

# ▶ Northern Michigan Regional Entity (NMRE)

The Prepaid Inpatient Health Plan for 21 counties in  
Northern Michigan

# Items for today

- ▶ Home and Community Based Services (HCBS) Final Rule - what is it and where
- ▶ MDHHS Process for Compliance
- ▶ What that means for CMHSP-contracted HCBS Providers
- ▶ PIHP Contact

# HCBS Final Rule: What is it and where

- ▶ [Pages from Medicaid Manual](#)
- ▶ Sets requirements for Person Centered Planning, requirements for residential and non-residential settings, **defines non-HCBS settings** (nursing facilities, institutions, intermediate care facilities, hospitals...)
- ▶ Programs in existence before March 17, 2014 were required to be in compliance prior to March 17, 2022
- ▶ Effective October 1, 2017 any new program must be in immediate compliance

# What that means for HCBS Providers

- ▶ For current providers, it meant/means ongoing IPOS-specific surveys for clients in care
- ▶ For new CMH providers, providers adding HCBS services, a location change, new licensee additions, it means completing a provisional survey
- ▶ Process:
  - ▶ Provisional surveys indicate new providers are immediately compliant—CMH will need evidence (policy/procedures/imagery)
  - ▶ Providers who are not 100% compliant with the HCBS final rule on the provisional surveys will not be able to accept referrals until they are

# What that means for HCBS Providers

## ▶ Process:

- ▶ Provisional surveys indicate new providers are immediately compliant—CMH will need evidence (policy/procedures/imagery). CMH sends to PIHP for ongoing rounds of MDHHS surveys
- ▶ Providers who are complaint, no further actions required
- ▶ Providers that are non-compliant must become compliant before March 17, 2022
- ▶ Providers that are non-complaint and set off red flags that may be institutional are earmarked for Heightened Scrutiny
- ▶ Providers that have not responded at this time have been notified multiple times, and have been forced to transition clients for the surveys they did not respond to out of HCBS Medicaid funding

# What that means for HCBS Providers

- ▶ Process Continued:
  - ▶ The providers that did not respond will route clients to new non-HCBS services, find new funding sources, cease the same HCBS services until they are compliant. They can re-apply after March 17, 2022
  - ▶ After a period of time, the Provisional surveys for new providers are sent to MDHHS, who will trigger a new round of surveys to the new providers
  - ▶ CMHSPs and PIHPs trying to ensure ongoing compliance by engaging and educating providers

# HCBS Client Transition Webinars

For clients:

“What happens if my service provider is not HCBS Compliant?”

[Webinar Brochure](#)

# What that means for HCBS Providers

- ▶ Sample Provisional Surveys

[Residential Provisional Survey](#)

[Non-Residential Provisional Survey](#)

[MDHHS HCBS Transition link](#)

<https://www.michigan.gov/mdhhs/assistance-programs/healthcare/hifa/home-and-community-based-services-program-transition>



# PIHP Lead



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