

Bulletin Number: MSA 07-64

Distribution: All Providers

Issued: December 1, 2007

Subject: Updates to the Medicaid Provider Manual

Effective: January 1, 2008

Programs Affected: Medicaid, Children's Special Health Care Services, Adult Benefits Waiver, MOMS

The Michigan Department of Community Health (MDCH) has completed the January 2008 update of the Michigan Medicaid Provider Manual. A copy of the updated manual will be distributed to all enrolled providers or provider groups via compact disc (CD) in January. A copy will also be available on the MDCH website by January 1, 2008.

The January 2008 version of the manual does not highlight changes made since the January 2007 version. However, consistent with previous quarterly manual updates, tables attached to this bulletin describe the changes made, the location of the changes within the manual and, when appropriate, the reason for the change. (Some minor corrections [e.g., misspelled words], added references [e.g., directing reader to the website], and reorganizing of existing information may not appear in the listed changes.) Subsequent changes made for the April, July, and October 2008 versions of the manual will be highlighted within the text of the on-line manual.

Manual Maintenance

This bulletin may be discarded when you begin using the January 2008 version of the Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

Approved



Paul Reinhart, Director
Medical Services Administration



Medicaid Provider Manual January 2008 Updates



TECHNICAL CHANGES*

CHAPTER	SECTION	CHANGE	COMMENT
Entire Manual		All references to the Prior Authorization Division were changed to Program Review Division.	Update
General Information for Medicaid Providers	1.3 MDCH Website	A new subsection was added describing information available on the MDCH website. Subsequent subsections were renumbered.	Information
Beneficiary Eligibility	10.2 Identifying CSHCS on the EVS	The text of this subsection was updated to reflect current information available from EVS. Information related to providers requiring CSHCS authorization to receive reimbursement for CSHCS services was moved to the CSHCS Chapter.	Update
Beneficiary Eligibility	12.1.A. Hospitals and Nursing Facilities	The following sentence was added after the first sentence of the first paragraph: If the facility has a signature on file, that should be noted in the signature box.	Update
Coordination of Benefits	2.6.F. Medicaid Liability	Third paragraph was changed to indicate Medicaid's allowable amount minus the Medicare payment for the service or the beneficiary's liability.	Clarification
Coordination of Benefits	2.6.H. Special Considerations for Inpatient Hospital Claims	The third bullet was deleted.	Update
Coordination of Benefits	3.2 Co-Insurance/ Deductible and/or Co-Payment	The co-payment portion of the table was deleted and co-pay information added to the Co-Insurance and Deductibles portion of the table.	Update
Billing & Reimbursement for Institutional Providers	5.1.A. Private Rooms	The second sentence of the second paragraph was changed to read: The semi-private revenue code should be billed and reflect the semi-private room rate.	Clarification

* Technical Updates/Clarifications are always highlighted in yellow in the online manual.



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TECHNICAL CHANGES*

CHAPTER	SECTION	CHANGE	COMMENT
Billing & Reimbursement for Institutional Providers	5.6 Medicare	The last sentence of the first paragraph was modified to also refer readers to the Special Inpatient Situations Medicare/Medicaid Claims section of the Hospital Chapter Reimbursement Appendix.	Clarification
Billing & Reimbursement for Institutional Providers	5.7.A. Initial Claim	The bullets in this subsection were deleted and replaced with the following sentence: Refer to the UB-04 NUBC Manual for reporting multiple pages (on line 23) and total charges.	Update
Billing & Reimbursement for Institutional Providers	5.7.B. Claim Replacement	The first paragraph and following bullets were deleted and replaced with the following sentence: Refer to the UB-04 NUBC Manual for submitting a claim replacement TOB.	Update
Billing & Reimbursement for Professionals	6.4 Ancillary Medical Services	The following was added at the end of the Immunizations portion of the table: Medicaid FFS or the appropriate Medicaid Health Plan can be billed directly for immunizations provided to a child even if other insurance resources are available. The preventive pediatric diagnosis code(s) must be included on a claim to avoid a rejection.	Clarification
Ambulance	2.9 Nonemergency	The following sentence was added at the beginning of the second paragraph after the bullets: The certification of medical necessity can be signed by a physician's assistant or a nurse practitioner if a signature cannot be obtained from the attending physician.	Clarification
Children's Special Health Care Services	Section 2 - Approved Providers	This section was renamed Approved/Authorized Providers and expanded to include information previously contained in the Beneficiary Eligibility Chapter and additional information to clarify policy related to CSHCS approved and authorized providers.	Clarification

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TECHNICAL CHANGES*

CHAPTER	SECTION	CHANGE	COMMENT
Children's Special Health Care Services	5.3 Payment Agreement	The following sentence was added at the end of the paragraph following the bullets: When death of a CSHCS client occurs and more than one family member has CSHCS coverage, the payment agreement remains intact.	Clarification
Children's Special Health Care Services	6.2 Residency	References to an extended period of time were removed from this subsection.	Update
Children's Special Health Care Services	9.6 Respite Benefit	The following paragraph was added after the bullets: Respite is reimbursed when provided by a Medicaid enrolled home health agency, a Medicaid enrolled registered nurse (RN) who is licensed to practice in the state of Michigan, or a Medicaid enrolled licensed practical nurse (LPN) who is licensed to practice in the state of Michigan and working under supervision according to the Michigan Public Health Code. It is the responsibility of the LPN to secure the appropriate supervision and maintain documentation that identifies the supervising professional.	Clarification
Dental	6.2.B. Topical Application of Fluoride	Information was added related to coverage of topical fluoride varnish.	Update
Dental	Section 10 – Public Dental Clinic Enhanced Reimbursement Rate	This section was moved to the Local Health Department Chapter.	Moved to more appropriate location in manual.
Federally Qualified Health Centers	Section 4 - Billing	The information in this section was reorganized and updated.	Update
Hospital (Hospital Reimbursement Appendix)	3.1 Medicare/Medicaid Claims	The reference to contractual adjustments was deleted from the first sentence of the last paragraph. Text was added to the second bullet related to Medicare Advantage Plans.	Clarification

