LINE ITEM AND BOILERPLATE SUMMARY

HEALTH AND HUMAN SERVICES

Fiscal Year 2021-22
Article 6, Public Act 87 of 2021
Senate Bill 82 as Enacted with Vetoes



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December 2021

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December 2021

TO: Members of the Michigan House of Representatives

The House Fiscal Agency has prepared a **Line Item Summary** for each of the FY 2021-22 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, as well as foster care, adoption, family preservation, enforcement of child support laws, juvenile justice services, crime victim services, and licensing of child welfare service providers. Local county DHHS offices are supported throughout the state to provide direct services locally.

Full-time equated unclassified positions	6.0	Full-time equated (FTE) positions not in the state classified service.
Full-time equated classified positions	15,581.5	Full-time equated (FTE) positions in the state classified service. Note: based on 2,088 hours for 1.0 FTE position.
Average population	770.0	Average number of patients at four state-operated psychiatric hospitals, and the state Forensic Center.
GROSS APPROPRIATION	\$31,667,058,000 \$31,651,808,000	Total of all applicable line item appropriations.
Total interdepartmental grants and intradepartmental transfers	14,593,500	Revenue received from other departments or transferred within the department.
ADJUSTED GROSS APPROPRIATION	\$31,652,464,500 \$31,637,214,500	Gross appropriation less (or minus) interdepartmental grant (IDG) and intradepartmental transfer (IDT) revenue.
Social security act, temporary assistance for needy families	528,790,000 528,090,000	Total federal temporary assistance for needy families (TANF) block grant revenue.
Capped federal revenues	467,101,400	Total non-TANF grant revenue received from federal departments and agencies for a capped amount.
Coronavirus state fiscal recovery fund	41,900,000	Total coronavirus state fiscal recovery fund revenue from the federal American Rescue Plan Act (ARPA) of 2021, Public Law 117-2.
Total other federal revenues	21,870,388,400	Total other revenue received from federal departments and agencies, not including TANF or capped.
Total local revenues	162,951,100	Revenue received from local units of government.
Total private revenues	172,276,500	Revenue received from private individuals and entities.
Michigan merit award trust fund	61,268,700	Total Merit Award Trust Fund revenue from the 1998 master settlement agreement with tobacco companies.
Total other state restricted revenues	2,925,363,400	Total other state revenue dedicated to a specific fund (other than the General Fund) or restricted for a specific purpose.
STATE GENERAL FUND/ GENERAL PURPOSE	\$ 5,422,425,000 \$5,407,875,000	Unrestricted state revenue from taxes and other sources.

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-time equated unclassified positions	6.0	Full-time equated (FTE) positions not in the	state classi	fied service.
Full-time equated classified positions	821.4	Full-time equated (FTE) positions in the star	te classified	service.
Unclassified salaries – 6.0 FTE positions	\$1,266,900	Salaries of Department Director and five ot Director is appointed by the Governor; unclassified positions.		
		Funding Source(s):	TANF Federal GF/GP	76,100 334,200 856,600
		Related Boilerplate Section(s): None		
Administrative hearings officers	9,834,500	Payments to Department of Licensing and for Michigan Administrative Hearings S information technology costs that are relaunder which program clients may contest a eligibility or benefit levels.	System sta ated to DH	iff, rent, and HS programs,
		Funding Source(s):	IDG TANF Federal GF/GP	465,300 507,600 4,769,300 4,092,300
		Related Boilerplate Section(s): None		
Demonstration projects – 7.0 FTE positions	7,070,800	Projects in human services program area family recruitment, grant to Attorney General prosecution of sexual assault, food assistated grant funding for a violent offender redelinquent youth; spending changes as near replace expired projects.	I for fraud pr nce outreac entry initiat	rosecution and th, and federal tive aimed at
		Funding Source(s):	TANF Federal Local Private GF/GP	68,900 2,821,900 16,400 3,806,800 356,800
		Related Boilerplate Section(s): None		
Departmental administration and management – 597.4 FTE positions	98,121,200	Funding for FTE positions and related cadministrative functions, and fringe be unclassified positions. Includes: Executive Office Staff: Support staff in Dir Directors' offices. Financial Services: Accounting, federal reports management, coordination with S Integrated Governmental Management App Quality Assurance: Quality control revious Assistance Program, and Temporary Assistance Program, and Temporary Assistance Incontinued next page]	enefits for ector's Office orting, budge IGMA systet lications). ews for Matance for N	Director and be and Deputy et, purchasing, em (Statewide edicaid, Food

Organizational and Infrastructure: Facility management, office and Departmental vehicle services, telecommunications, forms and mail management. administration and management - 597.4 FTE Contracts and Rate Setting: Contract and rate setting. positions Legal Services: Legal affairs staff for the Department. (continued) 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** 633,500 **TANF** 9,576,800 Federal 40,731,700 Local 69,600 Private 4.000 Restricted 712,800 46,392,800 GF/GP Related Boilerplate Section(s): 205, 206, 207, 220, 230, 232, 279, 296, 299, 531, 1901, 1904 Legal services 12,300,000 Support for DHHS legal services related to the Flint water emergency. GF/GP Funding Source(s): 12,300,000 Related Boilerplate Section(s): None Office of inspector general 25,366,300 FTEs, related costs, supplies, materials, travel, and contracts for the - 197.0 FTE positions Office of Inspector General, to investigate allegations and suspected cases of fraud involving DHHS programs by providers, recipients and vendors; review administrative policies and procedures, and recommend ways to deter and detect fraud. Also funds Front End Eligibility (FEE) agents at local DHHS offices to investigate cases prior to completion of application process. Note: Funding for Inspector General program is also included in Sec. 119 Medical Services Administration line item. Funding Source(s): 198.200 IDG TANF 874,800 Federal 12.722.800 GF/GP 11,570,500 Related Boilerplate Section(s): 672, 1505, 1507 Payments for rental of office space in privately-owned or county-Property management 63,784,000 owned buildings for department administration and for local DHHS offices and to DTMB for building maintenance, security, and operating costs for state-owned buildings occupied by DHHS. Funding Source(s): **IDG** 591,700

10,667,900

22,383,700

29,609,500

36,300

494.900

TANF

Federal Private

GF/GP

Restricted

Related Boilerplate Section(s): None

Terminal leave payments	7,092,100	Funding for expenditures when employ and other employee costs.	yees leave state	e employment
		Funding Source(s):	TANF Federal Restricted GF/GP	1,751,200 2,261,000 52,700 3,027,200
		Related Boilerplate Section(s): 316		
Training and program support – 20.0 FTE positions	2,573,700	Salary, fringe benefit, travel, contractua staff that provide program-specific train employees who work in public assistant	ning to DHHS r	new hires and
		Funding Source(s):	TANF Federal GF/GP	412,600 1,126,300 1,034,800
		Related Boilerplate Section(s): None		
Worker's compensation	7,740,500	Payments to DTMB for worker's compe funding for wage, salary, and related frin return to work under limited duty ass provisions of Worker's Compensation insures against these costs.	ge benefits for ei ignments in acc	mployees who cordance with
		Funding Source(s):	TANF Federal Restricted GF/GP	396,200 2,118,200 41,000 5,185,100
		Related Boilerplate Section(s): None	01701	3,103,100
GROSS APPROPRIATION	\$235,150,000	Total of all applicable line item appro	priations.	
IDG from department of education	1,888,100	Grant from the Department of Education to administer eligibilit 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.		r activities for DC program
IDG from DTMB - office of retirement services	600	Payment per interdepartmental agree retirement disability determination se police, judges, and school teachers.		
Social security act, temporary assistance for needy families	24,332,100	Total federal Temporary Assistance for grant revenues; supports most line item		
Capped federal revenues	18,419,200	Total non-TANF revenue from certain capped amount; supports most line item		
Total other federal revenues	70,849,900	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 • othe grants supporting health and human services administration and central services functions.		ue • Medicaid prevention and sistance grant /enue • other
Total local revenues	86,000	Total revenue from local units of go services demonstration projects.	vernment supp	orting human
Total private revenues	3,847,100	Includes parking fee revenue from DHH Commons, a privately-owned building sources for human services demonstrate	g; and revenue	
			•	

Total other state restricted revenues		Revenue from newborn screening services fees, certificate of need fees, and Michigan Health Initiative Fund revenue from the software tax (1987 PA 258).
STATE GENERAL FUND/ GENERAL PURPOSE	\$114,425,600	Unrestricted state revenue from taxes and other sources.

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	193.7	Full-time equated (FTE) positions in the state classified service.	
Child support enforcement operations – 187.7 FTE positions	\$24,691,500	Funds salary, fringe benefit, travel, contractual services, and so costs for Bureau of Child Support, which provides administratical collect/distribute child support payments and establish or enforce support orders; includes executive management and the following Operations and Case Management Division: General administration including contract services; customer service for applicants, and management service for open cases with offices in Lansing Detroit. Policy and Program Development Division: Program policy and and training staff. Administration Division: General administrative functions surplanning, evaluation, financial management, contract management budget analysis; also supports paying child support recover to Michigan Department of Treasury and federal Internal Reservice. Central Enforcement Unit: Staff to administer collection of support from special income sources such as one-time payme bonuses.	
		Funding Source(s): Federal 16,334,100 GF/GP 8,357,400	
		Related Boilerplate Section(s): 401, 409	
Child support incentive payments	24,409,600	Payments to county Friends of the Court and county prosecutin attorneys from federal child support incentive funds; funding to Michigan is by formula using prior-year child support performance measures related to paternity establishment, support orderestablishment, payment collection levels, arrearage collection levels and cost effectiveness (collections divided by administrative costs state shares part of the incentive funds with counties (county payment 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 14,839,600 GF/GP 9,570,000	
		Related Boilerplate Section(s): 401	

STATE GENERAL FUND/ GENERAL PURPOSE	\$24,911,600	Unrestricted state revenue from taxes and other sources.	
Total other federal revenues	130,294,800	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.	
Capped federal revenues	14,839,600	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.	
GROSS APPROPRIATION	\$170,046,000	Total of all applicable line item appropriations.	
		Related Boilerplate Section(s): None	
		Funding Source(s): Federal 4,969,600 GF/GP 2,375,000	
State disbursement unit – 6.0 FTE positions	7,344,600	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 108,991,100 GF/GP 4,609,200	
Legal support contracts	113,600,300	Federal funds to counties under cooperative reimbursement contracts to support local child support enforcement activities by county Friends of the Court and prosecuting attorneys (counties provide matching funds). Also supports payments under interagency agreement to pass through federal funding to Attorney General for child support enforcement and funds contract for genetic testing lab. GF/GP offsets fee revenue eliminated by Legislature that is mandated by the federal government.	

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, runaway and homeless youth, 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	75.6	Full-time equated (FTE) positions in the	state classified	service.
Bureau of community services and outreach – 24.0 FTE positions	\$3,419,700	Salary, fringe benefit, travel, contractual Bureau, which provides grant managem to local Community Action Agencies r DHHS though Weatherization and Comprograms.	ent and techniceceiving feder	cal assistance al funds from
		Funding Source(s):	Federal	3,419,700
		Related Boilerplate Section(s): None		
Child advocacy centers – 0.5 FTE positions	2,407,000	Supports child advocacy centers across sexual abuse. Restricted funding is expression (2008 PA 544). Funding administration and Treatment Board.	armarked civil	infraction fee
		Funding Source(s):	Restricted GF/GP	1,407,000 1,000,000
		Related Boilerplate Section(s): 459		
Community services and outreach administration – 18.0 FTE positions	2,663,700	Funding for administrative staffing coprograms, including the Housing and oversees: Emergency Shelter, Rusupportive Housing Initiative, Upper Forgram; Family Re-Housing Program, State of Michigan Leasing Assistance Persons with AIDS, Projects for Ass Homelessness (PATH), Cooperative Agr Individuals (CABHI), and SSI/SSDI Outro (SOAR).	d Homeless Dural Homeless Peninsula Tran Continuum of O Housing Op istance in Tra eements to Ber	Division which is Permanent sitional Living Care Program, portunities for ansitions from nefit Homeless
		Funding Source(s):	TANF Federal GF/GP	35,900 680,300 1,947,500
		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 management and low-income housing assistance.	eds) supportir	ng emergency
		Funding Source(s):	Federal	25,840,000
		Related Boilerplate Section(s): None		

Crime victim grants administration services – 17.0 FTE positions	3,001,300	FTEs, related costs, and contracts to manage crime victim service programs and grants, provide public awareness, outreach, and publications for crime victims, support Crime Victim Services Commission, and administer statewide automated Michigan Crime Victim Notification Network (MCVNN) using the VINE (Victim Information and Notification Everyday) application system.
		Funding Source(s): Federal 1,376,300 Restricted 1,625,000
		Related Boilerplate Section(s): 452
Crime victim justice assistance grants	98,579,300	Grants to public and private non-profit agencies for direct services to crime victims including crisis counseling, personal and legal advocacy, therapy, shelter, and referral, with priority to victims of sexual assault, spousal abuse, child abuse, and underserved victims, such as survivors of homicide and drunk driving.
		Funding Source(s): Federal 98,579,300
		Related Boilerplate Section(s): 452, 462
Crime victim rights services grants	19,869,900	Funding for compensation as payor of last resort to crime victims who suffer bodily injury for medical expenses, counseling, burial assistance, and loss of earnings caused by the injury; reimbursement to health care providers for victim forensic exams related to sexual assault (SAFE Response); training for local prosecutors, law enforcement, sheriffs, courts, jails, and other agencies to notify, inform, consult, and protect victims of crime as required by statute, including victim advocate programs in county prosecutor offices; and the Crime Victim Notification Network connecting prosecutors' offices with jails to inform crime victims of perpetrator status changes and court dates.
		Funding Source(s): Federal 3,070,000 Restricted 16,799,900
		Related Boilerplate Section(s): 458
Domestic violence prevention and treatment – 15.6 FTE positions	18,255,500	Funds the Michigan Domestic and Sexual Violence Prevention and Treatment Board; emergency shelter and related services (counseling, information, referrals, advocacy) to domestic violence victims and their children; educating service providers, law enforcement agencies, prosecutors, judicial systems, and policy makers on preventing and treating domestic and sexual violence; also funds transitional supportive housing program, and federally-funded demonstration projects.
		Funding Source(s): TANF 5,481,900 Federal 9,868,800 Restricted 1,356,400 GF/GP 1,548,400
		Related Boilerplate Section(s): 523, 645, 653
	24,082,500	Payments to Salvation Army under contractual agreement with DHHS to provide shelters through either bed space or motel nights for
Homeless programs		homeless persons; also includes demonstration project revenues through federal Housing and Urban Development and funding for reimbursement to public service agencies for homeless clients' birth certificate fees.
Homeless programs		homeless persons; also includes demonstration project revenues through federal Housing and Urban Development and funding for reimbursement to public service agencies for homeless clients' birth

Housing and support services	13,031,000	Contracts and grants for federal hou programs for individuals with mental illne and developmental disabilities who a homelessness, and housing assistance with AIDS.	ess, substance in the second s	use disorders, or at risk of
		Funding Source(s):	Federal GF/GP	12,325,400 705,600
		Related Boilerplate Section(s): None		
Human trafficking intervention services	200,000	Funding to develop strategies to eliminal programs to enhance community and call of human trafficking and survivors of human the Human Trafficking Health Advisory initiatives of the Board.	re services for p nan trafficking; a	ersons at risk and to support
		Funding Source(s):	GF/GP	200,000
		Related Boilerplate Section(s): None		
Rape prevention and services – 0.5 FTE positions	5,097,300	Services for prevention and treatment contracts with both non-profit and pub advocacy, information, education, and funding is earmarked civil infraction for Funding administered by the Michigan D Prevention and Treatment Board.	olic agencies for referral service se revenue (20	or counseling, s. Restricted 108 PA 546).
		Funding Source(s):	TANF Federal Restricted GF/GP	1,094,000 978,300 3,000,000 25,000
		Related Boilerplate Section(s): None		
Runaway and homeless youth grants	7,784,000	Funding for intervention programs aime youth through contracts with private non		
		Funding Source(s):	TANF Federal GF/GP	3,424,800 3,103,000 1,256,200
		Related Boilerplate Section(s): 461		
School success partnership program	525,000	Grant to Northeast Michigan Community School Success Partnership Program for failure.		
		Funding Source(s):	TANF	525,000
		Related Boilerplate Section(s): 450		
assault evidence kit	800,000	Related Boilerplate Section(s): 450 Funding for the statewide tracking sys submission and status of sexual assaul provides secure electronic access for accommodate concurrent data entry the including web entry through compute device when kits are collected.	t evidence kits. or victims and nrough various	The system is able to mechanisms,
Uniform statewide sexual assault evidence kit tracking system	800,000	Funding for the statewide tracking sys submission and status of sexual assaul provides secure electronic access for accommodate concurrent data entry the including web entry through compute	t evidence kits. or victims and nrough various	The system is able to mechanisms,

Weatherization assistance	15,505,000	Funds to regional Community Action Agencies for weatherization costs associated with homes occupied by low-income clients. Grant is from U.S. Department of Energy.		
		Funding Source(s): Federal 15,505,000		
		Related Boilerplate Section(s): None		
GROSS APPROPRIATION	\$241,061,200	Total of all applicable line item appropriations.		
Social security act, temporary assistance for needy families	16,724,200	Total federal Temporary Assistance for Needy Families (TANF) block grant revenues.		
Capped federal revenues	62,161,000	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.		
Total other federal revenues	116,199,000	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		
Compulsive gambling prevention fund	1,040,500	Revenue generated through statutory contributions from privat Detroit casinos, the State Lottery, and horse racing industry that are dedicated to domestic abuse prevention.		
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.		
Sexual assault victims' prevention and treatment fund	3,000,000	Civil infraction fee revenue earmarked to support victims of sexu assault.		
Child advocacy centers fund	1,407,000	Civil infraction fee revenue earmarked to support child advocacy centers.		
Crime victim's rights fund	18,740,800	Revenue generated through fees assessed against convicted criminal defendants.		
STATE GENERAL FUND/ GENERAL PURPOSE	\$20,988,700	Unrestricted state revenue from taxes and other sources.		

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 June 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. A Modified ISEP was renegotiated in June 2019. 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	4,146.2	Full-time equated (FTE) positions in the	state classifie	ed service.
Adoption subsidies	\$192,136,400	Adoption subsidy and medical subsidy payments to adoptive familie to facilitate placing special needs children (e.g., large sibling groups older children, children with a physical disability, minority children that cannot or should not be returned home into an adoptive home adoption subsidy payments based on equivalent foster care rate for the child.		sibling groups, nority children) doptive home;
		Funding Source(s):	TANF Federal GF/GP	40,289,800 90,681,500 61,165,100
		Related Boilerplate Section(s): 534, 54	10	
Adoption support services – 10.0 FTE positions – PARTIALLY VETOED	51,566,400 41,566,400	Payments to private adoption agent placements and finalizations of children Payment based on timeliness of placements staff costs in the Michigan contracts to operate the Michigan Ad (MARE) system, post-adoption resource consultants, and Parent-to-Parent ment Post-enrollment Note: Governor vetoe adoption marketing and education programments.	n in the child wollacement an Children's In doption Resou e centers, adorors.	relfare system. d finalization. stitute. Funds rce Exchange ption resource
		Funding Source(s):	TANF Federal GF/GP	1,993,300 19,229,400 30,343,700 20,343,700
		Related Boilerplate Section(s): 509, 52 559, 569, 570, 594	27, 528, 530,	531, 533, 534,
Attorney general contract	5,191,100	Payment to Attorney General for legal Wayne County on behalf of DHHS and for foster care or are already in foster care.	children who	
		Funding Source(s):	Federal GF/GP	1,506,600 3,684,500
		Related Boilerplate Section(s): 506		

Child abuse and neglect – 624,20 children's justice act – 1.0	
FTE position	Federal funding supports curriculum and training development fo law enforcement, child protective services, child advocacy centers and child death review teams.
	Funding Source(s): Federal 624,200
	Related Boilerplate Section(s): None
Child care fund 269,339,70	O State reimbursement of 50% to counties for care and treatment fo children who are court wards and placed out of their homes and fo 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. Beginning in 2018, local funds are from county reimbursements to the state for children placed with the state and paid by the state first.
	Funding Source(s): TANF 24,153,700 Federal 4,416,000 Local 23,580,900 GF/GP 217,189,100
	Related Boilerplate Section(s): 231, 501, 503, 505, 511, 513, 515 516, 519, 525, 531, 533, 535, 540, 546, 550, 551, 552, 564, 567 583, 589, 598, 701, 706, 707, 708
Child care fund – indirect 3,500,00 cost allotment	0 Funding for indirect cost allotment payments from the Child Care Fund to counties.
	Funding Source(s): GF/GP 3,500,000
	Related Boilerplate Section(s): 521
Child legal representation 500,00	Funding to establish two pilot projects to improve the quality of lega representation for children and parents in child protective hearings.
	Funding Source(s): GF/GP 500,000
	Related Boilerplate Section(s): 580
Child protection 1,050,30	O 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 prio terminations of parental rights due to abuse/neglect; and paternity testing contracts for children in the child welfare system.
	Funding Source(s): Federal 1,050,300
	Related Boilerplate Section(s): None
Child welfare administration 390,00 travel	O 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.
	loughig, and modio.
	Funding Source(s): TANF 109,300 Federal 144,500 GF/GP 136,200

Child welfare field staff - noncaseload compliance – 353.0 FTE positions	40,279,000	Funds salary and wage and fringe bene intake, maltreatment in care unit, child health liaisons, and Michigan Youth Opp	welfare fundi	ng specialists,
		Funding Source(s):	TANF Federal GF/GP	18,074,800 11,513,500 10,690,700
		Related Boilerplate Section(s): None		
Child welfare institute – 51.0 FTE positions	9,131,200	Provides program-specific training to employees of private child welfare agenc protective services, foster care, adop systems. Includes salary, fringe benefit, and supply costs for child welfare training	ies who work ption, and ju travel, contra	within the child venile justice
		Funding Source(s):	TANF Federal GF/GP	2,760,400 2,400,100 3,970,700
		Related Boilerplate Section(s): 545, 558	8, 585	
Child welfare licensing – 59.0 FTE positions	7,187,400	Funds salary and wage and fringe beneficiensing Division. Division provides livarious organizations offering child we conducts on-site evaluations and complicompliance with state laws and administrational placing agencies, child caring in homes with total residential capacity for	icensure and elfare service aint investigat rative rules. On stitutions, and	registration of es to children; ions to ensure eversees 6,496 and child foster
		Funding Source(s):	TANF Federal GF/GP	3,000 2,330,900 4,853,500
		Related Boilerplate Section(s): 525, 556	6	
Child welfare medical/psychiatric evaluations	10,428,500	Payment to medical service provide evaluation and diagnostic exams for f protective services or foster care case.		
		Funding Source(s):	Federal GF/GP	6,124,400 4,304,100
		Related Boilerplate Section(s): None		
Children's protective services – caseload staff – 1,615.0 FTE positions	166,891,000	Funds salary and wage and fringe Protective Services (CPS) Investigation CPS ongoing case management. The caseload-to-worker ratios mandated in the settlement agreement, which are as for investigations, 17:1 for CPS ongoing set	ns caseload lese workers he federal Ch ollows: 12:1	staff. Includes have specific ildren's Rights
		<u>Post-enrollment Note</u> : Governor states S 595 unenforceable.	Sec. 514, Sec.	518, and Sec.
		Funding Source(s):	TANF Federal GF/GP	77,471,000 39,959,200 49,460,800

