# LINE ITEM AND BOILERPLATE SUMMARY

# HEALTH AND HUMAN SERVICES

Fiscal Year 2019-20
Public Act 67 of 2019
Senate Bill 139 as Enacted

Including Vetoes, State Administrative Board Transfers and Supplemental Appropriations through December 31, 2019



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January 2020

TO: Members of the Michigan House of Representatives

The House Fiscal Agency has prepared a **Line Item Summary** for each of the FY 2019-20 appropriation acts. Each **Summary** contains line-by-line appropriation and revenue source detail, and a brief explanation of each boilerplate section in the appropriation bill.

In this report, line item vetoes are presented in the following manner: appropriation amounts shown in strikeout are those that appear in the enrolled bill; amounts shown directly below strikeout amounts reflect the effect of the veto.

Line Item Summaries are available on the HFA website (www.house.mi.gov/hfa), or from Kathryn Bateson, Administrative Assistant (373-8080 or kbateson@house.mi.gov).

Mary Ann Cleary, Director

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#### **GLOSSARY**

#### **STATE BUDGET TERMS**

#### Line Item

Specific funding amount in an appropriation bill which establishes spending authorization for a particular program or function.

#### **Boilerplate**

Specific language sections in an appropriation bill which direct, limit, or restrict line-item expenditures, express legislative intent, and/or require reports.

#### Lapse

Appropriated amounts that are unspent or unobligated at the end of a fiscal year; appropriations are automatically terminated at the end of a fiscal year unless otherwise provided by law.

#### **Work Project**

Account authorized through statutory process which allows appropriated spending authorization from one fiscal year to be utilized for expenditures in a succeeding fiscal year or years for a specific project or purpose.

#### **APPROPRIATIONS AND FUND SOURCES**

#### **Appropriations**

Authority to expend funds for a particular purpose. An appropriation is not a mandate to spend.

**Gross:** Total of all applicable appropriations in an appropriation bill.

**Adjusted Gross:** Net amount of gross appropriations after subtracting interdepartmental grants (IDGs) and intradepartmental transfers (IDTs).

#### Interdepartmental Grant (IDG) Revenue

Funds received by one state department from another state department—usually for service(s) provided.

#### Intradepartmental Transfer (IDT) Revenue

Funds transferred from one appropriation unit to another within the same departmental budget.

#### **Federal Revenue**

Federal grant or match revenue; generally dedicated to specific programs or purposes.

#### **Local Revenue**

Revenue received from local units of government for state services.

#### **Private Revenue**

Revenue from non-government entities: rents, royalties or interest payments, payments from hospitals or individuals, or gifts and bequests.

#### State Restricted Revenue

State revenue restricted by the State Constitution, state statute, or outside restriction that is available only for specified purposes; includes most fee revenue; at yearend, unused restricted revenue generally remains in the restricted fund.

#### General Fund/General Purpose (GF/GP) Revenue

Unrestricted general fund revenue available to fund basic state programs and other purposes determined by the Legislature; unused GF/GP revenue lapses to the General Fund at the end of a fiscal year.

#### MAJOR STATE FUNDS

#### **General Fund**

The state's primary operating fund; receives state revenue not dedicated to another state fund.

#### School Aid Fund (SAF)

A restricted fund that serves as the primary state funding source for K-12 schools and Intermediate School Districts. Constitutionally, SAF revenue may also be used for postsecondary education.

#### **Budget Stabilization Fund**

The Countercyclical Economic and Budget Stabilization Fund (also known as the "rainy day fund"); the Management and Budget Act provides guidelines for making deposits into and withdrawals from the fund.

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

The Department of Health and Human Services (DHHS) is responsible for the development and implementation of state health policy, and for a wide range of publicly funded services to assist Michigan's most vulnerable individuals and families.

Health services programs include Medicaid, Healthy Michigan Plan, community mental health and substance use disorder programs, state mental health facilities, public health programs addressing environmental health and infectious and chronic disease, and aging and adult protective services.

Human services programs include public assistance of cash support, food, and emergency needs; foster care, adoption, family preservation, enforcement of child support laws, juvenile justice services, rehabilitative services, crime victim services, and licensing of child welfare service providers. Local county DHHS offices are supported throughout the state to provide direct services.

6.0	Full-time equated (FTE) positions not in the state classified service.
16,005.0	Full-time equated (FTE) positions in the state classified service.  Note: based on 2,088 hours for 1.0 FTE position.
770.0	Average number of patients at four state-operated psychiatric hospitals, and the state Forensic Center.
\$26,452,349,600 \$26,519,879,700	Total of all applicable line item appropriations.
13,857,600	Revenue received from other departments or transferred within the department.
\$26,438,492,000 \$26,506,022,100	Gross appropriation less (or minus) interdepartmental grant (IDG) and intradepartmental transfer (IDT) revenue.
<del>557,217,500</del> 554,417,500	Total federal temporary assistance for needy families (TANF) block grant revenue.
573,830,400	Total non-TANF grant revenue received from federal departments and agencies for a capped amount.
<del>17,262,613,500</del> 17,308,990,600	Total other revenue received from federal departments and agencies, not including TANF or capped.
151,546,000	Revenue received from local units of government.
143,535,100	Revenue received from private individuals and entities.
49,768,700	Total Merit Award Trust Fund revenue from the 1998 master settlement agreement with tobacco companies.
<del>2,941,052,500</del> 2,929,165,200	Total other state revenue dedicated to a specific fund (other than the General Fund) or restricted for a specific purpose.
\$4,758,928,300 \$4,794,768,600	Unrestricted state revenue from taxes and other sources.
	\$26,452,349,600 \$26,519,879,700 13,857,600 \$26,519,879,700 \$26,506,022,100 \$57,217,500 554,417,500 573,830,400 17,308,990,600 151,546,000 143,535,100 49,768,700 2,929,165,200 \$4,758,928,300

#### **SECTION 102: DEPARTMENTAL ADMINISTRATION AND SUPPORT**

This appropriation unit provides funding for the Director and for centralized management, administrative, and policy functions of DHHS. The unit also supports administrative hearings, Inspector General, worker's compensation, and human services demonstration projects.

Full times assumted	0.0	Full time a sweeterd (FTF) is selting a set in the s		-:f:
Full-time equated unclassified positions	6.0	Full-time equated (FTE) positions not in the s	state clas	SITIEG SERVICE.
Full-time equated classified positions	829.6	Full-time equated (FTE) positions in the state classified service.		
Unclassified salaries – 6.0 FTE positions	\$1,223,600	Salaries of Department Director and five other unclassified position Director is appointed by the Governor; Director appoints of unclassified positions.		
		Funding Source(s):	TANF Federal GF/GP	73,900 319,100 830,600
		Related Boilerplate Section(s): None		
Administrative hearings officers – AD BOARD TRANSFER	<del>11,157,000</del> 11,337,900			aff, rent, and HHS programs,
		<u>Post-enrollment Note</u> : Administrative Boadditional \$180,900 GF/GP to reverse histori		
		Funding Source(s):	IDG TANF Federal GF/GP	465,300 507,600 4,729,100 <del>5,455,000</del> 5,635,900
		Related Boilerplate Section(s): None		
Demonstration projects – 7.0 FTE positions	7,358,400	Projects in human services program areas family recruitment, grant to Attorney General prosecution of sexual assault, food assistant funding for a violent offender re-entry initial youth, and Michigan 2-1-1 phone system granew demonstration projects replace expired projects.	for fraud per outread tive aime aime aime aime aime aime aime aim	prosecution and ch, federal grant d at delinquent
		Funding Source(s):	TANF Federal Local Private GF/GP	50,000 2,174,700 16,400 3,806,800 1,310,500
		Related Boilerplate Section(s): 307		

Departmental administration and management - 601.6 FTE positions

95,382,700

Funding for: FTEs, related costs, contractual services, supplies materials, and travel to carry out central administrative functions; and fringe benefits for Director and unclassified positions. Includes:

Executive Office Staff: Support staff in Director's Office and Deputy Directors' offices.

Financial Services: Accounting, federal reporting, budget, purchasing, grants management, coordination with SIGMA system (Statewide Integrated Governmental Management Applications).

Quality Assurance: Quality control reviews for Medicaid, Food Assistance Program, and Temporary Assistance for Needy Families (TANF) cases to determine payment accuracy.

Organizational and Infrastructure: Facility management, office and vehicle services, telecommunications, forms and mail management.

Contracts and Rate Setting: Contract and rate setting.

Legal Services: Legal affairs staff for the Department. Communications: External and internal communications.

Audit, Monitoring and Internal Control: Review and monitoring of

audits of department units, local offices, and contractors; Medicaid audit services and audit contracts

Fraud and Reimbursement/Recoupment: Oversight of Office of Inspector General and recoupment and data collection units.

Data management: Data management security and compliance for medical services and electronic health records.

Equal Opportunity and Diversity: Internal and external program policy on employment, disability advocacy, harassment prevention, and limited English speaking policy.

Interagency Collaboration: Collaboration with other state departments and faith-based and community agencies.

> Funding Source(s): IDG 686,900 **TANF** 8,620,300

Federal 40.163.800 Local 69,600 Restricted 682.500 GF/GP 45,159,600

Related Boilerplate Section(s): 205, 206, 207, 220, 230, 231, 232, 279, 295, 296, 299, 531, 1901, 1904

Michigan Community Service Commission - 14.0 FTE positions - AD **BOARD TRANSFER** 

10,682,400 11,657,700 Supports administration of the Commission and its program areas. Commission administers federal and state programs that encourage volunteerism and community service, including AmeriCorps, Learn and Serve, Volunteer Michigan, and Governor's Service Awards.

Post-enrollment Note: Administrative Board transferred in an additional \$975,300 GF/GP to reverse historic lapse savings.

> Funding Source(s): Federal 10.624.900

Private 44.100 GF/GP 13,400

988,700

Related Boilerplate Section(s): None

	<del>6,674,900</del> 7,522,200	Related Boilerplate Section(s): 316  Payments to DTMB for worker's compensation funding for wage, salary, and related fringely return to work under limited duty assign provisions of Worker's Compensation Administres against these costs.  Post-enrollment Note: Administrative Endditional \$847,300 GF/GP to reverse historical funding Source(s):  Related Boilerplate Section(s): None	ation claims a benefits for e ments in acc st; State of I	mployees who cordance with Michigan self- ferred in ar
	, ,	Payments to DTMB for worker's compensation funding for wage, salary, and related fringe return to work under limited duty assign provisions of Worker's Compensation Adinsures against these costs.  Post-enrollment Note: Administrative Endditional \$847,300 GF/GP to reverse history funding Source(s):	ation claims a benefits for el ments in acc st; State of I Board transf oric lapse sav TANF Federal Restricted	igainst DHHS imployees who cordance with Michigan self- ferred in ar vings.  396,200 2,104,200 40,000 4,134,500
	, ,	Payments to DTMB for worker's compensation funding for wage, salary, and related fringe return to work under limited duty assign provisions of Worker's Compensation Actinsures against these costs.  Post-enrollment Note: Administrative Endditional \$847,300 GF/GP to reverse history	ation claims a benefits for el ments in acc st; State of I Board transf oric lapse sav	gainst DHHS mployees who cordance with Michigan self ferred in ar vings.
	, ,	Payments to DTMB for worker's compensation funding for wage, salary, and related fringe return to work under limited duty assign provisions of Worker's Compensation Active	ation claims a benefits for e ments in acc	gainst DHHS mployees who
Worker's compensation – AD BOARD TRANSFER		Related Boilerplate Section(s): 316		3,072,100
			J. , J.	3,072,100
		Funding Source(s):	TANF Federal Restricted GF/GP	1,751,200 2,426,700 52,700
Terminal leave payments	7,302,700	Funding for expenditures when employee and other employee costs.	s leave state	e employmen
		Related Boilerplate Section(s): None		
			TANF Federal Private Restricted GF/GP	10,698,900 25,804,200 36,400 494,900 30,615,200
		Funding Source(s):	IDG	593,500
Property management	68,243,100	Payments for rental of office space in powned buildings for department administration offices and to DTMB for building maintenar costs for state-owned buildings occupied Cass, Cadillac Place, Grand Tower, MDHH Complex-Joint Laboratory. Also supports the Maxey Training School facilities and function-capital-related equipment.	ration and fonce, security, by DHHS, shall Grant	or local DHHS and operating such as Lewis and Rortland Rortlace of the W.J
		Related Boilerplate Section(s): 672, 1505,	1507	
		Funding Source(s):	IDG TANF Federal GF/GP	198,200 874,800 13,421,100 11,467,500
Office of inspector general – 207.0 FTE positions	23,301,000	FTEs, related costs, supplies, materials, travel, and contracts for to Office of Inspector General, to investigate allegations and suspect cases of fraud involving DHHS programs by providers, recipients a vendors; review administrative policies and procedures, a recommend ways to deter and detect fraud. Also funds Front E Eligibility (FEE) agents at local DHHS offices to investigate cases protocompletion of application process. Note: Funding for Inspect General program is also included in Sec. 121 Medical Service Administration line item.		

STATE GENERAL FUND/ GENERAL PURPOSE	<del>\$102,058,400</del> \$104,061,900	Unrestricted state revenue from taxes and other sources.
Total other state restricted revenues	1,270,100	Revenue from newborn screening services fees, certificate of need fees, and Michigan Health Initiative Fund revenue from the software tax (1987 PA 258).
Total private revenues	3,887,300	Includes parking fee revenue from DHHS employee parking at Capitol Commons, a privately-owned building; and revenue from private sources for human services demonstration projects.
Total local revenues	86,000	Total revenue from local units of government supporting human services demonstration projects.
Total other federal revenues	70,748,600	Includes • children's health insurance program Title XXI funds • Medicaid random moment sampling (RMS) cost revenue • Medicaid Title XIX funds • RMS cost revenue • substance abuse prevention and treatment block grant • Victims of Crime Act justice assistance grant funds • women, infants, and children (WIC) grant revenue • other grants supporting health and human services administration and central services functions
Capped federal revenues	31,019,200	Total non-TANF revenue from certain federal grants awarded for a capped amount; supports most line items in this appropriation unit.
Social security act, temporary assistance for needy families	22,972,900	Total federal Temporary Assistance for Needy Families (TANF) block grant revenues; supports most line items in this appropriation unit.
IDG from DTMB - office of retirement services	600	Payment per interdepartmental agreement with DTMB to provide retirement disability determination services for state employees, police, judges, and school teachers.
IDG from department of education	1,943,300	Grant from the Department of Education to administer eligibility determinations, inspector general activities, and other activities for Child Development and Care (CDC) program. CDC program transferred from former DHS to Department of Education in 2011.

#### **SECTION 103: CHILD SUPPORT ENFORCEMENT**

These line items support the state's child support enforcement system. Appropriations provide funding for state staff involved in state-level enforcement activities as well as legal support contracts that fund local enforcement efforts through county Friends of the Court and county prosecutor's offices.

Full-time equated classified positions	185.7	Full-time equated (FTE) positions in the state classified service.	
Child support enforcement operations – 179.7 FTE positions – AD BOARD TRANSFER	\$22,909,500 \$23,464,900		
		Funding Source(s): Federal 14,810,400 GF/GP 8,099,100 8,654,500	
		Related Boilerplate Section(s): 401, 409	
Child support incentive payments	24,409,600	Payments to county Friends of the Court and county prosecutir attorneys from federal child support incentive funds; funding Michigan is by formula using prior-year child support performance measures related to paternity establishment, support ordestablishment, payment collection levels, arrearage collection level and cost effectiveness (collections divided by administrative costs state shares part of the incentive funds with counties (county payme based on county-level performance related to listed measures GF/GP provides additional funds to local units to offset FY 2011-1 federal budget reduction.	
		Funding Source(s): Federal 14,944,600 GF/GP 9,465,000	
		Related Boilerplate Section(s): 401	

STATE GENERAL FUND/ GENERAL PURPOSE	<del>\$25,910,300</del> \$27,038,900	Unrestricted state revenue from taxes and other sources.		
Total other federal revenues	142,584,500	Total other revenue received from federal departments and agencies, not including TANF or capped. Includes Social Security Act Title IV-D Child Support Program funding.		
GROSS APPROPRIATION	\$168,494,800 \$169,623,400	Total of all applicable line item appropriations.		
		Related Boilerplate Section(s): None		
		Funding Source(s): Federal 5,444,500 GF/GP 2,704,100		
State disbursement unit – 6.0 FTE positions	8,148,600	Contractual payments to private vendor responsible for operation of the State Disbursement Unit, which administers collection and distribution of child support payments statewide. Also supports salary, fringe benefit, travel, contractual services, and supply costs for state staff responsible for contract oversight and program policy.		
		Related Boilerplate Section(s): 401, 409, 410		
		Funding Source(s): Federal 107,385,000 GF/GP 5,642,100 6,215,300		
		<u>Post-enrollment Note</u> : Administrative Board transferred in \$573,200 GF/GP to reverse historic lapse savings.		
Legal support contracts – AD BOARD TRANSFER	<del>113,027,100</del> 113,600,300			

#### **SECTION 104: COMMUNITY SERVICES AND OUTREACH**

The Bureau of Community Services and Outreach administers funding and provides training and technical assistance to the state's network of Community Action Agencies. The Bureau was established in 2003 PA 123 to administer programs to reduce poverty and increase economic opportunity and self-sufficiency for low-income persons. This appropriation unit also contains funding authorization for programs concerning the homeless, domestic and sexual violence prevention, rape prevention, child advocacy centers, Michigan's sexual assault evidence kit tracking system, and crime victim support programs.

Full-time equated classified positions	65.6	Full-time equated (FTE) positions in the	state classified service.	
Bureau of community services and outreach – 20.0 FTE positions	\$3,439,300	Salary, fringe benefit, travel, contractual services, and supply costs of Bureau, which provides grant management and technical assistance to local Community Action Agencies receiving federal funds from DHHS though Weatherization and Community Services Block Grant programs.		
		Funding Source(s):	Federal 3,439,300	
		Related Boilerplate Section(s): None		
Child advocacy centers – 0.5 FTE position – AD BOARD TRANSFER	<del>2,407,000</del> 1,407,100	Supports child advocacy centers across sexual abuse. Restricted funding is exercised (2008 PA 544). Funding admin and Treatment Board.	earmarked civil infraction fee	
		<u>Post-enrollment Note</u> : Administrative BogF/GP to other programs.	pard transferred out \$999,900	
		Funding Source(s):	Restricted 1,407,000 GF/GP <del>1,000,000</del> 100	
		Related Boilerplate Section(s): 459		
Community services and outreach administration – 12.0 FTE positions	1,672,200	Funding for administrative staffing coprograms, including the Housing and oversees: Emergency Shelter, R Supportive Housing Initiative, Upper F Program; Family Re-Housing Program, State of Michigan Leasing Assistance Persons with AIDS, Projects for Ass Homelessness (PATH), Cooperative Agr Individuals (CABHI), and SSI/SSDI Out (SOAR).	d Homeless Division which ural Homeless Permanent Peninsula Transitional Living Continuum of Care Program, e, Housing Opportunities for sistance in Transitions from reements to Benefit Homeless	
		Funding Source(s):	Federal 234,700 GF/GP 1,437,500	
		Related Boilerplate Section(s): None		
Community services block grant	25,840,000	Funds to regional Community Action A services programs (based on local ne services, counseling/financial managem and low-income housing assistance.	eeds) supporting emergency	
		Funding Source(s):	Federal 25,840,000	
		Related Boilerplate Section(s): None		

Crime victim grants administration services – 17.0 FTE positions	2,236,000	FTEs, related costs, and contracts to r programs and grants, provide public publications for crime victims, support Commission, and administer statewide Victim Notification Network (MCVNN Information and Notification Everyday) a	awareness, cort Crime Vic automated M ) using the	outreach, and ctim Services ichigan Crime VINE (Victim
		Funding Source(s):	Federal Restricted	660,400 1,575,600
		Related Boilerplate Section(s): 452		
Crime victim justice assistance grants	99,279,300	Grants to public and private non-profit a crime victims including crisis counseling, therapy, shelter, and referral, with priority spousal abuse, child abuse, and uncountered survivors of homicide and drunk driving.	personal and le y to victims of s	egal advocacy, sexual assault,
		Funding Source(s):	Federal	99,279,300
		Related Boilerplate Section(s): 452		
Crime victim rights services grants – AD BOARD TRANSFER	<del>18,870,000</del> 19,869,900	Funding for compensation as payor of lasuffer bodily injury for medical exassistance, and loss of earnings caused to health care providers for victim forer assault (SAFE Response); training enforcement, sheriffs, courts, jails, an inform, consult, and protect victims of cincluding victim advocate programs in court the Crime Victim Notification Network cowith jails to inform crime victims of per court dates.	penses, coun by the injury; resic exams related for local production of the country prosecution of the prosecution of the country	seling, burial eimbursement ated to sexual secutors, law cies to notify, ed by statute, or offices; and ecutors' offices
		<u>Post-enrollment Note</u> : Administrative Bo Crime Victim's Rights Fund from Ho Assistance line item to this line item.		
		Funding Source(s):	Federal Restricted	3,070,000 <del>15,800,000</del> 16,799,900
		Related Boilerplate Section(s): 458		
Domestic violence prevention and treatment – 15.6 FTE positions	17,915,700	Funds the Michigan Domestic and Sex Treatment Board; emergency shelter and information, referrals, advocacy) to dome children; educating service providers, prosecutors, judicial systems, and polic treating domestic and sexual violence supportive housing program, and fed projects.	related service estic violence violence violence law enforcem y makers on p ce; also func	es (counseling, ctims and their ent agencies, reventing and ls transitional
		Funding Source(s):	TANF Federal Restricted GF/GP	5,483,200 9,506,500 1,355,500 1,570,500
		Related Boilerplate Section(s): 523, 645	5, 653	

GROSS APPROPRIATION	\$229,250,500 \$228,725,500	Total of all applicable line item appropriations.		
		Related Boilerplate Section(s): None		
		Funding Source(s): Federal 15,505,000		
Weatherization assistance	15,505,000	Funds to regional Community Action Agencies for weatherizatio costs associated with homes occupied by low-income clients. Grant i from U.S. Department of Energy.		
		Related Boilerplate Section(s): 457		
		Funding Source(s): Restricted 800,000		
tracking system		provides secure electronic access for victims and is able t accommodate concurrent data entry through various mechanisms including web entry through computer, smartphone, or scannin device when kits are collected.		
Uniform statewide sexual assault evidence kit	800,000	Funding for the statewide tracking system established to track th submission and status of sexual assault evidence kits. The system		
		Related Boilerplate Section(s): 450		
		Funding Source(s): TANF 525,000		
School success partnership program – <b>VETOED</b>	<del>525,000</del> 0	Grant to Northeast Michigan Community Service Agency to expant the School Success Partnership Program for students at risk cacademic failure.		
		Related Boilerplate Section(s): None		
		Funding Source(s): TANF 1,094,000 Federal 978,300 Restricted 3,000,000 GF/GP 25,000		
Rape prevention and services – 0.5 FTE position	5,097,300	Services for prevention and treatment of sexual violence. DHH contracts with both non-profit and public agencies for counseling advocacy, information, education, and referral services. Restricte funding is earmarked civil infraction fee revenue (2008 PA 546 Funding administered by the Michigan Domestic and Sexual Violence Prevention and Treatment Board.		
		Related Boilerplate Section(s): None		
		Funding Source(s): Federal 12,325,400 GF/GP 705,600		
Housing and support services	13,031,000	Contracts and grants for federal housing and rental assistance programs for individuals with mental illness, substance use disorders and developmental disabilities who are homeless or at risk of homelessness, and housing assistance programs for individuals livin with AIDS.		
		Related Boilerplate Section(s): 453, 454, 455, 456		
		Funding Source(s): TANF 6,162,600 Federal 3,613,900 GF/GP 12,856,200		
Homeless programs	to provide shelters through either bed space or motel nig homeless persons; also includes demonstration project re through federal Housing and Urban Development.			

STATE GENERAL FUND/ GENERAL PURPOSE	<del>\$17,594,800</del> \$16,594,900	Unrestricted state revenue from taxes and other sources.	
Crime victim's rights fund	<del>17,690,600</del> 18,690,500	Revenue generated through fees assessed against convicted criminal defendants.	
Child advocacy centers fund	1,407,000	Civil infraction fee revenue earmarked to support child advocacy centers.	
Sexual assault victims' prevention and treatment fund	3,000,000	Civil infraction fee revenue earmarked to support victims of sexual assault.	
Sexual assault evidence tracking fund	800,000	Funding appropriated by law for the development and implementation of a uniform statewide sexual assault evidence kit tracking system.	
Compulsive gambling prevention fund	1,040,500	Revenue generated through statutory contributions from private Detroit casinos, the State Lottery, and horse racing industry that are dedicated to domestic abuse prevention.	
Total other federal revenues	115,569,800	Total other revenue received from federal departments and agencies, not including TANF or capped; includes Victims of Crime Act justice assistance grant, and Victims of Crime Act victim compensation grant.	
Capped federal revenues	58,883,000	Total non-TANF capped federal grants revenue. Includes Community Services Block Grant funding, Department of Energy Weatherization revenues, Social Security Act Title XX Social Services Block Grant funds, and Housing and Urban Development funding.	
Social security act, temporary assistance for needy families	<del>13,264,800</del> 12,739,800	, , ,	

#### SECTION 105: CHILDREN'S SERVICES AGENCY - CHILD WELFARE

This appropriation unit contains funding authorization for child welfare programs and administration related to the requirements within the federal Children's Rights settlement agreement. In October 2008, the state reached a legal settlement with the advocacy group Children's Rights who alleged that the state's child welfare system was broken and was harming the children under the supervision of the state. After renegotiation in February 2016, a new agreement, the Implementation, Sustainability, and Exit Plan (ISEP) went into effect. The agreement outlines specific changes to the state's child welfare system. This section includes policy and administrative oversight for foster care services, staffing costs, Child Care Fund, adoption subsidies, child protective services, youth in transition, and the federal settlement monitor cost. This appropriation unit also funds family preservation programs, the Children's Trust Fund, and the licensing of child welfare service providers.

Full-time equated classified positions	4,047.2	Full-time equated (FTE) positions in the s	state classifi	ed service.
Adoption subsidies	\$197,521,700	Adoption subsidy and medical subsidy payments to adoptive families to facilitate placing special needs children (e.g., large sibling groups older children, handicapped children, minority children) that canno or should not be returned home into an adoptive home; adoption subsidy payments based on equivalent foster care rate for the child		
		Funding Source(s):	TANF Federal GF/GP	50,663,000 86,726,900 60,131,800
		Related Boilerplate Section(s): 534, 540		
Adoption support services – 10.0 FTE positions	34,688,800 33,738,900	Payments to private adoption agence placements and finalizations of children in Payment based on timeliness of plas Supports staff costs in the Michigan Contracts to operate the Michigan Adoromatic (MARE) system, post-adoption resource consultants, and Parent-to-Parent mentor Post-enrollment Note: Governor vetoed \$ to-Parent funding (Veto of Sec. 559 transferred out \$699,900 GF/GP to other Funding Source(s):	n the child vacement are Children's liption Resorters, addrs.  250,000 GF  ). Admini	welfare system.  Ind finalization.  Institute. Funds  Institute Exchange  Institute Ex
		Related Boilerplate Section(s): 527, 530 594	), 531, 533,	, ,
Attorney general contract	5,001,100	Payment to Attorney General for legal Wayne County on behalf of DHHS and cl for foster care or are already in foster care	hildren who	
		Funding Source(s):	Federal GF/GP	1,453,800 3,547,300
		Related Boilerplate Section(s): None		

Child abuse and neglect – children's justice act – 1.0 FTE position	626,400	Federal funding supports curriculum and training development for law enforcement, child protective services, child advocacy centers and child death review teams.
		Funding Source(s): Federal 626,400
		Related Boilerplate Section(s): None
Child care fund	228,211,300	State reimbursement of 50% to counties for care and treatment for children who are court wards and placed out of their homes and for in-home care services offered by counties approved by DHHS in lieu of out-of-home placement. State reimbursement to counties established through Social Welfare Act, MCL 400.117a. Also supports reimbursement to private child placing agencies for 100% of their administrative rates for new cases referred to private providers beginning October 1, 2013.
		Funding Source(s): TANF 34,369,100 Federal 3,180,700 Local 22,811,800 GF/GP 167,849,700
		Related Boilerplate Section(s): 501, 503, 505, 511, 513, 515, 516 519, 525, 531, 532, 533, 535, 537, 540, 546, 550, 551, 552, 564 567, 583, 589, 598, 701, 706, 707, 708
Child care fund – indirect cost allotment		Funding for indirect cost allotment payments from the Child Care Fund to counties.
		<u>Post-enrollment Note</u> : Governor vetoed line item. 2019 PA 154 restored \$3.5 million for program.
		Funding Source(s): GF/GP 4,211,400 3,500,000
		Related Boilerplate Section(s): 521
		Related Supplemental Boilerplate Section(s): 451
Child protection	800,300	Federal Child Abuse and Neglect grant funds for child protection initiatives. Funds child death review contract, medical services contract to assist CPS workers in diagnosing child injuries; new birth match program to identify infants born into households with prior terminations of parental rights due to abuse/neglect; and paternity testing contracts for children in the child welfare system.
		Funding Source(s): Federal 800,300
		Related Boilerplate Section(s): None
Child welfare administration travel	375,000	Payments to DTMB Vehicle and Travel Services for state vehicle usage, and reimbursement to DHHS staff in child welfare administration for approved travel, including mileage reimbursement lodging, and meals.
		Funding Source(s): TANF 109,300 Federal 140,400 GF/GP 125,300

Child welfare field staff - noncaseload compliance – 353.0 FTE positions	39,335,100	Funds salary and wage and fringe beneficintake, maltreatment in care unit, child whealth liaisons, and Michigan Youth Opportunity	welfare fundi	ng specialists,
		Funding Source(s):	TANF Federal GF/GP	18,180,200 11,356,400 9,798,500
		Related Boilerplate Section(s): None		
Child welfare institute – 51.0 FTE positions	9,315,000	Provides program-specific training to employees of private child welfare agencie protective services, foster care, adop systems. Includes salary, fringe benefit, t and supply costs for child welfare training	es who work v tion, and ju ravel, contra	within the child venile justice
		Funding Source(s):	TANF Federal GF/GP	1,773,300 3,365,200 4,176,500
		Related Boilerplate Section(s): 558, 585		
Child welfare licensing – 59.0 FTE positions	7,120,300	Funds salary and wage and fringe benefit Licensing Division. Division provides lice various organizations offering child we conducts on-site evaluations and complace compliance with state laws and administrational placing agencies, child caring instruments with total residential capacity for 1	censure and Ifare service int investigat ative rules. O stitutions, an	registration of s to children; ions to ensure versees 6,496 d child foster
		Funding Source(s):	TANF Federal GF/GP	3,100 2,251,900 4,865,300
		Related Boilerplate Section(s): 525, 532		
Child welfare medical/psychiatric evaluations – AD BOARD TRANSFER	<del>9,835,500</del> 10,428,500	Payment to medical service provider evaluation and diagnostic exams for fa protective services or foster care case.		
TRANSFER		<u>Post-enrollment Note</u> : Administrative Boa GF/GP to reverse historic lapse savings.	ard transferre	ed in \$593,000
		Funding Source(s):	Federal GF/GP	6,124,400 <del>3,711,100</del> 4,304,100
		Related Boilerplate Section(s): None		
Children's protective services – caseload staff – 1,615.0 FTE positions	162,849,600	Funds salary and wage and fringe b Protective Services (CPS) Investigation CPS ongoing case management. The caseload-to-worker ratios mandated in th settlement agreement, which are as fol investigations, 17:1 for CPS ongoing services.	s caseload sese workers be federal Ch lows: 12:1	staff. Includes have specific ildren's Rights
services – caseload staff –	162,849,600	Protective Services (CPS) Investigation CPS ongoing case management. The caseload-to-worker ratios mandated in th settlement agreement, which are as follows:	s caseload sese workers be federal Ch lows: 12:1	staff. Includes have specific ildren's Rights

Children's protective services supervisors – 387.0 FTE positions	45,708,900	Funds salary and wage and fringe benefit costs for supervisors of CPS caseload workers. These supervisors have a specific caseload worker-to-supervisor ratio mandated in the federal Children's Right settlement agreement of 5:1.
		Funding Source(s): TANF 23,928,100 Federal 11,475,000 GF/GP 10,305,800
		Related Boilerplate Section(s): 511, 514, 515, 518, 595
Children's services administration – 188.2 FTE positions – AD BOARD TRANSFER	<del>19,812,900</del> 20,405,900	Supports salary and wage and fringe benefits costs related to chilimeliar central office program and policy staff. Includes executive office staff and policy/program staff for:  Urban Field Operations Administration: Oversees child welfare fiel operations in 5 largest counties.  Adoption Subsidy Program Unit: Oversees program policy for adoption assistance programs.  Child Welfare Quality Improvement Unit: Conducts quality control reviews for child welfare program cases to determine payment and program accuracy.  Child Welfare Data Management Unit: Compiles data from DHHS and private agencies that relate to federal service reviews and the federal Children's Rights settlement agreement.  Guardianship Program Unit: Oversees program policy for guardianship program.  Protection and Prevention Division: Oversees program policy for child protective services.  Post-enrollment Note: Administrative Board transferred in \$593,00
		GF/GP to reverse historic lapse savings.
		Funding Source(s): TANF 4,863,800 Federal 6,031,700 GF/GP <del>8,917,400</del> 9,510,400
		Related Boilerplate Section(s): 514, 533, 536, 537
Children's trust fund administration – 12.0 FTE positions	590,700	Staff expenses, board costs, and information technology cost related to operations of the Children's Trust Fund, which administer programs aimed at preventing child abuse. Directs child abus prevention service providers and special projects, fund development efforts, training, technical assistance, evaluatio activities, fundraising auctions, and solicitations administered by the Children's Trust Fund.
		Funding Source(s): Federal 162,000 Restricted 367,000 GF/GP 61,700
		Related Boilerplate Section(s): 508
Children's trust fund grants	3,577,200	Supports Children Trust Fund Grants to local child abuse preventio
		councils.  Funding Source(s): Federal 891,300  Restricted 2,530,300  GF/GP 155,600
		Related Boilerplate Section(s): 508
		Totaled Dollerplate decitority. 000

Contractual services, supplies, and materials	10,155,600	Contractual services and overhead co operations at local DHHS offices. Major of phone costs, office supplies, postage, services, rental payments for lead employment verification services, legal overhead contracts and costs.	expenditures ir consultation, sused equipment	nclude cellular security guard ent, printing,
		Funding Source(s):	IDG TANF Federal GF/GP	35,000 1,786,200 3,620,400 4,714,000
		Related Boilerplate Section(s): 205, 220	0	
Court-appointed special advocates – AD BOARD TRANSFER	<del>500,000</del> 100	Supports court-appointed special advo- legal system for the best interests of chil or neglected.		
		<u>Post-enrollment Note</u> : Administrative B \$100 to other line items.	oard transferr	ed out all but
		Funding Source(s):	GF/GP	<del>500,000</del> 100
		Related Boilerplate Section(s): 508		
Education planners – 15.0 FTE positions	1,579,200	Funds salary and wage and fringe education planners to provide consultat in accessing educational servicing an education plans for older children.	ion and suppo	ort for children
		Funding Source(s):	TANF Federal GF/GP	463,600 547,800 567,800
		Related Boilerplate Section(s): None		
Family preservation and prevention services administration – 9.0 FTE positions	1,342,900	strengthen families and prevent chil	ld abuse/negl and Permane	ect; includes ency, Strong
		Funding Source(s):	TANF Federal GF/GP	1,135,700 176,300 30,900
		Related Boilerplate Section(s): 523(1)(2	2)	
			-	

Family preservation programs—15.0 FTE positions

45,994,700 46.820.900 Funds family preservation programs that provide direct services to families:

<u>Families First Program</u>: Intensive home-based intervention services provided through statewide contracts with local agencies to help strengthen families at risk of having a child removed from the home; services include training on parenting skills and finances, counseling, and family assessments.

<u>Family Reunification Program:</u> Funds available to local agencies under contracts with DHHS for intensive and flexible in-home services enabling an earlier return for children already placed in out-of-home settings.

<u>Family Preservation and Prevention Services Programs</u>: Allocates funding for Supported Visitation and Parent Partner contracts. Programs emphasize mentoring and enhanced support to parents with a child removed from their home.

<u>Child Protection and Permanency</u>: Funds community-based programs to support alternatives to out-of-home placement of children in families with low to moderate risk of having a child removed from the home; includes counseling, parenting classes, and other prevention services; also funds administrative costs related to the program.

<u>Post-enrollment Note</u>: Governor vetoed \$2.1 million Gross (\$1.0 million GF/GP) for 5.5% rate increase. 2019 PA 154 appropriated \$2.9 million GF/GP to this line item for Foster Care Supportive Visitation Program.

Funding Source(s): TANF 44,310,600

43,235,600

Federal 609,100

GF/GP 1,075,000

2,976,200

Related Boilerplate Section(s): 523(1)(2)(3)

Foster care payments

<del>261,677,800</del> 259,974,400 Foster care payments to foster care families and residential facilities providing institutional foster care and juvenile detention and treatment programs for DHHS-supervised children who are state or court wards. Also funds administrative rate payments to child placing agencies for purchased foster care and independent living services, contractual payments for counseling services and special reunification services, foster family home development contracts for recruitment and retention of foster families, and family incentive grants to assist with home improvements needed to certify foster homes. Local per diem costs for state wards are established through Youth Rehabilitation Services Act, MCL 803.305.

<u>Post-enrollment Note</u>: Administrative Board transferred out \$2.0 million GF/GP for West Michigan Partnership for Children (WMPC) to other line items and \$296,500 into this line item. 2019 PA 154 included boilerplate that required \$2.0 million distribution to the WMPC program, but did not replace transferred funding.

