



DEPARTMENT OF HEALTH AND HUMAN SERVICES FY 2019-20 DECISION DOCUMENT PART 2 BOILERPLATE

HOUSE APPROPRIATIONS SUBCOMMITTEE ON HEALTH AND HUMAN SERVICES

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April 1, 2019



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><u>GENERAL SECTIONS</u></p> <p><i>State Spending to Local Governments</i></p> <p>Sec. 201. Pursuant to section 30 of article IX of the state constitution of 1963, total state spending from state sources under part 1 for fiscal year 2018-2019 is \$6,958,933,800.00 and state spending from state sources to be paid to local units of government for fiscal year 2018-2019 is \$1,468,359,900.00. The itemized statement below identifies appropriations from which spending to local units of government will occur:</p> <p>DEPARTMENT OF HEALTH AND HUMAN SERVICES</p>	<p>Sec. 201. Pursuant to section 30 of article IX of the state constitution of 1963, total state spending from state sources RESOURCES under part 1 for THE fiscal year 2018-2019 2020 is \$6,958,933,800.00 \$7,644,288,300.00 and state spending from state sources RESOURCES to be paid to local units of government for fiscal year 2018-2019 2020 is \$1,468,359,900.00 \$1,554,203,600.00. The itemized statement below identifies appropriations from which spending to local units of government will occur:</p> <p>DEPARTMENT OF HEALTH AND HUMAN SERVICES</p>		
	<p>DEPARTMENTAL ADMINISTRATION AND MANAGEMENT ... \$344,000 MICHIGAN COMMUNITY SERVICE COMMISSION ... 2,300</p>		
	<p>CHILD SUPPORT INCENTIVE PAYMENTS ... 9,465,000 LEGAL SUPPORT CONTRACTS ... 3,511,000</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
COMMUNITY SERVICES AND OUTREACH Crime victim rights services grants \$ 9,474,800 Housing and support services 550,700	COMMUNITY SERVICES AND OUTREACH Crime victim rights services grants... \$ 9,474,800 CRIME VICTIM ADMINISTRATION AND SERVICES ... 7,796,300 DOMESTIC VIOLENCE PREVENTION AND TREATMENT ... 164,500 Housing and support services... 550,700 HOMELESS AND HOUSING PROGRAMS ... 501,200		
CHILDREN'S SERVICES AGENCY - CHILD WELFARE Child care fund \$ 163,968,700	CHILDREN'S SERVICES AGENCY - CHILD WELFARE Child care fund ... \$ 163,968,700 168,267,500 CHILD WELFARE LICENSING..76,700 CHILD WELFARE MEDICAL/PSYCHIATRIC EVALUATIONS ... 32,700 CHILDREN'S TRUST FUND... 150,200 CONTRACTUAL SERVICES, SUPPLIES, AND MATERIALS .. 5,600 FOSTER CARE PAYMENTS 2,485,800 YOUTH IN TRANSITION ... 2,700		
	BAY PINES CENTER ... 26,900 COMMUNITY SUPPORT SERVICES ... 412,800 JUVENILE JUSTICE, ADMINISTRATION AND MAINTENANCE ... 26,500 SHAWONO CENTER ... 1,300		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
PUBLIC ASSISTANCE Family independence program \$ 4,200 Multicultural integration funding 1,193,300 State disability assistance payments 621,300	PUBLIC ASSISTANCE EMERGENCY SERVICES LOCAL OFFICE ALLOCATIONS ... 557,800 Family independence program ... 4,200 1,300 INDIGENT BURIAL ... 4,300 Multicultural integration funding ... 1,193,300 1,387,100 State disability assistance payments ... 621,300 243,400		
BEHAVIORAL HEALTH PROGRAM ADMINISTRATION AND SPECIAL PROJECTS Behavioral health program administration \$ 2,388,700	BEHAVIORAL HEALTH PROGRAM ADMINISTRATION AND SPECIAL PROJECTS Behavioral health program administration ... \$2,388,700 4,252,000		
	FIELD SERVICES CONTRACTUAL SERVICES, SUPPLIES, MATERIALS, AND TRAVEL ... 46,500 EMPLOYMENT AND TRAINING SUPPORT SERVICES ... 7,600 VOLUNTEER SERVICES AND REIMBURSEMENT ... 7,000		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
BEHAVIORAL HEALTH SERVICES Autism services \$ 66,413,100 Children with serious emotional disturbance waiver 3,555,000 Children's waiver home care program 7,195,700 Community mental health non-Medicaid services 125,578,200 Community substance use disorder prevention, education, and treatment 16,208,500 Court-appointed guardian and conservator reimbursement 1,500,000 Health homes 70,700 Healthy Michigan plan - behavioral health 20,212,200 Medicaid mental health services 787,894,000 Medicaid substance use disorder services 23,704,200 Nursing home PAS/ARR-OBRA 3,070,500 State disability assistance program substance use disorder services 2,018,400	BEHAVIORAL HEALTH SERVICES Autism services ... \$ 66,413,100 77,750,000 Children with serious emotional disturbance waiver 3,555,000 3,594,000 Children's waiver home care program ... 7,195,700 7,274,700 Community mental health non-Medicaid services ... 125,578,200 Community substance use disorder prevention, education, and treatment ... 16,208,500 14,735,900 Court-appointed guardian and conservator reimbursement... 1,500,000 Health homes ... 70,700 50,800 Healthy Michigan plan - behavioral health ... 20,212,200 32,396,000 Medicaid mental health services... 787,894,000 852,130,400 Medicaid substance use disorder services ... 23,704,200 23,381,300 Nursing home PAS/ARR-OBRA ... 3,070,500 2,485,800 State disability assistance program substance use disorder services... 2,018,400 1,807,600		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL HEALTH SERVICES Caro Regional Mental Health Center - psychiatric hospital – adult \$ 1,200 Center for forensic psychiatry 1,400	STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL HEALTH SERVICES Caro Regional Mental Health Center - psychiatric hospital – adult ... \$ 1,200 182,900 Center for forensic psychiatry ... 1,400 643,600 HAWTHORN CENTER – PSYCHIATRIC HOSPITAL – CHILDREN AND ADOLESCENTS ... 93,600 KALAMAZOO PSYCHIATRIC HOSPITAL – ADULT ... 33,300 WALTER P. REUTHER PSYCHIATRIC HOSPITAL – ADULT ... 48,000		
HEALTH POLICY Primary care services \$ 88,900	HEALTH POLICY MICHIGAN REHABILITATION SERVICES ... 262,600 Primary care services ... \$88,900		
DISEASE CONTROL, PREVENTION, AND EPIDEMIOLOGY Childhood lead program \$ 72,700 Epidemiology administration 291,400 Healthy homes program 10,000 Immunization program 1,138,900	DISEASE CONTROL, PREVENTION, AND EPIDEMIOLOGY Childhood lead program ... \$ 72,700 Epidemiology administration ... 291,400 233,200 Healthy homes program 10,000 99,200 Immunization program ... 1,138,900 VITAL RECORDS AND HEALTH STATISTICS ... 5,100		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
LOCAL HEALTH AND ADMINISTRATIVE SERVICES AIDS prevention, testing, and care programs \$ 2,038,400 Cancer prevention and control program 121,400 Essential local public health services 40,269,300 Health and wellness initiatives..... 2,363,300 Local health services 4,500,000 Public health administration..... 19,800 Sexually transmitted disease control program..... 438,400	LOCAL HEALTH AND ADMINISTRATIVE SERVICES AIDS prevention, testing, and care programs ... \$2,038,400 2,323,800 Cancer prevention and control program ... 121,400 463,000 CHRONIC DISEASE CONTROL AND HEALTH PROMOTION ADMINISTRATION ... 2,189,400 Essential local public health services ... 40,269,300 Health and wellness initiatives ... 2,363,300 Local health services ... 4,500,000 3,184,300 Public health administration ... 19,800 Sexually transmitted disease control program ... 438,400 442,700		
FAMILY, MATERNAL, AND CHILD HEALTH Family planning local agreements \$ 225,400 Prenatal care outreach and service delivery support 3,941,500	FAMILY, MATERNAL, AND CHILD HEALTH Family planning local agreements ... \$225,400 187,700 FAMILY, MATERNAL, AND CHILD HEALTH ADMINISTRATION ... 52,300 IMMUNIZATION PROGRAM 1,247,900 Prenatal care outreach and service delivery support ... 3,941,500 3,809,100 SPECIAL PROJECTS ... 760,000		
EMERGENCY MEDICAL SERVICES, TRAUMA, AND PREPAREDNESS Emergency medical services program..... \$ 71,000	EMERGENCY MEDICAL SERVICES, TRAUMA, AND PREPAREDNESS Emergency medical services program ... \$ 71,000 8,200		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
CHILDREN'S SPECIAL HEALTH CARE SERVICES Medical care and treatment \$ 797,200 Outreach and advocacy..... 2,598,100	CHILDREN'S SPECIAL HEALTH CARE SERVICES Medical care and treatment... \$797,200 368,800 Outreach and advocacy ... 2,598,100 2,617,900		
AGING AND ADULT SERVICES AGENCY Aging and adult services administration \$ 594,100 Community services 21,726,700 Nutrition services 11,086,900 Respite care program 5,224,500 Senior volunteer service programs 946,300	AGING AND ADULT SERVICES AGENCY Aging and adult services administration ... \$594,100 716,400 Community services ... 21,726,700 21,589,100 Nutrition services ... 11,086,900 12,597,200 Respite care program ... 5,224,500 6,375,300 Senior volunteer service programs ... 946,300 1,000,400		
MEDICAL SERVICES ADMINISTRATION Medical services administration..... \$ 282,000	MEDICAL SERVICES ADMINISTRATION Medical services administration ... \$282,000		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
MEDICAL SERVICES Adult home help services \$ 486,300 Ambulance services 475,900 Auxiliary medical services 1,300 Dental services 1,265,400 Healthy Michigan plan-managed care 4,353,000 Home health services 8,200 Hospice services 38,100 Hospital services and therapy 1,313,400 Long-term care services 104,351,600 Medicaid home- and community-based services waiver 10,995,100 Personal care services 23,800 Pharmaceutical services 20,300 Physician services 4,690,100 Special Medicaid reimbursement 5,415,200 Transportation 23,200	MEDICAL SERVICES Adult home help services ... \$486,300 269,100 Ambulance services... 475,900 441,400 Auxiliary medical services.. 1,300 1,100 Dental services ... 1,265,400 1,166,900 HEALTH PLAN SERVICES ... 658,300 Healthy Michigan plan-managed care ... 4,353,000 HEALTHY MICHIGAN PLAN.. 463,800 Home health services ... 8,200 15,500 Hospice services ... 38,100 51,700 HOSPITAL DISPROPORTIONATE SHARE PAYMENTS ... 9,000 Hospital services and therapy ... 1,313,400 2,032,000 Long-term care services.. 104,351,600 90,155,600 Medicaid home- and community-based services waiver 10,995,100 11,666,900 Personal care services... 23,800 28,900 Pharmaceutical services 20,300 16,400 Physician services 4,690,100 3,320,300 Special Medicaid reimbursement ... 5,415,200 112,900 Transportation ... 23,200 235,900		
ONE-TIME APPROPRIATIONS Drinking water declaration of emergency \$ 428,000	ONE-TIME APPROPRIATIONS Drinking water declaration of emergency ... \$428,000 700,000		
TOTAL OF PAYMENTS TO LOCAL UNITS OF GOVERNMENT \$ 1,468,359,900	TOTAL OF PAYMENTS TO LOCAL UNITS OF GOVERNMENT \$1,468,359,900 \$1,554,203,600		



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

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Appropriations Subject to Management and Budget Act</i></p> <p>Sec. 202. The appropriations authorized under this part and part 1 are subject to the management and budget act, 1984 PA 431, MCL 18.1101 to 18.1594.</p>	<p>Sec. 202. The appropriations authorized under this part and part 1 ARTICLE are subject to the management and budget act, 1984 PA 431, MCL 18.1101 to 18.1594.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>Terms and Acronyms</p> <p>Sec. 203. As used in this part and part 1:</p> <p>(a) "AIDS" means acquired immunodeficiency syndrome.</p> <p>(b) "CMHSP" means a community mental health services program as that term is defined in section 100a of the mental health code, 1974 PA 258, MCL 330.1100a.</p> <p>(c) "CMS" means the Centers for Medicare and Medicaid Services.</p> <p>(d) "Current fiscal year" means the fiscal year ending September 30, 2019.</p> <p>(e) "Department" means the department of health and human services.</p> <p>(f) "Director" means the director of the department.</p> <p>(g) "DSH" means disproportionate share hospital.</p> <p>(h) "EPSDT" means early and periodic screening, diagnosis, and treatment.</p> <p>(i) "Federal poverty level" means the poverty guidelines published annually in the Federal Register by the United States Department of Health and Human Services under its authority to revise the poverty line under 42 USC 9902.</p> <p>(j) "FTE" means full-time equated.</p> <p>(k) "GME" means graduate medical education.</p> <p>(l) "Health plan" means, at a minimum, an organization that meets the criteria for delivering the comprehensive package of services under the department's comprehensive health plan.</p> <p>(m) "HEDIS" means healthcare effectiveness data and information set.</p> <p>(n) "HMO" means health maintenance organization.</p> <p>(o) "IDEA" means the individuals with disabilities education act, 20 USC 1400 to 1482.</p> <p>(p) "IDG" means interdepartmental grant.</p> <p>(q) "MCH" means maternal and child health.</p> <p>(r) "Medicaid" means subchapter XIX of the social security act, 42 USC 1396 to 1396w-5.</p>	<p><i>(ONLY changed items are shown below).</i></p> <p>(d) "Current fiscal year" means the fiscal year ending September 30, 2019 2020.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

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<p>(ff) "Title IV-B" means part B of title IV of the social security act, 42 USC 620 to 629m.</p> <p>(gg) "Title IV-D" means part D of title IV of the social security act, 42 USC 651 to 669b.</p> <p>(hh) "Title IV-E" means part E of title IV of the social security act, 42 USC 670 to 679c.</p> <p>(ii) "Title X" means subchapter VIII of the public health service act, 42 USC 300 to 300a-8, which establishes grants to states for family planning services.</p>	(ff) - (ii) No changes from current law.		
<p><i>Internet Reporting Requirements</i></p> <p>Sec. 204. Unless otherwise specified, the departments and agencies receiving appropriations in part 1 shall use the internet to fulfill the reporting requirements of this part and part 1. This requirement shall include transmission of reports via electronic mail to the recipients identified for each reporting requirement, and it shall include placement of reports on the internet.</p>	<p>Sec. 204. Unless otherwise specified, the THE departments and agencies receiving appropriations in part 1 shall use the internet to fulfill the reporting requirements of this part and part 1</p> <p>ARTICLE. This requirement shall MAY include transmission of reports via electronic mail to the recipients identified for each reporting requirement, and it shall OR IT MAY include placement of reports on the internet AN INTERNET OR INTRANET SITE.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Purchasing Preference for American, Michigan, and Veteran Goods or Services</i></p> <p>Sec. 205. Funds appropriated in part 1 shall not be used for the purchase of foreign goods or services, or both, if competitively priced and of comparable quality American goods or services, or both, are available. Preference shall be given to goods or services, or both, manufactured or provided by Michigan businesses if they are competitively priced and of comparable quality. In addition, preference shall be given to goods or services, or both, that are manufactured or provided by Michigan businesses owned and operated by veterans if they are competitively priced and of comparable quality.</p>	<p>Sec. 205. No changes from current law.</p>		
<p><i>Businesses in Deprived and Depressed Communities</i></p> <p>Sec. 206. The director shall take all reasonable steps to ensure businesses in deprived and depressed communities compete for and perform contracts to provide services or supplies, or both. Each director shall strongly encourage firms with which the department contracts to subcontract with certified businesses in depressed and deprived communities for services, supplies, or both.</p>	<p>Sec. 206. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Out-of-State Travel Report</i></p> <p>Sec. 207. The departments and agencies receiving appropriations in part 1 shall prepare a report on out-of-state travel expenses not later than January 1 of each year. The travel report shall be a listing of all travel by classified and unclassified employees outside this state in the immediately preceding fiscal year that was funded in whole or in part with funds appropriated in the department's budget. The report shall be submitted to the senate and house appropriations committees, the house and senate fiscal agencies, and the state budget director. The report shall include the following information:</p> <p>(a) The dates of each travel occurrence. (b) The transportation and related costs of each travel occurrence, including the proportion funded with state general fund/general purpose revenues, the proportion funded with state restricted revenues, the proportion funded with federal revenues, and the proportion funded with other revenues.</p>	<p>Sec. 207. No changes from current law.</p>		
<p><i>Legal Services of Attorney General</i></p> <p>Sec. 208. Funds appropriated in part 1 shall not be used by a principal executive department, state agency, or authority to hire a person to provide legal services that are the responsibility of the attorney general. This prohibition does not apply to legal services for bonding activities and for those outside services that the attorney general authorizes.</p>	<p>Sec. 208. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>General Fund/General Purpose Appropriation Lapse Report</p> <p>Sec. 209. Not later than November 30, the state budget office shall prepare and transmit a report that provides for estimates of the total general fund/general purpose appropriation lapses at the close of the prior fiscal year. This report shall summarize the projected year-end general fund/general purpose appropriation lapses by major departmental program or program areas. The report shall be transmitted to the chairpersons of the senate and house appropriations committees, and the senate and house fiscal agencies.</p>	<p>Sec. 209. No changes from current law.</p>		
<p>Contingency Fund Appropriations</p> <p>Sec. 210. (1) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$400,000,000.00 for federal contingency funds. These funds are not available for expenditure until they have been transferred to another line item in part 1 under section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393. These funds shall not be made available to increase TANF authorization.</p>	<p>Sec. 210. (1) No changes from current law, except:</p> <p>“... transferred to another line item in part 1 THIS ARTICLE ...”</p>		
<p>(2) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$45,000,000.00 for state restricted contingency funds. These funds are not available for expenditure until they have been transferred to another line item in part 1 under section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.</p>	<p>(2) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$45,000,000.00 \$90,000,000.00 for state restricted contingency funds. These funds are not available for expenditure until they have been transferred to another line item in part 1 THIS ARTICLE under section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>(3) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$40,000,000.00 for local contingency funds. These funds are not available for expenditure until they have been transferred to another line item in part 1 under section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.</p>	<p>(3) No changes from current law, except: “... transferred to another line item in part 1 THIS ARTICLE ...”</p>		
<p>(4) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$60,000,000.00 for private contingency funds. These funds are not available for expenditure until they have been transferred to another line item in part 1 under section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.</p>	<p>(4) No changes from current law, except: “... transferred to another line item in part 1 THIS ARTICLE ...”</p>		
<p>Accessible Website Data on Expenditures and Payments</p> <p>Sec. 211. The department shall cooperate with the department of technology, management, and budget to maintain a searchable website accessible by the public at no cost that includes, but is not limited to, all of the following for each department or agency:</p> <p>(a) Fiscal year-to-date expenditures by category. (b) Fiscal year-to-date expenditures by appropriation unit. (c) Fiscal year-to-date payments to a selected vendor, including the vendor name, payment date, payment amount, and payment description. (d) The number of active department employees by job classification. (e) Job specifications and wage rates.</p>	<p>Sec. 211. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>State Restricted Funds Report</i></p> <p>Sec. 212. Within 14 days after the release of the executive budget recommendation, the department shall cooperate with the state budget office to provide the senate and house appropriations chairs, the senate and house appropriations subcommittees chairs on the department budget, and the senate and house fiscal agencies with an annual report on estimated state restricted fund balances, state restricted fund projected revenues, and state restricted fund expenditures for the previous fiscal year and the current fiscal year.</p>	<p>Sec. 212. Within 14 days after the release of the executive budget recommendation, the department shall cooperate with the state budget office to provide the senate and house appropriations chairs, the senate and house appropriations subcommittees chairs on the department budget, and the senate and house fiscal agencies with an annual report on estimated state restricted fund balances, state restricted fund projected revenues, and state restricted fund expenditures for the previous fiscal year and the current fiscal year. FISCAL YEARS ENDING SEPTEMBER 30, 2019 AND SEPTEMBER 30, 2020.</p>		
<p><i>Performance Metrics</i></p> <p>Sec. 213. The department shall maintain, on a publicly accessible website, a department scorecard that identifies, tracks, and regularly updates key metrics that are used to monitor and improve the department's performance.</p>	<p>Sec. 213. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>Legacy Costs</p> <p>Sec. 214. Total authorized appropriations from all sources under part 1 for legacy costs for the current fiscal year are estimated at \$365,234,500.00. From this amount, total agency appropriations for pension-related legacy costs are estimated at \$168,379,300.00. Total agency appropriations for retiree health care legacy costs are estimated at \$196,855,200.00.</p>	<p>Sec. 214. Total authorized appropriations from all sources under part 1 for legacy costs for the current fiscal year are estimated at \$365,234,500.00 \$350,330,100.00. From this amount, total agency appropriations for pension-related legacy costs are estimated at \$168,379,300.00 \$170,303,500.00. Total agency appropriations for retiree health care legacy costs are estimated at \$196,855,200.00 \$180,026,600.00.</p>		
<p>Notification When Legislative Objectives Conflict with Federal Regulation or When Grant Unused</p> <p>Sec. 215. If either of the following events occur, within 30 days the department shall notify the state budget director, the chairs of the house and senate appropriations subcommittees on the department budget, and the house and senate fiscal agencies and policy offices of that fact:</p> <p>(a) A legislative objective of this part or of a bill or amendment to a bill to amend the social welfare act, 1939 PA 280, MCL 400.1 to 400.119b, cannot be implemented because implementation would conflict with or violate federal regulations.</p> <p>(b) A federal grant, for which a notice of an award has been received, cannot be used, or will not be used.</p>	<p>Sec. 215. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
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<p><i>Use of Prior-Year Revenue</i></p> <p>Sec. 216. (1) In addition to funds appropriated in part 1 for all programs and services, there is appropriated for write-offs of accounts receivable, deferrals, and for prior year obligations in excess of applicable prior year appropriations, an amount equal to total write-offs and prior year obligations, but not to exceed amounts available in prior year revenues.</p>	<p>Sec. 216. (1) No changes from current law.</p>		
<p>(2) The department's ability to satisfy appropriation fund sources in part 1 shall not be limited to collections and accruals pertaining to services provided in the current fiscal year, but shall also include reimbursements, refunds, adjustments, and settlements from prior years.</p>	<p>(2) No changes from current law.</p>		
<p><i>Detailed Report of Fund Sources</i></p> <p>Sec. 217. (1) By February 1 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director on the detailed name and amounts of estimated federal, restricted, private, and local sources of revenue that support the appropriations in each of the line items in part 1.</p>	<p>Sec. 217. (1) No changes from current law.</p>		
<p>(2) Upon the release of the next fiscal year executive budget recommendation, the department shall report to the same parties in subsection (1) on the amounts and detailed sources of federal, restricted, private, and local revenue proposed to support the total funds appropriated in each of the line items in part 1 of the next fiscal year executive budget proposal.</p>	<p>(2) No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
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<p>Basic Health Services</p> <p>Sec. 218. The department shall include, but not be limited to, the following in its annual list of proposed basic health services as required in part 23 of the public health code, 1978 PA 368, MCL 333.2301 to 333.2321:</p> <ul style="list-style-type: none"> (a) Immunizations. (b) Communicable disease control. (c) Sexually transmitted disease control. (d) Tuberculosis control. (e) Prevention of gonorrhea eye infection in newborns. (f) Screening newborns for the conditions listed in section 5431 of the public health code, 1978 PA 368, MCL 333.5431, or recommended by the newborn screening quality assurance advisory committee created under section 5430 of the public health code, 1978 PA 368, MCL 333.5430. (g) Health and human services annex of the Michigan emergency management plan. (h) Prenatal care. 	<p>Sec. 218. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Contract with Michigan Public Health Institute</i></p> <p>Sec. 219. (1) The department may contract with the Michigan Public Health Institute for the design and implementation of projects and for other public health-related activities prescribed in section 2611 of the public health code, 1978 PA 368, MCL 333.2611. The department may develop a master agreement with the Michigan Public Health Institute to carry out these purposes for up to a 3-year period. The department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director on or before January 1 of the current fiscal year all of the following:</p> <p>(a) A detailed description of each funded project. (b) The amount allocated for each project, the appropriation line item from which the allocation is funded, and the source of financing for each project. (c) The expected project duration. (d) A detailed spending plan for each project, including a list of all subgrantees and the amount allocated to each subgrantee.</p>	<p>Sec. 219. (1) No changes from current law.</p>		
<p>(2) On or before December 30 of the current fiscal year, the department shall provide to the same parties listed in subsection (1) a copy of all reports, studies, and publications produced by the Michigan Public Health Institute, its subcontractors, or the department with the funds appropriated in the department's budget in the previous fiscal year and allocated to the Michigan Public Health Institute.</p>	<p>(2) No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Faith-Based Contracts and Services</i></p> <p>Sec. 220. The department shall ensure that faith-based organizations are able to apply and compete for services, programs, or contracts that they are qualified and suitable to fulfill. The department shall not disqualify faith-based organizations solely on the basis of the religious nature of their organization or their guiding principles or statements of faith.</p>	<p>Sec. 220. No changes from current law.</p>		
<p><i>Time-Limited Addendum to Social Welfare Act</i></p> <p>Sec. 221. According to section 1b of the social welfare act, 1939 PA 280, MCL 400.1b, the department shall treat part 1 and this part as a time-limited addendum to the social welfare act, 1939 PA 280, MCL 400.1 to 400.119b.</p>	<p>Sec. 221. No changes from current law.</p>		
<p><i>Notification and Report of Policy Changes</i></p> <p>Sec. 222. (1) The department shall make the entire policy and procedures manual available and accessible to the public via the department website.</p>	<p>Sec. 222. (1) No changes from current law.</p>		
<p>(2) The department shall report by April 1 of the current fiscal year on each specific policy change made to implement a public act affecting the department that took effect during the prior calendar year to the house and senate appropriations subcommittees on the budget for the department, the joint committee on administrative rules, the senate and house fiscal agencies, and policy offices. The department shall attach each policy bulletin issued during the prior calendar year to this report.</p>	<p>Striking current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Fees for Publications, Videos, Conferences, and Workshops</i></p> <p>Sec. 223. The department may establish and collect fees for publications, videos and related materials, conferences, and workshops. Collected fees are appropriated when received and shall be used to offset expenditures to pay for printing and mailing costs of the publications, videos and related materials, and costs of the workshops and conferences. The department shall not collect fees under this section that exceed the cost of the expenditures. When collected fees are appropriated under this section in an amount that exceeds the current fiscal year appropriation, within 30 days the department shall notify the chairs of the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies and policy offices, and the state budget director of that fact.</p>	<p>Sec. 223. No changes from current law.</p>		
<p><i>Food Assistance Overissuance Collections</i></p> <p>Sec. 224. The department may retain all of the state's share of food assistance overissuance collections as an offset to general fund/general purpose costs. Retained collections shall be applied against federal funds deductions in all appropriation units where department costs related to the investigation and recoupment of food assistance overissuances are incurred. Retained collections in excess of such costs shall be applied against the federal funds deducted in the departmental administration and support appropriation unit.</p>	<p>Sec. 224. No changes from current law.</p>		
<p><i>Public and Private Service Providers</i></p> <p>Sec. 225. (1) Sanctions, suspensions, conditions for provisional license status, and other penalties shall not be more stringent for private service providers than for public entities performing equivalent or similar services.</p>	<p>Sec. 225. (1) No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>(2) Neither the department nor private service providers or licensees shall be granted preferential treatment or considered automatically to be in compliance with administrative rules based on whether they have collective bargaining agreements with direct care workers. Private service providers or licensees without collective bargaining agreements shall not be subjected to additional requirements or conditions of licensure based on their lack of collective bargaining agreements.</p>	<p>(2) No changes from current law.</p>		
<p><i>Fee Revenue Carryforward</i></p> <p>Sec. 226. If the revenue collected by the department from fees and collections exceeds the amount appropriated in part 1, the revenue may be carried forward with the approval of the state budget director into the subsequent fiscal year. The revenue carried forward under this section shall be used as the first source of funds in the subsequent fiscal year.</p>	<p>Sec. 226. No changes from current law.</p>		
<p><i>Tobacco Tax Funds and Healthy Michigan Fund Report</i></p> <p>Sec. 227. The state departments, agencies, and commissions receiving tobacco tax funds and Healthy Michigan fund revenue from part 1 shall report by April 1 of the current fiscal year to the senate and house appropriations committees, the senate and house fiscal agencies, and the state budget director on the following:</p> <p>(a) Detailed spending plan by appropriation line item including description of programs and a summary of organizations receiving these funds.</p> <p>(b) Description of allocations or bid processes including need or demand indicators used to determine allocations.</p> <p>(c) Eligibility criteria for program participation and maximum benefit levels where applicable.</p> <p>(d) Outcome measures used to evaluate programs, including measures of the effectiveness of these programs in improving the health of Michigan residents.</p>	<p>Sec. 227. No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Interest Payable to DHHS on Late Payments</i></p> <p>Sec. 228. If the department is authorized under state or federal law to collect an overpayment owed to the department, the department may assess a penalty of 1% per month beginning 60 days after notification. If caused by department error, a penalty may not be assessed until 6 months after the initial notification date of the overpayment amount. The department shall not collect penalty interest in an amount that exceeds the amount of the original overpayment. The state share of any funds collected under this section shall be deposited in the state general fund.</p>	<p>Sec. 228. No changes from current law.</p>		



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	EXECUTIVE	HOUSE	SENATE
<p><i>Interagency Agreement with Michigan Talent Investment Agency for Use of TANF Funds</i></p> <p>Sec. 229. (1) The department shall extend the interagency agreement with the Michigan talent investment agency for the duration of the current fiscal year, which concerns TANF funding to provide job readiness and welfare-to-work programming. The interagency agreement shall include specific outcome and performance reporting requirements as described in this section. TANF funding provided to the Michigan talent investment agency in the current fiscal year is contingent on compliance with the data and reporting requirements described in this section. The interagency agreement must require the Michigan talent investment agency to provide all of the following items by January 1 of the current fiscal year for the previous fiscal year to the senate and house appropriations subcommittees on the department budget and the state budget office:</p> <p>(a) An itemized spending report on TANF funding, including all of the following:</p> <ul style="list-style-type: none"> (i) Direct services to recipients. (ii) Administrative expenditures. <p>(b) The number of family independence program (FIP) recipients served through the TANF funding, including all of the following:</p> <ul style="list-style-type: none"> (i) The number and percentage who obtained employment through Michigan Works! (ii) The number and percentage who fulfilled their TANF work requirement through other job readiness programming. (iii) Average TANF spending per recipient. (iv) The number and percentage of recipients who were referred to Michigan Works! but did not receive a job or job readiness placement and the reasons why. 	<p>Sec. 229. (1) No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>(2) By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office an annual report on the following matters itemized by Michigan Works! agency: the number of referrals to Michigan Works! job readiness programs, the number of referrals to Michigan Works! job readiness programs who became a participant in the Michigan Works! job readiness programs, the number of participants who obtained employment, and the cost per participant case.</p>	<p>(2) No changes from current law.</p>		
<p>Implementation of Prior Year Funding Increases Report</p> <p>Sec. 230. By December 31 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office on the status of the implementation of any noninflationary, noncaseload, programmatic funding increases from the previous fiscal year. The report shall confirm the implementation of already implemented funding increases and provide explanations for any planned implementation of funding increases that have not yet occurred. For any planned implementation of funding increases that have not yet occurred, the department shall provide an expected implementation date and the reasons for delayed implementation.</p>	<p>Sec. 230. No changes from current law.</p>		
<p>Travel Reimbursement to Local County Board Members and Directors</p> <p>Sec. 231. From the funds appropriated in part 1 for travel reimbursements to employees, the department shall allocate up to \$100,000.00 toward reimbursing counties for the out-of-pocket travel costs of the local county department board members and county department directors to attend 1 meeting per year of the Michigan County Social Services Association.</p>	<p>Sec. 231. No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>Line Item Spending Plans</p> <p>Sec. 232. (1) The department shall provide the approved spending plan for each line item receiving an appropriation in the current fiscal year to the senate and house appropriations subcommittees on the department budget and the senate and house fiscal agencies within 60 days of approval by the department but not later than January 15 of the current fiscal year. The spending plan shall include the following information regarding planned expenditures for each category: allocation in the previous period, change in the allocation, and new allocation. The spending plan shall include the following information regarding each revenue source for the line item: category of the fund source indicated by general fund/general purpose, state restricted, local, private or federal. Figures included in the approved spending plan shall not be assumed to constitute the actual final expenditures, as line items may be updated on an as-needed basis to reflect changes in projected expenditures and projected revenue. The department shall supplement the spending plan information by providing a list of all active contracts and grants in the department's contract system. For amounts listed in the other contracts category of each spending plan, the department shall provide a list of all contracts and grants and amounts for the current fiscal year, and include the name of the line item and the name of the fund source related to each contract or grant and amount. For amounts listed in the all other costs category of each spending plan, the department shall provide a list detailing planned expenditures and amounts for the current fiscal year, and include the name of the line item and the name of the fund source related to each amount and expenditure.</p>	<p>Sec. 232. (1) The department shall provide the approved spending plan for each line item receiving an appropriation in the current fiscal year to the senate and house appropriations subcommittees on the department budget and the senate and house fiscal agencies within 60 days of approval by the department but not later than January 15 of the current fiscal year. The spending plan shall include the following information regarding planned expenditures for each category: allocation in the previous period, change in the allocation, and new allocation. The spending plan shall include the following information regarding each revenue source for the line item: category of the fund source indicated by general fund/general purpose, state restricted, local, private or federal. Figures included in the approved spending plan shall not be assumed to constitute the actual final expenditures, as line items may be updated on an as-needed basis to reflect changes in projected expenditures and projected revenue. The department shall supplement the spending plan information by providing a list of all active contracts and grants in the department's contract system. For amounts listed in the other contracts category of each spending plan, the department shall provide a list of all ACTIVE contracts and grants and amounts for the current fiscal year, and include the name of the line item and the name of the fund source related to each contract or grant and amount. For amounts listed in the all other costs category of each spending plan, the department shall provide a list detailing KNOWN planned expenditures and amounts for the current fiscal year, and include the name of the line item and the name of the fund source related to each amount and expenditure.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>(2) Notwithstanding any other appropriation authority granted in part 1, the department shall not appropriate any additional general fund/general purpose funds or any related federal and state restricted funds without providing a written 30-day notice to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices.</p>	<p>(2) No changes from current law.</p>		
<p><i>Supplemental - Information Technology Spending Report</i></p> <p>(Sec. 468). (1) Beginning February 1, 2019 and monthly thereafter, the department of health and human services shall report to the senate and house appropriation subcommittees on health and human services, the senate and house fiscal agencies, and the state budget office on all of the following:</p> <p>(a) Fiscal year-to-date information technology spending for the fiscal year ending September 30, 2019 by service and project and by line item appropriation.</p> <p>(b) Planned information technology spending for the remainder of the fiscal year ending September 30, 2019 by service and project and by line item appropriation.</p> <p>(c) Total fiscal year-to-date information technology spending and planned spending for the fiscal year ending September 30, 2019 by service and project and by line item appropriation.</p> <p><i>Language enacted as Sec. 468 of PA 618 of 2018 (SB 601).</i></p>	<p>Sec. 468. 250. (1) Beginning February 1, 2019 and monthly thereafter ON OCTOBER 1, 2019, FEBRUARY 1, 2020, AND MAY 1, 2020, the department of health and human services shall report to the senate and house appropriation subcommittees on health and human services, the senate and house fiscal agencies, and the state budget office on all of the following:</p> <p>(a) Fiscal year-to-date information technology spending for the CURRENT fiscal year ending September 30, 2019 by service and project and by line item appropriation.</p> <p>(b) Planned information technology spending for the remainder of the CURRENT fiscal year ending September 30, 2019 by service and project and by line item appropriation.</p> <p>(c) Total fiscal year-to-date information technology spending and planned INFORMATION TECHNOLOGY spending for the fiscal year ending September 30, 2019 2021 by service and project and by line item appropriation.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>(2) As used in subsection (1), “project” means all of, but not limited to, the following major projects:</p> <p>(a) Community health automated Medicaid processing system (CHAMPS).</p> <p>(b) Bridges and MiBridges eligibility determination.</p> <p>(c) Michigan statewide automated child welfare information system (MiSACWIS).</p> <p>(d) Integrated service delivery.</p> <p><i>Language enacted as Sec. 468 of PA 618 of 2018 (SB 601).</i></p>	<p>(2) No changes from current law.</p> <p><i>NOTE: Under (c), “MiSACWIS” alone can be listed, as that term is defined in Sec. 203.</i></p>		
<p>(3) By April 30, 2019, the department of health and human services, in coordination with the department of technology, management, and budget, shall provide to the senate and house appropriation subcommittees on health and human services, the senate and house fiscal agencies, and the state budget office a 5-year strategic plan for information technology services and projects for the department of health and human services. The strategic plan shall identify any scheduled changes in the federal and state shares of costs related to information technology services and projects over the 5-year period.</p> <p><i>Language enacted as Sec. 468 of PA 618 of 2018 (SB 601).</i></p>	<p>(3) By April 30, 2019, of the CURRENT FISCAL YEAR the department of health and human services, in coordination with the department of technology, management, and budget, shall provide to the senate and house appropriation subcommittees on health and human services, the senate and house fiscal agencies, and the state budget office a ANY CHANGES TO THE 5-year strategic plan for information technology services and projects DETAILED IN THE SUPPLEMENTAL APPROPRIATION for the department of health and human services IN SECTION 468 OF P.A. 618 OF 2018, PART 2. The strategic plan shall identify any scheduled changes in the federal and state shares of costs related to information technology services and projects over the 5 year period.</p>		



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	EXECUTIVE	HOUSE	SENATE
<p><i>Appropriations for Healthy Michigan Plan</i></p> <p>Sec. 252. The appropriations in part 1 for Healthy Michigan plan - behavioral health, Healthy Michigan plan administration, and Healthy Michigan plan are contingent on the provisions of the social welfare act, 1939 PA 280, MCL 400.1 to 400.119b, that were contained in 2013 PA 107 not being amended, repealed, or otherwise altered to eliminate the Healthy Michigan plan. If that occurs, then, upon the effective date of the amendatory act that amends, repeals, or otherwise alters those provisions, the remaining funds in the Healthy Michigan plan - behavioral health, Healthy Michigan plan administration, and Healthy Michigan plan line items shall only be used to pay previously incurred costs and any remaining appropriations shall not be allotted to support those line items.</p>	<p>Sec. 252. No changes from current law.</p>		
<p><i>Revise Education Modules Regarding Sexual Abuse Prevention</i></p> <p>Sec. 256. If funds become available, the department shall, in consultation with the Michigan department of education, the Michigan domestic and sexual violence prevention and treatment board, and the Michigan Coalition to End Domestic and Sexual Violence, redraft the curriculum for the “Growing Up & Staying Healthy” and “Healthy & Responsible Relationships” modules to include age-appropriate information about the importance of consent, setting and respecting personal boundaries, and the prevention of child sexual abuse as outlined in MCL 380.1505 and consistent with the recommendations and guidelines set by the task force on the prevention of sexual abuse of children created under section 12b of the child protection law, 1975 PA 238, MCL 722.632b, and the prevention of sexual assault and dating violence.</p>	<p>Sec. 256. No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Communications with Legislature Regarding Waivers</i></p> <p>Sec. 263. (1) Except as otherwise provided in this subsection, before submission of a waiver, a state plan amendment, or a similar proposal to CMS or other federal agency, the department shall provide written notification of the planned submission to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies and policy offices, and the state budget office. This subsection does not apply to the submission of a waiver, a state plan amendment, or similar proposal that does not propose a material change or is outside of the ordinary course of waiver, state plan amendment, or similar proposed submissions.</p>	<p>Sec. 263. (1) No changes from current law.</p>		
<p>(2) The department shall provide written reports on a semiannual basis to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office summarizing the status of any new or ongoing discussions with CMS or the United States Department of Health and Human Services or other federal agency regarding potential or future waiver applications as well as the status of submitted waivers that have not yet received federal approval. If, at the time a semiannual report is due, there are no reportable items, then no report is required to be provided.</p>	<p>(2) No changes from current law.</p>		
<p><i>DHHS Employee Communication with Legislature</i></p> <p>Sec. 264. The department shall not take disciplinary action against an employee for communicating with a member of the legislature or his or her staff.</p>	<p>Striking current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Expenses Recovered from Legal Actions as Notified by Attorney General</i></p> <p>Sec. 270. The department shall advise the legislature of the receipt of a notification from the attorney general's office of a legal action in which expenses had been recovered pursuant to section 106(4) of the social welfare act, 1939 PA 280, MCL 400.106. By February 1 of the current fiscal year, the department shall submit a written report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office that includes, at a minimum, all of the following:</p> <p>(a) The total amount recovered from the legal action. (b) The program or service for which the money was originally expended. (c) Details on the disposition of the funds recovered such as the appropriation or revenue account in which the money was deposited. (d) A description of the facts involved in the legal action.</p>	<p>Sec. 270. No changes from current law.</p>		



