

Bulletin Number: MSA 10-42

Distribution: All Providers

Issued: October 1, 2010

Subject: Enrollment of Foster Care Children in Medicaid Health Plans and Clarification of Pharmacist Administration of the Seasonal Influenza Vaccine

Effective: November 1, 2010

Programs Affected: Medicaid

Enrollment of Foster Care Children in Medicaid Health Plans

Effective November 1, 2010, most categories of foster care children will transition from an excluded population to a mandatory population for purposes of Medicaid Health Plan (MHP) enrollment. Foster care children residing in detention facilities, child care institutions, or out-of-state placements will remain an excluded segment of this population and will not be transitioned to mandatory enrollment.

Upon enrollment in an MHP, the foster care child will have access to the full range of services covered by the MHP. Providers must verify eligibility prior to providing services in order to confirm the foster care child's eligibility and enrollment status. If the foster care child is enrolled in an MHP, prior authorization requirements may apply. Providers must submit claims for MHP covered services to the MHP. Section 1 of the Medicaid Health Plan Chapter of the Medicaid Provider Manual specifies the services covered by MHPs.

Clarification of Pharmacist Administration of the Seasonal Influenza Vaccine

If a beneficiary is enrolled in an MHP or County Health Plan (CHP), the health plan is responsible for coverage of the seasonal influenza vaccine ingredient cost and administration. MHPs and CHPs may allow this service to be performed at a pharmacy. However, neither MHPs nor CHPs are required to cover this service when provided in a pharmacy setting.

Bulletin MSA 10-33 states that language will be added to Section 1.1 of the Medicaid Health Plan Chapter in the October 1, 2010 Medicaid Provider Manual, regarding pharmacy administration of immunizations. As a result of this clarification, the language identified in bulletin MSA 10-33 (bulletin incorporation attachment) will not be included in the Medicaid Provider Manual.

Public Comment

The public comment portion of the policy promulgation process is being conducted concurrently with the implementation of the change noted in this bulletin. Any interested party wishing to comment on the change may do so by submitting comments in writing to:

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Michigan Department of Community Health
Medical Services Administration
P.O. Box 30479
Lansing, Michigan 48909-7979
Or
E-mail: buppc@michigan.gov

If responding by e-mail, please include "Foster Care MHP Enrollment Policy" in the subject line. Comments received will be considered for revisions to the bulletin.

Manual Maintenance

Retain this bulletin until the information has been incorporated into the Michigan 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



Stephen Fitton, Director
Medical Services Administration