Children's protective services supervisors – 387.0 FTE positions	46,747,800	Funds salary and wage and fringe be CPS caseload workers. These superv worker-to-supervisor ratio mandated in settlement agreement of 5:1. Post-enrollment Note: Governor states 595 unenforceable.	isors have a spent the federal Ch	ecific caseload ildren's Rights
			TANIE	00 700 400
		Funding Source(s):	TANF Federal GF/GP	23,769,100 11,564,400 11,414,300
		Related Boilerplate Section(s): 511, 5	14, 515, 518, 5	92, 593, 595
Children's services administration – 196.2 FTE positions	22,079,500	adoption assistance programs. Child Welfare Quality Improvement U reviews for child welfare program case program accuracy. Child Welfare Data Management Unit and private agencies that relate to fed federal Children's Rights settlement ag Guardianship Program Unit: Ove guardianship program. Protection and Prevention Division: Child protective services.	licy staff. Incluice: Coversees chi Coversees programit: Conducts es to determine Compiles dat deral service re greement. ersees program Coversees program Coversees program	Id welfare field am policy for quality control payment and ta from DHHS views and the m policy for ram policy for
		Post-enrollment Note: Governor states		forceable.
		Funding Source(s):	TANF Federal GF/GP	3,837,600 7,375,000 10,866,900
		Related Boilerplate Section(s): 514, 5	33, 536, 575	
Children's trust fund – 12.0 FTE positions	4,720,100	Staff expenses, board costs, and i related to operations of the Children abuse prevention service providers development efforts, training, techn activities, fundraising auctions, and so Children's Trust Fund. Supports Childrenid abuse prevention councils.	n's Trust Fund. and special p nical assistand licitations admir	Directs child rojects, funds e, evaluation nistered by the
		Funding Source(s):	Federal Restricted GF/GP	1,602,200 2,895,300 222,600
		Related Boilerplate Section(s): 508		

Contractual services, supplies, and materials	9,567,600	Contractual services and overhead costs related to child welfa operations at local DHHS offices. Major expenditures include cellul phone costs, office supplies, postage, consultation, security gua services, rental payments for leased equipment, printin employment verification services, legal costs, and other gener overhead contracts and costs.
		Funding Source(s): IDG 35,00 TANF 1,786,20 Federal 3,623,60 GF/GP 4,122,80
		Related Boilerplate Section(s): 205, 220
Court-appointed special advocates	1,000,000	Supports court-appointed special advocates that advocate in the legal system for the best interests of children who have been abuse or neglected.
		Funding Source(s): GF/GP 1,000,00
		Related Boilerplate Section(s): 526
Education planners – 15.0 FTE positions	1,627,400	Funds salary and wage and fringe benefit costs for region education planners to provide consultation and support for childre in accessing educational servicing and developing individualize education plans for older children.
		Funding Source(s): TANF 461,00 Federal 550,30 GF/GP 616,10
		Related Boilerplate Section(s): None
Family preservation and prevention services administration – 9.0 FTE positions	1,382,700	Administration of preservation and prevention programs designed strengthen families and prevent child abuse/neglect; include Families First, Child Protection and Permanency, Stror Families/Safe Children, Family Reunification, and training artechnical assistance.
		Funding Source(s): TANF 1,129,00 Federal 175,60 GF/GP 78,10
		Related Boilerplate Section(s): 523(1)(3)

Family preservation programs—34.0 FTE positions

57,929,200

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.

Funding Source(s): TANF 43,224,000

Federal 5,058,400 GF/GP 9.646.800

Related Boilerplate Section(s): 523, 529

Foster care payments

294.384.500

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.

Funding Source(s): TANF 10,861,100 Federal 111,532,800

Private 2,700,000 Local 22,164,300 GF/GP 147,126,300

Related Boilerplate Section(s): 231, 501, 502, 503, 507, 511, 513, 519, 525, 530, 531, 533, 535, 536, 540, 546, 550, 551, 552, 554, 562, 564, 567, 573, 574, 581, 583, 589, 701

Foster care services - caseload staff – 966.0 FTE positions	95,424,900	Funds salary and wage and fringe be management field staff, foster care cas licensure, and purchase of service mospecific caseload-to-worker ratios mand Rights settlement agreement, which a care, 30:1 for foster home licensing.	se managemer onitors. These dated in the fed	nt, foster home workers have eral Children's
		<u>Post-enrollment Note</u> : Governor state unenforceable.	es Sec. 514 a	and Sec., 595
		Funding Source(s):	TANF Federal GF/GP	50,047,700 25,797,700 19,579,500
		Related Boilerplate Section(s): 503, 50 595	04, 511, 514, 5	62, 564, 567,
Foster care services supervisors – 227.0 FTE positions	30,222,200	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	15,348,100 7,469,900 7,404,200
		Related Boilerplate Section(s): None		
Guardianship assistance program	10,279,600	Provides subsidy payments to legal gupermanent legal responsibility for childreshow would otherwise continue to be in four support at equivalent levels to adoptive	en in the child voster care. Gua	welfare system
		Funding Source(s):	Federal GF/GP	3,102,600 7,177,000
		Related Boilerplate Section(s): 547, 58	38	
Interstate compact	179,600	Travel reimbursement costs and other cand 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	6,128,600	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	2,708,500 2,052,600 1,367,500
		Related Boilerplate Section(s): None		
Performance based funding	1,363,100	Supports project team, the developme rates, MiTEAM contract, and project ev	aluation for the	
implementation – 3.0 FTE positions		based child welfare system implementa	ation.	
implementation – 3.0 FTE		based child welfare system implementation Funding Source(s):	etion. Federal GF/GP	379,300 983,800

Permanency resource managers – 28.0 FTE positions	3,394,800	Funds salary and wage and fringe benefor reviewing long-term child welfare ca		
poditorio		Funding Source(s):	TANF Federal GF/GP	442,600 1,453,200 1,499,000
		Related Boilerplate Section(s): None		
Prosecuting attorney contracts	8,142,800	Title IV-E federal funds for legal representationneys 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 7,828,300
		Related Boilerplate Section(s): None		
Raise the age fund	9,150,000	Funding for the Raise the Age program year-old offenders be adjudicated in rather than the adult court system.		
		Funding Source(s):	GF/GP	9,150,000
		Related Boilerplate Section(s): 715		
Second line supervisors and technical staff – 126.0 FTE positions	19,374,000	Funds salary and wage and fringe be supervisors and technical staff that s welfare workers located in the DHHS lo	supervise and	support child
		Funding Source(s):	IDG TANF Federal GF/GP	200,200 2,685,400 8,355,700 8,132,700
		Related Boilerplate Section(s): None		
Settlement monitor	2,219,900	Supports contract with Public Catal monitoring contract mandated in the settlement agreement. In February 20 negotiated, the Implementation, Sustain A modified ISEP was negotiated in Jur responsible for reviewing DHHS compagreement.	e federal Child 016, a new ag nability, and Exi ne 2019. Fede	dren's Rights preement was it Plan (ISEP). eral monitor is
		Funding Source(s):	TANF Federal GF/GP	448,100 668,700 1,103,100
		Related Boilerplate Section(s): 588		
Strong families/safe children	12,600,000	Statewide initiative to promote commun prevent child abuse and/or neglect by prepreservation, time-limited reunification services; local collaboratives develop palso funds administrative costs related funding from Title IV-B (II) Family Presservices.	oviding family s n, and adoption plans based or d to the progr	support, family on promotion n local needs; am. Federal
		Funding Source(s):	Federal GF/GP	9,800,000 2,800,000

STATE GENERAL FUND/ GENERAL PURPOSE	\$638,526,700 \$628,526,700	Unrestricted state revenue from taxes	s and other so	ources.
Children's trust fund	2,895,300	Contributions, primarily through income Children's Trust Fund.	e tax form don	ations, to the
Private - collections	2,700,000	Total payments received from parents w	vhose child is in	n foster care.
Local funds - county chargeback	45,745,200	Total revenue from local county units o payments.	f government f	or foster care
Total other federal revenues	282,378,100	O 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.		
Capped federal revenues	108,843,400	Total non-TANF capped federal grant Security Act Title XX Social Services Security Act Title IV-B (I) Child Welfare S Social Security Act Title IV-B (II) Fam Support Services funds, and Low-Incon Program (LIHEAP) funding.	Block Grant fu Services Block (ily Preservatio	inding, Socia Grant funding n and Family
Social security act, temporary assistance for needy families	323,432,000	Total federal Temporary Assistance f block grant revenues.	or Needy Fan	nilies (TANF)
IDG from department of education	235,200	Payment per interdepartmental agree Education to administer eligibility determined activities, and other activities for Child Diprogram. CDC program transferred from Education through Executive Order 201	minations, insp evelopment an om DHHS to D	ector general d Care (CDC)
GROSS APPROPRIATION	\$1,404,755,900 \$1,394,755,900	Total of all applicable line item appro	priations.	
		Related Boilerplate Section(s): 522, 52	3, 825	
		Funding Source(s):	TANF Federal GF/GP	1,508,500 2,565,100 4,102,100
Youth in transition – 4.5 FTE positions	8,175,700	Program assists 14- to 20-year-olds who are, or have beer care based on abuse or neglect. Michigan Youth Opp Initiative provides independent living services, including assistance, education and employment support, mentorin skills training, education and training vouchers, and other a to meet basic needs.		Opportunities ding housing toring and life ter assistance
		Related Boilerplate Section(s): 517		
		Funding Source(s):	TANF Federal GF/GP	5,300 248,800 192,600
		Post-enrollment Note: Governor states	Sec. 517 unenf	orceable.
Title IV-E compliance and accountability office – 4.0 FTE positions	446,700	Salary, fringe benefit, travel, contractual services, and supply co for office that ensures compliance with federal Social Security Title IV-E regulations related to funding for foster care and adopti determining best practices in other states in maximizing feder money for eligible cases, and providing technical assistance to lounits and courts regarding Title IV-E caseloads.		

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 positions	120.5	Full-time equated (FTE) positions in the	state classified	service.
Bay Pines Center – 47.0 FTE positions	\$5,742,300	Direct operating costs for the state-operated secure juvenile justices provided at Bay Pines Center in Escanaba; primarily refacts of facility staff, which includes direct care, medical, education staff; also includes purchased medical, dental and mehalth services from private providers, as well as food and utility to Local revenues include county chargeback per diem costs establishmough Youth Rehabilitation Services Act, MCL 803.305, and revenue from local intermediate school districts to support educations.		imarily reflects medical, and tal and mental nd utility costs. sts established 305, and local
		Funding Source(s):	Federal Local GF/GP	267,300 2,842,300 2,632,700
		Related Boilerplate Section(s): 505, 520), 525, 540	
Committee on juvenile justice administration – 2.5	359,500	Administrative staff support for juvenile expenses related to Governor-appointed		program and
FTE positions		Funding Source(s):	Federal GF/GP	191,400 168,100
		Related Boilerplate Section(s): None		
Committee on juvenile justice grants	3,000,000	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	to develop r on, diversion, t of juvenile del	nore effective reatment, and
		Francisco Correso (a)		
		Funding Source(s):	Federal	3,000,000
		Related Boilerplate Section(s): None	Federal	3,000,000
Community support services – 3.0 FTE positions	2,131,700		provides assist	ance to small s for tethering,
services – 3.0 FTE	2,131,700	Related Boilerplate Section(s): None Regional Detention Support Services production sources of the security se	provides assist	ance to small s for tethering,
services – 3.0 FTE	2,131,700	Related Boilerplate Section(s): None Regional Detention Support Services production supports reverse programs. Regional Detention Support Services production supports reverse programs.	provides assist on and facilities program admin Federal	rance to small s for tethering, histration; also 629,900
services – 3.0 FTE	2,131,700	Related Boilerplate Section(s): None Regional Detention Support Services production supports reverse programs. Funding Source(s):	provides assisted and facilities program admining Federal GF/GP	fance to small s for tethering, histration; also 629,900 1,501,800 fficers; officers
services – 3.0 FTE positions		Related Boilerplate Section(s): None Regional Detention Support Services production without secure juvenile detention transportation, home detention, and property re-entry programs. Funding Source(s): Related Boilerplate Section(s): 706 Grants to counties in support of court provere previously state employees, and st	provides assisted and facilities program admining Federal GF/GP	fance to small s for tethering, histration; also 629,900 1,501,800 fficers; officers

STATE GENERAL FUND/ GENERAL PURPOSE	\$10,029,700	Unrestricted state revenue from taxes	and other sou	ırces.
Local funds - county chargeback	4,692,800	Total revenue from local county units of go services.	overnment for j	uvenile justice
Local funds - state share education funds	1,351,000	Total revenue from local intermediate school districts to support education costs within state operated facilities.		
Capped federal revenues	8,554,600	Total non-TANF capped federal grants revenue. Includes Juvenil Justice Grants and Social Security Act Title IV-B Child Welfar funding.		
GROSS APPROPRIATION	\$24,628,100	Total of all applicable line item approp	riations.	
		Related Boilerplate Section(s): 505, 520,	, 525, 540	
		Funding Source(s):	Federal Local GF/GP	176,200 2,893,100 2,689,600
Shawono Center – 47.0 FTE positions	5,758,900	Direct operating costs for the state-oper services provided at Shawano Center in costs of facility staff, which includes education staff; also includes purchased health services from private providers, as Local revenues include county chargeback through Youth Rehabilitation Services A revenue from local intermediate school costs.	n Grayling; prindirect care, medical, dental well as food arek per diem cos act, MCL 803.3	marily reflects medical, and al, and mental nd utility costs. sts established 305, and local
		Related Boilerplate Section(s): None		
		Funding Source(s):	Federal Local GF/GP	385,500 308,400 3,037,500
Juvenile justice, administration and maintenance – 21.0 FTE positions	3,731,400	Administration and oversight by Bureau of Juvenile Justice; includ administration (budget, policy, and contracts), quality assurance education, assignment, information technology, and reintegration; all supports information technology purchased services.		

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, 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.	
Diaper assistance grant	\$250,000	Provides for statewide grants to purchase diapering products.	
		Funding Source(s): TANF 250,000	
		Related Boilerplate Section(s): 689	
Emergency services local office allocations	8,813,500	Funds allocated to local DHHS offices for emergency cash assistant for relocation services, home repairs, food, and other need assistance allowed only if emergency is not due to client negligence	
		Funding Source(s): TANF 5,415,000 GF/GP 3,398,500	
		Related Boilerplate Section(s): 601, 610, 615, 645, 686	
Family independence program	59,751,700	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 \$385; also supports an annual clothing allowance for each school-aged child in a FIP group. Post-enrollment Note: Governor states Sec. 229 unenforceable. Funding Source(s): TANF 48,722,100 Restricted 10,121,900 GF/GP 907,700	
		Related Boilerplate Section(s): 229, 601, 606, 607, 615, 616, 619, 669, 677, 686	
Food assistance program benefits	3,032,468,000	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 \$377. Approximately 20% of FAP caseload receives no form of public cash assistance (i.e., FIP, SDA, or SSI).	
		Funding Source(s): Federal 3,027,758,000 Restricted 4,710,000	
		Related Boilerplate Section(s): 607, 615, 619, 653, 654, 686, 801	

Möbile Food Bank program (transportation of donated food to pantries in the state). Family Food Box program (pre-package baskets to families facing emergencies), and Michigan Agric Surplus System (partnership with agricultural community to p surplus produce). Funding Source(s): GF/GP 2,04 Related Boilerplate Section(s): None Indigent burial 4,369,100 Payments to funeral homes, cemeteries, and other funeral s providers for the burial of indigent persons; limit of up to \$7t burial. Also provides up to \$84 bot funeral homes, cemeterie other funeral service providers for the disposition of an uncle body after the unclaimed body has first been offered to at lea university. Funding Source(s): TANF 30 GF/GP 4,06 Related Boilerplate Section(s): 613, 615 Related Boilerplate Section(s): 613, 615 Funding Formal Payments and the section of the section			
Indigent burial 4,369,100 Payments to funeral homes, cemeteries, and other funeral s providers for the burial of indigent persons; limit of up to \$76 burial. Also provides up to \$840 to funeral homes, cemeterie other funeral service providers for the disposition of an uncl body after the unclaimed body has first been offered to at lea university. Funding Source(s): TANF 30 GF/GP 4,06 Related Boilerplate Section(s): 613, 615 Low-income home energy assistance to eligible persons with housincome not more than 150% of federal poverty guidelines facin or energy shut-offs or past due notices provided either directly DHHS through the Michigan Energy Assistance Program (ME. contracts with other private or public entities; supports state heating tax credit for eligible individuals; supports weather programs to improve home energy efficiency; supports pradministration. Federal revenue from Low-income Home E Assistance Program (LIHEAP) block grant. Funding Source(s): Federal 174,95 Related Boilerplate Section(s): 610, 615, 645, 655, 686, 688 Michigan energy assistance program (MEAP) provides assistance program – 1.0 FIE position 50,000,000 Michigan Energy Assistance Program (MEAP) provides assistance to eligible persons with household income not mor 150% of federal poverty guidelines facing heat or energy shut-past due notices. Priority may be given to households with henergy costs or needs in relation to household income. Program also include services that enable eligible persons to move town sufficiency. Community Action Agencies (CAAs) may use funding to pay for deliverable heating fuel assistance for households that have been denied LHEAP benefits, but a houdes not have to be denied LIHEAP assistance to be eligil LIHEAP assistance. Services can be provided either the contracts with other private or public entities or directly the DHHS. Restricted revenue from monthly surcharge on each each can be provided.		2,045,000	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
Indigent burial 4,369,100 Payments to funeral homes, cemeteries, and other funeral s providers for the burial of indigent persons; limit of up to \$75 burial. Also provides up to \$840 to funeral homes, cemeterie other funeral service providers for the disposition of an uncl body after the unclaimed body has first been offered to at lea university. Funding Source(s): TANF 30 GF/GP 4,06 Related Boilerplate Section(s): 613, 615 Low-income home energy assistance to eligible persons with house income not more than 150% of federal poverty guidelines facin or energy shut-offs or past due notices provided either directly DHHS through the Michigan Energy Assistance Program (ME contracts with other private or public entities; supports weather programs to improve home energy efficiency; supports padministration. Federal revenue from Low-income Home E Assistance Program (LIHEAP) block grant. Funding Source(s): Federal 174,95 Related Boilerplate Section(s): 610, 615, 645, 655, 686, 688 Michigan energy assistance program (MEAP) provides easistance program - 1.0 Figure 1.0 50,000,000 Michigan Energy Assistance Program (MEAP) provides easistance to eligible persons with household income not more than 150% of federal poverty guidelines facing heat or energy shutpast due notices. Priority may be given to households with henergy costs or needs in relation to household income. Program also include services that enable eligible persons to move towar sufficiency. Community Action Agencies (CAAs) may use funding to pay for deliverable heating fuel assistance for households that have been denied LIHEAP benefits, but a household may be a payments or co-pays in order to become eligi LIHEAP assistance. Services can be provided either it contracts with other private or public entities or directly it DHHS. Restricted revenue from monthly surcharge on each e			Funding Source(s): GF/GP 2,045,000
providers for the burial of indigent persons; limit of up to \$7t burial. Also provides up to \$840 to funeral homes, cemeterie other funeral service providers for the disposition of an uncl body after the unclaimed body has first been offered to at lea university. Funding Source(s): TANF 30 GF/GP 4,06 Related Boilerplate Section(s): 613, 615 Low-income home energy assistance to eligible persons with house income not more than 150% of federal poverty guidelines facin or energy shut-offs or past due notices provided either directly DHHS through the Michigan Energy Assistance Program (ME. contracts with other private or public entities; supports state heating tax credit for eligible individuals; supports weather programs to improve home energy efficiency; supports pradministration. Federal revenue from Low-Income Home Assistance Program (LIHEAP) block grant. Funding Source(s): Federal 174,95 Related Boilerplate Section(s): 610, 615, 645, 655, 686, 688 Michigan energy assistance Program (MEAP) provides assistance program – 1.0 FTE position 50,000,000 Michigan Energy Assistance Program (MEAP) provides assistance to eligible persons with household income not mon 50% of federal poverty guidelines facing heat or energy shut-past due notices. Priority may be given to households with henergy costs or needs in relation to households income. Program also include services that enable eligible persons to move towar understance program (and programs of the pay for deliverable heating fuel assistance for enouseholds that have been denied LIHEAP assistance to be eligible MEAP funding. CAAs may also use funding to assist household paying missed payments or co-pays in order to become eligible LIHEAP assistance. Services can be provided either the contracts with other private or public entities or directly the DHHS. Restricted revenue from monthly surcharge on each e			Related Boilerplate Section(s): None
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Low-income home energy assistance to eligible persons with hous income not more than 150% of federal poverty guidelines facin or energy shut-offs or past due notices provided either directly DHHS through the Michigan Energy Assistance Program (ME contracts with other private or public entities; supports state heating tax credit for eligible individuals; supports weather programs to improve home energy efficiency; supports pradministration. Federal revenue from Low-Income Home E Assistance Program (LIHEAP) block grant. Funding Source(s): Federal 174,95 Related Boilerplate Section(s): 610, 615, 645, 655, 686, 688 Michigan energy assistance Program (MEAP) provides assistance program – 1.0 FTE position 50,000,000 Michigan Energy Assistance Program (MEAP) provides assistance to eligible persons with household income not mon 150% of federal poverty guidelines facing heat or energy shut-past due notices. Priority may be given to households with henergy costs or needs in relation to households with henergy costs or needs in relation to household income. Program also include services that enable eligible persons to move towar sufficiency. Community Action Agencies (CAAs) may use funding to pay for deliverable heating fuel assistance for a households that have been denied LIHEAP benefits, but a households that have been denied LIHEAP assistance to be eligible LIHEAP assistance. Services can be provided either it contracts with other private or public entities or directly the DHHS. Restricted revenue from monthly surcharge on each eligible LIHEAP assistance for entities or directly the DHHS. Restricted revenue from monthly surcharge on each eligible LIHEAP assistance for entities or directly the DHHS. Restricted revenue from monthly surcharge on each eligible LIHEAP assistance.			
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customer of participating electric providers.	assistance program – 1.0	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 self-sufficiency. 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 50,00			Funding Source(s): Restricted 50,000,000
Related Boilerplate Section(s): None			Related Boilerplate Section(s): None

Refugee assistance program – 2.0 FTE positions	3,054,200	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 Labor and Economic Opportunity.
		Funding Source(s): Federal 3,054,200
		Related Boilerplate Section(s): None
State disability assistance payments	4,029,500	Cash assistance program for disabled adults who are permanently or temporarily unable to work and without other means of support; average monthly grant about \$194; 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.
		Funding Source(s): Restricted 924,400 GF/GP 3,105,100
		Related Boilerplate Section(s): 601, 604, 605, 606, 607, 614, 615, 616, 686
State supplementation	57,799,300	State supplemental payments to persons receiving federal SSI 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 57,799,300
		Related Boilerplate Section(s): 605, 608, 609, 611, 614, 615
State supplementation administration	1,806,100	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
GROSS APPROPRIATION	\$3,399,338,000	Total of all applicable line item appropriations.
Social security act, temporary assistance for needy families	54,687,100	Total federal Temporary Assistance for Needy Families (TANF) block grant revenues.
Capped federal revenues	178,005,800	Total non-TANF capped federal grants revenue. Includes Refugee Assistance Program funding and Low-Income Home Energy Assistance Program (LIHEAP) funds.
Total other federal revenues	3,027,758,000	Total other revenue received from federal departments and agencies, not including TANF or capped. Includes Supplemental Nutrition Assistance Program (SNAP) funding.
Child support collections	9,841,900	Anticipated child support collections assigned to the state as a condition of FIP eligibility; collections offset state and federal FIP expenditures.
Supplemental security income recoveries	914,400	Retroactive SSI payments assigned to the state as a condition of FIP and SDA eligibility.