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TECHNICAL CHANGES*

CHAPTER	SECTION	CHANGE	COMMENT
Hospital	6.8 Nursing Facility	Details related to the Michigan Medicaid Nursing Facility Level of Care Determination were removed and readers referred to the Coverages portion of the Nursing Facility Chapter.	Consistency
Laboratory	2.2 Physician Self-Referral	References to a physician's financial interest were changed to read financial relationship.	Changed for consistency with regulation.
Local Health Department	2.2 Additional Information on Blood Lead Testing	Changed references to the EPSDT Periodicity Schedule to the AAP Recommendations for Preventive Pediatric Healthcare.	Update
Local Health Department	Section 5 – Public Dental Clinic Enhanced Reimbursement Rate (new)	The information in this new section was previously part of the Dental Chapter. Subsequent sections were renumbered.	Moved to more appropriate location in manual.
Maternal Infant Health Program	1.2 Duration of Coverage	A sentence was added in the Maternal Services portion of the table indicating Home Health Agencies also enrolled as MIHP providers must render services for the mother and baby as MIHP services rather than home health services.	Clarification
Maternal Infant Health Program	2.4 Reimbursement	The following sentence was added at the end of the second paragraph: For beneficiaries with other commercial insurance, refer to the Commercial Health Insurance Section of the Coordination of Benefits Chapter of this manual.	Clarification
Maternal Infant Health Program	2.5 Psychosocial/ Nutritional Assessment	The last two sentences of the first paragraph were modified for clarification.	Clarification
Maternal Infant Health Program	2.8 Care Coordination	The last sentence of the second paragraph was changed to read: . . . with other community resources to avoid duplication of services, identify gaps, and to ensure ongoing support when the MIHP case is closed.	Clarification

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TECHNICAL CHANGES*

CHAPTER	SECTION	CHANGE	COMMENT
Medicaid Health Plans	2.9.A. Inpatient 2.9.B. Emergency Services	These new subsections incorporate information related to coverage of substance abuse detoxification previously issued in L-06-10.	Clarification
Medicaid Health Plans	2.9.C. Co-Occurring Mental Health and Substance Use Disorders	This new subsection incorporates clarification related to responsibility for mental health services for Medicaid Health Plan enrollees with mild to moderate mental illness and a co-occurring substance use disorder previously issued in L-07-27.	Clarification
Medicaid Health Plans	2.11 Hospital 15-Day Readmissions	This new subsection incorporates information previously issued in L-05-12 related to MDCH guidelines for 15-day readmissions.	Clarification
Medical Supplier	1.7.I. Hospital Discharge Waiver Services	Procedure code E0176 was deleted from the list of codes included in this subsection.	Invalid code
Medical Supplier	1.10 Noncovered Items	The following items were added to the list of noncovered items: hand/body soap, peri-wash, ice packs, vacu-brush toothbrushes, room dehumidifiers, UV lighting for Seasonal Affective Disorder, second units for school use	Clarification
Medical Supplier	2.4 Blood Pressure Monitoring	The second bullet in the coverage for beneficiaries age 21 and over was changed to indicate daily blood pressure readings.	Clarification
Medical Supplier	2.16 Home Intravenous Infusion Therapy	The fourth sub-bullet in the Documentation portion of the table was changed to read: <ul style="list-style-type: none"> Elevated erythrocyte sedimentation rate (ESR) 	Correction
Medical Supplier	2.43 Surgical Dressings	The third bullet in the Documentation portion of the table was changed to read: <ul style="list-style-type: none"> Quantity of item needed per dressing change 	Clarification

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TECHNICAL CHANGES*

CHAPTER	SECTION	CHANGE	COMMENT
Mental Health/ Substance Abuse	3.23 Telemedicine	The following was added at the end of the first paragraph: Practitioners must meet the provider qualifications for the covered service provided via telemedicine.	Clarification
Mental Health/ Substance Abuse	3.24 Transportation	The first sentence was changed to read: . . . HSW or additional/B3 service at an approved day program site or in a clubhouse psychosocial rehabilitation program	Clarification
Mental Health/ Substance Abuse	4.3 Essential Elements	Under Team Composition, the second sentence of the third bullet was changed to read: The team coordinator, within their scope of practice , also provides . . .	Clarification
Mental Health/ Substance Abuse	Section 15 - Habilitation Supports Waiver for Persons with Developmental Disabilities	The fourth sentence was changed to read: Medical necessity criteria should be used in determining the amount . . .	Update
Mental Health/Substance Abuse	17.3.M. Supported/ Integrated Employment	The first two sentences of the first paragraph were changed to read: Provide job development, initial and ongoing support services, and activities as identified in the individual plan of services that assist beneficiaries to obtain and maintain paid employment that would otherwise be unachievable without such supports. Support services are provided continuously, intermittently, or on a diminishing basis as needed throughout the period of employment.	Update
Nursing Facility Coverages	Section 4 – Beneficiary Eligibility and Admission Process	This section was updated to reflect current policy and process related to the Michigan Medicaid Nursing Facility Level of Care Determination.	Update

