

# MEDICAID POLICY INFORMATION SHEET

**Policy Analyst:** Janell Troutman

**Phone Number:** 517-284-1248

Initial

Public Comment

Final

**Brief description of policy:**

This policy updates the coverage of Psychiatric Collaborative Care Model Services (CoCM).

**Reason for policy (problem being addressed):**

This policy removes the initial face-to-face visit requirement and expands the role of psychiatric consultant to include mental health nurse practitioners in order to improve access and remove barriers to receiving CoCM services.

**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?**

No.

**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: <input type="checkbox"/> Approved <input type="checkbox"/> Pending <input type="checkbox"/> Denied	If yes, Submission Date:
Date:                      Approval	Date:

<b>DRAFT FOR PUBLIC COMMENT</b>  <b>Michigan Department of Health and Human Services</b>		
	<b>Project Number:</b> 2207-CoCM	<b>Date:</b> May 18, 2022

**Comments Due:** June 22, 2022  
**Proposed Effective Date:** August 1, 2022  
**Direct Comments To:** Janell Troutman

**Address:**  
**E-Mail Address:** [Troutmanj1@michigan.gov](mailto:Troutmanj1@michigan.gov)  
**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Policy Subject:** Updates to Coverage of Psychiatric Collaborative Care Model (CoCM) Services Policy

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

**Distribution:** Federally Qualified Health Centers, Medicaid Health Plans, Local Health Departments, Practitioners, Rural Health Clinics, Tribal Health Centers, Prepaid Inpatient Health Plans, Community Mental Health Services Programs

**Summary:** This policy removes the initial in person face-to-face visit requirement and expands the role of psychiatric consultant to include mental health nurse practitioners.

**Purpose:** To improve access and remove barriers to receiving CoCM services.

**Cost Implications:** Budget neutral

**Potential Hearings & Appeal Issues:** None anticipated

<b>State Plan Amendment Required:</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	<b>Public Notice Required:</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>If yes, date submitted:</b> _____	<b>Submitted date:</b> _____

**Tribal Notification:** Yes  No  - **Date:** \_\_\_\_\_

**THIS SECTION COMPLETED BY RECEIVER**

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

<b>Signature:</b> _____	<b>Phone Number</b> _____
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**Signature Printed:** \_\_\_\_\_

<b>Bureau/Administration</b> <i>(please print)</i> _____	<b>Date</b> _____
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# Proposed Policy Draft

Michigan Department of Health and Human Services  
Behavioral & Physical Health and Aging Services Administration

**Distribution:** Federally Qualified Health Centers, Medicaid Health Plans, Local Health Departments, Practitioners, Rural Health Clinics, Tribal Health Centers, Prepaid Inpatient Health Plans, Community Mental Health Services Programs

**Issued:** July 1, 2022 (Proposed)

**Subject:** Updates to Coverage of Psychiatric Collaborative Care Model (CoCM) Services Policy

**Effective:** August 1, 2022 (Proposed)

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

The purpose of this policy is to update the coverage parameters of CoCM services effective for dates of service on and after August 1, 2022. CoCM services were initially described in Bulletin [MSA 20-38](#), issued July 1, 2020.

CoCM is a model of integrated behavioral health service which is typically provided within the primary care setting. Eligible conditions include, but are not limited to, mild to moderate depression, anxiety, bipolar disorder, attention deficit disorder, and substance use disorder (SUD). CoCM is also available to individuals who may not be deemed eligible for specialty services through Community Mental Health Services Programs.

## **Coverage of CoCM Services – Initial Assessment**

CoCM must include an initial assessment. The Medicaid program will now allow the initial face-to-face CoCM visit to be provided via dual audio-visual telemedicine, as most clinically appropriate for patient-centered care, consistent with the current Medicaid telemedicine policy (Refer to the Practitioner chapter of the [MDHHS Medicaid Provider Manual](#), Telemedicine section, for additional information).

## **Collaborative Care Team Criteria - Psychiatric Consultant**

The CoCM team includes the primary care provider or treating physician, a behavioral health care manager, a psychiatric consultant and the Medicaid Fee-for-Service (FFS) or Medicaid Health Plan (MHP) beneficiary. This policy updates the collaborative care team criteria for the psychiatric consultant. Specifically, the psychiatric consultant role has been expanded to include licensed, qualified mental health nurse practitioners (MHNPs).

**Psychiatric consultant:** A medical professional (MD or DO) or mental health nurse practitioner (MHNP), who is trained in psychiatry or behavioral health and qualified to prescribe the full range of medications. The psychiatric consultant will:

- Recommend treatment strategies,
- Recommend medication and changes in medication based on beneficiary status,
- Recommend referral to specialty services when needed,
- Consult weekly with the behavioral health care manager, and
- Consult with and advise the treating primary care provider as clinically indicated.