STATE GENERAL FUND/ GENERAL PURPOSE	\$73,130,800	surcharge up to \$1 and fund is limited to not more than \$50.0 million. 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
Public assistance recoupment revenue	5,000,000	Recoupments from prior public assistance recipients.

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	5,764.5	Full-time equated (FTE) positions in the state classified service.	
Administrative support workers – 221.0 FTE positions	\$13,900,000	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): IE TAI Fede GF/0	ral 5,507,500
		Related Boilerplate Section(s): None	
Adult services field staff – 520.0 FTE positions	60,908,000	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): Fede GF/0	- , -,
		Related Boilerplate Section(s): 289, 602, 620, 686	, 687, 851
Contractual services, supplies, and materials	17,595,000	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.	
		Volunteer Services and Reimbursement funding: A support locally-customized programs meeting comhelp from volunteers. Services include transportation customer and clerical assistance, donations fundraising. Funding includes small amounts for trainesources workers and the expenses of director of	nmunity needs with on reimbursement, processing, and ining for community
		Funding Source(s): IE TAI Fede GF/0	ral 6,279,800
		Related Boilerplate Section(s): 205, 220, 279	

238.0 FTE positions	28,104,400	Salary, fringe benefit, travel, contractual services, and supply costs of caseworkers in special projects using federal and donated funds. Caseworkers are located in hospitals, nursing homes, school-based Family Resource Centers, community mental health agencies, adult placement and independent living settings, and federal qualified health centers where the facility or employer expends their own funds to draw down federal funding to cover the costs.		
		Funding Source(s):	IDG TANF Federal Private Local	276,300 1,670,500 12,363,900 9,587,500 4,206,200
		Related Boilerplate Section(s): 850		
Elder Law of Michigan MiCAFE contract	350,000	Supports the Michigan Coordinated Access to Food for the Elderly (MiCAFE) Program administered by Elder Law of Michigan. MiCAFE provides outreach to eligible senior citizens to increase awareness o and participation in the Food Assistance Program (FAP).		
		Funding Source(s):	Federal GF/GP	175,000 175,000
		Related Boilerplate Section(s): 807		
Electronic benefit transfer (EBT)	7,989,000	Contractual payments with Fidelity Inform Electronic Benefit Transfer payments to (known in Michigan as a Bridge Card), in and answering client telephone inqui problems; public assistance program benefinclude Food Assistance Program (FA Program (FIP), and State Disability Assistance	public assista cluding payme ries on bala efits distributed AP), Family	nce recipients ent processing ances/reported d through EBT
		Funding Source(s):	TANF Federal GF/GP	1,016,000 2,129,100 4,843,900
		Funding Source(s): Related Boilerplate Section(s): 616, 672	Federal	2,129,100
Employment and training support services	4,219,100		Federal GF/GP air/purchases, nd family sup counseling) fo employed and through DHH	2,129,100 4,843,900 transportation oport services r DHHS public become self- S local offices
	4,219,100	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 a sufficient. Services are provided directly and through an interagency agreement w	Federal GF/GP air/purchases, nd family sup counseling) fo employed and through DHH	2,129,100 4,843,900 transportation oport services r DHHS public become self- S local offices
	4,219,100	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 wand Economic Opportunity.	Federal GF/GP air/purchases, nd family supcounseling) for employed and through DHH; ith the Depart TANF Federal	2,129,100 4,843,900 transportation oport services r DHHS public become self- S local offices ment of Labor 3,802,900 2,700
Field policy and administration – 119.0 FTE	4,219,100	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 wand Economic Opportunity. Funding Source(s):	Federal GF/GP air/purchases, nd family supcounseling) for mployed and through DHH with the Depart TANF Federal GF/GP	2,129,100 4,843,900 transportation oport services r DHHS public become self- S local offices ment of Labor 3,802,900 2,700 413,500
support services Field policy and		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 wand Economic Opportunity. Funding Source(s): Related Boilerplate Section(s): 825 Funds salary and wage, fringe benefit, trav	Federal GF/GP air/purchases, nd family supcounseling) for mployed and through DHH in the Depart TANF Federal GF/GP	2,129,100 4,843,900 transportation oport services r DHHS public become self- S local offices ment of Labor 3,802,900 2,700 413,500

Field staff travel	8,109,900	Payments to DTMB Vehicle and Travel usage, and reimbursement to DHHS field including mileage reimbursement, lodging,	d staff for ap	
		Funding Source(s):	TANF Federal GF/GP	3,204,400 2,517,800 2,387,700
		Related Boilerplate Section(s): 207		
Food assistance reinvestment – 16.0 FTE positions	10,985,000	Supports both penalty payments to the federally-required corrective action plan. Poyear higher than national average error over/under payments.	enalties are re	elated to multi-
		Funding Source(s):	GF/GP	10,985,000
		Related Boilerplate Section(s): 801		
Medical/psychiatric evaluations	1,120,100	Payment to medical service provider evaluation and diagnostic exams for ac exams for adult protective services cases.		
		Funding Source(s):	TANF Federal GF/GP	2,000 732,900 385,200
		Related Boilerplate Section(s): None		
Nutrition education – 2.0 FTE positions	33,055,900	Pass-through funds to Michigan State Michigan Physical Fitness Heath and Spo nutrition education programs aimed at food	orts Foundation	on to facilitate
		Funding Source(s):	Federal	33,055,900
		Related Boilerplate Section(s): 808		
Pathways to potential – 231.0 FTE positions	24,803,600	Funds salary and wage and fringe benefit of providing direct public assistance service partnership with, and directly at, local K-12	ces to clients	
		Pathways to Potential staff work in collabor local communities to identify and ame attendance and participation and self-suf expedited access to public assistance individuals and families.	eliorate barrie fficiency. Also	ers to school provides for
		Funding Source(s):	IDG TANF Federal GF/GP	357,100 2,731,500 11,047,700 10,667,300
		Related Boilerplate Section(s): 809		
Public assistance field staff – 4,417.5 FTE positions	471,827,100	Funds salary and wage and fringe benefit of offices, Field Operations Administration regional Business Service Centers. Ad staffing standards, communications, and I other field staff providing direct services include: Public Assistance Programs: Family determine eligibility and perform case Independence Program (FIP) cases; eligibility functions for cases not involving FIP (i.e., or energy assistance). [continued on next page]	(staff in Lar Iministration T. DHHS cas to clients fron independent worker dutie ility specialists	nsing), and 6 staff includes seworkers and n local offices ce specialists s for Family s handle these

STATE GENERAL FUND/ GENERAL PURPOSE	\$286,102,800	Unrestricted state revenue from taxes and other sources.
Private funds – gifts, bequests, and donations	9,587,500	Revenue received from private individuals and entities.
Local funds – donated funds	4,206,200	Local contributions toward donated funds positions.
Total other federal revenues	268,668,500	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, 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.
Capped federal revenues	53,662,900	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.
Social security act, temporary assistance for needy families	71,759,100	Total federal Temporary Assistance for Needy Families (TANF) block grant revenues.
IDG from department of education	7,757,100	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.
IDG from department of corrections	120,200	Payment per interdepartmental agreement with Department of Corrections to provide eligibility specialists to assist with Medicaid determination for inmates.
GROSS APPROPRIATION	\$701,864,300	Total of all applicable line item appropriations.
		Related Boilerplate Section(s): None
		Funding Source(s): GF/GP 325,000
SSI advocacy legal services grant	325,000	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.
		TANF 52,195,400 Federal 208,849,800 GF/GP 203,976,200 Related Boilerplate Section(s): 289, 602, 620, 686, 687, 688, 1757
Public assistance field staff – 4,417.5 FTE positions (continued)		<u>Children Services</u> : Includes juvenile delinquency, preventative services, and contract coordinators. <u>Administrative and Management Staff</u> : Supervisors/managers, clerical/administrative and other support staff including analysts, quality control auditors, and community resource coordinators. Funding Source(s): IDG 6,805,700

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	\$113,642,200	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 109,539,000 GF/GP 3,926,600	
		Related Boilerplate Section(s): 620, 890	
Retirement disability determination – 4.1 FTE positions	627,100		
		Funding Source(s): IDG 627,100	
		Related Boilerplate Section(s): 890	
GROSS APPROPRIATION	\$114,269,300	Total of all applicable line item appropriations.	
IDG from DTMB - office of retirement services	803,700	Payment per interdepartmental agreement with DTMB to provide retirement disability determination services for state employees, police, judges, and school teachers.	
Total other federal revenues	109,539,000	Includes Social Security Disability Insurance (SSDI) Federal Title II funding and Supplemental Security Income (SSI) Federal Title XVI funding.	
STATE GENERAL FUND/ GENERAL PURPOSE	\$3,926,600	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.

Full-time equated classified positions	115.0	Full-time equated (FTE) positions in the state classified service.
Behavioral health program administration – 84.0 FTE positions	\$47,291,100	Personnel costs and contractual services to support, assess, identify, develop, and monitor behavioral health programming and services including: Bureau of State Hospital and Behavioral Administrative Services, which includes Divisions of Resource Support and Customer Services, Program Development, Consultation, and Contracts, and the 5 state hospitals. Bureau of Community Based Services, which includes Divisions of Recovery Oriented Systems of Care, Quality Management and Planning, and Consumer Relations. Children and Adults with Autism Spectrum Disorders, which coordinates interagency efforts and grants related to Autism.
		Funding Source(s): TANF 179,800 Federal 31,807,800 Private 1,004,700 GF/GP 14,298,800 Related Boilerplate Section(s): 263, 913, 914, 927, 972, 979, 1062,
Community substance use disorder prevention, education, and treatment – 9.0 FTE positions	79,705,200	Funds primarily distributed to the 10 PIHPs for substance use disorder services including prevention services, services to chemically dependent pregnant women and injecting drug users, children's access to tobacco, and recovery support. Federal funds from Substance Abuse Prevention and Treatment Block Grant. Restricted funds from liquor license fees statutorily targeted for prevention, rehabilitation, care, and treatment.
		Funding Source(s): Federal 61,251,800 Restricted 2,284,200 GF/GP 16,169,200
		Related Boilerplate Section(s): 907, 910, 912, 915, 926, 977, 978, 997
Family support subsidy	11,832,400	Provides \$229.31 average monthly payment to an estimated 4,300 income-eligible families with a child under age 18 living at home who is severely mentally impaired, severely multiply impaired, or autistic.
		Funding Source(s): TANF 11,832,400
		Related Boilerplate Section(s): 996

Federal and other special projects	2,535,600	Contractual services, grants, and personnel costs for various federal grants, as they become available. Recent grants have included Substance Abuse and Mental Health Services Administration (SAMHSA) Partnerships for Success, SAMSHA Safe Schools, and Federal Drug Administration (FDA) Tobacco Inspections Grant.
		Funding Source(s): Federal 2,535,600
		Related Boilerplate Section(s): None
Gambling addiction – 1.0 FTE position	5,514,300	Education, prevention, research, treatment, and evaluation services related to pathological gambling addictions; includes toll-free compulsive gambler help-line, media campaign, and a liaison to the Lottery Bureau.
		Funding Source(s): Restricted 5,514,300
		Related Boilerplate Section(s): None
Mental health diversion council	3,850,000	Grants for jail diversion pilot programs with an aim to address the number of mentally ill and developmentally disabled inmates in jails and prisons.
		Funding Source(s): GF/GP 3,850,000
		Related Boilerplate Section(s): 995
Office of recipient rights – 21.0 FTE positions	2,856,600	Personnel costs for the Office of Recipient Rights required under the Mental Health Code to monitor program implementation and effectiveness, to provide training on the rights of individuals receiving mental health services, and to receive and investigate complaints of violations. Also oversees Office of Recipient Rights within each CMHSP and psychiatric hospital.
		Funding Source(s): GF/GP 2,856,600
		Related Boilerplate Section(s): None
Opioid response activities	67,155,600	Funds primarily distributed to the 10 PIHPs for opioid use disorder services including prevention services, and recovery support. Federal funds from State Opioid Response Grant.
		Funding Source(s): Federal 67,155,600
		Related Boilerplate Section(s): none
Protection and advocacy services support	194,400	Agency designated by the Governor under section 931 of the Mental Health Code, MCL 330.1931, to pursue legal, administrative, and other appropriate remedies, to protect the rights of individuals with mental illness and developmental disabilities, and to investigate allegations of abuse or neglect. Current designated agency is Michigan Protection and Advocacy Service.
		Funding Source(s): GF/GP 194,400
		Related Boilerplate Section(s): None
GROSS APPROPRIATION	\$220,935,200	Total of all applicable line item appropriations.
Social security act, temporary assistance for needy families	12,012,200	Total federal Temporary Assistance for Needy Families (TANF) block grant revenues; supports family support subsidy line item.
		Includes Title XIX Social Security Act Medicaid funds, Substance

STATE GENERAL FUND/ GENERAL PURPOSE	\$37,369,000	Unrestricted state revenue from taxes and other sources.
Total other state restricted revenues	7,798,500	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. And liquor license fees statutorily targeted substance use treatment
Total private revenues	1,004,700	Private funds from the Flinn Family Foundation for behavioral health services for foster youth and from the BCBS Health Endowment Fund, which supports the Health Homes program.

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 non-enhanced Federal Medical Assistance Percentage (FMAP) for Michigan in FY 2021-22 is 65.48%, meaning that the state funds 35.92% of Medicaid service costs. While there is a federal Public Health Emergency declaration, FMAP is increased for 6.2 basis points. 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	15.0	Full-time equated (FTE) positions in the	e state classifie	ed service.
Autism services	\$339,141,600	Medicaid capitated per member per mo to support autism spectrum disorder tre children up to 21 years of age. So behavioral observation and direction, Services may be provided either in-hor	eatments for Mervices included and behaviora	edicaid eligible es evaluation, al intervention.
		Funding Source(s):	Federal GF/GP	228,023,000 111,118,600
		Related Boilerplate Section(s): 902, 90	04, 924, 959, 9	060
Behavioral health community supports and services	13,488,200	Funding to expand assertive commun assertive community treatment (FACT) psychiatric residential treatment fac reducing wait lists at the state-operat centers.	, crisis stabiliza ilities with th	ation units, and e purpose of
		Funding Source(s):	Federal GF/GP	8,349,700 5,138,500
		Related Boilerplate Section(s): 1010		
Certified community behavioral health clinic	25,597,300	Funding to establish 14 integrated be clinics through a federal CMS demonst		
demonstration		Funding Source(s):	Federal GF/GP	21,097,300 4,500,000
		Related Boilerplate Section(s): None		
Civil service charges	297,500	Pays civil service charges authorized b	y the State Co	nstitution.
		Funding Source(s):	GF/GP	297,500
		Related Boilerplate Section(s): None		

Community mental health non-Medicaid services	125,578,200	State GF/GP funds to the 46 CMHSP are not covered by Medicaid or who benefits under Medicaid or Healthy Micinclude: crisis stabilization and responsand diagnosis; development of an planning, coordination, and monitoringaining access to services; specializ which includes therapeutic clinical services; mental health advocacy; and	receive services that are not higan Plan. Services provided se; identification, assessment, Individual Plan of Service, ag to assist the individual in zed mental health treatment interaction; recipient rights
		The Mental Health Code mandates (individuals with serious mental disturbance, or developmental disability or emergency situations.	illness, serious emotional
		Funding Source(s):	GF/GP 125,578,200
		Related Boilerplate Section(s): 902, 9 1013	04, 911, 940, 942, 998, 1004
Federal mental health block grant – 5.0 FTE positions	20,595,700	Contracts and grants primarily to CMH improve community-based services for illness and children with serious e supports personnel costs and contratraining, monitoring, and evaluating se	or adults with serious menta motional disturbances. Also actual services tasked with
		Funding Source(s):	Federal 20,595,700
		Related Boilerplate Section(s): 1015	
Health homes – 1.0 FTE position	33,005,400	Medicaid payments to CMHSPs designated homes demonstration projects to seek and behavioral health care for Medical more serious and persistent mental rates of hospital inpatient and emergen support clinical staffing tasked management. Federal match rate is 9 funding is from a participating CMI medical marihuana regulatory reverprevention, rehabilitation, care, and tree	better coordination of physica aid beneficiaries with one or health condition(s) with high cy department use. Payments with comprehensive care 0% for first 8 quarters. Local HSP. Restricted funds from the statutorily targeted for
		Funding Source(s):	Federal 29,524,900 Local 246,900 Restricted 677,300 GF/GP 2,556,300
		Related Boilerplate Section(s): 902, 9	
		resident Donorphate Coolion(3). 302, 30	0 1, 000, 1000

Healthy Michigan plan behavioral health

603,614,300 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 543,290,400

Restricted 6,891,900 GF/GP 53,432,000

Related Boilerplate Section(s): 252, 902, 904, 910, 911, 918, 920, 964, 965, 970, 974, 1003, 1004, 1008, 1011, 1151, 1764

Medicaid mental health services

3,124,618,700

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). And 2 children home- and community-based waivers for children with either ID/DD and serious emotional disturbance (SED).

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

> Funding Source(s): Federal 2,109,337,600

> > 15.038.700 Local Restricted 36,793,600 GF/GP 963.448.800

Related Boilerplate Section(s): 231, 902, 904, 911, 918, 920, 927, 928, 964, 970, 974, 1003, 1004, 1008, 1011, 1702, 1764

Medicaid substance use disorder services

83,067,100

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 hospitalbased detoxification services are not provided through these capitated rates but are provided through Medicaid medical services.

> Funding Source(s): Federal 55,691,300

GF/GP 27,375,800

Related Boilerplate Section(s): 902, 904, 910, 920, 964, 965, 1003, 1004, 1008, 1011, 1151, 1764

STATE GENERAL FUND/ GENERAL PURPOSE	\$1,315,110,100	Unrestricted state revenue from taxes and other sources.
Total other state restricted revenues	44,362,800	Includes hospital quality assurance assessment program (QAAP) revenue, Insurance Provider Assessment revenue.
Total local revenues	15,285,600	Local revenues from CMHSPs.
Total other federal revenues	3,026,884,100	Includes Title XIX Social Security Act Medicaid funds, Title XXI Social Security Act Children's Health Insurance Program (CHIP) funds, and Community Mental Health Services Block Grant.
Capped federal revenues	184,500	Total capped non-TANF federal block grant revenues; supports Multicultural Integration line item.
Social security act, temporary assistance for needy families	421,000	Total federal Temporary Assistance for Needy Families (TANF) block grant revenues; supports Multicultural Integration line item.
GROSS APPROPRIATION	\$4,402,248,100	Total of all applicable line item appropriations.
		Related Boilerplate Section(s): 906, 910
		Funding Source(s): GF/GP 2,018,800
State disability assistance program substance use disorder services	2,018,800	Payments to the 10 PIHPs for per diem room and board payments for eligible needy individuals who reside in substance use disorder residential facilities.
		Related Boilerplate Section(s): None
		Funding Source(s): Federal 10,464,200 GF/GP 3,476,200
Nursing home PAS/ARR – OBRA – 7.0 FTE positions	13,940,400	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.
		GF/GP 16,169,400 Related Boilerplate Section(s): 1014, 1975
		Funding Source(s): TANF 421,000 Federal 694,500
Multicultural integration funding	17,284,900	Contractual payments to contractors or subcontractors that serve multicultural populations and groups. Contractors include Arab-Chaldean Council, Arab Community Center for Economic and Social 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. Note: additional one-time funding provided under Sec 122.

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	2,453.6	Full-time equated (FTE) positions in the state classified service.
Caro Regional Mental Health Center-psychiatric hospital – adult – 542.3	\$62,842,000	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.
FTE positions 145.0 average population		Funding Source(s): Federal 3,141,000 Local 3,795,600 Restricted 3,122,700 GF/GP 52,782,700
		Related Boilerplate Section(s): 1055, 1056, 1058, 1059, 1060, 1061
Center for forensic psychiatry – 627.1 FTE positions 240.0 average population	97,784,900	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 4,224,700 Local 7,197,500 Restricted 2,054,900 GF/GP 84,307,800
		Related Boilerplate Section(s): 1055, 1056, 1058, 1059, 1060
Developmental disabilities council and projects – 10.0 FTE positions	3,136,100	First established in 1984, 21-member Michigan Developmental Disabilities Council appointed by the Governor to advocate for and conduct projects on behalf of individuals with developmental disabilities, and develop and implement the State Developmental Disabilities Plan; authorized under Executive Order 2006-12 and required by federal Developmental Disabilities Assistance and Bill of Rights Act of 2000 (Public Law 106-402); supported by ongoing federal grants and 25% matching funds at local level.
		Funding Source(s): Federal 3,136,100
		Related Boilerplate Section(s): None
Gifts and bequests for patient living and treatment environment	1,000,000	Authority for DHHS to accept gifts and bequests for specific enhancements (consistent with donor stipulation) for residents of state-operated facilities.
		Funding Source(s): Private 1,000,000
		Related Boilerplate Section(s): 1052

Hawthorn Center – psychiatric hospital – children and adolescents –	36,963,900	FTEs, contractual services, supplies, m utilities, travel and other costs for state in Northville, Michigan for children with r	-operated psych	
292.0 FTE positions 55.0 average population		Funding Source(s):	Federal Local Restricted	25,308,000 1,144,700 4,015,500
			GF/GP	6,495,700
		Related Boilerplate Section(s): 1055, 1	056, 1058, 1059	, 1060, 1063
IDEA, federal special education	120,000	Supplements state psychiatric hospital sindividuals with mental illness; funds computer skills, daily living skills, and acannual counts of students aged 5 through	directed towa ademics; allocat	urd upgrading
		Funding Source(s):	Federal	120,000
		Related Boilerplate Section(s): None		
Kalamazoo Psychiatric Hospital – adult – 564.8 FTE positions 170.0 average population	74,110,700	FTEs, contractual services, supplies, m utilities, travel, and other costs for state in Kalamazoo, Michigan for adults with with developmental disabilities.	-operated psych	niatric hospita
		Funding Source(s):	Federal Local Restricted GF/GP	5,773,000 5,961,200 3,011,300 59,365,200
		Related Boilerplate Section(s): 1055, 1		
Purchase of medical services for residents of hospitals and centers	445,600	Special, emergency, and other medical- site for residents of state hospitals and ability to pay.		
		Funding Source(s):	GF/GP	445,600
		Related Boilerplate Section(s): None		
Revenue recapture	750,100	Project generates revenue from third inactive cases for DHHS costs and cor retroactive collections and improving or management functions.	ntractual fees as	ssociated with
		Funding Source(s):	Federal Local Restricted	375,000 100 375,000
		Related Boilerplate Section(s): 1051		
Special maintenance	924,600	Maintenance projects at state hospital administrative, housekeeping, and ma maintenance and operation of leased pr	intenance equip	
		Funding Source(s):	Federal	300,000
		• , ,	Restricted GF/GP	332,500 292.100
		Related Boilerplate Section(s): None	Restricted GF/GP	332,500 292,100

Local revenues 23,134, Total private revenues 1,000,	Includes Title XIX of the Social Security Act Medicaid fund School Lunch Program, and Individuals with Disabilities Ec (IDEA) special education funds. County match revenue and local school aid funds. Patient gifts and bequests. First and third party reimbursement and lease/rental revenue	ducation Act
GROSS APPROPRIATION \$340,155, Total other federal revenues 45,892, Local revenues 23,134,	192,600 Includes Title XIX of the Social Security Act Medicaid fund School Lunch Program, and Individuals with Disabilities Ec (IDEA) special education funds. 34,000 County match revenue and local school aid funds.	
GROSS APPROPRIATION \$340,155, Total other federal 45,892, revenues	192,600 Includes Title XIX of the Social Security Act Medicaid fund School Lunch Program, and Individuals with Disabilities Ec (IDEA) special education funds.	
GROSS APPROPRIATION \$340,155, Total other federal 45,892,	92,600 Includes Title XIX of the Social Security Act Medicaid fund School Lunch Program, and Individuals with Disabilities Ed	
	and the same of th	
160.0 average population	55,600 Total of all applicable line item appropriations.	
160.0 average population	Related Boilerplate Section(s): 1055, 1056, 1058, 1059, 1	1060
160.0 average population	Local Restricted GF/GP	5,034,900 2,214,000 51,314,000
160 0 average population	Funding Source(s): Federal	3,514,800
Walter P. Reuther 62,077, Psychiatric Hospital – adult – 417.4 FTE positions	in Westland, Michigan for adults with mental illness.	gs, fuel and atric hospital

SECTION 113: HEALTH AND HUMAN SERVICES POLICY AND INITIATIVES

This appropriation unit provides funding for health policy and planning 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, and bone marrow donor and blood bank programs.

