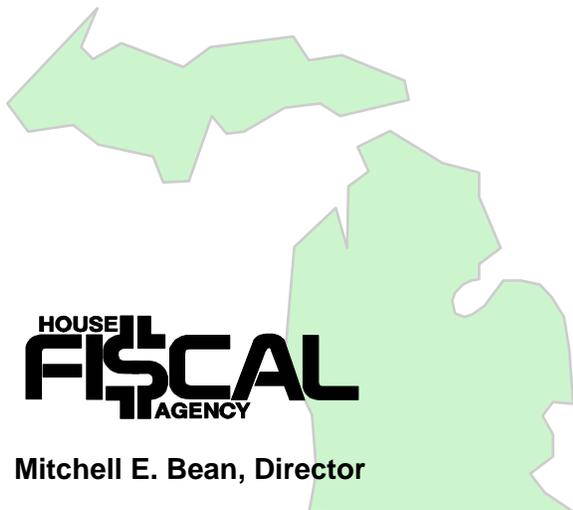


LINE ITEM AND BOILERPLATE SUMMARY

COMMUNITY HEALTH

**Fiscal Year 2003-04
Public Act 159 of 2003
House Bill 4392**

As Enacted



Mitchell E. Bean, Director

September 2003

Prepared and Compiled by:

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September 2003

TO: Members of the Michigan House of Representatives

The House Fiscal Agency has prepared a **Line Item Summary** for each of the FY 2003-04 appropriation acts. Each **Summary** contains line-by-line detail, including the amount and purpose of each appropriation line and information regarding related boilerplate sections, for a specific appropriation act. Following the line item detail, a brief explanation of each boilerplate section in the appropriations bill is provided.

Please note that ~~strikeouts~~ in this report show the effects of vetoes.

If you would like to obtain a Line Item Summary for a particular budget area, please contact Jeanne Dee, Administrative Assistant, at 373-8080.

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GLOSSARY

Frequently-Used State Budget Terms

Adjusted Gross

Total net amount of all line item gross appropriations less (or minus) interdepartmental grants (IDGs) and intradepartmental transfers (IDTs)

Boilerplate

Specific language sections contained in an appropriations act which direct, limit or restrict line item expenditures, and/or require reports

Budget Stabilization Fund (BSF)

The countercyclical economic and budget stabilization fund—also known as the "rainy day" fund

Federal Revenues

Federal grant or matchable revenues dedicated to specific programs

General Fund/General Purpose (GF/GP)

The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

Gross Appropriations (Gross)

The total of all applicable line item spending authorizations

Interdepartmental Grant (IDG)

Revenue or funds received by one state department from another state department (usually for a service the receiving department provides)

Intradepartmental Transfer (IDT)

Transfers or funds being provided from one appropriation unit to another in the same department

Lapses

Unspent/unobligated funds remaining in line item accounts at the end of the fiscal year

Line Items

Specific funding amount in an appropriations bill which establishes spending authorization for a particular program or function (may be for a single purpose or for multiple purposes)

Local Revenue

Revenues from local units of government

State Restricted (Restricted Funds)

State revenue dedicated to a specific fund; revenue which results from state mandates or initiatives; used for used for specific programs pursuant to the Constitution or statute

Private Funds

Revenues from non-government entities such as rents, royalties or interest payments, payments from hospitals, payments from individuals, and gifts and bequests

School Aid Fund (SAF)

The primary funding source for K-12 schools and Intermediate School Districts (ISDs)

Work Project

An account established to allow for certain specific unspent funds to be carried over from one fiscal year to a succeeding fiscal year or years

DEPARTMENT OF COMMUNITY HEALTH

The Department of Community Health (DCH) is responsible for the development of health policy and the management of Michigan's publicly-funded health care systems. The Department, established by Executive Order in 1996, consolidated the former Departments of Mental Health and Public Health with Medicaid and the Office of Drug Control Policy. In 1997, the Adult Home Help Program, and the Social Services to the Physically Disabled Program were also brought into the Department from the Family Independence Agency. The Office of Services to the Aging and the Crime Victim Services Commission was transferred from the Department of Management and Budget to Community Health in 1997 as well.

The Department's mission for the public mental health system is to serve citizens by diminishing the impact and incidence of developmental disability, emotional disturbance, and mental illness.

With respect to substance abuse treatment and prevention activities, the Department's mission is to promote the health and welfare of individuals through the reduction of substance abuse, and to participate in efforts to address its social, personal, and economic consequences.

The Community Public Health Administration seeks to protect and improve the health of Michigan's residents through disease prevention programs, working with vulnerable populations to control health problems, develop health service delivery systems, and prevent and control environmental health hazards.

The Department's Medical Services unit provides health care coverage for low income persons throughout the state who meet the eligibility requirements for Medicaid, MIChild, Elder Prescription Insurance Coverage, and indigent care programs.

The Office of Drug Control Policy's mission is to work with local law enforcement agencies and educational providers to reduce illegal drug use, lower crime rates, and educate young people about the dangers of substance abuse.

The mission of the Office of Services to the Aging is to promote independence and enhance the dignity of Michigan's older persons and their families through advocacy, leadership, and innovation of policies, programs, and services.

The Crime Victims Services Commission provides a combination of services, support, and compensation for the victims of crime.

Full-time equated unclassified positions	6.0	Full-time equated (FTE) positions not in the state classified service
Full-time equated classified positions	4,382.3	Full-time equated (FTE) positions in the state classified service
Average population	995.0	Average number of patients at four state-operated psychiatric hospitals, one center for persons with developmental disabilities, and the Forensic Center
GROSS APPROPRIATION	\$9,486,616,000 \$9,478,814,800	Total of all applicable line item appropriations for the Department of Community Health
Total interdepartmental grants and intradepartmental transfers	69,204,800	Total of all funds received from other departments
ADJUSTED GROSS APPROPRIATION	\$9,417,411,200 \$9,409,610,000	Total net amount of all line item gross appropriations less (or minus) interdepartmental grants (IDGs) and intradepartmental transfers (IDTs)
Total federal revenues	5,248,332,100 5,243,530,900	Total federal grant or matchable revenues
Total local revenues	812,256,100	Total revenues from local units of government

Total private revenues	57,844,000	Total private grant revenues
Tobacco settlement revenue	98,000,000	State revenue from the 1998 master settlement agreement with tobacco companies
Total other state restricted revenues	639,408,300	State revenue dedicated to a specific fund (other than the General Fund); or revenue earmarked for a specific purpose
GENERAL FUND/ GENERAL PURPOSE	\$2,561,570,700 \$2,558,570,700	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 102: DEPARTMENTWIDE ADMINISTRATION

This appropriation unit contains funding for the centralized administrative functions of the Department of Community Health and the Developmental Disabilities Council.

Full-time equated unclassified positions	6.0	Full-time equated (FTE) positions not in the state classified service
Full-time equated classified positions	286.9	Full-time equated (FTE) positions in the state classified service supporting departmental administration and management, certificate of need program administration, Developmental Disabilities Council, and primary care services
Director and other unclassified - 6.0 FTE positions	\$581,500	Salaries of the Director and five other full-time equated positions which are not part of the state's civil service classified system; salaries do not include fringe benefits Funding Source(s): GF/GP 581,500
<i>Related Boilerplate Section(s): None</i>		
Community health advisory council	28,900	Miscellaneous expenses associated with a 15-member advisory council created pursuant to Executive Order 1997-4 to advise the Director of Department of Community Health on developing and implementing community health policies and services Funding Source(s): GF/GP 28,900
<i>Related Boilerplate Section(s): None</i>		
Departmental administration and management – 265.5 FTE positions	23,490,400	Funds administrative staff responsible for carrying out the powers and duties of the Department of Community Health which includes FTE positions within the Bureau of Budget and Audit, Bureau of Finance, Bureau of Human Resources and Administrative Service, Administrative Tribunal, Health Policy, Regulations, and Professions Administration Funding Source(s): Federal 6,823,500 Restricted 579,800 GF/GP 16,087,100
<i>Related Boilerplate Section(s): None</i>		
Certificate of need program administration - 10.0 FTE positions	944,800	Funds FTE positions, contractual services, supplies, travel, equipment, and other costs related to carrying out the Certificate of Need (CON) program, which is a state regulatory program intended to balance cost, quality, and access issues, and ensure that only needed health services and facilities are developed in Michigan Funding Source(s): IDG 101,600 Restricted 843,200
<i>Related Boilerplate Section(s): None</i>		

Worker's compensation program	9,550,700	Central funding source for all worker's compensation claims against the Department; funds wage and salary and related fringe benefits for employees who return to work under limited duty assignments Funding Source(s): GF/GP 9,550,700 <i>Related Boilerplate Section(s): 301</i>
Rent and building occupancy	8,300,100	Payment for rental space in privately-owned buildings in various statewide locations such as buildings formerly under the jurisdiction of the Department of Public Health and the Chandler Building; payments to Department of Management and Budget for rent, security, and operating costs of state-owned buildings Funding Source(s): Federal 2,304,500 Private 35,900 Restricted 157,000 GF/GP 5,802,700 <i>Related Boilerplate Section(s): None</i>
Developmental disabilities council and projects - 10.0 FTE positions	2,743,600	A 21-member Council required by both federal and state law, and funded completely with federal dollars; Council is responsible for development and implementation of a state plan to improve the capacity of the service delivery network, establishment of local interagency coordinating committees, and advocacy for persons with developmental disabilities Funding Source(s): Federal 2,743,600 <i>Related Boilerplate Section(s): None</i>
Rural health services	1,377,900	Funds awarded in a contract to the Michigan Center for Rural Health for coordinating, planning, and advocating for improved health and health care for residents in rural areas, to assist small rural hospitals to comply with federal privacy and prospective pay system guidelines, providing technical assistance to the Department on rural health issues and programs Funding Source(s): Federal 1,251,900 GF/GP 126,000 <i>Related Boilerplate Section(s): None</i>
Michigan essential health care provider program	1,391,700	A line item previously transferred from the Medical Services Administration appropriation unit that is administered by the Executive Office; funds are used to assist primary care providers who practice in designated medically underserved areas in the repayment of health education loans Funding Source(s): Federal 696,300 Private 150,000 GF/GP 545,400 <i>Related Boilerplate Section(s): 304</i>

Primary care services - 1.4 FTE positions	2,790,100	A line item previously transferred from the Medicaid Services Administration appropriation unit that is administered by the Executive Office; grants to community health centers for primary health care, outreach, and health education services in medically underserved areas
		Funding Source(s): Federal 1,886,200 GF/GP 903,900

Related Boilerplate Section(s): 305, 307

GROSS APPROPRIATION	\$51,199,700	Total of all applicable line item appropriations
Interdepartmental grant from the department of treasury, Michigan state hospital finance authority	101,600	Interdepartmental grant from the Department of Treasury for part of the costs related to the certificate of need program
Total federal revenues	15,706,000	Federal revenues include Medicaid (Title XIX) revenue, loan repayment, preventive services block grant, primary care grants, random moment sampling cost revenue, substance abuse block grant revenue, family support demonstration grant revenue, maternal and child health block grant, rural health flexibility grant, developmental disability grant, immunization grant, and WIC revenue
Total private revenues	185,900	Private revenue realized from rent and building occupancy charges and loan repayments on behalf of providers in underserved areas
Total other state restricted revenues	1,580,000	Revenues which include the Michigan Health Initiative, newborn screening fees, and certificate of need fees
GENERAL FUND/ GENERAL PURPOSE	\$33,626,200	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 103: MENTAL HEALTH/SUBSTANCE ABUSE SERVICES ADMINISTRATION AND SPECIAL PROJECTS

This appropriation unit contains funding for the administration of mental health and substance abuse services and several mental health and substance abuse programs. Protection and advocacy services, an agency designated by the Governor which is independent of the public mental health system, is also appropriated for in this unit.

Full-time equated classified positions	83.3	Full-time equated (FTE) positions in the state classified service supporting mental health/substance abuse program administration
Mental health/substance abuse program administration - 83.3 FTE positions	\$9,135,900	Funds staff responsible for administering the mental health and substance abuse program for the Department of Community Health; funds used to finance contracts related to the administration of mental health and substance abuse programs; private funds used to evaluate Assertive Community Treatment (ACT) services and outcomes for persons with serious mental illness and to access the relationship of practices in ACT programs to consumer outcomes; new federal funds used to support administrative costs related to the federal state incentive program grant <div style="text-align: right;"> Funding Source(s): Federal 1,754,700 Private 190,000 Restricted 182,300 GF/GP 7,008,900 </div>
<i>Related Boilerplate Section(s): None</i>		
Consumer involvement program	189,100	Program to assist consumer participation and leadership in departmental policy/planning forums; program to provide assistance for consumer self-help groups and a phone hotline <div style="text-align: right;"> Funding Source(s): GF/GP 189,100 </div>
<i>Related Boilerplate Section(s): None</i>		
Gambling addiction	3,500,000	Funds used for education, prevention, research, and treatment services related to pathological gambling addictions <div style="text-align: right;"> Funding Source(s): Restricted 3,500,000 </div>
<i>Related Boilerplate Section(s): 313</i>		
Protection and advocacy services support	777,400	An agency, as designated by the Governor, which has the authority to pursue legal, administrative, and other appropriate remedies to protect the rights of persons with mental illness and developmental disabilities, and investigate allegations of abuse or neglect of persons with mental illness and developmental disabilities <div style="text-align: right;"> Funding Source(s): GF/GP 777,400 </div>
<i>Related Boilerplate Section(s): 350</i>		

Mental health initiatives for older persons	1,349,200	Program which provides respite and day care services, and provides training to home health care providers and caregivers in the nature and/or progression of Alzheimer's disease and related disorders; new federal funds used to improve primary care coordination and service capacity, and better integrate community-base persons with dementia Funding Source(s): Federal 300,000 GF/GP 1,049,200
<i>Related Boilerplate Section(s): None</i>		
Community residential and support services	3,838,200	Funds primarily used to finance the costs of community residential leases under the responsibility of the Department Funding Source(s): Federal 300,000 GF/GP 3,538,200
<i>Related Boilerplate Section(s): None</i>		
Highway safety projects	1,837,200	Funds are combined with funds from the Department of State Police/Office of Highway Safety Planning and used for the development and distribution of pamphlets, brochures, videos, and public service announcements promoting substance abuse prevention and highway safety Funding Source(s): Federal 1,837,200
<i>Related Boilerplate Section(s): None</i>		
Federal and other special projects	1,977,200	Grant awards for mental health and substance abuse treatment programs and statewide needs assessment studies Funding Source(s): Federal 1,977,200
<i>Related Boilerplate Section(s): None</i>		
GROSS APPROPRIATION	\$22,604,200	Total of all applicable line item appropriations
Total federal revenues	6,169,100	Federal revenues include oil/gas royalty revenue, Medicaid (Title XIX) revenue, substance abuse block grant revenue, competitive federal grants revenue, federal state incentive grant funds, federal Alzheimer grant funds, and Department of Transportation's federal highway funds
Total private revenues	190,000	Private funds from the Flinn Family Foundation
Total other state restricted revenues	3,682,300	Substance abuse licensing fees and fines, Michigan Health Initiative funds, lottery and horse racing revenue, and casino licensing fees
GENERAL FUND/ GENERAL PURPOSE	\$12,562,800	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 104: COMMUNITY MENTAL HEALTH/SUBSTANCE ABUSE SERVICES PROGRAMS

This appropriation unit contains funding for: the community mental health services programs (CMHSPs) or specialty prepaid health plans which have been established pursuant to provisions of the state's Mental Health Code to provide services for persons who have a serious mental illness, developmental disability, or serious emotional disturbance and pursuant to federal provisions which allow for the procurement of Medicaid Specialty Prepaid Health Plans, respite services, multicultural services, federal mental health block grant, and civil service charges. This appropriation unit also contains funding for substance abuse services programs.

