



CMH and SUD Provider Network FY2023 Contract Monitoring Aggregate Report

OVERVIEW

On an ongoing and annual basis, Region 10 PIHP monitors and evaluates its Provider Network to ensure compliance with federal and state regulations, as well as contractual requirements. Concurrently, the PIHP is required to monitor and evaluate any entity to which it has delegated a managed care administrative function to ensure the provider is appropriately managing its charged delegated responsibilities. The PIHP monitors its Provider Network on an ongoing basis with formal reviews taking place annually.

The purpose of this report is to summarize the findings of the FY2023 Region 10 PIHP Contract Monitoring evaluations of the CMH and SUD Provider Network System.

PIHP NETWORK

Region 10 PIHP manages many managed care administrative functions centrally, while contracting with four (4) CMH Providers and sixteen (16) SUD Providers (Treatment, Prevention and Recovery Housing) for the management of specific delegated administrative functions and service requirements. These responsibilities are detailed in the PIHP / Provider contracts as applicable.

ANNUAL MONITORING COMPONENTS

The Annual monitoring process included a Preliminary Desk Audit Review. This internal review included key PIHP staff (Subject Matter Experts) reviewing materials that the PIHP already had on file for a specific Provider. Following the Preliminary Desk Audit Review, a Desk Audit request was sent to each Provider, which consisted of Providers submitting operational documents to the PIHP where Subject Matter Experts reviewed the submitted materials. These materials included Provider policies and processes, quality improvement efforts and performance reports for overall compliance and conformance.

This year, for the first time in three years, the PIHP was able to conduct on-site visits with all Region 10 contracted providers. At the on-site review, the Contract Monitoring Team reviewed training records, privileging & credentialing records and reviewed the contract monitoring tool with each provider. Supplemental evidence was accepted by the PIHP during the visit. Any outstanding items at the completion of the visit were requested to be submitted within 2 business days.

Following each review, the Providers were issued formal Contract Monitoring Reports, which detailed specific findings and overall performance. Any finding that did not receive a compliance score of "Met" required the Provider to submit a corrective action plan to the PIHP within thirty (30) days of report issuance. Provider Action Plans address steps taken to assess and improve performance, measurement criteria and timeframes for issue resolution.

SCORING STANDARDS

For each performance standard within the applicable domain areas, the Provider's compliance was assessed to be Met, Not Met, or Not Applicable (N/A). For all standards where the Provider was

determined to have “Met” compliance or were deemed “Not Applicable”, no follow-up action was required. For any “Not Met” scores, a corrective action plan was required from the Provider.

RECOMMENDATIONS:

1. Renewal of contracts and continuation of delegated managed care functions. For FY2023 and prior the term delegated is not used to exclusively identify managed care functions.
2. Examination of overall monitoring compliance scores to address outliers.
3. Specialized reviews of Providers where appropriate to ensure continued compliance of contractual requirements, including scheduling internal review meetings and facilitating additional onsite visits with Providers to further assess performance capability.

EXHIBITS:

Exhibit A: FY2023 Contract Monitoring Aggregate Report Scores

S:\Region 10\Contract Files\Contract Monitoring\FY2023\FY2023 Annual Aggregate Report.docx

AVERAGE SCORES OVERALL

CMH PROVIDERS

MONITORING TIMEFRAME	GHS	LAPEER CMH	SANILAC CMH	ST. CLAIR CMH	
FY2023 Annual	86%	96%	96%	92%	
CMH Network Average:					93%

SUD PROVIDERS – TREATMENT

MONITORING TIMEFRAME	AICC	BIOMED	CCSHGC	CCSEM	CPI	FOH	NPI	SHRC	SAHLM	SC CMH	SCMH	
FY2023 Annual	77%	88%	82%	89%	88%	98%	80%	89%	92%	81%	90%	
SUD Treatment Network Average:												87%

SUD PROVIDERS – PREVENTION

MONITORING TIMEFRAME	AICC	CCSHGC	CCSEM	FOH	GCPC	HOPE	IMPACT	SCCS	
FY2023 Annual	100%	100%	100%	100%	91%	100%	100%	82%	
SUD Prevention Network Average:									95%

SUD PROVIDER – RECOVERY HOUSING

MONITORING TIMEFRAME	GLRM	
FY2023 Annual	89%	
SUD Recovery Housing Network Average:		89%

