HB-4496, House Concurred, June 27, 2023 HB-4496, As Passed Senate, June 27, 2023

> SUBSTITUTE FOR HOUSE BILL NO. 4496

A bill to amend 1939 PA 280, entitled "The social welfare act,"

by amending sections 105b and 109f (MCL 400.105b and 400.109f), section 105b as added by 2007 PA 100 and section 109f as amended by 2017 PA 224; and to repeal acts and parts of acts.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

Sec. 105b. (1) The department of community health shall work
 in collaboration with the contracted health plans to create
 incentives for individual medical assistance recipients who
 practice specified positive health behaviors. The incentives
 described in this subsection may include, but are not limited to,
 expanded benefits and incentives relating to premiums, co-pays, or
 benefits. The positive health behaviors described in this

subsection may include, but are not limited to, participation in health risk assessments and health screenings, compliance with medical treatment, attendance at scheduled medical appointments, participation in smoking cessation treatment, exercise, prenatal visits, immunizations, and attendance at recommended educational health programs.

7 (2) The department of community health shall create pay-for-8 performance incentives for contracted medicaid Medicaid health 9 maintenance organizations. The medicaid Medicaid health maintenance 10 organization contracts shall may include incentives for meeting health outcome targets for chronic disease states, increasing the 11 12 number of medical assistance recipients who practice positive 13 health behaviors, and meeting patient compliance targets 14 established by the department. of community health. Priority shall 15 may be given to strategies that prevent and manage the 10 most 16 prevalent and costly ailments affecting medical assistance 17 recipients.

18 (3) The department of community health shall establish a 19 preferred product and service formulary program for durable medical 20 equipment. The department of community health shall work with the 21 centers for medicare and medicaid services Centers for Medicare and Medicaid to determine if a joint partnership with medicare Medicare 22 23 is possible in establishing the program described in this 24 subsection as a means of achieving savings and efficiencies for 25 both the medicaid and medicare Medicaid and Medicare programs. The preferred product and service formulary program for durable medical 26 27 equipment shall require participation from the department of community health and shall permit the contracted medicaid Medicaid 28 29 health maintenance organizations and provider organizations to

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1 participate.

2 (4) The department of community health shall seek financial
3 support for electronic health records, including, but not limited
4 to, personal health records, e-prescribing, web-based medical
5 records, and other health information technology initiatives using
6 medicaid Medicaid funds.

7 (5) The department of community health shall include in any 8 federal waiver request that is submitted with the intent to secure 9 federal matching funds to cover the medically uninsured nonmedicaid 10 population in the state language to allow the department of 11 community health to establish, at a minimum, the programs required 12 under subsections (1) and (2).

13 (5) (6) The department of community health shall not implement 14 incentives under this section that conflict with federal statute or 15 regulation.

16 Sec. 109f. (1) The department shall support the use of 17 Medicaid funds for specialty services and supports for eligible Medicaid beneficiaries with a serious mental illness, developmental 18 19 disability, serious emotional disturbance, or substance use 20 disorder. Medicaid-covered specialty services and supports shall be managed and delivered by specialty prepaid health plans chosen by 21 the department. The specialty services and supports shall be carved 22 out from the basic Medicaid health care benefits package. 23

(2) Specialty prepaid health plans are Medicaid managed care
organizations as described in section 1903(m)(1)(A) of title XIX,
42 USC 1396b, and are responsible for providing defined inpatient
services, outpatient hospital services, physician services, other
specified Medicaid state plan services, and additional services
approved by the Centers for Medicare and Medicaid Services under

H02861'23 (H-4)

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1 section 1915(b)(3) of title XIX, 42 USC 1396n.

2 (3) This section does not apply to a pilot project authorized
 3 under section 298(3) of article X of 2017 PA 107.

Enacting section 1. Sections 105c and 105f of the social
welfare act, 1939 PA 280, MCL 400.105c and 400.105f, are repealed.