

Bulletin Number: MSA 18-09

Distribution: Home Help Agency Providers

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Subject: Home Help Agency Provider Standards

Effective: July 1, 2018

Programs Affected: Medicaid, Healthy Michigan Plan

I. Background

This bulletin updates the Home Help agency provider standards described in bulletin MSA 15-13, issued on May 1, 2015. The Home Help program is administered by the Michigan Department of Health and Human Services (MDHHS) and provides personal care services to individuals who need hands-on assistance with Activities of Daily Living (ADLs) and assistance with Instrumental Activities of Daily Living (IADLs). MDHHS is responsible for approving Home Help agency providers for participation in the program. This policy includes a glossary to define roles, requires direct employment of all Home Help agency caregivers and agency employees, and describes record retention requirements for Home Help agencies.

II. Home Help Description of Terms

Adult Services Worker (ASW)	This person works for MDHHS and provides case management services for the Home Help program.
Agency Caregiver	The direct care worker. This caregiver provides personal care services to an MDHHS Home Help client.
Agency Employee	An employee of a Home Help agency who has access to information regarding a Home Help client for the purposes of billing, answering phone calls or assisting with setting up services for a MDHHS Home Help client.
Agency Owner(s)	Possesses 5% or greater direct or indirect ownership interest of the agency and/or person with control interest.
Agency Provider	<ul style="list-style-type: none"> A current Medicare certified home health agency with Medicare certification and a Federal Taxpayer Identification Number (TIN);

	<ul style="list-style-type: none"> • An approved agency with a TIN that directly employs all (but not less than two) agency caregivers, not including the owner, who are providing services through the Home Help program and regularly receiving a monthly paycheck; OR • A Community Mental Health Services Program (CMHSP) that works with clients who use arrangements that support self-determination.
Agency Representative/ Resident Agent	An individual who is authorized to act on behalf of the agency owner.
Board of Directors	A group of individuals elected or selected to act as representatives of the shareholders to establish corporate management-related policies and to make decisions on major company issues.
Client	A Medicaid beneficiary who is receiving services through the MDHHS Home Help program.
Managing Employee	A general manager, business manager, administrator, director, or other individual who exercises operational or managerial control over, or who directly or indirectly conducts the day-to-day operation of the institution, organization, or agency either under contract or through some other arrangement, whether or not the individual is a W-2 employee.

III. Provider Qualifications

A. Agency Provider Definition

In order to qualify for reimbursement at the agency rate, the agency provider must meet one of the following criteria and be approved by the MDHHS Home Help Unit:

- A current Medicare certified home health agency with Medicare certification and a Federal TIN; **OR**
- An agency with a Federal TIN that directly employs all (but not less than two) agency caregivers, not including the owner, who are providing services through the Home Help program and are regularly receiving paychecks from the agency each month; **OR**
- A CMHSP that works with clients who use arrangements that support self-determination.

IV. Provider Operating Standards

A. Employee Identification

Agency caregivers and agency employees who have direct contact with clients must carry and present a State or Home Help agency issued photo identification whenever they enter a client's home. In addition, agency caregivers are required to show their identification whenever requested by the MDHHS Adult Services Worker (ASW) or other MDHHS staff working in collaboration with the Home Help program.

B. Criminal History Screening

Agency owners, agency caregivers, and agency employees who have access to the MDHHS Home Help client's home or personal information are subject to criminal history screenings and program exclusions consistent with the provisions outlined in current Home Help policy. Home Help agency caregivers and agency employees must also associate in CHAMPS to the agency where they are employed. The date of this association should not be earlier than the date the criminal history check was completed to protect client safety.

Agency caregivers and agency employees who do not meet the criminal history criteria may continue to work for the agency but cannot provide Home Help services funded by MDHHS through the Home Help program. Agency caregivers and agency employees with a criminal history will not have the option of continuing services by having a Home Help client complete the Personal Choice and Acknowledgement of Provider Selection Form.

C. Required Contact Between Agency Representatives/Resident Agents and ASW

The ASW is required to meet with Home Help clients every six months to complete a review of client needs. Part of this review process involves a conversation between the agency caregiver who is providing the direct hands on care to a Home Help client and the ASW. This contact will be initiated by the ASW, but may require follow-up by the agency caregiver if the initial attempt is unsuccessful. At least once per year, this contact must be a face-to-face contact between the ASW and the agency caregiver.

