

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: HEALTH CARE FINANCING ADMINISTRATION	1. TRANSMITTAL NUMBER: 16 - 0015	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 December 1, 2016	

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 435.733, 435.832	7. FEDERAL BUDGET IMPACT: a. FFY 2017 \$1,465,900 b. FFY 2018 \$1,746,900
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 2.4-A, Page 4	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 2.4-A, Page 4

10. SUBJECT OF AMENDMENT:
Updates the guardianship fee deduction per State appropriation boilerplate.

11. GOVERNOR'S REVIEW (Check One):

GOVERNOR'S OFFICE REPORTED NO COMMENT
 OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 Chris Priest, 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: Chris Priest	Attn: Erin Black
14. TITLE: Director, Medical Services Administration	
15. DATE SUBMITTED: December 20, 2016	

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:

Revision: HCFA-PM-91-4 (BPD)
August 1991

Citation	Condition or Requirement
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435.725 B. Post-Eligibility Treatment of Institutionalized Individuals

435.733 The following amounts are deducted from gross income when computing
435.832 the application of an individual's or couple's income to the cost of
 institutional care:

1. Personal Needs Allowance

- a. Aged, blind, disabled—
Individuals \$ 30 plus *
Couples \$ 60 plus *

For the following individuals with greater need—

- b. AFDC related—
Children \$ 30 plus *
Adults \$ 30 plus *
- c. Individuals under age 21 covered in this plan as specified in Item
B.7. of Attachment 2.2-A \$ _____

435.725 2. For maintenance of the non-institutionalized spouse only. The amount
435.733 must be based on a reasonable assessment of need but must not
435.832 exceed the highest of—

- SSI level \$ _____
- SSP level \$ _____
- Medically need level \$ ** _____
- Other as follow \$ _____

*Any income over \$30 (\$60 for couples) for guardianship fees paid for court-appointed guardians up to a maximum amount of ~~\$60~~ **83** per month for actual guardianship fees.

**Applicable protected income level for one person (see Supplement 1).



STATE OF MICHIGAN

DEPARTMENT OF HEALTH AND HUMAN SERVICES

LANSING

RICK SNYDER
GOVERNOR

NICK LYON
DIRECTOR

October 21, 2016

NAME
TITLE
ADDRESS
CITY STATE ZIP

Dear Tribal Chair and Health Director:

RE: Increase in Guardian/Conservator Income Deduction

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 Health and Human Services (MDHHS) to submit a State Plan Amendment.

Currently a Medicaid beneficiary who pays a court-ordered guardian or conservator is allowed a \$60 per month income disregard when determining medical assistance eligibility and patient pay amounts. This State Plan Amendment increases the disregard to \$83 per month. MDHHS expects this change to have little or no impact on Native American beneficiaries. The anticipated effective date of the State Plan Amendment is January 1, 2017.

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, MDHHS Liaison to the Michigan Tribes. Lorna can be reached at 517-284-4034, or via email at Elliott-EganL@michigan.gov. **Please provide all input by December 5, 2016.**

In addition, MDHHS 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.

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

Sincerely,

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

Chris Priest, Director
Medical Services Administration

cc: Keri Toback, Region V, CMS
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.
Keith Longie, Acting Area Director, Indian Health Service - Bemidji Area Office
Lorna Elliott-Egan, MDHHS

Distribution List for L 16-58
October 21, 2016

Mr. Levi Carrick, Sr., Tribal Chairman, Bay Mills Indian Community
Ms. Audrey Breakie, Health Director, Bay Mills (Ellen Marshall Memorial Center)
Mr. Thurlow Samuel McClellan, Chairman, Grand Traverse Band Ottawa & Chippewa Indians
Ms. JoAnne Cook, Tribal Vice Chair, Grand Traverse Band Ottawa & Chippewa Indians
Ms. Ruth Bussey, 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. Warren C. Swartz, Jr., 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
Mr. Donald MacDonald, Health Director, Little River Band of Ottawa Indians
Ms. Regina Gasco-Bentley, Tribal Chairman, Little Traverse Bay Band of Odawa Indians
Ms. Sharon Sierzputowski, Health Director, Little Traverse Bay Band of Odawa
Ms. Leah Fodor, Chairperson, Match-E-Be-Nash-She-Wish Potawatomi Indians (Gun Lake Band)
Ms. Phyllis Davis, Health Director, Match-E-Be-Nash-She-Wish Potawatomi
Mr. Jamie Struck, 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. Frank Cloutier, 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: Keri Toback, Region V, CMS
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.
Keith Longie, Acting Area Director, Indian Health Service - Bemidji Area Office
Lorna Elliott-Egan, MDHHS



