

No. 71
STATE OF MICHIGAN
JOURNAL
OF THE
House of Representatives
89th Legislature
REGULAR SESSION OF 1998

House Chamber, Lansing, Thursday, September 17, 1998.

10:00 a.m.

The House was called to order by Acting Speaker Hanley.

The roll was called by the Clerk of the House of Representatives, who announced that a quorum was present.

Agee—present	Emerson—present	Kelly—present	Profit—present
Alley—present	Fitzgerald—present	Kilpatrick—present	Prusi—present
Anthony—present	Frank—present	Kukuk—present	Quarles—present
Baade—present	Freeman—present	LaForge—present	Raczkowski—present
Baird—present	Gagliardi—present	Law—present	Rhead—present
Bankes—present	Galloway—e/d/s	Leland—present	Richner—present
Basham—present	Geiger—present	LeTarte—present	Rison—present
Birkholz—present	Gernaat—present	Llewellyn—present	Rocca—present
Bobier—present	Gilmer—present	London—present	Sanborn—present
Bodem—present	Gire—present	Lowe—present	Schauer—present
Bogardus—present	Godchaux—present	Mans—present	Schermesser—present
Brackenridge—present	Goschka—present	Martinez—present	Schroer—excused
Brater—present	Green—present	Mathieu—present	Scott—present
Brewer—present	Griffin—present	McBryde—present	Scranton—present
Brown—present	Gubow—present	McManus—excused	Sikkema—present
Byl—present	Gustafson—present	McNutt—present	Stallworth—excused
Callahan—present	Hale—present	Middaugh—present	Tesanovich—present
Cassis—present	Hammerstrom—present	Middleton—present	Thomas—excused
Cherry—present	Hanley—present	Murphy—present	Varga—present
Ciaramitaro—present	Harder—present	Nye—present	Vaughn—present
Crissman—present	Hertel—present	Olshove—present	Voorhees—present
Cropsey—present	Hood—present	Owen—present	Walberg—present
Curtis—present	Horton—excused	Oxender—excused	Wallace—present
Dalman—present	Jansen—present	Palamara—e/d/s	Wetters—present
DeHart—present	Jelinek—present	Parks—present	Whyman—present
DeVuyst—present	Jellema—present	Perricone—present	Willard—present
Dobb—present	Johnson—present	Price—present	Wojno—present
Dobronski—present	Kaza—present		

e/d/s = entered during session

Rep. Nick Ciaramitaro, from the 27th District, offered the following invocation:

“Dear Father, Your children are bickering again. Give us patience with one another even when, especially when, we disagree. Give us the courage to stick to our convictions and the understanding to respect the convictions of others. Forgive us our anger as we forgive each other the unkind remarks that may be uttered in that anger. Give us faith in You and faith in our democratic system. Give us hope for a better tomorrow. Let us never forget Your great love for the entire human race, so that we freely abide by Your great commandments to love You and all of our neighbors throughout the world. Amen.”

Rep. Dobronski moved that Reps. Thomas and Stallworth be excused from today’s session.
The motion prevailed.

Rep. Hammerstrom moved that Reps. Horton, McManus and Oxender be excused from today’s session.
The motion prevailed.

Rep. Martinez moved that Rep. Schroer be excused from today’s session.
The motion prevailed.

Rep. Middaugh asked and obtained an excuse from the balance of today’s session.

Notices

September 17, 1998

In accordance with House Rule 10, I hereby designate Representative Michael Hanley, to be the Presiding Officer for all, or part of today’s session.

In accordance with House Rule 10, I hereby designate Representative Eileen DeHart, to be the Presiding Officer for all, or part of today’s session.

Sincerely,
Curtis Hertel
Speaker of the House

Rep. Bodem moved that Rep. Dobb be excused temporarily from today’s session.
The motion prevailed.

By unanimous consent the House returned to the order of
Third Reading of Bills

House Bill No. 5815, entitled

A bill to amend 1994 PA 204, entitled “The children’s ombudsman act,” (MCL 722.921 to 722.935) by adding section 6a.

Was read a third time and passed, a majority of the members serving voting therefor, by yeas and nays, as follows:

Roll Call No. 859

Yeas—76

Agee	Curtis	Hood	Prusi
Alley	DeHart	Jelinek	Quarles
Anthony	DeVuyst	Kelly	Rackowski
Baade	Dobronski	Kilpatrick	Rhead
Baird	Emerson	LaForge	Richner
Bankes	Fitzgerald	Law	Rison

Basham	Frank	Leland	Rocca
Birkholz	Freeman	Llewellyn	Sanborn
Bobier	Gagliardi	London	Schauer
Bodem	Gire	Mans	Schermesser
Bogardus	Godchaux	Martinez	Scott
Brater	Goschka	Mathieu	Scranton
Brewer	Green	McBryde	Tesanovich
Brown	Gubow	Murphy	Varga
Byl	Hale	Olshove	Vaughn
Callahan	Hammerstrom	Owen	Wallace
Cassis	Hanley	Parks	Wetters
Cherry	Harder	Price	Willard
Cropsey	Hertel	Profit	Wojno

Nays—21

Brackenridge	Gustafson	LeTarte	Perricone
Crissman	Jansen	Lowe	Sikkema
Dalman	Johnson	McNutt	Voorhees
Geiger	Kaza	Middleton	Walberg
Gernaat	Kukuk	Nye	Whyman
Gilmer			

In The Chair: Hanley

The House agreed to the title of the bill.

Rep. Gagliardi moved that the bill be given immediate effect.

The motion prevailed, 2/3 of the members serving voting therefor.

Reps. Anthony, Baird, Bodem, DeHart, Freeman, Gagliardi, Hammerstrom, Kelly, Kilpatrick, Leland, Murphy, Owen, Parks, Profit, Prusi, Schermesser, Varga and Vaughn were named co-sponsors of the bill.

Rep. Bankes moved that Rep. Dalman be excused temporarily from today's session.
The motion prevailed.

Rep. Palamara entered the House Chambers.

House Bill No. 5816, entitled

A bill to amend 1969 PA 306, entitled "Administrative procedures act of 1969," by amending section 45 (MCL 24.245), as amended by 1993 PA 141.

Was read a third time and passed, a majority of the members serving voting therefor, by yeas and nays, as follows:

Roll Call No. 860**Yeas—78**

Agee	Curtis	Jelinek	Prusi
Alley	DeHart	Jellema	Quarles
Anthony	DeVuyst	Kelly	Raczkowski
Baade	Dobronski	Kilpatrick	Rhead
Baird	Emerson	LaForge	Richner
Bankes	Fitzgerald	Law	Rison
Basham	Frank	Leland	Rocca
Birkholz	Freeman	Llewellyn	Sanborn

Bobier	Gagliardi	Mans	Schauer
Bodem	Gire	Martinez	Schermesser
Bogardus	Godchaux	Mathieu	Scott
Brater	Goschka	McBryde	Scranton
Brewer	Green	Murphy	Tesanovich
Brown	Gubow	Olshove	Varga
Byl	Hale	Owen	Vaughn
Callahan	Hammerstrom	Palamara	Wallace
Cassis	Hanley	Parks	Wetters
Cherry	Harder	Price	Willard
Ciaramitaro	Hertel	Profit	Wojno
Cropsey	Hood		

Nays—21

Brackenridge	Jansen	London	Perricone
Crissman	Johnson	Lowe	Sikkema
Geiger	Kaza	McNutt	Voorhees
Gernaat	Kukuk	Middleton	Walberg
Gilmer	LeTarte	Nye	Whyman
Gustafson			

In The Chair: Hanley

The House agreed to the title of the bill.

Rep. Gagliardi moved that the bill be given immediate effect.

The motion prevailed, 2/3 of the members serving voting therefor.

Reps. Anthony, Baird, Hammerstrom, Kelly, Mans, Prusi and Schermesser were named co-sponsors of the bill.

The Associate Speaker Pro Tempore assumed the Chair.

Rep. Gagliardi moved that Rep. Varga be excused temporarily from today's session.

The motion prevailed.

Senate Bill No. 855, entitled

A bill to amend 1978 PA 34, entitled "An act to revise the laws relating to fences on certain lands and fence viewers; and to repeal certain acts and parts of acts," by amending sections 4, 5, and 6 (MCL 43.54, 43.55, and 43.56).

Was read a third time and passed, a majority of the members serving voting therefor, by yeas and nays, as follows:

Roll Call No. 861**Yeas—97**

Agee	Dobronski	Johnson	Perricone
Alley	Emerson	Kaza	Price
Anthony	Fitzgerald	Kelly	Profit
Baade	Frank	Kilpatrick	Prusi
Baird	Freeman	Kukuk	Quarles
Bankes	Gagliardi	LaForge	Raczkowski
Basham	Geiger	Law	Rhead
Birkholz	Gernaat	Leland	Richner
Bobier	Gilmer	LeTarte	Rison
Bodem	Gire	Llewellyn	Rocca

Bogardus	Godchaux	London	Sanborn
Brackenridge	Goschka	Lowe	Schauer
Brater	Green	Mans	Schermesser
Brewer	Gubow	Martinez	Scott
Brown	Gustafson	Mathieu	Scranton
Byl	Hale	McBryde	Sikkema
Callahan	Hammerstrom	McNutt	Tesanovich
Cassis	Hanley	Middleton	Vaughn
Cherry	Harder	Murphy	Voorhees
Ciaramitaro	Hertel	Nye	Walberg
Crissman	Hood	Olshove	Wallace
Cropsey	Jansen	Owen	Wetters
Curtis	Jelinek	Palamara	Whyman
DeHart	Jellema	Parks	Wojno
DeVuyst			

Nays—0

In The Chair: Gire

The House agreed to the title of the bill.

Rep. Gagliardi moved that the bill be given immediate effect.

The motion prevailed, 2/3 of the members serving voting therefor.

Second Reading of Bills

Pending the Second Reading of

House Bill No. 5478, entitled

A bill to amend 1976 PA 451, entitled “The revised school code,” (MCL 380.1 to 380.1852) by adding sections 1307 and 1308.

Rep. Gagliardi moved that the bill re-referred to the Committee on Education.

The motion prevailed.

By unanimous consent the House returned to the order of

Third Reading of Bills

House Bill No. 5315, entitled

A bill to amend 1941 PA 122, entitled “An act to establish a revenue division of the department of treasury; to prescribe its powers and duties as the revenue collection agency of the state; to prescribe certain powers and duties of the state treasurer; to create the position and to define the powers and duties of the state commissioner of revenue; to provide for the transfer of powers and duties now vested in certain other state boards, commissions, departments and offices; to prescribe certain duties of and require certain reports from the department of treasury; to provide procedures for the payment, administration, audit, assessment, levy of interests or penalties on, and appeals of taxes and tax liability; to prescribe its powers and duties if an agreement to act as agent for a city to administer, collect, and enforce the city income tax act on behalf of a city is entered into with any city; to provide an appropriation; to abolish the state board of tax administration; and to declare the effect of this act,” by amending section 18 (MCL 205.18), as added by 1980 PA 162.

(The bill was returned from the Senate per House request, motion made to reconsider passage and motion passed for the day on September 16, see House Journal No. 70, p. 2005.)

The question being on the motion made previously by Rep. Gagliardi,

The motion prevailed, a majority of the members serving voting therefor.

The question being on the passage of the bill,

Rep. Gagliardi moved that consideration of the bill be postponed temporarily.

The motion prevailed.

Second Reading of Bills

Senate Bill No. 1086, entitled

A bill to amend 1986 PA 268, entitled "Legislative council act," (MCL 4.1101 to 4.1901) by adding section 204f. The bill was read a second time.

Rep. Gagliardi moved that the bill be placed on the order of Third Reading of Bills. The motion prevailed, a majority of the members voting therefor.

Senate Bill No. 1087, entitled

A bill to amend 1986 PA 268, entitled "Legislative council act," (MCL 4.1101 to 4.1901) by adding section 204c. The bill was read a second time.

Rep. Gagliardi moved that the bill be placed on the order of Third Reading of Bills. The motion prevailed, a majority of the members voting therefor.

Senate Bill No. 1088, entitled

A bill to amend 1986 PA 268, entitled "Legislative council act," (MCL 4.1101 to 4.1901) by adding section 204d. Was read a second time, and the question being on the adoption of the proposed substitute (H-1) previously recommended by the Committee on Advanced Technology and Computer Development, The substitute (H-1) was adopted, a majority of the members serving voting therefor.

Rep. Gagliardi moved that the bill be placed on the order of Third Reading of Bills. The motion prevailed, a majority of the members voting therefor.

Acting Speaker Hanley resumed the Chair.

Rep. Galloway entered the House Chambers.

By unanimous consent the House returned to the order of
Motions and Resolutions

Rep. Cassis moved that the Committee on Tax Policy be discharged from further consideration of **House Bill No. 4710**.

(For first notice see House Journal No. 70, p. 2011.)

The question being on the motion by Rep. Cassis,

Rep. Cassis demanded the yeas and nays.

The demand was supported.

The question being on the motion by Rep. Cassis,

The motion prevailed, a majority of the members serving voting therefor, by yeas and nays, as follows:

Roll Call No. 862

Yeas—96

Agee	DeVuyst	Kaza	Profit
Alley	Dobronski	Kelly	Prusi
Anthony	Emerson	Kukuk	Quarles
Baade	Fitzgerald	LaForge	Raczkowski
Baird	Frank	Law	Rhead
Bankes	Freeman	Leland	Richner
Basham	Gagliardi	LeTarte	Rison
Birkholz	Galloway	Llewellyn	Rocca
Bobier	Geiger	London	Sanborn
Bodem	Gernaat	Lowe	Schauer

Bogardus	Gire	Mans	Schermesser
Brackenridge	Godchaux	Martinez	Scott
Brater	Goschka	Mathieu	Scranton
Brewer	Green	McBryde	Sikkema
Brown	Gustafson	McNutt	Tesanovich
Byl	Hale	Middleton	Varga
Callahan	Hammerstrom	Murphy	Vaughn
Cassis	Hanley	Nye	Voorhees
Cherry	Harder	Olshove	Walberg
Ciaramitaro	Hertel	Owen	Wallace
Crissman	Jansen	Palamara	Wetters
Cropsey	Jelinek	Parks	Whyman
Curtis	Jellema	Perricone	Willard
DeHart	Johnson	Price	Wojno

Nays—2

Gubow Hood

In The Chair: Hanley

Second Reading of Bills

House Bill No. 4343, entitled

A bill to amend 1972 PA 106, entitled “Highway advertising act of 1972,” by amending the title and sections 2, 3, and 7 (MCL 252.302, 252.303, and 252.307).

Was read a second time, and the question being on the adoption of the proposed substitute (H-2) previously recommended by the Committee on Transportation,

The substitute (H-2) was adopted, a majority of the members serving voting therefor.

Rep. Green moved to amend the bill as follows:

1. Amend page 2, following line 12, by inserting:

“(2) NOTWITHSTANDING ANY OTHER PROVISION OF THIS ACT, BEGINNING JANUARY 1, 2000, A BILLBOARD SHALL NOT CONTAIN SEXUALLY EXPLICIT CONTENT.” and renumbering the remaining subsections.

The motion did not prevail and the amendment was not adopted, a majority of the members serving not voting therefor.

Rep. Alley moved that the bill be placed on the order of Third Reading of Bills.

The motion prevailed, a majority of the members voting therefor.

Acting Speaker DeHart assumed the Chair.

By unanimous consent the House returned to the order of

Reports of Select Committees

Senate Bill No. 908, entitled

A bill to make appropriations for the department of community health and certain state purposes related to mental health, public health, and medical services for the fiscal year ending September 30, 1999; to provide for the expenditure of such appropriations; to create funds; to provide for reports; to prescribe the powers and duties of certain local and state agencies and departments; and to provide for disposition of fees and other income received by the various state agencies.

The Senate has adopted the report of the Committee of Conference and ordered that the bill be given immediate effect.

The Conference Report was read as follows:

First Conference Report

The Committee of Conference on the matters of difference between the two Houses concerning **Senate Bill No. 908, entitled**

A bill to make appropriations for the department of community health and certain state purposes related to mental health, public health, and medical services for the fiscal year ending September 30, 1999; to provide for the expenditure of such appropriations; to create funds; to provide for reports; to prescribe the powers and duties of certain local and state agencies and departments; and to provide for disposition of fees and other income received by the various state agencies.

Recommends:

First: That the House recede from the Substitute of the House as passed by the House.

Second: That the Senate and House agree to the Substitute of the Senate as passed by the Senate, amended to read as follows:

A bill to make appropriations for the department of community health and certain state purposes related to mental health, public health, and medical services for the fiscal years ending September 30, 1998 and September 30, 1999; to provide for the expenditure of such appropriations; to create funds; to provide for reports; to prescribe the powers and duties of certain local and state agencies and departments; and to provide for disposition of fees and other income received by the various state agencies.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

PART 1

LINE-ITEM APPROPRIATIONS

Sec. 101. Subject to the conditions set forth in this act, the amounts listed in this part are appropriated for the department of community health for the fiscal year ending September 30, 1999, from the funds indicated in this part. The following is a summary of the appropriations in this part:

DEPARTMENT OF COMMUNITY HEALTH

Full-time equated unclassified positions	7.0	
Full-time equated classified positions	6,298.3	
Average population	1,478.0	
GROSS APPROPRIATION		\$ 7,484,077,800
Interdepartmental grant revenues:		
Total interdepartmental grants and intradepartmental transfers		\$ 69,711,600
ADJUSTED GROSS APPROPRIATION		\$ 7,414,366,200
Federal revenues:		
Total federal revenues		3,682,772,100
Special revenue funds:		
Total local revenues		846,448,200
Total private revenues		46,284,900
Total other state restricted revenues		297,568,400
State general fund/general purpose		\$ 2,541,292,600

Sec. 102. DEPARTMENTWIDE ADMINISTRATION

Full-time equated unclassified positions	7.0	
Full-time equated classified positions	489.7	
Director and other unclassified—7.0 FTE positions		\$ 540,200
Community health advisory council		28,900
Departmental administration and management—479.7 FTE positions.....		45,131,000
Worker’s compensation program—1.0 FTE position		13,277,900
Rent		3,803,300
Building occupancy charges.....		3,153,300
Developmental disabilities council and projects—9.0 FTE positions		2,259,700
GROSS APPROPRIATION		\$ 68,194,300

Appropriated from:

Interdepartmental grant revenues:		
Interdepartmental grant from the department of treasury, Michigan state hospital finance authority		92,600
Intradepartmental transfer - automated data processing charges.....		3,510,400
Federal revenues:		
Total federal revenues		14,080,200

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1999

Special revenue funds:		
Private funds		20,800
Total other state restricted revenues		3,280,500
State general fund/general purpose	\$	47,209,800
Sec. 103. MENTAL HEALTH/SUBSTANCE ABUSE SERVICES		
ADMINISTRATION AND SPECIAL PROJECTS		
Full-time equated classified positions	123.2	
Mental health/substance abuse program administration—114.2 FTE positions		\$ 9,639,600
Consumer involvement program		291,600
Gambling addiction.....		3,000,000
Southwest community partnership.....		1,997,200
Protection and advocacy services support		1,318,300
Mental health initiatives for older persons		1,165,800
Purchase of psychiatric residency training		3,635,100
Community residential and support services—9.0 FTE positions.....		8,450,900
Highway safety projects.....		2,337,200
Program enhancement, evaluation, and data services		1,137,600
Federal and other special projects		7,427,200
GROSS APPROPRIATION.....		\$ 40,400,500
Appropriated from:		
Federal revenues:		
Total federal revenues		14,787,500
Special revenue funds:		
Total private revenues		125,000
Total other state restricted revenues		3,682,300
State general fund/general purpose	\$	21,805,700
Sec. 104. COMMUNITY MENTAL HEALTH/SUBSTANCE ABUSE SERVICES		
PROGRAMS		
Full-time equated classified positions	14.0	
Community mental health programs.....		\$ 1,389,995,100
Respite services		3,000,000
CMHSP-purchase of state services contracts.....		157,407,400
Civil service charges		2,606,400
Omnibus reconciliation act implementation—9.0 FTE positions.....		12,388,700
Federal mental health block grant—2.0 FTE positions.....		10,847,000
Pilot projects in prevention for adults and children—2.0 FTE positions		1,516,200
Homelessness formula grant program—1.0 FTE position		1,251,800
Chemically-dependent pregnant women and children program		2,100,000
State disability assistance program substance abuse services		6,600,000
Community substance abuse prevention, education and treatment programs.....		79,540,400
GROSS APPROPRIATION.....		\$ 1,667,253,000
Appropriated from:		
Federal revenues:		
Total federal revenues		619,793,000
Special revenue funds:		
Total other state restricted revenues		6,242,400
State general fund/general purpose	\$	1,041,217,600
Sec. 105. STATE PSYCHIATRIC HOSPITALS, CENTERS FOR PERSONS WITH		
DEVELOPMENTAL DISABILITIES, AND FORENSIC AND PRISON MENTAL		
HEALTH SERVICES		
Total average population	1,478.0	
Full-time equated classified positions	4,753.0	
Caro regional mental health center-psychiatric hospital-adult—512.0 FTE positions.....		\$ 30,038,900
Average population	180.0	
Kalamazoo psychiatric hospital-adult—402.0 FTE positions		26,325,200
Average population	130.0	

