



MISSISSIPPI DIVISION OF  
**MEDICAID**

Office of the Governor | Mississippi Division of Medicaid

---

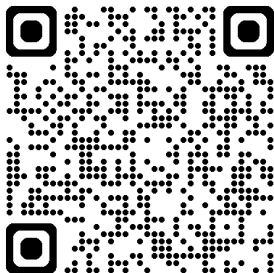
Mississippi Association of Adult Day Services Conference

April 24, 2026

Office of Long Term Services & Supports

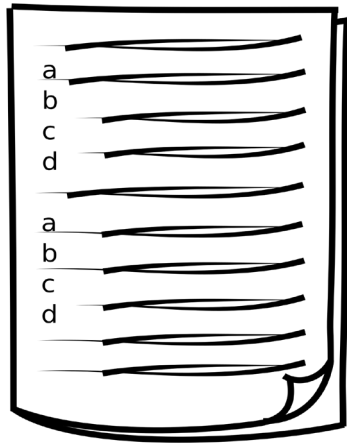
Nancy Dampier, Director of HCBS Provider Relations

Kenosha Williams, Lead Reviewer of E&D Waiver Servicers



# Today's Topics

---



---

Admin Code: Upcoming Training

---

Annual Updates for FOC list (SmartSheet)

---

Changes of Ownership (SmartSheet)

---

Relocations (SmartSheet)

---

ADA Compliance: Safety and Accessibility

---

Maintaining Your Facility

---

Marketing, Referrals & the PSS

---

Records Maintenance

---

Billing & Remittance Advice (RA)

---

Individualized Service Plans

---

Resources for Success

---

Reporting Medicaid Fraud and Abuse

---

Reporting Abuse, Neglect & Exploitation

---

Audit CAP Follow Ups

---

Success Stories



# Administrative Code Part 208 Annual Training

---



The LTSS Office will soon schedule a training day which all providers will be required to attend to go over these updates.

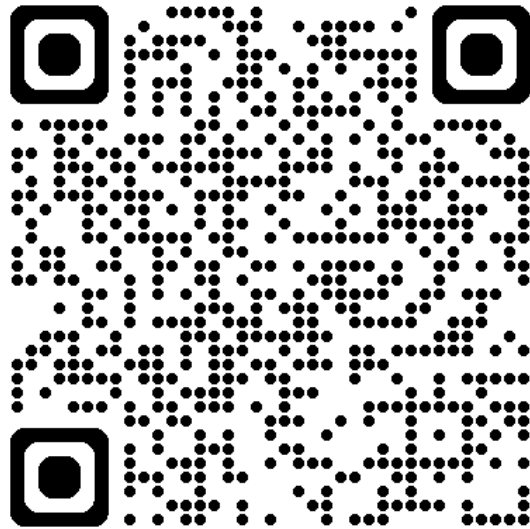


Training will be available in person and online. Online attendance will require a test to obtain the training certificate.

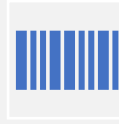


We are currently asking for topics you'd like covered more thoroughly.

# Annual Updates



<https://app.smartsheet.com/b/form/739e772328314df5b1d98ff88bf5f9e4>



LTSS is utilizing SmartSheets to gather Annual Contact Updates from ADC Providers. You can scan the QR code and fill out the form to ensure our office has the most current information for your agency.



Providers are required to use the Smartsheet to report changes in contact information, administrative staffing, ownership and licensure within ten (10) calendar days to the Division of Medicaid.

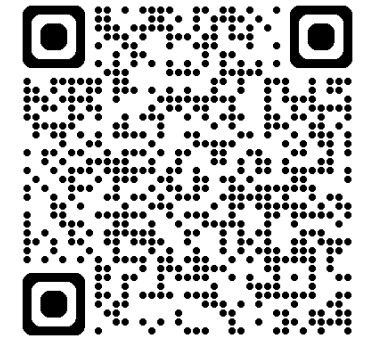


LTSS uses the information from this annual update to ensure that the Case Managers have accurate contact information for the Freedom of Choice list so you can continue to receive referrals.



LTSS also uses this information to confirm that your facility is still at the address we have on file.

# Changes of Ownership (CHOW)



A provider/facility that undergoes a change of ownership must notify the Division of Medicaid within thirty-five (35) days after any change in ownership.

A CHOW SmartSheet must be received, reviewed, and approved by the Office of Long Term Services & Supports before the provider can complete a Mississippi Medicaid Provider Application Packet.

