

Policy 7.4

POLICY TITLE:	EXTERNAL REVIEW PROCESS	POLICY # 7.4		
Topic Area:	QUALITY MANAGEMENT		REVIEW DATES	
Applies to:	LRE, All Member CMHSPs, LRE Provider Network	ISSUED BY: Chief Executive Officer	11/21/13	2/1/15
Review Cycle:	Annually		9/9/2022	
Developed and Maintained by:	LRE Chief Executive Officer or Designee	APPROVED BY: Board of Directors		
Supersedes:	N/A		Effective Date: January 1, 2014	Revised Date: September 15, 2022

I. POLICY:

LRE and its Member Community Mental Health Service Programs (CMHSPs) shall participate in the External Quality Review (EQR) process arranged by the Michigan Department of Health and Human Services (MDHHS). LRE and its Member CMHSP will strive to achieve full compliance of the standards as set forth in the MDHHS, Medicaid Specialty Supports and Services Contract. LRE will communicate the EQR schedule and results to the LRE Board of Directors.

The LRE's Chief Quality Officer will be responsible for monitoring all preparation for external reviews and shall assure that all required plans for improvement and correction are carried out according to identified timelines. The Quality Management Committee will serve in an advisory role to develop improvement plans and communicate these to the CMHSPs. Other LRE committees will participate in preparation for certain external reviews related to their area of expertise such as provider network, finance, information systems, access/utilization, and customer services.

LRE shall address the findings of the external review through its Quality Assessment Performance Improvement Program (QAPIP). LRE will develop and implement performance improvement goals, objectives, and activities in response to the external review findings as part of LRE's QAPIP and through the Quality Improvement-Regional Operations Advisory Team (QIROAT).

A description of the performance improvement goals, objectives and activities developed and implemented in response to the external review findings will be included in QAPIP and provided to the MDHHS upon request. LRE will coordinate the EQR site review process and inform the Member CMHSPs of applicable dates and timelines. LRE will conduct ongoing monitoring to ensure that LRE, and each Member CMHSP within the region have implemented all required plans of correction.

CMHSP level accreditation is the responsibility of the individual CMHSP with findings reported to the LRE.

II. PURPOSE:

To ensure that the LRE, its Member CMHSPs, and LRE Provider Network comply with all requirements associated with external review bodies.

III. APPLICABILITY AND RESPONSIBILITY:

This policy applies to LRE, its Member CMHSPs, and LRE Provider Network

IV. MONITORING AND REVIEW:

The Chief Executive Officer or Designee will review this policy on an annual basis.

V. DEFINITIONS:

Quality Assessment and Performance Improvement Plan (QAPIP): A plan which provides specific structure and processes to assure that the LRE is continuously assessing its performance and striving to improve the quality of services to its consumers and constituents.

External Quality Review Organization: The Balanced Budget Act (BBA) of 1997 requires that states contract with an EQRO for an annual independent review of each PIHP to evaluate the quality and timeliness of, and access to, health care services provided to Medicaid enrollees.

VI. RELATED POLICIES AND PROCEDURES:

- A. LRE QAPIP
- B. LRE Quality Policies and Procedures
- C. LRE Compliance Policies and Procedures
- D. LRE Corporate Compliance Plan

VII. REFERENCES AND LEGAL AUTHORITY

- A. MDHHS Medicaid Specialty Supports and Services Contract
- B. Balanced Budget Act (BBA)
- C. MDHHS Quality Assessment and Performance Improvement Programs for Specialty Prepaid Inpatient Health Plans Policy

VIII. CHANGE LOG

Date of Change	Description of Change	Responsible Party
9/9/2022	Add LRE Provider Network to Applicability	CQO
9/9/2022	Under References/Legal Authority added MDHHS Quality Assessment and Performance Improvement Programs for Specialty Prepaid Inpatient Health Plans Policy	CQO