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Northville psychiatric hospital-adult—860.0 FTE positions	59,815,300
Average population	350.0
Walter P. Reuther psychiatric hospital-adult—432.0 FTE positions	31,201,000
Average population	210.0
Hawthorn center-psychiatric hospital-children and adolescents—325.0 FTE positions	21,010,900
Average population	118.0
Mount Pleasant center-developmental disabilities—510.0 FTE positions.....	30,086,100
Average population	210.0
Southgate center-developmental disabilities—256.0 FTE positions	15,928,600
Average population	70.0
Center for forensic psychiatry—482.0 FTE positions.....	32,021,300
Average population	210.0
Center for forensic psychiatry-outpatient evaluation—40.0 FTE positions	3,201,500
Forensic mental health services provided to the department of corrections—921.0 FTE positions.....	65,283,100
Revenue recapture.....	750,000
IDEA, federal special education.....	92,000
Special maintenance and equipment.....	959,000
Purchase of medical services for residents of hospitals and centers	2,374,000
Closed site, transition, and related costs—13.0 FTE positions.....	455,500
Severance pay	1,896,000
Maintenance of property being leased or rented.....	95,000
Therapeutic work training program.....	345,600
Gifts and bequests for patient living and treatment environment	2,000,000
GROSS APPROPRIATION	\$ 323,879,000
Appropriated from:	
Interdepartmental grant revenues:	
Interdepartmental grant from the department of corrections.....	65,283,100
Federal revenues:	
Total federal revenues	28,953,100
Special revenue funds:	
CMHSP-Purchase of state services contracts	157,407,400
Other local revenues	15,389,000
Private funds	2,000,000
Total other state restricted revenues	15,987,800
State general fund/general purpose	\$ 38,858,600
Sec. 106. PUBLIC HEALTH ADMINISTRATION	
Full-time equated classified positions	88.3
Executive administration—15.5 FTE positions	\$ 1,271,300
Minority health grants and contracts	650,000
Vital records and health statistics—72.8 FTE positions	5,606,700
GROSS APPROPRIATION	\$ 7,528,000
Appropriated from:	
Interdepartmental grant revenues:	
Interdepartmental grant from family independence agency	133,300
Federal revenues:	
Total federal revenues	2,719,300
Special revenue funds:	
Total other state restricted revenues	1,704,600
State general fund/general purpose	\$ 2,970,800
Sec. 107. INFECTIOUS DISEASE CONTROL	
Full-time equated classified positions	44.3
AIDS prevention, testing and care programs—9.8 FTE positions	\$ 19,459,800
Immunization local agreements.....	16,137,100
Immunization program management and field support—7.7 FTE positions	1,849,100
Sexually transmitted disease control local agreements.....	6,805,700

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Sexually transmitted disease control management and field support—26.8 FTE positions.....	2,678,700
GROSS APPROPRIATION	\$ 46,930,400
Appropriated from:	
Federal revenues:	
Total federal revenues	30,631,100
Special revenue funds:	
Local funds	242,700
Private funds	710,000
Total other state restricted revenues	11,783,200
State general fund/general purpose	\$ 3,563,400
Sec. 108. LABORATORY SERVICES	
Full-time equated classified positions118.2	
Laboratory services administration—98.7 FTE positions	\$ 7,894,900
EPSDT blood lead screening—6.0 FTE positions	667,700
Lyme disease.....	75,000
Newborn screening services—13.5 FTE positions	1,765,700
GROSS APPROPRIATION	\$ 10,403,300
Appropriated from:	
Interdepartmental grant revenues:	
Interdepartmental grant from corrections	232,600
Interdepartmental grant from environmental quality	379,000
Federal revenues:	
Total federal revenues	1,139,700
Special revenue funds:	
Total other state restricted revenues	2,467,900
State general fund/general purpose	\$ 6,184,100
Sec. 109. EPIDEMIOLOGY	
Full-time equated classified positions31.5	
AIDS surveillance and prevention program—7.0 FTE positions	\$ 2,234,800
Disease surveillance—3.4 FTE positions	568,000
Epidemiology administration—21.1 FTE positions	3,628,000
Tuberculosis control and recalcitrant AIDS program	699,500
GROSS APPROPRIATION	\$ 7,130,300
Appropriated from:	
Interdepartmental grant revenues:	
Interdepartmental grant from the department of environmental quality.....	80,600
Federal revenues:	
Total federal revenues	4,873,700
Special revenue funds:	
Total other state restricted revenues	281,000
State general fund/general purpose	\$ 1,895,000
Sec. 110. LOCAL HEALTH ADMINISTRATION AND GRANTS	
Full-time equated classified positions3.0	
Implementation of 1993 PA 133.....	\$ 100,000
Lead abatement program—3.0 FTE positions	4,900,000
Local health services.....	142,300
Local public health operations	38,712,600
Medical services cost reimbursement to local health departments.....	1,800,000
Special populations health care	620,600
Training and evaluation.....	320,000
GROSS APPROPRIATION	\$ 46,595,500
Appropriated from:	
Federal revenues:	
Total federal funds	6,855,500
Special revenue funds:	
Total other state restricted revenues	243,500
State general fund/general purpose	\$ 39,496,500

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Sec. 111. CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION

Full-time equated classified positions	33.7	
AIDS and risk reduction clearinghouse and media campaign.....		\$ 1,700,000
Alzheimer's information network.....		250,000
Cancer prevention and control program—13.6 FTE positions.....		13,393,700
Chronic disease prevention		1,496,800
Diabetes local agreements.....		3,229,900
Employee wellness program grants (includes \$50.00 per diem and expenses for the risk reduction and AIDS policy commission).....		4,250,000
Health education, promotion, and research programs—11.9 FTE positions.....		2,409,400
Injury control intervention project		1,017,300
Physical fitness, nutrition, and health		1,250,000
Public health traffic safety coordination.....		152,600
School health and education programs		2,080,000
Smoking prevention program—6.2 FTE positions.....		7,176,700
Violence prevention—2.0 FTE positions.....		2,846,600
GROSS APPROPRIATION.....		\$ 41,253,000

Appropriated from:

Federal revenues:		
Total federal funds		12,029,700
Special revenue funds:		
Total other state restricted revenues		26,452,400
State general fund/general purpose		\$ 2,770,900

Sec. 112. COMMUNITY LIVING, CHILDREN, AND FAMILIES

Full-time equated classified positions	119.8	
Adolescent health care services.....		\$ 2,892,300
Community living, children, and families administration—114.3 FTE positions.....		13,249,300
Dental programs.....		260,400
Dental program for persons with developmental disabilities		151,000
Family planning local agreements.....		7,392,600
Family support subsidy		14,014,400
Lead paint program		491,800
Local MCH services.....		8,354,200
Maternal and child health outreach and advocacy programs		6,200,000
Migrant health care		166,100
Newborn screening follow-up and treatment services		1,729,400
Pediatric AIDS prevention and control		800,000
Pregnancy prevention program.....		7,296,100
Prenatal care outreach and service delivery support.....		7,987,900
Special projects—5.5 FTE positions		4,271,400
Sudden infant death syndrome program		521,300
Women, infants, and children program local agreements and food costs.....		145,679,200
GROSS APPROPRIATION.....		\$ 221,457,400

Appropriated from:

Federal revenues:		
Total federal revenue		146,657,800
Special revenue funds:		
Private funds		41,954,100
Total other state restricted revenues		9,172,200
State general fund/general purpose		\$ 23,673,300

Sec. 113. CHILDREN'S SPECIAL HEALTH CARE SERVICES

Full-time equated classified positions	66.6	
Program administration—66.6 FTE positions.....		\$ 4,983,200
Amputee program		184,600
Bequests for care and services		1,104,600

	For Fiscal Year Ending Sept. 30, 1999
Case management services	3,923,500
Conveyor contract.....	559,100
Medical care and treatment	117,433,700
GROSS APPROPRIATION.....	\$ 128,188,700
Appropriated from:	
Federal revenues:	
Total federal revenue	57,934,300
Special revenue funds:	
Private bequests	750,000
Total other state restricted revenues	3,898,500
State general fund/general purpose	\$ 65,605,900
Sec. 114. OFFICE OF DRUG CONTROL POLICY	
Full-time equated classified positions	15.0
Drug control policy—15.0 FTE positions	\$ 1,533,900
Anti-drug abuse grants	33,400,000
GROSS APPROPRIATION.....	\$ 34,933,900
Appropriated from:	
Federal revenues:	
Total federal revenue	34,760,200
State general fund/general purpose	\$ 173,700
Sec. 115. CRIME VICTIM SERVICES COMMISSION	
Full-time equated classified positions	9.0
Grants administration services—9.0 FTE positions	\$ 775,400
Justice assistance grants.....	9,000,000
Crime victim rights services grants	6,274,600
GROSS APPROPRIATION.....	\$ 16,050,000
Appropriated from:	
Federal revenues:	
Total federal revenue	9,871,300
Special revenue funds:	
Total other state restricted revenues	5,684,700
State general fund/general purpose	\$ 494,000
Sec. 116. OFFICE OF SERVICES TO THE AGING	
Full-time equated classified positions	36.5
Commission (per diem \$50.00)	\$ 10,500
Office of services to aging administration—36.5 FTE positions	3,641,400
Community services.....	26,863,400
Nutrition services.....	28,185,700
Senior volunteer services	4,220,800
Senior citizen centers staffing and equipment	1,140,700
Employment assistance	2,632,700
DAG commodity supplement.....	6,978,800
Michigan pharmaceutical program	6,000,000
Respite care program	3,500,000
GROSS APPROPRIATION.....	\$ 83,174,000
Appropriated from:	
Federal revenues:	
Total federal revenue	39,171,400
Special revenue funds:	
Total private revenue	125,000
Total other state restricted revenue	10,000,700
State general fund/general purpose	\$ 33,876,900
Sec. 117. MEDICAL SERVICES ADMINISTRATION	
Full-time equated classified positions	352.5
Salaries and wages—352.5 FTE positions.....	\$ 20,226,200
Contractual services, supplies, and materials	21,661,600
Travel and equipment.....	193,200

	For Fiscal Year Ending Sept. 30, 1999
Data processing contractual services.....	100
Facility inspection contract - state police.....	132,800
MICHild administration.....	3,327,800
Michigan essential health care provider.....	1,229,100
Primary care services.....	2,140,600
GROSS APPROPRIATION.....	\$ 48,911,400
Appropriated from:	
Federal revenues:	
Total federal revenues.....	31,250,000
Special revenue funds:	
Private funds.....	100,000
Total other state restricted revenues.....	752,600
State general fund/general purpose.....	\$ 16,808,800
Sec. 118. MEDICAL SERVICES	
Hospital services and therapy.....	\$ 618,412,100
Hospital disproportionate share payments.....	45,000,000
Physician services.....	162,532,900
Medicare premium payments.....	104,372,400
Pharmaceutical services.....	205,054,400
Home health services.....	34,407,500
Transportation.....	4,358,900
Auxiliary medical services.....	48,999,700
Long-term care services.....	942,969,200
Health plan services.....	1,253,274,700
Medicaid outreach.....	5,000,000
MICHild outreach.....	3,327,800
MICHild program.....	57,567,100
Personal care services.....	24,262,000
Maternal and child health.....	9,234,500
Adult home help.....	138,479,200
Social services to the physically disabled.....	1,344,900
Subtotal basic medical services program.....	3,658,597,300
Outpatient hospital adjustor.....	44,012,800
Indigent medical care program.....	27,431,300
School based services.....	142,782,300
Special adjustor payments.....	818,971,400
Subtotal special medical services payments.....	1,033,197,800
GROSS APPROPRIATION.....	\$ 4,691,795,100
Appropriated from:	
Federal revenues:	
Total federal revenues.....	2,627,264,300
Special revenue funds:	
Local revenues.....	673,409,100
Private funds.....	500,000
Tobacco company litigation fund.....	50,000
Total other state restricted revenues.....	195,884,100
State general fund/general purpose.....	\$ 1,194,687,600

PART 1A

LINE-ITEM APPROPRIATIONS

Sec. 151. Subject to the conditions set forth in this act, the amounts listed in this part are appropriated for the department of community health for the fiscal year ending September 30, 1998, from the funds indicated in this part. The following is a summary of the appropriations in this part:

DEPARTMENT OF COMMUNITY HEALTH

GROSS APPROPRIATION.....	\$ 500,000
Interdepartmental grant revenues:	
Total interdepartmental grants and intradepartmental transfers.....	\$ 0
ADJUSTED GROSS APPROPRIATION.....	\$ 500,000

	For Fiscal Year Ending Sept. 30, 1998
Federal revenues:	
Total federal revenues	0
Special revenue funds:	
Total local revenues	0
Total private revenues	0
Total other state restricted revenues	500,000
State general fund/general purpose	\$ 0
Sec. 153. INFECTIOUS DISEASE CONTROL	
Disease surveillance	\$ 500,000
GROSS APPROPRIATION	\$ 500,000
Appropriated from:	
Special revenue funds:	
Total other state restricted revenues	500,000
State general fund/general purpose	\$ 0

PART 2
PROVISIONS CONCERNING APPROPRIATIONS

GENERAL SECTIONS

Sec. 201. (1) Pursuant to section 30 of article IX of the state constitution of 1963, total state spending in part 1 from state sources for fiscal year 1998-99 is estimated at \$2,838,861,000.00. The itemized statement below identifies appropriations from which spending to units of local government will occur:

DEPARTMENTWIDE ADMINISTRATION

Departmental administration and management

\$ 1,618,000

COMMUNITY MENTAL HEALTH/SUBSTANCE ABUSE SERVICES PROGRAMS

Homelessness formula grant program-state match	708,800
Pilot projects in prevention for adults and children	1,516,200
Community substance abuse prevention, education, and treatment programs	19,419,700
Community mental health programs	829,927,300
Respite services	3,000,000
OBRA implementation	2,459,100

INFECTIOUS DISEASE CONTROL

AIDS prevention, testing, and care programs	1,466,800
Sexually transmitted disease control programs	452,900

LOCAL HEALTH ADMINISTRATION AND GRANTS

Special population health care	29,600
Local public health operations	38,712,600

CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION

Cancer prevention and control program	397,000
Diabetes local agreements	1,275,000
Employee wellness program grants	1,545,100
School health curriculum	2,000,000
Smoking prevention program	2,880,000

COMMUNITY LIVING, CHILDREN, AND FAMILIES

Adolescent health care services	1,358,000
Family planning local agreements	1,230,300
Family support subsidy	7,006,900
Local MCH services	246,100
Pregnancy prevention program	2,511,800
Prenatal care outreach and service delivery support	3,190,000

CHILDREN'S SPECIAL HEALTH CARE SERVICES

Case management services	1,433,200
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MEDICAL SERVICES

Indigent medical program	1,383,800
Hospital disproportionate share payments	18,000,000
Hospital services and therapy	17,559,300
Physician services	5,305,100
Pharmaceutical services	7,265,000

Home health services	1,195,200
Transportation	184,500
Health plan services	54,575,700
OFFICE OF SERVICES TO THE AGING	
Community services	13,681,400
Nutrition services	12,363,000
Senior volunteer services	3,845,300
Michigan emergency pharmaceutical program	140,000
Respite care program	3,500,000
CRIME VICTIMS SERVICES COMMISSION	
Crime victims' rights services	3,400,000
TOTAL OF PAYMENTS TO LOCAL UNITS OF GOVERNMENT	\$ 1,066,782,700

(2) If it appears to the principal executive officer of a department or branch that state spending to local units of government will be less than the amount that was projected to be expended under subsection (1), the principal executive officer shall immediately give notice of the approximate shortfall to the state budget director.

Sec. 202. The expenditures and funding sources authorized under this act are subject to the management and budget act, 1984 PA 431, MCL 18.1101 to 18.1594.

Sec. 203. Funds for which the state is acting as the custodian or agent are not subject to annual appropriation.

Sec. 204. As used in this act:

- (a) "AIDS" means acquired immunodeficiency syndrome.
- (b) "CMH" means community mental health.
- (c) "CMHSP" means a community mental health service program as that term is defined in section 100a of the mental health code, 1974 PA 258, MCL 330.1100a.
- (d) "DAG" means the United States department of agriculture.
- (e) "Department" or "MDCH" means the Michigan department of community health.
- (f) "DSH" means disproportionate share hospital.
- (g) "EPSDT" means early and periodic screening, diagnosis, and treatment.
- (h) "FTE" means full-time equated position.
- (i) "GME" means graduate medical education.
- (j) "HIV" means human immunodeficiency virus.
- (k) "HMO" means health maintenance organization.
- (l) "IDEA" means individuals with disabilities education act.
- (m) "IDG" means interdepartmental grant.
- (n) "IDT" means intradepartmental transfer.
- (o) "MCH" means maternal and child health.
- (p) "Qualified 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.
- (q) "Title X" means title X of the public health services act, 300 U.S.C. 1001.
- (r) "Title XVIII" means title XVIII of the social security act, chapter 531, 49 Stat. 620, 42 U.S.C. 1395 to 1395b, 1395b-2, 1395c to 1395i, 1395i-2 to 1395i-4, 1395j to 1395t, 1395u to 1395w-2, 1395w-4 to 1395zz, and 1395bbb to 1395ccc.
- (s) "Title XIX" means title XIX of the social security act, chapter 531, 49 Stat. 620, 42 U.S.C. 1396 to 1396d, 1396f to 1396g, and 1396i to 1396s.
- (t) "Title XX" means title XX of the social security act, chapter 531, 49 Stat. 620, 42 U.S.C. 1397 to 1397f.

Sec. 206. (1) Beginning October 1, 1998, there is a hiring freeze imposed on the state classified civil service. State departments and agencies are prohibited from hiring any new full-time state classified civil service employees and prohibited from filling any vacant state classified civil service positions. This hiring freeze does not apply to internal transfers of classified employees from 1 position to another within a department or to positions that are funded with 80% or more federal or restricted funds.

(2) The state budget director shall grant exceptions to this hiring freeze when the state budget director believes that the hiring freeze will result in the state department or agency being unable to deliver basic services. The state budget director shall report by the fifteenth of each month to the chairpersons of the senate and house appropriations committees the number of exclusions to the hiring freeze approved during the previous month and the justification for the exclusion.

Sec. 207. If the revenue collected by the department from fees and collections exceeds the amount appropriated in part 1, the revenue may be carried forward 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.

Sec. 208. Except as provided in section 111b(11) of the social welfare act, 1939 PA 280, MCL 400.111b, relative to medical services providers, the department shall not pay for a billing received from a contractor or service provider that is submitted more than 12 months after the bill for a good or service is provided.

Sec. 209. (1) From the amounts appropriated in part 1, no greater than the following amounts are supported with federal maternal and child health, preventive health and health services, substance abuse block grant, healthy Michigan fund, and Michigan health initiative funds:

(a) Maternal and child health block grant	\$ 20,552,000.
(b) Preventive health and health services block grant	\$ 4,982,300.
(c) Substance abuse block grant	\$ 62,857,700.
(d) Healthy Michigan funds	\$ 44,768,100.
(e) Michigan health initiative.....	\$ 9,600,000.

(2) On or before February 1, 1999, the department shall report to the house and senate appropriations subcommittees on community health, the house and senate fiscal agencies, and the state budget director on the detailed name and amounts of federal, restricted, private, and local sources of revenue that support the appropriations in each of the line items in part 1 of this act.

(3) Upon the release of the fiscal year 1999-2000 executive budget recommendation, the department shall report to the same parties in subsection (2) 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 fiscal year 1999-2000 executive budget proposal.

(4) The department shall provide to the same parties in subsection (2) all revenue source detail for consolidated revenue line item detail upon request to the department.

Sec. 210. The state departments, agencies, and commissions receiving tobacco tax funds from part 1 shall report by October 1, 1998, to the senate and house appropriations committees, the senate and house fiscal agencies, and the state budget director on the following:

- (a) Detailed spending plan by appropriation line item including description of programs.
- (b) Allocations from funds appropriated under these sections.
- (c) Description of allocations or bid processes including need or demand indicators used to determine allocations.
- (d) Eligibility criteria for program participation and maximum benefit levels where applicable.
- (e) Outcome measures to be used to evaluate programs.
- (f) Any other information deemed necessary by the house or senate appropriations committees or the state budget director.

Sec. 211. The use of state restricted tobacco tax revenue received for the purpose of tobacco prevention, education, and reduction efforts and deposited in the healthy Michigan fund shall not be used for lobbying as defined in 1978 PA 472, MCL 4.411 to 4.431.

Sec. 212. The department of civil service shall bill departments and/or agencies at the end of the first fiscal quarter for the 1% charges authorized by section 5 of article XI of the state constitution of 1963. Payments shall be made for the total amount of the billing by the end of the second fiscal quarter.

Sec. 213. On October 1, 1998 and April 1, 1999, the department shall make a list available of reports to be prepared pursuant to the provisions of this act. The list shall be distributed to house and senate appropriations subcommittees on community health, house and senate fiscal agencies, house and senate central staffs, and the state budget director. The listed parties may request copies of reports from the list and submit the request back to the department. The department shall provide copies of the requested reports no later than the date the report is due to those persons requesting the reports.

Sec. 214. The source of funding for the part 1 appropriation for the Arab-American and Chaldean council, and ACCESS primary care services is the federal preventive health and health services block grant.

Sec. 215. (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.

(2) The department's ability to satisfy appropriation deductions in part 1 shall not be limited to collections and accruals pertaining to services provided in fiscal year 1998-99, but shall also include reimbursements, refunds, adjustments, and settlements from prior years.

(3) The department shall report promptly to the house and senate appropriations subcommittees on community health on all reimbursements, refunds, adjustments, and settlements from prior years.

Sec. 216. (1) 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, for the department.

(2) The director shall strongly encourage firms with which the department contracts to subcontract with certified businesses in depressed and deprived communities for services or supplies, or both.

Sec. 217. Funds appropriated in part 1 shall not be used for the purchase of foreign goods and/or services when competitively priced and of comparable quality American goods and/or services are available.

Sec. 218. The department shall provide a report on the progress of Medicaid managed mental health services to the members of the senate and house appropriations subcommittees on community health, the senate committee on

families, mental health, and human services, and the house committee on mental health by September 30, 1999. The report shall summarize actions taken by the department community mental health services programs and substance abuse coordinating agency networks to implement these specialized managed care programs, and shall include summary information on inpatient and partial hospitalization and costs, access to services, and summary information on consumer satisfaction measures.

Sec. 220. (1) The department shall submit to the department of management and budget, the house and senate appropriations committees, the house and senate fiscal agencies and the house and senate standing committees having jurisdiction over technology issues, quarterly reports on the department's efforts to change the department's computer software and hardware as necessary to perform properly in the year 2000 and beyond. These reports shall identify actual progress in comparison to the department's approved work plan for these efforts. These reports also shall identify and forward as appropriate the funding sources that should support the work performed.

(2) The department may present progress billings to the department of management and budget for the costs incurred in changing computer software and hardware as necessary to perform properly in the year 2000 and beyond. At the time progress billings are presented for reimbursement, the department shall identify and forward as appropriate the funding sources that should support the work performed.

Sec. 222. (1) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$100,000,000.00 for federal contingency funds. These funds are not available for expenditure until they have been transferred to another line item in this act pursuant to section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.

(2) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$10,000,000.00 for state restricted contingency funds. These funds are not available for expenditure until they have been transferred to another line item in this act pursuant to section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.

(3) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$10,000,000.00 for local contingency funds. These funds are not available for expenditure until they have been transferred to another line item in this act pursuant to section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.

