

Bulletin Number: MSA 05-55

Distribution: Nursing Facilities (Provider Type 60)
Hospital Long Term Care Units (Provider Type 62)
Ventilator Dependent Units (Provider Type 63)

Issued: October 10, 2005

Subject: Fee Restoration for Non-Publicly Owned Nursing Facilities

Effective: As indicated

Programs Affected: Medicaid

The purpose of this bulletin is to inform non-publicly owned nursing facilities that the Michigan Department of Community Health (MDCH) has restored previously imposed reductions.

Executive Order 2005-7

The 4% rate reduction implemented May 1, 2005 in response to Executive Order 2005-7 was restored retroactively to May 1, 2005.

MDCH will initiate action to adjust reimbursement for claims already processed for payment for dates of service on or after May 1, 2005 **if** a single monthly claim was paid for a beneficiary **or** multiple claims were paid for a month **and** the beneficiary had no patient-pay amount. No action is required by the nursing facility.

If a beneficiary had a patient-pay amount **and** multiple claims were submitted for a month, the nursing facility must submit void claims to cancel payments made and submit a new claim(s) in order to receive correct reimbursement.

Executive Order 2002-22

The 1.85% rate reduction implemented March 1, 2003 in response to Executive Order 2002-22 has been restored effective October 1, 2005.

Manual Maintenance

Providers may discard this bulletin after review.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

Approved

A handwritten signature in black ink that reads "Paul Reinhart". The signature is written in a cursive, flowing style.

Paul Reinhart, Director
Medical Services Administration