

MEDICAID POLICY INFORMATION SHEET

Policy Analyst: Carly Todd

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Initial

Public Comment

Final

Brief description of policy:

The Graduate Medical Education (GME) Michigan Doctors (MIDOCS) program supports the expansion of residencies and subsequent retention efforts for approved high need specialties in underserved areas of the state, where current and future physician shortages undermine the health and well-being of Medicaid beneficiaries.

Reason for policy (problem being addressed):

The MIDOCS program offers physician training in integrated and patient-centered care for underserved populations that will further the state’s Medicaid quality goals.

Budget implication:

budget neutral

will cost MDHHS \$ 22,120,000 between FY2019 and FY2023, and is budgeted in current appropriation

will save MDHHS \$

Is this policy change mandated per federal requirements?

No

Does policy have operational implications on other parts of MDHHS?

No

Does policy have operational implications on other departments?

No

Summary of input:

controversial

acceptable to most/all groups

limited public interest/comment

Supporting Documentation:

State Plan Amendment Required: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Public Notice Required: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, please provide status:	If yes,
<input type="checkbox"/> Approved <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Denied	Submission Date: 12/23/18
Date: Approval	Date:

DRAFT FOR PUBLIC COMMENT		
	Michigan Department of Health and Human Services	Project Number: 1908-Hospital Date: April 17, 2019

Comments Due: May 22, 2019
Proposed Effective Date: As Indicated
Direct Comments To: Carly Todd
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Policy Subject: Graduate Medical Education (GME) Innovations Michigan Doctors (MIDOCS) Program
Affected Programs: Medicaid
Distribution: Hospitals
Summary: The GME MIDOCS program supports the expansion of residencies and subsequent retention efforts for approved high need specialties in underserved areas of the state, where current and future physician shortages undermine the health and well-being of Medicaid beneficiaries.
Purpose: The MIDOCS program offers physician training in integrated and patient-centered care for underserved populations that will further the state's Medicaid quality goals.
Cost Implications: \$22,120,000 general fund cost between FY2019 and FY2023
Potential Hearings & Appeal Issues: Limited

State Plan Amendment Required: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, date submitted: 2/27/2018	Public Notice Required: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Submitted date: 12/23/2018
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Tribal Notification: Yes No - **Date:** 12/13/2018

THIS SECTION COMPLETED BY RECEIVER

<input type="checkbox"/> Approved	<input type="checkbox"/> No Comments
<input type="checkbox"/> Disapproved	<input type="checkbox"/> See Comments Below
	<input type="checkbox"/> See Comments in Text

Signature:	Phone Number
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Signature Printed:

Bureau/Administration <i>(please print)</i>	Date
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Proposed Policy Draft

Michigan Department of Health and Human Services
Medical Services Administration

Distribution: Hospitals

Issued: June 1, 2019 (Proposed)

Subject: Graduate Medical Education Innovations Michigan Doctors (MIDOCS) Program

Effective: As Indicated (Proposed)

Programs Affected: Medicaid

NOTE: Implementation of this policy is contingent upon State Plan Amendment (SPA) approval from the Centers for Medicare & Medicaid Services (CMS).

Graduate Medical Education (GME) Innovations programs support innovative GME programs that emphasize the importance of coordinated care, health promotions, and patient-centered care for underserved populations. The purpose of this training is to develop the skills and experience necessary to provide services utilized by Michigan Medicaid patient groups. Upon SPA approval, the Michigan Department of Health and Human Services (MDHHS) will expand its GME Innovations Sponsoring Institutions program to include MIDOCS. The GME MIDOCS program supports the expansion of residencies and subsequent retention efforts for approved high need specialties in underserved areas of the state where current and future physician shortages undermine the health and well-being of Medicaid beneficiaries. The MIDOCS program offers physician training in integrated and patient-centered care for underserved populations that will further the state's Medicaid quality goals.

To be eligible for MIDOCS GME funding, the MIDOCS participating medical school must enter into an agreement with MDHHS specifying the number of MIDOCS residents to be supported, the total annual cost of such residencies, any post-residency expenditures to retain physicians in underserved areas of Michigan, and the amount of funding from other sources available for the program, if any. Sponsoring institutions may receive funding from other sources, but Medicaid will act as a payer of last resort to only cover costs not reimbursed through other sources. MDHHS will pay the MIDOCS participating medical school an amount equal to the amount of otherwise unreimbursed costs.

MDHHS will approve four (4) agreements with MIDOCS participating medical schools statewide each state fiscal year (FY), covering residencies for the academic year (July-June [AY]) beginning within the FY. The agreements are effective January 1, 2019 and

will amount to \$1.52 million in FY 2019, \$10.73 million in FY 2020, \$19.98 million in FY 2021, \$27.75 million in FY 2022, and \$28.5 million in FY 2023.

In addition, the following requirements must be met:

- The MDOCS participating medical school must have submitted to the state agency its MDOCS program proposal for new or expanded residency program(s) to promote access in underserved areas of the state.
- The new or expanded program(s) must possess appropriate accreditation credentials.
- The new or expanded program(s) must meet MDOCS curriculum standards, including those related to didactic education on patient-centered medical homes, interprofessional education, behavioral and physical health integration, and continuous quality improvement.
- The MDOCS participating medical school must be the sponsoring institution of the residency program(s) or have an approved agreement with the sponsoring institution.
- The MDOCS participating medical school or the sponsoring institution (if not the medical school) must have agreements with all training sites for MDOCS residents.
- If GME distributions exceed the expenses incurred by the MDOCS participating medical school, their affiliated sponsoring institution, and/or the clinical training sites related to the MDOCS residencies, the size of the payment will be reduced to bring these elements into alignment.