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	EXECUTIVE	HOUSE	SENATE
<p><i>Capped Federal Funds Reports and Legislative Intent</i></p> <p>Sec. 274. (1) The department, in collaboration with the state budget office, shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices 1 week after the day the governor submits to the legislature the budget for the ensuing fiscal year a report on spending and revenue projections for each of the capped federal funds listed below. The report shall contain actual spending and revenue in the previous fiscal year, spending and revenue projections for the current fiscal year as enacted, and spending and revenue projections within the executive budget proposal for the fiscal year beginning October 1, 2019 for each individual line item for the department budget. The report shall also include federal funds transferred to other departments. The capped federal funds shall include, but not be limited to, all of the following:</p> <p>(a) TANF. (b) Title XX social services block grant. (c) Title IV-B part I child welfare services block grant. (d) Title IV-B part II promoting safe and stable families funds. (e) Low-income home energy assistance program.</p>	<p>Sec. 274. (1) No changes from current law.</p>		
<p>(2) It is the intent of the legislature that the department, in collaboration with the state budget office, not utilize capped federal funding for economics adjustments for FTEs or other economics costs that are included as part of the budget submitted to the legislature by the governor for the ensuing fiscal year, unless there is a reasonable expectation for increased federal funding to be available to the department from that capped revenue source in the ensuing fiscal year.</p>	<p>(2) No changes from current law.</p>		



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	EXECUTIVE	HOUSE	SENATE
<p>(3) By February 15 of the current fiscal year, the department shall prepare an annual report of its efforts to identify additional TANF maintenance of effort sources and rationale for any increases or decreases from all of the following, but not limited to:</p> <p>(a) Other departments. (b) Local units of government. (c) Private sources.</p>	Striking current law.		
<p><i>Year-End Federal Funds Adjustments</i></p> <p>Sec. 275. (1) As part of the year-end closing process, the department, with the approval of the state budget director, is authorized to realign sources between other federal, TANF, and capped federal financing authorizations in order to maximize federal revenues. This realignment of financing shall not produce a gross increase or decrease in the department's total individual line item authorizations, nor will it produce a net increase or decrease in total federal revenues, or a net increase in TANF authorization.</p>	<p>Sec. 275. (1) As part of the year-end closing process, the THE department, with the approval of the state budget director, is authorized to realign sources between other federal, TANF, and capped federal financing authorizations in order to maximize federal revenues. This realignment of financing shall not produce a gross increase or decrease in the department's total individual line item authorizations, nor will it produce a net increase or decrease in total federal revenues, or a net increase in TANF authorization.</p>		



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	EXECUTIVE	HOUSE	SENATE
<p>(2) Not later than November 30, the department shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices a report on the realignment of federal fund sources that took place as part of the year-end closing process for the previous fiscal year.</p>	<p>(2) Not later than November 30, WITHIN 30 DAYS OF THE DATE ON WHICH YEAR-END BOOK CLOSING IS COMPLETED, the department shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices a report on the realignment of federal fund sources that took place as part of the year-end closing process for the previous fiscal year.</p>		
<p><i>Performance Based Contracting</i></p> <p>Sec. 279. (1) All master contracts relating to foster care and adoption services as funded by the appropriations in section 105 of part 1 shall be performance-based contracts that employ a client-centered results-oriented process that is based on measurable performance indicators and desired outcomes and includes the annual assessment of the quality of services provided.</p>	<p>Sec. 279. (1) No changes from current law.</p>		
<p>(2) By February 1 of the current fiscal year, the department shall provide the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office a report detailing measurable performance indicators, desired outcomes, and an assessment of the quality of services provided by the department during the previous fiscal year.</p>	<p>(2) No changes from current law.</p>		



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	EXECUTIVE	HOUSE	SENATE
<p><i>Personnel-Related Costs Report</i></p> <p>Sec. 280. By March 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations committees, the house and senate fiscal agencies, the house and senate policy offices, and the state budget director that provides all of the following for each line item in part 1 containing personnel-related costs, including the specific individual amounts for salaries and wages, payroll taxes, and fringe benefits:</p> <p>(a) FTE authorization. (b) Spending authorization for personnel-related costs, by fund source, under the spending plan. (c) Actual year-to-date expenditures for personnel-related costs, by fund source, through the end of the prior month. (d) The projected year-end balance or shortfall for personnel-related costs, by fund source, based on actual monthly spending levels through the end of the prior month. (e) A specific plan for addressing any projected shortfall for personnel-related costs at either the gross or fund source level.</p>	<p>Sec. 280. No changes from current law.</p>		
<p><i>Services and Administrative Limitations for New Contracts</i></p> <p>Sec. 288. (1) Beginning October 1 of the current fiscal year, no less than 90% of a new department contract supported solely from state restricted funds or general fund/general purpose funds and designated in this part or part 1 for a specific entity for the purpose of providing services to individuals shall be expended for such services after the first year of the contract.</p>	<p>Sec. 288. (1) No changes from current law.</p>		
<p>(2) The department may allow a contract to exceed the limitation on administrative and services costs if it can be demonstrated that an exception should be made to the provision in subsection (1).</p>	<p>(2) No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
(3) By September 30 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, house and senate fiscal agencies, and state budget office on the rationale for all exceptions made to the provision in subsection (1) and the number of contracts terminated due to violations of subsection (1).	(3) No changes from current law.		
<p><i>Supervisor-to-Staff Ratio Report</i></p> <p>Sec. 289. By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices an annual report on the supervisor-to-staff ratio by department divisions and subdivisions.</p>	Sec. 289. No changes from current law.		
<p><i>Welfare Fraud Hotline</i></p> <p>Sec. 290. Any public advertisement for public assistance shall also inform the public of the welfare fraud hotline operated by the department.</p>	Sec. 290. No changes from current law.		
<p><i>Multicultural Integration Funding</i></p> <p>Sec. 295. (1) From the funds appropriated in part 1 to agencies providing physical and behavioral health services to multicultural populations, the department shall award grants in accordance with the requirements of subsection (2). The state is not liable for any spending above the contract amount. Funds shall not be released until reporting requirements under section 295 of article X of 2017 PA 107 are satisfied.</p>	Sec. 295. (1) From the funds appropriated in part 1 to agencies providing physical and behavioral health services to multicultural populations, the department shall award grants in accordance with the requirements of subsection (2). The state is not liable for any spending above the contract amount. Funds shall not be released until reporting requirements under section 295 of article X of 2017 PA 107 2018 PA 207 are satisfied.		



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<p>(2) The department shall require each contractor described in subsection (1) that receives greater than \$1,000,000.00 in state grant funding to comply with performance-related metrics to maintain their eligibility for funding. The organizational metrics shall include, but not be limited to, all of the following:</p> <p>(a) Each contractor or subcontractor shall have accreditations that attest to their competency and effectiveness as behavioral health and social service agencies.</p> <p>(b) Each contractor or subcontractor shall have a mission that is consistent with the purpose of the multicultural agency.</p> <p>(c) Each contractor shall validate that any subcontractors utilized within these appropriations share the same mission as the lead agency receiving funding.</p> <p>(d) Each contractor or subcontractor shall demonstrate cost-effectiveness.</p> <p>(e) Each contractor or subcontractor shall ensure their ability to leverage private dollars to strengthen and maximize service provision.</p> <p>(f) Each contractor or subcontractor shall provide timely and accurate reports regarding the number of clients served, units of service provision, and ability to meet their stated goals.</p>	<p>(2) No changes from current law.</p>		
<p>(3) The department shall require an annual report from the contractors described in subsection (2). The annual report, due 60 days following the end of the contract period, shall include specific information on services and programs provided, the client base to which the services and programs were provided, information on any wraparound services provided, and the expenditures for those services. The department shall provide the annual reports to the senate and house appropriations subcommittees on health and human services, the senate and house fiscal agencies, and the state budget office.</p>	<p>(3) No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Employee Legal Costs Related to Flint Water System</i></p> <p>Sec. 296. From the funds appropriated in part 1, the department is responsible for the necessary and reasonable attorney fees and costs incurred by private and independent legal counsel chosen by current and former classified and unclassified department employees in the defense of the employees in any state or federal lawsuit or investigation related to the water system in a city or community in which a declaration of emergency was issued because of drinking water contamination.</p>	<p>Sec. 296. No changes from current law.</p>		
<p><i>FTE Report</i></p> <p>Sec. 297. On a semiannual basis, the department shall report on the number of FTEs in pay status by type of staff. The report shall include a comparison by line item of the number of FTEs authorized from funds appropriated in part 1 to the actual number of FTEs employed by the department at the end of the reporting period.</p>	<p>Sec. 297. No changes from current law.</p>		



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

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Behavioral Health Integration Pilot Projects</i></p> <p>Sec. 298. (1) The department shall continue to work with a willing CMHSP in Kent County and all willing Medicaid health plans in the county to pilot a full physical and behavioral health integrated service demonstration model. The department shall ensure that the demonstration model described in this subsection is implemented in a manner that ensures at least all of the following:</p> <p>(a) That any changes made to a Medicaid waiver or Medicaid state plan to implement the demonstration model described in this subsection must only be in effect for the duration of the demonstration model described in this subsection.</p> <p>(b) That the demonstration model described in this subsection is consistent with the stated core values as identified in the final report of the workgroup established in section 298 of article X of 2016 PA 268.</p> <p>(c) That updates are provided to the medical care advisory council, behavioral health advisory council, and developmental disabilities council.</p>	<p>Sec. 298. (1) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>(2) In addition to the pilot project described in subsection (1), the department shall continue to implement up to 3 pilot projects to achieve fully financially integrated Medicaid behavioral health and physical health benefit and financial integration demonstration models. These demonstration models shall use single contracts between the state and each licensed Medicaid health plan that is currently contracted to provide Medicaid services in the geographic area of the pilot project. The department shall ensure that the pilot projects described in this subsection are implemented in a manner that ensures at least all of the following:</p> <p>(a) That allows the CMHSP in the geographic area of the pilot project to be a provider of behavioral health supports and services.</p> <p>(b) That any changes made to a Medicaid waiver or Medicaid state plan to implement the pilot projects described in this subsection must only be in effect for the duration of the pilot programs established under section 298 of article X of 2016 PA 268.</p> <p>(c) That the project is consistent with the stated core values as identified in the final report of the workgroup described in subsection (1).</p> <p>(d) That updates are provided to the medical care advisory council, behavioral health advisory council, and developmental disabilities council.</p>	(2) No changes from current law.		
<p>(3) It is the intent of the legislature that each pilot project and demonstration model shall be designed to last at least 2 years.</p>	(3) No changes from current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>(4) For the duration of any pilot projects and demonstration model, the department shall require that contracts between CMHSPs and the Medicaid health plans within their pilot region mandate that any and all realized benefits and cost savings of integrating the physical health and behavioral health systems shall be reinvested in services and supports for individuals having or at risk of having a mental illness, an intellectual or developmental disability, or a substance use disorder. Any and all realized benefits and cost savings shall be specifically reinvested in the counties where the savings occurred in accordance with the Medicaid state plan and any applicable Medicaid waiver.</p>	<p>(4) For the duration of any pilot projects and demonstration model, the department shall require that contracts between CMHSPs and the Medicaid health plans within their pilot region mandate that any and all realized benefits and cost savings of integrating the physical health and behavioral health systems shall be reinvested in services and supports for individuals having or at risk of having a mental illness, an intellectual or developmental disability, or a substance use disorder. Any and all realized benefits and cost savings shall be specifically reinvested in the counties PILOT SITE where the savings occurred in accordance with the Medicaid state plan and any applicable Medicaid waiver.</p>		
<p>(5) It is the intent of the legislature that the primary purpose of the pilot projects and demonstration model is to test how the state may better integrate behavioral and physical health delivery systems in order to improve behavioral and physical health outcomes, maximize efficiencies, minimize unnecessary costs, and achieve material increases in behavioral health services without increases in overall Medicaid spending.</p>	<p>(5) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>(6) The department shall continue to partner with 1 of the state's research universities at least 6 months before the completion of each pilot project or demonstration model authorized under this section to evaluate the pilot project or demonstration model. The evaluation must include all of the following:</p> <p>(a) Information on the pilot project's or demonstration model's success in meeting the performance metrics developed in this subsection and information on whether the pilot project could be replicated into other geographic areas with similar performance metric outcomes.</p>	(6)(a) No changes from current law.		
<p>(b) Performance metrics, at a minimum, from each of the following categories:</p> <p>(i) Improvement of the coordination between behavioral health and physical health.</p> <p>(ii) Improvement of services available to individuals with mental illness, intellectual or developmental disabilities, or substance use disorders.</p> <p>(iii) Benefits associated with full access to community-based services and supports.</p> <p>(iv) Customer health status.</p> <p>(v) Customer satisfaction.</p> <p>(vi) Provider network stability.</p> <p>(vii) Treatment and service efficacies before and after the pilot projects and demonstration model.</p> <p>(viii) Use of best practices.</p> <p>(ix) Financial efficiencies.</p> <p>(x) Barriers to clinical data sharing with Medicaid health plans.</p> <p>(xi) Any other relevant categories.</p>	(b) No changes from current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
(c) A requirement that the evaluation shall be completed within 6 months after the end of each pilot project or demonstration model and will be provided to the department, the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office.	(c) No changes from current law.		
(7) By November 1 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on the progress toward implementation of the pilot projects and demonstration model described in this section, and a summary of all projects. The report shall also include information on policy changes and any other efforts made to improve the coordination of supports and services for individuals having or at risk of having a mental illness, an intellectual or developmental disability, a substance use disorder, or a physical health need.	Striking current law.		
(8) Upon completion of any pilot project or demonstration model advanced under this section, the managing entity of the pilot project or demonstration model shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office within 30 days of completion of that pilot project or demonstration model detailing their experience, lessons learned, efficiencies and savings revealed, increases in investment on behavioral health services, and recommendations for extending pilot projects to full implementation or discontinuation.	(8) (7) No changes from current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Request for Proposal for Contract</i></p> <p>Sec. 299. (1) No state department or agency shall issue a request for proposal (RFP) for a contract in excess of \$5,000,000.00, unless the department or agency has first considered issuing a request for information (RFI) or a request for qualification (RFQ) relative to that contract to better enable the department or agency to learn more about the market for the products or services that are the subject of the RFP. The department or agency shall notify the department of technology, management, and budget of the evaluation process used to determine if an RFI or RFQ was not necessary prior to issuing the RFP.</p>	Striking current law.		
<p>(2) From funds appropriated in part 1, for all RFPs issued during the current fiscal year where an existing service received proposals by multiple vendors, the department shall notify all vendors within 30 days of the RFP decision. The notification to vendors shall include details on the RFP process, including the respective RFP scores and the respective cost for each vendor. If the highest scored RFP or lowest cost RFP does not receive the contract for an existing service offered by the department, the notification shall issue an explanation for the reasons that the highest scored RFP or lowest cost RFP did not receive the contract and detail the incremental cost target amount or service level required that was required to migrate the service to a new vendor. Additionally, the department shall include in the notification details as to why a cost or service difference is justifiable if the highest scored or lowest cost vendor does not receive the contract.</p>	Striking current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for General Sections

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>(3) The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by September 30 of the current fiscal year a report that summarizes all RFPs during the current fiscal year where an existing service received proposals by multiple vendors. The report shall list all finalized RFPs where there was a divergence from awarding the contract to the lowest cost or highest scoring vendor. The report shall also include the cost or service threshold required by department policy that must be satisfied in order for an existing contract to be received by a new vendor.</p>	Striking current law.		
<p><i>Supplemental Boilerplate – Over Expenditure Reporting</i></p> <p>(Sec. 467). Beginning February 1, 2019, and monthly thereafter, the department of health and human services shall report to the senate and house appropriation subcommittees on health and human services, the senate and house fiscal agencies, and the state budget office on any line item appropriation for which the department estimates total annual expenditures would exceed the funds appropriated for that line item appropriation by 5% or more. The department of health and human services shall provide a detailed explanation for any relevant line item appropriation exceedance and shall identify the corrective actions undertaken to mitigate line item appropriation expenditures from exceeding the funds appropriated for that line item appropriation by a greater amount. This section does not apply for line item appropriations that are part of the May revenue estimating conference caseload and expenditure estimates.</p> <p><i>Language enacted as Sec. 467 of PA 618 of 2018 (SB 601).</i></p>	Striking current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for Departmentwide Administration

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><u>DEPARTMENTAL ADMINISTRATION AND SUPPORT</u></p> <p><i>2-1-1 Statewide Call System</i></p> <p>Sec. 307. (1) From the funds appropriated in part 1 for demonstration projects, \$950,000.00 shall be distributed as provided in subsection (2). The amount distributed under this subsection shall not exceed 50% of the total operating expenses of the program described in subsection (2), with the remaining 50% paid by local United Way organizations and other nonprofit organizations and foundations.</p>	<p>Sec. 307. (1) No changes from current law.</p>		
<p>(2) Funds distributed under subsection (1) shall be distributed to Michigan 2-1-1, a nonprofit corporation organized under the laws of this state that is exempt from federal income tax under section 501(c)(3) of the internal revenue code of 1986, 26 USC 501, and whose mission is to coordinate and support a statewide 2-1-1 system. Michigan 2-1-1 shall use the funds only to fulfill the Michigan 2-1-1 business plan adopted by Michigan 2-1-1 in January 2005.</p>	<p>(2) No changes from current law.</p>		
<p>(3) Michigan 2-1-1 shall refer to the department any calls received reporting fraud, waste, or abuse of state-administered public assistance.</p>	<p>(3) No changes from current law.</p>		
<p>(4) Michigan 2-1-1 shall report annually to the department and the house and senate standing committees with primary jurisdiction over matters relating to human services and telecommunications on 2-1-1 system performance, the senate and house appropriations subcommittees on the department budget, and the senate and house fiscal agencies, including, but not limited to, call volume by health and human service needs and unmet needs identified through caller data and customer satisfaction metrics.</p>	<p>(4) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for Departmentwide Administration

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Terminal Leave Payments</i></p> <p>Sec. 316. From the funds appropriated in part 1 for terminal leave payments, the department shall not spend in excess of its annual gross appropriation unless it identifies and requests a legislative transfer from another budgetary line item supporting administrative costs, as provided by section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.</p>	<p>Sec. 316. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Child Support Enforcement

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><u>CHILD SUPPORT ENFORCEMENT</u></p> <p><i>Child Support Incentive Payments and Enforcement System Requirements</i></p> <p>Sec. 401. (1) The appropriations in part 1 assume a total federal child support incentive payment of \$26,500,000.00.</p>	<p>Sec. 8-401. (1) The appropriations in part 1 assume a total federal child support incentive payment of \$26,500,000.00 \$26,000,000.00.</p>		
<p>(2) From the federal money received for child support incentive payments, \$12,000,000.00 shall be retained by the state and expended for child support program expenses.</p>	<p>(2) From the federal money received for child support incentive payments, \$12,000,000.00 \$11,500,000.00 shall be retained by the state and expended for child support program expenses.</p>		
<p>(3) From the federal money received for child support incentive payments, \$14,500,000.00 shall be paid to the counties based on each county's performance level for each of the federal performance measures as established in 45 CFR 305.2.</p>	<p>(3) No changes from current law.</p>		
<p>(4) If the child support incentive payment to the state from the federal government is greater than \$26,500,000.00, then 100% of the excess shall be retained by the state and is appropriated until the total retained by the state reaches \$15,397,400.00.</p>	<p>(4) If the child support incentive payment to the state from the federal government is greater than \$26,500,000.00 \$26,000,000.00, then 100% of the excess shall be retained by the state and is appropriated until the total retained by the state reaches \$15,397,400.00. DESIGNATED FOR A CHILD SUPPORT INNOVATION PROGRAM. THE CHILD SUPPORT INNOVATIVE PROGRAM FUNDS SHALL BE AWARDED ON A GRANT BASIS TO COUNTIES OR USED BY THE STATE FOR PERFORMANCE-BASED PROJECTS DESIGNED TO INCREASE THE STATE'S SHARE OF FEDERAL CHILD SUPPORT INCENTIVE PAYMENTS.</p>		



**DEPARTMENT OF HEALTH AND HUMAN SERVICES
Boilerplate for Child Support Enforcement**

FY 2018-19 CURRENT LAW	FY 2019-20		
<p>(5) If the child support incentive payment to the state from the federal government is greater than the amount needed to satisfy the provisions identified in subsections (1), (2), (3), and (4), the additional funds shall be subject to appropriation by the legislature.</p>	EXECUTIVE	HOUSE	SENATE
	<u>NEW LANGUAGE</u>		
	<p>(5) THE UNEXPENDED FUNDS APPROPRIATED IN PART 1 FOR CHILD SUPPORT INCENTIVE PAYMENTS ARE DESIGNATED AS A WORK PROJECT APPROPRIATION, AND ANY UNENCUMBERED OR UNALLOTTED FUNDS SHALL NOT LAPSE AT THE END OF THE FISCAL YEAR AND SHALL BE AVAILABLE FOR EXPENDITURES FOR PROJECTS UNDER THIS SECTION UNTIL THE PROJECTS HAVE BEEN COMPLETED. THE FOLLOWING IS IN COMPLIANCE WITH SECTION 451A(1) OF THE MANAGEMENT AND BUDGET ACT, 1984 PA 431, MCL 21 18.1451A:</p> <p>(A) THE PURPOSE OF THE PROJECT IS FOR PERFORMANCE-BASED PROJECTS AWARDED TO COUNTIES OR USED BY THE STATE DESIGNATED TO INCREASE THE STATE'S SHARE OF FEDERAL CHILD SUPPORT INCENTIVE PAYMENTS.</p> <p>(B) THE PROJECT WILL BE ACCOMPLISHED BY UTILIZING STATE EMPLOYEES OR CONTRACTS WITH SERVICE PROVIDERS, OR BOTH.</p> <p>(C) THE TOTAL ESTIMATED COST OF THE PROJECT IS \$750,000.00.</p> <p>(D) THE TENTATIVE COMPLETION DATE IS SEPTEMBER 30, 2024.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Child Support Enforcement

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
(6) If the child support incentive payment to the state from the federal government is less than \$26,500,000.00, then the state and county share shall each be reduced by 50% of the shortfall.	(6) If the child support incentive payment to the state from the federal government is less than \$26,500,000.00 \$26,000,000.00 , then the state and county share shall each be reduced by 50% of the shortfall.		
<i>County Incentive for Child Support Collections</i> Sec. 409. (1) If statewide retained child support collections exceed \$38,300,000.00, 75% of the amount in excess of \$38,300,000.00 is appropriated to legal support contracts. This excess appropriation may be distributed to eligible counties to supplement and not supplant county title IV-D funding.	Sec. 8-409 (1). No changes from current law		
(2) Each county whose retained child support collections in the current fiscal year exceed its fiscal year 2004-2005 retained child support collections, excluding tax offset and financial institution data match collections in both the current fiscal year and fiscal year 2004-2005, shall receive its proportional share of the 75% excess.	(2) No changes from current law.		
<i>Escheated Child Support Collections Authorization Adjustment</i> Sec. 410. (1) If title IV-D-related child support collections are escheated, the state budget director is authorized to adjust the sources of financing for the funds appropriated in part 1 for legal support contracts to reduce federal authorization by 66% of the escheated amount and increase general fund/general purpose authorization by the same amount. This budget adjustment is required to offset the loss of federal revenue due to the escheated amount being counted as title IV-D program income in accordance with federal regulations at 45 CFR 304.50.	Sec. 8-410. (1) No changes from current law.		



**DEPARTMENT OF HEALTH AND HUMAN SERVICES
Boilerplate for Child Support Enforcement**

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
(2) The department shall notify the chairs of the house and senate appropriations subcommittees on the department budget and the house and senate fiscal agencies within 15 days of the authorization adjustment in subsection (1).	(2) No changes from current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Community Services and Outreach

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><u>COMMUNITY SERVICES AND OUTREACH</u></p> <p><i>School Success Partnership Program</i></p> <p>Sec. 450. (1) From the funds appropriated in part 1 for school success partnership program, the department shall allocate \$525,000.00 by December 1 of the current fiscal year to support the Northeast Michigan Community Service Agency programming, which will take place in each county in the Governor's Prosperity Region 3. The department shall require the following performance objectives be measured and reported for the duration of the state funding for the school success partnership program:</p> <p>(a) Increasing school attendance and decreasing chronic absenteeism.</p> <p>(b) Increasing academic performance based on grades with emphasis on math and reading.</p> <p>(c) Identifying barriers to attendance and success and connecting families with resources to reduce these barriers.</p> <p>(d) Increasing parent involvement with the parent's child's school and community.</p>	Striking current law.		
<p>(2) On a semiannual basis, the Northeast Michigan Community Service Agency shall provide reports to the department on the number of children and families served and the services that were provided to families to meet the performance objectives identified in this section. The department shall distribute the reports within 1 week after receipt to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office.</p>	Striking current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Community Services and Outreach

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Supplemental Boilerplate – Campus Sexual Assault Prevention and Education Initiative</i></p> <p>Sec. 451. (1) Funding appropriated in part 1 for campus sexual assault prevention and education initiative shall be used to provide and administer grants to public or nonpublic community colleges, colleges, universities, and high schools with a physical presence in this state to address campus sexual assault issues in order to improve the safety and security of students, faculty, and staff in campus environments in this state.</p>	<p>Sec. 8-451. (1) No changes.</p>		
<p>(2) Grant funds awarded shall support sexual assault programs, including education, awareness, prevention, reporting, bystander intervention programs, peer advocacy groups, and student organizations dedicated to campus sexual assault prevention and other actions covered by title IX protections.</p>	<p>(2) No changes.</p>		
<p>(3) The department of health and human services shall issue awards no later than May 1, 2019, with a grant period of 1 year.</p>	<p>Striking current law.</p>		
<p>(4) The department of health and human services shall report on grant activities to the senate and house appropriations subcommittees on health and human services, the senate and house appropriations subcommittees on higher education, the senate and house fiscal agencies, and the state budget office by February 28, 2020.</p>	<p>(4) (3) No changes.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Community Services and Outreach

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(5) The unexpended portion of funds appropriated in part 1 for campus sexual assault prevention and education initiative is designated as a work project appropriation. Any unencumbered or unallotted funds shall not lapse at the end of the fiscal year and shall be available for expenditure for the project under this section until the project has been completed. The following is in compliance with section 451a(1) of the management and budget act, 1984 PA 431, MCL 18.1451a:</p> <p>(a) The purpose of the project is to provide grants for sexual assault education, awareness, prevention, reporting, bystander intervention programs, peer advocacy groups, and student organizations dedicated to campus sexual assault prevention and other actions covered by title IX protections. The student organizations may be provided funds to support and develop advocacy groups and act on issues related to prevention of sexual assault, including, but not limited to, student outreach, supporting survivors of sexual assault, and advocating for campus improvements such as additional lighting.</p> <p>(b) The project will be accomplished by grants to eligible community colleges, colleges, universities, and high schools.</p> <p>(c) The total estimated cost of the project is \$1,321,700.00.</p> <p>(d) The estimated completion date is September 30, 2020.</p>	<p>(5) (4)(d) Changes estimated completion date from "September 30, 2020" to "SEPTEMBER 30, 2024".</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Community Services and Outreach

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Allocation of Funds for Forensic Nurse Examiner Programs</i></p> <p>Sec. 452. From the funds appropriated in part 1 for crime victim justice assistance grants, the department shall continue to support forensic nurse examiner programs to facilitate training for improved evidence collection for the prosecution of sexual assault. The funds shall be used for program coordination and training.</p>	<p>Sec. 8-452. From the funds appropriated in part 1 for crime victim justice assistance grants ADMINISTRATION AND SERVICES, the department shall continue to support forensic nurse examiner programs to facilitate training for improved evidence collection for the prosecution of sexual assault. The funds shall be used for program coordination and training.</p>		
<p><i>Homeless Programs Per Diem Increases</i></p> <p>Sec. 453. From the funds appropriated in part 1 for homeless programs, the department shall maintain emergency shelter program per diem rates at \$16.00 per bed night to support efforts of shelter providers to move homeless individuals and households into permanent housing as quickly as possible. Expected outcomes are increased shelter discharges to stable housing destinations, decreased recidivism rates for shelter clients, and a reduction in the average length of stay in emergency shelters.</p>	<p>Sec. 8-453. From the funds appropriated in part 1 for homeless programs, the department shall maintain emergency shelter program per diem rates at \$16.00 \$18.00 per bed night to support efforts of shelter providers to move homeless individuals and households into permanent housing as quickly as possible. Expected outcomes are increased shelter discharges to stable housing destinations, decreased recidivism rates for shelter clients, and a reduction in the average length of stay in emergency shelters.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Community Services and Outreach

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Homeless Programs Funding</i></p> <p>Sec. 454. The department shall allocate the full amount of funds appropriated in part 1 for homeless programs to provide services for homeless individuals and families, including, but not limited to, third-party contracts for emergency shelter services.</p>	<p>Sec. 8-454. The department shall allocate the full amount of funds appropriated in part 1 for homeless AND HOUSING programs to provide services for homeless individuals and families, including, but not limited to, third-party contracts for emergency shelter services.</p>		
<p><i>Homeless Programs TANF Eligibility Reporting</i></p> <p>Sec. 455. As a condition of receipt of federal TANF funds, homeless shelters and human services agencies shall collaborate with the department to obtain necessary TANF eligibility information on families as soon as possible after admitting a family to the homeless shelter. From the funds appropriated in part 1 for homeless programs, the department is authorized to make allocations of TANF funds only to the homeless shelters and human services agencies that report necessary data to the department for the purpose of meeting TANF eligibility reporting requirements. Homeless shelters or human services agencies that do not report necessary data to the department for the purpose of meeting TANF eligibility reporting requirements will not receive reimbursements that exceed the per diem amount they received in fiscal year 2000. The use of TANF funds under this section is not an ongoing commitment of funding.</p>	<p>Sec. 8-455. Chances “homeless programs” to “HOMELESS AND HOUSING PROGRAMS”.</p>		



**DEPARTMENT OF HEALTH AND HUMAN SERVICES
Boilerplate for Community Services and Outreach**

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
	<p>NEW LANGUAGE</p> <p>SEC. 8-456. FROM THE FUNDS APPROPRIATED IN PART 1 FOR HOMELESS AND HOUSING PROGRAMS, THE DEPARTMENT SHALL ALLOCATE \$90,000.00 TO REIMBURSE PUBLIC SERVICE AGENCIES THAT PROVIDE DOCUMENTATION OF PAYING BIRTH CERTIFICATE FEES ON BEHALF OF CATEGORY 1 HOMELESS CLIENTS AT COUNTY CLERK'S OFFICES. PUBLIC SERVICE AGENCIES SHALL BE REIMBURSED FOR THE COST OF THE BIRTH CERTIFICATE FEES QUARTERLY UNTIL THIS ALLOCATION IS FULLY SPENT.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Community Services and Outreach

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Uniform Statewide Sexual Assault Evidence Kit Tracking System</i></p> <p>Sec. 457. (1) From the funds appropriated in part 1 for the uniform statewide sexual assault evidence kit tracking system, in accordance with the final report of the Michigan sexual assault evidence kit tracking and reporting commission, \$800,000.00 is allocated from the sexual assault evidence tracking fund to contract for development and implementation of a uniform statewide sexual assault evidence kit tracking system. The system shall include the following:</p> <p>(a) A uniform statewide system to track the submission and status of sexual assault evidence kits.</p> <p>(b) A uniform statewide system to audit untested kits that were collected on or before March 1, 2015 and were released by victims to law enforcement.</p> <p>(c) Secure electronic access for victims.</p> <p>(d) The ability to accommodate concurrent data entry with kit collection through various mechanisms, including web entry through computer or smartphone, and through scanning devices.</p>	<p>Sec. 8-457. (1) No changes from current law.</p>		
<p>(2) By March 30 of the current fiscal year, the department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a status report on implementation and operation of the uniform statewide sexual assault evidence kit tracking system, including operational status and any known issues regarding implementation.</p>	<p>(2) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Community Services and Outreach

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(3) The sexual assault evidence tracking fund established in section 1451 of 2017 PA 158 shall continue to be maintained in the department of treasury. Money in the sexual assault evidence tracking fund at the close of a fiscal year shall remain in the sexual assault evidence tracking fund and shall not revert to the general fund and shall be appropriated as provided by law for the development and implementation of a uniform statewide sexual assault evidence kit tracking system as described in subsection (1).</p>	(3) No changes from current law.		
<p>(4) By September 30 of the current fiscal year, the department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report on the findings of the annual audit of the proper submission of sexual assault evidence kits as required by the sexual assault kit evidence submission act, 2014 PA 227, MCL 752.931 to 752.935. The report must include, but is not limited to, a detailed county-by-county compilation of the number of sexual assault evidence kits that were properly submitted and the number that met or did not meet deadlines established in the sexual assault kit evidence submission act, 2014 PA 227, MCL 752.931 to 752.935, the number of sexual assault evidence kits retrieved by law enforcement after analysis, and the physical location of all released sexual assault evidence kits collected by health care providers in that year, as of the date of the annual draft report for each reporting agency.</p>	(4) No changes from current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Community Services and Outreach

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Crime Victim Advocates Funding</i></p> <p>Sec. 458. From the funds appropriated in part 1 for crime victim rights services grants, the department shall allocate \$2,000,000.00 of crime victim's rights fund to increase grant funding to support the further use of crime victim advocates in the criminal justice system. The purpose of the additional funding is to increase available grant funding for crime victim advocates to ensure that the advocates have the resources, training, and funding needed to respond to the physical and emotional needs of crime victims and to provide victims with the necessary services, information, and assistance in order to help them understand and participate in the criminal justice system and experience a measure of safety and security throughout the legal process.</p>	<p>Sec. 8-458. Changes "crime victim rights services grants" to "CRIME VICTIM ADMINISTRATION AND SERVICES".</p>		
<p><i>Report on Task Force Recommendations for Reducing Child Sexual Abuse</i></p> <p>Sec. 460. By October 1 of the current fiscal year, the department shall submit to the Michigan department of education the final report containing task force recommendations for reducing child sexual abuse in this state as required by 2012 PA 593, MCL 722.632b.</p>	<p>Striking current law.</p>		
<p><i>Supplemental Boilerplate – Homeless Programs</i></p> <p>Sec. 452. From the funds appropriated in part 1 for homeless programs, the department of health and human services shall increase the emergency shelter program per diem rates by \$2.00 per bed night to support efforts of shelter providers to move homeless individuals and households into permanent housing as quickly as possible.</p>	<p>Striking current law.</p>		



