

July 2013

<Provider Name>
<Provider Address1>
<Provider Address2>
<Provider City> <state> <zipcode5-zip4>

Dear Provider:

RE: MICHild Health Plan Transition

The Michigan Department of Community Health (MDCH) is working to transition the MICHild enrollees currently in Blue Cross Blue Shield of Michigan to other MICHild Health Plans. In all cases but one, these MICHild Health Plans are also currently contracted Medicaid Health Plans. This transition will begin in July for new and renewing MICHild enrollees. For current Blue Cross Blue Shield of Michigan MICHild enrollees, the transition will begin on October 1, 2013. The new model will streamline and coordinate administration and oversight of the MICHild and Medicaid government programs.

Currently, eight Medicaid Health Plans are also MICHild Health Plans. Under the new model, MDCH will contract with additional Medicaid Health Plans who are interested in providing medical coverage to MICHild enrollees. The process for these Medicaid Health Plans to become approved as MICHild plans is currently underway. Once the new plans are approved for MICHild, MDCH will provide county-by-county details.

The State of Michigan is partnering with Blue Cross Blue Shield of Michigan and the other health plans to ensure a smooth transition. Providers are encouraged to participate with the existing and new MICHild Health Plans. To continue to serve patients who are MICHild enrollees, providers will need to contract with or establish a relationship with the MICHild Health Plans.

MICHild Health Plans expanding their network and Medicaid Health Plans who are becoming MICHild Health Plans will be reaching out to the provider community with contract details as they seek to enhance and develop their coverage networks. MDCH strongly encourages providers to work with the MICHild Health Plans to ensure a smooth transition for MICHild enrollees. MDCH has now developed draft MICHild medical rates for October 1, 2013, which are substantially higher than the Medicaid rates currently paid to the Plans for these enrollees. MDCH strongly encourages providers to work with the MICHild Health Plans to ensure a smooth transition for MICHild enrollees.

Enclosed, please find a Frequently Asked Questions document that provides additional details regarding this transition. If you have questions about the MICHild program or this transition, please contact the Medical Services Administration Provider Support at 1-800-292-2550.

Sincerely,



Stephen Fitton, Director
Medical Services Administration

enclosure

MIChild Transition Frequently Asked Questions (FAQ)

When will this transition take place?

The transition for medical coverage will begin October 1, 2013, in those counties where there is a choice of at least two health plans other than Blue Cross Blue Shield of Michigan. Michigan has been approved by the Centers for Medicare and Medicaid Services (CMS) to have only one plan in rural counties where adequate provider choice can be documented. Currently, the counties that MDCH is certain will transition on October 1, 2013 include Genesee, Kent, Livingston, Macomb, Oakland, Washtenaw, Wayne, and all counties in the Upper Peninsula. Plans are currently working on either becoming a MIChild Health Plan or enhancing their provider networks to expand into additional counties to assure plan choice and health care coverage for the MIChild enrollees. This process requires review and approval by the Department of Insurance and Financial Services. These processes will take an indeterminate amount of time. As a result, Blue Cross Blue Shield of Michigan will continue beyond October 1, 2013, in several counties until such time plan choice (or adequate provider choice in rural areas) is available.

The transition for dental coverage will follow a similar time line, but final decisions regarding alternate dental plans are still under development.

When will providers know which plans are available in which county?

This transition will take place over the next several months. Additional health plans are currently applying to become new MIChild Health Plans. MDCH will post county specific lists as new plans are approved to provide MIChild medical and dental coverage. Please visit www.michigan.gov/michild for the most up to date information. The following health plans are currently providing medical coverage in some counties: Priority Health, Molina Healthcare, Grand Valley Health Plan, United Healthcare, HealthPlus of Michigan, CoventryCares, Midwest Health Plan, Total Health Care, and Upper Peninsula Health Plan.

Delta Dental is available statewide and Golden Dental is available in some counties.

To provide services to MIChild enrollees, must providers have a contract with a MIChild Health Plan?

In most cases, the answer is yes. However, for some specialized medical services, out-of-network arrangements may be made with the MIChild Health Plan.

What should I tell my patients that have MIChild?

Enrollees will receive communication from the MIChild program when it is time to choose a plan. You should tell them what plan(s) you participate with (or plan to participate with) to assist them in their decision making.

How will this impact families that have MIChild and Children's Special Health Care Services (CSHCS)?

Currently, all individuals that have both MIChild and CSHCS are automatically enrolled into Blue Cross Blue Shield of Michigan. Due to this transition, the CSHCS/MICHild enrollees must choose a different plan. The MIChild plans that are also Medicaid Health Plans currently serve the CSHCS/Medicaid population and are prepared to serve CSHCS/MICHild enrollees. CSHCS/MICHild enrollees will be notified when it is time to select a new plan. If you serve the CSHCS/MICHild population it is very important that you communicate which plans you participate or plan to participate with to help ensure continuity of care.

Will the MIChild benefit change?

The MIChild benefit package will remain unchanged.

MIChild Transition Frequently Asked Questions (FAQ)

How will the MHPs pay out-of-network providers?

MDCH is creating a MICHild-specific fee schedule similar to the Medicaid FFS fee schedule. The health plans will be required to use this fee schedule when paying for out-of-network services.

Will there be any changes to dental coverage for MICHild members?

Yes. Blue Cross Blue Shield of Michigan will no longer be a MICHild Dental Plan effective October 1, 2013. Current dental enrollees will be transitioned in a similar manner as the medical enrollees to other MICHild dental plans. Dental providers will receive a specific letter regarding the details of the dental transition.

Will there be any changes to vision coverage for MICHild members?

Vision coverage remains a MICHild benefit. Contact the MICHild Health Plan for more information about the vision vendor with which they contract (it may be different plan to plan).

I am treating a MICHild member who is expecting a baby. Can I continue to provide her with prenatal care? Will my services for delivery and postnatal care be covered?

Prenatal care, labor, delivery and postnatal care remain MICHild covered benefits. Contact the MICHild Health Plan to become a contracted provider. If you do not wish to contract with the MICHild Health Plan, you may continue to serve the enrollee and the MICHild Health Plan is required to pay you for the services out-of-network without prior authorization through the postnatal period since care was already established.

I have questions and want to contact the MICHild program. Where can I call?

Providers can contact Provider Support at 1-800-292-2550 or ProviderSupport@michigan.gov to receive answers to questions regarding the MICHild program and this transition. Additional information is also available on the MDCH MICHild website at www.michigan.gov/michild.