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State/Territory Name: Michigan

State Plan Amendment (SPA)#: 22-0008

This file contains the following documents in the order listed

- 1) Approval Letter
- 2) CMS 179
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

October 4, 2022

Ms. Farah Hanley
Medicaid Director
Medical Services Administration
400 S Pine St 7th Fl
Lansing, MI 48933-2250

RE: State Plan Amendment (SPA) Transmittal Number 22-0008

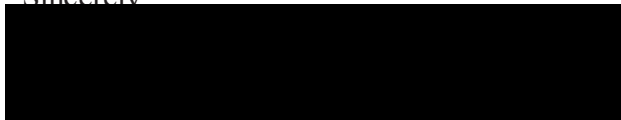
Dear Ms. Hanley:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal 22-0008. This amendment provides authority for updates to non-emergency medical transportation (NEMT) provider qualification requirements per the Consolidated Appropriations Act of 2021.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act Section 1902(a)(87) and implementing regulations. This letter is to inform you that MI Medicaid SPA 22-0008 was approved on October 4, 2022 with an effective date of September 1, 2022.

If you have any questions, contact Keri Toback at (312) 353-1754 or via email at keri.toback@cms.hhs.gov.

Sincerely,



James G. Scott, Director
Division of Program Operations

Enclosures

cc: Erin Black, MDHHS

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER
22 — 0008

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
September 1, 2022

5. FEDERAL STATUTE/REGULATION CITATION
Section 1902(a)(87) of the Social Security Act

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
a. FFY 2022 \$0
b. FFY 2023 \$0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
Attachment 3.1-D Page 2

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)
Attachment 3.1-D Page 2 (TN# 19-0010)

9. SUBJECT OF AMENDMENT
This SPA provides authority for updates to non-emergency medical transportation (NEMT) provider qualification requirements per the Consolidated Appropriations Act of 2021.

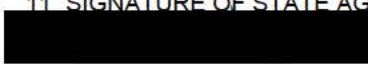
10. GOVERNOR'S REVIEW (Check One)

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


12. TYPED NAME
Farah Hanley

13. TITLE
Chief Deputy for Health

14. DATE SUBMITTED
July 7, 2022

15. RETURN TO
Behavioral and Physical Health and Aging Services Administration
Office of Strategic Partnerships & Medicaid Administrative Services – Federal Liaison
Capitol Commons Center – 7th Floor
400 South Pine
Lansing, Michigan 48933
Attn: Erin Black

FOR CMS USE ONLY

16. DATE RECEIVED **07/07/2022**

17. DATE APPROVED **10/04/2022**

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
09/01/2022

19. SIGNATURE


20. TYPED NAME OF APPROVING OFFICIAL
James G.Scott

21. TITLE OF APPROVING OFFICIAL
Director, Division of Program Operations

22. REMARKS

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

***Methods of Providing Transportation
for the Categorically and Medically Needy***

- i) Transportation expenses to and from medical providers for ongoing medically necessary treatment are included as administrative costs of the Title XIX Program.
- j) Transportation expenses to and from medical providers for dual (Medicare/Medicaid) eligibles are included as administrative costs of the Title XIX program.
- k) Related travel expenses, including meals, lodging, and an attendant, are reimbursed if necessary to obtain medical services, and are included as an administrative cost.
- l) Transportation services are requested through county DHHS offices. DHHS screens requests and approves the least costly, most appropriate mode of transportation available to meet the beneficiary's need, including, as appropriate, commercial, public, and not-for-profit providers and agencies.

MDHHS attests that all the minimum requirements outlined in 1902(a)(87) of the Social Security Act are met for non-emergency transportation services provided in accordance with 42 CFR 431.53 as administrative services, and non-emergency transportation services provided through a brokerage program in accordance with 42 CFR 440.170(a)(4).

TN NO.: 22-0008

Approval Date: 10/04/2022

Effective Date: 9/01/2022

Supersedes

TN No.: 19-0010