Full-time equated positions		2.5 Full-time equated (FTE) positions in the state classified service supporting implementation of the federal mental health block grant
Medicaid mental health services	\$1,372,625,900	<p>Medicaid managed care capitated funding for CMHSPs or specialty prepaid health plans that serve residents of the 83 counties within the state; mental health services provided directly by a CMHSP or a specialty prepaid health plan, or by contract with public or private agencies</p> <p style="text-align: right;">Funding Source(s): Federal 796,933,300 Local 26,000,000 GF/GP 549,692,600</p> <p style="text-align: right;"><i>Related Boilerplate Section(s): 401, 402, 404, 418, 428, 442, 450</i></p>
Community mental health non-Medicaid services	328,394,100	<p>Non-Medicaid services funding for CMHSPs or specialty prepaid health plans that serve residents of the 83 counties within the state; mental health services provided directly by the CMHSP or specialty prepaid health plan, or by contract with public or private agencies</p> <p style="text-align: right;">Funding Source(s): Restricted 1,582,400 GF/GP 326,811,700</p> <p style="text-align: right;"><i>Related Boilerplate Section(s): 401, 402, 404, 428, 442, 450</i></p>
Medicaid adult benefits waiver	40,000,000	<p>A new line created in which funds are provided to CMHSPs or specialty prepaid health plans to provide mental health benefits to persons who are currently not Medicaid eligible through a federal waiver</p> <p style="text-align: right;">Funding Source(s): Federal 27,648,000 GF/GP 12,352,000</p> <p style="text-align: right;"><i>Related Boilerplate Section(s): 442</i></p>
Multicultural services	3,663,800	<p>Funds provided to CMHSPs or affiliates of CMHSPs to contract with providers that serve multicultural populations such as Chinese American, Asian American, Hispanics, and Arab/Chaldean; funds also provided to the Michigan Inter-Tribal Council, Jewish Federation, and Vietnam Veterans</p> <p style="text-align: right;">Funding Source(s): GF/GP 3,663,800</p> <p style="text-align: right;"><i>Related Boilerplate Section(s): 403</i></p>

Medicaid substance abuse services	27,788,900	Capitated funds for Medicaid substance abuse services that are to be managed by selected CMHSPs or specialty prepaid health plans pursuant to the federal Health Care Financing Administration's approval of Michigan's 1915(b) waiver request; CMHSPs or specialty prepaid health plans that are not coordinating agencies for substance abuse services may contract with coordinating agencies for these services Funding Source(s): Federal 16,136,000 GF/GP 11,652,900
<i>Related Boilerplate Section(s): 402, 404, 409, 414, 418, 428</i>		
Respite services	1,000,000	Supports contracts with CMHSPs or specialty prepaid health plans to provide respite care services primarily for children with serious emotional disturbance and their families; care is provided both in the home and out of the home in residential facilities Funding Source(s): GF/GP 1,000,000
<i>Related Boilerplate Section(s): None</i>		
CMHSP, purchase of state services contracts	97,115,800	Funds used by CMHSPs or specialty prepaid health plans to either purchase state services for clients in their catchment areas or develop their own community alternatives utilization of state hospitals and centers Funding Source(s): GF/GP 97,115,800
<i>Related Boilerplate Section(s): None</i>		
Civil service charges	2,065,500	Funds for the 1% civil service charges authorized by the Michigan Constitution of 1963 Funding Source(s): GF/GP 2,065,500
<i>Related Boilerplate Section(s): 204</i>		
Federal mental health block grant - 2.5 FTE positions	15,317,400	Funds made available by the federal government for community-based services for adults with serious mental illness and children with serious emotional disturbances; also funds FTE positions, contractual services, supplies, travel, and other costs related to administering the federal block grant Funding Source(s): Federal 15,317,400
<i>Related Boilerplate Section(s): None</i>		
State disability assistance program substance abuse services	2,509,800	Funds for this program support per diem room and board payments for needy persons 18 years of age or older, or emancipated minors who reside in substance abuse residential facilities Funding Source(s): GF/GP 2,509,800
<i>Related Boilerplate Section(s): 406, 409</i>		

Community substance abuse prevention, education, and treatment programs	80,548,400	Funds for these programs are to be expended for contracting with coordinating agencies for substance abuse services or designated service providers in which the care and services provided to individuals with both mental illness and substance abuse diagnoses are coordinated; funds are also authorized to coordinating agencies for chemically dependent pregnant women and children; funds are also authorized for the Salvation Army Harbor Light program; new federal grant funds authorized for coordinating agencies to better identify, coordinate, and allocate resources to address substance abuse problems
		Funding Source(s):
		Federal 61,957,900
		Restricted 1,460,000
		GF/GP 17,130,500

Related Boilerplate Section(s): 407, 408, 409, 410, 412, 423

GROSS APPROPRIATION \$1,971,029,600 Total of all applicable line item appropriations

Total federal revenues	917,992,600	Federal revenues include Medicaid (Title XIX) revenue, Title XXI revenue, mental health block grant revenue, substance abuse block grant funds, and federal state incentive program grant funds
Total local revenues	26,000,000	Local funds received from CMHSPs or specialty prepaid health plans
Total other state restricted revenues	3,042,400	Substance abuse licensing fees and fines, and lease/rental revenue
GENERAL FUND/ GENERAL PURPOSE	\$1,023,994,600	The state's primary operating fund; the portion of the State's General Fund that does not include restricted revenues

**SECTION 105: STATE PSYCHIATRIC HOSPITALS,
CENTERS FOR PERSONS WITH DEVELOPMENTAL DISABILITIES,
AND FORENSIC AND PRISON MENTAL HEALTH SERVICES**

This appropriation unit contains funding for: three state-operated psychiatric hospitals for adults with mental illness; one state-operated psychiatric hospital for children and adolescents with mental illness; one state-operated center for persons with developmental disabilities; the Forensic Center which is created pursuant to the state's Mental Health Code; and prisoner mental health services in which the Department of Community Health assumes responsibility for prisoners under the jurisdiction of the Department of Corrections. This appropriation 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 equipment. Funding for federal and private projects are also included in this appropriation unit.

Total average population	995.0	Average number of patients at state-operated psychiatric hospitals for adults, children, and adolescents with mental illness, a state center for persons with developmental disabilities, and the Forensic Center												
Total full-time equated classified positions	3,060.4	Full-time equated (FTE) positions in the state classified service supporting the operation of state psychiatric hospitals for adults, children, and adolescents with mental illness, a state center for persons with developmental disabilities, the Forensic Center, Forensic mental health services provided to the Department of Corrections, and closed-site, transition, and related costs												
Caro regional mental health center-psychiatric hospital - adult - 409.2 FTE positions and 167.0 average population	\$36,376,400	<p>Funds FTE positions, contractual services, supplies, materials, food, drugs, fuel and utilities, travel and other costs associated with operating a state-operated psychiatric hospital for adults with mental illness; hospital located in Caro, Michigan</p> <table border="0" style="margin-left: 40px;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">1,700,000</td> </tr> <tr> <td></td> <td>Local</td> <td style="text-align: right;">3,203,000</td> </tr> <tr> <td></td> <td>CMHSP</td> <td style="text-align: right;">30,006,900</td> </tr> <tr> <td></td> <td>Restricted</td> <td style="text-align: right;">1,466,500</td> </tr> </table> <p style="text-align: right; margin-right: 40px;"><i>Related Boilerplate Section(s): 604, 605, 606</i></p>	Funding Source(s):	Federal	1,700,000		Local	3,203,000		CMHSP	30,006,900		Restricted	1,466,500
Funding Source(s):	Federal	1,700,000												
	Local	3,203,000												
	CMHSP	30,006,900												
	Restricted	1,466,500												
Kalamazoo psychiatric hospital - adult - 317.9 FTE positions and 115.0 average population	20,568,200	<p>Funds FTE positions, contractual services, supplies, materials, food, drugs, fuel and utilities, travel and other costs associated with operating a state-operated psychiatric hospital for adults with mental illness; hospital located in Kalamazoo, Michigan</p> <table border="0" style="margin-left: 40px;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">859,600</td> </tr> <tr> <td></td> <td>Local</td> <td style="text-align: right;">1,996,500</td> </tr> <tr> <td></td> <td>CMHSP</td> <td style="text-align: right;">16,186,000</td> </tr> <tr> <td></td> <td>Restricted</td> <td style="text-align: right;">1,526,100</td> </tr> </table> <p style="text-align: right; margin-right: 40px;"><i>Related Boilerplate Section(s): 604, 605, 606</i></p>	Funding Source(s):	Federal	859,600		Local	1,996,500		CMHSP	16,186,000		Restricted	1,526,100
Funding Source(s):	Federal	859,600												
	Local	1,996,500												
	CMHSP	16,186,000												
	Restricted	1,526,100												

Walter P. Reuther psychiatric hospital - adult – 452.0 FTE positions and 244.0 average population	38,718,800	Funds FTE positions, contractual services, supplies, materials, food, drugs, fuel and utilities, travel and other costs associated with operating a state-operated psychiatric hospital for adults with mental illness; hospital located in Westland, Michigan
		Funding Source(s):
		Federal 2,242,900
		Local 3,806,500
		CMHSP 30,265,200
		Restricted 2,404,200

Related Boilerplate Section(s): 604, 605, 606

Hawthorn center - psychiatric hospital - children and adolescents - 242.6 FTE positions and 80.0 average population	20,370,500	Funds FTE positions, contractual services, supplies, materials, food, drugs, fuel and utilities, travel and other costs associated with operating a state-operated psychiatric hospital for children and adolescents with mental illness; hospital located in Northville, Michigan
		Funding Source(s):
		Federal 8,868,200
		Local 1,721,100
		CMHSP 9,437,100
		Restricted 344,100

Related Boilerplate Section(s): 604, 605, 606

Mount Pleasant center - developmental disabilities - 428.1 FTE positions and 164.0 average population	29,107,100	Funds FTE positions, contractual services, supplies, materials, food, drugs, fuel and utilities, travel and other costs associated with primarily operating a state-operated center for persons with developmental disabilities; center located in Mt. Pleasant, Michigan
		Funding Source(s):
		Federal 15,834,200
		Local 1,583,400
		CMHSP 11,220,600
		Restricted 468,900

Related Boilerplate Section(s): 604, 605, 606

Center for forensic psychiatry - 495.0 FTE positions and 225.0 average population	41,785,400	Funds FTE positions, contractual services, supplies, materials, food, drugs, fuel and utilities, travel and other costs associated with operating the Forensic Center; major functions of the Forensic Center include: providing psychiatric treatment for criminal defendants ruled incompetent to stand trial and/or acquitted by reason of insanity, providing specialized mental health services for transferred prisoners, providing diagnostic services to the criminal justice system, and providing examinations conducted by multi-disciplinary teams on an outpatient basis at the Center and several other sites. Center located in Ann Arbor, Michigan
		Funding Source(s):
		Federal 5,000
		Local 2,917,800
		Restricted 117,300
		GF/GP 38,745,300

Related Boilerplate Section(s): 604, 605, 606

Forensic mental health services provided to the department of corrections - 704.6 FTE positions	68,120,600	Program in which the Department of Community Health assumes responsibility for the provision of mental health services to prisoners under the jurisdiction of the Department of Corrections through an interdepartmental agreement. Services include: residential treatment/clinical programs for the prisoners in which the Department of Corrections maintains responsibility for basic care and custody, acute psychiatric care beds for prisoners with mental illness, and the Huron Valley Center site for specialized mental health services in which the Department of Community Health maintains responsibility for basic care and custody Funding Source(s): IDG 68,120,600
<i>Related Boilerplate Section(s): 603</i>		
Revenue recapture	750,000	Project is for the purpose of generating additional revenues from third parties related to cases which have been closed or are inactive; revenue received through project efforts are to be appropriated for departmental costs and contractual fees associated with these retroactive collections Funding Source(s): Federal 375,000 Restricted 375,000
<i>Related Boilerplate Section(s): 601(2)</i>		
IDEA, federal special education	120,000	Federal funds available for persons with mental illness to supplement special education programs in state psychiatric hospitals; allocations based on annual counts of students aged 3 through 21 Funding Source(s): Federal 120,000
<i>Related Boilerplate Section(s): None</i>		
Special maintenance and equipment	335,300	Funds used for maintenance projects at state hospitals and centers; funds client-related, administrative, and housekeeping/maintenance equipment needs; program funds for the maintenance and operation of leased properties Funding Source(s): Restricted 332,500 GF/GP 2,800
<i>Related Boilerplate Section(s): None</i>		
Purchase of medical services for residents of hospitals and centers	1,358,200	Purchase of special, emergency, and other medical-related services requiring overnight stays for residents of state hospitals and centers without insurance or the ability to pay Funding Source(s): GF/GP 1,358,200
<i>Related Boilerplate Section(s): None</i>		
Closed site, transition, and related costs - 11.0 FTE positions	1,067,200	Costs for closed hospital sites such as unemployment compensation, terminal payouts like sick leave payments and grievance settlements, safety and power plant operations, and phase-out costs associated with the final disposition of property Funding Source(s): GF/GP 1,067,200
<i>Related Boilerplate Section(s): 605</i>		

Severance pay	216,900	Payments to employees with more than one year of service who have been laid off because of census reductions or closures of state hospitals and centers Funding Source(s): GF/GP 216,900 <i>Related Boilerplate Section(s): None</i>
Gifts and bequests for patient living and treatment environment	500,000	Authorizes the Department of Community Health to accept gifts and bequests; funds are to be used to provide specific enhancements for residents of state-operated facilities, consistent with the stipulation of the donor Funding Source(s): Private 500,000 <i>Related Boilerplate Section(s): 602</i>
GROSS APPROPRIATION	\$259,394,600	Total of all applicable line item appropriations
Interdepartmental grant from the department of corrections	68,120,600	Interdepartmental grant from the Department of Corrections for costs related to providing forensic mental health services
Total federal revenues	30,004,900	Federal revenues include Medicaid (Title XIX) revenue, national school lunch program revenue, and IDEA, federal special education revenue
CMHSP, purchase of state services contracts	97,115,800	Funds which flow from CMHSPs and specialty prepaid health plans as part of the authorization process; funds offset the line item appropriation contained within the Community Mental Health/Substance Abuse Services Programs appropriation unit
Other local revenues	15,228,230	Local county match revenue, and local school aid funds
Total private revenues	500,000	Gifts and bequests revenue
Total other state restricted revenues	7,034,600	Miscellaneous revenue, sheltered workshop revenue, first/third party revenue, and lease/rental revenue
GENERAL FUND/ GENERAL PURPOSE	\$41,390,400	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 106: PUBLIC HEALTH ADMINISTRATION

This appropriation unit provides funding for the administrative, policy, and leadership functions necessary to ensure the implementation of the public health mission.

Full-time equated classified positions	76.3	Full-time equated (FTE) positions in the state classified service supporting public health executive administration and vital records and health statistics
Executive administration - 7.0 FTE positions	\$1,014,300	Funding supports FTE positions, contractual services, supplies, travel, equipment, and other related costs within the Community Public Health Administration and the minority health program <div style="text-align: right; margin-left: 20px;"> Funding Source(s): Restricted 167,200 GF/GP 847,100 </div>
<i>Related Boilerplate Section(s): None</i>		
Minority health grants and contracts	650,000	Funding for competitive and non-competitive grants, contracts, and projects to improve the health status of minorities, reduce the gap between minority and non-minority health, and improve minority access to existing health services. Funding for community health representatives to the Native American population who provide health education, outreach, and advocacy services <div style="text-align: right; margin-left: 20px;"> Funding Source(s): Federal 650,000 </div>
<i>Related Boilerplate Section(s): None</i>		
Vital records and health statistics - 69.3 FTE positions	6,141,700	Supports FTE positions and related costs and contracts to administer the state's vital records and statistics system: registration of all vital events, maintaining the repository of vital record documents and data and the electronic transferal system, issuing certified copies of records, amending records, and compiling and publishing statistics on mortality, morbidity, and certain medical conditions <div style="text-align: right; margin-left: 20px;"> Funding Source(s): IDG 447,800 Federal 1,395,100 Restricted 2,796,200 GF/GP 1,502,600 </div>
<i>Related Boilerplate Section(s): None</i>		
GROSS APPROPRIATION	\$7,806,000	Total of all applicable line item appropriations
Interdepartmental grant from family independence agency	447,800	Interdepartmental grant of federal funds from the Family Independence Agency for vital records assistance related to FIA paternity cases
Total federal revenues	2,045,100	Federal funds include preventive health and health services block grant, vital statistics grant, Title XIX Medicaid funds, cancer registry grant, and social security birth enumeration grant
Total other state restricted revenues	2,963,400	State restricted revenues include vital records fees, and Michigan Health Initiative Fund revenue from the software tax (1987 PA 258)

GENERAL FUND/ GENERAL PURPOSE	\$2,349,700	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues
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SECTION 107: INFECTIOUS DISEASE CONTROL

This appropriation unit provides funding to prevent and control the morbidity, disability, and death associated with communicable diseases through assessment, surveillance, intervention, and evaluation.

