Utah Department of
Health & Human Services
Integrated Healthcare

SUMH G&O Narrative

State Fiscal Year 2027

Local Authority: Utah Co/Wasatch Behavioral Health

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Overview

The purpose of this document is to meet contract compliance with the Local Authorities (LA) “Evergreen Contract” Article 1.2. “Office Directives” refers to the annual instructions promulgated by Department of Health and Human Services (DHHS), Office of Substance Use and Mental Health (SUMH), identified in Utah Code §26B-5-102(2). These directives describe the use and allowable expenditure of state and federal funds for the purpose of mental health and substance use prevention, crisis, treatment, and recovery support services.

This document is designed to be an addendum to the “Evergreen Contract”. It is updated prior to the start of the State Fiscal Year and may be updated during the State Fiscal Year when approved by the SUMH director or designee. DHHS will alert LA leadership via email to any updates to this document after the start of the State Fiscal Year.The LA is responsible to review both the “Evergreen Contract” and this document to ensure contract compliance.

Governance and Oversight (G&O)

General Auditing

Describe how auditing will be conducted, what items will be monitored and how required documentation will be kept up to date. State Code 26-B-5-102(2)(ee)

Outside Contract Provider Responsibilities:

Outside contracted providers shall be knowledgeable of WBH's Contracted Provider Agreement provisions including:

1. All laws, regulations, or actions applicable to the services provided therein.
2. All terms and conditions applicable to licensed mental health providers contained in "Mental Health Center Provider Manual" – Utah State Division of Health Care Financing.
3. The Enrollee grievance system and client rights contained in WBHs Medicaid Member Handbook.
4. "Best Practice Guidelines" found on WBHs website (www.wasatch.org).
5. Providers agreement to abide by and cooperate with WBH's Quality Utilization and Performance Improvement (QAPI) policies and procedures as they apply to private providers located on the www.wasatch.org website.
6. Conduct a monthly review of its agency staff through the Inspector General (HHS - OIG) list of excluded individuals and entities (LEIE) database http://oig.hhs.gov/fraud/exclusions/exclusions_list.asp
7. Obtain a National Provider Identifier number (NPI). https://nppes.cms.hhs.gov/login

All WBH clients' currently in services with contracted outside providers have their clinical record and billing documentation audited by WBH's Outside Provider Contract Program Manager or her designee.

The program manager/designee audits five percent (5%) of each clinical record open and assigned to each provider annually. When a provider serves more than one client, the program manager/designee audits a maximum of five clinical records annually. Each outside provider is audited annually if they provided treatment to a Medicaid client within that fiscal year.

The program manager/designee uses WBH's identified audit instrument for each clinical record audited. Specialized audits are initiated based on client complaints, suspicious billing practices, or from other reported issues.

General Auditing

The program manager will notify the outside provider orally and in writing of any negative audit findings. The outside provider has 90 days from the date of notification to correct errors. The program manager follows up to ensure all negative audit findings are corrected. A copy of the audit instrument is maintained by the program manager and the program manager reports any issues of significant concern or identified billing errors to WBH's Executive Committee and Quality Improvement Committee.

Fiscal Auditing

The Service Code Auditing Guidelines identify the mental health and substance use disorder treatment service codes that require documentation of services to be uploaded by spreadsheet for the audit. Services that can not be described by CPT/HCPCS code such as prevention, FRF and MCV (MCOT Vehicle costs) can be audited by providing a summary of invoices billed to Kissflow. There shall be a tab for each funding code utilized in the fiscal year.

Service Code Auditing Guidelines
The service code auditing guidelines are located at the end of the FFY for the Fiscal Year. These are the guidelines that the auditor uses to justify year end costs:
Has the LA read the guidelines provided in the FFH? Yes No
Are there any issues with complying with these guidelines with any service code allocated to you for FY27? Yes No
If there are any issues please identify each code and give an explanation:

Subcontractor Auditing and Tools
A list of subcontractors/subrecipients shall be provided prior to the audit. The subcontractor monitoring tool developed by SUMH shall be used in monitoring subcontractors. Subcontractor audits should be designed to evaluate the quality of services being provided, identify areas for improvement or training of subcontractors to help improve outcomes, ensure compliance with statute and office directives and provide accountability for state and federal funding. Explain how you use the provided state monitoring and other tools developed to fulfill the requirement of annually monitoring each subcontracted provider. (See FY27 Office Directives Subcontractor Monitoring Review (1) page (5)
Wasatch Behavioral Health only contracts with subcontractors for Medicaid services. The Subcontractor Auditing tool is not needed for these contracts.

Mechanisms for Citizen Input
Are you currently receiving public input and comments in the development of the annual area plan and budgets? State Code 17-77-301(5)(a)(vii), 17-77-201(5)(g)
As a Special Service District of Utah County, the Authority Board meetings for Wasatch Behavioral Health are held monthly and follow laws and rules governing public meetings. At the end of each public meeting including budget reviews, public comment is sought.
How do you, or will you, solicit public comments and input on your annual area plan and budgets?
WBH has not included the area plan in the public meetings but will do so moving forward.
How do you track this public input? (Please provide supporting docs)
Minutes from the monthly Authority Board
Did you receive any input for the FY27 Area Plan?
No
Who are the local advocates and coalitions that will be invited to the public review of the Area Plans and Budgets for FY27?

The general public is made aware and invited to all WBH Authority Board meetings including local advocates and coalitions. The WBH Advisory Board will also be invited to review the Area Plan at our next meeting.
If none were invited to participate, who are the local coalitions and advocates that should be invited to participate this year for FY27?
N/A

Policies Procedures and Auditing

Per the FY27 SUMH Office Directives, each LA shall develop, implement, and maintain written policies and procedures that encompass all requirements, including:

i) governance and oversight,
ii) substance use disorder prevention services,
iii) suicide prevention services,
iv) crisis services,
v) mental health treatment services,
vi) substance use disorder treatment services,
vii) recovery support services,
viii) data reporting, and
ix) grant and contract reporting.

Does the Local Authority have the policies above in place? Yes No
Are the policies up to date (5 years or less)? Yes No
Please provide these policies with your uploads

Additional Policy Auditing
Does the Local Authority have the policies below in place? Yes No

Are the policies up to date (5 years or less)? Yes No
Please provide these policies with your uploads

The following audit items are located in the SUMH FY27 Monitoring Handbook.

A) Corrective Action Policy
B) Standardized finding format
C) Standardized CAP Tool/Root Cause Format
D) Standardized Operating Procedure for CAP's
E) Quality and Effectiveness Standards for Subcontractor Monitoring
F) A Link to the FY27 Standardized Audit Tool