Complete Update
for Blues Medicaid providers
Blue Cross complete of Michigan
December 2019

Eligibility changes to Healthy Michigan Plan

Beginning January 1, 2020, Michigan law will require Healthy Michigan Plan members ages 19 to 62 to work or do other activities, such as job search, for at least 80 hours each month. The members will need to report work or activities each month to the Michigan Department of Health and Human Services to keep their health plan coverage.

Qualifying activities include job or income, job search, job training, internship, school or volunteering, substance use disorder rehab or participation in a tribal employment program. Some individuals will be exempt, such as pregnant women, caregivers of a family member under six years of age, members identified as medically frail and members incarcerated within the last six months. See the full details at Healthy Michigan Plan/Changes Coming in 2020/Work Requirements.*

This link includes HMP Work Requirements Toolkits* that includes materials you could use to educate your Healthy Michigan Plan members about this new requirement.

Encourage your members to add healthy behaviors such as scheduling an annual checkup or completing the Health Risk Assessment form with their primary care physician. The HRA, available in English, Spanish and Arabic, can be found at Healthy Michigan Plan/After Enrollment.*

For details to distribute to your members, click on the hyperlink to view flyer MSA-1913.* For more information, contact your Blue Cross Complete provider account executive or Blue Cross Complete Provider Inquiry at **1-888-312-5713**.

MDHHS has extended certification deadline for behavioral health specialists who treat autism

To help ensure access, quality and compliance of autism spectrum disorder benefit services, the Michigan Department of Health and Human Services is extending a deadline that'll require behavioral health practitioners to become board-certified behavior analysts.

The new deadline, September 30, 2025, will allow behavioral health treatment supervisors, including licensed psychologists, limited license psychologists and qualified behavioral health professionals to continue to treat patients. The decision to extend the deadline for certification, originally set for Jan. 1, 2020, was made by MDHHS and the Behavioral Health and Developmental Disabilities Administration, to address an expected provider network shortage.

For details, visit MDHHS at
Medical Services Administration bulletin 19-21.*

For more information, contact your Blue Cross Complete provider account executive or Blue Cross Complete Provider Inquiry at **1-888-312-5713.**

Revision of MDHHS standards of coverage for lower extremity orthotics

Effective October 1, 2019, the Michigan Department of Health and Human Services covers lower extremity orthotics regardless of diagnosis for the following indications:

- Promote alignment, positioning and promoting healing following injury, procedure (for example, casting) or surgery of the lower extremity.
- Support lower extremities due to muscle weakness or abnormal muscle tone of permanent or long-standing duration.
- Support, correct or improve:
  - o Biomechanical alignment
  - o Static or dynamic contractures
  - o Congenital or acquired deformities of the lower extremities

For details, visit MDHHS at
Medical Services Administration bulletin 19-25.*

If you have questions, contact your Blue Cross Complete provider account executive or Provider Inquiry at **1-888-312-5713**.

Blue Cross Complete documents for prior authorization

To prevent a delay in processing an authorization of inpatient hospital services, submit the following documents at the time of the request, if applicable:

- History and physical exam
- Pertinent labs
- Imaging findings

Phone or fax the request, along with supporting documentation, to:

Phone: **1-888-312-5713** (press 1, then 4 to request authorization)
Fax: 1-**888-989-0019**
NaviNet provider portal*

For additional information, refer to Section 10 (Managing Utilization) of the Blue Cross Complete Provider Manual.

Thank you for all you do in providing the highest-quality care for our members. If you have any questions, contact your Blue Cross Complete provider account executive or call Provider Inquiry at **1-888-312-5713**.

*Our website is mibluecrosscomplete.com. While website addresses for other organizations are provided for reference, Blue Cross Complete does not control these sites and is not responsible for their content.

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