(4) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$10,000,000.00 for private contingency funds. These funds are not available for expenditure until they have been transferred to another line item in this act pursuant to section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.

Sec. 223. Basic health services for the fiscal year beginning October 1, 1998, for the purpose of part 23 of the public health code, 1978 PA 368, MCL 333.2301 to 333.2321, are those described by the department in its proposed program statement dated October 16, 1981, and in the "prenatal postpartum care, proposed basic health service program statement" included in the department document entitled "A Study of Prenatal Care as a Basic Service," dated March 1, 1986, and for which the legislature has made funds available in amounts necessary to ensure their availability and accessibility. The services described in the statement are: immunizations, communicable disease control, venereal disease control, tuberculosis control, prevention of gonorrhea eye infection in newborns, screening newborns for phenylketonuria, screening newborns for hypothyroidism, health/medical annex of emergency preparedness plan, licensing and surveillance of agricultural labor camps, and prenatal care.

Sec. 224. The department may contract with the Michigan public health institute for the design and implementation of projects and for other public health related activities prescribed in section 2611 of the public health code, 1978 PA 368, MCL 333.2611. The department may develop a master agreement with the institute for up to a 3-year period to carry out these purposes. The department shall report on projects to be carried out by the institute, expected project duration, and project cost by November 1, 1998 and May 1, 1999 to the house and senate appropriations subcommittees on community health, senate and house fiscal agencies, and the state budget director. If the reports are not received by the specified dates, no funds shall be disbursed. For the purposes of this section, the Michigan public health institute shall be considered a public health agency.

Sec. 225. No funds appropriated in part 1 shall be expended for media activities regarding the alleged dangers of naturally occurring radon gas.

Sec. 227. The department may receive and expend funds dedicated to the establishment of programs for education, research and treatment services related to pathological gambling addictions.

Sec. 228. By November 1, 1998, the department shall report to the senate and house appropriations subcommittees on community health, the senate and house fiscal agencies, and the state budget director the budget detail for the line items that have been consolidated in the fiscal year 1998-99 appropriation bill. The budget detail shall include the amounts allocated for program elements that correspond to the line items as contained in the fiscal year 1997-98 appropriation bill as well as planned allocations to local agencies by program element. On a quarterly basis, the department shall report expenditures in the same format as the budgeted detail, and provide copies of any allocation changes made during the course of the fiscal year.

Sec. 229. The department shall receive and retain copies of all reports funded from the appropriations in part 1.

Sec. 230. (1) The department of management and budget and each principal executive department and agency shall provide to the senate and house of representatives standing committees on appropriations and the senate and house

fiscal agencies a monthly report on all personal service contracts awarded without competitive bidding, pricing, or ratesetting. The notification shall include all of the following:

- (a) The total dollar amount of the contract.
- (b) The duration of the contract.
- (c) The name of the vendor.
- (d) The type of service to be provided.

(2) For personal service contracts of \$100,000.00 or more, the department of management and budget shall provide a monthly report including all of the following:

- (a) The total dollar amount of the contract.
- (b) The duration of the contract.
- (c) The name of the vendor.
- (d) The type of service to be provided.

(3) The department of management and budget shall provide a monthly listing of all bid requests or requests for proposal that were issued.

(4) Each principal executive department and agency shall provide a monthly summary listing of information that identifies any authorizations for personal service contracts that are provided to the department of civil service pursuant to delegated authority granted to each principal executive department and agency related to personal service contracts.

Sec. 231. Within 10 working days after formal presentation of the executive budget, the state budget director shall report to the members of the senate and house appropriations committees and the senate and house fiscal agencies on the amounts and sources of all capped federal funds, special revenue funds as defined in the state of Michigan's comprehensive annual financial report, and the healthy Michigan fund, and an accounting of the state departments or agencies in which the executive budget proposes to spend the funds.

Sec. 232. Sixty days before beginning any effort to privatize, the department shall submit a complete project plan to the appropriate house and senate appropriations subcommittees and the house and senate fiscal agencies. The plan shall include the criteria under which the privatization initiative will be evaluated. The evaluation shall be completed and submitted to the appropriate house and senate appropriations subcommittees and the house and senate fiscal agencies within 30 months.

Sec. 233. If a department enters into a personal services contract with any temporary service agency or similar contractor that hires or subcontracts with a person who retired from employment in the department under the early retirement program under section 19f of the state employees' retirement act, 1943 PA 240, MCL 38.19f, the retired state employee shall be limited to 500 hours for professional, technical, or clerical services and 250 hours for management services. This limitation does not apply to computer technology services. This provision only applies during a 24-month period after the date of retirement. This section applies to each principal executive department and agency.

Sec. 235. The department shall require that providers of Medicaid and non-Medicaid services, such as nursing home providers, community mental health service programs, and other health related services, maintain waiting lists for service needs not met, preserving the confidentiality of clients as required by law. The waiting lists shall include data by type of service and provide an average length of time persons have been waiting for services. No later than April 1, 1999, the department shall provide a report on the information required by this section to the members of the house and senate appropriations subcommittees on community health, the house and senate fiscal agencies, and the state budget director.

DEPARTMENTWIDE ADMINISTRATION

Sec. 302. From funds appropriated for worker's compensation, the department may make payments in lieu of worker's compensation payments for wage/salary and related fringe benefits for employees who return to work under limited duty assignments. Employees returning to work under limited duty assignments who are funded under this section will be in addition to the facility's existing staffing authorization.

Sec. 303. Funds appropriated in part 1 for the community health advisory council may be used for member per diems of \$50.00 and other council expenditures.

Sec. 305. The department shall provide quarterly reports concerning the department's revenue and expenditure status to the senate and house appropriations committees, the house and senate fiscal agencies, and the state budget director.

Sec. 309. The department is prohibited from requiring first-party payment from individuals or families with a taxable income of \$9,000.00 or less for mental health services.

Sec. 310. The specific amounts indicated in sections 103, 104, and 105 of this act as restricted revenue for financing appropriations from federal, state restricted, local, private, and CMHSP - purchase of state services contracts are estimates of the proportion of the total amounts expected to be collected, and the department may satisfy any individual restricted revenue deduct amount from the total revenues of all of those revenue sources. A report shall be provided by April 15 to the fiscal agencies and the state budget director on actual collections by revenue source for each appropriation unit during the previous fiscal year.

Sec. 311. The department shall make application for funding under the medicare rural hospital flexibility program for planning, network development and critical access hospital designation activities.

Sec. 312. The department shall seek a Medicaid waiver from the requirement that prohibits reimbursement for psychiatric services to persons between the ages of 21 and 65 provided by institutions for mental disease. The waiver request shall be for both public and private hospitals providing such services. A copy of the federal waiver request shall be provided to the house and senate appropriations subcommittees on community health, and to the house and senate fiscal agencies at the time of submission.

Sec. 313. In implementing appropriated services pursuant to the pilot projects in prevention for adults and children and the maternal and child health outreach and advocacy program line items, the department shall work cooperatively with the department of education and the family independence agency to address issues and coordinate activities for community-based collaborative prevention services.

MENTAL HEALTH/SUBSTANCE ABUSE SERVICES ADMINISTRATION AND SPECIAL PROJECTS

Sec. 350. The department shall not enter into new contracts with private attorneys for legal services for the purposes of gaining and maintaining occupancy to a community living arrangement. The department may enter into a contract with the protection and advocacy service, authorized under section 931 of the mental health code, 1974 PA 258, MCL 330.1931, or a similar organization to provide legal services for purposes of gaining and maintaining occupancy in a community living arrangement which is under lease or contract with the department or a community mental health services program board to provide services to persons with mental illness or developmental disability. State funds shall not be used for legal services to represent private investors purchasing homes for these purposes.

Sec. 351. The funds appropriated in part 1 for community residential services programs may be used for basic care in cases where individuals are not eligible to receive social security benefits and are not otherwise capable of supporting themselves out of their own resources. Funds may be used for aftercare services or to prevent admissions to state hospitals and centers through residential and support services. Expenditures and allocations may be authorized for CMHSPs and state hospitals, centers, and placement agencies.

Sec. 352. Five hundred thousand dollars is appropriated in part 1 from the healthy Michigan fund to the agency designated by the governor pursuant to section 931 of the mental health code, 1974 PA 258, MCL 330.1931, for the purpose of providing protection and advocacy services for individuals with substance abuse disorders. The agency shall provide information and referral services, written materials for consumers, and monitoring of facilities providing care or treatment and investigate complaints. Evaluation of substance abuse services provided by the department of corrections shall be provided by this agency in cooperation with other entities.

COMMUNITY MENTAL HEALTH/SUBSTANCE ABUSE SERVICES PROGRAMS

Sec. 401. (1) Funds appropriated in section 104 are intended to support a system of comprehensive community mental health services under the full authority and responsibility of local CMHSPs. The department shall ensure that each board provides all of the following:

- (a) A system of single entry and single exit.
 - (b) A complete array of mental health services which shall include, but shall not be limited to, all of the following services: residential and other individualized living arrangements, outpatient services, acute inpatient services, and long-term, 24-hour inpatient care in a structured, secure environment.
 - (c) The coordination of inpatient and outpatient hospital services through agreements with state-operated psychiatric hospitals, units, and centers in facilities owned or leased by the state, and privately-owned hospitals, units, and centers licensed by the state pursuant to sections 134 through 149b of the mental health code, 1974 PA 258, MCL 330.1134 to 330.1149b.
 - (d) Individualized plans of service that are sufficient to meet the needs of individuals, including those discharged from psychiatric hospitals or centers, and that ensure the full range of recipient needs is addressed through the CMHSP's program or through assistance with locating and obtaining services to meet these needs.
 - (e) A system of case management to monitor and ensure the provision of services consistent with the individualized plan of services or supports.
 - (f) A system of continuous quality improvement.
 - (g) A system to monitor and evaluate the mental health services provided.
- (2) In partnership with CMHSPs, the department shall establish a process to ensure the long-term viability of a single entry and exit and locally controlled community mental health system.
- (3) A contract between a CMHSP and the department shall not be altered or modified without a prior written agreement of the parties to the contract.

Sec. 402. (1) From funds appropriated in section 104, final authorizations to CMHSPs shall be made upon the execution of contracts between the department and CMHSPs. 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.

(2) The funds appropriated in section 104 for the purchase of state service contracts are for the purchase of state hospital and center services, or for approved community-based programs that reduce utilization of state provided services. These funds shall be authorized to CMHSPs based on estimates approved by the department as part of the negotiated contract.

(3) Funds that are authorized to CMHSPs, when used to purchase state services, shall be provided to state hospitals, centers, and placement agencies based on the per diem and billing arrangements approved by the department in the negotiated contract.

(4) Current billing and collection procedures for the net cost of state provided services shall continue as specified in chapter 3 of the mental health code, 1974 PA 258, MCL 330.1302 to 330.1320.

(5) The department may access funds from the appropriation directly for patients who have no county affiliation or for whom county charges are exempted.

(6) The funds appropriated in section 104 from purchase of state service contracts shall not result in increased costs to counties in excess of the local match required under section 302 and section 308 of the mental health code, 1974 PA 258, MCL 330.1302 and 330.1308.

Sec. 405. Funds appropriated in part 1 for CMHSP services and community demand may be reserved and carried forward pursuant to provisions in the mental health code, 1974 PA 258, MCL 330.1001 to 330.2106.

Sec. 406. From the funds appropriated for CMHSP, \$3,360,000.00 will be directed toward providing multicultural special needs projects.

Sec. 407. (1) Not later than April 10 of each fiscal year, the department shall provide a report on the community mental health services programs to the members of the house and senate appropriations subcommittees on community health, the house and senate fiscal agencies, and the state budget director which shall include information required by this section. This report will be updated to the extent possible, based on available data, by September 30.

(2) The report shall contain information for each community mental health services board and a statewide summary, each of which shall include at least the following information:

(a) A demographic description of service recipients which, minimally, shall include reimbursement eligibility, client population, age, ethnicity, housing arrangements, and diagnosis.

(b) Per capita expenditures by client population group.

(c) Financial information which, minimally, shall include a description of funding authorized; expenditures by client group and fund source; and cost information by service category, including administration. Service category shall include all department approved services.

(d) Data describing service outcomes which shall include but not be limited to an evaluation of consumer satisfaction, consumer choice, and quality of life concerns including but not limited to housing and employment.

(e) Information about access to community mental health services programs which shall include but not be limited to:

(i) The number of people receiving requested services.

(ii) The number of people who requested services but did not receive services.

(f) The number of second opinions requested under the code and the determination of any appeals.

(g) An analysis of information provided by community mental health service programs in response to the needs assessment requirements of the mental health code, including information about the number of persons in the service delivery system who have requested and are clinically appropriate for different services.

Sec. 408. (1) By April 10, 1999, the department shall report the following data from fiscal year 1997-98 on community mental health services programs to the senate and house appropriations subcommittees on community health, the senate and house fiscal agencies, and the state budget director:

(a) An estimate of the number of FTEs employed or contracted directly by the CMHSPs as of September 30, 1998 and an estimate of the number of FTEs employed through contracts with provider organizations as of September 30, 1998.

(b) Lapses and carryforwards for CMHSPs, including historical lapse and carryforward data.

(c) Contracts for mental health services entered into by CMHSPs with providers, including amounts and rates, organized by type of service provided.

(2) The department shall include these data reporting requirements in the annual contract with individual CMHSPs.

(3) The department shall take all reasonable actions to ensure that the requested data reported are complete and consistent among all CMHSPs.

(4) Agencies contracting with CMHSPs shall provide 3 days' notice to the CMHSP of all committee and full board meetings and shall conduct all portions of meetings pertaining to CMHSPs funded programs in the same manner as required for meetings of public bodies under the open meetings act, 1976 PA 267, MCL 15.261 to 15.275.

Sec. 409. (1) The 75 cents per hour per employee wage pass-through for workers in residential services settings that was funded to CMHSPs beginning January 1, 1998, shall continue to be paid to direct care workers in fiscal year 1998-99.

(2) From the funds appropriated in part 1 for community mental health services programs, money shall be utilized to establish a pool of funds available to local community mental health services programs, sufficient to provide for increasing the wages and the employer's share of federal insurance contributions act costs of direct care staff by 50 cents per hour per direct care worker in local residential settings and for paraprofessional and other nonprofessional direct care workers in day programs, supported employment, and other vocational service programs, effective April 1, 1999.

(3) From the funds appropriated in part 1 for community mental health services programs, money shall be utilized to establish a pool of funds available to local community mental health services programs, sufficient to provide for increasing the wages of direct care staff by 25 cents per hour for paraprofessional and other nonprofessional direct care workers in day programs, supported employment, and other vocational service programs, effective April 1, 1999.

(4) Each CMHSP may make application to the department to receive funds for the direct care worker wage pass-through fund, not to exceed their proportionate share of the money allocated for this purpose. The application shall specify the amount of funds requested and the agencies/programs to receive the wage pass-through funds requested.

(5) Each CMHSP awarded wage pass-through funds shall report on the actual expenditures of such funds in the format to be determined by the department. Any funds not utilized by the CMHSP for the purpose specified in the wage pass-through application shall be deducted from the base allocation to the CMHSP in the subsequent fiscal year.

Sec. 410. The department shall take steps to ensure that the administrative costs of purchase of service residential contracts do not exceed previous levels. The department shall report annually to the house and senate appropriations subcommittees on community health information about administrative and other provider costs.

Sec. 411. (1) The funds appropriated in section 104 for the state disability assistance substance abuse services program shall be used to support per diem room and board payments in substance abuse residential facilities. Eligibility of clients for the state disability assistance substance abuse services program shall include needy persons 18 years of age or older, or emancipated minors, who reside in a substance abuse treatment center.

(2) The department shall reimburse all licensed substance abuse programs eligible to participate in the program at a rate equivalent to that paid by the family independence agency 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.

Sec. 412. (1) The amount appropriated in section 104 for substance abuse prevention, education, and treatment grants shall be expended for contracting with coordinating agencies or designated service providers.

(2) The department shall establish a fee schedule for providing substance abuse services and charge participants in accordance with their ability to pay. The mechanisms and fee schedule shall be developed by the department with input from substance abuse coordinating agencies.

Sec. 413. (1) By April 15, 1999, the department shall report the following data from fiscal year 1997-98 on substance abuse prevention, education, and treatment programs to the senate and house appropriations subcommittees on community health and the senate and house fiscal agencies:

(a) Expenditures stratified by coordinating agency, by central diagnosis and referral agency, by fund source, by subcontractor, by population served, and by service type. Additionally, data on administrative expenditures by coordinating agency and by subcontractor shall be reported.

(b) Expenditures per state client, with data on the distribution of expenditures reported using a histogram approach.

(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.

(d) Collections from other first- or third-party payers, private donations, or other state or local programs, by coordinating agency, by subcontractor, by population served, and by service type.

(2) The department shall take all reasonable actions to ensure that the required data reported are complete and consistent among all coordinating agencies.

Sec. 414. The funding in section 104 for substance abuse services shall be distributed in a manner so as to provide priority to service providers which furnish child care services to clients with children.

Sec. 415. If the state's fiscal year 1998-99 federal block grant allocation for substance abuse services is increased by \$1,900,000.00 or more from the prior fiscal year and federal funding is not awarded to the Odyssey House residential substance abuse treatment program, the department shall allocate no less than \$1,900,000.00 to the Odyssey House residential substance abuse treatment program.

Sec. 416. By September 30, 1999, the department shall report to the house and senate appropriations subcommittees on community health and the house and senate fiscal agencies on how the existing and new substance abuse funding was utilized, the amount of services provided, and their impact on reducing substance abuse problems.

Sec. 418. If a person licensed to provide substance abuse services receives federal substance abuse prevention block grant funds, any priority positions established under state statute for recipients of their services shall apply only after serving those priority positions granted under the conditions of the federal block grant.

Sec. 419. The department shall require that CMHSPs assure access to the consumer grievance and appeal rights and protections contained in the signed fiscal year 1998-99 DCH-CMHSP contract for managed specialty supports and services, including the grievance and appeal technical requirement labeled attachment 4.7.4.1 effective October 1, 1998.

Sec. 421. The department shall assure that substance abuse treatment is provided to applicants and recipients of public assistance through the family independence agency who are required to obtain substance abuse treatment as a condition of eligibility for public assistance.

Sec. 422. (1) The department shall ensure that each contract with a CMHSP shall require the CMHSP to implement programs to encourage diversions of persons with serious mental illness, serious emotional disturbance, or developmental disability from possible jail incarceration when appropriate.

(2) Each CMHSP shall have jail diversion services and shall work toward establishing working relationships with representative staff of local law enforcement agencies. Such agencies include the 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.

Sec. 423. The department shall contract directly with the Salvation Army harbor light program for the provision of substance abuse services at not less than the amount provided in fiscal year 1997-1998.

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

Sec. 601. (1) In funding of staff in the financial support division, reimbursement, and billing and collection sections, priority shall be given to obtaining third-party payments for services. Collection from individual recipients of services and their families shall be handled in a sensitive and nonharassing manner.

(2) The department shall continue a revenue recapture project to generate additional revenues from third parties related to cases which have been closed or are inactive. Revenues collected through project efforts are appropriated to the department for departmental costs and contractual fees associated with these retroactive collections and to improve ongoing departmental reimbursement management functions so that the need for retroactive collections will be reduced or eliminated.

Sec. 602. Unexpended and unencumbered amounts and accompanying expenditure authorizations up to \$2,000,000.00 remaining on September 30, 1999 from pay telephone revenues and the amounts appropriated in section 105 for gifts and bequests for patient living and treatment environments shall be carried forward for 1 fiscal year. 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.

Sec. 603. The funds appropriated in section 105 for forensic mental health services provided to the department of corrections are in accordance with the interdepartmental plan developed in cooperation with the department of corrections. The department is authorized to receive and expend funds from the department of corrections in addition to the appropriations in section 105 to fulfill the obligations outlined in the interdepartmental agreements.

Sec. 604. (1) Subject to the funds appropriated in section 105 for hospitals and centers, the department shall authorize FTEs and funds to each hospital and center on the basis of the actual utilization of each of the hospitals and centers.

(2) Funds that become available as a result of reductions in the utilization of state-operated hospitals and centers are intended to be retained by CMHSP to support community-based services.

Sec. 605. (1) The department shall not implement any closures or consolidations of state hospitals, centers, or agencies until CMHSPs have programs and services in place for those persons currently in those facilities and a plan for service provision for those persons who would have been admitted to those facilities.

(2) All closures or consolidations are dependent upon adequate department-approved CMHSP plans which include a discharge and aftercare plan for each person currently in the facility. A discharge and aftercare plan shall address the person's housing needs. A homeless shelter or similar temporary shelter arrangements are inadequate to meet the person's housing needs.

(3) Four months after the certification of closure required in section 19(6) of 1943 PA 240, MCL 38.19, the department shall provide a closure plan to the house and senate appropriations subcommittees.

(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 responsible for providing services for persons previously served by the operations.

Sec. 606. (1) The department, in conjunction with the CMHSPs, will continue to assure the provision of a complete array of services on a statewide basis. Such an array of services shall include, but is not limited to, residential and other individualized living arrangements, outpatient services, acute inpatient services, and long-term, 24-hour inpatient care in a structured, secure environment.

(2) Long-term psychiatric beds, whether occupied or unoccupied, whether operated by the state or an agency with whom the department or a CMHSP contracts, will be available at various locations across the state.

(3) The department and CMHSPs shall continue to develop and facilitate community placement opportunities for persons with developmental disabilities, adults with mental illness, and children with emotional disturbance for whom such placement is clinically appropriate.

(4) The department and CMHSPs shall not discriminate against the placement of an individual in a state psychiatric hospital when long-term psychiatric inpatient care is appropriate. This subsection does not prohibit the department and CMHSPs from considering consumer choice, quality of care, and cost of care in making the hospital referral.

PUBLIC HEALTH ADMINISTRATION

Sec. 701. Of the amount appropriated in section 106 from revenues from fees and collections, not more than \$250,000.00 received from the sale of vital records death data shall be used for improvements in the vital records and

health statistics program. The amount described in this section shall not revert to the general fund at the end of the fiscal year ending September 30, 1999. Not later than December 1, 1999, the amount of any unexpended balances and the proposed uses for those balances shall be reported to the senate and house fiscal agencies.

