

Region 9 AAA	Local Policy #	V-1
Policy Name:	Provider Enrollment and Qualifications Policy	
Original Policy Date:	May 2010	
Review Date:	June 2013, October 2014, January 2015, June 2015, August 2016,	
Revise Date:	June 2017, November 2018, October 2019, February 2023, March 2024	

Policy:

It is the policy of NEMCSA - Region 9 Area Agency on Aging (AAA) to ensure that there are an adequate number of qualified service providers.

Eligible provider applicants include public, private non-profit or for-profit service organizations that meet Michigan Department of Health and Human Services (MDHHS), Bureau of Aging, Community Living, and Supports (ACLS Bureau), and applicable AAA policies, procedures, practices operating standards, certifications and/or licensure requirements. All applicants undergo an extensive pre-approval process to ensure compliance with established policies/procedures, billing requirements, staffing requirements, and operating standards.

Purpose:

To ensure an adequate number of qualified service providers are available to serve program participants through an extensive provider enrollment process. Service providers must meet all requirements and assist in maintaining the health, safety and welfare of participants receiving services administered and funded by the AAA.

Procedure:

1. Organizations expressing interest in securing a bid agreement must submit their request in writing, by phone or by email. **Information can also be acquired via the agency website.**
2. Upon receipt of the request, a Bid Agreement Packet will be mailed, emailed, or made available on the AAA website to the potential provider. The packet will include information concerning requirements that must be met to participate with the AAA, including, but not limited to:
 - a. Subcontractor Agreement
 - b. HIPAA Business Associate Agreement
 - c. MDHHS Operating Standards
 - d. ACLS Bureau Operating Standards, as appropriate
 - e. Vendor View and Vendor Billing Enrollment Form and Provider Certification
 - f. Enrollment Form
 - g. Office and Staff Listing
 - h. Grievance Form

- i. Provider Incident Form
 - j. Bill Voucher (approved format)
 - k. HCPCS Codes
 - l. Example In-Home Journals
 - m. Relevant Criminal History Background Requirements
 - n. False Claims Act Policy and Attestation
3. Completed applications will be reviewed to determine if the potential provider is qualified to provide the requested services. NEMCSA – Region 9 AAA reserves the right to decline new provider enrollments when network adequacy is sufficient for the service.
 4. An on-site pre-contract review will be conducted prior to accepting any organizations as an approved provider of services. All policies, procedures and practices will be reviewed to ensure compliance prior to the AAA Director signing an agreement. In rare instances, providers may be allowed to mail in supporting documentation. This is typically allowed for vendors that are located significantly outside of the service area of the AAA or offer a limited scope of service (ex. Snowplowing).
 5. Providers will be made aware that, as per the Purchase of Service Agreement, no MI Choice Waiver participant may be solicited for, nor will they accept, additional or supplemental funding, obligations, or contributions in addition to the agreed upon and contracted rate for reimbursement.
 6. Insurance Accord Statements must be furnished by the provider that at minimum, lists NEMCSA as an additional insured on the general liability coverage. Business/Finance staff will review contract documents at a minimum annually to ensure that the required contract documents are current and valid.
 7. Upon compliance with established policies, procedures and practices, the agency will be designated as a Purchase of Service Provider. A provider folder will be maintained electronically, the provider's information will be added to the provider panel listing and Business/Finance staff will be notified of the need for entry into the Information Technology System(s).
 8. Upon receipt of the request, a Bid Agreement Packet will be mailed, emailed, or made available on the AAA website to the potential provider. Providers receive information concerning requirements that must be met to participate with the AAA, including, but not limited to:
 - a. Contract requirements per MDHHS, ACLS Bureau as well as local agency requirements
 - b. Service definitions and requirements
 - c. Complaint Process including Appeals and Grievances
 - d. Person-centered service delivery requirements
 - e. Health, safety, and welfare
 - f. Mandated abuse, neglect, exploitation, and other critical incident reporting
 - g. Mandated fraud, waste, and abuse reporting
 - h. Mandatory Staff Training Requirements

- i. Priority Classifications
 - j. Emergency Back-Up Activation and Notification
 - k. Instructions for enrolling into Community Health Automated Medicaid Processing System (CHAMPS) - required for MI Choice Waiver Providers only
9. AAA staff will be notified when changes are made to the provider listing.
10. The Associate AAA Director submits a listing of all contracted Purchase of Service vendors within 60 days of the effective date of the contract and within 30 days as changes occur to MDHHS. The provider network will maintain at least 125% capacity.
11. If it is determined by the Program Director that the provider panel is not sufficient, efforts will be taken to increase the number of qualified providers by seeking out vendors, advertising, peer referrals, etc.