

## FY2025 Contract Monitoring Aggregate Report

#### **OVERVIEW**

Region 10 PIHP annually monitors and evaluates its Provider Network to ensure compliance with federal and state regulations, as well as contractual requirements. Concurrently, the PIHP is required to monitor and evaluate any entity to which it has delegated a managed care administrative function to ensure the provider is appropriately managing its charged delegated responsibilities. The PIHP monitors its Provider Network on an ongoing basis with formal reviews taking place annually.

The purpose of this report is to summarize the findings of the FY2025 Region 10 PIHP Contract Monitoring evaluations of the Community Mental Health Services Programs (CMHSPs) and Substance Use Disorder (SUD) Provider Network.

#### PIHP NETWORK

Region 10 PIHP conducts many managed care administrative functions centrally, while contracting with four (4) CMHSP Providers and seventeen (17) SUD Providers (Prevention, Treatment and Recovery Housing) for the management of specific delegated administrative functions and service requirements. These responsibilities are detailed in the PIHP / Provider contracts as applicable.

#### ANNUAL MONITORING COMPONENTS

The FY2025 annual monitoring process began with the implementation of new Tools for both CMHSP and SUD providers. The CMHSP Tool was redesigned and standards thoroughly analyzed and rewritten to provide greater efficiency and improved data quality. These changes shifted standards from a broad, general-purpose approach to a targeted, efficient one for verifying standard conformance, emphasizing monitoring of requirements in procedure.

The PIHP piloted the SUD State Standardized Tool developed by a subcommittee of the statewide SUD Services Directors group. The purpose of utilizing the workgroup tool is to afford providers reciprocity when contracting with multiple PIHPs, thus reducing administrative burden. This single tool encompassed all aspects of SUD services rather than the PIHP's previous monitoring structure which included separate tools for Treatment, Prevention, and Recovery Housing. In addition, the PIHP created a supplemental Companion Tool which included standards not listed within the standardized tool but are considered important to the PIHP.

The first phase of contract monitoring is the Desk Audit Review. This internal review included key PIHP staff (Subject Matter Experts) reviewing materials the PIHP already had on file as well as provider submission of operational and verification documents to the PIHP. These collective materials included policies and process documents, quality improvement efforts, and performance reports for overall compliance and conformance.

The next phase of monitoring centered around on-site visits with all contracted providers. The Contract Monitoring Team visited provider locations, toured facilities, examined training records and privileging and credentialing records, and reviewed the contract monitoring tool(s) with provider staff. Supplemental evidence was accepted by the PIHP during the visit and any outstanding items at the completion of the visit were requested to be submitted within one (1) week.

Phase three included the incorporation of the Clinical Utilization Review conducted by the PIHP Utilization Management Team into the new SUD standardized tool. Historically, this review took place apart from the contract monitoring process. This change provides a more complete picture of SUD providers' compliance with contractual requirements.

The final phase involves the final scoring and compilation of providers formal Contract Monitoring Reports, which detail specific findings and overall performance. Any finding that did not receive a compliance score of "Met" (CMHSP tool / SUD Companion Tool) or a score of 2 (SUD standardized tool) required the provider to submit a Plan of Correction (POC) to the PIHP. Provider POCs address steps that will be taken to assess and improve performance, measurement criteria and timeframes for issue resolution. POCs were due within thirty (30) days of report issuance.

#### **SCORING STANDARDS**

CMHSP Tool / SUD Companion Tool: For each performance standard within the applicable domain areas, the provider's compliance was assessed to be Met, Not Met, or Not Applicable (N/A). For all standards where the provider was determined to have "Met" compliance, no follow-up action was required. For all other assessment scores, a POC was required from the provider.

SUD Standardized Tool: For each performance standard within the applicable domain areas, the provider's compliance was assessed using the following scale of measurement:

- 0 = No Documentation Submitted
- 1 = Partial Documentation Submitted
- 2 = Full Documentation Submitted
- NA = Not Applicable

### **RECOMMENDATIONS**

- 1. Renewal of contracts and continuation of delegated managed care functions.
- 2. Examination of overall monitoring compliance scores to address outliers.
- 3. Specialized reviews of Providers where appropriate to ensure continued compliance of contractual requirements, including scheduling internal review meetings and facilitating additional onsite visits with Providers to further assess performance capability.

