MEDICAID POLICY INFORMATION SHEET

Policy Analyst: Kayla Lowers

Phone Number:

Initial ☐	Public Comment ☒	Final ☐

Brief description of policy:

This policy creates a family planning Medicaid group (Plan First) that will provide coverage for family planning services for individuals with incomes of up to 195 percent of the federal poverty level.

Reason for policy (problem being addressed):

This change allows Michigan to provide family planning services for individuals who would not otherwise have access to these services.

Budget implication:
☐ budget neutral
☒ will cost MDHHS $ 1.2 million for fiscal year 2023, and is not budgeted in current appropriation
☐ will save MDHHS $

Is this policy change mandated per federal requirements?

This change is an option provided by the federal government under the Affordable Care Act (ACA).

Does policy have operational implications on other parts of MDHHS?

Systems will have to be modified in order to determine eligibility for and assign coverage under Plan First. Local office staff will have to become familiar with this new group in order to determine eligibility.

Does policy have operational implications on other departments?

No.

Summary of input:
☐ controversial
☒ acceptable to most/all groups
☐ limited public interest/comment

Supporting Documentation:

State Plan Amendment Required: ☒ Yes ☐ No	Public Notice Required: ☒ Yes ☐ No
If Yes, please provide status: ☐ Approved ☐ Pending ☐ Denied Date: Approval Date:	If yes, Submission Date: **4/11/23**

<table>
<tr><td colspan="2">DRAFT FOR PUBLIC COMMENT

Michigan Department of Health and Human Services</td><td colspan="2"></td></tr>
<tr><td></td><td></td><td>Project Number: 2314-Eligibility</td><td>Date: April 26, 2023</td></tr>
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Comments Due: May 31, 2023
Proposed Effective Date: July 1, 2023
Direct Comments To: Kayla Lowers
Address:
E-Mail Address: LowersK@Michigan.gov
Phone: **Fax:**

Policy Subject: Plan First Family Planning Group

Affected Programs: Medicaid

Distribution: Bridges Eligibility Manual (BEM) Holders

Summary: This policy creates a family planning Medicaid group (Plan First) that will provide coverage for family planning services for individuals with incomes of up to 195 percent of the federal poverty level.

Purpose: This change allows Michigan to provide family planning services for individuals who would not otherwise have access to these services.

Cost Implications: Approximately $1.2 million for fiscal year 2023.

Potential Hearings & Appeal Issues: None.

State Plan Amendment Required: Yes ☒ **No** ☐
If yes, date submitted:

Public Notice Required: Yes ☒ **No** ☐
Submitted date: April 11, 2023

Tribal Notification: Yes ☒ **No** ☐ **- Date:** October 11, 2022

THIS SECTION COMPLETED BY RECEIVER

☐ **Approved**   ☐ **No Comments**
                                  ☐ **See Comments Below**
☐ **Disapproved**   ☐ **See Comments in Text**

Signature:	**Phone Number**

Signature Printed:

Bureau/Administration (*please print*)	**Date**

Proposed Policy Draft

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

Distribution: Bridges Eligibility Manual (BEM) Holders

Issued: June 1, 2023 (Proposed)

Subject: Plan First Family Planning Group

Effective: July 1, 2023 (Proposed)

Programs Affected: Medicaid

The Michigan Department of Health and Human Services (MDHHS) is pursuing an amendment to its Medicaid State Plan to add a family planning Medicaid group (Plan First) that will provide coverage for family planning services for people with incomes up to 195 percent of the federal poverty level (currently $35,704 annually for a household of two). Under the change, approximately 25,000 additional Michigan residents would have access to these critically important family planning services.

To be eligible for this group an individual must:

- Have income at or below 195% of the Federal Poverty Level (FPL) under the Modified Adjusted Gross Income (MAGI) methodology;
- Not be pregnant at the time of application;
- Be a resident of the state of Michigan; and
- Meet Medicaid citizenship and immigration requirements.

There are no gender or age requirements to be eligible for Plan First.