



## **Detroit Wayne Integrated Health Network**

707 W. Milwaukee St.  
Detroit, MI 48202-2943  
Phone: (313) 833-2500  
[www.dwihn.org](http://www.dwihn.org)

FAX: (313) 833-2156  
TDD: (800) 630-1044 RR/TDD: (888) 339-5588

### **Residential Provider Meeting**

**Friday, August 5, 2022**

**Virtual Meeting**

**11:30 am –12:30 pm**

**Agenda**

**Zoom Link: <https://dwihn-org.zoom.us/j/92653624476>**

- I. Welcome/Introductions
- II. Integrated Care- Vicky Politowski
  - Hepatitis C initiative (pages 2-14)
- III. Recipient Rights
  - Recipient Rights Training (Mike Olver, ORR Trainer) (pages 15-16)
  - Recipient Rights Monitoring (Ed Sims, ORR Monitor) (pages 17-18)
- IV. Residential Department- Shirley Hirsch & Kate Mancani
  - Vacancy Reporting
  - Internal Transfers
  - Treatment Plan Reports
  - Authorization Updates
- V. Managed Care Operations- Sharon Matthews
  - Pre-Contracting Documents
  - DWIHN Provider Manual- [https://www.dwihn.org/provider\\_manual](https://www.dwihn.org/provider_manual)
- VI. Administrative Updates – Eric Doeh, President and CEO
- VII. Questions
- VIII. Adjourn

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# WHAT IS HEPATITIS C

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TREATMENT IS AVAILABLE



# HEPATITIS C

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- **Hepatitis C** is a liver infection caused by the hepatitis C virus (HCV). Hepatitis C is spread through contact with blood from an infected person. Today, most people become infected with the hepatitis C virus by sharing needles or other equipment used to prepare and inject drugs.

# HEPATITIS C TESTING RECOMMENDATIONS

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- CDC now recommends one-time hepatitis C testing of all adults (18 years and older). CDC continues to recommend people with risk factors, including people who inject drugs, be tested regularly.
- HEP C is easily diagnosed with a simple blood test. However, because the infection can be symptom-free for many years, persons carrying the virus are often not tested and opportunities to cure infection early are missed.
- HEP C is curable

# MICHIGAN'S PLAN TO ELIMINATE HEP C

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- The Michigan Department of Health and Human Services and Michigan Medicaid have partnered with the biopharmaceutical company, AbbVie, in effort to eliminate hepatitis C through the **We Treat Hep C Initiative**.
- Update providers and clients on Hepatitis C transmission and curative treatment
- Expand Hepatitis C testing to all adults, and anyone at risk
- Increase access to Hep C prevention through STD treatment, Substance use treatment and syringe service program.



# GETTING THE MEDICATION WAS A BARRIER

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- Mavyret is the preferred Hepatitis C direct acting antiviral for Michigan Medicaid as of April 1, 2021
- Any Medicaid enrolled prescriber can prescribe this medication with no prior approval required
- Medicaid patients requiring a different hepatitis C drug will need prior authorization, the prior authorization does not include a specialist nor a sobriety requirement
- Documentation of patient sobriety is no longer required
- Treatment guidelines are on the MDHHS website

# PRIORITY POPULATION

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- Persons who inject drugs
- Individuals born between 1945-1965
- Persons co-infected with HCV/HIV

Part of the **We Treat Hep C** initiative is to educate and inform clinicians about resources available to test and treat patients for HEP C.





DWIHN's goal is to increase access to HEP C prevention and care to our SUD population by educating our providers regarding access to care.



DWIHN has developed a monitoring tool to identify at risk clients.

This measure is both meaningful and measurable according to NCQA guidelines.

The tool will contain two questions:

Have you ever been :

**Tested for Hep C**

- Yes
- No

Have you ever had



**Treatment for Hep C**

- Yes
- No



# QUESTION IS CONTAINED IN SUD REAUTHORIZATION FORM

Apps Ignore changes and... (5 unread) - ministe... Commentaries by V... ADP BibleGateway.com:... FaxFinder FF840.R1...

 **Detroit Wayne Integrated Health Network**  
**Mental Health Wellness Information Network** 

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**Motivation**  
The individual is motivated in the Preparation SOC AEB discontinued use and continued compliance.