#### **EXHIBITS**

Exhibit A: FY2025 Contract Monitoring Aggregate Report Scores S:\Region 10\Contract Files\Contract Monitoring\FY2025

## **AVERAGE SCORES OVERALL**

#### **CMH PROVIDERS**

MONITORING TIMEFRAME	GHS	LCMH	SCMH	SC CMH	
FY2025 Annual	91%	92%	88%	89%	
			СМН	letwork Average:	90%

#### SUD PROVIDERS – TREATMENT

MONITORING TIMEFRAME	BIOMED	CCSEM	СРІ	FOH	LCMH	LIST	NPI	SHRC	SAHLM	SCMH	SC CMH	
FY2025 Annual	78%	89%	88%	93%	86%	96%	90%	88%	87%	100%	95%	
SUD Treatment Network Average:												90%

### **SUD PROVIDERS – PREVENTION**

MONITORING TIMEFRAME	CCSHGC	GCPC	НОРЕ	IMPACT	sccs						
FY2025 Annual	83%	98%	93%	100%	96%						
SUD Prevention Network Average:											

### **SUD PROVIDER – RECOVERY HOUSING**

MONITORING TIMEFRAME	GLRM	
FY2025 Annual	94%	
SUD Recovery Housin	g Network Average:	94%

# **CMH AVERAGE SCORES BY DOMAIN**

DOMAIN	GHS	LCMH	sсмн	SC CMH	CMH NETWORK AVERAGES (by Domain)						
	PART 1: CONTRA	ACTUAL REQUIREMEN	NTS								
Quality Improvement	100%	100%	89%	89%	95%						
Information Systems & Data Management	100%	100%	100%	100%	100%						
Financial Management	100%	80%	100%	100%	95%						
Corporate Compliance	100%	100%	100%	100%	100%						
CMHSP (Provider) Network	50%	50%	100%	50%	63%						
Certified Community Behavioral Health Clinic (CCBHC)	100%	100%	100%	100%	100%						
PART 2: CC	NTRACTUAL REQU	IREMENTS / DELEGAT	TED FUNCTSIONS								
QAPIP	100%	100%	100%	100%	100%						
Performance Measurement	100%	100%	100%	100%	100%						
Staff Qualifications & Training	33%	100%	100%	100%	83%						
Utilization Management	50%	0%	0%	0%	13%						
Access	100%	100%	-	100%	100%						
Customer Service	100%	100%	100%	100%	100%						
Enrollee Grievance Process	0%	-	0%	-	0%						
Enrollee Rights & Protections	100%	100%	100%	0%	75%						
Subcontracts & Delegation	100%	-	-	100%	100%						
Provider Network Selection & Management	100%	100%	100%	100%	100%						
Credentialing	88%	88%	75%	100%	88%						
Coordination of Care	100%	100%	0%	100%	75%						
Appeals	100%	100%	100%	100%	100%						
Disclosures	100%	100%	100%	100%	100%						
	PART 3: Sub	contractor Site Visits									
Subcontractor Site Visits 100% 100% 100% 0%											
	PART 4: Outstan	ding Plans of Correct	ion								
Outstanding Plans of Correction	N/A	N/A	N/A	0%	0%						
OVERALL (by Provider)	91%	92%	88%	89%							
			CMH Network Ave	erage (of all Domains):	90%						

DOMAIN	BIOMED	ссѕнсс	CCSEM	СРІ	FOH	GCPC	GLRM	Норе	IMPACT	LCMH	LIST	NPI	SHRC	SAHLM	SCMH	sccs	SC CMH	SUD NETWORK AVERAGES by Domain
			CLINIC	AL CHA	RT STAI	NDARD:	S / UTILI	ZATION	MANAGE	MENT -	- UTILIZA	ATION R	EVIEW					
1. Screening, Admission, Assessment	88%	NA	92%	98%	96%	NA	100%	NA	NA	86%	100%	96%	92%	100%	100%	NA	100%	96%
2. Individual Treatment/Recovery Plan	88%	NA	100%	82%	100%	NA	NA	NA	NA	66%	98%	100%	79%	78%	NA	NA	100%	89%
3. Charitable Choice	NA	NA	100%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	100%	NA	NA	NA	100%
4. Record Documentation & Progress Notes	100%	NA	100%	100%	100%	NA	NA	NA	NA	100%	100%	100%	100%	25%	NA	NA	100%	93%
5. Coordination of Care	33%	NA	100%	100%	100%	NA	NA	NA	NA	50%	100%	75%	80%	100%	NA	NA	100%	84%
6. Priority Populations	NA	NA	100%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	100%
7. Discharge, Continuity in Care	0%	NA	NA	100%	100%	NA	NA	NA	NA	92%	92%	92%	67%	92%	NA	NA	NA	79%
8. Appeals /Grievances	0%	NA	0%	0%	0%	NA	NA	NA	NA	NA	50%	0%	67%	0%	NA	NA	100%	24%
9. Case Management	NA	NA	NA	100%	NA	NA	NA	NA	NA	NA	NA	NA	100%	NA	NA	NA	NA	100%
10. Outpatient (ASAM Level 1.0)	100%	NA	100%	100%	100%	NA	NA	NA	NA	100%	100%	100%	100%	NA	NA	NA	100%	100%
11. Intensive Outpatient (ASAM Level 2.1)	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	100%	NA	NA	NA	NA	NA	100%
12. Partial Hospitalization (ASAM Level 2.5)	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
13. Withdrawal Management- Clinical Chart Review	NA	NA	NA	67%	92%	NA	NA	NA	NA	NA	NA	75%	83%	67%	NA	NA	NA	77%
14. Residential	NA	NA	NA	100%	100%	NA	NA	NA	NA	NA	NA	88%	88%	100%	NA	NA	NA	95%
15. Methadone Services	57%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	60%	NA	NA	NA	NA	59%
16. Medication Assisted Treatment	75%	NA	NA	NA	67%	NA	NA	NA	NA	NA	100%	100%	70%	NA	NA	NA	NA	82%

