



## Outpatient Provider Meeting Q&A

Friday, August 5, 2022

Virtual Meeting

10:00am –11:00am

1. My understanding was that a reassessment was needed if the client had not had billable services for 90 days. Is it now 120 days? Thank you!
  - a. Members who do not receive billable service in 90 days are considered new per MDHHS standard.
  - b. Your understanding is correct. A reassessment is required for persons that have not had a billable service in 90 days. Please reach out to ereynolds@dwihn.org if you have additional questions.
  
2. If we have a new hire coming in who is transferring from another provider in the DWIHN network, does that new hire have to complete the Recipient Rights training when he's already been up to date on his trainings when working with the other provider?
  - a. It really depends on the situation. Please email ORR Trainers at orr.training@dwihn.org to inquire about this specific employee. Send us the employees name, DOB and MHWIN staff record # and we will investigate. Thank you.
  
3. Will rights to Bias training as staff that have a LARA license are having trouble finding a class.
  - a. Hello, Orr Trainers do not currently offer Bias training. Thank you.
  
4. Does the RRT on DW Connect be used in lieu of attending this training?
  - a. All employees in the DWIHN network must attend NHRRT within 30 days of hire. Then, the NHRRT certificate remains valid as long as they do not miss more than 2 consecutive Recipient Rights Annual update trainings at [www.dwctraining.com](http://www.dwctraining.com)
  
5. It might help cut down on no call no shows to ORR training if there was a way in MHWIn for us to cancel staff who quit or are no longer available to come to the training. It is cumbersome now to send emails or call ORR training to cancel. Just a suggestion. Thanks!
  - a. Thank you for the suggestion.  
We do currently require Providers to email ORR Trainers to remove a participant from NHRRT once they are enrolled.

6. Hello, if we get new staff and they have previously completed new-hire RR training with another DWIHN provider, do they need to retake it?
  - a. All employees in the DWIHN network must attend NHRRT within 30 days of hire. Then, the NHRRT certificate remains valid as long as they do not miss more than 2 consecutive Recipient Rights Annual update trainings at [www.dwctraining.com](http://www.dwctraining.com)  
To inquire about a specific employee please email ORR Trainers at [orr.training@dwihn.org](mailto:orr.training@dwihn.org) Thank you.
7. We had an individual attend New Hire RR training, but they should out of compliance in TAP because they have not taken Recipient Rights Training - Annual on DWC. Do new hires need to take both Recipient Rights trainings? How will the non-compliance issue be resolved?
  - a. All employees in the DWIHN network must attend NHRRT within 30 days of hire. Then, the NHRRT certificate remains valid as long as they do not miss more than 2 consecutive Recipient Rights Annual update trainings at [www.dwctraining.com](http://www.dwctraining.com)  
To inquire about a specific employee please email us with the employee name, DOB and MHWIN # and we can investigate.  
If an employee is out of compliance they can take NHRRT to get back into compliance moving forward.
8. so there is no DCW training transcript required anymore?
  - a. The DWC trainings are required by DWIHN, and are required in addition to the Medicaid requirements discussed.
9. Can the refresher trainings/trainings be recorded and sent out to agencies once completed for us to share with staff?
  - a. Regarding Recipient Rights Annual Update training: This training is available at [www.dwctraining.com](http://www.dwctraining.com) Thank you.
10. If we can't use secure email to return our pre contract documents, how do we ensure our personal, as well as our Board members personal information is not being compromised? There is a lot of sensitive, personal and identifying information on those documents.
  - a. You can always use MHWIN messaging to share documents . But secured email should be ok. Please send me email directly on this . Thank you Manny Singla
11. Will the Drop in Centers be involved in ORR Site Reviews?
  - a. Yes, if they are contracted with DWIHN.
12. What is Dayna Stevens email?
  - a. [dstevens@dwihn.org](mailto:dstevens@dwihn.org)
13. Can you share again, the required insurance coverage areas?
  - a. Please see attached PDF copy of required insurance. All insurances must be valid for the entire contract period for FY 23. Example: if your insurance expires 12/1/2022, it is expected that you provide an updated insurance certificate from 12/2/2022 to 12/2/2023

14. Will DWIHN consider extending the period of submitting a claim from the date of service within 90 days to 190 days? This is what most payers require.
  - a. Due to reporting requirements set forth by MDHHS, this is not an option.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

DATE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).**

PRODUCER

CONTACT NAME:

PHONE (A/C, No, Ext):  
E-MAIL:

FAX (A/C, No):

INSURANCE COMPANY  
ADDRESS/CONTACT INFO

ADDRESS:

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURED

NAME OF INSURED and DBA

ADDRESS

INSURER A:

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURER F:

**COVERAGES****CERTIFICATE NUMBER**

Commercial General Liability  
may only be written by a US Company

**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE

INSURED NAMED ABOVE FOR THE POLICY PERIOD OR DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE IS SUBJECT TO ALL THE TERMS,

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
X	COMMERCIAL GENERAL LIABILITY					\$ 1,000,000
	CLAIMS-MADE OCCUR	X				EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) \$
						MED EXP (Any one person) \$
A	GEN'L AGGREGATE LIMIT APPLIES PER: PRO- POLICY JECT LOC OTHER:					PERSONAL & ADV INJURY \$
						GENERAL AGGREGATE \$ 3,000,000
						PRODUCTS COMP/OP AGE \$
						COMBINED SINGLE LIMIT \$
						(Ea accident) \$ 1,000,000
A	AUTOMOBILE LIABILITY					BODILY INJURY (Per person) \$
	ANY AUTO ALL OWNED SCHEDULED AUTOS HIRED AUTOS	X				BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (Per accident) \$
						\$
	UMBRELLA LIAB OCCUR					EACH OCCURRENCE \$
	EXCESS LIAB CLAIMS-MADE					AGGREGATE \$
	DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					\$
						\$
B	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				E.L. EACH ACCIDENT \$
						E.L. DISEASE - EA EMPLOYEE \$
						E.L. DISEASE - POLICY LIMIT \$
A	Professional liability	X				\$ 1,000,000 per occurrence \$ 3,000,000/ aggregate

Policy Number

Effective Date

10/1/20xx or earlier

Expiration after contract start date

Minimum Coverage

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Detroit Wayne Integrated Health Network is an Additional Insured with respect to General Liability, Professional Liability and Automobile liability as required by contract.

**CERTIFICATE HOLDER**

DETROIT WAYNE INTEGRATED HEALTH NETWORK  
707 W. Milwaukee  
Detroit MI 48202

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE