

Provider Support

- www.Michigan.gov/MedicaidProviders
- 1-800-292-2550
- ProviderSupport@Michigan.gov

Therapy Coverage and Billing Resources

- [Michigan Medicaid Provider Manual >> Therapy Services Chapter](#)
- [MDHHS Therapy Database](#)
- [Medicaid Code and Rate Reference tool](#)

FFS Prior Authorization (PA)

Resources and Tools

- [Steps on How to Enter a Prior Authorization Directly in CHAMPS](#)
- [CHAMPS PA Resources](#)
- Occupational Therapy-Physical Therapy-Speech Therapy Prior Approval Request/Authorization form ([MSA-115](#))

PA Program Review Division (PRD)

- 1-800-622-0276
- Fax 517-335-0075

Medicaid Health Plan (MHP)

- [Medicaid Health Plan Website](#)
- [List of Medicaid Health Plan Contact and Service Listing](#)

Integrated Care Organization (ICO)

- [MI Health Link Website](#)
- [List of Integrated Care Organizations and Service Listing](#)

Additional Resources

- [CHAMPS Website](#)
- [Training Website](#)
- [Provider Alerts](#)
- Sign up for [Listserv](#)

Nursing Facility Therapy Services

Medicaid covers medically necessary rehabilitative physical (PT), occupational (OT), and Speech-Language (ST) therapy services for beneficiaries residing in a nursing facility (NF) when provided by licensed therapists or appropriately supervised professionals. A Medicaid-certified NF is defined as a nursing home, county medical care facility, or hospital long term care unit with Medicaid certification. Healthy Michigan Plan beneficiaries may also be eligible for habilitative therapy. All services must be ordered by the beneficiary's primary care or specialty medical provider.

Nursing Facility Coverage

Refer to the [Therapy and Nursing Facility Chapters](#) of the Medicaid Provider Manual for complete coverage and service requirements.

Rehabilitative Therapy	Covered.
Habilitative Therapy	Covered for some beneficiaries. Special modifier requirements apply.
Maintenance Therapy	Covered up to 4 times per 60 days. The 4 visits should not total more than 16 units. Special modifier requirements apply.
Co-Treatment Therapy	Covered. Requires PA. Therapists must not work on duplicate goals.
Group Therapy	Not Covered.
Telemedicine Therapy	Not Covered.
Therapy Outside Of The Facility	Covered. Therapy provided outside of the facility is covered when performed in a hospital outpatient department or medical care facility.

Billing Tips!

- For services requiring PA, the information (e.g., PA approval tracking number, CPT, modifier, and quantity) that was approved on the PA request must match the information reported on the claim.
- Therapy rendered to a NF beneficiary must be billed by the nursing facility.

Modifiers

- All therapy PA requests and claims must include the appropriate therapy modifier to distinguish the plan of care under which the service is delivered (GN,GO,GP).
- In addition to the discipline modifier, habilitative therapy PAs and claims must be reported with modifier 96 and maintenance therapy must be reported with the TS modifier.

Fee-For-Service (FFS) Prior Authorization Requirements

The purpose of PA is to review the medical need for continued therapy services. Approval confirms that the service is authorized for the beneficiary, but does not guarantee eligibility or payment. Providers must verify both the beneficiary's and provider's eligibility prior to rendering the service. Continued NF therapy may be requested up to 2 months at a time. Submit PAs electronically via CHAMPS Direct Data Entry whenever possible. This method allows providers to track PA requests and determination letters.

Prior Authorization is Required in the Following Scenarios

To avoid delays in the beneficiary receiving ongoing services, additional therapy should be requested at least three weeks prior to the beneficiary reaching the end of their 60 day admission period. PA will not be granted retroactively. When urgent access to therapy is required, verbal PA may be requested by contacting the MDHHS Program Review Division (PRD).

Refer to the [Therapy Chapter](#) of the Medicaid Provider Manual for complete PA and coverage requirements.

Occupational Therapy and Physical Therapy	<ul style="list-style-type: none"> ◆ Treatment performed after the beneficiary has been admitted to the NF more than 60-days. This includes new episodes of therapy or continuations of therapy already in progress. Emergency or planned hospitalizations do not impact the PA requirements. ◆ Maintenance therapy that exceeds 4 times and/or 16 units per 60 days.
Speech-Language Therapy	<ul style="list-style-type: none"> ◆ Treatment performed after the beneficiary has been admitted to the NF more than 60-days. This includes new episodes of therapy or continuations of therapy already in progress. Emergency or planned hospitalizations do not impact the PA requirements. ◆ Maintenance therapy that exceeds 4 visits per 60 days.
<p>* Not all Medicaid beneficiaries are eligible for habilitative treatment. Refer to the Therapy Services chapter for complete coverage details.</p>	

PA Clinical Documentation Requirements

PA requests must be submitted with the Therapy Prior Approval Form ([MSA-115](#)) and the following required medical documentation:

- ◆ **Copy of the most recent evaluation/re-evaluation.** This should include standardized tests and/or objective functional baseline measures used to establish goals and document progress.
- ◆ **Summary of previous treatment period.** Include progress on short- and long-term goals, response to treatment, and any factors that have affected progress. Do not send daily treatment notes.
- ◆ **Revised goals and justification for any change in the treatment plan.** Goals must be measurable, functional, significant to the beneficiary's level of function, time-related as defined in policy, and include corresponding baseline measures.
- ◆ **Copy of the prescription.** Including the date range of the requested treatment.
- ◆ **Evaluation and treatment plan signed by the therapist and ordering provider.** The plan must include the anticipated type, frequency and duration of therapy required to meet short- and long- term goals and functional outcomes.