

**MICHIGAN SECTION 1115 BEHAVIORAL HEALTH DEMONSTRATION
FACT SHEET**

October 4, 2019

Name of Section 1115 Demonstration:	Michigan 1115 Behavioral Health demonstration
Waiver Number:	11-W-00305/5
Date Proposal Submitted:	June 21, 2016
Date Approved:	April 5, 2019
Date Amended:	September 27, 2019
Date Expires:	September 30, 2024

SUMMARY

On June 21, 2016, Michigan submitted an 1115 demonstration request entitled *Pathway to Integration*. The purpose of this demonstration was to allow Michigan to broaden the crucial component of residential substance disorder services in the state’s existing network of substance use disorder (SUD) providers and SUD benefits to provide a broader continuum of care for beneficiaries seeking help with a SUD, including withdrawal management services in residential treatment facilities that meet the definition of an Institution for Mental Disease (IMD). Benefits under this demonstration were to be provided through a managed care delivery system. The state believed that offering a full continuum of SUD treatment and recovery supports based on American Society of Addiction Medicine (ASAM) criteria or other nationally recognized, SUD-specific program standards, would result in improved health outcomes and sustained recovery for this population. The demonstration was approved on April 5, 2019, to be effective until September 30, 2024.

At the time of approval of the 1115 SUD demonstration, CMS stated its intent to continue to work with Michigan on the state’s goals for expanded access to services, use of needs-based eligibility criteria, and streamlined program financing and management through the use of the appropriate authorities. Michigan authorized a managed care arrangement with the Prepaid Inpatient Health Plans (PIHP) using 1915 authority called the “Managed Specialty Services and Supports Program”. This arrangement allowed the PIHP to perform eligibility evaluations and determinations for beneficiaries receiving 1915(b)(3) services. However, the 1915(b) waiver was not renewed. Consequently, the state submitted an amendment request that sought expenditure authority under the 1115 demonstration for the PIHP delivery system. The amendment request was approved on September 27, 2019. Following CMS’ guidance, effective October 1, 2019, Michigan intends to transition most of the specialty behavioral health services and supports currently covered under section 1915(b)(3) authority to the equivalent of a section 1915(i) State Plan benefit, initially through 1115(a)(2) expenditure authority under this demonstration. Michigan will complete all evaluations and re-evaluations of beneficiaries enrolled in and/or seeking 1915(i) State Plan benefits by October 1, 2022. After this date, beneficiaries will be covered under section 1915(i) State Plan Amendment authority. With the approval of this amendment request, the 1115 demonstration name was also changed from *Michigan Pathway to Integration* to the *Michigan 1115 Behavioral Health* demonstration.

ELIGIBILITY

There is no change to Medicaid eligibility under this demonstration. Standards for eligibility remain the same as set forth under the state plan. All Medicaid eligibility standards and methodologies for these eligibility groups remain applicable.

DELIVERY SYSTEM

Under this demonstration, beneficiaries have access to high quality, evidence-based opioid use disorder (OUD) and other SUD treatment services ranging from medically supervised withdrawal management to on-going chronic care for these conditions in cost-effective settings while also improving care coordination and care for comorbid physical and mental health conditions. These services are delivered through the PIHP delivery system.

With the approval of this amendment, by October 1, 2022, the State has agreed to mandatorily and passively enroll the following groups of beneficiaries into a PIHP to allow them access to the specified 1915 (i) services:

- a. Section 1931 Children and Related Populations are children including those eligible under Section 1931, poverty-level related groups and optional groups of older children;
- b. Section 1931 Adults and Related Populations are adults including those eligible under Section 1931, poverty-level pregnant women and optional group of caretaker relatives;
- c. Blind/Disabled Adults and Related Populations are beneficiaries, age 18 or older, who are eligible for Medicaid due to blindness or disability. Report Blind/Disabled Adults who are age 65 or older in this category, not in Aged;
- d. Blind/Disabled Children and Related Populations are beneficiaries, generally under age 18, who are eligible for Medicaid due to blindness or disability;
- e. Aged and Related Populations are those Medicaid beneficiaries who are age 65 or older and not members of the Blind/Disabled population or members of the Section 1931 Adult population;
- f. Foster Care Children are Medicaid beneficiaries who are receiving foster care or adoption assistance (Title IV-E), are in foster-care, or are otherwise in an out-of-home placement; and
- g. New adults.

COST SHARING

Cost sharing under the demonstration remains the same as what is included in the approved state plan.

CMS Contacts:

CMS Central Office Contact: Thomas Long, thomas.long@cms.hhs.gov

CMS Regional Office Contact: Keri Toback, Keri.toback@cms.hhs.gov

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