

**Bulletin Number:** MSA 15-37

**Distribution:** Bridges Eligibility Manual (BEM) and Bridges Administrative Manual (BAM) Holders, Medicaid Health Plans

**Issued:** September 1, 2015

**Subject:** Changes to NEMT Prior Authorization Requirements for Locally Authorized Methadone-Related Treatment and Meals & Lodging

**Effective:** October 1, 2015

**Programs Affected:** Medicaid, Healthy Michigan Plan

The purpose of this bulletin is to inform the Michigan Department of Health and Human Services (MDHHS) and Medicaid transportation contractor staff of changes to Medicaid's Non-Emergency Medical Transportation (NEMT) policy. Effective October 1, 2015, prior authorization (PA) for NEMT to methadone treatment is no longer required for opiate-dependent beneficiaries. In addition, policies for local office authorization for meals and lodging are being modified. Refer to the MDHHS Bridges Administrative Manual (BAM) 825 for complete information regarding Medicaid NEMT policy.

### **Methadone Treatment**

Medicaid is removing the PA requirement for NEMT to methadone treatment that extends beyond 18 months. County MDHHS and transportation contractor staff will be able to authorize expenses for methadone-related Medicaid transportation as necessary, regardless of the treatment duration. Standard Medicaid NEMT policy related to the documentation of medical necessity and payment authorization for services applies.

### **Authorization for Meals and Lodging**

Medicaid has established mileage, lodging, and meal rates for the purpose of reimbursing beneficiaries, their family or friends, foster care parents, medically necessary attendants, and local MDHHS volunteers for expenses incurred while transporting Medicaid beneficiaries (or themselves, in cases where the beneficiary provides their own transportation) to and from Medicaid-covered appointments. Refer to BAM 825 for a complete listing of those who may be reimbursed for NEMT services.

For meal or lodging expenses incurred as a result of NEMT of a Medicaid-enrolled individual to a Medicaid-covered appointment, and reimbursed with Medicaid program funds, repayment may only occur when expenses are verified with original, itemized, unaltered receipts. If Medicaid funds are utilized, meal and lodging expenses are reimbursed at cost or at the maximum rate as defined by BAM 825, whichever is less. There must be no differentiation in Medicaid reimbursement based on the individual or entity that may have provided the service (i.e., different meal or lodging rates for Medicaid beneficiaries versus transportation providers) unless explicitly stated in BAM 825.

Meals that do not involve overnight stays do not require PA from the Medicaid program. Departure and return criteria listed in Exhibit I of BAM 825 apply. Medically necessary overnight stays (inpatient or outpatient, including meals and lodging) for one client and one parent or escort may be authorized for no more than five consecutive nights. With the exception of medically necessary overnight stays at an approved children's hospital, overnight stays (inpatient or outpatient, including meals and lodging) beyond five nights require PA from the Medicaid program.


## Manual Maintenance

Retain this bulletin until the information is incorporated into the Bridges Administrative 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](mailto: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