

July 27, 2021

Name  
Address1  
Address2  
City> <State> <Recipient\_Zip>

Dear Provider:

This letter is to remind Medicaid-enrolled home health agencies (HHA) of their responsibility to be informed of current Medicaid policy, comply with these policies as outlined in the Michigan Department of Health and Human Services (MDHHS) [Medicaid Provider Manual](#), and stay up to date with policy updates.

Recently an audit was conducted by the Office of the Auditor General (OAG) of a sample set of Medicaid-enrolled HHAs to review Plan of Care (POC) documentation. The OAG conducts audits to ensure Fee-for-Service (FFS) claims submitted by Medicaid-enrolled HHAs comply with Michigan Medicaid policy. Failure to comply will result in recoupment of the submitted claim payment. Frequent audit findings included the failure to document the following:

- Identify the availability of other caregiver(s) (e.g., family member or another caregiver);
- The role of family or support person; and,
- The patient's mental, psychosocial, and cognitive status.

MDHHS understands HHAs commonly document the POC via the Centers for Medicare & Medicaid Services (CMS) [Home Health Certification and Plan of Care](#) (CMS-485). Although MDHHS required POC documentation does not align with the CMS-485, MDHHS does not intend to design a POC form specifically to address this issue as it may be viewed as administratively burdensome. MDHHS recommends the following:

- The HHA must identify the availability of caregiver(s) when home health aide services are ordered. If an available caregiver(s) is documented, the role of the caregiver (e.g., "family or support person") must be documented in the POC. If there is no available caregiver(s) or the role of the caregiver (e.g., "family or support person") is limited or does not support the goal of the patient, the HHA must clearly state this in the POC.
- The HHA must make every attempt to individually identify the patient's mental, psychosocial, and cognitive status to assist with clear identification of these required elements.

MDHHS encourages Medicaid-enrolled HHAs to ensure the POC complies with and documents the elements identified in the Home Health chapter, Plan of Care section. Details regarding the provision of home health aide services and required documentation can be found in the Home Health chapter, Home Health Aides section.

The MDHHS Medical Services Administration notifies affected providers of policy changes and updates based on available contact information in the Community Health Automated Medicaid Processing System (CHAMPS). Medicaid-enrolled HHA administrators and managers are encouraged to subscribe to the ListServ to stay up to date with policy updates. To subscribe, ListServ instructions can be found [here](#).

Also, administrators and managers may verify contact information by logging into CHAMPS and navigating to "Provider Basic Information" and "Primary Practice Location" to view the listed email addresses. For questions or problems with changing contact information, providers should call Provider Support at 1-800-292-2550 or email [ProviderSupport@michigan.gov](mailto:ProviderSupport@michigan.gov).

MDHHS remains committed to assisting HHAs with following required standards. If you would like additional information or wish to schedule a consultation meeting, please contact Michelle Tyus, Home Health Policy Specialist, at 517-335-5246, or via email at [TyusM@michigan.gov](mailto:TyusM@michigan.gov).

An electronic version of this document is available at [www.michigan.gov/medicaidproviders](http://www.michigan.gov/medicaidproviders)  
>> Policy, Letters & Forms.

Sincerely,

A handwritten signature in black ink, appearing to read 'K. Massey', followed by a long horizontal flourish.

Kate Massey, Director  
Medical Services Administration