

BULLETIN

Michigan Medicaid Policy (MMP) | Health Services

Bulletin Number: MMP 26-13

Distribution: Prepaid Inpatient Health Plans (PIHP), Community Mental Health Services Programs (CMHSP), Medicaid Health Plans (MHP)

Issued: April 16, 2026

Subject: Children’s Home and Community-Based Services Waiver (CWP)

Effective: As Indicated

Programs Affected: Medicaid

This bulletin is being issued as a correction to [bulletin MMP 26-07](#) - Children’s Home and Community-Based Services Waiver (CWP) to align with the provisions of the waiver amendment approved by the Centers for Medicare & Medicaid Services (CMS) effective October 1, 2025. The revisions to the Michigan Child and Adolescent Needs and Strengths (MichiCANS) Decision Support Model (DSM) include:

- Removal of “Communication (receptive /expressive)” in Criterion C from 0-5 and Criterion D from 6+ DSMs, to remove duplicative language.
- Correct 6+ Criterion C items that were omitted; added bullet points are bolded below.
- Correct 6+ Criterion F domain title to ‘Developmental Needs/Autism Spectrum Profile’.

All other policy language issued as part of [bulletin MMP 26-07](#) remains as indicated.

CWP: Age 6+

A youth will be recommended for the 'CWP: Age 6+' if they meet Criterion A AND Criterion B AND Criterion C AND Criterion D AND (Criterion E OR Criterion F OR Criterion G)

Treatment Need/Eligibility

Criterion A	
Youth is under the age of 18.	
Criterion B	
At least one rating of ‘2’ or ‘3’ on either of the following items:	
• Developmental/Intellectual	• Autism Spectrum

Criterion C		
At least one rating of '3' or two or more ratings of '2' on any of the following items:		
<ul style="list-style-type: none"> • Adjustment to Traumatic Experiences • Involvement with Care • Knowledge • Social Resources 	<ul style="list-style-type: none"> • Medical/Physical • Mental Health • Substance Use • Developmental • Supervision • Safety 	<ul style="list-style-type: none"> • Organizational Complexity • Intensity of Treatment Support • Diagnostic Complexity • Family Stress • Organization • Residential Stability
Criterion D		
Three or more ratings of '2' or '3' on any of the following items or item groups:		
<ul style="list-style-type: none"> • Cognitive • Developmental • Self-Care Activities of Daily Living • Flight Risk/Bolting 	<ul style="list-style-type: none"> • Communication Group* Augmented Communication, Receptive Communication, OR Expressive Language 	<ul style="list-style-type: none"> • Mobility Group** Either Gross Motor, Fine Motor, Coordination OR Vision and Hearing.

*For the 'Communication Group', choose the highest rating of the grouped items and count that rating once for the group.

**For the 'Mobility Group', choose the highest rating of the grouped items and count that rating once for the group.

Complexity

Criterion E		
At least one rating of '3' or two or more ratings of '2' on any of the following 'Medical Health Module' items:		
<ul style="list-style-type: none"> • Medication Management 	<ul style="list-style-type: none"> • Life Threatening 	<ul style="list-style-type: none"> • Impairment in Functioning
Criterion F		
At least one rating of '3' or two or more ratings of '2' on any of the following 'Developmental Needs/Autism Spectrum Profile' Module items:		
<ul style="list-style-type: none"> • Temperament/Emotional Response • Adaptation to Change • Transitions • Autonomy 	<ul style="list-style-type: none"> • Speech-Sound Production • Social/Pragmatic Use of Language • Stereotyped Sound Output • Gestures 	<ul style="list-style-type: none"> • Repetitive Behaviors • Restricted Interests • Flight Risk/Bolting

Criterion G		
At least one rating of '3, or two or more ratings of '2' on any of the following 'Functioning', 'Behavioral/Emotional Needs', or 'Risk Factors and Behaviors' items:		
<ul style="list-style-type: none"> • Living Situation • School Achievement • Psychosis (Thought Disorder) • Impulsivity/Hyperactivity • Depression • Anxiety • Oppositional Behavior (36 months) 	<ul style="list-style-type: none"> • Conduct (Antisocial Behavior) • Anger Control • Substance Use • Suicide Risk • Non-Suicidal Self-Injury Behavior 	<ul style="list-style-type: none"> • Other Self-Harm (Recklessness) • Danger to Others • Problematic Sexual Behavior • Runaway • Delinquent Behavior • Fire Setting

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



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Health Services