

Administrative Rule Analysis



MEDICAL SERVICES ADMINISTRATION PROVIDER HEARINGS

Mary Ann Cleary, Director
Phone: (517) 373-8080
<http://www.house.mi.gov/hfa>

Rule Set No.: 2015-077 HS
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Department: Health and Human Services
Agency: Bureau of Legal Affairs
Enabling Statute: Social Welfare Act, 1939 PA 280, MCL 400.1 et seq.

Analysis Complete to: 07/27/2016

BACKGROUND AND SUMMARY OF PROPOSED RULES

The rule set 2015-077 HS combines the required prehearing conference and the bureau conference into a single internal conference to resolve complaints against an adverse action notice received by a Medicaid provider or an applicant to become a Medicaid provider.

Providers and applicants may request an internal conference or an appeal for administrative hearing, so long as the request is made within 30 days of notice of an adverse action. If not, the adverse action may be acted upon.

The rule set outlines an internal conference, requires a decision within 30 days after conclusion of the internal conference, and requires requests for an administrative hearing to be made within 30 days of the internal conference decision.

The rule set defines “adverse action” as a suspension, termination, or denials of a medical provider’s participation in the Medicaid program, or a provider payment reduction. It also defines “applicant” as an individual, firm, corporation, or other legal entity that has applied to participate in the Medicaid program as a provider.

FISCAL IMPACT OF PROPOSED RULES

These administrative rules should not have a fiscal impact on the state and local units of government.

Fiscal Analyst: Kevin Koorstra

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