INFECTIOUS DISEASE CONTROL

Sec. 801. State funds appropriated in any other account in part 1 may be used to supplant not more than \$350,000.00 in federal funds projected for immunization, if the federal funds are unavailable. The department shall inform the senate and house appropriations subcommittees on community health, the senate and house fiscal agencies, and the state budget director of the specific line items reduced pursuant to this section.

Sec. 802. In the expenditure of funds appropriated in section 107 for AIDS programs, the department and its subcontractors shall ensure that adolescents receive priority for prevention, education, and outreach services.

Sec. 803. In developing and implementing AIDS provider education activities, the department may provide funding to the Michigan state medical society to continue to serve as lead agency to convene a consortium of health care providers, to design needed educational efforts, to fund other statewide provider groups, and to assure implementation of these efforts, in accordance with a plan approved by the department.

Sec. 804. If an employee of the department of corrections comes in contact with a prisoner and that contact involves the risk of exposure to the prisoner's blood or bodily fluids, upon the employee's request the department of corrections shall inform the employee of the results of the prisoner's HIV test if known by the department.

Sec. 807. From the funds appropriated in part 1, \$100,000.00 shall be used to support a pilot project to vaccinate 2-year-old children countywide with hepatitis A vaccine, for the prevention of future outbreaks of hepatitis A in Calhoun County.

Sec. 808. From the funds appropriated in part 1 for AIDS prevention, testing, and care programs, the department shall continue the AIDS drug assistance program at no less than the fiscal year 1997-98 eligibility criteria and drug formulary.

Sec. 809. Of the funds appropriated in part 1, \$4,600,000.00 from the sexually transmitted disease control local agreements line shall be allocated to the hepatitis B vaccine program for the purpose of testing and vaccination of individuals attending sexually transmitted disease, family planning, and adolescent health clinics in an effort to reduce the spread of hepatitis B, and for administration of the program by the local clinics.

LOCAL HEALTH ADMINISTRATION AND GRANTS

Sec. 903. The amount appropriated in section 110 for implementation of the 1993 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 reimburse local health departments for costs incurred related to implementation of section 17015(15) of the public health code, 1978 PA 368, MCL 333.17015.

Sec. 905. If a county receiving funding from the amount appropriated in section 110 for local public health infrastructure is part of a district health department or in an associated arrangement with other local health departments on June 1, 1992 and then ceases to be part of such an arrangement, the allocation to that county from the local public health infrastructure appropriation shall be reduced by 50% from the amount originally allocated.

Sec. 908. The department shall provide a report quarterly to the house and senate appropriations subcommittees on community health, the senate and house fiscal agencies, and the state budget director on the expenditures and activities undertaken by the lead abatement program. The report shall include but not be 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.

Sec. 909. (1) Funds appropriated in part 1 for local public health operations shall be prospectively allocated to local health departments to support immunizations, infectious disease control, sexually transmitted diseases, hearing screening, vision services, food protection, public water supply, private groundwater supply, and on-site sewage management.

(2) Local public health departments will be held to contractual standards for the services in subsection (1).

(3) Distributions in subsection (1) shall be made only to counties that maintain local spending in fiscal year 1998-99 of at least the amount expended in fiscal year 1992-93 for cost shared services.

(4) By April 1, 1999, the department shall report to the senate and house appropriation subcommittees on community health, the senate and house fiscal agencies, and the state budget director on the planned allocation of the funds appropriated for local public health operations.

(5) It is the intent of the legislature that this appropriation be fully expended in fiscal year 1998-99.

Sec. 910. The department shall ensure compliance with applicable state certification requirements and protection of the workers and public health and safety at lead abatement project sites for which the department receives written notice of lead-based paint abatement activity.

CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION

Sec. 1001. (1) From the state funds appropriated in section 111, the department shall allocate funds to promote awareness, education, and early detection of breast, cervical, and prostate cancer, and provide for other health promotion media activities.

(2) The department shall increase funds allocated to promote awareness, education, and early detection of breast, cervical, and prostate cancer by \$750,000.00 above the amount allocated for this purpose in fiscal year 1996-97.

(3) Any excess funds not authorized or allocated in the cancer prevention and control line item in part 1 shall be utilized for prostate cancer prevention programs.

Sec. 1002. (1) The amount appropriated in section 111 for school health and education programs shall be allocated in 1998-99 to provide grants to or contract with certain districts and intermediate districts for the provision of a school health education curriculum. Provision of the curriculum, such as the Michigan model or another comprehensive school health education curriculum, shall be in accordance with the health education goals established by the Michigan model for the comprehensive school health education state steering committee. The state steering committee shall be comprised of a representative from each of the following offices and departments:

- (a) The department of education.
- (b) The department of community health.
- (c) The public health agency in the department of community health.
- (d) The office of substance abuse services in the department of community health.
- (e) The family independence agency.
- (f) The department of state police.

(2) Upon written or oral request, a pupil not less than 18 years of age or a parent or legal guardian of a pupil less than 18 years of age, within a reasonable period of time after the request is made, shall be informed of the content of a course in the health education curriculum and may examine textbooks and other classroom materials that are provided to the pupil or materials that are presented to the pupil in the classroom. This subsection does not require a school board to permit pupil or parental examination of test questions and answers, scoring keys, or other examination instruments or data used to administer an academic examination.

Sec. 1003. Funds appropriated in section 111 for the Alzheimer's information network shall be used to provide information and referral services through regional networks for persons with Alzheimer's disease or related disorders, their families, and health care providers.

Sec. 1004. From the amounts appropriated in section 111 for the cancer prevention and control program, the department shall allocate funds to the Hurley and Harper hospitals' prostate cancer demonstration projects in fiscal year 1998-99.

Sec. 1005. From the funds appropriated in section 111 for physical fitness, nutrition, and health, up to \$1,000,000.00 may be allocated to the Michigan physical fitness and sports foundation. The allocation to the Michigan physical fitness and sports foundation is contingent upon the foundation providing at least a 20% cash match.

Sec. 1006. In spending the funds appropriated in section 111 for the smoking prevention program, priority shall be given to prevention and smoking cessation programs for pregnant women, women with young children, and adolescents.

Sec. 1007. (1) The funds appropriated in section 111 for violence prevention shall be used for, but not be limited to, the following:

- (a) Programs aimed at the prevention of spouse, partner, or child abuse and rape.
- (b) Programs aimed at the prevention of workplace violence.

(2) In awarding grants from the amounts appropriated in part 1 for violence prevention, the department shall give equal consideration to public and private nonprofit applicants.

(3) From the funds appropriated in section 111 for violence prevention, the department may include local school districts as recipients of the funds for family violence prevention programs.

Sec. 1008. (1) From the amount appropriated in section 111 for the cancer prevention and control program, funds shall be allocated to the Karmanos cancer institute/Wayne State University, to the Michigan interactive health kiosk/University of Michigan, and to Michigan State University for cancer prevention activities.

(2) The department shall provide a report to the house and senate appropriations subcommittees on community health and the house and senate fiscal agencies by January 1, 1999, on how these funds were allocated and spent in fiscal year 1997-98. Also, the report shall detail outcomes resulting from the use of such funds.

Sec. 1009. From the funds appropriated in section 111 for diabetes local agreements, a portion of the funds may be allocated to the national kidney foundation of Michigan for kidney disease prevention programming including early identification and education programs and kidney disease prevention demonstration projects.

Sec. 1011. Of the funds appropriated in section 111 for the health education, promotion, and research programs, the department shall allocate \$650,000.00 to implement the osteoporosis prevention and treatment education program targeting women and school health education. As part of the program, the department shall design and implement strategies for raising public awareness on the causes and nature of osteoporosis, personal risk factors, value of prevention and early detection, and options for diagnosing and treating osteoporosis.

Sec. 1012. From the funds appropriated in part 1 for diabetes local agreements, \$320,000.00 shall be allocated for improving the health of African-American men in Michigan. The funds shall be used for screening and patient self-care activities for diabetes, hypertension, stroke, and glaucoma and other eye diseases.

COMMUNITY LIVING, CHILDREN, AND FAMILIES

Sec. 1101. The department shall review the basis for the distribution of funds to local health departments and other public and private agencies for the women, infants, and children food supplement program; family planning; early and periodic screening, diagnosis, and treatment program; and prenatal care outreach and service delivery support program and indicate the basis upon which any projected underexpenditures by local public and private agencies shall be reallocated to other local agencies that demonstrate need.

Sec. 1102. (1) Agencies receiving funds appropriated from section 112 for adolescent health care services shall meet all of the following criteria:

(a) Require each adolescent health clinic funded by the agency to report to the department on an annual basis all of the following information:

(i) Funding sources of the adolescent health clinic.

(ii) Demographic information of populations served including sex, age, and race.

(iii) Utilization data that reflects the number of visits and repeat visits and types of services provided per visit.

(iv) Types and number of referrals to other health care agencies.

(b) Require each local school board funded by the agency to establish a local advisory committee before the planning phase of an adolescent health clinic intended to provide services within that school district. The advisory committee shall be comprised of not less than 50% residents of the local school district, and shall not be comprised of more than 50% health care providers. A person who is employed by the sponsoring agency shall not have voting privileges as a member of the advisory committee. All advisory committee meetings shall be open to the public with at least a 1-week notice of the meeting date published in the local newspaper.

(c) Not allow an adolescent health clinic funded by the agency, as part of the services offered, to provide abortion counseling or services or make referrals for abortion services.

(d) If a local advisory committee established under subdivision (b) recommends that family planning be provided as a service, require that any public information brochure include family planning in its description of the entire array of services provided by the adolescent health clinic.

(e) Require each adolescent health clinic funded by the agency to have a written policy on parental consent, developed by the local advisory committee and submitted to the local school board for approval if the services are provided in a public school building where instruction is provided in grades kindergarten through 12.

(2) A local advisory committee established under subsection (1)(b), in cooperation with the sponsoring agency, shall submit written recommendations regarding the implementation and types of services rendered by an adolescent health clinic to the local school board for approval of adolescent health services rendered in a public school building where instruction is provided in grades kindergarten through 12.

(3) The department shall submit a report to the members of the senate and house fiscal agencies based on the information provided under subsection (1)(a). The report is due 90 days after the end of the calendar year.

Sec. 1103. Of the funds appropriated in section 112 for adolescent health care services, \$1,840,830.00 shall be allocated to teen centers as follows: \$90,000.00 base funding, and of the remaining funding 25% distributed on the number of users, 50% distributed on the number of visits, and 25% distributed on the number of services. This formula does not apply to the alternative models.

Sec. 1104. Before April 1, 1999, the department shall submit a report to the house and senate fiscal agencies on planned allocations from the amounts appropriated in section 112 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:

(a) Funding allocations.

(b) Basis for grantee selection.

(c) Expected cost per client served by grantee.

(d) Number of women, children, and/or adolescents expected to be served.

(e) Expected first- and third-party collections by source of payment.

(f) The extent to which grantees meet federal indicators, when applicable.

(g) Actual numbers served and amounts expended in the categories described in subdivisions (a) to (e) for the fiscal year 1997-98.

Sec. 1105. For all programs for which an appropriation is made in section 112, the department shall contract with those local public and private nonprofit agencies best able to serve clients. Factors to be used by the department in evaluating agencies under this section shall include ability to serve high-risk population groups; ability to serve low-income clients, where applicable; availability of, and access to, service sites; management efficiency; and ability to meet federal standards, where applicable.

Sec. 1106. Each family planning program receiving federal title X family planning funds shall be in compliance with all performance and quality assurance indicators that the United States bureau of community health services specifies in the family planning annual report. An agency not in compliance with the indicators shall not receive supplemental or reallocated funds.

Sec. 1107. Of the amount appropriated in section 112 for prenatal care outreach and service delivery support, not more than 10% shall be expended for local administration, data processing, and evaluation.

Sec. 1109. The department shall maintain comprehensive health care programs to communicate to preteens the importance of delaying sexual activity and to address teen sexual activity, teenage pregnancy, and sexually transmitted diseases.

Sec. 1110. The funds appropriated in section 112 for pregnancy prevention programs shall not be used to provide abortion counseling, referrals, or services.

Sec. 1111. (1) From the amounts appropriated in section 112 for dental programs, funds shall be allocated to the Michigan dental association for the administration of a volunteer dental program that would provide dental services to the uninsured in an amount that is no less than the amount allocated to that program in fiscal year 1996-97.

(2) Not later than November 1, 1998, the department shall report to the senate and house appropriations subcommittees on community health and the senate and house standing committees on public health the number of individual patients treated, the number of procedures performed, and approximate total market value of those procedures through September 30, 1998.

Sec. 1113. Agencies that currently receive pregnancy prevention funds and either receive or are eligible for other family planning funds shall have the option of receiving all of their family planning funds directly from the department of community health and be designated as delegate agencies.

Sec. 1114. The department shall allocate no less than 86% of the funds appropriated in section 112 for family planning local agreements and the pregnancy prevention program for the direct provision of family planning/pregnancy prevention services.

Sec. 1117. From the funds appropriated for prenatal care outreach and service delivery support, the department shall allocate at least \$1,000,000.00 to communities with high infant mortality rates.

Sec. 1118. From the funds appropriated in part 1, the department shall allocate no less than \$200,000.00 to provide education and outreach to targeted populations on the dangers of neonatal addiction and fetal alcohol syndrome and further develop its infant support services to target families with infants with fetal alcohol syndrome or suffering from drug addiction.

Sec. 1119. In addition to the amounts appropriated in part 1 for the family support subsidy, there shall be appropriated \$10,000,000.00 from the general fund to the family support subsidy line item if House Bill No. 4753 of the 89th Legislature is enacted into law.

CHILDREN'S SPECIAL HEALTH CARE SERVICES

Sec. 1201. Money appropriated in section 113 for medical care and treatment of children with special health care needs shall be paid according to reimbursement policies determined by the Michigan medical services program. Exceptions to these policies may be taken with the prior approval of the state budget director.

Sec. 1202. The department may do 1 or more of the following:

- (a) Provide special formula for eligible clients with specified metabolic and allergic disorders.
- (b) Provide medical care and treatment to eligible patients with cystic fibrosis who are 21 years of age or older.
- (c) Provide genetic diagnostic and counseling services for eligible families.
- (d) Provide medical care and treatment to eligible patients with hereditary coagulation defects, commonly known as hemophilia, who are 21 years of age or older.

Sec. 1203. All children who are determined medically eligible for the children's special health care services program shall be referred to the appropriate locally based services program in their community.

OFFICE OF DRUG CONTROL POLICY

Sec. 1250. The purpose of the office of drug control policy is to serve as coordinating office for all agencies of the executive branch of government which are responsible for drug-abuse prevention, drug-abuse treatment, and drug law enforcement and to develop a state drug-abuse prevention, drug-abuse treatment, and drug law enforcement plan. The office of drug control policy shall receive, administer, and distribute funds received by the office of drug control policy under or through titles III and VI of the federal anti-drug abuse act.

Sec. 1251. The office of drug control policy is required to approve grants for the federal safe and drug free schools program within 90 days from the grant application submission deadline date.

CRIME VICTIM SERVICES COMMISSION

Sec. 1301. The per diem amount authorized for the crime victim services commission is \$100.00.

OFFICE OF SERVICES TO THE AGING

Sec. 1401. The appropriation in section 116 to the office of services to the aging, for community and nutrition services and home services, shall be restricted to eligible individuals at least 60 years of age who fail to qualify for home care services under title XVIII, XIX, or XX of the social security act, chapter 531, 49 Stat. 620.

Sec. 1402. (1) The office of services to the aging may receive and expend funds in addition to those authorized in section 116 for the additional purposes described in this section.

(2) The office of services to the aging may establish and collect fees for publications, videos, and related materials. Collected fees shall be used to pay for the printing and mailing costs of the publications, videos, and related materials, which costs shall not exceed the revenues collected.

(3) Money appropriated in section 116 for the Michigan pharmaceutical program shall be used to purchase generic medicine when available and medically practicable.

Sec. 1403. The office of services to the aging shall require each region to report to the office of services to the aging home delivered meals waiting lists based upon standard criteria. Determining criteria shall include all of the following:

- (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.

Sec. 1404. The office of services to the aging may receive and expend fees for the provision of day care, care management, and respite care. The office of services to the aging shall base the fees on a sliding scale taking into consideration the client income. The office of services to the aging shall use the fees to expand services.

Sec. 1405. The office of services to the aging may receive and expend Medicaid funds for care management services.

Sec. 1406. (1) Of the amount appropriated in section 116 to the office of services to the aging for community services, sufficient funds shall be allocated to fund statewide care management or case coordination projects in the following regions:

Region 1A.....	\$ 903,700
Region 1B.....	1,084,400
Region 1C.....	632,600
Region 2.....	271,100
Region 3.....	451,900
Region 4.....	271,100
Region 5.....	451,900
Region 6.....	271,100
Region 7.....	542,200
Region 8.....	542,200
Region 9.....	542,200
Region 10.....	542,200
Region 11.....	542,200
Region 14.....	271,100

(2) The office of services to the aging shall provide a report to the senate and house appropriations subcommittees on community health, and the senate and house fiscal agencies by November 1, 1998, summarizing the accomplishments of each program in the 1997-98 fiscal year.

Sec. 1407. The office of services to the aging shall award contracts and distribute funds only to those projects that are cost effective, meet minimum operational standards, and serve the greatest number of eligible people.

Sec. 1408. The office of services to the aging shall provide that funds appropriated under this act shall be awarded on a local level in accordance with locally determined needs.

Sec. 1409. From the additional funds appropriated in the community services line, a total of \$200,000.00 shall be used for providing in-home services for seniors.

Sec. 1410. (1) The department shall increase annual funding for the long-term care ombudsman program by no less than \$40,000.00.

(2) By October 15, 1998, the department shall award no less than an 18-month contract for the long-term care ombudsman program.

MEDICAL SERVICES ADMINISTRATION

Sec. 1501. The funds appropriated in section 117 for the Michigan essential health care provider program may also provide loan repayment for dentists that fit the criteria established by part 27 of the public health code, 1978 PA 368, MCL 333.2701 to 333.2727.

Sec. 1502. The department is directed to continue support of multicultural agencies which provide primary care services from the funds appropriated in section 117.

MEDICAL SERVICES

Sec. 1601. The department of community health shall provide an administrative procedure for the review of grievances by medical services providers with regard to reimbursement under the medical services program. Settlements of properly submitted cost reports shall be paid not later than 9 months from receipt of the final report.

Sec. 1602. (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 copayment, 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 deemed 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.

(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.

Sec. 1603. (1) Effective October 1, 1998, the pharmaceutical dispensing fee shall be \$3.72 or the usual and customary cash charge, whichever is less. If a recipient is 21 years of age or older, the department shall require a \$1.00 per prescription client copayment, except as prohibited by federal or state law or regulation.

(2) The department shall require copayments on dental, podiatric, chiropractic, vision, and hearing aid services provided to recipients of medical assistance except as excluded by law.

(3) The copayments in subsections (1) and (2) may be waived for recipients who participate in a program of medical case management such as enrollment in a health maintenance organization or the primary physician sponsor plan program.

(4) Usual and customary charges for pharmacy providers are defined as the pharmacy's charges to the general public for like or similar services.

Sec. 1605. 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 means those services which produce the maximum reduction of physical and mental limitations and restoration of an individual to his or her best functional level. At a minimum, remedial services include basic self-care and rehabilitation training for a resident.

Sec. 1606. Medicaid adult dental services, podiatric services, and chiropractic services shall continue at not less than the level in effect on October 1, 1996, except that reasonable utilization limitations may be adopted in order to prevent excess utilization. The department shall not impose utilization restrictions on chiropractic services unless a recipient has exceeded 18 office visits within 1 year.

Sec. 1609. (1) From the funds appropriated in section 118 for the indigent medical care program, the department shall establish a program which provides for the basic health care needs of indigent persons as delineated in the following subsections.

(2) Eligibility for this program is limited to the following:

(a) Persons currently receiving cash grants under either the family independence program or state disability assistance programs who are not eligible for any other public or private health care coverage.

(b) Any other resident of this state who currently meets the income and asset requirements for the state disability assistance program and is not eligible for any other public or private health care coverage.

(3) All potentially eligible persons, except those defined in subsection (2)(a), who shall be automatically enrolled, may apply for enrollment in this program at local family independence agency offices or other designated sites.

(4) The program shall provide for the following minimum level of services for enrolled individuals:

(a) Physician services provided in private, clinic, or outpatient office settings.

(b) Diagnostic laboratory and x-ray services.

(c) Pharmaceutical services.

(5) Notwithstanding subsection (2)(b), the state may continue to provide nursing facility coverage, including medically necessary ancillary services, to individuals categorized as permanently residing under color of law and who meet either of the following requirements:

(a) The individuals were medically eligible and residing in such a facility as of August 22, 1996 and qualify for emergency medical services.

(b) The individuals were Medicaid eligible as of August 22, 1996, and admitted to a nursing facility before a new eligibility determination was conducted by the family independence agency.

Sec. 1610. (1) The department may require medical services recipients to receive psychiatric services through a managed care system.

(2) The department may implement managed care programs for specialty mental health, substance abuse, and developmental disabilities services. Such programs shall be operated through CMHSPs and substance abuse coordinating agencies as specialty service carve-outs to maintain accountability for the system to local units of government and to preserve the services and supports for persons with severe and persistent mental illnesses, for persons with substance abuse addictions, and for persons with developmental disabilities.

(3) The substance abuse coordinating agencies shall arrange for clinical reviews to assure appropriate continuity of care for recipients of substance abuse treatment services.

Sec. 1611. (1) The department may continue to implement managed care and may require medical services recipients residing in counties offering managed care options to choose the particular managed care plan in which they wish to be enrolled. Persons not expressing a preference may be assigned to a managed care provider.

(2) Persons to be assigned a managed care provider shall be informed in writing of the criteria for exceptions to capitated managed care enrollment, their right to change health plans for any reason within the initial 30 days of enrollment, the toll-free telephone number for problems and complaints, and information regarding grievance and appeals rights.

(3) The criteria for medical exceptions to qualified health plans shall be based on submitted documentation that indicates a recipient has a serious medical condition, and is undergoing active treatment for that condition with a physician who does not participate in 1 of the qualified health plans. If the person meets the criteria established by this subsection, the department shall grant an exception to mandatory enrollment at least through the current prescribed course of treatment, subject to periodic review of continued eligibility.

Sec. 1612. (1) The department shall not preauthorize or in any way restrict single-source pharmaceutical products except those single-source pharmaceuticals that have been subject to prior authorization by the department prior to January 1, 1992 and those single-source pharmaceuticals within the categories specified in section 1927(d)(2) of the social security act, 42 U.S.C. 1396s(d), or for the reasons delineated in section 1927(d)(3) of the social security act.