NOTE: If the agency is just beginning services with a client, the initial contact may be with either the agency owner and/or the agency caregiver. Once services have begun, subsequent contact must be with the agency caregiver who is providing the direct hands-on care to the Home Help client. Failure to cooperate with these requirements can result in suspension of payment to the agency.

D. Recruitment and Marketing

Recruitment of caregivers or clients is not allowed in MDHHS offices or anywhere on MDHHS premises. Home Help agencies may not use materials developed by MDHHS in advertising, marketing, or recruitment in a manner that misrepresents the Home Help agency's relationship with the State or the Home Help program. The use of the MDHHS logo on agency documents is prohibited. Agencies are not allowed to recruit or direct their advertising to Medicaid beneficiaries and/or their active individual caretakers who are already receiving Home Help services through MDHHS. An agency caregiver may not provide services to a Home Help client who they were assisting as an individual provider for 90 days after commencement of employment with the agency or for 90 days after termination of services as the client's individual provider, whichever comes later. Example: Mrs. Smith is a Home Help client. She uses her adult daughter, Becky, as her individual home help provider. Becky recently had contact with a Home Help agency and would like to work for the agency. Her start date is May 1st. Becky may work for the agency and care for other clients as of May 1st. She may also continue as an individual provider for her mother, Mrs. Smith. If the agency wants to take Mrs. Smith as a client, they can assign a different provider for her care. Becky will not be able to care for Mrs. Smith through the agency until there is at least a 90-day break in service.

Agencies may conduct standard employee recruitment (e.g., posting openings) and general advertising outside of the MDHHS office and off MDHHS premises.

E. Non-Competition Conditions

The agency provider will neither have, nor enforce, any agreements or requirements that prohibit an agency caregiver or agency employee from working with a different Home Help client or for another Home Help agency during or after ending employment, regardless of when the agreement was signed.

F. Payment for Services

Home Help agencies must directly employ all agency caregivers and agency employees who work with Home Help clients. Medicaid will not reimburse an agency for services that were provided by a contracted caregiver. Agency caregivers and agency employees may not subcontract services to someone not directly employed by the agency. All agency caregivers and agency employees must be enrolled in CHAMPS and associated to the Home Help agency prior to providing Home Help services so that a criminal history check is completed.

Agencies will accept the authorized Home Help payment as payment in full for Home Help services rendered. Clients shall not be required or solicited to supplement Home Help payments for the same services authorized by MDHHS.

G. Record Retention

Agencies are required to maintain supporting documentation verifying that services billed to MDHHS were provided to the client. At a minimum, this includes verification of

days and times worked, tasks completed, and names of clients that the provider worked with each day. The agency provider is also required to keep a copy of the approved time and task from MDHHS for each client. Records need to be kept for seven years from the date of service.

Providers must, upon request from authorized agents of the state or federal government, make available for examination and photocopying all medical records, quality assurance documents, financial records, administrative records, and other documents and records that must be maintained. Failure to make requested records available for examination and duplication and/or extraction through the method determined by authorized agents of the state or federal government may result in the provider's suspension and/or termination from Medicaid. Failure to produce supporting documentation for claims may also result in recoupment of Home Help payments made to the agency.

V. Agency Enrollment and Disenrollment

A. Agency Enrollment

1. Approval Process for New Agencies

Provider agencies must:

- a. Have a Federal Employer Identification Number (EIN).
- b. Submit the following documents to the MDHHS Home Help Unit:
 - A letter of intent signed by the agency owner(s) specifying what services the agency will be providing. Additional items to be included in the letter are:
 - Contact information for the Home Help agency owner and managing employee. If the owner is the managing employee, note this in the letter.
 - If the agency is managed by a separate individual their contact information needs to be included.
NOTE: Contact information includes e-mail, phone number and agency owner home address.
 - The letter needs to specify that these individuals will ensure that the agency and the agency's caregivers and employees have read all current MDHHS Home Help policies and procedures and will provide services in compliance with those requirements.
 - Copies of the Internal Revenue Service (IRS) form W-4 Employee's Withholding Allowance Certificate for all agency caregivers and agency employees. This verifies that all caregivers and employees involved in the Home Help program are directly employed by the agency.