Funding Source(s): TANF 9,248,000

Federal 105,645,300 Private 1,770,700 Local 18,102,700 GF/GP 126,911,100 125,207,700

Related Boilerplate Section(s): 501, 502, 503, 507, 511, 513, 519, 525, 530, 531, 532, 533, 535, 536, 537, 540, 546, 550, 551, 552, 562, 564, 567, 573, 574, 583, 589, 701

Related Supplemental Boilerplate Section(s): 452

Foster care services - caseload staff – 966.0 FTE positions	93,195,800	Funds salary and wage and fringe benefit costs for direct case management field staff, foster care case management, foster home licensure, and purchase of service monitors. These workers have specific caseload-to-worker ratios mandated in the federal Children's Rights settlement agreement, which are as follows: 15:1 for foster care, 30:1 for foster home licensing.			
		Funding Source(s):	TANF Federal GF/GP	50,331,300 25,615,900 17,248,600	
		Related Boilerplate Section(s): 503, 50 595	04, 511, 514, 50	62, 564, 567,	
Foster care services supervisors – 227.0 FTE positions	29,535,000	Funds salary and wage and fringe supervisors of child welfare workers county offices. These supervisors have to-supervisor ratio mandated in the settlement agreement of 5:1.	located in the a specific cas	e DHHS local seload worker-	
		Funding Source(s):	TANF Federal GF/GP	15,461,300 7,414,600 6,659,100	
		Related Boilerplate Section(s): None			
Guardianship assistance program	10,411,200	Provides subsidy payments to legal gupermanent legal responsibility for childr who would otherwise continue to be receive support at equivalent levels to	en in the child we in foster care	velfare system e. Guardians	
		Funding Source(s):	Federal GF/GP	2,821,000 7,590,200	
		Related Boilerplate Section(s): 547, 58	38		
Interstate compact	179,600	Travel reimbursement costs and other of and materials for interstate movement and delinquents across state lines for purposes.	of abused/negl	ected children	
		Funding Source(s):	Federal GF/GP	36,700 142,900	
		Related Boilerplate Section(s): 513			
Peer coaches – 45.5 FTE positions	5,922,300	Funds salary and wage and fringe be located in the DHHS local offices to permanency planning conferences held decisions.	assist in the	facilitation of	
		Funding Source(s):	TANF Federal GF/GP	2,727,600 2,028,600 1,166,100	
		Related Boilerplate Section(s): None			
Performance based funding implementation – 3.0 FTE positions	1,454,500	Supports project team, the developme rates, MiTEAM contract, and project ev based child welfare system implements	aluation for the		
		Funding Source(s):	Federal GF/GP	377,300 1,077,200	
		Related Boilerplate Section(s): 503, 50	04		

Permanency resource managers – 28.0 FTE	3,317,600	Funds salary and wage and fringe benefit costs for staff responsible for reviewing long-term child welfare cases seeking permanency.		
positions		Funding Source(s):	TANF Federal GF/GP	446,500 1,444,000 1,427,100
		Related Boilerplate Section(s): None		
Prosecuting attorney contracts	3,879,500	Title IV-E federal funds for legal represe attorneys on behalf of DHHS and child foster care or are already in foster care; funds for training.	dren who are o	andidates for
		Funding Source(s):	TANF Federal	314,500 3,565,000
		Related Boilerplate Section(s): None		
Second line supervisors and technical staff – 54.0 FTE positions	9,184,800	Funds salary and wage and fringe be supervisors and technical staff that s welfare workers located in the DHHS loc	upervise and	support child
		Funding Source(s):	IDG TANF Federal GF/GP	55,300 1,993,000 3,662,300 3,474,200
		Related Boilerplate Section(s): None		
		Nelated Bollerplate Section(s). None		
Settlement monitor	2,034,100	Supports contract with Public Cataly monitoring contract mandated in the settlement agreement. In February 20 negotiated, the Implementation, Sustain Federal monitor is responsible for review the terms of the agreement.	e federal Child 016, a new ago nability, and Exi	dren's Rights reement was t Plan (ISEP).
Settlement monitor	2,034,100	Supports contract with Public Catalymonitoring contract mandated in the settlement agreement. In February 20 negotiated, the Implementation, Sustain Federal monitor is responsible for review	e federal Child 016, a new ago nability, and Exi	dren's Rights reement was t Plan (ISEP).
Settlement monitor	2,034,100	Supports contract with Public Catalymonitoring contract mandated in the settlement agreement. In February 20 negotiated, the Implementation, Sustain Federal monitor is responsible for review the terms of the agreement.	e federal Chilo 016, a new ag nability, and Exi wing DHHS co TANF Federal	dren's Rights reement was t Plan (ISEP). mpliance with 448,100 639,700
Settlement monitor  Strong families/safe children		Supports contract with Public Catalymonitoring contract mandated in the settlement agreement. In February 20 negotiated, the Implementation, Sustain Federal monitor is responsible for review the terms of the agreement.  Funding Source(s):	e federal Child 116, a new ag lability, and Exi wing DHHS co  TANF Federal GF/GP  ity collaborative oviding family s n, and adoptic blans based or d to the progr	dren's Rights reement was t Plan (ISEP). mpliance with 448,100 639,700 946,300 e programs to support, family on promotion local needs; am. Federal
Strong families/safe		Supports contract with Public Catalymonitoring contract mandated in the settlement agreement. In February 20 negotiated, the Implementation, Sustain Federal monitor is responsible for reviet the terms of the agreement.  Funding Source(s):  Related Boilerplate Section(s): 588  Statewide initiative to promote commun prevent child abuse and/or neglect by propreservation, time-limited reunification services; local collaboratives develop palso funds administrative costs related funding from Title IV-B (II) Family Preservations.	e federal Child 116, a new ag lability, and Exi wing DHHS co  TANF Federal GF/GP  ity collaborative oviding family s n, and adoptic blans based or d to the progr	dren's Rights reement was t Plan (ISEP). mpliance with 448,100 639,700 946,300 e programs to support, family on promotion local needs; am. Federal

Title IV-E compliance and accountability office – 4.0 FTE positions	435,700	Salary, fringe benefit, travel, contractual services, and supply co for office that ensures compliance with federal Social Security and Title IV-E regulations related to funding for foster care and adoption determining best practices in other states in maximizing federal money for eligible cases, and providing technical assistance to lo units and courts regarding Title IV-E caseloads.		
		Funding Source(s): TANF 5,7 Federal 241,9		
		GF/GP 188,9  Related Boilerplate Section(s): 517		
Youth in transition – 4.5 FTE positions	15,545,100	Program assists 14- to 20-year-olds who are, or have been, in for care based on abuse or neglect. Michigan Youth Opportun Initiative provides independent living services, including hour assistance, education and employment support, mentoring and skills training, education and training vouchers, and other assistate to meet basic needs. Also funds intervention programs aimerunaway and homeless youth through contracts with private nonposervice providers and staff costs for Youth in Transition program.  Note: One-time \$500,000 GF/GP funding for runaway and home		
		youth services programs was vetoed by the Governor along related boilerplate language in Section 596(2).		
		Funding Source(s): TANF 4,933,7 Federal 5,664,9 GF/GP 4,946,9		
		Related Boilerplate Section(s): 522, 523, 596(1) <del>(2)</del> (3), 825		
GROSS APPROPRIATION	\$1,278,526,600 \$1,276,674,200	Total of all applicable line item appropriations.		
IDG from department of education	90,300	Payment per interdepartmental agreement with Department Education to administer eligibility determinations, inspector gen activities, and other activities for Child Development and Care (C program. CDC program transferred from DHHS to Department Education through Executive Order 2011-8.		
Social security act, temporary assistance for needy families		Total federal Temporary Assistance for Needy Families (TA block grant revenues.		
Capped federal revenues	113,096,100	Total non-TANF capped federal grants revenue. Includes So Security Act Title XX Social Services Block Grant funding, So Security Act Title IV-B (I) Child Welfare Services Block Grant fund Social Security Act Title IV-B (II) Family Preservation and Fa Support Services funds, and Low-Income Home Energy Assistate Program (LIHEAP) funding.		
Total other federal revenues	252,530,500	Total other revenue received from federal departments and agencies, not including TANF or capped. Includes Social Security Act Title IV-E Foster Care and Adoption funding, Social Security Act Title IV-E Guardian Services funding, and Supplemental Nutrition Assistance Program (SNAP) funding.		
Private - collections	1,770,700	Total payments received from parents whose child is in foster ca		
Local funds - county chargeback	40,914,500	<u> </u>		
Children's trust fund	2,897,300	Contributions, primarily through income tax form donations, to Children's Trust Fund.		

STATE GENERAL FUND/ \$519,845,100 Unrestricted state revenue from taxes and other sources. \$519,067,700

#### SECTION 106: CHILDREN'S SERVICES AGENCY - JUVENILE JUSTICE

This unit funds two state juvenile justice facilities, various community-based delinquency programs, and the Committee on Juvenile Justice. The DHHS juvenile justice program serves adjudicated delinquent youth between the ages of 12 and 20 who have been committed to DHHS by the court.

Full-time equated classified 12 positions	20.5	Full-time equated (FTE) positions in the	state classified service.	
Bay Pines Center – 47.0 \$5,502, FTE positions	800	Direct operating costs for the state-operated secure juvenile just services provided at Bay Pines Center in Escanaba; primarily refle costs of facility staff, which includes direct care, medical, a education staff; also includes purchased medical, dental and mer health services from private providers, as well as food and utility cost Local revenues include county chargeback per diem costs establish through Youth Rehabilitation Services Act, MCL 803.305, and lo revenue from local intermediate school districts to support educat costs.		
		Funding Source(s):	Federal 268,000 Local 2,745,200 GF/GP 2,489,600	
		Related Boilerplate Section(s): 505, 520	0, 525, 537, 540	
Committee on juvenile 356, justice administration – 2.5	300	Administrative staff support for juvenile expenses related to Governor-appointed		
FTE positions		Funding Source(s):	Federal 192,700 GF/GP 163,600	
		Related Boilerplate Section(s): None		
Committee on juvenile 3,000, justice grants	,000	Federal grants distributed to suppor evaluation of state and local projects education, training, research, prevention rehabilitation programs in the area of programs to improve the juvenile justice	s to develop more effective on, diversion, treatment, and of juvenile delinquency and	
		Funding Source(s):	Federal 3,000,000	
		Related Boilerplate Section(s): None		
Community support 2,129, services – 3.0 FTE positions	400	Regional Detention Support Services productions without secure juvenile detention transportation, home detention, and proports re-entry programs.	on and facilities for tethering,	
		Funding Source(s):	Federal 629,900 GF/GP 1,499,500	
		Funding Source(s):  Related Boilerplate Section(s): 706		
County juvenile officers 3,904,	,300	· · · · · · · · · · · · · · · · · · ·	GF/GP 1,499,500  rograms and officers; officers ate grants are required under	
County juvenile officers 3,904,	300	Related Boilerplate Section(s): 706  Grants to counties in support of court provided by the section of the sect	GF/GP 1,499,500  rograms and officers; officers ate grants are required under	

STATE GENERAL FUND/ GENERAL PURPOSE	<del>\$8,667,100</del> \$9,655,300	Unrestricted state revenue from taxes a	and other sou	rces.
Local funds - county chargeback	4,698,000	Total revenue from local county units of go services.	vernment for ju	uvenile justice
Local funds - state share education funds	1,355,700	Total revenue from local intermediate education costs within state operated facil		ts to support
Capped federal revenues	8,556,700	Total non-TANF capped federal grants re Justice Grants and Social Security Act funding.		
GROSS APPROPRIATION	<del>\$23,277,500</del> \$24,265,700	Total of all applicable line item appropr	iations.	
		Related Boilerplate Section(s): 505, 520,	525, 537, 540	
		Funding Source(s):	Federal Local GF/GP	176,300 2,850,100 2,540,400
Shawono Center – 47.0 FTE positions	5,566,800	Direct operating costs for the state-opera services provided at Shawano Center in costs of facility staff, which includes education staff; also includes purchased in health services from private providers, as a Local revenues include county chargeback through Youth Rehabilitation Services Ad- revenue from local intermediate school di- costs.	Grayling; prir direct care, medical, denta well as food an oper diem cos ot, MCL 803.3	marily reflects medical, and al, and mental ad utility costs. ts established 05, and local
		Related Boilerplate Section(s): 537		, ,
		Funding Source(s):	Federal Local GF/GP	385,500 458,400 <del>1,974,000</del> 2,962,200
		<u>Post-enrollment Note</u> : Administrative Boa GF/GP to reverse historic lapse savings.	ard transferred	l in \$988,200
Juvenile justice, administration and maintenance – 21.0 FTE positions – AD BOARD TRANSFER	<del>2,817,900</del> 3,806,100	Administration and oversight by Bureau of administration (budget, policy, and con education, assignment, information technology purchase	tracts), qualit logy, and reint	y assurance,

#### **SECTION 107: PUBLIC ASSISTANCE**

Funding in this appropriation unit supports payments to individuals and families who are eligible for the various cash assistance programs such as the Family Independence Program (FIP), the Food Assistance Program (FAP), State Disability Assistance (SDA), and SSI State Supplementation. It also includes funding for food banks, multicultural programs, refugees, energy assistance, and emergency relief for eligible low-income populations.

Full-time equated classified positions	3.0	Full-time equated (FTE) positions in the state classified service.
Emergency services local office allocations	\$9,007,500	Funds allocated to local DHHS offices for emergency cash assistance for relocation services, home repairs, food, and other needs; assistance allowed only if emergency is not due to client negligence.
		Funding Source(s): TANF 5,165,000 GF/GP 3,842,500
		Related Boilerplate Section(s): 601, 610, 615, 645, 686
Family independence program – AD BOARD TRANSFER	<del>67,503,700</del> 68,449,700	Cash assistance program for low-income families with children. Family Independence Program (FIP) grants assist families in meeting basic subsistence needs; most recipient groups are single-parent families with one or more children with little or no earned income. Benefit levels vary depending on income and family size; average monthly grant to families is approximately \$379; also supports an annual clothing allowance for each school-aged child in a FIP group.
		<u>Post-enrollment Note</u> : Administrative Board transferred in an additional \$946,000 GF/GP to implement a child support pass through program to qualifying beneficiaries.
		Funding Source(s): TANF 52,991,700 Restricted 11,530,200 GF/GP 2,981,800 3,927,800
		Related Boilerplate Section(s): 229, 601, 606, 607, 615, 616, 619, 669, 677, 686
Food assistance program benefits	1,760,805,700	Supplements food purchasing power of low-income families/individuals with gross income below 200% of federal poverty guidelines; benefits based on income and household size; average monthly benefit is about \$223. 70% of FAP caseload receives no form of public cash assistance (i.e., FIP, SDA, or SSI).
		Funding Source(s): Federal 1,756,095,700 Restricted 4,710,000
		Related Boilerplate Section(s): 607, 615, 619, 653, 654, 686
Food Bank Council of Michigan	2,045,000	Contract payments to Food Bank Council of Michigan to support Mobile Food Bank program (transportation of donated food to food pantries in the state), Family Food Box program (pre-packaged food baskets to families facing emergencies), and Michigan Agricultural Surplus System (partnership with agricultural community to procure surplus produce).
		Funding Source(s): TANF 250,000 GF/GP 1,795,000
		Related Boilerplate Section(s): 660

### Indigent burial – AD BOARD TRANSFER

3,875,000 4,369,100 Payments to funeral homes, cemeteries, and other funeral service providers for the burial of indigent persons; limit of up to \$725 per burial. Also provides up to \$800 to funeral homes, cemeteries, and other funeral service providers for the disposition of an unclaimed body after the unclaimed body has first been offered to at least one university.

<u>Post-enrollment Note</u>: Administrative Board transferred in an additional \$494,100 GF/GP to reverse historic lapse savings.

Funding Source(s):

TANF GF/GP 300,000 <del>3.575.000</del>

4.069.100

Related Boilerplate Section(s): 613, 615

Low-income home energy assistance program

174,951,600

Provides energy assistance to eligible persons with household income not more than 150% of federal poverty guidelines facing heat or energy shut-offs or past due notices provided either directly by the DHHS through the Michigan Energy Assistance Program (MEAP) or contracts with other private or public entities; supports state home heating tax credit for eligible individuals; supports weatherization programs to improve home energy efficiency; supports program administration. Federal revenue from Low-Income Home Energy Assistance Program (LIHEAP) block grant.

Funding Source(s):

Federal 174,951,600

Related Boilerplate Section(s): 610, 615, 645, 655, 686, 688

Michigan energy assistance program – 1.0 FTE position

50,000,000

Michigan Energy Assistance Program (MEAP) provides energy assistance to eligible persons with household income not more than 150% of federal poverty guidelines facing heat or energy shut-offs or past due notices. Priority may be given to households with highest energy costs or needs in relation to household income. Program must also include services that enable eligible persons to move toward selfsufficiency. Community Action Agencies (CAAs) may use MEAP funding to pay for deliverable heating fuel assistance for eligible households that have been denied LIHEAP benefits, but a household does not have to be denied LIHEAP assistance to be eligible for MEAP funding. CAAs may also use funding to assist households in paying missed payments or co-pays in order to become eligible for LIHEAP assistance. Services can be provided either through contracts with other private or public entities or directly through DHHS. Restricted revenue from monthly surcharge on each electric customer of participating electric providers.

Funding Source(s):

Restricted

50,000,000

Related Boilerplate Section(s): None

1,806,100	payments, a federal cash assistance program for low-income aged, blind, and disabled persons. State SSI supplementation is a federal mandate based on the amount the state provided to recipients based on what the state provided in December 1973. States can provide higher, optional rates, which DHHS does for couples living in a personal care facility, a home for the aged, or a domiciliary care facility.  Funding Source(s): GF/GP 58,792,500  Related Boilerplate Section(s): 605, 608, 609, 611, 614, 615  Payments to federal Social Security Administration for processing state supplemental SSI payments and administrative costs of processing state-administered SSI payments.  Funding Source(s): GF/GP 1,806,100  Related Boilerplate Section(s): None
1,806,100	payments, a federal cash assistance program for low-income aged, blind, and disabled persons. State SSI supplementation is a federal mandate based on the amount the state provided to recipients based on what the state provided in December 1973. States can provide higher, optional rates, which DHHS does for couples living in a personal care facility, a home for the aged, or a domiciliary care facility.  Funding Source(s): GF/GP 58,792,500  Related Boilerplate Section(s): 605, 608, 609, 611, 614, 615  Payments to federal Social Security Administration for processing state supplemental SSI payments and administrative costs of processing state-administered SSI payments.
1,806,100	payments, a federal cash assistance program for low-income aged, blind, and disabled persons. State SSI supplementation is a federal mandate based on the amount the state provided to recipients based on what the state provided in December 1973. States can provide higher, optional rates, which DHHS does for couples living in a personal care facility, a home for the aged, or a domiciliary care facility.  Funding Source(s): GF/GP 58,792,500  Related Boilerplate Section(s): 605, 608, 609, 611, 614, 615  Payments to federal Social Security Administration for processing state supplemental SSI payments and administrative costs of
	payments, a federal cash assistance program for low-income aged blind, and disabled persons. State SSI supplementation is a federal mandate based on the amount the state provided to recipients based on what the state provided in December 1973. States can provide higher, optional rates, which DHHS does for couples living in a personal care facility, a home for the aged, or a domiciliary care facility.  Funding Source(s): GF/GP 58,792,500
	payments, a federal cash assistance program for low-income aged blind, and disabled persons. State SSI supplementation is a federal mandate based on the amount the state provided to recipients based on what the state provided in December 1973. States can provide higher, optional rates, which DHHS does for couples living in a personal care facility, a home for the aged, or a domiciliary care facility.
	payments, a federal cash assistance program for low-income aged blind, and disabled persons. State SSI supplementation is a federal mandate based on the amount the state provided to recipients based on what the state provided in December 1973. States can provide higher, optional rates, which DHHS does for couples living in a personal care facility, a home for the aged, or a domiciliary care
58,792,500	Related Boilerplate Section(s): 601, 604, 605, 606, 607, 614, 615 616, 686  State supplemental payments to persons receiving federal SS
	Funding Source(s): Restricted 4,152,700 GF/GP 2,518,800
6,671,500	Cash assistance program for disabled adults who are permanently of temporarily unable to work and without other means of support average monthly grant about \$213; most recipients are single adults. Effective October 1, 2011, new SDA cases can get at most \$200 in an independent living arrangement rather than \$269 as under previous policy.
	Related Boilerplate Section(s): None
	Funding Source(s): Federal 3,050,400
3,050,400	Federally-funded program helps persons admitted to the United States as refugees to become self-sufficient. Supports temporary cash and medical assistance that is available for up to eight months after entry, and administers the repatriation program. Recipients must have income and asset levels that fall below established limits. This program is administered in coordination with the Department of Labo and Economic Opportunity.
	GF/GP 14,188,300  Related Boilerplate Section(s): 295
	Funding Source(s): TANF 421,000 Federal 694,500 GF/GP 14,188,300
	<u>Post-enrollment Note</u> : Administrative Board transferred out \$8.1 million GF/GP and distributed the funds to various other line items 2019 PA 154 fully restored funding.
15,303,800	Contractual payments to contractors or subcontractors that serve multicultural populations and groups. Contractors include Arab-Chaldean Council, Arab Community Center for Economic and Socia Services, Jewish Federation of Metropolitan Detroit, Chaldean Community Foundation, Michigan Inter-Tribal Council, Vietnam Veterans, and the Hispanic/Latino Commission within the Department of Civil Rights.
	6,671,500

STATE GENERAL FUND/ GENERAL PURPOSE	\$ <del>89,500,000</del> \$90,940,100	Unrestricted state revenue from taxes and other sources.
Low-income energy assistance fund	50,000,000	Total revenue from monthly surcharge on each electric customer of participating electric providers created by Senate Bill 206 (2013 PA 95). The Michigan Public Service Commission can approve a monthly surcharge up to \$1 and fund is limited to not more than \$50.0 million.
Public assistance recoupment revenue	5,000,000	Recoupments from prior public assistance recipients.
Supplemental security income recoveries	4,142,700	Retroactive SSI payments assigned to the state as a condition of FIP and SDA eligibility.
Child support collections	11,250,200	Anticipated child support collections assigned to the state as a condition of FIP eligibility; collections offset state and federal FIP expenditures.
Total other federal revenues	1,756,605,700	Total other revenue received from federal departments and agencies, not including TANF or capped. Includes Supplemental Nutrition Assistance Program (SNAP) funding.
Capped federal revenues	178,186,500	Total non-TANF capped federal grants revenue. Includes Refugee Assistance Program funding and Low-Income Home Energy Assistance Program (LIHEAP) funds.
Social security act, temporary assistance for needy families	59,127,700	Total federal Temporary Assistance for Needy Families (TANF) block grant revenues.

#### SECTION 108: FIELD OPERATIONS AND SUPPORT SERVICES

This appropriation unit provides funding for the network of county DHHS offices. Local offices provide most of the direct services to DHHS clients. Includes salaries, benefits, and overhead costs for DHHS workers responsible for intake, eligibility determination, and service delivery, as well as local office management and the central staff working within the Field Operations Administration. This appropriation unit also funds the Pathways to Potential program, employment and training services, and nutrition education.

Full-time equated classified positions	5,814.5	Full-time equated (FTE) positions in the state classified service.
Administrative support workers – 221.0 FTE positions	\$13,397,000	Funds salary and wage and fringe benefit costs for administrative support workers that support child welfare workers located in the DHHS local county offices.
		Funding Source(s): IDG 127,300 TANF 1,527,100 Federal 5,334,100 GF/GP 6,408,500
		Related Boilerplate Section(s): None
Adult services field staff – 520.0 FTE positions	58,058,800	Funds salary and wage and fringe benefit costs of the first line adult services workers for the Adult Protective Services, Adult Community Placement, and Home Help Services programs.
		Funding Source(s): Federal 32,987,300 GF/GP 25,071,500
		Related Boilerplate Section(s): 289, 602, 620, 686, 687, 851
Contractual services, supplies, and materials – AD BOARD TRANSFER	<del>16,927,600</del> 17,863,000	Contractual services and overhead costs related to operations at local DHHS offices. Major expenditures include telecommunications, office supplies, postage, security guard services, rental payments for leased equipment, printing, employment verification services, legal costs, and other general overhead contracts and costs.
		<u>Post-enrollment Note</u> : Administrative Board transferred in an additiona \$935,400 GF/GP to restore Volunteer Services and Reimbursemen funding: locally-customized programs meeting community needs with help from volunteers. Services include transportation reimbursement customer and clerical assistance, donations processing, and fundraising. Funding includes small amounts for training for community resources workers and the expenses of director of volunteer services.
		Funding Source(s): IDG 145,400 TANF 3,603,600 Federal 6,287,200 GF/GP 6,891,400 7,826,800
		Related Boilerplate Section(s): 205, 220, 279

238.0 FTE positions	27,558,000	Salary, fringe benefit, travel, contractual scaseworkers in special projects using f Caseworkers are located in hospitals, not Family Resource Centers, community metalement and independent living settings centers where the facility or employer expendown federal funding to cover the costs.	ederal and deursing homes, ental health as, and federal q	onated funds. school-based gencies, adult qualified health
		Funding Source(s):	IDG TANF Federal Private Local	282,500 1,694,300 12,083,600 9,395,600 4,102,000
		Related Boilerplate Section(s): 850		
Elder Law of Michigan MiCAFE contract	350,000	Supports the Michigan Coordinated Acco (MiCAFE) Program administered by Elde provides outreach to eligible senior citizer and participation in the Food Assistance F	r Law of Mich ns to increase	igan. MiCAFE awareness of
		Funding Source(s):	Federal GF/GP	175,000 175,000
		Related Boilerplate Section(s): 807		
Electronic benefit transfer (EBT) – AD BOARD TRANSFER	<del>6,809,000</del> 8,489,000	Contractual payments with Conduent E administer Electronic Benefit Transfer par recipients (known in Michigan as a Bridge	yments to pub	olic assistance
		processing and answering client balances/reported problems; public as distributed through EBT include Food // Family Independence Program (FIP), and (SDA).	telephone sistance prog Assistance Pr	inquiries on gram benefits ogram (FAP),
		balances/reported problems; public as distributed through EBT include Food // Family Independence Program (FIP), and	telephone sistance prog Assistance Pr d State Disabil d transferred in	inquiries on gram benefits ogram (FAP), lity Assistance
		balances/reported problems; public as distributed through EBT include Food A Family Independence Program (FIP), and (SDA).  Post-enrollment Note: Administrative Boar	telephone sistance prog Assistance Pr d State Disabil d transferred in	inquiries on gram benefits ogram (FAP), lity Assistance
		balances/reported problems; public as distributed through EBT include Food A Family Independence Program (FIP), and (SDA).  Post-enrollment Note: Administrative Boar \$1.7 million GF/GP to reverse historic laps	telephone sistance prog Assistance Pr d State Disabil d transferred in se savings.  TANF Federal	inquiries on gram benefits ogram (FAP), lity Assistance n an additional 1,016,000 2,129,100 3,663,900
Employment and training support services	4,219,100	balances/reported problems; public as distributed through EBT include Food A Family Independence Program (FIP), and (SDA).  Post-enrollment Note: Administrative Boar \$1.7 million GF/GP to reverse historic laps Funding Source(s):	telephone sistance prog Assistance Pr d State Disabil d transferred in se savings.  TANF Federal GF/GP  air/purchases, nd family sup counseling) fo employed and through DHHS	inquiries on gram benefits ogram (FAP), lity Assistance n an additional 1,016,000 2,129,100 3,663,900 5,343,900 transportation oport services r DHHS public become self-S local offices
	4,219,100	balances/reported problems; public as distributed through EBT include Food A Family Independence Program (FIP), and (SDA).  **Post-enrollment Note: Administrative Boars** \$1.7 million GF/GP to reverse historic laps**  Funding Source(s):  **Related Boilerplate Section(s): 616, 672**  Employment support services (vehicle repairs assistance, work clothing, and tools) a (parenting education, family and financial assistance clients to help families stay sufficient. Services are provided directly and through an interagency agreement were started.	telephone sistance prog Assistance Pr d State Disabil d transferred in se savings.  TANF Federal GF/GP  air/purchases, nd family sup counseling) fo employed and through DHHS	inquiries on gram benefits ogram (FAP), lity Assistance n an additional 1,016,000 2,129,100 3,663,900 5,343,900 transportation oport services r DHHS public become self-S local offices

Field policy and administration – 66.0 FTE	11,464,100	Funds salary and wage, fringe benefit, travel supply costs of the central office field staff.	, contractua	l services, and
positions		Funding Source(s):	IDG TANF Federal GF/GP	97,900 1,753,700 4,558,300 5,054,200
		Related Boilerplate Section(s): 289, 602, 62	20, 686, 687	•
Field staff travel	8,111,400	Payments to DTMB Vehicle and Travel S usage, and reimbursement to DHHS field including mileage reimbursement, lodging, a	staff for ap	
		Funding Source(s):	TANF Federal GF/GP	3,204,600 2,518,300 2,388,500
		Related Boilerplate Section(s): 207, 231		
Medical/psychiatric evaluations	1,420,100	Payment to medical service providers evaluation and diagnostic exams for adulexams for adult protective services cases.		
		Funding Source(s):	TANF Federal GF/GP	2,000 732,900 685,200
		Related Boilerplate Section(s): None		
Nutrition education – 2.0 FTE positions	33,050,400	Pass-through funds to Michigan State U Michigan Physical Fitness Heath and Spor nutrition education programs aimed at food	ts Foundati	on to facilitate
		Funding Source(s):	Federal	33,050,400
		Related Boilerplate Section(s): 808		
Pathways to potential – 231.0 FTE positions	24,417,400	Funds salary and wage and fringe benefit co providing direct public assistance service partnership with, and directly at, local K-12 s	s to clients	
		Pathways to Potential staff work in collabora local communities to identify and ameli attendance and participation and self-suffi expedited access to public assistance individuals and families.	orate barrie ciency. Alse	ers to schoo o provides fo
		Funding Source(s):	IDG TANF Federal GF/GP	358,700 2,743,200 10,707,400 10,608,100

Public assistance field staff – 4,516.5 FTE positions	474,868,200	Funds salary and wage and fringe benefit costs for DHHS local county offices, Field Operations Administration (staff in Lansing), and 6 regional Business Service Centers. Administration staff includes staffing standards, communications, and IT. DHHS caseworkers and other field staff providing direct services to clients from local offices include:  Public Assistance Programs: Family independence specialists determine eligibility and perform caseworker duties for Family Independence Program (FIP) cases; eligibility specialists handle these functions for cases not involving FIP (i.e., food assistance, Medicaid, or energy assistance).  Children Services: Includes juvenile delinquency, preventative services, and contract coordinators.  Administrative and Management Staff: Supervisors/managers, clerical/administrative and other support staff including analysts, quality control auditors, and community resource coordinators.	
		Funding Source(s): IDG 6,982,800 TANF 54,002,600 Federal 207,975,700 GF/GP 205,907,100	
		Related Boilerplate Section(s): 289, 602, 620, 686, 687, 688, 1757	
SSI advocacy legal services grant – <b>VETOED</b>	<del>175,000</del> 0	Grants to 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.	
		Funding Source(s): GF/GP 175,000 0	
		Related Boilerplate Section(s): 625	
Training and program support – 20.0 FTE positions	2,516,600	Salary, fringe benefit, travel, contractual services, and supply costs of staff that provide program-specific training to DHHS new hires and employees who work in public assistance and adult services.	
		Funding Source(s): TANF 415,600 Federal 1,107,800 GF/GP 993,200	
		Related Boilerplate Section(s): None	
GROSS APPROPRIATION	\$683,342,700 \$685,783,100	Total of all applicable line item appropriations.	
IDG from department of corrections	121,500	O Payment per interdepartmental agreement with Department of Corrections to provide eligibility specialists to assist with Medical determination for inmates.	
IDG from department of education	7,873,100	Payment per interdepartmental agreement with Department of Education to administer eligibility determinations and other activities for Child Development and Care (CDC) program. CDC program transferred from DHHS to Department of Education through Executive Order 2011-8.	
Social security act, temporary assistance for needy families	73,765,600	Total federal Temporary Assistance for Needy Families (TANF) block grant revenues.	
Capped federal revenues	55,013,900	Total non-TANF capped federal grants revenue. Includes Social Security Act Title XX Social Services Block Grant funding and Low-Income Home Energy Assistance Program (LIHEAP) funds.	

STATE GENERAL FUND/ GENERAL PURPOSE \$268,435,100 Unrestricted state revenue from taxes and other sou		Unrestricted state revenue from taxes and other sources.
Private funds – gifts, bequests, and donations	9,395,600	Revenue received from private individuals and entities.
Local funds – donated funds	4,102,000	Local contributions toward donated funds positions.
Total other federal revenues	264,635,900	Total other revenue received from federal departments and agencies, not including TANF or capped. Includes Social Security Act Title IV-D Child Support Program funding, Social Security Act Title IV-E Foster Care and Adoption funding, Social Security Act Title XIX Medicaid funds, and Supplemental Nutrition Assistance Program (SNAP) funding.

### **SECTION 109: DISABILITY DETERMINATION SERVICES**

This appropriation unit funds the Michigan Disability Determination Services (DDS), which determines initial and continuing eligibility for disability benefits under the Social Security Disability Insurance (SSDI) program and the Supplemental Security Income (SSI) program. It also includes the Medical Consultation Program, which determines medical eligibility for State Disability Assistance (SDA) and disability-related Medicaid. The Retirement Disability Determination provides services for state employees, police, judges, and school teachers and is purchased through an agreement with the Department of Technology, Management, and Budget (DTMB).

Full-time equated classified positions	575.4	Full-time equated (FTE) positions in the state classified service.	
Disability determination operations – 571.3 FTE positions	\$112,880,800	Supports the costs of conducting disability determinations for federal disability assistance such as Social Security Disability Income (SSDI) or Supplemental Security Income (SSI), and for state-administered disability programs such as State Disability Assistance or Medicaid. This includes costs of DDS examiners and physicians located in four regional DDS offices (Detroit, Kalamazoo, Lansing, and Traverse City) as well as central administrative costs of the Disability Determination Services. Costs include salary and benefits, travel, rent and building occupancy charges, and contractual services and supplies. Funding also supports contractual payments to private medical examiners.	
		Funding Source(s): IDG 176,600 Federal 108,388,000 GF/GP 4,316,200	
		Related Boilerplate Section(s): 620, 890	
Retirement disability determination – 4.1 FTE positions	623,300	Supports the costs of conducting disability determinations on behalf of state employees, teachers, state police, and judges for the state retirement system. This includes the costs of DDS physicians are examiners as well as payments to private medical examiners.	
		Funding Source(s): IDG 623,300	
		Related Boilerplate Section(s): 890	
GROSS APPROPRIATION	\$113,504,100	Total of all applicable line item appropriations.	
IDG from DTMB - office of retirement services	799,900	Payment per interdepartmental agreement with DTMB to provide retirement disability determination services for state employees, police, judges, and school teachers.	
Total other federal revenues	108,388,000	Includes Social Security Disability Insurance (SSDI) Federal Title II funding and Supplemental Security Income (SSI) Federal Title XVI funding.	
STATE GENERAL FUND/ GENERAL PURPOSE	\$4,316,200	Unrestricted state revenue from taxes and other sources.	

# SECTION 110: BEHAVIORAL HEALTH PROGRAM ADMINISTRATION AND SPECIAL PROJECTS

This appropriation unit contains funding for behavioral health program administration, gambling addiction, Michigan Protection and Advocacy Service, Inc., the Office of Recipient Rights, and other federal grants and projects.

Behavioral health program administration – 86.0 FTE positions  \$45,391,500 \$45,391,500 \$45,391,500 \$45,391,500 \$45,391,500 \$845,391,500	navioral health program ministration – 86.0 FTE
Planning, and Consumer Relations.  Children and Adults with Autism Spectrum Disorders, who coordinates interagency efforts and grants related to Autism.  Post-enrollment Note: Governor vetoed \$2.0 million for CAF Hotline funding and \$3.1 million Gross for Sec. 298 administration funding. Administrative Board transferred in \$593,000 GF/GF reverse historic lapse savings.  Funding Source(s): Federal 36,643,634,555,4 Private 1,004,7 GF/GP 12,238,4 9,831,4 GF/GP 12,238,4 9,831,4 Related Boilerplate Section(s): 263, 298, 905, 915, 927, 961, 4979, 1513  Court-ordered assisted outpatient treatment  1,000,000 Grants to CMHSPs to support programing for court-ordered assist outpatient treatment for individuals the court determines as a "per requiring treatment".	
Hotline funding and \$3.1 million Gross for Sec. 298 administrative funding. Administrative Board transferred in \$593,000 GF/GF reverse historic lapse savings.  Funding Source(s):  Federal 36,643,6 34,555,4 Private 1,004,7 GF/GP 12,238,4 9,831,4  Related Boilerplate Section(s): 263, 298, 905, 915, 927, 961, 4 979, 1513  Court-ordered assisted outpatient treatment  1,000,000 Grants to CMHSPs to support programing for court-ordered assist outpatient treatment for individuals the court determines as a "per requiring treatment".	
34,555,4 Private 1,004,7 GF/GP 12,238,4 9,831,4  Related Boilerplate Section(s): 263, 298, 905, 915, 927, 961, 4 979, 1513  Court-ordered assisted outpatient treatment  1,000,000 Grants to CMHSPs to support programing for court-ordered assist outpatient treatment for individuals the court determines as a "per requiring treatment".	
Private 1,004,7 GF/GP 12,238,4 9,831,4  Related Boilerplate Section(s): 263, 298, 905, 915, 927, 961, 4 979, 1513  Court-ordered assisted outpatient treatment 1,000,000 Grants to CMHSPs to support programing for court-ordered assist outpatient treatment for individuals the court determines as a "per requiring treatment".	
Court-ordered assisted outpatient treatment 1,000,000 Grants to CMHSPs to support programing for court-ordered assist outpatient treatment for individuals the court determines as a "per requiring treatment".	
outpatient treatment outpatient treatment for individuals the court determines as a "per requiring treatment".	
Funding Source(s): GF/GP 1,000,0	
Related Boilerplate Section(s): 963	
Family support subsidy  14,137,300 Provides \$229.31 average monthly payment to an estimated 5, income-eligible families with a child under age 18 living at home vis severely mentally impaired, severely multiply impaired, or autist	mily support subsidy
Funding Source(s): Federal 14,137,3	
Related Boilerplate Section(s): 996	
Federal and other special projects  2,535,600 Contractual services, grants, and personnel costs for various fed grants, as they become available. Recent grants have inclu Substance Abuse and Mental Health Services Administration (SAMHSA) Partnerships for Success, SAMSHA Safe Schools, Federal Drug Administration (FDA) Tobacco Inspections Grant.	
Funding Source(s): Federal 2,535,6	
Related Boilerplate Section(s): None	

used to support the gambling addiction line item.	
Compulsive Gaming Prevention Fund, 1997 PA 70, revenue, which receives revenue from lottery funds, horse racing revenue, and casino licensing fees used to support the gambling addiction line item.	
from the Flinn Family Foundation for behavioral health ster youth and from the BCBS Health Endowment Fund is the Health Homes program.	
XIX Social Security Act Medicaid funds, Substance ation and Treatment Block Grant, and other federa	
emporary Assistance for Needy Families (TANF) blocks; supports family support subsidy line item.	
plicable line item appropriations.	
plate Section(s): None	
Funding Source(s): GF/GP 194,400	
nated by the Governor under section 931 of the Mental MCL 330.1931, to pursue legal, administrative, and other medies, to protect the rights of individuals with mental relopmental disabilities, and to investigate allegations of ect of persons with mental illness and developmental urrent designated agency is Michigan Protection and rice.	
plate Section(s): None	
Funding Source(s): GF/GP <del>2,604,700</del> 2,802,400	
nt Note: Administrative Board transferred in \$197,700 rse historic lapse savings.	
ts for the Office of Recipient Rights required under the Code to monitor program implementation and to provide training on the rights of individuals receiving services, and to receive and investigate complaints of o oversees Office of Recipient Rights within each Mental Health Services Program (CMHSP) and spital.	
plate Section(s): 995	
Funding Source(s): GF/GP 4,350,000	
diversion pilot programs with an aim to address the ntally ill and developmentally disabled inmates in jails	
plate Section(s): None	
Funding Source(s): Restricted 4,511,000	
evention, research, treatment, and evaluation services athological gambling addictions; includes toll-free imbler help-line, media campaign, and a liaison to the l.	
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### **SECTION 111: BEHAVIORAL HEALTH SERVICES**

This appropriation unit contains Medicaid and non-Medicaid funding for 46 community mental health services programs (CMHSPs) established under the Mental Health Code to provide community-based services and supports for individuals who have a serious mental illness, developmental disability, serious emotional disturbance, or addictive disorder and for 10 prepaid inpatient health plans (PIHPs) regions established under the Mental Health Code, Social Welfare Act, and federal Medicaid provisions. Each county is represented by a CMHSP and each CMHSP is represented by a PIHP. Medicaid services are generally funded through a combination of state funding (which can be GF/GP, provider tax revenue, or other state restricted funds) and federal match funds. The Federal Medical Assistance Percentage (FMAP) for Michigan in FY 2019-30 is 64.06%, meaning that the state funds 35.94% of Medicaid service costs. The unit also includes funding for federal behavioral health block grant programs, nursing home PAS/ARR – OBRA, civil service charges, and state disability assistance program substance use disorder services.