**Frequency Of Sessions**  
The individual will be scheduled to attend 12 sessions per quarter.

**Scope**  
Identify therapeutic techniques and activities; e.g., cognitive, didactic, client homework assignments, reading materials, etc.  
Cognitive behavioral, Rational Emotive, Motivational Interviewing therapies with individual, specialty group, and didactic, homework and participation in FA support weekly, acupuncture.

**Type Of 12-Step Meeting Attendance and Frequency**  
The individual denies any 12-step attendance; however, he is encouraged to attend.

**Type Of Ancillary Services Provided or Referred**  
Include referrals to QHP, CMH, Health Dept.  
Individual will be referred to our Case Management Team for all ancillary needs.

**Tested for Hep C ?**  
☐ Yes ☐ No

**Treated for Hep C ?**  
☐ Yes ☐ No

**Release Faxed?**  
☒ Yes ☐ No

**Eligibility (271) Verified for Appropriate Month(s)?**  
☒ Yes ☐ No

**UDS**

# QUESTION CONTAINED IN BIOPSYCHOSOCIAL UNDER PRIMARY CARE ASSESSMENT

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## SCREENED FOR HEP C?

☐ Yes ☐ No ☐ Referral for PCP, evaluation needed

## TREATMENT FOR HEP C?

☐ Yes ☐ No ☐ Referral for PCP, evaluation needed

## IS THE INDIVIDUAL CURRENT ON ALL VACCINES/IMMUNIZATIONS?

☐ Yes ☐ No ☐ Referral Needed

## COVID-19

☐ Yes ☐ No ☐ N/A ☐ Prefer not to answer

## FLU

☐ Yes ☐ No ☐ N/A ☐ Prefer not to answer

## PNEUMOCOCCAL

☐ Yes ☐ No ☐ N/A ☐ Prefer not to answer

## SHINGLES

☐ Yes ☐ No ☐ N/A ☐ Prefer not to answer

## HEP A

☐ Yes ☐ No ☐ N/A ☐ Prefer not to answer

## HEP B

☐ Yes ☐ No ☐ N/A ☐ Prefer not to answer

## TETANUS

☐ Yes ☐ No ☐ N/A ☐ Prefer not to answer



# Find a HEP C treatment provider

## Hepatitis C Treatment Provider Directory

[https://www.michigan.gov/documents/mdhhs/HCV\\_Treatment\\_Provider\\_Directory\\_742643\\_7.pdf](https://www.michigan.gov/documents/mdhhs/HCV_Treatment_Provider_Directory_742643_7.pdf)

**Disclaimer:** Listings in the Hepatitis C Treatment Provider Map are for informational purposes and is not a complete list of all hepatitis C treatment providers in the state of Michigan. Inclusion in the map is for providers who have given consent to be added and does not constitute MDHHS' endorsement or recommendation of, or for, any individual, service, treatment, or organization. Phone numbers, addresses, and service information are subject to change.





# THANK YOU

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- Questions and Answers

Alicia Oliver, MSN, RN

# New Hire Recipient Rights Training

- ❑ Trainings are currently open for Registration in MHWIN 2 months in advance.
- ❑ There are 9 to 11 trainings held each month.
- ❑ **Staff Record**-Ensure the record is completely filled in, especially the provider name and location as well as the date of hire and the email address.
- ❑ The email address in the staff record should be that of the participant. This will ensure that they receive the correct training documents.
- ❑ Participants must be present online, with working cameras, and remain visible and available to communicate with us throughout the course.
- ❑ If your staff are seen driving during the training, laying down/asleep, OR OBSERVED OTHERWISE NOT ENGAGED DURING THE TRAINING, they will be removed from the training. If the camera is facing the ceiling, the floor or otherwise NOT on the training participant, the participant will be removed from the training and will have to reschedule. NHRRT is considered a "face-to-face" training, in a virtual format.
- ❑ For the month of June, 409 **participants were registered**, with 206 **completing** and 203 **No Shows**. Providers please assist us in decreasing the No Show rate by supporting and communicating with your staff to complete the training.

