



Detroit Wayne Integrated Health Network

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Residential Provider Meeting Friday, November 17, 2023 Virtual Meeting 11:30 am –12:30 pm Agenda

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

- I. Welcome/Introductions
- II. Claims Department – Quinnetta Allen
 - Claims Reminders (Page 2-6)
- III. Compliance – Kiara Merrity
 - Reminders – (Pages 7-9)
- IV. Adult Initiatives – Allison Gabridge
 - BHTEDS (Pages 10-18)
- V. Recipient Rights – LaShanda Neely
 - ORR Training
 - Monitoring & Prevention (Pages 19-23)
- VI. Credentialing Updates – Ricarda Pope-King
 - (Pages 24-29)
- VII. Administrative Updates – Eric Doeh, President and CEO
- VIII. Questions
- IX. Adjourn

Board of Directors

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Claims Department

Quinnetta Robinson

Claims Manager

Claims Data Entry Status

- Please remember when a claim is in “claims data entry” status you the Provider have complete control over the claim. The claim can be edited and modified as it has not been submitted for claims adjudication.

Batch Date	Batch Status	# of Claims	Totals	
10/31/2023	Claim Data Entry	1	Claimed: \$4,250.00 Payable: \$0.00	View Claims in Batch Adjudication Report Take Over Batch View Batch Info Scanned/Uploaded Documents

- Please Do Not send inquiries through the PIHP claims mailbox if your claim is in this status. Some errors/edits will be resolved in the adjudication phase of your claims processing. There will be a clear and precise comment placed on the claim if the issue can not be resolved. This comment will identify what needs to occur to bring forth claim payment. Only when the claim has completed the adjudication process, and you disagree with the outcome or need further clarification an inquiry should be sent to PIHPclaims@dwihn.org for further claims review at a management level.

Personal Work Emails

- The PIHP claims mailbox is managed by DWIHN's claims leadership team which includes.
 - Quinnetta Robinson (Claims Manager)
 - Deabra Hardrick-Crump (Director of Claims)
 - Debra Schuchert (Claims Supervisor)
- Please send all claims inquiries via the PIHPclaims@dwihn.org mailbox to have your issue reviewed and refrain for utilizing the personal emails of the individuals listed above. Your claims issues will be addressed timelier and allows for us to better track patterns and identify the scale of claim issues.

Year End Closeout

- ▶ All outstanding encounters and claims **MUST** be submitted within MH-WIN by **Thursday, November 30, 2023**. All denials and rejections (including those incurred in the month of September) **MUST** also be submitted within MH-WIN by **Thursday, November 30, 2023**, with exception to MI Health Link (MHL), any submissions received after these dates will **NOT** be considered for reimbursement.

Contacts

- **Issues should be sent to the appropriate department.**
- Authorizations – pihpauthorizations@dwihn.org / residentialauthorizations@dwihn.org
- Contract issues – contact your Contract Manager
- System issues – mhwin@dwihn.org
- Finance issues - tomani@dwihn.org



DETROIT WAYNE INTEGRATED HEALTH NETWORK

800-241-4949

www.dwihn.org

Reminders

- ▶ Provider Contact information up to date in MHWIN
- ▶ Responding to requests
- ▶ Time sensitive

Contact Us

- ▶ Compliance Hotline (313-833-3502)
- ▶ Attn: Corporate Compliance Officer
Detroit Wayne Integrated Health Network
707 W. Milwaukee, Detroit MI, 48202
- ▶ VIA EMAIL: compliance@dwihn.org

BHTEDS

A View from 4,000 Feet



2 Primary Purposes

Collect demographic information individuals who receive BH treatment services

Measures the direction and magnitude of change by using this T1-T2 model.

