

# CMHSP/PIHP or Subcontracting Provider Agency Compliance Report

(FY2019 Appropriation Act - Public Act 207 of 2018)

**April 1, 2019**

**Sec. 994.** (1) *By January 1 of the current fiscal year, the department shall seek, if necessary, federal approval through either a waiver request or state plan amendment to allow a CMHSP, PIHP, or subcontracting provider agency that is reviewed and accredited by a national accrediting entity for behavioral health care services to be considered in compliance with state program review and audit requirements that are addressed and reviewed by that national accrediting entity.*

**(2) By April 1 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office all of the following:**

**(a) The status of the federal approval process required in subsection (1).**

**(b) A list of each CMHSP, PIHP, and subcontracting provider agency that is considered to be in compliance with state program review and audit requirements under subsection (1).**

**(c) For each CMHSP, PIHP, or subcontracting provider agency described in subdivision (b), both of the following:**

**(i) The state program review and audit requirements that the CMHSP, PIHP, or subcontracting provider agency is considered to be in compliance with.**

**(ii) The national accrediting entity that reviewed and accredited the CMHSP, PIHP, or subcontracting provider agency.**

**(3) The department shall continue to comply with state and federal law and shall not initiate an action that negatively impacts beneficiary safety. Any cost savings attributed to this action shall be reinvested back into services.**

**(4) As used in this section, “national accrediting entity” means the Joint Commission, formerly known as the Joint Commission on Accreditation of Healthcare Organizations, the Commission on Accreditation of Rehabilitation Facilities, the Council on Accreditation, the URAC, formerly known as the Utilization Review Accreditation Commission, the National Committee for Quality Assurance, or another appropriate entity, as approved by the department.**



# **Report on CMHSP/PIHP or Subcontracting Provider Agency Compliance Section 994(2) PA 207 of 2018**

## **BACKGROUND**

The Behavioral Health and Developmental Disabilities (BHDDA) leadership is committed to partnering with the Prepaid Inpatient Health Plans (PIHPs) and provider systems to reduce duplicative oversight while, at the same time, assuring the recipients of services and the Centers for Medicare and Medicaid Services (CMS) that appropriate oversight continues.

A workgroup was initiated in 2012 and met under the leadership of the BHDDA staff. The workgroup consisted of members from the PIHPs, Community Mental Health Services Programs (CMHSPs) and provider network systems. Recommendations for workgroup attendees were initiated by the Michigan Association of Community Mental Health Boards (MACMHB); and meetings were fluid as to numbers of members.

## **STATUS REPORT**

Deemed status is defined by current Michigan Mental Health Code (MHC) Administrative Rule R330.2702 as waiving portions of the Michigan Department of Health and Human Services (MDHHS) certification review activities on a CMHSP, if a CMHSP is accredited by a recognized national accreditation agency. Of the 46 CMHSPs in Michigan, all except two have national accreditation and have received "Deemed Status". A list of CMHSPs and their accreditation organization is attached to this report. It was the consensus of the workgroup that the legislative boilerplate description of "Deemed Status" is broader in application than the MHC definition. Therefore, if a PIHP/CMHSP is granted deemed status by the MDHHS, the reduction or elimination of a site review would result.

The only site review activities currently conducted by the BHDDA involve the provision of Autism State Plan services for Autism, and three Federal 1915(c) waiver programs (Habilitation Supports Waiver, Children's Waiver Program, and Waiver for Children with Serious Emotional Disturbance). All other BHDDA site review activities were placed on hold when the MDHHS initiated the 2013 Application for Participation of Medicaid Specialty Prepaid Inpatient Health Plans process. At the present time negotiations continue with CMS regarding the waiver authority(ies) the MDHHS will utilize for its service delivery system and the quality management oversight activities that will be required in the MDHHS' next waiver application. Once those activities are completed, the MDHHS can resume the process of assessing if accreditation processes cover any of the required oversight areas and generate the additional report elements required in Section 994 (2)(a) and (b).

<b>CMHSP</b>	<b>ACCREDITATION</b>
Allegan	Commission on Accreditation of Rehabilitation Facilities (CARF)
AuSable	Council on Accreditation (COA)
Barry	CARF
Bay-Arenac	CARF
Berrien	CARF
Central Michigan	JOINT COMMISSION
Clinton-Eaton-Ingham	CARF
Copper Country	NOT ACCREDITED/CERTIFIED WITH MDHHS
Detroit-Wayne	NOT ACCREDITED/CERTIFIED WITH MDHHS
Genesee	CARF
Gogebic	CARF
Gratiot	CARF
Hiawatha	CARF
Huron	COA
Ionia	CARF
Kalamazoo	CARF
Lapeer	CARF
Lenawee	JOINT COMMISSION
LifeWays	CARF
Livingston	JOINT COMMISSION
Macomb	CARF
Manistee-Benzie dba Centra Wellness Network	CARF
Monroe	JOINT COMMISSION
Montcalm	CARF
Muskegon	CARF
network180	CARF
Newaygo	CARF
North Country	CARF
Northeast	CARF
Northern Lakes	CARF
Northpointe	CARF
Oakland	CARF
Ottawa	CARF
Pathways	CARF
Pines	CARF
Saginaw	CARF
St. Clair	CARF
St. Joseph	CARF
Sanilac	CARF
Shiawassee	CARF
Summit Pointe	JOINT COMMISSION
Tuscola	CARF
Van Buren	CARF
West Michigan	CARF
Washtenaw	JOINT COMMISSION
Woodlands/Cass	CARF

