

ST. CLAIR COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

ADMINISTRATIVE PROCEDURE

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I. APPLICATION:

- ☐ SCCCMHA Board
- ☒ SCCCMHA Providers & Subcontractors
- ☒ Direct Operated Programs
- ☒ Community Agency Contractors
- ☒ Residential Programs
- ☒ Specialized Foster Care

II. PURPOSE STATEMENT:

St. Clair County Community Mental Health Authority (SCCCMHA) as delegated by Region 10 Prepaid Inpatient Health Plan (PIHP) shall provide Customer Services via the Access Customer Service Department for SCCCMHA. Customer Services functions shall comply with the contractual agreements and policies of Region 10 Prepaid Inpatient Health Plan, Michigan Department of Health Human Service and SCCCMHA. In addition, SCCCMHA within other administrative departments e.g. Quality Improvement-Data Management, Finance, Training, Recipient Rights, etc., is committed to providing effective and efficient customer services to internal and external customers.

III. DEFINITIONS:

- A. Appeal: A request for a review of an action relative to a Medicaid covered service(s) (Non-Medicaid service reviews are called Local Dispute Resolution Process).
- B. Enrollee: An individual who is receiving or may qualify to receive Medicaid services through the PIHP/SCCCMHA provider network.
- C. Grievance: An expression of dissatisfaction about SCCCMHA or its provider network service issues. Possible subjects may include, but are not limited to quality of care or services provided and aspects of interpersonal relationships between a service provider and the individual.

IV. STANDARDS:

- A. Customer Services shall be an identifiable function of SCCCMHA, that is provided by virtually all SCCCMHA departments, e.g. Central Intake Unit (CIU), Finance, Quality Improvement Data Management, Information Technology, Contract Management, Training, Community Relations, etc., as part of the service delivery process. Following an individual's contact with the Access Customer Service Department, the Central Intake Unit is generally the first Customer Service experience at SCCCMHA.

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- B. Customer Services shall focus on assisting individuals, and customer satisfaction. This includes providing a welcoming environment, orienting individuals to services and benefits available, and to the provider network. Providing information about how to access behavioral health, primary health and other community services; providing information about how to access the various rights processes; helping individuals with problems and inquiries regarding benefits. Assisting people with and overseeing local complaint and grievance processes. Tracking and reporting patterns of problem areas for the organization.
- C. Customer Services shall incur an annual review by the PIHP and take any necessary corrective actions on any deficiencies or improvement areas indicated by the PIHP.
- D. The Access Customer Service Department will operate minimally eight hours daily, Monday through Friday, except for holidays. A toll free number, answered by a live voice during business hours shall be available for customers to gain access to a Customer Service representative. A voice relay system (or other like accommodation) shall be available to customers in need of a hearing impaired communication device.
- E. The Access Customer Service Department, shall maintain and provide to customers the Customer Handbook, which shall contain the state-required topics. This includes the Medicaid coverage name and the state's description of each service, information about how to contact the Medicaid Health Plans or Medicaid fee-for-service program in the Region 10 PIHP service area, including plan or program name, locations, and telephone numbers, as well as a date of publication and revision(s). The Customer Handbook is also available on the SCCCMHA and Region 10 PIHP websites for reference at any time.
- F. SCCCMHA shall maintain a current list of Providers, both organizations and practitioners, within the SCCCMHA network. The list shall include street addresses, telephone numbers, website URL (if applicable), the services they provide, cultural and linguistic capabilities, (including American Sign Language), any specialty for which they are known, whether the provider's office/facility has accommodations for people with physical disabilities, and whether they are accepting new patients. This list is made available in paper form upon request and at no charge and in electronic form on agency website. Individuals' and/or their representative shall be given this list annually unless the individual has expressed that accessing the list through a website or customer services is acceptable. This list is also made available to the Region 10 PIHP for their website in a machine readable file and format. The paper provider directory is updated monthly and the electronic provider directory updates made no later than 30 calendar days after the PIHP receives updated information.
- G. The Access Customer Service Department and SCCCMHA Customer Services shall have access to SCCCMHA annual reports, current organizational chart, and SCCCMHA board member list, meeting schedule and minutes. This information will be provided within a timely manner to individuals upon their request and at no charge.