**DEPARTMENT OF HEALTH AND HUMAN SERVICES
Boilerplate for Community Services and Outreach**

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Supplemental Boilerplate – Sexual Assault Comprehensive Services Grant</i></p> <p>Sec. 453. From the funds appropriated in part 1 for sexual assault comprehensive services grant, \$10,000,000.00 shall be allocated to the Michigan domestic and sexual violence prevention and treatment board (MDSVPTB) for sexual assault comprehensive victim services funding, as defined by MDSVPTB, to be distributed through a competitive grant process to entities determined by MDSVPTB to have demonstrated capacity to provide such services.</p>	Striking current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><u>CHILDREN'S SERVICES AGENCY – CHILD WELFARE</u></p> <p><i>Foster Care Time Limit Goals</i></p> <p>Sec. 501. (1) A goal is established that not more than 25% of all children in foster care at any given time during the current fiscal year, if in the best interest of the child, will have been in foster care for 24 months or more.</p>	<p>Sec. 8-501. (4) No changes from current law.</p>		
<p>(2) By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report describing the steps that will be taken to achieve the specific goal established in this section and on the percentage of children who currently are in foster care and who have been in foster care a total of 24 or more months.</p>	<p>Striking current law.</p>		
<p><i>Indian Tribal Government Foster Care Reimbursement</i></p> <p>Sec. 502. From the funds appropriated in part 1 for foster care, the department shall provide 50% reimbursement to Indian tribal governments for foster care expenditures for children who are under the jurisdiction of Indian tribal courts and who are not otherwise eligible for federal foster care cost sharing.</p>	<p>Sec. 8-502. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Child Welfare Performance-Based Funding</i></p> <p>Sec. 503. (1) In accordance with the final report of the Michigan child welfare performance-based funding task force issued in response to section 503 of article X of 2013 PA 59, the department shall continue to develop actuarially sound case rates for necessary child welfare services that achieve permanency by the department and private child placing agencies in a prospective payment system under a performance-based funding model.</p>	<p>Sec. 8-503. (1) In accordance with the final report of the Michigan child welfare performance-based funding task force issued in response to section 503 of article X of 2013 PA 59, the department shall continue to REVIEW, UPDATE, OR develop actuarially sound case rates for necessary child welfare FOSTER CARE CASE MANAGEMENT services that achieve permanency by the department and private child placing agencies in a prospective payment system under a performance-based funding model.</p>		
<p>(2) From the funds appropriated in part 1 for adoption support services, the department shall allocate \$50,000.00 by December 31 of the current fiscal year to conduct an actuarial study on rates paid to private child placing agencies for adoption incentive payments. The actuarial study shall include a full cost prospective rate payment system and shall identify and analyze contractual costs paid through the case rate developed by an independent actuary.</p>	Striking current law		
<p>(3) By October 1 of the current fiscal year, from the funds appropriated in part 1 for adoption support services, the department shall allocate \$950,000.00 of state general fund/general purpose and any eligible federal matching funds to increase rates paid to adoption service providers by up to 10% for adoption placement, adoption finalization, and adoption permanency in all rate categories.</p>	Striking current law		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(4) By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations committees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office a report on the full cost analysis of the performance-based funding model. The report shall include background information on the project and give details about the contractual costs covered through the case rate.</p>	<p>(4) (2) By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations committees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office a report on the full cost analysis of the performance-based funding model. The report shall include background information on the project and give details about the contractual costs covered through the case rate.</p>		
<p>(5) In accordance with the final report of the Michigan child welfare performance-based funding task force issued in response to section 503 of article X of 2013 PA 59, the department shall continue an independent, third-party evaluation of the performance-based funding model.</p>	<p>(5) (3) In accordance with the final report of the Michigan child welfare performance-based funding task force issued in response to section 503 of article X of 2013 PA 59, the department shall continue an independent, third-party evaluation of the performance-based funding model.</p>		
<p>(6) The department shall only implement the performance-based funding model into additional counties where the department, private child welfare agencies, the county, and the court operating within that county have signed a memorandum of understanding that incorporates the intentions of the concerned parties in order to implement the performance-based funding model.</p>	<p>(6) (4) The department shall only implement the performance-based funding model into additional counties where the department, private child welfare agencies, the county, and the court operating within that county have signed a memorandum of understanding that incorporates the intentions of the concerned parties in order to implement the performance-based funding model.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(7) The department, in conjunction with members from both the house of representatives and senate, private child placing agencies, the courts, and counties shall continue to implement the recommendations that are described in the workgroup report that was provided in section 503 of article X of 2013 PA 59 to establish a performance-based funding for public and private child welfare services providers. The department shall provide quarterly reports on the status of the performance-based contracting model to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, and the senate and house fiscal agencies and policy offices.</p>	<p>(7) (5) The department, in conjunction with members from both the house of representatives and senate, private child placing agencies, the courts, and counties shall continue to implement the recommendations that are described in the workgroup report that was provided in section 503 of article X of 2013 PA 59 to establish a performance-based funding for public and private child welfare services providers. The department shall provide quarterly reports on the status of the performance-based contracting model to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, and the senate and house fiscal agencies and policy offices.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(8) From the funds appropriated in part 1 for the performance-based funding model pilot, the department shall continue to work with the West Michigan Partnership for Children Consortium on the implementation of the performance-based funding model pilot. The consortium shall accept and comprehensively assess referred youth, assign cases to members of its continuum or leverage services from other entities, and make appropriate case management decisions during the duration of a case. The consortium shall operate an integrated continuum of care structure, with services provided by both private and public agencies, based on individual case needs. The consortium shall demonstrate significant organizational capacity and competencies, including experience with managing risk-based contracts, financial strength, experienced staff and leadership, and appropriate governance structure.</p>	<p>(8) (6) From the funds appropriated in part 1 for the performance-based funding model pilot, the department shall continue to work with the West Michigan Partnership for Children Consortium on the implementation of the performance-based funding model pilot. The consortium shall accept and comprehensively assess referred youth, assign cases to members of its continuum or leverage services from other entities, and make appropriate case management decisions during the duration of a case. The consortium shall operate an integrated continuum of care structure, with services provided by both private and public agencies, based on individual case needs. The consortium shall demonstrate significant organizational capacity and competencies, including experience with managing risk-based contracts, financial strength, experienced staff and leadership, and appropriate governance structure.</p>		
<p>West Michigan Partnership for Children Consortium</p> <p>Sec. 504. (1) The department may continue a master agreement with the West Michigan Partnership for Children Consortium for a performance-based child welfare contracting pilot program. The consortium shall consist of a network of affiliated child welfare service providers that will accept and comprehensively assess referred youth, assign cases to members of its continuum or leverage services from other entities, and make appropriate case management decisions during the duration of a case.</p>	<p>Sec. 8-504. (1) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
(2) The consortium shall operate an integrated continuum of care structure, with services provided by private or public agencies, based on individual case needs.	(2) No changes from current law.		
(3) By March 1 of the current fiscal year, the consortium shall provide to the department and the house and senate appropriations subcommittees on the department budget a report on the consortium, including, but not limited to, actual expenditures, number of children placed by agencies in the consortium, fund balance of the consortium, and the status of the consortium evaluation.	(3) No changes from current law.		
<p><i>DHHS Juvenile Justice Report</i></p> <p>Sec. 505. By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office a report for youth referred or committed to the department for care or supervision in the previous fiscal year and in the first quarter of the current fiscal year outlining the number of youth served by the department within the juvenile justice system, the type of setting for each youth, performance outcomes, and financial costs or savings.</p>	Sec. 8-505. No changes from current law.		
<p><i>Foster Care Private Collections</i></p> <p>Sec. 507. The department's ability to satisfy appropriation deducts in part 1 for foster care private collections shall not be limited to collections and accruals pertaining to services provided only in the current fiscal year but may include revenues collected during the current fiscal year for services provided in prior fiscal years.</p>	Sec. 8-507. No changes from current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>Children Trust Fund (CTF) Revenues and Joint Projects</p> <p>Sec. 508. (1) In addition to the amount appropriated in part 1 for children's trust fund grants, money granted or money received as gifts or donations to the children's trust fund created by 1982 PA 249, MCL 21.171 to 21.172, is appropriated for expenditure.</p>	<p>Sec. 8-508 (1). No changes from current law.</p>		
<p>(2) The department and the child abuse and neglect prevention board shall collaborate to ensure that administrative delays are avoided and the local grant recipients and direct service providers receive money in an expeditious manner. The department and board shall make available the children's trust fund contract funds to grantees within 31 days of the start date of the funded project.</p>	<p>(2) No changes from current law.</p>		
<p>(3) From the funds appropriated in part 1 for the children's trust fund, \$500,000.00 shall be allocated to provide additional funding to children's trust fund designated local councils for increased substance use disorder programs. The \$500,000.00 additional allocation shall be funded by \$300,000.00 children's trust fund cash reserve balance and \$200,000.00 state general fund/general purpose. The purpose of this additional funding is to increase the amount of services for substance use disorders that is provided by local councils over the amount provided in the previous fiscal year. None of the additional funding directed in this subsection shall be used for purposes other than for local grants and shall not be used for administrative or overhead activities.</p>	<p>Striking current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Physical and Mental Health Assessment Reports</i></p> <p>Sec. 511. The department shall provide reports on a semiannual basis to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, and the senate and house fiscal agencies and policy offices on the number and percentage of children who received timely physical and mental health examinations after entry into foster care. The goal of the program is that at least 85% of children receive timely physical and mental health examinations after entry into foster care.</p>	<p>Sec. 511. The department shall provide reports on a semiannual basis to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, and the senate and house fiscal agencies and policy offices on the number and percentage of children who received timely physical and mental health examinations after entry into foster care. The goal of the program is that at least 85% of children receive timely physical and mental health examinations after entry into foster care. SHALL HAVE AN INITIAL MEDICAL AND MENTAL HEALTH EXAMINATION WITHIN 30 DAYS OF ENTRY INTO FOSTER CARE.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Foster Care Services Provided by Relatives Report</i></p> <p>Sec. 512. (1) As required by the settlement, by March 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the following information for cases of child abuse or child neglect from the previous fiscal year:</p> <p>(a) The total number of relative care placements. (b) The total number of relatives with a placement who became licensed. (c) The number of waivers of foster care licensure granted to relative care providers. (d) The number of waivers of foster care denied to relative care providers. (e) A list of the reasons from a sample of cases the department denied granting a waiver of foster care licensure for a relative care provider. (f) A list of the reasons from a sample of cases where relatives were declined foster care licensure as documented by the department.</p>	<p>Sec. 8-512. (1) No changes from current law.</p>		
<p>(2) The caseworker shall request a waiver of foster care licensure if both of the following apply:</p> <p>(a) The caseworker has fully informed the relative of the benefits of licensure and the option of a licensure waiver. (b) The caseworker has assessed the relative and the relative's home using the department's initial relative safety screen and the department's relative home assessment and has determined that the relative's home is safe and placement there is in the child's best interest.</p>	<p>(2) No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Child Placements in Out-of-State Facilities</i></p> <p>Sec. 513. (1) The department shall not expend funds appropriated in part 1 to pay for the direct placement by the department of a child in an out-of-state facility unless all of the following conditions are met:</p> <p>(a) There is no appropriate placement available in this state as determined by the department interstate compact office.</p> <p>(b) An out-of-state placement exists that is nearer to the child's home than the closest appropriate in-state placement as determined by the department interstate compact office.</p> <p>(c) The out-of-state facility meets all of the licensing standards of this state for a comparable facility.</p> <p>(d) The out-of-state facility meets all of the applicable licensing standards of the state in which it is located.</p> <p>(e) The department has done an on-site visit to the out-of-state facility, reviewed the facility records, reviewed licensing records and reports on the facility, and believes that the facility is an appropriate placement for the child.</p>	<p>Sec. 8-513. (1) No changes from current law.</p>		
<p>(2) The department shall not expend money for a child placed in an out-of-state facility without approval of the executive director of the children's services agency.</p>	<p>(2) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(3) The department shall submit an annual report to the state court administrative office, the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on the number of Michigan children residing in out-of-state facilities at the time of the report, the total cost and average per diem cost of these out-of-state placements to this state, and a list of each such placement arranged by the Michigan county of residence for each child.</p>	<p>(3) The department shall submit an annual report to the state court administrative office, the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on the number of Michigan children residing in out-of-state facilities at the time of the report, ON THE LAST DAY OF THE PREVIOUS FISCAL YEAR the total cost and average per diem cost of these out-of-state placements to this state, and a list of each such placement arranged by the Michigan county of residence for each child.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Child Protective Services Report</i></p> <p>Sec. 514. The department shall make a comprehensive report concerning children’s protective services (CPS) to the legislature, including the senate and house policy offices and the state budget director, by March 1 of the current fiscal year, that shall include all of the following:</p> <p>(a) Statistical information including, but not limited to, all of the following:</p> <p>(i) The total number of reports of child abuse or child neglect investigated under the child protection law, 1975 PA 238, MCL 722.621 to 722.638, and the number of cases classified under category I or category II and the number of cases classified under category III, category IV, or category V.</p> <p>(ii) Characteristics of perpetrators of child abuse or child neglect and the child victims, such as age, relationship, race, and ethnicity and whether the perpetrator exposed the child victim to drug activity, including the manufacture of illicit drugs, that exposed the child victim to substance abuse, a drug house, or methamphetamine.</p>	<p>Sec. 8-514. The department shall make a comprehensive report concerning children’s protective services (CPS) to the legislature, including the senate and house policy offices and the state budget director, by March 1 of the current fiscal year, that shall include all of the following:</p> <p>(a) Statistical information including, but not limited to, all of the following:</p> <p>(i) The total number of reports of child abuse or child neglect investigated under the child protection law, 1975 PA 238, MCL 722.621 to 722.638, and the number of cases classified under category I or category II and the number of cases classified under category III, category IV, or category V.</p> <p>(ii) Characteristics of perpetrators of child abuse or child neglect and the child victims, such as age, relationship, race, and ethnicity and whether the perpetrator exposed the child victim to drug activity, including the manufacture of illicit drugs, that exposed the child victim to substance abuse, a drug house, or methamphetamine.</p>		
<p>(iii) The mandatory reporter category in which the individual who made the report fits, or other categorization if the individual is not within a group required to report under the child protection law, 1975 PA 238, MCL 722.621 to 722.638.</p> <p>(iv) The number of cases that resulted in the separation of the child from the parent or guardian and the period of time of that separation, up to and including termination of parental rights.</p> <p>(v) For the reported complaints of child abuse or child neglect by teachers, school administrators, and school counselors, the number of cases classified under category I or category II and</p>	<p>(iii) (ii) The mandatory reporter category in which the individual who made the report fits, or other categorization if the individual is not within a group required to report under the child protection law, 1975 PA 238, MCL 722.621 to 722.638.</p> <p>(iv) The number of cases that resulted in the separation of the child from the</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>the number of cases classified under category III, category IV, or category V.</p> <p>(vi) For the reported complaints of child abuse or child neglect by teachers, school administrators, and school counselors, the number of cases that resulted in separation of the child from the parent or guardian and the period of time of that separation, up to and including termination of parental rights.</p> <p>(b) New policies related to children's protective services including, but not limited to, major policy changes and court decisions affecting the children's protective services system during the immediately preceding 12-month period.</p> <p>(c) Statistical information regarding families that were classified in category III, including, but not limited to, all of the following:</p> <p>(i) The total number of cases classified in category III.</p> <p>(ii) The number of cases in category III referred to voluntary community services and closed with no additional monitoring.</p> <p>(iii) The number of cases in category III referred to voluntary community services and monitored for up to 90 days.</p> <p>(iv) The number of cases in category III for which the department entered more than 1 determination that there was evidence of child abuse or child neglect.</p> <p>(v) The number of cases in category III that the department reclassified from category III to category II.</p> <p>(vi) The number of cases in category III that the department reclassified from category III to category I.</p> <p>(vii) The number of cases in category III that the department reclassified from category III to category I that resulted in a removal.</p> <p>(d) The department policy, or changes to the department policy, regarding children who have been exposed to the production or manufacture of methamphetamines.</p>	<p>parent or guardian and the period of time of that separation, up to and including termination of parental rights.</p> <p>(v) (iii) For the reported complaints of child abuse or child neglect by teachers, school administrators, and school counselors, the number of cases classified under category I or category II and the number of cases classified under category III, category IV, or category V.</p> <p>(b) No changes.</p> <p>(c) No changes.</p> <p>(d) No changes.</p>		
<p>County Child Care Fund (CCF) Indirect Cost Payments</p> <p>Sec. 516. From funds appropriated in part 1 for county child care fund, the administrative or indirect cost payment equal to 10% of a county's total monthly gross expenditures shall be distributed to the county on a monthly basis and a county is not required to submit documentation to the department for any of the expenditures that are covered under the 10% payment as described in section 117a(4)(b)(i) and (iv) of the social welfare act, 1939 PA 280, MCL 400.117a.</p>	<p>Sec. 8-516. (1) No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Title IV-E Appeals Process</i></p> <p>Sec. 517. The department shall retain the same title IV-E appeals policy in place as of the fiscal year ending September 30, 2017.</p>	Striking current law.		
<p><i>Treatment Foster Care</i></p> <p>Sec. 519. The department shall permit any private agency that has an existing contract with this state to provide foster care services to be also eligible to provide treatment foster care services.</p>	Sec. 8-519. No changes from current law.		
<p><i>Out-of-Home Placements Report</i></p> <p>Sec. 520. To the extent that the data are available, the department shall submit a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office by February 15 of the current fiscal year on the number of days of care and expenditures by funding source for the previous fiscal year for out-of-home placements by specific placement programs for child abuse or child neglect and juvenile justice, including, but not limited to, paid relative placement, department direct family foster care, private agency supervised foster care, private child caring institutions, county-supervised facilities, court-supervised facilities, and independent living. The report shall also identify days of care for department-operated residential juvenile justice facilities by security classification.</p>	Striking current law.		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Fostering Futures Scholarship Program</i></p> <p>Sec. 522. (1) From the funds appropriated in part 1 for youth in transition, the department shall allocate \$750,000.00 for scholarships through the fostering futures scholarship program in the Michigan education trust to youths who were in foster care because of child abuse or child neglect and are attending a college or a career technical educational institution located in this state. Of the funds appropriated, 100% shall be used to fund scholarships for the youths described in this section.</p>	<p>Sec. 8-522. (1) No changes from current law.</p>		
<p>(2) By March 1 of the current fiscal year, the department shall provide a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office that includes the number of youths who received scholarships and the amount of each scholarship, and the total amount of funds spent or encumbered in the current fiscal year.</p>	<p>(2) No changes from current law.</p>		
<p><i>Family Preservation Program Report and TANF Eligibility Reporting</i></p> <p>Sec. 523. (1) By February 15 of the current fiscal year, the department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report on the families first, family reunification, and families together building solutions family preservation programs. The report shall provide population and outcome data based on contractually required follow-up evaluations for families who received family preservation services and shall include information for each program on any innovations that may increase child safety and risk reduction.</p>	<p>Sec. 8-523. (1) No changes from current law.</p>		



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(2) From the funds appropriated in part 1 for youth in transition and domestic violence prevention and treatment, the department is authorized to make allocations of TANF funds only to agencies that report necessary data to the department for the purpose of meeting TANF eligibility reporting requirements.	(2) No changes from current law.		
<p>Strong Families/Safe Children Spending Plan</p> <p>Sec. 524. As a condition of receiving funds appropriated in part 1 for strong families/safe children, counties must submit the service spending plan to the department by October 1 of the current fiscal year for approval. The department shall approve the service spending plan within 30 calendar days after receipt of a properly completed service spending plan.</p>	<p>Sec. 8-524. No changes from current law.</p>		
<p>On-Site Evaluations</p> <p>Sec. 525. The department shall implement the same on-site evaluation processes for privately operated child welfare and juvenile justice residential facilities as is used to evaluate state-operated facilities. Penalties for noncompliance shall be the same for privately operated child welfare and juvenile justice residential facilities and state-operated facilities.</p>	<p>Sec. 8-525. No changes from current law.</p>		



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	EXECUTIVE	HOUSE	SENATE
<p><i>Private Child Placing Agencies' Adoption Worker Caseloads</i></p> <p>Sec. 527. With the approval of the settlement monitor, for the purposes of calculating adoption worker caseloads for private child placing agencies, the department shall exclude the following case types:</p> <p>(a) Cases in which there are multiple applicants as that term is defined in section 22(e) of chapter X of the probate code of 1939, 1939 PA 288, MCL 710.22, also known as a competing party case, in which the case has a consent motion pending from Michigan's children's institute or the court for more than 30 days.</p> <p>(b) Cases in which a birth parent has an order or motion for a rehearing or an appeal as of right that has been pending for more than 15 days.</p>	Striking current law.		
<p><i>Rationale for Requiring Fingerprinting to Become Both a Foster and Adoptive Parent</i></p> <p>Sec. 528. The department shall provide private child placing agencies, the senate and house appropriations subcommittees on the department budget, and the senate and house fiscal agencies and policy offices the federal law, federal rule, or federal rationale or interpretation that requires fingerprinting of an individual as a requirement to become both a foster parent and an adoptive parent.</p>	Striking current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

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	EXECUTIVE	HOUSE	SENATE
<p><i>Child Welfare Contract Change Notification</i></p> <p>Sec. 531. The department shall notify the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices of any changes to a child welfare master contract template, including the adoption master contract template, the independent living plus master contract template, the child placing agency foster care master contract template, and the residential foster care juvenile justice master contract template, not less than 30 days before the change takes effect.</p>	Striking current law.		
<p><i>Licensing and Contract Compliance Review</i></p> <p>Sec. 532. The department, in collaboration with representatives of private child and family agencies, shall revise and improve the annual licensing review process and the annual contract compliance review process for child placing agencies and child caring institutions. The improvement goals shall be safety and care for children. Improvements to the review process shall be directed toward alleviating administrative burdens so that agency resources may be focused on children. The revision shall include identification of duplicative staff activities and information sought from child placing agencies and child caring institutions in the annual review process. The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget director on or before January 15 of the current fiscal year on the findings of the annual licensing review and include summaries of actions undertaken to revise, improve, and identify weaknesses in the current annual licensing process and annual contract compliance.</p>	Striking current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Child Welfare Payment Promptness</i></p> <p>Sec. 533. The department shall make payments to child placing facilities for in-home and out-of-home care services and adoption services within 30 days of receiving all necessary documentation from those agencies. It is the intent of the legislature that the burden of ensuring that these payments are made in a timely manner and no payments are in arrears is upon the department.</p>	<p>Sec. 8-533. No changes from current law.</p>		
<p><i>Adoption Subsidies Report</i></p> <p>Sec. 534. The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by March 1 of the current fiscal year a report on the adoption subsidies expenditures from the previous fiscal year. The report shall include, but is not limited to, the range of annual adoption support subsidy amounts, for both title IV-E eligible cases and state-funded cases, paid to adoptive families, the number of title IV-E and state-funded cases, the number of cases in which the adoption support subsidy request of adoptive parents for assistance was denied by the department, and the number of adoptive parents who requested a redetermination of adoption support subsidy.</p>	<p>Sec. 8-534. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Residential Bed Space Standards and Preferences</i></p> <p>Sec. 537. (1) The department, in collaboration with child placing agencies, shall develop a strategy to implement section 115o of the social welfare act, 1939 PA 280, MCL 400.115o. The strategy shall include a requirement that a department caseworker responsible for preparing a recommendation to a court concerning a juvenile placement shall provide, as part of the recommendation, information regarding the requirements of section 115o of the social welfare act, 1939 PA 280, MCL 400.115o.</p>	Striking current law.		
<p>(2) By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report on the strategy described in subsection (1).</p>	Striking current law.		
<p><i>Psychotropic Medication For Youth in Out-of-Home Placements</i></p> <p>Sec. 540. If a physician or psychiatrist who is providing services to state or court wards placed in a residential facility submits a formal request to the department to change the psychotropic medication of a ward, the department shall, if the ward is a state ward, make a determination on the proposed change within 7 business days after the request or, if the ward is a temporary court ward, seek parental consent within 7 business days after the request. If parental consent is not provided within 7 business days, the department shall petition the court on the eighth business day.</p>	Sec. 8-540. No changes from current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Foster Care Agency Administrative Rates</i></p> <p>Sec. 546. (1) From the funds appropriated in part 1 for foster care payments and from child care fund, the department shall pay providers of general foster care, independent living, and trial reunification services not less than a \$37.00 administrative rate.</p>	<p>Sec. 8-546.(1) From the funds appropriated in part 1 for foster care payments and from child care fund, the department shall pay providers of general foster care, independent living, and trial reunification services not less than a \$37.00 \$46.20 administrative rate.</p>		
<p>(2) From the funds appropriated in part 1, the department shall pay providers of independent living plus services statewide per diem rates for staff-supported housing and host-home housing based on proposals submitted in response to a solicitation for pricing. The independent living plus program provides staff-supported housing and services for foster youth ages 16 through 19 who, because of their individual needs and assessments, are not initially appropriate for general independent living foster care.</p>	<p>(2) No changes from current law.</p>		
<p>(3) From the funds appropriated in part 1, the department shall pay providers of foster care services an additional \$9.20 administrative rate, if section 117a of the social welfare act, 1939 PA 280, MCL 400.117a, is amended to eliminate the county match rate for the additional administrative rate provided in this subsection. Payments under this subsection shall be made, not less than, on a monthly basis.</p>	<p>Striking current law.</p>		
<p>(4) If required by the federal government to meet title IV-E requirements, providers of foster care services shall submit quarterly reports on expenditures to the department to identify actual costs of providing foster care services.</p>	<p>(4) (3) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(5) From the funds appropriated in part 1, the department shall provide an increase to each private provider of residential services, if section 117a of the social welfare act, 1939 PA 280, MCL 400.117a, is amended to eliminate the county match rate for the additional rate provided in this section.</p>	<p>(5) (4) From the funds appropriated in part 1, the department shall provide an increase to MAINTAIN THE RATES IN PLACE ON SEPTEMBER 30, 2019 TO for each private provider of residential services, if section 117a of the social welfare act, 1939 PA 280, MCL 400.117a, is amended to eliminate the county match rate for the additional rate provided in this section.</p>		
<p>Guardianship Assistance Rates</p> <p>Sec. 547. (1) From the funds appropriated in part 1 for the guardianship assistance program, the department shall pay a minimum rate that is not less than the approved age-appropriate payment rates for youth placed in family foster care.</p>	<p>Sec. 8-547. (1) No changes from current law.</p>		
<p>(2) The department shall report quarterly to the state budget office, the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices on the number of children enrolled in the guardianship assistance and foster care - children with serious emotional disturbance waiver programs.</p>	<p>(2) No changes from current law.</p>		
<p>Child Care Fund (CCF) – County Reimbursement Restrictions</p> <p>Sec. 550. (1) The department shall not offset against reimbursement payments to counties or seek reimbursement from counties for charges that were received by the department more than 12 months before the department seeks to offset against reimbursement. A county shall not request reimbursement for and reimbursement payments shall not be paid for a charge that is more than 12 months after the date of service or original status determination when initially submitted by the county.</p>	<p>Sec. 8-550. (1) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
(2) All service providers shall submit a request for payment within 12 months after the date of service. Any request for payment submitted 12 months or more after the date of service requires the provider to submit an exception request to the county or the department for approval or denial.	(2) No changes from current law.		
(3) The county is not subject to any offset, chargeback, or reimbursement liability for prior expenditures resulting from an error in foster care fund source determinations.	(3) No changes from current law.		
<p><i>CCF County Clarification Requests Response Deadline</i></p> <p>Sec. 551. The department shall respond to counties within 30 days regarding any request for a clarification requested through the department's child care fund management unit electronic mail address.</p>	<p>Sec. 8-551. No changes from current law.</p>		
<p><i>County CCF Review Results</i></p> <p>Sec. 552. Sixty days after a county's child care fund on-site review is completed, the department shall provide the results of the review to the county. The department shall not evaluate the relevancy, quality, effectiveness, efficiency, or impact of the services provided to youth of the county's child care fund programs in the review. Pursuant to state law, the department shall not release the results of the review to a third-party without the permission of the county being reviewed.</p>	<p>Sec. 8-552. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Child Welfare Training Institute Report</i></p> <p>Sec. 558. (1) By January 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report that identifies the policies, procedures, and other relevant issues related to the modernization of the child welfare training program.</p>	<p>Sec. 558. (1) By January 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report that identifies the policies, procedures, and other relevant issues related to the modernization of the child welfare training program.</p>		
<p>(2) Based on the results of the study of issues related to the modernization of the child welfare training program undertaken in the previous fiscal year, the department shall make a payment to private child placing agencies upon the completion of the child welfare caseworker training.</p>	<p>(2) Sec. 8-558. Based on the results of the study of issues related to the modernization of the child welfare training program undertaken in the previous fiscal year, the department shall make a payment to private child placing agencies upon the completion of the child welfare caseworker training.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Parent-to-Parent</i></p> <p>Sec. 559. (1) From the funds appropriated in part 1 for adoption support services, the department shall allocate \$250,000.00 to the Adoptive Family Support Network by December 1 of the current fiscal year to operate and expand its adoptive parent mentor program to provide a listening ear, knowledgeable guidance, and community connections to adoptive parents and children who were adopted in this state or another state.</p>	Striking current law.		
<p>(2) The Adoptive Family Support Network shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by March 1 of the current fiscal year a report on the program described in subsection (1), including, but not limited to, the number of cases served and the number of cases in which the program prevented an out-of-home placement.</p>	Striking current law.		
<p><i>Time and Travel Reimbursements for Foster Parents</i></p> <p>Sec. 562. The department shall provide time and travel reimbursements for foster parents who transport a foster child to parent-child visitations. As part of the foster care parent contract, the department shall provide written confirmation to foster parents that states that the foster parents have the right to request these reimbursements for all parent-child visitations. The department shall provide these reimbursements within 60 days of receiving a request for eligible reimbursements from a foster parent.</p>	Sec. 8-562. No changes from current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Parent-Child and Parent-Caseworker Visitations</i></p> <p>Sec. 564. (1) The department shall develop a clear policy for parent-child visitations. The local county offices, caseworkers, and supervisors shall meet an 85% success rate, after accounting for factors outside of the caseworkers' control.</p>	<p>Sec. 8-564. (1) No changes from current law.</p>		
<p>(2) Per the court-ordered number of required meetings between caseworkers and a parent, the caseworkers shall achieve a success rate of 85%, after accounting for factors outside of the caseworkers' control.</p>	<p>(2) No changes from current law.</p>		
<p>(3) By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report on the following:</p> <p>(a) The percentage of success rate for parent-child visitations and court-ordered required meetings between caseworkers referenced in subsections (1) and (2) for the previous year.</p> <p>(b) The barriers to achieve the success rates in subsections (1) and (2) and how this information is tracked.</p>	<p>(3) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Medical Passports</i></p> <p>Sec. 567. The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by March 1 of the current fiscal year a report on transfer of medical passports for children in foster care, including the following:</p> <p>(a) From the total medical passports transferred, the percentage that transferred within 2 weeks from the date of placement or return to the home.</p> <p>(b) From the total school records, the percentage that transferred within 2 weeks from the date of placement or return to the home.</p> <p>(c) The implementation steps that have been taken to improve the outcomes for the measures in subdivision (a).</p>	<p>Sec. 8-567. No changes from current law.</p>		
<p><i>Private Agency Adoption Completion Payment Rate</i></p> <p>Sec. 569. The department shall reimburse private child placing agencies that complete adoptions at the rate according to the date on which the petition for adoption and required support documentation was accepted by the court and not according to the date the court's order placing for adoption was entered.</p>	<p>Sec. 8-569. No change from current law.</p>		
<p><i>Foster Care Providers Per Diem Administrative Rates</i></p> <p>Sec. 573. (1) The department may pay providers of foster care services a per diem daily administrative rate for every case on a caseworker's caseload for the duration of a case from referral acceptance to the discharge of wardship.</p>	<p>Sec. 8-573. (1) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(2) The department shall participate in a workgroup to determine an equitable and fair method to compensate private child placing agencies for case management and services provided to children for which private child placing agencies are not paid an administrative rate. The members of the workgroup shall include, but not be limited to, the department, representatives from the Michigan Federation for Children and Families, representatives from the Association of Accredited Child and Family Agencies, representatives from contracted private child placing agencies, and members of the senate and the house of representatives. The workgroup shall, at a minimum, address the following possibilities and make recommendations to the department on the implementation of any of the following items that the workgroup considers feasible:</p> <p>(a) Whether the department and other stakeholders can obtain a consensus agreement on the definition of an unpaid foster care case.</p> <p>(b) Whether the department's current compensation is suitable for private child placing agencies for the case management of a child who, as described by department policy as of September 30 of the previous fiscal year, is not in foster care and for whom the private child placing agency does not receive an administrative rate, but, as of September 30 of the previous fiscal year, who was factored into the calculation of caseloads for a foster care worker as described by the settlement.</p> <p>(c) Whether an indirect or administrative payment is feasible to compensate private child placing agencies for the case management of a child who, as described by department policy as of September 30 of the previous fiscal year, is not in foster care and does not receive an administrative rate, but, as of September 30 of the previous fiscal year, who was factored into the calculation of caseloads for a foster care worker as described by the settlement.</p>	Striking current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
(3) The department and the participants in the workgroup described in subsection (2) shall complete the determination by March 1 of the current fiscal year.	Striking current law.		
<p>Contracts to License Relative Caregivers</p> <p>Sec. 574. (1) From the funds appropriated in part 1 for foster care payments, \$2,000,000.00 is allocated to support performance-based contracts with child placing agencies to facilitate the licensure of relative caregivers as foster parents. Agencies shall receive \$4,500.00 for each facilitated licensure if completed within 180 days after case acceptance, or, if a waiver was previously approved, 180 days from the referral date. If the facilitated licensure, or approved waiver, is completed after 180 days, the agency shall receive up to \$3,500.00. The agency facilitating the licensure would retain the placement and continue to provide case management services for the newly licensed cases for which the placement was appropriate to the agency.</p>	Sec. 8-574. (1) No changes from current law.		
(2) From the funds appropriated for foster care payments, \$375,000.00 is allocated to support family incentive grants to private and community-based foster care service providers to assist with home improvements or payment for physical exams for applicants needed by foster families to accommodate foster children.	(2) No changes from current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Foster Parents Report</i></p> <p>Sec. 583. By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, the senate and house fiscal agencies and policy offices, and the state budget office a report that includes:</p> <p>(a) The number and percentage of foster parents that dropped out of the program in the previous fiscal year and the reasons the foster parents left the program and how those figures compare to prior fiscal years.</p> <p>(b) The number and percentage of foster parents successfully retained in the previous fiscal year and how those figures compare to prior fiscal years.</p>	<p>Sec. 8-583. No changes from current law.</p>		
<p><i>Private Agency Staff Training</i></p> <p>Sec. 585. The department shall make available at least 1 pre-service training class each month in which new caseworkers for private foster care and adoption agencies can enroll.</p>	<p>Sec. 8-585. No changes from current law.</p>		
<p><i>Reports from Children's Rights Settlement Monitor</i></p> <p>Sec. 588. Concurrently with public release, the department shall transmit all reports from the court-appointed settlement monitor, including, but not limited to, the needs assessment and period outcome reporting, to the state budget office, the senate and house appropriations subcommittees on the department budget, and the senate and house fiscal agencies and policy offices, without revision.</p>	<p>Sec. 8-588. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Child Welfare

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Payment of Foster Care Administrative Rate</i></p> <p>Sec. 589. (1) From the funds appropriated in part 1 for child care fund, the department shall pay 100% of the administrative rate for all new cases referred to providers of foster care services.</p>	<p>Sec. 8-589. (1) No changes from current law.</p>		
<p>(2) On a monthly basis, the department shall report on the number of all foster care cases administered by the department and all foster care cases administered by private providers.</p>	<p>2) On a monthly QUARTERLY basis, the department shall report on the number of all foster care cases administered by the department and all foster care cases administered by private providers.</p>		
<p><i>Muskegon Covenant Academy Funding</i></p> <p>Sec. 590. From funds appropriated in part 1 for youth in transition, \$280,000.00 shall be awarded to a charter high school for students ages 16 to 22 who have previously dropped out or are at risk of not graduating on time operating in a county with a population of greater than 172,000 but less than 175,000 according to the most recent federal decennial census. It is the intent of the legislature that this is the third year out of 3 years that funding is to be provided by the legislature for the charter high school described in this section.</p>	<p>Striking current law.</p>		
<p><i>Residential Service Providers Staff Ratio</i></p> <p>Sec. 593. The department may allow residential service providers for child abuse and child neglect cases to implement a staff ratio during working hours of 1 staff to 5 children.</p>	<p>Sec. 8-593. No changes from current law.</p>		



**DEPARTMENT OF HEALTH AND HUMAN SERVICES
Boilerplate for Children's Services Agency – Child Welfare**

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Foster Care Parent Retention and Michigan Youth Opportunities Initiative (MYOI) Funding</i></p> <p>Sec. 594. From the funds appropriated in part 1 for foster care payments, the department shall support regional resource teams to provide for the recruitment, retention, and training of foster and adoptive parents and shall expand the Michigan youth opportunities initiative to all Michigan counties. The purpose of this funding is to increase the number of annual inquiries from prospective foster parents, increase the number of nonrelative foster homes that achieve licensure each year, increase the annual retention rate of nonrelative foster homes, reduce the number of older foster youth placed outside of family settings, and provide older youth with enhanced support in transitioning to adulthood.</p>	<p>Sec. 8-594. No changes from current law.</p>		
<p><i>Runaway and Homeless Youth Services</i></p> <p>Sec. 596. From the funds appropriated in part 1 for youth in transition, the department shall allocate \$500,000.00 state general fund/general purpose revenue to increase funding to support the runaway and homeless youth services program. The purpose of the additional funding is to support current programs for contracted providers that provide emergency shelter and services to homeless and runaway youth.</p>	<p>Striking current law.</p>		



**DEPARTMENT OF HEALTH AND HUMAN SERVICES
Boilerplate for Children's Services Agency – Child Welfare**

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Family Support Subsidy</i></p> <p>Sec. 597. From the funds appropriated in part 1 for family support subsidy, the department shall make monthly payments of \$229.31 to the parents or legal guardians of children approved for the family support subsidy by a CMHSP.</p>	<p>Transfer to Behavior Health Administration.</p>		
<p><i>Supplemental Boilerplate – Children’s Protective Services Reforms</i></p> <p>Sec. 454. The funds appropriated in part 1 for children’s protective services reforms shall be used to implement process and technology reforms as recommended by the children’s protective services operation excellence team. By September 30, 2019, the department of health and human services shall provide to the senate and house appropriations subcommittees on health and human services, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report describing the progress of implementing the reforms developed by the children’s protective services operation excellence team and detailing how these funds were expended.</p>	<p>Striking current law.</p>		



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Boilerplate for Children's Services Agency – Child Welfare**

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Supplemental Boilerplate – Strong Families/Safe Children</i></p> <p>Sec. 455. From the funds appropriated in part 1 for strong families/safe children, the department of health and human services shall allocate \$2,800,000.00 in general fund/general purpose revenue to replace decreased federal title IV-B subpart 2 of the social security act, 42 USC 620 to 629m, grant revenue. When allocating the funding, priority shall be given to support current contracts associated with the families together building solutions program and any other relevant family preservation program at the original funding level of the contracts agreed to before the federal revenue reduction.</p>	Striking current law.		
	<p><u>NEW LANGUAGE</u> SEC. 8-598. PARTIAL CHILD CARE FUND REIMBURSEMENTS TO COUNTIES FOR UNDISPUTED CHARGES SHALL BE MADE WITHIN 45 BUSINESS DAYS OF THE RECEIPT OF THE REQUIRED FORMS AND DOCUMENTATION. THE DEPARTMENT SHALL NOTIFY A COUNTY WITHIN 15 BUSINESS DAYS OF A DISPUTED REIMBURSEMENT REQUEST. THE DEPARTMENT SHALL REIMBURSE FOR CORRECTED CHARGES WITHIN 45 BUSINESS DAYS OF A PROPERLY CORRECTED SUBMISSION BY THE COUNTY.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Public Assistance

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><u>PUBLIC ASSISTANCE</u></p> <p><i>Shelter Vendor Payments</i></p> <p>Sec. 601. Whenever a client agrees to the release of his or her name and address to the local housing authority, the department shall request from the local housing authority information regarding whether the housing unit for which vendoring has been requested meets applicable local housing codes. Vendoring shall be terminated for those units that the local authority indicates in writing do not meet local housing codes until such time as the local authority indicates in writing that local housing codes have been met.</p>	<p>Sec. 601. No changes from current law.</p>		
<p><i>Multiple Disability Applications</i></p> <p>Sec. 602. The department shall conduct a full evaluation of an individual's assistance needs if the individual has applied for disability more than 1 time within a 1-year period.</p>	<p>Sec. 602. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Public Assistance

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>State Disability Assistance (SDA) Program</p> <p>Sec. 604. (1) The department shall operate a state disability assistance program. Except as provided in subsection (3), persons eligible for this program shall include needy citizens of the United States or aliens exempted from the supplemental security income citizenship requirement who are at least 18 years of age or emancipated minors meeting 1 or more of the following requirements:</p> <p>(a) A recipient of supplemental security income, social security, or medical assistance due to disability or 65 years of age or older.</p> <p>(b) A person with a physical or mental impairment that meets federal supplemental security income disability standards, except that the minimum duration of the disability shall be 90 days. Substance use disorder alone is not defined as a basis for eligibility.</p> <p>(c) A resident of an adult foster care facility, a home for the aged, a county infirmary, or a substance use disorder treatment center.</p> <p>(d) A person receiving 30-day postresidential substance use disorder treatment.</p> <p>(e) A person diagnosed as having acquired immunodeficiency syndrome.</p> <p>(f) A person receiving special education services through the local intermediate school district.</p> <p>(g) A caretaker of a disabled person who meets the requirements specified in subdivision (a), (b), (e), or (f).</p>	<p>Sec. 604. (1) No changes from current law.</p>		
<p>(2) Applicants for and recipients of the state disability assistance program shall be considered needy if they:</p> <p>(a) Meet the same asset test as is applied for the family independence program.</p> <p>(b) Have a monthly budgetable income that is less than the payment standards.</p>	<p>(2) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Public Assistance

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(3) Except for a person described in subsection (1)(c) or (d), a person is not disabled for purposes of this section if his or her drug addiction or alcoholism is a contributing factor material to the determination of disability. "Material to the determination of disability" means that, if the person stopped using drugs or alcohol, his or her remaining physical or mental limitations would not be disabling. If his or her remaining physical or mental limitations would be disabling, then the drug addiction or alcoholism is not material to the determination of disability and the person may receive state disability assistance. Such a person must actively participate in a substance abuse treatment program, and the assistance must be paid to a third party or through vendor payments. For purposes of this section, substance abuse treatment includes receipt of inpatient or outpatient services or participation in alcoholics anonymous or a similar program.</p>	<p>(3) No change from current law.</p>		
<p><i>SDA Reimbursement</i></p> <p>Sec. 605. The level of reimbursement provided to state disability assistance recipients in licensed adult foster care facilities shall be the same as the prevailing supplemental security income rate under the personal care category.</p>	<p>Sec. 605. No changes from current law.</p>		
<p><i>Repayment Agreements for Retroactive Supplemental Security Income (SSI) Payments</i></p> <p>Sec. 606. County department offices shall require each recipient of family independence program and state disability assistance who has applied with the social security administration for supplemental security income to sign a contract to repay any assistance rendered through the family independence program or state disability assistance program upon receipt of retroactive supplemental security income benefits.</p>	<p>Sec. 606. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Public Assistance

