



STATE OF MICHIGAN

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
LANSING

GRETCHEN WHITMER  
GOVERNOR

ELIZABETH HERTEL  
DIRECTOR

May 15, 2023

**TO:** Executive Directors of Prepaid Inpatient Health Plan and  
Community Mental Health Service Programs

**FROM:** Lindsay McLaughlin, JD/ MPH *lm*  
Director  
Bureau of Children’s Coordinated Health Policy & Supports

Jeffery L. Wieferich MA, LLP *fw*  
Director  
Bureau of Specialty Behavioral Health Services

**SUBJECT:** Impact of the End of the Public Health Emergency on MSA 20-58

The Michigan Department of Health and Human Services (MDHHS) is issuing the following guidance regarding the impact of the end of the federal Public Health Emergency (PHE) on MSA 20-58. MSA 20-58 includes provisions that MDHHS employed pursuant to the flexibilities afforded by federal authorities to attend to the COVID-19 emergency. MSA 20-58 allowed Prepaid Inpatient Health Plans (PIHP) and Community Mental Health Service Programs (CMHSP) to ensure the provision of essential services whilst protecting the health and wellness of beneficiaries and providers. MSA 20-58 can be found on the department’s website through the following link:

[www.michigan.gov/mdhhs](http://www.michigan.gov/mdhhs) >> Assistance Programs >> Medicaid >> Go to Medicaid >> Providers >> Policy, Letters and Forms >> Approved Policy Bulletins >> 2020 >> MSA 20-58

In MSA 20-58, MDHHS indicated that MSA 20-58 is intended to be time-limited, and MDHHS will notify providers of its termination. The purpose of this memo to outline the process for rescinding the flexibilities in MSA 20-58. MDHHS will issue additional bulletins in the future to formally rescind the provisions in MSA 20-58.

The following table describes the timeline for rescinding the various provisions in MSA 20-58.

Provision	End Date
Telehealth Services	MDHHS has already issued updated policy related to this flexibility. MDHHS issued MMP 23-10 to update program coverage of telemedicine services after the conclusion of the federal COVID-19 PHE.

Provision	End Date
Health Home Encounters	MDHHS has already issued updated policy related to this flexibility. MDHHS issued MMP 23-10 to update program coverage of telemedicine services after the conclusion of the federal COVID-19 PHE.
Person-Centered Plans/Individual Plans of Service (IPOS)	This flexibility will end when the federal COVID-19 PHE declaration ends, and any person-centered plan/IPOS that was complete prior to the end of the PHE must be amended within 30 days of the end of the PHE. MDHHS will issue a policy bulletin to formally rescind this requirement.
Payment to Support Acute Care	This flexibility will end when the federal COVID-19 PHE declaration ends. MDHHS will issue a policy bulletin to formally rescind this requirement.
Appendix K: Waiver Services Limits	This flexibility will end when the Appendix K authority ends, which is six months after the end of the federal COVID-19 PHE declaration. MDHHS will issue a policy bulletin to formally rescind this flexibility.
Appendix K: Service Setting	This flexibility will end when the Appendix K authority ends, which is six months after the end of the federal COVID-19 PHE declaration. MDHHS will issue a policy bulletin to formally rescind this flexibility.
Appendix K: Waiver Provider Qualifications	This flexibility will end when the Appendix K authority ends, which is six months after the end of the federal COVID-19 PHE declaration. MDHHS will issue a policy bulletin to formally rescind this flexibility.
Appendix K: Processes for Level of Care Evaluations or Re-Evaluations	MDHHS will extend annual level of care recertifications due dates that expire during the effective emergency period until 12 months after the original due date, regardless of the end date of the Appendix K. MDHHS will issue a policy bulletin to clarify the process for level of care evaluations.

Provision	End Date
<p>Reassessments, Re-Evaluations, and Prior Authorizations for Specialty Populations Covered by State Plan or the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Behavioral Health Applied Behavioral Analysis Benefit</p>	<p>MDHHS obtained the authority for this flexibility based on the state 1135 waiver. Because the federal COVID-19 PHE declaration is expiring, MDHHS must rescind this flexibility. MDHHS will issue a policy bulletin to formally rescind this flexibility and give providers guidance for completing reassessments, reevaluations, and prior authorizations.</p>
<p>Behavior Technician (BT) Qualifications</p>	<p>MDHHS issued this flexibility based upon existing state authority, and this flexibility is not impacted by the end of the federal COVID-19 PHE declaration and will not expire automatically at the end of the PHE. MDHHS will issue a policy bulletin to formally rescind this flexibility.</p>
<p>Qualified Behavioral Health Professionals (QBHP) Qualifications</p>	<p>MDHHS issued this flexibility based upon existing state authority, and this flexibility is not impacted by the end of the federal COVID-19 PHE declaration and will not expire automatically at the end of the PHE. MDHHS will issue a policy bulletin to revise the timeline for providers to complete necessary certification to offer QBHPs time to complete the process. QBHPs may continue to practice and provide Medicaid-funded services in the interim.</p>
<p>Institution for Mental Disease (IMD) Services for Beneficiaries with Serious Mental Illness/Serious Emotional Disturbance for 30 Days</p>	<p>This flexibility is based upon the department's 1115 authority and will end 60 days after the end of the federal COVID-19 PHE declaration. MDHHS will issue a policy bulletin to formally rescind this flexibility.</p>