

**The Senior Alliance
Annual Vendor
Meeting and Training**

January 24, 2023





Ground Rules



- Make sure your phone is muted or is on vibrate.
- Hold all questions until the end of the presentation.
- Please state your name and the name of the vendor agency you represent before asking a question.
- Please ensure that you have signed in at the desk outside of the auditorium.
- At the end of this presentation is an attached document that must be signed and returned to TSA. Please leave a signed hard copy at the sign-in table before you leave.
- Be sure to stay after the meeting for the Vendor Appreciation Luncheon.

This presentation will be available on TSA's website:

<https://thesenioralliance.org/tsa-providers/>



CEO Introduction

Jason Maciejewski

Agenda

1. Introduction – TSA Staff
2. Updated Contact Information
3. General Vendor Requirements
4. OIG/Fraud, Waste, and Abuse
5. Communication and Caregiver Issues
6. Assessment and Invoicing Information
7. Background Check Training
8. Direct Care Worker Fund
9. Questions
10. Acknowledgement Signature Page
11. Vendor Appreciation Luncheon

INTRODUCTION/CONTACT INFORMATION

Jason Maciejewski	Chief Executive Officer
Kelly Faber	Chief Operations Officer/Deputy Director
Jeffery Hawkins	Chief Financial Officer
Lydia Gold	Compliance Officer
Andrew Dabrowski	Chief Program Officer
Amanda Sears	Director of Programs and Special Projects
Gail Wejrowski	CCD Waiver Clinical Manager
Melissa Gaynier	CCD Program Manager
Sarah Driscoll	CCD Program Manager
Tara Murphy	CCD Quality and Training Manager
Marissa Colling	CCD Quality and Training Manager

INTRODUCTION/CONTACT INFORMATION

Beth Wright	Contracts Manager	734-612-4280	ewright@thesenioralliance.org
Ann Marie Calka	Contracts Specialist	734-516-0369	ACalka@thesenioralliance.org
Susan Ross	Accounting Manager	734-716-3331	SRoss@thesenioralliance.org
David Horvath	Accounting Manager	734-776-0195	DHorvath@thesenioralliance.org
Sue Colson	Accounting Specialist	734-776-0223	scolson@thesenioralliance.org
Katie Teachout	Accounting Specialist	734-776-0202	kteachout@thesenioralliance.org
Adiell Childress	Accounting Specialist	734-776-0222	achildress@thesenioralliance.org
Diane Browne	Accounting Specialist	734-727-2081	dbrowne@thesenioralliance.org
Renee Farrugia	CCD Support Specialist	734-716-7933	

Updated Contact Info

- TSA mailing address:
 - 5454 Venoy Wayne, MI 48184
- We prefer that all documentation be emailed to ewright@thesenioralliance.org.
- Ask insurance agents to email copies of insurance certificates instead of mailing certificates.
- Beth Wright TSA cell phone number:
 - 734-612-4280
- Updated regulatory agency –
 - Aging and Adult Services Agency (AASA/HASA) is now Bureau of Aging, Community Living, and Supports (ACLS)

A dark grey arrow points to the right from the left edge of the slide. Below it, several thin, light blue lines curve upwards and to the right, creating a decorative graphic element.

Upcoming New Requirements

- Diversity, Equity, and Inclusion (DEI) training to be held in the future.
- New process for obtaining ownership disclosures from Vendors will be implemented soon.
- TSA will be looking at the IT security and internal controls that vendors have in place.
- We are hoping for more information on Electronic Visit Verification (EVV) from the State this year.
- There should be some updates to Vendor View and Vendor Billing within the next year.



Vendor View Updates

- TSA expects that an updated version of Vendor View/Vendor Billing will be implemented sometime in 2023.
- We will update vendors when we have more information.
- CIM has alerted TSA that in the future, Vendor View users for a vendor will not be able to have the same email address.
- Vendors will need to assign a separate email address to each vendor view and vendor billing user.
- TSA staff will be looking into this further this year, in preparation of the updates that will be coming to Vendor View/Vendor Billing.
- TSA will also be reviewing Vendor View and Vendor Billing accounts to ensure that all users for each vendor are active.
- CIM is also reviewing Vendor View users and may have already reached out to your agency regarding Vendor View users.
- Please continue to reach out to me if you need to add or delete users.

Premium Pay Rate Increase for Direct Care Workers

- Premium Pay was extended through 9/30/23.
- The rate for workers is \$2.35, and the admin rate is \$0.29. The unit rate is \$0.66.
- TSA will continue to notify Vendors when/if the premium pay rate increase has been extended for home care workers providing designated services.
- The last attestations that were submitted will continue to be valid throughout any additional extensions of the premium pay rate increase, so additional attestations do not need to be submitted.
- Continue to reach out to the Fiscal department if you have any issues with the premium pay you received.
- TSA is required to audit DCW premium pay increase per State requirements. Premium pay documentation needs to be maintained in a way that can be easily tracked and audited. This must be a separate line item on the check/paystub that indicates “PREMIUM PAY” or a description along those lines, and shows the premium pay rate.
- Be sure to indicate on paystubs the change in rate between fiscal years moving forward, as needed.

Vendor Employee Exclusion List Review

- Vendors must screen all employees with access to TSA client information through the following regulatory agencies before hire:
 - Michigan Department of Health and Human Services (MDHHS) Sanctioned Providers List
 - Office of Inspector General (OIG) Exclusions Database
 - System for Award Management (SAM) Debarment Search
- TSA utilizes the service Provider Trust to conduct all exclusion checks for TSA employees.
- Vendors must conduct exclusion reviews for employees on a **monthly basis**.
- Documentation of conducting exclusion reviews must be printed and kept on file.
- TSA cannot reimburse services performed by individuals who are excluded from receiving State or Federal Medicare/Medicaid funding.
- Vendors must submit **quarterly** attestation forms to TSA certifying that they have conducted exclusion reviews for all employees.
- **Attestations are due on January 15, April 15, July 15, October 15 every year.**

Insurance

- The following insurance is required to be renewed and kept at the required limits throughout the Agreement period:
 - General and Professional Liability: \$1,000,000 limits minimum, TSA listed as additional insured
 - Auto Liability: \$1,000,000 limits minimum, TSA listed as additional insured
 - Transportation vendors with company vehicles must include “scheduled autos”
 - Worker’s Compensation: \$500,000 limits minimum
 - Third Party Crime/Dishonesty Bond: \$50,000 minimum per occurrence
 - Cyber liability: \$500,000 minimum
 - Sexual Abuse and Molestation Liability: \$500,000 minimum (may be included in General Liability as Abuse Coverage – check with insurance provider)
 - Employer’s liability: \$500,000 minimum (may be included in Workers’ Compensation – check with insurance provider)
- TSA must be listed as certificate holder.
- Vendor is required to have their insurance provider send updated certificates before the expiration date.
- **If updated insurance is not received by the expiration date, corrective action may be taken, including contract termination.**



Annual Service Standard Verification (ASV)

- TSA is requiring that certain documentation be submitted on an annual basis in order to confirm compliance with MDHHS service standards.
- Updated copies of these documents may be requested at any time throughout the year for audit purposes, which may include licenses, insurance, and certain policies depending on the services being provided.
- When licenses expire, renewed copies need to be sent to TSA.



Additional Home Care Standards

- If caregivers are transporting participants, they must be properly licensed and insured.
- Family caregivers cannot be the spouse of the participant.
- Family members who provide home care services must meet the same standards as caregivers who are unrelated to the participant.
- If the participant is not able to administer their own medications, the medication must be administered by properly trained staff/under the supervision of trained staff or RN.
- In licensed residential settings (AFC/HFA), the owner/managers of the facility qualify to supervise staff.

New Transportation Requirements from FY 2022

- Each provider or individual driver must not be excluded from participation in any federal health care program, listed on the MDHHS sanctioned provider list, and/or listed on the exclusion list of the OIG.
- Each individual driver must have a valid driver's license
- Each provider and individual driver must disclose to the waiver agency the driving history of each individual driver employed by a provider, including any traffic violations.
- Individual drivers who have ANY of the following convictions in the past two years will be excluded as an NEMT provider:
 - More than two moving violations
 - Operating While Intoxicated (OWI)
 - Driving Under the Influence (DUI)



Supervisory Visits



- Supervisory Visits – RNs are required to perform supervisory visits for H2015 and T1019 services.
 - LPNs do not qualify under these standards.
- This standard is from the MI Choice Waiver Operating Standards and MI Health Link Operating Standards.
- This includes tasks like bathing, incontinence, medication reminders, and dementia care.
- Vendors must have evidence of 2 supervisory visits performed by an RN per year.
- When receiving an assessment from TSA, we are looking to make sure that you have an RN on staff to perform visits. We will be looking at Supervisory Visit forms to make sure they are completed by an RN.
- If you are no longer employing an RN, please let me know.