Full-time equated classified positions	51.3	Full-time equated (FTE) positions in the state classified service supporting AIDS prevention, testing, and care programs, immunization program management and field support, and sexually transmitted disease control management and field support									
AIDS prevention, testing, and care programs - 13.0 FTE positions	\$29,158,600	<p>Funding supports FTE positions and related costs and contracts to support the following programs: <u>AIDS counseling and testing</u> and partner notification for anyone who tests positive for HIV/AIDS <u>Community-based HIV prevention planning</u> <u>HIV/AIDS education and outreach grants</u> to local health departments and community groups, funds for several AIDS information hotlines, and development and distribution of educational pamphlets <u>HIV/AIDS risk reduction program</u> focusing on African-Americans and women through prevention, care, and laboratory testing <u>HIV/AIDS referral and care network grants</u> to regional networks which develop and deliver health care to families and individuals living with HIV/AIDS; funding supports AIDS drug assistance (ADAP) and dental programs</p> <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">22,965,700</td> </tr> <tr> <td></td> <td>Private</td> <td style="text-align: right;">1,847,000</td> </tr> <tr> <td></td> <td>Restricted</td> <td style="text-align: right;">4,345,900</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 801, 802, 803</i></p>	Funding Source(s):	Federal	22,965,700		Private	1,847,000		Restricted	4,345,900
Funding Source(s):	Federal	22,965,700									
	Private	1,847,000									
	Restricted	4,345,900									
Immunization local agreements	13,990,300	<p>Provides funds for the following: local health department and community health center immunization clinics, vaccinations for Medicaid-eligible children, statewide immunization registry, and other vaccination projects.</p> <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">9,428,200</td> </tr> <tr> <td></td> <td>Restricted</td> <td style="text-align: right;">1,750,000</td> </tr> <tr> <td></td> <td>GF/GP</td> <td style="text-align: right;">2,812,100</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>	Funding Source(s):	Federal	9,428,200		Restricted	1,750,000		GF/GP	2,812,100
Funding Source(s):	Federal	9,428,200									
	Restricted	1,750,000									
	GF/GP	2,812,100									
Immunization program management and field support - 14.0 FTE positions	1,582,100	<p>Supports FTE administrative and staff positions and related costs of administering the state immunization program</p> <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">1,016,200</td> </tr> <tr> <td></td> <td>Restricted</td> <td style="text-align: right;">274,100</td> </tr> <tr> <td></td> <td>GF/GP</td> <td style="text-align: right;">291,800</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>	Funding Source(s):	Federal	1,016,200		Restricted	274,100		GF/GP	291,800
Funding Source(s):	Federal	1,016,200									
	Restricted	274,100									
	GF/GP	291,800									

Sexually transmitted disease control local agreements	3,494,900	Provides funds to local public health departments to monitor the occurrence of sexually transmitted diseases in all areas of the state, with emphasis on the 15 highest incidence areas which represent 90% of all cases. Services include: surveillance, diagnosis, primary treatment, screening, casefinding, prevention, and laboratory. Funding Source(s): Federal 3,073,100 GF/GP 421,800
<i>Related Boilerplate Section(s): None</i>		
Sexually transmitted disease control management and field support - 24.3 FTE positions	3,377,100	Supports state administration and staff FTE positions and related costs, to monitor occurrence of sexually transmitted diseases, to promote prevention and education, and to provide support for state, local and national STD goals. Funding Source(s): Federal 1,109,800 Restricted 1,180,000 GF/GP 1,087,300
<i>Related Boilerplate Section(s): None</i>		
GROSS APPROPRIATION	\$51,603,000	Total of all applicable line item appropriations
Total federal revenues	37,593,000	Federal funds include preventive health and health services block grant, maternal and child health services block grant, Title XIX Medicaid funds, immunization grant, HIV prevention grant, Ryan White Title II HIV care grants, HIV/AIDS client data grant, and sexually transmitted disease control grants
Total private revenues	1,847,000	Private funds from pharmaceutical manufacturer rebates for AIDS drug assistance program
Total other state restricted revenues	7,550,000	State restricted revenues include Michigan Health Initiative Fund revenue from the software tax (PA 258 of 1987), and Healthy Michigan Fund revenue from the cigarette tax (6% of gross collections)
GENERAL FUND/ GENERAL PURPOSE	\$4,613,000	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 108: LABORATORY SERVICES

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

Full-time equated classified positions	115.2	Full-time equated (FTE) positions in the state classified service supporting laboratory services
Laboratory services - 115.2 FTE positions	\$12,091,600	Funding supports FTE positions, contractual services, supplies, travel, equipment, computer, and other related costs for provision of laboratory testing for the identification and monitoring of infectious disease agents; collection of epidemiological and analytical laboratory data necessary for assessment of human health risks; laboratory testing of blood samples of children screened for lead under the EPSDT program, and of newborn infants screened for genetic handicapping conditions; and the continued study of Lyme disease in Michigan
		Funding Source(s): IDG 392,100 Federal 2,040,100 Restricted 3,131,300 GF/GP 6,528,100
<i>Related Boilerplate Section(s): None</i>		
GROSS APPROPRIATION	\$12,091,600	Total of all applicable line item appropriations
Interdepartmental grant from environmental quality	392,100	Grant from the Department of Environmental Quality for costs related to the health risk assessment program
Total federal revenues	2,040,100	Federal revenues from preventive health and health services block grant, Title XIX Medicaid funds, tuberculosis control grant, immunization grant, and epidemiology and laboratory capacity grant
Total other state restricted revenues	3,131,300	Revenue from the fees collected for laboratory services and newborn screening services, and Michigan Health Initiative Fund revenue from the software tax (P.A. 258 of 1987)
GENERAL FUND/ GENERAL PURPOSE	\$6,528,100	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 109: EPIDEMIOLOGY

This appropriation unit funds surveillance, assessment, and monitoring of the status of disease, environmental health, and injury in Michigan as well as conditions that adversely affect maternal and child health in Michigan.

Full-time equated classified positions	90.0	Full-time equated (FTE) positions in the state classified service supporting bioterrorism preparedness, and epidemiology administration	
AIDS surveillance and prevention program	\$1,883,100	Funding supports costs to conduct and evaluate statewide HIV infection and AIDS case reporting through integrated surveillance	Funding Source(s): Federal 1,883,100
<i>Related Boilerplate Section(s): None</i>			
Asthma prevention and control	1,032,300	Supports statewide and community-based asthma programs, surveillance, and awareness and education	Funding Source(s): Federal 841,500 GF/GP 190,800
<i>Related Boilerplate Section(s): None</i>			
Bioterrorism preparedness – 59.5 FTE positions PARTIAL VETO	50,579,900 49,579,900	Supports development of bioterrorism preparedness and response for: 1) public health - including assessment, capacity of surveillance, epidemiology and laboratory, communications, information technology, and dissemination of risk and health information; and 2) hospitals. Veto of Sec. 853 eliminated \$1.0 million of federal bioterrorism preparedness funding to be allocated to a Biosafety Level 2/3 certified laboratory facility.	Funding Source(s): Federal 49,579,900
<i>Related Boilerplate Section(s): 853 (Vetoed)</i>			
Epidemiology administration – 30.5 FTE positions	5,375,700	Supports FTE positions and costs related to the evaluation of environmental conditions which may be a threat to the health of Michigan citizens, behavioral risk factor surveillance, communicable disease surveillance, health risk assessment, chronic disease epidemiology, disabilities prevention, PBB surveillance, tuberculosis control, administration of grants to improve genetics health outcomes, and to assess the impact of air pollution on birth outcomes.	Funding Source(s): Federal 3,448,100 Restricted 179,000 GF/GP 1,748,600
<i>Related Boilerplate Section(s): None</i>			
Tuberculosis control and recalcitrant AIDS program	867,000	Supports local health departments and other contracts for the prevention and control of tuberculosis including medication costs, medication administration, and surveillance; supports state staff to monitor occurrence and recording of all cases; payment for care of certain patients with tuberculosis	Funding Source(s): Federal 867,000
<i>Related Boilerplate Section(s): None</i>			
GROSS APPROPRIATION	\$59,738,000 \$58,738,000	Total of all applicable line item appropriations	

Total federal revenues	57,619,600 56,619,600	Federal revenues include categorical grants for health risk assessment, HIV/AIDS surveillance, tuberculosis control, epidemiology and laboratory capacity, PBB investigations, occupational safety and health research, public health preparedness and response for bioterrorism, bioterrorism hospital preparedness, behavioral risk factor surveillance, asthma, OASIS STD control, genetics, human health studies birth outcomes
Total other state restricted revenues	179,000	Michigan Health Initiative Fund revenue from the software tax (1987 PA 258)
GENERAL FUND/ GENERAL PURPOSE	\$1,939,400	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 110: LOCAL HEALTH ADMINISTRATION AND GRANTS

This appropriation unit provides funding to improve the health status of Michigan residents through accessible health care services delivered by local public health departments and other health care organizations.

Full-time equated classified positions	3.0	Full-time equated (FTE) positions in the state classified service supporting the lead abatement program
Implementation of 1993 PA 133, MCL 333.17015	\$100,000	Funding supports costs incurred for production of printed materials related to implementation of the informed consent law <div style="text-align: right;">Funding Source(s): Restricted 23,500 GF/GP 76,500</div>
<i>Related Boilerplate Section(s): 901</i>		
Lead abatement program - 3.0 FTE positions	1,550,200	Supports FTE positions and related costs, contracts, and local oversight to provide for safe removal of lead hazards from older homes in areas of the state with high incidence of lead-poisoned children; and provides training and certification of individuals to perform lead abatement <div style="text-align: right;">Funding Source(s): Federal 1,449,100 Restricted 101,100</div>
<i>Related Boilerplate Section(s): 903</i>		
Local health services	220,000	Administration of the local public health operations program, and evaluation and training for local and state health department staffs in the delivery of required local health services <div style="text-align: right;">Funding Source(s): Restricted 220,000</div>
<i>Related Boilerplate Section(s): None</i>		
Local public health operations	40,618,400	Provides payments prospectively to local health departments based on a 50% state and local match rate for projected allowable expenditures of the following nine required local health services: immunizations, infectious disease control, sexually transmitted disease control, hearing screening, vision services, food protection, public water supply, private groundwater supply, and on-site sewage management <div style="text-align: right;">Funding Source(s): GF/GP 40,618,400</div>
<i>Related Boilerplate Section(s): 902, 904</i>		
Medical services cost reimbursement to local health departments	1,800,000	Reimburses local health departments for Medicaid costs incurred; local funds are used as Medicaid match <div style="text-align: right;">Funding Source(s): Federal 1,800,000</div>
<i>Related Boilerplate Section(s): None</i>		
GROSS APPROPRIATION	\$44,288,600	Total of all applicable line item appropriations
Total federal revenues	3,249,100	Federal revenues include HUD lead-based paint hazard control grant, lead grant for certification of lead-based paint professionals, and Title XIX Medicaid funds

Total other state restricted revenues	344,600	State restricted revenues include revenue from the fees collected for lead abatement professional worker certification, and Healthy Michigan Fund revenue from the cigarette tax (6% of gross collections)
GENERAL FUND/ GENERAL PURPOSE	\$40,694,900	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 111: CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION

This appropriation unit provides funding for programs to promote healthy lifestyles for communities, individuals, and vulnerable populations to improve the length and quality of life for Michigan residents.

Full-time equated classified positions	41.6	Full-time equated (FTE) positions in the state classified service supporting the following programs: cancer prevention and control; health education, promotion, and research; and smoking prevention
African-American male health initiative	\$106,700	Supports programs to improve the health of African-American men in Michigan with community-based screening for chronic diseases, follow-up counseling, education, and referrals Funding Source(s): GF/GP 106,700
<i>Related Boilerplate Section(s): 1028</i>		
AIDS and risk reduction clearinghouse and media campaign	1,576,000	Supports contracts to develop, produce, and air television, radio, and billboard health promotion messages; funds a clearinghouse which collects and distributes various health promotion materials Funding Source(s): Restricted 1,576,000
<i>Related Boilerplate Section(s): None</i>		
Alzheimer's information network	440,000	Supports statewide and regional information and referral centers for persons with Alzheimer's disease, Huntington's disease, and Parkinson's disease, and their families and caregivers Funding Source(s): Federal 150,000 Restricted 290,000
<i>Related Boilerplate Section(s): 1003</i>		
Cancer prevention and control program - 10.6 FTE positions	11,043,100	Supports FTE positions and related expenses and contracts for the cancer prevention and control program: grants to communities for screening and follow-up services for breast, cervical, prostate, and colorectal cancer, cancer education, awareness, and early detection as well as grants to same sites for heart and chronic disease screening and referrals; grants for cancer prevention activities Funding Source(s): Federal 8,552,700 Restricted 1,641,300 GF/GP 849,100
<i>Related Boilerplate Section(s): 1001</i>		
Chronic disease prevention	1,622,400	Chronic disease surveillance activities; contracts to provide community-based chronic disease prevention programs, including programs on arthritis and stroke prevention Funding Source(s): Federal 1,228,300 Restricted 239,100 GF/GP 155,000
<i>Related Boilerplate Section(s): 1019, 1020</i>		

Diabetes and kidney program - 8.0 FTE positions	2,953,900	Supports FTE positions and related expenses and contracts to fund diabetes control and outreach projects and grants to communities with a high incidence of diabetes, funding for kidney disease prevention programs, and for implementation of the State Renal Plan	Funding Source(s): Federal 1,059,000 Restricted 1,894,900
<i>Related Boilerplate Section(s): 1009</i>			
Health education, promotion, and research programs - 11.0 FTE positions	1,038,800	Supports FTE positions and related costs and contracts for health research, tobacco program, school health education curriculum development, and osteoporosis prevention and treatment education	Funding Source(s): Federal 102,800 Restricted 326,300 GF/GP 609,700
<i>Related Boilerplate Section(s): 1002, 1010</i>			
Injury control intervention project	714,900	Oversees disabilities prevention programs including fire safety, implementation of a statewide plan for traumatic brain injury prevention and services, and funding for prevention of injuries from falls	Funding Source(s): Federal 615,000 GF/GP 99,900
<i>Related Boilerplate Section(s): None</i>			
Morris Hood Wayne State University diabetes outreach	250,000	Supports statewide and community outreach programs of the Morris Hood Comprehensive Diabetes Center at Wayne State University	Funding Source(s): GF/GP 250,000
<i>Related Boilerplate Section(s): None</i>			
Obesity program	250,000	Supports nutrition and physical activity programs to prevent and combat obesity and related chronic diseases	Funding Source(s): Federal 250,000
<i>Related Boilerplate Section(s): None</i>			
Physical fitness, nutrition, and health	100,000	Funds costs and contracts to support a statewide network of local physical fitness, health, and sports councils, to develop a physical fitness curriculum, and to distribute sports injury prevention education materials	Funding Source(s): GF/GP 100,000
<i>Related Boilerplate Section(s): None</i>			
Public health traffic safety coordination	350,000	Funds costs and contracts to support projects to reduce bicycle-related injuries, child safety education, car booster seat and seat belt safety for children, and the collection of emergency room data on injuries and deaths	Funding Source(s): Federal 350,000
<i>Related Boilerplate Section(s): None</i>			

School health and education programs	500,000	Provides funding to intermediate school districts to support school health education, the Michigan Model for Comprehensive School Health Education, and materials; program was funded in the DCH budget through FY 2001-02 and in the School Aid budget in FY 2002-03 Funding Source(s): GF/GP 500,000
<i>Related Boilerplate Section(s): 1002</i>		
Smoking prevention program - 12.0 FTE positions	4,852,700	Supports FTE positions and related expenses and contracts for smoking prevention programs and projects of schools and community-based coalitions through local health departments that may include smoking cessation services, enforcement of clean indoor air laws, an anti-tobacco media campaign, and the Michigan model clearinghouse, which collects, develops, and distributes health curriculum materials to school districts Funding Source(s): Federal 1,738,500 Restricted 3,114,200
<i>Related Boilerplate Section(s): 1006</i>		
Tobacco tax collection and enforcement	810,000	Funds granted to the Department of Treasury and to the Department of State Police for tobacco tax collection and enforcement activities Funding Source(s): Restricted 810,000
<i>Related Boilerplate Section(s): None</i>		
Violence prevention	1,446,900	Supports costs and contracts for rape and sexual assault primary prevention and education programs Funding Source(s): Federal 1,446,900
<i>Related Boilerplate Section(s): 1007</i>		
GROSS APPROPRIATION	\$28,055,400	Total of all applicable line item appropriations
Total federal revenues	15,493,200	Federal revenues include the following grants: preventive health and health services block grant, breast and cervical cancer and comprehensive cancer control, Title XIX Medicaid, diabetes control, comprehensive school health education, state and community highway safety, arthritis, fire safety, core injury prevention and control, traumatic brain injury, nutrition and physical activity programs to prevent obesity, tobacco use prevention, WISEWOMAN, rape prevention and education, and surveillance of intimate partner violence
Total other state restricted revenues	9,891,800	State restricted revenues include Michigan Health Initiative Fund revenue from the software tax (1987 PA 258), and Healthy Michigan Fund revenue from the cigarette tax (6% of gross collections)
GENERAL FUND/ GENERAL PURPOSE	\$2,670,400	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 112: COMMUNITY LIVING, CHILDREN, AND FAMILIES

This appropriation unit provides funding for programs and services to assure physical and mental health services for the vulnerable population group consisting of children under age 21, women of childbearing age, and their family members.

