# MEDICAID POLICY INFORMATION SHEET

#### Policy Analyst: Kristi Walker

#### Phone Number:

Initial 🗌	Public Comment 🔀	Final	

#### Brief description of policy:

This bulletin provides notification to nursing facilities that Bulletin MSA 21-43 – COVID-19 Response: Change to Non-Available Bed Plan Policy will remain in effect until September 30, 2025.

## Reason for policy (problem being addressed):

To allow nursing facilities more flexibility with their non-available bed designations as they continue to experience the effects of the public health emergency.

# **Budget implication:**

budget neutral
will cost MDHHS
, and (select one) 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?

Yes - Financial Operations Administration.

## Does policy have operational implications on other departments?

No.

## Summary of input:

controversial (Explain)

 $\boxtimes$  acceptable to most/all groups

limited public interest/comment

## Supporting Documentation:

State Plan Amendment Required: Yes 🛛 No			Public Notice Required:	🗌 Yes	🛛 No	
If Yes, please provide status:						
Approved	Pending	🗌 De	nied	lf yes,		
Date:	Approval	Date:		Submission Date:		

DRAFT FOR PUBLIC COMMENT						
Michigan Department of						
Health and Human Services	Project Number: 23	54-NF <b>Date:</b> February 6, 2024				
Proposed Effective Date: Octo Direct Comments To: Kris Address:	irect Comments To: Kristi Walker					
E-Mail Address: <u>Wal</u> Phone:	E-Mail Address: <u>WalkerK32@michigan.gov</u> Phone: Fax:					
Policy Subject: Non-Available B	ed Plan Policy Extensi	on				
Affected Programs: Medicaid						
<b>Distribution:</b> Nursing Facilities						
<b>Summary:</b> This bulletin provides notification to nursing facilties that the non-available bed plan policy MSA 21-43 will remain in effect until September 30, 2025.						
<b>Purpose:</b> To allow facilities more flexibility with their non-available bed designations as they continue to experience the effects of the public health emergency.						
Cost Implications: Budget Neutral						
Potential Hearings & Appeal Issues: None						
State Plan Amendment Require If yes, date submitted:		ublic Notice Required: Yes 🗌 No 🖂 ubmitted date:				
Tribal Notification: Yes 🗌 No 🖾 - Date:						
THIS SECTION COMPLETED BY RECEIVER						
Approved	1	lo Comments				
		See Comments Below				
Disapproved		See Comments in Text				
Signature:		Phone Number				
Signature Printed:						
Bureau/Administration (please	print)	Date				
<u></u>						

# **Proposed Policy Draft**

Michigan Department of Health and Human Services Behavioral & Physical Health and Aging Services Administration

Distribution:	Nursing Facilities
Issued:	September 1, 2024 (Proposed)
Subject:	Non-Available Bed Plan Policy Extension
Effective:	October 1, 2024 (Proposed)

Programs Affected: Medicaid

Bulletin <u>MSA 21-43</u> notified nursing facility providers of temporary changes to the nonavailable bed plan policies to allow nursing facilities to be more selective in their non-available bed designations and offer more flexibility due to the COVID-19 pandemic. This policy has been in effect since October 1, 2021 and was scheduled to end September 30, 2024. This bulletin provides notification to all nursing facility providers that MSA 21-43 will remain in effect until September 30, 2025. No future extensions are expected beyond this date; therefore, providers are encouraged to plan accordingly.

The guidance provided in bulletin <u>MSA 21-43</u> and updated in bulletin <u>HASA 22-04</u> regarding the use and changes to non-available bed designations remains unchanged with the following exception: Instead of allowing only four extensions of six months each, a nursing facility may now request up to six extensions of six months each.