

Local Health Department (LHD) and Medicaid Health Plan (MHP)
Care Coordination Agreement for Children's Special Healthcare Services (CSHCS)

This agreement is made and entered into this <date> day of <month>, in the year <2012> by and between <MHP Name> (Health Plan) and <LHD Name> (LHD).

A. Legal Basis

Whereas, P.A. 200 of 2012 requires the Michigan Department of Community Health (MDCH) to enroll children eligible for Children's Special Health Care Services (CSHCS) and Medicaid into health plans on a capitated basis; and

Whereas, the MDCH has established CSHCS core competencies to assure that the health plans are qualified to provide specified health care services to CSHCS/Medicaid enrollees; and

Whereas, Medicaid-covered CSHCS services will be provided through arrangements between the MDCH, (name of health plan) and (name of local health department); and

Whereas, Medicaid Health Plans (MHPs) are required by the Michigan Department of Technology, Management and Budget (DTMB)/Medicaid Health Plan contract, to establish and maintain coordination of care agreements with all LHDs in the plans' service area;

Whereas, LHDs are required by the MDCH/CSHCS contract, to establish and maintain coordination of care agreements with all MHPs in their jurisdiction;

Now, therefore, the MHP and the LHD agree as follows:

B. Term of Agreement

This agreement will be effective <month and day> in the year <2012>. Agreement will be subject to amendment due to changes in the contracts between DTMB and the MHP or between the MDCH and the LHD.

Upon signed agreement of both parties, the provisions of this agreement will be extended for a time frame consistent with the contract period of the MHP and DTMB. Either party may cancel the agreement upon 30 days written notice to MDCH and the other party.

C. Purpose and Administration

CSHCS Medicaid enrollees qualify for the provision of benefits described in the CSHCS program requirements and covered in the MHP contract. The purpose of establishing a care coordination agreement between the MHP and the LHD is to assure service coordination and continuity of care for persons receiving services from both organizations. The explicit intent of this agreement is to describe the services to be coordinated and the essential aspects of collaboration between the MHP and LHD.

As required by the CSHCS section of the DTMB/MHP and the MDCH/LHD CSHCS contract, coordination of care agreements with the LHDs in the MHPs' service area will be available for review upon request from the MDCH.

D. Areas of Responsibility

Mutually Served Consumers

All CSHCS enrollees qualify for LHD services. This agreement refers to MHP enrollees who also qualify for CSHCS services. The intent of establishing a written agreement between the MHP and the LHD is to assure service coordination and continuity of care for persons receiving services from both organizations.

Services Provided by MHP

The MHP will provide Medicaid covered services to enrollees as required by the MHP contract with the DTMB.

- The MHP will provide assessment, case management and care coordination services. The MHP will notify enrollees of the availability of LHD services.
- The MHP shall provide referral to the LHD for enrollees who require assistance with resources at the local level or request LHD services. Referrals can be made by letter, fax, electronically secure transmission, or by telephone.
- The MHP shall establish a process with the LHD to ensure communication on assessment, plan of care, care coordination, & updates to coordination services.
- The MHP will provide transportation to all covered services.

Services Provided by LHD

The LHD services are coordinated services provided to children enrolled in an MHP for the CSHCS Program. These coordinated services are to be provided by the LHD CSHCS Representatives or health professionals consisting of a qualified social worker or nurse.

- LHD staff provide ongoing educational and community resources in the local community to assist with the unique circumstances of the enrollee.
- The LHD provides the following services for CSHCS enrollees in collaboration with the MHP and according to the process established with the MHP to prevent duplication of services:
 - Outreach and assessment
 - Plan of care development
 - Care coordination including assisting with health, social, educational or other support services
 - Facilitating transitional services for enrollees at age 21 with the appropriate MHP
 - Assistance with Children with Special Needs (CSN) Fund applications
 - Referral to community services

E. Care Coordination

Both parties agree to establish a process to communicate on a regular basis; to review and update the plans of care; and report the status of mutually served consumers. Both parties will collaborate on an effective means of communicating the need for individual referrals.

The LHD will provide MHP with names of MHP enrollees receiving LHD services on a regular basis utilizing a standardized form. The MHP will provide the LHD with the names of the MHP enrollees receiving complex case management services following the agreed upon process.

The LHD will collaborate with the MHP or assigned primary care provider regarding recommendations for covered medical services on behalf of the MHP enrollees.

F. Quality Improvement

Both parties agree to have mechanisms in place to conduct Quality Improvement activities to monitor the coordination of services. The LHD and the MHP shall participate in Quality Improvement Programs established by MDCH and provide data as requested to improve the quality of care for children with special healthcare needs.

G. Complaints, Grievance and Appeals

The MHP and the LHD will share their grievance and appeal processes and appropriate contact information with each other.

The LHD is required to direct enrollees to MHPs grievance and appeal process as appropriate. The MHP is required to direct enrollees to the LHD’s grievance and appeal process as appropriate.

The MHPs are required to report complaints, grievances and appeals to DCH. DCH/Managed Care Plan Division oversees quality assurance, monitors compliance and requires corrective action as needed.

H. Dispute Resolution

Both parties agree to participate in a dispute resolution process as defined by the DCH in the event that the MHP or the LHD contests a decision or action by the other party related to the terms of this Agreement.

I. Governing Laws

Both parties agree that performance under this agreement will be conducted in compliance with all federal, state, and local laws, regulations, guidelines and directives.

J. Signature

Signatures below designate the person who has authority to administer this agreement.

LOCAL HEALTH DEPARTMENT

MEDICAID HEALTH PLAN

Signature

Signature

Title

Title

Date

Date

Business Address

Business Address

Business Telephone

Business Telephone