Full-time equated classified positions	43.7	Full-time equated (FTE) positions in the state classified service.
Bone marrow donor and blood bank programs	\$750,000	Grants to the Versiti Blood Center for the Be The Match marrow donor registry program for donor recruitment tissue typing and collection costs, and for blood bank program collection of fetal umbilical cord blood and stem cells for transplant.
		Funding Source(s): GF/GP 750,000
		Related Boilerplate Section(s): 1146, 1147
Certificate of need program administration – 11.8 FTE positions	2,813,300	FTEs, related costs, travel, and contractual services to administer health facility Certificate of Need (CON) regulatory program to balance cost, quality, and access issues for 14 statutorily defined services and equipment, and ensure that only needed health services and facilities are developed, as provided under Part 222 of the Public Health Code. Line item also supports 11-member Certificate of Need Commission.
		Funding Source(s): IDG 117,700 Restricted 2,695,600
		Related Boilerplate Section(s): None
Michigan essential health provider	3,519,600	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. Program supported 233 providers in FY 2020-21. 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.
		Funding Source(s): Federal 1,236,300 Private 855,000 GF/GP 1,428,300
		Related Boilerplate Section(s): None
Minority health grants and contracts – 3.0 FTE positions	1,133,400	FTEs, related costs and contracts to improve health status of racial and ethnic minority populations and reduce health disparities: improve race/ethnicity data collection and data access, strengthen partnerships to improve health equity and health literacy, improve social determinants of health, ensure access to quality health care, education and outreach, build organization capacity to adopt enhanced cultural and linguistic standards; to serve African American, Hispanic/Latino American, Arab/Chaldean American, American Indian/Native American, and Asian American, Native Hawaiian and Pacific Islander American populations.
		Funding Source(s): Federal 612,600 Restricted 222,400
		GF/GP 298,400

Nurse education and research program – 3.0 FTE positions	811,000	FTEs, related costs and contracts to promote safe patient care in all nursing practice environments, advance the safe practice of the nursing profession, and promote an adequate supply of high-quality direct care nurses, nursing faculty, and nursing education programs. Note: additional funding provided under Sec. 122 Nurse Practitioner Expansion Program line item.
		Funding Source(s): IDG 811,000
		Related Boilerplate Section(s): 1969
Policy and planning administration – 21.9 FTE positions – PARTIALLY VETOED	5,528,100 5,478,100	
		<u>Post-enrollment Note</u> : Governor vetoed Sec. 243 and related funding of \$50,000 GF/GP for certain provider notification.
		Funding Source(s): IDG 2,400 TANF 280,200 Federal 2,401,800 Restricted 302,800 GF/GP 2,540,900 2,490,900
		Related Boilerplate Section(s): 243, 1144, 1145, 1148, 1151, 1152
Primary care services – 3.0 FTE positions	3,791,800	FTEs, related costs, contracts, and grants to agencies for: primary health care, access, outreach, and health education services in medically underserved and health professional shortage areas; funds for rural primary health care services; \$400,000 GF/GP supports grants to free health clinics and federally qualified health centers (FQHCs); and \$675,000 GF/GP funding for island primary health care access and services on Beaver Island, Mackinac Island, Drummond Island, and Bois Blanc Island. Note: additional funding is provided under Sec. 122 Free Health Clinics, and Primary Care and Wellness Services line items.
		Funding Source(s): Federal 315,700 Private 10,000 GF/GP 3,466,100
		Related Boilerplate Section(s): 1140, 1142, 1143, 1970, 1977
Rural health services – 1.0 FTE position	1,555,500	FTE costs and contracts primarily with Michigan Center for Rural Health at Michigan State University to coordinate, plan, and advocate for improved health care for residents in rural areas through health network and hospital systems, assist small rural hospitals with improvements to comply with federal privacy and prospective pay system guidelines, implement Medicare rural hospital flexibility program, and provide technical assistance on rural health issues.
		Funding Source(s): Federal 1,380,500 GF/GP 175,000

Related Boilerplate Section(s): None

GROSS APPROPRIATION \$19,902,700 Total of all applicable line item appropriations. \$19,852,700		Total of all applicable line item appropriations.	
IDG from department of education	2,400	Grant from Department of Education for Child Development and Car (CDC) program, related to pathways to potential program, in Polic and Planning Administration line item. CDC program transferred from former DHS to Department of Education in 2011.	
IDG from department of licensing and regulatory affairs	811,000	Grant from Department of Licensing and Regulatory Affairs for costs related to the Nurse Education and Research Program line item; funds are from the state restricted Nurse Professional Fund.	
IDG from department of treasury, Michigan finance authority	117,700	Grant from Department of Treasury, Michigan Finance Authority for costs related to certificate of need program.	
Social security act, temporary assistance for needy families	280,200	Total federal Temporary Assistance for Needy Families (TANF) block grant revenues; supports Policy and Planning Administration line item.	
Capped federal revenues	120,300	Total non-TANF revenue from certain federal grants awarded for a capped amount; supports Policy and Planning Administration line item.	
Total other federal revenues	5,826,600	Includes • Medicaid Title XIX funds • Medicare rural hospital flexibilit program grant • minority health state partnership grant • preventiv health and health services block grant • primary care grant • randor moment sampling cost revenue • small rural hospital improvement program • state loan repayment program • state office of rural healt grant.	
Total private revenues	865,000	Revenue from: health care employers or other entities making load repayments on behalf of providers serving in underserved area related to the Michigan Essential Health Provider program; Universit of Wisconsin primary care grant; and private gifts.	
Total other state restricted revenues	3,220,800	Includes certificate of need fee revenue, fee revenue collected for newborn screening services, Michigan Health Initiative Fund revenue from the software tax (1987 PA 258), and Healthy Michigan Fund revenue from cigarette tax (about 3.75% of gross collections).	
STATE GENERAL FUND/ GENERAL PURPOSE	\$ 8,658,700 \$8,608,700	Unrestricted state revenue from taxes and other sources.	

SECTION 114: EPIDEMIOLOGY, EMERGENCY MEDICAL SERVICES, **AND LABORATORY**

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.

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

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

Bioterrorism preparedness - 53.0 FTE positions

\$30,675,400 FTEs, related costs, and contracts with local health departments, tribal governments, medical control authorities/regional healthcare coalitions, and other agencies for preparedness and emergency response by the public health system, cities, and hospitals to bioterrorism, pandemic influenza, and other public health emergencies and disasters. Public health system preparedness priorities include: medical and pharmaceutical supply stockpile planning, disease and epidemiology surveillance, biological and chemical laboratory capacity, training, communications, Health Alert Network emergency notification system, education, volunteer registry, mass dispensing and vaccination, and dissemination of risk and health information. Hospital and healthcare system preparedness priorities include: pharmaceutical and vaccine supply, guarantine and decontamination facilities, regional capacity and surge planning, and communications.

Funding Source(s):

Federal GF/GP

29.301.200 1,374,200

Related Boilerplate Section(s): None

Childhood lead program -4.5 FTE positions

2.322.700

FTEs, related costs, and contracts for services to prevent lead poisoning in at-risk children caused by hazards in the home (program is also known as Childhood Lead Poisoning Prevention Program -CLPPP), including: screening for abnormal blood lead levels, lead hazard identification, outreach, public and provider education, technical assistance to providers and local health departments, lead safe housing registry, childhood and healthy homes lead poisoning surveillance, analysis, and response systems, and case management and surveillance of children with elevated blood lead levels; primarily in Detroit and high-incidence counties. Also supports follow-up care for children identified with housing-related disease and injury health issues. Note: additional funding is provided under Sec. 116 Drinking Water Declaration of Emergency line item, and under Sec. 122 Lead Poisoning Prevention Fund line item.

Funding Source(s):

Federal GF/GP 1.697.000

625,700

Related Boilerplate Section(s): 1180, 1182, 1238, 1306, 1951

Emergency medical services program – 20.0 FTE positions 9,954,900

FTEs, related costs, grants, and contracts for the emergency medical services (EMS) and statewide trauma system programs. EMS functions include licensure of over 800 agencies (medical first responder and life support operations/agencies), 3,800 life support vehicles, and 28,800 personnel, continuing education for personnel, agency and vehicle inspections, complaint investigations, and approval of 59 local medical control authorities statewide which provide community based pre-hospital emergency care oversight. Supports statewide trauma system development, operationalization, and registry, program of rural access to emergency devices, and family emergency readiness public events in Livingston County. New funding for stroke and heart attack (STEMI) system of care integrated within EMS and statewide trauma systems. Note: additional funding provided under Sec 122 Injury Control Intervention – Traumatic Brain Injury line item.

Post-enrollment Note: Governor states Sec. 1183 unenforceable.

Funding Source(s): Federal 1,098,900

Restricted 4,323,600 GF/GP 4,532,400

Related Boilerplate Section(s): 1183, 1184, 1185, 1186, 1971

Epidemiology administration – 82.5 FTE positions

25,445,000 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,

<u>Surveillance and Epidemiological Analysis</u>: 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. <u>Asthma Prevention and Control</u>: Promote health systems and health services strategies for improved asthma care in high-risk counties.

Body Art Facility Licensing.

including:

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

<u>Emerging and Unknown Infectious Disease</u>: Detection, tracking, and response.

Environmental Health: administration, analysis, and response

<u>Fish Consumption Advisories</u>: Including eat safe fish and game project, and reassessment of fish toxins in 9 areas of the state. <u>Genomics and Lifecourse</u> evaluation and public health policy

<u>Laboratory Testing</u>: 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, PFAS health studies, and others.

<u>Toxicology and Response</u>: Epidemiological investigation, public health assessments at environmental contamination sites.

[continued on next page]

Epidemiology administration - 82.5 FTE positions (continued)

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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.

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

Funding Source(s): Federal 13,846,700

Private 264.800 Restricted 686,300 GF/GP 10,647,200

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

Healthy homes program -21.0 FTE positions

32,745,400

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; public health initiatives related to revised lead and copper rules for communities with lead exceedances, and program evaluation. \$18.6 million of federal funds and \$6.9 million of additional state match 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 beginning in FY 2016-17; current CHIP match is 75.84% federal/24.16% state. Note: additional funding is provided under Sec. 116 Drinking Water Declaration of Emergency line item, and Sec. 122 Lead Poisoning Prevention Fund line item.

Post-enrollment Note: Governor states Sec. 1305 unenforceable.

Funding Source(s): 19.999.500 Federal Private 77,800

Restricted 723,700 GF/GP 11,944,400

Related Boilerplate Section(s): 1182, 1238, 1305, 1306, 1951

Laboratory services – 102.0 FTE positions	28,148,900	FTEs, supplies, travel, equipment, computer, and contracts to provious testing services to various state and federal agencies, local public health departments, teaching institutions, and hospitals are physicians statewide. Laboratory services include: tests to identify and monitor infectious disease agents; collect epidemiological are analytical laboratory data to assess human health risks; tests of blood samples of children screened for lead and newborn infants screened for genetic handicapping conditions; tests for environmental and public health risks such as lead in soil and toxins in fish and other food the may be consumed; tests to detect biologic and chemical terrorical agents; tests for the occurrence of drug-resistant staph infections collaboration with epidemiology staff. Also supports biowate continuous bioterrorism air monitoring coordination, and targets biomonitoring assessment and investigation. Funding supports regional laboratories and multiple local public health laboratorie Note: additional funding for laboratory testing and analysis is also included in the PFAS and Environmental Contamination Responsi
		Funding Source(s): IDG 1,797,80 Federal 6,918,70 Restricted 12,804,80 GF/GP 6,627,60
		Related Boilerplate Section(s): None
Newborn screening follow- up and treatment services – 10.5 FTE positions	7,897,800	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 are medical management when a newborn child tests positive; earn hearing screening and detection program; genetic disease program for adults and children; supports Newborn Screening Quality Assurance Advisory Committee. Initial newborn screening and testing feet \$144.50 effective October 1, 2021.
		<u>Post-enrollment Note</u> : Governor states Sec. 218 unenforceable.
		Funding Source(s): Restricted 7,897,80
		Related Boilerplate Section(s): 218
PFAS and environmental contamination response – 48.0 FTE positions	20,276,600	FTEs, related costs, and contracts for public health response contamination from perfluoroalkyl and polyfluoroalkyl substance (PFAS) in drinking water and the environment. Supports PFA laboratory testing and analysis, environmental health toxicolog chemical analysis, outreach and response, local health departme services including provision of alternative water sources or water filters, and environmental and well sampling for testing. Not additional funding to address PFAS is provided in Sec. 115 Local Health Services line item.

GF/GP

20,276,600

Health Services line item.

Funding Source(s):

Related Boilerplate Section(s): 1231, 1232, 1233, 1239

Vital records and health statistics - 75.4 FTE positions

11,244,500 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.

> Funding Source(s): 4.402.800 Federal

Restricted 4,670,000 2,171,700 GF/GP

		Related Boilerplate Section(s): None
GROSS APPROPRIATION	\$168,711,200	Total of all applicable line item appropriations.
IDG from department of environment, Great Lakes, and energy	1,797,800	Grants 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 bioterrorism event.
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	77,183,700	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 • biomonitoring (statewide and targeted) • biosense 2.0 grant • biowatch program grant • birth defects surveillance CDC grant • breast cancer genomics CDC grant • cancer registry grant • child lead poisoning

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 • EMS for children partnership grant • environmental public health and emergency response - building resilience against climate effects (climate and health adaptation plan) grant • enhancing disease detection in newborns - building capacity in public health laboratories CDC grant • environmental public health and emergency response - Michigan tracking network grant • epidemiology and laboratory capacity CDC grant • food emergency response network grant (FERN) • genetic services HRSA grant • genotyping grant • health risk assessment CDC grant • hospital preparedness program and public health emergency preparedness aligned cooperative agreement grant • immunization grant • laboratory flexible funding model FDA 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 • PFAS health studies • pregnancy risk assessment monitoring system (PRAMS) CDC grant • preventive health and health services block grant • rural access to emergency devices grant • social security administration birth and death enumeration grants • stroke registry and quality improvement grant • tuberculosis control grant • vital statistics cooperative program grant.

STATE GENERAL FUND/ GENERAL PURPOSE	\$58,199,800	Unrestricted state revenue from taxes and other sources.
Total other state restricted revenues	31,106,200	Fee revenue collected for: body art facility licensure, emergency medical services licensure, laboratory services, lead abatement professional worker certification, newborn screening services, vital records services fees and data agreements, and surveillance data file research requests; Crime Victim's Rights Fund revenue from fees assessed against convicted criminal defendants, and Michigan Health Initiative Fund revenue from software tax (1987 PA 258).
Total private revenues	342,600	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.

SECTION 115: 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

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

AIDS prevention, testing, and care programs – 59.5 FTE positions

\$108,200,100

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; coordination of statewide prevention and care planning group; Medicaid eligibility support; and HIV/AIDS surveillance, HIV behavioral surveillance, and HIV medical monitoring. 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, and STD monitoring. Rebate revenue from private pharmaceutical manufacturers supports drug assistance program.

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

Funding Source(s): Federal 30,432,600

Private 72,703,900 Restricted 4,933,600 GF/GP 130,000

Related Boilerplate Section(s): 218

Cancer prevention and FTEs, related costs, and contracts for cancer prevention and control 15,813,900 including primary, secondary, and tertiary prevention strategies and control program - 18.0 FTE positions 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 13,071,300 Private 700,000 GF/GP 2,042,600 Related Boilerplate Section(s): None Chronic disease control 8,222,900 FTEs, related costs, and contracts for the following: administration and and health promotion infrastructure for health promotion and chronic disease prevention administration - 19.4 FTE programs: chronic disease surveillance and information system positions 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 communitybased 4x4 wellness program to address obesity and promote healthy lifestyles, and rare disease review council. Note: additional funding is provided under Sec. 122 Healthy Communities Grant line item. 6,016,400 Funding Source(s): Federal 751.500 Restricted GF/GP 1,455,000 Related Boilerplate Section(s): 1240, 1956 Diabetes and kidney FTEs, related costs, and contracts for diabetes and chronic kidney 4.115.900 program - 8.0 FTE positions

