Records / Submission Packages - View All

# MI - Submission Package - MI2022MS0003O - (MI-22-1501) - Health Homes

Summary

Reviewable Units

Versions

**Analyst Notes** 

**Review Assessment Report** 

Approval Letter

Transaction Logs

News

Related Actions

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Medicaid and CHIP Operations Group 7500 Security Blvd Baltimore, MD 21244



## **Center for Medicaid & CHIP Services**

October 26, 2022

Elizabeth Hertel Director, Department of Health and Human Services Michigan Department of Health and Human Services 400 S Pine Lansing, MI 48909

Re: Approval of State Plan Amendment MI-22-1501 Opioid Health Home

Dear Mrs. Hertel.

On September 21, 2022, the Centers for Medicare and Medicaid Services (CMS) received Michigan State Plan Amendment (SPA) MI-22-1501 for Opioid Health Home to revise the current Opioid Health Home (OHH) SPA to optimize and expand the OHH in select Michigan counties. The specific counties include: Arenac, Barry, Bay, Berrien, Branch, Cass, Clare, Clinton, Eaton, Gladwin, Gratiot, Hillsdale, Huron, Ingham, Ionia, Isabella, Mecosta, Midland, Montcalm, Newaygo, Oakland, Osceola, Saginaw, Shiawassee, St. Joseph, Tuscola, and Van Buren.

We approve Michigan State Plan Amendment (SPA) MI-22-1501 with an effective date(s) of October 01, 2022.

For payments made to Health Homes providers for Health Homes participants who newly qualify based on the Health Homes program's increased geographical coverage under this amendment, a medical assistance percentage (FMAP) rate of 90% applies to such payments for the period 10/1/2022 to 9/30/2024.

The FMAP rate for payments made to health homes providers will return to the state's published FMAP rate at the end of the enhanced match period. The Form CMS-64 has a designated category of service Line 43 for states to report health homes services expenditures for enrollees with chronic conditions.

If you have any questions regarding this amendment, please contact keri rosenbloom at keri.toback@cms.hhs.gov

Sincerely,

Ruth A. Hughes

Deputy Director, Division of Program Operations

Center for Medicaid & CHIP Services

Records / Submission Packages - View All

# MI - Submission Package - MI2022MS0003O - (MI-22-1501) - Health Homes

Summary

Reviewable Units

Versions

Analyst Notes

Review Assessment Report

Approval Letter

Transaction Logs

**SPA ID** MI-22-1501

Initial Submission Date 9/21/2022

Effective Date N/A

News

Related Actions

# **Submission - Summary**

MEDICAID | Medicaid State Plan | Health Homes | MI2022MS00030 | MI-22-1501 | Opioid Health Home

CMS-10434 OMB 0938-1188

# **Package Header**

Package ID MI2022MS0003O

Submission Type Official

Approval Date 10/26/2022

Superseded SPA ID N/A

### **State Information**

State/Territory Name: Michigan Medicaid Agency Name: Michigan Department of Health and

**Human Services** 

# **Submission Component**

State Plan Amendment

Medicaid

CHIP

# Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | MI2022MS0003O | MI-22-1501 | Opioid Health Home

# **Package Header**

Package ID MI2022MS0003O

SPA ID MI-22-1501

Submission Type Official

**Initial Submission Date** 9/21/2022

Approval Date 10/26/2022

Effective Date N/A

Superseded SPA ID N/A

# **Executive Summary**

Summary Description Including The Michigan Department of Health and Human Services (MDHHS) is seeking approval from Centers of Medicare and Goals and Objectives Medicaid Services (CMS) to expand the OHH in select Michigan counties.

