

# National Accreditation Review Criteria to Determine Compliance for Medicaid Health Plans- Progress Report

(FY2016 Appropriation Act - Public Act 84 of 2015)

July 1, 2016

**Section 1820. (1) In order to avoid duplication of efforts, the department shall utilize applicable national accreditation review criteria to determine compliance with corresponding state requirements for Medicaid health plans that have been reviewed and accredited by a national accrediting entity for health care services.**

**(2) The department shall continue to comply with state and federal law and shall not initiate an action that negatively impacts beneficiary safety.**

**(3) As used in this section, “national accrediting entity” means the National Committee for Quality Assurance, the URAC, formerly known as the Utilization Review Accreditation Commission, or other appropriate entity, as approved by the department.**

**(4) By July 1 of the current fiscal year, the department shall provide a progress report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office on implementation of this section.**

The MDHHS is in the process of completing a full review of potentially deemable elements of reporting requirements for Medicaid Health Plans, as described in Subsection (1). This review, which is being managed by Medical Services Administration’s Compliance Review Committee, will be completed no later than September 30, 2016. Subsequent to the conclusion of the Committee’s review, any potential changes to the compliance review procedures will be instituted in FY2017. MDHHS will continue to keep the Legislature updated as the review progresses.



Michigan Department of  
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