- Please register your agency with the Department of Licensing and Regulatory Affairs or your County Clerk's Office. Once this step is completed you will need to send in your articles of organization or similar documents. NOTE: Any documents other than articles of organization must be in a format approved by the Home Help Unit.
- An agency that has been operating, but not with the Michigan Medicaid Home Help program, must provide additional documents listed below:
 - A current copy of the Employer's Quarterly Federal Tax Return (IRS Form-941) or relevant filing/statement demonstrating current compliance with the Federal Insurance Contributions Act (FICA) tax;
 - A current copy of form UIA 1028 Employer's Quarterly Wage/Tax Report or a similar form demonstrating the agency's current compliance of state unemployment insurance filings and payment;
 - A list of current caregivers and employees who work for the agency and will provide services for Home Help clients. The list should include caregiver/ employee name, date of birth and the Community Health Automated Medicaid Processing System (CHAMPS) provider ID;
 - A copy of W4s for all current Home Help agency caregivers and employees; AND
 - A copy of IRS form W-9 Request for Taxpayer Identification Number and Certification for the agency.
- A current Medicare certified home health agency is only required to provide a letter of intent and a copy of the current Medicare certification.

Submit all required documentation described above to:

Email to: MDHHS-MSA-HHProviderReporting@Michigan.gov

Fax to: 517-335-7959, or

Postal mail to:

MDHHS Home Help Unit
Capitol Commons Center, 6th Floor
400 S. Pine St.
Lansing, MI 48913

NOTE: Agencies are encouraged to scan and e-mail documents to the e-mail listed above with the subject line of "Agency Application". This enables staff to quickly identify these documents and respond that the documents have been received. Fax and postal mail are acceptable, however, the reply that documents have been received will not be available.

- c. Agencies must register their vendor account with the State of Michigan by visiting the SIGMA Vendor Self Service website at www.michigan.gov/SIGMAVSS. Refer to the SOM VSS User Guide for New Vendors reference document for further instructions. Agency providers should keep a record of the new Vendor Customer ID, download and print the substitute W-9 form for agency records, and submit a copy of this form to MDHHS by one of the methods stated above.
- d. Home Help agencies involved in the Home Help program must register in CHAMPS and have a criminal history screening done prior to delivering services or working with MDHHS Home Help clients. Instructions on how to complete this process are located on the MDHHS website at www.michigan.gov/homehelp or by calling Provider Support at 1-800-979-4662. Agencies must revalidate their CHAMPS registration information a minimum of once every five years, or more often if requested by MDHHS. If the agency fails to submit the CHAMPS application within 60 days of the application start date, the agency application will be denied.

NOTE: Upon CHAMPS approval from MDHHS, all agency caregivers and agency employees working with the Home Help program must also register in CHAMPS, pass a criminal history screening and be associated to the agency provider using the seven-digit provider ID number assigned to the Home Help Agency.

2. Agency Enrollment Approval or Denial

The agency provider will be notified in writing of its approval, denial or the need for additional information within 30 calendar days of all required documents being received. Application directions can be found online at: www.michigan.gov/homehelp.

An agency provider shall be denied enrollment if any of the agency owners, agency representatives/resident agents, or managing employees had direct or indirect ownership interest and/or control interest of a Home Help agency that was suspended or terminated from the Michigan Medicaid program within the preceding five years.

3. Additional Verification Needed for New Agencies

Within 120 days of agency approval, the agency must submit the following documentation to the MDHHS Home Help Unit:

- A letter identifying the agency owner(s) and administrator, along with their contact information (to include address, phone number and e-mail information).
- A copy of the most recent IRS Form-941 demonstrating that the FICA tax is paid on a quarterly basis.

- A copy of the most recent form UIA-1028 or a similar form demonstrating the agency's payment of state unemployment insurance.
- Copies of IRS form W-4 for all agency caregivers who are currently providing services to Home Help clients.
- A list of all agency caregivers and agency employees who are currently providing services to Home Help clients, including their first and last name, date of birth, and their CHAMPS provider ID. This list should match the providers currently listed in CHAMPS and associated to the Home Help agency.

B. Reporting

Agencies must report all changes affecting agency provider enrollment by updating agency information in CHAMPS. This includes, but is not limited to, changes in agency ownership, address, contact name, telephone number, email, or an agency caregiver or employee. Failure to notify MDHHS within 10 calendar days of the change may result in the termination of the agency provider's enrollment, a reduction from the agency provider reimbursement rates to individual provider rates, or the denial of claims for services provided.

