

## UNIFORM COMMUNITY MENTAL HEALTH SERVICES CREDENTIALING PROGRAM

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<http://www.house.mi.gov/hfa>

**House Bill 5178 (proposed substitute H-1)**

**Sponsor: Rep. Hank Vaupel**

**Committee: Health Policy**

**Complete to 2-18-20**

Analysis available at  
<http://www.legislature.mi.gov>

### SUMMARY:

House Bill 5178 would amend the Mental Health Code to require the Department of Health and Human Services (DHHS) to establish, maintain, and revise, as necessary, a *uniform community mental health services credentialing program* for state department or agency use.

The department's or agency's credentialing and recredentialing process would have to be compliant with national standards. In complying with this requirement, DHHS could consult with other state departments and agencies that are required to comply with the credentialing program.

Additionally, DHHS would have to ensure that the uniform credentialing program did all of the following:

- Created uniformity in Michigan to streamline the provision of community mental health (CMH) services by state departments and agencies and to enhance workforce development, training education, and service delivery.
- Eliminated hardship around the functioning and operating of CMH services provided by state departments and agencies to Michigan residents.
- Established a uniform credentialing requirement for individuals who provide CMH services through a state department or agency, by requiring providers of CMH services to make profiles in the provided data warehouse containing information necessary for the CMH credentialing process, in compliance with National Committee for Quality Assurance standards.
- Promoted policies that support adequate staffing and evidence-based skills or training.
- Complied with the national certification standards for CMH counselors and professionals.
- Met the needs of populations served by each state department or agency providing CMH services.

Within six months after the bill took effect and annually thereafter, DHHS would have to submit a report to the legislature describing its activities in effecting the goals listed above, including the establishment of, and any revisions to, the credentialing program.

A state department or agency providing CMH services to Michigan residents would have to comply with the credentialing program and utilize the provider information profile maintained by DHHS. Once the uniform credentialing program was certified as being in

full force and effect by the DHHS director, the state departments and agencies falling under it would have to ensure compliance with it.

The bill would not restrict or limit the credentialing processes of health plans contracted by the state to provide Medicaid services.

Under the bill, the credentialing and recredentialing process would have to be conducted and documented for at least the following health professionals:

- Physicians
- Physician's assistants
- Psychologists
- Licensed master's social workers, licensed bachelor's social workers, limited license 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

DHHS could establish policy and promulgate rules to implement the bill.

Proposed MCL 330.206a

#### **FISCAL IMPACT:**

A preliminary fiscal analysis indicates that this bill would have a minimal one-time fiscal cost for the state to establish a uniform credentialing program and a negligible fiscal impact on an ongoing basis. The bill would have a negligible fiscal impact on local CMHSPs outside of any one-time training and transitional costs to move from their current credentialing program to the uniform credentialing program. It is likely that this program would be eligible for federal Medicaid administration funding, which reimburses the state for 50% of the total cost.

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■ This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.