

Southwest Iowa MHDS Region



Service Management

Transition Plan

June 30, 2014

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A) Local Access Points

An access point is a part of the Southwest Iowa MHDS regional service system that is trained to complete MH/DS regional applications for persons with a disability. SWIA MHDS has designated the following access points.

Access Point	Address	Phone number
Alegent Creighton Health Missouri Valley Psychiatric Associates	704 North 8th Street Missouri Valley, IA 51555	712-642-2045
Alegent Creighton Mercy Hospital	800 Mercy Drive Council Bluffs, IA 51503	712-382-5000
Alegent Creighton Psychiatric Associates	801 Harmony Street, Suite 302 Council Bluffs, IA 51503	712-328-2609
Burgess Mental Health	1600 Diamond Street Onawa, IA 51040	712-423-9160
Cass County Memorial Hospital	1501 E. 10 th St. Atlantic, IA 50022	712-243-3250
Clarinda Mental Health Institute	1800 North 16th Street Clarinda, IA 51632	712-542-2161
Heartland Family Service	515 East Broadway Council Bluffs, IA 51503	712-322-1407
Jennie Edmundson Hospital	933 East Pierce Street Council Bluffs, IA 51501	712-396-6000
Southwest Iowa Mental Health Center	1408 E. 10 th St. Atlantic, IA 50022	712-243-2606
Myrtue Medical Center-Behavioral Services	1303 Garfield Ave Harlan, IA 51537	712-755-5056
Waubonsie Mental Health Center	1800 North 16th Street, Suite 1 Clarinda, IA 51632	712-542-2388
All SWIA MHDS designated Case Management Agencies	See <i>Annual Service and Budget Plan</i>	

B) Targeted Case Management

The SWIA MHDS shall offer access to cost effective, evidenced based, conflict free Targeted Case Management as described in IAC 441-25.21(1)g.

Designated Case Management agencies serving SWIA MHDS must be accredited according to the rules of the Department of Human Services. Targeted Case Managers must meet the qualifications as defined in IAC 441.

Targeted Case Management and Service Coordination Services shall meet the following expectations:

- Performance and outcome measures relating to the safety, work performance, and community residency of the individuals receiving the service.
- Standards including but not limited to social history, assessment, service planning, incident reporting, crisis planning, coordination, and monitoring for individuals receiving the services.
- Methodologies for complying with the requirements of sub rule 441-25.21 g, which may include the use of electronic recording keeping and remote or internet based training.

The SWIA MHDS Chief Executive Officer (CEO) and the Coordinators of Disability Services evaluated interested agencies, and made recommendations to the Region Governing Board, who designated Targeted Case Management agencies to offer services to individuals enrolled in the Medicaid Program.

The Southwest Iowa MHDS Region has identified and designated the following providers for case management.

Case Management Provider	Address	Phone number
Pottawattamie County Case Management	515 5 th Ave., Room 113 Council Bluffs, IA 51503	712-328-5645
Shelby/Harrison County Case Management	719 Market St. Harlan, IA 51537	712-755-2843
Rolling Prairie Case Management	105 Coolbaugh St. P.O. Box 469 Red Oak, IA 51566	712-623-6541
Fremont County Community Services	710 Illinois St., P.O. Box 540 Sidney, IA 51652	712-374-3075
Southwest Iowa Case Management	112 E. Main Clarinda, IA 51632	712-542-3584
Southwest Iowa Mental Health Center Case Management	1408 East 10 th St. Atlantic, IA 50022	712-243-2606

- Any other case management programs developed by a county or group of counties in the region as the regional case management provider.