DOMAIN	BIOMED	CCSHGC	CCSEM	СРІ	FOH	GCPC	GLRM	Норе	IMPACT	LCMH	LIST	NPI	SHRC	SAHLM	SCMH	sccs	SC CMH	SUD NETWORK AVERAGES by Domain
17. Women's Specialty Services	NA	NA	NA	NA	100%	NA	NA	NA	NA	42%	NA	NA	100%	NA	NA	NA	NA	81%
18. Peer Recovery Coach Services	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
19. Recovery Housing	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
20. SUD Health Home- Clinical Chart Review	100%	NA	NA	NA	100%	NA	NA	NA	NA	NA	NA	100%	100%	NA	NA	NA	NA	100%
				PROV	IDER ST	AFF STA	ANDARD	S / ADN	/INISTRAT	TIVE RES	PONSIB	ILITIES						
21. Prevention Services	NA	100%	NA	NA	100%	100%	NA	100%	100%	100%	NA	NA	81%	NA	NA	100%	NA	98%
22. Verification- Staffing and Supervision	86%	100%	93%	100%	94%	100%	100%	100%	NA	100%	93%	94%	NA	94%	100%	100%	94%	96%
23. SUD Health Home Specific	100%	NA	NA	NA	100%	NA	NA	NA	NA	NA	NA	100%	100%	NA	NA	NA	NA	100%
24. Trainings - Peer Recovery/Recovery Support	100%	NA	100%	100%	100%	NA	100%	NA	NA	100%	100%	50%	100%	100%	100%	NA	100%	96%
25. Recovery Housing Specific Staff/Volunteers	NA	NA	NA	NA	100%	NA	100%	NA	NA	NA	NA	0%	100%	NA	NA	NA	NA	75%
26. Enhanced Women's Specialty Specific/ Women's Treatment Services	NA	NA	NA	NA	100%	NA	NA	NA	NA	100%	NA	NA	100%	NA	NA	NA	NA	100%
27. Medication Assisted Treatment	0%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	100%	NA	NA	NA	NA	50%
28. Acupuncture	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
29. Adolescent Services	NA	NA	NA	NA	50%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	50%
30. Trainings- All Staff	50%	50%	92%	50%	92%	100%	100%	80%	100%	NA	92%	50%	92%	50%	NA	90%	NA	78%
					PRO	VIDER S	TANDA	RDS / PO	OLICIES &	PROCED	URES							
31. Credentialing	100%	83%	92%	90%	92%	100%	100%	100%	100%	100%	100%	80%	100%	83%	100%	100%	100%	95%
32. Information Requirements, Notices and Client Service Related	89%	100%	79%	100%	100%	88%	94%	100%	100%	100%	100%	78%	86%	57%	100%	88%	100%	92%

