

Bulletin Number: MMP 24-38

Distribution: Prepaid Inpatient Health Plans (PIHP), Community Mental Health Services Programs (CMHSP), and Certified Community Behavioral Health Clinics (CCBHC)

Issued: August 30, 2024

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

Effective: October 1, 2024

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), Community Mental Health Services Programs (CMHSP), and Certified Community Behavioral Health Clinics (CCBHC) 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 to 21. 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 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 to 21.

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:

Level 1. MILD/MODERATE LEVEL OF NEED Referral to Appropriate Services

*A youth will be classified as 'MILD/MODERATE LEVEL OF NEED' if they meet
Criterion 1.1 OR Criterion 1.2 OR Criterion 1.3 OR Criterion 1.4 OR Criterion 1.5*

Treatment Need/Eligibility

| Criterion 1.1 | | |
|--|----------------------------|--------------------------|
| A rating of '1', '2' or '3' on any of the following items: | | |
| • Developmental/ Intellectual | • Autism Spectrum Disorder | |
| Criterion 1.2 | | |
| A rating of '1', '2' or '3' on any of the Challenges items: | | |
| • Impulsivity/ Hyperactivity (36+ months) | • Attachment Difficulties | • Atypical Behaviors |
| • Depression | • Adjustment to Trauma | • Sleep (12+ Months) |
| • Anxiety | • Regulatory | • Aggression |
| • Opp. Behavior (36+ Months) | | |
| Criterion 1.3 | | |
| A rating of '1', '2' or '3' on any of the Functioning items: | | |
| • Family Functioning | • Medical/Physical | • Sensory Responsiveness |
| • Social & Emotional Functioning | • Motor (Fine/Gross) | • Restricted Interests |
| • Early Care and Education | | |
| Criterion 1.4 | | |
| A rating of '1', '2' or '3' on any of the Risk Factors & Behaviors items: | | |

| | | |
|---|---|--|
| <ul style="list-style-type: none"> • Substance Exposure in Utero • Environ. Toxin Exposure • Prenatal Care | <ul style="list-style-type: none"> • Labor and Delivery • Birth Weight • Failure to Thrive | <ul style="list-style-type: none"> • Exploited • Self-Harm (12+ months) • Flight Risk/Bolting |
| Criterion 1.5 | | |
| A rating of '1', '2' or '3' on any of the Caregiver items: | | |
| <ul style="list-style-type: none"> • Adjustment to Trauma Experiences • Caregiver Capacity | <ul style="list-style-type: none"> • Supervision | <ul style="list-style-type: none"> • Knowledge |

Level 2. SEVERE/SERIOUS LEVEL OF NEED (If initial, Move to Initial Assessment)

***A youth will be classified as 'SEVERE/SERIOUS LEVEL OF NEED' if they meet
(Criterion 2.1 OR Criterion 2.2) AND (Criterion 2.3 OR Criterion 2.4 OR Criterion 2.5)***

Treatment Need/Eligibility

| | | |
|--|---|--|
| Criterion 2.1 | | |
| A rating of '2' or '3' on any of the following items: | | |
| <ul style="list-style-type: none"> • Developmental/ Intellectual | <ul style="list-style-type: none"> • Autism Spectrum Disorder | |
| Criterion 2.2 | | |
| A rating of '2' or '3' on any of the Challenges items: | | |
| <ul style="list-style-type: none"> • Impulsivity/ Hyperactivity (36+ months) • Depression • Anxiety • Opp. Behavior (36+ Months) | <ul style="list-style-type: none"> • Attachment Difficulties • Adjustment to Trauma • Regulatory | <ul style="list-style-type: none"> • Atypical Behaviors • Aggression |

