

The Scoop

Quarterly updates for HCBS Providers from the Office of LTSS.
July 1, 2026

Volume 2, Issue 1

Annual Administrative Code Part 208 Training

Annual In-Person Training for Medicaid Administrative Code is scheduled for **Tuesday, July 21, 2026.**

This year's training will be held at War Memorial Building, 120 North State Street, Jackson, MS 39201 [War Memorial Building](#) | [Visit Jackson](#)

As a reminder, annual training for the Medicaid Administrative Code is mandatory. Each service location on the Freedom Of Choice list must have staff trained in Administrative Code Part 208, with DOM issued training certificate. Due to seating capacity, providers who attend in person should limit attendance to no more than 3 staff. Attendance for the entire session per provider type will be required to obtain a training certificate for the in-person session, or providers/staff may choose to complete the on-line self-guided option including the Training Quiz, with a passing score, to be issued a certificate. Training must be completed by the Agency Owner, Administrator, Compliance Officer and Program Director.

RSVP for Training:

<https://app.smartsheet.com/b/form/019ed6e97f4874af9c12fb391aadd100>

High Risk Provider Revalidation

CMS is requiring "high risk" providers complete off-cycle revalidation due to being in the high-risk category. This applies to all HCBS providers who have not already completed a revalidation in the past year.

Providers who do not submit their revalidation packet by the date noted on the letter Gainwell mails to them, which is 60 days from the date of the letter, will go into payment suspension until the revalidation is submitted.

MSDH Background Checks

The Federal Bureau of Investigation (FBI) is requiring changes regarding the handling and distribution of Criminal History Record Information (CHRI), also referred to as healthcare rap sheets. This applies to all facilities, providers, staffing agencies, and any entities that utilize the MSDH Background Check Unit to conduct employee background checks beginning on July 1, 2026. The MSDH Background Check Unit will begin reviewing all healthcare rap sheets and making final employment eligibility determinations. Please note that the use and creation of waiver letters will be discontinued under this new process for any NEW healthcare rap sheets processed on or after July 1, 2026. All facilities/providers/staffing agencies must review and update their current procedures by June 30, 2026. Compliance is required. Failure to comply may result in further administrative action and loss of access to SAFER.

Please note, this change is not retroactive and will apply only to healthcare rap sheets processed on or after July 1, 2026. If you still have questions, please contact MSDH's Criminal History Record Check Unit office. CHRCUnit@msdh.ms.gov



Inside this issue

Annual Administrative Code Training...	1
High Risk Provider Revalidation	1
MSDH Background Checks.....	1
DOM Communication.....	2
PCS-IHR Updates.....	2
ADC Updates.....	3
Reminders.....	4
New Providers.....	5

Special points of interest

- Revalidation
- Manual EVV Entries
- DOM Communication
- HHAExchange + Mobile App
- Changes to Referral Processes
- CAP Follow-UP
- Provider Spotlight

Contact Us

Office of Long Term Services and Supports

Phone: (601) 359-6141

Email:

HCBSProviders@medicaid.ms.gov

Website: <https://medicaid.ms.gov/hcbs-waiver-providers/>

DOM Communication

The Division of Medicaid has the right to halt E&D Waiver referrals and admissions if your agency fails to respond to communications timely or if the Division of Medicaid is unable to contact your agency. Your agency will remain removed from the Freedom of Choice list until contact is re-established.

Please ensure that DOM is listed as a safe sender for your agency email domain by utilizing the resources below:

Yahoo Safe Sender: [Add, edit, or delete contacts in Yahoo Mail | Yahoo Help](#)

Gmail Safe Sender: [Add or move contacts - Computer - Contacts Help](#)

AOL Safe Sender: <https://help.aol.com/articles/add-edit-or-delete-contacts-in-aol-mail>

AT&T Safe Sender: [Create and Manage AT&T Email Contacts - AT&T Email Customer Support](#)

Outlook Safe Sender: [Add recipients to the Safe Senders List in Outlook | Microsoft Support](#)



Personal Care & In-Home Respite Updates

HHaEXchange + Mobile App

HHaEXchange+ is the new, free caregiver mobile app available to all Mississippi providers (including those using the state funded solution and those contracted with HHAX directly for the Enterprise version) starting July 6, 2026. The features include a new look, improved offline mode and GPS, point-of-care launchpad, plan of care task icons, and improvements to caregiver documentation. Caregivers will need to switch to the upgraded mobile app by August 31st. Providers are not required to contract with HHAX for the paid enterprise version to access this new tool.

