

#### Detroit Wayne Integrated Health Network

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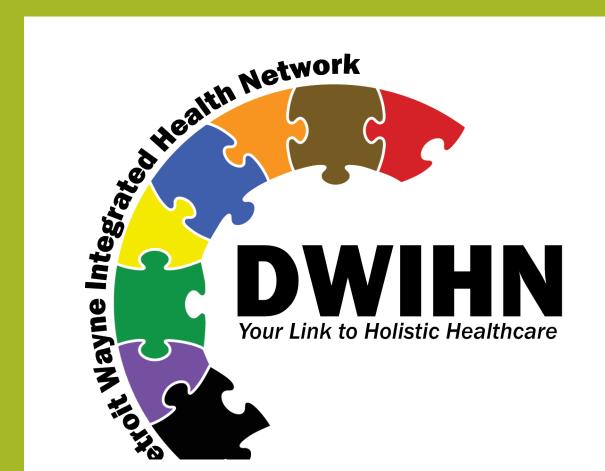
CRSP/Outpatient Provider Meeting Friday, November 22, 2024 Virtual Meeting 10:00 am -11:00 am Agenda

Zoom Link: https://dwihn-org.zoom.us/j/93220807823

- I. Welcome/Introductions
- II. Compliance Updates John Shafer (Pages 2-5)
- III. Claims Department Debra Schuchert
  - General Funds (Pages 6-9)
- IV. Recipient Rights Edward Sims
  - ORR Training
  - RRI (Pages 10-12)
  - V. Children's Initiative Cassandra Phipps
    - MDHHS State Plan Memo (SMI/SED/IDD Providers)
    - MDHHS CAFAS/PECFAS Update Memo (Children Providers-SED/IDD) (Pages 13-18)
- VI. Administrative Updates Manny Singla, Executive VP of Operations
- VII. Questions
- VIII. Adjourn

#### **Board of Directors**





# CORPORATE COMPLIANCE DEPARTMENT

Provider Meeting Updates November 22, 2024

#### **August-October 2024**

- ☐ The following noncompliance issues remain under heightened scrutiny
  - Billing for services not rendered
  - Inaccurate time
  - Unsigned IPOS (wet signatures vs obtained externally)
  - Failure to provide clinical documentation
  - Documentation after the close of the investigation

#### **Compliance Investigations**

- □ Documentation request from compliance
  - Compliance cannot guarantee that any information provided after the due date will be reviewed or considered as supporting documentation for the investigation.
  - Compliance investigations are time-sensitive to ensure prompt submission to the appropriate regulatory authorities All requested documentation not received by the date

# COMPLIANCE UPDATES

## NON-COMPLIANCE

#### How to avoid being cited for any of the noncompliance allegations.

- Auditing and Monitoring: Conduct regular audits and monitoring of operations to identify and address compliance issues promptly.
- Stay Informed: Regularly monitor updates to healthcare laws, regulations, and industry standards relevant to your practice.
- Implement Policies and Procedures: Establish and maintain clear policies and procedures that align with regulatory requirements and best practices.
- **Training and Education:** Provide ongoing training to staff on compliance issues, including fraud prevention, patient privacy (HIPAA), and billing practices.
- **Documentation:** Maintain accurate and detailed records of patient care, billing, compliance activities and HR files.





General Funds

**Quinnetta Robinson** 

Claims Manager

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## General Funds Claim Edits

We continue to receive many emails about the General Funds error messages listed below

- Service not in DWMHA benefit plan for this individual on this date of service."
- GF-2 Service not in DWMHA benefit plan for this individual on this date of service (60 days)"
- GF-3 Service not in DWMHA benefit plan for this individual on this date of service (90 days)."

This means that the consumer has lost Medicaid coverage for the dates of service billed for the indicated timeframe (ie. 60 days). There is now a General Fund Exception Authorization needed to pay for denied dates of service. Please follow these steps....



- 1. The consumer's Case Manager/support coordinator <u>must</u> complete a General Fund Exception Request Form. This is completed via MH-WIN under 'Request for General Fund Exception' in the Authorization screen.
- 2. Once the special GF Authorization is created the provider must use the new GF authorization to bill for services that fall within the GF period. The GF Authorization will bypass the edits.

Note: General Funds claims edits cannot be overridden to pay.



