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## **Table of Contents**

**State/Territory Name: Michigan**

**State Plan Amendments (SPA) #: MI-15-0003**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) SPA Summary Form
- 3) 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: <http://medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Childrens-Health-Insurance-Program-CHIP/CHIP-State-Program-Information.html>



Children and Adults Health Programs Group

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**MAR 08 2016**

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:

The Centers for Medicare & Medicaid Services (CMS) is approving your title XXI Children's Health Insurance Program (CHIP) State Plan Amendments (SPA) MI-15-0002, MI-15-0003 and MI-15-0004, submitted on December 17, 2015. CMS issued a Request for Additional Information (RAI) on February 24, 2016. CMS received Michigan's official response to our RAI on March 7, 2016.

These amendments transition the majority of children enrolled in the state's separate CHIP to a Medicaid expansion program. Effective January 1, 2016, the following populations will now receive coverage under a Medicaid expansion program:

- Children from birth to age one with family income above 195 percent of the federal poverty level (FPL) up to and including 212 percent of the FPL,
- Children from age one to six with family income above 143 percent of the FPL up to and including 212 percent of the FPL, and
- Children from age six to 19 with family income above 109 of the FPL up to and including 212 of the FPL.

The only children remaining in the separate CHIP are children from conception to birth, as defined in 42 CFR 457.10, with family income up to and including 195 percent of the FPL.

MI-15-0002

Through CHIP SPA MI-15-0002, the state eliminated references that are no longer applicable for children that moved from its separate CHIP to its Medicaid expansion program as this population will now be described in the Medicaid state plan. Coverage for children from conception to birth remains unchanged.

MI-15-0003

Through CHIP SPA MI-15-0003, the state amended its existing MAGI-equivalent standards, by age and income level, for children up to and including 212 percent of the FPL covered in its title XXI-funded Medicaid expansion program. This state plan page (CS3) will allow the state to claim title XXI match against its CHIP allotment for children who transitioned to its Medicaid expansion program.

Page 2 – Mr. Chris Priest

MI-15-0004

Through CHIP SPA MI-15-0004, the state clarified on the CS21 state plan page that premiums and enrollment fees are not applicable to the remaining conception to birth eligibility category.

Your title XXI project officer is Mr. Patrick Edwards. He is available to answer questions concerning these amendments 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: S2-01-15  
7500 Security Boulevard  
Baltimore, MD 21244-1850  
Telephone: (410) 786-6643  
Facsimile: (410) 786-5882  
E-mail: [Patrick.Edwards@cms.hhs.gov](mailto:Patrick.Edwards@cms.hhs.gov)

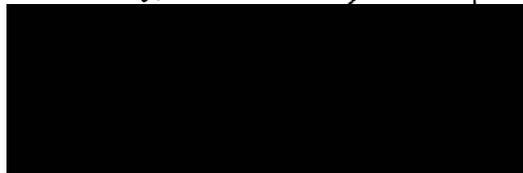
Official communications regarding program matters should be sent simultaneously to Mr. Edwards and to Ms. Ruth Hughes, Associate Regional Administrator (ARA) in our Chicago Regional Office. Ms. Hughes' address is:

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 to work with you and your staff.

Sincerely,

A large black rectangular redaction box covers the signature area. A small, faint circular mark is visible above the top right corner of the redaction.

Anne Marie Costello  
Acting Director

Enclosures

cc: Ms. Ruth Hughes, ARA, CMS Region V, Chicago

Control Panel

General Information

File Management

Tribal Input

Summary

### Children's Health Insurance Program Eligibility: Summary Page

State/Territory Michigan

name: **Transmittal Number:**

*Please enter the Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year, and 0000 = a four digit number with leading zeros. The dashes must also be entered.*

MI-15-0003

#### Type of SPA:

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

#### Proposed Effective Date

01/01/2016 (mm/dd/yyyy)

#### Federal Statute/Regulation Citation

42 CFR 457.320(a)(2) and (3)

#### 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:121 out of 2000

Modifies the MAGI-based income standards for CHIP Medicaid Expansion due to transition from MICHILD to Medicaid Expansion

#### Signature of State Agency Official

Submitted By: Erin Black

Last Revision Date: Dec 17, 2015

Date:

Submit Date: Dec 17, 2015



# CHIP Eligibility

State Name:

OMB Control Number: 0938-1148

Transmittal Number: MI - 15 - 0003

Expiration date: 10/31/2014

## Eligibility for Medicaid Expansion Program

CS3

42 CFR 457.320(a)(2) and (3)

Income eligibility for children under the Medicaid Expansion is determined in accordance with the following income standards:

There should be no overlaps or gaps for the ages entered.

### Age and Household Income Ranges

	From Age	To Age	Above (% FPL)	Up to & including (% FPL)	
<b>+</b>	<input type="text" value="0"/>	<input type="text" value="1"/>	195	212	<b>X</b>
<b>+</b>	<input type="text" value="1"/>	<input type="text" value="6"/>	143	212	<b>X</b>
<b>+</b>	<input type="text" value="6"/>	<input type="text" value="19"/>	109	212	<b>X</b>

### 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.

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