C) Service Provider Network

PROVIDER	SERVICE PROVIDED
ALEGENT CREIGHTON COMMUNITY MEMORIAL HOSPITAL(MISSOURI VALLEY, IA)	E. D. Clearance for Inpatient Treatment
ALEGENT CREIGHTON HEALTH MISSOURI VALLEY PSYCHIATRIC ASSOCIATE	Outpatient Mental Health Services and Local Access Point
ALEGENT HEALTH MERCY HOSPITAL	Inpatient Mental Health Service and Local Access Point
ALEGENT CREIGHTON PSYCHIATRIC ASSOCIATES	Outpatient Mental Health Service and Local Access Point, Peer Drop-in Center
ALL CARE COMMUNITY HEALTH CENTER	Outpatient Services
AMERISERVE INTERNATIONAL	Day Hab and SCL
ATTORNEYS WITHIN THE REGION	Consumer Legal Representation for civil commitments
BURGESS HEALTH CENTER	E. D. Clearance for Inpatient Treatment
BURGESS MENTAL HEALTH	Outpatient Mental Health Services, Local Access Point and Peer Support
CASS COUNTY MEMORIAL HOSPITAL	Inpatient Mental Health Services and Local Access Point
CASS INCORPORATED	Day Hab and Work Services
CHEROKEE MENTAL HEALTH INSTITUTE	State Mental Health Institute
CLARINDA MENTAL HEALTH INSTITUTE	State Mental Health Institute and Local Access Point
CLARINDA REGIONAL HEALTH CENTER	E. D. Clearance for Inpatient Treatment
CONCERNED INC.	Day Hab, Work Services and SCL
COUNTRY CARE CORP.	RCF Services and SCL
CROSSROADS OF WESTERN IOWA	Day Hab, Work Services and SCL
DEVELOPMENTAL SERVICES OF IOWA	SCL
DIMENSIONS INC	Psychological Evaluations
HARLAN CREST CENTER	RCF facility and SCL
HARRISON COUNTY HOMEMAKERS	Homemakers
HEARTLAND FAMILY SERVICE	Outpatient Mental Health Services and Local Access Point
INSTITUTE FOR THERAPY AND PSYCHOLOGICAL SOLUTIONS	SCL

IOWA FOCUS	SCL and Respite
JENNIE EDMUNDSON HOSPITAL	Inpatient Mental Health Services and Local Access Point
LUTHERAN SERVICES	SCL, Respite, Therapy
MENTAL HEALTH ADVOCATES	Various Court Appointed Advocates
MONTGOMERY COUNTY MEMORIAL HOSPITAL	E. D. Clearance for Inpatient Treatment
MOSAIC OF WESTERN IOWA	RCF services and SCL
MYRTUE BEHAVIORAL HEALTH	Outpatient Mental Health Services, Local Access Point, and IPR
MYRTUE MEMORIAL HOSPITAL	E.D. clearance for Inpatient Treatment
PARK PLACE	RCF/PMI services, SCL
PARTNERSHIP FOR PROGRESS (AKA WILLOW HEIGHTS)	RCF services, SCL, drop- in center
PHARMACYS WITHIN THE REGION	Medication
REM IOWA INC.	SCL, Day Hab, Work Services
SHENANDOAH MEDICAL CENTER	E. D. Clearance for Inpatient Treatment
SOUTHWEST IOWA MENTAL HEALTH CENTER	Outpatient Mental Health Services and Local Access Point
SOUTHWEST IOWA PLANNING COUNCIL (SWITA)	Transportation
SHERIFF DEPARTMENTS OF ALL COUNTIES	Civil Commitment Services
TERRACE VIEW RESIDENTIAL	RCF services
VOCATIONAL DEVELOPMENT CENTER (VODEC)	Day hab, work services, SCL
WAUBONSIE MENTAL HEALTH CENTER	Outpatient Mental Health Services and Local Access Points

The SWI MHDS Region will honor other Region’s Provider Networks on an as need basis.

D) Service Access and Service Authorization Processes

The SWIA MHDS Region will function as the planning and management entity for individuals in need of mental health and disability services. Information and referral access can be sought through any of the local region offices. Individuals will be transferred or redirected to the central office intake phone number of 712-328-5812 if they are inquiring about services and supports. This will be the main intake number for persons needing service management. Detailed Standard Operating Procedures have been developed for this internal management process regarding the flow of information from intake through assignment of service management, eligibility and service funding authorization.

