

## MEDICAID POLICY INFORMATION SHEET

**Policy Analyst:** Megan Belonga

**Phone Number:**

Initial

Public Comment

Final

### Brief description of policy:

The purpose of this policy is to incorporate a section within the Behavioral Health and Developmental and Intellectual and Developmental Disability Supports and Services chapter of the Michigan Department of Health and Human Services (MDHHS) Medicaid Provider Manual to provide information about the utilization of the MichiCANS Screener and Comprehensive tool. This tool will be used statewide for PIHPs and CMHSPs to determine the initial and ongoing specialty behavioral health needs of infants, toddlers, youth and young adults ages birth to 21.

### Reason for policy (problem being addressed):

To provide information about the general description of the MichiCANS Screener and Comprehensive and use with the PIHP system.

### Budget implication:

budget neutral

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

will save MDHHS \$

### Is this policy change mandated per federal requirements?

MDHHS is enacting this policy change in alignment with (1) approval of the renewal applications for the Children's Waiver Program, Waiver Program for Children with Serious Emotional Disturbances, and Habilitation Supports Waiver and (2) amendment of the 1915(i) State Plan Amendment.

### Does policy have operational implications on other parts of MDHHS?

MDHHS is implementing the MichiCANS to support other programs and operations within MDHHS including (1) service planning within the State Hospital Administration, (2) level of care determinations for Psychiatric Residential Treatment Facilities, (3) screening of children entering in the foster care system, and (3) level of care determinations for Certified Community Behavioral Health Centers.

### Does policy have operational implications on other departments?

No

### Summary of input:

controversial

acceptable to most/all groups

limited public interest/comment

**MEDICAID POLICY INFORMATION SHEET**

**Supporting Documentation:**

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

**DRAFT FOR PUBLIC COMMENT**

Michigan Department of Health and Human Services

Project Number: 2428-BCCPS

Date: July 16, 2024

Comments Due: August 20, 2024

Proposed Effective Date: October 1, 2024

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**Policy Subject:** Implementation of the MichiCANS for Medicaid-Funded Specialty Behavioral Health Services

**Affected Programs:** Medicaid

**Distribution:** Prepaid Inpatient Health Plans (PIHPs), Community Mental Health Services Programs (CMHSPs)

**Summary:** The purpose of this bulletin is to implement the utilization of the MichiCANS Screener and Comprehensive tool statewide at all PIHPs and CMHSPs for all infants, toddlers, children, youth, and young adults ages birth through 20 years (day prior to 21<sup>st</sup> birthday). The MichiCANS Screener will be the required tool used at PIHP and CMHSP points of access and will provide a recommendation related to potential eligibility for behavioral health needs. Depending on the results of the MichiCANS Screener, the MichiCANS Comprehensive will be completed to help determine eligibility for Michigan Intensive Child and Adolescent Services (MICAS) and the Serious Emotional Disturbances Waiver (SEDW). The results of this tool will also be used to inform the Individual Plan of Service.

**Purpose:** To provide information about the general description of the MichiCANS Screener and Comprehensive and use within the PIHP and CMHSP systems.

**Cost Implications:** Budget neutral

**Potential Hearings & Appeal Issues:** There are none identified.

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

**Public Notice Required:** Yes  No   
Submitted date:

**Tribal Notification:** Yes  No  - Date:

**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**

**Comment001**

**Revised 6/16**

# Proposed Policy Draft

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

**Distribution:** Prepaid Inpatient Health Plans (PIHP) and Community Mental Health Services Programs (CMHSP)

**Issued:** August 30, 2024 (Proposed)

**Subject:** Implementation of the MichiCANS for Medicaid-Funded Specialty Behavioral Health Services

**Effective:** October 1, 2024 (Proposed)

**Programs Affected:** Medicaid

## Introduction

The Child and Adolescent Needs and Strengths (CANS) is a comprehensive information integration tool designed to summarize and organize information gathered from multiple sources and assessments. The Michigan Department of Health and Human Services (MDHHS) is implementing a Michigan-specific version of the tool, which will be known as the MichiCANS. Effective October 1, 2024, MDHHS will require Prepaid Inpatient Health Plans (PIHP) to use the MichiCANS to support potential eligibility for services, assist with initial determination of needs and strengths, and provide information for appropriate referrals for behavioral health services.

## General Description

The MichiCANS Screener will be the tool required at the point of access for all infants, toddlers, children, youth, and young adults ages birth through 20 years (day prior to 21<sup>st</sup> birthday). The results of the MichiCANS Screener will provide one of the following recommendations for level of need:

- Crisis Continuum of Care Services Need,
- Severe/Serious Level of Need, or
- Mild/Moderate Level of Need

Depending on the results of the MichiCANS Screener, the MichiCANS Comprehensive will be used at initial intake, annually thereafter, and at time of exit for infants, toddlers, young children, youth, and young adults ages birth through 20 years (day prior to 21<sup>st</sup> birthday) to guide treatment service planning. In addition, relevant sections of the MichiCANS Comprehensive will be updated when there is a significant change in life circumstances and/or a behavioral health event. The MichiCANS Comprehensive will be used to provide recommendations for eligibility for the Michigan Intensive Child and Adolescent Services

(MICAS), which include Home-Based Services, Intensive Crisis Stabilization Services, Respite Services, Intensive Care Coordination with Wraparound, Youth Peer Support Services and Parent Support Partners. The MichiCANS will also provide eligibility recommendations for the Waiver for Children with Serious Emotional Disturbance.