AND

Complexity

| | | |
|---|--|--|
| Criterion 2.3 | | |
| A rating of '2' or '3' on any of the following items: | | |
| <ul style="list-style-type: none"> • Family Functioning • Social & Emotional Functioning | <ul style="list-style-type: none"> • Early Care and Education | <ul style="list-style-type: none"> • Sleep (12+ Months) |
| Criterion 2.4 | | |
| A rating of '2' or '3' on any of the following items: | | |
| <ul style="list-style-type: none"> • Failure to Thrive • Self-Harm (12+ months) | <ul style="list-style-type: none"> • Exploited • Flight Risk/Bolting | <ul style="list-style-type: none"> • Cultural Stress (Caregiver Need) |
| Criterion 2.5 | | |
| A rating of '2' or '3' on any of the following Caregiver items: | | |
| <ul style="list-style-type: none"> • Adjustment to Trauma • Mental Health • Caregiver Capacity | <ul style="list-style-type: none"> • Supervision • Involvement with Care | <ul style="list-style-type: none"> • Knowledge • Safety |

Level 3. CRISIS – Move to Crisis Continuum of Care Services

A youth will be classified as 'CRISIS' if they meet Criterion 3.1

Treatment Need/Eligibility

| Criterion 3.1 | | |
|---|---|--|
| A rating of '3' on any of the following items: | | |
| <ul style="list-style-type: none"> • Impulsivity/Hyperactivity (36+months) • Regulatory • Atypical Behaviors | <ul style="list-style-type: none"> • Self-Harm (12+ Months) • Flight Risk/Bolting | <ul style="list-style-type: none"> • Exploited • Safety (Caregiver Need) |

The following MichiCANS Screener Decision Support Model criteria will be used to determine eligibility for Specialty Behavioral Health Services for children ages 6-21 years:

Level 1. MILD/MODERATE LEVEL OF NEED Referral to Appropriate Services

All children/youth are recommended for this level unless they are eligible for a higher level.

Level 2. SEVERE/SERIOUS LEVEL OF NEED (If initial, Move to Initial Assessment)

A youth will be classified as 'SEVERE/SERIOUS LEVEL OF NEED' if they meet (Criterion 2.1 OR Criterion 2.2) AND (Criterion 2.3 OR Criterion 2.4)

Treatment Need/Eligibility

| Criterion 2.1 | | |
|---|---|---|
| A rating of '2' or '3' on any of the Behavioral/Emotional Needs items: | | |
| <ul style="list-style-type: none"> • Psychosis • Impulsivity/Hyperactivity • Depression • Anxiety | <ul style="list-style-type: none"> • Oppositional Behavior • Conduct • Anger Control | <ul style="list-style-type: none"> • Eating Disturbance • Adjustment to Trauma • Substance Use |
| Criterion 2.2 | | |
| A rating of '2' or '3' on either of the following items: | | |
| <ul style="list-style-type: none"> • Developmental/ Intellectual | <ul style="list-style-type: none"> • Autism Spectrum Disorder | |

AND

Complexity

| Criterion 2.3 | | |
|---|---|---|
| A rating of '2' or '3' on any of the following Life Functioning items or Caregiver Needs items: | | |
| <ul style="list-style-type: none"> • Family Functioning • Living Situation • Social Functioning • Legal (age 11+) | <ul style="list-style-type: none"> • Medical/Physical • School • Job Functioning (16+) | <ul style="list-style-type: none"> • Sleep • Decision Making • Caregiver Supervision |
| Criterion 2.4 | | |
| A rating of '2' or '3' on any of the following Risk Behavior items: | | |
| <ul style="list-style-type: none"> • Suicide Risk • Non-Suicidal Self-Injurious Behavior • Other Self-Harm | <ul style="list-style-type: none"> • Danger to Others • Problematic Sexual Behavior | <ul style="list-style-type: none"> • Runaway • Victimization/Exploitation |

Level 3. CRISIS – Move to Crisis Continuum of Care Services

A youth will be classified as 'CRISIS' if they meet Criterion 3.1 OR Criterion 3.2

Treatment Need/Eligibility

| Criterion 3.1 | | |
|---|--------------------|-------------------------------|
| A rating of '3' on any of the following items: | | |
| • Suicide Risk | • Other Self-Harm | • Victimization/ Exploitation |
| • Non-Suicidal Self-Injurious Behavior | • Danger to Others | • Psychosis |
| Criterion 3.2 | | |
| A rating of '3' on the Runaway Item and at least one rating of '2' or '3' on any of the following items: | | |
| • Suicide Risk | • Other Self-Harm | • Victimization/Exploitation |
| • Non-Suicidal Self-Injurious Behavior | • Danger to Others | • Psychosis |