Order Confirmation

Ad Order Number 0007887561

Customer

MICHIGAN DEPARTMENT OF HEALTH

Account:1000560354

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES

PO BOX 30479

LANSING MI 48909 USA

(517)241-9444

FAX:

smithp2@michigan.gov

Payor Customer

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Materials		Amount Due	\$750.26
Invoice Text	GUARDIAN FEE STATE PLAN		

Ad Schedule

Product	Saginaw News	Placement/Class	Announcements
# Inserts	1	POS/Sub-Class	Public Notices
Cost	\$119.28	AdNumber	0007887561-01
Ad Type	CLS Liner	Ad Size	1 X 71 li
Pick Up #	0007841467	Ad Attributes	
External Ad #		Color	<NONE>
Production Method	AdBooker	Production Notes	
Run Dates	Sort Text	PUBLICNOTICEMICHIGANDEPARTMENTOFHEALTHANDHUMANSERVICESMEDICALSERVICESADMINISTRATIONGU	
		10/25/2016	

Product	Flint Journal	Placement/Class	Announcements
# Inserts	1	POS/Sub-Class	Public Notices
Cost	\$219.92	AdNumber	0007887561-01
Ad Type	CLS Liner	Ad Size	1 X 71 li
Pick Up #	0007841467	Ad Attributes	
External Ad #		Color	<NONE>
Production Method	AdBooker	Production Notes	
Run Dates	Sort Text	PUBLICNOTICEMICHIGANDEPARTMENTOFHEALTHANDHUMANSERVICESMEDICALSERVICESADMINISTRATIONGU	
		10/25/2016	

Product	Grand Rapids Press	Placement/Class	Announcements
# Inserts	1	POS/Sub-Class	Public Notices
Cost	\$294.47	AdNumber	0007887561-01
Ad Type	CLS Liner	Ad Size	1 X 71 li
Pick Up #	0007841467	Ad Attributes	
External Ad #		Color	<NONE>
Production Method	AdBooker	Production Notes	
Run Dates	Sort Text	PUBLICNOTICEMICHIGANDEPARTMENTOFHEALTHANDHUMANSERVICESMEDICALSERVICESADMINISTRATIONGU	
		10/25/2016	

Product Kalamazoo Gazette

Placement/Class Announcements

Inserts 1

POS/Sub-Class Public Notices

Cost \$109.59

AdNumber 0007887561-01

Ad Type CLS Liner

Ad Size 1 X 71 li

Pick Up # 0007841467

Ad Attributes

External Ad #

Color <NONE>

Production Method AdBooker

Production Notes

Run Dates *Sort Text* PUBLICNOTICEMICHIGANDEPARTMENTOFHEALTHANDHUMANSERVICESMEDICALSERVICESADMINISTRATIONGU
10/25/2016

0007887561-01

Ad Content Proof

**Public Notice
Michigan Department of
Health and Human
Services Medical Services
Administration**

**Guardian Fee State Plan
Amendment Request**

The Michigan Department of Health and Human Services (MDHHS) has submitted a State Plan Amendment (SPA) request to the Centers for Medicare & Medicaid Services (CMS) to increase the current income disregard and patient pay amount offset of \$60.00 to \$83.00 per month for medical services beneficiaries who pay a court appointed guardian or conservator.

The anticipated effective date for the income disregard increase SPA is January 1, 2017.

The department may deduct up to \$83.00 per month as an allowable expense against a beneficiary's income when determining medical assistance and patient amounts when the beneficiary pays a court ordered guardian/conservator.

The estimated gross cost to the State of Michigan for the State Plan Amendment is \$ 2.7 million per year.

There is no public meeting scheduled regarding this notice. Any interested party wishing to request a written copy of the SPA or wishing to submit comments may do so by submitting a request in writing to: MDHHS/Medical Services Administration, Program Policy Division, PO Box 30479, Lansing MI 48909-7979 or e-mail MSADraftPolicy@michigan.gov by November 03, 2016. A copy of the proposed State Plan Amendment will also be available for review at http://michigan.gov/mdhhs/0,5885,7-339-73970_5080-108153--,00.html