

MACOMB COUNTY COMMUNITY MENTAL HEALTH NOTICE OF IMPLEMENTATION OF MCO POLICY

DATE: October 30, 2015

TO: MCCMH Staff; Direct Operated and Contract Network Service Providers

FROM: Kimberly Cope
Policy/Legal Compliance Coordinator

RE: MCCMH MCO Policy Revisions; New Policies

Brief description of revisions:

<p>MCCMH MCO Policy 2-042, Coordination of Care</p>	<p><u>Overall</u></p> <ul style="list-style-type: none"> • Revised and updated language <p><u>Standards</u></p> <ul style="list-style-type: none"> • Updated Primary Caseholder Responsibilities • Added MI Health Link Care Coordination and Hospital Care Coordination
<p>MCCMH MCO Policy 2-051, Psychotropic Medication in Community Based Settings</p>	<p><u>Standards</u></p> <ul style="list-style-type: none"> • V.D.9. Added “Medication errors and adverse drug reactions must be immediately and properly reported to a physician and recorded in the consumer’s clinical record.”
<p>MCCMH MCO Policy 6-001, Release of Confidential Information - General</p>	<p><u>Overall</u></p> <ul style="list-style-type: none"> • Corrected Typographical Errors
<p>MCCMH MCO Policy 9-100, Applicability of Recipient Rights Policies</p>	<p><u>Policy</u></p> <ul style="list-style-type: none"> • III.B.1. Added: “The Rights Officers/ Directors and advisors of all MCCMH contract network providers which are required by contract to establish their own rights systems shall attend the MDHHS ORR Basic Skills I and II within three months of hire, and shall complete Recipient Rights Update training as specified by the MDHHS-ORR every three years during their employment.”

	<ul style="list-style-type: none"> • III.B.2. Added: “MCCMH ORR staff and staff of the MCCMH network providers which are required by contract shall complete all other contractually required training as mandated by MDHHS.”
<p>MCCMH MCO Policy 9-160, Qualifications and Training for Recipient Rights Staff</p>	<p><u>Standards</u></p> <ul style="list-style-type: none"> • V.D.4. Added: MCCMH ORR staff “and staff of the MCCMH network providers which are required by contract” shall complete all other contractually required training as mandated by MDHHS.
<p>MCCMH MCO Policy 9-510, Recipient Rights Investigations</p>	<p><u>Standards</u></p> <ul style="list-style-type: none"> • V.A.2 Added: “Disciplinary action is required for substantiated violations of abuse, neglect, and harassment/retaliation.” • V.A.5 Added: “The summary report shall be provided within the constraints of confidentiality and privilege and shall not violate the rights of any employee.” • V.B.5 Added: “If the allegation involves abuse or neglect, MCCMH ORR will initiate an immediate investigation.” • V.F. Added: “Action taken after it has been determined through investigation that a right has been violated, that meets all of the following requirements: <ul style="list-style-type: none"> • Corrects or provides a remedy for the rights violations; • Is implemented in a timely manner; • Attempts to prevent a recurrence of the rights violation. The action shall be documented and made part of the record maintained by MCCMH-ORR.”

<p>MCCMH MCO Policy 9-630, Fingerprinting, Photographing, Audio Recording, Video Recording, and One Way Glass Viewing</p>	<p><u>Standards</u></p> <ul style="list-style-type: none"> • V.C. Added: and returned or destroyed when they are no longer essential to achieve the objectives outlined in V.B or upon discharge of the recipient.
<p>MCCMH MCO Policy 9-680, Recipient Labor</p>	<p><u>Standards</u></p> <ul style="list-style-type: none"> • V.G. Removed: “Providers shall develop written procedures for notification of this policy to recipients. Each recipient shall be notified of the types of work which he/she could receive compensation.”
<p>MCCMH MCO Policy 9-690, Recipient Abuse or Neglect</p>	<p><u>Procedures</u></p> <ul style="list-style-type: none"> • VI.D. Added: Upon receipt of “an allegation of” alleged abuse, neglect or mistreatment the MCCMH ORR shall “initiate an immediate investigation.” • VI.E.2. Added: If remedial and/or disciplinary action is necessary, the MCCMH Executive Director, having reviewed and approved the recommendation(s) for remedial/disciplinary action, discharges such responsibility to the appropriate individual(s) thereby correcting the situation, “be implemented timely,” and/or preventing reoccurrence of the incident/situation with provider employees, independent contractors, volunteers, or interns. “Disciplinary action is required for substantiated allegations of abuse, neglect, and harassment/retaliation.”
<p>MCCMH MCO Policy 10-065, Injectable Medication Documentation and Procedures</p>	<p><u>Exhibit A, Injectable Medication Documentation and Procedures</u></p> <ul style="list-style-type: none"> • Updated II.C. Disposing of Medication • Added II.D. Returning of Medications

Brief description of **new** policies:

MCCMH MCO Policy 10-600, Urgent Behavioral Health Center- Physical Management	<ul style="list-style-type: none">• A policy to establish the standards and procedures regarding the use of physical management for individuals utilizing the Urgent Behavioral Health Center.
MCCMH MCO Policy 4-030, Medicare Services – Decisions and Complaints (Organization Determinations, Grievances, and Appeals)	<ul style="list-style-type: none">• A policy to establish standards and procedures to address and resolve the complaints of an Enrollee receiving Medicare covered services authorized by the MCCMH Managed Care Organization (MCO)/Prepaid Inpatient Health Plan (PIHP).

Follow the linked document, above, to view in full. As a reminder, you may always access MCCMH Policies directly from the [MCCMH internet website](#), by clicking on “MCCMH Policies.”

Questions regarding these policy revisions may be made to Kimberly Cope by phone: (586) 954-9821; or by email: kimberly.cope@mccmh.net.

This notice is being sent electronically to all MCCMH providers. Please note that it is the responsibility of the receiving party to view the policy updates, to become knowledgeable of policy content, to disseminate information to appropriate staff within your agency and to ensure staff compliance.