Full-time equated classified positions	72.0	Full-time equated (FTE) positions in the state classified service supporting childhood lead program, community living, children, and families administration, and omnibus budget reconciliation act implementation
Childhood lead program - 5.0 FTE positions	\$1,470,700	Funding supports FTE positions, supplies, related costs and contracts to provide screening of blood lead levels, identification of lead hazards, education, and lead poisoning prevention services for children, primarily in Detroit and targeted counties <div style="text-align: right; margin-top: 10px;"> Funding Source(s): Federal 1,385,700 GF/GP 85,000 </div>
<i>Related Boilerplate Section(s): 1129</i>		
Children's waiver home care program	19,549,800	Supports home and community-based services for over 400 eligible children with developmental disabilities who reside at home and who may otherwise require institutional care <div style="text-align: right; margin-top: 10px;"> Funding Source(s): Federal 11,431,500 GF/GP 8,118,300 </div>
<i>Related Boilerplate Section(s): None</i>		
Community living, children, and families administration - 60.0 FTE positions	7,074,100	Supports FTE positions, contractual services, supplies, and other related costs for the administration of programs for children and families <div style="text-align: right; margin-top: 10px;"> Funding Source(s): Federal 2,452,700 Restricted 462,000 GF/GP 4,159,400 </div>
<i>Related Boilerplate Section(s): None</i>		
Dental programs	485,400	Supports grants for the provision of dental services to uninsured individuals who have difficulty accessing dental services due to mental or physical handicap, visual impairment, chronic illness, or who are elderly; also known as Donated Dental Services Program <div style="text-align: right; margin-top: 10px;"> Funding Source(s): Federal 110,400 Restricted 150,000 GF/GP 225,000 </div>
<i>Related Boilerplate Section(s): 1109</i>		
Dental program for persons with developmental disabilities	151,000	Provides essential dental services for persons with developmental disabilities who do not otherwise have the resources or opportunity to obtain these services <div style="text-align: right; margin-top: 10px;"> Funding Source(s): GF/GP 151,000 </div>
<i>Related Boilerplate Section(s): None</i>		

Early childhood collaborative secondary prevention	524,000	Provides funding for the cooperative program with the Family Independence Agency and the Department of Education to fund community-based projects designed to foster healthy child development between 0-3 years of age. Previously funded in DCH budget in FY 1999-2000 and FY 2000-01. Funding Source(s): GF/GP 524,000
<i>Related Boilerplate Section(s): None</i>		
Family planning local agreements	11,318,100	Supports grants to local health departments and other agencies to provide family planning services and to support special projects; a Medicaid waiver also supports this program Funding Source(s): Federal 9,885,800 Restricted 634,600 GF/GP 797,700
<i>Related Boilerplate Section(s): 1101, 1104, 1106, 1110, 1111</i>		
Family support subsidy	15,593,500	Provides for a monthly payment of \$222.11 to 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): Federal 15,593,500
<i>Related Boilerplate Section(s): None</i>		
Housing and support services	5,579,300	Supports costs and contracts for housing and rental assistance programs for persons with mental illness or disabilities who are homeless or at risk of homelessness, and housing assistance for persons living with AIDS Funding Source(s): Federal 4,870,500 GF/GP 708,800
<i>Related Boilerplate Section(s): None</i>		
Local MCH services	13,050,200	Maternal and child health grants to local health departments on a per capita basis for prenatal care, immunizations, and well-child services; grants to local health departments in high infant mortality rate areas and to other contractual agencies for a variety of services related to infant mortality; and funding for prenatal services for uninsured women - Maternity Outpatient Medical Services (MOMS) program Funding Source(s): Federal 11,218,100 Restricted 1,832,100
<i>Related Boilerplate Section(s): 1104</i>		
Migrant health care	200,000	Grants to areas with high migrant populations for health and immunization outreach and services Funding Source(s): Federal 63,900 GF/GP 136,100
<i>Related Boilerplate Section(s): 1128</i>		
Newborn screening follow-up and treatment services	2,428,000	Funds for follow-up services such as education, diagnosis, counseling, and treatment after a newborn child tests positive for sickle cell and/or other genetic disorders; also funds for an adult-onset genetic disease program Funding Source(s): Restricted 2,428,000
<i>Related Boilerplate Section(s): None</i>		

Omnibus budget reconciliation act implementation - 7.0 FTE positions	12,770,500	Supports FTE positions, supplies, related costs and contracts for implementation of the federal mandate addressing the inappropriate placement in nursing homes of persons who are mentally ill or developmentally disabled, including pre-admission screening, assessment of needs for individuals in nursing homes and for active treatment, and alternative services for persons found to be inappropriately placed; also supports a contract with Birchwood nursing home to provide specialized care to older adults who require nursing care and mental health services
		Funding Source(s): Federal 8,966,800 GF/GP 3,803,700
		<i>Related Boilerplate Section(s): None</i>
Pediatric AIDS prevention and control	1,026,300	Supports program and contracts to coordinate comprehensive medical care and social support services for HIV-infected children
		Funding Source(s): Federal 1,026,300
		<i>Related Boilerplate Section(s): None</i>
Pregnancy prevention program	5,846,100	Supports grants to local health departments and other local agencies to provide family planning services, primary pregnancy prevention programs and services, and special projects
		Funding Source(s): Federal 812,800 Restricted 5,033,300
		<i>Related Boilerplate Section(s): 1104, 1108, 1110, 1111</i>
Prenatal care outreach and service delivery support	3,049,300	Supports grants to local health departments and other local agencies for prenatal care services and support to low-income and hard-to-reach women, including maternal and infant health advocacy services, prenatal care community demonstration projects, funds to communities with high infant mortality rates, and nutrition education
		Funding Source(s): Federal 2,328,600 GF/GP 720,700
		<i>Related Boilerplate Section(s): 1101, 1104, 1107, 1112</i>
Southwest community partnership	996,700	Funding for development of a comprehensive and integrated community-based system of care including mental health services for children and teens with serious emotional disturbances in the Southwest Detroit community
		Funding Source(s): Federal 996,700
		<i>Related Boilerplate Section(s): None</i>

Special projects	5,274,500	Supports the following special projects: public health and mental health part C contracts; teen sexual abstinence education programs; health systems development in child care; fetal and infant mortality projects; birth defects surveillance, prevention, intervention, and data; neonatal addiction and fetal alcohol syndrome education and prevention; self-determination initiative for persons with developmental disabilities; pregnancy risk assessment monitoring; oral disease prevention and education; universal newborn hearing screening; pediatric health services research; maternal mortality study; and the safe delivery hotline
		Funding Source(s): Federal 5,013,400 Private 261,100
		<i>Related Boilerplate Section(s): 1106a, 1134</i>
Sudden infant death syndrome program	321,300	Funding for autopsies, grief counseling, follow-up and referral services for parents who have lost a child to sudden infant death syndrome, and for risk reduction education, reporting, and surveillance
		Funding Source(s): Federal 221,300 GF/GP 100,000
		<i>Related Boilerplate Section(s): None</i>
GROSS APPROPRIATION	\$106,708,800	Total of all applicable line item appropriations
Total federal revenues	76,378,000	Federal revenues include the following grants: preventive health and health services block grant, maternal and child health services block grant, childhood lead poisoning prevention and surveillance, Title XIX Medicaid, Title X family planning, immunization, special projects of regional and national significance (SPRANS), early-on for infants and families with disabilities, Ryan White Title IV pediatric AIDS prevention, temporary assistance to needy families (TANF), projects in assistance for transition from homelessness (PATH), housing opportunities for persons with AIDS (HOPWA), supportive housing program, shelter plus care, Title XXI state children's health insurance program (SCHIP), comprehensive CMH services for children - southwest Detroit community partnership, oral disease prevention, pregnancy risk assessment monitoring system (PRAMS), universal newborn hearing screening, birth defects surveillance, early hearing detection, newborn screening infrastructure, and abstinence education
Total private revenues	261,100	Private revenues are from the Robert Wood Johnson Foundation self-determination grant
Total other state restricted revenues	10,540,000	State restricted revenues include fees collected from the newborn screening program, and Healthy Michigan Fund revenue from the cigarette tax (6% of gross collections)
GENERAL FUND/ GENERAL PURPOSE	\$19,529,700	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 113: WOMEN, INFANTS, AND CHILDREN FOOD AND NUTRITION PROGRAMS

This appropriation unit provides funding for supplemental nutritious foods, nutrition education, and referrals for health care to low-income pregnant, breastfeeding and postpartum women, and infants and children to age five determined to be at nutritional risk.

Full-time equated classified positions	41.0	Full-time equated (FTE) positions in the state classified service supporting the women, infants, and children program administration and special projects
Women, infants, and children program administration and special projects – 41.0 FTE positions	\$5,600,100	Funding supports FTE positions, contractual services, supplies, and other related costs for the administration of the Women, Infants, and Children (WIC) Food and Nutrition Programs, and for the following special projects: WIC farmers market nutrition program also known as Project FRESH, seniors farmers market nutrition program, and annual WIC infrastructure special projects as federally funded <div style="text-align: right; margin-top: 5px;"> Funding Source(s): Federal 5,327,100 Private 273,000 </div>
<i>Related Boilerplate Section(s): 1101, 1151</i>		
Women, infants, and children program local agreements and food costs	181,392,100	Funding to provide food and counseling on nutrition and health to at-risk pregnant and breast-feeding women, infants, and children up to age five; funding also supports local administration of the program and enrollment of participants <div style="text-align: right; margin-top: 5px;"> Funding Source(s): Federal 131,317,800 Private 50,074,300 </div>
<i>Related Boilerplate Section(s): 1101</i>		
GROSS APPROPRIATION	\$186,992,200	Total of all applicable line item appropriations
Total federal revenues	136,644,900	Federal revenues include the special supplemental nutrition program for women, infants, and children grant, farmers market nutrition grants for WIC and seniors, and WIC infrastructure grants
Total private revenues	50,347,300	Private revenues include rebates from infant formula manufacturers for the WIC program, and revenue from private companies related to the farmers market nutrition programs
GENERAL FUND/ GENERAL PURPOSE	\$0	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 114: CHILDREN'S SPECIAL HEALTH CARE SERVICES

This appropriation unit contains funding for medical care provided through the Children's Special Health Care Services program (CSHCS) and for related administrative functions. The program pays for health services primarily to children under 21 years of age with certain chronic medical conditions that require specialty care.

Full-time equated classified positions	66.6	Full-time equated (FTE) positions in the state classified service supporting children's special health care services administration
Children's special health care services administration - 66.6 FTE positions	\$4,478,800	Supports FTE positions, contractual services, supplies, and other administrative costs for the Children's Special Health Care Services Division <div style="text-align: right;">Funding Source(s): Federal 2,097,000 GF/GP 2,381,800</div>
<i>Related Boilerplate Section(s): None</i>		
Amputee program	184,600	Supports the operation of the children's amputee clinic at Mary Free Bed Hospital that provides prostheses and associated medical services <div style="text-align: right;">Funding Source(s): Federal 184,600</div>
<i>Related Boilerplate Section(s): None</i>		
Bequests for care and services	1,829,600	Provides payment for services not covered by Medicaid or CSHCS and supports the Parent Participation Program with monies from the Trust Fund for Children with Special Health Care Needs; refunds for overpaid repayment agreements are also paid from this line <div style="text-align: right;">Funding Source(s): Federal 179,600 Private 1,000,000 Restricted 650,000</div>
<i>Related Boilerplate Section(s): None</i>		
Case management services	3,773,500	Grants to local health departments to identify and enroll children in the program; case management and care coordination services are also funded <div style="text-align: right;">Funding Source(s): Federal 2,490,300 GF/GP 1,283,200</div>
<i>Related Boilerplate Section(s): 1203</i>		
Conveyor contract	513,500	Funds the transportation costs for CSHCS eligible families (below 250% of the poverty level) and in need of assistance to access health care services <div style="text-align: right;">Funding Source(s): Federal 104,000 GF/GP 409,500</div>
<i>Related Boilerplate Section(s): None</i>		
Medical care and treatment	129,465,100	Provides reimbursement to hospitals, physicians, pharmacies, and other health care professionals providing medical services to CSHCS eligible persons <div style="text-align: right;">Funding Source(s): Federal 64,331,700 GF/GP 65,133,400</div>
<i>Related Boilerplate Section(s): 1201, 1202, 1627, 1628, 1653(e)</i>		

GROSS APPROPRIATION	\$140,245,100	Total of all applicable line item appropriations
Total federal revenues	69,387,200	Federal revenues include maternal and child health block grant, and Title XIX Medicaid funds
Total private revenues	1,000,000	Individual and corporate donations; payments from health plans for mailing directory of plans
Total other state restricted revenues	650,000	State restricted revenues include funds from repayment agreements and fees associated with CSHCS programs
GENERAL FUND/ GENERAL PURPOSE	\$69,207,900	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 116: CRIME VICTIM SERVICES COMMISSION

This appropriation unit provides funding for the Crime Victim Services Commission. The Commission provides grants, services, support, and compensation for the victims of crime. Five members appointed by the Governor comprise the Commission.

Full-time equated classified positions	9.0	Full-time equated (FTE) positions in the state classified service supporting grants administration services
Grants administration services - 9.0 FTE positions	\$1,080,500	Funding supports FTE positions and related costs and contractual services to provide administration and management of the grants programs for the Crime Victims Services Commission, publications provided to crime victims, and the 1-800 computerized Michigan Crime Victim Notification Network for use by the public <div style="text-align: right;"> Funding Source(s): Federal 246,900 Restricted 419,100 GF/GP 414,500 </div>
<i>Related Boilerplate Section(s): None</i>		
Justice assistance grants	13,000,000	Grants to public and private nonprofit programs that provide assistance services to crime victims, especially victims of sexual assault, spousal abuse, and child abuse <div style="text-align: right;"> Funding Source(s): Federal 13,000,000 </div>
<i>Related Boilerplate Section(s): 1302</i>		
Crime victim rights services grants	8,265,300	Financial compensation as a payor of last resort is provided to victims of crime who suffer bodily injury and for medical expenses, counseling, burial assistance, and loss of earnings or loss of support caused by the injury; grants and training for local prosecutors, sheriffs, courts, and other agencies to support statutorily-required notification, information, consultation, and protection to victims of crime; and the VINE information system connecting prosecutors' offices with jails to provide information to crime victims regarding perpetrator status changes and court dates <div style="text-align: right;"> Funding Source(s): Federal 700,000 Restricted 7,565,300 </div>
<i>Related Boilerplate Section(s): None</i>		
GROSS APPROPRIATION	\$22,345,800	Total of all applicable line item appropriations
Total federal revenues	13,946,900	Federal revenues include Victims of Crime Act grants for justice assistance and victim compensation
Total other state restricted revenues	7,984,400	Revenues include fees assessed against convicted defendants deposited to the Crime Victim's Rights Services Fund
GENERAL FUND/ GENERAL PURPOSE	\$414,500	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 117: OFFICE OF SERVICES TO THE AGING

This appropriation unit provides funding for the Office of Services to the Aging to promote independence and enhance the dignity of Michigan's older persons and their families through advocacy, leadership, and innovation of policies, programs, and services. Fifteen members appointed by the Governor comprise the Commission on Services to the Aging.

