



Integrated Health Network

707 W. Milwaukee St. Detroit, MI 48202-2943 Phone: (313) 833-2500 <u>www.dwihn.org</u>

> FAX: (313) 833-2156 TTY: 711

CRSP/Outpatient Provider Meeting Friday, February 14, 2025 Virtual Meeting 10:00 am –11:00 am Agenda Zoom Link: <u>https://dwihn-org.zoom.us/j/93220807823</u>

- I. Welcome/Introductions
- II. General Fund Melissa Moody
- III. Open Consumers/No Service-Alison Gabridge/Impact on BH TEDS-Dorian Johnson (Pages 3-9)
- IV. IT- Keith FramboCyber Security Assessment
- V. Compliance Updates John Shafer (Pages 10-15)
- VI. Claims Quinnetta Robinson (Pages 16-20)
 - Billing Resources
- VII. Recipient Rights Edward Sims
 - ORR Training & Monitoring (Pages 21-25)
- VIII. Access Call Center Yvonne Bostic
 - Appointment Availability- Jacquelyn Davis
 - Updating Appointment status in MHWIN
 - CRSP Change Request
 - Disability Designation Change Request (Pages 26-33)

Board of Directors

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James E. White, President and CEO

SCILLING TO COME

- IX. Children's Initiative Cassandra Phipps
 CAFAS/PECFAS/MichiCANS Update (Pages 34-36)
- X. Credentialing Updates Rai Williams
- XI. Administrative Updates James White, President and CEO
- XII. Questions
- XIII. Adjourn



Open Consumers/No Service and BH TEDS

Alison Gabridge LMSW CAADC-Adult Initiatives Dorian Johnson, LLPC – Customer Service February 14, 2025



Dangling Admissions

-BH TEDS Admissions to the network with no sort of update/discharge in the last 15 months

-MDHHS is tracking and provides us a report every month; currently at over 7,000





How Can You Help?

Monitor your active members and properly close out members who have not received service in 120 days

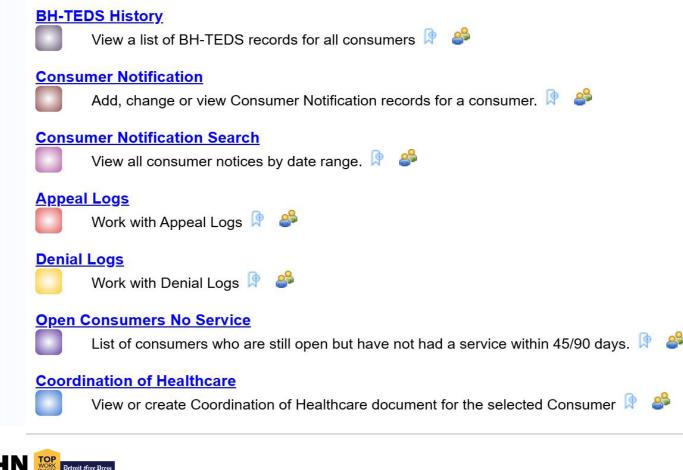


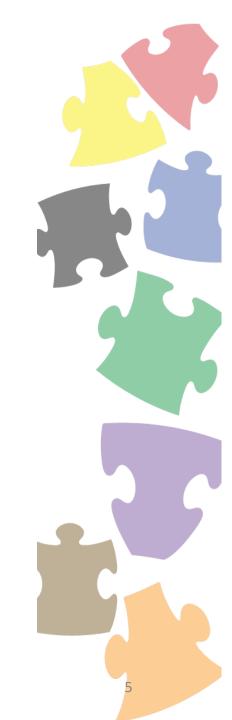
What Does "Properly Close" mean? Follow the DWIHN Re-engagement and Case Closure Policy and Procedure

https://dwmha.policystat.com/policy/15167 810/latest#autoid-xa2jp



If documented attempts to re-engage the member have failed, it is time to disenroll





Open Consumer/No Service

-If they are MI Health Link, they will not show up on the list.

- -If they have not had a billable service in last 120 months, they should show.
- -This screen will prompt you to complete the discharge BH TEDS during the disenrollment process.



Questions/Concerns?

Please reach out to Alison Gabridge in Adult Initiatives <u>agabridge@dwihn.org</u> or Dorian Johnson in Customer Service djohnson@dwihn.org





CORPORATE COMPLIANCE DEPARTMENT

Provider Meeting Updates February 14th, 2025

January 2025

□ Frequent noncompliance issues:

- Billing for services not rendered
 - 42 CFR 455.2 "fraud means an intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to themself or some other person."
- Rendering services not credentialed to perform
 - 42 CFR 455.2 "fraud means an intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to themself or some other person."

