

Comprehensive Provider Manual

Introduction

The Northern Affiliation is committed to excellence in the delivery of services to persons with mental illness, developmental disability, children with severe emotional disorders and people with substance abuse disorders. This commitment will be demonstrated throughout the thirteen county region by offering services, which are effective, efficient, and responsive to the individuals we serve, as well as to the communities in which they live.

As an assurance to all of our stakeholders – people who receive services, the Michigan Department of Community Health, the community, and to providers – the Northern Affiliation will require that all providers of behavioral health services in the network are qualified to deliver those services.

As we embark in a regional managed care environment, it is important for us to not only create a competent and qualified provider network, but to insure that we are included on the provider panels of many of the qualified health plans within the region. Demonstrating the competency of our individual and facility providers through a solid credentialing and privileging process makes a strong statement about the quality of our behavioral health system. It is a critical component in achieving the Northern Affiliation mission.

VISION AND VALUES

The NCCMH - Northern Affiliation is a partnership of three mental health boards and Northern Michigan Substance Abuse Services (the regional substance abuse services coordinating agency). This affiliation is based on the belief that these agencies could come together to form an integrated management structure for mental health, developmental disability and substance abuse services, drawing on each other's strengths and areas of expertise, and raising the entire region to the highest standards set by any affiliate.

VISION

As stated in its By-laws (which are appended to the attached ITFRA Agreement), the vision of the Northern Affiliation is to be the preferred, successful provider of public behavioral health care in the tip of the Lower Peninsula of Michigan. Member agencies have partnered to become eligible to pursue this vision, and under the belief that a group of behavioral health programs is more able to accomplish this goal than any single member. Achieving economy of scale in administrative activities is the primary intent of this partnership. It is not the intent to layer administrative activities on those of local agencies, but to functionally integrate these activities to reduce avoidable cost and prevent duplication.

VALUES

This affiliation is not only a matter of geographic convenience, but an acknowledgment of shared values, principles and capabilities. These values appear in the By-laws of Northern Affiliation and are elucidated as follows:

- **Quality:** The primary imperative is to maintain the high quality of services delivered throughout the region and promote continuous quality improvement. The Boards will maintain accreditation. Services are and will be person-centered, customer driven, and clinically and culturally appropriate. Quality will be judged by outcomes.
- **Cost:** Another value is efficiency: the desire to contain cost and insure that services are delivered and managed within the least cost possible. We believe that the right services should be provided at the right time and that achievement of desired cost and care outcomes should be rewarded.
- **Public responsibility (stewardship):** We believe in the public trust given to mental health boards in Michigan by the Mental Health Code: the responsibility to provide behavioral health and developmental disabilities services to those persons who have more serious disabilities, and the opportunity to provide leadership in the development of appropriate mental health services to other individuals. We also believe that consumers deserve a continuum of innovative, flexible care, which promotes empowerment and offers choices.
- **Access:** A value of the regional partnership is uniformity of access to a seamless continuum of health, mental health and substance abuse services. While utilization management should be more alike than different, it still should be possible to maintain the locally sensitive design of the individual member agencies. Streamlined, friendly and informative enrollment procedures should be used which offer customers maximum choice and dignity.
- **Role of Existing Community Mental Health Authorities/Boards (CMHA/Bs):** The Affiliation does not supplant the need for community mental health authorities (boards). CMHA/Bs have statutory responsibilities and generate significant local resources, which are needed to support public mental health services, and are the entities, which can assure that services are provided and managed in a manner sensitive to local needs and concerns.

BUILDING UPON STRENGTHS

As just stated, the importance of local community mental health programs is a value of the Northern Affiliation. In November 2000, affiliation staff, in response to a request from the membership, presented a “vision paper” entitled *Proposed Structure and Functions*. In this paper, the following statement was made:

“The role of the Hub is seen as that of contract holder, and provider of those “back room” administrative functions necessary to the submission of a successful application for participation. Largely, its role will be transparent to consumers, (a notable exception would be member services functions). The most logical method of policy setting is that previously employed, which also happens to be consistent with quality improvement philosophy: using regional “experts” to study issues/functions/tasks and make logical recommendations regarding standards and protocols, all the time pursuing a “best practice model” for regional managed care practices.”

Member mental health boards bring tremendous strengths to the table, not the least of which is their adherence to public policy and public interest considerations expressed in the Mental Health Code and in state policy. They bring “community” to community mental health. Excessive regionalization of services other than administrative services would jeopardize the sensitivity to local community and culture that mental health boards offer.

As part of its development, the Northern Affiliation participated in a process to describe policies, procedures and protocols in several important areas, such as access to care, clinical standards, administrative services, outcomes/performance, paperwork reduction and community relations. Project teams were formed in each of these areas with representatives from each partner agency. These teams were able to bring their local methods to the table and ultimately draw upon the best practices any one partner had to contribute. The process also had the net effect of standardizing practices across the region.

QUALITY OVERSIGHT AND CORRECTIVE ACTION

Another hallmark of the Northern Affiliation is its emphasis on quality performance, as indicated by its Quality Oversight Plan and process, which has been in place for several years. The Quality Oversight Plan details several types and sources of information, which are used to evaluate the performance of Northern Affiliation providers. The information sources were chosen based on requirements of the MDCH contract and behavioral health managed care standards of the Joint Commission on Accreditation of Healthcare Organizations. The Quality Oversight Plan describes corrective action to be taken when provider organizations do not meet the thresholds established. This consists of Corrective Action Plans, which are developed with quality management staff and monitored by the Quality Oversight Committee. The Quality Oversight Committee meets regularly and consists of staff representatives and consumers.

FUNCTIONAL INTEGRATION

Functional integration is a key consideration in the development and implementation of the HUB structure for North Country Community Mental Health. While efforts to merge with the substance abuse coordinating agency were unsuccessful, attention to coordination remains a priority. Regular meetings between the organizations are used to identify and pursue opportunities for integration when practical and appropriate.

Since most administrative services will be centrally provided, the role of the other partners largely consists of being providers of local services. Even then, efficiencies have been achieved, especially in the areas of quality management (especially customer satisfaction research, which is a primary emphasis of the affiliation quality management effort), regulatory compliance (for example, QISMC), and customer/member services.

This manual has been prepared as a guide to The Northern Affiliation's policies and procedures for comprehensive providers. It provides important information regarding the managed care features incorporated in the comprehensive provider contract.

The manual has been designed to be a useful tool for comprehensive providers and their staff. The Table of Contents provides an outline, which identifies important information organized in a logical manner to follow your interaction with people whose services are managed by the Northern Affiliation.

The Northern Affiliation understands that our relationship with Comprehensive Providers is essential in the commitment to an effective and efficient quality of clinically necessary care. We look forward to a mutually cooperative and beneficial relationship.