## Claims Department Contact:

PIHPclaims@dwihn.org

# Contact

CLAIMS DEPARTMENT



# DETROIT WAYNE INTEGRATED HEALTH NETWORK

800-241-4949

www.dwihn.org

### ORR Recipient Rights Training

#### **Updates: November 2024**

- The DWIHN ORR <u>NHRRT</u> certificate remains valid for 1 year from the date attended AND <u>only</u> if <u>not more than 2 consecutive</u> Annual RR trg. updates have NOT been missed.
- ORR NHRRT training days will be <u>changed</u> beginning in January 2025. NHRRT will be held via Zoom on <u>Tuesday</u>, <u>Wednesday & Thursday</u> of each week. Currently, NHRRT is held Monday, Tuesday & Wednesday.
- ☐ The evening NHRRT will be continue to be held every 2<sup>nd</sup> Tuesday of the month from 4pm-6pm.
- NHRRT registration availability-currently <u>3</u> weeks out; see available New Hire RR training classes in MHWIN.
- ORR training unit continues to find Providers or their designee marking "cancelled" in mhwin if staff need to be re-registered. Please contact the ORR trg. unit if a staff requires cancellation and/or re-scheduling.

#### **ORR NHRRT Information:**

If new staff report they previously attended NHRRT, request evidence during the onboarding/orientation process.

- NHRRT is held via the Zoom App-<u>participants need</u> strong Wi-Fi signal & be familiar w/the Chat feature.
- Participants <u>must</u> be present <u>online</u>, <u>with working cameras</u>, and remain <u>visible</u> and available to communicate <u>throughout</u> the course. Staff are not allowed into the training 5 minutes after the start time.
- If your staff are <u>OBSERVED DRIVING OR OTHERWISE</u> <u>NOT ENGAGED DURING THE TRAINING</u>, they will be removed from the training and will need to be rescheduled.
- Providers, if your staff are not tech-savvy, please assist them when they attend NHRRT.
- An email is sent on morning of trg. to email address listed in MHWIN. If staff experiences any issues with the NHRRT class email, they may contact us at: orr.training@dwihn.org
- NHRRT vs. ARRT-NHRRT: Virtual ZOOM new staff; ARRT: DWC website (1year after NHRRT training date, and annually thereafter)
- ORR Trg. info located on DWIHN website (dwihn.org), in MHWIN, & on the FAQ's form on website.
- ORR Trainers: LaShanda Neely, Michael Olver, Joyce Wells, ORR Mgr., Schakerra Pride

#### OFFICE OF RECIPIENT RIGHTS: MONITORING (SITE REVIEWS)

#### **Updates: November 2024**

#### Final FY2024 totals for ORR monitoring:

- Total site reviews conducted: 597
- ► Total site reviews compliant: **553**
- ► Total site reviews non-compliant: 44
- All N/C site reviews-NHRRT beyond 30 doh, with exception of 01 site review-CAP response not submitted timely
- FY2025 Providers requested to document <u>ALL</u> current staff's DOH, NHRRT & ARRT dates, if NHRRT over 1 year old; evidence of ARRT will be requested

#### **ORR Monitoring Information:**

- ORR Site Visit conducted onsite (in person). Covid 19 Questionnaire-If +exposure, an alternative site review will be arranged
- ORR accepts NHRRT obtained from different counties w/evidence provided & verification of validity, in most cases (Oakland, Macomb, Washtenaw accepted)

### ORR Reviewer looks for the following during site review:

- List: 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 <u>Corrective</u> <u>Action Plan</u>. Provider has <u>10-business days</u> 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 Reminders:**

- Provider contact info and staff records should be kept <u>current</u>, as required in MHWIN
- Questions re: ORR Monitoring: esims1@dwihn.org, lhudson@dwihn.org ahardrick@dwihn.org or spride@dwihn.org



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To: Children Providers (SMI / SED / IDD)

From: Cassandra Phipps (Director of Children's Initiative)

CC: Melissa Moody (VP of Clinical Operations), Stacey Sharp (Associate VP of

Clinical Operations), Marianne Lyons (Director of Adult Initiative), April Siebert (Director of Quality), Marlena Hampton (Director of Utilization

Management)

**Re:** MDHHS State Plan Update

**Date:** November 19, 2024

This memorandum is to inform DWIHN Provider Network servicing SMI, SED, IDD populations of upcoming proposed changes to Michigan Department of Health and Human Services (MDHHS) Medicaid-funded specialty behavioral health services. This includes updates regarding the following programs and services:

- Habilitation Supports Waiver (HSW)
- Waiver for Children with Serious Emotional Disturbances (SEDW)
- Children's Waiver Program (CWP)
- 1915(i) State Plan Amendment (SPA)
- Parent Support Partner (PSP) and Family Support and Training
- Intensive Care Coordination with Wraparound (ICCW) and Wraparound

Note: These proposed changes are currently pending and not to be implemented until Center for Medicare and Medicaid Services (CMS) approval of the required authorities, the Prepaid Inpatient Health Plans (PIHPs) will be required to cover services outlined below in this letter. MDHHS will provide updated policy bulletins with further details at that time.