Home-Based Services

Eligibility Criteria

The criteria for home-based services are described below for children birth through age 5 and children aged 6 through age 20. The new criteria will replace the current criteria in the 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:

Home-Based Services (Ages 0-5)

A child will be recommended for 'Home-Based Services (Ages 0-5)' if they meet Criterion A OR (Criterion A and Criterion B) AND Criterion C AND Criterion D

Treatment Need/Eligibility

| Criterion A |
|---|
| A rating of '2' or '3' on any of the 'Challenges' items: |

| | | |
|--|---|--|
| <ul style="list-style-type: none"> • Impulsivity/ Hyperactivity (36+ months) • Depression • Anxiety • Opp. Behavior (36+ Months) | <ul style="list-style-type: none"> • Attachment Difficulties • Aggression • Regulatory | <ul style="list-style-type: none"> • Atypical Behaviors • Sleep (12+ Months) • Adjustment to Trauma |
| Criterion B | | |
| A rating of '2' or '3' on any of the following items: | | |
| <ul style="list-style-type: none"> • Developmental/Intellectual | <ul style="list-style-type: none"> • Autism Spectrum | |

Complexity

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|---|---|--|
| Criterion C | | |
| A rating of '2' or '3' on any of the following 'Risk Behaviors' items: | | |
| <ul style="list-style-type: none"> • Failure to Thrive • Exploited | <ul style="list-style-type: none"> • Self-Harm (12+ months) • Flight Risk/Bolting | <ul style="list-style-type: none"> • Fire Setting (36+ months) |
| Criterion D | | |
| A rating of '2' or '3' on any of the following 'Life Functioning', 'Developmental Module' and 'Autism Spectrum Module' items: | | |
| <ul style="list-style-type: none"> • Family Functioning • Social & Emotional Functioning • Early Care & Education Attendance | <ul style="list-style-type: none"> • Early Care & Education Behavior • Early Care & Education Achievement • Communication (Expressive/Receptive)⁺ | <ul style="list-style-type: none"> • Sensory Responsiveness^{**} • Receptive Communication^{**} • Expressive Language^{**} • Restricted Interests^{**} |

⁺ Developmental Module item

^{**}Autism Spectrum Module item

Ages 6 Through 20

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 6-21 years:

Home-Based Services (Ages 6+)

A youth will be recommended for 'Home-Based Services (Ages 6+)' if they meet Criterion A OR (Criterion A and Criterion B) AND Criterion C AND Criterion D

Treatment Need/Eligibility

| | | |
|--|--|---|
| Criterion A | | |
| A rating of '2' or '3' on any of the following 'Behavioral/Emotional Needs' items: | | |
| <ul style="list-style-type: none"> • Psychosis (Thought Disorder) • Impulsivity/Hyperactivity • Depression • Anxiety | <ul style="list-style-type: none"> • Oppositional Behavior • Conduct (Antisocial Behavior) • Attachment Difficulties • Anger Control | <ul style="list-style-type: none"> • Eating Disturbance • Adjustment to Trauma • Substance Use |
| Criterion B | | |
| A rating of '2' or '3' on any of the following items: | | |

- Developmental/Intellectual
- Autism Spectrum

Complexity

| Criterion C | | |
|---|------------------------------|---------------------|
| A rating of '2' or '3' on any of the following 'Risk Behaviors' items: | | |
| • Suicide Risk | • Victimization/Exploitation | • Danger to Others |
| • Non-Suicidal Self-Injurious Behavior | • Intentional Misbehavior | • Runaway |
| • Other Self Harm (Recklessness) | | |
| Criterion D | | |
| A rating of '2' or '3' on any of the following 'Life Functioning' items: | | |
| • Family Functioning | • Social Functioning | • School Attendance |
| • Living Situation | • Sexual Development | • School Behavior |

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:

Respite Care (Ages 0-5)

A child will be recommended for 'Respite Care (Ages 0-5)' if they meet (Criterion A OR Criterion B) AND (Criterion C OR Criterion D OR Criterion E)

