

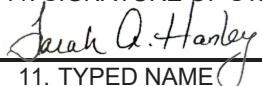
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES		1. TRANSMITTAL NUMBER 23 — 0001	2. STATE MI
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		3. PROPOSED EFFECTIVE DATE February 1, 2023	
5. FEDERAL STATUTE/REGULATION CITATION 42 C.F.R. Part 440		6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY 2023 \$368,100 b. FFY 2024 \$490,800	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-B, Page 3		8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 4.19-B, Page 3 (TN# 19-0014) Attachment 4.19-B, Page 13a (TN# 09-0002) - Delete	

9. SUBJECT OF AMENDMENT
This SPA provides authority for updated hearing aid dispensing rates and for clarification to existing hearing aid payment language, including elimination of an existing duplicate page.

10. GOVERNOR'S REVIEW (Check One)

- ☐ GOVERNOR'S OFFICE REPORTED NO COMMENT
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

☒ OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL 	15. RETURN TO Behavioral and Physical Health and Aging Services Administration Office of Strategic Partnerships & Medicaid Administrative Services – Federal Liaison Capitol Commons Center – 7 th Floor 400 South Pine Lansing, Michigan 48933 Attn: Erin Black
11. TYPED NAME Farah Hanley	
12. TITLE Chief Deputy Director for Health	
13. DATE SUBMITTED January 3, 2023	

FOR CMS USE ONLY

16. DATE RECEIVED	17. DATE APPROVED
PLAN APPROVED - ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL	19. SIGNATURE OF APPROVING OFFICIAL
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL

22. 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)***

6. Dentures, prosthetic devices and eyeglasses/optical house services

A. Dentures

The agency's fee schedule rate was set using the same methodology that applies to Item 19, Dental Services.

B. Prosthetic Devices

1.) Hearing Aids

Hearing Aid Device Reimbursement Methodology

~~The Michigan Medicaid payment rates established via a multi-state volume purchasing agreement with hearing aid manufacturers rates were set September 1, 2019. Reimbursement rates for most hearing aid devices are established via a multi-state Medicaid volume purchasing agreement directly with hearing aid manufacturers.~~ Michigan meets the certification requirements of section 1902(A)(23) of the Social Security Act to permit the selection of one or more providers, through a competitive bidding process, to deliver hearing aids on a statewide basis under the authority of section 1915(a)(1)(B) of the Social Security Act and 42 CFR 431.54(d). ~~Providers are reimbursed and not allowed to discount or bill more than the contract established prices. Rates were set September 1, 2019. The Michigan Medicaid fee schedule is effective for dates of service on or after November 1, 2019, and may be found at www.michigan.gov/medicaidproviders.~~

For hearing aids not included in the agreement, that is those reimbursed on a fee for service basis, payment rates and reimbursement are prior authorized and are based on documentation of the manufacturer's invoice price minus any discounts and includes actual shipping costs. ~~The provider's usual and customary charge should be the fee most frequently charged to patients.~~

~~Effective November 1, 2002 hearing aid providers were able to split out a dispensing fee from their total charge as a separate billing activity and the Michigan Medical Services Administration (MSA) paid a separate benefit for the service. Other states' Medicaid fee screens and providers' charges for hearing aid dispensing fees were used as guidelines or reference in determining the maximum payment amount. Providers are reimbursed the lesser of the Medicaid fee screen or the provider's usual and customary charge minus any third party payment. The provider's usual and customary charge should be the fee most frequently charged to patients. The payment rate is uniform for private and governmental providers.~~

Except as otherwise noted in the 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, minus any third party payment. The provider's usual and customary charge should be the fee most frequently charged to patients.

Effective Date of Payment

The agency's fee schedule rates were set as of November 1, 2019 and are effective for hearing aid devices dispensed on and after that date. All rates are published on the Agency's website at www.michigan.gov/medicaidproviders.

Hearing Aid Service Reimbursement Methodology

TN NO.: 23-0001

Approval Date: _____

Effective Date: 2/01/2023

Supersedes

TN No.: 19-0014

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)***

Reimbursement for hearing aid related services including dispensing fees is made in accordance with Medicaid fee screens. Other State Medicaid fee screens and providers' charges were used as guidelines or reference in determining the maximum fee screen for individual services.

Except as otherwise noted in the plan, state-developed payment rates are uniform for both private and governmental providers. Reimbursement is made in accordance with Medicaid's fee screens or the provider's usual and customary charge for these services, whichever amount is less, minus any third party payment. The provider's usual and customary charge should be the fee most frequently charged to patients.

