

Bulletin Number: MSA 18-11

Distribution: Medicaid Health Plans (MHPs), Practitioners, Clinical Laboratories, Hospitals, Tribal Health Centers (THCs), Federally Qualified Health Centers (FQHCs), Local Health Departments (LHDs), and Rural Health Clinics (RHCs)

Issued: June 1, 2018

Subject: Medicaid Laboratory Reimbursement Rates

Effective: July 1, 2018

Programs Affected: Medicaid, Healthy Michigan Plan, MICHild, Children's Special Health Care Services, Maternity Outpatient Medical Services (MOMS)

To align with the Protecting Access to Medicare Act of 2014, the Michigan Department of Health and Human Services (MDHHS) will update reimbursement rates for Medicaid covered laboratory services delivered by enrolled providers. MDHHS uses a rate methodology of 90% of the Medicare Clinical Laboratory Fee Schedule (CLFS) minus any reductions required by law to determine the final Medicaid reimbursement rate. Effective July 1, 2018, lab rates will be updated using the 2018 Medicare CLFS and will be reviewed at least annually following the release of the January Medicare CLFS.

Laboratory services provided by outpatient hospitals or End Stage Renal Disease (ESRD) facilities are reimbursed through the Medicaid Outpatient Prospective Payment System (OPPS) and are not subject to the reimbursement methodology described in this policy.

For reimbursement information, providers should refer to the Medicaid Code and Rate Reference Tool via the External Links menu within the Community Health Automated Medicaid Processing System (CHAMPS), or the Medicaid fee schedule at www.michigan.gov/medicaidproviders >> Billing & Reimbursement >> Provider Specific Information>> Laboratory.

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-mailed to 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.

A handwritten signature in black ink, appearing to read "Kathy Stiffler". The signature is written in a cursive, flowing style.

Kathy Stiffler, Acting Director
Medical Services Administration