

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL**

**FOR: HEALTH CARE FINANCING ADMINISTRATION**

1. TRANSMITTAL NUMBER: 20 - 0004	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 February 1, 2020	

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

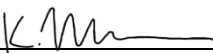
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (*Separate Transmittal for each amendment*)

6. FEDERAL STATUTE/REGULATION CITATION: 42 C.F.R. Part 440.50	7. FEDERAL BUDGET IMPACT: a. FFY 2020 \$832,800 b. FFY 2021 \$1,253,500
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 4.19-B, Page 1.b.9	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT ( <i>If Applicable</i> ): New

10. SUBJECT OF AMENDMENT:  
This SPA will provide details describing the methodology for establishing rates associated with pediatric psychiatric diagnostic services.

11. GOVERNOR'S REVIEW (*Check One*):

GOVERNOR'S OFFICE REPORTED NO COMMENT       OTHER, AS SPECIFIED:  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED      Kate Massey, 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 <sup>th</sup> Floor 400 South Pine Lansing, Michigan 48933  Attn: Erin Black
13. TYPED NAME: Kate Massey	
14. TITLE: Director, Medical Services Administration	
15. DATE SUBMITTED: March 24, 2020	

**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

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

---

**PHYSICIAN SERVICES, PEDIATRIC PSYCHIATRIC DIAGNOSTIC SERVICES**

PEDIATRIC PSYCHIATRIC DIAGNOSTIC SERVICES REIMBURSEMENT METHODOLOGY

REIMBURSEMENT FOR PSYCHIATRIC DIAGNOSTIC EVALUATION SERVICES FOR BENEFICIARIES UNDER 21 YEARS OF AGE IS 100% OF THE ANNUAL MEDICARE RATES PUBLISHED JANUARY OF EACH YEAR. EXCEPT AS OTHERWISE NOTED IN THE STATE PLAN, MICHIGAN'S MEDICAID PAYMENT RATES ARE UNIFORM FOR BOTH PRIVATE AND GOVERNMENTAL PROVIDERS. REIMBURSEMENT IS MADE IN ACCORDANCE WITH MEDICAID'S FEE SCREENS OR THE USUAL AND CUSTOMARY CHARGE FOR THESE SERVICES, WHICHEVER AMOUNT IS LESS.

EFFECTIVE DATE OF PAYMENT

THIS REIMBURSEMENT METHODOLOGY APPLIES TO SERVICES RENDERED ON AND AFTER FEBRUARY 1, 2020. ALL RATES ARE PUBLISHED AT [WWW.MICHIGAN.GOV/MEDICAIDPROVIDERS](http://WWW.MICHIGAN.GOV/MEDICAIDPROVIDERS).

---

TN NO.: 20-0004

Approval Date: \_\_\_\_\_

Effective Date: 02/01/2020

Supersedes

TN No.: NEW



STATE OF MICHIGAN  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
LANSING

GRETCHEN WHITMER  
GOVERNOR

ROBERT GORDON  
DIRECTOR

January 23, 2020

NAME  
TITLE  
ADDRESS  
CITY STATE ZIP

Dear Tribal Chair and Health Director:

**RE:** Reimbursement for Pediatric Psychiatrist Services

This letter, in compliance with Section 1902(a)(73) and Section 2107(e)(1)(C) of the Social Security Act, serves as notice to all Tribal Chairs and Health Directors of the intent by the Michigan Department of Health and Human Services (MDHHS) to submit a State Plan Amendment (SPA) request to the Centers for Medicare & Medicaid Services (CMS).

The purpose of the SPA is to update the Medicaid State Plan with information that describes the methodology for establishing rates associated to psychiatric diagnostic services provided to beneficiaries under 21 years of age. Rates associated with the eligible services are calculated in compliance with expenditure levels established by state law. The anticipated effective date of the SPA is January 1, 2020. MDHHS expects this change will have little or no impact on Native American beneficiaries.

There is no public hearing scheduled for this SPA. Input regarding this SPA is 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 517-284-4034, or via email at [Elliott-EganL@michigan.gov](mailto:Elliott-EganL@michigan.gov). **Please provide all input by March 9, 2020.**

In addition, MDHHS is offering to set up group or individual consultation meetings to discuss the SPA, according to the tribes' preference. Consultation meetings 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,

A handwritten signature in black ink, appearing to read 'K. Massey', with a long horizontal flourish extending to the right.

