CENTERS FOR MEDICARE & MEDICARD SERVICES	
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER 2. STATE
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT
TO: CENTER DIRECTOR	3. PROPOSED EFFECTIVE DATE
CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	The day after the end of the PHE
5. FEDERAL STATUTE/REGULATION CITATION Section 1902(bb)(6) of the Social Security Act Section 1905(I)(2)(B) of the Social Security Act	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY 2023 \$0 b. FFY 2024 \$0
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTIONOR ATTACHMENT (If Applicable)
Attachment 4.19-B Pages 10 & 11	Attachment 4.19-B Pages 10 & 11 (TN: 21-0009)
9. SUBJECT OF AMENDMENT	
This SPA provides an update to the definition of a visit for Indian Health Centers, which will allow payment for qualifying audio-only telemedicine visits at the all-inclusive rate (AIR).	
10. GOVERNOR'S REVIEW (Check One)	
GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:	
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	
11. SIGNATURE OF STATE AGENCY OFFICIAL 15	. RETURN TO
Sarah a. Hanley Be	ehavioral and Physical Health and Aging Services
	Iministration
Farah Hanley Se	ffice of Strategic Partnerships & Medicaid Administrative ervices – Federal Liaison
	apitol Commons Center – 7 th Floor
	0 South Pine
13. DATE SUBMITTED	nsing, Michigan 48933
March 13, 2023	tn: Erin Black
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	

FORM CMS-179 (09/24)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

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

18. Indian Health Centers (IHC) Services

If eligible, a Tribal 638 facility may choose to participate in the Medicaid Program and receive reimbursement for Medicaid covered services under one of four options. In addition, a Tribal 638 Facility Pharmacy would be reimbursed under Option 5.

Option 1: Fee-For-Service

If the Tribal 638 facility or the urban center chooses to bill as a fee-for-service provider, the provider may receive reimbursement as established in the State Plan's Attachment 4.19-B, Page 1, Item 1.

Option 2: Federally Qualified Health Center (FQHC) Payment Methodology

As a provider of Federally Qualified Health Center (FQHC) services, the IHC may receive reimbursement as established in State Plan Attachment 4.19-B, Item 14. Payments must comply with all requirements set forth within State Plan Attachment 4.19-B, Item 14.

Option 3: All-Inclusive Rate Payment Methodology

The Indian Health Service (IHS) per visit outpatient rate will be reimbursed in accordance with the rate published annually in the federal register. As a Tribal 638 facility, the IHC may, in accordance with the Federal Regulations, receive the IHS per visit outpatient rate for a QUALIFYING face-to-face visit at the IHC for Medicaid beneficiaries.

A visit is a QUALIFYING face-to-face contact within the IHC between a Medicaid beneficiary and the provider of health care services who exercises independent judgment in the provision of Medicaid covered services. All outpatient ancillary Medicaid services are bundled in the per visit rate and cannot be billed as a separate visit. The IHC provider may be credited with no more than one QUALIFYING face-to-face medical visit, one QUALIFYING face-to-face behavioral health visit with a given beneficiary per day, except when the beneficiary, after the first visit, suffers illness or injury requiring additional diagnosis or treatment.

Option 4: Tribal FQHC Alternative Payment Methodology

A Tribal 638 facility that operates as a Tribal FQHC will be reimbursed for outpatient QUALIFYING face to face visits within the FQHC scope of services provided to Medicaid beneficiaries using an alternative payment methodology (APM). The agency allows reimbursement for the same outpatient services and the same number of encounters per day that Tribal 638 facilities provide under this State Plan. The APM is the IHS per visit outpatient rate published annually in the federal register as described in Option 3 above.

A visit is a QUALIFYING face to face contact within the IHC between a Medicaid beneficiary and the provider of health care services who exercises independent judgment in the provision of Medicaid covered services. All outpatient ancillary Medicaid services are bundled in the per visit rate and cannot be billed as a separate visit. The IHC provider may be credited with no more than one QUALIFYING face-to-face medical visit, one QUALIFYING face-to-face dental visit, and one

TN NO.: 23-0006 Approval Date: Effective Date: May 12, 2023

Supersedes TN No.: 21-0009

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

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

QUALIFYING face to face behavioral health visit with a given beneficiary per day, except when the beneficiary, after the first visit, suffers illness or injury requiring additional diagnosis or treatment.

The APM results in payment of at least the FQHC PPS. The health centers receiving payment under the APM individually agree to receive it.

Option 5: Tribal 638 Facility Pharmacy Methodology

Prescriptions dispensed by a Tribal 638 Facility Pharmacy constitute a separate encounter per prescription and are reimbursed as described in Attachment 4.19-B, Page 1d - Drug Product Reimbursement.

TN NO.: 23-0006 Approval Date: Effective Date: May 12, 2023

Supersedes TN No.: 21-0009



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Julie M. Hughes and

NOTICE TO CREDITORS

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STATE OF MICHIGAN COUNTY OF SAGINAW

NOTICE TO CREDITORS Decedent's Trust

In the matter of: The Marian E. Hughes Revocable Living Trust, dated December 03, 2004. Date of Birth: December 10, 1935.

December 10, 1935.

NOTICE TO CREDITORS: The decedent, Marian E. Hughes, whose last known address is 9350 Frost Road, Saginaw, Michigan 48609, died on November 25, 2022.

Creditors of the decedent are notified that all calims against the Trust will be forever barred unless presented to Elizabeth Hart, Successor Trustee at 11317 Morningstar Drive, Saginaw, Michigan 48609 within four (4) months after date of publication of this notice.

