

VALLEY AREA AGENCY ON AGING	PROCEDURE Provider Self-Monitoring
Implementation Dates February 1, 2022	Departments Contract Management
Manual Planning and Contract Management Policy and Procedure Manual	Distribution Contract Management Compliance
<p>Purpose: To ensure provider billing is accurate and adheres to Valley Area Agency on Aging (VAAA) program requirements. Self-auditing will offer providers a resource and learning tool when billing services to VAAA that align with standard billing practices that ensure service provision & delivery, service rate accuracy, and timely billing submission.</p> <p>Procedure: Providers shall conduct a retrospective review of employee timesheets or electronic visit verification documents against submitted billing to VAAA for inaccuracies to include but not limited to incomplete documents, missing documents, timesheet errors, and timesheet and submitted bills incongruences. If concerns are identified, providers are expected to revise their processes and procedures to prevent future occurrences immediately. VAAA may request documented evidence of policy and procedure revision or creation at any time.</p> <p>Providers shall conduct at minimum quarterly self-audits on 10% of their participants or all of their participants if the provider has less than five participants. The self-audit shall include:</p> <ul style="list-style-type: none"> • A printed detail report from Vendor Billing to verify billing is accurate- use checkmarks to indicate timesheets were reviewed against the detail report • Verification of participant and staff signatures or verification of location and time if using an Electronic Visit Verification (EVV) system • Premium pay attestation form (if applicable) <p>All providers who receive the Michigan Department of Health and Human Service (MDHHS) provided premium pay must include an attestation statement indicating that the premium payment has been paid to applicable staff. These payments should be paid no later than 14 days after receiving the monthly premium payment from VAAA.</p> <p>Evidence of provider self-audits may be submitted to VAAA's Contract Manager. Provider shall submit an audit procedure at the initial submission of their self-audit to VAAA. VAAA will review provider self-audits and audit procedures during scheduled provider monitoring occurrences. Random provider self-audit reviews may be conducted as necessary by VAAA.</p> <p>The provider shall notify VAAA within five (5) business days of discovering any concerns that may result in fraud, waste and abuse, contract violations, or overpayments. All overpayments must be returned to VAAA within 60 days of discovery. Overpayments will be recouped from providers on their next payment cycle from VAAA. Per program requirements, overpayments and FWA suspicions will be reported to the Office of Inspector General (OIG).</p> <p>Providers who have reoccurring self-auditing issues may be subject to policy and procedure requests, training, corrective action, provider probation, pre-payment review, and contract termination.</p>	
Policy References MI Choice Waiver Contract Attachment E	Cross Reference Compliance Policy Overpayment Policy