PROVIDER TOOLBOX

Revised 11/18/2026

Visit our website at www.nemcsa.org to learn more about our agency and programs. The following links are provided to assist with quick access to forms, documents, policies, and resources related to our Community Based Care Programs and Purchase of Service Contracting Requirements.



To Open Links:

1. Place your mouse over the underlined word(s)
2. Hold down the Ctrl button
3. Left click your mouse

CONTRACT DOCUMENTS:

Application Packet – for anyone wishing to be a MI Choice Waiver provider

Applicant Contract Requirement Listing – list of contract requirements for applicants wishing to contract with NEMCSA

Business Associate Agreement – part of the MI Choice Waiver contract

Direct Deposit Form – optional for providers

False Claims Act Policy for Providers – policy and attestation for provider owner or manager to sign

FY 2026 Maximum Rates – maximum rates NEMCSA-Region 9 AAA will pay out for fiscal year 2026 by HCPC

FY 2026-2028 POS Subcontract – Main purchase of service contract document – provided for transparency

FY 2026-2028 POS Contract Supplement – Addendum G of the POS contract

HCPCS Service Codes – list of reimbursable MI Choice Waiver Service Codes

HHS Form 690 – Assurance of Compliance Form – applicants / subcontractors are required to complete this form via the U.S. Department of Health and Human Services online portal and supply proof of submission.

Sample Certificate of Liability Insurance – A sample Certificate of Insurance is included to provide a visual reference of some required coverages and limits outlined in the contract. This example is for illustration only and does *not* represent the exact format or document that must be submitted. Proof of insurance coverage may be provided in other acceptable formats, as not all required coverages may appear on a standard ACORD form.

Subcontractor Application – for applicants wishing to contract with NEMCSA

Vendor Contract Requirement Listing – list of contract requirements for established subcontractors

Vendor Billing Provider Certification Form – any provider user with access to vendor billing system is required to sign this form annually. Page 2 of document linked.

Vendor View and Vendor Billing Enrollment Form – to obtain access to Compass – the system vendors access for participant records, billing, messaging, and communications

FORMS/FLYERS:

Anonymous Reporting of Information – to share feedback or report concerns and complaints anonymously. This is not directly monitored by the MI Choice Waiver Compliance Officer

Employee Attestation for False Claims Act Policy – sample attestation for provider employees to sign; refer to False Claims Act Policy for Providers

EVV Provider Onboarding Form – HHAeXchange onboarding form for EVV providers

Fraud Flyer – disperse or display in an area where employees can see it

Grievance Form – for participants or providers to report a grievance to Region 9 AAA

In-Home Journal Participant – participant in –home journal example

In-Home Journal Residential Services – residential services in-home journal example

Live In Caregiver Attestation – form live-in caregivers complete to request exemption from using Electronic Visit Verification (EVV)

Medicaid Fraud and Abuse Online Complaint Form – link to report fraud and abuse to MDHHS. If you have questions/concerns, call toll free, 1-855-MI-FRAUD

Overpayment Reporting Form – to report overpayments to the NEMCSA-Region 9 AAA

Provider Feedback Report – used whenever a contracted provider identifies a problem or has a grievance

Provider Termination Reporting – to report for-cause provider terminations to NEMCSA-Region 9 AAA. For-cause terminations include terminations resulting from non-compliance with program rules, laws, or contract requirements. It is not voluntary and occurs when the provider's conduct, performance, or actions pose a risk to participants, program integrity, or proper use of Medicaid funds.

Summary of Resident's Rights: Discharge and Complaints – supplemental document to resident care agreements for residential service providers. This was created by MDHHS and LARA to fulfill the state and federal HCBS Final Rule requirement regarding discharge and complaint processes

Waiver Billing – paper bill in excel format

POLICIES:

Appeals Policy for Providers – covers appeal rights and process for network providers

Electronic Visit Verification (EVV) Policy – covers EVV requirements for the MI Choice Waiver Program. Applicable to CLS, Respite, and FI providers only.

Emergency Response Policy for Providers – establishes procedures for subcontracted providers in responding to declared or observed emergencies, including tornadoes, fires, extreme weather (heatwaves, ice storms, flooding), and power outages.

