

**SUBSTITUTE FOR
SENATE BILL NO. 190**

A bill to make appropriations for the department of health and human services for the fiscal year ending September 30, 2024; and to provide for the expenditure of the appropriations.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

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PART 1

LINE-ITEM APPROPRIATIONS

Sec. 101. There is appropriated for the department of health and human services for the fiscal year ending September 30, 2024, from the following funds:

DEPARTMENT OF HEALTH AND HUMAN SERVICES

APPROPRIATION SUMMARY

Full-time equated unclassified positions	6.0
Full-time equated classified positions	15,728.0

1	Average population	798.0	
2	GROSS APPROPRIATION		\$ 35,499,363,300
3	Interdepartmental grant revenues:		
4	Total interdepartmental grants and		
5	intradepartmental transfers		14,676,900
6	ADJUSTED GROSS APPROPRIATION		\$ 35,484,686,400
7	Federal revenues:		
8	Capped federal revenues		505,666,800
9	Social security act, temporary assistance for		
10	needy families		550,622,300
11	Total other federal revenues		24,684,928,200
12	Special revenue funds:		
13	Total local revenues		154,718,100
14	Total private revenues		185,660,700
15	Michigan merit award trust fund		61,268,700
16	Total other state restricted revenues		2,989,057,700
17	State general fund/general purpose		\$ 6,352,763,900
18	Sec. 102. DEPARTMENTAL ADMINISTRATION AND		
19	SUPPORT		
20	Full-time equated unclassified positions	6.0	
21	Full-time equated classified positions	930.4	
22	Unclassified salaries--FTEs	6.0	\$ 1,363,300
23	Administrative hearings officers		9,995,400
24	Child welfare institute--FTEs	55.0	9,313,800
25	Demonstration projects--FTEs	7.0	7,070,800
26	Departmental administration and management--		
27	FTEs	653.4	106,960,800
28	Legal services		12,300,000

1	Office of inspector general--FTEs	197.0	25,869,800
2	Property management		61,762,900
3	Terminal leave payments		7,091,300
4	Training and program support--FTEs	18.0	2,610,500
5	Warehouse operations		1,400,000
6	Worker's compensation		8,515,500
7	GROSS APPROPRIATION		\$ 254,254,100
8	Appropriated from:		
9	Interdepartmental grant revenues:		
10	IDG from department of education		1,939,800
11	IDG from department of technology, management,		
12	and budget - office of retirement services		600
13	Federal revenues:		
14	Social security act, temporary assistance for		
15	needy families		27,448,800
16	Capped federal revenues		19,629,300
17	Total other federal revenues		73,135,400
18	Special revenue funds:		
19	Total local revenues		86,000
20	Total private revenues		3,846,900
21	Total other state restricted revenues		1,337,300
22	State general fund/general purpose		\$ 126,830,000
23	Sec. 103. CHILD SUPPORT ENFORCEMENT		
24	Full-time equated classified positions	193.7	
25	Child support enforcement operations--FTEs	187.7	\$ 25,679,000
26	Child support incentive payments		24,409,600
27	Legal support contracts		113,600,300
28	State disbursement unit--FTEs	6.0	7,362,800

1	GROSS APPROPRIATION		\$	171,051,700
2	Appropriated from:			
3	Federal revenues:			
4	Capped federal revenues			14,839,600
5	Total other federal revenues			130,956,600
6	State general fund/general purpose		\$	25,255,500
7	Sec. 104. COMMUNITY SERVICES AND OUTREACH			
8	Full-time equated classified positions	56.0		
9	Bureau of community services and outreach--FTEs	24.0	\$	4,268,700
10	Community services and outreach administration-			
11	-FTEs	20.0		7,292,300
12	Community services block grant			25,840,000
13	Homeless programs--FTE	1.0		24,082,500
14	Housing and support services			13,031,000
15	Kids' food basket			525,000
16	Runaway and homeless youth grants			17,784,000
17	School success partnership program			525,000
18	Weatherization assistance			15,505,000
19	Weatherization assistance IIJA--FTEs	11.0		40,000,000
20	GROSS APPROPRIATION		\$	148,853,500
21	Appropriated from:			
22	Federal revenues:			
23	Social security act, temporary assistance for			
24	needy families			18,121,500
25	Capped federal revenues			91,690,800
26	Total other federal revenues			14,329,000
27	State general fund/general purpose		\$	24,712,200

1	Sec. 105. CHILDREN'S SERVICES AGENCY - CHILD		
2	WELFARE		
3	Full-time equated classified positions	4,111.2	
4	Adoption subsidies		\$ 222,199,700
5	Adoption support services--FTEs	10.0	41,347,900
6	Attorney general contract		5,191,100
7	Child abuse and neglect - children's justice		
8	act--FTE	1.0	627,000
9	Child care fund		284,951,100
10	Child care fund - indirect cost allotment		3,500,000
11	Child protection		2,050,300
12	Child welfare administration travel		390,000
13	Child welfare field staff - noncaseload		
14	compliance--FTEs	353.0	41,180,100
15	Child welfare licensing--FTEs	59.0	7,352,900
16	Child welfare medical/psychiatric evaluations		10,428,500
17	Children's protective services - caseload		
18	staff--FTEs	1,615.0	170,526,200
19	Children's protective services supervisors--		
20	FTEs	387.0	47,824,000
21	Children's services administration--FTEs	212.2	26,881,900
22	Children's trust fund--FTEs	12.0	4,735,100
23	Contractual services, supplies, and materials		9,567,600
24	Court-appointed special advocates		1,000,000
25	Education planners--FTEs	15.0	1,990,000
26	Family preservation and prevention services		
27	administration--FTEs	9.0	1,405,200
28	Family preservation programs--FTEs	34.0	57,837,700

1	Foster care payments		295,901,300
2	Foster care services - caseload staff--FTEs	966.0	97,749,000
3	Foster care services supervisors--FTEs	227.0	30,931,300
4	Guardianship assistance program		12,739,000
5	Interstate compact		179,600
6	Peer coaches--FTEs	45.5	6,267,000
7	Performance-based funding implementation--FTEs	3.0	1,353,800
8	Permanency resource managers--FTEs	28.0	3,482,400
9	Prosecuting attorney contracts		8,142,800
10	Raise the age fund		13,150,000
11	Second line supervisors and technical staff--		
12	FTEs	126.0	19,799,100
13	Settlement monitor		2,709,800
14	Strong families/safe children		12,600,000
15	Title IV-E compliance and accountability		
16	office--FTEs	4.0	457,000
17	Youth in transition--FTEs	4.5	9,178,500
18	GROSS APPROPRIATION		\$ 1,455,626,900
19	Appropriated from:		
20	Interdepartmental grant revenues:		
21	IDG from department of education		244,400
22	Federal revenues:		
23	Social security act, temporary assistance for		
24	needy families		322,421,600
25	Capped federal revenues		105,283,700
26	Total other federal revenues		270,282,500
27	Special revenue funds:		
28	Local funds - county chargeback		36,896,600

1	Private - collections		1,500,000
2	Children's trust fund		2,895,300
3	Total other state restricted revenues		2,000,000
4	State general fund/general purpose	\$	714,102,800
5	Sec. 106. CHILDREN'S SERVICES AGENCY - JUVENILE		
6	JUSTICE		
7	Full-time equated classified positions	132.5	
8	Bay Pines Center--FTEs	53.0	\$ 6,485,300
9	Committee on juvenile justice administration--		
10	FTEs	2.5	362,600
11	Committee on juvenile justice grants		3,000,000
12	Community support services--FTEs	3.0	1,507,600
13	County juvenile officers		3,977,600
14	Juvenile justice, administration and		
15	maintenance--FTEs	21.0	3,801,200
16	Shawono Center--FTEs	53.0	6,523,700
17	GROSS APPROPRIATION	\$	25,658,000
18	Appropriated from:		
19	Federal revenues:		
20	Capped federal revenues		7,929,400
21	Total other federal revenues		643,600
22	Special revenue funds:		
23	Local funds - state share education funds		1,362,600
24	Local funds - county chargeback		4,515,300
25	State general fund/general purpose	\$	11,207,100
26	Sec. 107. PUBLIC ASSISTANCE		
27	Full-time equated classified positions	1.0	
28	Emergency services local office allocations		\$ 8,813,500

1	Family independence program		61,547,000
2	Family independence program - clothing		
3	allowance		10,000,000
4	Family independence program - small child		
5	supplemental payment		4,154,400
6	Food assistance program benefits		5,273,474,400
7	Food assistance program benefits - state		
8	supplementation		5,000,000
9	Food Bank Council of Michigan		12,045,000
10	Indigent burial		4,369,100
11	Low-income home energy assistance program		174,951,600
12	Michigan energy assistance program--FTE	1.0	50,000,000
13	Refugee assistance program		3,054,200
14	State disability assistance payments		3,960,000
15	State supplementation		61,913,400
16	State supplementation administration		1,806,100
17	GROSS APPROPRIATION		\$ 5,675,088,700
18	Appropriated from:		
19	Federal revenues:		
20	Social security act, temporary assistance for		
21	needy families		65,110,900
22	Capped federal revenues		178,005,800
23	Total other federal revenues		5,268,764,400
24	Special revenue funds:		
25	Child support collections		8,798,900
26	Low-income energy assistance fund		50,000,000
27	Public assistance recoupment revenue		4,741,800
28	Supplemental security income recoveries		992,400

1	State general fund/general purpose		\$ 98,674,500
2	Sec. 108. LOCAL OFFICE OPERATIONS AND SUPPORT		
3	SERVICES		
4	Full-time equated classified positions	5,738.5	
5	Administrative support workers--FTEs	167.0	\$ 14,515,000
6	Adult services local office staff--FTEs	530.0	63,609,600
7	Contractual services, supplies, and materials		25,033,700
8	Critical health and wellness center operations		100
9	Donated funds positions--FTEs	237.0	28,462,200
10	Elder Law of Michigan MiCAFE contract		350,000
11	Electronic benefit transfer (EBT)		8,499,000
12	Employment and training support services		4,219,100
13	Equity and minority health		1,000,200
14	Food assistance reinvestment--FTEs	16.0	7,438,300
15	Local office policy and administration--FTEs	125.0	20,409,300
16	Local office staff travel		8,252,400
17	Medical/psychiatric evaluations		1,120,100
18	Nutrition education--FTEs	2.0	33,037,700
19	Pathways to potential--FTEs	231.0	25,390,700
20	Public assistance local office staff--FTEs	4,430.5	485,454,100
21	Social determinants of health hub		500,000
22	SSI advocacy legal services grant		375,000
23	GROSS APPROPRIATION		\$ 727,666,500
24	Appropriated from:		
25	Interdepartmental grant revenues:		
26	IDG from department of corrections		120,200
27	IDG from department of education		7,766,600
28	Federal revenues:		

1	Social security act, temporary assistance for		
2	needy families		73,233,900
3	Capped federal revenues		55,328,300
4	Total other federal revenues		274,623,200
5	Special revenue funds:		
6	Local funds - donated funds		4,253,600
7	Private funds - donated funds		9,759,300
8	Private revenues		250,000
9	State general fund/general purpose	\$	302,331,400
10	Sec. 109. DISABILITY DETERMINATION SERVICES		
11	Full-time equated classified positions	585.4	
12	Disability determination operations--FTEs	581.3	\$ 115,537,200
13	Retirement disability determination--FTEs	4.1	636,200
14	GROSS APPROPRIATION		\$ 116,173,400
15	Appropriated from:		
16	Interdepartmental grant revenues:		
17	IDG from department of technology, management,		
18	and budget - office of retirement services		812,800
19	Federal revenues:		
20	Total other federal revenues		111,563,800
21	State general fund/general purpose	\$	3,796,800
22	Sec. 110. BEHAVIORAL HEALTH PROGRAM		
23	ADMINISTRATION AND SPECIAL PROJECTS		
24	Full-time equated classified positions	83.0	
25	Behavioral health program administration--FTEs	45.0	\$ 53,959,900
26	Community substance use disorder prevention,		
27	education, and treatment--FTEs	9.0	80,199,700
28	Family support subsidy		12,654,900

1	Federal and other special projects		2,535,600
2	Gambling addiction--FTE	1.0	5,517,400
3	Mental health diversion council		3,850,000
4	Office of recipient rights--FTEs	26.0	3,563,800
5	Opioid response activities--FTEs	2.0	90,354,600
6	Protection and advocacy services support		194,400
7	GROSS APPROPRIATION		\$ 252,830,300
8	Appropriated from:		
9	Federal revenues:		
10	Social security act, temporary assistance for		
11	needy families		12,654,900
12	Total other federal revenues		170,105,100
13	Special revenue funds:		
14	Total private revenues		2,904,700
15	Total other state restricted revenues		31,000,600
16	State general fund/general purpose		\$ 36,165,000
17	Sec. 111. BEHAVIORAL HEALTH SERVICES		
18	Full-time equated classified positions	18.0	
19	Autism services		\$ 283,133,200
20	Behavioral health community supports and		
21	services--FTEs	7.0	43,945,200
22	Certified community behavioral health clinic		
23	demonstration		106,654,900
24	Civil service charges		297,500
25	Community mental health non-Medicaid services		125,578,200
26	Court-appointed guardian reimbursements		5,000,000
27	Federal mental health block grant--FTEs	4.0	24,461,100
28	Health homes		53,400,100

1	Healthy Michigan plan - behavioral health		590,959,600
2	Medicaid mental health services		3,088,701,000
3	Medicaid substance use disorder services		93,445,100
4	Multicultural integration funding		17,284,900
5	Nursing home PAS/ARR-OBRA--FTEs	7.0	13,959,300
6	State disability assistance program substance		
7	use disorder services		2,018,800
8	GROSS APPROPRIATION		\$ 4,448,838,900
9	Appropriated from:		
10	Federal revenues:		
11	Social security act, temporary assistance for		
12	needy families		421,000
13	Capped federal revenues		184,500
14	Total other federal revenues		2,971,387,600
15	Special revenue funds:		
16	Total local revenues		10,190,500
17	Total other state restricted revenues		46,666,700
18	State general fund/general purpose		\$ 1,419,988,600
19	Sec. 112. STATE PSYCHIATRIC HOSPITALS AND		
20	FORENSIC MENTAL HEALTH SERVICES		
21	Full-time equated classified positions	2,536.6	
22	Average population	798.0	
23	Caro Regional Mental Health Center -		
24	psychiatric hospital - adult--FTEs	528.7	\$ 59,040,300
25	Average population	145.0	
26	Center for forensic psychiatry--FTEs	622.5	98,168,600
27	Average population	240.0	

1	Developmental disabilities council and		
2	projects--FTEs	10.0	3,165,200
3	Gifts and bequests for patient living and		
4	treatment environment		1,000,000
5	Hawthorn Center - psychiatric hospital -		
6	children and adolescents--FTEs	369.4	51,363,600
7	Average population	83.0	
8	IDEA, federal special education		120,000
9	Kalamazoo Psychiatric Hospital - adult--FTEs	559.2	70,143,200
10	Average population	170.0	
11	Purchase of medical services for residents of		
12	hospitals and centers		445,600
13	Revenue recapture		750,100
14	Special maintenance		924,600
15	State hospital administration--FTEs	34.0	5,576,300
16	Walter P. Reuther Psychiatric Hospital - adult-		
17	-FTEs	412.8	67,577,800
18	Average population	160.0	
19	GROSS APPROPRIATION		\$ 358,275,300
20	Appropriated from:		
21	Federal revenues:		
22	Total other federal revenues		45,756,100
23	Special revenue funds:		
24	Total local revenues		23,283,200
25	Total private revenues		1,000,000
26	Total other state restricted revenues		15,189,200
27	State general fund/general purpose		\$ 273,046,800

1	Sec. 113. HEALTH AND HUMAN SERVICES POLICY AND		
2	INITIATIVES		
3	Full-time equated classified positions	74.3	
4	Cellular therapy program		\$ 750,000
5	Certificate of need program administration--		
6	FTEs	11.3	2,713,000
7	Child advocacy centers		1,407,000
8	Child advocacy centers - supplemental grants		2,000,000
9	Community health programs		5,000,000
10	Crime victim grants administration services--		
11	FTEs	17.0	3,038,200
12	Crime victim justice assistance grants		98,579,300
13	Crime victim rights services grants		24,269,900
14	Domestic violence prevention and treatment--		
15	FTEs	15.6	18,340,200
16	Healthy and resilient communities		5,000,000
17	High social vulnerability index community		4,000,000
18	Human trafficking intervention services--FTE	1.0	200,000
19	Michigan essential health provider		3,519,600
20	Minority health grants and contracts--FTEs	3.0	1,145,200
21	Nurse education and research program--FTEs	3.0	814,900
22	Policy and planning administration--FTEs	19.9	2,662,300
23	Primary care services--FTEs	3.0	3,803,900
24	Rape prevention and services--FTEs	0.5	5,097,300
25	Rural health services		175,000
26	Uniform statewide sexual assault evidence kit		
27	tracking system		369,500
28	GROSS APPROPRIATION		\$ 182,885,300

1	Appropriated from:		
2	Interdepartmental grant revenues:		
3	IDG from department of education		2,400
4	IDG from department of licensing and regulatory		
5	affairs		814,900
6	IDG from department of treasury, Michigan		
7	finance authority		117,700
8	Federal revenues:		
9	Social security act, temporary assistance for		
10	needy families		6,736,000
11	Capped federal revenues		10,704,100
12	Total other federal revenues		99,704,200
13	Special revenue funds:		
14	Total private revenues		865,000
15	Total other state restricted revenues		27,473,000
16	State general fund/general purpose	\$	36,468,000
17	Sec. 114. EPIDEMIOLOGY, EMERGENCY MEDICAL		
18	SERVICES, AND LABORATORY		
19	Full-time equated classified positions	409.4	
20	Bioterrorism preparedness--FTEs	53.0	\$ 30,807,300
21	Childhood lead program--FTEs	4.5	2,330,900
22	Emergency medical services program--FTEs	27.0	8,974,200
23	Epidemiology administration--FTEs	73.5	26,094,400
24	Healthy homes program--FTEs	25.5	56,287,900
25	Laboratory services--FTEs	102.0	30,243,600
26	Newborn screening follow-up and treatment		
27	services--FTEs	10.5	9,237,300

1	PFAS and environmental contamination response--		
2	FTEs	43.0	20,346,400
3	Vital records and health statistics--FTEs	70.4	11,393,500
4	GROSS APPROPRIATION		\$ 195,715,500
5	Appropriated from:		
6	Interdepartmental grant revenues:		
7	IDG from department of environment, Great		
8	Lakes, and energy		1,797,800
9	Federal revenues:		
10	Capped federal revenues		81,100
11	Total other federal revenues		77,138,300
12	Special revenue funds:		
13	Total private revenues		1,342,600
14	Total other state restricted revenues		31,345,600
15	State general fund/general purpose		\$ 84,010,100
16	Sec. 115. LOCAL HEALTH AND ADMINISTRATIVE		
17	SERVICES		
18	Full-time equated classified positions	189.1	
19	AIDS prevention, testing, and care programs--		
20	FTEs	79.5	\$ 110,575,400
21	Cancer prevention and control program--FTEs	18.0	15,858,500
22	Chronic disease control and health promotion		
23	administration--FTEs	28.4	10,247,400
24	Diabetes and kidney program--FTEs	8.0	4,172,000
25	Essential local public health services		81,419,300
26	Implementation of 1993 PA 133, MCL 333.17015		20,000
27	Local health services--FTEs	3.3	8,704,800

1	Medicaid outreach cost reimbursement to local		
2	health departments		12,500,000
3	Public health administration--FTEs	8.0	2,104,200
4	Sexually transmitted disease control program--		
5	FTEs	20.0	8,483,300
6	Smoking prevention program--FTEs	15.0	4,621,900
7	Violence prevention--FTEs	8.9	13,518,800
8	GROSS APPROPRIATION		\$ 272,225,600
9	Appropriated from:		
10	Federal revenues:		
11	Social security act, temporary assistance for		
12	needy families		2,300
13	Total other federal revenues		90,246,900
14	Special revenue funds:		
15	Total local revenues		5,150,000
16	Total private revenues		74,437,700
17	Total other state restricted revenues		11,790,800
18	State general fund/general purpose		\$ 90,597,900
19	Sec. 116. HEALTHY MOMS, HEALTHY BABIES		
20	Full-time equated classified positions	2.0	
21	Healthy moms, healthy babies -		
22	CenteringPregnancy		5,000,000
23	Healthy moms, healthy babies - child welfare		
24	home visiting programs		1,700,000
25	Healthy moms, healthy babies - diaper		
26	assistance program		4,404,400
27	Healthy moms, healthy babies - enhance family		
28	health		125,000

1	Healthy moms, healthy babies - evidence-based		
2	home visiting services		1,431,000
3	Healthy moms, healthy babies - maternal infant		
4	health program		1,400,000
5	Healthy moms, healthy babies - Medicaid		
6	postpartum coverage		20,680,100
7	Healthy moms, healthy babies - MI-AIM bundles		10,000,000
8	Healthy moms, healthy babies - Michigan		
9	childhood collaborative care program		4,609,100
10	Healthy moms, healthy babies - perinatal		
11	quality initiatives--FTEs	2.0	5,000,000
12	Healthy moms, healthy babies - plan first		6,200,000
13	Healthy moms, healthy babies - strong		
14	beginnings		1,000,000
15	Healthy moms, healthy babies - substance use		
16	disorder services		530,000
17	Healthy moms, healthy babies - waiting period		
18	elimination		26,359,200
19	GROSS APPROPRIATION		\$ 88,438,800
20	Appropriated from:		
21	Federal revenues:		
22	Total other federal revenues		43,896,000
23	State general fund/general purpose		\$ 44,542,800
24	Sec. 117. FAMILY HEALTH SERVICES		
25	Full-time equated classified positions	137.1	
26	Child and adolescent health care and centers		\$ 41,242,700
27	Dental programs--FTEs	5.3	7,734,200
28	Drinking water declaration of emergency		4,271,000

1	Family, maternal, and child health		
2	administration--FTEs	49.0	10,660,300
3	Family planning local agreements		8,810,700
4	Immunization program--FTEs	20.8	20,652,900
5	Local MCH services		7,018,100
6	Pregnancy prevention program		1,297,900
7	Prenatal care outreach and service delivery		
8	support--FTEs	17.0	33,424,800
9	Special projects		6,289,100
10	Sudden and unexpected infant death and		
11	suffocation prevention program		321,300
12	Women, infants, and children program		
13	administration and special projects--FTEs	45.0	19,520,800
14	Women, infants, and children program local		
15	agreements and food costs		231,285,000
16	GROSS APPROPRIATION		\$ 392,528,800
17	Appropriated from:		
18	Federal revenues:		
19	Total other federal revenues		248,524,400
20	Special revenue funds:		
21	Total local revenues		42,817,700
22	Total private revenues		64,785,700
23	Total other state restricted revenues		4,049,500
24	State general fund/general purpose		\$ 32,351,500
25	Sec. 118. CHILDREN'S SPECIAL HEALTH CARE		
26	SERVICES		
27	Full-time equated classified positions	48.8	
28	Bequests for care and services--FTEs	2.8	\$ 2,087,100

1	Children's special health care services		
2	administration--FTEs	46.0	8,117,200
3	Medical care and treatment		288,637,600
4	Outreach and advocacy		6,722,200
5	GROSS APPROPRIATION		\$ 305,564,100
6	Appropriated from:		
7	Federal revenues:		
8	Total other federal revenues		173,802,000
9	Special revenue funds:		
10	Total private revenues		1,115,500
11	Total other state restricted revenues		4,933,300
12	State general fund/general purpose		\$ 125,713,300
13	Sec. 119. AGING SERVICES		
14	Community services	\$	56,474,400
15	Employment assistance		3,500,000
16	Nutrition services		48,054,200
17	Respite care program		6,468,700
18	Senior volunteer service programs		4,765,300
19	GROSS APPROPRIATION		\$ 119,262,600
20	Appropriated from:		
21	Federal revenues:		
22	Total other federal revenues		63,637,400
23	Special revenue funds:		
24	Total private revenues		300,000
25	Michigan merit award trust fund		4,068,700
26	Total other state restricted revenues		2,000,000
27	State general fund/general purpose		\$ 49,256,500

1	Sec. 120. HEALTH AND AGING SERVICES		
2	ADMINISTRATION		
3	Full-time equated classified positions	464.0	
4	Aging services administration--FTEs	43.0	\$ 9,515,300
5	Health services administration--FTEs	421.0	118,254,100
6	GROSS APPROPRIATION		\$ 127,769,400
7	Appropriated from:		
8	Federal revenues:		
9	Total other federal revenues		84,077,100
10	Special revenue funds:		
11	Total local revenues		37,700
12	Total private revenues		1,721,300
13	Total other state restricted revenues		336,300
14	State general fund/general purpose		\$ 41,597,000
15	Sec. 121. HEALTH SERVICES		
16	Adult home help services		\$ 515,269,000
17	Ambulance services		21,317,200
18	Auxiliary medical services		6,982,100
19	Dental clinic program		1,000,000
20	Dental redesign		110,000,000
21	Dental services		319,588,900
22	Federal Medicare pharmaceutical program		331,617,600
23	Health plan services		6,065,327,300
24	Healthy Michigan plan		5,784,701,500
25	Home health services		4,880,300
26	Hospice services		141,959,400
27	Hospital disproportionate share payments		45,000,000
28	Hospital services and therapy		803,147,200

1	Integrated care organizations		409,635,100
2	Long-term care services		2,188,866,200
3	Maternal and child health		18,671,500
4	Medicaid home- and community-based services		
5	waiver		467,331,700
6	Medicare premium payments		863,889,500
7	Personal care services		6,397,200
8	Pharmaceutical services		372,138,300
9	Physician services		258,125,300
10	Program of all-inclusive care for the elderly		259,018,100
11	Recuperative care		297,600
12	School-based services		171,401,200
13	Special Medicaid reimbursement		297,652,600
14	Transportation		18,764,900
15	GROSS APPROPRIATION		\$ 19,482,979,700
16	Appropriated from:		
17	Federal revenues:		
18	Total other federal revenues		14,135,119,000
19	Special revenue funds:		
20	Total local revenues		26,124,900
21	Total private revenues		16,582,000
22	Michigan merit award trust fund		57,200,000
23	Total other state restricted revenues		2,741,496,600
24	State general fund/general purpose		\$ 2,506,457,200
25	Sec. 122. INFORMATION TECHNOLOGY		
26	Full-time equated classified positions	11.0	
27	Bridges information system--FTE	10.0	\$ 114,571,700
28	Child support automation		45,567,200

1	Comprehensive child welfare information system		8,259,800
2	Information technology services and projects		240,591,300
3	Michigan Medicaid information system--FTE	1.0	105,285,100
4	Michigan statewide automated child welfare		
5	information system		21,539,800
6	GROSS APPROPRIATION		\$ 535,814,900
7	Appropriated from:		
8	Interdepartmental grant revenues:		
9	IDG from department of education		1,059,700
10	Federal revenues:		
11	Social security act, temporary assistance for		
12	needy families		24,471,400
13	Capped federal revenues		21,990,200
14	Total other federal revenues		337,235,600
15	Special revenue funds:		
16	Total private revenues		5,250,000
17	Total other state restricted revenues		2,010,400
18	State general fund/general purpose		\$ 143,797,600
19	Sec. 123. ONE-TIME APPROPRIATIONS		
20	Full-time equated classified positions	6.0	
21	Adult day center		\$ 1,000,000
22	Affordable housing project		2,000,000
23	Alternative payment model transition		15,000,000
24	Behavioral health care services and facilities		3,000,000
25	Biomarker testing		7,000,000
26	Caregiver resource center		9,400,000
27	Child and family campus project		6,000,000
28	Children's health care		5,000,000

1	Children's health care access program		500,000
2	Community health programs		10,000,000
3	Community health residency program		100
4	Community house capital grant		1,000,000
5	Community opportunity hub		1,000,000
6	Comprehensive child welfare information system-		
7	-FTEs	6.0	100
8	Critical access hospital renovation		100
9	Developmental milestones toolkit		1,000,000
10	Disability and independent living program		150,000
11	Domestic and sexual violence prevention and		
12	treatment		3,610,300
13	Emergency homeless shelter repair and services		
14	grant		1,000,000
15	Environmental public health program		1,000,000
16	Farm day program		150,000
17	Federally qualified health center		1,500,000
18	First responder and public safety staff mental		
19	health		5,000,000
20	Food market expansion		1,400,000
21	Genemarkers		100
22	Health care facility expansion		1,500,000
23	Health care worker housing initiative		100
24	Healthy communities grant		1,500,000
25	Homeless shelter operations		1,000,000
26	Homelessness prevention pilot program		2,000,000
27	Hospital equipment modernization		2,000,000
28	Jail diversion fund		5,000,000

1	Lifesharing community center	2,000,000
2	Medical debt relief pilot program	10,000,000
3	Michigan medicine survival flight program	100
4	Mobile health units	3,500,000
5	Multicultural integration funding	8,600,000
6	Nursing facility rate transition support	100
7	Nursing staff supports	100
8	Permanent supportive housing	13,000,000
9	Prenatal and infant cash allowance pilot	
10	program	100
11	Psychiatric outpatient clinic	8,000,000
12	Public health authority operations	5,000,000
13	Rides to wellness	250,000
14	Senior center administration	1,000,000
15	Senior citizen home renovation	3,000,000
16	Sexual assault nurse examiner program	100
17	Sickle cell center	2,500,000
18	Social determinants of health hub - one-time	1,000,000
19	Substance use disorder center capital costs	1,500,000
20	Substance use treatment center	10,000,000
21	Warming center services	800,000
22	Water quality projects	1,000,000
23	Women's health grant backfill	2,000,000
24	GROSS APPROPRIATION	\$ 161,861,300
25	Appropriated from:	
26	State general fund/general purpose	\$ 161,861,300

PART 2

PROVISIONS CONCERNING APPROPRIATIONS

FOR FISCAL YEAR 2023-2024

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GENERAL SECTIONS

Sec. 201. Pursuant to section 30 of article IX of the state constitution of 1963, total state spending from state sources under part 1 for fiscal year 2023-2024 is \$9,403,090,300.00 and state spending from state sources to be paid to local units of government for fiscal year 2023-2024 is \$1,824,131,800. The itemized statement below identifies appropriations from which spending to local units of government will occur:

DEPARTMENT OF HEALTH AND HUMAN SERVICES	
CHILD SUPPORT ENFORCEMENT	
Child support incentive payments	\$ 10,000,000
Legal support contracts	3,000
COMMUNITY SERVICES AND OUTREACH	
Crime victim rights services grants	11,000,000
Domestic violence prevention and treatment	100,000
Homeless programs	20,000
Housing and support services	117,000
CHILDREN'S SERVICES AGENCY - CHILD WELFARE	
Child care fund	160,000,000
Child care fund - indirect cost allotment	3,500,000
Child welfare licensing	110,000
Child welfare medical/psychiatric evaluations	20,000
Children's trust fund	65,000
Contractual services, supplies, and materials	120,000
Family preservation programs	10,000
Foster care payments	3,000,000
Prosecuting attorney contracts	1,400,000

1	Raise the age fund	3,000,000
2	Strong families/safe children	73,000
3	Youth in transition	200
4	CHILDREN'S SERVICES AGENCY - JUVENILE JUSTICE	
5	Bay Pines Center	42,000
6	Community support services	700,000
7	Shawono Center	5,000
8	PUBLIC ASSISTANCE	
9	Emergency services local office allocations	2,200,000
10	Family independence program	1,000
11	Indigent burial	6,000
12	Michigan energy assistance program	200,000
13	State disability assistance payments	150,000
14	FIELD OPERATIONS AND SUPPORT SERVICES	
15	Contractual services, supplies, and materials	5,000
16	Employment and training support services	5,000
17	DISABILITY DETERMINATION SERVICES	
18	Disability determination operations	2,000
19	Retirement disability determination	100
20	BEHAVIORAL HEALTH PROGRAM ADMINISTRATION AND	
21	SPECIAL PROJECTS	
22	Behavioral health program administration	400,000
23	Community substance use disorder prevention,	
24	education, and treatment	10,000,000
25	Gambling addiction	1,500,000
26	Mental health diversion council	400,000
27	BEHAVIORAL HEALTH SERVICES	
28	Autism services	80,000,000

1	Behavioral health community supports and	
2	services	6,000
3	Certified community behavioral health clinic	
4	demonstration	23,200,000
5	Community mental health non-Medicaid services	125,000,000
6	Health homes	2,000,000
7	Healthy Michigan plan - behavioral health	63,000,000
8	Medicaid mental health services	1,000,000,000
9	Medicaid substance use disorder services	29,000,000
10	Multicultural integration funding	1,400,000
11	Nursing home PAS/ARR-OBRA	3,000,000
12	State disability assistance program substance	
13	use disorder services	2,018,800
14	STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL	
15	HEALTH SERVICES	
16	Caro Regional Mental Health Center -	
17	psychiatric hospital - adult	215,000
18	Center for forensic psychiatry	600,000
19	Hawthorn Center - psychiatric hospital -	
20	children and adolescents	68,000
21	Kalamazoo Psychiatric Hospital - adult	85,000
22	Walter P. Reuther Psychiatric Hospital - adult	55,000
23	HEALTH AND HUMAN SERVICES POLICY AND	
24	INITIATIVES	
25	Primary care services	100,000
26	EPIDEMIOLOGY, EMERGENCY MEDICAL SERVICES, AND	
27	LABORATORY	
28	Childhood lead program	30,000

1	Epidemiology administration	315,000
2	Healthy homes program	21,325,000
3	LOCAL HEALTH AND ADMINISTRATIVE SERVICES	
4	AIDS prevention, testing, and care programs	2,900,000
5	Cancer prevention and control program	50,000
6	Essential local public health services	75,000,000
7	Implementation of 1993 PA 133, MCL 333.17015	400
8	Local health services	1,140,000
9	Public health administration	200
10	Sexually transmitted disease control program	650,000
11	Smoking prevention program	750,000
12	FAMILY HEALTH SERVICES	
13	Drinking water declaration of emergency	221,000
14	Family planning local agreements	207,000
15	Immunization program	2,330,000
16	Pregnancy prevention program	100,000
17	Prenatal care outreach and service delivery	
18	support	8,800,000
19	CHILDREN'S SPECIAL HEALTH CARE SERVICES	
20	Medical care and treatment	700,000
21	Outreach and advocacy	2,700,000
22	HEALTH AND AGING SERVICES ADMINISTRATION	
23	Aging services administration	400,000
24	Community services	29,958,000
25	Nutrition services	12,597,200
26	Respite care program	5,700,000
27	Senior volunteer service programs	900,000
28	HEALTH SERVICES	

1	Adult home help services	130,000
2	Ambulance services	755,000
3	Dental services	1,700,000
4	Healthy Michigan plan	1,000,000
5	Home health services	1,800
6	Hospital services and therapy	3,300,000
7	Long-term care services	85,000,000
8	Medicaid home- and community-based services	
9	waiver	15,200,000
10	Personal care services	23,000
11	Pharmaceutical services	1,000
12	Physician services	2,800,000
13	Special Medicaid reimbursement	20,000
14	Transportation	225,000
15	ONE-TIME APPROPRIATIONS	
16	Prenatal and infant cash allowance pilot	
17	program	100
18	Public health authority operations	5,000,000
19	Senior center administration	500,000
20	Senior citizen renovation	3,000,000
21	Warming center services	800,000
22	TOTAL OF PAYMENTS TO LOCAL UNITS OF GOVERNMENT	\$ 1,824,131,800

23

24 Sec. 202. The appropriations authorized under this part and
25 part 1 are subject to the management and budget act, 1984 PA 431,
26 MCL 18.1101 to 18.1594.

27 Sec. 203. As used in this part and part 1:

28 (a) "AIDS" means acquired immunodeficiency syndrome.

29 (b) "CMHSP" means a community mental health services program

1 as that term is defined in section 100a of the mental health code,
2 1974 PA 258, MCL 330.1100a.

3 (c) "CMS" means the Centers for Medicare and Medicaid
4 Services.

5 (d) "Current fiscal year" means the fiscal year ending
6 September 30, 2024.

7 (e) "Department" means the department of health and human
8 services.

9 (f) "Director" means the director of the department.

10 (g) "DSH" means disproportionate share hospital.

11 (h) "EPSDT" means early and periodic screening, diagnosis, and
12 treatment.

13 (i) "Federal poverty level" means the poverty guidelines
14 published annually in the Federal Register by the United States
15 Department of Health and Human Services under its authority to
16 revise the poverty line under 42 USC 9902.

17 (j) "FQHC" means federally qualified health center.

18 (k) "FTE" means full-time equated.

19 (l) "GME" means graduate medical education.

20 (m) "Health plan" means, at a minimum, an organization that
21 meets the criteria for delivering the comprehensive package of
22 services under the department's comprehensive health plan.

23 (n) "HEDIS" means healthcare effectiveness data and
24 information set.

25 (o) "HMO" means health maintenance organization.

26 (p) "IDEA" means the individuals with disabilities education
27 act, 20 USC 1400 to 1482.

28 (q) "IDG" means interdepartmental grant.

29 (r) "MCH" means maternal and child health.

1 (s) "Medicaid" means subchapter XIX of the social security
2 act, 42 USC 1396 to 1396w-6.

3 (t) "Medicare" means subchapter XVIII of the social security
4 act, 42 USC 1395 to 1395III.

5 (u) "MiCAFE" means Michigan's coordinated access to food for
6 the elderly.

7 (v) "MiChild" means the program described in section 1670 of
8 this part.

9 (w) "MiSACWIS" means Michigan statewide automated child
10 welfare information system.

11 (x) "PAS/ARR-OBRA" means the preadmission screening and annual
12 resident review required under the omnibus budget reconciliation
13 act of 1987, section 1919(e)(7) of the social security act, 42 USC
14 1396r.

15 (y) "PFAS" means perfluoroalkyl and polyfluoroalkyl
16 substances.

17 (z) "PIHP" means an entity designated by the department as a
18 regional entity or a specialty prepaid inpatient health plan for
19 Medicaid mental health services, services to individuals with
20 developmental disabilities, and substance use disorder services.
21 Regional entities are described in section 204b of the mental
22 health code, 1974 PA 258, MCL 330.1204b. Specialty prepaid
23 inpatient health plans are described in section 232b of the mental
24 health code, 1974 PA 258, MCL 330.1232b.

25 (aa) "Previous fiscal year" means the fiscal year ending
26 September 30, 2023.

27 (bb) "Quarterly reports" means 4 reports shall be submitted to
28 the required recipients by the following dates: February 1, April
29 1, July 1, and September 30 of the current fiscal year.

1 (cc) "Semiannual basis" means March 1 and September 30 of the
2 current fiscal year.

3 (dd) "Settlement" means the settlement agreement entered in
4 the case of *Dwayne B. v Snyder*, docket no. 2:06-cv-13548 in the
5 United States District Court for the Eastern District of Michigan.

6 (ee) "SSI" means supplemental security income.

7 (ff) "Temporary assistance for needy families" or "TANF" or
8 "title IV-A" means part A of subchapter IV of the social security
9 act, 42 USC 601 to 619.

10 (gg) "Title IV-B" means part B of title IV of the social
11 security act, 42 USC 621 to 629m.

12 (hh) "Title IV-D" means part D of title IV of the social
13 security act, 42 USC 651 to 669b.

14 (ii) "Title IV-E" means part E of title IV of the social
15 security act, 42 USC 670 to 679c.

16 (jj) "Title X" means subchapter VIII of the public health
17 service act, 42 USC 300 to 300a-8, which establishes grants to
18 states for family planning services.

19 Sec. 204. The departments and agencies receiving
20 appropriations in part 1 shall use the internet to fulfill the
21 reporting requirements of this part. This requirement shall include
22 transmission of reports via email to the recipients identified for
23 each reporting requirement and it shall include placement of
24 reports on an internet site.

25 Sec. 205. To the extent permissible under section 261 of the
26 management and budget act, 1984 PA 431, MCL 18.1261, all of the
27 following apply:

28 (a) Funds appropriated in part 1 must not be used for the
29 purchase of foreign goods or services, or both, if competitively

1 priced and of comparable quality American goods or services, or
2 both, are available.

3 (b) Preference must be given to goods or services, or both,
4 manufactured or provided by Michigan businesses, if they are
5 competitively priced and of comparable quality.

6 (c) Preference must be given to goods or services, or both,
7 that are manufactured or provided by Michigan businesses owned and
8 operated by veterans, if they are competitively priced and of
9 comparable quality.

10 Sec. 206. To the extent permissible under the management and
11 budget act, 1984 PA 431, MCL 18.1101 to 18.1594, the director shall
12 take all reasonable steps to ensure geographically disadvantaged
13 business enterprises compete for and perform contracts to provide
14 services or supplies, or both. The director shall strongly
15 encourage firms with which the department contracts to subcontract
16 with certified businesses in depressed and deprived communities for
17 services, supplies, or both.

18 Sec. 207. Consistent with section 217 of the management and
19 budget act, 1984 PA 431, MCL. 18.1217, the departments and agencies
20 receiving appropriations in part 1 shall prepare a report on out-
21 of-state travel expenses not later than January 1 of each year. The
22 travel report shall be a listing of all travel by classified and
23 unclassified employees outside this state in the previous fiscal
24 year that was funded in whole or in part with funds appropriated in
25 the department's budget. The report must be submitted to the report
26 recipients required in section 246 of this part. The report must
27 include the following information:

28 (a) The dates of each travel occurrence.

