MEDICAID POLICY INFORMATION SHEET

Policy Analyst: Kristi Walker					
Phone Number:					
Initial 🗌	Public Comr	ment 🛚	Final 🗌		
Brief description of policy:					
After June 1, 2025, nursing facilities in a court appointed receivership may have the option to petition MDHHS for a rate adjustment to reflect reasonable costs.					
Reason for policy (problem being addressed):					
Nursing facilities could apply for rate relief under the previous rate relief policy. This policy was discontinued effective January 1, 2025 with the goal of making nursing facility rate methodology less complicated, less labor intensive, and more efficient. This policy would reestablish an opportunity for nursing facilities to apply for rate relief in limited circumstances.					
Budget implica budget neutr will cost MDF will save MDF	al HHS \$, and	(select one) b	udgeted in current appropi	riation	
Is this policy change mandated per federal requirements?					
No.					
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Does policy have operational implications on other parts of MDHHS?					
No.					
Does policy have operational implications on other departments?					
No					
- ·					
Supporting Documentation:					
State Plan Amer	ndment Required:	Yes No	Public Notice Required:	⊠ Yes □ No	
Approved Date:	Pending Approval	☐ Denied Date:	If yes, Submission Date:		
D 410.	, ,pp101411 L		Sasimoonon Date.		

1/18 Policy Info Sheet

DRAFT FOR PUBLIC COMMENT						
Michigan Department of						
Health and Human Services	Project Number: 2523-	NF Date: June 16, 2025				
Proposed Effective Date: As in Direct Comments To: Krist Address:	ii Walker					
E-Mail Address: <u>Wall</u> Phone:	<u>kerK32(@micnigan.gov</u>	Fax:				
Policy Subject: Nursing Facility Receivership						
Affected Programs: Medicaid						
Distribution: Nursing Facilities						
Summary: After June 1, 2025, nursing facilities in a court appointed receivership may have the option to petition MDHHS for a rate adjustment to reflect reasonable costs. Purpose: Nursing facilities could apply for rate relief under the previous rate relief policy. This						
policy was discontinued effective January 1, 2025, with the goal of making nursing facility rate methodology less complicated, less labor intensive, and more efficient. This policy would reestablish an opportunity for nursing facilities to apply for rate relief in limited circumstances.						
Cost Implications: Budget Neutral						
Potential Hearings & Appeal Issues: None						
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State Plan Amendment Required: Yes No Public Notice Required: Yes No Submitted date: May 28, 2025						
Tribal Notification: Yes No 🗌 - Date: April 15, 2025						
THIS SECTION COMPLETED BY RECEIVER						
☐ Approved	□ No	Comments				
_	<u>=</u>	e Comments Below				
Disapproved	See	e Comments in Text				
Signature:		Phone Number				

Signature Printed:	
Bureau/Administration (please print)	Date

Comment001 Revised 6/16



Michigan Department of Health and Human Services Health Services

Distribution: Nursing Facilities

Issued: August 1, 2025 (proposed)

Subject: Nursing Facility Receivership

Effective: As Indicated (proposed)

Programs Affected: Medicaid

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

The purpose of this policy is to notify nursing facility providers that the Sales and Resales section of the Michigan Medicaid State Plan, Section 4.19-D is being updated to include the following language effective June 1, 2025.

In the case of receivership, MDHHS may adjust a nursing facility's standard rates if a receiver has been appointed under MCL 600.2926 or MCR 2.622(A) solely to reflect the reasonable costs, as determined by MDHHS, associated with the court-approved closure or sale of the nursing facility or other appropriate situation. This rate adjustment will only apply to the current fiscal rate period of the request and the following fiscal rate period. After this adjustment time period, the facility will return to the standard reimbursement methodology.

If, upon audit, the agency finds a discrepancy between certified information and actual costs, all excess funds paid by the State to the facility as a result of that certification will be recovered with a penalty factor (equal to the then-current Medicare rate on net invested equity) applied to the discrepancy.

Requests for consideration must be made in writing to the Reimbursement and Rate Setting Section (RARRS) at least 90 days in advance of the sale.