

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES

NOTICE OF PROPOSED POLICY

Public Act 280 of 1939, as amended, and consultation guidelines for Medicaid policy provide an opportunity to review proposed changes in Medicaid policies and procedures.

Please review the policy summary and the attached materials that describe the specific changes being proposed. Let us know why you support the change or oppose the change.

Submit your comments to the analyst by the due date specified. Your comments must be received by the due date to be considered for the final policy bulletin.

Thank you for participating in the consultation process.



Director, Program Policy Division  
Bureau of Medicaid Policy and Health System Innovation

<b>Project Number:</b>	1637-MOMS	<b>Comments Due:</b>	December 19, 2016	<b>Proposed Effective Date:</b>	February 1, 2017
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**Policy Subject:** Family Planning Services for Maternity Outpatient Medical Services (MOMS) Program Enrollees

**Affected Programs:** MOMS

**Distribution:** Practitioners, Hospitals, Federally Qualified Health Centers, Rural Health Clinics, Tribal Health Centers, Local Health Departments

**Policy Summary:** This policy establishes coverage of family planning services for beneficiaries enrolled in the MOMS benefit plan effective for dates of service on and after February 1, 2017.

**Purpose:** The MOMS program provides coverage of pregnancy-related services during the prenatal period and through 60 days after the pregnancy ends. The MOMS benefit plan does not currently include family planning services. The program is jointly funded by the state and the federal Children's Health Insurance Program (CHIP) in consideration of coverage for the unborn child. Allowing women the opportunity to space pregnancies aligns with the goals of the Michigan Department of Health and Human Services (MDHHS) strategic priority, "Improve Outcomes for Children" and with Michigan's Infant Mortality Reduction Plan.

# Proposed Policy Draft

Michigan Department of Health and Human Services  
Medical Services Administration

**Distribution:** Practitioners, Hospitals, Federally Qualified Health Centers, Rural Health Clinics, Tribal Health Centers, Local Health Departments

**Issued:** January 1, 2017 (Proposed)

**Subject:** Family Planning Services for Maternity Outpatient Medical Services (MOMS) Program Enrollees

**Effective:** February 1, 2017 (Proposed)

**Programs Affected:** MOMS

The purpose of this bulletin is to establish coverage of family planning services for MOMS benefit plan beneficiaries effective for dates of service on and after February 1, 2017. The availability of family planning services assists women in reducing the number of unintended pregnancies and decreases the incidence of closely spaced pregnancies. This results in healthier pregnancies, better birth outcomes and improved infant health.

During their 60-day postpartum period of eligibility, MOMS benefit plan beneficiaries will be eligible to receive family planning services with no cost-sharing liability. Family planning services are defined as any Medicaid covered contraceptive service, including:

- Office visits for family planning related services. This includes preventive evaluation and management office visits and other outpatient visits for family planning services.
- Contraceptives, including oral contraceptives and injectables.
- Contraceptive supplies and devices for voluntarily preventing or delaying pregnancy.
- Diagnostic evaluation and pharmaceuticals related to contraceptive management or the initial treatment of sexually transmitted infections.
- Sterilizations completed in accordance with current Medicaid policy.
- Counseling for family planning services, including sterilization, is covered as a part of the family planning visit.

Family planning supplies not furnished by the practitioner as part of the medical services must be prescribed by a Medicaid enrolled practitioner and dispensed by a pharmacy. Exceptions include condoms and similar supplies that do not require a prescription.

Providers must use the appropriate Z30 International Classification of Diseases (ICD) diagnosis code as the primary diagnosis on the claim to identify services as a family planning service. Separately identifiable services which are not considered a family planning service will be considered for coverage under the MOMS benefit plan.