Date: February 02, 2023. In the matter of Amended and Restated Joan A. Erskine Trust u/a/d April 05, 2022. rust u/a/d April 05, 2022.

TO ALL INTERESTED PERSONS including: whose address(cs) are unknown and whose interest in the matter may be barred or affected by the following: The decedent, Joan A. Erskine, who lived in Hemlock, Michigan died December 31, 2022. Julie M. Hughes and Kathy Lyvere are the successor cotrustees of the Amended and Restated Joan A. Erskine Trust u/a/d April 05, 2022, as amended.

Creditors of the decedent are notified that all claims against this Trust Estate will be forever barred unless presented to Elizabeth Hart 200 St. Andrews Road Saginaw, MI 48638 (989) 792-9641 against this Trust Estate will be forever barred unless presented to the Successor Co-Trustees, Julie M. Hughes and Kathy Lyvere within 4 months after the date of publication of this notice.

Gambrell and Associates PLC Todd M. Gambrell P57171 C740 West Main Street

Gambrell and Associates PLC Todd M. Gambrell P57171 240 West Main Street Suite 1000 Midland, MI 48640 (989) 631-7626 FILE NO. 23-144114-GA

In the matter of: DAVID L. PETERS JR, an alleged incapacitated individual

TO ALL INTERESTED PERSONS, including the father and issue of DAVID INTERESTED SIR., whose addresses are unknown and whose interest in the matter may be barred or affected by the following:

NOTICE TO CREDITION

Delores M. Fisher, whose date of birth was July 06, 1924 and resided at 5338 Mackinaw Road, Saginaw, MI 48604, died on January 16, 2023. This Notice is published pursuant to MCI. 700.7608. There is no Probate here is no Probate here. In Novi March 2022.

MI 48604, died on January
16, 2023.
This Notice is published pursuant to MCL 700,708.
There is no Probate Administration; and therefore, there is no Personal Representative of Delores M. Fisher's Estate to whom Letters of Administration have been issued.
Creditors of the Decedent are notified that all claims against the Decedent will be forever barred unless presented to Darcy C. Baker, 2002 Attorney SHANNON K BROWN P84738 (DSEPH R. OWENS P71060 GARY E. GUDMUNDSEN P1061 AGRY E. GUDMUNDSEN P1

Health and Human Services Behavioral and Physical Health and Aging Services Administration Norman Harrison (P39814) Attorney at Law 805 South Michigan Avenue Saginaw, MI 48602 (989) 790-7177

Indian Health Center Visit

The Michigan Department of Health and Human Services (MDHHS) plans to submit a State Plan Amendment (SPA) request to the Centers for Medicare & Medicaid Services (CMS) to update the definition of a visit for Indian Health Centers which will allow payment for qualifying audio-only telemedicine visits at the telemedicine visits at the all-inclusive rate (AIR).

The anticipated effective date for the Indian Health Center visit definition update SPA is the day after the COVID-19 public health emergency period ends.

The purpose of this amendment is to update the Medicaid State Plan to modify the definition of a qualifying visit for Indian Health Centers by removing the "face-to-face" specification. This will allow for payment at the AIR for identified qualifying audio-only telemedicine visits.

The State Plan Amendment is expected to be budget neutral.

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 M SADraftPolicy@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 February 28, 2023. A copy of the proposed State Plan Amendment will also be available ment will also be available for review at: ror review at: https://www.michigan.gov/ mdhhs/inside-mdhhs/ budgetfinance/264/ state-plan-amendments.

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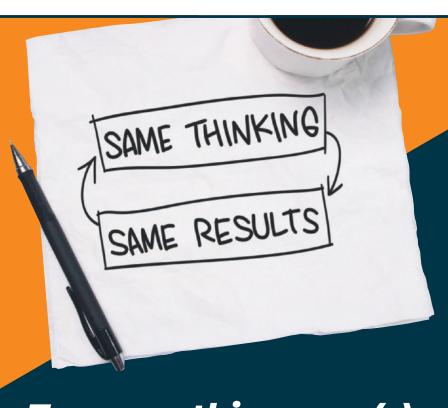


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STATE OF MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES LANSING

ELIZABETH HERTEL
DIRECTOR

GRETCHEN WHITMER
GOVERNOR

January 11, 2023

NAME TITLE ADDRESS CITY STATE ZIP

DRAFT

Dear Tribal Chair and Health Director:

RE: Michigan Medicaid Modification of the Qualifying Visit Definition within the Medicaid State Plan for Indian Health Centers

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 this SPA is to update the Medicaid State Plan by modifying the definition of a qualifying visit for Indian Health Centers, which will allow for payment of the All-Inclusive Rate (AIR) for qualifying audio-only telemedicine visits. MDHHS expects this change to have a positive impact on Native American beneficiaries by increasing access to services and paying at parity across visits. The anticipated effective date of this SPA is one day after the end of the federal Public Health Emergency.

There is no public hearing scheduled for this SPA. Input regarding this SPA 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 February 25, 2023.

In addition, MDHHS is offering to set up group or individual consultation meetings to discuss the Amendment, 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,

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

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Ms. Deanna Foucault, Health Director, Keweenaw Bay Indian Community - Donald Lapointe Health/Educ Facility

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Mr. Daryl Wever, Health Director, Little River Band of Ottawa Indians

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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. Aaron Payment, Tribal 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