

CENTRA WELLNESS NETWORK

PROCEDURE 05.01 PROVIDER NETWORK MANAGEMENT

I. PURPOSE STATEMENT:

Centra Wellness Network's (CWN) Governing Body establishes and evaluates policies and related procedures as required by statutory and contractual obligations.

CWN reserves the right in its sole discretion to adopt and implement policies and procedures that ensure a safe, functional and professional workplace that operates with integrity using person-centered focus and planning, trauma informed practices and respect of others, and cultural sensitivity and transparency in communication and practice. Organizationally and in practice, CWN is responsive to the needs of clients, community and staff.

Any statements and procedures are subject to review and/or unilateral change, modification, suspension or cancelation in whole or in part of any published/unpublished policies or procedures without notice and without having to give cause, justification, or consideration to any employee. Recognition of these rights and prerogatives of CWN is a term and condition of and maintaining employment.

Policies and Procedures are approved by the Board and/or upon recommendation by the Executive Director or his/her designee.

II. APPLICATION:

Agency Wide, including employees, affiliated providers and interpreters.

III. DEFINITIONS:

Proposal Evaluation Committee:

Committee membership may include, but is not limited to, stakeholders, family members, clients and/or CWN Board members as appropriate. The purpose of the Proposal Evaluation Committee is to review and evaluate proposals submitted in response to an RFP or RFQ.

Request for Proposal (RFP):

A bid process used by CWN to solicit competitive proposals from community providers to address a specific service need, the price for providing the services, information regarding the proposed qualifications and capacity of the bidder to provide the services.

Request for Quote (RFQ):

A competitive bids process utilized by CWN to procure services, which includes requesting information from prospective bidders about their ability to provide services and the price of those services.

IV. POLICY STATEMENT:

This procedure is written to establish guidelines for the development and management of a contract provider network.

V. PROCEDURES:

A. Contract Procurement

1. Procurement of services will occur in a manner which ensures quality care and promotes the health and safety of the client in the provision of service.
2. As required by federal procurement laws, a competitive bid process (RFP or RFQ) will be used to secure qualified and cost-effective service providers if CWN needs to engage in selective contracting to restrict or otherwise limit the number of providers in the provider network to assure adequate access to services.
3. Under certain circumstances, CWN may contract with providers through single source procurement without a competitive procurement process. These circumstances may include any one or more of the following:
 - a. The service is available only from a single source
 - b. There is an urgent or emergent need for the service
 - c. After solicitation through a number of sources, there is a lack of qualified provider candidates

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- d. The services sought are unique or highly specialized
 - e. The services sought are professional services of limited quantity or short duration (e.g. Psychological testing)
 - f. Through the person-centered planning process the client has chosen a qualified non-network provider as his/her provider of choice.
 - g. Where for purposes of continuity of care and client stability, an existing network provider may be selected to provide a service
 - h. Where an Open Provider Panel is maintained in which providers agree to the CWN compensation schedule
4. Contract terms will be for a minimum of one year, unless otherwise specified. Multi-year contracts may be implemented at the discretion of CWN if warranted by funding, favorable financial terms, regulatory requirements or provider performance.
- B. Application Process
1. Interested providers shall complete a Centra Wellness Network Provider Network Application form. The Director of Access and Emergency Services, or designee, will review applications for completeness. Incomplete applications will be returned to the applicant. An on-site visit may be conducted if deemed necessary.
 2. Applicants will be notified by the Director of Access and Emergency Services of acceptance or denial of their application. Accepted providers shall be credentialed and privileged according to State, Northern Michigan Regional Entity (NMRE), and CWN policies and procedures. The Director of Access and Emergency Services or designee will maintain systems for tracking and filing provider applications. In instances where there is a service need or a specific service has been requested by a client and there is no provider in the county of residence, a provider will be sought from within the broader NMRE provider network. If no provider is available within the broad NMRE network, every effort will be made to locate a provider within reasonable geographic proximity. If no provider can be located in this fashion, alternative services will be identified and made available to the client. When a client expresses a preference for a non-network provider, efforts will be undertaken to enroll the provider in the network.
- C. Request for Proposal/Quote
1. A Request for Proposal (RFP) or Request for Quote (RFQ) will be initiated at the discretion of the Executive Director or designee.
 2. The Director of Access and Emergency Services will coordinate development of the RFP/RFQ documents and shall include input from staff, stakeholders, clients, families, and guardians as appropriate.
 3. Advertisements in various media will be used for maximum exposure when competitive bidding or a Request for Quote is required. Invitations to bid will be sent to potential service providers who have previously expressed an interest in contracting for the type of service addressed by the RFP/RFQ.
 4. Questions in response to an RFP/RFQ must be submitted in writing to the Director of Access and Emergency Services on or before the deadline specified in the RFP/RFQ.
 5. If an RFP/RFQ needs to be revised or amended, addenda will be provided to all recipients of the initial RFP/RFQ.
 6. To be considered complete, the proposal must be submitted in the specified format, arrive on or before the specified deadline to the office location of Customer and Provider Services, and be signed by an official authorized to bind the bidder to its provisions. The proposal shall remain valid for a minimum of ninety (90) days.