• Failure to create/update staff record in MHWIN

• DWIHN's Staff File Maintenance policy states, "All contracted service providers must update its staff record in the DWIHN main information system MH-WIN."

COMPLIANCE UPDATES

January 2025 Continued

- No authorizations for services rendered on the IPOS
 - 42 CFR 441.725 Person-Centered Service Plan (b) "The person-centered service plan. The person-centered service plan must reflect the services and supports that are important for the individual to meet the needs identified through an assessment of functional need, as well as what is important to the individual with regard to preferences for the delivery of such services and supports, (5) Reflect the services and supports (paid and unpaid) that will assist the individual to achieve identified goals, and the providers of those services and supports, including natural supports.
- Staff/Agency credentialing
 - Detroit Wayne Integrated Health Network Organizational Credentialing/Re-Credentialing policy, Standards (1) "All behavioral health and substance use disorder organizations (inpatient, residential (treatment and Adult Foster Care- AFC) and ambulatory) seeking to contract with Detroit Wayne Integrated Health Network must be credentialed prior to providing services to Wayne County Medicaid eligible residents, dual eligible (Medicaid/Medicare) residents, and uninsured residents within its service delivery network".

COMPLIANCE UPDATES

HOW TO REMAIN IN 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.
- **Policies and Requirements:** Regularly review DWIHN policies to ensure you are up to date on contract requirements and regulatory changes.
- 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.

When and Who to contact?

- If you have a question pertaining to an active investigation?
 - Your designated investigator is listed in the notification letter sent to your agency, along with their name and contact details.
- If you have a question pertaining to a closed case. This means you have submitted your CAP, and no further action is required from your agency?
 - Please contact John Shafer, Compliance Special Investigations Unit Administrator, <u>Jshafer@dwihn.org</u>
- If you have concerns about sanctions or actions being taken against your agency.
 - Please contact Sheree Jackson, Vice President of Compliance, Sjackson@dwihn.org.

Questions:



Claims Department

Quinn Robinson Claims Manager



Helpful Billing Resources

We encourage all providers to take advantage of the many helpful resources found on our website at <u>https://www.dwihn.org</u> and click the "Providers" tab to access billing tools such as

- Claim Reconsideration Form
- Rate Charts
- SFY 2025 Behavioral Health Code Charts & Provider Qualifications





Bulletins

Home > For Providers > Billing and Authorizations > DWIHN Coding Manual Bulletins

Providers can visit DWIHN.org to access all the updated bulletins.

All previously dispersed bulletins can be found on the website so, revisit as much as required.

DWIHN Coding Manual Bulletins

2025

Bulletin 25-001: Non-ABA Assessment Code

Last Updated: Dec 2, 2024 File Size: 214.05 KB

Bulletin 25-002: Medicaid Coverage of Community Health Worker (CHW) / Community Health Representative (CHR) Services Last Undated: Dec 11, 2024 File Size: 351.89 KB

Bulletin 25-003: EPSDT and Family Training

Last Updated: Jan 8, 2025 File Size: 223.41 KB







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BULLETIN NUMBER:	25-001
ISSUED/REVISED:	11/27/2024
EFFECTIVE:	10/01/2024
SUBJECT:	Behavior Identification Assessment (Functional Behavior Assessment) for Non-Autism Services (<i>NEW H0031 6Y cpt code</i>)

SERVICE AFFECTED: 97151 – Functional Behavior Assessment (Children and Adult Services)

BACKGROUND:

Effective January 2023 the Michigan Department of Health and Human Services (MDHHS) replaced H0031 FA cpt code for Functional Behavior Assessments (FBA) with the 97151 cpt code to be billed for non-ABA beneficiaries.

PROCEDURE:

Effective 10/1/2024 MDHHS is replacing 97151 cpt code for Behavior Identification Assessment (BTP) for non-ABA members with H0031 6Y.

