SUBSTITUTE FOR HOUSE BILL NO. 5784

A bill to make appropriations for the department of health and human services for the fiscal year ending September 30, 2023; and to provide for the expenditure of the appropriations.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1	PART 1
2	LINE-ITEM APPROPRIATIONS
3	Sec. 101. There is appropriated for the department of health
4	and human services for the fiscal year ending September 30, 2023,
5	from the following funds:
6	DEPARTMENT OF HEALTH AND HUMAN SERVICES
7	APPROPRIATION SUMMARY
8	Full-time equated unclassified positions 6.0
9	Full-time equated classified positions 15,578.5

Average population	770.0	
GROSS APPROPRIATION		\$ 32,929,661,400
Interdepartmental grant revenues:		
Total interdepartmental grants and		
intradepartmental transfers		14,696,000
ADJUSTED GROSS APPROPRIATION		\$ 32,914,965,400
Federal revenues:		
Social security act, temporary assistance for		
needy families		540,619,800
Capped federal revenues		471,436,200
Coronavirus state fiscal recovery fund		172,500,000
Total other federal revenues		22,370,210,10
Special revenue funds:		
Total local revenues		167,407,70
Total private revenues		179,716,40
Michigan merit award trust fund		61,268,70
Total other state restricted revenues		2,931,759,40
State general fund/general purpose		\$ 6,020,047,10
Sec. 102. DEPARTMENTAL ADMINISTRATION AND		
Full-time equated unclassified positions	6.0	
Full-time equated classified positions	856.4	
Unclassified salariesFTEs	6.0	\$ 1,336,60
Administrative hearings officers		10,004,50
Demonstration projectsFTEs	7.0	7,070,80
Departmental administration and management		
FTEs	632.4	103,951,70

1	Office of inspector generalFTEs	197.0	25,965,700
2	Property management		64,701,200
3	Terminal leave payments		7,092,100
4	Training and program supportFTEs	20.0	2,616,500
5	Warehouse operations		3,400,000
6	Worker's compensation		8,682,500
7	GROSS APPROPRIATION	\$	247,121,600
8	Appropriated from:		
9	Interdepartmental grant revenues:		
10	IDG from department of education		1,951,100
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		24,652,100
16	Capped federal revenues		18,584,800
17	Total other federal revenues		71,944,600
18	Special revenue funds:		
19	Total local revenues		86,000
20	Total private revenues		3,847,500
21	Total other state restricted revenues		1,342,800
22	State general fund/general purpose	\$	124,712,100
23	Sec. 103. CHILD SUPPORT ENFORCEMENT		
24	Full-time equated classified positions	193.7	
25	Child support enforcement operationsFTEs	187.7 \$	25,769,000
26	Child support incentive payments		24,409,600
27	Legal support contracts		113,600,300
28	State disbursement unitFTEs	6.0	7,365,800

1	GROSS APPROPRIATION		\$ 171,144,700
2	Appropriated from:		
3	Federal revenues:		
4	Capped federal revenues		14,839,600
5	Total other federal revenues		131,015,800
6	State general fund/general purpose		\$ 25,289,300
7	Sec. 104. COMMUNITY SERVICES AND OUTREACH		
8	Full-time equated classified positions	76.6	
9	Bureau of community services and outreachFTEs	24.0	\$ 3,482,700
10	Child advocacy centersFTE	0.5	3,407,000
11	Community services and outreach administration-		
12	-FTEs	19.0	5,345,000
13	Community services block grant		25,840,000
14	Crime victim grants administration services		
15	FTES	17.0	3,045,200
16	Crime victim justice assistance grants		98,681,900
17	Crime victim rights services grants		19,869,900
18	Diaper assistance grant		1,500,000
19	Domestic violence prevention and treatment		
20	FTES	15.6	18,357,000
21	Homeless programs		24,082,500
22	Housing and support services		13,031,000
23	Human trafficking intervention services		200,000
24	Rape prevention and servicesFTE	0.5	5,097,300
25	Runaway and homeless youth grants		7,784,100
26	School success partnership program		525,000
27	Uniform statewide sexual assault evidence kit		
28	tracking system		225,100

Weatherization assistance		15,505,00
GROSS APPROPRIATION		\$ 245,978,70
Appropriated from:		
Federal revenues:		
Social security act, temporary assistance for		
needy families		17,844,30
Capped federal revenues		62,405,00
Total other federal revenues		117,597,80
Special revenue funds:		
Child advocacy centers fund		1,407,00
Compulsive gambling prevention fund		1,040,50
Crime victim's rights fund		18,764,10
Sexual assault victims' prevention and		
treatment fund		3,000,00
treatment fund State general fund/general purpose		\$ 3,000,00
		\$ · ·
State general fund/general purpose		\$
State general fund/general purpose Sec. 105. CHILDREN'S SERVICES AGENCY - CHILD	4,154.2	\$
State general fund/general purpose Sec. 105. CHILDREN'S SERVICES AGENCY - CHILD WELFARE	4,154.2	\$ 23,920,00
State general fund/general purpose Sec. 105. CHILDREN'S SERVICES AGENCY - CHILD WELFARE Full-time equated classified positions	4,154.2	23,920,00 212,189,70
State general fund/general purpose Sec. 105. CHILDREN'S SERVICES AGENCY - CHILD WELFARE Full-time equated classified positions Adoption subsidies	·	23,920,00 212,189,70 53,602,30
State general fund/general purpose Sec. 105. CHILDREN'S SERVICES AGENCY - CHILD WELFARE Full-time equated classified positions Adoption subsidies Adoption support servicesFTES	·	23,920,00 212,189,70 53,602,30
State general fund/general purpose Sec. 105. CHILDREN'S SERVICES AGENCY - CHILD WELFARE Full-time equated classified positions Adoption subsidies Adoption support servicesFTEs Attorney general contract	·	23,920,00 212,189,70 53,602,30 5,191,10
State general fund/general purpose Sec. 105. CHILDREN'S SERVICES AGENCY - CHILD WELFARE Full-time equated classified positions Adoption subsidies Adoption support servicesFTEs Attorney general contract Child abuse and neglect - children's justice	10.0	23,920,00 212,189,70 53,602,30 5,191,10
State general fund/general purpose Sec. 105. CHILDREN'S SERVICES AGENCY - CHILD WELFARE Full-time equated classified positions Adoption subsidies Adoption support servicesFTEs Attorney general contract Child abuse and neglect - children's justice actFTE	10.0	23,920,00 212,189,70 53,602,30 5,191,10 627,90 273,261,80
State general fund/general purpose Sec. 105. CHILDREN'S SERVICES AGENCY - CHILD WELFARE Full-time equated classified positions Adoption subsidies Adoption support servicesFTEs Attorney general contract Child abuse and neglect - children's justice actFTE Child care fund	10.0	23,920,00 212,189,70 53,602,30 5,191,10 627,90 273,261,80 3,500,00
State general fund/general purpose Sec. 105. CHILDREN'S SERVICES AGENCY - CHILD WELFARE Full-time equated classified positions Adoption subsidies Adoption support servicesFTEs Attorney general contract Child abuse and neglect - children's justice actFTE Child care fund Child care fund - indirect cost allotment	10.0	· ·

<pre>complianceFTES Child welfare instituteFTES Child welfare licensingFTES Child welfare medical/psychiatric evaluations 5</pre>	41,350,200 9,331,000 7,357,400 10,428,500
4 Child welfare licensingFTEs 59.0	7,357,400
5 Child welfare medical/psychiatric evaluations	10,428,500
± ±	
6 Children's protective services - caseload	
7 staffFTEs 1,615.0 1	171,293,200
8 Children's protective services supervisors	
9 FTES 387.0	47,996,600
Children's services administrationFTEs 202.2	24,251,200
Children's trust fundFTEs 12.0	4,737,600
12 Contractual services, supplies, and materials	9,567,600
Court-appointed special advocates	1,000,000
Family preservation and prevention services	
administrationFTEs 9.0	1,412,100
Family preservation programsFTEs 34.0	58,035,600
Foster care payments	331,246,200
Foster care services - caseload staffFTEs 981.0	99,825,900
Foster care services supervisorsFTEs 227.0	31,054,200
Guardianship assistance program	11,741,200
21 Interstate compact	179,600
Peer coachesFTEs 45.5	6,291,100
Performance-based funding implementationFTEs 3.0	1,363,100
Permanency resource managersFTEs 28.0	3,479,500
Prosecuting attorney contracts	8,142,800
Raise the age fund	16,838,900
Second line supervisors and technical staff	
28 FTEs 126.0	19,848,000

Settlement monitor		2,219	, 90
Strong families/safe children		12,600	,000
Title IV-E compliance and accountability			
officeFTEs	4.0	458	, 60
Youth in transitionFTEs	4.5	8,192	, 50
GROSS APPROPRIATION	\$	1,491,555	, 60
Appropriated from:			
Interdepartmental grant revenues:			
IDG from department of education		244	, 40
Federal revenues:			
Social security act, temporary assistance for			
needy families		337,639	, 40
Capped federal revenues		111,535	, 40
Total other federal revenues		263,956	,10
Special revenue funds:			
Local funds - county chargeback		42,770	,20
Private - collections		2,700	,00
Children's trust fund		2,895	,30
Total other state restricted revenues		2,000	,00
State general fund/general purpose	\$	727,814	,80
Sec. 106. CHILDREN'S SERVICES AGENCY - JUVENILE			
JUSTICE			
Full-time equated classified positions	120.5		
Bay Pines CenterFTEs	47.0 \$	5,856	, 40
Committee on juvenile justice administration			
FTEs	2.5	363,	, 40
Committee on juvenile justice grants		3,000	,00
Community support servicesFTEs	3.0	2,137	,10