(2) The department may implement drug utilization review and monitoring programs that may cover renewals of prescriptions of anti-ulcer agents; these programs shall not be expanded to other therapeutic classes. Such programs shall have physician oversight through the drug utilization and review board to ensure proper determination.

Sec. 1613. The department shall not implement a mail-order pharmacy program for the noncapitated portion of the Medicaid program.

Sec. 1614. (1) The department shall assure that all Medicaid children have timely access to early and periodic screening, diagnosis, and treatment (EPSDT) services as required by federal law. Medicaid managed care plans will provide EPSDT services in accordance with EPSDT policy. Requirements for objective hearing and vision screening may be met by referral to local health departments.

(2) The primary responsibility of assuring a child's hearing and vision screening is with the child's primary care provider. The primary care provider will provide age appropriate screening or arrange for these tests through referrals to local health departments. Local health departments shall provide preschool hearing and vision screening services and accept referrals for these tests from physicians or from Head Start programs in order to assure all preschool children have appropriate access to hearing and vision screening. Local health departments will be reimbursed for the cost of providing these tests for Medicaid eligible children by the Medicaid program.

Sec. 1615. (1) The department of community health is authorized to pursue reimbursement for eligible services provided in Michigan schools from the federal Medicaid program. The department and the department of management and budget 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.

(2) From the funds appropriated in section 118 for medical services school services payments, the department is authorized to do all of the following:

(a) Finance activities within the medical services administration related to this project.

(b) Reimburse participating school districts pursuant to the fund sharing ratios negotiated in the state-local agreements authorized in subsection (1).

(c) Offset general fund costs associated with the medical services program.

(3) The department shall not make distributions from the funds provided for this purpose in section 118 until it has filed the necessary state plan amendments, made required notifications, received an indication of approval from the health care financing administration, and received approval from the state budget director.

Sec. 1616. The special adjustor appropriation in section 118 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 and receives an indication of approval of the amendment from the health care financing administration. The department is authorized to appropriately adjust financing sources in accordance with the increased appropriation.

Sec. 1616a. From the funds appropriated in fiscal year 1998-99 for health plan services, \$8,248,700.00 gross, \$3,900,000.00 general fund/general purpose shall be allocated to increase the transportation per member per month payment to qualified health plans that had submitted bids under the comprehensive health plan and signed contracts with the department before January 1, 1998.

Sec. 1617. The department of community health shall obtain from those health maintenance organizations and clinic plans with which the department contracts patient-based utilization data, including immunizations, early and periodic screenings, diagnoses, and treatments, substance abuse services, blood lead level testing, and maternal and infant support services referrals. The department shall submit annual reports on patient-based utilization data to the members of the senate and house appropriations subcommittees on community health, the senate and house fiscal agencies, the state budget director, and the director of each local health department.

Sec. 1618. It is the intent of the legislature that payment increases for enhanced wages shall be provided to those facilities which make application for it to fund the Medicaid program share of wage increases up to 50 cents per employee hour. The pass-through shall only be used to increase wages and the employer's share of federal insurance contributions act costs. Nursing facilities shall be required to document that these wage increases were actually provided.

Sec. 1619. Medical services shall be provided to elderly and disabled persons with incomes less than or equal to 100% of the official poverty line, pursuant to the state's option to elect such coverage set out at section 1902(a)(10)(A)(ii) and (m) of title XIX of the social security act, chapter 531, 49 Stat. 620, 42 U.S.C. 1396a.

Sec. 1620. The department may fund home and community-based services in lieu of nursing home services, for individuals seeking long-term care services, from the nursing home or personal care in-home services line items.

Sec. 1621. The department of community health shall distribute \$695,000.00 to children's hospitals that have a high indigent care volume. The amount to be distributed to any given hospital shall be based on a formula determined by the department of community health.

Sec. 1622. (1) The department shall implement enforcement actions as specified in the nursing facility enforcement provisions of 42 U.S.C. 1396r.

(2) 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.

(3) Any unexpended penalty money, at the end of the year, shall carry forward to the following year.

Sec. 1624. (1) Medical services patients who are enrolled in qualified health plans or capitated clinic plans have the choice to elect hospice services or other services for the terminally ill that are offered by the qualified health plan or clinic plan. If the patient elects hospice services, those services shall be provided in accordance with part 214 of the public health code, 1978 PA 368, MCL 333.21401 to 333.21420.

(2) The department shall not amend the medical services hospice manual in a manner that would allow hospice services to be provided without making available all comprehensive hospice services described in 42 C.F.R. part 418.

Sec. 1626. (1) From the funds appropriated in part 1 for outpatient hospital indigent adjustor, the department, subject to the requirements and limitations in this section, shall establish a funding pool of up to \$44,012,800.00 for the purpose of enhancing the aggregate payment for medical services hospital outpatient services. Such payments, if any, may be made as a gross adjustment to hospital outpatient payments or by another mechanism or schedule as determined by the department, which meets the intent of this section.

(2) For counties with populations in excess of 2,000,000 persons, the department shall distribute \$44,012,800.00 to hospitals if \$15,026,700.00 is received by the state from such counties, which meets the criteria of an allowable state matching share as determined by applicable federal laws and regulations. If the state receives a lesser sum of an allowable state matching share from these counties, the amount distributed shall be reduced accordingly.

(3) The department may establish county-based, indigent health care programs that are at least equal in eligibility and coverage to the fiscal year 1996 state medical program.

(4) The department is authorized to establish similar programs in additional counties if the expenditures for the programs do not increase state general fund/general purpose costs and local funds are provided.

(5) If a locally administered indigent health care program replaces the state medical program authorized by section 1609 for a given county on or before October 1, 1998, the state general fund/general purpose dollars allocated for that county under this section shall not be less than the general fund/general purpose expenditures for the state medical program in that county in the previous fiscal year.

Sec. 1627. 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.

Sec. 1634. (1) The department may establish a program for persons who work their way off welfare to purchase medical coverage at a rate determined by the department.

(2) The department may receive and expend premiums for the buy-in of medical coverage in addition to the amounts appropriated in part 1.

(3) The premiums described in this section shall be classified as private funds.

Sec. 1635. The implementation of all Medicaid managed care plans by the department are subject to the following conditions:

(a) Continuity of care is assured by allowing enrollees to continue receiving required medically necessary services from their current providers for a period not to exceed 1 year if enrollees meet the managed care medical exception criteria.

(b) A contract for an independent evaluation is in place to measure cost, access, quality, and patient satisfaction.

(c) The department shall require contracted health plans to submit data determined necessary for the evaluation on a timely basis. A report of the independent evaluation shall be provided to the house and senate appropriations subcommittees on community health and the house and senate fiscal agencies no later than September 30, 1999.

(d) A health plans advisory council is functioning which meets all applicable federal and state requirements for a medical care advisory committee. The council shall review at least quarterly the implementation of the department's managed care plans.

(e) Contracts for enrollment services and beneficiary services, and the complaint/grievance procedures are in place for the geographic area and populations affected. An annual report on enrollment services and beneficiary services and recipient problems/complaints shall be provided to the house and senate appropriations subcommittees on community health and the house and senate fiscal agencies.

(f) Mandatory enrollment is prohibited until there are at least 2 qualified health plans with the capacity to adequately serve each geographic area affected. Exceptions may be considered in areas where at least 85% of all area providers are in 1 plan.

(g) Maternal and infant support services shall continue to be provided through state-certified providers. The department shall continue to reimburse state-certified maternal and infant support services providers on a fee-for-service basis to be charged back to health plans until such time as health plans have contracts with state-certified providers.

(h) The department shall develop a case adjustment to its rate methodology that considers the costs of persons with HIV/AIDS, end stage renal disease, organ transplants, epilepsy, and other high-cost diseases or conditions and shall

implement the case adjustment when it is proven to be actuarially and fiscally sound. Implementation of the case adjustment must be budget neutral.

(i) The department may encourage bids for multicounty regions through the use of preference points but shall not initially require a plan provider to submit a bid for a multicounty region.

(j) Enrollment of recipients of children's special health care services in qualified health plans shall be voluntary during fiscal year 1998-99.

Sec. 1637. (1) Medicaid qualified health plans shall establish an ongoing internal quality assurance program for health care services provided to Medicaid recipients which includes:

(a) An emphasis on health outcomes.

(b) Establishment of written protocols for utilization review based on current standards of medical practice.

(c) Review by physicians and other health care professionals of the process followed in the provision of such health care services.

(d) Evaluation of the continuity and coordination of care that enrollees receive.

(e) Mechanisms to detect overutilization and underutilization of services.

(f) Actions to improve quality and assess the effectiveness of such action through systematic follow-up.

(g) Provision of information on quality and outcome measures to facilitate enrollee comparison and choice of health coverage options.

(h) Ongoing evaluation of the plans' effectiveness.

(i) Consumer involvement in the development of the quality assurance program and consideration of enrollee complaints and satisfaction survey results.

(2) Medicaid qualified health plans shall apply for accreditation by an appropriate external independent accrediting organization requiring standards recognized by the department once those plans have met the application requirements. The state shall accept accreditation of a plan by an approved accrediting organization as proof that the plan meets some or all of the state's requirements, if the state determines that the accrediting organization's standards meet or exceed the state's requirements.

(3) Medicaid qualified health plans shall report encounter data, including data on inpatient and outpatient hospital care, physician visits, pharmaceutical services, and other services specified by the department.

(4) Medicaid qualified health plans shall assure that all covered services are available and accessible to enrollees with reasonable promptness and in a manner which assures continuity. Medically necessary services shall be available and accessible 24 hours a day and 7 days a week.

(5) Medicaid qualified health plans shall provide for reimbursement of plan covered services delivered other than through the plan's providers if medically necessary and approved by the plan, immediately required, and which could not be reasonably obtained through the plan's providers on a timely basis. Such services shall be deemed approved if the plan does not respond to a request for authorization within 24 hours of the request. Reimbursement shall not exceed the Medicaid fee-for-service payment for such services.

(6) Medicaid qualified health plans shall provide access to appropriate providers, including qualified specialists for all medically necessary services.

(7) Medicaid qualified health plans shall provide the department with a demonstration of the plan's capacity to adequately serve the plan's expected enrollment of Medicaid enrollees.

(8) Medicaid qualified health plans shall provide assurances to the department that it will not deny enrollment to, expel, or refuse to reenroll any individual because of the individual's health status or need for services, and that it will notify all eligible persons of such assurances at the time of enrollment.

(9) Medicaid qualified health plans shall provide procedures for hearing and resolving grievances between the plan and members enrolled in the plan on a timely basis.

(10) Medicaid qualified health plans shall meet other standards and requirements contained in state laws, administrative rules, and policies promulgated by the department. The department may establish alternative standards and requirements that specify financial safeguards for organizations not otherwise covered by existing law which assure that the organization has the ability to accept financial risk.

(11) Medicaid qualified health plans shall develop written plans for providing nonemergency medical transportation services funded through supplemental payments made to the plans by the department, and shall include information about transportation in their member handbook.

Sec. 1638. From the funds appropriated in section 118 for health plan services, the department may contract for the assessment of quality in qualified health plans which enroll Medicaid recipients. Organizations providing such quality reviews shall meet the requirements of the department and include the following functions:

(a) Review of plan performance based on accepted quality performance criteria.

(b) Utilization of quality indicators and standards developed specifically for the Medicaid population.

(c) Promote accountability for improved plan performance.

Sec. 1639. (1) Medicaid qualified health plans shall not directly market their services to or enroll Medicaid eligible persons. The department shall provide or arrange for assistance to Medicaid enrollees in understanding, electing, and using the managed care plans available. Upon request of the Medicaid recipient, such assistance shall be provided in person through a face-to-face interview prior to enrollment, when practicable.

(2) Information regarding the available health plans and enrollment materials shall be provided through local family independence agency offices during the eligibility determination and redetermination process, and at other locations specified by the department. The enrollment materials shall clearly explain covered services, recipient rights, grievance and appeal procedures, exception criteria to mandatory enrollment, and information regarding managed care enrollment broker and beneficiary services.

Sec. 1640. (1) The department may require a 6-month lock-in to the qualified health plan selected by the recipient during the initial and subsequent open enrollment periods, but allow for good cause exceptions during the lock-in period.

(2) Medicaid recipients shall be allowed to change health plans for any reason within the initial 30 days of enrollment.

Sec. 1641. (1) The department shall provide an expedited complaint review procedure for Medicaid eligible persons enrolled in qualified health plans for situations where failure to receive any health care service would result in significant harm to the enrollee.

(2) The department shall provide for a toll-free telephone number for Medicaid recipients enrolled in managed care to assist with resolving problems and complaints. If warranted, the department shall immediately disenroll persons from managed care and approve fee-for-service coverage.

(3) Quarterly reports summarizing the problems and complaints reported and their resolution shall be provided to the house and senate appropriations subcommittees on community health, the house and senate fiscal agencies, and the department's health plans advisory council.

Sec. 1642. (1) The department shall require the enrollment contractor to provide beneficiary services. These services shall include:

(a) Contacting eligible Medicaid beneficiaries.

(b) Providing education on managed care.

(c) Providing information through a toll-free number regarding available health plans and their primary care providers available in the Medicaid beneficiaries area.

(d) Entering the beneficiaries health plan choice in the information system for communication to the state and the health plan, written notification to the beneficiary regarding their health plan choice, and notice of their right to change plans consistent with federal guidelines.

(e) Guiding beneficiaries through both health plan and state complaint and fair hearing processes, including helping the beneficiary fill out required forms.

(f) Being available to attend a hearing with a beneficiary if requested by the beneficiary to provide objective information regarding events that have occurred pertinent to the beneficiary.

(2) The department shall not contract for enrollment counseling services unless the contract complies with and includes provisions for all beneficiary services defined in subsection (1).

Sec. 1643. (1) The department may develop a program for providing services to medical assistance recipients under a risk sharing capitation arrangement, through contracts with provider-sponsored networks, health maintenance organizations, and other organizations. The department shall award contracts under the program at least every 5 years based on a competitive bidding process. In developing a program under this section, the department shall consult with providers, medical assistance recipients, and other interested parties. The following provisions shall be considered in any program:

(a) In determining eligible contractors, the department shall consider provider-sponsored networks, along with health maintenance organizations, and other organizations. All eligible contractors shall meet the same standards for quality, access, benefits, financial, and organizational capability.

(b) The department may make separate payments directly to qualifying hospitals serving a disproportionate share of indigent patients, and to hospitals providing graduate medical education training programs. If direct payment for GME and DSH is made to qualifying hospitals for services to Medicaid clients, hospitals will not include GME costs or DSH payments in their contracts with HMOs.

(2) Whenever economical and feasible, the department shall give preference to programs that provide a choice of qualified contractors and at least an annual open enrollment in the program.

Sec. 1644. The mother of an unborn child shall be eligible for medical services benefits for herself and her child if all other eligibility factors are met. To be eligible for these benefits, the applicant shall provide medical evidence of her pregnancy. If she is unable to provide the documentation, payment for the examination may be at state expense. The department of community health shall undertake such measures as may be necessary to ensure that necessary prenatal care is provided to medical services eligible recipients.

Sec. 1645. (1) 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.

(2) The department shall notify the senate and house appropriations subcommittees on community health of any proposed revisions to the protected income level for Medicaid coverage related to the public assistance standard 90 days prior to implementation.

(3) The department shall prepare a report analyzing the options that exist under state and federal law to expand the Medicaid protected income level, including expansion to the maximum allowed under federal law. The analysis shall include an estimate of the number of people likely to be affected and the costs associated with each option. The report

shall be submitted to the house and senate appropriations subcommittees on community health and the house and senate fiscal agencies by January 1, 1999.

Sec. 1646. For the purpose of guardian and conservator charges, the department of community health may deduct up to \$60.00 per month as an allowable expense against a recipient's income when determining medical services eligibility and patient pay amounts.

Sec. 1654. A qualified health plan that requires a Medicaid recipient to designate a participating primary care provider shall permit a female Medicaid recipient to access a participating obstetrician-gynecologist for annual "well-woman" examinations and routine obstetrical and gynecologic services. This access would not require prior authorization or referral, but may be limited by participation of obstetricians-gynecologists in the plan network. A referral to an out-of-plan physician will require plan approval.

Sec. 1656. The department shall promote activities that preserve the dignity and rights of terminally ill and chronically ill individuals. Priority shall be given to programs, such as hospice, that focus on individual dignity and quality of care provided persons with terminal illness and programs serving persons with chronic illnesses that reduce the rate of suicide through the advancement of the knowledge and use of improved, appropriate pain management for these persons; and initiatives that train health care practitioners and faculty in managing pain, providing palliative care and suicide prevention.

Sec. 1657. (1) The department shall develop a written long-term care plan in consultation with the legislature. The department shall establish a long-term care working group to develop the plan. The long-term care working group shall consist of 2 members of the house, 2 members of the senate, and 4 representatives of the department. Senate members shall be appointed by the senate majority leader. House members shall be appointed by the speaker of the house of representatives. The director shall appoint department representatives. The department shall consult with the long-term care industry, consumers, and other interested parties during the workgroup process. The plan shall consider the following:

(a) A budget-neutral expansion of the home and community based services (HCBs) as alternatives to nursing homes.
(b) Payment methodologies that are aligned to maintain eligible beneficiaries in the most homelike setting at reasonable cost.

(c) A budget-neutral expansion of home and community based services program to other non-nursing home settings.

(d) Coordination, to the degree possible, with the federal Medicare program.

(e) Administrative simplicity to the degree possible, while maintaining flexibility in financing and service delivery configurations, such as common claim forms and data reporting requirements.

(2) Once the plan is developed, the long-term care workgroup shall conduct public hearings in at least 5 regions of the state to obtain public comment.

(3) The department may enroll beneficiaries in a long-term care plan if the following requirements are met:

(a) An eligibility screening/enrollment component is in place at community hospitals, in-home for persons who are homebound, as well as at convenient community locations.

(b) The eligibility screening/enrollment counseling service is performed by an independent entity selected through a request for proposal.

(c) Enrollment counselor services are available to the clients and their families to ensure clients or the legally authorized representatives have the information necessary to make an informed choice of plans, to appropriately access care within the plan, to file grievances with the plan and the state, and to access care out of network if appropriate.

(d) Quality outcome measures are developed based on the minimum data sets for home care and nursing home care. The department will develop quality outcome measures that utilize Zimmerman's quality of care principles.

(e) Services offered shall include a range of home and community services including adult day care, respite care homemaker, chore, personal care, personal care supervision, personal emergency response systems, community living supports, and services in nursing home settings.

(f) There shall be 2 long-term care plan contractors in all areas of the state except in areas with sparse population and when the long-term care plan network includes at least 85% of the LTC providers of the region.

(g) Long-term care plans are selected through a request for proposal process that identifies organizations capable of organizing and operating a continuum of services.

(h) The department reviews and approves provider contracts used by the plan to ensure that the plan's risk/incentive arrangements do not provide incentives to withhold appropriate medical services.

(i) The department establishes criteria for the plan's provider network that take into consideration the unique needs of the population to be enrolled and ensure that the network has adequate capacity to provide home and community-based service alternatives and is in place before enrollment begins.

(j) The department establishes requirements for encounter data collection and reporting that ensure the department has the ability to closely monitor care provided to enrollees to assure quality and appropriate access to care.

(k) The department contracts for an independent, external quality review of the services provided through the long-term care plans. The protocols used in the review shall be appropriate for the specialized population enrolled in the plan and shall be at least as rigorous as those used by the national committee on quality assurance.

(l) The department conducts annual patient satisfaction surveys using statistically valid sampling techniques that focus on this population and a survey tool that is appropriate to the population being served. These surveys shall include a resident and family experience survey for all plan members.

(m) The department maintains an expedited grievance process that provides a response to urgent requests within 1 business day.

(n) Eligibility for the long-term plan is based on Medicaid financial eligibility criteria and medical/functional determination of necessity to qualify for nursing facility level of care. The initial eligible group shall include those persons eligible for Medicaid now in licensed nursing facilities and those eligible for the Medicaid home and community-based waiver. Eligible persons (and their families in incapacitated cases), in conjunction with the long-term care organization and medical caregivers, shall choose their preferred care setting, to live at home, in other homelike settings, or in a skilled nursing facility. Eligible persons shall be offered choices by the long-term care plan that emphasize the individual's dignity, independence, and quality of life and reflect the principles of person-centered care.

(o) The department shall design a long-term care fee-for-service reimbursement methodology based on resource utilization group methodology principles. The department will conduct an evaluation regarding the adequacy of payments made to providers of care in the long-term care plans to ensure quality of care and compliance with state and federal regulators.

(p) The department shall initiate a review, together with the department of consumer and industry services, other state departments, the long-term care industry, and consumers, of current law and regulations impacting care for the populations to be served by the long-term care plan and will make recommendations to the administration, the legislature, the federal health care financing administration, and congress to change law and regulation to enhance the principles of the long-term care plan. Whenever possible, the contract between the department of community health and long-term care plans should resolve policy and clarify policy contradictions. Contract language will be finalized before implementation.

(q) The department, in consultation with the long-term care industry and consumer representatives, shall have processes in place to resolve implementation issues and make adjustments, if necessary, in the long-term care plan based on implementation experiences, on a timely basis. An implementation group including the long-term care industry will meet with the department at least bimonthly during implementation.

(r) Joint long-term care plan and department/provider implementation sessions shall be held on a regional basis to explain the long-term care plan contract language with the department and how this impacts the provisions of services before enrollment begins.

(s) The plan shall not be implemented in fiscal year 1998-99.

(4) The plan shall include provisions that require participation in the plan by Medicaid beneficiaries be voluntary for the first 5 years of implementation.

Sec. 1658. Funds appropriated for substance abuse services through the Medicaid program in the amount of at least \$23,328,300.00 shall be contracted in full to coordinating agencies through CMHSPs unless such a pass-through is held to be in violation of federal or state law or rules. If such a pass-through is not permissible, the department shall contract directly with coordinating agencies. CMHSPs shall not assume any contractual or financial liability associated with the pass-through of substance abuse services funds provided to eligible recipients with these funds. The coordinating agencies shall retain financial program responsibilities and liabilities consistent with contract requirements.

Sec. 1659. From the amounts appropriated from section 118 for hospital services, the department shall allocate for graduate medical education no less than was allocated for graduate medical education in fiscal year 1997-98.