Nursing Notes



- If you provide nursing services under HCPCs T1000, T1002, and T1003, you are required to send monthly nursing notes to TSA through vendor view, or faxed to 734-727-2089. **These must be sent by the 5th of the month.**
- Nursing notes must include:
 - Summary of participant's current health conditions
 - Changes in health from previous assessment
 - Tasks being performed are per physician's orders (Yes/No)
 - Tasks performed are meeting participant's medical needs (Yes/No)
 - Additional comments
- **This is a major compliance issue. TSA may take corrective action up to and including contract termination for those vendors who continuously do not submit nursing notes.**



Medication Set Ups

- If you are authorized to perform medication set ups through an RN/LPN, the following steps need to be taken:
 - Contact the physician to obtain a current medication list prior to setting up the medications. **Vendors should not use the medication list given through Vendor View, as this may not be up-to-date. Vendor should send updated medication list or notify TSA of change.**
 - Contact the participant two days before the visit to verify that all prescriptions have been filled and are available for set-up. If the participant is not able to get the prescriptions filled, contact the participant's Supports Coordinator (SC) to discuss the situation.
 - If the participant reports that the medications have changed, contact the physician to confirm. If the participant gives information that is different than the medication list provided by the physician, do not assume that the participant fully understood the physician's instructions.
 - Contact the SC through vendor view/phone to address any issues or concerns within two business days.
 - Nursing Notes need to be submitted monthly via vendor view.



Critical Incident Reporting

- This is a reminder to Vendors to report all critical incidents to Supports Coordinators within 2 days of the incident/knowledge of the incident.
- Vendors should call SCs right away to report the critical incident.
- After calling the SC, Vendors should send a written report or vendor view message giving the details of the incident within 24 hours of calling the SC. All details that can be provided are helpful, and Vendors should include direct quotes when possible.
- If Vendor receives any additional information on the incident after the initial report, the SC should be updated continually.
- TSA expects that Vendor/Vendor staff will call APS, emergency services, and/or LARA depending on the situation.
- Critical incidents that need to be reported include but are not limited to medication errors, theft, neglect, exploitation, any type of abuse, illegal activity in the home, missed visits for those with critical care needs, elopement, or suspicious/unexpected death.



Program Operational Guidelines & Standards

- ▶ Vendors should be familiar with MDHHS MI Choice and MI Health Link Minimum Operating Guidelines.
- ▶ TSA will update vendors when any new service standards or guidelines for FY 2023 are updated on the website.
- ▶ These standards show the minimum expectations TSA has for each service performed.
- ▶ The standards can be found at <https://thesenioralliance.org/tsa-providers/>.

OIG Reporting

- Office of Inspector General (OIG) is requiring that certain information be submitted in quarterly reports for MI Choice Waiver participants.
- TSA will be reporting to OIG any time that any money is deducted from a POS Vendor payment.
- This includes:
 - Assessment findings
 - Billing when services were not provided for any reason, including missed visits, hospitalizations, nursing home admissions, participant not home, etc.
 - Paper bill edits
 - Data mining activities

OIG Reporting

- The state will now be aware of any time Vendors bill when services were not provided, including deductions in payments from discrepancies at audits and billing when participants are in the hospital.
- **This shows the importance of ensuring that bills are only submitted when services were provided.**
- **Vendors should also stress the importance of having proper backup documentation (timesheets) to support all units billed.**

OIG Reporting

- TSA is also required to send reports to OIG throughout the year regarding the following:
 - Vendors/caregivers with credible allegations of fraud
 - Vendors/individuals who are found to have active exclusions
 - Any time TSA takes adverse action against a Vendor (termination of contract)
 - Any time TSA requests that the vendor send support documentation before a bill is approved



Timesheet Accuracy

- All caregivers should be trained on how to properly fill out timesheets.
- Importance of accurate timesheets should be stressed.
- Errors on timesheets/missing components can be considered fraud.
- Participants should be signing timesheets that accurately describe the services that were provided.
- **Units should not be billed in vendor billing if there is not an accurate timesheet signed by a participant to support the units.**
- Timesheet templates can be found on our website at: <https://thesenioralliance.org/tsa-providers/>
- **TSA can also provide training on how to properly fill out timesheets upon request.**


Common Timesheet Issues

- Participant name should be filled out and spelled correctly.
- Time in and time out should accurately reflect the time the caregiver arrived and left. The dates on timesheets should be in week order, and not document multiple dates with one participant signature/initial.
- Tasks should be checked off for all services completed.
- Checked off tasks should help show the services the participant received each day and should match services listed on the authorization.
- Caregivers should be signing off and therefore confirming the services they provided for the week.
- Participant should only be signing after services have been provided on the same day they were provided.
- Participant signatures are required for services provided at a residential settings (AFCs, HFAs, Assisted Living, etc), as well as participants living in their own home.
- Participants should not be signing before the services are provided, or a few days after.
- Caregivers should not submit pre-filled out/copied timesheets – this is fraud.
- Caregiver, family members, etc. should not be signing the participant's name for participant. Family members can sign their own name if participant cannot sign. Caregivers can write "unable to sign" if participant cannot sign.
- **Units should not be billed if there is no participant signature.**



Timesheet Fraud

- If TSA reviews timesheets and there is not evidence to support the units billed, TSA must recoup the funds.
- If any timesheets appear to be fraudulently signed or filled out, TSA is required to report to the Office of Inspector General (OIG).
- If the participant is in the hospital/nursing home/rehab/deceased and units are billed on these dates, TSA is required to recoup the funds and report to OIG.
- Vendors must report to TSA if they believe any caregivers are submitting fraudulent timesheets as soon as they are aware of the problem and submit copies of the fraudulent timesheets to TSA.



Fraud, Waste & Abuse

Fraud

- **Fraud** is knowingly and willfully executing, or attempting to execute, a scheme or artifice to defraud any health care benefit program, or to obtain, by means of false or fraudulent pretenses, representations, or promises, any of the money or property owned by, or under the custody or control of, any health care benefit program. The Health Care Fraud Statute makes it a criminal offense to knowingly and willfully execute a scheme to defraud a health care benefit program. This applies to the fraudulent completion and submission of timesheets/cards in order to collect payment for hours not worked, hours above what has been approved by the WA/SC and having the participant sign blank timesheets/cards. Health care fraud is punishable by imprisonment for up to 10 years. It is also subject to criminal fines of up to \$250,000. (CMS)

Waste & Abuse

- **Waste** includes overusing services, or other practices that, directly or indirectly, result in unnecessary costs to the Medicare Program. Waste is generally not considered to be caused by criminally negligent actions but rather by the misuse of resources. (CMS)
- **Abuse** includes actions that may, directly or indirectly, result in unnecessary costs to the Medicare Program. Abuse involves payment for items or services when there is not legal entitlement to that payment and the provider has not knowingly and/or intentionally misrepresented facts to obtain payment. (CMS)

How To Report

For Medicare:

- US Department of Health and Human Services (HHS)
- Call 1-800-Medicare (1-800-663-4227)
- TTY users call 1-877-486-2048
- Online at <https://oig.hhs.gov>

For Medicaid:

- Michigan Department of Community Health (MDHHS)
- Phone (toll free): 1-855-MI-FRAUD (1-855-643-7283)
- Online: www.michigan.gov/fraud
- Write: Office of Inspector General (OIG), PO Box 30479 Lansing, MI 48909
- Reports can be made anonymously

AmeriHealth

- **Call:** Anonymous Fraud Tip Hotline at **1-866-833-9718**.
- **Email:** fraudtip@amerihealthcaritas.com
- **Mail:** Special Investigations Unit
Amerihealth Caritas 3875 West Chester
Pike, Newtown Square, PA 19073
- **Call Corporate Compliance:** 1-800-575-0417
- **Email:**
corpcomp@amerihealthcaritas.com

HAP

- Call HAP's Compliance Hotline 24 hours a day at (877) 746-2501.
- Report possible fraud in writing to HAP and include your contract number, date of service and other information that you think may be useful. Send your report to:

HAP
Compliance Department
2850 West Grand Boulevard
Detroit, MI 48202

Meridian/ Michigan Complete Health

- Compliance Help Line: 1-800-345-1642 or
- Fraud Waste and Abuse Line: 866-685-8664

Reporting Compliance Concerns

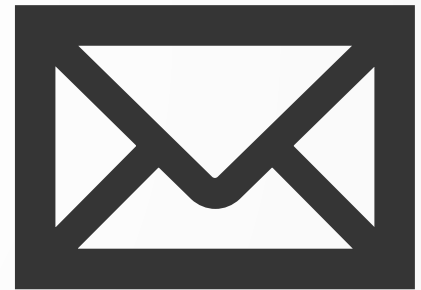
- Concerns can be reported through your agency process or may be reported directly to TSA. To report to TSA:
- Call 734-722-2830, ext. 2001
- Email Compliance_Issues@thesenioralliance.org
- To report anonymously, mail concerns to:
The Senior Alliance
Attn: Compliance Officer
5454 Venoy
Wayne, MI 48184

Must
Review and
Distribute
to Staff:

- ▶ <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/MedCandDGenCompdownload.pdf>
- ▶ <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/CombMedCandDFWAdownload.pdf>

Sending Secure Emails

- All emails that contain any participant information, whether they are sent to TSA or anyone else at your agency, must be sent securely.
- Instructions for sending secure emails to TSA can be sent to Vendors upon request.
- Caregivers should not be texting/emailing timesheets or any information about participants. All communication regarding participants should be made through HIPAA compliant portals.