	County juvenile officers		3,977,600
ı	Juvenile justice, administration and		
	maintenanceFTEs	21.0	3,812,300
-	Shawono CenterFTEs	47.0	5,893,100
	GROSS APPROPRIATION		\$ 25,039,900
7	Appropriated from:		
	Federal revenues:		
	Capped federal revenues		8,559,300
	Special revenue funds:		
	Local funds - state share education funds		1,362,600
-	Local funds - county chargeback		4,526,800
-	State general fund/general purpose		\$ 10,591,200
S	ec. 107. PUBLIC ASSISTANCE		
	Full-time equated classified position	1.0	
	Emergency services local office allocations		\$ 8,813,500
	Emergency services local office allocations Family independence program		\$ · · · · · · · · · · · · · · · · · · ·
			\$ 56,013,500
	Family independence program		\$ 56,013,500
	Family independence program Food assistance program benefits		\$ 56,013,500 4,188,184,600 2,045,000
	Family independence program Food assistance program benefits Food Bank Council of Michigan		\$ 56,013,500 4,188,184,600 2,045,000 4,369,100
	Family independence program Food assistance program benefits Food Bank Council of Michigan Indigent burial		\$ 56,013,500 4,188,184,600 2,045,000 4,369,100 50,000
	Family independence program Food assistance program benefits Food Bank Council of Michigan Indigent burial Legal assistance	1.0	\$ 8,813,500 56,013,500 4,188,184,600 2,045,000 4,369,100 50,000 174,951,600 50,000,000
	Family independence program Food assistance program benefits Food Bank Council of Michigan Indigent burial Legal assistance Low-income home energy assistance program	1.0	\$ 56,013,500 4,188,184,600 2,045,000 4,369,100 50,000 174,951,600 50,000,000
	Family independence program Food assistance program benefits Food Bank Council of Michigan Indigent burial Legal assistance Low-income home energy assistance program Michigan energy assistance program—-FTE	1.0	\$ 56,013,500 4,188,184,600 2,045,000 4,369,100 50,000 174,951,600 50,000,000 3,054,200
	Family independence program Food assistance program benefits Food Bank Council of Michigan Indigent burial Legal assistance Low-income home energy assistance program Michigan energy assistance program—-FTE Refugee assistance program	1.0	\$ 56,013,500 4,188,184,600 2,045,000 4,369,100 50,000 174,951,600 50,000,000 3,054,200 3,576,700
	Family independence program Food assistance program benefits Food Bank Council of Michigan Indigent burial Legal assistance Low-income home energy assistance program Michigan energy assistance program—-FTE Refugee assistance program State disability assistance payments	1.0	\$ 56,013,500 4,188,184,600 2,045,000 4,369,100 50,000 174,951,600

1	Federal revenues:		
2	Social security act, temporary assistance for		
3	needy families		50,878,900
4	Capped federal revenues		178,005,800
5	Total other federal revenues		4,183,474,600
6	Special revenue funds:		
7	Child support collections		9,841,900
8	Low-income energy assistance fund		50,000,000
9	Public assistance recoupment revenue		4,820,000
10	Supplemental security income recoveries		914,400
11	State general fund/general purpose		\$ 69,920,900
12	Sec. 108. FIELD OPERATIONS AND SUPPORT SERVICES		
13	Full-time equated classified positions	5,733.5	
14	Administrative support workersFTEs	221.0	\$ 14,270,600
15	Adult services field staffFTEs	520.0	62,342,500
16	Contractual services, supplies, and materials		24,919,700
17	Donated funds positionsFTEs	238.0	28,530,400
18	Elder Law of Michigan MiCAFE contract		350,000
19	Electronic benefit transfer (EBT)		7,989,000
20	Employment and training support services		4,219,100
21	Field policy and administrationFTEs	124.0	19,518,600
22	Field staff travel		8,109,900
23	Food assistance reinvestmentFTEs	16.0	7,446,700
24	Medical/psychiatric evaluations		1,120,100
25	Nutrition educationFTEs	2.0	33,062,900
26	Pathways to potentialFTEs	231.0	25,390,700
27	Public assistance field staffFTEs	4,381.5	479,727,200
28	SSI advocacy legal services grant		100

GROSS APPROPRIATION		\$ 716,997,500
Appropriated from:		
Interdepartmental grant revenues:		
IDG from department of corrections		120,20
IDG from department of education		7,772,20
Federal revenues:		
Social security act, temporary assistance for		
needy families		73,477,20
Capped federal revenues		55,236,50
Total other federal revenues		273,011,40
Special revenue funds:		
Local funds - donated funds		4,251,20
Private funds - donated funds		10,045,00
State general fund/general purpose		\$ 293,083,80
ec. 109. DISABILITY DETERMINATION SERVICES		
ec. 109. DISABILITE DETERMINATION SERVICES		
Full-time equated classified positions	585.4	
	585.4	\$ 116,419,50
Full-time equated classified positions		\$ <u> </u>
Full-time equated classified positions Disability determination operationsFTEs	581.3	\$ 636,80
Full-time equated classified positions Disability determination operationsFTEs Retirement disability determinationFTEs	581.3	636,80
Full-time equated classified positions Disability determination operationsFTEs Retirement disability determinationFTEs GROSS APPROPRIATION	581.3	636,80
Full-time equated classified positions Disability determination operationsFTEs Retirement disability determinationFTEs GROSS APPROPRIATION Appropriated from:	581.3	636,80
Full-time equated classified positions Disability determination operationsFTEs Retirement disability determinationFTEs GROSS APPROPRIATION Appropriated from: Interdepartmental grant revenues:	581.3	636,80 117,056,30
Full-time equated classified positions Disability determination operationsFTEs Retirement disability determinationFTEs GROSS APPROPRIATION Appropriated from: Interdepartmental grant revenues: IDG from department of technology, management,	581.3	636,80 117,056,30
Full-time equated classified positions Disability determination operationsFTEs Retirement disability determinationFTEs GROSS APPROPRIATION Appropriated from: Interdepartmental grant revenues: IDG from department of technology, management, and budget - office of retirement services	581.3	116,419,50 636,80 117,056,30 813,40

ADMINISTRATION AND SPECIAL PROJECTS

Full-time equated classified positions	107.0	
Behavioral health program administrationFTEs	76.0	\$ 51,405,200
Community substance use disorder prevention,		
education, and treatmentFTEs	9.0	79,705,200
Family support subsidy		10,195,100
Federal and other special projects		2,535,600
Gambling addictionFTE	1.0	5,518,200
Mental health diversion council		3,850,000
Office of recipient rightsFTEs	21.0	2,920,10
Opioid response activities		83,155,60
Protection and advocacy services support		194,40
GROSS APPROPRIATION		\$ 239,479,40
Appropriated from:		
Federal revenues:		
Social security act, temporary assistance for		
needy families		10,374,90
Total other federal revenues		162,323,80
Special revenue funds:		
Total private revenues		2,904,70
Total other state restricted revenues		23,802,40
State general fund/general purpose		\$ 40,073,60
Sec. 111. BEHAVIORAL HEALTH SERVICES		
Full-time equated classified positions	15.0	
Autism services		\$ 286,697,90
Behavioral health community supports and		
servicesFTEs	2.0	13,500,80
Certified community behavioral health clinic		
demonstration		101,252,10

1	Civil service charges		297,500
2	Community mental health non-Medicaid services		125,578,200
3	Court-appointed guardian reimbursements		100
4	Federal mental health block grantFTEs	5.0	20,611,800
5	Health homesFTE	1.0	61,337,400
5	Healthy Michigan plan - behavioral health		585,768,500
	Medicaid mental health services		2,810,590,500
	Medicaid substance use disorder services		85,421,900
)	Multicultural integration funding		17,284,900
0	Nursing home PAS/ARR-OBRAFTEs	7.0	13,961,700
1	State disability assistance program substance		
2	use disorder services		2,018,800
3	GROSS APPROPRIATION	\$	4,124,322,100
4	Appropriated from:		
5	Federal revenues:		
6	Social security act, temporary assistance for		
7	needy families		421,000
8	Capped federal revenues		184,500
9	Total other federal revenues		2,786,247,100
0	Special revenue funds:		
1	Total local revenues		10,190,500
2	Total other state restricted revenues		45,764,800
3	State general fund/general purpose	\$	1,281,514,200
4	Sec. 112. STATE PSYCHIATRIC HOSPITALS AND		
5	FORENSIC MENTAL HEALTH SERVICES		
6	Full-time equated classified positions	2,453.6	
7	Average population	770.0	

L Ca	ro Regional Mental Health Center -		
2 p	sychiatric hospital - adultFTEs	537.7	\$ 59,285,000
B Av	erage population	145.0	
Ce:	nter for forensic psychiatryFTEs	622.5	98,443,800
5 Av	erage population	240.0	
De.	velopmental disabilities council and		
р	rojectsFTEs	10.0	3,169,400
Gi	fts and bequests for patient living and		
t	reatment environment		1,000,000
0 Ha	wthorn Center - psychiatric hospital -		
. 1 C	hildren and adolescentsFTEs	287.4	40,974,200
2 Av	erage population	55.0	
3 ID:	EA, federal special education		120,000
4 Ka	lamazoo Psychiatric Hospital - adultFTEs	559.2	70,392,300
.5 Av	erage population	170.0	
6 Pu	rchase of medical services for residents of		
7 h	ospitals and centers		445,600
.8 Re	venue recapture		750,100
9 Sp	ecial maintenance		924,600
0 St	ate hospital administrationFTEs	24.0	4,251,900
1 Wa	lter P. Reuther Psychiatric Hospital - adult-		
2 -	FTEs	412.8	67,773,700
23 Av	erage population	160.0	
4 GR	OSS APPROPRIATION		\$ 347,530,600
25 Ap	propriated from:		
	deral revenues:		
27 To	tal other federal revenues		45,543,000
28 Sp	ecial revenue funds:		

Total local revenues		23,283,20
Total private revenues		1,000,00
Total other state restricted revenues		15,189,20
State general fund/general purpose		\$ 262,515,20
Sec. 113. HEALTH AND HUMAN SERVICES POLICY AND		
Full-time equated classified positions	41.7	
Certificate of need program administration		
FTEs	10.8	\$ 2,716,70
Michigan essential health provider		3,519,60
Minority health grants and contractsFTEs	3.0	1,146,20
Nurse education and research programFTEs	3.0	816,50
Policy and planning administrationFTEs	21.9	2,994,10
Primary care servicesFTEs	3.0	3,805,10
Rural health services		175,00
GROSS APPROPRIATION		\$ 15,173,20
Appropriated from:		
Interdepartmental grant revenues:		
IDG from department of education		2,40
IDG from department of licensing and regulatory		
affairs		816,50
IDG from department of treasury, Michigan		
finance authority		117,70
Federal revenues:		
Social security act, temporary assistance for		
needy families		160,10
Capped federal revenues		13,40
Total other federal revenues		3,092,70

