



# DEPARTMENT OF HEALTH AND HUMAN SERVICES FY 2016-17 DECISION DOCUMENT PART 2 and PART 2A BOILERPLATE

## HOUSE APPROPRIATIONS SUBCOMMITTEE ON HEALTH AND HUMAN SERVICES

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April 12, 2016



## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><u>GENERAL SECTIONS</u></b></p> <p><b><i>State Spending to Local Governments</i></b></p> <p><b>Sec. 201.</b> Pursuant to section 30 of article IX of the state constitution of 1963, total state spending from state resources under part 1 for fiscal year 2015-2016 is \$6,357,067,700.00 and state spending from state resources to be paid to local units of government for fiscal year 2015-2016 is \$1,221,145,400.00. The itemized statement below identifies appropriations from which spending to local units of government will occur:</p> <p><b>DEPARTMENT OF HEALTH AND HUMAN SERVICES</b></p>	<p><b>Sec. 201.</b> Pursuant to section 30 of article IX of the state constitution of 1963, total state spending from state resources under part 1 for fiscal year <del>2015-2016</del> <b>2016-2017</b> is <del>\$6,357,067,700.00</del> <b>\$6,679,598,800.00</b> and state spending from state resources to be paid to local units of government for fiscal year <del>2015-2016</del> <b>2016-2017</b> is <del>\$1,221,145,400.00</del> <b>\$1,259,438,500.00</b>. The itemized statement below identifies appropriations from which spending to local units of government will occur:</p> <p>DEPARTMENT OF HEALTH AND HUMAN SERVICES</p>	<p><b>Sec. 201.</b> Pursuant to section 30 of article IX of the state constitution of 1963, total state spending from state resources under part 1 for fiscal year <del>2015-2016</del> <b>2016-2017</b> is <del>\$6,357,067,700.00</del> <b>\$6,668,108,000.00</b> and state spending from state resources to be paid to local units of government for fiscal year <del>2015-2016</del> <b>2016-2017</b> is <del>\$1,221,145,400.00</del> <b>\$1,299,265,400.00</b>. The itemized statement below identifies appropriations from which spending to local units of government will occur:</p> <p>DEPARTMENT OF HEALTH AND HUMAN SERVICES</p>	



## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>CHILDREN'S SERVICES AGENCY - CHILD WELFARE</b> Child care fund..... \$ 89,250,000</p> <p><b>CHILDREN'S SERVICES AGENCY - JUVENILE JUSTICE</b> County juvenile officers..... \$ 3,100,000</p> <p><b>PUBLIC ASSISTANCE</b> Family independence program..... \$ 11,700 State disability assistance payments ..... 966,000 Multicultural integration funding ..... 3,795,900</p>	<p><i>(ONLY changed items are shown below):</i></p> <p><b>COMMUNITY SERVICES AND OUTREACH HOUSING AND SUPPORT SERVICES ... 638,300</b> <b>CRIME VICTIM RIGHTS SERVICES GRANTS ... 6,825,000</b></p> <p>Child Care Fund ... <del>89,250,000</del> <b>137,512,800</b></p> <p>County juvenile officers <del>3,100,000</del> <b>3,525,200</b></p> <p>Family independence program <del>11,700</del> <b>8,500</b> State disability assistance payments <del>966,000</del> <b>948,400</b> Multicultural integration funding <del>3,795,900</del> <b>5,478,200</b></p>		<p><i>(ONLY changed items are shown below):</i></p> <p><b>COMMUNITY SERVICES AND OUTREACH HOUSING AND SUPPORT SERVICES ... \$638,300</b> <b>CRIME VICTIM RIGHTS SERVICES GRANTS ... 6,825,000</b></p> <p>Child Care Fund ... <del>\$89,250,000</del> <b>\$137,512,800</b></p> <p>County juvenile officers <del>\$3,100,000</del> <b>\$3,525,200</b></p> <p>Family independence program <del>\$11,700</del> <b>\$8,500</b> State disability assistance payments <del>966,000</del> <b>948,400</b> Multicultural integration funding <del>3,795,900</del> <b>5,478,200</b></p>
<p><b>BEHAVIORAL HEALTH PROGRAM ADMINISTRATION AND SPECIAL PROJECTS</b> Community residential and support services..... \$ 292,100 Housing and support services... 667,400</p>	<p><del>BEHAVIORAL HEALTH PROGRAM ADMINISTRATION AND SPECIAL PROJECTS</del> <del>Community residential and support services ... 292,100</del> <del>Housing and support services ... 667,400</del></p>		<p><del>Housing and support services ... 667,400</del></p>

**DEPARTMENT OF HEALTH AND HUMAN SERVICES -  
Boilerplate for General Sections**

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>BEHAVIORAL HEALTH SERVICES</b>            Medicaid mental health services ..... \$ 791,137,400            Community mental health non-Medicaid services ..... 117,050,400            Medicaid substance use disorder services ..... 16,338,900            State disability assistance program substance use disorder services ..... 2,018,800            Community substance use disorder prevention, education, and treatment ..... 14,553,400            Children's waiver home care program ..... 6,880,000            Nursing home PAS/ARR-OBRA ..... 2,724,900</p>	<p><i>(ONLY changed items are shown below):</i>            Medicaid mental health services <del>\$791,137,400</del> <b>\$769,585,300</b>            Medicaid substance use disorder services <del>16,338,900</del> <b>16,661,100</b>            State disability assistance program substance use disorder services <del>2,018,800</del> <b>1,914,000</b>            Community substance use disorder prevention, education, and treatment <del>14,553,400</del> <b>13,547,400</b>            Children's waiver home care program <del>6,880,000</del> <b>4,579,800</b>            Nursing home PAS/ARR-OBRA <del>2,724,900</del> <b>2,407,300</b></p>		<p><i>(ONLY changed items are shown below):</i>            Medicaid mental health services <del>\$791,137,400</del> <b>\$769,018,600</b>            Community mental health non-Medicaid services ... <del>117,050,400</del> <b>118,806,200</b>            Medicaid substance use disorder services <del>16,338,900</del> <b>17,313,500</b>            Community substance use disorder prevention, education, and treatment <del>14,553,400</del> <b>13,547,400</b>            Children's waiver home care program <del>6,880,000</del> <b>6,970,000</b>            Nursing home PAS/ARR-OBRA <del>2,724,900</del> <b>2,727,800</b>  <b>CHILDREN WITH SERIOUS EMOTIONAL DISTURBANCE WAIVER ... 2,500,000</b>  <b>HEALTHY MICHIGAN PLAN – BEHAVIORAL HEALTH ... 8,100,900</b>  <b>AUTISM SERVICES ... 21,863,000</b></p>
	<p><b>HEALTH POLICY PRIMARY CARE SERVICES .. \$87,700</b></p>		<p><b>HEALTH POLICY PRIMARY CARE SERVICES .. \$87,700</b></p>
<p><b>LABORATORY SERVICES</b>            Laboratory services ..... \$ 5,000</p> <p><b>EPIDEMIOLOGY AND INFECTIOUS DISEASE</b>            Sexually transmitted disease control program ..... \$ 377,000</p>	<p>Laboratory services <del>\$ 5,000</del> <b>\$5,200</b>  <b>DISEASE CONTROL, PREVENTION, AND EPIDEMIOLOGY AND INFECTIOUS DISEASE IMMUNIZATION PROGRAM ... \$1,042,700</b>            Sexually transmitted disease control program <del>\$ 377,000</del></p>		<p>Laboratory services <del>\$ 5,000</del> <b>\$5,200</b>  <b>DISEASE CONTROL, PREVENTION, AND EPIDEMIOLOGY AND INFECTIOUS DISEASE IMMUNIZATION PROGRAM ... \$1,042,700</b>            Sexually transmitted disease control program <del>\$ 377,000</del></p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>LOCAL HEALTH ADMINISTRATION AND GRANTS</b> Essential local public health services ..... \$ 34,199,500 Implementation of 1993 PA 133, MCL 333.17015 ..... 300</p> <p><b>CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION</b> AIDS prevention, testing, and care programs ..... \$ 606,100 Cancer prevention and control program..... 116,700</p>	<p><i>(ONLY changed items are shown below):</i></p> <p>Essential local public health services <del>\$34,199,500</del> <b>\$32,304,800</b></p> <p><b>HEALTH AND WELLNESS INITIATIVES .. 1,918,300</b></p> <p><b>SEXUALLY TRANSMITTED DISEASE CONTROL PROGRAM ... 194,300</b></p> <p><del>CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION</del> AIDS prevention, testing, and care programs <del>\$ 606,100</del> <b>\$929,400</b></p> <p>Cancer prevention and control program <del>116,700</del> <b>102,700</b></p> <p><b>CHRONIC DISEASE CONTROL AND HEALTH PROMOTION ADMINISTRATION .. 7,100</b></p>		<p><i>(ONLY changed items are shown below):</i></p> <p><b>LOCAL HEALTH ADMINISTRATION AND GRANTS AND ADMINISTRATIVE SERVICES</b> AIDS prevention, testing, and care programs <del>606,100</del> <b>\$929,400</b> Cancer prevention and control program <del>116,700</del> <b>102,700</b></p> <p><b>CHRONIC DISEASE CONTROL AND HEALTH PROMOTION ADMINISTRATION .. 7,100</b> Essential local public health services <del>\$34,199,500</del> <b>34,199,500</b></p> <p><b>HEALTH AND WELLNESS INITIATIVES.. 1,918,300</b></p> <p><b>SEXUALLY TRANSMITTED DISEASE CONTROL PROGRAM ... 194,300</b></p> <p><del>CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION</del></p>
<p><b>FAMILY, MATERNAL, AND CHILDREN'S HEALTH SERVICES</b> Prenatal care outreach and service delivery support ..... \$ 2,044,900</p> <p><b>CHILDREN'S SPECIAL HEALTH CARE SERVICES</b> Outreach and advocacy ..... \$ 2,204,000 Medical care and treatment..... 949,800</p>	<p>Prenatal care outreach and service delivery support <del>\$2,044,900</del> <b>\$3,469,800</b></p> <p>Outreach and advocacy <del>\$2,204,000</del> <b>\$2,440,900</b></p>		<p><del>FAMILY, MATERNAL, AND CHILDREN'S HEALTH SERVICES</del> Prenatal care outreach and service delivery support <del>\$ 2,044,900</del> <b>\$3,469,800</b></p> <p>Outreach and advocacy <del>\$2,204,000</del> <b>\$2,755,000</b></p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>CRIME VICTIM SERVICES COMMISSION</b> Crime victim rights services grants ..... \$ 6,389,800</p> <p><b>AGING AND ADULT SERVICES AGENCY</b> Community services..... \$ 13,333,500 Nutrition services ..... 9,287,000 Respite care program..... 5,868,700 Senior volunteer service programs ..... 1,127,900</p>	<p><i>(ONLY changed items are shown below):</i></p> <p><del>CRIME VICTIM SERVICES COMMISSION</del> <del>Crime victim rights services grants ..\$6,389,800</del></p> <p>Community services <del>13,333,500</del> <b>16,533,500</b> Nutrition services <del>9,287,000</del> <b>11,087,000</b> Respite care program <del>5,868,700</del> <b>6,500,300</b> Senior volunteer service programs <del>1,127,900</del> <b>963,600</b></p>		<p><i>(ONLY changed items are shown below):</i></p> <p><del>CRIME VICTIM SERVICES COMMISSION</del> <del>Crime victim rights services grants ..\$6,389,800</del></p> <p>Community services <del>\$13,333,500</del> <b>\$17,370,200</b> Nutrition services <del>9,287,000</del> <b>11,087,000</b></p> <p>Senior volunteer service programs <del>1,127,900</del> <b>963,600</b></p>
<p><b>MEDICAL SERVICES</b> Hospital services and therapy ..... \$ 2,449,500 Physician services ..... 10,665,900 Dental services ..... 1,202,000 Long-term care services..... <u>81,530,900</u></p>	<p>Physician services <del>10,665,900</del> <b>12,504,900</b> <b>TRANSPORTATION .. 949,800</b> Dental services <del>1,202,000</del> <b>1,402,400</b> Long-term care services <del>81,530,900</del> <b>82,912,800</b></p>		<p>Physician services <del>10,665,900</del> <b>12,504,900</b> <b>TRANSPORTATION ... 949,800</b> Dental services <del>1,202,000</del> <b>1,402,400</b> Long-term care services <del>81,530,900</del> <b>82,912,800</b></p>
<p><b>TOTAL OF PAYMENTS TO LOCAL UNITS OF GOVERNMENT .....\$1,221,145,400</b></p>	<p>TOTAL OF PAYMENTS TO LOCAL UNITS OF GOVERNMENT <del>\$1,221,145,400</del> <b>\$1,250,438,500</b></p>		<p>TOTAL OF PAYMENTS TO LOCAL UNITS OF GOVERNMENT <del>\$1,221,145,400</del> <b>\$1,299,265,400</b></p>
<p><b><i>Appropriations Subject to Management and Budget Act</i></b></p> <p><b>Sec. 202.</b> The appropriations authorized under this part and part 1 are subject to the management and budget act, 1984 PA 431, MCL 18.1101 to 18.1594.</p>	<p><b>Sec. 202.</b> The appropriations authorized under this <del>part and part 4</del> <b>ARTICLE</b> are subject to the management and budget act, 1984 PA 431, MCL 18.1101 to 18.1594.</p>		<p><b>Sec. 202.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Terms and Acronyms</b></p> <p><b>Sec. 203.</b> As used in this part and part 1:</p> <p>(a) "AFC" means adult foster care.</p> <p>(b) "AIDS" means acquired immunodeficiency syndrome.</p> <p>(c) "CMHSP" means a community mental health services program as that term is defined in section 100a of the mental health code, 1974 PA 258, MCL 330.1100a.</p> <p>(d) "Current fiscal year" means the fiscal year ending September 30, 2016.</p> <p>(e) "Department" means the department of health and human services.</p> <p>(f) "Director" means the director of the department.</p> <p>(g) "DSH" means disproportionate share hospital.</p> <p>(h) "EPSDT" means early and periodic screening, diagnosis, and treatment.</p> <p>(i) "Federal poverty level" means the poverty guidelines published annually in the Federal Register by the United States Department of Health and Human Services under its authority to revise the poverty line under 42 USC 9902.</p> <p>(j) "FTE" means full-time equated.</p> <p>(k) "GME " means graduate medical education.</p> <p>(l) "Health plan" means, at a minimum, an organization that meets the criteria for delivering the comprehensive package of services under the department's comprehensive health plan.</p> <p>(m) "HEDIS" means healthcare effectiveness data and information set.</p> <p>(n) "HMO" means health maintenance organization.</p> <p>(o) "IDEA" means the individuals with disabilities education act, 20 USC 1400 to 1482.</p> <p>(p) "IDG" means interdepartmental grant.</p>	<p><b>Sec. 203.</b> As used in this part and part 1:</p> <p><i>(ONLY changed items are shown below):</i></p> <p><del>(d) "Current fiscal year" means the fiscal year ending September 30, 2016.</del></p> <p>... and items relettered as appropriate.</p>		<p><b>Sec. 203.</b> As used in this part and part 1:</p> <p><i>(ONLY changed items are shown below):</i></p> <p><del>(a) "AFC" means adult foster care.</del></p> <p>(d) "Current fiscal year" means the fiscal year ending September 30, <del>2016</del> <b>2017</b>.</p> <p>... and items re-ordered and relettered as appropriate.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
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<p>(q) "MCH" means maternal and child health.</p> <p>(r) "Medicare" means subchapter XVIII of the social security act, 42 USC 1395 to 1395///.</p> <p>(s) "MiCAFE" means Michigan's coordinated access to food for the elderly.</p> <p>(t) "MiChild" means the program described in section 1670.</p> <p>(u) "PAS/ARR-OBRA" means the preadmission screening and annual resident review required under the omnibus budget reconciliation act of 1987, section 1919(e)(7) of the social security act, 42 USC 1396r.</p> <p>(v) "PIHP" means an entity designated by the department as a regional entity or a specialty prepaid inpatient health plan for Medicaid mental health services, services to individuals with developmental disabilities, and substance use disorder services. Regional entities are described in section 204b of the mental health code, 1974 PA 258, MCL 330.1204b. Specialty prepaid inpatient health plans are described in section 232b of the mental health code, 1974 PA 258, MCL 330.1232b.</p> <p>(w) "Previous fiscal year" means the fiscal year ending September 30, 2015.</p> <p>(x) "Settlement" means the settlement agreement entered in the case of <u>Dwayne B. v Snyder</u>, docket no. 2:06-cv-13548 in the United States district court for the eastern district of Michigan.</p> <p>(y) "SSI" means supplemental security income.</p> <p>(z) "Temporary assistance for needy families" or "TANF" or "title IV-A" means part A of subchapter IV of the social security act, 42 USC 601 to 619.</p> <p>(aa) "Title IV-D" means part D of title IV of the social security act, 42 USC 651 to 669b.</p> <p>(bb) "Title IV-E" means part E of title IV of the social security act, 42 USC 670 to 679c.</p> <p>(cc) "Title X" means title X of the public health service act, 42 USC 300 to 300a-8, which establishes grants to states for family planning services.</p> <p>(dd) "Title XIX" and "Medicaid" mean subchapter XIX of the social security act, 42 USC 1396 to 1396w-5.</p>	<p><i>(ONLY changed items are shown below):</i></p> <p><b>(T) "MISACWIS" MEANS MICHIGAN STATEWIDE AUTOMATED CHILD WELFARE INFORMATION SYSTEM.</b></p> <p><b>(U) "MMIS" MEANS THE MEDICAID MANAGEMENT INFORMATION SYSTEM.</b></p> <p><del>(w) "Previous fiscal year" means the fiscal year ending September 30, 2015.</del></p> <p><b>(AA) "TITLE IV-B" MEANS PART B OF TITLE IV OF THE SOCIAL SECURITY ACT, 42 USC 620 TO 629M.</b></p> <p>... and items relettered as appropriate.</p>	<p><i>(ONLY changed items are shown below):</i></p> <p><b>(U) "MISACWIS" MEANS MICHIGAN STATEWIDE AUTOMATED CHILD WELFARE INFORMATION SYSTEM.</b></p> <p><del>(w) "Previous fiscal year" means the fiscal year ending September 30, 2015.</del></p> <p><b>(BB) "TITLE IV-B" MEANS PART B OF TITLE IV OF THE SOCIAL SECURITY ACT, 42 USC 620 TO 629M.</b></p> <p><del>(cc) "Title X" means title X SUBCHAPTER VIII of the public health service act, 42 USC 300 to 300a-8, which establishes grants to states for family planning services.</del></p> <p><del>(dd) "Title XIX" and "Medicaid" meanS subchapter XIX of the social security act, 42 USC 1396 to 1396w-5.</del></p> <p>... and items re-ordered and relettered as appropriate.</p>	



## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Performance Metrics for New Programs or Program Increases</i></b></p> <p><b>Sec. 204.</b> In addition to the metrics required under section 447 of the management and budget act, 1984 PA 431, MCL 18.1447, for each new program or program enhancement for which funds in excess of \$1,000,000.00 are appropriated in part 1, the department shall provide not later than November 1, 2015 a list of program-specific metrics intended to measure its performance based on a return on taxpayer investment. The department shall deliver the program-specific metrics to members of the senate and house subcommittees on the department budget, fiscal agencies, and the state budget director. The department shall provide an update on its progress in tracking program-specific metrics and the status of program success at an appropriations subcommittee meeting called for by the subcommittee chair.</p>	Delete current law.		<p><b>Sec. 204.</b> In addition to the metrics required under section 447 of the management and budget act, 1984 PA 431, MCL 18.1447, for each new program or program enhancement for which funds in excess of \$1,000,000.00 are appropriated in part 1, the department shall provide not later than November 1, <del>2015</del> <b>OF THE CURRENT FISCAL YEAR</b> a list of program-specific metrics intended to measure its performance based on a return on taxpayer investment. The department shall deliver the program-specific metrics to members of the senate and house subcommittees on the department budget, fiscal agencies, and the state budget director. The department shall provide an update on its progress in tracking program-specific metrics and the status of program success at an appropriations subcommittee meeting called for by the subcommittee chair.</p>
<p><b><i>Time-Limited Addendum to Social Welfare Act</i></b></p> <p><b>Sec. 205.</b> Pursuant to section 1b of the social welfare act, 1939 PA 280, MCL 400.1b, the department shall treat part 1 and this part as a time-limited addendum to the social welfare act, 1939 PA 280, MCL 400.1 to 400.119b.</p>	Delete current law.		<p><b>Sec. 205.</b> No changes from current law.</p>
<p><b><i>Contingency Fund Appropriations</i></b></p> <p><b>Sec. 206.</b> (1) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$400,000,000.00 for federal contingency funds. These funds are not available for expenditure until they have been transferred to another line item in part 1 under section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393. These funds shall not be made available to increase TANF authorization.</p>	<p><b>Sec. 206.</b> (1) No changes from current law.</p>		<p><b>Sec. 206.</b> (1) No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
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(2) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$45,000,000.00 for state restricted contingency funds. These funds are not available for expenditure until they have been transferred to another line item in part 1 under section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.	(2) No changes from current law.		(2) No changes from current law.
(3) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$40,000,000.00 for local contingency funds. These funds are not available for expenditure until they have been transferred to another line item in part 1 under section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.	(3) No changes from current law.		(3) No changes from current law.
(4) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$60,000,000.00 for private contingency funds. These funds are not available for expenditure until they have been transferred to another line item in part 1 under section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.	(4) No changes from current law.		(4) No changes from current law.
<p><b>Performance Metrics</b></p> <p><b>Sec. 207.</b> The department shall maintain, on a publicly accessible website, a department scorecard that identifies, tracks, and regularly updates key metrics that are used to monitor and improve the department's performance.</p>	<p><b>Sec. 207.</b> No changes from current law.</p>		<p><b>Sec. 207.</b> No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Internet Reporting Requirements</i></b></p> <p><b>Sec. 208.</b> Unless otherwise specified, the departments and agencies receiving appropriations in part 1 shall use the Internet to fulfill the reporting requirements of this part and part 1. This requirement shall include transmission of reports via electronic mail to the recipients identified for each reporting requirement, and it shall include placement of reports on the Internet.</p>	<p><b>Sec. 208.</b> <del>Unless otherwise specified, the</del> <b>THE</b> departments and agencies receiving appropriations in part 1 shall use the Internet to fulfill the reporting requirements of this part and part 1 <b>ARTICLE</b>. This requirement shall <b>MAY</b> include transmission of reports via electronic mail to the recipients identified for each reporting requirement, <del>and</del> <b>OR</b> it shall <b>MAY</b> include placement of reports on <del>the</del> <b>AN</b> Internet <b>OR</b> <b>INTRANET SITE</b>.</p>		<p><b>Sec. 208.</b> No changes from current law.</p>
<p><b><i>Purchasing Preference for American, Michigan, and Veteran Goods or Services</i></b></p> <p><b>Sec. 209.</b> Funds appropriated in part 1 shall not be used for the purchase of foreign goods or services, or both, if competitively priced and of comparable quality American goods or services, or both, are available. Preference shall be given to goods or services, or both, manufactured or provided by Michigan businesses if they are competitively priced and of comparable quality. In addition, preference shall be given to goods or services, or both, that are manufactured or provided by Michigan businesses owned and operated by veterans if they are competitively priced and of comparable quality.</p>	<p><b>Sec. 209.</b> No changes from current law.</p>		<p><b>Sec. 209.</b> No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Businesses in Deprived and Depressed Communities</i></b></p> <p><b>Sec. 210.</b> The director and the director of the aging and adult services agency shall take all reasonable steps to ensure businesses in deprived and depressed communities compete for and perform contracts to provide services or supplies, or both. The director and the director of the aging and adult services agency shall strongly encourage firms with which the department contracts to subcontract with certified businesses in depressed and deprived communities for services, supplies, or both.</p>	<p><b>Sec. 210.</b> The director <del>and the director of the aging and adult services agency</del> shall take all reasonable steps to ensure businesses in deprived and depressed communities compete for and perform contracts to provide services or supplies, or both. <b>The EACH</b> director <del>and the director of the aging and adult services agency</del> shall strongly encourage firms with which the department contracts to subcontract with certified businesses in depressed and deprived communities for services, supplies, or both.</p>		<p><b>Sec. 210.</b> The director <del>and the director of the aging and adult services agency</del> shall take all reasonable steps to ensure businesses in deprived and depressed communities compete for and perform contracts to provide services or supplies, or both. <b>The EACH</b> director <del>and the director of the aging and adult services agency</del> shall strongly encourage firms with which the department contracts to subcontract with certified businesses in depressed and deprived communities for services, supplies, or both.</p>
<p><b><i>Fee Revenue Carryforward</i></b></p> <p><b>Sec. 211.</b> If the revenue collected by the department from fees and collections exceeds the amount appropriated in part 1, the revenue may be carried forward with the approval of the state budget director into the subsequent fiscal year. The revenue carried forward under this section shall be used as the first source of funds in the subsequent fiscal year.</p>	<p><b>Sec. 211.</b> No changes from current law.</p>		<p><b>Sec. 211.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Detailed Report of Fund Sources</i></b></p> <p><b>Sec. 212.</b> (1) On or before February 1 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director on the detailed name and amounts of federal, restricted, private, and local sources of revenue that support the appropriations in each of the line items in part 1.</p>	<p><b>Sec. 212.</b> (1) On or before February 1 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director on the detailed name and amounts of <b>ESTIMATED</b> federal, restricted, private, and local sources of revenue that support the appropriations in each of the line items in part 1.</p>		<p><b>Sec. 212.</b> (1) On or before February 1 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director on the detailed name and amounts of <b>ESTIMATED</b> federal, restricted, private, and local sources of revenue that support the appropriations in each of the line items in part 1.</p>
<p>(2) Upon the release of the next fiscal year executive budget recommendation, the department shall report to the same parties in subsection (1) on the amounts and detailed sources of federal, restricted, private, and local revenue proposed to support the total funds appropriated in each of the line items in part 1 of the next fiscal year executive budget proposal.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Report on Tobacco Tax Funds and Healthy Michigan Funds</b></p> <p><b>Sec. 213.</b> The state departments, agencies, and commissions receiving tobacco tax funds and Healthy Michigan fund revenue from part 1 shall report by April 1 of the current fiscal year to the senate and house appropriations committees, the senate and house fiscal agencies, and the state budget director on the following:</p> <p>(a) Detailed spending plan by appropriation line item including description of programs and a summary of organizations receiving these funds.</p> <p>(b) Description of allocations or bid processes including need or demand indicators used to determine allocations.</p> <p>(c) Eligibility criteria for program participation and maximum benefit levels where applicable.</p> <p>(d) Outcome measures used to evaluate programs, including measures of the effectiveness of these programs in improving the health of Michigan residents.</p> <p>(e) Any other information considered necessary by the house of representatives or senate appropriations committees or the state budget director.</p>	<p><b>Sec. 213.</b> No changes from current law.</p>		<p><b>Sec. 213.</b> No changes from current law.</p>
<p><b>FTE Report</b></p> <p><b>Sec. 214.</b> On a quarterly basis, the department shall report on the number of FTEs in pay status by type of staff.</p>	<p>Delete current law.</p>		<p><b>Sec. 214.</b> <del>On a quarterly basis,</del> <b>BY MARCH 1 AND AUGUST 1 OF THE CURRENT FISCAL YEAR</b>, the department shall report on the number of FTEs in pay status by type of staff.</p>
<p><b>Notification if Legislative Objectives Conflict with Federal Regulation</b></p> <p><b>Sec. 215.</b> If a legislative objective of this part or of a bill or amendment to a bill to amend the social welfare act, 1939 PA 280, MCL 400.1 to 400.119b, cannot be implemented because implementation would conflict with or violate federal regulations, the department shall notify the state budget director, the chairs of the house and senate subcommittees on the department budget, and the house and senate fiscal agencies and policy offices of that fact.</p>	<p><b>Sec. 215.</b> No changes from current law.</p>		<p><b>Sec. 215.</b> No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Use of Prior-Year Revenue</i></b></p> <p><b>Sec. 216.</b> (1) In addition to funds appropriated in part 1 for all programs and services, there is appropriated for write-offs of accounts receivable, deferrals, and for prior year obligations in excess of applicable prior year appropriations, an amount equal to total write-offs and prior year obligations, but not to exceed amounts available in prior year revenues.</p>	<p><b>Sec. 216.</b> (1) No changes from current law.</p>		<p><b>Sec. 216.</b> (1) No changes from current law.</p>
<p>(2) The department's ability to satisfy appropriation fund sources in part 1 shall not be limited to collections and accruals pertaining to services provided in the current fiscal year, but shall also include reimbursements, refunds, adjustments, and settlements from prior years.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p><b><i>Out-of-State Travel Report</i></b></p> <p><b>Sec. 217.</b> The departments and agencies receiving appropriations in part 1 shall prepare a report on out-of-state travel expenses not later than January 1 of each year. The travel report shall be a listing of all travel by classified and unclassified employees outside this state in the immediately preceding fiscal year that was funded in whole or in part with funds appropriated in the department's budget. The report shall be submitted to the senate and house appropriations committees, the house and senate fiscal agencies, and the state budget director. The report shall include the following information:</p> <p>(a) The dates of each travel occurrence.</p> <p>(b) The transportation and related costs of each travel occurrence, including the proportion funded with state general fund/general purpose revenues, the proportion funded with state restricted revenues, the proportion funded with federal revenues, and the proportion funded with other revenues.</p>	<p><b>Sec. 217.</b> No changes from current law.</p>		<p><b>Sec. 217.</b> No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Basic Health Services</b></p> <p><b>Sec. 218.</b> The department shall include the following in its annual list of proposed basic health services as required in part 23 of the public health code, 1978 PA 368, MCL 333.2301 to 333.2321:</p> <p>(a) Immunizations.</p> <p>(b) Communicable disease control.</p> <p>(c) Sexually transmitted disease control.</p> <p>(d) Tuberculosis control.</p> <p>(e) Prevention of gonorrhoea eye infection in newborns.</p> <p>(f) Screening newborns for the conditions listed in section 5431 of the public health code, 1978 PA 368, MCL 333.5431, or recommended by the newborn screening quality assurance advisory committee created under section 5430 of the public health code, 1978 PA 368, MCL 333.5430.</p> <p>(g) Health and human services annex of the Michigan emergency management plan.</p> <p>(h) Prenatal care.</p>	<p>Delete current law.</p>		<p><b>Sec. 218.</b> The department shall include, <b>BUT NOT BE LIMITED TO</b>, the following in its annual list of proposed basic health services as required in part 23 of the public health code, 1978 PA 368, MCL 333.2301 to 333.2321:</p> <p>(Items a through h: No changes from current law)</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Contract with Michigan Public Health Institute</i></b></p> <p><b>Sec. 219.</b> (1) The department may contract with the Michigan Public Health Institute for the design and implementation of projects and for other public health-related activities prescribed in section 2611 of the public health code, 1978 PA 368, MCL 333.2611. The department may develop a master agreement with the Institute to carry out these purposes for up to a 3-year period. The department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director on or before January 1 of the current fiscal year all of the following:</p> <p>(a) A detailed description of each funded project.</p> <p>(b) The amount allocated for each project, the appropriation line item from which the allocation is funded, and the source of financing for each project.</p> <p>(c) The expected project duration.</p> <p>(d) A detailed spending plan for each project, including a list of all subgrantees and the amount allocated to each subgrantee.</p>	<p><b>Sec. 219.</b> (1) No changes from current law.</p>		<p><b>Sec. 219.</b> (1) No changes from current law.</p>
<p>(2) On or before September 30 of the current fiscal year, the department shall provide to the same parties listed in subsection (1) a copy of all reports, studies, and publications produced by the Michigan Public Health Institute, its subcontractors, or the department with the funds appropriated in part 1 and allocated to the Michigan Public Health Institute.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p><b><i>Faith-Based Contracts and Services</i></b></p> <p><b>Sec. 220.</b> The department shall ensure that faith-based organizations are able to apply and compete for services, programs, or contracts that they are qualified and suitable to fulfill. The department shall not disqualify faith-based organizations solely on the basis of the religious nature of their organization or their guiding principles or statements of faith.</p>	<p><b>Sec. 220.</b> No changes from current law.</p>		<p><b>Sec. 220.</b> No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Notification and Report of Policy Changes</b></p> <p><b>Sec. 222.</b> (1) The department shall provide written notification to the chairpersons of the senate and house appropriations subcommittees on the budget for the department of any policy changes at least 30 days before the implementation date.</p>	Delete current law.		Delete current law.
<p>(2) The department shall make the entire policy and procedures manual available and accessible to the public via the department website.</p>	Delete current law.		Retain current law and renumber as (1).
<p>(3) The department shall report no later than April 1 of the current fiscal year on each specific policy change made to implement a public act affecting the department that took effect during the prior calendar year to the house and senate appropriations subcommittees on the budget for the department, the joint committee on administrative rules, and the senate and house fiscal agencies. The department shall attach each policy bulletin issued during the prior calendar year to this report.</p>	Delete current law.		<p><del>(3)</del> <b>(2)</b> The department shall report no later than April 1 of the current fiscal year on each specific policy change made to implement a public act affecting the department that took effect during the prior calendar year to the house and senate appropriations subcommittees on the budget for the department, the joint committee on administrative rules, and the senate and house fiscal agencies <b>AND POLICY OFFICES</b>. The department shall attach each policy bulletin issued during the prior calendar year to this report.</p>
<p><b>Fees for Publications, Videos, Conferences, and Workshops</b></p> <p><b>Sec. 223.</b> The department may establish and collect fees for publications, videos and related materials, conferences, and workshops. Collected fees shall be used to offset expenditures to pay for printing and mailing costs of the publications, videos and related materials, and costs of the workshops and conferences. The department shall not collect fees under this section that exceed the cost of the expenditures.</p>	<b>Sec. 223.</b> No changes from current law.		<b>Sec. 223.</b> No changes from current law.

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Food Assistance Overissuance Collections</i></b></p> <p><b>Sec. 224.</b> The department may retain all of the state's share of food assistance overissuance collections as an offset to general fund/general purpose costs. Retained collections shall be applied against federal funds deductions in all appropriation units where department costs related to the investigation and recoupment of food assistance overissuances are incurred. Retained collections in excess of such costs shall be applied against the federal funds deducted in the executive operations appropriation unit.</p>	<p><b>Sec. 224.</b> The department may retain all of the state's share of food assistance overissuance collections as an offset to general fund/general purpose costs. Retained collections shall be applied against federal funds deductions in all appropriation units where department costs related to the investigation and recoupment of food assistance overissuances are incurred. Retained collections in excess of such costs shall be applied against the federal funds deducted in the <del>executive operations</del> <b>DEPARTMENTWIDE ADMINISTRATION</b> appropriation unit.</p>		<p><b>Sec. 224.</b> The department may retain all of the state's share of food assistance overissuance collections as an offset to general fund/general purpose costs. Retained collections shall be applied against federal funds deductions in all appropriation units where department costs related to the investigation and recoupment of food assistance overissuances are incurred. Retained collections in excess of such costs shall be applied against the federal funds deducted in the <del>executive operations</del> <b>DEPARTMENTWIDE ADMINISTRATION</b> appropriation unit.</p>
<p><b><i>Public and Private Service Providers</i></b></p> <p><b>Sec. 225.</b> (1) Sanctions, suspensions, conditions for provisional license status, and other penalties shall not be more stringent for private service providers than for public entities performing equivalent or similar services.</p>	<p><b>Sec. 225.</b> (1) No changes from current law.</p>		<p><b>Sec. 225.</b> (1) No changes from current law.</p>
<p>(2) Neither the department nor private service providers or licensees shall be granted preferential treatment or considered automatically to be in compliance with administrative rules based on whether they have collective bargaining agreements with direct care workers. Private service providers or licensees without collective bargaining agreements shall not be subjected to additional requirements or conditions of licensure based on their lack of collective bargaining agreements.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Job Readiness Work Group Report</i></b></p> <p><b>Sec. 229.</b> Unless already provided in the previous fiscal year, the department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by December 1 of the current fiscal year a report on the recommendations of the workgroup established in section 229 of article X of 2014 PA 252 on aligning spending on Michigan Works! job readiness programs with the declining family independence program caseload. The report shall include, but is not limited to, the proposed amount of TANF funding provided to Michigan Works!</p>	Delete current law.		Delete current law.
<p><b><i>Travel Reimbursement to Local County Board Members and Directors</i></b></p> <p><b>Sec. 231.</b> From the funds appropriated in part 1 for travel reimbursements to employees, the department shall allocate up to \$100,000.00 toward reimbursing counties for the out-of-pocket travel costs of the local county department board members and county department directors to attend 1 meeting per year of the Michigan County Social Services Association.</p>	Delete current law.		<b>Sec. 231.</b> No changes from current law.

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Report on Status of DHHS Merger</i></b></p> <p><b>Sec. 233.</b> By the end of each fiscal quarter of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices on the status of the merger, executed according to Executive Order No. 2015-4, of the department of community health and the department of human services to create the department of health and human services. The report must indicate changes from the prior report and shall include, but not be limited to, all of the following information:</p> <p>(a) The impact on client service delivery or access to services, including the restructuring or consolidation of services.</p> <p>(b) Any cost increases or reductions that resulted from rent or building occupancy changes.</p> <p>(c) Facilities in use, including any office closures or consolidations, or new office locations, including hoteling stations.</p> <p>(d) Current status of FTE positions, including the number of FTE positions that were eliminated or added due to duplication of efforts.</p> <p>(e) Any other efficiencies, costs, or savings associated with the merger.</p>	<p><b>Sec. 233.</b> By the end of each fiscal quarter of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, <del>and</del> the senate and house policy offices, <b>AND THE STATE BUDGET OFFICE</b> on the status of the merger, executed according to Executive Order No. 2015-4, of the department of community health and the department of human services to create the department of health and human services. The report must indicate changes from the prior report and shall include, but not be limited to, all of the following information:</p> <p>(a) through (e) - No changes from current law.</p>	<p><del>Sec. 233. By the end of each fiscal quarter</del> <b>MARCH 31 AND SEPTEMBER 30</b> of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, <del>and</del> the senate and house policy offices, <b>AND THE STATE BUDGET OFFICE</b> on the status of the merger, executed according to Executive Order No. 2015-4, of the department of community health and the department of human services to create the department of health and human services. The report must indicate changes from the prior report and shall include, but not be limited to, all of the following information:</p> <p>(a) through (e) - No changes from current law.</p>	

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Michigan Strategic Fund Interagency Agreement for Use of TANF Funds</i></b></p> <p><b>Sec. 234.</b> The department shall include specific outcome and performance reporting requirements in the interagency agreement with the Michigan strategic fund for TANF funding to provide job readiness and welfare-to-work programming. TANF funding provided to the Michigan strategic fund in the current fiscal year is contingent on compliance with the data and reporting requirements described in this section. The interagency agreement must require the Michigan strategic fund to provide all of the following items by January 1 of the current fiscal year for the previous year to the senate and house appropriations committees:</p> <p>(a) An itemized spending report on TANF funding, including all of the following:</p> <p>(i) Direct services to clients.</p> <p>(ii) Administrative expenditures.</p> <p>(b) The number of family independence program (FIP) clients served through the TANF funding, including all of the following:</p> <p>(i) The number and percentage who obtained employment through Michigan Works!</p> <p>(ii) The number and percentage who fulfilled their TANF work requirement through other job readiness programming.</p> <p>(iii) Average TANF spending per client.</p> <p>(iv) The number and percentage of clients who were referred to Michigan Works! but did not receive a job or job readiness placement and the reasons why.</p>	<p><b>Sec. 234.</b> The department shall include specific outcome and performance reporting requirements in the interagency agreement with the Michigan strategic fund <del>Michigan strategic fund</del> <b>MICHIGAN TALENT INVESTMENT AGENCY</b> for TANF funding to provide job readiness and welfare-to-work programming. TANF funding provided to the <del>Michigan strategic fund</del> <b>MICHIGAN TALENT INVESTMENT AGENCY</b> in the current fiscal year is contingent on compliance with the data and reporting requirements described in this section. The interagency agreement must require the <del>Michigan strategic fund</del> <b>MICHIGAN TALENT INVESTMENT AGENCY</b> to provide all of the following items by January 1 of the current fiscal year for the previous year to the senate and house appropriations committees <b>AND THE STATE BUDGET OFFICE:</b></p> <p>(a) through (b) - No changes from current law.</p>	<p><b>Sec. 234.</b> The department shall include specific outcome and performance reporting requirements in the interagency agreement with the <del>Michigan strategic fund</del> <b>MICHIGAN TALENT INVESTMENT AGENCY</b> for TANF funding to provide job readiness and welfare-to-work programming. TANF funding provided to the <del>Michigan strategic fund</del> <b>MICHIGAN TALENT INVESTMENT AGENCY</b> in the current fiscal year is contingent on compliance with the data and reporting requirements described in this section. The interagency agreement must require the <del>Michigan strategic fund</del> <b>MICHIGAN TALENT INVESTMENT AGENCY</b> to provide all of the following items by January 1 of the current fiscal year for the previous <b>FISCAL</b> year to the senate and house appropriations committees <b>AND THE STATE BUDGET OFFICE:</b></p> <p>(a) through (b) - No changes from current law.</p>	

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Child Welfare Contract Change Notification</i></b></p> <p><b>Sec. 240.</b> The department shall notify the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices of any changes to a child welfare master contract template, including the adoption master contract template, the independent living plus master contract template, the placing agency foster care master contract template, and the residential foster care juvenile justice master contract template, not less than 30 days before the change takes effect.</p>	Delete current law.		<p><b>Sec. 240.</b> No changes from current law.</p>
<p><b><i>Appropriations for Healthy Michigan Plan</i></b></p> <p><b>Sec. 252.</b> The appropriations in part 1 for Healthy Michigan plan - behavioral health, Healthy Michigan plan administration, and Healthy Michigan plan are contingent on the provisions of the social welfare act, 1939 PA 280, MCL 400.1 to 400.119b, that were contained in 2013 PA 107 not being amended, repealed, or otherwise altered to eliminate the Healthy Michigan plan. If that occurs, then, upon the effective date of the amendatory act that amends, repeals, or otherwise alters those provisions, the remaining funds in the Healthy Michigan plan - behavioral health, Healthy Michigan plan administration, and Healthy Michigan plan line items shall only be used to pay previously incurred costs and any remaining appropriations shall not be allotted to support those line items.</p>	Delete current law.		<p><b>Sec. 252.</b> No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Communications with Legislature Regarding Medicaid Waivers</b></p> <p><b>Sec. 263.</b> (1) Upon submission of a Medicaid waiver, a Medicaid state plan amendment, or a similar proposal to the Centers for Medicare and Medicaid Services, the department shall notify the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office of the submission.</p>	<p><b>Sec. 263.</b> (1) No changes from current law.</p>		<p><b>Sec. 263.</b> (1) Upon <del>submission</del> <b>BEFORE</b> submission of a Medicaid waiver, a Medicaid state plan amendment, or a similar proposal to the Centers for Medicare and Medicaid Services <b>OR OTHER FEDERAL AGENCY</b>, the department shall <del>notify</del> <b>PROVIDE WRITTEN NOTIFICATION TO</b> the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies <b>AND POLICY OFFICES</b>, and the state budget office of the <b>PLANNED</b> submission.</p>
<p>(2) The department shall provide written or verbal biannual reports to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office summarizing the status of any new or ongoing discussions with the Centers for Medicare and Medicaid Services or the United States Department of Health and Human Services regarding potential or future Medicaid waiver applications.</p>	<p>(2) No changes from current law.</p>		<p>(2) The department shall provide written or <del>verbal</del> biannual reports to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office summarizing the status of any new or ongoing discussions with the Centers for Medicare and Medicaid Services or the United States Department of Health and Human Services <b>OR OTHER FEDERAL AGENCY</b> regarding potential or future Medicaid waiver applications, <b>AS WELL AS THE STATUS OF SUBMITTED WAIVERS THAT HAVE NOT YET RECEIVED FEDERAL APPROVAL. IF, AT THE TIME A BIENNIAL REPORT IS DUE, THERE ARE NO REPORTABLE ITEMS, THEN NO REPORT IS REQUIRED TO BE PROVIDED.</b></p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>(3) The department shall inform the senate and house appropriations subcommittees on the department budget and the senate and house fiscal agencies of any alterations or adjustments made to the published plan for integrated care for individuals who are eligible for both Medicare and Medicaid when the final version of the plan has been submitted to the federal Centers for Medicare and Medicaid Services or the United States Department of Health and Human Services.</p>	Delete current law.		Delete current law.
<p><b><i>DHHS Employee Communication with Legislature</i></b></p> <p><b>Sec. 264.</b> The department shall not take disciplinary action against an employee for communicating with a member of the legislature or his or her staff.</p>	Delete current law.		<b>Sec. 264.</b> No changes from current law.
<p><b><i>Report of State Restricted Funds</i></b></p> <p><b>Sec. 265.</b> Within 14 days after the release of the executive budget recommendation, the department shall cooperate with the state budget office to provide the senate and house appropriations chairs, the senate and house appropriations subcommittees chairs, and the senate and house fiscal agencies with an annual report on estimated state restricted fund balances, state restricted fund projected revenues, and state restricted fund expenditures for the fiscal years ending September 30, 2015 and September 30, 2016.</p>	<p><b>Sec. 265.</b> Within 14 days after the release of the executive budget recommendation, the department shall cooperate with the state budget office to provide the senate and house appropriations chairs, the senate and house appropriations subcommittees chairs, and the senate and house fiscal agencies with an annual report on estimated state restricted fund balances, state restricted fund projected revenues, and state restricted fund expenditures for the fiscal years ending September 30, <del>2015</del> <b>2016</b> and September 30, <del>2016</del> <b>2017</b>.</p>		<p><b>Sec. 265.</b> Within 14 days after the release of the executive budget recommendation, the department shall cooperate with the state budget office to provide the senate and house appropriations chairs, the senate and house appropriations subcommittees chairs <b>ON THE DEPARTMENT BUDGET</b>, and the senate and house fiscal agencies with an annual report on estimated state restricted fund balances, state restricted fund projected revenues, and state restricted fund expenditures for the <del>fiscal years ending September 30, 2015 and September 30, 2016</del> <b>PREVIOUS FISCAL YEAR AND THE CURRENT FISCAL YEAR.</b></p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Expenses Recovered from Legal Actions as Notified by Attorney General</i></b></p> <p><b>Sec. 270.</b> The department shall advise the legislature of the receipt of a notification from the attorney general's office of a legal action in which expenses had been recovered pursuant to section 106(4) of the social welfare act, 1939 PA 280, MCL 400.106, or any other statute under which the department has the right to recover expenses. By November 1 and May 1 of the current fiscal year, the department shall submit a written report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office which includes, at a minimum, all of the following:</p> <p>(a) The total amount recovered from the legal action.            (b) The program or service for which the money was originally expended.            (c) Details on the disposition of the funds recovered such as the appropriation or revenue account in which the money was deposited.            (d) A description of the facts involved in the legal action.</p>	<p><b>Sec. 270.</b> No changes from current law.</p>	<p><b>Sec. 270.</b> No changes from current law.</p>	<p><b>Sec. 270.</b> No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Capped Federal Funds Report</i></b></p> <p><b>Sec. 274.</b> (1) The department, in collaboration with the state budget office, shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices 1 week after the day the governor submits to the legislature the budget for the ensuing fiscal year a report on spending and revenue projections for each of the capped federal funds listed below. The report shall contain actual spending and revenue in the previous fiscal year, spending and revenue projections for the current fiscal year as enacted, and spending and revenue projections within the executive budget proposal for the fiscal year beginning October 1, 2016 for each individual line item for the department budget. The report shall also include federal funds transferred to other departments. The capped federal funds shall include, but not be limited to, all of the following:</p> <ul style="list-style-type: none"> <li>(a) TANF.</li> <li>(b) Title XX social services block grant.</li> <li>(c) Title IV-B part I child welfare services block grant.</li> <li>(d) Title IV-B part II promoting safe and stable families funds.</li> <li>(e) Low-income home energy assistance program.</li> </ul>	<p><b>Sec. 274.</b> (4) No changes from current law.</p>		<p><b>Sec. 274.</b> (1) <b>THE DEPARTMENT, IN COLLABORATION WITH THE STATE BUDGET OFFICE, SHALL NOT UTILIZE CAPPED FEDERAL FUNDING FOR ECONOMICS ADJUSTMENTS FOR FTES OR OTHER ECONOMICS COSTS THAT ARE INCLUDED AS PART OF THE BUDGET SUBMITTED TO THE LEGISLATURE BY THE GOVERNOR FOR THE ENSUING FISCAL YEAR.</b></p> <p>(2) The department, in collaboration with the state budget office, shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices 1 week after the day the governor submits to the legislature the budget for the ensuing fiscal year a report on spending and revenue projections for each of the capped federal funds listed below. The report shall contain actual spending and revenue in the previous fiscal year, spending and revenue projections for the current fiscal year as enacted, and spending and revenue projections within the executive budget proposal for the fiscal year beginning October 1, <del>2016</del> <b>2017</b> for each individual line item for the department budget. The report shall also include federal funds transferred to other departments. The capped federal funds shall include, but not be limited to, all of the following:</p> <ul style="list-style-type: none"> <li>(a) TANF.</li> <li>(b) Title XX social services block grant.</li> <li>(c) Title IV-B part I child welfare services block grant.</li> <li>(d) Title IV-B part II promoting safe and stable families funds.</li> <li>(e) Low-income home energy assistance program.</li> </ul>

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	EXECUTIVE	SENATE	HOUSE
<p>(2) By February 15 of the current fiscal year, the department shall prepare an annual report of its efforts to identify additional TANF maintenance of effort sources and rationale for any increases or decreases from all of the following, but not limited to:</p> <p>(a) Other departments.                      (b) Local units of government.                      (c) Private sources.</p>	Delete current law.		Delete current law.
<p><b><i>Legal Services of Attorney General</i></b></p> <p><b>Sec. 276.</b> Funds appropriated in part 1 shall not be used by a principal executive department, state agency, or authority to hire a person to provide legal services that are the responsibility of the attorney general. This prohibition does not apply to legal services for bonding activities and for those outside services that the attorney general authorizes.</p>	<b>Sec. 276.</b> No changes from current law.		<b>Sec. 276.</b> No changes from current law.
<p><b><i>Performance-Based Contracting</i></b></p> <p><b>Sec. 279.</b> (1) All master contracts relating to human services as funded by the appropriations in sections 103, 104, 105, 106, 107, 108, and 109 of part 1 shall be performance-based contracts that employ a client-centered results-oriented process that is based on measurable performance indicators and desired outcomes and includes the annual assessment of the quality of services provided.</p>	<b>Sec. 279.</b> (1) No changes from current law.		<b>Sec. 279.</b> (1) No changes from current law.
<p>(2) By February 1 of the current fiscal year, the department shall provide the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office a report detailing measurable performance indicators, desired outcomes, and an assessment of the quality of services provided by the department during the previous fiscal year.</p>	(2) No changes from current law.		(2) No changes from current law.