Treatment Need/Eligibility

| Criterion A | | |
|---|------------------------------|------------------------|
| A rating of '2' or '3' on any of the following items: | | |
| • Developmental/Intellectual | • Autism Spectrum | |
| Criterion B | | |
| A rating of '2' or '3' on any of the following 'Challenges' items: | | |
| • Impulsivity/ Hyperactivity (36+ months) | • Opp. Behavior (36+ Months) | • Regulatory |
| • Depression | • Attachment Difficulties | • Atypical Behaviors |
| • Anxiety | • Aggression | • Sleep (12+ Months) |
| | | • Adjustment to Trauma |

Complexity

| Criterion C | | |
|---|-----------------------------------|----------------------------|
| A rating of '1', '2', or '3' on any of the following 'Life Functioning', 'Developmental Module', and 'Autism Spectrum Module' items: | | |
| • Family Functioning | • Early Care & Education Behavior | • Sensory Responsiveness** |

| | | |
|---|--|---|
| <ul style="list-style-type: none"> • Social & Emotional Functioning • Early Care & Education Attendance | <ul style="list-style-type: none"> • Early Care & Education Achievement • Communication (Expressive/Receptive)⁺ | <ul style="list-style-type: none"> • Receptive Communication^{**} • Expressive Language^{**} • Restricted Interests^{**} |
| Criterion D | | |
| A rating of '1', '2', or '3' on any of the following 'Risk Behaviors' items: | | |
| <ul style="list-style-type: none"> • Failure to Thrive • Exploited | <ul style="list-style-type: none"> • Self-Harm (12+ months) • Flight Risk/Bolting | <ul style="list-style-type: none"> • Fire Setting (36+ months) |
| Criterion E | | |
| At least one rating of '3', or two or more ratings of '2' on any of the following 'Caregiver Resources and Needs' items: | | |
| <ul style="list-style-type: none"> • Supervision • Involvement with Care • Organization | <ul style="list-style-type: none"> • Medical/Physical • Mental Health • Substance Use | <ul style="list-style-type: none"> • Developmental • Marital/Partner Violence in the Home • Legal Involvement |

⁺ Developmental Module item

^{**} Autism Spectrum Module item

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for Respite Care for beneficiaries ages 6-21:

Respite Care (Ages 6+)

A youth will be recommended for 'Respite Care (Ages 6+)' if they meet (Criterion A OR Criterion B) AND (Criterion C OR Criterion D OR Criterion E)

Treatment Need/Eligibility

| | | |
|--|--|---|
| Criterion A | | |
| A rating of '2' or '3' on any of the following items: | | |
| <ul style="list-style-type: none"> • Developmental/Intellectual | <ul style="list-style-type: none"> • Autism Spectrum | |
| Criterion B | | |
| A rating of '2' or '3' on any of the following 'Behavioral/Emotional Needs' items: | | |
| <ul style="list-style-type: none"> • Psychosis (Thought Disorder) • Impulsivity/Hyperactivity • Depression • Anxiety | <ul style="list-style-type: none"> • Oppositional Behavior • Conduct (Antisocial Behavior) • Attachment Difficulties • Anger Control | <ul style="list-style-type: none"> • Eating Disturbance • Adjustment to Trauma • Substance Use |

Complexity

| | | |
|---|--|--|
| Criterion C | | |
| At least one rating of '3', or two or more ratings of '2' on any of the following 'Life Functioning' items or item groups*: | | |
| <ul style="list-style-type: none"> • Family* <ul style="list-style-type: none"> • Family Functioning, or • Living Situation • Social Functioning | <ul style="list-style-type: none"> • Recreational • Legal (Age 11+) • Sexual Development • Sleep | <ul style="list-style-type: none"> • School Attendance • Decision Making • Medical/Physical |

| Criterion D | | |
|--|---|--|
| A rating of '1', '2', or '3' on any of the following 'Risk Behaviors' items: | | |
| <ul style="list-style-type: none"> • Suicide Risk • Non-Suicidal Self-Injurious Behavior • Other Self Harm (Recklessness) | <ul style="list-style-type: none"> • Victimization/Exploitation • Intentional Misbehavior • Danger to Others | <ul style="list-style-type: none"> • Runaway • Delinquent Behavior • Fire Setting |
| Criterion E | | |
| At least one rating of '3', or two or more ratings of '2' on any of the following 'Caregiver Resources and Needs' items: | | |
| <ul style="list-style-type: none"> • Supervision • Involvement with Care • Organization | <ul style="list-style-type: none"> • Medical/Physical • Mental Health • Substance Use | <ul style="list-style-type: none"> • Developmental • Marital/Partner Violence in the Home • Legal Involvement |