Full-time equated classified positions	32.5	Full-time (FTE) equated positions in the state classified service supporting the Office of Services to Aging administration
Commission (per diem \$50.00)	\$10,500	Funding for a per diem of \$50.00 for commissioners attending monthly meetings and mandated state plan hearings. The Commission advises the Governor, Legislature, and Office of Services to the Aging on matters relating to policies and programs for older persons in Michigan, and approves funds for services administered under the federal Older Americans Act of 1965, as amended, and the Older Michiganians Act of 1981
		Funding Source(s): GF/GP 10,500
		<i>Related Boilerplate Section(s): None</i>
Office of services to aging administration - 32.5 FTE positions	4,167,800	Supports FTE positions and related costs and contractual services for development, implementation, and administration of a state plan that provides supportive services for seniors in accordance with the requirements of the Older Americans Act of 1965, as amended, and the Older Michiganians Act of 1981
		Funding Source(s): Federal 2,311,800 GF/GP 1,856,000
		<i>Related Boilerplate Section(s): None</i>

Community services	35,286,100	<p>Funding to regional Area Agencies on Aging for the following programs and services for senior citizens in Michigan:</p> <p><u>Administration</u> of community services</p> <p><u>Access Services</u>: Access to services including information, referral, outreach, transportation, care coordination and management</p> <p><u>Alternative Care Services</u>: In-home services and adult day care for seniors in need</p> <p><u>Care Management Services</u>: Assess and plan a variety of home care and other services needed by frail elderly persons to allow them to live independently at home</p> <p><u>Community Services</u>: Health education and training, recreational, homemaker, counseling, referral, transportation, housing, repair and renovation, and legal assistance</p> <p><u>Elder Abuse Prevention</u>: Programs for elder abuse, neglect, and exploitation prevention and treatment</p> <p><u>In-Home Services</u>: In-home services for the frail elderly</p> <p><u>Long Term Care Ombudsman Program</u>: Advocacy services to protect the rights, health, safety, and welfare of residents of long-term care facilities and their family members</p> <p><u>Medicare Medicaid Assistance Program</u>: Benefits information and counseling to assist older adults with Medicare and Medicaid, supplemental policies, long term care insurance, and filing claims for health benefits</p> <p><u>National Family Caregiver Support Program</u>: Services to informal caregivers of older individuals, such as information assistance, counseling and support groups, respite care, and supplemental services</p> <p><u>Preventive Health Services</u>: Disease prevention and health promotion services with priority to medically under-served areas and areas with a high volume of elderly that have the greatest economic need</p>						
		<table border="0"> <tr> <td>Funding Source(s):</td> <td>Federal</td> <td>20,220,300</td> </tr> <tr> <td></td> <td>GF/GP</td> <td>15,065,800</td> </tr> </table>	Funding Source(s):	Federal	20,220,300		GF/GP	15,065,800
Funding Source(s):	Federal	20,220,300						
	GF/GP	15,065,800						

Related Boilerplate Section(s): 1401, 1404, 1416

Nutrition services	38,191,200	<p>Funding to regional Area Agencies on Aging for nutrition services for vulnerable elderly adults providing at least one hot meal or other appropriate meal per day in a congregate setting or as a home-delivered meal, nutrition education services, administration, and per-meal reimbursement payments from the federal Department of Agriculture for providing congregate and home-delivered meals</p>									
		<table border="0"> <tr> <td>Funding Source(s):</td> <td>Federal</td> <td>26,743,900</td> </tr> <tr> <td></td> <td>Restricted</td> <td>167,000</td> </tr> <tr> <td></td> <td>GF/GP</td> <td>11,280,300</td> </tr> </table>	Funding Source(s):	Federal	26,743,900		Restricted	167,000		GF/GP	11,280,300
Funding Source(s):	Federal	26,743,900									
	Restricted	167,000									
	GF/GP	11,280,300									

Related Boilerplate Section(s): 1401, 1403

Senior volunteer services	5,645,900	<p>Funding to regional Area Agencies on Aging for administration of the following programs for senior citizens:</p> <p><u>Senior Companion Program</u>: Low-income seniors provide 20 hours per week of individualized care and assistance to frail and at-risk adults; a stipend is paid to volunteers</p> <p><u>Foster Grandparent Program</u>: Low-income seniors provide 20 hours per week to assist children who need personal attention and special help; a stipend is paid to volunteers</p> <p><u>Retired and Senior Volunteer Program</u>: Program to support community senior citizen volunteers</p>			
		<table border="0"> <tr> <td>Funding Source(s):</td> <td>GF/GP</td> <td>5,645,900</td> </tr> </table>	Funding Source(s):	GF/GP	5,645,900
Funding Source(s):	GF/GP	5,645,900			

Related Boilerplate Section(s): None

Senior citizen centers staffing and equipment	1,068,700	Funding to senior citizen centers statewide to support staffing costs Funding Source(s): GF/GP 1,068,700 <i>Related Boilerplate Section(s): None</i>
Employment assistance	2,818,300	Funding to regional Area Agencies on Aging for administration of the Senior Community Service Employment Program, which provides and promotes useful part-time employment opportunities in community service agencies for low-income senior citizens Funding Source(s): Federal 2,818,300 <i>Related Boilerplate Section(s): None</i>
Respite care program	7,100,000	Funding for respite care services to assist caregivers who provide care to an elderly person in need of constant supervision; respite programs may provide in-home care or adult day care Funding Source(s): Tobacco 5,000,000 Restricted 2,100,000 <i>Related Boilerplate Section(s): 1404, 1406</i>
GROSS APPROPRIATION	\$94,288,500	Total of all applicable line item appropriations
Total federal revenues	52,094,300	Federal revenues include aging Title III grants for supportive services, disease prevention, nutrition services, and national family caregiver support, aging Title V senior community service employment grants, aging Title VII grants for prevention of elder abuse and long-term care ombudsman, Title XIX Medicaid funds, Centers for Medicare and Medicaid Services (CMS) research, demonstration and evaluation grant, and U.S. Department of Agriculture commodity supplement funds
Tobacco settlement revenue	5,000,000	State revenue from the 1998 master settlement agreement with tobacco companies
Total other state restricted revenues	2,267,000	State revenues include escheats, and Healthy Michigan Fund revenue from the cigarette tax (6% of gross collections)
GENERAL FUND/ GENERAL PURPOSE	\$34,927,200	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 118: MEDICAL SERVICES ADMINISTRATION

This appropriation unit contains funding for staffing, contracts, and other administrative functions related to the Medicaid, Elder Prescription Insurance Coverage, MICHild, and indigent care programs. The functions carried out by the Medical Services Administration include the approval and payment of medical services claims, program and policy development, provider enrollment, collection of third-party resources, and efforts to maximize the use of federal matching funds.

Full-time equated classified positions	333.7	Full-time equated (FTE) positions for the Medical Services Administration
Medical services administration - 333.7 FTE positions	\$39,319,900	Funds the salary and other personnel costs, office supplies, contracts, travel, and non-computer-related equipment expenditures related to administering the Medicaid program. Funding Source(s): Federal 25,184,500 GF/GP 14,135,400
<i>Related Boilerplate Section(s): None</i>		
Facility inspection contract - state police	132,800	General Fund/General Purpose funds for Medicaid's share of fire safety inspections of medical care facilities. Funding Source(s): GF/GP 132,800
<i>Related Boilerplate Section(s): None</i>		
MICHild administration	4,327,800	Administrative services, eligibility determination, and contract monitoring costs related to the MICHild program. Funding Source(s): Federal 4,327,800
<i>Related Boilerplate Section(s): None</i>		
GROSS APPROPRIATION	\$43,780,500	Total of all applicable line item appropriations
Total federal revenues	29,512,300	Federal Title XIX Medicaid funds and Title XXI Children's Health Insurance Program funds
GENERAL FUND/ GENERAL PURPOSE	\$14,268,200	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 119: MEDICAL SERVICES

This appropriation unit contains funding for the payment of health care services to low-income persons eligible for Medicaid, MICHild, Elder Prescription Insurance Coverage, and indigent care programs. Also included are special Medicaid financing payments which increase federal earnings, thereby reducing state GF/GP costs.

Hospital services and therapy	\$892,626,500	Inpatient and outpatient hospital, mental hospital, and psychiatric unit services for Medicaid eligible patients
		Funding Source(s): Federal 655,864,200
		Local 7,000,000
		Restricted 143,116,900
		GF/GP 86,645,400

Related Boilerplate Section(s): 1611, 1641, 1643, 1647, 1649, 1658, 1699, 1711, 1712, 1717

Hospital disproportionate share payments	45,000,000	Special hospital payments to facilities with a high percentage of services to Medicaid, State Medical Program, and Children's Special Health Care Services recipients, plus uncompensated care
		Funding Source(s): Federal 25,150,500
		Restricted 9,700,000
		GF/GP 10,149,500

Related Boilerplate Section(s): 1699

Physician services	227,166,200	Medicaid covered office and home visits provided by physicians, nurse midwives, and nurse practitioners including immunizations, EPSDT, prenatal care, podiatric care, family planning, and medical clinics
		Funding Source(s): Federal 125,814,400
		GF/GP 101,351,800

Related Boilerplate Section(s): None

Medicare premium payments	172,663,700	Payment of Medicare premiums, co-payments, and deductibles for Medicaid-eligible persons who also qualify for Medicare and certain other low-income Medicare beneficiaries, plus insurance premiums for persons with AIDS
		Funding Source(s): Federal 97,801,900
		GF/GP 74,861,800

Related Boilerplate Section(s): None

Pharmaceutical services	517,225,600	Prescription drugs, laboratory, orthotics, prosthetics, medical and oxygen supplies provided under the Medicaid program
		Funding Source(s): Federal 291,298,400
		Restricted 18,900,000
		GF/GP 207,027,200

Related Boilerplate Section(s): 1620, 1621, 1621a, 1622, 1622a, 1623, 1624, 1625, 1626, 1628, 1629, 1715

Home health services	36,401,400	Visiting nurse, nurse's aide, and physical therapy services provided in the home, and hospice care for Medicaid patients
		Funding Source(s): Federal 20,401,700
		GF/GP 15,999,700

Related Boilerplate Section(s): None

Transportation	8,538,300	Non-emergency transportation costs paid through local FIA offices for Medicaid recipients to obtain regular medical care	Funding Source(s):	Federal	4,269,200
				GF/GP	4,269,100
<i>Related Boilerplate Section(s): None</i>					
Auxiliary medical services PARTIAL VETO	88,195,600 81,394,400	Dental, chiropractic, hearing, speech, and vision services covered by the Medicaid program; veto eliminated \$6.8 million in funding for podiatric, chiropractic, and hearing aid services	Funding Source(s):	Federal	45,812,300
				GF/GP	35,582,100
<i>Related Boilerplate Sections: 1630, 1631, 1633, 1713</i>					
Ambulance services	5,000,000	Medicaid covered emergency medical transportation and medically necessary non-emergency transportation services	Funding Source(s):	Federal	2,746,900
				GF/GP	2,253,100
<i>Related Boilerplate Section(s): 1634</i>					
Long-term care services	1,626,345,000	Long-term care services provided to Medicaid eligible persons in nursing home settings, county medical care facilities (MCFs), and hospital chronic care units (CCUs); also includes the Home and Community Based Services Waiver program, the Adult Home Help program, and other personal care services for the Medicaid population	Funding Source(s):	Federal	906,078,100
				Local	11,275,400
				Tobacco	35,768,200
				Restricted	191,423,100
				GF/GP	481,800,200
<i>Related Boilerplate Section(s): 1641, 1680, 1681, 1682, 1685, 1687, 1688, 1689, 1690, 1710, 1712</i>					
Elder prescription insurance coverage	68,011,800	Covers prescription drug costs for low income senior citizens with incomes up to 200% of the poverty level who are not eligible for Medicaid.	Funding Source(s):	Federal	38,011,800
				Tobacco	30,000,000
<i>Related Boilerplate Section(s): 1627</i>					
Health plan services	1,549,361,500	Comprehensive medical services provided by health maintenance organizations enrolled as Medicaid qualified health plans and reimbursed through a fixed capitation fee.	Funding Source(s):	Federal	855,726,000
				Local	299,572,500
				Restricted	224,026,100
				GF/GP	170,036,900
<i>Related Boilerplate Section(s): 1650, 1651, 1653, 1654, 1655, 1656, 1657, 1658, 1659, 1660, 1661, 1662</i>					

MIChild program	36,875,600	Comprehensive health care services to non-Medicaid eligible low-income children in households with income up to 200% of poverty
		Funding Source(s): Federal 28,175,600 GF/GP 8,700,000
		<i>Related Boilerplate Section(s): 1627, 1670, 1671, 1672, 1673, 1674, 1675, 1676, 1677</i>
Medicaid Adult Benefits Waiver	178,707,600	Health care coverage for caretaker relatives and other non-disabled adults who qualify for Medicaid along with former State Medical Program eligible persons, indigent care recipients, and other low income uninsured adults.
		Funding Source(s): Federal 112,714,500 Local 18,309,700 Private 3,512,700 Restricted 6,100,000 GF/GP 38,070,700
		<i>Related Boilerplate Section(s): 1716</i>
Maternal and child health	9,234,500	Payments to local health departments providing maternal and child health services under Title V of Social Security Act for the difference between their actual costs and the Medicaid payment rate
		Funding Source(s): Federal 9,234,500
		<i>Related Boilerplate Section(s): None</i>
Social services to the physically disabled	1,344,900	Assistance to physically disabled adults in establishing independent living arrangements and other supportive services to enable them to become more self-sufficient
		Funding Source(s): GF/GP 1,344,900
		<i>Related Boilerplate Section(s): None</i>
Subtotal basic medical program	5,462,698,200 5,455,897,000	Total authorization for regular Medicaid, MIChild, MIFamily EPIC and other medical services programs
School based services	69,159,500	Federal Medicaid funds paid to local school districts for language, speech, hearing, nursing services, counseling, physical and occupational therapy, and health screening services for Medicaid eligible students in school settings
		Funding Source(s): Federal 69,159,500
		<i>Related Boilerplate Section(s): 1692, 1697</i>
Special adjustor payments	791,338,100	Special payments to various health providers which allow the state to earn additional federal Medicaid funds
		Funding Source(s): Federal 442,844,300 Local 337,754,400 Restricted 10,739,400
		<i>Related Boilerplate Section(s): 1693, 1694</i>
Subtotal special Medicaid payments	860,497,600	Total authorization for Medicaid school based services and special adjustor payments
GROSS APPROPRIATION	\$6,323,195,800 \$6,316,394,600	Total of all applicable line item appropriations
Total federal revenues	3,734,905,000 3,731,103,800	Federal Title XIX Medicaid funds, Title XXI Children's Health Insurance Program funds, and other federal revenue sources
Total local revenues	673,912,000	Revenues from county indigent care programs, county maintenance of effort payments for medical care facilities, and revenues from Medicaid special adjustor payments

Total private revenues	3,512,700	Premiums payments from eligible participants in the MIChild program, drug manufacturer rebates, and universities for the psychiatric residency program
Tobacco settlement revenue	93,000,000	State revenue from the 1998 master settlement agreement with tobacco companies
Total other state restricted revenues	576,773,700	Revenues from the 1987 Cigarette Tax, Healthy Michigan Fund, intergovernmental transfers, and special financing
GENERAL FUND/ GENERAL PURPOSE	\$1,241,092,400 1,238,092,400	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

SECTION 120: INFORMATION TECHNOLOGY

This appropriation unit contains funds for information technology services and projects administered by the Department of Information Technology that was created pursuant to Executive Order 2001-3.

