

Bulletin Number: MSA 18-41

Distribution: Local Health Departments

Issued: November 30, 2018

Subject: Clarification of Medicaid Outreach Policy

Effective: January 1, 2019

Programs Affected: Medicaid, Healthy Michigan Plan, MICHild

The purpose of this policy is to clarify requirements for administrative claiming of Medicaid outreach activity costs for Local Health Departments (LHDs) under federal funding regulations. **All outreach activities must be in support of the Medicaid program.** Activities that are part of a direct service are not claimable as Medicaid Outreach. Claiming for the costs of Medicaid-related administrative activities performed by LHD employees (community health workers, public health specialists, services specialists, health educators, etc.) are allowable provided that the LHD implements a system to appropriately identify the activities and costs in accordance with federal requirements.

I. Approved Outreach Categories/Activities

A. Medicaid Outreach and Public Awareness

Informing Medicaid-eligible and potentially Medicaid-eligible children and families about the benefits and availability of services provided by Medicaid. This category of outreach also includes coordinating and presenting information about Medicaid through media resources, health fairs and other community forums.

Examples of activities in this category include, but are not limited to:

- Developing, compiling, and/or distributing materials that inform individuals about the Medicaid program, Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services, and how and where to obtain benefits.
- Contacting pregnant and parenting women about the availability of Medicaid services, including referral to family planning and well-baby care programs and services.

Examples of activities that are **not appropriate** for this category include, but are not limited to:

- Women, Infants, and Children (WIC) and Maternal Infant Health Program (MIHP) staff providing referral information about available health and community services. The State of Michigan mandates that these services be provided as a condition of operating the program.

B. Facilitating Medicaid Eligibility Determination

Activities related to assisting potentially Medicaid-eligible individuals in applying for Medicaid benefits. This includes explaining the Medicaid program to individuals or families, providing a Medicaid application form, assisting an individual in completing a Medicaid application, and/or referring individuals to the local Michigan Department of Health and Human Services (MDHHS) office for determination of benefits. Community health workers may act as client advocates when additional assistance is needed to complete the application process. Community health workers can also help clients overcome other barriers such as linguistic, cultural, and cognitive challenges to the application and enrollment process.

Examples of activities in this category include, but are not limited to:

- Verifying an individual's current Medicaid eligibility status for purposes of the Medicaid eligibility process.
- Assisting the individual or family in collecting/gathering required information and documents for the Medicaid application.

Examples of activities that are **not appropriate** for this category include, but are not limited to:

- Verifying an individual's current Medicaid eligibility status for a direct service or billing of a medical appointment.
- Explaining the eligibility process for non-Medicaid programs.

C. Program Planning, Policy Development and Interagency Coordination Related to Medical Services

Development of health programs and services targeted to the Medicaid population and collaboration between the LHD and other agencies to ensure the delivery of Medicaid-covered services. Activities in this category only apply to LHD staff whose position description includes program planning, policy development and interagency coordination, and/or those staff specifically appointed to appropriate committee or program performing required activities. This includes planning and developing procedures to track requests for referrals, and coordinating services with the Medicaid Health Plans.

Examples of activities in this category include, but are not limited to:

- Working with other agencies and/or providers that provide medical/dental/mental health services to improve the coordination and delivery of services, expand access to additional Medicaid populations, increase provider participation, and improve provider relations.
- Enhancing, improving, or streamlining health care service delivery systems in the community.
- Representing the LHD on a committee or program that is intended to improve access to Medicaid programs and services.

Examples of activities that are **not appropriate** for this category include, but are not limited to:

- Developing procedures for tracking requests by families for assistance with non-Medicaid services and the providers of such services.
- Creating a collaboration of health professionals to provide consultation and advice on the delivery of health care services to the non-Medicaid population.

