



# Virtual Presentation

- Welcome to MDHHS Virtual Presentation
- The presentation will begin momentarily
- You may download documents, including this presentation along with the Adobe user guide, from the File Pod located in the upper right hand corner of the webpage
- Within the Web Link Pod you will find the Provider Relations Training Evaluation
- A Q&A will be held at the end of the presentation for questions

*Please note: Audio is via your computer speakers.*



Michigan Department of Health & Human Services

RICK SNYDER, GOVERNOR | NICK LYON, DIRECTOR

# Modernizing Continuum of Care (MCC) Post Implementation January 11, 2018

**“Working to protect, preserve and promote the health and safety of the people of Michigan by listening, communicating and educating our providers, in order to effectively resolve issues and enable providers to find solutions within our industry. We are committed to establishing customer trust and value by providing a quality experience the first time, every time.”**

**-Provider Relations**

# Agenda

- Modernizing Continuum of Care (MCC) Reminders
- Topics of concern
- Post Implementation Issues
- Provider Resources
- Q & A session

# Modernizing Continuum of Care (MCC) Reminders

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# Policy Information

- [MSA 17-33](#), [MSA 17-40](#) and [MSA 17-46](#)
- MSA LOCD policy L-Letter [17-61](#)
  
- For step by step instructions on how to enter an admission or discharge please refer to:
  - [MCC Overview Training](#)
  - [MCC SNF and Hospice Training](#)

# Profile Reminder

- Prior to MCC Go Live MDHHS identified Full Access profiles and added the specialty driven admission profile
- As of today if a user does not have access to the new admission screens the domain administrator will need to grant access to the appropriate profile for the user:
  - Hospice Admission
  - Hospital Admission
  - NF Admission
  - SPF Admin
  - MI Choice Enrollment
  - PACE Enrollment

# MCC Reminder

- Providers are only responsible for entering an admission or discharge into their facility via the screens in CHAMPS for a beneficiary who is enrolled in a Medicaid Health Plan (MHP), MI Health Link (ICO) plan, PACE, MI CHOICE or Medicaid Fee For Service (FFS).
- Providers are **not** responsible for enrolling a beneficiary into an MHP, ICO or other programs.
- Enrollment into plans or other programs is completed by the applicable plan, program or by the MDHHS county case worker.

# Topics of Concern

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Issues identified prior to MCC Go Live

# Topics of concern

- The Michigan Medicaid Provider Manual will not be updated with MCC related policy changes until the April 2018 update.
- [A Biller B Aware](#) and List Serv notification were sent to all Institutional providers on January 4, 2018, regarding Hospice signature clarification.
  - List Serv notification was sent on December 15, 2017 to specific Hospice providers.
- Providers will only get alerts on the CHAMPS my inbox page when a date of death is added.
  - In the future providers will get alert notifications when a beneficiaries admission is auto-end dated by a second/other facility prior to the first facility completing the discharge.

# Topics of concern (cont.)

- Hospice providers billing routine care (0651 revenue code), when a beneficiary is receiving hospice services and then needs to be admitted to a hospital for a diagnosis unrelated to their terminal/hospice diagnosis.
- A future L-letter or MSA policy bulletin will be issued to clarify.
  - Workaround:
    - The hospital will enter their admission which will end date the hospice benefit plan(BP) and PET
    - The Hospital will then discharge the beneficiary which will end date the hospital admission
    - Hospice will then complete another admission, entering the admission date back to the original date of the Hospice admission which will allow the 0651 to be billed while the beneficiary was admitted to the hospital

# Topics of concern (cont.)

- Inpatient hospital providers who also have a swing bed unit and share one NPI for both specialties:
  - When creating an admission it will only create an admission as a Nursing Facility, even if the GH Admission profile is selected.
  - Providers can get a separate enrollment for their Swing bed unit.
  - MDHHS will correct this issue at a later date. When corrected providers will be able to login to CHAMPS and selecting a GH admission profile in order to create an inpatient hospital admission.
    - This currently impacts approximately 20 providers