Information technology services and projects	\$30,616,000	Funds for information technology services and projects administered by the Department of Information Technology and user fees for these projects and services
		Funding Source(s):
		IDG 142,700
		Federal 17,304,200
		Restricted 1,793,800
		GF/GP 11,375,300

Related Boilerplate Section(s): 259, 260

GROSS APPROPRIATION	\$30,616,000	Total of all applicable line item appropriations
Interdepartmental grant from the department of corrections	142,700	Interdepartmental grant from the Department of Corrections for costs related to information technology services and projects
Total federal revenues	17,304,200	Federal revenues include Medicaid (Title XIX) revenue, mental health block grant, random moment sampling cost revenue, WIC revenue, and substance abuse block grant revenue
Total other state restricted revenues	1,793,800	Revenue which include the Michigan Health Initiative, vital record fees, first/third party revenue, and fees assessed against convicted defendants deposited in the Crime Victim Rights Services Fund
GENERAL FUND/ GENERAL PURPOSE	\$11,375,300	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenues

BOILERPLATE SECTION INFORMATION

GENERAL SECTIONS

Sec. 201. State Spending

Totals the state spending from state resources under Part 1 for Fiscal Year (FY) 2003-04 and state spending from state resources to be paid to local units of government for FY 2003-04.

Sec. 202. Authorized Appropriations

Provides that appropriations authorized under this act are subject to provisions of the Management and Budget Act. Provides that funds in which the state acts as a custodian or agent are not subject to an annual appropriation.

Sec. 203. Terms and Acronyms

Provides definitions for terms and acronyms used in the appropriations act.

Sec. 204. Civil Service Charges

Requires the Department of Civil Service to bill departments and agencies at the end of the first fiscal quarter for the 1% charge authorized by the State Constitution of 1963. Requires payments for the total billing be made by the end of the second fiscal quarter.

Sec. 205. Hiring Freeze

Imposes a hiring freeze on the state classified civil service employees, except for internal transfers of classified employees from one position to another within a department. Exceptions to the hiring freeze are also granted when they result in the Department being unable to deliver basic services, cause loss of revenue to the state, and result in the inability of the state to receive federal funds. Requires a quarterly report to the Chairpersons of the House of Representatives and Senate Appropriations Committees on the number of exceptions to the approved hiring freeze.

Sec. 207. Privatization

Requires the Department to submit a complete project plan to the appropriate House of Representatives and Senate Appropriations Subcommittees and the House and Senate Fiscal Agencies 60 days before beginning any effort to privatize services

Sec. 208. Internet Reporting Requirements

Requires the Department to use the Internet to fulfill the reporting requirements of this act.

Sec. 209. American Goods or Services and Michigan Goods or Services

Prohibits the use of appropriated funds for the purchase of foreign goods or services, or both, if competitively priced and comparable quality American goods or services, or both, are available. Prohibits the use of appropriated funds for the purchase of out-of-state goods or services, or both, if competitively priced and comparable quality Michigan goods or services, or both, are available.

Sec. 210. Businesses in Deprived and Depressed Communities

Requires the Director of the Department to take reasonable steps to ensure that businesses in deprived and depressed communities compete for and perform contracts to provide services or supplies, or both. Encourages the Director to subcontract with certified businesses in deprived and depressed communities for services or supplies, or both. Requires the Director to take reasonable steps to ensure equal opportunity for all who compete for and perform contracts to provide services or supplies, or both.

Sec. 211. Fee Revenue

Allows fee revenue to be carried forward, with the approval of the State Budget Director, into the next fiscal year and to be used as the first source of funding in that fiscal year.

Sec. 212. Caps on Funds Expended

Caps the funds expended from the federal maternal and child health block grant, federal preventive health and health services block grant, federal substance abuse block grant, healthy Michigan fund, and Michigan initiative fund. Requires a report by February 1, 2004, on the FY 2003-04 appropriations fund sources by line item appropriations. Requires a report on the amount and sources of funds proposed to support the FY 2004-05 Executive Budget Recommendation upon release of the budget. Requires all revenue source detail for consolidated revenue line item detail to be provided upon a request to the Department.

Sec. 213. Report on Tobacco Tax Funds

Requires state departments, agencies, and commissions receiving tobacco tax funds to report on programs utilizing these funds by January 1, 2004, to the House of Representatives and Senate Appropriations Committees, the House and Senate Fiscal Agencies, and the State Budget Director.

Sec. 214. Use of Tobacco Tax Revenue

Prohibits the use of tobacco tax revenue deposited in the healthy Michigan fund for lobbying as defined in Public Act 472 of 1978.

Sec. 216. Use of Prior-Year Revenues

Allows the use of prior-year revenues for the write-offs of accounts receivables, deferrals, and prior-year obligations. Does not limit the Department's ability to satisfy appropriation deductions in Part 1 to collections and accruals provided in FY 2003-04. Requires the Department to report by March 15, 2004, on all reimbursements, refunds, adjustments, and settlements from prior years to the House of Representatives and Senate Appropriations Subcommittees on Community Health.

Sec. 218. Basic Health Services

Lists the basic health services embodied in Part 23 of the Public Health Code that are to be available and accessible throughout the state.

Sec. 219. DCH Contracts with the Michigan Public Health Institute

Allows the Department to contract with the Michigan Public Health Institute for the design and implementation of projects and other public health related activities. Requires the Department to report on each funded project by November 1, 2003, and May 1, 2004, to the House of Representatives and Senate Appropriations Subcommittees on Community Health, the House and Senate Fiscal Agencies, and the State Budget Director. Provides that reports not received by the specified dates will result in the nondisbursement of funds to the Institute until the overdue reports are received. Requires the Department to provide copies of all reports, studies, and publications produced by the Institute by September 30, 2004.

Sec. 220. Audits of Michigan Public Health Institute Contracts

Requires all contracts with the Michigan Public Health Institute that are funded with Part 1 appropriations to include a provision requiring financial and performance audits by the State Auditor General.

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

Allows the Department to establish and collect fees for publications, videos and related materials, conferences, and workshops. Requires collected fees to be used to offset expenditures for printing and mailing costs of publications, videos and related materials, and the costs of conferences and workshops.

Sec. 259. User Fees for Information Technology Services and Projects

Requires the Department to pay user fees to the Department of Information Technology for technology-related services and projects from the Part 1 appropriated funds for information technology. Subjects the user fees to provisions of an interagency agreement between the departments and agencies, and the Department of Information Technology.

Sec. 260. Information Technology Work Projects

Permits the designation of Part 1 appropriated funds for information technology as work projects. Provides that funds designated for work projects are not available for expenditure until approved as work projects under Section 451a of the Management and Budget Act.

Sec. 262. Expenditure of Appropriated Funds

Requires the Department to provide a written explanation for all legislative transfers upon submission of the request for the legislative transfer by the Department of Management and Budget. Requires the explanation to include reasons for not fully expending appropriated funds. Requires the Department to provide an annual report of lapses by line item for this appropriation act.

Sec. 264. Submission of Medicaid Waiver

Requires the Department to notify the House of Representatives and Senate Appropriations Subcommittees on Community Health and the House and Senate Fiscal Agencies upon the submission of a Medicaid waiver, a Medicaid state plan amendment, or similar proposal to the Centers for Medicare and Medicaid Services.

Sec. 265. Retention of Reports

Requires departments and agencies receiving Part 1 appropriations to receive and retain copies of all reports funded from Part 1 appropriations.

DEPARTMENTWIDE ADMINISTRATION

Sec. 301. Worker's Compensation Funds

Allows the Department to make payment from funds appropriated for worker's compensation for wage and salary and related fringe benefits for employees who return to work under limited duty assignments.

Sec. 303. First-Party Payments for Mental Health Services

Prohibits the Department from requiring first-party payments from individuals or families with a taxable income of \$10,000 or less for mental health services for determinations made in accordance with Section 818 of the Mental Health Code.

Sec. 304. Michigan Essential Health Care Provider Program

Allows funds appropriated for the Michigan Essential Health Care Provider Program to be used to provide loan repayment for dentists that meet the criteria established in Part 27 of the Public Health Code.

Sec. 305. Funding for Multicultural Agencies Providing Primary Care Services

Directs the Department to continue to fund multicultural agencies that provide primary care services.

Sec. 307. Primary Care Services Funding for Health Centers

Allocates up to \$2,790,100 to enhance the service capacity of federally qualified health centers and similar health clinics providing primary care services.

Sec. 313. Compulsive Gambling

Requires a November 1, 2003, report to the House of Representatives and Senate Appropriations Subcommittees on Community Health, House and Senate Fiscal Agencies, and State Budget Director on activities undertaken by the Department to address compulsive gambling.

MENTAL HEALTH/SUBSTANCE ABUSE SERVICES ADMINISTRATION AND SPECIAL PROJECTS

Sec. 350. Michigan Protection and Advocacy Services

Allows the Department to enter into a contract with the Michigan Protection and Advocacy Services or a similar organization to provide legal services for the purposes of gaining and maintaining occupancy in a community living arrangement which is under lease or contract with the Department or CMHSPs to provide services to persons with mental illness or developmental disability.

COMMUNITY MENTAL HEALTH/SUBSTANCE ABUSE SERVICES PROGRAMS

Sec. 401. Comprehensive System of CMH Services

Provides that Part 1 appropriated funds are to support a comprehensive system of CMH services under the full authority and responsibility of local CMHSPs or specialty prepaid health plans. Requires the Department to ensure that each CMHSP or specialty prepaid health plan provides a complete array of mental health services, the coordination of inpatient and outpatient hospital services, individualized plans of services, a case management system, and a system that serves at-risk and delinquent youth pursuant to provisions of the Mental Health Code.

Sec. 402. Contracts Between the Department and CMHSPs

Requires final authorizations to CMHSPs or specialty prepaid health plans be made upon the execution of contracts between the Department and CMHSPs or specialty prepaid health plans. Requires each contract with a CMHSP or specialty prepaid health plan to include a provision that it is not valid unless the total dollar obligation of all contracts entered into between the Department and CMHSPs or specialty prepaid health plans for FY 2003-04 does not exceed Part 1 appropriations. Requires the Department to report immediately to the House of Representatives and Senate Appropriations Subcommittees on Community Health, the House and Senate Fiscal Agencies, and the State Budget Director if there are new contracts or amendments to contracts with CMHSPs or specialty prepaid health plans that would affect enacted rates or expenditures.

Sec. 403. Multicultural Service Providers

Requires the Department to ensure that CMHSPs or specialty prepaid health plans continue contracts with multicultural service providers.

Sec. 404. Report on CMHSPs

Requires the Department to provide a report by May 31, 2004, on the following for CMHSPs or specialty prepaid health plans: a demographic description of service recipients which includes reimbursement eligibility, client population, age, ethnicity, housing arrangements, and diagnosis; a breakdown of clients served, by diagnosis as defined in the American Psychiatric Association's Diagnostic and Statistical Manual, when encounter data is available; per capita expenditures by client population group; expenditures by client group and fund source, and cost information by service category; data describing service outcomes; information about access to CMHSPs; an estimate of the number of FTEs employed by CMHSPs or specialty prepaid health plans, contracted with directly by CMHSPs or specialty prepaid health plans, and contracted with provider organizations as of September 30, 2003; lapses and carry-forwards during FY 2002-03; information on the CMH Medicaid managed care program; and performance indicator information required to be submitted to the Department in contracts with CMHSPs or specialty prepaid health plans.

Sec. 405. Wage Increase to Direct Care Workers

Provides that it is the Legislature's intent that the wage increase funded for direct care workers in local residential settings, day programs, supported employment, and other vocational programs continue to be paid.

Sec. 406. Appropriations for State Disability Assistance Substance Abuse Services Program

Requires funds appropriated for the state disability assistance substance abuse services program to be used to support per diem and board payments in substance abuse residential facilities. Requires the Department to reimburse all eligible licensed substance abuse programs at a rate equivalent to that paid by the Family Independence Agency to adult foster care providers.

Sec. 407. Substance Abuse Prevention, Education, and Treatment Grants

Requires that appropriations for substance abuse prevention, education, and treatment grants be expended for contracting with coordinating agencies or designated service providers. Provides that it is the Legislature's intent that coordinating agencies and designated service providers work with CMHSPs or specialty prepaid health plans to coordinate services provided to individuals with both mental illness and substance abuse diagnoses. Requires the Department to establish a fee schedule for providing substance abuse services and charge participants in accordance with their ability to pay.

Sec. 408. Report on Substance Abuse Prevention, Education, and Treatment Programs

Requires the Department to report by April 15, 2004, on the following data on substance abuse prevention, education, and treatment programs for FY 2002-03: expenditures stratified by coordinating agency, by central diagnosis and referral agency, by fund source, by subcontractor, by population served, and by service type; expenditures per state client; number of services provided by central diagnosis and referral agency, by subcontractor, and by service type; and collections from other first/third party payers, private donations, or other state or local programs by coordinating agencies, by subcontractors, by population served, and by service type.

Sec. 409. Substance Abuse Services to Clients with Children

Requires funds for substance abuse services to be distributed in a manner to provide priority to service providers that furnish child care services to clients with children.

Sec. 410. Substance Abuse Treatment for FIA Recipients

Requires the Department to assure that substance abuse treatment is provided to applicants and recipients of public assistance through the Family Independence Agency who are required to obtain substance abuse treatment as a condition of eligibility for public assistance.

Sec. 411. Jail Diversion Services for Persons with Mental Illness or Developmental Disability

Requires the Department to ensure that each contract with a CMHSP or specialty prepaid health plan require the CMHSP or specialty prepaid health plan to implement programs to encourage diversions for persons with mental illness, serious emotional disturbance, or developmental disability from possible jail incarceration when appropriate. Requires each CMHSP or specialty prepaid health plan to have jail diversion services and work toward establishing relationships with representative staff of local law enforcement agencies.

Sec. 412. Non-Medicaid Substance Abuse Services

Requires the Department to contract with the Salvation Army Harbor Light Program for providing non-Medicaid substance abuse services at not less than the amount contracted for in FY 2002-03.

Sec. 414. Medicaid Substance Abuse Services

Requires Medicaid substance abuse services to be managed by selected CMHSPs or specialty prepaid health plans pursuant to the Centers for Medicare and Medicaid Services' approval of Michigan's 1915(b) waiver request to implement a managed care plan for specialized substance abuse services. Authorizes selected CMHSPs or specialty prepaid health plans to receive a capitated payment on a per eligible per month basis to assure the provision of medically necessary substance abuse services. Requires selected CMHSPs or specialty prepaid health plans to be responsible for the reimbursement of claims for specialized substance abuse services. Allows CMHSPs or specialty prepaid health plans that are not coordinating agencies to continue to contract with a coordinating agency provided that the alternative arrangement is based on client service needs and has prior approval from the Department.

Sec. 418. Monthly Report on Medicaid Managed Mental Health Program

Requires the Department to report monthly on the amount of funding paid to CMHSPs or specialty prepaid health plans to support the Medicaid managed mental health program.

Sec. 423. Delivery of Substance Abuse Prevention, Education, and Treatment Programs

Requires the Department to work cooperatively with the Family Independence Agency and the Departments of Corrections, Education, State Police, and Military and Veterans Affairs, within existing appropriations, to coordinate and improve the delivery of substance abuse prevention, education, and treatment programs. Requires the outcomes of the cooperative effort to be reported by March 15, 2004, to the House of Representatives and Senate Appropriations Subcommittees on Community Health, the House and Senate Fiscal Agencies, and the State Budget Director.

Sec. 424. Timely Claims Process for CMHSPs

Requires CMHSPs or specialty prepaid health plans that contract with the Department to provide services to the Medicaid population to adhere to the timely claims processing and payments procedure to claims submitted by health professionals and facilities as described in Public Act 187 of 2000.

Sec. 425. Report on Prisoners Receiving Mental Health and Substance Abuse Services

Requires the Department, in conjunction with the Department of Corrections, to report by April 1, 2004, on the following FY 2002-03 data to the House of Representatives and Senate Appropriations Subcommittees on Community Health and Corrections, the House and Senate Fiscal Agencies, and the State Budget Office: the number of prisoners receiving substance abuse services; the number of prisoners receiving mental health services; and data indicating if prisoners receiving mental health services were previously hospitalized in a state psychiatric hospital for persons with mental illness.

Sec. 428. Contingency Appropriation for CMHSPs

Requires CMHSPs or affiliations of CMHSPs to provide local funds from internal resources that can be used as a bona fide source for the state match required under the Medicaid program in order to increase capitation rates for CMHSPs and affiliations of CMHSPs. Requires the distribution of the rate increase to be based on a formula developed by a Committee established by the Department that includes representatives from CMHSPs or affiliations of CMHSPs and department staff.

Sec. 435. 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 throughout the fiscal year.