When there is a change of ownership or retirement/closure, a provider must continue to maintain all Medicaid beneficiary records for at least six (6) years, unless an alternative method for maintaining the records has been established in writing, and approved by the Division of Medicaid as required by Health Insurance Portability and Accountability Act of 1996 (HIPAA).

Providers who have questions about what constitutes a CHOW should reach out to our team for assistance.

# Sell

- Transfer provider number with the sell.
- Beneficiary files transfers with the provider number to the new owner(s). The new owner is responsible for any past (5 years) or future audit findings.
- New owner submits a CHOW packet with OLTS.

# Buy Out

- Terminate provider number
- Beneficiary files remain with the previous owner(s) who is responsible for any past or future audits findings.
- New owner applies for a new provider number.
  - New owner must meet the requirement of being established and providing services for one (1) year for the service type applying for.
- Begin the provider enrollment process through OLTS.

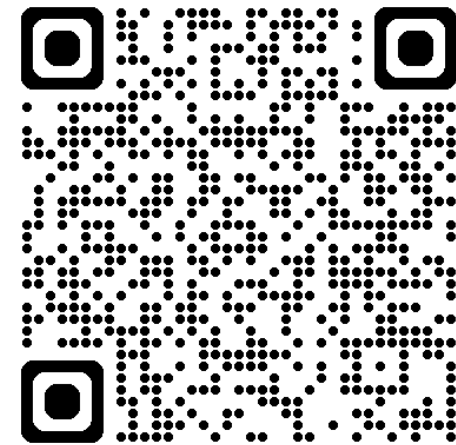
# Relocations



Before an ADC provider can relocate to a new address, they must complete the Relocation SmartSheet form and the Office of Long Term Services & Supports must complete an on-site visit to ensure that the new location meets the requirements of an ADC facility.

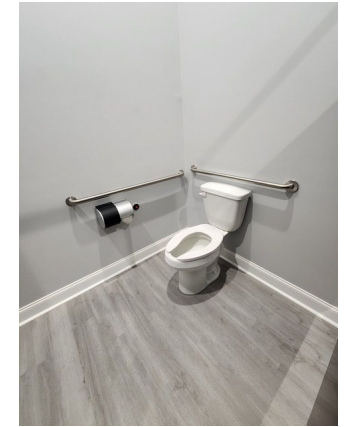
Once the new location is approved, providers must submit a Change of Address form in MESA.

For providers who are in the market to relocate, the LTSS Office can complete a virtual walk through of your potential new location to help determine if the site is appropriate before you sign that new lease agreement or purchase.



# ADA Compliance & Fire Safety

- All E&D Waiver ADC facilities are required to be compliant with applicable federal, state and local building requirements as well as all zoning, fire, OSHA, health codes and ordinances. It must also meet the requirements of the Americans with Disabilities Act (ADA).
- There are very specific standards that providers need to become familiar with for ramps, entrances/exits, & restroom accessibility.
- All ADA requirements can be found online at [www.ADA.gov](http://www.ADA.gov)
- Safety is a top priority. Providers are responsible for ensuring that all exits meet fire safety standards, including doors that swing outward, are not locked from the inside, and have working alarms to alert staff to potential wanderers.



# ADA Compliance & Transportation

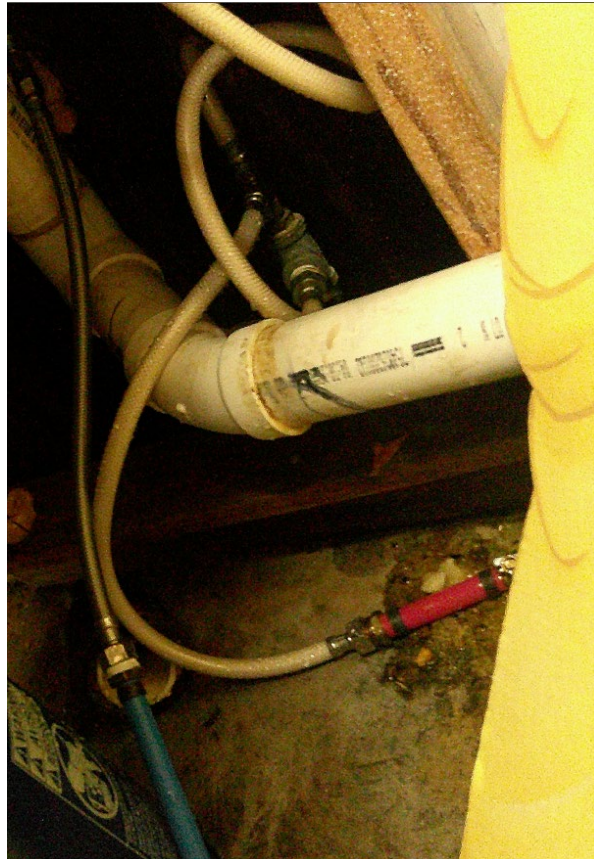
- Providers who are transporting members who rely on wheelchairs need to be well trained in the safe operation of lifts & how to secure the wheelchair in the van or bus.
- Providers must ensure that drivers are removed from service if they have a suspended or revoked license, two moving violations related to transportation, or fail an annual random drug test.
- ADA regulations specifically for transportation can be found at <https://www.transit.dot.gov/regulations-and-guidance/civil-rights-ada/ada-regulations>
- Providers must ensure that drivers are appropriately credentialed by standards set by the Dept of Public Safety. [New Commercial Driver License: Class A, B, and C | DPS Driver Service Bureau](#)