There are three Coordinators of Disability Services within SWIA MHDS. They will be referred to as Disability Services Directors (DSD) and are part of the leadership team for SWIA MHDS. They will have key responsibility regarding the overall coordination of access to services, funding authorization processes, data management and claims payments. The region also has four individuals, equivalent to 2 ¾ FTE, who will be Service Coordinators. Service Coordinators will directly assist individuals who are not eligible for Targeted Case Management or Integrated Health Homes in coordinating, accessing, and monitoring services. One additional Service Coordinator (1/2 FTE) will be in charge of all intake for the region with backup from a DSD when needed.

Individuals residing in SWIA MHDS counties, or their legal representative, may apply for regional funding for services by contacting the central office in Pottawattamie County or any of the local offices in Cass, Fremont, Montgomery, Page, and Shelby Counties. The SWIA MHDS Region Application form will be used for all individuals requesting services. If an applicant has complied with all information requests, their access to services shall not be delayed while awaiting a determination of legal residence. In these instances, SWIA MHDS will fund services and later seek reimbursement from the region of the county of legal residence. If language or other barriers exist, the access points shall contact an appropriate person to assist the applicant in the intake process or contact a regional office to make such arrangements. The completed application shall be forwarded by access points to the central region office.

Once an application is received in any regional office, it will be forwarded to the regional employee(s) assigned to process applications for the Region. If an application is not complete, additional information will be sought from the applicant in order to determine eligibility. Once an application is complete, the Region will determine if the applicant meets the general eligibility criteria. General eligibility criteria include:

- Individual is at least 18 years of age
- Individual is a resident of the State of Iowa
- Individual meets income criteria
- Individual meets resource criteria
- Individual has a diagnosis of mental illness, intellectual disability or developmental disability.

A Notice of Decision regarding general eligibility, including the right to appeal, will be sent to the applicant within ten (10) working days.

Individuals who are in immediate need and are awaiting approval and receipt of assistance under other programs may be considered eligible if all other criteria are met. For those individuals, the immediate need should be noted on the application or expressed upon calling the region office for intake. The applicant or

relevant referral source will be contacted within two (2) working days. An NOD will be issued within 24 hours of contact with the applicant, their legal representative and/or referral source.

Once a standardized assessment process is developed by the state, the following shall apply. A Notice of Enrollment shall inform the individual of the decision and information to schedule the standardized assessment as defined below within 90 days. The applicant shall be sent a copy of the region's appeal process and shall be informed that they have the right to appeal the decision.

Standardized functional assessment methodology designated by the director of human services shall be completed within 90 days of application. The results will support the need for services including the type and frequency of service to include in the individual's care plan. A Notice of Decision, including the appeal process, will be issued within 10 days of completion of the Standardized Functional Assessment. Once the assessment has been completed, the individual and their team will convene and develop a care plan within 30 days. For persons only in need of Outpatient Services, this will be based on the mental health provider's intake assessment and treatment plan. No further assessment is needed for these individuals.

Following the assessment, the Service Coordinator or other Case Manager will submit a Service Authorization request to the Region for funding, which will be processed within 5 working days of receipt. Decisions for funding will be based on the general eligibility criteria as outlined above, and according to the guidelines outlined in Attachment D Service Matrix of the Policies and Procedures Manual on the following page.

Consideration will also be made to assure that the service being requested is:

- Appropriate and necessary to the symptoms, diagnoses or treatment
- Within standards of good practice for the type of service requested
- Not primarily for the convenience of the individual or the service provider
- The most appropriate level of service which can safely be provided
- Beneficial to the individual and not available from alternative sources

When deemed appropriate, the region may contract with a qualified professional to review the plan for requested services.