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TECHNICAL CHANGES*

CHAPTER	SECTION	CHANGE	COMMENT
Nursing Facility Coverages	Section 7 – PASARR Process	In the Change in Condition portion of the table, the last sentence was deleted and the following information inserted: Changes to the Minimum Data Set (MDS), Section E (indicators of depression, anxiety, mood) would indicate a significant change for PASARR purposes. The nursing facility must notify their local CMHSP via a DCH-3877 for a Level II evaluation.	Clarification
Pharmacy	Section 2 – Prescriber Requirements	The phrase "written or oral prescriptions" was changed to "prescription order".	Update
Pharmacy	10.2 Retrospective Drug Utilization Review	The fourth bullet after the first paragraph was deleted.	Removed obsolete information
Pharmacy	13.4.A. Discounted Average Wholesale Price	This subsection was deleted and the information moved to the MDCH website.	Update
Pharmacy	13.5 Dispensing Fees	Deleted table listing MDCH dispensing fees. Information available on the MDCH website.	Update
Pharmacy	14.4.B. Dispensing Fees	Deleted table listing MDCH dispensing fees. Information available on the MDCH website.	Update
Pharmacy	15.7 Products Included in the Nursing Facility Per Diem Rate	Ibuprofen was added to the list of products in the Analgesics portion of the table.	Update
Pharmacy	Section 19 – Pharmacy Audit & Documentation	The bullets in the Prescription Documentation portion of the table were modified to reflect current state/federal laws.	Modify for consistency
Practitioner	Section 3 – Early and Periodic Screening, Diagnosis, and Treatment	Minor updates were made throughout this section, including deletion of the EPSDT Periodicity Schedule subsection.	Update

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TECHNICAL CHANGES*

CHAPTER	SECTION	CHANGE	COMMENT
Practitioner	4.14.B. Referred Services	References to a physician's financial interest were changed to read financial relationship.	Changed for consistency with regulation.
Practitioner	8.8 Maternity Outpatient Medical Services Program	A sentence was added at the end of the first paragraph referring readers to the MOMS Chapter for program information. The table was deleted.	Update
Practitioner	8.9 Maternal Infant Health Program	The first paragraph was modified to include a brief description of the MIHP and refer readers to the MIHP Chapter for program information. All subsequent information was deleted.	Update
Practitioner	Section 9 – Pharmacy	The following sentence was added at the end of the first paragraph: A prescription or prescription order must comply with state and federal laws.	Clarification
Rural Health Clinics	Section 6 – Billing	The information in this section was reorganized and updated.	Update
Special Programs	4.2 Program of All-Inclusive Care for the Elderly	Information was deleted from this subsection and readers referred to the PACE Chapter.	Consistency
Vision	3.4 Ophthalmic Frames and Lenses	References were added to instructions related to the DCH-0893 Vision Services Approval/Order.	Clarification
Directory Appendix	Beneficiary Assistance	The web address for the on-line application for MIChild, Healthy Kids, MOMS, and <i>Plan First!</i> was updated.	Update
Directory Appendix	Health Plan Information	Added location of MHP and PIHP contact and service area information.	Information issued in L-07-27
Directory Appendix	Provider Resources	Added location of 15-day hospital readmission guidelines for use by hospitals and Medicaid Health Plans.	Information issued in L-05-12

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TECHNICAL CHANGES*

CHAPTER	SECTION	CHANGE	COMMENT
Directory Appendix	Provider Resources	Added website link to the American Academy of Pediatrics Recommendations for Preventive Pediatric Healthcare.	Information
Directory Appendix	Maternal-Child Educational Resources	New category added to the Directory Appendix.	Information
Directory Appendix	Pharmacy Resources	Added website address for MDCH pharmacy dispensing fees.	Update

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BULLETINS INCORPORATED*

BULLETIN NUMBER	DATE ISSUED	CHAPTER	SECTION	CHANGE
MSA 07-61	12/1/07	Billing & Reimbursement for Institutional Providers	6.12 Injections 6.12.A. Electronic Claims (new subsection) 6.12.B. UB-04 Claim Format (new subsection) 6.12.C. Not Otherwise Classified Code (NOC) (new subsection)	Reformatting and text modification to address Reporting National Drug Codes by Outpatient Hospitals
MSA 07-57	10/1/07	Forms Appendix		Updated version of MSA-1680-B.
MSA 07-56	10/1/07	Hospital	1.5.G. Pharmacy	Text regarding tamper resistant prescription pads was removed due to delay in implementation.
		Pharmacy	1.2 Definitions Section 2 - Prescriber Requirements	
		Practitioner	Section 9 - Pharmacy	
MSA 07-55	10/1/07	Pharmacy	14.10 Narcotic Analgesics (new subsection; following subsections re-numbered)	Subsection added to address policy for narcotic analgesics.
MSA 07-53	10/1/07	Ambulance	1.2 Common Terms 2.2 Base Rate	Policy updated for Advanced Life Support (ALS) Services.
MSA 07-52	9/1/07	Mental Health/Substance Abuse	Throughout chapter	Revisions to update policy were made throughout the chapter.