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 2,796,300

Restricted 210,600 GF/GP 1,109,000

Related Boilerplate Section(s): None

state/local cost sharing for projected allowable expenditures for following required local public health services immunizatinfectious disease control, sexually transmitted disease and control and prevention, hearing and vision screening for children, protection in cooperation with Department of Agriculture and F Development, and public water and private groundwater supports on-site sewage management in cooperation with Department Environment, Great Lakes, and Energy. Current funding distrib formula implemented beginning October 1, 2019. **Post-enrollment Note**: Governor states Sec. 218 and Sec. 1222(4 unenforceable.** Funding Source(s): Local 5,150, GF/CP 46,269, Related Boilerplate Section(s): 218, 1221, 1222, 1234 Implementation of 1993 PA 133, MCL 333.17015 **Reliated Boilerplate Section(s): 218, 1221, 1222, 1234 Implementation of 1993 PA 133, MCL 333.17015 **Reliated Boilerplate Section(s): 218, 1221, 1222, 1234 Implementation of 1993 PA 133, MCL 333.17015 **Reliated Boilerplate Section(s): 218, 1221, 1222, 1234 Implementation of 1993 PA 133, MCL 333.17015 **Reliated Boilerplate Section(s): 1220 **Reliated Boilerplate Section(s): 1231, 1232, 1232 **Reliated Boilerplate Section(s): 1231, 1232, 1233 **Poublic health theats, gun violence preventicisease, improve he outcomes, and achieve statutory Public Health Code obligate Prevention projects funded include asthma, safe sleep, disable merging health threats, gun violence prevention, food accordination projects funded include asthma, safe sleep, disable merging health threats, gun violence prevention, food accordination projects funded include asthma, safe sleep, disable merging health threats, gun violence prevention, food accordination projects funded include asthma, safe sleep, disable merging health threats, gun violence prevention, food acc			
runenforceable. Funding Source(s): Local 5,150. GF/GP 46,269. Related Boilerplate Section(s): 218, 1221, 1222, 1234 Implementation of 1993 PA 133, MCL 333.17015 Reimbursement to local health departments for costs incurred informational materials provided in accordance with the Infor Consent Law, Public Act 133 of 1993, to a woman seeking an abor Funding Source(s): GF/GP 20, Related Boilerplate Section(s): 1220 Local health services – 3.3 8,707,600 FTEs, related costs, and contracts; includes \$4.75 million of funding for enhanced support to local public health departmen respond to emerging public health departments, including P contamination response. Line item also supports coordination of programs with local public health departments, and seep, diable emerging public health departments, and seep, diable emerging health threats, gun violence prevention, food acces vulnerable communities, chronic disease integration, diable emerging health threats, gun violence prevention, food acces vulnerable communities, chronic disease integration, diable reduction in Native American populations, and reducing r disparities in health. Funding Source(s): Federal 3,901, GF/GP 4,806, Related Boilerplate Section(s): 1231, 1232, 1233 Medicaid outreach cost reimbursement to local health departments for costs incured reimbursement funds are available as eligible costs are incurred. Funding Source(s): Federal 12,500, Related Boilerplate Section(s): None Public health administration – 9.0 FTE positions Public health programs, including deputy director, so administrators, and chief medical officer.		51,419,300	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. Current funding distribution
Implementation of 1993 PA 133, MCL 333.17015 20,000 Reimbursement to local health departments for costs incurred informational materials provided in accordance with the Infor Consent Law, Public Act 133 of 1993, to a woman seeking an about Funding Source(s): GF/GP 20, Related Boilerplate Section(s): 1220 Local health services – 3.3 FTE positions 8,707,600 FTEs, related costs, and contracts; includes \$4.75 million GF funding for enhanced support to local public health department respond to emerging public health sissues and threats, including Procontamination response. Line item also supports coordination of a programs with local public health departments, and local public health departments in order to prevent disease, improve houtcomes, and achieve statutory Public Health Code obligat Prevention projects funded include asthma, safe sleep, diabrenging health threats, gun violence prevention, food access vulnerable communities, chronic disease integration, diabreduction in Native American populations, and reducing reduction in Native American populations, and reducing reduction in Native American populations, and reducing related Boilerplate Section(s): 1231, 1232, 1233 Medicaid outreach cost reimbursement to local health departments for costs incurred. Related Boilerplate Section(s): 1231, 1232, 1233 Medicaid outreach cost reimbursement to local health departments for costs incurred. Funding Source(s): Federal Medicaid materiembursement funds are available as eligible costs are incurred. Funding Source(s): Federal 12,500, Related Boilerplate Section(s): None Public health administration – 9.0 FTE positions 2,025,600 FTEs, contractual services, and other related costs for administrator of community public health programs, including deputy director, seatministrators, and chief medical officer.			<u>Post-enrollment Note</u> : Governor states Sec. 218 and Sec. 1222(4) are unenforceable.
Implementation of 1993 PA 133, MCL 333.17015 20,000 Reimbursement to local health departments for costs incurrer informational materials provided in accordance with the Infor Consent Law, Public Act 133 of 1993, to a woman seeking an abor Funding Source(s): GF/GP 20, Related Boilerplate Section(s): 1220 Local health services – 3.3 FTE positions 8,707,600 FTEs, related costs, and contracts; includes \$4.75 million GF funding for enhanced support to local public health department respond to emerging public health departments, including for contamination response. Line item also supports coordination of programs with local public health departments, and local public health departments, and local public health departments in order to prevent disease, improve houtcomes, and achieve statutory Public Health Code obligat Prevention projects funded include asthma, safe sleep, diable emerging health threats, gun violence prevention, food access vulnerable communities, chronic disease integration, diable emerging health threats, gun violence prevention, food access vulnerable communities, chronic disease integration, diable emerging health threats, gun violence prevention, food access vulnerable communities, chronic disease integration, diable emerging health. Funding Source(s): Federal 3,901, GF/GP 4,806, Related Boilerplate Section(s): 1231, 1232, 1233 Medicaid outreach cost reimbursement to local health departments for costs incurred. Funding Source(s): Federal Medicaid materiembursement funds are available as eligible costs are incurred. Funding Source(s): Federal 12,500, Related Boilerplate Section(s): None Public health administration – 9.0 FTE positions 7,00 FTE, contractual services, and other related costs for administration of community public health programs, including deputy director, seadministrators, and chief medical officer.			
informational materials provided in accordance with the Infor Consent Law, Public Act 133 of 1993, to a woman seeking an abor Funding Source(s): GF/GP 20, Related Boilerplate Section(s): 1220 Local health services – 3.3 FTE positions 8,707,600 FTEs, related costs, and contracts; includes \$4.75 million GF funding for enhanced support to local public health department respond to emerging public health lissues and threats, including P contamination response. Line item also supports coordination of programs with local public health departments, and local public health departments in order to prevent disease, improve he outcomes, and achieve statutory Public Health Code obligat Prevention projects funded include asthma, safe sleep, diable emerging health threats, gun violence prevention, food access vulnerable communities, chronic disease integration, diable reduction in Native American populations, and reducing reduction in Native American populations. Public health departments for c			Related Boilerplate Section(s): 218, 1221, 1222, 1234
Related Boilerplate Section(s): 1220 Local health services – 3.3 FTE positions 8,707,600 FTEs, related costs, and contracts; includes \$4.75 million GF funding for enhanced support to local public health department respond to emerging public health issues and threats, including P contamination response. Line item also supports coordination of programs with local public health departments, and local public health departments and local public health departments in order to prevent disease, improve he outcomes, and achieve statutory Public Health Code obligat Prevention projects funded include asthma, safe sleep, diable emerging health threats, gun violence prevention, food access vulnerable communities, chronic disease integration, diable reduction in Native American populations, and reducing reimbursement to local health. Funding Source(s): Federal 3,901, GF/GP 4,806, Related Boilerplate Section(s): 1231, 1232, 1233 Medicaid outreach cost reimbursement to local health departments for costs incurred to Medicaid clients. Federal Medicaid mate reimbursement funds are available as eligible costs are incurred. Funding Source(s): Federal 12,500, Related Boilerplate Section(s): None Public health administration – 9.0 FTE positions 7,025,600 FTEs, contractual services, and other related costs for administrators, and chief medical officer.		20,000	Reimbursement to local health departments for costs incurred for informational materials provided in accordance with the Informed Consent Law, Public Act 133 of 1993, to a woman seeking an abortion.
Local health services – 3.3 FTE positions 8,707,600 FTEs, related costs, and contracts; includes \$4.75 million GF funding for enhanced support to local public health department respond to emerging public health issues and threats, including P contamination response. Line item also supports coordination of programs with local public health departments, and local public health departments in order to prevent disease, improve he outcomes, and achieve statutory Public Health Code obligat Prevention projects funded include asthma, safe sleep, diable emerging health threats, gun violence prevention, food access vulnerable communities, chronic disease integration, diable reduction in Native American populations, and reducing reduction in Native American populations, and redu			Funding Source(s): GF/GP 20,000
FTE positions funding for enhanced support to local public health department respond to emerging public health issues and threats, including P contamination response. Line item also supports coordination of programs with local public health departments, and local public health departments, and local public health departments in order to prevent disease, improve houtcomes, and achieve statutory Public Health Code obligat Prevention projects funded include asthma, safe sleep, diable emerging health threats, gun violence prevention, food access vulnerable communities, chronic disease integration, diable emerging health threats, gun violence prevention, food access vulnerable communities, chronic disease integration, diable reduction in Native American populations, and reducing reduction in Native American populations, and redu			Related Boilerplate Section(s): 1220
Medicaid outreach cost reimbursement to local health departments for costs incursion for outreach to Medicaid clients. Federal Medicaid materimbursement funds are available as eligible costs are incurred. Funding Source(s): Federal 12,500, None Public health administration – 9.0 FTE positions Figh 4,806, Related Boilerplate Section(s): 1231, 1232, 1233 Partial reimbursement to local health departments for costs incursion for outreach to Medicaid clients. Federal Medicaid materimbursement funds are available as eligible costs are incurred. Funding Source(s): Federal 12,500, Related Boilerplate Section(s): None Public health administration of community public health programs, including deputy director, seadministrators, and chief medical officer.		8,707,600	FTEs, related costs, and contracts; includes \$4.75 million GF/GP funding for enhanced support to local public health departments to respond to emerging public health issues and threats, including PFAS contamination response. Line item also supports coordination of state programs with local public health departments, and local public health accreditation program to assess and strengthen Michigan's 45 local public health departments in order to prevent disease, improve health outcomes, and achieve statutory Public Health Code obligations. Prevention projects funded include asthma, safe sleep, diabetes, emerging health threats, gun violence prevention, food access of vulnerable communities, chronic disease integration, diabetes reduction in Native American populations, and reducing racial disparities in health.
Medicaid outreach cost reimbursement to local health departments for costs incurred for outreach to Medicaid clients. Federal Medicaid material reimbursement funds are available as eligible costs are incurred. Funding Source(s): Federal 12,500, Related Boilerplate Section(s): None Public health administration – 9.0 FTE positions 7,025,600 FTEs, contractual services, and other related costs for administration of community public health programs, including deputy director, seadministrators, and chief medical officer.			
for outreach to Medicaid clients. Federal Medicaid match reimbursement funds are available as eligible costs are incurred. Funding Source(s): Federal 12,500, Related Boilerplate Section(s): None Public health administration – 9.0 FTE positions 7,025,600 FTEs, contractual services, and other related costs for administration of community public health programs, including deputy director, so administrators, and chief medical officer.			Related Boilerplate Section(s): 1231, 1232, 1233
Public health administration - 9.0 FTE positions Related Boilerplate Section(s): None 2,025,600 FTEs, contractual services, and other related costs for administration of community public health programs, including deputy director, seadministrators, and chief medical officer.	reimbursement to local	12,500,000	Partial reimbursement to local health departments for costs incurred for outreach to Medicaid clients. Federal Medicaid matching reimbursement funds are available as eligible costs are incurred.
Public health administration - 9.0 FTE positions 2,025,600 FTEs, contractual services, and other related costs for administrator of community public health programs, including deputy director, se administrators, and chief medical officer.			Funding Source(s): Federal 12,500,000
 9.0 FTE positions of community public health programs, including deputy director, se administrators, and chief medical officer. 			Related Boilerplate Section(s): None
D		2,025,600	FTEs, contractual services, and other related costs for administration of community public health programs, including deputy director, senior administrators, and chief medical officer.
<u>Post-enrollment Note</u> : Governor states Sec. 218 unenforceable.			Post-enrollment Note: Governor states Sec. 218 unenforceable.
Restricted 227,			Restricted 227,100
Related Boilerplate Section(s): 218, 1225			Related Boilerplate Section(s): 218, 1225

GROSS APPROPRIATION	\$233,993,600	Total of all applicable line item approp	riations.	
		Related Boilerplate Section(s): None		
		Funding Source(s):	Federal GF/GP	12,566,100 132,900
Violence prevention – 6.9 FTE positions	12,699,000	FTEs, related costs and contractual serprevention including rape and sexual asseducation programs; youth suicide printervention programs, training, infrastructed death statewide surveillance and reporting injury prevention program; prescription initiative; opioid overdose data collection in public health action to address national epidemic; and new funding for prevention (PRISMM).	sault primary p mary preventi ture, and awar g system; core drug overdos improvement to al and state d	revention and on and early eness; violent e violence and se prevention b better inform rug overdose
		Funding Source(s): Related Boilerplate Section(s): None	Restricted GF/GP	2,020,200 1,641,800 189,100
Smoking prevention program – 15.0 FTE positions	3,851,100	FTEs, related costs, and contracts for cessation programs including: smoking contracts for Quit Kits, nicotine replacement therapy cessation counseling sessions; local sm schools and communities; smoke-free apartments and other environments; and and enforcement of Clean Indoor Air Act,	essation hotline , materials, a oking preventi e initiatives ti-smoking med	e; free nicotine and up to five on projects of for hospitals, dia campaign; see Air Law.
		Related Boilerplate Section(s): 218	GF/GP	627,000
		Funding Source(s):	Federal Private Restricted	3,358,100 136,500 2,296,600
		Post-enrollment Note: Governor states Se	ec. 218 unenfo	rceable.
Sexually transmitted disease control program – 20.0 FTE positions	6,418,200	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 at counties and communities for disease diagnosis, primary treatment, screening education, laboratory services, HIV unit, and communities.	diseases (STI rt for state, loca mary treatment re targeted to has surveillance, ag, casefinding	Os), promote al and national nt drugs and nigh-incidence investigation, g, prevention

SECTION 116: 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, child and adolescent health, dental health, and immunization.

Full-time equated classified positions	136.1	Full-time equated (FTE) positions in the state classified service.
Child and adolescent health care and centers	\$11,242,700	Local school district revenue originating from the state School Aid Fund, authorized under the School Aid Act (SAA): 1) funding from SAA Sec. 31n(5) to place licensed behavioral health providers in schools in child and adolescent health centers for emotional health services (E3 programs for Expanding, Enhancing Emotional health); and funding from SAA Sec. 31a(7) to support general school-based child and adolescent health center care. (Note: remainder appropriated in SAA Sec. 31a(7) includes \$75,000 for administration in the Family, Maternal, and Child Health Administration line item, and funding in Sec. 120 Health Plan Services line item for Medicaid claims match).
		Funding Source(s): Local 11,242,700
		Related Boilerplate Section(s): None
Dental programs – 5.3 FTE positions	6,723,900	FTEs, related costs, and contracts for the following programs: oral health program grants for school-based dental sealant (SEAL! Michigan) program for school children in communities with low access to dental care; contractual services with Michigan Dental Association to coordinate volunteer Donated Dental Services Program for uninsured individuals who have difficulty accessing dental services due to mental or physical handicap, visual impairment, chronic illness, or age; funding to underwrite treatment costs of essential dental services for persons with developmental disabilities who are not otherwise able to obtain or pay for these services (Developmental Dental Treatment Fund); oral disease prevention and education including tobacco cessation pilot programs; dental services for children birth through age 1 at 5 pilot sites; competitive community grants for fluoridation equipment; outstate dental clinic funding for local health departments partnering with nonprofit dental providers; mobile dentistry facility operator permit program. New funding for new oral health assessment program for children entering public school kindergarten who do not have dental insurance under Act 261 of 2020. Funding Source(s): Federal 759,500 Local 1,500,000 Private 2,000,000 Restricted 20,000 GF/GP 2,444,400
		Related Boilerplate Section(s): 1315, 1316, 1317, 1319, 1343

Drinking water declaration of emergency	4,621,000	Funding for health evaluation and assistance to residents exposed to contaminated drinking water and lead in the City of Flint. 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.
		Funding Source(s): GF/GP 4,621,000
		Related Boilerplate Section(s): 1306
Family, maternal, and child health administration – 55.0 FTE positions	10,261,200	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 school health education curriculum, school children's healthy exercise program incorporating evidence-based best practices to address childhood obesity with before- and after-school programs, and local administration services for child and adolescent/teen health centers funded under Child and Adolescent Health Care and Centers line item, and the Health Plan Services line item in Medical Services unit.
		Funding Source(s): Federal 5,567,400
		Local 75,000
		Private 624,500
		Restricted 154,400 GF/GP 3,839,900
		Related Boilerplate Section(s): 218, 1309, 1313, 1321, 1342
Family planning local agreements	8,810,700	Grants to local health departments and agencies including federal Title X funding for statewide family planning services including reproductive health assessment, comprehensive contraceptive services, health education, counseling, referral, and funding for special projects including training, and sexually transmitted disease testing and education.
		Post-enrollment Note: Governor states Sec. 1305 unenforceable.
		5 " O () 5 1 1 0 500 000

Funding Source(s): Federal

8,530,900 279,800 GF/GP

Related Boilerplate Section(s): 1301, 1302, 1303, 1304, 1305, 1309, 1310, 1320

Immunization program – 15.8 FTE positions	19,142,200	FTEs, related costs, contracts, and grants to local public heal departments, community health centers, and other agencies administer state immunization program of disease preventio surveillance, and disease outbreak control for vaccine preventab disease, including immunization clinics, free vaccinations for eligible children and adults, vaccine quality assurance, vaccine handlin distribution and tracking, statewide Michigan Care Improveme Registry (MCIR) of individual immunization history, outreach are education, perinatal hepatitis B prevention, provider quality assurance field staff training and technical support, immunization progration infrastructure and capacity building, immunization waiver counseling immunization information system, improve adult immunization rate initiative, infant mortality perinatal care system regionalization, and other projects.
		Post-enrollment Note: Governor states Sec. 218 unenforceable.
		Funding Source(s): Federal 14,207,20 Restricted 2,959,30 GF/GP 1,975,70
		Related Boilerplate Section(s): 218, 1322
Local MCH services	7,018,100	Maternal and child health (MCH) grants to local health departments of a per capita basis for locally-identified service and access needs sugas prenatal care, immunizations, and well-child services; and grants agencies for programs to address high infant mortality, including fet infant mortality review. Local health departments provide an annual Local MCH Plan to the Department.
		Funding Source(s): Federal 7,018,10
		Related Boilerplate Section(s): 1301
Maternal navigator pilot program – VETOED	3,000,000 0	Maternal navigator pilot program by nonprofit organizations to provior referrals and services to pregnant women; grantee organizations mulpromote childbirth and alternatives to abortion.
		Funding Source(s): GF/GP 3,000,00
		Related Boilerplate Section(s): 1345
Pregnancy prevention program	1,464,600	Grants to local health departments and other entities for fami- planning and primary pregnancy prevention programs, services, ar special projects, including training, pregnancy risk assessment maternity mortality, and expanded programming beyond the feder Title X family planning program.
		Post-enrollment Note: Governor states Sec. 1305 unenforceable.
		Funding Source(s): Federal 602,10 Restricted 862,50
		Related Boilerplate Section(s): 1301, 1304, 1305, 1309, 1320
Pregnancy resource centers - VETOED	1,500,000 0	Grants to pregnancy resource centers that promote childbirth ar alternatives to abortion, and provide referrals and information pregnant women.
		Funding Source(s): GF/GP 1,500,00
		Related Boilerplate Section(s): 1346

Prenatal care and premature birth avoidance grant

1,000,000

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 also 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 -15.0 FTE positions -PARTIALLY VETOED

37,518,200 36,818,200

FTEs, related costs, grants and contracts for prenatal programs including: grants to local health departments and other agencies for local maternal, infant, and early childhood home visiting programs, (including nurse family partnerships, early head start, and healthy families America) to provide prenatal support services serving at-risk families, pregnant women and teenagers in communities with high infant mortality rates, comparable state-funded home visiting program in rural areas, federal Medicaid matching funds on certain nurse family partnership programs, state coordination of home visiting programs, implement August 2012 infant mortality reduction plan, promote regional perinatal care system, improve health of women of childbearing age, encourage infant safe sleep practices, enhanced support for evidence-based infant mortality programs including client and provider recruitment and strategic planning; and Healthy Moms, Healthy Babies initiative for increased home visits for high risk mothers and newborns, integrated home visit management system, and enhanced mental health consultation services for home visit enrollees. New TANF funding for alternative pregnancy and parenting support program which promotes childbirth and alternatives to abortion (vetoed).

Post-enrollment Note: Governor vetoed Sec. 1307 and related funding of \$700,000 TANF for an alternative pregnancy and parenting support program. Governor states Sec. 218 unenforceable.

Funding Source(s):

TANF

700,000

15,828,300 Federal Restricted GF/GP

50,000 20.939.900

Related Boilerplate Section(s): 218, 1301, 1307, 1308, 1311, 1314, 1348

Special projects

6,289,100

Grants and contracts for maternal and child health special projects including: expectant and parenting teens outcomes improvement, fetal alcohol spectrum disorders program, maternal mortality surveillance, prenatal care and fetal infant mortality programs, prenatal smoking cessation, race to the top to address behavioral and developmental health needs of children birth through age 5 to improve school readiness, regional perinatal care system, safe delivery of newborns hotline, sexual abstinence and contraception education and personal responsibility programs for targeted populations with high teen birth rates, and other projects as federal grants become available.

Funding Source(s):

Federal GF/GP

6,071,200 217,900

Related Boilerplate Section(s): 1313

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	18,520,600	FTEs, related costs, grants, and vendor and other 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 18,016,300 Private 504,300
		Related Boilerplate Section(s): 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 2020-21 averaged 207,300 women and children (preliminary), a decrease from 213,900 in FY 2019-20.
		Funding Source(s): Federal 170,511,400 Private 60,773,600
		Related Boilerplate Section(s): 1341
GROSS APPROPRIATION	\$368,718,600 \$363,518,600	Total of all applicable line item appropriations.
Social security act, temporary assistance for needy families	700,000 0	Total federal Temporary Assistance for Needy Families (TANF) block grant revenues; supports prenatal care outreach and service delivery support line item.

SECTION 117: 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 positions	48.8	Full-time equated (FTE) positions in the	state classified	I service.
Bequests for care and services – 2.8 FTE positions	\$1,837,100	Payment for services not covered by Medicaid or CSHCS such a wheelchair ramps and van lifts; supported with parent participation fees and Trust Fund for Children with Special Health Care Needs.		nt participation
		Funding Source(s):	Federal Private Restricted	105,200 1,015,500 716,400
		Related Boilerplate Section(s): None		
Children's special health care services administration – 46.0 FTE positions	for the Children's Special Health Care Services Division of ships of the Children's Special Health Care Services Division of the Children's Sp		sion organized vision includes in Services, and mily Center for parent-directed	
		Funding Source(s):	Federal Restricted GF/GP	3,471,200 105,900 5,369,200
		Related Boilerplate Section(s): 1363		
Medical care and treatment	292,750,900	<u> </u>		d treatments to ervices related ces not related through either d services for other Medicaid Ith plan, most
		Funding Source(s):	Federal Private Restricted GF/GP	167,459,500 200,000 3,361,000 121,730,400
		Related Boilerplate Section(s): 1360, 13	361, 1702	
Nonemergency medical transportation	801,200	Travel assistance for specialty medical the child's qualifying diagnosis.	care and treatr	ment related to
		Funding Source(s):	Federal GF/GP	50,000 751,200
		Related Boilerplate Section(s): None		

STATE GENERAL FUND/ GENERAL PURPOSE	\$130,605,800	Unrestricted state revenue from taxes and or	ther sources.	
Total other state restricted revenues	4,183,300	Parent pay agreements and fees associated with CSHCS.		
Total private revenues	1,215,500	Gifts and bequests for CSHCS, and interest on those donations and tribal health centers.		
Total other federal revenues	173,840,900	Includes Title XIX Social Security Act Medicaid Child Health Services Block Grant, and Title X Children's Health Insurance Program (CHIP) fur	XI Social Security Act	
GROSS APPROPRIATION	\$309,845,500	Total of all applicable line item appropriation	15.	
		Related Boilerplate Section(s): None		
			ederal 2,755,000 F/GP 2,755,000	
Outreach and advocacy	5,510,000	Contracts with local health departments to identify and enroll childre in the CSHCS program, case management, and care coordinatio services.		

SECTION 118: 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	\$9,311,600	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, voluntary nursing home culture change and quality improvement project, and project to improve health of persons receiving public long-term care supports and services. 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 720,000 GF/GP 4,385,100
		Related Boilerplate Section(s): 1417, 1422, 1425

Community services

52,476,000

Grants to regional Area Agencies on Aging for the following supportive services and programs:

<u>Access to Local Services</u>: information assistance, outreach, case coordination, transportation.

Aging and Disability Resource Centers: 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.

<u>Local Long-Term Care Ombudsman</u>: local advocacy and education services for long-term care facility residents and their family members. <u>Medicare/Medicaid Assistance and Medicare Improvement Programs</u>: 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, nutrition education, and new call check pilot program.

Note: Additional funding is provided under Section 122 for one-time Senior Citizen Center Program Grants, and Dementia Unit.

Funding Source(s): Federal 23,980,400

GF/GP 28,495,600

Related Boilerplate Section(s): 231, 1421, 1426, 1963

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

46,554,200

Grants to regional Area Agencies on Aging for food and nutrition services for vulnerable elderly adults including at least one hot or other appropriate meal per day in a congregate setting or as a homedelivered meal, and nutrition education services; federal cash and/or commodities for meal preparation supports congregate and homedelivered meals; and funding for Senior Project FRESH Farmer's Market Nutrition Program.

Funding Source(s): Federal 33,657,000

Private 300,000 GF/GP 12,597,200

Related Boilerplate Section(s): 1402, 1403

Respite care program	6,468,700	Grants to regional Area Agencies on Aging for respite care services to assist family caregivers providing care to an elderly person in need of
		constant supervision; provided in home or in an adult day care setting Funding Source(s): Merit Award 4,068,700
		Restricted 2,000,000 GF/GP 400,000
		Related Boilerplate Section(s): None
Senior volunteer service programs	4,765,300	Grants to local agencies for the following programs established under the federal Corporation for National and Community Service: Foster Grandparent Program - low-income seniors who volunteer 20 hours per week to assist children and youth in need of personal attention and special help; a stipend is paid to volunteers. Retired and Senior Volunteer Program - community senior volunteers Senior Companion Program - low-income seniors who provide 20 volunteer hours per week of individualized care and assistance to frait and at-risk adults; a stipend is paid to volunteers.
		Funding Source(s): GF/GP 4,765,300
		Related Boilerplate Section(s): None
GROSS APPROPRIATION	\$123,075,800	Total of all applicable line item appropriations.
Capped federal revenues	249,700	Total non-TANF revenue from certain federal grants awarded for a capped amount; supports adult services policy and administrative oversight staff, in Aging and Adult Services Administration line item.
Total other federal revenues	65,094,200	Federal revenue includes the following grants: • congregate nutrition services Part C-1 Title III • developing dementia dexterity • disease prevention and health promotion Part D Title III • elder abuse prevention Part G Title VII • home-delivered nutrition services Part C-2 Title III • long-term care ombudsman Part A Title VII • Medicaid Title XIX funds • Medicare Improvements for Patients and Providers Ac (MIPPA) enrollment assistance grants to state health insurance assistance programs (SHIP) (MMAP in Michigan), aging and disability resource centers (ADRC), and area agencies on aging • national family caregiver support Part E Title III • no wrong door ADRC • nutrition services incentive program USDA (administered under federal DHHS) • senior community service employment Title V • senior farmers market nutrition program USDA • SHIP for MMAP program • supportive services Part B Title III • grants supporting adult human services including policy and administrative oversight staff.
Total private revenues	1,020,000	Brookdale Foundation - Relatives as Parents Program grant • civil monetary penalty fund revenue from nursing home noncompliance with medical services certification regulations • Michigan Health Endowment Fund grant for health improvement for long-term care supports and services recipients • Senior Project FRESH Farmer's Market Nutrition contributions collected by county cooperative extension agencies for administration of the program.
Michigan merit award trust fund	4,068,700	State revenue from 1998 master settlement agreement with tobacco companies.
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 nonprofit health care corporation Blue Cross and Blue Shield of Michigan.
STATE GENERAL FUND/ GENERAL PURPOSE	\$50,643,200	Unrestricted state revenue from taxes and other sources.

