

Bulletin Number: MSA 18-26

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

Issued: August 24, 2018

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

Effective: October 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 (CMS).

This bulletin is issued in response to the Michigan Department of Health and Human Services (MDHHS) Fiscal Year (FY) 2019 budget appropriations of Public Act 207 of 2018. From state-appropriated funds, Section 1791 of the Act directs MDHHS to increase Medicaid reimbursement rates for physician neonatal and pediatric critical care and intensive care services.

Effective for dates of service on and after October 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 75% of the Medicare annual rate. All Medicaid practitioner rates are reviewed and updated annually and published at www.michigan.gov/medicaidproviders >> Billing & 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

Public Comment

The public comment portion of the policy promulgation process is being conducted concurrently with the implementation of the change noted in this bulletin. Any interested party wishing to comment on the change may do so by submitting comments in writing to:

Attn: Lisa DiLernia
MDHHS/MSA
PO Box 30479
Lansing, Michigan 48909-7979
Or
E-mail: DilerniaL@michigan.gov

If responding by e-mail, please include "Rate Update for Neonatal and Pediatric Critical Care and Intensive Care Services" in the subject line.

Comments received will be considered for revisions to the change implemented by this bulletin.

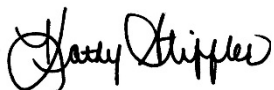
Manual Maintenance

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 1-800-292-2550.

Approved



Kathy Stiffler, Acting Director
Medical Services Administration