Total other state restricted revenues			3,270,2
State general fund/general purpose		\$	6,835,2
Sec. 114. EPIDEMIOLOGY, EMERGENCY MEDICAL		<u> </u>	
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SERVICES, AND LABORATORY Full-time equated classified positions	416.9		
Bioterrorism preparednessFTEs	53.0	<u>.</u>	30,841,6
		ې 	
Childhood lead programFTEs	4.5		3,168,
Emergency medical services programFTEs	20.0		10,008,
Epidemiology administrationFTEs	82.5		26,091,
Healthy homes programFTEs	21.0		32,799,
Laboratory servicesFTEs	102.0		29,008,
Newborn screening follow-up and treatment			
servicesFTEs	10.5		8,363,
PFAS and environmental contamination response			
FTEs	48.0		20,367,
Vital records and health statisticsFTEs	75.4		11,412,
GROSS APPROPRIATION		\$	172,060,
Appropriated from:			
Interdepartmental grant revenues:			
IDG from department of environment, Great			
Lakes, and energy			1,797,
Federal revenues:			
Capped federal revenues			81,
Total other federal revenues			75,947,
Special revenue funds:			

Total other state restricted revenues		32,674,40
State general fund/general purpose		\$ 61,216,60
Sec. 115. LOCAL HEALTH AND ADMINISTRATIVE		
SERVICES		
Full-time equated classified positions	154.1	
AIDS prevention, testing, and care programs		
FTEs	59.5	\$ 109,609,20
Cancer prevention and control programFTEs	18.0	15,870,50
Chronic disease control and health promotion		
administrationFTEs	19.4	8,285,90
Diabetes and kidney programFTEs	8.0	4,135,00
Essential local public health services		51,419,30
Implementation of 1993 PA 133, MCL 333.17015		20,00
Local health servicesFTEs	3.3	8,707,60
Medicaid outreach cost reimbursement to local		
health departments		12,500,00
Public health administrationFTEs	4.0	1,801,00
Sexually transmitted disease control program		
FTEs	20.0	8,496,80
Smoking prevention programFTEs	15.0	4,379,20
Violence preventionFTEs	6.9	12,724,00
GROSS APPROPRIATION		\$ 237,948,50
Appropriated from:		
Federal revenues:		
Total other federal revenues		89,007,60
Special revenue funds:		
Total local revenues		5,150,00
Total private revenues		75,689,10

Total other state restricted revenues		10,135,600
State general fund/general purpose	\$	57,966,200
Sec. 116. FAMILY HEALTH SERVICES		
Full-time equated classified positions	136.1	
Child and adolescent health care and centers	\$	16,242,700
Dental programsFTEs	5.3	6,734,400
Drinking water declaration of emergency		4,621,000
Family, maternal, and child health		
administrationFTEs	55.0	10,589,400
Family planning local agreements		7,138,00
Immunization programFTEs	15.8	20,659,60
Local MCH services		7,854,50
Maternal navigator pilot program		3,000,00
Maternity home program		4,000,00
Pregnancy prevention program		1,298,80
Pregnancy resource centers		1,500,00
Prenatal care and premature birth avoidance		
grant		1,000,00
Prenatal care outreach and service delivery		
supportFTEs	15.0	37,561,80
Special projects		6,289,10
Sudden and unexpected infant death and		
suffocation prevention program		321,30
Women, infants, and children program		
administration and special projectsFTEs	45.0	19,547,40
Women, infants, and children program local		
agreements and food costs		231,285,00

	\$ 801,20 5,510,00 295,765,80 154,464,10 1,365,50 4,933,30
	\$ 5,510,00 295,765,80 154,464,10
	\$ 5,510,00 295,765,80
	\$ 5,510,00 295,765,80
	\$ 5,510,00
	\$ 5,510,00
	\$ 5,510,00
	801,20
	278,236,40
46.0	9,131,10
2.8	\$ 2,087,10
48.8	
48.8	
	\$ 63,539,5
	4,050,40
	64,785,70
	17,817,70
	228,749,70
	700,00
	<u> </u>

	Full-time equated classified positions	42.0	
	Aging services administrationFTEs	42.0	\$ 9,321,400
	Community services		53,436,000
	Employment assistance		3,500,000
	Nutrition services		48,054,200
	Respite care program		6,468,700
-	Senior volunteer service programs		4,765,300
_	GROSS APPROPRIATION		\$ 125,545,600
	Appropriated from:		
	Federal revenues:		
	Total other federal revenues		68,417,50
-	Special revenue funds:		
	Total private revenues		1,020,00
	Michigan merit award trust fund		4,068,70
	Total other state restricted revenues		2,000,00
-	State general fund/general purpose		\$ 50,039,40
S	ec. 119. HEALTH SERVICES ADMINISTRATION		
	Full-time equated classified positions	40F 0	
	ruii-time equated Classified positions	425.0	
	Electronic health record incentive program	425.0	\$ 8,000,00
]		392.0	\$
] - 1	Electronic health record incentive program		\$ 86,123,10
	Electronic health record incentive program Health services administrationFTEs	392.0	\$ 86,123,10 31,826,80
] -] - (Electronic health record incentive program Health services administrationFTEs Healthy Michigan plan administrationFTEs	392.0	86,123,10 31,826,80
	Electronic health record incentive program Health services administrationFTEs Healthy Michigan plan administrationFTEs GROSS APPROPRIATION	392.0	86,123,10
	Electronic health record incentive program Health services administrationFTEs Healthy Michigan plan administrationFTEs GROSS APPROPRIATION Appropriated from:	392.0	86,123,100 31,826,800 125,949,90 0
	Electronic health record incentive program Health services administrationFTEs Healthy Michigan plan administrationFTEs GROSS APPROPRIATION Appropriated from: Federal revenues:	392.0	86,123,10 31,826,80 125,949,90
	Electronic health record incentive program Health services administrationFTEs Healthy Michigan plan administrationFTEs GROSS APPROPRIATION Appropriated from: Federal revenues: Total other federal revenues	392.0	8,000,000 86,123,100 31,826,800 125,949,900 86,851,100

Total other state restricted revenues	336,300
State general fund/general purpose	\$ 37,723,500
Sec. 120. HEALTH SERVICES	
Adult home help services	\$ 422,388,300
Ambulance services	18,448,200
Auxiliary medical services	7,113,500
Dental clinic program	1,000,000
Dental services	401,391,400
Federal Medicare pharmaceutical program	351,347,500
Health plan services	6,049,445,20
Healthy Michigan plan	5,178,598,60
Home health services	3,479,10
Hospice services	143,370,90
Hospital disproportionate share payments	45,000,00
Hospital services and therapy	781,363,60
Integrated care organizations	329,555,70
Long-term care services	1,816,796,20
Maternal and child health	35,100,00
Medicaid home- and community-based services	
waiver	417,461,40
Medicare premium payments	783,641,20
Personal care services	7,179,70
Pharmaceutical services	305,072,50
Physician services	212,192,20
Program of all-inclusive care for the elderly	229,720,90
School-based services	135,680,00
Special Medicaid reimbursement	333,762,40
Transportation	16,424,000

1	GROSS APPROPRIATION		\$ 18,025,532,500
2	Appropriated from:		
3	Federal revenues:		
4	Total other federal revenues		12,909,771,400
5	Special revenue funds:		
6	Total local revenues		57,931,800
7	Total private revenues		8,900,000
8	Michigan merit award trust fund		57,200,000
9	Total other state restricted revenues		2,691,566,400
10	State general fund/general purpose		\$ 2,300,162,900
11	Sec. 121. INFORMATION TECHNOLOGY		
12	Full-time equated classified positions	11.0	
13	Bridges information system		\$ 63,416,300
14	Child support automation		44,604,800
15	Comprehensive child welfare information system		3,373,200
16	Information technology services and projects		267,972,300
17	Michigan Medicaid information systemFTE	1.0	99,529,200
18	Michigan statewide automated child welfare		
19	information system		21,542,100
20	Technology supporting integrated service		
21	deliveryFTEs	10.0	16,053,100
22	GROSS APPROPRIATION		\$ 516,491,000
23	Appropriated from:		
24	Interdepartmental grant revenues:		
25	IDG from department of education		1,059,700
26	Federal revenues:		
27	Social security act, temporary assistance for		
28	needy families		24,471,900

Capped federal revenues		21,990,800
Total other federal revenues		332,771,700
Special revenue funds:		
Total private revenues		5,250,000
Total other state restricted revenues		2,010,400
State general fund/general purpose	\$	128,936,500
Sec. 122. ONE-TIME APPROPRIATIONS		
Full-time equated classified positions	6.0	
Adoption support services	\$	100,000
ARP - behavioral health care services and		
facilities		125,000,000
ARP - First responder and public safety staff		
mental health		7,500,000
ARP - PACE program supports		40,000,000
Autism comprehensive care center		2,500,000
Behavioral health care services and facilities		138,600,000
Behavioral health patient health information		
tool		850,00
Behavioral health professionals for schools		1,000,00
Bone marrow donor and blood bank programs		10
Child advocacy centers		200,00
Child welfare day treatment pilot program		10
Children's health care		10
Committee on juvenile justice grants		500,00
Comprehensive child welfare information system-		
-FTEs	6.0	29,478,300
Direct care wage increase		400,389,000
Domestic violence prevention and treatment		210,300

Total other federal revenues	273,797,50
Coronavirus state fiscal recovery fund	172,500,00
Federal revenues:	
Appropriated from:	
GROSS APPROPRIATION	\$ 761,468,80
Wrap-around services	200,00
Wellness center pilot project	1,000,00
Teen walk-in mental health	50,00
Technology upgrades	400,10
Safe harbor	10
Pathway hub	3,400,00
programs	500,00
Parental stress and child mental health	
Narcotics awareness program	10
Mediation services	40,00
Long-term care quality improvement	10
Jail diversion fund	10
grant program	1,250,00
Human trafficking victims inclusive services	
Home repair and plumbing assistance grants	10
Healthy communities grant	10
Health workforce development	6,550,00
Great Lakes recovery center	250,00
Foster care services	1,000,00
Food security council	10
Food distribution	500,00