#### 1915(i) State Plan Amendment

<u>Supported Employment:</u> For eligible beneficiaries enrolled in the 1915(i), the PIHPs will reimburse two distinct services related to Supported Employment:

- Supported Employment Individual Supported Employment
- Supported Employment Small Group Employment Support

#### **Board of Directors**



<u>Fiscal Management Services:</u> Within the 1915(i), Fiscal Intermediary will be renamed as Financial Management Services. The PIHPs will reimburse the provision of Financial Management Services to eligible beneficiaries enrolled in the 1915(i).

<u>Parent Support Partner (PSP)</u>: PSP services have been added to the state plan, and PSP services will be removed from the 1915(i). Eligible beneficiaries who are enrolled in the 1915(i) will be able to receive PSP services via the state plan. Family Support and Training will remain in the 1915(i), and PIHPs will reimburse the provision of Family Support and Training to eligible beneficiaries enrolled in the 1915(i).

- S5111 WP = Family Support and Training (serviced rendered Parent Support Partner)
   will no longer be a 1915i SPA requirement.
- S5111 = Family Support and Training (service rendered by a Clinician) to remain as a 1915i SPA requirement.

#### **SEDW (SED Waiver)**

<u>Children's Therapeutic Family Care:</u> Within the SEDW, Children's Therapeutic Foster Care will be renamed as Children's Therapeutic Family Care. The PIHPs will reimburse the provision of Children's Therapeutic Family Care to eligible beneficiaries enrolled in the SEDW.

<u>Fiscal Management Services</u>: Within the SEDW, Fiscal Intermediary will be renamed as Financial Management Services. The PIHPs will reimburse the provision of Financial Management Services to eligible beneficiaries enrolled in the SEDW.

<u>Parent Support Partner (PSP)</u>: PSP services have been added to the state plan, and PSP services will be removed from the SEDW. Eligible beneficiaries enrolled in the SEDW will be able to receive PSP services via the state plan, and the PIHPs will reimburse for the provision of PSP services to eligible beneficiaries enrolled in the SEDW. Family Support and Training will remain in the SEDW, and PIHPs will reimburse the provision of Family Support and Training to eligible beneficiaries enrolled in the SEDW.

<u>Intensive Care Coordination Wrap Around (ICCW):</u> services have been added to the state plan, and Wraparound services will be removed from the SEDW. Eligible beneficiaries who are enrolled in the SEDW will be able to receive ICCW services via the state plan, and the PIHPs will reimburse for the provision of ICCW services to eligible beneficiaries enrolled in the SEDW.

<u>Therapeutic Activities:</u> For eligible beneficiaries enrolled in the SEDW, the PIHPs will reimburse four distinct services related to Therapeutic Activities: Music Therapy, Recreation Therapy, Art Therapy, Equine Therapy.

#### **HSW** (Habilitation Stabilization Waiver)

<u>Supported Employment:</u> For eligible beneficiaries enrolled in the 1915(i), the PIHPs will reimburse two distinct services related to Supported Employment:

- Supported Employment Individual Supported Employment
- Supported Employment Small Group Employment Support

<u>Fiscal Management Services:</u> Within the 1915(i), Fiscal Intermediary will be renamed as Financial Management Services. The PIHPs will reimburse the provision of Financial Management Services to eligible beneficiaries enrolled in the 1915(i).

<u>Prevocational Services:</u> Will be removed from the HSW, and activities related to Prevocational Services can be reimbursable under the 1915(i) SPA benefit's Skill Building Services. The PIHPs will reimburse the provision of Skill Building Services to eligible beneficiaries enrolled in the 1915(i)

<u>Vehicle Modification:</u> For eligible beneficiaries enrolled in the HSW, PIHPs will reimburse Vehicle Modification as a separate and distinct service from Enhanced Medical Equipment and Supplies.

#### **CWP** (Children Waiver Program)

<u>Fiscal Management Services:</u> Within the CWP, Fiscal Intermediary will be renamed as Financial Management Services. The PIHPs will reimburse the provision of Financial Management Services to eligible beneficiaries enrolled in CWP.

<u>Enhanced Transportation:</u> Enhanced Transportation Services have been removed from CWP. The PIHPs will reimburse related transportation activities under Non-Emergency Medical Transportation via the state plan for eligible beneficiaries enrolled in the CWP.

<u>Therapeutic Activities:</u> For eligible beneficiaries enrolled in the CWP, the PIHPs will reimburse four distinct services related to Therapeutic Activities: Music Therapy, Recreation Therapy, Art Therapy, Equine Therapy, Massage Therapy.

<u>Additional Services:</u> For eligible beneficiaries enrolled in the CWP, PIHPs will reimburse the following services as separate and distinct services: Vehicle Modifications, Specialized Medical Equipment and Supplies, and Environmental Accessibility Adaptations.

