

**Michigan Department of Health and Human  
Services (MDHHS)  
Excerpts**

**Behavioral Health and Developmental Disabilities  
Administration**

**Prepaid Inpatient Health Plans**

**2014–2015**

**EXTERNAL QUALITY REVIEW  
COMPLIANCE MONITORING REPORT**

*for*

**Region 7—Detroit Wayne Mental  
Health Authority**

October 2015



3133 East Camelback Road, Suite 100 • Phoenix, AZ 85016-4545  
Phone 602.801.6600 • Fax 602.801.6051

Table 2-1 below presents the results of the 2014–2015 follow-up compliance review of **Detroit Wayne Mental Health Authority**.

Table 2-1—Summary of 2014–2015 Compliance Review Results for Detroit Wayne Mental Health Authority									
Standard	Total Elements	Total Applicable Elements	Number of Elements					Compliance Score	
			<i>M</i>	<i>SM</i>	<i>PM</i>	<i>NM</i>	<i>NA</i>		
<b>I</b> QAPIP Plan and Structure	20	20	20	0	0	0	0	100%	
<b>II</b> Performance Measurement and Improvement	24	24	24	0	0	0	0	100%	
<b>III</b> Practice Guidelines	17	14	14	0	0	0	3	100%	
<b>IV</b> Staff Qualifications and Training	9	6	6	0	0	0	3	100%	
<b>V</b> Utilization Management	21	21	21	0	0	0	0	100%	
<b>VI</b> Customer Services	13	10	10	0	0	0	3	100%	
<b>VII</b> Enrollee Grievance Process	16	13	13	0	0	0	3	100%	
<b>VIII</b> Enrollee Rights and Protections	37	33	32	0	1	0	4	98%	
<b>IX</b> Subcontracts and Delegation	8	4	4	0	0	0	4	100%	
<b>X</b> Provider Network	13	13	13	0	0	0	0	100%	
<b>XI</b> Credentialing	6	6	6	0	0	0	0	100%	
<b>XII</b> Access and Availability	20	17	16	0	1	0	3	97%	
<b>XIII</b> Coordination of Care	7	4	4	0	0	0	3	100%	
<b>XIV</b> Appeals	18	15	15	0	0	0	3	100%	
<b>XV</b> Disclosure of Ownership, Control, and Criminal Convictions	8	8	4	3	1	0	0	84%	
<b>Total</b>	<b>237</b>	<b>208</b>	<b>202</b>	<b>3</b>	<b>3</b>	<b>0</b>	<b>29</b>	<b>99%</b>	

*M*=Met, *SM*=Substantially Met, *PM*=Partially Met, *NM*=Not Met, *NA*=Not Applicable

**Total Elements:** The total number of elements in each standard.

**Total Applicable Elements:** The total number of elements within each standard minus any elements that received a score of *NA*.

**Compliance Score:** The overall percentages were obtained by adding the number of elements that received a score of *Met* to the weighted (multiplied by 0.75) number of elements that received a score of *Substantially Met* and the weighted (multiplied by 0.50) number that received a score of *Partially Met*, then dividing this total by the total number of applicable elements.

Appendix A of this report presents details of the review of the standards.

## Standard VIII Enrollee Rights and Protections

### Recommendations

The PIHP misinterpreted the contract requirement to provide each beneficiary with the estimated cost to the PIHP of each covered support and service. **Detroit Wayne Mental Health Authority** must develop a process to ensure that it provides all beneficiaries the estimated cost to the PIHP of each covered support and service received. This information must be provided to beneficiaries annually (e.g., at the time of person-centered planning).

Results—Standard VIII						
Met	=	32	X	1.0	=	32.00
Substantially Met	=	0	X	.75	=	0.00
Partially Met	=	1	X	.50	=	0.50
Not Met	=	0	X	.00	=	0.00
Not Applicable	=	4				
Total Applicable	=	33	Total Score	=	32.50	
Total Score ÷ Total Applicable						= 98%

## Standard XII—Access and Availability

### Recommendations

**Detroit Wayne Mental Health Authority** should ensure that at least 95 percent of the time adults with a developmental disability start needed, ongoing services within 14 days of a nonemergent assessment with a professional.

Results—Standard XII						
Met	=	16	X	1.0	=	16.00
Substantially Met	=	0	X	.75	=	0.00
Partially Met	=	1	X	.50	=	0.50
Not Met	=	0	X	.00	=	0.00
Not Applicable	=	3				
Total Applicable	=	17	Total Score	=	16.50	
Total Score ÷ Total Applicable						= 97%

## Standard XV—Disclosure of Ownership, Control, and Criminal Convictions

### Recommendations

**Detroit Wayne Mental Health Authority** did not have a disclosure of ownership form that included all fields necessary to capture the required information from all pertinent individuals. The PIHP did not pass on to contractors the requirement to have a policy and process to collect fully compliant disclosure statements inclusive of all necessary information from subcontractors' providers and subcontractors and relied on its prohibition of conflict of interest relationships in the request for proposal (RFP). **Detroit Wayne Mental Health Authority's** contracts required providers to "affirmatively warrant" that no individuals in the entity itself or the entity's network

were debarred, suspended, excluded, or ineligible from participation in any federal program under the provision of Section 1128(a) and (b) of the Act. **Detroit Wayne Mental Health Authority's** RFP attestation requirement referenced a time period that neither the bidder nor any of its governing board members had been sanctioned within the prior five years. PIHP contracts under the "Debarment and Suspension" section referenced a three-year time period. Federal regulations stipulate that providers are required to disclose the identity of any person with an ownership or control interest in the provider or disclosing entity or who is an agent or managing employee of the provider or disclosing entity that has *ever* been convicted of any crime related to that person's involvement in any program under the Medicaid, Medicare, or Title XX program (Social Services Block Grants), or Title XXI (State Children's Health Insurance Program) since the inception of those programs.

**Detroit Wayne Mental Health Authority** should familiarize its board and MCPNs with the full requirements specified in 42 CFR 455.104–106 and should formalize a policy and process for obtaining full disclosure statements from all board of director members, providers, and contractors. **Detroit Wayne Mental Health Authority** must revise its disclosure statement form to ensure that full disclosures are obtained and maintained for its entire network of contractors, subcontractors, and providers, as applicable.

**Detroit Wayne Mental Health Authority** must have a process to identify and to notify the MDHHS Behavioral Health and Developmental Disabilities Administration (BHDDA) Division of Program Development, Consultation, and Contracts when any disclosures are made by providers with regard to criminal offenses described under sections 1128(a) and 1128(b)(1)(2), or (3) of the Social Security Act. Those offenses include criminal offense convictions for program-related crimes and patient abuse and felony convictions relating to healthcare fraud and controlled substances.

**Detroit Wayne Mental Health Authority** must monitor MCPNs' processes to obtain and maintain compliant disclosure statements and criminal conviction attestations from all required individuals and entities and report to the PIHP when applicable, as required.

Results—Standard XV						
Met	=	4	X	1.0	=	4.00
Substantially Met	=	3	X	.75	=	2.25
Partially Met	=	1	X	.50	=	0.50
Not Met	=	0	X	.00	=	0.00
Not Applicable	=	0				
<b>Total Applicable</b>	<b>=</b>	<b>8</b>	<b>Total Score</b>	<b>=</b>	<b>6.75</b>	
<b>Total Score ÷ Total Applicable =</b>						<b>84%</b>