PART 2

PROVISIONS CONCERNING APPROPRIATIONS

FOR FISCAL YEAR 2022-2023

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 2022-2023 is \$9,013,075,200.00 and state spending from state sources to be paid to local units of government for fiscal year 2022-2023 is \$1,800,065,900.00. The itemized statement below identifies appropriations from which spending to local units of government will occur:

CHILD SUPPORT ENFORCEMENT	
Child support incentive payments	\$ 10,857,300
Legal support contracts	200
COMMUNITY SERVICES AND OUTREACH	
Crime victim grants administration services	395,300
Crime victim rights services grants	12,033,300
Domestic violence prevention and treatment	217,600
Homeless programs	9,20
Housing and support services	121,300
CHILDREN'S SERVICES AGENCY - CHILD WELFARE	
Adoption subsidies	25,400
Child care fund	152,649,000
Child care fund - indirect cost allotment	3,521,20
Child welfare licensing	120,00
Child welfare medical/psychiatric evaluations	19,00
Children's trust fund grants	24,20

Contractual services, supplies, and materials	156,200
Family preservation programs	311,500
Foster care payments	1,274,700
Strong families/safe children	73,800
Youth in transition	2,900
CHILDREN'S SERVICES AGENCY - JUVENILE JUSTICE	
Bay Pines Center	37,100
Community support services	103,300
Shawono Center	1,700
PUBLIC ASSISTANCE	
Emergency services local office allocations	765,600
Family independence program	900
Indigent burial	4,800
Michigan energy assistance program	216,100
State disability assistance payments	151,500
FIELD OPERATIONS AND SUPPORT SERVICES	
Contractual services, supplies, and materials	64,300
Employment and training support services	7,200
DISABILITY DETERMINATION SERVICES	
Disability determination operations	2,700
BEHAVIORAL HEALTH PROGRAM ADMINISTRATION AND	
SPECIAL PROJECTS	
Behavioral health program administration	599,800
Gambling addiction	1,376,700
Mental health diversion council	202,200
BEHAVIORAL HEALTH SERVICES	
Autism services	99,585,400
Certified community behavioral health clinic	19,315,500

Community mental health non-Medicaid services	125,578,200
Community substance use disorder prevention,	
education, and treatment	4,977,700
Health homes	7,556,800
Healthy Michigan plan - behavioral health	58,224,800
Medicaid mental health services	959,352,600
Medicaid substance use disorder services	30,075,700
Multicultural integration funding	1,615,900
Nursing home PAS/ARR-OBRA	2,709,100
State disability assistance program substance	
use disorder services	1,788,900
STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL	
HEALTH SERVICES	
Caro Regional Mental Health Center -	
psychiatric hospital - adult	228,000
Center for forensic psychiatry	504,000
Hawthorn Center - psychiatric hospital -	
children and adolescents	68,000
Kalamazoo Psychiatric Hospital - adult	40,000
Walter P. Reuther Psychiatric Hospital - adult	50,000
HEALTH AND HUMAN SERVICES POLICY AND	
INITIATIVES	
Primary care services	98,000
EPIDEMIOLOGY, EMERGENCY MEDICAL SERVICES, AND	
LABORATORY	
LABORATORY Epidemiology administration	285,100

A	IDS prevention, testing, and care programs	2,416,200
C	ancer prevention and control program	46,900
E	ssential local public health services	44,364,400
I	mplementation of 1993 PA 133, MCL 333.17015	400
L	ocal health services	1,537,100
S	exually transmitted disease control program	505,100
S	moking prevention program	201,800
F	AMILY HEALTH SERVICES	
F	amily planning local agreements	7,111,400
I	mmunization program	2,197,400
P	regnancy prevention program	28,100
P	renatal care outreach and service delivery	
	support	4,967,400
С	HILDREN'S SPECIAL HEALTH CARE SERVICES	
M	edical care and treatment	897,000
0	utreach and advocacy	2,755,000
A	GING SERVICES AGENCY	
A	ging services administration	1,303,600
C	ommunity services	23,833,500
N	utrition services	13,031,400
R	espite care program	5,632,700
S	enior volunteer service programs	914,800
Н	EALTH SERVICES	
A	dult home help services	172,000
A	mbulance services	527,000
A	uxiliary medical services	1,000
	ental services	632,000
	ealthy Michigan plan	1,089,000

1	Home health services	8,000
2	Hospice services	43,000
3	Hospital disproportionate share payments	20,000
4	Hospital services and therapy	3,274,000
5	Long-term care services	99,363,000
6	Medicaid home- and community-based services	
7	waiver	13,383,000
8	Personal care services	32,000
9	Pharmaceutical services	18,000
10	Physician services	3,376,000
11	Special Medicaid reimbursement	40,000
12	Transportation	158,000
13	ONE-TIME APPROPRIATIONS	
14	Behavioral health professionals for schools	1,000,000
15	Direct care wage increase	58,298,300
16	Human trafficking victims inclusive services	
17	grant program	250,000
18	TOTAL OF PAYMENTS TO LOCAL UNITS OF GOVERNMENT	\$ 1,800,065,900

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

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

- (a) "AIDS" means acquired immunodeficiency syndrome.
- (b) "CMHSP" means a community mental health services program as that term is defined in section 100a of the mental health code, 1974 PA 258, MCL 330.1100a.
- (c) "CMS" means the Centers for Medicare and MedicaidServices.

- (d) "Current fiscal year" means the fiscal year ending
 September 30, 2023.
- 3 (e) "Department" means the department of health and human4 services.
- 5 (f) "Director" means the director of the department.
- **6** (g) "DSH" means disproportionate share hospital.
- 7 (h) "EPSDT" means early and periodic screening, diagnosis, and 8 treatment.
- 9 (i) "Federal poverty level" means the poverty guidelines 10 published annually in the Federal Register by the United States 11 Department of Health and Human Services under its authority to 12 revise the poverty line under 42 USC 9902.
- 13 (j) "FTE" means full-time equated.
- 14 (k) "GME" means graduate medical education.
- 15 (l) "Health plan" means, at a minimum, an organization that
 16 meets the criteria for delivering the comprehensive package of
 17 services under the department's comprehensive health plan.
- 20 (n) "HMO" means health maintenance organization.
- 21 (o) "IDEA" means the individuals with disabilities education 22 act, 20 USC 1400 to 1482.
- 23 (p) "IDG" means interdepartmental grant.
- 24 (q) "MCH" means maternal and child health.
- 25 (r) "Medicaid" means subchapter XIX of the social security
- 26 act, 42 USC 1396 to 1396w-6.
- 27 (s) "Medicare" means subchapter XVIII of the social security act, 42 USC 1395 to 1395lll.
- 29 (t) "MiCAFE" means Michigan's coordinated access to food for

1 the elderly.

- (u) "MIChild" means the program described in section 1670 of 2 3 this part.
- (v) "MiSACWIS" means Michigan statewide automated child 4 5 welfare information system.
- (w) "PAS/ARR-OBRA" means the preadmission screening and annual 7 resident review required under the omnibus budget reconciliation 8 act of 1987, section 1919(e)(7) of the social security act, 42 USC 1396r. 9
- 10 (x) "PFAS" means perfluoroalkyl and polyfluoroalkyl 11 substances.
- 12 (y) "PIHP" means an entity designated by the department as a regional entity or a specialty prepaid inpatient health plan for 13 14 Medicaid mental health services, services to individuals with
- 15 developmental disabilities, and substance use disorder services.
- 16 Regional entities are described in section 204b of the mental
- 17 health code, 1974 PA 258, MCL 330.1204b. Specialty prepaid
- 18 inpatient health plans are described in section 232b of the mental
- 19 health code, 1974 PA 258, MCL 330.1232b.
- 20 (z) "Previous fiscal year" means the fiscal year ending 21 September 30, 2022.
- (aa) "Quarterly reports" means 4 reports shall be submitted to 22 23 the required recipients by the following dates: February 1, April 1, July 1, and September 30 of the current fiscal year. 24
- 25 (bb) "Semiannual basis" means March 1 and September 30 of the 26 current fiscal year.
- 27 (cc) "Settlement" means the settlement agreement entered in the case of Dwayne B. v Snyder, docket no. 2:06-cv-13548 in the 28 29 United States District Court for the Eastern District of Michigan.

- 1 (dd) "SSI" means supplemental security income.
- (ee) "Temporary assistance for needy families" or "TANF" or
 "title IV-A" means part A of subchapter IV of the social security
 act, 42 USC 601 to 619.
- (ff) "Title IV-B" means part B of title IV of the socialsecurity act, 42 USC 621 to 629m.
- 7 (gg) "Title IV-D" means part D of title IV of the social8 security act, 42 USC 651 to 669b.
- 9 (hh) "Title IV-E" means part E of title IV of the social10 security act, 42 USC 670 to 679c.
- 11 (ii) "Title X" means subchapter VIII of the public health 12 service act, 42 USC 300 to 300a-8, which establishes grants to 13 states for family planning services.
- Sec. 204. The department shall use the internet to fulfill the reporting requirements of this part. This requirement shall include transmission of reports via email to the recipients identified for each reporting requirement and it shall include placement of reports on an internet site.
- Sec. 205. To the extent permissible under section 261 of the management and budget act, 1984 PA 431, MCL 18.1261, all of the following apply to funds appropriated in part 1:
- (a) The funds must not be used for the purchase of foreign
 goods or services, or both, if competitively priced and of
 comparable quality American goods or services, or both, are
 available.
- (b) Preference must be given to goods or services, or both,
 manufactured or provided by Michigan businesses, if they are
 competitively priced and of comparable quality.
- (c) Preference must be given to goods or services, or both,

that are manufactured or provided by Michigan businesses owned and operated by veterans, if they are competitively priced and of comparable quality.

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

Sec. 207. The department shall prepare a report on out-of-state travel expenses not later than January 1 of each year. The travel report shall be a listing of all travel by classified and unclassified employees outside this state in the previous fiscal year that was funded in whole or in part with funds appropriated in the department's budget. The report shall be submitted to the senate and house appropriations committees, the senate and house fiscal agencies, and the state budget office. The report shall include the following information:

- (a) The dates of each travel occurrence.
- (b) The total transportation and related costs of each travel occurrence, including the proportion funded with state general fund/general purpose revenues, the proportion funded with state restricted revenues, the proportion funded with federal revenues, and the proportion funded with other revenues.
- Sec. 208. Funds appropriated in part 1 shall not be used by the department to hire a person to provide legal services that are the responsibility of the attorney general. This prohibition does

not apply to legal services for bonding activities and for those outside services that the attorney general authorizes.