Effective Date of Payment

The agency's fee schedule was set as of February 1, 2023 and is effective for hearing aid services rendered on and after that date. All rates are published on the Agency's website at www.michigan.gov/medicaidproviders.

1.) Cochlear implants

Payment rates for services related to cochlear implants are based on the rate for the HCPCS/CPT code in the National Physician Fee Schedule multiplied by the conversion factor for Michigan Medicaid, which is currently 21.53 and then minus any other reduction (i.e., 2009 budget reductions).

TN NO.: 23-0001

Approval Date: _____

Effective Date: 2/01/2023

Supersedes

TN No.: 19-0014

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)

21. Hearing Aids

~~For most analog and digital and/or programmable hearing aids, payment rates are established via a multi-state Medicaid volume purchasing agreement directly with hearing aid manufacturers. Providers are reimbursed the vendor prices listed in the agreement and are not allowed to discount or bill more than the contract established prices.~~

~~For hearing aids not included in the agreement, that is those reimbursed on a fee for service basis, payment rates and reimbursement are prior authorized and are based on documentation of the manufacturer's invoice price minus any discounts and includes actual shipping costs. The provider's usual and customary charge should be the fee most frequently charged to patients. The payment rate is uniform for private and governmental providers. The Michigan Medicaid fee schedule effective February 1, 2009 may be found at www.michigan.gov/medicaidproviders.~~

~~Effective November 1, 2002 hearing aid providers were able to split out a dispensing fee from their total charge as a separate billing activity and the Michigan Medical Services Administration (MSA) paid a separate benefit for the service. Other states' Medicaid fee screens and providers' charges for hearing aid dispensing fees were used as guidelines or reference in determining the maximum payment amount. Providers are reimbursed the lesser of the Medicaid fee screen or the provider's usual and customary charge minus any third party payment. The provider's usual and customary charge should be the fee most frequently charged to patients. The payment rate is uniform for private and governmental providers. The Michigan Medicaid fee schedule effective February 1, 2009 may be found at www.michigan.gov/medicaidproviders.~~

DELETE

TN NO.: 23-0001

Approval Date: _____ Effective Date: 02/01/2023

Supersedes
TN No.: 09-02

mLIVE Searching for that perfect item? Go to classifieds.mlive.com

Classified

ANNOUNCEMENTS MERCHANDISE FINANCIAL PETS & FARMS RECREATION
TRANSPORTATION EMPLOYMENT REAL ESTATE BARGAIN CORNER



ANNOUNCEMENTS

PUBLIC NOTICES

Michigan Department of Health and Human Services Behavioral and Physical Health and Aging Services Administration

Hearing Aid Dispensing Reimbursement Rate Update State Plan Amendment Request

The Michigan Department of Health and Human Services (MDHHS) intends to submit a State Plan Amendment (SPA) request to the Centers for Medicare & Medicaid Services (CMS) to clarify the reimbursement methodology for covered hearing aid services and increase the reimbursement rate for hearing aid dispensing fees and follow up visits. The anticipated effective date of this State Plan Amendment is January 1, 2023.

The updated fee schedule will impact services performed on or after January 1, 2023. Hearing aid service rates are calculated using other State Medicaid fee screens and providers' charges as guidelines or references in determining the maximum fee screen for individual services.

The estimated gross cost to the State of Michigan for the SPA is \$667,000 per year.

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 sending an e-mail to MSADraftPolicy@michigan.gov or submitting a request in writing to: MDHHS/ Behavioral and Physical Health and Aging Services Administration, Program Policy Division, PO Box 30479, Lansing MI 48909-7979 by December 16, 2022. A copy of the proposed State Plan Amendment will also be available for review at <https://www.michigan.gov/mdhhs/inside-mdhhs/budgetfinance/264/state-plan-amendments>.

Find more stories on mlive.com



MERCHANDISE

ANTIQUES, ART & COLLECTIBLES

Collectable Toy Show Sat. Nov. 26th, 9AM-2PM. Kalamazoo Fairgrounds, 2900 Lake St. Tables/info. 262-366-1314

BARGAIN CORNER

COMIC BOOKS Buying large or small collections. Paying Cash!! (616) 638-2105

Porcelain Christmas Snow Village. Porcelain Christmas snow village with lights. Excellent condition. Cash only. Will not ship. Leave a message at 269-353-1140



PETS & FARMS

AKC Beautiful Yellow/White Labrador puppies. Shots & Dewormed, DOB 6/29th Males & Females Available 720-320-1665 www.southshorelabs.com

Bernedoodles And Poodles- Training started, UTD on shots, All Sizes & Ages available, Health tested parents, Allergy Friendly Health guarantee. From \$600 & up. 810-252-3016

CavaPoo- Socialized, Shots & Dewormed, Male & Female 574-949-7650

Lab Pups, AKC, Silver & Chocolate. Shots, wormed and dew claws removed. Reduced Price 269-793-0031 or 616-204-2572

Pomeranian Puppies- Lots Of Colors, UTD On Shots And Dewormed. \$200 OBO. 231-825-8118

PETS & SUPPLIES

Bischoff Frise Puppies- Cute & Playful, First Shots, Dewormed, Non-Shedding. 525 231-825-8212 No Sunday calls.