29 (b) The total transportation and related costs of each travel

1 occurrence, including the proportion funded with state general
2 fund/general purpose revenues, the proportion funded with state
3 restricted revenues, the proportion funded with federal revenues,
4 and the proportion funded with other revenues.

5 Sec. 208. Funds appropriated in part 1 shall not be used by
6 the department to hire a person to provide legal services that are
7 the responsibility of the attorney general. This prohibition does
8 not apply to legal services for bonding activities and for those
9 outside services that the attorney general authorizes.

10 Sec. 209. Not later than November 30, the state budget office
11 shall prepare and transmit a report that provides for estimates of
12 the total general fund/general purpose appropriation lapses at the
13 close of the previous fiscal year. This report shall summarize the
14 projected year-end general fund/general purpose appropriation
15 lapses by major departmental program or program areas. The report
16 shall be transmitted to the chairpersons of the senate and house
17 appropriations committees, and the senate and house fiscal
18 agencies.

19 Sec. 210. (1) In addition to the funds appropriated in part 1,
20 there is appropriated an amount not to exceed \$20,000,000.00 for
21 federal contingency authorization. These funds are not available
22 for expenditure until they have been transferred to another line
23 item in part 1 under section 393(2) of the management and budget
24 act, 1984 PA 431, MCL 18.1393. These funds shall not be made
25 available to increase TANF authorization.

26 (2) In addition to the funds appropriated in part 1, there is
27 appropriated an amount not to exceed \$20,000,000.00 for state
28 restricted contingency authorization. These funds are not available
29 for expenditure until they have been transferred to another line

1 item in part 1 under section 393(2) of the management and budget
2 act, 1984 PA 431, MCL 18.1393.

3 (3) In addition to the funds appropriated in part 1, there is
4 appropriated an amount not to exceed \$5,000,000.00 for local
5 contingency authorization. These funds are not available for
6 expenditure until they have been transferred to another line item
7 in part 1 under section 393(2) of the management and budget act,
8 1984 PA 431, MCL 18.1393.

9 (4) In addition to the funds appropriated in part 1, there is
10 appropriated an amount not to exceed \$2,000,000.00 for private
11 contingency authorization. These funds are not available for
12 expenditure until they have been transferred to another line item
13 in part 1 under section 393(2) of the management and budget act,
14 1984 PA 431, MCL 18.1393.

15 Sec. 211. The department shall cooperate with the department
16 of technology, management, and budget to maintain a searchable
17 website accessible by the public at no cost that includes, but is
18 not limited to, all of the following for the department:

19 (a) Fiscal year-to-date expenditures by category.

20 (b) Fiscal year-to-date expenditures by appropriation unit.

21 (c) Fiscal year-to-date payments to a selected vendor,
22 including the vendor name, payment date, payment amount, and
23 payment description.

24 (d) The number of active department employees by job
25 classification.

26 (e) Job specifications and wage rates.

27 Sec. 212. Within 14 days after the release of the executive
28 budget recommendation, the department shall cooperate with the
29 state budget office to provide the chairpersons of the senate and

1 house appropriations committees, the chairpersons of the senate and
2 house appropriations subcommittees on the department budget, and
3 the senate and house fiscal agencies with an annual report on
4 estimated state restricted fund balances, state restricted fund
5 projected revenues, and state restricted fund expenditures for the
6 previous fiscal year and the current fiscal year.

7 Sec. 213. The department shall maintain, on a publicly
8 accessible website, a department scorecard that identifies, tracks,
9 and regularly updates key metrics that are used to monitor and
10 improve the department's performance.

11 Sec. 214. By October 1 of the current fiscal year, the
12 department shall submit a report to the report recipients required
13 in section 246 of this part that must include the estimated total
14 authorized appropriations from all sources under part 1 for legacy
15 costs for the current fiscal year, the estimated total department
16 appropriations for pension-related legacy costs, and the estimated
17 total department appropriations for retiree health care legacy
18 costs.

19 Sec. 215. If either of the following events occurs, within 30
20 days after that event the department shall notify the state budget
21 director, the chairs of the house and senate appropriations
22 subcommittees on the department budget, and the house and senate
23 fiscal agencies and policy offices of that fact:

24 (a) A legislative objective of this part or of a bill or
25 amendment to a bill to amend the social welfare act, 1939 PA 280,
26 MCL 400.1 to 400.119b, cannot be implemented because implementation
27 would conflict with or violate federal regulations.

28 (b) A federal grant, for which a notice of an award has been
29 received, cannot be used, or will not be used.

1 Sec. 216. (1) In addition to funds appropriated in part 1 for
2 all programs and services, there is appropriated for write-offs of
3 accounts receivable, deferrals, and for prior year obligations in
4 excess of applicable prior year appropriations, an amount equal to
5 total write-offs and prior year obligations, but not to exceed
6 amounts available in prior year revenues.

7 (2) The department's ability to satisfy appropriation fund
8 sources in part 1 is not limited to collections and accruals
9 pertaining to services provided in the current fiscal year, but
10 also includes reimbursements, refunds, adjustments, and settlements
11 from prior years.

12 Sec. 217. (1) By February 1 of the current fiscal year, the
13 department shall submit a report to the report recipients required
14 in section 246 of this part on the detailed name and amounts of
15 estimated federal, restricted, private, and local sources of
16 revenue that support the appropriations in each of the line items
17 in part 1.

18 (2) On the release of the next fiscal year executive budget
19 recommendation, the department shall submit a report to the report
20 recipients required in section 246 of this part on the amounts and
21 detailed sources of federal, restricted, private, and local revenue
22 proposed to support the total funds appropriated in each of the
23 line items in part 1 of the next fiscal year executive budget
24 proposal.

25 Sec. 218. As required under part 23 of the public health code,
26 1978 PA 368, MCL 333.2301 to 333.2321, the appropriations in part 1
27 include the following:

- 28 (a) Immunizations.
29 (b) Communicable disease control.

1 (c) Sexually transmitted infection control.

2 (d) Tuberculosis control.

3 (e) Prevention of gonorrhoea eye infection in newborns.

4 (f) Screening newborns for the conditions listed in section
5 5431 of the public health code, 1978 PA 368, MCL 333.5431, or
6 recommended by the newborn screening quality assurance advisory
7 committee created under section 5430 of the public health code,
8 1978 PA 368, MCL 333.5430.

9 (g) Health and human services annex of the Michigan emergency
10 management plan.

11 (h) Prenatal care.

12 Sec. 219. (1) The department may contract with the Michigan
13 Public Health Institute for the design and implementation of
14 projects and for other public health-related activities prescribed
15 in section 2611 of the public health code, 1978 PA 368, MCL
16 333.2611. The department may develop a master agreement with the
17 Michigan Public Health Institute to carry out these purposes for up
18 to a 1-year period.

19 (2) The department shall submit a report to the report
20 recipients required in section 246 of this part, on a semiannual
21 basis, on all of the following:

22 (a) A detailed description of each funded project.

23 (b) The amount allocated for each project, the appropriation
24 line item from which the allocation is funded, and the source of
25 financing for each project.

26 (c) The expected project duration.

27 (d) A detailed spending plan for each project, including a
28 list of all subgrantees and the amount allocated to each
29 subgrantee.

1 (3) On a semiannual basis, the department shall provide to the
2 report recipients required in section 246 of this part a copy of
3 all reports, studies, and publications produced by the Michigan
4 Public Health Institute, its subcontractors, or the department with
5 the funds appropriated in the department's budget in the previous
6 fiscal year and allocated to the Michigan Public Health Institute.

7 Sec. 220. The department shall ensure that faith-based
8 organizations are able to apply and compete for services, programs,
9 or contracts that they are qualified and suitable to fulfill. The
10 department shall not disqualify faith-based organizations solely on
11 the basis of the religious nature of their organization or their
12 guiding principles or statements of faith.

13 Sec. 221. According to section 1b of the social welfare act,
14 1939 PA 280, MCL 400.1b, the department shall treat part 1 and this
15 part as a time-limited addendum to the social welfare act, 1939 PA
16 280, MCL 400.1 to 400.119b.

17 Sec. 222. (1) The department shall provide written
18 notification to the report recipients required in section 246 of
19 this part of any major policy changes at least 30 days before the
20 implementation date of those policy changes.

21 (2) The department shall make the entire policy and procedures
22 manual available and accessible to the public via the department
23 website.

24 (3) The department shall report by April 1 of the current
25 fiscal year on each specific policy change made to implement a
26 public act affecting the department that took effect during the
27 prior calendar year to the senate and house appropriations
28 committees, the senate and house appropriations subcommittees on
29 the department budget, the joint committee on administrative rules,

1 and the senate and house fiscal agencies.

2 (4) The department shall attach each policy bulletin issued
3 during the prior calendar year to the report issued in subsection
4 (3).

5 Sec. 223. The department may establish and collect fees for
6 publications, videos and related materials, conferences, and
7 workshops. Collected fees are appropriated when received and shall
8 be used to offset expenditures to pay for printing and mailing
9 costs of the publications, videos and related materials, and costs
10 of the workshops and conferences. The department shall not collect
11 fees under this section that exceed the cost of the expenditures.
12 When collected fees are appropriated under this section in an
13 amount that exceeds the current fiscal year appropriation, within
14 30 days the department shall notify the chairs of the house and
15 senate appropriations subcommittees on the department budget, the
16 house and senate fiscal agencies and policy offices, and the state
17 budget director of that fact.

18 Sec. 224. The department may retain all of the state's share
19 of food assistance overissuance collections as an offset to general
20 fund/general purpose costs. Retained collections shall be applied
21 against federal funds deductions in all appropriation units where
22 department costs related to the investigation and recoupment of
23 food assistance overissuances are incurred. Retained collections in
24 excess of those costs shall be applied against the federal funds
25 deducted in the departmental administration and support
26 appropriation unit.

27 Sec. 226. If the revenue collected by the department from fees
28 and collections exceeds the amount appropriated in part 1, the
29 revenue may be carried forward with the approval of the state

1 budget director into the subsequent fiscal year. The revenue
2 carried forward under this section shall be used as the first
3 source of funds in the subsequent fiscal year.

4 Sec. 227. The state departments, agencies, and commissions
5 receiving tobacco tax funds and Healthy Michigan fund revenue from
6 part 1 shall report by April 1 of the current fiscal year to the
7 senate and house appropriations committees, the senate and house
8 fiscal agencies, and the state budget director on the following:

9 (a) A detailed spending plan by appropriation line item,
10 including a description of programs and a summary of organizations
11 receiving these funds.

12 (b) A description of allocations or bid processes, including
13 any need or demand indicator used to determine allocations.

14 (c) Eligibility criteria for program participation and maximum
15 benefit levels, where applicable.

16 (d) Outcome measures used to evaluate programs, including the
17 measures of the effectiveness of these programs in improving the
18 health of residents of this state.

19 Sec. 228. (1) If the department is authorized under state or
20 federal law to collect an overpayment owed to the department, the
21 department may assess a penalty of 1% per month beginning 60 days
22 after notification. If an overpayment is caused by department
23 error, a penalty may not be assessed until 6 months after the
24 initial notification date of the overpayment amount. The department
25 shall not collect penalty interest in an amount that exceeds the
26 amount of the original overpayment. The state share of any funds
27 collected under this section shall be deposited in the state
28 general fund.

29 (2) By September 30 of the current fiscal year, the department

1 shall submit a report to the report recipients required in section
2 246 of this part on penalty amounts assessed and paid by account
3 during the current fiscal year, the reason for the penalty, and the
4 current status of the account.

5 Sec. 229. From the \$370,000.00 of TANF revenue appropriated in
6 part 1 for training and program support, the department shall
7 extend the interagency agreement with the office of employment and
8 training within the department of labor and economic opportunity
9 for the duration of the current fiscal year, which concerns TANF
10 funding to provide job readiness and welfare-to-work programming.
11 \$10,000.00 of TANF revenue is appropriated in part 1 for the
12 department to submit a report on the following specific outcome and
13 performance measures to the senate and house appropriations
14 subcommittees on general government and the report recipients
15 required in section 246 of this part by January 1 of the current
16 fiscal year for the previous fiscal year:

17 (a) An itemized spending report on TANF funding, including all
18 of the following:

19 (i) Direct services to recipients.

20 (ii) Administrative expenditures.

21 (b) The number of family independence program (FIP) recipients
22 served through the TANF funding, including all of the following:

23 (i) The number and percentage who obtained employment through
24 Michigan Works!

25 (ii) The number and percentage who fulfilled their TANF work
26 requirement through other job readiness programming.

27 (iii) Average TANF spending per recipient.

28 (iv) The number and percentage of recipients who were referred
29 to Michigan Works! but did not receive a job or job readiness

1 placement and the reasons why.

2 (c) The following data itemized by Michigan Works! agency:

3 (i) The number of referrals to Michigan Works! job readiness
4 programs.

5 (ii) The number of referrals to Michigan Works! job readiness
6 programs who became a participant in the Michigan Works! job
7 readiness programs.

8 (iii) The number of participants who obtained employment, and
9 the cost per participant case.

10 Sec. 230. By December 31 of the current fiscal year, the
11 department shall submit a report to the report recipients required
12 in section 246 of this part on the status of the implementation of
13 any noninflationary, noncaseload, programmatic funding increases in
14 the current fiscal year from the previous fiscal year. The report
15 shall confirm the implementation of already implemented funding
16 increases and provide explanations for any planned implementation
17 of funding increases that have not yet occurred. For any planned
18 implementation of funding increases that have not yet occurred, the
19 department shall provide an expected implementation date and the
20 reasons for delayed implementation.

21 Sec. 231. (1) The department shall not expend the funds
22 appropriated in part 1 to enter into any contract with a Medicaid
23 managed care organization of MI Choice Waiver, MI Health Link, or
24 behavioral health unless the Medicaid managed care organization
25 agrees to do all of the following:

26 (a) Continue the direct care wage increase funded at \$2.35 per
27 hour and provide sufficient funding to increase the wages paid to
28 direct care workers by the equivalent of \$0.65 per hour more than
29 the previous fiscal year for the services noted in DHHS Medicaid

1 provider letter L 21-76 under the Medicaid managed care
2 organization's relevant program.

3 (b) Ensure to the greatest extent possible that the full
4 amount for funds appropriated for a direct care worker wage
5 increase, except for costs incurred by the employer, including
6 payroll taxes, resulting from the increase to direct care worker
7 wages under this section, is provided to direct care workers
8 through maintained increased wages.

9 (c) Permit a direct care worker to elect, in writing or
10 electronically, to not receive the wage increase provided in this
11 section.

12 (d) Require direct care worker agencies that the Medicaid
13 managed care organization subcontracts with to track and report
14 annually the total amount and percentage of Medicaid reimbursements
15 paid to that direct care worker agency that are used to pay direct
16 care worker wages.

17 (e) Require direct care worker agencies that the Medicaid
18 managed care provider subcontracts with to track and report
19 annually the hourly wages paid for each direct care worker hired by
20 the direct care worker agency.

21 (f) Track annually the hourly wages paid to each direct care
22 worker hired directly by the Medicaid managed care organization or
23 CMHSP.

24 (g) Report annually to the department the information required
25 in subdivisions (d), (e), and (f).

26 (2) On request, the department shall provide to the
27 legislature the report required in subsection (1)(g).

28 Sec. 232. (1) The department shall provide the approved
29 spending plan for each line item receiving an appropriation in the

1 current fiscal year to the senate and house appropriations
2 subcommittees on the department budget and the senate and house
3 fiscal agencies within 60 days after approval by the department but
4 not later than January 15 of the current fiscal year. Compliance
5 with this section is not met unless a line-item appropriation name
6 is included in all places that a line-item appropriation number is
7 listed. The spending plan shall include the following information
8 regarding planned expenditures for each category: allocation in the
9 previous period, change in the allocation, and new allocation. The
10 spending plan shall include the following information regarding
11 each revenue source for the line item: category of the fund source
12 indicated by general fund/general purpose, state restricted, local,
13 private, or federal. Figures included in the approved spending plan
14 shall not be assumed to constitute the actual final expenditures,
15 as line items may be updated on an as-needed basis to reflect
16 changes in projected expenditures and projected revenue. The
17 department shall supplement the spending plan information by
18 providing a list of all active contracts and grants in the
19 department's contract system. For amounts listed in the other
20 contracts category of each spending plan, the department shall
21 provide a list of all contracts and grants and amounts for the
22 current fiscal year, and include the name of the line item and the
23 name of the fund source related to each contract or grant and
24 amount. For amounts listed in the all other costs category of each
25 spending plan, the department shall provide a list detailing
26 planned expenditures and amounts for the current fiscal year, and
27 include the name of the line item and the name of the fund source
28 related to each amount and expenditure.

29 (2) Notwithstanding any other appropriation authority granted

1 in part 1, the department shall not appropriate any additional
2 general fund/general purpose funds or any related federal and state
3 restricted funds without providing a written 30-day notice to the
4 senate and house appropriations subcommittees on the department
5 budget, the senate and house fiscal agencies, and the senate and
6 house policy offices.

7 Sec. 234. The departments and agencies receiving
8 appropriations in part 1 shall receive and retain copies of all
9 reports funded from appropriations in part 1. Federal and state
10 guidelines for the short-term and long-term retention of records
11 must be followed. The department may electronically retain copies
12 of reports unless otherwise required by federal and state
13 guidelines.

14 Sec. 236. (1) From the funds appropriated in part 1, the
15 department shall do all of the following:

16 (a) Submit a report to the report recipients required in
17 section 246 of this part on any amount of severance pay for a
18 department director, deputy director, or other high-ranking
19 department official not later than 14 days after a severance
20 agreement with the director or official is signed. The name of the
21 director or official and the amount of severance pay must be
22 included in the report required by this subdivision.

23 (b) Maintain an internet website that posts any severance pay
24 in excess of 6 weeks of wages, regardless of the position held by
25 the former department employee receiving severance pay.

26 (c) By February 1, submit a report to the report recipients
27 required in section 246 of this part on the total amount of
28 severance pay remitted to former department employees during the
29 previous fiscal year and the total number of former department

1 employees that were remitted severance pay during the previous
2 fiscal year.

3 (2) As used in this section, "severance pay" means
4 compensation that is both payable or paid on the termination of
5 employment and in addition to either wages or benefits earned
6 during the course of employment or generally applicable retirement
7 benefits.

8 Sec. 238. It is the intent of the legislature that departments
9 maximize the efficiency of the state workforce and, where possible,
10 prioritize in-person work. Each executive branch department,
11 agency, board, or commission that receives funding under part 1
12 must post its in-person, remote, or hybrid work policy on its
13 website.

14 Sec. 239. For behavioral and physical health services provided
15 through managed care or the fee-for-service program, the department
16 shall require, for the nonfacility component of the reimbursement
17 rate, at least the same reimbursement for that service, if that
18 service is provided through telemedicine, as if the service
19 involved face-to-face contact between the health care professional
20 and the patient.

21 Sec. 240. Appropriations in part 1 shall, to the extent
22 possible by the department, not be expended until all existing work
23 project authorization available for the same purposes is exhausted.

24 Sec. 241. By March 1 of the current fiscal year, the
25 department shall submit a report to the report recipients required
26 in section 246 of this part on total actual expenditures in the
27 previous fiscal year for advertising and media outreach, including
28 the purpose, amount, and fund source by program or appropriation
29 line item.

1 Sec. 242. From the funds appropriated in part 1 for
2 departmental administration and management, \$100,000.00 is
3 allocated to produce a description of programs report for the
4 current fiscal year by March 1 of the current fiscal year. The
5 report shall be submitted to the senate and house appropriations
6 committees, the senate and house fiscal agencies, and the senate
7 and house policy offices. The report shall include the
8 appropriation unit, the line-item name and number, the
9 appropriation history, the program name, the program overview, the
10 financing detail, and where applicable, the legal basis for the
11 program and program effectiveness and outcomes.

12 Sec. 244. On a monthly basis, the department shall submit a
13 report to the report recipients required in section 246 of this
14 part on any line-item appropriation for which the department
15 estimates total annual expenditures would exceed the funds
16 appropriated for that line-item appropriation by 5% or more. The
17 department shall provide a detailed explanation for any relevant
18 line-item appropriation exceedance and shall identify the
19 corrective actions undertaken to mitigate line-item appropriation
20 expenditures from exceeding the funds appropriated for that line-
21 item appropriation by a greater amount. This section does not apply
22 for line-item appropriations that are part of the May revenue
23 estimating conference caseload and expenditure estimates.

24 Sec. 246. Except as otherwise provided in this part, all
25 reports required under this part shall be submitted to the senate
26 and house appropriations subcommittees on the department budget,
27 the senate and house fiscal agencies, the senate and house policy
28 offices, and the state budget office.

29 Sec. 252. The appropriations in part 1 for Healthy Michigan

1 plan - behavioral health and Healthy Michigan plan are contingent
2 on the provisions of the social welfare act, 1939 PA 280, MCL 400.1
3 to 400.119b, that were contained in 2013 PA 107 not being amended,
4 repealed, or otherwise altered to eliminate the Healthy Michigan
5 plan. If that occurs, then, on the effective date of the amendatory
6 act that amends, repeals, or otherwise alters those provisions, the
7 remaining funds in the Healthy Michigan plan - behavioral health
8 and Healthy Michigan plan line items must be used only to pay
9 previously incurred costs and any remaining appropriations shall
10 not be allotted to support those line items.

11 Sec. 253. (1) The department shall ensure that federally
12 recognized tribes are able to apply and compete for services,
13 programs, grants, or contracts.

14 (2) For competitive grant programs described in this part,
15 federally recognized tribes are eligible to apply for grant funds
16 made available to organizations exempt from federal income tax
17 under section 501(c)(3) of the internal revenue code of 1986, 26
18 USC 501, and to local units of government.

19 Sec. 258. (1) In collaboration with the department of
20 education and the department of state police, the department shall
21 promote and support initiatives in schools and other educational
22 organizations that include, but are not limited to, training for
23 educators, teachers, and other personnel in school settings for all
24 of the following:

25 (a) The utilization of trauma-informed practices.

26 (b) Age-appropriate education and information on human
27 trafficking.

28 (c) Age-appropriate education and information on sexual abuse
29 prevention.

1 (2) The collaboration shall include the child welfare
2 institute within the department, which provides training and
3 education for public and private employees who work within the
4 child protective services, foster care, adoption, and juvenile
5 justice systems.

6 (3) The department shall submit a report by March 1 of the
7 current fiscal year on the activities and status of implementation
8 of the requirements described in subsections (1) and (2) to the
9 report recipients required in section 246 of this part.

10 Sec. 263. (1) Except as otherwise provided in this subsection,
11 before submission of a waiver, a state plan amendment, or a similar
12 proposal to CMS or other federal agency, the department shall
13 provide written notification of the planned submission to the
14 report recipients required in section 246 of this part. This
15 subsection does not apply to the submission of a waiver, a state
16 plan amendment, or similar proposal that does not propose a
17 material change or is outside of the ordinary course of waiver,
18 state plan amendment, or similar proposed submissions.

19 (2) The department shall provide written reports on a
20 semiannual basis to the report recipients required in section 246
21 of this part summarizing the status of any new or ongoing
22 discussions with CMS, the United States Department of Health and
23 Human Services, or other federal agency regarding potential or
24 future waiver applications as well as the status of submitted
25 waivers that have not yet received federal approval. If, at the
26 time a semiannual report is due, there are no reportable items,
27 then no report is required to be provided.

28 Sec. 264. The department shall not take disciplinary action
29 against an employee of the department in the state classified civil

1 service for communicating with a member of the legislature or the
2 member's staff, unless the communication is prohibited by law and
3 the department is exercising its authority as provided by law.

4 Sec. 270. The department shall advise the legislature of the
5 receipt of a notification from the attorney general's office of a
6 legal action in which expenses had been recovered according to
7 section 106(6) of the social welfare act, 1939 PA 280, MCL 400.106.
8 By February 1 of the current fiscal year, the department shall
9 submit a written report to the report recipients required in
10 section 246 of this part that includes, at a minimum, all of the
11 following:

12 (a) The total amount recovered from the legal action.

13 (b) The program or service for which the money was originally
14 expended.

15 (c) Details on the disposition of the funds recovered, such as
16 the appropriation or revenue account in which the money was
17 deposited.

18 (d) A description of the facts involved in the legal action.

19 Sec. 274. (1) The department, in collaboration with the state
20 budget office, shall submit to the report recipients required in
21 section 246 of this part, 1 week after the day the governor submits
22 to the legislature the budget for the ensuing fiscal year, a report
23 on spending and revenue projections for each of the capped federal
24 funds listed below. The report shall contain actual spending and
25 revenue in the previous fiscal year, spending and revenue
26 projections for the current fiscal year as enacted, and spending
27 and revenue projections within the executive budget proposal for
28 the fiscal year beginning October 1, 2024 for each individual line
29 item for the department budget. The report shall also include

1 federal funds transferred to other departments. The capped federal
2 funds shall include, but not be limited to, all of the following:

- 3 (a) TANF.
- 4 (b) Title XX social services block grant.
- 5 (c) Title IV-B part I child welfare services block grant.
- 6 (d) Title IV-B part II promoting safe and stable families
7 funds.
- 8 (e) Low-income home energy assistance program.

9 (2) It is the intent of the legislature that the department,
10 in collaboration with the state budget office, not utilize capped
11 federal funding for economics adjustments for FTEs or other
12 economics costs that are included as part of the budget submitted
13 to the legislature by the governor for the ensuing fiscal year,
14 unless there is a reasonable expectation for increased federal
15 funding to be available to the department from that capped revenue
16 source in the ensuing fiscal year.

17 (3) By February 15 of the current fiscal year, the department
18 shall prepare an annual report of its efforts to identify TANF
19 maintenance of effort sources and rationale for any increases or
20 decreases from all of the following, but not limited to:

- 21 (a) Other departments.
- 22 (b) Local units of government.
- 23 (c) Private sources.

24 Sec. 275. (1) On a quarterly basis, the department, with the
25 approval of the state budget director, is authorized to realign
26 sources between other federal, TANF, and capped federal financing
27 authorizations in order to maximize federal revenues. This
28 realignment of financing shall not produce a gross increase or
29 decrease in the department's total individual line item

1 authorizations, nor will it produce a net increase or decrease in
2 total federal revenues, or a net increase in TANF authorization.

3 (2) On a quarterly basis, the department shall submit a report
4 to the report recipients required in section 246 of this part on
5 the realignment of federal fund sources transacted to date in the
6 current fiscal year under the authority of subsection (1),
7 including the dates, line items, and amounts of the transactions.
8 If, at the time a quarterly report is due, no transactions were
9 made under subsection (1), then no report is required to be
10 provided.

11 (3) Within 30 days after the date on which year-end book
12 closing is completed, the department shall submit to the report
13 recipients required in section 246 of this part a report on the
14 realignment of federal fund sources that took place as part of the
15 year-end closing process for the previous fiscal year.

16 Sec. 280. By March 1 of the current fiscal year, the
17 department shall submit a report to the report recipients required
18 in section 246 of this part that provides all of the following for
19 each line item in part 1 containing personnel-related costs,
20 including the specific individual amounts for salaries and wages,
21 payroll taxes, and fringe benefits:

22 (a) FTE authorization.

23 (b) Spending authorization for personnel-related costs, by
24 fund source, under the spending plan.

25 (c) Actual year-to-date expenditures for personnel-related
26 costs, by fund source, through the end of the prior month.

27 (d) The projected year-end balance or shortfall for personnel-
28 related costs, by fund source, based on actual monthly spending
29 levels through the end of the prior month.

1 (e) A specific plan for addressing any projected shortfall for
2 personnel-related costs at either the gross or fund source level.

3 Sec. 289. By March 1 of the current fiscal year, the
4 department shall submit to the report recipients required in
5 section 246 of this part an annual report on the supervisor-to-
6 staff ratio by department divisions and subdivisions.

7 Sec. 290. Any public advertisement for public assistance shall
8 also inform the public of the welfare fraud hotline operated by the
9 department.

10 Sec. 296. From the funds appropriated in part 1, the
11 department to the extent permissible under section 8 of 1964 PA
12 170, MCL 691.1408, is responsible for the necessary and reasonable
13 attorney fees and costs incurred by private and independent legal
14 counsel chosen by current and former classified and unclassified
15 department employees in the defense of the employees in any state
16 or federal lawsuit or investigation related to the water system in
17 a city or community in which a declaration of emergency was issued
18 because of drinking water contamination.

19 Sec. 297. (1) On a quarterly basis, the department shall
20 submit a report to the report recipients required in section 246 of
21 this part with the following information:

22 (a) The number of FTE positions in pay status by civil service
23 classification.

24 (b) A comparison by line item of the number of FTE positions
25 authorized from funds appropriated in part 1 to the actual number
26 of FTE positions employed by the department at the end of the
27 reporting period.

28 (2) By March 1 of the current fiscal year, the department
29 shall report to the senate and house appropriations committees, the

1 senate and house appropriations subcommittees on the department
2 budget, and the senate and house fiscal agencies the following
3 information:

4 (a) The number of employees that were engaged in remote work
5 in 2023.

6 (b) The number of employees of the department authorized to
7 work remotely and the actual number of those working remotely in
8 the current reporting period.

9 (c) Estimated net cost savings achieved by the department by
10 remote work.

11 (d) The reduced use of office space associated with remote
12 work.

13

14 **CHILD SUPPORT ENFORCEMENT**

15 Sec. 401. (1) The appropriations in part 1 assume a total
16 federal child support incentive payment of \$26,500,000.00.

17 (2) From the federal money received for child support
18 incentive payments, \$12,000,000.00 shall be retained by the state
19 and expended for child support program expenses.

20 (3) From the federal money received for child support
21 incentive payments, \$14,500,000.00 shall be paid to the counties
22 based on each county's performance level for each of the federal
23 performance measures as established in 45 CFR 305.2.

24 (4) If the child support incentive payment to the state from
25 the federal government is greater than \$26,500,000.00, then 100% of
26 the excess shall be retained by the state and is appropriated until
27 the total retained by the state reaches \$15,397,400.00.

28 (5) If the child support incentive payment to the state from
29 the federal government is greater than the amount needed to satisfy

1 the provisions identified in subsections (1), (2), (3), and (4),
2 the additional funds shall be subject to appropriation by the
3 legislature.

4 (6) If the child support incentive payment to the state from
5 the federal government is less than \$26,500,000.00, then the state
6 and county share shall each be reduced by 50% of the shortfall.

7 Sec. 409. (1) If statewide retained child support collections
8 exceed \$38,300,000.00, 75% of the amount in excess of
9 \$38,300,000.00 is appropriated to legal support contracts. This
10 excess appropriation may be distributed to eligible counties to
11 supplement and not supplant county title IV-D funding.

12 (2) Each county whose retained child support collections in
13 the current fiscal year exceed its fiscal year 2004-2005 retained
14 child support collections, excluding tax offset and financial
15 institution data match collections in both the current fiscal year
16 and fiscal year 2004-2005, shall receive its proportional share of
17 the 75% excess.

18 Sec. 410. (1) If title IV-D-related child support collections
19 are escheated, the state budget director is authorized to adjust
20 the sources of financing for the funds appropriated in part 1 for
21 legal support contracts to reduce federal authorization by 66% of
22 the escheated amount and increase general fund/general purpose
23 authorization by the same amount. This budget adjustment is
24 required to offset the loss of federal revenue due to the escheated
25 amount being counted as title IV-D program income in accordance
26 with federal regulations under 45 CFR 304.50.

27 (2) The department shall submit a report on any authorization
28 adjustments made as permitted under subsection (1) to the report
29 recipients required in section 246 of this part.

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COMMUNITY SERVICES AND OUTREACH

Sec. 450. (1) From the funds appropriated in part 1 for school success partnership program, the department shall allocate \$525,000.00 of TANF revenue by December 1 of the current fiscal year to support the Northeast Michigan Community Service Agency programming. The department shall require the following performance objectives be measured and reported for the duration of the state funding for the school success partnership program:

- (a) Increasing school attendance and decreasing chronic absenteeism.
- (b) Increasing academic performance based on grades with emphasis on math and reading.
- (c) Identifying barriers to attendance and success and connecting families with resources to reduce these barriers.
- (d) Increasing parent involvement.

(2) By July 15 of the current fiscal year, the Northeast Michigan Community Service Agency shall provide reports to the department on the number of children and families served and the services that were provided to families to meet the performance objectives identified in this section. The department shall distribute the reports within 1 week after receipt to the report recipients required in section 246 of this part.

Sec. 453. (1) From the funds appropriated in part 1 for homeless programs, the department shall allocate funds to the emergency shelter program to support efforts of shelter providers to move homeless individuals and households into permanent housing as quickly as possible. Funding provided shall be equal to or exceed the amount a provider would receive if paid a \$19.00 per

1 diem rate per bed night. Expected outcomes are increased shelter
2 discharges to stable housing destinations, decreased recidivism
3 rates for shelter clients, and a reduction in the average length of
4 stay in emergency shelters.

5 (2) By March 1 of the current fiscal year, the department
6 shall submit to the report recipients required in section 246 of
7 this part a report on the total amount expended for the program in
8 the prior 2 fiscal years, the total number of shelter nights
9 provided, and the average length of stay in an emergency shelter.

10 Sec. 454. The department shall allocate the full amount of
11 funds appropriated in part 1 for homeless programs to provide
12 services for homeless individuals and families, including, but not
13 limited to, third-party contracts for emergency shelter services.

14 Sec. 455. As a condition of receipt of federal TANF revenue,
15 homeless shelters and human services agencies shall collaborate
16 with the department to obtain necessary TANF eligibility
17 information on families as soon as possible after admitting a
18 family to the homeless shelter. From the funds appropriated in part
19 1 for homeless programs, the department is authorized to make
20 allocations of TANF revenue only to the homeless shelters and human
21 services agencies that report necessary data to the department for
22 the purpose of meeting TANF eligibility reporting requirements.
23 Homeless shelters or human services agencies that do not report
24 necessary data to the department for the purpose of meeting TANF
25 eligibility reporting requirements will not receive reimbursements
26 that exceed the per diem amount they received in fiscal year 2000.
27 The use of TANF revenue under this section is not an ongoing
28 commitment of funding.

29 Sec. 456. From the funds appropriated in part 1 for homeless

1 programs, the department shall allocate \$90,000.00 to reimburse
2 public service agencies that provide documentation of paying birth
3 certificate fees on behalf of category 1 homeless clients at county
4 clerk's offices. Public service agencies shall be reimbursed for
5 the cost of the birth certificate fees quarterly until this
6 allocation is fully spent.

7 Sec. 460. From the funds appropriated in part 1 for kids' food
8 basket, the department shall allocate \$525,000.00 to fund a project
9 with a nonprofit, community-based organization organized under the
10 laws of this state that is exempt from federal income tax under
11 section 501(c)(3) of the internal revenue code of 1986, 26 USC 501,
12 and is located in a city with a population between 185,000 and
13 200,000 according to the most recent federal decennial census and
14 in a county with a population between 600,000 and 700,000 according
15 to the most recent federal decennial census. The nonprofit
16 organization recipient shall have an existing network of food
17 delivery to low-income children to at least 3 counties in this
18 state. The nonprofit organization shall use the funds for increased
19 operational costs due to the coronavirus pandemic and for expansion
20 of services to additional schools and communities. The funding may
21 be used to cover employee costs, food and supplies, equipment, and
22 other operational costs identified by the organization to support
23 their mission and goals.

24 Sec. 463. From the funds appropriated in part 1 for runaway
25 and homeless youth grants and domestic violence prevention and
26 treatment, the department is authorized to make allocations of TANF
27 revenue only to agencies that report necessary data to the
28 department to meet TANF eligibility reporting requirements.

29 Sec. 465. (1) From the funds appropriated in part 1 for

1 community services and outreach administration, \$2,950,000.00 must
2 be distributed as provided in subsection (2). The amount
3 distributed under this subsection must not exceed 50% of the total
4 operating expenses of the program described in subsection (2), with
5 the remaining 50% paid by local United Way organizations and other
6 nonprofit organizations and foundations.

7 (2) Funds distributed under subsection (1) shall be
8 distributed to Michigan 2-1-1, a nonprofit corporation organized
9 under the laws of this state that is exempt from federal income tax
10 under section 501(c)(3) of the internal revenue code of 1986, 26
11 USC 501, and whose mission is to coordinate and support a statewide
12 2-1-1 system. Michigan 2-1-1 shall use the funds only to fulfill
13 the Michigan 2-1-1 business plan adopted by Michigan 2-1-1 in
14 January 2005.

15 (3) Michigan 2-1-1 shall refer to the department any calls
16 received reporting fraud, waste, or abuse of state-administered
17 public assistance.

18 (4) Michigan 2-1-1 shall report annually to the department,
19 the house and senate standing committees with primary jurisdiction
20 over matters relating to human services and telecommunications on
21 2-1-1 system performance, the senate and house appropriations
22 subcommittees on the department budget, and the senate and house
23 fiscal agencies, including, but not limited to, call volume by
24 health and human service needs and unmet needs identified through
25 caller data and number and percentage of callers referred to public
26 or private provider types.

27 Sec. 466. From the funds appropriated in part 1 for runaway
28 and homeless youth grants, the department shall allocate
29 \$10,000,000.00 to support the expansion of runaway and homeless

1 youth capacity. The funding must be comprised of \$2,146,900.00 in
2 GF/GP revenue and \$7,853,100.00 of TANF revenue. The funding must
3 be allocated as follows:

4 (a) \$6,000,000.00 to cover the 18 counties that are presently
5 unserved by any runaway and homeless youth program and to expand
6 the capacity for counties that are underserved.

7 (b) \$2,000,000.00 across 19 providers statewide to provide
8 infrastructure support for expanded staff, supervision, and
9 training to continue to meet the complex mental health needs of the
10 population being served.

11 (c) \$2,000,000.00 across 19 providers statewide to support
12 upgrading technology and facilities to maintain safety in
13 environments where youth are sheltered.

14

15 **CHILDREN'S SERVICES AGENCY - CHILD WELFARE**

16 Sec. 501. (1) A goal is established that not more than 25% of
17 all children in foster care at any given time during the current
18 fiscal year, if in the best interest of the child, will have been
19 in foster care for 24 months or more.

20 (2) By March 1 of the current fiscal year, the department
21 shall provide to the report recipients required in section 246 of
22 this part a report describing the steps that will be taken to
23 achieve the goal established under subsection (1). The report must
24 also include an explanation of the most significant barriers that
25 prevent long-term foster children from permanent placements.

26 Sec. 502. From the funds appropriated in part 1 for foster
27 care, the department shall provide 50% reimbursement to Indian
28 tribal governments for foster care expenditures for children who
29 are under the jurisdiction of Indian tribal courts and who are not

1 otherwise eligible for federal foster care cost sharing. The
2 department may provide up to 100% reimbursement to Indian tribal
3 governments that enter into a state-tribal title IV-E agreement
4 allowed under this state's title IV-E state plan.

5 Sec. 503. (1) In accordance with the final report of the
6 Michigan child welfare performance-based funding task force issued
7 in response to section 503 of article X of 2013 PA 59, the
8 department shall continue to review, update, or develop actuarially
9 sound case rates for necessary child welfare foster care case
10 management services that achieve permanency by the department and
11 private child placing agencies in a prospective payment system
12 under a performance-based funding model.

13 (2) The department, in conjunction with members from both the
14 house of representatives and senate, private child placing
15 agencies, the courts, and counties shall continue to implement the
16 recommendations that are described in the workgroup report that was
17 provided in section 503 of article X of 2013 PA 59 to establish a
18 performance-based funding model pilot program for public and
19 private child welfare services providers. By July 1 of the current
20 fiscal year, the department shall provide a report on the status of
21 the performance-based contracting model to the report recipients
22 required in section 246 of this part.

23 Sec. 504. (1) From the funds appropriated in part 1, the
24 department shall implement a 3-year master agreement with an option
25 for 2 additional years with the West Michigan Partnership for
26 Children Consortium to maintain the performance-based child welfare
27 contracting program. The consortium shall consist of a network of
28 affiliated child welfare service providers that will accept and
29 comprehensively assess referred youth, assign cases to members of

1 its continuum or leverage services from other entities, and make
2 appropriate case management decisions during the duration of a
3 case.

4 (2) As a condition for receiving the funding in part 1, the
5 West Michigan Partnership of Children Consortium shall maintain a
6 contract agreement with the department that supports a global
7 capitated payment model. The capitated payment amount shall be
8 based on historical averages of the number of children served in
9 Kent County and for the costs per foster care case. The West
10 Michigan Partnership for Children Consortium is required to manage
11 the cost of the child population it serves. The administrative
12 portion of the contracted agreement must reflect the cumulative
13 annual percentage change in the Detroit Consumer Price Index from
14 the previous year. The capitated payment amount shall be reviewed
15 and adjusted no less than twice during the current fiscal year or
16 due to any policy changes implemented by the department that result
17 in a volume of placements that differ in a statistically
18 significant manner from the amount allocated in the annual contract
19 between the department and the West Michigan Partnership for
20 Children Consortium as determined by an independent actuary as well
21 as to account for changes in case volumes and any statewide rate
22 increases that are implemented. The contract agreement requires
23 that the West Michigan Partnership for Children Consortium shall
24 maintain the following stipulations and conditions:

25 (a) That the service component of the capitated payment will
26 be calculated assuming rates paid to providers under the program
27 are generally consistent with the department's payment policies for
28 providers throughout the rest of this state.