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Public Assistance Recovery and Recoupment Revenue</i></p> <p>Sec. 607. (1) The department's ability to satisfy appropriation deductions in part 1 for state disability assistance/supplemental security income recoveries and public assistance recoupment revenues shall not be limited to recoveries and accruals pertaining to state disability assistance, or family independence assistance grant payments provided only in the current fiscal year, but may include revenues collected during the current year that are prior year related and not a part of the department's accrued entries.</p>	<p>Sec. 607. (1) No changes from current law.</p>		
<p>(2) The department may use supplemental security income recoveries to satisfy the deduct in any line in which the revenues are appropriated, regardless of the source from which the revenue is recovered.</p>	<p>(2) No changes from current law.</p>		
<p><i>Adult Foster Care and Homes for the Aged Payment Limits</i></p> <p>Sec. 608. Adult foster care facilities providing domiciliary care or personal care to residents receiving supplemental security income or homes for the aged serving residents receiving supplemental security income shall not require those residents to reimburse the home or facility for care at rates in excess of those legislatively authorized. To the extent permitted by federal law, adult foster care facilities and homes for the aged serving residents receiving supplemental security income shall not be prohibited from accepting third-party payments in addition to supplemental security income if the payments are not for food, clothing, shelter, or result in a reduction in the recipient's supplemental security income payment.</p>	<p>Sec. 608. No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>SSI State Supplementation</p> <p>Sec. 609. The state supplementation level under the supplemental security income program for the personal care/adult foster care and home for the aged categories shall not be reduced during the current fiscal year. The legislature shall be notified not less than 30 days before any proposed reduction in the state supplementation level.</p>	<p>Sec. 609. No changes from current law.</p>		
<p>State Emergency Relief (SER)</p> <p>Sec. 610. (1) In developing good cause criteria for the state emergency relief program, the department shall grant exemptions if the emergency resulted from unexpected expenses related to maintaining or securing employment.</p>	<p>Sec. 610. (1) No changes from current law.</p>		
<p>(2) For purposes of determining housing affordability eligibility for state emergency relief, a group is considered to have sufficient income to meet ongoing housing expenses if their total housing obligation does not exceed 75% of their total net income.</p>	<p>(2) No changes from current law.</p>		
<p>(3) State emergency relief payments shall not be made to individuals who have been found guilty of fraud in regard to obtaining public assistance.</p>	<p>(3) No changes from current law.</p>		
<p>(4) State emergency relief payments shall not be made available to persons who are out-of-state residents or illegal immigrants.</p>	<p>(4) No changes from current law.</p>		
<p>(5) State emergency relief payments for rent assistance shall be distributed directly to landlords and shall not be added to Michigan bridge cards.</p>	<p>(5) No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>State Supplementation Rate Restriction</i></p> <p>Sec. 611. The state supplementation level under the supplemental security income program for the living independently or living in the household of another categories shall not exceed the minimum state supplementation level as required under federal law or regulations.</p>	<p>Sec. 611. No changes from current law.</p>		
<p><i>Indigent Burial</i></p> <p>Sec. 613. (1) The department shall provide reimbursements for the final disposition of indigent persons. The reimbursements shall include the following:</p> <p>(a) The maximum allowable reimbursement for the final disposition is \$800.00. (b) The adult burial with services allowance is \$725.00. (c) The adult burial without services allowance is \$490.00. (d) The infant burial allowance is \$170.00.</p>	<p>Sec. 613. (1) No changes from current law.</p>		
<p>(2) Reimbursement for a cremation permit fee of up to \$75.00 and for mileage at the standard rate will be made available for an eligible cremation. The reimbursements under this section shall take into consideration religious preferences that prohibit cremation.</p>	<p>(2) No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>SDA Recipients Eligible for SSI Benefits</i></p> <p>Sec. 614. The department shall report to the senate and house of representatives appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices by January 15 of the current fiscal year on the number and percentage of state disability assistance recipients who were determined to be eligible for federal supplemental security income benefits in the previous fiscal year.</p>	<p>Sec. 614. No changes from current law.</p>		
<p><i>Illegal Alien Public Assistance Prohibition</i></p> <p>Sec. 615. Except as required by federal law or regulations, funds appropriated in part 1 shall not be used to provide public assistance to a person who is an illegal alien. This section shall not prohibit the department from entering into contracts with food banks, emergency shelter providers, or other human services agencies who may, as a normal part of doing business, provide food or emergency shelter.</p>	<p>Sec. 615. No changes from current law.</p>		
<p><i>Electronic Benefit Transfer (EBT) Fees</i></p> <p>Sec. 616. The department shall require retailers that participate in the electronic benefits transfer program to charge no more than \$2.50 in fees for cash back as a condition of participation.</p>	<p>Sec. 616. No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Parole/Probation Absconder Report</i></p> <p>Sec. 618. By March 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office the quarterly number of supervised individuals who have absconded from supervision and whom a law enforcement agency, the department of corrections, or the department is actively seeking according to section 84 of the corrections code of 1953, 1953 PA 232, MCL 791.284.</p>	<p>Sec. 618. No changes from current law.</p>		
<p><i>Title IV-A (TANF) and Food Assistance Benefit Exemption</i></p> <p>Sec. 619. (1) Subject to subsection (2), the department shall not deny title IV-A assistance and food assistance benefits under 21 USC 862a to any individual who has been convicted of a single felony that included the possession, use, or distribution of a controlled substance, for which the act that resulted in the conviction occurred after August 22, 1996, if the individual is not in violation of his or her probation or parole requirements. Benefits shall be provided to an individual, if the individual is the grantee (head of household), as follows:</p> <p>(a) Family independence program benefits must be paid in the form of restricted payments when the grantee has been convicted, for conduct occurring after August 22, 1996, of a felony for the use, possession, or distribution of a controlled substance.</p> <p>(b) An authorized representative shall be required for food assistance receipt. If the individual with the conviction is not the grantee, the food assistance shall be provided to the grantee.</p>	<p>Sec. 619. (1) No changes from current law.</p>		



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	EXECUTIVE	HOUSE	SENATE
(2) Subject to federal approval, an individual is not entitled to the exemption in this section if the individual was convicted of 2 or more separate felony acts that included the possession, use, or distribution of a controlled substance and both acts occurred after August 22, 1996.	(2) No changes from current law.		
<p>Medicaid Eligibility Determination Standards of Promptness</p> <p>Sec. 620. (1) The department shall make a determination of Medicaid eligibility not later than 90 days if disability is an eligibility factor. For all other Medicaid applicants, including patients of a nursing home, the department shall make a determination of Medicaid eligibility within 45 days of application.</p>	Sec. 620. (1) No changes from current law.		
(2) The department shall provide quarterly reports to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the average Medicaid eligibility standard of promptness for each of the required standards of promptness under subsection (1) and for medical review team reviews achieved statewide and at each local office.	(2) No changes from current law.		



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	EXECUTIVE	HOUSE	SENATE
<p><i>Legal Services Association of Michigan</i></p> <p>Sec. 625. From the funds appropriated in part 1 for SSI advocacy legal services grant, the department shall allocate \$250,000.00 as a grant to the Legal Services Association of Michigan (LSAM). The purpose of the grant is to assist current or potential recipients of state disability assistance who have applied for or wish to apply for SSI or other federal disability benefits. LSAM shall provide a list of new recipients to the department to verify services provided to department referrals. The department shall distribute informational materials or literature provided by LSAM to clients who have been referred to LSAM for assistance under this section. LSAM and the department shall develop release forms to share information in appropriate cases. LSAM shall provide quarterly reports indicating cases opened, cases closed, level of services provided on closed cases, and case outcomes on closed cases.</p>	<p>Striking current law.</p>		
<p><i>Domestic Violence Homeless Criteria for State Emergency Relief</i></p> <p>Sec. 645. An individual or family is considered homeless, for purposes of eligibility for state emergency relief, if living temporarily with others in order to escape domestic violence. For purposes of this section, domestic violence is defined and verified in the same manner as in the department's policies on good cause for not cooperating with child support and paternity requirements.</p>	<p>Sec. 645. No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Food Assistance Program Able-Bodied Adults Without Dependents Waiver</i></p> <p>Sec. 650. An individual who is an able-bodied adult without dependents is subject to the time-limited food assistance and work requirement provisions of 7 CFR 273.24(a) to (d) regardless of the individual's county of residence, redetermination date, or federal waiver status effective October 1, 2018.</p>	Striking current law.		
<p><i>Domestic Violence Exemption to Food Assistance Requirements</i></p> <p>Sec. 653. From the funds appropriated in part 1 for food assistance, an individual who is the victim of domestic violence and does not qualify for any other exemption may be exempt from the 3-month in 36-month limit on receiving food assistance under 7 USC 2015. This exemption can be extended an additional 3 months upon demonstration of continuing need.</p>	Sec. 653. No changes from current law.		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Food Assistance Program (FAP) Double Up Food Bucks Program</i></p> <p>Sec. 654. The department shall notify recipients of food assistance program benefits that their benefits can be spent with their bridge cards at many farmers' markets in the state. The department shall also notify recipients about the Double Up Food Bucks program that is administered by the Fair Food Network. Recipients shall receive information about the Double Up Food Bucks program, including information that when the recipient spends \$20.00 at participating farmers' markets through the program, the recipient can receive an additional \$20.00 to buy Michigan produce.</p>	<p>Sec. 654. No changes from current law.</p>		
<p><i>Low Income Home Energy Assistance Program (LIHEAP) Spending Plan</i></p> <p>Sec. 655. Within 14 days after the spending plan for low-income home energy assistance program is approved by the state budget office, the department shall provide the spending plan, including itemized projected expenditures, to the chairpersons of the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office.</p>	<p>Sec. 655. No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Food Bank Council TANF Eligibility Reporting</i></p> <p>Sec. 660. From the funds appropriated in part 1 for Food Bank Council of Michigan, the department is authorized to make allocations of TANF funds only to the agencies that report necessary data to the department for the purpose of meeting TANF eligibility reporting requirements. The agencies that do not report necessary data to the department for the purpose of meeting TANF eligibility reporting requirements will not receive allocations in excess of those received in fiscal year 2000. The use of TANF funds under this section is not an ongoing commitment of funding.</p>	<p>Sec. 660. No changes from current law.</p>		
<p><i>Annual FIP Clothing Allowance</i></p> <p>Sec. 669. The department shall allocate \$7,230,000.00 for the annual clothing allowance. The allowance shall be granted to all eligible children in a family independence program group.</p>	<p>Sec. 669. No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Electronic Benefit Transfer Card Abuse Report</i></p> <p>Sec. 672. (1) The department’s office of inspector general shall report to the senate and house of representatives appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices by February 15 of the current fiscal year on department efforts to reduce inappropriate use of Michigan bridge cards. The department shall provide information on the number of recipients of services who used their electronic benefit transfer card inappropriately and the current status of each case, the number of recipients whose benefits were revoked, whether permanently or temporarily, as a result of inappropriate use, and the number of retailers that were fined or removed from the electronic benefit transfer program for permitting inappropriate use of the cards. The report shall distinguish between savings and cost avoidance. Savings include receivables established from instances of fraud committed. Cost avoidance includes expenditures avoided due to front-end eligibility investigations and other preemptive actions undertaken in the prevention of fraud.</p>	<p>Sec. 672. (1) No changes from current law.</p>		
<p>(2) It shall be the policy of the department that the department shall require an explanation from a recipient if a bridge card is replaced more than 2 times over any 3-month period.</p>	<p>(2) No changes from current law.</p>		
<p>(3) As used in this section, “inappropriate use” means not used to meet a family’s ongoing basic needs, including food, clothing, shelter, utilities, household goods, personal care items, and general incidentals.</p>	<p>(3) No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>Family Independence Program (FIP) Goals</p> <p>Sec. 677. (1) The department shall establish a state goal for the percentage of family independence program cases involved in employment activities. The percentage established shall not be less than 50%. The goal for long-term employment shall be 15% of cases for 6 months or more.</p>	<p>Sec. 677. (1) No changes from current law.</p>		
<p>(2) The department shall provide quarterly reports to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget director on the number of cases referred to Partnership. Accountability. Training. Hope. (PATH), the current percentage of family independence program cases involved in PATH employment activities, an estimate of the current percentage of family independence program cases that meet federal work participation requirements on the whole, and an estimate of the current percentage of the family independence program cases that meet federal work participation requirements for those cases referred to PATH.</p>	<p>(2) No changes from current law.</p>		
<p>(3) The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office quarterly reports that include all of the following:</p> <p>(a) The number and percentage of nonexempt family independence program recipients who are employed.</p> <p>(b) The average and range of wages of employed family independence program recipients.</p> <p>(c) The number and percentage of employed family independence program recipients who remain employed for 6 months or more.</p>	<p>(3) No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>Caseworker Public Assistance Policies</p> <p>Sec. 686. (1) The department shall ensure that program policy requires caseworkers to confirm that individuals presenting personal identification issued by another state seeking assistance through the family independence program, food assistance program, state disability assistance program, or medical assistance program are not receiving benefits from any other state.</p>	<p>Sec. 686. (1) No changes from current law.</p>		
<p>(2) The department shall require caseworkers to confirm the address provided by any individual seeking family independence program benefits or state disability assistance benefits.</p>	<p>(2) No changes from current law.</p>		
<p>(3) The department shall prohibit individuals with property assets assessed at a value higher than \$200,000.00 from accessing assistance through department-administered programs, unless such a prohibition would violate federal rules and guidelines.</p>	<p>(3) No changes from current law.</p>		
<p>(4) The department shall require caseworkers to obtain an up-to-date telephone number during the eligibility determination or redetermination process for individuals seeking medical assistance benefits.</p>	<p>(4) No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Application and Case Closure Information</i></p> <p>Sec. 687. (1) The department shall, in quarterly reports, compile and make available on its website all of the following information about the family independence program, state disability assistance, the food assistance program, Medicaid, and state emergency relief:</p> <p>(a) The number of applications received. (b) The number of applications approved. (c) The number of applications denied. (d) The number of applications pending and neither approved nor denied. (e) The number of cases opened. (f) The number of cases closed. (g) The number of cases at the beginning of the quarter and the number of cases at the end of the quarter.</p>	<p>Sec. 687. (1) No changes from current law.</p>		
<p>(2) The information provided under subsection (1) shall be compiled and made available for the state as a whole and for each county and reported separately for each program listed in subsection (1).</p>	<p>(2) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Public Assistance

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(3) The department shall, in quarterly reports, compile and make available on its website the family independence program information listed as follows:</p> <p>(a) The number of new applicants who successfully met the requirements of the 21-day assessment period for PATH.</p> <p>(b) The number of new applicants who did not meet the requirements of the 21-day assessment period for PATH.</p> <p>(c) The number of cases sanctioned because of the school truancy policy.</p> <p>(d) The number of cases closed because of the 48-month and 60-month lifetime limits.</p> <p>(e) The number of first-, second-, and third-time sanctions.</p> <p>(f) The number of children ages 0-5 living in FIP-sanctioned households.</p>	(3) No changes from current law.		
<p><i>Heat and Eat Program</i></p> <p>Sec. 688. From the funds appropriated in part 1 for the low-income home energy assistance program, the department shall make an additional \$20.01 payment to each food assistance program case that is not currently eligible for the standard utility allowance to enable each case to receive expanded food assistance benefits through the program commonly known as the heat and eat program.</p>	Sec. 688. No changes from current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Children's Services Agency – Juvenile Justice

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>CHILDREN'S SERVICES AGENCY - JUVENILE JUSTICE</p> <p><i>Residential Facility Contracts</i></p> <p>Sec. 701. Unless required from changes to federal or state law or at the request of a provider, the department shall not alter the terms of any signed contract with a private residential facility serving children under state or court supervision without written consent from a representative of the private residential facility.</p>	<p>Sec. 8-701. No changes from current law.</p>		
<p><i>Alternative Regional Detention Services County Charge-Back</i></p> <p>Sec. 706. Counties shall be subject to 50% chargeback for the use of alternative regional detention services, if those detention services do not fall under the basic provision of section 117e of the social welfare act, 1939 PA 280, MCL 400.117e, or if a county operates those detention services programs primarily with professional rather than volunteer staff.</p>	<p>Sec. 8-706. No changes from current law.</p>		
<p><i>Child Care Fund Reimbursement TANF Eligibility Reporting Requirements</i></p> <p>Sec. 707. In order to be reimbursed for child care fund expenditures, counties are required to submit department-developed reports to enable the department to document potential federally claimable expenditures. This requirement is in accordance with the reporting requirements specified in section 117a(11) of the social welfare act, 1939 PA 280, MCL 400.117a.</p>	<p>Sec. 8-707. No changes from current law.</p>		



**DEPARTMENT OF HEALTH AND HUMAN SERVICES
Boilerplate for Children’s Services Agency –
Juvenile Justice**

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>County Spending Plan Required</i></p> <p>Sec. 708. (1) As a condition of receiving funds appropriated in part 1 for the child care fund line item, by October 15 of the current fiscal year, counties shall have an approved service spending plan for the current fiscal year. Counties must submit the service spending plan for the following fiscal year to the department by August 15 of the current fiscal year for approval. Upon submission of the county service spending plan, the department shall approve within 30 calendar days after receipt of a properly completed service plan that complies with the requirements of the social welfare act, 1939 PA 280, MCL 400.1 to 400.119b. The department shall notify and submit county service spending plan revisions to any county whose county service spending plan is not accepted upon initial submission. The department shall not request any additional revisions to a county service spending plan outside of the requested revision notification submitted to the county by the department. The department shall notify a county within 30 days after approval that its service plan was approved.</p>	<p>Sec. 8-708. (1) No changes from current law.</p>		
<p>(2) Counties must submit amendments to current fiscal year county service plans no later than August 30. Counties must submit current fiscal year payable estimates to the department no later than September 15.</p>	<p>(2) No changes from current law.</p>		



**DEPARTMENT OF HEALTH AND HUMAN SERVICES
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Juvenile Justice**

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
(3) The department shall submit a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office by February 15 of the current fiscal year on the number of counties that fail to submit a service spending plan by August 15 of the previous fiscal year and the number of service spending plans not approved by October 15. The report shall include the number of county service spending plans that were not approved as first submitted by the counties, as well as the number of plans that were not approved by the department after being resubmitted by the county with the first revisions that were requested by the department.	(3) No changes from current law.		
Juvenile Justice Residential Foster Care Services Master Contracts Sec. 709. The department’s master contract for juvenile justice residential foster care services shall prohibit contractors from denying a referral for placement of a youth, or terminating a youth’s placement, if the youth’s assessed treatment needs are in alignment with the facility’s residential program type, as identified by the court or the department. In addition, the master contract shall require that youth placed in juvenile justice residential foster care facilities must have regularly scheduled treatment sessions with a licensed psychologist or psychiatrist, or both, and access to the licensed psychologist or psychiatrist as needed.	Sec. 8-709. No changes from current law.		



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Boilerplate for Children’s Services Agency –
Juvenile Justice**

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Residential Facility of Last Resort</i></p> <p>Sec. 721. If the demand for placements at state-operated juvenile justice residential facilities exceeds capacity, the department shall not increase the available occupancy or services at the facilities, and shall post a request for proposals for a contract with not less than 1 private provider of residential services for juvenile justice youth to be a residential facility of last resort.</p>	Striking current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for Field Operations and Support Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>FIELD OPERATIONS AND SUPPORT SERVICES</p> <p><i>Centers for Independent Living</i></p> <p>Sec. 801. (1) Funds appropriated in part 1 for independent living shall be used to support the general operations of centers for independent living in delivering mandated independent living services in compliance with federal rules and regulations for the centers, by existing centers for independent living to serve underserved areas, and for projects to build the capacity of centers for independent living to deliver independent living services. Applications for the funds shall be reviewed in accordance with criteria and procedures established by the department. The funds appropriated in part 1 may be used to leverage federal vocational rehabilitation innovation and expansion funds consistent with 34 CFR 361.35 up to \$5,543,000.00, if available. If the possibility of matching federal funds exists, the centers for independent living network will negotiate a mutually beneficial contractual arrangement with Michigan rehabilitation services. Funds shall be used in a manner consistent with the state plan for independent living. Services provided should assist people with disabilities to move toward self-sufficiency, including support for accessing transportation and health care, obtaining employment, community living, nursing home transition, information and referral services, education, youth transition services, veterans, and stigma reduction activities and community education. This includes the independent living guide services that specifically focus on economic self-sufficiency.</p>	<p>Sec. 804. 1158. (1) Renumbered and transferred to Health Policy sections.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for Field Operations and Support Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
(2) The Michigan centers for independent living shall provide a report by March 1 of the current fiscal year to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on direct customer and system outcomes and performance measures.	Transferred to Health Policy sections.		
<p><i>Vocational Rehabilitation Funding Maximization</i></p> <p>Sec. 802. The Michigan rehabilitation services shall work collaboratively with the bureau of services for blind persons, service organizations, and government entities to identify qualified match dollars to maximize use of available federal vocational rehabilitation funds.</p>	<p>Sec. 802. 1152. Renumbered and transferred to Health Policy sections.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for Field Operations and Support Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Michigan Rehabilitation Services Report</i></p> <p>Sec. 803. The department shall provide an annual report by February 1 to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on efforts taken to improve the Michigan rehabilitation services. The report shall include all of the following items:</p> <ul style="list-style-type: none"> (a) Reductions and changes in administration costs and staffing. (b) Service delivery plans and implementation steps achieved. (c) Reorganization plans and implementation steps achieved. (d) Plans to integrate Michigan rehabilitative services programs into other services provided by the department. (e) Quarterly expenditures by major spending category. (f) Employment and job retention rates from both Michigan rehabilitation services and its nonprofit partners. (g) Success rate of each district in achieving the program goals. 	<p>Sec. 803. 1153. Renumbered and transferred to Health Policy sections.</p>		
<p><i>MRS Funding for Disabled Agricultural Workers</i></p> <p>Sec. 804. (1) From the funds appropriated in part 1 for Michigan rehabilitation services, the department shall allocate \$50,000.00 along with available federal match to support the provision of vocational rehabilitation services to eligible agricultural workers with disabilities. Authorized services shall assist agricultural workers with disabilities in acquiring or maintaining quality employment and independence.</p>	<p>Sec. 804. 1154. (1) Renumbered and transferred to Health Policy sections.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for Field Operations and Support Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
(2) By March 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the total number of clients served and the total amount of federal matching funds obtained throughout the duration of the program.	Transferred to Health Policy section.		
<p>Order of Selection</p> <p>Sec. 805. It is the intent of the legislature that Michigan rehabilitation services shall not implement an order of selection for vocational and rehabilitative services. If the department is at risk of entering into an order of selection for services, the department shall notify the chairs of the senate and house appropriations subcommittees on the department budget and the senate and house fiscal agencies and policy offices within 2 weeks of receiving notification.</p>	Sec. 805- 1155. Renumbered and transferred to Health Policy sections.		
<p>Job Development and Community Employment-Related Contracts</p> <p>Sec. 806. From the funds appropriated in part 1 for Michigan rehabilitation services, the department shall allocate \$6,100,300.00, including federal matching funds, to service authorizations with community-based rehabilitation organizations for an array of needed services throughout the rehabilitation process.</p>	Sec. 806- 1156. Renumbered and transferred to Health Policy sections.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for Field Operations and Support Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Michigan MiCAFE Contract</i></p> <p>Sec. 807. From the funds appropriated in part 1 for Elder Law of Michigan MiCAFE contract, the department shall allocate not less than \$350,000.00 to the Elder Law of Michigan MiCAFE to assist this state's elderly population in participating in the food assistance program. Of the \$350,000.00 allocated under this section, the department shall use \$175,000.00, which are general fund/general purpose funds, as state matching funds for not less than \$175,000.00 in United States Department of Agriculture funding to provide outreach program activities, such as eligibility screening and information services, as part of a statewide food assistance hotline.</p>	<p>Sec. 807. No changes from current law.</p>		
<p><i>Nutrition Education Program</i></p> <p>Sec. 808. By March 1 of the current fiscal year, the department shall provide a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the nutrition education program. The report shall include planned allocation and actual expenditures for the supplemental nutrition assistance program education funding, planned and actual grant amounts for the supplemental nutrition assistance program education funding, the total amount of expected carryforward balance at the end of the current fiscal year for the supplemental nutrition assistance program education funding, a list of all supplemental nutrition assistance program education funding programs by implementing agency, and the stated purpose of each program.</p>	<p>Sec. 808. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES - Boilerplate for Field Operations and Support Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>Pathways to Potential Programs</p> <p>Sec. 809. (1) The purpose of the pathways to potential program is to reduce chronic absenteeism, decrease the number of students who repeat grades, decrease the rate of dropouts, and increase student graduation rates for schools that are current or future participants in the pathways to potential program. Before any deployment of resources into a participant school, the department and the participant school shall establish performance objectives for each participant school based on a 2-year baseline prior to pathways to potential being established in the participant school and shall evaluate the progress made in the above categories from the established baseline. By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices a report listing all participant schools, the funding allocation by participant school, the number of staff assigned to each school by participant school, and the percentage of participating schools that achieved improved performance in each of the 4 outcomes listed above compared to the previous year, by each individual outcome. It is the intent of the legislature that after a 2-year period without attaining an increase in success in meeting the 4 listed outcomes from the established baseline, the department shall work with the participant school to examine the cause of the lack of progress and shall seek to implement a plan to increase success in meeting the identified outcomes. It is the intent of the legislature that progress or the lack of progress made in meeting the performance objectives shall be used as a determinant in future pathways to potential resource allocation decisions.</p>	<p>Sec. 809. (1) The purpose of the pathways to potential program is to reduce chronic absenteeism AND, decrease the number of students who repeat grades, decrease the rate of dropouts, and increase student graduation rates for schools that are current or future participants in the pathways to potential program. Before any deployment of resources into a participant school, the department and the participant school shall establish performance objectives for each participant school based on a 2-year baseline prior to pathways to potential being established in the participant school and shall evaluate the progress made in the above categories from the established baseline. By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices a report listing all participant schools, the funding allocation by participant school, the number of staff assigned to each school by participant school, and the percentage of participating schools that achieved improved performance in each of the 4 outcomes listed above compared to the previous year, by each individual outcome. It is the intent of the legislature that after a 2-year period without attaining an increase in success in meeting the 4 listed outcomes from the established baseline, the department shall work with the participant school to examine the cause of the lack of progress and shall seek to implement a plan to increase success in meeting the identified outcomes. It is the intent of the legislature that progress or the lack of progress made in meeting the performance objectives shall be used as a determinant in future pathways to potential resource allocation decisions.</p>		



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(2) As used in this section, “baseline” means the initial set of data from the center for educational performance and information in the department of technology, management, and budget of the 4 measured outcomes as described in subsection (1).	(2) No changes from current law.		
<p>Vehicle Repairs</p> <p>Sec. 825. From the funds appropriated in part 1, the department shall provide individuals not more than \$500.00 for vehicle repairs, including any repairs done in the previous 12 months. However, the department may in its discretion pay for repairs up to \$900.00. Payments under this section shall include the combined total of payments made by the department and work participation program.</p>	Sec. 825. No changes from current law.		
<p>Out-Stationed Eligibility Specialists</p> <p>Sec. 850. (1) The department shall maintain out-stationed eligibility specialists in community-based organizations, community mental health agencies, nursing homes, adult placement and independent living settings, federally qualified health centers, and hospitals unless a community-based organization, community mental health agency, nursing home, adult placement and independent living setting, federally qualified health centers, or hospital requests that the program be discontinued at its facility.</p>	Sec. 850. (1) No changes from current law.		
(2) From the funds appropriated in part 1 for donated funds positions, the department shall enter into contracts with agencies that are able and eligible under federal law to provide the required matching funds for federal funding, as determined by federal statute and regulations.	(2) From the funds appropriated in part 1 for donated funds positions , PUBLIC ASSISTANCE FIELD STAFF , the department shall enter into contracts with agencies that are able and eligible under federal law to provide the required matching funds for federal funding, as determined by federal statute and regulations.		



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<p>(3) A contract for an assistance payments donated funds position must include, but not be limited to, the following performance metrics:</p> <p>(a) Meeting a standard of promptness for processing applications for Medicaid and other public assistance programs under state law.</p> <p>(b) Meeting required standards for error rates in determining programmatic eligibility as determined by the department.</p>	(3) No changes from current law.		
<p>(4) The department shall only fill additional donated funds positions after a new contract has been signed. That position shall also be abolished when the contract expires or is terminated.</p>	(4) No changes from current law.		
<p>(5) The department shall classify as limited-term FTEs any new employees who are hired to fulfill the donated funds position contracts or are hired to fill any vacancies from employees who transferred to a donated funds position.</p>	(5) No changes from current law.		
<p>(6) By March 1 of the current fiscal year, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office detailing information on the donated funds positions, including the total number of occupied positions, the total private contribution of the positions, and the total cost to the state for any nonsalary expenditure for the donated funds position employees.</p>	(6) No changes from current law.		



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	EXECUTIVE	HOUSE	SENATE
<p><i>Adult Services Field Staff Ratios</i></p> <p>Sec. 851. A staffing enhancement for adult services field staff was included in 2017 PA 107. The goal of the staffing enhancement is to reduce the number of older adults who are victims of crime and fraud by increasing the standard of promptness in every county, as measured by commencing an investigation within 24 hours, establishing face-to-face contact with the client within 72 hours, and completing the investigation within 30 days.</p>	Striking current law.		
<p><u>DISABILITY DETERMINATION SERVICES</u></p> <p><i>Unit Rate Increase for Medical Consultants</i></p> <p>Sec. 890. From the funds appropriated in part 1 for disability determination services, the department shall provide a 7% increase to the unit rates in effect on September 30, 2018 for medical consultants performing disability determination services, including physicians, psychologists, and speech-language pathologists.</p>	<p>Sec. 890. From the funds appropriated in part 1 for disability determination services, the department shall provide a 7% increase to MAINTAIN the unit rates in effect on September 30, 2018 2019 for medical consultants performing disability determination services, including physicians, psychologists, and speech-language pathologists.</p>		



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Boilerplate for Behavioral Health Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><u>BEHAVIORAL HEALTH SERVICES</u></p> <p><i>Comprehensive System of Community Mental Health Services</i></p> <p>Sec. 901. Except for the pilot projects and demonstration models described in section 298 of this part, the funds appropriated in part 1 are intended to support a system of comprehensive community mental health services under the full authority and responsibility of local CMHSPs or PIHPs in accordance with the mental health code, 1974 PA 258, MCL 330.1001 to 330.2106, the Medicaid provider manual, federal Medicaid waivers, and all other applicable federal and state laws.</p>	<p>Sec. 901. No changes from current law.</p>		
<p><i>Contracts Between DHHS and CMHSPs/PIHPs</i></p> <p>Sec. 902. (1) Except for the pilot projects and demonstration models described in section 298 of this part, from the funds appropriated in part 1, final authorizations to CMHSPs or PIHPs shall be made upon the execution of contracts between the department and CMHSPs or PIHPs. The contracts shall contain an approved plan and budget as well as policies and procedures governing the obligations and responsibilities of both parties to the contracts. Each contract with a CMHSP or PIHP that the department is authorized to enter into under this subsection shall include a provision that the contract is not valid unless the total dollar obligation for all of the contracts between the department and the CMHSPs or PIHPs entered into under this subsection for the current fiscal year does not exceed the amount of money appropriated in part 1 for the contracts authorized under this subsection.</p>	<p>Sec. 902. (1) No changes from current law.</p>		



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	EXECUTIVE	HOUSE	SENATE
<p>(2) The department shall immediately report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget director if either of the following occurs:</p> <p>(a) Any new contracts the department has entered into with CMHSPs or PIHPs that would affect rates or expenditures.</p> <p>(b) Any amendments to contracts the department has entered into with CMHSPs or PIHPs that would affect rates or expenditures.</p>	(2) No changes from current law.		
<p>(3) The report required by subsection (2) shall include information about the changes and their effects on rates and expenditures.</p>	(3) No changes from current law.		
<p>CMHSPs, PIHPs, and Designated Regional Entities for Substance Use Disorders Report</p> <p>Sec. 904. (1) By May 31 of the current fiscal year, the department shall provide a report on the CMHSPs, PIHPs, and designated regional entities for substance use disorder prevention and treatment to the members of the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director that includes the information required by this section.</p>	<p>Sec. 904. (1) No changes from current law.</p>		



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	EXECUTIVE	HOUSE	SENATE
<p>(2) The report shall contain information for each CMHSP, PIHP, and designated regional entity for substance use disorder prevention and treatment, and a statewide summary, each of which shall include at least the following information:</p> <p>(a) A demographic description of service recipients that, minimally, shall include reimbursement eligibility, client population, age, ethnicity, housing arrangements, and diagnosis.</p> <p>(b) Per capita expenditures in total and by client population group and cultural and ethnic groups of the services area, including the deaf and hard of hearing population.</p> <p>(c) Financial information that, minimally, includes a description of funding authorized; expenditures by diagnosis group, service category, and reimbursement eligibility; and cost information by Medicaid, Healthy Michigan plan, state appropriated non-Medicaid mental health services, local funding, and other fund sources, including administration and funds specified for all outside contracts for services and products. Financial information must include the amount of funding, from each fund source, used to cover clinical services and supports. Service category includes all department-approved services.</p>	<p>(2) No changes from current law.</p>		



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<p>(d) Data describing service outcomes that include, but are not limited to, an evaluation of consumer satisfaction, consumer choice, and quality of life concerns including, but not limited to, housing and employment.</p> <p>(e) Information about access to CMHSPs and designated regional entities for substance use disorder prevention and treatment that includes, but is not limited to, the following:</p> <p>(i) The number of people receiving requested services.</p> <p>(ii) The number of people who requested services but did not receive services.</p> <p>(f) The number of second opinions requested under the mental health code, 1974 PA 258, MCL 330.1001 to 330.2106, and the determination of any appeals.</p> <p>(g) Lapses and carryforwards during the previous fiscal year for CMHSPs, PIHPs, and designated regional entities for substance use disorder prevention and treatment.</p> <p>(h) Performance indicator information required to be submitted to the department in the contracts with CMHSPs, PIHPs, and designated regional entities for substance use disorder prevention and treatment.</p> <p>(i) Administrative expenditures of each CMHSP, PIHP, and designated regional entity for substance use disorder prevention and treatment that include a breakout of the salary, benefits, and pension of each executive-level staff and shall include the director, chief executive, and chief operating officers and other members identified as executive staff.</p>	<p>No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(3) The report shall contain the following information from the previous fiscal year on substance use disorder prevention, education, and treatment programs:</p> <p>(a) Expenditures stratified by department-designated community mental health entity, by central diagnosis and referral agency, by fund source, by subcontractor, by population served, and by service type.</p> <p>(b) Expenditures per state client, with data on the distribution of expenditures reported using a histogram approach.</p> <p>(c) Number of services provided by central diagnosis and referral agency, by subcontractor, and by service type. Additionally, data on length of stay, referral source, and participation in other state programs.</p> <p>(d) Collections from other first- or third-party payers, private donations, or other state or local programs, by department-designated community mental health entity, by subcontractor, by population served, and by service type.</p>	No changes from current law.		
<p>(4) The department shall include data reporting requirements listed in subsections (2) and (3) in the annual contract with each individual CMHSP, PIHP, and designated regional entity for substance use disorder treatment and prevention.</p>	No changes from current law.		
<p>(5) The department shall take all reasonable actions to ensure that the data required are complete and consistent among all CMHSPs, PIHPs, and designated regional entities for substance use disorder prevention and treatment.</p>	No changes from current law.		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Psychiatric Residential Treatment Facility and Children's Behavioral Action Team</i></p> <p>Sec. 905. (1) From the funds appropriated in part 1 for behavioral health program administration, the department shall maintain a psychiatric transitional unit and children's behavioral action team. These services will augment the continuum of behavioral health services for high-need youth and provide additional continuity of care and transition into supportive community-based services.</p>	<p>Sec. 905. (1) No changes from current law.</p>		
<p>(2) Outcomes and performance measures for this initiative include, but are not limited to, the following:</p> <p>(a) The rate of rehospitalization for youth served through the program at 30 and 180 days.</p> <p>(b) Measured change in the Child and Adolescent Functional Assessment Scale for children served through the program.</p>	<p>(2) No changes from current law.</p>		
<p><i>State Disability Assistance Substance Use Disorder Services Program</i></p> <p>Sec. 906. (1) The funds appropriated in part 1 for the state disability assistance substance use disorder services program shall be used to support per diem room and board payments in substance use disorder residential facilities. Eligibility of clients for the state disability assistance substance use disorder services program shall include needy persons 18 years of age or older, or emancipated minors, who reside in a substance use disorder treatment center.</p>	<p>Sec. 906. (1) No changes from current law.</p>		
<p>(2) The department shall reimburse all licensed substance use disorder programs eligible to participate in the program at a rate equivalent to that paid by the department to adult foster care providers. Programs accredited by department-approved accrediting organizations shall be reimbursed at the personal care rate, while all other eligible programs shall be reimbursed at the domiciliary care rate.</p>	<p>(2) No changes from current law.</p>		



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	EXECUTIVE	HOUSE	SENATE
<p><i>Community Substance Use Disorder Prevention, Education, and Treatment</i></p> <p>Sec. 907. (1) The amount appropriated in part 1 for community substance use disorder prevention, education, and treatment shall be expended to coordinate care and services provided to individuals with severe and persistent mental illness and substance use disorder diagnoses.</p>	<p>Sec. 907. (1) No changes from current law.</p>		
<p>(2) The department shall approve managing entity fee schedules for providing substance use disorder services and charge participants in accordance with their ability to pay.</p>	<p>(2) No changes from current law.</p>		
<p>(3) The managing entity shall continue current efforts to collaborate on the delivery of services to those clients with mental illness and substance use disorder diagnoses with the goal of providing services in an administratively efficient manner.</p>	<p>(3) No changes from current law.</p>		
<p><i>Medical Marihuana Regulatory Fund</i></p> <p>Sec. 909. From the funds appropriated in part 1 for community substance use disorder prevention, education, and treatment, the department shall use available revenue from the marihuana regulatory fund established in section 604 of the medical marihuana facilities licensing act, 2016 PA 281, MCL 333.27604, to improve physical health; expand access to substance use disorder prevention and treatment services; and strengthen the existing prevention, treatment, and recovery systems.</p>	<p>Sec. 909. No changes from current law.</p>		
<p><i>Substance Use Disorder Treatment for Public Assistance Recipients</i></p> <p>Sec. 910. The department shall ensure that substance use disorder treatment is provided to applicants and recipients of public assistance through the department who are required to obtain substance use disorder treatment as a condition of eligibility for public assistance.</p>	<p>Sec. 910. No changes from current law.</p>		



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<p><i>Jail Diversion Services for Persons with Mental Illness or Developmental Disability</i></p> <p>Sec. 911. (1) The department shall ensure that each contract with a CMHSP or PIHP requires the CMHSP or PIHP to implement programs to encourage diversion of individuals with serious mental illness, serious emotional disturbance, or developmental disability from possible jail incarceration when appropriate.</p>	<p>Sec. 911. (1) No changes from current law.</p>		
<p>(2) Each CMHSP or PIHP shall have jail diversion services and shall work toward establishing working relationships with representative staff of local law enforcement agencies, including county prosecutors' offices, county sheriffs' offices, county jails, municipal police agencies, municipal detention facilities, and the courts. Written interagency agreements describing what services each participating agency is prepared to commit to the local jail diversion effort and the procedures to be used by local law enforcement agencies to access mental health jail diversion services are strongly encouraged.</p>	<p>(2) No changes from current law.</p>		
<p><i>Salvation Army Harbor Light Program</i></p> <p>Sec. 912. The department shall contract directly with the Salvation Army Harbor Light program to provide non-Medicaid substance use disorder services if the local coordinating agency or the department confirms the Salvation Army Harbor Light program meets the standard of care. The standard of care shall include, but is not limited to, utilization of the medication assisted treatment option.</p>	<p>Striking current law.</p>		



