

Example 4

**Region 3 Behavioral Health Services
Agency - Programmatic Review Checklist
Chapter 5-000: Requirements for Providers Contracting with RBHAs (5-001 thru 5-006)**

Network Provider: _____

Please complete each page by placing an "X" regarding all items that are in place. Print first and last name, sign and date.

INDICATOR	CHAPTER/ SECTION	"X"	DESCRIPTOR	
206 NEBRASKA ADMINISTRATIVE CODE CHAPTER 5 (Revised 6/14/14)				
ACCREDITATION	5-001		ACCREDITED AGENCIES ONLY: To receive funds administered by the Division of Behavioral Health (DBH) for service delivery, providers must submit the following:	
			1. Current copy of the required licenses issued by the Division of Licensure or the applicable local licensing authorities of competent jurisdiction which apply to the program;	
			2. Documentation on the type of organization seeking approval (such as governmental, private non-profit) to operate the program(s); and	
		Check Appropriate Accreditation Entity		3. Accreditation appropriate to the organization's mission by The Joint Commission (TJC), the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or other nationally recognized accreditation organization(s) approved by the Director. ___ CARF ___ TJC ___ COA
			Documentation of accreditation must include:	
			a. A complete copy of the most recent official accreditation report;	
			b. Documentation of the most recent official award of accreditation; and	
			c. A complete copy of the plan of correction submitted in response to the official accreditation report, if applicable.	
		Type		___ 3-year ___ 1-year ___ Probationary ___ Other If Other, specify: _____
		5-001.01		Exceptions: The requirements of 5-001 do not apply to the following: 1. Substance abuse prevention funds; or 2. When a nationally recognized accreditation organization appropriate to the organization's mission cannot be identified.
ACCREDITATION DEVELOPMENT PLAN	5-002		Those organizations that do not have documentation of official award of accreditation by TJC, CARF, COA, or other nationally recognized accreditation organization(s) approved by the Director must submit an Accreditation Development Plan for progressively bringing the organization into accreditation status during a two-year period.	
			During the time an organization is working toward accreditation under an Accreditation Development Plan, the organization must meet the standards for behavioral health services in 206 NAC 6.	
			The Accreditation Development Plan must demonstrate a systematic approach toward achieving accreditation and must include:	
			1. Policies and procedures to be followed during the accreditation development period including policies and procedures for protecting the life, safety, and rights of consumers served;	
			2. A quality improvement program which follows the standards set by the national accreditation body which is being sought by the organization (TJC, CARF, COA, or other nationally recognized accreditation organization(s) approved by the Director);	
			3. A written plan for accomplishing the accreditation. The plan must include the type of accreditation the type of accreditation being sought (TJC, CARF, COA, other) that is appropriate to the organization's mission and includes goals, measurable objectives, target dates, person(s) responsible, and deadlines for making application for accreditation and for scheduling accreditation survey; and	
			4. A report on the results of a self-administered survey following the standards set by the national accreditation body which is being sought by the organization.	
		5-002.01		The organization must submit to the Region a semi-annual written progress report on the implementation of the Accreditation Development Plan.
	5-002.02		The organization must revise the Accreditation Development Plan on an annual basis to reflect its present situation.	
	5-002.03		The Region must monitor the organization's progress until accreditation is granted.	

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INDICATOR	CHAPTER/ SECTION	"X"	DESCRIPTOR
206 NEBRASKA ADMINISTRATIVE CODE CHAPTER 5 (Revised 6/14/14)			
ORGANIZATIONS THAT ARE DENIED ACCREDITATION	5-003		Organizations that are denied accreditation or receive provisional accreditation will:
			1. Be allowed a one-time one-year extension from the date they receive notice from the accrediting body of their accreditation status to become an accredited organization; or
			2. Be required to submit a revised Accreditation Development Plan.
RECORDS	5-004		The organization must retain program documentation and individual service records for a minimum of whichever is longer:
			1. Five years after the consumer was discharged from the program; or
			2. Five years following the end of the contract year in which services were billed.
FALSIFICATION OF DOCUMENTATION	5-005		The falsification of documents or information by the organization or individual is grounds to immediately terminate the application process or the existing program approval.
CAPACITY DEVELOPMENT	5-006		A capacity development plan must be submitted and approved before state and/or federal funds are used to develop a new service.
			The provider/program requesting capacity development using state or federal funds must be a member of a Regional Behavioral Health Network or have been awarded a bid to contract with a network.
			The Capacity Development Plan must use the format specified by the DBH and must include:
			1. A Program Plan for each service to be funded;
			2. Development and Implementation Timeline Plan;
			3. Budget and Narrative Budget Justification; and
			4. Approval from the Regional Advisory Committee.
			To address expansion related to a wait list, the provider/program must have criteria approved by the DBH.
			A capacity expansion plan must be used to apply for approval of funding for expansion of an existing service. The request must use the format specified by the DBH.
			Capacity Development Plans must be submitted to the Region, if the provider is a member of the regional network and is requesting funds from the Region. If the provider is requesting funding directly from the DBH, the Capacity Development Plan must be submitted to the DBH.

The language contained within this Programmatic Review Checklist is not intended to relieve the user's responsibility to read and follow the 206 Nebraska Administrative Code (NAC) Regulations Chapter 5. Should there be an omission of 206 NAC Regulations Chapter 5 language and/or a typographical error that would change the intent of said regulations, the language contained in the 206 NAC Chapter 5 is absolute and should be followed.

By signing the Programmatic Review Checklist, the Agency Director represents and warrants that all procedures and practices listed above, and as indicated with an "X", are in compliance with the requirements set out in the 206 NAC Chapter 5, are approved by the organization, and are adhered to.

Agency Director (Print first and last name)

Agency Director Signature

Date

Revised: 3/14/18