Sec. 439. Community Residential Settings Pilots

Expresses the Legislature's intent that the Department, in conjunction with CMHSPs, supports pilot projects that facilitate the movement of adults with mental illness from state psychiatric hospitals to community residential settings. Provides that the purpose of the voluntary pilot projects are to encourage the placement of persons with mental illness in community residential settings who, among other things, require a secured and supervised living environment and assistance in taking prescribed medications. Requires quarterly reports to the House of Representatives and Senate Appropriations Subcommittees on Community Health, the House and Senate Fiscal Agencies, and the State Budget Office on activities undertaken by the Department and CMHSPs for pilot projects implemented under this section.

Sec. 442. Medicaid Adult Benefits Waiver Program

Expresses the Legislature's intent that the \$40 million transferred from CMH Non-Medicaid Services to support the Medicaid Adult Benefits Waiver program be used to provide state match for increases in federal funding for primary care and specialty services provided to Medicaid Adult Benefits waiver enrollees and economic increases for the Medicaid Specialty Services and Supports program. Requires the general fund match be transferred back to CMH Non-Medicaid Services if enrollment in the Medicaid Adult Benefits Waiver program does not achieve expectations and the funding for the program is not expended. Also requires the Department to request in a Medicaid Specialty Services waiver renewal application that the amount of savings retained by a specialty prepaid health plan (PHP) be changed from 5% to 7.5% of aggregate capitation payments. If the Department is unable to secure federal approval for this change, the Department is then required to allow PHPs and their affiliate CMHSP members to retain 50% of the GF/GP portion of the funds allocated under the Medicaid Specialty Services waiver. Requires the Department to report quarterly on a summary of eligible expenditures for the Medicaid Adult Benefits Waiver program to the House and Senate Appropriations Subcommittees on Community Health.

Sec.450. Audit and Reporting Requirements for CMHSPs

Requires the Department to establish a Work Group comprised of CMHSPs or specialty prepaid health plans and department staff to recommend strategies to streamline audit and reporting requirements for CMHSPs or specialty prepaid health plans.

STATE PSYCHIATRIC HOSPITALS, CENTERS FOR PERSONS WITH DEVELOPMENTAL DISABILITIES, AND FORENSIC AND PRISON MENTAL HEALTH SERVICES

Sec. 601. Third-Party Payments and Revenue Recapture Project

Requires that priority be given to obtaining third-party payments for services in the funding of staff in the financial support division, reimbursement, billing, and collection services. Requires the collections from individual recipients of services to be handled in a sensitive and nonharassing manner. Requires the Department to continue a revenue recapture project to generate additional third party revenue from cases that are closed or inactive.

Sec. 602. Pay Telephone Revenues and Gifts and Bequests

Authorizes the carry forward of unexpended and unencumbered funds up to \$500,000 from pay telephone revenues and gifts and bequests for patient living and treatment environments for one fiscal year.

Sec. 603. Forensic Mental Health Services Provided to the Department of Corrections

Specifies that the funds appropriated in Part 1 for Forensic Mental Health Services provided to the Department of Corrections are in accordance with the interdepartmental plan developed in cooperation with the Department of Corrections. Authorizes the Department to receive and expend funds from the Department of Corrections to fulfill the obligations outlined in the interdepartmental agreement.

Sec. 604. Semiannual Reports for CMHSPs

Requires CMHSPs or specialty prepaid health plans to provide semiannual reports to the Department on the following information: the number of days of care purchased from state hospitals and centers; the number of days of care purchased from private hospitals in lieu of purchasing days of care from state hospitals and centers; the number and type of alternative placements to state hospitals and centers other than private hospitals; and waiting lists for placements in state hospitals and centers. Requires the Department to semiannually report the information to the House of Representatives and Senate Appropriations Subcommittees on Community Health, the House and Senate Fiscal Agencies, and the State Budget Director.

Sec. 605. Closures or Consolidations of State Hospitals and Centers

Prohibits the Department from implementing the closures or consolidations of state hospitals, centers, and agencies until CMHSPs or specialty prepaid health plans have programs and services in place for those persons currently in the facilities. Requires the Department to provide a closure plan four months after the closure certification to the House of Representatives and Senate Appropriations Subcommittees on Community Health. Requires the transfer of remaining operational funds from closed state hospitals, centers, and agencies to CMHSPs or specialty prepaid health plans responsible for providing services to these clients.

Sec. 606. Patient Reimbursement

Allows the Department to collect revenue for patient reimbursement from first/third party payers, including Medicaid, to cover the cost of placement in state hospitals and centers. Authorizes the Department to adjust financing sources for patient reimbursement based on actual revenues earned. Permits the carry forward of revenue collected that exceeds current year expenditures if approved by the State Budget Director.

INFECTIOUS DISEASE CONTROL

Sec. 801. Priority for Adolescents for AIDS Prevention Services

Requires the Department and its subcontractors to ensure that adolescents receive priority for AIDS prevention, education, and outreach services.

Sec. 802. AIDS Provider Education

Allows the Department to provide funding to the Michigan State Medical Society as the lead agency for continuing the development and implementation of AIDS provider education activities.

Sec. 803. AIDS Drug Assistance Program

Directs the Department to continue the AIDS drug assistance program maintaining the prior year eligibility criteria and drug formulary, without prohibiting the Department from providing assistance for improved AIDS treatment medications.

EPIDEMIOLOGY

Sec. 853. Bioterrorism Preparedness Funding Allocation - VETOED

New language to allocate up to \$1.0 million of federal bioterrorism preparedness funding to a Biosafety Level 2/3 certified laboratory facility, as allowed by federal law and regulations.

LOCAL HEALTH ADMINISTRATION AND GRANTS

Sec. 901. Informed Consent Law Reimbursement of Local Costs

Directs the Department to reimburse local health departments for costs incurred for services under the informed consent law.

Sec. 902. Funding Penalty in Case of Dissolution of Multi-County Local Health Department

Provides authority for the Department to assess a penalty on a county of up to 5% of the local health department's local public health operations funding if that county ceases to be part of a district health department or an associated arrangement with other local health departments.

Sec. 903. Lead Abatement Program Report

Directs the Department to report annually on the expenditures and activities of the lead abatement program.

Sec. 904. Local Public Health Operations Allocations

Establishes that local public health operations funds shall be prospectively allocated to local public health departments to support costs for nine state/local cost-shared services. Local public health departments will be held to contractual standards for these services. Certain of these services shall be provided in consultation with the Michigan Departments of Agriculture, and Environmental Quality. Local eligibility for distributions is contingent upon local spending of at least the amount expended locally in FY 1992-93 for these services. Requires that a report on planned allocations be made available upon request by April 1, 2004.

CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION

Sec. 1001. Cancer Awareness and Education

Requires the Department to allocate funds to promote awareness, education and early detection of breast, cervical, prostate, and colorectal cancer and provide for other health promotion media activities.

Sec. 1002. School Health Education Curriculum

Requires that funding be allocated to certain school districts to provide a school health education curriculum that is in accordance with the health education goals established by the Michigan Model for the Comprehensive School Health Education State Steering Committee. Establishes steering committee membership and requires that curriculum materials be made available upon request.

Sec. 1003. Alzheimer's Disease Information and Referral Services

Allocates funds to provide Alzheimer's disease information and referral services through regional networks.

Sec. 1006. Priority for Smoking Prevention and Cessation Program Funding

Requires the Department to give priority to prevention and smoking cessation programs for pregnant women, women with young children, and adolescents, in spending funds allocated to smoking prevention programs.

Sec. 1007. Violence Prevention Program

Directs that violence prevention funds be used for, but not limited to, programs aimed at the prevention of spouse, partner or child abuse and rape, and programs aimed at the prevention of workplace violence. Directs that the Department give equal consideration to public and private nonprofit grant applicants. The Department may provide funds to local school districts.

Sec. 1009. Grant to National Kidney Foundation of Michigan

Permits the allocation of funds from the diabetes and kidney program line item to the National Kidney Foundation of Michigan for kidney disease prevention programs.

Sec. 1010. Osteoporosis Prevention and Education Funding

Appropriates funds for osteoporosis prevention and treatment education contingent on the availability of Healthy Michigan Funds or federal Preventive Health and Health Services Block Grant funds.

Sec. 1019. Stroke Prevention Funding

Allocates \$50,000 for stroke prevention, education, and outreach.

Sec. 1020. Arthritis Education Program Funding

Allocates \$105,000 for a childhood and adult arthritis program.

Sec. 1028. African-American Male Health Initiative Funding

Appropriates funds for the African-American male health initiative contingent on the availability of Healthy Michigan Funds or federal Preventive Health and Health Services Block Grant funds.

COMMUNITY LIVING, CHILDREN, AND FAMILIES

Sec. 1101. Reallocation of Funds for Certain Programs in Cases of Underexpenditures

Requires the Department to review the basis for the distribution of funds to local health departments and other agencies from various programs in the Community Living, Children, and Families appropriation unit and the WIC program and indicate the basis on which any projected underexpenditures are to be reallocated to other local agencies that demonstrate need.

Sec. 1104. Department Report Regarding Certain Pregnancy Planning and Prenatal Programs

Requires the Department to report by April 1, 2004, on planned allocations and additional actual service and expenditure data for local maternal and child health services, prenatal care outreach and service delivery support, family planning local agreements, and pregnancy prevention programs.

Sec. 1105. Contract with Local Agencies Best Able to Serve Clients

Requires the Department to contract for services to be provided through the Community Living, Children, and Families appropriation unit with local agencies best able to serve clients. Factors upon which to evaluate an agency's ability to serve clients are described.

Sec. 1106. Family Planning Title X Funding Compliance

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

Sec. 1106a. Abstinence Education Program Requirements

Establishes specific items of instruction as requirements for abstinence education programs expending federal abstinence education funds. Directs that funded programs target teenagers most likely to engage in high-risk behavior. Gives priority in allocation of funds to programs that do not provide contraceptives to minors and that strive to include parental involvement. Qualifying programs may receive such funds directly from the Department.

Sec. 1107. Prenatal Care Outreach Administrative Cost Limit

Restricts local administrative, data processing, and evaluation costs to 10% of the amount appropriated for prenatal care outreach and service delivery support.

Sec. 1108. Restrictions on Use of Pregnancy Prevention Funding

Prohibits pregnancy prevention appropriation line item funds from being used for abortion counseling, referrals, or services.

Sec. 1109. Volunteer Dental Services Program for the Uninsured

Allocates funds from the dental program to the Michigan Dental Association to administer a volunteer dental program to provide dental services to the uninsured; requires a report by the Department to be made available upon request not later than December 1; and requires a report by the Michigan Dental Association by December 1, 2003, documenting its efforts to increase membership participation as Medicaid providers.

Sec. 1110. Designation of Delegate Agencies for Family Planning/Pregnancy Prevention Funds

Provides that agencies currently receiving pregnancy prevention and family planning funds shall have the option of receiving those funds directly from the Department and be designated as delegate agencies.

Sec. 1111. Allocation of Funds for Services for Family Planning and Pregnancy Prevention

Directs the Department to allocate no less than 87% of family planning and pregnancy prevention funds for the direct provision of services.

Sec. 1112. Allocation for Communities with High Infant Mortality Rates

Allocates at least \$1,000,000 to communities with high infant mortality rates.

Sec. 1124. Statewide Fetal Infant Mortality Review Network Allocation of Funds

Requires the Department to allocate \$450,000 from federal maternal and child health services block grant funds for the statewide fetal infant mortality review network, if additional block grant funds are available, and directs that the network be funded with a like amount in FY 2004-05 if federal funds become available.

Sec. 1128. Federal Medicaid Funding for the Migrant Health Care Program

Requires the Department to make every effort to maximize the receipt of federal Medicaid funds to support the activities of the migrant health care program, as funded by the migrant health services appropriation line item.

Sec. 1129. Report of Elevated Blood Lead Levels

Requires the Department to annually report to the Legislature from information available to the Department on the number of children with elevated blood lead levels, by county, indicating the blood lead level, and source of information.

Sec. 1133. Infant Mortality Data Release

Requires the Department to release infant mortality rate data to all local public health departments no later than 48 hours prior to releasing infant mortality rate data to the public.

Sec. 1134. Suicide Prevention Funding

Allows the Department to provide \$100,000 to the yellow ribbon suicide prevention program for a pilot project, on the condition that unallocated funds are available in the special projects line item following allotment of funds to existing programs that are required to be funded under this act.

WOMEN, INFANTS, AND CHILDREN FOOD AND NUTRITION PROGRAM

Sec. 1151. Farmer's Market Nutrition Program Local Contributions

Allows the Department to work with local participating agencies to define local annual contributions for the Farmer's Market Nutrition Program, Project FRESH, to enable the Department to request federal matching funds by April 1, 2004, based on local commitment of funds.

CHILDREN'S SPECIAL HEALTH CARE SERVICES

Sec. 1201. Medical Care and Treatment Reimbursement Policies

Requires that payments for medical care and treatment be made consistent with the reimbursement policies of the Michigan medical services program.

Sec. 1202. Children's Special Health Care Services Coverage

Allows the Children's Special Health Care Services program to provide (a) special formula for persons with certain metabolic and allergic disorders; (b) treatment to persons age 21 or older with cystic fibrosis; (c) genetic diagnostic and counseling services; and (d) services to persons age 21 or older with hemophilia.

Sec. 1203. Referrals to Locally-Based Services Programs

Requires that the Department refer clients of the program to the locally-based services program in their community.

OFFICE OF DRUG CONTROL POLICY

Sec. 1250. Interdepartmental Grant to Judiciary for Drug Treatment Courts

Provides for \$1.8 million of federal Byrne grant money to be directed as an interdepartmental grant to the Judicial Branch for local drug treatment courts, in addition to the \$1.8 million funding that the Department currently distributes to local drug treatment courts from the Byrne grant.

CRIME VICTIM SERVICES COMMISSION

Sec. 1302. Allocation of Funds for Forensic Nurse Examiner Programs

Allocates up to \$50,000 for expansion of forensic nurse examiner programs to facilitate training for improved evidence collection for the prosecution of sexual assault. Unexpended funds shall be carried forward.

Sec. 1304. Sexual Assault Evidence Collection Procedures

Requires the Department to work with other named entities to ensure that certain recommended procedures are followed in the collection of evidence in cases of sexual assault.

OFFICE OF SERVICES TO THE AGING

Sec. 1401. Persons Who Qualify for Certain Senior Program Funding

Provides that funding for community, nutrition, and home services is restricted to eligible individuals at least 60 years of age who fail to qualify for home care services under certain federal provisions.

Sec. 1403. Home-Delivered Meals Waiting Lists

Requires regions to report home-delivered meals waiting lists to the Office of Services to the Aging and establishes criteria for being on the waiting list

Sec. 1404. Authorization for Spending for Senior Day Care, Care Management, Respite Care

Allows area agencies on aging and local providers to receive and expend fees for the provision of day care, care management, respite care, and certain eligible home and community-based services. Fees shall be based on a sliding scale, taking client income into consideration, and shall be used to expand services.

Sec. 1406. Allocation of Respite Care Tobacco Settlement Funds for Direct Care

Requires that the \$5.0 million respite care appropriation of tobacco settlement funds shall be used only for direct respite care or adult respite care center services, and shall be allocated according to a long-term care plan. Not more than 10% of the allocation shall be expended for administrative purposes.

Sec. 1413. Support of Locally-Based Community Senior Services

Establishes the Legislature's support of locally-based services, support of local counties in their approval of area agency on aging plans and in changing membership of area agencies on aging in their region, and the Legislature's intent to prohibit area agencies on aging from providing direct services unless a waiver has been received from the Department.

Sec. 1416. Support for In-Home Services for Non-Medicaid Seniors

Establishes the Legislature's commitment to provide in-home services, resources, and assistance for the frail elderly who are not being served by the Medicaid home and community-based services waiver program.

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. 1602. Medicaid Eligibility for the Elderly and Disabled

Provides Medicaid eligibility to low income elderly and disabled persons up to 100% of the poverty level.

Sec. 1603. Medical Services Buy-In Program

Allows the Department to establish a statewide program for persons to purchase medical coverage at a rate determined by DCH.

Sec. 1605. Medicaid Protected Income Level

Establishes the Medicaid protected income level at 100% of the public assistance standard and requires 90-day notice prior to implementation of changes in the protected income level.

