## **Table of Contents**

### **State/Territory Name: Michigan**

### State Plan Amendments (SPA) #: MI-13-0005

This file contains the following documents in the order listed:

Approval Letter
SPA Summary Form
Approved SPA Pages

The complete title XXI state plan for Michigan consists of the most recent state plan posted on Medicaid.gov under CHIP and State Plan Amendments. The link is provided below. The following approved templates are in addition to, or replace sections of the state's posted current state plan. The attached approval letter(s) explain how these templates fit into that state plan.

Link to state title XXI state plans and amendments: <u>http://medicaid.gov/Medicaid-CHIP-Program-Information/By-</u>Topics/Childrens-Health-Insurance-Program-CHIP/CHIP-State-Program-Information.html

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-01-16 Baltimore, MD 21244-1850

Children and Adults Health Programs Group



DEC 1 7 2015

Chris Priest, Director Medical Services Administration Michigan Department of Health and Human Services 400 South Pine Street, P.O. Box 30479 Lansing, MI 48909-7979

Dear Mr. Priest:

I am writing to inform you that the Centers for Medicare & Medicaid Services (CMS) has approved your title XXI Children's Health Insurance Program (CHIP) state plan amendment (SPA) number MI-13-0005, submitted on December 20, 2013, with additional information submitted on January 31, 2014, May 7, 2014, July 22, 2015, and December 16, 2015. This SPA relates to Modified Adjusted Gross Income (MAGI) Eligibility. It has an effective date of January 1, 2014, with the exception of the state's policies regarding substitution of coverage, which have an effective date of January 24, 2014, when Michigan eliminated its CHIP waiting period and subsequently adopted alternative substitution monitoring strategies.

Michigan's SPA number MI-13-0005 is approved to clarify the state's non-financial eligibility policies on residency, citizenship, social security numbers, substitution of coverage, and non-payment of premiums. We are enclosing copies of the approved state plan pages, and these approved pages supersede sections of Michigan's current state plan as detailed below:

New State Plan Page	Impact on Current State Plan Section	
CS17: Non-Financial Eligibility – Residency	Section 4.1.5	
CS18: Non-Financial Eligibility – Citizenship	Section 4.1.0	
CS19: Non-Financial Eligibility – Social	Section 4.1.9	
Security Number		
CS20: Non-Financial Eligibility – Substitution of	Section 4.4.4	
Coverage		
CS21: Non-Payment of Premiums	Section 8.7	

Your new title XXI project officer is Mr. Patrick Edwards. He is available to answer questions concerning this amendment and other CHIP-related issues. Mr. Edwards' contact information is as follows:

Centers for Medicare & Medicaid Services Center for Medicaid and CHIP Services Mail Stop: S2-01-16 7500 Security Boulevard Baltimore, MD 21244-1850 Page 2 – Mr. Chris Priest

Telephone: (410) 786-4463 Facsimile: (410) 786-9004 E-mail: <u>Patrick.Edwards@cms.hhs.gov</u>

Official communications regarding program matters should be sent simultaneously to Mr. Edwards and to Ms. Ruth Hughes, Associate Regional Administrator (ARA) in our Chicago Regional Office. Ms. Hughes' address is:

Centers for Medicare & Medicaid Services Division of Medicaid and Children's Health Operations 233 North Michigan Avenue, Suite 600 Chicago, IL 60601

If you have additional questions or concerns, please contact Mr. Manning Pellanda, Director, Division of State Coverage Programs, at (410) 786-5143. We look forward to continuing our work together on your program.

Sincerely,



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Anne Marie Costello Acting Director

Enclosures

cc: Ms. Ruth Hughes, ARA, CMS Region V, Chicago Children's Health Insurance **Program Eligibility** 

Home

### MI.0650.R00.00 - Jan 01, 2014

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### Type of SPA:

- MAGI Eligibility & Methods
- XXI Medicaid Expansion
- Establish 2101(f) Group
- Eligibility Processing
- Non-Financial Eligibility

## **Proposed Effective Date**

01/01/2014 (mm/dd/yyyy)

## Federal Statute/Regulation Citation

42 CFR 457.320, (b)(6), (c) and (d); 42 CFR 340(b); and Section 2105(c)(9) and 2107(e)(1)

## Federal Budget Impact

- This SPA has a budget impact. Total budget impact:
  - State Funds:
  - Federal Funds: \$

## Subject of Amendment

Please provide a brief summary of SPA changes.