Full-time equated classified positions	11.0	Full-time equated (FTE) positions in the state classified service.
Autism services \$230,679,6		Medicaid capitated per member per month rates paid to the 10 PIHPs to support autism spectrum disorder treatments for Medicaid eligible children up to 21 years of age. Services includes evaluation, behavioral observation and direction, and behavioral intervention. Services may be provided either in-home or in a center/clinic.
		Funding Source(s): Federal 149,278,900 GF/GP 81,400,700
		Related Boilerplate Section(s): 902, 904, 924, 959, 960, 1659
Behavioral health community supports and services	11,221,500	Funding to expand assertive community treatment (ACT), forensic assertive community treatment (FACT), and residential programs with the purpose of reducing wait lists at the state-operated psychiatric hospitals and centers.
		Funding Source(s): Federal 6,221,500 GF/GP 5,000,000
		Related Boilerplate Section(s): 1010
Children with serious emotional disturbance waiver	8,600,000	Medicaid waiver for enhanced or additional home and community-based services for 969 eligible children up to age 21 with serious emotional disturbance at risk of requiring inpatient psychiatric hospitalization. CMHSPs administered the program available in 37 counties and were reimbursed on a fee-for-service basis, but recent federal waiver approval expands availability statewide under the PIHP managed care model. Services include: community living supports, family home care training, family support and training, therapeutic activities, respite care, child therapeutic foster care, therapeutic overnight camp, fiscal intermediary, overnight health and safety support, and non-family home care training.
		Funding Source(s): Federal 6,406,000 GF/GP 2,194,000
		Related Boilerplate Section(s): 547, 902, 904

Children's waiver home care program – PARTIALLY VETOED	<del>18,330,800</del> 18,141,100	Medicaid waiver for enhanced or additional home and community based services for 469 eligible children up to age 18 we developmental disabilities at risk of requiring institutional care at intermediate care facility for individuals with intellectual disabilities (ICF/IID). CMHSPs administered the program and were reimburs on a fee-for-service basis, but recent federal waiver approaching administration to the PIHP managed care model and vincrease eligibility to 519 children in the second year and 5 children thereafter. Services include: community living support physical/environmental accessibility adaptations, family training a counseling services, respite care, specialized medical equipment and supplies, overnight health and safety support, and oth specialty services and therapies.
		<u>Post-enrollment Note</u> : Governor vetoed private duty nursing raincrease.
		Funding Source(s): Federal 13,087,90
		12,966,40 GF/GP <del>5,242,90</del> 5,174,70
		Related Boilerplate Section(s): 902, 904, 1702
Civil service charges – AD BOARD TRANSFER	<del>249,300</del> 397,500	Pays civil service charges authorized by the State Constitution.
	397,300	<u>Post-enrollment Note</u> : Administrative Board transferred in \$148,2 GF/GP to reverse historic lapse savings.
		Funding Source(s): GF/GP 249,36 397,50
		Related Boilerplate Section(s): None
Community mental health non-Medicaid services	125,578,200	State GF/GP funds to the 46 CMHSPs for serving individuals ware not covered by Medicaid or who receive services that are rependitional medicaid or Healthy Michigan Plan. Services provide include: crisis stabilization and response; identification, assessme and diagnosis; development of an Individual Plan of Service planning, coordination, and monitoring to assist the individual gaining access to services; specialized mental health treatment which includes therapeutic clinical interaction; recipient right services; mental health advocacy; and prevention activities.
		The Mental Health Code mandates CMHSPs provide services individuals with serious mental illness, serious emotion disturbance, or developmental disability and to individuals in urge or emergency situations.
		Funding Source(s): GF/GP 125,578,20
		Related Boilerplate Section(s): 902, 904, 911, 940, 942, 994, 991, 1004

Restricted 2,823,100 GF/GP 13,769,200 Related Boilerplate Section(s): 907, 909, 910, 912, 926, 977, 978 997 Related Supplemental Boilerplate Section(s): 453, 454, 455  Court-appointed guardian reimbursement – AD BOARD TRANSFER  2,700,000 1,100 Funds to reimburse court-appointed guardians at \$50 per month for recipients who also receive CMHSP services.  Post-enrollment Note: Administrative Board transferred out all bu \$1,100 for the program.  Funding Source(s): GF/GP 2,700,000 1,100 Related Boilerplate Section(s): 950  Federal mental health block grant – 4.0 FTE positions  20,573,800 Contracts and grants primarily to CMHSPs or PIHPs to develop and improve community-based services for adults with serious menta illness and children with serious emotional disturbances. Also supports personnel costs and contractual services and outcomes.  Funding Source(s): Federal 20,573,800 Related Boilerplate Section(s): None  Health homes  3,369,000 Medicaid payments to CMHSPs designated as behavioral health homes demonstration projects to seek better coordination of physica and behavioral health care for Medicaid beneficiaries with one o more serious and persistent mental health condition(s) with high rates of hospital inpatient and emergency department use. Payments support clinical staffing tasked with comprehensive care management. Federal match rate is 90% for first 8 quarters. Local funding is from a participating CMHSP.  Funding Source(s): Federal 3,032,100 Local 246,900 GF/GP 90,000					
Wayne opioid pilot, Kent County opioid pilot, recovery high school grants, and recovery community organization grants. 2019 PA 154 restored Conference of Western Wayne, recovery high school, and recovery community organization grants with GF/GP.  Funding Source(s): Federal 92,142,400 90,962,400  Restricted 2,823,100  Restricted 3,823,100  Restricted 5,823,100  Restricted	disorder prevention,		disorder services including prevention chemically dependent pregnant women children's access to tobacco, and recover from Substance Abuse Prevention and State Opioid Response Grant. Restricte fees and medical marihuana regulator	on services, n and injecting very support. Treatment Bladed funds from ry revenue b	services to g drug users, Federal funds ock Grant and liquor license oth statutorily
Restricted 2,823,100 GF/GP 13,769,200 14,469,200 Related Boilerplate Section(s): 907, 909, 910, 912, 926, 977, 978 997 Related Supplemental Boilerplate Section(s): 453, 454, 455  Court-appointed guardian reimbursement – AD BOARD TRANSFER  Punds to reimburse court-appointed guardians at \$50 per month for recipients who also receive CMHSP services.  Post-enrollment Note: Administrative Board transferred out all bu \$1,100 for the program.  Funding Source(s): GF/GP 2,700,000 1,100  Related Boilerplate Section(s): 950  Federal mental health block grant – 4.0 FTE positions  Pederal mental health block supports personnel costs and contractual services and disturbances. Also supports personnel costs and contractual services and outcomes.  Funding Source(s): Federal 20,573,800  Related Boilerplate Section(s): None  Health homes  3,369,000  Medicaid payments to CMHSPs designated as behavioral health homes demonstration projects to seek better coordination of physica and behavioral health care for Medicaid beneficiaries with one o more serious and persistent mental health condition(s) with high rates of hospital inpatient and emergency department use. Payments support clinical staffing tasked with comprehensive care management. Federal match rate is 90% for first 8 quarters. Loca funding is from a participating CMHSP.  Funding Source(s): Federal 3,032,100  Local 246,900  GF/GP 90,000			Wayne opioid pilot, Kent County opioid grants, and recovery community organiz restored Conference of Western Wayne	pilot, recove zation grants. , recovery hig	ry high school 2019 PA 154
Restricted GF/GP 43,769,200  Related Boilerplate Section(s): 907, 909, 910, 912, 926, 977, 978 997  Related Supplemental Boilerplate Section(s): 453, 454, 455  Court-appointed guardian reimbursement – AD BOARD TRANSFER  2,700,000 1,100  Post-enrollment Note: Administrative Board transferred out all bu \$1,100 for the program.  Funding Source(s): GF/GP 2,700,000 1,100  Related Boilerplate Section(s): 950  Federal mental health block grant – 4.0 FTE positions  20,573,800  Contracts and grants primarily to CMHSPs or PIHPs to develop and improve community-based services for adults with serious menta illness and children with serious emotional disturbances. Also supports personnel costs and contractual services tasked with training, monitoring, and evaluating services and outcomes.  Funding Source(s): Federal 20,573,800  Related Boilerplate Section(s): None  Health homes  3,369,000  Medicaid payments to CMHSPs designated as behavioral health homes demonstration projects to seek better coordination of physica and behavioral health care for Medicaid beneficiaries with one o more serious and persistent mental health condition(s) with high rates of hospital inpatient and emergency department use. Payments support clinical staffing tasked with comprehensive care management. Federal match rate is 90% for first 8 quarters. Loca funding is from a participating CMHSP.  Funding Source(s): Federal 3,032,100  Local 246,900  GF/GP 90,000			Funding Source(s):	Federal	92,162,400
Court-appointed guardian reimbursement – AD BOARD TRANSFER  2,700,000 1,100 Funding Source(s): GF/GP 2,700,000 1,100 Related Boilerplate Section(s): 950  Federal mental health block grant – 4.0 FTE positions  20,573,800 Contracts and grants primarily to CMHSPs or PIHPs to develop and improve community-based services and contractual services tasked with training, monitoring, and evaluating services and outcomes.  Funding Source(s): Federal 20,573,800 Related Boilerplate Section(s): 950  Federal mental health block grant – 4.0 FTE positions  Post-enrollment Note: Administrative Board transferred out all bu \$1,100 for the program.  Funding Source(s): GF/GP 2,700,000 1,100 Related Boilerplate Section(s): 950  Contracts and grants primarily to CMHSPs or PIHPs to develop and improve community-based services for adults with serious mental illness and children with serious emotional disturbances. Also supports personnel costs and contractual services tasked with training, monitoring, and evaluating services and outcomes.  Funding Source(s): Federal 20,573,800  Related Boilerplate Section(s): None  Medicaid payments to CMHSPs designated as behavioral health homes demonstration projects to seek better coordination of physica and behavioral health care for Medicaid beneficiaries with one o more serious and persistent mental health condition(s) with high rates of hospital inpatient and emergency department use. Payments support clinical staffing tasked with comprehensive care management. Federal match rate is 90% for first 8 quarters. Loca funding is from a participating CMHSP.  Funding Source(s): Federal 3,032,100 Local 246,900 GF/GP 90,000					90,962,400 2,823,100 <del>13,769,200</del> 14,469,200
Court-appointed guardian reimbursement – AD BOARD TRANSFER  2,700,000 1,100 1,100 Related Boilerplate Section(s):  Funding Source(s):  GF/GP 2,700,000 1,100 Related Boilerplate Section(s): 950  Federal mental health block grant – 4.0 FTE positions  20,573,800 Contracts and grants primarily to CMHSPs or PIHPs to develop and improve community-based services for adults with serious menta illness and children with serious emotional disturbances. Also supports personnel costs and contractual services tasked with training, monitoring, and evaluating services and outcomes.  Funding Source(s): Federal 20,573,800 Related Boilerplate Section(s): None  Health homes  3,369,000 Medicaid payments to CMHSPs designated as behavioral health homes demonstration projects to seek better coordination of physica and behavioral health care for Medicaid beneficiaries with one o more serious and persistent mental health condition(s) with high rates of hospital inpatient and emergency department use. Payments support clinical staffing tasked with comprehensive care management. Federal match rate is 90% for first 8 quarters. Loca funding is from a participating CMHSP.  Funding Source(s): Federal 3,032,100 Local 246,900 GF/GP 90,000				9, 910, 912,	9 <del>26</del> , <del>977</del> , <del>978</del>
reimbursement – AD BOARD TRANSFER  1,100 recipients who also receive CMHSP services.  Post-enrollment Note: Administrative Board transferred out all bu \$1,100 for the program.  Funding Source(s): GF/GP 2,700,000 1,100 Related Boilerplate Section(s): 950  Federal mental health block grant – 4.0 FTE positions  Contracts and grants primarily to CMHSPs or PIHPs to develop and improve community-based services for adults with serious mental illness and children with serious emotional disturbances. Also supports personnel costs and contractual services tasked with training, monitoring, and evaluating services and outcomes.  Funding Source(s): Federal 20,573,800 Related Boilerplate Section(s): None  Health homes  3,369,000 Medicaid payments to CMHSPs designated as behavioral health homes demonstration projects to seek better coordination of physica and behavioral health care for Medicaid beneficiaries with one o more serious and persistent mental health condition(s) with high rates of hospital inpatient and emergency department use. Payments support clinical staffing tasked with comprehensive care management. Federal match rate is 90% for first 8 quarters. Local funding is from a participating CMHSP.  Funding Source(s): Federal 3,032,100 Local 246,900 GF/GP 90,000			Related Supplemental Boilerplate Section	on(s): 453, 45	54, 455
Post-enrollment Note: Administrative Board transferred out all but \$1,100 for the program.  Funding Source(s): GF/GP 2,700,000 1,100  Related Boilerplate Section(s): 950  Federal mental health block grant – 4.0 FTE positions  20,573,800 Contracts and grants primarily to CMHSPs or PIHPs to develop and improve community-based services for adults with serious mental illness and children with serious emotional disturbances. Also supports personnel costs and contractual services tasked with training, monitoring, and evaluating services and outcomes.  Funding Source(s): Federal 20,573,800  Related Boilerplate Section(s): None  Health homes  3,369,000 Medicaid payments to CMHSPs designated as behavioral health homes demonstration projects to seek better coordination of physica and behavioral health care for Medicaid beneficiaries with one o more serious and persistent mental health condition(s) with high rates of hospital inpatient and emergency department use. Payments support clinical staffing tasked with comprehensive care management. Federal match rate is 90% for first 8 quarters. Local funding is from a participating CMHSP.  Funding Source(s): Federal 3,032,100  Local 246,900  GF/GP 90,000	reimbursement – AD				per month fo
Federal mental health block grant – 4.0 FTE positions  20,573,800  Contracts and grants primarily to CMHSPs or PIHPs to develop and improve community-based services for adults with serious menta illness and children with serious emotional disturbances. Also supports personnel costs and contractual services tasked with training, monitoring, and evaluating services and outcomes.  Funding Source(s): Federal 20,573,800  Related Boilerplate Section(s): None  Health homes  3,369,000  Medicaid payments to CMHSPs designated as behavioral health homes demonstration projects to seek better coordination of physica and behavioral health care for Medicaid beneficiaries with one o more serious and persistent mental health condition(s) with high rates of hospital inpatient and emergency department use. Payments support clinical staffing tasked with comprehensive care management. Federal match rate is 90% for first 8 quarters. Loca funding is from a participating CMHSP.  Funding Source(s): Federal 3,032,100  Local 246,900  GF/GP 90,000				oard transferi	ed out all bu
Federal mental health block grant – 4.0 FTE positions  20,573,800 Contracts and grants primarily to CMHSPs or PIHPs to develop and improve community-based services for adults with serious mental illness and children with serious emotional disturbances. Also supports personnel costs and contractual services tasked with training, monitoring, and evaluating services and outcomes.  Funding Source(s): Federal 20,573,800  Related Boilerplate Section(s): None  Health homes  3,369,000 Medicaid payments to CMHSPs designated as behavioral health homes demonstration projects to seek better coordination of physical and behavioral health care for Medicaid beneficiaries with one of more serious and persistent mental health condition(s) with high rates of hospital inpatient and emergency department use. Payments support clinical staffing tasked with comprehensive care management. Federal match rate is 90% for first 8 quarters. Local funding is from a participating CMHSP.  Funding Source(s): Federal 3,032,100  Local 246,900  GF/GP 90,000			Funding Source(s):	GF/GP	
improve community-based services for adults with serious menta illness and children with serious emotional disturbances. Also supports personnel costs and contractual services tasked with training, monitoring, and evaluating services and outcomes.  Funding Source(s): Federal 20,573,800  Related Boilerplate Section(s): None  Health homes  3,369,000  Medicaid payments to CMHSPs designated as behavioral health homes demonstration projects to seek better coordination of physica and behavioral health care for Medicaid beneficiaries with one o more serious and persistent mental health condition(s) with high rates of hospital inpatient and emergency department use. Payments support clinical staffing tasked with comprehensive care management. Federal match rate is 90% for first 8 quarters. Local funding is from a participating CMHSP.  Funding Source(s): Federal 3,032,100  Local 246,900  GF/GP 90,000			Related Boilerplate Section(s): 950		
Health homes  3,369,000 Medicaid payments to CMHSPs designated as behavioral health homes demonstration projects to seek better coordination of physica and behavioral health care for Medicaid beneficiaries with one o more serious and persistent mental health condition(s) with high rates of hospital inpatient and emergency department use. Payments support clinical staffing tasked with comprehensive care management. Federal match rate is 90% for first 8 quarters. Loca funding is from a participating CMHSP.  Funding Source(s): Federal 3,032,100 Local 246,900 GF/GP 90,000		20,573,800	improve community-based services for illness and children with serious emosupports personnel costs and contract	adults with s otional distu ctual services	serious menta rbances. Also s tasked with
Health homes  3,369,000 Medicaid payments to CMHSPs designated as behavioral health homes demonstration projects to seek better coordination of physica and behavioral health care for Medicaid beneficiaries with one o more serious and persistent mental health condition(s) with high rates of hospital inpatient and emergency department use. Payments support clinical staffing tasked with comprehensive care management. Federal match rate is 90% for first 8 quarters. Loca funding is from a participating CMHSP.  Funding Source(s): Federal 3,032,100 Local 246,900 GF/GP 90,000			Funding Source(s):	Federal	20,573,800
homes demonstration projects to seek better coordination of physica and behavioral health care for Medicaid beneficiaries with one o more serious and persistent mental health condition(s) with high rates of hospital inpatient and emergency department use. Payments support clinical staffing tasked with comprehensive care management. Federal match rate is 90% for first 8 quarters. Local funding is from a participating CMHSP.  Funding Source(s): Federal 3,032,100 Local 246,900 GF/GP 90,000			Related Boilerplate Section(s): None		
Local 246,900 GF/GP 90,000	Health homes	3,369,000	homes demonstration projects to seek be and behavioral health care for Medicai more serious and persistent mental he rates of hospital inpatient and emergency support clinical staffing tasked w management. Federal match rate is 90%	etter coordinated beneficiaries ealth condition department with compression of the compre	tion of physica es with one or n(s) with highuse. Payments nensive care
Related Boilerplate Section(s): 902. 904			Funding Source(s):	Local	3,032,100 246,900 90,000
			Related Boilerplate Section(s): 902, 904	1	

Healthy Michigan plan behavioral health

371,843,300 Medicaid managed care capitated rates paid to the 10 PIHPs for mental health and substance use disorder treatment specialty services and supports for Medicaid beneficiaries who are 19-64 years old, have income at or below 133% of the federal poverty level under the modified adjusted income methodology, do not qualify or are not enrolled in Medicare, do not qualify or are not enrolled in other Medicaid programs, and are not pregnant at the time of application. Healthy Michigan Plan was initiated at state level by 2013 PA 107, effective April 1, 2014. Federal revenues financed 100% of the program until January 1, 2017 when the match rate reduced to 95%. The federal match rate is 90% on January 1, 2019 and thereafter.

> Funding Source(s): Federal 337,485,100

Restricted 3,300,200 GF/GP 31,058,000

Related Boilerplate Section(s): 252, 298, 902, 904, 910, 911, 918, 920, 964, 965, 970, 974, 994, 1003, 1004, 1008, 1009, 1151, 1659, 1764

Medicaid mental health services - AD BOARD TRANSFER

2.487.345.800 2,489,364,600

Medicaid managed care capitated rates paid to the 10 PIHPs for mental health specialty services and supports for Medicaid beneficiaries experiencing moderate to serious mental health symptoms. Specialty services and supports are provided based on an Individual Plan of Service, which outlines the individual's needs and goals and the medically necessary supports and services to be provided. Services and supports include: state inpatient, community inpatient and crisis services, outpatient services, assertive community treatment, case management, supports for living, supports for family/caregivers, and daytime supports.

Also includes enhanced home- and community-based supports for individuals with developmental disabilities enrolled in the Habilitation Supports Waiver who would otherwise require the level of care services provided in an intermediate care facility for individuals with intellectual disabilities (ICF/IID).

County funds are used to maintain increased capitated rates, and restricted funding is available through the hospital quality assurance assessment program (QAAP).

Post-enrollment Note: Administrative Board transferred in \$2.0 million GF/GP to restore room and board payment program for individuals who reside in substance use disorder residential facilities that was eliminated in the enrolled budget.

> Funding Source(s): Federal 1.603.261.400

> > Local 20.133.800 Restricted 37,469,800 GF/GP 826,480,800 828,499,600

Related Boilerplate Section(s): 298, 902, 904, 911, 918, 920, 927, 928, 964, 970, 974, 994, 1003, 1004, 1008, 1009, 1659, 1764

STATE GENERAL FUND/ GENERAL PURPOSE	\$1,121,072,000 \$1,121,171,900	Unrestricted state revenue from taxes and other sources.	
Total other state restricted revenues	43,593,100	Includes hospital quality assurance assessment program (QAAP) revenue, Insurance Provider Assessment revenue, liquor licensing fees, and medical marihuana regulatory revenue.	
Total local revenues	20,380,700	Local revenues from CMHSPs.	
Total other federal revenues	2,284,772,600 2,283,451,100	·	
GROSS APPROPRIATION	\$3,469,818,400 \$3,468,596,800	Total of all applicable line item appropriations.	
		Related Boilerplate Section(s): None	
		Funding Source(s): Federal 9,218,600 GF/GP 3,072,700	
Nursing home PAS/ARR – OBRA – 7.0 FTE positions	12,291,300	Personnel costs and grants to CMHSPs for implementing federal Omnibus Budget Reconciliation Act (OBRA) of 1987 mandate addressing inappropriate placement in nursing homes of individuals who are mentally ill or developmentally disabled. Services for these individuals include pre-admission screening (PAS), annual nursing home resident reviews (ARR), and alternative services for individuals found to be inappropriately placed.	
		Related Boilerplate Section(s): 298, 902, 904, 910, 920, 964, 965, 994, 1003, 1004, 1008, 1009, 1151, 1659, 1764	
		Funding Source(s): Federal 44,044,900 GF/GP 24,236,200	
Medicaid substance use disorder services	68,281,100	Medicaid managed care capitated rates to the 10 PIHPs for Medicaid substance use disorder services. Services include: screenings and referrals, outpatient treatments, medication-assisted treatments, sub-acute detoxifications, residential treatments. Acute hospital-based detoxification services are not provided through these capitated rates but are provided through Medicaid medical services.	

# SECTION 112: STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL HEALTH SERVICES

This appropriation unit contains funding for three state-operated psychiatric hospitals for adults, one state-operated psychiatric hospital for children, and the Center for Forensic Psychiatry created pursuant to the state's Mental Health Code for criminal defendants ruled incompetent to stand trial and/or acquitted by reason of insanity. This unit also finances costs associated with the operation of state hospitals and centers such as purchase of medical services for residents of hospitals and centers, special maintenance, and federal and private-funded projects.

Total average population	770.0	Average number of patients at state-operated psychiatric hospitals and centers.
Total full-time equated classified positions	2,390.6	Full-time equated (FTE) positions in the state classified service.
Behavioral health facility contingency	\$20,000,000	New GF/GP line item that would not be available to expend until transferred to another line item through the legislative transfer process.
		<u>Post-enrollment Note</u> : Governor deemed Sec. 1053 as unenforceable, indicating non-compliance with the expenditure restrictions.
		Funding Source(s): GF/GP 20,000,000
		Related Boilerplate Section(s): 1053
Caro Regional Mental Health Center-psychiatric hospital – adult – or regional mental health center located within 6 miles of the county seat of a county with a population between 55,000 and 57,000 in the 2010 decennial census – 542.3 FTE positions 145.0 average population	atric n 6 eat of	FTEs, contractual services, supplies, materials, food, drugs, fuel and utilities, travel, and other costs for state-operated psychiatric hospital in Caro, Michigan for adults with mental illness.
		Funding Source(s): Federal 3,980,200 Local 3,818,100 Restricted 4,110,200 GF/GP 51,111,900
		Related Boilerplate Section(s): 1055, 1056, 1058, 1059, 1060, 1061
Center for forensic psychiatry – 608.1 FTE positions 240.0 average population	87,262,300	FTEs, contractual services, supplies, materials, food, drugs, fuel and utilities, travel and other costs for the Forensic Center in Ann Arbor, Michigan for psychiatric treatment of criminal defendants ruled incompetent to stand trial and/or acquitted by reason of insanity. Also provides evaluation services for courts regarding a defendant's competency to stand trial/legal insanity.
		Funding Source(s): Federal 2,990,200 Local 10,180,100 Restricted 3,047,500 GF/GP 71,044,500
		Related Boilerplate Section(s): 1055, 1056, 1058, 1059, 1060

Developmental disabilities council and projects – 10.0 FTE positions	3,108,100	First established in 1984, 21-memb Disabilities Council appointed by the Gonduct projects on behalf of indidisabilities, and develop and implement Disabilities Plan; authorized under Exequired by federal Developmental Disabilities Act of 2000 (P.L. 106-402); supposed 25% matching funds at local level.	Governor to advividuals with or ent the State Dixecutive Order abilities Assistan	ocate for and levelopmenta levelopmenta 2006-12 and ace and Bill of
		Funding Source(s):	Federal	3,108,100
		Related Boilerplate Section(s): None		
Gifts and bequests for patient living and treatment environment	1,000,000	Authority for DHHS to accept gifts enhancements (consistent with donor state-operated facilities.		
		Funding Source(s):	Private	1,000,000
		Related Boilerplate Section(s): 1052		
Hawthorn Center – psychiatric hospital – children and adolescents –	32,617,800	FTEs, contractual services, supplies, m utilities, travel and other costs for state in Northville, Michigan for children with r	e-operated psych	
276 FTE positions 55.0 average population		Funding Source(s):	Federal Local	22,836,400 1,644,500
			Restricted GF/GP	1,015,100 7,121,800
		Related Boilerplate Section(s): 1055, 10	Restricted GF/GP	1,015,100 7,121,800
	120,000	Related Boilerplate Section(s): 1055, 10 Supplements state psychiatric hospital s individuals with mental illness; funds computer skills, daily living skills, and aca annual counts of students aged 5 through	Restricted GF/GP 056, 1058, 1059 special education of directed towal ademics; allocat	1,015,100 7,121,800 9, 1060 n programs for and upgrading
	120,000	Supplements state psychiatric hospital s individuals with mental illness; funds computer skills, daily living skills, and accomputer skills.	Restricted GF/GP 056, 1058, 1059 special education of directed towal ademics; allocat	1,015,100 7,121,800 9, 1060 n programs for and upgrading
IDEA, federal special education	120,000	Supplements state psychiatric hospital s individuals with mental illness; funds computer skills, daily living skills, and aca annual counts of students aged 5 through	Restricted GF/GP 056, 1058, 1059 special education directed towal ademics; allocation gh 26.	1,015,100 7,121,800 9, 1060 n programs for ard upgrading ions based on
education  Kalamazoo Psychiatric Hospital – adult – 548.8	71,128,700	Supplements state psychiatric hospital sindividuals with mental illness; funds computer skills, daily living skills, and accannual counts of students aged 5 through Funding Source(s):	Restricted GF/GP 056, 1058, 1059 special educations directed towal addemics; allocated addemics; allocated and addenics and addenicated addenicated addenicated addenicated psychological addenicated	1,015,100 7,121,800 0, 1060 n programs for upgrading ions based on 120,000 rugs, fuel and niatric hospital
Education  Kalamazoo Psychiatric Hospital – adult – 548.8 FTE positions		Supplements state psychiatric hospital sindividuals with mental illness; funds computer skills, daily living skills, and aca annual counts of students aged 5 through Funding Source(s):  Related Boilerplate Section(s): None  FTEs, contractual services, supplies, mutilities, travel, and other costs for state in Kalamazoo, Michigan for adults with	Restricted GF/GP 056, 1058, 1059 special educations directed towal addemics; allocated addemics; allocated and addenics and addenicated addenicated addenicated addenicated psychological addenicated	1,015,100 7,121,800 0, 1060 n programs for upgrading ions based on 120,000 rugs, fuel and niatric hospital
Education  Kalamazoo Psychiatric Hospital – adult – 548.8 FTE positions		Supplements state psychiatric hospital sindividuals with mental illness; funds computer skills, daily living skills, and aca annual counts of students aged 5 through Funding Source(s):  Related Boilerplate Section(s): None  FTEs, contractual services, supplies, mutilities, travel, and other costs for state in Kalamazoo, Michigan for adults with with developmental disabilities.	Restricted GF/GP  056, 1058, 1059  special educations directed toward ademics; allocated and ademics; allocated and active active and active active and active	1,015,100 7,121,800 7,121,800 7,1060 n programs for upgrading ions based on 120,000 rugs, fuel and inatric hospital nd individuals 6,506,400 3,949,100 4,006,100 56,667,100
Education  Kalamazoo Psychiatric Hospital – adult – 548.8 FTE positions		Supplements state psychiatric hospital sindividuals with mental illness; funds computer skills, daily living skills, and acannual counts of students aged 5 through Funding Source(s):  Related Boilerplate Section(s): None  FTEs, contractual services, supplies, mutilities, travel, and other costs for state in Kalamazoo, Michigan for adults with with developmental disabilities.  Funding Source(s):	Restricted GF/GP  056, 1058, 1059  special educations directed toward demics; allocated ademics; allocated and terials, food, depoperated psychogen mental illness and Federal Local Restricted GF/GP  056, 1057, 1058  related services	1,015,100 7,121,800 7,121,800 7,121,800 7,121,800 7,121,800 7,121,800 7,1060 7,1000 7,1000 7,1000 7,1000 7,1000 7,1000 7,1059,1060 7,1059,1060 7,1059,1060 7,1059,1060
Kalamazoo Psychiatric Hospital – adult – 548.8 FTE positions 170.0 average population  Purchase of medical services for residents of	71,128,700	Supplements state psychiatric hospital sindividuals with mental illness; funds computer skills, daily living skills, and acannual counts of students aged 5 through Funding Source(s):  Related Boilerplate Section(s): None  FTEs, contractual services, supplies, mutilities, travel, and other costs for state in Kalamazoo, Michigan for adults with with developmental disabilities.  Funding Source(s):  Related Boilerplate Section(s): 1055, 1	Restricted GF/GP  056, 1058, 1059  special educations directed toward demics; allocated ademics; allocated and terials, food, depoperated psychogen mental illness and Federal Local Restricted GF/GP  056, 1057, 1058  related services	1,015,100 7,121,800 7,121,800 7,121,800 7,121,800 7,121,800 7,121,800 7,1060 7,1000 7,1000 7,1000 7,1000 7,1000 7,1000 7,1059,1060 7,1059,1060 7,1059,1060 7,1059,1060

STATE GENERAL FUND/ GENERAL PURPOSE	\$246,120,100	Unrestricted state revenue from taxes	and other so	urces.
Total other state restricted revenues	15,092,700	First and third party reimbursement and	lease/rental rev	/enue.
Total private revenues	1,000,000	Patient gifts and bequests.		
Local revenues	23,106,200	County match revenue and local school	aid funds.	
Total other federal revenues	43,434,400	Includes Title XIX of the Social Security Act Medicaid funds, National School Lunch Program, and Individuals with Disabilities Education Act (IDEA) special education funds.		
GROSS APPROPRIATION	\$328,753,400	Total of all applicable line item appro	priations.	
		Related Boilerplate Section(s): 1055, 10	056, 1058, 1059	9, 1060
160.0 average population		Funding Source(s):	Federal Local Restricted GF/GP	3,218,100 3,514,300 2,206,300 39,437,100
Walter P. Reuther 48,375,800 Psychiatric Hospital – adult – 405.4 FTE positions		FTEs, contractual services, supplies, mutilities, travel and other costs for state in Westland, Michigan for adults with me	operated psycl	hiatric hospital
		Related Boilerplate Section(s): None		
		Funding Source(s):	Federal Restricted GF/GP	300,000 332,500 292,100
Special maintenance	924,600	Maintenance projects at state hospitals administrative, housekeeping, and ma maintenance and operation of leased pr	intenance equi	
		Related Boilerplate Section(s): 1051		
		Funding Source(s):	Federal Local Restricted	375,000 100 375,000
Revenue recapture	750,100	Project generates revenue from third inactive cases for DHHS costs and corretroactive collections and improving or management functions.	tractual fees a	ssociated with eimbursement

# **SECTION 113: HEALTH AND HUMAN SERVICES POLICY AND INITIATIVES**

This appropriation unit provides funding for health policy and administration as well as the following programs: certificate of need, rural health services, Michigan essential health care provider, primary care services, health disparities of minority populations, nurse education and research programs, health system innovation, human trafficking intervention, and services for persons with disabilities including independent living and Michigan rehabilitation vocational services.

Full-time equated classified positions	609.7	Full-time equated (FTE) positions in the s	tate classified	service.
Certificate of need program administration – 11.8 FTE positions	\$2,770,900	FTEs, related costs, travel, and contractual services to administ health facility Certificate of Need (CON) regulatory program to balancost, quality, and access issues for 15 statutorily defined services are equipment, and ensure that only needed health services and facilitare developed, as provided under Part 222 of the Public Health Could Line item also supports 11-member Certificate of Need Commission		ram to balance d services and s and facilities c Health Code.
		Funding Source(s): IDG 117 Restricted 2,653		
		Related Boilerplate Section(s): None		
Health policy administration – 33.9 FTE positions – AD BOARD TRANSFER	14,217,200 14,513,700			th information planning, pain is Blueprint for the delivery and federal grant. The One-Time tion.
		Funding Source(s):	IDG TANF Federal Restricted GF/GP	192,100 11,384,000 113,600 2,525,100 2,821,600
		Related Boilerplate Section(s): 1144, 115	50, 1151	_,0_1,000
Human trafficking intervention services	200,000	Funding to develop strategies to eliminat programs to enhance community and care of human trafficking and survivors of hum the Human Trafficking Health Advisory Einitiatives of the Board.	e services for p an trafficking;	persons at risk and to support
		Funding Source(s):	GF/GP	200,000
		Related Boilerplate Section(s): None		

# Independent living – AD BOARD TRANSFER

<del>15,531,600</del> 12.031.700

Grants to regional Centers for Independent Living to assist persons with disabilities to increase their ability to perform everyday activities; to coordinate independent living services with other federal, state, and local agencies; and to provide outreach services for persons with disabilities. This line item is transferred from Sec. 108 Field Operations and Support Services appropriation unit.

<u>Post-enrollment Note</u>: Administrative Board transferred out \$3,499,900 GF/GP, eliminating a \$1.5 million increase and \$2.0 million of base funding.

Funding Source(s): Federal 8,451,600

Private 10,000 GF/GP 7,070,000

3,570,100

Related Boilerplate Section(s): 1156, 1158

Michigan essential health provider – AD BOARD TRANSFER

4,384,200 4,519,600 State/federal program, also known as State Loan Repayment Program, to assist dental, mental health, and primary care medical providers in the repayment of medical education loans, in exchange for service in designated health professional shortage areas; increased funding of \$1.0 million GF/GP is directed to areas of 40,000 or less population. Program supported 177 providers in FY 2018-19. Federal grant funds must be matched by state, local, or private source funds, which may include funding from the employing entity. State statute is Part 27 of the Public Health Code.

<u>Post-enrollment Note</u>: Administrative Board transferred in \$135,400 GF/GP to reverse historic lapse savings.

Funding Source(s): Federal 1,236,300

Private 855,000 GF/GP 2,292,900

2,428,300

Related Boilerplate Section(s): 1141

Michigan rehabilitation services – 555.0 FTE positions 131,109,200

Salary, fringe benefit, travel, contractual services, and supply costs for regional offices and central administration to provide vocational rehabilitation services for persons with disabilities. Vocational services are determined through an individualized plan for employment and could include training, job placement, vehicle modification, repair, or purchase, and equipment and tools needed to work. Also supports the Michigan Career and Technical Institute, located in Barry County, which provides training to adults with disabilities in programs such as automotive, certified nurse assistants, culinary arts, electronics, landscaping, and retail. This line item is transferred from Sec. 108 Field Operations and Support Services appropriation unit.

Funding Source(s): IDG 38,300

TANF 140,000 Federal 105,558,600 Local 5,300,000 Private 521,500 Restricted 150,000

GF/GP 19,400,800

Related Boilerplate Section(s): 1152, 1153, 1154, 1155, 1156

1.0 FTE position		system guidelines, implement Medicare rural hospital flexil program, and provide technical assistance on rural health issues.  Funding Source(s): Federal 1,380,4 GF/GP 175,4  Related Boilerplate Section(s): None
1.0 FIE position		program, and provide technical assistance on rural health issues.  Funding Source(s): Federal 1,380,
1.0 FIE position		
Rural health services –	1,555,500	Health at Michigan State University to coordinate, plan, and advo- for improved health care for residents in rural areas through he network and hospital systems, assist small rural hospitals improvements to comply with federal privacy and prospective
		Related Supplemental Boilerplate Section(s): 456
		Related Boilerplate Section(s): 295, 1140, 1142, 1143, 1914, 193
		Funding Source(s): Federal 304, Private 10, GF/GP 3,466,
		<u>Post-enrollment Note</u> : Governor vetoed Sec. 1143 and related fun of \$675,000 GF/GP for island health care access and clinics islands within the Primary Care Services line item. 2019 PA 154 restored \$675,000 GF/GP appropriation and boilerplate. Gove states Sec. 1931 unenforceable.
Primary care services – 2.0 FTE positions	3,781,000	FTEs, related costs, contracts, and grants to agencies for: prin health care, access, outreach, and health education service medically underserved and health professional shortage an \$400,000 GF/GP supports grants to free health clinics and fede qualified health centers (FQHCs); funds for rural primary health services; and \$675,000 GF/GP funding for island primary health access and services on Beaver Island, Mackinac Island, Drumm Island, and Bois Blanc Island. Note: Additional funding is provunder the One-Time Appropriations unit for Primary Care and De Health Services grants (vetoed).
		Related Boilerplate Section(s): None
		Funding Source(s): IDG 798,
Nurse education and research program – 3.0 FTE positions	798,900	FTEs, related costs and contracts to promote safe patient care i nursing practice environments, advance the safe practice of nursing profession, and promote an adequate supply of high-qu direct care nurses, nursing faculty, and nursing education program
		Related Boilerplate Section(s): None
		Funding Source(s): Federal 612, Restricted 226, GF/GP 289,
		FTEs, related costs and contracts to improve health status of ra and ethnic minority populations and reduce health disparities: imprace/ethnicity data collection and data access, strengthen partners to improve health equity and health literacy, improve so determinants of health, ensure access to quality health care, educa and outreach, build organization capacity to adopt enhanced cult and linguistic standards; to serve African American, Hispanic/La American, Arab/Chaldean American, American Indian/Na American, and Asian American, Native Hawaiian and Pacific Islan American populations.
Minority health grants and contracts – 3.0 FTE positions		

STATE GENERAL FUND/ GENERAL PURPOSE	\$35,418,900 \$32,350,900	Unrestricted state revenue from taxes and other sources.	
Total other state restricted revenues	3,143,000	Includes certificate of need fee revenue, fee revenue collected newborn screening services, Michigan Health Initiative Fund revenue from the software tax (1987 PA 258), Healthy Michigan Fund revenue from cigarette tax (3.75% of gross collections), and rehabilitation service fee payments from persons or entities responsible for the full cost of vocational rehabilitation to individuals not eligible for services under state or federal law.	
Total private revenues	1,396,500	Revenue from: health care employers or other entities making loan repayments on behalf of providers serving in underserved areas related to the Michigan Essential Health Provider program; University of Wisconsin primary care grant; and private gifts, bequests and donations for Independent Living services and Michigan Rehabilitation Services.	
Total local revenues	5,300,000	Revenue from local units of government to help meet federal vocational rehabilitation funding matching requirements; supports Michigan Rehabilitation Services line item.	
Total other federal revenues	16,176,400	Includes • Medicaid Title XIX funds • Medicare rural hospital flexibility program grant • minority health state partnership grant • preventive health and health services block grant • primary care grant • random moment sampling cost revenue • small rural hospital improvement program • state innovation model grant • state loan repayment program • state office of rural health grant • other federal funding for Michigan Rehabilitation Services	
Federal supplemental security income	8,588,600	Total federal payments for disability determinations within Michigan Rehabilitative Services.	
Capped federal revenues	104,163,600	Total non-TANF revenue from certain federal grants awarded for a capped amount; supports Health Policy Administration, Independent Living, and Michigan Rehabilitation Services line items line item.	
Social security act, temporary assistance for needy families	332,100	Total federal Temporary Assistance for Needy Families (TANF) block grant revenues; supports Health Policy Administration and Michigan Rehabilitation Services line items.	
IDG from the department of treasury, Michigan finance authority	117,700	Grant from Department of Treasury, Michigan Finance Authority for costs related to certificate of need program.	
IDG from the department of licensing and regulatory affairs	837,200	Grant from Department of Licensing and Regulatory Affairs for costs related to the nurse education and research program line item and the Michigan Rehabilitation Services line item; nurse education line item funds are from the state restricted Nurse Professional Fund.	
IDG from the department of education	2,400	O Grant from Department of Education for Child Development and (CDC) program, related to pathways to potential program, in H Policy Administration line item. CDC program transferred from for DHS to Department of Education in 2011.	

# **SECTION 114: LABORATORY SERVICES**

This appropriation unit provides funding for public health laboratory diagnostic testing, analytical services, and related functions to detect disease or the source of disease.

STATE GENERAL FUND/ GENERAL PURPOSE	<del>\$6,151,700</del> \$6,284,100	Unrestricted state revenue from taxes and other sources.	
Total other state restricted revenues	12,147,200	Fee revenue collected for laboratory services and for newborn screening services, and Michigan Health Initiative Fund revenue from the software tax (1987 PA 258).	
Total other federal revenues	4,338,600	Includes • biowatch program grant • epidemiology and laboratory capacity grant • food emergency response network grant (FERN) • genotyping grant • immunization grant • preventive health and health services block grant • tuberculosis control grant	
IDG from the department of environment, Great Lakes, and energy	1,004,600	Grant from the Michigan Department of Environment, Great Lakes, and Energy for laboratory testing and analysis of Michigan fish for chemical contaminants, and for laboratory services related to federal biowatch program for preparedness and response to bioterrorist event.	
GROSS APPROPRIATION	<del>\$23,642,100</del> \$23,774,500	Total of all applicable line item appropriations.	
		Related Boilerplate Section(s): None	
		Funding Source(s): IDG 1,004,600 Federal 4,338,600 Restricted 12,147,200 GF/GP 6,151,700 6,284,100	
		<u>Post-enrollment Note</u> : Administrative Board transferred in \$132,400 GF/GP to reverse historic lapse savings.	
102.0 FTE positions – AD BOARD TRANSFER	\$23,774,500	testing services to various state and federal agencies, local phealth departments, teaching institutions, and hospitals physicians statewide. Laboratory services include: tests to id and monitor infectious disease agents; collect epidemiological analytical laboratory data to assess human health risks; tests of lisamples of children screened for lead and newborn infants screened for genetic handicapping conditions; tests for environmental and phealth risks such as lead in soil and toxins in fish and other food may be consumed; tests to detect biologic and chemical ter agents; tests for the occurrence of drug-resistant staph infection collaboration with epidemiology staff; and also supports biodicontinuous bioterrorism air monitoring coordination. Funding sup 3 regional laboratories and multiple local public health laborate Note: Additional funding for laboratory testing and analysis of Ficontaminants is also included in the PFAS and Environm Contamination Response appropriation line item in Section 115 FY 2018-19.	
Laboratory services –	\$23,642,100	FTEs, supplies, travel, equipment, computer, and contracts to provide	
Full-time equated classified positions	102.0	Full-time equated (FTE) positions in the state classified service.	

### SECTION 115: EPIDEMIOLOGY AND POPULATION HEALTH

This appropriation unit funds surveillance, assessment, and monitoring of the status of infectious and chronic disease, environmental health, injury, and conditions that adversely affect maternal and child health. This unit is also responsible for fish consumption advisories, public health drinking water, childhood lead program and lead abatement, asthma prevention and control, tuberculosis control, newborn screening and genomics programs, PFAS and environmental contamination response, vapor intrusion response, and for recording the state's vital events.

