

[Records](#) / [Submission Packages - Your State](#)

# MI - Submission Package - MI2020MS0002O - (MI-20-1500) - Health Homes

[Summary](#) [Reviewable Units](#) [Versions](#) [Approval Letter](#) [News](#) [Related Actions](#)

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Medicaid and CHIP Operations Group  
Division of program Operations  
601 East 12th Street; Suite 0300  
Kansas City, MO 64106



## Center for Medicaid & CHIP Services

September 09, 2020

Robert Gordon  
Director, Department of Health and Human Services  
Michigan Department of Health and Human Services  
400 S Pine  
Lansing, MI 48909

Re: Approval of State Plan Amendment MI-20-1500 Chronic Care Management for Individuals with Serious and Persistent Mental Health Conditions

Dear Robert Gordon:

On July 01, 2020, the Centers for Medicare and Medicaid Services (CMS) received Michigan State Plan Amendment (SPA) MI-20-1500 for Chronic Care Management for Individuals with Serious and Persistent Mental Health Conditions to add new qualifying diagnoses, operational components, and expand the BHH to more geographic areas. The new qualifying diagnoses represent the highest cost/utilization ICD-10 codes for SMI/SED. In terms of operational components, the new structure will charge a Lead Entity (e.g., a PIHP) with the administrative oversight and payment for health home activities. The Lead Entity will partner with Health Home Partners that meet criteria specified in the SPA, and the payment will flow through the Lead Entity to the Health Home Partners. The staffing model and rates will be optimized to reflect an integrated care team to serve the highest-need SMI/SED beneficiaries. Finally, the BHH will be expanded to all counties within PIHP Regions 1, 2, and 8 to serve an estimated 5,000-6,000 beneficiaries once fully implemented..

We approve Michigan State Plan Amendment (SPA) MI-20-1500 on September 09, 2020 with an effective date(s) of October 01, 2020.

For payments made to Health Homes providers for Health Homes participants who newly qualify based on the Health Homes program's increase in conditions covered under this amendment, a medical assistance percentage (FMAP) rate of 90% applies to such payments for the period 10/1/2020 to 9/30/2022.

For payments made to Health Homes providers for Health Homes participants who newly qualify based on the Health Homes program's increased geographical coverage under this amendment, a medical assistance percentage (FMAP) rate of 90% applies to such payments for the period 10/1/2020 to 9/30/2022.

The FMAP rate for payments made to health homes providers will return to the state's published FMAP rate at the end of the enhanced match period. The Form CMS-64 has a designated category of service Line 43 for states to report health homes services expenditures for enrollees with chronic conditions.

Name	Date Created
No items available	

If you have any questions regarding this amendment, please contact kerri rosenbloom at [kerri.toback@cms.hhs.gov](mailto:kerri.toback@cms.hhs.gov).

Sincerely,  
James G. Scott  
Director  
Center for Medicaid & CHIP  
Services