D. Referral, Coordination, and Monitoring of Medicaid Services

Making referrals for, coordinating access to, and/or monitoring the delivery of Medicaid services. Working with Medicaid providers to improve the coordination and delivery of clinical health care services, expand access to specific Medicaid populations, and improve collaboration around early identification of medical/dental problems.

Examples of activities in this category include, but are not limited to:

- Making referrals for and/or scheduling appropriate Medicaid-covered services for Medicaid-enrolled individuals.
- Developing referral sources for the LHD, such as a list or brochure of the physicians, dentists or practitioners in the area who accept Medicaid patients for evaluation or treatment, or a list of other health agencies providing Medicaid services.
- Monitoring or coordinating the completion of the prescribed services, the termination of services, and the referral of the individual to other Medicaid services as necessary.

Examples of activities that are **not appropriate** for this category include, but are not limited to:

- Conducting quality assurance reviews when MDHHS requires the reviews as a condition of operating the program.
- Making referrals for, and coordinating access to, non-Medicaid services, such as child care, employment, job training, food assistance, and housing.
- Activities that are an integral part of or an extension of a direct medical service.

E. Medicaid-Specific Training on Outreach Eligibility and Services

Outreach activities that focus on coordinating, conducting, or participating in training and seminars for staff and/or contractors regarding the Medicaid program and available services, the benefits of the program, and how to assist families in accessing Medicaid services. These include trainings that enhance early identification, screening, and referral of children and adolescents for EPSDT services. This category also includes development and presentation of training modules regarding Medicaid eligibility and benefits to LHD staff.

Examples of activities in this category include, but are not limited to:

- Participating in or coordinating training that improves the delivery of Medicaid services.
- Attending or participating in a Medicaid Outreach in-service or webinar.
- Developing, participating in, or presenting training that addresses the clinical importance of pediatric or other clinical standards for preventive care offered through the Medicaid program.

Examples of activities that are **not appropriate** for this category include, but are not limited to:

- Participating in or coordinating training that improves the delivery of general LHD services.
- The time spent determining if a specific task can be considered Medicaid outreach.

F. Arranging for Medicaid-related Transportation

Assisting an individual in obtaining transportation for Medicaid-related services.

NOTE: This does NOT include activities that contribute to the actual billing of transportation as a medical service.

Examples of activities in this category include, but are not limited to:

- Scheduling or arranging transportation to and from Medicaid-covered services for a Medicaid-enrolled individual.
- Assisting with or arranging transportation for the parent/guardian of a Medicaid-enrolled individual in support of referral and evaluation activities.

Examples of activities that are **not appropriate** for this category include, but are not limited to:

- Transporting or accompanying a Medicaid-enrolled individual to a medical appointment.
- Assisting an individual in obtaining transportation for non-Medicaid services.

G. Arranging for or Providing Medicaid-related Translation Services

Arranging for or providing translation services related to a Medicaid-covered service when translation services are not included and/or paid for as part of a direct medical assistance service.

Examples of activities in this category include, but are not limited to:

- Arranging for or providing translation services (oral or signing services) to assist an individual with completing a Medicaid application.

- Arranging translation services that assist an individual in understanding the Medicaid services available.

Examples of activities that are **not appropriate** for this category include, but are not limited to:

- Developing translation materials that assist individuals in accessing and understanding non-Medicaid programs and services.
- Arranging for or providing translation services (oral or signing services) that assist the individual in accessing non-Medicaid services.
- Providing translation services to assist a Medicaid-enrolled individual in communicating as part of a direct medical service.

II. **Documentation and Reporting Requirements**

Documentation maintained in support of administrative claims must be sufficiently detailed to allow determination of whether the activities were necessary for the proper and efficient administration of the Medicaid State Plan. The LHD bears the responsibility for all claiming determinations.

LHDs that bill for Medicaid outreach activities are expected to provide a quarterly summary report of Medicaid outreach activities. Guidelines and reporting requirements are described in the Comprehensive Agreement.


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, 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