**For the 'Family Item Group' choose the highest rating of the grouped items and count that rating once for the item criteria towards meeting Criterion C.*

Waiver Program for Children with Serious Emotional Disturbances

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 21st 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:

Serious Emotional Disturbances (SED) Waiver: Age 0-5

A child will be recommended for 'Serious Emotional Disturbances (SED) Waiver: Age 0-5' if they meet Criterion A AND (Criterion B OR Criterion C)

Treatment Need/Eligibility

| Criterion A |
|---|
| A rating of '2' or '3' on any of the following 'Challenges' items: |

| | | |
|--|---|--|
| <ul style="list-style-type: none"> • Impulsivity/ Hyperactivity (36+ months) • Depression • Anxiety | <ul style="list-style-type: none"> • Oppositional Behavior (36+ Months) • Attachment Difficulties | <ul style="list-style-type: none"> • Regulatory • Atypical Behaviors • Adjustment to Trauma |
|--|---|--|

Complexity

| Criterion B | | |
|---|--|---|
| A rating of '2' or '3' on any of the following 'Challenges' and 'Risk Behaviors' items: | | |
| <ul style="list-style-type: none"> • Aggression • Self-Harm (12+ months) | <ul style="list-style-type: none"> • Flight Risk/Bolting | <ul style="list-style-type: none"> • Fire Setting (36+ months) |
| Criterion C | | |
| At least one rating of '3', or two or more ratings of '2' on any of the following 'Life Functioning', 'Challenges', 'Developmental module', and 'Child Strengths' items or item groups*: | | |
| <ul style="list-style-type: none"> • Family Functioning • Social & Emotional Functioning • Sleep (12+ Months) | <ul style="list-style-type: none"> • Early Care & Education* Either Attendance, or Behavior, or Achievement | <ul style="list-style-type: none"> • Playfulness |

**For the 'Early Care and Education Item Group' choose the highest rating of the grouped items and count that rating once for the group. For example, if all of the 'Early Care and Education' items (Attendance, Behavior, and Achievement) are rated '2', one rating of '2' is counted for the item criteria towards meeting Criterion C.*

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for the SEDW for beneficiaries ages 6-21:

Serious Emotional Disturbances (SED) Waiver: Age 6+

A youth will be recommended for 'Serious Emotional Disturbances (SED) Waiver: Age 6+' if they meet Criterion A AND (Criterion B OR Criterion C)

Treatment Need/Eligibility

| Criterion A | | |
|--|--|---|
| At least one rating of '3', or two or more ratings of '2' on any of the following 'Behavioral/Emotional Needs' items: | | |
| <ul style="list-style-type: none"> • Psychosis • Impulsivity/ Hyperactivity • Depression • Anxiety | <ul style="list-style-type: none"> • Oppositional Behavior • Conduct (Antisocial Behavior) • Attachment Difficulties • Anger Control | <ul style="list-style-type: none"> • Eating Disturbance • Adjustment to Trauma • Substance Use |

Complexity

| Criterion B | | |
|--|---|--|
| At least one rating of '3', or two or more ratings of '2' on any of the following 'Risk Behaviors' items: | | |
| <ul style="list-style-type: none"> • Suicide Risk • Non-Suicidal Self-Injurious Behavior • Other Self Harm (Recklessness) | <ul style="list-style-type: none"> • Victimization/Exploitation • Intentional Misbehavior • Danger to Others | <ul style="list-style-type: none"> • Runaway • Delinquent Behavior • Fire Setting |
| Criterion C | | |

