

NORTHCARE NETWORK

POLICY TITLE: Customer Services	CATEGORY: Customer Services/Recipient Rights	
EFFECTIVE DATE: 6/26/02	BOARD APPROVAL DATE: 2/6/08	
REVIEWED DATE: 12/14/22	REVISION(S) TO POLICY STATEMENT: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	OTHER REVISION(S): <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
RESPONSIBLE PARTY: Customer Services Specialist	CEO APPROVAL DATE: 1/10/23 Dr. Tim Kangas, CEO	

APPLIES To

NorthCare Network Personnel
Network Providers

POLICY

It is the policy of NorthCare Network to ensure compliance across the network with the most current Prepaid Inpatient Health Plan (PIHP) Customer Services Standards by the Michigan Department of Health and Human Services; and the Standards in the Balanced Budget Act. Customer Services encompasses rapid, accurate, linguistically understandable services to consumers and their families in a culturally diverse and competent manner. Consumer participation is essential to assure that programs and services are welcoming, recovery based, and trauma informed. Consumers are invited to advise the PIHP and the providers as to the effectiveness and helpfulness of Customer Services. NorthCare Network adopts in its entirety the current Michigan Department of Health and Human Services (MDHHS) PIHP Customer Service Standards.

PURPOSE

The purpose of this policy is to outline requirements for the Customer Services unit at NorthCare Network and Network Providers. The customer services unit is the front door of the Prepaid Inpatient Health Plan and Network Providers and conveys an atmosphere that is welcoming, helpful, and informative. Opening the door in this manner will assure consumers have the ability to lead, control, and exercise choice over, and determine their own path of recovery.

DEFINITIONS

1. **Customer Services:** A function that enhances the relationship between the recipient of services and the PIHP and Network Providers.
2. **Customer:** Customer includes all Medicaid eligible individuals located in the defined service area who are receiving or may potentially receive covered services and supports. The following terms may be used within this definition: clients, recipients, beneficiaries, consumers, individuals, individuals served, and Medicaid Eligible.

REFERENCES

- Balanced Budget Act
- MDHHS/PIHP Contract
https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_4868_4899---,00.html
- Mental Health Code

- Accreditation Standards, as applicable
- NorthCare Network Cultural Sensitivity Policy

HISTORY

REVISION DATE: 1/5/13, 9/13/13, 8/27/14, 4/13/16, 2/21/17, 12/20/17, 10/23/18, 7/19/19, 9/7/21, 3/31/22, 12/14/22

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BOARD APPROVAL: 2/6/08

PROCEDURES

1. There shall be a designated unit called “Customer Services” at the PIHP and Member CMHSPs. NorthCare Network implements these standards at the PIHP and delegates responsibility to implement and follow these standards to Member CMHSPs.
2. There shall be at the PIHP a minimum of one Full Time Equivalent (FTE) performing the Customer Services functions whether within Customer Services or elsewhere within the PIHP. This function is delegated and therefore Member CMHSPs, and Network Providers, as applicable, shall have additional FTEs (or fractions thereof) as appropriate to sufficiently meet the needs of the people in the service area.
3. There shall be a designated toll-free Customer Services telephone line with access to alternative telephonic communication methods (such as Relays, TTY, text messaging, emailing, etc.). The Customer Services telephone numbers shall be displayed in the footer of the NorthCare Network Customer Handbook, agency brochures, and public information material.
4. Telephone calls to Customer Services shall be answered by a live voice during business hours. Telephone menus are not acceptable. A variety of alternatives may be employed to triage high volumes of calls if there is a response to each call within one business day.
5. The hours of Customer Services operations and the process for accessing information from Customer Services outside those hours shall be publicized. The unit will operate minimally eight hours daily (8:00 – 4:00), Monday through Friday, except for holidays in each time zone that includes a portion of the geographic area served by the organization.
6. The NorthCare Network Customer Handbook will be updated as necessary with a minimum of annual review with the state-required topics, template language and state and federal mandates and the PIHP/Network Providers will use the State-developed notice forms.
7. The Medicaid coverage name and the State’s description of each service shall be printed in the customer handbook.