Character Count: 48 This SPA sets non-financial eligibility for CHIP out of 2000

## Signature of State Agency Official

Submitted By: Erin Black Last Revision Dec 16, 2015 Date:

Dec 20, 2013 Submit Date:



State Name: Michigan

#### OMB Control Number: 0938-1148

Expiration date: 10/31/2014

CS1

Transmittal Number: MI - 13 - 0005

### Separate Child Health Insurance Program Non-Financial Eligibility - Residency

42 CFR 457.320

#### Residency

 $\square The CHIP Agency provides CHIP to otherwise eligible residents of the state, including residents who are absent from the state under certain conditions.$ 

A child is considered to be a resident of the state under the following conditions:

A non-institutionalized child, if capable of indicating intent and who is emancipated or married, if the child is living in the state and:

1. Intends to reside in the state, including without a fixed address, or

2. Has entered the state with a job commitment or seeking employment, whether or not currently employed.

A non-institutionalized child not described above and a child who is not a ward of the state:

1. Residing in the state, with or without a fixed address, or

- 2. The state of residency of the parent or caretaker, in accordance with 42 CFR.435.403(h)(1), with whom the individual resides.
- An institutionalized child, who is not a ward of the state, if the state is the state of residence of the child's custodial parent or caretaker at the time of placement, or
- A child who is a ward of the state regardless of where the child lives, or
- A child physically located in the state when there is a dispute with one or more states as to the child's actual state of residence.

If the state covers pregnant women, a pregnant woman is considered to be a resident under the following conditions:

A non-institutionalized pregnant woman who is living in the state and:

- 1. Intends to reside in the state, including without a fixed address, or if incapable of indicating intent, is living in the state, or
- 2. Entered with a job commitment or seeking employment, whether or not currently employed.
- An institutionalized pregnant woman placed in an out-of-state-institution, as defined in 42 CFR 435.1010, including foster care homes, by an agency of the state, or
  - An institutionalized pregnant woman residing in an in-state-institution, as defined in 42 CFR 435.1010, whether or not the individual established residency in the state prior to entering the institution, or
- A pregnant woman physically located in the state when there is a dispute with one or more states as to the pregnant woman's actual state of residence.

The state has in place related to the residency of children and pregnant women (if covered by the state):



One	or more interstate agreement(s). No
1	A policy related to individuals in the state only for educational purposes. Yes
	Provide a description of the policy:
	The applicant is considered a resident of Michigan if, at the time of application, the applicant self-declares residency in Michigan and the intent to remain a resident of Michigan.

#### PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 50 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

V.20140415

DEC 1 7 2015 Approval Date:



#### OMB Control Number: 0938-1148 Expiration date: 10/31/2014

Separate Child Health Insurance Program	CS1
Non-Financial Eligibility - Citizenship Sections 2105(c)(9) and 2107(e)(1)(J) of the SSA and 42 CFR 457.320(b)(6), (c) and (d)	
sections $2105(C)(9)$ and $2107(C)(1)(3)$ of the SSA and $42$ CFR $457.520(0)(0)$ , (C) and (U)	· · · · · · · · · · · · · · · · · · ·
Citizenship	
The CHIP Agency provides CHIP eligibility to otherwise eligible citizens and nationals of the United S including the time period during which they are provided with reasonable opportunity to submit verification national status or satisfactory immigration status.	
The CHIP Agency provides eligibility under the Plan to otherwise eligible individuals:	
Who are citizens or nationals of the United States; or	
Who are qualified non-citizens as defined in section 431 of the Personal Responsibility and We Act (PRWORA) (8 U.S.C. §1641), or whose eligibility is required by section 402(b) of PRWORA prohibited by section 403 of PRWORA (8 U.S.C. §1613); or	
Who have declared themselves to be citizens or nationals of the United States, or an individual f status, during a reasonable opportunity period pending verification of their citizenship, national status consistent with requirements of 1903(x), 1137(d), and 1902(ee) of the Act, and 42 CFR 435	ity, or satisfactory immigratio
The reasonable opportunity period begins on and extends 90 days from the date the notice of reasonable by the individual.	onable opportunity is received
The agency provides for an extension of the reasonable opportunity period if the individual is make to resolve any inconsistencies or obtain any necessary documentation, or the agency needs more to verification process.	
The agency begins to furnish benefits to otherwise eligible individuals during the reasonable oppo earlier than the date the notice is received by the individual.	ortunity period on a date No
The CHIP Agency elects the option to provide CHIP coverage to otherwise eligible children up to age in the United States, as provided in Section 2107(e)(1)(J) of the SSA (Section 214 of CHIPRA 2009, F	
The CHIP Agency elects the option to provide CHIP coverage to otherwise eligible pregnant women. United States, as provided in Section 214 of CHIPRA 2009, P.L. 111-3. The state may not select this calso elects to cover lawfully residing children. A state may not select this option unless the state also c Income Pregnant Women.	option unless the state

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#### OMB Control Number: 0938-1148 Expiration date: 10/31/2014

