

Michigan's Medicaid Treatment Act

Medicaid Bulletin Beneficiary Eligibility (BE) 01-03 Effective October 1, 2001

Federal legislation which allows states the option of Medicaid coverage for females between the ages of 18 through 64 years who are participants in the Breast and Cervical Cancer Control Program (BCCCP). District Health Department No. 4 calls their BCCCP program the Woman's Cancer Screening Program. Medicaid coverage allows participants to receive treatment for breast and/or cervical cancer after screening and diagnosis through the BCCCP. **NOTE:** The Family Planning/BCCCP program allows participants to receive treatment for cervical cancer only.

Michigan uses the eligibility of the BCCCP or FP/BCCCP to allow women on limited incomes, without insurance coverage, or who have insufficient insurance coverage to receive medical treatment for breast and/or cervical cancer (as applicable) or a precancerous condition.

For Medicaid coverage, the begin date is the first day of the month in which eligibility is found, beginning with the month of application.

For retroactive Medicaid, eligibility can begin up to three months prior to the month of application. A retro-Medicaid application must be filed for each month requested. The beneficiary must meet program requirements for each month that retro-medical coverage has been requested.

Individuals who have been screened and diagnosed under the BCCCP or FP/BCCCP and need to receive cancer or pre-cancerous treatment may apply for Medicaid coverage under this program.

Medicaid eligibility must be reviewed yearly. A completed and signed application by both the beneficiary and BCCCP agency must be filed with the Medicaid agency. The application must certify the beneficiary continues to meet all financial and non-financial eligibility factors and continues to receive treatment for cancer or pre-cancerous condition.

A beneficiary remains eligible for Medicaid until:

- * The course of treatment has ended as determined by the BCCCP agency, or
- * She no longer meets the eligibility criteria for this program (such as, has obtained creditable insurance coverage; attained age 65).