# Federal Budget Impact and Statute/Regulation Citation

#### **Federal Budget Impact**

	Federal Fiscal Year	Amount
First	2023	\$15100000
Second	2024	\$24500000

#### Federal Statute / Regulation Citation

Section 1945 of the Social Security Act

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created		
No items available			

# Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | MI2022MS0003O | MI-22-1501 | Opioid Health Home

# **Package Header**

Package ID MI2022MS0003O

Submission Type Official

**Approval Date** 10/26/2022

Superseded SPA ID N/A

**SPA ID** MI-22-1501

**Initial Submission Date** 9/21/2022

Effective Date N/A

## **SPA ID and Effective Date**

**SPA ID** MI-22-1501

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Health Homes Geographic Limitations	10/1/2022	MI-21-1500

# **Submission - Summary**

MEDICAID | Medicaid State Plan | Health Homes | MI2022MS0003O | MI-22-1501 | Opioid Health Home

## **Package Header**

Package ID MI2022MS0003O

Submission Type Official

Approval Date 10/26/2022 Effective Date N/A

Superseded SPA ID N/A

#### **Governor's Office Review**

No comment

Comments received

No response within 45 days

Other

**SPA ID** MI-22-1501

Initial Submission Date 9/21/2022

**Human Services** 

**Describe** Farah Hanley, Chief Deputy for Health Michigan Department of Health and

PRA Disclosure Statement: Centers for Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

This view was generated on 11/8/2022 2:47 PM EST

# MI - Submission Package - MI2022MS0003O - (MI-22-1501) - Health Homes

Summary

**Reviewable Units** 

Versions

**Analyst Notes** 

**Review Assessment Report** 

Approval Letter

Transaction Logs

**SPA ID** MI-22-1501

News

Related Actions

# **Health Homes Geographic Limitations**

MEDICAID | Medicaid State Plan | Health Homes | MI2022MS0003O | MI-22-1501 | Opioid Health Home

CMS-10434 OMB 0938-1188

## **Package Header**

Package ID MI2022MS0003O

Submission Type Official

Approval Date 10/26/2022

Superseded SPA ID MI-21-1500

System-Derived

- Health Homes services will be available statewide
- Health Homes services will be limited to the following geographic areas
- Health Homes services will be provided in a geographic phased-in approach

#### Specify the geographic limitations of the program

Initial Submission Date 9/21/2022

Effective Date 10/1/2022

- By county
- By region
- By city/municipality
- Other geographic area

#### Specify which counties:

- 1. Alcona
- 2. Alger
- 3. Alpena
- 4. Antrim 5. Arenac
- 6. Baraga
- 7. Barry
- 8. Bay
- 9. Benzie
- 10. Berrien
- 11. Branch
- 12. Calhoun
- 13. Cass
- 14. Charlevoix
- 15. Cheboygan
- 16. Chippewa 17. Clare
- 18. Clinton
- 19. Crawford
- 20. Delta
- 21. Dickinson
- 22. Eaton
- 23. Emmet
- 24. Genesee
- 25. Gladwin
- 26. Gogebic
- 27. Grand Traverse
- 28. Gratiot
- 29. Hillsdale
- 30. Houghton
- 31. Huron 32. Ingham
- 33. Ionia
- 34. losco
- 35. Iron
- 36. Isabella 37. Jackson
- 38. Kalamazoo
- 39. Kalkaska
- 40. Keweenaw
- 41. Lapeer 42. Leelanau
- 42. Leelanau
- 43. Lenawee

- 44. Livingston
- 45. Luce
- 46. Mackinac
- 47. Macomb
- 48. Manistee
- 49. Marquette
- 50. Mecosta
- 51. Menominee
- 52. Midland
- 53. Missaukee
- 54. Monroe
- 55. Montcalm
- 56. Montmorency
- 57. Newaygo
- 58. Oakland
- 59. Ogemaw
- 60. Ontonagon
- 61. Osceola
- 62. Oscoda
- 63. Otsego
- 64. Presque Isle
- 65. Roscommon
- 66. Saginaw
- 67. St. Clair
- 68. St. Joseph
- 69. Sanilac
- 70. Schoolcraft 71. Shiawassee
- 72. Tuscola
- 73. Van Buren
- 74. Washtenaw
- 75. Wayne
- 76. Wexford

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

This view was generated on 11/8/2022 2:47 PM EST