Beginning October 1, 2024, the current assessment tools, the Child and Adolescent Functional Assessment Scale (CAFAS) and the Preschool and Early Childhood Functional Assessment Scale (PECFAS), will no longer be required. The PIHPs will be required to use the Devereux Early Childhood Assessment at intake and during treatment planning, based on the results of the MichiCANS screener, for infants, toddlers, and children ages one month up to age six who have (1) a Serious Emotional Disturbance (SED) or (2) SED and Intellectual/Developmental Disabilities (IDD). The results of the MichiCANS Comprehensive will also be used to identify areas of strengths and needs which will be used to assist with the planning process.

**Eligibility for Specialty Behavioral Health Services**

The MichiCANS Screener will be the tool required at the point of access for all infants, toddlers, children, youth, and young adults ages birth through 20 years (day prior to 21<sup>st</sup> birthday).

The following MichiCANS Screener Decision Support Model criteria will be used to determine eligibility for Specialty Behavioral Health Services for children ages 0-5 years (day prior to 6<sup>th</sup> birthday):

	<b>Treatment Need/Eligibility</b>	
<b>AtAt1. Mild/Moderate Level of Need- Referral to Appropriate Services</b>  Criterion 1.1 OR Criterion 1.2 OR Criterion 1.3 OR Criterion 1.4 OR Criterion 1.5	<b>1.1</b>	<b>At least one</b> rating of 1, 2 or 3 on the Developmental/Intellectual or Autism Spectrum item.
	<b>1.2</b>	<b>At least one</b> rating of 1, 2 or 3 on any of the Challenges items: <ul style="list-style-type: none"> <li>• Impulsivity/Hyperactivity (36+ months)</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior (36+ months)</li> <li>• Attachment Difficulties</li> <li>• Adjustment to Trauma</li> <li>• Regulatory</li> <li>• Atypical Behaviors</li> <li>• Sleep (12+ months)</li> <li>• Aggression</li> </ul>
	<b>1.3</b>	<b>At least one</b> rating of 1, 2 or 3 on any of the following Functioning items: <ul style="list-style-type: none"> <li>• Family Functioning</li> <li>• Early Care and Education</li> <li>• Social &amp; Emotional Functioning</li> <li>• Developmental/Intellect.</li> <li>• Autism Spectrum</li> <li>• Medical/Physical</li> <li>• Motor (Fine/Gross)</li> <li>• Sensory Responsiveness</li> <li>• Restricted Interests</li> </ul>
	<b>1.4</b>	<b>At least one</b> rating of 1, 2 or 3 on any of the Risk Behaviors & Factors items: <ul style="list-style-type: none"> <li>• Substance Exposure in Utero</li> <li>• Environmental Toxin Exposure</li> <li>• Prenatal Care</li> <li>• Birth Weight</li> <li>• Failure to Thrive</li> <li>• Labor and Delivery</li> <li>• Self-Harm (12+ months)</li> <li>• Flight Risk/Bolting</li> </ul>

		Treatment Need/Eligibility
	1.5	<p><b>At least one</b> rating of 1, 2, or 3 on any of the following caregiver items:</p> <ul style="list-style-type: none"> <li>• Adjustment to Trauma Experiences</li> <li>• Caregiver Capacity</li> <li>• Supervision</li> <li>• Knowledge</li> </ul>

	Treatment Need/Eligibility	Complexity	
<p><b>2. Severe/Serious Level of Need If initial, Move to Initial Assessment</b> (Criterion 2.1 or Criterion 2.2) AND (Criterion 2.3 or Criterion 2.4 or Criterion 2.5)</p>	2.1	<p><b>At least one</b> rating of 2 or 3 on the Developmental/Intellectual or Autism Spectrum item.</p>	
	2.2	2.3	<p><b>At least one</b> rating of 2 or 3 on any of the following items:</p> <ul style="list-style-type: none"> <li>• Family Functioning</li> <li>• Social and Emotional Functioning</li> <li>• Sleep (12+ months)</li> <li>• Early Care and Education</li> </ul>
		2.4	<p><b>At least one</b> rating of 2 or 3 on any of the following items:</p> <ul style="list-style-type: none"> <li>• Failure to Thrive</li> <li>• Self-Harm (12+ months)</li> <li>• Flight Risk/Bolting</li> <li>• Cultural Stress (Caregiver Need)</li> </ul>
2.5	<p><b>At least one</b> rating of '2' or '3' on any of the following Caregiver items:</p> <ul style="list-style-type: none"> <li>• Adjustment to Trauma</li> <li>• Mental Health</li> <li>• Caregiver Capacity</li> <li>• Supervision</li> <li>• Involvement with Care</li> <li>• Knowledge</li> <li>• Safety</li> </ul>		

	Treatment Need/Eligibility
<p><b>3. CRISIS – Move to Crisis Continuum of Care Services</b> Criterion 3.1</p>	<p><b>A rating</b> of 3 on any of the following items:</p> <ul style="list-style-type: none"> <li>• Impulsivity/Hyperactivity (36+ months)</li> <li>• Regulatory</li> <li>• Atypical Behaviors</li> <li>• Self-Harm (12+ months)</li> <li>• Flight Risk/Bolting</li> <li>• Safety (Caregiver Need)</li> </ul>

The following MichiCANS Screener Decision Support Model criteria will be used to determine eligibility for Specialty Behavioral Health Services for children ages 6-20 years (day prior to 21<sup>st</sup> birthday):

	Treatment Need/Eligibility
<b>1. Mild/Moderate Level of Need-Referral to Appropriate Services</b> Criterion 1.1	<b>1.1</b> All children/youth are recommended for this level unless they are eligible for a higher level.

