



**EXCEPTION FOR CONTINUED CONSULTANT REIMBURSEMENT**

Date of Request: \_\_\_\_\_

Consultant Agency: \_\_\_\_\_

Consultant: \_\_\_\_\_

Participant: \_\_\_\_\_

SS#: \_\_\_\_\_

Date PFOC received: \_\_\_\_\_

Date WCF received: \_\_\_\_\_

**Mi Via Service Standards require Mi Via Consultants obtain written approval from the Mi Via Program Manager or their designee prior to billing for continued Consultant services when:**

- A Mi Via participant is in the pre-eligibility phase over the ninety (90) day timeframe; or
- A Mi Via participant does not have a Service and Support Plan (SSP) in effect ninety (90) days after their eligibility is approved; or
- A Mi Via participant does not have a Service and Support Plan (SSP) in effect within ninety (90) days of a waiver change to Mi Via.

On a case by case basis, the Developmental Disabilities Supports Division may grant an exception as determined necessary to a Consultant Agency under the circumstances outlined above. If prior approval is not received prior to billing for continued services, funds may be subject to recoupment.

**Prior Approval is requested due to:**

\_\_\_\_\_ Participant Pre-Eligibility Phase has exceeded ninety (90) days

\_\_\_\_\_ Participant SSP is not in effect within ninety (90) days of Medicaid Eligibility

\_\_\_\_\_ Participant SSP is not in effect within ninety (90) days of the waiver change

**Reason for Request (attach additional sheet if necessary):**

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Exceptions can only be requested if Consultants have adhered to the requirements of the Mi Via Standards during Pre-Eligibility Services. Failure to comply with the Standards may result in corrective action.

**DDSD USE ONLY:**

<p>_____ Approved    _____ Denied for the following reason(s): _____ DOH/DDSD Program Manager (or designee): _____ Date: _____</p>
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