

Bulletin Number: MMP 24-42

Distribution: Practitioners, Federally Qualified Health Centers, Hospitals, Nursing Facilities, Home Health Care Services Providers, Outpatient Rehabilitation Agencies, Rural Health Clinics, Medicaid Health Plans, Tribal Health Centers

Issued: October 1, 2024

Subject: Updates to Speech-Language Pathologist Enrollment

Effective: November 1, 2024

Programs Affected: Medicaid, Healthy Michigan Plan, Children's Special Health Care Services (CSHCS)

The purpose of this bulletin is to inform providers of updates to Medicaid enrollment requirements for Speech-Language Pathologists (SLP). Effective for dates of services on or after November 1, 2024, Medicaid will reimburse speech therapy services when provided by any of the following:

- An SLP with a current license. Out-of-state therapists must be licensed and/or certified by the appropriate standard-setting authority in the state in which they are practicing. (Refer to the Out of State/Beyond Borderland Providers subsection of the General Information for Providers chapter of the [Michigan Department of Health and Human Services \[MDHHS\] Medicaid Provider Manual](#) for more information.)
- An appropriately supervised SLP Educational Limited Temporary licensee completing their postgraduate clinical experience or having completed all requirements but has not obtained full license. All documentation must be reviewed and co-signed by the appropriately fully licensed supervising SLP.
- A speech-language pathology student completing their educational program clinical experience under the direct supervision of (i.e., in the presence of) a licensed SLP. All documentation must be reviewed and co-signed by the appropriately fully licensed supervising SLP.

Students, graduates, and educational limited temporary licensed providers are not eligible to enroll or be directly reimbursed by Medicaid. Services performed by these individuals are required to be reported under the National Provider Identifier (NPI) of the supervising SLP.

Medicaid Health Plans (MHP), Integrated Care Organizations (ICO), Prepaid Inpatient Health Plans (PIHPs), or certain employers may require SLPs to meet provider qualifications beyond the minimum standards established by Medicaid. SLPs who wish to provide services to Medicaid beneficiaries are encouraged to contact their employer and/or the applicable MHP, PIHP, or ICO directly for any additional provider credentialing and contract requirements.

All other therapist enrollment and payment rules remain unchanged. (Refer to the Therapy Services chapter in the [MDHHS Medicaid Provider Manual](#) for additional policy and coverage information.)

Manual Maintenance

Retain this bulletin until the information is incorporated into the MDHHS 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. Typical Providers may phone toll-free 800-292-2550. Atypical Providers may phone toll-free 800-979-4662.

An electronic copy of this document is available at www.michigan.gov/medicaidproviders >> Policy, Letters & Forms.

Approved



Meghan E. Groen, Director
Behavioral and Physical Health and Aging Services Administration