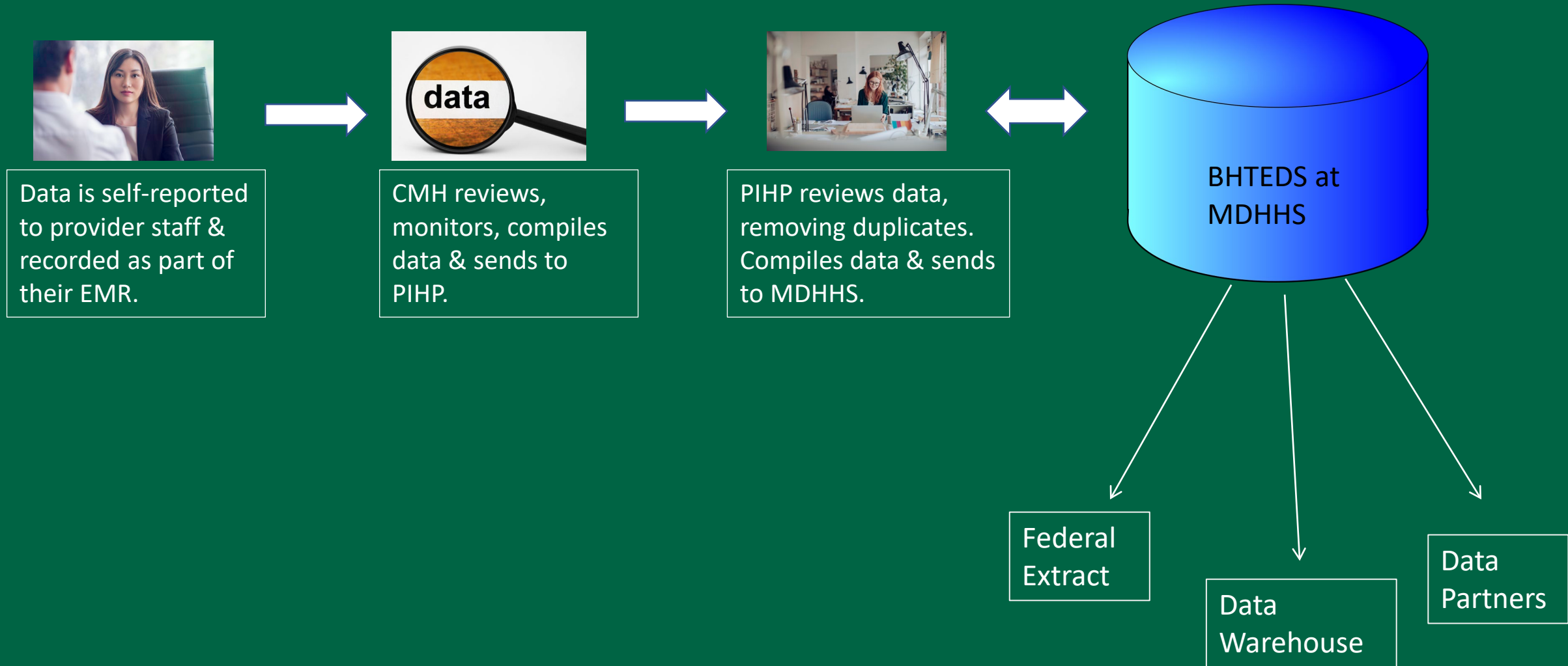


A low-angle photograph of a yellow bridge tower against a clear blue sky. The tower has a distinctive design with a large rectangular opening and a series of triangular cutouts along its side. The perspective is looking up at the tower, making it appear to converge towards the top of the frame.

Episode

- Data captured at:
 - Admission
 - Update (at least annually)
 - Discharge
- To build an episode of Care

BHTEDS Data Flow



Demographic Information

Date of Birth

Sex Assigned at Birth

Gender Identity

Race

Hispanic or Latino Ethnicity

Pregnant at Service Start Date

County of Residence

Veteran Status (includes era, branch, family military history)

SSN, Medicaid ID, Medicare ID

Data that allows us to measure magnitude & direction of change

- How did their living condition change?
- How did their employment status change?
 - If they are not in competitive, integrated labor force, what are they doing?
 - Are they earning at least minimum wage?
 - What is their average hours worked in last 2 weeks?
 - What was their hourly wage in the last 2 weeks?
 - Has their annual income increased/decreased?

Data that allows us to measure magnitude & direction of change

- How has their level of education changed?
- Are they currently attending school?
- How has their interaction with law enforcement/criminal justice changed?
- How has their substance use changed? How has their LOCUS Score changed?
- How has their level of care changed?