	Treatment Need/Eligibility	Complexity
<b>2. Severe/Serious Level of Need – If Initial, Move to Initial Assessment</b> (Criterion 2.1 OR Criterion 2.2) AND (Criterion 2.3 OR Criterion 2.4)	<b>2.1</b> <b>At least one</b> rating of 2 or 3 on any of the Behavioral/ Emotional Needs items: <ul style="list-style-type: none"> <li>• Psychosis</li> <li>• Impulsivity/Hyperactivity</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior</li> <li>• Conduct</li> <li>• Adjustment to Trauma</li> <li>• Anger Control</li> <li>• Substance Use</li> <li>• Eating Disturbance</li> </ul>	<b>2.3</b> <b>At least one</b> rating of 2 or 3 on any of the following Functioning Needs: <ul style="list-style-type: none"> <li>• Family Functioning</li> <li>• Living Situation</li> <li>• Social Functioning</li> <li>• Legal (age 11+)</li> <li>• Medical/Physical</li> <li>• Sleep</li> <li>• School or Job Functioning</li> <li>• Decision Making</li> <li>• Caregiver Supervision</li> </ul>
	<b>2.2</b> <b>A rating</b> of 2 or 3 on the Developmental/Intellectual or Autism Spectrum Disorder item.	<b>2.4</b> <b>At least one</b> rating of 2 or 3 on any of the following Risk Behaviors: <ul style="list-style-type: none"> <li>• Suicide Risk</li> <li>• NSSI Behavior</li> <li>• Other Self-Harm</li> <li>• Danger to Others</li> <li>• Problematic Sexual Behavior</li> <li>• Runaway</li> <li>• Victimization/Exploit.</li> </ul>

	Treatment Need/Eligibility
<b>3. Crisis-Move to Crisis Continuum of Care Services</b> Criterion 3.1 OR Criterion 3.2	<b>3.1</b> A rating of 3 on any of the following items: <ul style="list-style-type: none"> <li>• Suicide Risk</li> <li>• Non-Suicidal Self-Injurious Behavior</li> <li>• Other Self Harm</li> <li>• Danger to Others</li> <li>• Victimization/Exploitation</li> <li>• Psychosis</li> </ul>
	<b>3.2</b> A rating of 3 on the Runaway item <b>and at least one rating</b> of 2 or 3 on any of the following items: <ul style="list-style-type: none"> <li>• Suicide Risk</li> <li>• Non-Suicidal Self-Injurious Behavior</li> <li>• Other Self Harm</li> <li>• Danger to Others</li> <li>• Victimization/Exploitation</li> <li>• Psychosis</li> </ul>



**Home-Based Services**

**Eligibility Criteria**

The criteria for home-based services are described below for children 0-5 years (day prior to 6<sup>th</sup> birthday) and children ages 6-20 years (day prior to 21<sup>st</sup> birthday). The new criteria will replace the current criteria in the [MDHHS Medicaid Provider Manual](#). These criteria do not preclude the provision of home-based services to an adult beneficiary prenatally or who is a parent for whom it is determined home-based services would be the treatment modality that would best meet the needs of the adult beneficiary and the child. This would include a parent who has a diagnosis within the current version of the Diagnostic and Statistical Manual of Mental Disorders (DSM) or International Classification of Diseases (ICD) that results in a care-giving environment that places the child at-risk for serious emotional disturbance. These criteria do not preclude the provision of home-based services when it is determined through a family-driven and youth-guided planning process that these services are necessary to meet the needs of the child and family. For continuing eligibility reviews during the transition to less intensive services, the child and family may be maintained in home-based services, even if they do not meet these criteria. Variation from the required criteria for families transitioning out of home-based services must be documented in the plan of service. This transition period is not to exceed three months.

**Prenatal/Birth Through Age Five**

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for Home-Based Services for children ages 0-5 years (day prior to 6<sup>th</sup> birthday):