SECTION 119: 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	421.0	Full-time equated (FTE) positions in the state classified service.	
Electronic health record incentive program	\$37,477,500	Michigan Medicaid electronic health record (EHR) incentive payments made to eligible professionals, hospitals, and critical access hospitals (that have certain Medicaid patient volume) as they adopt, implement, upgrade, or demonstrate meaningful use of certified EHR technology. An EHR is an electronic record of patient health information generated by one or more encounters in any care delivery setting.	
		Funding Source(s): Federal 37,477,500	
		Related Boilerplate Section(s): None	
Healthy Michigan plan administration – 34.0 FTE	31,461,300	Personnel costs, office supplies, and contractual services expenses related to administering the Healthy Michigan Plan.	
positions		Funding Source(s): Federal 21,036,100 GF/GP 10,425,200	
		Related Boilerplate Section(s): 252	
Medical services administration – 387.0 FTE positions	84,064,400	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. Funding Source(s): Federal 56,624,600 Local 37,700 Private 1,001,300 Restricted 336,300 GF/GP 26,064,500 Related Boilerplate Section(s): 263, 1505, 1507, 1512, 1513, 1514, 1517, 1757, 1792, 1804, 1859	
GROSS APPROPRIATION	\$153,003,200	Total of all applicable line item appropriations.	
Total other federal revenues	115,138,200	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.	
Total local revenues	37,700	Funds from public hospitals and local schools.	

STATE GENERAL FUND/ GENERAL PURPOSE	\$36,489,700	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	1,001,300	Private funds from foundations, including the Health Endowment Fund and tribal health centers.

SECTION 120: 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 2021-22 is 65.48%, meaning that the state funds 35.92% of Medicaid service costs. While there is a federal Public Health Emergency declaration, FMAP is increased for 6.2 basis points. 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.

	\$470,822,100	Household and personal care services blind, and disabled individuals to er independent living arrangements. Service eating, toileting, bathing, dressing, tak housecleaning, meal preparation, and are coordinated through local DHHS office	nable them ses include: a sing medicat laundry serv	to remain in assistance with tion, shopping,
		Funding Source(s):	Federal GF/GP	317,008,500 153,813,600
		Related Boilerplate Section(s): 231, 167	11, 1851	
Ambulance services	17,884,500	for Medicaid beneficiaries not enrolled in	Medicaid fee-for-services payments to ambulance service provider for Medicaid beneficiaries not enrolled in a health plan. Also include ambulance quality assurance assistance program (QAAP)-funde supplement payments.	
		Funding Source(s):	Federal Restricted GF/GP	11,917,100 661,700 5,305,700
		Related Boilerplate Section(s): 1611, 16	641, 1788	
Auxiliary medical services	6,786,100	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	4,493,200 2,292,900
		Related Boilerplate Section(s): 1611, 16	631	
Dental clinic program	1,000,000	Appropriation to partially replace dispr (DSH) funding that is no longer available Dental Program.		
		Funding Source(s):	GF/GP	1,000,000
		Related Boilerplate Section(s): None		
Dental services	314,186,500	Includes both Medicaid fee-for-service enhanced Medicaid dental benefit for chi a statewide managed care contract und program.	ildren admin	istered through
		Funding Source(s):	Federal GF/GP	211,421,100 102,765,400
		Related Boilerplate Section(s): 1611, 16	631, 1894	

Federal Medicare pharmaceutical program 317,176,800

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

317,176,800

Related Boilerplate Section(s): None

Health plan services

6,246,148,400

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, help line, marketing, and outreach contracts.

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

> Funding Source(s): Federal 4,271,675,600

Local 28,592,100 Private 50.000 Restricted 1,490,959,600 GF/GP 454.871.100

Related Boilerplate Section(s): 1151, 1607, 1615, 1625, 1626, 1657, 1662, 1670, 1673, 1677, 1700, 1704, 1763, 1764, 1782, 1788, 1790, 1791, 1792, 1801, 1810, 1812, 1820, 1837, 1846, 1850, 1862, 1875, 1879, 1881, 1888

Healthy Michigan plan

5,164,023,400

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.

Funding Source(s): Federal 4,629,233,400

Local 2,038,800 Private 200,000 Restricted 532,551,200

Related Boilerplate Section(s): 252, 1151, 1615, 1620, 1625, 1626, 1631, 1657, 1662, 1697, 1700, 1763, 1764, 1788, 1792, 1801, 1810, 1812, 1820, 1837, 1846, 1850, 1860, 1862, 1871, 1875, 1879, 1881, 1888

Home health services

3,194,200

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). Includes \$100,000 private revenues from civil monetary penalties.

Funding Source(s): Federal 2,052,200

Private 100,000 GF/GP 1,042,000

Related Boilerplate Section(s): 1611, 1702

Hospice services

135,215,200

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 88,138,000

GF/GP 47,077,200

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, MIChild, or Children's Special Health Care Services. Restricted revenue from the Health and Safety Fund.
		Funding Source(s): Federal 30,163,500 Restricted 4,625,000 GF/GP 10,211,500
		Related Boilerplate Section(s): 1641, 1699, 1700
Hospital services and therapy	818,936,100	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), including MiDocs, 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.
		Funding Source(s): Federal 521,075,400 Restricted 263,079,600 GF/GP 34,781,100
		Related Boilerplate Section(s): 1611, 1631, 1641, 1657, 1700, 1802, 1812, 1846, 1969, 1870
Integrated care organizations	342,431,900	Managed care capitated payments under a Medicaid waiver for integrated health care services for individuals who are dually Medicare and Medicaid eligible, known as MI Health Link. Contracted health plans are responsible for coordinating both Medicare and Medicaid benefits though a single health plan. Current geographic coverage includes Southwest Michigan, Upper Peninsula, Macomb County, and Wayne County.
		Funding Source(s): Federal 218,623,700 GF/GP 123,808,200
		Related Boilerplate Section(s): 231, 1611, 1641, 1775
Long-term care services	1,990,930,000	Medicaid fee-for-service payments to nursing homes, county medical care facilities, and hospital critical care units for long-term care services to Medicaid beneficiaries. Medicaid health plans are responsible for paying for up to 45 days of long-term care. Also includes nursing facility QAAP-funded quality assurance supplement payments. Local revenues from county maintenance of effort payments required under section 109 of the Social Welfare Act (MCL 400.109); private revenues from civil monetary penalties; and restricted revenues from Merit Award Trust Fund, nursing facility QAAP, and Healthy Michigan Fund.
		Funding Source(s): Federal 1,323,812,100
		Related Boilerplate Section(s): 231, 1606, 1611, 1620, 1641,1645, 1646, 1682, 1873

Maternal and child health	32,717,000	Payments to local health department herapeutic, rehabilitative, or palliative between actual costs and Medicaid payinsurer payments.	services for	the difference
		Funding Source(s):	Federal	32,717,000
		Related Boilerplate Section(s): 1641		
Medicaid home- and community-based services waiver	437,489,700	Medicaid home- and community-based to provide non-institutional services in personal care, homemaker services transportation, respite care, adult day equipment, and private duty nursing to in facility level of care criteria. Payments m to regional agencies, including some Includes \$500,000 private revenues from	cluding: case s, home de care, medica ndividuals wh nade through Area Agene	e management, livered meals, al supplies and no meet nursing capitated rates cies on Aging.
		Funding Source(s):	Federal Private GF/GP	294,382,000 500,000 142,607,700
		Related Boilerplate Section(s): 231		
Medicare premium payments	717,931,500	Medicare premium payments for low-income Medicare Savings Programs: Qualified Specified Low-Income Medicare Individuals, and Qualified Disabled Wow Medicare Beneficiaries pays for Medicare Coinsurances, and copayments. The other Medicare Part A or Part B premiums. A insurance premiums for persons with a are partially offset with additional federing negotiations with intermediate and local funded school based services.	ed Medicare Beneficiarie orking Individare Part A an her three onl Also includes AIDS. State al funding av	Beneficiaries, s, Qualifying duals. Qualified and B premiums, y pay for either GF/GP funded matching costs railable through
		Funding Source(s):	Federal GF/GP	581,132,400 136,799,100
		Related Boilerplate Section(s): 1692		
Personal care services	8,368,100	Personal care payments made directly or home for the aged to support pers Medicaid beneficiaries. Supplemental individual is eligible) pays for room and inverse is true for long-term care institutiof the costs and SSI will provide a nom of \$37 per month.	onal care se Security In- board at thes ions, Medicai	ervice needs of come (SSI) (if se facilities. The d pays for most
		Funding Source(s):	Federal GF/GP	5,648,200 2,719,900
		Related Boilerplate Section(s): 1611, 1	641, 1872	

benefit manager, and to medical suppliers for pharmaceutical services and medical suppliers 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 203,657,200 Private 50,000 Related Boilerplate Section(s): 1611, 1620, 1626, 1629, 1867, 1875 Physician services 237,332,100 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, physicial therapist) for Medicaid beneficiaries who are not enrolled in a health plan. Medicaid outsettics, prenatel care, podiatric care, radiology, and laboratory. Also supports the fee-for-service portion of the Maternal Infant Health Program. Funding Source(s): Federal 161,302,000 GF/GP Program of all-inclusive care for the elderly Program of all-inclusive care for the elderly 198,118,300 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 hooses to enroll; supports integrated benefits and payment for persons eligible under both Medicare and Medicaid; offered at 23 sites. Funded as a pre-paid capitated benefit program, authorized by the federal Balanced Budget Act of 1997. Funding Source(s): Federal 133,489,100 GF/GP 64,629,200 Related Boilerplate Section(s): 1611, 1641, 1854, 1855, 1874 School-based services 160,000,000 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 160,000,000 Related Boilerplate Section(s): 1641, 1692 Special Medic			
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Physician services 237,332,100 Related Boilerplate Section(s): 1611, 1620, 1626, 1629, 1867, 1875 Physician services 237,332,100 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. Funding Source(s): Federal 161,302,000 Related Boilerplate Section(s): 1150, 1607, 1611, 1631, 1790, 1791, 1801, 1837, 1862 Program of all-inclusive care for the elderly Voluntary managed care program of community-based social and medical services for fital, 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 23 sites. Funded as a pre-paid capitated benefit program, authorized by the federal Balanced Budget Act of 1997. Funding Source(s): Federal 133,489,100 GF/GP 64,629,200 Related Boilerplate Section(s): 1611, 1641, 1854, 1855, 1874 School-based services 160,000,000 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 160,000,000 Related Boilerplate Section(s): 1641, 1692 Special Medicaid reimbursement 368,417,100 Special Medicaid payments to various health providers including: state psychiatric hospital DSH, physician adjuster, dental adjuster			some specialty drugs) that are carved out of health plan or PIHP
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Special Medicaid reimbursement 368,417,100 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 240,723,700 Local 13,195,200 Restricted 113,376,800 GF/GP 1,121,400			Funding Source(s): Federal 160,000,000
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Local 13,195,200 Restricted 113,376,800 GF/GP 1,121,400	•	368,417,100	state psychiatric hospital DSH, physician adjuster, dental adjuster, county medical care facility, University DSH pool, and poison
Related Boilerplate Section(s): 1641, 1693, 1694, 1700			Local 13,195,200 Restricted 113,376,800
			Related Boilerplate Section(s): 1641, 1693, 1694, 1700

Transportation	ansportation 16,703,200 Medicaid fee-for-services payments for nonemergency transportation for Medicaid beneficiaries who are not enhealth plan. Nonemergency transportation costs are page 16,703,200 Medicaid fee-for-services payments for nonemergency transportation are page 16,703,200 Medicaid fee-for-services payments for nonemergency transportation are page 16,703,200 Medicaid fee-for-services payments for nonemergency transportation are page 16,703,200 Medicaid fee-for-services payments for nonemergency transportation are page 16,703,200 Medicaid fee-for-services payments for nonemergency transportation are page 16,703,200 Medicaid fee-for-services payments for nonemergency transportation for Medicaid beneficiaries who are not engaged for the page 16,703,200 Medicaid fee-for-services payments for nonemergency from the page 16,703,200 Medicaid fee-for-services payments for nonemergency from the page 16,703,200 Medicaid fee-for-services payments for nonemergency from the page 16,703,200 Medicaid fee-for-services payments for nonemergency from the page 16,703,200 Medicaid fee-for-services payments for nonemergency from the page 16,703,200 Medicaid fee-for-services payments for nonemergency fee-for-services payments fee-for-		
		either local DHHS offices or through a regional transportation broker.	
		Funding Source(s): Federal 9,608,600 GF/GP 7,094,600	
		Related Boilerplate Section(s): 1611	
GROSS APPROPRIATION	\$18,326,288,400	Total of all applicable line item appropriations.	
Total other federal revenues	13,452,274,000	Federal Title XIX Social Security Act Medicaid funds and Title XX Social Security Act Children's Health Insurance Program (CHIP funds.	
Total local revenues	50,444,900	County maintenance of effort payments for medical care facilities, Medicaid special adjustor payments, and public school district funds for child and adolescent health centers.	
Total private revenues	7,000,000	Civil monetary penalties and tribal health centers.	
Michigan Merit award trust fund	57,200,000	State revenue from 1998 master settlement agreement with tobacco companies.	
Total other state restricted revenues	2,706,196,400	Provider quality assurance assessment programs (QAAP), Medicaid Benefits Trust Fund revenue from tobacco taxes and legal settlements, Insurance Provider 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.	
STATE GENERAL FUND/ GENERAL PURPOSE	\$2,053,173,100	Unrestricted state revenue from taxes and other sources.	

SECTION 121: 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, the Michigan Statewide Automated Child Welfare Information System, and the Comprehensive Child Welfare Information System.

Full-time equated classified positions	19.0	Full-time equated (FTE) positions in the state classified service.
Bridges information system	\$63,367,200	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 1,041,100 TANF 1,471,600 Federal 29,469,200 Restricted 29,400 GF/GP 31,355,900
		Related Boilerplate Section(s): 1901, 1905, 1907, 1909, 1910
Child support automation	43,819,500	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 32,999,100 GF/GP 10,820,400
		Related Boilerplate Section(s): 401, 1905, 1907, 1909, 1910
Comprehensive child welfare information system – 6.0 FTE positions	3,762,200	Supports the planned replacement of MiSACWIS with a new Comprehensive Child Welfare Information System. Replacement includes the introduction of 9 cloud-based modules over the course of approximately 5 to 6 years.
		Funding Source(s): Federal 961,800 GF/GP 2,800,400
		Related Boilerplate Section(s): 1901, 1905,1907, 1909, 1910
Information technology services and projects	261,364,200	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.
		Funding Source(s): TANF 16,689,000 Federal 190,087,300 Private 250,000 Restricted 1,922,300 GF/GP 52,415,600
		Related Boilerplate Section(s): 1901, 1905, 1907, 1909, 1910

Michigan Medicaid information system – 3.0 FTE positions	96,882,200	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 75,701,800 Private 5,000,000 GF/GP 16,180,400	
		Related Boilerplate Section(s): 1902, 1905, 1907, 1909, 1910	
Michigan statewide automated child welfare information system	21,543,500	Funding for the Michigan Statewide Automated Child Welfare Information System (MiSACWIS) including ongoing information systems management administration costs.	
		Funding Source(s): IDG 18,600 TANF 6,238,800 Federal 7,970,600 Restricted 32,800 GF/GP 7,282,700	
		Related Boilerplate Section(s): 1901, 1903, 1905, 1907, 1909, 1910	
Technology supporting integrated service delivery – 10.0 FTE positions	15,984,600	Personnel and other information technology costs to update and streamline electronic application and enrollment process for services provided through DHHS, including the Strategic Integration Administration and MAIN/SIGMA system support and staff. Program has also been supported by the Information Technology Investment Fund (ITIF) within DTMB. Also includes funding for a call center to alleviate work loads of local DHHS public assistance eligibility specialists.	
		Funding Source(s): TANF 42,700 Federal 13,923,500 GF/GP 2,018,400	
		Related Boilerplate Section(s): 1904, 1905, 1907, 1909, 1910	
GROSS APPROPRIATION	\$506,723,400	Total of all applicable line item appropriations.	
IDG from department of education	1,059,700	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.	
Social security act, temporary assistance for needy families	24,442,100	Federal temporary assistance for needy families (TANF) block grant revenue.	
Capped federal revenues	21,979,300	Total non-TANF revenue from certain federal grants awarded for a capped amount; supports Information Technology Services and Projects line item.	
Total other federal revenues	329,134,000	Includes Medicaid Title XIX funds, substance abuse prevention and treatment block grant, Victims of Crime Act justice assistance grant funds, Women, Infants, and Children (WIC) grant revenue, and other federal grants supporting health and human services.	
Total private revenues	5,250,000	Includes partial-year revenue from the State of Illinois for the Michigan- Illinois Alliance Medicaid management information systems project and from other participating states, as well as a two-year grant from the Kresge Foundation.	

Total other state restricted revenues	1,984,500	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.
STATE GENERAL FUND/ GENERAL PURPOSE	\$122,873,800	Unrestricted state revenue from taxes and other sources.

SECTION 122: ONE-TIME APPROPRIATIONS

This appropriation unit includes all FY 2021-22 appropriations which are intended to be one-time allocations that will not necessarily be reauthorized in future fiscal years.

Full-time equated classified positions	6.0	Full-time equated (FTE) positions in the	e state classified service.
Behavioral health patient health information tool	\$600,000	Funding to create an online behavioral (2021 PA 133, has subsequently repe	
		Funding Source(s):	GF/GP 600,000
		Related Boilerplate Section(s): 1965	
Community-based coverage entity	1,000,000	Funding Access Health for "three-share health care coverage.	e model" for low income worke
		Funding Source(s):	GF/GP 1,000,000
		Related Boilerplate Section(s): 1950	
Complex medical condition center	5,000,000	Grant for centers with infection-control with weak immune systems.	olled environments for children
		Funding Source(s):	GF/GP 5,000,000
		Related Boilerplate Section(s): 1974	
Comprehensive child welfare information system	16,824,200	Includes funding to develop the next CCWIS: intake, investigation, and case	
- 6.0 FTE positions		Funding Source(s):	Federal 8,075,600 GF/GP 8,748,600
		Related Boilerplate Section(s): None	
Dementia unit	400,000	One-time funding for a dementia undementia program coordination, collabstate plan implementation.	
		Funding Source(s):	GF/GP 400,000
		Related Boilerplate Section(s): None	
E-FMAP redetermination compliance	20,900,700	One-time funding to additional staff we additional Medicaid redeterminations emergency expires and Medicaid redetermined.	once the federal public health
		Funding Source(s):	Federal 11,660,000 GF/GP 9,240,700
		Related Boilerplate Section(s): None	
First responder and public safety staff mental health	2,500,000	Provides one-time funding for first re syndrome and other mental health cor	
		Funding Source(s):	GF/GP 2,500,000
		Related Boilerplate Section(s): 1954	

Free health clinics	250,000	One-time funding for grants to free health clinics, distributed equally in addition to ongoing funding in Primary Care Services line item.			
		Funding Source(s):	GF/GP	250,000	
		Related Boilerplate Section(s): 1140, 1977	•		
Healthy communities grant	300,000	One-time grant for community healthy living, obesity prevention, an substance abuse prevention programs of Leaders Advancing an Helping Communities.			
		Funding Source(s):	GF/GP	300,000	
		Related Boilerplate Section(s): 1956			
Home health and safety	5,000,000	Provides grant funding to support improvements to low-income households for the purpose of home-improvements meant to achieve standards for eligibility in the State Emergency Relief program.			
		Funding Source(s):	GF/GP	5,000,000	
		Related Supplemental Boilerplate Section(s): 1978		
Hospital behavioral health pilot program	4,500,000	One-time grant to McLaren Greater Lansin pilot.	ehavioral health		
		Funding Source(s):	GF/GP	4,500,000	
		Related Boilerplate Section(s): 1955			
Hospital infrastructure	2,826,000	One-time grant to Sheridan Hospital for infr	astructure	improvements.	
improvements		Funding Source(s):	GF/GP	2,826,000	
		Related Boilerplate Section(s): 1953			
Human trafficking victims inclusive services grant	500,000	One-time grant to establish and implement the human trafficking victims inclusive services grant program.			
program		Funding Source(s):	GF/GP	500,000	
		Related Boilerplate Section(s): 1966			
Injury control intervention – traumatic brain injury	5,000,000	One-time funding for decision support software in the treatment of traumatic brain injury; last funded in FY 2018-19. (2021 PA 133, has subsequently repealed and replaced section)			
		Funding Source(s):	GF/GP	5,000,000	
		Related Boilerplate Section(s): 1971			
Jail diversion fund	5,000,000	Grant to create a Jail Diversion Fund administered by health diversion council and joint taskforce on jail ar incarceration.			
		Funding Source(s):	GF/GP	5,000,000	
		Related Boilerplate Section(s): 1961			
Kids' food basket	525,000	Grant to the Kids' Food Basket organization low-income children.	n, which p	rovides meals to	
		Funding Source(s):	GF/GP	525,000	
		Related Boilerplate Section(s): 1957			