AUTHORIZATIONS & CLAIMS:

H0031 6Y unit type is an "encounter" and does not require an authorization. When filing claims please ensure both the code, the 6Y modifier, and the appropriate staff credentialing modifiers are entered. *Refer reference section below for additional information.*

CHART:

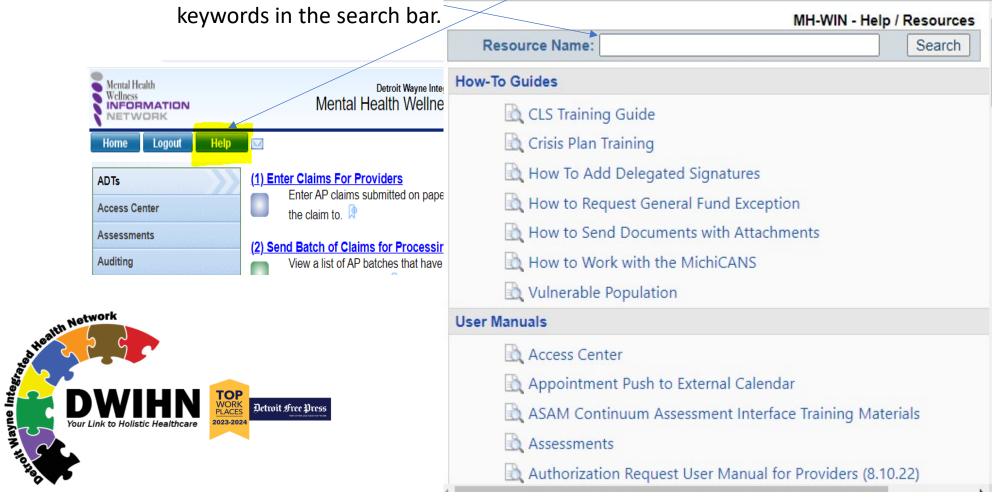
Procedure Code	Description
H0031 6Y	Behavior Identification Assessment (BTP) for non – ABA members:
	Behavior identification assessment includes face-to-face, standardized and non-
	standardized assessments, and direct behavior observations to assess skills across
	various domains (e.g., social skills, behavior, daily living skills, communication).



MHWIN: Guides and Manuals

Providers can also access billing guides and manuals via the MHWIN portal.

They can be found by clicking the "Help" tab in MHWIN and searching with





Provider Claims Training

Providers can request additional claims training or refreshers as needed by sending a request to the <u>PIHPclaims@dwihn.org</u> mailbox.





DETROIT WAYNE INTEGRATED HEALTH NETWORK

800-241-4949 www.dwihn.org



ORR Training & Monitoring Agenda Provider Meeting (02/14/2025)



Updates: ORR Training (February 2025)

1. The days that NHRRT classes are conducted was <u>changed</u> beginning last month in January 2025. NHRRT will be held via Zoom on <u>Tuesday, Wednesday & Thursday</u> of each week. The evening NHRRT will continue to be conducted on the 2nd Tuesday of each month from 4pm-6pm...

2. The addition of a <u>2nd evening NHRRT</u> class per month has been approved. The 2nd evening NHRRT will occur on the 4th Tuesday of the month, from 4pm-6-pm. The 2nd evening NHRRT class will <u>not</u> be added to the current NHRRT schedule, *until* <u>April 2025</u> (04/22/25).

3. NHRRT registration availability-currently <u>3</u> weeks out; see available New Hire RR training classes in MHWIN.

4. Questions? Please put in the Q & A, & ORR will respond.

ORR NHRRT Information:

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

NHRRT is held via the Zoom App-<u>participants need strong Wi-Fi</u> <u>signal</u> & be familiar w/the Chat feature.

Detroit Free Press

Participants <u>must</u> be present <u>online</u>, <u>with working</u> <u>cameras</u>, <u>and remain visible and available</u> 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 NOT</u> <u>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 (1 year after NHRRT training date, and <u>annually</u> 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 Manager: Schakerra Pride



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1. The ORR Staff Training Record form-Should be completed prior to scheduled site review. (Document Staff Name, DOH, DOT- NHRRT, DOT- ARRT). Evidence of RR training should be prepared & submitted to the ORR Reviewer at the site review visit, (certificates/transcripts).

2. Reminder-The Provider (AFC)/CEO (Outpt) will receive a copy of the Compliance Status letter from ORR via email, after the site review for their records. AFC only-LARA (Licensing) requests the ORR CSL during the renewal of the license for the AFC.

3. Questions? Please put in the Q & A and ORR will respond.

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 certificates obtained from *different* counties w/evidence provided & verification of validity, in *most* cases (Oakland, Macomb, Washtenaw accepted)

List cont'd:

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/Contact Info:

Provider contact info and staff records should be kept current, as required in MHWIN

Questions re: ORR Monitoring: esims1@dwihn.org, Ihudson@dwihn.org ahardrick@dwihn.org or spride@dwihn.org





QUESTIONS?