Service/Support	Treatment Need/Eligibility	Complexity
<p><b>Home-Based Services (Ages 0-5 years [day prior to 6<sup>th</sup> birthday])</b>  (Criterion A or Criterion B) AND Criterion C AND Criterion D</p>	<p><b>A</b> <b>A rating</b> of 2 or 3 on the Developmental/ Intellectual or the Autism Spectrum item.</p>	<p><b>C</b> <b>At least one</b> rating of 2 or 3 on any of the following Risk Factors and Behaviors items:</p> <ul style="list-style-type: none"> <li>• Failure to Thrive</li> <li>• Exploited</li> <li>• Self-Harm (12+ months)</li> <li>• Flight Risk/Bolting</li> <li>• Fire Setting (36+ months)</li> </ul>
	<p><b>B</b> <b>At least one</b> rating of 2 or 3 on any of the following Challenges items:</p> <ul style="list-style-type: none"> <li>• Impulsivity/Hyperactivity (36+ months)</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior (36+ months)</li> <li>• Attachment Difficulties</li> <li>• Aggression</li> <li>• Regulatory</li> <li>• Atypical Behaviors</li> </ul>	<p><b>D</b> <b>At least one</b> rating of 2 or 3 on any of the following Functioning items:</p> <ul style="list-style-type: none"> <li>• Family Functioning</li> <li>• Social and Emotional Functioning</li> <li>• Early Care &amp; Education Attendance</li> <li>• Early Care &amp; Education</li> <li>• Sensory Responsiveness</li> <li>• Communication</li> <li>• Restricted Interests</li> </ul>

Service/Support	Treatment Need/Eligibility	Complexity
	<ul style="list-style-type: none"> <li>• Sleep (12+ months)</li> <li>• Adjustment to Trauma</li> </ul>	<ul style="list-style-type: none"> <li>• Early Care &amp; Education Behavior</li> </ul>

**Ages 6-20 years (day prior to 21<sup>st</sup> birthday)**

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for Home-Based Services for children, youth, and young adults ages 6-20 years (day prior to 21<sup>st</sup> birthday):

Service/Support	Treatment Need/Eligibility	Complexity
<b>Home-Based Services (Ages 6+)</b>  (Criterion A or Criterion B) AND Criterion C AND Criterion D	<b>A</b> <b>At least one</b> rating of 2 or 3 on the Developmental/ Intellectual or Autism Spectrum item.	<b>C</b> <b>At least one</b> rating of 2 or 3 on any of the following Risk Behaviors items: <ul style="list-style-type: none"> <li>• Suicide Risk</li> <li>• NSSI Behavior</li> <li>• Other Self Harm</li> <li>• Victimization/ Exploit.</li> <li>• Intentional Misbehavior</li> <li>• Danger to Others</li> <li>• Runaway</li> </ul>
	<b>B</b> <b>At least one</b> rating of 2 or 3 on any of the Behavioral/Emotional Needs items: <ul style="list-style-type: none"> <li>• Psychosis</li> <li>• Impulsivity/ Hyperactivity</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior</li> <li>• Conduct (Antisocial Behavior)</li> <li>• Attachment Difficulties</li> <li>• Anger Control</li> <li>• Eating Disturbance</li> <li>• Adjustment to Trauma</li> <li>• Substance Use</li> </ul>	<b>D</b> <b>At least one</b> rating of 2 or 3 on any of the following Life Functioning items: <ul style="list-style-type: none"> <li>• Family Functioning or Living Situation</li> <li>• Social Functioning</li> <li>• Sexual Development</li> <li>• School Attendance</li> <li>• School Behavior</li> </ul>

**Respite Care**

The MichiCANS will be used to support eligibility determinations for respite for children and youth enrolled in the 1915(i), Children’s Waiver Program, Waiver Program for Children with Serious Emotional Disturbances, and Habilitation Supports Waiver.

The following MichiCANS Comprehensive Decisions Support Model criteria will be used to determine eligibility for Respite Care for beneficiaries ages 0-5 years (day prior to 6<sup>th</sup> birthday):

Service/Support	Treatment Need/Eligibility	Complexity
<b>Respite Care (Ages 0-5 years [day prior to 6<sup>th</sup> birthday])</b>  (Criterion A or Criterion B) AND (Criterion C or Criterion D or Criterion E)	<b>A</b> A rating of 2 or 3 on the Developmental/ Intellectual or Autism Spectrum item.	<b>C</b> At least one rating of 1, 2 or 3 on any of the following Life Functioning items: <ul style="list-style-type: none"> <li>• Family Functioning</li> <li>• Social and Emotional Functioning</li> <li>• Early Care &amp; Education Attendance</li> <li>• Early Care &amp; Education Behavior</li> <li>• Early Care &amp; Education Achievement</li> <li>• Sensory Responsiveness</li> <li>• Communication</li> <li>• Restricted Interests</li> </ul>
	<b>B</b> At least one rating of 2 or 3 on any of the following Challenges items: <ul style="list-style-type: none"> <li>• Impulsivity/Hyperactivity (36+ months)</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior (36+ months)</li> <li>• Attachment Difficulties</li> <li>• Aggression</li> <li>• Regulatory</li> <li>• Atypical Behaviors</li> <li>• Sleep (12+ months)</li> <li>• Adjustment to Trauma</li> </ul>	<b>D</b> At least one rating of 1, 2 or 3 on any of the following Risk Factors and Behaviors items: <ul style="list-style-type: none"> <li>• Failure to Thrive</li> <li>• Exploited</li> <li>• Self-Harm (12+ months.)</li> <li>• Flight Risk/Bolting</li> <li>• Fire Setting (36+ months.)</li> </ul>
		<b>E</b> At least one rating of 3, or two or more ratings of 2 or 3 on any of the following Caregiver Resources & Needs items: <ul style="list-style-type: none"> <li>• Supervision</li> <li>• Involvement with Care</li> <li>• Organization</li> <li>• Medical/Physical</li> <li>• Mental Health</li> <li>• Substance Use</li> <li>• Developmental</li> <li>• Marital/Partner Violence in the Home</li> <li>• Legal Involvement</li> </ul>