*Bulletin inclusion updates are color-coded to the quarter in which the update was made (April 1 = Blue; July 1 = Pink; October 1 = Green)



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BULLETINS INCORPORATED*

BULLETIN NUMBER	DATE ISSUED	CHAPTER	SECTION	CHANGE
MSA 07-47	9/1/07	Nursing Facility - Cost Reporting & Reimbursement Appendix	10.12.H. Facility Innovative Design Supplemental (FIDS) Program (new subsection)	Subsection added to address the Facility Innovative Design Supplemental (FIDS) program for inpatient long-term care facilities.
MSA 07-45	9/1/07	Nursing Facility Coverages	4.1.D.1. Michigan Medicaid Nursing Facility Level of Care Determination	Text added to address Single Point of Entry (Long Term Care Connection) Demonstration Project.
		Hospital	6.5 Home and Community Based Waiver for the Elderly and Disabled (MI Choice Waiver Program) 6.8 Nursing Facility	
MSA 07-43	9/1/07	Children's Special Health Care Services	11.1 In-State Travel 11.2 Out of State Travel 11.3 Travel Reimbursement Process for CSHCS Only Clients	Modifications made to text to clarify CSHCS travel assistance reimbursement process.
MSA 07-42	8/2/07	Nursing Facility - Cost Reporting & Reimbursement Appendix	Section 3 - Definitions 10.7.A. Class I and Class III Nursing Facilities	Definition added for "Restricted Revenue". Language added to address Quality Assurance Supplement Reduction.
MSA 07-35	7/1/07	Nursing Facility - Cost Reporting & Reimbursement Appendix	10.12.H. Facility Innovative Design Supplemental (FIDS) (new subsection)	Subsection added to address the Facility Innovative Design Supplemental (FIDS) program for inpatient long-term care facilities.

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BULLETINS INCORPORATED*

BULLETIN NUMBER	DATE ISSUED	CHAPTER	SECTION	CHANGE
MSA 07-36	6/29/07	Nursing Facilities - Coverages	9.26.C. Return of Unused Drugs (new subsection)	Addition of subsection to address return of unused drugs to pharmacy.
MSA 07-11	2/15/07	Private Duty Nursing	1.1 Enrollment Requirements	Updating of PDN agency accreditation requirements.

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Supplemental Bulletin List

The following is a list of Medicaid policy bulletins that supplement the *January 2007* electronic Medicaid Provider Manual. The list will be updated as additional policy bulletins are issued. The updated list will be posted on the MDCH website along with the Medicaid Provider Manual.

Providers affected by a bulletin should retain it until it is incorporated into the quarterly update of the online version of the manual unless instructed otherwise. Providers utilizing the CD version of the manual should retain bulletins until the next CD version is issued.

DATE ISSUED	BULLETIN NUMBER	TOPIC	AFFECTED PROVIDERS	DATE IN ONLINE MANUAL/COMMENTS
12/1/07	MSA 07-63	January 1, 2008 HCPCS Procedure Code Updates; New Coverage of Existing HCPCS Codes	All Providers	
12/1/07	MSA 07-62	Quality Assurance Assessment Program (QAAP) Collections	Nursing Facilities, County Medical Care Facilities, Hospital Long Term Care Units, Ventilator Dependent Units, Hospice	
12/1/07	MSA 07-61	Reporting National Drug Codes by Outpatient Hospitals	Hospitals, Home Health Agencies	1/1/08 Information incorporated into the Billing & Reimbursement for Institutional Providers Chapter.
12/1/07	MSA 07-60	Graduate Medical Education (GME) and Disproportionate Share Hospital (DSH) Payment Delays	Hospitals	
11/8/07	MSA 07-59	Beneficiary Identification Numbers	All Providers	Obsoletes bulletin MSA 07-54
11/1/07	MSA 07-58	Home Help Services in the Workplace	Michigan Quality Community Care Council	



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DATE ISSUED	BULLETIN NUMBER	TOPIC	AFFECTED PROVIDERS	DATE IN ONLINE MANUAL/COMMENTS
10/1/07	MSA 07-57	Revised Dental Prior Authorization Form (MSA-1680-B)	Dentists, Dental Clinics	1/1/08 Information incorporated into the Forms Appendix. Form updated on website at www.michigan.gov/medicaidproviders >> Medicaid Provider Forms and Other Resources
10/1/07	MSA 07-56	Delayed Implementation and Clarification of Tamper Resistant Prescription Pad Requirement; NPI Pharmacy Compliance Plan	Pharmacies, Practitioners (Physicians, Advanced Practice Nurses, Medical Clinics, Oral Surgeons, Podiatrists, FQHCs/RHCs/THCs), Dentists, Vision, Local Health Departments, Family Planning Clinics, Hospitals, Hospice, Medical Suppliers, Nursing Facilities, Prepaid Inpatient Health Plans, Medicaid Health Plans, Community Mental Health Services Programs and Substance Abuse Coordinating Agencies	1/1/08 Information addressed in the Hospital, Pharmacy, and Practitioner Chapters.
10/1/07	MSA 07-55	Refill Restriction for Narcotic Analgesics	Pharmacies, Practitioners (Physicians, Advanced Practice Nurses, Medical Clinics, Oral Surgeons, Podiatrists, FQHCs/RHCs/THCs), Dentists, Vision, Hospitals, Hospice, Prepaid Inpatient Health Plans, Medicaid Health Plans, Community Mental Health Services Program Clinics and Substance Abuse Coordinating Agencies	1/1/08 Information incorporated into the Pharmacy Chapter.
10/1/07	MSA 07-54	Beneficiary ID Numbers	All Providers	Obsoleted by Bulletin MSA 07-59
10/1/07	MSA 07-53	Revision of Ambulance Base Rate Billing Policy	Ambulance, Hospitals, Medicaid Health Plans	1/1/08 Information incorporated into the Ambulance Chapter.