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

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

- (2) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$20,000,000.00 for state restricted contingency authorization. These funds are not available for expenditure until they have been transferred to another line item in part 1 under section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.
- (3) In addition to the funds appropriated in part 1, there is appropriated an amount not to exceed \$5,000,000.00 for local contingency authorization. These funds are not available for expenditure until they have been transferred to another line item in part 1 under section 393(2) of the management and budget act,

1 1984 PA 431, MCL 18.1393.

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- 2 (4) In addition to the funds appropriated in part 1, there is 3 appropriated an amount not to exceed \$2,000,000.00 for private 4 contingency authorization. These funds are not available for 5 expenditure until they have been transferred to another line item 6 in part 1 under section 393(2) of the management and budget act, 7 1984 PA 431, MCL 18.1393.
 - Sec. 211. The department shall cooperate with the department of technology, management, and budget to maintain a searchable website accessible by the public at no cost that includes, but is not limited to, all of the following for the department:
 - (a) Fiscal year-to-date expenditures by category.
 - (b) Fiscal year-to-date expenditures by appropriation unit.
- 14 (c) Fiscal year-to-date payments to a selected vendor,
 15 including the vendor name, payment date, payment amount, and
 16 payment description.
 - (d) The number of active department employees by job classification.
- (e) Job specifications and wage rates.
 - Sec. 212. Within 14 days after the release of the executive budget recommendation, the department shall cooperate with the state budget office to provide the chairpersons of the senate and house appropriations committees, the chairpersons of the senate and house appropriations subcommittees on the department budget, and the senate and house fiscal agencies with an annual report on estimated state restricted fund balances, state restricted fund projected revenues, and state restricted fund expenditures for the previous fiscal year and the current fiscal year.
- Sec. 213. The department shall maintain, on a publicly

accessible website, a department scorecard that identifies, tracks, and regularly updates key metrics that are used to monitor and improve the department's performance.

Sec. 214. Total authorized appropriations from all sources under part 1 for legacy costs for the current fiscal year are estimated at \$309,264,700.00. From this amount, total department appropriations for pension-related legacy costs are estimated at \$187,764,100.00. Total department appropriations for retiree health care legacy costs are estimated at \$121,500,600.00.

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

- (a) A legislative objective of this part or of a bill or amendment to a bill to amend the social welfare act, 1939 PA 280, MCL 400.1 to 400.119b, cannot be implemented because implementation would conflict with or violate federal regulations.
- (b) A federal grant, for which a notice of an award has been received, cannot be used, or will not be used.
- Sec. 216. (1) In addition to funds appropriated in part 1 for all programs and services, there is appropriated for write-offs of accounts receivable, deferrals, and for prior year obligations in excess of applicable prior year appropriations, an amount equal to total write-offs and prior year obligations, but not to exceed amounts available in prior year revenues.
- (2) The department's ability to satisfy appropriation fund sources in part 1 is not limited to collections and accruals pertaining to services provided in the current fiscal year, but

also includes reimbursements, refunds, adjustments, and settlements from prior years.

Sec. 217. (1) By November 10 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director on the detailed name and amounts of estimated federal, restricted, private, and local sources of revenue that support the appropriations in each of the line items in part 1.

(2) Upon the release of the next fiscal year executive budget recommendation, the department shall report to the same parties in subsection (1) on the amounts and detailed sources of federal, restricted, private, and local revenue proposed to support the total funds appropriated in each of the line items in part 1 of the next fiscal year executive budget proposal.

Sec. 218. As required under part 23 of the public health code, 1978 PA 368, MCL 333.2301 to 333.2321, the department shall provide an annual listing of proposed basic health services by October 1 of the current fiscal year and each succeeding year to ensure that appropriate review and comment occurs in the development of the executive budget recommendations. The listing must be provided by the department to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office.

Sec. 219. (1) The department may contract with the Michigan Public Health Institute for the design and implementation of projects and for other public health-related activities prescribed in section 2611 of the public health code, 1978 PA 368, MCL 333.2611. The department may develop a master agreement with the

Michigan Public Health Institute to carry out these purposes for up to a 1-year period.

- (2) The Michigan Public Health Institute shall not be a passthrough, contract manager, or indirect contract manager for a contract with the department for a project or other public health-related activity.
- (3) All of the following must apply regarding employment or contracting by the Michigan Public Health Institute of current or former employees of the department:
- (a) An individual who is a current employee of the department shall not be simultaneously employed by or under contract for services with the Michigan Public Health Institute.
- (b) An individual who is a former employee of the department shall not begin employment with or contractual services with the Michigan Public Health Institute before 3 months after the date of the cessation of the individual's employment with the department.
- (c) An individual who is a current employee of the department or who is currently under contract with the department shall not serve as a member of the board of directors of the Michigan Public Health Institute during the duration of the individual's employment or contractual commitment with the department.
- (4) On the fifteenth day of each month, the department shall provide a report listing all active contracts for projects between the department and the Michigan Public Health Institute during the previous month to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget director. The list must include, but not be limited to, the project, the purpose of the project, the initial project date, the project period, the

contractual project amount, the cumulative annual expenditures through the reporting period, and the source of the funds.

- (5) A contract between the department and the Michigan Public Health Institute for a project of \$5,000,000.00 or greater must be submitted to the legislature for approval at least 30 days before the effective date of the contract. If the legislature does not take action, the contract may take effect.
- (6) A request for extension of a contract between the department and the Michigan Public Health Institute that is more than 36 months after the initial effective date of the contract must be submitted to the legislature for approval at least 30 days before the effective date of the extension of the contract extension. If the legislature does not take action, the extension of the contract may take effect.
- (7) The department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director on a semiannual basis all of the following:
- (a) A detailed description of each funded project.
- (b) The amount allocated for each project, the appropriation line item from which the allocation is funded, and the source of financing for each project.
 - (c) The expected project duration.
- (d) A detailed spending plan for each project, including a
 list of all subgrantees and the amount allocated to each
 subgrantee.
- (8) On a semiannual basis, the department shall provide to the
 same parties listed in subsection (1) a copy of all reports,
 studies, and publications produced by the Michigan Public Health

1 Institute, its subcontractors, or the department with the funds
2 appropriated in the department's budget in the previous fiscal year
3 and allocated to the Michigan Public Health Institute.

Sec. 219a. (1) An individual who is a current employee of the department shall not be simultaneously employed by or under contract for services with an outside agency that is currently under contract with the department.

(2) An individual who is a former employee of the department shall not begin employment with or contractual services with an outside agency that is currently under contract with the department before 3 months after the date of the cessation of the individual's employment with the department.

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

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

Sec. 222. (1) The department shall provide written notification to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office of any major policy changes at least 30 days before the implementation date of those policy changes.

(2) The department shall make the entire policy and procedures

manual available and accessible to the public via the department website.

- (3) The department shall report by April 1 of the current fiscal year on each specific policy change made to implement a public act affecting the department that took effect during the prior calendar year to the senate and house appropriations committees, the senate and house appropriations subcommittees on the department budget, the joint committee on administrative rules, and the senate and house fiscal agencies.
- (4) The department shall attach each policy bulletin issued during the prior calendar year to the report issued in subsection (3).
- Sec. 223. The department may establish and collect fees for publications, videos and related materials, conferences, and workshops. Collected fees are appropriated when received and shall be used to offset expenditures to pay for printing and mailing costs of the publications, videos and related materials, and costs of the workshops and conferences. The department shall not collect fees under this section that exceed the cost of the expenditures. When collected fees are appropriated under this section in an amount that exceeds the current fiscal year appropriation, within 30 days the department shall notify the chairs of the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies and policy offices, and the state budget director of that fact.
- Sec. 224. The department may retain all of the state's share of food assistance overissuance collections as an offset to general fund/general purpose costs. Retained collections shall be applied against federal funds deductions in all appropriation units where

- department costs related to the investigation and recoupment of 1 food assistance overissuances are incurred. Retained collections in 2 excess of those costs shall be applied against the federal funds 3 deducted in the departmental administration and support 4
- 5 appropriation unit.

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- Sec. 225. (1) For providers and entities receiving funds from the appropriations in part 1, sanctions, suspensions, conditions for provisional license status, and other penalties shall not be more stringent for private service providers than for public 10 entities performing equivalent or similar services.
- (2) For services to be provided from the appropriations in 11 part 1, both of the following apply: 12
 - (a) Neither the department nor private service providers or licensees shall be granted preferential treatment or considered automatically to be in compliance with administrative rules based on whether they have collective bargaining agreements with direct care workers.
 - (b) Private service providers or licensees without collective bargaining agreements shall not be subjected to additional requirements or conditions of licensure based on their lack of collective bargaining agreements.
 - Sec. 226. If the revenue collected by the department from fees and collections exceeds the amount appropriated in part 1, the revenue may be carried forward with the approval of the state budget director into the subsequent fiscal year. The revenue carried forward under this section shall be used as the first source of funds in the subsequent fiscal year.
- 28 Sec. 227. The state departments, agencies, and commissions 29 receiving tobacco tax funds and Healthy Michigan fund revenue from

part 1 shall report by April 1 of the current fiscal year to the senate and house appropriations committees, the senate and house fiscal agencies, and the state budget director on the following:

- (a) A detailed spending plan by appropriation line item including description of programs and a summary of organizations receiving these funds.
- (b) A description of allocations or bid processes including need or demand indicators used to determine allocations.
- (c) Eligibility criteria for program participation and maximum benefit levels where applicable.
- (d) Outcome measures used to evaluate programs, including measures of the effectiveness of these programs in improving the health of residents of this state.
- Sec. 228. (1) If the department is authorized under state or federal law to collect an overpayment owed to the department, the department may assess a penalty of 1% per month beginning 60 days after notification. If an overpayment is caused by department error, a penalty may not be assessed until 6 months after the initial notification date of the overpayment amount. The department shall not collect penalty interest in an amount that exceeds the amount of the original overpayment. The state share of any funds collected under this section shall be deposited in the state general fund.
- (2) By September 30 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office on penalty amounts assessed and paid by account during the current fiscal year, the reason for the penalty, and the current status of the account.

