

May 26, 2015

<Provider Name>  
<Provider Address1>  
<Provider Address2>  
<City> <State> <zipcode5-zip4>

Dear Home Help Provider:

RE: Personal Care Services Provider Logs

You are receiving this letter because you provide personal care services for someone in the Home Help program. This only applies to you if you are an individual provider not working through an agency. The purpose is to inform you that the Home Help program is replacing the provider logs (DHS-721) used to verify the tasks you worked. Instead of paper provider logs, you will now record your service time through an Electronic Service Verification (ESV) system in the Community Health Automated Medicaid Processing System (CHAMPS), the online Medicaid provider system. This will allow us to improve the payment process for Home Help workers.

The submission of monthly ESVs begins in August 2015. That submission will be for services provided during the month of July 2015. Return provider logs dated through June 2015 to the local county Michigan Department of Health and Human Services (MDHHS) office.

This letter describes the basic process for using the ESV system. The letter also includes instructions for providers that have no access to the internet, either through personal devices or public facilities. In addition, training sessions will be provided throughout the state for anyone needing further assistance. Information will be available on the Home Help website at [www.michigan.gov/homehelp](http://www.michigan.gov/homehelp). Assistance will also be available at MDHHS county offices.

1. Submit your ESV through the State of Michigan Single Sign-on (SSO) system at <https://sso.state.mi.us>. If you are a new provider, you must first enroll in CHAMPS. Instructions on how to enroll in CHAMPS can be found at [www.michigan.gov/homehelp](http://www.michigan.gov/homehelp). If you are an existing provider and enrolled in CHAMPS, please follow the instructions on how to submit an ESV, which can also be found at [www.michigan.gov/homehelp](http://www.michigan.gov/homehelp). For additional assistance, if needed, on submitting your ESV, please contact Provider Support at 1-800-979-4662.
2. Use the ESV to report services for each month. Submit the ESV by the 10th day of the following month to ensure prompt payment.
3. If you serve more than one client, submit an ESV for each client each month.
4. Like the logs, the ESV will show the tasks authorized by the Adult Services Specialist. Only check the actual tasks provided.
5. Use the ESV comment section to report any times when the client was not available to receive services. This is in addition to the current requirement to report client absences to the Adult Services Specialist within 10 days.
6. Do not use the comment section to report any urgent or significant problems that require a timely response from the Adult Services Specialist, such as suspected abuse or neglect or your termination as a provider. You should contact the Adult Services Specialist directly with any urgent issues.
7. The ESV system allows you to save information without submitting it. You may enter information daily or weekly and save it. At the end of the month you can then submit the monthly ESV report. Only submit the ESV once per month.

Paper Alternative to ESV

If you do not have access to the internet through a personal computer or other device, or by using public computers, you may request permission to submit paper service verification. Submit your request to the client's Adult Services Specialist at the MDHHS local office or to Provider Support at 1-800-979-4662, who will determine if you are eligible to use paper service verification. If you submit paper service verification instead of ESV, there may be a delay in processing your paychecks.

Thank you for continuing to provide quality care to clients of the Home Help program. If you have questions regarding this letter, call Provider Support at 1-800-979-4662 or send an email message to [ProviderSupport@michigan.gov](mailto:ProviderSupport@michigan.gov).

Sincerely,

A handwritten signature in black ink that reads "Stephen Fitton". The signature is written in a cursive style with a large initial 'S'.

Stephen Fitton, Director  
Medical Services Administration