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	EXECUTIVE	HOUSE	SENATE
<p><i>Mental Health and Wellness Commission Report</i></p> <p>Sec. 915. (1) By March 1 of the current fiscal year, the department shall report the following information on the mental health and wellness commission to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office:</p> <p>(a) Previous fiscal year expenditures by actionable recommendation of the mental health and wellness commission.</p> <p>(b) Programs utilized during the previous fiscal year to address each actionable recommendation of the mental health and wellness commission.</p> <p>(c) Outcomes and performance measures achieved during the previous fiscal year by actionable recommendation of the mental health and wellness commission.</p> <p>(d) Current fiscal year funding by actionable recommendation of the mental health and wellness commission.</p> <p>(e) Current fiscal year funding by program utilized to address each actionable recommendation of the mental health and wellness commission.</p>	<p>Sec. 915. (1) No changes from current law.</p>		
<p>(2) By April 1 of the current fiscal year, the department shall report on funding within the executive budget proposal for the fiscal year ending September 30, 2020, by actionable recommendation of the mental health and wellness commission to the same report recipients listed in subsection (1).</p>	<p>(2) No changes from current law except: "fiscal year ending September 30, 2020 2021,"</p>		



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<p><i>Medicaid Mental Health Payments and Cases Report</i></p> <p>Sec. 918. On or before the twenty-fifth of each month, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget director on the amount of funding paid to PIHPs to support the Medicaid managed mental health care program in the preceding month. The information shall include the total paid to each PIHP, per capita rate paid for each eligibility group for each PIHP, and number of cases in each eligibility group for each PIHP, and year-to-date summary of eligibles and expenditures for the Medicaid managed mental health care program.</p>	<p>Sec. 918. No changes from current law.</p>		
<p><i>Rate-Setting Process for PIHPs</i></p> <p>Sec. 920. (1) As part of the Medicaid rate-setting process for behavioral health services, the department shall work with PIHP network providers and actuaries to include any state and federal wage and compensation increases that directly impact staff who provide Medicaid-funded community living supports, personal care services, respite services, skill-building services, and other similar supports and services as part of the Medicaid rate.</p>	<p>Sec. 920. (1) No changes from current law.</p>		
<p>(2) It is the intent of the legislature that any increased Medicaid rate related to state minimum wage increases shall also be distributed to direct care employees.</p>	<p>Striking current law.</p>		



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<p><i>Autism Services Fee Schedule</i></p> <p>Sec. 924. From the funds appropriated in part 1 for autism services, for the purposes of actuarially sound rate certification and approval for Medicaid behavioral health managed care programs, the department shall establish and implement a fee schedule for autism services reimbursement rates for direct services by October 1 of the current fiscal year. Expenditures used for rate setting shall not exceed those identified in the fee schedule. The rates for behavioral technicians shall be reduced by 10% of the 2017 autism fee schedule, but shall not be less than \$50.00 per hour.</p>	<p>Sec. 924. From the funds appropriated in part 1 for autism services, for the purposes of actuarially sound rate certification and approval for Medicaid behavioral health managed care programs, the department shall establish and implement MAINTAIN a fee schedule for autism services reimbursement rates for direct services by October 1 of the current fiscal year. Expenditures used for rate setting shall not exceed those identified in the fee schedule. The rates for behavioral technicians shall be reduced by 10% of the 2017 autism fee schedule, but shall not be less than \$50.00 per hour MAINTAINED AT THE HOURLY RATE IN PLACE IN THE PREVIOUS FISCAL YEAR.</p>		
<p><i>Non-Medicaid Mental Health Funding Allocations</i></p> <p>Sec. 925. From the funds appropriated in part 1 for community mental health non-Medicaid services, each CMHSP is allocated not less than the amount allocated to that CMHSP during the previous fiscal year.</p>	<p>Striking current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Conference of Western Wayne Substance Use Disorder Pilot</i></p> <p>Sec. 926. From the funds appropriated in part 1 for community substance use disorder prevention, education, and treatment, \$500,000.00 is allocated for a specialized substance use disorder detoxification pilot project administered by a 9-1-1 service district in conjunction with a substance use and case management provider and at a hospital in a city with a population between 95,000 and 97,000 within a county with a population of at least 1,500,000. The hospital must have a wing with at least 10 beds dedicated to stabilizing patients suffering from addiction by providing a specialized trauma therapist as well as a peer support specialist to assist with treatment and counseling. The substance use and case management provider shall collect and submit to the department data on the outcomes of the pilot project throughout the duration of the pilot project and shall provide a report on the pilot project's outcomes to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office.</p>	<p>Striking current law.</p>		
<p><i>Capitation Rates Increase for PIHPs</i></p> <p>Sec. 928. (1) Each PIHP shall provide, from internal resources, local funds to be used as a part of the state match required under the Medicaid program in order to increase capitation rates for PIHPs. These funds shall not include either state funds received by a CMHSP for services provided to non-Medicaid recipients or the state matching portion of the Medicaid capitation payments made to a PIHP.</p>	<p>Sec. 928. (1) No changes from current law.</p>		



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<p>(2) It is the intent of the legislature that any funds that lapse from the funds appropriated in part 1 for Medicaid mental health services shall be redistributed to individual CMHSPs as a reimbursement of local funds on a proportional basis to those CMHSPs whose local funds were used as state Medicaid match. By April 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the lapse by PIHP from the previous fiscal year and the projected lapse by PIHP in the current fiscal year.</p>	Striking current law		
<p>County Matching Funds to CMHSP</p> <p>Sec. 935. A county required under the provisions of the mental health code, 1974 PA 258, MCL 330.1001 to 330.2106, to provide matching funds to a CMHSP for mental health services rendered to residents in its jurisdiction shall pay the matching funds in equal installments on not less than a quarterly basis throughout the fiscal year, with the first payment being made by October 1 of the current fiscal year.</p>	<p>Sec. 935. No changes from current law.</p>		



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<p>Transferring and Withdrawing CMHSP Allocations</p> <p>Sec. 940. (1) According to section 236 of the mental health code, 1974 PA 258, MCL 330.1236, the department shall do both of the following:</p> <p>(a) Review expenditures for each CMHSP to identify CMHSPs with projected allocation surpluses and to identify CMHSPs with projected allocation shortfalls. The department shall encourage the board of a CMHSP with a projected allocation surplus to concur with the department's recommendation to reallocate those funds to CMHSPs with projected allocation shortfalls.</p> <p>(b) Withdraw unspent funds that have been allocated to a CMHSP if other reallocated funds were expended in a manner not provided for in the approved contract, including expending funds on services and programs provided to individuals residing outside of the CMHSP's geographic region.</p>	<p>Sec. 940. (1) According to section 236 of the mental health code, 1974 PA 258, MCL 330.1236, the department shall do both of the following:</p> <p>(a) Review REVIEW expenditures for each CMHSP to identify CMHSPs with projected allocation surpluses and to identify CMHSPs with projected allocation shortfalls. The department shall encourage the board of a CMHSP with a projected allocation surplus to concur with the department's recommendation to reallocate those funds to CMHSPs with projected allocation shortfalls.</p> <p>(b) Withdraw unspent funds that have been allocated to a CMHSP if other reallocated funds were expended in a manner not provided for in the approved contract, including expending funds on services and programs provided to individuals residing outside of the CMHSP's geographic region.</p>		
<p>(2) A CMHSP that has its funding allocation transferred out or withdrawn during the current fiscal year as described in subsection (1) is not eligible for any additional funding reallocations during the remainder of the current fiscal year, unless that CMHSP is responding to a public health emergency as determined by the department.</p>	<p>(2) A CMHSP that has its funding allocation transferred out or withdrawn during the current fiscal year as described in subsection (1) is not eligible for any additional funding reallocations during the remainder of the current fiscal year, unless that CMHSP is responding to a public health emergency as determined by the department.</p>		
<p>(3) CMHSPs shall report to the department on any proposed reallocations described in this section at least 30 days before any reallocations take effect.</p>	<p>(3) No changes from current law.</p>		



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<p>(4) The department shall notify the chairs of the appropriation subcommittees on the department budget when a request is made and when the department grants approval for reallocation or withdraw as described in subsection (1). By September 30 of the current fiscal year, the department shall provide a report on the amount of funding reallocated or withdrawn to the senate and house appropriation subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office.</p>	<p>(4) The department shall notify the chairs of the appropriation subcommittees on the department budget when a request is made and when the department grants approval for reallocation or withdraw as described in subsection (1). By September 30 of the current fiscal year, the department shall provide a report on the amount of funding reallocated or withdrawn to the senate and house appropriation subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office.</p>		
<p><i>CMHSP Notice of Reduction, Termination, or Suspension of CMHSP Provided Services</i></p> <p>Sec. 942. A CMHSP shall provide at least 30 days' notice before reducing, terminating, or suspending services provided by a CMHSP to CMHSP clients, with the exception of services authorized by a physician that no longer meet established criteria for medical necessity.</p>	<p>Sec. 942. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Court-Appointed Guardians and Conservators</i></p> <p>Sec. 950. From the funds appropriated in part 1 for court-appointed guardian and conservator reimbursements, the department shall allocate not more than \$1,500,000.00 to reimburse counties for 50% of the cost to reimburse court-appointed public guardians and conservators for recipients who also receive CMHSP services. The department shall only reimburse for 50% of the cost for reimbursement up to \$83.00 per month per court-appointed public guardian and conservator. By September 15 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on the number of counties that received these funds, the number of court-appointed public guardians and conservators who were reimbursed by the counties that received these funds, and the per-month reimbursement rates provided by the counties that received these funds.</p>	Striking current law.		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Autism Services Provision and Cost Workgroup</i></p> <p>Sec. 959. (1) The department shall establish a workgroup in collaboration with the chairs of the house and senate appropriations subcommittees on the department budget or their designees, CMHSP members, autism services provider clinical and administrative staff, community members, Medicaid autism services clients, and family members of Medicaid autism services clients to make recommendations to ensure appropriate cost and service provision, including, but not limited to, the following:</p> <p>(a) Ways to prevent fraud and overdiagnosis. (b) Comparison of Medicaid rates for autism services to commercial insurance rates. (c) Comparison of diagnosis process between Medicaid, Tricare, and commercial insurance.</p> <p>(2) By March 1 of the current fiscal year, the department shall provide the workgroup's recommendations to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office.</p>	Striking current law.		
<p><i>Psychiatric Bed Registry</i></p> <p>Sec. 961. From the funds appropriated in part 1 for behavioral health program administration, the department shall allocate \$150,000.00 to establish and administer an electronic inpatient psychiatric bed registry consistent with the requirements in section 151 of the mental health code, 1974 PA 258, MCL 330.1151.</p>	Striking current law.		
	<p>Sec. 961. From the funds appropriated in part 1 for behavioral health program administration, the department shall allocate \$150,000.00 to establish and administer an electronic inpatient psychiatric bed registry consistent with the requirements in section 151 of the mental health code, 1974 PA 258, MCL 330.1151.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>National Accreditation Review Criteria for Behavioral Health Services</i></p> <p>Sec. 994. (1) By January 1 of the current fiscal year, the department shall seek, if necessary, federal approval through either a waiver request or state plan amendment to allow a CMHSP, PIHP, or subcontracting provider agency that is reviewed and accredited by a national accrediting entity for behavioral health care services to be considered in compliance with state program review and audit requirements that are addressed and reviewed by that national accrediting entity.</p>	Striking current law.		
<p>(2) By April 1 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office all of the following:</p> <p>(a) The status of the federal approval process required in subsection (1).</p> <p>(b) A list of each CMHSP, PIHP, and subcontracting provider agency that is considered to be in compliance with state program review and audit requirements under subsection (1).</p> <p>(c) For each CMHSP, PIHP, or subcontracting provider agency described in subdivision (b), both of the following:</p> <p>(i) The state program review and audit requirements that the CMHSP, PIHP, or subcontracting provider agency is considered to be in compliance with.</p> <p>(ii) The national accrediting entity that reviewed and accredited the CMHSP, PIHP, or subcontracting provider agency.</p>	Striking current law.		
<p>(3) The department shall continue to comply with state and federal law and shall not initiate an action that negatively impacts beneficiary safety. Any cost savings attributed to this action shall be reinvested back into services.</p>	Striking current law.		



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(4) As used in this section, "national accrediting entity" means the Joint Commission, formerly known as the Joint Commission on Accreditation of Healthcare Organizations, the Commission on Accreditation of Rehabilitation Facilities, the Council on Accreditation, the URAC, formerly known as the Utilization Review Accreditation Commission, the National Committee for Quality Assurance, or another appropriate entity, as approved by the department.	Striking current law.		
<i>Mental Health Diversion Council</i> Sec. 995. From the funds appropriated in part 1 for behavioral health program administration, \$4,350,000.00 is intended to address the recommendations of the mental health diversion council.	Sec. 995. No changes from current law.		
Transfer from Child Welfare	Sec. 597. 996. From the funds appropriated in part 1 for family support subsidy, the department shall make monthly payments of \$229.31 to the parents or legal guardians of children approved for the family support subsidy by a CMHSP.		
<i>Distribution of Substance Use Disorder Block Grant Funds</i> Sec. 997. The population data used in determining the distribution of substance use disorder block grant funds shall be from the most recent federal census.	Sec. 997. No changes from current law.		
<i>Distribution of General Funds to CMHSPs</i> Sec. 998. For distribution of state general funds to CMHSPs, if the department decides to use census data, the department shall use the most recent federal census data available.	Sec. 998. No changes from current law.		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>PIHP Reimbursement Audit Report</i></p> <p>Sec. 999. Within 30 days after the completion of a statewide PIHP reimbursement audit, the department shall provide the audit report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office.</p>	<p>Sec. 999. No changes from current law.</p>		
<p><i>CMHSP Populations Served Report</i></p> <p>Sec. 1001. By December 31 of the current fiscal year, each CMHSP shall submit a report to the department that identifies populations being served by the CMHSP broken down by program eligibility category. The report shall also include the percentage of the operational budget that is related to program eligibility enrollment. By January 15 of the current fiscal year, the department shall submit the report described in this section to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office.</p>	<p>Sec. 1001. No changes to current law except:</p> <p>“January 15 FEBRUARY 15 of the current fiscal year,”</p>		
<p><i>Policies and Procedures for PIHPs or CMHSPs</i></p> <p>Sec. 1003. The department shall notify the Community Mental Health Association of Michigan when developing policies and procedures that will impact PIHPs or CMHSPs.</p>	<p>Sec. 1003. No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
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<p><i>CMHSP and PIHP Rebasing Notification</i></p> <p>Sec. 1004. The department shall provide the senate and house appropriations subcommittee on the department budget, the senate and house fiscal agencies, and the state budget office any rebased formula changes to either Medicaid behavioral health services or non-Medicaid mental health services 90 days before implementation. The notification shall include a table showing the changes in funding allocation by PIHP for Medicaid behavioral health services or by CMHSP for non-Medicaid mental health services.</p>	<p>Sec. 1004. No changes from current law.</p>		
<p><i>Providers of Services to High-Need Children or Adults</i></p> <p>Sec. 1005. For the purposes of special projects involving high-need children or adults, including the not guilty by reason of insanity population, the department may contract directly with providers of services to these identified populations.</p>	<p>Sec. 1005. No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>PIHP and CMHSP Administrative Costs, Mental Health Care, Service Rates, and Direct Care Reimbursement</i></p> <p>Sec. 1008. PIHPs and CMHSPs shall do all of the following:</p> <p>(a) Work to reduce administration costs by ensuring that PIHP and CMHSP responsible functions are efficient in allowing optimal transition of dollars to those direct services considered most effective in assisting individuals served. Any consolidation of administrative functions must demonstrate, by independent analysis, a reduction in dollars spent on administration resulting in greater dollars spent on direct services. Savings resulting from increased efficiencies shall not be applied to PIHP and CMHSP net assets, internal service fund increases, building costs, increases in the number of PIHP and CMHSP personnel, or other areas not directly related to the delivery of improved services.</p> <p>(b) Take an active role in managing mental health care by ensuring consistent and high-quality service delivery throughout its network and promote a conflict-free care management environment.</p> <p>(c) Ensure that direct service rate variances are related to the level of need or other quantifiable measures to ensure that the most money possible reaches direct services.</p> <p>(d) Whenever possible, promote fair and adequate direct care reimbursement, including fair wages for direct service workers.</p>	<p>Sec. 1008. No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>Direct Care Wage Increase</p> <p>Sec. 1009. (1) From the funds appropriated in part 1 for Medicaid mental health services and Healthy Michigan plan - behavioral health, the department shall maintain the \$0.50 hourly wage increase for direct care workers as specified under subsection (1) of section 1009 of article X of 2017 PA 107. Funds provided in this section must be utilized by a PIHP to maintain the \$0.50 hourly wage increase for direct care worker wages, for the employer's share of federal insurance contributions act costs, purchasing worker's compensation insurance, or the employer's share of unemployment costs.</p>	<p>Sec. 1009. (1) From the funds appropriated in part 1 for Medicaid mental health services and Healthy Michigan plan - behavioral health, the department shall maintain the \$0.50 hourly wage increase for direct care workers as specified under subsection (1) of section 1009 of article X of 2017 PA 107 FROM THE PREVIOUS FISCAL YEAR. Funds provided in this section must be utilized by a PIHP to maintain the \$0.50 hourly wage increase for direct care worker wages, for the employer's share of federal insurance contributions act costs, purchasing worker's compensation insurance, or the employer's share of unemployment costs.</p>		
<p>(2) Each PIHP shall report to the department by February 1 of the current fiscal year the range of wages paid to direct care workers, including information on the number of direct care workers at each wage level.</p>	<p>(2) No changes from current law.</p>		
<p>(3) The department shall report the information required to be reported according to subsection (2) to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by March 1 of the current fiscal year.</p>	<p>(3) No changes from current law.</p>		



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

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Kevin's Law</i></p> <p>Sec. 1010. From the funds appropriated in part 1 for behavioral health program administration, up to \$2,000,000.00 shall be allocated to address the implementation of court-ordered assisted outpatient treatment as provided under chapter 4 of the mental health code, 1974 PA 258, MCL 330.1400 to 330.1490.</p>	<p>Sec. 1010. No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Supplemental Boilerplate – Michigan CARES Hotline</i></p> <p>Sec. 456. (1) From the funds appropriated in part 1 for behavioral health program administration, the department of health and human services shall allocate \$3,000,000.00 general fund/general purpose revenue to contract for the development, operation, and maintenance of a Michigan community, access, resources, education, and safety (CARES) hotline pilot program. The department of health and human services shall contract with a vendor that is currently providing contact center technology implementation and support for no fewer than 5 state agencies, including the department of health and human services, and that has supported the implementation of contact center technologies with counties. Additionally, the vendor must be currently utilizing omni-channel communication methods within the contact center operations and have the technical capabilities and experience to integrate advanced health analytics and telehealth services into the contact center infrastructure. The hotline must do all of the following:</p> <p>(a) Provide services to no fewer than 3 geographically diverse areas.</p> <p>(b) Connect individuals experiencing a behavioral health crisis, regardless of severity, to local mental health providers using telecommunications and digital communications methods.</p> <p>(c) Screen and refer callers to the appropriate level of care support, including supports for suicide prevention, supports for substance use disorder treatment and rehabilitation services, and supports provided through community mental health services programs.</p>	<p>Striking current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
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<p>(d) Be available 24 hours a day, 7 days a week.</p> <p>(e) Have the ability to access information related to the availability of services, including any registry of available inpatient psychiatric beds.</p> <p>(f) Comply with all applicable laws respecting individual and patient privacy.</p> <p>(g) Ensure the security of data collected, in line with industry best practices and in compliance with all applicable laws.</p> <p>(h) Notwithstanding the provisions in subdivisions (f) and (g), collect data and utilize data analytics to track the success of the hotline including benchmarks, operational metrics, and trends to accurately assess service needs and outcomes.</p>	Striking current law.		
<p>(2) The department of health and human services shall work with the department of licensing and regulatory affairs and the contractor described in subsection (1) to leverage existing databases and other sources of information identifying providers of mental health services and substance use disorder treatment and rehabilitation services and to utilize the most current provider information available.</p>	Striking current law.		
<p>STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL HEALTH SERVICES</p> <p><i>Third-Party Payments and Revenue Recapture Project</i></p> <p>Sec. 1051. The department shall continue a revenue recapture project to generate additional revenues from third parties related to cases that have been closed or are inactive. A portion of revenues collected through project efforts may be used for departmental costs and contractual fees associated with these retroactive collections and to improve ongoing departmental reimbursement management functions.</p>	<p>Sec. 1051. No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>Gifts and Bequests</p> <p>Sec. 1052. The purpose of gifts and bequests for patient living and treatment environments is to use additional private funds to provide specific enhancements for individuals residing at state-operated facilities. Use of the gifts and bequests shall be consistent with the stipulation of the donor. The expected completion date for the use of gifts and bequests donations is within 3 years unless otherwise stipulated by the donor.</p>	<p>Sec. 1052. No changes from current law.</p>		
<p>Closures or Consolidations of State Hospitals and Centers</p> <p>Sec. 1055. (1) The department shall not implement any closures or consolidations of state hospitals, centers, or agencies until CMHSPs or PIHPs have programs and services in place for those individuals currently in those facilities and a plan for service provision for those individuals who would have been admitted to those facilities.</p>	<p>Sec. 1055. (1) No changes from current law.</p>		
<p>(2) All closures or consolidations are dependent upon adequate department-approved CMHSP and PIHP plans that include a discharge and aftercare plan for each individual currently in the facility. A discharge and aftercare plan shall address the individual's housing needs. A homeless shelter or similar temporary shelter arrangements are inadequate to meet the individual's housing needs.</p>	<p>(2) No changes from current law.</p>		
<p>(3) Four months after the certification of closure required in section 19(6) of the state employees' retirement act, 1943 PA 240, MCL 38.19, the department shall provide a closure plan to the house and senate appropriations subcommittees on the department budget and the state budget director.</p>	<p>(3) No changes from current law.</p>		



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(4) Upon the closure of state-run operations and after transitional costs have been paid, the remaining balances of funds appropriated for that operation shall be transferred to CMHSPs or PIHPs responsible for providing services for individuals previously served by the operations.	(4) No changes from current law.		
<p>Patient Reimbursement</p> <p>Sec. 1056. The department may collect revenue for patient reimbursement from first- and third-party payers, including Medicaid and local county CMHSP payers, to cover the cost of placement in state hospitals and centers. The department is authorized to adjust financing sources for patient reimbursement based on actual revenues earned. If the revenue collected exceeds current year expenditures, the revenue may be carried forward with approval of the state budget director. The revenue carried forward shall be used as a first source of funds in the subsequent year.</p>	<p>Sec. 1056. No changes from current law.</p>		
<p>Privatization of Food and Custodial Services</p> <p>Sec. 1058. Effective October 1 of the current fiscal year, the department, in consultation with the department of technology, management, and budget, may maintain a bid process to identify 1 or more private contractors to provide food service and custodial services for the administrative areas at any state hospital identified by the department as capable of generating savings through the outsourcing of such services.</p>	<p>Sec. 1058. No changes from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>Center for Forensic Psychiatry</p> <p>Sec. 1059. The department shall identify specific outcomes and performance measures for the center for forensic psychiatry, including, but not limited to, the following:</p> <p>(a) The average wait time for persons determined incompetent to stand trial before admission to the center for forensic psychiatry.</p> <p>(b) The average wait time for persons determined incompetent to stand trial before admission to other state-operated psychiatric facilities.</p> <p>(c) The number of persons waiting to receive services at the center for forensic psychiatry.</p> <p>(d) The number of persons waiting to receive services at other state-operated hospitals and centers.</p>	<p>Sec. 1059. The department shall identify specific outcomes and performance measures for the center for forensic psychiatry, STATE-OPERATED HOSPITALS AND CENTERS, including, but not limited to, the following:</p> <p>(a) The average wait time for persons determined incompetent to stand trial before admission to the center for forensic psychiatry.</p> <p>(b) The average wait time for persons determined incompetent to stand trial before admission to other state-operated psychiatric facilities.</p> <p>(c) The number of persons waiting to receive services at the center for forensic psychiatry.</p> <p>(d) The number of persons waiting to receive services at other state-operated hospitals and centers.</p> <p>(E) THE NUMBER OF PERSONS DETERMINED NOT GUILTY BY REASON OF INSANITY OR INCOMPETENT TO STAND TRIAL THROUGH PROBATE ORDER THAT HAVE BEEN DEEMED READY FOR DISCHARGE TO THE COMMUNITY, AND THE AVERAGE WAIT TIME BETWEEN BEING DEEMED READY FOR DISCHARGE TO THE COMMUNITY AND ACTUAL COMMUNITY PLACEMENT.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>State Psychiatric Hospital Staffing Workgroup</i></p> <p>Sec. 1060. (1) The department shall continue to convene a workgroup that meets at least quarterly in collaboration with the chairs of the house and senate appropriations subcommittees on the department budget or their designees, labor union representation, civil service, and any other appropriate parties to recommend solutions to address mandatory overtime, staff turnover, and staff retention at the state psychiatric hospitals and centers, including, but not limited to, permitting retired workers to return and permitting hiring of part-time workers.</p>	<p>Striking current law.</p> <p>[See. Sec. 1062 for related boilerplate]</p>		
<p>(2) By March 1 of the current fiscal year, the department shall provide a status update on the implementation of the workgroup's recommendations to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office.</p>	<p>Striking current law.</p>		
<p><i>Caro Regional Mental Health Center</i></p> <p>Sec. 1061. The funds appropriated in part 1 for Caro Regional Mental Health Center shall only be utilized to support a psychiatric hospital located at its current location. It is the intent of the legislature that the Caro Regional Mental Health Center shall remain open and operational at its current location on an ongoing basis, and that any capital outlay funding shall be utilized for planning and construction at the current location instead of at a new location.</p>	<p>Striking current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>Sec. 1062. New Executive Language.</p>	<p>SEC. 1062. THE DEPARTMENT SHALL CONTINUE TO IDENTIFY AND IMPLEMENT EFFORTS TO ADDRESS STAFFING SHORTAGES IN THE STATE PSYCHIATRIC HOSPITAL SYSTEM. BY MARCH 1 OF THE CURRENT FISCAL YEAR, THE DEPARTMENT SHALL PROVIDE A REPORT ON:</p> <p>(A) THE MEASURES BEING IMPLEMENTED TO HIRE QUALIFIED TRAINED STAFF, ADDRESS STAFF OVERTIME AND STAFF TURNOVER, AND IMPROVE STAFF RETENTION. (B) THE NUMBER OF DIRECT CARE AND CLINICAL STAFF POSITIONS THAT ARE CURRENTLY VACANT.</p>		
<p>Supplemental Boilerplate – Caro Staffing</p> <p>Sec. 460. From the funds appropriated in part 1 for the Caro regional mental health center, the department of health and human services shall contract with a Michigan-based behavioral health services provider who has at least 25 years of experience with professional behavioral health staff recruiting and human resource management to improve and maintain sufficient and appropriate staff-to-patient ratios and ensure the health, safety, and well-being of both staff and residents at the hospital. Contractual support shall include 1 full-time clinical director and an adequate number of psychiatrists and physician assistants to manage and deliver health services.</p>	<p>Striking current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Population Health

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><u>HEALTH POLICY</u></p> <p><i>Free Health Clinic Funding</i></p> <p>Sec. 1140. From the funds appropriated in part 1 for primary care services, \$250,000.00 shall be allocated to free health clinics operating in the state. The department shall distribute the funds equally to each free health clinic. For the purpose of this appropriation, “free health clinics” means nonprofit organizations that use volunteer health professionals to provide care to uninsured individuals.</p>	<p>Sec. 1140. No changes from current law.</p>		
<p><i>Options for Incentivizing Primary Care Medical School Students to Stay in Michigan</i></p> <p>Sec. 1142. The department shall continue to seek means to increase retention of Michigan medical school students for completion of their primary care residency requirements within this state and ultimately, for some period of time, to remain in this state and serve as primary care physicians. The department is encouraged to work with Michigan institutions of higher education.</p>	<p>Sec. 1142. No changes from current law.</p>		
<p><i>Federal Grant for Blueprint for Health Innovation</i></p> <p>Sec. 1144. (1) From the funds appropriated in part 1 for health policy administration, the department shall allocate the federal state innovation model grant funding that supports implementation of the health delivery system innovations detailed in this state’s “Reinventing Michigan’s Health Care System: Blueprint for Health Innovation” document. This initiative will test new payment methodologies, support improved population health outcomes, and support improved infrastructure for technology and data sharing and reporting. The funds will be used to provide financial support directly to regions participating in the model test and to support statewide stakeholder guidance and technical support.</p>	<p>Sec. 1144. (1) No changes from current law.</p>		



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<p>(2) Outcomes and performance measures for the initiative under subsection (1) include, but are not limited to, the following:</p> <p>(a) Increasing the number of physician practices fulfilling patient-centered medical home functions.</p> <p>(b) Reducing inappropriate health utilization, specifically reducing preventable emergency department visits, reducing the proportion of hospitalizations for ambulatory sensitive conditions, and reducing this state's 30-day hospital readmission rate.</p>	(2) No changes from current law.		
<p>(3) On a semiannual basis, the department shall submit a written report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office on the status of the program and progress made since the prior report.</p>	(3) No changes from current law.		
<p>(4) From the funds appropriated in part 1 for health policy administration, any data aggregator created as part of the allocation of the federal state innovation model grant funds must meet the following standards:</p> <p>(a) The primary purpose of the data aggregator must be to increase the quality of health care delivered in this state, while reducing costs.</p> <p>(b) The data aggregator must be governed by a nonprofit entity.</p> <p>(c) All decisions regarding the establishment, administration, and modification of the database must be made by an advisory board. The membership of the advisory board must include the director of the department or a designee of the director and representatives of health carriers, consumers, and purchasers.</p> <p>(d) The Michigan Data Collaborative shall be the data aggregator to receive health care claims information from, without limitation, commercial health carriers, nonprofit health care corporations, health maintenance organizations, and third party administrators that process claims under a service contract.</p> <p>(e) The data aggregator must use existing data sources and technological infrastructure, to the extent possible.</p>	Striking current law.		



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	EXECUTIVE	HOUSE	SENATE
<p><i>Payments to Indian or Tribal Facilities for Medical Services</i></p> <p>Sec. 1145. The department will take steps necessary to work with Indian Health Service, tribal health program facilities, or Urban Indian Health Program facilities that provide services under a contract with a Medicaid managed care entity to ensure that those facilities receive the maximum amount allowable under federal law for Medicaid services.</p>	<p>Sec. 1145. No changes from current law.</p>		
<p><i>Bone Marrow Donor Transplant Registry Tissue Typing</i></p> <p>Sec. 1146. From the funds appropriated in part 1 for bone marrow transplant registry, \$250,000.00 shall be allocated to Michigan Blood, the partner of the match registry of the national marrow donor program. The funds shall be used to offset ongoing tissue typing expenses associated with donor recruitment and collection services and to expand those services to better serve the citizens of this state.</p>	<p>Striking current law.</p>		



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<p>Early Primary Care Incentive Program</p> <p>Sec. 1147. (1) From the funds appropriated in part 1 for primary care services, \$500,000.00 shall be appropriated for the second year of a 6-year early primary care incentive program to facilitate the placement of physicians in medically underserved areas of this state. The early primary care incentive program format includes all of the following:</p> <p>(a) Recruitment of interested physicians before completion of first year of residency.</p> <p>(b) To participate in the pilot program, a physician must do all of the following:</p> <p>(i) Complete at least 1 year of postgraduate education.</p> <p>(ii) Complete and pass all 3 parts of a national licensing board examination.</p> <p>(iii) Obtain an unrestricted license to engage in the practice of osteopathic medicine and surgery or an unrestricted license to engage in the practice of medicine in this state.</p> <p>(c) A participating physician shall enter into a contract to work with an employer for no less than 2 years in a federally underserved rural or urban area in this state, beginning the year following completion of at least 1 year of postgraduate education.</p> <p>(d) The employer shall employ the physician at a competitive salary. A contractual employer may include, but is not limited to, a private practice physician or physician group, a hospital or hospital system, a community clinic, or a federally qualified health center.</p> <p>(e) Assistance with repayment of medical education loans of the participating physician shall be provided through local, state, federal, or other sources during the employment period, with a target assistance amount of \$50,000.00 over 2 years.</p> <p>(f) Upon completion of the 2-year employment period, participating physicians may reenter and complete a postgraduate residency program.</p>	Striking current law.		
<p>(2) The department shall seek philanthropic support for the early primary care incentive program to achieve increased participation and may use state funds to match philanthropic contributions.</p>	Striking current law.		



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(3) The department shall contract with the Michigan Health Council for the purpose of administering the early primary care incentive program. Funds shall be disbursed by the department to the Michigan Health Council by December 1 of the current fiscal year for this purpose.	Striking current law.		
(4) Use of funds for administration of the early primary care incentive program is limited to no more than \$150,000.00.	Striking current law.		
(5) The department shall prepare a report on the status of the early primary care incentive program that shall include, but is not limited to, the number of physicians placed, location of placement, type of employer, average student loan burden of the participating physicians, and average loan relief provided under the program. By April 1 of the current fiscal year, the department shall provide the report described in this subsection to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies and policy offices, and the state budget office.	Striking current law.		



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<p>(6) Unexpended and unencumbered funds up to a maximum of \$500,000.00 general fund/general purpose revenue in part 1 for primary care services are designated as work project appropriations, and any unencumbered or unallotted funds shall not lapse at the end of the fiscal year and shall be available for expenditures for the early primary care incentive program under this section until the project has been completed. All of the following are in compliance with section 451a of the management and budget act, 1984 PA 431, MCL 18.1451a:</p> <p>(a) The purpose of the work project is to fund the cost of an early primary care incentive program as provided by this section.</p> <p>(b) The work project will be accomplished by administering the partnering of participating physicians with qualifying employers and coordinating the negotiation of medical school loan repayment assistance for the participating physician.</p> <p>(c) The total estimated cost of the work project is \$500,000.00 of general fund/general purpose revenue.</p> <p>(d) The tentative completion date of the work project is September 30, 2023.</p>	<p>Striking current law.</p>		
<p><i>Opioid Fraud Collaboration</i></p> <p>Sec. 1150. The department shall coordinate with the department of licensing and regulatory affairs, the department of the attorney general, all appropriate law enforcement agencies, and the Medicaid health plans to reduce fraud related to opioid prescribing within Medicaid, and to address other appropriate recommendations of the prescription drug and opioid abuse task force outlined in its report of October 2015. By October 1 of the current fiscal year, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on steps the department has taken to coordinate with the entities listed in this section and other stakeholders to reduce fraud related to opioid prescribing, and to address other appropriate recommendations of the task force.</p>	<p>Sec. 1150. No changes from current law.</p>		



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	EXECUTIVE	HOUSE	SENATE
<p><i>Opioid Addiction Treatment Education Collaboration</i></p> <p>Sec. 1151. The department shall coordinate with the department of licensing and regulatory affairs, the department of the attorney general, all appropriate law enforcement agencies, and the Medicaid health plans to work with local substance use disorder agencies and addiction treatment providers to help inform Medicaid beneficiaries of all medically appropriate treatment options for opioid addiction when their treating physician stops prescribing prescription opioid medication for pain, and to address other appropriate recommendations of the prescription drug and opioid abuse task force outlined in its report of October 2015. By October 1 of the current fiscal year, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on how the department is working with local substance use disorder agencies and addiction treatment providers to ensure that Medicaid beneficiaries are informed of all available and medically appropriate treatment options for opioid addiction when their treating physician stops prescribing prescription opioid medication for pain, and to address other appropriate recommendations of the task force. The report shall include any potential barriers to medication-assisted treatment, as recommended by the Michigan medication-assisted treatment guidelines, for Medicaid beneficiaries in both office-based opioid treatment and opioid treatment program facility settings</p>	<p>Sec. 1151. No changes from current law.</p>		
<p>NEW SECTION 1152. <i>EXECUTIVE PROPOSED TRANSFER OF SEC. 802 BOILERPLATE RELATED TO MICHIGAN REHABILITATION SERVICES</i></p>	<p>Sec. 802 1152. No changes from current law.</p>		
<p>NEW SECTION 1153. <i>EXECUTIVE PROPOSED TRANSFER OF SEC. 803 BOILERPLATE RELATED TO MICHIGAN REHABILITATION SERVICES</i></p>	<p>Sec. 803 1153. No changes from current law.</p>		



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NEW SECTION 1154. <i>EXECUTIVE PROPOSED TRANSFER OF SEC. 804 BOILERPLATE RELATED TO MICHIGAN REHABILITATION SERVICES</i>	Sec. 804 1154. No changes from current law.		
NEW SECTION 1155. <i>EXECUTIVE PROPOSED TRANSFER OF SEC. 805 BOILERPLATE RELATED TO MICHIGAN REHABILITATION SERVICES</i>	Sec. 805 1155. No changes from current law.		
NEW SECTION 1156. <i>EXECUTIVE PROPOSED TRANSFER OF SEC. 806 BOILERPLATE RELATED TO MICHIGAN REHABILITATION SERVICES</i>	Sec. 806 1156. No changes from current law.		
NEW SECTION 1158. <i>EXECUTIVE PROPOSED TRANSFER OF SEC. 801 BOILERPLATE RELATED TO INDEPENDENT LIVING</i>	Sec. 804 1158. No changes from current law.		



