Department of Behavioral Health TRANSMITTAL LETTER

SUBJECT Suspended Referral Status		
POLICY NUMBER DBH Policy 200.3	DATE SEP 0 8 2019	TL# 327

<u>Purpose</u>. The purpose of this policy is to set forth policy and procedures for suspending referrals to a Department of Behavioral Health mental health and substance use disorder treatment services provider.

<u>Applicability</u>. Department of Behavioral Health (DBH) licensed, certified or contracted mental health (MH) and substance use disorder (SUD) treatment service providers with a Human Care Agreement (HCA).

<u>Policy Clearance</u>. Reviewed by affected responsible staff and cleared through appropriate Behavioral Health Authority (BHA) offices.

<u>Effective Date</u>. This policy is effective immediately. Questions regarding this policy may be addressed to DBH through the provider agency's Network Development Specialist.

<u>Superseded Policy</u>. DMH Policy 200.3A Suspended Referral Status, dated May 16, 2013.

<u>Distribution</u>. This policy will be posted on the DBH web site at <u>www.dbh.dc.gov</u> under Policies and Rules. Please contact Ana Veria at <u>ana.veria@dc.gov</u> or Keri Nash at <u>keri.nash@dc.gov</u> for a Word version. Applicable entities are required to ensure that affected staff is familiar with the contents of this policy.

Barbara J. Bazron, Ph.D.

Director, DBH

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DEPARTMENT OF	Supersedes		
BEHAVIORAL HEALTH	DMH Policy 200.3A, same subject, dated May 16, 201		

Subject: Suspended Referral Status

- 1. <u>Purpose</u>. The purpose of this policy is to set forth policy and procedures for suspending referrals to a Department of Behavioral Health mental health and substance use disorder treatment services provider.
- 2. <u>Applicability</u>. Department of Behavioral Health (DBH) licensed, certified or contracted mental health (MH) and substance use disorder (SUD) treatment service providers with a Human Care Agreement (HCA).
- 3. <u>Authority</u>. Social Security Act § 1102 (42 U.S.C. §1302); 42 CFR § 431.10 (j); 42 CFR § 455.23; 42 CFR § 455.2; The District of Columbia Medicaid State Plan for Medical Assistance, § 1.1; The Department of Health Care Finance Establishment Act of 2007, effective February 27, 2008 (D.C. Law 17-109); Department of Behavioral Health Establishment Act of 2013; 22-A DCMR § 34 Mental Health Rehabilitation Services (MHRS) Provider Certification Standards; and 22-A DCMR § 63 Certification Standards for Substance Use Disorder Treatment and Recovery Providers.

4. Definitions.

- 4a. Access HelpLine. A 24/7 DBH telephone line operated twenty four (24) hours per day, seven days a week staffed by behavioral health professionals who can refer a caller to immediate help or ongoing care. The number is 1(888)7WE-HELP or 1-888-793-4357.
- 4b. <u>Credible allegation of fraud</u>. May refer to a charge from any source for which the DBH Accountability Administration (AA) has determined that the preponderance of the evidence substantiates the allegation, including but not limited to: fraud hotline complaints at Tel. # 1-800-554-5564; claims data mining; patterns identified through provider audits; civil false claims cases; and law enforcement investigations.
- 4c. <u>Corrective Action Plan (CAP)</u>. A provider's proposed remedy to address a deficiency that promoted the Suspended Referral Status (*See* § 6 below).
- 4d. Good standing status. To be in good standing, the provider shall have: (1) a current certification from DBH; (2) all required staff positions filled with appropriately licensed, qualified, and trained staff; (3) an average failure rate on its last two annual claims audits not in excess of 25%; (4) no pending credible allegations of fraud with DBH or other District Government Agency; and (5) eligibility to receive a Human Care Agreement (HCA) with DBH based on the criteria set by the District Office of Contracting and Procurement.

4e. <u>Human Care Agreement (HCA)</u>. A contract between the District of Columbia Government through a representative and a provider/contractor pursuant to provide mental health and/or substance use disorder treatment, services and/or supports.

