

- Eliminated hardship surrounding the functioning and operating of CMH services provided by State departments and agencies to Michigan residents.
- Established a uniform credentialing requirement for individuals who provided CMH services through a State department or agency, by requiring providers of CMH services to establish, maintain, revise, and make available, as necessary, a profile as maintained by the DHHS that contained information necessary for the CMH services credentialing process, which would have to adhere to national standards from accrediting bodies such as the Joint Commission, Commission on Accreditation of Rehabilitation Facilities, Council on Accreditation, National Committee for Quality Assurance, or other credible body approved by the DHHS.
- Promoted policies that supported adequate staffing and evidence-based skills or training to meet the needs of Michigan residents and the State departments and agencies that provide CMH services.
- Complied with national certification standards for CMH counselors and professionals.
- Met the needs of the populations served by each State department or agency that provided, either directly or through a contact, CMH services to Michigan residents.

Within six months after the bill's effective date and annually after that, the DHHS would have to submit a report to the Legislature that described its activities under the bill, including the establishment of and any revisions to the credentialing program.

A State department or agency that provided, either directly or through a contact, CMH health services to Michigan residents would have to comply with the credentialing program and use the provider information profile maintained by the DHHS. On and after the date the credentialing program was certified by the DHHS Director as in full force and effect, the State department or agency subject to this provision would have to ensure that all of the forms, processes, and contracts it used that related to providing CMH services complied with the credentialing program.

The bill would not apply to health plans under contract with the State to provide services under the Medicaid program. Health plans under contract with the State to provide services under the Medicaid program could use plan-specific processes and would not be required to use the credentialing program established by the DHHS.

The credentialing and recredentialing process would have to be conducted and documented for at least the following health care professionals:

- Physicians.
- Physician's assistants.
- Psychologists.
- Licensed master's social workers, licensed bachelor's social workers, and social service technicians.
- A social worker granted a limited license.
- Licensed professional counselors.
- Nurse practitioners, registered nurses, and licensed practical nurses.
- Occupational therapists and occupational therapist assistants.
- Physical therapists and physical therapist assistants.
- Speech language pathologists.

The Department could establish policy and promulgate rules to implement the bill according to the Administrative Procedures Act.

Proposed MCL 330.1206b

Legislative Analyst: Stephen Jackson

FISCAL IMPACT

The requirement to establish a credentialing process in the bill would lead to minor administrative costs for the State and for Local Community Mental Health Services Programs.

Fiscal Analyst: Steve Angelotti

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.