Reporting Participant Status Changes

- Vendors must report to TSA through vendor view any changes in participant status as soon as they are made aware of the change.
- This includes admissions to the hospital, nursing home, or rehab facility.
- Status changes that are not reported can have fraud implications.
- **Vendors must stress the importance of reporting hospitalizations to all caregivers, including those that are family or friends of the participant.**
- Caregivers should be made aware that not reporting hospitalizations and/or forging timesheets can jeopardize their ability to continue to care for their family member/friend.



Communication



- Vendors are required to keep the lines of communication open and provide ongoing feedback on participants.
- This includes:
 - Clearing voicemail boxes and email so TSA staff can leave messages
 - Returning voicemails in a reasonable time frame
 - Checking vendor view messages every 24 hours
 - Having someone with vendor view access available to check vendor view messages every day during business hours
- TSA is an expert in community supports and resources. If you identify anyone (participant, family member, caregiver, etc.) in need of resources, please call The Senior Alliance.
- If your phone is not working temporarily, please let TSA know the best way to contact you for the time being.
- TSA should be alerted when there is a change in address, phone number, email address etc.
- Vendors must not contact participants after services have been stopped with your company.

Send a Vendor View Message for:

- Missed visits by the caregiver for any hours worked less than the care plan
- Visits/caregiver refused by the participant
- Participant not home for visit
- Not able to staff case
- Falls/accidents/injuries
- Change in participant mental/physical condition
- Significant change to informal supports of the participant
- Problems with the home/environment of the participant
- Participant admitted to hospital, rehab, or nursing facility
- Critical incident reporting (after phone call to SC has been made)
- Changes in vendor view/vendor billing users
- Changes in contact information, including phone numbers, addresses, EIN number, email addresses, etc.
- Questions about authorizations
- Anything containing Protected Health Information (PHI)

When in doubt, send a vendor view message.

Missed Visit Reporting

- Missed visits should be reported through vendor view AND vendor billing.
- In vendor billing, all missed visits should be documented using the following codes:

Missed Visit Codes	
PC - PARTICIPANT CANCELLED	VH - VENDOR HOLIDAY
PDH - PARTICIPANT DECREASED HOURS	VIW - VENDOR INCLEMENT WEATHER
PH - PARTICIPANT HOSPITALIZED	VNA - VENDOR/WORKER NO SHOW
PNA - PARTICIPANT NOT AVAILABLE	VNA - VENDOR/WORKER NOT AVAILABLE
PNF - PARTICIPANT NURSING FACILITY	VS - VENDOR/WORKER SICK
PRW - PARTICIPANT REFUSED WORKER	VSP - VENDOR/WORKER SCHEDULING PROBLEMS
PS - PARTICIPANT SICK	

Archiving Vendor View Notices/ Messages

- All Vendor View notices and messages should be archived once read within 24 hours of being posted.
- By archiving a service authorization or assessment, you are accepting the person centered service plan, agreeing to the terms of the authorization, and agreeing to begin services on the authorized start date.
- All service authorizations and assessments should be printed and placed in participant files once received.
- Archived messages and notices can still be viewed in the “archived messages” tab.
- If messages/notifications are not archived, TSA will assume that the message has not been read and Vendor is therefore out of compliance.
- Vendor View should be checked at a minimum twice per day. A best practice is to keep Vendor View open at all times.
- Notification through email is only sent through an automated system **twice a day** at 11:30AM and 3:30PM, so do not rely on the email system if you are in immediate need of an authorization.

Common Caregiver “Don’ts”

- Caregivers/staff should be trained **not to**:
 - Discuss personal/financial problems with or in front of participants
 - Bring children, pets, or other family members to the homes of participants
 - Attempt to convince participants that they need more hours/services
 - Solicit participants to receive other services offered by the vendor, including services not covered by the MI Choice, MI Health Link, or CM/CCS programs
 - Discuss participant information in front of another TSA participant, as this is a HIPAA violation
 - Dress inappropriately/out of work uniform. Caregivers should be dressed professionally and have picture ID/name badges on them
 - Use cellphones while at the home of participants
 - Sleep on the job
 - Use participant personal items
 - Smoke in participant homes
 - Smoke before/after/during the transportation of participants



Caregivers Working on Holidays

- If you are authorized to provide services that fall on a holiday, your agency must ensure that services are provided that day.
- Unless it is agreed upon with the participant that services will be performed on a different day or are all together canceled, Vendor must continue to provide services on holidays.
- Vendors must ensure that TSA and applicable participants are notified if services are moved or canceled due to a holiday.

Updated Fiscal/Programmatic Assessments

- Fiscal/Programmatic assessment procedures were updated midway through FY 2020, and are currently being conducted virtually, as opposed to on-site.
- TSA will now be sending vendors a list of documents that need to be pulled before the assessment, and documents will need to be submitted electronically.
- Documents that would need to be submitted include but are not limited to:
 - A sample of employee personnel files, which include background checks, training records, new hire documentation, etc
 - A sample of participant files, which include authorizations, assessments, progress notes, etc
 - Selected timesheets
 - Licenses
 - Proof of insurance
 - Policies and Procedures
 - Selected Payroll, that must include evidence of premium pay if applicable
 - Bank statements to be traced to payroll
- TSA reserves the right to assess providers at any time during the fiscal year, to conduct a secondary audit select a larger sample size, or to take corrective action up to termination.

Payroll Testing – Fiscal Assessment

In order to meet MDHHS audit requirements, TSA is requiring that Vendors send copies of banking records showing payment to caregiver(s) as part of the assessment. This must include the following:

- Bank statement with a line showing payment to the selected caregiver for the payroll period.
- If the caregiver is paid through direct deposit, a payroll report showing the net pay for the selected caregiver, as well as the total net pay for the pay period matching the debit to your bank account.
- If the caregiver is paid by check, a payroll report showing the caregiver's net pay for the period selected.
- All caregivers should have provided services to the participants selected by TSA as part of the assessment sample.

Feel free to redact any bank statement information not pertinent to completing the above requests. This could include account numbers and balances.

Vendor Audit Portal

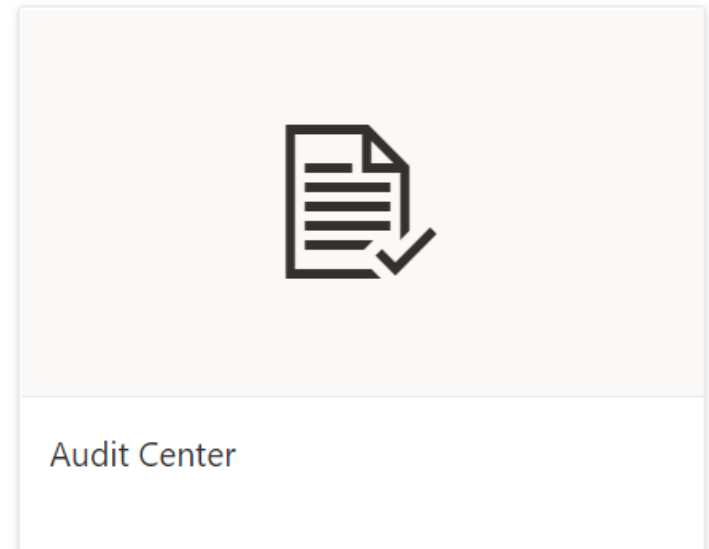
- TSA is now using an online Vendor Audit Portal to conduct assessments. This is a secure website where Vendors can submit their audit documentation.
- In order to access Vendor Audit Portal, you will need a free Microsoft Office Account and will need to use the Microsoft Authenticator app.
- Directions on setting up your account and gaining access to the Vendor Audit Portal will be sent 30 days before your audit documentation is due.
- We prefer that you submit documentation in the following manner:
 - Submit one PDF per employee that has all required employee file documents (do not separate background checks, training, references etc. into separate files). **Zip Folders can also be submitted.**
 - Keep timesheets in PDFs or Zip folders in alphabetical order per participant, and in date order. Unorganized timesheets lead to TSA staff missing timesheets and assuming they were not submitted.
 - Please use the correct categories offered when uploading documents (i.e. place insurance certificates under the “Insurance” category).
 - Make sure you upload timesheets for all participants given on the list from TSA. You would receive the list at the same time you are notified that you are receiving an assessment.
 - Ensure that scans of timesheets are easy to read. If you submit a scan that we are not able to read, we will not be able to use it as evidence that services are provided.

Additional Audit Portal Instructions

- To access the portal, please use the following link:

<https://tsalink.sharepoint.com/sites/WelcomeExternalUsers>

- Once you get to the Welcome Page, click the Audit Center link
- Do not save the audit center direct link. The best way to get to the app is through the link above.



Additional Audit Portal Instructions

- If you have used the portal before, you should be able to see your past submissions.
- For a new audit year, all vendors should start a new submission using the **New Audit** button:

The screenshot displays the 'Vendor Audits' interface. At the top left, the text 'Vendor Audits' is visible. In the top right corner, there is a blue button labeled 'New Audit' and a circular refresh icon. Below the header, a list of audit entries is shown, each with a redacted name and a right-pointing chevron. The entries are categorized with orange text: 'New' and 'Submitted By Vendor'. The first entry is redacted. The second entry is labeled 'New'. The third entry is redacted. The fourth entry is labeled 'Submitted By Vendor'. The fifth entry is 'Test Ali' and is labeled 'New'. At the bottom left, it says 'Last Activity: 7/28/2022 4:12 PM'. At the bottom right, the text 'Welcome to TSA Vendor Audit System' is displayed.