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<p><i>Laboratory Opioid Enhanced Testing</i></p> <p>Sec. 1170. (1) From the funds appropriated in part 1 for laboratory services, the department shall allocate \$1,000,000.00 for enhanced laboratory testing of opioids in cases of drug overdose deaths in order to accurately identify all prescription and nonprescription substances that may have impacted a drug poisoning death. The following provisions apply:</p> <p>(a) The department shall award funds for the following purposes:</p> <p>(i) Through contracts with county local public health departments, to support grants to rural communities and provide funding to participating counties to support the collection and submission by a county medical examiner of toxicological testing of human blood samples for targeted opioid analogs, and up to 5 other nonopioid substances with a potential for public health impact, for cases of overdose or suspected overdoses.</p> <p>(ii) Not more than \$100,000.00 to continue the Michigan opioid rapid testing project with Western Michigan University - Stryker School of Medicine to perform postmortem toxicological testing of human blood samples for targeted opioid analogs, and up to 5 other nonopioid substances with a potential for public health impact, for cases of overdose or suspected overdoses.</p> <p>(b) The department shall explore the development of laboratory capacity to test for natural or synthetic opioid analogs and up to 5 other nonopioid substances with a potential for public health impact. The department shall provide a report by December 1 of the current fiscal year on the requirements and estimated costs to develop this laboratory capacity to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director.</p>	<p>Striking current law.</p>	<p><i>NOTE: Add <u>LABORATORY SERVICES</u> heading if retain or if other laboratory services boilerplate is added.</i></p>	



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<p>(2) Unexpended and unencumbered funds up to a maximum of \$1,000,000.00 general fund/general purpose revenue in part 1 for laboratory services are designated as work project appropriations, and any unencumbered or unallotted funds shall not lapse at the end of the fiscal year and shall be available for expenditures for the enhanced laboratory testing of opioids project under this section until the project has been completed. All of the following are in compliance with section 451a of the management and budget act, 1984 PA 431, MCL 18.1451a:</p> <p>(a) The purpose of the work project is to fund the cost of an enhanced laboratory testing of opioids project as provided by this section.</p> <p>(b) The work project will be accomplished by supporting grants to rural communities and counties, supporting continuation of the Michigan opioid rapid testing project, and exploring the development of laboratory capacity.</p> <p>(c) The total estimated cost of the work project is \$1,000,000.00 of general fund/general purpose revenue.</p> <p>(d) The tentative completion date of the work project is September 30, 2023.</p>	<p>Striking current law.</p>		



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<p><u>DISEASE CONTROL, PREVENTION, AND EPIDEMIOLOGY</u></p> <p><i>Public Health Drinking Water and Childhood Lead Initiatives</i></p> <p>Sec. 1180. From the funds appropriated in part 1 for epidemiology administration and for childhood lead program, the department shall maintain a public health drinking water unit and maintain enhanced efforts to monitor child blood lead levels. The public health drinking water unit shall ensure that appropriate investigations of potential health hazards occur for all community and noncommunity drinking water supplies where chemical exceedances of action levels, health advisory levels, or maximum contaminant limits are identified. The goals of the childhood lead program shall include improving the identification of affected children, the timeliness of case follow-up, and attainment of nurse care management for children with lead exposure, and to achieve a long-term reduction in the percentage of children in this state with elevated blood lead levels.</p>	<p>Sec. 1180. No changes from current law.</p>		
<p><i>Vapor Intrusion Response</i></p> <p>Sec. 1181. From the funds appropriated in part 1 for epidemiology administration, the department shall maintain a vapor intrusion response unit. The vapor intrusion response unit shall assess risks to public health at vapor intrusion sites and respond to vapor intrusion risks where appropriate. The goals of the vapor intrusion response unit shall include reducing the number of residents of this state exposed to toxic substances through vapor intrusion and improving health outcomes for individuals that are identified as having been exposed to vapor intrusion.</p>	<p>Sec. 1181. No changes from current law.</p>		



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<p>Lead Abatement</p> <p>Sec. 1182. (1) From the funds appropriated in part 1 for the healthy homes program, no less than \$1,750,000.00 of general fund/general purpose funds and \$23,480,000.00 of federal funds shall be allocated for lead abatement of homes.</p>	<p>Sec. 1182. (1) No changes from current law.</p>		
<p>(2) By January 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office on the expenditures and activities undertaken by the lead abatement program in the previous fiscal year from the funds appropriated in part 1 for the healthy homes program. The report shall include, but is not limited to, a funding allocation schedule, expenditures by category of expenditure and by subcontractor, revenues received, description of program elements, and description of program accomplishments and progress.</p>	<p>(2) No changes from current law.</p>		
<p>Luce County Allocation</p> <p>Sec. 1183. From the funds appropriated in part 1 for PFAS and environmental contamination response, the department shall appropriate \$50,000.00 to a local health department located in a county with a population between 6,600 and 6,700 according to the most recent federal decennial census for the purpose of purchasing water sampling laboratory equipment. It is the intent of the legislature that this funding be removed in the fiscal year beginning October 1, 2019.</p>	<p>Striking current law.</p>		



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<p><u>LOCAL HEALTH AND ADMINISTRATIVE SERVICES</u></p> <p><i>Reimbursement of Local Costs Related to Informed Consent Law</i></p> <p>Sec. 1220. The amount appropriated in part 1 for implementation of the 1993 additions of or amendments to sections 9161, 16221, 16226, 17014, 17015, and 17515 of the public health code, 1978 PA 368, MCL 333.9161, 333.16221, 333.16226, 333.17014, 333.17015, and 333.17515, shall be used to reimburse local health departments for costs incurred related to implementation of section 17015(18) of the public health code, 1978 PA 368, MCL 333.17015.</p>	<p>Sec. 1220. No changes from current law.</p>	<p><i>NOTE – Section line name reference should be revised if line item is rolled up per Exec Rec.</i></p>	
<p><i>Penalty for Dissolution of Multi-County Local Health Department</i></p> <p>Sec. 1221. If a county that has participated in a district health department or an associated arrangement with other local health departments takes action to cease to participate in such an arrangement after October 1 of the current fiscal year, the department shall have the authority to assess a penalty from the local health department’s operational accounts in an amount equal to no more than 6.25% of the local health department’s essential local public health services funding. This penalty shall only be assessed to the local county that requests the dissolution of the health department.</p>	<p>Sec. 1221. No changes from current law.</p>		



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<p>Essential Local Public Health Services</p> <p>Sec. 1222. (1) Funds appropriated in part 1 for essential local public health services shall be prospectively allocated to local health departments to support immunizations, infectious disease control, sexually transmitted disease control and prevention, hearing screening, vision services, food protection, public water supply, private groundwater supply, and on-site sewage management. Food protection shall be provided in consultation with the department of agriculture and rural development. Public water supply, private groundwater supply, and on-site sewage management shall be provided in consultation with the department of environmental quality.</p>	<p>Sec. 1222. (1) No changes from current law.</p>		
<p>(2) Local public health departments shall be held to contractual standards for the services in subsection (1).</p>	<p>(2) No changes from current law.</p>		
<p>(3) Distributions in subsection (1) shall be made only to counties that maintain local spending in the current fiscal year of at least the amount expended in fiscal year 1992-1993 for the services described in subsection (1).</p>	<p>(3) No changes from current law.</p>		
<p>(4) By December 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director on the planned allocation of the funds appropriated for essential local public health services.</p>	<p>(4) No changes from current law.</p>		
<p>Volunteer Dental Services Program for the Uninsured</p> <p>Sec. 1223. (1) From the funds appropriated in part 1 for dental programs, \$150,000.00 shall be allocated to the Michigan Dental Association for the administration of a volunteer dental program that provides dental services to the uninsured.</p>	<p>Sec. 1223 1315. (1) No changes from current law.</p>		



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<p>(2) By December 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on health policy, the senate and house fiscal agencies, and the state budget office the number of individual patients treated, number of procedures performed, and approximate total market value of those procedures from the previous fiscal year.</p>	<p>Sec. 4223 1315. (2) No changes from current law.</p>		
<p><i>Use of Mobile Dentistry Facility Permit Fee Revenue</i></p> <p>Sec. 1224. The department shall use revenue from mobile dentistry facility permit fees received under section 21605 of the public health code, 1978 PA 368, MCL 333.21605, to offset the cost of the permit program.</p>	<p>Sec. 4224 1316. No changes from current law.</p>		
<p><i>Michigan Health Endowment Fund</i></p> <p>Sec. 1225. The department shall work with the Michigan health endowment fund corporation established under section 653 of the nonprofit health care corporation reform act, 1980 PA 350, MCL 550.1653, to explore ways to fund and evaluate current and future policies and programs.</p>	<p>Sec. 1225. No changes from current law.</p>		



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<p><i>School Children's Healthy Exercise Program</i></p> <p>Sec. 1226. From the funds appropriated in part 1 for health and wellness initiatives, \$1,000,000.00 shall be allocated for a school children's healthy exercise program to promote and advance physical health for school children in kindergarten through grade 8. The department shall recommend model programs for sites to implement that incorporate evidence-based best practices. The department shall grant no less than 1/2 of the funds appropriated in part 1 for before- and after-school programs. The department shall establish guidelines for program sites, which may include schools, community-based organizations, private facilities, recreation centers, or other similar sites. The program format shall encourage local determination of site activities and shall encourage local inclusion of youth in the decision-making regarding site activities. Program goals shall include children experiencing improved physical health and access to physical activity opportunities, the reduction of obesity, providing a safe place to play and exercise, and nutrition education. To be eligible to participate, program sites shall provide a 20% match to the state funding, which may be provided in full, or in part, by a corporation, foundation, or private partner. The department shall seek financial support from corporate, foundation, or other private partners for the program or for individual program sites.</p>	<p>Sec. 1226. No changes from current law, except:</p> <p>"Sec. 1226. From the funds appropriated in part 1 for health and wellness initiatives CHRONIC DISEASE CONTROL AND HEALTH PROMOTION ADMINISTRATION, \$1,000,000.00 shall be allocated... "</p>		



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<p><i>Health and Wellness Initiatives Criteria</i></p> <p>Sec. 1227. The department shall establish criteria for all funds allocated under part 1 for health and wellness initiatives. The criteria must include a requirement that all programs funded be evidence-based and supported by research, include interventions that have been shown to demonstrate outcomes that lower cost and improve quality, and be designed for statewide impact. Preference must be given to programs that utilize the funding as match for additional resources, including, but not limited to, federal sources.</p>	<p>Sec. 1227. The department shall establish criteria for all funds allocated under part 1 for health and wellness initiatives. The criteria must include a requirement that all programs funded be evidence-based and supported by research, include interventions that have been shown to demonstrate outcomes that lower cost and improve quality, and be designed for statewide impact. Preference must be given to programs that utilize the funding as match for additional resources, including, but not limited to, federal sources.</p>		
<p><i>Pediatric Traumatic Brain Injury</i></p> <p>Sec. 1228. From the funds appropriated in part 1 for injury control intervention project, \$1,000,000.00 shall be allocated for implementation of evidence-based, real-time, quality assurance decision support software in the treatment of pediatric traumatic brain injury and for protocols that are to be available to all hospitals providing those trauma services. The funds shall be used to purchase statewide licenses for pediatric traumatic brain injury treatment software and related software services and to offset hospital software integration costs. The department shall seek federal matching funds that may be available for implementation of this section.</p>	<p>Striking current law.</p>		
<p><i>Outstate Public Health Dental Initiative</i></p> <p>Sec. 1229. (1) From the funds appropriated in part 1 for dental programs, \$1,550,000.00 shall be distributed to local health departments who partner with a qualified nonprofit provider of dental services for the purpose of providing high-quality dental homes for seniors, children, and adults enrolled in Medicaid, and low-income uninsured.</p>	<p>Sec. 1229 1317. (1) No changes from current law, except:</p> <p>“ ... \$1,550,000.00 \$550,000.00 ... “</p>		



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<p>(2) In order to be considered a qualified nonprofit provider of dental services, the provider must demonstrate an effective health insurance enrollment process for uninsured patients and demonstrate to the department an effective process of charging patients on a sliding scale based on the patient's ability to pay.</p>	<p>Sec. 4229 1317. (2) No changes from current law.</p>		
<p>(3) Outcomes and performance measures for the program under this section include, but are not limited to, the following:</p> <p>(a) The number of uninsured patients who visited a participating dentist over the prior year, broken down between adults and children.</p> <p>(b) The number of patients assisted with health insurance enrollment, broken down between adults and children.</p> <p>(c) A 5-year trend of the number of uninsured patients being served, broken down between adults and children.</p>	<p>Sec. 4229 1317. (3) PROVIDERS SHALL REPORT TO THE DEPARTMENT BY SEPTEMBER 30 OF THE CURRENT FISCAL YEAR ON OUTCOMES Outcomes and performance measures for the program under this section include INCLUDING, but are not limited to, the following:</p> <p>(a) The number of uninsured patients who visited a participating dentist over the prior year, broken down between adults and children.</p> <p>(b) The number of patients assisted with health insurance enrollment, broken down between adults and children.</p> <p>(c) A 5-year trend of the number of uninsured patients being served, broken down between adults and children.</p>		



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<p><i>School-Based Children’s Dental Health Pilot</i></p> <p>Sec. 1230. By October 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office on estimated costs and timeline to implement a school-based pilot program for children up to grade 7 that may include, but is not limited to, oral health assessments, primary dental services, and referrals. The school-based pilot program shall track the number of children offered and receiving services at the school sites. Program goals shall include improving oral and physical health outcomes for children, improving rates of children receiving dental sealants, and reduction of rates of childhood tooth decay.</p>	<p>Sec. 1230 1318. No changes from current law.</p>		
<p><i>PFAS Contamination and Other Public Health Threats – Local Health Department Response</i></p> <p>Sec. 1231. From the funds appropriated for local health services, up to \$4,750,000.00 shall be allocated for grants to local public health departments to support PFAS response and emerging public health threat activities. A portion of the funding shall be allocated by the department in a collaborative fashion with local public health departments in jurisdictions experiencing PFAS contamination. The remainder of the funding shall be allocated to address infectious and vector-borne disease threats, and other environmental contamination issues such as vapor intrusion, drinking water contamination, and lead exposure. The funding shall be allocated to address issues including, but not limited to, staffing, planning and response, and creation and dissemination of materials related to PFAS contamination issues and other emerging public health issues and threats.</p>	<p>Sec. 1231. No changes from current law.</p>		



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<p><i>Reimbursement for PFAS Environmental Contamination Response</i></p> <p>Sec. 1232. It is the intent of the legislature that the United States Department of Defense shall reimburse the state for costs associated with PFAS and environmental contamination response at military training sites and support facilities.</p>	<p>Sec. 1232. No changes from current law.</p>		
<p><i>Expenditure of Funding for PFAS Contamination Response</i></p> <p>Sec. 1233. General fund and state restricted fund appropriations in part 1 shall not be expended for PFAS and environmental contamination response where federal funding or private grant funding is available for the same expenditures.</p>	<p>Sec. 1233. No changes from current law.</p>		
<p><i>Essential Local Public Health Services Funding Formula Revision</i></p> <p>Sec. 1234. (1) By February 1 of the current fiscal year, the department shall develop and report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a revised distribution formula for the allocation of essential local public health services funding to local health departments.</p>	<p>Striking current law.</p>		
<p>(2) It is the intent of the legislature that the formula developed under this section will be implemented during the fiscal year beginning October 1, 2019.</p>	<p>Striking current law.</p>		



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<p><i>Prison Food Service Kitchen Inspections by Local Health Departments</i></p> <p>Sec. 1235. If funds become available from the department of corrections, funds shall be allocated to local health departments as defined in section 1105 of the public health code, 1978 PA 368, MCL 333.1105, and having those powers and duties as described in part 24 of the public health code, 1978 PA 368, MCL 333.2401 to 333.2498, to evaluate and inspect food service kitchens of prisons operated by the department of corrections. If the site where a prison food service kitchen is in operation does not have an existing local health department with the capabilities to evaluate and inspect the prison food service kitchen, these funds shall be available to a neighboring local health department in order to evaluate and inspect the prison food service kitchen.</p>	Striking current law.		
<p><u>FAMILY, MATERNAL, AND CHILD HEALTH</u></p> <p><i>Pregnancy Planning, Prenatal, and Maternal and Child Health Programs Report</i></p> <p>Sec. 1301. (1) Before April 1 of the current fiscal year, the department shall submit a report to the house and senate fiscal agencies and the state budget director on planned allocations from the amounts appropriated in part 1 for local MCH services, prenatal care outreach and service delivery support, family planning local agreements, and pregnancy prevention programs. Using applicable federal definitions, the report shall include information on all of the following:</p> <p>(a) Funding allocations. (b) Actual number of women, children, and adolescents served and amounts expended for each group for the immediately preceding fiscal year. (c) A breakdown of the expenditure of these funds between urban and rural communities.</p>	Sec. 1301. (1) No changes from current law.		



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(2) The department shall ensure that the distribution of funds through the programs described in subsection (1) takes into account the needs of rural communities.	(2) No changes from current law.		
(3) For the purposes of this section, "rural" means a county, city, village, or township with a population of 30,000 or less, including those entities if located within a metropolitan statistical area.	(3) No changes from current law.		
<p><i>Family Planning Federal Title X Grant Compliance</i></p> <p>Sec. 1302. Each family planning program receiving federal title X family planning funds under 42 USC 300 to 300a-8 shall be in compliance with all performance and quality assurance indicators that the office of population affairs within the United States Department of Health and Human Services specifies in the program guidelines for project grants for family planning services. An agency not in compliance with the indicators shall not receive supplemental or reallocated funds.</p>	<p>Sec. 1302. No changes from current law.</p>		
<p><i>Contract Restrictions for Family Planning Local Agreements with State Funds</i></p> <p>Sec. 1303. The department shall not contract with an organization that provides elective abortions, abortion counseling, or abortion referrals, for services that are to be funded with state restricted or state general fund/general purpose funds appropriated in part 1 for family planning local agreements. An organization under contract with the department shall not subcontract with an organization that provides elective abortions, abortion counseling, or abortion referrals, for services that are to be funded with state restricted or state general fund/general purpose funds appropriated in part 1 for family planning local agreements.</p>	Striking current law.		



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	EXECUTIVE	HOUSE	SENATE
<p><i>Prohibit Use of State Funds for Abortion Counseling, Referrals, or Services</i></p> <p>Sec. 1304. The department shall not use state restricted funds or state general funds appropriated in part 1 in the pregnancy prevention program or family planning local agreements appropriation line items for abortion counseling, referrals, or services.</p>	<p>Sec. 1304. No changes from current law.</p>		
<p><i>Contract Restrictions and Priorities for Family Planning and Pregnancy Prevention</i></p> <p>Sec. 1305. (1) From the funds appropriated in part 1 for family planning local agreements and the pregnancy prevention program, the department shall not contract with or award grants to an entity that engages in 1 or more of the activities described in section 1091(2) of 2002 PA 360, MCL 333.1091, if the entity is located in a county or health district where family planning or pregnancy prevention services are provided by the county, the health district, or a qualified entity that does not engage in any of the activities described in section 1091(2) of 2002 PA 360, MCL 333.1091.</p> <p><i>(Note: Governor's 2018 signing letter states section is considered unenforceable).</i></p>	<p>Striking current law.</p>		
<p>(2) The department shall give priority to counties or health districts where no contracts or grants currently exist for family planning or pregnancy prevention services before contracting with or awarding grants to an entity that engages in 1 or more of the activities described in section 1091(2) of 2002 PA 360, MCL 333.1091, if that entity is located in a county where family planning and pregnancy prevention services are provided by the county, the health district, or another qualified entity that does not engage in the activities described in section 1091(2) of 2002 PA 360, MCL 333.1091.</p> <p><i>(Note: Governor's 2018 signing letter states section is considered unenforceable).</i></p>	<p>Striking current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Population Health

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Alternative Pregnancy and Parenting Support Services Program</i></p> <p>Sec. 1307. From the funds appropriated in part 1 for prenatal care outreach and service delivery support, \$700,000.00 shall be allocated for a pregnancy and parenting support services program, which must promote childbirth, alternatives to abortion, and grief counseling. The department shall establish a program with a qualified contractor that will contract with qualified service providers to provide free counseling, support, and referral services to eligible women during pregnancy through 12 months after birth. As appropriate, the goals for client outcomes shall include an increase in client support, an increase in childbirth choice, an increase in adoption knowledge, an improvement in parenting skills, and improved reproductive health through abstinence education. The contractor of the program shall provide for program training, client educational material, program marketing, and annual service provider site monitoring. The department shall submit a report to the house and senate appropriations subcommittees on the department budget and the house and senate fiscal agencies by April 1 of the current fiscal year on the number of clients served.</p>	<p>Striking current law.</p>		
<p><i>Enhanced Nurse Family Partnership Program Support</i></p> <p>Sec. 1308. From the funds appropriated in part 1 for prenatal care outreach and service delivery support, not less than \$500,000.00 of funding shall be allocated for evidence-based programs to reduce infant mortality including nurse family partnership programs. The funds shall be used for enhanced support and education to nursing teams or other teams of qualified health professionals, client recruitment in areas designated as underserved for obstetrical and gynecological services and other high-need communities, strategic planning to expand and sustain programs, and marketing and communications of programs to raise awareness, engage stakeholders, and recruit nurses.</p>	<p>Sec. 1308. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Population Health

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Maternal and Child Health Contractual Services</i></p> <p>Sec. 1309. The department shall allocate funds appropriated in section 117 of part 1 for family, maternal, and child health according to section 1 of 2002 PA 360, MCL 333.1091.</p>	<p>Sec. 1309. No changes from current law.</p>		
<p><i>Rural Home Visitation Service Provider Contracting</i></p> <p>Sec. 1311. From the funds appropriated in part 1 for prenatal care outreach and service delivery support, not less than \$2,750,000.00 state general fund/general purpose funds shall be allocated for a rural home visit program. Equal consideration shall be given to all eligible evidence-based providers in all regions in contracting for rural home visitation services.</p>	<p>Sec. 1311. No changes from current law.</p>		
<p><i>Fetal Alcohol Syndrome Services</i></p> <p>Sec. 1313. (1) The department shall continue developing an outreach program on fetal alcohol syndrome services, targeting health promotion, prevention, and intervention as described in the Michigan fetal alcohol spectrum disorders 5-year plan 2015-2020.</p>	<p>Sec. 1313. (1) No changes from current law.</p>		
<p>(2) The department shall explore federal grant funding to address prevention services for fetal alcohol syndrome and reduce alcohol consumption among pregnant women.</p>	<p>(2) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Population Health

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>Promotion of Early and Regular Prenatal Care</p> <p>Sec. 1314. The department shall seek to enhance education and outreach efforts that encourage women of childbearing age to seek confirmation at the earliest indication of possible pregnancy and initiate continuous and routine prenatal care upon confirmation of pregnancy. The department shall seek to ensure that department programs, policies, and practices promote prenatal and obstetrical care by doing the following:</p> <p>(a) Supporting access to care. (b) Reducing and eliminating barriers to care. (c) Supporting recommendations for best practices. (d) Encouraging optimal prenatal habits such as prenatal medical visits, use of prenatal vitamins, and cessation of use of tobacco, alcohol, or drugs. (e) Tracking of birth outcomes to study improvements in prevalence of fetal drug addiction, fetal alcohol syndrome, and other preventable neonatal disease. (f) Tracking of maternal increase in healthy behaviors following childbirth.</p>	<p>Sec. 1314. No changes from current law.</p>		
<p>National Brand Peanut Butter as Approved WIC Food Item</p> <p>Sec. 1340. The department shall include national brand peanut butter on the list of approved women, infants, and children special supplemental nutrition program basket items.</p>	<p>Sec. 1340. No changes from current law.</p>		
<p>WIC Eligibility Guidance</p> <p>Sec. 1341. The department and county offices shall utilize income eligibility and verification guidelines established by the Food and Nutrition Service agency of the United States Department of Agriculture in determining eligibility of individuals for the special supplemental nutrition program for women, infants, and children (WIC) as stated in current WIC policy.</p>	<p>Sec. 1341. The department and county offices shall utilize income eligibility and verification guidelines established by the Food and Nutrition Service agency of the United States Department of Agriculture in determining eligibility of individuals for the special supplemental nutrition program for women, infants, and children (WIC) as stated in current WIC policy.</p>		



**DEPARTMENT OF HEALTH AND HUMAN SERVICES
Boilerplate for Population Health**

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Supplemental Boilerplate – Nurse Family Partnership</i></p> <p>(Sec. 461.) From the funds appropriated in part 1 for prenatal care outreach and service delivery support, \$225,000.00 shall be allocated to a nurse family partnership program in a county with a population between 600,000 and 610,000 and \$100,000.00 shall be allocated to a nurse family partnership program in a county with a population between 270,000 and 290,000. Population data shall be according to the most recent federal decennial census.</p> <p><i>Language enacted as Sec. 461 of PA 618 of 2018 (SB 601).</i></p>	Striking current law.		



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

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><u>CHILDREN’S SPECIAL HEALTH CARE SERVICES</u></p> <p><i>Children’s Special Health Care Services Coverage</i></p> <p>Sec. 1360. The department may do 1 or more of the following:</p> <p>(a) Provide special formula for eligible clients with specified metabolic and allergic disorders.</p> <p>(b) Provide medical care and treatment to eligible patients with cystic fibrosis who are 21 years of age or older.</p> <p>(c) Provide medical care and treatment to eligible patients with hereditary coagulation defects, commonly known as hemophilia, who are 21 years of age or older.</p> <p>(d) Provide human growth hormone to eligible patients.</p>	<p>Sec. 1360. No changes from current law.</p>		
<p><i>Expansion of Telemedicine Capacity and Chronic Care</i></p> <p>Sec. 1361. From the funds appropriated in part 1 for medical care and treatment, the department may spend those funds for the continued development and expansion of telemedicine capacity to allow families with children in the children’s special health care services program to access specialty providers more readily and in a more timely manner. The department may spend funds to support chronic complex care management of children enrolled in the children’s special health care services program to minimize hospitalizations and reduce costs to the program while improving outcomes and quality of life.</p>	<p>Sec. 1361. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Aging and Adult Services Agency

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><u>AGING AND ADULT SERVICES AGENCY</u></p> <p><i>Food Access Collaboration</i></p> <p>Sec. 1402. The department may encourage the Food Bank Council of Michigan to collaborate directly with each area agency on aging and any other organizations that provide senior nutrition services to secure the food access of vulnerable seniors.</p>	<p>Sec. 1402. No changes from current law.</p>		
<p><i>Home-Delivered Meals Waiting Lists</i></p> <p>Sec. 1403. (1) By February 1 of the current fiscal year, the aging and adult services agency shall require each region to report to the aging and adult services agency and to the legislature home-delivered meals waiting lists based upon standard criteria. Determining criteria shall include all of the following:</p> <p>(a) The recipient's degree of frailty. (b) The recipient's inability to prepare his or her own meals safely. (c) Whether the recipient has another care provider available. (d) Any other qualifications normally necessary for the recipient to receive home-delivered meals.</p>	<p>Sec. 1403. (1) No changes from current law.</p>		
<p>(2) Data required in subsection (1) shall be recorded only for individuals who have applied for participation in the home-delivered meals program and who are initially determined as likely to be eligible for home-delivered meals.</p>	<p>(2) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Aging and Adult Services Agency

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Area Agency on Aging Allocations and Expenditures Report</i></p> <p>Sec. 1417. The department shall provide to the senate and house appropriations subcommittees on the department budget, senate and house fiscal agencies, and state budget director a report by March 30 of the current fiscal year that contains all of the following:</p> <p>(a) The total allocation of state resources made to each area agency on aging by individual program and administration. (b) Detail expenditure by each area agency on aging by individual program and administration including both state-funded resources and locally funded resources.</p>	<p>Sec. 1417. No changes from current law.</p>		
<p><i>Allocation of \$1.1 Million for Locally-Determined Needs</i></p> <p>Sec. 1421. From the funds appropriated in part 1 for community services, \$1,100,000.00 shall be allocated to area agencies on aging for locally determined needs.</p>	<p>Sec. 1421. No changes from current law.</p>		
<p><i>Elder Abuse Prosecuting Attorney Contract</i></p> <p>Sec. 1422. (1) From the funds appropriated in part 1 for aging and adult services administration, not less than \$300,000.00 shall be allocated for the department to contract with the Prosecuting Attorneys Association of Michigan to provide the support and services necessary to increase the capability of the state's prosecutors, adult protective service system, and criminal justice system to effectively identify, investigate, and prosecute elder abuse and financial exploitation.</p>	<p>Sec. 1422. (1) No changes from current law.</p>		
<p>(2) By March 1 of the current fiscal year, the Prosecuting Attorneys Association of Michigan shall provide a report on the efficacy of the contract to the state budget office, the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices.</p>	<p>(2) No changes from current law.</p>		



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

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Notification from LARA of License Suspension of Care Facility</i></p> <p>Sec. 1425. The department shall coordinate with the department of licensing and regulatory affairs to ensure that, upon receipt of the order of suspension of a licensed adult foster care home, home for the aged, or nursing home, the department of licensing and regulatory affairs shall provide notice to the department, to the house and senate appropriations subcommittees on the department budget, and to the members of the house and senate that represent the legislative districts of the county in which the facility lies.</p>	<p>Sec. 1425. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Medical Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>Report on Office of Inspector General and Third Party Liability Savings</p> <p>Sec. 1505. On a semiannual basis, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office including both of the following:</p> <p>(a) The department's projected annual increase in reimbursement savings and cost offsets that will result from the funds appropriated in part 1 for the office of inspector general and third party liability efforts.</p> <p>(b) The actual increase in reimbursement savings and cost offsets that have resulted from the funds appropriated in part 1 for the office of inspector general and third party liability efforts.</p>	<p>Sec. 1505. On a semiannual basis, BY MARCH 1 OF THE CURRENT FISCAL YEAR, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office including both of the following:</p> <p>(a) The department's projected annual increase in reimbursement savings and cost offsets that will result from the funds appropriated in part 1 for the office of inspector general and third party liability efforts.</p> <p>(b) The actual increase in reimbursement savings and cost offsets that have resulted from the funds appropriated in part 1 for the office of inspector general and third party liability efforts. IN THE PREVIOUS FISCAL YEAR.</p>		
<p>Report on Healthy Michigan Plan Public Assistance Call Center</p> <p>Sec. 1506. The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office quarterly reports on the implementation status of the public assistance call center that include all of the following information:</p> <p>(a) Call volume during the prior quarter.</p> <p>(b) Percentage of calls resolved through the public assistance call center.</p> <p>(c) Percentage of calls transferred to a local department office or other office for resolution.</p>	<p>Sec. 1506. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Medical Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Integrated Services Delivery Enhancement</i></p> <p>Sec. 1507. (1) From the funds appropriated for integrated service delivery in part 1 in the technology supporting integrated service and departmental administration and management line items, the department shall maintain information technology tools and enhance existing systems to improve the eligibility and enrollment process for citizens accessing department administered programs. This information technology system will consolidate beneficiary information, support department caseworker efforts in building a success plan for beneficiaries, and better support department staff in supporting enrollees in assistance programs.</p>	Striking current law.		
<p>(2) Outcomes and performance measures for the initiative under subsection (1) include, but are not limited to, the following:</p> <p>(a) Successful consolidation of data warehouses maintained by the department.</p> <p>(b) The amount of time a department caseworker devotes to data entry when initiating an enrollee application.</p> <p>(c) A reduction in wait times for persons enrolled in assistance programs to speak with department staff and get necessary changes made.</p> <p>(d) A reduction in department caseworker workload.</p>	Striking current law.		
<p><i>Michigan Dental Registry</i></p> <p>Sec. 1508. (1) From the funds appropriated in part 1 for medical services administration, \$500,000.00 is appropriated for the operation and maintenance of the Michigan dental registry in support of the enhanced dental benefit for the Healthy Kids Dental program. Additionally, the department shall explore the expansion of the scope of the Michigan dental registry to enhance the Medicaid adult dental benefit for pregnant women.</p>	Sec. 1508. (1) No changes from current law.		



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

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(2) The department shall monitor childhood caries preventative services delivered to pediatric Medicaid recipients in both medical and dental settings. By September 30 of the current fiscal year, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the results of the program. The report shall include, but not be limited to, all of the following:</p> <p>(a) Comparative data on completed referral rates from pediatric medical providers to dental providers.</p> <p>(b) The reduction of caries in the Medicaid child population.</p> <p>(c) Any associated long-term or short-term cost savings to the Medicaid program.</p>	<p>Striking current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Medical Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Medical Assistance Work Requirement Report</i></p> <p>Sec. 1509. By September 30 of the current fiscal year or 6 months after the implementation of employment-related activity requirements or work requirements for medical assistance from an approved waiver from CMS, whichever date is sooner, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the number of recipients who are noncompliant with the required self-sufficiency goals, an explanation of the actions undertaken, and the number of recipients subject to employment-related activity requirements.</p>	<p>Sec. 1509. (1) By September 30 of the current fiscal year or 6 months after the implementation of employment related activity requirements or work requirements for medical assistance from an approved waiver from CMS, whichever date is sooner, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the IMPLEMENTATION OF EMPLOYMENT-RELATED ACTIVITY REQUIREMENTS FOR MEDICAL ASSISTANCE. THE REPORT SHALL INCLUDE, BUT IS NOT LIMITED TO, THE number of recipients who are noncompliant with the required self-sufficiency goals, an explanation of the actions undertaken, and the number of recipients subject to employment-related activity requirements.</p>		
<p>(2) New Executive Language.</p>	<p>(2) THE DEPARTMENT MAY SATISFY THE REPORTING REQUIREMENTS OF THIS SECTION BY SHARING ONE OR MORE REPORTS REQUIRED BY CMS SHOWING THE NUMBER OF RECIPIENTS WHO ARE NONCOMPLIANT WITH THE REQUIRED SELF-SUFFICIENCY GOALS, AN EXPLANATION OF THE ACTIONS UNDERTAKEN, AND THE NUMBER OF RECIPIENTS SUBJECT TO EMPLOYMENT-RELATED ACTIVITY REQUIREMENTS.</p>		



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

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Long-Term Care Study</i></p> <p>Sec. 1510. (1) From the funds appropriated in part 1 for medical services administration, the department shall match 100% of any private funds, up to \$100,000.00, with state general fund/general purpose revenues for the purpose of contracting for an independent feasibility study and actuarial model of public, private, and public-private hybrid options to help individuals prepare for, access, and afford long-term services and supports. The study must include models for all of the following:</p> <p>(a) An affordable annual long-term care benefit available to all individuals who meet the minimum eligibility of needing assistance with 2 activities of daily living, with the maximum benefit amount to be determined by actuarial analysis.</p> <p>(b) A public-private reinsurance or risk-sharing model, with the purpose of providing a stable and ongoing source of reimbursement to insurers for a portion of their catastrophic long-term care services and supports losses in order to provide additional insurance capacity for the state. The entity would operate as a public-private partnership supporting the private sector's role as the primary risk bearer.</p> <p>(c) A long-term care benefit paid for and open to those that are not currently eligible for the state Medicaid program.</p>	<p>Striking current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Medical Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(2) The awarded contractor shall provide a report to the department on the independent feasibility study and actuarial model that includes all of the following:</p> <p>(a) An analysis of public and private long-term care programs that exist in the state, the participation rates for those programs, and any clear gaps that exist, including, but not limited to, gaps in coverage, affordability, and participation.</p> <p>(b) The expected costs and benefits for participants in a new long-term care benefit program, when accounting for a living wage rate for home care workers and compliance with the fair labor standards act of 1938, 29 USC 201 to 219, the federal regulations in 29 CFR 552 relating to that act, and state labor laws.</p> <p>(c) The total anticipated number of participants.</p> <p>(d) The impact on the current workforce.</p> <p>(e) A recruitment and retention plan to meet anticipated shortage in the workforce due to the increasing aging population.</p> <p>(f) The impact of current services, access to a paid workforce, and affordability of care on family caregivers, including how many family members are providing care to the individual, the impact that providing care has on a family caregiver's job, family caregivers' access to training programs, how many hours of care a family caregiver is providing, the types of services a family caregiver is performing, if the primary caregiver is also caring for a child, and if there are children present in the home who also assist with caring for the aging adult in the home.</p> <p>(g) The projected savings to the state Medicaid program, if any.</p> <p>(h) Legal and financial risks to the state.</p>	<p>Striking current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Medical Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
(3) The department shall provide oversight and direction for the analysis described in subsection (2) and shall convene meetings for interested stakeholders, including consumer and worker representatives, to provide ongoing input on the feasibility study design. The department shall hold not fewer than 3 meetings for stakeholders to comply with the provisions of this subsection, as follows: a meeting before the study begins, a meeting during the study's implementation, and a meeting after the study is completed.	Striking current law.		
(4) The feasibility study and the actuarial analysis that is included in the feasibility study must be completed and submitted to the department no later than 270 days after the start date of the feasibility study. The department shall hold a public hearing presenting its findings. The department shall submit a report, including the director's findings and recommendations based on the feasibility study and actuarial analysis, to the legislature no later than 60 days after the completion of the feasibility study.	Striking current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Medical Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>Sec. 1511. New Executive Language.</p>	<p>SEC. 1511. FROM THE FUNDS APPROPRIATED IN PART 1 FOR HEALTHY MICHIGAN PLAN WORK SUPPORTS, FUNDS SHALL BE ALLOCATED FOR EMPLOYMENT AND TRAINING-RELATED SERVICES AND SUPPORTS TO ASSIST HEALTHY MICHIGAN PLAN BENEFICIARIES TO SECURE AND MAINTAIN TRAINING AND EMPLOYMENT. THE DEPARTMENT MAY ENGAGE THE DEPARTMENT OF TALENT AND ECONOMIC DEVELOPMENT TO COMPLEMENT EXISTING EMPLOYMENT-RELATED SERVICES FOR THE NEW POPULATION. FUNDS MAY ALSO BE USED FOR ADDITIONAL DEPARTMENT FIELD STAFF TO EDUCATE IMPACTED CLIENTS ON REQUIREMENTS AND AVAILABLE SERVICES, MAKE REFERRALS, ASSESS AND ADDRESS BARRIERS TO EMPLOYMENT, AND MANAGE OTHER CASELOAD-RELATED IMPACTS RESULTING FROM THE IMPLEMENTATION OF WORK REQUIREMENTS.</p>		
<p><u>MEDICAL SERVICES</u></p> <p><i>Remedial Services Costs and Medicaid Eligibility</i></p> <p>Sec. 1601. The cost of remedial services incurred by residents of licensed adult foster care homes and licensed homes for the aged shall be used in determining financial eligibility for the medically needy. Remedial services include basic self-care and rehabilitation training for a resident.</p>	<p>Sec. 1601. No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Medical Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Medical Services Buy-In Program</i></p> <p>Sec. 1603. (1) The department may establish a program for individuals to purchase medical coverage at a rate determined by the department.</p> <p>(2) The department may receive and expend premiums for the buy-in of medical coverage in addition to the amounts appropriated in part 1.</p> <p>(3) The premiums described in this section shall be classified as private funds.</p>	<p>Sec. 1603. (1) No changes from current law.</p> <p>(2) No changes from current law.</p> <p>(3) No changes from current law.</p>		
<p><i>Medicaid Protected Income Level</i></p> <p>Sec. 1605. The protected income level for Medicaid coverage determined pursuant to section 106(1)(b)(iii) of the social welfare act, 1939 PA 280, MCL 400.106, shall be 100% of the related public assistance standard.</p>	<p>Sec. 1605. No changes from current law.</p>		
<p><i>Medicaid Eligibility and Patient Pay Amount Deductions for Guardian and Conservator Charges</i></p> <p>Sec. 1606. For the purpose of guardian and conservator charges, the department may deduct up to \$83.00 per month as an allowable expense against a recipient's income when determining medical services eligibility and patient pay amounts.</p>	<p>Sec. 1606. No changes from current law.</p>		
<p><i>Medicaid Presumptive Eligibility for Pregnant Women</i></p> <p>Sec. 1607. (1) An applicant for Medicaid, whose qualifying condition is pregnancy, shall immediately be presumed to be eligible for Medicaid coverage unless the preponderance of evidence in her application indicates otherwise. The applicant who is qualified as described in this subsection shall be allowed to select or remain with the Medicaid participating obstetrician of her choice.</p>	<p>Sec. 1607. (1) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Medical Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
(2) All qualifying applicants shall be entitled to receive all medically necessary obstetrical and prenatal care without preauthorization from a health plan. All claims submitted for payment for obstetrical and prenatal care shall be paid at the Medicaid fee-for-service rate in the event a contract does not exist between the Medicaid participating obstetrical or prenatal care provider and the managed care plan. The applicant shall receive a listing of Medicaid physicians and managed care plans in the immediate vicinity of the applicant's residence.	(2) No changes from current law.		
(3) In the event that an applicant, presumed to be eligible pursuant to subsection (1), is subsequently found to be ineligible, a Medicaid physician or managed care plan that has been providing pregnancy services to an applicant under this section is entitled to reimbursement for those services until such time as they are notified by the department that the applicant was found to be ineligible for Medicaid.	(3) No changes from current law.		
(4) If the preponderance of evidence in an application indicates that the applicant is not eligible for Medicaid, the department shall refer that applicant to the nearest public health clinic or similar entity as a potential source for receiving pregnancy-related services.	(4) No changes from current law.		
(5) The department shall develop an enrollment process for pregnant women covered under this section that facilitates the selection of a managed care plan at the time of application.	(5) No changes from current law.		
(6) The department shall mandate enrollment of women, whose qualifying condition is pregnancy, into Medicaid managed care plans.	(6) No changes from current law.		
(7) The department shall encourage physicians to provide women, whose qualifying condition for Medicaid is pregnancy, with a referral to a Medicaid participating dentist at the first pregnancy-related appointment.	(7) No changes from current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Medical Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>Medicaid Payment Rates</p> <p>Sec. 1611. (1) For care provided to medical services recipients with other third-party sources of payment, medical services reimbursement shall not exceed, in combination with such other resources, including Medicare, those amounts established for medical services-only patients. The medical services payment rate shall be accepted as payment in full. Other than an approved medical services co-payment, no portion of a provider's charge shall be billed to the recipient or any person acting on behalf of the recipient. Nothing in this section shall be considered to affect the level of payment from a third-party source other than the medical services program. The department shall require a nonenrolled provider to accept medical services payments as payment in full.</p>	<p>Sec. 1611. (1) No changes from current law.</p>		
<p>(2) Notwithstanding subsection (1), medical services reimbursement for hospital services provided to dual Medicare/medical services recipients with Medicare part B coverage only shall equal, when combined with payments for Medicare and other third-party resources, if any, those amounts established for medical services-only patients, including capital payments.</p>	<p>(2) No changes from current law.</p>		
<p>Pharmacy Dispensing Fee and Prescription Drug Co-payments</p> <p>Sec. 1620. (1) For fee-for-service Medicaid recipients, the professional dispensing fee for drugs indicated as specialty medications on the Michigan pharmaceutical products list is \$20.02 or the pharmacy's usual or customary cash charge, whichever is less.</p>	<p>Sec. 1620. (1) No changes from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Medical Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(2) For fee-for-service Medicaid recipients, for drugs not indicated as specialty drugs on the Michigan pharmaceutical products list, the professional dispensing fee for medications is as follows:</p> <p>(a) For medications indicated as preferred on the department's preferred drug list, \$10.80 or the pharmacy's usual or customary cash charge, whichever is less.</p> <p>(b) For medications not on the department's preferred drug list, \$10.64 or the pharmacy's usual or customary cash charge, whichever is less.</p> <p>(c) For medications indicated as nonpreferred on the department's preferred drug list, \$9.00 or the pharmacy's usual or customary cash charge, whichever is less.</p>	(2) No changes from current law.		
<p>(3) The department shall require a prescription co-payment for Medicaid recipients not enrolled in the Healthy Michigan plan or with an income less than 100% of the federal poverty level of \$1.00 for a generic drug indicated as preferred on the department's preferred drug list and \$3.00 for a brand-name drug indicated as nonpreferred on the department's preferred drug list, except as prohibited by federal or state law or regulation.</p>	(3) No changes from current law.		
<p>(4) The department shall require a prescription co-payment for Medicaid recipients enrolled in the Healthy Michigan plan with an income of at least 100% of the federal poverty level of \$4.00 for a generic drug indicated as preferred on the department's preferred drug list and \$8.00 for a brand-name drug indicated as nonpreferred on the department's preferred drug list, except as prohibited by federal or state law or regulation.</p>	(4) No changes from current law.		



