

Bulletin Number: MSA 17-49

Distribution: Bridges Eligibility Manual (BEM) and Bridges Administrative Manual (BAM) Holders, Medicaid Health Plans, Medicaid Non-Emergency Medical Transportation (NEMT) Contractor, Maternal Infant Health Program (MIHP) Providers, Local Health Departments

Issued: January 2, 2018

Subject: Medicaid and Maternal Infant Health Program Medical Transportation Provider Enrollment Updates and Requirements

Effective: As Indicated

Programs Affected: Medicaid, Healthy Michigan Plan, MIChild, Maternity Outpatient Medical Services (MOMS)

The purpose of this bulletin is to revise the NEMT provider enrollment requirements promulgated by bulletin MSA 16-05 and update the policy related to MIHP NEMT providers. Refer to the Michigan Department of Health and Human Services (MDHHS) Medicaid Provider Manual for policy information regarding Medicaid FFS and MIHP transportation policy. Providers and authorizing parties should also refer to bulletin MSA 16-05 for additional information related to NEMT provider enrollment.

I. NEMT Provider Enrollment and Screening

A. Affected Individuals and Agencies

Per bulletin MSA 16-05, and in compliance with Sections 6401 and 6501 of the Affordable Care Act (ACA), NEMT individual and agency providers must consent to required screenings to determine eligibility in order to receive Medicaid reimbursement for providing NEMT services. "Individual" providers are those persons that provide transportation to a Medicaid beneficiary they are not related to and include, but may not be limited to, volunteer drivers or friends, colleagues, or neighbors of a Medicaid beneficiary. Provider screening is conducted through the Community Health Automated Medicaid Processing System (CHAMPS) provider enrollment process. Identification of exclusion disclosures described in the Medicaid Payment Restrictions for NEMT Providers section below must be verified monthly.

Effective immediately, beneficiaries who transport themselves or individuals providing NEMT services to a Medicaid-enrolled family member will not be required to enroll in CHAMPS and will be exempted from mandated provider screening requirements. Self-attestation is sufficient when determining the familial relationship between the driver and

the Medicaid beneficiary. Demand-responsive public transit services and commercially hailed or street taxicabs are also exempt from CHAMPS enrollment and screening requirements at this time.

B. CHAMPS Enrollment and Documentation

With the exception of those providers who do not have computer access, CHAMPS enrollment must be completed online. If a prospective transportation provider does not have online access they may contact the Provider Support helpline at 800-979-4662.

Prior to authorizing Medicaid NEMT reimbursement for services, authorizing parties must document verification of CHAMPS provider enrollment, if necessary, on the date of service on the MSA-4674 (Medical Transportation Statement). A printed copy of the CHAMPS provider enrollment screen or written notation of the date enrollment was verified and any exclusions is acceptable documentation.

C. Personal Choice and Acknowledgement Provider Selection Clarification

Prospective individual and agency providers whose ownership or controlling interests that have been identified through the CHAMPS screening process as having a mandatory exclusion are not eligible to receive reimbursement by the Medicaid program for services rendered. Agencies may not automatically be disqualified from enrollment as a Medicaid NEMT provider based solely on the discovery their ownership or controlling interests have been identified as having a permissive exclusion.

II. Maternal Infant Health Program Update

In compliance with Sections 6401 and 6501 of the ACA, the Medical Services Administration is amending MIHP transportation related policy. Beginning June 1, 2018, MIHP transportation providers must, with the exception of those groups identified and exempted in the Affected Individuals and Agencies section of this bulletin, be enrolled in CHAMPS and screened prior to being authorized, approved, or reimbursed for transportation services for MHIP beneficiaries.

Transportation providers may begin enrolling in CHAMPS February 1, 2018. If a prospective MIHP transportation provider does not have online access they may contact the Provider Support helpline at 800-979-4662. Additional information regarding provider enrollment is available on the MDHHS website at www.michigan.gov/medicaidproviders >> Provider Enrollment.

Prospective MIHP individual and agency NEMT providers who have been identified through the CHAMPS screening process as having an excludable conviction, as defined by MSA 16-05, are not eligible to receive reimbursement by the MIHP program for transportation services rendered. The MIHP program will not utilize prospective NEMT providers who have been identified as having a permissive exclusion regardless of whether a personal choice and acknowledgement has been granted prior.

The MIHP agency provider must verify that the transportation provider has been associated in CHAMPS with the MIHP's provider identification number prior to authorizing transportation services. The MIHP provider must maintain documentation of transportation for each beneficiary for each trip billed. The record must specify:

- The name and address of the beneficiary;
- The date of service (DOS);
- The trip's starting point and destination (address, city);
- The purpose of the trip;
- The number of tokens or miles required for the trip;
- The amount that the beneficiary or transportation vendor was reimbursed;
- The provider identification information for the individual or business providing transportation; and
- Verification of transportation provider enrollment in CHAMPS.

No changes to the claims submission process or mechanism of payment will be made as a result of this policy.

An MIHP beneficiary who receives transportation services through the MIHP program may select any provider subject to the following restrictions:

- The provider does not have a qualifying conviction that is defined as either a mandatory or a permissive exclusion.
- The provider is capable of providing the required services and is otherwise qualified to do so.
- The provider has successfully undergone a criminal history screening conducted by MDHHS and has received notification of the determination.

Manual Maintenance

Retain this bulletin until the information is incorporated into the Michigan 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. 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 1-800-979-4662.

Approved



Kathy Stiffler, Acting Director
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