

**Bulletin Number:** MSA 14-24

**Distribution:** Family Planning Clinics, Federally Qualified Health Centers (FQHCs), Home Health Providers, Hospice Providers, Hospitals, Local Health Departments (LHDs), Medicaid Health Plans (MHPs), Mental Health/Substance Abuse, Nursing Facilities, Pharmacies, Practitioners, Private Duty Nursing (PDN), Rural Health Clinics (RHCs)

**Issued:** July 1, 2014

**Subject:** Changes to the Benefits Monitoring Program (BMP)

**Effective:** August 1, 2014

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

This bulletin provides information regarding updates to the Benefits Monitoring Program (BMP). The changes are effective for dates of service on and after August 1, 2014.

### **Misutilization of Pharmacy Services**

Criteria for Misutilization of Pharmacy Services will be modified by adding the following:

- Utilizing multiple prescribing providers for drug categories listed in the Drug Categories subsection of the Beneficiary Eligibility Chapter of the Medicaid Provider Manual, including when prescribing providers provide services to the beneficiary as a private pay patient (e.g., beneficiary pays cash for office visits while using the Medicaid pharmacy benefit to obtain prescriptions).

### **BMP Authorized Providers**

Policy is being modified by adding the following:

The Michigan Department of Community Health (MDCH) reserves the right to end/terminate provider authorization for a BMP enrollee at any time. A replacement provider may be assigned following such an action. Instances will be determined on a case-by-case basis following periodic review, and must meet at least one of the following criteria:

- A review of utilization reveals that a provider is not contributing to a reduction in service utilization (including use of drugs subject to abuse) as defined by the BMP,
- The BMP Authorized Provider becomes a sanctioned provider, or
- The BMP Authorized Provider makes referrals to the emergency department for non-emergent conditions.

## Manual Maintenance

Retain this bulletin until the information has been incorporated into the Michigan Medicaid Provider Manual.

## Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Community Health, 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



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Medical Services Administration