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DATE ISSUED	BULLETIN NUMBER	TOPIC	AFFECTED PROVIDERS	DATE IN ONLINE MANUAL/COMMENTS
9/1/07	MSA 07-52	Revisions to the Mental Health and Substance Abuse Chapter	Prepaid Inpatient Health Plans	1/1/08 Information incorporated into the Mental Health/Substance Abuse Chapter.
9/1/07	MSA 07-51	Clarification on Use of Tamper Resistant Prescription Pads	Pharmacies, Practitioners (Physicians, Advanced Practice Nurses, Medical Clinics, Oral Surgeons, Podiatrists, FQHCs/RHCs/THCs), Dentists, Vision, Local Health Departments, Family Planning Clinics, Hospitals, Medical Suppliers, Nursing Facilities, Prepaid Inpatient Health Plans, Medicaid Health Plans, Community Mental Health Services Programs and Substance Abuse Coordinating Agencies	Implementation delayed by Bulletin MSA 07-56
9/1/07	MSA 07-50	Updates to the Medicaid Provider Manual	All Providers	10/1/07 Information incorporated as noted into the Michigan Medicaid Provider Manual.
9/1/07	MSA 07-49	Sanctioned Providers Update	All Providers	Information incorporated into the MDCH website at www.michigan.gov/medicaidproviders >> List of Sanctioned Providers
9/1/07	MSA 07-48	MDCH NPI Implementation with End of Contingency Plan; MDCH NPI Reporting Requirements for Ambulance Service Claims; NPI Pharmacy Compliance Plan; Revised MDCH NPI Edits for Primary and Secondary Provider Fields; Electronic 835 and MDCH Paper Remittance Advice; Verification of Beneficiary Eligibility	All Providers	10/1/07 Information incorporated throughout the Manual and into the MDCH website at www.michigan.gov/mdch



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Supplemental Bulletin List

DATE ISSUED	BULLETIN NUMBER	TOPIC	AFFECTED PROVIDERS	DATE IN ONLINE MANUAL/COMMENTS
9/1/07	MSA 07-47	Facility Innovative Design Supplemental (FIDS) Program for Inpatient Long Term Care Facilities	Nursing Facilities, County Medical Care Facilities, Hospital Long Term Care Units, Hospice	1/1/08 Information incorporated into the Cost Reporting & Reimbursement Appendix of the Nursing Facility Chapter.
9/1/07	MSA 07-46	Managed Care Documentation for Full Cost Reimbursement Reconciliation Reports	Federally Qualified Health Centers, Rural Health Clinics	10/1/07 Information incorporated into the Federally Qualified Health Centers and the Rural Health Clinics Chapters.
9/1/07	MSA 07-45	Single Point of Entry (Long Term Care Connection) Demonstration Project	Hospice, Hospitals, Medicaid Health Plans, Mental Health/Substance Abuse (Prepaid Inpatient Health Plans and Coordinating Agencies), Nursing Facilities, Program of All Inclusive Care for the Elderly (PACE), MI Choice Waiver, Local Health Departments, Area Agencies on Aging	1/1/08 Information incorporated into the Nursing Facility Coverages and the Hospital Chapters.
9/1/07	MSA 07-44	CSHCS Application for Insurance Premium Payment	Local Health Departments, CSHCS Liaisons	10/1/07 Information incorporated into the Children's Special Health Care Services Chapter and the Forms Appendix.
9/1/07	MSA 07-43	CSHCS Travel Assistance Reimbursement Process	Local Health Departments, CSHCS Liaisons	1/1/08 Information incorporated into the Children's Special Health Care Services Chapter.
8/2/07	MSA 07-42	Quality Assurance Supplement Reduction	Nursing Facilities	1/1/08 Information incorporated into the Cost Reporting & Reimbursement Appendix of the Nursing Facility Chapter.
7/25/07	MSA 07-41	Outpatient Prospective Payment System Reduction Factor	Hospitals, Hospital-Owned Ambulance, Comprehensive Outpatient Rehabilitation Facilities, Rehab Agencies, Freestanding Dialysis Centers, Medicaid Health Plans, County Health Plans	10/1/07 Information incorporated into the MDCH website at www.michigan.gov/medicaidproviders >> Provider Specific Information



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DATE ISSUED	BULLETIN NUMBER	TOPIC	AFFECTED PROVIDERS	DATE IN ONLINE MANUAL/COMMENTS
7/25/07	MSA 07-40	Tamper Resistant Prescription Pads	Pharmacies, Practitioners (Physicians, Advanced Practice Nurses, Medical Clinics, Oral Surgeons, Podiatrists, FOHCs/RHCs/THCs), Dentists, Vision, Local Health Departments, Family Planning Clinics, Hospitals, Prepaid Inpatient Health Plans, Medicaid Health Plans, Community Mental Health Services Programs and Substance Abuse Coordinating Agencies	10/1/07 Information incorporated into the Practitioners Chapter and the Pharmacy Chapter.
7/18/07	MSA 07-39	Inpatient Hospital Payment Reduction	Hospitals	10/1/07 Information incorporated into the Hospital Chapter/Hospital Reimbursement Appendix and the MDCH website at www.michigan.gov/medicaidproviders >> Provider Specific Information
7/07	MSA 07-38	Sanctioned Providers Update	All Providers	Information incorporated into the MDCH website at www.michigan.gov/medicaidproviders >> List of Sanctioned Providers
7/1/07	MSA 07-35	FIDS Program for Inpatient Long Term Care Facilities	Nursing Facilities (County Medical Care Facilities), Hospice	1/1/08 Information incorporated into the Cost Reporting & Reimbursement Appendix of the Nursing Facility Chapter.
6/29/07	MSA 07-37	MOMS Guarantee of Payment Letter (DCH-1164) and E-application Update	Local Health Departments, Federally Qualified Health Centers, Medicaid Health Plans, Practitioners (Medical Clinics, MDs, DOs, CNMs, FNPs), Family Planning Clinics, Rural Health Clinics, Tribal Health Centers	