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<p><i>Specialty Drug Report</i></p> <p>Sec. 1621. By March 1 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office on strategies the department is using to minimize the state cost of specialty drugs. Also, the department may take additional measures in order to further reduce state costs, while also ensuring that appropriate clinical care is being utilized. The report shall also include information on savings generated as a result of these additional measures that may include additional cost sharing, step therapy, and prior authorization.</p>	Striking current law.		
<p><i>Maximum Allowable Cost Drug Pricing</i></p> <p>Sec. 1629. The department shall utilize maximum allowable cost pricing for generic drugs that is based on wholesaler pricing to providers that is available from at least 2 wholesalers who deliver in this state.</p>	Sec. 1629. No changes from current law.		
<p><i>Medical Services Co-payments</i></p> <p>Sec. 1631. (1) The department shall require co-payments on dental, podiatric, and vision services provided to Medicaid recipients, except as prohibited by federal or state law or regulation.</p>	Sec. 1631. (1) No changes from current law.		
<p>(2) Except as otherwise prohibited by federal or state law or regulation, the department shall require Medicaid recipients not enrolled in the Healthy Michigan plan or with an income less than 100% of the federal poverty level to pay not less than the following co-payments:</p> <p>(a) Two dollars for a physician office visit. (b) Three dollars for a hospital emergency room visit. (c) Fifty dollars for the first day of an inpatient hospital stay. (d) Two dollars for an outpatient hospital visit.</p>	(2) No changes from current law.		



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<p>(3) Except as otherwise prohibited by federal or state law or regulation, the department shall require Medicaid recipients enrolled in the Healthy Michigan plan with an income of at least 100% of the federal poverty level to pay the following co-payments:</p> <p>(a) Four dollars for a physician office visit. (b) Eight dollars for a hospital emergency room visit. (c) One hundred dollars for the first day of an inpatient hospital stay. (d) Four dollars for an outpatient hospital visit or any other medical provider visit to the extent allowed by federal or state law or regulation.</p>	(3) No changes from current law.		
<p><i>Institutional Provider Costs Reports</i></p> <p>Sec. 1641. An institutional provider that is required to submit a cost report under the medical services program shall submit cost reports completed in full within 5 months after the end of its fiscal year.</p>	Sec. 1641. (1) No changes from current law.		
<p><i>Supplemental Boilerplate – Nursing Facility Current Asset Value Bed Limit</i></p> <p>Sec. 464. (1) The department of health and human services shall request a state plan amendment by July 1, 2019 to update the Medicaid provider manual policy for the Class I nursing facility current asset value bed limit to use a rolling 15-year history of new construction when establishing a current asset value bed limit for the fiscal year beginning on October 1, 2019.</p>	<p>NEW EXECUTIVE LANGUAGE:</p> <p>SEC. 1645. (1) FOR THE CURRENT FISCAL YEAR, THE DEPARTMENT OF HEALTH AND HUMAN SERVICES SHALL ESTABLISH THE CLASS I NURSING FACILITY CURRENT ASSET VALUE BED LIMIT BASED ON THE ROLLING 15-YEAR HISTORY OF NEW CONSTRUCTION.</p>		



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<p>(2) For the fiscal year beginning October 1, 2020, and subsequent fiscal years, the increase in the current asset value bed limit based on the rolling 15-year history of new construction shall not exceed 4% of the previous fiscal year's limit.</p>	<p>(2) For the fiscal year beginning October 1, 2020, and subsequent fiscal years, the DEPARTMENT OF HEALTH AND HUMAN SERVICES SHALL MODIFY THE CLASS I NURSING FACILITY CURRENT ASSET VALUE BED LIMIT BASED ON THE ROLLING 15-YEAR HISTORY OF NEW CONSTRUCTION. THE increase in the current asset value bed limit based on the rolling 15-year history of new construction shall not exceed 4% of the previous fiscal year's limit FOR THE FISCAL YEAR BEGINNING OCTOBER 1, 2019.</p>		



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<p><i>Nursing Facility Quality Measure Initiative Program</i></p> <p>Sec. 1646. (1) From the funds appropriated in part 1 for long-term care services, the department shall administer a nursing facility quality measure initiative program. The initiative shall be financed through an increase of the quality assurance assessment for nursing homes and hospital long-term care units, and the funds shall be distributed according to the following criteria:</p> <p>(a) The department shall award more dollars to nursing facilities that have a higher CMS 5-star quality measure domain rating, then adjusted to account for both positive and negative aspects of a patient satisfaction survey.</p> <p>(b) A nursing facility with a CMS 5-star quality measure domain star rating of 1 or 2 must file an action plan with the department describing how it intends to use funds appropriated under this section to increase quality outcomes before funding shall be released.</p> <p>(c) The total incentive dollars must reflect the following Medicaid utilization scale:</p> <p>(i) For nursing facilities with a Medicaid participation rate of above 63%, the facility shall receive 100% of the incentive payment.</p> <p>(ii) For nursing facilities with a Medicaid participation rate between 50% and 63%, the facility shall receive 75% of the incentive payment.</p> <p>(iii) For nursing facilities with a Medicaid participation rate of less than 50%, the facility shall receive a payment proportionate to their Medicaid participation rate.</p> <p>(iv) For nursing facilities not enrolled in Medicaid, the facility shall not receive an incentive payment.</p> <p>(d) Facilities designated as special focus facilities are not eligible for any payment under this section.</p> <p>(e) Number of licensed beds.</p>	<p>Striking current law.</p>		



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<p>(2) The department and nursing facility representatives shall evaluate the program's effectiveness on quality, measured by the change in the CMS 5-star quality measure domain rating since the implementation of this section. By March 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices on the findings of the evaluation.</p>	Striking current law.		
<p><i>Health Plan Reimbursement for Hospital ER Service, and Medicaid ER Financial Incentives</i></p> <p>Sec. 1657. (1) Reimbursement for medical services to screen and stabilize a Medicaid recipient, including stabilization of a psychiatric crisis, in a hospital emergency room shall not be made contingent on obtaining prior authorization from the recipient's HMO. If the recipient is discharged from the emergency room, the hospital shall notify the recipient's HMO within 24 hours of the diagnosis and treatment received.</p>	<p>Sec. 1657. (1) No changes from current law.</p>		
<p>(2) If the treating hospital determines that the recipient will require further medical service or hospitalization beyond the point of stabilization, that hospital shall receive authorization from the recipient's HMO prior to admitting the recipient.</p>	(2) No changes from current law.		
<p>(3) Subsections (1) and (2) do not require an alteration to an existing agreement between an HMO and its contracting hospitals and do not require an HMO to reimburse for services that are not considered to be medically necessary.</p>	(3) No changes from current law.		



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<p>Applicable Boilerplate Sections for Medicaid Managed Care</p> <p>Sec. 1659. The following sections of this part are the only ones that shall apply to the following Medicaid managed care programs, including the comprehensive plan, MIChoice long-term care plan, and the mental health, substance use disorder, and developmentally disabled services program: 904, 911, 918, 920, 924, 928, 942, 994, 999, 1008, 1009, 1607, 1657, 1662, 1696, 1699, 1700, 1702, 1763, 1764, 1791, 1806, 1809, 1810, 1820, 1850, 1871, 1875, 1882, and 1888.</p>	<p>Sec. 1659. The following sections of this part are the only ones that shall apply to the following Medicaid managed care programs, including the comprehensive plan, MIChoice long-term care plan, and the mental health, substance use disorder, and developmentally disabled services program: 904, 911, 918, 920, 924, 928, 942, 994, 999, 1008, 1009, 1607, 1657, 1662, 1670, 1673, 1677, 1697, 1696, 1699, 1700, 1702, 1704, 1757, 1763, 1764, 1775, 1791, 1801, 1806, 1809, 1810, 1820, 1846, 1850, 1859, 1862, 1871, 1874, 1875, 1882, and 1888, and 1894.</p>		
<p>Quality Review and Analysis of Health Plan Performance</p> <p>Sec. 1662. (1) The department shall ensure that an external quality review of each contracting HMO is performed that results in an analysis and evaluation of aggregated information on quality, timeliness, and access to health care services that the HMO or its contractors furnish to Medicaid beneficiaries.</p>	<p>Sec. 1662. (1) No changes from current law.</p>		
<p>(2) The department shall require Medicaid HMOs to provide EPSDT utilization data through the encounter data system, and HEDIS well child health measures in accordance with the National Committee for Quality Assurance prescribed methodology.</p>	<p>(2) No changes from current law.</p>		



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(3) The department shall provide a copy of the analysis of the Medicaid HMO annual audited HEDIS reports and the annual external quality review report to the senate and house of representatives appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget director, within 30 days of the department's receipt of the final reports from the contractors.	(3) No changes from current law.		
<i>MiChild Program Eligibility</i> Sec. 1670. (1) The appropriation in part 1 for the MiChild program is to be used to provide comprehensive health care to all children under age 19 who reside in families with income at or below 212% of the federal poverty level, who are uninsured and have not had coverage by other comprehensive health insurance within 6 months of making application for MiChild benefits, and who are residents of this state. The department shall develop detailed eligibility criteria through the medical services administration public concurrence process, consistent with the provisions of this part and part 1.	Sec. 1670. (1) No changes from current law.		
(2) The department may provide up to 1 year of continuous eligibility to children eligible for the MiChild program unless the family fails to pay the monthly premium, a child reaches age 19, or the status of the children's family changes and its members no longer meet the eligibility criteria as specified in the state plan.	(2) No changes from current law.		
(3) The department may make payments on behalf of children enrolled in the MiChild program as described in the MiChild state plan approved by the United States Department of Health and Human Services, or from other medical services.	(3) No changes from current law.		



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<p><i>MiChild Premiums</i></p> <p>Sec. 1673. The department may establish premiums for MiChild eligible individuals in families with income at or below 212% of the federal poverty level. The monthly premiums shall be \$10.00 per month.</p>	<p>Sec. 1673. No changes from current law.</p>		
<p><i>MiChild Benefits</i></p> <p>Sec. 1677. The MiChild program shall provide, at a minimum, all benefits available under the Michigan benchmark plan that are delivered through contracted providers and consistent with federal law, including, but not limited to, the following medically necessary services:</p> <p>(a) Inpatient mental health services, other than substance use disorder treatment services, including services furnished in a state-operated mental hospital and residential or other 24-hour therapeutically planned structured services.</p> <p>(b) Outpatient mental health services, other than substance use disorder services, including services furnished in a state-operated mental hospital and community-based services.</p> <p>(c) Durable medical equipment and prosthetic and orthotic devices.</p> <p>(d) Dental services as outlined in the approved MiChild state plan.</p> <p>(e) Substance use disorder treatment services that may include inpatient, outpatient, and residential substance use disorder treatment services.</p> <p>(f) Care management services for mental health diagnoses.</p> <p>(g) Physical therapy, occupational therapy, and services for individuals with speech, hearing, and language disorders.</p> <p>(h) Emergency ambulance services.</p>	<p>Sec. 1677. No changes from current law.</p>		



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<p>Penalty Money</p> <p>Sec. 1682. (1) In addition to the appropriations in part 1, the department is authorized to receive and spend penalty money received as the result of noncompliance with medical services certification regulations. Penalty money, characterized as private funds, received by the department shall increase authorizations and allotments in the long-term care accounts.</p>	<p>Sec. 1682. (1) No changes from current law.</p>		
<p>(2) Any unexpended penalty money, at the end of the year, shall carry forward to the following year.</p>	<p>(2) No changes from current law.</p>		
<p>Medicaid School-Based Services</p> <p>Sec. 1692. (1) The department is authorized to pursue reimbursement for eligible services provided in Michigan schools from the federal Medicaid program. The department and the state budget director are authorized to negotiate and enter into agreements, together with the department of education, with local and intermediate school districts regarding the sharing of federal Medicaid services funds received for these services. The department is authorized to receive and disburse funds to participating school districts pursuant to such agreements and state and federal law.</p>	<p>Sec. 1693. No changes from current law.</p>		
<p>(2) From the funds appropriated in part 1 for medical services school-based services payments, the department is authorized to do all of the following:</p> <p>(a) Finance activities within the medical services administration related to this project.</p> <p>(b) Reimburse participating school districts pursuant to the fund-sharing ratios negotiated in the state-local agreements authorized in subsection (1).</p> <p>(c) Offset general fund costs associated with the medical services program.</p>	<p>(2) No changes from current law.</p>		



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<p><i>Special Medicaid Reimbursement Appropriation Increase</i></p> <p>Sec. 1693. The special Medicaid reimbursement appropriation in part 1 may be increased if the department submits a medical services state plan amendment pertaining to this line item at a level higher than the appropriation. The department is authorized to appropriately adjust financing sources in accordance with the increased appropriation.</p>	<p>Sec. 1693. No changes from current law.</p>		
<p><i>Poison Control Services</i></p> <p>Sec. 1694. From the funds appropriated in part 1 for special Medicaid reimbursement, \$386,700.00 of general fund/general purpose revenue and any associated federal match shall be distributed for poison control services to an academic health care system that has a high indigent care volume.</p>	<p>Sec. 1694. From the funds appropriated in part 1 for special Medicaid reimbursement, \$386,700.00 \$966,700.00 of general fund/general purpose revenue and any associated federal match shall be distributed for poison control services to an academic health care system that has a high indigent care volume.</p>		
<p><i>Healthy Michigan Plan Applicants</i></p> <p>Sec. 1696. It is the intent of the legislature that, beginning in the fiscal year beginning October 1, 2019, if an applicant for Medicaid coverage through the Healthy Michigan plan received medical coverage in the previous fiscal year through traditional Medicaid, and is still eligible for coverage through traditional Medicaid, the applicant is not eligible to receive coverage through the Healthy Michigan plan.</p>	<p>Striking current law.</p>		
<p><i>Healthy Michigan Plan Dental Networks</i></p> <p>Sec. 1697. The department shall require that Medicaid health plans administering Healthy Michigan plan benefits maintain a network of dental providers in sufficient numbers, mix, and geographic locations throughout their respective service areas in order to provide adequate dental care for Healthy Michigan plan enrollees.</p>	<p>Sec. 1697. No changes from current law.</p>		



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<p><i>Disproportionate Share Hospital (DSH) and Graduate Medical Education (GME) Payments</i></p> <p>Sec. 1699. (1) The department may make separate payments in the amount of \$45,000,000.00 directly to qualifying hospitals serving a disproportionate share of indigent patients and to hospitals providing GME training programs. If direct payment for GME and DSH is made to qualifying hospitals for services to Medicaid recipients, hospitals shall not include GME costs or DSH payments in their contracts with HMOs.</p>	<p>Sec. 1699. (1) No changes from current law.</p>		
<p>(2) The department shall allocate \$45,000,000.00 in DSH funding using the distribution methodology used in fiscal year 2003-2004.</p>	<p>(2) No changes from current law.</p>		



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<p><i>Special Hospital Payments Report</i></p> <p>Sec. 1700. (1) By December 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on the distribution of funding provided, and the net benefit if the special hospital payment is not financed with general fund/general purpose revenue, to each eligible hospital during the previous fiscal year from the following special hospital payments:</p> <p>(a) DSH, separated out by unique DSH pool. (b) GME. (c) Special rural hospital payments provided under section 1866 of this part. (d) Lump-sum payments to rural hospitals for obstetrical care provided under section 1802 of this part.</p>	<p>Sec. 1700. (1) By December 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on the FOLLOWING:</p> <p>(1) THE distribution of funding provided, and the net benefit if the special hospital payment is not financed with general fund/general purpose revenue, to each eligible hospital during the previous fiscal year from the following special hospital payments:</p> <p>(a) DSH, separated out by unique DSH pool. (b) GME. (c) Special rural hospital payments provided under section 1866 1802 (2) of this part. (d) Lump-sum payments to rural hospitals for obstetrical care provided under section 1802 (1) of this part.</p> <p>(2) PENDING AND ENACTED CHANGES TO STATE AND FEDERAL LAW, POLICY, OR LAWSUITS THAT WILL SIGNIFICANTLY IMPACT FUTURE STATEWIDE TOTAL OR INDIVIDUAL HOSPITAL ALLOCATIONS FOR THE SPECIAL PAYMENTS LISTED IN THIS SECTION.</p>		



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<p>(2) By August 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on the projected distribution of funding, and the projected net benefit if the special hospital payment is not financed with general fund/general purpose revenue, to each eligible hospital from the following special hospital payments:</p> <p>(a) DSH, separated out by unique DSH pool. (b) GME. (c) Special rural hospital payments provided under section 1866 of this part. (d) Lump-sum payments to rural hospitals for obstetrical care provided under section 1802 of this part.</p>	Striking current law.		
<p><i>Private Duty Nursing Rate Increase</i></p> <p>Sec. 1702. From the funds appropriated in part 1, the department shall maintain the 15% rate increase provided during the fiscal year ending September 30, 2017 for private duty nursing services for Medicaid beneficiaries under the age of 21. These additional funds must be used to attract and retain highly qualified registered nurses and licensed practical nurses to provide private duty nursing services so that medically frail children can be cared for in the most homelike setting possible.</p>	<p>Sec. 1702. No changes from current law.</p>		
<p><i>Enhanced Dental Benefit for Pregnant Women</i></p> <p>Sec. 1704. (1) From the funds appropriated in part 1 for health plan services, the department shall allocate \$6,000,000.00 to support the enhancement of the Medicaid adult dental benefit for pregnant women enrolled in a Medicaid program.</p>	<p>Sec. 1704. (1) From the funds appropriated in part 1 for health plan services, the department shall allocate \$6,000,000.00 to support the enhancement of MAINTAIN the Medicaid adult dental benefit for pregnant women enrolled in a Medicaid program.</p>		



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(2) The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office by October 1 of the current fiscal year on the steps taken by the department to implement subsection (1).	Striking current law.		
(3) Outcomes and performance measures for the program change under this section include, but are not limited to, the following: (a) The number of pregnant women enrolled in Medicaid who visited a dentist over the prior year. (b) The number of dentists statewide who participate in providing dental services to pregnant women enrolled in Medicaid.	(3) (2) No changes from current law.		
<i>Literacy Development Assessment Tool</i> Sec. 1730. The department shall continue to maintain enhanced assessment tools established in collaboration with the department of education that promote literacy development of pregnant women and new mothers in the maternal infant health program. When possible, the department shall include new fathers of the infants in the literacy promotion efforts that are included in the assessment tools and in the subsequent services provided. The assessment tools shall expand the assessment of maternal and parental literacy and provide support and referrals to resources to enable program participants to achieve an increase in literacy that may contribute to improvements in family health, economic, and life outcomes.	Sec. 1730. No changes from current law.		
<i>Medicaid Applicant's Legal Residence</i> Sec. 1757. The department shall obtain proof from all Medicaid recipients that they are legal United States citizens or otherwise legally residing in this country and that they are residents of this state before approving Medicaid eligibility.	Sec. 1757. No changes from current law.		



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<p><i>Actuarial Services Request for Proposal</i></p> <p>Sec. 1763. During the next contract renewal period, the department shall issue an RFP for a 3-year contract for actuarial services, including, but not limited to, capitation rate setting for Medicaid and the Healthy Michigan plan. The department shall notify the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices on what vendors submitted bids for the contract, which vendor received the contract, the evaluation process, and the criteria used once an award for actuarial services has been made.</p>	<p>Striking current law.</p>		
<p><i>Actuarial Soundness Certification of Medicaid Health Plan Rates</i></p> <p>Sec. 1764. The department shall annually certify whether rates paid to Medicaid health plans and specialty PIHPs are actuarially sound in accordance with federal requirements and shall provide a copy of the rate certification and approval of rates paid to Medicaid health plans and specialty PIHPs within 5 business days after certification or approval to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office. Following the rate certification, the department shall ensure that no new or revised state Medicaid policy bulletin that is promulgated materially impacts the capitation rates that have been certified in a negative manner.</p>	<p>Sec. 1764. No changes from current law.</p>		



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<p>Medicaid Managed Care for Dual Eligibles</p> <p>Sec. 1775. (1) By March 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on progress in implementing the waiver to implement managed care for individuals who are eligible for both Medicare and Medicaid, known as MI Health Link, including, but not limited to, a description of how the department intends to ensure that service delivery is integrated, how key components of the proposal are implemented effectively, and any problems and potential solutions as identified by the ombudsman described in subsection (2).</p>	<p>Sec. 1775. (1) By March 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on progress in implementing the waiver to implement managed care for individuals who are eligible for both Medicare and Medicaid, known as MI Health Link, including, but not limited to, a description of how the department intends to ensure that service delivery is integrated, how key components of the proposal are implemented effectively, and any problems and potential solutions as identified by the ombudsman described in subsection (2).</p>		
<p>(2) The department shall ensure the existence of an ombudsman program that is not associated with any project service manager or provider to assist MI Health Link beneficiaries with navigating complaint and dispute resolution mechanisms and to identify problems in the demonstrations and in the complaint and dispute resolution mechanisms.</p>	<p>(2) No changes from current law.</p>		
<p>Immunization Media Campaign</p> <p>Sec. 1782. Subject to federal approval, from the funds appropriated in part 1 for health plan services, the department shall allocate \$740,000.00 general fund/general purpose plus any available work project funds and federal match through an administered contract with oversight from Medical Services Administration and Population Health. The funds shall be used to support a statewide media campaign for improving this state's immunization rates.</p>	<p>Sec. 1782. No changes from current law.</p>		



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<p><i>Neonatal Services Rate Increase</i></p> <p>Sec. 1791. From the funds appropriated in part 1 for health plan services and physician services, the department shall provide Medicaid reimbursement rates for neonatal services at 75% of the Medicare rate received for those services in effect on the date the services are provided to eligible Medicaid recipients. The current procedural terminology (CPT) codes that are eligible for this reimbursement rate increase are 99468, 99469, 99471, 99472, 99475, 99476, 99477, 99478, 99479, and 99480.</p>	<p>Sec. 1791. No changes from current law</p>		
<p><i>Health Plan Encounter Data Report</i></p> <p>Sec. 1792. By April 30 of the current fiscal year, the department shall evaluate encounter data through the end of the previous fiscal year. By May 30 of the current fiscal year, the department shall report the evaluation results to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, the state budget office, and the Medicaid health plans.</p>	<p>Striking current law.</p>		
<p><i>Distribution of Outpatient DSH Pools</i></p> <p>Sec. 1800. For the distribution of each of the pools within the \$85,000,000.00 outpatient disproportionate share hospital payment, the department shall maintain a formula for the distribution of each pool based on the quality of care, cost, traditional disproportionate share hospital factors such as Medicaid utilization and uncompensated care, and any other factor that the department determines should be considered.</p>	<p>Striking current law.</p>		



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<p>Primary Care Rates</p> <p>Sec. 1801. (1) From the funds appropriated in part 1 for physician services and health plan services, the department shall continue the increase to Medicaid rates for primary care services provided only by primary care providers. For the purpose of this section, a primary care provider is a physician, or a practitioner working under the personal supervision of a physician, who is either licensed under part 170 or part 175 of the public health code, 1978 PA 368, MCL 333.17001 to 333.17084 and 333.17501 to 333.17556, and working as a primary care provider in general practice or board-eligible or certified with a specialty designation of family medicine, general internal medicine, or pediatric medicine, or a provider who provides the department with documentation of equivalency. Providers performing a service and whose primary practice is as a non-primary-care subspecialty is not eligible for the increase. The department shall establish policies that most effectively limit the increase to primary care providers for primary care services only.</p>	<p>Sec. 1801. (1) No changes from current law.</p>		
<p>(2) By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a list of medical specialties and licensed providers that were paid enhanced primary care rates in the fiscal year ending September 30, 2017.</p>	<p>Striking current law.</p>		



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<p><i>Rural Hospital Payments for OB Services</i></p> <p>Sec. 1802. From the funds appropriated in part 1 for hospital services and therapy, \$7,978,300.00 in general fund/general purpose revenue shall be provided as lump-sum payments to hospitals that qualified for rural hospital access payments in fiscal year 2013-2014 and that provide obstetrical care in the current fiscal year. Payment amounts shall be based on the volume of obstetrical care cases and newborn care cases for all such cases billed by each qualified hospital in the most recent year for which data is available. Payments shall be made by January 1 of the current fiscal year.</p>	<p>Sec. 1802. (1) From the funds appropriated in part 1 for hospital services and therapy, \$7,978,300.00 \$4,978,300.00 in general fund/general purpose revenue shall be provided as lump-sum payments to hospitals that qualified for rural hospital access payments in fiscal year 2013-2014 and that provide obstetrical care in the current fiscal year. Payment amounts shall be based on the volume of obstetrical care cases and newborn care cases for all such cases billed by each qualified hospital in the most recent year for which data is available. Payments shall be made by January 1 of the current fiscal year.</p>		



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<p>(2) New Executive Language transferred from Sec. 1866.</p>	<p>Sec. 1866. (1) (2) From the funds appropriated in part 1 for hospital services and therapy and Healthy Michigan plan, \$18,000,000.00 in general fund/general purpose revenue and any associated federal match shall be awarded as rural access payments to hospitals that meet criteria established by the department for services to low-income rural residents. One of the reimbursement components of the distribution formula shall be assistance with labor and delivery services.</p> <p>(2) (A) No hospital or hospital system shall receive more than 10.0% of the total funding referenced in subsection (1)(2).</p> <p>(3) (B) To allow hospitals to understand their rural payment amounts under this section SUBSECTION (2), the department shall provide hospitals with the methodology for distribution under this section SUBSECTION (2) and provide each hospital with its applicable data that are used to determine the payment amounts by August 1 of the current fiscal year. The department shall publish the distribution of payments for the current fiscal year and the immediately preceding fiscal year.</p>		



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<p><i>Portable X-Ray and Ultrasound Provider Type</i></p> <p>Sec. 1803. The department shall establish a Medicaid provider type for the enrollment of providers of portable X-ray and ultrasound services to nursing home and homebound beneficiaries as “portable X-ray and ultrasound providers” under the “Michigan Department of Health and Human Services Current-Typical Provider Type Enrollment Grid”, using provider language substantially similar to Medicare requirements. The department shall treat this service as a covered service. By December 1 of the current fiscal year, the department shall report to the senate and house subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office, on the information required in this section.</p>	Striking current law.		
<p><i>Identification of Medicaid Beneficiaries Who Are Veterans</i></p> <p>Sec. 1804. The department, in cooperation with the department of military and veterans affairs, shall work with the federal public assistance reporting information system to identify Medicaid recipients who are veterans and who may be eligible for federal veterans health care benefits or other benefits.</p>	Sec. 1804. No changes from current law.		



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<p><i>Graduate Medical Education (GME) Quality Data</i></p> <p>Sec. 1805. Hospitals receiving medical services payments for graduate medical education shall submit fully completed quality data to a nonprofit organization with extensive experience in collecting and reporting hospital quality data on a public website. The reporting must utilize consensus-based nationally endorsed standards that meet National Quality Forum-endorsed safe practices. The organization collecting the data must be an organization that uses severity-adjusted risk models and measures that will help patients and payers identify hospital campuses likely to have superior outcomes. The public website shall provide information to allow consumers to compare safe practices by hospital campus, including, but not limited to, perinatal care, hospital-acquired infection, and serious reportable events. Hospitals receiving medical services payments for graduate medical education shall also make their fully completed quality data available on the hospital's website. The department shall withhold 25% of a hospital's graduate medical education payment if the hospital does not submit the data to a qualifying nonprofit organization described in this section by January 1 of the current fiscal year.</p>	<p>Sec. 1805. ACUTE CARE Hospitals receiving medical services payments for graduate medical education shall submit fully completed quality data to a nonprofit organization with extensive experience in collecting and reporting hospital quality data on a public website. The reporting must utilize consensus-based nationally endorsed standards that meet National Quality Forum-endorsed safe practices. The organization collecting the data must be an organization that uses severity-adjusted risk models and measures that will help patients and payers identify hospital campuses likely to have superior outcomes. The public website shall provide information to allow consumers to compare safe practices by hospital campus, including, but not limited to, perinatal care, hospital-acquired infection, and serious reportable events. ACUTE CARE Hospitals receiving medical services payments for graduate medical education shall also make their fully completed quality data available on the hospital's website. The department shall withhold 25% of a hospital's graduate medical education payment if the hospital does not submit the data to a qualifying nonprofit organization described in this section by January 1 of the current fiscal year.</p>		



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<p>Common Formulary for Medicaid Health Plans</p> <p>Sec. 1806. (1) The department shall contractually require the Medicaid health plans to report to the department by February 1 of the current fiscal year on the following:</p> <p>(a) The progress of implementing the Medicaid health plan common formulary.</p> <p>(b) The participation by the Medicaid health plans in the Medicaid health plan common formulary.</p> <p>(c) The timeliness of prior authorization approvals or disapprovals.</p>	<p>Sec. 1806. (1) No changes from current law.</p>		
<p>(2) By March 1 of the current fiscal year, the department shall provide the Medicaid health plan report provided in subsection (1) and identify any areas of inconsistency across the Medicaid health plans' implementation and utilization of the Medicaid health plan common formulary to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office.</p>	<p>(2) No changes from current law.</p>		
<p>(3) The department shall maintain policies and procedures to govern the operations of the Michigan Medicaid health plan common formulary so that the department is able to receive fair and full public participation.</p>	<p>(3) No changes from current law.</p>		



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<p><i>Common Formulary for Medicaid Health Plans Report</i></p> <p>Sec. 1809. The department shall establish separate contract performance standards for Medicaid health plans that adhere to the requirements of section 105d of the social welfare act, 1939 PA 280, MCL 400.105d, associated with the 0.75% and 0.25% capitation withhold. The determination of the performance of the 0.75% capitation withhold is at the discretion of the department but must include recognized concepts such as 1-year continuous enrollment and the HEDIS audited data. The determination of the performance of the 0.25% capitation withhold is at the discretion of the department but must include the utilization of high-value services and discouraging the utilization of low-value services.</p>	<p>Sec. 1809. No changes from current law.</p>		
<p><i>Health Plan Performance Data Reporting</i></p> <p>Sec. 1810. The department shall enhance encounter data reporting processes and develop rules that would make each health plan's encounter data as complete as possible, provide a fair measure of acuity for each health plan's enrolled population for risk adjustment purposes, capitation rate setting, diagnosis-related group rate setting, and research and analysis of program efficiencies while minimizing health plan administrative expense. In advance of the annual rate setting development, Medicaid health plans shall be given at least 60 days to dispute and correct any discarded encounter data before rates are certified. The department shall notify each contracting Medicaid health plan of any encounter data that have not been accepted for the purposes of rate setting.</p>	<p>Striking current law.</p>		



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<p><i>Graduate Medical Education Program Costs</i></p> <p>Sec. 1812. By June 1 of the current fiscal year, and using the most recent available cost reports, the department shall complete a report of all direct and indirect costs associated with residency training programs for each hospital that receives funds appropriated in part 1 for graduate medical education. The report shall be submitted to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office.</p>	<p>Sec. 1812. No changes from current law.</p>		
<p><i>Recognition of Medicaid Health Plan Accreditation</i></p> <p>Sec. 1820. (1) In order to avoid duplication of efforts, the department shall utilize applicable national accreditation review criteria to determine compliance with corresponding state requirements for Medicaid health plans that have been reviewed and accredited by a national accrediting entity for health care services.</p>	<p>Sec. 1820. (1) No changes from current law.</p>		
<p>(2) The department shall continue to comply with state and federal law and shall not initiate an action that negatively impacts beneficiary safety.</p>	<p>(2) No changes from current law.</p>		
<p>(3) As used in this section, "national accrediting entity" means the National Committee for Quality Assurance, the URAC, formerly known as the Utilization Review Accreditation Commission, or other appropriate entity, as approved by the department.</p>	<p>(3) No change from current law.</p>		
<p><i>Telemedicine and Telepsychiatry Use in Underserved Areas</i></p> <p>Sec. 1837. The department shall continue, and expand where appropriate, utilization of telemedicine and telepsychiatry as strategies to increase access to services for Medicaid recipients in medically underserved areas.</p>	<p>Sec. 1837. No changes from current law.</p>		



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<p><i>Graduate Medical Education Priorities</i></p> <p>Sec. 1846. From the funds appropriated in part 1 for graduate medical education, the department shall distribute the funds with an emphasis on the following health care workforce goals:</p> <p>(a) The encouragement of the training of physicians in specialties, including primary care, that are necessary to meet the future needs of residents of this state.</p> <p>(b) The training of physicians in settings that include ambulatory sites and rural locations.</p>	<p>Sec. 1846. No changes from current law.</p>		
<p><i>Eligibility Redetermination by Medicaid Health Plans</i></p> <p>Sec. 1850. The department may allow Medicaid health plans to assist with the redetermination process through outreach activities to ensure continuation of Medicaid eligibility and enrollment in managed care. This may include mailings, telephone contact, or face-to-face contact with beneficiaries enrolled in the individual Medicaid health plan. Health plans may offer assistance in completing paperwork for beneficiaries enrolled in their plan.</p>	<p>Sec. 1850. No changes from current law.</p>		
<p><i>Adult Home Help Mobile Electronic Visit Verification</i></p> <p>Sec. 1851. From the funds appropriated in part 1 for adult home help services, the department shall allocate up to \$150,000.00 state general fund/general purpose revenue plus any associated federal match to develop and deploy a mobile electronic visit verification solution that shall include biometric identity verification to create administrative efficiencies, reduce error, and minimize fraud. The development of the solution shall be predicated on input from the results of the 2017 stakeholder survey.</p>	<p>Striking current law.</p>		



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<p>Unused PACE Slots</p> <p>Sec. 1855. From the funds appropriated in part 1 for program of all-inclusive care for the elderly (PACE), to the extent that funding is available in the PACE line item and unused program slots are available, the department may do the following:</p> <p>(a) Increase the number of slots for an already-established local PACE program if the local PACE program has provided appropriate documentation to the department indicating its ability to expand capacity to provide services to additional PACE clients.</p> <p>(b) Suspend the 10 member per month individual PACE program enrollment increase cap in order to allow unused and unobligated slots to be allocated to address unmet demand for PACE services.</p>	Striking current law.		
<p>Hospice Room and Board Payments</p> <p>Sec. 1856. (1) From the funds appropriated in part 1 for hospice services, \$3,318,000.00 shall be expended to provide room and board for Medicaid recipients who meet hospice eligibility requirements and receive services at Medicaid enrolled hospice residences in this state. The department shall distribute funds through grants based on the total beds located in all eligible residences that have been providing these services as of October 1, 2017. Any eligible grant applicant may inform the department of their request to reduce the grant amount allocated for their residence and the funds shall be distributed proportionally to increase the total grant amount of the remaining grant-eligible residences. Grant amounts shall be paid out monthly with 1/12 of the total grant amount distributed each month to the grantees.</p>	Striking current law.		



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<p>(2) By September 15 of the current fiscal year, each Medicaid-enrolled hospice with a residence that receives funds under this section shall provide a report to the department on the utilization of the grant funding provided in subsection (1). The report shall be provided in a format prescribed by the department and shall include the following:</p> <p>(a) The number of patients served. (b) The number of days served. (c) The daily room and board rates for the patients served. (d) If there is not sufficient funding to cover the total room and board need, the number of patients who did not receive care due to insufficient grant funding.</p>	Striking current law.		
<p>(3) If there is funding remaining at the end of the current fiscal year, the Medicaid-enrolled hospice with a residence shall return funding to the state.</p>	Striking current law.		
<p><i>Managed Care Long-Term Support Services</i></p> <p>Sec. 1857. By July 1 of the current fiscal year, the department shall explore the implementation of a managed care long-term support service.</p>	Striking current law.		



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<p><i>Pharmaceutical Carve Out Report</i></p> <p>Sec. 1858. By April 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget and the senate and house fiscal agencies on all of the following elements related to the current Medicaid pharmacy carve-out of pharmaceutical products as provided for in section 109h of the social welfare act, 1939 PA 280, MCL 400.109h:</p> <p>(a) The number of prescriptions paid by the department during the previous fiscal year and for the fiscal year ending September 30, 2017.</p> <p>(b) The total amount of expenditures for prescriptions paid by the department during the previous fiscal year and for the fiscal year ending September 30, 2017.</p> <p>(c) The number of and total expenditures for prescriptions paid for by the department for generic equivalents during the previous fiscal year and for the fiscal year ending September 30, 2017.</p>	<p>Sec. 1858. By April 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget and the senate and house fiscal agencies on all of the following elements related to the current Medicaid pharmacy carve-out of pharmaceutical products as provided for in section 109h of the social welfare act, 1939 PA 280, MCL 400.109h:</p> <p>(a) The number of prescriptions paid by the department during the previous fiscal year and for the fiscal year ending September 30, 2017.</p> <p>(b) The total amount of expenditures for prescriptions paid by the department during the previous fiscal year and for the fiscal year ending September 30, 2017.</p> <p>(c) The number of and total expenditures for prescriptions paid for by the department for generic equivalents during the previous fiscal year and for the fiscal year ending September 30, 2017.</p>		



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<p><i>Medicaid Research Activities</i></p> <p>Sec. 1859. The department shall partner with the Michigan Association of Health Plans (MAHP) and Medicaid health plans to develop and implement strategies for the use of information technology services for Medicaid research activities. The department shall make available state medical assistance program data, including Medicaid behavioral data, to MAHP and Medicaid health plans or any vendor considered qualified by the department for the purpose of research activities consistent with this state's goals of improving health; increasing the quality, reliability, availability, and continuity of care; and reducing the cost of care for the eligible population of Medicaid recipients.</p>	<p>Sec. 1859. No changes from current law.</p>		
<p><i>Healthy Michigan Plan Co-Pay and Premium Report</i></p> <p>Sec. 1860. By March 1 of the current fiscal year, the department shall provide a report to the senate and house appropriations subcommittees, the senate and house fiscal agencies, and the state budget office on uncollected co-pays and premiums in the Healthy Michigan plan. The report shall include information on the number of participants who have not paid their co-pays and premiums, the total amount of uncollected co-pays and premiums, and steps taken by the department and health plans to ensure greater collection of co-pays and premiums.</p>	<p>Sec. 1860. No changes from current law.</p>		



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<p><i>Nonemergency Medical Transportation Pilot</i></p> <p>Sec. 1861. From the funds appropriated in part 1 for transportation, the department shall maintain the previous fiscal year increase in the number of counties in which a local public transportation entity is the primary administrator of the Medicaid nonemergency transportation benefit. The department shall use a nonprofit transportation brokerage already operating in the state to carry out the requirements of this section. The purpose of the program is to improve Medicaid beneficiary access to care, reduce the number of missed physician appointments by Medicaid beneficiaries, and reduce time spent by caseworkers facilitating nonemergency transportation for Medicaid beneficiaries. Performance goals include an increase in utilization of local public transportation, a reduction in the rate of trips reported as missed to no more than 0.5%, and the successful collection of data on program utilization, access, and beneficiary satisfaction.</p>	Striking current law.		
<p><i>Obstetrical Rates</i></p> <p>Sec. 1862. From the funds appropriated in part 1, the department shall maintain payment rates for Medicaid obstetrical services at 95% of Medicare levels effective October 1, 2014.</p>	Sec. 1862. No changes from current law.		
<p><i>Rural Hospital Access Payments</i></p> <p>Sec. 1866. (1) From the funds appropriated in part 1 for hospital services and therapy and Healthy Michigan plan, \$18,000,000.00 in general fund/general purpose revenue and any associated federal match shall be awarded as rural access payments to hospitals that meet criteria established by the department for services to low-income rural residents. One of the reimbursement components of the distribution formula shall be assistance with labor and delivery services.</p>	Striking current law. [See Sec. 1802(2).]		



