

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES

1. TRANSMITTAL NUMBER

24 — 0007 — —

2. STATE

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, 2024

5. FEDERAL STATUTE/REGULATION CITATION
42 C.F.R. Part 440.225

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
a. FFY 2025 \$ 2,320,000
b. FFY 2026 \$ 2,420,000

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Supplement to Attachment 3.1-A Page 13a continued (p.9)
Attachment 4.19-B Page 9b

8. PAGE NUMBER OF THE SUPERSEDED PLAN
SECTION OR ATTACHMENT (If Applicable)

New

9. SUBJECT OF AMENDMENT

This SPA provides authority to move parent support partner services to EPSDT from the behavioral health 1915(i).

10. GOVERNOR'S REVIEW (Check One)

☐

GOVERNOR'S OFFICE REPORTED NO COMMENT

☒

OTHER, AS SPECIFIED:

☐

COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

☐

NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

11. SIGNATURE OF STATE AGENCY OFFICIAL



11. TYPED NAME

Meghan Groen

12. TITLE

Senior Deputy Director

13. DATE SUBMITTED

July 1, 2024

15. RETURN TO

Behavioral and Physical Health and Aging Services
Administration
Office of Strategic Partnerships & Medicaid Administrative
Services – Federal Liaison
Capitol Commons Center – 7th Floor
400 South Pine
Lansing, Michigan 48933

Attn: Erin Black

FOR CMS USE ONLY

16. DATE RECEIVED

17. DATE APPROVED

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

21. TITLE OF APPROVING OFFICIAL

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***

4b. EPSDT (continued)

PARENT SUPPORT PARTNER SERVICES

1905(A)(4)(B) OF THE ACT PROVIDES EARLY AND PERIODIC SCREENING, DIAGNOSTIC, AND TREATMENT (EPSDT) SERVICES (AS DEFINED IN SUBSECTION (R)) FOR INDIVIDUALS WHO ARE ELIGIBLE UNDER THE STATE PLAN AND ARE UNDER THE AGE OF 21. EPSDT SERVICES INCLUDE MEDICALLY NECESSARY PARENT-TO-PARENT SUPPORT FOR PARENTS/CAREGIVERS OF CHILDREN WITH SERIOUS EMOTIONAL DISTURBANCE OR AN INTELLECTUAL/DEVELOPMENTAL DISABILITY.

A. SERVICES

- PROVIDING SUPPORT TO PARENT(S), GUARDIANS(S), OR CAREGIVER(S) ON ADVOCATING FOR THEIR CHILD AND FAMILY'S NEEDS WITH SYSTEMS THAT SUPPORT YOUTH WITH MENTAL HEALTH, BEHAVIORAL AND EMOTIONAL NEEDS.
- FOSTERING EMPOWERMENT OF PARENT(S), GUARDIAN(S), OR CAREGIVER(S) THROUGH CONNECTION AROUND SHARED LIVED EXPERIENCE FOR PARENT(S), GUARDIAN(S), OR CAREGIVER(S) OF YOUTH WITH MENTAL HEALTH NEEDS AND ENCOURAGING PARTICIPATION IN PEER/PARENT SUPPORT;
- MODELING SELF-ADVOCACY AND EMPOWERMENT SKILL-BUILDING SUPPORT SKILLS FOR PARENT(S), GUARDIANS(S), OR CAREGIVER(S);

B. PROVIDER CRITERIA

SERVICES ARE PROVIDED BY INDIVIDUALS WHO MEET THE FOLLOWING CRITERIA:

- LIVED EXPERIENCE AS A PARENT OR PRIMARY CAREGIVER OF A CHILD WITH BEHAVIORAL OR MENTAL HEALTH NEEDS AND/OR INTELLECTUAL/DEVELOPMENTAL DISABILITY, INCLUDING AUTISM.
- WILLING AND ABLE TO USE THEIR EXPERIENCES AS A PEER PARENT TO SUPPORT OTHERS.
- EXPERIENCE RECEIVING SERVICES FOR THEIR CHILD IN A VARIETY OF SYSTEMS (SUCH AS CHILD WELFARE, SPECIAL EDUCATION, JUVENILE JUSTICE SYSTEM, ETC.) IS PREFERRED.
- TRAINED IN THE MDHHS APPROVED CURRICULUM, CERTIFICATION AND RE-CERTIFICATION MODEL.