# New Hire Recipient Rights Training

- ❑ **Course Completion**-Staff must participate in the virtual- live training using the Zoom app AND pass the quiz with a score of **80%** or greater. NHRRT documents, including the quiz, are *different for* each training, so any attempts by Participants to submit documents from a previous training will not be accepted. The deadline to return the quiz is **3pm** the day of the class. Incomplete or late exams will not be accepted.
- ❑ Review the DWIHN website and/or the MHWIN newsflash for updates regarding NHRRT.
- ❑ **Evening** NHRRT class is offered once per month from 4pm-6pm, return of the completed quiz is due by 9pm, the day of the class. Please check MHWIN for available training dates.
- ❑ Please contact ORR Trainers ASAP to remove a registered participant once you become aware that they are unable to attend NHRRT, to ensure scheduling availability.
- ❑ **To Maintain Compliance**- Register your staff for NHRRT training during the onboarding process.
- ❑ If Providers have difficulty registering staff for NHRRT, PowerPoint Instructions are available via our email [orr.training@dwihn.org](mailto:orr.training@dwihn.org).
- ❑ To unregister a participant, assistance with certificate verification or for any questions regarding training, please email us at [orr.training@dwihn.org](mailto:orr.training@dwihn.org).
- ❑ ORR Trainers remain available at [orr.training@dwihn.org](mailto:orr.training@dwihn.org) to partner with Providers and ensure compliance with regulatory standards and DWIHN policies related to ORR Training requirements.

## Provider Meeting

**Presenter: Edward Sims, ORR RRI-Monitoring**

**Friday, August 5, 2022**

### ORR annual site review process:

- The ORR Reviewer will contact the Vendor to schedule a convenient date/time to conduct the site review visit. FY22 ends on 09/30/22. Please respond promptly to ORR's request to schedule the annual site review visit.
- ORR Reviewer may request photos and other documents to be submitted, prior to the review date-postings, MMHC, policies in person site review visits began May 1<sup>st</sup> 2022- Covid questionnaire responses will determine if an *alternative to in person* SRs will be conducted
- Training request - Provide information for any new staff *hired since the last site review visit*, that are currently working at the facility-name, date of hire, date of NHRRT, possibly date of ARRT
- Are there any additional sites other than the one that's being reviewed
- Copies of SR documents will be sent out via email & USPS.
- Please assure the ORR Reviewer is provided with a valid email addresses for Provider/Site Rep
- If you would like a copy of the list of items to be reviewed during the SR, email me at [esims1@dwihn.org](mailto:esims1@dwihn.org) to receive a copy of the list

### Questions/What the ORR Reviewer will look for during site review:

- Where certain documents are located in the facility-posters, Rights booklet, MHC, Policies
- If any members have restrictions or limitations on use of the phone, mail, visiting hours. If yes, included in IPOS
- Do Members & Staff know how to file a complaint
- Where confidential information is stored-Is it locked/password-protected
- Are there any health or safety violations observed by the Reviewer interior-exterior of the home-trip hazards, loose railings, broken steps, unlocked meds etc.
- Are contraband items posted-weapons, drugs, alcohol etc.
- Were there any new staff hired since the last SR-if yes, require evidence for active staff only

- If yes, did new staff attend NHRRT within 30 days of their hire date
- Is the staffs NHRRT training older than 1 Year-if yes, provide evidence that the staff has taken their ARRT
- If a licensed facility (AFC) provide the expiration date of license

Corrective Action Plan-If applicable, Vendors have **ten** business days to submit the CAP response:

- a. NHRRT face-to-face required within 30-days of hire-MMHC mandate-If no, **Non-compliant** for that FY
- b. Annual RR Training via Detroit Wayne Connect-due every year after NHRRT is attended
- c. Staff Record-contact information should be kept current
- d. Virtual environmental walk-through-Reviewer observes interior & exterior of AFC, via Zoom or MS Teams App
- e. Repeat non-compliance-Notification sent to Contract Manager
- f. Provider/Vendor contact information should be kept current
- g. Vendor will receive copies of site review documents via email & USPS
- h. ORR requires the Site Rep's signature on page #4 of the site review tool

Contact Info-Monitoring:

Edward Sims, ORR RRI-[esims1@dwihn.org](mailto:esims1@dwihn.org),or 313-433-2845-work cell

Schakerra Pride, ORR Manager-[spride@dwihn.org](mailto:spride@dwihn.org),or 313 498-4769-work cell