MDHHS BHDDA NEW HOME AND COMMUNITY BASED SERVICES PROVIDER REQUIREMENTS

**Purpose of Provisional Approval:** The purpose of the provisional approval survey is to ensure that the settings in which new providers wish to provide services to HCBS participants are not institutional or isolating in nature. Provisional approval allows PIHPs to contract with new providers who do not have a current HCBS participant receiving services in their setting. Provisional approval is *required before* the provision of services to an HCBS participant.

**Definition:** A new provider is one who does not have a contractual agreement to provide services to the PIHP region prior to October 1, 2017.

A new service with an existing provider in your region prior to October 1, 2017 will not require a provisional approval.

**Provisional Approval:** Providers may receive *provisional approval* to provide HCBS services based upon the satisfactory completion of a new provider survey and the review of applicable policies and procedures in place to support the HCBS rule. This approval status remains in place until the provider and the individual receiving services complete the HCBS survey as outlined in this document.

Completion of the provisional approval process is required of *all new HCBS providers* effective October 1, 2017.

The new provider must complete the provisional survey in order to provide HCBS services. This survey must be completed and reviewed and approved by the PIHP prior to the provision of HCBS services. This survey is intended to provide for *initial and provisional approval* to provide Medicaid Behavioral Health HCBS services.

**Effective date:** A provisional approval allows a new provider to provide services to HCBS participants for 90 days. Providers and Individuals will receive the comprehensive HCBS survey *within 90 days* of an individual’s IPOS. The provider *must* complete this survey in order to maintain the ability to provide HCBS services. Failure to complete the provisional approval process and the ongoing approval process *will* result in the suspension of the provider’s ability to provide HCBS services.

**Expected respondent:** The HCBS Waiver Provider who has direct knowledge of the individual's day to day supports and/or the operational and administrative activities of the provider agency. It is the provider’s responsibility to ensure the survey is completed by the appropriate individual.

**PIHP function related to provisional approval:** The PIHP is responsible for the following;

- Ensuring that any new providers complete the provisional approval survey.
- Track initial approval surveys and initiate comprehensive surveys within 90 days of participants first IPOS.
- When the comprehensive surveys are completed the PIHP lead will conduct any required follow up to ensure all standards are met as required by the final rule.
- The PIHP must maintain documentation that the survey was completed; that the provider does not require heightened scrutiny and that an HCBS provider survey (comprehensive survey) is completed within 90 days of the first full IPOS of the participant.
- Providers are required to complete a provisional survey for the first HCBS participant only.