

ADMINISTRATIVE POLICY STATEMENT
Michigan Medicaid

Policy Name & Number	Date Effective
Itemized Billing-MI MCD-AD-1381	06/01/2024
Policy Type	
ADMINISTRATIVE	

The ADMINISTRATIVE Policy Statement detailed above has received due consideration as



- G. rental equipment
- H. routine supplies

- IV. If upon review of the itemized bill, charges are determined to exceed state or federal reimbursement guidelines or a CareSource specific policy, then reimbursement will be reduced accordingly.

- V. Provider exception requests to reimbursement reductions may be submitted via standard provider appeal process and should include supporting documentation (eg, medical records or operative notes to support requested payment exception).

- E. Conditions of Coverage
NA

- F. Related Policies/Rules
NA

- G. Review/Revision History
[REDACTED]

The ADMINISTRATIVE Policy Statement detailed above has received due consideration as defined in the ADMINISTRATIVE Policy Statement Policy and is approved.