Full-time equated classified positions	242.5	Full-time equated (FTE) positions in the s	tate classified service.
Childhood lead program – 4.5 FTE positions	\$2,062,200	Full-time equated (FTE) positions in the state classified services.  FTEs, related costs, and contracts for services to previous poisoning in at-risk children caused by hazards in the home is also known as Childhood Lead Poisoning Prevention P CLPPP), including: screening for abnormal blood lead level hazard identification, outreach, public and provider e technical assistance to providers and local health departments afe housing registry, childhood and healthy homes lead provided surveillance, analysis, and response systems, and case man and surveillance of children with elevated blood lead levels; in Detroit and high-incidence counties. Also supports follow for children identified with housing-related disease and injuries in successful survey. Note: Additional funding is provided under the CAppropriations unit for lead exposure response and abatement City of Flint and other communities in two appropriation line in	
		Funding Source(s):	Federal 1,460,700 GF/GP 601,500
		Related Boilerplate Section(s): 1180, 118	32, 1910, 1917

**Epidemiology** administration - 86.1 FTE positions

25,826,600 FTEs, related costs, and contracts to monitor disease activity, toxins, and environmental conditions in order to detect, prevent, and control risk and spread of communicable and non-communicable disease, including:

Surveillance and Epidemiological Analysis: Communicable disease, chronic disease, maternal and child health surveillance and epidemiology; maintain Michigan surveillance systems for reporting of disease and symptoms, data sharing with local, state and federal public health agencies, providers, emergency departments, laboratories, and universities; operate integrated system with Department of Environment, Great Lakes, and Energy to track environmental contaminants, human exposures, and health outcomes. Asthma Prevention and Control: Promoting health systems and health services strategies for improved asthma care in high-risk counties. Body Art Facility Licensing.

Climate and Health Adaptation Plan: Develop and implement plan to reduce negative impact of climate change on public health.

Emerging and Unknown Infectious Disease: Detection, tracking, and response.

Environmental Health: administration, analysis, and response Fish Consumption Advisories: Including eat safe fish and game project, and reassessment of fish toxins in 9 areas of the state. Genomics and Lifecourse evaluation and public health policy

Laboratory Testing: Support for expanded sample collection by local health departments and testing by state public health laboratory.

Office of Vapor Intrusion Response

Office of Public Health Drinking Water

Registries for: Stroke, precancerous lesions, polybrominated biphenyl (PBB), and birth defects.

Studies, Monitoring, Prevention Initiatives for: HIV/AIDS, occupational disease, behavioral risk factor surveys (BRFS), birth defects, pregnancy risk assessment, preconception health behaviors, human papillomavirus (HPV), drug-resistant staph infections, viral hepatitis, and others.

Toxicology and Response: Epidemiological investigation, public health assessments at environmental contamination sites.

Tuberculosis Control: Funding to local health departments and contractors for prevention and control of tuberculosis, including directly-observed therapy, medication administration, surveillance, and care for certain patients with tuberculosis.

Other Projects Note: Additional funding is provided under the One-Time Appropriations unit for Cercarial Dermatitis Prevention Program (Administrative Board reduced funding).

Post-enrollment Note: Governor states Sec. 218 unenforceable.

Funding Source(s): Federal 13.141.000

269.200 Private Restricted 686,300 GF/GP 11,730,100

Related Boilerplate Section(s): 218, 1180, 1181, 1913

Healthy homes program – 12.0 FTE positions

<del>27,768,000</del> 33.768.000

FTEs, related costs, and contracts for home-based intervention programs to reduce childhood lead poisoning, asthma, and unintended injuries, including: lead abatement/safe removal of lead hazards from older homes in areas of the state with high incidence of lead-poisoned children, and local oversight; certification of individuals to perform lead abatement and lead hazard remediation and training; remediation compliance assistance and enforcement; education and outreach; local coalition building and grant writing; and program evaluation. Expanded FY 2019-20 funding for increased services due to revised lead and copper rules. \$20.9 million of federal funds is appropriated for lead abatement in Flint and other high-risk communities; funds are available from unexpended Children's Health Insurance Program (CHIP) administrative funds and are approved for this use under a Medicaid State Plan Amendment for up to 5 years beginning in FY 2016-17; current CHIP match is 86.34% federal/13.66% state. Note: Additional funding is provided under the One-Time Appropriations unit for lead exposure response and abatement for the City of Flint and other communities in two appropriation line items.

<u>Post-enrollment Note</u>: Administrative Board transferred in \$1.5 million GF/GP to support public health initiatives related to the revised lead and copper rules for communities with lead exceedances. Supplemental 2019 PA 154 appropriated an additional \$4.5 million GF/GP for this purpose for a total post-enrollment increase of \$6.0 million.

Funding Source(s): Federal

Federal 22,349,600 Private 77,800 Restricted 723,700 GF/GP 4,616,900

10,616,900

Related Boilerplate Section(s): 1182, 1910, 1917

Newborn screening followup and treatment services – 10.5 FTE positions 7,825,900

FTEs, related costs, and contracts to screen all newborn infants for hearing impairment and over 50 genetic disorders, and provide follow-up services such as education, diagnosis, counseling, treatment and medical management when a newborn child tests positive; early hearing screening and detection program; genetic disease program for adults and children; supports Newborn Screening Quality Assurance Advisory Committee. Initial newborn screening fee is \$135.29 effective October 1, 2019.

Post-enrollment Note: Governor states Sec. 218 unenforceable.

Funding Source(s): Restricted 7,825,900

Related Boilerplate Section(s): 218

PFAS and environmental contamination response – 48.0 FTE positions

21,633,700

FTEs, related costs, and contracts for public health response to contamination from perfluoroalkyl and polyfluoroalkyl substances (PFAS) in drinking water and the environment. Supports PFAS laboratory testing and analysis, environmental health toxicology, chemical analysis, outreach and response, local health department services including provision of alternative water sources or water filters, and environmental and well sampling for testing. Note: Additional funding to address PFAS is included in the Local Health Services line item in Section 116.

Funding Source(s): GF/GP 21,633,700

Related Boilerplate Section(s): 1232, 1233

Vital records and health
statistics – 81.4 FTE
positions

10,439,500 FTEs, related costs, and contracts to administer state's vital records and statistics system: register all vital events (births, deaths, marriages, and divorces); maintain secure repository of vital record documents; maintain data and electronic transferal systems; issue certified copies of records; amend vital records; conduct surveillance of vital events; conduct fraud detection; vital records improvement projects; report on mortality, morbidity, and certain conditions including cancer and birth defects; maintain birth verification system for Medicaid program, and central paternity registry for child support and paternity cases, and protective services; and data services agreements with Michigan State University. New fee waiver is funded for homeless individuals. This line item is transferred from Sec. 116 Local Health and Administrative Services appropriation unit.

Funding Source(s):

Federal

4,553,600

Restricted GF/GP 5,293,600 592,300

		Related Boilerplate Section(s): None
GROSS APPROPRIATION	<del>\$95,555,900</del> \$101,555,900	Total of all applicable line item appropriations.
Capped federal revenues	81,100	Total non-TANF revenue from certain federal grants awarded for a capped amount; supports vital records paternity registry access for human services programs.
Total other federal revenues	41,423,800	Includes the following federal funds: • adult viral hepatitis prevention coordinator grant • assessing beneficial use of sport-caught fish EPA grant • asthma CDC grant • behavioral risk factor surveillance CDC grant • biomonitoring of toxic substances in fish eaters CDC grant • biosense 2.0 grant • birth defects surveillance CDC grant • breast cancer genomics CDC grant • cancer registry grant • child lead poisoning prevention surveillance grant • children's health insurance program (CHIP) Title XXI funds • eat safe fish and game and messaging in public health EPA grants • environmental public health and emergency response – building resilience against climate effects (climate and health adaptation plan) grant • environmental public health and emergency response – Michigan tracking network grant • epidemiology and laboratory capacity CDC grant • genetic services HRSA grant • health risk assessment CDC grant • HIV/AIDS morbidity and risk behavior surveillance (medical monitoring) CDC grant • HIV/AIDS surveillance CDC grant • HIV behavioral surveillance CDC grant • lead-based paint hazard assessment and control Housing and Urban Development (HUD) grant • lead EPA grant for certification of lead-based paint professionals 404G cooperative agreement • maternal and child health services block grant • Medicaid Title XIX funds • occupational safety and health core grant – expanded surveillance through Michigan State University grant • pregnancy risk assessment monitoring system (PRAMS) CDC grant • preventive health and health services block grant • social security administration birth and death enumeration grants • stroke registry and quality improvement grant • tuberculosis control grant • vital statistics cooperative program grant
Total private revenues	347,000	Includes grant from March of Dimes for work related to birth defects and prevention materials on preconception health behaviors, healthy homes grant from Kresge Foundation, influenza hospitalization surveillance project grant from Council of State and Territorial Epidemiologists, and PRAMS data grant from CDC Foundation.

STATE GENERAL FUND/ GENERAL PURPOSE	\$39,174,500 \$45,174,500	Unrestricted state revenue from taxes and other sources.
Total other state restricted revenues	14,529,500	Fee revenue collected from: newborn screening services, vital records services fees and data agreements, lead abatement professional worker certification, body art facility licensure, and surveillance data file research requests; and Michigan Health Initiative Fund revenue from software tax (1987 PA 258).

#### SECTION 116: LOCAL HEALTH AND ADMINISTRATIVE SERVICES

This appropriation unit provides funding to improve the health status of Michigan residents especially vulnerable and high-risk populations through accessible health care services delivered by local public health departments and other health care organizations. Funding also supports public health administrative and leadership functions, and programs to promote wellness and healthy behaviors, prevent chronic diseases, reduce injuries and violent behavior, and prevent and control morbidity, disability, and death associated with communicable diseases.

Full-time	equated	classified
positions		

137.3 Full-time equated (FTE) positions in the state classified service.

AIDS prevention, testing, and care programs – 37.7 FTE positions \$63,752,200

FTEs, related costs, laboratory services, contracts, and grants to local health departments and other agencies for HIV care programs, and HIV/AIDS prevention and testing programs, including: HIV/AIDS counseling, testing, referral, and partner notification; HIV/AIDS education and outreach for providers and public; HIV/AIDS risk reduction program focusing on at-risk populations through prevention, care, and laboratory testing; HIV/AIDS continuum of care program of medical care and support services to families and individuals living with HIV/AIDS, including drug assistance and dental programs; minority AIDS initiative; expanded HIV testing programs in healthcare settings to address racial and ethnic disparities, and coordination of statewide prevention and care planning group. Rebate revenue from private pharmaceutical manufacturers supports drug assistance program. Line item also supports AIDS comprehensive medical care and social support services for HIV-infected infants, children, women, and their families, including outreach, primary and specialty medical care, psychological services, case management, HIV risk reduction and prevention education, recreation activities, and logistical support for coordination of services.

Post-enrollment Note: Governor states Sec. 218 unenforceable.

Funding Source(s): Federal 25,588,000

Private 33,289,800 Restricted 4,874,400

Related Boilerplate Section(s): 218

Cancer prevention and control program – 16.0 FTE positions

15,632,300

FTEs, related costs, and contracts for cancer prevention and control including primary, secondary, and tertiary prevention strategies and activities, screening and follow-up services for breast, cervical, ovarian, prostate, and colorectal cancer, public and provider education, early detection awareness, Michigan Cancer Consortium support, heart and chronic disease risk factor screening and referrals (WISEWOMAN), federal demonstration project to focus on successful cancer, tobacco, and obesity strategies, cancer and chronic disease leadership coordination and effectiveness project, and ongoing lung cancer prevention project. Includes breast and cervical cancer control navigation program (BCCCNP) assisting low-income women to receive screening, follow-up and treatment services.

Funding Source(s): Federal 13,333,400

Private 500,000 GF/GP 1,798,900

Related Boilerplate Section(s): None

Chronic disease control and health promotion administration – 23.4 FTE positions

10,617,300

FTEs, related costs, and contracts for the following: administration and infrastructure for health promotion and chronic disease prevention programs; chronic disease surveillance and information system activities; collaborative community, school and worksite-based chronic disease, and injury prevention programs including arthritis, obesity, cardiovascular health, nutrition, physical activity and fitness, heart disease and stroke prevention; health promotion for persons with disabilities; reduction of chronic disease health disparities; Michigan nutrition network projects in schools and communities; and Safe Kids childhood injury prevention program. Programs include the community-based 4x4 wellness program to address obesity and promote healthy lifestyles, and the school children's healthy exercise program incorporating evidence-based best practices to address childhood obesity, before and after school and other venues. Note: Additional funding is provided under the One-Time Appropriations unit for Healthy Communities Grant.

Funding Source(s): Federal 7,433,300

Restricted 772,400 GF/GP 2,411,600

Related Boilerplate Section(s): 1915

Related Supplemental Boilerplate Sections(s): 465

Diabetes and kidney program – 8.0 FTE positions

4,078,100

FTEs, related costs, and contracts for diabetes and chronic kidney disease prevention programs including: education, control, self-management, outreach, reduction of health disparities, and addressing high blood pressure and obesity; grants to regions and communities with a high incidence of diabetes and to National Kidney Foundation of Michigan; and funds for comprehensive chronic kidney disease prevention programs and for implementation of the Michigan Diabetes Action Plan.

Funding Source(s): Federal 2,864,700

Restricted 210,000 GF/GP 1,003,400

Related Boilerplate Section(s): None

Essential local public health services

51,419,300

Pursuant to Part 24 of the Public Health Code, prospective payments to local health departments toward the state share of the 50/50 state/local cost sharing for projected allowable expenditures for the following required local public health services: immunizations, infectious disease control, sexually transmitted disease and HIV control and prevention, hearing and vision screening for children, food protection in cooperation with Department of Agriculture and Rural Development, and public water and private groundwater supply and on-site sewage management in cooperation with Department of Environment, Great Lakes, and Energy. Beginning October 1, 2019, a new funding distribution formula is implemented; an increase of \$6.0 million to the appropriation allows for implementation without a reduction in allocation to any local health department.

<u>Post-enrollment Note</u>: Governor states Sec. 218 unenforceable.

Funding Source(s): Local 5,150,000

GF/GP 46,269,300

Related Boilerplate Section(s): 218, 1221, 1222, 1234

Implementation of 1993 PA 133, MCL 333.17015	20,000	Reimbursement to local health department informational materials provided in accomment Law, Public Act 133 of 1993, to a	ordance with	the Informed
		Funding Source(s):	GF/GP	20,000
		Related Boilerplate Section(s): 1220		
Injury control intervention project – <b>VETOED</b>	<del>1,500,000</del> 0	Funding to support use of traumatic br treatment interactive software in hospitals FY 2018-19, and previously in FY 2014-1	. This project	was funded in
		Funding Source(s):	GF/GP	<del>1,500,000</del> 0
		Related Boilerplate Section(s): 4228		
Local health services – 3.3 FTE positions	7,209,100	FTEs, related costs, and contracts; inc funding for enhanced support to local p respond to emerging public health issues contamination response. Line item also s programs with local public health departm accreditation program to assess and strepublic health departments in order to prevoutcomes, and achieve statutory Public Hofunding of \$495,000 is included for 4 rasthma, safe sleep, diabetes, and emerging	ublic health dand threats, in upports coordinents, and local engthen Michivent disease, in ealth Code oblinew prevention	epartments to icluding PFAS nation of state I public health gan's 45 local mprove health igations. New n projects for
		Funding Source(s):	Federal GF/GP	2,459,100 4,750,000
		Related Boilerplate Section(s): 1231, 123	32, 1233	
Medicaid outreach cost reimbursement to local health departments	12,500,000	Partial reimbursement to local health dep for outreach to Medicaid clients. For reimbursement funds are available as elig	ederal Medic	aid matching
		Funding Source(s):	Federal	12,500,000
		Related Boilerplate Section(s): None		
Public health administration – 9.0 FTE positions	1,998,200	FTEs, contractual services, and other relation of community public health programs, include administrators, and chief medical officer.		
		Post-enrollment Note: Governor states S	ec. 218 unenfo	orceable.
		Funding Source(s):	Restricted GF/GP	229,000 1,769,200
		Related Boilerplate Section(s): 218, 1225	5	
Sexually transmitted disease control program – 20.0 FTE positions	6,376,500	FTEs, related costs, contracts, and grant occurrence of sexually transmitted of prevention and education, provide suppor STD control goals, and fund STD prillaboratory services costs. Local grants are counties and communities for disease diagnosis, primary treatment, screening education, laboratory services, and specific	diseases (STI t for state, loca mary treatmenter targeted to has surveillance, ag, casefindin	Os), promote all and national nt drugs and nigh-incidence investigation,
		Post-enrollment Note: Governor states S	ec. 218 unenfo	orceable.
		Funding Source(s):	Federal Restricted	3,368,400 2,202,200
			GF/GP	805,900

Caralia a managaria a				
Smoking prevention program – 15.0 FTE positions	3,818,000	FTEs, related costs, and contracts for smoking prevention and cessation programs including: smoking cessation hotline; free nicotine Quit Kits, nicotine replacement therapy, materials, and up to five cessation counseling sessions; local smoking prevention projects of schools and communities; smoke-free initiatives for hospitals apartments and other environments; anti-smoking media campaign and enforcement of Clean Indoor Air Act, and Smoke Free Air Law.		
		Funding Source(s): Federal 2,186,500 Restricted 1,631,500		
		Related Boilerplate Section(s): None		
4.9 FTE positions prevention including rape and sexual education programs; youth suicide intervention programs, training, infrast death statewide surveillance and report injury prevention program; and prescription including rape and sexual education programs; youth suicide intervention programs, infrast death statewide surveillance and report injury prevention program; and prescription including rape and sexual education programs; youth suicide intervention programs, training, infrast death statewide surveillance and report injury prevention programs and prevention programs.		FTEs, related costs and contractual services for: sexual violence prevention including rape and sexual assault primary prevention and education programs; youth suicide primary prevention and early intervention programs, training, infrastructure, and awareness; violence death statewide surveillance and reporting system; core violence and injury prevention program; and prescription drug overdose prevention initiative. Note: Additional funding is provided under the One-Time Appropriations unit for Suicide Prevention Commission.		
		Funding Source(s): Federal 3,315,800		
		Related Boilerplate Section(s): None		
		Related Supplemental Boilerplate Section(s): 470		
GROSS APPROPRIATION	\$182,236,800 \$180,736,800			
Total other federal revenues	73,049,200	Includes the following federal funds: • AIDS drug assistance prograt grant (Ryan White Part B) • arthritis grant • cancer prevention are control program grants including breast and cervical cancer control/early detection program (BCCCP), and comprehensive cancer control program grant • colorectal cancer grant • evidence-base cancer survivorship interventions CDC grant • health promotion for persons with disabilities grant • HIV care formula grant (Ryan White Part B) • HIV care services for women and children grant (Ryan White Part D) (formerly pediatric AIDS prevention grant) • HIV prevention grant • Medicaid Title XIX funds • Michigan nutrition network – nutritic and physical activity education grant • minority AIDS initiative grant (Ryan White) • obesity, school health, diabetes, heart disease, are stroke prevention grant • prescription drug overdose and data-drive prevention initiative grant • prevent and control chronic disease grant (obesity, diabetes, heart disease and stroke) and promote school health - state and local public health actions grant from Prevention are Public Health Fund (PPHF) • preventive health and health services block grant • public health infrastructure grant • rape prevention are education grant • sexually transmitted disease control grant • tobacco quitline capacity and enhancement PPHF CDC grant • tobacco retacompliance inspections contract funds • tobacco control and tobacco use prevention and reduction grants • violence and injury prevention program core grant • violent death reporting system grant WISEWOMAN well integrated screening and evaluation for women		
		Part D) (formerly pediatric AIDS prevention grant) • HIV prevention grant • Medicaid Title XIX funds • Michigan nutrition network – nutrition and physical activity education grant • minority AIDS initiative grant (Ryan White) • obesity, school health, diabetes, heart disease, and stroke prevention grant • prescription drug overdose and data-driver prevention initiative grant • prevent and control chronic disease grant (obesity, diabetes, heart disease and stroke) and promote school health - state and local public health actions grant from Prevention and Public Health Fund (PPHF) • preventive health and health services block grant • public health infrastructure grant • rape prevention and education grant • sexually transmitted disease control grant • tobacco quitline capacity and enhancement PPHF CDC grant • tobacco retail compliance inspections contract funds • tobacco control and tobacco use prevention and reduction grants • violence and injury prevention program core grant • violent death reporting system grant • WISEWOMAN well integrated screening and evaluation for women across the nation grant • youth suicide prevention and early intervention grant		

STATE GENERAL FUND/ GENERAL PURPOSE	\$60,328,300 \$58,828,300	Unrestricted state revenue from taxes and other sources.
Total other state restricted revenues	9,919,500	Vital records services fee revenue, vital records data agreement revenue, Michigan Health Initiative Fund revenue from software tax (1987 PA 258), Healthy Michigan Fund revenue from cigarette tax (3.75% of gross collections), and newborn screening services fee revenue.
Total private revenues	33,789,800	Includes private funds from pharmaceutical manufacturer rebates for AIDS drug assistance program, and from Karmanos Cancer Institute in Detroit for cancer screenings.

### **SECTION 117: FAMILY HEALTH SERVICES**

This appropriation unit provides funding for programs and services to promote health and address priority health issues of the vulnerable population group consisting of infants, children under age 21, women of childbearing age, and their family members. Service programs include prenatal care, pregnancy prevention, supplemental food, dental health, and immunization.

Full-time equated classified positions	133.6	Full-time equated (FTE) positions in the state classified service.
Dental programs – 3.8 FTE positions	\$5,479,900 \$3,761,500	, , ,

appropriation unit.

<u>Post-enrollment Note</u>: Governor vetoed Sec. 1319 and related funding of \$2.0 million GF/GP within the Dental Programs line item for an oral health assessment program for school children. Administrative Board transferred in \$281,600 GF/GP to reverse historic lapse savings.

new oral health assessment program for public school kindergarten children who do not have dental insurance (vetoed). This line item is transferred from Sec. 116 Local Health and Administrative Services

Funding Source(s): Federal 1,259,900
Private 500,000

Private 500,000

Restricted 20,000

GF/GP 3,700,000

1,981,600

Related Boilerplate Section(s): 1315, 1316, 1317, 1319

health administration – 55.0 as FTE positions statement of the positions statement of the positions and positions are positions as the position of the positio	administer programs and grants for children a supports universal newborn hearing scree	and families; l	ine item also
it u	FTEs, contractual services, supplies, and other related costs to administer programs and grants for children and families; line item also supports universal newborn hearing screening and early hearing detection and intervention for newborns with congenital hearing loss, public health and mental health early on program, reduction of infant mortality, Michigan Model comprehensive health school education curriculum, and local administration services for child and adolescent/teen health centers funded under Health Plan Services line item in Medical Services unit. Note: Additional funding is provided under the One-Time Appropriations unit for Child and Adolescent Health Centers (vetoed).		
<u> </u>	Post-enrollment Note: Governor states Sec	. 218 unenfor	ceable.
	Funding Source(s):	Federal Local Private Restricted GF/GP	5,026,400 75,000 624,500 157,600 3,854,800
F	Related Boilerplate Section(s): 218, 1309, 1	1313, <del>1911</del>	
agreements p	Grants to local health departments and agencies for statewide planning services including reproductive health assess comprehensive contraceptive services, health education, coureferral, and funding for special projects including training sexually transmitted disease testing and education.		assessment, , counseling,
<u> </u>	Post-enrollment Note: Governor states Sec. 1305 unenforceable.		
	Funding Source(s):	Federal GF/GP	8,030,900 279,800
	Related Boilerplate Section(s): 1301, 1302, 1310, 1320	1303, 1304,	1305, 1309,
15.8 FTE positions  as s  d  f  f  ir  ir	FTEs, related costs, contracts, and grants to local public departments, community health centers, and other agencia administer state immunization program of disease preversurveillance, and disease outbreak control for vaccine preverdisease, including immunization clinics, free vaccinations for exchildren and adults, vaccine quality assurance, vaccine har distribution and tracking, statewide Michigan Care Improve Registry (MCIR) of individual immunization history, outreact education, perinatal hepatitis B prevention, provider quality assurance field staff training and technical support, immunization proving immunization information system, improve adult immunization initiative, infant mortality perinatal care system regionalization other projects. This line item is transferred from Sec. 115 Epidem and Population Health appropriation unit.		agencies to prevention, preventable s for eligible ne handling, mprovement utreach and y assurance, on program counseling, ization rates lization, and
<u> </u>	Post-enrollment Note: Governor states Sec	. 218 unenfor	ceable.
	Funding Source(s):	Federal Restricted GF/GP	13,988,700 2,963,800 2,093,700
	Related Boilerplate Section(s): 218		

Local MCH services	7,018,100	Maternal and child health (MCH) grants to local health departments on a per capita basis for locally-identified service and access needs such as prenatal care, immunizations, and well-child services; and grants to agencies for programs to address high infant mortality, including fetal infant mortality review. Local health departments provide an annual Local MCH Plan to the Department.		
		Funding Source(s): Federal 7,018,100		
		Related Boilerplate Section(s): 1301		
Pregnancy prevention program	1,464,600	Grants for family planning and primary pregnancy preve programs, services, and special projects, including training, pregn risk assessment, maternity mortality, and expanded program beyond the federal Title X family planning program.		
		Post-enrollment Note: Governor states Sec. 1305 unenforceable.		
		Funding Source(s): Federal 602,100 Restricted 862,500		
		Related Boilerplate Section(s): 1301, 1304, 1305, 1309, 1320		
Prenatal care and premature birth avoidance grant	1,000,000	New line item for grant to assist in fulfilling DHHS contract obligations with Strong Beginnings, a federal Healthy Start program in Kent County, for the purpose of support to underserved populations for prenatal care and premature birth avoidance. Program was previously funded as an outcome-based pay-for-success contract program.		
		Funding Source(s): GF/GP 1,000,000		
		Related Boilerplate Section(s): 1312		
Prenatal care outreach and service delivery support – 14.0 FTE positions – PARTIALLY VETOED				
		<u>Post-enrollment Note</u> : Governor vetoed Sec. 1307 and related funding of \$700,000 TANF within the Prenatal Care Outreach and Service Delivery Support line item for an alternative pregnancy and parenting support program. Governor states Sec. 218 unenforceable.		
		Funding Source(s): TANF 700,000 0 Federal 12,676,200 Restricted 50,000 GF/GP 7,652,100		
		Related Boilerplate Section(s): 218, 1301, <del>1307</del> , 1308, 1311, 1314		

Special projects	6,289,100	Grants and contracts for maternal and child health special pro- including: maternal mortality surveillance, safe delivery of newly hotline, fetal alcohol spectrum disorders program, prenatal care fetal infant mortality programs, prenatal smoking cessation, so abstinence and contraception education and personal respons programs for targeted populations with high teen birth rates, expe and parenting teens outcomes improvement, race to the top to add behavioral and developmental health needs of children birth thr age 5 to improve school readiness, and other projects as fe grants become available.		
		Funding Source(s): Federal 6,071,200		
		GF/GP 217,900		
		Related Boilerplate Section(s): None		
Sudden and unexpected infant death and suffocation prevention program	321,300	Funding for autopsies, grief counseling, follow-up and referral services for parents who have lost a child to sudden and unexpected infant death or other causes; infant safe sleep, suffocation prevention, and risk reduction education for the public and for health care and child care providers; and reporting and surveillance.		
		Funding Source(s): Federal 321,300		
		Related Boilerplate Section(s): None		
Women, infants, and children program administration and special projects – 45.0 FTE positions	18,186,600	FTEs, related costs, grants and contracts to administer federal Women, Infants, and Children (WIC) Special Supplemental Food and Nutrition Programs and special projects: WIC Project FRESH farmer's market nutrition program, WIC breastfeeding peer counseling, breastfeeding support services, local agency infrastructure support, summer meal program for children, and independent validation and verification consulting.		
		Funding Source(s): Federal 17,882,300 Private 304,300		
		Related Boilerplate Section(s): 1340, 1341		
Women, infants, and children program local agreements and food costs	231,285,000	Grants to local public health departments and other agencies to provide WIC supplemental nutritious food, infant formula, and counseling and education on nutrition, health, and breastfeeding to atrisk pregnant women and new mothers, infants, and children up to age five; referrals to health care and other services, local program administration and training, and local health assessment and enrollment of participants. Food benefits are obtained by participants with the Michigan Bridge electronic benefits transfer (EBT) card at authorized WIC food grocers and vendors. Rebate funds from infant formula manufacturers support food costs per federal program regulations. Participation in FY 2018-19 averaged 205,400 women and children, a decrease from 214,000 in FY 2017-18.		
		Funding Source(s): Federal 170,511,400 Private 60,773,600		
		Related Boilerplate Section(s): 1340, 1341		
GROSS APPROPRIATION	\$329,218,100 \$326,799,700			
Social security act, temporary assistance for needy families	<del>700,000</del> 0			

# SECTION 118: EMERGENCY MEDICAL SERVICES, TRAUMA, AND PREPAREDNESS

This appropriation unit provides funding for the emergency medical services and trauma section, and for emergency preparedness and response for pandemic influenza and for chemical events that threaten human health including bioterrorism.

Full-time equated classified positions	76.0	Full-time equated (FTE) positions in the state classified service.		
Bioterrorism preparedness – 53.0 FTE positions	\$30,522,900	FTEs, related costs, and contracts with local health departments, governments, medical control authorities/regional healt coalitions, and other agencies for preparedness and emerg response by the public health system, cities, and hospital bioterrorism, pandemic influenza, and other public health emerge and disasters. Public health system preparedness priorities ind medical and pharmaceutical supply stockpile planning, disease epidemiology surveillance, biological and chemical labor capacity, training, communications, Health Alert Network emerginotification system, education, volunteer registry, mass disperand vaccination, and dissemination of risk and health inform Hospital and healthcare system preparedness priorities incompharmaceutical and vaccine supply, quarantine and decontamination facilities, regional capacity and surge planning, and communications.		
		Funding Source(s):	Federal GF/GP	30,431,100 91,800
		Related Boilerplate Section(s): None		
Emergency medical services program – 23.0 FTE positions	6,594,100	FTEs, related costs, grants, and contracts for the emergency medic services (EMS) and statewide trauma system programs. EM functions include licensure of 700 agencies (medical first respondand life support operations/agencies), 2,400 life support vehicles, ar 28,000 personnel, continuing education for personnel, agency ar vehicle inspections, complaint investigations, and approval of 65 loc medical control authorities statewide which provide community base pre-hospital emergency care oversight. Supports statewide traum system development, operationalization, and registry, and line ite also supports program of rural access to emergency devices.  Post-enrollment Note: Governor states Sec. 1350 unenforceable.		
		Funding Source(s):	Federal Restricted GF/GP	1,101,100 4,004,900 1,488,100
		Related Boilerplate Section(s): 1350		
GROSS APPROPRIATION	\$37,117,000	Total of all applicable line item approp	oriations.	
Total other federal revenues	31,532,200	Federal funds from: • EMS for children partnership grant • hospital preparedness program and public health emergency preparedness aligned cooperative agreement grant • preventive health and health services block grant • rural access to emergency devices grant.		
Total other state restricted revenues	4,004,900	Includes Crime Victim's Rights Fund revenue from fees assessed against convicted criminal defendants, and emergency medical services licensure fee revenue.		

\$1,579,900 Unrestricted state revenue from taxes and other sources.

### SECTION 119: CHILDREN'S SPECIAL HEALTH CARE SERVICES

This appropriation unit funds medical care provided through the Children's Special Health Care Services program (CSHCS) and for related administrative functions. The program pays for health services to children, primarily under 21 years of age, for the treatment of certain chronic medical conditions that require specialty care. CSHCS covers over 2,700 medical diagnoses which include cardiovascular, digestive, endocrine, immune, musculoskeletal, neurologic, hematologic, and respiratory.

Full-time equated classified service.  Positions  \$1,841,400  Payment for services not covered by Medicaid or CSHCS such as services – 2.8 FTE positions  \$1,841,400  Payment for services not covered by Medicaid or CSHCS such as wheelchair ramps and van lifts; supported with parent participation fees and Trust Fund for Children with Special Health Care Needs.  Funding Source(s): Federal 1,019,800 Restricted 716,400  Restricted 716,400  Related Boilerplate Section(s): None  Children's special health care Services Division organized under the Medical Services Administration. The division includes under the Medical Services Administration. The division includes Policy and Program Development, Quality and Program Services, and Customer Support. The division also oversees the Family Center for Children and Youth with Special Health Care Needs, a parent-directed initiative which helps advise CSHCS policies and procedures.  Funding Source(s): Federal 3,116,700  Related Boilerplate Section(s): None  Medical care and treatment — PARTIALLY VETOED  Medical care and treatment — PARTIALLY VETOED  PARTIALLY VETOED  Particular — Partial — Parti			
wheelchair ramps and van lifts; supported with parent participation fees and Trust Fund for Children with Special Health Care Needs.  Funding Source(s): Federal 1,05,200 Private 1,019,800 Restricted 716,400  Related Boilerplate Section(s): None  Children's special health care services administration – 44.0 FTE positions  6,173,400  Staffing, contractual services, supplies, and other administrative costs for the Children's Special Health Care Services Division organized under the Medical Services Administration. The division includes Policy and Program Development, Quality and Program Services, and Customer Support. The division also overses the Family Center for Children and Youth with Special Health Care Needs, a parent-directed initiative which helps advise CSHCS policies and procedures.  Funding Source(s): Federal 3,116,700 Restricted 106,000  Related Boilerplate Section(s): None  Medical care and treatment – PARTIALLY VETOED  Medical care and treatment 236,348,490  232,899,800  Pee-for-service reimbursements to hospitals, physicians, pharmacies, home health, medical supplies, and other services and treatments to CSHCS beneficiaries. Reimbursements are only for services related to the child's qualifying diagnosis may be provided through either private insurance or Medicaid. Traditional Medicaid services for Medicaid eligible CSHCS children provided through either private insurance or Medicaid. Traditional Medicaid services for Medicaid care and treatment costs are incorporated into the health plan services line.  Post-enrollment Note: Governor vetoed private duty nursing rate increase.  Funding Source(s): Federal 428,928,690 126,719,500 Restricted 2,861,000 GF/GP 40,4558,690 103,319,300	-	46.8	Full-time equated (FTE) positions in the state classified service.
Related Boilerplate Section(s): None  Children's special health care services administration – 44.0 FTE positions  6,173,400  Staffing, contractual services, supplies, and other administrative costs for the Children's Special Health Care Services Division organized under the Medical Services Administration. The division includes Policy and Program Development, Quality and Program Services, and Customer Support. The division also oversees the Family Center for Children and Youth with Special Health Care Needs, a parent-directed initiative which helps advise CSHCS policies and procedures.  Funding Source(s): Federal 3,116,700 Restricted 106,000 GF/GP 2,950,700  Related Boilerplate Section(s): None  Medical care and treatment – PARTIALLY VETOED  Medical care and treatment to the child's qualifying diagnosis, other medical services and treatments to the child's qualifying diagnosis may be provided through either private insurance or Medicaid. Traditional Medicaid services for Medicaid line items. For children enrolled in a Medicaid health plan, most CSHCS medical care and treatment costs are incorporated into the health plan services line.  Post-enrollment Note: Governor vetoed private duty nursing rate increase.  Funding Source(s): Federal 128,928,500 126,719,500 Restricted 2,861,000 404,559,600 103,319,300	services – 2.8 FTE	\$1,841,400	wheelchair ramps and van lifts; supported with parent participation
Children's special health care services administration – 44.0 FTE positions  6,173,400  Staffing, contractual services, supplies, and other administrative costs for the Children's Special Health Care Services Division organized under the Medical Services Administration. The division includes Policy and Program Development, Quality and Program Services, and Customer Support. The division also oversees the Family Center for Children and Youth with Special Health Care Needs, a parent-directed initiative which helps advise CSHCS policies and procedures.  Funding Source(s): Federal 3,116,700 Restricted 106,000 GF/GP 2,950,700  Related Boilerplate Section(s): None  Medical care and treatment – PARTIALLY VETOED  Medical care and treatment 232,899,800  Fee-for-service reimbursements to hospitals, physicians, pharmacies, home health, medical supplies, and other services and treatments to CSHCS beneficiaries. Reimbursements are only for services related to the child's qualifying diagnosis. Other medical services not related to the child's qualifying diagnosis may be provided through either private insurance or Medicaid. Traditional Medicaid services for Medicaid eligible CSHCS children provided through other Medicaid line items. For children enrolled in a Medicaid health plan, most CSHCS medical care and treatment costs are incorporated into the health plan services line.  Post-enrollment Note: Governor vetoed private duty nursing rate increase.  Funding Source(s): Federal 428,928,500 126,719,500 Restricted 2,861,000 103,319,300			Private 1,019,800
care services administration – 44.0 FTE positions  for the Children's Special Health Care Services Division organized under the Medical Services Administration. The division includes Policy and Program Development, Quality and Program Services, and Customer Support. The division also oversees the Family Center for Children and Youth with Special Health Care Needs, a parent-directed initiative which helps advise CSHCS policies and procedures.  Funding Source(s): Federal 3,116,700 Restricted 106,000 GF/GP 2,950,700  Related Boilerplate Section(s): None  Medical care and treatment – PARTIALLY VETOED  Medical care and treatment – 236,348,100 232,899,800  Medical care and treatment – PARTIALLY VETOED  Tee-for-service reimbursements to hospitals, physicians, pharmacies, home health, medical supplies, and other services and treatments to CSHCS beneficiaries. Reimbursements are only for services related to the child's qualifying diagnosis. Other medical services not related to the child's qualifying diagnosis may be provided through either private insurance or Medicaid. Traditional Medicaid services for Medicaid eligible CSHCS children provided through other Medicaid line items. For children enrolled in a Medicaid health plan, most CSHCS medical care and treatment costs are incorporated into the health plan services line.  Post-enrollment Note: Governor vetoed private duty nursing rate increase.  Funding Source(s): Federal 128,928,500 126,719,500 Restricted 2,861,000 GF/GP 104,558,600 103,319,300			Related Boilerplate Section(s): None
Medical care and treatment - PARTIALLY VETOED  Medical care and treatments to hospitals, physicians, pharmacies, home health, medical supplies, and other services and treatments to CSHCS beneficiaries. Reimbursements are only for services rot related to the child's qualifying diagnosis. Other medical services not related to the child's qualifying diagnosis may be provided through either private insurance or Medicaid. Traditional Medicaid services for Medicaid eligible CSHCS children provided through other Medicaid line items. For children enrolled in a Medicaid health plan, most CSHCS medical care and treatment costs are incorporated into the health plan services line.  Medical care and treatments to hospitals, physicians, pharmacies, home health, medical supplies, and other services and treatments to CSHCS beneficiaries. Reimbursements are only for services related to the child's qualifying diagnosis. Other medical services not related to the child's qualifying diagnosis may be provided through either private insurance or Medicaid. Traditional Medicaid services for Medicaid line items. For children enrolled in a Medicaid health plan, most CSHCS medical care and treatment costs are incorporated into the health plan services line.  Medical care and treatments to hospitals, physicians, pharmacies, home health, medical supplies, and other services and treatments to CSHCS children provided through either private insurance or Medicaid. Traditional Medicaid services for Medicaid line items. For children enrolled in a Medicaid health plan, most CSHCS medicaid. Traditional Medicaid services for Medicaid line items. For children enrolled in a Medicaid services for Medicaid line items. For children enrolled in a Medicaid services for Medicaid s	care services administration – 44.0 FTE	6,173,400	for the Children's Special Health Care Services Division organized under the Medical Services Administration. The division includes Policy and Program Development, Quality and Program Services, and Customer Support. The division also oversees the Family Center for Children and Youth with Special Health Care Needs, a parent-directed
Medical care and treatment - PARTIALLY VETOED  232,899,800  Fee-for-service reimbursements to hospitals, physicians, pharmacies, home health, medical supplies, and other services and treatments to CSHCS beneficiaries. Reimbursements are only for services related to the child's qualifying diagnosis. Other medical services not related to the child's qualifying diagnosis may be provided through either private insurance or Medicaid. Traditional Medicaid services for Medicaid eligible CSHCS children provided through other Medicaid line items. For children enrolled in a Medicaid health plan, most CSHCS medical care and treatment costs are incorporated into the health plan services line.  Post-enrollment Note: Governor vetoed private duty nursing rate increase.  Funding Source(s): Federal 128,928,500 126,719,500 Restricted 2,861,000 GF/GP 104,558,600 103,319,300			Restricted 106,000
- PARTIALLY VETOED  232,899,800 home health, medical supplies, and other services and treatments to CSHCS beneficiaries. Reimbursements are only for services related to the child's qualifying diagnosis. Other medical services not related to the child's qualifying diagnosis may be provided through either private insurance or Medicaid. Traditional Medicaid services for Medicaid eligible CSHCS children provided through other Medicaid line items. For children enrolled in a Medicaid health plan, most CSHCS medical care and treatment costs are incorporated into the health plan services line.  Post-enrollment Note: Governor vetoed private duty nursing rate increase.  Funding Source(s): Federal 128,928,500 126,719,500 Restricted 2,861,000 GF/GP 104,558,600 103,319,300			Related Boilerplate Section(s): None
Funding Source(s):  Federal  128,928,500 126,719,500 Restricted 2,861,000 GF/GP 103,319,300			home health, medical supplies, and other services and treatments to CSHCS beneficiaries. Reimbursements are only for services related to the child's qualifying diagnosis. Other medical services not related to the child's qualifying diagnosis may be provided through either private insurance or Medicaid. Traditional Medicaid services for Medicaid eligible CSHCS children provided through other Medicaid line items. For children enrolled in a Medicaid health plan, most CSHCS medical care and treatment costs are incorporated into the
126,719,500 Restricted 2,861,000 GF/GP 104,558,600 103,319,300			· · · · ·
Related Boilerplate Section(s): 1360, 1361, <del>1702</del>			126,719,500 Restricted 2,861,000 GF/GP 104,558,600
			Related Boilerplate Section(s): 1360, 1361, <del>1702</del>

STATE GENERAL FUND/ GENERAL PURPOSE	\$110,620,200 \$109,776,200	Unrestricted state revenue from taxes	and other sou	irces.
Total other state restricted revenues	3,683,400	Parent pay agreements and fees associate	ted with CSHC	S.
Total private revenues	1,019,800	Gifts and bequests for CSHCS, and interest	est on those do	onations.
Total other federal revenues	<del>134,955,400</del> 132,746,400	Includes Title XIX Social Security Act Mo Child Health Services Block Grant, and C Children's Health Insurance Program (CH	Title XXI Socia	
GROSS APPROPRIATION	\$250,278,800 \$247,225,800	Total of all applicable line item approp	riations.	
		Related Boilerplate Section(s): None		
		Funding Source(s):	Federal GF/GP	2,755,000 2,755,000
Outreach and advocacy	5,510,000	Contracts with local health departments to in the CSHCS program, case managem services.	•	
		Related Boilerplate Section(s): None		
		Funding Source(s):	Federal GF/GP	50,000 <del>355,900</del> 751,200
		<u>Post-enrollment Note</u> : Administrative Bog GF/GP to reverse historic lapse savings.	ard transferred	d in \$395,300
Nonemergency medical transportation – AD BOARD TRANSFER	<del>405,900</del> 801,200	Travel assistance for specialty medical cathe child's qualifying diagnosis.	are and treatm	ent related to

# **SECTION 120: AGING AND ADULT SERVICES AGENCY**

This appropriation unit provides funding for the Aging and Adult Services Agency to provide supportive community-based and in-home programs, services, policies and advocacy for Michigan's older persons and their families, and coordination and administration of certain adult human services programs. The fifteen-member Commission on Services to the Aging is appointed by the Governor.