DWIHN Access Call Center CRSP Outpatient/ Residential Meeting Friday February 14,2025

DETROIT WAYNE INTEGRATED HEALTH NETWORK 800-241-4949 www.dwihn.org

Appointment Availability

- The call center should make a referral for services within 24 hours of screening and the scheduled appointment should take place within the standard MDHHS guidelines:
 - Routine: within 14 days
 - Urgent / Emergent: with 24-48 hours
 - Hospital discharge within 7 days
- Once an individual has been referred to the provider:
 - ► For Emergent:
 - > The intake should take place within 24 hours of the referral
 - For Urgent:
 - ▶ The intake should take place within 24-48 hours of the referral
 - For routine:
 - The IBPS should be completed within 14 days of the referral and ongoing services should be within 14 calendar days from the intake



2

Appointment Availability

- Access Call Center staff will contact the provider to request an appointment if one is not available within the stated timeframes
- Please check appointment calendars regularly and add availability to avoid delays in scheduling appointments.
 - Child appointment slots are needed for I/DD, ABA Supports Coordination and SED
- December 2024 Appointment Availability:
 - SMI, SED and I/DD (within 14 days): 88.2%
 - Hospital Discharge (within 7 Days): 99.9%
 - SUD priority Populations (Urgent / Emergent- within 24 hours): 80.9%
 - SUD (routine within 5-7 days): 83.5%



3

Update Appointment Status in MHWIN

- CRSP providers should update the appointment status in MHWIN within 24 hours of the appointment date and include appropriate notes for appointments that are rescheduled or cancelled
- Appointment statuses:
 - Appointment kept
 - No Show
 - Rescheduled by Member / Provider
 - Cancelled by Member / Provider

CRSP Change Request Form -Member Signature (required)

- CRSP change request forms can be completed by the current crsp, new crsp or member and submitted to <u>CRSPProvider@dwihn.org</u> for processing
- This form must be signed by the member or include printed name and phone number of the member along with the signature and printed name of the person who completed the form if the member was not present to sign the form (see Step 3: Member Signature)
- Access Call Center staff will call the member to confirm this request, which can delay the processing of this form
- It is recommended that the new CRSP schedule the intake, have the member sign the form on the day of the intake and submit is to the access center via email with a note to include the start of care date/intake date and the access center will assign the CRSP in MHWIN using that date.⁵

CRSP Change Request - Follow up Appointment (Hospital / CSU Discharge)

- If the member wants services with a new CRSP, a CRSP change request form must be completed prior to discharge
 - The new CRSP must be in agreement and have capacity to accept CRSP Change request
 - New CRSP should add an appointment to the hospital discharge appointment for this member to assist with CRSP change process
 - CRSP change request form can be found on the DWIHN.org website. Send to <u>CRSPprovider@dwihn.org</u>.
 - Contact the <u>accesscenter@dwihn.org</u> with questions.

Disability Designation Change Request

- Use the link on the DWIHN.org website
- Current CRSP must compete request form and submit with supporting documentation for review and approval
- You will be notified by email of the decision
 - Link for request form / smartsheet <u>https://app.smartsheet.com/b/form/a713f14ee3ca4463ad</u> <u>67b1fb88b80467</u>

Questions?



8

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To:	Children's Providers (SED/IDD) and IT Departments
From:	Cassandra Phipps, Director of Children's Initiative
CC:	Melissa Moody, VP of Clinical Operations, Keith Frambro VP of IT Services,
	Stacey Sharp, Associate VP of Clinical Operations, Andrea Smith, Senior Director
	of Grants & Community Engagement
Re:	CAFAS/PECFAS and MichiCANS Update
Date:	February 5, 2025

The following information is being provided by the DWIHN Children's Initiative Department to inform Children's Providers of updates pertaining to CAFAS/PECFAS (for SED Children Providers ONLY) and MichiCANS (for SED/IDD Children Providers). Please share this information with your IT Departments as well.

MichiCANS

MichiCANS Certification: It is required for staff to have a current MichiCANS certification to administer the MichiCANS Screener/Comprehensive. Children's Providers can request a report to view for your agency for compliance by emailing University of Kentucky representative Laura Mergen Lauren.Mergen@uky.edu. In addition, staff are to receive email notifications from TCOM regarding annual recertification 1 week prior to due date.

MHWIN: Requesting IT departments to activate the MichiCANS Screener and Comprehensive to HIE from Children's Provider electronic health record (HER) to MHWIN by 2/14/25.

Webpage: Additional information has been added to the MichiCANS webpage for reference: <u>https://www.dwihn.org/Providers/MichiCANs</u>

- CAFAS Training Resources Memo
- Use of CAFAS/PECFAS memo
- o Admin Guide: Basics for Navigating the Report
- MichiCANS Recertification memo
- o DHHS MichiCANS Screening Flow Chart

CAFAS/PECFAS

Per communication from the Michigan Department of Health and Human Services (MDHHS), it is required to continue to administer CAFAS/PECFAS assessments for 1915i SPA and SED Waiver services via the

Board of Directors

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James E. White, President and CEO

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Waiver Support Administration (WSA) platform for initial and annual certifications. Quarterly CAFAS/PECFAS is no longer a requirement.

