

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: HEALTH CARE FINANCING ADMINISTRATION	1. TRANSMITTAL NUMBER: 16 - 0012	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 July 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 440.60	7. FEDERAL BUDGET IMPACT: a. FFY 2016 \$0 b. FFY 2017 \$0
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 4.19-B, Introduction Attachment 4.19-B, Introduction-continuation Attachment 4.19-B, Page 1 Attachment 4.19-B, Page 5a	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (<i>If Applicable</i>): Attachment 4.19-B, Introduction Attachment 4.19-B, Introduction-continuation Attachment 4.19-B, Page 1 Attachment 4.19-B, Page 5a

10. SUBJECT OF AMENDMENT:
Updates current practitioner payment language per companion letter dated April 26, 2016 for SPA 16-0003.

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: September 29, 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:

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

Section 4 – General Program Administration

Provider payment rates are not applicable for Other Provider-Preventable Conditions (OPPC) that are identified as non-payable as indicated below. This applies to all Medicaid reimbursement provisions contained in Attachment 4.19-B.

No payment shall be made for Other Provider-Preventable Conditions that are identified as non-payable by Medicaid:

- 1) wrong surgical or other invasive procedure performed on a patient;
- 2) surgical or other invasive procedure performed on the wrong body part;
- 3) surgical or other invasive procedure performed on the wrong patient.

In compliance with 42 CFR 447.26(c), the state provides:

- 1) that no reduction in payment for a Provider Preventable Condition (PPC) will be imposed on a provider when the condition defined as a PPC for a particular patient existed prior to the initiation of treatment for that patient by that provider.
- 2) that reductions in provider payment may be limited to the extent that the following apply:
 - (A) the identified PPC would otherwise result in an increase in payment.
 - (B) the state can reasonably isolate for nonpayment the portion of the payment directly related to treatment for, and related to, the PPC.
- 3) Assurance that non-payment for PPCs does not prevent access to services for Medicaid beneficiaries.

This applies to all Medicaid reimbursement provisions contained in Attachment 4.19-B.

~~Unless otherwise noted, Michigan's Medicaid payment rates are uniform for private and governmental providers. The Michigan Medicaid fee schedule effective for dates of service on or after July 1, 2009 may be found at www.michigan.gov/medicaidproviders.~~

SPECIFIC PAYMENT METHODOLOGIES AND EFFECTIVE DATES ARE LISTED IN THE ATTACHMENT 4.19-B PAYMENT PAGES THAT FOLLOW.

~~Payment rates modified July 1, 2009:~~

~~Individual Practitioner Services-~~

~~Physicians-
Ophthalmologists
Oral Surgeons
Pediatrists
Physician's Assistants-
Nurse Practitioners-
Certified Nurse Midwives~~

~~Attachment 4.19-B, pages 1 thru 1.b.1~~

~~Physician Services /Anesthesia~~

~~Attachment 4.19-B, pages 1 thru 1.b.1~~

TN NO.: 16-0012

Approval Date: _____

Effective Date: 07/01/2016

Supersedes TN No.: 11-08

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

Section 4 – General Program Administration

Family Planning Clinics	Attachment 4.19-B, pages 1 thru 1.b.1
Hearing and Speech Centers	Attachment 4.19-B, pages 1 thru 1.b.1
Optometrists	Attachment 4.19-B, pages 1 thru 1.b.1
Pharmacy	Attachment 4.19-B, page 1c
Home Health Providers	Attachment 4.19-B, page 2c
Medical Suppliers	Attachment 4.19-B, page 2c.2
Oxygen	Attachment 4.19-B, page 2c.2
Prosthetic Devices	
Hearing Aids	Attachment 4.19-B, page 3
Cochlear Implant	Attachment 4.19-B, page 3
Shoe Store	Attachment 4.19-B, page 3
Eyeglasses/Optical house services/opticians	Attachment 4.19-B, page 3.1
Maternal Support Services	Attachment 4.19-B, page 5
Certified Registered Nurse Anesthetists/Anesthesia	Attachment 4.19-B, page 5a
Ambulance	Attachment 4.19-B, page 6e
Clinical Laboratory	Attachment 4.19-B, page 13

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

***Policy and Methods for Establishing Payment Rates
(Other than Inpatient Hospital and Long Term Care Facilities)***

I. Individual Practitioner Services

Payment rates are established by the Medical Services Administration as a fee screen for each procedure. The fee schedule is designed to enlist the participation of an adequate number of providers. The Medicare prevailing fees, the Resource Based Relative Value Scale (RBRVS) and other relative value information, other state Medicaid fee screens, and providers' charges may be utilized as guidelines or reference in determining the maximum fee screens for individual procedures. The state assures that both public and private providers are paid under the same fee screens for the same services. Fee schedules are updated annually using the ~~Resource Based—Relative Value Scale (RBRVS)~~ Medicare January release. THE MEDICAID FEE SCREENS CAN BE FOUND AT WWW.MICHIGAN.GOV/MEDICAIDPROVIDERS. UNLESS OTHERWISE NOTED, THE FOLLOWING INDIVIDUAL PRACTITIONERS ARE PAID AT 100% OF THE PRACTITIONER FEE SCHEDULE.