Additional Audit Portal Instructions

Uploading Documents

Method 1 (Using Quick Upload):

1. Select the document using the file selector. You can only upload 1 document at a time. However, you can upload multiple documents at a time by putting them in a Zip folder.
2. Select a document type. You must select a document type, or the file will not be accepted.
3. Hit the upload button and wait for the success message.

Audit: [Redacted] Vendor: Test Status: New

Test

* Vendor Representative
Ali

* Vendor Email
aaljishi@[Redacted]

ASSESSMENT DATE
7/28/2022

CONTRACT PERIOD COVERED TO
12/31/2001

tools.

4. Once all required documentation has been uploaded, hit "Submit for Review."
Note: You will not be able to remove files after you submit the audit for review.

Instructions and Templates

- FY 2022 Fiscal Monitoring Tool Revised.xlsx
- POS Vendor Audit Portal Instructions 2022.docx
- TSA PROVIDER MONITORING TOOL 2022.docx

Quick Upload

TSA External User Sign Up Procc... Uns... X

Max. number files reached.

Document Type
Fiscal Documentation (Transportation Logs)

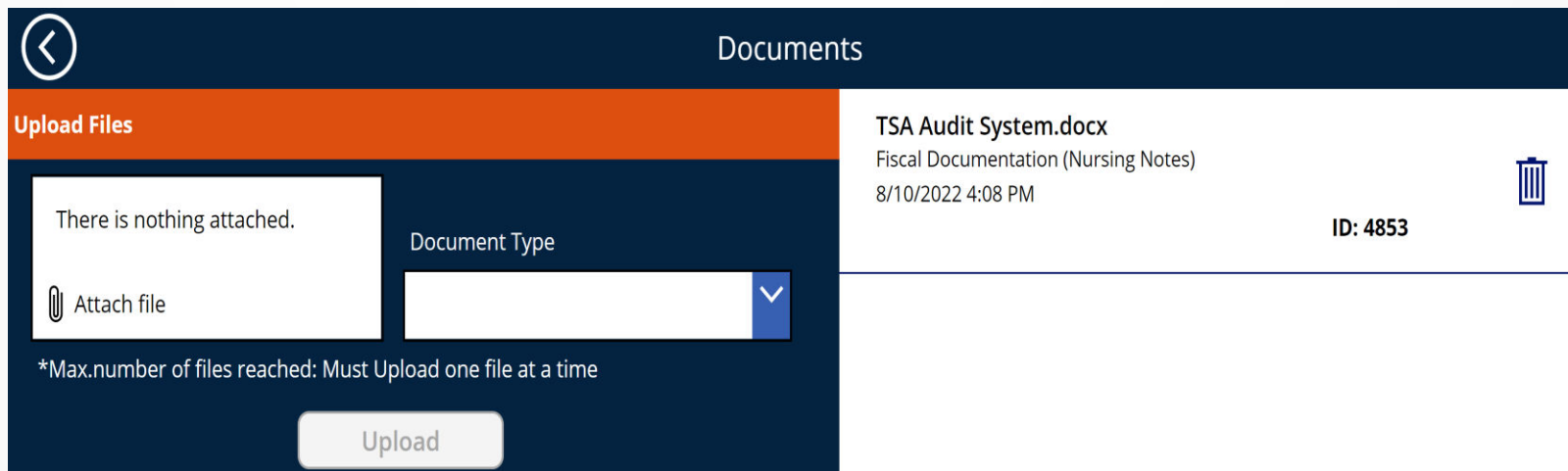
Upload

Additional Audit Portal Instructions

Uploading Documents

Method 2: Document tab at the bottom of the Audit Portal Page

- The steps to upload documents are the same as the Quick Upload instructions.
- You can only upload 1 document at a time. However, you can upload multiple documents at a time by putting them in a Zip folder and uploading 1 Zip folder at a time.
- Under this tab you will be able to see your uploaded documents/Zip Folders and can confirm that all of your documents have been uploaded.



The screenshot displays the 'Documents' section of the Audit Portal. On the left, there is an 'Upload Files' section with a dark blue header and an orange bar. Below the header, a white box contains the text 'There is nothing attached.' and an 'Attach file' button with a paperclip icon. To the right of this box is a 'Document Type' dropdown menu. At the bottom of the upload section, a note states '*Max.number of files reached: Must Upload one file at a time' and an 'Upload' button is visible. On the right side of the screen, a list of documents is shown. The first entry is 'TSA Audit System.docx', with a subtitle 'Fiscal Documentation (Nursing Notes)', a date '8/10/2022 4:08 PM', and an 'ID: 4853'. A trash can icon is located to the right of the document entry.

A dark grey arrow points to the right from the left edge of the slide. Several thin, curved lines in shades of blue and grey originate from the left side and sweep across the page towards the right.

Additional Audit Portal Instructions

- After you start an audit, please test the system and upload a document.
- If you experience any issues with uploading documents email ewright@thesenioralliance.org and we can set up a meeting with Red Level to investigate the issue.

Authorizations/Billing

- Units billed will only be approved if they are within the weekly amount authorized (Sunday – Saturday)
- “Times and days may vary” must exist within the weekly amount authorized. **Please verify that all applicable authorizations state “times and days may vary” if you are billing on dates outside the care plan.**
- Example – If a participant is out of town for one week, they cannot make up their hours the following week.
- The dates that services were provided on should always match the dates billed.
- TSA will not provide an authorization, assessment, and/or medication list to a vendor until it has been confirmed that the vendor has a worker in place and services will be starting on a specific date.

Additional Billing Reminders

- If you receive authorization for both Homemaking and Personal Care services, do not go over either the Homemaking or Personal Care weekly authorized units.
- Make sure that units are not billed when authorizations are stopped for the participant being in the hospital.
- Vendors should bill by the timesheets, not by the care plan.
- Home care vendors who receive authorizations for transportation mileage must have a corresponding log documenting the mileage in order to bill.

Invoicing Information

- Do not perform services until you have received **WRITTEN** authorization via Vendor View.
- If you do not receive Vendor View authorization within 2 business days, immediately call the Supports Coordinator or send a Vendor View message. Your invoice may be rejected.
- Monthly billing is due by the 5th of each month.
- Vendors cannot bill participant over and above what TSA reimburses vendors.
- Billing should only be submitted **once per month**. Please do not send multiple batches per billing cycle. If you receive late timesheets after your billing has been submitted, please submit the following month.
- Payments are released the Friday following the fourth Thursday of the month unless otherwise noted. Vendors will be contacted via Vendor View with any changes or variation to this schedule.
- Please cash checks in a **timely manner**.
- Paper bills and Summary Sheet are required when submitting additional units for dates that have already been posted in Vendor Billing. The forms and instructions are available on the TSA website: <https://thesenioralliance.org/tsa-providers/>

ACH Form

- TSA is requiring that POS Vendors utilize ACH payments.
- Completed forms can be emailed to ewright@thesenioralliance.org
- When filling out the ACH form, please be sure that the routing number and account numbers are filled out correctly.
- If an account number is entered wrong on the form, TSA is not responsible for missing payments.
- ACH forms can be found on the website: <https://thesenioralliance.org/tsa-providers/>



Training



- TSA is mandating that the following trainings be completed by staff on an annual basis:
 - Cultural Competency/Awareness of Personal Prejudices
 - ADA Compliance
 - Disability Awareness/Chronic Conditions
 - Person Centered Planning
 - Critical Incident/Abuse and Neglect Reporting
 - Fraud, Waste, and Abuse, Including 2 Medicare Compliance Trainings
 - HIPAA Compliance
- These trainings will be available to Vendors through a provided PowerPoint presentation, which can be directly used to train staff.
- It is the responsibility of the vendor to make sure their staff is trained in these areas on an annual basis.
- Any new employees hired throughout the year must be trained on these materials as well.
- Please sign and submit the attestation form stating that trainings will be distributed to staff after this meeting.
- TSA will be scheduling a Diversity, Equity, and Inclusion training in the future for all Vendors to attend.

Abbreviations

- MHL – MI Health Link
- MDHHS – Michigan Department of Health and Human Services
- CIM – Center for Information Management Inc.
- CHAMPS - Community Health Automated Medicaid Processing System
- EVV – Electronic Visit Verification System
- ACLS – Bureau of Aging, Community Living, and Supports
- OIG – Office of Inspector General
- SAM – System for Award Management
- CCD – Community Care Department
- POS – Purchase of Service
- NEMT – Non-Emergency Medical Transportation
- SC – Supports Coordinator

Questions?





Background Check Training

Background Check Reminders

- The following needs to be conducted for employees:
 - **ICHAT Criminal History Screenings** – Upon hire and every 3 years thereafter
 - **Federal Sex Offender Registry** – Upon hire and every 3 years thereafter
 - **Michigan Sex Offender Registry** – Upon hire and every 3 years thereafter
- TSA can provide instructions on conducting any of the above background checks upon request.

