



HURON BEHAVIORAL HEALTH  
**OPERATIONAL POLICY**

Policy #: **PM.1.02**  
Issue Date: **08/30/17**

Rev. Date: **12/21/17**  
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**Title: Provider Network – Quality Monitoring of Purchased Services Policy**

**Prepared By: Chief Finance Officer**

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**Purpose:**

To define the guidelines for the quality monitoring process for contracts with external providers and organizations (provider network) at Huron Behavioral Health (HBH).

**Scope:**

This policy applies to all providers and organizations which Huron Behavioral Health (HBH) contracts with for services or goods.

**Information:**

HBH will make good faith efforts to develop quality indicators for all contracts issued.

**Policy:**

1. HBH will monitor the quality of service delivery from contracted providers. This will be done by establishing objectives and performance indicators within the contracts.
2. On an annual basis, providers' performance will be evaluated based on the quality indicators included in the contracts. All residential providers (100%) and a minimum of 50% of non-residential will be included.
3. Providers will be given a memo indicating their status following the provider monitoring process which will state whether they are in:
  - full compliance,
  - substantial compliance
  - non-compliance
4. Substantial compliance and non-compliance will require a plan of correction from the provider.
5. The Finance Department will prepare an annual summary report for contracted providers who have been assessed detailing their report card rating (as defined in #3 above). This report will be submitted to the Administrative Workgroup for review and approval. The Administrative Workgroup is composed of Chief Executive Officer (CEO), Chief Operating Officer (COO), Chief Finance Officer (CFO), Quality/Compliance Manager, Contract Manager, Reimbursement Coordinator, and Information Systems (IS) Manager (see also "[Administrative Workgroup Procedure](#)" QI.2.43).
6. The Administrative workgroup will determine whether HBH continues to contract with providers who are in less than full compliance. A full list of contract providers will be reviewed and approved by the Administrative Workgroup to address providers not included in the current year's review. Approval will be noted in the provider's contract file.
7. Upon approval by the Administrative Workgroup, the summary report will be presented to the HBH Quality Council with details regarding corrective action activities which are being taken by the provider to address ratings of Substantial compliance and Non-compliance.
8. The Provider Review Summary Report will be posted on the HBH website (@ <http://huroncmh.org/provider-report-card/> Review\_Standard\_4.11) and shall also be made available at the main office reception desk for the general public to access the information.
9. Other monitoring activities – Contractors will be monitored for:
  - a. Sufficient administrative capacity and financial resources to meet the terms of the contract
  - b. Required licenses/legal authorization to provide services defined in the contract

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- c. Satisfactory progress toward fulfilling the terms of the contract
  - d. Satisfactory insurance coverage
10. Provider Training Monitoring - HBH will monitor the training requirements of each contract.
- a. Organization Providers will submit quarterly a Human Resource (HR) Log or equivalent that will list their employees and dates of completion of their required trainings. This will be verified during annual on-site review of personnel records.
  - b. Individual Providers will submit evidence of completed training on a quarterly HR Log or equivalent and HBH Contract Manager will monitor and verify completion of required trainings.
11. Other support activities for contractors – Contractors will be provided:
- a. Comprehensive policies and procedures that elaborate on the contract and establishes:
    - agency mission, principles, practice model(s) and system-wide performance indicators;
    - policies and procedures specific to the service area or program;
    - relevant federal and state policy;
    - monitoring procedures;
    - technical assistance procedures;
    - other information necessary to establish consistent practice and policy implementation
  - b. Technical assistance, as needed, to:
    - ensure service continuity and quality;
    - implement new agency-identified best practices; and
    - participate in relevant practice initiatives.
12. When areas of concern are identified, the HBH Contract Manager will:
- a. develop an improvement plan in conjunction with the contractor
  - b. ensure contractor follow-up and remediation

**Definitions/Acronyms:**

*CEO* – Chief Executive Officer  
*CFO* – Chief Finance Officer  
*COA* – Council On Accreditation  
*COO* – Chief Operations Officer  
*HBH* – Huron Behavioral Health  
*HR* – Human Resource  
*IS* – Information Systems

**Forms:**

N/A

**Records:**

Provider report cards will be filed in contractor files and summaries of assessed providers will be saved in a provider report card file in the contract files maintained by the Finance Department in accordance with "[Finance Record Retention Policy](#)" *FM.1.03*).

**Reference(s) and/or Legal Authority**

COA standards  
[FM.1.03 Finance Record Retention Policy](#)

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[QI.2.43 Administrative Workgroup Procedure](#)

**Change History:**

<b>Change Letter</b>	<b>Date of Change(s)</b>	<b>Changes</b>
None	08/30/17	New policy developed to document current practices and comply with COA standards (RPM 10)
A	10/04/17	In "Policy" section #2 added second sentences, in #6 added second & third sentences, added #8 to comply with PIHP Delegated Managed Care Audit POC.
B	12/21/17	In "Policy" section 10a & 10b to comply with MSHN Audit findings and POC.