29 (b) To maintain a risk reserve of at least \$1,500,000.00 to

1 ensure it can meet unanticipated expenses within a given fiscal
2 year.

3 (c) To cooperate with the department on an independent fiscal
4 analysis of costs incurred and revenues received.

5 (3) By March 1 of the current fiscal year, the consortium
6 shall provide to the department and the report recipients required
7 in section 246 of this part a report on the consortium, including,
8 but not limited to, actual expenditures, number of children placed
9 by agencies in the consortium, fund balance of the consortium, and
10 the outcomes measured.

11 Sec. 505. By March 1 of the current fiscal year, the
12 department shall provide a report to the report recipients required
13 in section 246 of this part on youth referred or committed to the
14 department for care or supervision in the previous fiscal year and
15 in the first quarter of the current fiscal year outlining the
16 number of youth served by the department within the juvenile
17 justice system, the type of setting for each youth, performance
18 outcomes, and financial costs or savings.

19 Sec. 506. From the funds appropriated in part 1 for attorney
20 general contract, by March 1 of the current fiscal year, the
21 department shall submit to the report recipients required in
22 section 246 of this part a report on the juvenile justice system in
23 any county in which funds appropriated in part 1 are expended. The
24 report shall include, but not be limited to, the following:

25 (a) The number of youth referred or committed to the
26 department for care or supervision in the previous fiscal year and
27 in the first quarter of the current fiscal year.

28 (b) The number of youth referred or committed to the care or
29 supervision of the county in which funds appropriated in part 1

1 were expended for the previous fiscal year and the first quarter of
2 the current fiscal year.

3 (c) The type of setting for each youth referred or committed
4 for care or supervision, any applicable performance outcomes, and
5 identified financial costs or savings.

6 Sec. 507. The department's ability to satisfy appropriation
7 deducts in part 1 for foster care private collections is not
8 limited to collections and accruals pertaining to services provided
9 only in the current fiscal year but may include revenues collected
10 during the current fiscal year for services provided in prior
11 fiscal years.

12 Sec. 508. (1) In addition to the amount appropriated in part 1
13 for children's trust fund grants, money granted or money received
14 as gifts or donations to the children's trust fund created by 1982
15 PA 249, MCL 21.171 to 21.172, is appropriated for expenditure.

16 (2) For the funds described in subsection (1), the department
17 shall ensure that administrative delays are avoided and the local
18 grant recipients and direct service providers receive money in an
19 expeditious manner. The department and board shall make available
20 the children's trust fund contract funds to grantees within 31 days
21 of the start date of the funded project.

22 Sec. 510. (1) From the funds appropriated in part 1 for child
23 care fund and foster care payments, the department shall allocate
24 funds to cover a capacity model for a specified number of beds
25 based on projected needs for privately operated child welfare and
26 juvenile justice residential facilities. A contract entered into
27 under this subsection must provide guaranteed payment for
28 anticipated utilization, with the condition that providers shall
29 accept youth up to the contracted capacity who are determined

1 through independent assessment as meeting the program entrance
2 criteria. The contract rate must allow for full staffing and the
3 ability to accommodate the highest acuity cases. By March 1 of the
4 current fiscal year, the department shall submit to the report
5 recipients required in section 246 of this part a report on the
6 status of the program that includes the participating facilities
7 under the program, the number of children placed, and the program
8 types of the children placed.

9 (2) The department shall provide reports on a monthly basis to
10 the report recipients required in section 246 of this part on the
11 number of children awaiting placement in a child caring institution
12 in this state. The report must include the number of children
13 awaiting placement by child caring institution and must state the
14 reason for the delay in placement, including, but not limited to,
15 facility bed shortages, placement process delays, or other reasons.

16 Sec. 511. The department shall provide reports on a semiannual
17 basis to the senate and house appropriations subcommittees on the
18 department budget, the senate and house standing committees on
19 families and human services, and the senate and house fiscal
20 agencies and policy offices on the number and percentage of
21 children who received timely physical and mental health
22 examinations after entry into foster care. The reports shall also
23 include the new methods the department is using since June 14,
24 2022, to achieve the stated goal of the program as described in
25 this section. The goal of the program is that at least 85% of
26 children shall have an initial medical and mental health
27 examination within 30 days after entry into foster care.

28 Sec. 512. By March 1 of the current fiscal year, the
29 department shall submit a report to the report recipients required

1 in section 246 of this part on the following information for cases
2 of child abuse or child neglect from the previous fiscal year:

3 (a) The total number of relative care placements.

4 (b) The total number of relatives with a placement who became
5 licensed.

6 (c) A list of the reasons from a sample of cases where
7 relatives were denied foster home licensure as documented by the
8 department.

9 Sec. 513. (1) The department shall not expend funds
10 appropriated in part 1 to pay for the direct placement by the
11 department of a child in an out-of-state facility unless all of the
12 following conditions are met:

13 (a) There is no appropriate placement available in this state
14 as determined by the department's interstate compact office.

15 (b) An out-of-state placement exists that is nearer to the
16 child's home than the closest appropriate in-state placement as
17 determined by the department's interstate compact office.

18 (c) The out-of-state facility meets all of the licensing
19 standards of this state for a comparable facility.

20 (d) The out-of-state facility meets all of the applicable
21 licensing standards of the state in which it is located.

22 (e) The department has done an on-site visit to the out-of-
23 state facility, reviewed the facility records, reviewed licensing
24 records and reports on the facility, and believes that the facility
25 is an appropriate placement for the child.

26 (2) The department shall not expend money for a child placed
27 in an out-of-state facility without approval of the executive
28 director of the children's services agency.

29 (3) The department shall submit an annual report by March 1 of

1 the current fiscal year to the state court administrative office,
2 the house and senate appropriations subcommittees on the department
3 budget, the house and senate fiscal agencies, the house and senate
4 policy offices, and the state budget office on the number of
5 Michigan children residing in out-of-state facilities in the
6 previous fiscal year and shall include the total cost and average
7 per diem cost of these out-of-state placements to this state, and a
8 list of each such placement arranged by the Michigan county of
9 residence for each child.

10 Sec. 514. From the funds appropriated in part 1 for foster
11 care payments, the department shall allocate \$100.00 to establish a
12 statewide respite care services network available to licensed
13 foster parents and unlicensed relative caregivers caring for
14 children in foster care.

15 Sec. 515. If a child protective services caseworker requests
16 approval for another child protective services caseworker or other
17 department employee to accompany them on a home visit because the
18 caseworker believes it would be unsafe to conduct the home visit
19 alone, the department shall not deny the request.

20 Sec. 516. From funds appropriated in part 1 for child care
21 fund, the administrative or indirect cost payment equal to 10% of a
22 county's total monthly gross expenditures shall be distributed to
23 the county on a monthly basis and a county is not required to
24 submit documentation to the department for any of the expenditures
25 that are covered under the 10% payment as described in section
26 117a(4)(b)(ii) and (iv) of the social welfare act, 1939 PA 280, MCL
27 400.117a.

28 Sec. 517. The department may ask a state or private child
29 placing agency contracted by the receiving state to carry out

1 required visits and any additional visits that the department finds
2 necessary for a child placed in a family foster care home out of
3 state.

4 Sec. 518. The department shall submit a report to the report
5 recipients required in section 246 of this part by February 1 of
6 the current fiscal year on the annual child care fund expenditures
7 of in-home juvenile justice care that are eligible for the 75%
8 state and 25% local split. Eligible in-home expenses include
9 community-based juvenile supervision, services and related
10 practices, and per diem rates for the use of respite and shelter
11 for less than 30 days. The report must include the expenditures by
12 county, type of service provided, number of youth receiving care,
13 and number of days of care.

14 Sec. 519. The department shall permit any private agency that
15 has an existing contract with this state to provide foster care
16 services to be also eligible to provide treatment foster care
17 services.

18 Sec. 520. (1) The department shall submit a report to the
19 report recipients required in section 246 of this part by February
20 15 of the current fiscal year on the number of days of care and
21 expenditures by funding source for the previous fiscal year for
22 out-of-home placements by specific placement programs for child
23 abuse or child neglect and juvenile justice, including, but not
24 limited to, paid relative placement, department direct family
25 foster care, private agency supervised foster care, private child
26 caring institutions, county-supervised facilities, court-supervised
27 facilities, and independent living. The report shall also include
28 the number of days of care for department-operated residential
29 juvenile justice facilities by security classification.

1 (2) For the purposes of the report in subsection (1), living
2 arrangements include, but are not limited to, paid relative
3 placement, department direct family foster care, private agency
4 supervised foster care, private child caring institutions, county-
5 supervised facilities, court-supervised facilities, and independent
6 living.

7 Sec. 521. (1) From the funds appropriated in part 1 for child
8 care fund - indirect cost allotment, the department shall allocate
9 \$3,500,000.00 to counties and tribal governments that receive
10 reimbursements in part 1 from child care fund.

11 (2) The amount described in subsection (1) shall be
12 distributed to each county or tribal government in the same
13 proportion as indirect cost allotments are provided to counties in
14 the manner described in section 117a of the social welfare act,
15 1939 PA 280, MCL 400.117a.

16 Sec. 522. (1) From the funds appropriated in part 1 for youth
17 in transition, the department shall allocate \$750,000.00 for
18 scholarships through the fostering futures scholarship program in
19 the Michigan education trust to youths who were in foster care
20 because of child abuse or child neglect and are attending a college
21 or a career technical educational institution located in this
22 state. Of the funds appropriated, 100% shall be used to fund
23 scholarships for the youths described in this section.

24 (2) By June 1 of the current fiscal year, the department shall
25 provide a report to the report recipients required in section 246
26 of this part that includes the number of youths who applied for
27 scholarships under this section, the number of youths who received
28 scholarships under this section, the regions the recipients are
29 from by zip code, and the amount of each scholarship, and the total

1 amount of funds spent or encumbered in the current fiscal year.

2 Sec. 523. (1) By February 15 of the current fiscal year, the
3 department shall submit to the report recipients required in
4 section 246 of this part a report on the families first, family
5 reunification, and families together building solutions family
6 preservation programs. The report shall provide population and
7 outcome data based on contractually required follow-up evaluations
8 for families who received family preservation services and shall
9 include information for each program on any innovations that may
10 increase child safety and risk reduction.

11 (2) By October 1 of the current fiscal year, from the funds
12 appropriated in part 1 for family preservation services, the
13 department shall retain the rates established by the increase
14 provided in section 523(3) of article 6 of 2020 PA 166.

15 Sec. 524. As a condition of receiving funds appropriated in
16 part 1 for strong families/safe children, counties must submit the
17 service spending plan to the department by October 1 of the current
18 fiscal year for approval. The department shall approve the service
19 spending plan within 30 calendar days after receipt of a properly
20 completed service spending plan.

21 Sec. 525. The department shall implement the same on-site
22 evaluation processes for privately operated child welfare and
23 juvenile justice residential facilities as is used to evaluate
24 state-operated facilities. Penalties for noncompliance shall be the
25 same for privately operated child welfare and juvenile justice
26 residential facilities and state-operated facilities.

27 Sec. 526. From the funds appropriated in part 1 for court-
28 appointed special advocates, the department shall allocate
29 \$1,000,000.00 to fund a project with a nonprofit, community-based

1 organization organized under the laws of this state that are exempt
2 from federal income tax under section 501(c)(3) of the internal
3 revenue code of 1986, 26 USC 501, located in a charter township
4 with a population of between 18,000 and 19,000 according to the
5 most recent federal decennial census that is located in a county
6 with a population of between 600,000 and 700,000 according to the
7 most recent federal decennial census. The nonprofit organization
8 recipient shall have an existing network of affiliate programs
9 operating in at least 25 counties in this state. The nonprofit
10 organization shall use the funds to recruit, screen, train, and
11 supervise volunteers who provide advocacy services on behalf of
12 abused and neglected children.

13 Sec. 527. From the funds appropriated in part 1 for youth in
14 transition, the department shall allocate \$1,000,000.00 to support
15 transitional and housing costs for youth aging out of foster care
16 or the juvenile justice system.

17 Sec. 528. From the funds appropriated in part 1 for child care
18 fund, the department shall allocate \$2,366,700.00 to increase the
19 annual basic grant to counties with a population of less than
20 75,000 according to the most recent federal decennial census as
21 described in section 117e of the social welfare act, 1939 PA 280,
22 MCL 400.117e, and to eligible tribal entities. The basic grant
23 shall be increased from \$15,000.00 per year by equally distributing
24 the \$2,366,700.00 appropriated in part 1 to eligible counties and
25 tribal entities.

26 Sec. 529. From the funds appropriated in part 1 for family
27 preservation programs, the department shall maintain the total
28 combined funding levels of the families first, family
29 reunification, and families together building solutions family

1 preservation programs at an amount not less than the amount
2 provided as of September 30, 2021. For the current fiscal year as
3 the department moves towards implementation of the federal family
4 first prevention services act, Public Law 115-123, the funding
5 available to serve families through the existing family
6 preservation programs shall not be reduced.

7 Sec. 530. (1) All master contracts relating to foster care and
8 adoption services as funded by the appropriations in section 105 of
9 part 1 shall be performance-based contracts that employ a client-
10 centered results-oriented process that is based on measurable
11 performance indicators and desired outcomes and includes the annual
12 assessment of the quality of services provided.

13 (2) By February 1 of the current fiscal year, the department
14 shall provide the report recipients required in section 246 of this
15 part a report detailing measurable performance indicators, desired
16 outcomes, and an assessment of the quality of services provided by
17 the department during the previous fiscal year.

18 Sec. 531. The department shall notify the house and senate
19 appropriations subcommittees on the department budget, the house
20 and senate fiscal agencies, and the house and senate policy offices
21 of any changes to a child welfare master contract template,
22 including the adoption master contract template, the independent
23 living plus master contract template, the child placing agency
24 foster care master contract template, and the residential foster
25 care juvenile justice master contract template, not less than 30
26 days before the change takes effect.

27 Sec. 533. The department shall make payments to child placing
28 facilities for in-home and out-of-home care services and adoption
29 services within 30 days after receiving all necessary documentation

1 from those agencies. It is the intent of the legislature that the
2 burden of ensuring that these payments are made in a timely manner
3 and no payments are in arrears is on the department.

4 Sec. 534. The department shall submit to the report recipients
5 required in section 246 of this part, by March 1 of the current
6 fiscal year, a report on the adoption subsidies expenditures from
7 the previous fiscal year. The report shall include, but is not
8 limited to, the range of non-\$0.00 annual adoption support subsidy
9 amounts, for both title IV-E eligible cases and state-funded cases,
10 paid to adoptive families, the number of title IV-E and state-
11 funded cases, the number of cases in which the adoption support
12 subsidy request of adoptive parents for assistance was denied by
13 the department, and the number of adoptive parents who requested a
14 redetermination of adoption support subsidy.

15 Sec. 535. (1) From the funds appropriated in part 1 for foster
16 care payments, the department shall allocate up to \$1,500,000.00 of
17 private revenues from The New Foster Care Inc. to fund a 3-year
18 culturally competent kinship placement, support, and licensing
19 services pilot program in a county with a population between
20 1,200,000 and 1,300,000 according to the most recent federal
21 decennial census and a county with a population over 1,500,000
22 according to the most recent federal decennial census based on the
23 work conducted by A Second Chance Inc. The goal of the pilot
24 program is to increase the kinship licensure rate and reduce the
25 average length of stay for children in foster care with the intent
26 to expand the program statewide, contingent on legislative
27 appropriations. Efforts to reach this goal shall include the
28 following:

29 (a) Locate appropriate kinship family for out-of-home

1 placement of children.

2 (b) Provide support to kinship care providers and facilitate
3 connections to programs and services to assist them in meeting the
4 needs of children.

5 (c) Assist kinship care providers in meeting state foster
6 parent licensing requirements.

7 (d) Support parents to expedite permanency planning.

8 (2) Subject to part 1 appropriations and pursuant to an annual
9 evaluation, the department through legislative appropriations shall
10 reallocate any savings and revenue stemming from program services
11 that result in a reduction in the length of stay in foster care for
12 the children served by the program compared to the average and
13 maximize federal funds associated with this pilot program.

14 (3) The agency selected to administer the pilot program will
15 be selected with input from The New Foster Care, Inc. and approved
16 by the executive director of the children's services agency.

17 Sec. 536. By March 1 of the current fiscal year, the
18 department shall submit to the report recipients required in
19 section 246 of this part a report on the status of the department's
20 planned and achieved implementation of the federal family first
21 prevention services act, Public Law 115-123. The report shall
22 include, but not be limited to, an estimate of the 5-year spending
23 plan for administrative and compliance costs, a summary of all
24 historical expenditures made to date for implementation by line-
25 item appropriation and program type, information regarding
26 compliance with title IV-E prevention requirements, the status of
27 statewide compliance with the qualified residential treatment
28 program requirements, a summary of provider concerns with respect
29 to requirements under the qualified residential treatment program

1 as that term is defined in section 1 of 1973 PA 116, MCL 722.111, a
2 detailed methodology in determining any savings realized or
3 estimated from a reduction in congregate care or residential
4 placements, the department's conformity with federal model
5 licensing standards, the department's plan for tracking and
6 preventing child maltreatment deaths, and the department's plan for
7 extending John H. Chafee foster care independence programs up to
8 age 23.

9 Sec. 537. By March 1 of the current fiscal year, the
10 department shall submit to the report recipients required in
11 section 246 of this part a report on the number of unlicensed
12 relative providers with a relative placement denied a foster home
13 license for not meeting the standards established for state
14 licensing for foster care. The report shall also include the status
15 of title IV-E claims for foster care maintenance payments and
16 foster care administrative payments for licensed relative
17 caregivers with placements.

18 Sec. 538. By October 1 of the current fiscal year, the
19 department shall submit to the report recipients required in
20 section 246 of this part a report on the status of the department's
21 program improvement plan associated with round 3 of the child and
22 family services review (CFSR). The report shall also include, but
23 not be limited to, a specific and detailed plan to provide an
24 update on areas of substantial nonconformity identified in the CFSR
25 such as the inadequacy of caseworker training provided by the
26 department, the estimated costs necessary to reduce travel time for
27 service delivery to rural areas, plans to improve caseworker
28 engagement to reduce maltreatment in care, and steps undertaken by
29 the department to emphasize permanency in case planning.

1 Additionally, the department shall include the status for items
2 currently being implemented and the description and cost estimate
3 for the implementation for items that will be implemented in the
4 current fiscal year.

5 Sec. 539. The department, in collaboration with child placing
6 agencies, shall continue to comply with section 115o of the social
7 welfare act, 1939 PA 280, MCL 400.115o. Department caseworkers
8 responsible for preparing a recommendation to a court concerning a
9 juvenile placement shall provide, as part of the recommendation,
10 information regarding the requirements of section 115o of the
11 social welfare act, 1939 PA 280, MCL 400.115o.

12 Sec. 540. If a physician or psychiatrist who is providing
13 services to state or court wards placed in a residential facility
14 submits a formal request to the department to change the
15 psychotropic medication of a ward, the department shall, if the
16 ward is a state ward, make a determination on the proposed change
17 within 7 business days after the request or, if the ward is a
18 temporary court ward, seek parental consent within 7 business days
19 after the request. If parental consent is not provided within 7
20 business days, the department shall petition the court on the
21 eighth business day.

22 Sec. 541. The department shall explore the implementation of a
23 program to help foster care caseworkers achieve forgiveness for
24 their student loan debt. By July 1 of the current fiscal year, the
25 department shall submit to the report recipients required in
26 section 246 of this part a report on the department's findings.

27 Sec. 542. (1) The department shall develop strategies to use
28 the input from court-appointed special advocates and foster care
29 parents throughout case management and any legal proceedings for

1 abused and neglected children in foster care.

2 (2) By September 30 of the current fiscal year, the department
3 shall submit to the report recipients required in section 246 of
4 this part a report on the strategies developed by the department.

5 Sec. 543. The department shall develop a clear policy that
6 caseworkers ensure that children who are victims of child abuse or
7 child neglect have the ability either in the courtroom or in the
8 judge's chambers to speak directly to, or be interviewed by, the
9 judge or magistrate who is overseeing their case, in order to give
10 children the opportunity to provide input into the legal
11 proceedings.

12 Sec. 544. The department may require all foster care parents,
13 caseworkers, and guardians ad litem to receive trauma-informed
14 training that includes a human trafficking awareness component.

15 Sec. 546. (1) From the funds appropriated in part 1 for foster
16 care payments and from child care fund, the department shall pay
17 providers of general foster care, independent living, and trial
18 reunification services not less than a \$55.20 administrative rate.

19 (2) From the funds appropriated in part 1, the department
20 shall pay providers of independent living plus services statewide
21 per diem rates for staff-supported housing and host-home housing
22 based on proposals submitted in response to a solicitation for
23 pricing. The independent living plus program provides staff-
24 supported housing and services for foster youth 16 years of age
25 through 19 years of age who, because of their individual needs and
26 assessments, are not initially appropriate for general independent
27 living foster care.

28 (3) If required by the federal government to meet title IV-E
29 requirements, providers of foster care services shall submit

1 quarterly reports on expenditures to the department to identify
2 actual costs of providing foster care services.

3 (4) From the funds appropriated in part 1, the department
4 shall maintain rates that are no less than the rates in place on
5 October 1, 2022 provided to each private provider of residential
6 services.

7 Sec. 547. (1) From the funds appropriated in part 1 for the
8 guardianship assistance program, the department shall pay a minimum
9 rate that is not less than the approved age-appropriate payment
10 rates for youth placed in family foster care.

11 (2) The department shall submit a report on an annual basis to
12 the report recipients required in section 246 of this part with
13 quarterly data on the number of children enrolled in the
14 guardianship assistance and foster care - children with serious
15 emotional disturbance waiver programs.

16 Sec. 550. (1) The department shall not offset against
17 reimbursement payments to counties or seek reimbursement from
18 counties for charges that were received by the department more than
19 12 months before the department seeks to offset against
20 reimbursement. A county shall not request reimbursement for and
21 reimbursement payments shall not be paid for a charge that is more
22 than 12 months after the date of service or original status
23 determination when initially submitted by the county.

24 (2) All service providers shall submit a request for payment
25 within 12 months after the date of service. Any request for payment
26 submitted 12 months or more after the date of service requires the
27 provider to submit an exception request to the county or the
28 department for approval or denial.

29 (3) The county is not subject to any offset, chargeback, or

1 reimbursement liability for prior expenditures resulting from an
2 error in foster care fund source determinations.

3 Sec. 551. The department shall respond to counties within 30
4 days regarding any request for a clarification requested through
5 the department's child care fund management unit email address.

6 Sec. 552. Sixty days after a county's child care fund on-site
7 review is completed, including the receipt of all requested
8 documentation from the county, the department shall provide the
9 results of the review to the county. The department shall not
10 evaluate the relevancy, quality, effectiveness, efficiency, or
11 impact of the services provided to youth of the county's child care
12 fund programs in the review. Pursuant to state law, the department
13 shall not release the results of the review to a third-party
14 without the permission of the county being reviewed.

15 Sec. 554. From the funds appropriated in part 1 for foster
16 care payments, the department shall allocate \$50,000.00 to a
17 nonprofit organization organized under the laws of this state that
18 is exempt from federal income tax under section 501(c)(3) of the
19 internal revenue code of 1986, 26 USC 501, that currently has
20 locations in 3 cities and operates on a 100% volunteer basis with a
21 board of directors consisting of up to 15 members, and are a
22 dedicated community of individuals that give their time, talent,
23 and resources to provide the best quality shopping environment they
24 can to local children in need and provide clothing, shoes, toys,
25 linens, nursery furniture, strollers, car seats, school supplies,
26 hygiene products, and safety equipment to local foster children and
27 their families free of charge.

28 Sec. 556. From the funds appropriated in part 1 for child
29 welfare licensing, the department shall work to develop and

1 implement a simpler and more streamlined process for the annual
2 renewal of the license for family foster care homes, and shall
3 explore the development of a simpler and more efficient version of
4 the application form for renewal of the license for family foster
5 care homes.

6 Sec. 557. If a vehicle that is owned by the state is available
7 and not scheduled for use by other state workers, the department
8 may consider it an allowable use of the vehicle for a child
9 protective services caseworker or a foster care caseworker to drive
10 it to foster home visits or to drive it to their own home if it
11 would be helpful to the worker in conducting their work.

12 Sec. 560. From funds appropriated in part 1 for foster care
13 payments, the department shall allocate \$100,000.00 to reimburse
14 children in foster care for the costs of extracurricular
15 activities, including, but not limited to, athletics, music, band,
16 drama, and other enrichment activities.

17 Sec. 562. The department shall provide time and travel
18 reimbursements for foster parents who transport a foster child to
19 parent-child visitations. As part of the foster care parent
20 contract, the department shall provide written confirmation to
21 foster parents that states that the foster parents have the right
22 to request these reimbursements for all parent-child visitations.
23 The department shall provide these reimbursements within 60 days
24 after receiving a request for eligible reimbursements from a foster
25 parent.

26 Sec. 564. (1) The department shall maintain a clear policy for
27 parent-child visitations. The local county offices, caseworkers,
28 and supervisors shall meet an 85% success rate, after accounting
29 for factors outside of the caseworkers' control.

1 (2) Per the court-ordered number of required meetings between
2 caseworkers and a parent, the caseworkers shall achieve a success
3 rate of 85%, after accounting for factors outside of the
4 caseworkers' control.

5 (3) By March 1 of the current fiscal year, the department
6 shall provide to the report recipients required in section 246 of
7 this part a report on the following:

8 (a) The percentage of success rate for parent-child
9 visitations and court-ordered required meetings between caseworkers
10 referenced in subsections (1) and (2) for the previous year.

11 (b) The barriers to achieve the success rates in subsections
12 (1) and (2) and how this information is tracked.

13 Sec. 567. The department shall submit to the report recipients
14 required in section 246 of this part, by March 1 of the current
15 fiscal year, a report on the transfer of medical passports for
16 children in foster care, including the following:

17 (a) From the total medical passports transferred, the
18 percentage that transferred within 2 weeks after the date of
19 placement or return to the home.

20 (b) From the total school records, the percentage that
21 transferred within 2 weeks after the date of placement or return to
22 the home.

23 (c) The implementation steps that have been taken to improve
24 the outcomes for the measures in subdivision (a).

25 Sec. 568. (1) The department shall ensure youths transitioning
26 out of foster care are given assistance with obtaining a driver
27 license or state identification card and are issued a copy of their
28 Social Security number as required by department policy. Assistance
29 must be provided to youths who are eligible to obtain a driver

1 license or state identification card and a Social Security card
2 based on the youth's citizenship and legal residency status.

3 (2) The department shall provide a report by April 1 of the
4 current fiscal year to the report recipients required in section
5 246 of this part on the number of youths who received assistance
6 obtaining a driver license or state identification card, the number
7 of youths who received assistance obtaining a Social Security card,
8 the number of youths eligible for assistance who did not receive
9 it, and an explanation as to why those youths did not receive
10 assistance in obtaining the documents.

11 Sec. 569. The department shall reimburse private child placing
12 agencies that complete adoptions at the rate according to the date
13 on which the petition for adoption and required support
14 documentation was accepted by the court and not according to the
15 date the court's order placing for adoption was entered.

16 Sec. 574. (1) From the funds appropriated in part 1 for foster
17 care payments, \$1,375,000.00 is allocated to support family
18 incentive grants to private and community-based foster care service
19 providers to assist with home improvement items needed to ensure
20 compliance with licensing rule requirements, including, but not
21 limited to, payment for physical exams needed by foster families
22 and to alleviate potential safety concerns for unlicensed relatives
23 caring for a family member through the child welfare system to
24 accommodate children in foster care.

25 (2) By March 1 of the current fiscal year, the department
26 shall submit to the report recipients required in section 246 of
27 this part a report on the total amount expended in the previous
28 fiscal year for grants to private and community-based foster care
29 service providers for home improvements or physical exams as

1 referenced in subsection (1) and the number of grants issued.

2 Sec. 575. From the funds appropriated in part 1 for children's
3 services administration, the department shall allocate \$200,000.00
4 to provide support and coordinated services to the kinship
5 caregiver advisory council. The responsibilities of the council may
6 include all of the following:

7 (a) Establish a public awareness campaign to educate the
8 public about kinship caregivers and the state's efforts to better
9 serve kinship caregivers.

10 (b) Consult and coordinate with the kinship caregiver
11 navigator program to collect aggregate data on individuals being
12 served by the kinship caregiver navigator program, including
13 information on what services these individuals need.

14 (c) Consult and collaborate with the provider of the kinship
15 caregiver navigator program on the design and administration of
16 that program.

17 (d) Establish, maintain, and update a list of local support
18 groups and programs that provide services to kinship families, and
19 devise a plan of action for engaging with the groups and programs
20 on the list in order to obtain a better understanding of the issues
21 facing kinship families.

22 (e) Develop methods to promote and improve collaboration
23 between state, county, and local governments and agencies and
24 private stakeholders to obtain a broad understanding of the
25 characteristics and prevalence of kinship caregiving, to improve
26 service delivery, and to include these in the council's
27 recommendations.

28 Sec. 579. The department shall require caseworkers ensure a
29 motion is filed with the court to request that children who are

1 victims of child abuse or child neglect have court redetermination
2 hearings more frequently than every 90 days when in the best
3 interest of the child. The intent of this language is to decrease
4 the time it will take for permanency to be finalized for the child.

5 Sec. 581. From the funds appropriated in part 1 for foster
6 care payments, the department shall allocate \$50,000.00 for
7 caseworkers to provide immediate assistance with urgent needs,
8 including, but not limited to, food and clothing, for children on
9 removal from their home or other dangerous environment, including
10 children who are victims of human trafficking. The department shall
11 adhere to the relevant policies for the use and access to these
12 funds.

13 Sec. 583. By March 1 of the current fiscal year, the
14 department shall provide to the report recipients required in
15 section 246 of this part a report that includes all of the
16 following:

17 (a) The number and percentage of foster parents that dropped
18 out of the program in the previous fiscal year, the reasons the
19 foster parents left the program, and how those figures compare to
20 prior fiscal years.

21 (b) The number and percentage of foster parents successfully
22 retained in the previous fiscal year and how those figures compare
23 to prior fiscal years.

24 Sec. 585. The department shall make available at least 1 pre-
25 service training class each month in which new caseworkers for
26 private foster care and adoption agencies can enroll.

27 Sec. 588. (1) Concurrently with public release, the department
28 shall transmit all reports from the court-appointed settlement
29 monitor, including, but not limited to, the needs assessment and

1 period outcome reporting, to the state budget office, the senate
2 and house appropriations subcommittees on the department budget,
3 and the senate and house fiscal agencies and policy offices,
4 without revision.

5 (2) By October 1 of the current fiscal year, the department
6 shall submit to the report recipients required in section 246 of
7 this part a detailed plan that will terminate and dismiss with
8 prejudice the settlement by September 30 of the current fiscal
9 year.

10 Sec. 589. (1) From the funds appropriated in part 1 for child
11 care fund, the department shall pay 100% of the administrative rate
12 for all new cases referred to providers of foster care services.

13 (2) On a quarterly basis, the department shall submit a report
14 on the monthly number of all foster care cases administered by the
15 department and all foster care cases administered by private
16 providers to the report recipients required in section 246 of this
17 part.

18 Sec. 592. The department shall submit quarterly reports to the
19 report recipients required in section 246 of this part that include
20 data from children's protective services staff for each of the
21 following for the most recent 30-day period before the report is
22 submitted:

23 (a) The percent of investigations commenced within 24 hours
24 after receiving a report.

25 (b) The percent of central registry reviews performed for
26 required individuals.

27 (c) The percent of face-to-face contacts made within the
28 established timeframe required by the department.

29 (d) In appropriate cases, the percent of sibling placement

1 evaluations completed when 1 or more children remain in the home
2 after a child has been removed.

3 (e) The percent of supervisory reviews performed in a timely
4 manner.

5 (f) The results of a department survey of child protective
6 services investigators on the number of investigators who are
7 concerned for their own personal safety.

8 (g) The percent of investigators using the mobile application
9 or other tool to document compliance.

10 Sec. 593. The department shall conduct an annual review in
11 each county to determine if the county has adopted and implemented
12 standard child abuse and child neglect investigation and interview
13 protocols as required in section 8(6) of the child protection law,
14 1975 PA 238, MCL 722.628.

15 Sec. 594. From the funds appropriated in part 1 for foster
16 care payments, the department shall support regional resource teams
17 to provide for the recruitment, retention, and training of foster
18 and adoptive parents and shall expand the Michigan youth
19 opportunities initiative to all Michigan counties. The purpose of
20 this funding is to increase the number of annual inquiries from
21 prospective foster parents, increase the number of nonrelative
22 foster homes that achieve licensure each year, increase the annual
23 retention rate of nonrelative foster homes, reduce the number of
24 older foster youth placed outside of family settings, and provide
25 older youth with enhanced support in transitioning to adulthood.

26 Sec. 598. Partial child care fund reimbursements to counties
27 for undisputed charges must be made within 45 business days after
28 the receipt of the required forms and documentation. The department
29 shall commence activity to investigate and resolve a disputed

1 reimbursement charge from a county within 15 business days after
2 receiving the request for reimbursement. The activity to
3 investigate and resolve a disputed reimbursement request may
4 include, but is not limited to, the use of a formal appeals
5 process, pursuant to statute and department chargeback policy. The
6 department shall reimburse for corrected charges within 45 business
7 days after a properly corrected submission by the county.

8

9 **PUBLIC ASSISTANCE**

10 Sec. 601. Whenever a client agrees to the release of the
11 client's name and address to the local housing authority, the
12 department shall request from the local housing authority
13 information regarding whether the housing unit for which vendoring
14 has been requested meets applicable local housing codes. Vendoring
15 shall be terminated for those units that the local authority
16 indicates in writing do not meet local housing codes until the
17 local authority indicates in writing that local housing codes have
18 been met.

19 Sec. 602. The department shall conduct a full evaluation of an
20 individual's assistance needs if the individual has applied for
21 disability more than 1 time within a 1-year period.

22 Sec. 603. For any change in the income of a recipient of the
23 food assistance program, the family independence program, or state
24 disability assistance that results in a benefit decrease, the
25 department must notify the affected recipient of the decrease in
26 benefits amount no later than 15 work days before the first day of
27 the month in which the change takes effect.

28 Sec. 604. (1) From the funds appropriated in part 1 for state
29 disability assistance payments, the department shall operate a

1 state disability assistance program. Except as provided in
2 subsection (3), persons eligible for this program shall include
3 needy citizens of the United States or aliens exempted from the
4 supplemental security income citizenship requirement who are at
5 least 18 years of age or emancipated minors who meet 1 or more of
6 the following requirements:

7 (a) Is a recipient of supplemental security income, social
8 security, or medical assistance due to disability or 65 years of
9 age or older.

10 (b) Is an individual with a physical or mental impairment that
11 meets federal supplemental security income disability standards,
12 except that the minimum duration of the disability shall be 90
13 days. Substance use disorder alone is not defined as a basis for
14 eligibility.

15 (c) Is a resident of an adult foster care facility, a home for
16 the aged, a county infirmary, or a substance use disorder treatment
17 center.

18 (d) Is an individual receiving 30-day post-residential
19 substance use disorder treatment.

20 (e) Is an individual diagnosed as having AIDS.

21 (f) Is an individual receiving special education services
22 through a local intermediate school district.

23 (g) Is a caretaker of a disabled individual who meets the
24 requirements specified in subdivision (a), (b), (e), or (f).

25 (2) Applicants for and recipients of the state disability
26 assistance program shall be considered needy if they do both of the
27 following:

28 (a) Meet the same asset test as is applied for the family
29 independence program.

1 (b) Have a monthly budgetable income that is less than the
2 payment standards.

3 (3) Except for an individual described in subsection (1)(c) or
4 (d), an individual is not disabled for purposes of this section if
5 the individual's drug addiction or alcoholism is a contributing
6 factor material to the determination of disability. "Material to
7 the determination of disability" means that, if the individual
8 stopped using drugs or alcohol, the individual's remaining physical
9 or mental limitations would not be disabling. If the individual's
10 remaining physical or mental limitations would be disabling, then
11 the drug addiction or alcoholism is not material to the
12 determination of disability and the individual may receive state
13 disability assistance. Such an individual must actively participate
14 in a substance abuse treatment program, and the assistance must be
15 paid to a third party or through vendor payments. For purposes of
16 this section, substance abuse treatment includes receipt of
17 inpatient or outpatient services or participation in alcoholics
18 anonymous or a similar program.

19 Sec. 605. The level of reimbursement provided to state
20 disability assistance recipients in licensed adult foster care
21 facilities shall be the same as the prevailing supplemental
22 security income rate under the personal care category.

23 Sec. 606. County department offices shall require each
24 recipient of family independence program and state disability
25 assistance who has applied with the Social Security Administration
26 for supplemental security income to sign a contract to repay any
27 assistance rendered through the family independence program or
28 state disability assistance program on receipt of retroactive
29 supplemental security income benefits.

1 Sec. 607. (1) The department's ability to satisfy
2 appropriation deductions in part 1 for state disability
3 assistance/supplemental security income recoveries and public
4 assistance recoupment revenues shall not be limited to recoveries
5 and accruals pertaining to state disability assistance, or family
6 independence assistance grant payments provided only in the current
7 fiscal year, but may include revenues collected during the current
8 year that are prior year related and not a part of the department's
9 accrued entries.

10 (2) The department may use supplemental security income
11 recoveries to satisfy the deduct in any line in which the revenues
12 are appropriated, regardless of the source from which the revenue
13 is recovered.

14 Sec. 608. Adult foster care facilities providing domiciliary
15 care or personal care to residents receiving supplemental security
16 income or homes for the aged serving residents receiving
17 supplemental security income shall not require those residents to
18 reimburse the home or facility for care at rates in excess of those
19 legislatively authorized. To the extent permitted by federal law,
20 adult foster care facilities and homes for the aged serving
21 residents receiving supplemental security income are not prohibited
22 from accepting third-party payments in addition to supplemental
23 security income if the payments are not for food, clothing,
24 shelter, or result in a reduction in the recipient's supplemental
25 security income payment.

26 Sec. 609. The state supplementation level under the
27 supplemental security income program for the personal care/adult
28 foster care and home for the aged categories shall not be reduced
29 during the current fiscal year. The legislature shall be notified

1 not less than 30 days before any proposed reduction in the state
2 supplementation level.

3 Sec. 610. (1) In developing good cause criteria for the state
4 emergency relief program, the department shall grant exemptions if
5 the emergency resulted from unexpected expenses related to
6 maintaining or securing employment.

7 (2) For purposes of determining housing affordability
8 eligibility for state emergency relief, a group is considered to
9 have sufficient income to meet ongoing housing expenses if their
10 total housing obligation does not exceed 75% of their total net
11 income.

12 (3) State emergency relief payments shall not be made to
13 individuals who have been found guilty of fraud in regard to
14 obtaining public assistance.

15 (4) State emergency relief payments shall not be made
16 available to persons who are out-of-state residents or illegal
17 immigrants.

18 (5) State emergency relief payments for rent assistance shall
19 be distributed directly to landlords and shall not be added to
20 Michigan bridge cards.

21 Sec. 611. The state supplementation level under the
22 supplemental security income program for the living independently
23 or living in the household of another categories shall not exceed
24 the minimum state supplementation level as required under federal
25 law or regulations.

26 Sec. 613. (1) The department shall provide reimbursements for
27 the final disposition of indigent persons. The reimbursements shall
28 include all of the following:

29 (a) The maximum allowable reimbursement for the final

1 disposition is \$840.00.

2 (b) The adult burial with services allowance is \$765.00.

3 (c) The adult burial without services allowance is \$530.00.

4 (d) The infant burial allowance is \$210.00.

5 (2) Reimbursement for a cremation permit fee of up to \$75.00
6 and for mileage at the standard rate will be made available for an
7 eligible cremation. The reimbursements under this section shall
8 take into consideration religious preferences that prohibit
9 cremation.

10 (3) The department shall submit a report to the report
11 recipients required in section 246 of this part by January 31 of
12 the current fiscal year on burial services payments issued from the
13 state emergency relief program during the previous fiscal year. The
14 report shall include the number of payments by burial services
15 category for the following:

16 (a) Fetus or infant under age 1 month.

17 (b) Burial with memorial service.

18 (c) Burial without memorial service.

19 (d) Cremation with memorial service.

20 (e) Cremation without memorial service.

21 (f) Transportation of a donated or unclaimed body being
22 cremated.

23 (g) Cremation permit fee for an unclaimed body.

24 (h) Disposition of an unclaimed body.

25 (i) Payment where an irrevocable funeral agreement exists.

26 (j) An unclaimed body received by a university.

27 Sec. 614. The department shall submit a report to the report
28 recipients required in section 246 of this part by January 15 of
29 the current fiscal year on the number and percentage of state

1 disability assistance recipients who were determined to be eligible
2 for federal supplemental security income benefits in the previous
3 fiscal year.

