

Bulletin Number: MSA 19-13

Distribution: Hospitals, Practitioners, Medicaid Health Plans

Issued: May 31, 2019

Subject: Beneficiary Co-Payment Increase for Outpatient Hospital Visits

Effective: July 1, 2019

Programs Affected: Medicaid, Healthy Michigan Plan, Maternity Outpatient Medical Services (MOMS), MI Health Link

This bulletin is issued in response to Michigan Public Act 207 of 2018. Section 1631(2)(d) of the Act requires an increase in the Medicaid co-payment amount for an outpatient hospital visit (the 051x revenue codes).

Beginning with July 1, 2019 dates of services or after, the co-payment for an outpatient hospital visit will increase to \$2 for beneficiaries in the following Medicaid programs:

- Medicaid Fee-for-Service
- Healthy Michigan Plan with an income less than 100% of the federal poverty level (FPL). **Note:** The Healthy Michigan Plan currently charges a co-pay of \$4 for an outpatient hospital visit for beneficiaries who are over 100% of the FPL.

All other co-payment requirements remain the same.

Different co-payment requirements may apply to beneficiaries enrolled in a Medicaid Health Plan. Providers are expected to utilize the cost-sharing information in the Community Health Automated Medicaid Processing System (CHAMPS) to determine whether cost-sharing may be assessed at the time of the visit and inform the beneficiary of their cost-sharing obligations. Services and populations currently exempt from co-payments remain exempt.

Beneficiaries affected by this increase will receive notice from the Michigan Department of Health and Human Services informing them of the revised co-payment amount.


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, NPI number, 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 style with a large initial "K".

Kathy Stiffler, Acting Director
Medical Services Administration