
Title 1	Northern Lakes Policies
Part 103	Managed Health Division
Subpart B	Contract Management
Policy No.	103.204
Subject	Provider Vetting

Applicability

Policy applies to all Managed Health Division employees, Northern Lakes CMHA employees, and contract and network providers.

Policy

The Managed Health Division is responsible for continuous monitoring of the provider network to ensure access, quality of care, person-centered approach, and customer satisfaction. Provider vetting is used by the Managed Health Division as a summary of certain measures of provider performance, and to compare results across a peer group or to set a standard or expectation. The Managed Health Division will utilize provider vetting to evaluate its network and to focus on quality improvement initiatives.

Procedures

1. The Managed Health Division develops standard measures of performance that are applied across the provider network. These measures are applied to areas such as utilization and cost, clinical outcomes, process, performance, and consumer satisfaction.
2. Data gathered from those measures are used to develop a profile of each provider through the vetting process.
3. The profiles are used as a tool to compare performance across the network and to ensure quality of network services.

Pertinent Data from provider vetting is documented and available to consumers and their families, providers, and the community. Information may be shared individually with providers or at general provider and/or consumer gatherings. Once a contract has been established between the provider and Northern Lakes CMHA, the provider will be posted on the Northern Lakes CMHA provider directory.

Adoption Date: June 4, 2006

Review Dates: June 5, 2009
March 28, 2012
April 26, 2018

Revision Dates: April 30, 2018
October 11, 2021 TA