4 Sec. 615. Except as required by federal law or regulations,
5 funds appropriated in part 1 shall not be used to provide public
6 assistance to an individual who is not a United States citizen,
7 permanent resident alien, or refugee. This section does not
8 prohibit the department from entering into contracts with food
9 banks, emergency shelter providers, or other human services
10 agencies who may, as a normal part of doing business, provide food
11 or emergency shelter.

12 Sec. 616. The department shall require retailers that
13 participate in the electronic benefits transfer program to charge
14 no more than \$2.50 in fees for cash back as a condition of
15 participation.

16 Sec. 619. The department shall not deny title IV-A assistance
17 and food assistance benefits under 21 USC 862a to any individual
18 who has been convicted of a felony that included the possession,
19 use, or distribution of a controlled substance, for which the act
20 that resulted in the conviction occurred after August 22, 1996, if
21 the individual is not in violation of the individual's probation or
22 parole requirements.

23 Sec. 620. (1) The department shall make a determination of
24 Medicaid eligibility not later than 90 days after completion of a
25 Medicaid application if disability is an eligibility factor. For
26 all other Medicaid applicants, including patients of a nursing
27 home, the department shall make a determination of Medicaid
28 eligibility within 45 days after application.

29 (2) The department shall provide a semiannual report to the

1 report recipients required in section 246 of this part on the
2 number of recipients who were ineligible for Medicaid after
3 Medicaid eligibility redeterminations resumed after federal
4 continuous enrollment requirements. The report must include, in a
5 monthly data format, the number of recipients who had their
6 eligibility examined directly, through an ex parte eligibility
7 process, or through passive eligibility process. The report must
8 also include all baseline and monthly reports provided to CMS for
9 unwinding data reporting and the number of recipients who did not
10 respond to department contact through eligibility outreach or data
11 requests.

12 Sec. 645. An individual or family is considered homeless, for
13 purposes of eligibility for state emergency relief, if living
14 temporarily with others in order to escape domestic violence. For
15 purposes of this section, domestic violence is defined and verified
16 in the same manner as in the department's policies on good cause
17 for not cooperating with child support and paternity requirements.

18 Sec. 653. From the funds appropriated in part 1 for food
19 assistance program benefits, an individual who is the victim of
20 domestic violence or human trafficking and does not qualify for any
21 other exemption may be exempt from the 3-month in 36-month limit on
22 receiving food assistance under 7 USC 2015. This exemption can be
23 extended an additional 3 months on demonstration of continuing
24 need.

25 Sec. 654. The department shall notify recipients of food
26 assistance program benefits that their benefits can be spent with
27 their bridge cards at many farmers' markets in the state. The
28 department shall also notify recipients about the Double Up Food
29 Bucks program that is administered by the Fair Food Network.

1 Recipients shall receive information about the Double Up Food Bucks
2 program, including information that when the recipient spends
3 \$20.00 at participating farmers' markets through the program, the
4 recipient can receive an additional \$20.00 to buy Michigan produce.

5 Sec. 655. Within 14 days after the spending plan for low-
6 income home energy assistance program is approved by the state
7 budget office, the department shall provide the spending plan,
8 including itemized projected expenditures and itemized expenditures
9 for the previous fiscal year, to the chairpersons of the senate and
10 house appropriations subcommittees on the department budget, the
11 senate and house fiscal agencies, the senate and house policy
12 offices, and the state budget office.

13 Sec. 660. From the funds appropriated in part 1 for Food Bank
14 Council of Michigan, the department shall allocate \$12,045,000.00
15 for the procurement and distribution of the Michigan agricultural
16 surplus system to distribute surplus produce to low-income
17 residents of this state.

18 Sec. 669. From the funds appropriated in part 1 for family
19 independence program - clothing allowance, the department shall
20 allocate \$10,000,000.00 for the annual clothing allowance. The
21 allowance shall be granted to all eligible children in a family
22 independence program group.

23 Sec. 670. From the funds appropriated in part 1 for food
24 assistance benefits - state supplementation, the department shall
25 allocate \$5,000,000.00 to food assistance program groups that
26 experienced a reduction in federal food assistance benefits due to
27 the cessation of pandemic-related increases. This supplementation
28 benefit is available only to food assistance program benefit groups
29 with an income that is at or below 50% of the federal poverty level

1 or a food assistance program benefit group with an individual at or
2 above 65 years of age with an income at or below 100% of the
3 federal poverty level.

4 Sec. 672. (1) The department's office of inspector general
5 shall submit a report to the report recipients required in section
6 246 of this part by February 15 of the current fiscal year on
7 department efforts to reduce inappropriate use of Michigan bridge
8 cards and food assistance program trafficking. The department shall
9 provide information on the number of recipients of services who
10 used their Michigan bridge card inappropriately and the current
11 status of each case, the number of recipients whose benefits were
12 revoked, whether permanently or temporarily, as a result of
13 inappropriate use, and the number of retailers that were fined or
14 removed from the electronic benefit transfer program for permitting
15 inappropriate use of the cards. The report shall also include the
16 number of Michigan bridge card trafficking instances and overall
17 welfare fraud referrals that includes such information as the
18 number of investigations completed, fraud and intentional program
19 violation dollar amounts identified, the number of referrals to
20 prosecutors, the number of administrative hearing referrals and
21 waivers, and the number of program disqualifications imposed. The
22 report shall distinguish between savings and cost avoidance.
23 Savings include receivables established from instances of fraud
24 committed. Cost avoidance includes expenditures avoided due to
25 front-end eligibility investigations and other preemptive actions
26 undertaken in the prevention of fraud.

27 (2) If a fourth Michigan bridge card has been issued in a 12-
28 month period, the department shall notify the household that they
29 have reached the number of issued cards threshold. At their fifth

1 and each subsequent card replacement request, a card will not be
2 issued until the recipient has spoken directly to the local office
3 district manager or county director. The district manager or county
4 director may issue a new Michigan bridge card under their authority
5 based on their assessment of the recipient's situation and
6 explanation.

7 (3) As used in this section:

8 (a) "Food assistance trafficking" means the buying and selling
9 of food assistance benefits for cash or items not authorized under
10 7 USC 2036b.

11 (b) "Inappropriate use" means not used to meet a family's
12 ongoing basic needs, including food, clothing, shelter, utilities,
13 household goods, personal care items, and general incidentals.

14 Sec. 677. The department shall establish a state goal for the
15 percentage of family independence program cases involved in
16 employment activities. The percentage established shall not be less
17 than 50%. The goal for long-term employment shall be 15% of cases
18 for 6 months or more.

19 Sec. 678. From the funds appropriated in part 1 for family
20 independence program - small child supplemental payment, the
21 department shall provide a \$300.00 supplement semiannually for
22 every child under 6 years of age to families receiving cash
23 assistance for the current fiscal year.

24 Sec. 686. (1) The department shall confirm that individuals
25 presenting personal identification issued by another state seeking
26 assistance through the family independence program, food assistance
27 program, state disability assistance program, or medical assistance
28 program are not receiving benefits from any other state.

29 (2) The department shall confirm the address provided by any

1 individual seeking family independence program benefits or state
2 disability assistance benefits.

3 (3) The department shall prohibit individuals with property
4 assets assessed at a value higher than \$200,000.00 from accessing
5 assistance through department-administered programs, unless such a
6 prohibition would violate federal rules and guidelines.

7 (4) The department shall make a reasonable attempt to obtain
8 an up-to-date telephone number during the eligibility determination
9 or redetermination process for individuals seeking medical
10 assistance benefits.

11 Sec. 687. (1) The department shall, in quarterly reports,
12 compile and make available on its website all of the following
13 information about the family independence program, state disability
14 assistance, the food assistance program, Medicaid, and state
15 emergency relief:

16 (a) The number of applications received.

17 (b) The number of applications approved.

18 (c) The number of applications denied.

19 (d) The number of applications pending and neither approved
20 nor denied.

21 (e) The number of cases opened.

22 (f) The number of cases closed.

23 (g) The number of cases at the beginning of the quarter and
24 the number of cases at the end of the quarter.

25 (2) The information provided under subsection (1) shall be
26 compiled and made available for the state as a whole and for each
27 county and reported separately for each program listed in
28 subsection (1).

29 (3) The department shall, in quarterly reports, compile and

1 make available on its website the following family independence
2 program information:

3 (a) The number of new applicants who successfully met the
4 requirements of the 10-day assessment period for PATH.

5 (b) The number of new applicants who did not meet the
6 requirements of the 10-day assessment period for PATH.

7 (c) The number of cases sanctioned because of the school
8 truancy policy.

9 (d) The number of cases closed because of the 48-month and 60-
10 month lifetime limits.

11 (e) The number of first-, second-, and third-time sanctions.

12 (f) The number of children 0-5 years of age living in family
13 independence program-sanctioned households.

14 Sec. 688. From the funds appropriated in part 1 for the low-
15 income home energy assistance program, the department shall make an
16 additional \$20.01 payment to each food assistance program case that
17 is not currently eligible for the standard utility allowance to
18 enable each case to receive expanded food assistance benefits
19 through the program commonly known as the heat and eat program.

20

21 **CHILDREN'S SERVICES AGENCY - JUVENILE JUSTICE**

22 Sec. 701. Unless required from changes to federal or state law
23 or at the request of a provider, the department shall not alter the
24 terms of any signed contract with a private residential facility
25 serving children under state or court supervision without written
26 consent from a representative of the private residential facility.

27 Sec. 706. Counties shall be subject to 50% chargeback for the
28 use of alternative regional detention services, if those detention
29 services do not fall under the basic provision of section 117e of

1 the social welfare act, 1939 PA 280, MCL 400.117e, or if a county
2 operates those detention services programs primarily with
3 professional rather than volunteer staff.

4 Sec. 707. In order to be reimbursed for child care fund
5 expenditures, counties are required to submit department-developed
6 reports to enable the department to document potential federally
7 claimable expenditures. This requirement is in accordance with the
8 reporting requirements specified in section 117a(12) of the social
9 welfare act, 1939 PA 280, MCL 400.117a.

10 Sec. 708. (1) As a condition of receiving funds appropriated
11 in part 1 for the child care fund line item, by October 15 of the
12 current fiscal year, counties shall have an approved service
13 spending plan for the current fiscal year. Counties must submit the
14 service spending plan for the following fiscal year to the
15 department by August 15 of the current fiscal year for approval. On
16 submission of the county service spending plan, the department
17 shall approve within 30 calendar days after receipt of a properly
18 completed service plan that complies with the requirements of the
19 social welfare act, 1939 PA 280, MCL 400.1 to 400.119b. The
20 department shall notify and submit county service spending plan
21 revisions to any county whose county service spending plan is not
22 accepted on initial submission. The department shall not request
23 any additional revisions to a county service spending plan outside
24 of the requested revision notification submitted to the county by
25 the department. The department shall notify a county within 30 days
26 after approval that its service plan was approved.

27 (2) Counties must submit amendments to current fiscal year
28 county service plans to the department no later than August 30.
29 Counties must submit current fiscal year payable estimates to the

1 department no later than September 15.

2 (3) The department shall submit a report to the report
3 recipients required in section 246 of this part by February 15 of
4 the current fiscal year on the number of counties that fail to
5 submit a service spending plan by August 15 of the previous fiscal
6 year and the number of service spending plans not approved by
7 October 15. The report shall include the number of county service
8 spending plans that were not approved as first submitted by the
9 counties, as well as the number of plans that were not approved by
10 the department after being resubmitted by the county with the first
11 revisions that were requested by the department.

12 Sec. 709. The department's master contract for juvenile
13 justice residential foster care services shall prohibit contractors
14 from denying a referral for placement of a youth, or terminating a
15 youth's placement, if the youth's assessed treatment needs are in
16 alignment with the facility's residential program type, as
17 identified by the court or the department. In addition, the master
18 contract shall require that youth placed in juvenile justice
19 residential foster care facilities must have regularly scheduled
20 treatment sessions with a licensed psychologist or a psychiatrist,
21 or both, and access to the licensed psychologist or a psychiatrist
22 as needed.

23 Sec. 715. (1) As a condition of receiving funds appropriated
24 in part 1 for raise the age fund, by deadlines established and
25 advised by the department, counties or tribal entities shall have
26 an approved raise the age fund budget plan for the following fiscal
27 year. Counties must submit the raise the age fund budget plan for
28 the current fiscal year to the department by February 1 of the
29 current fiscal year. The raise the age fund budget plan shall

1 specifically identify the types of costs to be reimbursed,
2 estimated costs for each item, and the total estimated cost to be
3 reimbursed. The types of costs to be reimbursed must comply with
4 the requirements of section 117i of the social welfare act, 1939 PA
5 280, MCL 400.117i. \$500,000.00 of the raise the age fund shall be
6 reserved for tribal entities. If total raise the age fund requests
7 from tribal entities are less than \$500,000.00, the funding may be
8 allocated to meet requests from counties. From the funds
9 appropriated in part 1 for raise the age fund, each county and
10 tribal entity eligible for reimbursement shall receive a minimum
11 \$10,000.00 allocation from the raise the age fund.

12 (2) County and tribal entity reimbursement from the raise the
13 age fund is limited to eligible youth and items specifically
14 identified in approved raise the age fund budget plans and shall
15 not exceed the total estimated cost included in the approved raise
16 the age fund budget plan.

17 (3) Counties must submit current fiscal year payable estimates
18 for raise the age funds to the department by deadlines established
19 and advised by the department. Counties and tribal entities must
20 submit amendments to current fiscal year raise the age fund budget
21 plans by deadlines established and advised by the department.

22 (4) As used in this section, "eligible youth" includes both of
23 the following:

24 (a) Pre-adjudication eligible youth: A youth for whom a
25 petition has been filed alleging the commission of a status or
26 criminal offense on or after reaching 17 years of age, but before
27 reaching 18 years of age.

28 (b) Post-adjudication eligible youth: A youth who has been
29 adjudicated for a status or criminal offense for which a petition

1 was filed alleging the commission of a status or criminal offense
2 on or after reaching 17 years of age, but before reaching 18 years
3 of age.

4
5 **LOCAL OFFICE OPERATIONS AND SUPPORT SERVICES**

6 Sec. 801. (1) The department shall submit a monthly report to
7 the report recipients required in section 246 of this part on the
8 most recent food assistance program error rate derived from the
9 active cases, reported to the United States Department of
10 Agriculture - Food and Nutrition Services for the supplemental
11 nutrition assistance program.

12 (2) The department shall submit a report by April 1 to the
13 report recipients required in section 246 of this part on the
14 corrective action plan undertaken to lower food assistance program
15 error rates. The report must include the 10 local offices in the
16 prior fiscal year with the highest error rates and list the
17 specific actions and remedies undertaken in those offices. The
18 report must include the error rate by each local office, by month,
19 prior to an intervention, and then the monthly error rate for each
20 month after any intervention. The report must also include the
21 status of each local office that received a 4-month
22 precertification case read intervention completed by central office
23 staff in the prior fiscal year. The status update must include a
24 list of each local office that received the 4-month
25 precertification case reads and the measurements undertaken by the
26 department to ensure that the corrective action plans were
27 implemented and led to food assistance error rate decreases.

28 Sec. 802. From the funds appropriated in part 1 for local
29 office staff travel, the department shall allocate up to

1 \$100,000.00 annually toward reimbursing the out-of-pocket costs of
2 county board members and county department directors to attend
3 statewide meetings of the Michigan County Social Services
4 Association.

5 Sec. 805. (1) From the funds appropriated in part 1 for
6 critical health and wellness center operations, the department
7 shall allocate \$100.00 to operate a health and wellness hub located
8 in a county with a population between 66,600 and 66,700 according
9 to the most recent federal decennial census that includes an FQHC
10 located on-site. The health and wellness hub shall provide health
11 services and child care services in a manner that increases access
12 to affordable services.

13 (2) With the funding described in this section, \$50.00 shall
14 be allocated to a nonprofit organization organized under the laws
15 of this state that is exempt from federal income tax under section
16 501(c)(3) of the internal revenue code of 1986, 26 USC 501, located
17 in a county with a population between 600,000 and 700,000 according
18 to the most recent federal decennial census.

19 (3) With the funding described in this section, \$50.00 shall
20 be allocated to an FQHC that operates in 6 counties in this state
21 and with the main office located in a county with a population
22 between 600,000 and 700,000 according to the most recent federal
23 decennial census.

24 Sec. 806. (1) From the funds appropriated in part 1 for equity
25 and minority health, the department shall allocate \$1,000,200.00 to
26 the office of equity and minority health within the department to
27 inform and disseminate the report required under section 2227 of
28 the public health code, 1978 PA 368, MCL 333.2227, to health care
29 providers, local health departments, nonprofit groups, and other

1 entities with an interest in equity and minority health.

2 (2) From the funds appropriated in part 1 for social
3 determinants of health hub, the department shall allocate
4 \$500,000.00 to a nonprofit organization organized under the laws of
5 this state that is exempt from federal income tax under section
6 501(c)(3) of the internal revenue code of 1986, 26 USC 501, located
7 in a city with a population between 80,000 and 82,000 according to
8 the most recent federal decennial census, that runs health equity
9 programs. The funding must be used to create a social determinants
10 of health hub, offer technical assistance to other communities
11 across the state, and provide multisector coordination necessary to
12 become a social determinants of health hub.

13 Sec. 807. From the funds appropriated in part 1 for Elder Law
14 of Michigan MiCAFE contract, the department shall allocate not less
15 than \$350,000.00 to the Elder Law of Michigan MiCAFE to assist this
16 state's elderly population in participating in the food assistance
17 program. Of the \$350,000.00 allocated under this section, the
18 department shall use \$175,000.00, which are general fund/general
19 purpose funds, as state matching funds for not less than
20 \$175,000.00 in United States Department of Agriculture funding to
21 provide outreach program activities, such as eligibility screening
22 and information services, as part of a statewide food assistance
23 hotline.

24 Sec. 808. By March 1 of the current fiscal year, the
25 department shall provide a report to the report recipients required
26 in section 246 of this part on the nutrition education program. The
27 report must include planned allocation and actual expenditures for
28 the supplemental nutrition assistance program education funding by
29 location of programs, planned and actual grant amounts for the

1 supplemental nutrition assistance program education funding by
2 location of programs, the total amount of expected carryforward
3 balance at the end of the current fiscal year for the supplemental
4 nutrition assistance program education funding, and for each
5 subgrantee program, a list of all supplemental nutrition assistance
6 program education funding programs by implementing agency with the
7 amount of funding allocated.

8 Sec. 825. From the funds appropriated in part 1, the
9 department shall provide individuals not more than \$2,000.00 for
10 vehicle repairs, including any repairs done in the previous 12
11 months. Payments under this section shall include the combined
12 total of payments made by the department and work participation
13 program.

14 Sec. 826. (1) From the funds appropriated in part 1 for local
15 office policy and administration, not less than \$300,000.00 shall
16 be allocated for the department to contract with the Prosecuting
17 Attorneys Association of Michigan to provide the support and
18 services necessary to increase the capability of the state's
19 prosecutors, adult protective service system, and criminal justice
20 system to effectively identify, investigate, and prosecute elder
21 abuse and financial exploitation.

22 (2) By March 1 of the current fiscal year, the Prosecuting
23 Attorneys Association of Michigan shall provide a report to the
24 department on the efficacy of the contract. The department shall
25 submit the report to the report recipients required in section 246
26 of this part within 30 days after receiving the report from the
27 Prosecuting Attorneys Association of Michigan.

28 Sec. 827. (1) From the funds appropriated in part 1 for local
29 office policy and administration, the department shall allocate

1 \$812,000.00 to implement a pilot program with the goals of creating
2 a statewide peer-led reentry program, establishing industry
3 standards for peer mentoring focused on reentry, and creating
4 economic mobility for formerly incarcerated people through
5 workforce development.

6 (2) Funding under subsection (1) must be used to provide peer-
7 led group mentoring along with 1-on-1 mentoring to improve housing,
8 education, employment, and access to health care and insurance.
9 Funding for the pilot program must also be used to improve access
10 to transportation, provide positive peer social support, and
11 improve civic engagement outcomes.

12 (3) The independent program evaluation of the pilot program is
13 to be conducted by Wayne State University and must be made
14 available to all members of the senate and house subcommittees on
15 the department budget.

16 Sec. 850. (1) The department shall maintain out-stationed
17 eligibility specialists in community-based organizations, community
18 mental health agencies, nursing homes, adult placement and
19 independent living settings, federally qualified health centers,
20 and hospitals unless a community-based organization, community
21 mental health agency, nursing home, adult placement and independent
22 living setting, federally qualified health centers, or hospital
23 requests that the program be discontinued at its facility.

24 (2) From the funds appropriated in part 1 for donated funds
25 positions, the department shall enter into contracts with agencies
26 that are able and eligible under federal law to provide the
27 required matching funds for federal funding, as determined by
28 federal statute and regulations.

29 (3) A contract for an assistance payments donated funds

1 position must include, but not be limited to, the following
2 performance metrics:

3 (a) Meeting a standard of promptness for processing
4 applications for Medicaid and other public assistance programs
5 under state law.

6 (b) Meeting required standards for error rates in determining
7 programmatic eligibility as determined by the department.

8 (4) The department shall only fill additional donated funds
9 positions after a new contract has been signed. That position shall
10 also be abolished when the contract expires or is terminated.

11 (5) The department shall classify as limited-term FTEs any new
12 employees who are hired to fulfill the donated funds position
13 contracts or are hired to fill any vacancies from employees who
14 transferred to a donated funds position.

15 Sec. 851. From the funds appropriated in part 1 for adult
16 services local office staff, the department shall seek to reduce
17 the number of older adults who are victims of crime and fraud by
18 increasing the standard of promptness in every county, as measured
19 by commencing an investigation within 24 hours after a report is
20 made to the department, establishing face-to-face contact with the
21 client within 72 hours after a report is made to the department,
22 and completing the investigation within 30 days after a report is
23 made to the department.

24

25 **DISABILITY DETERMINATION SERVICES**

26 Sec. 890. From the funds appropriated in part 1 for disability
27 determination services, the department shall maintain the unit
28 rates in effect on September 30, 2019 for medical consultants
29 performing disability determination services, including physicians,

1 psychologists, and speech-language pathologists.

2
3 **BEHAVIORAL HEALTH SERVICES ADMINISTRATION AND SPECIAL PROJECTS**

4 Sec. 901. The funds appropriated in part 1 are intended to
5 support a system of comprehensive community mental health services
6 under the full authority and responsibility of local CMHSPs or
7 PIHPs in accordance with the mental health code, 1974 PA 258, MCL
8 330.1001 to 330.2106, the Medicaid provider manual, federal
9 Medicaid waivers, and all other applicable federal and state laws.

10 Sec. 902. (1) From the funds appropriated in part 1, final
11 authorizations to CMHSPs or PIHPs shall be made on the execution of
12 contracts between the department and CMHSPs or PIHPs. The contracts
13 shall contain an approved plan and budget as well as policies and
14 procedures governing the obligations and responsibilities of both
15 parties to the contracts. Each contract with a CMHSP or PIHP that
16 the department is authorized to enter into under this subsection
17 shall include a provision that the contract is not valid unless the
18 total dollar obligation for all of the contracts between the
19 department and the CMHSPs or PIHPs entered into under this
20 subsection for the current fiscal year does not exceed the amount
21 of money appropriated in part 1 for the contracts authorized under
22 this subsection.

23 (2) The department shall immediately submit a report to the
24 report recipients required in section 246 of this part if either of
25 the following occurs:

26 (a) The department enters into any new contracts with CMHSPs
27 or PIHPs that would affect rates or expenditures.

28 (b) The department amends any contracts the department has
29 entered into with CMHSPs or PIHPs that would affect rates or

1 expenditures.

2 (3) The report required by subsection (2) shall include
3 information about the changes to the contracts and their effects on
4 rates and expenditures.

5 Sec. 904. (1) By May 31 of the current fiscal year, the
6 department shall provide a report on the CMHSPs, PIHPs, and
7 designated regional entities for substance use disorder prevention
8 and treatment to the report recipients required in section 246 of
9 this part that includes the information required by this section.

10 (2) The report required under subsection (1) shall contain,
11 unless otherwise noted, information for each CMHSP, PIHP, and
12 designated regional entity for substance use disorder prevention
13 and treatment, and a statewide summary, each of which shall include
14 at least the following information:

15 (a) A statewide summary of the demographic description of
16 service recipients that, minimally, shall include reimbursement
17 eligibility, client population, age, ethnicity, housing
18 arrangements, and diagnosis.

19 (b) Per capita expenditures in total and by client population
20 group.

21 (c) A statewide summary of Medicaid-funded cost information
22 for the 3 diagnosis groups of adults with a mental illness,
23 children with a serious emotional disturbance, and individuals with
24 an intellectual or developmental disability. The statewide summary
25 must, minimally, include expenditures by service category for each
26 of the 3 diagnosis groups described in this subdivision and cases,
27 units, and cost of each specific service code index or health care
28 common procedure coding system (HCPCS) code for each of the 3
29 diagnosis groups.

1 (d) Financial information on non-Medicaid mental health
2 services by general fund cost reporting category.

3 (e) Information about access to CMHSPs, PIHPs, and designated
4 regional entities for substance use disorder prevention and
5 treatment that includes, but is not limited to, the following:

6 (i) The number of individuals receiving requested services.

7 (ii) The number of individuals who requested services but did
8 not receive services.

9 (f) The number of second opinions requested under the mental
10 health code, 1974 PA 258, MCL 330.1001 to 330.2106, and the
11 determination of any appeals.

12 (g) Lapses and carryforwards during the previous fiscal year
13 for CMHSPs, PIHPs, and designated regional entities for substance
14 use disorder prevention and treatment.

15 (h) Performance indicator information required to be submitted
16 to the department in the contracts with CMHSPs, PIHPs, and
17 designated regional entities for substance use disorder prevention
18 and treatment.

19 (i) Administrative expenditures of each CMHSP, PIHP, and
20 designated regional entity for substance use disorder prevention
21 and treatment that include a breakout of the salary, benefits, and
22 pension of each executive-level staff and shall include the
23 director, chief executive, and chief operating officers and other
24 members identified as executive staff.

25 (3) The report in subsection (1) shall contain the following
26 information from the previous fiscal year on substance use disorder
27 prevention, education, and treatment programs:

28 (a) The expenditures stratified by department-designated
29 community mental health entity, by fund source, by subcontractor,

1 by population served, and by service type.

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

4 (c) The number of services provided by subcontractor and by
5 service type. Additionally, data on length of stay, referral
6 source, and participation in other state programs.

7 (d) The collections from other first- or third-party payers,
8 private donations, or other state or local programs, by department-
9 designated community mental health entity, by subcontractor, by
10 population served, and by service type.

11 (4) The department shall include data reporting requirements
12 listed in subsections (2) and (3) in the annual contract with each
13 individual CMHSP, PIHP, and designated regional entity for
14 substance use disorder prevention and treatment.

15 (5) The department shall take all reasonable actions to ensure
16 that the data required are complete and consistent among all
17 CMHSPs, PIHPs, and designated regional entities for substance use
18 disorder prevention and treatment.

19 Sec. 907. (1) The amount appropriated in part 1 for community
20 substance use disorder prevention, education, and treatment shall
21 be expended to coordinate care and services provided to individuals
22 with severe and persistent mental illness and substance use
23 disorder diagnoses.

24 (2) The department shall approve managing entity fee schedules
25 for providing substance use disorder services and charge
26 participants in accordance with their ability to pay.

27 (3) The managing entity shall continue current efforts to
28 collaborate on the delivery of services to those clients with
29 mental illness and substance use disorder diagnoses with the goal

1 of providing services in an administratively efficient manner.

2 Sec. 909. From the funds appropriated in part 1 for health
3 homes, the department shall use available revenue from the
4 marihuana regulatory fund established in section 604 of the medical
5 marihuana facilities licensing act, 2016 PA 281, MCL 333.27604, to
6 improve physical health, expand access to substance use disorder
7 prevention and treatment services, and strengthen the existing
8 prevention, treatment, and recovery systems.

9 Sec. 910. The department shall ensure that substance use
10 disorder treatment is provided to applicants and recipients of
11 public assistance through the department who are required to obtain
12 substance use disorder treatment as a condition of eligibility for
13 public assistance.

14 Sec. 911. (1) The department shall ensure that each contract
15 with a CMHSP or PIHP requires the CMHSP or PIHP to implement
16 programs to encourage diversion of individuals with serious mental
17 illness, serious emotional disturbance, or developmental disability
18 from possible jail incarceration when appropriate.

19 (2) Each CMHSP or PIHP shall have jail diversion services and
20 shall work toward establishing working relationships with
21 representative staff of local law enforcement agencies, including
22 county prosecutors' offices, county sheriffs' offices, county
23 jails, municipal police agencies, municipal detention facilities,
24 and the courts. Written interagency agreements describing what
25 services each participating agency is prepared to commit to the
26 local jail diversion effort and the procedures to be used by local
27 law enforcement agencies to access mental health jail diversion
28 services are strongly encouraged.

29 Sec. 912. The department shall contract directly with the

1 Salvation Army Harbor Light program, at an amount not less than the
2 amount provided during the fiscal year ending September 30, 2020,
3 to provide non-Medicaid substance use disorder services if the
4 local coordinating agency or the department confirms the Salvation
5 Army Harbor Light program meets the standard of care. The standard
6 of care shall include, but is not limited to, utilization of the
7 medication assisted treatment option.

8 Sec. 913. (1) From the funds appropriated in part 1 for
9 behavioral health program administration, the department shall
10 allocate \$1,025,000.00 for the autism navigator program. The
11 department shall require any contractor receiving funds under this
12 section to comply with performance-related metrics to maintain
13 eligibility for funding. The performance-related metrics shall
14 include, but not be limited to, all of the following:

15 (a) Each contractor shall have accreditations that attest to
16 their competency and effectiveness in providing services.

17 (b) Each contractor shall demonstrate cost-effectiveness.

18 (c) Each contractor shall ensure their ability to leverage
19 private dollars to strengthen and maximize service provision.

20 (d) Each contractor shall provide quarterly reports to the
21 department regarding the number of clients served by PIHP region,
22 units of service provision by PIHP region, and ability to meet
23 their stated goals.

24 (2) The department shall require an annual report from any
25 contractor receiving funding from this section. The annual report,
26 due to the department 60 days following the end of the contract
27 period, shall include specific information on services and programs
28 provided, the client base to which the services and programs were
29 provided, and the expenditures for those services. The department

1 shall submit the annual reports to the report recipients required
2 in section 246 of this part.

3 Sec. 914. By June 1 of the current fiscal year, the department
4 shall submit a report to the report recipients required in section
5 246 of this part on outcomes of the funds provided in part 1 to the
6 Michigan Child Collaborative Care (MC3). The outcomes reported must
7 include, but is not limited to, the number of same-day telephone
8 consultations with primary care providers and the number of local
9 resource recommendations made to primary care providers who are
10 providing medical care to patients who need behavioral health
11 services.

12 Sec. 915. From the funds appropriated in part 1 for community
13 substance use disorder prevention, education, and treatment and
14 opioid response activities, the department shall, to the extent
15 possible, provide grants, pursuant to federal laws, rules, and
16 regulations, to local public entities that provide substance use
17 disorder services and to 1 private entity that has a statewide
18 contract to provide community-based substance use disorder
19 services.

20 Sec. 917. From the funds appropriated in part 1 for opioid
21 response activities, the department shall allocate \$23,200,000.00
22 from the Michigan opioid healing and recovery fund created under
23 section 3 of the Michigan trust fund act, 2000 PA 489, MCL 12.253,
24 in the following manner:

25 (a) The department shall allocate \$1,000,000.00 to a coalition
26 located in a county with a population of at least 1,500,000
27 according to the most recent federal decennial census with an aim
28 to lead and support communities to dispel the myths and stigmas
29 about drug addiction through public education, sharing stories of

1 recovery, partnering with local and state leaders, creating
2 positive social changes, and providing recovery support services
3 for those in need.

4 (b) The department shall allocate \$3,500,000.00 to a coalition
5 located in a county with a population of at least 1,500,000
6 according to the most recent federal decennial census with an aim
7 to provide a continuum of services to stabilize and improve
8 symptoms of substance abuse disorder and opioid use disorder, and
9 to engage individuals in an appropriate treatment service to
10 address the problem that led to the crisis.

11 (c) The department shall allocate a grant of \$5,000,000.00 to
12 a substance use recovery community collaborative made up of a
13 partnership of recovery focused organizations in order to provide
14 funding of up to \$250,000.00 per grant award to a recovery
15 community organization as described in section 237b of the mental
16 health code, 1974 PA 258, MCL 330.1273b.

17 (d) The department shall allocate \$2,500,000.00 to a nonprofit
18 organization organized under the laws of this state that is exempt
19 from federal income tax under section 501(c)(3) of the internal
20 revenue code of 1986, 26 USC 501, and that has its headquarters in
21 a charter township with a population between 100,000 and 105,000
22 and is within a county with a population between 700,000 and
23 1,000,000, according to the most recent federal decennial census.
24 To be eligible to receive funding, the nonprofit organization must
25 have a stated mission to offer community-based, compassionate,
26 best-practice/evidence-based services to those suffering from
27 addiction, as well as their loved ones, and to erase the stigma of
28 addiction and instill compassion and hope.

29 (e) The department shall allocate a grant of \$100.00 for costs

1 related to a women's recovery center and a men's campus to a
2 nonprofit organization organized under the laws of this state that
3 is exempt from federal income tax under section 501(c)(3) of the
4 internal revenue code of 1986, 26 USC 501, and accredited by CARF
5 international with a mission to empower recovery through hope and
6 change and that provides a variety of behavioral health services
7 across the Upper Peninsula.

8 (f) The department shall allocate a grant of \$100.00 to a
9 nonprofit organization organized under the laws of this state that
10 is exempt from federal income tax under section 501(c)(3) of the
11 internal revenue code of 1986, 26 USC 501, located in a city with a
12 population between 50,000 and 110,000 and is within a county with a
13 population between 265,000 and 290,000 according to the most recent
14 federal decennial census to establish 3 opioid treatment program
15 and suicide prevention facilities capable of serving at least 500
16 patients on an outpatient basis. To be eligible for funds under
17 this subdivision the nonprofit organization must be accredited by
18 the Council for the Accreditation of Rehabilitation Facilities and
19 have been providing outpatient services in this state since 1986.

20 (g) The department shall allocate a grant of \$1,300,000.00 to
21 a nonprofit, community-based organization organized under the laws
22 of this state that is exempt from federal income tax under section
23 501(c)(3) of the internal revenue code of 1986, 26 USC 501, located
24 in a city with a population between 100,000 and 600,000 and in a
25 county with a population greater than 1,500,000 according to the
26 most recent federal decennial census that provides recreational
27 therapy, healthy living, and substance use intervention services
28 for a program to prevent substance abuse for youth fighting drug
29 and alcohol misuse.

1 Sec. 918. On a quarterly basis, providing monthly data, the
2 department shall submit a report to the report recipients required
3 in section 246 of this part on the amount of funding paid to PIHPs
4 to support the Medicaid managed mental health care program. The
5 information shall include the total paid to each PIHP, per capita
6 rate paid for each eligibility group for each PIHP, and number of
7 cases in each eligibility group for each PIHP, and year-to-date
8 summary of eligibles and expenditures for the Medicaid managed
9 mental health care program.

10 Sec. 920. (1) As part of the Medicaid rate-setting process for
11 behavioral health services, the department shall work with PIHP
12 network providers and actuaries to include any state and federal
13 wage and compensation increases that directly impact staff who
14 provide Medicaid-funded community living supports, personal care
15 services, respite services, skill-building services, and other
16 similar supports and services as part of the Medicaid rate.

17 (2) It is the intent of the legislature that any increased
18 Medicaid rate related to state minimum wage increases shall also be
19 distributed to direct care employees.

20 Sec. 924. From the funds appropriated in part 1 for autism
21 services, for the purposes of actuarially sound rate certification
22 and approval for Medicaid behavioral health managed care programs,
23 the department shall maintain a fee schedule for autism services
24 reimbursement rates for direct services. Expenditures used for rate
25 setting shall not exceed those identified in the fee schedule. The
26 rates for behavioral technicians shall not be less than \$52.35 per
27 hour and not more than \$57.35 per hour.

28 Sec. 926. (1) From the funds appropriated in part 1 for
29 community substance use disorder prevention, education, and

1 treatment, \$1,000,000.00 is allocated for a specialized substance
2 use disorder detoxification project administered by a 9-1-1 service
3 district in conjunction with a substance use and case management
4 provider and at a hospital within a 9-1-1 services district with at
5 least 600,000 residents and 15 member communities within a county
6 with a population of at least 1,500,000 according to the most
7 recent federal decennial census.

8 (2) The substance use and case management provider receiving
9 funds under this section shall collect and submit to the department
10 data on the outcomes of the project throughout the duration of the
11 project and the department shall submit a report on the project's
12 outcomes to the report recipients required in section 246 of this
13 part.

14 Sec. 927. (1) The department shall, in consultation with the
15 Community Mental Health Association of Michigan, establish,
16 maintain, and review as necessary, a uniform community mental
17 health services auditing process for use by CMHSPs and PIHPs.

18 (2) The uniform auditing process required under this section
19 must do all of the following:

20 (a) Create uniformity in the collection of data and consistent
21 measurement of the quality, efficacy, and cost effectiveness of
22 provided services and supports.

23 (b) Establish a uniform audit tool that contains information
24 necessary for the uniform community mental health services auditing
25 process and adheres to national standards.

26 (c) Strive to meet the needs of community mental health
27 service beneficiaries and meet all statewide audit requirements.

28 (d) Maintain audit responsibility at the local agency level.

29 (3) By March 1 of the current fiscal year, the department

1 shall submit a report to the report recipients required in section
2 246 of this part on the implementation status of the uniform
3 auditing process and any barriers to implementation.

4 (4) A state department or agency that provides, either
5 directly or through a contract, community mental health services
6 and supports must comply with the uniform auditing process and
7 utilize the audit tool maintained by the department. All forms,
8 processes, and contracts used by the state that relate to the
9 provision of community mental health services and supports must
10 comply with the uniform auditing process.

11 (5) As used in this section, "national standards" means
12 standards established by a national accrediting entity such as the
13 Joint Commission, Commission on Accreditation of Rehabilitation
14 Facilities, Council on Accreditation, National Committee for
15 Quality Assurance, or other credible body approved by the
16 department.

17 Sec. 928. (1) Each PIHP shall provide, from internal
18 resources, local funds to be used as a part of the state match
19 required under the Medicaid program in order to increase capitation
20 rates for PIHPs. These funds must not include either state funds
21 received by a CMHSP for services provided to non-Medicaid
22 recipients or the state matching portion of the Medicaid capitation
23 payments made to a PIHP.

24 (2) It is the intent of the legislature that any funds that
25 lapse from the funds appropriated in part 1 for Medicaid mental
26 health services are redistributed to individual CMHSPs as a
27 reimbursement of local funds on a proportional basis to those
28 CMHSPs whose local funds were used as state Medicaid match. By
29 April 1 of the current fiscal year, the department shall submit a

1 report to the report recipients required in section 246 of this
2 part on the lapse by PIHP from the previous fiscal year and the
3 projected lapse by PIHP in the current fiscal year.

4 Sec. 935. A county required under the provisions of the mental
5 health code, 1974 PA 258, MCL 330.1001 to 330.2106, to provide
6 matching funds to a CMHSP for mental health services rendered to
7 residents in its jurisdiction shall pay the matching funds in equal
8 installments on not less than a quarterly basis throughout the
9 fiscal year, with the first payment being made by October 1 of the
10 current fiscal year.

11 Sec. 940. (1) According to section 236 of the mental health
12 code, 1974 PA 258, MCL 330.1236, the department shall review
13 expenditures for each CMHSP to identify CMHSPs with projected
14 allocation surpluses and to identify CMHSPs with projected
15 allocation shortfalls. The department shall encourage the board of
16 a CMHSP with a projected allocation surplus to concur with the
17 department's recommendation to reallocate those funds to CMHSPs
18 with projected allocation shortfalls.

19 (2) A CMHSP that has its funding allocation transferred out
20 during the current fiscal year as described in subsection (1) is
21 not eligible for any additional funding reallocations during the
22 remainder of the current fiscal year, unless that CMHSP is
23 responding to a public health emergency as determined by the
24 department.

25 (3) CMHSPs shall report to the department on any proposed
26 reallocations described in this section at least 30 days before any
27 reallocations take effect.

28 (4) The department shall notify the chairs of the
29 appropriation subcommittees on the department budget when a request

1 is made and when the department grants approval for reallocation as
2 described in subsection (1). By September 30 of the current fiscal
3 year, the department shall submit a report on the amount of funding
4 reallocated to the report recipients required in section 246 of
5 this part.

6 Sec. 942. A CMHSP shall provide at least 30 days' notice
7 before reducing, terminating, or suspending services provided by a
8 CMHSP to CMHSP clients, with the exception of services authorized
9 by a physician that no longer meet established criteria for medical
10 necessity.

11 Sec. 950. (1) The department shall create a workgroup that
12 includes representatives of the department, the Michigan
13 Guardianship Association, probate court judges that oversee cases
14 with court-appointed guardians, and the Community Mental Health
15 Association of Michigan to develop a funding method for clients for
16 which a court-appointed guardian receives no fee.

