



Just the Fax

A fax bulletin from Molina Healthcare of Michigan (MHM) • March 9, 2022

MDHHS PROVIDER TYPE BILLING REQUIREMENTS

MDHHS notified Molina of claims that have rejected for “Provider Type Not Allowed for Referring/Ordering/Attending NPI.” Claims related to the rejections received by the health plan will be recovered and corrected claims will need to be submitted. Please review claims billing guidelines to ensure your claims are billed properly. Below are some guidelines from the MDHHS.

Ordering, Referring, and Attending Providers Requirements

- The name and NPI of the ordering/referring or attending provider must be reported on all claims for services rendered as a result of an order/referral. Please refer to the Michigan Medicaid Provider Manual for order/referral requirements for specific services.
- Ordering/referring, rendering, billing and attending providers **must** be enrolled and active in CHAMPS on the date of service on the claim. The NPI on the ordering/referring, rendering and attending field should be a Type 1 Individual/Sole Proprietor NPI.
- Based on MDHHS requirements services that require an order or referral include, but are not limited to: ambulance nonemergency transports, ancillary services for beneficiaries residing in nursing facilities, childbirth / parenting and diabetes self-management education, consultations, diagnostic radiology services, unless rendered by the ordering physician, durable medical equipment (DMEPOS), hearing and hearing aid dealer services, home health, hospice, laboratory, certain mental health and substance abuse children’s waiver services, certain Maternal Infant Health Program (MIHP) services, pharmacy services, certain school based services, therapy services, and certain vision supplies.
- It is allowable for an Attending Provider for FQHC/RHC/THC to bill the following:
 - Physicians (includes podiatrists, optometrists, and chiropractors), Nurse Practitioners, Physician Assistants, Certified Nurse Midwives, Clinical Psychologists, Clinical Social Workers, Clinical Nurse Specialists, Licensed Psychologists (Doctoral Level), Social Workers (Master’s Level), Professional Counselors (Master’s or Doctoral Level), Marriage and Family Therapists, and Limited License Psychologists (Master’s or Doctoral Level)

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- For a behavioral health service, the attending provider (MD/DO/Medical Director) should be listed on the institutional billing claim form even if there is not a direct relationship with the MD/DO/Medical Director. If a patient is receiving behavioral health services from a licensed clinical social worker or licensed professional counselor, they may be doing so under the supervision of the MD/DO/Medical Director in the clinic. The rendering provider should be listed on the institutional billing form as well.
- Services performed by limited licensed psychologists (except as noted in Section 333.18223 of the Public Health Code), social workers, and professional counselors, or student interns must be performed under the supervision of an enrolled, fully-licensed provider of the same profession. Services are billed to Molina under the NPI of the supervising psychologist, social worker or professional counselor as the rendering provider.
- Institutional providers submitting claims for self-referred mammography services will duplicate the billing provider NPI in the attending physician NPI field.
- All institutional (UB) claims need to have Attending provider, except for hospital- owned Ambulance claims.
- For specific allowed provider types for the Attending, Ordering, and Referring provider, please see <https://www.molinahealthcare.com/providers/mi/medicaid/forms/fuf.aspx> and select **Approved Attending, Ordering and Referring Specialties**.
- For claim denials received by Molina, please ensure you refer to this bulletin prior to submitting a dispute. Claim denials will have any of these edits listed: N253, N265, N286, N95, M68, M808, and/or N261. If your claim does not follow the allowable provider types listed above the dispute will be upheld. It is important that you submit a **corrected claim** including an allowable provider type in the Attending, Ordering, Referring provider fields. If you believe your claim denial is inappropriate with the provider type rules, please submit a dispute online at www.molinahealthcare.com.
- For additional resources providers can reference the MDHHS Medicaid Provider Manual or MSA Bulletin 21-45.