

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: HEALTH CARE FINANCING ADMINISTRATION	1. TRANSMITTAL NUMBER: 15 - 0005	2. STATE: Michigan
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID) TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR HEALTH FINANCING ADMINISTRATION DEPARTMENT OF HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE June 1, 2015	

5. TYPE OF PLAN MATERIAL (Check One):

NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

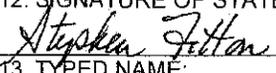
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR 430.12(c)	7. FEDERAL BUDGET IMPACT: a. FFY 2015 \$0 b. FFY 2016 \$0
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Supplement to Attachment 3.1-A, Page 17a.1 Attachment 4.19-B, Page 6f	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Supplement to Attachment 3.1-A, Page 17a.1 Attachment 4.19-B, Page 6f

10. SUBJECT OF AMENDMENT:
Allows pharmacy providers to administer recommended vaccines to beneficiaries.

11. GOVERNOR'S REVIEW (Check One):

GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED Stephen Fitton, Director
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL Medical Services Administration

12. SIGNATURE OF STATE AGENCY OFFICIAL: 	16. RETURN TO: Medical Services Administration Actuarial Division - Federal Liaison Capitol Commons Center - 7 th Floor 400 South Pine Lansing, Michigan 48933
13. TYPED NAME: Stephen Fitton	Attn: Erin Black
14. TITLE: Director, Medical Services Administration	
15. DATE SUBMITTED: May 19, 2015	

FOR REGIONAL OFFICE USE ONLY	
17. DATE RECEIVED:	18. DATE APPROVED:

PLAN APPROVED - ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. SIGNATURE OF REGIONAL OFFICIAL:
21. TYPE NAME:	22. TITLE:

23. REMARKS:

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

***Amount, Duration and Scope of Medical and Remedial Care
Services Provided to the Categorically and Medically Needy***

6. Medical Care Furnished by Practitioners within the Scope of their Practice as Defined by State Law
(continued)

d. Other Practitioner Services (continued)

Pharmacists ~ Effective ~~October 5, 2009~~ JUNE 1, 2015, the administration of the H1N1 influenza vaccineS and effective July 1, 2010, the administration of the seasonal influenza vaccine are IS covered when provided by a licensed pharmacist as authorized by the State within their scope of practice.

TN NO.: 15-0005

Approval Date: _____

Effective Date: 6/01/2015

Supersedes

TN No.: 09-17

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

*Policy and Methods for Establishing Payment Rates
(Other than Inpatient Hospital and Long-Term Care Facilities)*

16. Other Services (continued)

Influenza Vaccinations –

Effective for services provided on or after ~~October 5, 2009~~ JUNE 1, 2015, the administration of the ~~2009 influenza (H1N1) monovalent vaccine~~S is reimbursed the lesser of the Medicaid fee screen or the provider's usual and customary charge minus any third party payment. The provider's usual and customary charge should be the fee most frequently charged to patients. The payment rate is uniform for private and governmental providers. The Michigan Medicaid fee schedule effective ~~October 5, 2009~~ JUNE 1, 2015, may be found at www.michigan.gov/medicaidproviders.

~~Effective for services provided on or after July 1, 2010, the administration of the seasonal flu vaccine is reimbursed the lesser of the Medicaid fee screen or the provider's usual and customary charge minus any third party payment. The provider's usual and customary charge should be the fee most frequently charged to patients. The payment rate is uniform for private and governmental providers. The Michigan Medicaid fee schedule effective July 1, 2010 may be found at www.michigan.gov/medicaidproviders.~~

TN NO.: 15-0005

Approval Date: _____

Effective Date: 6/01/2015

Supersedes
TN No.: 09-17



STATE OF MICHIGAN
DEPARTMENT OF COMMUNITY HEALTH
LANSING

RICK SNYDER
GOVERNOR

NICK LYON
DIRECTOR

February 11, 2015

NAME
TITLE
ADDRESS
CITY STATE ZIP

Dear Tribal Chair and Health Director:

RE: Expansion of Coverage for Pharmacy Administration of Vaccines

This letter, in compliance with Section 1902(a)(73) and Section 2107(e)(1)(C) of the Social Security Act, serves as notice of intent to all Tribal Chairs and Health Directors of the request by the Michigan Department of Community Health (MDCH) to submit a State Plan Amendment to cover pharmacy-administered vaccines.

This amendment will allow pharmacy providers to administer vaccines to beneficiaries. Coverage of pharmacist-administered vaccines will no longer be limited to seasonal influenza and H1N1 vaccines. This change will broaden access to recommended vaccines for all beneficiaries, including Native American beneficiaries.

There is no public hearing scheduled for this State Plan Amendment. Input regarding this amendment is highly encouraged, and comments regarding this Notice of Intent may be submitted to Lorna Elliott-Egan, MDCH Liaison to the Michigan Tribes. Lorna can be reached at (517) 373-4963 or via e-mail at Elliott-EganL@michigan.gov. **Please provide all input by March 16, 2015.**

In addition, MDCH is offering to set up group or individual meetings for the purposes of consultation in order to discuss this amendment, according to the tribes' preference. This consultation meeting will allow tribes the opportunity to address any concerns and voice any suggestions, revisions, or objections to be relayed to the author of the proposal. If you would like additional information or wish to schedule a consultation meeting, please contact Lorna Elliott-Egan at the telephone number or email address provided above.

MDCH appreciates the continued opportunity to work collaboratively with you to care for the residents of our state.

Sincerely,

Stephen Fitton, Director
Medical Services Administration

cc: Leslie Campbell, Region V, CMS
Pamela Carson, Region V, CMS
Ashley Tuomi, MHPA, Executive Director, American Indian Health and Family Services of Southeastern Michigan
L. John Lufkins, Executive Director, Inter-Tribal Council of Michigan, Inc.
Jenny Jenkins, Acting Area Director, Indian Health Service - Bemidji Area Office
Lorna Elliott-Egan, MDCH

**Distribution List for L 15-14
February 11, 2015**

Mr. Levi Carrick, Sr., Tribal Chairman, Bay Mills Indian Community
Ms. Vicki Newland, Health Director, Bay Mills (Ellen Marshall Memorial Center)
Mr. Alvin Pedwaydon, Tribal Chairman, Grand Traverse Band Ottawa & Chippewa Indians
Ms. Loi Chambers, Health Director, Grand Traverse Band Ottawa/Chippewa
Mr. Kenneth Meshigaud, Tribal Chairman, Hannahville Indian Community
Ms. G. Susie Meshigaud, Health Director, Hannahville Health Center
Mr. Donald Shalfoe Sr., President, Keweenaw Bay Indian Community
Ms. Carole LaPointe, Health Director, Keweenaw Bay Indian Community - Donald Lapointe Health/Educ Facility
Mr. James Williams, Jr., Tribal Chairman, Lac Vieux Desert Band of Lake Superior Chippewa Indians
Ms. Sadie Valliere, Health & Human Services Director, Lac Vieux Desert Band
Mr. Larry Romanelli, Ogema, Little River Band of Ottawa Indians
Ms. Jessica Burger, Acting Health Director, Little River Band of Ottawa Indians
Mr. Fred Kiogima, Tribal Chairman, Little Traverse Bay Band of Odawa Indians
Ms. Sharon Sierzputowski, Health Director, Little Traverse Bay Band of Odawa
Mr. DK Sprague, Tribal Chairman, Match-E-Be-Nash-She-Wish Potawatomi Indians (Gun Lake Band)
Ms. Phyllis Davis, Health Director, Match-E-Be-Nash-She-Wish Potawatomi
Mr. Homer Mandoka, Vice Tribal Chairman, Nottawaseppi Huron Band of Potawatomi Indians
Ms. Rosalind Johnston, Health Director, Huron Potawatomi Inc.- Tribal Health Department
Mr. John Warren, Tribal Chairman, Pokagon Band of Potawatomi Indians
Mr. Matt Clay, Health Director, Pokagon Potawatomi Health Services
Mr. Steve Pego, Tribal Chief, Saginaw Chippewa Indian Tribe
Mrs. Karmen Fox, Executive Health Director, Nimkee Memorial Wellness Center
Mr. Aaron Payment, Tribal Chairman, Sault Ste. Marie Tribe of Chippewa Indians
Ms. Bonnie Culfa, Health Director, Sault Ste. Marie Tribe of Chippewa Indians - Health Center

CC: Leslie Campbell, Region V, CMS
Pamela Carson, Region V, CMS
Ashley Tuomi, MHPA, Executive Director, American Indian Health and Family Services of Southeastern Michigan
L. John Lufkins, Executive Director, Inter-Tribal Council of Michigan, Inc.
Jenny Jenkins, Acting Area Director, Indian Health Service - Bemidji Area Office
Lorna Elliott-Egan, MDCH



Order Confirmation

Ad Order Number 0007225355

Customer

Account: 1000613740
 MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
 PO BOX 30479
 LANSING MI 48909 USA
 (517)241-9444

FAX:
 smithp2@michigan.gov

Payer Customer

Account: 1000613740
 MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
 PO BOX 30479
 LANSING MI 48909 USA
 (517)241-9444

PO Number

Sales Rep. kjones3

Order Taker kjones3

Order Source

Special Pricing

Tear Sheets	1	Net Amount	\$1,005.25
Proofs	0	Tax Amount	\$0.00
Affidavits	0	Total Amount	\$1,005.25
Blind Box		Payment Method	Invoice
Promo Type		Payment Amount	\$0.00
Materials		Amount Due	\$1,005.25
Invoice Text	ADMINISTER VACCINES TO BENEFICIARIES		