Sec. 1660. The following sections are the only ones which shall apply to the following Medicaid managed care programs, including the comprehensive plan, children's special health care services plan, MI Choice long-term care plan, and the mental health, substance abuse, and developmentally disabled services program: 1610, 1611, 1614, 1617, 1624, 1635, 1637, 1638, 1639, 1640, 1641, 1642, 1643, 1654, 1657, and 1658.

Sec. 1662. (1) The department shall include provision in the contracts with health plans for full responsibility for well child visits and maternal and infant support services as described in Medicaid policy. This responsibility will also be included in the information distributed by the health plans to the members.

(2) The department shall require reporting from the health plans on their performance in the delivery services for well child visits and referrals for maternal and infant support services.

(3) The department shall develop and implement a budget neutral enrollment based incentive program to encourage qualified health plans to improve infant and children's health outcomes by improving access to maternal and infant support services (MSS/ISS) and to well child examinations. Qualified health plans with the most improved performance will be eligible for automatic beneficiary enrollment and those plans who fail to improve will be ineligible for new enrollment. Qualified health plans will refund to the department any unexpended MSS/ISS capitation below the fee for service equivalent MSS/ISS capitation in fiscal year 1996-97.

(4) The department shall revise appropriate standards of care used for well child visits based upon recognized national authorities of care, such as the American academy of pediatrics.

Sec. 1663. The department shall establish a workgroup on EPSDT and maternal and infant support services. The workgroup shall be made up of consumers, advocates, health care providers, and health plan representatives. The workgroup shall, at a minimum, establish an outreach program to educate providers on the requirements of EPSDT screening, and advise the department on providing targeted assistance to health plans that are screening less than 60% of the child members that are eligible for EPSDT services and recommend strategies to improve access to maternal and infant support services.

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 200% 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 act. Health care coverage for children in families below 150% of the federal poverty level shall be provided through expanded eligibility under the state's Medicaid program. Health coverage for children in families between 150% and 200% of the federal poverty level shall be provided through a state-based private health care program.

(2) The department shall enter into a contract to obtain MICHild services from any health maintenance organization, dental care corporation, or any other entity that offers to provide the managed health care benefits for MICHild services at the MICHild capitated rate. As used in this subsection:

(a) "Dental care corporation", "health care corporation", "insurer", and "prudent purchaser agreement" mean those terms as defined in section 2 of the prudent purchaser act, 1984 PA 233, MCL 550.52.

(b) "Entity" means a health care corporation or insurer operating in accordance with a prudent purchaser agreement.

(3) The department may enter into contracts to obtain certain MICHild services from community mental health service programs.

(4) The department may make payments on behalf of children enrolled in the MICHild program from the line-item appropriation associated with the program as described in the MICHild state plan approved by the United States department of health and human services, or from other medical services line-item appropriations providing for specific health care services.

Sec. 1671. For families applying for a MICHild benefit, the department shall do all of the following:

(a) Provide a single application for determining family eligibility for MICHild, Medicaid, and other health programs offered by the state.

(b) Allow families to submit applications for the program by mail.

(c) Provide immediate and simultaneous determinations of a family's eligibility for MICHild or Medicaid benefits.

(d) Provide MICHild or Medicaid coverage when eligibility is established under subdivision (c).

Sec. 1672. (1) The department may seek a waiver from the United States department of health and human services that would allow the state to conduct demonstrations on expanding health coverage to families whose income is at or below 200% of poverty by allowing those families to purchase private health insurance through the use of vouchers or other cost sharing mechanisms.

(2) From the funds appropriated under part 1 for a medical services buy-in program, the department shall provide coverage to adults in MICHild eligible families no longer receiving transitional Medicaid coverage due to employment.

Sec. 1673. (1) From the funds appropriated in part 1, the department shall develop a comprehensive approach to the marketing and outreach of the MICHild program. The marketing and outreach required under this section shall be coordinated with current outreach, information dissemination, and marketing efforts and activities conducted by the department.

(2) The department shall fund allowable education and outreach activities for Medicaid eligibility determinations authorized by the personal responsibility and work opportunity reconciliation act of 1996, Public Law 104-193, 110 Stat. 2105.

Sec. 1674. The department may provide up to 1 year of continuous eligibility to a family made eligible for the MICHild program unless the family's status changes and its members no longer meet the eligibility criteria as specified in the federally approved MICHild state plan.

Sec. 1675. The department shall continue eligibility for all beneficiaries in the caring program for children until their eligibility for the MICHild program is established.

Sec. 1676. The department may establish premiums for MICHild eligible persons in families with income above 150% of the federal poverty level. The monthly premiums shall not exceed \$5.00 for a family.

Sec. 1677. The department shall not require copayments under the MICHild program.

Sec. 1678. Families whose category of eligibility changes between the Medicaid and MICHild programs shall be assured of keeping their current health care providers through the current prescribed course of treatment for up to 1 year, subject to periodic reviews by the department if the beneficiary has a serious medical condition and is undergoing active treatment for that condition.

Sec. 1679. A department employee shall determine eligibility for each MICHild applicant.

Sec. 1680. Within 120 days after the health care financing administration's approval of the state's MICHild plan, the department shall implement the MICHild program in each county of the state in which a MICHild provider is willing to provide the MICHild benefits at or below the regionally adjusted capitation rate.

Sec. 1681. To be eligible for the MICHild program, a child must be residing in a family with an adjusted gross income of less than or equal to 200% of the federal poverty level. The Medicaid healthy kids program eligibility criteria and verifications for determining family group composition shall be used. The following verification shall be used:

(a) For annual income, a W-2 form or most recent pay stub.

(b) For child support, a court order. However, the custodial parent shall supply the department with proof of efforts to obtain that court-ordered support. Verification from the friend of the court will be considered proof of this effort. If the child support is not paid to the parent after this effort, the unpaid child support income shall not be considered for purposes of determining eligibility for MICHild.

(c) For SSI/RSDI income, a yearly statement or bank statements.

(d) For self-employed persons, a completed internal revenue service 1040 form, first page, line 31, showing gross adjusted income.

Sec. 1682. The MICHild program shall provide all benefits available under the state employee insurance plan that are delivered through the qualified health plans and consistent with federal law, including but not limited to the following medically necessary services:

(a) Inpatient mental health services, other than substance abuse treatment services, including services furnished in a state-operated mental hospital and residential or other 24-hour therapeutically planned structured services.

(b) Outpatient mental health services, other than substance abuse services, including services furnished in a state-operated mental hospital and community-based services.

(c) Durable medical equipment and prosthetic and orthotic devices.

(d) Dental services as outlined in the approved MICHild state plan.

(e) Substance abuse treatment services that may include inpatient, outpatient, and residential substance abuse treatment services.

(f) Care management services for mental health diagnoses.

(g) Physical therapy, occupational therapy, and services for individuals with speech, hearing, and language disorders.

(h) Emergency ambulance services.

Sec. 1683. The MICHild program shall be the payer of last resort for children who have coverage through other state or federal programs or private or commercial health insurance programs.

Sec. 1686. The department shall prepare and make available to health care providers a pamphlet identifying patient rights and responsibilities described in section 20201 of the public health code, 1978 PA 368, MCL 333.20201.

Sec. 1687. All nursing home rates, class I and class III, must have their respective fiscal year rate set 30 days prior to the beginning of their rate year. Rates may take into account the most recent cost report prepared and certified by the preparer, provider corporate owner or representative as being true and accurate, and filed timely, within 5 months of the fiscal year end in accordance with Medicaid policy. If the audited version of the last report is available, it shall be used. Any rate factors based on the filed cost report may be retroactively adjusted upon completion of the audit of that cost report.

Sec. 1688. In addition to the amounts appropriated in part 1 for long-term care services, there shall be appropriated \$10,000,000.00 gross, \$5,272,000.00 federal and \$4,728,000.00 from the general fund, to the long-term care services line item if House Bill No. 4176 of the 89th Legislature is enacted into law.

Third: That the Senate and House agree to the title of the bill to read as follows:

A bill to make appropriations for the department of community health and certain state purposes related to mental health, public health, and medical services for the fiscal years ending September 30, 1998 and September 30, 1999; to provide for the expenditure of such appropriations; to create funds; to provide for reports; to prescribe the powers and duties of certain local and state agencies and departments; and to provide for disposition of fees and other income received by the various state agencies.

R. Robert Geake
John J. H. Schwarz, M.D.
Joe Conroy
Conferees for the Senate

Nick Ciaramitaro
Bob Emerson
Shirley Johnson
Conferees for the House

The Speaker announced that under Joint Rule 9 the conference report would lie over one day.

Rep. Gagliardi moved pursuant to Joint Rule 9, that the Journal printing requirement be suspended, printed copies of the conference report having been placed on the member's desks.

The question being on the adoption of the conference report,

The conference report was then adopted, a majority of the members serving voting therefor, by yeas and nays, as follows:

Roll Call No. 863**Yeas—98**

Agee	Emerson	Kaza	Price
Anthony	Fitzgerald	Kelly	Profit
Baade	Frank	Kilpatrick	Prusi
Baird	Freeman	Kukuk	Quarles
Bankes	Gagliardi	LaForge	Raczkowski
Basham	Galloway	Law	Rhead
Birkholz	Geiger	Leland	Richner
Bobier	Gernaat	LeTarte	Rison
Bodem	Gilmer	Llewellyn	Rocca
Bogardus	Gire	London	Sanborn
Brackenridge	Godchaux	Lowe	Schauer
Brater	Goschka	Mans	Schermesser
Brewer	Green	Martinez	Scott
Brown	Gubow	Mathieu	Scranton
Byl	Gustafson	McBryde	Sikkema
Callahan	Hale	McNutt	Tesanovich
Cassis	Hammerstrom	Middleton	Varga
Cherry	Hanley	Murphy	Vaughn
Ciaramitaro	Harder	Nye	Voorhees
Crissman	Hertel	Olshove	Walberg
Cropsey	Hood	Owen	Wallace
Curtis	Jansen	Palamara	Whyman
DeHart	Jelinek	Parks	Willard
DeVuyst	Jellema	Perricone	Wojno
Dobronski	Johnson		

Nays—0

In The Chair: DeHart

Rep. Gagliardi moved that the bill be given immediate effect.
The motion prevailed, 2/3 of the members serving voting therefor.

The Speaker assumed the Chair.

Second Reading of Bills

Pending the Second Reading of
House Bill No. 4710, entitled

A bill to amend 1967 PA 281, entitled "Income tax act of 1967," by amending section 51 (MCL 206.51), as amended by 1995 PA 194.

Rep. Gagliardi moved that consideration of the bill be postponed temporarily.
The motion prevailed.

Rep. Gagliardi moved that House Committees be given leave to meet during the balance of today's session.
The motion prevailed.

Rep. Gagliardi moved that when the House adjourns today it stand adjourned until Tuesday, September 22, at 2:00 p.m.
The motion prevailed.

Introduction of Bills

Rep. Schauer introduced

House Bill No. 6092, entitled

A bill to amend 1978 PA 642, entitled "Revised probate code," by amending section 443a (MCL 700.443a), as added by 1988 PA 398.

The bill was read a first time by its title and referred to the Committee on Judiciary.

Rep. Baird introduced

House Bill No. 6093, entitled

A bill to amend 1978 PA 642, entitled "Revised probate code," by amending section 444 (MCL 700.444), as amended by 1988 PA 398.

The bill was read a first time by its title and referred to the Committee on Judiciary.

Rep. Bogardus introduced

House Bill No. 6094, entitled

A bill to amend 1978 PA 642, entitled "Revised probate code," by amending sections 455, 468, and 484 (MCL 700.455, 700.468, and 700.484), section 455 as amended by 1988 PA 398 and section 468 as amended by 1980 PA 396.

The bill was read a first time by its title and referred to the Committee on Judiciary.

Reps. Willard, Harder, Bogardus, LaForge, Freeman, Gubow, Vaughn, Wallace, Scott, Jellema and Kaza introduced

House Bill No. 6095, entitled

A bill to amend 1956 PA 40, entitled "The drain code of 1956," by amending the title and sections 1, 2, 3, 6, 8, 10, 12, 21, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 51, 52, 53, 54, 151, 152, 154, 191, 192, 193, 221, 222, 223, 241, 242, 243, 244, 245, 247, 261, 262, 263, 265, 266, 267, 270, 273, 274, 275, 276, 277, 278, 279, 280, 282, 283, 301, 302, 303, 304, 306, 307, 322, 322b, 323, 324, 326, 327, 328, 391, 392, 393, 395, 421, 422, 423, 425, 429, 430, 431, 601, 602, 622, and 623 (MCL 280.1, 280.2, 280.3, 280.6, 280.8, 280.10, 280.12, 280.21, 280.23, 280.24, 280.25, 280.26, 280.27, 280.28, 280.29, 280.30, 280.31, 280.32, 280.33, 280.51, 280.52, 280.53, 280.54, 280.151, 280.152, 280.154, 280.191, 280.192, 280.193, 280.221, 280.222, 280.223, 280.241, 280.242, 280.243, 280.244, 280.245, 280.247, 280.261, 280.262, 280.263, 280.265, 280.266, 280.267, 280.270, 280.273, 280.274, 280.275, 280.276, 280.277, 280.278, 280.279, 280.280, 280.282, 280.283, 280.301, 280.302, 280.303, 280.304, 280.306, 280.307, 280.322, 280.322b, 280.323, 280.324, 280.326, 280.327, 280.328, 280.391, 280.392, 280.393, 280.395, 280.421, 280.422, 280.423, 280.425, 280.429, 280.430, 280.431, 280.601, 280.602, 280.622, and 280.623), the title as amended by 1982 PA 449, section 21 as amended by 1989 PA 134, section 33 as amended by 1982 PA 356, section 223 as amended by 1989 PA 61, section 280 as amended by 1983 PA 176, section 282 as amended by 1984 PA 80, section 283 as amended by 1989 PA 149, and section 423 as amended by 1996 PA 552, and by adding sections 7, 7a, 7b, 13, 14, 15, 34, 35, 41, 42, 44, 51a, 51b, 51c, 56, 57, 58, 163, 275a, 277a, 329, 330, and 603 and chapters 8A and 26; and to repeal acts and parts of acts.

The bill was read a first time by its title and referred to the Committee on Agriculture.

Reps. Cropsey, McBryde, Kaza, Whyman, Hammerstrom, Walberg, Lowe, Horton, Birkholz, McManus, London, Nye, Geiger, Gernaat, Jansen, Sanborn, Dalman, Green, Bodem, Middaugh, DeVuyst, Goschka and Perricone introduced

House Bill No. 6096, entitled

A bill to prohibit the expenditure of public funds for abortions; and to prescribe penalties for a violation of this act.

The bill was read a first time by its title and referred to the Committee on Judiciary.

Reps. Horton, Cropsey, McBryde, Kaza, Whyman, Walberg, Hammerstrom, McManus, Jansen, Lowe, Dalman, Nye, Geiger, Gernaat, London, Sanborn, Birkholz, Green, Bodem, DeVuyst, Middaugh, Goschka and Perricone introduced

House Bill No. 6097, entitled

A bill to amend 1947 PA 336, entitled "An act to prohibit strikes by certain public employees; to provide review from disciplinary action with respect thereto; to provide for the mediation of grievances and the holding of elections; to declare and protect the rights and privileges of public employees; and to prescribe means of enforcement and penalties for the violation of the provisions of this act," (MCL 423.201 to 423.217) by adding section 15a.

The bill was read a first time by its title and referred to the Committee on Judiciary.

Reps. McBryde, Cropsey, Kaza, Whyman, Walberg, Hammerstrom, Horton, Lowe, McManus, Nye, Geiger, Gernaat, London, Jansen, Sanborn, Dalman, Birkholz, Green, Bodem, DeVuyst, Middaugh, Goschka and Perricone introduced **House Bill No. 6098, entitled**

A bill to prohibit the expenditure of public funds by the state for abortions; and to prescribe penalties for a violation of this act.

The bill was read a first time by its title and referred to the Committee on Judiciary.

Reps. Voorhees, Cropsey, McBryde, Kaza, Whyman, Walberg, Hammerstrom, Horton, Lowe, McManus, Jansen, Birkholz, Nye, Geiger, Gernaat, London, Sanborn, Dalman, Green, Bodem, Middaugh, Goschka and Perricone introduced **House Bill No. 6099, entitled**

A bill to amend 1974 PA 75, entitled "An act to provide for payment to approved independent nonprofit institutions of higher education, located within the state, for all earned degrees conferred upon Michigan residents; and to provide for appropriations," by amending section 2 (MCL 390.1022), as amended by 1984 PA 9.

The bill was read a first time by its title and referred to the Committee on Colleges and Universities.

Reps. Kukuk, Cropsey, McBryde, Kaza, Whyman, Hammerstrom, Walberg, Horton, Lowe, McManus, Jansen, Birkholz, Nye, Geiger, Gernaat, London, Sanborn, Dalman, Green, Bodem, Middaugh, DeVuyst, Goschka and Perricone introduced

House Bill No. 6100, entitled

A bill to amend 1975 PA 222, entitled "Higher education loan authority act," by amending sections 2 and 4a (MCL 390.1152 and 390.1154a), section 2 as amended by 1987 PA 206 and section 4a as added by 1989 PA 96.

The bill was read a first time by its title and referred to the Committee on Colleges and Universities.

Reps. Whyman, Cropsey, McBryde, Kaza, Walberg, Hammerstrom, Horton, Lowe, McManus, Jansen, Birkholz, London, Nye, Geiger, Gernaat, Dalman, Green, Bodem, Middaugh, DeVuyst, Goschka and Perricone introduced

House Bill No. 6101, entitled

A bill to amend 1964 PA 208, entitled "An act to grant scholarships to students enrolled in postsecondary education institutions; and to provide for the administration of the scholarship program," by amending section 7 (MCL 390.977), as amended by 1980 PA 500.

The bill was read a first time by its title and referred to the Committee on Colleges and Universities.

Reps. Green, Cropsey, McBryde, Kaza, Walberg, Whyman, Horton, Hammerstrom, McManus, Jansen, Lowe, Birkholz, Nye, Geiger, Gernaat, London, Sanborn, Dalman, Bodem, Middaugh, DeVuyst, Goschka and Perricone introduced

House Bill No. 6102, entitled

A bill to amend 1986 PA 288, entitled "An act to establish a Michigan work-study program for qualified resident students attending eligible postsecondary schools and employed by qualified employers; and to prescribe the powers and duties of certain state agencies," by amending section 3 (MCL 390.1373).

The bill was read a first time by its title and referred to the Committee on Colleges and Universities.

Reps. Raczkowski, Cropsey, McBryde, Kaza, Whyman, Walberg, Horton, Birkholz, Hammerstrom, McManus, Jansen, Lowe, Nye, Geiger, Gernaat, London, Sanborn, Dalman, Green, Bodem, Middaugh, DeVuyst, Goschka and Perricone introduced

House Bill No. 6103, entitled

A bill to amend 1960 PA 77, entitled "An act to create the Michigan higher education assistance authority and to prescribe its powers and duties; to authorize persons, corporations, and associations to make gifts to the authority; to prescribe the powers and duties of certain state officials; to authorize, ratify, and confirm certain guarantees of students' loans and authorize reguarantees; to authorize, ratify, and confirm certain guarantees of loans made to parents of students; to validate certain prior appropriations; and to authorize the transfer of certain appropriations to be transferred to and administered by the authority," by amending section 7 (MCL 390.957), as amended by 1990 PA 117.

The bill was read a first time by its title and referred to the Committee on Colleges and Universities.

Reps. Harder, Cropsey, McBryde, Kaza, Walberg, Horton, McManus, Whyman, Hammerstrom, Jansen, Nye, Geiger, Gernaat, London, Dalman, Lowe, Sanborn, Birkholz, Green, Bodem, Middaugh, DeVuyst, Goschka and Perricone introduced

House Bill No. 6104, entitled

A bill to amend 1978 PA 105, entitled "An act to provide grants to students enrolled in independent nonprofit institutions of higher learning; and to provide for the promulgation of rules," by amending section 2 (MCL 390.1272), as amended by 1980 PA 502.

The bill was read a first time by its title and referred to the Committee on Colleges and Universities.

Reps. Walberg, Cropsey, McBryde, Kaza, Whyman, Hammerstrom, Horton, Lowe, McManus, Jansen, Geiger, Nye, Gernaat, London, Sanborn, Dalman, Birkholz, Green, Bodem, DeVuyst, Middaugh, Goschka and Perricone introduced
House Bill No. 6105, entitled

A bill to amend 1986 PA 273, entitled "An act to establish a Michigan educational opportunity grant program for resident qualified students enrolled in eligible public postsecondary schools; and to prescribe the powers and duties of certain state agencies," by amending section 3 (MCL 390.1403).

The bill was read a first time by its title and referred to the Committee on Colleges and Universities.

Reps. Birkholz, Cropsey, McBryde, Kaza, Walberg, Whyman, Horton, Hammerstrom, McManus, Jansen, Lowe, Nye, Geiger, Gernaat, London, Sanborn, Dalman, Green, Bodem, Middaugh, DeVuyst, Goschka and Perricone introduced

House Bill No. 6106, entitled

A bill to amend 1986 PA 303, entitled "An act to establish a Michigan work-study program for qualified resident students attending eligible graduate and professional graduate schools and employed by qualified employers; to prescribe the powers and duties of certain state agencies; and to provide for an appropriation," by amending section 3 (MCL 390.1323).

The bill was read a first time by its title and referred to the Committee on Colleges and Universities.

Reps. Goschka, Cropsey, McBryde, Kaza, Walberg, Whyman, Horton, McManus, Hammerstrom, Lowe, Jansen, Nye, Geiger, Gernaat, London, Dalman, Sanborn, Birkholz, Green, Bodem, Middaugh, DeVuyst and Perricone introduced

House Bill No. 6107, entitled

A bill to amend 1986 PA 102, entitled "An act to establish a grant program for certain part-time, independent students in this state; and to prescribe the powers and duties of certain state agencies and institutions of higher education," by amending section 3 (MCL 390.1283).

The bill was read a first time by its title and referred to the Committee on Colleges and Universities.