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	EXECUTIVE	SENATE	HOUSE
<p><b><i>Personnel-Related Costs Report</i></b></p> <p><b>Sec. 280.</b> By the fifth business day of each month, the department shall provide a report to the house and senate appropriations committees, the house and senate fiscal agencies, the house and senate policy offices, and the state budget director that provides all of the following for each line item in part 1 containing personnel-related costs, including the specific individual amounts for salaries and wages, payroll taxes, and fringe benefits:</p> <p>(a) FTE authorization.                      (b) Spending authorization for personnel-related costs, by fund source, under the spending plan.                      (c) Actual year-to-date expenditures for personnel-related costs, by fund source, through the end of the prior month.                      (d) The projected year-end balance or shortfall for personnel-related costs, by fund source, based on actual monthly spending levels through the end of the prior month.                      (e) A specific plan for addressing any projected shortfall for personnel-related costs at either the gross or fund source level.</p>	Delete current law.		<p><b>Sec. 280.</b> <del>By the fifth business day of each month</del> <b>ON A QUARTERLY BASIS</b>, the department shall provide a report to the house and senate appropriations committees, the house and senate fiscal agencies, the house and senate policy offices, and the state budget director that provides all of the following for each line item in part 1 containing personnel-related costs, including the specific individual amounts for salaries and wages, payroll taxes, and fringe benefits:</p> <p>(a through e - No changes to current law)</p>
<p><b><i>General Fund/General Purpose Appropriation Lapse Report</i></b></p> <p><b>Sec. 287.</b> Not later than November 30, the state budget office shall prepare and transmit a report that provides for estimates of the total general fund/general purpose appropriation lapses at the close of the prior fiscal year. This report shall summarize the projected year-end general fund/general purpose appropriation lapses by major departmental program or program areas. The report shall be transmitted to the chairpersons of the senate and house appropriations committees, and the senate and house fiscal agencies.</p>	<b>Sec. 287.</b> No changes from current law.		<b>Sec. 287.</b> No changes from current law.
<p><b><i>Services and Administrative Limitations for New Contracts</i></b></p> <p><b>Sec. 288.</b> (1) Beginning October 1 of the current fiscal year, no less than 90% of a new department contract supported solely from state restricted funds or general fund/general purpose funds and designated in this part or part 1 for a specific entity for the purpose of providing services to individuals shall be expended for such services after the first year of the contract.</p>	Delete current law.		Delete current law.

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(2) The department may allow a contract to exceed the limitation on administrative and services costs if it can be demonstrated that an exception should be made to the provision in subsection (1).	Delete current law.		Delete current law.
(3) By September 30 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, house and senate fiscal agencies, and state budget office on the rationale for all exceptions made to the provision in subsection (1) and the number of contracts terminated due to violations of subsection (1).	Delete current law.		Delete current law.
<b>Welfare Fraud Hotline</b>  <b>Sec. 290.</b> Any public advertisement for state assistance shall also inform the public of the welfare fraud hotline operated by the department.	Delete current law.		<b>Sec. 290.</b> Any public advertisement for state <b>FOOD</b> assistance shall also inform the public of the welfare fraud hotline operated by the department.
<b>E-Verify</b>  <b>Sec. 291.</b> (1) The department shall verify, using the e-verify system, that all new department employees, and new hire employees of contractors and subcontractors paid from funds appropriated in part 1, are legally present in the United States. The department may verify this information directly or may require contractors and subcontractors to verify the information and submit a certification to the department.	Delete current law.		<b>Sec 291.</b> (1) No changes from current law.
(2) By February 15 of the current fiscal year, the department shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices a report on the number of new department employees and new hire employees of contractors and subcontractors that were found to not be legally present in the United States.	Delete current law.		Delete current law.



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	EXECUTIVE	SENATE	HOUSE
<p><b><i>Accessible Website Data on Expenditures and Payments</i></b></p> <p><b>Sec. 292.</b> The department shall cooperate with the department of technology, management, and budget to maintain a searchable website accessible by the public at no cost that includes, but is not limited to, all of the following for each department or agency:</p> <p>(a) Fiscal year-to-date expenditures by category.            (b) Fiscal year-to-date expenditures by appropriation unit.            (c) Fiscal year-to-date payments to a selected vendor, including the vendor name, payment date, payment amount, and payment description.            (d) The number of active department employees by job classification.            (e) Job specifications and wage rates.</p>	<p><b>Sec. 292.</b> No changes from current law.</p>	<p><b>Sec. 292.</b> No changes from current law.</p>	<p><b>Sec. 292.</b> No changes from current law.</p>

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FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Michigan-Illinois Medicaid Information Systems Project</b></p> <p><b>Sec. 294.</b> From the funds appropriated in part 1 for the Michigan Medicaid information system line item, \$20,000,000.00 in private revenue will be allocated for the Michigan-Illinois alliance Medicaid management information systems project.</p>	<p><b>Sec. 294.</b> From the funds appropriated in part 1 for the Michigan Medicaid information system line item, \$20,000,000.00 in private revenue <del>will be allocated for the Michigan-Illinois alliance Medicaid management information systems project</del> <b>MAY BE RECEIVED FROM AND ALLOCATED FOR OTHER STATES INTERESTED IN PARTICIPATING AS PART OF THE BROADER MICHIGAN MEDICAID MMIS INITIATIVE.</b></p>		<p><b>Sec. 294.</b> From the funds appropriated in part 1 for the Michigan Medicaid information system (<b>MMIS</b>) line item, \$20,000,000.00 in private revenue <del>will be allocated for the Michigan-Illinois alliance Medicaid management information systems project</del> <b>MAY BE RECEIVED FROM AND ALLOCATED FOR OTHER STATES INTERESTED IN PARTICIPATING AS PART OF THE BROADER MMIS INITIATIVE. BY MARCH 1 OF THE CURRENT FISCAL YEAR, THE DEPARTMENT SHALL PROVIDE A REPORT ON THE USE OF MMIS BY OTHER STATES FOR THE PREVIOUS FISCAL YEAR, INCLUDING A LIST OF STATES, TYPE OF USE, AND REVENUE AND EXPENDITURES RELATED TO THE AGREEMENTS WITH THE OTHER STATES TO USE THE MMIS. THE REPORT SHALL BE PROVIDED TO THE HOUSE AND SENATE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET, THE HOUSE AND SENATE FISCAL AGENCIES AND THE STATE BUDGET OFFICE.</b></p>



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	<p><i>Moved from Sec. 695 and revised:</i></p> <p><b>SEC. 695 295.</b> (1) From the funds appropriated in part 1 for multicultural integration funding, <b>TO AGENCIES PROVIDING PHYSICAL AND BEHAVIORAL HEALTH SERVICES TO MULTICULTURAL POPULATIONS</b>, the department <del>may require each contractor to provide data and information on performance-related metrics</del> <b>SHALL COMPETITIVELY AWARD GRANTS IN ACCORDANCE WITH THE REQUIREMENTS OF SUBSECTION (2). THE STATE SHALL NOT BE LIABLE FOR ANY SPENDING ABOVE THE CONTRACT AMOUNT.</b></p>		<p><i>Moved from Sec. 695 and revised:</i></p> <p><b>SEC. 695 295.</b> (1) From the funds appropriated in part 1 for multicultural integration funding <b>AND FOR ANY OTHER APPROPRIATION LINE ITEM TO AGENCIES PROVIDING PHYSICAL SERVICES, BEHAVIORAL HEALTH SERVICES, OR SOCIAL SERVICES TO MULTICULTURAL POPULATIONS</b>, the department <del>may require each contractor to provide data and information on performance-related metrics</del> <b>SHALL COMPETITIVELY AWARD GRANTS IN ACCORDANCE WITH THE REQUIREMENTS OF SUBSECTION (2). THE STATE IS NOT LIABLE FOR ANY SPENDING ABOVE THE CONTRACT AMOUNT. COMMENCING WITH GRANTS TO BE DISTRIBUTED IN THE FISCAL YEAR BEGINNING OCTOBER 1, 2017, THE GRANTS SHALL BE AWARDED ON A COMPETITIVE BASIS.</b></p>
	<p><b>(2) THE DEPARTMENT SHALL REQUIRE EACH CONTRACTOR DESCRIBED IN SUBSECTION (1) THAT RECEIVES GREATER THAN \$1.0 MILLION IN STATE GRANT FUNDING TO COMPLY WITH PERFORMANCE RELATED METRICS TO MAINTAIN THEIR ELIGIBILITY FOR FUNDING. These THE ORGANIZATIONAL metrics may SHALL include, but are not BE limited to, all of the following:</b></p>		<p><b>(2) THE DEPARTMENT SHALL REQUIRE EACH CONTRACTOR DESCRIBED IN SUBSECTION (1) THAT RECEIVES GREATER THAN \$1,000,000.00 IN STATE GRANT FUNDING UNDER THIS SECTION TO COMPLY WITH PERFORMANCE-RELATED METRICS TO MAINTAIN THEIR ELIGIBILITY FOR FUNDING. These THE ORGANIZATIONAL metrics may SHALL include, but are not BE limited to, all of the following:</b></p>

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	<p><b>(A) EACH CONTRACTOR OR SUBCONTRACTOR SHALL HAVE ACCREDITATIONS THAT ATTEST TO THEIR COMPETENCY AND EFFECTIVENESS AS BEHAVIORAL HEALTH AND SOCIAL SERVICES AGENCIES.</b></p> <p><del>(aB)</del> Each contractor or subcontractor shall have a mission that is consistent with the purpose of the multicultural <del>integration funding</del> <b>AGENCY.</b></p> <p><del>(b C)</del> Each contractor shall validate that any subcontractors utilized within these appropriations share the same mission as the lead agency receiving funding.</p>		<p><b>(A) EACH CONTRACTOR OR SUBCONTRACTOR SHALL HAVE ACCREDITATIONS THAT ATTEST TO ITS COMPETENCY AND EFFECTIVENESS AS A <b>PHYSICAL HEALTH AGENCY</b>, BEHAVIORAL HEALTH <b>AGENCY</b>, SOCIAL SERVICES <b>AGENCY</b>, OR A COMBINATION OF <b>THESE AGENCIES TO THE SATISFACTION OF THE DEPARTMENT.</b></b></p> <p><del>(aB)</del> Each contractor or subcontractor shall have a mission that is consistent with the purpose of the multicultural <del>integration funding</del> <b>AGENCY.</b></p> <p><del>(b C)</del> Each contractor shall validate that any subcontractors utilized within these appropriations share the same mission as the lead agency receiving funding.</p>
	<p><del>(e D)</del> Each contractor or subcontractor shall demonstrate cost-effectiveness.</p> <p><del>(e E)</del> Each contractor or subcontractor shall ensure their ability to leverage private dollars to strengthen and maximize service provision.</p> <p><del>(e F)</del> Each contractor or subcontractor shall provide timely and accurate reports regarding the number of clients served, units of service provision, and ability to meet their stated goals.</p>		<p><del>(e D)</del> Each contractor or subcontractor shall demonstrate cost-effectiveness.</p> <p><del>(e E)</del> Each contractor or subcontractor shall ensure <del>their</del> ITS ability to leverage private dollars to strengthen and maximize service provision.</p> <p><del>(e F)</del> Each contractor or subcontractor shall provide timely and accurate reports regarding the number of clients served, units of service provision, and ability to meet <del>their</del> ITS stated goals.</p>

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	<p><del>(2 3)</del> The department shall require an annual report from the contractors that receive multicultural integration funding <b>DESCRIBED IN SUBSECTION (2)</b>. The annual report, due 60 days following the end of the contract period, shall include specific information on services and programs provided, the client base to which the services and programs were provided, information on any wraparound services provided, and the expenditures for those services. The department shall provide the annual reports to the senate and house appropriations subcommittees on <del>the department budget</del> <b>HEALTH AND HUMAN SERVICES</b>, the senate and house fiscal agencies, and the state budget office.</p>		<p><del>(2 3)</del> The department shall require an annual report from the contractors that receive multicultural integration funding <b>DESCRIBED IN SUBSECTION (2)</b>. The annual report, due 60 days following the end of the contract period, shall include specific information on services and programs provided, the client base to which the services and programs were provided, information on any wraparound services provided, and the expenditures for <del>these</del> <b>ALL</b> services. The department shall provide the annual reports to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office.</p>
	<p><del>(3)</del> The department shall convene a workgroup to discuss and make recommendations on including accreditation in the contractor specifications and potentially moving toward competitive bidding. Each contractor required to provide data per this section shall be invited to participate in the workgroup if so convened.</p>		<p><del>(3)</del> The department shall convene a workgroup to discuss and make recommendations on including accreditation in the contractor specifications and potentially moving toward competitive bidding. Each contractor required to provide data per this section shall be invited to participate in the workgroup if so convened.</p>
			<p><i>Moved from Sec. 298. No changes from current law.</i></p> <p><b>Sec. 298- 296.</b> By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices an annual report on the supervisor-to-staff ratio by department divisions and subdivisions.</p>

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	EXECUTIVE	SENATE	HOUSE
<p><b>Legacy Costs</b></p> <p><b>Sec. 297.</b> Total authorized appropriations from all sources under part 1 for legacy costs for the fiscal year ending September 30, 2016 are \$359,044,100.00. From this amount, total agency appropriations for pension-related legacy costs are estimated at \$203,794,100.00. Total agency appropriations for retiree health care legacy costs are estimated at \$155,250,000.00.</p>	<p><b>Sec. 297.</b> Total authorized appropriations from all sources under part 1 for legacy costs for the fiscal year ending September 30, <del>2016</del> <b>2017</b> are <del>\$359,044,100.00</del> <b>\$364,972,800.00</b>. From this amount, total agency appropriations for pension-related legacy costs are estimated at <del>\$203,794,100.00</del> <b>\$202,368,400.00</b>. Total agency appropriations for retiree health care legacy costs are estimated at <del>\$155,250,000.00</del> <b>\$162,604,400.00</b>.</p>		<p><b>Sec. 297.</b> Total authorized appropriations from all sources under part 1 for legacy costs for the <b>CURRENT</b> fiscal year ending <del>September 30, 2016</del> are <del>\$359,044,100.00</del> <b>\$364,972,800.00</b>. From this amount, total agency appropriations for pension-related legacy costs are estimated at <del>\$203,794,100.00</del> <b>\$202,368,400.00</b>. Total agency appropriations for retiree health care legacy costs are estimated at <del>\$155,250,000.00</del> <b>\$162,604,400.00</b>.</p>
<p><b>Supervisor-to-Staff Ratio Report.</b></p> <p><b>Sec. 298.</b> By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices an annual report on the supervisor-to-staff ratio by department divisions and subdivisions.</p>	<p>Delete current law.</p>		<p><i>Retained and moved to <b>Sec. 296.</b></i></p>

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	EXECUTIVE	SENATE	HOUSE
	<p><b>NEW</b></p> <p><b>SEC. 298. (1) THE DEPARTMENT SHALL TRANSFER THE SERVICE FUNDS APPROPRIATED IN PART 1 CURRENTLY PROVIDED TO PIHPS THROUGH THE MEDICAID MENTAL HEALTH SERVICES, MEDICAID SUBSTANCE USE DISORDER SERVICES, HEALTHY MICHIGAN PLAN – BEHAVIORAL HEALTH AND AUTISM SERVICES LINES TO THE HEALTH PLAN SERVICES LINE BY SEPTEMBER 30, 2017. TO IMPLEMENT THIS CHANGE THE DEPARTMENT SHALL:</b></p>		<p><b>NEW</b> <i>(Different from Exec)</i></p> <p><b>SEC. 298. (1) THE DEPARTMENT SHALL WORK WITH A WORKGROUP TO MAKE RECOMMENDATIONS REGARDING THE MOST EFFECTIVE FINANCING MODEL AND POLICIES FOR BEHAVIORAL HEALTH SERVICES IN ORDER TO IMPROVE THE COORDINATION OF BEHAVIORAL AND PHYSICAL HEALTH SERVICES FOR INDIVIDUALS WITH MENTAL ILLNESSES, INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, AND SUBSTANCE USE DISORDERS. THE WORKGROUP SHALL INCLUDE, BUT NOT BE LIMITED TO, THE MICHIGAN ASSOCIATION OF COMMUNITY MENTAL HEALTH BOARDS, THE MICHIGAN ASSOCIATION OF HEALTH PLANS, AND ADVOCATES FOR CONSUMERS OF BEHAVIORAL HEALTH SERVICES.</b></p>
	<p><b>(A) AMEND THE CONTRACTS FOR THE MEDICAID HEALTH PLANS TO INCLUDE RESPONSIBILITY FOR COVERING THE FULL ARRAY OF SPECIALTY SERVICES AND SUPPORTS FOR ELIGIBLE MEDICAID BENEFICIARIES WITH A SERIOUS MENTAL ILLNESS, DEVELOPMENTAL DISABILITY, SERIOUS EMOTIONAL DISTURBANCE, OR SUBSTANCE USE DISORDER UPON COMPLETION OF A PLAN TO INTEGRATE THESE SPECIALTY SERVICES AND SUPPORTS INTO THE COMPREHENSIVE HEALTH PLAN CONTRACT.</b></p>		<p><b>(2) THE WORKGROUP SHALL CONSIDER THE FOLLOWING GOALS IN MAKING ITS RECOMMENDATIONS:</b></p> <p><b>(A) CORE PRINCIPLES OF PERSON-CENTERED PLANNING, SELF-DETERMINATION, AND RECOVERY ORIENTATION.</b></p> <p><b>(B) AVOIDING THE RETURN TO A MEDICAL AND INSTITUTIONAL MODEL OF SUPPORTS AND SERVICES FOR INDIVIDUALS WITH BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITY NEEDS.</b></p> <p><b>(C) COORDINATION OF PHYSICAL HEALTH AND BEHAVIORAL HEALTH CARE AND SERVICES AT THE POINT AT WHICH THE CONSUMER RECEIVES THAT CARE AND THOSE SERVICES.</b></p>

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	<p>(B) ENGAGE EXTERNAL STAKEHOLDERS IN THE DEVELOPMENT OF THE INTEGRATION PLAN. THIS PROCESS SHALL INCLUDE, BUT NOT BE LIMITED TO THE MICHIGAN ASSOCIATION OF COMMUNITY MENTAL HEALTH BOARDS, THE MICHIGAN ASSOCIATION OF HEALTH PLANS AND ADVOCATES FOR CONSUMERS OF BEHAVIORAL HEALTH SERVICES.</p>		<p>(3) THE WORKGROUP'S RECOMMENDATIONS SHALL INCLUDE A DETAILED PLAN FOR THE TRANSITION TO ANY NEW FINANCING MODEL OR POLICIES RECOMMENDED BY THE WORKGROUP, INCLUDING A PLAN TO ENSURE CONTINUITY OF CARE FOR CONSUMERS OF BEHAVIORAL HEALTH SERVICES IN ORDER TO PREVENT CURRENT CUSTOMERS OF BEHAVIORAL HEALTH SERVICES FROM EXPERIENCING A DISRUPTION OF SERVICES AND SUPPORTS. THE WORKGROUP SHALL CONSIDER THE USE OF 1 OR MORE PILOT PROGRAMS IN AREAS WITH AN APPROPRIATE NUMBER OF CONSUMERS OF BEHAVIORAL HEALTH SERVICES AND A RANGE OF BEHAVIORAL HEALTH NEEDS AS PART OF THAT TRANSITION PLAN.</p>

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	<p>(C) CONTRACT WITH AN ADMINISTRATIVE SERVICE ORGANIZATION TO PROVIDE OVERSIGHT OF THE MEDICAID HEALTH PLANS AND THE CMHSPS AND ENSURE CONTINUITY OF CARE FOR THE SERVED POPULATIONS. THIS ORGANIZATION WOULD BE RESPONSIBLE FOR, AT A MINIMUM, CONDUCTING ANALYTICS ON CLAIMS FROM THE MEDICAID HEALTH PLANS AND CMHSPS, REDUCING DUPLICATIVE ADMINISTRATIVE FUNCTIONS AT THE CMHSP AND THE SERVICE DELIVERY LEVEL, AND ADVISING STATE ON PERFORMANCE OUTLIERS AND POPULATION HEALTH STATUS. THE DEPARTMENT MAY ISSUE A REQUEST FOR INFORMATION TO IDENTIFY POTENTIAL ADMINISTRATIVE SERVICE ORGANIZATIONS. THE DEPARTMENT IS AUTHORIZED TO CONDUCT A COMPETITIVE DIRECT SOLICITATION TO PROCURE SERVICES IN ACCORDANCE WITH STATE PROCUREMENT POLICY.</p>		<p>(4) THE DEPARTMENT SHALL PROVIDE, AFTER EACH WORKGROUP MEETING, A STATUS UPDATE ON THE WORKGROUP'S PROGRESS AND, BY DECEMBER 1 OF THE CURRENT FISCAL YEAR, A FINAL REPORT ON THE WORKGROUP'S RECOMMENDATIONS TO THE SENATE AND HOUSE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET, THE SENATE AND HOUSE FISCAL AGENCIES, AND THE STATE BUDGET OFFICE.</p>

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	<p>(2) THE CONTRACT AMENDMENT DESCRIBED IN (1) SHALL REQUIRE MEDICAID HEALTH PLANS TO CONTRACT WITH THE EXISTING CMHSPPS FOR THE PROVISION OF SPECIALTY SERVICES AND SUPPORTS.</p>		<p>(5) NO FUNDING THAT HAS BEEN PAID TO THE PREPAID INPATIENT HEALTH PLANS IN PRIOR FISCAL YEARS FROM THE MEDICAID MENTAL HEALTH SERVICES, MEDICAID SUBSTANCE USE DISORDER SERVICES, HEALTHY MICHIGAN PLAN – BEHAVIORAL HEALTH, OR AUTISM SERVICES APPROPRIATION LINE ITEMS SHALL BE TRANSFERRED OR PAID TO ANY OTHER ENTITY WITHOUT SPECIFIC LEGISLATIVE AUTHORIZATION THROUGH ENACTMENT OF A BUDGET ACT CONTAINING APPROPRIATION LINE ITEM CHANGES OR AUTHORIZING BOILERPLATE LANGUAGE.</p>
	<p>(3) SIXTY DAYS PRIOR TO COMPLETING THE CONTRACT AMENDMENT DETAILED IN (1), THE DEPARTMENT SHALL PROVIDE A REPORT DESCRIBING THE INTEGRATION PLAN TO THE STATE BUDGET OFFICE, SENATE AND HOUSE APPROPRIATIONS COMMITTEES AND SENATE AND HOUSE FISCAL AGENCIES. THIS REPORT SHALL, AT MINIMUM, DETAIL THE FOLLOWING:</p> <p>(A) AN ASSUMED TIMELINE FOR COMPLETION OF THE INTEGRATION OF BEHAVIORAL HEALTH SERVICES INTO MEDICAID HEALTH PLAN CONTRACTS.</p>		<p>House does not include new Executive language.</p>



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FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
	<p>(B) INFORMATION ON THE ASSUMED CHANGE IN RATES THAT WILL BE PROVIDED TO MEDICAID HEALTH PLANS AS A RESULT OF THE INTEGRATION OF BEHAVIORAL HEALTH SERVICES INTO THE MEDICAID HEALTH PLAN CONTRACTS.</p> <p>(C) INFORMATION ON THE PROJECTED FISCAL IMPACT OF THIS CHANGE INCLUDING ANY ADMINISTRATIVE SAVINGS THAT MAY BE GENERATED THROUGH THE INTEGRATION OF BEHAVIORAL HEALTH SERVICES INTO THE MEDICAID HEALTH PLAN CONTRACTS.</p>		House does not include new Executive language.
	<p>(D) A DETAILED PLAN DESCRIBING STEPS THAT WILL BE TAKEN TO ENSURE THAT CURRENT CONSUMERS OF BEHAVIORAL HEALTH SERVICE CURRENTLY FUNDED THROUGH PIHPS WILL NOT EXPERIENCE ANY DISRUPTION TO THEIR SERVICES AND SUPPORTS.</p> <p>(E) A DETAILED PLAN DESCRIBING HOW THE DEPARTMENT SHALL ENSURE THE READINESS OF MEDICAID HEALTH PLANS TO TAKE RESPONSIBILITY FOR SERVICES PREVIOUSLY FUNDED THROUGH PIHPS.</p>		House does not include new Executive language.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Request for Proposal for Contract</i></b></p> <p><b>Sec. 299.</b> No state department or agency shall issue a request for proposal (RFP) for a contract in excess of \$5,000,000.00, unless the department or agency has first considered issuing a request for information (RFI) or a request for qualification (RFQ) relative to that contract to better enable the department or agency to learn more about the market for the products or services that are the subject of the RFP. The department or agency shall notify the department of technology, management, and budget of the evaluation process used to determine if an RFI or RFQ was not necessary prior to issuing the RFP.</p>	Delete current law.		<b>Sec. 299.</b> No changes from current law.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for Departmentwide Administration

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><u>DEPARTMENTWIDE ADMINISTRATION</u></b></p> <p><b><i>2-1-1 Statewide Call System</i></b></p> <p><b>Sec. 307.</b> (1) From the funds appropriated in part 1 for demonstration projects, \$500,000.00 shall be distributed as provided in subsection (2). The amount distributed under this subsection shall not exceed 50% of the total operating expenses of the program described in subsection (2), with the remaining 50% paid by local United Way organizations and other nonprofit organizations and foundations.</p>	<p><b>Sec. 307.</b> (1) No changes from current law.</p>		<p><b>Sec. 307.</b> (1) From the funds appropriated in part 1 for demonstration projects, <del>\$500,000.00</del> <b>\$950,000.00</b> shall be distributed as provided in subsection (2). The amount distributed under this subsection shall not exceed 50% of the total operating expenses of the program described in subsection (2), with the remaining 50% paid by local United Way organizations and other nonprofit organizations and foundations.</p>
<p>(2) Funds distributed under subsection (1) shall be distributed to Michigan 2-1-1, a nonprofit corporation organized under the laws of this state that is exempt from federal income tax under section 501(c)(3) of the internal revenue code, 26 USC 501(c)(3), and whose mission is to coordinate and support a statewide 2-1-1 system. Michigan 2-1-1 shall use the funds only to fulfill the Michigan 2-1-1 business plan adopted by Michigan 2-1-1 in January 2005.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p>(3) Michigan 2-1-1 shall refer to the department any calls received reporting fraud, waste, or abuse of state-administered public assistance.</p>	<p>(3) No changes from current law.</p>		<p>(3) No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for Departmentwide Administration

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>(4) Michigan 2-1-1 shall report annually to the department and the house and senate standing committees with primary jurisdiction over matters relating to human services and telecommunications on 2-1-1 system performance, including, but not limited to, call volume by health and human service needs and unmet needs identified through caller data and customer satisfaction metrics.</p>	<p>(4) No changes from current law.</p>		<p>(4) Michigan 2-1-1 shall report annually to the department, <del>and</del> the house and senate standing committees with primary jurisdiction over matters relating to human services and telecommunications, <b>THE HOUSE AND SENATE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET, AND THE HOUSE AND SENATE FISCAL AGENCIES</b>, on 2-1-1 system performance, including, but not limited to, call volume by health and human service needs and unmet needs identified through caller data and customer satisfaction metrics.</p>
<p><b><i>Mentoring for At-Risk Children</i></b></p> <p><b>Sec. 310.</b> It is the intent of the legislature that the department shall work with youth-oriented nonprofit organizations to provide mentoring programming for children of incarcerated parents and other at-risk children.</p>	<p>Delete current law.</p>		<p><b>Sec. 310.</b> No changes from current law.</p>
<p><b><i>Adult Assisted Living Services Work Group</i></b></p> <p><b>Sec. 315.</b> (1) The department, in conjunction with organizations representing disabled and elderly adults, representatives of assisted living facilities, and the legislature, shall conduct a workgroup that explores licensing standards and practices and performance measures for facilities providing adult assisted living services in order to ensure safe, adequately supervised, and protective environments for those individuals and families seeking assisted living services.</p>	<p>Delete current law.</p>		<p>Delete current law.</p>
<p>(2) By November 1, 2015, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report on the findings of the workgroup that is described in subsection (1).</p>	<p>Delete current law.</p>		<p>Delete current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for Departmentwide Administration

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Terminal Leave Payouts</i></b></p> <p><b>Sec. 316.</b> From the funds appropriated in part 1 for terminal leave payouts and other employee costs, the department shall not spend in excess of its annual gross appropriation unless it identifies and requests a legislative transfer from another budgetary line item supporting administrative costs, as provided by section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.</p>	<p><b>Sec. 316.</b> No changes from current law.</p>		<p><b>Sec. 316.</b> No changes from current law.</p>
<p><b><i>Rent and Operational Expense Limit for Court Street Premises</i></b></p> <p><b>Sec. 320.</b> Effective October 1, 2015, the department shall not expend funds appropriated in part 1 for rental payments or operational expenses for state lease number 2719 for the premises located at 103 Court Street in Munising, Michigan.</p>	<p>Delete current law.</p>		<p><b>Sec. 320.</b> No changes from current law.</p>
<p><b><i>Rent and Operational Expense Limit for South Saginaw Street Premises</i></b></p> <p><b>Sec. 321.</b> Effective October 1, 2015, the department shall not expend funds appropriated in part 1 for rental payments or operational expenses for state lease number 7692 for the premises located at 660 South Saginaw in Flint, Michigan</p>	<p>Delete current law.</p>		<p>Delete current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD SUPPORT ENFORCEMENT

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><u>CHILD SUPPORT ENFORCEMENT</u></b></p> <p><i>Child Support Incentive Payments and Enforcement System Requirements</i></p> <p><b>Sec. 401.</b> (1) The appropriations in part 1 assume a total federal child support incentive payment of \$26,500,000.00.</p>	<p><b>Sec. 8-401.</b> No changes from current law.</p>		<p><b>Sec. 401.</b> No changes from current law.</p>
<p>(2) From the federal money received for child support incentive payments, \$12,000,000.00 shall be retained by the state and expended for child support program expenses.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p>(3) From the federal money received for child support incentive payments, \$14,500,000.00 shall be paid to the counties based on each county's performance level for each of the federal performance measures as established in 45 CFR 305.2.</p>	<p>(3) No changes from current law.</p>		<p>(3) No changes from current law.</p>
<p>(4) If the child support incentive payment to the state from the federal government is greater than \$26,500,000.00, then 100% of the excess shall be retained by the state and is appropriated until the total retained by the state reaches \$15,397,400.00.</p>	<p>(4) No changes from current law.</p>		<p>(4) No changes from current law.</p>
<p>(5) If the child support incentive payment to the state from the federal government is greater than the amount needed to satisfy the provisions identified in subsections (1), (2), (3), and (4), the additional funds shall be subject to appropriation by the legislature.</p>	<p>(5) No changes from current law.</p>		<p>(5) No changes from current law.</p>
<p>(6) If the child support incentive payment to the state from the federal government is less than \$26,500,000.00, then the state and county share shall each be reduced by 50% of the shortfall.</p>	<p>(6) No changes from current law.</p>		<p>(6) No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD SUPPORT ENFORCEMENT

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>County Incentive for Child Support Collections</i></b></p> <p><b>Sec. 409.</b> (1) If statewide retained child support collections exceed \$38,300,000.00, 75% of the amount in excess of \$38,300,000.00 is appropriated to legal support contracts. This excess appropriation may be distributed to eligible counties to supplement and not supplant county title IV-D funding.</p>	<p><b>Sec. 8-409.</b> No changes from current law.</p>		<p><b>Sec. 409.</b> No changes from current law.</p>
<p>(2) Each county whose retained child support collections in the current fiscal year exceed its fiscal year 2004-2005 retained child support collections, excluding tax offset and financial institution data match collections in both the current year and fiscal year 2004-2005, shall receive its proportional share of the 75% excess.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p><b><i>Escheated Child Support Collections Authorization Adjustment</i></b></p> <p><b>Sec. 410.</b> (1) If title IV-D-related child support collections are escheated, the state budget director is authorized to adjust the sources of financing for the funds appropriated in part 1 for legal support contracts to reduce federal authorization by 66% of the escheated amount and increase general fund/general purpose authorization by the same amount. This budget adjustment is required to offset the loss of federal revenue due to the escheated amount being counted as title IV-D program income in accordance with federal regulations at 45 CFR 304.50.</p>	<p><b>Sec. 8-410.</b> (1) No changes from current law.</p>		<p><b>Sec. 410.</b> (1) No changes from current law.</p>



**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CHILD SUPPORT ENFORCEMENT**

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
(2) The department shall notify the chairs of the house and senate appropriations subcommittees on the department budget and the house and senate fiscal agencies within 15 days of the authorization adjustment in subsection (1).	(2) No changes from current law.		(2) No changes from current law.





## DEPARTMENT OF HEALTH AND HUMAN SERVICES COMMUNITY SERVICES AND OUTREACH

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><u>COMMUNITY SERVICES AND OUTREACH</u></b></p> <p><b><i>School Success Partnership Program</i></b></p> <p><b>Sec. 450.</b> (1) From the funds appropriated in part 1 for school success partnership program, the department shall allocate \$450,000.00 by December 1 of the current fiscal year to support the Northeast Michigan Community Service Agency programming, which will take place in each county in the Governor's Prosperity Region 3. The department shall require the following performance objectives be measured and reported for the duration of the state funding for the school success partnership program:</p> <p>(a) Increasing school attendance and decreasing chronic absenteeism.</p> <p>(b) Increasing academic performance based on grades with emphasis on math and reading.</p> <p>(c) Identifying barriers to attendance and success and connecting families with resources to reduce these barriers.</p> <p>(d) Increasing parent involvement with the parent's child's school and community.</p>	<p><b>Sec. 8-450.</b> (1) No changes from current law.</p>		<p><b>Sec. 450.</b> (1) No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES COMMUNITY SERVICES AND OUTREACH

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p>(2) The Northeast Michigan Community Service Agency shall provide reports to the department on January 31 and June 30 of the current fiscal year on the number of children and families served and the services that were provided to families to meet the performance objectives identified in this section. The department shall distribute the reports within 1 week after receipt to the house and senate appropriations subcommittees on the department budget, house and senate fiscal agencies, and house and senate policy offices.</p>	<p>(2) Modifies the last sentence to read:  The department shall distribute the reports within 1 week after receipt to the house and senate appropriations subcommittees on the department budget, house and senate fiscal agencies, <del>and</del> house and senate policy offices- <b>AND THE STATE BUDGET OFFICE.</b></p>		<p>(2) Modifies the last sentence to read:  The department shall distribute the reports within 1 week after receipt to the house and senate appropriations subcommittees on the department budget, house and senate fiscal agencies, <del>and</del> house and senate policy offices-, <b>AND THE STATE BUDGET OFFICE.</b></p>
			<p><b>Sec. 4380. 451.</b> From the funds appropriated in part 1 for crime victim justice assistance grants, the department shall continue to support forensic nurse examiner programs to facilitate training for improved evidence collection for the prosecution of sexual assault. The funds shall be used for program coordination and training.</p> <p><i>(Language transferred from Crime Victims Service Commission unit.)</i></p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><u>CHILD WELFARE SERVICES</u></p> <p><i>Foster Care Time Limit Goals</i></p> <p><b>Sec. 501.</b> (1) A goal is established that not more than 27% of all children in foster care at any given time during the current fiscal year will have been in foster care for 24 months or more.</p>	<p><del>CHILD WELFARE SERVICES</del></p> <p>CHILDREN'S SERVICES AGENCY – CHILD WELFARE</p> <p><b>Sec. 8-501.</b> (4) No changes from current law.</p>		<p><del>CHILD WELFARE SERVICES</del></p> <p>CHILDREN'S SERVICES AGENCY – CHILD WELFARE</p> <p><b>Sec. 501.</b> (1) A goal is established that not more than <del>27%</del> 25% of all children in foster care at any given time during the current fiscal year will have been in foster care for 24 months or more.</p>
<p>(2) By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report describing the steps that will be taken to achieve the specific goal established in this section and on the percentage of children who currently are in foster care and who have been in foster care a total of 24 or more months.</p>	<p>Striking current law.</p>		<p>(2). No changes from current law.</p>
<p><i>Indian Tribal Government Foster Care Reimbursement</i></p> <p><b>Sec. 502.</b> From the funds appropriated in part 1 for foster care, the department shall provide 50% reimbursement to Indian tribal governments for foster care expenditures for children who are under the jurisdiction of Indian tribal courts and who are not otherwise eligible for federal foster care cost sharing.</p>	<p><b>Sec. 8-502.</b> No changes from current law.</p>		<p><b>Sec. 502.</b> No changes from current law.</p>