Considerations when using BHTEDS

- Not currently tied to MPI (but currently investigating).
- If person is open in multiple regions, they may have multiple overlapping BHTEDS episodes.
- SU – episode is at the provider level, so greater chance of multiple episodes in a given time period that is being analyzed (IE FY)
- Data is due to MDHHS by the end of the month of the month following Start/Update/End date.

In addition to demographic data, how has their life changed during the course of treatment?

- Used to defend funding.
- De-identified data shared with other agencies (i.e. MSP, MSU, WSU, GVSU, NDEWS, etc.
- Data shared w/Internal Partners)





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ORR New Hire Recipient Rights Training

Updates:

- ❑ *ORR Trg. Info on the DWIHN website and (formerly) the MHWIN newsflash, now “NHRRT Info” has been updated, along with the FAQ’s form.
- ❑ *Current NHRRT availability- **2 weeks out.**
- ❑ *Register staff for NHRRT during the **onboarding/orientation** process.
- ❑ *NHRRT-available seats **increased** to accommodate an increase in attendee #s-**50/class=600/mo.**
- ❑ *Rating for “no shows” expanded-**Incomplete.**
- ❑ *If staff marked “Incomplete” for NHRRT, must contact Trainers at orr.training@dwihn.org to reschedule.
- ❑ *NHRRT vs. ARRT-Update ARRT on DWC.
- ❑ If Providers need to **cancel/reschedule** their staff for NHRRT, notify ORR Trainers at orr.training@dwihn.org. Please **do not** mark the person as cancelled in MHWIN.
- ❑ NHRRT conducted **Mon-Wed** each week from **10am-12pm.** Evening NHRRT-2nd Tuesday of the month from **4pm-6pm.** Check MHWIN for available training dates.
- ❑ If your staff experiences any issues with NHRRT, you may contact us via email at: orr.training@dwihn.org no later than **½ hour prior** to the class start time.
- ❑ *NHRRT is held via the Zoom App-**participants need a strong Wi-Fi signal** to participate. Participants note: Wi-Fi strength **prior** to training, be familiar w/chat feature.
- ❑ Participants **must** be present **online**, with working cameras, and remain **visible** and available to communicate with us **throughout** the course.
- ❑ If your staff are **OBSERVED DRIVING OR OTHERWISE NOT ENGAGED DURING THE TRAINING**, they will be removed from the training and will need to be rescheduled.
- ❑ *NHRRT must be completed **w/in 30 doh** for new staff.

OFFICE OF RECIPIENT RIGHTS: MONITORING (SITE REVIEWS)

Updates:

- ▶ *ORR Monitoring-Prep for MDHHS Triennial Assessment-01/2024; to assess monitoring compliance
- ▶ *New Contracts/Address change-Vendors pls. include notification to ORR Monitoring Mgr. @ spride@dwihn.org
- ▶ *Providers please adhere to the requirements of the MMHC mandate re: NHRRT

Site Review Process:

- ▶ *ORR Site Visit conducted onsite (in person). Covid 19 Questionnaire-If +exposure, an alternative site review will be arranged
- ▶ Review new staff hired since the previous site review-**NHRRT must be completed w/i 30 doh**
- ▶ ORR accepts NHRRT obtained from *different* counties w/ evidence provided/verification
- ▶ *ORR Reviewer looks for: required postings, RR booklets, confidential items stored, health/safety violations, interior/exterior of facility, interviews staff & members re: rights awareness and complaint filing

- ▶ *Any violation(s) found requires a Corrective Action Plan. Provider has 10-business days from the date of the site visit to remedy violation
- ▶ *End of site review visit, Site Rep **required to sign & date page #4 of site review tool**

Important Reminder:

- ▶ Provider contact info and staff records should be kept current, as required in MHWIN
- ▶ *Questions: esims1@dwihn.org or spride@dwihn.org

ORR Prevents Rights Violations

Prevention Unit Primary Responsibilities

- ▶ ***ORR Prevention Unit-no updates** for November 2023 Provider meetings
- ▶ Develop and implement prevention-related training initiatives & provide input with updating specific DWC trgs, ex: lrs
- ▶ Review Policies and Procedures & provide recommendations to address Recipient Rights-related matters
- ▶ Review substantiated complaint investigations and address concerns identified for prevention opportunities
- ▶ Ensure remedial action trainings & recommendations related to RR violations are in adherence to the Michigan Mental Health Code and MDHHS Administrative Rules.
- ▶ Goal is to ensure providers and staff are equipped with the required training & knowledge of RR policies & procedures, to assist in prevention of RR violations

