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**State/Territory Name: Michigan**

**State Plan Amendment (SPA) #: MI-CHIP SPA #16**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) State Plan Pages

The complete final approved 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.

Link to state title XXI state plans and amendments: <http://medicaid.gov/Medicaid-CHIP-Program-Information/By-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: S2-26-12  
Baltimore, Maryland 21244-1850



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**SEP 29 2014**

Stephen Fitton, Director  
Medical Services Administration  
Michigan Department of Community Health  
400 South Pine Street, P.O. Box 30479  
Lansing, MI 48909-7979

Dear Mr. Fitton:

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) #16, submitted on March 21, 2014, with additional information and revised state plan pages submitted on September 15, 2014 and September 25, 2014. This SPA permits Michigan to implement title XXI administrative funding for a health services initiative (HSI) to support the Michigan Regional Poison Control Center (MRPCC) at Children's Hospital of Michigan. It has an effective date of July 1, 2014.

The HSI option at section 2105(a)(1)(D)(ii) of the Social Security Act permits a state to use funds available under its 10 percent administrative cap to pay for activities that protect public health, protect the health of individuals, improve or promote a state's capacity to deliver public health services, or strengthen the human and material resources necessary to accomplish public health goals relating to improving the health of children, including targeted low-income children and other low-income children in the state. Michigan shall ensure that remaining title XXI funding, within the state's 10 percent limit, is sufficient to continue the proper administration of the CHIP program. If such funds become less than sufficient, the state agrees to redirect title XXI funds from the support of this HSI to the administration of the CHIP program. The state shall report annually to CMS the expenditures funded by the HSI for each federal fiscal year.

Your title XXI project officer is Ms. Kathy Cuneo. She is available to answer questions concerning this amendment and other CHIP-related issues. Ms. Cuneo's 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  
Telephone: (410) 786-5913  
Facsimile: (410) 786-5882  
E-mail: [Kathleen.Cuneo@cms.hhs.gov](mailto:Kathleen.Cuneo@cms.hhs.gov)

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Official communications regarding program matters should be sent simultaneously to Ms. Cuneo and to Ms. Verlon Johnson, Associate Regional Administrator (ARA) in our Chicago Regional Office. Ms. Johnson's 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. Eliot Fishman, Director, Children and Adults Health Programs Group at (410) 786-5647.

We look forward to continuing to work with you and your staff.

Sincerely,

/Cindy Mann/

Cindy Mann  
Director

cc:

Ms. Verlon Johnson, ARA, CMS Region V, Chicago

## **Michigan CHIP State Plan Approved Language for HSI for Poison Control Center**

**2.2. Health Services Initiatives** - Describe if the State will use the health services initiative option as allowed at 42 CFR 457.10. If so, describe what services or programs the State is proposing to cover with administrative funds, including the cost of each program, and how it is currently funded (if applicable), and also update the budget accordingly. (Section 2105(a)(1)(D)(ii)); (42 CFR 457.10)

As permitted under section 2105(a)(1)(D)(ii) of the Social Security Act and federal regulations at 42 CFR 457.10, the State of Michigan is doing a health services initiative that will use CHIP funds, within the federal administrative expenditures cap allowed for states, to support the Michigan Regional Poison Control Center (MRPCC) at Children's Hospital of Michigan. The MRPCC provides emergency telephone treatment advice, referral assistance, and information to manage exposures to poisonous and hazardous substances. The MRPCC answers poisoning emergency calls from the general public as well as health care providers needing assistance 24 hours a day, 365 days each year at no charge.

The MRPCC provides numerous services including:

- 24-hour emergency and information hotline services
- follow-up calls regarding continuing care in poison exposure cases
- health and safety professional education
- state and national data collection providing epidemiologic public health surveillance
- access to emergency information as an integral part of local, state and national emergency preparedness
- responses for natural and manmade disasters
- acting as a clearinghouse for scarce resources and antidotes
- providing guidance in the treatment of hazardous incidents to the public
- providing interpretative assistance of forensic data for law enforcement and medical examiners
- assisting other federal and state agencies in risk-assessment for potentially toxic exposures

Certified Specialists in Poison Information and medical or clinical toxicologists are available 24 hours a day, 365 days a year to manage cases. The service is provided via a toll-free telephone number to every community throughout Michigan, including under-served, low income, and indigent populations. Services are available by use of an interpreter in over 150 languages and via telecommunications devices for the deaf and hearing impaired (TTY).

The MRPCC provides public education programs directed towards pediatric accidental poisoning as well as targeted "at-risk" populations. Educational materials and teaching curricula are distributed throughout the state, free of charge. Materials are also available in Spanish and Arabic. The MRPCC participates in a variety of community injury prevention including health fairs. The MRPCC also provides a robust professional educational program designed to train

medical and safety professionals in the identification and treatment of poisoning and hazardous exposures including pre-hospital and first-responder training.

The MRPCC receives approximately 66,000 calls from Michigianians annually involving individuals exposed to poisons or hazardous substances. Sixty-two percent of all poisoning exposure calls received involve children under age 19. For CHIP eligible children, over 44 percent of the total calls relate to poisoning exposures of children in families whose annual household incomes is \$47,100 or less (200% FPL for a family of 4 in 2013). In addition to calls regarding exposures, the MRPCC receives over 10,000 calls each year from Michigianians requesting information about poison prevention, effective use of chemicals, drug identification, substance abuse and other medical questions. These calls are considered preventive.

MRPCC intervention resulted in over 79 percent of the unintentional exposure calls (in children under age 19) being handled in the home so the children did not have to use an emergency department or need a 911 call and response. For those children whose exposure necessitated hospital evaluation and treatment, MRPCC intervention contributed substantially to reduced resource utilization and decreased length of stay with significant cost savings to the community.

The state assures that the Michigan Regional Poison Control Center (MRPCC) at Children's Hospital of Michigan will not supplant or match CHIP federal funds with other federal funds, nor allow other federal funds to supplant or match CHIP federal funds. The state will make payments to the MRPCC annually in the last quarter of the state's fiscal year.