Priority Services (IC331.25.3)	Description	Target Populations	Additional Population	Access Standards
Assessment and evaluation (Psychiatric or Psychological Evaluations and Standard functional Assessment)	The clinical review by a mental health professional of the current functioning of the individual using the service in regard to the individual's situation, needs, strengths, abilities, desires and goals to determine the appropriate level of care.	MI, ID	DD	Assessment completed within 90 days of notice of enrollment. Individual who has received inpatient treatment shall be assessed within 4 weeks.
Case management (Targeted Case Management and Service Coordination)	Service provided by a case manager who assists individuals in gaining access to needed medical, social, educational, and other services through assessment, development of a care plan, referral, monitoring and follow-up using a strengths-based service approach that helps individuals achieve specific desired outcomes leading to a healthy self-reliance and interdependence with their community.	MI, ID	DD	*Service Coordination: Individuals shall not have to travel more than 30 miles if residing in an urban area or 45 miles if residing in a rural area. Individuals shall receive service coordination within 10 days of initial request for such services or being discharged from an inpatient facility
Crisis evaluation	The process used with an individual to collect information related to the individual's history and needs, strengths, and abilities in order to determine appropriate services or referral during an acute crisis episode.	MI, ID	DD, BI Entire community	Within 24 hours
Day habilitation	Services that assist or support the individual in developing or maintaining life skills and community integration. Services shall enable or enhance the individual's functioning, physical and emotional health and development, language and communication development, cognitive functioning, socialization and community integration, functional skill development, behavior management, responsibility and self-direction, daily living activities, self-advocacy skills, or mobility.	MI, ID	DD	
Family support	Services provided by a family support peer specialist that assists the family of an individual to live successfully in the family or community including, but not limited to, education and information, individual advocacy, family support groups, and crisis response.	MI, ID	DD	

Health homes	A service model that facilitates access to an interdisciplinary array of medical care, behavioral health care, and community-based social services and supports for both children and adults with chronic conditions. Services may include comprehensive care management; care coordination and health promotion; comprehensive transitional care from inpatient to other settings, including appropriate follow-up; individual and family support, which includes authorized representatives; referral to community and social support services, if relevant; and the use of health information technology to link services, as feasible and appropriate.	MI
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Home and vehicle modification	A service that provides physical modifications to the home or vehicle that directly address the medical health or remedial needs of the individual that are necessary to provide for the health, welfare, and safety of the member and to increase or maintain independence.	MI, ID	Lifetime limit equal to that established for the HCBS waiver for individuals with intellectual disabilities. Provider payment will be no lower than that provided through the HCBS waiver.
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Home health aide services	Unskilled medical services which provide direct personal care. This service may include assistance with activities of daily living, such as helping the recipient to bathe, get in and out of bed, care for hair and teeth, exercise, and take medications specifically ordered by the physician.	MI, ID
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Job development	Services that assist individuals in preparing for, securing and maintaining gainful, competitive employment. Employment shall be integrated into normalized work settings, shall provide pay of at least minimum wage, and shall be based on the individual's skills, preferences, abilities, and talents. Services assist individuals seeking employment to develop or re-establish skills, attitudes, personal characteristics, interpersonal skills, work behaviors, and functional capacities to achieve positive employment outcomes.	MI, ID	DD	Referral shall be within 60 days of request for such service.
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Medication management	Services provided directly to or on behalf of the individual by a licensed professional as authorized by Iowa law including, but not limited to, monitoring effectiveness of and compliance with a medication regimen; coordination with care providers; investigating potentially negative or unintended psychopharmacologic or medical interactions; reviewing laboratory reports; and activities pursuant to licensed prescriber orders.	MI, ID	
Medication prescribing	Services with the individual present provided by an appropriately licensed professional as authorized by Iowa law including, but not limited to, determining how the medication is affecting the individual; determining any drug interactions or adverse drug effects on the individual; determining the proper dosage level; and prescribing medication for the individual for the period of time before the individual is seen again.	MI, ID	Standardized Assessment support the need for this service
Mental health inpatient treatment	Acute inpatient mental health services are 24-hour settings that provide services to individuals with acute psychiatric conditions. Primary goal is to provide a comprehensive evaluation, rapidly stabilize acute symptoms, address health and safety needs and develop a comprehensive discharge plan to appropriate level of care.	MI, ID	Shall receive treatment within 24 hours. Available at inpatient mental health services at any state or private mental health unit in Iowa at host region contractual rate. In the absence of a contract, CICS shall reimburse at the current Medicaid rate.
Mental health outpatient therapy	Services shall consist of evaluation and treatment services provided on an ambulatory basis for the target population including psychiatric evaluation, medication management and individual, family, and group therapy.	MI, ID	Emergency within 15 minutes of phone contact. Urgent: within 1 hour of presentation or 24 hours of phone contact. Routine: within 4 weeks of request for appointment.
Peer support services	A program provided by a peer support specialist including but not limited to education and information, individual advocacy, family support groups, crisis response, and respite to assist individuals in achieving stability in the community.	MI, ID	DD Individuals receiving recovery services shall not have to travel more than 30 miles if residing in urban area or 45 miles if residing in rural area.

