

**Bulletin Number:** MSA 20-67

**Distribution:** Practitioners, Hospitals, Federally Qualified Health Centers, Rural Health Clinics, Tribal Health Centers, Local Health Departments, Pharmacies, Maternal Infant Health Program Providers, Prepaid Inpatient Health Plans, Community Mental Health Services Programs

**Issued:** October 12, 2020

**Subject:** Coverage of Behavioral Health Services for the Maternity Outpatient Medical Services (MOMS) Benefit Plan

**Effective:** As Indicated

**Programs Affected:** MOMS

**NOTE: Implementation of this policy is contingent upon State Plan Amendment approval from the Centers for Medicare & Medicaid Services (CMS).**

The purpose of this bulletin is to establish coverage of behavioral health services necessary to prevent, diagnose, and treat a broad range of behavioral health symptoms and disorders, including substance use disorder (SUD) for the MOMS benefit plan. These changes are in response to Section 5022 of the Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act (SUPPORT Act), which amends Section 2103(c)(5) of the Social Security Act.

For dates of service on and after October 1, 2020, the pregnancy-related coverage under the MOMS benefit plan will be expanded to include behavioral health and SUD services and supports including, but not limited to:

- Appropriate screenings and preventive services;
- Behavioral health treatment services and validated clinical assessment tools;
- Perinatal depression screening, counseling, and intervention;
- Medication-Assisted Treatment (MAT) for SUD;
- Tobacco use interventions for smoking cessation;
- Inpatient, outpatient and residential treatment;
- Emergency services, crisis intervention and stabilization; and
- Behavioral health and SUD-related case management services.

For a full description of the broad array of mental health and SUD services and supports available to MOMS beneficiaries, refer to the Behavioral Health and Intellectual and Developmental Disability Supports and Services chapter of the Medicaid Provider Manual. The Medicaid Provider Manual can be accessed on the web at [www.michigan.gov/medicaidproviders](http://www.michigan.gov/medicaidproviders) >> Policy, Letters & Forms.

To determine most appropriate services for pregnant beneficiaries experiencing behavioral health conditions, providers should utilize standardized and validated screening tools recommended by the American Academy of Pediatrics (AAP) or United States Public Preventive Services Task Force (USPSTF). Providers are recommended to use validated clinical assessment tools developed by the American Society of Addiction Medicine (ASAM). Delivery of behavioral health services to MOMS beneficiaries must be culturally and linguistically appropriate and reflect all aspects of the diversity of the community in which services are provided.

Behavioral health services are covered by the local Prepaid Inpatient Health Plan (PIHP) for services included under the capitation payments to the PIHPs. For services not included in the capitation payments to the PIHP, behavioral health services are covered through Medicaid fee-for-service.

MOMS beneficiaries will be eligible to receive services during their pregnancy and up to 60 days postpartum. Provider claims for reimbursement related to MOMS behavioral health services must indicate that services are pregnancy-related by using the appropriate International Classification of Diseases (ICD-10) coding guidelines.

### **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 to Janell Troutman, Policy Specialist, via e-mail at [TroutmanJ1@michigan.gov](mailto:TroutmanJ1@michigan.gov).

Please include "Coverage of Behavioral Health Services for the MOMS Benefit Plan" in the subject line.

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

## 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](mailto:ProviderSupport@michigan.gov). Communications should 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, appearing to read 'K. Massey', with a long horizontal flourish extending to the right.

Kate Massey, Director  
Medical Services Administration