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for Respite Care for beneficiaries ages 6-20 years (day prior to 21<sup>st</sup> birthday):

Service/Support	Treatment Need/Eligibility	Complexity
<b>Respite Care (Ages 6+)</b>  (Criterion A or Criterion B) AND (Criterion C or Criterion D or Criterion E)	<b>A</b> A rating of 2 or 3 on the Developmental/ Intellectual or Autism Spectrum item.	<b>C</b> At least one rating of 3, or two or more ratings of 2 or 3 on any of the following Life Functioning items: <ul style="list-style-type: none"> <li>• Family Functioning or Living Situation</li> <li>• Social Functioning</li> <li>• Recreational</li> <li>• Legal (Age 11+)</li> <li>• Sleep</li> <li>• School Attendance</li> <li>• Decision Making</li> <li>• Developmental/ Intellectual</li> <li>• Medical/Physical</li> </ul>

Service/Support	Treatment Need/Eligibility	Complexity
	<p><b>B At least one</b> rating or 2 or 3 on any of the Behavioral/Emotional Needs items:</p> <ul style="list-style-type: none"> <li>• Psychosis</li> <li>• Impulsivity/Hyperactivity</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior</li> <li>• Conduct (Antisocial Behavior)</li> <li>• Attachment Difficulties</li> <li>• Anger Control</li> <li>• Eating Disturbance</li> <li>• Adjustment to Trauma</li> <li>• Substance Use</li> </ul>	<ul style="list-style-type: none"> <li>• Sexual Development</li> </ul> <p><b>D At least one</b> rating of 1, 2 or 3 on any of the following Risk Behaviors items:</p> <ul style="list-style-type: none"> <li>• Suicide Risk</li> <li>• NSSI Behavior</li> <li>• Other Self Harm</li> <li>• Victimization/Exploitation</li> <li>• Intentional Misbehavior</li> <li>• Danger to Others</li> <li>• Runaway</li> <li>• Delinquent Behavior</li> <li>• Fire Setting</li> </ul> <p><b>E At least one</b> rating of 3, <b>or two or more</b> ratings of 2 or 3 on any of the following Caregiver Resources &amp; Needs items:</p> <ul style="list-style-type: none"> <li>• Supervision</li> <li>• Involvement with Care</li> <li>• Organization</li> <li>• Medical/Physical</li> <li>• Mental Health</li> <li>• Substance Use</li> <li>• Developmental</li> <li>• Marital/Partner Violence in the Home</li> <li>• Legal Involvement</li> </ul>

**Children With Serious Emotional Disturbances Home and Community-Based Services Waiver Appendix**

**Waiver Program for Children with Serious Emotional Disturbances**

MDHHS is pursuing a renewal of this waiver program, and these requirements will become effective after approval for the renewed waiver application. To be eligible for this waiver, the beneficiary must meet all the following criteria.

- The child must meet current MDHHS criteria for admission to the state psychiatric hospital for children, as defined in the Michigan Medicaid Provider Manual; and
- The child must live in a home or community-based setting (not in a hospital, ICF/IID, nursing facility, correctional facility or child caring institution) while receiving services. This may include living with their birth or adoptive parent, legal guardian, relative, foster home that is willing to care for the child, or living independently with supports; and
- The child must meet Medicaid eligibility criteria and become a Medicaid beneficiary; and
- The child must be under the age of 18 when approved for the waiver. If a child on the SEDW turns 18 and continues to meet all non-age-related eligibility criteria, the child can remain on the waiver up to their 21<sup>st</sup> birthday.
- Demonstrate serious functional limitations that impair the ability to function in the community.

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for the SEDW for beneficiaries ages 0-5 years (day prior to 6<sup>th</sup> birthday):

Service/Support	Treatment Need/Eligibility	Complexity
<b>Serious Emotional Disturbances (SED) Waiver: Age 0-5 years (day prior to 6<sup>th</sup> birthday)</b> Criterion A AND (Criterion B or Criterion C)	<b>A At least one</b> rating of 2 or 3 on any of the following Challenges items: <ul style="list-style-type: none"> <li>• Impulsivity/Hyperactivity (36+ months)</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior (36+ months)</li> <li>• Attachment Difficulties</li> <li>• Adjustment to Trauma</li> <li>• Regulatory</li> <li>• Atypical Behaviors</li> </ul>	<b>At least one</b> rating of 2 or 3 on any of the following items: <ul style="list-style-type: none"> <li>• Aggression</li> <li>• Self-Harm (12+ months.)</li> <li>• Flight Risk/Bolting</li> <li>• Fire Setting (36+ months.)</li> </ul>
		<b>At least one</b> rating of 3, <b>or two or more</b> ratings of 2 or 3 on any of the following items: <ul style="list-style-type: none"> <li>• Family Functioning</li> <li>• Social &amp; Emotional Functioning</li> <li>• Sleep (12+ months.)</li> <li>• Playfulness</li> <li>• Early Care &amp; Education Attendance or Early Care &amp; Education Behavior or Early Care &amp; Education Achievement</li> </ul>

