

Michigan Department of Community Health

Bulletin Number: MSA 09-17

Distribution: Pharmacies

Issued: April 1, 2009

Subject: Pharmacy Beneficiary Eligibility Verification

Effective: Immediately

Programs Affected: Medicaid, Adult Benefits Waiver (ABW), Children's Special Health Care Services (CSHCS), Maternity Outpatient Medical Services (MOMS), MICHild, Plan First!

The Michigan Department of Community Health (MDCH) recently issued Policy Bulletin MSA 09-04 announcing the elimination of the free phone Automated Voice Response System (AVRS) to verify beneficiary eligibility as a result of Executive Order 2008-21. Providers, including pharmacies, were directed to a free alternative using Blue Cross/Blue Shield of Michigan's (BCBSM) web-DENIS. MDCH was informed that some pharmacies (i.e. those not dually enrolled as DME/Medical Suppliers with MDCH) may experience difficulty being granted web-DENIS access due to BCBSM's internal policies/procedures.

In lieu of web-DENIS, MDCH has made arrangements for the following free alternatives for pharmacy providers to verify beneficiary eligibility through the Michigan Public Health Institute (MPHI):

MI Healthplan Benefits Website

This website allows users to submit individual or multiple eligibility inquiries (up to 15 at a time) using a single date of service (DOS) or DOS span. The following website contains an access enrollment form:

<https://healthplanbenefits.mihealth.org/> >> Enrollment Form. Complete this form and e-mail it to MPHI at MedicaidEligibility@mphi.org. Providers must submit their National Provider Identifier (NPI) on the access form. MPHI will then create an account and provide a user ID/password to access this system.

X12 270/271 (Real time) Health Insurance Portability and Accountability Act of 1996 (HIPAA) Transaction

This transaction allows users to submit individual eligibility requests at any time using a single DOS or DOS span. This option provides an immediate real time response to each eligibility request. The following website provides additional information including testing and MPHI's companion guide: <http://mihealth.org/> >> Trading Partners >> Medicaid Healthplan 270/271 Companion Guide v3.0 >> MPHI Companion Document v3.0 20070312.pdf.

X12 270/271 (Batch) HIPAA Transaction

This transaction allows users to submit a batch file at any time and receive a response file within 24 hours. Note: Responses will usually be returned within an hour depending on the size of the file and if other files are being processed at that time. The following website provides additional information including testing and MPHI's companion guide: <http://mihealth.org/> >> Trading Partners >> Medicaid Healthplan 270/271 Companion Guide v3.0 >> MPHI Companion Document v3.0 20070312.pdf.

MPHI provides the same eligibility information as the AVRS including the eligibility update schedule (i.e. daily eligibility updates and weekly other insurance [Third Party Liability] updates). Please direct any questions by e-mail to Jamy Hengesbach at hengesbachj@michigan.gov.

Public Comment

The public comment portion of the policy promulgation process is being conducted concurrently with the implementation of the change noted in this bulletin. Any interested party wishing to comment on the change may do so by submitting comments in writing to:

Attn: Jamy Hengesbach
MDCH/MSA
PO Box 30479
Lansing, Michigan 48909-7979
Or
E-mail: hengesbachj@michigan.gov

If responding by e-mail, please include "Pharmacy Beneficiary Eligibility Verification" in the subject line.

Comments received will be considered for revisions to the change implemented by this bulletin.

Manual Maintenance

Retain this bulletin until the information has been incorporated into the Michigan Medicaid Provider Manual.

Questions

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

Approved



Stephen Fitton, Acting Director
Medical Services Administration