

Bulletin Number: MSA 10-49

Distribution: Bridges Manual Holders

Issued: November 1, 2010

Subject: Medicaid Long Term Care Post Eligibility Patient Pay Offsets

Effective: December 1, 2010

Programs Affected: Extended Care and Group 2 Aged Blind and Disabled Medicaid Categories

A change in the State Plan now limits the non-covered remedial and medical expenses which can be offset from the patient pay amount, to those incurred in the three months prior to the application for Medicaid. The change also limits the offset to zero if there is a transfer of asset penalty being applied.

Public Comment

The public comment portion of the policy promulgation process is being conducted concurrently with the implementation of the change noted in this bulletin. Any interested party wishing to comment on the change may do so by submitting comments in writing to:

Bridget Heffron
Michigan Department of Community Health
Medical Services Administration
P.O. Box 30479
Lansing, Michigan 48909-7979
Or
E-mail: eligibilitypolicy@michigan.gov

If responding by e-mail, please include "Post Eligibility Patient Pay Offsets" in the subject line.

Manual Maintenance

Retain this bulletin until the information has been incorporated into the Program Eligibility Manual.

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



Stephen Fitton, Director
Medical Services Administration