1915i SPA/SEDW: MDHHS informed there is an error with entering CAFAS/PECFAS and MichiCANS dates in WSA system simultaneously. If you encounter an "error message", email Annamarie Macandog the following information: <u>MacandogA@michigan.gov</u>

• WSA ID

- The Evaluation that requires the update
- CAFAS/PECFAS date

CAFAS/PECFAS Initial Trainings: Effective 2/1/2025, the DWIHN Children's Initiative Department to offer Initial Trainings twice a year via Detroit Wayne Connect: <u>www.dwctraining.com</u>. In addition, there is also the option for SED Children's Providers to complete the Initial Training with a CAFAS/PECFAS Trainer within the network as well (see list below).

CAFAS/PECFAS Booster Trainings: Effective 2/1/2025, DWIHN Children's Initiative Department will discontinue hosting Booster Trainings for CAFAS/PECFAS via Detroit Wayne Connect. SED Children's Providers have the option to coordinate with CAFAS/PECFAS Trainers within the network for assistance (see list below).

CAFAS/PECFAS Submission: Once Initial and or Booster Training is completed, submit to the tracking sheet and those who successfully pass will receive a certificate via Detroit Wayne Connect Transcript: <u>https://app.smartsheet.com/b/form/0004120d91f2482aaf2759079a7802ca</u>

Credentialing: Per MDHHS, CAFAS/PECFAS Training is no longer a requirement for the Children's Mental Health Professional (CMHP) credential. Can reference the FY25 MDHHS Code Chart for additional information. <u>https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Keeping-Michigan-Healthy/BH-DD/Reporting-</u>

Requirements/SFY_2025_BH_Code_Charts_and_Provider_Qualifications.xlsx?rev=34ce036c903d4ed99 8746338ef4eea09

Trainer List: Below is the list of CAFAS/PECFAS Trainers available. You can contact a trainer regarding scheduling in person or virtual trainings. DWIHN will not be involved in the scheduling process.

Trainer Name	Provider Name	Assessment	Email
Adrian Emerick	CNS Healthcare	PECFAS	aemerick@cnshealthcare.org
Andrew Lewandoski	Hegira Health, Inc.	BOTH	alewandowski@hegirahealth.org
Angela Wathel	The Children's Center	CAFAS	awathel@thechildrenscenter.com
Asura Burke	The Children's Center	BOTH	aburke@thechkildrenscenter.com
Carlotta Mitchel	Black Family Development	CAFAS	cmithchell@blackfamilydevelopment.org
Chantelle James	MiSide	CAFAS	chantelle.james@miside.org
Darcy Brohman	Growth Works	CAFAS	darcy.brohman@gwcares.org
Faten Bazzi	America's Community Council	PECFAS	fatenb@myacc.org
Janice Ransom	Development Centers	CAFAS	janice.ransom@miside.org
Je'Mille Newby	Hegira Health	CAFAS	jnewby@hegirahealth.org

Jason Riley	Assured Family Services	BOTH	jasonriley@assuredfamilyservices.org
Jennifer Lewis	Team Wellness Center	CAFAS	jennifer.lewis@t-mhs.com
Kelsi M. Robertson	Development Centers	PECFAS	kelsi.robertson@miside.org
Kimberly Alabi-Isama	Black Family Development	CAFAS	kisama@blackfamilydevelopment.org
Lawrence Dababneh	America's Community Council	CAFAS	lawrenced@myacc.org
Marika Orme	The Guidance Center	BOTH	morme@iamtgc.net
Michael McNeece	Lincoln Behavioral Services	PECFAS	michaelm@lbscares.org
Michelle Smartt	InSight	CAFAS	smarttm@insightyfc.org_
Petiste Graves	CNS Healthcare	PECFAS	pgraves@cnshealthcare.org
Shanna Lasker	Assured Family Services	CAFAS	sfoley@assuredfamilyservices.org
Sheair Phillips	Starfish Family Services	PECFAS	sphillips@sfish.org
Saja Alkhafaji	Hegira Health, Inc.	PECFAS	salkhafaji@hegirahealth.org

If you have any questions or concerns, please contact Cassandra Phipps at <u>cphipps@dwihn.org</u> and Ebony Redding at <u>eredding@dwihn.org</u>.

Sincerely,

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