**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CHILD WELFARE SERVICES**

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Child Welfare Performance-Based Funding</i></b></p> <p><b>Sec. 503.</b> (1) In accordance with the final report of the Michigan child welfare performance-based funding task force issued in response to section 503 of article X of 2013 PA 59, the department shall continue to develop actuarially sound case rates for necessary out-of-home child welfare services that achieve permanency by the department and private child placing agencies in a prospective payment system under a performance-based funding model.</p>	<p><b>Sec. 8-503.</b> (1) No changes from current law.</p>		<p><b>Sec. 503.</b> (1) No changes from current law.</p>
<p>(2) The department shall continue to develop a prospective rate payment system for private agencies that includes funding for adoption incentive payments. The full cost prospective rate payment system will identify and cover contractual costs paid through the case rate developed by an independent actuary.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p>(3) By September 30, 2016, the department shall complete a full cost analysis of the performance-based funding model with respect to the current fiscal year, including relevant information on the actuarial rate-setting process, and provide a report on the analysis to the senate and house appropriations subcommittees on the department budget.</p>	<p>Striking current law.</p>		<p><b>(3) IF NOT PROVIDED IN THE PREVIOUS YEAR, <del>By</del> By September 30, 2016-2017, OF THE CURRENT FISCAL YEAR,</b> the department shall complete a full cost analysis of the performance-based funding model with respect to the current fiscal year, including relevant information on the actuarial rate-setting process, and provide a report on the analysis to the senate and house appropriations subcommittees on the department budget.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
(4) In accordance with the final report of the Michigan child welfare performance-based funding task force issued in response to section 503 of article X of 2013 PA 59, the department shall implement a 5-year independent, third-party evaluation of the performance-based funding model. The evaluator shall be selected through a competitive process by a rating committee that includes, but is not limited to, representatives from the department and private child placing agencies.	<del>(4)</del> (3) No changes from current law.		(4) No changes from current law.
(5) The department shall only phase the implementation of the performance-based funding model into additional counties where the department, private child welfare agencies, the county, and the court operating within that county have agreed to implement the performance-based funding model.	Striking current law.		(5) No changes from current law.
(6) The department, in conjunction with members from both the house of representatives and senate, private child placing agencies, the courts, and counties shall implement the recommendations that are described in the workgroup report that was provided in section 503 of article X of 2013 PA 59 to establish a performance-based funding for public and private child welfare services providers. The department shall provide a quarterly report on the status of the performance-based contracting model to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, and the senate and house fiscal agencies and policy offices.	<del>(6)</del> (4) The department, in conjunction with members from both the house of representatives and senate, private child placing agencies, the courts, and counties shall implement the recommendations that are described in the workgroup report that was provided in section 503 of article X of 2013 PA 59 to establish a performance-based funding for public and private child welfare services providers. The department shall provide a quarterly report on the status of the performance-based contracting model to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, and the senate and house fiscal agencies and policy offices, <b>AND THE STATE BUDGET OFFICE.</b>		(6) The department, in conjunction with members from both the house of representatives and senate, private child placing agencies, the courts, and counties shall implement the recommendations that are described in the workgroup report that was provided in section 503 of article X of 2013 PA 59 to establish a performance-based funding for public and private child welfare services providers. The department shall provide a quarterly report on the status of the performance-based contracting model to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, <del>and</del> the senate and house fiscal agencies and policy offices, <b>AND THE STATE BUDGET OFFICE.</b>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p>(7) From the funds appropriated in part 1 for the performance-based funding model pilot, the department may develop a master agreement with a consortium, recognized by the Internal Revenue Service as tax-exempt as defined under section 501(c)(3) of the internal revenue code of 1986, 26 USC 501, consisting of a network of affiliated child welfare service providers, to accept and comprehensively assess referred youth, assign cases to members of its continuum or leverage services from other entities, and make appropriate case management decisions during the duration of a case. The consortium shall operate an integrated continuum of care structure, with services provided by both private and public agencies, based on individual case needs. The consortium shall demonstrate significant organizational capacity and competencies, including experience with managing risk-based contracts, financial strength, experienced staff and leadership, and appropriate governance structure.</p>	<p>Striking current law.</p>		<p>(7) From the funds appropriated in part 1 for the performance-based funding model pilot, the department <b>SHALL CONTINUE TO WORK WITH THE WEST MICHIGAN PARTNERSHIP FOR CHILDREN CONSORTIUM ON THE IMPLEMENTATION OF THE PERFORMANCE-BASED FUNDING MODEL PILOT. THE CONSORTIUM SHALL</b> <del>develop a master agreement with a consortium, recognized by the Internal Revenue Service as tax-exempt as defined under section 501(c)(3) of the internal revenue code of 1986, 26 USC 501, consisting of a network of affiliated child welfare service providers, to accept and comprehensively assess referred youth, assign cases to members of its continuum or leverage services from other entities, and make appropriate case management decisions during the duration of a case. The consortium shall operate an integrated continuum of care structure, with services provided by both private and public agencies, based on individual case needs. The consortium shall demonstrate significant</del> organizational capacity and competencies, including experience with managing risk-based contracts, financial strength, experienced staff and leadership, and appropriate governance structure.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Child Welfare Performance-Based One-Time Funding</i></b></p> <p><b>Sec. 504.</b> (1) From the funds appropriated in part 1 for performance-based funding implementation, the department shall provide \$500,000.00 in 1-time funding to support a portion of the first-year start-up costs to operate a consortium in Kent County for a performance-based child welfare contracting pilot program. Allowable start-up costs include \$300,000.00 for administration, facilities, initial salaries, and wages and \$200,000.00 for information technology infrastructure.</p>	<p>Striking current law.</p>		<p>Striking current law.</p>
<p>(2) The department may establish a master agreement with a consortium. The consortium must be recognized by this state as a nonprofit organization and must have submitted an application to the Internal Revenue Service for 501(c)(3) status. The consortium shall consist of a network of affiliated child welfare service providers that will accept and comprehensively assess referred youth, assign cases to members of its continuum or leverage services from other entities, and make appropriate case management decisions during the duration of a case.</p>	<p><del>(2)</del> <b>Sec. 8-504. (1)</b> The department may establish a master agreement with a consortium <b>IN KENT COUNTY FOR A PERFORMANCE-BASED CHILD WELFARE CONTRACTING PILOT PROGRAM.</b> The consortium must be recognized by this state as a nonprofit organization and must have submitted an application to the Internal Revenue Service for 501(c)(3) status. The consortium shall consist of a network of affiliated child welfare service providers that will accept and comprehensively assess referred youth, assign cases to members of its continuum or leverage services from other entities, and make appropriate case management decisions during the duration of a case.</p>		<p><del>(2)</del> <b>Sec. 504. (1)</b> The department may establish a master agreement with a consortium <b>IN KENT COUNTY FOR A PERFORMANCE-BASED CHILD WELFARE CONTRACTING PILOT PROGRAM.</b> The consortium must be recognized by this state as a nonprofit organization and must have submitted an application to the Internal Revenue Service for 501(c)(3) status. The consortium shall consist of a network of affiliated child welfare service providers that will accept and comprehensively assess referred youth, assign cases to members of its continuum or leverage services from other entities, and make appropriate case management decisions during the duration of a case.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
(3) The consortium shall operate an integrated continuum of care structure, with services provided by private or public agencies, based on individual case needs. The consortium shall demonstrate significant organizational capacity and competencies, including financial strength, experienced staff and leadership, and appropriate governance structure.	<del>{3}</del> (2) The consortium shall operate an integrated continuum of care structure, with services provided by private or public agencies, based on individual case needs. The consortium shall demonstrate significant organizational capacity and competencies, including financial strength, experienced staff and leadership, and appropriate governance structure.		<del>{3}</del> (2) The consortium shall operate an integrated continuum of care structure, with services provided by private or public agencies, based on individual case needs. The consortium shall demonstrate significant organizational capacity and competencies, including financial strength, experienced staff and leadership, and appropriate governance structure.
(4) By March 1 of the current fiscal year, the consortium shall provide to the department and the house and senate appropriations subcommittees on the department budget a report on the status of the implementation of the consortium, including, but not limited to, actual expenditures.	<del>{4}</del> (3) By March 1 of the current fiscal year, the consortium shall provide to the department, <del>and</del> the house and senate appropriations subcommittees on the department budget, <b>AND THE STATE BUDGET OFFICE</b> , a report on the status of the implementation of the consortium, including, but not limited to, actual expenditures.		<del>{4}</del> (3) By March 1 of the current fiscal year, the consortium shall provide to the department, <del>and</del> the house and senate appropriations subcommittees on the department budget, <b>THE SENATE AND HOUSE FISCAL AGENCIES, AND THE STATE BUDGET OFFICE</b> a report on the status of the implementation of the consortium, including, but not limited to, actual expenditures.
<p><b>DHHS and Wayne County Juvenile Justice Report</b></p> <p><b>Sec. 505.</b> By March 1 of the current fiscal year, the department and Wayne County shall provide to the senate and house appropriations committees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office a report for youth served in the previous fiscal year and in the first quarter of the current fiscal year outlining the number of youth served within each juvenile justice system, the type of setting for each youth, performance outcomes, and financial costs or savings.</p>	<p><b>Sec. 8-505.</b> No changes from current law.</p>		<p><b>Sec. 505.</b> By March 1 of the current fiscal year, the department and Wayne County shall provide to the senate and house appropriations <del>committees</del> <b>SUBCOMMITTEES</b> on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office a report for youth served in the previous fiscal year and in the first quarter of the current fiscal year outlining the number of youth served within each juvenile justice system, the type of setting for each youth, performance outcomes, and financial costs or savings.</p>





## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b>Foster Care Private Collections.</b></p> <p><b>Sec. 507.</b> The department's ability to satisfy appropriation deducts in part 1 for foster care private collections shall not be limited to collections and accruals pertaining to services provided only in the current fiscal year but may include revenues collected during the current fiscal year for services provided in prior fiscal years.</p>	<p><b>Sec. 8-507.</b> No changes from current law.</p>		<p><b>Sec. 507.</b> No changes from current law.</p>
<p><b>Children Trust Fund (CTF) Revenues and Joint Projects</b></p> <p><b>Sec. 508. (1)</b> In addition to the amount appropriated in part 1 for children's trust fund grants, money granted or money received as gifts or donations to the children's trust fund created by 1982 PA 249, MCL 21.171 to 21.172, is appropriated for expenditure.</p>	<p><b>Sec. 8-508. (1)</b> No changes from current law.</p>		<p><b>Sec. 508. (1)</b> No changes from current law.</p>
<p>(2) The department and the child abuse neglect and prevention board shall collaborate to ensure that administrative delays are avoided and the local grant recipients and direct service providers receive money in an expeditious manner. The department and board shall make available the children's trust fund contract funds to grantees within 31 days of the start date of the funded project.</p>	<p>(2) No changes from current law.</p>		<p>(2) The department and the child abuse <b>AND</b> neglect <del>and</del> prevention board shall collaborate to ensure that administrative delays are avoided and the local grant recipients and direct service providers receive money in an expeditious manner. The department and board shall make available the children's trust fund contract funds to grantees within 31 days of the start date of the funded project.</p>



**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CHILD WELFARE SERVICES**

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Physical and Mental Health Assessment Report</i></b></p> <p><b>Sec. 511.</b> The department shall provide quarterly reports to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, and the senate and house fiscal agencies and policy offices on the number and percentage of children who received timely health examinations after entry into foster care and the number and percentage of children entering foster care who received a required mental health examination after entry into foster care.</p>	<p>Striking current law.</p>		<p><b>Sec. 511.</b> The department shall provide <del>quarterly</del> <b>SEMI-ANNUAL</b> reports to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, and the senate and house fiscal agencies and policy offices on the number and percentage of children who received timely health examinations after entry into foster care and the number and percentage of children entering foster care who received a required mental health examination after entry into foster care.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Child Placements in Out-of-State Facilities</i></b></p> <p><b>Sec. 513.</b> (1) The department shall not expend funds appropriated in part 1 to pay for the direct placement by the department of a child in an out-of-state facility unless all of the following conditions are met:</p> <p>(a) There is no appropriate placement available in this state as determined by the department interstate compact office.</p> <p>(b) An out-of-state placement exists that is nearer to the child's home than the closest appropriate in-state placement as determined by the department interstate compact office.</p> <p>(c) The out-of-state facility meets all of the licensing standards of this state for a comparable facility.</p> <p>(d) The out-of-state facility meets all of the applicable licensing standards of the state in which it is located.</p> <p>(e) The department has done an on-site visit to the out-of-state facility, reviewed the facility records, reviewed licensing records and reports on the facility, and believes that the facility is an appropriate placement for the child.</p>	<p><b>Sec. 8-513. (1)</b> No changes from current law.</p>		<p><b>Sec. 513. (1)</b> No changes from current law.</p>
<p>(2) The department shall not expend money for a child placed in an out-of-state facility without approval of the deputy director for children's services. The department shall notify the appropriate state agency in that state including the name of the out-of-state provider who accepted the placement.</p>	<p>Striking current law.</p>		<p>(2) The department shall not expend money for a child placed in an out-of-state facility without approval of the deputy director for children's services. <del>The department shall notify the appropriate state agency in that state including the name of the out-of-state provider who accepted the placement.</del></p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
(3) The department shall submit an annual report to the state court administrative office, the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices on the number of Michigan children residing in out-of-state facilities at the time of the report, the total cost and average per diem cost of these out-of-state placements to this state, and a list of each such placement arranged by the Michigan county of residence for each child.	<del>(3)</del> (2) The department shall submit an annual report to the state court administrative office, the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, <del>and</del> the house and senate policy offices, <b>AND THE STATE BUDGET OFFICE</b> on the number of Michigan children residing in out-of-state facilities at the time of the report, the total cost and average per diem cost of these out-of-state placements to this state, and a list of each such placement arranged by the Michigan county of residence for each child.		(3) The department shall submit an annual report to the state court administrative office, the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, <del>and</del> the house and senate policy offices, <b>AND THE STATE BUDGET OFFICE</b> on the number of Michigan children residing in out-of-state facilities at the time of the report, the total cost and average per diem cost of these out-of-state placements to this state, and a list of each such placement arranged by the Michigan county of residence for each child.
(4) The department shall submit an annual report by February 15 of the current fiscal year on per diem costs of each residential care provider that has an established state rate and is located or doing business in this state.	Striking current law.		Striking current law.
(5) It is the intent of the legislature that the department shall work in conjunction with the courts and the state court administrative office to identify data needed to calculate statewide recidivism rates for adjudicated youth placed in either residential secure or nonsecure facilities, defined at 6 months after a youth is released from placement.	Striking current law.		<del>(5)</del> (4) No changes from current law.
(6) By March 1 of the current fiscal year, the department shall notify the legislature on the status of efforts to accomplish the intent of subsection (5).	Striking current law.		<del>(6)</del> (5) By March 1 of the current fiscal year, the department shall notify the legislature on the status of efforts to accomplish the intent of subsection <del>(5)</del> (4).



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b>Child Protective Services Report</b></p> <p><b>Sec. 514.</b> The department shall make a comprehensive report concerning children's protective services (CPS) to the legislature, including the senate and house policy offices and the state budget director, by January 1 of the current fiscal year, that shall include all of the following:</p> <p>(a) Statistical information including, at a minimum, all of the following:</p> <p>(i) The total number of reports of child abuse or neglect investigated under the child protection law, 1975 PA 238, MCL 722.621 to 722.638, and the number of cases classified under category I or category II and the number of cases classified under category III, category IV, or category V.</p> <p>(ii) Characteristics of perpetrators of child abuse or neglect and the child victims, such as age, relationship, race, and ethnicity and whether the perpetrator exposed the child victim to drug activity, including the manufacture of illicit drugs, that exposed the child victim to substance abuse, a drug house, or methamphetamine.</p> <p>(iii) The mandatory reporter category in which the individual who made the report fits, or other categorization if the individual is not within a group required to report under the child protection law, 1975 PA 238, MCL 722.621 to 722.638.</p> <p>(iv) The number of cases that resulted in the separation of the child from the parent or guardian and the period of time of that separation, up to and including termination of parental rights.</p>	<p>Striking current law.</p>		<p><b>Sec. 514.</b> The department shall make a comprehensive report concerning children's protective services (CPS) to the legislature, including the senate and house policy offices and the state budget director, by <del>January</del> <b>MARCH</b> 1 of the current fiscal year, that shall include all of the following:</p> <p>(a) Statistical information including, at a minimum, all of the following:</p> <p>(i) The total number of reports of child abuse or <b>CHILD</b> neglect investigated under the child protection law, 1975 PA 238, MCL 722.621 to 722.638, and the number of cases classified under category I or category II and the number of cases classified under category III, category IV, or category V.</p> <p>(ii) Characteristics of perpetrators of child abuse or <b>CHILD</b> neglect and the child victims, such as age, relationship, race, and ethnicity and whether the perpetrator exposed the child victim to drug activity, including the manufacture of illicit drugs, that exposed the child victim to substance abuse, a drug house, or methamphetamine.</p> <p>(iii) The mandatory reporter category in which the individual who made the report fits, or other categorization if the individual is not within a group required to report under the child protection law, 1975 PA 238, MCL 722.621 to 722.638.</p> <p>(iv) The number of cases that resulted in the separation of the child from the parent or guardian and the period of time of that separation, up to and including termination of parental rights.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p>(v) For the reported complaints of child abuse or neglect by teachers, school administrators, and school counselors, the number of cases classified under category I or category II and the number of cases classified under category III, category IV, or category V.</p> <p>(vi) For the reported complaints of child abuse or neglect by teachers, school administrators, and school counselors, the number of cases that resulted in separation of the child from the parent or guardian and the period of time of that separation, up to and including termination of parental rights.</p> <p>(b) New policies related to children's protective services including, but not limited to, major policy changes and court decisions affecting the children's protective services system during the immediately preceding 12-month period.</p> <p>(c) The information contained in the report required under section 8d(5) of the child protection law, 1975 PA 238, MCL 722.628d, on cases classified under category III.</p> <p>(d) The department policy, or changes to the department policy, regarding children who have been exposed to the production or manufacture of methamphetamines.</p>	<p>Striking current law.</p>		<p>(v) For the reported complaints of child abuse or <b>CHILD</b> neglect by teachers, school administrators, and school counselors, the number of cases classified under category I or category II and the number of cases classified under category III, category IV, or category V.</p> <p>(vi) For the reported complaints of child abuse or <b>CHILD</b> neglect by teachers, school administrators, and school counselors, the number of cases that resulted in separation of the child from the parent or guardian and the period of time of that separation, up to and including termination of parental rights.</p> <p>(b) New policies related to children's protective services including, but not limited to, major policy changes and court decisions affecting the children's protective services system during the immediately preceding 12-month period.</p> <p>(c) Statistical information regarding families that were classified in category III, including all of the following:</p> <p>(i) The total number of cases classified in category III.</p> <p>(ii) The number of cases in category III referred to voluntary community services and closed with no additional monitoring.</p> <p>(iii) The number of cases in category III referred to voluntary community services and monitored for up to 90 days.</p> <p>(iv) The number of cases in category III for which the department entered more than 1 determination that there was evidence of child abuse or child neglect.</p> <p>(v) The number of cases in category III that the department reclassified from category III to category II.</p> <p>(vi) The number of cases in category III that the department reclassified from</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
			category III to category I. (vii) The number of cases in category III that the department reclassified from category III to category I that resulted in a removal. (d) The department policy, or changes to the department policy, regarding children who have been exposed to the production or manufacture of methamphetamines.
<p><b><i>Kent County Privatization Implementation</i></b></p> <p><b>Sec. 515.</b> By March 1, 2016, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office that provides an update on the privatization of child welfare services in Kent County as described in section 515 of article X of 2013 PA 59 and includes all of the following:</p> <p>(a) Costs or savings that resulted from the program.            (b) Gaps in funding.            (c) Program successes.            (d) Challenges and barriers to a successful implementation.</p>	Striking current law.		Striking current law.
<p><b><i>Treatment Foster Care</i></b></p> <p><b>Sec. 519.</b> The department shall permit any private agency that has an existing contract with this state to provide foster care services to be also eligible to provide treatment foster care services.</p>	Striking current law.		<b>Sec. 519.</b> No changes from current law.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b>Fostering Futures Scholarship Program</b></p> <p><b>Sec. 522.</b> (1) From the funds appropriated in part 1 for youth in transition, the department shall allocate \$750,000.00 for college scholarships through the fostering futures scholarship program in the Michigan education trust to youths who were in foster care because of child abuse or neglect and are attending a college located in this state. Of the funds appropriated, 100% shall be used to fund scholarships for the youths described in this section.</p>	<p><b>Sec. 8-522.</b> (1) No changes from current law.</p>		Striking current law.
<p>(2) Not later than March 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices that includes the number of youths who received scholarships and the amount of each scholarship, and the total amount of funds spent or encumbered in the current fiscal year.</p>	<p>(2) Not later than March 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, <del>and</del> the house and senate policy offices, <b>AND THE STATE BUDGET OFFICE</b> that includes the number of youths who received scholarships and the amount the total amount of funds spent or encumbered in the current fiscal year.</p>		Striking current law.





## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Family Preservation Program Report and TANF Eligibility Reporting</i></b></p> <p><b>Sec. 523.</b> (1) By February 15 of the current fiscal year, the department shall report on the families first, family reunification, and families together building solutions family preservation programs to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office. The report shall contain all of the following for each program:</p> <p>(a) The average cost per recipient served.</p> <p>(b) Measurable performance indicators.</p> <p>(c) Desired outcomes or results and goals that can be measured on an annual basis, or desired results for a defined number of years.</p> <p>(d) Monitored results.</p> <p>(e) Innovations that may include savings or reductions in administrative costs.</p>	<p><b>Sec. 8-523.</b> (1) By February 15 of the current fiscal year, the department shall report on the families first, family reunification, and families together building solutions family preservation programs to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office. The report shall <b>PROVIDE AN ESTIMATE OF TOTAL COSTS SAVINGS AS A RESULT OF AVOIDING PLACEMENT OF CHILDREN IN FOSTER CARE FOR FAMILIES WHO RECEIVED FAMILY PRESERVATION SERVICES.</b> contain all of the following for each program:</p> <p><del>(a) The average cost per recipient served.</del></p> <p><del>(b) Measurable performance indicators.</del></p> <p><del>(c) Desired outcomes or results and goals that can be measured on an annual basis, or desired results for a defined number of years.</del></p> <p><del>(d) Monitored results.</del></p> <p><del>(e) Innovations that may include savings or reductions in administrative costs.</del></p>		<p><b>Sec. 523.</b> (1) By February 15 of the current fiscal year, the department shall report on the families first, family reunification, and families together building solutions family preservation programs to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office. The report shall <b>PROVIDE AN ESTIMATE OF TOTAL COSTS SAVINGS AS A RESULT OF AVOIDING PLACEMENT OF CHILDREN IN FOSTER CARE FOR FAMILIES WHO RECEIVED FAMILY PRESERVATION SERVICES.</b> contain all of the following for each program:</p> <p><del>(a) The average cost per recipient served.</del></p> <p><del>(b) Measurable performance indicators.</del></p> <p><del>(c) Desired outcomes or results and goals that can be measured on an annual basis, or desired results for a defined number of years.</del></p> <p><del>(d) Monitored results.</del></p> <p><b>AND SHALL INCLUDE INFORMATION FOR EACH PROGRAM ON ANY</b> <del>(e)</del> innovations that may include <b>INCREASE</b> savings or reductions in administrative costs.</p>
<p>(2) From the funds appropriated in part 1 for youth in transition and domestic violence prevention and treatment, the department is authorized to make allocations of TANF funds only to agencies that report necessary data to the department for the purpose of meeting TANF eligibility reporting requirements.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Strong Families/Safe Children Spending Plan</i></b></p> <p><b>Sec. 524.</b> As a condition of receiving funds appropriated in part 1 for strong families/safe children, counties must submit the service spending plan to the department by October 1 of the current fiscal year for approval. The department shall approve the service spending plan within 30 calendar days after receipt of a properly completed service spending plan.</p>	<p><b>Sec. 8-524.</b> No changes from current law.</p>		<p><b>Sec. 524.</b> No changes from current law.</p>
<p><b><i>On-Site Evaluations</i></b></p> <p><b>Sec. 525.</b> The department shall implement the same on-site evaluation processes for privately operated child welfare and juvenile justice residential facilities as is used to evaluate state-operated facilities. Penalties for noncompliance shall be the same for privately operated child welfare and juvenile justice residential facilities and state-operated facilities.</p>	<p>Striking current law.</p>		<p><b>Sec. 525.</b> No changes from current law.</p>
<p><b><i>Title IV-E Demonstration Project Waiver</i></b></p> <p><b>Sec. 526.</b> From the funds appropriated in part 1 for foster care payments and related administrative costs, the department may implement the federally approved title IV-E child welfare waiver demonstration project. As required under the waiver, any savings resulting from the demonstration project must be quantified and reinvested into child welfare programming.</p>	<p><b>Sec. 8-526.</b> No changes from current law.</p>		<p><b>Sec. 526.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b>Licensing and Contract Compliance Review</b></p> <p><b>Sec. 532.</b> (1) The department, in collaboration with representatives of private child and family agencies, shall revise and improve the annual licensing review process and the annual contract compliance review process for child placing agencies and child caring institutions. The improvement goals shall be safety and care for children. Improvements to the review process shall be directed toward alleviating administrative burdens so that agency resources may be focused on children. The revision shall include identification of duplicative staff activities and information sought from child placing agencies and child caring institutions in the annual review process. The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget director on or before January 15 of the current fiscal year on the findings of the annual licensing review.</p>	Striking current law.		<p><b>Sec. 532.</b> <del>(1)</del> No changes from current law.</p>
<p>(2) The department shall conduct licensing reviews no more than once every 2 years for child placing agencies and child caring institutions that are nationally accredited and have no outstanding violations.</p>	Striking current law.		Striking current law.



**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CHILD WELFARE SERVICES**

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><i>Child Welfare Payment Promptness</i></p> <p><b>Sec. 533.</b> (1) The department shall make payments to child placing facilities for in-home and out-of-home care services and adoption services within 30 days of receiving all necessary documentation from those agencies.</p>	Striking current law.		<b>Sec. 533.</b> (1) No changes from current law.
<p>(2) The department shall provide a report on the status of the implementation and operation of this section by February 15 of the current fiscal year.</p>	Striking current law.		<p>(2) The department shall provide a report <b>TO THE SENATE AND HOUSE APPROPRIATIONS SUBCOMMITTEE ON THE DEPARTMENT BUDGET, THE SENATE AND HOUSE FISCAL AGENCIES, AND THE STATE BUDGET DIRECTOR</b> on the status of the implementation and operation of this section by February 15 of the current fiscal year.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b>Statewide Automated Child Welfare Information System (SACWIS) Report</b></p> <p><b>Sec. 534.</b> The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by November 1 of the current fiscal year a report on the planning, implementation, and operation, regardless of the current operational status, of the statewide automated child welfare information system. The report shall include, but not be limited to, all of the following:</p> <p>(a) Areas where implementation went as planned.</p> <p>(b) The number of known issues.</p> <p>(c) The average number of help tickets submitted per day.</p> <p>(d) Any additional overtime or other staffing costs to address known issues and volume of help tickets.</p> <p>(e) Any contract revisions to address known issues and volume of help tickets.</p> <p>(f) Other strategies undertaken to improve implementation.</p>	<p><del>Sec. 8-534.</del> The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by November 1 of the current fiscal year a report on the planning, implementation, and operation, regardless of the current operational status, of the statewide automated child welfare information system. The report shall include, but not be limited to, all of the following:</p> <p><del>(a) Areas where implementation went as planned.</del></p> <p><del>(b) The number of known issues.</del></p> <p><del>(c) The average number of help tickets submitted per day.</del></p> <p><del>(d) Any additional overtime or other staffing costs to address known issues and volume of help tickets.</del></p> <p><del>(e) Any contract revisions to address known issues and volume of help tickets.</del></p> <p><del>(f) Other strategies undertaken to improve implementation.</del></p>		<p><b>Sec. 534.</b> The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by November 1 of the current fiscal year a report on the planning, implementation, and operation, regardless of the current operational status, of the statewide automated child welfare information system. The report shall include, but not be limited to, all of the following:</p> <p>(a) Areas where implementation went as planned.</p> <p>(b) The number of known issues.</p> <p>(c) The average number of help tickets submitted per day.</p> <p>(d) Any additional overtime or other staffing costs to address known issues and volume of help tickets.</p> <p>(e) Any contract revisions to address known issues and volume of help tickets.</p> <p>(f) Other strategies undertaken to improve implementation.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
	<p>SEC. 8-534. (1) THE DEPARTMENT SHALL REPORT TO THE SENATE AND HOUSE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET, THE SENATE AND HOUSE FISCAL AGENCIES, THE SENATE AND HOUSE POLICY OFFICES, AND THE STATE BUDGET OFFICE BY NOVEMBER 1 OF THE CURRENT FISCAL YEAR AN IMPLEMENTATION PLAN REGARDING THE APPROPRIATION IN PART 1 TO IMPLEMENT THE MICHIGAN STATEWIDE AUTOMATED CHILD WELFARE INFORMATION SYSTEM. THE PLAN SHALL INCLUDE, BUT NOT BE LIMITED TO, EFFORTS TO BRING THE SYSTEM IN COMPLIANCE WITH THE DWAYNE B. V SNYDER MODIFIED SETTLEMENT AGREEMENT AND OTHER FEDERAL GUIDELINES SET FORTH BY THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES.</p>		<p>SEC. 534. (1) THE DEPARTMENT SHALL REPORT TO THE SENATE AND HOUSE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET, THE SENATE AND HOUSE FISCAL AGENCIES, THE SENATE AND HOUSE POLICY OFFICES, AND THE STATE BUDGET OFFICE BY NOVEMBER 1 OF THE CURRENT FISCAL YEAR AN IMPLEMENTATION PLAN REGARDING THE APPROPRIATION IN PART 1 TO IMPLEMENT THE MISACWIS. THE PLAN SHALL INCLUDE, BUT NOT BE LIMITED TO, EFFORTS TO BRING THE SYSTEM INTO COMPLIANCE WITH THE DWAYNE B. V SNYDER MODIFIED SETTLEMENT AGREEMENT AND OTHER FEDERAL GUIDELINES SET FORTH BY THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
	<p>(2) THE DEPARTMENT SHALL REPORT TO THE SENATE AND HOUSE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET, THE SENATE AND HOUSE FISCAL AGENCIES, THE SENATE AND HOUSE POLICY OFFICES, AND THE STATE BUDGET OFFICE BY JUNE 1 OF THE CURRENT FISCAL YEAR A STATUS REPORT REGARDING THE APPROPRIATION IN PART 1 TO IMPLEMENT THE MICHIGAN STATEWIDE AUTOMATED CHILD WELFARE INFORMATION SYSTEM. THE REPORT SHALL PROVIDE DETAILS ON THE PLANNING, IMPLEMENTATION, AND OPERATION OF THE SYSTEM INCLUDING, BUT NOT LIMITED TO, ALL OF THE FOLLOWING:</p> <p>(A) AREAS WHERE IMPLEMENTATION WENT AS PLANNED.            (B) THE NUMBER OF KNOWN ISSUES.            (C) ANY ADDITIONAL OVERTIME OR OTHER STAFFING COSTS TO ADDRESS KNOWN ISSUES.            (D) ANY CONTRACT REVISIONS TO ADDRESS KNOWN ISSUES.            (E) OTHER STRATEGIES UNDERTAKEN TO IMPROVE IMPLEMENTATION.            (F) PROGRESS DEVELOPING CROSS-SYSTEM TRUSTED DATA EXCHANGES WITH MISACWIS.            (G) PROGRESS MOVING AWAY FROM A STATEWIDE/TRIBAL AUTOMATED CHILD WELFARE INFORMATION SYSTEM (SACWIS/TACWIS) TO A COMPREHENSIVE CHILD WELFARE INFORMATION SYSTEM (CCWIS).            (H) PROGRESS DEVELOPING AND IMPLEMENTING A PROGRAM TO MONITOR DATA QUALITY.            (I) PROGRESS DEVELOPING AND IMPLEMENTING CUSTOM INTEGRATED SYSTEMS FOR PRIVATE AGENCIES AND TRIBAL GOVERNMENTS.</p>		<p>(2) THE DEPARTMENT SHALL REPORT TO THE SENATE AND HOUSE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET, THE SENATE AND HOUSE FISCAL AGENCIES, THE SENATE AND HOUSE POLICY OFFICES, AND THE STATE BUDGET OFFICE BY JUNE 1 OF THE CURRENT FISCAL YEAR A STATUS REPORT REGARDING THE APPROPRIATION IN PART 1 TO IMPLEMENT THE MISACWIS. THE REPORT SHALL PROVIDE DETAILS ON THE PLANNING, IMPLEMENTATION, AND OPERATION OF THE SYSTEM INCLUDING, BUT NOT LIMITED TO, ALL OF THE FOLLOWING:</p> <p>(A) AREAS WHERE IMPLEMENTATION WENT AS PLANNED.            (B) THE NUMBER OF KNOWN ISSUES.            (C) ANY ADDITIONAL OVERTIME OR OTHER STAFFING COSTS TO ADDRESS KNOWN ISSUES.            (D) ANY CONTRACT REVISIONS TO ADDRESS KNOWN ISSUES.            (E) OTHER STRATEGIES UNDERTAKEN TO IMPROVE IMPLEMENTATION.            (F) PROGRESS DEVELOPING CROSS-SYSTEM TRUSTED DATA EXCHANGES WITH MISACWIS.            (G) PROGRESS MOVING AWAY FROM A STATEWIDE/TRIBAL AUTOMATED CHILD WELFARE INFORMATION SYSTEM (SACWIS/TACWIS) TO A COMPREHENSIVE CHILD WELFARE INFORMATION SYSTEM (CCWIS).            (H) PROGRESS DEVELOPING AND IMPLEMENTING A PROGRAM TO MONITOR DATA QUALITY.            (I) PROGRESS DEVELOPING AND IMPLEMENTING CUSTOM INTEGRATED SYSTEMS FOR PRIVATE AGENCIES AND TRIBAL GOVERNMENTS.</p>



**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CHILD WELFARE SERVICES**

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Residential Bed Space Standards and Preferences</i></b></p> <p><b>Sec. 537.</b> (1) The department, in collaboration with child placing agencies, shall develop a strategy to implement section 115o of the social welfare act, 1939 PA 280, MCL 400.115o. The strategy shall include a requirement that a department caseworker responsible for preparing a recommendation to a court concerning a juvenile placement shall provide, as part of the recommendation, information regarding the requirements of section 115o of the social welfare act, 1939 PA 280, MCL 400.115o.</p>	Striking current law.		Striking current law.
<p>(2) Between February 1 and February 29, 2016, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report on the strategy described in subsection (1).</p>	Striking current law.		Striking current law.





## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

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	EXECUTIVE	SENATE	HOUSE
<p><b><i>Psychotropic Medication For Youth in Out-of-Home Placements</i></b></p> <p><b>Sec. 540.</b> If a physician or psychiatrist who is providing services to state or court wards placed in a residential facility submits a formal request to the department to change the psychotropic medication of a ward, the department shall, if the ward is a state ward, make a determination on the proposed change within 7 business days after the request or, if the ward is a temporary court ward, seek parental consent within 7 business days after the request. If parental consent is not provided within 7 business days, the department shall petition the court on the eighth business day.</p>	Striking current law.		<b>Sec. 540.</b> No changes from current law.
<p><b><i>Foster Care Agency Administrative Rates</i></b></p> <p><b>Sec. 546.</b> (1) From the funds appropriated in part 1 for foster care payments and from child care fund, the department shall pay providers of foster care services not less than a \$37.00 administrative rate.</p>	<b>Sec. 546. (1)</b> No changes from current law.		<b>Sec. 546.</b> (1) From the funds appropriated in part 1 for foster care payments and from the child care fund, the department shall pay providers of foster care services not less than a <del>\$37.00</del> <b>\$40.00</b> administrative rate. <b>The department shall pay 100% of the administrative rate for these cases. Payments under this subsection shall be made, not less than, on a monthly basis.</b>
<p>(2) From the funds appropriated in part 1 for foster care payments and from child care fund, the department shall pay providers of general independent living services not less than a \$28.00 administrative rate.</p>	(2) No changes from current law.		(2) No changes from current law.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

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(3) From the funds appropriated in part 1, the department shall pay providers of independent living plus services statewide per diem rates for staff-supported housing and host-home housing based on proposals submitted in response to a solicitation for pricing. The independent living plus program provides staff-supported housing and services for foster youth ages 16 through 19 who, because of their individual needs and assessments, are not initially appropriate for general independent living foster care.	(3) No changes from current law.		(3) No changes from current law.
(4) From the funds appropriated in part 1, the department shall pay providers of foster care services an additional \$3.00 administrative rate, provided that section 117a of the social welfare act, 1939 PA 280, MCL 400.117a, is amended to eliminate the county match rate for the additional administrative rate provided in this subsection. Payments under this subsection shall be made, not less than, on a monthly basis.	Striking current law.		Striking current law.  <i>(Language moved to subsection (1).)</i>
(5) If required by the federal government to meet title IV-E requirements, providers of foster care services shall submit quarterly expenditure reports to the department to identify actual costs of providing foster care services.	<del>(5)</del> (4) No changes from current law.		<del>(5)</del> (4) No changes from current law.
(6) From the funds appropriated in part 1, the department shall provide an increase to each private provider of residential services, if section 117a of the social welfare act, 1939 PA 280, MCL 400.117a, is amended to eliminate the county match rate for the additional rate provided in this section.	Striking current law.		<del>(6)</del> (5) No changes from current law.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

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			(6) ON A QUARTERLY BASIS, THE DEPARTMENT SHALL REPORT THE MONTHLY DATA ON THE NUMBER OF ALL FOSTER CARE CASES ADMINISTERED BY THE DEPARTMENT AND ALL FOSTER CARE CASES ADMINISTERED BY PRIVATE PROVIDERS.
<p><b><i>Guardianship Assistance Rates</i></b></p> <p><b>Sec. 547.</b> From the funds appropriated in part 1 for the guardianship assistance program, the department shall pay a minimum rate that is not less than the approved age-appropriate payment rates for youth placed in family foster care.</p>	Striking current law.		<b>Sec. 547.</b> No changes from current law.
<p><b><i>Special Needs Adoption Subsidy</i></b></p> <p><b>Sec. 556.</b> No later than December 1 for the current fiscal year, the department shall provide an annual report to the subcommittees of the senate and house appropriations committees on the department budget, the house and senate fiscal agencies, and the state budget director that includes the following:</p> <p>(a) The number of complaints filed by adoptive parents who were not notified that their adopted child had special needs.</p> <p>(b) The number of cases that received redetermined adoption assistance as defined in section 115f of the social welfare act, 1939 PA 280, MCL 400.115f, the total expenditures on the program, and the number of cases in each determination of care level of payment.</p>	Striking current law.		Striking current law.



**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
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FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Child Welfare Training Institute Report</i></b></p> <p><b>Sec. 558.</b> (1) The department shall explore ways to maximize use of training programs or courses provided through the child welfare training institute accessible online and in service areas throughout the state, provided the delivery is an appropriate option for achieving specific learning objectives. These training programs and courses shall be made available to employees of private child placing agencies and child caring institutions.</p>	<p><b>Sec. 558.</b> <del>(1)</del> No changes from current law.</p>		<p><b>Sec. 558.</b> <del>(1)</del> No changes from current law.</p>
<p>(2) The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by March 1 of the current fiscal year a report on the training programs or courses provided through the child welfare training institute described in subsection (1), and the annual cost for each program or course. The report shall include the following data:</p> <p>(a) The number of training programs or courses that were provided for private agencies.</p> <p>(b) The number of employees from private agencies who attended any training.</p> <p>(c) The number of training programs or courses that were provided through an online forum.</p> <p>(d) The number of training programs or courses that were provided in local service areas.</p>	<p>Striking current law.</p>		<p>Striking current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Parent-to-Parent</i></b></p> <p><b>Sec. 559.</b> (1) From the funds appropriated in part 1 for adoption support services, the department shall allocate \$350,000.00 to the Adoptive Family Support Network by December 1 of the current fiscal year to operate and expand its adoptive parent mentor program to provide a listening ear, knowledgeable guidance, and community connections to adoptive parents and children who were adopted in this state or another state.</p>	Striking current law.		Striking current law.
<p>(2) The Adoptive Family Support Network shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by March 1 of the current fiscal year a report on the program described in subsection (1), including, but not limited to, the number of cases served and the number of cases in which the program prevented an out-of-home placement.</p>	Striking current law.		Striking current law.
<p><b><i>Time and Travel Reimbursements for Foster Parents</i></b></p> <p><b>Sec. 562.</b> The department shall provide time and travel reimbursements for foster parents who transport a foster child to parent-child visitations. As part of the foster care parent contract, the department shall provide written confirmation to foster parents that states that the foster parents have the right to request these reimbursements for all parent-child visitations. The department shall provide these reimbursements within 60 days of receiving a request for eligible reimbursements from a foster parent.</p>	Striking current law.		<b>Sec. 562.</b> No changes from current law.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

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	EXECUTIVE	SENATE	HOUSE
<p><i>Parent-Child and Parent-Caseworker Visitations</i></p> <p><b>Sec. 564.</b> (1) The department shall develop a clear policy for parent-child visitations. The local county offices, caseworkers, and supervisors shall meet a 50% success rate, after accounting for factors outside of the caseworker's control.</p>	Striking current law.		<b>Sec. 564.</b> (1) No changes from current law.
<p>(2) Per the court-ordered number of required meetings between caseworkers and parent, the caseworkers shall achieve a success rate of 65%, after accounting for factors outside of the caseworker's control.</p>	Striking current law.		(2) No changes from current law.
<p>(3) Between February 1 and February 29, 2016, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report on the following:</p> <p>(a) The percentage of success rate for parent-child visitations and court-ordered required meetings between caseworkers referenced in subsections (1) and (2) for the previous year.</p> <p>(b) The barriers to achieve the success rates in subsections (1) and (2) and how this information is tracked.</p>	Striking current law.		<p>(3) <del>Between February 1 and February 29, 2016,</del> <b>BY MARCH 1 OF THE CURRENT FISCAL YEAR,</b> the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report on the following:</p> <p>(a) The percentage of success rate for parent-child visitations and court-ordered required meetings between caseworkers referenced in subsections (1) and (2) for the previous year.</p> <p>(b) The barriers to achieve the success rates in subsections (1) and (2) and how this information is tracked.</p>



**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
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	EXECUTIVE	SENATE	HOUSE
<p><b>Medical Passports</b></p> <p><b>Sec. 567.</b> (1) The caseworker or supervisor who is assigned to a foster care case is responsible for completing a medical passport for the cases assigned to him or her. If a child in foster care is transferred to a new placement or returned to his or her parent's or guardian's home, the medical passport and any school records in the caseworkers' or supervisors' possession must be transferred within 2 weeks from the date of placement or return to the home.</p>	Striking current law.		<p><b>Sec. 567.</b> (1) No changes from current law.</p>
<p>(2) The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by March 1 of the current fiscal year a report on the items described in subsection (1), including the following:</p> <p>(a) The percentage of medical passports that were properly filled out.</p> <p>(b) From the total medical passports transferred, the percentage that transferred within 2 weeks from the date of placement or return to the home.</p> <p>(c) From the total school records, the percentage that transferred within 2 weeks from the date of placement or return to the home.</p> <p>(d) The implementation steps that have been taken to improve the outcomes for the measures in subdivisions (a) and (b).</p>	Striking current law.		<p>(2) No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

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	EXECUTIVE	SENATE	HOUSE
<p><b>Adoption Subsidy Negotiations</b></p> <p><b>Sec. 568.</b> (1) From the funds appropriated in part 1 for adoption subsidies, the department shall pay a minimum adoption subsidy rate that is not less than 95% of the rate that was or would have been provided for the adoptee in family foster care at the time of the adoption. This rate includes the determination of care rate that was paid or would have been paid to the adoptive parent for the adoptee in a family foster care placement, and this amount shall be increased to reflect any increase in the standard age appropriate foster care rate.</p>	Striking current law.		<b>Sec. 568.</b> (1) No changes from current law.
<p>(2) "Determination of care rate" as described in this section means a supplemental payment to the standard age appropriate foster care rate that may be justified when extraordinary care or expense is required. The supplemental payment is based on 1 or more of the following case situations where additional care is required of the foster care provider or adoptive parent or an additional expense exists:</p> <p>(a) Physically disabled children for whom the adoptive parent must provide measurably greater supervision and care.</p> <p>(b) Children with special psychological or psychiatric needs that require extra time and measurably greater amounts of care and attention by the adoptive parent.</p> <p>(c) Children requiring special diets that are more expensive than a normal diet and that require extra time and effort by the adoptive parent to obtain or prepare.</p> <p>(d) Children whose severe acting-out or antisocial behavior requires a measurably greater amount of care and attention of the adoptive parent.</p>	Striking current law.		(2) No changes from current law.





## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

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(3) The department shall, on a separate form, allow an adoptive parent to sign a certification that he or she rejects a support subsidy.	Striking current law.		(3) No changes from current law.
(4) If this section conflicts with state statute enacted subsequent to this act, the state statute controls.	Striking current law.		(4) No changes from current law.
<p><b>Private Agency Adoption Completion Payment Rate</b></p> <p><b>Sec. 569.</b> The department shall reimburse private child placing agencies that complete adoptions at the rate according to the date on which the petition for adoption and required support documentation was accepted by the court and not according to the date the court's order placing for adoption was entered.</p>	<p><b>Sec. 8-569.</b> No changes from current law.</p>		<p><b>Sec. 569.</b> (1) No changes from current law.</p>
<p><b>Contracts to License Relative Caregivers</b></p> <p><b>Sec. 574.</b> (1) From the funds appropriated in part 1 for foster care payments, \$2,500,000.00 is allocated to support performance-based contracts with child placing agencies to facilitate the licensure of relative caregivers as foster parents. Agencies shall receive \$2,300.00 for each facilitated licensure if completed within 180 days after a child's placement or, if a waiver was previously approved, 180 days from the application date. If the facilitated licensure, or approved waiver, is completed after 180 days, the agency shall receive up to \$2,300.00. The agency facilitating the licensure would retain the placement and continue to provide case management services for at least 50% of the newly licensed cases for which the placement was appropriate to the agency. Up to 50% of the newly licensed cases would have direct foster care services provided by the department.</p>	<p><b>Sec. 8-574. (1)</b> No changes from current law.</p>		<p><b>Sec. 574. (1)</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

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(2) From the funds appropriated for foster care payments, \$375,000.00 is allocated to support family incentive grants to private and community-based foster care service providers to assist with home improvements or payment for physical exams for applicants needed by foster families to accommodate foster children.	(2) No changes from current law.		(2) No changes from current law.
<p><b>Foster Parents Report</b></p> <p><b>Sec. 583.</b> By February 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, the senate and house fiscal agencies and policy offices, and the state budget office a report that includes:</p> <p>(a) The number and percentage of foster parents that dropped out of the program in the previous fiscal year and the reasons the foster parents left the program and how those figures compare to prior fiscal years.</p> <p>(b) The number and percentage of foster parents successfully retained in the previous fiscal year and how those figures compare to prior fiscal years.</p>	<b>Sec. 8-583.</b> No changes from current law.		<b>Sec. 583.</b> No changes from current law.
<p><b>Private Agency Staff Training</b></p> <p><b>Sec. 585.</b> The department shall make available at least 1 pre-service training class each month in which new caseworkers for private foster care and adoption agencies can enroll.</p>	Striking current law.		<b>Sec. 585.</b> No changes from current law.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

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	EXECUTIVE	SENATE	HOUSE
<p><b><i>In-Home Community Programs Expansion</i></b></p> <p><b>Sec. 587.</b> (1) From the funds appropriated in part 1 to in-home community care programs, \$400,000.00 shall be used to expand or create new in-home care and community-based juvenile justice services to rural counties through a grant-making process. Counties that received funds for the purpose described in section 587 of article X of 2013 PA 59 are not eligible to receive the funds in this section. The department shall expend the full amount of funds for the purpose described in this section by January 15 of the current fiscal year.</p>	Striking current law.		Striking current law.
<p>(2) By March 1 of the current fiscal year, the department shall submit a report that describes the program expansion and expenditures in detail to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices.</p>	Striking current law.		Striking current law.
<p><b><i>Reports from Children's Rights Settlement Monitor</i></b></p> <p><b>Sec. 588.</b> (1) Concurrently with public release, the department shall transmit all reports from the court-appointed settlement monitor, including, but not limited to, the needs assessment and period outcome reporting, to the state budget office, the senate and house appropriations subcommittees on the department budget, and the senate and house fiscal agencies, without revision.</p>	<b>Sec. 8-588.</b> (1) No changes from current law.		<b>Sec. 588.</b> (1) Concurrently with public release, the department shall transmit all reports from the court-appointed settlement monitor, including, but not limited to, the needs assessment and period outcome reporting, to the state budget office, the senate and house appropriations subcommittees on the department budget, <del>and</del> the senate and house fiscal agencies, <b>AND THE SENATE AND HOUSE POLICY OFFICES</b> , without revision.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILD WELFARE SERVICES

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(2) The department shall report quarterly to the state budget office, the senate and house appropriations subcommittees on the department budget, and the senate and house fiscal agencies, on the number of children enrolled in the guardianship assistance and foster care - children with serious emotional disturbance waiver programs.	(2) No changes from current law.		(2) The department shall report quarterly to the state budget office, the senate and house appropriations subcommittees on the department budget, <del>and</del> the senate and house fiscal agencies, <b>AND THE SENATE AND HOUSE POLICY OFFICES</b> , on the number of children enrolled in the guardianship assistance and foster care - children with serious emotional disturbance waiver programs.
<b>Payment of Foster Care Administrative Rate</b>  <b>Sec. 589.</b> (1) From the funds appropriated in part 1 for child care fund, the department shall pay 100% of the administrative rate for all new cases referred to providers of foster care services beginning on October 1, 2013.	Striking current law.		Striking current law.  <i>(Language moved to Sec.546.)</i>
(2) On a monthly basis, the department shall report on the number of all foster care cases administered by the department and all foster care cases administered by private providers.	Striking current law.		Striking current law.  <i>(Language moved to Sec.546.)</i>
<b>Residential Service Providers Staff Ratio</b>  <b>Sec. 593.</b> The department may allow residential service providers for abuse and neglect cases to implement a staff ratio during working hours of 1 staff to 5 children.	Striking current law.		<b>Sec. 593.</b> No changes from current law.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

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	EXECUTIVE	SENATE	HOUSE
<p><b><u>PUBLIC ASSISTANCE</u></b></p> <p><b><i>Shelter Vendor Payments</i></b></p> <p><b>Sec. 601.</b> Whenever a client agrees to the release of his or her name and address to the local housing authority, the department shall request from the local housing authority information regarding whether the housing unit for which vrending has been requested meets applicable local housing codes. Vrending shall be terminated for those units that the local authority indicates in writing do not meet local housing codes until such time as the local authority indicates in writing that local housing codes have been met.</p>	<p><b>Sec. 8-601.</b> No changes from current law.</p>		<p><b>Sec. 601.</b> No changes from current law.</p>
<p><b><i>Multiple Disability Applications</i></b></p> <p><b>Sec. 602.</b> The department shall establish a policy to conduct a full evaluation of an individual's assistance needs if the individual has applied for disability more than 1 time within a 1-year period.</p>	<p>Striking current law.</p>		<p><b>Sec. 602.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

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<p><b>Medicaid Claims for Outpatient Services Work Group</b></p> <p><b>Sec. 603.</b> Between February 1 and February 29, 2016, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report on the findings of the maximizing Medicaid claim workgroup established in section 603 of article X of 2014 PA 252, including the steps taken to implement the action plan developed by the workgroup, and the department's ongoing efforts to maximize Medicaid claims for foster children and adjudicated youths.</p>	<p>Striking current law.</p>		<p><del>Sec. 603. Between February 1 and February 29, 2016,</del> <b>BY MARCH 1 OF THE CURRENT FISCAL YEAR,</b> the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report on the findings of the maximizing Medicaid claim workgroup established in section 603 of article X of 2014 PA 252, including the steps taken to implement the action plan developed by the workgroup <b>MEDICAID CLAIM WORKGROUP ESTABLISHED IN SECTION 603 OF ARTICLE X OF 2014 PA 252,</b> and the department's ongoing efforts to maximize Medicaid claims for foster children and adjudicated youths.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

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<p><b><i>State Disability Assistance (SDA) Program</i></b></p> <p><b>Sec. 604.</b> (1) The department shall operate a state disability assistance program. Except as provided in subsection (3), persons eligible for this program shall include needy citizens of the United States or aliens exempted from the supplemental security income citizenship requirement who are at least 18 years of age or emancipated minors meeting 1 or more of the following requirements:</p> <p>(a) A recipient of supplemental security income, social security, or medical assistance due to disability or 65 years of age or older.</p> <p>(b) A person with a physical or mental impairment which meets federal supplemental security income disability standards, except that the minimum duration of the disability shall be 90 days. Substance abuse alone is not defined as a basis for eligibility.</p> <p>(c) A resident of an adult foster care facility, a home for the aged, a county infirmary, or a substance abuse treatment center.</p> <p>(d) A person receiving 30-day postresidential substance abuse treatment.</p> <p>(e) A person diagnosed as having acquired immunodeficiency syndrome.</p> <p>(f) A person receiving special education services through the local intermediate school district.</p> <p>(g) A caretaker of a disabled person who meets the requirements specified in subdivision (a), (b), (e), or (f).</p>	<p><b>Sec 8-604. (1)</b> No changes from current law.</p>		<p><b>Sec 604. (1)</b> No changes from current law.</p>



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<p>(2) Applicants for and recipients of the state disability assistance program shall be considered needy if they:</p> <p>(a) Meet the same asset test as is applied for the family independence program.</p> <p>(b) Have a monthly budgetable income that is less than the payment standards.</p>	(2) No changes from current law.		(2) No changes from current law.
<p>(3) Except for a person described in subsection (1)(c) or (d), a person is not disabled for purposes of this section if his or her drug addiction or alcoholism is a contributing factor material to the determination of disability. "Material to the determination of disability" means that, if the person stopped using drugs or alcohol, his or her remaining physical or mental limitations would not be disabling. If his or her remaining physical or mental limitations would be disabling, then the drug addiction or alcoholism is not material to the determination of disability and the person may receive state disability assistance. Such a person must actively participate in a substance abuse treatment program, and the assistance must be paid to a third party or through vendor payments. For purposes of this section, substance abuse treatment includes receipt of inpatient or outpatient services or participation in alcoholics anonymous or a similar program.</p>	(3) No changes from current law.		(3) No changes from current law.
<p><b>SDA Reimbursement</b></p> <p><b>Sec. 605.</b> The level of reimbursement provided to state disability assistance recipients in licensed adult foster care facilities shall be the same as the prevailing supplemental security income rate under the personal care category.</p>	<p><b>Sec. 8-605.</b> No changes from current law.</p>		<p><b>Sec. 605.</b> No changes from current law.</p>





## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

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<p><b><i>Repayment Agreements for Retroactive Supplemental Security Income (SSI) Payments</i></b></p> <p><b>Sec. 606.</b> County department offices shall require each recipient of family independence program and state disability assistance who has applied with the social security administration for supplemental security income to sign a contract to repay any assistance rendered through the family independence program or state disability assistance program upon receipt of retroactive supplemental security income benefits.</p>	<p><b>Sec. 8-606.</b> No changes from current law.</p>		<p><b>Sec. 606.</b> No changes from current law.</p>
<p><b><i>Public Assistance Recovery and Recoupment Revenue</i></b></p> <p><b>Sec. 607.</b> (1) The department's ability to satisfy appropriation deductions in part 1 for state disability assistance/supplemental security income recoveries and public assistance recoupment revenues shall not be limited to recoveries and accruals pertaining to state disability assistance, or family independence assistance grant payments provided only in the current fiscal year, but may include revenues collected during the current year that are prior year related and not a part of the department's accrued entries.</p>	<p><b>Sec. 8-607.</b> (1) No changes from current law.</p>		<p><b>Sec. 607.</b> (1) No changes from current law.</p>
<p>(2) The department may use supplemental security income recoveries to satisfy the deduct in any line in which the revenues are appropriated, regardless of the source from which the revenue is recovered.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b>Adult Foster Care and Homes for the Aged Payment Limits</b></p> <p><b>Sec. 608.</b> Adult foster care facilities providing domiciliary care or personal care to residents receiving supplemental security income or homes for the aged serving residents receiving supplemental security income shall not require those residents to reimburse the home or facility for care at rates in excess of those legislatively authorized. To the extent permitted by federal law, adult foster care facilities and homes for the aged serving residents receiving supplemental security income shall not be prohibited from accepting third-party payments in addition to supplemental security income provided that the payments are not for food, clothing, shelter, or result in a reduction in the recipient's supplemental security income payment.</p>	<p><b>Sec. 8-608.</b> No changes from current law.</p>		<p><b>Sec. 608.</b> No changes from current law.</p>
<p><b>SSI State Supplementation</b></p> <p><b>Sec. 609.</b> The state supplementation level under the supplemental security income program for the personal care/adult foster care and home for the aged categories shall not be reduced during the current fiscal year. The legislature shall be notified not less than 30 days before any proposed reduction in the state supplementation level.</p>	<p><b>Sec. 8-609.</b> No changes from current law.</p>		<p><b>Sec. 609.</b> No changes from current law.</p>
<p><b>State Emergency Relief (SER)</b></p> <p><b>Sec. 610.</b> (1) In developing good cause criteria for the state emergency relief program, the department shall grant exemptions if the emergency resulted from unexpected expenses related to maintaining or securing employment.</p>	<p><b>Sec. 8-610. (1)</b> No changes from current law.</p>		<p><b>Sec. 610. (1)</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

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	EXECUTIVE	SENATE	HOUSE
(2) For purposes of determining housing affordability eligibility for state emergency relief, a group is considered to have sufficient income to meet ongoing housing expenses if their total housing obligation does not exceed 75% of their total net income.	(2) No changes from current law.		(2) No changes from current law.
(3) State emergency relief payments shall not be made to individuals who have been found guilty of fraud in regard to obtaining public assistance.	(3) No changes from current law.		(3) No changes from current law.
(4) State emergency relief payments shall not be made available to persons who are out-of-state residents or illegal immigrants.	(4) No changes from current law.		(4) No changes from current law.
(5) State emergency relief payments for rent assistance shall be distributed directly to landlords and shall not be added to Michigan bridge cards.	(5) No changes from current law.		(5) No changes from current law.
<p><b>State Supplementation Rate Restriction</b></p> <p><b>Sec. 611.</b> The state supplementation level under the supplemental security income program for the living independently or living in the household of another categories shall not exceed the minimum state supplementation level as required under federal law or regulations.</p>	<p><b>Sec 8-611.</b> No changes from current law.</p>		<p><b>Sec 611.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b>Indigent Burial</b></p> <p><b>Sec. 613.</b> (1) The department shall provide reimbursements for the final disposition of indigent persons. The reimbursements shall include the following:</p> <p>(a) The maximum allowable reimbursement for the final disposition is \$800.00.            (b) The adult burial with services allowance is \$720.00.            (c) The adult burial without services allowance is \$485.00.            (d) The infant burial allowance is \$165.00.</p>	<p><b>Sec. 8-613.</b> (4) The department shall provide reimbursements for the final disposition of indigent persons. The reimbursements shall include the following:</p> <p>(a) The maximum allowable reimbursement for the final disposition is \$800.00.            (b) The adult burial with services allowance is \$720.00.            (c) The adult burial without services allowance is \$485.00.            (d) The infant burial allowance is \$165.00.</p>		<p><b>Sec. 613.</b> (4) The department shall provide reimbursements for the final disposition of indigent persons. The reimbursements shall include the following:</p> <p>(a) The maximum allowable reimbursement for the final disposition is \$800.00.            (b) The adult burial with services allowance is <del>\$720.00</del> <b>\$725.00</b>.            (c) The adult burial without services allowance is <del>\$485.00</del> <b>\$490.00</b>.            (d) The infant burial allowance is <del>\$165.00</del> <b>\$170.00</b>.</p>
<p>(2) It is the intent of the legislature that this charge limit reflect a total increase of \$20.00 per case in payments to funeral directors for funeral goods and services over the payment rate in place for the previous fiscal year. In addition, reimbursement for a cremation permit fee of up to \$75.00 and for mileage at the standard rate will also be made available for an eligible cremation. The reimbursements under this section shall take into consideration religious preferences that prohibit cremation.</p>	<p>Striking current law.</p>		<p>(2) It is the intent of the legislature that this charge limit reflect a total increase of <del>\$20.00</del> <b>\$5.00</b> per case in payments to funeral directors for funeral goods and services over the payment rate in place for the previous fiscal year. In addition, reimbursement for a cremation permit fee of up to \$75.00 and for mileage at the standard rate will also be made available for an eligible cremation. The reimbursements under this section shall take into consideration religious preferences that prohibit cremation.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>SDA Recipients Eligible for SSI Benefits</i></b></p> <p><b>Sec. 614.</b> The department shall report to the senate and house of representatives appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices by January 15 of the current fiscal year on the number and percentage of state disability assistance recipients who were determined to be eligible for federal supplemental security income benefits in the previous fiscal year.</p>	Striking current law.		<p><b>Sec. 614.</b> No changes from current law.</p>
<p><b><i>Illegal Alien Public Assistance Prohibition</i></b></p> <p><b>Sec. 615.</b> Except as required by federal law or regulations, funds appropriated in part 1 shall not be used to provide public assistance to a person who is an illegal alien. This section shall not prohibit the department from entering into contracts with food banks, emergency shelter providers, or other human services agencies who may, as a normal part of doing business, provide food or emergency shelter.</p>	<p><b>Sec. 8-615.</b> No changes from current law.</p>		<p><b>Sec. 615.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Electronic Benefit Transfer (EBT) Fees</i></b></p> <p><b>Sec. 616.</b> The department shall require retailers that participate in the electronic benefits transfer program to charge no more than \$2.50 in fees for cash back as a condition of participation.</p>	<p><b>Sec. 8-616.</b> No changes from current law.</p>		<p><b>Sec. 616.</b> No changes from current law.</p>
<p><b><i>Law Enforcement Information Network (LEIN) Report</i></b></p> <p><b>Sec. 617.</b> The department shall prepare a report on the number and percentage of public assistance recipients, categorized by type of assistance received, who were no longer eligible for assistance because of their status in the law enforcement information network and provide the report by January 15 of the current fiscal year to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, and the senate and house fiscal agencies and policy offices.</p>	<p>Striking current law.</p>		<p>Striking current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Title IV-A (TANF) and Food Assistance Benefit Exemption</i></b></p> <p><b>Sec. 619.</b> (1) Subject to subsection (2), the department shall exempt from the denial of title IV-A assistance and food assistance benefits under 21 USC 862a any individual who has been convicted of a felony that included the possession, use, or distribution of a controlled substance, after August 22, 1996, provided that the individual is not in violation of his or her probation or parole requirements. Benefits shall be provided to such individuals as follows:</p> <p>(a) A third-party payee or vendor shall be required for any cash benefits provided.</p> <p>(b) An authorized representative shall be required for food assistance receipt.</p>	<p><b>Sec. 8-619.</b> (1) No changes from current law.</p>		<p><b>Sec. 619.</b> (1) No changes from current law.</p>
<p>(2) Subject to federal approval, an individual is not entitled to the exemption in this section if the individual was convicted in 2 or more separate cases of a felony that included the possession, use, or distribution of a controlled substance after August 22, 1996.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p><b><i>Medicaid Eligibility Determination Standards of Promptness</i></b></p> <p><b>Sec. 620.</b> (1) The department shall make a determination of Medicaid eligibility not later than 90 days if disability is an eligibility factor. For all other Medicaid applicants, including patients of a nursing home, the department shall make a determination of Medicaid eligibility within 45 days of application.</p>	<p><b>Sec. 8-620.</b> (1) No changes from current law.</p>		<p><b>Sec. 620.</b> (1) No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p>(2) The department shall report on May 1 and November 1 of the current fiscal year to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, and the senate and house fiscal agencies and policy offices on the average Medicaid eligibility standard of promptness for each of the required standards of promptness under subsection (1) and for medical review team reviews achieved statewide and at each local office.</p>	<p>(2) The department shall report on <del>May 1 and November 1</del> <b>A QUARTERLY BASIS</b> of the current <del>fiscal year</del> to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, <del>and</del> the senate and house fiscal agencies and policy offices <b>AND THE STATE BUDGET OFFICE</b> on the average Medicaid eligibility standard of promptness for each of the required standards of promptness under subsection (1) and for medical review team reviews achieved statewide and at each local office.</p>		<p>(2) The department shall report on <del>May 1 and November 1</del> <b>A QUARTERLY BASIS</b> of the current <del>fiscal year</del> to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, <del>and</del> the senate and house fiscal agencies and policy offices, <b>AND THE STATE BUDGET OFFICE</b> on the average Medicaid eligibility standard of promptness for each of the required standards of promptness under subsection (1) and for medical review team reviews achieved statewide and at each local office.</p>





## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Legal Services Association of Michigan</i></b></p> <p><b>Sec. 625.</b> The department may contract with the Legal Services Association of Michigan to provide assistance to individuals who have applied for or wish to apply for SSI or other federal disability benefits. The Legal Services Association of Michigan shall provide a list of new clients accepted to the department to verify that services have been provided to department clients. The Legal Services Association of Michigan and the department shall work together to develop release forms to share information in appropriate cases. The Legal Services Association of Michigan shall provide quarterly reports indicating cases opened, cases closed, level of services provided on closed cases, and case outcomes on closed cases.</p>	<p>Striking current law.</p>		<p><b>Sec. 625. FROM THE FUNDS APPROPRIATED IN PART 1 FOR SSI ADVOCACY LEGAL SERVICES,</b> T(T)he department may contract with the Legal Services Association of Michigan to provide assistance to individuals who have applied for or wish to apply for SSI or other federal disability benefits. <b>UP TO \$500,000.00 SHALL BE PAID TO THE LEGAL SERVICES ASSOCIATION OF MICHIGAN FOR SSI ADVOCACY LEGAL SERVICES.</b> The Legal Services Association of Michigan shall provide a list of new clients accepted to the department to verify that services have been provided to department clients. The Legal Services Association of Michigan and the department shall work together to develop release forms to share information in appropriate cases. The Legal Services Association of Michigan shall provide quarterly reports indicating cases opened, cases closed, level of services provided on closed cases, and case outcomes on closed cases.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Family Independence Program (FIP) Suspicion-Based Drug Testing Pilot Program</i></b></p> <p><b>Sec. 630.</b> From the funds appropriated in part 1 for family independence program, the department shall implement a suspicion-based drug testing pilot program for the family independence program according to sections 57y and 57z of the social welfare act, 1939 PA 280, MCL 400.57y and 400.57z.</p>	<p><b>Sec. 8-630.</b> From the funds appropriated in part 1 for family independence program, the department shall <del>implement</del> <b>CONDUCT</b> a suspicion-based drug testing pilot program for the family independence program according to sections 57y and 57z of the social welfare act, 1939 PA 280, MCL 400.57y and 400.57z.</p>		<p><b>Sec. 630.</b> From the funds appropriated in part 1 for family independence program, the department shall <del>implement</del> <b>CONDUCT</b> a suspicion-based drug testing pilot program for the family independence program according to sections 57y and 57z of the social welfare act, 1939 PA 280, MCL 400.57y and 400.57z.</p>
<p><b><i>Homeless Programs Funding</i></b></p> <p><b>Sec. 642.</b> The department shall allocate the full amount of funds appropriated in part 1 for homeless programs to provide services for homeless individuals and families, including, but not limited to, third-party contracts for emergency shelter services.</p>	<p><b>Sec. 8-642.</b> No changes from current law.</p>		<p><b>Sec. 642.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Homeless Programs TANF Eligibility Reporting</i></b></p> <p><b>Sec. 643.</b> As a condition of receipt of federal TANF funds, homeless shelters and human services agencies shall collaborate with the department to obtain necessary TANF eligibility information on families as soon as possible after admitting a family to the homeless shelter. From the funds appropriated in part 1 for homeless programs, the department is authorized to make allocations of TANF funds only to the agencies that report necessary data to the department for the purpose of meeting TANF eligibility reporting requirements. Homeless shelters or human services agencies that do not report necessary data to the department for the purpose of meeting TANF eligibility reporting requirements will not receive reimbursements which exceed the per diem amount they received in fiscal year 2000. The use of TANF funds under this section should not be considered an ongoing commitment of funding.</p>	<p><b>Sec. 8-643.</b> No changes from current law.</p>		<p><b>Sec. 643.</b> No changes from current law.</p>
<p><b><i>Domestic Violence Homeless Criteria for State Emergency Relief</i></b></p> <p><b>Sec. 645.</b> An individual or family is considered homeless, for purposes of eligibility for state emergency relief, if living temporarily with others in order to escape domestic violence. For purposes of this section, domestic violence is defined and verified in the same manner as in the department's policies on good cause for not cooperating with child support and paternity requirements.</p>	<p><b>Sec. 8-645.</b> No changes from current law.</p>		<p><b>Sec. 645.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Domestic Violence Exemption to Food Assistance Requirements</i></b></p> <p><b>Sec. 653.</b> From the funds appropriated in part 1 for food assistance, an individual who is the victim of domestic violence and does not qualify for any other exemption may be exempt from the 3-month in 36-month limit on receiving food assistance under 7 USC 2015. This exemption can be extended an additional 3 months upon demonstration of continuing need.</p>	<p><b>Sec. 8-653.</b> No changes from current law.</p>		<p><b>Sec. 653.</b> No changes from current law.</p>
<p><b><i>Food Assistance Program (FAP) Double Up Food Bucks Program</i></b></p> <p><b>Sec. 654.</b> The department shall notify recipients of food assistance program benefits that their benefits can be spent with their bridge cards at many farmers' markets in the state. The department shall also notify recipients about the Double Up Food Bucks program that is administered by the Fair Food Network. Recipients shall receive information about the Double Up Food Bucks program, including information that when the recipient spends \$20.00 at participating farmers' markets through the program, the recipient can receive an additional \$20.00 to buy Michigan produce.</p>	<p><b>Sec. 8-654.</b> No changes from current law.</p>		<p><b>Sec. 654.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Low Income Home Energy Assistance Program (LIHEAP) Spending Plan</i></b></p> <p><b>Sec. 655.</b> Within 14 days after the spending plan for low-income home energy assistance program is approved by the state budget office, the department shall provide the spending plan, including itemized projected expenditures, to the chairpersons of the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices.</p>	<p><b>Sec. 8-655.</b> Within 14 days after the spending plan for low-income home energy assistance program is approved by the state budget office, the department shall provide the spending plan, including itemized projected expenditures, to the chairpersons of the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, <del>and</del> the senate and house policy offices, <b>AND THE STATE BUDGET OFFICE.</b></p>		<p><b>Sec. 655.</b> Within 14 days after the spending plan for low-income home energy assistance program is approved by the state budget office, the department shall provide the spending plan, including itemized projected expenditures, to the chairpersons of the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, <del>and</del> the senate and house policy offices, <b>AND THE STATE BUDGET OFFICE.</b></p>
<p><b><i>Food Bank Council TANF Eligibility Reporting</i></b></p> <p><b>Sec. 660.</b> From the funds appropriated in part 1 for food bank funding, the department is authorized to make allocations of TANF funds only to the agencies that report necessary data to the department for the purpose of meeting TANF eligibility reporting requirements. The agencies that do not report necessary data to the department for the purpose of meeting TANF eligibility reporting requirements will not receive allocations in excess of those received in fiscal year 2000. The use of TANF funds under this section should not be considered an ongoing commitment of funding.</p>	<p><b>Sec. 8-660.</b> No changes from current law.</p>		<p><b>Sec. 660.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b>Annual FIP Clothing Allowance</b></p> <p><b>Sec. 669.</b> The department shall allocate \$2,880,000.00 for the annual clothing allowance. The allowance shall be granted to all eligible children in a family independence program group that does not include an adult.</p>	<p><b>Sec. 8-669.</b> The department shall allocate <del>\$2,880,000.00</del> <b>\$9,000,000</b> for the annual clothing allowance. The allowance shall be granted to all eligible children in a family independence program group. <del>that does not include an adult.</del></p>		<p><b>Sec. 669.</b> The department shall allocate <del>\$2,880,000.00</del> <b>\$7,650,000.00</b> for the annual clothing allowance. The allowance shall be granted to all eligible children in a family independence program group. <del>that does not include an adult.</del></p>
<p><b>Electronic Benefit Transfer Card Abuse Report</b></p> <p><b>Sec. 672.</b> (1) The department's office of inspector general shall report to the senate and house of representatives appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices by February 15 of the current fiscal year on department efforts to reduce inappropriate use of Michigan bridge cards. The department shall provide information on the number of recipients of services who used their electronic benefit transfer card inappropriately and the current status of each case, the number of recipients whose benefits were revoked, whether permanently or temporarily, as a result of inappropriate use, and the number of retailers that were fined or removed from the electronic benefit transfer program for permitting inappropriate use of the cards.</p>	<p>Striking current law.</p>		<p><b>Sec. 672.</b> (1) No changes from current law.</p>
<p>(2) As used in this section, "inappropriate use" means not used to meet a family's ongoing basic needs, including food, clothing, shelter, utilities, household goods, personal care items, and general incidentals.</p>	<p>Striking current law.</p>		<p>(2) No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>MiBridges Fraud Workgroup</i></b></p> <p><b>Sec. 673.</b> (1) The department shall conduct a workgroup to investigate means of minimizing fraud in the MiBridges benefits programs. The members of the workgroup shall include, but are not limited to, the departments of state and state police and members of the house of representatives and the senate. The workgroup shall, at a minimum, address the following possibilities and make recommendations on the implementation of any of the following items considered feasible:</p> <p>(a) Whether the department's policies concerning the replacement of lost bridge cards sufficiently deter improper use of those cards.</p> <p>(b) What technologies may exist to deter the sale or other improper use of bridge cards.</p> <p>(c) Whether a state driver license or state identification card might be used to replace the existing bridge cards.</p> <p>(d) What federal policies exist that may inhibit or enhance adoption of fraud minimization actions.</p>	Striking current law.		Striking current law.
<p>(2) By February 1, 2016, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report on the workgroup findings. The report shall include a draft request for information to implement any recommended proposals, an action plan for implementation of any proposed changes, and an estimate of the costs that may be incurred and benefits that may be gained from the adoption of recommended workgroup suggestions.</p>	Striking current law.		Striking current law.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b>Family Independence Program (FIP) Goals</b></p> <p><b>Sec. 677. (1)</b> The department shall establish a state goal for the percentage of family independence program cases involved in employment activities. The percentage established shall not be less than 50%. The goal for long-term employment shall be 15% of cases for 6 months or more.</p>	<p><b>Sec. 8-677. (1)</b> No changes from current law.</p>		<p><b>Sec. 677. (1)</b> No changes from current law.</p>
<p>(2) On a monthly basis, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget director on the number of cases referred to Partnership. Accountability. Training. Hope. (PATH), the current percentage of family independence program cases involved in PATH employment activities, an estimate of the current percentage of family independence program cases that meet federal work participation requirements on the whole, and an estimate of the current percentage of the family independence program cases that meet federal work participation requirements for those cases referred to PATH.</p>	<p>(2) On a <del>monthly</del> <b>QUARTERLY</b> basis, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget director on the number of cases referred to Partnership. Accountability. Training. Hope. (PATH), the current percentage of family independence program cases involved in PATH employment activities, an estimate of the current percentage of family independence program cases that meet federal work participation requirements on the whole, and an estimate of the current percentage of the family independence program cases that meet federal work participation requirements for those cases referred to PATH.</p>		<p>(2) On a <del>monthly</del> <b>QUARTERLY</b> basis, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget director on the number of cases referred to Partnership. Accountability. Training. Hope. (PATH), the current percentage of family independence program cases involved in PATH employment activities, an estimate of the current percentage of family independence program cases that meet federal work participation requirements on the whole, and an estimate of the current percentage of the family independence program cases that meet federal work participation requirements for those cases referred to PATH.</p>





## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

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	EXECUTIVE	SENATE	HOUSE
<p>(3) The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a quarterly report that includes all of the following:</p> <p>(a) The number and percentage of nonexempt family independence program recipients who are employed.</p> <p>(b) The average and range of wages of employed family independence program recipients.</p> <p>(c) When data become available, the number and percentage of employed family independence program recipients who remain employed for 6 months or more.</p>	<p>(3) The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a quarterly report that includes all of the following:</p> <p>(a) The number and percentage of nonexempt family independence program recipients who are employed.</p> <p>(b) The average and range of wages of employed family independence program recipients.</p> <p>(c) <del>When data become available, †</del> The number and percentage of employed family independence program recipients who remain employed for 6 months or more.</p>		<p>(3) The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a quarterly report that includes all of the following:</p> <p>(a) The number and percentage of nonexempt family independence program recipients who are employed.</p> <p>(b) The average and range of wages of employed family independence program recipients.</p> <p>(c) <del>When data become available, †</del> The number and percentage of employed family independence program recipients who remain employed for 6 months or more.</p>
<p><b>Caseworker Policy Changes</b></p> <p><b>Sec. 686.</b> (1) The department shall ensure that program policy requires caseworkers to confirm that individuals presenting personal identification issued by another state seeking assistance through the family independence program, food assistance program, state disability assistance program, or medical assistance program are not receiving benefits from any other state.</p>	<p><b>Sec. 8-686.</b> (1) No changes from current law.</p>		<p><b>Sec. 686.</b> (1) No changes from current law.</p>
<p>(2) The department shall require caseworkers to confirm the address provided by any individual seeking family independence program benefits or state disability assistance benefits.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

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	EXECUTIVE	SENATE	HOUSE
(3) The department shall prohibit individuals with property assets assessed at a value higher than \$200,000.00 from accessing assistance through department-administered programs, unless such a prohibition would violate federal rules and guidelines.	(3) No changes from current law.		(3) No changes from current law.
(4) The department shall require caseworkers to obtain an up-to-date telephone number during the eligibility determination or redetermination process for individuals seeking medical assistance benefits.	(4) No changes from current law.		(4) No changes from current law.
<p><b><i>Application and Case Closure Information</i></b></p> <p><b>Sec. 687.</b> (1) The department shall, on a quarterly basis by February 1, May 1, August 1, and November 1, compile and make available on its website all of the following information about the family independence program, state disability assistance, the food assistance program, Medicaid, and state emergency relief:</p> <p>(a) The number of applications received.            (b) The number of applications approved.            (c) The number of applications denied.            (d) The number of applications pending and neither approved nor denied.            (e) The number of cases opened.            (f) The number of cases closed.            (g) The number of cases at the beginning of the quarter and the number of cases at the end of the quarter.</p>	<p><b>Sec. 8-687.</b> (1) No changes from current law.</p>		<p><b>Sec. 687.</b> (1) No changes from current law.</p>
(2) The information provided under subsection (1) shall be compiled and made available for the state as a whole and for each county and reported separately for each program listed in subsection (1).	(2) No changes from current law.		(2) No changes from current law.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

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	EXECUTIVE	SENATE	HOUSE
<p>(3) The department shall, on a quarterly basis by February 1, May 1, August 1, and November 1, compile and make available on its website the family independence program information listed as follows:</p> <p>(a) The number of new applicants who successfully met the requirements of the 21-day assessment period for PATH.</p> <p>(b) The number of new applicants who did not meet the requirements of the 21-day assessment period for PATH.</p> <p>(c) The number of cases sanctioned because of the school truancy policy.</p> <p>(d) The number of cases closed because of the 48-month and 60-month lifetime limits.</p> <p>(e) The number of first-, second-, and third-time sanctions.</p> <p>(f) The number of children ages 0-5 living in FIP-sanctioned households.</p>	(3) No changes from current law.		(3) No changes from current law.
<p>(4) The department shall notify the state budget office, the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices when the reports required in this section are made available on the department's website.</p>	Striking current law.		(4) No changes from current law.



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FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Multicultural Integration Funding</i></b></p> <p><b>Sec. 695.</b> (1) From the funds appropriated in part 1 for multicultural integration funding, the department may require each contractor to provide data and information on performance-related metrics. These metrics may include, but are not limited to, all of the following:</p> <p>(a) Each contractor or subcontractor shall have a mission that is consistent with the purpose of multicultural integration funding.</p> <p>(b) Each contractor shall validate that any subcontractors utilized within these appropriations share the same mission as the lead agency receiving funding.</p> <p>(c) Each contractor or subcontractor shall demonstrate cost-effectiveness.</p> <p>(d) Each contractor or subcontractor shall ensure their ability to leverage private dollars to strengthen and maximize service provision.</p> <p>(e) Each contractor or subcontractor shall provide timely and accurate reports regarding the number of clients served, units of service provision, and ability to meet their stated goals.</p>	<p>Striking current law from Sec. 8-695 and moving adjusted language to Sec. 8-295.</p>		<p>Striking current law from Sec. 695 and moving adjusted language to Sec. 295.</p>
<p>(2) The department shall require an annual report from the contractors that receive multicultural integration funding. The annual report, due 60 days following the end of the contract period, shall include specific information on services and programs provided, the client base to which the services and programs were provided, information on any wraparound services provided, and the expenditures for those services. The department shall provide the annual reports to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office.</p>	<p>Striking current law from Sec. 8-695 and moving to Sec. 8-295.</p>		<p>Striking current law from Sec. 695 and moving to Sec. 295.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC ASSISTANCE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
(3) The department shall convene a workgroup to discuss and make recommendations on including accreditation in the contractor specifications and potentially moving toward competitive bidding. Each contractor required to provide data per this section shall be invited to participate in the workgroup if so convened.	Striking current law from Sec. 8-695 and moving to Sec. 8-295.		Striking current law from Sec. 695 and moving to Sec. 295.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES JUVENILE JUSTICE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><u>JUVENILE JUSTICE SERVICES</u></b></p> <p><b><i>Residential Facility Contracts</i></b></p> <p><b>Sec. 701.</b> Unless required from changes to federal or state law or at the request of a provider, the department shall not alter the terms of any signed contract with a private residential facility serving children under state or court supervision without written consent from a representative of the private residential facility.</p>	<p><b><u>JUVENILE JUSTICE SERVICES</u></b></p> <p><b><u>CHILDREN'S SERVICES AGENCY – JUVENILE JUSTICE</u></b></p> <p>Striking current law.</p>		<p><b><u>JUVENILE JUSTICE SERVICES</u></b></p> <p><b><u>CHILDREN'S SERVICES AGENCY – JUVENILE JUSTICE</u></b></p> <p><b>Sec. 701.</b> No changes from current law.</p>
<p><b><i>Alternative Regional Detention Services County Charge-Back</i></b></p> <p><b>Sec. 706.</b> Counties shall be subject to 50% chargeback for the use of alternative regional detention services, if those detention services do not fall under the basic provision of section 117e of the social welfare act, 1939 PA 280, MCL 400.117e, or if a county operates those detention services programs primarily with professional rather than volunteer staff.</p>	<p><b>Sec. 8-706.</b> No changes from current law.</p>		<p><b>Sec. 706.</b> No changes from current law.</p>
<p><b><i>Child Care Fund Reimbursement TANF Eligibility Reporting Requirements</i></b></p> <p><b>Sec. 707.</b> In order to be reimbursed for child care fund expenditures, counties are required to submit department-developed reports to enable the department to document potential federally claimable expenditures. This requirement is in accordance with the reporting requirements specified in section 117a(7) of the social welfare act, 1939 PA 280, MCL 400.117a.</p>	<p><b>Sec. 8-707.</b> No changes from current law.</p>		<p><b>Sec. 707.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES JUVENILE JUSTICE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b>County Spending Plan Required</b></p> <p><b>Sec. 708.</b> (1) As a condition of receiving funds appropriated in part 1 for the child care fund line item, by December 15 of the current fiscal year, counties shall have an approved service spending plan for the current fiscal year. Counties must submit the service spending plan to the department by October 1 of the current fiscal year for approval. The department shall approve within 30 calendar days after receipt a properly completed service plan that complies with the requirements of the social welfare act, 1939 PA 280, MCL 400.1 to 400.119b, and shall notify a county within 30 days after approval that its service plan was approved.</p>	<p><b>Sec. 8-708.</b> <del>(1)</del> No changes from current law.</p>		<p><b>Sec. 708.</b> (1) No changes from current law.</p>
<p>2) The department shall submit a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices by February 15 of the current fiscal year on the number of counties that fail to submit a service spending plan by October 1 and the number of service spending plans not approved by December 15.</p>	<p>Striking current law.</p>		<p><b>2) IF 1 OR MORE MICHIGAN COUNTIES DO NOT SUBMIT A SERVICE SPENDING PLAN TO THE DEPARTMENT BY OCTOBER 1 OF THE CURRENT FISCAL YEAR, T</b>he department shall submit a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices by February 15 of the current fiscal year on the number of counties that fail to submit a service spending plan by October 1 and the number of service spending plans not approved by December 15.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES JUVENILE JUSTICE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>W.J. Maxey Training School Closure</i></b></p> <p><b>Sec. 709.</b> (1) The department shall close the W.J. Maxey Training School no later than October 15, 2015. The department shall ensure that staff employed at the W.J. Maxey Training School be given priority for new staff positions that they are qualified to fulfill, in accordance with applicable collective bargaining agreements and civil service rules.</p>	Striking current law.		Striking current law.
<p>2) Youth placed at the W.J. Maxey Training School shall transfer to other comparable juvenile justice residential facilities within this state no later than October 1, 2015 to complete the duration of their placements. The individual treatment plans for each youth transferred shall be tailored to the needs of the youth and family and, when appropriate, shall include family engagement and face-to-face interaction with the youth. The youth shall not be transferred to an adult correctional facility or a county jail.</p>	Striking current law.		Striking current law.





## DEPARTMENT OF HEALTH AND HUMAN SERVICES JUVENILE JUSTICE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p>(3) The department's master contract for juvenile justice residential foster care services shall be amended to prohibit contractors from denying a referral for placement of a youth, or terminating a youth's placement, if the youth's assessed treatment needs are in alignment with the facility's residential program type, as identified by the court or the department. In addition, the master contract shall require that youth placed in juvenile justice residential foster care facilities must have regularly scheduled treatment sessions with a licensed psychologist or psychiatrist, or both, and access to the licensed psychologist or psychiatrist as needed.</p>	<p><del>(3)</del> <b>Sec. 8-709. (1)</b> The department's master contract for juvenile justice residential foster care services shall be amended to prohibit contractors from denying a referral for placement of a youth, or terminating a youth's placement, if the youth's assessed treatment needs are in alignment with the facility's residential program type, as identified by the court or the department. In addition, the master contract shall require that youth placed in juvenile justice residential foster care facilities must have regularly scheduled treatment sessions with a licensed psychologist or psychiatrist, or both, and access to the licensed psychologist or psychiatrist as needed.</p>		<p><del>(3)</del> <b>Sec. 709. (1)</b> The department's master contract for juvenile justice residential foster care services shall be amended to prohibit contractors from denying a referral for placement of a youth, or terminating a youth's placement, if the youth's assessed treatment needs are in alignment with the facility's residential program type, as identified by the court or the department. In addition, the master contract shall require that youth placed in juvenile justice residential foster care facilities must have regularly scheduled treatment sessions with a licensed psychologist or psychiatrist, or both, and access to the licensed psychologist or psychiatrist as needed.</p>
<p>(4) The rates established for private residential juvenile justice facilities that were in effect on October 1, 2015 remain in effect for the current fiscal year.</p>	<p><del>(4)</del> <b>(2)</b> The rates established for private residential juvenile justice facilities that were in effect on October 1, 2015 remain in effect for the current fiscal year.</p>		<p><del>(4)</del> <b>(2)</b> No changes from current law.</p>
<p>(5) The department shall submit a quarterly report by November 1, February 1, May 1, and August 1 to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices on the current placement and status of the youth transferred from the W.J. Maxey Training School during the previous and current fiscal year as a result of the closure.</p>	<p>Striking current law.</p>		<p><del>(5)</del> <b>(3)</b> The department shall submit a quarterly report by November 1, February 1, May 1, and August 1 <b>DECEMBER 31 OF THE CURRENT FISCAL YEAR</b> to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices on the current placement and status of the youth transferred from the W.J. Maxey Training School during the previous and current fiscal year as a result of the closure.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES JUVENILE JUSTICE BOILERPLATE

FY 2015-16 CURRENT LAW	FY 2016-17		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Juvenile Justice Mental Health Report</i></b></p> <p><b>Sec. 711.</b> The department shall submit an implementation plan based on the report recommendations provided in the behavioral health study of juvenile justice facilities operated or contracted for by the state that was conducted in the previous fiscal year to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget director.</p>	Striking current law.		<p><b>Sec. 711. UNLESS PROVIDED IN THE PREVIOUS FISCAL YEAR, ¶</b>The department shall submit an implementation plan based on the report recommendations provided in the behavioral health study of juvenile justice facilities operated or contracted for by the state that was conducted in <del>the</del> <b>A</b> previous fiscal year to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget director.</p>
<p><b><i>Legislative Notification of Juvenile Justice Changes</i></b></p> <p><b>Sec. 719.</b> The department shall notify the legislature at least 30 days before closing or making any change in the status, including the licensed bed capacity and operating bed capacity, of a state juvenile justice facility.</p>	Striking current law.		Striking current law.
<p><b><i>Residential Facility of Last Resort</i></b></p> <p><b>Sec. 721.</b> If the demand for placements at state-operated juvenile justice residential facilities exceeds capacity, the department shall not increase the available occupancy or services at the facilities, and shall post a request for proposals for a contract with not less than 1 private provider of residential services for juvenile justice youth to be a residential facility of last resort.</p>	Striking current law.		Striking current law.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES - FIELD OPERATIONS AND SUPPORT SERVICES

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>FIELD OPERATIONS AND SUPPORT SERVICES</b></p> <p><i>Centers for Independent Living</i></p> <p><b>Sec. 801. (1)</b> Funds appropriated in part 1 for independent living shall be used to support centers for independent living in delivering mandated independent living core services in compliance with federal rules and regulations for the centers, by existing centers for independent living to serve underserved areas, and for projects to build the capacity of centers for independent living to deliver independent living services. Applications for the funds shall be reviewed in accordance with criteria and procedures established by the department. The funds appropriated in part 1 may be used to leverage federal vocational rehabilitation innovation and expansion funds consistent with 34 CFR 361.35 up to \$5,543,000.00, if available. If the possibility of matching federal funds exists, the centers for independent living network will negotiate a mutually beneficial contractual arrangement with Michigan rehabilitation services. Funds shall be used in a manner consistent with the state plan for independent living. Services provided should assist people with disabilities to move toward self-sufficiency, including support for accessing transportation and health care, obtaining employment, community living, nursing home transition, information and referral services, education, youth transition services, veterans, and stigma reduction activities and community education. This includes the independent living guide project that specifically focuses on economic self-sufficiency.</p>	<p><b>Sec. 8-801. (1)</b> No changes from current law.</p>		<p><b>Sec. 801. (1)</b> No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - FIELD OPERATIONS AND SUPPORT SERVICES

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>(2) The Michigan centers for independent living shall provide a report by March 1 of the current fiscal year to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on direct customer and system outcomes and performance measures.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p><b><i>Vocational Rehabilitation Funding Maximization</i></b></p> <p><b>Sec. 802.</b> The Michigan rehabilitation services shall work collaboratively with the bureau of services for blind persons, service organizations, and government entities to identify qualified match dollars to maximize use of available federal vocational rehabilitation funds.</p>	<p><b>Sec. 8-802.</b> No changes from current law.</p>		<p><b>Sec. 802.</b> No changes from current law.</p>

**DEPARTMENT OF HEALTH AND HUMAN SERVICES -  
FIELD OPERATIONS AND SUPPORT SERVICES**

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Michigan Rehabilitation Services Report</b></p> <p><b>Sec. 803.</b> The department shall provide an annual report by February 1 to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and house and senate policy offices on the efforts taken to remedy and improve the deficiencies found in the most recent auditor general report on Michigan rehabilitation services. The report shall include all of the following items:</p> <p>(a) Reductions and changes in administration costs and staffing.            (b) Service delivery plans and implementation steps achieved.            (c) Reorganization plans and implementation steps achieved.            (d) Plans to integrate Michigan rehabilitative services programs into other services provided by the department.            (e) Quarterly expenditures by major spending category.            (f) Employment and job retention rates from both Michigan rehabilitation services and its nonprofit partners.            (g) Success rate of each district in achieving the program goals.</p>	<p><b>Sec. 8-803.</b> The department shall provide an annual report by February 1 to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and house and senate policy offices on the efforts taken to <del>remedy and improve the deficiencies found in the most recent auditor general report on</del> <b>IMPROVE</b> Michigan rehabilitation services. The report shall include all of the following items:</p> <p>(a) Reductions and changes in administration costs and staffing.            (b) Service delivery plans and implementation steps achieved.            (c) Reorganization plans and implementation steps achieved.            (d) Plans to integrate Michigan rehabilitative services programs into other services provided by the department.            (e) Quarterly expenditures by major spending category.            (f) Employment and job retention rates from both Michigan rehabilitation services and its nonprofit partners.            (g) Success rate of each district in achieving the program goals.</p>		<p><b>Sec. 803.</b> The department shall provide an annual report by February 1 to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and house and senate policy offices on the efforts taken to <del>remedy and improve the deficiencies found in the most recent auditor general report on</del> <b>IMPROVE THE</b> Michigan rehabilitation services. The report shall include all of the following items:</p> <p>(a) Reductions and changes in administration costs and staffing.            (b) Service delivery plans and implementation steps achieved.            (c) Reorganization plans and implementation steps achieved.            (d) Plans to integrate Michigan rehabilitative services programs into other services provided by the department.            (e) Quarterly expenditures by major spending category.            (f) Employment and job retention rates from both Michigan rehabilitation services and its nonprofit partners.            (g) Success rate of each district in achieving the program goals.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - FIELD OPERATIONS AND SUPPORT SERVICES

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Order of Selection</b></p> <p><b>Sec. 805.</b> It is the intent of the legislature that Michigan rehabilitation services shall not implement an order of selection for vocational and rehabilitative services. If the department is at risk of entering into an order of selection for services, the department shall notify the chairs of the senate and house subcommittees on the department budget and the senate and house fiscal agencies and policy offices within 2 weeks of receiving notification.</p>	<p>Striking current law.</p>		<p><b>Sec. 805.</b> No changes from current law.</p>
<p><b>Job Development and Community Employment-Related Contracts</b></p> <p><b>Sec. 806.</b> From the funds appropriated in part 1 for Michigan rehabilitation services, the department shall allocate \$6,100,300.00, including federal matching funds, to service contracts with accredited, community-based rehabilitation organizations for job development and other community employment-related support services.</p>	<p><b>Sec. 8-806.</b> From the funds appropriated in part 1 for Michigan rehabilitation services, the department shall allocate \$6,100,300.00, including federal matching funds, to service contracts with <del>accredited</del>, community-based rehabilitation organizations for job development and other community employment-related support services.</p>		<p><b>Sec. 806.</b> From the funds appropriated in part 1 for Michigan rehabilitation services, the department shall allocate \$6,100,300.00, including federal matching funds, to service <del>contracts</del> <b>AUTHORIZATIONS</b> with <del>accredited</del>, community-based rehabilitation organizations for job development and other community employment-related support services.</p>

**DEPARTMENT OF HEALTH AND HUMAN SERVICES -  
FIELD OPERATIONS AND SUPPORT SERVICES**

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
			<p><b>Sec. 1423 807.</b> From the funds appropriated in part 1 for Elder Law of Michigan MiCAFE contract, the department shall allocate not less than \$350,000.00 to the Elder Law of Michigan MiCAFE to assist this state's elderly population to <del>participate</del> <b>IN PARTICIPATING</b> in the food assistance program. Of the \$350,000.00 allocated under this section, the department shall use \$175,000.00, which are general fund/general purpose funds, as state matching funds for not less than \$175,000.00 in United States Department of Agriculture funding to provide outreach program activities, such as eligibility <del>screen</del> <b>SCREENING</b> and information services, as part of a statewide food assistance hotline.</p> <p><i>(Language transferred from Aging and Adult Services.)</i></p>
<p><b>Vehicle Repairs</b></p> <p><b>Sec. 825.</b> From the funds appropriated in part 1, the department shall provide individuals not more than \$500.00 for vehicle repairs, including any repairs done in the previous 12 months. However, the department may in its discretion pay for repairs up to \$900.00. Payments under this section shall include the combined total of payments made by the department and work participation program.</p>	<p><b>Sec. 8-825.</b> No changes from current law.</p>		<p><b>Sec. 825.</b> No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES - FIELD OPERATIONS AND SUPPORT SERVICES

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Out-Stationed Eligibility Specialists</i></b></p> <p><b>Sec. 850.</b> (1) The department shall maintain out-stationed eligibility specialists in community-based organizations, community mental health agencies, nursing homes, and hospitals unless a community-based organization, community mental health agency, nursing home, or hospital requests that the program be discontinued at its facility.</p>	<p><b>Sec. 8-850.</b> (1) The department shall maintain out-stationed eligibility specialists in community-based organizations, community mental health agencies, nursing homes, <b>ADULT PLACEMENT AND INDEPENDENT LIVING SETTINGS, FEDERAL QUALIFIED HEALTH CLINICS,</b> and hospitals unless a community-based organization, community mental health agency, nursing home, or hospital requests that the program be discontinued at its facility.</p>		<p><b>Sec. 850.</b> (1) The department shall maintain out-stationed eligibility specialists in community-based organizations, community mental health agencies, nursing homes, <b>ADULT PLACEMENT AND INDEPENDENT LIVING SETTINGS, FEDERAL QUALIFIED HEALTH CENTERS,</b> and hospitals unless a community-based organization, community mental health agency, nursing home, <b>ADULT PLACEMENT AND INDEPENDENT LIVING SETTING, FEDERAL QUALIFIED HEALTH CENTERS,</b> or hospital requests that the program be discontinued at its facility.</p>
<p>(2) From the funds appropriated in part 1 for donated funds positions, the department shall enter into a contract with any agency that requests a donated funds position and is able and eligible under federal law to provide the required matching funds for federal funding, as determined by federal statute and regulations. If the department denies a request for donated funds positions, the department shall provide to the agency that made the request the federal statute or regulation that supports the denial. If there is no federal statute or regulation that supports the denial, the department shall grant the request for the donated funds position.</p>	<p>(2) From the funds appropriated in part 1 for donated funds positions, the department shall enter into a contract with <del>any agency that requests a donated funds position and</del> is <b>AGENCIES THAT ARE</b> able and eligible under federal law to provide the required matching funds for federal funding, as determined by federal statute and regulations. <del>If the department denies a request for donated funds positions, the department shall provide to the agency that made the request the federal statute or regulation that supports the denial. If there is no federal statute or regulation that supports the denial, the department shall grant the request for the donated funds position.</del></p>		<p>(2) From the funds appropriated in part 1 for donated funds positions, the department shall enter into a contract with <del>any agency that requests a donated funds position and is</del> <b>AGENCIES THAT ARE</b> able and eligible under federal law to provide the required matching funds for federal funding, as determined by federal statute and regulations. <del>If the department denies a request for donated funds positions, the department shall provide to the agency that made the request the federal statute or regulation that supports the denial. If there is no federal statute or regulation that supports the denial, the department shall grant the request for the donated funds position.</del></p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES - FIELD OPERATIONS AND SUPPORT SERVICES

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>(3) A contract for a donated funds position must include, but not be limited to, the following performance metrics:</p> <p>(a) Meeting a standard of promptness for processing applications for Medicaid and other public assistance programs under state law.</p> <p>(b) Meeting required standards for error rates in determining programmatic eligibility as determined by the department.</p>	(3) No changes from current law.		(3) No changes from current law.
(4) The department shall only fill additional donated funds positions after a new contract has been signed. That position shall also be abolished when the contract expires or is terminated.	(4) No changes from current law.		(4) No changes from current law.
(5) The department shall classify as limited-term FTEs any new employees who are hired to fulfill the donated funds position contracts or are hired to fill any vacancies from employees who transferred to a donated funds position.	(5) No changes from current law		(5) No changes from current law
(6) Beginning in fiscal year 2016, the department may increase the total number of donated funds positions by 200.0 FTEs. The purpose of these positions will be to address client service needs in adult placement and independent living settings, federal qualified health clinics, hospitals with a high degree of uncompensated care, and employer-based sites.	Striking current law.		Striking current law.

## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Behavioral Health Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><u>BEHAVIORAL HEALTH SERVICES</u></b></p> <p><b><i>Comprehensive System of Mental Health Services through local CMHSPs and PIHPs</i></b></p> <p><b>Sec. 901.</b> Funds appropriated in part 1 are intended to support a system of comprehensive community mental health services under the full authority and responsibility of local CMHSPs or PIHPs in accordance with the mental health code, 1974 PA 258, MCL 330.1001 to 330.2106, the Medicaid provider manual, federal Medicaid waivers, and all other applicable federal and state laws.</p>	<p><b>Sec. 901.</b> No changes from current law.</p>	<p><b>Sec. 901.</b> No changes from current law.</p>	<p><b>Sec. 901.</b> No changes from current law.</p>
<p><b><i>Contractual Requirements Between DHHS and CMHSPs/PIHPs</i></b></p> <p><b>Sec. 902.</b> (1) From funds appropriated in part 1, final authorizations to CMHSPs or PIHPs shall be made upon the execution of contracts between the department and CMHSPs or PIHPs. The contracts shall contain an approved plan and budget as well as policies and procedures governing the obligations and responsibilities of both parties to the contracts. Each contract with a CMHSP or PIHP that the department is authorized to enter into under this subsection shall include a provision that the contract is not valid unless the total dollar obligation for all of the contracts between the department and the CMHSPs or PIHPs entered into under this subsection for the current fiscal year does not exceed the amount of money appropriated in part 1 for the contracts authorized under this subsection.</p>	<p><b>Sec. 902.</b> (1) No changes from current law.</p>	<p><b>Sec. 902.</b> (1) No changes from current law.</p>	<p><b>Sec. 902.</b> (1) No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Behavioral Health Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>(2) The department shall immediately report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget director if either of the following occurs:</p> <p>(a) Any new contracts with CMHSPs or PIHPs that would affect rates or expenditures are enacted.</p> <p>(b) Any amendments to contracts with CMHSPs or PIHPs that would affect rates or expenditures are enacted.</p>	(2) No changes from current law.		(2) No changes from current law.
<p>(3) The report required by subsection (2) shall include information about the changes and their effects on rates and expenditures.</p>	(3) No changes from current law.		(3) No changes from current law.
<p><b>Annual Report on CMHSPs and PIHPs Activities and Performance</b></p> <p><b>Sec. 904.</b> (1) Not later than May 31 of the current fiscal year, the department shall provide a report on the CMHSPs, PIHPs, regional entities designated by the department as PIHPs, and managing entities for substance use disorders to the members of the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director that includes the information required by this section.</p>	<p><b>Sec. 904.</b> (1) No changes from current law.</p>		<p><b>Sec. 904.</b> (1) No changes from current law.</p>
<p>(2) The report shall contain information for each CMHSP, PIHP, regional entity designated by the department as a PIHP, and managing entity for substance use disorders and a statewide summary, each of which shall include at least the following information:</p> <p>(a) A demographic description of service recipients which, minimally, shall include reimbursement eligibility, client population, age, ethnicity, housing arrangements, and diagnosis.</p> <p>(b) Per capita expenditures by client population group and cultural and ethnic groups of the services area, including the deaf and hard of hearing population.</p> <p>(c) Financial information that, minimally, includes a description of funding authorized; expenditures by client group and fund source; and cost information by Medicaid and</p>	<p>(2) Adds subdivisions L, M, N, O. [language transferred from Sec. 908]</p> <p><b>(L) SUBSTANCE USE DISORDER, PREVENTION, EDUCATION AND TREATMENT PROGRAM EXPENDITURES STRATIFIED BY DEPARTMENT- DESIGNATED COMMUNITY MENTAL HEALTH ENTITY, BY CENTRAL DIAGNOSIS AND REFERRAL AGENCY, BY FUND SOURCE, BY SUBCONTRACTOR, BY POPULATION SERVED, AND BY</b></p>		<p>(2) The report shall contain information for each CMHSP, PIHP, regional entity designated by the department as a PIHP, and managing entity for substance use disorders and a statewide summary, each of which shall include at least the following information:</p> <p>(a) A demographic description of service recipients which, minimally, shall include reimbursement eligibility, client population, age, ethnicity, housing arrangements, and diagnosis.</p> <p>(b) Per capita expenditures <b>IN TOTAL AND</b> by client population group and cultural and ethnic groups of the services</p>

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Behavioral Health Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>Healthy Michigan plan service category, including administration and funds specified for all outside contracts for services and products. Financial information must include the amount of funding, from each fund source, used to cover clinical services and supports. Service category includes all department-approved services. General fund expenditures should reflect those funds used to cover uninsured individuals including Medicaid spenddowns.</p> <p>(d) Data describing service outcomes that include, but are not limited to, an evaluation of consumer satisfaction, consumer choice, and quality of life concerns including, but not limited to, housing and employment.</p> <p>(e) Information about access to community mental health services programs that includes, but is not limited to, the following:</p> <p>(i) The number of people receiving requested services.</p> <p>(ii) The number of people who requested services but did not receive services.</p> <p>(f) The number of second opinions requested under the code and the determination of any appeals.</p> <p>(g) An analysis of information provided by CMHSPs in response to the needs assessment requirements of the mental health code, 1974 PA 258, MCL 330.1001 to 330.2106.</p> <p>(h) Lapses and carryforwards during the immediately preceding fiscal year for CMHSPs, PIHPs, regional entities designated by the department as PIHPs, and managing entities for substance use disorders.</p> <p>(i) Information about contracts for both administrative and mental health services entered into by CMHSPs, PIHPs, regional entities designated by the department as PIHPs, and managing entities for substance use disorders with providers and others, including, but not limited to, all of the following:</p> <p>(j) The amount of the contract, organized by type of service provided.</p> <p>(k) Payment rates, organized by the type of service provided.</p> <p>(l) Administrative costs, including contract and consultant costs, for services provided to CMHSPs, PIHPs, regional entities designated by the department as PIHPs, and managing entities for substance use disorders.</p> <p>(m) Information on the community mental health Medicaid managed care and Healthy Michigan plan programs, including, but not limited to, the following:</p>	<p><b>SERVICE TYPE. ADDITIONALLY, DATA ON ADMINISTRATIVE EXPENDITURES BY DEPARTMENT-DESIGNATED COMMUNITY MENTAL HEALTH ENTITY SHALL BE REPORTED.</b></p> <p><b>(M) SUBSTANCE USE DISORDER PREVENTION, EDUCATION, AND TREATMENT PROGRAM EXPENDITURES PER STATE CLIENT, WITH DATA ON THE DISTRIBUTION OF EXPENDITURES REPORTED USING A HISTOGRAM APPROACH.</b></p> <p><b>(N) SUBSTANCE USE DISORDER PREVENTION, EDUCATION, AND TREATMENT PROGRAM NUMBER OF SERVICES PROVIDED BY CENTRAL DIAGNOSIS AND REFERRAL AGENCY, BY SUBCONTRACTOR, AND BY SERVICE TYPE. ADDITIONALLY, DATA ON LENGTH OF STAY, REFERRAL SOURCE, AND PARTICIPATION IN OTHER STATE PROGRAMS.</b></p> <p><b>(O) SUBSTANCE USE DISORDER PREVENTION, EDUCATION, AND TREATMENT PROGRAM COLLECTIONS FROM OTHER FIRST-OR THIRD-PARTY PAYERS, PRIVATE DONATIONS, OR OTHER STATE OR LOCAL PROGRAMS, BY DEPARTMENT-DESIGNATED COMMUNITY MENTAL HEALTH ENTITY, BY SUBCONTRACTOR, BY POPULATION SERVED, AND BY SERVICE TYPE FOR SUBSTANCE ABUSE SERVICES.</b></p>		<p>area, including the deaf and hard of hearing population.</p> <p>(c) Financial information that, minimally, includes a description of funding authorized; expenditures by <del>client group</del> <b>DIAGNOSIS GROUP, SERVICE CATEGORY,</b> and <del>fund source</del> <b>REIMBURSEMENT ELIGIBILITY;</b> and cost information by Medicaid and Healthy Michigan Plan, <b>STATE APPROPRIATED NON-MEDICAID MENTAL HEALTH SERVICES, LOCAL FUNDING, AND OTHER FUND SOURCES</b> <del>service category,</del> including administration and funds specified for all outside contracts for services and products. Financial information must include the amount of funding, from each fund source, used to cover clinical services and supports. Service category includes all department-approved services. <del>General fund expenditures should reflect those funds used to cover uninsured individuals including Medicaid spenddowns.</del></p> <p>(d) Data describing service outcomes that include, but are not limited to, an evaluation of consumer satisfaction, consumer choice, and quality of life concerns including, but not limited to, housing and employment.</p> <p>(e) Information about access to community mental health services programs that includes, but is not limited to, the following:</p> <p>(i) The number of people receiving requested services.</p> <p>(ii) The number of people who requested services but did not receive services.</p> <p>(f) The number of second opinions requested under the code and the determination of any appeals.</p> <p><del>(g) An analysis of information provided by</del></p>

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<p>(j) Expenditures by each CMHSP, PIHP, regional entity designated by the department as a PIHP, and managing entity for substance use disorders organized by Medicaid eligibility group, including per eligible individual expenditure averages.</p> <p>(ii) Expenditures on, and utilization of, each Medicaid and Healthy Michigan plan service category by each CMHSP, PIHP, regional entity designated by the department as a PIHP, and managing entity for substance use disorders.</p> <p>(iii) Performance indicator information required to be submitted to the department in the contracts with CMHSPs, PIHPs, regional entities designated by the department as PIHPs, and managing entities for substance use disorders.</p> <p>(k) Administrative expenditures of each CMHSP, PIHP, regional entity designated by the department as a PIHP, and managing entity for substance use disorders that includes a breakout of the salary, benefits, and pension of each executive level staff and shall include the director, chief executive, and chief operating officers and other members identified as executive staff.</p>			<p><del>CMHSPs in response to the needs assessment requirements of the mental health code, 1974 PA 258, MCL 330.1004 to 330.2406.</del></p> <p>(h) (G) Lapses and carryforwards during the immediately preceding fiscal year for CMHSPs, PIHPs, regional entities designated by the department as PIHPs, and managing entities for substance use disorders.</p> <p><del>(i) Information about contracts for both administrative and mental health services entered into by CMHSPs, PIHPs, regional entities designated by the department as PIHPs, and managing entities for substance use disorders with providers and others, including, but not limited to, all of the following:</del></p> <p><del>(i) The amount of the contract, organized by type of service provided.</del></p> <p><del>(ii) Payment rates, organized by the type of service provided.</del></p> <p><del>(iii) Administrative costs, including contract and consultant costs, for services provided to CMHSPs, PIHPs, regional entities designated by the department as PIHPs, and managing entities for substance use disorders.</del></p> <p><del>(j) Information on the community mental health Medicaid managed care and Healthy Michigan plan programs, including, but not limited to, the following:</del></p> <p><del>(i) Expenditures by each CMHSP, PIHP, regional entity designated by the department as a PIHP, and managing entity for substance use disorders organized by Medicaid eligibility group, including per eligible individual expenditure averages.</del></p> <p><del>(ii) Expenditures on, and utilization of, each Medicaid and Healthy Michigan plan service category by each CMHSP, PIHP,</del></p>



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			<p><del>regional entity designated by the department as a PIHP, and managing entity for substance use disorders.</del></p> <p><del>(H) (##) Performance indicator information required to be submitted to the department in the contracts with CMHSPs, PIHPs, regional entities designated by the department as PIHPs, and managing entities for substance use disorders.</del></p> <p><del>(K) (I) Administrative expenditures of each CMHSP, PIHP, regional entity designated by the department as a PIHP, and managing entity for substance use disorders that includes a breakout of the salary, benefits, and pension of each executive level staff and shall include the director, chief executive, and chief operating officers and other members identified as executive staff.</del></p> <p><del>(L) (J) SUBSTANCE USE DISORDER, PREVENTION, EDUCATION AND TREATMENT PROGRAM EXPENDITURES STRATIFIED BY DEPARTMENT- DESIGNATED COMMUNITY MENTAL HEALTH ENTITY, BY CENTRAL DIAGNOSIS AND REFERRAL AGENCY, BY FUND SOURCE, BY SUBCONTRACTOR, BY POPULATION SERVED, AND BY SERVICE TYPE. ADDITIONALLY, DATA ON ADMINISTRATIVE EXPENDITURES BY DEPARTMENT DESIGNATED COMMUNITY MENTAL HEALTH ENTITY SHALL BE REPORTED.</del></p> <p><del>(M) (K) SUBSTANCE USE DISORDER PREVENTION, EDUCATION, AND TREATMENT PROGRAM EXPENDITURES PER STATE CLIENT, WITH DATA ON THE DISTRIBUTION OF EXPENDITURES REPORTED USING A HISTOGRAM APPROACH.</del></p>



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			<p><del>(N)</del> (L) SUBSTANCE USE DISORDER PREVENTION, EDUCATION, AND TREATMENT PROGRAM NUMBER OF SERVICES PROVIDED BY CENTRAL DIAGNOSIS AND REFERRAL AGENCY, BY <del>SUBCONTRACTOR</del>, AND BY SERVICE TYPE. ADDITIONALLY, DATA ON LENGTH OF STAY, REFERRAL SOURCE, AND PARTICIPATION IN OTHER STATE PROGRAMS.</p> <p><del>(O)</del> (M) SUBSTANCE USE DISORDER PREVENTION, EDUCATION, AND TREATMENT PROGRAM COLLECTIONS FROM OTHER FIRST- OR THIRD-PARTY PAYERS, PRIVATE DONATIONS, OR OTHER STATE OR LOCAL PROGRAMS, BY DEPARTMENT-DESIGNATED COMMUNITY MENTAL HEALTH ENTITY, BY <del>SUBCONTRACTOR</del>, BY POPULATION SERVED, AND BY SERVICE TYPE FOR SUBSTANCE ABUSE SERVICES.</p>
(3) The department shall include data reporting requirements listed in subsection (2) in the annual contract with each individual CMHSP, PIHP, regional entity designated by the department as a PIHP, and managing entity for substance use disorders.	(3) No changes from current law.		(3) No changes from current law.
(4) The department shall take all reasonable actions to ensure that the data required are complete and consistent among all CMHSPs, PIHPs, regional entities designated by the department as PIHPs, and managing entities for substance use disorders.	(4) No changes from current law.		(4) No changes from current law.

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<p><b><i>State Disability Assistance Substance Use Disorder Services Program</i></b></p> <p><b>Sec. 906.</b> (1) The funds appropriated in part 1 for the state disability assistance substance use disorder services program shall be used to support per diem room and board payments in substance use disorder residential facilities. Eligibility of clients for the state disability assistance substance use disorder services program shall include needy persons 18 years of age or older, or emancipated minors, who reside in a substance use disorder treatment center.</p>	<p><b>Sec. 906.</b> (1) No changes from current law.</p>		<p><b>Sec. 906.</b> (1) No changes from current law.</p>
<p>(2) The department shall reimburse all licensed substance use disorder programs eligible to participate in the program at a rate equivalent to that paid by the department to adult foster care providers. Programs accredited by department-approved accrediting organizations shall be reimbursed at the personal care rate, while all other eligible programs shall be reimbursed at the domiciliary care rate.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p><b><i>Substance Use Disorder Prevention, Education, and Treatment Grants</i></b></p> <p><b>Sec. 907.</b> (1) The amount appropriated in part 1 for substance use disorder prevention, education, and treatment grants shall be expended to coordinate care and services provided to individuals with severe and persistent mental illness and substance use disorder diagnoses.</p>	<p><b>Sec. 907.</b> (1) No changes from current law.</p>		<p><b>Sec. 907.</b> (1) No changes from current law.</p>
<p>(2) The department shall approve managing entity fee schedules for providing substance use disorder services and charge participants in accordance with their ability to pay.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p>(3) The managing entity shall continue current efforts to collaborate on the delivery of services to those clients with mental illness and substance use disorder diagnoses with the goal of providing services in an administratively efficient manner.</p>	<p>(3) No changes from current law.</p>		<p>(3) No changes from current law.</p>





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<p><b>Report on Substance Use Disorder Prevention, Education, and Treatment Programs</b></p> <p><b>Sec. 908.</b> (1) By April 1 of the current fiscal year, the department shall report the following data from the prior fiscal year on substance use disorder prevention, education, and treatment programs to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office:</p> <p>(a) Expenditures stratified by department-designated community mental health entity, by central diagnosis and referral agency, by fund source, by subcontractor, by population served, and by service type. Additionally, data on administrative expenditures by department-designated community mental health entity shall be reported.</p> <p>(b) Expenditures per state client, with data on the distribution of expenditures reported using a histogram approach.</p> <p>(c) Number of services provided by central diagnosis and referral agency, by subcontractor, and by service type. Additionally, data on length of stay, referral source, and participation in other state programs.</p> <p>(d) Collections from other first- or third-party payers, private donations, or other state or local programs, by department-designated community mental health entity, by subcontractor, by population served, and by service type.</p>	<p>Striking current law. [Transfers reporting requirements to Sec. 904]</p>	<p>Striking current law. [Transfers reporting requirements to Sec. 904.]</p>	<p>Striking current law.</p>
<p>(2) The department shall take all reasonable actions to ensure that the required data reported are complete and consistent among all department-designated community mental health entities.</p>	<p>Striking current law.</p>	<p>Striking current law.</p>	<p>Striking current law.</p>

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<p><b><i>Substance Use Disorder Treatment for Public Assistance Recipients</i></b></p> <p><b>Sec. 910.</b> The department shall assure that substance use disorder treatment is provided to applicants and recipients of public assistance through the department who are required to obtain substance use disorder treatment as a condition of eligibility for public assistance.</p>	<p><b>Sec. 910.</b> No changes from current law.</p>		<p><b>Sec. 910.</b> No changes from current law.</p>
<p><b><i>Jail Diversion Services for Persons with Mental Illness or Developmental Disability</i></b></p> <p><b>Sec. 911.</b> (1) The department shall ensure that each contract with a CMHSP or PIHP requires the CMHSP or PIHP to implement programs to encourage diversion of individuals with serious mental illness, serious emotional disturbance, or developmental disability from possible jail incarceration when appropriate.</p>	<p><b>Sec. 911.</b> (1) No changes from current law.</p>		<p><b>Sec. 911.</b> (1) No changes from current law.</p>
<p>(2) Each CMHSP or PIHP shall have jail diversion services and shall work toward establishing working relationships with representative staff of local law enforcement agencies, including county prosecutors' offices, county sheriffs' offices, county jails, municipal police agencies, municipal detention facilities, and the courts. Written interagency agreements describing what services each participating agency is prepared to commit to the local jail diversion effort and the procedures to be used by local law enforcement agencies to access mental health jail diversion services are strongly encouraged.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p><b><i>Non-Medicaid Substance Use Disorder Services</i></b></p> <p><b>Sec. 912.</b> The department shall contract directly with the Salvation Army harbor light program to provide non-Medicaid substance use disorder services.</p>	<p>Striking current law.</p>		<p><b>Sec. 912.</b> No changes from current law.</p>



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<p><b>Report on Medicaid Managed Mental Health Program</b></p> <p><b>Sec. 918.</b> On or before the twenty-fifth of each month, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget director on the amount of funding paid to PIHPs to support the Medicaid managed mental health care program in the preceding month. The information shall include the total paid to each PIHP, per capita rate paid for each eligibility group for each PIHP, and number of cases in each eligibility group for each PIHP, and year-to-date summary of eligibles and expenditures for the Medicaid managed mental health care program.</p>	<p><b>Sec. 918.</b> No changes from current law.</p>		<p><b>Sec. 918.</b> No changes from current law.</p>
<p><b>Sec. 920.</b> (1) New House Language.</p>			<p><b>SEC. 920. (1) AS PART OF THE MEDICAID RATE-SETTING PROCESS FOR BEHAVIORAL HEALTH SERVICES, THE DEPARTMENT SHALL WORK WITH PIHP NETWORK PROVIDERS AND ACTUARIES TO INCLUDE ANY STATE MINIMUM WAGE INCREASES THAT DIRECTLY IMPACT STAFF WHO PROVIDE MEDICAID-FUNDED COMMUNITY LIVING SUPPORTS, PERSONAL CARE SERVICES, RESPIRE SERVICES, SKILL BUILDING SERVICES, AND OTHER SIMILAR SUPPORTS AND SERVICES AS PART OF THE MEDICAID RATE.</b></p>
<p>(2) New House Language.</p>			<p><b>(2) IT IS THE INTENT OF THE LEGISLATURE THAT ANY INCREASED MEDICAID RATE RELATED TO STATE MINIMUM WAGE INCREASES SHALL ALSO BE DISTRIBUTED TO DIRECT CARE EMPLOYEES.</b></p>

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<p><b>Timely Claims Processing for PIHPs</b></p> <p><b>Sec. 924.</b> Each PIHP that contracts with the department to provide services to the Medicaid population shall adhere to the following timely claims processing and payment procedure for claims submitted by health professionals and facilities:</p> <p>(a) A “clean claim” as described in section 111i of the social welfare act, 1939 PA 280, MCL 400.111i, shall be paid within 45 days after receipt of the claim by the PIHP. A clean claim that is not paid within this time frame shall bear simple interest at a rate of 12% per annum.</p> <p>(b) A PIHP shall state in writing to the health professional or facility any defect in the claim within 30 days after receipt of the claim.</p> <p>(c) A health professional and a health facility have 30 days after receipt of a notice that a claim or a portion of a claim is defective within which to correct the defect. The PIHP shall pay the claim within 30 days after the defect is corrected.</p>	<p>Striking current law.</p>		<p>Striking current law.</p>
<p><b>Capitation Rate Increase for PIHPs from Local Funds</b></p> <p><b>Sec. 928.</b> Each PIHP shall provide, from internal resources, local funds to be used as a bona fide part of the state match required under the Medicaid program in order to increase capitation rates for PIHPs. These funds shall not include either state funds received by a CMHSP for services provided to non-Medicaid recipients or the state matching portion of the Medicaid capitation payments made to a PIHP.</p>	<p><b>Sec. 928.</b> Each PIHP shall provide, from internal resources, local funds to be used as a <del>bona fide</del> part of the state match required under the Medicaid program in order to increase capitation rates for PIHPs. These funds shall not include either state funds received by a CMHSP for services provided to non-Medicaid recipients or the state matching portion of the Medicaid capitation payments made to a PIHP.</p>		<p><b>Sec. 928.</b> Concur with Executive.</p>

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<p><b>County Matching Funds to CMHSP</b></p> <p><b>Sec. 935.</b> A county required under the provisions of the mental health code, 1974 PA 258, MCL 330.1001 to 330.2106, to provide matching funds to a CMHSP for mental health services rendered to residents in its jurisdiction shall pay the matching funds in equal installments on not less than a quarterly basis throughout the fiscal year, with the first payment being made by October 1 of the current fiscal year.</p>	<p><b>Sec. 935.</b> No changes from current law.</p>		<p><b>Sec. 935.</b> No changes from current law.</p>
<p><b>Autism Spectrum Disorder Treatment</b></p> <p><b>Sec. 958.</b> Medicaid services shall include treatment for autism spectrum disorders as defined in the federally approved Medicaid state plan. Such alternatives may be coordinated with the Medicaid health plans and the Michigan Association of Health Plans.</p>	<p><b>Sec. 958.</b> Medicaid services shall include treatment for autism spectrum disorders as defined in the federally approved Medicaid state plan. <del>Such alternatives</del> <b>THESE SERVICES</b> may be coordinated with the Medicaid health plans and the Michigan Association of Health Plans.</p>		<p><b>Sec. 958.</b> Concur with Executive.</p>
<p><b>University Autism Programs</b></p> <p><b>Sec. 960.</b> The department shall allocate funds appropriated in part 1 for university autism programs through a grant process for the purpose of increasing the number of applied behavioral analysis therapists, autism diagnostic centers, autism treatment centers, and employment programs, and to increase the autism clinical expertise of health care providers.</p>	<p>New Executive Language:</p> <p><b>SEC. 960. (1) FROM THE FUNDS APPROPRIATED IN PART 1 FOR UNIVERSITY AUTISM PROGRAMS, THE DEPARTMENT SHALL CONTINUE A GRANT PROCESS FOR AUTISM PROGRAMS. THESE GRANTS ARE INTENDED TO INCREASE THE NUMBER OF APPLIED BEHAVIORAL ANALYSTS, INCREASE THE NUMBER OF AUTISM DIAGNOSTIC SERVICES PROVIDED, OR INCREASE EMPLOYMENT OF THOSE THAT ARE DIAGNOSED WITH AUTISM SPECTRUM DISORDER.</b></p>		<p><b>SEC. 960. (1) FROM THE FUNDS APPROPRIATED IN PART 1 FOR UNIVERSITY AUTISM PROGRAMS, THE DEPARTMENT SHALL CONTINUE A GRANT PROCESS FOR AUTISM PROGRAMS. THESE GRANTS ARE INTENDED TO INCREASE THE NUMBER OF APPLIED BEHAVIORAL ANALYSTS, INCREASE THE NUMBER OF AUTISM DIAGNOSTIC SERVICES PROVIDED, OR INCREASE EMPLOYMENT OF THOSE THAT <del>THAT</del> INDIVIDUALS WHO ARE DIAGNOSED WITH AUTISM SPECTRUM DISORDER.</b></p>



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(2) New House Language.			(2) AS A CONDITION OF ACCEPTING THE GRANTS DESCRIBED IN SUBSECTION (1), EACH UNIVERSITY SHALL TRACK AND REPORT BACK TO THE DEPARTMENT WHERE THE INDIVIDUALS WHO HAVE COMPLETED THE APPLIED BEHAVIORAL ANALYSIS TRAINING ARE INITIALLY EMPLOYED AND LOCATION OF INITIAL EMPLOYMENT.
(2) New Executive Language.	<p>(2) OUTCOMES AND PERFORMANCE MEASURES RELATED TO THIS INITIATIVE INCLUDE, BUT ARE NOT LIMITED TO, THE FOLLOWING.</p> <p>(A) INCREASE IN APPLIED BEHAVIORAL ANALYSTS CERTIFIED FROM A PROGRAM.</p> <p>(B) AUTISM DIAGNOSTIC SERVICES PROVIDED.</p> <p>(C) EMPLOYMENT RATE OF EMPLOYMENT PROGRAM PARTICIPANTS.</p>		<p>(2) (3) OUTCOMES AND PERFORMANCE MEASURES RELATED TO THIS INITIATIVE INCLUDE, BUT ARE NOT LIMITED TO, THE FOLLOWING:</p> <p>(A) AN INCREASE IN APPLIED BEHAVIORAL ANALYSTS CERTIFIED FROM A PROGRAMS.</p> <p>(B) THE NUMBER OF AUTISM DIAGNOSTIC SERVICES PROVIDED.</p> <p>(C) THE EMPLOYMENT RATE OF EMPLOYMENT PROGRAM PARTICIPANTS,</p> <p>(D) THE EMPLOYMENT RATE OF APPLIED BEHAVIORAL ANALYSTS TRAINED THROUGH THE UNIVERSITY AUTISM PROGRAMS.</p>
<p><b>National Accreditation Review Criteria for Behavioral Health Services</b></p> <p><b>Sec. 994.</b> (1) Contingent upon federal approval, if a CMHSP, PIHP, or subcontracting provider agency is reviewed and accredited by a national accrediting entity for behavioral health care services, the department, by April 1 of the current fiscal year, shall consider that CMHSP, PIHP, or subcontracting provider agency in compliance with state program review and audit requirements that are addressed and reviewed by that national accrediting entity.</p>	Striking current law.		<p><b>Sec. 994.</b> (1) No changes to current law.</p>



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<p>(2) By June 1 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office all of the following:</p> <p>(a) A list of each CMHSP, PIHP, and subcontracting provider agency that is considered in compliance with state program review and audit requirements under subsection (1).</p> <p>(b) For each CMHSP, PIHP, or subcontracting provider agency described in subdivision (a), all of the following:</p> <p>(i) The state program review and audit requirements that the CMHSP, PIHP, or subcontracting provider agency is considered in compliance with.</p> <p>(ii) The national accrediting entity that reviewed and accredited the CMHSP, PIHP, or subcontracting provider agency.</p>	Striking current law.		(2) No changes to current law.
<p>(3) The department shall continue to comply with state and federal law and shall not initiate an action that negatively impacts beneficiary safety.</p>	Striking current law.		(3) No changes to current law.
<p>(4) As used in this section, "national accrediting entity" means the Joint Commission, formerly known as the Joint Commission on Accreditation of Healthcare Organizations, the Commission on Accreditation of Rehabilitation Facilities, the Council on Accreditation, the URAC, formerly known as the Utilization Review Accreditation Commission, the National Committee for Quality Assurance, or other appropriate entity, as approved by the department.</p>	Striking current law.		(4) No changes to current law.
<p><b><i>Mental Health Diversion Council</i></b></p> <p><b>Sec. 995.</b> From the funds appropriated in part 1 for behavioral health program administration, \$4,350,000.00 is intended to address the recommendations of the mental health diversion council.</p>	<b>Sec. 995.</b> No changes from current law.		<b>Sec. 995.</b> No changes from current law.

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<p><b><i>Distribution of Substance Use Disorder Block Grant Funds</i></b></p> <p><b>Sec. 997.</b> The population data used in determining the distribution of substance use disorder block grant funds shall be from the most recent federal census.</p>	Striking current law.		<b>Sec. 997.</b> No changes from current law.
<p><b><i>Distribution of General Funds to CMHSPs</i></b></p> <p><b>Sec. 998.</b> For distribution of state general funds to CMHSPs, if the department decides to use census data, the department shall use the most recent federal decennial census data available.</p>	Striking current law.		<b>Sec. 998.</b> No changes from current law.
<p><b><i>Fetal Alcohol Syndrome Services</i></b></p> <p><b>Sec. 1002.</b> (1) The department shall continue developing an outreach program on fetal alcohol syndrome services.</p>	Transfer language to <b>Sec. 1313.</b>		Transfer language to <b>Sec. 1313.</b>
<p>(2) The department shall explore federal grant funding to address prevention services for fetal alcohol syndrome and reduce alcohol consumption among pregnant women</p>	Transfer language to <b>Sec. 1313.</b>		Transfer language to <b>Sec. 1313.</b>
<p><b><i>Notification of Policies and Procedures for PIHPs or CMHSPs</i></b></p> <p><b>Sec. 1003.</b> The department shall notify the Michigan Association of Community Mental Health Boards when developing policies and procedures that will impact PIHPs or CMHSPs.</p>	<b>Sec. 1003.</b> No changes from current law.		<b>Sec. 1003.</b> No changes from current law.



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	EXECUTIVE	SENATE	HOUSE
<p><b>Workgroup on PIHPs Capitation Payments</b></p> <p><b>Sec. 1004.</b> (1) The department shall continue to work with the workgroup created to make recommendations to achieve more uniformity in capitation payments made to the PIHPs.</p>	<p><b>Sec. 1004.</b> <del>(1)–</del>The department shall <del>continue to work with the workgroup created to make recommendations to achieve more uniformity in capitation payments made to the PIHPs.</del> <b>REPORT ON IMPLEMENTATION OF RECOMMENDATIONS TO ACHIEVE MORE UNIFORMITY IN CAPITATION PAYMENTS MADE TO THE PIHPs BY MARCH 1ST OF THE CURRENT FISCAL YEAR.</b></p>		<p><b>Sec. 1004.</b> <del>(1)–</del>The department shall <del>continue to work with the workgroup created to make</del> <b>REPORT ON THE IMPLEMENTATION OF</b> recommendations to achieve more uniformity in capitation payments made to the PIHPs. <b>TO THE SENATE AND HOUSE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET, THE SENATE AND HOUSE FISCAL AGENCIES, AND THE STATE BUDGET DIRECTOR BY MARCH 1 OF THE CURRENT FISCAL YEAR.</b></p>
<p>(2) The department shall provide the workgroup’s progress report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget director by March 1 of the current fiscal year.</p>	<p>Striking current law.</p>		<p>Striking current law.</p>
<p><b>Service Providers to High-Need Children or Adults</b></p> <p><b>Sec. 1005.</b> For the purposes of special projects involving high-need children or adults, including the not guilty by reason of insanity population, the department may contract directly with providers of services to these identified populations.</p>	<p><b>Sec. 1005.</b> No changes from current law.</p>		<p><b>Sec. 1005.</b> No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Behavioral Health Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Report on CMH Non-Medicaid Services Expenditures</b></p> <p><b>Sec. 1006.</b> No later than June 1 of the current fiscal year, the department shall provide the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office with the most recent cost data information submitted by the CMHSPs on how the funds appropriated in part 1 for the community mental health services non-Medicaid services line item were expended by each CMHSP. At a minimum, the information must include CMHSPs general fund/general purpose costs for each of the following categories: administration, prevention, jail diversion and treatment services, MIChild program, children's waiver home care program, children with serious emotional disturbance waiver program, services provided to individuals with mental illness and developmental disabilities who are not eligible for Medicaid, and the Medicaid spenddown population.</p>	<p><b>Sec. 1006.</b> No changes from current law.</p>		<p>Striking current law. [Transfers reporting requirements to Sec. 904.]</p>
<p><b>Psychiatric Residential Treatment Facility and Children's Behavioral Action Team</b></p> <p><b>Sec. 1007.</b> (1) From the funds appropriated in part 1 for behavioral health program administration, the department shall establish a psychiatric residential treatment facility and children's behavioral action team. These services will augment the continuum of behavioral health services for high-need youth and provide additional continuity of care and transition into supportive community-based services.</p>	<p><b>Sec. 1007.</b> (1) From the funds appropriated in part 1 for behavioral health program administration, the department shall <del>establish</del> <b>MAINTAIN</b> a psychiatric residential treatment facility and children's behavioral action team. These services will augment the continuum of behavioral health services for high-need youth and provide additional continuity of care and transition into supportive community-based services.</p>		<p><b>Sec. 1007.</b> (1) Concur with Executive.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Behavioral Health Services

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<p>(2) Outcomes and performance measures for this initiative include, but are not limited to, the following:</p> <p>(a) The rate of rehospitalization for youth served through the program at 30 and 180 days.</p> <p>(b) Measured change in the Child and Adolescent Functional Assessment Scale for children served through the program.</p>	(2) No changes from current law.		(2) No changes from current law.
<p><b><i>PIHP Administrative Costs, Mental Health Care, Service Rates, and Direct Care Reimbursement</i></b></p> <p><b>Sec. 1008.</b> The PIHP shall do all of the following:</p> <p>(a) Work to reduce administration costs by ensuring that PIHP responsible functions are efficient to allow optimal transition of dollars to direct services. This process must include limiting duplicate layers of administration and minimizing PIHP-delegated services that may result in higher costs or inconsistent service delivery, or both.</p> <p>(b) Take an active role in managing mental health care by ensuring consistent and high-quality service delivery throughout its network and promote a conflict-free care management environment.</p> <p>(c) Ensure that direct service rate variances are related to the level of need or other quantifiable measures to ensure that the most money possible reaches direct services.</p> <p>(d) Whenever possible, promote fair and adequate direct care reimbursement, including fair wages for direct service workers.</p>	<p><b>Sec. 1008.</b> The PIHP shall do all of the following:</p> <p>(a) Work to reduce administration costs by ensuring that PIHP responsible functions are efficient to allow optimal transition of dollars to direct services. This process must include limiting duplicate layers of administration and minimizing PIHP-delegated services that may result in higher costs or inconsistent service delivery, or both.</p> <p>(b) Take an active role in managing mental health care by ensuring consistent and high-quality service delivery throughout its network and promote a conflict-free care management environment.</p> <p>(c) Ensure that direct service rate variances are related to the level of need or other quantifiable measures to ensure that the most money possible reaches direct services.</p> <p>(d) <del>Whenever possible,</del> <b>P</b>romote fair and adequate direct care reimbursement, including fair wages for direct service workers.</p>		<p><b>Sec. 1008.</b> No changes to current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Behavioral Health Services

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	EXECUTIVE	SENATE	HOUSE
<p><b><i>PIHP Network Provider Workforce Recruitment and Retention</i></b></p> <p><b>Sec. 1009.</b> (1) The department shall work with PIHP network providers to analyze the workforce challenges of recruitment and retention of staff who provide Medicaid-funded community living supports, personal care services, respite services, skill building services, and other similar supports and services. The department workgroup must consider ways to attract and retain staff to provide Medicaid-funded supports and services.</p>	<p><b>Sec. 1009.</b> (4) The department shall <b>PROVIDE A PROGRESS REPORT ON IMPLEMENTATION OF RECOMMENDATIONS FROM</b> work with PIHP network providers to analyze the workforce challenges of recruitment and retention of staff who provide Medicaid-funded community living supports, personal care services, respite services, skill building services, and other similar supports and services <b>BY MAY 1 OF THE CURRENT FISCAL YEAR.</b> <del>The department workgroup must consider ways to attract and retain staff to provide Medicaid-funded supports and services.</del></p>		<p><b>Sec. 1009.</b> (4) The department shall <b>PROVIDE A PROGRESS REPORT ON THE IMPLEMENTATION OF RECOMMENDATIONS FROM</b> work with PIHP network providers to analyze the workforce challenges of recruitment and retention of staff who provide Medicaid-funded community living supports, personal care services, respite services, skill building services, and other similar supports and services <b>BY MAY 1 OF THE CURRENT FISCAL YEAR TO THE SENATE AND HOUSE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET, THE SENATE AND HOUSE FISCAL AGENCIES, AND THE STATE BUDGET DIRECTOR.</b> <del>The department workgroup must consider ways to attract and retain staff to provide Medicaid-funded supports and services.</del></p>
<p>(2) The department workgroup must include PIHP providers, CMHSPs, individuals with disabilities, and staff.</p>	Striking current law.		Striking current law.
<p>(3) The department shall provide a status report on the workgroup's suggestions to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget director, making note in the report when the participants outlined in subsection (2) reached consensus on the workgroup's suggestions and when the participants outlined in subsection (2) had points of difference on the workgroup's suggestions.</p>	Striking current law.		Striking current law.