Criminal History Screenings

- All vendors must conduct background checks for employees upon hire.
- Background checks are required for any of the following individuals:
 - Any individual with ownership interest in the agency
 - Any individual who is providing services or has direct access to client information
 - Any person providing services to client that is reimbursed under Medicaid
- Background checks must be conducted every 3 years at a minimum.
- **Vendors cannot hire caregivers with mandatory exclusions.**
- Caregivers with permissive exclusions can only be hired if:
 - Participant has chosen family/friend to be their caregiver (Personal Choice).
 - Participant signs a waiver stating that they are aware of the permissive exclusion.
 - Caregiver cannot serve any other participants.
- Any excludable convictions discovered for current caregivers serving TSA participants must be disclosed to TSA.
- TSA cannot reimburse any services performed by caregivers who have permissive exclusions (excluding personal choice caregivers) or for any services performed by caregivers who have mandatory exclusions.

Criminal History Screenings

- **Employees with any of the following mandatory exclusions must not serve TSA participants under any program:**
 - Conviction of a criminal offense related to the delivery of an item or service under any federal or state health care program;
 - Conviction under federal or state law, relating to neglect or abuse of patients in connection with a delivery of a health care item or service;
 - Conviction of a felony criminal offense relating to fraud, theft, embezzlement, breach of fiduciary responsibility, or other financial misconduct, which occurred after August 21, 1996, under federal or state law, in connection with the delivery of health care items or services or with respect to any act or omission in a health care program (other than those specifically mentioned above), operated by or financed in whole or in part by any federal, state, or local government agency;
 - Conviction of a felony criminal offense, which occurred after August 21, 1996, under federal or state law, related to unlawful manufacture, distribution, prescription, or dispensing of a controlled substance.

MHL Permissive Exclusion Process

- Due to changes made to MDHHS MI Health Link Operating Standards, the MHL Permissive Exclusion Process has changed. This process has been updated in the TSA Operational Guidelines.
- Please note that this process only applies to family caregivers hired through the MI Health Link Program. Please use the steps listed below:
 - TSA contacts vendor to let them know that a family caregiver would like to be credentialed through their agency.
 - Vendor runs background check and exclusion checks for the caregiver.
 - If the background check is clean, the vendor sends a vendor view message stating the date that the caregiver was hired.
 - If there are hits on the background check/exclusions, vendor faxes the results of the background check/exclusions to Attn: Melissa Gaynier at 734-727-2089.
 - MI Health Link Manager Melissa Gaynier will review the background check/exclusions and make a determination if further action needs to be taken.
 - If the background check does not have a mandatory or permissive exclusion, vendors will receive a vendor view message stating that the caregiver can be hired.
 - If the background check has a mandatory exclusion, vendor will receive a vendor view message stating that the caregiver cannot be hired.
 - If the background check has a permissive exclusion, a vendor view message will be sent to the vendor stating that there is a permissive exclusion. The ICO or TSA will obtain the permissive exclusion form.
 - Once the permissive exclusion form is signed, TSA will notify the vendor that the caregiver can be hired and will send the vendor a copy of the signed permissive exclusion form for their file.
 - Vendor sends a vendor view message stating the date that the caregiver was hired.

Additional Background Check Requirements

- Vendor must decide whether to prohibit individual from working with participants or accessing information based on background check results.
- Employees, volunteers, contractors and contractor employees must disclose in writing within 10 days any criminal convictions or pending felony charges.
- Vendor must not have committed an act of so serious or compelling nature that it affects their current responsibilities.



HOW TO READ A MICHIGAN CRIMINAL HISTORY tutorial

*From Michigan.gov website:

https://www.michigan.gov/-/media/Project/Websites/msp/cjic/Criminal_History_Tutorial.ppt?rev=b642c787a82d46eeac48e3c39fe840c4



The Michigan State Police provides criminal history information to the general public through the ICHAT system and through fingerprint-based searches.



The Michigan State Police begin to build a criminal history for an individual when arrest fingerprints are submitted. Later, information from prosecutors and courts are entered into the criminal history records.



Some Common criminal history terms are:

AFIS – Automated Fingerprint Identification System

CTN – Criminal Tracking Number

DISP – Disposition

FBI – Federal Bureau of Investigation

III – Interstate Identification Index

MCL – Michigan Compiled Laws

OCA – Originating Agency Case number

Ordinance Violation – A violation of local (not state) law

ORI – Originating Agency Identifier

PFI – Pending Further Investigation

PRN – Prison Number

SID – State Identification Number

SMT – Scars, Marks, and Tattoos



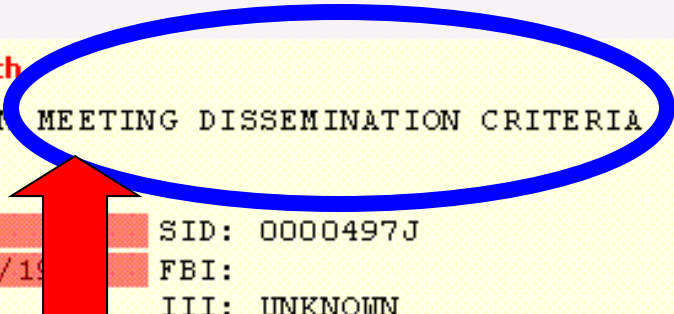
NOTE: Highlighted fields indicate the record is not an exact match

MICHIGAN CRIMINAL HISTORY RECORD INFORMATION MEETING DISSEMINATION CRITERIA
FOR SID: 0000497J AS OF 11/22/2006

NAM: DOE, HERMAN DAVID		SID: 0000497J
RAC: W	SEX: M	DOB: 07/04/19
HGT: 509	WGT: 150	HAI: BRO
EYE: BLU	POB: MI	FBI:
DLN: MI/D666666888999		III: UNKNOWN
PRN: 998877		MNU:
CIZ:		

AFIS PRINTS AVAILABLE: YES
PALM PRINTS AVAILABLE: NO
PHOTO AVAILABLE: NO

SCAR/MARK/TATTOO: CRIP R FT SC L ANKL SC FACE



The first thing you may notice is the phrase “meeting dissemination criteria”. This refers to information that we are legally allowed to give out.



NOTE: Highlighted fields indicate the record is not an exact match.

MICHIGAN CRIMINAL HISTORY RECORD INFORMATION MEETING DISSEMINATION CRITERIA
FOR SID: 0000497J AS OF 11/22/2006

NAM: [REDACTED] DAVID		SID: 0000497J
RAC: W	SEX: M	FRI:
HGT: 509	WGT: 150	III: [REDACTED] MN
EYE: BLU	POB: MI	MNU:
DLN: MI/D666666888999		
PRN: 998877		
CIZ:		

AFIS PRINTS AVAILABLE: YES
PALM PRINTS AVAILABLE: NO
PHOTO AVAILABLE: NO

SCAR/MARK/TATTOO: CRIP R FT SC L ANKL SC FACE

Next you will notice the SID number. This is the State Identification, or criminal record, number assigned to a particular criminal history record.



NOTE: Highlighted fields indicate the record is not an exact match.

MICHIGAN CRIMINAL HISTORY RECORD INFORMATION MEETING DISSEMINATION CRITERIA
FOR SID: 00004970 AS OF 11/22/2006

NAM: DOE, HERMAN DAVID SID: 0000497J
RAC: W SEX: M **DOB: 07/04/1930** FBI:
HT: 5-10 WGT: 150 HAI: BRO III: UNKNOWN
EYES: BLU POB: MI
DIR: MI/D666666888999 MNU:
PI: 998877
CIZ:

AFIS PRINTS AVAILABLE: YES
PALM PRINTS AVAILABLE: NO

If the search was performed on the ICHAT system, any information in the identifiers that does not match what was entered will be highlighted on the criminal history record



NOTE: Highlighted fields indicate the record is not an exact match.

MICHIGAN CRIMINAL HISTORY RECORD INFORMATION MEETING DISSEMINATION CRITERIA
FOR SID: 0000497J AS OF 11/22/2006

NAM: DOE, HERMAN DAVID		SID: 0000497J
RAC: W	SEX: M	DOB: 07/04/1930
HGT: 509	WGT: 150	FBI:
EYE: BLU	POB: MI	III: UNKNOWN
DLN: MI/D666666888999		MNU:
PRN: 998877		
CIZ:		

AFIS PRINTS AVAILABLE: YES
PALM PRINTS AVAILABLE: NO
PHOTO AVAILABLE: NO

SCAR/MARK/TATTOO: CRIP R FT SC L ANKL SC FACE

The personal identifiers (as shown in the circled area) are based on the information obtained at the time of arrest.



NOTE: Highlighted fields indicate the record is not an exact match.

MICHIGAN CRIMINAL HISTORY RECORD INFORMATION MEETING DISSEMINATION CRITERIA
FOR SID: 0000497J AS OF 11/22/2006

NAM: DOE, HERMAN DAVID			SID: 0000497J
RAC: W	SEX: M	DOB: 07/04/1930	FBI:
HGT: 509	WGT: 150	HAI: BRO	III: UNKNOWN
EYE: BLU	POB: MI		
DLN: MI/D666666888999			MNU:
PRN: 998877			
CIZ:			

AFIS PRINTS AVAILABLE: YES
PALM PRINTS AVAILABLE: NO
PHOTO AVAILABLE: NO

SCAR/MARK/TATTOO: CRIP R FT SC L ANKL SC FACE



The FBI space refers to the federal criminal record number (if any). The III space refers to the Interstate Identification Index.



