



# PROVIDER NETWORK NEWS



Disabilities Awareness Month  
2020

## MEDVERSANT

*Ricarda Pope-King, Provider Network Administrator*

Detroit Wayne Integrated Health Network is excited to announce that Medversant Technologies, Inc. a Limited Credentialing Verification Organization (CVO), will be credentialing all Behavioral Health and Substance Use Disorder licensed/certified practitioners and impaneling all providers that receive funds from DWHN. Hegira Programs, Inc. was the provider that participated in the pilot which was designed to address any issues that could impact practitioner credentialing and impaneling. The next cohort group will receive training in all of the Medversant software programs. As we move forward, all providers will receive the training appropriate to their delivery of services. The Credentialing Unit will be providing updates regarding the rollout. Please submit questions or concerns to [pihpcredentialing@dwhn.org](mailto:pihpcredentialing@dwhn.org)

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# PROVIDER NETWORK MANAGERS

## Provider Network Manager Contact Information

Provider Network Manager	Contract Type	Telephone Number (313-344-9099)	Email Address
Lisa Dunn	Outpatient Children w/ SED, Outpatient Adults w/ SMI, Fiscal Intermediaries – The Arc of Western Wayne County	X3652	ldunn1@dwihn.org
Melissa Eldredge	Crisis/Access Centers, MI Health Link, Outpatient Adults w/ SMI, Fiscal Intermediaries – Personal Accounting Services, Inc.	X3603	meldredge@dwihn.org
Tania James	HUD	X3516	tjames@dwihn.org
Sharon Matthews	Outpatient Adult & Children w/ IDD, Outpatient Children w/ SED, Outpatient Adults w/ SMI	X3601	smatthews@dwihn.org
Shana Norfolk	Autism, Inpatient Psychiatric, Outpatient Adults w/ SMI	X3673	snorfolk@dwihn.org
Stephen Ogundipe	Grant, Peer Services, Outpatient Adult & Children w/ IDD, Outpatient Children w/ SED, Outpatient Adults w/ SMI, Fiscal Intermediaries – Personal Accounting Services, Inc.	X3124	sogundipe@dwihn.org
Nicole Rogers	Residential, Fiscal Intermediaries – The Arc of Northwest Wayne County	X3323	nrogers@dwihn.org
Felicia Simpson	SUD Treatment & Prevention, Fiscal Intermediaries – The Arc of Western Wayne County	X3130	fsimpson@dwihn.org
Esther Twitty	Specialty/Support, Outpatient Adults w/ SMI, Fiscal Intermediaries – Money Minders Plus, Inc.	X3221	etwitty@dwihn.org
Ortheia Ward	Grant, Multicultural, Residential, Fiscal Intermediaries – Money Minders Plus, Inc.	X3138	oward1@dwihn.org
D'Shanna Watson	Residential, Fiscal Intermediaries – The Arc of Northwest Wayne County	X3582	dwatson@dwihn.org
<b>Provider Network Administrator – Interim MCO Director June White</b>	N/A	X3635	Jwhite1@dwihn.org

## Deputy CEO/COO Corner

*Eric Doeh, Deputy Chief Executive Officer/Chief Operating Officer*

### Specialty Integrated Plan



The Michigan Department of Health and Human Services (MDHHS) recently announced a new proposal called Specialty Integrated Plan (SIP) to promote integration of care between behavioral health and physical health. MDHHS introduced four potential SIP models or options:

- 1) Public-led: Statewide association of Community Mental Health Service Providers (CMHSPs) and managed care and provider partners;
- 2) Plan-led: Medicaid health plan and behavioral health and provider partners;
- 3) Provider-led: Association of providers and hospital system and managed care partners;
- and 4) Public/Private Partnership: Collaboration among a Medicaid health plan, CMHs, Federal Qualified Health Centers (FQHCs), and regional providers.