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FY 2015-16 CURRENT LAW	FY 2016-2017		
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<b>SUBSECTION VETOED – NOT CURRENT LAW</b>			
<p><b><i>Redistribution of Lapsed Funds</i></b></p> <p><b>Sec. 1010.</b> (1) If the federal government allows the redistribution of lapsed federal Medicaid match funds in the Medicaid mental health services line, the funds appropriated in part 1 for Medicaid mental health services funds, which have lapsed, shall be distributed to individual PIHPs based on the PIHP distribution formula in effect during the current fiscal year.</p>	Not included.		Not included.
<p>(2) It is the intent of the legislature that any funds that lapse from the funds appropriated in part 1 for Medicaid mental health services shall be redistributed to individual CMHSPs based on the community mental health non-Medicaid services distribution formula in effect during the current fiscal year. By April 1 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office on the lapse by PIHP from the previous fiscal year and the projected lapse by PIHP in the current fiscal year.</p>	Striking current law.		Striking current law.
<p><b>Sec. 1010.</b> New Executive Language.</p>	<p><b>SEC. 1010. FROM THE FUNDS APPROPRIATED IN PART 1 FOR BEHAVIORAL HEALTH PROGRAM ADMINISTRATION, \$2,000,000.00 SHALL BE ALLOCATED TO ADDRESS THE IMPLEMENTATION OF COURT ORDERED ASSISTED OUTPATIENT TREATMENT ASSOCIATED WITH PUBLIC ACT 497 OF 2004.</b></p>		<p><b>SEC. 1010. FROM THE FUNDS APPROPRIATED IN PART 1 FOR BEHAVIORAL HEALTH PROGRAM ADMINISTRATION, \$2,000,000.00 SHALL BE ALLOCATED TO ADDRESS THE IMPLEMENTATION OF COURT ORDERED ASSISTED OUTPATIENT TREATMENT ASSOCIATED WITH PUBLIC ACT 497 OF 2004 AS PROVIDED UNDER CHAPTER 4 OF THE MENTAL HEALTH CODE, 1974 PA 258, MCL 330.1400 TO 330.1491.</b></p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Behavioral Health Services

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<p><b><u>STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL HEALTH SERVICES</u></b></p> <p><i>Third-Party Payments and Revenue Recapture Project</i></p> <p><b>Sec. 1051.</b> The department shall continue a revenue recapture project to generate additional revenues from third parties related to cases that have been closed or are inactive. A portion of revenues collected through project efforts may be used for departmental costs and contractual fees associated with these retroactive collections and to improve ongoing departmental reimbursement management functions.</p>	<p><b>Sec. 1051.</b> No changes from current law.</p>	<p><b>Sec. 1051.</b> No changes from current law.</p>	<p><b>Sec. 1051.</b> No changes from current law.</p>
<p><b><i>Gifts and Bequests</i></b></p> <p><b>Sec. 1052.</b> The purpose of gifts and bequests for patient living and treatment environments is to use additional private funds to provide specific enhancements for individuals residing at state-operated facilities. Use of the gifts and bequests shall be consistent with the stipulation of the donor. The expected completion date for the use of gifts and bequests donations is within 3 years unless otherwise stipulated by the donor.</p>	<p><b>Sec. 1052.</b> No changes from current law.</p>	<p><b>Sec. 1052.</b> No changes from current law.</p>	<p><b>Sec. 1052.</b> No changes from current law.</p>
<p><b><i>Closures or Consolidations of State Hospitals and Centers</i></b></p> <p><b>Sec. 1055.</b> (1) The department shall not implement any closures or consolidations of state hospitals, centers, or agencies until CMHSPs or PIHPs have programs and services in place for those individuals currently in those facilities and a plan for service provision for those individuals who would have been admitted to those facilities.</p>	<p><b>Sec. 1055.</b> (1) No changes from current law.</p>	<p><b>Sec. 1055.</b> (1) No changes from current law.</p>	<p><b>Sec. 1055.</b> (1) No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Behavioral Health Services

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(2) All closures or consolidations are dependent upon adequate department-approved CMHSP and PIHP plans that include a discharge and aftercare plan for each individual currently in the facility. A discharge and aftercare plan shall address the individual's housing needs. A homeless shelter or similar temporary shelter arrangements are inadequate to meet the individual's housing needs.	(2) No changes from current law.		(2) No changes from current law.
(3) Four months after the certification of closure required in section 19(6) of the state employees' retirement act, 1943 PA 240, MCL 38.19, the department shall provide a closure plan to the house and senate appropriations subcommittees on the department budget and the state budget director.	(3) No changes from current law.		(3) No changes from current law.
(4) Upon the closure of state-run operations and after transitional costs have been paid, the remaining balances of funds appropriated for that operation shall be transferred to CMHSPs or PIHPs responsible for providing services for individuals previously served by the operations.	(4) No changes from current law.		(4) No changes from current law.
<b><i>First- and Third-Party Patient Reimbursement</i></b>  <b>Sec. 1056.</b> The department may collect revenue for patient reimbursement from first- and third-party payers, including Medicaid and local county CMHSP payers, to cover the cost of placement in state hospitals and centers. The department is authorized to adjust financing sources for patient reimbursement based on actual revenues earned. If the revenue collected exceeds current year expenditures, the revenue may be carried forward with approval of the state budget director. The revenue carried forward shall be used as a first source of funds in the subsequent year.	<b>Sec. 1056.</b> No changes from current law.		<b>Sec. 1056.</b> No changes from current law.



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Sec. 1057. New House Language.			SEC. 1057. THE DEPARTMENT SHALL WORK WITH THE DEPARTMENT OF TECHNOLOGY, MANAGEMENT, AND BUDGET TO SECURE AN APPRAISAL OF THE HAWTHORN CENTER PSYCHIATRIC HOSPITAL FACILITY FOR CHILDREN AND ADOLESCENTS AND DEVELOP A PROPOSAL FOR POSSIBLE REPLACEMENT OF THE FACILITY AT THE SAME LOCATION OR AT A NEW LOCATION.
<i>Privatization of Food and Custodial Services</i>  Sec. 1058. Effective October 1 of the current fiscal year, the department, in consultation with the department of technology, management, and budget, may maintain a bid process to identify 1 or more private contractors to provide food service and custodial services for the administrative areas at any state hospital identified by the department as capable of generating savings through the outsourcing of such services.	Sec. 1058. No changes from current law.		Sec. 1058. No changes from current law.
Sec. 1059. (1) New Executive Language,	SEC. 1059. (1) FROM THE INCREASED FUNDS APPROPRIATED IN PART 1 FOR CENTER FOR FORENSIC PSYCHIATRY, THE DEPARTMENT SHALL OPEN AN ADDITIONAL WING AT THE CENTER FOR FORENSIC PSYCHIATRY IN THE CURRENT FISCAL YEAR. THE PURPOSE OF THIS PROGRAM IS TO PROVIDE ADDITIONAL CAPACITY FOR SPECIALIZED SERVICES TO CRIMINAL DEFENDANTS WHO ARE ADJUDICATED AS INCOMPETENT TO STAND TRIAL AND NOT GUILTY BY REASON OF INSANITY.		SEC. 1059. (1) FROM THE INCREASED FUNDS APPROPRIATED IN PART 1 FOR CENTER FOR FORENSIC PSYCHIATRY, THE DEPARTMENT SHALL OPEN AN ADDITIONAL WING AT THE CENTER FOR FORENSIC PSYCHIATRY IN THE CURRENT FISCAL YEAR. THE PURPOSE OF THIS PROGRAM IS TO PROVIDE ADDITIONAL CAPACITY FOR SPECIALIZED SERVICES TO CRIMINAL DEFENDANTS WHO ARE ADJUDICATED AS INCOMPETENT TO STAND TRIAL AND OR NOT GUILTY BY REASON OF INSANITY.





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<p>(2) New Executive Language,</p>	<p>(2) THE DEPARTMENT SHALL IDENTIFY SPECIFIC OUTCOMES AND PERFORMANCE MEASURES FOR THIS INITIATIVE, INCLUDING, BUT NOT LIMITED TO THE FOLLOWING:</p> <p>(A) THE AVERAGE WAIT TIME FOR PERSON RULED INCOMPETENT TO STAND TRIAL BEFORE ADMISSION TO THE CENTER FOR FORENSIC PSYCHIATRY.</p> <p>(B) THE AVERAGE WAIT TIME FOR PERSONS RULED INCOMPETENT TO STAND TRIAL BEFORE ADMISSION TO OTHER STATE OPERATED PSYCHIATRIC FACILITIES.</p> <p>(C) THE NUMBER OF PERSONS WAITING TO RECEIVE SERVICES AT THE CENTER FOR FORENSIC PSYCHIATRY.</p> <p>(D) THE NUMBER OF PERSONS WAITING TO RECEIVE SERVICES AT OTHER STATE OPERATED HOSPITALS AND CENTERS.</p>		<p>(2) THE DEPARTMENT SHALL IDENTIFY SPECIFIC OUTCOMES AND PERFORMANCE MEASURES FOR THIS INITIATIVE, INCLUDING, BUT NOT LIMITED TO THE FOLLOWING:</p> <p>(A) THE AVERAGE WAIT TIME FOR PERSONS RULED INCOMPETENT TO STAND TRIAL BEFORE ADMISSION TO THE CENTER FOR FORENSIC PSYCHIATRY.</p> <p>(B) THE AVERAGE WAIT TIME FOR PERSONS RULED INCOMPETENT TO STAND TRIAL BEFORE ADMISSION TO OTHER STATE-OPERATED PSYCHIATRIC FACILITIES.</p> <p>(C) THE NUMBER OF PERSONS WAITING TO RECEIVE SERVICES AT THE CENTER FOR FORENSIC PSYCHIATRY.</p> <p>(D) THE NUMBER OF PERSONS WAITING TO RECEIVE SERVICES AT OTHER STATE-OPERATED HOSPITALS AND CENTERS.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Public Health Administration

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<p><b><u>PUBLIC HEALTH ADMINISTRATION</u></b></p> <p><i>Michigan Health Endowment Fund</i></p> <p><b>Sec. 1101.</b> The department shall work with the Michigan health endowment fund corporation established under section 653 of the nonprofit health care corporation reform act, 1980 PA 350, MCL 550.1653, to explore ways to fund and evaluate current and future policies and programs.</p>	<p><u>PUBLIC HEALTH ADMINISTRATION</u></p> <p>Delete current law.</p>		<p><u>PUBLIC HEALTH ADMINISTRATION</u></p> <p>Retained and moved to <b>Sec. 1225.</b></p>
<p><b><i>School Children's Healthy Exercise Program</i></b></p> <p><b>Sec. 1102.</b> From the funds appropriated in part 1 for health and wellness initiatives, \$1,000,000.00 shall be allocated for a school children's healthy exercise program to promote and advance physical health for school children in kindergarten through grade 8. The department shall recommend model programs for sites to implement that incorporate evidence-based best practices. The department shall grant no less than 1/2 of the funds appropriated in part 1 for before- and after-school programs. The department shall establish guidelines for program sites, which may include schools, community-based organizations, private facilities, recreation centers, or other similar sites. The program format shall encourage local determination of site activities and shall encourage local inclusion of youth in the decision-making regarding site activities. Program goals shall include children experiencing improved physical health and access to physical activity opportunities, the reduction of obesity, providing a safe place to play and exercise, and nutrition education. To be eligible to participate, program sites shall provide a 20% match to the state funding, which may be provided in full, or in part, by a corporation, foundation, or private partner. The department shall seek financial support from corporate, foundation, or other private partners for the program or for individual program sites.</p>	<p>Delete current law.</p>		<p>Retained and moved to <b>Sec. 1226.</b></p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Public Health Administration

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<p><b><i>Health and Wellness Initiatives Criteria</i></b></p> <p><b>Sec. 1103.</b> The department shall establish criteria for all funds allocated under part 1 for health and wellness initiatives. The criteria must include a requirement that all programs funded be evidence-based and supported by research, include interventions that have been shown to demonstrate outcomes that lower cost and improve quality, and be designed for statewide impact. Preference must be given to programs that utilize the funding as match for additional resources including, but not limited to, federal sources.</p>	Delete current law.		Retained and moved to <b>Sec. 1227.</b>



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	EXECUTIVE	SENATE	HOUSE
<p><b><u>HEALTH POLICY</u></b></p> <p><b><i>Free Health Clinic Funding</i></b></p> <p><b>Sec. 1140.</b> From the funds appropriated in part 1 for primary care services, \$250,000.00 shall be allocated to free health clinics operating in the state. The department shall distribute the funds equally to each free health clinic. For the purpose of this appropriation, "free health clinics" means nonprofit organizations that use volunteer health professionals to provide care to uninsured individuals.</p>	Delete current law.		<b>Sec. 1140.</b> No changes from current law.
<p><b><i>Funding for Multicultural Agencies Providing Primary Care Services</i></b></p> <p><b>Sec. 1141.</b> The department shall continue support of multicultural agencies that provide primary care services from the funds appropriated in part 1.</p>	Delete current law.		Delete current law (see related House Sec. 295).
<p><b><i>Options for Incentivizing Primary Care Medical School Students to Stay in Michigan</i></b></p> <p><b>Sec. 1142.</b> The department shall continue to seek means to increase retention of Michigan medical school students for completion of their primary care residency requirements within this state and ultimately, for some period of time, to remain in this state and serve as primary care physicians. The department is encouraged to work with Michigan institutions of higher education.</p>	Delete current law.		<b>Sec. 1142.</b> No changes from current law.
<p><b><i>Health Innovation Grants</i></b></p> <p><b>Sec. 1143.</b> The department may award health innovation grants to address emerging issues and encourage cutting edge advances in health care including strategic partners in both the public and private sectors.</p>	<b>Sec. 1143.</b> No changes from current law.		<b>Sec. 1143.</b> No changes from current law.



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<p><b><i>Federal Grant for Blueprint for Health Innovation</i></b></p> <p><b>Sec. 1144.</b> (1) From the funds appropriated in part 1 for health policy administration, the department shall allocate the federal state innovation model grant funding that supports implementation of the health delivery system innovations detailed in this state's "Reinventing Michigan's Health Care System: Blueprint for Health Innovation" document. Over the next 4 years this initiative will test new payment methodologies, support improved population health outcomes, and support improved infrastructure for technology and data sharing and reporting. The funds will be used to provide financial support directly to regions participating in the model test and to support statewide stakeholder guidance and technical support.</p>	<p><b>Sec. 1144.</b> (1) No changes from current law, except:</p> <p>Strikes "<del>Over the next 4 years</del>"</p>		<p><b>Sec. 1144.</b> (1) No changes from current law, except:</p> <p>Strikes "<del>Over the next 4 years</del>"</p>
<p>(2) Outcomes and performance measures for the initiative under subsection (1) include, but are not limited to, the following:</p> <p>(a) Increasing the number of physician practices fulfilling patient-centered medical home functions.</p> <p>(b) Reducing inappropriate health utilization, specifically reducing preventable emergency department visits, reducing the proportion of hospitalizations for ambulatory sensitive conditions, and reducing this state's 30-day hospital readmission rate.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p>(3) By March 1 and September 1 of the current fiscal year, the department shall submit a written report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office on the status of the program and progress made since the prior report.</p>	<p>(3) No changes from current law.</p>		<p>(3) No changes from current law.</p>



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<p>(4) From the funds appropriated in part 1 for health policy administration, any data aggregator created as part of the allocation of the federal state innovation model grant funds must meet the following standards:</p> <p>(a) The primary purpose of the data aggregator must be to increase the quality of health care delivered in this state, while reducing costs.</p> <p>(b) The data aggregator must be governed by a nonprofit entity.</p> <p>(c) All decisions regarding the establishment, administration, and modification of the database must be made by an advisory board. The membership of the advisory board must include the director of the department or a designee of the director and representatives of health carriers, consumers, and purchasers.</p> <p>(d) The data aggregator must receive health care claims information from, without limitation, commercial health carriers, nonprofit health care corporations, health maintenance organizations, and third party administrators that process claims under a service contract.</p> <p>(e) The data aggregator must use existing data sources and technological infrastructure, to the extent possible.</p>	Delete current law.		Delete current law.
<p><b><i>Payments to Indian or Tribal Facilities for Medical Services</i></b></p> <p><b>Sec. 1145.</b> The department will take steps necessary to assure that Indian Health Service, Tribal or Urban Indian Health Program facilities that provide services under a contract with a Medicaid managed care entity receive the maximum amount allowable under federal law for Medicaid services.</p>	Delete current law.		Delete current law.



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	EXECUTIVE	SENATE	HOUSE
<p><b><i>Bone Marrow Donor Transplant Registry Tissue Typing</i></b></p> <p><b>Sec. 1146.</b> From the funds appropriated in part 1 for bone marrow transplant registry, \$250,000.00 shall be allocated to Michigan Blood, the partner of the match registry of the national marrow donor program. The funds shall be used to offset ongoing tissue typing expenses associated with donor recruitment and collection services and to expand those services to better serve the citizens of this state.</p>	<p><b>Sec. 1146.</b> No changes from current law.</p>		<p>Delete current law.</p>
<p><b><u>EPIDEMIOLOGY AND INFECTIOUS DISEASE</u></b></p> <p><b><i>Lead Abatement</i></b></p> <p><b>Sec. 1180.</b> From the funds appropriated in part 1 for the healthy homes program, no less than \$1,750,000.00 shall be allocated for lead abatement of homes.</p>	<p><b><u>DISEASE CONTROL, PREVENTION, AND EPIDEMIOLOGY AND INFECTIOUS DISEASE</u></b></p> <p><b>Sec. 1180.</b> No changes from current law.</p>		<p><b><u>DISEASE CONTROL, PREVENTION, AND EPIDEMIOLOGY AND INFECTIOUS DISEASE</u></b></p> <p><b>Sec. 1180. (1)</b> No changes from current law, except add "(1)".</p>



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			(2) BY JANUARY 1 OF THE CURRENT FISCAL YEAR, THE DEPARTMENT SHALL PROVIDE A REPORT TO THE HOUSE AND SENATE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET, THE HOUSE AND SENATE FISCAL AGENCIES, AND THE STATE BUDGET DIRECTOR ON THE EXPENDITURES AND ACTIVITIES UNDERTAKEN BY THE LEAD ABATEMENT PROGRAM IN THE PREVIOUS FISCAL YEAR FROM THE FUNDS APPROPRIATED IN PART 1 FOR THE HEALTHY HOMES PROGRAM. THE REPORT SHALL INCLUDE, BUT IS NOT LIMITED TO, A FUNDING ALLOCATION SCHEDULE, EXPENDITURES BY CATEGORY OF EXPENDITURE AND BY SUBCONTRACTOR, REVENUES RECEIVED, DESCRIPTION OF PROGRAM ELEMENTS, AND DESCRIPTION OF PROGRAM ACCOMPLISHMENTS AND PROGRESS.
<p><b><i>Childhood and Adolescent Immunization Rates</i></b></p> <p><b>Sec. 1181.</b> The department shall implement a plan designed to improve Michigan's childhood and adolescent immunization rates. The department shall engage organizations working to provide immunizations and education about the value of vaccines, including, but not limited to, statewide organizations representing health care providers, local public health departments, child health interest groups, and private foundations with a mission to increase immunization rates.</p>	<p><b>Sec. 1181.</b> No changes from current law.</p>		Delete current law.





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FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Immunization Vaccine Education</i></b></p> <p><b>Sec. 1182.</b> From the funds appropriated in part 1 for immunization programs, for every \$4.00 in private matching funds received, this state shall allocate \$1.00, up to \$500,000.00 in state contributions, to provide and promote education about the value of vaccines for infants and toddlers.</p>	<p><b>Sec. 1182.</b> No changes from current law.</p>		<p>Delete current law.</p>
<p><b><u>LOCAL HEALTH ADMINISTRATION AND GRANTS</u></b></p> <p><b><i>Reimbursement of Local Costs Related to Informed Consent Law</i></b></p> <p><b>Sec. 1220.</b> The amount appropriated in part 1 for implementation of the 1993 additions of or amendments to sections 9161, 16221, 16226, 17014, 17015, and 17515 of the public health code, 1978 PA 368, MCL 333.9161, 333.16221, 333.16226, 333.17014, 333.17015, and 333.17515, shall be used to reimburse local health departments for costs incurred related to implementation of section 17015(18) of the public health code, 1978 PA 368, MCL 333.17015.</p>	<p><del>LOCAL HEALTH ADMINISTRATION AND GRANTS</del> <b><u>AND ADMINISTRATIVE SERVICES</u></b></p> <p><b>Sec. 1220.</b> No changes from current law</p>		<p><del>LOCAL HEALTH ADMINISTRATION AND GRANTS</del> <b><u>AND GRANTS AND ADMINISTRATIVE SERVICES</u></b></p> <p><b>Sec. 1220.</b> No changes from current law</p>
<p><b><i>Penalty for Dissolution of Multi-County Local Health Department</i></b></p> <p><b>Sec. 1221.</b> If a county that has participated in a district health department or an associated arrangement with other local health departments takes action to cease to participate in such an arrangement after October 1 of the current fiscal year, the department shall have the authority to assess a penalty from the local health department's operational accounts in an amount equal to no more than 6.25% of the local health department's essential local public health services funding. This penalty shall only be assessed to the local county that requests the dissolution of the health department.</p>	<p><b>Sec. 1221.</b> No changes from current law.</p>		<p><b>Sec. 1221.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Public Health Administration

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Essential Local Public Health Services</b></p> <p><b>Sec. 1222.</b> (1) Funds appropriated in part 1 for essential local public health services shall be prospectively allocated to local health departments to support immunizations, infectious disease control, sexually transmitted disease control and prevention, hearing screening, vision services, food protection, public water supply, private groundwater supply, and on-site sewage management. Food protection shall be provided in consultation with the department of agriculture and rural development. Public water supply, private groundwater supply, and on-site sewage management shall be provided in consultation with the department of environmental quality.</p>	<p><b>Sec. 1222.</b> (1) No changes from current law.</p>		<p><b>Sec. 1222.</b> (1) No changes from current law.</p>
<p>(2) Local public health departments shall be held to contractual standards for the services in subsection (1).</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p>(3) Distributions in subsection (1) shall be made only to counties that maintain local spending in the current fiscal year of at least the amount expended in fiscal year 1992-1993 for the services described in subsection (1).</p>	<p>(3) No changes from current law.</p>		<p>(3) No changes from current law.</p>
			<p><b>(4) BY DECEMBER 1 OF THE CURRENT FISCAL YEAR, THE DEPARTMENT SHALL PROVIDE A REPORT TO THE HOUSE AND SENATE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET, THE HOUSE AND SENATE FISCAL AGENCIES, AND THE STATE BUDGET DIRECTOR ON THE PLANNED ALLOCATION OF THE FUNDS APPROPRIATED FOR ESSENTIAL LOCAL PUBLIC HEALTH SERVICES.</b></p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Public Health Administration

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
	<p><i>Moved from Sec. 1305 and revised (2)</i></p> <p><b>Sec. 4305- 1223.</b> (1) From the amounts appropriated in part 1 for dental programs, funds shall be allocated to the Michigan Dental Association for the administration of a volunteer dental program that provides dental services to the uninsured.</p>		<p><i>Moved from Sec. 1305 and revised.</i></p> <p><b>Sec. 4305- 1223.</b> (1) From the amounts <del>FUNDS</del> appropriated in part 1 for dental programs, <del>funds \$150,000.00</del> shall be allocated to the Michigan Dental Association for the administration of a volunteer dental program that provides dental services to the uninsured.</p>
	<p>(2) Not later than December 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget <del>and</del>, the senate and house standing committees on health policy <b>AND THE STATE BUDGET OFFICE</b> the number of individual patients treated, number of procedures performed, and approximate total market value of those procedures from the immediately preceding fiscal year.</p>		<p>(2) Not later than December 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget <del>and</del>, the senate and house standing committees on health policy, <b>THE SENATE AND HOUSE FISCAL AGENCIES, AND THE STATE BUDGET OFFICE</b> the number of individual patients treated, number of procedures performed, and approximate total market value of those procedures from the immediately preceding fiscal year.</p>
	<p><i>Moved from Sec. 1306; no changes from current law.</i></p> <p><b>Sec. 4306- 1224.</b> The department shall use revenue from mobile dentistry facility permit fees received under section 21605 of the public health code, 1978 PA 368, MCL 333.21605, to offset the cost of the permit program.</p>		<p><i>Moved from Sec. 1306; no changes from current law.</i></p> <p><b>Sec. 4306- 1224.</b> The department shall use revenue from mobile dentistry facility permit fees received under section 21605 of the public health code, 1978 PA 368, MCL 333.21605, to offset the cost of the permit program.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Public Health Administration

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
			<p><i>Moved from Sec. 1101. No changes from current law.</i></p> <p><b>Sec. 4404- 1225.</b> The department shall work with the Michigan health endowment fund corporation established under section 653 of the nonprofit health care corporation reform act, 1980 PA 350, MCL 550.1653, to explore ways to fund and evaluate current and future policies and programs.</p>
			<p><i>Moved from Sec. 1102. No changes from current law.</i></p> <p><b>Sec. 4402- 1226.</b> From the funds appropriated in part 1 for health and wellness initiatives, \$1,000,000.00 shall be allocated for a school children’s healthy exercise program to promote and advance physical health for school children in kindergarten through grade 8. The department shall recommend model programs for sites to implement that incorporate evidence-based best practices. The department shall grant no less than 1/2 of the funds appropriated in part 1 for before- and after-school programs. The department shall establish guidelines for program sites, which may include schools, community-based organizations, private facilities, recreation centers, or other similar sites. The program format shall encourage local determination of site activities and shall encourage local inclusion of youth in the decision-making regarding site activities. Program goals shall include children experiencing improved physical health and access to physical activity opportunities, the reduction of obesity, providing a safe place to play and exercise, and nutrition education. To be eligible to participate, program sites shall provide a 20% match to the state funding, which may be provided in full, or in part, by a corporation, foundation, or private partner. The department shall seek financial support from corporate, foundation, or other private partners for the program or for individual program sites.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Public Health Administration

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
			<p><i>Moved from Sec. 1103. No changes from current law.</i></p> <p><b>Sec. 4403. 1227.</b> The department shall establish criteria for all funds allocated under part 1 for health and wellness initiatives. The criteria must include a requirement that all programs funded be evidence-based and supported by research, include interventions that have been shown to demonstrate outcomes that lower cost and improve quality, and be designed for statewide impact. Preference must be given to programs that utilize the funding as match for additional resources including, but not limited to, federal sources.</p>
<p><b><u>CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION</u></b></p> <p><b><i>Alzheimer's Disease In-Home Care Support Services Pilot Program</i></b></p> <p><b>Sec. 1260.</b> From the funds appropriated in part 1 for Alzheimer's disease in-home care pilot, \$150,000.00 is appropriated for Alzheimer's disease services and shall be remitted to the Alzheimer's association-Michigan chapters for the purpose of carrying out a pilot project in Macomb, Monroe, and St. Joseph Counties. The fiduciary for the funds is the Alzheimer's association-greater Michigan chapter. The Alzheimer's association shall provide enhanced services, including 24/7 helpline, continued care consultation, and support groups, to individuals with Alzheimer's disease or dementia and their families in the 3 counties, and partner with a Michigan public university to study whether provision of such in-home support services significantly delays the need for residential long-term care services for individuals with Alzheimer's disease or dementia. The study must also consider potential cost savings related to the delay of long-term care services, if a delay is shown.</p>	<p><del>CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION</del></p> <p><b>Sec. 1260.</b> <i>Moved to Sec. 1424.; no changes from current law.</i></p>		<p><del>CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION</del></p> <p>Delete current law.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Public Health Administration

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><u>FAMILY, MATERNAL, AND CHILDREN'S HEALTH SERVICES</u></b></p> <p><b><i>Report of Sexual and Maternal Health Demographics and Expenditures by Marital Status</i></b></p> <p><b>Sec. 1300.</b> By January 3 of the current fiscal year the department shall annually issue to the legislature, and to the public on the Internet, a report providing estimated public funds administered by the department for family planning, sexually transmitted infection prevention and treatment, and pregnancies and births, as well as demographics collected by the department as voluntarily self-reported by individuals utilizing those services. The department shall provide the actual expenditures by marital status or, where actual expenditures are not available, shall provide estimated expenditures by marital status. The department may utilize the DCH-1426 application for health coverage and help paying costs or any other official application for public assistance for medical coverage to determine the actual or estimated public expenditures based on marital status.</p>	<p><u>FAMILY, MATERNAL, AND CHILDREN'S HEALTH SERVICES</u></p> <p>Delete current law.</p>		<p><u>FAMILY, MATERNAL, AND CHILDREN'S HEALTH SERVICES</u></p> <p><b>Sec. 1300.</b> <del>By January 3 of the current fiscal year the</del> <b>THE</b> department shall <del>annually issue to the legislature, and to the public on the Internet, a report</del> <b>provide MONITOR</b> estimated public funds administered by the department for family planning, sexually transmitted infection prevention and treatment, and pregnancies and births, as well as demographics collected by the department as voluntarily self-reported by individuals utilizing those services. The department shall <del>provide</del> <b>MONITOR</b> the actual expenditures by marital status or, where actual expenditures are not available, shall <del>provide</del> <b>MONITOR</b> estimated expenditures by marital status. The department may utilize the DCH-1426 application for health coverage and help paying costs or any other official application for public assistance for medical coverage to determine the actual or estimated public expenditures based on marital status. <b>THE DEPARTMENT SHALL PROVIDE THIS INFORMATION UPON REQUEST OF THE LEGISLATURE.</b></p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Public Health Administration

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Report Regarding Pregnancy Planning, Prenatal, and Maternal and Child Health Programs</b></p> <p><b>Sec. 1301.</b> (1) Before April 1 of the current fiscal year, the department shall submit a report to the house and senate fiscal agencies and the state budget director on planned allocations from the amounts appropriated in part 1 for local MCH services, prenatal care outreach and service delivery support, family planning local agreements, and pregnancy prevention programs. Using applicable federal definitions, the report shall include information on all of the following:</p> <p>(a) Funding allocations.</p> <p>(b) Actual number of women, children, and adolescents served and amounts expended for each group for the immediately preceding fiscal year.</p> <p>(c) A breakdown of the expenditure of these funds between urban and rural communities.</p>	Delete current law.		<p><b>Sec. 1301.</b> (1) No changes from current law.</p>
<p>(2) The department shall ensure that the distribution of funds through the programs described in subsection (1) takes into account the needs of rural communities.</p>	Delete current law.		<p>(2) No changes from current law.</p>
<p>(3) For the purposes of this section, "rural" means a county, city, village, or township with a population of 30,000 or less, including those entities if located within a metropolitan statistical area.</p>	Delete current law.		<p>(3) No changes from current law.</p>
<p><b>Family Planning Federal Title X Funding Compliance</b></p> <p><b>Sec. 1302.</b> Each family planning program receiving federal title X family planning funds under 42 USC 300 to 300a-8 shall be in compliance with all performance and quality assurance indicators that the office of population affairs within the United States Department of Health and Human Services specifies in the program guidelines for project grants for family planning services. An agency not in compliance with the indicators shall not receive supplemental or reallocated funds.</p>	<b>Sec. 1302.</b> No changes from current law.		<p><b>Sec. 1302.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Public Health Administration

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Contract Restrictions for Family Planning Local Agreements with State Funds</i></b></p> <p><b>Sec. 1303.</b> The department shall not contract with an organization which provides elective abortions, abortion counseling, or abortion referrals, for services that are to be funded with state restricted or state general fund/general purpose funds appropriated in part 1 for family planning local agreements. An organization under contract with the department shall not subcontract with an organization which provides elective abortions, abortion counseling, or abortion referrals, for services that are to be funded with state restricted or state general fund/general purpose funds appropriated in part 1 for family planning local agreements.</p>	<p><b>Sec. 1303.</b> No changes from current law.</p>		<p><b>Sec. 1303.</b> No changes from current law.</p>
<p><b><i>Prohibit Use of State Funds for Abortion Counseling, Referrals, or Services</i></b></p> <p><b>Sec. 1304.</b> The department shall not use state restricted funds or state general funds appropriated in part 1 in the pregnancy prevention program or family planning local agreements appropriation line items for abortion counseling, referrals, or services.</p>	<p><b>Sec. 1304.</b> The department shall not use state restricted funds or state general funds appropriated in part 1 in the pregnancy prevention program or family planning local agreements appropriation line items for abortion counseling, referrals, or services.</p>		<p><b>Sec. 1304.</b> No changes from current law.</p>
<p><b><i>Volunteer Dental Services Program for the Uninsured</i></b></p> <p><b>Sec. 1305.</b> (1) From the amounts appropriated in part 1 for dental programs, funds shall be allocated to the Michigan Dental Association for the administration of a volunteer dental program that provides dental services to the uninsured.</p>	<p><b>Sec. <del>1305</del>.</b> (1) Moved to <b>Sec. 1223</b>; no changes from current law.</p>		<p><b>Sec. <del>1305</del>.</b> (1) Moved to <b>Sec. 1223</b>; with revisions.</p>





# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Public Health Administration

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>(2) Not later than December 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget and the senate and house standing committees on health policy the number of individual patients treated, number of procedures performed, and approximate total market value of those procedures from the immediately preceding fiscal year.</p>	<p>(2) <i>Moved to Sec. 1223; with revisions.</i></p>		<p>(2) <i>Moved to Sec. 1223; with revisions.</i></p>
<p><b><i>Use of Mobile Dentistry Facility Permit Fee Revenue</i></b></p> <p><b>Sec. 1306.</b> The department shall use revenue from mobile dentistry facility permit fees received under section 21605 of the public health code, 1978 PA 368, MCL 333.21605, to offset the cost of the permit program.</p>	<p><b>Sec. 1306.</b> <i>Moved to Sec. 1224; no changes from current law.</i></p>		<p><b>Sec. 1306.</b> <i>Moved to Sec. 1224; no changes from current law.</i></p>
<p><b><i>Alternative Pregnancy and Parenting Support Services Program</i></b></p> <p><b>Sec. 1307.</b> From the funds appropriated in part 1 for prenatal care outreach and service delivery support, \$50,000.00 shall be allocated for a pregnancy and parenting support services program, which program must promote childbirth, alternatives to abortion, and grief counseling. The department shall establish a program with a qualified contractor that will contract with qualified service providers to provide free counseling, support, and referral services to eligible women during pregnancy through 12 months after birth. As appropriate, the goals for client outcomes shall include an increase in client support, an increase in childbirth choice, an increase in adoption knowledge, an improvement in parenting skills, and improved reproductive health through abstinence education. The contractor of the program shall provide for program training, client educational material, program marketing, and annual service provider site monitoring. The department shall submit a report to the house and senate appropriations subcommittees on the department budget and the house and senate fiscal agencies by April 1 of the current fiscal year on the number of clients served.</p>	<p>Delete current law.</p>		<p><b>Sec. 1307. (1)</b> From the funds appropriated in part 1 for prenatal care outreach and service delivery support, <del>\$50,000.00</del> <b>\$400,000.00</b> shall be allocated for a pregnancy and parenting support services program, which program must promote childbirth, alternatives to abortion, and grief counseling. ...</p> <p>(Remainder of section - no changes from current law)</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Public Health Administration

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
			<p>(2) UNEXPENDED FUNDS APPROPRIATED IN PART 1 TO PAY FOR THE PREGNANCY AND PARENTING SUPPORT PROGRAM DESCRIBED IN SUBSECTION (1) ARE DESIGNATED AS WORK PROJECT APPROPRIATIONS, AND ANY UNENCUMBERED OR UNALLOTTED FUNDS SHALL NOT LAPSE AT THE END OF THE FISCAL YEAR AND SHALL BE AVAILABLE FOR EXPENDITURES FOR THE PREGNANCY AND PARENTING SUPPORT PROGRAM UNDER THIS SECTION UNTIL THE PROJECT HAS BEEN COMPLETED. ALL OF THE FOLLOWING ARE IN COMPLIANCE WITH SECTION 451A OF THE MANAGEMENT AND BUDGET ACT, 1984 PA 431, MCL 18.1451A:</p> <p>(A) THE PURPOSE OF THE PROJECT IS TO PROVIDE PREGNANCY AND PARENTING SUPPORT SERVICES, AND THE PROGRAM MUST PROMOTE CHILDBIRTH, ALTERNATIVES TO ABORTION, AND GRIEF COUNSELING.</p> <p>(B) THE PROJECT WILL BE CARRIED OUT THROUGH A CONTRACT WITH A QUALIFIED CONTRACTOR THAT WILL CONTRACT WITH QUALIFIED SERVICE PROVIDERS TO PROVIDE FREE COUNSELING, SUPPORT, AND REFERRAL SERVICES TO ELIGIBLE WOMEN DURING PREGNANCY THROUGH 12 MONTHS AFTER BIRTH.</p> <p>(C) THE ESTIMATED COST OF THIS WORK PROJECT IS \$400,000.00.</p> <p>(D) THE ESTIMATED WORK PROJECT COMPLETION DATE IS SEPTEMBER 30, 2021.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Public Health Administration

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Enhanced Nurse Family Partnership Program Support</i></b></p> <p><b>Sec. 1308.</b> From the funds appropriated in part 1 for prenatal care outreach and service delivery support, not less than \$500,000.00 of funding shall be allocated for evidence-based programs to reduce infant mortality including nurse family partnership programs. The funds shall be used for enhanced support and education to nursing teams or other teams of qualified health professionals, client recruitment in areas designated as underserved for obstetrical and gynecological services and other high-need communities, strategic planning to expand and sustain programs, and marketing and communications of programs to raise awareness, engage stakeholders, and recruit nurses.</p>	<p><b>Sec. 1308.</b> No changes from current law.</p>		<p><b>Sec. 1308.</b> No changes from current law.</p>
<p><b><i>Maternal and Child Health Contractual Services</i></b></p> <p><b>Sec. 1309.</b> The department shall allocate funds appropriated in section 119 of part 1 for family, maternal, and children's health services pursuant to section 1 of 2002 PA 360, MCL 333.1091.</p>	<p><b>Sec. 1309.</b> The department shall allocate funds appropriated in section 119 of part 1 for family, maternal, and children's <b>CHILD</b> health services pursuant to section 1 of 2002 PA 360, MCL 333.1091.</p>		<p><b>Sec. 1309.</b> The department shall allocate funds appropriated in section <del>119</del> <b>117</b> of part 1 for family, maternal, and children's <b>CHILD</b> health services pursuant <b>ACCORDING</b> to section 1 of 2002 PA 360, MCL 333.1091.</p>
<p><b><i>Housing Rehabilitation and Hazard Abatement Program Task Force</i></b></p> <p><b>Sec. 1310.</b> The department shall continue to work jointly with the Michigan state housing development authority and the joint task force established under article IV of 2014 PA 252 to review housing rehabilitation, energy and weatherization, and hazard abatement program policies and to make recommendations for integrating and coordinating project delivery with the goals of serving more families and achieving better outcomes by maximizing state and federal resources. The joint task force may provide recommendations to the department. Recommendations of the joint task force must give consideration to best practices and cost effectiveness.</p>	<p><b>Sec. 1310.</b> No changes from current law.</p>		<p><b>Sec. 1310.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Public Health Administration

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Rural Home Visitation Service Provider Contracting</i></b></p> <p><b>Sec. 1311.</b> From the funds appropriated in part 1 for prenatal care outreach and service delivery support, equal consideration shall be given to all eligible evidence-based providers in all regions in contracting for rural health visitation services.</p>	Delete current law.		<p><b>Sec. 1311.</b> From the funds appropriated in part 1 for prenatal care outreach and service delivery support, equal consideration shall be given to all eligible evidence-based providers in all regions in contracting for rural <del>health</del> <b>HOME</b> visitation services.</p>
<p><b><i>Rural Home Visitation Program Work Project</i></b></p> <p><b>Sec. 1312.</b> The department shall spend any available work project money to enhance services provided under the rural home visitation program.</p>	Delete current law.		Delete current law.
	<p><i>Moved from <b>Sec. 1002</b>; no changes from current law.</i></p> <p><b>Sec. <del>4002</del>. 1313.</b> (1) The department shall continue developing an outreach program on fetal alcohol syndrome services.</p> <p>(2 ) The department shall explore federal grant funding to address prevention services for fetal alcohol syndrome and reduce alcohol consumption among pregnant women.</p>		<p><i>Moved from <b>Sec. 1002</b>; with revisions.</i></p> <p><b>Sec. <del>4002</del>. 1313.</b> (1) The department shall continue developing an outreach program on fetal alcohol syndrome services, <b>TARGETING HEALTH PROMOTION, PREVENTION, AND INTERVENTION AS DESCRIBED IN THE MICHIGAN FETAL ALCOHOL SPECTRUM DISORDERS FIVE YEAR PLAN 2015-2020.</b></p> <p>(2 ) The department shall explore federal grant funding to address prevention services for fetal alcohol syndrome and reduce alcohol consumption among pregnant women.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Public Health Administration

FY 2015-16 CURRENT LAW	FY 2016-2017	
	EXECUTIVE	SENATE
<p><u>WOMEN, INFANTS, AND CHILDREN FOOD AND NUTRITION PROGRAM</u></p> <p><b><i>Lowest Price Product Choice by WIC Participants</i></b></p> <p><b>Sec. 1340.</b> The women, infants, and children special supplemental food and nutrition program shall encourage participants to choose the lowest price product available at the time of purchase. All products must satisfy nutritional requirements of the federal program. The biannual food authorization guidelines will be updated to reflect these changes.</p>	<p><u>WOMEN, INFANTS, AND CHILDREN FOOD AND NUTRITION PROGRAM</u></p> <p>Delete current law.</p>	<p><u>WOMEN, INFANTS, AND CHILDREN FOOD AND NUTRITION PROGRAM</u></p> <p><b>Sec. 1340.</b> <del>The</del> <b>FOR THE</b> women, infants, and children special supplemental food and nutrition program, <b>THE DEPARTMENT</b> shall <del>encourage</del> participants to choose the lowest price product available at the time of purchase. All products must satisfy <b>MAKE NATIONAL BRAND PRODUCTS AVAILABLE IF IT IS DETERMINED BY THE DEPARTMENT THAT THE PRICE PER UNIT IS MORE COST EFFECTIVE AND SATISFIES</b> nutritional requirements of the federal program. The <b>DETERMINATION MUST BE MADE DURING THE</b> biannual food authorization <del>EVALUATION</del> guidelines will be updated to reflect these changes.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Children's Special Health Care

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><u>CHILDREN'S SPECIAL HEALTH CARE SERVICES</u></b></p> <p><i>Children's Special Health Care Services Coverage</i></p> <p><b>Sec. 1360.</b> The department may do 1 or more of the following:</p> <p>(a) Provide special formula for eligible clients with specified metabolic and allergic disorders.</p> <p>(b) Provide medical care and treatment to eligible patients with cystic fibrosis who are 21 years of age or older.</p> <p>(c) Provide medical care and treatment to eligible patients with hereditary coagulation defects, commonly known as hemophilia, who are 21 years of age or older.</p> <p>(d) Provide human growth hormone to eligible patients.</p>	<p><b>Sec. 1360.</b> No changes from current law.</p>	<p><b>Sec. 1360.</b> No changes from current law.</p>	<p><b>Sec. 1360.</b> No changes from current law.</p>



**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Boilerplate for Children's Special Health Care**

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><i>Expansion of Telemedicine Capacity</i></p> <p><b>Sec. 1361.</b> From the funds appropriated in part 1 for medical care and treatment, the department is authorized to spend those funds for the continued development and expansion of telemedicine capacity to allow families with children in the children's special health care services program to access specialty providers more readily and in a more timely manner.</p>	<p><b>Sec. 1361.</b> No changes from current law.</p>		<p><b>Sec. 1361.</b> No changes from current law.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Crime Victim Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><u>CRIME VICTIM SERVICES COMMISSION</u></b></p> <p><i>Allocation of Funds for Forensic Nurse Examiner Programs</i></p> <p><b>Sec. 1380.</b> From the funds appropriated in part 1 for justice assistance grants, the department shall continue to support forensic nurse examiner programs to facilitate training for improved evidence collection for the prosecution of sexual assault. The funds shall be used for program coordination and training.</p>	<p><del>CRIME VICTIM SERVICES COMMISSION</del></p> <p>Delete current law.</p>		<p><del>CRIME VICTIM SERVICES COMMISSION</del></p> <p><i>Retained and moved to <b>Sec. 451.</b></i></p>





# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Aging and Adult Services Agency

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><u>AGING AND ADULT SERVICES AGENCY</u></b></p> <p><b><i>Home-Delivered Meals Waiting Lists</i></b></p> <p><b>Sec. 1403.</b> (1) By February 1 of the current fiscal year, the aging and adult services agency shall require each region to report to the aging and adult services agency and to the legislature home-delivered meals waiting lists based upon standard criteria. Determining criteria shall include all of the following:</p> <p>(a) The recipient’s degree of frailty.            (b) The recipient’s inability to prepare his or her own meals safely.            (c) Whether the recipient has another care provider available.            (d) Any other qualifications normally necessary for the recipient to receive home-delivered meals.</p>	<p><b>Sec. 1403.</b> (1) No changes from current law.</p>		<p><b>Sec. 1403.</b> (1) No changes from current law.</p>
<p>(2) Data required in subsection (1) shall be recorded only for individuals who have applied for participation in the home-delivered meals program and who are initially determined as likely to be eligible for home-delivered meals.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p><b><i>Reporting of Area Agency on Aging Allocations and Expenditures</i></b></p> <p><b>Sec. 1417.</b> The department shall provide to the senate and house appropriations subcommittees on the department budget, senate and house fiscal agencies, and state budget director a report by March 30 of the current fiscal year that contains all of the following:</p> <p>(a) The total allocation of state resources made to each area agency on aging by individual program and administration.            (b) Detail expenditure by each area agency on aging by individual program and administration including both state-funded resources and locally-funded resources.</p>	<p><b>Sec. 1417.</b> No changes from current law.</p>		<p><b>Sec. 1417.</b> No changes from current law.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Aging and Adult Services Agency

