



Transition to a Different Consultant Agency

If a participant/legal representative chooses to select a different consultant agency, the steps listed below must be followed so that important information is provided to the new agency and that critical issues affecting a participant's health and safety do not get 'lost in the shuffle'. ***Participants are not responsible for the transfer of required paperwork but they or their legal representative should participate in the transition process.***

1. *It is the responsibility of the participant or their legal representative to contact the appropriate Mi Via state staff to initiate a consultant agency change.*
 - a. *For the DD Mi Via population, contact the local Developmental Disabilities Supports Division (DOH/DDSD) Regional Office to initiate the Freedom of Choice (FOC). For the AIDS and MF Mi Via population, contact the appropriate Mi Via Program Manager at DOH to initiate the FOC process.*
 - b. *For the CoLTS or BI Mi Via population, contact the appropriate Mi Via Program Manager at ALTSD to initiate the Consultant Agency Change form (CAC) process.*
2. *Once the FOC/CAC has been received by the appropriate Mi Via Program Manager and/or by DDSD Regional Office, it is forwarded to both the current and new consultant agency within 5 working days. Participant file transfers and transition meetings are to be completed within thirty (30) days of receipt of the FOC/CAC.*

3. The transferring consultant agency will contact the receiving consultant agency and participant /legal representative to schedule a transition meeting. The transferring consultant agency will also inform the appropriate Mi Via Program Manager and/or DDSD Regional Office(s) of the date and time of the transition meeting. This ensures that the Mi Via Program Manager and/or DDSD Regional Office(s) are aware of the change and will be available to provide technical assistance as needed.
4. The participant or their legal representative must be present. If they cannot attend, a teleconference should be arranged. A Release of Information (ROI) should be completed prior to the meeting so that exchange of information can occur.
5. The transition meeting should occur in person. If necessary, the transition meeting could be held via teleconference if circumstances warrant. The transition meeting will include the following:
 - a. Discussion of the critical clinical issues that need immediate follow up as well as historical information regarding the individual which include, but are not limited to:
 - i. Date of the Level of Care (*LOC*) and Service and Support Plan (*SSP*)
 - ii. Current services/goods on the SSP budget
 - iii. Any budget revisions in process
 - iv. Any Medical Issues (medications, adaptive equipment, allergic reactions, therapy needs etc.)
 - v. Guardianship and Power of Attorney orders and related documents
 - vi. Medicaid, Medicare, other Third Party Coverage documents
 - vii. Problems identified by the transferring consultant agency that the receiving consultant agency should be aware of.

- viii. Agreement on the date that the receiving consultant agency will become the official consultant agency of record. The effective date must always be the first of a month.
6. Transfer of the following documents must be presented to the receiving consultant agency in person or via registered mail by the transition meeting date.
 - a. Current year assessments
 - b. Current LOC: TPA approval letter, Long Term Care Abstract, Individual Budgetary Allocation (IBA)
 - c. ICD 9 Form (BI only)
 - d. Current SSP and SSP revisions –Current TPA documents, approval/denial letters, Requests for Information, support documents to the SSP including justification or denial letters from Third Parties, Legally Responsible Individual permissions, additional funding documentation, environmental modification paperwork or any relevant reports or documents used to prepare the SSP
 - e. Current approval letter from ISD
 - f. Meeting notes and correspondence as available
 - g. Medical reports (primary care physician, specialists that may impact the SSP or LOC)
 - h. Other Evaluations as applicable (therapy, vocational, rehabilitation)
 - i. Current Individual Education Plan, DVR Plan, Private Duty Nursing plan (if applicable)
 - j. Allocation letter/Waiver change form
 - k. Guardianship/POA paperwork
 - l. Employer of Record Information Form
 - m. One full year of case notes (narratives) and quarterly visit forms

n. Other pertinent information

The transferring consultant agency retains the original documents, which may be archived but must be available at the request of the Tri Agencies in accordance with Medicaid regulations. Copies are sent to the receiving consultant agency.

7. A *Letter of Transfer and Receipt* must be presented by the receiving consultant agency to the transferring consultant agency that lists:
- a. Documents that are transferred;
 - b. Missing documents;
 - c. *LOC, SSP, and ISD* expiration dates;
 - d. *Release of Information* for the receiving consultant agency to complete in order to request documents from generic or other supports that the transferring consultant agency may not have requested or received; and
 - e. Issues that need immediate follow-up.

The letter must include signature lines. Representatives of both consultant agencies must sign this document as well as the participant/ legal representative. The letter will be sent by the new agency to the appropriate Mi Via Program Manager or Regional Office (DD only) for entry into the online system to be associated with the participant on the effective date of the change. The letter will also be sent to Molina to inform them of the change. Alerts will be sent to both transferring and receiving consultant agencies when final agency change has been made in the online system.