

Medicaid Standards of Promptness Report 2

(FY2017 Appropriation Act - Public Act 268 of 2016)

April 21, 2017

Sec. 620. (1) The department shall make a determination of Medicaid eligibility not later than 90 days if disability is an eligibility factor. For all other Medicaid applicants, including patients of a nursing home, the department shall make a determination of Medicaid eligibility within 45 days of application.

(2) The department shall report on a quarterly basis to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the average Medicaid eligibility standard of promptness for each of the required standards of promptness under subsection (1) and for medical review team reviews achieved statewide and at each local office.



Michigan Department of
Health & Human Services

RICK SNYDER, GOVERNOR
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Section 620(2) Report #2
(FY2017 Appropriation Act - Public Act 286 of 2016)

Section 620(2) of Public Act 286 of 2016 Report #2 (January 1, 2017 – March 31, 2017) Medicaid Standard of Promptness	
Average Medicaid eligibility standard of promptness when disability is an eligibility factor	95.79%
Average Medicaid eligibility standard of promptness for all other Medicaid applications	97.77%

Section 620(2) of Public Act 286 of 2016 Report #2 (January 1, 2017 – March 31, 2017) Medical Review Team Reviews Processing Time	
Average processing time for medical review team reviews Statewide*	107.61 days
Average processing time for medical review team reviews Central Service Area (Lansing office)**	107.07 days
Average processing time for medical review team reviews Detroit Service Area (Detroit office)**	108.46 days
Average processing time for medical review team reviews Northern Service Area (Traverse City office)**	230.50 days

*The statewide average is a weighted average based on the caseload of each DDS office.

**In an effort to streamline the disability determination process, DDS has moved the processing of state claims (SDA, MA based on disability and Employment & Training deferrals) to their Central and Detroit Service Area offices though the Northern Service Area office did have some claims they were finishing up during the 2nd quarter of Fiscal Year 2017. The Southwest Service Area (SWA) office did not process any state claims during the 2nd quarter and are therefore no longer included on this report.