COMMUNITY MENTAL HEALTH AUTHORITY

ADMINISTRATIVE POLICY AND PROCEDURES MANUAL				
Chapter **Program Quality**	**Section** **Provider Network Management**	**Chapter** **05**	**Section** **05**	**Subject** **11**
Subject **Notification of Change in Provider Network and CMH Administrative Personnel**	**Authorization**		**Approved: 01/26/2021** **Replaces: 12/26/17**	

Updated: October 2024; Reviewed/No Updates: October 2025

I. PURPOSE: To ensure adequate capacity and continuity of care Gogebic Community Mental Health Authority (GCMHA) will make sure that changes in its provider network are communicated in compliance with state and federal requirements.

II. APPLICATION: GCMHA providers employed directly, contracted, or subcontracted by GCMHA.

III. DEFINITIONS: None

IV. POLICY: GCMHA will notify NorthCare within four (4) business days of any changes to the composition of the provider network that negatively affect access to care, and changes in senior management positions. Other significant changes in the provider network will be communicated to beneficiaries and to NorthCare, as appropriate. GCMHA will also provide written notification to the Michigan Department of Health and Human Services (MDHHS) of any changes in senior management positions within seven (7) days.

V. PROCEDURE:

A. Notice to NorthCare: GCMHA's CEO, or designee, will notify NorthCare's CEO within four (4) business days of any changes in the following positions:
1. CEO.
2. Medical Director.
3. Finance Director.
4. Clinical Director.
5. Community Services Director.
6. Recipient Rights Officer.
7. Information Systems Analyst.
8. Compliance Liaison.

B. Notice to MDHHS: GCMHA's CEO, or designee, will notify MDHHS's Contract Manager within seven (7) days of any changes in the following senior management positions:
1. CEO.
2. Medical Director.

C. Notice to Beneficiaries: GCMHA's CEO or designee will make a good faith effort to give notice of termination of a provider, within 15 days after receipt or issuance of the

termination notice, to each beneficiary who received his/her primary care from, or was seen on a regular basis by, the applicable provider.

D. Notice to CARF: GCMHA's CEO, or designee, will notify CARF within 30 days of their occurrence for the following:

1. Change in leadership.
2. Change in ownership.
3. Change in the organization name.
4. Relocation of an accredited program or service of the organization itself.
5. Change in mail and/or email addresses.
6. Relocation, expansion, or elimination of an accredited program or location.
7. Financial distress.
8. Acquisition, consolidation, joint venture, or merger.

E. Provider Directory Updates: Provider Directories will be maintained as outlined in the Credentialing policy (#05-05-01).

VI. REFERENCES AND LEGAL AUTHORITY: BBA Section 438.207 (c)(2); 438.10 (f)(5); PIHP/MDHHS Contract Section 6.2; PIHP/MDHHS Contract Attachment P7.7.1.1 Reporting Requirements – Notification of Provider Network Changes; URAC Standards, as applicable; NorthCare Network Provider Directory Policy; CARF Behavioral Health Standards

VII. EXHIBITS: None