Full-time equated classified positions	47.0	Full-time equated (FTE) positions in the state classified service.
Aging and adult services administration – 47.0 FTE positions	\$8,727,600	Supports FTEs, related costs, and contracts for:  Aging services programs: develop and administer services for Michigan's older citizens pursuant to State Plan and federal and state law, and support Commission on Services to the Aging; also includes funding for state long term care ombudsman, state planning for long-term care supports and services, quality assurance reviews of publicly funded long-term care programs, development of Aging and Disability Resource Center partnerships, Kinship Care Center, and voluntary nursing home culture change and quality improvement project.  Adult services programs: contract with Prosecuting Attorneys Association of Michigan to fund legal support and assistance for cases of elder abuse and financial exploitation; and administrative oversight staff for the following 4 programs: Adult Protective Services for vulnerable adults at risk of harm from abuse, neglect, or exploitation; HIV/AIDS Support Services to coordinate governmental benefits available for people who test positive for HIV or AIDS; and Adult Community Placement Services to assist adults requiring care in a licensed community placement to achieve the least restrictive setting.
		Funding Source(s): Federal 4,206,500 Private 220,000 GF/GP 4,301,100
		Related Boilerplate Section(s): 1417, 1422, 1425

# Community services – AD BOARD TRANSFER

4<del>5,966,300</del> 46.066.100 Grants to regional Area Agencies on Aging for the following programs: <u>Access to Local Services</u>: information assistance, outreach, case coordination, transportation.

<u>Aging and Disability Resource Centers</u>: develop statewide model for: centers, options counseling standards, operations and staff protocols, and pilot training curriculum.

<u>Aging Services - Locally-Determined Needs</u>: \$1.1 million GF/GP is allocated to area agencies on aging for locally-determined needs per Section 1421.

Alternative Care Services: in-home services, adult day care.

<u>Care Management Services</u>: plan and manage various services to allow frail elderly to live independently at home.

<u>Community Services</u>: health education and wellness, health screening, counseling, legal assistance, senior citizen center support, and home repair.

<u>Elder Abuse Prevention and Treatment</u>: awareness, education, training, detection, reporting, legal investigation, restitution and recovery systems and community services for victims of abuse or violence against seniors.

<u>Family Caregiver Support Program</u>: information, assistance, counseling and support, caregiver training, respite care, and supplemental services for informal caregivers.

<u>In-Home Services</u>: personal care, and homemaker, chore, and home health aide services for frail elderly who have no support network.

Legal Assistance: improve access to legal services.

Local Long-Term Care Ombudsman: local advocacy and education services for long-term care facility residents and their family members. Medicare/Medicaid Assistance and Medicare Improvement Programs: outreach, health benefits counseling and assistance for seniors with Medicare and Medicaid (MMAP); and improvements in outreach to low-income seniors who are Medicare beneficiaries.

<u>Preventive Health Services</u>: health promotion and disease prevention services, and nutrition education.

Note: Additional funding is provided under the One-Time Appropriations unit for Healthy Seniors Grant (vetoed), Senior Citizen Center Program Grants, and Senior Community Services.

<u>Post-enrollment Note</u>: Administrative Board transferred in \$99,800 GF/GP to reverse historic lapse savings.

Funding Source(s):

Federal 22,280,400 GF/GP 23.685.900

23,685,900 23,785,700

Related Boilerplate Section(s): 1421, <del>1923</del>, <del>1924</del>, <del>1936</del>

Related Supplemental Boilerplate Section(s): 468, 469

Employment assistance

3.500.000

Grants to regional Area Agencies on Aging to administer federal Senior Community Service Employment Program to provide subsidized part-time community service interim employment opportunities for low-income seniors.

Funding Source(s):

Federal

3,500,000

Related Boilerplate Section(s): None

Nutrition services	42,254,200	Grants to regional Area Agencies on Aging for food and nutring services for vulnerable elderly adults including at least one hot or cappropriate meal per day in a congregate setting or as a hot delivered meal, and nutrition education services; federal cash and commodities for meal preparation supports congregate and hot delivered meals; and funding for Senior Project FRESH Farm Market Nutrition Program.
		Funding Source(s): Federal 29,357, Private 300, GF/GP 12,597,
		Related Boilerplate Section(s): 1402, 1403
Respite care program	6,468,700	Grants to regional Area Agencies on Aging for respite care service assist family caregivers providing care to an elderly person in nee constant supervision; respite may be provided in the home or in adult day care setting.
		Funding Source(s): Merit Award 4,068, Restricted 2,000, GF/GP 400,
		Related Boilerplate Section(s): None
Senior volunteer service programs	4,765,300	Grants to local agencies for the following programs established up the federal Corporation for National and Community Service:  Foster Grandparent Program to support low-income seniors volunteer 20 hours per week to assist children and youth in need personal attention and special help; a stipend is paid to volunteers.  Retired and Senior Volunteer Program to support community secitizen volunteers.  Senior Companion Program to support low-income seniors provide 20 volunteer hours per week of individualized care assistance to frail and at-risk adults; a stipend is paid to volunteer
		Funding Source(s): GF/GP 4,765,
		Related Boilerplate Section(s): None
GROSS APPROPRIATION	\$111,682,100 \$111,781,900	Total of all applicable line item appropriations.
Capped federal revenues	249,700	Total non-TANF revenue from certain federal grants awarded f capped amount; supports adult services policy and administration oversight staff, in the Aging and Adult Services Administration item.
Total other federal revenues	59,094,200	Federal revenue includes: • congregate nutrition services Part Title III grant • developing dementia dexterity grant • disc prevention and health promotion Part D Title III grant • elder at prevention Part G Title VII grant • home-delivered nutrition serv Part C-2 Title III grant • long-term care ombudsman Part A Title grant • Medicaid Title XIX funds • Medicare Improvements for Pati and Providers Act (MIPPA) enrollment assistance grants to shealth insurance assistance programs (SHIP) (MMAP in Michigaging and disability resource centers (ADRC), and area agencie aging • national family caregiver support Part E Title III grant • wrong door ADRC grant • nutrition services incentive program US grant (administered through federal DHHS) • senior commuservice employment Title V grant • senior farmers market nutr program USDA grant • SHIP grant for MMAP program • supposervices Part B Title III grant • other grants supporting adult hu services including adult services policy and administrative overstaff

STATE GENERAL FUND/ GENERAL PURPOSE	\$45,749,500 \$45,849,300	Unrestricted state revenue from taxes and other sources.	
Total other state restricted revenues	2,000,000	Senior Care Respite Fund revenue from escheats to the state from uncashed benefits paid to subscribers or providers by the nonprohealth care corporation Blue Cross and Blue Shield of Michigan.	
Michigan merit award trust fund	4,068,700	State revenue from 1998 master settlement agreement with tobacco companies.	
Total private revenues	520,000	Brookdale Foundation - Relatives as Parents Program grant used to support Michigan State University Kinship Care Resource Center • civil monetary penalty fund revenue from nursing home noncompliance with medical services certification regulations • Senior Project FRESH Farmer's Market Nutrition contributions collected by county cooperative extension agencies for administration of the program	

# **SECTION 121: MEDICAL SERVICES ADMINISTRATION**

This appropriation unit contains funding for staffing, contracts, and other administrative functions related to Medicaid, MIChild, and Healthy Michigan Plan programs. The functions carried out by Medical Services Administration (MSA) include approval and payment of medical services claims, program and policy development, provider enrollment, collection of third-party resources, payment recovery, efforts to maximize the use of federal matching funds, and the development of health information technology initiatives.

Full-time equated classified positions	406.0	Full-time equated (FTE) positions in the sta	te classified	service.
Electronic health record incentive program	\$37,501,000	Michigan Medicaid electronic health record made to eligible professionals, hospitals, at (that have certain Medicaid patient volume) upgrade, or demonstrate meaningful use of An EHR is an electronic record of patient he by one or more encounters in any care deli	nd critical act as they ado f certified EH ealth informat	cess hospitals pt, implement, R technology.
		Funding Source(s):	Federal	37,501,000
		Related Boilerplate Section(s): 1501		
Healthy Michigan plan administration – 36.0 FTE positions	4 <del>5,654,100</del> 55,629,700	Personnel costs, office supplies, and contrelated to administering the Healthy Michiga		ces expenses
positione		<u>Post-enrollment Note</u> : Administrative Board GF/GP for Healthy Michigan Plan work administration. 2019 PA 154 included an adfor same purpose.	requirement	supports and
		Funding Source(s):	Federal GF/GP	26,549,200 <del>19,104,900</del> 29,080,500
		Related Boilerplate Section(s): 252		

STATE GENERAL FUND/ GENERAL PURPOSE	\$43,364,400 \$52,440,000	Unrestricted state revenue from taxes and other sources.
Total other state restricted revenues	336,300	Funds from public university and college hospitals.
Total private revenues	101,300	Private funds from foundations.
Total local revenues	37,700	Funds from public hospitals and local schools.
Total other federal revenues	118,936,900	Includes federal Title XIX Social Security Act Medicaid funds, Title XXI Social Security Act Children's Health Insurance Program (CHIP) funds, and other federal grants.
GROSS APPROPRIATION	\$162,776,600 \$171,852,200	Total of all applicable line item appropriations.
		Related Boilerplate Section(s): 263, <del>298</del> , <del>1504</del> , 1505, 1507, <del>1508</del> , 1513, 1757, 1792, 1793, 1804, 1859
		Funding Source(s): Federal 54,886,700 Local 37,700 Private 101,300 Restricted 336,300 GF/GP 24,259,500 23,359,500
		<u>Post-enrollment Note</u> : Governor vetoed \$700,000 GF/GP for a dental registry and \$200,000 GF/GP for could-based services.
Medical services administration – 362.0 FTE positions – PARTIALLY VETOED	78,721,500	Personnel costs, office supplies, and contractual services for the Medical Services Administration (MSA). MSA is made up of the following bureaus:  Medicaid Policy and Health Systems Innovation: responsible for program policy, long-term care services, and integrated care.  Medicaid Operations and Actuarial Services: responsible for payments, actuarial services, and third party liability.  Medicaid Care Management and Quality Assurance: responsible for customer service, managed care, pharmacy management, and program review.  Line also supports personnel and contractual costs for the Medicaid Integrity Program organized under the Office of Inspector General.

### **SECTION 122: MEDICAL SERVICES**

This appropriation unit contains funding for health care services to low-income individuals eligible for Medicaid, MIChild, Healthy Michigan Plan, and Medicare Savings Programs. These services are provided either through a traditional fee-for-service model or through enrollment in a managed care health plan. Depending on an individual's demographics, Medicaid policy either mandates, allows, or prohibits enrollment into a health plan. Medicaid services are generally funded through a combination of state funding (which can be GF/GP funds, provider tax revenue, or other state restricted funds) and federal match funds. The Federal Medical Assistance Percentage (FMAP) for Michigan in FY 2019-20 is 64.06%, meaning that the state funds 35.94% of Medicaid service costs. Medical services provided to the expanded Medicaid population under the Healthy Michigan Plan are funded by the federal government at 90% of costs, beginning January 1, 2019. This appropriation unit also includes special Medicaid financing payments which increase federal earnings for medical providers.

Adult home help services	\$392,268,400	Household and personal care service blind, and disabled individuals to independent living arrangements. Ser eating, toileting, bathing, dressing, to housecleaning, meal preparation, an are coordinated through local DHHS of	enable them vices include: a taking medica di laundry ser	to remain in assistance with tion, shopping,
		Funding Source(s):	Federal GF/GP	252,108,800 140,159,600
		Related Boilerplate Section(s): 1611,	1851	
Ambulance services	10,790,100	Medicaid fee-for-services payments to for Medicaid beneficiaries not enrolled ambulance quality assurance assista supplement payments.	in a health plan	n. Also includes
		Funding Source(s):	Federal Restricted GF/GP	6,882,700 765,300 3,142,100
		Related Boilerplate Section(s): 1611,	1641	
Auxiliary medical services	7,815,800	Medicaid fee-for-services payments for hearing, speech, and vision services for Medicaid beneficiaries not enrolled in a health plan.		
		Funding Source(s):	Federal GF/GP	4,980,500 2,835,300
		Related Boilerplate Section(s): 1611,	1631	
Dental clinic program	1,000,000	Appropriation to partially replace dis (DSH) funding that is no longer available Dental Program. An additional \$1.0 one-time section.	ole for the Univ	ersity of Detroit
		Funding Source(s):	GF/GP	1,000,000
		Related Boilerplate Section(s): None		
Dental services	337,962,100	Includes both Medicaid fee-for-serv enhanced Medicaid dental benefit for a statewide managed care contract u program.	children admin	istered through
		Funding Source(s):	Federal GF/GP	227,477,600 110,484,500
		Related Boilerplate Section(s): 1611,	1631, 1894	

Federal Medicare pharmaceutical program 294,513,900

Phased-down state contribution (clawback provision) as required by Medicare Part D drug benefit. Funding corresponds to state-level pharmaceutical costs for individuals eligible for both Medicaid and Medicare prior to creation of Medicare Part D (enacted in 2003 and became effective January 1, 2006).

Funding Source(s):

GF/GP

294,513,900

Related Boilerplate Section(s): None

Health plan services

5,444,321,400 5,384,831,800 Comprehensive Medicaid medical services provided by managed care organizations through a fixed capitated per member per month rate that must meet actuarial soundness guidelines. Certain Medicaid services are excluded from health plan coverage including: moderate and severe behavioral health services provided through PIHPs; certain injectable, psychotropic, and other specialty pharmaceuticals; nursing home care beyond 45 days; private duty nursing; home help services; substance use disorder services; and certain dental services. Line item also includes MIChild services and Maternal Infant Health Program.

Supports special supplemental provider payments including: Hospital Rate Adjustments (HRA), enhanced practitioner payments through Specialty Network Access Fees (SNAF), graduate medical education (GME), and Certified Public Expenditures DSH payments. Also includes enrollment, helpline, marketing, and outreach contracts.

In addition to local and restricted funding for special payments. restricted funding includes Medicaid Benefits Trust Fund, Health Insurance Claims Assessment. and Insurance Assessment.

Post-enrollment Note: Governor vetoed: Neonatal rate increase, Pediatric Psychiatric rate increase. Pharmacy dispensing fee rate increase, and hospital outpatient rate increase. 2019 PA 154 restored: Neonatal rate increase, Pediatric Psychiatric rate increase, and outpatient rate increase for critical access hospitals only.

> Funding Source(s): Federal 3.570.353.900

3.532.282.900

Local 25.140.900

Restricted 1,637,873,400

1,625,099,700

GF/GP 210,953,200

202,308,300

Related Boilerplate Section(s): 298, 1150, 1151, 1607, 1625, 1657, 1659, 1662, 1670, 1673, 1677, 1700, 1704, 1730, 1763, 1764, 1782, <del>1790</del>, <del>1791</del>, 1792, 1801, 1805, 1806, <del>1807</del>, 1810, 1812, 1820, 1837, 1846, 1850, 1862, 1875, 1888

Related Supplemental Boilerplate Section(s): 457, 458, 459

#### Healthy Michigan plan

3,777,862,100 3.744.443.900

Medicaid managed care capitated rates for comprehensive medical services for Michigan residents who are 19-64 years old, have income at or below 133% of the federal poverty level under the modified adjusted income methodology, do not qualify or are not enrolled in Medicare, do not qualify or are not enrolled in other Medicaid programs, and are not pregnant at the time of application.

Also includes some fee-for-services payments to support retroactive payments to medical providers for services provided prior to managed care enrollment and for Medicaid beneficiaries excluded from managed care enrollment; MACI payments; HRA payments; SNAF payments; physician adjuster payments; and dental adjuster payments.

Healthy Michigan Plan was initiated at state level by 2013 PA 107. effective April 1, 2014. Federal revenues financed 100% of the program until January 1, 2017 when the match rate reduced to 95%. The federal match rate is 90% on January 1, 2019 and thereafter.

Post-enrollment Note: Governor vetoed: Pharmacy dispensing fee rate increase and hospital outpatient rate increase, 2019 PA 154 restored: outpatient rate increase for critical access hospitals only.

> Funding Source(s): Federal 3,434,665,200

3.404.338.100

Local 1,754,800 Restricted 336,752,000

335,548,900

4,690,100 GF/GP

2,802,100

Related Boilerplate Section(s): 252, 298, 1150, 1151, 1620, 1625, 1631, 1657, 1659, 1662, 1697, 1700, 1763, 1764, 1792, 1801, 1805, 1806, <del>1807</del>, 1810, 1812, 1820, 1837, 1846, 1850, 1860, 1862, 1871, 1875, 1878, 1888

Related Supplemental Boilerplate Section(s): 457

#### Home health services -PARTIALLY VETOED

5.722.800 5.465.400

Medicaid fee-for-services payments for skilled nursing care, physical therapy, and nurse's aide services provided in the home or home-like setting for Medicaid beneficiaries who are not enrolled in a health plan and need intermittent medical care with circumstances that prevent services to be provided in an outpatient setting. Also supports private duty nursing services for individuals under 21 who need more than intermittent medical care (private duty nursing may be provided for persons older than 21 if enrolled in either behavioral health habilitation supports waiver or MI Choice).

Post-enrollment Note: Governor vetoed private duty rate increase.

Funding Source(s): Federal 3.666.700

3,501,800 GF/GP 2.056.100

1,963,600

Related Boilerplate Section(s): 1611, 1702

Hospice services	156,207,600	Medicaid fee-for-services payments for health services to terminally ill Medicaid beneficiaries who are not enrolled in a health plan with life expectancy of six months or less including: physician services, nursing care, social work, and counseling which may be provided at home or in an adult foster care facility, boarding home, home for the aged, or assisted living facility. In addition, \$3.3 million GF/GP is appropriated for room and board costs for individuals receiving Medicaid hospice services from a provider with nursing facility beds that are licensed by the state but not Medicaid-certified.
		Funding Source(s): Federal 97,937,500 GF/GP 58,270,100
		Related Boilerplate Section(s): 1611, 1641, 1856
Hospital disproportionate share payments	45,000,000	Special DSH payments to hospitals that serve a high percentage of low-income patients that are either uninsured or are covered by Medicaid, MlChild, or Children's Special Health Care Services. Restricted revenue from the Health and Safety Fund.
		Funding Source(s): Federal 28,827,000 Restricted 6,114,900 GF/GP 10,058,100
		Related Boilerplate Section(s): 1641, 1699, 1700
Hospital services and therapy	804,829,900 794,959,600	Medicaid fee-for-services payments to hospitals for inpatient and outpatient services for Medicaid beneficiaries who are not enrolled in a health plan. Also includes hospital QAAP-funded Medicaid Access to Care Initiative (MACI) and outpatient uncompensated and large urban/small rural disproportionate share hospital (DSH), graduate medical education (GME), and special rural access payments. Also includes \$21.9 million GF/GP in special rural access payments and rural hospital OB/GYN lump sum payments that no longer qualify for federal Medicaid reimbursement under revised Medicaid managed care rules. Restricted revenues include hospital QAAP and payments from public and university hospitals.  Post-enrollment Note: Governor vetoed MiDocs GME program,
		Rural Access Hospital Pools, and hospital outpatient rate increase. 2019 PA 154 restored MiDocs, Rural Access Hospital Pools, and outpatient rate increase for critical access hospitals only.
		Funding Source(s): Federal 482,328,700 476,022,300 Restricted 270,611,800 272,701,300 GF/GP 51,889,400 46,236,000  Related Boilerplate Section(s): 1611, 1631, 1641, 1657, 1700,
		1800, <del>1802</del> , 1805, <del>1807</del> , 1812, 1846, <del>1870</del>

Related Supplemental Boilerplate Section(s): 457, 460, 461, 462

Integrated care organizations	276,837,700	Managed care capitated payments und integrated health care services for ind Medicare and Medicaid eligible, know Contracted health plans are responsible Medicare and Medicaid benefits though a geographic coverage includes South Peninsula, Macomb County, and Wayne	dividuals w wn as Ml ole for coo single heal hwest Mic	who are dually Health Link. ordinating both th plan. Current
		Funding Source(s):	Federal Restricted GF/GP	164,948,700 18,296,300 93,592,700
		Related Boilerplate Section(s): 1611, 16-	41, 1775	
Long-term care services – PARTIALLY VETOED	<del>2,038,990,500</del> 2,034,127,900	Medicaid fee-for-service payments to medical care facilities, and hospital critic care services to Medicaid beneficiaries. responsible for paying for up to 45 day includes nursing facility QAAP-fund supplement payments. Local revenues freeffort payments required under section 10 (MCL 400.109); private revenues from civrestricted revenues from Merit Award T QAAP, and Healthy Michigan Fund.	al care unit Medicaid h is of long-t ded quali om county of 9 of the So- vil monetary	ts for long-term ealth plans are erm care. Also ty assurance maintenance of cial Welfare Act penalties; and
		Post-enrollment Note: Governor vetoed increase and deemed section 1502 unen		sset value limit
				1,302,551,800 1,299,436,800 6,618,800 2,100,000 45,700,000 342,942,900 339,077,000 337,329,400
		Related Boilerplate Section(s): 1502, 1645, 1646, 1682, 1873	1606, 161	1, 1620, 1641,
Maternal and child health	32,279,600	Payments to local health departments therapeutic, rehabilitative, or palliative s between actual costs and Medicaid payminsurer payments.	ervices for	the difference
		Funding Source(s):	Federal	32,279,600
		Related Boilerplate Section(s): 1641		
Medicaid home- and community-based services waiver	390,620,400	Medicaid home- and community-based was to provide non-institutional services inclupersonal care, homemaker services, transportation, respite care, adult day carequipment, and private duty nursing to includity level of care criteria. Payments may to regional agencies, including some Area	uding: case home de are, medica dividuals wh de through	e management, livered meals, al supplies and no meet nursing capitated rates
		Funding Source(s):	Federal GF/GP	249,774,600 140,845,800
		Related Boilerplate Section(s): 1659		

Medicare premium payments	627,602,400	Medicare premium payments for low-income persons who qualify for Medicare Savings Programs: Qualified Medicare Beneficiaries, Specified Low-Income Medicare Beneficiaries, Qualifying Individuals, and Qualified Disabled Working Individuals. Qualified Medicare Beneficiaries pays for Medicare Part A and B premiums, coinsurances, and copayments. The other three only pay for either Medicare Part A or Part B premiums. Also includes GF/GP funded insurance premiums for persons with AIDS. State matching costs are partially offset with additional federal funding available through negotiations with intermediate and local school districts for Medicaid funded school based services.
		Funding Source(s): Federal 491,989,200 GF/GP 135,613,200
		Related Boilerplate Section(s): 1692
Personal care services	8,472,900	Personal care payments made directly to an adult foster care home or home for the aged to support personal care service needs of Medicaid beneficiaries. Supplemental Security Income (SSI) (if individual is eligible) pays for room and board at these facilities. The inverse is true for long-term care institutions, Medicaid pays for most of the costs and SSI will provide a nominal personal care payment of \$37 per month.
		Funding Source(s): Federal 5,427,800 GF/GP 3,045,100
		Related Boilerplate Section(s): 1611, 1641, 1872
Pharmaceutical services	292,982,600	Medicaid fee-for-services payments to Magellan, the pharmacy benefit manager, and to medical suppliers for pharmaceutical services and medical supplies for Medicaid beneficiaries who are not enrolled in a health plan.
		Also supports certain pharmaceuticals (including psychotropics and some specialty drugs) that are carved out of health plan or PIHP coverage.
		Funding Source(s): Federal 191,376,400 GF/GP 101,606,200
		Related Boilerplate Section(s): 1150, 1611, 1620, 1629, 1867, 1875, 1878
Physician services	212,852,600	Medicaid fee-for-services payments to physicians, federally qualified health centers (FQHC), rural health clinics, and other non-physicians (e.g. physician's assistant, nurse practitioner, physical therapist) for Medicaid beneficiaries who are not enrolled in a health plan. Medicaid covered services include: office visits, early periodic screening, diagnosis, and treatment (EPSDT), immunizations, family planning, obstetrics, prenatal care, podiatric care, radiology, and laboratory. Also supports the fee-for-service portion of the Maternal Infant Health Program.
		<u>Post-enrollment Note</u> : Governor vetoed: Neonatal rate increase and Pediatric Psychiatric rate increase. 2019 PA 154 fully restore both vetoes.
		Funding Source(s): Federal 138,317,600 GF/GP 74,535,000
		Related Boilerplate Section(s): 1150, 1607, 1611, 1631, 1730, 1790, 1791, 1801, 1837, 1862
		Related Supplemental Boilerplate Section(s): 458, 459

Program of all-inclusive care for the elderly	129,353,900	Voluntary managed care program of community-based social and medical services for frail, elderly individuals living at home who otherwise are eligible under Medicaid for care in a nursing facility; provides both acute and long-term care services to Medicaid beneficiaries who choose to enroll; supports integrated benefits and payment for persons eligible under both Medicare and Medicaid; offered at 20 sites. Funded as a pre-paid capitated benefit program, authorized by the federal Balanced Budget Act of 1997.
		Funding Source(s): Federal 82,864,000 GF/GP 46,489,900
		Related Boilerplate Section(s): 1611, 1641, 1855, 1874
School-based services	131,140,000	Federal Medicaid funds paid to enrolled intermediate or local school districts for language, speech, hearing, nursing services counseling, physical and occupational therapy, and health screening services for Medicaid eligible students.
		Funding Source(s): Federal 131,140,000
		Related Boilerplate Section(s): 1641, 1692
Special Medicaid reimbursement	342,739,100	Special Medicaid payments to various health providers including state psychiatric hospital DSH, physician adjuster, dental adjuster, county medical care facility, University DSH pool, and poison control.
		Funding Source(s): Federal 219,763,500 Local 12,825,700 Restricted 109,183,200 GF/GP 966,700
		Related Boilerplate Section(s): 1641, 1693, 1694, 1700
Transportation	18,686,800	Medicaid fee-for-services payments for nonemergency medical transportation for Medicaid beneficiaries who are not enrolled in a health plan. Nonemergency transportation costs are paid through either local DHHS offices or through a regional transportation broker.
		Funding Source(s): Federal 10,458,800 GF/GP 8,228,000
		Related Boilerplate Section(s): 1611
GROSS APPROPRIATION	\$15,780,852,600 \$15,672,954,500	Total of all applicable line item appropriations.
Total other federal revenues	<del>11,130,120,600</del> 11,052,136,200	Federal Title XIX Social Security Act Medicaid funds and Title XXI Social Security Act Children's Health Insurance Program (CHIP) funds.
Total local revenues	46,340,200	County maintenance of effort payments for medical care facilities, Medicaid special adjustor payments, and public school district funds for teen health centers.
Total private revenues	2,100,000	Civil monetary penalties.
Michigan Merit award trust fund	45,700,000	State revenue from 1998 master settlement agreement with tobacco companies.
		<u> </u>

STATE GENERAL FUND/ GENERAL PURPOSE	<del>\$1,834,052,000</del> \$1,816,025,600	Unrestricted state revenue from taxes and other sources.
Total other state restricted revenues	<del>2,722,539,800</del> 2,710,652,500	Provider quality assurance assessment programs (QAAP), Medicaid Benefits Trust Fund revenue from tobacco taxes and legal settlements, Insurance Provider Assessment revenue, Health Insurance Claims Assessment revenue, special adjustor payments for public and university hospitals, state psychiatric hospital DSH payments, Healthy Michigan Fund revenue from tobacco taxes, Health and Safety Fund revenue from tobacco taxes, and MIChild premium payments.

# **SECTION 123: INFORMATION TECHNOLOGY**

Appropriation unit to consolidate the funding for information technology services and projects, integrated service delivery, the Bridges information system, the Child Support Automation system, the Michigan Medicaid Information System, and the Michigan Statewide Automated Child Welfare Information System.

Full-time equated classified positions	43.0	Full-time equated (FTE) positions in the state classified service.				
Bridges information system	\$3,726,100	Funding for Bridges information system including ongoing information systems management administration costs. Bridges is the eligibility and enrollment system utilized by DHHS field staff for public assistance programs.				
		Funding Source(s): IDG 15,70 TANF 275,60 Federal 1,354,80 Restricted 29,40 GF/GP 2,050,60				
		Related Boilerplate Section(s): 1901, 1905, 1907, 1908, 1909				
Child support automation	11,106,500	Funding for services and contracts between DHHS, DTMB, and vendors and for DTMB personnel costs to maintain the statewide Child Support Enforcement System (CSES). This system is used jointly by the Bureau of Child Support, county prosecuting attorneys, and Friend of the Court offices to initiate and enforce child support orders and collect and distribute child support.				
		Funding Source(s): Federal 8,683,50 GF/GP 2,423,00				
		Related Boilerplate Section(s): 401, 1905, 1907, 1908, 1909				
Information technology contingency	344,023,800	Provides for a contingency fund restricting 75% of annual appropriations for all major information technology systems and projects. Pursuant to boilerplate Sec. 1909, these funds can only be accessed after being transferred to another line item via a legislative transfer.				
		<u>Post-enrollment Note</u> : Governor deemed various subsections of Se 1909 as unenforceable, indicating non-compliance with the expenditure restrictions.				
		Funding Source(s): IDG 800,30 TANF 18,640,80 Federal 233,257,60 Private 18,750,00 Restricted 1,499,80 GF/GP 71,075,30				
		Related Boilerplate Section(s): 1909				

Information technology services and projects	4 <del>9,763,300</del> 48,763,300	Supports costs for the purchase of services from the Department of Technology, Management and Budget (DTMB) for all DHHS information technology services and automation projects, managed centrally for state departments by DTMB, including staffing, data center services, telecommunications, user support, vendor, software and equipment costs, internet, and other data administration costs; funding is transferred through an interdepartmental grant to DTMB. Also supports IT related services for the Medicaid program, and encryption and security software.
		<u>Post-enrollment Note</u> : Governor vetoed subsection (4), (5), (6), and (7) of Sec. 253 and associated funding; \$1.0 million Gross (\$500,000 GF/GP). Governor deemed the other subsections of Sec. 253 as unenforceable, indicating non-compliance with provisions.
		Funding Source(s): IDG 227,500 TANF 4,790,200 Federal 31,376,600 30,876,600 Restricted 429,300 GF/GP 12,939,700 12,439,700
		Related Boilerplate Section(s): 253, 1901, 1905, 1907, 1908, 1909
Michigan Medicaid information system	26,071,900	Funding for the Medicaid CHAMPS information system (Community Health Automated Medicaid Processing System) in cooperation with DTMB, including ongoing information systems management administration costs, and services to other state Medicaid systems including Illinois (funded by private payment revenue from participating states).
		Funding Source(s): Federal 16,708,000 Private 6,250,000 GF/GP 3,113,900
		Related Boilerplate Section(s): 1902, 1905, 1907, 1908, 1909
Michigan statewide automated child welfare information system	5,623,900	Funding for the Michigan Statewide Automated Child Welfare Information System (MiSACWIS) including ongoing information systems management administration costs.
		Funding Source(s): IDG 23,500 TANF 960,500 Federal 3,538,400 Restricted 41,300 GF/GP 1,060,200
		Related Boilerplate Section(s): 1901, 1903, 1905, 1906, 1907, 1908, 1909
State child welfare information system	100	Provides for a placeholder for funding a system to replace the Michigan Statewide Automated Child Welfare Information System.
		Funding Source(s): GF/GP 100
		Related Boilerplate Section(s): 1901, 1905, 1906,1907, 1908, 1909

STATE GENERAL FUND/ GENERAL PURPOSE	<del>\$94,767,200</del> \$94,267,200				
Total other state restricted revenues	1,999,800	Revenue from vital records services fees, Crime Victim's Rights Fund revenue from fees assessed against convicted criminal defendants, newborn screening services fees, emergency medical services licensure fees, and certificate of need fees.			
Total private revenues	25,000,000	Includes revenue from the State of Illinois for the Michigan-Illinois Alliance Medicaid management information systems project and from other participating states.			
Total other federal revenues	<del>286,429,800</del> 285,929,800				
Capped federal revenues	24,580,600	Total non-TANF revenue from certain federal grants awarded for a capped amount; supports Information Technology Services and Projects line item.			
Social security act, temporary assistance for needy families	24,854,500	Federal temporary assistance for needy families (TANF) block grant revenue.			
IDG from department of education	1,067,000	Grant from Department of Education to administer eligibility determinations, inspector general activities, and other activities for Child Development and Care (CDC) program. CDC program transferred from former DHS to Department of Education in 2011.			
GROSS APPROPRIATION	\$458,698,900 \$457,698,900	Total of all applicable line item appropriations.			
		Related Boilerplate Section(s): 1506, 1904, 1905, 1907, 1908, 1909			
		Funding Source(s): TANF 187,400 Federal 16,091,500 GF/GP 2,104,400			
Technology supporting integrated service delivery – 43.0 FTE positions	18,383,300	Personnel and other information technology costs to update a streamline electronic application and enrollment process for service provided through DHHS, including the Strategic Integration Administration and MAIN/SIGMA system support and staff. Progration has also been supported by the Information Technology Investme Fund (ITIF) within DTMB. Also includes funding for a call center alleviate work loads of local DHHS public assistance eligibility.			

# **SECTION 124: ONE-TIME APPROPRIATIONS**

This appropriation unit includes all FY 2019-20 appropriations which are intended to be one-time allocations that will not necessarily be reauthorized in future fiscal years.

Full-time equated classified positions	10.0	Full-time equated (FTE) positions in the state classified service.			
Asian American health care and wellness initiative – <b>VETOED</b>	<del>\$150,000</del> \$0				
		Funding Source(s): GF/GP <del>150,0</del>			
		Related Boilerplate Section(s): 1927			
Autism navigator	1,025,000	Funding to assess statewide rollout of the Medicaid autism benefit and to help families with autistic children find services.			
		<u>Post-enrollment Note</u> : Governor vetoed line item. 2019 PA 154 fully restored appropriation and boilerplate.			
		Funding Source(s): GF/GP 1,025,000			
		Related Boilerplate Section(s): 1920			
		Related Supplemental Boilerplate Sections(s): 463			
Autism train the trainer grant	100,000	Grant for a pilot project in Walled Lake School District to train school employees on applied behavior analysis.			
		<u>Post-enrollment Note</u> : Governor vetoed line item. 2019 PA 154 fully restored appropriation and boilerplate.			
		Funding Source(s): GF/GP 100,000			
		Related Boilerplate Section(s): 1930			
		Related Supplemental Boilerplate Sections(s): 464			
Cercarial dermatitis prevention program – AD BOARD TRANSFER	<del>250,000</del> 100	One-time funding to address the presence of parasites in inland lakes causing outbreaks of cercarial dermatitis, commonly known as swimmer's itch, through science-based mitigation and research. This project was previously funded for 3 years in the Department of Natural Resources budget.			
		<u>Post-enrollment Note</u> : Administrative Board transferred out all but \$100 from the Cercarial Dermatitis Prevention Program line item.			
		Funding Source(s): GF/GP 250,000 100			
		Related Boilerplate Section(s): 1913			
Child and adolescent health centers – <b>VETOED</b>	Child and adolescent 1,000,000 One-time funding for expansion of school-based child a				
		Funding Source(s): GF/GP 1,000,000 0			
		Related Boilerplate Section(s): 1911			

Children's behavioral health counseling services – <b>VETOED</b>	<del>100,000</del> 0	One-time funding for Mosaic Counseling to support children's counseling services.
- VETOED		Funding Source(s): GF/GP 100,000 0
		Related Boilerplate Section(s): 1925
Co-responder crisis services pilot – <b>VETOED</b>	<del>60,000</del> 0	One-time funding for mobile crisis resolution services stationed in Wayne County.
		Funding Source(s): GF/GP 60,000 0
		Related Boilerplate Section(s): 1912
Dental clinic program – VETOED	<del>1,000,000</del> 0	Appropriation to partially replace DSH funding that is no longer available for the University of Detroit Dental Program. An additional \$1.0 million is appropriated in the Medical Services section.
		Funding Source(s): GF/GP 1,000,000 0
		Related Boilerplate Section(s): None
Drinking water declaration of emergency	4,621,100	Funding for health evaluation and assistance to residents exposed to contaminated drinking water and lead in the City of Flint, as one-time funding. Services supported include food and nutrition services, lead investigation and abatement, health services at child and adolescent health centers and schools, lead poisoning prevention, and additional
		supports and services.
		supports and services.  Funding Source(s): GF/GP 4,621,100
Employment first – <b>VETOED</b>	<del>500,000</del> 0	Funding Source(s): GF/GP 4,621,100
		Funding Source(s): GF/GP 4,621,100  Related Boilerplate Section(s): 1910  Funding to support Employment First program of community rehabilitation, employment, and transition from education to employment for disabled persons, related to Executive Order 2015-15. Funding is transferred from Developmental Disabilities Council and Projects line item in Departmental Administration and Support
		Funding Source(s): GF/GP 4,621,100  Related Boilerplate Section(s): 1910  Funding to support Employment First program of community rehabilitation, employment, and transition from education to employment for disabled persons, related to Executive Order 2015-15. Funding is transferred from Developmental Disabilities Council and Projects line item in Departmental Administration and Support appropriation unit.  Funding Source(s): GF/GP 500,000
VETOED		Funding Source(s): GF/GP 4,621,100  Related Boilerplate Section(s): 1910  Funding to support Employment First program of community rehabilitation, employment, and transition from education to employment for disabled persons, related to Executive Order 2015-15. Funding is transferred from Developmental Disabilities Council and Projects line item in Departmental Administration and Support appropriation unit.  Funding Source(s): GF/GP 500,000 0
Federal health insurance fee (included as new in 2019	0	Funding Source(s): GF/GP 4,621,100  Related Boilerplate Section(s): 1910  Funding to support Employment First program of community rehabilitation, employment, and transition from education to employment for disabled persons, related to Executive Order 2015-15. Funding is transferred from Developmental Disabilities Council and Projects line item in Departmental Administration and Support appropriation unit.  Funding Source(s): GF/GP 500,000  Related Boilerplate Section(s): 1921  Funding costs due to the one-year expiration of the moratorium on the federal Affordable Care Act (ACA) health insurer fee, which Medicaid managed care organization are required to pay. The federal ACA
Federal health insurance fee (included as new in 2019	0	Funding Source(s): GF/GP 4,621,100  Related Boilerplate Section(s): 1910  Funding to support Employment First program of community rehabilitation, employment, and transition from education to employment for disabled persons, related to Executive Order 2015-15. Funding is transferred from Developmental Disabilities Council and Projects line item in Departmental Administration and Support appropriation unit.  Funding Source(s): GF/GP 500,000  Related Boilerplate Section(s): 1921  Funding costs due to the one-year expiration of the moratorium on the federal Affordable Care Act (ACA) health insurer fee, which Medicaid managed care organization are required to pay. The federal ACA health insurer fee have been repealed after tax year 2020.  Funding Source(s): Federal 130,480,200
Federal health insurance fee (included as new in 2019 PA 154)	0	Funding Source(s): GF/GP 4,621,100  Related Boilerplate Section(s): 1910  Funding to support Employment First program of community rehabilitation, employment, and transition from education to employment for disabled persons, related to Executive Order 2015-15. Funding is transferred from Developmental Disabilities Council and Projects line item in Departmental Administration and Support appropriation unit.  Funding Source(s): GF/GP 500,000  Related Boilerplate Section(s): 1921  Funding costs due to the one-year expiration of the moratorium on the federal Affordable Care Act (ACA) health insurer fee, which Medicaid managed care organization are required to pay. The federal ACA health insurer fee have been repealed after tax year 2020.  Funding Source(s): Federal 130,480,200 GF/GP 50,019,800
Federal health insurance fee (included as new in 2019	180,500,000	Funding Source(s): GF/GP 4,621,100  Related Boilerplate Section(s): 1910  Funding to support Employment First program of community rehabilitation, employment, and transition from education to employment for disabled persons, related to Executive Order 2015-15. Funding is transferred from Developmental Disabilities Council and Projects line item in Departmental Administration and Support appropriation unit.  Funding Source(s): GF/GP 500,000  Related Boilerplate Section(s): 1921  Funding costs due to the one-year expiration of the moratorium on the federal Affordable Care Act (ACA) health insurer fee, which Medicaid managed care organization are required to pay. The federal ACA health insurer fee have been repealed after tax year 2020.  Funding Source(s): Federal 130,480,200 GF/GP 50,019,800  Related Supplemental Boilerplate Section(s): None  Grant to Feed America – West Michigan to provide for start-up costs of expanding food delivery services to low-income individuals in the

