# **MEDICAID POLICY INFORMATION SHEET**

Policy Analyst: Lori Brown				
Phone Number: 517-241-1852				
Initial ☐ Public Comment ⊠ Final ☐				
Brief description of policy:				
This policy clarifies when a provider can bill for Home Help services on a Home Help client's dates of facility admission and discharge.				
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.				
udget 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 Adds a category of disallowed payments to MSA policy.  Controversial Adds a category of disallowed payments to MSA policy.  Controversial Adds a category of disallowed payments to MSA policy.  Controversial Adds a category of disallowed payments to MSA policy.  Controversial Adds a category of disallowed payments to MSA policy.  Controversial Adds a category of disallowed payments to MSA policy.  Controversial Adds a category of disallowed payments to MSA policy.  Controversial Adds a category of disallowed payments to MSA policy.  Controversial Adds a category of disallowed payments to MSA policy.				
Supporting Documentation:				
State Plan Amendment Required:       ☐ Yes       ☐ No       Public Notice Required:       ☐ Yes       ☐ No         If Yes, please provide status:       ☐ Denied       If yes,         ☐ Approved       ☐ Pending       ☐ Denied       If yes,         Date:       Approval       Date:       Submission Date:				

1/18 Policy Info Sheet

DRAFT FOR PUBLICOMMENT	C			
Michigan Danaghuant of				
Michigan Department of Health and Human Services		Project Number: 2053-HH	<b>Date:</b> April 23, 2021	
Comments Due: Proposed Effective Date: Direct Comments To: Address:	May Sep	28, 2021 tember 1, 2021 Brown	<b>Dato:</b> 7(piii 20, 2021	
E-Mail Address: Brow Phone:		vnl35@michigan.gov	Fax:	
Policy Subject: Home Help Payment Policy for Client Facility Stays				
Affected Programs: Medicaid, Healthy Michigan Plan				
Distribution: Home Help Providers				
<b>Summary:</b> This policy clarifies when a provider can bill for Home Help services on a Home Help client's dates of facility admission and discharge.				
<b>Purpose:</b> 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 \( \subseteq \text{No } \subseteq \) Public Notice Required: Yes \( \subseteq \text{No } \subseteq \) If yes, date submitted:				
Tribal Notification: Yes ☐ No ⊠ - Date:				
THIS SECTION COMPLETED BY RECEIVER				
Approved		☐ No Com	ments	
			nments Below	
□ Disapproved		See Con	nments in Text	
Signature:		Phon	e Number	
Signature Printed:				
Bureau/Administration (please print)				

Comment001 Revised 6/16



# Michigan Department of Health and Human Services Medical Services Administration

**Distribution:** Home Help Providers

**Issued:** August 1, 2021 (Proposed)

**Subject:** Home Help Payment Policy for Client Facility Stays

**Effective:** September 1, 2021 (Proposed)

**Programs Affected:** Medicaid, Healthy Michigan Plan

The purpose of this bulletin is to notify providers of Home Help payment policy when a Home Help client is admitted to a facility. 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 instrumental activities of daily living (IADLs). Home Help services cannot be authorized for a client who is an inpatient or resident of a(n):

- Hospital, nursing facility or institution for mental disease, in accordance with 42 CFR §440.167.
- Adult foster care (AFC) facility as defined in the AFC Facility Licensing Act, Public Act 218 of 1979 (MCL 400.701 et seq.).
- Home for the aged (HFA) as defined in the Public Health Code, Public Act 368 of 1978 (MCL 333.20106).

#### **Date of Facility Admission**

Providers **are not** eligible for payment for Home Help services provided on the day a client is admitted to any of the facilities listed above. Payments for Home Help services provided on these days are subject to denial and recoupment.

## **Date of Facility Discharge**

Providers **are** eligible for payment for Home Help services provided on the day a client is discharged from any of the facilities listed above.

### 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 ensure proper Home Help payment.