False Claims Act Policy for Providers – covers the requirements of the Deficit Reduction Act of 2005 which contains provisions to combat fraud and abuse in government health care programs

Medicaid Provider Manual – MDHHS manual contains coverage, operating standards, reimbursement and billing policies for Medicaid programs. The 95-page MI Choice Waiver section begins on page 1380 of the online document. Providers may request a hard copy from NEMCSA – Region 9 AAA at no charge to them by emailing aaa-compliance@nemcsa.org

Provider Compliance and Disenrollment Policy – covers provider monitoring visit process, overpayment and recoupment process, termination of provider contract for cause, and s to the Michigan Office of Inspector General (OIG)

Provider Enrollment and Qualifications Policy - Outlines provider enrollment process from expressed interest to signing of the contract

Provider Qualifications Policy - Outlines procedural requirements for hiring, criminal backgrounds checks, and minimum staff qualifications based on service type

Provider Requirements Policy – Outlines operating standards and compliance requirements set forth by the MDHHS, ACLS Bureau, NEMCSA – Region 9 AAA, and other federal or state laws as applicable. Also covers billing procedures for providers

Provider Support, Training, and Supervision Policy - Outlines procedural requirements for the support, training, and supervision of service providers

Service Need Levels – Outlines service need level classifications for MI Choice participants which helps ensure participant's needs are met in the event of an emergency

Training Requirements for NEMCSA-Region 9 AAA Providers – new hire, annual, and bi-annual training requirements for provider employees

RESOURCES:

Administrative Procedures Act of 1969 – Chapters 4 & 6 apply to network providers if appealing actions by the Officer of Inspector General (OIG)

Doing Business with Us – link to MI Choice Waiver information, requests for proposal documents, notice of availability of funds, pre-bidder's conference, and policies/ procedures

CHAMPS Provider Enrollment Instructions – how to instructions for new providers required to use EVV. Applicable to atypical provider types: CLS, Respite, and Fiscal Intermediary providers.

Critical Incidents PowerPoint – state resource that covers critical incidents

Invoice Requirements – requirements for submitting bills

Legislature serving Region 9

MDHHS – MI Choice Waiver Program – MDHHS resource page

MDHHS LARA Joint Guidance – requirements are specific to residential service providers

MI Login and CHAMPS Registration Instructions – how to instructions for new providers to register for MI Login and CHAMPS with MDHHS

NEMCSA – MI Choice Waiver Program – NEMCSA overview of MI Choice program

MI Public Act 28 of 2021 – covers criminal background check requirements for area agencies on aging and their providers

Screening & Testing for Tuberculosis (TB) – link to MDHHS website, includes TB forms

SAMPLE RESOURCES:

Have a Complaint or Grievance Flyer – applicable to residential service providers. Posting fulfills the state and federal HCBS Final Rule requirement for posting information about filing a complaint

Health, Safety, and Welfare Policy Sample – sample policy covering the identification, investigation, and resolution of incidents jeopardizing a program participant's health, safety, and welfare

In-Home Supervisory Visit – sample in-home supervisory visit form

Rights and Responsibilities Policy Sample – Sample policy covering expectations of program participants and agency providers

Sample Criminal Background Checklist – sample new hire/volunteer background checklist can be found on this website

MANDATORY EMPLOYEE / VOLUNTEER SCREENING:

Internet Criminal History Access Tool (ICHAT) – Michigan criminal history background checks

List of Excluded Individuals/Entities (LEIE) or OIG Exclusions Database – to identify individuals/entities excluded from participating in federally funded programs

Michigan Department of Licensing and Regulatory Affairs (LARA) – to verify professional license in Michigan is current and active

Michigan Public Sex Offender Registry – to identify convicted sex offenders on a state level

Michigan List of Sanctioned Providers – to identify individuals/entities excluded from participating in state funded programs. Excel and PDF reports are listed at the bottom of the webpage title “List of Sanctioned Providers”

Monthly Exclusionary Reports – to access LEIE downloadable database reports to compare against

National Sex Offender Registry – to identify convicted sex offenders on a national level

System of Award Management (SAM) – SAM screenings identify individuals/entities excluded from participating in state funded programs.

REGION 9 AAA CONTACT INFORMATION:

Office Staff Listing

Please report broken links to:
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