

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEASTERN MICHIGAN		<i>Policy and Procedure</i>		
Department Utilization Management		# of Pages: 3		
Policy Name REGION-WIDE SERVICE AUTHORIZATION		Type of Policy: [] WCHO [<input checked="" type="checkbox"/>] Regional [] Network		
Policy Number 08.003	Effective Date	Revision Date	Approval Date 4/19/05	
Administrative/Board of Directors Sign Off				
Administrative Signature:			Date:	
Board of Directors Signature:			Date:	

I. PURPOSE

To ensure that consumers receive services that are appropriate to need, type, intensity, amount and frequency (medically necessary) and that services are consistent with their wants and desired outcomes

II. APPLICATION

None

III. DEFINITIONS

Band of Care: Regionally agreed to organization of service programs based on service intensity

Comprehensive Specialty Services Network (CSSN): Local Community Mental Health Services Provider designated by the WCHO to receive Medicaid funding for a specific county

Service Authorization: Formal approval for the delivery of services identified in the Person Centered Plan by providers within the network

IV. POLICY

A. Initial service eligibility decisions will be based on the Service Eligibility Guidelines attached to this document.

B. All services provided in the region will authorized based on a Person Centered Plan completed in accordance with Public Act 258. To minimize any delay in service, while the Person Centered Plan is being developed, each Board will provide an initial authorization of sufficient duration and type to facilitate treatment and the completion

of the plan. Continuing stay authorizations will also be based on the Person Centered Plan.

- C. Procedures for translating Person Centered Planning materials into authorizations will be locally defined. These locally defined procedures will adhere to all reporting and service encounter data requirements imposed by MDCH.
- D. Once the authorization process has been completed a Band of Care will be assigned. The Band of Care protocol is designed to ensure that similar levels of service are provided for similarly abled individuals across the region. The regional Utilization Review Committee will review Band of Care assignments to determine if comparable services are being provided across the region.
- E. Disputes regarding services requested or identified in the person centered planning process will be handled locally through the planning process. Disputes by consumers regarding the denial of a service requested in the person centered plan by the authorizing agent will be handled through grievance and appeal mechanisms and/or local dispute resolution processes. Provider disputes regarding authorizations will be comply with local contract appeal procedures in each county.

V. EXHIBITS

None

VI. REFERENCES

- A. Regional Service Eligibility Criteria (Attachment A)
- B. Regional Bands of Care Criteria (Attachment B)
- C. CSSN Authorization Policies and Procedures (Attachment C)

VII. PROCEDURES

WHO	DOES WHAT
Local Access Center	<ol style="list-style-type: none">1. Receives call/request for services2. Determines service eligibility using the regional Service Eligibility Service document3. If eligible for service, provides initial authorization for care and development of person centered plan4. If ineligible, refers caller/requestor to community resources
Comprehensive Specialty Services Network (CSSN)	<ol style="list-style-type: none">1. Completes person centered planning process and develops service recommendations using locally defined protocols2. Translates person centered plan into service authorization format that complies with MDCH

encounter reporting data items

Local Authorization Designee

3. Requests approval for service authorizations from local designee
4. Assigns Band of Care based on services in plan
5. Re-enters/requests ongoing service adjustments based on changes to the person centered plan
6. Adjudicates claims against authorizations

Consumer/ Supports
Coordinator/Case Manager

1. Authorizes services as requested and generates authorization form
 2. If services are not authorized, informs consumer and supports coordinator/case manager.
1. Reconvenes person centered planning process to review and requests for change
 2. If unable to negotiate change in service as requested, provides consumer with dispute resolution and grievance and appeal notices
 3. Assists the consumer in filing grievance or appeal as requested

CSSN

1. Pays claims against authorization
2. Forwards encounter/claims data to WCHO for reporting information to MDCH

Washtenaw Community Health
Organization

1. Annually reviews CSSN authorization process and procedures to insure compliance with regional protocols
2. Quarterly reviews Bands of Care data to ensure consistency across the region in services provided