, or only minor changes to the previous provisions.

IV. STANDARDS:

REGION 10 PIHP

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Contract Management		01	06	03
CHAPTER		SECTION		
Administrative		Provider Network		

- A. Unless otherwise indicated by the Board, all the following contracts must go to the Board for approval:
 - 1. All new contracts with a budget of \$250,000 or more,
 - 2. Any renewed contract with a budget change of \$250,000 or more, or significant program changes,
 - 3. Any amendment with a budget change of \$250,000 or more, or significant program changes.
- B. Any contracts with prior low or insufficient performance issues must be presented and approved by the Board when requested.
- C. Unless otherwise indicated by the Board, the following may be approved by the PIHP Chief Executive Officer, or in the Chief Executive Officer's absence, their designee:
 - 1. New contracts with a budget of less than \$250,000.
 - 2. Renewed contracts or contract amendments with a budget of less than \$250,000, or non-significant program changes.
 - 3. Employment contracts.
- D. All contract correspondence must be copied to the contract file
- E. Through the contract process, the PIHP may delegate managed care functions to a provider once capacity to perform has been assessed, and when the function is monitored. Specifics related to delegated functions are outlined in the contract language and contract monitoring tool.
- F. All contract files will be reviewed annually to ensure all contract materials and information is submitted as requested.
- G. Audit Review or Site Visits will be completed, at least annually, on any delegated functions, for review of the Contract Compliance Monitoring Form with the Provider.
- H. The Board has authorized the Chief Executive Officer to sign amendments on behalf of the Board that are of a routine, one-time nature, or those involving less than \$250,000.
- I. Requests for amendments can be generated from either party.

V. **PROCEDURES:** N/A

VI. **EXHIBITS:** N/A

VII. **REFERENCES:** N/A