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- 4f. Notice to Cure. A notice issued by the Office of Contracts and Procurement (OCP) on behalf of DBH to inform a provider that DBH considers a provider's deficiency a condition that is endangering performance of a contract. The notice usually specifies a time period for a provider to correct the deficiency.
- 4g. Suspended Referral Status. A status in which DBH will not refer additional consumers to a provider for service until the reasons for the suspension have been resolved.
- 5. **Policy**. DBH is committed to promote the health and well-being of consumers through services at the provider network that meet regulatory standards and contractual agreements. Providers shall be in good standing and those who do not meet these standards shall be placed on Suspended Referral Status until the designated CAP has been met.

6. Reasons for Provider Suspended Referral Status.

DBH may place a provider on a Suspended Referral Status for the following reasons:

- 6a. Credible allegation of fraud (See § 4b above).
- 6b. Regulatory, contractual and policy violations as indicated by any or all of the following:
 - (1) A pattern of poor quality and/or non-compliant services as determined by the DBH Office of Accountability as evidenced in the following: (a) claims audits, (b) fidelity reviews and ratings, (c) quality reviews, (d) incidents and investigations, (e) outcome measures, or other violations of the HCA;
 - (2) Provider's inability to render services in a timely manner or meet dates per DBH continuity of care policies; and
 - (3) Provider is no longer in good standing.
- 6c. Provider has reached maximum capacity to the extent that it is no longer capable of serving additional consumers. If this is the case, the provider shall notify their assigned Network Development Specialist. Closing enrollment is a choice the provider can make due to one or more of the following:
 - (1) The provider's intake slots are filled;
 - (2) The provider needs additional staff for intakes, and/or
 - (3) The provider lacks clinicians to diagnose consumers within the required time frame after enrollment.

7. Procedures.

7a. General Procedures.

When DBH has found the provider to no longer be qualified to deliver services and supports as referenced in § 6a and 6b above, the DBH Accountability Administration (AA) shall:

- (1) Conduct a cross administrative conference to make proposals to the DBH Director regarding suspending referrals to the provider.
- (2) Submit a report to the Director regarding the prevailing conditions or circumstances that led to the Suspended Referral recommendation. This report shall specify the provider's deficiencies, and shall be accompanied by the CAP that outlines dates by which deficiencies must be corrected.
- (3) The DBH Director will notify the provider of the Suspended Referral Status and the CAP. The provider shall respond to the CAP within ten (10) business days. All CAP responses shall be submitted to AA.
- (4) AA will communicate provider's Suspended Referral Status to relevant DBH Administrations and Offices internally.
- (5) On designated timelines decided by AA, the AA Division of Certification will conduct a focused review addressing the CAP in collaboration with the provider until the conditions for the suspended referral status have been addressed.
- (6) Network Development (ND) will meet with the provider to understand underlying issues and strategies toward CAP completion and continuously monitor the progress of the work plan.
- (7) AA will notify the Director when the provider successfully completes the CAP. AA will, then, notify the provider when the Suspended Referral Status is lifted.
- (8) When AA has lifted the Suspended Referral Status, the provider shall follow the steps in resuming acceptance of referrals per 22-A DCMR § 34 Mental Health Rehabilitation Services (MHRS) Provider Certification Standards; and 22-A DCMR § 63 Certification Standards for Substance Use Disorder Treatment and Recovery Providers.
- (9) AA will follow all internal procedures in reinstituting consumer referrals to provider through ND.
- 7b. When a provider has reached maximum capacity (See §6c above), the provider shall:
 - (1) Notify their agency's ND Specialist that they have reached maximum capacity. The provider shall also notify AA in writing (i.e., email) of the conditions and circumstances that prevent the provider from adhering to the required staff-consumer ratio. This

notification shall include a work plan for the steps toward resolutions and timelines for completion.

- (2) ND will meet with the provider to understand underlying issues.
- (3) AA will communicate provider's Suspended Referral Status to relevant DBH Administrations and Offices internally.
- (4) When AA has lifted the Suspended Referral Status, the provider shall follow the steps in resuming acceptance of referrals per 22-A DCMR § 34 Mental Health Rehabilitation Services (MHRS) Provider Certification Standards; and 22-A DCMR § 63 Certification Standards for Substance Use Disorder Treatment and Recovery Providers.
- (5) AA will follow all internal procedures in reinstituting consumer referrals to provider through ND.
- 8. <u>Inquiries</u>. Questions regarding this policy may be addressed to DBH through the provider assigned ND Specialist.

Approved by:

Barbara J. Bazron, Ph. D.

Signature)

Director, DBH

(Date)