Goldendoodle puppies . Ready for their forever home. 1 female red, 1 female red/white, 1 blonde/white male, 2 red males. First shots/wormed. \$900.00 text or call 231a *920-5556.

KENNEL DISPERSAL- HEALTH /DIVORCE FORCES SALE. IMPORTED CZECH GERMAN SHEPHERDS, 1 STUD, 2 FEMALES, RAISED WITH KIDS, REFERENCES REQUIRED, MAKE SERIOUS OFFER ONLY, 231 893 0550

Mini Goldendoodle pups. THE PERFECT GIFT FOR YOUR SPECIAL ONE. Loving & family friendly. Varying shade of red. DOB 8/28/22 UTD shots & Vet checked \$500.00 231-237-7190 White Cloud MI

Reg Shih-Tzu Puppies 1st shots, wormed, \$900.00 call 616-761-4158



Rosiegoldenpuppiesmi.com * Golden Retrievers * Mini Golden Doodles * Red City Michigan 231-832-3803



TRANSPORTATION

VANS

2010 Chrysler Town and Country Wheelchair Accessible Minivan with 14K actual miles. Lowered floor with power side ramp for easy loading a wheelchair or scooter. Removable passenger seat so you can ride in your chair right next to driver seat. Power everything. Very well cared for! LIKE NEW! I will deliver to you for free. Call me 517-230-8865.



2010 Chrysler Town and Country Wheelchair Accessible Minivan with 14K actual miles. Lowered floor with power side ramp for easy loading a wheelchair or scooter. Removable passenger seat so you can ride in your chair right next to driver seat. Power everything. Very well cared for! LIKE NEW! I will deliver to you for free. Call me 517-230-8865.



RECREATION

MOTOR HOME FOR SALE



2021 Coachmen Catalina. 323BHDSC Legacy Edition Travel Trailer RV, LIKE NEW CONDITION. PRICE \$12,500 Text me at - 813 603 0179



REAL ESTATE FOR SALE

All real estate advertising in this newspaper is subject to the Federal Fair Housing Amendments Act, the Michigan Civil Rights Act, and the Grand Rapids Municipal Code which make it illegal to advertise any preference, limitation or discrimination based on race, color, religion, sex, national origin, handicap, familial status, age, marital status, source of lawful income or public assistance recipient status, or an intention to make any such preference, limitation or discrimination. Familial status includes children under the age of 18 living with parents or legal custodians, pregnant women and people securing custody of children under 18.

This newspaper will not knowingly accept any advertising for real estate which is in violation of the law. To report discrimination, call the Office of Fair Housing and Equal Opportunity of the U.S. Department of Housing and Urban Development (HUD) at 1-800-669-9777. The HUD TTY telephone number for the hearing impaired is 1-212-708-1455.

CONDOS & TOWNHOMES

3759 Arborway, Norton Shores Condo Attached garage, laundry room, patio, includes water, sewer, trash, yard work snow removal. Open House November 13, 2-4pm \$185,000 231 557-6701

DOWNLOAD THE APP TODAY!

Download on the App Store GET IT ON Google Play

Scan for easy access

SUBSCRIBERS, CHECK OUT YOUR

FREE eNewspaper

Full editions. Every Day.

Go to **ENEWSKG.MLIVE.COM** TO ACTIVATE AND ENJOY!

mLIVE KALAMAZOO GAZETTE

BATH FITTER®

WE DO IT ALL! Tub Liners | Tub and Shower Replacements | Tub-to-Shower Conversions

SPECIAL OFFER

24 MONTHS 0% INTEREST*

NO INTEREST UNTIL 2025!

FITS YOUR life

With our unique tub-over-tub liners, replacements, and tub-to-shower conversions we can complete your bathroom renovation in as little as a day. At Bath Fitter, we don't just fit your bath, we fit your life. Why have over two million people brought Bath Fitter into their homes? *It Just Fits.*

OUR BENEFITS

- Easy to Clean
- Seamless Wall
- One-Day Installation*
- LIFETIME WARRANTY

1-833-822-4200 **bath-fitter.com/local24**

Book your **FREE** design **CONSULTATION** today!

