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State/Territory Name: Michigan

State Plan Amendment (SPA)#: 22-0005

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

June 21, 2022

Ms. Farah Hanley Medicaid Director Medical Services Administration 400 S Pine St 7th Fl Lansing, MI 48933-2250

RE: State Plan Amendment (SPA) Transmittal Number 22-0005

Dear Ms. Hanley:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 22-0005. This amendment proposes to provide authority to the state to cover and to reimburse for doula services for eligible Michigan Medicaid beneficiaries.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR 440.130(c). This letter is to inform you that MI Medicaid SPA 22-0005 was approved on June 21, 2022 with an effective date of 10/1/2022.

If you have any questions, please contact Keri Toback at 312 353 1754 or via email at keri.toback@cms.hhs.gov.

Sincerely,



James G. Scott, Director Division of Program Operations

Enclosures

cc: Erin Black, MDHHS

CENTERS FOR MEDICARE & MEDICAID SERVICES	
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER 2. STATE 22 0005 MI 3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	3. PROPOSED EFFECTIVE DATE October 1, 2022
5. FEDERAL STATUTE/REGULATION CITATION 42CFR §440.130(c)	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY 2023 \$819,400 b. FFY 2024 \$819,400
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Supplement to Attachment 3.1-A Pages 26, 26.1, 26.2 Attachment 4.19-B Page 1.b.10	 8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTIONOR ATTACHMENT (If Applicable) Supplement to Attachment 3.1-A Page 26 (TN 16-0017) Attachment 4.19-B Page 1.b.10 (new)

9. SUBJECT OF AMENDMENT

This SPA provides authority to cover and to reimburse for doula services for eligible Michigan Medicaid beneficiaries.

✓ OTHER, AS SPECIFIED:

10. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT

COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

11 SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO
11. TYPED NAME Kate Massey 12. TITLE Director, Behavioral and Physical Health and Aging Services Administration 13. DATE SUBMITTED	Behavioral and Physical Health and Aging Services Administration Office of Strategic Partnerships & Medicaid Administrative Services – Federal Liaison Capitol Commons Center – 7 th Floor 400 South Pine Lansing, Michigan 48933 Attn: Erin Black
April 7, 2022	
FOR CMS USE ONLY	
16. DATE RECEIVED 04/07/2022	17. DATE APPROVED 06/21/2022
PLAN APPROVED - ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL 10/01/2022	19. SIGN
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL
James G. Scott	Director, Division of Program Operations

22. REMARKS

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of Michigan

Amount, Duration and Scope of Medical and Remedial Care Services Provided to the Categorically and Medically Needy

13. OTHER DIAGNOSTIC, SCREENING, PREVENTIVE AND REHABILITATIVE SERVICES

a. **Diagnostic Services** Provided With Limitations

The program covers medically necessary diagnostic services when provided in accordance with currently accepted standards of medical or professional practice.

b. **Screening services** Provided With limitations

The program covers medically necessary screening services when provided in accordance with currently accepted standards of medical or professional practice.

c. **Preventive Services** – Provided With limitations

The program covers medically necessary preventive services when provided in accordance with currently accepted standards of medical or professional practice.

The program covers one preventive medicine visit annually. Additional visits may be covered per recommended clinical guidelines.

All United States Preventive Services Task Force (USPSTF) Grade A and B preventive services and approved vaccines recommended by the Advisory Committee on Immunization Practices (ACIP), and their administration, are covered without beneficiary cost sharing.

In compliance with Section 4106 of the Affordable Care Act, the State assures that it has a method in place to update coverage and billing codes to comply with any changes made to USPSTF or ACIP recommendations. Additionally, the State assures that it has documentation to support the claiming of any additional federal match for such services.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of Michigan

Amount, Duration and Scope of Medical and Remedial Care Services Provided to the Categorically and Medically Needy

Preventive Services - Doula Services

The program covers doula services for pregnant and postpartum beneficiaries as a preventive service consistent with 42 CFR §440.130(c) to promote positive maternal physical and mental health during the perinatal period. Services must be recommended by a physician or other licensed practitioner of the healing arts within their scope of practice. Doula services include:

- Prenatal Services
 - Promoting health literacy and knowledge
 - Assisting with the development of a birth plan
 - Supporting personal and cultural preferences around childbirth
 - Providing emotional support and encouraging self-advocacy
 - Reinforcing practices known to promote positive outcomes such as breastfeeding
 - Coordinating referrals or Linkages to community-based support services to address social determinants of health
- Labor and Delivery Services
 - Providing physical comfort measures, information, and emotional support
 - Advocating for beneficiary needs
 - o Being an active member of the birth team
- Postpartum Services
 - o Educating regarding newborn care, nutrition, and safety
 - Supporting breastfeeding
 - Providing emotional support and encouraging self-care measures
 - Supporting beneficiary in attending recommended medical appointments
 - Coordinating referrals or linkage to community-based support services to address social determinants of health

Provider Criteria

Qualified individuals must be at least 18 years of age, possess a high school diploma or equivalent, and possess a current certification by a doula training program or organization approved by the Michigan Department of Health and Human Services. At a minimum, doula training must include skill development in the following areas:

- Communication including active listening, cross-cultural communication, and interprofessional communication
- Perinatal self-care measures
- Coordination of and linkage to community services and resources
- Labor coping strategies
- Newborn care and supportive measures.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of Michigan

Amount, Duration and Scope of Medical and Remedial Care Services Provided to the Categorically and Medically Needy

(Moved from Supplement to Attachment 3.1-A Page 26)

d. Rehabilitative Services

1) Substance abuse rehabilitation services

The program covers medically necessary rehabilitation services for persons with a chemical dependency diagnosis. Medical necessity is documented by physician referral or approval of the treatment plan.

Services may be provided in residential settings or on an outpatient basis. Reimbursement will be excluded for rehabilitation services provided to any individual who is a patient in an IMD.

Substance Abuse Treatment Programs have been defined as those meeting the following criteria which assure that providers have the capacity to provide services but do not restrict client freedom of choice:

TN NO.: 22-0005

Supersedes TN No.:_<u>New Page</u>_

Attachment 4.19 - B Page 1.b.10

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

Policy and Methods for Establishing Payment Rates Other than Inpatient Hospital and Long-Term-Care Facilities

Preventive Services - Doula Services

Doula Services Reimbursement Methodology

Reimbursement for doula services will be the lesser of the provider's charge or Program fee screens established relative to similar services reimbursed by the department. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of doula services.

Effective Date of Payment

Rates are calculated using the methodology utilized for physician services located in Attachment 4.19-B Page 1. This reimbursement methodology applies to services rendered on and after October 1, 2022. All rates are published at <u>www.michigan.gov/medicaidproviders</u>