MDHHS Director Robert Gordon shared a very aggressive timeline with an implementation date of October 2022. Gordon also expressed that MDHHS' goal is to preserve and strengthen the community benefit system through the current Centers for Medicare and Medicaid Services system. He said that changes will occur to promote a more robust provider network and consistency of service and benefits throughout the State.

Although not overtly expressed by MDHHS, the newly formed SIP will eliminate Prepaid Inpatient Hospital Plans (PIHPs) and work directly with health care providers and Community Mental Health Organizations for the delivery of integrated care.

In short, the SIP will function as a Managed Care Organization (MCO) and will be a full risk-bearing entity that includes the management of profits and losses. In addition, the new SIP, as an MCO, will be required to maintain a substantial risk reserve of approximately 20-30% of annual spend. The current public system does not allow for high levels of reserves. Special consideration will be required to allow the build-up of reserves for public entities to participate as a SIP.

There are several concerns that have been expressed. The proposal from MDHHS requires multiple statewide SIPs that will compete against each other. As a result, this will require each SIP to have a provider network and infrastructure for the entire State. Moreover, the new proposal will eliminate the ten 10 PIHPs in the State and promote SIP partnerships with CMHSPs.

DWIHN will continue to work with MDHHS, the people we serve, the provider network, key legislators and stakeholders as we listen and share our concerns about the proposal and the potential impact it will have on community mental health.

Eric Doeh - Deputy CEO/COO

# SIMPLY COMPLIANCE

## A CONVERSATION ABOUT THE PROCESS OF ENHANCING COMPLIANCE

*Bernard K. Hooper, Corporate Compliance Officer*

The Corporate Compliance Officer annually solicits recommendations of critical compliance issues and prioritizes them to identify matters that are essential to our growth and success in the coming year. For this year, the Compliance Plan focus on two initiatives: 1) The drafting of IPOS and Behavioral Treatment Plan documents that are truly “person centered”; and 2) Consistent enforcement of disciplinary policies. Quality Improvement, Utilization Management and direct care workers have all expressed a genuine concern regarding the formulaic language in the IPOS. Often, IPOS documents contain a broad recipe of services that seem to be tailored to the diagnosis and not the individual. The array of services must reflect the medical necessity of the individual as well as evidence based strategies linked to that person’s goals and objectives.



Further, goals and objectives must be personal to the behavior and circumstances of the individual. For example, we all agree that an individual in SUD treatment should “work to change environmental triggers” but the IPOS should comprise a goal that is personal to the individual such as, “avoid known behaviors and individuals [such as...] that have repetitive links to substance abuse.” Similarly, the IPOS and any associated behavioral treatment plan must comprise consistent, plain language regarding the limitation that must be present in an individual’s environment. Of course, Case Managers play a critical role in the drafting of the IPOS but they are not alone in shouldering the responsibility to insure that providers and direct care workers deliver effective service. Together, we have worked for a year to correct technical issues such as progress notes and CPT Code issues. Various departments of DWIHN have required corrective action plans with the understanding that providers will act in good faith to achieve compliance. Confronted with deliberate or negligent non-compliance despite education, quality improvement initiatives, and auditing and monitoring, we recognized that our compliance plan lacked accountability.

# **SIMPLY COMPLIANCE**

## **A CONVERSATION ABOUT THE PROCESS OF ENHANCING COMPLIANCE CONTINUED**

*Bernard K. Hooper, Corporate Compliance Officer*

Corporate Compliance in concert with the Legal department is working on a strategy to use remedies set forth in the Provider Contracts, such as withholding payments and discontinuing referrals, to facilitate timely responses from providers subject to corrective action plans. DWIHN must “maintain written policies that apply appropriate disciplinary sanctions on those officers, managers, supervisors, and employees who fail to comply with the applicable statutory and Medicaid program requirements, and with [DWIHN’s] written standards of conduct. These policies must include not only sanctions for actual noncompliance, but also for failure to detect non-compliance when routine observation or due diligence should have provided adequate clues or put one on notice. In addition, sanctions should be imposed for failure to report actual or suspected non-compliance.” DWIHN will consider mitigating factors such as the degree of intent, and whether the violation comprises a single incident or several purposeful or known incidents.