8. The customer handbook shall contain a date of publication and date of revision(s).
9. NorthCare or delegate entity must provide each customer a customer handbook within a reasonable time after receiving notice of the beneficiary's enrollment. This may be provided by:
 - a. mailing a printed copy to the customer's mailing address,
 - b. emailed after obtaining the customer's agreement to receive information by email,
 - c. posting the information on the website and advising the customer in paper or electronic form that the information is available on the website, provided that individuals with disabilities who cannot access the information online are provided auxiliary aids and services, upon request, at no cost, or
 - d. the information is provided by any other method that can reasonably be expected to result in the customer receiving the information.
10. Information about how to contact the Medicaid Health Plans or Medicaid fee-for-service programs in the PIHP service area, including plan or program name, locations, and telephone numbers, shall be provided in the Customer Services Handbook.
11. NorthCare or delegate unit shall maintain current listings of all providers, practitioners, organizations, and any group affiliation with whom NorthCare or delegate unit has a contacts, the services they provide, along with street addresses, telephone numbers, website URLs, cultural and linguistic capabilities (if they have completed cultural competency training), any non-English languages they speak (including American Sign Language), any specialty for which they are known, whether their providers office/facility has accommodations for people with physical disabilities, and whether they are whether they are accepting new patients. This list must include independent person-centered planning (PCP) facilitators. This must be made available in paper form upon request, and electronic form such as on the PIHP, CMHSP, or network provider's website, as applicable. Beneficiaries shall be given this list annually unless the beneficiary has expressly informed the PIHP that accessing the listing through an available website or customer services line is acceptable.
12. The provider directory must be made available in paper form, upon request, as well as electronic form. The provider directory must also be made available in a prominent, readily accessible location on the PIHP's website in a machine – readable file and format.
13. The paper directory must be updated at least monthly and electronic provider directories must be updated no later than 30 calendar days after the PIHP or delegate unit receives updated provider information.
14. If the PIHP provides any required information electronically:
 - a. It must be in a form that is readily accessible;
 - b. It must be on the PIHP's Web site in a location that is prominent and readily accessible;
 - c. It must be in an electronic form which can be electronically retained and printed;
 - d. The PIHP must inform the customer that the

information is available in paper form, without charge, and provide it, upon request, within five (5) business days.

15. Customer Services shall have access to the following information about the PIHP including each Member CMHSP affiliates annual report, current organizational chart, Member CMHSP board member list, meeting schedule, and minutes available on the NorthCare Network and respective Member CMHSP websites. Customer services will provide this information in a timely manner to individuals upon their request.
16. Upon request, Customer Services shall assist beneficiaries with filing grievances and appeals, accessing local dispute resolution processes, and coordinate, as appropriate, with Fair Hearing Officers and the local Office of Recipient Rights.
17. Customer services staff shall be trained to welcome people to the public mental health system and to possess current working knowledge, ~~of~~/or know where in the organization detailed information can be obtained, in at least the following:
 - a) *The populations served (serious mental illness, serious emotional disturbance, developmental disability, and substance use disorder) and eligibility criteria for various benefits plans (e.g., Medicaid, Healthy Michigan Plan, MI Child)
 - b) *Service array (including substance abuse treatment services), medical necessity requirements, and eligibility for and referral to specialty services
 - c) Person-centered planning (PCP)
 - d) Self-determination
 - e) Recovery & Resiliency
 - f) Peer Specialists
 - g) *Grievance and appeals, Fair Hearings, local dispute resolution processes, and Recipient Rights
 - h) Limited English Proficiency and cultural competency
 - i) *Information and referral about Medicaid-covered services within the PIHP as well as outside to Medicaid Health Plans, Fee-for-Services practitioners, and Department of Health and Human Services (DHHS)
 - j) The organization of the Public Behavioral Health System
 - k) Balanced Budget Act (BBA) relative to the Customer Services functions and beneficiary rights and protections
 - l) Community resources (e.g., advocacy organizations, housing options, schools, public health agencies)

- m) Public Health Code (for substance abuse treatment recipients if not delegated to the substance abuse coordinating agency or PIHP), Mental Health Code and Medicaid Provider Manual.
- n) Know which services are available directly in ASL and services that use an interpreter.

*Must have a working knowledge of these areas, as required by the Balanced Budget Act.

18. NorthCare seeks consumer representation on the regional utilization management committee, quality improvement committee, and the practices improvement leadership team.

