

## MDHHS Family Planning Comprehensive Review Pre-Materials List

### FAMILY PLANNING PRE-MATERIALS:

Pre-materials should be submitted to the MDHHS Family Planning Program **2 weeks prior** to the On-Site Review Date. Electronic Submission: send materials via email to:

- Barbara “Quess” Derman ([dermanb@michigan.gov](mailto:dermanb@michigan.gov))  
Local Agency Administrative Consultant

### THESE ADVANCE MATERIALS MUST BE SENT DIRECTLY TO THE FAMILY PLANNING PROGRAM:

1. Curricula vitae or resumes of project director and medical director.
2. Family Planning manuals including:
  - a. Family Planning General Policy manual
  - b. Current Fee schedule and Sliding fee schedule
  - c. Family Planning Billing & Collections Policy (if not in general policy manual)
  - d. Clinical Protocols (Contraceptive, STI and Breast & Cervical Screening protocols)
  - e. Current Drug Formulary
  - f. Drug Inventory Policy and Procedures (if not in general policy manual)
  - g. Current referral agreements for paid referrals (LARC providers, etc.)
  - h. Current contracts with contractual staff (Contractual provider, medical director, etc.)
  - i. Roster for FPAC and I&E Advisory Committee and Minutes of last 2 meetings for each.
3. Copy of CLIA license for laboratory
4. Current Referral listings

### THESE MATERIALS MUST BE AVAILABLE ON SITE FOR REVIEW

1. Client medical records:
  - a. To be chosen randomly, based on visit type, abnormal pap follow-up, adolescent status or choice of contraceptive method.
  - b. Please plan to have a staff member available at the review to be able to spend a few hours with clinical reviewer assisting the chart review.
2. Current organizational chart for agency (please detailed Family Planning Program (FP) organization chart, or a listing of staff names, positions and FTEs for the FP staff)
3. Copy of practice license for FP staff nurses and providers
4. Copy of Drug Control license for each prescribing provider for each clinic site
5. CPR certification for all licensed clinical staff
6. Documentation of Title X Orientation and In-service trainings for all staff
7. Documentation of quality assurance activities including medical audits, chart audits, and quality assurance committee minutes/staff minutes/memos that address quality assurance issues with staff.
8. Review of Billing records:

- a. To be randomly selected, based on client mix, self-pay, at least 1 adolescent self-pay, FFS Medicaid, Medicaid Health Plan, Pvt. Insurance, 1 with co-pay, if available.
- b. Billing record review to include the visit record, the bill generated, and reimbursement if available.
- c. Please plan to have a staff member available at the review to be able to spend an hour with administrative reviewer assisting review of the billing process.