

Bulletin Number: MSA 19-31

Distribution: Bridges Eligibility Manual (BEM) and Bridges Administrative Manual (BAM) Holders, Medicaid Non-Emergency Medical Transportation (NEMT) Contractor

Issued: October 1, 2019

Subject: Meals, Lodging, and Timely Filing of the Medical Transportation Statement

Effective: November 1, 2019

Programs Affected: Medicaid, Healthy Michigan Plan, MI Child

The purpose of this bulletin is to inform Medicaid Fee-for-Service (FFS) NEMT authorizing parties of changes to FFS NEMT policy. Refer to the Michigan Department of Health and Human Services (MDHHS) Medicaid Provider Manual for information regarding Medicaid FFS transportation policy. For services for Medicaid beneficiaries enrolled in a Medicaid Health Plan (MHP), Integrated Care Organization (ICO) or MI Choice waiver agency, providers should contact the beneficiary's health plan or waiver agency for policy and coverage information. The Medicaid Provider Manual is available on the MDHHS website at www.michigan.gov/medicaidproviders >> Policy, Letters & Forms.

Meals

FFS NEMT meal reimbursement will align with the State of Michigan Standardized Travel Regulations issued by the Michigan Civil Service Commission and Michigan Department of Technology, Management and Budget. Meals authorized for beneficiaries, volunteer drivers, and individuals with a vested interest must meet one of the following:

- For breakfast: The vehicle must depart before 6:00 AM and must return after 8:30 AM.
- For lunch: The vehicle must depart before 11:30 AM and must return after 2:00 PM.
- For dinner: The vehicle must depart before 5:30 PM and must return after 8:00 PM.

A vehicle's departure and return times cannot include non-medically related travel including, but not limited to, personal errands or business. Meals are not eligible for reimbursement if they are purchased within the requester's official city of residence.

Lodging

Medically necessary overnight stays that include meals and lodging may be authorized for a beneficiary and transportation provider for up to 14 consecutive nights. In addition, one

medically necessary attendant (or individual with a vested interest) may be authorized if documented by the beneficiary's provider on the Medical Verification for Transportation (DHS-5330). Medically necessary overnight stays beyond 14 nights require prior authorization (PA) from the MDHHS Program Review Division (PRD). (Refer to the Non-Emergency Medical Transportation chapter of the Medicaid Provider Manual, Prior Authorization section, for prior authorization instructions.) The least expensive, sufficiently maintained lodging available must still be utilized.

Timely Filing of the Medical Transportation Statement

Currently, a Medical Transportation Statement (MSA-4674) must be returned to the MDHHS local office within 90 calendar days from the last date of service to authorize payment for medical transportation. To align with MDHHS timely filing billing requirements, the MSA-4674 timely filing requirement will be expanded to within 12 months of the incurred expense. Expenses incurred before the policy's effective date will not be eligible for the revised timely filing requirement.

FFS NEMT reimbursement will align tax liability requirements imposed by the Internal Revenue Service (IRS). NEMT payment is non-taxable when an MSA-4674 is submitted to the MDHHS local office up to 60 calendar days after the expense is incurred (day trip meals are always taxable). Providers and beneficiaries that seek NEMT reimbursement after 60 calendar days of the incurred expense will see their payment taxed. To allow the MDHHS local office enough time to process reimbursement requests, beneficiaries and providers should submit requests within 45 calendar days after the expense is incurred. The next edition of MSA-4674 will include these instructions.

The 60-calendar day filing requirement described above does not impact the issuing of Form 1099-MISC (Miscellaneous Income). Volunteer drivers and foster care parents will receive Form 1099-MISC any time reimbursement for mileage and meals totals \$600 or more in a calendar year, regardless of when the reimbursement request was submitted.

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-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. Providers may phone toll-free 1-800-292-2550.

Approved

A handwritten signature in black ink, appearing to read 'K. Massey', with a horizontal line extending to the right.

Kate Massey, Director
Medical Services Administration