IMPROVING ORGANIZATIONAL LEADERSHIP

CHAPTER: 6	SECTION:	2	SUBJECT: IMPROVING ORGANIZATIONAL LEADERSHIP
TITLE:			
UTILIZATION MANAGEMENT			
EFFECTIVE DATE:	REVISED/REVII		EWED DATE:
12/15/95		12/11/96, 5/1/99,	11/5/01, 3/15/05, 11/28/08, 6/6/12,
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		6/6/18, 7/31/19, 9	/16/20, 9/28/21, 10/31/22, 11/17/23
ISSUED AND APPROVED BY:			
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	EXECUTIVE DIRECTOR		

I. **PURPOSE:**

A. The process by which CMHOC ensures that individuals receive timely, high quality, costeffective services in the most appropriate and least restrictive treatment setting and ensures that CMHOC has an effective mechanism to manage the utilization of clinical resources.

II. **APPLICATION:**

A. All Community Mental Health of Ottawa County (CMHOC) programs.

III. **DEFINITIONS:**

A. <u>Utilization Management (UM):</u> is the function of monitoring the use of agency resources through prospective, concurrent, and retrospective reviews, thereby assuring quality services are provided in an efficient and effective manner.

POLICY: IV.

- A. Community Mental Health of Ottawa County will maintain and support a Utilization Management Committee (UMC) which will assure the following:
 - a. Assure fair and consistent access by consumers to services based on principles that are clinically and fiscally sound, and consistent with stated admission criteria.
 - b. Services provided match the intensity of service needed.
 - c. Adequate outreach to target populations is occurring.
 - d.Data indicators that measure performance in access, efficiency, and outcome are collected and reported.
 - e. Compare data results from CMHOC to external benchmarks from statewide data or other sources.
 - f. Report state performance indicators and Data Matrix outliers to the Leadership Group, making appropriate recommendation for improvement, and/or contacting the Executive Director or other key management staff with recommendations that need more immediate attention.
 - g. Follow-up action plans are developed when necessary to address identified issues, and monitored until they are complete.

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V. PROCEDURE:

- A. UM is a standing committee of the CQI structure consisting jointly of Utilization Management and Leadership. Written reports and recommendations are reviewed monthly.
- B. UM will communicate with and make recommendations to key management staff, including the Executive Director.
- C. UM will meet once a month.
- D. UM policy will be reviewed on an annual basis.
- E. UM plan will be reviewed and updated on an annual basis.
- F. UM will maintain and monitor data as specified in the "UM Data Matrix" (see attached).
- G. UM will share reports with the Consumer Advisory Committee when appropriate in efforts to make informed decisions.
- H. Membership of Committee
 - a. UM membership will be interdisciplinary in nature, and include minimally representation from the following areas within CMHOC:
 - Key clinical representatives from services to consumers with mental illness, developmental disabilities, and/or substance use disorder.
 - ii. Access Center representatives responsible for services to consumers with mental illness, developmental disabilities, and/or substance use disorder.
 - Finance manager or representative. iii.

VI. **ATTACHMENT:**

"UM Data Matrix"

VII. **REFERENCES:**

Selected sections of the Michigan Department of Community Health, "Managed Specialty Supports and Services Contract," Number 4.5.2.1: Medical Necessity Criteria, Number 4.5.3.1: Service Selection Guidelines: Developmental Disabilities, Number 4.5.4.1: Service Selection Guidelines: Mental Health.