

Bulletin Number: MSA 18-20

Distribution: Bridges Eligibility Manual (BEM) and Bridges Administrative Manual (BAM) Holders, Medicaid Health Plans, Medicaid Non-Emergency Medical Transportation (NEMT) Contractor, Hospitals

Issued: June 29, 2018

Subject: Medical Verification for Transportation – Physician Signature and Travel Reimbursement Clarifications

Effective: August 1, 2018

Programs Affected: Medicaid, Healthy Michigan Plan, MICHild

The purpose of this bulletin is to inform Medicaid Fee-for-Service (FFS) NEMT authorizing parties of changes to FFS NEMT policy. Refer to the Michigan Department of Health and Human Services (MDHHS) Medicaid Provider Manual for policy information regarding Medicaid FFS transportation policy. For services for Medicaid beneficiaries enrolled in a Medicaid Health Plan (MHP), the MHP should be contacted for policy and coverage information. The Medicaid Provider Manual is available on the MDHHS website at www.michigan.gov/medicaidproviders >> Policy, Letters & Forms.

Medical Verification for Transportation – Physician Signature

In situations when a completed, original DHS-5330 - Medical Verification for Transportation cannot be secured prior to a beneficiary's scheduled Medicaid-covered appointment, authorizing parties may approve and reimburse all necessary NEMT services if the DHS-5330 is completed and returned to the authorizing party within 10 business days of the appointment. Allowable circumstances include, but are not limited to, the beneficiary's first trip to their primary care physician or medical appointment, or an inability by the beneficiary's physician's office to complete the form and secure the necessary signatures in a timely manner.

Medical transportation trips are not reimbursable by the Medicaid program without a completed, original DHS-5330 on file within 10 business days of the appointment. Authorizing parties must retain the completed, original DHS-5330 in the beneficiary's file and make it available upon request.

Travel Reimbursement Clarifications

Mackinac Bridge

Per current NEMT policy, necessary travel-related fees and tolls (e.g., parking, toll roads, and bridge fare) are reimbursed at actual costs with original, unaltered receipts. In situations when it is necessary for a Medicaid beneficiary to traverse the Mackinac Bridge and the original, unaltered receipt(s) is unavailable, the authorizing party may still approve reimbursement for the toll when supported by documentation on the MSA-4674 - Medical Transportation Statement. Documentation must include the origin and destination points, and a notation regarding the reason an original receipt is unavailable. Per leg reimbursement for passenger vehicles crossing the Mackinac Bridge will be consistent with rates included on the Mackinac Bridge Authority website, which is currently \$4 per crossing. Bridge fare is only reimbursable when the beneficiary is in the vehicle. This policy is not intended to eliminate the requirement that necessary Mackinac Bridge tolls require original, unaltered receipts and may be subject to post-payment review.

Meal Receipts

The NEMT Rate Schedule reflects current maximum rates for reimbursable NEMT services, and is available on the MDHHS website at www.michigan.gov/medicaidproviders >> Billing & Reimbursement >> Provider Specific Information >> Non-Emergency Medical Transportation. Most expenses must be verified with original, itemized, unaltered receipts that are legible and attached to the MSA-4674. Receipts must include the business name, address, date, time, and an itemized list of items purchased with the cost of each item. However, if the restaurant or place of business omits any necessary items from their receipt, the information may be hand-written by the individual incurring that expense.

Hospital Facility Meal and Lodging Reimbursement

Some hospital facilities (e.g., University of Michigan Health System [Michigan Medicine]) provide advance expenses for meals or lodging on a per diem basis to Medicaid beneficiaries securing inpatient or outpatient treatment at their facility, and these facilities seek reimbursement directly from an authorizing party or local MDHHS office after the treatment's end. For these facilities to receive reimbursement of their advance expenses, they must provide to the local MDHHS office, or authorizing party, an invoice or general authorization of services documenting the name of the facility, the name of the Medicaid beneficiary, the date(s) of service, and the service(s) requesting reimbursement (i.e., meals or lodging). Requests made by the facilities for reimbursement must be received by the local MDHHS office, or authorizing party, within 90 calendar days of the last date-of-service.

Upon the effective date of this bulletin the NEMT Rate Schedule will reflect the current maximum per day rate for these services. The NEMT Rate Schedule is available on the MDHHS website at www.michigan.gov/medicaidproviders >> Billing & Reimbursement >> Provider Specific Information >> Non-Emergency Medical Transportation.

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

Kathy Stiffler, Acting Director
Medical Services Administration