# Maintaining Your Facility



Exits



Plumbing



Electrical

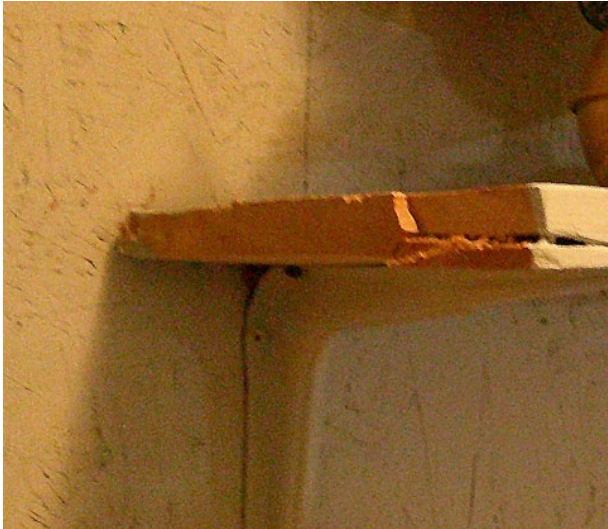


Flooring & Thresholds

# Mold & Water Damage



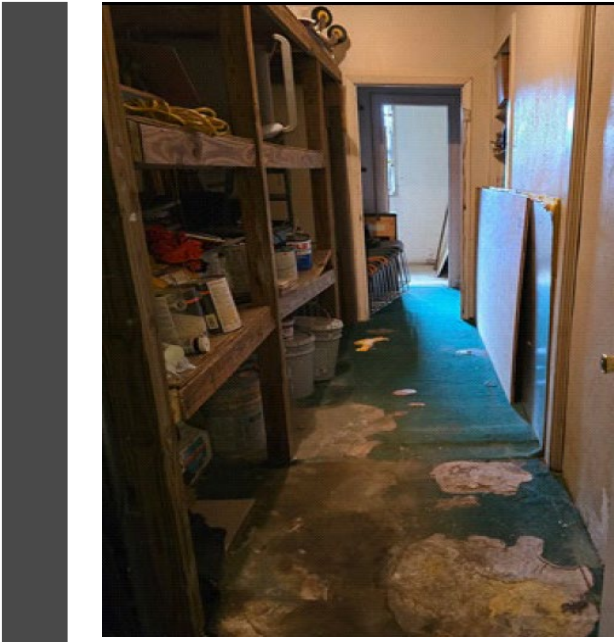
# Unfinished Wood





# Insects & Pest Control

---



# Food & Chemical Storage

In order to ensure that waiver providers are in compliance with DOM regulations regarding freedom of choice, solicitation, and protection of PHI, please follow the below guidance for appropriate marketing and referrals of potential waiver beneficiaries.

- Waiver providers should not be completing waiver intake referral forms and sending them to Case Managers. While performing marketing for your agency, if an individual shows interest in Home & Community Based Services, that individual should be provided with contact information for the Mississippi Access to Care Network, or the MAC Centers. The MAC Center in their area can be contacted by phone at 1-844-822-4622 or via the “Send a message to MAC Center” button on their webpage at <https://www.mississippiaccessstocare.org/help-info/contact-us>.
- Once the individual contacts the MAC Center, they will receive information on available services as well as referrals to applicable programs to meet their needs.
- After speaking with the MAC Center, if the individual is interested in applying for a Medicaid waiver, their name will be placed on a waiting list and will be evaluated for physical and financial eligibility when an open slot becomes available.
- Waiver providers must keep in mind that not all individuals interested in services will qualify. Additionally, those who do qualify must be guaranteed the freedom to choose any qualified provider servicing their area.
- Waiver providers are prohibited from any actions which would in any manner, deny or restrict that individual's free choice of a provider of any services for which the individual may be eligible. Providers cannot use any method of inducement, including free transportation, refreshments, cash or gifts, to influence a beneficiary to select a certain provider.