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## **CUSTOMER SERVICE**

### **DATES OF CV MEETINGS - 2020**

The Constituents’ Voice (also known as the “CV”) is the DWIHN consumer advisory group. Meetings are held on the 3rd Friday of the month from 10am-12pm, DWIHN, 2nd Floor Conference Room.

March 20, 2020

April 17, 2020

May 15, 2020

June 19, 2020

July 17, 2020

August 21, 2020

September 18, 2020

October 16, 2020

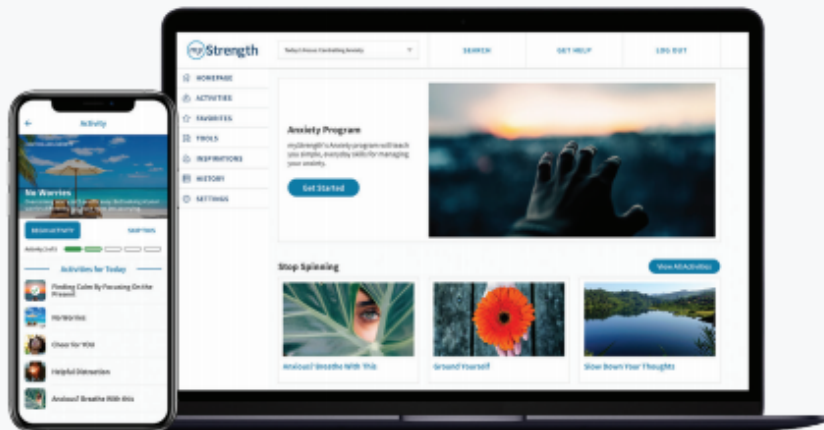
November 20, 2020

December (TBD)

# PERSONAL SUPPORT FOR YOU

## Recharge, Refresh and Improve Your Mood with myStrength

Now you can use myStrength’s web and mobile tools to support your goals and well-being. Learning to use myStrength’s tools can help you overcome the challenges you face and stay mentally strong. And it’s all safe, secure and personalized – just for you.



### What myStrength users are saying:

*“It’s nice to have self-guided help that is so accessible.”*

*“myStrength gives me back some of the ‘light’ I had lost.”*

### SIGN UP TODAY

1. Visit [www.mystrength.com](http://www.mystrength.com) and click on “Sign Up,”
2. Enter the **Access Code** marked below.
3. Complete the myStrength sign-up process and personal profile.

**DWIHNc**

Go Mobile! Download the **myStrength** mobile app, log in, and get started today.

**myStrength**

is presented by



# STANDARDIZED IPOS



## **Detroit Wayne Integrated Health Network**

707 W. Milwaukee St.  
Detroit, MI 48202-2943  
PHONE: 313-833-2500  
[www.dwihn.org](http://www.dwihn.org)  
TDD: (800)630-1044 RR/TDD: (888)339-5588

January 22, 2020

### **Dear Provider Network Partners:**

The Detroit Wayne Integrated Health Network (DWIHN) recently introduced and trained providers on the standardized Individual Plan of Service (IPOS) in our MH-WIN system with our Health Information Exchange (HIE) project. The purpose of the standardized IPOS is to ensure DWIHN has consistent system-wide compliance with the Mental Health Code and contains the required elements as described in DWIHN IPOS policy.

Based on feedback about using the standardized IPOS process in MH-WIN and the impact on providers and potentially the people we serve, the standardized IPOS will be transitioned in the following manner:

- **Providers on the new Full HIE platform** will continue to use their current system which will send the Standardized IPOS and authorizations via the HIE process.
- **Providers on the old HIE platform** will continue to use their current system of uploading a PDF of the IPOS which includes authorizations.
- **Providers not on a PCE platform**
  - Providers who are not on PCE system but will be **new PCE clients** and are scheduled to go on PCE system by 10/1/2020 will continue to use their current system of uploading a PDF of the IPOS which includes authorizations.
  - **Providers who will not be on PCE system** will have to use the Standardized IPOS in MHWIN until they establish an electronic way of transmitting IPOS from their system.