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(2) No hospital or hospital system shall receive more than 10.0% of the total funding referenced in subsection (1).	Striking current law. [See Sec. 1802(2).]		
(3) To allow hospitals to understand their rural payment amounts under this section, the department shall provide hospitals with the methodology for distribution under this section and provide each hospital with its applicable data that are used to determine the payment amounts by August 1 of the current fiscal year. The department shall publish the distribution of payments for the current fiscal year and the immediately preceding fiscal year.	Striking current law. [See Sec. 1802(2).]		
<i>Psychotropic Medicine Best Practices Workgroup</i> Sec. 1867. (1) The department shall continue a workgroup that includes psychiatrists, other relevant prescribers, and pharmacists to identify best practices and to develop a protocol for psychotropic medications. Any changes proposed by the workgroup shall protect a Medicaid beneficiary's current psychotropic pharmaceutical treatment regimen by not requiring a physician currently prescribing any treatment to alter or adjust that treatment.	Sec. 1867. (1) No changes from current law.		
(2) By March 1 of the current fiscal year, the department shall provide the workgroup's recommendations to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office.	Striking current law.		



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<p><i>MIDocs Consortium</i></p> <p>Sec. 1870. (1) From the funds appropriated in part 1 for hospital services and therapy, the department shall appropriate \$5,000,000.00 in general fund/general purpose revenue plus any contributions from public entities, up to \$5,000,000.00, and any associated federal match to the MiDocs consortium to create new primary care residency slots in underserved communities. The new primary care residency slots must be in 1 of the following specialties: family medicine, general internal medicine, general pediatrics, general OB-GYN, psychiatry, or general surgery.</p>	<p>Sec. 1870. (1) From the funds appropriated in part 1 for hospital services and therapy, the department shall appropriate \$5,000,000.00 \$1,300,000.00 in general fund/general purpose revenue plus any contributions from public entities, up to \$5,000,000.00, and any associated federal match to the MiDocs consortium to create new primary care residency slots in underserved communities. The new primary care residency slots must be in 1 of the following specialties: family medicine, general internal medicine, general pediatrics, general OB-GYN, psychiatry, or general surgery.</p>		
(2) The department shall seek any necessary approvals from CMS to allow the department to implement the program described in this section.	(2) No changes from current law.		
(3) Assistance with repayment of medical education loans, loan interest payments, or scholarships provided by MiDocs shall be contingent upon a minimum 2-year commitment to practice in an underserved community in this state post-residency and an agreement to forego any sub-specialty training for at least 2 years post-residency.	(3) No changes from current law.		
(4) The MiDocs shall work with the department to integrate the Michigan inpatient psychiatric admissions discussion (MIPAD) recommendations and, when possible, prioritize training opportunities in state psychiatric hospitals and community mental health organizations.	(4) No changes from current law.		
(5) In collaboration with the Michigan Health Council, the MiDocs consortium shall reserve at least 3 residency slots per class to be used for the Michigan early primary care incentive program.	Striking current law.		



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<p>(6) The department shall create a MiDocs initiative advisory council to help support implementation of the program described in this section, and provide oversight. The advisory council shall be composed of the MiDocs consortium, the Michigan Area Health Education Centers, the Michigan Primary Care Association, the Michigan Center for Rural Health, the Michigan Academy of Family Physicians, and any other appointees designated by the department.</p>	<p>(6) (5) No changes from current law.</p>		
<p>(7) By September 1 of the current fiscal year, MiDocs shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office, on the following:</p> <p>(a) Audited financial statement of per-resident costs. (b) Education and clinical quality data. (c) Roster of trainees, including areas of specialty and locations of training. (d) Medicaid revenue by training site.</p>	<p>(7) (6) No changes from current law.</p>		
<p>(8) Outcomes and performance measures for this program include, but are not limited to, the following:</p> <p>(a) Increasing this state's ability to recruit, train, and retain primary care physicians and other select specialty physicians in underserved communities. (b) Maximizing training opportunities with community health centers, rural critical access hospitals, solo or group private practice physician practices, schools, and other community-based clinics, in addition to required rotations at inpatient hospitals. (c) Increasing the number of residency slots for family medicine, general internal medicine, general pediatrics, general OB-GYN, psychiatry, and general surgery.</p>	<p>(8) (7) No changes from current law.</p>		



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<p>(9) Unexpended and unencumbered funds up to a maximum \$5,000,000.00 in general fund/general purpose revenue plus any contributions from public entities, up to \$5,000,000.00, and any associated federal match remaining in accounts appropriated in part 1 for hospital services and therapy are designated as work project appropriations, and any unencumbered or unallotted funds shall not lapse at the end of the fiscal year and shall be available for expenditures for the MiDocs consortium to create new primary care residency slots in underserved communities under this section until the work project has been completed. All of the following are in compliance with section 451a(1) of the management and budget act, 1984 PA 431, MCL 18.1451a:</p> <p>(a) The purpose of the work project is to fund the cost of the MiDocs consortium to create new primary care residency slots in underserved communities.</p> <p>(b) The work project will be accomplished by contracting with the MiDocs consortium to oversee the creation of new primary care residency slots.</p> <p>(c) The total estimated completion cost of the work project is \$28,129,400.00.</p> <p>(d) The tentative completion date is September 30, 2023.</p>	<p>(9) (8) Unexpended and unencumbered funds up to a maximum \$5,000,000.00 \$1,300,000.00 in general fund/general purpose revenue plus any contributions from public entities, up to \$5,000,000.00, and any associated federal match remaining in accounts appropriated in part 1 for hospital services and therapy are designated as work project appropriations, and any unencumbered or unallotted funds shall not lapse at the end of the fiscal year and shall be available for expenditures for the MiDocs consortium to create new primary care residency slots in underserved communities under this section until the work project has been completed. All of the following are in compliance with section 451a(1) of the management and budget act, 1984 PA 431, MCL 18.1451a:</p> <p>(a) The purpose of the work project is to fund the cost of the MiDocs consortium to create new primary care residency slots in underserved communities.</p> <p>(b) The work project will be accomplished by contracting with the MiDocs consortium to oversee the creation of new primary care residency slots.</p> <p>(c) The total estimated completion cost of the work project is \$28,129,400.00 \$12,600,000.00.</p> <p>(d) The tentative completion date is September 30, 2023 2024.</p>		



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<p><i>Healthy Michigan Plan Healthy Behaviors Incentives</i></p> <p>Sec. 1871. The funds appropriated in part 1 for the Healthy Michigan plan healthy behaviors incentives program shall only provide reductions in cost-sharing responsibilities and shall not include other financial rewards such as gift cards.</p>	<p>Sec. 1871. No changes from current law.</p>		
<p><i>Personal Care Services Rate Increase</i></p> <p>Sec. 1872. From the funds appropriated in part 1 for personal care services, beginning October 1, 2018, the department shall increase the monthly Medicaid personal care supplement paid to adult foster care facilities and homes for the aged that provide personal care services to Medicaid recipients by \$32.00.</p>	<p>Sec. 1872. From the funds appropriated in part 1 for personal care services, beginning October 1, 2018, the department shall increase MAINTAIN the monthly Medicaid personal care supplement paid to adult foster care facilities and homes for the aged that provide personal care services to Medicaid recipients by \$32.00 IN PLACE DURING THE PREVIOUS FISCAL YEAR.</p>		
<p><i>Nursing Facility Transition Initiative</i></p> <p>Sec. 1873. From the funds appropriated in part 1 for long-term care services, the department may allocate up to \$3,700,000.00 for the purpose of outreach and education to nursing home residents and the coordination of housing in order to move out of the facility. In addition, any funds appropriated shall be used for other quality improvement activities of the program. The department shall consider working with all relevant stakeholders to develop a plan for the ongoing sustainability of the nursing facility transition initiative.</p>	<p>Sec. 1873. No changes from current</p>		



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<p><i>Program of All-Inclusive Care for the Elderly (PACE) Inclusion</i></p> <p>Sec. 1874. The department shall ensure, in counties where program of all-inclusive care for the elderly or PACE services are available, that the program of all-inclusive care for the elderly (PACE) is included as an option in all options counseling and enrollment brokering for aging services and managed care programs, including, but not limited to, Area Agencies on Aging, centers for independent living, and the MiChoice home and community-based waiver. Such options counseling must include approved marketing and discussion materials.</p>	<p>Sec. 8. 1874. No changes from current law.</p>		
<p><i>Prior Authorization for Certain Drugs</i></p> <p>Sec. 1875. (1) The department and its contractual agents may not subject Medicaid prescriptions to prior authorization procedures during the current fiscal year if that drug is carved out or is not subject to prior authorization procedures as of May 9, 2016, and is generally recognized in a standard medical reference or the American Psychiatric Association's Diagnostic and Statistical Manual for the Treatment of a Psychiatric Disorder.</p>	<p>Sec. 1875. (1) No changes from current law.</p>		
<p>(2) The department and its contractual agents may not subject Medicaid prescriptions to prior authorization procedures during the current fiscal year if that drug is carved out or is not subject to prior authorization procedures as of May 9, 2016 and is a prescription drug that is generally recognized in a standard medical reference for the treatment of human immunodeficiency virus or acquired immunodeficiency syndrome, epilepsy or seizure disorder, or organ replacement therapy.</p>	<p>(2) No changes from current law.</p>		



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<p>(3) As used in this section, "prior authorization" means a process implemented by the department or its contractual agents that conditions, delays, or denies delivery or particular pharmacy services to Medicaid beneficiaries upon application of predetermined criteria by the department or its contractual agents to those pharmacy services. The process of prior authorization often requires that a prescriber do 1 or both of the following:</p> <p>(a) Obtain preapproval from the department or its contractual agents before prescribing a given drug.</p> <p>(b) Verify to the department or its contractual agents that the use of a drug prescribed for an individual meets predetermined criteria from the department or its contractual agents for a prescription drug that is otherwise available under the Medicaid program in this state.</p>	<p>(3) No changes from current law.</p>		



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	EXECUTIVE	HOUSE	SENATE
<p>Hepatitis C Tracking</p> <p>Sec. 1878. By March 1 of the current fiscal year, the department shall provide a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on hepatitis C tracking data. At a minimum, the report shall include information on the following for individuals treated with Harvoni or any other treatment used to cure hepatitis C during the current fiscal year or a previous fiscal year:</p> <p>(a) The total number of people treated broken down by those treated through traditional Medicaid and those treated through the Healthy Michigan plan.</p> <p>(b) The total cost of treatment.</p> <p>(c) The total cost of treatment broken down by those treated through traditional Medicaid and those treated through the Healthy Michigan plan.</p> <p>(d) The cure rate broken down by Metavir Score, genotype, Medicaid match rate, and drug used during treatment.</p> <p>(e) The reinfection rate broken down by Metavir Score, genotype, Medicaid match rate, and drug used during treatment.</p>	<p>Sec. 1878. No change from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Medical Services

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Michigan Health Information Network Shared Services Costs</i></p> <p>Sec. 1882. By December 31 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office, documentation of the expenses incurred during the immediate preceding fiscal year by Medicaid health plans and PIHPs for the purpose of meeting the contractual requirements to join the Michigan Health Information Network Shared Services and incentivizing providers to become members of the Health Information Exchange Qualified Organization. The report should also include an estimation of the expenses to be incurred in the current fiscal year by Medicaid health plans and PIHPs for the same purpose of meeting their contractual obligations.</p>	Striking current law.		
<p><i>Contract Performance Standards</i></p> <p>Sec. 1888. The department shall establish contract performance standards associated with the capitation withhold provisions for Medicaid health plans at least 3 months in advance of the implementation of those standards. The determination of whether performance standards have been met shall be based primarily on recognized concepts such as 1-year continuous enrollment and the healthcare effectiveness data and information set, HEDIS, audited data.</p>	Sec. 1888. No changes from current law.		
<p><i>Healthy Kids Dental Program Report</i></p> <p>Sec. 1894. (1) By July 1 of the current fiscal year, the department shall provide a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on outcomes and performance measures of the Healthy Kids Dental program.</p>	Sec. 1894. (1) No changes from current law.		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(2) Outcomes and performance measures for the Healthy Kids Dental program include, but are not limited to, the following:</p> <p>(a) The number of children enrolled in the Healthy Kids Dental program who visited the dentist during the previous fiscal year.</p> <p>(b) The number of dentists who will accept payment from the Healthy Kids Dental program.</p> <p>(c) The annual change in dental utilization of children enrolled in the Healthy Kids Dental program.</p>	(2) No changes from current law.		
<p>Supplemental Boilerplate – Beaumont Health Psychiatric Residency Program</p> <p>Sec. 462. From the funds appropriated in part 1 for hospital services and therapy, the department of health and human services shall appropriate \$3,000,000.00 general fund/general purpose revenue and any associated federal match to a nonprofit Michigan health system organized under the laws of this state that is exempt from federal income tax under section 501(c)(3) of the internal revenue code of 1986, 26 USC 501 that operates not less than 3 licensed adult psychiatric inpatient programs located in counties with a population not less than 1,000,000 and with a planned new hospital dedicated to mental health located in a city with a population between 98,000 and 98,500 according to the most recent decennial census for the purpose of supporting a new psychiatric residency training program.</p>	Striking current law.		
<p>Supplemental Boilerplate – Poison Control</p> <p>Sec. 463. From the funds appropriated in part 1 for special Medicaid reimbursement, \$580,000.00 of general fund/general purpose revenue shall be distributed for poison control services to an academic health care system that has a high indigent care volume.</p>	<p>Striking current law.</p> <p>[See Sec. 1694.]</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Information Technology

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><u>INFORMATION TECHNOLOGY</u></p> <p><i>Information Technology Expansion and Integrated Service Projects Report</i></p> <p>Sec. 1901. (1) The department shall provide a report on a semiannual basis to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office all of the following information:</p> <p>(a) The process used to define requests for proposals for each expansion of information technology projects, including timelines, project milestones, and intended outcomes.</p> <p>(b) If the department decides not to contract the services out to design and implement each element of the information technology expansion, the department shall submit its own project plan that includes, at a minimum, the requirements in subdivision (a).</p> <p>(c) A recommended project management plan with milestones and time frames.</p> <p>(d) The proposed benefits from implementing the information technology expansion, including customer service improvement, form reductions, potential time savings, caseload reduction, and return on investment.</p> <p>(e) Details on the implementation of the integrated service delivery project, and the progress toward meeting the outcomes and performance measures listed in section 1507(2) of this part.</p>	<p>Sec. 1901. (1) No Change from current law.</p>		
<p>(2) Once an award for an expansion of information technology is made, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a projected cost of the expansion broken down by use and type of expense.</p>	<p>(2) No Change from current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Michigan Medicaid Information System Project Revenue</i></p> <p>Sec. 1902. From the funds appropriated in part 1 for the Michigan Medicaid information system (MMIS) line item, private revenue may be received from and allocated for other states interested in participating as part of the broader MMIS initiative. By March 1 of the current fiscal year, the department shall provide a report on the use of MMIS by other states for the previous fiscal year, including a list of states, type of use, and revenue and expenditures related to the agreements with the other states to use the MMIS. The report shall be provided to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office.</p>	<p>Sec. 1902. No Change from current law.</p>		
<p><i>Michigan Statewide Automated Child Welfare Information System (MiSACWIS) Reports</i></p> <p>Sec. 1903. (1) The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by November 1 of the current fiscal year the status of an implementation plan regarding the appropriation in part 1 to modernize the MiSACWIS. The report shall include, but not be limited to, efforts to bring the system in compliance with the settlement and other federal guidelines set forth by the United States Department of Health and Human Services Administration for Children and Families.</p>	<p>Sec. 1903. (1) No Change from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

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FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p>(2) The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by November 1 of the current fiscal year a status report on the planning, implementation, and operation, regardless of the current operational status, regarding the appropriation in part 1 to implement the MiSACWIS. The report shall provide details on the planning, implementation, and operation of the system, including, but not limited to, all of the following:</p> <p>(a) Areas where implementation went as planned. (b) The number of known issues. (c) The average number of help tickets submitted per day. (d) Any additional overtime or other staffing costs to address known issues and volume of help tickets. (e) Any contract revisions to address known issues and volume of help tickets. (f) Other strategies undertaken to improve implementation. (g) Progress developing cross-system trusted data exchange with MiSACWIS. (h) Progress in moving away from a statewide automated child welfare information system (SACWIS) to a comprehensive child welfare information system (CCWIS). (i) Progress developing and implementing a program to monitor data quality. (j) Progress developing and implementing custom integrated systems for private agencies. (k) A list of all change orders, planned or in progress. (l) The status of all change orders, planned or in progress. (m) The estimated costs for all planned change orders. (n) The estimated and actual costs for all change orders in progress.</p>	<p>(2) No Change from current law.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES Boilerplate for Information Technology

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Child Care Fund (CCF) County Partial Reimbursements Requirement</i></p> <p>Sec. 1904. From the funds appropriated in part 1 for information technology services and projects, the department shall make child care fund reimbursements to counties for undisputed charges within 45 business days of the receipt of the required forms and documentation. The department shall notify a county within 15 business days of a disputed reimbursement request. The department shall reimburse for corrected charges within 45 business days of a properly corrected submission.</p>	<p>Sec. 598. From the funds appropriated in part 1 for information technology services and projects, the department shall make PARTIAL child care fund reimbursements to counties for undisputed charges SHALL BE MADE within 45 business days of the receipt of the required forms and documentation. The department shall notify a county within 15 business days of a disputed reimbursement request. The department shall reimburse for corrected charges within 45 business days of a properly corrected submission BY THE COUNTY.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for Information Technology

FY 2018-19 CURRENT LAW	FY 2019-20		
	EXECUTIVE	HOUSE	SENATE
<p><i>Information Technology Spending Report</i></p> <p>Sec. 468. (1) Beginning February 1, 2019 and monthly thereafter, the department of health and human services shall report to the senate and house appropriation subcommittees on health and human services, the senate and house fiscal agencies, and the state budget office on all of the following:</p> <p>(a) Fiscal year-to-date information technology spending for the fiscal year ending September 30, 2019 by service and project and by line item appropriation.</p> <p>(b) Planned information technology spending for the remainder of the fiscal year ending September 30, 2019 by service and project and by line item appropriation.</p> <p>(c) Total fiscal year-to-date information technology spending and planned spending for the fiscal year ending September 30, 2019 by service and project and by line item appropriation.</p> <p>(2) As used in subsection (1), "project" means all of, but not limited to, the following major projects:</p> <p>(a) Community health automated Medicaid processing system (CHAMPS).</p> <p>(b) Bridges and MiBridges eligibility determination.</p> <p>(c) Michigan statewide automated child welfare information system (MiSACWIS).</p> <p>(d) Integrated service delivery.</p> <p>(3) By April 30, 2019, the department of health and human services, in coordination with the department of technology, management, and budget, shall provide to the senate and house appropriation subcommittees on health and human services, the senate and house fiscal agencies, and the state budget office a 5-year strategic plan for information technology services and projects for the department of health and human services. The strategic plan shall identify any scheduled changes in the federal and state shares of costs related to information technology services and projects over the 5-year period.</p>	<p>Sec. 468 250. Renumbered and moved to general sections.</p>		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for One-Time Basis Only Appropriations

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><u>ONE-TIME APPROPRIATIONS</u></p> <p><i>Drinking Water Declaration of Emergency</i></p> <p>Sec. 1905. From the funds appropriated in part 1 for the drinking water declaration of emergency, the department shall allocate funds to address needs in a city in which a declaration of emergency was issued because of drinking water contamination. These funds may support, but are not limited to, the following activities:</p> <p>(a) Nutrition assistance, nutritional and community education, food bank resources, and food inspections.</p> <p>(b) Epidemiological analysis and case management of individuals at risk of elevated blood lead levels.</p> <p>(c) Support for child and adolescent health centers, children's healthcare access program, and pathways to potential programming.</p> <p>(d) Nursing services, breastfeeding education, evidence-based home visiting programs, intensive services, and outreach for children exposed to lead coordinated through local community mental health organizations.</p> <p>(e) Department field operations costs.</p> <p>(f) Lead poisoning surveillance, treatment, and abatement.</p> <p>(g) Nutritional incentives provided to local residents through the Double Up Food Bucks Expansion Program.</p> <p>(h) Genesee County health department food inspectors to perform water testing at local food service establishments.</p>	Striking current law.		
<p><i>Implement Child Lead Poisoning Elimination Board Recommendations</i></p> <p>Sec. 1907. From the funds appropriated in part 1 for child lead poisoning elimination board, the department shall implement recommendations of the board offered in the board's report of November 2016. The recommendations implemented by the department under this section shall be based in science and best practices, and the department shall give priority to the implementation of the recommendations that are most in agreement with recommendations of nationally recognized organizations and authorities.</p>	Striking current law.		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Asian American Health Care and Wellness Initiative</i></p> <p>Sec. 1908. From the funds appropriated in part 1 for Asian American health care and wellness initiative, the department shall appropriate \$150,000.00 to a nonprofit organization organized under the laws of this state that is exempt from federal income tax under section 501(c)(3) of the internal revenue code of 1986, 26 USC 501, and is located in a county with a population between 602,000 and 603,000 according to the most recent decennial census to implement a pilot program to provide health care services in a culturally and linguistically competent manner. To be eligible to receive funding, the organization must have a stated vision of building a collaborative, active, and committed Asian American community in west Michigan with a focus on health care, education, and empowerment.</p>	Striking current law.		
<p><i>Western Michigan University Unified Clinics</i></p> <p>Sec. 1909. From the funds appropriated in part 1 for Western Michigan University clinics, the department shall appropriate \$1,500,000.00 to a community clinic operated by a 4-year state university located in a county with a population between 250,000 and 251,000 according to the most recent decennial census to operate a multispecialty group practice that provides clinical training experiences for students of the university. To be eligible to receive funding, the community clinic must have a stated mission to seek, create, and facilitate opportunities for collaboration among members that will help to improve the quality of life by educating and providing services to strengthen individuals and families.</p>	Striking current law.		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Infant Mortality Project</i></p> <p>Sec. 1912. From the funds appropriated in part 1 for infant mortality program grant, the department shall appropriate \$100,000.00 to a multi-agency community initiative led by a nonprofit organization organized under the laws of this state that is exempt from federal income tax under section 501(c)(3) of the internal revenue code of 1986, 26 USC 501, and is located in a county with a population between 250,000 and 251,000 according to the most recent decennial census. To be eligible to receive funding, the organization must have stated goals of ensuring health equity of programs, policies, and providers; building a perinatal home visitation network; promoting and educating about infant safe-sleep programs; and providing reproductive health education and support.</p>	Striking current law.		
<p><i>Medicaid Direct Primary Care Pilot Program</i></p> <p>Sec. 1913. (1) The department shall spend available work project revenue and any associated federal matching funds to continue the implementation of the direct primary care pilot program as specified in section 705 of article XX.</p>	Striking current law.		



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	EXECUTIVE	HOUSE	SENATE
<p>(2) On a quarterly basis, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the implementation of the direct primary care pilot program under section 705 of article XX and this section. The report shall include, but not be limited to, the following performance metrics:</p> <p>(a) The number of enrollees in the pilot program by eligibility category.</p> <p>(b) The per-member-per-month rate paid in the previous fiscal year per eligibility category.</p> <p>(c) The number of claims paid in the previous fiscal year per eligibility category.</p> <p>(d) The number of claims per category weighted to reflect 400 enrollees.</p> <p>(e) The dollar value of all claims per eligibility category.</p> <p>(f) The per-member-per-month actual cost. As used in this subsection, “per-member-per-month actual cost” means the direct primary care plan costs and any managed care costs not covered through the direct primary care plan, including managed care provider overhead costs.</p>	Striking current law.		
<p>(g) The average direct primary care cost per enrollee per eligibility category.</p> <p>(h) The average number of actual claims per eligibility category.</p> <p>(i) The average actual dollar value of claims per eligibility category.</p> <p>(j) The number of enrollees in the pilot program during the previous quarter who are no longer eligible for Medicaid in the current quarter, broken down by eligibility category.</p> <p>(k) The category savings subtotal. As used in this subdivision, “category savings subtotal” means the per-member- per-month rate paid in fiscal year 2016-2017 minus the per-member-per-month actual cost, times the number of enrollees in the eligibility category.</p> <p>(l) The total savings. As used in this subdivision, “total savings” means the per-member-per-month rate paid in the previous fiscal year minus the per-member-per-month actual cost, times the total number of enrollees in the program.</p>	Striking current law.		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Primary Care and Dental Health Services</i></p> <p>Sec. 1914. From the funds appropriated in part 1 for primary care and dental health services, \$300,000.00 shall be allocated for primary care clinic and dental health clinic services for indigent individuals to be provided in clinic locations in the city of Detroit and Wayne County by a public nonprofit organization with a stated mission of providing medical, behavioral, and mental health services, as well as other related support services, to underserved populations in Detroit, Wayne County, surrounding counties, and throughout Michigan.</p>	Striking current law.		
<p><i>Refugee Assistance Grant</i></p> <p>Sec. 1916. From the funds appropriated in part 1 for refugee assistance grant, the department shall allocate \$175,000.00 to a nonprofit corporation organized under the laws of this state that is exempt from federal income tax under section 501(c)(3) of the internal revenue code of 1986, 26 USC 501, to operate an initiative to transition low-income refugee families to self-sufficiency. To be eligible to receive funding, the organization must have a stated core purpose of providing programs that guide support, and empower individuals to achieve self-sufficiency with dignity and hope. This initiative must utilize a measurable, evidence-based approach that integrates treatment for poverty across health care, human services, educational, faith-based, and governmental programs. The organization receiving funds under this section must report to the department by September 30 of the current fiscal year on metrics used to measure the success and viability of the initiative.</p>	Striking current law.		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Autism Train the Trainer</i></p> <p>Sec. 1917. (1) From the funds appropriated in part 1 for autism train the trainer grant, the department shall appropriate \$55,000.00 to implement a pilot project to train school employees on the principles and practices of applied behavior analysis and research-based intervention strategies. The pilot project must do both of the following:</p> <p>(a) Train paraprofessionals and teachers in a school district with a headquarters located in a city with a population between 6,900 and 7,000 according to the most recent federal decennial census in applied behavior analysis skills that match the national standard for behavior technician-level work and research-based intervention strategies.</p> <p>(b) Train teacher consultants, school social workers, school psychologists, and other school personnel responsible for conducting functional behavioral assessments and the development of behavior support plans in a school district with a headquarters located in a city with a population between 6,900 and 7,000 according to the most recent federal decennial census methods for assuring implementation of a behavior plan with fidelity and strategies for sharing understanding of evidence-based behavioral health approaches with other school-based personnel.</p>	Striking current law.		
<p>(2) Outcomes and performance measures for the pilot project funded under this section shall include, but not be limited to, the following:</p> <p>(a) A decrease in the number of center-program and self-contained-classroom referrals.</p> <p>(b) A decrease in the number of suspensions, removals, and expulsions.</p> <p>(c) A decrease in paraprofessional absences.</p> <p>(d) An increase in teacher retention.</p> <p>(e) An increase in safety.</p>	Striking current law.		
<p>(3) By September 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the information required in subsection (2).</p>	Striking current law.		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Michigan Medical Resident Loan Repayment Program</i></p> <p>Sec. 1918. (1) From the funds appropriated in part 1 for Michigan medical resident loan repayment program, \$5,000,000.00 is allocated for a 5-year Michigan medical resident loan repayment program to incentivize placement of primary care physicians and other select specialty physicians in rural and urban medically underserved areas of this state following medical residency and provide financial assistance for medical education loan repayment of up to \$50,000.00 to the participating physician before the service period. The Michigan medical resident loan repayment program shall include the following provisions:</p> <p>(a) The program shall incentivize medical residents only in the following specialties: family medicine, general internal medicine, general pediatrics, general OB-GYN, psychiatry, and general surgery.</p> <p>(b) Upon signing an initial agreement to participate in the program, an amount of up to \$50,000.00 shall be provided to the participating physician for the repayment of medical education loans or interest, or both, according to a payment schedule as prescribed and agreed upon by the department and the participant.</p> <p>(c) Beginning the year following completion of a medical residency, a physician participating in the program shall enter into a contract to work with an employer for no less than 2 years in a federally designated rural or urban medically underserved area in this state.</p> <p>(d) A physician participating in the program shall agree to forego any subspecialty fellowship training for at least 2 years postresidency.</p>	Striking current law.		
<p>(2) The department shall contract with the Michigan Health Council for the purpose of administering the Michigan medical resident loan repayment program. Funds shall be disbursed by the department to the Michigan Health Council by December 1 of the current fiscal year for this purpose.</p>	Striking current law.		



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	EXECUTIVE	HOUSE	SENATE
<p>(3) The department shall prepare a report on the status of the Michigan medical resident loan repayment program that shall include, but is not limited to, the number of physicians placed, location of placement, type of employer, average medical education loan burden of the participating physicians, and average loan relief provided under the program. By April 1 of the current fiscal year, the department shall provide the report described in this subsection to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies and policy offices, and the state budget office.</p>	Striking current law.		
<p>(4) Unexpended and unencumbered funds up to a maximum of \$5,000,000.00 general fund/general purpose revenue in part 1 for Michigan medical resident loan repayment program are designated as work project appropriations, and any unencumbered or unallotted funds shall not lapse at the end of the fiscal year and shall be available for expenditures for the Michigan medical resident loan repayment program under this section until the project has been completed. All of the following are in compliance with section 451a of the management and budget act, 1984 PA 431, MCL 18.1451a:</p> <p>(a) The purpose of the work project is to fund the cost of a Michigan medical resident loan repayment program as provided by this section.</p> <p>(b) The work project shall be accomplished by administering the placement of participating physicians with qualifying employers and providing medical education loan repayment assistance to participating physicians.</p> <p>(c) The total estimated cost of the work project is \$5,000,000.00 of general fund/general purpose revenue.</p> <p>(d) The tentative completion date of the work project is September 30, 2023.</p>	Striking current law.		
<p><i>Developmental Disabilities Council Employment First Initiative</i></p> <p>Sec. 1919. (1) The funds appropriated in part 1 for employment first are appropriated to support the objectives stated in Executive Order No. 2015-15.</p>	Striking current law.		



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	EXECUTIVE	HOUSE	SENATE
<p>(2) The department shall use the funds to provide consultation and technical assistance to support best practices to increase competitive integrated employment for people with disabilities in areas such as statewide capacity building of professionals providing job preparation, placement, and retention supports and services; provider transformation among community rehabilitation organizations; rate restructuring of employment supports and services; blending and braiding of resources; seamless transition outcomes from education to employment; employer engagement; education and outreach to clients and their families, including information on benefits coordination and planning; and other systemic change activities leading to competitive integrated employment.</p>	Striking current law.		
<p><i>Autism Navigator Program</i></p> <p>Sec. 1920. (1) From the funds appropriated in part 1 for autism navigator, the department shall require any contractor receiving funds from this line item to comply with performance-related metrics to maintain eligibility for funding. The organizational metrics shall include, but not be limited to, all of the following:</p> <p>(a) Each contractor shall have accreditations that attest to their competency and effectiveness in providing services.</p> <p>(b) Each contractor shall demonstrate cost-effectiveness.</p> <p>(c) Each contractor shall ensure their ability to leverage private dollars to strengthen and maximize service provision.</p> <p>(d) Each contractor shall provide quarterly reports to the department regarding the number of clients served, units of service provision, and ability to meet their stated goals.</p>	Striking current law.		
<p>(2) The department shall require an annual report from any contractor receiving funding from the autism navigator line item. The annual report, due to the department 60 days following the end of the contract period, shall include specific information on services and programs provided, the client base to which the services and programs were provided, and the expenditures for those services. The department shall provide the annual reports to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office.</p>	Striking current law.		



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	EXECUTIVE	HOUSE	SENATE
<p>(3) From the funds appropriated in part 1 for autism navigator, the department shall fund an independent evaluation of the services provided by contractors paid from the autism navigator line item in fiscal year 2017-2018. This evaluation, which shall examine cost effectiveness of services, avoidance of duplication of services, and outcomes, shall be completed by June 1 of the current fiscal year and shall be provided to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office.</p>	<p>Striking current law.</p>		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>Census Related Services</p> <p>Sec. 1921. (1) From the funds appropriated in part 1 for census related services, for every \$4.00 in private matching funds received, this state shall allocate \$1.00, up to \$500,000.00 in state contributions, to support census outreach and preparation for citizen participation in the upcoming 2020 federal census. The purpose of the funding is to prepare for the census to ensure an accurate citizen count. The funding shall be used to support a 2020 Michigan complete count committee, staffing related to census outreach, and implementation of outreach strategies, including, but not limited to, training for local officials, support of local complete count committees, and coordination with the Michigan nonprofit complete count committee.</p>	Striking current law.		
<p>(2) Unexpended and unencumbered funds up to a maximum \$500,000.00 in general fund/general purpose revenue plus any contributions of private matching funds, up to \$2,000,000.00 remaining in accounts appropriated in part 1 for census related services are designated as work project appropriations, and any unencumbered or unallotted funds shall not lapse at the end of the fiscal year and shall be available for expenditures to support census outreach and preparation for citizen participation in the 2020 federal census under this section until the work project has been completed. All of the following are in compliance with section 451a(1) of the management and budget act, 1984 PA 431, MCL 18.1451a:</p> <p>(a) The purpose of the work project is to fund the cost of the Michigan Nonprofits Count Campaign to support census outreach and citizen participation preparation for the 2020 federal census.</p> <p>(b) The work project will be accomplished by partnering with the Michigan Nonprofit Association.</p> <p>(c) The total estimated completion cost of the work project is \$2,500,000.00.</p> <p>(d) The tentative completion date is September 30, 2022.</p>	Striking current law.		



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FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Opioid Outreach Coordinator</i></p> <p>Sec. 1922. From the funds appropriated in part 1 for opioid outreach coordinator, \$115,000.00 is allocated to Growth Works for the purposes of hiring a health educator, training, and outreach related to the United States Department of Health and Human Services priorities on the opioid crisis. The funds allocated must be used to prepare and disseminate public education materials and to conduct educational sessions within a county with a population of more than 1,500,000, including, but not limited to, school districts and community-based organizations.</p>	Striking current law.		
<p><i>Supplemental Boilerplate – Growth Works</i></p> <p>Sec. 457. From the funds appropriated in part 1 for community substance use disorder prevention, education, and treatment, \$500,000.00 is allocated for a specialized emergent peer recovery coach services pilot project administered by a substance use and case management provider in conjunction with a hospital within a county with a population of at least 1,500,000 and 911 service district. The hospital must have a wing with at least 5 beds dedicated to stabilizing patients suffering from addiction by providing a specialized trauma therapist as well as a peer support specialist to assist with treatment and counseling. The substance use and case management provider shall collect and submit to the department data on the outcomes of the pilot project throughout the duration of the pilot project and shall provide a report on the pilot project's outcomes to the senate and house appropriations subcommittees on health and human services, the senate and house fiscal agencies, and the state budget office.</p>	Striking current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for One-Time Basis Only Appropriations

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p><i>Supplemental Boilerplate – Autism Alliance of Michigan</i></p> <p>Sec. 458. From the funds appropriated in part 1 for autism diagnostic and therapy recommendation pilot project, \$466,000.00 is allocated to a statewide autism organization that is not an autism services provider, has affiliation with a medical advisory board, and participates in multiple and relevant national professional organizations to implement a pilot project within 3 separate counties or community mental health services programs to provide for fidelity reviews and secondary approvals of diagnostic and therapy recommendations for children receiving Medicaid who are evaluated for autism services.</p>	Striking current law.		
<p><i>Supplemental Boilerplate – Autism Train the Trainer Grant</i></p> <p>Sec. 459. The funds appropriated in part 1 for autism train the trainer grant shall be allocated in the same manner as described in section 1917 of article X of 2018 PA 107 for a train the trainer certification program.</p>	Striking current law.		
<p><i>Supplemental Boilerplate – Special Rural Hospital Payments</i></p> <p>Sec. 465. From the funds appropriated in part 1 for rural hospital payments the department of health and human services shall distribute \$3,000,000.00 in general fund/general purpose revenue to hospitals qualifying for rural hospital access payments. Payment amounts shall be structured as follows:</p> <p>(a) The department shall allocate \$1,800,000.00 in general fund/general purpose revenue in rural access payments to qualifying hospitals proportional to the amounts distributed through section 1303.</p> <p>(b) The department shall allocate \$1,200,000.00 in general fund/general purpose revenue in rural access payments to qualifying hospitals that provide obstetric services proportional to the amounts distributed through section 1302.</p>	Striking current law.		



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Boilerplate for One-Time Basis Only Appropriations

FY 2018-19 CURRENT LAW	FY 2019-2020		
	EXECUTIVE	HOUSE	SENATE
<p>Supplemental Boilerplate – Census Related Services</p> <p>Sec. 466. (1) From the funds appropriated in part 1 for census-related services, for every \$4.00 in private matching funds received, this state shall allocate \$1.00, up to \$500,000.00 in state contributions, to support census outreach and preparation for citizen participation in the upcoming 2020 federal census. The purpose of the funding is to prepare for the census to ensure an accurate citizen count. The funding shall be used to support a 2020 Michigan complete count committee, staffing related to census outreach, and implementation of outreach strategies, including, but not limited to, training for local officials, support of local complete count committees, and coordination with the Michigan nonprofit complete count committee.</p>	Striking current law.		
<p>(2) Unexpended and unencumbered funds up to a maximum \$500,000.00 in general fund/general purpose revenue plus any contributions of private matching funds, up to \$2,000,000.00 remaining in accounts appropriated in part 1 for census-related services are designated as work project appropriations, and any unencumbered or unallotted funds shall not lapse at the end of the fiscal year and shall be available for expenditure to support census outreach and preparation for citizen participation in the 2020 federal census under this section until the project has been completed. All of the following are in compliance with section 451a(1) of the management and budget act, 1984 PA 431, MCL 18.1451a:</p> <p>(a) The purpose of the project is to fund the cost of the Michigan nonprofits count campaign to support census outreach and citizen participation preparation for the 2020 federal census.</p> <p>(b) The project will be accomplished by partnering with the Michigan nonprofit association.</p> <p>(c) The total estimated completion cost of the project is \$2,500,000.00.</p> <p>(d) The tentative completion date is September 30, 2022.</p>	Striking current law.		