Michigan State Police

The III space will have one of three phrases:

- **Multi-State** – meaning a federal record contains criminal history from more than one state.
- **Michigan-Only** – meaning the federal record is the same as the Michigan record.
- **Unknown** – a Michigan record that was not sent to the FBI because it did not meet the FBI retention policies.

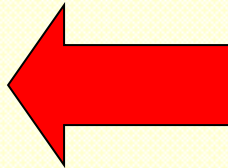


NOTE: Highlighted fields indicate the record is not an exact match.

MICHIGAN CRIMINAL HISTORY RECORD INFORMATION MEETING DISSEMINATION CRITERIA
FOR SID: 0000497J AS OF 11/22/2006

NAM: DOE, HERMAN DAVID			SID: 0000497J
RAC: W	SEX: M	DOB: 07/04/1930	FBI:
HGT: 509	WGT: 150	HAI: BRO	III: UNKNOWN
EYE: BLU	POB: MI		
DLN: MI/D666666888999			MNU:
PRN: 998877			
CI7:			

AFIS PRINTS AVAILABLE: YES
 PALM PRINTS AVAILABLE: NO
 PHOTO AVAILABLE: NO



SCAR/MARK/TATTOO:	CRIP R FT	SC L ANKL	SC FACE
	SC LF ARM	TAT R ARM	

ADDITIONAL IDENTIFIERS AND COMMENTS:

This circled area refers to information obtained at the time of arrest. It is not available to the general public.

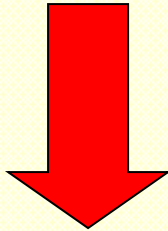


ICCHAT Internet Criminal History Access Tool Michigan State Police

NOTE: Highlighted fields indicate the record is not an exact match.

MICHIGAN CRIMINAL HISTORY RECORD INFORMATION MEETING DISSEMINATION CRITERIA
FOR SID: 0000497J AS OF 02/26/2007

NAM: DOE, HERMAN DAVID			SID: 0000497J
RAC: W	SEX: M	DOB: 07/04/1930	FBI:
HGT: 509	WGT: 150	HAI: BRO	III: UNKNOWN
EYE: BLU	POB: MI		MNU:
DLN: MI/D666666888999			
PRN: 998877			
CIZ:			

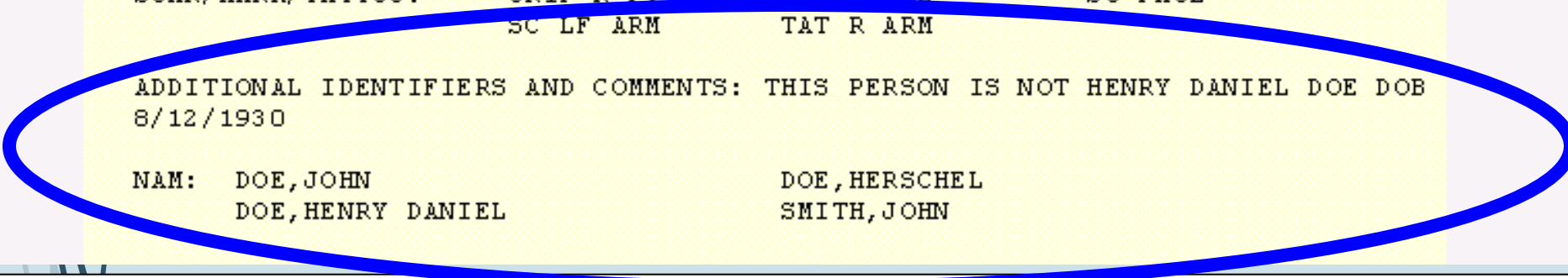


AFIS PRINTS AVAILABLE: YES
PALM PRINTS AVAILABLE: NO
PHOTO AVAILABLE: NO

SCAR/MARK/TATTOO: CRIP R FT SC L ANKL SC FACE
SC LF ARM TAT R ARM

ADDITIONAL IDENTIFIERS AND COMMENTS: THIS PERSON IS NOT HENRY DANIEL DOE DOB 8/12/1930

NAM: DOE, JOHN	DOE, HERSCHEL
DOE, HENRY DANIEL	SMITH, JOHN



This circled area refers to comments and other identifiers that the person on the record is known to have used. Criminal history searches can also match on this information.

CRIMINAL TRACKING NUMBER: 338705030701
NAME USED: DOE, JOHN

INCIDENT DATE: 06/08/1987

=====

SEGMENT	CHARGE SEGMENT	JUDICIAL SEGMENT
06/08/1987	MI330013A	DATE: 06/09/1987
3300	INGHAM COUNTY	MI330055J
M COUNTY SHERIFF	PROSECUTING ATT	30TH CIRCUIT COURT
ARTMENT	1 CNT MCL 750.110-A	CFN: 12345
CNT 11223	FELONY	
1 CNT OF 2200	BREAKING & ENTERING -	CNT-1 MCL 750.110-A
BURGLARY	A BUILDING WITH	ATTEMPT-FELONY
DISP: CHGD BY PROSECUTOR	INTENT	BREAKING & ENTERING -
		A BUILDING WITH
		INTENT

=====

The Criminal Tracking Number refers to the number assigned to that particular criminal case; the Incident Date refers to the date the crime occurred; and the Name Used refers to the name that the person gave the police at the time of arrest.

CRIMINAL TRACKING NUMBER: 338705030701

INCIDENT DATE: 06/08/1987

NAME USED: DOE, JOHN

ARREST SEGMENT

CHARGE SEGMENT

JUDICIAL SEGMENT

DATE: 06/08/1987

MI330013A

DATE: 06/09/1987

MI3313300

INGHAM COUNTY

MI330055J

INGHAM COUNTY SHERIFF

PRO

30TH CIRCUIT COURT

DEPARTMENT

1 CNT

CFN: 12345

OCA: 11223

FELONY

1 CNT OF 2200

BREAKING & ENTERING -

CNT-1 MCL 750.110-A

BURGLARY

A BUILDING WITH

ATTEMPT-FELONY

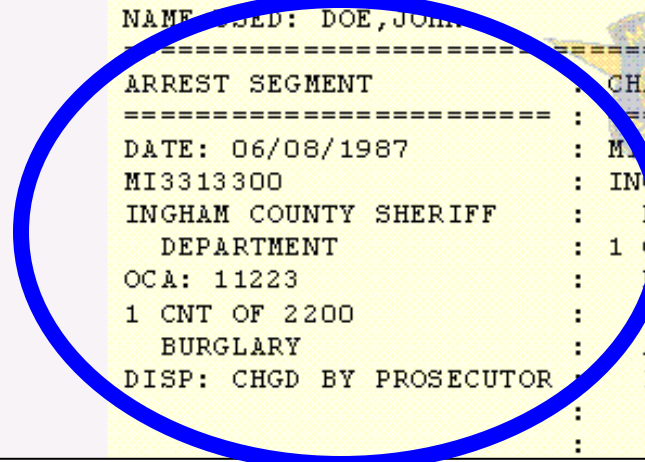
DISP: CHGD BY PROSECUTOR

INTENT

BREAKING & ENTERING -

A BUILDING WITH

INTENT



Michigan State Police

www.michigan.gov

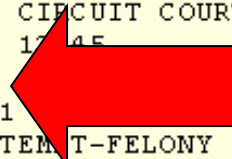
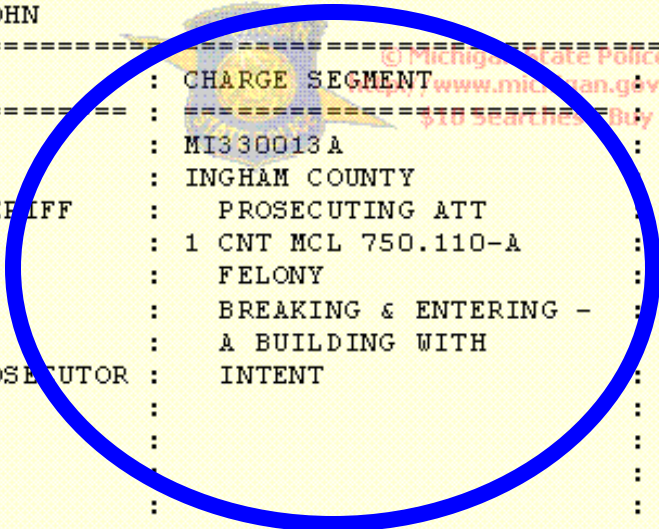
910 SEARCHES Buy Data

The arrest segment will contain information about the arrest provided by the arresting agency. DISP refers to what happened to the case after it left the arresting agency; the phrase “warrant requested” means that the arresting agency requested a charge warrant from the prosecutor, not that the person has an outstanding warrant.

