

Section:	Policy Name:		Policy Number:
Customer Services	Medicare Member Services Responsibilities		MHL 06.05
Owner:	Reviewed By:		Total Pages:
Customer Service Manager	Sarah Ameter		3
Required By: BBA DMDHHS NCQA Other (please specify): <u>3-Way Contract</u>	Final Approval By: Sarah Ameter Sarah Ameter (Sep 15, 2021 10:13 EDT)		Date Approved: Sep 15, 2021
Application: SWMBH Staff/Ops Participant CMHSPs SUD Providers MH/IDD Providers Other (please specify):	Line of Business: Medicaid Healthy Michigan SUD Block Grant SUD Medicaid MI Health Link	Other (please specify):	Effective Date: 8/26/2015

- **Policy:** Southwest Michigan Behavioral Health (SWMBH) will treat all members in a manner that respects their rights including identifying the member as well as SWMBH expectations. Member services will be provided in a uniform and equitable manner throughout the network according to Integrated Care Organization (ICO) -SWMBH MI Health Link (MHL) contractual obligations consistent with the Memorandum of Understanding (MOU) and Three-Way Agreement and National Council for Quality Assurance (NCQA) Standards.
- **Purpose:** To ensure that Member Services are promoted and provided according to contract requirements throughout the SWMBH service area/network.

Scope: Member Services

Responsibilities: SWMBH Member Services department shall ensure compliance with the standards and guidelines outlined in this policy and guiding documents.

Definitions:None

Standards and Guidelines:

A. SWMBH Member Services has the responsibility to:

- 1. Provide members a welcoming orientation to services and benefits available and the provider network.
- 2. Offer members information in a format that can be easily understood by persons with limited English proficiency, or for those with developmental disabilities, cognitive impairments, or visual



impairments, regarding accessing mental health, substance use disorder, primary health and other community services and resources.

- 3. Assist members with understanding their rights with regard to choice of provider and participation in decision making about their health care.
- 4. Provide information regarding various recipient rights processes
- 5. Help members with problems and inquiries regarding benefits including discussing medically necessary treatment options regardless of cost or benefit coverage.
- 6. Offer members information about the complaint process and various methods to provide input about services including assisting individuals with the grievance and appeal processes.
 - a. Manage local and regional complaint/grievance and appeal processes in accordance with SWMBH MHL Policy 06.07: Medicare Member Grievance, and SWMBH MHL Policy 06.08: Medicare Member Adverse Benefit Determination Appeal.
 - b. Track and report trends and patterns of problems for the organization.
- 7. Discuss with members the expectations regarding active participation in their case and treatment
- 8. Participate in ICO Advisory Council meetings

References:

- A. NCQA Standard: RR1 Statement of Members' Rights and Responsibilities; RR2 Policies for Complaint and Appeals
- B. MI Health Link 3-Way Contract
- C. SWMBH MHL Policy 06.04: Medicare Limited English Proficiency
- D. SWMBH MHL Policy 06.07: Medicare Member Grievance
- E. SWMBH MHL Policy 06.08: Medicare Member Adverse Benefit Determination Appeal

Attachments: None



Revision History

Revision #	Revision Date	Revision Location	Revision Summary	Revisor
1	8/26/15	SWMBH		
2	6/5/17	SWMBH		
3	1/1/20	References, Standards and Guidelines: A	Updated	Heather Woods
4	8/20/21	Annual Review	Annual Review	Heather Woods
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MHL 06.05 Medicare Member Services Responsibilities

Final Audit Report

2021-09-15

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