When a referral is received, Providers must compare the frequency on the referral to the frequency on the PSS. If discrepancies are found, the Provider must notify the PDD immediately.

# REFERRAL MARKETING



# Records Maintenance

ADC facility records should include, at minimum:

- Documentation of maintenance and janitorial services including repairs, maintenance and pest control,
- Documentation of quarterly drills for fire and inclement weather,
- Annual fire safety inspection reports conducted by the fire department,
- Records of quarterly advisory committee meetings,
- Written criteria for service provision, including procedures for detailing with emergency service requests,
- Policy and procedure manuals,
- Written personnel policies including the process used in the recruitment, selection, training, retention, and termination of employees,
- Current and historical organizational charts including the names and job titles of owners, operators, managers, administrators, and other supervisory staff,
- Current and historical employee listing that captures names, staff/tax id numbers, employment hire and termination dates, and
- Service records of licensed nurses which includes dates in the facility, arrival and departure times, services performed, and signature of administrator or program director.



# Billing & Remittance Advice

- It is the responsibility of the Medicaid provider to verify a Medicaid beneficiary's eligibility each time the beneficiary appears for a service. Providers should not just rely on information from Case Managers. Instructions for verifying member eligibility and other insurance coverage is included in the below linked video.  
<https://www.youtube.com/watch?v=DbQtKgLNy5M>
- Providers must review/reconcile their Remittance Advice (RA), available in MESA, with billed claims to ensure that all claims billed have been reimbursed, or determine the reason for the denial. Providers should not assume that just because they received a deposit, that all claims were paid. You can access this information by following the instructions in the below linked video (beginning at minute 19:05).  
<https://www.youtube.com/watch?v=lLeapclHFHs>



# New Provider Follow Up

OLTSS now conducts follow-up onsite visits of new providers within six (6) months of enrollment to assist with any onboarding issues, answer questions, address concerns and ensure continued compliance with the requirements of the waiver program.

OLTSS now sets the approved service county area within 60 miles from the physical address of the ADC facility for newly enrolled providers.

New providers must be enrolled for a minimum of six (6) months before requesting to expand their service area.



# Resources for Success



# Adult Day Care Resources

Smartsheet Links coming soon:

- Reinstatements
- Relocations
- CHOW
- Expansion Request

## 1915(c) HCBS Adult Day Care Resources

1915(c) HCBS ADC waiver providers are required by the Quality Assurance Standards to annually assess participant needs using Individualized Service Plans and document Daily Progress Notes. The forms linked below should be used to ensure compliance.

- [ADC Conference Presentation April 2025](#)
- [ADC Conference Presentation April 2024](#)
- [ADC Conference Presentation April 2023](#)
- [ADC Conference Presentation April 2022](#)
- [ADC Individualized Service Plan \(ISP\)](#)
- [ADC Standardized Progress Note](#)
- [ADC Facility Review Attestation](#)
- [ADC Uniform Fire Safety Form](#)
- [ADC HCB Setting Assessment](#)
- [ADC Contact Updates Form](#)
- [Employee File Checklist](#)
- [ADC Participant File Checklist](#)
- [HCBS Provider Health Self-Attestation](#)
- [Elderly & Disabled Waiver Reportable Incidents Form](#)

- Program Integrity investigates activities relating to the prevention, detection and investigation of alleged provider and beneficiary fraud and/or abuse in the Medicaid program. Every dollar lost to the misuse of Medicaid benefits, is one less dollar available to fund programs providing essential medical services for vulnerable Mississippians. If we don't work together to help stop fraud and abuse, the system might not be available for those whom the program was created to help.
- You can contact the Mississippi Division of Medicaid (DOM) multiple ways as listed below. In accordance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and to protect confidentiality, it is advised that you **do not email protected health information or personally identifiable information.**

Toll-free: 800-880-5920

Phone: 601-576-4162

Fax: 601-576-4161

Mailing address:

ATTN: Office of Program Integrity

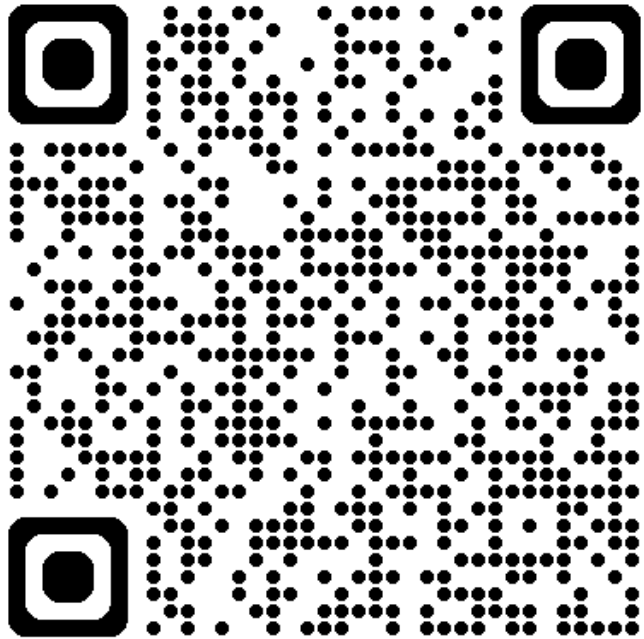
550 High Street, Suite 1000

Jackson, MS 39201

Report fraud and abuse by submitting a [secure online form](#)

# Reporting Medicaid Fraud & Abuse

# Reporting Medicaid Fraud & Abuse

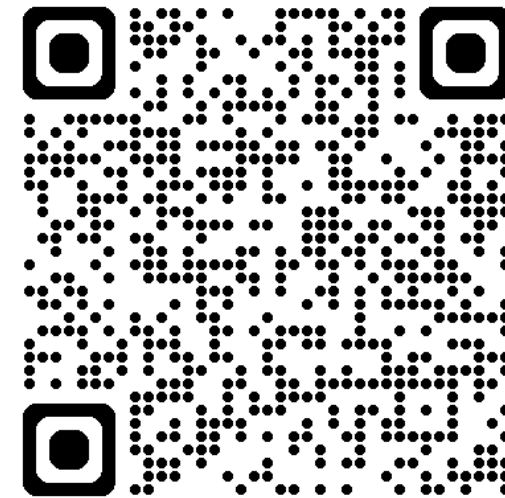


Types of Provider Fraud Billing for services not rendered:

- Inappropriate or lack of documentation to support services billed
- Quality of care issues that fail to meet professionally recognized health care standards
- Falsifying certificates of medical necessity, plans of treatment, and medical records to justify payment
- Soliciting or receiving kickbacks
- Violating Medicaid policies, procedures, rules, regulations, and/or statutes

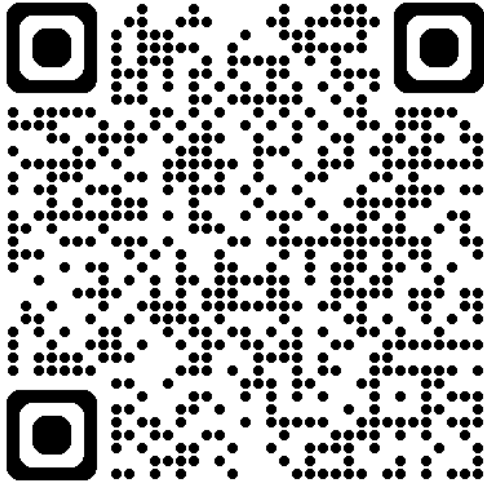
# Reporting Abuse Neglect & Exploitation

- The Vulnerable Persons Act mandates that any person who knows or suspects that a vulnerable person has been or is being abused, neglected or exploited, shall immediately file a report.
  - Every recipient of Medicaid Waiver Services is classified as a Vulnerable Adult.
  - After a report is made to APS, Providers must contact DOMs office of LTSS with the Report Intake Number.
- 
- **[VULNERABLE PERSON ABUSE HOTLINE: 844-437-6282](tel:844-437-6282)**
  - **<https://hssmsprod.wellsky.com/assessments/?WebIntake=1C7B078B-3596-4768-8DCE-40CBAF6690D3>**