Please direct any clinical questions regarding the standardized IPOS to Lucinda Brown, Network Provider Program Administrator (email: [lbrown@dwihn.org](mailto:lbrown@dwihn.org)). Please contact your PCE Developer for questions regarding provider system readiness and HIE platform.

Sincerely,



Eric Doeh, JD, CHC  
Deputy Chief Executive Officer/Chief Operating Officer

Cc: Stacie Durant, Chief Financial Officer  
Dana Lasenby, Chief Clinical Officer  
Manny Singla, Chief Information Officer

### **Board of Directors**

Bernard Parker, Chairperson  
Dora Brown-Richards  
Kevin McNamara

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Dorothy Burrell  
William T. Riley, III

Timothy Killeen, Treasurer  
Lynne F. Carter, MD  
Kenya Ruth

Ghada Abdallah, RPh, Secretary  
Angelo Glenn  
Dr. Cynthia Taueg

**Willie E. Brooks, Jr., President and CEO**





## DWIHN Wants You to Know

As a valued partner of DWIHN, you have access to the latest and greatest information regarding topics that help you to provide excellent service to the members we serve.

Check out our website for information on the following and more:

- ✚ DWIHN Member Handbook
- ✚ DWIHN Provider Manual
- ✚ DWIHN Provider Directory
- ✚ Members Rights and Responsibilities
- ✚ Member Grievance and Appeal Information
- ✚ Provider Appeal Information
- ✚ Required Trainings for Staff
- ✚ Clinical Practice Guidelines
- ✚ HEDIS Measures
- ✚ Medical Necessity Criteria
- ✚ Complex Case Management Program
- ✚ Information about DWIHN's Quality Improvement Program, including goals and annual results



## DWIHN Affirmative Statement

**The information below applies to all Providers and Practitioners**

- ✚ DWIHN, Crisis Service Vendors and Access Center practitioners and employees who make Utilization Management decisions understand the importance of ensuring that all consumers receive clinically appropriate, humane and compassionate services of the same quality that one would expect for their child, parent or spouse by affirming the following:
  - UM decision-making is based only on appropriateness of care, service, and existence of coverage.
  - DWIHN, the Access Center, and Crisis Service Vendors do not reward practitioners or other individuals for issuing denials of coverage or service care.
  - No Physicians or any other staff making UM decisions are rewarded for issuing denials of coverage or service or reducing the provision of care which is deemed medically necessary.
  - Practitioners may freely communicate with members about their treatment, regardless of benefit coverage limitations."

For more information or to access the latest Member Handbook, Provider Directory or Provider Manual:

- ✚ Online: go to DWIHN's website, [www.DWIHN.org](http://www.DWIHN.org)
- ✚ Call or email: your DWIHN Provider Network Manager at 313-344-0692 or email the Managed Care Operations Unit at [pihpprovidernetwork@dwmha.com](mailto:pihpprovidernetwork@dwmha.com)
- ✚ Call: DWIHN Customer Service at 888-490-9698





## WELLNESS TOOLS FOR YOUR MEMBERS



- See the Member tab, at [www.DWIHN.com](http://www.DWIHN.com), for health management tools to assist your members and staff in tracking their health goals.
- A free Health & Wellness app is available at [www.myStrength.com](http://www.myStrength.com) (Access code is: **DWIHNc**)
- MyStrength is a secure tool for members and staff to track their personal health records

### DWIHN Members' Rights and Responsibilities Statement

The information below is copied directly from DWIHN's Member Handbook so that you may copy and share this information with your members, as needed.