C. PRIOR AUTHORIZATION

PARENT SUPPORT PARTNER SERVICES ARE AUTHORIZED FOR A PERIOD NOT TO EXCEED 12 MONTHS. MEDICALLY NECESSARY SERVICES MAY BE RE-AUTHORIZED AT THE REQUEST OF A CLINICIAN WITHIN THEIR SCOPE OF PRACTICE.

TN NO.: 24-0007

Approval Date: _____

Effective Date: 10/01/2024

Supersedes

TN No.: N/A – New Page

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)***

17 (EPSDT CONTINUED).

PARENT SUPPORT PARTNER SERVICES

PARENT SUPPORT PARTNER SERVICES FURNISHED BY CERTIFIED PROVIDERS OR PROVIDER AGENCIES, SHALL BE REIMBURSED ON A DIRECT SERVICE BY SERVICE BASIS AND BILLED BY ENCOUNTER. EXCEPT AS OTHERWISE NOTED IN THE PLAN, STATE-DEVELOPED FEE SCHEDULE RATES ARE THE SAME FOR BOTH GOVERNMENTAL AND PRIVATE PROVIDERS. THE MICHIGAN MEDICAID FEE SCHEDULE IS EFFECTIVE FOR DATES OF SERVICE ON OR AFTER OCTOBER 1, 2024, AND MAY BE FOUND AT WWW.MICHIGAN.GOV/MEDICAIDPROVIDERS.

TN NO.: 24-0007

Approval Date: _____

Effective Date: 10/01/2024

Supersedes

TN No.: N/A-New Page

MI Response to Funding Questions for
SPA 24-0007 Parent Support Partner Services
Submitted July 1, 2024

Funding Questions

1. Section 1903(a)(1) provides that Federal matching funds are only available for expenditures made by States for services under the approved State plan. Do providers receive and retain the total Medicaid expenditures claimed by the State (includes normal per diem, supplemental, enhanced payments, other) or is any portion of the payments returned to the State, local governmental entity, or any other intermediary organization? If providers are required to return any portion of payments, please provide a full description of the repayment process. Include in your response a full description of the methodology for the return of any of the payments, a complete listing of providers that return a portion of their payments, the amount or percentage of payments that are returned and the disposition and use of the funds once they are returned to the State (i.e., general fund, medical services account, etc.)?

State Response: *Providers receive and retain the total Medicaid expenditures claimed.*

2. Section 1902(a)(2) provides that the lack of adequate funds from local sources will not result in lowering the amount, duration, scope, or quality of care and services available under the plan. Please describe how the state share of each type of Medicaid payment (normal per diem, supplemental, enhanced, other) is funded. Please describe whether the state share is from appropriations from the legislature to the Medicaid agency, through intergovernmental transfer agreements (IGTs), certified public expenditures (CPEs), provider taxes, or any other mechanism used by the state to provide state share.

State Response: *The state share is funded with general fund as appropriated by the Legislature to the Medicaid State agency.*

3. Section 1902(a)(30) requires that payments for services be consistent with efficiency, economy, and quality of care. Section 1903(a)(1) provides for Federal financial participation to States for expenditures for services under an approved State plan. If supplemental or enhanced payments are made, please provide the total amount for each type of supplemental or enhanced payment made to each provider type.

State Response: *Not applicable.*

MI Response to Funding Questions for
SPA 24-0007 Parent Support Partner Services
Submitted July 1, 2024

4. For clinic or outpatient hospital services please provide a detailed description of the methodology used by the state to estimate the upper payment limit (UPL) for each class of providers (State owned or operated, non-state government owned or operated, and privately owned or operated). Please provide a current (i.e., applicable to the current rate year) UPL demonstration.

