

## PATHWAYS CMH

<b>POLICY TITLE:</b> Network Capacity and Analysis	<b>CATEGORY:</b> Contract Provider Network	
<b>EFFECTIVE DATE:</b> June 26, 2013	<b>BOARD APPROVAL DATE:</b> June 25, 2013	
<b>REVIEWED DATE:</b> June 11, 2016	<b>REVISION(S) TO POLICY STATEMENT:</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>OTHER REVISION(S):</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>RESPONSIBLE PARTY:</b> Contract Manager	<b>CEO APPROVAL:</b> Mary Swift, CEO	

### **APPLIES TO:**

Pathways Personnel  
Contract Providers

### **POLICY:**

Pathways is responsible for maintaining and monitoring a network of appropriate providers to meet the needs of the anticipated number of consumers in the service area.

### **PURPOSE:**

To comply with the BBA requirement, 42 CFR section 438.206(b) (1) (I-V), 438.206(c) (1) (ii-iv) (2), 42 CFR Part 438.207(b) (2), and MDCH contract requirements, Pathways will perform a formal gap analysis to determine whether the panel of providers is sufficient to meet the needs of consumers, provide adequate access, provide reasonable choice of provider, and provide the full range of services covered by the benefit plan. Based on this analysis, Pathways will determine where there are specific gaps in service availability.

### **DEFINITIONS:**

- 1. Provider** – A person or agency that supplies mental health services to Pathways consumers, whether directly employed by Pathways or through Contracted Services.

### **REFERENCES:**

- BBA 42 CFR section 438.206(b) (1) (I-V)
- BBA 42 CFR Part 438.206(c) (1) (ii-iv) (2)
- BBA 42 CFR Part 438.207(b) (2),
- Medicaid Provider Manual
- MDCH/CMHSP Contract, Sections 3.1 and 6.4
- NorthCare Procurement Policy
- NorthCare Selection Policy
- Pathways Procurement Policy
- Pathways Selection Policy

### **HISTORY:**

Dates Reviewed: 05/29/14; 06/16/15; 06/11/16

Dates Revised: 05/29/14; 06/16/15

Dates Approved: 06/21/13; 05/30/14; 06/16/15 (CEO), 06/25/13 (Board)

## **PROCEDURES:**

1. Pathways will assess consumer needs, and assure adequate access to services in appropriate settings to meet those care needs, while planning for the expansion, adjustment, and improvement of the Provider Network as deemed necessary. In addition, Pathways will assure:
  - a. That the Provider Network responds to the cultural, racial, and linguistic needs (including interpretive services as necessary) of the service area; providing services with necessary and reasonable accommodations, and furnished in a culturally competent manner.
  - b. That services are accessible, taking in to account travel time, availability of public transportation, and other factors that may affect accessibility; and, that the location of primary service providers is within 60 minutes/60 miles from beneficiary's residence for office or site-based services.
  - c. That providers do not segregate Pathways consumers in any way from other consumers receiving their services, and offer hours of operation to Pathways consumers that are no less than the hours offered other consumers receiving their services.
  - d. That Pathways does not contract or employ providers previously or currently sanctioned or excluded from participation in federal health care programs under Section 1128 or 1128a of the Social Security Act.
  - e. That Pathways does not discriminate against particular providers that serve high-risk populations or who specialize in conditions that require costly treatment.
  - f. The providers are regularly monitored to ensure all needed services are available and accessible to consumers, and to determine whether provider capacity is sufficient in number, mix, and geographic distribution to assure adequate access to serve the expected consumer population in the Pathways service area.
  - g. That providers are responsive to individual needs, provide for clean comfortable service facilities, have adequate office hours, and appropriately address other quality of care issues.
  - h. That corrective action is taken if there is failure to comply with applicable requirements for availability of services (42 CFR Part 438.206) or assurance of adequate capacity and services (42 CFR Part 438.207).
2. Pathways' Gap Analysis will be conducted once each fiscal year.
3. Pathways will consider the expected utilization of services, numbers and types (in terms of training, experience, and specialization) of providers required, number of providers who are not accepting new consumers, geographic location of providers and consumers, considering distance, travel time and transportation availability, including physical access for consumers with disabilities.
4. Information for the gap analysis may come from a variety of sources, with the intent of obtaining a comprehensive overview of system needs. Such sources may include but are not limited to the following:
  - Program Planning Guideline (PPG) submission to MDCH
  - Customer Satisfaction Surveys
  - Geo-mapping of provider locations to consumer zip codes
  - Historical QI, TEDS, and Service Data
  - Incidence and Prevalence Data

- Information as requested from providers
  - Consumer data and Consumers served
  - Occupancy rates of residential providers
  - Provider Profiles, Numbers and Specialties
  - Other information as deemed appropriate
5. Pathways' Contract Manager, or designee, will ensure that the report is reviewed by the Pathways' Utilization Management Monitoring Team. Their review will include an analysis of service and provider "gaps" or potential needs. The committee will deliver any recommendations to Pathways' Contract Manager.
  6. Pathways' Contract Manager will complete the report and deliver it to Pathways' CEO who shall place it on the Pathways' Board agenda for discussion and action. Pathways' Contract Manager and the Clinical Practices Supervisor will be accountable for implementing specific procurement and/or improvement initiatives approved by the Board or as requested by the CEO.
  7. Providers who enter into contract provider arrangements are required to comply with Pathways Network Management Policies and Procedures. In addition, all contracts, contract renewals and performance monitoring will be provided to NorthCare by attachments in the Program Management Section of ELMER.