CRIMINAL TRACKING NUMBER: 338705030701
NAME USED: DOE, JOHN

INCIDENT DATE: 06/08/1987

```
=====
ARREST SEGMENT      : CHARGE SEGMENT      : JUDICIAL SEGMENT
=====
DATE: 06/08/1987   : MI330013A           : DATE: 06/09/1987
MI3313300          : INGHAM COUNTY       : MI330055J
INGHAM COUNTY SHERIFF : PROSECUTING ATT    : 30TH CIRCUIT COURT
  DEPARTMENT       : 1 CNT MCL 750.110-A : CFN: 17045
OCA: 11223         : FELONY              :
1 CNT OF 2200     : BREAKING & ENTERING - : CNT-1 - A
  BURGLARY        : A BUILDING WITH     : ATTEMPT-FELONY
DISP: CHGD BY PROSECUTOR : INTENT              : BREAKING & ENTERING -
                  :                      : A BUILDING WITH
                  :                      : INTENT
                  :                      : DISP: FOUND GUILTY
                  :                      : SENT/REMARKS:
                  :                      : F/C/R-$300 CONF-90D -
=====
```



The charge segment will contain information about the criminal charges provided by the prosecutor for that case. The charges brought before the court may be different from the arrest charges.

CRIMINAL TRACKING NUMBER: 338705030701
NAME USED: DOE, JOHN

INCIDENT DATE: 06/08/1987

ARREST SEGMENT

CHARGE SEGMENT

JUDICIAL SEGMENT

DATE: 06/08/1987

MI330013 A

DATE: 06/09/1987

MI3313300

INGHAM COUNTY

MI330055J

INGHAM COUNTY SHERIFF

PROSECUTING ATT

30TH CIRCUIT COURT

DEPARTMENT

1 CNT MCL 750.110-A

CFN: 12345

OCA: 11223

1 CNT OF 2200

ENTERING -

CNT-1 MCL 750.110-A

BURGLARY

A BUILDING WITH

ATTEMPT-FELONY

DISP: CHGD BY PROSECUTOR

INTENT

BREAKING & ENTERING -

A BUILDING WITH

INTENT

DISP: FOUND GUILTY

SENT/REMARKS:

F/C/R-\$300 CONF-90D

CRIMINAL TRACKING NUMBER: 990199988801

INCIDENT DATE: 01/01/2001

NAME USED: DOE, HERMAN DAVID

The judicial segment will contain information about the conviction and sentence and is provided by the court. F/C/R refers to fines, costs, and restitution; PROB refers to probation; and CONF refers to jail/prison time in years (Y), months (M), and days (D).



ICHAT

Internet Criminal History Access Tool
Michigan State Police

Michigan.gov



The Official State
of Michigan Website

Court Dispositions

Not Guilty

Found Guilty

Pled Guilty

Nolo Contendre (no contest) – no admittance of guilt, but accepts court punishment

Deferred – court ordered action, if met then judgment is dismissed and the incident becomes non- public

Bench Warrant – Arrest warrant issued by the judge for failure to appear in court

CRIMINAL TRACKING NUMBER: 338705030701
NAME USED: DOE, JOHN

INCIDENT DATE: 06/08/1987

ARREST SEGMENT

CHARGE SEGMENT

JUDICIAL SEGMENT

DATE: 06/08/1987

MI330013A

DATE: 06/09/1987

MI3313300

INGHAM COUNTY

MI330055J

INGHAM COUNTY SHERIFF

PROSECUTING ATT

30TH CIRCUIT COURT

DEPARTMENT

1 CNT MCL 750.110-A

CFN: 12345

OCA: 11223

FELONY

1 CNT OF 2200

BREAKING & ENTERING -

CNT-1 MCL 750.110-A

BURGLARY

A BUILDING WITH

ATTEMPT-FELONY

DISP: CHGD BY PROSECUTOR

INTENT

BREAKING & ENTERING -

INTENT

DISP: FOUND GUILTY

SENT/RE: 5:

F/C/R-\$ CONF-90D -

CRIMINAL TRACKING NUMBER: 990199988801

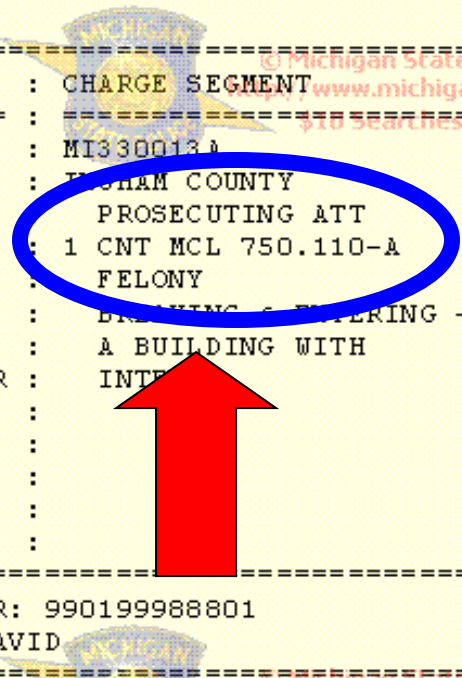
INCIDENT DATE: 01/01/2001

NAME USED: DOE, HERMAN DAVID

ARREST SEGMENT

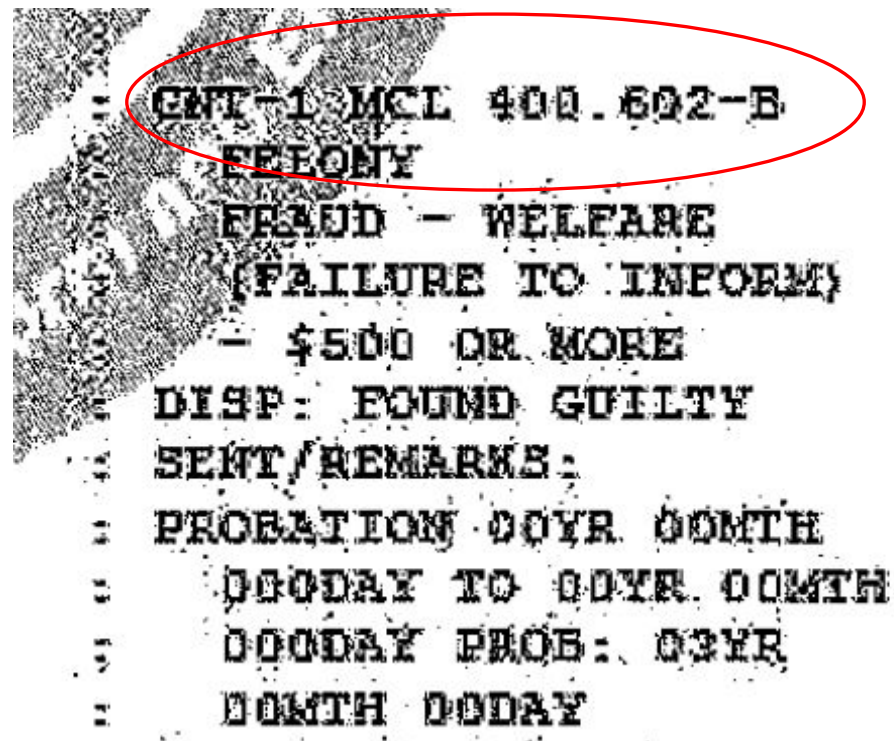
CHARGE SEGMENT

JUDICIAL SEGMENT




MCL (Michigan Compiled Law) refers to the law which the person is charged and/or convicted of breaking. For details about Michigan laws, you may go to www.legislature.mi.gov.

If the background check lists out an abbreviation that you do not understand or recognize, a best practice is to look up the charges to make sure that they are not mandatory exclusions. In this case search “MCL 400.602 B” to find:



ENT-1 MCL 400.602-B
FELONY
FRAUD - WELFARE
(FAILURE TO INFORM)
- \$500 OR MORE
DISP: FOUND GUILTY
SENT/REMARKS:
PROBATION 00YR 00MTH
00DAY TO 00YR 00MTH
00DAY PROB: 03YR
00MTH 00DAY

Section 400.602

 [friendly link](#)

 [printer friendly](#)

THE MEDICAID FALSE CLAIM ACT (EXCERPT) Act 72 of 1977

400.602 Definitions.

Sec. 2.


As used in this act:

- (a) "Benefit" means the receipt of money, goods, or anything of pecuniary value.
- (b) "Claim" means any attempt to cause the department of community health to pay

Based on the background check description of "fraud," it might not be obvious that the person in question committed Medicaid fraud, which is a mandatory exclusion. Searching the MCL confirms this.

ENT-1 MCL 400.602-B
FELONY
FRAUD - WELFARE
(FAILURE TO INFORM)
- \$500 OR MORE
DISP: FOUND GUILTY
SENT/REMARKS:
PROBATION 00YR 00MTH
00DAY TO 00YR 00MTH
00DAY PROB: 03YR
00MTH 00DAY

Section 400.602

 [friendly link](#)

 [printer friendly](#)

THE MEDICAID FALSE CLAIM ACT (EXCERPT) Act 72 of 1977

400.602 Definitions.

Sec. 2.

As used in this act:

(a) "Benefit" means the receipt of money, goods, or anything of pecuniary value.