Sec. 1606. Medicaid Eligibility Deduction for Guardian and Conservator Charges

Limits the allowable deduction for guardian and conservator charges to \$60 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 the evidence in the application indicates otherwise. Sets procedures to facilitate access to health care for pregnant women including provision of an authorization letter, a listing of Medicaid physicians and health plans, referral to public health clinics for ineligible persons, and allowing qualified applicants to select or remain with the participating obstetrician of her choice. Also specifies that obstetrical and prenatal care claims are to be paid at Medicaid fee-for-service rates if there is no contract between the provider and the managed care plan.

Sec. 1608. Patient Rights and Responsibilities Pamphlet

Provides for a pamphlet on patient rights and responsibilities to be updated and distributed to providers.

Sec. 1610. Provider Cost Report Grievance Procedure

Requires the Department to provide a cost report grievance process for medical providers and payment within nine months following submission of cost reports.

Sec. 1611. Medicaid Payment in Full Provisions

Requires Medicaid payment rate to be accepted as payment in full, including payments from other third-party sources. The Hospital Services payments for persons who are dually eligible for Medicare and Medicaid are to include capital payments in determining the Medicaid reimbursement amount.

Sec. 1615. Medicaid Electronic Billing

Requires enrolled Medicaid providers to submit their billings electronically by April 1, 2004, and directs the Department to have a program for Medicaid providers to submit their bills for services over the internet, unless prohibited by law or regulation.

Sec. 1620. Pharmacy Dispensing Fee and Copayments

Maintains the pharmacy dispensing fee at \$3.77 or the pharmacy's usual and customary charge, whichever is less. Sets the dispensing fee for managed care recipients at the usual charge allowed by the patient's HMO if it is less than \$3.77 and the pharmacy's usual and customary charge. Requires prescription copayments for Medicaid recipients except as prohibited by federal or state law or regulation.

Sec. 1621. Drug Utilization Review and Disease Management

Authorizes drug utilization review and disease management systems with physician oversight and consultation with various medical provider groups. Prohibits therapeutic substitution.

Sec. 1621a. Disease Management Pilot Projects

Allows DCH to establish pilot projects to test the efficacy of disease/health management systems and use the savings in lieu of supplemental rebates to include the drug manufacturer's products on the preferred drug list.

Sec. 1622. Pharmaceutical Best Practice Initiative

Specifies conditions for the continued implementation of the Department's pharmaceutical initiative related to the prior authorization process, the pharmacy and therapeutics committee, and reporting requirements.

Sec. 1622a. Pharmacy and Therapeutics Committee

Expresses legislative intent regarding the makeup of the pharmacy and therapeutics committee to include five licensed retail pharmacists and six licensed physicians all of whom are to be in active clinical practice, residing in the state, and have a representative portion of Medicaid fee-for-service clients in their practice. Also expresses intent that the committee membership shall come from recommendations by the Michigan medical society, the Michigan osteopathic association, the Michigan pharmacist association, and the Michigan retailers association.

Sec. 1623. Dispensing of Maintenance Drugs

Continues the current Medicaid policy that allows for the dispensing of a 100-day supply for maintenance drugs and notice to medical providers regarding this policy. Requires dispensing medication in the quantity prescribed unless subsequent consultation with the physician indicates otherwise.

Sec. 1624. Pharmaceutical Rebates

Authorizes continuation of pharmaceutical rebates and supplemental rebate contracts until a multistate drug purchasing compact is fully established.

Sec. 1625. Atypical Antipsychotic Medications

Directs the Department to continue the practice of placing all atypical antipsychotic medications on the Medicaid preferred drug list.

Sec. 1626. Multistate Drug Purchasing Benefit-Cost Analysis

Requires DCH to provide a benefit-cost analysis that documents greater savings from the multistate drug purchasing compact than the current PDL supplemental rebate program before implementing the compact.

Sec. 1627. Drug Rebates for the State Medical Program and CSHCS Program

Authorizes the Department to secure manufacturer drug rebates for participants in the MICHild, MOMS, State Medical, Children's Special Health Care Services, and EPIC programs that are equivalent to Medicaid rebates, and allows for preauthorization of drugs if rebates are not provided.

Sec. 1628. CSHC Prior Authorization for Prescribed Drugs - VETOED

Exempts Children's Special Health Care Services recipients from needing prior authorization for prescribed drugs through the Pharmaceutical Best Practice initiative.

Sec. 1629. Maximum Allowable Cost (MAC) Drug Pricing

Requires the Department to base its MAC prices for generic drugs on the pricing available from at least two wholesalers who deliver in Michigan.

Sec. 1630. Medicaid Dental, Podiatric, and Chiropractic Services - VETOED

Continues hearing aid, podiatric, and chiropractic services at not less than the level provided on October 1, 1996. Prohibits restrictions on chiropractic services unless the recipient exceeds 18 visits within a year.

Sec. 1631. Copayments for Dental, Podiatric, Chiropractic, Vision, and Hearing Services

Requires copayments on dental, podiatric, chiropractic, vision, and hearing aid services unless prohibited by law or regulation.

Sec. 1633. Healthy Kids Dental Program Expansion

Requires the Department to expand the Healthy Kids Dental program statewide if the funds become available specifically for this purpose.

Sec. 1634. Continuation of Ambulance Services Payment Rate

Requires continuation of the FY 2000-01 5% increase in ambulance service payment rates.

Sec. 1641. Institutional Provider Costs Reports

Requires institutional providers to submit their cost reports within five months of the end of the fiscal year.

Sec. 1643. Psychiatric Residency Training Program

Allocates \$7,270,200 from Graduate Medical Education funds for a psychiatric residency training program if the universities involved provide the necessary Medicaid matching funds.

Sec. 1647. Continuation of Graduate Medical Education Payments

Requires graduate medical education payments to hospitals at no less than the level of rates and payments in effect on April 1, 2003.

Sec. 1648. Automated Toll-Free Eligibility Verification Phone Line

Requires the Department to maintain an automated toll-free phone line for medical providers to verify Medicaid eligibility.

Sec. 1649. Breast and Cervical Cancer Treatment Coverage

Directs the Department to establish breast and cervical cancer treatment coverage for uninsured women under age 65 and with incomes below 250% of the poverty level, pursuant to new federal legislation.

Sec. 1650. Mandatory Managed Care Enrollment Requirement

Authorizes continuation of Medicaid managed care and assignment of recipients who do not select a provider. Requires notice of exception criteria to enrollment, the right to change plans, and complaint/grievance procedures. Specifies the criteria for medical exceptions to mandatory managed care enrollment.

Sec. 1651. Hospice Services Under Medicaid Managed Care

Allows access to hospice services for Medicaid patients enrolled in health maintenance organizations.

Sec. 1653. Conditions for Implementation of Medicaid Managed Care Plans

Establishes conditions for implementation of Medicaid managed care plans related to continuity of care, submission of HMO data for evaluation, health plan advisory council, and choice of plans and prohibits mandatory enrollment in non-metropolitan areas with only one HMO unless there is a choice of two or more physicians. Maintains voluntary enrollment in the Children's Special Health Care Plan, and requires a budget neutral case rate adjustment for persons with AIDS and other high cost conditions.

Sec. 1654. Reimbursement for HMO Covered Services

Requires Medicaid HMOs to pay for services by non-HMO providers if medically necessary, approved by the HMO, immediately required, and can't be obtained through HMO providers on a timely basis. Services are considered approved if the authorization request is not responded to within 24 hours.

Sec. 1655. Twelve-Month Lock-In for HMO Enrollment

Allows for a 12-month lock-in to HMOs with good cause exceptions and allows recipients to change plans for any reason within the first 90 days.

Sec. 1656. HMO Expedited Complaint Review Procedures

Requires an expedited grievance procedure for Medicaid recipients enrolled in qualified health plans, and a toll free phone number to assist with resolving problems and complaints. Annual reports on the complaints received and their resolution are required.

Sec. 1657. HMO Reimbursement for Hospital ER Services and Solvency Standards

Requires reimbursement for emergency room services to screen and stabilize the patient without prior authorization by an HMO, and notice to the HMO regarding the patient's diagnosis and treatment within 24 hours of discharge. Prior authorization by the HMO is required for further services beyond stabilization. Requires DCH to receive assurances from Office of Financial and Insurance Services that new Medicaid HMOS meet net worth and solvency standards prior to contracting with them.

Sec. 1658. HMO Contracts with Hospitals

Expresses legislative intent that HMOs shall have contracts with local hospitals, and requires reimbursement to non-contracted hospitals at Medicaid fee-for-service rates. Also requires hospitals that do not contract with HMOs in their service area to enter into a hospital access agreement as specified in a MSA policy bulletin.

Sec. 1659. Applicable Boilerplate Sections for Medicaid Managed Care

Specifies the Medical Services boilerplate sections that apply to Medicaid managed care programs.

Sec. 1660. Access to EPSDT, Well Child, and Maternal and Infant Support Services

Requires timely access to EPSDT services for children enrolled in Medicaid managed care programs. Specifies primary care provider's responsibility for assuring child's vision and hearing screening. Requires local health departments to provide preschool vision and hearing screenings and accept referrals. Also requires that HMOs provide EPSDT utilization data, well child visits, and maternal and infant support services as described in Medicaid policy, and that DCH provide for budget neutral incentives to improve performance related to the care of children and pregnant women.

Sec. 1661. Prohibition on Prior Authorization for EPSDT and MSS/ISS Services

Requires timely access to Maternal/Infant Support services (MSS/ISS) and coordination with other state or local programs. Also prohibits prior authorization for EPSDT and MSS/ISS screening referrals and up to three MSS/ISS service visits.

Sec. 1662. Review and Analysis of EPSDT and MSS/ISS Performance

Requires the external quality review contractor to conduct a review of all EPSDT components and directs the Department to submit copies of the analysis of HMO HEDIS reports and the annual external quality review report within 30 days. Also requires the Department to work with the Michigan Association of Health Plans and the Michigan Association for Local Public Health to improve EPSDT and MSS/ISS services, and provide training on EPSDT and MSS/ISS.

Sec. 1664. Incentives for Early Entry to Prenatal Care

Requires the Department to provide incentive to providers to increase early entry of Medicaid recipients into prenatal care and provide a progress report by June 1, 2004.

Sec. 1665. Access to EPSDT Health Screening

Requires the Department to develop a plan for improving access to EPSDT health screening services and provide a progress report by June 1, 2004.

Sec. 1670. MICHild Program Eligibility

Specifies that the funds appropriated for the MICHild Program are to be used to provide health care to children under age 19 in families with income below 200 % of the federal poverty level who have not had health insurance within six months of making application for MICHild benefits. Health care coverage is to be provided through expanded Medicaid eligibility for children in families up to 150% of poverty, and through a state-based private health care program for children in families between 150% and 200% of poverty. Requires the Department to contract with any qualified HMO, dental care corporation, health care corporation or other entity which offers to provide the MICHild health care benefit at the capitated rate.

Sec. 1671. MICHild Marketing and Outreach

Requires the Department to continue a comprehensive approach to the marketing and outreach of the MICHild program, and to coordinate such efforts with the Department's existing outreach and marketing activities.

Sec. 1672. Continuous Eligibility for MICHild Participants

Allows the Department to provide up to one year of continuous eligibility for the MICHild Program unless the family members no longer meet the eligibility criteria or the family fails to pay the monthly premium.

Sec. 1673. MICHild Premiums

Allows the Department to establish premiums for eligible persons above 150% of the poverty level not to exceed \$5 per month for a family.

Sec. 1674. Prohibition on MICHild Copayments

Prohibits copayments under the MICHild Program.

Sec. 1675. Medicaid and MICHild Continuity of Care

Assures continuity of care for persons whose category of MICHild eligibility changes due to family income.

Sec. 1676. MICHild Eligibility Verification

Specifies the income level and verification requirements to be used in determining eligibility for the MICHild program.

Sec. 1677. MICHild Benefits

Specifies the benefits to be covered by the MICHild program based on the state employee insurance plan.

Sec. 1680. Nursing Home Wage Pass-Through

Expresses legislative intent that previous nursing home wage pass through payments be continued, and requires a report on nursing home wage and benefit increases provided in FY 2002-03.

Sec. 1681. Home and Community Based Services

Requires the Department and local waiver agents to encourage the use of family members, friends, and neighbors to provide non-medical home and community based services, where appropriate.

Sec. 1682. OBRA Nursing Home Enforcement Provisions

Authorizes the Department to implement federal nursing home enforcement provisions and to receive/expend penalty money for noncompliance.

Sec. 1683. Dignity and Rights of Terminally Ill and Chronically Ill Patients

Requires the Department to promote activities that preserve the dignity and rights of terminally ill and chronically ill individuals, including hospice care, pain management, and suicide prevention.

Sec. 1685. Prospective Setting of Medicaid Nursing Home Payment Rates

Requires Medicaid nursing home payment rates to be set 30 days in advance of the facility's fiscal year, and to be based on the most recent cost report submitted.

Sec. 1687. Residential Care for Alzheimer's Disease or Dementia

Requires an assessment and inventory of all facilities providing residential care to patients afflicted with Alzheimer's disease or dementia and authorizes pilot projects with facilities that have developed specialized residential care for such patients.

Sec. 1688. Personal Care Services Reimbursement Rate

Prohibits a limit on personal care services reimbursement under the Medicaid Home and Community-Based Services program, but allows the Department to maintain the aggregate per day client reimbursement cap for all services provided under the waiver program.

Sec. 1689. Home and Community Based Services

Gives priority in HCBS enrollment to nursing homes residents and those eligible for nursing homes, and requires screening to prevent unnecessary nursing home admissions. Directs DCH to transfer funds to the HCBS program for successfully moving persons out of nursing homes if there is a net reduction in the number of Medicaid nursing home days of care and a net cost savings attributable to moving persons out of nursing homes. Provides for a quarterly report on HCBS allocations and expenditures by regions and net cost savings. Requires competitive bid for administration of the new screening and assessment process for long-term care services.

Sec. 1690. Program of All Inclusive Care for the Elderly (PACE)

Contingent on the availability of funds, and federal approval, requires the Department to encourage and assist in establishing a capitated, managed care benefit for the frail elderly known as PACE in at least parts of three west Michigan counties. The program shall include a comprehensive medical and social service delivery system, a multidisciplinary team approach in an adult day health center supplemented by in-home and referral services.

Sec. 1692. Medicaid School-Based Services

Provides authorization for Medicaid reimbursement of school-based services.

Sec. 1693. Medicaid Special Adjustor Payments Increase

Allows for an increase in Medicaid special adjustor payments if a Medicaid state plan amendment for such payments above the appropriated level is submitted.

Sec. 1694. Allocation to Children's Hospitals

Authorizes distribution of funds to children's hospitals with a high indigent care volume for poison control services.

Sec. 1697. Local Match Funds for School-Based or School-Linked Services

Allows the Department to utilize school district funds received from a health system as the state match for federal Medicaid or children's health insurance program funds to be used for new school-based or school-linked services.

Sec. 1699. Disproportionate Share and Graduate Medical Education Payments

Authorizes separate payments for hospitals serving a disproportionate share of indigent payments and those hospitals providing graduate medical education.

Sec. 1710. MIChoice Home and Community Based Services

Requires the Department to report proposed changes in the MIChoice home and community based services waiver program screening process to the House and Senate Appropriations Subcommittees on Community prior to implementation.

Sec. 1711. Medicaid 2-Tier Case Rate for Emergency Services

Requires the continuation of a 2-tier Medicaid case rate for emergency physician charges. The section was not included in the Executive Recommendation or Senate passed bill.

Sec. 1712. Rural Health Initiative

Subject to the availability of funds, requires DCH to implement a rural health initiative with funds to be first allocated to a rural outpatient hospital adjustor, and secondly, for defibrillator grants, EMT training, or other similar programs.

Sec. 1713. Study on Dentist Participation in Medicaid

Requires the Department to do a study on the level of participation by licensed dentists in the Medicaid program by April 1, 2004, that includes recommendations to reduce or eliminate barriers to participation.

Sec. 1715. Pharmaceutical Services Savings

Requires the pharmaceutical savings of \$18.9 million GF/GP in Part 1 to be achieved through implementation of the federal Medicare prescription drug program, or a withdrawal from the Medicaid Benefits Trust Fund.

Sec. 1716. Adult Benefits Waiver Hospital Case Rate - VETOED

Requires the hospital case rate under the Medicaid Adult Benefits Waiver to be set at a rate that does not exceed \$108.6 million in gross savings.

Sec. 1717. Detroit Medical Center Payment

Requires \$7.0 million in local funds to be received by the state prior to distributing the Detroit Medical Center payment.

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