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Owner:	<i>Jacquelyn Davis: Clinical Officer</i>
Policy Area:	<i>Crisis Services</i>
References:	<i>NCQA Q17</i>

## Eligibility and Screening

### POLICY

It is the policy of the Detroit Wayne Integrated Health Network (DWIHN) that screening be offered to anyone requesting services delivered by DWIHN provider networks, via a centralized access point which determines eligibility for services.

### PURPOSE

This policy establishes the standards and procedures for consumer eligibility and screening to services delivered through DWIHN provider networks.

### APPLICATION

1. This policy shall apply to all directly-operated and contract network providers of the DWIHN. Who is required to implement and adhere to this policy: DWIHN Board, All DWIHN Staff, Contractual Staff, Network Providers, CVO, Access Center
2. Who does this policy serve: Adults with Mental Illness (AMI), Children with Serious Emotional Impairment/ Disturbance (SEI/SED), Persons with Intellectual and/or Developmental Disorders (I/DD), and persons with Substance Use Disorders (SUD)
3. What service line does this policy impact: MI-HEALTH LINK, SUD, Autism, Medicaid

### KEY WORDS

1. Access Screening
2. Assessments
3. Eligibility
4. Waiting List

### STANDARDS

1. **Screening**
  - a. Access to screening is available 24 hours a day, seven days a week to anyone free of charge to the requesting individual.

- b. The Access Center will be welcoming and accessible.
- c. Screening will be conducted by a centralized access center telephonically via a toll-free number. Face to face screening is available on request. Translation services will be made available, real time, upon request at no charge to the member.
- d. The contracted vendor will have policies and procedures that comply with DWIHN contractual requirements, policies and procedures.
- e. The screening shall be sufficient to determine:
  - 1. Eligibility for services;
  - 2. Medical necessity, or need, for services; and
  - 3. Need for additional assessments.
- f. If the screening determines the individual may be eligible, a referral for an assessment is made to an appropriate provider within the DWIHN provider networks, or to an out-of-network provider where appropriate. Choice of provider will be offered to the consumer/guardian. Intake Assessments will be completed by the provider as per the Clinical Assessments Policy.
- g. If the screening determines the individual is not eligible for DWIHN delivered services, a referral to an appropriate provider or benefits manager will be offered to the person requesting services. A follow-up call will also be offered to the person requesting services.
- h. The requestor will be informed, verbally at the time of the determination, as well as in writing, of their second opinion and due process rights.

**2. Eligibility:**

- a. Eligibility for services and supports is according to the Michigan Department of Health and Human Services (MDHHS) contract with the Detroit Wayne Integrated Health Network (DWIHN); the most recent MDHHS Medicaid Provider Manual; the Michigan Mental Health Code; MDHHS Administrative Rules; and other applicable contracts, laws and regulations.
  - 1. Priority is given, as per the above, to: AMI, SED, I/DD and SUD populations.
  - 2. When the priority population needs are met, then other populations will be admitted as funding allows.
- b. With the exception of those requiring services to ameliorate emergency situations, services are available to residents of Wayne County, or those for whom Wayne County has been determined to be the County of Financial Responsibility (COFR).

**3. Waiting List**

- a. It is the policy of DWIHN that sufficient service capacity be maintained throughout the provider network. As such, waiting lists are not acceptable.
- b. Contracted management entities (such as Access Center, Direct Contracted Network Providers, etc.) must ensure that consumers are referred to alternative services and/or providers that meet the medically necessary services or assessments when the network is unable to meet a consumer's needs within the time frames as set forth by contract.

**4. Assignment to a Clinically Responsible Service Provider (CRSP)**

- a. Once an individual is determined to be eligible for services, they will choose a Clinically Responsible Service Provider (CRSP) to coordinate their treatment plan.

# QUALITY ASSURANCE/IMPROVEMENT

The DWIHN shall review and monitor contractor adherence to this policy as one element in its network management program, and as one element of the QAPIP Goals and Objectives.

The quality improvement programs of direct contractors and their subcontractors must include measures for both the monitoring of and the continuous improvement of the programs or processes described in this policy.

# COMPLIANCE WITH ALL APPLICABLE LAWS

DWIHN staff, direct contractors and subcontractors are bound by all applicable local, state and federal laws, rules, regulations and policies, all federal waiver requirements, state and county contractual requirements, policies, and administrative directives, as amended.

# LEGAL AUTHORITY

1. Michigan Department of Health and Human Services, Medicaid Provider Manual
2. Michigan Department of Health and Human Services-DWIHN Managed Specialty Supports and Services Contract
3. Michigan Mental Health Code, MCL 330.1001 et seq.

# RELATED POLICIES

1. [Access Policy](#)
2. [Assessment Policy](#)

# RELATED DEPARTMENTS

1. Claims Management
2. Clinical Practice Improvement
3. Compliance
4. Customer Service
5. Information Technology
6. Integrated Health Care
7. Legal
8. Managed Care Operations
9. Quality Improvement
10. Recipient Rights
11. Substance Use Disorders

## Attachments

No Attachments

## Approval Signatures

Approver	Date
Dana Lasenby: Chief Clinical Officer	04/2020
Allison Smith: Project Manager, PMP	04/2020
Eric Doeh: Chief Network Officer	04/2020
Bernard Hooper: Compliance Officer	03/2020
Jacquelyn Davis: Director of Access and Crisis Services	02/2020
Callana Ollie: Deputy Chief Legal Counsel	02/2020
Kimberly Flowers: Provider Network Clinical Officer	02/2020
June White: Provider Network Administrator	02/2020
Mignon Strong: Deputy Director, Recipient Rights	02/2020
Brooke Blackwell: Chief of Staff	02/2020
Manny Singla: CIO	01/2020
Stacie Durant: CFO Management & Budget	01/2020
Jody Connally: Director, Human Resources	01/2020
crystal Palmer: Director, Children's Initiatives	01/2020
Shareace Hill: Director of Purchasing	01/2020
Andrea Smith: Director of Workforce Development	01/2020
Michele Vasconcellos: Director, Customer Service	01/2020
Darlene Owens: Director, Substance Use Disorders, Initiatives	12/2019
April Siebert: Director of Quality Improvement	12/2019
Tina Forman: Director of Integrated Health Care	12/2019
Shirley Hirsch: Director of Residential Services	12/2019
Tiffany Devon: Director of Communications	12/2019
Gail Parker	12/2019
Dana Lasenby: Chief Clinical Officer	12/2019