

Bulletin Number: MSA 15-21

Distribution: Children's Multi-Disciplinary Specialty Clinics, Hospitals, Local Health Departments, Medicaid Health Plans

Issued: June 1, 2015

Subject: Updates to Children's Multi-Disciplinary Specialty (CMDS) Clinic Policy

Effective: As Indicated

Programs Affected: Children's Special Health Care Services (CSHCS)

The purpose of this bulletin is to provide more specificity to the requirements for CMDS clinics that were established in bulletin MSA 14-49, effective January 1, 2015. The additional requirements are indicated below.

Services are provided as a comprehensive package by a team of pediatric specialty physicians and other appropriate health care professionals. CMDS clinic fees are not intended for sporadic users of the services available through CMDS clinics such as support services only. CMDS clinic fees are intended for the comprehensive, coordinated and integrated services that CMDS clinics provide.

CMDS Clinic Enrollment

CSHCS-approved organizations with responsibility for CMDS clinics must enroll through the online Michigan Department of Health and Human Services (MDHHS) Community Health Automated Medicaid Processing System (CHAMPS) Provider Enrollment (PE) sub-system to be reimbursed for clinic fees for services rendered to eligible CSHCS beneficiaries. Each CMDS clinic must operate under the unique CMDS National Provider Identifier (NPI) held by the organization responsible for those CMDS clinics and must identify the providers who render the services in the CMDS clinic as affiliated providers. All affiliated providers whose services are directly reimbursable per MDHHS policy must be separately enrolled in CHAMPS and must also receive a beneficiary-specific authorization from CSHCS prior to the clinic billing for the clinic fees.

CMDS Clinic Staff Requirements

The following are additional requirements added to several, but not all, of the staffing positions necessary for CMDS clinics:

Physician

A Medicaid-enrolled and CSHCS-authorized pediatric sub-specialist, or adult sub-specialist physician when serving adults, currently licensed to practice under Michigan state law with special training and demonstrated clinical experience related to the diagnoses treated by the specific CMDS clinic type. Physicians are expected to remain familiar with current developments and standards of treatment in their respective fields. Refer to the CMDS Clinic Guide, tables I and II for sub-specialty designations. The CMDS Clinic Guide is available on the MDHHS website at www.michigan.gov/cshcs >> CSHCS Provider Information Page.

Registered Nurse

A Registered Nurse (RN) currently licensed to practice under Michigan state law and having a minimum of two years of pediatric nursing experience or adult nursing experience when serving adults. Certain CMDS clinics are exempt from this requirement (e.g., the Metabolic Diseases CMDS clinics) as long as they have the appropriate additional staff as required in the CMDS Clinic Guide.

Registered Dietitian

A Registered Dietitian (RD) in possession of a master's degree in human nutrition, public health, or a health-related field with an emphasis on nutrition, and two years of pediatric nutrition experience or adult nutrition experience when serving adults in providing nutrition assessment, education and counseling.

Social Worker

A Licensed Master Social Worker (LMSW) or professional staff member in possession of a master's degree in social work and two years of experience in counseling and providing service to children/youth, adults and their families.

CMDS Clinic Visit Types

Beneficiaries with multiple, complex diagnoses may receive CMDS coordinated services from more than one CMDS clinic. However, the limits and numbers of CMDS clinic visit types indicate what the beneficiary is eligible to receive regardless of the number of CMDS clinics the beneficiary is accessing. Any CMDS clinic serving the beneficiary under the CMDS clinic process may submit claims for the appropriate clinic fee(s) up to the limit allowed per beneficiary. For example, there are 10 Support Visits allowed per beneficiary in a year. Any organization/clinic serving the beneficiary may bill for those support visits until the beneficiary limit has been reached. That might involve one CMDS clinic receiving reimbursement for all 10 of the Support Visits or a combination of CMDS clinics receiving reimbursement for some visits until the limit has been reached. The CMDS clinics must document clinic visit levels to include the following:

- Support services must be indicated in the CMDS Plan of Care (POC) developed at a CMDS clinic Comprehensive Initial or Basic Evaluation visit or Management/Follow-up visit.
- The CMDS clinic must collaborate with other CMDS clinics the child/youth, adult and their families may be using regarding which CMDS clinic is the lead CMDS clinic and how the fee billing will occur in coordination between the CMDS clinics that are both serving the same beneficiary.

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


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