Lead poisoning prevention fund	10,000,000	One-time funding for the Lead Poisoning Prevention Fund to support low-cost loans to homeowners and landlords for lead hazard remediation projects, first funded in FY 2020-21. Total amount of the Fund including previous appropriation is \$12.0 million.			
		Funding Source(s):	GF/GP	10,000,000	
		Related Boilerplate Section(s): 1951			
Legal assistance	20,000	Grant to the Allegan County Legal Assi legal assistance for civil proceedings to			
		Funding Source(s):	GF/GP	20,000	
		Related Boilerplate Section(s): 1967			
Long-term care facility	37,500,000	Funds to provide one-time supplementa	ntal nursing facility payments.		
supports - state fiscal recovery funds		Funding Source(s):	Federal	37,500,000	
receivery runde		Related Boilerplate Section(s): 1968			
Michigan Medicaid information system home help payments	21,000,000	(MMIS) to support adult home help payr	s to the Michigan Medicaid Information System adult home help payment changes. Changes would be processed through CHAMPS rather than the orized Payment System (ASAP).		
		Funding Source(s):	Federal GF/GP	18,900,000 2,100,000	
		Related Boilerplate Section(s): 1967			
Multicultural integration funding - state fiscal recovery funds	4,400,000	Federal grant funds for multicultural agencies to provide phy behavioral health services.			
		Funding Source(s):	Federal	4,400,000	
		Related Boilerplate Section(s): 1975			
Narcotics awareness program	4,000,000	Grant to Families Against Narcotics for services.	or community-ba	ased addiction	
		Funding Source(s):	GF/GP	4,000,000	
		Related Boilerplate Section(s): 1958			
Nonprofit mental health clinics	200,000	Includes competitive grant funding for n a match, up to \$100,000, based on am clinic through fundraising.			
		Funding Source(s):	GF/GP	200,000	
		Related Boilerplate Section(s): 1964	; •		
Northern psychiatric residency program	5,200,000	Includes grant funding for 3 psychiatric Northern Michigan and the Upper Peni			
		Funding Source(s):	Federal GF/GP	2,600,000 2,600,000	
		Related Boilerplate Section(s): 1973			
Nurse practitioner expansion program	1,573,000	One-time funding for a 4-year pilot program to increase the number of advanced practice psychiatric-mental health nurse practitioners through Wayne State University.			
				P 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	
expansion program			GF/GP	1,573,000	

Policy and planning administration	8,375,000	One-time funding for new initiatives to reduce health disparities, including increasing use of community-based navigators to facilitate health care access, data sharing and interoperability improvements of Michigan Health Information Network, and implementation of statewide screening and referral tool for health-related social needs.		
		Funding Source(s):	Federal GF/GP	3,250,000 5,125,000
		Related Boilerplate Section(s): None		
Primary care and wellness services	1,000,000	One-time funding for integrated health services and facility needs in southeast Michigan through TEAM Cares/Team Wellness.		
		Funding Source(s):	GF/GP	1,000,000
		Related Boilerplate Section(s): 1970		
Senior citizen center program grants	150,000	One-time funding for a grant program to support health-related senio programs at multi-purpose senior citizen centers; maximum gran award is \$5,000 per program.		
		Funding Source(s):	GF/GP	150,000
		Related Boilerplate Section(s): 1963		
Special Olympics capital improvement project	1,000,000	Includes funding for capital improvements for a Special Olympics facility.		
		Funding Source(s):	GF/GP	1,000,000
		Related Boilerplate Section(s): 1952		
Special residential care facility	300,000	One-time funding to special residential care community for children and adults with developmental disabilities.		
		Funding Source(s):	GF/GP	300,000
		Related Boilerplate Section(s): 1972		
Statewide health	17,500,000	One-time funding to Michigan Health Info	ormation Netw	ork (MiHIN).
information exchange projects		Funding Source(s):	Federal GF/GP	15,750,000 1,750,000
		Related Boilerplate Section(s): 1962		
Substance abuse community and school outreach	250,000	One-time funding to SAFE Substance County.	Abuse Coalit	ion in Wayne
		Funding Source(s):	GF/GP	250,000
		Related Boilerplate Section(s): 1959		
Technology upgrades	18,000,000	Contractual payments to upgrade the Ch	HAMPS system	٦.
		Funding Source(s):	Federal GF/GP	15,850,000 2,150,000
		Related Boilerplate Section(s): 1976		
Unified clinics resiliency center for families and children	750,000	One-time funding for the development a center for families and children to experiencing trauma, toxic stroneurodevelopment disorders, or addiction	provide servicess, chronic	es for those
		Funding Source(s):	GF/GP	750,000
		Related Boilerplate Section(s): 1960		
GROSS APPROPRIATION	\$202,343,900	Total of all applicable line item approp	oriations.	

STATE GENERAL FUND/ GENERAL PURPOSE	\$84,358,300	Unrestricted state revenue from taxes and other sources.
Total other federal revenues	76,085,600	Includes federal Title XIX Social Security Act Medicaid funds.
Coronavirus state fiscal recovery fund	41,900,000	Federal grant funds coronavirus state fiscal recovery fund revenue from the federal American Rescue plan Act (ARPA) of 2021, Public Law 117-2, appropriated for long-term care facility supports, and multicultural integration funding.

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 DHHS to use the internet to fulfill boilerplate reporting requirements, 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

As legally permissible, 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 veteran-owned Michigan businesses 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 previous fiscal year that was funded by appropriations within the budget, including dates, related costs, and fund sources for each travel occurrence.

Sec. 208. Legal Services of Attorney General

Prohibits the use of appropriated funds by DHHS to hire a person to provide legal services that are the responsibility of the Attorney General, except for bonding activities and outside services authorized by the Attorney General.

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 previous fiscal year.

Sec. 210. Contingency Fund Appropriations

Appropriates up to \$20 million in federal contingency authorization, up to \$20 million in state restricted contingency authorization, up to \$5 million in local contingency authorization, and up to \$2 million in private contingency authorization. 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 fiscal year-to-date expenditures, payments to a selected vendor, and number of active department employees by job classification, job specifications, and wage rates.

Sec. 212. State Restricted Funds Report

Requires annual report on estimated fund balances, projected revenues, and expenditures for state restricted funds for the previous and current fiscal years, to be provided 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 2021-22 appropriations under Part 1 for legacy costs are estimated at \$326.3 million, including pension-related legacy costs of \$182.8 million and retiree health care legacy costs of \$143.5 million.

Sec. 215. Notification When Legislative Objectives Conflict with Federal Regulation or When Grant Unused Requires DHHS to provide notice within 30 days 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 2021-22 Executive budget recommendation upon its release.

Sec. 218. Basic Health Services and Report

Lists eight health services to be included in annual list of proposed basic health services that are to be funded, available, and accessible throughout the state, as required under Part 23 of the Public Health Code; requires report by January 1 on reporting related to basic health services as required under Sec. 2311 of the Public Health Code. (Governor's signing letter states section is unenforceable.)

Sec. 219. Contract with Michigan Public Health Institute and Reports

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

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 written notice of any major policy changes 30 days before implementation, requires policy manual to be available on 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 funded services; and 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 and Report

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

Sec. 229. Interagency Agreement with LEO for Use of TANF Funds and Report

Requires DHHS to extend the interagency agreement with Department of Labor and Economic Opportunity (LEO) for TANF-funded job readiness and welfare-to-work programming including Michigan Works!; requires report by January 1 on certain information including TANF expenditures, clients served, 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 current 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. Direct Care Worker Wage Increase and Report

Requires DHHS to increase wages by up to \$2.35 per hour paid to direct care workers funded by DHHS appropriations, and states specific workers and wage increases to be supported. Includes provisions if a worker elects to reject the increase. Requires contractor reporting, and requires DHHS to report by March 1 including details on wages paid.

Sec. 232. Line Item Spending Plans Report

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. 233. Legislative and State Administrative Board Transfers

Allows the legislature, by a concurrent resolution adopted by a majority of the members of each house, to inter-transfer funds if the State Administrative Board transfers funds from an amount appropriated in the DHHS budget.

Sec. 234. Receipt and Retention of Reports

Requires DHHS to receive and retain copies of all reports funded from the appropriations in part 1 and to follow federal and state guidelines for short-term and long-term retention of records.

Sec. 236. Severance Payment Reporting

Requires DHHS to report severance pay for high ranking staff within 14 days after an agreement, and report annual totals by February 1; requires posting of certain severance pay information on an internet website.

Sec. 237. Conditions on Funding Regarding COVID Information and Requirements

Prohibits DHHS from requiring proof of individual COVID-19 vaccination to access state facilities or services, creating a COVID vaccine passport, or providing COVID vaccine status of an individual to any entity or person without the individual's consent. Also prohibits DHHS from requiring proof of COVID vaccination as a condition of certain employment or subjecting an individual to negative employment consequences because of COVID vaccine status, and requires exemptions to any COVID vaccine policy required to be established due to a federal mandate.

Sec. 239. Medicaid Reimbursement for Telemedicine

Requires DHHS to reimburse Medicaid telemedicine services the same as if the services involved face-to-face contact between the provider and patient; this applies to the non-facility component of the reimbursement rate.

Sec. 240. Use of Existing Work Project Authorization

Establishes that appropriations in part 1 shall, to the extent possible, not be expended until all existing work project authorization available for the same expenditures is fully expended.

Sec. 241. Advertising and Media Outreach Expenditures Report

Requires DHHS to report by March on total actual expenditures for advertising and media outreach for the previous fiscal year.

Sec. 242. Description of Programs Report

Requires DHHS to provide by March 1 a report with a detailed description of programs funded by appropriation line items in the current fiscal year.

Sec. 243. Notice of Prohibited Use of State Funds - VETOED

Allocates \$50,000 for DHHS to provide notice and information to health providers and the public concerning the prohibited use of state restricted or state general funds by DHHS, grantees, or subcontractors to fund any elective abortion.

Sec. 244. 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. 250. Prohibit Mandatory Face Covering Under Age 18

Prohibits DHHS director or a local health officer from issuing or enforcing any orders or other directives that require an individual in this state who is under the age of 18 to wear a face mask or face covering. (Governor's signing letter states section is unenforceable).

Sec. 251. Epidemic Emergency Order Report

Requires DHHS to report within 7 days of issuance of an emergency order involving an epidemic on the nature and scope of the epidemic, areas of the state threatened, evidence relied upon, non-department resources and related costs, personnel responsible for developing the order, and factors to modify or terminate the order.

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. 258. Initiatives and Report Regarding Trauma, Human Trafficking, and Sexual Abuse Prevention

Directs DHHS to collaboratively promote and support school and education initiatives including training regarding use of trauma-informed practices and age-appropriate information about human trafficking and sexual abuse prevention; and shall provide a report by March 1.

Sec. 263. Communications with Legislature Regarding Waivers

Requires DHHS to notify the Legislature 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 on the status of potential or future waiver applications, and 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, unless the communication is prohibited by law and disciplinary action is lawful.

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 mid-year report by line item on expenditure and revenue estimates for the previous, current, and upcoming fiscal years for certain capped federal grants; states intent that capped funds only be used for economics adjustments if increased funding is expected; requires report by February 15 on TANF maintenance of effort requirement funding.

Sec. 275. Federal Funds Adjustments Quarterly and Year-End

Provides limited authority for the Executive to realign capped and other federal fund sources to maximize federal revenues quarterly and as part of the year-end closing process; requires quarterly reports, 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 funds for a specific entity to provide services to individuals be expended for those services; allows 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 divisions and subdivisions of the department.

Sec. 290. Welfare Fraud Hotline

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

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

Requires that DHHS, as permissible under the Governmental Immunity Act, be responsible for legal costs of private attorneys defending current and former DHHS employees in a legal action or investigation related to the City of Flint or other community in which a declaration of emergency was issued because of drinking water contamination.

Sec. 297. FTE and Remote Work Reports

Requires quarterly reports on the number of full-time equated positions (FTEs) in pay status by civil service classification, and comparison by line item of authorized FTEs with employed FTEs; requires report by March 1 on employees engaged in remote work in 2021 and estimated cost savings.

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); DTMB must be notified of evaluation of use of RFI or RFQ; requires that all vendors receive detailed notices of RFP results; and requires report by September 30.

DEPARTMENTAL ADMINISTRATION AND SUPPORT

Sec. 301. Terminal Leave Payments

Requires that spending for terminal leave payments not exceed designated appropriations, unless a legislative transfer of funds from another line item supporting administrative costs is requested and approved.

CHILD SUPPORT ENFORCEMENT

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

Allocates \$12 million in federal child support incentive payment revenue to the state and \$14.5 million to counties; if revenue exceeds \$26.5 million, state allocation increases to \$15.4 million (remaining revenue subject to legislative appropriation); if revenue is below \$26.5 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

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 Rate

Requires DHHS to maintain emergency shelter program per diem rates at \$19.00 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 continued additional funding for operations and to increase services to victims and their families.

Sec. 461. Runaway and Homeless Youth Services Grants

Requires DHHS to maintain the recent \$500,000 revenue increase to support the runaway and homeless youth services program; allocates an additional \$400,000 to support runaway and homeless youth services; requires report.

Sec. 462. Trauma Recovery Center Pilots

Requires that if federal funding from Crime Victim Justice Assistance Grants becomes available, DHHS shall allocate \$4.0 million for four trauma recovery center program pilot projects shall be funded; requires DHHS to explore the development of a mobile trauma center in rural areas; requires report.

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; DHHS may provide 100% reimbursement to Indian Tribal governments that enter into a state-tribal title IV-E agreement.

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 DHHS to continue an independent third party evaluation of performance-based funding model; 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 and requires the Consortium to maintain a revised agreement that supports the transition to a global capitated payment model and maintain a risk reserve of at least \$1.5 million; requires report.

Sec. 505. DHHS Juvenile Justice Report

Requires DHHS 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. 506. Wayne County Juvenile Justice Data Report

Requires a report containing juvenile justice data from Wayne County, including the number of youth referred for care or supervision and type of setting for referred youth.

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. 509. Adoption Placement Rate Increase

Requires DHHS to maintain the increase of adoption placement rates to private child placing agencies.

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. (Governor's signing letter states this section is unenforceable.)

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. (Governor's signing letter states this section is unenforceable.)

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 after initial reading of report; requires the caseworker to resubmit a corrected report within 3 business days after receipt report that requires corrections. (Governor's signing letter states this 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

Requires \$3.5 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.

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

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 \$1.1 million GF/GP and any eligible federal matching funds be allocated for a rate increase for specified programs.

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. 526. Court-Appointed Special Advocates

Requires DHHS to allocate \$1 million to fund court-appointed special advocates through a community-based nonprofit organization to advocate in the legal system for children who have been abused or neglected.

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 if approved by the settlement monitor.

Sec. 528. Adoption Marketing and Education Program - VETOED

Requires DHHS to allocate \$10 million to fund marketing programs that promote the adoption of infants and to develop education materials on adoption as an alternative to abortion; requires DHHS to issue a request for proposal for a contract for development of marketing materials; requires DHHS to notify the legislature on vendors submitting bids, vendors receiving a contract, evaluation process, and criteria used to award the contract for marketing programs.

Sec. 529. Family Preservation Program

Requires DHHS to maintain total combined funding levels of the families first, family reunification, and families together building solutions family preservation programs as of September 30,2021; funding shall not be reduced.

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 guality 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. 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; declares intent of the legislature that DHHS is to ensure that payments are made in a timely manner.

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 allocate \$1.5 million to fund a competent kinship placement, support, and licensing program to increase kinship licensure rate and reduce the average length of stay for children in foster care; DHHS shall reallocate any savings or revenue.

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. Report on Federal IV-E Claims for Foster Care Payments to Unlicensed Relatives

Requires DHHS to report on the number of unlicensed relatives denied license, status of title IV-E claims for maintenance payments, and administrative payments for licensed caregivers with placements.

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. 539. Juvenile Placement Recommendation Compliance

Requires DHHS and child placing agency caseworkers to include a recommendation to the court for juvenile placement as part of recommendation information consistent with the requirements of section 1550 of the social welfare act, 1939 PA 280, MCL 400.1150.

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. 541. Student Loan Forgiveness for Foster Care Caseworks

Requires DHHS to explore the implementation of a program to help foster care caseworkers achieve student loan forgiveness; requires report.

Sec. 542. Court-Appointed Special Advocates

Requires DHHS to develop strategies to use input form court-appointed special advocates and foster parents throughout case management and any legal proceedings for abused and neglected children in foster care; requires report.

Sec. 543. Child Abuse or Neglect Policy for Legal Proceedings

Requires DHHS to develop a clear policy that provides children who are victims of abuse or child neglect to provide input in the legal proceedings.

Sec. 544. Trauma Informed Training

Provides that DHHS may require all foster care parents, caseworkers, and guardians ad-litem to receive trauma informed training.

Sec. 545. Therapeutic Crisis Intervention Training for Caseworkers

Requires DHHS to provide training that is consistent with the practices taught under therapeutic crisis intervention training to all employees responsible for investigating complaints and licensing determinations for child caring institutions; requires DHHS to offer trauma support directly to all child welfare caseworkers.

Sec. 546. Foster Care Agency Administrative Rates

Establishes foster care administrative rate of \$55.20 for private child placing agencies under contract with DHHS; requires payments for independent living plus services at the statewide per diem to receive a 12% increase; requires providers to submit quarterly expenditure reports, if required by federal guidelines; requires DHHS to maintain current rates for private providers of residential services; declares intent of the legislature that the administrative rate increase would, in part, provide an increase in compensation to foster care agency caseworkers.

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. 553. Placement on Child Abuse and Neglect Central Registry

States legislative intent that a child protective services caseworker is prohibited from placing an individual on the child abuse and neglect central registry without prior court approval.

Sec. 554. Foster Care Closets

Allocates \$50,000 to a non-profit organization to allow foster care children to shop for clothing, hygiene products, and other essentials free of charge.

Sec. 555. Continuation of Foster Care Maintenance Payments

Requires DHHS to explore requirement that regularly scheduled maintenance payments to foster parents continue after a petition of adoption is has been filed with the court for a foster child until the child in no longer in the foster home.

Sec. 556. Family Foster Care Home Licensing Renewal

Requires DHHS to work to develop and implement a simpler and more streamlined process for annual license renewal for family foster care homes; requires DHHS to explore the development of a simpler and more efficient form of the license renewal application form for family foster care homes.

Sec. 557. State Vehicle Use for Foster Care Caseworkers

Allows that, if a state owned vehicle is available and not scheduled for use, DHHS may consider it to be an allowable vehicle for use by a child protective services caseworker or foster care caseworker for transportation to home visits or their own home.

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.

Sec. 559. Parent-to-Parent

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 after receiving reimbursement request.

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

Requires DHHS to maintain 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. 570. Per Diem Adoption Rate Increase

Allocates \$6.9 million to fund a \$3.00 increase to the contractor per diem adoption rate for licensed foster care agencies and nonprofit licensed adoption agencies; per diem rate to be separate from outcome based reimbursement system and not deducted from the total reimbursement an agency receives for placement or finalization of an adoption.

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. Family Incentive Grants to Foster Care Service Providers

Allocates \$1,375,000 for family incentive grants to help with home improvements needed by foster families; requires report.

Sec. 575. Kinship Caregiver Advisory Council

Allocates \$200,000 to provide support and coordinated services to the Kinship Caregiver Advisory Council.

Sec. 576. Kinship Caregiver Advisory Council Creation

Includes legislative intent that DHHS create the Kinship Caregiver Advisory Council to oversee the Kinship Caregiver Navigation Program.

Sec. 577. Kinship Caregiver Navigation Program

Requires DHHS to explore the establishment of a Kinship Caregiver Navigation Program.

Sec. 578. Foster Care Worker Apprenticeship Program

Requires DHHS to explore the development and implementation of a foster care apprenticeship program for college students majoring in social work or other human services field who are interested in working in child welfare; declares intent of legislature that DHHS implement the program in the following year and, if funding is available, that students in the program receive payment for their services; requires report.

Sec. 579. Court Redetermination Hearing Frequency

Requires caseworkers ensure a motion is filed with the court to request redetermination hearings to be more frequent than every 90 days when in the best interest of child victims of child abuse and neglect.

Sec. 580. Child Legal Representation Program

Allocates \$500,000 to implement 2 pilot projects to improve the quality of egal representation for children and parents in child protective hearings.

Sec. 581. Immediate Assistance Funding

Allocates \$50,000 for caseworkers to provide immediate assistance with urgent needs such as food and clothing for children upon removal from their home or other dangerous environment; requires DHHS to develop policies for the use and access of funds; 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. 592. Child Protective Services Data

Requires DHHS to provide quarterly reports that include certain CPS data from the most recent 30-day period.

Sec. 593. County Child Abuse and Child Neglect Investigation and Interview Protocols

Requires DHHS to conduct an annual review in each county of whether the standard child abuse and child neglect investigation and interview protocols required by the Child Protection Law have been adopted; requires report.

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 the part 1 funding for CPS-caseload staff 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 this section is unenforceable.)

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 deductions with collections pertaining to assistance provided in prior fiscal years; and 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; and 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; and requires a report.

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 persons who are not United States citizens, permanent resident aliens, or refugees 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 services.

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 drug felony after August 22, 1996 from the federal prohibition on receiving TANF and food assistance benefits.

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; and requires quarterly reports on Medicaid standards of promptness.

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 or human trafficking 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 \$20.00 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. 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, and defines "inappropriate use".

Sec. 677. Family Independence Program (FIP) Goals

Establishes state goal of having 50% of FIP cases involved in employment activities; requires semiannual reports, with quarterly data, 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 confirmation of resident addresses in FIP and SDA cases; prohibits individuals with homes worth more than \$200,000 from receiving assistance; and 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.

Sec. 689. Diaper Assistance Program

Requires DHHS to allocate funding to provide for statewide grants to purchase diapering products for low-income households.

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.

Sec. 715. Raise the Age

Requires counties and tribal entities to submit an approved raise the age fund budget plan to DHHS by March 1; if total funding requested by tribal entities are less than \$500,000, DHHS may reallocate funds to meet requests of counties; requires DHHS to reimburse counties and tribal entities a minimum of \$10,000; requires counties and tribal entities to submit amendments to the raise the age fund budget plan by deadlines established by DHHS; requires counties and tribal entities to submit payable estimates for raise the age funds to DHHS.

FIELD OPERATIONS AND SUPPORT SERVICES

Sec. 801. Food Assistance Program Error Rate

Requires the department to report monthly to the Legislature on the active case FAP payment error rate as provided to the U.S. Department of Agriculture – Food and Nutrition Services; and requires the department to report to the Legislature by March 1 on the corrective actions taken to mitigate FAP payment error rates and prevent federal penalties.

Sec. 802. Travel Reimbursement to Local County Board Members and Directors

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

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, increasing graduation rates, and reducing 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; 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; and 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. Requires DHHS to report by November 30 on payments made in the prior fiscal 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; and requires a 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. 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. 908. Uniform Community Mental Health Credentialing

States that contracts with PIHPs and CMHSPs must work toward implementing section 206b of the Mental Health Code on uniform community mental health services credentialing.

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. 913. Autism Navigator

Requires DHHS allocate funds for autism navigator programs and for contractors to meet performance-related metrics; and requires a report.

Sec. 914. Michigan Child Collaborative Care (MC3) Report

Requires DHHS to report on the outcomes of MC3.

Sec. 915. Substance Abuse Prevention and Treatment Block Grant

Requires DHHS to provide grants to local public entities that provide substance use disorder services and to 1 private entity that has a statewide contract to provide community-based substance use disorder services.

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 less than \$50.00 per hour and not more than \$55.00 per hour.

Sec. 926. Conference of Western Wayne Substance Use Disorder Project

Provides \$500,000 GF/GP to Conference of Western Wayne for a 10-bed substance use disorder detoxification project that utilizes specialized trauma therapists, peer support specialists, and medication assisted treatments; and requires a report.

Sec. 927. Uniform Behavioral Health Service Provider Audits

Requires DHHS to create a uniform community mental health services auditing process for CMHSPs and PIHPs, outlines auditing process requirements, and requires a 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 quarterly basis.

