



Section: Provider Network Management	Policy Name: Provider Network Adequacy Evaluation	Policy Number: 02.12
Owner: Director of Provider Network	Reviewed By: Mila C. Todd	Total Pages: 3
Required By: <input checked="" type="checkbox"/> BBA <input checked="" type="checkbox"/> MDHHS <input type="checkbox"/> Other (please specify): _____	Final Approval By: <u><i>Mila C. Todd</i></u> Mila Todd (Mar 31, 2023 05:58 EDT)	Date Approved: Mar 31, 2023
Application: <input checked="" type="checkbox"/> SWMBH Staff/Ops <input checked="" type="checkbox"/> Participant CMHSPs <input type="checkbox"/> SUD Providers <input type="checkbox"/> MH/IDD Providers <input type="checkbox"/> Other (please specify): _____	Line of Business: <input checked="" type="checkbox"/> Medicaid <input type="checkbox"/> Other (please specify): _____ <input checked="" type="checkbox"/> Healthy Michigan _____ <input type="checkbox"/> SUD Block Grant <input checked="" type="checkbox"/> SUD Medicaid <input type="checkbox"/> CCBHC	Effective Date: 01/01/2014

Policy: SWMBH shall annually evaluate the Region 4 network of providers to determine whether SWMBH and its participant CMHSPs’ network of providers is sufficient to meet member needs, provide adequate access, and satisfy MDHHS Network Adequacy Standards.

Purpose: To ensure that SWMBH has a network of providers able to meet member needs and MDHHS Network Adequacy Standards.

Scope: SWMBH Provider Network Management; Participant CMHSPs

Responsibilities: SWMBH Provider Network Management department will gather applicant information, coordinate with internal and external stakeholders, and prepare the annual Network Adequacy Evaluation.

Participant CMHSPs shall cooperate with SWMBH in evaluating the adequacy of the Region 4 provider network, including providing applicable information, and shall cooperate in any remedial action(s) identified.

Definitions: None.

Standards and Guidelines:

A. Evaluation

- a. The Network Adequacy Evaluation will consider the following:
 - i. Whether there is an SUD provider in the network for each ASAM Level of Care.
 - ii. MDHHS time and distance standards for provider types specified by MDHHS.

02.12 Provider Network Adequacy Evaluation

Final Audit Report

2023-03-31

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