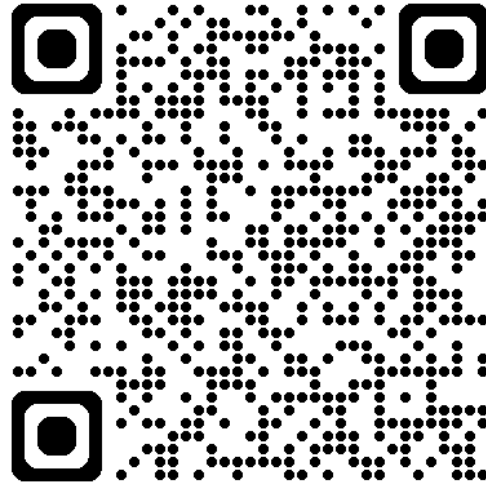
# Helpful Links

## ADA Standards



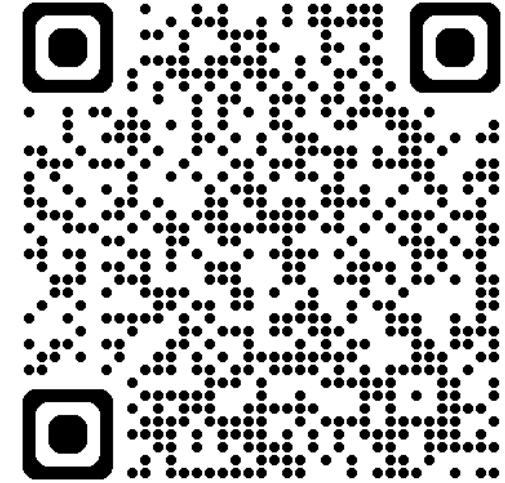
[ADA Standards for Accessible Design | ADA.gov](https://www.ada.gov)

## MS Secretary of State



[Business Services & Regulation | Michael Watson Secretary of State](https://www.ms.gov)

## Dept. of Labor



[https://www.dol.gov/sites/dolgov/files/WHD/legacy/files/homecare\\_guide.pdf](https://www.dol.gov/sites/dolgov/files/WHD/legacy/files/homecare_guide.pdf)

# Mississippi Division of Medicaid, Office of Long Term Services & Supports

- Phone: (601) 359-6141
- Website: <https://medicaid.ms.gov/hcbs-waiver-providers/>
- Email Address: [HCBSProviders@medicaid.ms.gov](mailto:HCBSProviders@medicaid.ms.gov)
- Address: Office of Long Term Services & Supports

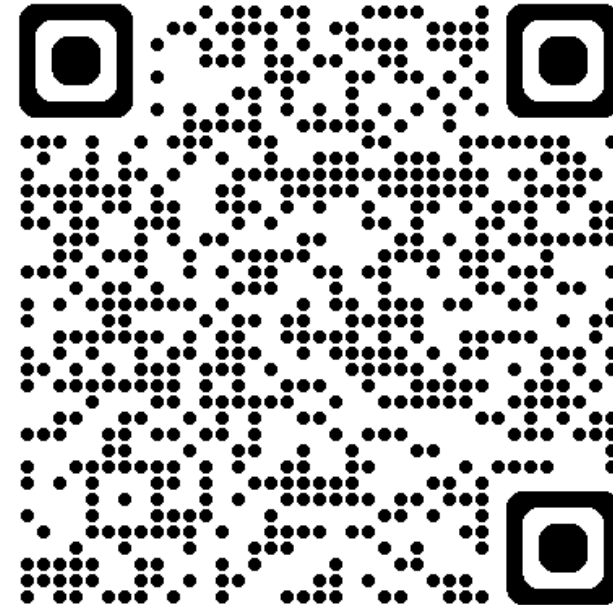
Division of Medicaid  
Walter Sillers Building  
550 High Street  
Jackson, MS 39201

Please direct all requests to our team at [HCBSProviders@Medicaid.MS.Gov](mailto:HCBSProviders@Medicaid.MS.Gov) to ensure fastest response times and be sure to include the following:

- Business Name:
- Provider ID:
- Your Name:
- Your Title:
- Phone #:

## Contact Information

---



# Staying Informed

Policy Updates: Get notified when new policies are announced, email a contact name, place of business and a contact number (optional) to [Policy@Medicaid.MS.Gov](mailto:Policy@Medicaid.MS.Gov)