Sec. 940. Transferring 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; prohibits a CMHSP from receiving additional funding if the CMHSP transferred out funds during current fiscal year; requires CMHSPs to report any proposed reallocations prior to going into effect; and 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. 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 requires 3-year reevaluations, unless a clinician recommended an earlier reevaluation, and require maintenance of statewide provider trainings, limits practitioners who can perform a diagnostic evaluation and requires evaluations performed by a master's level practitioner to be reviewed by a second practitioner, provide fidelity reviews and secondary approvals, and prohibit specific providers from providing both evaluation and treatment; requires a report.

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. 964. Behavioral Health Fee Schedule

Requires DHHS to develop and implement a standardized fee schedule for Medicaid behavioral health services by October 1, to develop and implement adequacy standards for all contracts with PIHPs and CMHSPs, to development of fee schedule to prioritize and support essential service providers, and to include a fee schedule for psychiatric intensive care (revenue code 0204).

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. 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

Allocates \$600,000 in grants to recovery high schools specifically designated for students recovering from a substance use disorder.

Sec. 978. Recovery Community Organization

Allocates \$1.2 million 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.

Sec. 979. Adult Psychiatric Residential Treatment Facilities

Requires DHHS, if funds become available, to seek appropriate federal approvals to utilize Medicaid funding for services provided at adult psychiatric residential treatment facilities, and requires a report.

Sec. 995. Mental Health Diversion Council

Specifies that \$3.85 million is intended to address Mental Health Diversion Council recommendations; and requires a report.

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. 1005. Health Home Programs

Requires DHHS to maintain the number of behavioral health homes in PIHP regions 1, 2, and 8 and the number of opioid health homes in PIHP regions 1, 2, 4, and 9, and permits expansion into additional PIHP regions.

Sec. 1006. Intellectual or Developmental Disability Health Homes

Requires DHHS to explore implementing Medicaid health homes for individuals with intellectual or developmental disabilities.

Sec. 1007. Standalone Intellectual or Developmental Disability Medicaid Delivery System

Requires DHHS to explore the feasibility of implementing a standalone Medicaid delivery system for individuals with intellectual or developmental disabilities, and requires a report.

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. 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, crisis stabilization units, and psychiatric residential treatment facilities for the purpose of reducing waiting lists at state psychiatric hospitals.

Sec. 1011. Out-of-State Crisis Resolution and Outpatient Services

Allows a CMHSP to reimburse out-of-state providers of crisis resolution and outpatient services if the out-of-state provider is enrolled as a state Medicaid provider and the out-of-state provider is located closer to the client's home than an in-state provider.

Sec. 1012. Medicaid Reimbursement for Justice-Involved Individuals

States legislative intent that DHHS pursue any and all federal Medicaid waivers to maximize the use of Medicaid reimbursements for justice involved individuals.

Sec. 1013. Transportation to Preadmission Screening Units

Allows a CMHSP to permit a sheriff's office to use a qualified contracted entity to transport an individual for preadmission screening.

Sec. 1014. 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. 1015. Mental Health Block Grant

Requires DHHS to provide grants to local public entities that provide substance use disorder services and to 1 private entity that has a statewide contract to provide community-based mental health services.

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. 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. 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 Vacancy and Overtime Report

Requires DHHS to report on mandatory overtime, staff turnover, and staff wages.

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.

Sec. 1062. 5-Year Inpatient Psychiatric Bed Plan

Requires DHHS to report a 5-year plan to address need for public and private inpatient psychiatric beds for adults and children.

Sec. 1063. 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.

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. 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

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. 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. 1146. Bone Marrow Donor Program

Allocates \$250,000 to Versiti Blood Center for national marrow donor program tissue typing expenses associated with donor recruitment and collection services and for expanded services.

Sec. 1147. Blood Bank Programs

Allocates \$500,000 to Versiti Blood Center for a cord blood bank and to enhance collection of fetal umbilical cord blood and stem cells for transplant, expanded laboratory services, and expanded diversity of collections.

Sec. 1148. Human Embryo Constitution Informational Materials

Allocates \$100,000 for informational materials related to Section 27(2)(a) of Article 1 of the State Constitution of 1963 regarding human embryo and embryonic stem cell research.

Sec. 1151. Opioid Addiction Treatment Education Collaboration

Requires DHHS to coordinate with other state departments, law enforcement, Medicaid health plans, and 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. 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.

EPIDEMIOLOGY, EMERGENCY MEDICAL SERVICES, AND LABORATORY

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 of Homes

Provides that no less than \$6.9 million GF/GP and \$18.7 million of federal funds from the healthy homes program appropriation shall be allocated for lead abatement of homes; requires a report by April 1.

Sec. 1183. Emergency Medical Response Service Data Exemption

Prohibits DHHS from requiring a medical first response service to submit data to the Michigan emergency medical services information system if the service is located in a county with less than 85,000 population, and outlines written reporting required by medical first responders to others arriving at a site of emergency services in those counties. (Governor's signing letter states section is unenforceable.)

Sec. 1184. Emergency Medical Services - Process for Change in Guidance

Requires DHHS to review the process for consideration and implementation of changes proposed for EMS guidance or protocols; states improvements to be included; requires public website weekly updates of proposed changes including any proposed administrative rule changes, and requires a report by April 15.

Sec. 1185. Family Emergency Readiness Public Event

Allocates \$25,000 for a grant to fund a free family emergency readiness public expo event in Livingston County to educate local residents about preparedness in an emergency, disaster, or crisis.

Sec. 1186. Stroke and STEMI Initiative

Allocates \$3.0 million GF/GP to establish a statewide stroke and ST-elevation myocardial infarction (STEMI) care system integrated into the statewide trauma and EMS systems including facility designations and registries, as approved by stroke advisory and STEMI advisory subcommittees (Note: Establishment of subcommittees is proposed in Senate Bill 521, which is not enacted as of December 1, 2021).

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, some 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 spending minimums; requires a report by December 1. States distribution formula required to be used, and that allocations shall not be less than the previous fiscal year. New subsection (4) directs that funding shall be unappropriated if a local health officer has an emergency order under Section 2453 of the Public Health Code in effect as of October 1, 2021; does not apply if a county board of commissioners passes a non-binding resolution to support any such emergency orders. (Governor's signing letter states subsection (4) is unenforceable.)

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. 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. 1231. PFAS Contamination and Other Public Health Threats – Local Health Department ResponseAllocates 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 March 1 on previous year and current year expenditures.

Sec. 1232. Reimbursement for PFAS Environmental Contamination Response

States that DHHS may work to ensure that the United States Department of Defense reimburses 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. 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.

Sec. 1240. Rare Disease Advisory Council

Allocates \$70,000 to support a rare disease advisory council and responsibilities, including rare disease information access, and annual investigation and report on one rare disease including legislative recommendations.

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 previous 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. 1306. 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. 1307. Alternative Pregnancy and Parenting Program - VETOED

Allocates \$700,000 of TANF funding for an alternative pregnancy and parenting support program which must promote childbirth, alternatives to abortion, and grief counseling. States terms of establishing contract, goals for client outcomes, contractor requirements, 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 that funds appropriated for educational and other programs and services pertaining to family planning or reproductive health services be allocated by DHHS according to section 1 of Public Act 360 of 2002, which establishes 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 health promotion, prevention, and intervention, and to explore federal grant funding to address prevention services. Requires report by February 1 on planned spending and outcomes accomplished.

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 February 1 on program services provided in the previous 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 \$1,750,000 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. 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. 1321. Revise Education Modules Regarding Sexual Abuse Prevention

States that DHHS may revise the Michigan Model for Health curriculum for 2 education health modules to include ageappropriate information about the importance of consent, setting and respecting personal boundaries, and prevention of child sexual abuse.

Sec. 1322. State Immunization Policy and Practices Report

Requires DHHS to report to the legislature on state immunization policy and practices including a list of recommended vaccinations, and basis, rationale, and improvement in human health documented for each listed vaccination. Allocates \$50,000 to publish a summary informational brochure for free distribution to the public.

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).

Sec. 1342. School Children's Healthy Exercise Program

Allocates \$500,000 for school children's healthy exercise program for kindergarten through grade 8 in before- and after-school programs, incorporating evidence-based best practices. States program goals and requires a 20% match. Directs DHHS to seek third party financial support for program.

Sec. 1343. Oral Health Assessment for Children

Allocates \$1,760,000 of state and local funds, plus any additional private contributions, to establish and maintain a dental oral assessment program for school children as provided in Sec. 9316 of the Public Health Code.

Sec. 1345. Maternal Navigator Pilot Program - VETOED

Requires DHHS to establish 2 geographically diverse maternal navigator pilot programs with nonprofit organizations that promote childbirth and alternatives to abortion; states required services.

Sec. 1346. Pregnancy Resource Centers - VETOED

Allocates \$1.5 million for grants to pregnancy resource centers to be distributed equally to eligible entities that apply through December 31; defines "pregnancy resource centers".

Sec. 1347. Use of Funds for Activities Regarding Abortion or Human Embryo Use

Prohibits use of state funds for abortion counseling, referrals, or services, or for any activities regarding human cloning or research in which a human embryo is destroyed or discarded. (Governor's signing letter states section is unenforceable.)

Sec. 1348. Healthy Moms Healthy Babies Program Report

Requires DHHS to report by January 1 on any Healthy Moms Healthy Babies programs including established programs and any requests for proposals for a new program.

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, human growth hormone, mental health care to eligible patients, and sickle cell disease for persons age 21 and older.

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.

Sec. 1363. Van Andel Institute

Allocates \$1.0 million to the Van Andel Institute for biomedical research and science education.

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 older adults.

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

Allocates \$300,000 to the Prosecuting Attorneys Association of Michigan to support state prosecutors, adult protective service system, and criminal justice system to aid in identifying, investigating, and prosecuting elder abuse and financial exploitation cases; requires report to DHHS by March 1, and report to the legislature within 30 days after.

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. (Note: Similar boilerplate Sec. 509 in LARA FY 2021-22 budget includes reporting to Health and Human Services Appropriations Subcommittees).

Sec. 1426. Senior Friendly Caller Programs

Allocates \$40,000 to friendly reassurance and friendly caller programs through area agencies on aging for regular contact call checks for well-being and conversation with voluntary participating seniors aged 60 or older.

MEDICAL SERVICES ADMINISTRATION

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. 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. Prohibition on Contractual Services – Opioid Manufacturing Consultants

Prohibits DHHS from entering into consulting contracts with organizations that previously provided services to manufacturers of opioids related to creating marketing plans. (Governor's signing letter states section is unenforceable.)

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. 1512. Medicaid Utilization Report

Requires DHHS to continue to update the Medicaid utilization and net cost report to separate nonclinical administrative costs from actual claims and encounters.

Sec. 1513. Medicaid Inpatient Psychiatric Hospital Workgroup Report

Requires a report from the workgroup regarding updates to recommendations being implemented and barriers to implementation of any recommendations in accordance with Section 1513 of 2019 PA 67.

Sec. 1514. Claimsure

Allocates \$300,000 and federal match to support a predictive modeling program with the purpose of mitigating problems with provider billing accuracy for Medicaid claims.

Sec. 1515. Job Placement Agency Information Requests

Permits "qualified job placement agencies" to request contact information from DHHS for Healthy Michigan Plan recipients, defines "qualified job placement agencies".

Sec. 1517. Actuarial Analysis - Specialty Medicaid Managed Care Health Plan

Allocates funding to complete an actuarial analysis to assess the creation of a Medicaid managed care plan for children in foster care; provides for the requirements of specialty plan; and requires a report.

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. 1615. Encounter Claims Data Integrity

Requires the department to provide oversight of Medicaid claims encounter data to insure the integrity of actuarial rates; allows the department to request certain information from Medicaid health plans; and provides for the intent that the department conduct annual audits of Medicaid claims and provide for remedial actions to mitigate errors in actuarial rates.

Sec. 1616. Community Health Workers

Requires DHHS to consult with the federal government on allowable avenues to further utilize Community Health Workers as Medicaid providers; possible federal matching funds for services; and requires any expansion be geographically broad-based, evidence-based, and commensurate with applicable training.

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

Prohibits DHHS 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. 1626. Pharmacy Benefits Manager Reimbursements Report

Requires all pharmacy benefits managers that receive reimbursements from Medicaid health plans to report to the department on total prescriptions dispensed; wholesale acquisition cost of each drug in the state formulary; aggregate rebates, discounts, and concessions; aggregate administrative fees; aggregate amounts that did not pass through Medicaid health plans; aggregate reimbursements paid to contracting pharmacies; requires the department to report the consolidated information to the Legislature by March 1; and requires non-aggregate information provided to the department to remain confidential.

Sec. 1627. Medicaid Prescription Drug Report

Requires DHHS to report on fee-for-service and managed care current, and projected, prescription costs.

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

Allows 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. 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 after receipt of the final report.

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 \$1.1 million 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.

Sec. 1702. Private Duty Nursing Rate Increase

Requires DHHS to provide a 10% rate increase to private duty nursing services for Medicaid beneficiaries under the age of 21.

Sec. 1704. Enhanced Dental Benefit for Pregnant Women

Requires DHHS 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. 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

Allows 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.

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. 1788. Medicaid Reimbursement Rates - Ambulance QAAP

Requires DHHS to provide reimbursement rates for ambulance QAAP equal to, or greater than, Medicare rates at a specified locality.

Sec. 1790. Pediatric Psychiatric Services Rate Increase

Requires DHHS to maintain Medicaid reimbursements for pediatric psychiatric services at the currently established rate.

Sec. 1791. Neonatal Services Rates

Requires DHHS to provide Medicaid reimbursements for neonatal services at 95% of the Medicare rates for the listed current procedural terminology (CPT) codes.

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. 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.

Sec. 1802. Rural Hospital Payments

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 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.

Sec. 1803. Portable X-Ray and Ultrasound Provider Type

Requires DHHS to maintain Medicaid rules to allow for billing and establish 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 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".

Sec. 1810. Health Plan Encounter Data Reporting

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.

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, training of physicians in settings that include ambulatory sites and rural locations, and training practitioners of pediatric psychiatry services.

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. 1854. PACE Enrollment Cap

Requires DHHS to maintain an enrollment cap equal to, or greater than, 6,920 PACE slots.

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. 1869. MIDocs Local Funding - Residency Training Programs

Allows DHHS to allocate local and federally matched funding to community-based residency training programs accredited by the Accreditation Council for Graduate Medical Education (ACGME).

Sec. 1870. MIDocs Consortium

Appropriates \$6.4 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, with an exception for child and adolescent fellowships; requires MIDocs to work with DHHS to, when possible, prioritize training opportunities in state psychiatric hospitals and CMHSPs; maintain an advisory council; and establishes outcome and performance measures; and designates unexpended funds as work project appropriation.

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 January 22, 2021, defines "prior authorization"; and requires DHHS to explore including medications for the treatment of Duchenne Muscular Dystrophy to the list of Medicaid prescriptions not subject to prior authorization.

Sec. 1879. Single Preferred Drug List

Requires DHHS to maintain a standard preferred drug list for Medicaid manage care, requires any changes in the preferred drug list to made in consultation with the Medicaid managed care organizations and the Pharmacy and Therapeutics Committee. Requires a report.

Sec. 1881. Risk Corridor Prohibition

Prohibits a 2-way risk corridor during the current fiscal year.

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. Requires a report on projected costs by use and type of expense for that project once an expansion project award is made.

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 DHHS to report quarterly on the status of implementation plan to modernize MiSACWIS, as well as on the status of planning, implementation, operation, and progress to implement MiSACWIS; and requires a report on efforts to streamline foster care license renewals and applications.

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; and establishes outcomes and performance measures for enhancement.

Sec. 1905. Information Technology Spending Report

Requires DHHS to report quarterly on 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 comparable departments in 3 Midwestern states.

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. 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 the department to expend funds to develop and implement a comprehensive child welfare information system with the intent to replace the Michigan Statewide Automated Child Welfare Information System.

Sec. 1910. Information Technology Agile Software Development Plan

Specifies appropriations for each of the main DHHS information technology systems. Requires DHHS to implement an agile software development plan funded with a time and materials contract, and to establish the state or the public domain as the software owner. Software design shall be user centered. Requires report at project initiation, and further updates to the legislature upon request. Includes definitions of terms and requires a report on program development and implementation.

ONE-TIME APPROPRIATIONS

Sec. 1950. Community-Based Coverage Entity

Allocates \$1.0 million to Access Health to provide health coverage to low income workers.

Sec. 1951. Lead Poisoning Prevention Fund

Allocates \$10.0 million to the Lead Poisoning Prevention Fund established by Sec. 1913 of Article 6 of 2020 PA 155 for loans to landlords and homeowners to remediate lead hazards from their property.

Sec. 1952. Special Olympics Capital Improvement

Allocates \$1.0 million to the Special Olympics for capital improvements on a facility to ensure facility complies with the Americans with Disabilities Act of 1990.

Sec. 1953. Hospital Infrastructure Improvements

Allocates \$2.8 million to Sheridan Hospital for infrastructure improvements.

Sec. 1954. First Responder and Public Safety Mental Health

Allocates \$2.5 million to support firefighters, police officers, emergency medical personnel, dispatchers, and correctional officers suffering from post-traumatic stress and other mental health conditions.

Sec. 1955. Hospital Behavioral Health Pilot Program

Allocates \$4.5 million to McLaren Greater Lansing for a behavioral health pilot.

Sec. 1956. Healthy Communities Grant

Allocates \$300,000 for community healthy living, obesity prevention, and substance abuse prevention programs of Leaders Advancing and Helping Communities.

Sec. 1957. Kids' Food Basket

Allocates \$525,000 for a grant to a west Michigan non-profit organization, which provides meals to children from low-income families.

Sec. 1958. Narcotics Awareness Program

Allocates \$4.0 million to Families Against Narcotics for community-based addiction services.

Sec. 1959. Substance Abuse Community and School Outreach

Allocates \$250,000 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. 1960. Unified Clinics Resiliency Center for Families and Children

Requires DHHS to retain \$750,000 to develop and operate a resiliency center for families and children to provide services for those experiencing trauma and related conditions; requires report; establishes any remaining funding as a work project.

Sec. 1961. Jail Diversion Fund

Allocates \$5.0 million to create a Jail Diversion Fund administered by the mental health diversion council and joint taskforce on jail and pre-trial incarceration; establishing any remaining funds as a work project.

Sec. 1962. Statewide Health Information Exchange Projects

Allocates \$1.75 million to the Michigan Health Information Network (MiHIN) to implement health information technology strategies for data management, data clean-up, and data governance.

Sec. 1963. Senior Citizen Center Program Grants

Allocates \$150,000 for a grant program to support health-related senior programs at multipurpose senior citizen centers; maximum grant award is \$5,000 per program.

Sec. 1964. Nonprofit Mental Health Clinics

Allocates \$200,000 to nonprofit mental health clinics that accept clients regardless of their ability to pay through a sliding scale copayments and volunteer services. Maximum grant amount would be \$100,000 per clinic and would be matching funds based on amount collected through fundraising, and requires report.

Sec. 1965. Behavioral Health Patient Health Information Tool

Allocates \$600,000 to create an online behavioral health patient information tool. (2021 PA 133, has subsequently repealed section)

Sec. 1966. Human Trafficking Victims Services

Allocates \$500,000 to create and implement the human trafficking victims services expansion pilot program; pilot program is required to encourage development of human trafficking victims services, offer services to victims, provide training and technical assistance to victims services organizations, fund organizations that develop victims services; designates unexpended funds as a work project appropriation.

Sec. 1967. Legal Assistance

Allocates \$20,000 to the Allegan County Legal Assistance Center to provide civil case legal services to low-income individuals. Requires funds to be distributed by March 1.

Sec. 1968. Long-Term Care Facility Supports

Includes \$37.5 million of federal state fiscal recovery funds to provide one-time supplemental nursing facility payments.

Sec. 1969. Nurse Practitioner Expansion Pilot

Allocates \$1,573,000 for a 4-year pilot program to increase the number of prepared advanced practice psychiatric-mental health nurse practitioners to expand access to mental health services in underserved communities, through Wayne State University; designates unexpended funds as a work project appropriation.

Sec. 1970. Primary Care and Wellness Services

Allocates \$1.0 million for facility needs and services in Detroit and Wayne County through TEAM Cares/Team Wellness, which may include establishment of a psychiatric urgent care and crisis stabilization unit, and integrated services including primary care, mental health, substance use recovery, dental health and other support services.

Sec. 1971. Injury Control – Traumatic Brain Injury

Allocates \$5.0 million for evidence-based, real-time, quality assurance decision support software in the treatment of traumatic brain injury for hospitals providing trauma services; requires DHHS to seek federal matching funds; and designates unexpended funds as a work project appropriation. (2021 PA 133, has subsequently repealed and replaced section)

Sec. 1972. Special Residential Care Facility

Allocates \$300,000 to a residential community for children and adults with intellectual and developmental disabilities.

Sec. 1973. Northern Psychiatric Residency Program

Includes \$2.6 million GF/GP for 3 psychiatric residency training programs in Northern Michigan and the Upper Peninsula.

Sec. 1974. Complex Medical Condition Center

Allocates \$5.0 million for centers with infection-controlled environments for children with weak immune systems for medical care costs and facility improvements.

Sec. 1975. Multicultural Integration Funding

Includes \$4.4 million federal state fiscal recovery funds for multicultural agencies to provide physical and behavioral health services.

Sec. 1976. Technology Upgrades

Allocates funding to provide for upgrades of the CHAMPS system to support increased security and implement state and federally required compliance measures; streamline coordination between the state and healthcare contractors; and promote transparency in collaboration between the state and healthcare contractors.

Sec. 1977. Free Health Clinics

Allocates \$250,000 for grants to free health clinics to be distributed equally in the same manner as ongoing funds allocated under Sec. 1140 for free health clinics.

Sec. 1978. Home Health and Safety

Allocates \$5.0 million to provide for grants to low-income households for structural improvements to make them eligible for state weatherization assistance through the State Emergency Relief program; and provides for pilot program goals and requirements.



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AREAS OF RESPONSIBILITY

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Attorney General	Michael Cnossen
Auditor General	Viola Bay Wild
Bill Analysis	
	Edith Best; Jenny McInerney; Emily Smith; Sue Stutzky
Capital Outlay	
Civil Rights	Michael Cnossen
Community Colleges	•
Corrections	
Economic and Revenue Forecasting	
Education (Department)	·
Environment, Great Lakes, and Energy	Austin Scott
Executive Office	•
Fiscal Oversight, Audit, and Litigation	Mary Ann Cleary
Health and Human Services:	
	ity Services
	Ith Kevin Koorstra edicaid-backup Kent Dell
	Susan Frey
Higher Education	
Insurance and Financial Services	•
Judiciary	
Labor and Economic Opportunity	
Legislature	
Licensing and Regulatory Affairs	
Local Finance	
Lottery	•
Michigan Strategic Fund	Viola Bay Wild; Benjamin Gielczyk
Military and Veterans Affairs	
Natural Resources	
Natural Resources Trust Fund	Austin Scott
Retirement	Benjamin Gielczyk
Revenue Forecasting	Jim Stansell
Revenue Sharing	Jim Stansell; Benjamin Gielczyk
School Aid	. Samuel Christensen; Emily Hatch; Jacqueline Mullen
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