Supplemental Bulletin List

DATE ISSUED	BULLETIN NUMBER	TOPIC	AFFECTED PROVIDERS	DATE IN ONLINE MANUAL/COMMENTS
6/29/07	MSA 07-36	Nursing Facility Return of Unused Drugs	Nursing Facilities (County Medical Care Facilities, Hospital Long Term Care Units, Hospital Swing Beds, Ventilator Dependent Units, Nursing Facilities for the Mentally III), Pharmacies	1/1/08 Information incorporated into the Nursing Facility Coverages Chapter.
6/29/07	MSA 07-32	Elimination of the Long Term Care Eligibility List - Report Number FM-160	Nursing Facilities (County Medical Care Facilities, Hospital Long Term Care Units, Hospital Swing Beds, Ventilator Dependent Units, Nursing Facilities for the Mentally III)	10/1/07 Information incorporated into the Beneficiary Eligibility Chapter and the Directory Appendix.
6/22/07	MSA 07-34	Medicaid Health Plan Rate Development and Certification	Medicaid Health Plans	10/1/07 Information incorporated into the Medicaid Health Plans Chapter.
6/15/07	MSA 07-33	Reporting National Drug Codes for Physician Administered Drugs on Electronic and Paper Formats	Practitioners (Physicians, Advanced Practice Nurses, Medical Clinics, Oral Surgeons, Podiatrists, FQHCs/RHCs/THCs), Medical Suppliers, Local Health Departments, Family Planning Clinics, Hospitals, Prepaid Inpatient Health Plans, Community Mental Health Services Programs and Substance Abuse Coordinating Agencies	10/1/07 Information incorporated into the Billing & Reimbursement for Professionals and the Billing & Reimbursement for Institutional Providers Chapters.
6/01/07	MSA 07-31	Updates to the Medicaid Provider Manual	All Providers	7/1/07 Information incorporated as noted into the Medicaid Provider Manual.
6/01/07	MSA 07-29	HCPCS Procedure Code Update	Practitioners (Physicians, Advanced Practice Nurses, Medical Clinics, FQHCs/RHCs/THCs), Hospitals, Local Health Departments, Medicaid Health Plans, Prepaid Inpatient Health Plans, Community Metal Health Services Programs and Substance Abuse Coordinating Agencies	7/1/07 Information incorporated in the Procedure Code Database on the website at www.michigan.gov/medicaidproviders >> Provider Specific Information



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6/01/07	MSA 07-28	Change in Warrant Issue Date; New Automated Provider Enrollment System	All Providers	This bulletin can be discarded after review.
6/1/07	MSA 07-24	Changes to CSHCS Application and Payment Agreement Policy	Local Health Departments	7/1/07 Information incorporated into the Children's Special Health Care Services Chapter.
5/29/07	MSA 07-30	FY 07 Fee Reductions	All Providers	This bulletin can be discarded after review.
5/15/07	MSA 07-27	Automatic Refills of Medical Supplies	Medical Suppliers	7/1/07 Information incorporated into the Medical Suppliers Chapter.
5/15/07	MSA 07-26	Social Worker Licensure	Ambulance, Family Planning Clinics, FQHCs, Hospice, Hospitals, Local Health Departments, Medicaid Health Plans, Mental Health/Substance Abuse, MIHP, Practitioners, RHCs, School Based Services, Tribal Health Centers	7/1/07 Information incorporated as appropriate throughout the Manual.
5/07	MSA 07-25	Clarification of Reimbursement for Services by Out of State/Beyond Borderland Providers	All Providers	7/1/07 Information incorporated into the General Information for Providers Chapter.
5/1/07	MSA 07-23	FY 07 Fee Reductions	All Providers	Bulletin rescinded by MSA 07-30



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DATE ISSUED	BULLETIN NUMBER	TOPIC	AFFECTED PROVIDERS	DATE IN ONLINE MANUAL/COMMENTS
4/25/07	MSA 07-22	MDCH Contingency Plan for NPI Implementation; New MDCH Edits for Validating NPI; B2B Testing Process for NPI; NPI Pharmacy Compliance Plan; Verification of Beneficiary Eligibility	All Providers	7/1/07 Information incorporated into the Billing & Reimbursement for Dental Providers, the Billing & Reimbursement for Professionals, and the Billing & Reimbursement for Institutional Providers Chapters. 10/1/07 Information incorporated into the Pharmacy, Practitioner, and Hospital Chapters.
4/07	MSA 07-21	Sanctioned Providers Update	All Providers	Information incorporated into the MDCH website at www.michigan.gov/medicaidproviders >> List of Sanctioned Providers
4/07	MSA 07-20	Policy for Hospitals to Order Diapers Under the Volume Purchase Contract for Fee For Service Beneficiaries Prior to Discharge	Hospitals	7/1/07 Information incorporated into the Hospital Chapter.
3/30/07	MSA 07-19	Incorrect Fax Number for the Program Review Division Issued Under Bulletin MSA 07-11	Private Duty Nursing	Correct information reflected in the Directory Appendix of the Manual.