NorthCare Network responsibilities in Customer Services are:

- A. There shall be a designated unit called “Customer Services.” Consumers are encouraged to advise and express their experience with customer services.
- B. Publish the Consumer Handbook for the PIHP. The Customer Services Specialist will update the handbook as needed to reflect required federal and state enrollee information as well as local service delivery information. The updated handbook is available at the NorthCare Network website at: www.northcarenetwork.org NorthCare Network will monitor as part of the annual site review that the Network Providers are documenting the dissemination to consumers (during the assessment and annually at the IPOS) the most current NorthCare Network Customer Handbook.
- C. Conduct meetings of the NorthCare Network Customer Services Committee no less than a quarterly basis to obtain input for needed services and service delivery improvement.
 - 1. The committee is chaired by the NorthCare Network Customer Services Specialist.
 - 2. Each of the Member CMHSPs will be represented on the regional committee by:
 - a. One local Customer Service Member CMHSP staff
 - b. Two Member CMHSP consumers chosen from the local Consumer Advisory group (or agency equivalent)
 - 3. Every effort will be made to have the NorthCare Network SUD Services be represented by a consumer and a staff member.
 - 4. Every effort will be made by NorthCare Network to include additional consumers and advocates on the committee for representation by all populations served.
 - 5. The NorthCare Network Customer Services Specialist will report the work of the committee to the NorthCare Network Quality Oversight Committee. The

Quality Oversight Committee initiates quality improvement activities as appropriate.

6. Monitor the Member Community Mental Health Service Providers (CMHSPs) and NorthCare Network SUD Service Providers efforts to include consumer input regarding the delivery of mental health and substance use disorder services.
- D. Monitor staff training in Customer Services and enrollee rights as well as the distribution of community education materials by Network Providers as part of the NorthCare Network site review process.
- E. Facilitate training opportunities as requested by the providers or as necessary to assure regional consistency in offering consumers assistance in managing their healthcare needs.
- F. Maintain an electronic system (ELMER) to log and track all grievances and appeals.
- G. Maintain a system to market, disseminate, and track information concerning PIHP services within each county served.
- H. Complete Customer Service reports as requested.
- I. Provide the NorthCare Network Customer Service Committee quarterly reports on Grievances and Appeals throughout the NorthCare Network region.
- J. Provide immediate training and corrective action of individual Member CMHSP Customer Service problems as they are discovered.
- K. Provide updates to Member CMHSP Customer Service Representatives on changes to benefits, provider network, applicant and network policies/procedures regarding access, service authorization, and grievance and appeals procedures.

Community Mental Health Agency or Substance Use provider's responsibilities for Customer Services are:

- A. Offer consumers the ability to advise and express their experience with Customer Services. The local Consumer Advisory committee representatives will report on their individual Member CMHSP efforts and on ideas for collaboration to improve the experience of consumers seeking services. The Substance Use Providers will report consumer input to the NorthCare Network Customer Service Specialist.
- B. When an individual contacts the Member CMHSP or NorthCare Network during normal business hours, the phone must be answered by a staff person trained in Customer Services so that they may properly handle a variety of calls (emergency, complaints, requests for services, etc.).
- C. Customer Service operations must be available a minimum of eight (8) hours per day during normal business hours (excluding weekends and Holidays) in each time zone that includes a portion of the geographic area served by the organization.

- D. The Customer Service unit shall have access to information about the PIHP including Member CMHSP annual reports, current organizational chart, Member CMHSP board member list, meeting schedule and minutes that are available to be provided in a timely manner to an individual upon request. NorthCare Network requires this information to be on the respective Member CMHSP website and is monitored during the NorthCare Network Annual Site review.
- E. Upon request, the customer services unit shall assist beneficiaries with the grievance and appeals, and local dispute resolution processes, and coordinate as appropriate with Fair Hearing Officers and the local Office of Recipient Rights. Grievances will be logged and tracked in the (ELMER) grievance and appeal module.
- F. The Quality Improvement process at each Member CMHSP has a mechanism in place to review, and when necessary to act upon, the feedback and findings of both the local Consumer Advisory Committee and the regional committee.

Consumer Participation to Improve Customer Services:

- A. Individuals and families will be sought to participate in the administration, program development and monitoring of the activities conducted by the Member CMHSP and NorthCare Network. Efforts will be made by NorthCare Network and the providers to ensure that all consumer populations served are represented. Examples of these activities might include opportunities to:
- serve on the Board of Directors
 - review policies for content and clarity
 - participate in community education projects
 - serve on special work group projects
 - advocate for other consumers
 - help create and lead consumer driven enterprises
 - complete consumer satisfaction surveys