17 (2) The funding method developed by the workgroup under
18 subsection (1) must include all of the following:

19 (a) A certification requirement and process for obtaining
20 certification for court-appointed professional guardians.

21 (b) A requirement that funding distributed under this section
22 is only used to reimburse certified court-appointed professional
23 guardians. This does not include family guardians or guardians of
24 minor children.

25 (c) A process by which the certified court-appointed
26 professional guardian shall register with the state as a vendor for
27 provision of court-appointed guardian services. This process may be
28 the same as the process used for court-appointed guardians who hold
29 a contract with the department for oversight of adult protective

1 services cases.

2 (d) A requirement that a certified court-appointed
3 professional guardian is reimbursed \$83.00 per eligible client per
4 month.

5 (e) A requirement that if a certified court-appointed
6 professional guardian receives payment for a case from any other
7 source of funding, the \$83.00 per eligible client per month is
8 reduced by an amount equal to the amount of funding received from
9 any other source of funding.

10 (f) A requirement that funds are dispersed on a monthly basis
11 for cases overseen in the previous month.

12 (g) A requirement that only indigent cases are cases eligible
13 for reimbursement under this section.

14 (3) The department shall submit a report by February 1 of the
15 current fiscal year to the report recipients required in section
16 246 of this part on the funding methodology developed under this
17 section. The report must include all of the following:

18 (a) The estimated cost broken down by 1-time implementation
19 costs and ongoing costs.

20 (b) The anticipated number of cases funded through the
21 proposed methodology.

22 (c) A timeline for implementation of the proposed methodology.

23 Sec. 960. (1) From the funds appropriated in part 1 for autism
24 services, the department shall continue to cover all Medicaid
25 autism services to Medicaid enrollees eligible for the services
26 that were covered on January 1, 2019.

27 (2) To restrain cost increases in the autism services line
28 item, the department shall do all of the following:

29 (a) By March 1 of the current fiscal year, develop and

1 implement specific written guidance for standardization of Medicaid
2 PIHPs and CMHSPs autism spectrum disorder administrative services,
3 including, but not limited to, reporting requirements, coding, and
4 reciprocity of credentialing and training between PIHPs and CMHSPs
5 to reduce administrative duplication at the PIHP, CMHSP, and
6 service provider levels.

7 (b) Require consultation with the client's evaluation
8 diagnostician and PIHP to approve the client's ongoing therapy for
9 3 years, unless the client's evaluation diagnostician recommended
10 an evaluation before the 3 years or if a clinician on the treatment
11 team recommended an evaluation for the client before the third
12 year.

13 (c) Limit the authority to perform a diagnostic evaluation for
14 Medicaid autism services to qualified licensed practitioners.
15 Qualified licensed practitioners are limited to the following:

16 (i) A physician with a specialty in psychiatry or neurology.

17 (ii) A physician with a subspecialty in developmental
18 pediatrics, development-behavioral pediatrics, or a related
19 discipline.

20 (iii) A physician with a specialty in pediatrics or other
21 appropriate specialty with training, experience, or expertise in
22 autism spectrum disorders or behavioral health.

23 (iv) A psychologist with a specialty in clinical child
24 psychology, behavioral and cognitive psychology, or clinical
25 neuropsychology, or other appropriate specialty with training,
26 experience, or expertise in autism spectrum disorders or behavioral
27 health.

28 (v) A clinical social worker with at least 1 year of
29 experience working within the clinical social worker's scope of

1 practice who is qualified and experienced in diagnosing autism
2 spectrum disorders.

3 (vi) An advanced practice registered nurse with training,
4 experience, or expertise in autism spectrum disorders or behavioral
5 health.

6 (vii) A physician's assistant with training, experience, or
7 expertise in autism spectrum disorders or behavioral health.

8 (d) Require that a client whose initial diagnosis was
9 performed by a diagnostician with master's level credentials have
10 their diagnosis and treatment recommendations reviewed by a
11 physician, psychiatric nurse practitioner, physician's assistant
12 with training, experience, or expertise in autism spectrum
13 disorders or behavioral health, or fully credentialed psychologist.

14 (e) Allow and expand the utilization of telemedicine and
15 telepsychiatry to increase access to diagnostic evaluation
16 services.

17 (f) Coordinate with the department of insurance and financial
18 services on oversight for compliance with the Paul Wellstone and
19 Pete Domenici mental health parity and addiction equity act of
20 2008, Public Law 110-343, as it relates to autism spectrum disorder
21 services, to ensure appropriate cost sharing between public and
22 private payers.

23 (g) Require that Medicaid eligibility be confirmed through
24 prior evaluations conducted by physicians, psychiatric nurse
25 practitioners, physician's assistant with training, experience, or
26 expertise in autism spectrum disorders or behavioral health, or
27 fully credentialed psychologists to the extent possible.

28 (h) Maintain regular statewide provider trainings on autism
29 spectrum disorder standard clinical best practice guidelines for

1 treatment and diagnostic services.

2 (3) By March 1 of the current fiscal year, the department
3 shall submit a report to the report recipients required in section
4 246 of this part on total autism services spending broken down by
5 PIHP and CMHSP for the previous fiscal year and current fiscal year
6 and total administrative costs broken down by PIHP, CMHSP, and the
7 type of administrative cost for the previous fiscal year and
8 current fiscal year.

9 Sec. 962. For the purposes of special projects involving high-
10 need children or adults, including the not guilty by reason of
11 insanity population, the department may contract directly with
12 providers of services to these identified populations.

13 Sec. 964. By October 1 of the current fiscal year, the
14 department shall submit a report to the report recipients required
15 in section 246 of this part on the status of implementing the
16 standardized fee schedule for Medicaid behavioral health services
17 and supports and on the limitations preventing the implementation.

18 Sec. 965. From the funds appropriated in part 1, the
19 department and the PIHPs shall maintain the comparison rates and
20 any associated reimbursement rates of the bundled rate H0020 for
21 the administration and services of methadone at \$19.00.

22 Sec. 972. From the funds appropriated in part 1 for behavioral
23 health program administration, the department shall allocate not
24 less than \$3,000,000.00 general fund/general purpose revenue and
25 any associated federal match or federal grant funding, including,
26 but not limited to, associated federal 988 grant funding for the
27 mental health telephone access line known as the Michigan crisis
28 and access line (MiCAL), to provide primary coverage in regions
29 where a regional national suicide prevention lifeline center does

1 not provide coverage and for statewide secondary coverage, to
2 establish and make available to the public MiCAL in accordance with
3 section 165 of the mental health code, 1974 PA 258, MCL 330.1165.

4 Sec. 974. The department and PIHPs shall allow an individual
5 with an intellectual or developmental disability who receives
6 supports and services from a CMHSP to instead receive supports and
7 services from another provider if the individual shows that the
8 individual is eligible and qualified to receive supports and
9 services from another provider. Other providers may include, but
10 are not limited to, MIChoice and program of all-inclusive care for
11 the elderly (PACE). The department may contract with an independent
12 person-planning company to coordinate the services described in
13 this section.

14 Sec. 977. From the funds appropriated in part 1 for community
15 substance use disorder prevention, education, and treatment,
16 \$600,000.00 is allocated as grants to high schools specifically
17 designated for students recovering from a substance use disorder in
18 accordance with section 273a of the mental health code, 1974 PA
19 258, MCL 330.1273a.

20 Sec. 978. From the funds appropriated in part 1 for community
21 substance use disorder prevention, education, and treatment, the
22 department shall allocate \$1,200,000.00 as grants for recovery
23 community organizations to offer or expand recovery support center
24 services or recovery community center services to individuals
25 seeking long-term recovery from substance use disorders in
26 accordance with section 273b of the mental health code, 1974 PA
27 258, MCL 330.1273b.

28 Sec. 979. If funds become available, the department shall seek
29 the appropriate federal approvals to allow for the utilization of

1 Medicaid funding for services provided at adult psychiatric
2 residential treatment facilities. By March 1 of the current fiscal
3 year, the department shall submit a report on its progress toward
4 receiving the appropriate federal approvals to allow for federal
5 Medicaid reimbursements for services provided at adult psychiatric
6 residential treatment facilities to the report recipients required
7 in section 246 of this part.

8 Sec. 995. (1) From the funds appropriated in part 1 for mental
9 health diversion council, the department shall allocate
10 \$3,850,000.00 to continue to implement the jail diversion pilot
11 programs intended to address the recommendations of the mental
12 health diversion council.

13 (2) By March 1 of the current fiscal year, the department
14 shall submit a report to the report recipients required in section
15 246 of this part on the planned allocation of the funds
16 appropriated for mental health diversion council.

17 Sec. 996. From the funds appropriated in part 1 for family
18 support subsidy, the department shall make monthly payments of
19 \$300.36 to the parents or legal guardians of children approved for
20 the family support subsidy by a CMHSP.

21 Sec. 997. The population data used in determining the
22 distribution of substance use disorder block grant funds shall be
23 from the most recent federal data from the United States Census
24 Bureau.

25 Sec. 998. For distribution of state general funds to CMHSPs,
26 if the department decides to use census data, the department shall
27 use the most recent federal data from the United States Census
28 Bureau.

29

BEHAVIORAL HEALTH SERVICES

1 Sec. 1001. By December 31 of the current fiscal year, each
2 CMHSP shall submit a report to the department that identifies
3 populations being served by the CMHSP broken down by program
4 eligibility category. The report shall also include the percentage
5 of the operational budget that is related to program eligibility
6 enrollment. By February 15 of the current fiscal year, the
7 department shall submit the report described in this section to the
8 report recipients required in section 246 of this part.

9 Sec. 1003. The department shall notify the Community Mental
10 Health Association of Michigan when developing policies and
11 procedures that will impact PIHPs or CMHSPs.

12 Sec. 1004. The department shall submit a report to the report
13 recipients required in section 246 of this part on any rebased
14 formula changes to either Medicaid behavioral health services or
15 non-Medicaid mental health services 90 days before implementation.
16 The notification shall include a table showing the changes in
17 funding allocation by PIHP for Medicaid behavioral health services
18 or by CMHSP for non-Medicaid mental health services.

19 Sec. 1005. (1) From the funds appropriated in part 1 for
20 health homes, the department shall maintain the number of
21 behavioral health homes in place as of September 30 of the previous
22 fiscal year. The department may expand the number of behavioral
23 health homes and the number of substance use disorder health homes
24 in at least 1 additional PIHP region.

25 (2) By September 30 of the current fiscal year, the department
26 shall provide a report to the report recipients required in section
27 246 of this part on the number of individuals being served and
28 expenditures incurred by each PIHP region by site.
29

1 Sec. 1008. PIHPs and CMHSPs shall do all of the following:

2 (a) Work to reduce administration costs by ensuring that PIHP
3 and CMHSP responsible functions are efficient in allowing optimal
4 transition of dollars to those direct services considered most
5 effective in assisting individuals served. Any consolidation of
6 administrative functions must demonstrate, by independent analysis,
7 a reduction in dollars spent on administration resulting in greater
8 dollars spent on direct services. Savings resulting from increased
9 efficiencies shall not be applied to PIHP and CMHSP net assets,
10 internal service fund increases, building costs, increases in the
11 number of PIHP and CMHSP personnel, or other areas not directly
12 related to the delivery of improved services.

13 (b) Take an active role in managing mental health care by
14 ensuring consistent and high-quality service delivery throughout
15 its network and promote a conflict-free care management
16 environment.

17 (c) Ensure that direct service rate variances are related to
18 the level of need or other quantifiable measures to ensure that the
19 most money possible reaches direct services.

20 (d) Whenever possible, promote fair and adequate direct care
21 reimbursement, including fair wages for direct service workers.

22 Sec. 1010. (1) The funds appropriated in part 1 for behavioral
23 health community supports and services must be used to reduce
24 waiting lists at state-operated hospitals and centers through cost-
25 effective community-based and residential services, including, but
26 not limited to, assertive community treatment (ACT), forensic
27 assertive community treatment (FACT), crisis stabilization units in
28 accordance with chapter 9A of the mental health code, 1974 PA 258,
29 MCL 330.1971 to 330.1979, and psychiatric residential treatment

1 facilities in accordance with section 137a of the mental health
2 code, 1974 PA 258, MCL 330.1137a.

3 (2) From the funds appropriated in part 1 for behavioral
4 health community supports and services, the department shall
5 allocate \$30,450,000.00 to reimburse private providers for
6 intensive psychiatric treatments and services outside of state-
7 operated hospitals and centers and support efforts related to the
8 oversight of community-based programs placement.

9 (3) If the private provider has an existing wait list for
10 intensive psychiatric treatments and services, any reimbursements
11 to private providers under this section must not be conditional on
12 private providers giving wait-list priority to state-paid
13 individuals.

14 Sec. 1011. To the extent permissible under section 919 of the
15 mental health code, 1974 PA 258, MCL 330.1919, the funds
16 appropriated in part 1 for behavioral health services may be used
17 to reimburse out-of-state providers of crisis resolution services
18 and outpatient services if the out-of-state provider is enrolled as
19 a state Medicaid provider and the out-of-state provider is located
20 closer to the client's home than an in-state provider.

21 Sec. 1012. From the funds appropriated in part 1, the
22 department shall expand the scope of Michigan 1115 Behavioral
23 Health Demonstration waiver number 11-W-00305/5 by seeking approval
24 to authorize federal Medicaid matching funds for reimbursement to
25 institutions for mental diseases for inpatient, residential, and
26 other services provided to Medicaid enrolled individuals with
27 behavioral health diagnoses, including serious mental illnesses,
28 serious emotional disturbances, and substance use disorders. The
29 amended waiver must include Medicaid coverage for services,

1 including care management, clinical consultation, peer services,
2 and pharmaceutical management, up to 30 days prior to discharge for
3 individuals who have long-term stays in state psychiatric centers
4 and hospitals and a substance use disorder. Services provided must
5 include, but not be limited to, crisis services, respite, step down
6 and short-term residential services, intensive community support
7 services, and crisis diversion centers. The primary goals of the
8 waiver amendment include a reduction of inpatient and transitional
9 residential length of stays, community integration and maintenance
10 with a focus on recovery, and an overall reduced cost of care. By
11 May 1 of the current fiscal year, the department shall submit a
12 report to the report recipients required in section 246 of this
13 part on the status of the amended waiver submission and steps
14 undertaken to implement the waiver.

15 Sec. 1014. (1) From the funds appropriated in part 1 to
16 agencies providing physical and behavioral health services to
17 multicultural populations, the department shall award grants in
18 accordance with the requirements of subsection (2). This state is
19 not liable for any spending above the contract amount. The
20 department shall not release funds until reporting requirements
21 under section 1014 of article 6 of 2021 PA 87 are satisfied.

22 (2) The department shall require each contractor described in
23 subsection (1) that receives greater than \$1,000,000.00 in state
24 grant funding to comply with performance-related metrics to
25 maintain their eligibility for funding. The performance-related
26 metrics shall include, but not be limited to, all of the following:

27 (a) Each contractor or subcontractor shall have accreditations
28 that attest to their competency and effectiveness as behavioral
29 health and social service agencies.

1 (b) Each contractor or subcontractor shall have a mission that
2 is consistent with the purpose of the multicultural agency.

3 (c) Each contractor shall validate that any subcontractors
4 utilized within these appropriations share the same mission as the
5 lead agency receiving funding.

6 (d) Each contractor or subcontractor shall demonstrate cost-
7 effectiveness.

8 (e) Each contractor or subcontractor shall ensure their
9 ability to leverage private dollars to strengthen and maximize
10 service provision.

11 (f) Each contractor or subcontractor shall provide timely and
12 accurate reports regarding the number of clients served, units of
13 service provision, and ability to meet their stated goals.

14 (3) The department shall require an annual report from the
15 contractors described in subsection (2). The annual report, due 60
16 days following the end of the contract period, shall include
17 specific information on services and programs provided, the client
18 base to which the services and programs were provided, information
19 on any wraparound services provided, and the expenditures for those
20 services. By February 1 of the current fiscal year, the department
21 shall submit the annual reports to the report recipients required
22 in section 246 of this part.

23 Sec. 1015. From the funds appropriated in part 1 for federal
24 mental health block grant, the department shall, to the extent
25 possible, provide grants, pursuant to federal laws, rules, and
26 regulations, to local public entities that provide mental health
27 services and to 1 private entity that has a statewide contract to
28 provide community-based mental health services.

29

STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL HEALTH SERVICES

1 Sec. 1051. The department shall continue a revenue recapture
2 project to generate additional revenues from third parties related
3 to cases that have been closed or are inactive. A portion of
4 revenues collected through project efforts may be used for
5 departmental costs and contractual fees associated with these
6 retroactive collections and to improve ongoing departmental
7 reimbursement management functions.
8

9 Sec. 1052. The purpose of gifts and bequests for patient
10 living and treatment environments is to use additional private
11 funds to provide specific enhancements for individuals residing at
12 state-operated facilities. Use of the gifts and bequests shall be
13 consistent with the stipulation of the donor. The expected
14 completion date for the use of gifts and bequests donations is
15 within 3 years unless otherwise stipulated by the donor.

16 Sec. 1055. (1) The department shall not implement any closures
17 or consolidations of state hospitals, centers, or agencies until
18 CMHSPs or PIHPs have programs and services in place for those
19 individuals currently in those facilities and a plan for service
20 provision for those individuals who would have been admitted to
21 those facilities.

22 (2) All closures or consolidations are dependent on adequate
23 department-approved CMHSP and PIHP plans that include a discharge
24 and aftercare plan for each individual currently in the facility. A
25 discharge and aftercare plan shall address the individual's housing
26 needs. A homeless shelter or similar temporary shelter arrangements
27 are inadequate to meet the individual's housing needs.

28 (3) Four months after the certification of closure required in
29 section 19(6) of the state employees' retirement act, 1943 PA 240,

1 MCL 38.19, the department shall provide a closure plan to the
2 report recipients required in section 246 of this part.

3 (4) On the closure of state-run operations and after
4 transitional costs have been paid, the remaining balances of funds
5 appropriated for that operation shall be transferred to CMHSPs or
6 PIHPs responsible for providing services for individuals previously
7 served by the operations.

8 Sec. 1056. The department may collect revenue for patient
9 reimbursement from first- and third-party payers, including
10 Medicaid and local county CMHSP payers, to cover the cost of
11 placement in state hospitals and centers. The department is
12 authorized to adjust financing sources for patient reimbursement
13 based on actual revenues earned. If the revenue collected exceeds
14 current year expenditures, the revenue may be carried forward with
15 approval of the state budget director. The revenue carried forward
16 shall be used as a first source of funds in the subsequent year.

17 Sec. 1058. Effective October 1 of the current fiscal year, the
18 department, in consultation with the department of technology,
19 management, and budget, may maintain a bid process to identify 1 or
20 more private contractors to provide food service and custodial
21 services for the administrative areas at any state hospital
22 identified by the department as capable of generating savings
23 through the outsourcing of such services.

24 Sec. 1059. (1) The department shall identify specific outcomes
25 and performance measures for state-operated hospitals and centers,
26 including, but not limited to, the following:

27 (a) The average wait time from the time of the receipt of the
28 court order for treatment for individuals determined incompetent to
29 stand trial until admission to the center for forensic psychiatry.

1 (b) The average wait time from the time of the receipt of the
2 court order for treatment for individuals determined incompetent to
3 stand trial until admission to other state-operated psychiatric
4 facilities.

5 (c) The most recent 12-month average number of individuals on
6 the first day of each month waiting to receive admission into the
7 center for forensic psychiatry.

8 (d) The most recent 12-month average number of individuals on
9 the first day of each month waiting to receive admission into the
10 other state-operated hospitals and centers.

11 (e) The average wait time for individuals awaiting admission
12 into the other state-operated hospitals and centers through the
13 civil admissions process.

14 (f) The number of individuals determined not guilty by reason
15 of insanity or incompetent to stand trial by an order of a probate
16 court that have been determined to be ready for discharge to the
17 community, and the average wait time between being determined to be
18 ready for discharge to the community and actual community
19 placement.

20 (g) The number of individuals denied admission into the center
21 for forensic psychiatry.

22 (h) The number of individuals denied admission into the other
23 state-operated hospitals and centers.

24 (2) By March 1 of the current fiscal year, the department
25 shall submit a report to the report recipients required in section
26 246 of this part on the outcomes and performance measures in
27 subsection (1).

28 Sec. 1060. By March 1 of the current fiscal year, the
29 department shall submit a report on mandatory overtime, staff

1 turnover, and staff retention at the state psychiatric hospitals
2 and centers to the report recipients required in section 246 of
3 this part. The report shall include, but is not limited to, the
4 following:

5 (a) The number of direct care and clinical staff positions
6 that are currently vacant by hospital, and how that compares to the
7 number of vacancies during the previous fiscal year.

8 (b) A breakdown of voluntary and mandatory overtime hours
9 worked by position and by hospital, and how that compares to the
10 breakdown of voluntary and mandatory overtime hours during the
11 previous fiscal year.

12 (c) The ranges of wages paid by position and by hospital, and
13 how that compares to wages paid during the previous fiscal year.

14 Sec. 1061. The funds appropriated in part 1 for Caro Regional
15 Mental Health Center shall only be utilized to support a
16 psychiatric hospital located at its current location. It is the
17 intent of the legislature that the Caro Regional Mental Health
18 Center shall remain open and operational at its current location on
19 an ongoing basis. Capital outlay funding shall be utilized for
20 planning and construction of a new or updated facility at the
21 current location instead of at a new location.

22 Sec. 1063. (1) From the funds appropriated in part 1 for
23 Hawthorn Center - psychiatric hospital - children and adolescents,
24 the department shall maintain a psychiatric transitional unit and
25 children's transition support team. These programs shall augment
26 the continuum of behavioral health services for high-need youth and
27 provide additional continuity of care and transition into
28 supportive community-based services.

29 (2) Outcomes and performance measures for these programs

1 include, but are not limited to, the following:

2 (a) The rate of rehospitalization for youth served through the
3 program at 30 and 180 days.

4 (b) The measured change in the Child and Adolescent Functional
5 Assessment Scale for children served through these programs.

6

7 **HEALTH AND HUMAN SERVICES POLICY AND INITIATIVES**

8 Sec. 1140. From the funds appropriated in part 1 for primary
9 care services, \$400,000.00 shall be allocated to free health
10 clinics operating in the state. The department shall distribute the
11 funds equally to each free health clinic. For the purpose of this
12 appropriation, "free health clinics" means nonprofit organizations
13 that use volunteer health professionals to provide care to
14 uninsured individuals.

15 Sec. 1143. From the funds appropriated in part 1 for primary
16 care services, the department shall allocate no less than
17 \$675,000.00 for island primary health care access and services
18 including island clinics, in the following amounts:

19 (a) Beaver Island, \$250,000.00.

20 (b) Mackinac Island, \$250,000.00.

21 (c) Drummond Island, \$150,000.00.

22 (d) Bois Blanc Island, \$25,000.00.

23 Sec. 1145. The department will take steps necessary to work
24 with Indian Health Service, tribal health program facilities, or
25 Urban Indian Health Program facilities that provide services under
26 a contract with a Medicaid managed care entity to ensure that those
27 facilities receive the maximum amount allowable under federal law
28 for Medicaid services.

29 Sec. 1147. From the funds appropriated in part 1 for cellular

1 therapy program, \$750,000.00 shall be allocated to Versiti Blood
2 Center for a cord blood bank. The funds shall be used to enhance
3 the collection of fetal umbilical cord blood and stem cells for
4 transplant, expand cord blood laboratory capabilities, and expand
5 the diversity of collections.

6 Sec. 1151. (1) The department shall coordinate with the
7 department of licensing and regulatory affairs, the department of
8 the attorney general, all appropriate law enforcement agencies, and
9 the Medicaid health plans to work with local substance use disorder
10 agencies and addiction treatment providers to help inform Medicaid
11 beneficiaries of all medically appropriate treatment options for
12 opioid addiction when their treating physician stops prescribing
13 prescription opioid medication for pain, and to address other
14 appropriate recommendations of the prescription drug and opioid
15 abuse task force outlined in its report of October 2015.

16 (2) By October 1 of the current fiscal year, the department
17 shall submit a report to the report recipients required in section
18 246 of this part on how the department is working with local
19 substance use disorder agencies and addiction treatment providers
20 to ensure that Medicaid beneficiaries are informed of all available
21 and medically appropriate treatment options for opioid addiction
22 when their treating physician stops prescribing prescription opioid
23 medication for pain, and to address other appropriate
24 recommendations of the task force. The report shall include any
25 potential barriers to medication-assisted treatment, as recommended
26 by the Michigan medication-assisted treatment guidelines, for
27 Medicaid beneficiaries in both office-based opioid treatment and
28 opioid treatment program facility settings.

29 Sec. 1152. (1) From the funds appropriated in part 1 for

1 healthy and resilient communities, the department shall allocate
2 \$5,000,000.00 to a public health authority created through an
3 interlocal agreement located in a city with a population greater
4 than 500,000 according to the most recent federal decennial census
5 to create and implement an evidence-based program to increase
6 access to quality food and nutrition among disadvantaged
7 populations. The evidence-based program shall do all of the
8 following:

9 (a) Operate a mobile health center with a demonstration
10 kitchen, incorporating nutrition education and cooking skills with
11 culturally appropriate recipes and provide immunizations,
12 screenings, and other health services.

13 (b) Employ community health workers to serve as extenders of
14 mobile units to link residents to the mobile center.

15 (c) Purchase and install equipment located in convenience
16 store locations to maintain the placement of fresh and nutritious
17 food.

18 (d) Support a "fresh prescription" program to introduce
19 chronically ill residents to the health benefits of a diet that
20 includes more fresh fruits and vegetables to better control their
21 conditions and lead healthier lives.

22 (2) By April 1 of the current fiscal year, the department
23 shall submit a report to the report recipients required in section
24 246 of this part that must include, but is not limited to, how the
25 funding in this section enhanced the quality and coordination of
26 medical care, increased access to care, increased access to fresh
27 and nutritious food, and improved preventative health care among
28 those served by the program.

29 Sec. 1155. (1) From the funds appropriated in part 1 for the

1 uniform statewide sexual assault evidence kit tracking system, in
2 accordance with the final report of the sexual assault evidence kit
3 tracking and reporting commission, \$369,500.00 is allocated to
4 contract for the administration of a uniform statewide sexual
5 assault evidence kit tracking system. The system shall include the
6 following:

7 (a) A uniform statewide system to track the submission and
8 status of sexual assault evidence kits.

9 (b) A uniform statewide system to audit untested kits that
10 were collected on or before March 1, 2015 and were released by
11 victims to law enforcement.

12 (c) Secure electronic access for victims.

13 (d) The ability to accommodate concurrent data entry with kit
14 collection through various mechanisms, including web entry through
15 computer or smartphone, and through scanning devices.

16 (2) The sexual assault evidence tracking fund established in
17 section 1451 of 2017 PA 158 shall continue to be maintained in the
18 department of treasury. Money in the sexual assault evidence
19 tracking fund at the close of a fiscal year remains in the sexual
20 assault evidence tracking fund, does not revert to the general
21 fund, and shall be appropriated as provided by law for the
22 development and implementation of a uniform statewide sexual
23 assault evidence kit tracking system as described in subsection
24 (1).

25 (3) By September 30 of the current fiscal year, the department
26 shall submit to the report recipients required in section 246 of
27 this part a report on the findings of the annual audit of the
28 proper submission of sexual assault evidence kits under the sexual
29 assault kit evidence submission act, 2014 PA 227, MCL 752.931 to

1 752.935. The report must include, but is not limited to, a detailed
2 county-by-county compilation of the number of sexual assault
3 evidence kits that were properly submitted and the number that met
4 or did not meet deadlines established in the sexual assault kit
5 evidence submission act, 2014 PA 227, MCL 752.931 to 752.935, the
6 number of sexual assault evidence kits retrieved by law enforcement
7 after analysis, and the physical location of all released sexual
8 assault evidence kits collected by health care providers in that
9 year, as of the date of the annual draft report for each reporting
10 agency.

11 Sec. 1156. From the funds appropriated in part 1 for crime
12 victim rights services grants, the department shall allocate
13 \$2,000,000.00 from the crime victim's rights fund to maintain
14 increased grant funding to support the further use of crime victim
15 advocates in the criminal justice system. The purpose of the
16 additional funding is to increase available grant funding for crime
17 victim advocates to ensure that the advocates have the resources,
18 training, and funding needed to respond to the physical and
19 emotional needs of crime victims and to provide victims with the
20 necessary services, information, and assistance in order to help
21 them understand and participate in the criminal justice system and
22 experience a measure of safety and security throughout the legal
23 process.

24 Sec. 1157. From the funds appropriated in part 1 for child
25 advocacy centers - supplemental grants, the department shall
26 allocate \$2,000,000.00 to continue to provide additional funding to
27 child advocacy centers to support the general operations of child
28 advocacy centers by allocating the funding to each center
29 proportionally based on the number of children served at each

1 center during the previous fiscal year compared to the number of
2 total children served under this section. The purpose of this
3 additional funding is to increase the amount of services provided
4 to children and their families who are victims of abuse over the
5 amount provided in the previous fiscal year.

6 Sec. 1158. The general fund/general purpose revenue
7 appropriated in part 1 for crime victim rights services grants
8 shall be deposited into the crime victim's rights fund created
9 under section 4 of 1989 PA 196, MCL 780.904.

10 Sec. 1159. From the funds appropriated in part 1 for community
11 health programs, the department shall allocate \$5,000,000.00 for
12 the operation of mobile health units to provide preventive health
13 services for persons residing in areas with high disparities in
14 health care outcomes and access. The funds must be distributed as
15 follows:

16 (a) \$1,000,000.00 to a wellness center dedicated to enhancing
17 the well-being of individuals by providing an array of
18 comprehensive behavioral and physical health services in a trauma-
19 informed environment and promoting quality of life, continuous
20 improvement, social awareness, and healing. The wellness center
21 must have its administrative office located in a county with a
22 population of at least 1,750,000, and in a city with a population
23 between 109,000 and 111,000, according to the most recent federal
24 decennial census, and be accredited by CARF International.

25 (b) \$1,000,000.00 to a nonprofit organization organized under
26 the laws of this state that is exempt from federal income tax under
27 section 501(c)(3) of the internal revenue code of 1986, 26 USC 501,
28 with headquarters located in a township with a population between
29 31,000 and 38,000 and in a county with a population between 900,000

1 and 1,500,000, according to the most recent federal decennial
2 census. To be eligible for funds under this subdivision, the
3 nonprofit organization must have a stated mission to provide
4 treatment options for drug and alcohol addiction that have been
5 proven effective in decreasing relapse rates while increasing
6 treatment availability to a population that is largely underserved.

7 (c) \$3,000,000.00 to a 4-year state university located in a
8 city with a population greater than 600,000 according to the most
9 recent federal decennial census.

10 Sec. 1160. From the funds appropriated in part 1 for high
11 social vulnerability index community, the department shall allocate
12 \$4,000,000.00 to support long-term strategies to address access to
13 healthy food, affordable housing, safety networks, and other social
14 determinants of health. The funding must be allocated as follows:

15 (a) \$1,333,300.00 to a county with a population between 35,000
16 and 36,500 according to the most recent federal decennial census.

17 (b) \$1,333,300.00 to a county with a population between
18 180,000 and 193,000 according to the most recent federal decennial
19 census.

20 (c) \$1,333,400.00 to a city with a population greater than
21 600,000 according to the most recent federal decennial census.

22 Sec. 1162. (1) From the funds appropriated in part 1 for crime
23 victim justice assistance grants, the department shall allocate
24 \$6,666,000.00 for a 3-year trauma recovery center pilot program
25 project at 2 sites. The location of the pilot programs must be at
26 an adult level I Michigan designated trauma facility. One pilot
27 program shall be located in a city with a population of greater
28 than 500,000 according to the most recent federal decennial census
29 and the other pilot program must be located in a county with a

1 population between 600,000 and 700,000 according to the most recent
2 federal decennial census. A pilot program must utilize the
3 evidence-informed integrated trauma recovery services model for
4 service provision and delivery; comply with applicable statutory
5 requirements for administration, operation, service requirements,
6 and funding; and demonstrate adherence to all guidelines for
7 implementing and operating a trauma recovery center, as developed
8 by the National Alliance of Trauma Recovery Centers. The department
9 may award the funding to an adult level I Michigan designated
10 trauma facility that does not currently adhere to all guidelines
11 for implementing and operating a trauma recovery center but can
12 demonstrate the ability to comply with the guidelines on receipt of
13 the funds described in subsection (2).

14 (2) The allocated funding in subsection (1) must be
15 administered in the following manner:

16 (a) \$200,000.00 for technical assistance in operating and
17 implementing trauma recovery centers that adhere to the guidelines
18 developed by the National Alliance of Trauma Recovery Centers.

19 (b) \$3,000,000.00 per pilot program for the operational and
20 service delivery costs of administering the trauma recovery center.

21 (c) \$150,000.00 for data and outcomes of the pilot program at
22 both locations and to produce a report prior to the conclusion of
23 the pilot period.

24 (d) \$316,000.00 for administrative costs related to the pilot
25 program over the duration of the pilot program.

26 (3) The unexpended funds appropriated in part 1 for crime
27 victim justice assistance grants associated with trauma recovery
28 pilot program are designated as a work project appropriation.
29 Unencumbered or unallotted funds must not lapse at the end of the

1 fiscal year and must be available for expenditures under this
2 section until the project has been completed. All of the following
3 are in compliance with section 451a of the management and budget
4 act, 1984 PA 431, MCL 18.1451a:

5 (a) The purpose of the project is to ensure that the pilot
6 locations in the adult level I Michigan designated trauma
7 facilities are developing a model for trauma service provision and
8 delivery.

9 (b) The project will be accomplished by utilizing state
10 employees, contracting with vendors, or working with local
11 partners.

12 (c) The estimated cost of the project is \$6,666,000.00.

13 (d) The tentative completion date is September 30, 2028.

14 Sec. 1163. From the funds appropriated in part 1 for crime
15 victim justice assistance grants any federal victims of crime act
16 revenue as described in 34 USC 20101 to 20145 received in the
17 current fiscal year or any previous fiscal year must be allocated
18 by the department in the following manner and in the following
19 priority:

20 (a) The department shall allocate \$6,666,000.00 to the trauma
21 recovery center pilot program described in section 1162 of this
22 part.

23 (b) The department shall allocate \$12,000,000.00 for child
24 advocacy centers.

25 (c) The department shall allocate \$19,400,000.00 for domestic
26 violence services.

27 (d) The department shall allocate \$13,500,000.00 for sexual
28 assault victim services.

29 (e) The department shall allocate any remaining federal

1 victims of crime act revenue received to other services that are
2 eligible to qualify for funding under crime victim justice
3 assistance grants rules and regulations.
4

5 **EPIDEMIOLOGY, EMERGENCY MEDICAL SERVICES, AND LABORATORY**

6 Sec. 1180. From the funds appropriated in part 1 for
7 epidemiology administration and for childhood lead program, the
8 department shall maintain a public health drinking water unit and
9 maintain enhanced efforts to monitor child blood lead levels. The
10 public health drinking water unit shall ensure that appropriate
11 investigations of potential health hazards occur for all community
12 and noncommunity drinking water supplies where chemical exceedances
13 of action levels, health advisory levels, or maximum contaminant
14 limits are identified. The goals of the childhood lead program
15 shall include improving the identification of affected children,
16 the timeliness of case follow-up, and attainment of nurse care
17 management for children with lead exposure, and to achieve a long-
18 term reduction in the percentage of children in this state with
19 elevated blood lead levels.

20 Sec. 1181. From the funds appropriated in part 1 for
21 epidemiology administration, the department shall maintain a vapor
22 intrusion response unit. The vapor intrusion response unit shall
23 assess risks to public health at vapor intrusion sites and respond
24 to vapor intrusion risks where appropriate. The goals of the vapor
25 intrusion response unit shall include reducing the number of
26 residents of this state exposed to toxic substances through vapor
27 intrusion and improving health outcomes for individuals that are
28 identified as having been exposed to vapor intrusion.

29 Sec. 1182. By April 1 of the current fiscal year, the

1 department shall submit a report to the report recipients required
2 in section 246 of this part on the expenditures and activities
3 undertaken by the lead abatement program in the previous fiscal
4 year from the funds appropriated in part 1 for the healthy homes
5 program. The report shall include, but is not limited to, a funding
6 allocation schedule, the expenditures by category of expenditure
7 and by subcontractor, the revenues received, a description of
8 program elements, the number of housing units abated of lead-based
9 paint hazards, and a description of program accomplishments and
10 progress.

11 Sec. 1186. (1) From the funds appropriated in part 1 for
12 emergency medical services program, the department shall allocate
13 \$2,000,000.00 for a statewide stroke and STEMI system of care for
14 time-sensitive emergencies. This system must be integrated into the
15 statewide trauma care system within the emergency medical services
16 system and must include at least all of the following:

17 (a) The designation of facilities as stroke and STEMI
18 facilities based on a verification that national certification or
19 accreditation standards have been met.

20 (b) A requirement that a hospital is not required to be
21 designated as providing certain levels of care for stroke or STEMI.

22 (c) The development and utilization of stroke and STEMI
23 registries that utilize nationally recognized data platforms with
24 confidentiality standards.

25 (2) By March 1 of the current fiscal year, the department
26 shall submit a report to the report recipients required in section
27 246 of this part on the expenditures and activities undertaken by
28 the statewide stroke and STEMI system of care for time-sensitive
29 emergencies in the previous fiscal year from the funds appropriated

1 under section 1186(1) of article 6 of 2021 PA 87. The report must
2 include, but is not limited to, a funding allocation schedule,
3 expenditures by category of expenditure and by vendor or grantee,
4 and a description of program accomplishments and progress.

5 (3) For the purposes of this section, "STEMI" means an ST-
6 elevation myocardial infarction.

7 Sec. 1187. From the funds appropriated in part 1 for healthy
8 homes program, the department shall allocate \$20,025,000.00 to a
9 regional water authority located in a city with a population
10 greater than 500,000 according to the most recent federal decennial
11 census to relieve outstanding debt and payments owed to the
12 regional water system on behalf of a city with a population between
13 8,000 and 9,000 according to the most recent federal decennial
14 census and in a county with a population over 1,500,000 according
15 to the most recent federal decennial census. The funding in this
16 section shall be applied to the amounts due to the regional water
17 system with the longest payment arrearage duration.

18

19 **LOCAL HEALTH AND ADMINISTRATIVE SERVICES**

20 Sec. 1220. The amount appropriated in part 1 for
21 implementation of the 1993 additions of or amendments to sections
22 9161, 16221, 16226, 17014, 17015, and 17515 of the public health
23 code, 1978 PA 368, MCL 333.9161, 333.16221, 333.16226, 333.17014,
24 333.17015, and 333.17515, shall be used to reimburse local health
25 departments for costs incurred related to the implementation of
26 section 17015(18) of the public health code, 1978 PA 368, MCL
27 333.17015.

28 Sec. 1221. If a county that has participated in a district
29 health department or an associated arrangement with other local

1 health departments takes action to cease to participate in that
2 arrangement after October 1 of the current fiscal year, the
3 department may assess a penalty from the local health department's
4 operational accounts in an amount equal to no more than 6.25% of
5 the local health department's essential local public health
6 services funding. This penalty shall only be assessed to the local
7 county that requests the dissolution of the health department.

8 Sec. 1222. (1) Funds appropriated in part 1 for essential
9 local public health services shall be prospectively allocated to
10 local health departments to support immunizations, infectious
11 disease control, sexually transmitted disease control and
12 prevention, hearing screening, vision services, food protection,
13 public water supply, private groundwater supply, and on-site sewage
14 management. Food protection shall be provided in consultation with
15 the department of agriculture and rural development. Public water
16 supply, private groundwater supply, and on-site sewage management
17 shall be provided in consultation with the department of
18 environment, Great Lakes, and energy.

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

21 (3) Distributions in subsection (1) shall be made only to
22 counties that maintain local spending in the current fiscal year of
23 at least the amount expended in fiscal year 1992-1993 for the
24 services described in subsection (1).

25 (4) By February 1 of the current fiscal year, the department
26 shall submit a report to the report recipients required in section
27 246 of this part on the planned allocation of the funds
28 appropriated for essential local public health services.

29 (5) The department shall continue implementation of the

1 distribution formula for the allocation of essential local public
2 health services funding to local health departments as specified by
3 section 1234 of article X of 2018 PA 207.

4 (6) From the funds appropriated in part 1 for essential local
5 public health services, each local public health department is
6 allocated not less than the amount allocated to that local public
7 health department during the previous fiscal year.

8 Sec. 1227. The department shall establish criteria for all
9 funds allocated for health and wellness initiatives. The criteria
10 must include a requirement that all programs funded be evidence-
11 based and supported by research, include interventions that have
12 been shown to demonstrate outcomes that lower cost and improve
13 quality, and be designed for statewide impact. Preference must be
14 given to programs that utilize the funding as match for additional
15 resources, including, but not limited to, federal sources.