Kate Massey, Director  
Medical Services Administration

cc: Tannisse Joyce, CMS  
Keri Toback, CMS  
Leslie Campbell, CMS  
Nancy Grano, CMS  
Chastity Dial, CEO, American Indian Health and Family Services of Southeastern Michigan  
Daniel Frye, Director, Indian Health Service - Bemidji Area Office  
Lorna Elliott-Egan, MDHHS

**Distribution List for L 20-02**  
**January 23, 2020**

Mr. Bryan Newland, Tribal Chairman, Bay Mills Indian Community  
Ms. Audrey Breakie, Health Director, Bay Mills (Ellen Marshall Memorial Center)  
Mr. Thurlow Samuel McClellan, Chairman, Grand Traverse Band Ottawa & Chippewa Indians  
Mr. Soumit Pendharkar, 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. Kathy Mayo, Interim 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. Daryl Wever, Health Director, Little River Band of Ottawa Indians  
Ms. Regina Gasco-Bentley, Tribal Chairman, Little Traverse Bay Band of Odawa Indians  
Ms. Jodi Werner, Health Director, Little Traverse Bay Band of Odawa  
Mr. Bob Peters, Chairman, Match-E-Be-Nash-She-Wish Potawatomi Indians (Gun Lake Band)  
Ms. Kelly Wesaw, Health Director, Match-E-Be-Nash-She-Wish Potawatomi  
Mr. Jamie Stuck, Tribal Chairman, Nottawaseppi Huron Band of Potawatomi Indians  
Ms. Rosalind Johnston, Health Director, Huron Potawatomi Inc.- Tribal Health Department  
Mr. Matthew Wesaw, Tribal Chairman, Pokagon Band of Potawatomi Indians  
Mr. Matt Clay, Health Director, Pokagon Potawatomi Health Services  
Mr. Ronald Ekdahl, 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  
Mr. Leonid Chugunov, Health Director, Sault Ste. Marie Tribe of Chippewa Indians - Health Center

CC: Tannisse Joyce, CMS  
Keri Toback, CMS  
Leslie Campbell, CMS  
Nancy Grano, CMS  
Chastity Dial, CEO, American Indian Health and Family Services of Southeastern Michigan  
Daniel Frye, Director, Indian Health Service - Bemidji Area Office  
Lorna Elliott-Egan, MDHHS

***Public Notice***

**Michigan Department of Health and Human Services  
Medical Services Administration**

***Reimbursement for Psychiatric Diagnostic Evaluation Services  
State Plan Amendment Request***

The Michigan Department of Health and Human Services (MDHHS) will submit a State Plan Amendment (SPA) request to the Centers for Medicare & Medicaid Services (CMS) to increase reimbursement for specified psychiatric diagnostic evaluation services provided to beneficiaries under the age of 21 years. The anticipated effective date of the SPA is February 1, 2020.

In response to the MDHHS Fiscal Year 2020 budget contained in Public Act 154 of 2019, Section 458, effective for dates of service on and after February 1, 2020, Medicaid reimbursement rates for practitioners providing specified psychiatric diagnostic evaluation services to pediatric beneficiaries will be increased to 100% of the Medicare rate.

The estimated gross cost to the State of Michigan for the SPA is \$1.95 million per year and has been included in state budget appropriations.

There is no public meeting scheduled regarding this notice. Any interested party wishing to request a written copy of the SPA or wishing to submit comments may do so by submitting a request in writing to: MDHHS/Medical Services Administration, Program Policy Division, PO Box 30479, Lansing MI 48909-7979 or e-mail [MSADraftPolicy@michigan.gov](mailto:MSADraftPolicy@michigan.gov) by February 18, 2020. A copy of the proposed State Plan Amendment will also be available for review at [http://michigan.gov/mdhhs/0,5885,7-339-73970\\_5080-108153--,00.html](http://michigan.gov/mdhhs/0,5885,7-339-73970_5080-108153--,00.html) .

**RELEASED:** January 16, 2020