State Response: *Not applicable.*

5. Does any governmental provider receive payments that in the aggregate (normal per diem, supplemental, enhanced, other) exceed their reasonable costs of providing services? If payments exceed the cost of services, do you recoup the excess and return the Federal share of the excess to CMS on the quarterly expenditure report?

State Response: *No.*



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STATE OF MICHIGAN IN THE JUDICIAL DISTRICT FOR THE COUNTY OF GENESEE BERNARD CASON, an individual, Plaintiff, vs MARK W. WHITE, JACQUELINE P. WHITE and all unknown persons claiming an interest in real property located at 4514 Warrington Drive, Flint, Michigan, 48903 Defendants CASE NO.: 24-120827-CH By: Poznak, Dyer, Kanar, Schefsky, Thompson PLC Andrew C. Thompson (P67924) Attorney for Plaintiff 143 McDonald Street Midland, MI 48640 (989) 832-1770 ORDER FOR SERVICE BY PUBLICATION AND NOTICE OF ACTION TO: All Defendants & all others interested in above named property. IT IS ORDERED: 1. You are being sued in this court by the plaintiff to Quiet Title for the property described herein. You must file your answer or take other action permitted by law in this court at the court address of 900 S. Saginaw St., 2nd floor, Flint, MI 48902 on or before 28 days after last day of publication. If you fail to do so, a default judgement may be entered against you for the relief demanded in the complaint filed in this case. 2. A copy of this order shall be published once each week in Flint Journal for three consecutive weeks, and proof of publication shall be filed in this court. 3. A copy of this Order need not be sent to the defendants. Dated: May 13, 2024 Hon. Brian S. Pickell (P57411) Judicial Court Judge Genesee County Published in Flint Journal May 16, 23, 30, 2024.

PUBLIC NOTICE
Michigan Department of Health and Human Services Behavioral and Physical Health and Aging Services Administration

Submissions of Renewal Applications for Children's Waiver Program (CWP), Habilitation Supports Waiver (HSW), Waiver for Children with Serious Emotional Disturbances (SEDW); Section 1915(i) State Plan Amendment (SPA), Parent Support Partner (PSP) SPA, and Targeted Case Management (TCM) SPA. The Michigan Department of Health and Human Services (MDHHS) plans to submit renewal applications for the CWP, HSW and SEDW, 1915(i) SPA, PSP SPA, and TCM SPA to the Centers for Medicare & Medicaid Services (CMS). The anticipated effective date for the renewal applications and SPAs is October 1, 2024. Renewal Applications The following changes will be made to the renewal applications for CWP, HSW, and SEDW.

1. Revision to assessment tools utilized for the SEDW
2. Revision of Overnight Health and Safety Supports eligibility and coverage
3. Removal of Enhanced Transportation from CWP since the service has been underutilized
4. Removal of Wraparound from SEDW
5. Removal of Family Support and Training from SEDW and transition to the PSP SPA
6. Increasing number of beneficiaries that can be served by CWP
7. Addition of Equine Therapy as a new service type under Specialty Therapies in CWP

- and Therapeutic Activities in SEDW
8. Change in name from "Children's Therapeutic Foster Care" to "Children's Therapeutic Family Care" and update to the best practice model under SEDW
9. Elimination of Prevocational Services for HSW
10. Revision and addition of some performance measures for the Quality Improvement Strategy (All Waivers)
11. Update of Electronic Visit Verification language (All Waivers)
12. Update of HCBS implementation language for HSW
13. Update of Goods and Services language for HSW
14. Addition of adaptive clothing to Goods and Services for HSW
15. Update of Enhanced Medical Equipment and Supplies language, including vehicle modifications for HSW
16. Update of Conflict Free Access and Planning requirements (All Waivers)
17. Language change from "Fiscal Intermediary" to "Financial Management Services" (All Waivers)
18. Updates to Supported Employment language for HSW
19. Expanding eligibility group to TEFLA (Tax Equality and Fiscal Responsibility Act of 1982) for HSW
20. Change in frequency of provider qualification verifications from 2 years to 3 years (All Waivers)
21. Change in site review frequency from biennially to annually (All Waivers)