<u>Parent Support Partner (PSP):</u> PSP services have been added to the state plan, and the PIHPs will reimburse for the provision of PSP services to eligible beneficiaries.

<u>Intensive Care Coordination Wrap Around (ICCW):</u> ICCW services have been added to the state plan, and the PIHPs will reimburse for the provision of ICCW services to eligible beneficiaries

Furthermore, the information mentioned above are proposed changes and additional information to be communicated forthcoming when finalized. Any questions and or concerns please contact the following representatives:

- Children Services <u>TeamChildrens@dwihn.org</u>
- Adult Services AdultInitiatives@dwihn.org

Sincerely,

Cassandra Phipps LPC. LLP. CAADC Cassandra Phipps, LPC, LLP, CAADC Director of Children's Initiatives Detroit Wayne Integrated Health Network



#### STATE OF MICHIGAN

GRETCHEN WHITMER
GOVERNOR

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES LANSING

ELIZABETH HERTEL
DIRECTOR

#### MEMORANDUM

**DATE:** 11/14/24

**TO:** Prepaid Inpatient Health Plans (PIHP) and Community Mental Health

Services Programs (CMHSP) Leadership

**FROM:** Patricia Neitman, MS LLP, Bureau Director  $P/\sqrt{I}$ 

Bureau of Children's Coordinated Health Policy & Supports

**SUBJECT:** Use of CAFAS/PECFAS

The Michigan Department of Health and Human Services (MDHHS) is providing the following information related to Medicaid-funded specialty behavioral health services. Effective October 1, 2024, MDHHS will require Prepaid Inpatient Health Plans (PIHP), Community Mental Health Services Programs (CMHSP), and Certified Community Behavioral Health Clinics (CCBHC) to use the Michigan Child and Adolescent Needs and Strengths (MichiCANS) tool to support eligibility determinations for services, assist with initial determination of needs and strengths, and provide information for appropriate referrals for behavioral health services.

MDHHS has established contractual requirements for the PIHPs to specifically use the MichiCANS to support eligibility determinations for the Waiver for Children with Serious Emotional Disturbances (SEDW) and the 1915(i) SPA. MDHHS is providing the following guidance in advance of the approval of the 1915(i) and SEDW in anticipation of future requirements. PIHPs should continue to use the Child and Adolescent Functional Assessment Scale (CAFAS) and Preschool and Early Childhood Functional Assessment Scale (PECFAS) in addition to the MichiCANS to support eligibility determinations for the 1915(i) SPA and SEDW.

This requirement will remain in place until (a) the Maintenance of Effort requirement for Home and Community-Based Services (HCBS) Medicaid funding under the American Rescue Plan Act (ARPA) expires or (b) MDHHS provides updated guidance. States must comply with certain conditions called "Maintenance of Effort" (MOE) requirements to receive the enhanced Federal funding. This means that state Medicaid agencies cannot make certain changes to their Medicaid or HCBS programs until March 31, 2024 or until the state expends the enhanced Federal funds. MDHHS included additional guidance on the requirements for using MichiCANS, CAFAS, and PECFAS below.

Applicant Status for 1915(i) or SEDW	During the Maintenance of Effort Time Period	After the Maintenance of Effort Time Period
New Applicant	The MichiCANS and CAFAS/PECFAS should be used concurrently.	The MichiCANS will be used exclusively.

Current Enrollee	The MichiCANS will be used during re-evaluation. If the results of the MichiCANS indicated that an enrollee is not eligible, loss of eligibility will be confirmed with the use of the CAFAS/PECFAS.	The MichiCANS will be used exclusively.
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#### Additional Information

- This requirement to use the CAFAS/PECFAS for the 1915(i) and SEDW only applies to the initial assessment and annual re-evaluation, and PIHPs are not required and should not complete quarterly assessments for 1915(i) or SEDW enrollees.
- PIHPs must enter CAFAS and PECFAS data into the Waiver Support Application (WSA) for these programs as part of the enrollment process. The PIHPs must continue to fulfill all other contractual requirements.
- In order to support short term use of the CAFAS and PECFAS, MDHHS has continued the agreement with Multi Health Systems (MHS) to allow for continued, but limited, electronic use of the CAFAS and PECFAS. Data will not be exported from the FAS system and the use of these tools will be used for the 1915(i) and SEDW eligibility determinations only.
- The code chart will be updated during the next quarterly cycle in January to remove the quarterly administration and training requirements.
- Self-training manuals will be provided to each of the 46 CMHSPs upon request and a PECFAS self-training manual will be provided to each of the 10 PIHPs. Additional training information is in the attached memo from MHS, owners of the CAFAS and PECFAS tools.