Personal emergency response system	An electronic device connected to a 24-hour staffed system which allows the individual to access assistance in the event of an emergency.	MI, ID		
Prevocational services	Services that focus on developing generalized skills that prepare an individual for employment. Prevocational training topics include but are not limited to attendance, safety skills, following directions, and staying on task.	MI, ID	DD	
Respite Services	A temporary period of relief and support for individuals and their families provided in a variety of settings. The intent is to provide a safe environment with staff assistance for individuals who lack an adequate support system to address current issues related to a disability. Respite may be provided for a defined period of time; respite is either planned or provided in response to a crisis.	MI, ID	DD	
Supported Employment	An approach to helping individuals participate as much as possible in competitive work in integrated work settings that are consistent with the strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice of the individuals. Services are targeted for individuals with significant disabilities for whom competitive employment has not traditionally occurred; or for whom competitive employment has been interrupted or intermittent as a result of a significant disability including either individual or group supported employment, or both, consistent with evidence-based practice standards published by the Substance Abuse and Mental Health Services Administration.	MI, ID	DD	
Supported Community Living Services	Services provided in a non-institutional setting to adult persons with mental illness, mental retardation, or developmental disabilities to meet the persons' daily living needs.	MI, ID	DD	First appointment shall occur within 4 weeks of the request.
Twenty four hour crisis response	Program that operates a crisis hotline to relieve distress, reduce the risk of escalation, and refer callers to appropriate services	MI, ID		24 hours a day, 365 days a year provided through community mental health centers.

Commitment Related (Evaluations, Sheriff Transport, Legal Representation, Mental Health Advocates)	Court ordered services related to mental health commitments	MI, ID	Court order
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Priority 2 or/Beyond Core Services	Description	Target Populations	Additional Population	Conditions
Basic Needs (Rent, Utilities)	Assistance for rent, utilities etc.	MI, ID		Not meant to be ongoing
Civil Commitment Pre-Screening	Program that provides assessment of individuals for whom family members are considering filing an application for involuntary commitment to determine if another course of treatment is appropriate.	MI, ID		
Dual Diagnosis treatment (Mount Pleasant)	Treatment services for severe mental illness (mainly psychotic disorders) and problematic drug and/or alcohol use.	MI, ID		Voluntary Dual Diagnosis treatment at Mt Pleasant MHI, must have prior approval from SWIA MHDS, and may be granted on an individual basis. Costs shall be split equally between Mental Health funds and Substance Abuse funds.
Homemaker services	Homemaking and personal care services	MI, ID	DD	Standardized functional assessment must support the need for services of the type and frequency identified in the individual's case plan
Information; Referral Services	Service that informs individuals of available services and programs	MI, ID	DD	
Mental Health Court	Problem solving court to coordinate services and direct low-level offenders to appropriate treatment in order to avoid future legal problems and acute hospitalization due to mental health symptoms and behaviors.	MI, ID		
Mobile Crisis Response Team	Crisis evaluation and treatment services provided by a team of professionals deployed into the community.	MI, ID	DD	Requested by law enforcement
Peer Drop In	Program that offers a safe, supportive environment within the community for individuals who have experienced mental/emotional problems.	MI, ID		

