

Section:	Policy Name:		Policy Number:
Provider Network	Provider Network Adequacy Evaluation		02.12
Management			
Owner:	Reviewed By:		Total Pages:
Director of Provider Network	Mila C. Todd	3	
Required By:	Final Approval By:		Date Approved:
<ul><li>☑ BBA ☑ MDHHS</li><li>☐ Other (please specify):</li></ul>	<u>Mila C. Jodu</u> Mila Todd (Mar 31, 2023 05:58 EDT)		Mar 31, 2023
Application:	Line of Business:		Effective Date:
	⊠ Medicaid	$\square$ Other (please specify):	01/01/2014
☑ Participant CMHSPs			
☐ SUD Providers	☐ SUD Block Grant		
☐ MH/IDD Providers	⊠ SUD Medicaid		
☐ Other (please specify):	□ ССВНС		

**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.



- iii. MDHHS enrollee-to-provider ratios for provider types specified by MDHHS.
- iv. Timely appointments.
- v. Network providers' language, cultural competence, and physical accessibility.
- b. The Network Adequacy Evaluation will be reviewed by the Regional Provider Network Management Committee and completed during Q1 of the Fiscal Year being evaluated.

### **B. Reporting Requirements**

- a. SWMBH shall submit the Region 4 Network Adequacy Evaluation to MDHHS at the following intervals:
  - i. Annually by the due date set by MDHHS (see MDHHS-PIHP Master Contract Schedule E).
  - ii. Any time there has been a significant change (as defined by MDHHS) in operations that would affect the adequacy of capacity and services, including:
    - 1. Changes to PIHP services, benefits, geographic service area, composition of or payments to the provider network; or
    - 2. Enrollment of a new population in the PIHP.
- b. The final report shall be provided to the SWMBH Operations Committee and SWMBH Board of Directors for review at their regularly scheduled meetings.

#### References:

42 CFR 438.68 Network Adequacy Standards

42 CFR 438.206 Availability of Services

42 CFR 438.207 Assurances of Adequacy Capacity of Services

MDHHS Network Adequacy Standard Procedural Document (Reporting Requirements (michigan.gov))

Attachments: None.



## **Revision History**

Revision #	Revision Date	Revision Location	Revision Summary	Revisor
01	03/08/23	N/A	Moved to new template.	Mila C. Todd
02	03/08/23	Throughout.	Updated based on MDHHS Network Adequacy Standards requirements.	Mila C. Todd
03	03/17/23	N/A	Reviewed by Regional PNM Committee.	Mila C. Todd

# 02.12 Provider Network Adequacy Evaluation

Final Audit Report 2023-03-31

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