16 Sec. 1231. (1) From the funds appropriated for local health
17 services, up to \$4,750,000.00 shall be allocated for grants to
18 local public health departments to support PFAS response and
19 emerging public health threat activities. A portion of the funding
20 shall be allocated by the department in a collaborative fashion
21 with local public health departments in jurisdictions experiencing
22 PFAS contamination. The remainder of the funding shall be allocated
23 to address infectious and vector-borne disease threats, and other
24 environmental contamination issues such as vapor intrusion,
25 drinking water contamination, and lead exposure. The funding shall
26 be allocated to address issues, including, but not limited to,
27 staffing, planning and response, and creation and dissemination of
28 materials related to PFAS contamination issues and other emerging
29 public health issues and threats.

1 (2) By March 1 of the current fiscal year, the department
2 shall submit a report to the report recipients required in section
3 246 of this part on actual expenditures in the previous fiscal year
4 and planned spending in the current fiscal year of the funds
5 described in subsection (1), including recipient entities, amount
6 of allocation, general category of allocation, and detailed uses.

7 Sec. 1232. The department may work to ensure that the United
8 States Department of Defense reimburses the state for costs
9 associated with PFAS and environmental contamination response at
10 military training sites and support facilities.

11 Sec. 1233. General fund and state restricted fund
12 appropriations in part 1 shall not be expended for PFAS and
13 environmental contamination response where federal funding or
14 private grant funding is available for the same expenditures.

15 Sec. 1239. The department shall participate in and give
16 necessary assistance to the Michigan PFAS action response team
17 (MPART) pursuant to Executive Order No. 2019-03. The department
18 shall collaborate with MPART and other departments to carry out
19 appropriate activities, actions, and recommendations as coordinated
20 by MPART. Efforts shall be continuous to ensure that the
21 department's activities are not duplicative with activities of
22 another department or agency.

23
24 **HEALTHY MOMS, HEALTHY BABIES**

25 Sec. 1250. (1) From the funds appropriated in part 1 for
26 Healthy moms, healthy babies - CenteringPregnancy, by April 1 of
27 the current fiscal year, the department shall submit a report to
28 the report recipients required in section 246 of this part that
29 must include a list of the locations of CenteringPregnancy sites,

1 amount of funding by site, number of participants by site, preterm
2 birthrate data by site before implementing the CenteringPregnancy
3 model funded in part 1, and preterm birthrate data by site after
4 implementing the CenteringPregnancy model funded in part 1.

5 (2) As used in this section, "preterm birthrate data"
6 includes, but is not limited to, rates of disparity in preterm
7 birth rates by race, low birth weight births, lengths of stay in a
8 neonatal intensive care unit, breastfeeding rates, medical provider
9 satisfaction rates, and the total cost of care.

10 Sec. 1251. (1) From the funds appropriated in part 1 for
11 Healthy moms, healthy babies - MI-AIM bundles, by April 1 of the
12 current fiscal year, the department shall submit a report to the
13 report recipients required in section 246 of this part that shall
14 include hospitals that have implemented MI-AIM patient safety
15 bundles, hospitals that will implement MI-AIM patient safety
16 bundles with the funding included in part 1 for the current fiscal
17 year, amount of funding by hospital, a description of patient
18 safety bundles by hospital, maternal health quality data by
19 hospital prior to implementation of the MI-AIM patient safety
20 bundle funded in part 1, and maternal health quality data by
21 hospital after implementing MI-AIM patient safety bundle funded in
22 part 1.

23 (2) As used in this section, "maternal health quality data"
24 includes, but is not limited to, rates of disparity in maternal
25 death by race, rates of disparity in severe maternal morbidity by
26 race, rates of disparity in obstetric hemorrhage by race, rates of
27 disparity in severe hypertension by race, and rates of disparity in
28 maternal sepsis by race.

29 Sec. 1252. From the funds appropriated in part 1 for Healthy

1 moms, healthy babies - perinatal quality initiatives by April 1 of
2 the current fiscal year, the department shall submit a report to
3 the report recipients required in section 246 of this part that
4 must include a list of the locations of perinatal quality
5 collaborative sites, the amount of funding by site, a description
6 of programming, the amount of funding per location by programming
7 type, and a description of measurement techniques to determine if
8 funding in part 1 addresses poor health outcomes and health
9 inequities.

10 Sec. 1253. From the funds appropriated in part 1 for healthy
11 moms, healthy babies - Michigan child collaborative care, the
12 department shall allocate at least \$350,000.00 to address needs in
13 a city in which a declaration of emergency was issued because of
14 drinking water contamination.

15 Sec. 1254. (1) From the funds appropriated in part 1 for
16 healthy moms, healthy babies - diaper assistance program,
17 \$4,404,400.00 of state general fund/general purpose revenue must be
18 allocated as grants to diaper assistance programs, maternity homes,
19 and other nonprofit agencies that distribute diapers free of charge
20 and were established as of January 1, 2020. The funds must be used
21 only to purchase diapering supplies and related administrative
22 costs.

23 (2) The department shall expend no more than 5.0% of the funds
24 appropriated in part 1 for healthy moms, healthy babies - diaper
25 assistance program for administrative purposes.

26 (3) Funds appropriated for healthy moms, healthy babies -
27 diaper assistance program shall be considered work project funds,
28 shall not lapse at the close of the fiscal year, and shall be
29 available for expenditures for projects under this section until

1 the projects have been completed. The following are in compliance
2 with section 451a of the management and budget act, 1984 PA 431,
3 MCL 18.1451a:

4 (a) The purpose of the work project is to provide funding for
5 grants for eligible entities to distribute diapers free of charge.

6 (b) The work project will be accomplished through partnerships
7 with diaper assistance programs, maternity homes, and other
8 nonprofit agencies.

9 (c) The total estimated cost of the work project is
10 \$4,404,400.00.

11 (d) The tentative completion date is September 30, 2028.

12 Sec. 1255. From the funds appropriated in part 1 for healthy
13 moms, healthy babies - strong beginnings, the department shall
14 allocate \$1,000,000.00 through a competitive grant process after
15 fulfilling contract obligations between the department and a
16 federal Healthy Start Program located in a county with a population
17 between 600,000 and 700,000 according to the most recent federal
18 decennial census. The purpose of the grants is to improve health
19 outcomes before, during, and after pregnancy and to reduce racial
20 and ethnic differences in infant death rates and negative maternal
21 outcomes. To be eligible to receive funding, organizations must be
22 a partnership between various health agencies and provide support
23 to underserved populations for women's health, prenatal care, and
24 premature birth avoidance.

25 Sec. 1256. From the funds appropriated in part 1, the
26 department shall submit a report by March 1 to the report
27 recipients required in section 246 of this part on the outcomes and
28 performance measures of the healthy moms, healthy babies
29 initiatives. The report must include, but is not limited to, all of

1 the following:

2 (a) A summary of any request for proposals issued by this
3 state for the healthy moms, healthy babies initiatives.

4 (b) A summary of any healthy moms, healthy babies initiatives
5 that are established.

6 (c) Actual expenditures in the previous fiscal year and
7 planned expenditures in the current fiscal year of the funds
8 appropriated to support the healthy moms, healthy babies
9 initiatives, broken down by individual initiative. The information
10 must include all of the following individual initiatives:

11 (i) The expansion of Medicaid coverage to women from 60 days
12 postpartum to 12 months postpartum.

13 (ii) The expansion of home visiting program capacity.

14 (iii) The PlanFirst! Medicaid family planning benefit.

15 (iv) Perinatal Quality Collaboratives.

16 (v) The elimination of the 5-year waiting period for Medicaid
17 eligibility for lawfully residing children and pregnant women.

18 (vi) The expansion of the Michigan Alliance for Innovation in
19 Maternal Health (MiAIM) program.

20 (d) The change in severe eclampsia cases in the current fiscal
21 year compared to the previous fiscal year, broken down by each
22 hospital that participates in the MiAIM program.

23 (e) The change in the number of births by cesarean section in
24 the current fiscal year compared to the previous fiscal year,
25 broken down by each hospital that participates in the MiAIM
26 program.

27 (f) The statewide maternal mortality rate, broken down by
28 ethnicity for the current fiscal year and the statewide maternal
29 mortality rate broken down by ethnicity for the previous fiscal

1 year.

2

3 **FAMILY HEALTH SERVICES**

4 Sec. 1301. (1) Before April 1 of the current fiscal year, the
5 department shall submit a report to the house and senate fiscal
6 agencies and the state budget director on planned allocations from
7 the amounts appropriated in part 1 for local MCH services, prenatal
8 care outreach and service delivery support, family planning local
9 agreements, and pregnancy prevention programs. Using applicable
10 federal definitions, the report shall include information on all of
11 the following:

12 (a) Funding allocations.

13 (b) Actual number of women, children, and adolescents served
14 and amounts expended for each group for the previous fiscal year.

15 (c) A breakdown of the expenditure of these funds between
16 urban and rural communities.

17 (2) The department shall ensure that the distribution of funds
18 through the programs described in subsection (1) takes into account
19 the needs of rural communities.

20 (3) As used in this section, "rural" means a county, city,
21 village, or township with a population of 30,000 or less, including
22 those entities if located within a metropolitan statistical area.

23 Sec. 1306. (1) From the funds appropriated in part 1 for the
24 drinking water declaration of emergency, the department shall
25 allocate funds to address needs in a city in which a declaration of
26 emergency was issued because of drinking water contamination. These
27 funds may support, but are not limited to, the following
28 activities:

29 (a) Nutrition assistance, nutritional and community education,

1 food bank resources, and food inspections.

2 (b) Epidemiological analysis and case management of
3 individuals at risk of elevated blood lead levels.

4 (c) Support for child and adolescent health centers,
5 children's healthcare access program, and pathways to potential
6 programming.

7 (d) Nursing services, breastfeeding education, evidence-based
8 home visiting programs, intensive services, and outreach for
9 children exposed to lead coordinated through local community mental
10 health organizations.

11 (e) Department local office operations costs.

12 (f) Lead poisoning surveillance, investigations, treatment,
13 and abatement.

14 (g) Nutritional incentives provided to local residents through
15 the double up food bucks expansion program.

16 (h) Genesee County health department food inspectors to
17 perform water testing at local food service establishments.

18 (i) Transportation related to health care delivery.

19 (j) Senior initiatives.

20 (k) Lead abatement contractor workforce development.

21 (2) From the funds appropriated in part 1 for the drinking
22 water declaration of emergency, the department shall allocate
23 \$300,000.00 for Revive Community Health Center for health support
24 services as the center pursues certification as a federally
25 qualified health center.

26 (3) From the funds appropriated in part 1 for the drinking
27 water declaration of emergency, the department shall allocate
28 \$500,000.00 for rides to wellness through the Flint mass
29 transportation authority.

1 Sec. 1308. From the funds appropriated in part 1 for prenatal
2 care outreach and service delivery support, not less than
3 \$500,000.00 of funding shall be allocated for evidence-based
4 programs to reduce infant mortality. The funds shall be used for
5 enhanced support and education to nursing teams or other teams of
6 qualified health professionals, client recruitment in areas
7 designated as underserved for obstetrical and gynecological
8 services and other high-need communities, strategic planning to
9 expand and sustain programs, and marketing and communications of
10 programs to raise awareness, engage stakeholders, and recruit
11 nurses.

12 Sec. 1311. From the funds appropriated in part 1 for prenatal
13 care outreach and service delivery support, not less than
14 \$2,750,000.00 state general fund/general purpose funds shall be
15 allocated for a rural home visit program. Equal consideration shall
16 be given to all eligible evidence-based providers in all regions in
17 contracting for rural home visitation services.

18 Sec. 1313. (1) The department shall continue developing an
19 outreach program on fetal alcohol syndrome services, targeting
20 health promotion, prevention, and intervention.

21 (2) The department shall explore federal grant funding to
22 address prevention services for fetal alcohol syndrome and reduce
23 alcohol consumption among pregnant women.

24 Sec. 1314. The department shall seek to enhance education and
25 outreach efforts that encourage women of childbearing age to seek
26 confirmation at the earliest indication of possible pregnancy and
27 initiate continuous and routine prenatal care on confirmation of
28 pregnancy. The department shall seek to ensure that department
29 programs, policies, and practices promote prenatal and obstetrical

1 care by doing the following:

2 (a) Supporting access to care.

3 (b) Reducing and eliminating barriers to care.

4 (c) Supporting recommendations for best practices.

5 (d) Encouraging optimal prenatal habits such as prenatal
6 medical visits, use of prenatal vitamins, and cessation of use of
7 tobacco, alcohol, or drugs.

8 (e) Tracking of birth outcomes to study improvements in
9 prevalence of neonatal substance exposure, fetal alcohol syndrome,
10 and other preventable neonatal disease.

11 (f) Tracking of maternal increase in healthy behaviors
12 following childbirth.

13 Sec. 1315. (1) From the funds appropriated in part 1 for
14 dental programs, \$150,000.00 shall be allocated to the Michigan
15 Dental Association for the administration of a volunteer dental
16 program that provides dental services to the uninsured.

17 (2) By February 1 of the current fiscal year, the department
18 shall submit a report to the report recipients required in section
19 246 of this part on the number of individual patients treated,
20 number of procedures performed, and approximate total market value
21 of those procedures from the previous fiscal year.

22 Sec. 1316. The department shall use revenue from mobile
23 dentistry facility permit fees received under section 21605 of the
24 public health code, 1978 PA 368, MCL 333.21605, to offset the costs
25 of processing and issuing mobile dentistry facility permits.

26 Sec. 1317. (1) From the funds appropriated in part 1 for
27 dental programs, \$2,750,000.00 of general fund/general purpose
28 revenue and any associated federal match shall be distributed to
29 local health departments who partner with a qualified nonprofit

1 provider of dental services for the purpose of equipment and
2 technology upgrades needed to expand capacity and ensure
3 operational efficiencies.

4 (2) In order to be considered a qualified nonprofit provider
5 of dental services, the provider must demonstrate the following:

6 (a) An effective health insurance enrollment process for
7 uninsured patients.

8 (b) An effective process of charging patients on a sliding
9 scale based on the patient's ability to pay.

10 (c) Utilization of additional fund sources, including, but not
11 limited to, federal Medicaid matching funds.

12 Sec. 1321. From the funds appropriated in part 1 for the
13 Michigan model for health comprehensive health education curriculum
14 in the family, maternal, and child health administration line item,
15 the department may, in consultation with the department of
16 education, the Michigan domestic and sexual violence prevention and
17 treatment board, and the Michigan Coalition to End Domestic and
18 Sexual Violence, redraft the curriculum for the "Growing Up &
19 Staying Healthy" and "Healthy & Responsible Relationships" modules
20 to include age-appropriate information about each of the following:

21 (a) The importance of consent, setting and respecting personal
22 boundaries, and the prevention of child sexual abuse as outlined in
23 section 1505 of the revised school code, 1976 PA 451, MCL 380.1505,
24 and consistent with the recommendations and guidelines set by the
25 task force on the prevention of sexual abuse of children created
26 under section 12b of the child protection law, 1975 PA 238, MCL
27 722.632b.

28 (b) The prevention of sexual assault and dating violence.

29 (c) The prevention of human trafficking.

1 Sec. 1341. The department shall utilize income eligibility and
2 verification guidelines established by the Food and Nutrition
3 Service agency of the United States Department of Agriculture in
4 determining eligibility of individuals for the special supplemental
5 nutrition program for women, infants, and children (WIC) as stated
6 in current WIC policy.

7 Sec. 1342. From the funds appropriated in part 1 for family,
8 maternal, and child health administration, \$500,000.00 shall be
9 allocated for a school children's healthy exercise program to
10 promote and advance physical health for school children in
11 kindergarten through grade 8. The department shall recommend model
12 programs for sites to implement that incorporate evidence-based
13 best practices. The department shall grant the funds appropriated
14 in part 1 for before- and after-school programs. The department
15 shall establish guidelines for program sites, which may include
16 schools, community-based organizations, private facilities,
17 recreation centers, or other similar sites. The program format
18 shall encourage local determination of site activities and shall
19 encourage local inclusion of youth in the decision-making regarding
20 site activities. Program goals shall include children experiencing
21 improved physical health and access to physical activity
22 opportunities, the reduction of obesity, providing a safe place to
23 play and exercise, and nutrition education. To be eligible to
24 participate, program sites shall provide a 20% match to the state
25 funding, which may be provided in full, or in part, by a
26 corporation, foundation, or private partner. The department shall
27 seek financial support from corporate, foundation, or other private
28 partners for the program or for individual program sites.

29 Sec. 1343. From the funds appropriated in part 1 for dental

1 programs, the department shall allocate \$1,760,000.00 of state and
2 local funds plus any private contributions received to support the
3 program to establish and maintain a dental oral assessment program
4 to provide assessments to school children as provided in section
5 9316 of the public health code, 1978 PA 368, MCL 333.9316.

6 Sec. 1349. Subject to federal approval, from the funds
7 appropriated in part 1 for immunization program, the department
8 shall allocate \$740,000.00 of general fund/general purpose plus any
9 available work project funds and federal match through an
10 administered contract with oversight from behavioral and physical
11 health and aging services administration and public health
12 administration. The funds shall be used to support a statewide
13 media campaign for improving this state's immunization rates.

14

15 **CHILDREN'S SPECIAL HEALTH CARE SERVICES**

16 Sec. 1360. The department may do 1 or more of the following:

17 (a) Provide special formulas for eligible clients with
18 specified metabolic and allergic disorders.

19 (b) Provide medical care and treatment to eligible patients
20 with cystic fibrosis who are 26 years of age or older.

21 (c) Provide medical care and treatment to eligible patients
22 with hereditary coagulation defects, commonly known as hemophilia,
23 who are 26 years of age or older.

24 (d) Provide human growth hormone to eligible patients.

25 (e) Provide mental health care for mental health needs that
26 result from, or are a symptom of, the individual's qualifying
27 medical condition.

28 (f) Provide medical care and treatment to eligible patients
29 with sickle cell disease who are 26 years of age or older.

1 Sec. 1361. From the funds appropriated in part 1 for medical
2 care and treatment, the department may spend those funds for the
3 continued development and expansion of telemedicine capacity to
4 allow families with children in the children's special health care
5 services program to access specialty providers more readily and in
6 a more timely manner. The department may spend funds to support
7 chronic complex care management of children enrolled in the
8 children's special health care services program to minimize
9 hospitalizations and reduce costs to the program while improving
10 outcomes and quality of life.

11 Sec. 1363. From the funds appropriated in part 1 for
12 children's special health care services administration, the
13 department shall allocate \$100.00 as a grant to an independent
14 biomedical research and science education organization in a county
15 with a population between 600,000 and 700,000 and in a city with a
16 population over 185,000 according to the most recent federal
17 decennial census to be used for matching federal funds, private and
18 nonprofit grants, and private contributions.

19

20 **AGING SERVICES**

21 Sec. 1402. The department may encourage the Food Bank Council
22 of Michigan to collaborate directly with each area agency on aging
23 and any other organizations that provide senior nutrition services
24 to secure the food access of older adults.

25 Sec. 1417. The department shall submit to the report
26 recipients required in section 246 of this part a report by March
27 30 of the current fiscal year that contains all of the following:

28 (a) The total allocation of state resources made to each area
29 agency on aging by individual program and administration.

1 (b) Detailed expenditures by each area agency on aging by
 2 individual program and administration including both state-funded
 3 resources and locally funded resources.

4 Sec. 1421. From the funds appropriated in part 1 for community
 5 services, \$1,100,000.00 shall be allocated to area agencies on
 6 aging for locally determined needs.

7 Sec. 1425. The department shall coordinate with the department
 8 of licensing and regulatory affairs to ensure that, on receipt of
 9 the order of suspension of a licensed adult foster care home, home
 10 for the aged, or nursing home, the department of licensing and
 11 regulatory affairs shall provide notice to the department, to the
 12 house and senate appropriations subcommittees on the department
 13 budget, and to the members of the house and senate that represent
 14 the legislative districts of the county in which the facility lies.

15
 16 **HEALTH AND AGING SERVICES ADMINISTRATION**

17 Sec. 1505. By March 1 of the current fiscal year, the
 18 department shall submit a report to the report recipients required
 19 in section 246 of this part on the actual reimbursement savings and
 20 cost offsets that have resulted from the funds appropriated in part
 21 1 for the office of inspector general and third-party liability
 22 efforts in the previous fiscal year.

23 Sec. 1507. From the funds appropriated in part 1 for office of
 24 inspector general, the inspector general shall audit and recoup
 25 inappropriate or fraudulent payments from Medicaid managed care
 26 organizations to health care providers. Unless authorized by
 27 federal or state law, the department shall not fine, temporarily
 28 halt operations of, disenroll as a Medicaid provider, or terminate
 29 a managed care organization or health care provider from providing

1 services due to the discovery of an inappropriate payment found
2 during the course of an audit.

3 Sec. 1509. Due to the circumstances found in the department's
4 Medicaid non-emergency medical transportation (NEMT) services
5 program by the office of the auditor general (OAG) audit number
6 391-0715-20, the department shall submit a report to the report
7 recipients required in section 246 of this part by March 1 of the
8 current fiscal year on corrective actions taken to correct
9 deficiencies identified in the audit. The report must include, but
10 is not limited to, the following information:

11 (a) The results of periodic random samplings of NEMT broker
12 records to ensure compliance with provider eligibility
13 documentation requirements.

14 (b) Actions taken and improvements made as a result of the
15 formal vendor correction action plan implemented between the
16 department and the department of technology, management, and budget
17 with emphasis on improvements made in on-time performance, medical
18 needs form deficiencies, and efforts made for active and ongoing
19 monitoring.

20 (c) The results of periodic random samplings of NEMT broker
21 records to review documentation requirements with attention paid to
22 trip logs, medical needs forms, and any other information used to
23 support NEMT encounter claims.

24 (d) The results of periodic random samplings of Medicaid
25 health plans to ensure that NEMT encounter data is complete and
26 accurate and encounter claims are valid.

27 (e) The amount, if any, of monetary penalties or liquidated
28 damages assessed due to insufficient NEMT claims monitoring
29 procedures.

1 (f) The rationale and any funding limitations that prevent the
2 department from establishing performance standards and collecting
3 performance data for NEMT services for beneficiaries not covered
4 through a Medicaid health plan contract or an NEMT broker.

5 Sec. 1510. Due to the circumstances found in the department's
6 Medicaid and Children's Health Insurance Program (CHIP) eligibility
7 determinations processes by the office of the auditor general (OAG)
8 audit number 391-0710-19, the department shall submit a report to
9 the report recipients required in section 246 of this part by March
10 1 of the current fiscal year on corrective actions taken to reduce
11 improper payments to ineligible beneficiaries, to maintain proper
12 documentation and case files, and improvements made to the
13 department's internal controls in the previous fiscal year. The
14 report must include, but is not limited to, the following
15 information:

16 (a) The number of beneficiaries by type of assistance (TOA)
17 group whose TOA group was subsequently changed after initial
18 determination, the reasons initial classifications were incorrect
19 in the previous fiscal year, and a quantitative trend analysis
20 documenting an improved initial determination process from the
21 previous 2 fiscal years.

22 (b) The number of beneficiaries and the total amount of
23 payments made that were ineligible for federal reimbursement, not
24 due to a mistaken TOA category in the previous 2 fiscal years.

25 (c) For each of the previous 2 fiscal years, the department's
26 estimate of the net amount of federal reimbursement and state
27 spending made in error.

28 (d) A list of all of the sources that the department uses to
29 verify income for Medicaid and CHIP eligibility from the previous

1 fiscal year with the amount and percentage that each source was
2 used for verification and the total number of income verifications.

3 (e) The total number of beneficiaries in the previous fiscal
4 year who received full healthcare coverage but did not have a valid
5 Social Security number.

6 (f) The total number of beneficiaries in the previous fiscal
7 year who received full health care coverage as lawfully residing
8 children and pregnant women without a 5-year waiting period.

9 Sec. 1512. The updated Medicaid utilization and net cost
10 report shall continue to separate nonclinical administrative costs
11 from actual claims and encounter costs.

12 Sec. 1517. By October 1 of the current fiscal year, the
13 department shall submit a report to the report recipients required
14 in section 246 of this part on the progress of the implementation
15 of the specialty Medicaid managed care health plan for children in
16 foster care, as required under section 1517 of article 6 of 2021 PA
17 87.

18

19 **HEALTH SERVICES**

20 Sec. 1601. The cost of remedial services incurred by residents
21 of licensed adult foster care homes and licensed homes for the aged
22 shall be used in determining financial eligibility for the
23 medically needy. Remedial services include basic self-care and
24 rehabilitation training for a resident.

25 Sec. 1605. The protected income level for Medicaid coverage
26 determined pursuant to section 106(1)(b) *(iii)* of the social welfare
27 act, 1939 PA 280, MCL 400.106, shall be 100% of the related public
28 assistance standard.

29 Sec. 1606. For the purpose of guardian and conservator

1 charges, the department may deduct up to \$83.00 per month as an
2 allowable expense against a recipient's income when determining
3 Medicaid eligibility and patient pay amounts.

4 Sec. 1607. (1) An applicant for Medicaid, whose qualifying
5 condition is pregnancy, shall immediately be presumed to be
6 eligible for Medicaid coverage unless the preponderance of evidence
7 in the applicant's application indicates otherwise. The applicant
8 who is qualified as described in this subsection shall be allowed
9 to select or remain with the Medicaid participating obstetrician of
10 the applicant's choice.

11 (2) All qualifying applicants shall be entitled to receive all
12 medically necessary obstetrical and prenatal care without
13 preauthorization from a health plan. All claims submitted for
14 payment for obstetrical and prenatal care shall be paid at the
15 Medicaid fee-for-service rate in the event a contract does not
16 exist between the Medicaid participating obstetrical or prenatal
17 care provider and the managed care plan. The applicant shall
18 receive a listing of Medicaid physicians and managed care plans in
19 the immediate vicinity of the applicant's residence.

20 (3) In the event that an applicant, presumed to be eligible
21 under subsection (1), is subsequently found to be ineligible, a
22 Medicaid physician or managed care plan that has been providing
23 pregnancy services to an applicant under this section is entitled
24 to reimbursement for those services until they are notified by the
25 department that the applicant was found to be ineligible for
26 Medicaid.

27 (4) If the preponderance of evidence in an application
28 indicates that the applicant is not eligible for Medicaid, the
29 department shall refer that applicant to the nearest public health

1 clinic or similar entity as a potential source for receiving
2 pregnancy-related services.

3 (5) The department shall develop an enrollment process for
4 pregnant women covered under this section that facilitates the
5 selection of a managed care plan at the time of application.

6 (6) The department shall mandate enrollment of women, whose
7 qualifying condition for Medicaid is pregnancy, into Medicaid
8 managed care plans.

9 (7) The department shall encourage physicians to provide
10 women, whose qualifying condition for Medicaid is pregnancy, with a
11 referral to a Medicaid participating dentist at the first
12 pregnancy-related appointment.

13 Sec. 1611. (1) For care provided to Medicaid recipients with
14 other third-party sources of payment, Medicaid reimbursement shall
15 not exceed, in combination with such other resources, including
16 Medicare, those amounts established for Medicaid-only patients. The
17 Medicaid payment rate shall be accepted as payment in full. Other
18 than an approved Medicaid co-payment, no portion of a provider's
19 charge shall be billed to the recipient or any person acting on
20 behalf of the recipient. This section does not affect the level of
21 payment from a third-party source other than the Medicaid program.
22 The department shall require a nonenrolled provider to accept
23 Medicaid payments as payment in full.

24 (2) Notwithstanding subsection (1), Medicaid reimbursement for
25 hospital services provided to dual Medicare/Medicaid recipients
26 with Medicare part B coverage only shall equal, when combined with
27 payments for Medicare and other third-party resources, if any,
28 those amounts established for Medicaid-only patients, including
29 capital payments.

1 Sec. 1615. (1) To minimize errors and overpayments, and to
2 ensure the quality of actuarial rate setting of capitated rates,
3 the department shall provide effective oversight and ensure the
4 integrity of encounter claims submitted to the department by
5 Medicaid health plans.

6 (2) The department may require Medicaid health plans to
7 provide medical records to support claims data, on request by the
8 department. This subsection shall not require the disclosure of
9 personal identifying information or any information that would be
10 in violation of the health insurance portability and accountability
11 act of 1996, Public Law 104-191.

12 (3) It is the intent of the legislature that the department
13 perform annual internal audits of Medicaid claims provided by
14 Medicaid health plans and submit a report of the findings to the
15 report recipients required in section 246 of this part. Internal
16 audits performed under this subsection shall be conducted utilizing
17 quantitative methodologies that provide for valid statistical
18 results to include, but not be limited to, minimizing the impact of
19 selection bias and insufficient sample sizes.

20 (4) If an internal audit performed in accordance with this
21 section identifies discrepancies in the quality of actuarial rates,
22 the department shall develop and implement actuarial procedures to
23 reconcile encounter claims data and shall provide for a publicly
24 available explanation of these procedures on the department's
25 website.

26 Sec. 1616. (1) By September 30 of the current fiscal year, the
27 department shall seek federal authority to formally enroll and
28 recognize community health workers as providers and to utilize
29 Medicaid matching funds for community health worker services,

1 including the potential of leveraging of a Medicaid state plan
2 amendment, waiver authorities, or other means to secure financing
3 for community health worker services. The appropriate federal
4 approval must allow for community health worker services on a
5 statewide basis and must not be a limited geography waiver. The
6 authority should allow the application of community health worker
7 services statewide and maximize their utility by providing
8 financing that includes fee-for-service reimbursement, value-based
9 payment, or a combination of both fee-for-service reimbursement and
10 value-based payment for all services commensurate to their scope of
11 training and abilities as provided by evidence-based research and
12 programs.

13 (2) By September 30 of the current fiscal year, the department
14 shall submit a report to the report recipients required in section
15 246 of this part on the progress of meeting the requirements in
16 subsection (1).

17 Sec. 1617. (1) The department shall evaluate the merits of
18 transitioning the Medicaid reimbursement methodology for federally
19 qualified health centers from a prospective payment system to an
20 alternative payment methodology. The alternative payment
21 methodology must be a population-based capitated payment system
22 that is based on a per-patient per-month reimbursement for each
23 Medicaid recipient assigned to each federally qualified health
24 center.

25 (2) By September 30 of the current fiscal year, the department
26 shall submit a report on the findings of the evaluation required
27 under subsection (1) to the report recipients required in section
28 246 of this part.

29 Sec. 1620. (1) For fee-for-service Medicaid claims, the

1 professional dispensing fee for drugs indicated as specialty
2 medications on the Michigan pharmaceutical products list is \$20.02
3 or the pharmacy's submitted dispensing fee, whichever is less.

4 (2) For fee-for-service Medicaid claims, for drugs not
5 indicated as specialty drugs on the Michigan pharmaceutical
6 products list, the professional dispensing fee for medications is
7 as follows:

8 (a) For medications indicated as preferred on the department's
9 preferred drug list, \$10.80 or the pharmacy's submitted dispensing
10 fee, whichever is less.

11 (b) For medications not on the department's preferred drug
12 list, \$10.64 or the pharmacy's submitted dispensing fee, whichever
13 is less.

14 (c) For medications indicated as nonpreferred on the
15 department's preferred drug list, \$9.00 or the pharmacy's submitted
16 dispensing fee, whichever is less.

17 (3) The department shall require a prescription co-payment for
18 Medicaid recipients not enrolled in the Healthy Michigan plan or
19 with an income less than 100% of the federal poverty level of \$1.00
20 for a generic drug or any drug indicated as preferred on the
21 department's preferred drug list and \$3.00 for a brand-name drug
22 not indicated as preferred on the department's preferred drug list,
23 except as prohibited by federal or state law or regulation.

24 (4) The department shall require a prescription co-payment for
25 Medicaid recipients enrolled in the Healthy Michigan plan with an
26 income of at least 100% of the federal poverty level of \$4.00 for a
27 generic drug or any drug indicated as preferred on the department's
28 preferred drug list and \$8.00 for a brand-name drug not indicated
29 as preferred on the department's preferred drug list, except as

1 prohibited by federal or state law or regulation.

2 Sec. 1625. The department shall not enter into any contract
3 with a Medicaid managed care organization that relies on a pharmacy
4 benefit manager that does not do all of the following:

5 (a) For pharmacies with not more than 7 retail outlets,
6 utilizes a pharmacy reimbursement methodology of the national
7 average drug acquisition cost plus a professional dispensing fee
8 comparable to the applicable professional dispensing fee provided
9 under section 1620. The pharmacy benefit manager or the involved
10 pharmacy services administrative organization shall not receive any
11 portion of the additional professional dispensing fee. The
12 department shall identify the pharmacies this subdivision applies
13 to and provide the list of applicable pharmacies to the Medicaid
14 managed care organizations.

15 (b) For pharmacies with not more than 7 retail outlets,
16 utilizes a pharmacy reimbursement methodology, when a national
17 average drug acquisition cost price is not available, for brand
18 drugs of the lesser of the wholesale acquisition cost, the average
19 wholesale price less 16.7% plus a professional dispensing fee
20 comparable to the applicable professional dispensing fee provided
21 under section 1620, or the usual and customary charge by the
22 pharmacy. The department shall identify the pharmacies this
23 subdivision applies to and provide the list of applicable
24 pharmacies to the Medicaid managed care organizations.

25 (c) For pharmacies with not more than 7 retail outlets,
26 utilizes a pharmacy reimbursement methodology, when a national
27 average drug acquisition cost price is not available, for generic
28 drugs of the lesser of wholesale acquisition cost plus a
29 professional dispensing fee comparable to the applicable

1 professional dispensing fee provided under section 1620, average
2 wholesale price less 30.0% plus a professional dispensing fee
3 comparable to the applicable professional dispensing fee provided
4 under section 1620, or the usual and customary charge by the
5 pharmacy. The department shall identify the pharmacies this
6 subdivision applies to and provide the list of applicable
7 pharmacies to the Medicaid managed care organizations.

8 (d) Reimburses for a legally valid claim at a rate not less
9 than the rate in effect at the time the original claim adjudication
10 as submitted at the point of sale.

11 (e) Agrees to move to a transparent "pass-through" pricing
12 model, in which the pharmacy benefit manager discloses the
13 administrative fee as a percentage of the professional dispensing
14 costs to the department.

15 (f) Agrees to not create new pharmacy administration fees and
16 to not increase current fees more than the rate of inflation. This
17 subdivision does not apply to any federal rule or action that
18 creates a new fee.

19 (g) Agrees to not terminate an existing contract with a
20 pharmacy with not more than 7 retail outlets for the sole reason of
21 the additional professional dispensing fee authorized under this
22 section.

23 Sec. 1626. (1) By January 15 of the current fiscal year, each
24 pharmacy benefit manager that receives reimbursements, either
25 directly or through a Medicaid health plan, from the funds
26 appropriated in part 1 for medical services must submit all of the
27 following information to the department for the previous fiscal
28 year:

29 (a) The total number of prescriptions that were dispensed.

1 (b) The aggregate wholesale acquisition cost for each drug on
2 its formulary.

3 (c) The aggregate amount of rebates, discounts, and price
4 concessions that the pharmacy benefit manager received for each
5 drug on its formulary. The amount of rebates shall include any
6 utilization discounts the pharmacy benefit manager receives from a
7 manufacturer.

8 (d) The aggregate amount of administrative fees that the
9 pharmacy benefit manager received from all pharmaceutical
10 manufacturers.

11 (e) The aggregate amount identified in subdivisions (b) and
12 (c) that were retained by the pharmacy benefit manager and did not
13 pass through to the department or to the Medicaid health plan.

14 (f) The aggregate amount of reimbursements the pharmacy
15 benefit manager pays to contracting pharmacies.

16 (g) Any other information considered necessary by the
17 department.

18 (2) By March 1 of the current fiscal year, the department
19 shall submit the information provided under subsection (1) to the
20 report recipients required in section 246 of this part.

21 (3) Any nonaggregated information submitted under this section
22 shall be confidential and shall not be disclosed to any person by
23 the department. Such information is not considered a public record
24 of the department.

25 Sec. 1627. By April 1 of the current fiscal year, the
26 department shall provide a report to the report recipients required
27 in section 246 of this part on both of the following:

28 (a) The cost per Medicaid prescription for the fee-for-service
29 population and separately the cost per Medicaid prescription for

1 the managed care population for the fiscal years ending September
2 30, 2017 through the previous fiscal year.

3 (b) Projected cost per Medicaid prescription for the fee-for-
4 service population and projected cost per Medicaid prescription for
5 the managed care population for the current fiscal year.

6 Sec. 1628. From the funds appropriated in part 1 for hospital
7 services and therapy and Healthy Michigan plan, the department
8 shall continue to allocate \$3,000,000.00 in general fund/general
9 purpose revenue and any associated federal match to maintain the
10 Medicaid reimbursement rate for dental services provided at
11 ambulatory surgical centers and outpatient hospitals. The funding
12 provided in this section must be used to maintain the minimum rate
13 for dental services provided in ambulatory surgical centers at
14 \$1,495.00 and maintain the minimum rate for dental services
15 provided in outpatient hospitals at \$2,300.00.

16 Sec. 1629. The department shall utilize maximum allowable cost
17 pricing for generic drugs that is based on wholesaler pricing to
18 providers that is available from at least 2 wholesalers who deliver
19 in this state.

20 Sec. 1630. From the funds appropriated in part 1 for Medicaid
21 dental services, by April 1 of the current fiscal year, the
22 department shall submit a report to the report recipients required
23 in section 246 of this part on the dental service benefit. The
24 report must cover all of the following areas:

25 (a) Information on the implementation of the Adult Medicaid
26 dental benefit redesign including all of the following:

27 (i) Information on the implementation of increased dental
28 service rates including the status of the integration of the adult
29 dental benefit into Medicaid health plans, ranking of current

1 reimbursement rates with other states within the Midwest, and
2 discussion of the rebase of the dental rate parity process.

3 (ii) Information on the number of dental providers, by Medicaid
4 health plan in this state who provided 1 or more Medicaid dental
5 services in fiscal year 2021-2022 and the number of additional
6 providers who were added in the previous fiscal year, with a
7 particular focus on the correlation between the average payment per
8 visit and number of enrolled dental providers before and after the
9 implementation of the adult dental benefit redesign.

10 (iii) Information on the status of enhanced care coordination
11 and data that tracks the utilization of preventive care and
12 reductions in avoidable costs in the periods before the adult
13 dental redesign and in the periods after the adult dental redesign.

14 (iv) Information on the array of covered dental benefits and
15 services before the adult dental redesign and how the available
16 benefits and services changed or expanded after the adult dental
17 redesign.

18 (b) Information on Medicaid dental services provided to
19 pregnant women and individuals including the number of pregnant
20 women enrolled in Medicaid who visited a dentist in the previous
21 fiscal year and the number of dentists statewide who participate in
22 providing dental services to pregnant women and individuals
23 enrolled in Medicaid.

24 (c) Information on the Healthy Kids Dental program including
25 all of the following:

26 (i) The number of children enrolled in the Healthy Kids Dental
27 program who visited the dentist in the previous fiscal year broken
28 down by dental benefit manager.

29 (ii) The number of dentists who accept payment from the Healthy

1 Kids Dental program broken down by dental benefit manager.

2 (iii) The annual change in dental utilization of children
3 enrolled in the Healthy Kids Dental program broken down by dental
4 benefit manager.

5 (iv) Service expenditures for the Healthy Kids Dental program
6 broken down by dental benefit manager.

7 (v) Administrative expenditures for the Healthy Kids Dental
8 program broken down by dental benefit manager.

9 Sec. 1631. (1) The department shall require co-payments on
10 dental, podiatric, and vision services provided to Medicaid
11 recipients, except as prohibited by federal or state law or
12 regulation.

13 (2) Except as otherwise prohibited by federal or state law or
14 regulation, the department shall require Medicaid recipients not
15 enrolled in the Healthy Michigan plan or with an income less than
16 100% of the federal poverty level to pay not less than the
17 following co-payments:

18 (a) Two dollars for a physician office visit.

19 (b) Three dollars for a hospital emergency room visit.

20 (c) Fifty dollars for the first day of an inpatient hospital
21 stay.

22 (d) Two dollars for an outpatient hospital visit.

23 (3) Except as otherwise prohibited by federal or state law or
24 regulation, the department shall require Medicaid recipients
25 enrolled in the Healthy Michigan plan with an income of at least
26 100% of the federal poverty level to pay the following co-payments:

27 (a) Four dollars for a physician office visit.

28 (b) Eight dollars for a hospital emergency room visit.

29 (c) One hundred dollars for the first day of an inpatient

1 hospital stay.

2 (d) Four dollars for an outpatient hospital visit or any other
3 medical provider visit to the extent allowed by federal or state
4 law or regulation.

5 Sec. 1641. An institutional provider that is required to
6 submit a cost report under the Medicaid program shall submit cost
7 reports completed in full within 5 months after the end of its
8 fiscal year.

9 Sec. 1644. (1) From the funds appropriated in part 1, the
10 department shall increase the direct care wage by \$0.65 per hour to
11 direct care workers employed by skilled nursing facilities from the
12 previous fiscal year. This funding must include all costs incurred
13 by the employer, including payroll taxes, due to the wage increase.
14 As used in this subsection, "direct care workers" means a
15 registered professional nurse, licensed practical nurse,
16 competency-evaluated nursing assistant, and respiratory therapist.

17 (2) From the funds appropriated in part 1, the department
18 shall increase the direct care wage by \$0.65 per hour to direct
19 care workers employed by licensed adult foster care facilities and
20 licensed homes for the aged from the previous fiscal year that
21 provide Medicaid-funded fee-for-service personal care services that
22 were not eligible for any direct care worker pay adjustment under
23 Medicaid-funded managed care. This funding must include all costs
24 incurred by the employer, including payroll taxes, due to the wage
25 increase.

