

CMHPSM FISCAL YEAR 2015 PROVIDER AUDIT RESULTS

The provider audits were grouped into 7 “Standard” categories: Administration, Clinical Admission/Assessment, SUD Residential, Women’s Specialty, Documentation/Progress Notes, External Provider Referrals, and Discharge.

Methodology: The score for each question was rated using a non-applicable (N/A), 0, 1, or 2 (with 2 having the highest compliance rating possible). A percentage was then calculated based on the total scores of all records reviewed. In cases where services were not provided, the score was “non-applicable”. Items that were non-applicable were omitted from the percentage calculation.

Items that scored under 2.0 but above 1.0 resulted in a recommendation for improvement from the CMHPSM Staff. If scores fell at 1.0 or under, providers were required to submit a corrective action plan to describe what action will be taken to correct the deficiency. Providers were given 30 days to submit their plan of correction. In the event an item was unable to be corrected appropriately, CMHPSM Staff would provide technical assistance to the provider. There were no major infractions that met this category.

The following chart identifies the overall summary of the site visits conducted, including the percentage score, recommendations, and date of plan of correction returned.

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PROVIDERS	PROGRAMS OFFERED	PERCENTAGE	RECOMMENDATIONS	DATE SITE VISIT/ REPORT SENT	POC RECEIVED	POC ACCEPTED
Home of New Vision	Outpatient, detox, case management	96%	7 recommendations, NO POC	4/15/2015 /NA	N/A	N/A
Premier	Methadone Services	95%	3 recommendations, POC	4/29/2015 7/28/2015	8/10/2015	YES
Ann Arbor Treatment	Methadone Services	94%	11 recommendations, NO POC	5/12/2015 7/7/2015	N/A	N/A
Key Development	Substance Use Services, outpatient	92%	3 recommendations, POC	5/6/2015 7/30/2015	8/17/2015	YES
Salvation Army Harbor Light	Detox, residential, outpatient	87%	6 recommendations, POC	6/23/2015 7/21/2015	8/18/2015	YES

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Dawn Farm	Inpatient, Residential Detox	86%	4 recommendations, POC	4/14/2015 7/21/2015	8/21/2015	YES
Monroe Catholic Charities	Substance Use treatment, outpatient	86%	4 recommendations, POC	7/22/2015 7/23/2015	7/26/2015	YES
Rainbow Clinic	Methadone Services	82%	10 Recommendations, POC	6/30/2015 8/13/2015	EXTENSION GIVEN TO 9/19/2015	YES
McCullough Vargas	Substance Use Services, individual and group therapy	79%	12 Recommendations, POC	6/24/2015 8/6/2015	9/3/2015	YES
Livingston Catholic Charities	Substance Use individual and group therapy	77%	14 Recommendations, POC	5/6/2015 7/21/2015	8/17/2015	YES
Lenawee Catholic Charities	Substance use treatment, individual/family	77%	10 Recommendations, POC	6/24/2015 8/4/2015	9/11/2015	YES

Overall, areas where compliance improvements were necessary related to documentation timing errors, treatment planning, and clinical practices. The following list is representative of the majority of improvements needed.

1. Providing a faith based provider choice notice
2. Assessing for risk of TB, Hep C and other communicable diseases and providing referrals for testing
3. Timely treatment plans
4. Treatment plans describing type and frequencies of services
5. Treatment plan objectives and goals being measurable
6. Having a Detox plan
7. Offering Recovery coaching and peer services
8. Maintaining the proper staff to client ratios defined by licensing
9. Documenting coordination with primary care or where complex care coordination is needed or if the client is also prescribed Benzodiazepines & methadone
10. Ensuring there has been a physical exam within the last 6 months
11. Making sure the client sees a physician if they miss their med reviews in a methadone program
12. Following proper take home rules
13. Referral for Vocational, Educational and Employment services

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14. Verifying the clients identity in the clinical record
15. Documentation of an advance directive
16. Staff receive training on communicable diseases and ASAM placement criteria
17. Staff have proper credentials and supervision
18. Assessing ability to pay
19. Follow policy on Fetal Alcohol Spectrum Disorders
20. Timely discharge process and summary