- Section 1915(i) SPA The following changes will be made to the Section 1915(i) SPA:
1. Removal of Parent Support Partner from Family Support and Training and transition it to the Parent Support Partner SPA
 2. Revision of provider qualifications for Housing Assistance
 3. Revision to assessment tools utilized
 4. Change in name from "Fiscal Intermediary" to "Financial Management Services"
 5. Change in frequency of provider qualification verifications from 2 years to 3 years
 6. Change in site review frequency from biennially to annually
 7. Update of Conflict Free Access and Planning language
 8. Revisions to Vehicle Modifications
 9. Revisions to Skill Building
 10. Revisions to Supported Integrated Employment

Parent Support Partner SPA The purpose of the amendment is to transition the Parent Support Partner service from the SEDW and 1915(i) SPA to a State Plan service. This will allow beneficiaries greater access to this service.

Targeted Case Management SPA The purpose of the amendment is to add a TCM group for Intensive Care Coordination with Wraparound (ICCW). This will remove the Wraparound service under the SEDW.

A copy of the proposed CWP/HSW/SEDW renewal applications can be viewed at <https://www.michigan.gov/mdhhs/keep-mi-healthy/mentalhealth/mentalhealth/medwaivers>.

The expected budget impact of the various changes are listed below:

Program SFY 2025 Budget

	Impact (Gross)
CWP	\$ 6,017,000
SEDW	\$ (7,053,000)
HSW	\$ 810,000
Section 1915(i) SPA	\$ (3,080,000)
PSP SPA	\$ 3,550,000
TCM SPA	\$ 11,700,000
Total (Gross)	\$ 11,944,000

There is no public meeting scheduled regarding this notice.

Any interested party wishing to request a written copy of the waiver renewal applications or SPA, or wishing to submit comments, may do so by sending an e-mail to MSADraftPolicy@michigan.gov or submitting a request in writing to: MDHHS/Behavioral and Physical Health and Aging Services Administration, Program Policy Division, PO Box 30479, Lansing MI 48909-7979. Copies of the proposed SPAs will also be available at:

<https://www.michigan.gov/mdhhs/keep-mi-healthy/mentalhealth/mentalhealth/medwaivers>.

All comments on this should include "Submissions of Renewal Applications for Children's Waiver Program (CWP), Habilitation Supports Waiver (HSW), Waiver for Children with Serious Emotional Disturbances (SEDW); Section 1915(i) State Plan Amendment (SPA), Parent Support Partner (PSP) SPA, and Targeted Case Management (TCM) SPA" in the Subject Line.

For additional information regarding non-electronic access to the public comment information or to provide a comment through non-electronic methods, please call 517-241-0010.

The deadline for public comment is June 19, 2024.

On Thursday May 23, 2024 at 10:00 a.m. at the Brighton Towing Yard 9842 E. Grand River, Brighton MI 48116. 8102256697

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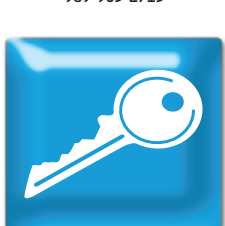
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STATE OF MICHIGAN

GRETCHEN WHITMER
GOVERNOR

DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

ELIZABETH HERTEL
DIRECTOR

May 1, 2024

NAME
TITLE
ADDRESS
CITY STATE ZIP

Dear Tribal Chair and Health Director:

RE: Submissions of Renewal Applications for Children's Waiver Program (CWP), Habilitation Supports Waiver (HSW), Waiver for Children with Serious Emotional Disturbances (SEDW); Section 1915(i) State Plan Amendment (SPA), Parent Support Partner (PSP) SPA, and Targeted Case Management (TCM) SPA

This letter, in compliance with Section 1902(a)(73) and Section 2107(e)(1)(C) of the Social Security Act, serves as notice to all Tribal Chairs and Health Directors of the intent by the Michigan Department of Health and Human Services (MDHHS) to submit renewal applications for the Section 1915(c) CWP, HSW, and SEDW; Section 1915(i) SPA, PSP SPA, and TCM SPA requests to the Centers for Medicare & Medicaid Services (CMS). It is expected that these changes will increase access to these services and improve the quality of behavioral health services for beneficiaries. The anticipated effective date of the waiver renewal applications and SPAs is October 1, 2024.

