

# MICHIGAN

Department of Health & Human Services (MDHHS) <sup>99, 100, 101</sup>

Assessment & Counseling	Pharmacotherapy		
<p><b>COVERAGE may include:</b></p> <p><b>Preventive Counseling</b> 99401-99402, 99385-99387, 99395-99397</p> <ul style="list-style-type: none"> <li>- Effective July 1, 2016, MDHHS implemented a primary care health home benefit called the MI Care Team for beneficiaries with comorbid physical and behavioral health conditions.</li> <li>- Includes connection of beneficiary to nutritional counseling and obesity prevention/reduction.</li> </ul> <p><b>Behavioral Assessment/Intervention</b> None</p> <ul style="list-style-type: none"> <li>- MDHHS policy covers obesity treatment when done to control life-endangering complications such as hypertension and diabetes. This does not include treatment specifically for obesity or weight reduction/maintenance alone.</li> <li>- Physician must request prior authorization documenting that conservative measures to control weight and manage complications have failed (include medical history, past and current treatments/results, etc.)</li> </ul> <p><b>Nutritional Consultation &amp; Therapy</b> None</p> <p><i>NOTE: MDHHS covers trauma-related services under the EPSDT benefit (noting that adverse childhood experiences are related to obesity in adulthood).</i></p>	<p><b>COVERAGE may include:</b></p> <p>Xenical (<i>orlistat</i>)</p> <ul style="list-style-type: none"> <li>- <b>Prior authorization</b> is required.</li> <li>- Must document current medical status, current therapies/treatments, accurate BMI, and confirmation that there are no medical contraindications to medication</li> <li>- Must include details of previous weight loss attempts (at least two failed physician-supervised attempts are required)</li> </ul> <tr> <th data-bbox="728 802 1362 872">Bariatric Surgery</th> </tr> <p><b>COVERAGE may include:</b></p> <p>Gastric Bypass, Gastric Band, Sleeve Gastrectomy</p> <ul style="list-style-type: none"> <li>- <b>Prior authorization</b> is required.</li> <li>- PA must include a psychiatric evaluation of the beneficiary's willingness/ability to alter their lifestyle following surgical intervention.</li> <li>- If the request is approved, the provider receives an authorization letter for the service, including billing instructions.</li> <li>- A copy of the authorization letter must be attached to all claims submitted to MDCH for weight reduction services.</li> </ul>	Bariatric Surgery	<div data-bbox="1549 305 1818 565" data-label="Image"> </div> <p>Adults with obesity: <b>31%</b> <sup>3</sup> Adults with diabetes: <b>9%</b> <sup>3</sup></p> <p><b>19%</b> of residents covered by Medicaid/CHIP <b>\$15.9 billion</b> in total Medicaid spending (2015)</p> <p><b>75%</b> enrolled in managed care <b>25%</b> enrolled in fee-for-service <sup>4</sup></p> <p><b>Resources &amp; Contacts:</b></p> <p><b>Department of Health &amp; Human Services</b> Phone: 517-373-3740</p> <p><b>Insurance &amp; Financial Services (DIFS)</b> Phone: 517-284-8800</p> <p><b>Primary Care &amp; Public Health</b> Phone: 800-292-2550</p>
Bariatric Surgery			