

## **Durable Medical Equipment and Supplies Medicaid Provider Liaison Meeting**

Capitol Commons Center  
Wednesday, September 25, 2019  
1:00 p.m. – 3:00 p.m.

### **MINUTES**

#### **Welcome and Introductions**

Cindy Linn opened the meeting and introductions were made.

#### **Healthy Michigan Plan Updates**

Jackie Prokop provided an update on changes to the Healthy Michigan Plan (HMP) that will take place in 2020.

#### **48-Month Cumulative Enrollment Changes**

The Michigan Department of Health and Human Services (MDHHS) is delaying the implementation of the 48-month cumulative enrollment changes from January 1, 2020 to October 1, 2020. HMP beneficiaries who have incomes above 100% of the federal poverty level (FPL) and have been enrolled in the program for 48 cumulative months must engage in a healthy behavior and pay 5% of their income toward cost-sharing as a condition of continued enrollment in HMP.

#### **Workforce Engagement Requirements**

Beginning January 1, 2020, all HMP beneficiaries between 19 and 62 years of age who do not meet exemption criteria must report at least 80 hours per month of work or other qualifying activities as a condition of continued enrollment in HMP. MDHHS will accept a beneficiary's self-attestation to meeting an exemption or to completing work requirements, however, MDHHS will be conducting a compliance review afterwards on a sample of the population each month. Staff provided an overview of the work activities, exemptions and how these changes will be implemented.

MDHHS staff discussed the definition of medically frail and how a beneficiary could attest to being medically frail. Meeting attendees were encouraged to contact MDHHS at [healthymichiganplan@michigan.gov](mailto:healthymichiganplan@michigan.gov) with questions related to HMP and the work requirements.

In September 2019, MDHHS began mailing letters to beneficiaries who are identified as being subject to the workforce engagement requirements with information on reporting requirements and how to report an exemption, if applicable. MDHHS also began mailing letters to beneficiaries who had an exemption identified in the system. They received information related to work requirements, but were informed that they were exempt or excused from having to report.

MDHHS staff are continuing to conduct webinars to present information about the work requirements to stakeholders and will also hold in-person forums at various locations throughout the state. Additional information about the upcoming changes to the HMP program are available on the MDHHS website at [www.michigan.gov/healthymichiganplan](http://www.michigan.gov/healthymichiganplan) >> Changes Coming in 2020.

### **Submitting Documentation with the MSA-1656**

Program Review Division staff reminded meeting attendees to ensure that all documentation is complete when submitting an MSA-1656. Incomplete documentation will result in a denial of prior authorization and require the provider to re-submit. MDHHS staff and meeting attendees continued to discuss the prior authorization process at length.

### **CURES Act Updates**

Lisa Trumbell provided an update on the implementation of the 21<sup>st</sup> Century CURES Act, which requires that for certain codes, Medicaid aggregate expenditures may not exceed Medicare aggregate expenditures for those same codes. As part of the implementation process, MDHHS compiled a Medicaid expenditure report for the codes affected by the CURES act and found that the aggregate amount was \$300,000 below Medicare expenditures. If the aggregate Medicaid expenditures exceed those of Medicare, the department must repay the balance of the federal match amount, which would be passed on to providers. In response to the findings of the report, MDHHS will make rate adjustments to ensure continued compliance with the CURES act pending approval of the FY20 budget.

### **Proposed Policy 1921-DMEPOS**

Meeting attendees were provided with copies of proposed policy 1921-DMEPOS – Documentation Revisions for Home Oxygen Therapy, and the document was discussed. The policy was developed to clarify documentation requirements for home oxygen therapy in response to the many questions that have been received from the provider community on the issue. Ms. Trumbell indicated that the policy is currently in draft form and will be issued as a final bulletin at a later date. The public comment period closed on September 9, 2019, but providers may submit any additional questions on the policy to Provider Support at 800-292-2550, or [ProviderSupport@michigan.gov](mailto:ProviderSupport@michigan.gov).

### **Glucose Monitors**

Lisa Trumbell provided an update on the implementation of bulletin MSA 19-04 – Continuous Glucose Monitoring Systems (CGMS), which was effective April 1, 2019. In response to issues identified with prior authorization requests that the department has received for CGMS, meeting attendees were reminded to ensure that correct coding is used when submitting a prior authorization request (e.g., therapeutic vs. non-therapeutic CGMS). “Up-coding” to

receive a higher reimbursement rate is not allowed. Children age 5 years and under do not require prior authorization to receive a CGMS.

### **Repair Request Returns**

Bulletin MSA 18-30, which outlined criteria for providers to receive reimbursement for labor for repairs to manual and power wheelchairs and Power Operated Vehicles (POVs) became effective on October 1, 2018. While provider utilization of the process for submitting claims under the new guidelines has been successful overall, MDHHS staff indicated that in many cases where documentation has been returned as incomplete or incorrect, the following common issues have been identified:

- Missing description and/or part number;
- Using Not Otherwise Classified (NOC) codes for items that have a matching Healthcare Common Procedure Coding System (HCPCS) or Current Procedural Terminology (CPT) code; and
- Failing to document medical necessity for an item.

In response to an inquiry, Ms. Trumbell clarified that documentation of medical necessity is required when ordering component parts for an item that was previously approved for purchase by Medicaid (e.g., wheelchair) if the part needs to be replaced prior to the end of its “replacement frequency” limit as determined by MDHHS. MDHHS staff and meeting attendees also discussed at length issues related to coding for reimbursement of complex rehabilitation equipment vs. standard equipment.

### **Other Issues**

Other issues discussed include the following:

- Several meeting attendees reported that some school districts will not transport a student in a wheelchair if the wheelchair does not have transit options installed. In response, MDHHS staff clarified that it is the school district’s responsibility to ensure that a wheelchair can be safely secured if the student cannot be transferred to the vehicle’s seat, and that the school district must provide for the cost of transit options if they require the equipment to be installed as a condition of providing service to the student. MDHHS will only cover transit options for use in a beneficiary’s primary mode of transportation, if the beneficiary cannot be safely transferred to the vehicle’s seat.
- In response to an inquiry, MDHHS staff reminded meeting attendees that for general policy questions, providers should first consult the Medicaid Provider Manual and supplemental bulletins available on the MDHHS website at [www.michigan.gov/medicaidproviders](http://www.michigan.gov/medicaidproviders) >> Policy, Letters & Forms, and if they are still unable to find an answer to their question, they should then contact Provider Support at

800-292-2550 for further assistance.

- Several meeting attendees requested guidance on the department's "repair vs. replacement" methodology for wheelchairs. In response, MDHHS staff indicated they would look into the issue.

**Next meeting:** No December 2019 meeting. Meetings for 2020 will be posted in December 2019

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