You may read more about the update here:

<https://knowledge.hhaexchange.com/Caregiver/Content/Documentation/Mobile/Mobi-CG-UW-HHAXPlus-Update.htm>

CMS Requirements for Mississippi EVV (Electronic Visit Verification) - Manual Entries

The CMS federal rule, Section 12006 of the 21st Century Cures Act, mandates that EVV data be captured for all in-home HCBS services. Medicaid Administrative Code, Part 200, Rule 1.14 Electronic Visit Verification defines requirements for reimbursement of Personal Care and In Home Respite Claims.

<https://medicaid.ms.gov/wp-content/uploads/2026/04/Title-23-Part-200-General-Provider-Information-eff-04.01.26.pdf>

Manual entry of visit data will only be utilized when the EVV system is unavailable or when exigent circumstances, documented by the provider agency, make usage of the system impossible. The provider agency will:

- Provide justification documentation to support any instance of human error in EVV use and such errors must be readily identifiable. Repeated instances of human error are subject to audit.
- Enter justification documentation into the EVV system.
- Include the date and time of the manual entry, the reason for the entry, and the identification of the person making the entry.

DCW failure to use the EVV system should not be considered an exigent circumstance. DCWs failing to use the system should be educated on the requirements and continued non-compliance should result in disciplinary action

Please use the information below to help you navigate where to request assistance for your HHA/EVV needs.

- If you are having issues with Office Setup, Claim Denials, other technical issues, please contact the HHA Support Desk. Operation hours from 6:30 a.m. - 6:30 p.m. CST, Monday - Friday.
Phone: 1-855-400-4429
- If you have EVV Policy questions or if you have already received a Support Ticket ID number and your ticket is unresolved after 48 hours, please email the EVV Team at DOM for further investigation EVV@Medicaid.MS.Gov

<https://knowledge.hhaexchange.com/enterprise/Content/Support/Client-Support-Portal.htm>

Changes to Referral Processes

There have been some changes with the eLTSS system which are resulting in a more manual approval process for PSSs. This has resulted in a temporary delay in processing these requests. Providers may now receive a PSS that indicates “No decision has been made yet.” This means that there will be a delay in the authorization being loaded into HHAX. Providers should still be receiving a full copy of the PSS and the referral. Until providers have the auth in HHAX, they can use a hard copy referral form and a copy of the PSS and capture information on paper timesheets. Once the auth is received in HHAX, they can go in and manually enter shift data from the timesheet for the first week or two and submit claims at that point.

As always, it’s important that providers review the PSS and compare it to the referral to determine what the members specific needs are and to ensure that there are no discrepancies. If you are not receiving a copy of the full PSS, please notify DOM.

Adult Day Care Updates

ADC Freedom of Choice List

OLTSS is in the process of updating the ADC Freedom of Choice List to ensure accurate and current information for each provider to be distribute to the Planning & Development Districts. In the upcoming days, providers will be notified through Smartsheet automations of any missing documents or updated information needed. A Smartsheet link will then be forwarded to upload documents and completed with your facility’s most current information.

CAP Follow Ups

The Office of Financial & Performance Review is wrapping up the FY24 Adult Day Care audits. Once all CAP’s have been submitted and accepted, OLTSS will begin CAP follow-ups to ensure ongoing compliance.