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- H. The Access Customer Services Department shall assist enrollees or individuals requesting services with filing grievances and appeals, accessing local dispute resolutions processes and coordinate, as applicable, with Fair Hearing Officers and the Office of Recipient Rights. Such request shall be handled in an effective and efficient manner and are tracked and reported to assess/monitor patterns of problem areas within the organization. The SCCCMHA Assistant Division Director is the individual designated to manage Medicaid and non-Medicaid grievances and non-Medicaid local appeals for SCCCMHA.
- I. Access Customer Service staff shall be trained to possess current working knowledge of the public behavioral health system, and where in the organization detailed information can be obtained in at least the following:
1. The population serviced (Serious Mental Illness, Serious Emotional Disturbance, Intellectual Developmental Disability Co-Occurring Mental Illness, and Substance Use Disorder)
 2. Benefit plans (Medicaid, Healthy Michigan, MICHild, etc.)
 3. Service array, medical necessity requirements, and eligibility for and referral to specialty services
 4. Person-Centered Planning
 5. Self-determination
 6. Recovery & Resiliency
 7. Peer Specialists
 8. Grievance and Appeal, Fair Hearings, Local Dispute Resolution process, and Recipient Rights
 9. Limited English Proficiency and Cultural Competency
 10. Information and referral about Medicaid-covered services within the PIHP as well as information and referrals to Medicaid Health Plans, Fee-for-service practitioners, and the Michigan Department of Health and Human Services
 11. The organization of the public behavioral health system
 12. Balanced Budget Act relative to the customer services functions and beneficiary rights and protections
 13. Community resources (e.g., advocacy organizations, housing options, schools, public health agencies, etc.)
 14. Public Health Code (for individuals with substance use disorder treatment).
- J. Access Customer Services and SCCCMHA customer services staff are to:
1. Be courteous and respectful in their interactions with all individuals.
 2. Address and proactively resolve any issues or complaints with the goal of satisfactory resolution.
 3. Provide rapid and immediate assistance.
 4. Provide culturally trained and sensitive/appropriate interactions.
 5. Interact with all individuals in a way that can be understood by the individual/family member.
 6. Inform individuals of developments in the ongoing operations of the Provider Network.
- K. The SCCCMHA Community Relations Department shall track customer services activities that indicate individual involvement and empowerment.

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V. PROCEDURES:

Individual Requesting Intake to SCCCMHA Services

1. Following Access Screening and referral to SCCCMHA services, the individual is scheduled for an Intake with Central Intake Unit (CIU) staff..

FIPA Tech

2. Begins the Intake process, including:
 - a. Completes Financial Information Payment Agreement (FIPA) to determine ability to pay, including use of a sliding fee scale.
 - b. Completes Medicaid application as necessary.
 - c. Obtains various consents and releases of information as necessary for SUD only.
 - d. Verifies private insurance, makes a copy of insurance, and uploads into their Oasis record as necessary.

CIU Clinician (see administrative procedure, Central Intake Unit (CIU) #02-001-0025

3. Continues the Intake process, including:
 - a. Reviews referral from Access, including the screening.
 - b. Obtains various consents and releases of information as necessary.
 - c. Completes OASIS demographic information.
 - d. Requests additional paperwork as needed, i.e., guardianship papers, foster care cards, photo ID, insurance cards, etc.
 - e. Completes the Biopsychosocial Assessment and other applicable assessments SAFE-T Protocol – with C-SSRS depending on the presenting symptomology (i.e. depression/trauma/anxiety/substance use, etc.).
 - f. Conducts clinical screens/assessments as appropriate, i.e., LOCUS, CAFAS, PECFAS, etc.
 - g. Provides appointment date/time for first service for eligible individuals.
 - h. Gives resource list, provides Access number (if requested), and sends follow-up letter as applicable, to ineligible for services individuals.

Individual with a Grievance or Complaint

Customer Services Department Staff

4. Assist individuals requesting or receiving services with complaints or grievances. Refers person to applicable credentialed SCCCMHA Grievance Manager (Assistant Division Directors or Office of Recipient Rights).

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Assistant Division Director

5. Documents complaint in OASIS electronic Grievance Module following required timelines. (See administrative procedure #02-001-0040 Grievance Process, #02-001-0045 Appeal Process and Second Opinion).

Office of Recipient Rights

6. Implements the Recipient Rights Complaint process. (See policy #05-001-0005 Recipient Rights).

Customer Services to Individuals Receiving -Services

Primary Case Holder

7. Provides ongoing information and assistance to individual as requested.
8. Initiates renewal of consents and releases as needed, minimally annually.
9. Provides information to beneficiary annually as required in 42 CFR 438.10 (See administrative procedures #05-001-0020 Enrollee Rights).

Customer Services - General

Any SCCCMHA or Network Provider Staff

10. Offers to help individual locate the desired internal or external services.
11. Follows through as applicable.
12. Offers the individual to complete a satisfaction or suggestion box survey.

VI. REFERENCES:

- A. PIHP/CMH contract, Customer Services
- B. CCBHC Expansion Grant

VII. EXHIBITS:

None

VIII. REVISION HISTORY:

Dates issued 08/03, 06/05, 05/08, 06/10, 08/12, 06/14, 07/15, 09/16, 09/17, 04/18, 03/19, 05/21, 5/22.