Prescription Medicine	Prescription psychiatric medications for persons having a mental health diagnosis	MI, ID		3 Month Limit All other means of payment must be considered
Public Education Services	Activities provided to increase awareness and understanding of the causes and nature of conditions or situations which affect an individual's functioning in society.	MI, ID	DD	
Other Services	Description	Target Populations	Additional Population	Conditions
Residential Care Facilities	Community facility providing care and treatment	MI, ID	DD	Standardized functional assessment must support the need for services of the type and frequency identified in the individual's case plan
Transportation	Transportation to day habilitation and vocational programs	MI, ID	DD	

E) Information Technology and Data Management Capacity and Reporting

The SWIA MHDS will have offices in Cass, Fremont, Montgomery, Page, Pottawattamie and Shelby counties. Pottawattamie County will be referred to as the central office. Each county office currently has the equipment necessary for all necessary office functions including computers, Internet access, phones, printing, copying and faxing.

The SWIA MHDS Region will utilize the Community Services Network (CSN), which is a statewide data repository containing all disability information of individuals being served by the regions. This web based program has the capacity to handle the region's application, service authorization, service coordination, claims, and reporting requirements. The counties in the SWIA MHDS Region have been utilizing this system for several years and staff is very familiar with it. It is anticipated the Region will have an "Expert CSN User" certified by August 2014. This person is currently employed within the region and will be able to assist with trouble-shooting, fixes, and advanced technical issues.

The data collected presently includes data needs identified by the regions and all data required by DHS for the annual compliance reports. If additional data is needed outside of this, ISAC (Iowa State Association of Counties) IT and regional representatives will be closely involved as DHS identifies data needs. ISAC IT will enhance the system to accommodate the defined requirements as directed by the ETC Advisory Committee through ISAC. SWIA MHDS will regularly report demographic, expenditures, services and other reports as specified by the Department of Human Services and will comply with the requirements in Iowa Code 225C.6A through the Annual Report and through any additional information required by the Department of Human Services.

The technical specifications of CSN include:

- ASP.NET (primarily VB – some C#. 3 tiered development methodology)

- SQL2012 (houses all CSN data)
- BizTalk 2009 (health information/claims clearing house)
- Cisco ASA 5505 Firewall
- SSL encryption

Third Party Tools integrated within CSN's security model

- ABCPDF (for document generation)
- SQL Reporting Services (for dynamic auditor voucher generation)
- Izenda for AdHoc Reporting

CSN has a security system to meet requirements of HIPAA and assure overall compliance with the need to keep all individual's information confidential. This includes both the hardware and software involved in CSN.