We are committed to maintaining a mutually respectful relationship with our members and providers. DWIHN Members' Rights and Responsibilities statement is provided to assist you in understanding and exercising your rights while assessing behavioral health care services in Detroit-Wayne County. This statement helps to minimize potential misunderstandings and promote compliance with all applicable statutory and regulatory requirements. Understanding your rights and responsibilities will help you to make informed decisions about your healthcare.

#### You have the right to:

- Receive information about DWIHN, its Services, its Practitioners, and Providers, and Your Rights and Responsibilities.
- Be treated with respect and recognition of your dignity and right to privacy.
- Participate with Practitioners in making decisions about your health care.
- A candid discussion of appropriate or medically necessary treatment options for your conditions, regardless of cost or benefit coverage and to freely communicate with your providers and without restriction on any information regarding care.
- Voice complaints or appeals about DWIHN or the care provided.
- Make recommendations regarding DWIHN's Members' Rights and Responsibilities policy.

#### You have a responsibility to:

- Provide, to the best of your knowledge, accurate and complete information regarding your medical history, including: present and past illnesses, medications, hospitalizations, etc. to DWIHN and its Practitioners and Providers needed in order to care for you.
- Follow your treatment plan of care and instructions. The plan of care is to be agreed upon by you and your provider.
- Ask questions about your care. This will help you to understand your health problems and participate in developing mutually agreed-upon treatment goals, to the degree possible.

**For additional information and a complete list of our Members' Rights and Responsibilities statement, please contact Customer Service at 888-490-9698.**

# FUTURE MEETINGS

June White, Provider Network Administrator

## SAVE THE DATE!

The Michigan Department of Health and Human Services &  
The Community Mental Health Association of Michigan Present:

# SELF-DETERMINATION CONFERENCE:

May 5, 2020 | 8am – 5pm



### Conference Objective:

This conference will broaden and deepen your understanding of the crucial elements of Self-Direction and the importance of Self-Determination in Behavioral Health. It will provide training and technical assistance on the topics of Effective Person-Centered Planning, Independent Facilitation, Supported Decision-Making, Fiscal Intermediaries, How to Structure Self-Directed Service Arrangements, Budget Development, and more. Dynamic presenters and speakers will reenergize your commitment to the principles and practice of Self-Determination!

### Location:

Lansing Center  
333 E Michigan Ave  
Lansing, MI 48933

### Who Should Attend:

This conference contains content tracks appropriate for all individuals who receive services, family members, case managers, supports coordinators, clinicians, CMH administrative and clinical staff, providers, HCBS and waiver coordinators, fiscal intermediaries and independent facilitators.

*The Michigan Department of Health and Human Services, through the Community Mental Health Association of Michigan has provided funding for this initiative through a Federal Community Mental Health Block Grant.*

# ONLINE TRAININGS ARE AVAILABLE



Provider trainings are available at Detroit Wayne Connect, a continuing education platform for stakeholders of the behavioral health workforce. We strive to provide a variety of live and online courses.

Log on at [dwctraining.com](http://dwctraining.com).

SUD Trainings are available on Improving MI Practices posted at [www.dwihn.org](http://www.dwihn.org).



For questions or concerns on Impaneling, Credentialing, Contracting and Claims, please call our Provider Information Helpline at (313)-344-0692 or email: [pihprovidernetwork@dwihn.org](mailto:pihprovidernetwork@dwihn.org)

## **Detroit Wayne Integrated Health Network**

707 W. Milwaukee St.  
Detroit, MI 48202  
[www.dwihn.org](http://www.dwihn.org)

## **24-Hour Crisis Information and Referral**

800-241-4949  
TDD: 866-870-2599

## **Customer Service**

888-490-9698 or 313-833-3232  
TDD/TTY: 800-630-1044  
Fax: 313-833-2217 or 313-833-4280

## **Recipient Rights Office**

888-339-5595  
TDD/TTY: 888-339-5588



[@DetroitWayneIHN](https://twitter.com/DetroitWayneIHN)