

Durable Medical Equipment & Supplies Medicaid Provider Liaison Meeting

Capitol Commons Center
Monday, March 16, 2015
1:00 p.m. – 3:00 p.m.

MINUTES

Welcome and Introductions

The meeting opened with a welcome and introductions of Michigan Department of Community Health (MDCH) staff and participants.

Third Party Liability

MDCH staff from the Third Party Liability (TPL) Division provided a presentation and skit regarding all of the facets of TPL functions of recovery, including Casualty, Buy-in, Estate Recovery and Mass Tort. Providers were encouraged to report any other insurance to the TPL Division.

Staff clarified that updated Blue Cross Blue Shield of Michigan (BCBS) files are sent to TPL on a monthly basis.

Healthy Michigan Plan

Healthy Michigan Plan Policy staff provided an overview of the program, eligibility and statistics. Since April 2014, over 580,000 people have enrolled in the Healthy Michigan Plan. Of that group over 80% of beneficiaries have incomes below 100% of the Federal Poverty Level (FPL). Three quarters of the enrollees are in Healthy Michigan Managed Care plans. Healthy Michigan Plan members with cost-sharing obligations have been compliant thus far. Additional information about the Healthy Michigan Plan can be found on the MDCH website at www.michigan.gov/healthymichiganplan.

Bulletins MSA 14-60 & MSA 14-66

MSA 14-60 was issued December 1, 2014, and discusses expanded Medicaid coverage for breast pumps. Many of the participants indicated that they have been supplying the breast pumps and were happy that Medicaid finally expanded coverage.

MSA 14-66 was issued December 29, 2014, and discusses removing Medicaid and Healthy Michigan Plan beneficiaries with a diagnosis of inherited diseases of metabolism who receive metabolic formula from their Medicaid Health Plan (MHP) and transitioning them to Fee-for-Service (FFS) Medicaid. The policy also establishes payment guidelines for enteral nutrition.

Complex Rehab Benefit Category

Barry Cargill, Executive Director of the Michigan Association for Home Care provided an update on the Complex Rehab Benefit Category workgroup. Barry summarized the work of the group and that MDCH acknowledges the existence of complex rehab equipment through current policy. The Complex Rehab workgroup will meet on March 27, 2015 to discuss and submit recommendations to MDCH to further clarify current policy.

Medicaid Code and Rate Reference Tool

Staff informed participants of changes to the Medicaid database and implementation of the Medicaid Code and Rate Reference tool in the Community Health Automated Medicaid Processing System (CHAMPS), which gives providers access to coding and rate information.

Other Issues

A participant inquired about the recent changes to blood glucose testing supply policy outlined in bulletin MSA 14-44, requesting that MDCH provide a chart of diagnoses that reference insulin use. In response, staff indicated that MDCH will not be providing such a list, as it is the responsibility of the physician or non-physician practitioner to use the appropriate diagnosis codes.

In response to a participant question, MDCH staff indicated that fee screens are updated quarterly.

A suggestion was made for MDCH to provide examples of Prior Authorization request documentation issues. This will be included at the next meeting.

Next Steps

Next meeting: Monday, June 15, 2015 1:00 - 3:00PM CCC Lower Level Conf. E&F

Please be sure to sign-in upon arrival and provide your email address for electronic notification of future meetings, including minutes from this meeting.