
Title 1	Northern Lakes Policies
Part 103	Managed Health Division
Subpart A	Network Administration
Policy No.	103.108
Subject	Purchase of Service Contracting

Applicability

Policy applies to all MHD staff, NLCMH staff, and contract and network providers.

Policy

When the Managed Health Division determines that there is need for a behavioral health service, which cannot be met by existing network providers, or the number of providers does not give sufficient choice to the consumer, the MHD will develop processes to identify and obtain such services required through external contract providers.

PROVIDER REQUIREMENTS:

1. A good faith effort on the part of the MHD shall be made to provide services from all existing, approved network providers.
2. Any prospective provider shall meet all minimum licensing and/or accreditation requirements as specified in the agency's master contract with DCH and in agency policies.
3. MHD may conduct an on-site review of the potential provider and shall complete reference checks prior to executing a contract.
4. The prospective provider shall agree to all requirements and expectations identified by the MHD. The contract shall specify requirements as listed in the Specialty Services and related MDCH Master contracts.
5. The prospective provider shall maintain adequate facilities and sufficient personnel to provide consumers with quality services. The provider agrees to accept compensation for authorized services, referred by MHD as payment in full.

AUTHORIZATION REQUIREMENTS

1. Northern Lakes CMH Access/Utilization Management Department Workforce Members shall authorize behavioral health services to be performed by prospective providers. Authorization of some services may be delegated at the discretion of and with oversight by the MHD. Managed Health Division Workforce Members shall negotiate rates and terms of the contractual agreement.

2. All contracts with such providers shall be signed by the agency's Chief Executive Officer or his Designee.
3. Contractual agreements with such providers are subject to all terms and compliance measures required under the DCH master contract, federal and state Medicaid/Medicare audits and any and all applicable third party payor audits.

Procedures

None.

Adoption Date: June 4, 2006

Review Dates: June 5, 2009

Revision Dates: