

Michigan Department of Health and Human Services
MI Health Link Advisory Committee

Frequently Asked Questions

What is the MI Health Link?

The Michigan Department of Health and Human Services (MDHHS) is the state agency that oversees the Michigan Medicaid program. MDHHS has created a demonstration called MI Health Link. MI Health Link integrates services and supports for people who are eligible for both Medicare and Medicaid. All services and supports are delivered by Integrated Care Organizations (ICOs) and Prepaid Inpatient Health Plans (PIHPs).

The primary goal of MI Health Link is to design and implement an organized and coordinated delivery system that

- Improves the quality of services and enrollee satisfaction
- Provides seamless access to all services and supports for enrollees
- Eliminates barriers to home and community-based supports and services
- Creates a care and supports coordination model that communicates across all areas of the delivery system
- Streamlines administrative processes for enrollees and providers

What is the Advisory Committee?

The Advisory Committee will be formed by MDHHS for the demonstration. The Advisory Committee will provide a structure for people enrolled in MI Health Link to provide input on MI Health Link.

What does the Advisory Committee do?

The roles and responsibilities of the Advisory Committee are to

- Provide recommendations and feedback on the quality of services
- Assist in the development of public education and outreach campaigns
- Review ICO and PIHP quality improvement and other required reporting data
- Work with MDHHS to solicit input from stakeholders and other consumer groups
- Provide input into the demonstration evaluation and review evaluation results
- Participate in the regional demonstration forums

The Advisory Committee will develop a work plan and meeting agendas, as well as develop and implement a process with MDHHS to communicate feedback to the ICOs and PIHPs.

A consumer chair will develop agendas, facilitate the meeting, and ensure completion of work plan deliverables and the annual report. The chair may request a facilitator to support completing these tasks.

MDHHS staff will support the Committee by handling all meeting planning, accommodations and logistics, producing meeting materials, and supporting the consumer chair and facilitator, as requested. MDHHS staff will attend meetings to provide requested information to the Advisory Committee. The meetings will be open to the public via phone.

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How often do they meet?

The Advisory Committee will meet monthly, bimonthly (six times per year), or quarterly based on activity. The Advisory Committee will develop its own meeting schedule and locations across Michigan.

How many members are on the Advisory Committee?

No more than 30 members will be selected. The Committee and MDHHS will develop a plan to expand membership as needed.

Who are the Advisory Committee members?

The Advisory Committee will represent the different types of people served by the demonstration. The majority of members will be eligible for both Medicare and Medicaid or families, allies or advocates of those who are eligible. Membership will also include peer or trade organizations and service providers.

What supports are available to Advisory Committee members?

Supports needed to participate will be available for Advisory Committee members who choose them. Funds are available for needed supports. For example, travel reimbursement may be available upon request for consumer participants and family members who are not paid by a community-based or consumer advocacy organization, provider/trade association or another organization/affiliate to represent them. If requested, options for pre-paid transportation will be explored. Committee Members will not be paid for participating.

What commitment is required from Advisory Committee members?

Members will serve as long as they are able and willing, through the demonstration period. Members are asked to review materials in advance of meetings, attend and participate in meetings, participate in the development of work plan materials, and provide feedback to MDHHS.

Members may not be employed by an Integrated Care Organization or Prepaid Inpatient Health Plan.

How can I apply?

A completed application form is required. The application can be emailed, faxed or mailed. The form is available online at www.michigan.gov/mihealthlink. Email INTEGRATEDCARE@michigan.gov or call 517-241-4293 if you need the form mailed to you or would like assistance with completing the application.