- The production servers are housed in an offsite HIPAA certified data center.
- Access is given to two ISAC employees at a time.
- The production servers consist of one database server and one web server.
- Each server is plugged into a firewall. Each server has a software firewall on it.
- Data is backed up nightly both by the data center and by a secure third party.
- Both backups are stored offsite.
- Backup restore protocols are in place for IT employees.
- The 2 development servers are currently housed at ISAC with the plan to move them to the data center within FY15.
 - ISAC has two entrances. One of which is locked at all times and the other is locked no later than 4:30 in the afternoon.
 - The server room at ISAC is locked with limited access to IT employees.
 - ISAC IT support has administrative rights to these servers.
- First Level Security
 - The system's login security model uses an API to communicate securely with Iowa's Enterprise A&A system. This system allows for single sign-on among many state applications.
 - CSN does not store any user passwords or perform any login functionality other than to check if the user is active in CSN.
- Second Level Security
 - Once a user has logged in via A&A, the system will confirm they are active within CSN.
 - The administrator of SWIA MHDS is able to set a user's account to inactive even if their A&A account is active.
 - If a user has not logged on for 6 months their account is automatically inactivated.
- Third Level Security
 - Each user has one or multiple profiles within the system. Profiles are specific to the region.
 - Within each given profile the user is assigned roles that fit their job and security level. This ensures the user has limited access to data and functionality.
- Users
 - In addition to the previous security restrictions, all users must electronically agree to a confidentiality agreement prior to using the system for the first time. This agreement must be renewed annually to maintain access to CSN.

- Reporting
 - Users accessing the AdHoc reporting module are required to accept an agreement monthly stating that the information they are accessing is confidential and is not to be disseminated without the proper permission and review. Only users approved by the administrator and ISAC IT have access to the reporting module at this time.
- Client
 - Users are not allowed to view identifying details on a client when performing a search unless they are directly associated as an active case worker for the client or the region is associated with the client in a pre-defined role.
 - If a user wishes access to a client they are required to send a request within the system to the client's regional authority. They are also required to provide a reason for needing access and to indicate if the request relates to payment or treatment. The person within the entity the user is requesting access from is required to indicate acceptance or denial within the system.
 - If a county or region is a 'county of interest' for a client that role is automatically removed after 90 days. If the county/region needs access to the client for an additional period of time they must again submit a request for access within the system.
 - Only clients associated with a user are shown on a user's dashboard. This applies across the system. Clients may not be accessed in any other way.

For claims administration, Filezilla will be used to improve efficiency in claims entry/processing through multiple entry points. Filezilla is a secure file system within CSN. Claims will be scanned in this system upon receipt in the region's central office. Staff in other regional offices will then be able to view the claim for processing within CSN.

F) Business Functions, Funds accounting and Administrative Processes

The Governing Board has appointed a Chief Executive Officer (CEO) who will serve as the single point of accountability for the Region. The CEO will be responsible for planning, budgeting, monitoring expenditures, and ensuring the delivery and development of quality services that achieve expected outcomes for the individuals served. The CEO will be responsible for oversight of SWIA MHDS operations, ensuring adequate training of staff and determining staff needs. The CEO will be responsible for monitoring the funds held by the Region through review of financial reports that are issued by the Pottawattamie County Auditor's office, Fiscal agent for the Region. All budget information for SWIA MHDS including revenues, service expenditures and administrative costs will be entered into CSN and managed by the CEO and Fiscal Agent. The CEO will approve all service and administrative claims prior to payment by the Fiscal Agent. The Fiscal Agent will receive all revenues from the state, counties and any other sources and will comply with all reporting requirements including an annual audit of the regional expenditures and assets.

The SWIA MHDS will contract with MH/DS providers whose base of operation is in the region. The region may also honor contracts that other regions have with their local providers. SWIA MHDS may also choose to contract with providers outside of the Region. A contract may not be required with providers that provide one-time or as needed services. Contracting for July 1, 2014 is in process. The region's CEO and DSDs have met

with all of the vocational providers on two occasions to discuss rates and a grant for enhancing community based employment. There have also been two meetings with the Community Mental Health Centers to discuss rate negotiations as well as begin working on Crisis Response Services. It is anticipated the majority of contracts will be completed by June 30, 2014 with the rest effective July 1, 2014 and formalized during the month of July. The CEO will continue to negotiate contracts throughout the year if additional providers join the network of providers.