# Post Implementation Issues

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Issues or concerns identified the first week of MCC Go Live

# Eligibility Post Implementation Issues

- Patient Pay Amounts (PPA) are not correctly displaying in CHAMPS or in the 271 response.
- In the eligibility screen providers may see a benefit plan of Nursing Home (NH) or Hospice with no PET.
  - When these records converted into MCC from Bridges there was invalid data on the admission notice in Bridges.
  - MDHHS is still determining how to proceed with these records.

# Roster List Page Post Implementation Issues

- MDHHS will update the other insurance screen, at a later date, to have an edit or delete button. Currently when other insurance is added to an admission it can't be edited or deleted.
- Inpatient Hospital providers enrolled with a subspecialty of 'Long Term Care' are not currently able to enter SNF admissions
  - MDHHS is working to resolve this issue and will communicate to providers when resolved.

# Roster List Page Post Implementation Issues

- When entering a discharge after clicking submit the submit button does not change to print as it does when completing an admission.
  - Workaround:
    - Enter the discharge
    - Go back to the roster list page
    - Search for the beneficiary that was discharged
    - Click View Details and then click print
    - Or when entering the discharge use the print option on the screen
- Hospice providers are responsible for updating their admission records when the beneficiary has a living arrangement change.
  - For example:
    - 1/01/18 Beneficiary is admitted to Hospice in the SNF
    - 1/15/18 Beneficiary moves to the community still receiving Hospice
    - The admission from 1/01/18 will need to be discharged, to indicate the beneficiary is no longer in the SNF and a second admission by the Hospice to indicate the beneficiary is now in the community setting.

# Roster List Page Post Implementation Issues

- When entering an admission for a beneficiary who only has or has only ever had Spend-down or QMB benefit plans, providers will get an error message, “Unable to verify eligibility for member”
  - MDHHS is working to resolve this issue and will notify providers when resolved.
- Providers will need to contact Provider Support to get the dates on converted admission records:
  - Overlapping admission dates
  - Records with incorrect discharge dates
  - PET records missing for specific date segments

# Health Plan Disenrollment process

- For SNF and Hospice providers the Medicaid Health Plan (MHP) disenrollment process currently remains the same.
  - For example:
    - Admitted into a SNF on 1/01/18 , the SNF completes their admission via the CHAMPS screens.
      - PET: LTC-NFAC 1/01/18 to 12/31/2999
    - The MHP identifies on 1/15/18 the beneficiary should have been enrolled in the MHP effective 1/01/18. MHP will complete an enrollment with a start date of 1/01/18
      - PET: MHP-NFAC 1/01/18 to 12/31/2999
    - 45 days later, the disenrollment process is completed and approved. The MHP edits their enrollment record and disenrolls the resident from the MHP effective 2/15/18.
      - PET: MHP-NFAC 1/01/18 to 2/14/18  
LTC-NFAC 2/15/18 to 12/31/2999

# Provider Resources

- **MCC website:** [www.michigan.gov/medicaidproviders](http://www.michigan.gov/medicaidproviders)
- **MCC FAQ document:**  
[http://www.michigan.gov/documents/mdhhs/MCC\\_Providers\\_FAQ\\_605779\\_7.pdf](http://www.michigan.gov/documents/mdhhs/MCC_Providers_FAQ_605779_7.pdf)
- **We continue to update our Provider Resources, just click on the links below:**
  - [SIGMA](#)
  - [Listserv Instructions](#)
  - [Medicaid Alerts and Biller “B” Aware](#)
  - [Medicaid Provider Training Sessions](#)
- **Provider Support:**
  - [ProviderSupport@Michigan.gov](mailto:ProviderSupport@Michigan.gov) or 1-800-292-2550

Thank you for participating in the Michigan Medicaid Program