

# Provider Network Meeting

## 1/21/2026



**Summit  
Pointe**

# Housekeeping

- Recording in progress
- Webinar Style Meeting
  - We cannot see/hear you
- Use the chat function if you have a question
  - You can message the host/panelist or the whole group
- PowerPoint Presentation will be sent out along with a link to the recording and any reference materials



# Agenda

- Provider Network Updates
- FY 2026 Site Reviews
- Guardianship Presentation
- Zero Suicide Education
- Recipient Rights Updates
- Compliance Updates
- Claims Education
- Appeal Education



# Provider Network Updates and Reminders

- PIHP Lawsuit
  - CMHs need to retain contractual relationships to uphold our responsibilities
  - Up to the state to decide how they will correct deficiencies
    - State solutions will need to be presented to the judge to ensure all issues are addressed
- Direct Care Wage
  - Communication coming soon
  - [2026 L Letter page](#)
- [Provider Support Ticket](#) and other helpful resources

# FY 2026 Provider Network Site Reviews

- New Tools!
- Redline versions have been sent out
  - EVV for impacted providers (this was just added by SWMBH)
  - Background Checks – new requirements for background checks
    - **BOTH** – National and Michigan Sex offender list are now required
  - Home and Community Based Services
    - Global access in the setting
      - If there are gates, keypads or locked refrigerators documentation must be present to support those global restrictions
    - Activity Logs
      - Policies\* around residents' ability to schedule their activities
    - Policies\* to ensure IPOS meets standards
    - Summary of Resident Rights
    - HCBS Training\* – has not been approved/implemented for providers

\* Consultative for FY 2026

# \*New\* Documentation Review

- Please review the documentation tab in the review tool
- Provider Network will be completing a review of progress notes/CLS/Personal care logs.
  - Progress notes should directly link to the IPOS.
  - Progress notes should recreate the shift/day as outlined in our [clinical policy](#).
  - Progress notes should reflect what staff are doing, how they are intervening, and the individual response to intervention.
    - staff prompted, staff taught, staff modeled, staff monitored, staff reviewed, staff supported, staff redirected, staff distracted, staff engaged etc.
  - Progress notes should not simply document what the individual is doing.

# Documentation Review (continued)

- Documentation review will be consultative this year from provider network
  - Concerns will be sent to compliance
- Documents should be readily available in SPOT for our review
- This includes personal care/community living support logs and progress notes
- Corrective action plans will be required if shift documentation or BTP data is not being uploaded in SPOT.

# Insurance and License Reminders

- Remember to send proof of insurance or license update upon renewal
  - Provider Network should not have to reach out to you
- Ensure that “Additional Insured” is present on both General Liability and Auto Insurance
- Ashley Payne – contact for insurance
  - If you have questions, documents or issues contact her directly

# Guardianship

- Determination made by Probate Court to appoint a legal representative to make decisions, in part or in entirety, for an individual in relation to
  - Legal Needs
  - Financial Needs
  - Medical Needs
  - Personal Needs

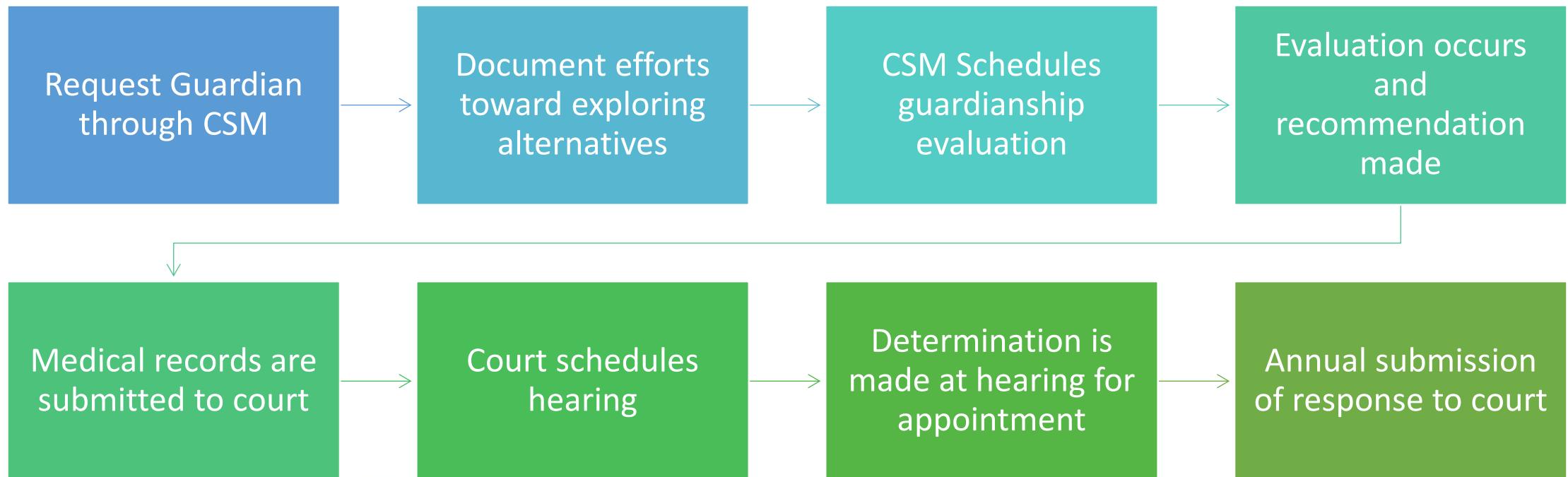
# Who can have a court appointed guardian?

