

**Distribution:** Nursing Facilities 04-03  
Nursing Homes (Provider Type 60)  
County Medical Care Facilities (Provider Type 61)  
Hospital Long Term Care Units (Provider Type 62)  
Hospital Swing Beds (Provider Type 63)  
Ventilator Dependent Units (Provider Type 63)  
Nursing Facilities for the Mentally Ill (Provider Type 72)  
Hospice 04-02

**Issued:** August 11, 2004

**Subject:** Second Revision to Nursing Facilities Bulletin 03-08, Section 2; and Revision to Nursing Facilities 04-01 and Hospice 04-01 Bulletin (MSA 04-09)

**Effective:** As Indicated

**Programs Affected:** Medicaid

Section 2.2 of Nursing Facilities Bulletin 03-08, and Nursing Facilities 04-01 and Hospice 04-01 Bulletin (MSA 04-09) is rescinded effective October 1, 2003. Publicly owned Class III nursing facilities will not receive a Quality Assurance Adjustment as outlined in these bulletins.

## Manual Maintenance

Retain this bulletin for future reference.

## Questions

Any questions regarding this bulletin should be directed to Provider Support, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231 or e-mail [ProviderSupport@michigan.gov](mailto: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 telephone toll-free 1-800-292-2550.

## Approval



Paul Reinhart, Director  
Medical Services Administration