

MEDICAID POLICY INFORMATION SHEET

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Initial

Public Comment

Final

Brief description of policy:

The Michigan Department of Health and Human Services (MDHHS) will allow Medicaid Fee-for-Service (FFS) non-emergency medical transportation (NEMT) authorizing parties to accept the submission of Medical Verification for Transportation (DHS-5330) and Medical Transportation Statement (MSA-4674) forms and receipts via fax and secure email.

Reason for policy (problem being addressed):

This policy will reduce submission barriers and allow greater access to transportation for Medicaid beneficiaries and NEMT reimbursement.

Budget implication:

budget neutral

will cost MDHHS \$, and (select one) budgeted in current appropriation

will save MDHHS \$

Is this policy change mandated per federal requirements?

No.

Does policy have operational implications on other parts of MDHHS?

Yes, local MDHHS county offices.

Does policy have operational implications on other departments?

No.

Summary of input:

controversial

acceptable to most/all groups

limited public interest/comment

Supporting Documentation:

| | |
|--|---|
| State Plan Amendment Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Public Notice Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| If Yes, please provide status: | If yes, Submission Date: |
| <input type="checkbox"/> Approved <input type="checkbox"/> Pending <input type="checkbox"/> Denied | |
| Date: Approval Date: | |

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| DRAFT FOR PUBLIC COMMENT Michigan Department of Health and Human Services | | |
| | Project Number: 2051-NEMT | Date: August 21, 2020 |

Comments Due: September 25, 2020
Proposed Effective Date: December 1, 2020
Direct Comments To: Lida Momeni
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E-Mail Address: momenil@michigan.gov
Phone: 517-284-1215 **Fax:**

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| <p>Policy Subject: Medical Verification for Transportation and Medical Transportation Statement Submissions</p> <p>Affected Programs: Medicaid, Healthy Michigan Plan, MICHild</p> <p>Distribution: Bridges Eligibility Manual (BEM) and Bridges Administrative Manual (BAM) Holders, Medicaid Non-Emergency Medical Transportation (NEMT) Contractor</p> <p>Summary: The Michigan Department of Health and Human Services (MDHHS) will allow Medicaid Fee-for-Service non-emergency medical transportation (NEMT) authorizing parties to accept the submission of Medical Verification for Transportation (DHS-5330) and Medical Transportation Statement (MSA-4674) forms and receipts via fax and secure email.</p> <p>Purpose: This policy will reduce submission barriers and allow greater access to transportation for Medicaid beneficiaries and NEMT reimbursement.</p> <p>Cost Implications: None.</p> <p>Potential Hearings & Appeal Issues: None anticipated.</p> |
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|--|---|
| State Plan Amendment Required: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, date submitted: | Public Notice Required: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Submitted date: |
|--|---|

Tribal Notification: Yes No - Date:

THIS SECTION COMPLETED BY RECEIVER

| | |
|---|--|
| <input type="checkbox"/> Approved | <input type="checkbox"/> No Comments |
| <input type="checkbox"/> Disapproved | <input type="checkbox"/> See Comments Below |
| | <input type="checkbox"/> See Comments in Text |

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|-------------------|---------------------|
| Signature: | Phone Number |
|-------------------|---------------------|

Signature Printed:

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|---|-------------|
| Bureau/Administration (please print) | Date |
|---|-------------|

Proposed Policy Draft

Michigan Department of Health and Human Services
Medical Services Administration

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

Issued: November 1, 2020 (Proposed)

Subject: Medical Verification for Transportation and Medical Transportation Statement Submissions

Effective: December 1, 2020 (Proposed)

Programs Affected: Medicaid, Healthy Michigan Plan, MICHild

The purpose of this bulletin is to inform Medicaid Fee-for-Service (FFS) non-emergency medical transportation (NEMT) authorizing parties of changes to FFS NEMT policy. Refer to the Michigan Department of Health and Human Services (MDHHS) Medicaid Provider Manual for 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, the beneficiary's health plan or waiver agency should be contacted for policy and coverage information. The Medicaid Provider Manual is available on the MDHHS website at www.michigan.gov/medicaidproviders >> Policy, Letters & Forms.

Transportation Authorization and Reimbursement

Medicaid FFS authorizing parties may accept the submission of complete Medical Verification for Transportation (DHS-5330) and Medical Transportation Statement (MSA-4674) forms and receipts via fax and secure email. Original forms and receipts will not be required for authorization and reimbursement requests. Transportation providers and beneficiaries may continue to submit original forms and receipts if they choose.

NEMT reimbursement through MSA-4674 must continue to reflect the total incurred cost to the transportation provider(s) and to the beneficiary, and must be verified with itemized, unaltered receipts. All receipts must still be legible and included with the MSA-4674. (Refer to the Non-Emergency Medical Transportation chapter of the Medicaid Provider Manual, Meals subsection, for receipt requirements.)