

Caseload, Navigation-Only, and Medicaid Treatment Act (MTA) Client Eligibility and Reimbursement Guidelines

Effective Date July 1, 2015

I Introduction

Low income women are eligible to enroll in the Breast and Cervical Cancer Control Navigation Program (BCCCNP) if they meet all client eligibility requirements as described in these guidelines. Agency reimbursement for program services is based on current fiscal year funding and client receipt of services.

II Client Eligibility for ALL BCCCNP Services

Women must meet the following income, age, insurance, residency and specific program requirements (Caseload, Navigation, and Medicaid Treatment Act) PRIOR to receiving any program services.

A. Income: \leq 250% Federal Poverty Level (FPL) (Appendix A)

B. Age

1. 40-64 and requiring breast/cervical screening/diagnostic/treatment services

OR

2. 21–39 and referred to BCCCNP with an abnormal screening Pap test OR clinical breast exam which requires breast/cervical diagnostic services

C. Residency: (includes any of the following)

1. Current Michigan Resident

2. Migrant Worker

3. Women living near the border of a neighboring state (Indiana, Ohio, Wisconsin, Minnesota) who plan to receive screening and diagnostic services in Michigan.

III. CASELOAD SERVICES Client Eligibility

A. All of the following are required:

1. Income, Age, Residency Requirements: As described in II A – C.

2. Citizenship: US citizens, documented or non-documented residents are eligible.

3. Insurance Status:

a. Uninsured (no health insurance)

- At least ONE screening or diagnostic service MUST be reimbursed by BCCCNP

b. Underinsured (screening services are covered by insurance but has high deductible for diagnostic services)

- At least ONE DIAGNOSTIC service MUST be reimbursed by BCCCNP

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- c. Fully insured women (all services paid by insurance provider) are NOT eligible for BCCCNP Caseload Services

NOTE:
BCCCNP CANNOT reimburse for a woman's services if she chooses to receive these services from an Out of Network provider instead of a participating provider identified by her insurer.

4. Data Entry: All required client and clinical service data are entered in MBCIS.

NOTE: Agencies providing Caseload and WISEWOMAN Services

- WISEWOMAN participants receiving BCCCNP caseload services should receive WISEWOMAN services at the same time they receive their B&C services. This is a CDC requirement.

B. Reimbursement

1. Caseload Requirement: Clients meeting all requirements in III A. 1-4 will count towards the agency's allocated caseload for FY 2016 (October 1, 2015 – September 30, 2016).
2. FY 2016 reimbursement is \$175.00/caseload client.

IV. NAVIGATION-ONLY Client Eligibility

(Agency does **NOT** provide WISEWOMAN Program Services)

A. All of the following are required:

1. Income, Age, Residency Requirements: As described in II A – C.
2. Citizenship: US citizens, documented or non-documented residents are eligible.
3. Insurance Status: Insured
4. Additional Criteria: Client **MUST** meet the following "Readiness to Screen" criteria
 - a. Requires breast/cervical screening or diagnostic services.
 - b. Willing to follow through to receive identified services.
 - c. Requires Agency Navigator ASSISTANCE to overcome problems/barriers preventing client from receiving services.
 - d. Has received a minimum of 2 (TWO) contacts (encounters) from BCCCNP Navigator.
 - e. Receives needed breast/cervical screening/diagnostic services.

5. Data Entry: All required data are entered in the MBCIS Patient Navigation

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data base.

- B. Reimbursement (NO WISEWOMAN Program Services)
 - 1. For FY 2016 (October 1, 2015 – September 30, 2016) reimbursement is \$60.00/insured client who meets all requirements IV A. 1-5.
 - 2. Navigation-Only client data will be reviewed by MDHHS Nurse Consultants and approved for payment if all essential data components are complete in MBCIS.

- V. For BCCCNP Agencies Providing Navigation-Only AND WISEWOMAN services to INSURED Clients
 - A. All of the following are required:
 - 1. Income, Age, Residency Requirements: As described in II A – C.
 - 2. Citizenship: US citizens, documented or non-documented residents are eligible.
 - 3. Insurance Status: Insured
 - 4. Additional Criteria: Client **MUST** meet the following “Readiness to Screen” criteria:
 - a. Requires breast/cervical screening or diagnostic services.
 - b. Willing to follow through to receive identified services.
 - c. Requires Agency Navigator ASSISTANCE to overcome problems/ barriers preventing client from receiving services.
 - d. Has received a minimum of 2 (TWO) contacts (encounters) from BCCCNP Navigator.
 - e. *Receives needed breast/cervical screening and/or diagnostic services PRIOR to enrolling in WISEWOMAN.*
 - 5. Data Entry” All required data are entered in the MBCIS Patient Navigation data base.
 - B. Reimbursement
 - 1. Navigation-Only Insured clients referred to the individual BCCCNP agency to receive breast/cervical screening services are eligible to enroll in WISEWOMAN AFTER they receive all needed breast/cervical screening and/or diagnostic services.
 - 2. BILLABLE BCCCNP Navigation-Only Client Services
 - To qualify for the \$60.00 reimbursement, the BCCCNP navigator **MUST** document specific client **BARRERS** that may impede receipt of breast/cervical services AND

