

APPEAL PROCESS FOR COMPLIANCE EXAMINATION MANAGEMENT DECISIONS

The following process shall be used to appeal MDHHS management decisions relating to the Compliance Examinations that are required in Section 39.0 of the Master Contract.

STEP 1: MANAGEMENT DECISION

<p>MDHHS Bureau of Audit Reimbursement and Quality Assurance</p>	<p>Within eight months after the receipt of a complete and final Compliance Examination, MDHHS shall issue to the PIHP/CMHSP a management decision on findings, comments, and examination adjustments contained in the PIHP/CMHSP examination report. The management decision will include whether or not the examination finding/comment is sustained; the reasons for the decision; the expected PIHP/CMHSP action to repay disallowed costs, make financial adjustments, or take other action; and a description of the appeal process available to the PIHP/CMHSP.</p>
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STEP 2: SETTLEMENT AND DISPUTE OF FINDINGS AND QUESTIONED COSTS

<p>PIHP/CMHSP</p>	<p>1. Within 30 days of the PIHP's/CMHSP's receipt of the management decision:</p> <ul style="list-style-type: none"> A. Submits payment to MDHHS for amounts due other than amounts resulting from disputed items; and B. If disputing items. <ul style="list-style-type: none"> i. Requests a conference with the Director of the Operations Administration, or his or her designee, to attempt to reach resolution on the audit findings, or files an appeal pursuant to MCL 400.1, et seq. and MAC R400.3402, et seq. as specified in ii below. <p>Any resolution as a result of a conference with the Director of the MDHHS Operations Administration would not be binding upon either party unless both parties agree to the resolution reached through these discussions. If the parties agree to a resolution the terms will be reduced to a written settlement agreement and signed by both parties. If no resolution is reached then there will be no obligation on the part of MDHHS to produce a report of the conference process.</p>
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	<p>Matters that remain unresolved after these discussions, would move to the appeal process, at the discretion of the CMHSP/PIHP.</p> <p>Administrative Hearing process</p> <p>ii. Submits an appeal pursuant to MCL 400.1, et seq. and MAC R 400.3401, et seq. This process will be used for all PIHP/CMHSP disputes involving Compliance Examinations whether they involve Medicaid funds or not. Requests must identify the specific item(s) under dispute, explain the reason(s) for the disagreement, and state the dollar amount(s) involved, if any. The request must also include any substantive documentary evidence to support the position. Requests must specifically identify whether the agency is seeking a conference with the Director of the financial Operations Administration, conference, an internal conference or an administrative hearing.</p> <p>To request an internal conference submit a written request within 30 days of the receipt of the management decision to:</p> <p>MDHHS Appeals Section P.O. Box 30807 Lansing, Michigan 48909</p> <p>To request an administrative hearing, submit a written request within 30 days of receipt of the management decision to:</p> <p>Michigan Administrative Hearing Systems Michigan Licensing and Regulatory Affairs P.O. Box 30763 Lansing, Michigan 48909</p> <p>If MDHHS does not receive an appeal within 30 days of the date of the management decision, the management decision will constitute MDHHS's Final Determination.</p>
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	C. Provides copies of the request for the Medicaid Provider Reviews and Hearings Process to the MDHHS Bureau of Audit, Reimbursement, and Quality Assurance, MDHHS Contract Management, and MDHHS Accounting.
MDHHS Accounting	2. If the PIHP/CMHSP has not requested a conference with the Director of Operations Administration or the Medicaid Provider Reviews and Hearings Process within the timeframe specified, implements the adjustments as outlined in the management decision. If repayment is not made, recovers funds by withholding future payments.
MDHHS Contract Management Unit	3. Ensures audited PIHP/CMHSP resolves all findings in a satisfactory manner. Works with the audited PIHP/CMHSP on developing performance objectives, as necessary.

STEP 3. MEDICAID PROVIDER REVIEWS AND HEARINGS PROCESS

MDHHS Appeals Section	Follows the rules contained in MAC R 400.3401, et seq., and various internal procedures regarding meetings, notifications, and decisions.
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