The MDHHS Home Help Unit will audit employment documents for a sample of agencies each year. An agency selected for audit will be required to provide current copies of the employment documents cited above under the Agency Enrollment section along with supporting verifications of services related to a specific payment. Agencies must submit the requested information within 30 calendar days to MDHHS. Failure to provide documents by the due date may result in a reduction of payment rate. Failure to provide the required documents within 60 calendar days will result in the agency being removed from the Approved Home Help Agency list for a minimum of 30 calendar days or until compliance, whichever is longer.

Other authorized areas within MDHHS may also request documents or other records needed for the Home Help program. Agencies must follow the timelines specified in those requests.

C. Approved Disenrollment

When an agency is disenrolled, any authorizations for Home Help payments are terminated in the state payment system. Notice is sent to the agency provider and the local MDHHS office within 10 calendar days of the MDHHS determination of disenrollment. MDHHS may disenroll an agency for any of the following reasons:

- An agency may be disenrolled if the agency or any of its caregivers or employees are found guilty of Medicaid fraud or client abuse, exploitation or neglect.
- An agency may be disenrolled for falsifying information in its application documents, provider agreement, quarterly reporting, service verification or billing.
- An agency may be disenrolled if the agency owner(s), agency representative/resident agent, or a member of the Board of Directors has a mandatory or permissive criminal conviction as outlined in bulletin MSA 14-31.

- An agency may be disenrolled for failing to report changes or update CHAMPS within 10 calendar days of the change.
- An agency may be disenrolled if it fails to meet any of the requirements in this policy.

An agency may be suspended if it is being investigated for fraud, abuse, exploitation or neglect, pending the outcome of the investigation.

D. Approved Agency List

MDHHS maintains a list of agencies approved to provide Home Help services to MDHHS clients. Agencies must be on the Approved Agency List to be eligible for the agency rate. These lists are updated monthly and sent to local offices to use as a resource when clients are looking for providers. MDHHS may remove an agency from the Approved Agency List for the following reasons:

- An agency has not provided Home Help services within the last six months.
- An agency fails to meet any of the requirements in this policy.
- An agency fails to meet any of the requirements in this policy not already listed under the Disenrollment Section above.

Agencies removed from the Approved Agency List may still be coded as an agency in CHAMPS and will be eligible to provide services at the individual rate for Home Help. Agencies that would like to be reinstated as an approved Home Help agency provider should send an e-mail to MDHHS-MSA-HHPProviderReporting@michigan.gov to request information on how to become reinstated.

E. Participation as an Agency Provider

Participation in the Home Help program as an Agency Provider is subject to denial, suspension, or termination in accordance with MCL 400.111e.

F. Appeals

Agency providers and applicants have the right to appeal any adverse action taken by MDHHS. The appeal process is subject to the Social Welfare Act, PA 280 of 1939; MCL 400.01 et seq., Chapters 4 and 6 of the Administrative Procedures Act of 1969; MCL 24.271 to 24.287 and MCL 24.301 to 24.306, and the Michigan Administrative Code regarding Medical Services Administration (MSA) Provider Hearings (R 400.3401 - 400.3425 and R 792.10904 – 792.10906).

1. Existing Agencies

MDHHS will inform an agency provider of disenrollment through an adverse action notice (also known as a negative action notice). The agency may appeal within 30 calendar days of the notice to the Michigan Administrative Hearing System (MAHS). Existing agency providers may continue to provide services during the appeal period if the agency provider accepts responsibility for the repayment of funds should the

MDHHS decision be upheld. The agency provider may not accept new Medicaid Home Help clients during the appeal period. During this time, the Home Help client continues to have the right to terminate the agency provider at any time and without cause.

NOTE: The process described above may not reflect actions taken on behalf of MDHHS by the MDHHS Office of Inspector General (OIG). An agency provider suspended from the Home Help program by OIG cannot operate during the suspension and has 15 calendar days to appeal the OIG decision.

2. New Agency Applicants

MDHHS will inform new agency provider applicants of ineligibility factors identified through screening and/or evaluation. The agency provider may appeal within 30 calendar days of notification of being denied or of losing agency status to MAHS. New agencies denied enrollment during the screening application process are not eligible to receive MDHHS payment for Home Help services during the appeal period.

Manual Maintenance

Retain this bulletin until the information is incorporated into the Michigan Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mailed to ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-979-4662.

Approved



Kathy Stiffler, Acting Director
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