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DOMAIN	BIOMED	ссѕнсс	CCSEM	СРІ	FOH	GCPC	GLRM	Норе	IMPACT	LCMH	LIST	NPI	SHRC	SAHLM	SCMH	sccs	SC CMH	SUD NETWORK AVERAGES by Domain
33. Provider Requirements	92%	79%	94%	100%	100%	100%	97%	70%	100%	100%	98%	100%	100%	100%	100%	100%	94%	96%
34. Compliance	75%	NA	75%	100%	100%	NA	100%	NA	NA	100%	100%	100%	100%	100%	100%	NA	100%	96%
35. Finance	100%	100%	100%	100%	50%	NA	50%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	94%
36. Intensive Outpatient (ASAM 2.1)	50%	NA	0%	NA	100%	NA	NA	NA	NA	NA	NA	100%	100%	NA	NA	NA	NA	88%
37. Partial Hospitalization (ASAM 2.5)	NA	NA	NA	NA	100%	NA	NA	NA	NA	NA	NA	NA	100%	NA	NA	NA	NA	100%
38. Withdrawal Management- Policy/Procedure	NA	NA	NA	100%	100%	NA	NA	NA	NA	NA	NA	NA	100%	NA	NA	NA	NA	100%
39. Residential	NA	NA	NA	0%	100%	NA	NA	NA	NA	NA	NA	67%	NA	100%	NA	NA	NA	67%
40. Priority Populations - Coordination of Care	33%	NA	100%	100%	100%	NA	NA	NA	NA	0%	100%	67%	33%	100%	100%	NA	0%	67%
41. Medication Assisted Programs	83%	NA	0%	0%	100%	NA	NA	NA	NA	100%	100%	0%	100%	100%	100%	NA	100%	71%
42. Adolescent, Young Adult, and Transitional Age Youth Services	NA	NA	100%	NA	100%	NA	NA	NA	NA	NA	NA	0%	NA	NA	NA	NA	NA	67%
43. Recovery Housing	100%	NA	NA	NA	100%	NA	100%	NA	NA	NA	NA	100%	100%	NA	NA	NA	NA	100%
44. SUD Health Homes	NA	NA	NA	NA	100%	NA	NA	NA	NA	NA	NA	100%	83%	NA	NA	NA	NA	94%
45. Provider General Requirements	NA	100%	100%	100%	100%	100%	NA	100%	100%	100%	NA	NA	100%	NA	NA	100%	NA	100%
							PIHP C	OMPAN	ION TOO									
Compliance	75%	0%	50%	75%	25%	100%	100%	100%	100%	100%	75%	75%	75%	75%	75%	0%	75%	69%
Performance Indicators	100%	NA	100%	100%	100%	NA	100%	NA	NA	NA	100%	100%	100%	100%	NA	NA	NA	100%
Finance	100%	0%	100%	100%	100%	100%	80%	100%	100%	NA	83%	100%	100%	100%	100%	100%	NA	90%
Training	100%	100%	100%	100%	100%	100%	100%	100%	100%	NA	100%	100%	100%	100%	NA	100%	NA	100%
P&C	100%	NA	100%	100%	100%	NA	100%	NA	NA	NA	100%	100%	100%	100%	NA	NA	NA	100%
Sobering Facility	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	100%	NA	NA	NA	NA	NA	100%

DOMAIN	BIOMED	ссѕнбс	CCSEM	СРІ	FOH	GCPC	GLRM	Норе	IMPACT	LCMH	LIST	NPI	SHRC	SAHLM	SCMH	sccs	SC CMH	SUD NETWORK AVERAGES by Domain
Outstanding POCs	0%	NA	33%	100%	25%	100%	67%	NA	NA	100%	100%	50%	100%	0%	100%	100%	NA	67%
PROVIDER	BIOMED	CCSHGC	CCSEM	СРІ	FOH	GCPC	GLRM	Норе	IMPACT	LCMH	LIST	NPI	SHRC	SAHLM	SCMH	sccs	SC CMH	
OVERALL (by Provider)	78%	83%	89%	88%	93%	98%	94%	93%	100%	86%	96%	90%	88%	87%	100%	96%	95%	
SUD Network Average (of all Domains):												91%						

### **PROVIDER NAMES & ACRONYMS**

BIOMED Biomed Behavioral Healthcare
CCSEM Catholic Charities of Southeast MI

CCSHGC Catholic Charities of Shiawassee and Genesee Counties

CPI Community Programs, Inc.

FOH Flint Odyssey House

GCPC Genesee County Prevention Coalition

GHS Genesee Health System

GLRM Great Lakes Recovery Mission HOPE Hope Network-New Passages

IMPACT Incorporation to Maximize Personal Achievement with Community Training

LCMH Lapeer County Community Mental Health

NPI New Paths, Inc.

SHRC Sacred Heart Rehabilitation Center
SAHLM Salvation Army Harbor Light Macomb
SCCS Sanilac County Counseling Services

SCMH Sanilac County Community Mental Health
SC CMH St. Clair County Community Mental Health

**Regarding Providers contracted with the PIHP for both CMHSP and SUD Services:** Performance standards in several domains may be duplicated in each respective tool. The PIHP has addressed this by including all items on the CMHSP Monitoring Tool and marking appropriate duplicated standards as "not applicable" on other applicable monitoring tools for that CMHSP.