AVERAGE SCORES BY DOMAIN

CMH PROVIDERS

DOMAIN	GHS	LAPEER CMH	SANILAC CMH	ST. CLAIR CMH	CMH NETWORK AVERAGES (By Domain)
PART 1: CONTRACTUAL REQUIREMENTS					
<i>Quality Improvement</i>	74%	94%	85%	80%	83%
<i>Information Systems & Data Management</i>	89%	89%	100%	100%	94%
<i>Collaboration with Community</i>	N/A	N/A	N/A	N/A	N/A
<i>Financial Management</i>	100%	100%	100%	100%	100%
<i>Corporate Compliance</i>	92%	100%	100%	100%	98%
<i>Advance Directives</i>	100%	100%	100%	100%	100%
<i>Provider Network</i>	90%	100%	100%	80%	93%
<i>Certified Community Behavioral Health Clinic</i>	N/A	N/A	N/A	100%	100%
PART 2: CONTRACTUAL REQUIREMENTS / DELEGATED FUNCTIONS					
<i>QAPIP</i>	80%	100%	100%	80%	90%
<i>Performance Measurement</i>	67%	83%	83%	67%	75%
<i>Staff Qualifications & Training</i>	43%	80%	100%	100%	80%
<i>Utilization Management</i>	100%	100%	100%	100%	100%
<i>Access</i>	100%	100%	100%	100%	100%
<i>Customer Service</i>	89%	100%	100%	100%	97%
<i>Enrollee Grievance Process</i>	67%	100%	100%	100%	80%
<i>Enrollee Rights & Protections</i>	100%	100%	100%	100%	100%
<i>Subcontracts & Delegation</i>	100%	N/A	N/A	100%	100%
<i>Provider Network Selection & Management</i>	100%	100%	100%	100%	100%
<i>Credentialing</i>	90%	100%	100%	100%	97%
<i>Coordination of Care</i>	100%	50%	50%	50%	63%
<i>Appeals</i>	100%	100%	100%	100%	100%
<i>Disclosures</i>	100%	100%	100%	100%	100%
PART 3: OUTSTANDING PLAN OF CORRECTION ITEMS / PART 4: SUBCONTRACTOR SITE VISITS					
Outstanding Plan of Correction Items	100%	100%	100%	100%	100%
Subcontractor Site Visits	100%	100%	100%	75%	94%
OVERALL (By Provider)	86%	96%	96%	92%	
CMH Network Average (Of all Domains):					93%

AVERAGE SCORES BY DOMAIN

SUD PROVIDERS – TREATMENT

DOMAIN	AICC	BIOMED	CCSEM	CCSHGC	CPI	FOH	NPI	SAHLM	SC CMH	SCMH	SHRC	SUD Treatment NETWORK AVERAGES (By Domain)
PART 1: CONTRACTUAL REQUIREMENTS												
<i>Quality Improvement</i>	75%	100%	75%	100%	75%	100%	75%	100%	N/A	N/A	100%	89%
<i>Information Systems</i>	100%	75%	100%	100%	100%	100%	75%	100%	67%	100%	75%	86%
<i>Collaboration with Community</i>	50%	100%	100%	100%	50%	100%	100%	100%	50%	50%	50%	77%
<i>Financial Management</i>	75%	88%	88%	88%	88%	88%	75%	100%	100%	83%	88%	87%
<i>Corporate Compliance</i>	100%	100%	100%	100%	100%	100%	89%	89%	N/A	N/A	100%	98%
<i>Training</i>	50%	0%	0%	100%	100%	100%	0%	100%	0%	0%	50%	50%
<i>Administrative Capacity</i>	40%	92%	90%	70%	91%	100%	73%	83%	75%	100%	85%	81%
<i>Recipient & Enrollee Rights</i>	100%	100%	100%	33%	100%	100%	100%	100%	N/A	N/A	100%	93%
<i>Women’s Specialty</i>	50%	N/A	N/A	N/A	N/A	100%	N/A	N/A	N/A	N/A	100%	83%
<i>Opioid Health Home</i>	N/A	86%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	100%	93%
<i>Jail Based MAT Program</i>	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	100%	100%
PART 2: CONTRACTUAL REQUIREMENTS / DELEGATED FUNCTIONS												
<i>QAIP</i>	0%	100%	100%	100%	0%	100%	0%	100%	N/A	N/A	100%	67%
<i>Performance Measurement</i>	40%	60%	100%	20%	83%	83%	60%	100%	80%	100%	67%	73%
<i>Staff Qualifications & Training</i>	33%	67%	33%	33%	67%	100%	33%	67%	N/A	100%	67%	59%
<i>Utilization Management</i>	100%	100%	100%	67%	67%	100%	100%	100%	N/A	N/A	100%	93%
<i>Access</i>	100%	100%	100%	100%	100%	100%	100%	100%	N/A	N/A	100%	100%
<i>Customer Service</i>	100%	100%	75%	100%	100%	100%	100%	75%	N/A	N/A	100%	94%
<i>Enrollee Grievance Process</i>	100%	100%	100%	100%	100%	100%	100%	100%	N/A	N/A	100%	100%
<i>Enrollee Rights & Protections</i>	100%	100%	100%	100%	100%	100%	100%	100%	N/A	N/A	100%	100%
<i>Credentialing</i>	78%	71%	75%	71%	75%	100%	75%	88%	100%	100%	100%	85%
<i>Coordination of Care</i>	100%	100%	100%	100%	100%	100%	100%	100%	N/A	N/A	100%	100%
<i>Appeals</i>	67%	67%	100%	100%	67%	100%	67%	67%	N/A	N/A	67%	78%
<i>Disclosures</i>	100%	100%	75%	100%	100%	100%	100%	100%	N/A	N/A	100%	97%
PART 3: OUTSTANDING PLAN OF CORRECTION ITEMS												
Outstanding Plan of Correction Items	100%	100%	100%	100%	100%	100%	100%	100%	N/A	N/A	100%	100%
OVERALL (By Provider)	77%	88%	89%	82%	88%	98%	80%	92%	81%	90%	89%	
SUD Treatment Network Average (Of all Domains):												
87%												

