

MEDICAID POLICY INFORMATION SHEET

Policy Analyst: Elizabeth Pitts

Phone Number: 517-284-0842

Initial

Public Comment

Final

Brief description of policy:

The purpose of this bulletin is to inform providers of a new reimbursement methodology for Medicaid dental services.

Reason for policy (problem being addressed):

To implement a new reimbursement methodology for Medicaid dental services.

Budget implication:

budget neutral

will cost MDHHS \$ 24.4 million gross, \$6.4 million GF, 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, Submission Date:
<input type="checkbox"/> Approved <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Denied	
Date: TBD Approval Date:	

DRAFT FOR PUBLIC COMMENT DEPARTMENTAL REVIEW Michigan Department of Health and Human Services		
	Project Number: 2253-Dental	Date: December 1, 2022

Comments Due: January 5, 2023
Proposed Effective Date: January 1, 2023
Direct Comments To: Elizabeth Pitts
Address:
E-Mail Address: pittse@michigan.gov
Phone: 517-284-0842 **Fax:**

Policy Subject: New Dental Reimbursement Methodology	
Affected Programs: Medicaid, Healthy Michigan Plan, Children’s Special Health Care Services (CSHCS)	
Distribution: Dentists, Dental Clinics, Dental Health Plans, Medicaid Health Plans, Integrated Care Organizations, Federally Qualified Health Centers, Tribal Health Centers, Local Health Departments	
Summary: The purpose of this bulletin is to inform providers of a new reimbursement methodology for Medicaid dental services.	
Purpose: To implement a new reimbursement methodology for Medicaid dental services.	
Cost Implications: \$24.4 million gross, \$6.4 million general fund.	
Potential Hearings & Appeal Issues: None	
Legal Authority:	
State Plan Amendment Required: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Public Notice Required: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Tribal Notification: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> - Date: _____	
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
Signature Printed:	
Bureau/Administration <i>(please print)</i>	Date

BULLETIN

Bulletin Number: MMP 22-51

Distribution: Dentists, Dental Clinics, Dental Health Plans, Medicaid Health Plans, Integrated Care Organizations, Federally Qualified Health Centers, Tribal Health Centers, Local Health Departments

Issued: December 1, 2022

Subject: New Dental Reimbursement Methodology

Effective: January 1, 2023

Programs Affected: Medicaid, Healthy Michigan Plan, Children's Special Health Care Services (CSHCS)

Note: Implementation of this policy is contingent upon approval of a State Plan Amendment (SPA) by the Centers for Medicare and Medicaid Services (CMS).

Effective January 1, 2023, the Michigan Department of Health and Human Services (MDHHS) will implement a new reimbursement methodology for dental services. Medicaid dental fee screens will be set at the average commercial rate, which is determined by MDHHS staff through information supplied by commercial dental insurers. When rate information is not available from commercial carriers, MDHHS may determine the rate from other state Medicaid programs, provider charges, or other sources as applicable. Rates are reviewed and updated annually and are published on the MDHHS website at www.michigan.gov/medicaidproviders >> Billing and Reimbursement >> Provider Specific Information >> Dental.

Public Comment

The public comment portion of the policy promulgation process is being conducted concurrently with the implementation of the change noted in this bulletin. Any interested party wishing to comment on the change may do so by submitting comments to Elizabeth Pitts via e-mail at PittsE@michigan.gov.

Please include "New Dental Reimbursement Methodology" in the subject line.

Comments received will be considered for revisions to the change implemented by this bulletin.

Manual Maintenance

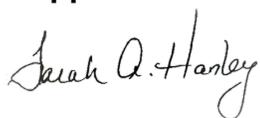
Retain this bulletin until the information has been incorporated into the Michigan Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mailed to ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Typical Providers may phone toll-free 1-800-292-2550. Atypical Providers may phone toll-free 1-800-979-4662.

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

Approved



Farah Hanley
Chief Deputy Director for Health