Reps. Hammerstrom, Cropsey, McBryde, Kaza, Walberg, McManus, Whyman, Jansen, Nye, Geiger, Gernaat, London, Dalman, Lowe, Sanborn, Birkholz, Green, Bodem, Middaugh, DeVuyst, Goschka and Perricone introduced

House Bill No. 6108, entitled

A bill to amend 1966 PA 313, entitled "An act to award tuition grants to resident students enrolled in independent nonprofit institutions of higher learning; and to make an appropriation therefor," by amending section 1 (MCL 390.991), as amended by 1980 PA 503.

The bill was read a first time by its title and referred to the Committee on Colleges and Universities.

Reps. Baade, Cropsey, McBryde, Kaza, Walberg, Whyman, Horton, Hammerstrom, McManus, Jansen, Lowe, Nye, Geiger, Gernaat, London, Sanborn, Dalman, Birkholz, Green, Bodem, Middaugh, DeVuyst, Goschka and Perricone introduced

House Bill No. 6109, entitled

A bill to amend 1976 PA 228, entitled "The legislative merit award program act," by amending section 4 (MCL 390.1304), as amended by 1980 PA 386.

The bill was read a first time by its title and referred to the Committee on Colleges and Universities.

Reps. Lowe, Cropsey, McBryde, Kaza, Whyman, Walberg, Hammerstrom, Horton, McManus, Jansen, London, Nye, Geiger, Gernaat, Dalman, Sanborn, Birkholz, Green, Bodem, Middaugh, DeVuyst, Goschka and Perricone introduced

House Bill No. 6110, entitled

A bill to prohibit the expenditure of public funds by the state civil service commission and the office of the state employer in the department of civil service for abortions; and to prescribe penalties for a violation of this act.

The bill was read a first time by its title and referred to the Committee on Judiciary.

Rep. Wetters introduced

House Bill No. 6111, entitled

A bill to amend 1988 PA 466, entitled "Animal industry act of 1987," by amending section 8 (MCL 287.708), as amended by 1994 PA 41.

The bill was read a first time by its title and referred to the Committee on Agriculture.

Rep. Wetters introduced

House Bill No. 6112, entitled

A bill to amend 1988 PA 466, entitled "Animal industry act of 1987," by amending sections 12 and 14 (MCL 287.712 and 287.714), as amended by 1996 PA 369.

The bill was read a first time by its title and referred to the Committee on Agriculture.

Reps. Dalman, Birkholz, Middaugh, Gernaat, Whyman and Richner introduced

House Bill No. 6113, entitled

A bill to amend 1993 PA 92, entitled "Seller disclosure act," by amending section 7 (MCL 565.957), as amended by 1996 PA 92.

The bill was read a first time by its title and referred to the Committee on Commerce.

Reps. Gagliardi, Cherry, Palamara and LaForge introduced

House Bill No. 6114, entitled

A bill to amend 1986 PA 268, entitled "Legislative council act," (MCL 4.1101 to 4.1901) by adding sections 701 and 702; and to repeal acts and parts of acts.

The bill was read a first time by its title and referred to the Committee on House Oversight and Ethics.

Rep. Perricone introduced

House Bill No. 6115, entitled

A bill to amend 1846 RS 16, entitled "Of the powers and duties of townships, the election and duties of township officers, and the division of townships," by amending section 110b (MCL 41.110b), as added by 1989 PA 77.

The bill was read a first time by its title and referred to the Committee on Public Retirement.

Reps. Baird, Freeman, Schauer, Martinez, DeHart, Vaughn, LaForge, Brater and Scott introduced

House Bill No. 6116, entitled

A bill to amend 1974 PA 258, entitled "Mental health code," (MCL 330.1001 to 330.2106) by adding section 119.

The bill was read a first time by its title and referred to the Committee on Mental Health.

Reps. Baird, Schauer, Martinez, Vaughn, LaForge, Brater and Scott introduced

House Bill No. 6117, entitled

A bill to amend 1992 PA 234, entitled "The judges retirement act of 1992," by amending section 506 (MCL 38.2506).

The bill was read a first time by its title and referred to the Committee on Public Retirement.

Reps. Baird, Schauer, DeHart, Vaughn, LaForge, Brater and Scott introduced

House Bill No. 6118, entitled

A bill to amend 1947 PA 359, entitled "The charter township act," by amending sections 4 and 5 (MCL 42.4 and 42.5), section 4 as amended by 1998 PA 101 and section 5 as amended by 1986 PA 34.

The bill was read a first time by its title and referred to the Committee on Local Government.

Reps. Baird, Schauer, DeHart, Vaughn, LaForge, Brater and Scott introduced

House Bill No. 6119, entitled

A bill to amend 1954 PA 116, entitled "Michigan election law," by amending sections 198, 345, 348, 349, 352, 354, 355, 357, 358, 362, 534, 535, 561, 570a, 582, 686a, 694, 719, and 973 (MCL 168.198, 168.345, 168.348, 168.349, 168.352, 168.354, 168.355, 168.357, 168.358, 168.362, 168.534, 168.535, 158.561, 168.570a, 168.582, 168.686a, 168.694, 168.719, and 168.973), section 349 as amended by 1996 PA 583, section 358 as amended by 1990 PA 7, section 362 as amended by 1980 PA 112, sections 534 and 686a as amended by 1988 PA 116, and section 582 as amended by 1980 PA 160.

The bill was read a first time by its title and referred to the Committee on Local Government.

Rep. Callahan introduced

House Bill No. 6120, entitled

A bill to amend 1954 PA 116, entitled "Michigan election law," by amending section 176 (MCL 168.176).

The bill was read a first time by its title and referred to the Committee on House Oversight and Ethics.

Rep. Callahan introduced

House Bill No. 6121, entitled

A bill to amend 1972 PA 348, entitled "An act to regulate relationships between landlords and tenants relative to rental agreements for rental units; to regulate the payment, repayment, use and investment of security deposits; to provide for commencement and termination inventories of rental units; to provide for termination arrangements relative to rental units; to provide for legal remedies; and to provide penalties," (MCL 554.601 to 554.616) by adding section 601b.

The bill was read a first time by its title and referred to the Committee on Urban Policy and Economic Development.

Rep. Callahan introduced

House Bill No. 6122, entitled

A bill to amend 1976 PA 388, entitled "Michigan campaign finance act," (MCL 169.201 to 169.282) by adding section 47a.

The bill was read a first time by its title and referred to the Committee on House Oversight and Ethics.

Reps. Gernaat and Lowe introduced

House Bill No. 6123, entitled

A bill to amend 1931 PA 328, entitled "The Michigan penal code," by amending section 115 (MCL 750.115).

The bill was read a first time by its title and referred to the Committee on Conservation, Environment and Recreation.

Rep. Gernaat introduced

House Bill No. 6124, entitled

A bill to amend 1994 PA 451, entitled "Natural resources and environmental protection act," by amending sections 82103, 82105, and 82116 (MCL 324.82103, 324.82105, and 324.82116), sections 82103 and 82116 as added by 1995 PA 58 and section 82105 as amended by 1998 PA 297, and by adding sections 82103a, 82103b, 82103c, 82103d, 82103e, 82103f, 82103g, 82103h, 82103i, 82103j, 82103k, 82103l, and 82116a.

The bill was read a first time by its title and referred to the Committee on Conservation, Environment and Recreation.

Reps. Martinez, Gire, LaForge, Schauer, Bogardus, Quarles, Rison, Ciaramitaro, Price, Hanley, Emerson and Willard introduced

House Bill No. 6125, entitled

A bill to amend 1939 PA 280, entitled "The social welfare act," by amending section 1c (MCL 400.1c).

The bill was read a first time by its title and referred to the Committee on Human Services and Children.

Reps. Crissman, Martinez, Scranton, Godchaux, Gilmer, Baird, Bankes, Dobb and Bodem introduced

House Bill No. 6126, entitled

A bill to authorize and regulate health care decisions made by an individual's health care agent for the individual; and to compel compliance with health care decisions made by an individual or made by the individual's health care agent for the individual.

The bill was read a first time by its title and referred to the Committee on Judiciary.

Reps. Wojno, Voorhees, Raczkowski, Brewer, Hale, Mans, Hanley, Olshove, Thomas, Kukuk, Sanborn, Kilpatrick and Callahan introduced

House Bill No. 6127, entitled

A bill to amend 1976 PA 390, entitled "Emergency management act," by amending section 19 (MCL 30.419), as amended by 1990 PA 50.

The bill was read a first time by its title and referred to the Committee on Appropriations.

Reps. Raczkowski, Birkholz, Jelinek, Hammerstrom, Goschka, Bodem, Sanborn, Jansen and Cassis introduced

House Bill No. 6128, entitled

A bill to amend 1947 PA 336, entitled "An act to prohibit strikes by certain public employees; to provide review from disciplinary action with respect thereto; to provide for the mediation of grievances and the holding of elections;

to declare and protect the rights and privileges of public employees; and to prescribe means of enforcement and penalties for the violation of the provisions of this act," by amending section 15 (MCL 423.215), as amended by 1994 PA 112.

The bill was read a first time by its title and referred to the Committee on Labor and Occupational Safety.

Reps. Martinez and Schauer introduced

House Bill No. 6129, entitled

A bill to amend 1976 PA 451, entitled "The revised school code," (MCL 380.1 to 380.1852) by adding section 1191. The bill was read a first time by its title and referred to the Committee on Education.

Reps. Brewer and Frank introduced

House Bill No. 6130, entitled

A bill to amend 1927 PA 175, entitled "The code of criminal procedure," by amending section 3 of chapter IX, section 3 of chapter XI, section 8 of chapter XII, and section 22 of chapter XIV (MCL 769.3, 771.3, 772.8, and 774.22), section 3 of chapter IX as amended by 1982 PA 470, section 3 of chapter XI as amended by 1994 PA 445, section 8 of chapter XII as amended by 1994 PA 71, and section 22 of chapter XIV as amended by 1980 PA 506, and by adding section 1f to chapter IX.

The bill was read a first time by its title and referred to the Committee on Judiciary.

Reps. Brewer, Schroer, Brater, Frank, DeHart, Wojno, Scott, Rison, Kilpatrick, Bogardus, Murphy and Parks introduced

House Bill No. 6131, entitled

A bill to amend 1973 PA 196, entitled "An act to prescribe standards of conduct for public officers and employees; to create a state board of ethics and prescribe its powers and duties; and to prescribe remedies and penalties," by amending the title and section 5 (MCL 15.345), the title as amended by 1980 PA 481, and by adding section 2f.

The bill was read a first time by its title and referred to the Committee on House Oversight and Ethics.

Reps. Brewer, Schroer, Brater, Frank, DeHart, Wojno, Scott, Rison, Kilpatrick, Bogardus, Murphy and Parks introduced

House Bill No. 6132, entitled

A bill to create the state technology commission within the legislative branch; and to prescribe its powers and duties.

The bill was read a first time by its title and referred to the Committee on Advanced Technology and Computer Development.

Reps. Brewer, Schroer, Brater, Frank, DeHart, Wojno, Scott, Rison, Kilpatrick, Bogardus, Murphy and Parks introduced

House Bill No. 6133, entitled

A bill to prohibit the use of the name of a state agency or a name similar to the name of a state agency without fair compensation; and to provide penalties.

The bill was read a first time by its title and referred to the Committee on House Oversight and Ethics.

Reps. Wojno, Brewer, Hale, Mans, Hanley, Olshove, Thomas and Parks introduced

House Bill No. 6134, entitled

A bill to amend 1984 PA 431, entitled "The management and budget act," (MCL 18.1101 to 18.1594) by adding section 261c.

The bill was read a first time by its title and referred to the Committee on Appropriations.

Reps. Brewer, Griffin, Frank, Leland and Murphy introduced

House Bill No. 6135, entitled

A bill to amend 1987 PA 173, entitled "Mortgage brokers, lenders, and servicers licensing act," (MCL 445.1651 to 445.1684) by adding section 22b.

The bill was read a first time by its title and referred to the Committee on Commerce.

Reps. Brewer, Griffin, Frank, Leland and Murphy introduced

House Bill No. 6136, entitled

A bill to amend 1969 PA 319, entitled "Banking code of 1969," (MCL 487.301 to 487.598) by adding section 247.

The bill was read a first time by its title and referred to the Committee on Commerce.

Reps. Brewer, Griffin, Frank, Leland and Murphy introduced

House Bill No. 6137, entitled

A bill to amend 1980 PA 307, entitled "Savings and loan act of 1980," (MCL 491.102 to 491.1202) by adding section 1135.

The bill was read a first time by its title and referred to the Committee on Commerce.

Reps. Brewer, Griffin, Frank, Leland and Murphy introduced

House Bill No. 6138, entitled

A bill to amend 1996 PA 354, entitled "Savings bank act," (MCL 487.3101 to 487.3804) by adding section 513.

The bill was read a first time by its title and referred to the Committee on Commerce.

Reps. Brewer, Griffin, Frank, Leland and Murphy introduced

House Bill No. 6139, entitled

A bill to amend 1925 PA 285, entitled "An act to provide for the organization, operation, and supervision of credit unions; to provide for the conversion of a state credit union into a federal credit union or a credit union organized and supervised under the laws of any other state or territory of the United States and for the conversion of a federal credit union or a credit union organized and supervised under the laws of any other state or territory of the United States into a state credit union; and to provide for the merger of credit unions organized and supervised under the laws of this state, credit unions organized and supervised under the laws of any other state or territory of the United States, and federal credit unions," (MCL 490.1 to 490.31) by adding section 32.

The bill was read a first time by its title and referred to the Committee on Commerce.

By unanimous consent the House returned to the order of

Motions and Resolutions

Reps. Sanborn, Richner, Cropsey, Jansen, McBryde, Kukuk, Jelinek, Hammerstrom, Wojno, Rocca, Goschka, Bodem, Birkholz, Cassis, Raczkowski, Scranton, Dalman, Sikkema, Horton, Gernaat, Bankes, Schermesser, DeVuyst, Voorhees, Brackenridge, DeHart, Green, Palamara, Profit and Lowe offered the following resolution:

House Resolution No. 366.

A resolution to memorialize the Congress of the United States to protect Medicare benefits and to amend policies that restrict choices.

Whereas, Access to quality health care is of paramount importance to all citizens, but most especially to older citizens with more need for certain services. Medicare plays a vital role in determining the quality of life of millions of Americans. In a country that prides itself on its leadership role, it is essential that our people have access to the finest care possible; and

Whereas, In recent years, the federal program of Medicare has been eroded. Restrictions have been placed on choices available to those needing health care. A significant example is the policy change that now effectively prevents a person from obtaining medical care that Medicare will not allow, even if the person pays for that care on their own. This is clearly damaging to the choices open to people to pursue the care and the doctor or facility they want. While there is obviously need to establish parameters to rein in costs, it seems unjust to prevent people from paying for optional services on their own; and

Whereas, As more pressures are placed upon the Medicare system by the aging of the population, it is imperative to establish firm protections to ensure the present and future viability of Medicare. These protections should include eliminating unreasonable restrictions on choices of doctors and medical care. This is an issue of vital interest to every single American; now, therefore, be it

Resolved by the House of Representatives, That we memorialize the Congress of the United States to protect Medicare benefits and to amend policies that restrict choices; and be it further

Resolved, That copies of this resolution be transmitted to the President of the United States Senate, the Speaker of the United States House of Representatives, and the members of the Michigan congressional delegation.

The resolution was referred to the Committee on Senior Citizens and Veterans Affairs.

Reps. Sanborn, Richner, Cropsey, Jansen, McBryde, Kukuk, Jelinek, Hammerstrom, Wojno, Rocca, Goschka, Bodem, Birkholz, Cassis, Raczkowski, Scranton, Dalman, Sikkema, Horton, Gernaat, Bankes, DeVuyst, Voorhees, Brackenridge, Green, Llewellyn, Palamara, Profit and Lowe offered the following resolution:

House Resolution No. 367.

A resolution to memorialize the Congress of the United States to enact the Social Security Preservation Act.

Whereas, The Social Security system provides a safety net that is of the utmost importance to our country and its future. As more and more Americans approach retirement age and as our society adjusts to the financial and social implications of this aging, it is imperative to address the viability of Social Security for the decades to come; and

Whereas, As policy makers in Washington consider steps to preserve Social Security, the first task that lies before them is rectifying a practice that has significantly accelerated the looming financial crisis facing Social Security. For many years, the federal government has utilized money from the Social Security trust funds to reduce budget deficits. As a result of this policy of "raiding" Social Security, the United States Treasury now owes Social Security more than \$600 billion. In 1997 alone, \$70 billion was shifted from the system to address operating costs of the federal government; and

Whereas, The Congress is considering a measure, H.R.857, to prohibit the shifting of money from the Social Security system. This bill, the Social Security Preservation Act, would amend the Social Security Act to ensure that the annual surplus of system funds must be invested appropriately. This bill would prohibit diversion of money or delays in investing the money in Social Security; and

Whereas, Before any other long-term changes are made to ensure the solvency of Social Security for present and future generations of Americans, diversion of this money for other purposes must stop. Only then can effective steps be taken to strengthen Social Security; now, therefore, be it

Resolved by the House of Representatives, That we memorialize the Congress of the United States to enact the Social Security Preservation Act; and be it further

Resolved, That copies of this resolution be transmitted to the President of the United States Senate, the Speaker of the United States House of Representatives, and the members of the Michigan congressional delegation.

The resolution was referred to the Committee on Senior Citizens and Veterans Affairs.

Reps. Hanley, Frank, Kukuk, Bodem, Baade, Freeman, Schermesser, Tesanovich, Martinez, McBryde, DeHart, Dobronski, Green, Murphy, Bogardus, London, Llewellyn, Goschka, Parks, Hood, Hale, Kilpatrick, Palamara, LaForge, Profit, Birkholz, Schauer, Richner, Scranton, Jelinek and Kaza offered the following resolution:

House Resolution No. 368.

A resolution to urge the United States Coast Guard to work with other federal agencies and with officials of the city of Saginaw to reopen or remove certain railroad bridges spanning the Saginaw River.

Whereas, In 1996, the United States Coast Guard permitted CSX Railroad officials to close railroad bridge facilities spanning the Saginaw River. At that time, the unused bridges were closed permanently because there was no boat traffic up the river that would be hindered from doing so by the drawbridges remaining in the lowered position; and

Whereas, Recently, however, development efforts along the Saginaw River have been thwarted by the closed bridges. Without the reopening or removal of the bridges, boats will not be able to travel up the river to access marina facilities and other businesses. Restrictions on river traffic are seriously hindering development; and

Whereas, The Coast Guard has jurisdiction over the bridges in question. However, with assistance of the Army Corps of Engineers, there are options available for dealing with the problems caused by the railroad bridges; and

Whereas, With the value of continued development of the Saginaw River to the city and the surrounding area, it is important for all city and federal officials to find a solution to this problem. Michigan is strongly committed to the revitalization of our communities. Abandoned bridges should not be allowed to impede this progress; now, therefore, be it

Resolved by the House of Representatives, That we urge the United States Coast Guard to work with other federal agencies and with officials of the city of Saginaw to reopen or remove certain railroad bridges spanning the Saginaw River; and be it further

Resolved, That copies of this resolution be transmitted to the United States Coast Guard and to Saginaw city officials. Pending the reference of the resolution to a committee,

Rep. Gagliardi moved that Rule 77 be suspended and the resolution be considered at this time.

The motion prevailed, 3/5 of the members present voting therefor.

The question being on the adoption of the resolution,

The resolution was adopted, a majority of the members serving voting therefor.

Reps. Basham, DeHart, Schermesser, Whyman, Dobronski, Bankes, Mans, Brown, Kelly, Palamara, Baade, Freeman, Murphy, Bogardus, Goschka, Parks, Hale, Kilpatrick, LaForge, Profit, Birkholz, Scranton and Gubow offered the following resolution:

House Resolution No. 369.

A resolution recognizing the twentieth anniversary of First Step.

Whereas, It is a distinct privilege to commemorate the twentieth anniversary of First Step and to commend its staff and volunteers for their commitment and effectiveness in reducing domestic violence and sexual assault in the

Downriver and Western Wayne County communities. We thank these individuals on behalf of the many people who have benefitted from their programs and services; and

Whereas, Recognizing that domestic violence and sexual assault are community problems that require a community effort, First Step has worked diligently to establish widespread acceptance and support from the thirty-five communities it serves. To that end, First Step has utilized churches, civic and service organizations, police departments, courts, medical and legal facilities, schools and universities to enhance the effectiveness of its programs; and

Whereas, Under the leadership of its twenty-two member volunteer Board of Directors, First Step continues to provide critical services — all free of charge — to women and children who are victims of domestic violence and sexual assault. These services include a 24-hour, 365-day staffed 42-bed residential shelter, a 24-hour “Help Line,” 24-hour crisis intervention services, counseling, group support, children’s programming, child care, transportation, legal services, in court advocacy and 24-hour domestic violence and sexual assault teams. First Step also provides training on domestic violence and sexual assault for mental health, criminal justice, medical and legal professions, as well as extensive education and prevention programs for schools and the community at large; and

Whereas, Clearly as the staff and volunteers of First Step look back on their distinguished history of providing programs and services to prevent and stop family violence, they can take great pride in their contributions. They have been the critical difference in the lives of countless mothers and children who have come through their doors; now, therefore, be it

Resolved by the House of Representatives, That members of this legislative body commemorate the twentieth anniversary of First Step and commend the staff and volunteers for their tireless efforts. May they know of our high regard for their exemplary programs and services; and be it further

Resolved, That copies of this resolution be transmitted to the staff and volunteers of First Step as evidence of our esteem for their fine work.

Pending the reference of the resolution to a committee,

Rep. Gagliardi moved that Rule 77 be suspended and the resolution be considered at this time.

The motion prevailed, 3/5 of the members present voting therefor.

The question being on the adoption of the resolution,

The resolution was adopted, a majority of the members serving voting therefor.

Reps. Johnson, Bankes, Kukuk, Cropsey, Dalman, Bodem, Tesanovich, Martinez, Cassis, Whyman, DeVuyst, McBryde, Brackenridge, DeHart, Green, Bogardus, London, Llewellyn, Hammerstrom, Goschka, Parks, Hood, Palamara, LaForge, Profit, Birkholz, Godchaux, Schauer, Richner, Scranton, Jelinek, Kaza, Crissman, Lowe, Gubow, Galloway and Rocca offered the following resolution:

House Resolution No. 370.

A resolution honoring Lieutenant Governor Connie Binsfeld.