2 CF	R 457.340(b)
Social	Security Number
de	s a condition of eligibility, the CHIP Agency must require individuals who have a social security number or are eligible for one as etermined by the Social Security Administration, to furnish their social security number, or numbers if they have more than one umber.
V	The CHIP Agency requires individuals, as a condition of eligibility, to furnish their social security number(s), with the following exceptions:
	Individuals refusing to obtain a social security number (SSN) because of well established religious objections, or
	Individuals who are not eligible for an SSN, or
	Individuals who are issued an SSN only for a valid non-work purpose.
	The CHIP Agency assists individuals, who are required to provide their SSN, to apply for or obtain an SSN from the Social Security Administration if the individual does not have or forgot their SSN.
	The CHIP Agency informs individuals required to provide their SSN:
	By what statutory authority the number is solicited; and
	How the state will use the SSN.
Ţ	The CHIP Agency provides assurance that it will verify each SSN furnished by an applicant or beneficiary with the Social Security Administration, not deny or delay services to an otherwise eligible applicant pending issuance or verification of the individual's SSN by the Social Security Administration and that the state's utilization of the SSNs is consistent with sections 205 and 1137 of the Social Security Act and the Privacy Act of 1974.
Т	he state may request non-applicant household members to voluntarily provide their SSN, if the state meets the requirements below.
	The state requests non-applicant household members to voluntarily provide their SSN.
	$\checkmark$ When requesting an SSN for non-applicant household members, the state assures that:
	At the time such SSN is requested, the state informs the non-applicant that this information is voluntary and provides information regarding how the SSN will be used; and
	The state only uses the SSN for determination of eligibility for CHIP or other insurance affordability programs, or for a purpose directly connected with the administration of the state plan.

#### PRA Disclosure Statement

Approval Date: DEC 1 7 2015

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State Name: Michigan

Transmittal Number: MI - 13 - 0005

#### Separate Child Health Insurance Program Non-Financial Eligibility - Substitution of Coverage

Section 2102(b)(3)(C) of the SSA and 42 CFR 457.340(d)(3), 457.350(i), and 457.805

#### Substitution of Coverage

The CHIP Agency provides assurance that it has methods and policies in place to prevent the substitution of group health coverage or other commercial health insurance with public funded coverage. These policies include:

Substitution of coverage prevention strategy:

Name of policy	Description	
COB Match	Michigan cross matches group health providers to determine current and recent health insurance status. The cross match is conducted by the administrative contractor upon receipt of the application and again prior to enrollment. In addition, to determine the percent of enrollees who dropped group health insurance without good cause to gain eligibility for CHIP, the State will identify a sample of individuals who have dropped employer sponsored insurance in the three months prior to application. If substitution exceeds 10% of the sample, the State will collaborate with CMS to identify a strategy to reduce substitution.	X

A waiting period during which an individual is ineligible due to having dropped group health coverage. No

If the state elects to offer dental only supplemental coverage, the following assurances apply:

The other coverage exclusion does not apply to children who are otherwise eligible for dental only supplemental coverage as provided in section 2110(b)(5) of the SSA.

The waiting period does not apply to children eligible for dental only supplemental coverage.

#### PRA Disclosure Statement

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V.20140415

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

**CS20** 



State Name: Michigan

Transmittal Number: MI - 13 - 0005

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

	Child Health Insurance Program Icial Eligibility - Non-Payment of Premiums	CS21
42 CFR 457.	570	
Non-Paymei	nt of Premiums	
Does the stat	te impose premiums or enrollment fees?	Yes
Can non	-payment of premiums or enrollment fees result in loss of CHIP eligibility?	Yes
Doe	es the state have a premium lock out period?	Yes
	Please describe the lock-out period:	
	Failure to pay the monthly premium will result in disenrollment from MIChild effective the first day of the month following the month for which the premium was due. A reminder is sent to the parent if the premium is not received by the 10th of the month. A second notice is sent at the end of the month advising the parent of pending termination the premium is not received along with the current premium by the 10th of the month. Coverage is terminated if payment is not received, and a third letter is sent verifying termination of coverage along with proof of medical coverage for the previous months in case it is needed for other insurance. The family may request reenrollment for CHIP at any time after termination. Parents requesting re-enrollment prior to the end of the 90 day lock out period must include past due premium payments along with the current premium payment at the time of enrollment. Paym of past due premiums is waived if the request for re-enrollment is received after the 90 day lockout has expired.	1 if
	What is the length of the time premium lock-out period?	
	Select a length of time:	
	C One month	
	C Two months	
	• 90 days	
	O Other (not to exceed 90 days)	
Are	there exceptions to the required lock-out period?	No
	The state assures that:	
	It does not require the collection of past due premiums or enrollment fees as a condition of eligibility for enrollment lock-out period has expired; and	once the
	It provides enrollees with an opportunity for an impartial review to address disenrollment from the program in accorwith section 457.1130(a)(3); and	dance
	The child will be reenrolled in CHIP during the lock-out period upon payment of past due premiums or enrollment	ees.

### PRA Disclosure Statement



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