



POLICY AND PROCEDURE MANUAL

SUBJECT Women's Specialty Services (WSS)	ACCOUNTABILITY NMRE, NMRE Network Providers	Effective Date: September 17, 2026	Pages: 2
REQUIRED BY	Managed Care Rules: PIHP Contract Section: Other: Special Provisions Women's Specialty Services	Last Review Date:	Past Review Date:
Policy: ☒ Procedure: ☐	Review Cycle: Annual Author: Chief Clinical Officer	Responsible Department: SUD	Reviewers: NMRE CEO

Definitions

Beneficiary: A person served by the publicly funded behavioral health and substance use disorder system or their representative (also "consumer" or "member").

Care Management/Care Coordination: An administrative function performed at the PIHP or through the access system, allowable under Medicaid, which manages an episode of care.

Case Management: A substance use disorder program that coordinates, plans, provides, evaluates, and monitors services or recovery, from a variety of resources, on behalf of, and in collaboration with, a beneficiary who has a substance use disorder. A substance use disorder case management program offers these services through designated staff working in collaboration with the substance use disorder treatment team and as guided by the individualized treatment planning process.

Gender Competent: Capacity to identify where difference on the basis of gender is significant, and to provide services that appropriately address gender differences and enhance positive outcomes for the population.

Gender-Responsiveness (Designated Women's Program): Creating an environment through site selection, staff selection, program development, content, and material that reflects and understanding of the realities of the lives of women and girls, and that addresses and responds to their strengths and challenges. (Bloom and Covington, 2000)

Michigan Department of Health and Human Services (MDHHS): The principal department of the state of Michigan, headquartered in Lansing, which provides public assistance, child and family welfare services, and oversees health policy and management.

Northern Michigan Regional Entity (NMRE): Region 2 PIHP covering Alcona, Alpena, Antrim, Benzie, Charlevoix, Cheboygan, Crawford, Emmet, Grand Traverse, Iosco, Kalkaska, Leelanau, Manistee, Missaukee, Montmorency, Ogemaw, Oscoda, Otsego, Presque Isle Roscommon, and Wexford counties in northern Lower Michigan.

Substance Use Disorder: A recurrent pattern of alcohol or drug use that causes significant clinical and functional impairment, health issues, and a compromised ability to meet major responsibilities.

Treatment Plan: A written, goal-oriented plan that is developed collaboratively with the beneficiary to specify diagnostic, therapeutic, and rehabilitative interventions designed to change maladaptive behavior patterns and restore physical, psychological, or social functioning.

Women's Specialty Services (WSS): Federally mandated substance use disorder programs for pregnant women, primary caregivers with dependent children, and primary caregivers working to regain child custody

Purpose

The purpose of this policy is to establish the philosophy and requirements for women's substance use disorder (SUD) treatment services (Designated women's programs) within the Northern Michigan Regional Entity (NMRE) Region.

Policy

The NMRE designates and maintains a network of gender-responsive and gender-competent providers who meet all eligibility standards for WSS and Enhanced WSS. The NMRE and its contracted providers will make available the required federal service components—including primary medical care, primary pediatric care, gender-specific SUD treatment, childcare and therapeutic supports for children, and case management and transportation—when no other funding source is available. All identified women's and family needs will be incorporated into the individualized Treatment Plan and documented throughout the course of care.

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Procedure

Women's Specialty Services (WSS) will only be provided by Providers that are designated as gender-responsive by MDHHS or as gender-competent by NMRE. Approved WSS providers must meet standard panel eligibility requirements in compliance with MDHHS Treatment Policy #12: Women's Treatment Services. Approved Enhanced WSS Providers must meet standard panel eligibility requirements in compliance with MDHHS Technical Advisory #8: Enhanced Women's Services.

Federal requirements are contained in 45 CFR (Part 96), section 96.124, and may be summarized as: Providers receiving funding from the state-administered funds set aside for WSS consumers must provide or arrange for the 5 types of services, as noted below. Use of state administered funds to purchase primary medical care, and primary pediatric care must be approved, in writing, in advance, by the Department contract manager.

Eligible Population:

- Pregnant women
- Women with dependent children
- Women attempting to regain custody of their children and/or women whose children are at-risk of out-of-home placement due to substance abuse
- Men who are the primary caregivers of dependent children (for Outpatient services only)
- Men, established as primary caregiver, attempting to regain custody of their children and/or men, established as primary caregiver, whose children are at-risk of out-of-home placement due to substance abuse (for Outpatient services only)

For eligible beneficiaries, the following Federal services must be made available:

1. Primary medical care for women receiving SUD treatment.
2. Primary pediatric care for their children, including immunizations.
3. Gender specific SUD treatment and therapeutic interventions for women that may address issues of relationships, sexual and physical abuse, and parenting.
4. Childcare while women are receiving these services, therapeutic interventions for children in custody of women in treatment which may, among other things, address their developmental needs, and their issues of sexual and physical abuse and neglect.
5. Sufficient case management and transportation services to ensure that women and children have access to the services provided in the first 4 requirements.

The above five types of services may be provided through the MDHHS/PIHP agreement only when no other source of support is available and when no other source is financially responsible.

All women's and family needs must be addressed within a beneficiary's Treatment Plan if identified during the assessment process. If the needs are addressed by a separate agency, or have stabilized, a note indicating this must be included in the beneficiary's chart.

If women and family services are indicated and included on the Treatment Plan, services should be included to address the client's mental health needs. Progress Notes must include documentation of the work being conducted during treatment services.

During billing, the HD modifier must be utilized to identify the specialty services that the client received.

Approval Signature



NMRE Chief Executive Officer

September 17, 2026

Date