

POLICIES AND PROCEDURES

Policy Title: Provider Representation		
Policy Number: E-4.4.8		
Original Effective Date: June 28, 2011	Approved by:	Eastpointe Board of Directors
Revised/Review Date: April 24, 2018	Approved by:	Eastpointe Board of Directors

Policy: Eastpointe Local Management Entity/Managed Care Organization (LME/MCO) shall maintain provider representation for active providers to give meaningful input, suggestions, and guidance to the organization regarding clinical service improvement and provider payment policies. The mechanisms are as follows: **[HNM 5]**

- Eastpointe Committee Participation
- Open Community Forums
- Provider Forums
- Provider Reporting
- Web based surveys

Definitions: N/A

Procedure:

Eastpointe takes the perspective of participating providers into account in provider network management decisions. Furthermore, Eastpointe encourages qualified providers to unite with the organization in a common approach that emphasizes support, education/training, rehabilitation and recovery for the population served.

Eastpointe Committee Participation [HNM 5 (a)]

Eastpointe has established a number of committees with non-employee provider participation to help ensure provider’s perspectives are included in network management, as well as other aspects of the organization. An adequate number and a variety of provider types are represented in these committees, with an emphasis on those providers who offer the services most often required by member/enrollees in the catchment area. **[HNM 5 (b)]**

Global Quality Improvement Committee (GQIC)

The GQIC is charged with the responsibility of identifying and addressing opportunities for improvement in Eastpointe operations and the local service delivery system. The GQIC is granted authority by the Eastpointe Board of Directors and is responsible for the oversight of the Quality Management Program. The GQIC utilizes sub-committees to fulfill its role.

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Provider Council Committee

Part of that subcommittee process includes the appointment of the Provider Council Committee. This committee is made up of non-employee participating providers from within the network and meets at least quarterly for the purpose of improving services by monitoring processes, implementing interventions to improve performance, and evaluating the effectiveness of those interventions. Provider Council Committee responsibilities include:

- Providing feedback to staff on QI priorities and projects
- Provide input into clinical and provider payment proposed policies
- Non-employee participating Provider representation on GQIC **[HNM 5(a)]**

Clinical Advisory Committee

The Clinical Advisory Committee (CAC) subcommittee is a group of participating providers and other members who meet at least quarterly to provide input into the clinical program, as well as review and approve clinical review criteria and other clinical content materials. **[HNM 5 (a)]**

The CAC reports all recommendations back to the GQIC Committee for approval. In addition to the above, the GQIC reviews data reports to incorporate trends and input from external stakeholders which include:

- Member/enrollees
- Families
- Non-employee providers **[HNM 5 (a)]**
- Other stakeholders

Member/enrollee

The CAC works with the provider community, individuals receiving services, and stakeholders to identify safety issues and focus on activities that reduce risk and achieve safe treatment environments for all member/enrollees receiving services.

Open Community Forums

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Open forums are held by Eastpointe in the community as needed but at least every three (3) years to obtain feedback from providers, member/enrollees, and citizens of the community at large on the LME/MCO performance, the status of mental health, developmental disabilities and substance abuse services provision and the Local Business Plan. **[HNM 5 (a)]** For those providers who could not attend Eastpointe forums, opportunity is provided for additional feedback through e-mail communication through our Network Operations Call Center staff.

Reporting

Feedback from the provider network is included in numerous reports to reflect participation in the provider network management process. Eastpointe's Board of Directors and the Member/enrollee and Family Advisory Committee (CFAC) receive at least annual updates on network activities. The Community Needs Assessment process gathers and reports on the following elements:

- Consideration of population of the Eastpointe catchment area,
- Identified gaps in the service array,
- Number and variety of network providers,
- Input from member/enrollees, families, providers, and stakeholders, and
- Consideration of local linguistic and cultural competences

This data assures ample input from the types of providers most often utilized by member/enrollee **[HNM 5 (b)]** and drives recruitment / enrollment efforts to ensure a sufficient number of quality providers are available to the member/enrollee.

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