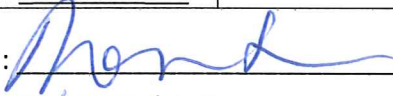


SWMBH Operating Policy 2.17

Subject: Practitioner Office Site Quality		Accountability: Provider Network	Effective Date: 5/16/16	Pages: 2
REQUIRED BY: BBA Section _____ PIHP Contract Section _____ NCQA/URAC Standard <u>NCQA CR-5</u> Other _____		Last Reviewed Date: 5/10/17		Past Reviewed Dates: 5/12/16
LINE OF BUSINESS: <input type="checkbox"/> Specialty Waiver (B/C) <input type="checkbox"/> 1115 Waiver <input type="checkbox"/> Healthy Michigan <input type="checkbox"/> SUD Medicaid <input type="checkbox"/> SUD Block Grant <input checked="" type="checkbox"/> OTHER: <u>Medicare</u>	APPLICATION: <input checked="" type="checkbox"/> SWMBH Staff and Ops <input type="checkbox"/> Participant CMHSPs <input checked="" type="checkbox"/> SUD Providers <input checked="" type="checkbox"/> MH / DD providers <input type="checkbox"/> Other: _____	Last Revised Date:		Past Revised Dates: 5/12/16
Approved: <u></u> Date: <u>5/18/17</u>		Required Reviewer: Director of Provider Network Management and Clinical Improvement		

I. Purpose

To provide an overview of the methods for ensuring practitioner office site quality within Southwest Michigan Behavioral Health's (SWMBH) provider network, and to provide standards for site physical accessibility, physical conditions, adequacy of waiting- and therapy/examining-room space, and adequacy of medical/treatment record keeping.

II. Policy

It is the policy of SWMBH to provide service locations that are safe and accessible. Practitioner office sites must be physically accessible to all served with adequate space; be clean, sanitary and well maintained; have adequate waiting and therapy/exam room space; and maintain confidentiality of protected health information. Concerns regarding office site quality will be addressed by the SWMBH Provider Network Department in order to institute appropriate remediate actions.

III. Standards and Guidelines

A. Office Site Standards

1. Physical Conditions/Physical Accessibility

- a. The facility is clearly identifiable from the road.
- b. Adequate parking is provided, including handicapped spaces.
- c. Handicapped access to facility, therapy / exam rooms, and restrooms is provided.
- d. Exits, corridors, and hallways are free of obstruction.
- e. Adequate waiting room seating area is available for each customer.
- f. Safe and sanitary environment is maintained throughout the facility.

2. Adequacy of Therapy/Exam Room Space

- a. Adequate space is provided for the practitioner, customer, and at least one family member or other support in each therapy/exam room.
- b. Rooms allow for privacy of conversation (voices of normal volume cannot be heard through walls).

3. Adequacy of Medical/Treatment Record Keeping

- a. Medical records reflect an organized system for consistent recording and documentation of customer information.

SWMBH Operating Policy 2.17

- b. Medical records are stored in a manner that allows for easy retrieval for customer care.
 - c. Medical records are maintained in a confidential and secure manner that allows access by authorized personnel only.
 - d. Medical records are not released without proper authorization.
- B. SWMBH Provider Network Department representatives will receive and track member complaints from their respective Customer Services Departments on a monthly basis.
- C. SWMBH Provider Network representatives who have been trained in site visits will conduct an office-site quality visit when a practitioner receives any member complaint regarding physical accessibility, physical conditions, adequacy of waiting- and therapy/examine-room space, or adequacy of medical/treatment record keeping.
- D. The SWMBH office-site survey tool will be used by the Provider Network representative to conduct the site visit. The site visit will take place within 60 days of the complaint receipt. A summary of the site visit including findings will be given to the practitioner.
- E. If the practitioner is deemed to have not met the established SWMBH thresholds for office-site criteria, then the practitioner will be requested to develop a plan of correction to address identified issues. Follow-up visits will be conducted every six months, at a minimum, until the deficient thresholds are met.
- F. If a practitioner receives three (3) or more customer complaints about physical accessibility, physical site maintenance/cleanliness, adequacy of waiting and therapy/examination-room space, or adequacy of medical/treatment record keeping within twelve (12) months, or if a complaint is determined to be severe enough where members health and well-being is potentially endangered or endangered, sanctions may be imposed in accordance with SWMBH Operating Policy 2.13.

