

## **Table of Contents**

**State/Territory Name: Michigan**

**State Plan Amendment (SPA) #: MI 15-0012**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Mail Stop S2-26-12  
Baltimore, MD 21244-1850



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**Financial Management Group**

DEC 17 2015

Mr. Chris Priest, Director  
Medical Services Administration  
Department of Community Health  
400 South Pine  
Lansing, MI 48933

RE: Michigan State Plan Amendment (SPA) 15-0012

Dear Mr. Priest:

We have reviewed the proposed amendment to Attachment 4.19-A of your Medicaid State plan submitted under transmittal number (TN) 15-0012. Effective for services on or after September 30, 2015, updates the Michigan Department of Community Health Indigent Care Agreement DSH Pool Eligible Hospitals and Allocations Appendix B.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), 1903(a), and 1923 of the Social Security Act and the regulations at 42 CFR 447 Subpart C. We hereby inform you that Medicaid State plan amendment 15-0012 is approved effective September 30, 2015. We are enclosing the HCFA-179 and the amended plan pages.

If you have any questions, please call Tom Caughey at (517) 487-8598.

Sincerely,



Kristin Fan  
Director

Enclosure

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL**  
FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER: 15 - 0012	2. STATE: Michigan
3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID) TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
4. PROPOSED EFFECTIVE DATE September 30, 2015	

TO: REGIONAL ADMINISTRATOR  
HEALTH FINANCING ADMINISTRATION  
DEPARTMENT OF HUMAN SERVICES

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 447.201

7. FEDERAL BUDGET IMPACT:  
a. FFY 2015 \$0  
b. FFY 2016 \$0

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:  
Attachment 4-19-A, Appendix B, Page 10

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):  
Attachment 4-19-A, Appendix B, Page 10

10. SUBJECT OF AMENDMENT:  
Indigent Care Agreement (ICA) DSH Pool Distribution Update

11. GOVERNOR'S REVIEW (Check One):

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

[Redacted]  
Kathleen Stiffler

16. RETURN TO:  
Medical Services Administration  
Actuarial Division - Federal Liaison  
Capitol Commons Center - 7<sup>th</sup> Floor  
400 South Pine  
Lansing, Michigan 48933  
Attn: Erin Black

14. TITLE:  
Acting Director, Medical Services Administration

15. DATE SUBMITTED:  
September 30, 2015

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED:	18. DATE APPROVED: DEC 17 2015
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**PLAN APPROVED - ONE COPY ATTACHED**

19. EFFECTIVE DATE OF APPROVED MATERIAL: SEP 30 2015	20. SIGNATURE OF REGIONAL OFFICIAL: [Redacted]
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21. TYPE NAME:  
Krustin FAN

22. TITLE:  
Director, FMC

23. REMARKS:

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

*Methods and Standards for Establishing Payment Rates  
Inpatient Hospital Care*

**Michigan Department of Community Health  
Indigent Care Agreement DSH Pool  
Eligible Hospitals and Allocations**

<b>Hospital Name</b>	<b>Medicare Number</b>	<b>Fiscal Year</b>	<b>Allocation</b>
Bronson Methodist Hospital	23-0017	2014	\$ 1,485,896
Carson City Osteopathic Hospital	23-0208	2014	\$ 570,010
Edward W. Sparrow Hospital	23-0230	2014	\$ 3,241,927
Genesys Regional Medical Center	23-0197	2014	\$ 7,075,872
Henry Ford Hospital	23-0053	2014	\$ 18,555,217
Hillsdale Community Health Center	23-0037	2014	\$ 286,331
Lakeland Hospital - St. Joseph	23-0021	2014	\$ 1,146,270
McLaren - Central Michigan	23-0080	2014	\$ 919,340
McLaren - Greater Lansing	23-0167	2014	\$ 6,499,977
McLaren Bay Region	23-0041	2014	\$ 1,146,264
McLaren Flint	23-0141	2014	\$ 7,075,872
McLaren Lapeer Region	23-0193	2014	\$ 1,738,114
McLaren-Northern Michigan	23-0105	2014	\$ 1,544,772
Mercy Health Partners - Hackley Campus	23-0066	2014	\$ 1,929,091
Mercy Health Partners - Mercy Campus	23-0004	2014	\$ 826,752
Metro Health Hospital	23-0236	2014	\$ 1,146,264
MidMichigan Medical Center - Midland	23-0222	2014	\$ 2,319,799
Mount Clemens Regional Medical Center	23-0227	2014	\$ 9,046,589
Munson Medical Center	23-0097	2014	\$ 1,910,896
Otsego County Memorial Hospital	23-0133	2014	\$ 298,026
Pennock Hospital	23-0040	2014	\$ 745,072
Spectrum Health - Reed City Campus	23-1323	2014	\$ 919,323
St. Joseph Mercy Hospital - Ann Arbor	23-0156	2014	\$ 7,668,495
St. Joseph Mercy Livingston Hospital	23-0069	2014	\$ 1,171,437
St. Mary's Health Care (Grand Rapids)	23-0059	2014	\$ 1,146,263
St. Mary's of Michigan Medical Center	23-0077	2014	\$ 1,987,724
<b>Total</b>			<b>\$ 86,173,665</b>
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Allegiance Health	23-0092	2015	\$ 218,204
Borgess Hospital	23-0117	2015	\$ 235,918
Bronson Battle Creek Hospital	23-0075	2015	\$ 229,337
Bronson Methodist Hospital	23-0017	2015	\$ 235,918
Edward W. Sparrow Hospital	23-0230	2015	\$ 1,201,865
Genesys Regional Medical Center	23-0197	2015	\$ 733,457
Lakeland Hospital - St. Joseph	23-0021	2015	\$ 267,837
McLaren Bay Region	23-0041	2015	\$ 180,837
McLaren Flint	23-0141	2015	\$ 733,457
Mercy Health Partners - Hackley Campus	23-0066	2015	\$ 383,073
<b>MIDMICHIGAN MEDICAL CENTER - GLADWIN</b>	<b>23-1325</b>	<b>2015</b>	<b>\$ 147,891</b>
<b>MIDMICHIGAN MEDICAL CENTER - GRATIOT</b>	<b>23-0030</b>	<b>2015</b>	<b>\$ 49,297</b>
<del>MidMichigan Medical Center - Midland</del>	<del>23-0222</del>	<del>2015</del>	<del>\$ 197,188</del>
Mount Clemens Regional Medical Center	23-0227	2015	\$ 3,455,550

TN NO.: 15-0012

Approval Date: **DEC 17 2015**

Effective Date: 09/30/2015

Supersedes

TN No.: 14-014