

REGION 10 PIHP

Training Requirements 2018- SUD Provider

Name of Training	Frequency	Target Audience	Description	Requirement	Method of Assessment	Applies to
Communicable Disease	Initial only	All staff who have direct contact with individuals who have a SUD/COD	Modes of transmission, risk to SUD population, universal precautions, HIV/AIDS, TB, Hepatitis and STIs.	MDHHS/BSASS Prevention Policy #2	A training module can be found at the Improving MI Practices website: http://improvingmipractices.org/ Sign In>SUD>Practice Areas>SUD>SUD Communicable Disease Level I Maintain a copy of training attestation and completed exam or training certificate if applicable. Employee training files will be audited during the Region 10 PIHP contract monitoring site review.	<input type="checkbox"/> Px <input type="checkbox"/> Tx <input checked="" type="checkbox"/> Both
Corporate Compliance	Initial only	All staff	Review of corporate compliance policy, general laws and regulations governing compliance issues in the health care organization.	Medicaid Integrity Program	Employees will review their agency's Corporate Compliance policy and complete a training attestation form. If the agency does not have its own Corporate Compliance policy, employees may review Region 10 PIHP Corporate Compliance policy. Maintain copy of training attestation and completed exam or training certificate, if applicable. Employee training files will be audited during Region 10 PIHP contract monitoring site review.	<input type="checkbox"/> Px <input checked="" type="checkbox"/> Tx <input type="checkbox"/> Both

Name of Training	Frequency	Target Audience	Description	Requirement	Method of Assessment	Applies to
Cultural Diversity	Initial only	All staff	Diversity issues in the workplace, embracing differences, and understanding what each unique person brings to an organization	Region 10 PIHP Contract	<p>A training module can be found on the Health Resources & Services Administration Website http://erc.msh.org/mainpage.cfm?file=1.0.htm&module=provider&language=English&ggropup=&mgroup</p> <p>Maintain a copy of training attestation and completed exam or training certificate, if applicable. Employee training files will be audited during Region 10 PIHP contract monitoring site review.</p>	<input type="checkbox"/> Px <input type="checkbox"/> Tx <input checked="" type="checkbox"/> Both
Employee Orientation	Initial only	All staff	Review of responsibilities, program policies, and operative procedures	SA Administrative Rule R325.14114(1)	<p>Maintain a copy of training attestation and completed exam or training certificate, if applicable. Employee training files will be audited during Region 10 PIHP contract monitoring site review.</p>	<input type="checkbox"/> Px <input type="checkbox"/> Tx <input checked="" type="checkbox"/> Both
HIPAA IS Security Awareness	Initial only	All staff	Overview of HIPAA, the HIPAA privacy rule, and HIPAA security risk	Code of Federal Regulations	<p>Maintain a copy of training attestation and completed exam or training certificate, if applicable. Employee training files will be audited during Region 10 PIHP contract monitoring site review.</p>	<input type="checkbox"/> Px <input checked="" type="checkbox"/> Tx <input type="checkbox"/> Both

Name of Training	Frequency	Target Audience	Description	Requirement	Method of Assessment	Applies to
Level 1 Authorizations	Initial & every two years (at the time of requesting/renewing privileges)	Individuals who complete Level I Authorizations on behalf of Region 10 PIHP, and staff who process denials (which includes all primary case holders and Access clinicians)	SUD Treatment Guidelines (05-03-07), Access to Services (05-01-01), Procedure Codes and Definitions (03-02-01), Utilization Management Program (01-05-01)	Code of Federal Regulations, 45CFR 438.230.b(1) (inferred requirement)	Maintain a copy of training attestation and completed exam or training certificate, if applicable. Employee training files will be audited during Region 10 PIHP contract monitoring site review.	<input type="checkbox"/> Px <input checked="" type="checkbox"/> Tx <input type="checkbox"/> Both
Limited English Proficiency	Initial only	All staff	Procedures for working with individuals with limited English abilities; training on terminology used in association with the limited English.	Region 10 PIHP Contract	Region 10 PIHP has provided each SUD agency with a PowerPoint Module for this training. Maintain a copy of training attestation and completed exam or training certificate, if applicable. Employee training files will be audited during Region 10 PIHP contract monitoring site review.	<input type="checkbox"/> Px <input checked="" type="checkbox"/> Tx <input type="checkbox"/> Both

Name of Training	Frequency	Target Audience	Description	Requirement	Method of Assessment	Applies to
Medication Administration	Initial & Annual	All direct service staff, if service delivery includes working with an individual who takes medications and the staff does or could potentially administer medications	Basics of administering medications.		Employees may meet this requirement by attending training led by a licensed medical professional at your agency or an outside agency. Maintain a copy of training attestation and completed exam or training certificate, if applicable. Employee training files will be audited during Region 10 PIHP contract monitoring site review.	<input type="checkbox"/> Px <input checked="" type="checkbox"/> Tx <input type="checkbox"/> Both
Recipient Rights	Initial & Annual	All staff	Information on Recipient Rights including confidentiality, abuse and neglect.	Region 10 PIHP Contract MDHHS Administrative Code 330.1755; MDHHS Administrative Rule R325.14301-325.14306; 42 CFR 438.100	A training module can be found at the Improving MI Practices Website: http://improvingmipractices.org/ Sign In>Practice Areas>SUD>SUD Recipient Rights Part I, Part II, and Part III are all required initially and annually. Maintain a copy of training attestation and completed exam or training certificate, if applicable. Employee training files will be audited during Region 10 PIHP contract monitoring site review.	<input type="checkbox"/> Px <input checked="" type="checkbox"/> Tx <input type="checkbox"/> Both

Name of Training	Frequency	Target Audience	Description	Requirement	Method of Assessment	Applies to
Universal Precautions Bloodborne Pathogens	Initial & Annual	All staff	Protection, prevention, and reporting of bloodborne pathogens.	MDHHS Administrative Rule 330.2807(10);	Region 10 PIHP has provided each SUD agency with a PowerPoint Module for this training. Maintain a copy of training attestation and completed exam or training certificate, if applicable. Employee training files will be audited during Region 10 PIHP contract monitoring site review.	<input type="checkbox"/> Px <input type="checkbox"/> Tx <input checked="" type="checkbox"/> Both

DISCLAIMER: While the PIHP has provided references to available trainings, these trainings may be discontinued or found in another area of the referenced website. The discontinuation of a noted referenced training, does not exclude the provider from meeting their contractual training requirements. Please inform the PIHP if trainings become unavailable and provide information on what training mechanism the provider will use to meet these requirements for their staff.

Please Note:
 Tx stands for Treatment
 Px stands for Prevention