IV. Definitions

None

V. References

NQCA Credentialing and Re-Credentialing CR-5

VI. Attachments

None

SCORING INSTRUCTIONS

2 = compliance

1 = partial compliance

0 = non-compliance or insufficient levels of compliance

N/A = requirement not applicable to this type of review or this provider

Review Date: _____

Provider: _____

Site: _____

Reviewer: _____

	Possible Score	Actual Score	Comments	Corrective Action Plan
Standard 1 - PHYSICAL CONDITIONS / ACCESSIBILITY				
Facility is clearly identifiable from the road	0			
Adequate parking is provided, including handicapped spaces.	0			
Handicapped access to facility, therapy/exam rooms, and restrooms is provided	0			
Exits, corridors, and hallways are free of obstruction.	0			
Adequate waiting room seating area is available for each customer.	0			
Safe and sanitary environment is maintained throughout the facility.	0			
Section 1 Total:				
Standard 2 - ADEQUACY OF THERAPY / EXAM ROOM SPACE				
Adequate space is provided for the practitioner, customer, and at least one family member or other support in each therapy/exam room.	0			
Rooms allow for privacy of conversation (voices of normal volume cannot be heard through walls).	0			
Section 2 Total:				
Standard 3 - ADEQUACY OF MEDICAL / TREATMENT RECORD KEEPING				

Medical records reflect an organized system for consistent recording and documentation of customer information.	0			
Medical records are stored in a manner that allows for easy retrieval for customer care	0			
Medical records are maintained in a confidential and secure manner that allows access by authorized personnel only.	0			
Medical records are not released without proper authorization.	0			
Is a Benefit Verification System utilized to ensure continuity of benefits at each visit?	0			
Section 3 Total:				
Standard 4 - STAFF QUALIFICATIONS AND CREDENTIALING				
Complete this section if agency is credentialed as an organization or if there are staff who bill "incident to" SWMBH credentialed practitioners.				
Staff shall possess the appropriate qualifications as outlined in their job descriptions, including the qualifications for all the following: A. Educational background (Primary source verification required prior to working with customers) B. Relevant work experience	0			
Monitoring for Exclusion from Participation in Federal Healthcare Programs. Each employee is to be run through OIG exclusion prior to hire and annually.	0			
Checks of the National Practitioners Data Base at least every three years	0			

Certification, registration, and licensure as required by law. (Primary source verification required prior to working with customers and whenever licensure is due for renewal)	0			
Criminal Background Checks: there is evidence that provider conducts verification of criminal background checks prior to hire using the verification protocol required by SWMBH policy 2.16; bi-annual verification of the status of criminal background of current employees.	0			
Any staff with CAADCs or Development Plans? If so, is the proper supervision provided by a CCS?	0			
Are staff required to complete specific trainings, i.e. LEP, G&A, HIPPA, HITECH, Corporate Compliance, Cultural Competence?	0			

Section 4 - STAFF QUALIFICATIONS AND CREDENTIALING Total:

Scoring Summary	Possible Score	Actual Score	Percent
Section 1 - PHYSICAL CONDITIONS / ACCESSIBILITY	0	0	
Section 2 - ADEQUACY OF THERAPY / EXAM ROOM SPACE	0	0	
Section 3 - ADEQUACY OF MEDICAL / TREATMENT RECORD KEEPING	0	0	
Section 4 - STAFF QUALIFICATIONS AND CREDENTIALING	0	0	
OVERALL	0	0	0