Customer Service Due Process Updates

- 1. The Customer Service Due Process Department (Appeals) will begin conducting Desk Audits of the Adverse Benefit Determination (ABD) notices beginning January 8, 2024. The desk audits will be ensuring that the notices are completed in their entirety. This includes proper verbiage and grammar, all services that are being reduced, suspended or terminated are listed as well as legal references are being utilized. Please reach out to Dorian Johnson should you have any questions or concerns
- Technical assistance continues to be offered to do in person or virtual training to assist in the proper completion of ABDs. Please reach out to pihpmemberappeals@dwihn.org or Due Process Manager, Dorian Johnson at djohnson@dwihn.org for additional information.
- Our Member Grievance Specialists continue to train Grievance coordinators and their alternates regarding the proper way to assist in the processing of grievances. Should you have any questions or concerns regarding upcoming trainings, please reach out to pihpgrievances@dwmha.com

CREDENTIALING



42CFR438.214

General rules. The State must ensure, through its contracts, that each MCO, PIHP, or PAHP implements written policies and procedures for selection and retention of network providers and that those policies and procedures, at a minimum, meet the requirements of this section.

(b) *Credentialing and recredentialing requirements.*

(1) Each State must establish a uniform credentialing and recredentialing policy that addresses acute, primary, behavioral, substance use disorders, and LTSS providers, as appropriate, and requires each MCO, PIHP and PAHP to follow those policies.

(2) Each MCO, PIHP, and PAHP must follow a documented process for credentialing and recredentialing of network providers.

(c) ***Nondiscrimination.*** MCO, PIHP, and PAHP network provider selection policies and procedures, consistent with [§ 438.12](#), must not discriminate against particular providers that serve high-risk populations or specialize in conditions that require costly treatment.

(d) *Excluded providers.*

(1) MCOs, PIHPs, and PAHPs may not employ or contract with providers excluded from participation in Federal health care programs under either section 1128 or section 1128A of the Act.

(2) [Reserved]

(e) ***State requirements.*** Each MCO, PIHP, and PAHP must comply with any additional requirements established by the State.

EVERY PROVIDER MUST BE CREDENTIALLED. CONTRACTING WITH DWIHN MAY BE IMPACTED IF YOU ARE NOT CREDENTIALLED. IF YOU HAVE NOT STARTED THE PROCESS IMMEDIATELY CONTACT THE CREDENTIALING UNIT AT PIHPCREDENTIALING@DWIHN.ORG OR YOUR PROVIDER NETWORK MANAGER AT PIHPPROVIDERNETWORK@DWIHN.ORG

Anytime you make any changes to your Microsite and Provider Source application you must re-attest by completing the Certification and Authorization form (include Organization name, organization representative name, signature, and date. If you do not re-attest Medversant will not see the document and continue to do outreach for what is missing in your file.



- Providers and practitioners are notified 6 months prior to the expiration of the initial or re-credentialing date. If you do not meet the re-credentialing date your file will be treated as a credentialing file.
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IF YOU RECEIVE AN ADVERSE CREDENTIALING DECISION YOU HAVE THE RIGHT TO APPEAL. THE LETTER THAT YOU RECEIVED OF THE ADVERSE DECISION HAS AN APPEAL DOCUMENT ATTACHED THAT MUST BE RETURNED WITHIN 30 CALENDAR DAYS OF THE DECISION IN ORDER TO GET A REVIEW BY THE APPEALS COMMITTEE. THE APPLICANT WILL RECEIVE A DECISION WITHIN 7 BUSINESS DAYS OF THE FINAL DISPOSITION. **FAILURE** TO SEND A VALID REQUEST FOR APPEAL WITHIN 30 CALENDAR DAYS ALLOTTED SHALL CONSTITUTE WAIVER BY THE PRACTITIONER OF ANY RIGHT TO APPEAL.