26 Sec. 1645. (1) It is the intent of the legislature that the
27 department establish the class I nursing facility current asset
28 value bed limit based on the rolling 15-year history of new
29 construction.

1 (2) It is the intent of the legislature that, for the fiscal
2 year beginning October 1, 2023, the department modify the class I
3 nursing facility current asset value bed limit based on the rolling
4 15-year history of new construction. The increase in the current
5 asset value bed limit shall not exceed 4% of the limit for the
6 previous fiscal year.

7 Sec. 1646. (1) From the funds appropriated in part 1 for long-
8 term care services, the department shall continue to administer a
9 nursing facility quality measure initiative program. The initiative
10 shall be financed through the quality assurance assessment for
11 nursing homes and hospital long-term care units, and the funds
12 shall be distributed according to the following criteria:

13 (a) The department shall award more dollars to nursing
14 facilities that have a higher CMS 5-star quality measure domain
15 rating, then adjusted to account for both positive and negative
16 aspects of a patient satisfaction survey.

17 (b) A nursing facility with a CMS 5-star quality measure
18 domain star rating of 1 or 2 must file an action plan with the
19 department describing how it intends to use funds appropriated
20 under this section to increase quality outcomes before funding
21 shall be released.

22 (c) The total incentive dollars must reflect the following
23 Medicaid utilization scale:

24 (i) For nursing facilities with a Medicaid participation rate
25 of above 63%, the facility shall receive 100% of the incentive
26 payment.

27 (ii) For nursing facilities with a Medicaid participation rate
28 between 50% and 63%, the facility shall receive 75% of the
29 incentive payment.

1 (iii) For nursing facilities with a Medicaid participation rate
2 of less than 50%, the facility shall receive a payment
3 proportionate to their Medicaid participation rate.

4 (iv) For nursing facilities not enrolled in Medicaid, the
5 facility shall not receive an incentive payment.

6 (d) Facilities designated as special focus facilities are not
7 eligible for any payment under this section.

8 (e) Number of licensed beds.

9 (2) The department and nursing facility representatives shall
10 evaluate the quality measure incentive program's effectiveness on
11 quality, measured by the change in the CMS 5-star quality measure
12 domain rating since the implementation of quality measure incentive
13 program. By March 1 of the current fiscal year, the department
14 shall submit a report to the report recipients required in section
15 246 of this part on the findings of the evaluation.

16 Sec. 1647. By October 1 of the current fiscal year, the
17 department shall submit a report to the report recipients required
18 in section 246 of this part on the status of *Maple Manor Rehab*
19 *Center of Wayne v Mich Dep't of Treasury*, Docket No. 359235.

20 Sec. 1657. (1) Reimbursement for Medicaid to screen and
21 stabilize a Medicaid recipient, including stabilization of a
22 psychiatric crisis, in a hospital emergency room shall not be made
23 contingent on obtaining prior authorization from the recipient's
24 HMO. If the recipient is discharged from the emergency room, the
25 hospital shall notify the recipient's HMO within 24 hours of the
26 diagnosis and treatment received.

27 (2) If the treating hospital determines that the recipient
28 will require further medical service or hospitalization beyond the
29 point of stabilization, that hospital shall receive authorization

1 from the recipient's HMO prior to admitting the recipient.

2 (3) Subsections (1) and (2) do not require an alteration to an
3 existing agreement between an HMO and its contracting hospitals and
4 do not require an HMO to reimburse for services that are not
5 considered to be medically necessary.

6 Sec. 1662. (1) The department shall ensure that an external
7 quality review of each contracting HMO is performed that results in
8 an analysis and evaluation of aggregated information on quality,
9 timeliness, and access to health care services that the HMO or its
10 contractors furnish to Medicaid beneficiaries.

11 (2) The department shall require Medicaid HMOs to provide
12 EPSDT utilization data through the encounter data system, and HEDIS
13 well child health measures in accordance with the National
14 Committee for Quality Assurance prescribed methodology.

15 (3) The department shall provide a copy of the analysis of the
16 Medicaid HMO annual audited HEDIS reports and the annual external
17 quality review report to the report recipients required in section
18 246 of this part within 30 days after the department's receipt of
19 the final reports from the contractors.

20 Sec. 1670. (1) The appropriation in part 1 for the MICHild
21 program is to be used to provide comprehensive health care to all
22 children under age 19 who reside in families with income at or
23 below 212% of the federal poverty level, who are uninsured and have
24 not had coverage by other comprehensive health insurance within 6
25 months of making application for MICHild benefits, and who are
26 residents of this state. The department shall develop detailed
27 eligibility criteria through the behavioral and physical health and
28 aging services administration public concurrence process,
29 consistent with the provisions of this part and part 1.

1 (2) The department may provide up to 1 year of continuous
2 eligibility to children eligible for the MIChild program unless the
3 family fails to pay the monthly premium, a child reaches age 19, or
4 the status of the children's family changes and its members no
5 longer meet the eligibility criteria as specified in the state
6 plan.

7 (3) The department may make payments on behalf of children
8 enrolled in the MIChild program as described in the MIChild state
9 plan approved by the United States Department of Health and Human
10 Services, or from other medical services.

11 Sec. 1677. The MIChild program shall provide, at a minimum,
12 all benefits available under the Michigan benchmark plan that are
13 delivered through contracted providers and consistent with federal
14 law, including, but not limited to, the following medically
15 necessary services:

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

20 (b) Outpatient mental health services, other than substance
21 use disorder services, including services furnished in a state-
22 operated mental hospital and community-based services.

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

25 (d) Dental services as outlined in the approved MIChild state
26 plan.

27 (e) Substance use disorder treatment services that may include
28 inpatient, outpatient, and residential substance use disorder
29 treatment services.

1 (f) Care management services for mental health diagnoses.

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

4 (h) Emergency ambulance services.

5 Sec. 1682. (1) In addition to the appropriations in part 1,
6 the department is authorized to receive and spend penalty money
7 received as the result of noncompliance with Medicaid certification
8 regulations. Penalty money, characterized as private funds,
9 received by the department shall increase authorizations and
10 allotments in the long-term care accounts.

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

13 (3) By March 1 of the current fiscal year, the department
14 shall submit a report to the report recipients required in section
15 246 of this part on penalty money received by the department as
16 described in subsection (1). The report shall include, but is not
17 limited to, the following information:

18 (a) The amount of penalty monies received by the department
19 received in the previous fiscal year listed by the assessed entity.

20 (b) A list of the entities who were assessed penalties in the
21 previous fiscal year with the rationale for each penalty.

22 Sec. 1692. (1) The department is authorized to pursue
23 reimbursement for eligible services provided in Michigan schools
24 from the federal Medicaid program. The department and the state
25 budget director are authorized to negotiate and enter into
26 agreements, together with the department of education, with local
27 and intermediate school districts regarding the sharing of federal
28 Medicaid services funds received for these services. The department
29 is authorized to receive and disburse funds to participating school

1 districts pursuant to such agreements and state and federal law.

2 (2) From the funds appropriated in part 1 for health services
3 school-based services payments, the department is authorized to do
4 all of the following:

5 (a) Finance activities within the behavioral and physical
6 health and aging services administration related to this project.

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

10 (c) Offset general fund costs associated with the Medicaid
11 program.

12 Sec. 1693. The special Medicaid reimbursement appropriation in
13 part 1 may be increased if the department submits a Medicaid state
14 plan amendment pertaining to this line item at a level higher than
15 the appropriation. The department is authorized to appropriately
16 adjust financing sources in accordance with the increased
17 appropriation.

18 Sec. 1694. From the funds appropriated in part 1 for special
19 Medicaid reimbursement, \$1,500,000.00 of general fund/general
20 purpose revenue and any associated federal match shall be
21 distributed for poison control services to an academic health care
22 system that has a high indigent care volume.

23 Sec. 1697. The department shall require that Medicaid health
24 plans administering Healthy Michigan plan benefits maintain a
25 network of dental providers in sufficient numbers, mix, and
26 geographic locations throughout their respective service areas in
27 order to provide adequate dental care for Healthy Michigan plan
28 enrollees.

29 Sec. 1699. (1) The department may make separate payments in

1 the amount of \$45,000,000.00 directly to qualifying hospitals
2 serving a disproportionate share of indigent patients and to
3 hospitals providing GME training programs. If direct payment for
4 GME and DSH is made to qualifying hospitals for services to
5 Medicaid recipients, hospitals shall not include GME costs or DSH
6 payments in their contracts with HMOs.

7 (2) The department shall allocate \$45,000,000.00 in DSH
8 funding using the distribution methodology used in fiscal year
9 2003-2004.

10 Sec. 1700. By December 1 of the current fiscal year, the
11 department shall submit a report to the report recipients required
12 in section 246 of this part on the distribution of funding
13 provided, and the net benefit if the special hospital payment is
14 not financed with general fund/general purpose revenue, to each
15 eligible hospital during the previous fiscal year from the
16 following special hospital payments:

17 (a) DSH, separated out by unique DSH pool.

18 (b) GME.

19 (c) Special rural hospital payments provided under section
20 1802(2) of this part.

21 (d) Lump-sum payments to rural hospitals for obstetrical care
22 provided under section 1802(1) of this part.

23 Sec. 1702. From the funds appropriated in part 1, the
24 department shall maintain the rates in place as of September 30,
25 2023 for private duty nursing services for Medicaid beneficiaries
26 under 26 years of age. These additional funds must be used to
27 attract and retain highly qualified registered nurses and licensed
28 practical nurses to provide private duty nursing services so that
29 medically fragile individuals can be cared for in the most homelike

1 setting possible.

2 Sec. 1757. The department shall obtain proof from all Medicaid
3 recipients that they are United States citizens or otherwise
4 legally residing in this country and that they are residents of
5 this state before approving Medicaid eligibility.

6 Sec. 1764. The department shall annually certify whether rates
7 paid to Medicaid health plans and specialty PIHPs are actuarially
8 sound in accordance with federal requirements and shall provide a
9 copy of the rate certification and approval of rates paid to
10 Medicaid health plans and specialty PIHPs for any fiscal year by
11 October 15 for Medicaid capitation rate certifications and by
12 February 15, May 15, and August 15 for any Medicaid capitation rate
13 amendments to the report recipients required in section 246 of this
14 part. Following the rate certification, the department shall ensure
15 that no new or revised state Medicaid policy bulletin that is
16 promulgated materially impacts the capitation rates that have been
17 certified.

18 Sec. 1775. (1) By March 1 of the current fiscal year, the
19 department shall submit a report to the report recipients required
20 in section 246 of this part on progress in implementing changes to
21 the waiver to implement managed care for individuals who are
22 eligible for both Medicare and Medicaid, known as MI Health Link.
23 The report must include progress updates on the transition to dual
24 eligible special needs plans in compliance with CMS regulations.

25 (2) The department shall ensure the existence of an ombudsman
26 program that is not associated with any project service manager or
27 provider to assist MI Health Link beneficiaries with navigating
28 complaint and dispute resolution mechanisms and to identify
29 problems in the demonstrations and in the complaint and dispute

1 resolution mechanisms.

2 Sec. 1786. (1) From the funds appropriated in part 1, the
3 department shall maintain Medicaid reimbursement for the
4 administration of injectable vaccines at \$16.13 and administration
5 of oral vaccines at \$12.25.

6 (2) The intent of the rate increases in subsection (1) is to
7 improve immunization rates among Medicaid beneficiaries and reduce
8 the spread of preventable illness.

9 Sec. 1788. From the funds appropriated in part 1, the
10 department shall provide Medicaid reimbursement rates, including
11 Medicaid reimbursements from the ambulance provider quality
12 assurance assessment, for ground ambulance services at not less
13 than 100% of the full allowable Medicare rates for Locality 01 for
14 those services in effect on January 1, 2023.

15 Sec. 1790. The department shall maintain the current
16 practitioner rates paid for current procedural terminology (CPT)
17 codes 90791 through 90899 for psychiatric procedures through
18 Medicaid fee-for-service and through the comprehensive Medicaid
19 health plans for psychiatric procedures provided for Medicaid
20 recipients under 21 years of age.

21 Sec. 1791. From the funds appropriated in part 1 for health
22 plan services and physician services, the department shall provide
23 Medicaid reimbursement rates for neonatal services at 100% of the
24 Medicare rate received for those services in effect on the date the
25 services are provided to eligible Medicaid recipients. The current
26 procedural terminology (CPT) codes that are eligible for this
27 reimbursement rate increase are 99468, 99469, 99471, 99472, 99475,
28 99476, 99477, 99478, 99479, and 99480.

29 Sec. 1792. By April 30 of the current fiscal year, the

1 department shall evaluate pharmacy encounter data through the first
2 2 quarters of the fiscal year to determine, in consultation with
3 the Medicaid health plans, if rates must be recertified. By May 30
4 of the current fiscal year, the department shall submit a report on
5 the evaluation results to the report recipients required in section
6 246 of this part, and the Medicaid health plans.

7 Sec. 1801. From the funds appropriated in part 1 for physician
8 services and health plan services, the department shall continue
9 the increase to Medicaid rates for primary care services provided
10 only by primary care providers. Providers performing a service and
11 whose primary practice is as a non-primary-care subspecialty are
12 not eligible for the increase. The department shall establish
13 policies that most effectively limit the increase to primary care
14 providers for primary care services only. As used in this section,
15 "primary care provider" means a physician, or a practitioner
16 working in collaboration with a physician, who is either licensed
17 under part 170 or part 175 of the public health code, 1978 PA 368,
18 MCL 333.17001 to 333.17097 and 333.17501 to 333.17556, and working
19 as a primary care provider in general practice or board-eligible or
20 certified with a specialty designation of family medicine, general
21 internal medicine, or pediatric medicine, or a provider who
22 provides the department with documentation of equivalency.

23 Sec. 1802. (1) From the funds appropriated in part 1 for
24 hospital services and therapy, \$7,995,200.00 in general
25 fund/general purpose revenue shall be provided as lump-sum payments
26 to noncritical access hospitals that qualified for rural hospital
27 access payments in fiscal year 2013-2014 and that provide
28 obstetrical care in the current fiscal year. Payment amounts shall
29 be based on the volume of obstetrical care cases and newborn care

1 cases for all such cases billed by each qualified hospital in the
2 most recent year for which data is available. Payments shall be
3 made by January 1 of the current fiscal year.

4 (2) From the funds appropriated in part 1 for hospital
5 services and therapy and Healthy Michigan plan, \$15,204,800.00 in
6 general fund/general purpose revenue and any associated federal
7 match shall be awarded as rural access payments to noncritical
8 access hospitals that meet criteria established by the department
9 for services to low-income rural residents. One of the
10 reimbursement components of the distribution formula shall be
11 assistance with labor and delivery services. The department shall
12 ensure that the rural access payments described in this subsection
13 are distributed in a manner that ensures all of the following:

14 (a) A hospital does not receive more than 10.0% of the total
15 rural access funding referenced in this subsection.

16 (b) The methodology for distribution under this subsection and
17 its applicable data that are used to determine the payment amounts
18 are provided to each hospital by August 1 of the current fiscal
19 year.

20 (c) Noncritical access hospitals shall be eligible if the
21 hospital is located in a county with a population of not more than
22 165,000 according to the most recent federal decennial census and
23 within a city, village, or township with a population of not more
24 than 15,000 according to the most recent federal decennial census.

25 (3) The department shall publish the distribution of payments
26 for the current fiscal year and the previous fiscal year.

27 Sec. 1804. The department shall utilize the federal public
28 assistance reporting information system to continue to work to
29 identify Medicaid recipients who are veterans and who may be

1 eligible for federal veterans' health care benefits or other
2 benefits and shall continue to refer veterans to the department of
3 military and veterans affairs for assistance in securing additional
4 benefits.

5 Sec. 1808. The department shall provide preference to health
6 plans that are owned by nonprofit hospitals or integrated health
7 systems licensed in Michigan, or that are wholly or majority-owned
8 by nonprofit health plans based and licensed in Michigan, in the
9 rebid for the comprehensive health plan contract for Michigan's
10 Medicaid program.

11 Sec. 1810. In advance of the annual rate setting development,
12 Medicaid health plans shall be given at least 60 days to dispute
13 and correct any discarded encounter data before rates are
14 certified. The department shall notify each contracting Medicaid
15 health plan of any encounter data that have not been accepted for
16 the purposes of rate setting.

17 Sec. 1812. By June 1 of the current fiscal year, and using the
18 most recent available cost reports, the department shall submit a
19 report on all direct and indirect costs associated with residency
20 training programs for each hospital that receives funds
21 appropriated in part 1 for graduate medical education or through
22 the MiDocs consortium to the report recipients required in section
23 246 of this part.

24 Sec. 1815. From the funds appropriated in part 1 for health
25 plan services, Healthy Michigan plan, and hospital services and
26 therapy, the department shall allocate \$10,000,000.00 in general
27 fund/general purpose revenue and any associated federal match to
28 increase Medicaid reimbursement rates. The rates shall be increased
29 in all of the following areas:

1 (a) \$3,470,000.00 in general fund/general purpose revenue and
2 any associated federal match to increase moms and babies inpatient
3 rates defined as all patient refined diagnosis related groups codes
4 539 through 640.

5 (b) \$4,360,000.00 in general fund/general purpose revenue and
6 any associated federal match to increase hospital outpatient rates,
7 including those paid as part of a bundle, those paid separately,
8 and fee schedule items.

9 (c) \$2,040,000.00 in general fund/general purpose revenue and
10 any associated federal match to increase inpatient psychiatric base
11 rates.

12 (d) \$130,000.00 in general fund/general purpose revenue and
13 any associated federal match to increase rates for professional
14 obstetric rates.

15 Sec. 1820. (1) In order to avoid duplication of efforts, the
16 department shall utilize applicable national accreditation review
17 criteria to determine compliance with corresponding state
18 requirements for Medicaid health plans that have been reviewed and
19 accredited by a national accrediting entity for health care
20 services.

21 (2) The department shall continue to comply with state and
22 federal law and shall not initiate an action that negatively
23 impacts beneficiary safety.

24 (3) As used in this section, "national accrediting entity"
25 means the National Committee for Quality Assurance, the URAC,
26 formerly known as the Utilization Review Accreditation Commission,
27 or other appropriate entity, as approved by the department.

28 Sec. 1821. From the funds appropriated in part 1 for health
29 plan services, Healthy Michigan plan, and hospital services and

1 therapy, the department shall allocate \$6,500,000.00 in general
2 fund/general purpose revenue and any associated federal match to
3 increase Medicaid reimbursement rates paid to level I and level II
4 designated trauma facilities to recognize increased cost in
5 maintaining level I or level II trauma status.

6 Sec. 1837. The department shall continue, and expand where
7 appropriate, utilization of telemedicine and telepsychiatry as
8 strategies to increase access to services for Medicaid recipients.

9 Sec. 1846. From the funds appropriated in part 1 for graduate
10 medical education, the department shall distribute the funds with
11 an emphasis on the following health care workforce goals:

12 (a) The encouragement of the training of physicians in
13 specialties, including primary care, that are necessary to meet the
14 future needs of residents of this state.

15 (b) The training of physicians in settings that include
16 ambulatory sites and rural locations.

17 (c) The training of practitioners providing pediatric
18 psychiatry services.

19 Sec. 1850. The department may allow Medicaid health plans to
20 assist with maintaining eligibility through outreach activities to
21 ensure continuation of Medicaid eligibility and enrollment in
22 managed care. This may include mailings, telephone contact, or
23 face-to-face contact with beneficiaries enrolled in the individual
24 Medicaid health plan. Health plans may offer assistance in
25 completing paperwork for beneficiaries enrolled in their plan.

26 Sec. 1852. The department shall do both of the following with
27 the funds appropriated in part 1 for program of all-inclusive care
28 for the elderly:

29 (a) Eliminate monthly enrollment caps.

1 (b) Remove card cut-off dates.

2 Sec. 1854. The funds appropriated in part 1 for program of
3 all-inclusive care for the elderly (PACE) must support a current
4 fiscal year enrollment cap that is not less than 7,288.

5 Sec. 1855. From the funds appropriated in part 1 for program
6 of all-inclusive care for the elderly (PACE), to the extent that
7 funding is available in the PACE line item and unused program slots
8 are available, the department may do the following:

9 (a) Increase the number of slots for an already-established
10 local PACE program if the local PACE program has provided
11 appropriate documentation to the department indicating its ability
12 to expand capacity to provide services to additional PACE clients.

13 (b) Suspend the 10 member per month individual PACE program
14 enrollment increase cap in order to allow unused and unobligated
15 slots to be allocated to address unmet demand for PACE services.

16 Sec. 1856. (1) From the funds appropriated in part 1 for
17 hospice services, \$5,000,000.00 shall be expended through contracts
18 with providers to provide room and board for Medicaid recipients
19 who meet hospice eligibility requirements and receive services at
20 Medicaid enrolled hospice residences in this state. The qualifying
21 hospice residences must have been enrolled with Medicaid by October
22 1, 2017. The department shall make funding available based on the
23 number of licensed beds at each participating facility.

24 (2) If funds remain at the end of the current fiscal year, the
25 Medicaid-enrolled hospice with a residence shall return funding to
26 the state.

27 Sec. 1857. By July 1 of the current fiscal year, the
28 department shall explore the implementation of a managed care long-
29 term support service.

1 Sec. 1858. By April 1 of the current fiscal year, the
2 department shall submit a report to the report recipients required
3 in section 246 of this part on all of the following elements
4 related to the current Medicaid pharmacy carve-out of
5 pharmaceutical products as provided for in section 109h of the
6 social welfare act, 1939 PA 280, MCL 400.109h:

7 (a) The number of prescriptions paid by the department during
8 the previous fiscal year.

9 (b) The total amount of expenditures for prescriptions paid by
10 the department during the previous fiscal year.

11 (c) The number of and total expenditures for prescriptions
12 paid for by the department for generic equivalents during the
13 previous fiscal year.

14 Sec. 1859. The department shall partner with the Michigan
15 Association of Health Plans (MAHP) and Medicaid health plans to
16 develop and implement strategies for the use of information
17 technology services for Medicaid research activities. The
18 department shall make available state medical assistance program
19 data, including Medicaid behavioral data, to MAHP and Medicaid
20 health plans or any vendor considered qualified by the department
21 for the purpose of research activities consistent with this state's
22 goals of improving health; increasing the quality, reliability,
23 availability, and continuity of care; and reducing the cost of care
24 for the eligible population of Medicaid recipients.

25 Sec. 1862. From the funds appropriated in part 1, the
26 department shall maintain payment rates for Medicaid obstetrical
27 services at 95% of Medicare levels effective October 1, 2014.

28 Sec. 1867. (1) The department shall continue a workgroup that
29 includes psychiatrists, other relevant prescribers, and pharmacists

1 to identify best practices and to develop a protocol for
2 psychotropic medications. Any changes proposed by the workgroup
3 shall protect a Medicaid beneficiary's current psychotropic
4 pharmaceutical treatment regimen by not requiring a physician
5 currently prescribing any treatment to alter or adjust that
6 treatment.

7 (2) By March 1 of the current fiscal year, the department
8 shall provide the workgroup's recommendations to the report
9 recipients required in section 246 of this part.

10 Sec. 1870. (1) From the funds appropriated in part 1 for
11 hospital services and therapy, the department shall appropriate
12 \$6,400,000.00 in general fund/general purpose revenue plus any
13 contributions from public entities, up to \$5,000,000.00, and any
14 associated federal match to the MiDocs consortium to create new
15 primary care residency slots in underserved communities. The new
16 primary care residency slots must be in 1 of the following
17 specialties: family medicine, general internal medicine, general
18 pediatrics, general OB-GYN, psychiatry, or general surgery.

19 (2) The department shall seek any necessary approvals from CMS
20 to allow the department to implement the program described in this
21 section.

22 (3) Assistance with repayment of medical education loans, loan
23 interest payments, or scholarships provided by MiDocs shall be
24 contingent on a minimum 2-year commitment to practice in an
25 underserved community in this state post-residency and an agreement
26 to forego any sub-specialty training for at least 2 years post-
27 residency with the exception of a child and adolescent psychiatry
28 fellowship that must be integrated with a psychiatry residency
29 training program in a MiDocs affiliated institution.

1 (4) The MiDocs shall work with the department to integrate the
2 Michigan inpatient psychiatric admissions discussion (MIPAD)
3 recommendations and, when possible, prioritize training
4 opportunities in state psychiatric hospitals and community mental
5 health organizations.

6 (5) The department shall maintain the MiDocs initiative
7 advisory council to help support implementation of the program
8 described in this section, and provide oversight. The advisory
9 council shall be composed of the MiDocs consortium, the Michigan
10 Area Health Education Centers, the Michigan Primary Care
11 Association, the Michigan Center for Rural Health, the Michigan
12 Academy of Family Physicians, and any other appointees designated
13 by the department.

14 (6) By September 1 of the current fiscal year, MiDocs shall
15 submit a report to the report recipients required in section 246 of
16 this part on the following:

- 17 (a) Audited financial statement of per-resident costs.
- 18 (b) Education and clinical quality data.
- 19 (c) Roster of trainees, including areas of specialty and
20 locations of training.
- 21 (d) Medicaid revenue by training site.

22 (7) Outcomes and performance measures for this program
23 include, but are not limited to, the following:

- 24 (a) Increasing this state's ability to recruit, train, and
25 retain primary care physicians and other select specialty
26 physicians in underserved communities.
- 27 (b) Maximizing training opportunities with community health
28 centers, rural critical access hospitals, solo or group private
29 practice physician practices, schools, and other community-based

1 clinics, in addition to required rotations at inpatient hospitals.

2 (c) Increasing the number of residency slots for family
3 medicine, general internal medicine, general pediatrics, general
4 OB-GYN, psychiatry, and general surgery.

5 (8) Unexpended and unencumbered funds up to a maximum
6 \$6,400,000.00 in general fund/general purpose revenue plus any
7 contributions from public entities, up to \$5,000,000.00, and any
8 associated federal match remaining in accounts appropriated in part
9 1 for hospital services and therapy are designated as work project
10 appropriations, and any unencumbered or unallotted funds shall not
11 lapse at the end of the fiscal year and shall be available for
12 expenditures for the MiDocs consortium to create new primary care
13 residency slots in underserved communities under this section until
14 the work project has been completed. All of the following are in
15 compliance with section 451a of the management and budget act, 1984
16 PA 431, MCL 18.1451a:

17 (a) The purpose of the work project is to fund the cost of the
18 MiDocs consortium to create new primary care residency slots in
19 underserved communities.

20 (b) The work project will be accomplished by contracting with
21 the MiDocs consortium to oversee the creation of new primary care
22 residency slots.

23 (c) The total estimated completion cost of the work project is
24 \$20,200,000.00.

25 (d) The tentative completion date is September 30, 2027.

26 Sec. 1872. From the funds appropriated in part 1 for personal
27 care services, the department shall maintain the monthly Medicaid
28 personal care supplement paid to adult foster care facilities and
29 homes for the aged that provide personal care services to Medicaid

1 recipients in place during the previous fiscal year.

2 Sec. 1874. The department shall ensure, in counties where
3 program of all-inclusive care for the elderly or PACE services are
4 available, that the program of all-inclusive care for the elderly
5 (PACE) is included as an option in all options counseling and
6 enrollment brokering for aging services and managed care programs,
7 including, but not limited to, Area Agencies on Aging, centers for
8 independent living, and the MiChoice home and community-based
9 waiver. Such options counseling must include approved marketing and
10 discussion materials.

11 Sec. 1879. (1) The department shall maintain a single,
12 standard preferred drug list to be used by all contracted Medicaid
13 managed health care programs. Changes to the preferred drug list
14 shall be made in consultation with all contracted managed health
15 care programs and the Michigan pharmacy and therapeutics committee
16 to ensure sufficient access to medically necessary drugs for each
17 disease state. The department has final authority over the list and
18 shall design the list to ensure access to clinically effective and
19 appropriate drug therapies and maximize federal rebates and
20 supplemental rebates.

21 (2) By July 15 of the current fiscal year, the department
22 shall submit a report to the report recipients required in section
23 246 of this part that compares the managed care pharmacy
24 expenditures, utilization, and rebates before implementing a
25 single, standard preferred drug list to managed care pharmacy
26 expenditures, utilization, and rebates after implementing a single,
27 standard preferred drug list. The report shall include data on
28 collected rebates, pharmacy utilization, and expenditures by
29 quarter for at least 8 quarters before implementing a single,

1 standard preferred drug list, and the experienced rebates, pharmacy
2 utilization, and expenditures for at least 14 quarters, and the
3 projected rebates, pharmacy utilization, and expenditures for
4 quarters 15 through 20 after implementing a single, standard
5 preferred drug list. The data shall be aggregated by the department
6 so as not to disclose the proprietary or confidential drug-specific
7 information, or the proprietary or confidential information that
8 directly or indirectly identifies financial information linked to a
9 single manufacturer.

10 Sec. 1888. The department shall establish contract performance
11 standards associated with the capitation withhold provisions for
12 Medicaid health plans at least 3 months before the implementation
13 of those standards. The determination of whether performance
14 standards have been met shall be based primarily on recognized
15 concepts such as 1-year continuous enrollment and the health care
16 effectiveness data and information set, HEDIS, audited data.

17 Sec. 1895. From the funds appropriated in part 1 for long-term
18 care services, the department shall adjust the variable cost
19 component (VCC) and plant cost component of Medicaid reimbursement
20 to class I, class III, and class IV nursing home providers as
21 follows:

22 (a) An interim VCC rate and plant cost component rate for each
23 facility must be established at 100.0% of the interim rate provided
24 on **January 1** of the previous fiscal year.

25 (b) The quality assurance supplement (QAS) amount will be
26 calculated for nursing home providers using the following factors:

27 (i) For class I providers, the QAS must be based on the updated
28 interim VCC for this fiscal year multiplied by 21.76%.

29 (ii) For governmental class III providers, the QAS must be

1 subject to the class I updated variable cost limit (VCL).

2 (iii) For nongovernmental class III providers, the QAS must be
3 based on their VCC or VCL, as applicable, multiplied by 21.76%.

4 (c) The department shall audit the final 2024 VCC and plant
5 costs to establish the final audited rate provided to facilities
6 for services provided in the current fiscal year.

7 Sec. 1896. From the funds appropriated in part 1 for
8 recuperative care, the department shall establish a Medicaid
9 recuperative care and transitional services benefit for
10 beneficiaries experiencing homelessness. These services, which
11 include medical and care coordination support, must be provided to
12 eligibility beneficiaries as part of a hospital discharge process.

13

14 **INFORMATION TECHNOLOGY**

15 Sec. 1901. (1) The department shall provide a report on a
16 semiannual basis to the report recipients required in section 246
17 of this part on all of the following information:

18 (a) The process used to define requests for proposals for each
19 expansion of information technology projects, including timelines,
20 project milestones, and intended outcomes.

21 (b) If the department decides not to contract the services out
22 to design and implement each element of the information technology
23 expansion, the department's own project plan that includes, at a
24 minimum, the requirements in subdivision (a).

25 (c) A recommended project management plan with milestones and
26 time frames.

27 (d) The proposed benefits from implementing the information
28 technology expansion, including customer service improvement, form
29 reductions, potential time savings, caseload reduction, and return

1 on investment.

2 (e) Details on the implementation of the integrated service
3 delivery project, and the progress toward meeting the outcomes and
4 performance measures.

5 (f) A list of projects approved in the previous 6 months and
6 the purpose for approving each project including any federal,
7 state, court, or legislative requirement for each project.

8 (2) Once an award for an expansion of information technology
9 is made, the department shall submit a report to the report
10 recipients required in section 246 of this part on the projected
11 cost of the expansion broken down by use and type of expense.

12 Sec. 1903. (1) The department shall submit a report to the
13 report recipients required in section 246 of this part by November
14 1 of the current fiscal year the status of an implementation plan
15 regarding the appropriation in part 1 to modernize the MiSACWIS.
16 The report shall include, but not be limited to, an update on the
17 status of the settlement and efforts to bring the system in
18 compliance with the settlement and other federal guidelines set
19 forth by the United States Department of Health and Human Services
20 Administration for Children and Families.

21 (2) The department shall submit a quarterly status report to
22 the report recipients required in section 246 of this part on the
23 planning, implementation, and operation, regardless of the current
24 operational status, regarding the appropriation in part 1 to
25 implement the MiSACWIS. The report shall provide details on the
26 planning, implementation, and operation of the MiSACWIS, including,
27 but not limited to, all of the following:

28 (a) Areas where implementation went as planned, and in each
29 area including whether the implementation results in either

1 enhanced user interface or portal access, conversion to new
2 modules, or substantial operation improvement to the MiSACWIS.

3 (b) The number of known issues.

4 (c) The average number of help tickets submitted per day.

5 (d) Any additional overtime or other staffing costs to address
6 known issues and volume of help tickets.

7 (e) Any contract revisions to address known issues and volume
8 of help tickets.

9 (f) Other strategies undertaken to improve implementation, and
10 for each strategy area including whether the implementation results
11 in either enhanced user interface or portal access, conversion to
12 new modules, or substantial operation improvement to the MiSACWIS.

13 (g) Progress developing cross-system trusted data exchange
14 with the MiSACWIS.

15 (h) Progress in moving away from a statewide automated child
16 welfare information system (SACWIS) to a comprehensive child
17 welfare information system (CCWIS).

18 (i) Progress developing and implementing a program to monitor
19 data quality.

20 (j) Progress developing and implementing custom integrated
21 systems for private agencies.

22 (k) A list of all change orders, planned or in progress.

23 (l) The status of all change orders, planned or in progress.

24 (m) The estimated costs for all planned change orders.

25 (n) The estimated and actual costs for all change orders in
26 progress.

27 (3) By July 1 of the current fiscal year, the department shall
28 submit to the report recipients required in section 246 of this
29 part a report on the department's efforts and recommendations to

1 develop and implement a simpler and more streamlined process for
2 the annual renewal of the licenses for family foster care homes,
3 and the development of a simpler and more efficient version of the
4 application form for renewal of the licenses for family foster care
5 homes.

6 Sec. 1905. (1) The department shall submit a report on a
7 semiannual basis to the chairs of the senate and house standing
8 committees on appropriations, the senate and house appropriations
9 subcommittees on the general government budget, and the report
10 recipients required in section 246 of this part on all of the
11 following:

12 (a) Fiscal year-to-date information technology spending for
13 the current fiscal year by service and project and by line-item
14 appropriation.

15 (b) Planned information technology spending for the remainder
16 of the current fiscal year by service and project and by line-item
17 appropriation.

18 (c) Total fiscal year-to-date information technology spending
19 and planned spending for the current fiscal year by service and
20 project and by line-item appropriation.

21 (d) A list of all information technology projects estimated to
22 cost more than \$250,000.00 that exceed their allotted budget as
23 well as all information technology projects that have exceeded
24 their allotted budget by 25% or more.

25 (2) As used in subsection (1), "project" includes, but is not
26 limited to, all of the following major projects:

27 (a) Community health automated Medicaid processing system
28 (CHAMPS).

29 (b) Bridges and MiBridges eligibility determination.

1 (c) MiSACWIS.

2 (3) The department shall develop a strategic plan for
3 information technology services and projects for the department.
4 The strategic plan shall identify any scheduled changes in the
5 federal and state shares of costs related to information technology
6 services and projects over the 5-year period. As part of the
7 strategic plan, the department shall include total information
8 technology expenditures from the previous fiscal year by fund
9 source and total information technology appropriations as a
10 percentage of total department appropriations by fund source, by
11 completed project, for all information technology expenditures in
12 the previous fiscal year. All projects beginning after October 1,
13 2021 will follow department of management and budget benefits
14 realization methodology, for reporting when completed in a future
15 fiscal year's report. The strategic plan shall also develop
16 benchmarks for comparison that include, for the previous 5 fiscal
17 years, the department's information technology spending compared to
18 the spending in the areas of public health, Medicaid, child
19 protective services, child welfare, family and social services,
20 human services, and child support enforcement for similar
21 departments in 3 other states located in the Midwest.

22 Sec. 1906. From the funds appropriated in part 1 for
23 information technology services and projects, the department shall
24 allocate \$1,750,000.00 general fund/general purpose revenue, and
25 all associated federal matching revenue, to a public and private
26 nonprofit collaboration that is designated as this state's
27 statewide health information exchange by cooperative agreement, to
28 implement health information technology strategies for health
29 information exchange development, data management, and population

1 health at a statewide level.

2 Sec. 1907. By March 1 of the current fiscal year, the
3 department shall submit a report to the report recipients required
4 in section 246 of this part on all current, contracted information
5 technology-related projects, total contractual costs, spending in
6 previous fiscal years, planned spending for the current fiscal
7 year, and fiscal year-to-date spending, by project.

8 Sec. 1909. (1) From the funds appropriated in part 1 for child
9 support automation, the department shall only encumber or expend
10 funds for the operation, maintenance, and improvements of the
11 Michigan child support enforcement system (MiCSES).

12 (2) From the funds appropriated in part 1 for bridges
13 information system, the department shall only encumber or expend
14 funds for the operation, maintenance, and improvements of Bridges
15 and MIBridges.

16 (3) From the funds appropriated in part 1 for Michigan
17 Medicaid information system, the department shall only encumber or
18 expend funds for the operation, maintenance, and improvements of
19 the community health automated Medicaid processing system (CHAMPS).

20 (4) From the funds appropriated in part 1 for Michigan
21 statewide automated child welfare information system, the
22 department shall only encumber or expend funds for the operation,
23 maintenance, and improvements of MiSACWIS.

24 (5) From the funds appropriated in part 1 for comprehensive
25 child welfare information system, the department shall only
26 encumber or expend funds for the operation, maintenance, and
27 improvements to the comprehensive child welfare information system.

28 (6) From the funds appropriated in part 1 for comprehensive
29 child welfare information system, the department shall allocate

1 \$8,259,800.00 to develop a new information system to replace
2 MiSACWIS consistent with the plan provided by the department to the
3 United States District Court for Eastern District of Michigan as a
4 part of the settlement. The development of the comprehensive child
5 welfare information system shall adhere to department of
6 technology, management, and budget and IT Investment Fund (ITIF)
7 policies and practices, including use of the state unified
8 information technology environment methodology and agile
9 development. The project team shall also participate in and comply
10 with the enterprise portfolio management office process and product
11 quality assurance. To ensure full transparency, the project shall
12 be included in the ITIF portfolio for executive, legislative, and
13 external reporting purposes. As a component of the ITIF portfolio,
14 the project is subject to governance and oversight by the IT
15 investment management board.

16 Sec. 1910. (1) From the funds appropriated in part 1,
17 \$535,814,900.00 is appropriated for information technology services
18 and projects including:

19 (a) \$114,571,700.00 for bridges information system.

20 (b) \$21,539,800.00 for Michigan statewide automated child
21 welfare information system.

22 (c) \$105,285,100.00 for Michigan Medicaid information system.

23 (d) \$45,567,200.00 for child support automation.

24 (e) \$8,259,800.00 for comprehensive child welfare information
25 system.

26 (2) For all expenditures of funds appropriated in subsection
27 (1), the department shall submit a report to the report recipients
28 required in section 246 of this part by April 1 of the current
29 fiscal year total information technology expenditures from the

1 previous fiscal year and all information technology expenditures
2 made under an agile software development plan from the previous
3 fiscal year with details on the agile software implementation.

4 (3) From the funds appropriated as described in subsection
5 (1)(e) for comprehensive child welfare information system, this
6 state shall be the owner of any software purchased or developed
7 from the expenditures made under this subsection or it shall be
8 committed to the public domain.

9 (4) From the funds appropriated as described in subsection
10 (1)(e) for comprehensive child welfare information system,
11 \$1,000,000.00 of these funds shall be used by the department to
12 choose a product owner that will implement a user-centered design
13 that includes user stories into the development of a comprehensive
14 child welfare information system. The department shall report by
15 March 1 of the current fiscal year to the senate and house
16 appropriations subcommittees on the department budget, the senate
17 and house fiscal agencies, and the senate and house policy offices
18 on the selection of a product owner for the comprehensive child
19 welfare information system.

20 (5) From the funds appropriated as described in subsection
21 (1)(e) for comprehensive child welfare information system,
22 \$1,000,000.00 of these funds shall be used by the department to
23 provide updates as requested by the chairs of the house and senate
24 appropriations committees or the chairs of the house and senate
25 appropriations subcommittees on the department budget. Information
26 updates provided by the department, upon request, shall also be
27 accessible to the house and senate fiscal agencies, the house and
28 senate policy offices, and the state budget office on the status of
29 the work completed to date. The updates shall include

1 demonstrations of the completed work during the sprint period.
2 During these demonstrations, the department shall provide a quality
3 assessment surveillance plan as shown in appendix B of "De-risking
4 custom technology projects" from the United States General Services
5 Administration. At each demonstration, the department shall
6 validate which user stories have been included into the software
7 development and the remaining user stories that will be included
8 into the product.

9 (6) As used in this section:

10 (a) "Agile software development" means the use of development
11 methodologies using iterative development with work completed by
12 cross-functional teams of software development.