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3/28/07	MSA 07-18	Implementation Delay of the CMS 1500 (08/05) Paper Claim Form	Practitioners (Physicians, Advanced Practice Nurses, Physical Therapists, Medical Clinics, FOHC/RHC/THC, Oral Surgeons, Podiatrists, CRNA), Chiropractors, Ambulance, Independent Labs, Medical Suppliers, Orthotists/Prosthetists, Vision, Hearing Centers, Hearing Aid Dealers, Community Mental Health Services Programs, Prepaid Inpatient Health Plans, Family Planning Clinics, Maternal Infant Health Program, Private Duty Nurses (Individually Enrolled), School Based Services, Medicaid Health Plans and Local Health Departments	Content of bulletin time-limited (expired 6/1/07). Bulletin can be discarded.
3/27/07	MSA 07-17	Reporting the NPI with Prescription Orders and Prescription Drug Claims	Pharmacy, Practitioner (Physicians, Advanced Practice Nurses, Medical Clinics, Oral Surgeons, Podiatrists, FOHCs/RHCs/THCs), Hospitals, Hospice, Vision, Dentists, Local Health Departments, Family Planning Clinics, Medicaid Health Plans, Community Mental Health Services Program Clinics and Substance Abuse Coordinating Agencies	7/1/07 Information incorporated into the Pharmacy Chapter.
3/07	MSA 07-16	Sanctioned Providers Update	All Providers	Information incorporated into the MDCH website at www.michigan.gov/medicaidproviders >> List of Sanctioned Providers
3/20/07	MSA 07-15	Multi-Ingredient Compound Drug Claim Submissions	Pharmacy	7/1/07 Information incorporated into the Pharmacy Chapter.
3/01/07	MSA 07-14	Updates to the Medicaid Provider Manual	All Providers	4/1/07 Information incorporated as noted into the Michigan Medicaid Provider Manual.



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3/01/07	MSA 07-13	MDCH Claim Editing for Type of Bill Codes, Implementation of the UB 04, MDCH Clarification of UB 04 Data Elements (including NPI), Guidelines for Submitting Paper Test Claims, and Revisions to the Billing and Reimbursement for Institutional Providers Chapter	Hospitals, Nursing Facilities, Home Health Agencies, Hospice, Outpatient Therapy Providers, Private Duty Nursing Agencies	7/1/07 Information incorporated as appropriate throughout the Manual.
2/16/07	MSA 07-12	Outpatient Prospective Payment System (OPPS) - Financial/Reimbursement	Hospitals, Comprehensive Outpatient Rehabilitation Facilities, Rehab Agencies, Freestanding Dialysis Centers and Hospital-Owned Ambulance (Provider Type 40)	4/1/07 Information incorporated into the Hospital Chapter Reimbursement Appendix and added to the website at www.michigan.gov/medicaidproviders >> Provider Specific Information
2/15/07	MSA 07-11	Private Duty Nursing Accreditation	Private Duty Nursing	1/1/08 Information incorporated into the Private Duty Nursing Chapter.
2/15/07	MSA 07-10	Licensure of Audiologists; Hearing Aid Dealer Enrollment Requirements	Outpatient Hospitals, Audiology Providers, Hearing Aid Dealers, Medicaid Health Plans, Practitioners, School-Based Services, Mental Health/Substance Abuse, Nursing Facilities	4/1/07 Information incorporated into the Hearing Aid Dealers, Hearing Services, Hospital, Mental Health/Substance Abuse, and School Based Services Chapters.



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2/1/07	MSA 07-09	Implementation of the CMS-1500 (Version 08/05); New Claim Completion Instructions (including NPI); Guidelines for Submitting Paper Test Claims; Revisions to the Billing & Reimbursement for Professionals Chapter of the Medicaid Provider Manual	Practitioners (Physicians, Advanced Practice Nurses, Physical Therapists, Medical Clinics, FQHCs/RHCs/THCs, Oral Surgeons, Podiatrists, CRNA), Chiropractors, Ambulance, Independent Labs, Medical Suppliers, Orthotists/Prosthetists, Vision, Hearing Centers, Hearing Aid Dealers, Community Mental Health Services Programs, Prepaid Inpatient Health Plans, Family Planning Clinics, Maternal Infant Health Program, Private Duty Nurses (Individually Enrolled), School Based Services, Medicaid Health Plans, Local Health Departments	4/1/07 Information incorporated into the Billing & Reimbursement for Professionals Chapter.
2/1/07	MSA 07-08	Increase in Cost of Premium for MICHild Enrollment	MICHild Manual Holders, Local Health Departments, MICHild Administrative Contractor (MAXIMUS), MICHild Health and Dental Plans, DHS Central Office	4/1/07 Information incorporated into the Special Programs Chapter of the Michigan Medicaid Provider Manual in addition to inclusion in the MICHild Eligibility Manual.
2/1/07	MSA 07-07	Observation Care Services	Outpatient Hospitals	4/1/07 Information incorporated into the Hospital Chapter.
1/07	MSA 07-06	HCPCS Code and Reimbursement for Incontinent Wipes	Medical Suppliers	4/1/07 Information incorporated into the Medical Supplier Chapter, and added to the Medical Supplier database at www.michigan.gov/medicaidproviders >> Provider Specific Information



