

Mother-Infant Dyad Guidelines for Maternal Only MIHP Providers

In 2010, Medicaid policy changed to require MIHP providers to offer both maternal and infant services. Providers that had previously provided maternal services only (hospital-based prenatal clinics) were exempted from this policy. However, maternal only MIHP providers must assure that two maternal home visits and infant services are provided for all mother-infant dyads. The first home visit is required within one month of enrollment in the maternal only program; the second home visit is required post-partum.

This can be done in one of two ways:

1. The maternal provider delivers all maternal services, including the two required home visits, and then transitions the mother-infant dyad to another certified MIHP provider for infant services.
2. The maternal provider delivers all maternal services, except for the two required home visits, which are provided by another certified MIHP provider who goes on to provide infant services for the mother-infant dyad.

Maternal only providers must enter into a formal written agreement with one or more MIHP providers for the provision of maternal home visits and/or infant services. The agreement must be signed by both parties.

If an agreement is required with another MIHP provider, a copy of the agreement will be available at the maternal only provider's certification review.

The written agreement between the maternal only provider and maternal home visit/infant services provider must include the following specifications:

1. The maternal only provider must describe how they will inform the client of the maternal home visiting component and coordinate the two home visits so that the client understands that home visits are an important part of the maternal provider's MIHP services.
2. The maternal only provider must describe how they will inform the client of the infant services component and coordinate the transition to the infant services provider. Infant services are a continuation of maternal services and there must be seamless transition from the office/clinic visits to the infant home visits.
3. The agreement must state that home visiting staff must meet the qualifications of the MIHP program and be listed on the infant services provider's MIHP Personnel Roster.
4. The agreement must specify what visits are to be made, how the maternal provider will share the client's maternal Plan of Care with the maternal home visit/infant services provider, and that home visitors will provide interventions as developed by MDHHS.
5. The agreement must specify that the maternal home visit provider will document each home visit on a Professional Visit Progress Note and submit it to the maternal only provider, who will file it in the client record.

6. The agreement must specify that the infant services provider will notify the maternal only provider in writing about the outcome of the transition to infant services.
7. The agreement must specify the method of billing for maternal home visits.

Expectations are further defined in the two sections below.

Maternal Only Provider Does Two Maternal Home Visits; Infant Services Delivered by Another Provider

Maternal only provider will:

1. Prepare pregnant women for transition to infant services provider upon baby's arrival:
 - a. Give them the infant services provider name and contact information.
 - b. Give them written information introducing the infant services provider (e.g., a picture of the identification used by infant services provider personnel, an emergency number, welcoming brochure, etc.), as supplied or approved by the infant services provider.
 - c. Explain what to expect from the infant services provider, emphasizing that that infant services are home-based, and describing the full array of education and support services offered (e.g., infant care and development information, developmental screening, help with breast or bottle feeding, transportation services as needed, etc.).
2. Deliver MIHP maternal services as required by MIHP policy and procedures, including maternal POC development and implementation, and required maternal home visits.
3. Communicate with the maternal MHP and medical care provider.
4. Bill MDHHS for maternal services, including maternal home visits.
5. Document transition to the infant services provider.

Infant services provider will:

1. Provide updated contact information for the maternal provider to share with pregnant women.
2. Provide or approve written information about the infant services provider to be given to pregnant women by the maternal only provider (e.g., a picture of the identification used by infant services personnel, an emergency number, welcoming brochure, etc.).
3. Communicate with infant's MHP and medical care provider.
4. Deliver MIHP infant services as required by MIHP policy and procedures, including infant POC development and implementation, and required infant home visits.
5. Bill MDHHS for infant services.

6. Provide feedback to the maternal only provider on whether the infant has been enrolled, the mother refused services, the family moved out of service area, or family cannot be found.

Maternal Provider Does Not Do Maternal Home Visits; Maternal Home Visits and Infant Services Delivered by Another Provider

Maternal only provider will:

1. Prepare pregnant women for maternal home visits and transition to infant services upon the baby's arrival.
 - a. Give them the maternal home visiting/infant services provider's name and contact information.
 - b. Give them written information introducing the maternal home visiting/infant services provider (e.g., a picture of the identification used by infant services personnel, an emergency number or information, welcoming brochure, etc.), as supplied or approved by the home visiting/infant services provider.
 - c. Explain that the pregnant woman should expect two maternal home visits, one within a month and one after baby's birth, and describe what will happen at the visits (e.g., help preparing for infant, infant care information, preparation for breast or bottle feeding, etc.).
 - d. Explain what to expect from the infant services provider, emphasizing that that infant services are home-based, and describe the full array of education and support services offered (e.g., infant care and development information, developmental screening, help with breast or bottle feeding, transportation services as needed, etc.).
2. Communicate with the maternal MHP and medical care provider.
3. Deliver maternal services as required, including POC development and implementation.
4. Bill MDHHS for maternal clinic visits.

Maternal home visiting/infant services provider:

1. Provide updated maternal home visiting/infant services provider contact information for the maternal provider to share with pregnant women.
2. Provide or approve written information about the maternal home visiting/infant services provider to be given to pregnant women by the maternal only provider (e.g., a picture of the identification used by infant services personnel, an emergency number, welcoming brochure, etc.), as supplied or approved by the maternal home visiting/infant services provider.
3. Communicate results of the maternal home visits to the maternal provider and keep documentation of visits at their agency.

4. Provide feedback to the maternal only provider on whether the infant has been enrolled, the mother refused services, the family moved out of service area, or the family cannot be found.
5. Communicate with infant's MHP and medical care provider.
6. Deliver maternal home visits as required.
7. Deliver MIHP infant services as required by MIHP policy and procedures, including infant POC development and implementation.
8. Bill MDHHS for maternal home visits and infant services.