Healthy communities grant	<del>300,000</del> 300,100	One-time grant for community healthy living, obesity prevention, and substance abuse prevention programs of Leaders Advancing and Helping Communities.		
		<u>Post-enrollment Note</u> : Administrative Board transferred out all bu \$100 of original \$300,000 GF/GP. 2019 PA 154 restored \$300,000 GF/GP appropriation and boilerplate.		
		Funding Source(s): GF/GP 300,000 300,100		
		Related Boilerplate Section(s): 1915		
		Related Supplemental Boilerplate Section(s): 465		
Healthy seniors grant – VETOED	<del>1,000,000</del> 0	One-time grant for senior programs and services at a senior center in the City of Portage; an equivalent amount of nonstate matching funds is required in order to receive the grant.		
		Funding Source(s): GF/GP <del>1,000,000</del> 0		
		Related Boilerplate Section(s): 1936		
Homelessness elimination blueprint	250,000	One-time funding for the research and creation of a comprehensive plan to end homelessness in Oakland County.		
		Funding Source(s): GF/GP 250,000		
		Related Boilerplate Section(s): 1935		
Hospital behavioral health pilot program – 10.0 FTE	4,000,000	One-time funding for a behavioral health pilot project through McLarer Greenlawn Campus in Lansing.		
positions		Funding Source(s): GF/GP 4,000,000		
		Related Boilerplate Section(s): 1934		
Human trafficking survivors' assistance – AD BOARD TRANSFER	<del>1,000,000</del> 100	One-time funding for two long-term shelters for needs and recovery or survivors of human trafficking.		
TRANSI ER		<u>Post-enrollment Note</u> : Administrative Board transferred out all bu \$100 of original \$1.0 million restricted appropriation to Crime Victim Rights Services Grant line item.		
		Funding Source(s): Restricted 1,000,000 100		
		Related Boilerplate Section(s): 1916		
Juvenile justice property projects	300,000	One-time funding for facility improvements at Bay Pines and Shawond facilities.		
		Funding Source(s): GF/GP 300,000		
		Related Boilerplate Section(s): None		
Kids' food basket – <b>VETOED</b>	<del>250,000</del> 0	Grant to the Kids' Food Basket organization, which provides meals to low-income children.		
		Funding Source(s): GF/GP <del>250,000</del> 0		
		Related Boilerplate Section(s): None		

Lead exposure response and abatement	3,434,500	One-time funding for health care, food and nutrition, lead abaten and other services in communities with lead contamination in w soil, or housing that has caused elevated blood lead levels and human health consequences; eligible communities may include City of Flint.			
		Funding Source(s):	GF/GP	3,434,500	
		Related Boilerplate Section(s): 1917			
Legal assistance – VETOED	<del>60,000</del> 0	Grant to the Allegan County Legal Assist legal assistance for civil proceedings to legal assistance for civil proc			
		Funding Source(s):	GF/GP	<del>60,000</del> 0	
		Related Boilerplate Section(s): 1932			
Multicultural integration funding	1,981,100	Funding for various multicultural organ services programs to specific populations		provide social	
		Funding Source(s):	GF/GP	1,981,100	
		Related Boilerplate Section(s): 295			
One-time information technology contingency	35,250,000	Provides for a contingency fund restricting 75% of annual one-ting appropriations for all major information technology systems a projects. Pursuant to boilerplate Sec. 1909, these funds can only accessed after being transferred to another line item via a legislat transfer.		systems and ds can only be	
		Post-enrollment Note: Governor deemed 1909 as unenforceable, indicating expenditure restrictions.			
		1909 as unenforceable, indicating			
		1909 as unenforceable, indicating expenditure restrictions.	non-complian	ce with the 26,437,500	
One-time information technology services and projects	11,750,000	1909 as unenforceable, indicating expenditure restrictions.  Funding Source(s):	Federal GF/GP hase of servent and Budget so and automate by DTMB, income, user supend other data in interdepartment.	26,437,500 8,812,500 dices from the (DTMB) for all ation projects, luding staffing, poort, vendor, administration	
technology services and	11,750,000	1909 as unenforceable, indicating expenditure restrictions.  Funding Source(s):  Related Boilerplate Section(s): 1909  Supports one-time costs for the purc Department of Technology, Management DHHS information technology services managed centrally for state departments data center services, telecommunications of tware and equipment costs, internet, a costs; funding is transferred through and DTMB. Also supports IT related services	Federal GF/GP hase of servent and Budget so and automate by DTMB, income, user supend other data in interdepartment.	26,437,500 8,812,500 dices from the (DTMB) for all ation projects, luding staffing, poort, vendor, administration	
technology services and	11,750,000	1909 as unenforceable, indicating expenditure restrictions.  Funding Source(s):  Related Boilerplate Section(s): 1909  Supports one-time costs for the purc Department of Technology, Managemen DHHS information technology services managed centrally for state departments data center services, telecommunication software and equipment costs, internet, a costs; funding is transferred through an DTMB. Also supports IT related service and encryption and security software.	Federal GF/GP  hase of servent and Budget so and automore by DTMB, income, user superned other data in interdepartments for the Med	26,437,500 8,812,500 ices from the (DTMB) for al ation projects luding staffing oport, vendor, administration tental grant to icaid program, 8,812,500 2,937,500	
technology services and	750,000	1909 as unenforceable, indicating expenditure restrictions.  Funding Source(s):  Related Boilerplate Section(s): 1909  Supports one-time costs for the purce Department of Technology, Management DHHS information technology services managed centrally for state departments data center services, telecommunication software and equipment costs, internet, a costs; funding is transferred through an DTMB. Also supports IT related service and encryption and security software.  Funding Source(s):	hase of server and Budget is and Budget is and automate by DTMB, income, user superned other data in interdepartm is for the Med  Federal GF/GP  105, 1907, 190  m in Jackson to	ices from the 26,437,500 8,812,500 ices from the (DTMB) for all ation projects, luding staffing, opport, vendor, administration administration icaid program, 8,812,500 2,937,500 8, 1909 osupport costs	
technology services and projects  Opioid transitional housing		1909 as unenforceable, indicating expenditure restrictions.  Funding Source(s):  Related Boilerplate Section(s): 1909  Supports one-time costs for the purc Department of Technology, Management DHHS information technology services managed centrally for state departments data center services, telecommunications of tware and equipment costs, internet, a costs; funding is transferred through and DTMB. Also supports IT related service and encryption and security software.  Funding Source(s):  Related Boilerplate Section(s): 1901, 1905  Funds allocated to Andy's Angels program of treatment programs for individuals suffering source.	hase of servet and Budget is and automated by DTMB, income, user superned other data in interdepartm in the Med  Federal GF/GP  105, 1907, 190  m in Jackson to ing from addiction	ices with the 26,437,500 8,812,500 ices from the (DTMB) for all ation projects, luding staffing, opport, vendor, administration administration icaid program, 8,812,500 2,937,500 8, 1909 o support costs on and for their	
technology services and projects  Opioid transitional housing		1909 as unenforceable, indicating expenditure restrictions.  Funding Source(s):  Related Boilerplate Section(s): 1909  Supports one-time costs for the pure Department of Technology, Management DHHS information technology services managed centrally for state departments data center services, telecommunications of tware and equipment costs, internet, a costs; funding is transferred through an DTMB. Also supports IT related service and encryption and security software.  Funding Source(s):  Related Boilerplate Section(s): 1901, 19  Funds allocated to Andy's Angels program of treatment programs for individuals suffer families.  Post-enrollment Note: Governor vetoed	hase of servet and Budget is and automated by DTMB, income, user superned other data in interdepartm in the Med  Federal GF/GP  105, 1907, 190  m in Jackson to ing from addiction	ices with the  26,437,500 8,812,500  ices from the (DTMB) for all ation projects, luding staffing, oport, vendor, administration tental grant to icaid program,  8,812,500 2,937,500  8, 1909  o support costs on and for their	
technology services and projects  Opioid transitional housing		1909 as unenforceable, indicating expenditure restrictions.  Funding Source(s):  Related Boilerplate Section(s): 1909  Supports one-time costs for the purc Department of Technology, Management DHHS information technology services managed centrally for state departments data center services, telecommunication software and equipment costs, internet, a costs; funding is transferred through and DTMB. Also supports IT related service and encryption and security software.  Funding Source(s):  Related Boilerplate Section(s): 1901, 1905.  Funds allocated to Andy's Angels program of treatment programs for individuals suffer families.  Post-enrollment Note: Governor vetoed restored appropriation and boilerplate.	hase of server and Budget is and Budget is and automate by DTMB, income, user sugand other data in interdepartm is for the Med Federal GF/GP in Jackson to the model of the mo	26,437,500 8,812,500  dices from the (DTMB) for all ation projects, luding staffing, poort, vendor, administration lental grant to icaid program,  8,812,500 2,937,500  8, 1909  Dissupport costs on and for their	

Primary care and dental health services – <b>VETOED</b>	<del>150,000</del> 0	One-time funding to support primary care clinic and dental health clinic services for indigent individuals in certain Detroit and Wayne County nonprofit clinics under Team Cares.		
		Funding Source(s): GF/GP <del>150,0</del>	<del>000</del> 0	
		Related Boilerplate Section(s): 1914		
Project ECHO opioid intervention	40,000	Funds allocated to the Project ECHO opioid intervention program.		
intervention		<u>Post-enrollment Note</u> : Governor vetoed line item. 2019 PA 154 f restored appropriation and boilerplate.	ully	
		Funding Source(s): GF/GP 40,0	100	
		Related Boilerplate Section(s): 1933		
		Related Supplemental Boilerplate Section(s): 467		
Property management projects	2,460,700	Funding for one-time maintenance and improvements to DH owned facilities.	HS	
		Funding Source(s): Federal 1,060,6 GF/GP 1,400,1		
		Related Boilerplate Section(s): None		
Refugee assistance grant – <b>VETOED</b>	<del>175,000</del> 0			
		Funding Source(s): GF/GP <del>175,0</del>	000	
		Related Boilerplate Section(s): 1929		
Runaway and homeless	800,000	One-time funding for Runaway and Homeless Youth programs.		
youth services program – <b>VETOED</b>	0	Funding Source(s): TANF 500,0	<del>100</del>	
		GF/GP 300,0	0	
		Related Boilerplate Section(s): 596(2)		
Senior citizen center program grants	500,000	One-time funding for a grant program to support health-related senior programs at multi-purpose senior citizen centers; maximum grant award is \$5,000 per program.		
		<u>Post-enrollment Note</u> : Governor vetoed line item. 2019 PA 154 f restored appropriation and boilerplate.	ully	
		Funding Source(s): GF/GP 500,0	00	
		Related Boilerplate Section(s): 1923		
		Related Supplemental Boilerplate Section(s): 468		

Senior community services	400,000	One-time funding for an Alzheimer's disease and demential support pilot program of in-home care and community ser seniors in 10 counties, carried out through the Alz Association-Michigan Chapter.	vices for
		<u>Post-enrollment Note</u> : Governor vetoed line item. 2019 PA restored appropriation and boilerplate.	154 fully
		Funding Source(s): GF/GP	400,000
		Related Boilerplate Section(s): 1924	
		Related Supplemental Boilerplate Section(s): 469	
Sexual assault comprehensive services	2,000,000	Competitive grants to provide sexual assault comprehensive to victims.	services
grants		Funding Source(s): GF/GP 2,	000,000
		Related Boilerplate Section(s): 1937	
State innovation model continuation	3,000,000	One-time funding to sustain infrastructure of five communi- innovation regions (CHIRs), initiated under the 4-year \$7 federal state innovation model (SIM) grant nearing completed SIM evaluation and recommendations are completed and CH to identify ongoing non-state financial support. Work project available from prior fiscal years will also be used.	O millior on, while IRs work
		Funding Source(s): GF/GP 3,	000,000
		Related Boilerplate Section(s): None	
	<del>1,500,000</del>		liHIN).
Statewide health information exchange	500,100		
		<u>Post-enrollment Note</u> : Administrative Board transferred ou \$500,100 of the funding to other line items.	ıt all bu
information exchange projects – AD BOARD		<u>Post-enrollment Note</u> : Administrative Board transferred ou \$500,100 of the funding to other line items.  Funding Source(s): GF/GP 1,	it all but 500,000 500,100
information exchange projects – AD BOARD		<u>Post-enrollment Note</u> : Administrative Board transferred ou \$500,100 of the funding to other line items.  Funding Source(s): GF/GP 1,	500,000
information exchange projects – AD BOARD TRANSFER  Substance abuse community and school		Post-enrollment Note: Administrative Board transferred of \$500,100 of the funding to other line items.  Funding Source(s): GF/GP 1,  Related Boilerplate Section(s): None  One-time funding to SAFE Substance Abuse Coalition in	5 <del>00,000</del> 500,100
information exchange projects – AD BOARD TRANSFER  Substance abuse	500,100 <del>100,000</del>	Post-enrollment Note: Administrative Board transferred ou \$500,100 of the funding to other line items.  Funding Source(s): GF/GP 1,  Related Boilerplate Section(s): None  One-time funding to SAFE Substance Abuse Coalition in County.	500,000 500,100
information exchange projects – AD BOARD TRANSFER  Substance abuse community and school	500,100 <del>100,000</del>	Post-enrollment Note: Administrative Board transferred ou \$500,100 of the funding to other line items.  Funding Source(s): GF/GP 1,  Related Boilerplate Section(s): None  One-time funding to SAFE Substance Abuse Coalition in County.	500,000 500,100 Wayne
information exchange projects – AD BOARD TRANSFER  Substance abuse community and school	500,100 <del>100,000</del>	Post-enrollment Note: Administrative Board transferred of \$500,100 of the funding to other line items.  Funding Source(s): GF/GP 1,  Related Boilerplate Section(s): None  One-time funding to SAFE Substance Abuse Coalition in County.  Funding Source(s): GF/GP  Related Boilerplate Section(s): 1918	Wayne 100,000 0 nmissior costs for nds are
information exchange projects – AD BOARD TRANSFER  Substance abuse community and school outreach – VETOED  Suicide prevention commission (included as new in 2019	100,000 0	Post-enrollment Note: Administrative Board transferred out \$500,100 of the funding to other line items.  Funding Source(s): GF/GP 1,  Related Boilerplate Section(s): None  One-time funding to SAFE Substance Abuse Coalition in County.  Funding Source(s): GF/GP  Related Boilerplate Section(s): 1918  One-time funding to support the Suicide Prevention Comestablished under 2019 Act 177 (Senate Bill 228), including clerking, meetings, and commissioner reimbursement; furestablished as a work project through FY 2023-24. Commissioner a report with recommendations.	Wayne 100,000 0 nmissior costs for nds are

STATE GENERAL FUND/ GENERAL PURPOSE	\$4 <del>5,016,800</del> \$87,092,000	Unrestricted state revenue from taxes and other sources.		
Total other state restricted revenues	<del>1,000,000</del> 100	Crime Victim's Rights Fund revenue from fees assessed against convicted criminal defendants.		
Total other federal revenues	<del>36,310,600</del> 166,790,800	Includes Medicaid Title XIX, and other federal grants supporting administrative and information technology services.		
Social security act, temporary assistance for needy families	<del>500,000</del> 0	, , ,		
GROSS APPROPRIATION	\$ <del>82,827,400</del> \$253,882,900	Total of all applicable line item appropriations.		
		Related Boilerplate Section(s): 1922		
		Funding Source(s): GF/GP 600,000 0		
Wrap-around services – <b>VETOED</b>	<del>600,000</del> 0	One-time funding to assist three pilot program sites establish before and after school programs and services in coordination with a non-profit organization.		
		Related Boilerplate Section(s): 1919		
		Funding Source(s): GF/GP 1,500,000 100		
		<u>Post-enrollment Note</u> : Administrative Board transferred out all but \$100 of original \$1.5 million GF/GP to other line items.		
Unified clinics resiliency center for families and children – AD BOARD TRANSFER	<del>1,500,000</del> 100	j i		

### **GENERAL SECTIONS**

### Sec. 201. State Spending to Local Governments

Estimated total state spending from state resources under Part 1 to be paid to local units of government.

### Sec. 202. Appropriations Subject to Management and Budget Act

Provides that appropriations authorized under Parts 1 and 2 are subject to the Management and Budget Act, 1984 PA 431, MCL 18.1101 to 18.1594.

### Sec. 203. Terms and Acronyms

Provides definitions for terms and acronyms used in Parts 1 and 2.

### Sec. 204. Internet Reporting Requirements

Requires departments and agencies receiving Part 1 appropriations to use the internet to fulfill the reporting requirements of Parts 1 and 2, including provision of reports by electronic mail and placing reports on the internet.

#### Sec. 205. Purchasing Preference for American, Michigan, and Veteran Goods or Services

Prohibits the purchase of foreign goods or services if competitively priced and comparable quality American goods or services are available. Requires that preference be given to goods or services manufactured by Michigan businesses or Michigan businesses owned and operated by veterans if competitively priced and of comparable quality.

### Sec. 206. Businesses in Deprived and Depressed Communities

Requires the Director of DHHS to take steps to ensure businesses in deprived and depressed communities compete for and perform contracts to provide services or supplies, and to encourage firms with which DHHS contracts to subcontract with businesses in deprived and depressed communities.

### Sec. 207. Out-of-State Travel Report

Requires a report by January 1 on out-of-state travel by DHHS employees in the prior fiscal year that was funded by appropriations within the budget, including dates, related costs, and fund sources for each travel occurrence.

#### Sec. 209. General Fund/General Purpose Appropriation Lapse Report

Requires the State Budget Office to report by November 30 on estimated general fund/general purpose appropriation lapses by major departmental program areas at the close of the prior fiscal year.

#### Sec. 210. Contingency Fund Appropriations

Appropriates up to \$80 million in federal contingency funds, up to \$45 million in state restricted contingency funds, up to \$5 million in local contingency funds, and up to \$2 million in private contingency funds. Specifies that contingency funds are not available for expenditure until transferred to another Part 1 line item through the legislative transfer process; prohibits increasing TANF authorization with federal contingency funds.

### Sec. 211. Accessible Website Data on Expenditures and Payments

Requires DHHS, in cooperation with DTMB, to maintain a searchable website accessible by the public at no cost, which includes all of the following information: fiscal year-to-date expenditures, payments to a selected vendor, as well as number of active department employees by job classification, job specifications, and wage rates.

## Sec. 212. State Restricted Funds Report

Requires annual report on estimated state restricted fund balances, state restricted projected revenues, and state restricted expenditures for the previous and current fiscal years, within 14 days after the release of the Executive budget recommendation for the next fiscal year.

#### Sec. 213. Performance Metrics

Requires DHHS to maintain a scorecard of key program performance metrics on a public website.

#### Sec. 214. Legacy Costs

Specifies that the total FY 2019-20 appropriations under Part 1 for legacy costs are estimated at \$350.3 million, including pension-related legacy costs of \$170.3 million and retiree health care legacy costs of \$180.0 million.

Sec. 215. Notification When Legislative Objectives Conflict with Federal Regulation or When Grant Unused Requires DHHS to provide notice if: (a) a legislative objective in the budget or in a bill to amend the Social Welfare Act cannot be implemented due to conflict with federal regulations; or (b) an awarded federal grant cannot or will not be used.

#### Sec. 216. Use of Prior-Year Revenue

Authorizes appropriation of available prior-year revenue to write off accounts receivables, deferrals, and prior-year obligations that exceeded appropriations. Appropriation fund sources in Part 1 shall include collections and accruals from current year services, and reimbursements, refunds, adjustments, and settlements from prior fiscal years.

### Sec. 217. Detailed Fund Sources Report

Requires report by February 1 on detailed name and amounts of estimated federal, restricted, private, and local revenue sources that support appropriations by each line item; and requires report of the same detail for the FY 2020-21 Executive budget recommendation upon its release.

#### Sec. 218. Basic Health Services

Lists eight health services to be included in annual list of proposed basic health services that are to be available and accessible throughout the state, as required under Part 23 of the Public Health Code, 1978 PA 368. (Governor's signing letter states section is unenforceable.)

### Sec. 219. Contract with Michigan Public Health Institute

Allows DHHS to contract with the Michigan Public Health Institute for public health projects and related activities; requires report on each funded project by January 1; and requires DHHS to provide copies of all reports, studies, and publications produced by the Institute from prior fiscal year DHHS funding by December 30.

#### Sec. 220. Faith-Based Contracts and Services

Requires DHHS to ensure that faith-based organizations are able to compete for appropriate contracts for services.

### Sec. 221. Time-Limited Addendum to Social Welfare Act

Requires DHHS to treat this act as a time-limited addendum to the Social Welfare Act, according to Section 1b of the Social Welfare Act.

### Sec. 222. Notification and Report of Policy Changes

Requires policy manual to be available on the DHHS website; and requires a report by April 1 on policy changes made to implement new public acts.

#### Sec. 223. Fees for Publications, Videos, Conferences, and Workshops

Allows DHHS to establish and collect fees for publications, videos and related materials, conferences, and workshops; collected fees that are appropriated when received shall be used to offset expenditures for those purposes; fees shall not exceed related expenditures; requires notice when collected fees exceed current appropriation.

### Sec. 224. Food Assistance Overissuance Collections

Allows DHHS to retain all of the state's share of food assistance program overissuance collections to offset GF/GP costs, and directs how the retained collections shall be applied.

### Sec. 225. Public and Private Service Providers

Prohibits sanctions or suspensions from being more stringent for private providers than for public providers performing equivalent services; prohibits preferential treatment for public or private service providers based on whether or not they have collective bargaining agreements with direct care workers. (Governor's signing letter states section is unenforceable.)

### Sec. 226. Fee Revenue Carryforward

Allows carryforward into the next fiscal year of fee revenue that exceeds appropriations, which shall be used as the first source of funds in that fiscal year.

### Sec. 227. Tobacco Tax Funds and Healthy Michigan Fund Report

Requires state departments, agencies, and commissions receiving tobacco tax and Healthy Michigan Fund revenue to report on use of the funds by April 1 to the Legislature, including detailed spending plan by appropriation line item, description of allocations or bid processes, program participation criteria and benefits, and outcome measures.

### Sec. 228. Interest Payable to DHHS on Late Payments

Allows DHHS to assess a penalty of 1% per month interest for late payments in cases of an overpayment owed to the Department, 60 days after notification. In case of DHHS error, interest can be assessed beginning 6 months after initial notification. Limits total penalty amount and directs that state's share of funds collected be deposited to the state general fund. Requires report by September 30 on penalties assessed and paid, and current status.

#### Sec. 229. Interagency Agreement with Michigan Talent Investment Agency for Use of TANF Funds

Requires DHHS to extend the interagency agreement with the Michigan Talent Investment Agency for TANF-funded job readiness and welfare-to-work programming and include specific outcome and performance reporting requirements in the agreement; requires report by January 1 including certain information on TANF expenditures and clients served; requires report by March 1 on Michigan Works! job readiness referrals and outcomes. (Governor's signing letter states section is unenforceable.)

#### Sec. 230. Implementation of Prior Year Funding Increases Report

Requires DHHS to report by December 31 on the status of implementation of any program funding increases from the previous fiscal year that are not inflationary or caseload related, and to provide an explanation and an expected implementation date for funding increases that have not yet occurred.

### Sec. 231. Travel Reimbursement to Local County Board Members and Directors

Allocates up to \$100,000 to reimburse counties for out-of-pocket travel costs of local county department board members and directors to attend one meeting each year of the Michigan County Social Services Association.

#### Sec. 232. Line Item Spending Plans

Requires approved spending plans and related revenue and spending detail to be provided by DHHS to the Legislature for each appropriation line item by January 15; and prohibits DHHS from appropriating additional GF/GP or related federal or state restricted funds without providing a written 30-day notice to the Legislature.

#### Sec. 240. Use of Existing Work Project Authorization

Establishes that appropriations in part 1 shall not be expended in cases where existing work project authorization is available for the same expenditures. (Governor's signing letter states section is unenforceable.)

#### Sec. 251. Over Expenditure Reporting

Requires DHHS to report monthly on any line item for which it is estimated that total annual expenditures will exceed existing appropriations by 5% or more, and to report on corrective and mitigating actions taken; exempts line item appropriations associated with annual May consensus revenue estimating conference caseload estimates.

### Sec. 252. Appropriations for Healthy Michigan Plan

Specifies that appropriations for the Healthy Michigan Plan (HMP) are contingent upon 2013 PA 107 not being amended, repealed, or otherwise altered to eliminate the HMP. Also specifies that if any of those actions occur, the remaining funds in the HMP line items shall be used only to pay for previously incurred costs.

#### Sec. 253. Information Technology Investment Management and Board – PARTIALLY VETOED

Requires establishment of an information technology investment board within DHHS, provides guidance and policy for establishing management practices, and requires reports; subsections (4) through (7) require DHHS to establish an independent verification and validation program to oversee information technology practices and compliance and to assess risks, and requires a report. (Governor vetoed subsections (4) through (7) and \$1.0 million related funding. Governor's signing letter also states section is unenforceable.)

### Sec. 256. Revise Education Modules Regarding Sexual Abuse Prevention

Directs that if funds become available, DHHS shall collaboratively revise the curriculum for 2 education health modules to include age-appropriate information about the importance of consent, setting and respecting personal boundaries, and prevention of child sexual abuse.

### Sec. 257. Revise Education Modules Regarding Suicide and Depression Prevention

Directs that if funds become available, DHHS shall collaboratively revise the curriculum for 2 education health modules to include age-appropriate and medically accurate information about depression and suicide, and protective factors that help prevent suicide.

### Sec. 263. Communications with Legislature Regarding Waivers

Requires DHHS to notify the Legislature in writing beforehand of the planned submission of a waiver, state plan amendment, or similar proposal to the federal Centers for Medicare and Medicaid Services (CMS) or other federal agency, and report semiannually in writing on the status of discussions with federal agencies on potential or future waiver applications, and the status of any submitted applications not yet approved.

### Sec. 264. DHHS Employee Communication with Legislature

Prohibits DHHS from taking disciplinary action against an employee for communicating with a member of the Legislature or his/her staff. (Governor's signing letter states section is unenforceable.)

### Sec. 270. Expenses Recovered from Legal Actions as Notified by Attorney General

Requires DHHS to notify the Legislature and provide detailed reports by February 1 on information from the Attorney General regarding expenses recovered from legal actions, including amounts, programs or services for which the monies were originally expended, disposition of recovered funds, and description of legal actions.

### Sec. 274. Capped Federal Funds Reports and Legislative Intent

Requires report after release of Executive budget recommendation for the next fiscal year by line item on expenditure and revenue estimates for the previous, current and upcoming fiscal years for capped federal grants, including TANF, Social Services Block Grant, Child Welfare Services Block Grant, Promoting Safe and Stable Families funds, and Low-Income Home Energy Assistance Program funds; expresses intent that capped federal funds not be used for economics adjustments in the Governor's proposed budget unless increased funding is expected; and requires report by February 15 on funding that meets TANF maintenance of effort funding requirement.

### Sec. 275. Year-End Federal Funds Adjustments

Provides limited authority for the Executive to realign capped and other federal fund sources to maximize federal revenues as part of the year-end closing process, and requires a report within 30 days after completion of year-end book closing on the realignments made for the previous fiscal year.

#### Sec. 280. Personnel-Related Costs Report

Requires DHHS to provide a report by March 1 detailing the specific individual amounts for salaries and wages, payroll taxes, and fringe benefits, additional information, and a plan for addressing any projected shortfalls, for each line item.

#### Sec. 288. Services and Administrative Limitations for New Contracts

Requires that after the first year of a contract, no less than 90% of a contract supported solely from state restricted or general fund/general purpose funds and designated for a specific entity for the purpose of providing services to individuals be expended for those services; allows DHHS to make exceptions; and requires a report by September 30 on the rationale for all exceptions and the number of contracts terminated due to violations.

#### Sec. 289. Supervisor-to-Staff Ratio Report

Requires DHHS to report by March 1 on the supervisor-to-staff ratios by Department divisions and subdivisions.

### Sec. 290. Welfare Fraud Hotline

Requires DHHS to include the welfare fraud hotline phone number on any public advertisement for public assistance.

### Sec. 293. Savings From Behavioral Health Integration Pilot Projects

Requires that any savings from pilots to integrate Medicaid behavioral health and Medicaid physical health service and/or financial systems shall only be used for reinvestment in the pilot sites where savings occurred. Shared savings between a PIHP or CMHSP and a Medicaid health plan shall be carried forward for expenditures in future years.

#### Sec. 294. Integrated Service Demonstration Pilot

Allows DHHS to work with PIHPs and CMHSPs to create a physical and behavioral health integrated service demonstration model under which public funds are not transferred to for-profit Medicaid health plans; expands existing integrated efforts including shared care coordination; states intent that the pilot project last at least 2 years; increases number of individuals who meet criteria for expanded care coordination including persons not receiving certain health care services; states outcomes and performance measures; requires a report.

### Sec. 295. Multicultural Integration Funding

Requires that certain providers awarded grants for physical and behavioral health services to multicultural populations must comply with stated performance-related metrics, have accreditations, and report annually to DHHS; grants shall not be released unless prior year reporting requirements are satisfied; reports are to be provided to the Legislature.

### Sec. 296. Employee Legal Costs Related to Flint Water System

Requires DHHS to be responsible for legal costs of private attorneys defending current and former DHHS employees in any legal action or investigation related to the water system in the City of Flint or other community in which a declaration of emergency was issued because of drinking water contamination.

### Sec. 297. FTE Report

Requires semiannual reports on the number of full-time equated positions (FTEs) in pay status by type of staff, and comparison by line item of authorized FTEs with employed FTEs.

#### Sec. 298. Behavioral Health Integration Pilot Projects - VETOED

Requires DHHS to pilot the integration of behavioral health and physical health services, including: contract with a project facilitator, implement up to 3 3-year pilot projects with CMHSPs and Medicaid health plans within stated parameters, reinvest savings into behavioral health services in the pilot site, create a risk corridor for Medicaid health plans and rates, and contract with a university to evaluate pilots and replicability. Requires intent for report by DHHS by January 2022 of outcomes that would trigger statewide integration; requires annual reports by November 1 and report by managing entities of pilots upon completion, and states legislative intent for projects.

### Sec. 299. Request for Proposal for Contract

Prohibits DHHS from issuing a request for proposal (RFP) for a contract in excess of \$5 million, without first considering issuing a request for information (RFI) or a request for qualification (RFQ) relative to that contract; DTMB must be notified of evaluation process used to determine if an RFI or RFQ was not necessary prior to issuing the RFP; requires that all vendors receive detailed notices of RFP results; and requires report by September 30.

### **DEPARTMENTAL ADMINISTRATION AND SUPPORT**

### Sec. 307. 2-1-1 Statewide Call System

Allocates \$950,000 to Michigan 2-1-1 to coordinate and support a statewide 2-1-1 call system; funding shall not exceed 50% of total operating expenses; requires 2-1-1 to refer to DHHS any calls reporting fraud, waste, or abuse of state-administered public assistance; and requires annual report including certain call data.

#### Sec. 316. Terminal Leave Payments

Provides that spending for terminal leave payments shall not exceed the appropriation unless a legislative transfer of funds from another line item supporting administrative costs is requested.

### **CHILD SUPPORT ENFORCEMENT**

### Sec. 401. Child Support Incentive Payments and Enforcement System Requirements

Allocates \$11.5 million in federal child support incentive payment revenue to the state and \$14.5 million to counties; if revenue exceeds \$26.0 million, state allocation increases to \$15.4 million (remaining revenue subject to legislative appropriation); if revenue is below \$26.0 million, state and county allocations are reduced by 50% of shortfall.

#### Sec. 409. County Incentive for Child Support Collections

Appropriates to each qualifying county 75% of the amount by which statewide-retained child support collections exceed \$38.3 million.

### Sec. 410. Escheated Child Support Collections Authorization Adjustment

Authorizes state budget director to reduce federal authorization for legal support contracts by 66% of escheated child support collections and increase GF/GP authorization by the same amount to offset lost federal revenue; requires DHHS to notify Legislature of authorization adjustment.

### **COMMUNITY SERVICES AND OUTREACH**

### Sec. 450. School Success Partnership Program - VETOED

Allocates \$525,000 to the Northeast Michigan Community Services Agency for the School Success Partnership Program; requires report.

### Sec. 452. Allocation of Funds for Forensic Nurse Examiner Programs

Requires DHHS to use crime victim justice assistance grants appropriations to continue to support forensic nurse examiner programs to facilitate training for improved evidence collection for the prosecution of sexual assault. Funds shall be used for program coordination and training.

#### Sec. 453. Homeless Programs Per Diem Increases

Requires DHHS to maintain emergency shelter program per diem rates at \$18.00 per be night; requires report.

### Sec. 454. Homeless Programs Funding

Requires DHHS to allocate the full amount of appropriated funds for homeless programs, including funding for third-party contracts for emergency shelter services.

### Sec. 455. Homeless Programs TANF Eligibility Reporting

Requires shelter programs and human service agencies to report data elements needed to establish TANF eligibility.

#### Sec. 456. Birth Certificate Fees for Homeless Individuals

Requires \$90,000 be allocated to reimburse public service agencies for birth certificate fees paid for homeless clients.

#### Sec. 457. Uniform Statewide Sexual Assault Evidence Kit Tracking System

Allocates \$800,000 restricted funding to contract for the administration of the Uniform Statewide Sexual Assault Evidence Kit Tracking System; lists requirements of the system; establishes the Sexual Assault Evidence Tracking Fund; requires report.

### Sec. 458. Crime Victim Advocates Funding

Requires DHHS to allocate \$2.0 million Crime Victim's Rights Fund to maintain increased grant funding for the support of crime victim advocates.

#### Sec. 459. Child Advocacy Centers

Requires \$1.0 million funding for child advocacy centers be allocated as additional funding for operations and to increase services to victims and their families. (Administrative Board transferred out all but \$100 related to this boilerplate.)

### CHILDREN'S SERVICES AGENCY - CHILD WELFARE

#### Sec. 501. Foster Care Time Limit Goals

Establishes a goal that not more than 25% of foster children at any given time during the current fiscal year will have been in foster care for 24 months or more, if in the best interest of the child; requires annual report.

#### Sec. 502. Indian Tribal Government Foster Care Reimbursement

Requires reimbursement to Indian Tribal governments for 50% of foster care expenditures not otherwise eligible for federal funding.

### Sec. 503. Child Welfare Performance-Based Funding

Directs DHHS to review actuarially sound case rates for child welfare services by DHHS and private providers; requires a report on the full cost analysis of the performance-based funding model by March 1; requires DHHS to continue an independent third party evaluation; requires quarterly reports.

### Sec. 504. West Michigan Partnership for Children Consortium

Allows DHHS to continue a master agreement with the West Michigan Partnership for Children Consortium; requires report.

### Sec. 505. DHHS and Wayne County Juvenile Justice Report

Requires DHHS and Wayne County to report on the juvenile justice system including number of youth served by DHHS, type of setting for each youth, performance outcomes, and financial costs or savings.

### Sec. 507. Foster Care Private Collections

Allows DHHS to satisfy private foster care appropriation deducts with collections for services provided in prior fiscal years.

### Sec. 508. Children Trust Fund (CTF) Revenues and Joint Projects

Appropriates gifts and donations to CTF; requires collaboration between DHHS and Child Abuse and Neglect Prevention Board on policy matters to avoid administrative delays of the distribution of grants.

### Sec. 511. Physical and Mental Health Assessment Report

Requires DHHS to track the number and percentage of foster children who received medical and mental health exams within 30 days of entry into foster care; requires semi-annual report.

#### Sec. 512. Foster Care Services Provided by Relatives Report

Requires detailed report on relative foster care placements and the number of licensure waivers granted.

### Sec. 513. Child Placements in Out-of-State Facilities

Restricts placement of children in out-of-state facilities unless specified criteria are met; requires report on number of children in out-of-state placements, costs of placements, per diems of residential facilities, and a list of each placement.

### Sec. 514. Child Protective Services Report

Requires report on Child Protective Services; lists specific information and statistics to be included in the report, including the actions and expenditures made to achieve compliance with Auditor General Audit Report 431-1285-16.

### Sec. 515. Child Protection Services (CPS) Caseworker Home Visit Safety

Prohibits DHHS from denying a CPS caseworker's request to have another worker accompany the CPS caseworker on a home visit if the CPS caseworker believes it unsafe to conduct the home visit alone.

### Sec. 516. County Child Care Fund (CCF) Indirect Cost Payments

Requires the administrative or indirect CCF 10% cost payment be distributed monthly to counties and prohibits a requirement to submit documentation to DHHS for any of the covered expenditures of the payment.

### Sec. 517. Title IV-E Appeals Process

Requires DHHS to retain the same Title IV-E appeals policy as the existing policy in place in FY 2016-17.

### Sec. 518. Supervisory Oversight of CPS Caseworker Reports

Requires supervisors to complete an initial read of a CPS caseworker's report and either approve the report or note any needed corrections within 5 business days; requires the caseworker to resubmit a corrected report within 3 business days. (Governor's signing letter states section is unenforceable).

#### Sec. 519. Treatment Foster Care

Requires DHHS to permit private agencies with existing foster care services contracts to provide treatment foster care services.

### Sec. 520. Out-of-Home Placements Report

Requires DHHS to provide a detailed report on the number of days of care and expenditures by funding sources for out-of-home placements for child abuse or child neglect and juvenile justice in the previous year.

### Sec. 521. Child Care Fund (CCF) - Indirect Cost Allotment - VETOED

Requires \$4.2 million funding be allocated for CCF – Indirect Cost Allotment Payments to counties and tribal governments in the same proportion as described in section 117a of the Social Welfare Act. (This section was restored with \$3.5 million funding as Section 451 in 2019 PA 154.)

### Sec. 522. Fostering Futures Scholarship Program

Allocates \$750,000 to the Fostering Futures Scholarship Program for youth transition from foster care who are attending college or a career technical educational institution; requires 100% of funding be used for scholarships; requires semiannual report.

### Sec. 523. Family Preservation Program Report and TANF Eligibility Reporting – PARTIALLY VETOED

Requires report on family preservation program data elements and outcomes, including population and outcome data and any changes that increase child safety; requires agencies receiving Youth in Transition or Domestic Violence Prevention funding to report program data to DHHS to meet TANF eligibility; requires \$2.1 million be allocated for a 5.5% rate increase for specified programs. (Veto eliminated requirement of \$2.1 million increase.)

### Sec. 524. Strong Families/Safe Children Spending Plan

Requires counties to submit service spending plans for Strong Families/Safe Children programs; requires DHHS to approve spending plans within 30 days after receipt of properly completed spending plan.

### Sec. 525. On-Site Evaluations

Requires DHHS to use the same on-site evaluation process and noncompliance penalties for privately operated and state-operated residential facilities.

### Sec. 527. Private Child Placing Agencies' Adoption Worker Caseloads

Requires DHHS to exclude certain case types when calculating the adoption worker caseload for private agencies.

#### Sec. 530. Performance-Based Contracting

Requires all foster care and adoption master contracts funded in Section 105 of Part 1, to be performance-based contracts that employ a results-oriented process based on measurable performance indicators, desired outcomes, and annual assessment of quality of services; requires report by February 1 for the previous fiscal year.

#### Sec. 531. Child Welfare Contract Change Notification

Requires DHHS to notify the legislature of any changes to a child welfare master contract template not less than 30 days before the changes take effect, including templates for adoption, independent living plus, child placing agency foster care, and residential foster care juvenile justice.

### Sec. 532. Licensing and Contract Compliance Review

Requires collaboration between DHHS and representatives of private child and family agencies to revise and improve contract compliance and licensing review processes; requires report.

#### Sec. 533. Child Welfare Payment Promptness

Directs DHHS to make payments to child placing agencies within 30 days after receiving documentation for out-of-home care and in-home care services.

#### Sec. 534. Adoption Subsidies Report

Requires report on the expenditures and number of cases for adoption subsidies from the previous fiscal year.

### Sec. 535. Federal IV-E Claims for Foster Care Payments to Unlicensed Relatives

Requires DHHS to create a process to review and approve unlicensed relatives as meeting state licensing standards and to seek Title IV-E claims for payments; requires report.

#### Sec. 536. Report on Implementation of Federal Family First Prevention Services Act (FFPSA)

Requires report on implementation of the FFPSA, including an estimate of the 5-year spending plan.

#### Sec. 537. Residential Bed Space Standards and Preferences

Directs DHHS to collaborate with child caring institutions to implement MCL 400.1150, which restricts out-of-state placements of youth and restricts placements of youth in state administered facilities over comparable private provider facilities. (Governor's signing letter states section is unenforceable).

### Sec. 538. Child and Family Services Review Report

Requires report on the status of DHHS' program improvement plan associated with Round 3 of the Child and Family Services Review.

