

MEDICAID POLICY INFORMATION SHEET

Policy Analyst: Kayla Lowers

Phone Number:

Initial

Public Comment

Final

Brief description of policy:

Michigan is electing to pursue the state plan option in Section 214 of CHIPRA that allows states to provide full Medicaid coverage to pregnant women and children who are lawfully residing in the United States and would otherwise have to meet the five-year bar.

Reason for policy (problem being addressed):

Choosing to enact this option will increase access to coverage for pregnant women and children.

Budget implication:

budget neutral

will cost MDHHS \$ 4,447,638, and is budgeted in current appropriation

will save MDHHS \$

Is this policy change mandated per federal requirements?

No - this policy change is allowed by a state option in Section 214 of of the Children's Health Insurance Program Reauthorization Act of 2009.

Does policy have operational implications on other parts of MDHHS?

State eligibility systems will need to be updated to allow for these individuals to receive full Medicaid coverage instead of emergency services only (ESO).

Does policy have operational implications on other departments?

No.

Summary of input:

controversial (Explain)

acceptable to most/all groups

limited public interest/comment

Supporting Documentation:

State Plan Amendment Required: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Public Notice Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes, please provide status:	If yes, Submission Date:
<input type="checkbox"/> Approved <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Denied	
Date: Approval Date:	

DRAFT FOR PUBLIC COMMENT Michigan Department of Health and Human Services		
	Project Number: 2353-Eligibility	Date: March 19, 2024

Comments Due: April 23, 2024
Proposed Effective Date: August 1, 2024
Direct Comments To: Kayla Lowers
Address:
E-Mail Address: LowersK@Michigan.gov
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Fax:

<p>Policy Subject: Children’s Health Insurance Program Reauthorization Act of 2009 (CHIPRA) Section 214</p> <p>Affected Programs: Medicaid, MIChild</p> <p>Distribution: All Bridges Eligibility Manual (BEM) Holders</p> <p>Summary: The State of Michigan is electing to pursue the state plan option in Section 214 of CHIPRA that allows states to provide full Medicaid coverage to pregnant women and children who are lawfully residing in the United States and would otherwise have to meet the five-year bar.</p> <p>Purpose: This change will increase access to coverage for pregnant women and children.</p> <p>Cost Implications: \$4,447,638 gross in FY2024.</p> <p>Potential Hearings & Appeal Issues: None.</p>
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State Plan Amendment Required: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, date submitted: In progress	Public Notice Required: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Submitted date:
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Tribal Notification: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> - Date: 11/20/2023

THIS SECTION COMPLETED BY RECEIVER

<input type="checkbox"/> Approved	<input type="checkbox"/> No Comments
<input type="checkbox"/> Disapproved	<input type="checkbox"/> See Comments Below
	<input type="checkbox"/> See Comments in Text

Signature:	Phone Number
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Signature Printed:

Bureau/Administration <i>(please print)</i>	Date
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Proposed Policy Draft

Michigan Department of Health and Human Services
Behavioral & Physical Health and Aging Services Administration

Distribution: All Bridges Eligibility Manual (BEM) Holders

Issued: July 1, 2024 (Proposed)

Subject: Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA) Section 214

Effective: August 1, 2024 (Proposed)

Programs Affected: Medicaid, MICHild

The State of Michigan is electing to pursue the state plan option in Section 214 of the Children's Health Insurance Reauthorization Act of 2009 (CHIPRA), which allows states to provide full coverage to pregnant women and children who are lawfully residing in the United States and would otherwise only be eligible for emergency services only (ESO) coverage until they met the five-year bar.

Under this change, pregnant women will receive full coverage through the entirety of both their pregnancy and their 12-month postpartum period. After the end of their postpartum period, they will revert to ESO coverage. Children will receive full coverage until they reach age 21.