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- the BCCCNP Navigator MUST document assistance provided to the client to overcome each barrier.
3. NON-BILLABLE BCCCNP Navigation-Only Client Services
- Navigation-Only clients referred to the individual BCCCNP agency to receive breast/cervical screening services who **DO NOT** require navigator assistance are eligible to enroll in WISEWOMAN but are **NOT** eligible to receive \$60.00 Navigation reimbursement.

V. MEDICAID TREATMENT ACT (MTA) Eligibility

A. Requirements

1. Diagnosed with breast or cervical cancer (or cervical pre-cancerous condition) and has not started treatment AND
2. Is a Michigan resident (as determined by verifiable current address and a picture ID (E.g. driver's license)) AND
3. Meets age and income requirements in II A - C.
4. Citizenship Requirement
 - a. US Citizen (verified by voter ID, birth certificate, Passport, Enhanced Michigan Driver's Licence), Documented Resident/Registered Alien (living in the US for > 5 years) OR Refugee
 - b. Non-US Citizen but Michigan Resident: Not eligible for full Medicaid (MTA) coverage but is eligible for Emergency Services Only (ESO). ESO does not cover cancer treatment.
5. Insurance
 - a. Uninsured: No health insurance
 - b. Underinsured (non-creditable health insurance defined below)
 - Insurance with a high-deductible (cost of deductible is a barrier to the woman receiving cancer treatment)
 - Inadequate insurance coverage for breast/cervical cancer treatment

NOTE:

- If client's insurance deductible is > \$1500, she can keep her current insurance AND enroll in BCCCNP MTA.
- If deductible < \$1500, client needs to drop insurance PRIOR to enrolling in BCCCNP MTA
- Clients who are eligible for Healthy Michigan Plan (HMP) have the option to enroll in HMP for treatment or enroll in MTA for treatment.

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6. Data Entry: All required data are entered in the MBCIS Patient Navigation data base.
- B. Reimbursement
1. All new and re-enrolled BCCCNP MTA clients are eligible to receive Navigation-Only Services and, as available, WISEWOMAN services.
 2. Renewing/re-enrolling MTA clients: BCCCNP navigator is required to verify continued MTA program eligibility and active receipt of cancer treatment.
 3. For FY 2016 (October 1, 2015 – September 30, 2016) reimbursement is \$60.00/new or re-enrolled MTA client actively receiving treatment.
 4. Client data will be reviewed by MDHHS Nurse Consultants and approved for payment if essential data components are complete in MBCIS

APPENDIX A

Income/Poverty Level Requirement for BCCCNP Enrollment

1. Poverty level is determined based on a woman's verbal responses to the following two questions. (No written verification or review of tax documents is required.)
 - a. What is your yearly household family income?
 - b. How many people live in your family?
(Family consists of married persons or a single individual with or without dependent children.)
2. Clarification of "Household Family Income"
 - a. Family income includes the total income of a married couple or single person but **not** the income of dependents. **Do not** include income of other adults living in the same household.

Example:

A husband and wife are both wage earners. They support a fifteen year old son who works part-time at a local restaurant. While the income of both husband and wife are counted, the income of the son is not included in family income.

- b. Inclusion of Family Income - If the wage earner(s) receives additional income other than wages, this income is included in family income (e.g. Social Security, SSI, alimony received, child support received, unemployment compensation, workmen's compensation, disability benefits, pension/retirement, military allotments, veteran's benefits, and interest from assets.

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Example:

A woman receives SSI benefits. She lives with her daughter who provides care for her. In assessing the woman's income for BCCCP eligibility the daughter's income is not included. You would include only the mother's income.

- c. Allowable Deductions from Family Income - include the following: work related expenses, alimony/child support paid, adult day care for a parent with dementia, and child care for working parents, health/ hospital insurance premiums, and family medical expenses paid out-of-pocket.