At least one rating of '3', or two or more ratings of '2' on any of the following 'Life Functioning', items or item groups*:

- | | | |
|----------------------|----------------------|------------------------------|
| • Family Functioning | • Legal (11+) | • School |
| • Living Situation | • Sexual Development | Either Attendance, or |
| • Social Functioning | • Sleep | Behavior, or |
| • Recreational | • Decision Making | Achievement |
| | • Medical/Physical | |

**For the 'School Item Group' choose the highest rating of the grouped items and count that rating once for the group. For example, if all of the 'School' items (Attendance, Behavior, and Achievement) are rated '2', one rating of '2' is counted for the item criteria towards meeting Criterion C.*

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 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:

Intensive Care Coordination with Wraparound (Ages 0-5)

A child will be recommended for 'Wraparound (Ages 0-5)' if they meet (Criterion A OR Criterion B) AND (Criterion C OR Criterion D) AND Criterion E

Treatment Need/Eligibility

| Criterion A | | |
|---|------------------------------|------------------------|
| A rating of '2' or '3' on any of the following items: | | |
| • Developmental/Intellectual | • Autism Spectrum | |
| Criterion B | | |
| A rating of '2' or '3' on any of the following 'Challenges' items: | | |
| • Impulsivity/ Hyperactivity (36+ months) | • Opp. Behavior (36+ Months) | • Regulatory |
| • Depression | • Attachment Difficulties | • Atypical Behaviors |
| • Anxiety | • Aggression | • Sleep (12+ Months) |
| | | • Adjustment to Trauma |

Complexity

| Criterion C | | |
|--|---|-----------------------------|
| At least one rating of '3', or two or more ratings of '2' on any of the following 'Life Functioning', 'Developmental module', and 'Autism Spectrum Module' items or item groups*: | | |
| • Family Functioning | • Communication* | • Early Care & Education* |
| • Social & Emotional Functioning | Either Communication (Expressive/Receptive) ⁺ , | Either Attendance, |
| • Sensory Responsiveness** | Receptive Communication**, or | or Behavior, or |
| • Restricted Interests** | Expressive Language** | Achievement |
| Criterion D | | |
| At least one rating of '3', or two or more ratings of '2' on any of the following 'Risk Behaviors' items: | | |
| • Failure to Thrive | • Self-Harm (12+ months) | • Fire Setting (36+ months) |
| • Exploited | • Flight Risk/Bolting | |
| Criterion E | | |
| At least one rating of '3', or two or more ratings of '2' on any of the following 'Caregiver Resources and Needs' items: | | |
| • Supervision | • Financial Resources | • Developmental |
| • Involvement with Care | • Residential Stability | • Safety |
| • Knowledge | • Medical/Physical | • Marital/Partner |
| • Organization | • Mental Health | Violence in the Home |
| • Social Resources | • Substance Use | • Legal Involvement |

⁺ Developmental Module item

^{**} Autism Spectrum Module item

*For the 'Communication Item Group' and the 'Early Care and Education Item Group' choose the highest rating of the grouped items and count that rating once for the group. For example, if all of the 'Early Care and Education' items (Attendance, Behavior, and Achievement) are rated '2', one rating of '2' is counted for the item criteria towards meeting Criterion C.

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for Intensive Care Coordination with Wraparound for beneficiaries ages 6-21:

Intensive Care Coordination with Wraparound (Ages 6+)

A youth will be recommended for 'Wraparound (Ages 6+)' if they meet (Criterion A OR Criterion B) AND (Criterion C OR Criterion D) AND Criterion E

Treatment Need/Eligibility

| Criterion A | | |
|--|---------------------------------|------------------------|
| A rating of '2' or '3' on any of the following items: | | |
| • Developmental/Intellectual | • Autism Spectrum | |
| Criterion B | | |
| At least one rating of '3', or two or more ratings of '2' on any of the following 'Behavioral/Emotional Needs' items: | | |
| • Psychosis (Thought Disorder) | • Oppositional Behavior | • Eating Disturbance |
| • Impulsivity/Hyperactivity | • Conduct (Antisocial Behavior) | • Adjustment to Trauma |
| • Depression | • Attachment Difficulties | • Substance Use |
| • Anxiety | • Anger Control | |

