



Detroit Wayne Integrated Health Network

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October 1, 2020

Dear Residential and Daytime Activity Providers:

Detroit Wayne Integrated Health Network (DWIHN) has received numerous emails, letters and calls regarding the implementation of the H2015/T2027 transition mandated by the Michigan Department of Health and Human Services (MDHHS). Many of the communications have expressed valid concerns around specific scenarios and the effects the proposed process will have on the lives of the people we serve.

DWIHN staff have worked tirelessly through many of the scenarios and have concluded that the current proposed methodology is not going to address these concerns in a timely fashion. To that end, for the first 90 days of the transition, DWIHN will allow providers to bill the respective U modifiers based on the number of members served simultaneously. The prior authorization and approval requirement for H2015 and T2027 will be turned off in the MH-WIN system, with the exception of 2:1 staff (i.e. H2015-21, T2027-21).

DWIHN is requesting providers delay billing for October services until Thursday, October 8, 2020. This will allow DWIHN to make necessary changes in the MHWIN system. The provider must submit the units served on the U modifier that reflects the number of persons in the home that received shared staffing time. Consumers receiving one-to-one staffing based on the Individual Plan of Service (IPOS) shall receive H2015/T2027 with no modifier; one-to-one staffing must be documented in the IPOS otherwise consumers that reside with multiple consumers must report the U modifier. Consumers who receive one-to-one staffing (i.e., No modifier) or two-to-one staffing (i.e., Modifier "21") are excluded from shared staffing calculations. The number of consumers include all consumers in the home including non-DWIHN consumer served by the shared staff. The claim should also include # of staff for those shared staffing time using the staffing modifier described below. The 90-day period will allow DWIHN time to develop a more comprehensive approach while continuing to adhere to the MDHHS mandate.

Our finance team will be closely monitoring the costs over the 90-day period to ensure there are no unusual trends and that the U modifiers are reasonable and consistent with the information gathered by our residential team. In the event an overpayment has been detected by our finance

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team, the recoupment will be made immediately, the circumstances will be investigated and the appropriate steps will be taken. If a provider has determined they have made an error in the billing, please self-report the incident to our claims department to resolve the matter.

In addition, DWIHN will deploy new “Staffing” modifiers to indicate the number of staff working at the same time with the consumers. The “Sx” modifier is for informational purposes however is required as there is a system edit that will not allow the claims to be processed. The new “Sx” modifiers will be “S1” = 1 Staff; “S2” = 2 Staff; “S3” = 3 Staff and “S4” = 4 Staff.

It should be noted that in certain cases, providers will incur a revenue reduction. This reduction is due to providers incurring staff hours that are less than the total hours previously authorized for the consumers that reside in the home. This reduction shall not impact the amount of the community living supports received by the consumer nor the quality of care.

Finally, as previously stated, for most of us, these are uncharted waters that simply demand a hands-on approach, therefore DWIHN will be hosting a working session each Monday, Wednesday and Friday from 10:00am – 11:30am beginning Monday, October 5, 2020 through Friday October 30, 2020. The working sessions can be assessed with the following link:

<https://bluejeans.com/769078264?src=calendarLink> or you can Phone Dial-in at

1.408.419.1715 (United States(San Jose)) or 1.408.915.6290 (United States(San Jose))

(Global Numbers) Meeting ID: 769 078 264

The first session will include several scenarios on how to bill for the consumers. The sessions are for residential and daytime activity providers with H2015 billing and implementation questions. The sessions will not address outstanding issues or pending authorizations; those questions should continue to be directed to the residential email. Due to a limit on the number of participants the application will allow, we ask that providers limit the number of persons that participate in the sessions.

DWIHN acknowledges that this transition is challenging and has created both anxiety and confusion in the provider network and within DWIHN. We will continue to work over the next 90 days to ensure the network remains stable.

Sincerely,

Eric Doeh

Eric Doeh
Deputy Chief Executive Officer/
Chief Operating Officer

cc: Willie Brooks, President & CEO
Stacie Durant, Chief Financial Officer
Melissa Moody, Chief Clinical Officer
Manny Singla, Chief Information Officer