Southwest Iowa MHDS Region has developed detailed Standard Operating Procedures for claims processing. Claims processing will require all claims to be submitted to the Region's Central Office in Pottawattamie County. Claims may be presented in paper format, via fax, emailed spreadsheet, e-claim or through the secure CSN system. Bills presented at local Region offices will be forwarded to the central office via the fastest means. All billing will be date stamped at the time of receipt. Time frames for payment start upon receipt in the central office. Upon receipt of a claim in the central office, designated Administrative Assistants will scan the claim into Filezilla through CSN. Designated Administrative Assistants will be assigned claims to enter into the CSN system. Claims will be downloaded from Filezilla. After a claim is entered an email will be sent to the designated DSD indicating the claim is ready for review. The DSD will review the claims. Billings that contain non-authorized service(s) will be processed allowing authorized service(s) to be paid while non-authorized services will be reviewed for payment or final denial. If a non-authorized service is denied, explanation of the non-authorized service information, reason for denial, and the appeal process will be sent with the remittance advice upon provider payment mailing. The claims administrator and other designated staff will contact the provider, case manager, etc. and troubleshoot the claim when necessary. If the claim is found to be invalid, the claims administrator will notify the provider in writing within 30 working days. No billings received more than 60 days after the close of the fiscal year in which the service was provided shall be considered for payment by SWIA MHDS unless there is a statutory obligation (such as civil commitment costs). The designated DSD will send the approved claims on to the central office for final decision, filing with the auditor, reimbursement mailing and claim reconciliation.

The SWIA MHDS Region has developed detailed Standard Operating Procedures for other administrative processes including regional MHDS applications. All new MHDS applications shall be sent to the central office. The application should include supporting documents including but not limited to: diagnostic evaluation to support the client's disability, copy of the client's Medicaid and or Medicare card, documentation to support his/her resources/income and a copy of guardianship papers (if applicable). If no current application is on file for a client, the client and his/her guardian will be referred to intake for instruction on how to complete an application. For new clients (outpatient mental health center and inpatient psychiatric hospitalizations) an application will be filled out with the assistance of staff at the hospital or mental health center. Those applications will be sent directly to the central office. The application will be uploaded into CSN by designated staff within 5 business days of receipt in the central office. The designated DSD will complete the appropriate steps in CSN to either approve or deny the application based on criteria in the SWIA MHDS Policies and Procedures manual. An NOD will be sent the client and his/her guardian. The DSD will approve/deny all MHDS applications within 5 working days of receipt of notification in CSN. If the application is incomplete and additional information is required, the DSD will be allowed additional time to gather that information from the client and his/her team. All MHDS applications will be approved for a period up to, but not exceeding, one year.

Individuals must reapply for services on at least an annual basis. If there is an assigned Service Coordinator or Case Manager, they will update the individual's information in CSN and email DSD, using the individual's CSN ID indicating the information has been updated. IHH and MHC clients will be required to complete a new application each year and it will be sent to the central office. The DSD will review the information and send the appropriate NOD to the client.

The SWIA MHDS Region has developed detailed Standard Operating Procedures for other administrative processes including Service Authorizations. Service Coordinators, assigned Administrative Assistants, or Case Management staff will enter all service authorization requests into the Community Services Network (CSN) as a funding request within the respective client's CSN file. For those clients receiving Service Coordination or Case Management services, a copy of the client's regional or Case Management assessment and service plan shall be uploaded or inputted into CSN. This information will be used by the designated DSD to determine need for the service(s) requested. Should the DSD be unable to make a decision based on the information provided, the DSD may contact staff requesting additional information via phone or email. The DSD will approve/deny all funding requests within 5 working days of receipt. Once a service decision is made, Service Coordinators, assigned Administrative Assistants, or Case Management staff will issue a copy of the Notice of Decision, including the Region's appeal process, to the provider, guardian (if applicable), and recipient of services. All services will be approved for a period up to, but not exceeding, one year.

As SWIA MHDS continues to progress, additional Standard Operating Procedures will be developed to assist staff in understanding the Administrative processes necessary to function effectively and efficiently.