MEDICAID POLICY INFORMATION SHEET

Policy Analyst: Lori Brown						
Phone Number : 517-241-1852						
Initial Public Comment Final Final						
Brief description of policy:						
In accordance with 42 CFR § 440.167, Home Help services cannot be provided to inpatients or residents of hospitals, nursing facilities, intermediate care facilities for individuals with intellectual disabilities, or institutions for mental disease. This bulletin clarifies when a provider can bill for Home Help services when a client is admitted to one of these facilities.						
Reason for policy (problem being addressed):						
This policy is intended to a) answer provider questions about payments for Home Help services provided on the dates of facility admission and discharge and b) reduce the rate of providers billing for Home Help services rendered on prohibited days.						
Budget implication: ☑ budget neutral ☐ will cost MDHHS \$, and (select one) budgeted in current appropriation ☐ will save MDHHS \$						
Is this policy change mandated per federal requirements?						
No.						
Does policy have operational implications on other parts of MDHHS?						
The policy is anticipated to decrease the recoupment workload of staff in adult services and the Office of Inspector General.						
Does policy have operational implications on other departments?						
No.						
Summary of input: controversial acceptable to most/all groups limited public interest/comment						
Supporting Documentation:						
State Plan Amendment Required: ☐ Yes ☐ No Public Notice Required: ☐ Yes ☐ No If Yes, please provide status: ☐ Approved ☐ Pending ☐ Denied If yes, Date: Approval Date: Submission Date:						

1/18 Policy Info Sheet

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COMMENT						
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Michigan Department of		-		2050 1111	T	
Health and Human Service		Project Nur		2053-HH	Date: September 10, 2020	
Comments Due:	-,					
Proposed Effective Date: Direct Comments To:						
Address:	Lon Brown					
	Brow	Brownl35@michigan.gov				
		7-241-1852 Fax :				
Policy Subject: Home Help Payment Policy for Client Facility Stays						
Affected Programs: Medicaid, Healthy Michigan Plan						
Distribution: Home Help Providers						
Summary: In accordance with 42 CFR § 440.167, Home Help services cannot be provided to inpatients or residents of hospitals, nursing facilities, intermediate care facilities for individuals with intellectual disabilities, or institutions for mental disease. This bulletin clarifies when a provider can bill for Home Help services when a client is admitted to one of these facilities.						
Purpose: This policy is intended to a) answer provider questions about payments for Home Help services provided on the dates of facility admission and discharge and b) reduce the rate of providers billing for Home Help services rendered on prohibited days.						
Cost Implications: Budget neutral						
Potential Hearings & Appeal Issues: None known						
State Plan Amendment Required: Yes \(\subseteq \text{No } \subseteq \) If yes, date submitted: Public Notice Required: Yes \(\subseteq \text{ No } \subseteq \) Submitted date:						
Tribal Notification: Yes ☐ No ☒ - Date:						
THIS SECTION COMPLETED BY RECEIVER						
Approved				No Com	ments	
See Comments Below						
Disapproved				See Con	nments in Text	
Signature:				Phone	e Number	
Signature Printed:				•		
Bureau/Administration (please print)				Date		

Comment001 Revised 6/16

Proposed Policy Draft

Michigan Department of Health and Human Services Medical Services Administration

Distribution: Home Help Providers

Issued: December 1, 2020 (Proposed)

Subject: Home Help Payment Policy for Client Facility Stays

Effective: January 1, 2021 (Proposed)

Programs Affected: Medicaid, Healthy Michigan Plan

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 (ADL) and instrumental activities of daily living (IADL). In accordance with 42 CFR §440.167, Home Help services are provided to eligible individuals who are not inpatients or residents of hospitals, nursing facilities, intermediate care facilities for individuals with intellectual disabilities or institutions for mental diseases. The purpose of this bulletin is to notify providers of Home Help payment policy when a client is admitted to one of these facilities.

Date of Admission

A provider is **not** eligible for payment for Home Help services provided on the day the client is admitted to a(n):

- hospital,
- nursing facility,
- intermediate care facility for individuals with intellectual disabilities, or
- institution for mental diseases.

Payment for Home Help services on the date of admission is subject to recoupment.

Date of Discharge

A provider is **not** eligible for payment for Home Help services provided on the day the client is discharged from a(n):

- nursing facility,
- intermediate care facility for individuals with intellectual disabilities, or
- institution for mental diseases.

Payment for Home Help services on the date of discharge is subject to recoupment.

NOTE: A provider is eligible for payment for Home Help services provided on the date of discharge from a hospital.

Reporting Facility Stays

The client or provider must report a facility stay to the client's adult services worker within ten business days of the date of discharge to assure proper Home Help payment.