### Sec. 540. Psychotropic Medication For Youth in Out-of-Home Placements

Requires DHHS to determine within 7 days whether to change prescribed psychotropic medication for state wards if the placement administration determines that the medication should be changed, to seek parental consent within 7 business days for a temporary court ward, or to petition the court on the eighth business day if parental consent is not provided.

### Sec. 546. Foster Care Agency Administrative Rates

Establishes foster care administrative rate of \$46.20 for private child placing agencies under contract with DHHS; requires payments for independent living plus services at the statewide per diem; requires providers to submit quarterly expenditure reports, if required by federal guidelines; requires DHHS to maintain current rates for private providers of residential services.

#### Sec. 547. Guardianship Assistance Rates

Requires that minimum guardianship assistance rates not be less than age-appropriate rates for family foster care; requires quarterly report on number of children enrolled in guardianship assistance and foster care mental health and waiver programs.

### Sec. 550. Child Care Fund (CCF) - County Reimbursement Restrictions

Prohibits DHHS to offset against reimbursement payments to counties and shall not seek reimbursement for charges DHHS received over 12 months prior; prohibits counties to seek reimbursement for charges that are more than 12 months after date of service.

### Sec. 551. CCF County Clarification Requests Response Deadline

Requires that DHHS respond within 30 days to a county email CCF clarification request.

### Sec. 552. County CCF Review Results

Requires DHHS to provide a county's CCF review's results to the county within 60 days; prohibits DHHS to evaluate the relevancy or efficiency of services provided.

### Sec. 558. Child Welfare Training Institute

Requires DHHS to provide all necessary training and materials to private agencies so that trained private agency staff can deliver pre-service training to any private agency staff. (Governor's signing letter states section is unenforceable).

#### Sec. 559. Parent-to-Parent - VETOED

Allocates \$250,000 to Parent-to-Parent Program for adoptive parents; requires report.

### Sec. 562. Time and Travel Reimbursements for Foster Parents

Requires DHHS to provide time and travel reimbursements for foster parents who transport foster children to parentchild visitation, requires DHHS to provide written notification of right to request reimbursements to foster parents, and requires reimbursement within 60 days.

#### Sec. 564. Parent-Child and Parent-Caseworker Visitations

Requires DHHS to develop policy for parent-child visitations; requires local offices to meet an 85% success rate, after accounting for factors outside of the caseworker's control; requires caseworkers to achieve a success rate of 85% for parent-caseworker visitations, after accounting for factors outside of the caseworker's control; requires report.

#### Sec. 567. Medical Passports

Requires detailed report on completion of medical passports for children in foster care.

### Sec. 569. Private Agency Adoption Completion Payment Rate

Requires DHHS reimburse private child placing agencies that complete adoptions at the rate according to the date in 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.

#### Sec. 573. Foster Care Providers Per Diem Administrative Rates

Requires DHHS, if funds become available, to pay providers of foster care services a per diem administrative rate for every case on a caseworker's caseload for the duration of a case; requires actuarial study to review case rates every even-numbered year; requires DHHS to request settlement monitor to redefine caseload ratios.

### Sec. 574. Contracts to License Relative Caregivers

Allocates \$2.0 million to private child placing agencies to facilitate licensure of relative caregivers as foster parents and allows private agencies to retain supervision of all the newly licensed cases; provides \$375,000 for family incentive grants to help with home improvements needed by foster families; requires report.

### Sec. 583. Foster Parents Report

Requires report on number of foster parents that dropped out and number of foster parents successfully retained.

# Sec. 585. Private Agency Staff Training

Requires DHHS provide at least 1 pre-service training class each month for new caseworkers of private agencies.

#### Sec. 588. Reports from Children's Rights Settlement Monitor

Requires transmission of all reports from court-appointed settlement agreement monitor to the Legislature when publicly released; requires DHHS to submit a detailed plan that will terminate and dismiss the settlement agreement by September 30 of current fiscal year.

#### Sec. 589. Payment of Foster Care Administrative Rate

Requires DHHS to pay 100% of the administrative rate for all new cases referred to foster care services providers; requires quarterly report on the monthly number of cases supervised by private agencies and by DHHS.

### Sec. 594. Foster Care Parent Retention and Michigan Youth Opportunities Initiative (MYOI) Funding

Requires DHHS to support regional resource teams to recruit, retain, and train foster and adoptive parents; funding shall also be used to expand the MYOI to all Michigan counties.

### Sec. 595. CPS Staff and DHHS/Private Agency Caseload Ratio

Requires DHHS to expend \$162.8 million to hire/employ CPS staff to comply with the Office of the Auditor General 2018 CPS audit; requires that most new foster care cases be placed under a private child placing agency's supervision until the statewide ratio of foster cases is 55% for private agency supervision and 45% for DHHS supervision. (Governor's signing letter states section is unenforceable).

### Sec. 596. Runaway and Homeless Youth Services - PARTIALLY VETOED

Requires DHHS to maintain recent \$500,000 funding increase to support current programs that provide emergency shelter and services to homeless and runaway youth; required \$800,000 additional funding be allocated to runaway and homeless youth services programs; requires report. (Veto eliminated requirement of \$800,000 increase.)

### Sec. 598. Child Care Fund (CCF) County Partial Reimbursements Requirement

Requires DHHS to make partial CCF reimbursements to counties for undisputed charges within 45 business days after receipt of required forms and documentation.

### **PUBLIC ASSISTANCE**

# Sec. 601. Shelter Vendor Payments

Allows termination of shelter vendor payments when the housing unit does not meet applicable local housing codes.

#### Sec. 602. Multiple Disability Applications

Requires DHHS 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.

#### Sec. 603. Public Assistance Benefits Notification

Requires the department to provide timely notification to public assistance program beneficiaries if there will be a decrease in their benefits.

#### Sec. 604. State Disability Assistance (SDA) Program

Establishes requirements for the SDA program.

#### Sec. 605. SDA Reimbursement

Requires payments for SDA recipients in adult foster care facilities to be the same as Supplemental Security Income rate for personal care.

#### Sec. 606. Repayment Agreements for Retroactive Supplemental Security Income (SSI) Payments

Requires Family Independence Program (FIP) and SDA recipients who apply for SSI to sign agreements to repay DHHS for any FIP or SDA assistance paid in lieu of SSI upon the receipt of any retroactive SSI payments.

#### Sec. 607. Public Assistance Recovery and Recoupment Revenue

Allows DHHS to satisfy public assistance recoveries and recoupment revenue deducts with collections pertaining to assistance provided in prior fiscal years; allows DHHS to allocate SSI recoveries in any line item in which the fund source is appropriated.

### Sec. 608. Adult Foster Care and Homes for the Aged Payment Limits

Prohibits adult foster care facilities and homes for the aged from requiring payments by SSI recipients above legislatively-authorized rates; allows facilities and homes to receive certain third-party payments in addition to SSI.

#### Sec. 609. SSI State Supplementation

Prohibits reduction of SSI State Supplementation for recipients in institutional settings during the fiscal year; requires 30-day notice to the Legislature for any proposed reduction to the State Supplementation level.

### Sec. 610. State Emergency Relief (SER)

Requires consideration of expenses for finding employment as good cause for persons applying for SER assistance; establishes housing affordability standard under SER of 75% of total net income; prohibits SER payments to individuals found guilty of fraud, out-of-state residents, and illegal immigrants; requires SER rent assistance be paid directly to the landlord.

### Sec. 611. State Supplementation Rate Restriction

Prohibits State Supplementation levels for living independently or living in the household of another from exceeding the minimum level required under federal law or regulations.

### Sec. 613. Indigent Burial

Provides reimbursements for final disposition of indigent persons; establishes maximum allowable reimbursements; accounts for religious preferences that prohibits cremation.

### Sec. 614. SDA Recipients Eligible for SSI Benefits Report

Requires report on number of SDA recipients determined eligible for federal SSI benefits in previous year.

# Sec. 615. Illegal Alien Public Assistance Prohibition

Prohibits providing public assistance to illegal aliens except as required by federal regulations or for emergency food and shelter services.

### Sec. 616. Electronic Benefit Transfer (EBT) Fees

Prohibits retailers participating in EBT program from charging more than \$2.50 in fees for cash back.

#### Sec. 618. Parole/Probation Absconder Report

Requires a quarterly report on public assistance recipients who are parole and/or probation absconders.

#### Sec. 619. Title IV-A (TANF) and Food Assistance Benefit Exemption

Exempts individuals convicted of a single drug felony after August 22, 1996 from the federal prohibition on receiving TANF and food assistance benefits; requires FIP benefits to be paid in restricted payments, or through a protective payee if possible, if the individual is the head of household; prohibits individuals convicted of 2 or more separate drug felonies from receiving assistance, subject to federal approval of this additional condition; and requires that FIP benefits be paid to the grantee if the grantee was not the individual with the conviction.

### Sec. 620. Medicaid Eligibility Determination Standards of Promptness

Requires DHHS to determine Medicaid eligibility within 90 days when disability is an eligibility factor and 45 days for other Medicaid applicants, including patients in nursing homes; requires quarterly reports on Medicaid standards of promptness.

### Sec. 625. Legal Services Association of Michigan - VETOED

Directs DHHS to allocate \$175,000 for a grant to Legal Services Association of Michigan (LSAM) to provide assistance to individuals who have applied or wish to apply for federal disability benefits; requires quarterly reports; and requires the department to distribute LSAM informational materials to referred clients.

#### Sec. 645. Domestic Violence Homeless Criteria for State Emergency Relief

Allows individuals living with others to escape domestic violence to be defined as homeless for purpose of SER.

### Sec. 653. Domestic Violence Exemption to Food Assistance Requirements

Exempts an individual who is the victim of domestic violence for up to an additional three months from the three-month in 36-month limit on receiving food assistance.

### Sec. 654. Food Assistance Program (FAP) Double Up Food Bucks Program

Requires DHHS to notify FAP recipients that their benefits can be spent at many farmers' markets and that the Double Up Food Bucks program can provide them with an additional \$20 to buy produce at participating farmers' markets.

### Sec. 655. Low Income Home Energy Assistance Program (LIHEAP) Spending Plan

Requires DHHS to provide LIHEAP spending plan to the Legislature, including itemized projected expenditures.

#### Sec. 660. Food Bank Council TANF Eligibility Reporting

Requires the Food Bank Council to report data elements needed to establish TANF eligibility.

#### Sec. 669. Annual FIP Clothing Allowance

Allocates \$7.2 million for children's annual clothing allowance for eligible children in a FIP program group.

#### Sec. 672. Electronic Benefit Transfer Card Abuse Report

Requires DHHS to report on efforts to reduce inappropriate use of Bridge Cards by program recipients and retailers.

#### Sec. 677. Family Independence Program (FIP) Goals

Establishes state goal of having 50% of FIP cases involved in employment activities; requires quarterly reports on job readiness and employment program participation and outcomes.

#### Sec. 686. Caseworker Public Assistance Policies

Requires DHHS to ensure that individuals presenting out-of-state identification are not enrolled in benefit programs in other states; requires caseworkers to confirm resident addresses in FIP and SDA cases; prohibits individuals with homes worth more than \$200,000 from receiving assistance; requires caseworkers to collect up-to-date phone numbers from Medicaid recipients during eligibility determination.

#### Sec. 687. Application and Case Closure Information

Requires DHHS to publish application and case closure information quarterly by program and by county.

### Sec. 688. Heat and Eat Program

Requires DHHS to allocate funding for the Heat and Eat program, which provides energy assistance payments of \$20.01 to certain Food Assistance Program (FAP) recipients making them potentially eligible for additional FAP benefits.

#### CHILDREN'S SERVICES AGENCY - JUVENILE JUSTICE

### Sec. 701. Residential Facility Contracts

Unless required from changes to federal or state law or at the request of a provider, prohibits signed contracts with private residential facilities to be altered without written consent from a representative of the private residential facility.

#### Sec. 706. Alternative Regional Detention Services County Charge-Back

Requires a county charge-back for 50% of costs of alternative regional detention services in certain circumstances.

### Sec. 707. Child Care Fund Reimbursement TANF Eligibility Reporting Requirements

Places reporting requirements on counties seeking Child Care Fund reimbursement so DHHS can document TANFeligible expenditures.

#### Sec. 708. County Child Care Fund Spending Plan

Specifies that in order for counties to receive allocations from the Child Care Fund, they must submit a service spending plan for the current fiscal year for DHHS approval by August 15 of the previous fiscal year; approval must be obtained prior to October 15 of the current fiscal year; requires DHHS to notify counties of any plan revisions; requires report on number of plans not submitted by the deadline, number of plans not approved by the deadline, and number of plans not approved as first submitted or after resubmission.

#### Sec. 709. Juvenile Justice Residential Foster Care Services Master Contracts

Specifies that DHHS maser contract for juvenile justice residential foster care services shall prohibit providers from denying placement of youth under certain circumstances.

#### FIELD OPERATIONS AND SUPPORT SERVICES

#### Sec. 807. Michigan MiCAFE Contract

Allocates \$350,000 to Elder Law of Michigan MiCAFE (Michigan Coordinated Access to Food for the Elderly) to assist elderly citizens who may be eligible for food assistance, through outreach, eligibility screening, information, and a statewide food assistance hotline.

### Sec. 808. Nutrition Education Program Report

Requires report on Supplemental Nutrition Assistance Program education funding, including a list of all implementing agencies, planned and actual expenditures, grant amounts to each program, the stated purpose of each program, and quantitative program performance data.

#### Sec. 809. Pathways to Potential Program

States the purposes of the Pathways to Potential Program, including reducing chronic absenteeism and repeat grades; requires the department and participant schools to establish performance objects – based upon a 2-year baseline – before resources are deployed to participant schools; requires the department to report on participant schools and funding allocations by March 1; and details the Legislature's intent for the department and participating schools to examine any lack of progress and consider any lack of progress in future funding allocations. Subsection (2) defines performance baseline.

#### Sec. 825. Vehicle Repairs

Limits car repair allocations to not more than \$500 per year per individual, but allows DHHS to approve exceptions up to \$900 per year.

#### Sec. 850. Out-Stationed Eligibility Specialists

Requires DHHS to maintain out-stationed eligibility specialists in community-based organizations, community mental health agencies, nursing homes, certain independent living settings, federally qualified health centers, and hospitals unless the location requests the program discontinued; requires performance metrics; requires DHHS to only fill additional positions after a new contract has been signed and requires position to be abolished when contract expires or is terminated; requires report.

### Sec. 851. Adult Services Field Staff Ratios

Requires the department to reduce the number of older adults who are victims of crime or fraud; establishes criteria for the service standard of promptness; and requires a March 1 report providing data, by county, on older adults who were victims of crime or fraud and department services provided to those clients.

### **DISABILITY DETERMINATION SERVICES**

### Sec. 890. Unit Rates for Medical Consultants

Requires the department to maintain unit rates in effect on September 30, 2019 for medical consultants performing disability determination services.

#### BEHAVIORAL HEALTH SERVICES ADMINISTRATION AND SPECIAL PROJECTS

### Sec. 901. Comprehensive System of Community Mental Health Services

Provides that appropriated funds are to support a comprehensive system of community mental health services under the full authority and responsibility of local CMHSPs or PIHPs in accordance with the Mental Health Code, Medicaid Provider Manual, federal Medicaid waivers, and all other applicable federal and state laws.

#### Sec. 902. Contracts Between DHHS and CMHSPs/PIHPs

Requires final authorizations to CMHSPs or PIHPs be made upon the execution of contracts between DHHS and CMHSPs or PIHPs; requires DHHS to report if there are new contracts or amendments to contracts with CMHSPs or PIHPs that would affect rates or expenditures.

### Sec. 904. CMHSPs, PIHPs, and Designated Regional Entities for Substance Use Disorders Report

Requires DHHS to provide a report containing a variety of demographic, expenditure, financial, and performance information (including information on administrative expenses) for CMHSPs, PIHPs, designated regional entities designated for substance use disorders; specifies that data reporting requirements be included in the annual contract with each of those entities; requires DHHS to take all reasonable steps to ensure that data are complete and consistent among the entities.

### Sec. 905. Psychiatric Residential Treatment Facility and Children's Transition Support Team

Requires DHHS to maintain a psychiatric transitional unit and children's transition support team; specifies outcomes and performance measures for the initiative.

### Sec. 907. Community Substance Use Disorder Prevention, Education, and Treatment

Requires that appropriations for community substance use disorder prevention, education, and treatment be expended to coordinate care and services provided to individuals with severe and persistent mental illness and substance use disorder diagnoses; requires DHHS to approve the managing entity fee schedules for providing substance use disorder services and charge participants in accordance with their ability to pay; requires the managing entity to 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.

#### Sec. 909. Medical Marihuana Regulatory Fund

States that available medical marihuana regulatory funds be used to improve health, expand access, and strengthen existing systems.

#### Sec. 910. Substance Use Disorder Treatment for Public Assistance Recipients

Requires DHHS to ensure that substance use disorder treatment is provided to applicants and recipients of public assistance who are required to obtain substance use disorder treatment as a condition of eligibility.

#### Sec. 911. Jail Diversion Services for Persons with Mental Illness or Developmental Disability

Requires DHHS to ensure that each contract with a CMHSP or PIHP requires the CMHSP or PIHP to implement programs to encourage diversions for individuals with serious mental illness, serious emotional disturbance, or developmental disability from possible jail incarceration; requires each CMHSP or PIHP to have jail diversion services and work toward establishing relationships with local law enforcement agencies.

#### Sec. 912. Salvation Army Harbor Light Program

Requires DHHS to contract with the Salvation Army Harbor Light Program for providing non-Medicaid substance use disorder services, if program meets standard of care.

### Sec. 915. Mental Health and Wellness Commission Report

Requires report on expenditures, programs, outcomes, and allocations that support the Mental Health and Wellness Commission recommendations.

#### Sec. 918. Medicaid Mental Health Payments and Cases Report

Requires DHHS to report monthly on the amount of funding paid to PIHPs to support the Medicaid mental health program including total paid to each PIHP, per capita rate paid for each eligibility group for each PIHP, number of cases in each eligibility group, and year-to-date summary of eligibles and expenditures.

#### Sec. 920. Rate-Setting Process for PIHPs

Requires the Medicaid rate-setting process for PIHPs include any state and federal wage and compensation increases; states legislative intent that any Medicaid rate increase related to a state minimum wage increase be also distributed to direct care employees.

#### Sec. 924. Autism Services Fee Schedule

Requires DHHS to maintain a fee schedule for autism services by not allowing expenditures used for actuarially sound rate certification to exceed the identified fee schedule, also sets behavioral technician fee schedule at not more than \$55.00 per hour.

#### Sec. 926. Conference of Western Wayne and Kent County Substance Use Disorder Pilots - VETOED

Provides \$500,000 GF/GP to Conference of Western Wayne for a 10-bed substance use disorder detoxification pilot project at St. Mary's that utilizes specialized trauma therapists, peer support specialists, and medication assisted treatments; \$500,000 GF/GP in Kent County for a 3-bed pilot, and requires a report. (*The Conference of Western Wayne pilot was restored as Section 455 in 2019 PA 154.*)

#### Sec. 927. Behavior Health Service Provider Audits

Requires DHHS to determine the steps necessary to allow behavioral health service providers that operate in multiple counties to utilize a single audit rather than multiple audits, requires report.

#### Sec. 928. Local Funds for Capitation Rates Increase for PIHPs

Requires PIHPs to provide local funds from internal resources that can be used as a source for the state match required under the Medicaid program in order to increase capitation rates for PIHPs; states legislative intent that any lapses from Medicaid mental health services be redistributed to CMHSPs as a reimbursement for these local funds; state legislative intent to phase out local funding over a 5-year period, does not require PIHPs to provide local funds at an amount greater then what local units of government provided to the PIHPs.

### Sec. 935. County Matching Funds to CMHSP

Directs counties required under provisions of the Mental Health Code to provide matching funds to CMHSPs for mental health services rendered to residents in its jurisdiction to pay these funds in equal installments on a guarterly basis.

### Sec. 940. Transferring and Withdrawing CMHSP Allocations

Requires DHHS to review CMHSP expenditures to identify projected lapses and surpluses, to encourage the board of the CMHSP with a projected lapse to concur with the recommendation to reallocate the lapse to other CMHSPs, and to withdraw funds from a CMHSP if those funds were not expended in a manner approved by DHHS, including for services and programs provided to individuals residing outside of the CMHSP's geographic region; prohibits a CMHSP from receiving additional funding if the CMHSP transferred out or withdrew funds during current fiscal year; requires CMHSPs to report any proposed reallocations prior to going into effect; requires legislative notification and report.

### Sec. 942. CMHSP Notice of Reduction, Termination, or Suspension of CMHSP Provided Services

Requires a CMHSP to provide at least 30 days' notice before reducing, terminating, or suspending services to CMHSP clients, with the exception of services that no longer meet established criteria for medical necessity.

#### Sec. 950. Court-Appointed Guardians

Provides \$2.7 million GF/GP to directly reimburse court-appointed public guardians at \$50 per month to individuals who receive CMHSP services, and requires a report. (Administrative Board transferred out all but \$1,100 for the program.)

#### Sec. 959. Autism Services Provision and Cost Workgroup

Requires DHHS to continue a workgroup to make recommendations to ensure appropriate cost and service provision of Medicaid autism services; requires a report on the workgroup's recommendations.

#### Sec. 960. Autism Services Cost Containment

Requires DHHS to continue to cover all autism services that were covered on January 1, 2019; to restrain costs required DHHS to develop written guidance for standardization; and permits DHHS to require 6-month consultation if costs are above a monthly threshold, limits practitioners who can perform a diagnostic evaluation; provide fidelity reviews and secondary approvals, and prohibit specific providers from providing both evaluation and treatment; requires a report.

#### Sec. 961. Psychiatric Bed Registry

Includes \$150,000 to administer an electronic inpatient psychiatric bed registry consistent with Section 151 of the Mental Health Code, MCL 330.1151.

### Sec. 962. Providers of Services to High-Need Children or Adults

Allows DHHS to contract directly with providers of services involving high-need children or adults, including the not guilty by reason of insanity population.

#### Sec. 963. Kevin's Law

Allocates up to \$1.0 million to address implementation of court-ordered assisted outpatient treatment under the Mental Health Code (Kevin's Law).

#### Sec. 964. Behavioral Health Fee Schedule

Requires DHHS to develop and implement a standardized fee schedule for Medicaid behavioral health services by January 1, and to develop and implement adequacy standards for all contracts with PIHPs and CMHSPs.

#### Sec. 965. Medication Assisted Treatment

Requires DHHS to explore requiring CMHSPs to reimburse medication assisted treatment at not less than \$12.00 per dose and drug screen collection at not less than \$12.00 per screen.

#### Sec. 970. Skill Building Assistance Services

Requires DHHS to maintain skill building assistance services policies in effect on October 1, 2018, and requires DHHS to continue to seek federal matching funds for skill building assistance services.

### Sec. 972. Michigan CARES Hotline - VETOED

Allocates \$2.0 million for the development, operation, and maintenance of a hotline consistent with section 165 of the Mental Health Code, MCL 330.1165.

### Sec. 973. Medication Assisted Treatment Protocol Report

Requires DHHS to report on protocols for initiation and withdrawal or detoxification from all treatments for substance use disorders.

#### Sec. 974. Intellectual or Developmental Disability Service Delivery

Allows an individual with an intellectual or developmental disability who receives supports and services from a CMHSP to choose to instead receive supports and services from another provider.

### Sec. 977. Recovery High School Grant - VETOED

Allocates \$600,000 in grants to recovery high schools specifically designated for students recovering from a substance use disorder, and prohibits grants from exceeding \$150,000 per high school. (*Grants were restored as Section 453 in 2019 PA 154.*)

#### Sec. 978. Recovery Community Organization – VETOED

Allocates \$600,000 in grants to recovery community organizations to offer or expand recovery support center services or recovery community center services to individuals seeking long-term recovery from substance use disorders, and prohibits grants from exceeding \$150,000 per recovery community organization. (*Grants were restored as Section 454 in 2019 PA 154.*)

### Sec. 979. Adult Psychiatric Residential Treatment Facilities

Requires DHHS to review the feasibility of utilizing Medicaid funding for services provided at adult psychiatric residential treatment facilities, and requires a report.

### Sec. 994. National Accreditation Review Criteria for Behavioral Health Services

Requires DHHS to seek, if necessary, a federal waiver to allow a CMHSP, PIHP, or subcontracting provider agency that is reviewed and accredited by a national accrediting entity for behavioral health care services to be in compliance with state program review and audit requirements; requires a report that lists each CMHSP, PIHP, and subcontracting provider agency that is considered in compliance with state requirements; requires DHHS to continue to comply with state and federal law not initiate an action by negatively impacts beneficiary safety; defines "national accrediting entity."

#### Sec. 995. Mental Health Diversion Council

Specifies that \$4.35 million is intended to address Mental Health Diversion Council recommendations.

#### Sec. 996. Family Support Subsidy

Directs DHHS to increase Family Support Subsidy payments to \$229.31 per month.

#### Sec. 997. Distribution of Substance Use Disorder Block Grant Funds

Requires population data from the most recent federal census be used in determining the distribution of substance use disorder block grant funds.

#### Sec. 998. Distribution of General Funds to CMHSPs

Requires that, if DHHS decides to use census data for distribution of state general funds to CMHSPs, DHHS use the most recent federal census data available.

#### Sec. 999. PIHP Reimbursement Audit Report

Requires DHHS to provide the legislature with the statewide PIHP reimbursement audit report 30 days after completion.

#### **BEHAVIORAL HEALTH SERVICES**

### Sec. 1001. CMHSP Populations Served Report

Requires report on the populations served broken down by eligibility category by CMHSP.

#### Sec. 1003. Policies and Procedures for PIHPs or CMHSPs

Requires DHHS to notify the Community Mental Health Association of Michigan when developing policies and procedures that will impact PIHPs or CMHSPs.

### Sec. 1004. CMHSP and PIHP Rebasing Notification

Requires DHHS to notify the legislature 90 days before DHHS implements any rebased formula changes to either Medicaid behavioral health or non-Medicaid mental health.

# Sec. 1008. PIHP and CMHSP Administrative Costs, Mental Health Care, Service Rates, and Direct Care Reimbursement

Requires PIHPs and CMHSPs to work to reduce administrative costs, take an active role in managing mental health care, ensure that direct care rate variances are related to the level of need or other quantifiable measures, and whenever possible promote fair and adequate direct care reimbursement.

#### Sec. 1009. Direct Care Wage Increase

Requires DHHS to maintain the hourly increase for direct care workers from the previous fiscal year and requires these funds be utilized for paying direct care workers' wages and includes reporting requirements.

### Sec. 1010. Behavioral Health Community Supports and Services

Requires the funds appropriated for behavioral health community supports and services be used to expand assertive community treatment (ACT), forensic assertive community treatment, and supportive housing for the purpose of reducing waiting lists at state psychiatric hospitals.

#### STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL HEALTH SERVICES

### Sec. 1051. Third-Party Payments and Revenue Recapture Project

Requires DHHS to continue a revenue recapture project to generate additional third party revenue from cases that are closed or inactive.

### Sec. 1052. Gifts and Bequests

Specifies that gifts and bequests are to provide specific enhancements for individuals residing at state-operated facilities consistent with the stipulation of the donor.

### Sec. 1053. Behavioral Health Facility Contingency Fund

Limits expenditures from the behavioral health facility contingency line item until the funds are transferred to another line item. (Governor's signing letter states section is unenforceable.)

### Sec. 1055. Closures or Consolidations of State Hospitals and Centers

Prohibits DHHS from implementing any closures or consolidations of state hospitals, centers, and agencies until CMHSPs or PIHPs have programs and services in place for those individuals currently in the facilities; provides that 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; requires DHHS to provide a closure plan four months after certification of the closure; requires the transfer of remaining operational funds from closed state hospitals, centers, and agencies to CMHSPs or PIHPs responsible for providing services to individuals previously served by the state-run operations.

#### Sec. 1056. Patient Reimbursement

Allows DHHS to 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; authorizes DHHS to adjust financing sources for patient reimbursement based on actual revenue earned; and allows the carryforward of revenue collected that exceeds current-year expenditures if approved by the State Budget Director.

#### Sec. 1057. Kalamazoo Hospital Staffing Increase

Appropriates \$1.0 million to hire additional staff at the Kalamazoo Psychiatric hospital.

#### Sec. 1058. Privatization of Food and Custodial Services

Allows DHHS to maintain a bid process to identify one or more private contractors to provide food and custodial services for the administrative areas at any state hospital identified by DHHS as capable of generating savings through the outsourcing of those services.

#### Sec. 1059. State Psychiatric Hospital and Center for Forensic Psychiatry Performance Report

Establishes outcomes and performance measures for the Center for Forensic Psychiatry and state psychiatric hospitals, and requires a report.

#### Sec. 1060. State Psychiatric Hospital Staffing Workgroup

Requires DHHS to continue to convene a workgroup to address mandatory overtime, staff turnover, and staff retention at the state psychiatric hospitals; requires report.

### Sec. 1061. Caro Regional Mental Health Center

Requires DHHS to only use the funds appropriated for the Caro Regional Mental Health Center to support a psychiatric hospital at its current location, includes legislative intent that the Caro Regional Mental Health Center remain open and operational at its current location and that any capital outlay funding be used for planning and construction of a new or updated facility at the current location instead of a new location.

### **HEALTH AND HUMAN SERVICE POLICY AND INITIATIVES**

#### Sec. 1140. Free Health Clinic Funding

Allocates \$400,000 to free health clinics from the funds appropriated for primary care services. Requires DHHS to distribute funds equally to each free health clinic. Defines free health clinic as a nonprofit organization that uses volunteer health professionals to provide care to uninsured individuals.

### Sec. 1141. Michigan Essential Health Provider Program Allocation

Requires that \$1.0 million of GF/GP funds be allocated for use by the program in eligible designated health provider shortage areas that have a population of 40,000 persons or less.

### Sec. 1142. Options for Incentivizing Primary Care Medical School Students to Stay in Michigan

Requires DHHS to seek to increase retention of Michigan medical school students for completion of their primary care residency requirements in Michigan and to practice in Michigan, and to work with Michigan universities on this goal.

#### Sec. 1143. Island Primary Care Allocations - VETOED

Allocates \$675,000 for island primary health care access and services including island health care clinics to Beaver Island, Mackinac Island, Drummond Island, and Bois Blanc Island. (*This section was restored as Section 456 in 2019 PA 154.*)

### Sec. 1144. Federal Grant for Blueprint for Health Innovation

Provides guidance for allocation of funds appropriated from the federal state innovation model grant; establishes outcomes and performance measures; requires semiannual reports; establishes criteria and standards for aggregated claims data systems created with funds from the grant, and names Michigan Data Collaborative as data aggregator.

#### Sec. 1145. Payments to Indian or Tribal Facilities for Medical Services

Directs DHHS to take steps necessary to work with Indian Health Service, tribal health program facilities or Urban Indian Health Program facilities to ensure that health care facilities receive the maximum amount allowable under federal law for Medicaid services.

### Sec. 1150. Opioid Fraud Collaboration

Requires DHHS to coordinate with other state departments, law enforcement, and Medicaid health plans to reduce fraud related to opioid prescribing within Medicaid, and to address other prescription drug and opioid abuse issues; requires a report by October 1.

#### Sec. 1151. Opioid Addiction Treatment Education Collaboration

Requires DHHS to coordinate with other state departments, law enforcement, and Medicaid health plans to work with substance use disorder providers to inform Medicaid beneficiaries of medically appropriate opioid addiction treatment options when an opioid prescription is completed, and to address other prescription drug and opioid abuse issues; requires a report by October 1.

#### Sec. 1152. Vocational Rehabilitation Funding Maximization

Requires Michigan Rehabilitation Services (MRS) to work with Bureau of Services for Blind Persons, service organizations, and government entities to identify match dollars to maximize use of available federal vocational rehabilitation funds.

### Sec. 1153. Michigan Rehabilitation Services Report

Requires annual status and outcome report on efforts taken to remedy and improve the MRS.

### Sec. 1154. Michigan Rehabilitation Services Funding for Disabled Agricultural Workers

Allocates \$50,000 from MRS appropriation line item along with federal matching funds for vocational rehabilitation services to disabled agricultural workers; requires report.

### Sec. 1155. Michigan Rehabilitation Services Order of Selection and Local Collaboration

States legislative intent that MRS not implement an order of selection for vocational and rehabilitative services; requires legislative notification if program is at risk of implementing an order of selection. States legislative intent that DHHS coordinate with MRS, Michigan Works!, local technology and trade schools, local community mental health, and other local entities to fully utilize available MRS program space regardless of eligibility criteria.

### Sec. 1156. Job Development and Community Employment-Related Contracts

Allocates \$6.1 million of MRS funding for service authorizations with accredited, community-based rehabilitation organizations for job development and employment-related services.

### Sec. 1158. Centers for Independent Living

Requires that all funds appropriated within the Independent Living appropriation line item be used to support Centers for Independent Living in underserved areas and to build capacity; requires report.

### **EPIDEMIOLOGY AND POPULATION HEALTH**

### Sec. 1180. Public Health Drinking Water and Childhood Lead Initiatives

Requires DHHS to maintain a public health drinking water unit to investigate potential health hazards for drinking water supplies where contaminant or chemical limits have been exceeded, and requires DHHS to maintain enhanced efforts by the childhood lead program to improve timeliness and quality of care provided to children with lead exposure.

### Sec. 1181. Vapor Intrusion Response

Requires DHHS to maintain a vapor intrusion response unit to assess risks to public health and respond to vapor intrusion events, including goals of reducing exposures to toxic substances through vapor intrusion and improving health outcomes for exposed individuals.

#### Sec. 1182. Lead Abatement

Provides that no less than \$4.6 million GF/GP and \$20.9 million of federal funds from the healthy homes program appropriation shall be allocated for lead abatement of homes; requires a report by January 1.

### **LOCAL HEALTH AND ADMINISTRATIVE SERVICES**

### Sec. 1220. Reimbursement of Local Costs Related to Informed Consent Law

Directs DHHS to reimburse local health departments for costs incurred for informational services provided in accordance with the Informed Consent Law to a woman seeking an abortion.

### Sec. 1221. Penalty for Dissolution of Multi-County Local Health Department

Provides authority for DHHS to assess a penalty on a county of up to 6.25% of the county health department's essential local public health services funding if that county ceases to be part of a district health department or multi-county local health department.

#### Sec. 1222. Essential Local Public Health Services

Directs that essential local public health services line item funds be prospectively allocated to local public health departments for nine state and local cost-shared services; certain services provided in consultation with Department of Agriculture and Rural Development and Department of Environment, Great Lakes, and Energy; local public health departments are held to contractual standards and local spending minimums; requires a report by December 1.

#### Sec. 1225. Michigan Health Endowment Fund

Requires DHHS to work with the Michigan Health Endowment Fund Corporation to explore ways to fund and evaluate current and future policies and programs.

#### Sec. 1226. School Children's Healthy Exercise Program

Allocates \$1.0 million for school children's healthy exercise program for kindergarten through grade 8, incorporating evidence-based best practices. At least 50% of the funds goes to before- and after-school programs. States program goals and requires a 20% match. Directs DHHS to seek third party financial support for program.

#### Sec. 1227. Health and Wellness Initiatives Criteria

Requires DHHS to establish criteria for health and wellness initiatives project allocations, which shall include that programs funded be evidence-based, supported by research, include interventions that lower cost and improve quality, and have statewide impact. Preference is given to programs that match the funding with additional resources.

#### Sec. 1228. Traumatic Brain Injury - VETOED

Allocates \$1.5 million from the Injury Control Intervention Project appropriation line item for implementation of software in the treatment of traumatic brain injury; requires report by March 1.

### Sec. 1231. PFAS Contamination and Other Public Health Threats - Local Health Department Response

Allocates up to \$4.75 million for grants to local public health departments to support response to PFAS contamination or other public health threats such as infectious and vector-borne disease threats, vapor intrusion, drinking water contamination, and lead exposure. Requires report by February 1 on previous year and current year expenditures.

### Sec. 1232. Reimbursement for PFAS Environmental Contamination Response

Expresses intent of the Legislature that the United States Department of Defense shall reimburse the state for costs associated with PFAS and environmental contamination response at military training sites and support facilities.

### Sec. 1233. Expenditure of Funding for PFAS Contamination Response

Prohibits expenditure of GF/GP and state restricted funding sources for PFAS and environmental contamination response when federal or private funding is available for the same purpose.

### Sec. 1234. Essential Local Public Health Services Funding Formula Revision

Requires DHHS to implement on October 1 the revised distribution formula for the allocation of essential local public health services line item appropriations to local health departments, as specified by Section 1234 of Article X of 2018 PA 207, and states that each local health department shall not be allocated less than during the previous fiscal year.

### Sec. 1238. Lead Elimination and Response Workgroup

Requires DHHS to establish a workgroup to determine the cost of establishing lead elimination and response and report to the legislature on the findings of the workgroup by March 1.

### Sec. 1239. MPART Participation

Requires DHHS to participate collaboratively with the Michigan PFAS Action Response Team (MPART) and other departments and to make continuous efforts to ensure that DHHS does not duplicate activities of another department.

### **FAMILY HEALTH SERVICES**

### Sec. 1301. Pregnancy Planning, Prenatal, and Maternal and Child Health Programs Report

Requires DHHS to report by April 1 on funding allocations, breakdown of expenditures by urban and rural, and prior fiscal year service and expenditure data by population groups for the local maternal and child health, prenatal care, family planning, and pregnancy prevention programs. DHHS shall ensure that needs of rural communities are considered in distribution of funds for these programs. Defines "rural" as having a population of 30,000 or less.

#### Sec. 1302. Family Planning Federal Title X Performance and Quality Assurance Compliance

Requires family planning programs receiving federal Title X funds to be in compliance with federal performance and quality assurance indicators; agencies not in compliance shall not receive supplemental or reallocated funds.

#### Sec. 1303. Contract Restrictions for Family Planning Local Agreements with State Funds

Prohibits DHHS from contracting with an organization that provides elective abortions, or abortion counseling or referrals, for services funded with state restricted or GF/GP funds appropriated for family planning local agreements. Prohibits an organization under contract with DHHS from subcontracting with an organization that provides elective abortions or abortion counseling or referrals, for services that are to be funded with state restricted or GF/GP funds appropriated for family planning local agreements.

### Sec. 1304. Prohibit Use of State Funds for Abortion Counseling, Referrals, or Services

Prohibits the use by DHHS or its grantees or subcontractors of state restricted or state general funds appropriated in the Family Planning Local Agreements line item or the Pregnancy Prevention Program line items for abortion counseling, referrals, or services.

### Sec. 1305. Contract Restrictions and Priorities for Family Planning and Pregnancy Prevention

(1) Prohibits DHHS from contracting for family planning and pregnancy prevention services with an entity that engages in abortion activities under PA 360 of 2002, if another entity applies to provide those services that is not already engaged in abortion activities. (2) Requires DHHS to give a higher priority to a) contracting for services in counties where there are currently no contracts for services, before b) contracting for additional services by an entity that engages in abortion activities in a county where there are already services provided by an entity that does not engage in abortion activities. (Governor's signing letter states section is unenforceable.)

#### Sec. 1307. Alternative Pregnancy and Parenting Support Services Program - VETOED

Allocates \$700,000 of TANF revenue for the alternative pregnancy and parenting support services program to provide enhanced counseling and support for pregnant and postpartum women, which promotes childbirth, alternatives to abortion, and grief counseling; and requires a report by April 1.

### Sec. 1308. Enhanced Nurse Family Partnership Program Support

Allocates \$500,000 for evidence-based programs to reduce infant mortality including nurse family partnership programs, for enhanced support and education to nursing and other health professional teams, client recruitment in high need or underserved communities, strategic planning, nurse and provider recruitment, and awareness.

#### Sec. 1309. Maternal and Child Health Contractual Services

Requires DHHS to allocate funds appropriated for family, maternal, and child health services according to section 1 of Public Act 360 of 2002, related to a system of prioritization for awarding contracts for family planning and pregnancy prevention services with consideration for a contractor's provision of abortion services or referrals.

#### Sec. 1310. Family Planning Federal Title X Rule Compliance

Requires that family planning programs receiving federal Title X funds must be in compliance with all federal Title X rules and requires DHHS to monitor for compliance; agencies not in compliance shall not receive supplemental or reallocated funds.

### Sec. 1311. Rural Home Visitation Service Provider Contracting

Allocates not less than \$2.75 million GF/GP for a rural home visit program from the Prenatal Care Outreach and Service Delivery Support appropriation line item. Requires DHHS to give equal consideration to all eligible evidence-based providers in all regions in contracting for rural home visitation program services.

### Sec. 1312. Prenatal Care and Premature Birth Avoidance Grant Allocation

Allocates \$1.0 million as a grant to fulfill DHHS contract obligations with Strong Beginnings, a federal Healthy Start program in Kent County, for the purpose of support to underserved populations for prenatal care and premature birth avoidance.

#### Sec. 1313. Fetal Alcohol Syndrome Services

Requires DHHS to continue to develop an outreach program on fetal alcohol syndrome services targeting objectives in the Michigan Fetal Alcohol Spectrum Disorders 5-year plan, and to explore federal grant funding to address prevention services. Requires report by February 1 on planned spending.