13 (b) "Product owner" means a department employee who
14 iteratively prioritizes and defines the work for the product team,
15 works with users, stakeholders, technologists, and the software
16 vendor to envision the direction for the product, and ensures that
17 value is being delivered to end users as quickly as possible.

18 (c) "User-centered design" means software development that
19 places the highest priority on the needs of the specific people who
20 are expected to use the software.

21 (d) "User stories" means a task that the agile software
22 development team will focus on over a given 2-week development
23 period and includes clearly labeled progress toward meeting the
24 needs of the end users.

25

26 **ONE-TIME APPROPRIATIONS**

27 Sec. 1950. (1) From the funds appropriated in part 1 for
28 nursing facility rate transition support, the department shall
29 allocate \$100.00 to assist long-term care providers in

1 transitioning to a new Medicaid nursing facility reimbursement
2 model. The funds appropriated under this section must be
3 distributed as follows:

4 (a) No more than \$50,000,000.00 shall be allocated toward the
5 transition assistance described in this subsection in the current
6 fiscal year.

7 (b) No more than \$10,000,000.00 shall be allocated toward
8 information technology improvements to support implementation of a
9 new Medicaid nursing facility reimbursement model.

10 (2) The unexpended funds appropriated in part 1 for nursing
11 facility rate transition support are designated as a work project
12 appropriation. Unencumbered or unallotted funds shall not lapse at
13 the end of the fiscal year and shall be available for expenditures
14 under this section until the project has been completed. The
15 following is in compliance with section 451a of the management and
16 budget act, 1984 PA 431, MCL 18.1451a:

17 (a) The purpose of the project is to aid the transition away
18 from cost-settlement-based nursing facility reimbursement.

19 (b) The project shall be accomplished by the department.

20 (c) The total estimated cost of the project is
21 \$110,000,000.00.

22 (d) The tentative completion date is September 30, 2028.

23 Sec. 1951. (1) From the funds appropriated in part 1 for water
24 quality projects, the department shall allocate \$1,000,000.00 to
25 support public health, data sharing infrastructure, filter
26 distribution and inspection, and faucet and full plumbing
27 replacement activities in significantly overburdened communities as
28 that term is defined by the department of environment, Great Lakes,
29 and energy under the authority granted under parts 53 and 54 of the

1 natural resources and environmental protection act, 1994 PA 451,
2 MCL 324.5301 to 324.5316 and 324.5401 to 324.5418.

3 (2) The unexpended portion of funds appropriated for water
4 quality projects is considered a work project appropriation and any
5 unencumbered or unallotted funds shall not lapse at the end of the
6 fiscal year and shall be available for expenditure for the project
7 under this section until the project has been completed. The
8 following is in compliance with section 451a of the management and
9 budget act, 1984 PA 431, MCL 18.1451a:

10 (a) The purpose of the project is to improve public health
11 data sharing capabilities, distribute and inspect lead-reducing
12 filters and replace lead-containing faucets and plumbing in
13 significantly overburdened communities, and support department
14 administration of this process.

15 (b) The project will be accomplished by utilizing state
16 resources, contracts, or grants.

17 (c) The total estimated cost of the project is \$1,000,000.00.

18 (d) The tentative completion date is September 30, 2028.

19 Sec. 1952. (1) From the funds appropriated in part 1 for
20 medical debt relief pilot program, the department shall allocate
21 \$10,000,000.00 to a national nonprofit organization organized under
22 the laws of this state that is exempt from federal income tax under
23 section 501(c)(3) of the internal revenue code of 1986, 26 USC 501,
24 and established in 2014 for the purpose of purchasing bundles of
25 medical debt on secondary markets or directly from providers to
26 abolish the medical debt for a group or groups of patients. The
27 department shall ensure the following conditions and criteria are
28 met before awarding grants under this section:

29 (a) The grant recipient may only use an award under this

1 section to eliminate medical debt to patients with an income below
2 the federal poverty level with a financial need or who face
3 insolvency.

4 (b) The grant recipient shall ensure that there are no adverse
5 tax or income implications for the patient due to the elimination
6 of the medical debt.

7 (c) The grant recipient shall provide evidence to the
8 department that they have a track record of performing the work
9 described in this section.

10 (d) The grant recipient shall work with local units of
11 government to eliminate medical debt for residents of those local
12 units of government. The grant recipient shall give preference to
13 local units of government that provide a dollar of matching funds
14 for every dollar appropriated under this section.

15 (2) The unexpended funds appropriated in part 1 for medical
16 debt relief pilot program are designated as a work project
17 appropriation. Unencumbered or unallotted funds shall not lapse at
18 the end of the fiscal year and shall be available for expenditures
19 under this section until the project has been completed. All of the
20 following are in compliance with section 451a of the management and
21 budget act, 1984 PA 431, MCL 18.1451a:

22 (a) The purpose of the project is to purchase bundles of
23 medical debt on secondary markets or directly from providers to
24 abolish the medical debt for a group or groups of patients.

25 (b) The project will be accomplished by a national nonprofit
26 501(c)(3) organization.

27 (c) The estimated cost of the project is \$10,000,000.00.

28 (d) The tentative completion date is September 30, 2028.

29 Sec. 1953. (1) From the funds appropriated in part 1 for

1 biomarker testing, the department shall allocate \$7,000,000.00 to a
2 wellness center to provide pharmacogenetic testing to reduce the
3 risk of developing an opioid use disorder. The wellness center must
4 meet all of the following requirements:

5 (a) Be dedicated to enhancing the well-being of individuals by
6 providing an array of comprehensive behavioral and physical health
7 services in a trauma-informed environment and promoting quality of
8 life, continuous improvement, social awareness, and healing.

9 (b) Have its administrative office located in a county with a
10 population of at least 1,750,000 in a city with a population
11 between 109,000 and 111,000 according to the most recent federal
12 decennial census.

13 (c) Be accredited by CARF International.

14 (2) The unexpended funds appropriated in part 1 for biomarker
15 testing are designated as a work project appropriation.

16 Unencumbered or unallotted funds shall not lapse at the end of the
17 fiscal year and shall be available for expenditures under this
18 section until the project has been completed. All of the following
19 are in compliance with section 451a of the management and budget
20 act, 1984 PA 431, MCL 18.1451a:

21 (a) The purpose of the project is to provide pharmacogenetic
22 testing to reduce the risk of developing an opioid use disorder.

23 (b) The project will be accomplished by a CARF International
24 accredited wellness center.

25 (c) The estimated cost of the project is \$7,000,000.00.

26 (d) The tentative completion date is September 30, 2028.

27 Sec. 1954. (1) From the funds appropriated in part 1 for first
28 responder and public safety staff mental health, the department
29 shall allocate \$5,000,000.00 toward a program to support

1 firefighters, police officers, emergency medical services
2 personnel, public safety tele-communicators, correctional officers,
3 juvenile detention employees, and individuals working on special
4 teams such as internet sex crimes, sexual crimes against children,
5 or traffic fatalities suffering from post-traumatic stress syndrome
6 and other mental health conditions. The grant program must
7 primarily provide grants to behavioral health providers and may
8 also include funding to the Michigan crisis and action line
9 established under section 165 of the mental health code, 1974 PA
10 258, MCL 330.1165, to improve information and referrals for these
11 services. The program must coordinate and integrate with the
12 Michigan crisis and access line established under section 165 of
13 the mental health code, 1974 PA 258, MCL 330.1165.

14 (2) The unexpended funds appropriated in part 1 for first
15 responder and public safety staff mental health are designated as a
16 work project appropriation. Unencumbered or unallotted funds shall
17 not lapse at the end of the fiscal year and shall be available for
18 expenditures under this section until the project has been
19 completed. All of the following are in compliance with section 451a
20 of the management and budget act, 1984 PA 431, MCL 18.1451a:

21 (a) The purpose of the project is to ensure that first
22 responder and public safety staff who are dealing with post-
23 traumatic stress syndrome and other mental health conditions have
24 access to enhanced mental health services.

25 (b) The project will be accomplished by utilizing state
26 employees, contracting with vendors, or working with local
27 partners.

28 (c) The estimated cost of the project is \$5,000,000.00.

29 (d) The tentative completion date is September 30, 2028.

1 Sec. 1955. (1) From the funds appropriated in part 1 for
2 environmental public health program, the department shall allocate
3 \$1,000,000.00 to a community development corporation organized
4 under the laws of this state that is exempt from federal income tax
5 under section 501(c)(3) of the internal revenue code of 1986, 26
6 USC 501, located in a city with a population greater than 600,000
7 according to the most recent federal decennial census to complete
8 home assessments and coordinate health action plans to improve safe
9 and quality housing for low-income individuals and families. To be
10 eligible for funding under this section, a community development
11 coordination must have partnered with an FQHC to establish a health
12 center and have a stated mission of supporting residents and
13 businesses in building a healthy and thriving community.

14 (2) The unexpended funds appropriated in part 1 for
15 environmental public health program are designated as a work
16 project appropriation. Unencumbered or unallotted funds shall not
17 lapse at the end of the fiscal year and shall be available for
18 expenditures under this section until the project has been
19 completed. All of the following are in compliance with section 451a
20 of the management and budget act, 1984 PA 431, MCL 18.1451a:

21 (a) The purpose of the project is to complete home assessments
22 and coordinate health action plans to improve safe and quality
23 housing for low-income individuals and families.

24 (b) The project will be accomplished by a nonprofit 501(c)(3)
25 organization.

26 (c) The estimated cost of the project is \$1,000,000.00.

27 (d) The tentative completion date is September 30, 2028.

28 Sec. 1956. (1) From the funds appropriated in part 1 for
29 emergency homeless shelter repair and services grant, the

1 department shall allocate \$1,000,000.00 to a nonprofit, community-
2 based organization organized under the laws of this state that is
3 exempt from federal income tax under section 501(c)(3) of the
4 internal revenue code of 1986, 26 USC 501, located in a city with a
5 population between 600,000 and 650,000 according to the most recent
6 federal decennial census. In order to be eligible for the funding
7 under this section, the entity must use the grant to make capital
8 and infrastructure repairs to structures in order to convert the
9 structures into emergency homeless shelters for women and children
10 and shelters for individuals who are parolees from the department
11 of corrections.

12 (2) The unexpended funds appropriated in part 1 for emergency
13 homeless shelter repair and services grant are designated as a work
14 project appropriation. Unencumbered or unallotted funds shall not
15 lapse at the end of the fiscal year and shall be available for
16 expenditures under this section until the project has been
17 completed. All of the following are in compliance with section 451a
18 of the management and budget act, 1984 PA 431, MCL 18.1451a:

19 (a) The purpose of the project is to make capital and
20 infrastructure repairs to structures in order to convert the
21 structures into emergency homeless shelters for women and children
22 and shelters for individuals who are parolees from the department
23 of corrections.

24 (b) The project will be accomplished by a nonprofit 501(c)(3)
25 organization.

26 (c) The estimated cost of the project is \$1,000,000.00.

27 (d) The tentative completion date is September 30, 2028.

28 Sec. 1957. (1) From the funds appropriate in part 1 for
29 substance use treatment center, the department shall appropriate

1 \$10,000,000.00 to a nonprofit, community-based organization
2 organized under the laws of this state that is exempt from federal
3 income tax under section 501(c)(3) of the internal revenue code of
4 1986, 26 USC 501, located in a city with a population between
5 90,000 and 105,000 and located in a county with a population
6 greater than 1,500,000 according to the most recent federal
7 decennial census. The nonprofit, community-based organization must
8 be a licensed mental health and substance use treatment provider
9 with a stated mission to empower communities to improve their
10 health and their economic, social, and cultural well-being.

11 (2) The unexpended funds appropriated in part 1 for substance
12 use treatment center are designated as a work project
13 appropriation. Unencumbered or unallotted funds shall not lapse at
14 the end of the fiscal year and shall be available for expenditures
15 under this section until the project has been completed. All of the
16 following are in compliance with section 451a of the management and
17 budget act, 1984 PA 431, MCL 18.1451a:

18 (a) The purpose of the project is to purchase, renovate, and
19 equip a disused medical office building to provide comprehensive
20 outpatient substance use disorder treatment services.

21 (b) The project will be accomplished by a nonprofit 501(c)(3)
22 organization.

23 (c) The estimated cost of the project is \$10,000,000.00.

24 (d) The tentative completion date is September 30, 2028.

25 Sec. 1958. From the funds appropriated in part 1 for health
26 care facility expansion, the department shall appropriate
27 \$1,500,000.00 to a nonprofit organization organized under the laws
28 of this state that is exempt from federal income tax under section
29 501(c)(3) of the internal revenue code of 1986, 26 USC 501, that

1 provides physical and behavioral health services and community and
2 cultural wellness services, that was founded before 1979, and that
3 is located in a city with a population greater than 600,000
4 according to the most recent federal decennial census for the
5 expansion of a health care facility.

6 Sec. 1959. From the funds appropriated in part 1 for healthy
7 communities grant, \$1,500,000.00 shall be allocated for a 1-time
8 grant to a nonprofit, community-based organization organized under
9 the laws of this state that is exempt from federal income tax under
10 section 501(c)(3) of the internal revenue code of 1986, 26 USC 501,
11 located in a city with a population between 100,000 and 600,000 and
12 in a county with a population greater than 1,500,000 according to
13 the most recent federal decennial census to prevent substance use,
14 expand community support for fighting drug and alcohol misuse, and
15 improve and expand nutrition education services.

16 Sec. 1960. (1) From the funds appropriated in part 1 for
17 psychiatric outpatient clinic, the department shall appropriate
18 \$8,000,000.00 general fund/general purpose revenue as a grant to a
19 nonprofit Michigan health system organized under the laws of this
20 state that is exempt from federal income tax under section
21 501(c)(3) of the internal revenue code of 1986, 26 USC 501, that
22 operates not fewer than 3 licensed adult psychiatric inpatient
23 programs located in counties with a population not less than
24 1,000,000 according to the most recent federal decennial census and
25 with a hospital dedicated to mental health located in a city with a
26 population between 108,000 and 120,000 according to the most recent
27 federal decennial census for the purpose of supporting a new
28 psychiatric residency training program.

29 (2) The unexpended funds appropriated in part 1 for

1 psychiatric outpatient clinic are designated as a work project
2 appropriation. Unencumbered or unallotted funds shall not lapse at
3 the end of the fiscal year and shall be available for expenditures
4 under this section until the project has been completed. All of the
5 following are in compliance with section 451a of the management and
6 budget act, 1984 PA 431, MCL 18.1451a:

7 (a) The purpose of the project is to support a new psychiatric
8 residency training program.

9 (b) The project will be accomplished by a Michigan health
10 system that is a nonprofit 501(c)(3) organization.

11 (c) The estimated cost of the project is \$8,000,000.00.

12 (d) The tentative completion date is September 30, 2028.

13 Sec. 1961. (1) From the funds appropriated in part 1 for jail
14 diversion fund, the department shall allocate \$5,000,000.00 to
15 support the jail diversion fund created by section 207c of the
16 mental health code, 1974 PA 258, MCL 330.1207c.

17 (2) The department shall distribute grants from the jail
18 diversion fund in accordance with sections 207d to 207f of the
19 mental health code, 1974 PA 258, MCL 330.1207d to 330.1207f.

20 Sec. 1962. (1) From the funds appropriated in part 1 for
21 alternative payment model transition, the department shall allocate
22 \$15,000,000.00 in general fund/general purpose revenue and any
23 associated federal match or federal grant funding, to support the
24 implementation of a Medicaid alternative payment methodology for
25 federally qualified health centers (FQHCs). The alternative payment
26 methodology must be a population-based payment system that is based
27 on a per-patient reimbursement for each Medicaid recipient assigned
28 to each federally qualified health center. Funds appropriated in
29 this section shall be used both to support alternative payment

1 methodology implementation costs incurred by the department and to
2 provide funding to support the preparation and success of FQHCs
3 participating in the alternative payment methodology.

4 (2) The unexpended funds appropriated in part 1 for
5 alternative payment model transition are designated as a work
6 project appropriation. Unencumbered or unallotted funds shall not
7 lapse at the end of the fiscal year and shall be available for
8 expenditures under this section until the project has been
9 completed. All of the following are in compliance with section 451a
10 of the management and budget act, 1984 PA 431, MCL 18.1451a:

11 (a) The purpose of the project is to design and implement a
12 FQHC Medicaid alternative payment methodology as well as provide
13 funding to help FQHCs prepare for and be successful in their
14 alternative payment methodology participation.

15 (b) The project will be accomplished by utilizing state
16 employees, contracting with vendors, and providing funding to
17 FQHCs.

18 (c) The estimated cost of the project is \$15,000,000.00.

19 (d) The tentative completion date is September 30, 2028.

20 (3) It is the intent of the legislature that the transition
21 described in subsection (1) is phased in over a period of several
22 fiscal years with pre-implementation and preparation occurring this
23 fiscal year and implementation of the alternative payment
24 methodology in the following fiscal year, with additional FQHCs
25 having the opportunity to begin participation in the alternative
26 payment methodology in subsequent fiscal years.

27 (4) The department shall coordinate with the Michigan Primary
28 Care Association on the design of the alternative payment
29 methodology, to identify FQHCs that are able to implement the

1 necessary care delivery and system changes required for the
2 alternative payment methodology described in subsection (1), and to
3 develop funding approaches that support the preparation and success
4 of FQHCs participating in the alternative payment methodology.

5 Sec. 1963. From the funds appropriated in part 1 for women's
6 health grant backfill, the department shall appropriate
7 \$2,000,000.00 to a 4-year state university located in a city with a
8 population greater than 600,000 according to the most recent
9 federal decennial census to support the office of women's health
10 located at the university.

11 Sec. 1964. (1) From the funds appropriated in part 1 for
12 homeless shelter operations, the department shall allocate
13 \$1,000,000.00 to a nonprofit organization organized under the laws
14 of this state that is exempt from federal income tax under section
15 501(c)(3) of the internal revenue code of 1986, 26 USC 501, and
16 that is located in a city with a population greater than 20,000 in
17 a county with a population between 154,500 and 160,000 according to
18 the most recent federal decennial census to support and sustain
19 homeless shelter operations. To be eligible for funding under this
20 section, the nonprofit organization must have been established in
21 2015, with a stated mission to rebuild the community, restore
22 families, and repurpose individuals.

23 (2) The unexpended funds appropriated in part 1 for homeless
24 shelter operations are designated as a work project appropriation.
25 Unencumbered or unallotted funds shall not lapse at the end of the
26 fiscal year and shall be available for expenditures under this
27 section until the project has been completed. All of the following
28 are in compliance with section 451a of the management and budget
29 act, 1984 PA 431, MCL 18.1451a:

1 (a) The purpose of the project is to support and sustain
2 homeless shelter operations.

3 (b) The project will be accomplished by a nonprofit 501(c)(3)
4 organization.

5 (c) The estimated cost of the project is \$1,000,000.00.

6 (d) The tentative completion date is September 30, 2028.

7 Sec. 1965. From the funds appropriated in part 1 for domestic
8 and sexual violence prevention and treatment, the department shall
9 allocate \$3,610,300.00 to nonprofit organizations organized under
10 the laws of this state that are exempt from federal income tax
11 under section 501(c)(3) of the internal revenue code of 1986, 26
12 USC 501, and receive appropriations in part 1 funded with victims
13 of crime act grant dollars for domestic violence and sexual assault
14 prevention.

15 Sec. 1966. From the funds appropriated in part 1 for community
16 house capital grant, the department shall allocate \$1,000,000.00 to
17 renovate an existing site as well as expand affordable senior
18 housing and child care options in a city with a population between
19 80,000 and 200,000 in a county with a population between 450,000
20 and 850,000 according to the most recent federal decennial census.
21 To be eligible for the funding in this section, the entity must be
22 a nonprofit, community-based organization organized under the laws
23 of this state that is exempt from federal income tax under section
24 501(c)(3) of the internal revenue code of 1986, 26 USC 501,
25 established in 1902 with a mission statement of increasing the
26 ability of children, youth, adults, and families to succeed in a
27 diverse community.

28 Sec. 1967. (1) From the funds appropriated in part 1 for
29 senior citizen home renovation, the department shall appropriate

1 \$3,000,000.00 to a city with a population greater than 600,000
2 according to the most recent federal decennial census to provide
3 home repairs and renovations to ensure that homes are compliant
4 with the Americans with disabilities act of 1990, 42 USC 12101 to
5 12213. In order to be eligible for home repairs and renovations
6 under this section, an individual must be a resident of the city
7 and must be 65 years of age or older or disabled.

8 (2) The unexpended funds appropriated in part 1 for senior
9 citizen home renovation are designated as a work project
10 appropriation. Unencumbered or unallotted funds shall not lapse at
11 the end of the fiscal year and shall be available for expenditures
12 under this section until the project has been completed. All of the
13 following are in compliance with section 451a of the management and
14 budget act, 1984 PA 431, MCL 18.1451a:

15 (a) The purpose of the project is to provide home repairs and
16 renovations to ensure that homes are ADA compliant.

17 (b) The project will be accomplished through a partnership
18 with a city with a population greater than 600,000 according to the
19 most recent federal decennial census.

20 (c) The estimated cost of the project is \$3,000,000.00.

21 (d) The tentative completion date is September 30, 2028.

22 Sec. 1968. From the funds appropriated in part 1 for
23 affordable housing project, the department shall allocate
24 \$2,000,000.00 to a nonprofit organization organized under the laws
25 of this state that is exempt from federal income tax under section
26 501(c)(3) of the internal revenue code of 1986, 26 USC 501, that
27 has a headquarters in a city with a population between 60,000 and
28 135,000 and is located in a county with a population between
29 700,000 and 1,000,000, according to the most recent federal

1 decennial census, for capital costs resulting from construction of
2 an affordable housing apartment complex. To be eligible for funds
3 under this section the nonprofit organization must have been
4 established in 2006 and be dedicated to improving the stability,
5 health, and wellness of those served through advocacy,
6 acculturation, community development, and cultural preservation.

7 Sec. 1969. (1) From the funds appropriated in part 1 for
8 homelessness prevention pilot program, the department shall
9 appropriate \$2,000,000.00 to a nonprofit organization organized
10 under the laws of this state that is exempt from federal income tax
11 under section 501(c)(3) of the internal revenue code of 1986, 26
12 USC 501, that is located in a county with a population between
13 900,000 and 1,500,000 according to the most recent federal
14 decennial census, and that operates as that county's continuum of
15 care provider to establish a pilot program to prevent homelessness
16 in the county. The pilot program must provide emergency assistance
17 to help individuals stay in their homes.

18 (2) Eligible expenditures from the funds identified in
19 subsection (1) must include:

- 20 (a) Payment of rent.
- 21 (b) Payment of utility bills.
- 22 (c) Payment of home repairs.
- 23 (d) Costs associated with moving.

24 (3) To be eligible to receive funds under this section, a
25 household must have an average median household income equal to or
26 less than 100% of the average median household income in a county
27 with a population between 900,000 and 1,500,000 according to the
28 most recent federal decennial census.

29 (4) A household may not receive more than \$3,600.00 from the

1 funds appropriated in this section.

2 Sec. 1970. From the funds appropriated in part 1 for
3 disability and independent living program, the department shall
4 allocate \$150,000.00 to a nonprofit organization organized under
5 the laws of this state that is exempt from federal income tax under
6 section 501(c)(3) of the internal revenue code of 1986, 26 USC 501,
7 and that is located in a city with a population between 2,600 and
8 3,200 in a county with a population greater than 1,500,000
9 according to the most recent federal decennial census. To be
10 eligible for funds under this section, the nonprofit organization
11 must have a stated mission to enhance the lives of the
12 organization's participants with disabilities and that through
13 therapeutic, social, work-based, and community engagement, it seeks
14 to support, enrich, inspire, and embolden the organization's
15 participants and the participants' families so that the
16 participants can achieve the participants' goals.

17 Sec. 1971. From the funds appropriated in part 1 for
18 children's healthcare access program, the department shall allocate
19 \$500,000.00 to a children's healthcare access program that serves
20 children in counties with populations greater than 700,000
21 according to the most recent federal decennial census to provide
22 vaccinations, lead testing, and developmental screenings to
23 children enrolled in Medicaid.

24 Sec. 1972. From the funds appropriated in part 1 for farm day
25 program, the department shall allocate \$150,000.00 to a nonprofit
26 organization organized under the laws of this state that is exempt
27 from federal income tax under section 501(c)(3) of the internal
28 revenue code of 1986, 26 USC 501, and that is located in a township
29 with a population between 20,000 and 22,000 located in a county

1 with a population between 900,000 and 1,500,000 according to the
2 most recent federal decennial census, to provide support to
3 individuals with autism or other disabilities, provide special
4 education services, and operate a supported employment program. In
5 order to be eligible for funds under this section, the nonprofit
6 organization must have a stated mission of empowering and
7 supporting adults with disabilities to live a life of purpose,
8 inclusion, and dignity.

9 Sec. 1973. From the funds appropriated in part 1 for substance
10 use disorder center capital costs, the department shall appropriate
11 \$1,500,000.00 to a nonprofit behavioral health care organization
12 organized under the laws of this state that is exempt from federal
13 income tax under section 501(c)(3) of the internal revenue code of
14 1986, 26 USC 501, that was established in 1967, and that is the
15 sole provider of withdrawal management and residential services
16 located in a county with a population between 135,000 and 154,500
17 according to the most recent federal decennial census.

18 Sec. 1974. From the funds appropriated in part 1 for
19 children's health care, the department shall allocate \$5,000,000.00
20 to a nonprofit health care facility with fewer than 190 beds that
21 is affiliated with a physician partner group to build a children's
22 rehabilitation hospital. To be eligible for funding under this
23 section, the nonprofit health care facility must be located in a
24 county with a population between 450,000 and 850,000 in a city with
25 a population between 80,000 and 250,000 according to the most
26 recent federal decennial census.

27 Sec. 1975. From the funds appropriated in part 1 for caregiver
28 resource center, the department shall appropriate \$9,400,000.00 to
29 area agencies on aging to improve services and supports to unpaid

1 family and informal caregivers. The department shall distribute the
2 funds as a lump sum payment to area agencies on aging using the
3 interstate funding formula approved by the commission on services
4 to the aging.

5 Sec. 1976. From the funds appropriated in part 1 for senior
6 center administration, the department shall allocate \$1,000,000.00
7 to senior centers operating in this state. The department shall
8 distribute the funds as a lump sum payment to each senior center
9 proportional to the number of participants at each center.

10 Sec. 1977. From the funds appropriated in part 1 for
11 behavioral health care services and facilities, the department
12 shall allocate \$3,000,000.00 for a public-private partnership to
13 open a behavioral health center with no fewer than 40 inpatient
14 beds during phase I of operation and no fewer than 100 inpatient
15 beds during phase II of operation. The behavioral health center
16 must be located in a city with a population between 2,500 and
17 20,000 located in a county with a population between 96,000 and
18 103,000 according to the most recent federal decennial census.

19 Sec. 1978. (1) From the funds appropriated in part 1 for adult
20 day center, the department shall allocate \$1,000,000.00 to a
21 nonprofit organization organized under the laws of this state that
22 is exempt from federal income tax under section 501(c)(3) of the
23 internal revenue code of 1986, 26 USC 501, that provides adult and
24 teen mental health services located in a city with a population
25 between 135,000 and 195,000 located in a county with a population
26 between 700,000 and 1,000,000 according to the most recent federal
27 decennial census. To be eligible for funding under this section,
28 the nonprofit organization must have a stated mission to provide
29 and coordinate support services and programs that help clients stay

1 active and healthier both physically and mentally; to be committed
2 to the wellness of individuals, their families, and the community
3 through prevention, intervention, treatment, and education; to
4 assist individuals and families in the enhancement of their
5 emotional, mental, and physical well-being; and also to provide an
6 engaging and safe place that enhances dignity, uniqueness, and
7 independence for adults.

8 (2) The unexpended funds appropriated in part 1 for adult day
9 center are designated as a work project appropriation. Unencumbered
10 or unallotted funds shall not lapse at the end of the fiscal year
11 and shall be available for expenditures under this section until
12 the project has been completed. All of the following are in
13 compliance with section 451a of the management and budget act, 1984
14 PA 431, MCL 18.1451a:

15 (a) The purpose of the project is to provide adult day care
16 services.

17 (b) The project will be accomplished by a nonprofit 501(c)(3)
18 organization.

19 (c) The estimated cost of the project is \$1,000,000.00.

20 (d) The tentative completion date is September 30, 2028.

21 Sec. 1979. (1) From the funds appropriated in part 1 for
22 prenatal and infant cash allowance pilot program, the department
23 shall allocate \$100.00 to establish a pilot program in a city with
24 a population greater than 50,000 in a county with a population
25 between 375,000 and 600,000 according to the most recent federal
26 decennial census. The pilot program must do both of the following:

27 (a) Provide a 1-time prenatal allowance of \$1,500.00 to all
28 expectant mothers residing in the city described in this
29 subsection.

1 (b) Provide a \$500.00 per month allowance for all infants
2 between 0 years of age and 1 year of age residing in the city
3 described in this subsection.

4 (2) The department must partner with a pediatric public health
5 initiative house in a 4-year state university located in a county
6 with a population between 265,000 and 290,000 according to the most
7 recent decennial census and a nonprofit organization organized
8 under the laws of this state that is exempt from federal income tax
9 under section 501(c)(3) of the internal revenue code of 1986, 26
10 USC 501, located in a city with a population greater than 50,000 in
11 a county with a population between 375,000 and 600,000 according to
12 the most recent federal decennial census with a stated mission to
13 improve the health status of our residents and improve the quality
14 and cost-effectiveness of the health care system in our community
15 to implement the pilot program described in this section.

16 (3) It is the intent of the legislature that the funds
17 appropriated in this section be used to operate the first year of a
18 5-year pilot program.

19 (4) Funds appropriated in part 1 for prenatal and infant cash
20 allowance pilot shall be considered work project funds and shall
21 not lapse at the close of the fiscal year and shall be available
22 for expenditures for projects under this section until the projects
23 have been completed. The following is in compliance with section
24 451a of the management and budget act, 1984 PA 431, MCL 18.1451a:

25 (a) The purpose of the work project is to provide 1-time
26 prenatal allowances and monthly allowances for children 0 years of
27 age to 1 year of age to combat the effects of economic instability.

28 (b) The project will be accomplished through partnerships with
29 a 4-year state university and a nonprofit 501(c)(3) organization.

1 (c) The total estimated cost of the work project is \$100.00.

2 (d) The tentative completion date is September 30, 2028.

3 Sec. 1980. (1) From the funds appropriated in part 1 for
4 developmental milestones toolkit, the department shall allocate
5 \$1,000,000.00 to a nonprofit organization organized under the laws
6 of this state that is exempt from federal income tax under section
7 501(c)(3) of the internal revenue code of 1986, 26 USC 501,
8 educating the public about prevention efforts in an effort to
9 reduce medical costs and improve the quality of life for those
10 living at risk of a mental disability to increase their operations
11 to provide developmental milestones toolkits to low-income families
12 located in a county with a population greater than 1,500,000
13 according to the most recent federal decennial census. The
14 nonprofit organization must be located in a city with a population
15 between 90,000 and 105,000 according to the most recent federal
16 decennial census with a stated mission of providing evidence-
17 informed strategies and training to parents, educators, community
18 stakeholders, and policymakers to ameliorate common childhood
19 conditions.

20 (2) The unexpended funds appropriated in part 1 for
21 developmental milestones toolkit are designated as a work project
22 appropriation. Unencumbered or unallotted funds shall not lapse at
23 the end of the fiscal year and shall be available for expenditures
24 under this section until the project has been completed. All of the
25 following are in compliance with section 451a of the management and
26 budget act, 1984 PA 431, MCL 18.1451a:

27 (a) The purpose of the project is to provide developmental
28 milestones toolkits to low-income families located in a county with
29 a population greater than 1,500,000 according to the most recent

1 federal decennial census.

2 (b) The project will be accomplished by a nonprofit 501(c)(3)
3 organization.

4 (c) The estimated cost of the project is \$1,000,000.00.

5 (d) The tentative completion date is September 30, 2028.

6 Sec. 1981. From the funds appropriated in part 1 for rides to
7 wellness, the department shall allocate \$250,000.00 to the entity
8 described in subsection (3) of section 1306 of this part.

9 Sec. 1982. From the funds appropriated in part 1 for food
10 market expansion, the department shall appropriate \$1,400,000.00 to
11 a nonprofit organization organized under the laws of this state
12 that is exempt from federal income tax under section 501(c)(3) of
13 the internal revenue code of 1986, 26 USC 501, and that is located
14 in a city with a population between 77,000 and 85,000 in a county
15 with a population between 900,000 and 1,500,000 according to the
16 most recent federal decennial census, for expansion of a food
17 market that operates to support a food pantry. In order to be
18 eligible for funding under this section, the nonprofit organization
19 must have a stated mission to offer comprehensive support services
20 for individuals and their families in and around the area that are
21 in need or have limited access to everyday necessities due to
22 insufficient financial resources or family instability.

23 Sec. 1983. (1) From the funds appropriated in part 1 for
24 permanent supportive housing, the department shall appropriate
25 \$13,000,000.00 to expand supportive housing services. The funds
26 must be prioritized to serve people living in supportive housing
27 who need additional services to maintain employment and stability,
28 and currently homeless individuals moving into supportive housing
29 with rental support. The funds should prioritize households whose

1 children are at risk of being placed in out-of-home care,
2 households that are working toward reunification with children who
3 are out of home, and youth aging out of the foster care system.

4 (2) Funds appropriated for permanent supportive housing shall
5 be considered work project funds, shall not lapse at the close of
6 the fiscal year, and shall be available for expenditures for
7 projects under this section until the projects have been completed.
8 The following are in compliance with section 451a of the management
9 and budget act, 1984 PA 431, MCL 18.1451a:

10 (a) The purpose of the work project is to provide funding for
11 grants for eligible entities to provide permanent supportive
12 housing services for eligible households.

13 (b) The work project will be accomplished through partnerships
14 with community-based agencies that provide supportive housing
15 services, the Michigan state housing development authority, and
16 local governments.

17 (c) The total estimated cost of the work project is
18 \$13,000,000.00.

19 (d) The tentative completion date is September 30, 2028.

20 Sec. 1984. From the funds appropriated in part 1 for community
21 opportunity hub, the department shall appropriate \$1,000,000.00 to
22 a nonprofit organization organized under the laws of this state
23 that is exempt from federal income tax under section 501(c)(3) of
24 the internal revenue code of 1986, 26 USC 501, that was established
25 in 2010, and that is located in a city with a population greater
26 than 500,000 according to the most recent federal decennial census,
27 to renovate and repurpose former school buildings into opportunity
28 hubs, repair owner-occupied homes, and provide other community
29 wraparound supports. To be eligible for funds under this section,

1 the nonprofit organization must organize an annual 6-day event to
2 beautify the area surrounding the opportunity hub.

3 Sec. 1985. From the funds appropriated in part 1 for public
4 health authority operations, the department shall allocate
5 \$5,000,000.00 to a public health authority located in a city with a
6 population between 100,000 and 600,000 in a county with a
7 population greater than 1,500,000 according to the most recent
8 federal decennial census, to expand services, provide public health
9 interventions that are culturally competent, and safeguard the
10 health of residents.

11 Sec. 1986. From the funds appropriated in part 1 for federally
12 qualified health center, the department shall appropriate
13 \$1,500,000.00 to an FQHC with a main clinic located in a city with
14 a population greater than 50,000 in a county with a population
15 between 375,000 and 600,000 according to the most recent federal
16 decennial census, and that was originally established in 1982, for
17 the construction of a new clinic location.

18 Sec. 1987. From the funds appropriated in part 1 for
19 lifesharing community center, the department shall allocate
20 \$2,000,000.00 to a nonprofit organization organized under the laws
21 of this state that is exempt from federal income tax under section
22 501(c)(3) of the internal revenue code of 1986, 26 USC 501, for
23 capital costs related to the construction of a lifesharing
24 community located in a county with a population between 300,000 and
25 400,000 according to the most recent federal decennial census. The
26 proposed community must be located on no less than 75 acres of land
27 and be comprised of at least 8 homes. An eligible nonprofit
28 organization must have a stated mission to build and sustain
29 quality care, housing, learning, and activities for those with a

1 disability while educating the next generation of service
2 professionals using a lifesharing model.

3 Sec. 1988. From the funds appropriated in part 1 for social
4 determinants of health hub - one-time, the department shall
5 allocate \$1,000,000.00 to a nonprofit organization organized under
6 the laws of this state that is exempt from federal income tax under
7 section 501(c)(3) of the internal revenue code of 1986, 26 USC 501,
8 located in a city with a population between 80,000 and 82,000
9 according to the most recent federal decennial census that runs
10 health equity programs. The funding must be used for start-up costs
11 necessary to create a social determinants of health hub, to offer
12 technical assistance to other communities across this state, and to
13 provide multisector coordination necessary to become a social
14 determinants of health hub.

15 Sec. 1989. From the funds appropriated in part 1 for hospital
16 equipment modernization, the department shall allocate
17 \$2,000,000.00 to a hospital verified as a level III trauma center
18 by the American College of Surgeons located in a city with a
19 population between 13,000 and 16,400 in a county with a population
20 greater than 1,500,000 according to the most recent federal
21 decennial census, for physical facility improvement and equipment
22 modernization.

23 Sec. 1990. From the funds appropriated in part 1 for sickle
24 cell center, the department shall allocate \$2,500,000.00 to the
25 Sickle Cell Disease Association of America, to the Sickle Cell
26 Center of Excellence.

27 Sec. 1991. From the funds appropriated in part 1 for mobile
28 health units, the department shall allocate \$3,500,000.00 to
29 support 1-time marketing, staffing, and supply costs to establish

1 the mobile health units described in section 1159 of this part.

2 Sec. 1994. From the funds appropriated in part 1 for warming
3 center services, the department shall allocate \$800,000.00 to a
4 city with a population between 50,000 and 110,000 according to the
5 most recent federal decennial census and located in a county with a
6 population between 265,000 and 290,000 according to the most recent
7 federal decennial census to support an emergency housing program
8 for adults that provides shelter and case management services.

9 Sec. 1995. From the funds appropriated in part 1 for child and
10 family campus project, the department shall appropriate
11 \$6,000,000.00 to a nonprofit, community-based organization
12 organized under the laws of this state that is exempt from federal
13 income tax under section 501(c)(3) of the internal revenue code of
14 1986, 26 USC 501, and is located in a city with a population
15 between 50,000 and 110,000 according to the most recent federal
16 decennial census and located in a county with a population between
17 265,000 and 290,000 according to the most recent federal decennial
18 census to construct and renovate a consolidated facility on a site
19 formerly owned by a hospital system. To be eligible for funds under
20 this section, the nonprofit organization must have been established
21 in 1911 and have a stated mission to strengthen and support
22 children, families, and individuals as they evolve and grow in a
23 changing community.

24 Sec. 1996. From the funds appropriated in part 1 for critical
25 access hospital renovation, the department shall allocate \$100.00
26 to a critical access hospital located in a county with a population
27 between 3,750 and 5,750 according to the most recent federal
28 decennial census to implement multiple infrastructure renovations,
29 including all of the following, to improve patient care:

1 (a) Remodeling and upgrading family clinics to meet current
2 codes and practices.

3 (b) Expanding operating room and recovery facilities for basic
4 orthopedic surgeries.

5 (c) Improving windows, parking lots, and other areas.

6 Sec. 1997. From the funds appropriated in part 1 for sexual
7 assault nurse examiner program, the department shall allocate
8 \$100.00 of state general fund/general purpose revenue for a sexual
9 assault nurse examiners program at a hospital in a city with a
10 population between 21,600 and 21,700 according to the most recent
11 federal decennial census within a county with a population between
12 64,300 and 64,400 according to the most recent federal decennial
13 census. Funds must be used to support staff compensation and
14 training, victim needs, and community awareness, education, and
15 prevention programs.

16 Sec. 1998. From the funds appropriated in part 1 for nursing
17 staff supports, the department shall appropriate \$100.00 to the
18 Michigan Nurses Association to support nursing staff training and
19 education initiatives.

20 Sec. 1999. From the funds appropriated in part 1 for
21 genemarkers, the department shall allocate \$100.00 to Ferris State
22 University to develop and provide for a test that identifies
23 genetic risk factors correlated with opioid use disorder.

24 Sec. 2000. (1) From the funds appropriated in part 1 for
25 community health residency programs, the department shall allocate
26 \$100.00 to implement a residency program in a nonprofit health
27 center in a city with a population of between 61,000 and 63,000 and
28 within a county with a population between 1,270,000 and 1,275,000
29 according to the most recent federal decennial census.

1 (2) The unexpended portion of funds appropriated in part 1 for
2 the residency program is designated as a work project
3 appropriation. Any unencumbered or unallotted funds shall not lapse
4 at the end of the fiscal year and shall be available for
5 expenditure for the project under this section until the project
6 has been completed. The following is in compliance with section
7 451a(1) of the management and budget act, 1984 PA 431, MCL
8 18.1451a:

9 (a) The purpose of the work project is to provide funding for
10 the start-up costs and ensure the first cohort graduates within
11 three years while awaiting federal funding.

12 (b) The project will be accomplished by a nonprofit 501(c)(3)
13 health center organization.

14 (c) The total estimated cost of the work project is \$100.00.

15 (d) The estimated completion date is September 30, 2028.