Complexity

| Criterion C | | |
|--|--|---|
| At least one rating of '3', or two or more ratings of '2' on any of the following 'Life Functioning' items or item groups*: | | |
| • Family* • Family Functioning, or • Living Situation | • Recreational • Legal (Age 11+) • Sexual Development • Sleep | • School Attendance • School Behavior • School Achievement • Decision Making • Medical/Physical |
| • Social Functioning | | |
| Criterion D | | |
| At least one rating of '3', or two or more ratings of '2' on any of the following 'Risk Behaviors' items: | | |
| • Suicide Risk | • Victimization/Exploitation | • Runaway |
| • Non-Suicidal Self-Injurious Behavior | • Intentional Misbehavior | • Delinquent Behavior |
| • Other Self Harm (Recklessness) | • Danger to Others | • Fire Setting |
| Criterion E | | |
| At least one rating of '3', or two or more ratings of '2' on any of the following 'Caregiver Resources and Needs' items: | | |
| • Supervision | • Financial Resources | • Developmental |
| • Involvement with Care | • Residential Stability | • Safety |
| • Knowledge | • Medical/Physical | • Marital/Partner Violence in the Home |
| • Organization | • Mental Health | |
| • Social Resources | • Substance Use | • Legal Involvement |

**For the 'Family Item Group' choose the highest rating of the grouped items and count that rating once for the item criteria towards meeting Criterion C.*

Intensive Crisis Stabilization Services for Children

Intensive Crisis Stabilization Services

Population/Eligibility

These services are for children or youth ages 0 to 21 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 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.

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for Intensive Crisis Stabilization Services for beneficiaries ages 0-5:

Intensive Crisis Stabilization Services for Children (Ages 0-5)

A child will be recommended for 'Intensive Crisis Stabilization Services for Children (Ages 0-5)' if they meet (Criterion A OR Criterion B) AND Criterion C AND Criterion D

Treatment Need/Eligibility

| Criterion A | | |
|---|------------------------------|------------------------|
| A rating of '2' or '3' on any of the following items: | | |
| • Developmental/Intellectual | • Autism Spectrum | |
| Criterion B | | |
| A rating of '2' or '3' on any of the 'Challenges' items: | | |
| • Impulsivity/ Hyperactivity (36+ months) | • Opp. Behavior (36+ Months) | • Regulatory |
| • Depression | • Attachment Difficulties | • Adjustment to Trauma |
| • Anxiety | | |

Complexity

| Criterion C | | |
|---|-----------------------|-----------------------------|
| At least one rating of '3', or two or more ratings of '2' on any of the following items: | | |
| • Aggression | • Flight Risk/Bolting | • Fire Setting (36+ months) |
| • Self-Harm (12+ months) | | |
| Criterion D | | |
| A rating of '1', '2' or '3' on the 'Caregiver Resources and 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 6-21:

Intensive Crisis Stabilization Services for Children (Ages 6+)

A youth will be recommended for 'Intensive Crisis Stabilization Services for Children (Ages 6+)' if they meet (Criterion A OR Criterion B) AND (Criterion C OR Criterion D) AND Criterion E

Treatment Need/Eligibility

| Criterion A | | |
|---|---------------------------------|------------------------|
| A rating of '2' or '3' on any of the following items: | | |
| • Developmental/Intellectual | • Autism Spectrum | |
| Criterion B | | |
| A rating of '2' or '3' on any of the 'Behavioral/Emotional Needs' items: | | |
| • Psychosis (Thought Disorder) | • Oppositional Behavior | • Eating Disturbance |
| • Impulsivity/Hyperactivity | • Conduct (Antisocial Behavior) | • Adjustment to Trauma |
| • Depression | • Attachment Difficulties | • Substance Use |
| • Anxiety | • Anger Control | |