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for the SEDW for beneficiaries ages 6-20 years (day prior to 21<sup>st</sup> birthday):

Service/Support	Treatment Need/Eligibility	Complexity
<b>Serious Emotional Disturbances (SED) Waiver: Age 6+</b> Criterion A AND (Criterion B or Criterion C)	<b>A At least one</b> rating of 3, <b>or two or more</b> ratings of 2 or 3 on any of the Behavioral/Emotional Needs items: <ul style="list-style-type: none"> <li>• Psychosis</li> <li>• Impulsivity/Hyperactivity</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior</li> <li>• Conduct (Antisocial Behavior)</li> <li>• Attachment Difficulties</li> <li>• Anger Control</li> <li>• Eating Disturbance</li> <li>• Adjustment to Trauma</li> <li>• Substance Use</li> </ul>	<b>At least one</b> rating of 3, <b>or two or more</b> ratings of 2 or 3 on any of the following Risk Behaviors items: <ul style="list-style-type: none"> <li>• Suicide Risk</li> <li>• NSSI Behavior</li> <li>• Other Self Harm</li> <li>• Victimization/Exploitation</li> <li>• Intentional Misbehavior</li> <li>• Danger to Others</li> <li>• Runaway</li> <li>• Delinquent Behavior</li> <li>• Fire Setting</li> </ul>
		<b>At least one</b> rating of 3, <b>or two or more</b> ratings of 2 or 3 on any of the following Life Functioning items: <ul style="list-style-type: none"> <li>• Family Functioning</li> <li>• Living Situation</li> <li>• Social Functioning</li> <li>• Recreational</li> <li>• Legal (11+)</li> <li>• Sexual Development</li> <li>• Sleep</li> <li>• School Attendance or School Behavior or School Achievement</li> <li>• Decision Making</li> <li>• Medical/Physical</li> </ul>

## **Intensive Care Coordination with Wraparound (ICCW)**

MDHHS is removing Wraparound from the SEDW and adding ICCW as a new state plan service. The following criteria will help support eligibility for ICCW.

### Criteria

Children, youth, or young adults birth to age 21, are eligible for ICCW if they meet the following criteria:

- Serious Emotional Disturbance, Serious Mental Illness, and/or Intellectual/Developmental Disability;
- Presenting with complex behavioral needs; and
- Have an identified home and community.

AND two or more of the criteria listed below:

- Currently in or at risk of out-of-home placement.
- Involved in two or more child, youth, or young adult-serving systems, including but not limited to: Mental/Behavioral Health, Juvenile or Adult Criminal Justice, Child Welfare, Adult Protective Services, Education (special education or other school support services).
- Has received other case management or case management-like services, and higher intensity is required to meet needs.
- Lack of an identified support system.
- Presenting with complex medical needs and stabilization has not been reached.
- Has a functional impairment related to school activities, attendance, or performance. This includes but is not limited to experiencing multiple suspensions and/or expulsions.
- Displays significant physical and/or emotional distress after experiencing a traumatic event. Traumatic events may include but are not limited to natural disasters, acts of violence, abuse, neglect.

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for Intensive Care Coordination with Wraparound for beneficiaries ages 0-5 years (day prior to 6<sup>th</sup> birthday):

Service/Support	Treatment Need/Eligibility	Complexity
<p><b>Intensive Care Coordination with Wraparound (Ages 0-5 years [day prior to 6<sup>th</sup> birthday])</b> (Criterion A or Criterion B) AND (Criterion C or Criterion D) AND Criterion E</p>	<p><b>A</b> <b>A rating</b> of 2 or 3 on the Developmental/ Intellectual or Autism Spectrum item.</p>	<p><b>C</b> <b>One rating</b> of 3, <b>or two or more</b> ratings of 2 or 3 on any of the following Life Functioning items:</p> <ul style="list-style-type: none"> <li>• Family Functioning</li> <li>• Social and Emotional Functioning</li> <li>• Early Care &amp; Education Attendance or Behavior or Achievement</li> <li>• Sensory Responsiveness</li> <li>• Communication (Expressive/Receptive)</li> <li>• Restricted Interests</li> </ul>
	<p><b>B</b></p> <p><b>At least one</b> rating of 2 or 3 on any of the following Challenges items:</p> <ul style="list-style-type: none"> <li>• Impulsivity/Hyperactivity (36+ months)</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior (36+ months)</li> <li>• Attachment Difficulties</li> <li>• Aggression</li> <li>• Regulatory</li> <li>• Atypical Behaviors</li> <li>• Sleep (12+ months)</li> <li>• Adjustment to Trauma</li> </ul>	<p><b>D</b> <b>One rating</b> of 3, <b>or two or more</b> ratings of 2 or 3 on any of the following Risk Factors and Behaviors items:</p> <ul style="list-style-type: none"> <li>• Failure to Thrive</li> <li>• Exploited</li> <li>• Self-Harm (12+ months)</li> <li>• Flight Risk/Bolting</li> <li>• Fire Setting (36+ months)</li> </ul>
		<p><b>E</b> <b>One rating</b> of 3, <b>or two or more</b> ratings of 2 or 3 on any of the following Caregiver Resources &amp; Needs items:</p> <ul style="list-style-type: none"> <li>• Supervision</li> <li>• Involvement with Care</li> <li>• Knowledge</li> <li>• Organization</li> <li>• Social Resources</li> <li>• Financial Resources</li> <li>• Residential Stability</li> <li>• Medical/Physical</li> <li>• Mental Health</li> <li>• Substance Use</li> <li>• Developmental</li> <li>• Safety</li> <li>• Marital/Partner Violence in the Home</li> <li>• Legal Involvement</li> </ul>

