HOUSE BILL NO. 5523

February 20, 2020, Introduced by Rep. Reilly and referred to the Committee on Health Policy.

A bill to amend 1978 PA 323, entitled "Michigan health planning and health policy development act," by amending sections 4, 10, and 17 (MCL 325.2004, 325.2010, and 325.2017), sections 10 and 17 as amended by 1988 PA 309.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 4. (1) "Health service area" means an area designated by
- 2 the secretary pursuant to section 1511 of title 15 of the public
- 3 health services act, 42 U.S.C. 3001, section 1511 of former title
- 4 XV of the public health service act, Public Law 93-641, as a health





1 service area.

- 2 (2) "Health systems agency" means a conditionally or fully
 3 designated health systems agency for a health service area within
 4 this state designated pursuant to section 1515 of title 15 of the
 5 public health services act, 42 U.S.C. 3001-4.section 1515 of former
 6 title XV of the public health service act, Public Law 93-641.
 - (3) "Health systems plan" means a plan developed by a health systems agency pursuant to section 1513(b)(2) of title 15 of the public health services act, 42 U.S.C. 3001-2.section 1513(b)(2) of former title XV of the public health service act, Public Law 93-641.
 - (4) "Institutional health services" means the health services provided through health care facilities and health maintenance organizations as defined under section 1122 of the social security act, 42 U.S.C. USC 1320a-1, or under the state certificate of need program under Act No. 256 of the Public Acts of 1972, as amended, being sections 331.451 to 331.462 of the Michigan Compiled Laws, and includes the entities in or through which those services are provided. The term does not include a Christian science—Science sanatorium operated, or listed and certified, by the first church of Christ, scientist, First Church of Christ, Scientist, Boston, Massachusetts.
 - Sec. 10. (1) The council shall carry out the following activities relating to state health planning and health policy development:
- 26 (a) Subject to subsection (2), prepare and approve the state
 27 health plan not less frequently than once every 3 years. The
 28 council may revise individual components of the plan as considered
 29 necessary by the council.



- (b) Submit the proposed state health plan to the governor and 1 the standing committee of each house of the legislature having 2 jurisdiction over public health matters. The governor or 3 legislature may disapprove the plan within 60 legislative session 4 days after submission. If the legislature is not in session at the 5 6 time of submission, when the plan is submitted, the 60 legislative 7 session days shall—commence the first day on which the legislature 8 reconvenes. Legislative disapproval shall must be expressed by a 9 concurrent resolution which shall be that is adopted by a record 10 roll call vote of each house of the legislature. The concurrent 11 resolution shall must state specific objections to the plan. If the proposed state health plan is disapproved by concurrent resolution, 12 the council shall revise the plan based on the stated objections. 13 14 If the plan is not disapproved within the 60 legislative session 15 days, the plan shall be is considered approved. As used in this 16 subdivision, "legislative session day" means each day in which a quorum of either the house of representatives or senate, following 17 18 a call to order, officially convenes in Lansing to conduct 19 legislative business.
 - (c) Annually review program activities and budgets of state departments which that are related to health and medical care to determine consistency of these activities and budgets with the state health plan. The council shall report its conclusions to appropriate legislative committees, to the governor, and to other affected agencies.
 - (d) Actively pursue implementation of the recommendations contained in the state health plan. An annual implementation plan shall must be prepared and submitted to the legislature, the governor, and other interested parties.



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- (e) Provide a public forum for the discussion and
 identification of priority health issues.
- 3 (f) Make recommendations to the governor, the legislature, and
 4 other affected agencies regarding current or proposed changes in
 5 federal and state health statutes, policies, and budgets, taking
 6 into account the state health plan.
 - (g) Cooperate with legislative committees having jurisdiction over health matters and advise in the development of a consistent and coordinated policy for health affairs in this state.
- 10 (h) Assess the policies and rules of state departments and 11 agencies concerning the collection and application of statistics relating to health, health planning, and health policy development, 12 and periodically make recommendations to the governor, the 13 14 legislature, and other affected agencies for improvement and 15 coordination of the statistics. The council shall report its 16 conclusions under this subdivision to appropriate legislative 17 committees, the governor, and other affected agencies. The report shall must recommend, at a minimum, policies concerning 18 19 accessibility of data, uniformity and reliability of data, 20 independent and shared use of data, and coordination of health data 21 systems.
 - (i) Perform other duties as specified in part 222 of the public health code, Act No. 368 of the Public Acts of 1978, being sections 333.22201 to 333.22259 of the Michigan Compiled Laws.
 - (2) The state health plan shall must do all of the following:
 - (a) Address mechanisms to promote adequate access to health care for all segments of the state's population.
- (b) Outline initiatives designed to contain the costs ofhealth care and improve the efficiency with which services are



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- 1 delivered.
- (c) Address the ways in which changes in individual behaviorand responsibility can assist in reducing the costs of health care.
- 4 (d) Promote innovative and cost effective strategies for5 projecting and addressing the future needs of the population.
- 6 (e) Encourage the rational development and distribution of7 health care services.
- 8 (f) Suggest means by which the quality of health care services9 can be improved through changes in the delivery system.
- 10 (g) Promote cooperation between the public and private sectors11 in achieving subdivisions (a) to (f).
- Sec. 17. In addition to the duties prescribed under section 13 15, the office shall do all of the following:
- (a) Collect and publish technical and other information, if the collection and publication of such that information is not duplicative, that would promote informed decision making by individuals and groups related to services, financing and delivery systems, and health benefit design.
 - (b) Identify priority health issues and create strategies to address the priority health issues in a coordinated manner. The office may convene appropriate groups and consult with the council in carrying out the duties of the office under this subdivision.
 - (c) Collect, retrieve, analyze, report, and publish data and information concerning health policy and health planning to the maximum extent possible using existing data and information from extant sources. The office shall utilize the data, statistics, and other information collected or prepared by other state and local agencies concerning the health status and health needs of the people of this state.



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- (d) Perform other duties and responsibilities prescribed by
 the governor or the legislature.
 - (e) Inform the council of the activities of the office.
- 4 (f) Recommend to the governor, legislature, and other state5 departments and agencies ways to implement the state health plan.
- (g) Advise the governor and the legislature as to plans and
 policies of state departments and agencies and other public and
 private entities relating to health activities appropriate to
 assure implementation of the state health plan.
 - (h) Develop recommendations to improve the organization, delivery, and financing of health care.
 - (i) Advise the governor and the legislature on the steps necessary to achieve and facilitate a consistent and coordinated policy for health affairs in this state.
- (j) Perform other duties as specified in part 222 of the
 public health code, Act No. 368 of the Public Acts of 1978, being
 sections 333.22201 to 333.22259 of the Michigan Compiled Laws.
- Enacting section 1. This amendatory act takes effect 90 daysafter the date it is enacted into law.
- 20 Enacting section 2. This amendatory act does not take effect
 21 unless Senate Bill No. ____ or House Bill No. 5510 (request no.
- 22 04667'19) of the 100th Legislature is enacted into law.

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