

BACKGROUND

- Prior to July 1, 2021, Senate Bill 28 was written and passed as a **Government/Taxpayer funded financial “bridge”** to support Home Health Care and Residential Care Providers impacted by the 2019 Auto Insurance Reform Act.

WHY HAVEN'T HOME HEALTH CARE OR RESIDENTIAL CARE COMPANIES APPLIED FOR THE \$25 MILLION FUND?

LOGISTICAL NIGHTMARE

To Apply for a One-Time \$500,000 Taxpayer Funded Grant, Providers Must complete ALL of the below:

- Prove that the cost of providing care is greater than insurance reimbursement.
 - **Payments TO HOME HEALTH CARE COMPANIES** are between \$14-19 per hour.
 - **Fast Food Restaurants ARE PAYING EMPLOYEES** \$15-20 per hour.
- Provide Full Financial Statements to the MI Dept of Insurance and Financial Services (DIFS) which can be made public by the Freedom of Information Act (FOIA).
 - **DO OTHER PRIVATE COMPANIES IN DIFFERENT INDUSTRIES DO THIS?**
- Prove how Home Health Care and Residential Care Companies tried to “alter their business model.”
 - Just because a home health care or Residential Care Provider works in other health sectors, does not take away the needs of someone who was injured in an auto accident.
 - **HOW DOES SOMEONE DEPENDENT ON CARE, “ALTER” THESE NEEDS (I.E. CHANGE THAT THEY ARE PARALYZED AS A RESULT OF AN AUTO ACCIDENT?)**
- Share **EACH** of the following for **EACH Patient, Charge, and Entity Billed**:
 - Date(s) of Service, Service Provided, Medicare Code, Amount Billed, Amount Paid, Cost of Care/Service, DIFS Utilization Review Number.
 - Larger Home Health providers have over 300 clients for whom they provide services, each receiving care daily. Providing this information for each client is extremely tedious for an amount of \$ that doesn't allow providers to remain in business at this volume.
- **UTILIZATION REVIEW (UR):** Current UR requests have resulted in DIFS simply pointing to the statute and upholding providers being paid only 55% of their 2019 charges.
 - **Why would providers go through so much effort when previous inquiries have resulted in denials?**
- **SHARE ALL BILLING, CHARGES, AND INVOICES RELATED** to **OTHER** types of business and care delivered to Non-Motor Vehicle Accident clients in 2019 for comparison.
- Care providers are now **DEPENDENT ON THE GOVERNMENT** to set their profit margin.
- Provide **“Metrics”** on why your billing/collections are inadequate related to the 2019 Auto Insurance Reform Act and why you charged and why you were paid what you were paid.
- Going through the above steps as DIFS sees fit **DOES NOT** result in any Taxpayer monies being awarded - All while we let the MCCA fund re-fund and grow from trust dividends.

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