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7. A pre-bid conference may be scheduled for potential bidders. The date, time and place of the pre-bid conference will be included in the advertisement/posting. Attendance at the pre-bid conference may be optional or mandatory at the discretion of CWN. The purpose of the pre-bid conference shall be to provide an overview of the RFP/RFQ, to profile the population to be served, and to address questions relevant to the FRP/FRQ.
- D. Bid Opening
1. The date and time for the bid opening will be included in the RFP/RFQ.
 2. The Director of Access and Emergency Services, or designated staff, will be responsible for opening and reading the total dollar amount for the bids.
 3. Respondents to the RFP/RFQ may attend the bid-opening.
 4. The total bid amount will be recorded and maintained as an official document of the RFP/RFQ process.
- E. Evaluation of Proposal/Quote
1. A Proposal Evaluation Committee shall evaluate and rate submitted proposals. The Committee will be comprised of CWN staff as assigned by the Executive Director or designee, and may include the following: CWN Board members, stakeholders, clients and/or family members, and others as appropriate.
 2. The Director of Access and Emergency Services, or designated staff, will coordinate committee activities.
 3. Members selected for the committee will be screened to determine whether there exists any conflict of interest or bias toward any of the bidders. Committee members will be required to disclose any potential conflict of interest. Disclosures shall be documented and maintained in a confidential file. A committee member shall not be required to cite the reason for the conflict of interest. Any committee member disclosing a potential conflict of interest shall be excused from further participation and a new member for the committee may be selected.
 4. Committee members shall reach group consensus on the criteria to be used to rate the bids, and shall review and evaluate the proposals. Scores and findings shall be thoroughly documented.
 5. The Director of Access and Emergency Services, or designated staff, shall ensure that each committee member has an opportunity to review the bid packages.
 6. At the discretion of the Executive Director, identities of the bidders may be concealed prior to review of bid packages by the committee. In these instances, bidder numbers will be assigned to each bid.
 7. Budget information and financial statements submitted as part of the bid will be reviewed and evaluated by the Finance Department.
 8. The review and evaluation process shall be confidential. Committee members shall not discuss or disclose information about submitted bids or the review process with anyone outside the committee.
 9. Questions requiring a response from bidders will be directed to the Director of Access and Emergency Services, or designated staff, for inquiry.
 10. Committee representative(s) shall check references furnished by the provider. Committee members may make site visits to the provider's locations. Findings from reference checks and site visits will be documented and shared only with committee members.
 11. Committee members will individually rate each bidder based on ability to meet specifications in the RFP/RFQ. Proposals which fail to address the basic elements required in the RFP/RFQ will be eliminated from consideration.
 12. In the instance of an RFP the Committee will rank the bidders in order of perceived ability to meet the evaluation criteria. For RFQ the Committee will merely agree or not agree to place a potential bidder on the CWN Provider Panel.

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13. For the RFP process the Director of Access and Emergency Services will review the committee's ratings and recommendations with the Executive Director, or designee.
- F. Conflict of Interest
1. No CWN employee, officer or agent shall participate in the selection, award, or administration of a contract issued by CWN if a conflict of interest exists. Such a conflict would arise when a CWN employee, officer or agent, or any member of his/her immediate family, his/her partner, or an organization which employees or is about to employ any of the parties described herein, has a financial or other interest in the organization selected for an award. The officers, employees and agents of CWN shall neither solicit nor accept gratuities, favors or anything of monetary value from contractors or providers, or from parties having sub-agreements with providers or contractors. Should any officers or employees of CWN violate this standard of conduct, CWN may take disciplinary action, in accordance with CWN procedures, as appropriate.
 2. CWN staff developing procurement solicitations shall be alert to organizational conflict of interest, as well as non-competitive practices among contractors or providers that may restrict or eliminate competition or otherwise restrain trade. To assure objective contractor or provider performance and eliminate unfair competitive advantage, contractors or providers that are involved in the development of draft grant applications or contract specifications, requirements, statements of work, invitation for bids and/or requests for proposals shall be excluded from competing for such procurement.
- G. Contract Negotiation and Execution
1. The Director of Access and Emergency Services, together with any additional authorized individuals, will negotiate with the recommended service provider(s) to procure contracts for service delivery. Negotiations will include consideration of past performance as a contracted service provider, if applicable, and shall be subject to funding availability.
 2. For purposes of continuity and standardization, CWN utilizes standard model contracts for all services supported by Medicaid and GF Funding.
 3. Standard contracts shall be reviewed annually to assure compliance with prevailing BBA and DHHS requirements.
 4. Contracts in the amount of \$20,000 or more will be presented to the Board of Directors for approval. All contracts will be signed by Executive Director or a designee.
 5. Contracts shall be electronically signed and maintained by Centra Wellness Network with receipt to each party. When signed on paper, contracts shall be signed in duplicate. An original shall be maintained by Centra Wellness Network with a signed original sent to the provider.
 6. Contracts shall be signed in duplicate. An original shall be maintained by the Director of Customer and Provider Services with a signed original sent to the provider.
 7. CWN will contact the service provider prior to the expiration of the contract to negotiate renewal.
 8. Requests to modify or amend a contract will be coordinated by the Director of Access and Emergency Services. Contract amendments shall be made in accordance with the terms and conditions of the contract. Modifications which affect the authorized total expenditures must be approved in accordance with CWN Purchasing Procedures, as applicable.
- H. Provider Monitoring
1. Director of Access and Emergency Services, or designated staff, will be responsible for coordinating provider monitoring at designated intervals throughout the term of the contract. Prior to the renewal, review of provider will

