

ST. CLAIR COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

ADMINISTRATIVE PROCEDURE

Date Issued: 7/24

Page 1

CHAPTER Health / Medical	CHAPTER 04	SECTION 002	SUBJECT 0090
SECTION Health Care	SUBJECT Home and Community Based Services (HCBS) Provisional Approval Process		
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I. APPLICATION:

- SCCCMH Board
- SCCCMH Providers and Subcontractors
- Direct-Operated Programs
- Community Agency Contractors
- Residential Programs
- Specialized Foster Care

II. PURPOSE STATEMENT:

It is the policy of St Clair County Community Mental Health (SCCCMH) to communicate with Region 10 PIHP to approve provisional status for new residential and non-residential settings that wish to provide services to Home and Community Based Services (HCBS) participants. Provisional approval allows the Pre-Paid Inpatient Health Plan (PIHP)/Community Mental Health Service Provider (CMHSP) to contract with new providers who do not have a current HCBS participant receiving Medicaid services in their setting, ensuring that providers are not institutional or isolating in nature. Provisional approval is required before the provision of services to an HCBS participant.

III. DEFINITIONS:

- A. New Provider: A new provider is one who does not have a contractual agreement to provide services to Region 10 PIHP prior to October 1, 2017. Effective October 1, 2017, any new HCBS provider and their provider network must be in immediate compliance with the federal HCBS Final Rule in order to render services to Medicaid beneficiaries.
- B. Provisional Approval: Providers may receive provisional approval to provide HCBS services based upon the satisfactory completion and submission of a provisional approval application to the PIHP.

IV. STANDARDS:

- A. 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.

CHAPTER Health / Medical	CHAPTER 04	SECTION 002	SUBJECT 0090
SECTION Health Care	SUBJECT Home and Community Based Services (HCBS) Provisional Approval Process		

- B. 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.
- C. 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.

V. PROCEDURES:

St. Clair County Community Mental Health Authority (SCCCMH) works in tandem with Region 10 PIHP to approve provisional status for new residential and non-residential settings that wish to provide services to Home and Community Based Services (HCBS) participants.

SCCCMH Staff

1. Informs PIHP of new HCBS provider and requests Provisional Approval Application. See form [#00-HCBS-R, HCBS New Residential Provider Application](#), and form [#00-HCBS-NR, HCBS New Non-Residential Provider Provisional Application](#).

PIHP HCBS Staff

2. Confirms that new HCBS setting is not on the Heightened Scrutiny List.
3. Sends Provisional Approval Application to SCCCMH Staff.

SCCCMH Staff

4. Sends Provisional Approval Application to the new provider; the provider completes the application and returns the survey to SCCCMH staff.
5. Conducts a site review prior to submitting the Provisional Application to ensure the new provider, program, or setting does not have the qualities of an institution or have isolating factors.
6. Attests to PIHP that setting is not institutional or isolating in nature and returns the completed Provisional Approval Application to the PIHP.

PIHP Staff

CHAPTER Health / Medical	CHAPTER 04	SECTION 002	SUBJECT 0090
SECTION Health Care	SUBJECT Home and Community Based Services (HCBS) Provisional Approval Process		

7. Reviews submitted Provisional Approval Application.
8. Informs SCCCMH Staff of Provisional Approval.
9. Informs SCCCMH Staff if provisional approval is not granted and informs SCCCMH staff of steps that need to be taken to reach Provisional Approval Status.

CMH Staff

10. Responds to PIHP with any necessary follow-up information as requested.

PIHP Staff

11. Tracks all new providers, new sites, and new programs.
12. Administers all follow-up surveys within 90 days of provisional approval.
13. Maintains all documentation related to provisional approval activities.

VI. REFERENCES:

- A. MDHHS BHDDA New Home and Community Based Services Provider Requirements
- B. Medicaid Provider Manual
- C. MSA Bulletin 17-31 Compliance with Federal Home and Community Based Services (HCBS) Final Rule by New Providers
- D. Region 10 PIHP Home & Community Based Services Provisional Approval Process Chapter 5, Section 3, Subject 14
- E. #00-HCBS-R, HCBS New Residential Provider Application
- F. #00-HCBS-NR, HCBS New Non-Residential Provider Provisional Application
- G. Form [#00-HCBS-NR, HCBS New Non-Residential Provider Provisional Application](#)
- H. Form [#00-HCBS-R, HCBS New Residential Provider Application](#)

VII. EXHIBITS:

None Available

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VIII. REVISION HISTORY

None Available