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2/1/07	MSA 07-05	Revision of PASARR Forms (DCH-3877 and DCH-3878)	County Medical Care Facilities, Hospice, Hospital Long Term Care Units, Hospital Swing Beds, Inpatient Hospitals, Nursing Facilities, Nursing Facilities for the Mentally III, Ventilator Dependent Units	4/1/07 Information incorporated into the Hospital and the Nursing Facility Coverages Chapters and the Forms Appendix Forms updated on website at www.michigan.gov/medicaidproviders >> Medicaid Provider Forms and Other Resources
1/07	MSA 07-04	Sanctioned Providers Update	All Providers	Information incorporated into the MDCH website at www.michigan.gov/medicaidproviders >> List of Sanctioned Providers
1/1/07	MSA 07-03	Denial of Care or Services for Failure to Pay Co-Payments	All Providers	4/1/07 Information incorporated into the following chapters: General Information for Providers, Chiropractor, Dental, Federally Qualified Health Centers, Hearing Aid Dealers, Hospital, Pharmacy, Practitioner, Rural Health Clinics, Tribal Health Centers, Vision. Information added to the website at www.michigan.gov/medicaidproviders



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DATE ISSUED	BULLETIN NUMBER	TOPIC	AFFECTED PROVIDERS	DATE IN ONLINE MANUAL/COMMENTS
1/1/07	MSA 07-02	Implementation of the ADA 2006 Claim Form; Implementation and Use of National Provider Identifier (NPI) on Claim Form	Dental Clinics, Dentists	4/1/07 Information incorporated into the following chapters: Billing & Reimbursement for Dental Providers, Medicaid Provider Manual Overview, and Directory Appendix. Updated information in the 837 Dental Companion Guide on the website at www.michigan.gov/medicaidproviders >> Electronic Billing
1/07	MSA 07-01	2007 Medicaid Provider Manual	All Providers	Bulletin transmitted with the January 2007 CD version of the Michigan Medicaid Provider Manual. Bulletin can be discarded.
12/28/06	MSA 06-85	Graduate Medical Education (GME) Pools Size Reduction and Adjusted FTEs Methodological Update	Hospitals	4/1/07 Information incorporated into the Hospital Chapter Reimbursement Appendix.
12/06	MSA 06-84	Billing Time Span Revision for Lancets, Blood Glucose Strips, and Calibrator Solution/Chips	Medical Suppliers	4/1/07 Information incorporated into the Medical Supplier Chapter. Information added to the Medical Supplier database at www.michigan.gov/medicaidproviders >> Provider Specific Information
12/15/06	MSA 06-83	Adjustments to Public Physicians	Dentists, Hospitals (Inpatient, Outpatient), Optometrists, Practitioners	7/1/07 Information incorporated into the Practitioners Chapter/Practitioner Reimbursement Appendix.



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12/08/06	MSA 06-82	Outpatient Prospective Payment System (OPPS) and Hospital-Owned Ambulance Services	Outpatient Hospitals	4/1/07 Information incorporated into the following chapters: Billing & Reimbursement for Institutional Providers, Ambulance, and Hospital. Information added to the website at www.michigan.gov/medicaidproviders >> Provider Specific Information
12/01/06	MSA 06-81	January 1, 2007 Procedure Code Updates; New Coverage of Existing HCPCS Code 76514	Ambulance, Chiropractor, Community Mental Health Services Programs and Substance Abuse Coordinating Agencies, Dental Clinics, Dentists, Family Planning Clinics, Hearing Centers, Hospitals, Laboratory, Local Health Departments, Medicaid Health Plans, Medical Suppliers, Nursing Facilities, Orthotists, Practitioners (Physicians, Advanced Practice Nurses, Physical Therapists, Medical Clinics, FQHCs/RHCs/THCs, Oral Surgeons, Podiatrists), Prepaid Inpatient Health Plans, Private Duty Nursing, Prosthetists, Vision	Information added to January 2007 databases at www.michigan.gov/medicaidproviders >> Provider Specific Information
12/01/06	MSA 06-80	DRG Grouper, DRG Rate, and Per Diem Rate Updates	Hospitals, Medicaid Health Plans	4/1/07 Information incorporated into the Hospital Chapter Reimbursement Appendix. Information added to databases at www.michigan.gov/medicaidproviders >> Provider Specific Information >> Hospital DRG Groupers
10/06	MSA 06-74	Sanctioned Provider List	All Providers	The list is available on the MDCH website at www.michigan.gov/medicaidproviders >> List of Sanctioned Providers



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10/16/06	MSA 06-73	NPI Transition Plans for Medicaid FFS Providers; Reporting Type of Bill Codes, Taxonomy Codes, and 9-Digit Zip Codes; 835 Remittance Advice and NPI	All Providers	
07/01/06	MSA 06-47	Outpatient Prospective Payment System	Hospitals, Comprehensive Outpatient Rehabilitation Facilities, Rehab Agencies and Freestanding Dialysis Centers	4/1/07 Information incorporated into the following chapters: Billing & Reimbursement for Institutional Providers, Hospital, Laboratory, Outpatient Therapy, Acronym Appendix, Directory Appendix, Glossary. Additional information is available on the MDCH website at www.michigan.gov/medicaidproviders