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**State/Territory Name: Michigan**

**State Plan Amendment (SPA)#: 23-0013**

This file contains the following documents in the order listed

- 1) Approval Letter
- 2) CMS 179
- 3) Approved SPA Pages

**DEPARTMENT OF HEALTH & HUMAN SERVICES**  
Centers for Medicare & Medicaid Services  
601 E. 12th St., Room 355  
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

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June 16, 2023

Meghan E. Groen  
Senior Deputy Director  
Behavioral and Physical Health and Aging Services Administration  
Michigan Department of Health and Human Services  
400 S Pine St 7th Fl  
Lansing, MI 48933-2250

Re: Michigan State Plan Amendment (SPA) 23-0013

Dear Ms. Groen:

The Centers for Medicare & Medicaid Services (CMS) reviewed the proposed Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0013. This amendment proposes to provide a temporary extension to specific COVID-19 disaster relief provisions for drug benefits authorized in DR SPAs 20-0005 and 22-0002.

CMS conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations. This letter is to inform you that MI Medicaid SPA Transmittal Number 23-0013 was approved on June 16, 2023, with an effective date from May 12, 2023 to September 30, 2023.

If you have any questions, please contact Keri Toback at 312-353-1754 or via email at [keri.toback@cms.hhs.gov](mailto:keri.toback@cms.hhs.gov).

Sincerely,

Alissa Mooney DeBoy  
On Behalf of Anne Marie Costello, Deputy Director  
Center for Medicaid and CHIP Services

Enclosures

cc: Erin Black

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b> <b>FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b>		1. TRANSMITTAL NUMBER 23 — 0013	2. STATE MI
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT	
5. FEDERAL STATUTE/REGULATION CITATION  Sections 201 and 301 of the National Emergencies Act (50 U.S.C.1601 et seq.)		3. PROPOSED EFFECTIVE DATE May 12, 2023 until September 30, 2023	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  Section 7.4.B Temporary Extension to the Disaster Relief Policies for the COVID-19 National Emergency		6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY 2023 \$0 b. FFY 2024 \$0	
9. SUBJECT OF AMENDMENT This SPA provides a temporary extension to specific COVID-19 disaster relief provisions for drug benefits currently authorized in DR SPAs 20-0005 and 22-0002.		8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)  New	
10. GOVERNOR'S REVIEW (Check One) <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT  <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL                 </div> <div style="width: 45%;"> <input checked="" type="checkbox"/> OTHER, AS SPECIFIED:                 </div> </div>			
11. TYPED NAME Farah Hanley		15. RETURN TO Behavioral and Physical Health and Aging Services Administration Office of Strategic Partnerships & Medicaid Administrative Services – Federal Liaison Capitol Commons Center – 7 <sup>th</sup> Floor 400 South Pine Lansing, Michigan 48933  Attn: Erin Black	
12. TITLE Senior Chief Deputy Director for Health		11. SIGNATURE OF STATE AGENCY OFFICIAL	
13. DATE SUBMITTED May 15, 2023		17. DATE APPROVED 06/16/2023	
<b>FOR CMS USE ONLY</b>			
16. DATE RECEIVED 05/15/2023		18. EFFECTIVE DATE OF APPROVED MATERIAL May 12, 2023 until September 30, 2023	
<b>PLAN APPROVED - ONE COPY ATTACHED</b>			
20. TYPED NAME OF APPROVING OFFICIAL Alissa Mooney DeBoy On Behalf of Anne Marie Costello		19. SIGNATURE OF APPROVING OFFICIAL	
22. REMARKS		21. TITLE OF APPROVING OFFICIAL Deputy Director, Center for Medicaid and CHIP Services	

State/Territory: Michigan

## Section 7 – General Provisions

### 7.4. B. Temporary Extension to the Disaster Relief Policies for the COVID-19 National Emergency

*Effective May 12, 2023 until September 30, 2023, the agency temporarily extends the following election(s) of section 7.4 (approved 06/05/2020 in SPA number MI-20-0005 and approved 03/30/2022 in SPA number MI-22-0002) of the state plan:*

#### **Drug Benefit:**

X The agency makes the following adjustments to the day supply or quantity limit for covered outpatient drugs. The agency should only make this modification if its current state plan pages have limits on the amount of medication dispensed:

#### **Early Refills**

*The State of Michigan is requesting to override certain point-of-sale edits to facilitate early refills. Overrides at either the pharmacy level or the call center shall be used to bypass utilization edits to allow an increased upper limit of quantities for acute medications up to 102 days supply when appropriate and permitted by Federal or State law. The overrides will also allow for early refills of prescriptions after at least half of the previous fill has been used and will continue to be allowed to bypass prescriber network requirements.*

#### **Signature Requirements**

*State is requesting they waive any signature requirements for the dispensing of drugs during the Public Health Emergency.*

X The Prior authorization for medications is expanded by automatic renewal without clinical review, or time/quantity extensions.

TN: 23-0013

Supersedes TN: NEW

Approval Date: 06/13/2023

Effective Date: May 12, 2023 until  
September 30, 2023