Whereas, Lieutenant Governor Connie Binsfeld is the only woman in Michigan history to hold leadership positions in the House, Senate and the Executive Office; and

Whereas, Changes to the child welfare system in the State of Michigan were seriously needed and family reunification efforts slowed down the adoption system often trapping children in dangerous situations; and

Whereas, Children whose parents had substance abuse problems were often placed back into the home without the abuse problems being addressed and there was a need to move children more quickly from the foster care system into permanent adoptive homes; and

Whereas, Siblings were often not allowed to remain together and children all over the state languished in the foster care system as rule upon rule tied the hands of case workers; and

Whereas, The problems, recognized by Lieutenant Governor Binsfeld, involved courts, federal law, state law, departmental policy and private agencies; and

Whereas, Lieutenant Governor Binsfeld knew that the overlapping responsibilities and jurisdictions could not be addressed in a piecemeal fashion, and as Chair of the Binsfeld Childrens Commission she recommended monumental changes to improve the lives of children in the welfare system who were victims of abuse and neglect; and

Whereas, For a woman whose personal goal was to “bring help to vulnerable and victimized children”, Lieutenant Governor Binsfeld was in the ideal place to do something about it, and her office became the unofficial complaint center for problems in the child welfare system; and

Whereas, The commission’s forty-two recommendations to change the state child welfare system were passed into laws that changed the Child Protection Law, the Foster Care and Adoption Act, the Juvenile Code, the Public Health Code, numerous statutes and many administrative procedures; and

Whereas, The task of bringing together state departments, courts, private foster care agencies, prosecuting attorneys, doctors, nurses, mental health professionals and social workers to talk about these children was accomplished by the Lieutenant Governor’s Childrens Commission; and

Whereas, As an advocate she came to understand the needs of these children and helped them in the best way she could by changing the laws governing them; now, therefore, be it

Resolved by the House of Representatives, That it is with great pride and admiration that we thank her for gracing the House Chamber for eight years and for being such a fine example of what a stateswoman should be in all that she has done, hence as a Senator and finally as the Lieutenant Governor to the Great State of Michigan; and be it further Resolved, That a copy of this resolution be transmitted to Lieutenant Governor Binsfeld as evidence of our esteem. Pending the reference of the resolution to a committee,

Rep. Gagliardi moved that Rule 77 be suspended and the resolution be considered at this time. The motion prevailed, 3/5 of the members present voting therefor.

The question being on the adoption of the resolution,
The resolution was adopted, a majority of the members serving voting therefor.

Reps. Lowe, Cropsey, McManus, Oxender, McBryde, Whyman, Raczkowski, Dobb, Johnson, Gilmer, Horton, Sikkema, Cassis, Gernaat, Jelinek, Bankes, Hammerstrom, Llewellyn, Rhead, Geiger, Richner, Birkholz, McNutt, Scranton, Fitzgerald, DeVuyst, LeTarte, Rocca, Galloway, Kukuk, Bobier, Law, Brackenridge, Bodem, Gustafson, Jellema, Dalman, Voorhees, Walberg and Perricone offered the following resolution:

House Resolution No. 371.

A resolution to urge the President of the United States to resign from office.

Whereas, The people of the United States place an enormous measure of trust in the person who serves them as the President. The President represents our collective hopes and aspirations and serves as a role model for the children of the nation; and

Whereas, Over the past several months, through investigation and through his own admission, we have learned that the President has violated the trust of his office. Our President has, at the very least, lied repeatedly to the country. In the course of defending this lie, he has possibly weakened the office for future occupants of the White House; and

Whereas, The chief executive officer of any corporation or educational institution would be summarily dismissed under similar circumstances; and

Whereas, Members of Congress in both parties and editorial boards of over 100 newspapers have called for the President's resignation; and

Whereas, As the Congress begins the process of determining what course to follow, several potentially grave matters demand the focus and attention of our country and its leadership. The world's economy is jeopardized by fiscal chaos in several key nations. Terrorists have raised the specter of escalating their attacks. Russia is on the verge of possible political collapse. North Korea has made threatening gestures toward Japan. Masses of African people are being killed and displaced by war. The fragile situation in the former Yugoslavia demands vigilance. The President should save the country any more unnecessary pain and upheaval; now, therefore, be it

Resolved by the House of Representatives, That we urge the President of the United States to resign from office; and be it further

Resolved, That a copy of this resolution be transmitted to the Office of the President.

The resolution was referred to the Committee on House Oversight and Ethics.

Reps. McManus, Sikkema, Perricone, Gustafson, Dalman, Jelinek, Gernaat, Lowe, Bankes, Cropsey, Bodem, Cassis, Whyman, DeVuyst, Voorhees, McBryde, Green, Llewellyn, Hammerstrom, Birkholz, Scranton, Crissman and Rocca offered the following concurrent resolution:

House Concurrent Resolution No. 114.

A concurrent resolution to urge the President of the United States to resign from office.

Whereas, The office of the presidency carries with it the trust of the American people. Our citizens have every right to expect the President to uphold all of the laws of the land and to represent our interests at home and overseas with honesty, integrity, and dignity; and

Whereas, The President has broken this trust through his actions in reaction to the investigation by the special prosecutor. The President has admitted his inappropriate actions, and the report of the special prosecutor includes significant evidence of obstructing justice, committing perjury, and abusing the power of his office; and

Whereas, In the face of efforts to determine the truth about the President's actions with regard to an earlier accusation of harassment, the White House has responded with an array of legal obstacles. These maneuvers have served to discredit and possibly weaken the presidency; and

Whereas, The world faces many grave situations, including political and financial turmoil in some of the largest and most important countries in the world. At home, we worry about the impact of global economic problems and our vulnerability to terrorism. The President needs to act responsibly for the good of the country; now, therefore, be it

Resolved by the House of Representatives (the Senate concurring), That we urge the President of the United States to resign from office; and be it further

Resolved, That a copy of this resolution be transmitted to the Office of the President of the United States.

The concurrent resolution was referred to the Committee on House Oversight and Ethics.

Reports of Standing Committees

The Committee on Agriculture, by Rep. Wetters, Chair, reported

Senate Bill No. 485, entitled

A bill to repeal 1953 PA 173, entitled "An act to provide for the regulation of garbage and the feeding of garbage to swine; to provide for the powers and duties of the Michigan department of agriculture with respect thereto; and to prescribe penalties for the violations of the provisions of this act," (MCL 287.401 to 287.409).

With the recommendation that the bill pass.

The bill was referred to the order of Second Reading of Bills.

Favorable Roll Call

SB 485 To Report Out:

Yeas: Reps. Wetters, Vaughn, Baade, Bogardus, Brewer, LaForge, Gernaat, Nye,

Nays: None.

The Committee on Agriculture, by Rep. Wetters, Chair, reported

Senate Bill No. 1025, entitled

A bill to define certain fruit, vegetable, dairy product, and grain processing uses and practices; to provide for circumstances under which a processing operation is not considered to be a public or private nuisance; to provide for certain powers and duties for certain state agencies and departments; and to provide for certain remedies for certain persons.

With the recommendation that the following amendment be adopted and that the bill then pass.

1. Amend page 6, line 9, by striking out all of section 5 and renumbering the remaining section.

The bill and amendment were referred to the order of Second Reading of Bills.

Favorable Roll Call

SB 1025 To Report Out:

Yeas: Reps. Wetters, Vaughn, Baade, LaForge, Green, DeVuyst, Gernaat, Jelinek, Nye,

Nays: None.

The Committee on Agriculture, by Rep. Wetters, Chair, reported

Senate Bill No. 1173, entitled

A bill to amend 1939 PA 141, entitled "Grain dealers act," by amending section 7a (MCL 285.67a), as amended by 1992 PA 238.

With the recommendation that the bill pass.

The bill was referred to the order of Second Reading of Bills.

Favorable Roll Call

SB 1173 To Report Out:

Yeas: Reps. Wetters, Vaughn, Baade, Bogardus, Brewer, LaForge, Green, DeVuyst, Gernaat, Jelinek, Nye,

Nays: None.

COMMITTEE ATTENDANCE REPORT

The following report, submitted by Rep. Wetters, Chair of the Committee on Agriculture, was received and read:

Meeting held on: Thursday, September 17, 1998, at 8:30 a.m.,

Present: Reps. Wetters, Vaughn, Baade, Bogardus, Brewer, LaForge, Green, DeVuyst, Gernaat, Jelinek, Nye,

Absent: Reps. Willard, Horton,

Excused: Reps. Willard, Horton.

The Committee on Tax Policy, by Rep. Profit, Chair, reported

House Bill No. 6016, entitled

A bill to amend 1937 PA 94, entitled "Use tax act," by amending section 4 (MCL 205.94), as amended by 1997 PA 194.

With the recommendation that the substitute (H-2) be adopted and that the bill then pass.

The bill and substitute were referred to the order of Second Reading of Bills.

Favorable Roll Call

HB 6016 To Report Out:

Yeas: Reps. Profit, Gubow, Palamara, Wallace, Wetters, Perricone, Brackenridge, Cassis, Goschka, Middleton, Whyman,

Nays: Rep. Freeman.

The Committee on Tax Policy, by Rep. Profit, Chair, reported

House Bill No. 6017, entitled

A bill to amend 1933 PA 167, entitled "General sales tax act," by amending section 4a (MCL 205.54a), as amended by 1996 PA 435.

With the recommendation that the substitute (H-2) be adopted and that the bill then pass.

The bill and substitute were referred to the order of Second Reading of Bills.

Favorable Roll Call

HB 6017 To Report Out:

Yeas: Reps. Profit, Gubow, Palamara, Wetters, Perricone, Brackenridge, Cassis, Goschka, Middleton, Whyman,

Nays: Rep. Freeman.

The Committee on Tax Policy, by Rep. Profit, Chair, reported

House Bill No. 6040, entitled

A bill to amend 1975 PA 228, entitled "Single business tax act," (MCL 208.1 to 208.145) by adding section 39c.

With the recommendation that the bill pass.

The bill was referred to the order of Second Reading of Bills.

Favorable Roll Call

HB 6040 To Report Out:

Yeas: Reps. Profit, Palamara, Wallace, Wetters, Perricone, Cassis, Goschka, Middleton, Whyman,

Nays: Rep. Freeman.

The Committee on Tax Policy, by Rep. Profit, Chair, reported

House Bill No. 6045, entitled

A bill to amend 1893 PA 206, entitled "The general property tax act," by amending section 7d (MCL 211.7d), as amended by 1987 PA 200.

With the recommendation that the bill pass.

The bill was referred to the order of Second Reading of Bills.

Favorable Roll Call

HB 6045 To Report Out:

Yeas: Reps. Profit, Freeman, Gubow, Palamara, Wallace, Perricone, Brackenridge, Cassis, Goschka, Middleton, Whyman,

Nays: None.

The Committee on Tax Policy, by Rep. Profit, Chair, reported

Senate Bill No. 1054, entitled

A bill to amend 1893 PA 206, entitled "The general property tax act," by amending section 13 (MCL 211.13) and by adding section 8c.

With the recommendation that the bill pass.

The bill was referred to the order of Second Reading of Bills.

Favorable Roll Call

SB 1054 To Report Out:

Yeas: Reps. Profit, Freeman, Palamara, Wallace, Wetters, Perricone, Cassis, Goschka, Whyman,

Nays: None.

The Committee on Tax Policy, by Rep. Profit, Chair, reported

Senate Bill No. 1096, entitled

A bill to amend 1893 PA 206, entitled "The general property tax act," (MCL 211.1 to 211.157) by adding section 9f.

With the recommendation that the substitute (H-2) be adopted and that the bill then pass.

The bill and substitute were referred to the order of Second Reading of Bills.

Favorable Roll Call

SB 1096 To Report Out:

Yeas: Reps. Profit, Gubow, Palamara, Wallace, Wetters, Perricone, Cassis, Goschka, Middleton, Whyman,

Nays: None.

The Committee on Tax Policy, by Rep. Profit, Chair, reported

Senate Bill No. 1136, entitled

A bill to amend 1989 PA 292, entitled "Metropolitan council act," by amending sections 3, 5, 7, 9, 11, 19, 21, and 33 (MCL 124.653, 124.655, 124.657, 124.659, 124.661, 124.669, 124.671, and 124.683).

With the recommendation that the following amendments be adopted and that the bill then pass.

1. Amend page 3, line 4, after "MEETS" by striking out "BOTH" and inserting "ALL".

2. Amend page 3, following line 9, by inserting:

"(iii) THE CITY HAS A POPULATION OF NOT LESS THAN 700,000 PERSONS ACCORDING TO THE MOST RECENT FEDERAL DECENNIAL CENSUS."

3. Amend page 6, line 16, after "unit" by inserting "IN A COUNCIL ESTABLISHED BY ENTITIES DESCRIBED IN SECTION 5(1)(A)".

4. Amend page 7, line 18, after "FUND" by striking out the balance of the sentence and inserting "THOSE CULTURAL AND RECREATIONAL PROGRAMS AND FACILITIES THAT ARE NOT PRIMARILY DESIGNED OR USED FOR PROFESSIONAL SPORTS."

5. Amend page 8, line 1, after "FUND" by striking out the balance of the sentence and inserting "ONLY CULTURAL AND RECREATIONAL PROGRAMS AND FACILITIES THAT ARE NOT PRIMARILY DESIGNED OR USED FOR PROFESSIONAL SPORTS."

6. Amend page 9, line 9, after "to" by striking out the balance of the line through "council" on line 10 and inserting "A COUNCIL ESTABLISHED BY ENTITIES DESCRIBED IN SECTION 5(1)(A)".

7. Amend page 11, line 23, after "TIES" by inserting a comma and "OTHER THAN FACILITIES THAT ARE PRIMARILY DESIGNED OR USED FOR PROFESSIONAL SPORTS,".

8. Amend page 14, line 25, after "unit" by inserting "IN A COUNCIL ESTABLISHED BY THE ENTITIES DESCRIBED IN SECTION 5(1)(A)".

The bill and amendments were referred to the order of Second Reading of Bills.

Favorable Roll Call

SB 1136 To Report Out:

Yeas: Reps. Profit, Agee, Gubow, Hanley, Palamara, Wallace, Wetters, Perricone, Brackenridge,

Nays: Reps. Quarles, Freeman, Cassis, Dobb, Goschka, Middleton, Whyman.

COMMITTEE ATTENDANCE REPORT

The following report, submitted by Rep. Profit, Chair of the Committee on Tax Policy, was received and read:

Meeting held on: Wednesday, September 16, 1998, at 9:00 a.m.,

Present: Reps. Profit, Quarles, Agee, Freeman, Gubow, Hanley, Palamara, Wallace, Wetters, Perricone, Brackenridge, Cassis, Dobb, Goschka, Middleton, Whyman,

Absent: Rep. Wojno,

Excused: Rep. Wojno.

The Committee on Regulatory Affairs, by Rep. Varga, Chair, reported

House Bill No. 5890, entitled

A bill to amend 1966 PA 225, entitled "Carnival-amusement safety act of 1966," by amending section 2 (MCL 408.652), as amended by 1982 PA 35.

With the recommendation that the bill pass.

The bill was referred to the order of Second Reading of Bills.

Favorable Roll Call

HB 5890 To Report Out:

Yeas: Reps. Varga, Wojno, Anthony, Leland, Profit, Quarles, Fitzgerald, Voorhees,

Nays: None.

The Committee on Regulatory Affairs, by Rep. Varga, Chair, reported

House Bill No. 5891, entitled

A bill to amend 1965 PA 290, entitled "Boiler act of 1965," (MCL 408.751 to 408.776) by adding section 7c.

With the recommendation that the substitute (H-1) be adopted and that the bill then pass.

The bill and substitute were referred to the order of Second Reading of Bills.

Favorable Roll Call

HB 5891 To Report Out:

Yeas: Reps. Varga, Wojno, Anthony, Leland, Profit, Quarles, Scott, Fitzgerald, Voorhees,

Nays: None.

The Committee on Regulatory Affairs, by Rep. Varga, Chair, reported

House Bill No. 6033, entitled

A bill to authorize the department of natural resources and the state transportation department to convey certain parcels of state owned property in Roscommon county; to prescribe conditions for the conveyances; and to provide for disposition of the revenue from the conveyances.

With the recommendation that the substitute (H-3) be adopted and that the bill then pass.

The bill and substitute were referred to the order of Second Reading of Bills.

Favorable Roll Call

HB 6033 To Report Out:

Yeas: Reps. Varga, Wojno, Anthony, Leland, Profit, Quarles, Scott, Fitzgerald, Voorhees,

Nays: None.

The Committee on Regulatory Affairs, by Rep. Varga, Chair, reported

Senate Bill No. 1030, entitled

A bill to amend 1998 PA 58, entitled "Michigan liquor control code of 1998," (MCL 436.1101 to 436.2303) by adding section 906.

With the recommendation that the bill pass.

The bill was referred to the order of Second Reading of Bills.

Favorable Roll Call

SB 1030 To Report Out:

Yeas: Reps. Varga, Wojno, Anthony, Leland, Profit, Quarles, Scott, Vaughn, Fitzgerald, Voorhees,
 Nays: None
 The Committee on Regulatory Affairs, by Rep. Varga, Chair, reported

Senate Bill No. 1148, entitled

A bill to amend 1972 PA 239, entitled "McCauley-Traxler-Law-Bowman-McNeely lottery act," by amending section 12 (MCL 432.12), as amended by 1996 PA 167.

With the recommendation that the bill pass.

The bill was referred to the order of Second Reading of Bills.

Favorable Roll Call

SB 1148 To Report Out:

Yeas: Reps. Varga, Anthony, Leland, Profit, Quarles, Scott, Vaughn, Fitzgerald, Richner, Scranton,
 Nays: Rep. Voorhees.

COMMITTEE ATTENDANCE REPORT

The following report, submitted by Rep. Varga, Chair of the Committee on Regulatory Affairs, was received and read:

Meeting held on: Thursday, September 17, 1998, at 8:30 a.m.,

Present: Reps. Varga, Wojno, Anthony, Leland, Profit, Quarles, Scott, Vaughn, Fitzgerald, Richner, Sanborn, Scranton, Voorhees,

Absent: Reps. Olshove, Rocca,

Excused: Reps. Olshove, Rocca.

COMMITTEE ATTENDANCE REPORT

The following report, submitted by Rep. Olshove, Chair of the Committee on Public Utilities, was received and read:

Meeting held on: Wednesday, September 16, 1998, at 3:40 p.m.,

Present: Reps. Olshove, Thomas, Alley, Baade, Dobronski, Freeman, Griffin, Gubow, Hanley, Leland, Murphy, Profit, Wetters, Dobb, Birkholz, Cassis, Galloway, Gustafson, Kukuk, LeTarte, Middaugh, Raczkowski, Whyman.

COMMITTEE ATTENDANCE REPORT

The following report, submitted by Rep. DeHart, Chair of the Committee on Public Retirement, was received and read:

Meeting held on: Thursday, September 17, 1998, at 9:30 a.m.,

Present: Reps. DeHart, Brewer, Dobronski, Mans, Basham, Rhead, Dobb, LeTarte,

Absent: Rep. Jelinek,

Excused: Rep. Jelinek.

Announcement by the Clerk of Printing and Enrollment

The Clerk announced that the following bills had been printed and placed upon the files of the members, Tuesday, September 15:

Senate Bill Nos. 1263 1264 1265 1266

The Clerk announced that the following Senate bills had been received on Thursday, September 17:

Senate Bill Nos. 235 776 778 869 1049 1095

By unanimous consent the House returned to the order of
Messages from the Senate

House Bill No. 5596, entitled

A bill to make appropriations for the judicial branch for the fiscal year ending September 30, 1999; to provide for the expenditure of these appropriations; to place certain restrictions on the expenditure of these appropriations; to prescribe the powers and duties of certain officials and employees; to require certain reports; and to provide for the disposition of fees and other income received by the judicial branch.

(For text of conference report, see House Journal No. 70, p. 2000.)

The Senate has adopted the report of the Committee of Conference.

The bill was referred to the Clerk for enrollment printing and presentation to the Governor.

Senate Bill No. 235, entitled

A bill to amend 1978 PA 368, entitled "Public health code," by amending sections 16131 and 16263 (MCL 333.16131 and 333.16263), as amended by 1995 PA 126, and by adding section 16350 and part 189.

The Senate has passed the bill.

The bill was read a first time by its title and referred to the Committee on Health Policy.

Senate Bill No. 869, entitled

A bill to amend 1949 PA 300, entitled "Michigan vehicle code," (MCL 257.1 to 257.923) by adding sections 811d and 811e.

The Senate has passed the bill.

The bill was read a first time by its title and referred to the Committee on Transportation.

Senate Bill No. 1049, entitled

A bill to amend 1994 PA 451, entitled "Natural resources and environmental protection act," (MCL 324.101 to 324.90106) by adding subpart VI to part 487.

The Senate has passed the bill.

The bill was read a first time by its title and referred to the Committee on Conservation, Environment and Recreation.

Senate Bill No. 1095, entitled

A bill to amend 1931 PA 328, entitled "The Michigan penal code," (MCL 750.1 to 750.568) by adding section 223a.

The Senate has passed the bill.

The bill was read a first time by its title and referred to the Committee on Judiciary.

Rep. Palamara moved that Rep. Profit be excused from the balance of today's session.
The motion prevailed.

Rep. Palamara asked and obtained an excuse from the balance of today's session.

Notices

I hereby give notice that on the next legislative session day I will move to discharge the Committee on Labor and Occupational Safety from further consideration of **House Bill No. 4801**.

Rep. Anthony

I hereby give notice that on the next legislative session day I will move to discharge the Committee on Tax Policy from further consideration of **Senate Bill No. 1079**.

Rep. Perricone

I hereby give notice that on the next legislative session day I will move to discharge the Committee on Tax Policy from further consideration of **Senate Bill No. 1080**.

Rep. Cassis

I hereby give notice that on the next legislative session day I will move to discharge the Committee on Tax Policy from further consideration of **Senate Bill No. 1081**.

Rep. Goschka

I hereby give notice that on the next legislative session day I will move to discharge the Committee on Tax Policy from further consideration of **Senate Bill No. 1082**.

Rep. Whyman

I hereby give notice that on the next legislative session day I will move to discharge the Committee on Tax Policy from further consideration of **Senate Bill No. 1083**.

Rep. Brackenridge

Rep. Ciaramitaro moved that the House adjourn.
The motion prevailed, the time being 12:20 p.m.

The Speaker declared the House adjourned until Tuesday, September 22, at 2:00 p.m.

MARY KAY SCULLION
Clerk of the House of Representatives.