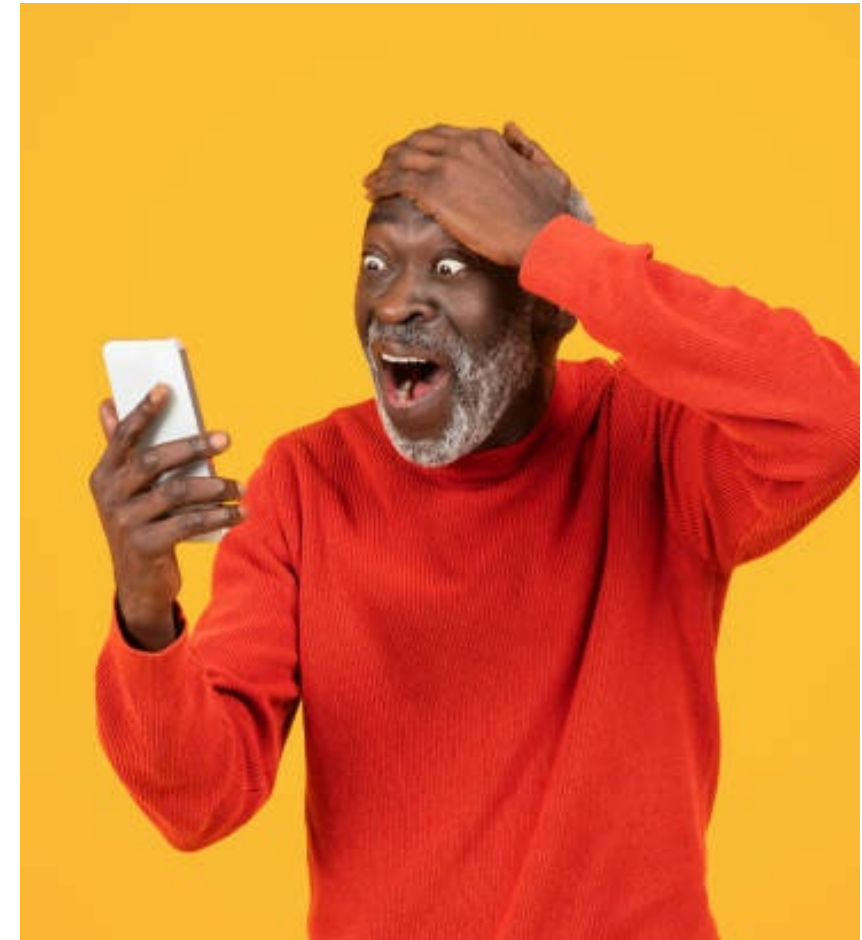
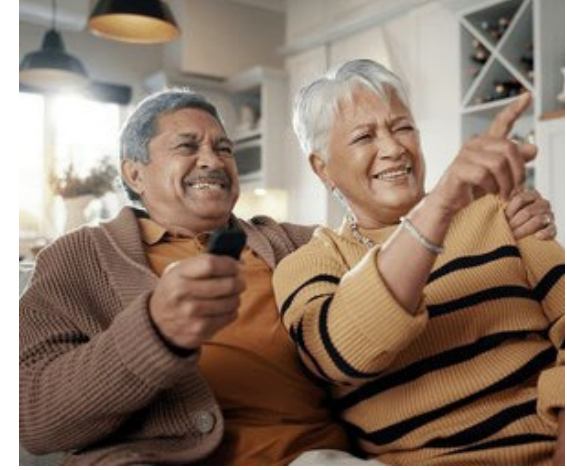
Late Breaking News: To sign up to receive email alerts every time DOM posts a Late Breaking News update, just email a contact name, place of business and a contact number (optional) to [LateBreakingNews@medicaid.ms.gov](mailto:LateBreakingNews@medicaid.ms.gov)

If you have questions about background checks, please contact MS Dept of Health  
[Julie.Henderson@msdh.ms.gov](mailto:Julie.Henderson@msdh.ms.gov)

If you have questions about your responsibilities as an employer, please contact the U.S. Dept of Labor  
[Williams.Nichole@DOL.Gov](mailto:Williams.Nichole@DOL.Gov)

---

# ADC Success Stories & Facility Highlights



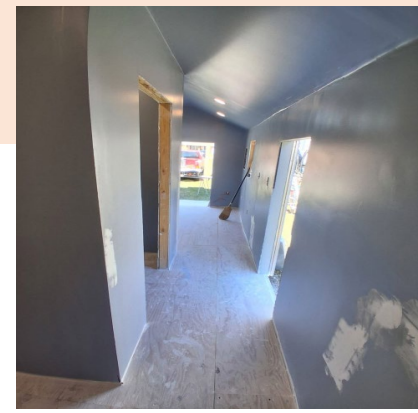
*Before*



# OLP Services

Facility Addition

*Before*



*After*



OLP Services created a dedicated on-site salon space to enhance personal care services for their ADC participants. The salon provides a comfortable, welcoming environment for grooming and self-care, helping promote dignity, confidence, and overall well-being. Since completing this space, participants have responded very positively, and it has quickly become a favorite part of their program.