1Tub-to-shower conversions and fiberglass replacements typically require a two-day installation. 2Lifetime warranty valid for as long as you own your home. *Offer ends 12/31/2022. All offers apply to a complete Bath Fitter system only, and must be presented and used at time of estimate. Minimum purchase required. Terms of promotional financing are 24 months of no interest from the date of installation and minimum deposit. See representative for details. Qualified buyers only. May not be combined with other offers or applied to previous purchases. Valid only at select Bath Fitter locations. Offers and warranty subject to limitations. Fixtures and features may be different than pictured. Accessories pictured are not included. Plumbing work done by P.U.L.S.E. Plumbing. MD MPL #17499, NJ MPL #10655, DE MPL #PL-0002303, MD MPL #82842, VA MPL #2710064024, IA MPL #18066, OH MPL #37445, WV MPL #PL07514, MI MPL #8111651. PA HIC #PA017017, NJ HIC #13VH03073000, WV HIC #WV053085, MD HIC #129346, VA HIC #2705155694, MD HIC #122356, VA HIC #2705096759, IA HIC #C112725, WV HIC #WV038808, MD HIC #129995, VA HIC #2705146537, DC HIC #420213000044. Each Franchise Independently Owned And Operated By Bath Saver, Inc, LLC, Iowa Bath Solutions, LLC, Ohio Bath Solutions, LLC, Mid Atlantic Bath Solutions, LLC.



STATE OF MICHIGAN

GRETCHEN WHITMER
GOVERNOR

DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

ELIZABETH HERTEL
DIRECTOR

October 28, 2022

NAME
TITLE
ADDRESS
CITY STATE ZIP

Dear Tribal Chair and Health Director:

RE: Reimbursement of Hearing Aid Dispensing 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 clarify the reimbursement methodology for covered hearing aid services and increase the reimbursement rate for hearing aid dispensing fees and follow up visits. Rates are calculated using other State Medicaid fee screens and providers' charges as guidelines or reference in determining the maximum fee screen for individual services. The anticipated effective date of this SPA is January 1, 2023. MDHHS expects these rate changes to have a positive impact on Native American beneficiaries by improving access to hearing aid services.

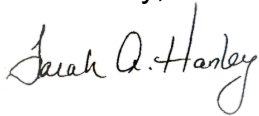
There is no public hearing scheduled for this SPA. Input regarding this Amendment is highly encouraged, and comments regarding this notice of intent may be submitted to Lorna Elliott-Egan, MDHHS Liaison to the Michigan tribes. Lorna can be reached at 517-512-4146, or via email at Elliott-EganL@michigan.gov. **Please provide all input by December 12, 2022.**

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.

An electronic copy of this letter is available at www.michigan.gov/medicaidproviders >>
Policy, Letters & Forms.

Sincerely,

A handwritten signature in cursive script, reading "Sarah Q. Hanley".

Farah Hanley
Chief Deputy Director for Health

CC: Keri Toback, CMS
Nancy Grano, CMS
Chasity 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 22-58
October 28, 2022

Ms. Whitney Gravelle, President, Bay Mills Indian Community
Ms. Audrey Breakie, Health Director, Bay Mills (Ellen Marshall Memorial Center)
Mr. David M. Arroyo, Chairman, Grand Traverse Band Ottawa & Chippewa Indians
Ms. Doris Winslow, Health Director, Grand Traverse Band Ottawa/Chippewa
Mr. Kenneth Meshigaud, Tribal Chairman, Hannahville Indian Community
Ms. G. Susie Meshigaud, Health Director, Hannahville Health Center
Ms. Kim Klopstein, President, Keweenaw Bay Indian Community
Ms. Deanna Foucault, 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
Ms. Rebecca Richards, Tribal Chairwoman, Pokagon Band of Potawatomi Indians
Ms. Priscilla Gatties, Interim Health Director, Pokagon Potawatomi Health Services
Ms. Theresa Peters-Jackson, Tribal Chief, Saginaw Chippewa Indian Tribe
Mrs. Karmen Fox, Executive Health Director, Nimkee Memorial Wellness Center
Mr. Austin Lowes, Tribal Vice Chairperson, Sault Ste. Marie Tribe of Chippewa Indians
Mr. Leonid Chugunov, Health Director, Sault Ste. Marie Tribe of Chippewa Indians - Health Center

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