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for Intensive Care Coordination with Wraparound for beneficiaries ages 6-20 years (day prior to 21<sup>st</sup> birthday):

Service/Support	Treatment Need/Eligibility	Complexity
<p><b>Intensive Care Coordination with Wraparound (Ages 6+)</b> (Criterion A or Criterion B) AND (Criterion C or Criterion D) AND Criterion E</p>	<p><b>A</b> A rating of 2 or 3 on the Developmental/ Intellectual or Autism Spectrum item.</p>	<p><b>C</b> One rating of 3, or two or more ratings of 2 or 3 on any of the following Life Functioning items:</p> <ul style="list-style-type: none"> <li>• Family Functioning or Living Situation</li> <li>• Social Functioning</li> <li>• Recreational</li> <li>• Legal (Age 11+)</li> <li>• Sexual Development</li> <li>• Sleep</li> <li>• School Attendance</li> <li>• School Behavior</li> <li>• School Achievement</li> <li>• Decision Making</li> <li>• Medical/Physical</li> </ul>
	<p><b>B</b> One rating of 3, or two or more ratings of 2 or 3 on any of the Behavioral/ Emotional Needs items:</p> <ul style="list-style-type: none"> <li>• Psychosis</li> <li>• Impulsivity/Hyperactivity</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior</li> <li>• Conduct (Antisocial Behavior)</li> <li>• Attachment Difficulties</li> <li>• Anger Control</li> <li>• Eating Disturbance</li> <li>• Adjustment to Trauma</li> <li>• Substance Use</li> </ul>	<p><b>D</b> One rating of 3, or two or more ratings of 2 or 3 on any of the following Risk Behaviors items:</p> <ul style="list-style-type: none"> <li>• Suicide Risk</li> <li>• NSSI Behavior</li> <li>• Other Self Harm</li> <li>• Victimization/Exploitation</li> <li>• Intentional Misbehavior</li> <li>• Danger to Others</li> <li>• Runaway</li> <li>• Delinquent Behavior</li> <li>• Fire Setting</li> </ul>
		<p><b>E</b> One rating of 3, or two or more ratings of 2 or 3 on any of the following Caregiver Resources &amp; Needs items:</p> <ul style="list-style-type: none"> <li>• Supervision</li> <li>• Involvement with Care</li> <li>• Knowledge</li> <li>• Organization</li> <li>• Social Resources</li> <li>• Financial Resources</li> <li>• Residential Stability</li> <li>• Medical/Physical</li> <li>• Mental Health</li> <li>• Substance Use</li> <li>• Developmental</li> <li>• Safety</li> <li>• Marital/Partner Violence in the Home</li> <li>• Legal Involvement</li> </ul>



## Intensive Crisis Stabilization Services for Children

### Intensive Crisis Stabilization Services

#### Population/Eligibility

These services are for children or youth ages 0 to 21 years with SED and/or I/DD, including autism or co-occurring SED and SUD, and their parents/caregivers who are currently residing in the catchment area of the approved program, and are in need of intensive crisis stabilization services in the home or community as defined in this section.

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for Intensive Crisis Stabilization Services for beneficiaries ages 0-5 years (day prior to 6<sup>th</sup> birthday):

Service/Support	Treatment Need/Eligibility	Complexity
<b>Intensive Crisis Stabilization Services for Children (Ages 0-5 years [day prior to 6<sup>th</sup> birthday])</b> (Criterion A or Criterion B) AND Criterion C AND Criterion D	<b>A</b> A rating of 2 or 3 on the Developmental/Intellectual item OR the Autism Spectrum Disorder item.	<b>C</b> At least one rating of 3, or two or more ratings of 2 or 3 on any of the following items: <ul style="list-style-type: none"> <li>• Aggression</li> <li>• Self-Harm (12+ months)</li> <li>• Flight Risk/Bolting</li> <li>• Fire Setting (36+ months)</li> </ul>
	<b>B</b> At least one rating of 2 or 3 on any of the following Challenges items: <ul style="list-style-type: none"> <li>• Impulsivity/Hyperactivity (36+ months)</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior (36+ months)</li> <li>• Attachment Difficulties</li> <li>• Adjustment to Trauma</li> <li>• Regulatory</li> </ul>	
		<b>D</b> At least one rating of 1, 2 or 3 on the Caregiver Resources & Needs item: Supervision

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for Intensive Crisis Stabilization Services for beneficiaries ages 6-20 years (day prior to 21<sup>st</sup> birthday):