Success

“We are proud to continue improving our facility to better serve our community” – OLP Services

# HIGHLIGHTS



Also serving

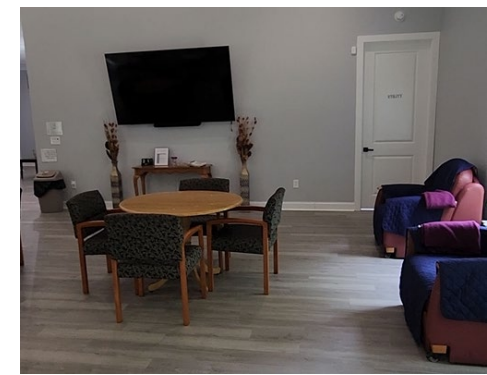
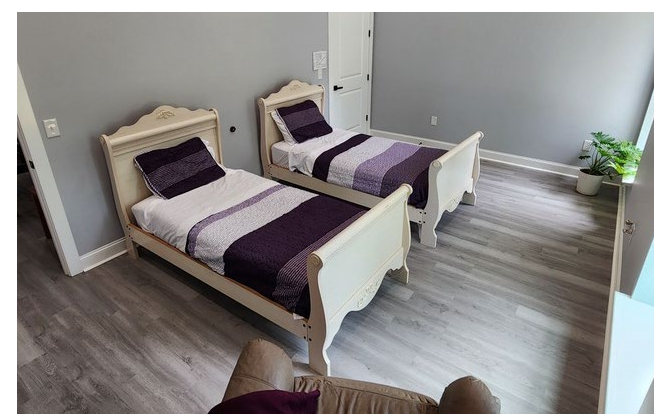
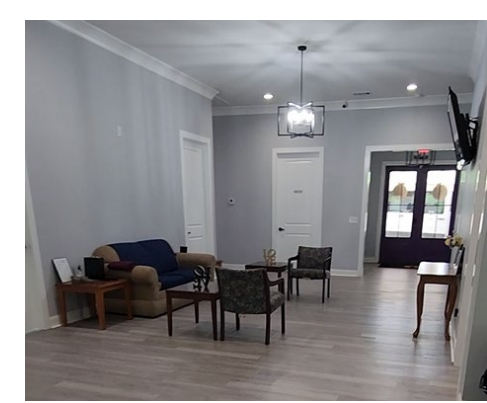
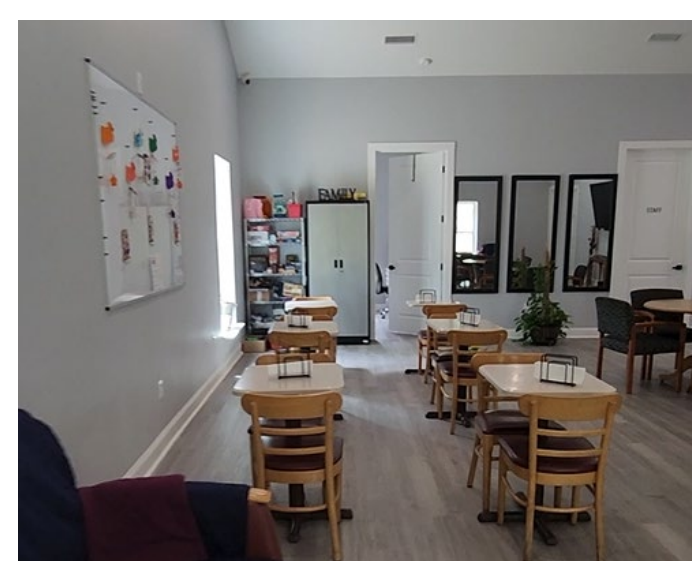
# Gulf Shores ADC

---

## Building Renovation



**VETERANS**



*"Come as Friends  
Leave as Family"*

**Golden Ladies And Gentlemen**  
New Construction



# We want to hear from you!

Share with us your agency's success and highlight what makes your program unique in servicing your community.



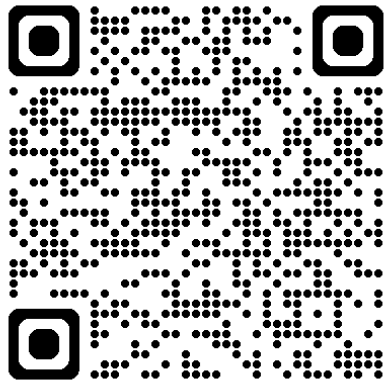
Had a recent activity that participants really enjoyed? Share a few photos and a description of the activity. *(If participants are included in photos a signed release form must be submitted to DOM to give authorization for their image to be shared.)*

Remodeled or made improvements to your facility? Share the before and after and how it has improved services.

Did you have a really great turnout at your last quarterly advisory committee meeting? Tell us how you did it!

Simply email [HCBSProviders@medicaid.ms.gov](mailto:HCBSProviders@medicaid.ms.gov) with a brief description of your success or highlights and attach any photos or videos you'd like to share. We'd love the opportunity to show off the hard work and dedication of DOMs ADC Providers!

# Q&A



[E&D Provider Frequently Asked Questions](#)

