



MEDICARE-MEDICAID COORDINATION OFFICE

DATE: March 31, 2023

TO: Michigan Medicare-Medicaid Plans

FROM: Lindsay P. Barnette
Director, Models, Demonstrations & Analysis Group

SUBJECT: Release of Revised Contract Year 2023 Marketing Models

Accompanying this memorandum are updated versions of several marketing models for Medicare-Medicaid Plans (MMPs) for Contract Year (CY) 2023 developed jointly by CMS and the state of Michigan for MMPs operating in the Michigan capitated financial alignment model demonstration. These models replace the models previously issued for CY 2023.

The marketing model updates include:

1. Member Handbook (Evidence of Coverage)
 - a. Chapter 1
 - Page 10- update to information on waiver services provided through the prepaid inpatient health plan (PIHP)
 - b. Chapter 2
 - Page 1- plan must update table of contents based on the updates to page 10 of chapter 2.
 - Page 10-11- updated section D based on current PIHP contracting as well as made updates to the behavioral health crisis line information.
 - c. Chapter 3
 - Page 5- updated information on waiver services provided by the PIHP
 - d. Chapter 4
 - Page 2- updated description of services provided through the PIHP
 - Page 14- updated covered dental services
 - Page 15- added a new section on coverage of doula services
 - Page 29- updated description of covered inpatient services in a psychiatric hospital
 - Page 37- updated description of outpatient mental health care
 - Page 38- updated description of outpatient substance use disorder services and

- partial hospitalization services
 - Page 57- updated section F2 description of services covered by the PIHP
- e. Chapter 9
- Page 6- updated section D1 note regarding behavioral health services
 - Page 10- updated section E2 note regarding coverage decisions for behavioral health services
 - Page 12- updated section E3 note regarding behavioral health appeals
 - Page 37- updated section G4 note regarding behavioral health appeals
 - Page 47- updated section J1 note regarding coverage of behavioral health services
2. Exhibit 22: Model Notice for Period of Deemed Continued Eligibility due to Loss of Medicaid
- a. Page 1- updated language under heading, “Which services will not be covered?”
3. Summary of Benefits
- a. Page 10-11- updated response for, “Whom should I contact if I have questions or need help?”
- b. Page 16- updated response for, “You need dental care”
- c. Page 17- updated response for, “You have a mental health condition” and “You have concerns related to substance use”
- d. Page 21- updated section D PIHP description

In addition, MMPs should add the appropriate disclaimer below to the following appeals and grievance models: Appeal Approved, Notice of Appeal Decision, Notice of Receipt of Appeal/Grievance, Notice of Our Failure to Make a Coverage Decision, Final Response to Grievance, and Notice of Receipt of Oral Appeal. CMS will not reissue these models.

[NorthCare insert: NorthCare Network is a behavioral health plan that subcontracts with the Upper Peninsula Health Plan, which is a health plan that contracts with both Medicare and Michigan Medicaid to provide benefits of both programs to enrollees.]

[Detroit Wayne Integrated Health Network insert: Detroit Wayne Integrated Health Network is a behavioral health plan that subcontracts with Aetna Better Health of Michigan, AmeriHealth Michigan, Michigan Complete Health, HAP Midwest Health Plan, and Molina Healthcare of Michigan, which are health plans that contract with both Medicare and Michigan Medicaid to provide benefits of both programs to enrollees.]

[Macomb County Community Mental Health insert: Macomb County Community Mental Health is a behavioral health plan that subcontracts with HAP Midwest Health Plan, and Molina Healthcare of Michigan, which are health plans that contract with both Medicare and Michigan Medicaid to provide benefits of both programs to enrollees in Macomb County.]

Michigan MMPs must communicate these revisions to enrollees in accordance with the "Mid-Year Change Notification to Enrollees" instructions in the “CMS required materials and content (422.2267(e))” section in the CY 2023 Marketing Guidance for Michigan Medicare-Medicaid Plans,

issued on July 11, 2022. Michigan MMPs must not use the errata process to communicate these changes.

We will post the revised models on the Medicare-Medicaid Coordination Office's Information and Guidance for Plans webpage at www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/MMPInformationandGuidance/MMPMarketingInformationandResources, grouped alphabetically by state under the "State-Specific Information" heading.

If you have any questions about the contents of this memorandum, please contact the Medicare-Medicaid Coordination Office at MMCOCapsModel@cms.hhs.gov.