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## **Policy:**

It is the policy of Bay-Arenac Behavioral Health Authority (BABHA) to establish a central listing of BABHA in-network providers ("Local Provider Choice Directory") that includes, at a minimum, the following elements:

- 1) The name of the provider or provider organization, address(es), telephone number(s), service(s) provided/specialties; any group affiliation, website, specialty, cultural capability, non-English language spoken, appropriate accommodations for physical disabilities,
- 2) Identification of whether or not the provider is accepting new "patients" (consumers).
- 3) Identification of any restrictions on the individual's freedom of choice among network providers.
- 4) ACA/OCR Required "Taglines" informing individuals with limited English proficiency of language assistance services translated into the top fifteen (15) languages spoken in Michigan. [Example: ATTENTION: If you speak [insert language], language assistance services, free of charge, are available to you. Call 1-xxx-xxxx (TTY: 1-xxx-xxxx).

It is the policy of BABHA to require that primary care providers ensure that beneficiaries receive a written Local Provider Choice Directory that conforms to the requirements of this policy and the requirements of the PIHP-CMHSP contract.

It is the policy of BABHA to ensure that the Local Provider Choice Directory conforms to the following requirements:

- 1) The Local Provider Choice Directory is written at the  $4^{\text{th}}$  <u>6.9</u> grade reading level
- 2) The Local Provider Choice Directory is published in prevalent (in BABHA's service area) alternative languages and alternative formats pursuant to the Limited English Proficiency Policy and/or the Americans with Disabilities Act;
- 3) The Local Provider Choice Directory shall not contain false and/or misleading information.

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It is the policy of BABHA to maintain an up-to-date version of the Local Provider Choice Directory on its website, and to update the directory at least annuallymonthly as needed.

### Purpose:

The purpose of this policy and procedure is to delineate the requirements for the contents, distribution, and updating of a Local Provider Choice Directory.

### Applicability:

- All BABHA Staff
- Selected BABHA Staff, as follows:
- All Contracted Providers: 
  Policy Only 
  Policy and Procedure
- Selected Contracted Providers, as follows: Primary Care Coordinators
  - $\boxtimes$  Policy Only  $\boxtimes$  Policy and Procedure

## **Definitions**:

Providers: This term is intended to include the primary care services of BABHA and any primary care provider under contract to with BABHA, including (at a minimum) specialists and/or hospitals. This term does not include providers that cannot be independently accessed by the beneficiary.

## Procedure:

Responsibility for the development and maintenance of the Local Provider Choice Directory, monitoring implementation, and ensuring BABHA compliance with these policies is assigned to the Recipient Rights/Customer Service (RR/CS) Department of Bay-Arenac Behavioral Health Authority.

The Local Choice Provider Listing will be given to individuals that are served by the BABHA provider network at their initial intake appointment and will be offered annually in addition to when there are significant changes. Further, individuals may request the Local Provider Choice

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Directory at any time by requesting such of the BABHA RR/CS Department or their assigned primary care coordinator. It will also be accessible on the BABHA website and updated as changes are made within the contracted provider network. BABHA's website will provide written public notice of a significant change in its applicable provider network including the addition of new providers and planned termination of existing providers. This will be accomplished via the BABHA website.

BABHA will make a good faith effort to give written notice of termination of a contracted provider, within 15 days after receipt or issuance of the termination notice, to each beneficiary who received his or her primary care from, or was seen on a regular basis by, the terminated provider.

Attachments: N/A

## **<u>Related Forms</u>:** N/A

## Related Materials: N/A

## **<u>References/Legal Authority</u>**:

42 CFR 438.10(f)(6)(i)(ii)

MDCH/PIHP Contract Section 6.3.3 & Attachment P 6.3.1.1Mid-State Health Network (MSHN) Policy: Customer Service Chapter - Customer Handbook

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SUBMISSION FORM				
AUTHOR/ REVIEWER	APPROVING BODY/COMMITTEE/ SUPERVISOR	APPROVAL /REVIEW DATE	ACTION (Deletion, New, No Changes, Replacement or Revision)	REASON FOR ACTION - If replacement list policy to be replaced
Melissa Neering	Christopher Pinter	6/19/15	Revision	Remove PIHP language. Move from Chapter 11 Access Alliance of Michigan, Section 7 to Chapter 3 Member Rights and Responsibilities Section 8
Melissa Prusi	Christopher Pinter	12/15/15	Revision	Update Agency/Department names and acronyms
Melissa Prusi	Christopher Pinter	6/30/2016	Revision	Triennial Review-Added "Local" to choice provider directory
Melissa Prusi	Christopher Pinter	03/05/2018	Revision	To include new PIHP-CMHSP Contract requirements. Changes made to policy statement only. No changes to procedure.
Melissa Prusi	Christopher Pinter	06/15/2019	Revision	Annual review and minor changes.
Melissa Prusi	Christopher Pinter	10/1/2021	No changes	Triennial review-no changes
<u>Melissa Prusi</u>	Christopher Pinter	<u>09/27/202</u> 4	Revision	Triennial review mnor updates to procedure on page 3