

**MEDICAID POLICY INFORMATION SHEET**

**Policy Analyst:** Mary Anne Sesti

**Phone Number:** 517-284-1220

Initial

Public Comment

Final

**Brief description of policy:**

This policy notifies hospital providers and beneficiaries of the increase in the co-payment for outpatient hospital visits. This will affect beneficiaries in the Medicaid Fee for Service (FFS) program and beneficiaries in the Healthy Michigan Plan (HMP) with incomes below 100% of the Federal Poverty Level (FPL).

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

Michigan Public Act (PA) 207 of 2018, Section 1631(2)(d) increased the co-payment to \$2 for an outpatient hospital visit. This is an increase of \$1.

**Budget implication:**

budget neutral

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

will save MDHHS \$ 5,000

**Is this policy change mandated per federal requirements?**

No

**Does policy have operational implications on other parts of MDHHS?**

Yes: Community Health Automated Medicaid Processing System (CHAMPS) claim processing staff and notification for impacted Medicaid FFS and HMP beneficiaries.

**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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Public Notice Required: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, please provide status:	If yes,
<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Pending <input type="checkbox"/> Denied	Submission Date: <b>09/30/18</b>
Date: 2/22/19 Approval Date:	

<b>DRAFT FOR PUBLIC COMMENT</b>		
	<b>Michigan Department of Health and Human Services</b>	<b>Project Number:</b> 1904-Hospital <b>Date:</b> March 15, 2019

**Comments Due:** April 19, 2019  
**Proposed Effective Date:** July 1, 2019  
**Direct Comments To:** Mary Anne Sesti  
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<p><b>Policy Subject:</b> Beneficiary Co-Payment Increase for Outpatient Hospital Visits</p> <p><b>Affected Programs:</b> Medicaid, Healthy Michigan Plan, Maternity Outpatient Medical Services (MOMS), MI Health Link</p> <p><b>Distribution:</b> Hospitals, Practitioners</p> <p><b>Summary:</b> This policy increases the outpatient hospital visit co-payment (051x revenue codes) from \$1 to \$2 in the Medicaid Fee-for-Service program. Also impacted are Healthy Michigan Plan beneficiaries with incomes below 100% of the federal poverty level (FPL).</p> <p><b>Purpose:</b> To implement Michigan Public Act (PA) 207 of 2018, Section 1631(2)(d).</p> <p><b>Cost Implications:</b> Implementation of this policy will save the Michigan Department of Health and Human Services (MDHHS) approximately \$5,000.</p> <p><b>Potential Hearings &amp; Appeal Issues:</b> None anticipated</p>
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<b>State Plan Amendment Required:</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, date submitted: 12/31/2018	<b>Public Notice Required:</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Submitted date: 9/30/2018
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**Tribal Notification:** Yes  No  - Date: 9/26/2018

**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  
Medical Services Administration

**Distribution:** Hospitals, Practitioners

**Issued:** June 1, 2019 (Proposed)

**Subject:** Beneficiary Co-Payment Increase for Outpatient Hospital Visits

**Effective:** July 1, 2019 (Proposed)

**Programs Affected:** Medicaid, Healthy Michigan Plan, Maternity Outpatient Medical Services (MOMS), MI Health Link

This bulletin is issued in response to Michigan Public Act 207 of 2018. Section 1631(2)(d) of the Act requires an increase in the Medicaid co-payment amount for an outpatient hospital clinic visit (the 051x revenue codes).

Beginning with July 1, 2019 dates of services or after, the co-payment for a hospital outpatient visit will increase to \$2 for beneficiaries in the following Medicaid programs:

- Medicaid Fee-for-Service
- Healthy Michigan Plan with an income less than 100% of the federal poverty level (FPL). **Note:** The Healthy Michigan Plan currently charges a co-pay of \$4 for Hospital Outpatient visits for beneficiaries who are over 100% of the FPL.

All other co-payment requirements remain the same.

Different co-payment requirements may apply to beneficiaries enrolled in a Medicaid Health Plan. Providers are expected to utilize the cost-sharing information in the Community Health Automated Medicaid Processing System (CHAMPS) to determine whether cost-sharing may be assessed at the time of the visit and inform the beneficiary of their cost-sharing obligations. Services and populations currently exempt from co-payments remain exempt.

Beneficiaries affected by this increase will receive notice from the Michigan Department of Health and Human Services informing them of the revised co-payment amount.