

Detroit Wayne Integrated Health Network

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September 29, 2020

Dear Residential Providers:

As you all may know, the transition from H0043 to H2015 is a mandate by the Michigan Department of Health and Human Services (MDHHS) that called for implementation within a short period of time. For many of us, this are unchartered waters that simply demands all hands-on deck. It is no surprise that Detroit Wayne Integrated Health Network (DWIHN) recognizing that this is a partnership with our provider network, has paid heed to the many questions that we have received via email, phone calls, and Zoom, just to name a few. We will respond. On September 17th and 21st, DWIHN conducted two training sessions regarding the transition from H0043 to H2015, to alleviate any anxiety and uncertainty, DWIHN has exercised reasonableness and caution.

The transition we will continue as planned. However, DWIHN will allow for a 90-day review period from October 1, 2020 for any potential adjustments on a case by case basis. These reviews will include looking at individual consumers, homes and providers as a whole. Simply, DWIHN will issue the authorizations for 90-days based upon current methodology. This will allow for a planful execution and rollout of the transition, business continuity, and will allow our residential team the opportunity to become more familiar with the change. Additional time will give stakeholders the means and flexibility to make adjustments without causing panic and disruption.

Please note that we will continue to perform our due diligence to ensure continuity of care for those we have taken a responsibility to serve, maintain our good relationship with our provider partners, and adhere to our fiscal responsibility. Note that because our previous methodology did not take shared living arrangements into account, this may affect revenue. This 90-day adjustment period, calls for more than ever, a collaborative effort that guarantees successful implementation.

Our residential team will be making use of the updated version of the Staff Planning Guidelines, and resolving any issues by using the assessment process, and making modifications that

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corresponds with medical necessity. This process will require patience and understanding. To further carry out these tasks effectively and efficiently, DWIHN may request additional documents. At the end of the day, even MDHHS is unsure how this transition will impact from a cost of care standpoint as this change is too big to be predicted and require close continuous monitoring to ensure we are sensible in the implementation.

We need each other. During these challenging times, when we are all working a little harder and going even further than we have before, this moment requires nothing less than our very best. Since we have one singular goal, that is to provide care and service to those we have taken a responsibility to serve, achieving our very best is a collective endeavor.

Sincerely,

Eric Doeh

Eric Doeh Deputy Chief Executive Officer/ Chief Operating Officer

Cc: Stacie Durant Manny Singla Melissa Moody Shirley Hirsch