Ad Schedule

Product	Flint Journal	Placement/Class	Announcements
# Inserts	1	POS/Sub-Class	Public Notices - Public Notices
Cost	\$252.76	AdNumber	0007225355-01
Ad Type	CLS Liner	Ad Size	1 X 67 li
Pick Up #	0007225344	Ad Attributes	
External Ad #		Color	<NONE>
Production Method	AdBooker	Production Notes	
Run Dates	Sort Text	PUBLICNOTICEMICHIGANDEPARTMENTOFCOMMUNITYHEALTHMEDICALSERVICESADMINISTRATIONPARTICIPATIN	
02/15/2015			

Product	MMG_Other Premium	Placement/Class	Announcements
# Inserts	1	POS/Sub-Class	Public Notices - Public Notices
Cost	\$90.75	AdNumber	0007225355-01
Ad Type	CLS Liner	Ad Size	1 X 67 li
Pick Up #	0007225344	Ad Attributes	
External Ad #		Color	<NONE>
Production Method	AdBooker	Production Notes	
Run Dates	Sort Text	PUBLICNOTICEMICHIGANDEPARTMENTOFCOMMUNITYHEALTHMEDICALSERVICESADMINISTRATIONPARTICIPATIN	
02/15/2015			

Product	Grand Rapids Press	Placement/Class	Announcements
# Inserts	1	POS/Sub-Class	Public Notices - Public Notices
Cost	\$435.54	AdNumber	0007225355-01
Ad Type	CLS Liner	Ad Size	1 X 67 li
Pick Up #	0007225344	Ad Attributes	
External Ad #		Color	<NONE>
Production Method	AdBooker	Production Notes	
Run Dates	Sort Text	PUBLICNOTICEMICHIGANDEPARTMENTOFCOMMUNITYHEALTHMEDICALSERVICESADMINISTRATIONPARTICIPATIN	
02/15/2015			

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<i>Product</i>	Kalamazoo Gazette	<i>Placement/Class</i>	Announcements
<i># Inserts</i>	1	<i>POS/Sub-Class</i>	Public Notices - Public Notices
<i>Cost</i>	\$104.86	<i>AdNumber</i>	0007225355-01
<i>Ad Type</i>	CLS Liner	<i>Ad Size</i>	1 X 67 II
<i>Pick Up #</i>	0007225344	<i>Ad Attributes</i>	
<i>External Ad #</i>		<i>Color</i>	<NONE>
<i>Production Method</i>	AdBooker	<i>Production Notes</i>	
<i>Run Dates</i>	<i>Sort Text</i>	PUBLICNOTICEMICHIGANDEPARTMENTOFCOMMUNITYHEALTHMEDICALSERVICESADMINISTRATIONPARTICIPATIN	
02/15/2015			

<i>Product</i>	Saginaw News	<i>Placement/Class</i>	Announcements
<i># Inserts</i>	1	<i>POS/Sub-Class</i>	Public Notices - Public Notices
<i>Cost</i>	\$114.24	<i>AdNumber</i>	0007225355-01
<i>Ad Type</i>	CLS Liner	<i>Ad Size</i>	1 X 67 II
<i>Pick Up #</i>	0007225344	<i>Ad Attributes</i>	
<i>External Ad #</i>		<i>Color</i>	<NONE>
<i>Production Method</i>	AdBooker	<i>Production Notes</i>	
<i>Run Dates</i>	<i>Sort Text</i>	PUBLICNOTICEMICHIGANDEPARTMENTOFCOMMUNITYHEALTHMEDICALSERVICESADMINISTRATIONPARTICIPATIN	
02/15/2015			

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Ad Content Proof

**PUBLIC NOTICE
Michigan Department
of Community Health
Medical Services
Administration**

**Participating Pharmacists
May Administer Vaccines
To Beneficiaries**

The Michigan Department of Community Health provides notice of its intent to submit a State Plan Amendment to cover pharmacist-administered vaccines.

To broaden access to recommended vaccines, this amendment will allow pharmacists to administer vaccines to beneficiaries. Coverage of pharmacist-administered vaccines will no longer be limited to seasonal influenza and H1N1 vaccines. Pharmacists must be in compliance with State of Michigan rules and regulations, have received the appropriate training for vaccine administration, and have a letter of delegation from a physician to be eligible to administer vaccines under this policy. This policy change will be budget neutral.

Any comments on, or requests for copies of the Notice of Proposed Policy may be submitted in writing to: Michigan Department of Community Health, Pharmacy Management Division, Bureau of Medicaid Policy and Health Systems Innovation, Attention Rita Subhedar, P.O. Box 30479, Lansing, Michigan 48909-7979. Written comments may be reviewed by the public at Capitol Commons Center, 400 South Pine Street, Lansing, Michigan. Request for copies and comments must include the project number 1506. There is no public hearing scheduled for this proposed policy.