Sec. 229. From the \$370,000.00 of TANF revenue appropriated in 1 part 1 for training and program support, the department shall 2 extend the interagency agreement with the office of employment and 3 training within the department of labor and economic opportunity 4 5 for the duration of the current fiscal year, which concerns TANF 6 funding to provide job readiness and welfare-to-work programming. 7 \$10,000.00 of TANF revenue is appropriated in part 1 for the department to report the following specific outcome and performance 8 measures to the senate and house appropriations subcommittees on 9 10 the department budget, the senate and house appropriations 11 subcommittees on general government, the senate and house fiscal agencies, the senate and house policy offices, and the state budget 12 office by January 1 of the current fiscal year for the previous 13 14 fiscal year:

- (i) Direct services to recipients.
- 18 (ii) Administrative expenditures.
- 19 (b) The number of family independence program (FIP) recipients
 20 served through the TANF funding, including all of the following:
 - (i) The number and percentage who obtained employment through Michigan Works!
 - (ii) The number and percentage who fulfilled their TANF work requirement through other job readiness programming.
 - (iii) Average TANF spending per recipient.
- 26 (iv) The number and percentage of recipients who were referred to Michigan Works! but did not receive a job or job readiness placement and the reasons why.
- 29 (c) The following data itemized by Michigan Works! agency:

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- (i) The number of referrals to Michigan Works! job readiness programs.
- (ii) The number of referrals to Michigan Works! job readiness programs who became a participant in the Michigan Works! job readiness programs.
- (iii) The number of participants who obtained employment, and the cost per participant case.

Sec. 230. By December 31 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office on the status of the implementation of any noninflationary, noncaseload, programmatic funding increases in the current fiscal year from the previous fiscal year. The report shall confirm the implementation of already implemented funding increases and provide explanations for any planned implementation of funding increases that have not yet occurred. For any planned implementation of funding increases that have not yet occurred, the department shall provide an expected implementation date and the reasons for delayed implementation.

- Sec. 231. (1) The department shall not expend the funds appropriated in part 1 to enter into any contract with a Medicaid managed care organization of MI Choice waiver, MI Health Link, or behavioral health unless the Medicaid managed care organization agrees to do all of the following:
- (a) Continue the direct care wage increase for the services noted in DHHS Medicaid Provider L Letter 21-76 under the Medicaid managed care organization's relevant program.
 - (b) Ensure to the greatest extent possible the full amount for

- funds appropriated for a direct care worker wage increase, except
 for costs incurred by the employer, including payroll taxes, due to
 direct care worker wages are provided to direct care workers
 through maintained increased wages.
 - (c) Permit a direct care worker to elect, in writing or electronically, to not receive the wage increase provided in this section.
 - (d) Require direct care worker agencies that the Medicaid managed care organization subcontracts with to track and report quarterly the total amount and percent of Medicaid reimbursements paid to that direct care worker agency that are used to pay direct care worker wages.
 - (e) Require direct care worker agencies that the Medicaid managed care provider subcontracts with to track and report quarterly the hourly wages paid for each direct care worker hired by the direct care worker agency.
 - (f) Track quarterly the hourly wages paid each direct care worker hired directly by the Medicaid managed care organization or by CMHSP.
 - (g) Report quarterly to the department the information required in subdivisions (d), (e), and (f).
 - (2) Upon request, the department shall provide to the legislature the quarterly reports required in subsection (1)(g).
 - (3) By June 30 of the current fiscal year, the department shall provide the results of a market rate survey for direct care worker wages by PIHP region to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office.

Sec. 232. (1) The department shall provide the approved spending plan for each line item receiving an appropriation in the current fiscal year to the senate and house appropriations subcommittees on the department budget and the senate and house fiscal agencies within 60 days after approval by the department but not later than January 15 of the current fiscal year. Compliance with this section is not met unless a line-item appropriation name is included in all places that a line-item appropriation number is listed. The spending plan shall include the following information 10 regarding planned expenditures for each category: allocation in the 11 previous period, change in the allocation, and new allocation. The 12 spending plan shall include the following information regarding each revenue source for the line item: category of the fund source 13 14 indicated by general fund/general purpose, state restricted, local, 15 private, or federal. Figures included in the approved spending plan 16 shall not be assumed to constitute the actual final expenditures, 17 as line items may be updated on an as-needed basis to reflect 18 changes in projected expenditures and projected revenue. The department shall supplement the spending plan information by 19 20 providing a list of all active contracts and grants in the department's contract system. For amounts listed in the other 21 contracts category of each spending plan, the department shall 22 23 provide a list of all contracts and grants and amounts for the current fiscal year, and include the name of the line item and the 24 25 name of the fund source related to each contract or grant and amount. For amounts listed in the all other costs category of each 26 27 spending plan, the department shall provide a list detailing planned expenditures and amounts for the current fiscal year, and 28 29 include the name of the line item and the name of the fund source

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related to each amount and expenditure.

 (2) Notwithstanding any other appropriation authority granted in part 1, the department shall not appropriate any additional general fund/general purpose funds or any related federal and state restricted funds without providing a written 30-day notice to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices.

Sec. 233. If the state administrative board, acting under section 3 of 1921 PA 2, MCL 17.3, transfers funds from an amount appropriated under this article, the legislature may, by a concurrent resolution adopted by a majority of the members elected to and serving in each house, inter-transfer funds within this article for the particular department, board, commission, office, or institution.

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

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

(a) Report to the house and senate appropriations committees, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office any amount of severance pay for a department director, deputy director, or other high-ranking department official not later than 14 days after a severance agreement with the director or official is signed. The name of the

- director or official and the amount of severance pay must be included in the report required by this subdivision.
 - (b) Maintain an internet website that posts any severance pay in excess of 6 weeks of wages, regardless of the position held by the former department employee receiving severance pay.
 - (c) By February 1, report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on the total amount of severance pay remitted to former department employees during the fiscal year ending September 30, 2022 and the total number of former department employees that were remitted severance pay during the fiscal year ending September 30, 2022.
 - (2) As used in this section, "severance pay" means compensation that is both payable or paid upon the termination of employment and in addition to either wages or benefits earned during the course of employment or generally applicable retirement benefits.
- Sec. 237. (1) Any department, agency, board, commission, or public officer that receives funding under part 1 shall not:
- 21 (a) Require as a condition of accessing any facility or
 22 receiving services that an individual provide proof that he or she
 23 has received a COVID-19 vaccine except as provided by federal law
 24 or as a condition of receiving federal Medicare or Medicaid
 25 funding.
- 26 (b) Produce, develop, issue, or require a COVID-19 vaccine27 passport.
- (c) Develop a database or make any existing database publiclyavailable to access an individual's COVID-19 vaccine status by any

- 1 person, company, or governmental entity.
- 2 (d) Require as a condition of employment that an employee or official provide proof that he or she has received a COVID-19 vaccine. This subdivision does not apply to any hospital, congregate care facility, or other medical facility or any hospital, congregate care facility, or other medical facility operated by a local subdivision that receives federal Medicare or Medicaid funding.
 - (2) A department, agency, board, commission, or public officer may not subject any individual to any negative employment consequence, retaliation, or retribution because of that individual's COVID-19 vaccine status.
 - (3) Subsection (1) does not prohibit any person, department, agency, board, commission, or public officer from transmitting proof of an individual's COVID-19 vaccine status to any person, company, or governmental entity, so long as the individual provides affirmative consent.
 - (4) If a department, agency, board, commission, subdivision, or official or public officer is required to establish a vaccine policy due to a federal mandate, it must provide exemptions to any COVID-19 vaccine policy to the following individuals:
 - (a) An individual for whom a physician certifies that a COVID-19 vaccine is or may be detrimental to the individual's health or is not appropriate.
 - (b) An individual who provides a written statement to the effect that the requirements of the COVID-19 vaccine policy cannot be met because of religious convictions or other consistently held objection to immunization.
- 29 (5) As used in this section, "public officer" means a person

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appointed by the governor or another executive department official or an elected or appointed official of this state or a political subdivision of this state.

Sec. 238. An executive branch department, agency, board, or commission that receives funding under part 1 shall not permit a state employee who was not working remotely, either full-time or part-time, before February 28, 2020 to work remotely, either full-time or part-time, during the current fiscal year.

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

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

Sec. 241. By March 1 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget director on total actual expenditures in the previous fiscal year for advertising and media outreach, including the purpose, amount, and fund source by program or appropriation line-item.

Sec. 242. From the funds appropriated in part 1 for departmental administration and management, \$100,000.00 is allocated to produce a description of programs report for the current fiscal year by November 10 of the current fiscal year. The

committees, the senate and house fiscal agencies, and the senate 2 and house policy offices. The report shall include the 3 appropriation unit, the line-item name and number, the 4

report shall be submitted to the senate and house appropriations

5 appropriation history, the program name, the program overview, the

6 financing detail, and where applicable, the legal basis for the 7

program and program effectiveness and outcomes.

- Sec. 243. From the funds appropriated in part 1, the department shall allocate \$50,000.00 to provide notice and information to health care providers and the public that the department shall not use state restricted funds or state general funds, or allow grantees or subcontractors to use those funds, appropriated in part 1 to fund any elective abortion. As used in this section, "elective abortion" means the intentional use of an instrument, drug, or other substance or device to terminate a woman's pregnancy for a purpose other than to increase the probability of a live birth, to preserve the life or health of the child after live birth, or to remove a fetus that has died as a result of natural causes, accidental trauma, or a criminal assault on the pregnant woman. Elective abortion does not include any of the following:
- (a) The use or prescription of a drug or device intended as a contraceptive.
- (b) The intentional use of an instrument, drug, or other substance or device by a physician to terminate a woman's pregnancy if the woman's physical condition, in the physician's reasonable medical judgment, necessitates the termination of the woman's pregnancy to avert her death.
- (c) Treatment upon a pregnant woman who is experiencing a

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miscarriage or has been diagnosed with an ectopic pregnancy.

Sec. 244. On a monthly basis, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on any line-item appropriation for which the department estimates total annual expenditures would exceed the funds appropriated for that line-item appropriation by 5% or more. The department shall provide a detailed explanation for any relevant line-item appropriation exceedance and shall identify the corrective actions undertaken to mitigate line-item appropriation expenditures from exceeding the funds appropriated for that line-item appropriation by a greater amount. This section does not apply for line-item appropriations that are part of the May revenue estimating conference caseload and expenditure estimates.

