

**Bulletin Number:** MSA 17-37

**Distribution:** Practitioners, Medicaid Health Plans, Federally Qualified Health Centers, Local Health Departments, Rural Health Clinics, Tribal Health Centers

**Issued:** December 1, 2017

**Subject:** Rate Update for Neonatal and Pediatric Critical Care and Intensive Care Services

**Effective:** January 1, 2018

**Programs Affected:** Medicaid, Healthy Michigan Plan, MICHild

**NOTE: Implementation of this policy is contingent upon approval of a State Plan Amendment by the Centers for Medicare & Medicaid Services.**

This bulletin is being issued in response to the Michigan Department of Health and Human Services (MDHHS) Fiscal Year (FY) 2018 budget appropriations of Public Act 107 of 2017. From state appropriated funds, Section 1791 of the Act directs MDHHS to increase Medicaid reimbursement rates for physician neonatal services.

Effective for dates of service on and after January 1, 2018, practitioner rates associated with the following inpatient neonatal and pediatric critical and intensive care current procedural terminology (CPT) codes will be reimbursed at 64% of the Medicare annual rate. All Medicaid practitioner rates are reviewed and updated annually and published at [www.michigan.gov/medicaidproviders](http://www.michigan.gov/medicaidproviders) >> Billing and Reimbursement >> Provider Specific Information >> Physicians/Practitioners/Medical Clinics.

CPT Code	Short Description
99468	Neonatal critical care, initial
99469	Neonatal critical care, subsequent
99471	Pediatric critical care, initial
99472	Pediatric critical care, subsequent
99475	Pediatric critical care, age 2-5, initial
99476	Pediatric critical care, age 2-5, subsequent
99477	Initial day hospital neonate care
99478	Intensive care, low birth weight infant, <1500 gm, subsequent
99479	Intensive care, low birth weight infant, 1500-2500 gm, subsequent
99480	Intensive care, present body weight 2501-5000 gm, subsequent

## Manual Maintenance

Retain this bulletin until the information is incorporated into the Medicaid Provider Manual.

## Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at [ProviderSupport@michigan.gov](mailto: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

A handwritten signature in black ink that reads "Kathy Stiffler". The signature is written in a cursive, flowing style.

Kathy Stiffler, Acting Director  
Medical Services Administration