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|---|--------------------|--------------------------------------|----------------------|----------------------|
| SUBJECT Policy Procedure Development & Approval | | CHAPTER 01 | SECTION 03 | SUBJECT 03 |
| CHAPTER Administration | | SECTION General Operations | | |
| WRITTEN BY Jamie Bishop | REVIEWED BY | | AUTHORIZED BY | |

I. APPLICATION:

- PIHP Board CMH Providers SUD Providers
 PIHP Staff CMH Subcontractors

II. POLICY STATEMENT:

It shall be the policy of Region 10 PIHP that all policies will be developed, reviewed, and revised in accordance with the procedures outlined below.

III. DEFINITIONS:

- A. Policy: A document that contains the Board’s policy statement and the procedures that it approves.
- B. Policy Statement: Establishes a principle or position regarding a specific matters adopted by the Board.
- C. Standard: An authoritative directive establishing an expectation of particular conduct or procedure.
- D. Procedure: The actions taken by designated individuals, with specific steps and responsibilities that operationalizes the Board’s policy statement.

IV. STANDARDS:

- A. Policies are to provide direction to support achievement of the organization’s mission, vision and values; to meet changing needs of Region 10 PIHP; to achieve compliance with applicable laws, rules, and funding requirements and; to assure responsiveness to customer/stakeholder needs.
- B. Policies shall be established/reviewed by responsible Region 10 employee; reviewed by designated committee/staff in the Region 10 organizational structure as appropriate; and reviewed and approved by the PIHP Board.
- C. Policies are not effective until formal Board action has occurred. Designated Region 10 employee to determine the need for Board approval dependent on policy or proposed changes/revisions. Minor changes can be made and approved by designated PIHP staff member(s).
- D. The Region 10 PIHP Board approves policy statement and standards for all new policies and

any policies with substantive changes in statement/standards. The Board approves any other policies determined to require Board approval. The Board can request to review and recommend revision to any policy at any time.

- E. Region 10 PIHP reserves the right- either prospectively or retrospectively- to review any policy at any time. Moreover, it reserves the right to add or delete policies to the Provider Manual as it deems necessary to achieve Region 10 PIHP desired ends and outcomes.
- F. Region 10 PIHP administration reserves the right to order immediate implementation should it be determined necessary based on need and guidance from MDHHS.

V. PROCEDURES:

Policy Development Process

- A. Gather input from Region 10 PIHP staff, CMH/SUD Providers, Workgroups, and Committees as applicable.
- B. Draft policy referring to attachment B “Policy Drafting and Review Guidelines” utilizing attachment A “f_Template for Policies” located in Region 10 Shared Drive for formatting.
- C. Policy draft will then be saved in the “Working Draft” Folder on Region 10 S Drive and forwarded to Policy Function Area Designee for review/revision.
- D. Designee will then forward final draft to Region 10 Administration for review.
- E. Policy will then be posted to Region 10 website and notices sent to system that policies are available for two-week system-wide review.
- F. CMH/SUD Providers will distribute policy draft to their consumer councils for feedback as applicable.
- G. Feedback to be forwarded to Region 10 Designee in any format. Exhibit C is optional.
- H. Designee to review feedback and make revisions where applicable before submitting to Region 10 Administrator for final review.
- I. Should Region 10 Administrator deem Board Approval necessary, the draft will be sent to PIHP Board for review and final approval.

VI. EXHIBITS:

- A. F_Template for Policies
- B. Policy Drafting and Review Guidelines
- C. Policy Review Sheet

Exhibit A

Region 10 PIHP

Date Issued: _____

Date Revised: _____

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|-------------------|--------------------|----------------|----------------------|----------------|
| SUBJECT | | CHAPTER | SECTION | SUBJECT |
| CHAPTER | | SECTION | | |
| WRITTEN BY | REVIEWED BY | | AUTHORIZED BY | |

PIHP Board
 PIHP Staff

CMH Providers
 CMH Subcontractors

SUD Providers

I. APPLICATION:

II. POLICY STATEMENT:

III. DEFINITIONS:

IV. STANDARDS:

V. PROCEDURES:

VI. EXHIBITS:

Policy Drafting and Review Guidelines

1. **Header Information:** When completing this section of the policy, refer to the Table of Contents to determine the appropriateness of selecting these titles.

Chapter 1 Administrative

- 1.1 Governance
- 1.2 Compliance
- 1.3 General Operations
- 1.4 Quality Management
- 1.5 Utilization Management
- 1.6 Provider Network

Chapter 2 Human Resources

- 2.1 Personnel

Chapter 3 Information Management

- 3.1 Technology
- 3.2 Data Management
- 3.3 Health Records

Chapter 4 Fiscal Management

- 4.1 Budget
- 4.2 Accounting
- 4.3 Reimbursement

Chapter 5 Clinical Practice Guidelines

- 5.1 Access to Services
- 5.2 Customer Services
- 5.3 Care Delivery

Chapter 6 Health and Medical

- 6.1 Health Care

Chapter 7 Rights of Persons Served

- 7.1 Individual Rights
- 7.2 Grievances and Appeals
- 7.3 SUD Grievances and Appeals

2. **Application:** Check the appropriate boxes that indicate to whom this policy should apply.
3. **Policy Statement:** A brief statement that expresses the Board's position with regard to the subject matter of the policy. This will always begin with "It shall be the policy of.." followed by the entities to which it applies.
4. **Definitions:** Statements that indicate the meaning of a word, phrase, or title. When possible, definitions should be consistent when used throughout multiple different policies. Definitions should never be in contradiction with authoritative definitions, e.g., definitions provided within the Mental

Health Code, etc. Definitions are not required but should be included when necessary to understand/implement the policy/procedures. When Definitions are used, they should be listed alphabetically.

5. **Standards:** These authoritative statements establish the criteria or parameters within which the procedures are written. The source of the standards could be internal and therefore an extension of the policy statement, or the source could be external. Standards are an optional item but should be included when necessary to understand/implement the policy/procedure; or as a reference of standards that are mandated by an outside inaccessible source.
6. **Procedures:** This section describes the actions that should be taken to implement the policy. It clearly identifies “who” is responsible for some action. The section numerically identifies what action should be taken. Writers should avoid putting too many tasks under one step. Procedural statements should be simple and brief. If there is a need to clarify further by referencing another policy or special circumstance, the writer should indicate this by using “Note:” or “Special Note:” When exhibits are referenced, they should be referenced in order (Exhibit A, Exhibit B, etc.).

There are two other options for drafting within the procedural section. If the policy involves more than one set of procedural steps, they should be listed separately. The numbering of steps would start over within each sub-procedural area. Also, if a procedure is particularly complicated, or a detailed concurrent procedure, the writer should indicate as a procedural step “Follows the procedures in Exhibit....” The Exhibit would then outline the procedures.

7. **Exhibits:** All exhibits to a policy must be labeled. They should be alphabetical, with numerical indicators if needed, e.g., A-1, A-2, etc. When changing an exhibit, the writer should keep in mind whether or not the exhibit is contained in other policies. The subject matter of exhibits should not contain material that frequently changes (e.g., staff names should not be used, rather, that persons title).

Policy Review Sheet

Name of Reviewer:

Title and Number (Chapter, Section, Subject):

Send Feedback to: Jamie Bishop

Email Address: Bishop@region10PIHP.org

Feedback Due Date:

Instructions:

1. Review the Policy
2. Provide written feedback and/or suggested language changes on this sheet or policy.
3. A memo will be sent to the network informing staff of any changes that may have been made to the proposed policy.

| Name of Policy | Page/area commented on | Comments/Language Changes |
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