MDHHS anticipates that Tribal Citizens and Native Americans will experience increased access to Medicaid home and community-based services as a result of the aforementioned changes. This includes the addition of new services and expansion of existing services and programs. MDHHS also anticipates that the quality and effectiveness of Medicaid home and community-based services will increase through the strengthening the provider oversight and beneficiary protections. Finally, MDHHS is pursuing several clarifications to service provision which may shift specific services between different federal authorities (e.g. state plan, 1915(i), 1915(c), etc.), and MDHHS anticipates that these changes (1) will not disrupt or delay access to services for Tribal Citizens and Native Americans and (2) may instead reduce barriers to access in some circumstances.

Renewal Applications

The following changes will be made to the renewal applications for CWP, HSW, and SEDW:

1. Revision to assessment tools utilized for SEDW.
2. Revision of Overnight Health and Safety Supports eligibility and coverage.
3. Removal of Enhanced Transportation from CWP since the service has been underutilized.
4. Removal of Wraparound from SEDW.
5. Removal of Family Support and Training from SEDW and transition to the PSP SPA.
6. Increasing number of beneficiaries that can be served by CWP.
7. Addition of Equine Therapy as a new service type under Specialty Therapies in CWP and Therapeutic Activities in SEDW.
8. Change in name from "Children's Therapeutic Foster Care" to "Children's Therapeutic Family Care" and update to the best practice model under SEDW.
9. Elimination of Prevocational Services for HSW.
10. Revision and addition of some performance measures for the Quality Improvement Strategy (All Waivers).
11. Update of Electronic Visit Verification language (All Waivers).
12. Update of HCBS implementation language for HSW.
13. Update of Goods and Services language for HSW.
14. Addition of adaptive clothing to Enhanced Medical Equipment and Supplies for HSW.
15. Update of Enhanced Medical Equipment and Supplies language including vehicle modifications for HSW.
16. Update of Conflict Free Access and Planning requirements (All Waivers).
17. Language change from "Fiscal Intermediary" to "Financial Management Services" (All Waivers).
18. Updates to Supported Employment language for HSW.
19. Expanding eligibility group to TEFRA for HSW.
20. Change in frequency of provider qualification verifications from 2 years to 3 years (All Waivers).
21. Change in site review frequency from biennially to annually (All Waivers).

Section 1915(i) SPA

The following changes will be made to Section 1915(i) SPA:

1. Removal of Parent Support Partner from Family Support and Training and transition it to the Parent Support Partner SPA.
2. Revision of provider qualifications for Housing Assistance.
3. Revision to assessment tools utilized.
4. Change in name from "Fiscal Intermediary" to "Financial Management Services".
5. Change in frequency of provider qualification verifications from 2 years to 3 years.
6. Change in site review frequency from biennially to annually.
7. Update of Conflict Free Access and Planning language.
8. Revisions to Vehicle Modifications.
9. Revisions to Skill Building.
10. Revisions to Supported Integrated Employment.

Parent Support Partner SPA

The purpose of the SPA is to transition the Parent Support Partner service from the SEDW and 1915(i) SPA to a State Plan service. This will allow beneficiaries greater access to this service.

Targeted Case Management SPA

The purpose of the SPA is to add a TCM group for Intensive Care Coordination with Wraparound (ICCW). This will remove the Wraparound service under the SEDW.