REMINDER

- DOM offices will be closed on July 3, 2026, in observance of Independence Day.
- Division of Medicaid new fiscal year, FY27, begins July 1, 2026 through June 30, 2027.
- New provider follow-ups are set to begin August 2026.
- All waiver providers are required to follow the Medicaid Administrative Code and all applicable Federal & State Laws including Labor Laws. All calls to our office reporting labor law violations are referred to the U.S. Dept of Labor. If you have questions about your payroll responsibilities as an employer, please contact the U.S. Dept of Labor at 601-965-7393.
- Providers may access their Remittance Advice (RA) by following the instructions in the below linked video (beginning at minute 19:05). The RA is available in MESA, to ensure that all claims billed have been reimbursed, or determine the reason for the denial <https://www.youtube.com/watch?v=lLeapclHFHs>
- Providers should be reviewing the PSS to ensure that the MESA ID is included on PSS. There are plans to turn the PSS into a Prior Authorization (PA). Without the MESA ID, the PSS information will not appropriately transfer into a service authorization.
- Providers must report any suspected instances of Fraud, Waste, or Abuse. 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 do not work together to help stop fraud and abuse, the system might not be available for those whom the program was created to help. There are multiple ways to report, which can be found at the following link: [Report Fraud and Abuse - Mississippi Division of Medicaid](#)
- **You can find prior issues of The SCOOP on our website** [HCBS Waiver Providers - Mississippi Division of Medicaid](#)

Welcoming Our New E&D Waiver Providers

Healing Hands Healthcare

Faith Heart Homecare

Heart 2 Heart Comfort Care

Hope Healthcare Agency

TLC Personal Care Services

Quality Solutions Homecare

Happy at Home Personal Care Services

From the Office of Long Term Services and Supports

Thank you for your patience during the SmartSheet implementation process and review of submissions. Please remember to always reach out to our team first for all your needs so we may provide assistance. If we are unable to assist, we will direct you to the appropriate department.

As always, thank you for your dedication and exceptional efforts in providing care to Mississippi Elderly & Disabled Waiver participants!

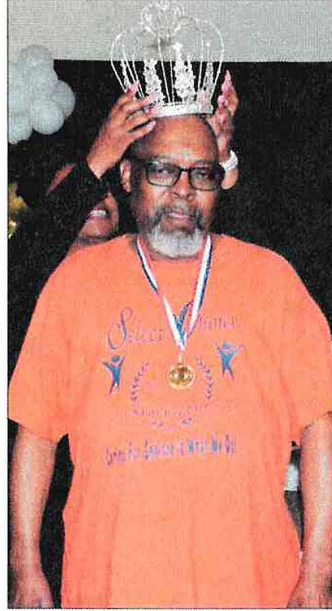


Alexis Martin, Imani Skipwith, Kenosha Williams, Nancy Dampier
The HCBS Provider Relations Team

<https://medicaid.ms.gov/hcbs-waiver-providers/>

Providers may use the linked form to submit questions or request information: [E&D Provider Frequently Asked Questions](#)
Inquiries not submitted via the linked form should be submitted to the team at HCBSProviders@Medicaid.MS.Gov

Golden Heritage celebrates Older Americans Month



Golden Heritage/Select Choice Adult Daycare Services celebrated Older Americans Month during the week of May 11-15. Golden Heritage/Select Choice acknowledged the contributions and achievements of older Americans in Sunflower, Coahoma, Tallahatchie and Bolivar counties.

Led by the Administration for Community Living (ACL) and established in 1963, Older Americans Month (OAM) is celebrated every May. This year's theme, "Champion Your Health" focused on transforming how society perceives, talks about, and approaches aging. It encouraged individuals and communities to challenge stereotypes and dispel misconceptions.

Golden Heritage/Select Choice Adult Daycare Services designed May 11-15 to showcase and pay homage to pioneers in Sunflower, Coahoma, Tallahatchie and Bolivar counties in "All American Style." Monday, May 11th they kicked off the week-long festivities with an Opening Day Appreciation in partnership with Sunflower-Humphreys Counties Progress Inc., with a day in the park where vendors provided information on health maintenance, with giveaways and consultations. Participants enjoyed delicious food and music and ended the day with an ice cream social. On Tuesday, daycare clients were treated to a day of history and culture with a visit to the B.B. King Museum followed by lunch. Wednesday included lunch and fun at Fitzgerald's Casino in Robinsonville. Concluding the week was a first-ever Senior Prom which was held at Ruleville's Community House. A King and Queen were crowned for both Golden Heritage and Select Choice. Mr. Angelo Gary and Ms. Ora Taylor, both of Ruleville, represented Golden Heritage and Mr. Jerry Holloway and Ms. Gertrude Callaway, both of Tutwiler, represented Select Choice.

This week-long celebration was made possible through the support and partnership of neighbors, friends, family and especially corporate/community partners and sponsors.

