SENATE BILL No. 187

February 18, 2003, Introduced by Senators VAN WOERKOM, KUIPERS, CROPSEY, McMANUS, BIRKHOLZ, GILBERT, GEORGE, BROWN, JELINEK, GOSCHKA, BISHOP, BARCIA, CLARK-COLEMAN, TOY, ALLEN, JACOBS and SCOTT and referred to the Committee on Appropriations.

A bill to amend 1939 PA 280, entitled "The social welfare act," by amending section 109c (MCL 400.109c), as amended by 1994 PA 302.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 109c. (1) The state department shall include, as part
- 2 of its program of medical services under this act, home- or
- 3 community-based services to eligible persons whom the state
- 4 department determines would otherwise require nursing home
- 5 services or similar institutional care services under
- 6 section 109. The home- or community-based services shall be
- 7 offered to qualified eligible persons who are receiving inpatient
- 8 hospital or nursing home services as an alternative to those
- 9 forms of care.
 - (2) The home- or community-based services shall include

- 1 safeguards adequate to protect the health and welfare of
- 2 participating eligible persons, and shall be provided according
- 3 to a written plan of care for each person. The services
- 4 available under the home- or community-based services program
- 5 shall include, at a minimum, all of the following:
- 6 (a) Home delivered meals.
- 7 (b) Chore services.
- 8 (c) Homemaker services.
- **9** (d) Respite care.
- 10 (e) Personal care.
- 11 (f) Adult day care.
- 12 (g) Private duty nursing.
- (h) Mental health counseling.
- 14 (i) Caregiver training.
- (j) Emergency response systems.
- 16 (k) Home modification.
- (l) Transportation.
- (m) Medical equipment and supply services.
- 19 (3) This section shall be implemented so that the average per
- 20 capita expenditure for home- or community-based services for
- 21 eligible persons receiving those services does not exceed the
- 22 estimated average per capita expenditure that would have been
- 23 made for those persons had they been receiving nursing home
- 24 services, inpatient hospital services, or similar institutional
- 25 care services instead.
- 26 (4) The state department shall seek a waiver necessary to
- 27 implement this program from the federal department of health and

- 1 human services, as provided in section 1915 of title XIX of the
- 2 social security act, 42 U.S.C. 1396n. The department shall
- 3 request any modifications of the waiver that are necessary in
- f 4 order to expand the program in accordance with subsection (9).
- 5 (5) The state department shall establish policy for
- 6 identifying the rules for persons receiving inpatient hospital or
- 7 nursing home services who may qualify for home- or
- 8 community-based services. The rules shall contain, at a minimum,
- 9 a listing of diagnoses and patient conditions to which the option
- 10 of home- or community-based services may apply, and a procedure
- 11 to determine if the person qualifies for home- or community-based
- 12 services.
- 13 (6) The state department shall provide to the legislature and
- 14 the governor an annual report showing the detail of its home- and
- 15 community-based case finding and placement activities. At a
- 16 minimum, the report shall contain each of the following:
- 17 (a) The number of persons provided home- or community-based
- 18 services who would otherwise require inpatient hospital
- 19 services. This shall include a description of medical
- 20 conditions, services provided, and projected cost savings for
- 21 these persons.
- 22 (b) The number of persons provided home- or community-based
- 23 services who would otherwise require nursing home services. This
- 24 shall include a description of medical conditions, services
- 25 provided, and projected cost savings for these persons.
- (c) The number of persons and the annual expenditure for
- 27 personal care services.

- 1 (d) The number of hearings requested concerning home- or
- 2 community-based services and the outcome of each hearing -which
- 3 that has been adjudicated during the year.
- **4** (7) The written plan of care required under subsection (2)
- 5 for an eligible person shall not be changed unless the change is
- 6 prospective only, and the state department does both of the
- 7 following:
- 8 (a) Not later than 30 days before making the change, except
- 9 in the case of emergency, consults with the eligible person or,
- 10 in the case of a child, with the child's parent or guardian.
- 11 (b) Consults with each medical service provider involved in
- 12 the change. This consultation shall be documented in writing.
- 13 (8) An eligible person who is receiving home- or
- 14 community-based services under this section, and who is
- 15 dissatisfied with a change in his or her plan of care or a denial
- 16 of any home- or community-based service, may demand a hearing as
- 17 provided in section 9, and subsequently may appeal the hearing
- 18 decision to circuit court as provided in section 37.
- 19 (9) The state department shall expand the home- and
- 20 community-based services program by increasing the number of
- 21 counties in which it is available, in conformance with this
- 22 subsection. The program may be limited in total cost and in the
- 23 number of recipients per county who may receive services at 1
- 24 time. Subject to obtaining the waiver and any modifications of
- 25 the waiver sought under subsection (4), the program shall be
- 26 expanded as follows:
- 27 (a) Not later than -1 year after the effective date of this

- 1 subsection July 14, 1995, home- and community-based services
- 2 shall be available to eligible applicants in those counties that,
- 3 when combined, contain at least 1/4 of the population of this
- 4 state.
- 5 (b) Not later than -2 years after the effective date of this
- 6 subsection July 14, 1996, home- and community-based services
- 7 shall be available to eligible applicants in those counties that,
- 8 when combined, contain at least 1/2 of the population of this
- 9 state.
- 10 (c) Not later than -3 years after the effective date of this
- 11 subsection July 14, 1997, home- and community-based services
- 12 shall be available to eligible applicants in those counties that,
- 13 when combined, contain at least 3/4 of the population of this
- 14 state.
- 15 (d) Not later than <u>4 years after the effective date of this</u>
- 16 subsection July 14, 1998, home- and community-based services
- 17 shall be available to eligible applicants on a statewide basis.
- 18 (10) The state department shall work with the office of
- 19 services to the aging in implementing the home- and
- 20 community-based services program, including the provision of
- 21 preadmission screening, case management, and recipient access to
- 22 services.
- 23 (11) If a person receiving home- or community-based services
- 24 under this section no longer requires those services, the
- 25 department of community health shall provide the remainder of the
- 26 personal expenditure for that person to another eligible person.

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