(b) "Claim" means any attempt to cause the department of community health to pay

Here is another example. If you are not sure what DEL/MFG means, a search of "MCL 333.7401" will show you the below excerpt, which confirms that this is a mandatory exclusion:

JUDICIAL SEGMENT

=====

DATE: 04/14/2000

MI580015J

38TH CIRCUIT COURT

CFN: 99-030273-FH

CNT-3 MCL 333.74012A4

ATTEMPT-FELONY


CONTROLLED

SUBSTANCE-DEL/MFG

(COCAINE, HEROIN OR
ANOTHER NARCOTIC)

LESS THAN 50 GRAMS

Section 333.7401

 [friendly link](#)

 [printer friendly](#)

PUBLIC HEALTH CODE (EXCERPT) Act 368 of 1978

333.7401 Manufacturing, creating, delivering, or possessing with intent to manufacture, create, or deliver controlled substance, prescription form, or counterfeit prescription form; dispensing, prescribing, or administering controlled substance; violations; penalties; consecutive terms; discharge from lifetime probation; "plant" defined.



ICHAT Internet Criminal History Access Tool Michigan State Police

Michigan.gov

The Official State
of Michigan Website

=====

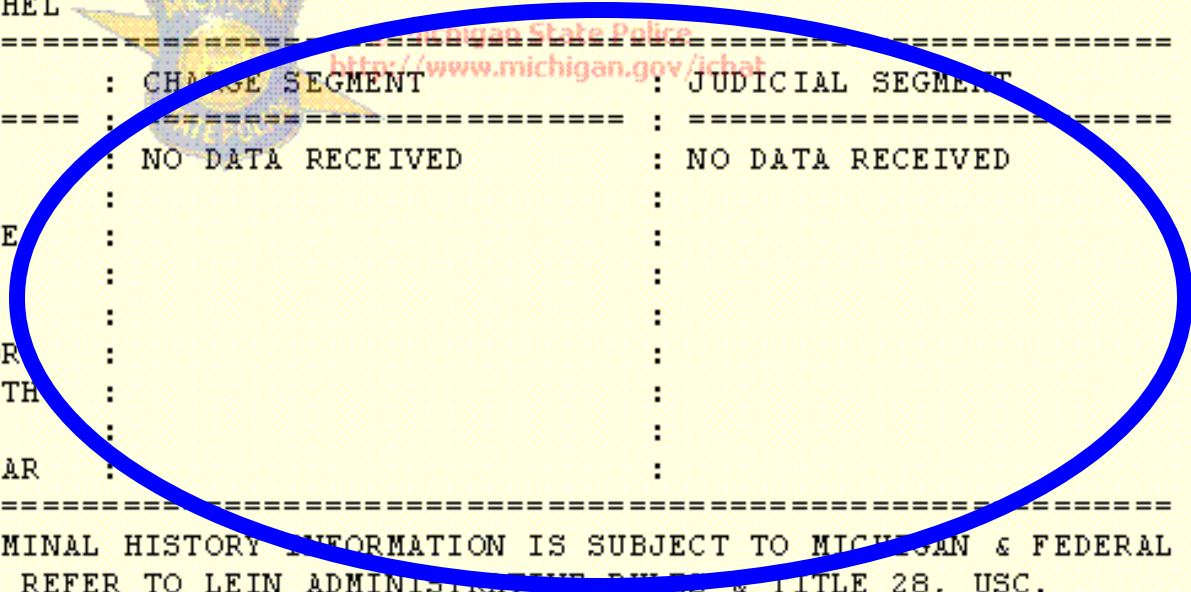
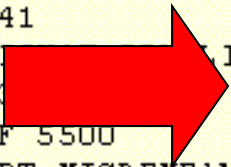
CRIMINAL TRACKING NUMBER: 050704123456	INCIDENT DATE: 07/04/1976
NAME USED: DOE,HERSCHEL	

=====

ARREST SEGMENT	CHARGE SEGMENT	JUDICIAL SEGMENT
DATE: 07/04/2006	NO DATA RECEIVED	NO DATA RECEIVED
MI3300641	:	:
IS CRD	:	:
OCA: 123	:	:
1 CNT OF 5500	:	:
ATTEMPT-MISDEMEANOR	:	:
MISCELLANEOUS HEALTH	:	:
AND SAFETY	:	:
DISP: NOTICE TO APPEAR	:	:

=====

DISSEMINATION OF CRIMINAL HISTORY INFORMATION IS SUBJECT TO MICHIGAN & FEDERAL RULES & REGULATIONS. REFER TO LEIN ADMINISTRATIVE RULES & TITLE 28, USC. USE OF THIS RECORD IS LIMITED TO THE PURPOSE OF INQUIRY. PURPOSE CODE USED NOT FORWARDED TO NCIC III
END MSG.



If any information is missing from a criminal history segment, the phrase “No Data Received” is displayed.

CRIMINAL TRACKING NUMBER: 338705030701
NAME USED: DOE, JOHN

INCIDENT DATE: 06/08/1987

ARREST SEGMENT : CHARGE SEGMENT : JUDICIAL SEGMENT

DATE: 06/08/1987 : MI330013A : DATE: 06/09/1987
MI3313300 : INGHAM COUNTY : MI330055J
INGHAM COUNTY SHERIFF : PROSECUTING ATT : 30TH CIRCUIT COURT
DEPARTMENT : 1 CNT MCL 750.110-A : CFN: 12345
CA: 11223 : FELONY :
1 CNT OF 2200 : BREAKING & ENTERING - : CNT-1 MCL 750.110-A
BURGLARY : A BURGLARY WITH : ATTEMPT-FELONY
DISP: BY PROSECUTOR : INTENT : BREAKING & ENTERING -
: : A BURGLARY WITH
: : IN
: : DISPOSED GUILTY
: : SENTENCE MARKS:
: : F/C/ DO CONF-90D -

CRIMINAL TRACKING NUMBER: 990199988801
NAME USED: DOE, HERMAN DAVID

INCIDENT DATE: 01/01/2001

ARREST SEGMENT : CHARGE SEGMENT : JUDICIAL SEGMENT

NO DATA RECEIVED : DATE: 01/01/2001 : DATE: 01/01/2001
: MI330013A : MI330055J
: INGHAM COUNTY : 30TH CIRCUIT COURT

If you have any questions about the information in the arrest, charge, or judicial segment, please contact the submitting agency.

Direct Care Worker Needs Fund

- The Direct Care Worker Needs Fund is available to assist a direct care worker, employed by a TSA contracted vendor, providing care to a TSA client.
- Designed for your employees who are experiencing hardship which is preventing them from being able to meet the requirements of their position as a direct care worker.
- A limited amount of funds has been designated for this program and all requests submitted are subject to funding availability.

DCW Needs Fund Application



DIRECT CARE WORKER NEEDS FUND APPLICATION

Employee Unexpected Hardship

As a contracted Vendor with The Senior Alliance, Area Agency on Aging 1-C, _____ seeks assistance for our employee to help resolve an unexpected hardship that is a barrier for the employee to fulfill their responsibility to provide care to **The Senior Alliance, AAA 1-C clients.**

- Tire or Tire Repair New Car Battery Minor Car Repair
 Unexpected Child Care Cost (licensed facility) \$50 Gasoline Card
 Other _____

We have determined the need is of the employee's alone and we will not be accepting funds on behalf of anyone else other than the employee.

We understand that employee unexpected hardship assistance will be provided by The Senior Alliance, Area Agency on Aging 1-C to the employee only once during a twelve-month period. Repeat applicants will be approved at TSA's discretion.

Employee Name: _____

Amount Requested: _____ (Maximum amount is not to exceed \$500.00)

Is the employee assisting a TSA Client? Yes ___ No ___

Summary of the Situation (Why are you needing this assistance?):

Employer/Vendor Agency Name

Employer Authorized Signature

Date

TSA RESPONSE

- Approved Denied

The Senior Alliance, AAA1-C Representative

Date

1. Vendors submit completed application via email to DCWNEEDSFUND@thesenioralliance.org.
2. TSA will return application designated with Approval or Denial.
3. If approved, Vendor will purchase item/service and verify employee received item/service.
4. To receive payment, Vendor will submit this Application, receipt for item purchased and invoice for payment via email to DCWNEEDSFUND@thesenioralliance.org.

All requests are subject to funding availability

Direct Care Worker Needs Fund

- An electronic copy of the application will be distributed to our current email contact list and on the "TSA Providers" section of our website.
- We encourage questions/inquiry at the same email address for application submission,

DCWNEEDSFUND@thesenioralliance.org.



Questions?



**Thank you for
attending
The Senior
Alliance
Annual Vendor
Meeting and
Training**



References

- ▶ <https://courses.mihealth.org/MIHealthLink/home.html>
- ▶ <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/HIPAAPrivacyandSecurity.pdf>

Acknowledgement of Attending
The Senior Alliance
Annual Provider Meeting and Training

January 24, 2023

I acknowledge that I have attended The Senior Alliance Annual Provider Meeting and Training as a representative of my agency. I understand that the organization I represent must follow these Guidelines and Operational Standards to ensure payment for services provided and continuation of agreement with The Senior Alliance. I attest that the training topics discussed in this presentation will be covered annually with all staff, and evidence of these trainings will be kept in employee files.

Agency name: _____

Agency representative's printed name: _____

Agency representative's signature: _____

Date: _____