AVERAGE SCORES BY DOMAIN

SUD PROVIDERS - PREVENTION

DOMAIN	AICC	CCSEM	CCSHGC	FOH	GCPC	HOPE	IMPACT	SCCS	SUD Prevention NETWORK AVERAGES (By Domain)
PART 1: CONTRACTUAL REQUIREMENTS									
<i>Quality Improvement</i>	100%	100%	100%	100%	100%	100%	100%	100%	100%
<i>Information Systems & Data Management</i>	100%	100%	100%	100%	100%	100%	100%	67%	95%
<i>Financial Management</i>	N/A	N/A	N/A	N/A	0%	100%	100%	0%	50%
<i>Corporate Compliance</i>	N/A	N/A	N/A	N/A	100%	100%	100%	100%	100%
<i>Training</i>	N/A	N/A	100%	N/A	50%	100%	100%	100%	89%
<i>Administrative Capacity</i>	N/A	N/A	N/A	N/A	89%	100%	100%	67%	89%
<i>Disclosures</i>	N/A	N/A	N/A	N/A	100%	100%	100%	100%	100%
<i>Recipient & Enrollee Rights</i>	N/A	N/A	N/A	N/A	100%	100%	100%	100%	100%
<i>Prevention</i>	100%	100%	100%	100%	93%	100%	100%	80%	96%
PART 2: OUTSTANDING PLAN OF CORRECTION ITEMS									
Outstanding Plan of Correction Items	N/A	N/A	N/A	N/A	100%	100%	100%	100%	100%
OVERALL (By Provider)	100%	100%	100%	100%	91%	100%	100%	82%	
SUD Prevention Network Average (Of all Domains):									95%

Regarding SUD Providers contracted with the PIHP for both Treatment and Prevention Services: As the PIHP has created separate Contract Monitoring Tools for both SUD Provider Treatment and Prevention Programs, performance standards in several domains may be duplicated. The PIHP has addressed this by including all items on the Treatment Services Monitoring Tool and marking appropriate duplicated standards as “not applicable” on the Prevention Services Monitoring Tool.

AVERAGE SCORES BY DOMAIN

SUD PROVIDER – RECOVERY HOUSING

DOMAIN	GLRM	SUD Recovery Housing NETWORK AVERAGES (By Domain)
PART 1: CONTRACTUAL REQUIREMENTS		
<i>Quality Improvement</i>	100%	100%
<i>Information Systems & Data Management</i>	100%	100%
<i>Service Coordination</i>	100%	100%
<i>Financial Management</i>	75%	75%
<i>Corporate Compliance</i>	88%	88%
<i>Training</i>	67%	67%
<i>Administrative Capacity</i>	83%	83%
<i>Recipient & Enrollee Rights</i>	100%	100%
PART 2: OUTSTANDING PLAN OF CORRECTION ITEMS		
Outstanding Plan of Correction Items	100%	100%
OVERALL (By Provider)	89%	
SUD Recovery Housing Network Average (Of all Domains):		89%

Provider Names & Acronyms

AICC	Alcohol Information and Counseling Center
BIOMED	Biomed Behavioral Healthcare
CCSEM	Catholic Charities of Southeast MI
CCSHGC	Catholic Charities of Shiawassee and Genesee Counties
CPI	Community Programs, Inc.
FOH	Flint Odyssey House
GCPC	Genesee County Prevention Coalition
GHS	Genesee Health System
GLRM	Great Lakes Recovery Mission
HOPE	Hope Network
IMPACT	Incorporation to Maximize Personal Achievement with Community Training
LCMH	Lapeer County Community Mental Health
NPI	New Paths, Inc.
SAHLM	Salvation Army Harbor Light Macomb
SC CMH	St. Clair County Community Mental Health
SCCS	Sanilac County Counseling Services
SCMH	Sanilac County Community Mental Health
SHRC	Sacred Heart Rehabilitation Center