

## **Table of Contents**

**State/Territory Name: Michigan**

**State Plan Amendment (SPA)#: 23-0011**

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

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July 19, 2023

Meghan E. Groen  
Senior Deputy Director  
Behavioral and Physical Health and Aging Services Administration  
Michigan Department of Health and Human Services  
400 S Pine St 7th Fl  
Lansing, MI 48933-2250

Re: Michigan State Plan Amendment (SPA) 23-0011

Dear Ms. Groen:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0011. This amendment provides an update to language regarding family planning services.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations in 1905(a)(4)(C). This letter is to inform you that KY Medicaid SPA 23-0011 was approved on July 17, 2023, with an effective date of July 1, 2023.

If you have any questions, please contact Keri Toback at 312-353-1754 or via email at [keri.toback@cms.hhs.gov](mailto:keri.toback@cms.hhs.gov).

Sincerely,

James G. Scott, Director  
Division of Program Operations

Enclosures  
cc: Erin Black

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

**FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER <u>23</u> — <u>0011</u>	2. STATE <u>MI</u>
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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  
July 1, 2023

5. FEDERAL STATUTE/REGULATION CITATION  
1905(a)(4)(C)

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)  
a. FFY 2023 \$0  
b. FFY 2024 \$0

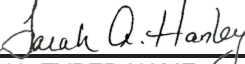
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  
  
Supplemental to Attachment 3.1-A Page 14

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)  
Supplemental to Attachment 3.1-A Page 14 (TN# 93-08)

9. SUBJECT OF AMENDMENT  
This SPA updates language regarding family planning services.

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  
Farah Hanley

12. TITLE  
Senior Chief Deputy Director for Health

13. DATE SUBMITTED  
April 20, 2023

15. RETURN TO  
Behavioral and Physical Health and Aging Services Administration  
Office of Strategic Partnerships & Medicaid Administrative Services – Federal Liaison  
Capitol Commons Center – 7<sup>th</sup> Floor  
400 South Pine  
Lansing, Michigan 48933  
  
Attn: Erin Black

**FOR CMS USE ONLY**

16. DATE RECEIVED  
04/20/2023

17. DATE APPROVED  
**07/17/2023**

**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL  
07/01/2023

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL  
James G. Scott

21. TITLE OF APPROVING OFFICIAL  
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***

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4c. **Family Planning Services 1905(a)(4)(C)**

**Family Planning Services and Supplies:**

- Office visits for purposes of family planning, including patient history, contraceptive counseling, physical exams, and laboratory tests
- Pharmaceutical supplies and devices to prevent or delay pregnancy, including all methods of contraception approved by the U.S. Food and Drug Administration
- Family planning education, counseling, and referrals
- Limited laboratory examinations and tests for purposes related to family planning; and
- Male and female sterilization procedures provided in accordance with 42 CFR 441, Subpart F.

**Family Planning Related Services Provided under the State Eligibility Option:**

Outpatient services that are routinely provided as part of, or as follow-up to, a family planning services visit, including, but not limited to:

- Diagnostic procedures, drugs, and follow-up visits to treat an STI or STI-related disorder identified or diagnosed at a routine/periodic family planning visit (other than HIV/ AIDS and hepatitis)
- Diagnostic procedures, drugs and follow-up visits for lower genital tract and genital skin infections and urinary tract infections, when the infection/disorder is identified or diagnosed during a routine/periodic family planning visit
- Family planning-related services associated with sterilization procedures and follow-up care
- PAP screens and treatment for pre-cancerous conditions which commonly originate from a Sexually Transmitted Infection (STI)
- Family planning-related preventive services recommended by the USPSTF, and vaccines to prevent STIs; and
- Treatment of major complications related to family planning services and family planning related procedures.