

## NORTHCARE NETWORK

<b>POLICY TITLE:</b> Quality Management	<b>CATEGORY:</b> Quality Assessment & Performance Improvement	
<b>EFFECTIVE DATE:</b> 6/26/02	<b>BOARD APPROVAL DATE:</b> 5/2/12	
<b>REVIEW DATE:</b> 7/14/22	<b>REVISION(S) TO POLICY STATEMENT:</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>OTHER REVISION(S):</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>RESPONSIBLE PARTY:</b> Quality Improvement Coordinator	<b>CEO APPROVAL DATE:</b> 8/2/22 Dr. Tim Kangas, CEO	

### **APPLIES TO**

NorthCare Network Personnel  
Network Providers

### **POLICY**

NorthCare Network maintains a fully operational Board approved Quality Assessment and Performance Improvement Program (QAPIP) that meet the conditions specified in the Michigan Department of Health and Human Service (MDHHS)/Prepaid Inpatient Health Plan (PIHP) Quality Assessment and Performance Improvement Program (QAPIP), contract attachment MDHHS Contract, Balanced Budget Act standards and accreditation standards, as applicable. The QAPIP will promote system-wide approaches to improving consumer services and outcomes by promoting objective and systemic measurement, monitoring and evaluation of services, work processes, and implement quality improvement activities based upon such outcomes. NorthCare Network will ensure adequate staff and resources to support day-to-day functions of the program.

### **PURPOSE**

To outline requirements of NorthCare Network’s Quality Management program and to provide guidance for personnel and network providers.

### **DEFINITIONS**

N/A

### **REFERENCES**

- 42 CFR 438.240 - Balanced Budget Act, Subpart D – Quality Assessments and Performance Improvement.
- MDHHS/PIHP Contract, as amended  
[https://www.michigan.gov/mdhhs/0,5885,7-339-71550\\_2941\\_4868\\_4899---,00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_4868_4899---,00.html)
- MDHHS Policies and Practice Guidelines-Quality Assessment and Performance Improvement Programs,  
[https://www.michigan.gov/mdhhs/0,5885,7-339-71550\\_2941\\_4868\\_4900---,00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_4868_4900---,00.html)
- MDHHS Establishing Administrative Costs w/in and Across the CMHSP System
- Accreditation Standards, as applicable
- NorthCare Network QAPIP Plan
- NorthCare Network Quality Management Policies and Procedures

## **HISTORY**

REVISION DATE: 7/3/08, 1/13/11, 3/13/13, 8/5/13, 9/12/13, 8/27/14, 8/30/16, 6/15/17, 2/4/20, 11/17/20, 7/14/22

REVIEW DATE: 7/29/04, 9/14/05, 12/14/10, 1/13/11, 3/13/13, 8/5/13, 9/12/13, 8/27/14, 5/22/15, 10/13/15, 8/30/16, 6/15/17, 5/1/18, 3/25/19, 2/4/20, 11/17/20, 9/23/21, 7/14/22

CEO APPROVAL DATE: 1/13/11, 3/13/13, 8/5/13, 9/12/13, 8/27/14, 6/2/15, 11/9/15, 9/6/16, 7/13/17, 5/10/18, 4/1/19, 2/4/20, 1/5/21, 10/5/21, 8/2/22

BOARD APPROVAL DATE: 6/26/02, 10/6/04, 11/2/05, 5/2/12

## **PROCEDURES**

NorthCare Network maintains a *quality management program* that promotes objective and systematic measurement, monitoring and evaluation of services, work processes, and implements quality improvement activities based upon the outcomes. The goal of the quality management program is to ensure that the organization has the requisite structures and processes in place to ensure quality services to consumers and the provider network.

Components of Quality Management include the following and are detailed in the Quality Assessment and Performance Improvement Plan (QAPIP):

- A. Standard Setting which includes review, analysis and recommendations concerning standards and measurement methodologies in areas essential to a continuous quality improvement culture. These include choice of accrediting body, best practice guidelines, assessment tools, and performance expectations.
- B. Conducting performance assessments which includes both routine, periodic performance assessment and specially designed evaluation activities such as Performance/Quality Improvement Projects (P/QIP).
- C. Managing outside agency review processes by ensuring that source material is complete and available for reviews by outside bodies such as: accrediting bodies, MDHHS certification reviews and financial audits, external quality reviews. Licensing bodies, non-MDHHS payor audits, CMS and other federal review bodies.
- D. Quality process facilitation which consists of activities aimed at continuous improvement of the processes by which agency and contractor business is conducted.
- E. Provider education and quality management oversight which includes activities related to ensuring that contractors have, and carry out, their own quality management plan, as well as ensuring that a QI culture is developed and maintained within all areas of the organization.
- F. Development of an annual Quality Improvement Work Plan that establishes specific goals for the coming year, consistent with the PIHP Strategic Plan, accreditation as applicable, other payor requirements and MDHHS QAPIP requirements.
- G. Various Quality Committees are in place to address quality management activities and are outlined in the QAPIP and Committee Fact Sheets. Specific duties of these Committees include, but are not limited to:
  1. All Committees:
    - a. Meet at least quarterly;

- b. Maintain approved records of all committee meetings;
  - c. Communicate performance, results of quality activities and identified best practices to the Quality Oversight Committee and other committees, as appropriate, via meeting minutes, quarterly reports, annual performance management report, etc.
  - d. Communicate via email, sharing of reports/data and/or committee meeting minutes and handouts;
  - e. Measure and analyze processes, satisfaction or outcome trends performed using valid and accurate measurement methods, including but not limited to, those directly related and relevant to quality of services.
2. Quality Management and Oversight Committee
- a. Conducts annual effectiveness review utilizing the approved QAPIP Effectiveness Review Tool. Results of this review will be used to update the QAPIP, policies and to develop the next fiscal year QI Work Plan and is submitted to MDHHS no later than February 28.
  - b. Includes at least one participating provider or receives input from participating providers as appropriate.
  - c. Provides guidance to staff on quality management priorities and projects.
  - d. Monitors progress in meeting common quality improvement goals.
  - e. Ensures acceptable levels of performance is met with periodic re-measure to ensure sustained improvement.
  - f. Provides recommendation of Quality/Performance Improvement Projects to undertake, to the Leadership Team.
  - g. Reviews performance measures from Member CMHSPs at least quarterly.
  - h. Conducts ongoing monitoring of performance to ensure sustained improvement over time.
  - i. Reviews performance data/reports submitted by delegates and takes actions, as appropriate, to address any non-compliance.
  - j. Monitors progress in meeting specific quality improvement goals.
  - k. Defines acceptable levels of performance and periodic re-measure to ensure sustained improvement.
  - l. Approves Quality/Performance Improvement Projects to undertake.
  - m. Reviews performance measures for the organization and each Member CMHSP at least quarterly.
  - n. Reports to the organization's oversight authority, at least quarterly.
  - o. Reviews aggregate data to assist in addressing identified trends or patterns in the areas such as Behavior Treatment, incident reporting, grievance, appeals and complaints.
3. Governing Authority
- a. Annually reviews and approves the QAPIP and the annual effectiveness review.
  - b. Monitors, evaluates, and establishes policy that supports improvement in care.
  - c. Receives ongoing quality management updates.
  - d. Retains the ultimate responsibility for the quality of services provided.