

July 15, 2014

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

Dear Provider:

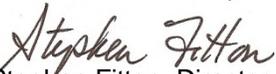
RE: Preadmission Diagnostic Services – Three Day Payment Window – Outpatient Services Treated as Inpatient Services

The purpose of this letter is to notify providers that as of May 30, 2014, the Community Health Automated Medicaid Processing System (CHAMPS) implemented edits to ensure that claims are processed in alignment with Michigan Department of Community Health (MDCH) Bulletin MSA 10-60 which can be found at www.michigan.gov/medicaidproviders >> Policy and Forms. These edits do not apply to claims for ambulance providers, free standing dialysis centers or inpatient rehabilitation hospitals.

Bulletin MSA 10-60, issued December 1, 2010, states that effective for dates of service on and after January 1, 2011, MDCH follows Medicare's policy (with a few exceptions) for all preadmission diagnostic services and other preadmission services. All non-diagnostic services rendered in the three day payment window prior to the inpatient hospital admission may not be billed separately and must be bundled into the inpatient stay, unless the hospital can document they are unrelated services. MDCH may initiate outpatient hospital claim voids to recover paid claims that were not processed in compliance with Bulletin MSA 10-60.

Thank you for your continued participation in the Michigan Medicaid Program and your commitment to providing quality care to Michigan's citizens. Any questions regarding this letter can be directed to Provider Support at ProviderSupport@michigan.gov.

Sincerely,


Stephen Fitton, Director
Medical Services Administration