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- be conducted to ensure compliance with established performance indicators and other terms specified in the contract.
2. Billing claims will be verified by appropriate CWN staff for service verification, payment authorization, and payment.
 3. The Director of Access and Emergency Services, and/or designated staff, will provide information to appropriate parties regarding the performance of each network provider, as well as take appropriate steps to ensure improvement and compliance with contract provisions and requirements. Performance monitoring may include, but not be limited to:
 - a. Review and analysis of data and financial reports from providers.
 - b. Review of utilization management and other practice information, including customer service reports.
 - c. On-site review of each provider annually ~~and~~ or as needed.
 - d. Input from individual/family/stakeholder groups as appropriate.
 - e. Review of Recipient Rights Reports
 4. Monitoring of financial management, or financial solvency, of the Provider will be determined as follows:
 - a. For Licensed Adult Foster Care Homes (AFC's) with individual contracts (Type A), solvency is determined by review of income statements, State and Federal tax returns.
 - b. For Licensed AFC Facility Contracts (Type B), the Provider will annually, or as otherwise requested, submit for review: audited financial statements with written certification from a CPA, and/or financial statements with supporting documents.
 - c. For Independent Contractors, contract language requires notification to CWN of any changes in their financial condition would adversely impact service deliver.
 - d. For non-profit organizations, financial solvency information may also be obtained by utilizing the following website: www.guidestar.org
 5. The Director of Access and Emergency Services, and/or designated staff, will coordinate the development of recommendations for improvement in the event of non-compliance with contract, network policies and procedures, as well as provider performance problems. These recommendations shall be in the form of a plan of correction, and be signed by the Provider. This Plan of Correction shall be submitted for review to CWN. In the event a provider is in continued non-compliance, the provider may be required to attend to additional actions, up to and including being removed from the Provider Network.
 6. The Director of Access and Emergency Services, or designated staff, shall seek input from other staff and shall utilize various reports including Recipient Rights reports, State Licensing reports, survey results and plans of correction, among other materials, in monitoring the performance of network providers.
 7. The NMRE retains the right to approve, suspend or terminate from participation in the provision of Medicaid funded services of a provided selected by CWN.
- I. Provider training and orientation
1. All providers of the NMRE affiliation shall receive orientation and training to the network policies and procedures provided by CWN.
 2. If a provider is providing a service specific to a target service group or population, that provider shall be oriented in CWN Board policies and procedures for that population.
 3. Training may be via various methodologies, including copies of policies electronically, (internet, web pages and e-mail), telephone conversations, meetings and correspondence. Training shall be documented and kept in the contractor record.

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- 4. CWN shall provide each contractor with a Provider Manual at start of service, and updates as needed thereafter. The manual shall include, minimally, the following: general agency and affiliation information, contact information, organizational charts, policies & procedures relevant to the service provider, and samples of required forms. Providers shall sign an acknowledgement of receipt of the manual.
- J. Protests, disputes, and claims
In the event that there is a protest or dispute ~~and/or claim~~ resultant of the contract procurement process, the provider may appeal the decision by submitting a letter of protest/dispute/appeal to the Executive Director of CWN within ten (10) business days of the date of the determination notice. The letter shall state the basis for the protest/dispute/appeal and shall include any supporting documentation. All protests/disputes/appeals will be reviewed and a decision made within fourteen (14) business days of receipt of the letter. The decision of the Executive Director of CWN shall be final and binding. This process shall apply to providers employed and/or directly contracted with CWN.

VI. EXHIBITS:
N/A

VII. REFERENCES:

Authority and Related Directives Trace	
Federal	BBA 438.230 and 438.206; 2CFR §200.318-200.326, OMB Circular A-87, revised; 42CFR §438.12
State	MDHHS/CMHSP Managed Mental Health Supports and Services Contract Sections 6.4, 6.4.1, 6.4.2; MCL Section 330.1232 Act 258, P.A. 1974 as amended
Affiliation	NMRE/CWN Medicaid Subcontracting Agreement
County	Inter-local Agreement, Section IX.J, X.1
CARF	2023 CARF Behavioral Health Standards
Other	