Sec. 250. The director or a local health officer shall not issue or enforce any orders or other directives that require an individual in this state who is under the age of 18 to wear a face mask or face covering.

Sec. 251. From the funds appropriated in part 1 for departmental administration and support, the department must develop reports related to emergency orders involving an epidemic issued during the fiscal year ending on September 30, 2023. Within 7 days after the issuance of any emergency order involving an epidemic, a report under this section must be provided to the senate and house appropriations committees and the senate and house fiscal agencies, and posted publicly on the department's website. A report under this section must contain the following:

(a) An explanation of the nature and scope of the epidemic that the emergency order is intended to address.

- (b) A description of each area of the state that the department has determined is threatened by the epidemic.
- (c) If applicable, an explanation that contains the evidence relied upon to determine that a procedure established in the emergency order ensures the continuation of essential public health services or the enforcement of health laws.
- (d) If applicable, an explanation that contains the evidence relied upon to determine that a prohibition on gathering contained in the emergency order is necessary to protect the public health.
- (e) A list of primary experts, organizations, or sources not affiliated with the department that were relied upon to issue the emergency order and any corresponding expenditures by the department associated with any such experts, organizations, or sources.
- (f) A list of primary state government personnel responsible for developing the emergency order.
 - (g) A description of what factors the department will consider when deciding to terminate or modify the order.
 - Sec. 252. The appropriations in part 1 for Healthy Michigan plan behavioral health, Healthy Michigan plan administration, and Healthy Michigan plan are contingent on the provisions of the social welfare act, 1939 PA 280, MCL 400.1 to 400.119b, that were contained in 2013 PA 107 not being amended, repealed, or otherwise altered to eliminate the Healthy Michigan plan. If that occurs, then, upon the effective date of the amendatory act that amends, repeals, or otherwise alters those provisions, the remaining funds in the Healthy Michigan plan behavioral health, Healthy Michigan plan administration, and Healthy Michigan plan line items shall only be used to pay previously incurred costs and any remaining

appropriations shall not be allotted to support those line items.

Sec. 253. The funds appropriated in part 1 for Medicaid are contingent on House Bill No. 6011 of the 101st Legislature being enacted into law. If House Bill No. 6011 of the 101st Legislature is not enacted into law by October 1 of the current fiscal year, the funds appropriated in part 1 for Medicaid must only be used to pay for costs incurred prior to enactment.

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

- (a) The utilization of trauma-informed practices.
- 15 (b) Age-appropriate education and information on human16 trafficking.
 - (c) Age-appropriate education and information on sexual abuse prevention.
 - (2) The collaboration shall include the child welfare institute within the department, which provides training and education for public and private employees who work within the child protective services, foster care, adoption, and juvenile justice systems.
 - (3) The department shall report by March 1 of the current fiscal year on the activities and status of implementation of the requirements described in subsections (1) and (2) to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office.

Sec. 263. (1) Except as otherwise provided in this subsection, before submission of a waiver, a state plan amendment, or a similar proposal to CMS or other federal agency, the department shall provide written notification of the planned submission to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies and policy offices, and the state budget office. This subsection does not apply to the submission of a waiver, a state plan amendment, or similar proposal that does not propose a material change or is outside of the ordinary course of waiver, state plan amendment, or similar proposed submissions.

(2) The department shall provide written reports on a semiannual basis to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office summarizing the status of any new or ongoing discussions with CMS, the United States Department of Health and Human Services, or other federal agency regarding potential or future waiver applications as well as the status of submitted waivers that have not yet received federal approval. If, at the time a semiannual report is due, there are no reportable items, then no report is required to be provided.

Sec. 264. The department shall not take disciplinary action against an employee of the department in the state classified civil service for communicating with a member of the legislature or his or her staff, unless the communication is prohibited by law and the department is exercising its authority as provided by law.

Sec. 270. The department shall advise the legislature of the receipt of a notification from the attorney general's office of a legal action in which expenses had been recovered according to

- 1 section 106(6) of the social welfare act, 1939 PA 280, MCL 400.106.
- 2 By February 1 of the current fiscal year, the department shall
- 3 submit a written report to the house and senate appropriations
- 4 subcommittees on the department budget, the house and senate fiscal
- 5 agencies, and the state budget office that includes, at a minimum,
- 6 all of the following:

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- 7 (a) The total amount recovered from the legal action.
- 8 (b) The program or service for which the money was originally9 expended.
- 10 (c) Details on the disposition of the funds recovered such as 11 the appropriation or revenue account in which the money was 12 deposited.
- 13 (d) A description of the facts involved in the legal action.
 - Sec. 274. (1) The department, in collaboration with the state budget office, shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices 1 week after the day the governor submits to the legislature the budget for the ensuing fiscal year a report on spending and revenue projections for each of the capped federal funds listed below. The report shall contain actual spending and revenue in the previous fiscal year, spending and revenue projections for the current fiscal year as enacted, and spending and revenue projections within the executive budget proposal for the fiscal year beginning October 1, 2023 for each individual line item for the department budget. The report shall also include federal funds transferred to other departments. The capped federal funds shall include, but not be limited to, all of the following:
- **29** (a) TANF.

- 1 (b) Title XX social services block grant.
- 2 (c) Title IV-B part I child welfare services block grant.

- 3 (d) Title IV-B part II promoting safe and stable families4 funds.
 - (e) Low-income home energy assistance program.
 - (2) It is the intent of the legislature that the department, in collaboration with the state budget office, not utilize capped federal funding for economics adjustments for FTEs or other economics costs that are included as part of the budget submitted to the legislature by the governor for the ensuing fiscal year, unless there is a reasonable expectation for increased federal funding to be available to the department from that capped revenue source in the ensuing fiscal year.
 - (3) By February 15 of the current fiscal year, the department shall prepare an annual report of its efforts to identify TANF maintenance of effort sources and rationale for any increases or decreases from all of the following, but not limited to:
 - (a) Other departments.
 - (b) Local units of government.
- 20 (c) Private sources.

- Sec. 275. (1) On a quarterly basis, the department, with the approval of the state budget director, is authorized to realign sources between other federal, TANF, and capped federal financing authorizations in order to maximize federal revenues. This realignment of financing shall not produce a gross increase or decrease in the department's total individual line item authorizations, nor will it produce a net increase or decrease in total federal revenues, or a net increase in TANF authorization.
- (2) On a quarterly basis the department shall report to the

- house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices on the realignment of federal fund sources transacted to date in the current fiscal year under the authority of subsection (1), including the dates, line items, and amounts of the transactions.
 - (3) Within 30 days after the date on which year-end book closing is completed, the department shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices a report on the realignment of federal fund sources that took place as part of the year-end closing process for the previous fiscal year.
 - Sec. 280. By March 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget director that provides all of the following for each line item in part 1 containing personnel-related costs, including the specific individual amounts for salaries and wages, payroll taxes, and fringe benefits:
 - (a) FTE authorization.
- (b) Spending authorization for personnel-related costs, byfund source, under the spending plan.
 - (c) Actual year-to-date expenditures for personnel-related costs, by fund source, through the end of the prior month.
- (d) The projected year-end balance or shortfall for personnelrelated costs, by fund source, based on actual monthly spending
 levels through the end of the prior month.

- (e) A specific plan for addressing any projected shortfall for personnel-related costs at either the gross or fund source level.
- Sec. 288. (1) Indirect costs must be limited to no more than 10% of a grant award funded solely from state restricted funds or general funds and designated in this part or part 1 to a specific entity for the purpose of funding services to individuals.
- (2) The department may allow a contract grant award to exceed the limitation on indirect costs if the department and the grantee can demonstrate that an exception should be made to the provision in subsection (1).
- (3) By September 30 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, house and senate fiscal agencies, and state budget office on the rationale for all exceptions made to the provision in subsection (1) and the number of grant agreements terminated due to violations of subsection (1). If, at the time the report is due, there are no reportable items under this section, then no report is required to be provided.
 - Sec. 289. By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices an annual report on the supervisor-to-staff ratio by department divisions and subdivisions.
- Sec. 290. Any public advertisement for public assistance shall also inform the public of the welfare fraud hotline operated by the department.
- Sec. 296. From the funds appropriated in part 1, the department to the extent permissible under section 8 of 1964 PA

- 170, MCL 691.1408, is responsible for the necessary and reasonable 1 attorney fees and costs incurred by private and independent legal 2 counsel chosen by current and former classified and unclassified 3 department employees in the defense of the employees in any state 4 or federal lawsuit or investigation related to the water system in
- 5 6 a city or community in which a declaration of emergency was issued 7 because of drinking water contamination.
- Sec. 297. (1) On a quarterly basis, the department shall report to the senate and house appropriations committees, the 9 10 senate and house appropriations subcommittees on the department 11 budget, and the senate and house fiscal agencies the following 12 information:
- 13 (a) The number of FTE positions in pay status by civil service 14 classification.
 - (b) A comparison by line item of the number of FTE positions authorized from funds appropriated in part 1 to the actual number of FTE positions employed by the department at the end of the reporting period.
 - (2) By March 1 of the current fiscal year, the department shall report to the senate and house appropriations committees, the senate and house appropriations subcommittees on the department budget, and the senate and house fiscal agencies the following information:
- 24 (a) Number of employees that were engaged in remote work in 25 2022.
- 26 (b) Number of employees of the department authorized to work 27 remotely and the actual number of those working remotely in the current reporting period. 28
- 29 (c) Estimated net cost savings achieved by the department by

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1 remote work.