- Youth with lack of guardian or Individuals 18 years or older that have...
- Medical, Developmental, or Behavioral Health condition that severely impairs functional capacity, particularly in relation to the ability to make informed care decisions
- Demonstrated least restrictive options are utilized
  - Alternatives have been exhausted or are inappropriate
  - Family is preferred to serve as guardian
  - Court appointment of suitable professional

# Alternatives to Guardianship

- Durable Power of Attorney
- Representative Payee
- Supported Decision Making Model (shared accounts)

# How to get a Guardian



# Guardianship Timeline

Event	Timeline
CSM Meeting	Up to 30 days
Guardianship Testing	~30-45 days
Guardianship Report	~30 days
Filing Petition to Court	~30 days
Hearing Scheduled	Within 28 days

# What to do if need is time sensitive?

- Can pursue an emergency guardian which will allow for a guardian to be appointed while the formal process is pursued
- To pursue an emergency guardianship
  - Must demonstrate emergent medical need
  - No other individual can act in the capacity as the guardian

# Limitations of a guardianship

- Does not force the individual to comply with treatment
- Does not remove the need for the customer to be involved in their treatment decisions
- Does not prevent the customer from asking to have guardian removed or change of guardian

# Zero Suicide

- System Wide Approach to Suicide Risk Screening and Intervention
- Defined by
  - Effective suicide risk training
  - Screening and Intervention
  - Effective pathways to care
  - Warm Handoffs

# Zero Suicide Workgroup

- Review Summit Pointe standards for suicide screening and intervention
- Gain clarity on current suicide risk strategies and resources used by providers
- Establish guidelines for providers to support utilization of crisis systems and integrate into current practices including training and resources

# Thank you!

Questions?

# Recipient Rights Updates

- **Site Visits:** have commenced. We will be doing Summit Pointe, Albion and a few BC locations this month. Next Month will be Marshall, and a few more BC location. If you have any questions which month your visits will be, please contact Kent
- **Training:** will continue to be on Tuesday's every other week, from 10-noon, as it has been for the last 5 years. Please find the Team Link on the Summit Pointe Website under Training/Recipient Right
- Remind your employees to send the assignments to [#recipientrights@summitpointe.org](mailto:#recipientrights@summitpointe.org) If your agency wants the certs sent to them, instead of the attendee, please contact Kent, and he will add you to our HR list.
- **Incident Reports:** are sent to [#qualityimprovementteam@summitpointe.org](mailto:#qualityimprovementteam@summitpointe.org) and Rights Complaints to the ORR at [#recipientrights@summitpointe.org](mailto:#recipientrights@summitpointe.org), or via phone or fax.

# Compliance Updates



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# What to expect in Fiscal Year 2026

- Medicaid Supports Verification Quarterly Audit
  - Starts early Feb 2026, reviewing Qtr 1 claims and documentation
- CWP-SED-HAB Staff Aide Qualifications audit
  - Starts November 2025 (Monthly)
- Fiscal Management Services Medicaid Supports Verification Audit
  - Starts early Feb 2026, reviewing Qtr 1 claims and documentation

# Summit Pointe Quarter 4 Medicaid Supports Verification Audit Results

- Final Score: 93.69%

3 potential recoupments due to no supporting documentation uploaded. Documentation was submitted prior to scores being finalized.

4 providers submitted corrective action plans due to the goals/objectives not being addressed in the documentation.

# MDHHS Waiver Audit

- November Final Score: 88.10%
- 3 of 5 providers reviewed: 3 did not have proof of training by the case manager and 1 was hiring prior to criminal background check.
- No December audit. January re starts the monthly audit (in progress)

# Claims Education – Claim Status

Claim Batches display with the following status:

1. Claim Data Entry – This means that the claims were just created and have not yet been sent over to Summit for Processing.
2. Submitted – This means you have sent your batch, but it has not yet been reviewed.
3. Adjudicated – Ready – This means the claims team have begun reviewing your batch.
4. Adjudicated Errors Exist – This error occurs when there is an issue with internal set up such as fee schedule, or contract signatures.

# Claim Education – Claim Status

- 5. Adjudicated – Pending Approval – This means that the claim has moved to the payment steps and is waiting to be batched for payment.
  - REMINDER – We pay within 30 days of the date of claim submission.
  - We cannot return batches after this step.
- 6. Paid/Sent to GL – No payments Posted. This means we have fully processed your claim in SPOT and it has been moved into the finance system. Once payment is made within the 30 days, the payment information will be added to your batch.

# Other Important Reminders - Claims

- Please remember that all claims should be adjudicated and reviewed prior to sending those claims for processing.
- The adjudication report for each batch appears in your SPOT messages and it is expected that any duplicates or other issues would be corrected.
- You can review your claims using the Paid zero button to quickly filter to any claims that have issues:

Claim Number:

Customer:

Search

Claim Status:  All  Paid In-Full  Paid Partial  Denied Days  Paid Zero  GL Errors

[Export to Excel File](#) | [Export to CSV File](#)

Showing 1 of 1 Claim

# Appeal Education – Three Types

## Claim Appeal

- Incorrect rate, overutilization, overlapping claim
- Completed in SPOT
- Alternate Process for Gaps in authorization
- All services must be preauthorized – providers are at risk of no reimbursement if authorizations are not in place

# Appeal Education - Continued

## Compliance Appeal

- Appeal for a compliance decision
- Medicaid Verification Audit/Takebacks

## Provider Network Appeal

- Site Review/Corrective Action Request/Risk Review Score
- Specialized Residential Rate

[Link to Summit Pointe Policy and Procedures](#)

# Additional Questions