Complexity

| Criterion C | | |
|--|----------------------------------|-----------------------|
| A rating of '3' on any of the following 'Risk Behaviors' items: | | |
| • Suicide Risk | • Other Self Harm (Recklessness) | • Runaway |
| • Non-Suicidal Self-Injurious Behavior | • Danger to Others | • Fire Setting |
| Criterion D | | |
| Two or more ratings of '2' or '3' on any of the following 'Risk Behaviors' items: | | |
| • Suicide Risk | • Victimization/Exploitation | • Runaway |
| • Non-Suicidal Self-Injurious Behavior | • Intentional Misbehavior | • Delinquent Behavior |
| • Other Self Harm (Recklessness) | • Danger to Others | • Fire Setting |
| Criterion E | | |
| A rating of '2' or '3' on the 'Caregiver Resources and Needs' item: Supervision | | |

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+:

Youth Peer Support (Ages 11+)

A youth will be recommended for 'Youth Peer Support (Ages 11+)' if they meet Criterion A AND Criterion B

Treatment Need/Eligibility

| Criterion A | | |
|--|--|---|
| Youth is at least 11 years old . | | |
| Criterion B | | |
| A rating of '2' or '3' on any of the following 'Behavioral/Emotional Needs' items: | | |
| <ul style="list-style-type: none"> • Psychosis (Thought Disorder) • Impulsivity/Hyperactivity • Depression • Anxiety | <ul style="list-style-type: none"> • Oppositional Behavior • Conduct (Antisocial Behavior) • Attachment Difficulties • Anger Control | <ul style="list-style-type: none"> • Eating Disturbance • Adjustment to Trauma • Substance Use |

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:

Parent Support Partner (Ages 0-5)

A child will be recommended for 'Parent Support Partner (Ages 0-5)' if they meet Criterion A OR Criterion B OR Criterion C

Treatment Need/Eligibility

| Criterion A | | |
|--|--|--|
| A rating of '2' or '3' on any of the following 'Life Functioning' or 'Challenges' items: | | |
| <ul style="list-style-type: none"> • Developmental/Intellectual • Autism Spectrum • Impulsivity/ Hyperactivity (36+ months) • Depression | <ul style="list-style-type: none"> • Anxiety • Opp. Behavior (36+ Months) • Attachment Difficulties | <ul style="list-style-type: none"> • Regulatory • Atypical Behaviors • Adjustment to Trauma |
| Criterion B | | |
| A rating of '2' or '3' on any of the following 'Challenges' or Risk Behaviors' items: | | |
| <ul style="list-style-type: none"> • Aggression • Exploited | <ul style="list-style-type: none"> • Self-Harm (12+ months) • Flight Risk/Bolting | <ul style="list-style-type: none"> • Fire Setting (36+ months) |
| Criterion C | | |

| At least one rating of '3', or two or more ratings of '2' on any of the following items: | | |
|--|-------------------------------------|--------------------------------------|
| • Family Functioning | • Sleep (12+ months) | • Early Care & Education Behavior |
| • Social and Emotional Functioning | • Early Care & Education Attendance | • Early Care & Education Achievement |

The following MichiCANS Comprehensive Decision Support Model criteria will be used to determine eligibility for Parent Support Partners ages 6-21:

Parent Support Partner (Ages 6+)

A youth will be recommended for 'Parent Support Partner (Ages 6+)' if they meet Criterion A OR Criterion B

Treatment Need/Eligibility

| Criterion A | |
|--|---------------------------------|
| A rating of '2' or '3' on any of the following items: | |
| • Developmental/Intellectual | • Autism Spectrum |
| Criterion B | |
| A rating of '2' or '3' on any of the following 'Behavioral/Emotional Needs' items: | |
| • Psychosis (Thought Disorder) | • Oppositional Behavior |
| • Impulsivity/Hyperactivity | • Conduct (Antisocial Behavior) |
| • Depression | • Attachment Difficulties |
| • Anxiety | • Anger Control |
| • Eating Disturbance | • Adjustment to Trauma |
| • Substance Use | |

Manual Maintenance

Retain this bulletin until the information is incorporated into the MDHHS Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mailed to ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Typical Providers may phone toll-free 800-292-2550. Atypical Providers may phone toll-free 800-979-4662.

An electronic copy of this document is available at www.michigan.gov/medicaidproviders >> Policy, Letters & Forms.

Approved



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