There is no public hearing scheduled for these waiver and SPA changes. Input regarding these waiver and SPA changes is highly encouraged, and comments regarding this notice of intent may be submitted to Lorna Elliott-Egan, MDHHS Liaison to the Michigan tribes. Lorna can be reached at 517-512-4146, or via email at Elliott-EganL@michigan.gov. **Please provide all input by June 17, 2024.**

In addition, MDHHS is offering to set up group or individual consultation meetings to discuss these waiver renewals and SPAs according to the tribes' preference. Consultation meetings allow tribes the opportunity to address any concerns and voice any suggestions, revisions, or objections to be relayed to the author of the proposal. If you would like additional information or wish to schedule a consultation meeting, please contact Lorna Elliott-Egan at the telephone number or email address provided above.

MDHHS appreciates the continued opportunity to work collaboratively with you to care for the residents of our state.

An electronic copy of this letter is available at www.michigan.gov/medicaidproviders >> Policy, Letters & Forms. A copy of the proposed CWP/HSW/SEDW renewal applications will be available at <https://www.michigan.gov/mdhhs/keep-mi-healthy/mentalhealth/mentalhealth/medwaivers>. A copy of the proposed SPAs will be available at <https://www.michigan.gov/mdhhs/inside-mdhhs/budgetfinance/264/state-plan-amendments>.

Sincerely,



Meghan E. Groen, Director
Behavioral and Physical Health and Aging Services Administration

CC: Keri Toback, CMS
Nancy Grano, CMS
Chasity Dial, CEO, American Indian Health and Family Services of Southeastern Michigan
Asha Petoskey, Acting Area Director, Indian Health Service - Bemidji Area Office
Lorna Elliott-Egan, MDHHS

Distribution List for L 24-21
May 1, 2024

Ms. Whitney Gravelle, President, Bay Mills Indian Community
Ms. Audrey Breakie, Health Director, Bay Mills (Ellen Marshall Memorial Center)
Mr. David M. Arroyo, Chairman, Grand Traverse Band Ottawa & Chippewa Indians
Ms. Doris Winslow, Health Director, Grand Traverse Band Ottawa/Chippewa
Mr. Kenneth Meshigaud, Tribal Chairman, Hannahville Indian Community
Ms. G. Susie Meshigaud, Health Director, Hannahville Health Center
Ms. Doreen G. Blaker, Tribal President, Keweenaw Bay Indian Community
Ms. Deanna Foucault, Health Director, Keweenaw Bay Indian Community - Donald Lapointe Health/Educ Facility
Mr. James Williams, Jr., Tribal Chairman, Lac Vieux Desert Band of Lake Superior Chippewa Indians
Ms. Sadie Valliere, Health & Human Services Director, Lac Vieux Desert Band
Mr. Larry Romanelli, Ogema, Little River Band of Ottawa Indians
Mr. Daryl Wever, Health Director, Little River Band of Ottawa Indians
Ms. Regina Gasco-Bentley, Tribal Chairman, Little Traverse Bay Band of Odawa Indians
Ms. Jodi Werner, Health Director, Little Traverse Bay Band of Odawa
Mr. Bob Peters, Chairman, Match-E-Be-Nash-She-Wish Potawatomi Indians (Gun Lake Band)
Ms. Phyllis Davis, Tribal Council Member, Match-E-Be-Nash-She-Wish Potawatomi
Ms. Mariah Austin, Tribal Council Member, Match-E-Be-Nash-She-Wish Potawatomi
Mr. Jamie Stuck, Tribal Chairman, Nottawaseppi Huron Band of Potawatomi Indians
Ms. Rosalind Johnston, Health Director, Huron Potawatomi Inc.- Tribal Health Department
Ms. Rebecca Richards, Tribal Chairwoman, Pokagon Band of Potawatomi Indians
Ms. Priscilla Gatties, Interim Health Director, Pokagon Potawatomi Health Services
Mr. Tim Davis, Tribal Chief, Saginaw Chippewa Indian Tribe
Mrs. Karmen Fox, Executive Health Director, Nimkee Memorial Wellness Center
Mr. Austin Lowes, Tribal Chairperson, Sault Ste. Marie Tribe of Chippewa Indians
Mr. Leonid Chugunov, Health Director, Sault Ste. Marie Tribe of Chippewa Indians - Health Center

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