DETROIT WAYNE INTEGRATED HEALTH NETWORK (DWIHN) WANTS YOU TO KNOW

You are receiving this communication because you are eligible for services through DWIHN. This will tell you more about how things work and how to access services. You will receive the following from DWIHN upon enrollment, annually and upon request.

- Member Handbook
- Provider Directory
- Members Rights and Responsibilities Statement
- Covered and non-covered benefits and services
- Out-of-network benefits
- Benefit restrictions that apply to services obtained outside of DWIHN service area
- Co-payments, and deductibles
- How to submit a claim, if needed
- How to obtain language assistance
- Availability of TTY services
- How to obtain outpatient care, partial and inpatient hospitalizations and other services.
- How to obtain emergency care, when to directly access emergency care or use 911 services
- How to obtain care after normal business hours
- How to obtain subspecialty care
- How to obtain list of network providers
- How to appeal a decision that adversely affects coverage, benefits or your relationship with DWIHN
- How to file a complaint, grievance and recipient rights violation
- Information about DWIHN's Quality Improvement program, including goals and annual results are available on our website www.DWIHN.org
- Information about DWIHN's Complex Case Management Program

DWIHN AFFIRMATIVE STATEMENT

DWIHN, Crisis Service Vendors and Access Center practitioners and employees who make Utilization Management decisions understand the importance of ensuring that all consumers receive clinically appropriate, humane and compassionate services of the same quality that one would expect for their child, parent or spouse by affirming the following:

- UM decision-making is based only on appropriateness of care, service, and existence of coverage.
- DWIHN, Crisis Service Vendors and the Access Center do not reward practitioners or other individuals for issuing denials of coverage or service care.
- No Physicians or any other staff making UM decisions are rewarded for issuing denials of coverage or service or reducing the provision of care which is deemed medically necessary.
- Practitioners may freely communicate with members about their treatment, regardless of benefit coverage limitations.

For more information or to request a handbook or provider directory:
- Online - go to www.DWIHN.org
- Call - DWIHN Customer Service at 888.490.9698
We are committed to maintaining a mutually respectful relationship with our members and providers. DWIHN Members’ Rights and Responsibilities statement is provided to assist you in understanding and exercising your rights while assessing behavioral health care services in Detroit-Wayne County. This statement helps to minimize potential misunderstandings and promote compliance with all applicable statutory and regulatory requirements. Understanding your rights and responsibilities will help you to make informed decisions about your healthcare.

You have the right to:

- Receive information about DWIHN, its Services, its Practitioners, and Providers, and Your Rights and Responsibilities.
- Be treated with respect and recognition of your dignity and right to privacy.
- Participate with Practitioners in making decisions about your health care.
- A candid discussion of appropriate or medically necessary treatment options for your conditions, regardless of cost or benefit coverage and to freely communicate with your providers and without restriction on any information regarding care.
- Voice complaints or appeals about DWIHN or the care provided.
- Make recommendations regarding DWIHN’s Members’ Rights and Responsibilities policy.
- Be informed of the availability of independent, external review of internal UM final determinations.
- Be offered an opportunity to request mediation to resolve a dispute.
- A Psychiatric Advance Directive.

You have a responsibility to:

- Provide, to the best of your knowledge, accurate and complete information regarding your medical history, including: present and past illnesses, medications, hospitalizations, etc. to DWIHN and its Practitioners and Providers needed in order to care for you.
- Follow your treatment plan of care and instructions. The plan of care is to be agreed upon by you and your provider.
- Ask questions about your care. This will help you to understand your health problems and participate in developing mutually agreed-upon treatment goals, to the degree possible.
- Follow all MDHHS procedures for the required annual Medicaid enrollment and inform DWIHN of any changes in insurance status.

DWIHN has the responsibility to:

- Provide you with a written notice of any significant State and Provider network changes at least 30 days before the intended effective date of change.
- Make a good faith effort to give you a written notice of termination of your Service Provider within 15 days of receipt or issuance of a termination notice.

For additional information and a complete list of our Members’ Rights and Responsibilities statement, you may contact Customer Service at 888.490.9698.

Wellness tools for you:

- Health management tools help you keep track of your health
- A secure tool to record your personal health information
- A free health & Wellness app www.myStrength.com; (Access code is: DWIHNc)