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Allocation of \$1.1 Million for Locally-Determined Needs</b></p> <p><b>Sec. 1421.</b> From the funds appropriated in part 1 for community services, \$1,100,000.00 shall be allocated to area agencies on aging for locally determined needs.</p>	<p><b>Sec. 1421.</b> No changes from current law.</p>		<p><b>Sec. 1421.</b> No changes from current law.</p>
<p><b>Elder Abuse Prosecuting Attorney Contract</b></p> <p><b>Sec. 1422.</b> (1) From the funds appropriated in part 1 for aging and adult services administration, the department shall contract with the Prosecuting Attorneys Association of Michigan to provide the support and services necessary to increase the capability of the state's prosecutors, adult protective service system, and criminal justice system to effectively identify, investigate, and prosecute elder abuse and financial exploitation.</p>	<p><b>Sec. 1422.</b> (1) No changes from current law.</p>		<p><b>Sec. 1422.</b> (4) From the funds appropriated in part 1 for aging and adult services administration, <b>NOT LESS THAN \$300,000.00 SHALL BE ALLOCATED FOR</b> the department <del>shall</del> <b>TO</b> contract with the Prosecuting Attorneys Association of Michigan to provide the support and services necessary to increase the capability of the state's prosecutors, adult protective service system, and criminal justice system to effectively identify, investigate, and prosecute elder abuse and financial exploitation.</p>
<p>(2) By March 1 of the current fiscal year, the Prosecuting Attorneys Association of Michigan shall provide a report on the efficacy of the contract to the state budget office, the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices.</p>	<p>(2) Delete current law.</p>		<p>(2) Delete current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Aging and Adult Services Agency

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Michigan MiCAFE Contract</b></p> <p><b>Sec. 1423.</b> From the funds appropriated in part 1 for Elder Law of Michigan MiCAFE contract, the department shall allocate not less than \$350,000.00 to the Elder Law of Michigan MiCAFE to assist this state's elderly population to participate in the food assistance program. Of the \$350,000.00 allocated under this section, the department shall use \$175,000.00, which are general fund/general purpose funds, as state matching funds for not less than \$175,000.00 in United States Department of Agriculture funding to provide outreach program activities, such as eligibility screen and information services, as part of a statewide food assistance hotline.</p>	<p><b>Sec. 1423.</b> No changes from current law.</p>		<p><i>Retained and moved to <b>Sec. 807</b> with revisions.</i></p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><u>MEDICAL SERVICES ADMINISTRATION</u></b></p> <p><b><i>Electronic Health Records Incentive Program Work Project Authorization</i></b></p> <p><b>Sec. 1501.</b> The unexpended funds appropriated in part 1 for the electronic health records incentive program are considered work project appropriations, and any unencumbered or unallotted funds are carried forward into the following fiscal year. The following is in compliance with section 451a(1) of the management and budget act, 1984 PA 431, MCL 18.1451a:</p> <p>(a) The purpose of the project to be carried forward is to implement the Medicaid electronic health record program that provides financial incentive payments to Medicaid health care providers to encourage the adoption and meaningful use of electronic health records to improve quality, increase efficiency, and promote safety.</p> <p>(b) The projects will be accomplished according to the approved federal advanced planning document.</p> <p>(c) The estimated cost of this project phase is identified in the appropriation line item.</p> <p>(d) The tentative completion date for the work project is September 30, 2020.</p>	<p><b>Sec. 1501.</b> No changes from current law.</p>	<p><b>Sec. 1501.</b> No changes from current law except year change in subdivision (d):</p> <p>(d) The tentative completion date for the work project is September 30, <del>2020</del><b>2021</b>.</p>	<p><b>Sec. 1501.</b> No changes from current law except year change in subdivision (d):</p> <p>(d) The tentative completion date for the work project is September 30, <del>2020</del><b>2021</b>.</p>
<p><b><i>Transparency Database Website Creation</i></b></p> <p><b>Sec. 1502.</b> The department shall spend available work project revenue and any associated federal match to create and develop a transparency database website. This funding is contingent upon enactment of enabling legislation.</p>	<p>Striking current law.</p>	<p>Striking current law.</p>	<p>Striking current law.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Healthy Michigan Plan Administration</i></b></p> <p><b>Sec. 1503.</b> From the funds appropriated in part 1 for Healthy Michigan plan administration, the department shall maintain an accounting structure within the Michigan administrative information network that will allow expenditures associated with the administration of the Healthy Michigan plan to be identified.</p>	<p><b>Sec.1503.</b> No changes from current law.</p>		<p><b>Sec.1503.</b> No changes from current law.</p>
<p><b><i>Report on Office of Inspector General and Third Party Liability Savings</i></b></p> <p><b>Sec. 1505.</b> By March 1 and September 1 of the current fiscal year, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office including both of the following:</p> <p>(a) The department's projected annual increase in reimbursement savings and cost offsets that will result from the additional funds appropriated in part 1 for the office of inspector general and third party liability efforts.</p> <p>(b) The actual increase in reimbursement savings and cost offsets that have resulted from the additional funds appropriated in part 1 for the office of inspector general and third party liability efforts.</p>	<p><b>Sec. 1505.</b> By March 1 and September 1 of the current fiscal year, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office including both of the following:</p> <p>(a) The department's projected annual increase in reimbursement savings and cost offsets that will result from the <del>additional</del> funds appropriated in part 1 for the office of inspector general and third party liability efforts.</p> <p>(b) The actual increase in reimbursement savings and cost offsets that have resulted from the <del>additional</del> funds appropriated in part 1 for the office of inspector general and third party liability efforts.</p>		<p><b>Sec. 1505.</b> Concur with Executive.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Report on Healthy Michigan Plan Call Center</b></p> <p><b>Sec. 1506.</b> The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a quarterly report on the implementation status of the Healthy Michigan call center that includes all of the following information:</p> <p>(a) Call volume during the prior quarter.            (b) Percentage of calls resolved through the Healthy Michigan plan call center.            (c) Percentage of calls transferred to a local department office or other office for resolution.            (d) Number of Medicaid applications completed by the Healthy Michigan call center staff and submitted on behalf of clients.</p>	<p>Striking current law.</p>		<p><b>Sec. 1506.</b> No changes to current law.</p>
<p><b>Sec. 1506.</b> (1) New Executive Language.</p>	<p><b>SEC. 1506. (1) FROM THE FUNDS APPROPRIATED IN PART 1 FOR TECHNOLOGY SUPPORTING INTEGRATED SERVICE DELIVERY, THE DEPARTMENT SHALL ESTABLISH NEW INFORMATION TECHNOLOGY TOOLS AND ENHANCE EXISTING SYSTEMS TO IMPROVE THE ELIGIBILITY AND ENROLLMENT PROCESS FOR CITIZENS ACCESSING DEPARTMENT ADMINISTERED PROGRAMS. THIS INFORMATION TECHNOLOGY SYSTEM WILL CONSOLIDATE BENEFICIARY INFORMATION, SUPPORT DEPARTMENT CASEWORKER EFFORTS IN BUILDING A SUCCESS PLAN FOR BENEFICIARIES AND BETTER SUPPORT DEPARTMENT STAFF IN SUPPORTING ENROLLEES IN ASSISTANCE PROGRAMS.</b></p>		<p><b>Sec. <del>1506</del>-1507.</b> (1) FROM THE FUNDS APPROPRIATED IN PART 1 FOR TECHNOLOGY SUPPORTING INTEGRATED SERVICE DELIVERY, THE DEPARTMENT SHALL ESTABLISH NEW INFORMATION TECHNOLOGY TOOLS AND ENHANCE EXISTING SYSTEMS TO IMPROVE THE ELIGIBILITY AND ENROLLMENT PROCESS FOR CITIZENS ACCESSING DEPARTMENT-ADMINISTERED PROGRAMS. THIS INFORMATION TECHNOLOGY SYSTEM WILL CONSOLIDATE BENEFICIARY INFORMATION, SUPPORT DEPARTMENT CASEWORKER EFFORTS IN BUILDING A SUCCESS PLAN FOR BENEFICIARIES, AND BETTER SUPPORT DEPARTMENT STAFF IN SUPPORTING ENROLLEES IN ASSISTANCE PROGRAMS.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
(2) New Executive Language.	<p>(2) OUTCOMES AND PERFORMANCE MEASURE FOR THE INITIATIVE UNDER SUBSECTION (1) INCLUDE, BUT ARE NOT LIMITED TO, THE FOLLOWING:</p> <p>(A) SUCCESSFUL CONSOLIDATION OF DATE WAREHOUSES MAINTAINED BY THE DEPARTMENT.</p> <p>(B) THE AMOUNT OF TIME A DEPARTMENT CASEWORKER DEVOTES TO DATE ENTRY WHEN INITIATING AN ENROLLEE APPLICATION.</p> <p>(C) A REDUCTION IN WAIT TIMES FOR PERSONS ENROLLED IN ASSISTANCE PROGRAMS TO SPEAKITH DEPARTMENT STAFF AND GET NECESSARY CHANGES MADE.</p> <p>(D) A REDUCTION IN DEPARTMENT CASEWORKER WORKLOAD</p>		<p>(2) OUTCOMES AND PERFORMANCE MEASURES FOR THE INITIATIVE UNDER SUBSECTION (1) INCLUDE, BUT ARE NOT LIMITED TO, THE FOLLOWING:</p> <p>(A) SUCCESSFUL CONSOLIDATION OF <del>DATE</del> <b>DATA</b> WAREHOUSES MAINTAINED BY THE DEPARTMENT.</p> <p>(B) THE AMOUNT OF TIME A DEPARTMENT CASEWORKER DEVOTES TO <del>DATE</del> <b>DATA</b> ENTRY WHEN INITIATING AN ENROLLEE APPLICATION.</p> <p>(C) A REDUCTION IN WAIT TIMES FOR PERSONS ENROLLED IN ASSISTANCE PROGRAMS TO SPEAKITH DEPARTMENT STAFF AND GET NECESSARY CHANGES MADE.</p> <p>(D) A REDUCTION IN DEPARTMENT CASEWORKER WORKLOAD</p>

**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Boilerplate for Medical Services**

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
(3) New House Language.			<p>(3) BY DECEMBER 1 OF THE CURRENT FISCAL YEAR, THE DEPARTMENT SHALL REPORT TO THE SENATE AND HOUSE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET AND THE SENATE AND HOUSE FISCAL AGENCIES ALL OF THE FOLLOWING INFORMATION:</p> <p>(A) THE PROCESS USED TO DEFINE REQUESTS FOR PROPOSAL FOR EACH ELEMENT OF THE INTEGRATED SERVICE DELIVERY PLAN, INCLUDING TIMELINES, PROJECT MILESTONES, AND INTENDED OUTCOMES.</p> <p>(B) IF THE DEPARTMENT DECIDES NOT TO CONTRACT THE SERVICES OUT TO DESIGN AND IMPLEMENT EACH ELEMENT OF THE INTEGRATED SERVICE DELIVERY PLAN, THE DEPARTMENT SHALL SUBMIT ITS OWN PROJECT PLAN, WHICH INCLUDES, AT A MINIMUM, THE REQUIREMENTS IN SUBDIVISION (A).</p> <p>(C) A RECOMMENDED PROJECT MANAGEMENT PLAN WITH MILESTONES AND TIME FRAMES.</p> <p>(D) THE PROPOSED BENEFITS FROM IMPLEMENTATING THE INTEGRATED SERVICE DELIVERY PLAN, INCLUDING CUSTOMER SERVICE IMPROVEMENT, FORM REDUCTIONS, POTENTIAL TIME SAVINGS, CASELOAD REDUCTION, AND RETURN ON INVESTMENT.</p>
(4) New House Language.			<p>(4) THE INFORMATION IN SUBSECTION (3)(D) SHALL BE POSTED ON THE DEPARTMENT'S WEBSITE.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><u>MEDICAL SERVICES</u></b></p> <p><b><i>Medicaid Eligibility Deduction for Remedial Services Costs</i></b></p> <p><b>Sec. 1601.</b> The cost of remedial services incurred by residents of licensed adult foster care homes and licensed homes for the aged shall be used in determining financial eligibility for the medically needy. Remedial services include basic self-care and rehabilitation training for a resident.</p>	<p><b>Sec. 1601.</b> No changes from current law.</p>		<p><b>Sec. 1601.</b> No changes from current law.</p>
<p><b><i>Medical Services Buy-In Program</i></b></p> <p><b>Sec. 1603.</b> (1) The department may establish a program for individuals to purchase medical coverage at a rate determined by the department.</p>	<p><b>Sec. 1603.</b> (1) No changes from current law.</p>		<p><b>Sec. 1603.</b> (1) No changes from current law.</p>
<p>(2) The department may receive and expend premiums for the buy-in of medical coverage in addition to the amounts appropriated in part 1.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p>(3) The premiums described in this section shall be classified as private funds.</p>	<p>(3) No changes from current law.</p>		<p>(3) No changes from current law.</p>
<p><b><i>Medicaid Protected Income Level</i></b></p> <p><b>Sec. 1605.</b> The protected income level for Medicaid coverage determined pursuant to section 106(1)(b)(iii) of the social welfare act, 1939 PA 280, MCL 400.106, shall be 100% of the related public assistance standard.</p>	<p><b>Sec. 1605.</b> No changes from current law.</p>		<p><b>Sec. 1605.</b> No changes from current law.</p>
<p><b><i>Medicaid Eligibility Deduction for Guardian and Conservator Charges</i></b></p> <p><b>Sec. 1606.</b> For the purpose of guardian and conservator charges, the department may deduct up to \$60.00 per month as an allowable expense against a recipient's income when determining medical services eligibility and patient pay amounts.</p>	<p><b>Sec. 1606.</b> No changes from current law.</p>		<p><b>Sec. 1606.</b> No changes from current law.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Medicaid Presumptive Eligibility for Pregnant Women</b></p> <p><b>Sec. 1607.</b> (1) An applicant for Medicaid, whose qualifying condition is pregnancy, shall immediately be presumed to be eligible for Medicaid coverage unless the preponderance of evidence in her application indicates otherwise. The applicant who is qualified as described in this subsection shall be allowed to select or remain with the Medicaid participating obstetrician of her choice.</p>	<p><b>Sec. 1607.</b> (1) No changes from current law.</p>		<p><b>Sec. 1607.</b> (1) No changes from current law.</p>
<p>(2) An applicant qualified as described in subsection (1) shall be given a letter of authorization to receive Medicaid covered services related to her pregnancy. All qualifying applicants shall be entitled to receive all medically necessary obstetrical and prenatal care without preauthorization from a health plan. All claims submitted for payment for obstetrical and prenatal care shall be paid at the Medicaid fee-for-service rate in the event a contract does not exist between the Medicaid participating obstetrical or prenatal care provider and the managed care plan. The applicant shall receive a listing of Medicaid physicians and managed care plans in the immediate vicinity of the applicant's residence.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p>(3) In the event that an applicant, presumed to be eligible pursuant to subsection (1), is subsequently found to be ineligible, a Medicaid physician or managed care plan that has been providing pregnancy services to an applicant under this section is entitled to reimbursement for those services until such time as they are notified by the department that the applicant was found to be ineligible for Medicaid.</p>	<p>(3) No changes from current law.</p>		<p>(3) No changes from current law.</p>
<p>(4) If the preponderance of evidence in an application indicates that the applicant is not eligible for Medicaid, the department shall refer that applicant to the nearest public health clinic or similar entity as a potential source for receiving pregnancy-related services.</p>	<p>(4) No changes from current law.</p>		<p>(4) No changes from current law.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
(5) The department shall develop an enrollment process for pregnant women covered under this section that facilitates the selection of a managed care plan at the time of application.	(5) No changes from current law.		(5) No changes from current law.
(6) The department shall mandate enrollment of women, whose qualifying condition is pregnancy, into Medicaid managed care plans.	(6) No changes from current law.		(6) No changes from current law.
(7) The department shall encourage physicians to provide women, whose qualifying condition for Medicaid is pregnancy, with a referral to a Medicaid participating dentist at the first pregnancy-related appointment.	(7) No changes from current law.		(7) No changes from current law.
<p><b>Medicaid Provider Reimbursement Limits</b></p> <p><b>Sec. 1611.</b> (1) For care provided to medical services recipients with other third-party sources of payment, medical services reimbursement shall not exceed, in combination with such other resources, including Medicare, those amounts established for medical services-only patients. The medical services payment rate shall be accepted as payment in full. Other than an approved medical services co-payment, no portion of a provider's charge shall be billed to the recipient or any person acting on behalf of the recipient. Nothing in this section shall be considered to affect the level of payment from a third-party source other than the medical services program. The department shall require a nonenrolled provider to accept medical services payments as payment in full.</p>	<p><b>Sec. 1611.</b> (1) No changes from current law.</p>		<p><b>Sec. 1611.</b> (1) No changes from current law.</p>
(2) Notwithstanding subsection (1), medical services reimbursement for hospital services provided to dual Medicare/medical services recipients with Medicare part B coverage only shall equal, when combined with payments for Medicare and other third-party resources, if any, those amounts established for medical services-only patients, including capital payments.	(2) No changes from current law.		(2) No changes from current law.



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Pharmacy Dispensing Fee and Prescription Drug Co-payments</i></b></p> <p><b>Sec. 1620.</b> (1) For fee-for-service recipients who do not reside in nursing homes, the pharmaceutical dispensing fee shall be \$2.75 or the pharmacy's usual or customary cash charge, whichever is less. For nursing home residents, the pharmaceutical dispensing fee shall be \$3.00 or the pharmacy's usual or customary cash charge, whichever is less.</p>	<p><b>Sec. 1620.</b> (1) No changes from current law.</p>		<p>New House Language:</p> <p><b>SEC. 1620.</b> (1) PURSUANT TO THE FEDERAL COVERED OUTPATIENT DRUG FINAL RULE WITH COMMENT (CMS-2345-FC), THE DEPARTMENT SHALL ESTABLISH A PROFESSIONAL PHARMACEUTICAL DISPENSING FEE FOR PHARMACY BENEFITS THAT ARE REIMBURSED ON A FEE-FOR-SERVICE BASIS. IN ESTABLISHING THIS FEE, THE DEPARTMENT SHALL COMPLY WITH FEDERAL LAW WHILE TAKING INTO CONSIDERATION THE STATE'S LONG-TERM FINANCIAL EXPOSURE AND MEDICAID BENEFICIARIES' ACCESS TO CARE. THE ESTABLISHED FEE SHALL NOT BE LOWER THAN THE AMOUNT IN EFFECT OCTOBER 1, 2015</p>
<p>(2) The department shall require a prescription co-payment for Medicaid recipients not enrolled in the Healthy Michigan plan or with an income less than 100% of the federal poverty level of \$1.00 for a generic drug and \$3.00 for a brand-name drug, except as prohibited by federal or state law or regulation.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>(3) The department shall require a prescription co-payment for Medicaid recipients enrolled in the Healthy Michigan plan with an income of at least 100% of the federal poverty level of \$4.00 for a generic drug and \$8.00 for a brand-name drug, except as prohibited by federal or state law or regulation.</p>	<p>(3) The department shall require a prescription co-payment for Medicaid recipients enrolled in the Healthy Michigan plan with an income of at least 100% of the federal poverty level of \$4.00 for a generic drug and \$8.00 for a brand-name drug, except as prohibited by federal or state law or regulation. <b>ADMINISTRATION OF THIS CO-PAYMENT SHALL BE CONSISTENT WITH THE TERMS AND CONDITIONS ESTABLISHED BY THE CENTERS FOR MEDICARE AND MEDICAID SERVICES LINKED TO THE SECTION 1115 WAIVER AUTHORIZING THE HEALTHY MICHIGAN PLAN.</b></p>		<p>(3) The department shall require a prescription co-payment for Medicaid recipients enrolled in the Healthy Michigan plan with an income of at least 100% of the federal poverty level of \$4.00 for a generic drug and \$8.00 for a brand-name drug, except as prohibited by federal or state law or regulation. <b>ADMINISTRATION OF THIS CO-PAYMENT SHALL BE CONSISTENT WITH THE TERMS AND CONDITIONS ESTABLISHED BY THE CENTERS FOR MEDICARE AND MEDICAID SERVICES LINKED TO THE FEDERAL WAIVER AUTHORIZING THE HEALTHY MICHIGAN PLAN.</b></p>
<p><b>Cost Pricing for Generic Drugs</b></p> <p><b>Sec. 1629.</b> The department shall utilize maximum allowable cost pricing for generic drugs that is based on wholesaler pricing to providers that is available from at least 2 wholesalers who deliver in this state.</p>	<p><b>Sec. 1629.</b> No changes from current law.</p>		<p><b>Sec. 1629.</b> No changes from current law.</p>
<p><b>Medical Services Co-payments</b></p> <p><b>Sec. 1631.</b> (1) The department shall require co-payments on dental, podiatric, and vision services provided to Medicaid recipients, except as prohibited by federal or state law or regulation.</p>	<p><b>Sec. 1631.</b> (1) No changes from current law.</p>		<p><b>Sec. 1631.</b> (1) No changes from current law.</p>
<p>(2) Except as otherwise prohibited by federal or state law or regulation, the department shall require Medicaid recipients not enrolled in the Healthy Michigan plan or with an income less than 100% of the federal poverty level to pay not less than the following co-payments:</p> <p>(a) Two dollars for a physician office visit.            (b) Three dollars for a hospital emergency room visit.            (c) Fifty dollars for the first day of an inpatient hospital stay.            (d) One dollar for an outpatient hospital visit.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>(3) Except as otherwise prohibited by federal or state law or regulation, the department shall require Medicaid recipients enrolled in the Healthy Michigan plan with an income of at least 100% of the federal poverty level to pay the following co-payments:</p> <p>(a) Four dollars for a physician office visit.            (b) Eight dollars for a hospital emergency room visit.            (c) One hundred dollars for the first day of an inpatient hospital stay.            (d) Four dollars for an outpatient hospital visit or any other medical provider visit to the extent allowed by federal or state law or regulation.</p>	<p>(3) Except as otherwise prohibited by federal or state law or regulation, <b>AND CONSISTENT WITH THE TERMS AND CONDITIONS ESTABLISHED BY THE CENTERS FOR THE MEDICARE AND MEDICAID SERVICES LINKED TO THE SECTION 1115 WAIVER AUTHORIZING THE HEALTHY MICHIGAN PLAN</b>, the department shall require Medicaid recipients enrolled in the Healthy Michigan plan with an income of at least 100% of the federal poverty level to pay the following co-payments:</p> <p>(a) Four dollars for a physician office visit.            (b) Eight dollars for a hospital emergency room visit.            (c) One hundred dollars for the first day of an inpatient hospital stay.            (d) Four dollars for an outpatient hospital visit or any other medical provider visit to the extent allowed by federal or state law or regulation.</p>		<p>(3) Except as otherwise prohibited by federal or state law or regulation, <b>AND CONSISTENT WITH THE TERMS AND CONDITIONS ESTABLISHED BY THE CENTERS FOR THE MEDICARE AND MEDICAID SERVICES LINKED TO THE FEDERAL WAIVER AUTHORIZING THE HEALTHY MICHIGAN PLAN</b>, the department shall require Medicaid recipients enrolled in the Healthy Michigan plan with an income of at least 100% of the federal poverty level to pay the following co-payments:</p> <p>(a) Four dollars for a physician office visit.            (b) Eight dollars for a hospital emergency room visit.            (c) One hundred dollars for the first day of an inpatient hospital stay.            (d) Four dollars for an outpatient hospital visit or any other medical provider visit to the extent allowed by federal or state law or regulation.</p>
<p><b><i>Institutional Provider Costs Reports</i></b></p> <p><b>Sec. 1641.</b> An institutional provider that is required to submit a cost report under the medical services program shall submit cost reports completed in full within 5 months after the end of its fiscal year.</p>	<p><b>Sec. 1641.</b> No changes from current law.</p>		<p><b>Sec. 1641.</b> No changes from current law.</p>
<p><b>Sec. 1645.</b> New House Language.</p>			<p><b>SEC. 1645. THE DEPARTMENT SHALL REVIEW AND RECALCULATE THE PRIOR YEAR QUALITY ASSURANCE ASSESSMENT FOR NURSING HOMES AND HOSPITAL LONG-TERM CARE UNITS TO REFLECT ACTUAL DAYS OF CARE PROVIDED BY EACH NURSING HOME AND HOSPITAL LONG-TERM CARE UNIT INSTEAD OF USING PROJECTED DAYS OF CARE PROVIDED BY EACH NURSING HOME AND HOSPITAL LONG-TERM CARE UNIT.</b></p>

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>HMO Reimbursement for Hospital ER Service without Prior Authorization</i></b></p> <p><b>Sec. 1657.</b> (1) Reimbursement for medical services to screen and stabilize a Medicaid recipient, including stabilization of a psychiatric crisis, in a hospital emergency room shall not be made contingent on obtaining prior authorization from the recipient's HMO. If the recipient is discharged from the emergency room, the hospital shall notify the recipient's HMO within 24 hours of the diagnosis and treatment received.</p>	<p><b>Sec. 1657.</b> (1) No changes from current law.</p>		<p><b>Sec. 1657.</b> (1) No changes from current law.</p>
<p>(2) If the treating hospital determines that the recipient will require further medical service or hospitalization beyond the point of stabilization, that hospital shall receive authorization from the recipient's HMO prior to admitting the recipient.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p>(3) Subsections (1) and (2) do not require an alteration to an existing agreement between an HMO and its contracting hospitals and do not require an HMO to reimburse for services that are not considered to be medically necessary.</p>	<p>(3) No changes from current law.</p>		<p>(3) No changes from current law.</p>
<p><b><i>Applicable Boilerplate Sections for Medicaid Managed Care</i></b></p> <p><b>Sec. 1659.</b> The following sections of this part are the only ones that shall apply to the following Medicaid managed care programs, including the comprehensive plan, MIChoice long-term care plan, and the mental health, substance use disorder, and developmentally disabled services program: 904, 911, 918, 928, 994, 1008, 1607, 1657, 1662, 1699, 1764, 1806, 1807, 1809, 1810, 1820, 1850, and 1888.</p>	<p><b>Sec. 1659.</b> The following sections of this part are the only <del>ones</del> <b>SECTIONS</b> that shall apply to the following Medicaid managed care programs, including the comprehensive plan, MIChoice long-term care plan, and the mental health, substance use disorder, and developmentally disabled services program: <b>298</b>, 904, 911, 918, 928, <del>994</del>, 1008, 1607, 1657, 1662, 1699, 1764, 1806, 1807, <del>1809</del>, 1810, <del>1820</del>, <del>1850</del>, and 1888.</p>		<p><b>Sec. 1659.</b> The following sections of this part are the only <del>ones</del> <b>SECTIONS</b> that shall apply to the following Medicaid managed care programs, including the comprehensive plan, MIChoice long-term care plan, and the mental health, substance use disorder, and developmentally disabled services program: <b>298</b>, 904, 911, 918, <b>920</b>, 928, 994, 1008, 1607, 1657, 1662, 1699, 1764, 1806, <del>1807</del>, <del>1809</del>, 1810, 1820, 1850, and 1888.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Review and Analysis of HMO Performance, EPSDT Utilization, and HEDIS Measures</i></b></p> <p><b>Sec. 1662.</b> (1) The department shall assure that an external quality review of each contracting HMO is performed that results in an analysis and evaluation of aggregated information on quality, timeliness, and access to health care services that the HMO or its contractors furnish to Medicaid beneficiaries.</p>	<p><b>Sec. 1662.</b> (1) No changes from current law.</p>		<p><b>Sec. 1662.</b> (1) No changes from current law.</p>
<p>(2) The department shall require Medicaid HMOs to provide EPSDT utilization data through the encounter data system, and HEDIS well child health measures in accordance with the National Committee for Quality Assurance prescribed methodology.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p>(3) The department shall provide a copy of the analysis of the Medicaid HMO annual audited HEDIS reports and the annual external quality review report to the senate and house of representatives appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget director, within 30 days of the department's receipt of the final reports from the contractors.</p>	<p>(3) No changes from current law.</p>		<p>(3) No changes from current law.</p>
<p><b><i>MiChild Program Eligibility</i></b></p> <p><b>Sec. 1670.</b> (1) The appropriation in part 1 for the MiChild program is to be used to provide comprehensive health care to all children under age 19 who reside in families with income at or below 212% of the federal poverty level, who are uninsured and have not had coverage by other comprehensive health insurance within 6 months of making application for MiChild benefits, and who are residents of this state. The department shall develop detailed eligibility criteria through the medical services administration public concurrence process, consistent with the provisions of this part and part 1.</p>	<p><b>Sec. 1670.</b> (1) No changes from current law.</p>		<p><b>Sec. 1670.</b> (1) No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
(2) The department may provide up to 1 year of continuous eligibility to children eligible for the MICHild program unless the family fails to pay the monthly premium, a child reaches age 19, or the status of the children's family changes and its members no longer meet the eligibility criteria as specified in the federally approved MICHild state plan.	(2) The department may provide up to 1 year of continuous eligibility to children eligible for the MICHild program unless the family fails to pay the monthly premium, a child reaches age 19, or the status of the children's family changes and its members no longer meet the eligibility criteria as specified in the <del>federally approved MICHild state plan.</del>		(2) Concur with Executive.
(3) Children whose category of eligibility changes between the Medicaid and MICHild programs shall be assured of keeping their current health care providers through the current prescribed course of treatment for up to 1 year, subject to periodic reviews by the department if the beneficiary has a serious medical condition and is undergoing active treatment for that condition.	Striking current law.		Striking current law.
(4) To be eligible for the MICHild program, a child must be residing in a family with an adjusted gross income of less than or equal to 212% of the federal poverty level. The department's verification policy shall be used to determine eligibility.	<del>(4)</del> (3) No changes from current law.		<del>(4)</del> (3) No changes from current law.
(5) The department shall contract with Medicaid health plans to provide physical health services to MICHild enrollees. The department may continue to obtain physical health services for MICHild enrollees from health maintenance organizations and preferred provider organizations currently under contract for whatever duration is needed as determined by the department. The department shall contractually require that health plans pay out-of-network providers at the department fee schedule. The department shall contract with qualified dental plans to provide dental coverage for MICHild enrollees.	Striking current law.		Striking current law.
(6) The department may enter into contracts to obtain certain MICHild services from community mental health service programs.	Striking current law.		Striking current law.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
(7) The department may make payments on behalf of children enrolled in the MICHild program from the line-item appropriation associated with the program as described in the MICHild state plan approved by the United States Department of Health and Human Services, or from other medical services.	<del>(7)</del> (4) The department may make payments on behalf of children enrolled in the MICHild program <del>from the line item appropriation associated with the program</del> as described in the MICHild state plan approved by the United States Department of Health and Human Services, or from other medical services.		<del>(7)</del> (4) Concur with Executive.
(8) The department shall assure that an external quality review of each MICHild contractor, as described in subsection (5), is performed, which analyzes and evaluates the aggregated information on quality, timeliness, and access to health care services that the contractor furnished to MICHild beneficiaries.	Striking current law.		Striking current law.
(9) The department shall develop an automatic enrollment algorithm that is based on quality and performance factors.	Striking current law.		Striking current law.
(10) MICHild services shall include treatment for autism spectrum disorders as defined in the federally approved Medicaid state plan.	Striking current law.		Striking current law.
<b>MICHild Premiums</b>  <b>Sec. 1673.</b> The department may establish premiums for MICHild eligible individuals in families with income at or below 212% of the federal poverty level. The monthly premiums shall be \$10.00 per month.	<b>Sec. 1673.</b> No changes from current law.		<b>Sec. 1673.</b> No changes from current law.



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>MiChild Program Benefits</i></b></p> <p><b>Sec. 1677.</b> The MiChild program shall provide, at a minimum, all benefits available under the Michigan benchmark plan that are delivered through contracted providers and consistent with federal law, including, but not limited to, the following medically necessary services:</p> <p>(a) Inpatient mental health services, other than substance use disorder treatment services, including services furnished in a state-operated mental hospital and residential or other 24-hour therapeutically planned structured services.</p> <p>(b) Outpatient mental health services, other than substance use disorder services, including services furnished in a state-operated mental hospital and community-based services.</p> <p>(c) Durable medical equipment and prosthetic and orthotic devices.</p> <p>(d) Dental services as outlined in the approved MiChild state plan.</p> <p>(e) Substance use disorder treatment services that may include inpatient, outpatient, and residential substance use disorder treatment services.</p> <p>(f) Care management services for mental health diagnoses.</p> <p>(g) Physical therapy, occupational therapy, and services for individuals with speech, hearing, and language disorders.</p> <p>(h) Emergency ambulance services.</p>	<p><b>Sec. 1677.</b> No changes from current law.</p>		<p><b>Sec. 1677.</b> No changes from current law.</p>
<p><b><i>Authorization to Spend Additional Nursing Home Penalty Money</i></b></p> <p><b>Sec. 1682.</b> (1) In addition to the appropriations in part 1, the department is authorized to receive and spend penalty money received as the result of noncompliance with medical services certification regulations. Penalty money, characterized as private funds, received by the department shall increase authorizations and allotments in the long-term care accounts.</p>	<p><b>Sec. 1682.</b> (1) No changes from current law.</p>		<p><b>Sec. 1682.</b> (1) No changes from current law.</p>

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
(2) Any unexpended penalty money, at the end of the year, shall carry forward to the following year.	(2) No changes from current law.		(2) No changes from current law.
<p><b>Medicaid School-Based Services</b></p> <p><b>Sec. 1692.</b> (1) The department is authorized to pursue reimbursement for eligible services provided in Michigan schools from the federal Medicaid program. The department and the state budget director are authorized to negotiate and enter into agreements, together with the department of education, with local and intermediate school districts regarding the sharing of federal Medicaid services funds received for these services. The department is authorized to receive and disburse funds to participating school districts pursuant to such agreements and state and federal law.</p>	<b>Sec. 1692.</b> No changes from current law.		<b>Sec. 1692.</b> No changes from current law.
<p>(2) From the funds appropriated in part 1 for medical services school-based services payments, the department is authorized to do all of the following:</p> <p>(a) Finance activities within the medical services administration related to this project.</p> <p>(b) Reimburse participating school districts pursuant to the fund-sharing ratios negotiated in the state-local agreements authorized in subsection (1).</p> <p>(c) Offset general fund costs associated with the medical services program.</p>	(2) No changes from current law.		(2) No changes from current law.
<p><b>Authorization to Increase Special Medicaid Reimbursement Payments</b></p> <p><b>Sec. 1693.</b> The special Medicaid reimbursement appropriation in part 1 may be increased if the department submits a medical services state plan amendment pertaining to this line item at a level higher than the appropriation. The department is authorized to appropriately adjust financing sources in accordance with the increased appropriation.</p>	<b>Sec. 1693.</b> No changes from current law.		<b>Sec. 1693.</b> No changes from current law.

## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Poison Control Services through Special Medicaid Reimbursement Payments</i></b></p> <p><b>Sec. 1694.</b> From the funds appropriated in part 1 for special Medicaid reimbursement, \$386,700.00 of general fund/general purpose revenue and any associated federal match shall be distributed for poison control services to an academic health care system that includes a children’s hospital that has a high indigent care volume.</p>	<p><b>Sec. 1694.</b> From the funds appropriated in part 1 for special Medicaid reimbursement <b>UP TO, <del>\$386,700.00</del> \$12,600.00</b> of general fund/general purpose revenue and any associated federal match shall be distributed for poison control services to an academic health care system that includes a children’s hospital that has a high indigent care volume.</p>		<p><b>Sec. 1694.</b> No changes from current law.</p>
<p><b><i>Disproportionate Share Hospital (DSH) and Graduate Medical Education (GME) Payments</i></b></p> <p><b>Sec. 1699.</b> (1) The department may make separate payments in the amount of \$45,000,000.00 directly to qualifying hospitals serving a disproportionate share of indigent patients and to hospitals providing GME training programs. If direct payment for GME and DSH is made to qualifying hospitals for services to Medicaid clients, hospitals shall not include GME costs or DSH payments in their contracts with HMOs.</p>	<p><b>Sec. 1699.</b> (1) No changes from current law.</p>		<p><b>Sec. 1699.</b> (1) No changes from current law.</p>
<p>(2) The department shall allocate \$45,000,000.00 in DSH funding using the distribution methodology used in fiscal year 2003-2004.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p>(3) By September 30 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on the distribution of funding to each eligible hospital from the GME and DSH pools.</p>	<p>(3) No changes from current law.</p>		<p>Striking current law.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
Sec. 1700. (1) New House Language.			<p>SEC. 1700. (1) BY DECEMBER 1 OF THE CURRENT FISCAL YEAR, THE DEPARTMENT SHALL REPORT TO THE SENATE AND HOUSE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET, THE SENATE AND HOUSE FISCAL AGENCIES, AND THE STATE BUDGET OFFICE ON THE DISTRIBUTION OF FUNDING PROVIDED, AND THE NET BENEFIT IF THE SPECIAL HOSPITAL PAYMENT IS NOT FINANCED WITH GENERAL FUND/GENERAL PURPOSE REVENUE, TO EACH ELIGIBLE HOSPITAL DURING THE PRIOR FISCAL YEAR FROM THE FOLLOWING SPECIAL HOSPITAL PAYMENTS:</p> <p>(A) DSH, SEPARATED OUT BY UNIQUE DSH POOL.</p> <p>(B) GME.</p> <p>(C) SPECIAL RURAL HOSPITAL PAYMENTS PROVIDED UNDER SECTION 1866.</p> <p>(D) LUMP SUM PAYMENTS TO RURAL HOSPITALS FOR OBSTETRICAL CARE PROVIDED UNDER SECTION 1802.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
(2) New House Language.			<p>(2) BY MAY 1 OF THE CURRENT FISCAL YEAR, THE DEPARTMENT SHALL REPORT TO THE SENATE AND HOUSE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET, THE SENATE AND HOUSE FISCAL AGENCIES, AND THE STATE BUDGET OFFICE ON THE PROJECTED DISTRIBUTION OF FUNDING, AND THE PROJECTED NET BENEFIT IF THE SPECIAL HOSPITAL PAYMENT IS NOT FINANCED WITH GENERAL FUND/GENERAL PURPOSE REVENUE, TO EACH ELIGIBLE HOSPITAL FROM THE FOLLOWING SPECIAL HOSPITAL PAYMENTS:</p> <p>(A) DSH, SEPARATED OUT BY UNIQUE DSH POOL.</p> <p>(B) GME.</p> <p>(C) SPECIAL RURAL HOSPITAL PAYMENTS PROVIDED UNDER SECTION 1866.</p> <p>(D) LUMP SUM PAYMENTS TO RURAL HOSPITALS FOR OBSTETRICAL CARE PROVIDED UNDER SECTION 1802.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
Sec. 1701. New House Language.			<p><b>SEC. 1701. THE DEPARTMENT SHALL CONSIDER IMPLEMENTING A DIRECT PRIMARY CARE PILOT PROGRAM FOR MEDICAID ENROLLEES. EACH MEDICAID ENROLLEE WHO PARTICIPATES IN THE PILOT PROGRAM SHALL BE ENROLLED IN A DIRECT PRIMARY CARE PROVIDER PLAN THAT IS UNDER CONTRACT WITH ONE OR MORE MEDICAID MANAGED CARE HEALTH PLANS. OUTCOMES AND PERFORMANCE MEASURES FOR THE DIRECT PRIMARY CARE PILOT PROGRAM INCLUDE, BUT ARE NOT LIMITED TO, THE FOLLOWING:</b></p> <p><b>(A) THE NUMBER OF ENROLLEES IN THE PILOT PROGRAM BY MEDICAID ELIGIBILITY CATEGORY.</b></p> <p><b>(B) DIRECT PRIMARY CARE COST PER ENROLLEE.</b></p> <p><b>(C) OTHER MEDICAID MANAGED CARE COST SAVINGS GENERATED FROM DIRECT PRIMARY CARE.</b></p>
Sec. 1702. New House Language.			<p><b>SEC. 1702. FROM THE FUNDS APPROPRIATED IN PART 1, THE DEPARTMENT SHALL PROVIDE A 10% RATE INCREASE FOR PRIVATE DUTY NURSING SERVICES FOR MEDICAID BENEFICIARIES UNDER THE AGE OF 21. THESE ADDITIONAL FUNDS MUST BE USED TO ATTRACT AND RETAIN HIGHLY QUALIFIED REGISTERED NURSES AND LICENSED PRACTICAL NURSES TO PROVIDE PRIVATE DUTY NURSING SERVICES SO THAT MEDICALLY FRAIL CHILDREN CAN BE CARED FOR IN THE MOST HOMELIKE SETTING POSSIBLE.</b></p>



**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Boilerplate for Medical Services**

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
Sec. 1703. New House Language.			<p>SEC. 1703. THE DEPARTMENT, IN CONJUNCTION WITH THE DEPARTMENT OF EDUCATION, SHALL INVESTIGATE FUNDING OPPORTUNITIES FOR EARLY ON EARLY INTERVENTION SERVICES FOR ELIGIBLE CHILDREN WITH DEVELOPMENTAL DELAYS AND DISABILITIES. THE DEPARTMENT SHALL COMMISSION A STUDY WITH EXPERT INPUT ON FUNDING STRATEGIES UTILIZED IN OTHER STATES THAT INCLUDES THE FEASIBILITY OF MAXIMIZING MEDICAID REIMBURSEMENT FOR CHILDREN ELIGIBLE FOR EARLY ON SERVICES. THE REPORT SHALL ALSO INCLUDE ANY BARRIERS IDENTIFIED TO MAXIMIZING MEDICAID FUNDS FOR EARLY ON SERVICES IN THIS STATE AND RECOMMENDATIONS FOR FUTURE ACTION. THE DEPARTMENT SHALL REPORT TO THE SENATE AND HOUSE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET AND THE SENATE AND HOUSE FISCAL AGENCIES BY JANUARY 1 OF THE CURRENT FISCAL YEAR ON THE FINDINGS OF THE REPORT.</p>



**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Boilerplate for Medical Services**

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
Sec. 1704. (1) New House Language.			<p>SEC. 1704. (1) THE DEPARTMENT AND ITS CONTRACTUAL AGENTS MAY NOT SUBJECT MEDICAID PRESCRIPTIONS TO PRIOR AUTHORIZATION PROCEDURES WITH RESPECT TO THE FOLLOWING DRUGS:</p> <p>(A) A PRESCRIPTION DRUG THAT IS GENERALLY RECOGNIZED IN A STANDARD MEDICAL REFERENCE OR THE AMERICAN PSYCHIATRIC ASSOCIATION'S DIAGNOSTIC AND STATISTICAL MANUAL FOR THE TREATMENT OF A PSYCHIATRIC DISORDER.</p> <p>(B) A PRESCRIPTION THAT IS GENERALLY RECOGNIZED IN A STANDARD MEDICAL REFERENCE FOR THE TREATMENT OF CANCER, HIV-AIDS, EPILEPSY OR SEIZURE DISORDER, OR ORGAN REPLACEMENT THERAPY.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>(2) New House Language.</p>			<p>(2) AS USED IN THIS SECTION, "PRIOR AUTHORIZATION" MEANS A PROCESS IMPLEMENTED BY THE DEPARTMENT OR ITS CONTRACTUAL AGENTS THAT CONDITIONS, DELAYS, OR DENIES DELIVERY OF PARTICULAR PHARMACY SERVICES TO MEDICAID BENEFICIARIES UPON APPLICATION OF PREDETERMINED CRITERIA BY THE DEPARTMENT OR ITS CONTRACTUAL AGENTS TO THOSE PHARMACY SERVICES. THE PROCESS OF PRIOR AUTHORIZATION OFTEN REQUIRES THAT A PRESCRIBER DO 1 OR BOTH OF THE FOLLOWING:            (A) OBTAIN PREAPPROVAL FROM THE DEPARTMENT OR ITS CONTRACTUAL AGENTS BEFORE PRESCRIBING A GIVEN DRUG.            (B) VERIFY TO THE DEPARTMENT OR ITS CONTRACTUAL AGENTS THAT THE USE OF A DRUG PRESCRIBED FOR AN INDIVIDUAL MEETS PREDETERMINED CRITERIA FROM THE DEPARTMENT OR ITS CONTRACTUAL AGENTS FOR A PRESCRIPTION DRUG THAT IS OTHERWISE AVAILABLE UNDER THE MEDICAID PROGRAM IN THIS STATE.</p>
<p><b><i>Injectable Drugs for Respiratory Syncytial Virus</i></b></p> <p><b>Sec. 1724.</b> The department shall allow licensed pharmacies to purchase injectable drugs for the treatment of respiratory syncytial virus for shipment to physicians' offices to be administered to specific patients. If the affected patients are Medicaid eligible, the department shall reimburse pharmacies for the dispensing of the injectable drugs and reimburse physicians for the administration of the injectable drugs.</p>	<p>Striking current law.</p>		<p><b>Sec. 1724.</b> No changes from current law.</p>

## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Maternal Infant Health Program Literacy Assessment Tool Evaluation</i></b></p> <p><b>Sec. 1730.</b> (1) The department shall work with the department of education to evaluate the feasibility of including an assessment tool to promote literacy development of pregnant women and new mothers in the maternal infant health program.</p>	<p><b>Sec. 1730</b> (1) No changes from current law.</p>		<p><b>Sec. 1730</b> (1) No changes from current law.</p>
<p>(2) By March 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office on the findings of the feasibility study on including an assessment tool to promote literacy development of pregnant women and new mothers in the maternal infant health program.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>
<p><b><i>Medicaid Applicants' Citizenship and Residency Status</i></b></p> <p><b>Sec. 1757.</b> The department shall obtain proof from all Medicaid recipients that they are legal United States citizens or otherwise legally residing in this country and that they are residents of this state before approving Medicaid eligibility.</p>	<p>Striking current law.</p>		<p><b>Sec. 1757.</b> No changes from current law.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Actuarial Soundness Certification of Medicaid Health Plan Rates</i></b></p> <p><b>Sec. 1764.</b> The department shall annually certify whether rates paid to Medicaid health plans and specialty prepaid inpatient health plans are actuarially sound in accordance with federal requirements and shall provide a copy of the rate certification and approval of rates paid to Medicaid health plans and specialty prepaid inpatient health plans within 5 business days after certification or approval to the house and senate appropriations subcommittees on the department budget and the house and senate fiscal agencies. When calculating the annual actuarial soundness adjustment, the department shall take into account all Medicaid policy bulletins affecting Medicaid health plans or specialty prepaid inpatient health plans issued after the most recent actuarial soundness process concluded.</p>	<p><b>Sec. 1764.</b> The department shall annually certify whether rates paid to Medicaid health plans and specialty prepaid inpatient health plans are actuarially sound in accordance with federal requirements and shall provide a copy of the rate certification and approval of rates paid to Medicaid health plans and specialty prepaid inpatient health plans within 5 business days after certification or approval to the house and senate appropriations subcommittees on the department budget, <del>and</del> the house and senate fiscal agencies <b>AND THE STATE BUDGET OFFICE</b>. When calculating the annual actuarial soundness adjustment, the department shall take into account all Medicaid policy bulletins affecting Medicaid health plans or specialty prepaid inpatient health plans issued after the most recent actuarial soundness process concluded.</p>		<p><b>Sec. 1764.</b> Concur with Executive.</p>
<p><b><i>Report on Managed Care Laboratory Services Fees</i></b></p> <p><b>Sec. 1770.</b> The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office information on savings from the reduction in managed care laboratory services fees enacted under Executive Order No. 2015-5 and continued in the current fiscal year. This report shall include the actual gross reduction in expenditures by Medicaid health plans that result from the reduction in the laboratory services fees.</p>	<p>Striking current law.</p>		<p>Striking current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Medicaid Managed Care for Dual Eligibles Report</b></p> <p><b>Sec. 1775.</b> (1) By March 1 and September 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on progress in implementing the waiver to implement managed care for individuals who are eligible for both Medicare and Medicaid, known as MI Health Link, including, but not limited to, a description of how the department intends to ensure that service delivery is integrated, how key components of the proposal are implemented effectively, and any problems and potential solutions as identified by the ombudsman described in subsection (2).</p>	<p><b>Sec. 1775.</b> (1) No changes from current law.</p>		<p><b>Sec. 1775.</b> (1) No changes from current law.</p>
<p>(2) The department shall ensure the existence of an ombudsman program that is not associated with any project service manager or provider to assist MI Health Link beneficiaries with navigating complaint and dispute resolution mechanisms and to identify problems in the demonstrations and in the complaint and dispute resolution mechanisms.</p>	<p>(2) No changes from current law.</p>		<p>(2) No changes from current law.</p>

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Distribution of \$85.0 Million Outpatient DSH Pool</i></b></p> <p><b>Sec. 1800.</b> For the distribution of each of the pools within the \$85,000,000.00 outpatient disproportionate share hospital payment, the department shall develop a formula for the distribution of each pool based on the quality of care, cost, traditional disproportionate share hospital factors such as Medicaid utilization and uncompensated care, and any other factor that the department determines should be considered. By May 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on the distribution of each pool.</p>	<p><b>Sec. 1800.</b> No changes from current law.</p>		<p><b>Sec. 1800.</b> For the distribution of each of the pools within the \$85,000,000.00 outpatient disproportionate share hospital payment, the department shall develop a formula for the distribution of each pool based on the quality of care, cost, traditional disproportionate share hospital factors such as Medicaid utilization and uncompensated care, and any other factor that the department determines should be considered. <del>By May 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on the distribution of each pool.</del></p>

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Primary Care Rate Increase Continuation</i></b></p> <p><b>Sec. 1801.</b> From the funds appropriated in part 1 for physician services and health plan services, the department shall use \$33,318,800.00 in general fund/general purpose plus associated federal match to continue the increase to Medicaid rates for primary care services provided only by primary care providers. For the purpose of this section, a primary care provider is a physician, or a practitioner working under the personal supervision of a physician, who is board-eligible or certified with a specialty designation of family medicine, general internal medicine, or pediatric medicine, or a provider who provides the department with documentation of equivalency. The department shall examine including the subspecialty of neonatal medicine in its definition of primary care provider. Providers performing a service and whose primary practice is as a non-primary-care subspecialty is not eligible for the increase. The department shall establish policies that most effectively limit the increase to primary care providers for primary care services only.</p>	<p><b>Sec. 1801.</b> No changes from current law.</p>		<p><b>Sec. 1801.</b> From the funds appropriated in part 1 for physician services and health plan services, the department shall use \$33,318,800.00 in general fund/general purpose plus associated federal match to continue the increase to Medicaid rates for primary care services provided only by primary care providers. For the purpose of this section, a primary care provider is a physician, or a practitioner working under the personal supervision of a physician, who is board-eligible or certified with a specialty designation of family medicine, general internal medicine, or pediatric medicine, or a provider who provides the department with documentation of equivalency. <del>The department shall examine including the subspecialty of neonatal medicine in its definition of primary care provider.</del> Providers performing a service and whose primary practice is as a non-primary-care subspecialty is not eligible for the increase. The department shall establish policies that most effectively limit the increase to primary care providers for primary care services only.</p>





## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Lump-Sum Rural Hospital Payments for Obstetrical Services</i></b></p> <p><b>Sec. 1802.</b> From the funds appropriated in part 1, a lump-sum payment shall be made to hospitals that qualified for rural hospital access payments in fiscal year 2013-2014 and that provide obstetrical care in the current fiscal year. The payment shall be calculated as \$830.00 for each obstetrical care case payment and each newborn care case payment for all such cases billed by the qualified hospitals for fiscal year 2012-2013 and shall be paid through the Medicaid health plan hospital rate adjustment process by January 1 of the current fiscal year.</p>	<p><b>Sec. 1802.</b> No changes from current law.</p>		<p><b>Sec. 1802.</b> No changes from current law.</p>
<p><b><i>Identification of Medicaid Beneficiaries Who Are Veterans</i></b></p> <p><b>Sec. 1804.</b> The department, in cooperation with the department of military and veterans affairs, shall work with the federal public assistance reporting information system to identify Medicaid recipients who are veterans and who may be eligible for federal veterans health care benefits or other benefits.</p>	<p><b>Sec. 1804.</b> No changes from current law.</p>		<p><b>Sec. 1804.</b> No changes from current law.</p>

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Graduate Medical Education (GME) Quality Data</b></p> <p><b>Sec. 1805.</b> Hospitals receiving medical services payments for graduate medical education shall submit fully completed quality data to the same national nonprofit organization with extensive experience in collecting and reporting hospital quality data on a public website. The reporting must utilize consensus-based nationally endorsed standards that meet National Quality Forum-endorsed safe practices. The organization collecting the data must be one that uses severity-adjusted risk models and measures that will help patients and payers identify hospital campuses likely to have superior outcomes. The department shall withhold a hospital's fourth quarter graduate medical education payment until the hospital submits the data to the qualifying nonprofit organization described in this section.</p>	Striking current law.		<p><b>Sec. 1805.</b> Hospitals receiving medical services payments for graduate medical education shall submit fully completed quality data to <del>the same</del> <b>A</b> national nonprofit organization with extensive experience in collecting and reporting hospital quality data on a public website <b>OR TO THE CENTERS FOR MEDICARE AND MEDICAID SERVICES HOSPITAL COMPARE QUALITY REPORTING WEBSITE.</b> The reporting must utilize consensus-based nationally endorsed standards that meet National Quality Forum-endorsed safe practices. The organization collecting the data must be one that uses severity adjusted risk models and measures that will help patients and payers identify hospital campuses likely to have superior outcomes. <del>The department shall withhold a hospital's fourth quarter graduate medical education payment until the hospital submits the data to the qualifying nonprofit organization described in this section.</del></p>
<p><b>Common Formulary for Medicaid Health Plans</b></p> <p><b>Sec. 1806.</b> (1) The contracts for Medicaid health plans that will be effective January 1, 2016 must include a provision that requires the cooperation and participation in a workgroup that develops and implements a common formulary that will be used by all contracting Medicaid health plans. The department shall convene the workgroup, make final decisions, and consult with health plans and other organizations as this requirement is implemented.</p>	Striking current law.		Striking current law.



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
(2) The department may establish performance standards to measure progress in the implementation of the common formulary.	<b>Sec. 1806</b> <del>(2)</del> (1) The department may establish performance standards to measure progress in the implementation of the common formulary <b>USED BY ALL CONTRACTING MEDICAID HEALTH PLANS.</b>		<b>Sec. 1806</b> <del>(2)</del> (1) Concur with Executive.
(3) The ongoing implementation of the common formulary must include consideration of the department's preferred drug list.	<del>(3)</del> (2) No changes from current law.		<del>(3)</del> (2) No changes from current law.
(4) To achieve the objective of low net cost, the contracted health plans may use evidence-based utilization management techniques in the development and implementation of the common formulary.	<del>(4)</del> (3) No changes from current law.		<del>(4)</del> (3) No changes from current law.
(5) The contracted health plans and the department shall continue to facilitate and emphasize the value of increased participation in the use of e-prescribing and electronic medical records.	<del>(5)</del> (4) No changes from current law.		<del>(5)</del> (4) No changes from current law.
<b><i>Comprehensive Health Plan Contract Request for Proposals Process</i></b>  <b>Sec. 1807.</b> The process and results from the request for proposals for the comprehensive health plan contract for this state's Medicaid health plans must assure a fair, transparent and deliberative process that emphasizes the value of choice and access for beneficiaries.	Striking current law.		Striking current law.

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Medicaid Health Plan Performance Standards</i></b></p> <p><b>Sec. 1809.</b> The department shall establish separate contract performance standards for Medicaid health plans that adhere to the requirements of section 105d of the social welfare act, 1939 PA 280, MCL 400.105d, associated with the 0.75% and 0.25% capitation withhold. The determination of the performance of the 0.75% capitation withhold is at the discretion of the department but must include recognized concepts such as 1-year continuous enrollment and the HEDIS audited data. The determination of the performance of the 0.25% capitation withhold is at the discretion of the department but must include recognized concepts such as encouraging the utilization of high-value services and discouraging the utilization of low-value services.</p>	Striking current law.		Striking current law.
<p><b><i>Medicaid Health Plan Encounter Data Reporting</i></b></p> <p><b>Sec. 1810.</b> The department shall enhance encounter data reporting processes and develop rules that would make each health plan's encounter data as complete as possible, provide a fair measure of acuity for each health plan's enrolled population for risk adjustment purposes, capitation rate setting, diagnosis-related group rate setting, and research and analysis of program efficiencies while minimizing health plan administrative expense.</p>	<b>Sec. 1810.</b> No changes from current law.		<b>Sec. 1810.</b> No changes from current law.



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><i>Graduate Medical Education Program Costs</i></p> <p><b>Sec. 1812.</b> (1) By June 1 of the current fiscal year, the department shall require each hospital that receives funds appropriated in part 1 for graduate medical education to submit a report disclosing all direct and indirect costs associated with the residency training program to the department, the house and senate appropriations subcommittees on the department budget, and the house and senate fiscal agencies.</p>	<p><b>Sec. 1812.</b> (1) By June 1 of the current fiscal year, the department shall require each hospital that receives funds appropriated in part 1 for graduate medical education to submit a report disclosing all direct and indirect costs associated with the residency training program to the department, the house and senate appropriations subcommittees on the department budget, <del>and the house and senate fiscal agencies</del> <b>AND THE STATE BUDGET OFFICE.</b></p>		<p><b>Sec. 1812.</b> (1) By June 1 of the current fiscal year, <b>AND USING THE MOST RECENT AVAILABLE COST REPORTS</b>, the department shall <del>require</del> <b>COMPLETE A REPORT OF ALL DIRECT AND INDIRECT COSTS ASSOCIATED WITH RESIDENCY TRAINING PROGRAMS</b> FOR each hospital that receives funds appropriated in part 1 for graduate medical education. <del>to submit a report disclosing all direct and indirect costs associated with the residency training program to the department,</del> <b>THE REPORT SHALL BE SUBMITTED</b> to the house and senate appropriations subcommittees on the department budget, <del>and the house and senate fiscal agencies</del> <b>AND THE STATE BUDGET OFFICE.</b></p>
<p>(2) By August 1 of the current fiscal year, the department shall require each hospital that receives funds appropriated in part 1 for graduate medical education to submit a report identifying and explaining the following:</p> <p>(a) The marginal cost to add 1 additional residency training program slot.</p> <p>(b) The number of additional slots that would result in the need to add additional administrative costs to oversee the residents in the training program.</p> <p>(c) The postresidency retention rate for the residency training program.</p>	<p>(2) No changes from current law.</p>		<p>(2) By August 1 of the current fiscal year, the department shall <del>require each hospital that receives funds appropriated in part 1 for graduate medical education to submit a report identifying and explaining the following</del> <b>DEVELOP A TEMPLATE FOR HOSPITALS RECEIVING FUNDS APPROPRIATED IN PART 1 FOR GRADUATE MEDICAL EDUCATION TO REPORT THE FOLLOWING IN A STANDARD FORMAT:</b></p> <p>(a) The marginal cost to add 1 additional residency training program slot.</p> <p>(b) The number of additional slots that would result in the need to add additional administrative costs to oversee the residents in the training program.</p> <p>(c) The postresidency retention rate for the residency training program.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
(3) The department shall hold graduate medical education recipients' fourth quarter payments until the submission of the information required in subsections (1) and (2).	(3) No changes from current law.		Striking current law.
(4) The department shall convene a workgroup to use the reports submitted under subsections (1) and (2) to assist in the development of metrics for distribution of graduate medical education funds and shall report to the senate and house appropriations subcommittees on the department budget and the senate and house fiscal agencies on the results of the workgroup by September 30 of the current fiscal year. It is the intent of the legislature that, beginning with the budget for the fiscal year ending September 30, 2017, the metrics developed by this workgroup be used to determine the distribution of funds for graduate medical education.	(4) The department shall convene a workgroup to use the reports submitted under subsections (1) and (2) to assist in the development of metrics for distribution of graduate medical education funds and shall report to the senate and house appropriations subcommittees on the department budget and the senate and house fiscal agencies on the results of the workgroup by September 30 of the current fiscal year. <del>It is the intent of the legislature that, beginning with the budget for the fiscal year ending September 30, 2017, the metrics developed by this workgroup be used to determine the distribution of funds for graduate medical education.</del>		(4) <del>(3)</del> The department shall convene a workgroup to use the reports submitted under subsections (1) and (2) to assist in the development of metrics for distribution of graduate medical education funds and shall report to the senate and house appropriations subcommittees on the department budget and the senate and house fiscal agencies on the results of the workgroup by September 30 of the current fiscal year. It is the intent of the legislature that, beginning with the budget for the fiscal year ending September 30, <del>2017</del> <b>2018</b> , the metrics developed by this workgroup be used to determine the distribution of funds for graduate medical education.
(5) If needed, the department shall seek a federal waiver to fulfill the requirements of this section.	(5) No changes from current law.		<del>(5)</del> (4) No changes from current law.
<b>Recognition of Medicaid Health Plan Accreditation</b>  <b>Sec. 1820.</b> (1) In order to avoid duplication of efforts, the department shall utilize applicable national accreditation review criteria to determine compliance with corresponding state requirements for Medicaid health plans that have been reviewed and accredited by a national accrediting entity for health care services.	Striking current law.		<b>Sec. 1820.</b> (1) No changes from current law.
(2) The department shall continue to comply with state and federal law and shall not initiate an action that negatively impacts beneficiary safety.	Striking current law.		(2) No changes from current law.
(3) As used in this section, "national accrediting entity" means the National Committee for Quality Assurance, the URAC, formerly known as the Utilization Review Accreditation Commission, or other appropriate entity, as approved by the department.	Striking current law.		(3) No changes from current law.



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
(4) By July 1 of the current fiscal year, the department shall provide a progress report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office on implementation of this section.	Striking current law.		(4) No changes from current law.
<p><b><i>Telemedicine and Telepsychiatry Use in Underserved Areas</i></b></p> <p><b>Sec. 1837.</b> The department shall continue, and expand where appropriate, utilization of telemedicine and telepsychiatry as strategies to increase access to services for Medicaid recipients in medically underserved areas.</p>	<b>Sec. 1837.</b> No changes from current law.		<b>Sec. 1837.</b> No changes from current law.
<p><b><i>Graduate Medical Education Priorities</i></b></p> <p><b>Sec. 1846.</b> From the funds appropriated in part 1 for graduate medical education, the department shall distribute the funds with an emphasis on the following health care workforce goals:</p> <p>(a) The encouragement of the training of physicians in specialties, including primary care, that are necessary to meet the future needs of residents of this state.</p> <p>(b) The training of physicians in settings that include ambulatory sites and rural locations.</p>	<b>Sec. 1846.</b> No changes from current law.		<b>Sec. 1846.</b> No changes from current law.
<p><b><i>Eligibility Redetermination by Medicaid Health Plans</i></b></p> <p><b>Sec. 1850.</b> The department may allow Medicaid health plans to assist with the redetermination process through outreach activities to ensure continuation of Medicaid eligibility and enrollment in managed care. This may include mailings, telephone contact, or face-to-face contact with beneficiaries enrolled in the individual Medicaid health plan. Health plans may offer assistance in completing paperwork for beneficiaries enrolled in their plan.</p>	Striking current law.		<b>Sec. 1850.</b> No changes from current law.



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><i>Nonemergency Medical Transportation Pilot</i></b></p> <p><b>Sec. 1861.</b> The department shall encourage cooperation between the Medicaid managed care health plans, other health providers, and nonprofit entities to help facilitate a pilot nonemergency transportation system.</p>	Striking current law.		<p><b>Sec. 1861.</b> The department shall encourage cooperation between the Medicaid managed care health plans, other health providers, and nonprofit entities to help facilitate <b>CONTINUE THE FACILITATION OF</b> a pilot nonemergency transportation system.</p>
<p><b><i>Maintenance of Obstetrical Rate Increase</i></b></p> <p><b>Sec. 1862.</b> From the funds appropriated in part 1, the department shall maintain payment rates for Medicaid obstetrical services at 95% of Medicare levels effective October 1, 2014.</p>	Striking current law.		<p><b>Sec. 1862.</b> No changes from current law.</p>
<p><b><i>Special Rural Hospital Payments</i></b></p> <p><b>Sec. 1866.</b> (1) From the funds appropriated in part 1 for hospital services and therapy and health plan services, \$12,000,000.00 in general fund/general purpose revenue and any associated federal match shall be awarded to hospitals that meet criteria established by the department for services to low-income rural residents. One of the reimbursement components of the distribution formula shall be assistance with labor and delivery services.</p>	<p><b>Sec. 1866.</b> (1) No changes from current law.</p>		<p><b>Sec. 1866.</b> (1) No changes from current law.</p>
<p>(2) No hospital or hospital system shall receive more than 10.0% of the total funding referenced in subsection (1).</p>	(2) No changes from current law.		(2) No changes from current law.
<p>(3) To allow hospitals to understand their rural payment amounts under this section, the department shall provide hospitals with the methodology for distribution under this section and provide each hospital with its applicable data that are used to determine the payment amounts by August 1 of the current fiscal year. The department shall publish the distribution of payments for the current fiscal year and the immediately preceding fiscal year.</p>	(3) No changes from current law.		(3) No changes from current law.





## DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
(4) The department shall report to the senate and house appropriations subcommittees on the department budget and the senate and house fiscal agencies on the distribution of funds referenced in subsection (1) by April 1 of the current fiscal year.	(4) The department shall report to the senate and house appropriations subcommittees on the department budget, <del>and</del> the senate and house fiscal agencies, <b>AND THE STATE BUDGET OFFICE</b> on the distribution of funds referenced in subsection (1) by April 1 of the current fiscal year.		Striking current law.

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><i>Graduate Medical Education Consortium - MIDocs</i></p> <p>Sec. 1870. The department shall work in collaboration with Michigan-based medical schools that choose to participate in the creation of a graduate medical education consortium known as MIDocs. The purpose of MIDocs is to develop freestanding residency training programs in primary care and other ambulatory care-based specialties. MIDocs shall design residency training programs to address physician shortage needs in this state, including placing physicians post-residency in underserved communities across this state. MIDocs shall give special consideration to small and rural hospitals with a GME program director. MIDocs' voting members will include any Michigan-based university with a medical school or an affiliated faculty practice physician group that is making a substantial contribution to MIDocs programs. The department shall be a permanent nonvoting member of MIDocs. The department, in collaboration with MIDocs voting members, may also appoint nonvoting members to MIDocs to represent various stakeholders. As the sponsoring institution and fiduciary, MIDocs shall assure initial and continued accreditation from the accreditation council for graduate medical education or ACGME, financial accountability, clinical quality, and compliance. The department shall require an annual report from MIDocs detailing per resident costs for medical training and clinical quality measures. The department shall create MIDocs no later than January 10, 2015. MIDocs shall provide the department with a report proposing the creation of new residency programs and an actionable plan for retaining consortium related students post-residency, especially in underserved communities. The work project allocation from the fiscal year ending September 30, 2015 is allocated to prepare the report, legally create the consortium, prepare to obtain ACGME accreditation, and develop new residency programs.</p>	Striking current law.		<p>New House Language:</p> <p><b>SEC. 1870. THE DEPARTMENT SHALL CONTINUE TO WORK WITH THE MIDOCS CONSORTIUM TO EXPLORE ALTERNATIVE GRADUATE MEDICAL EDUCATION FINANCING SOURCES AND MECHANISMS THAT EXPAND RESIDENCY OPPORTUNITIES FOR PRIMARY CARE TRAINING, PER APPROVAL FROM THE CENTERS FOR MEDICARE AND MEDICAID SERVICES. BY DECEMBER 1 OF THE CURRENT FISCAL YEAR, THE MIDOCS CONSORTIUM SHALL SUBMIT A REPORT PRESENTING A COMPREHENSIVE FUNDING PLAN TO THE SENATE AND HOUSE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET AND THE SENATE AND HOUSE FISCAL AGENCIES.</b></p>
<p><b><i>Observation Stay Policy</i></b></p> <p><b>Sec. 1883.</b> For the purposes of more effectively managing inpatient care for Medicaid health plans and Medicaid fee-for-service, the department shall consider developing an appropriate policy and rate for observation stays.</p>	Striking current law.		Striking current law.



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>Medicaid Health Plan Contract Performance Standards</b></p> <p><b>Sec. 1888.</b> The department shall establish contract performance standards associated with the capitation withhold provisions for Medicaid health plans at least 3 months in advance of the implementation of those standards. The determination of whether performance standards have been met shall be based primarily on recognized concepts such as 1-year continuous enrollment and the healthcare effectiveness data and information set, HEDIS, audited data.</p>	<p><b>Sec. 1888.</b> The department shall establish contract performance standards associated with the capitation withhold provisions for Medicaid health plans <del>at least 3 months</del> in advance of the implementation of those standards. The determination of whether performance standards have been met shall be based primarily on recognized concepts such as 1-year continuous enrollment and the healthcare effectiveness data and information set, HEDIS, audited data.</p>		<p><b>Sec. 1888.</b> No changes from current law.</p>
<p><b>Medicaid Coverage for Breast Pumps</b></p> <p><b>Sec. 1890.</b> From the funds appropriated in part 1 for pharmaceutical services, the department shall ensure Medicaid recipients access to breast pumps to support and encourage breastfeeding. The department shall adjust Medicaid policy to, at a minimum, provide an individual double electric style pump to a breastfeeding mother when a physician prescribes such a device based on diagnosis of mother or infant. If the distribution method for pumps or other equipment is a department contract with durable medical equipment providers, the department shall guarantee providers stock and rent to Medicaid recipients without delay or undue restriction.</p>	<p>Striking current law.</p>		<p>Striking current law.</p>
<p><b>Healthy Kids Dental Program</b></p> <p><b>Sec. 1894.</b> (1) From the funds appropriated in part 1 for dental services, the department shall expand the healthy kids dental program to children who have not yet reached the age of 13 in Kent, Oakland, and Wayne Counties. This program expansion will improve access to necessary dental services for Medicaid-enrolled children.</p>	<p><b>Sec. 1894.</b> (1) From the funds appropriated in part 1 for dental services, the department shall expand the healthy kids dental program to <b>ALL</b> children <del>who have not yet reached the age of 13</del> in Kent, Oakland, and Wayne Counties. This program expansion will improve access to necessary dental services for Medicaid-enrolled children.</p>		<p><b>Sec. 1894.</b> (1) From the funds appropriated in part 1 for dental services, the department shall expand the healthy kids dental program to <b>ALL ELIGIBLE</b> children <del>who have not yet reached the age of 13</del> in Kent, Oakland, and Wayne Counties. This program expansion will improve access to necessary dental services for Medicaid-enrolled children.</p>



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Medical Services

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>(2) Outcomes and performance measures for the initiative under subsection (1) include, but are not limited to, the following:</p> <p>(a) The number of Medicaid-enrolled children under the age of 13 in Kent, Oakland, and Wayne Counties who visited the dentist in the prior year.</p> <p>(b) The number of dentists in Kent, Oakland, and Wayne Counties who will accept Medicaid payment for services to children.</p> <p>(c) The change in dental utilization in Kent, Oakland, and Wayne Counties, before and after implementation.</p>	<p>(2) Outcomes and performance measures for the initiative under subsection (1) include, but are not limited to, the following:</p> <p>(a) The number of Medicaid-enrolled children <del>under the age of 13</del> in Kent, Oakland, and Wayne Counties who visited the dentist in the prior year.</p> <p>(b) The number of dentists in Kent, Oakland, and Wayne Counties who will accept Medicaid payment for services to children.</p> <p>(c) The change in dental utilization in Kent, Oakland, and Wayne Counties, before and after <b>FULL implementation OF THE HEALTHY KIDS DENTAL EXPANSION IN THESE COUNTIES.</b></p>		<p>(2) Concur with Executive.</p>
<p>(3) It is the intent of the legislature that the healthy kids dental program be expanded in the fiscal year ending September 30, 2017 to cover additional children in Kent, Oakland, and Wayne Counties.</p>	<p>Striking current law.</p>		<p>Striking current law.</p>
<p><b><i>Maintenance of Personal Care Services Rate Increase</i></b></p> <p><b>Sec. 1899.</b> From the funds appropriated in part 1 for personal care services, the department shall maintain the personal care services rate at the level in effect October 1, 2014.</p>	<p><b>Sec. 1899.</b> No changes from current law.</p>		<p><b>Sec. 1899.</b> No changes from current law.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES – Boilerplate for One-Time Appropriations

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b><u>ONE-TIME BASIS ONLY APPROPRIATIONS</u></b></p> <p><b><i>Pay for Success Contracts Pilot Projects for Maternal and Child Health Programs</i></b></p> <p><b>Sec. 1906.</b> (1) The department may initiate pay for success pilot projects to identify and deliver services to improve outcomes and lower costs for government services in this state. From the funds appropriated in part 1 for pay for success contracts, the department may initiate contracts with private and not-for-profit vendors, selected through a competitive bid process, to implement these pilot projects. Payments shall not be issued to funding intermediaries or vendors until contractual performance measures have been achieved and project savings have been confirmed by a third-party evaluator, certified by the department, and approved by the state budget director.</p>	Striking current law.		Striking current law.
<p>(2) Within 30 days, a copy of contracts executed pursuant to this section shall be provided to the chairs of the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office.</p>	Striking current law.		Striking current law.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES – Boilerplate for One-Time Appropriations

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>(3) Unexpended funds appropriated in part 1 for pay for success contracts are designated as work project appropriations, and any unencumbered or unallotted funds shall not lapse at the end of the fiscal year and shall be available for expenditures for the pay for success contracts under this section until the projects have been completed. All of the following are in compliance with section 451a of the management and budget act, 1984 PA 431, MCL 18.1451a:</p> <p>(a) The purpose of the projects is to coordinate cost-saving projects to the state with public-private partnerships.</p> <p>(b) The projects will be carried out through contracts with private and not-for-profit vendors.</p> <p>(c) The estimated cost of this work project is \$1,500,000.00.</p> <p>(d) The estimated work project completion date is September 30, 2020.</p>	Striking current law.		Striking current law.
<p><b><i>Drug Policy Initiatives</i></b></p> <p><b>Sec. 1907.</b> (1) From the funds appropriated in part 1 for drug policy initiatives, the department shall develop and begin implementation of a comprehensive plan that addresses the problem of drug abuse.</p>	Striking current law.		Striking current law.
<p>(2) Outcomes and performance measures for the new initiative under subsection (1) include, but are not limited to, the following:</p> <p>(a) A decrease in the number of residents of this state aged 12 and older who have experienced substance dependence or abuse in the past year.</p> <p>(b) A decrease in the number of residents of this state who have engaged in the nonmedical use of pain relievers or engaged in binge alcohol use.</p>	Striking current law.		Striking current law.



## DEPARTMENT OF HEALTH AND HUMAN SERVICES – Boilerplate for One-Time Appropriations

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
(3) The department shall not spend the funds appropriated in part 1 for drug policy initiatives until a statewide plan on these initiatives is issued by the governor and the statewide plan is submitted to the senate and house appropriations subcommittees on the department budget.	Striking current law.		Striking current law.
<p><b>Hospice Room and Board</b></p> <p><b>Sec. 1908.</b> The funds appropriated in part 1 for hospice services shall be expended to provide room and board for Medicaid recipients who meet hospice eligibility requirements and receive services at Medicaid enrolled hospice residences in this state. The qualifying hospice residences must be enrolled with Medicaid by October 1, 2014.</p>	Striking current law.		Striking current law.
<b>Sec. 1909.</b> (1) New Executive Language.	<p><b>SEC. 1909. (1) FROM THE INCREASED FUNDS APPROPRIATED IN PART 1 FOR FAMILY PRESERVATION AND SUPPORT SERVICES, THE DEPARTMENT SHALL EXPAND THE PARENT PARTNER PROGRAM AND THE FAMILY REUNIFICATION PROGRAM. THE PURPOSE OF THESE PROGRAM EXPANSIONS WILL BE TO ENHANCE FAMILY PRESERVATION AND SUPPORT SERVICES TO PREVENT THE NEED FOR FOSTER CARE, SHORTEN THE LENGTH OF TIME BETWEEN FOSTER CARE ENTRY AND REUNIFICATION, AND SUSTAIN PARENTAL PROGRESS FOLLOWING REUNIFICATION.</b></p>		<p><b>SEC. 1909. (1) FROM THE INCREASED FUNDS APPROPRIATED IN PART 1 FOR FAMILY PRESERVATION AND SUPPORT SERVICES, THE DEPARTMENT SHALL EXPAND THE PARENT PARTNER PROGRAM AND THE FAMILY REUNIFICATION PROGRAM. THE PURPOSE OF THESE PROGRAM EXPANSIONS WILL BE TO ENHANCE FAMILY PRESERVATION AND SUPPORT SERVICES TO PREVENT THE NEED FOR FOSTER CARE, SHORTEN THE LENGTH OF TIME BETWEEN FOSTER CARE ENTRY AND REUNIFICATION, AND SUSTAIN PARENTAL PROGRESS FOLLOWING REUNIFICATION.</b></p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES – Boilerplate for One-Time Appropriations

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>(2) New Executive Language.</p>	<p>(2) THE DEPARTMENT SHALL IDENTIFY SPECIFIC OUTCOMES AND PERFORMANCE MEASURES FOR THIS INITIATIVE, INCLUDING, BUT NOT LIMITED TO, THE FOLLOWING:</p> <p>(A) PERCENTAGE OF CHILDREN THAT WERE DISCHARGED FROM FOSTER CARE TO REUNIFICATION IN LESS THAN 12 MONTHS FROM THE DATE OF THE LATEST REMOVAL FROM HOME.</p> <p>(B) MEDIAN LENGTH OF STAY IN MONTHS FROM THE DATE OF THE LATEST REMOVAL FROM HOME UNTIL THE DATE OF DISCHARGE TO REUNIFICATION.</p> <p>(C) PERCENTAGE OF CHILDREN THAT RE-ENTERED FOSTER CARE IN LESS THAN 12 MONTHS FROM THE DATE OF DISCHARGE TO REUNIFICATION.</p> <p>(D) PERCENTAGE OF CHILDREN, WHO WERE VICTIMS OF A SUBSTANTIATED OR INDICATED MALTREATMENT ALLEGATION, THAT WERE NOT VICTIMS OF ANOTHER SUBSTANTIATED OR INDICATED MALTREATMENT ALLEGATION WITHIN A SIX-MONTH PERIOD FROM THE DATE OF DISCHARGE TO REUNIFICATION.</p> <p>(E) MEASURABLE EFFECTS OF THIS PROGRAM EXPANSION ON REDUCING THE RATE OF CHILDREN WHO LIVE IN FAMILIES WITH INCOMES BELOW THE FEDERAL POVERTY LEVEL.</p>		<p>(2) THE DEPARTMENT SHALL IDENTIFY SPECIFIC OUTCOMES AND PERFORMANCE MEASURES FOR THIS INITIATIVE, INCLUDING, BUT NOT LIMITED TO, THE FOLLOWING:</p> <p>(A) PERCENTAGE OF CHILDREN WHO WERE DISCHARGED FROM FOSTER CARE TO REUNIFICATION IN LESS THAN 12 MONTHS FROM THE DATE OF THE LATEST REMOVAL FROM HOME.</p> <p>(B) MEDIAN LENGTH OF STAY IN MONTHS FROM THE DATE OF THE LATEST REMOVAL FROM HOME UNTIL THE DATE OF DISCHARGE TO REUNIFICATION.</p> <p>(C) PERCENTAGE OF CHILDREN WHO RE-ENTERED FOSTER CARE IN LESS THAN 12 MONTHS FROM THE DATE OF DISCHARGE TO REUNIFICATION.</p> <p>(D) PERCENTAGE OF CHILDREN, WHO WERE VICTIMS OF A SUBSTANTIATED OR INDICATED MALTREATMENT ALLEGATION, WHO WERE NOT VICTIMS OF ANOTHER SUBSTANTIATED OR INDICATED MALTREATMENT ALLEGATION WITHIN A 6-MONTH PERIOD FROM THE DATE OF DISCHARGE TO REUNIFICATION.</p> <p>(E) MEASURABLE EFFECTS OF THIS PROGRAM EXPANSION ON REDUCING THE RATE OF CHILDREN WHO LIVE IN FAMILIES WITH INCOMES BELOW THE FEDERAL POVERTY LEVEL.</p>





## DEPARTMENT OF HEALTH AND HUMAN SERVICES – Boilerplate for One-Time Appropriations

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>(3) New Executive Language.</p>	<p>(3) UNEXPENDED FUNDS APPROPRIATED IN PART 1 FOR FAMILY PRESERVATION AND SUPPORT SERVICES ARE DESIGNATED AS WORK PROJECT APPROPRIATIONS, AND ANY UNENCUMBERED OR UNALLOTTED FUNDS SHALL NOT LAPSE AT THE END OF THE CURRENT FISCAL YEAR AND SHALL BE AVAILABLE FOR EXPENDITURES FOR THE PARENT PARTNER PROGRAM AND THE FAMILY REUNIFICATION PROGRAM UNTIL THE PROJECTS HAVE BEEN COMPLETED. ALL OF THE FOLLOWING ARE IN COMPLIANCE WITH SECTION 451A OF THE MANAGEMENT AND BUDGET ACT, 1984 PA 431, MCL 18.1451A:</p> <p>(A) THE PURPOSE OF THE PROJECTS IS TO EXPAND AND ENHANCE FAMILY PRESERVATION AND SUPPORT SERVICES TO PREVENT THE NEED FOR FOSTER CARE, SHORTEN THE LENGTH OF TIME BETWEEN FOSTER CARE ENTRY AND REUNIFICATION, AND SUSTAIN PARENTAL PROGRESS FOLLOWING REUNIFICATION.</p> <p>(B) THE PROJECTS WILL BE CARRIED OUT THROUGH CONTRACTS WITH PRIVATE AND NOT-FOR-PROFIT VENDORS TO EXPAND THE PARENT PARTNER PROGRAM AND FAMILY REUNIFICATION PROGRAM TO ADDITIONAL COUNTIES THROUGHOUT THE STATE.</p> <p>(C) THE ESTIMATED COST OF THIS WORK PROJECT IS \$10,000,000.00.</p> <p>(D) THE ESTIMATED WORK PROJECT COMPLETION DATE IS SEPTEMBER 30, 2019.</p>		<p>(3) THE PROJECTS WILL BE CARRIED OUT THROUGH CONTRACTS WITH PRIVATE AND NOT-FOR-PROFIT VENDORS TO EXPAND THE PARENT PARTNER PROGRAM AND FAMILY REUNIFICATION PROGRAM TO ADDITIONAL COUNTIES THROUGHOUT THE STATE.</p>



## DEPARTMENT OF HEALTH AND HUMAN SERVICES – Boilerplate for One-Time Appropriations

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p>Sec. 1910. New Executive Language.</p>	<p><b>SEC. 1910. FROM THE FUNDS APPROPRIATED IN PART 1 FOR THE FLINT DECLARATION OF EMERGENCY, THE DEPARTMENT SHALL ALLOCATE FUNDS TO ADDRESS NEEDS RELATED TO THE DECLARATION OF EMERGENCY ISSUED ON JANUARY 5, 2016. THESE FUNDS MAY SUPPORT, BUT ARE NOT LIMITED TO THE FOLLOWING ACTIVITIES:</b></p> <p><b>(A) EMERGENCY NUTRITION ASSISTANCE, NUTRITIONAL AND COMMUNITY EDUCATION, FOOD BANK RESOURCES, FOOD INSPECTIONS.</b></p> <p><b>(B) EPIDEMIOLOGICAL ANALYSIS AND CASE MANAGEMENT OF INDIVIDUALS AT RISK OF ELEVATED BLOOD LEAD LEVELS.</b></p> <p><b>(C) SUPPORT FOR CHILD AND ADOLESCENT HEALTH CENTERS, CHILDREN’S HEALTH CARE ACCESS PROGRAM AND PATHWAYS TO POTENTIAL PROGRAMMING.</b></p> <p><b>(D) NURSING SERVICES, EVIDENCE-BASED HOME VISITING PROGRAMS, INTENSIVE SERVICES AND OUTREACH FOR CHILDREN EXPOSED TO LEAD COORDINATED THROUGH LOCAL COMMUNITY MENTAL HEALTH ORGANIZATIONS.</b></p> <p><b>(E) DEPARTMENT FIELD OPERATIONS COSTS.</b></p> <p><b>(F) ASSESSMENT OF POTENTIAL LINKAGES TO OTHER DISEASES.</b></p>		<p><b>SEC. 1910. FROM THE FUNDS APPROPRIATED IN PART 1 FOR THE <del>FLINT</del> DRINKING WATER DECLARATION OF EMERGENCY, THE DEPARTMENT SHALL ALLOCATE FUNDS TO ADDRESS NEEDS <del>RELATED TO THE</del> IN A CITY IN WHICH A DECLARATION OF EMERGENCY <b>WAS</b> ISSUED ON JANUARY 5, 2016 <b>BECAUSE OF DRINKING WATER CONTAMINATION.</b> THESE FUNDS MAY SUPPORT, BUT ARE NOT LIMITED TO THE FOLLOWING ACTIVITIES:</b></p> <p><b>(A) EMERGENCY NUTRITION ASSISTANCE, NUTRITIONAL AND COMMUNITY EDUCATION, FOOD BANK RESOURCES, FOOD INSPECTIONS.</b></p> <p><b>(B) EPIDEMIOLOGICAL ANALYSIS AND CASE MANAGEMENT OF INDIVIDUALS AT RISK OF ELEVATED BLOOD LEAD LEVELS.</b></p> <p><b>(C) SUPPORT FOR CHILD AND ADOLESCENT HEALTH CENTERS, CHILDREN’S HEALTH CARE ACCESS PROGRAM AND PATHWAYS TO POTENTIAL PROGRAMMING.</b></p> <p><b>(D) NURSING SERVICES, EVIDENCE-BASED HOME VISITING PROGRAMS, INTENSIVE SERVICES AND OUTREACH FOR CHILDREN EXPOSED TO LEAD COORDINATED THROUGH LOCAL COMMUNITY MENTAL HEALTH ORGANIZATIONS.</b></p> <p><b>(E) DEPARTMENT FIELD OPERATIONS COSTS.</b></p> <p><b>(F) ASSESSMENT OF POTENTIAL LINKAGES TO OTHER DISEASES.</b></p>



**DEPARTMENT OF HEALTH AND HUMAN SERVICES –  
Boilerplate for One-Time Appropriations**

FY 2015-16 CURRENT LAW	FY 2016-2017		
Sec. 1911. New House Language.	EXECUTIVE	SENATE	HOUSE
			<p>SEC. 1911. FROM THE FUNDS APPROPRIATED IN PART 1 FOR OPIATE PREVENTION PILOT, THE DEPARTMENT SHALL DEVELOP A PILOT PROGRAM TO DEVELOP A GENOMIC BASED TEST TO PREDICT OPIOID RESPONSE AND ABUSE. THE PILOT PROGRAM SHALL BE OPERATED BY WESTERN MICHIGAN UNIVERSITY HOMER STRYKER MD SCHOOL OF MEDICINE AND SHALL IDENTIFY RELEVANT BIOMARKERS THAT PREDICT RISK OF OPIOID ABUSE AND OVERDOSE BY ANALYZING ARCHIVED BLOOD SAMPLES FROM OPIATE OVERDOSE CASES. THE PILOT PROGRAM SHALL UTILIZE A CUSTOM SCREENING PANEL DEVELOPED BY A GENOMICS LAB THAT IS CERTIFIED UNDER THE CLINICAL LABORATORY IMPROVEMENT AMENDMENTS OF 1988, PUBLIC LAW 100-578, WITH AN EXISTING STATEWIDE CAPACITY. THE GENOMICS LAB SELECTED BY THE DEPARTMENT WILL CONDUCT THE TESTS OF THE BLOOD SAMPLES USING THE CUSTOMIZED SCREENING PANEL. ARCHIVED BLOOD SAMPLES FROM MULTIPLE COUNTIES IN MICHIGAN WILL BE ANALYZED. THE RESULTS OF THE PILOT PROGRAM WILL BE PRESENTED TO THE DEPARTMENT, THE SENATE AND HOUSE APPROPRIATIONS SUBCOMMITTEES ON THE DEPARTMENT BUDGET, AND THE SENATE AND HOUSE FISCAL AGENCIES BY JUNE 1 OF THE CURRENT FISCAL YEAR.</p>



**DEPARTMENT OF HEALTH AND HUMAN SERVICES –  
Boilerplate for One-Time Appropriations**

FY 2015-16 CURRENT LAW	FY 2016-2017		
Sec. 1912. New House Language.	EXECUTIVE	SENATE	HOUSE
			SEC. 1912. FROM THE FUNDS APPROPRIATED IN PART 1 FOR MOBILE ELECTRONIC SERVICE VERIFICATION STUDY, THE DEPARTMENT SHALL ALLOCATE \$25,000.00 TO COMMISSION A STUDY TO REVIEW THE OUTCOMES AND PERFORMANCE IMPROVEMENTS OF DEVELOPING AND PILOTING A MOBILE ELECTRONIC SERVICE VERIFICATION SOLUTION FOR HOME HELP SERVICES THAT SHALL INCLUDE BIOMETRIC IDENTITY VERIFICATION TO CREATE ADMINISTRATIVE EFFICIENCIES, REDUCE ERROR, AND MINIMIZE FRAUD.



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Boilerplate for Part 2A

FY 2015-16 CURRENT LAW	FY 2016-2017		
	EXECUTIVE	SENATE	HOUSE
<p><b>PART 2A</b> <b>PROVISIONS CONCERNING ANTICIPATED APPROPRIATIONS FOR FISCAL YEAR 2016-2017</b></p> <p><b><u>GENERAL SECTIONS</u></b></p> <p><b><i>Fiscal Year 2016-17 Anticipated Appropriations</i></b></p> <p><b>Sec. 2001.</b> It is the intent of the legislature to provide appropriations for the fiscal year ending on September 30, 2017 for the line items listed in part 1. The fiscal year 2016-2017 appropriations are anticipated to be the same as those for fiscal year 2015-2016, except that the line items will be adjusted for changes in caseload and related costs, federal fund match rates, economic factors, and available revenue. These adjustments will be determined after the January 2016 consensus revenue estimating conference.</p>	<p><del>PART 2A</del> <del>PROVISIONS CONCERNING</del> <del>ANTICIPATED APPROPRIATIONS</del> <del>FOR FISCAL YEAR 2016-2017</del></p> <p>Delete current law.</p>		<p>PART 2A PROVISIONS CONCERNING ANTICIPATED APPROPRIATIONS FOR FISCAL YEAR <del>2016-2017</del> <b>2017-2018</b></p> <p><b>Sec. 2001.</b> It is the intent of the legislature to provide appropriations for the fiscal year ending on September 30, <del>2017</del> <b>2018</b> for the line items listed in part 1. The fiscal year <del>2016-2017</del> <b>2017-2018</b> appropriations are anticipated to be the same as those for fiscal year <del>2015-2016</del> <b>2016-2017</b>, except that the line items will be adjusted for changes in caseload and related costs, federal fund match rates, economic factors, and available revenue. These adjustments will be determined after the January <del>2016</del> <b>2017</b> consensus revenue estimating conference.</p>