

Michigan Department of Community Health

Bulletin Number: MSA 11-29

Distribution: Maternal Infant Health Program Providers, Medicaid Health Plans

Issued: August 1, 2011

Subject: Service Changes for the Maternal Infant Health Program

Effective: September 1, 2011

Programs Affected: Medicaid, Maternity Outpatient Medical Services (MOMS)

The Maternal Infant Health Program (MIHP) is a statewide program that promotes healthy pregnancies, positive birth outcomes, and healthy infant growth and development. In an effort to further promote improved maternal and infant health outcomes, the Michigan Department of Community Health (MDCH) is clarifying current policy related to the infant risk identifier visit process and changing policy related to maternal visit frequency.

Risk Identifier Assessment Visit

In cases of multiple births, each infant needs to have a separate risk identifier assessment visit completed and entered into the electronic MIHP system. In the case where a foster care mother has two infants in the same home, there also needs to be a separate risk identifier assessment visit done for each infant. These separate risk identifier visits can be billed separately under each individual infant Medicaid identification number (ID).

Subsequent professional visits will be billed under each infant ID if the infants are from different families. If the infants are siblings, then the visits will be blended visits. Blended visits can only be billed under one Medicaid ID.

An infant case and a maternal case can both be open at the same time. The appropriate risk identifier assessment visit should be completed and entered into the database. If the MIHP is seeing an infant and the mother becomes pregnant, a maternal risk identifier assessment visit should be completed and services started. Transportation to the mother's appointments would be billed under the mother's Medicaid ID. If the appointment is for both the mother and infant, the transportation should be billed under one Medicaid ID. After the initial risk identifier assessment visit is completed, all professional visits should be blended visits and billed under one Medicaid ID.

An MIHP provider may complete and bill an infant risk identifier visit separate from a maternal postpartum professional visit. A maternal postpartum professional visit may be made on the same date of service as the infant risk identifier visit. Providers must document why both visits need to be done on the same date of service. The maternal visit must be a minimum of 30 minutes and be reflected in the professional note. After the risk identifier assessment visit has been completed, all subsequent professional visits should be blended visits. See the Medicaid Provider Manual for more information on professional and assessment visits.

Additional Maternal Visits

To better serve the pregnant Medicaid woman, occasionally there is a need for additional professional visits above and beyond the original nine maternal visits. To accommodate these situations, additional maternal visits can be requested by the MIHP provider. Requests can be sent by e-mail, fax or mail to the MIHP consultants. Providers must clearly state why additional visits are necessary. MDCH will authorize or deny additional visits. MIHP providers must keep a copy of the authorization for additional visits in the maternal chart.

Database

Information regarding fee screens and current coding configuration is located in the MIHP database on the Michigan Department of Community Health website at: www.michigan.gov/medicaidproviders >> Billing and Reimbursement >> Provider Specific Information >> Maternal Infant Health Program.

Manual Maintenance

Retain this bulletin until applicable 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
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