



2025 THE YEAR AHEAD

PROVIDER HANDBOOK UPDATES

Contact Information

- Page 3
 - Kristina Meyer has been added to the Provider Network Team as the Residential Placement Coordinator.
- Page 10
 - Dr. Madison Chapman is the Behavior Treatment Committee Chair, having taken over for Renee Raushi.
- Page 30 and 36
 - Katie Hohner is the new Recipient Rights Officer, having taken over for Jane Gilmore.
 - Keegan Sarkar is the new Recipient Rights Advisor, having taken over for Katie Hohner.
 - Please ensure that you update your postings.
- Page 43
 - Renee Raushi is the new Compliance Officer, having taken over for Bryan Krogman.

Training Requirements

- Fire & Safety Prevention = Environmental Safety/Emergency Procedures
 - Page 6, 34, 60-63, 78, 81
 - Page 6:
 - Safety & Fire Prevention has been replaced with Environmental Safety/Emergency Procedures to align with the MSHN Training Grid.
 - Page 34:
 - Safety & Fire Prevention has been replaced with Environmental Safety/Emergency Procedures to align with the MSHN Training Grid.
 - Pages 60-63
 - Safety & Fire Prevention Training has been updated to include additional areas aside from fire safety. It has also been renamed to Environmental Safety/Emergency Procedures.
 - Pages 78 & 81
 - Training signature sheets have been updated to indicated Environmental Safety/Emergency Procedures.

Training Requirements

- Sensitivity – Hearing Loss – moved to resources
 - Page 6 & 34, removed from list
 - Sensitivity Training – Hearing Loss has been removed the lists and is no longer a required training.
 - Page 77, 80 – removed from sign off
 - Sensitivity Training – Hear Loss sign-off sections have been removed as they are no longer required trainings.
- Formerly pages 62-66
 - Sensitivity Training – Hearing Loss overview has been removed as a required training. We are adding this to our CMHCM website as an additional resource.

MSHN & MDHHS AUDITS

Reminders

- Accuracy
 - Prior to document and claim submission, please ensure the following is occurring:
 - **Modifiers**
 - You are using the correct modifier based on group size, staff credentials, etc.
 - **Time/Units**
 - The time listed on the correlating documentation matches the billing claim entered, which also matches the correct units billed.
 - **Attendance**
 - When providing an applicable service, the attendance of participants is identified.
 - Ex: ABA Family/Caregiver Training lists whether the consumer was present.
 - Ex: H2023U has the correct about of participants that align with the modifier.
 - **Billing Follows Protocol**
 - You are billing correctly based on the protocols set forth for that service.
 - Ex: ABA Assessment (97151) is totaled and billed on the last date of service.
- Respite Narrative
 - Respite services must have a narrative of what occurred while the service was being provided.

Reminders – continued

- Training/Credentialing
 - Criminal Background Checks
 - Criminal Background Checks must be completed prior to the date of hire.
 - Trainings must be completed within the identified timeframes
 - IPOS Training
 - Training in the IPOS and addendums must be completed for staff prior to he/she providing services to the consumer.
 - Full Legal Name
 - Staff must sign/document their full legal name. They can list their preferred name; however, their legal name must also be listed.
 - Ex: Timothy “Tim” Jones
 - Trainer Signatures
 - The trainer’s information must also be documented.

Community Mental Health for Central Michigan
Individual Plan of Service/Addendum
Training Record

Consumer Name: _____ DOB: _____ Case #: _____

Provider Agency: _____

Effective Date of IPOS/Addendum: _____

Trainer's Name: _____
Print Name: _____ Signature: _____ Credentials/Title: _____

Signed: _____

Print Name: _____ Employer: _____

Trainer Signature: _____

Trainer Name: _____ Title: _____

Trainer information is required and training will not be considered complete without both staff and trainer attestation.

I have completed the Recipient Rights and Requirements for Reporting Abuse & Neglect training:

Signed: _____ Date: _____

Print Name: _____

My Employer: _____

Trainer Signature: _____

Trainer - Print Name: _____

Trainer - Title: _____

ELECTRONIC VISIT VERIFICATION (EVV)

Reminders

- **What is EVV:**

- In December 2016, a federal law called the 21st Century Cures Act was passed. Part of this law requires states to implement an Electronic Visit Verification (EVV) system that validates the following:
 - Date
 - Time
 - Location
 - Type of Service
 - Individual(s) providing and receiving the service.

- **Services Currently Requiring EVV:**

- For Behavioral Health, which is CMHCM, these are CLS (H2015) and Respite (T1005) that start, stop or occur at any point in the home (Place of Service Code #12) EVV is mandatory for these services and there is not an option to “opt out” (see next slide for exemptions).

- **EVV Exemptions:**

- The state is allowing for potential exemptions for live-in caregivers that
 1. Live in the same home as the beneficiary, and
 2. The home must be the caregiver's permanent and primary address.

This means that the live-in caregiver both lives with the beneficiary and provides the service to them.

- For exemptions for caregivers providing the behavioral health services (H2015 and T1005) that meet the above criteria, the completed [Live-In Caregiver Attestation](#) form can be sent to:

April Higgins & Jennifer Dunlop
301 S. Crapo Street
Mt. Pleasant, MI 48858

or

evvexemptions@cmhcm.org

- For exemptions for caregivers providing other services, the Live-In Caregiver Attestation must be submitted to the consumer's MDHHS worker.

- **Current Status of EVV**

- The State's EVV system, HHAeXchange is one option for EVV. Providers are able to utilize their own EVV system as long as it meets criteria as outlined by the State.
- All providers who are currently providing EVV required services should be up and running. The State is currently not allowing for billing to occur through HHAeXchange to allow for providers to gain comfortability with EVV before adding the billing requirement.
- If you are a provider that provides the EVV-required services and are not currently utilizing EVV software, please contact utilize the following resources immediately:
 - [HHAeXchange Info Hub](#)
 - The [State's website](#)
 - CMHCM's Provider Network at providernetwork@cmhcm.org

UNIVERSAL CREDENTIALING

Overview

- PIHPs are responsible for ensuring that each organizational provider and/or individual practitioner , directly or contractually employed, meets all applicable licensing, scope of practice, contractual, and Medicaid Provider Manual requirements.
- Universal Credentialing is using the platform MDHHS Behavioral Health Customer Relationship Management (MDHHS BH CRM).
- This has taken effect and we will be working through this process in the upcoming year when recredentialing is due.

MISCELLANEOUS

Reminders

- Incident Reports are sent to administrationclerical@cmhcm.org or rights@cmhcm.org
- IR's with PRN need dose, name
- Sign the notes!
- If not completing electronic notes in CIGMMO, please have documentation of services uploaded in a timely manner. Contract requirements indicate:
 - **The CONTRACTOR's submittal of a billing statement of claims for any reimbursement hereunder shall constitute the CONTRACTOR's verification that the required services and documentation have been completed, in compliance with the reimbursement requirements of CMHCM, the MDHHS, Medicaid, Medicare, and/or third party reimbursers and is on file currently.**
 - Uploading instructions on page 20-21.
- Community Outing Logs