

SHIAWASSEE COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

POLICY AND PROCEDURE MANUAL

Section: Clinical
Policy Number: 66
Subject: **Reporting Requirements**

Effective Date: 4/29/02
Last Revision Date: 12/29/15
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Policy

It is the policy of Shiawassee County Community Mental Health Authority (SCCMHA) to ensure the efficacy of any managed care operations in which it is engaged through a process of continuous aggregation and monitoring of performance information. This is to be accomplished through the publication of standardized reports related to the quality of managed care operations including access management, member services, contract monitoring, provider services, utilization management, and fiscal/claims management. This information is to be reviewed to support effective decision-making concerning management of the organization's resources.

Purpose

This policy is being adopted in order to comply with the policy for affiliation with the Mid-State Health Network (MSHN). SCCMHA procedures will be developed or revised as needed to be consistent with the MSHN.

Application

This policy applies to all SCCMHA programs and services.

Compliance

External: MSHN
MDHHS Master Contract and Attachments
MDHHS Application for Participation Standards

Approved by: 
Board Chairperson

4-14-2016
Date


Chief Executive Officer

4/14/16
Date