These payment rates apply to the following practitioners:

- Physicians (MD and DO) - EFFECTIVE DATE 7/1/2009
- Ophthalmologists - EFFECTIVE DATE 7/1/2009
- Oral Surgeons - EFFECTIVE DATE 7/1/2009
- Podiatrists - EFFECTIVE DATE 7/1/2009
- Physician's Assistants - EFFECTIVE DATE 7/1/2009
- Nurse Practitioners – ~~Up to 100% of fee schedule except assistant at surgery at 85% of fee schedule~~ - EFFECTIVE DATE 7/1/2009
- Certified Nurse Midwives - EFFECTIVE DATE 7/1/2009
- Certified Registered Nurse Anesthetists - EFFECTIVE DATE 7/1/2009
- Optometrists - EFFECTIVE DATE 7/1/2009
- Chiropractors - EFFECTIVE DATE 7/1/2009
- Psychologists - At 75% of PRACTITIONER fee schedule – EFFECTIVE DATE 9/1/2015
- Social Workers - At 75% of PRACTITIONER fee schedule – EFFECTIVE DATE 9/1/2015
- Professional Counselors - At 75% of PRACTITIONER fee schedule – EFFECTIVE DATE 9/1/2015
- Marriage and Family Therapists – At 75% of PRACTITIONER fee schedule – EFFECTIVE DATE 4/1/2016

For beneficiaries with no Medicare or commercial insurance coverage, providers are reimbursed the lesser of:

- the Medicaid fee screen minus any applicable Medicaid co-payment, patient pay, or spend-down amounts.
- the provider's usual and customary charge minus any applicable Medicaid co-payment, patient pay, or spend-down amounts.

For beneficiaries with Medicare and/or commercial insurance coverage, providers are reimbursed the lesser of:

- the Medicaid beneficiary's liability for Medicare/commercial insurance coinsurance, co-payments, and/or deductibles minus any applicable Medicaid co-payment, patient pay, or spend-down amounts.
 - the Medicaid fee screen minus any third party payments, contractual adjustments, and any applicable Medicaid co-payment, patient pay, or spend-down amounts.
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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

***Policy and Methods for Establishing Payment Rates
Other than Inpatient Hospital and Long-Term-Care Facilities***

12. Medical care furnished by practitioners within the scope of their practice as defined by state law.

A. Certified Registered Nurse Anesthetists (CRNAs)

The agency's fee schedule rate was set using the same methodology that applies to Certified Registered Nurse Anesthetists in Item 1. Individual Practitioner Services.

B. Chiropractors

The agency's fee schedule rate was set using the same methodology that applies to Chiropractors in Item 1. Individual Practitioner Services.

C. Podiatrists

The agency's fee schedule rate was set using the same methodology that applies to Podiatrists in Item 1. Individual Practitioner Services.

D. Optometrist

The agency's fee schedule rate was set using the same methodology that applies to Optometrists in Item 1. Individual Practitioner Services.

E. Registered/Licensed Dental Hygienists (RDHs)

Unless otherwise noted, Michigan's Medicaid payment rates are uniform for private and governmental providers. The Michigan Medicaid fee schedule effective for dates of service on or after October 1, 2010, may be found at www.michigan.gov/medicaidproviders.

For services reimbursed under the fee for service methodology as administered by the Michigan Department of Community HEALTH AND HUMAN SERVICES, providers are reimbursed the lesser of the Medicaid fee screen or the provider's usual and customary charge minus any third party payment. A provider's usual and customary charge should be the fee they most frequently charge their patients with regard to special considerations or financial status.

F. Psychologists

The agency's fee schedule rate was set using the same methodology that applies to Psychologists in Item 1. Individual Practitioner Services.

G. Social Workers

The agency's fee schedule rate was set using the same methodology that applies to Social Workers in Item 1. Individual Practitioner Services.

H. Professional Counselors

The agency's fee schedule rate was set using the same methodology that applies to Professional Counselors in Item 1. Individual Practitioner Services.

I. Marriage and Family Therapists

The agency's fee schedule rate was set using the same methodology that applies to Marriage and Family Therapists in Item 1. Individual Practitioner Services.

TN NO.: 16-0012

Approval Date: _____ Effective Date: 07/01/2016

Supersedes TN No.: 16-0003



STATE OF MICHIGAN
DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

RICK SNYDER
GOVERNOR

NICK LYON
DIRECTOR

May 17, 2016

NAME
TITLE
ADDRESS
CITY STATE ZIP

Dear Tribal Chair and Health Director:

RE: Individual Practitioner Service Fee Schedule

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.

The purpose of the amendment is to update State Plan language referencing the fee schedules and effective dates listed under Individual Practitioner Services. Federal regulations require the State Plan to have a comprehensive description of the methods and standards used to set payment rates. The State of Michigan expects little or no impact on tribal members, as the payment methodology and rates are not changing. The anticipated effective date of this State Plan Amendment is July 1, 2016.

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 517-373-4963 until June 6, 2016, or via email at Elliott-EganL@michigan.gov. Effective June 6, 2016, Lorna can be reached by phone at 517-284-4747. **Please provide all input by July 1, 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,

Chris Priest, Director
Medical Services Administration

cc: 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 16-30
May 17, 2016**

Mr. Levi Carrick, Sr., Tribal Chairman, Bay Mills Indian Community
Ms. Audrey Breakie, Health Director, Bay Mills (Ellen Marshall Memorial Center)
Mr. Alvin Pedwaydon, Tribal Chairman, Grand Traverse Band Ottawa & Chippewa Indians
Ms. JoAnne Cook, Tribal Vice Chair, Grand Traverse Band Ottawa & Chippewa Indians
Ms. Loi Chambers, 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
Mr. Ed Pigeon, Vice Chairman, Match-E-Be-Nash-She-Wish Potawatomi Indians (Gun Lake Band)
Ms. Phyllis Davis, Health Director, Match-E-Be-Nash-She-Wish Potawatomi
Mr. Homer Mandoka, 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: Leslie Campbell, Region V, CMS
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