

POLICIES AND PROCEDURE MANUAL

Chapter:	Service Delivery System		
Title:	SUD Services – Out of Region Coverage		
Policy: <input checked="" type="checkbox"/> Procedure: <input type="checkbox"/> Version: 1.0 Page: 1 of 2	Review Cycle: Annually Author: Utilization Mgmt. and Waiver Director	Adopted Date: 09.06.2016 Review Date: 05.08.2018 Revision Eff. Date:	Related Policies:

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Purpose

The purpose of this policy is to delineate the Mid-State Health Network (MSHN) stance on MSHN-Medicaid consumer coverage for beneficiaries who receive residential or detoxification services outside of the MSHN region.

Policy

It is the policy of MSHN that for individuals receiving covered residential or detoxification services in a licensed out of region provider, that providers take no action to change the Medicaid county of residence of the individual receiving services.

Additional Guidance:

MSHN has established contracts with certain out of region (i.e. outside of the MSHN 21-county area) substance use disorder (SUD) treatment providers for residential and/or detoxification services. In other cases, MSHN will engage in “single-consumer” letters of agreement with providers not previously empaneled in the MSHN provider network to facilitate needed care.

It has been the historical practice of some SUD residential and/or detoxification treatment providers to contact local MDHHS eligibility personnel to transfer the consumer’s Medicaid county of residence coverage to the county in which the treatment facility exists. Per the Medicaid Services Administration (MSA), there is no type of eligibility requirement dictating such a change in address when the consumer enters any treatment program.

The unintended consequence of switching any consumer’s Medicaid coverage temporarily to a non-MSHN county results in the consumer being assigned to a different Pre-Paid Inpatient Health Plan (PIHP) region. In addition, when the consumer leaves the SUD provider and returns home, he or she will not be able get medical or other covered services in their home county until the Medicaid coverage is returned to the original PIHP (MSHN) assignment. This represents a barrier to treatment that should not exist for beneficiaries. The MSHN access management system should be service-driven and facilitate meeting the needs of the client without risking disengagement or constructing unnecessary barriers to benefit utilization.

MSHN has established rates for reimbursement to account for any benefits that the provider may use on behalf of the consumer, making a consumer address change initiated by the SUD provider unnecessary.

The MSHN region also contains Medicaid Health Plan (MHP) coverages (i.e. Medicaid Regional Prosperity Regions) that include all plans in the lower peninsula such that when the MSHN consumer participates in an out-of-region SUD program, adequate healthcare coverage continues to exist for that consumer.

Applies to:

- ☒ All Mid-State Health Network Staff
☐ Selected MSHN Staff, as follows:
☐ MSHN's Affiliates: ☐ Policy Only ☐ Policy and Procedure
☒ Other: Sub-contract Providers

Definitions:

CMHSP: Community Mental Health Service Program

MDHHS: Michigan Department of Health and Human Services

MHP: Medicaid Health Plan

MSA: Medicaid Services Administration

MSHN: Mid-State Health Network

PIHP: Pre-Paid Inpatient Health Program

SUD: Substance Use Disorder

Other Related Materials:**References/Legal Authority:**

MDHHS Bureaus of Substance Abuse and Addiction Services Treatment Policy #7

MDHHS Medicaid Managed Specialty Supports and Services Concurrent 1915 (b)/(c) Waiver Program

MDHHS Michigan Medicaid Health Plans beginning January 1, 2016

MSHN Technical Requirement: CMHSP Responsibilities for 24/7/365 Access for Individuals with
Primary Substance Use Disorders

Change Log:

<u>Date of Change</u>	<u>Description of Change</u>	<u>Responsible Party</u>
08.08.2016	New Policy	Utilization Mgmt. & Waiver Director
02.28.2018	Annual Review	UM Director & Director of Provider Network Management Systems