Service/Support	Treatment Need/Eligibility	Complexity
<p><b>Intensive Crisis Stabilization Services for Children (Ages 6+)</b></p> <p>(Criterion A or Criterion B) AND (Criterion C or Criterion D) AND Criterion E</p>	<p><b>A</b> A rating of 2 or 3 on the Developmental/Intellectual or Autism Spectrum Disorder item.</p>	<p><b>C</b> At least one rating of '3' on any of the following Risk Behaviors items:</p> <ul style="list-style-type: none"> <li>• Suicide Risk</li> <li>• NSSI Behavior</li> <li>• Other Self Harm</li> <li>• Danger to Others</li> <li>• Runaway</li> <li>• Fire Setting</li> </ul>
	<p><b>B</b> At least one rating of 2 or 3 on any of the Behavioral/Emotional Needs items:</p> <ul style="list-style-type: none"> <li>• Psychosis</li> <li>• Impulsivity/Hyperactivity</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior</li> <li>• Conduct</li> <li>• Attachment Difficulties</li> <li>• Anger Control</li> <li>• Eating Disturbance</li> <li>• Adjustment to Trauma</li> <li>• Substance use</li> </ul>	<p><b>D</b> Two or more ratings of 2 or 3 on any of the following Risk Behaviors items:</p> <ul style="list-style-type: none"> <li>• Suicide Risk</li> <li>• NSSI Behavior</li> <li>• Other Self Harm</li> <li>• Danger to Others</li> <li>• Runaway</li> <li>• Intentional Misbehavior</li> <li>• Victimization/Exploitation</li> <li>• Delinquent Behavior</li> <li>• Fire Setting</li> </ul>
		<p><b>E</b> A rating of 2 or 3 on the Caregiver Supervision item.</p>

The child and family define the crisis, and eligibility for receiving children’s ICSS will be based on the child and family requesting this service. The MichiCANS DSM may identify beneficiaries who may benefit from crisis services, and if this is a recommendation from the MichiCANS, the treatment team should incorporate this into the family-driven youth-guided planning process.

Youth Peer Support Services

Youth Peer Support Services is a peer-delivered service for youth and young adults who are middle school to 26 years of age. It is designed to support youth and young adults with a serious emotional disturbance/serious mental illness (SED/SMI) through shared activities and interventions in the form of nonjudgmental support, connection through lived experience and supporting self-advocacy.

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for Youth Peer Support ages 11+:

Service/Support	Treatment Need/Eligibility
<b>Youth Peer Support (Ages 11+)</b> Criterion A and Criterion B	<b>A</b> Child is at least 11 years old.
	<b>At least one</b> rating of '2' or '3' on any of the Behavioral/Emotional Needs items: <ul style="list-style-type: none"> <li>• Psychosis</li> <li>• Impulsivity/Hyperactivity</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior</li> <li>• Conduct (Antisocial Behavior)</li> <li>• Attachment Difficulties</li> <li>• Anger Control</li> <li>• Eating Disturbance</li> <li>• Adjustment to Trauma</li> <li>• Substance Use</li> </ul>

Parent Support Partners

Parent-to-Parent Support is designed to support parents/family of children with serious emotional disturbance or intellectual and developmental disabilities as part of the treatment process to be empowered, confident and have skills that will enable them to assist their child to improve in functioning.

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for Parent Support Partners ages 0-5 years (day prior to 6<sup>th</sup> birthday):

Service/Support	Treatment Need/Eligibility	Complexity
<b>Parent Support Partner (Ages 0-5 years [day prior to 6<sup>th</sup> birthday])</b> Criterion A or Criterion B or Criterion C	<b>A At least one</b> rating of '2' or '3' on any of the following Challenges items: <ul style="list-style-type: none"> <li>• Impulsivity/Hyperactivity (36+ months)</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior (36+ months)</li> <li>• Attachment Difficulties</li> <li>• Regulatory</li> <li>• Atypical Behaviors</li> <li>• Adjustment to Trauma</li> <li>• Developmental</li> <li>• Autism Spectrum</li> </ul>	<b>B At least one</b> rating of '2' or '3' on any of the following items: <ul style="list-style-type: none"> <li>• Aggression</li> <li>• Exploited</li> <li>• Self-Harm (12+months)</li> <li>• Flight Risk/Bolting</li> <li>• Fire Setting (36+ months)</li> </ul>
		<b>C At least one</b> rating of '3', or <b>two or more</b> ratings of '2' or '3' on any of the following items: <ul style="list-style-type: none"> <li>• Family Functioning</li> <li>• Social &amp; Emotional Functioning</li> <li>• Sleep (12+ months)</li> <li>• Playfulness</li> <li>• Early Care &amp; Education Attendance</li> <li>• Early Care &amp; Education Behavior</li> <li>• Early Care &amp; Education</li> <li>• Achievement</li> </ul>

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for Parent Support Partners ages 6+:

Service/Support	Treatment Need/Eligibility
<b>Parent Support Partner (Ages 6+)</b>  Criterion A or Criterion B	<b>A</b> A rating of 2 or 3 on the Developmental/ Intellectual or Autism Spectrum item.
	<b>B</b> At least one rating of 2 or 3 on any of the Behavioral/Emotional Needs items: <ul style="list-style-type: none"> <li>• Psychosis</li> <li>• Impulsivity/ Hyperactivity</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Oppositional Behavior</li> <li>• Conduct (Antisocial Behavior)</li> <li>• Attachment Difficulties</li> <li>• Anger Control</li> <li>• Eating Disturbance</li> <li>• Adjustment to Trauma</li> <li>• Substance Use</li> </ul>