

Bulletin Number: MMP 23-02

Distribution: Practitioners, Outpatient Hospitals, Federally Qualified Health Centers, Local Health Departments, Rural Health Clinics, Community Mental Health Services Programs, Prepaid Inpatient Health Plans, Medicaid Health Plans, Integrated Care Organizations, Tribal Health Centers

Issued: January 5, 2023

Subject: Medicaid Coverage of Services Performed by Behavioral Health Program Graduates

Effective: February 4, 2023

Programs Affected: Medicaid, Healthy Michigan Plan, Maternity Outpatient Medical Services (MOMS), MICHild, Children's Special Health Care Services (CSHCS)

The purpose of this bulletin is to expand the types of providers allowed to perform Medicaid-covered non-physician outpatient behavioral health services.

For dates of service on or after February 4, 2023, Medicaid will cover and reimburse outpatient behavioral health services provided by graduates of a board-approved master's or doctoral-level psychology, social work, counseling, or marriage and family therapy educational training program who have completed all the requirements for a limited or temporary license as specified in the applicable licensing rules but have not obtained the license from the Michigan Department of Licensing and Regulatory Affairs (LARA). Graduates must be supervised (as defined under Section 333.16109 of the Public Health Code (Act 368 of 1978)) by a Medicaid-enrolled, fully licensed provider of the same profession and are not eligible to enroll or be directly reimbursed by Medicaid. Services must be billed to Medicaid under the National Provider Identifier (NPI) of the supervising billing provider.

This is a temporary, time-limited allowance for graduates. The policy is not intended to replace or supersede a graduate's obligation of obtaining appropriate LARA limited/temporary educational licensure. Medicaid will cover and reimburse services performed by the graduate for a period of no longer than one year from the date the individual successfully completed their graduate coursework. The graduate's supervising billing provider must monitor and ensure compliance of this requirement.

All other non-physician behavioral health provider requirements remain unchanged. Medicaid continues to cover outpatient behavioral health services performed by a Licensed Psychologist, Social Worker, Marriage and Family Therapist, Professional Counselor, Limited Licensed Psychologist, or Temporary Educational Limited Licensees and by student interns in these fields when supervised by a Medicaid-enrolled, fully licensed provider of the same profession. (Refer to the Behavioral Health and Intellectual and Developmental Disability Supports and Services chapter of the [Michigan Department of Health and Human Services \[MDHHS\] Medicaid Provider Manual](#), Non-Physician Behavioral Health Appendix, for additional policy and coverage information.)

Medicaid Health Plans/Integrated Care Organizations

Medicaid Health Plans (MHPs) and Integrated Care Organizations (ICOs) must provide the full range of covered services described in this policy at a minimum and may choose to provide services over and above those specified. Graduates who plan to provide services to MHP beneficiaries should contact the MHP/ICO for additional credentialing and/or contract requirements.

Pre-Paid Inpatient Health Plans (PIHPs)/Community Mental Health Services Programs (CMHSPs)

Specialty behavioral health services and supports covered by the PIHPs/CMHSPs are available and reimbursed through the PIHP/CMHSP. Refer to the Behavioral Health and Intellectual and Developmental Disability Supports and Services chapter of the MDHHS Medicaid Provider Manual for additional information on these services. For beneficiaries receiving PIHP/CMHSP services, the provider must check with the PIHP/CMHSP for additional credentialing requirements and/or billing instructions.

Manual Maintenance

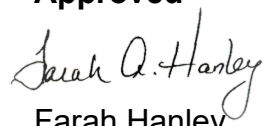
Retain this bulletin until the information is incorporated into the MDHHS Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mailed to ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Typical Providers may phone toll-free 1-800-292-2550. Atypical Providers may phone toll-free 1-800-979-4662.

An electronic copy of this document is available at www.michigan.gov/medicaidproviders >>
Policy, Letters & Forms.

Approved

A handwritten signature in black ink that reads "Farah Hanley". The signature is written in a cursive style with a large, looping initial "F".

Farah Hanley
Chief Deputy Director for Health