

September 25, 2020

<Provider Name>
<Provider Address 1>
<Provider Address 2>
<City> <State> zipcode5-zipcode4

Dear Community Living Support (CLS) Provider:

On March 20, 2020, the Michigan Department of Health and Human Services (MDHHS) issued a memo to the executive directors of Prepaid Inpatient Health Plans (PIHPs) and Community Mental Health Services Programs (CMHSPs) on coding changes (use of H2015) for all Community Living Support (CLS) services in unlicensed settings effective October 1, 2020. The purpose of this letter is to provide additional clarification on CLS services delivered in unlicensed settings.

Guidance on use of the CLS code for Medicaid beneficiaries in unlicensed settings during overnight hours:

CLS is used to increase or maintain personal self-sufficiency, facilitating an individual's achievement of their goals of community inclusion and participation, independence, or productivity. Coverage includes assisting, prompting, reminding, cueing, observing, guiding, and/or training provided by CLS staff.

CLS may be provided in unlicensed settings to support, observe, and preserve the health and safety of the individual during overnight hours when medically necessary and in order that the individual may reside in the most integrated, independent community setting. The need for CLS staff assistance to observe, direct, and monitor health and safety must be reviewed and established through the person-centered planning process with the individual's specific supports being identified in an Individual Plan of Service (IPOS) that will conserve their independent living arrangement. CLS Providers are responsible for evaluating and ensuring less intrusive and cost-effective services (i.e., specialty supplies and equipment such as Personal Emergency Response System [PERS], electronic devices, assistive technology, etc.) have been reviewed that preserve health, safety, and allow an individual to remain in the most integrated independent community living setting prior to authorizing this type of CLS staff assistance.

The CLS service requirements are outlined in the Behavioral Health and Intellectual and Developmental Disability Supports and Services chapter of the MDHHS Medicaid Provider Manual. The MDHHS Medicaid Provider Manual can be accessed on the MDHHS website at www.michigan.gov/medicaidproviders >> Policy, Letters & Forms.

Additional Resources

Resources can be accessed on MDHHS website at www.michigan.gov/bhdda >> Reporting Requirements

PIHP/CMHSP Encounter Reporting Code Chart ([updated 9/18/2020](#))

PIHP/CMHSP Provider Qualifications Chart ([updated 8/31/2020](#))

Questions

Any questions regarding your CLS provider contract and reporting requirements should be submitted directly to your PIHP or local CMHSP Contract Manager. For a list of the Regional PIHP and their CMHSP affiliates, visit michigan.gov/bhdda/PIHP and michigan.gov/bhdda/CMH.

Additional questions regarding this letter should be submitted to BHDDA via e-mail at MDHHS-ProviderQualificationCode@michigan.gov using the subject line “Numbered Letter L 20-56 CLS Guidance”.

Sincerely,



Kate Massey, Director
Medical Services Administration