



SUMMIT POINTE POLICY AND PROCEDURE MANUAL

Section: Provider Network	Policy Name: Ongoing Compliance Monitoring	Policy Number: 1.2.5	
Owner: Director of Provider Network	Applies To: <input checked="" type="checkbox"/> Summit Pointe Staff <input checked="" type="checkbox"/> Summit Pointe Contract Providers <input checked="" type="checkbox"/> Summit Pointe CCBHC Services <input checked="" type="checkbox"/> Summit Pointe CCBHC DCO Providers		
Approved By: <i>Jean M. Sooduck</i>			
Version Number: 5	Last Review Date: 01/30/2026	Revised Date: 01/30/2026	First Effective Date: 11/01/20

I. **PURPOSE:**

The purpose of this policy is to define the methods for establishing quality oversight of Summit Pointe's external provider network through monitoring and site reviews. Summit Pointe's ongoing compliance monitoring ensures compliance with all required regulations and confirms that high quality services are provided to our customers. The policy will also outline how Summit Pointe will act when concerns are found.

II. **DEFINITIONS:** Refer to the "Summit Pointe Policy and Procedures Definitions Glossary."

III. **POLICY:**

Summit Pointe shall monitor contractual compliance, quality, performance and compliance with Federal and State standards and regulations of each external provider that it contracts with to provide mental health services for customers utilizing Medicaid funds. Summit Pointe will monitor providers through a variety of mechanisms. This includes site reviews, desk audit reviews and documentation reviews. Summit Pointe may use reviews completed and shared by other Community Mental Health Service Providers (CMHSP) through reciprocity efforts.

IV. **PROCEDURE:**

Provider Monitoring Review Elements:

The monitoring of external providers shall consist of a review of the following applicable elements inclusive of both practice and policy standards.

- Federal regulations, including the Medicaid Managed Care Regulations, Code of Federal Regulations (CFRs), Health Insurance Portability and Accountability Act (HIPAA), Centers for Medicare and Medicaid Services (CMS) and all protocols for Prepaid Inpatient Health Plans (PIHPs), and applicable federal laws pertaining to the Medicaid program and/or health plan.
- Michigan Mental Health Code and Substance Use Disorder Administrative Rules.
- Provider Contracts provisions.
- Policies, standards, and procedures set forth by Summit Pointe and Southwest Michigan Behavioral Health (Summit Pointe's payor).
- Michigan Medicaid Provider Manual.

Summit Pointe will utilize the monitoring tools provided by Southwest Michigan Behavioral Health.

Summit Pointe will incorporate meaningful customer involvement in monitoring activities.



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Summit Pointe will utilize processes and procedures to share provider monitoring results for providers who share within the Southwest Michigan Behavioral Health region to reduce redundant processes and duplicative site reviews for those who contract with multiple counties in the region.

Monitoring results may be obtained from another Community Mental Health Service Provider or Prepaid Inpatient Health Plans outside the region. Results will be reviewed and if complete and sufficient, may be accepted.

Summit Pointe will conduct Risk Reviews, which includes the collection and analysis of data from multiple internal teams. Risk scores may be used to determine the need for additional oversight actions, including but not limited to additional site reviews, audits, enhanced monitoring agreements, conditional credentialing status, or contractual sanctions.

Summit Pointe reserves the right to conduct additional ad hoc site reviews or monitoring if there are any issues with quality or compliance

Provider Non-Compliance and Sanctions:

Whenever possible Summit Pointe will work toward continuous improvement with providers who are out of compliance with their contract.

- Sanctions will be used with providers who demonstrate unsatisfactory performance, fail to respond, fail to submit plans of correction within required timeframes and/or for discovery of significant risks (i.e., health hazard, serious injury, loss, exposure).
- Sanctions will be based on the severity and frequency of the contractual violation(s). Typically, sanctions will be progressive in nature but can begin at any level depending on the severity and frequency of the violation.
- Under unusual circumstances (a non-emergent situation where health and safety is not at risk), sanctions will require providers to remediate/correct violations noted within the timeframe determined.
- Under emergent situations where health and safety is a concern, the provider will be required to immediately correct the violation.
- Ongoing monitoring of all providers in the Summit Pointe network is to ensure the provider maintains compliance with all regulations.

Communications to Providers regarding Sanctions:

Summit Pointe will send the provider notice outlining the areas of noncompliance. Correspondence will outline the following:

- Area of non-compliance.
- Level and type of sanction.
- Expected remedy or improvement.
- The due date of the remedy is expected to occur.
- Due date for the response of the provider.
- Contact the person for questions and correspondence.
- Statement indicating that continued non-compliance may include termination of the contract.

V. **REFERENCES:**
SWMBH Operating Policy 02.13

VI. **ATTACHMENTS:**
None