#### Sec. 1314. Promotion of Early and Regular Prenatal Care

Requires DHHS to seek to enhance efforts to encourage prenatal care upon confirmation of pregnancy, and to seek to ensure that DHHS programs, policies and practices promote prenatal and obstetrical care. DHHS is to track birth and maternal outcomes of these efforts.

### Sec. 1315. Volunteer Dental Services Program for the Uninsured

Allocates \$150,000 from dental programs line item to the Michigan Dental Association to administer a volunteer program of dental services to the uninsured; requires a report by December 1 on program services provided in the prior fiscal year.

#### Sec. 1316. Use of Mobile Dentistry Facility Permit Fee Revenue

Directs DHHS to use revenue from mobile dentistry facility permit fees to offset the cost of the permit program.

### Sec. 1317. Outstate Public Health Dental Initiative

Allocates \$1,550,000 GF/GP and match funds from the dental programs line item for dental services for persons enrolled in Medicaid, and low-income uninsured persons, through local health departments partnering with nonprofit dental services provider; states provider requirements; requires DHHS to advance provider reports to the Legislature.

#### Sec. 1319. Oral Health Assessment for Children - VETOED

Allocates \$2.0 million for an oral health assessment program for children entering public school kindergarten who do not have dental insurance; state requirements for awarding contract; DHHS shall not mandate that local health departments provide assessments; and states intent that non-state matching funds be procured to support program.

#### Sec. 1320. Family Planning and Pregnancy Prevention Media Campaign Messaging

States legislative intent that funds that may be expended for a public media campaign regarding publicly funded family planning or pregnancy prevention programs shall not be used to communicate any message that implies or that can be interpreted to mean that abortion is a method of family planning or pregnancy prevention.

#### Sec. 1340. National Brand Food Options as Approved WIC Food Item

Requires the Women, Infants, and Children Special Supplemental Food and Nutrition program (WIC) to include national brand options for all food categories on the list of approved food basket items for WIC participant purchase.

### Sec. 1341. WIC Eligibility Guidance

Requires DHHS to utilize current federal income eligibility and verifications policy and guidelines in determining eligibility of individuals for the special supplemental nutrition program for women, infants, and children (WIC).

### **EMERGENCY MEDICAL SERVICES, TRAUMA AND PREPAREDNESS**

### Sec. 1350. Emergency Medical Services Data Exemption

Prohibits DHHS from requiring a life support agency that does not charge for services to submit data to the Michigan emergency medical services information system or any other quality improvement program. (Governor's signing letter states section is unenforceable).

### CHILDREN'S SPECIAL HEALTH CARE SERVICES

#### Sec. 1360. Children's Special Health Care Services Coverage

Allows DHHS to provide special formula for persons with certain metabolic and allergic disorders, treatment to persons age 21 or older with cystic fibrosis, services to persons age 21 or older with hemophilia, and human growth hormone to eligible patients.

### Sec. 1361. Expansion of Telemedicine Capacity and Chronic Care

Authorizes DHHS to use funds appropriated for medical care and treatment for continued development and expansion of telemedicine capacity to allow CSHCS children better access to specialty providers and to fund chronic complex care management.

#### AGING AND ADULT SERVICES AGENCY

### Sec. 1402. Food Access Collaboration

Permits DHHS to encourage the Food Bank Council of Michigan to collaborate directly with each area agency on aging and other organizations that provide senior nutrition services to secure access to food for vulnerable seniors.

#### Sec. 1403. Home-Delivered Meals Waiting Lists

Requires area agency on aging regions to report home-delivered meals waiting lists by February 1 to the Aging and Adult Services Agency and the Legislature; establishes standard criteria for persons included on the waiting list, including an initial determination of likely eligibility for home-delivered meals services.

#### Sec. 1417. Area Agency on Aging Allocations and Expenditures Report

Requires DHHS to report by March 30 on total allocations of state resources to each area agency on aging by program and administration, and detail of expenditures by each area agency on aging by program and administration including state and local funds.

### Sec. 1421. Allocation of \$1.1 Million for Locally-Determined Needs

Provides that funding of \$1.1 million appropriated for community services be allocated to area agencies on aging for locally-determined needs.

### Sec. 1422. Elder Abuse Prosecuting Attorney Contract

Requires DHHS to allocate \$300,000 for a contract with the Prosecuting Attorneys Association of Michigan to provide support and services to state prosecutors, adult protective service system, and criminal justice system to effectively identify, investigation, and prosecute elder abuse and financial exploitation cases; requires report by March 1.

#### Sec. 1425. Notification from LARA of License Suspension of Care Facility

Requires DHHS to coordinate with Department of Licensing and Regulatory Affairs (LARA) to ensure that LARA notify DHHS and the Legislature upon receipt of an order of suspension of a licensed adult foster care home, home for the aged, or nursing home.

#### MEDICAL SERVICES ADMINISTRATION

#### Sec. 1501. Electronic Health Records Incentive Program Work Project

Establishes unexpended funds for the electronic health records incentive program as a work project appropriation with the tentative completion date to be September 30, 2024.

### Sec. 1502. Nursing Facility Cost Report Policies

Requires DHHS to use prospective effective dates if DHHS issues new policies affecting nursing facility cost reports, and allows a retroactive date if required by state law, federal law, or judicial ruling; and adds "except as otherwise provided under state law". (Governor's signing letter states section is unenforceable.)

#### Sec. 1504. Medicaid Cloud-Based Analytics Platform - VETOED

Allocates \$200,000 GF/GP for a cloud-based analytics platform to identify areas of best practice and cost reductions for behavioral health services and lists performance metrics; requires DHHS to make Medicaid data available, without charge, to the selected vendor.

### Sec. 1505. Office of Inspector General and Third Party Liability Savings Report

Requires report on the actual increases in reimbursement savings and cost offsets resulting from the funds appropriated for the Office of Inspector General and third party liability efforts.

### Sec. 1506. Public Assistance Call Center Report

Requires report on the implementation status of the Healthy Michigan Plan public assistance call center including specified data on call volume and outcomes.

#### Sec. 1507. Office of Inspector General Medicaid Managed Care Audits

Requires the Office of Inspector General to audit and recoup inappropriate or fraudulent payments from Medicaid managed care organizations to providers. Prohibits DHHS from fining, suspending, or disenrolling a Medicaid provider due to the discovery of inappropriate payments, unless authorized by federal or state law.

#### Sec. 1508. Michigan Dental Registry - VETOED

Allocates \$700,000 for the Michigan dental registry in support of the enhanced dental benefit for the Healthy Kids Dental program and dental benefit for pregnant women; requires report on outcomes.

#### Sec. 1509. Healthy Michigan Plan Work Requirement Report

Requires a report on the number of noncompliant recipients, actions undertaken, and number subject to medical assistance work requirements.

### Sec. 1511. Healthy Michigan Plan Workforce Development Program Utilization Report

Requires a report on the utilization and outcomes of Michigan Works! workforce development programs by Healthy Michigan Plan recipients.

#### Sec. 1513. Medicaid Inpatient Psychiatric Hospital Workgroup

Requires DHHS to create a workgroup to determine an equitable and adequate reimbursement methodology for Medicaid inpatient psychiatric hospital care, list participating workgroup members, require a report from the workgroup.

#### Sec. 1515. Job Placement Agency Information Requests

Permits "qualified job placement agencies" to request contact information from DHHS for Healthy Michigan Plan recipients subject to work requirements who have not verified their employment and are at risk of losing Medicaid benefits, defines "qualified job placement agencies".

#### **MEDICAL SERVICES**

#### Sec. 1601. Remedial Services Costs and Medicaid Eligibility

Requires remedial service costs to be used in determining medically needy eligibility for those in adult foster care and homes for the aged.

### Sec. 1605. Medicaid Protected Income Level

Establishes the Medicaid protected income level at 100% of the public assistance standard.

Sec. 1606. Medicaid Eligibility and Patient Pay Amount Deductions for Guardian and Conservator Charges Limits the allowable deduction for guardian and conservator charges to \$83 per month when determining Medicaid eligibility and patient pay amounts.

#### Sec. 1607. Medicaid Presumptive Eligibility for Pregnant Women

Stipulates that Medicaid applicants whose qualifying condition is pregnancy shall be presumed to be eligible unless the preponderance of evidence in the application indicates otherwise; sets procedures to facilitate access to health care for pregnant women; states that providers are entitled to reimbursement for services until such time they are notified an applicant is ineligible; requires DHHS to refer ineligible applicants to the nearest public health clinic; requires DHHS to develop an enrollment process for pregnant women that facilities selection of a managed care plan; mandates enrollment of Medicaid eligible pregnant women into managed care plans; requires DHHS to encourage physicians to provide pregnant women a referral to a Medicaid participating dentist at the first appointment.

#### Sec. 1611. Medicaid Payment Rates

Requires Medicaid payment rates, including payments from other third-party sources, to be accepted as payment in full; provides that combined hospital service payments for persons dually eligible for Medicare and Medicaid, including payments from other third party sources, shall be equal to rates for Medicaid-only patients, including capital payments.

#### Sec. 1620. Pharmacy Dispensing Fee and Prescription Drug Co-payments

Establishes the pharmacy dispensing fees based on the medication's standing on the DHHS preferred drug list; requires prescription co-payments for Medicaid recipients not enrolled in the Healthy Michigan Plan or with an income less than 100% of the federal poverty level of \$1 for generic drugs and \$3 for brand-name drugs; requires prescription co-payments for Healthy Michigan plan enrollees with an income of at least 100% of the federal poverty level of \$4 for generic drugs and \$8 for brand-name drugs.

#### Sec. 1625. Medicaid Managed Care Pharmacy Benefits Managers – VETOED

Prohibits DHHS, beginning February 1, 2020, from entering into any contracts with a Medicaid managed care organization that relies on a pharmacy benefits manager that does not: 1) utilize a pharmacy reimbursement methodology of the National Average Drug Acquisition Cost plus a professional dispensing fee comparable to the Medicaid fee-for-service dispensing fees for pharmacies with not more than 7 retail outlets (and lists reimbursements when an ingredient does not have a National Average Drug Acquisition Cost listed); 2) reimburse for valid claims at the rate in effect at the time of original claim; 3) agree to transparent "pass-through" pricing, 4) agree to not create new fees or increase fees above inflation, and 5) agree to not terminate existing contracts for the sole reason of the additional professional dispensing fee.

### Sec. 1629. Maximum Allowable Cost Drug Pricing

Requires DHHS to base its maximum allowable cost prices for generic drugs on pricing available from at least two wholesalers who deliver in Michigan.

### Sec. 1631. Medical Services Co-payments

Requires co-payments on dental, podiatric, and vision services; requires copayments for Medicaid recipients not enrolled in the Healthy Michigan Plan or with an income less than 100% of the federal poverty level of \$2 for a physician office visit, \$6 for a hospital emergency room visit, \$50 for the first day of an in-patient hospital stay, and \$2 for an outpatient hospital visit; requires co-payments for Healthy Michigan plan enrollees with an income of at least 100% of the federal poverty level of \$4 for a physician office visit, \$8 for a hospital emergency room visit, \$100 for the first day of an in-patient hospital stay, and \$4 for an out-patient hospital visit.

### Sec. 1641. Institutional Provider Costs Reports

Requires institutional providers to submit their cost reports within five months of the end of its fiscal year.

#### Sec. 1645. Nursing Facility Current Asset Value Bed Limit - VETOED

Requires DHHS to establish a class I nursing facility current asset value bed limit based on a rolling 15-year history of new construction; state legislative intent that annual increase not exceed 4%.

#### Sec. 1646. Nursing Facility Quality Measure Initiative Program

Requires DHHS to continue a nursing facility quality measure initiative program financed through the nursing facility QAAP and establishes distribution criteria; requires report on program effectiveness.

#### Sec. 1657. Health Plan Reimbursement for Hospital ER Service, and Medicaid ER Financial Incentives

Requires reimbursement for emergency room (ER) services to screen and stabilize a patient without prior authorization by a health plan; requires prior authorization by the health plan for further services beyond stabilization; specifies that provisions of section do not require alteration to an existing agreement between a health plan and its contracting hospitals.

#### Sec. 1659. Applicable Boilerplate Sections for Medicaid Managed Care

Specifies the boilerplate sections that apply to Medicaid managed care programs.

#### Sec. 1662. Quality Review and Analysis of Health Plan Performance

Requires DHHS to ensure that an external quality review of each health plan is performed resulting in an analysis and evaluation of aggregated information on quality, timeliness, and access to health care services either contracted or directly provided to Medicaid beneficiaries; requires health plans to provide EPSDT utilization data and well child health measures; requires DHHS to submit copies of analysis of health plan HEDIS reports and annual external quality review report within 30 days.

#### Sec. 1670. MIChild Program Eligibility

Specifies that funds appropriated for MIChild program be used to provide health care to children under age 19 in families with income below 212% of federal poverty level who have not had health insurance within past six months; allows DHHS to provide up to one year of continuous eligibility for MIChild program unless family members no longer meet eligibility criteria or family fails to pay the monthly premium; allows DHHS to make payments for MIChild.

#### Sec. 1673. MIChild Premiums

Allows DHHS to establish premiums of \$10 per month for eligible individuals in families with income at or below of 212% of poverty level.

#### Sec. 1677. MIChild Benefits

Specifies the minimum benefits to be covered by the MIChild program based on the Michigan benchmark plan.

### Sec. 1682. Penalty Money

Authorizes DHHS to receive and spend penalty money received as the result of noncompliance with medical services certification regulations; provides for carry forward of unexpended penalty money at end of year.

#### Sec. 1692. Medicaid School-Based Services

Authorizes DHHS to pursue Medicaid reimbursement school-based services; authorizes funds appropriated for school-based services to be used for finance activities within medical services administration, reimbursement of participating school districts, and offset of general funds medical services costs.

### Sec. 1693. Special Medicaid Reimbursement Appropriation Increase

Allows for an increase in special Medicaid reimbursement appropriation if a Medicaid state plan amendment for such payments above the appropriated level is submitted.

### Sec. 1694. Poison Control Services

Requires distribution of \$966,700 GF/GP, and any associated federal match, for poison control services to an academic health care system with high indigent care volume.

### Sec. 1696. Healthy Michigan Plan Applicants

States legislative intent that an applicant for Healthy Michigan Plan that received traditional Medicaid coverage in the previous fiscal year is not eligible for Healthy Michigan Plan if still eligible for traditional Medicaid.

#### Sec. 1697. Healthy Michigan Plan Dental Networks

Requires that Medicaid health plans administering Healthy Michigan Plan maintain a sufficient dental provider network.

### Sec. 1699. Disproportionate Share Hospital (DSH) and Graduate Medical Education (GME) Payments

Authorizes separate payments of \$45.0 million for hospitals serving a disproportionate share of indigent patients and hospitals providing GME training programs; requires distribution to be based on methodology used in FY 2003-04.

### Sec. 1700. Special Hospital Payments Report

Requires DHHS to report on the distribution of special hospital payments during the previous fiscal year by special payment; requires DHHS to report on the projected distribution of special hospital payments for the current fiscal year by special payment.

### Sec. 1702. Private Duty Nursing Rate Increase - VETOED

Requires DHHS to provide a 15% rate increase to private duty nursing services for Medicaid beneficiaries under the age of 21.

#### Sec. 1704. Enhanced Dental Benefit for Pregnant Women

Allocates \$6.0 million to maintain the dental benefit for pregnant women enrolled in the Medicaid program; requires a report on implementation of enhancement; establishes outcomes and performance measures for enhancement.

### Sec. 1730. Literacy Development Assessment Tool

Requires DHHS to maintain enhanced assessment tools in collaboration with the Department of Education that promote literacy development of pregnant women and new mothers in the Maternal Infant Health Program and requires new father to be included, when possible.

### Sec. 1757. Medicaid Applicant's Legal Residence

Requires DHHS to require Medicaid applicants to prove that they are residing legally in the United States and that they are residents of Michigan.

#### Sec. 1763. Actuarial Services Request for Proposal

Requires DHHS to issue a request for proposal for a 3-year contract for actuarial services related to rate setting for traditional Medicaid and Healthy Michigan Plan before the initial expiration of the current contract and to notify the legislature. (*Governor's signing letter states section is unenforceable.*)

#### Sec. 1764. Actuarial Soundness Certification of Medicaid Health Plan Rates

Requires DHHS to annually certify that rates paid to Medicaid health plans and specialty prepaid inpatient health plans are actuarially sound, to notify the legislature upon rate certification and approval, and to ensure that no new or revised state Medicaid policy bulletin that is promulgated materially impacts the certified capitated rates in a negative manner.

### Sec. 1775. Medicaid Managed Care for Dual Eligibles

Requires report on progress in implementing the waiver to implement managed care for dual Medicare/Medicaid eligible (MI Health Link); requires DHHS to ensure existence of an ombudsman program for MI Health Link beneficiaries.

### Sec. 1782. Immunization Media Campaign

Allocates \$740,000 GF/GP plus any federal matching funds to support a statewide media campaign for improving the state's immunization rates.

### Sec. 1790. Pediatric Psychiatric Services Rate Increase - VETOED

Requires DHHS to increase Medicaid reimbursements for pediatric psychiatric services by 15% for the current procedural terminology (CPT) codes for psychiatric diagnostic procedures. (*Rate increase was restored as Section 458 in 2019 PA 154.*)

### Sec. 1791. Neonatal Services Rates - VETOED

Requires DHHS to provide Medicaid reimbursements for neonatal services at 95% of the Medicare rates for the listed current procedural terminology (CPT) codes. (*Rate increase was restored as Section 459 in 2019 PA 154.*)

#### Sec. 1792. Health Plan Pharmaceutical Encounter Data Report

Requires DHHS to evaluate pharmacy encounter data through the first 2 quarters of the fiscal year and to provide a report on the findings.

#### Sec. 1793. Medicaid Overpayment Standard of Promptness

Prohibits DHHS from recovering an overpayment if DHHS notifies the provider more than 180 days after receipt of the overpayment. (Governor's signing letter states section is unenforceable.)

#### Sec. 1800. Distribution of Outpatient DSH Pools

Requires DHHS to maintain a formula for the distribution of pools with the \$85.0 million outpatient disproportionate share hospital (DSH) payment based on quality of care, cost, traditional share hospital factors, and other factors determined by the department.

### Sec. 1801. Primary Care Rates

Requires DHHS to continue the increase in Medicaid rates to primary care service providers and establish policies to limit the rate increase to practitioners that solely practice primary care; requires a report.

#### Sec. 1802. Rural Hospital Payments - VETOED

Directs \$8.0 million in lump sum payments to non-critical access hospitals that qualified for rural hospital access payments in FY 2013-14 at a rate proportional to each hospital's obstetrical care and newborn care volume; \$13.9 million GF/GP and any associated federal match to hospitals providing services to low-income rural residents; provides that no hospital or hospital system may receive more than 10% of the total distribution; requires DHHS to provide each hospital the distribution methodology and data used to determine payment amounts. (*Rural Access Pools were restored as Sections 460 and 461 in 2019 PA 154.*)

#### Sec. 1803. Portable X-Ray and Ultrasound Provider Type

Requires DHHS to establish Medicaid rules to allow for billing and reimbursement for transportation charges related to portable x-ray services and requires policies be effective October 1 of the current fiscal year.

#### Sec. 1804. Identification of Medicaid Beneficiaries Who Are Veterans

Requires DHHS to enter into an interagency agreement with Department of Military and Veterans Affairs to work with the federal government's public assistance reporting information system to identify Medicaid recipients who are veterans and may be eligible for federal veteran's health care benefits, lists specific performance outcomes to be reported to the legislature and revise the wording in the public assistance application from "veteran" to "served in the military". (Governor's signing letter states section is unenforceable.)

#### Sec. 1805. Graduate Medical Education (GME) Quality Data

Requires hospitals receiving GME payments to submit quality data utilizing consensus-based nationally endorsed standards to be posted on a public website, lists specific quality reporting information, requires hospitals to also post quality data on the hospital's website, and requires DHHS to withhold 25% of a hospital's GME payment if data is not submitted by January 1.

#### Sec. 1806. Common Formulary for Medicaid Health Plans Report

Requires Medicaid health plans to report to DHHS on the progress in implementing the common formulary; requires DHHS to develop policies to operate the common formulary to ensure fair and full public participation; requires a report.

#### Sec. 1807. Hospital Outpatient Rate Increase – VETOED

Requires DHHS increase hospital outpatient Medicaid rates by 7% and increase critical access hospital outpatient rates by an additional amount. (*Rate increase for critical access hospitals was restored as Section 457 in 2019 PA 154.*)

### Sec. 1810. Health Plan Encounter Data Reporting

Requires DHHS to enhance encounter data reporting processes and develop rules to improvement completeness and quality of data while minimizing health plan administrative expense and requires DHHS to notify a health plan of any encounter data that have not been accepted for the purposes of rate setting and allow a health plan to dispute and correct any discarded encounter data.

### Sec. 1812. Graduate Medical Education Program Costs

Requires hospitals receiving GME funds to submit a report on direct and indirect costs associated with the residency training program.

### Sec. 1820. Recognition of Medicaid Health Plan Accreditation

Requires DHHS to give consideration to Medicaid health plan accreditation when establishing compliance with state program review criteria or audit requirements; requires DHHS continue to comply with federal and state laws and not initiate any action that negative impacts beneficiary safety; defines term "national accrediting entity".

### Sec. 1837. Telemedicine and Telepsychiatry Use in Underserved Areas

Requires DHHS to continue and expand the use of telemedicine and telepsychiatry as a means to increase access to services for Medicaid recipients and expands definitions of "originating site" and "distant site".

#### Sec. 1846. Graduate Medical Education Priorities

Requires DHHS to distribute GME funds with an emphasis on encouragement of the training of physicians in specialties, including primary care, that are necessary to meet future needs of this state, and training of physicians in settings that include ambulatory sites and rural locations.

#### Sec. 1850. Eligibility Redetermination by Medicaid Health Plans

Permits DHHS to allow health plans to assist in maintaining eligibility of Medicaid recipient's eligibility.

#### Sec. 1851. Adult Home Help Mobile Electronic Visit Verification

Allocates \$150,000 in GF/GP to develop a mobile electronic visit verification program for adult home help.

#### Sec. 1855. Unused PACE Slots

Requires DHHS, if funds are available, to allow PACE programs to increase then number of program slots if the local PACE program provides documentation of its ability to expand capacity, and to allow PACE programs to enroll more than 10 new members per month to address unmet demand.

#### Sec. 1856. Hospice Room and Board Payments

Requires DHHS expend funds to provide room and board payments to hospice residences, that have been enrolled in Medicaid by October 1, 2017, through monthly grants based on the number of beds; requires hospice residences to report program data to DHHS; and requires any remaining funds be returned to the state.

### Sec. 1857. Managed Care Long-Term Support Services

Requires DHHS to explore the implementation of a managed care long-term support service.

### Sec. 1858. Pharmaceutical Carve Out Report

Requires DHHS to report pharmaceutical carve out product treatment costs, number of prescriptions, and number and expenditures for generic equivalents.

#### Sec. 1859. Medicaid Research Activities

Requires DHHS to partner with Medicaid health plans to develop and implement strategies for the use of information technology research activities for the purpose of improving health, increasing quality of care, and reducing cost of care

### Sec. 1860. Healthy Michigan Plan Co-Pay and Premium Report

Requires DHHS report on uncollected co-pays and premiums in the Healthy Michigan Plan.

#### Sec. 1862. Obstetrical Rates

Requires DHHS to maintain obstetrical service payment rates at 95% of Medicare levels effective October 1, 2014.

#### Sec. 1867. Psychotropic Medicine Best Practices Workgroup

Requires DHHS to continue a workgroup to identify best practices and to develop protocols for prescribing psychotropic medications; requires a report.

### Sec. 1870. MIDocs Consortium - VETOED

Appropriates \$3.75 million GF/GP and any restricted and any associated federal match to the MIDocs consortium to create new primary care residency slots in underserved communities, lists qualifying specialties; requires DHHS to seek any necessary federal CMS approvals; requires medical education loan repayments be contingent on 2-year commitment to practice in an underserved community post-residency; requires MIDocs to work with DHHS to, when possible, prioritize training opportunities in state psychiatric hospitals and CMHSPs; reserves at least 3 slots for the Michigan early primary care incentive program; reports report; creates an advisory council; establishes outcome and performance measures; and designates unexpended funds as work project appropriation. (*Program was restored as Section 462 in 2019 PA 154.*)

#### Sec. 1871. Healthy Michigan Plan Healthy Behaviors Incentives

Requires Healthy Michigan Plan healthy behaviors incentive program funding to only be provided to reduce costsharing responsibilities and to not include other financial rewards such as gift cards.

#### Sec. 1872. Personal Care Services Rates

Requires DHHS to maintain the monthly personal care services rate to adult foster care homes and homes for the aged in place during the previous fiscal year.

#### Sec. 1873. Nursing Facility Transition Initiative

Permits DHHS to allocate up to \$3.7 million for outreach and education to nursing home residents of the nursing home transition initiative.

### Sec. 1874. Program of All-Inclusive Care for the Elderly (PACE) Inclusion

Require DHHS to ensure PACE is included as an option, where available, in options counseling and enrollment brokering for aging services.

#### Sec. 1875. Prior Authorization for Certain Drugs

Applies prior authorization prohibition to DHHS and its contractual agents for psychotropic medications, drugs for the treatment of HIV or AIDS, epilepsy/seizure disorder, or drugs for organ transplant therapy, if those drugs were either carved out or not subject to prior authorization procedures as of May 9, 2016, defines "prior authorization".

#### Sec. 1878. Hepatitis C Tracking

Requires DHHS to track and report Hepatitis C treatment costs, number of individuals treated, cure rate, and reinfection rate.

#### Sec. 1888. Contract Performance Standards

Requires DHHS to establish contract performance standards associated with the capitation withhold provisions for Medicaid health plans at least three months in advance of the implementation of those standards and clarifies that the determination of whether performance standards have been met shall be based primarily on recognized concepts such as one-year continuous enrollment and healthcare effectiveness data and information set (HEDIS) data.

### Sec. 1894. Healthy Kids Dental Program Report

Requires DHHS to report on performance and outcome metrics of the Healthy Kids Dental program.

#### **INFORMATION TECHNOLOGY**

### Sec. 1901. Information Technology Expansion and Integrated Service Projects Report

Requires semiannual reports on information technology expansion projects including bid process, project management plan, timelines, and benefits, and on the implementation of the integrated service delivery project, progress toward meeting certain outcomes, and list of approved projects as well as any requirement for approval. Once an expansion project award is made, DHHS shall report on projected costs by use and type of expense for that project.

### Sec. 1902. Michigan Medicaid Information System Project Revenue

Allows for receipt of private revenue from other states participating in agreements for use of the Michigan Medicaid Management Information System; and requires a report by March 1 for the previous fiscal year.

### Sec. 1903. Michigan Statewide Automated Child Welfare Information System (MiSACWIS) Reports

Requires the department to report bi-monthly on the status of implementation plan to modernize MiSACWIS, as well as on the status of planning, implementation, operation, and progress to implement MiSACWIS, including specific information.

#### Sec. 1904. Integrated Services Delivery Enhancement

Requires the department to maintain information technology tools and enhancements to improve eligibility and enrollment process for department-administered programs; establishes outcomes and performance measures for enhancement.

#### Sec. 1905. Information Technology Spending Report

Requires the department to report monthly in all information technology spending as well as any projects expected to exceed allotted appropriations; provide a 5-year information technology strategic plan by April 30; specifies requirements to be included in the information technology strategic plan; and requires an information technology spending comparison with 3 comparable Midwestern states.

### Sec. 1906. Child Welfare Information System Workgroup

Requires the department to report bi-monthly on the recommendations of the MiSACWIS workgroup, including recommendations for future operations of MiSACWIS and any recommended replacement child welfare information system.

#### Sec. 1907. Information Technology Contract Report

Requires the department to report on all information technology projects, related costs, total contractual costs, previous fiscal year spending, and projected spending by October 1 and March 1.

#### Sec. 1908. Public Health and Safety Prioritization

Declares the intent of the Legislature that the department prioritize information technology services and projects directly dedicated to protecting public health and safety.

# Sec. 1909. Information Technology Spending Restrictions

Restricts the department from expending funds appropriated for major information technology programs on any other program or project, and requires a legislative transfer of appropriations from the Information Technology Contingency and One-Time Information Technology Contingency line items to another line item before those funds may be expended. (*Governor's signing letter states subsections (1), (2), and (9) are unenforceable.*)

#### **ONE-TIME APPROPRIATIONS**

#### Sec. 1910. Drinking Water Declaration of Emergency

Allocates \$4.6 million to address needs in the City of Flint under which a declaration of emergency was issued related to drinking water contamination, for food and nutrition services, education, nursing and case management, behavioral health and lead exposure care, access to care for children, breastfeeding education and prenatal home visits, epidemiological analysis, lead poisoning surveillance and abatement, Double Up Food Bucks program, water testing at food service establishments, transportation for health care delivery, senior initiatives, lead workforce development, and allocations to Revive Community Health Center and Rides to Wellness.

#### Sec. 1911. Child and Adolescent Health Centers - VETOED

Allocates \$1.0 million for expansion of school-based child and adolescent health centers in underserved areas, for behavioral and physical health care services.

#### Sec. 1912. Mobile Crisis Resolution Services – VETOED

Allocates one-time funding for mobile crisis resolution services stationed in Wayne County and requires a report.

#### Sec. 1913. Cercarial Dermatitis Prevention Program

Allocates \$250,000 for a program to address the presence of parasites in inland lakes causing outbreaks of cercarial dermatitis, commonly known as swimmer's itch, through science-based mitigation and research; requires a report by January 1. (Administrative Board transferred out all but \$100 for the program.)

#### Sec. 1914. Primary Care and Dental Health Services - VETOED

Allocates \$150,000 for primary care clinic and dental health clinic services for indigent individuals provided in clinic locations in Detroit and Wayne County by a nonprofit organization.

### Sec. 1915. Healthy Communities Grant

Allocates \$300,000 for community healthy living, obesity prevention, and substance abuse prevention programs of Leaders Advancing and Helping Communities. (Administrative Board transferred out all but \$100 for the program and program was restored as Section 465 in 2019 PA 154.)

### Sec. 1916. Human Trafficking Survivors Assistance

Requires DHHS to allocate \$1.0 million to support 2 long-term women's shelters for survivors of human trafficking. (Administrative Board transferred out all but \$100 for the program.)

#### Sec. 1917. Lead Exposure Response and Abatement

Allocates \$3.4 million for health care, food and nutrition, lead abatement, and other services in communities with lead contamination in water, soil, or housing that has caused elevated blood lead levels and other human health consequences; eligible communities may include the City of Flint.

#### Sec. 1918. SAFE Substance Abuse Coalition - VETOED

Allocates \$100.000 to SAFE Substance Abuse Coalition in Wayne County with an aim to lead and support communities to dispel the myths and stigmas about drug addiction.

#### Sec. 1919. Unified Clinics Resiliency Center for Families and Children

Requires DHHS to allocate \$1.5 million to develop and operate a resiliency center for families and children to provide services for those experiencing trauma and related conditions; requires report. (Administrative Board transferred out all but \$100 for the program.)

### Sec. 1920. Autism Navigator Program - VETOED

Established organizational metrics and performance metrics for the autism navigator program; requires each contractor to provide an annual report; appropriates funds for an independent evaluation and requires report. (*Program was restored as Section 463 in 2019 PA 154.*)

#### Sec. 1921. Employment First - VETOED

Allocates \$500,000 to support technical assistance to increase employment for persons with disabilities, in accordance with Executive Order No. 2015-15.

#### Sec. 1922. Wrap-Around Services - VETOED

Allocates \$600,000 to support pilot programs at 3 sites to implement before and after school programs and services, in coordination with a non-profit organization, for students in low-income areas; specifies general locations for the pilot program sites; provides for program performance goals, metrics, and outcome evaluations; and requires the department to report on the program by March 1.

#### Sec. 1923. Senior Citizen Center Program Grants - VETOED

Allocates \$500,000 for a grant program to support health-related senior programs at multipurpose senior citizen centers; maximum grant award is \$5,000 per program. This section was restored as Section 468 in 2019 PA 154, along with \$500,000 of funding. (*Program was restored as Section 468 in 2019 PA 154.*)

#### Sec. 1924. Senior Community Services - VETOED

Allocates \$400,000 for an Alzheimer's disease and dementia care and support pilot program to provide in-home care and community services for seniors in 10 counties, carried out through the Alzheimer's Association-Michigan Chapter. This section was restored as Section 469 in 2019 PA 154, along with \$400,000 of funding. (*Program was restored as Section 469 in 2019 PA 154.*)

#### Sec. 1925. Mosaic Counseling - VETOED

Allocates \$100,000 to Mosaic Counseling to support children's counseling services.

#### Sec. 1926. Food Delivery

Allocates \$470,000 to Feed America – West Michigan in order to cover the start-up costs of expanding the organization's food delivery services to low-income individuals in the Upper Peninsula.

### Sec. 1927. Asian American Health Care and Wellness Initiative - VETOED

Allocates \$150,000 to a west Michigan nonprofit organization to implement a pilot program to provide health care services in a culturally and linguistically competent manner.

### Sec. 1928. Andy's Angels - VETOED

Allocates \$750,000 to Andy's Angels program in Jackson to support costs of treatment programs for individuals suffering from addiction and for their families. (*Program was restored as Section 466 in 2019 PA 154.*)

### Sec. 1929. Refugee Assistance Grant - VETOED

Provides \$175,000 Refugee Assistance Grant to the Chaldean American Ladies of Charity to help transition low-income refugee families to self-sufficiency; requires report.

### Sec. 1930. Autism Train the Trainer - VETOED

Allocates \$100,000 for a pilot project in Walled Lake School District to train school employees on applied behavior analysis; established outcomes and performance measures; requires report. (*Program was restored as Section 464 in 2019 PA 154.*)

#### Sec. 1931. Michigan Medical Resident Loan Repayment Program

Directs DHHS to spend available work project revenue to continue the implementation of the Michigan medical resident education loan repayment assistance program as specified in Section 1918 of Article X of 2018 PA 207. (Governor's signing letter states section is unenforceable.)

### Sec. 1932. Legal Assistance - VETOED

Allocates \$60,000 to the Allegan County Legal Assistance Center to provide civil case legal services to low-income individuals. Requires funds to be distributed by November 1.

#### Sec. 1933. Project ECHO - VETOED

Allocates \$40,000 to the Project ECHO opioid intervention program in northern Michigan. (*Program was restored as Section 467 in 2019 PA 154.*)

#### Sec. 1934. McLaren Greenlawn Campus Pilot Project

Allocates \$4.0 million for a behavioral health pilot project through McLaren Greenlawn Campus in Lansing, outlines program requirements, and requires a report.

# Sec. 1935. Homelessness Elimination Blueprint

Directs DHHS to allocate \$250,000 to research and create a comprehensive actionable plan to end homelessness in Oakland County.

#### Sec. 1936. Healthy Seniors Grant - VETOED

Allocates \$1.0 million for senior programs and services at a senior center in the City of Portage; an equivalent amount of nonstate matching funds is required in order to receive the grant.

#### Sec. 1937. Sexual Assault Comprehensive Services Grant

Allocates \$2.0 million to the Michigan Domestic and Sexual Violence Prevention and Treatment Board for comprehensive victim services to be distributed through a competitive grant process.

#### **SUPPLEMENTAL BOILERPLATE - 2019 PA 154**

### Sec. 451. Child Care Fund – Indirect Cost Allotment Payments

Requires the department to allocate \$3.5 million to counties and tribal governments and distribute these payments in the same proportion as indirect cost allotments are provided to counties in section 117a of the Social Welfare Act.

#### Sec. 452. West Michigan Partnership for Children Consortium

Requires the department to allocate \$2.0 million to the West Michigan Partnership for Children Consortium for administrative costs of a prospective payment system as part of a state-administered performance-based child welfare system.

### Sec. 453. Recovery High Schools

Requires the department to allocate \$600,000 in grants to high schools specifically designated for students recovering from substance use disorders; limits grant funding to \$150,000 per awardee.

### Sec. 454. Recovery Community Organizations

Requires the department to allocate \$600,000 to create a competitive grant for recovery community organizations to offer or expand recovery support center services for individuals seeking long-term substance use disorder recovery; limits grants to \$150,000 per awardee; establishes goals and intended outcomes of the grant program.

#### Sec. 455. St. Mary's/Conference of Western Wayne

Requires the department to allocate \$500,000 for a substance use disorder detoxification pilot project administered by a 9-1-1 service district in conjunction with a substance use and case management provider; requires the hospital wing to have at least 10 beds dedicated to stabilizing patients by providing specialized trauma therapists and peer supports.

#### Sec. 456. Island Primary Care Allocations

Allocates \$675,000 for island primary health care access and services including island health care clinics to Beaver Island, Mackinac Island, Drummond Island, and Bois Blanc Island.

### Sec. 457. Critical Access Hospitals - Rate Increase

Requires the department to increase outpatient Medicaid rates for services provided at critical access hospitals.

#### Sec. 458. Pediatric Psychiatric Services - Rate Increase

Requires the department to increase practitioner rates paid for current procedural terminology codes in psychiatric diagnostic procedures by 15% for services provided to Medicaid beneficiaries under the age of 21.

### Sec. 459. Neonatology - Rate Increase

Requires the department to provide Medicaid reimbursement rates for neonatology services at 95% of Medicare rates; details the current procedural terminology codes that are eligible for the increased reimbursement rate.

#### Sec. 460. Non-Critical Access Hospitals - Rural Obstetrics Services

Requires the department to make lump-sum payments to rural, non-critical access hospitals for obstetric and newborn services.

#### Sec. 461. Non-Critical Access Hospitals

Requires the department to award rural access payments to non-critical access hospitals that provide services to low-income residents of rural areas; provides for the distribution formula.

#### Sec. 462. MiDocs Consortium

Requires the department to allocate \$17.5 million for creating new primary care residency slots in underserved communities in one of the following specialties: family medicine, general internal medicine, general pediatrics, general OB-GYN, psychiatry, or general surgery; requires medical education loan repayments to be contingent on 2-year commitments post-residency to practice in underserved communities; designates unexpended and unencumbered funding as a work project appropriation.

#### Sec. 463. Autism Navigator Program

Requires the department to require contractors to comply with performance-related metrics to maintain eligibility for funding; specifies organizational metrics and performance metrics for the program; requires each contractor to provide an annual report.

#### Sec. 464. Autism Train the Trainer

Requires the department to allocate \$100,000 to implement a pilot project to train school employees in the Walled Lake School District on the principles and practices of applied behavior analysis and research-based intervention strategies; establishes outcomes and performance measures; requires a report.

#### Sec. 465. Healthy Communities Grant

Allocates \$300,000 for community healthy living, obesity prevention, and substance abuse prevention programs of Leaders Advancing and Helping Communities.

#### Sec. 466. Andy's Angels Program - Opioid Transitional Housing and Services Grant

Requires the department to allocate \$750,000 to the Andy's Angels program to support costs of treatment programs for individuals suffering from addiction and for their families.

#### Sec. 467. Project ECHO

Requires the department to allocate \$40,000 in grant funding to the Northern Michigan Opioid Response Consortium.

#### Sec. 468. Senior Citizen Center Program Grants

Allocates \$500,000 for a grant program to support health-related senior programs at multipurpose senior citizen centers; maximum grant award is \$5,000 per program.

### Sec. 469. Senior Community Services

Allocates \$400,000 for an Alzheimer's disease and dementia care and support pilot program to provide in-home care and community services for seniors in 10 counties, carried out through the Alzheimer's Association-Michigan Chapter.

#### Sec. 470. Suicide Prevention Commission

Allocates \$250,000 for the Suicide Prevention Commission to support costs of the new Commission including meetings, clerking, and reimbursement of commissioners; establishes the appropriation as a work project through FY 2023-24. The Commission is established under 2019 Act 177 (Senate Bill 228).



# Mary Ann Cleary, Director Kevin Koorstra, Deputy Director 517.373.8080

# **AREAS OF RESPONSIBILITY**

Agriculture and Rural Development	William E. Hamilton
Attorney General	Michael Cnossen
Auditor General	Benjamin Gielczyk
Bill Analysis	
Edith Best; J	enny McInerney; Emily Smith; Sue Stutzky
Capital Outlay	Perry Zielak
Civil Rights	Michael Cnossen
Community Colleges	Perry Zielak
Corrections	Robin R. Risko
Economic and Revenue Forecasting	Jim Stansell
Education (Department)	Samuel Christensen
Environment, Great Lakes, and Energy	Austin Scott
Executive Office	Benjamin Gielczyk
Fiscal Oversight, Audit, and Litigation	Mary Ann Cleary
Health and Human Services:	
Child Welfare, Child Support, Community Services	
Medicaid, Physical and Behavioral Health	
Public Assistance, Field Operations, Medicaid-bac Public Health and Aging	
Higher Education	-
Insurance and Financial Services	
Judiciary	
Labor and Economic Opportunity	
Legislature	-
Licensing and Regulatory Affairs	•
Local Finance	
Lottery	,
Michigan Strategic Fund	•
Military and Veterans Affairs	
Natural Resources	
Natural Resources Trust Fund	
Retirement	
Revenue Forecasting	- 1 7
Revenue Sharing	
School Aid	
State (Department)	•
State Police	
Supplemental Coordinator	
Tax Analysis	
Technology, Management, and Budget	
Transfer Coordinator	
Transportation	•
Treasury	
Unemployment Insurance	-
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