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- (d) Reduced use of office space associated with remote work.
- 3 Sec. 299. (1) No state department or agency shall issue a
- 4 request for proposal (RFP) for a contract in excess of
- 5 \$5,000,000.00, unless the department or agency has first considered
- 6 issuing a request for information (RFI) or a request for
- 7 qualification (RFQ) relative to that contract to better enable the
- 8 department or agency to learn more about the market for the
- 9 products or services that are the subject of the RFP. The
- 10 department or agency shall notify the department of technology,
- 11 management, and budget of the evaluation process used to determine
- 12 if an RFI or RFQ was not necessary prior to issuing the RFP.
- 13 (2) From funds appropriated in part 1, for all RFPs issued
- 14 during the current fiscal year where an existing service received
- 15 proposals by multiple vendors, the department shall notify all
- 16 vendors within 30 days after the RFP decision. The notification to
- 17 vendors shall include details on the RFP process, including the
- 18 respective RFP scores and the respective cost for each vendor. If
- 19 the highest scored RFP or lowest cost RFP does not receive the
- 20 contract for an existing service offered by the department, the
- 21 notification shall issue an explanation for the reasons that the
- 22 highest scored RFP or lowest cost RFP did not receive the contract
- 23 and detail the incremental cost target amount or service level
- 24 required that was required to migrate the service to a new vendor.
- 25 Additionally, the department shall include in the notification
- 26 details as to why a cost or service difference is justifiable if
- 27 the highest scored or lowest cost vendor does not receive the
- 28 contract.

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(3) The department shall submit to the senate and house

- appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by September 30 of the current fiscal year, a report that includes the following:
- (a) A summary of all RFPs issued for a contract in excess of \$5,000,000.00 including whether an RFI or RFQ was considered, and whether an RFI or RFQ was issued before issuing the RFP or whether the issuance of an RFI or RFQ was determined not to be necessary.
- (b) A summary of all RFPs during the current fiscal year if an existing service received proposals by multiple vendors.
- (c) A list of all finalized RFPs if there was a divergence from awarding the contract to the lowest-cost or highest-scoring vendor, and details as to why a divergence is justifiable as provided in the notification to vendors under subsection (2).
- (d) The cost or service threshold required by department policy that must be satisfied in order for an existing contract to be received by a new vendor.

DEPARTMENTAL ADMINISTRATION AND SUPPORT

Sec. 301. From the funds appropriated in part 1 for terminal leave payments, the department shall not spend in excess of its annual gross appropriation unless it identifies and requests a legislative transfer from another budgetary line item supporting administrative costs, as provided by section 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.

CHILD SUPPORT ENFORCEMENT

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

- (2) From the federal money received for child support incentive payments, \$12,000,000.00 shall be retained by the state and expended for child support program expenses.
- (3) From the federal money received for child support incentive payments, \$14,500,000.00 shall be paid to the counties based on each county's performance level for each of the federal performance measures as established in 45 CFR 305.2.
- (4) If the child support incentive payment to the state from the federal government is greater than \$26,500,000.00, then 100% of the excess shall be retained by the state and is appropriated until the total retained by the state reaches \$15,397,400.00.
- (5) If the child support incentive payment to the state from the federal government is greater than the amount needed to satisfy the provisions identified in subsections (1), (2), (3), and (4), the additional funds shall be subject to appropriation by the legislature.
- (6) If the child support incentive payment to the state from the federal government is less than \$26,500,000.00, then the state and county share shall each be reduced by 50% of the shortfall.
- Sec. 409. (1) If statewide retained child support collections exceed \$38,300,000.00, 75% of the amount in excess of \$38,300,000.00 is appropriated to legal support contracts. This excess appropriation may be distributed to eligible counties to supplement and not supplant county title IV-D funding.
- (2) Each county whose retained child support collections in the current fiscal year exceed its fiscal year 2004-2005 retained child support collections, excluding tax offset and financial institution data match collections in both the current fiscal year and fiscal year 2004-2005, shall receive its proportional share of

1 the 75% excess.

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

(2) The department shall notify the chairs of the house and senate appropriations subcommittees on the department budget and the house and senate fiscal agencies within 15 days after the authorization adjustment in subsection (1).

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 andconnecting families with resources to reduce these barriers.

- (d) Increasing parent involvement with the parent's child's school and community.
- (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 senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office.
- Sec. 451. (1) From the funds appropriated in part 1 for crime victim justice assistance grants, the department shall allocate \$102,600.00 of state general fund/general purpose revenue for a sexual assault nurse examiners program at a hospital in a city with a population between 21,600 and 21,700 according to the most recent federal decennial census within a county with a population between 64,300 and 64,400 according to the most recent federal decennial census. Funds must be used to support staff compensation and training, victim needs, and community awareness, education, and prevention programs.
- (2) The crime victim services commission may review the uses of funds appropriated in this section to determine if it merits utilization of the crime victim's rights fund on an ongoing basis in subsequent fiscal years.
- Sec. 452. From the funds appropriated in part 1 for crime victim justice assistance grants, the department shall continue to support forensic nurse examiner programs to facilitate training for improved evidence collection for the prosecution of sexual assault.

The funds shall be used for program coordination and training.

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

(2) By March 1 of the current fiscal year, the department shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office a report on the total amount expended for the program in the prior 2 fiscal years, the total number of shelter nights provided, and the average length of stay in an emergency shelter.

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

Sec. 455. As a condition of receipt of federal TANF revenue, homeless shelters and human services agencies shall collaborate with the department to obtain necessary TANF eligibility information on families as soon as possible after admitting a family to the homeless shelter. From the funds appropriated in part 1 for homeless programs, the department is authorized to make allocations of TANF revenue only to the homeless shelters and human

- 1 services agencies that report necessary data to the department for
- 2 the purpose of meeting TANF eligibility reporting requirements.
- 3 Homeless shelters or human services agencies that do not report
- 4 necessary data to the department for the purpose of meeting TANF
- 5 eligibility reporting requirements will not receive reimbursements
- 6 that exceed the per diem amount they received in fiscal year 2000.
- 7 The use of TANF revenue under this section is not an ongoing
- 8 commitment of funding.
- 9 Sec. 456. From the funds appropriated in part 1 for homeless
- 10 programs, the department shall allocate \$90,000.00 to reimburse
- 11 public service agencies that provide documentation of paying birth
- 12 certificate fees on behalf of category 1 homeless clients at county
- 13 clerk's offices. Public service agencies shall be reimbursed for
- 14 the cost of the birth certificate fees quarterly until this
- 15 allocation is fully spent.
- Sec. 457. (1) From the funds appropriated in part 1 for the
- 17 uniform statewide sexual assault evidence kit tracking system, in
- 18 accordance with the final report of the Michigan sexual assault
- 19 evidence kit tracking and reporting commission, \$225,100.00 is
- 20 allocated from the general fund to contract for the administration
- 21 of a uniform statewide sexual assault evidence kit tracking system.
- 22 The system shall include the following:
- 23 (a) A uniform statewide system to track the submission and
- 24 status of sexual assault evidence kits.
- 25 (b) A uniform statewide system to audit untested kits that
- 26 were collected on or before March 1, 2015 and were released by
- 27 victims to law enforcement.
- 28 (c) Secure electronic access for victims.
- 29 (d) The ability to accommodate concurrent data entry with kit

collection through various mechanisms, including web entry through computer or smartphone, and through scanning devices.

- (2) By March 30 of the current fiscal year, the department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a status report on the administration of the uniform statewide sexual assault evidence kit tracking system, including operational status and any known issues regarding implementation.
- (3) The sexual assault evidence tracking fund established in section 1451 of 2017 PA 158 shall continue to be maintained in the department of treasury. Money in the sexual assault evidence tracking fund at the close of a fiscal year remains in the sexual assault evidence tracking fund, does not revert to the general fund, and shall be appropriated as provided by law for the development and implementation of a uniform statewide sexual assault evidence kit tracking system as described in subsection (1).
- (4) By September 30 of the current fiscal year, the department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report on the findings of the annual audit of the proper submission of sexual assault evidence kits as required by and in compliance with the sexual assault kit evidence submission act, 2014 PA 227, MCL 752.931 to 752.935. The report must include, but is not limited to, a detailed county-by-county compilation of the number of sexual assault evidence kits that were properly submitted and the number that met or did not meet deadlines established in the sexual

assault kit evidence submission act, 2014 PA 227, MCL 752.931 to
752.935, the number of sexual assault evidence kits retrieved by
law enforcement after analysis, and the physical location of all
released sexual assault evidence kits collected by health care
providers in that year, as of the date of the annual draft report
for each reporting agency.

Sec. 458. From the funds appropriated in part 1 for crime victim rights services grants, the department shall allocate \$2,000,000.00 from the crime victim's rights fund to maintain increased grant funding to support the further use of crime victim advocates in the criminal justice system. The purpose of the additional funding is to increase available grant funding for crime victim advocates to ensure that the advocates have the resources, training, and funding needed to respond to the physical and emotional needs of crime victims and to provide victims with the necessary services, information, and assistance in order to help them understand and participate in the criminal justice system and experience a measure of safety and security throughout the legal process.

Sec. 459. From the funds appropriated in part 1 for child advocacy centers, the department shall allocate \$2,000,000.00 of state general fund/general purpose revenue to child advocacy centers to support the general operations of child advocacy centers. The purpose of this additional funding is to increase the amount of services provided to children and their families who are victims of abuse over the amount provided in the previous fiscal year. The additional funding directed in this section shall only be used for the purposes described under section 4 of the children's advocacy center act, 2008 PA 544, MCL 722.1044.

- Sec. 461. (1) From the funds appropriated in part 1 for runaway and homeless youth grants, the department shall allocate \$900,000.00 of state general fund/general purpose revenue to support the runaway and homeless youth services program. The purpose of the funding is to support current programs for contracted providers that provide emergency shelter and services to homeless and runaway youth.
- (2) From the funds appropriated in part 1 for runaway and homeless youth grants, the department shall allocate \$100.00 to support runaway and homeless youth services programs. The purpose of the additional funding is to support current programs for contracted providers that provide emergency shelter and services to homeless and runaway youth.
- (3) By March 1 of the current fiscal year, the department shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office a report on the total amount expended for runaway and homeless youth services programs in the previous year, and the total number of shelter nights for youth provided.
- Sec. 462. (1) If funding becomes available from the funds appropriated in part 1 for crime victim justice assistance grants, the department shall allocate \$4,000,000.00 to implement 4 trauma recovery center program pilot projects. The pilot projects shall utilize the evidence-informed integrated trauma recovery services model developed by the University of California San Francisco for service provision and shall be located in a city with a population between 52,300 and 53,000 according to the most recent federal decennial census, in a city with a population between 21,600 and

- 1 21,700 according to the most recent federal decennial census, in a
- 2 city with a population between 81,200 and 81,300 according to the
- 3 most recent federal decennial census, and in a city with a
- 4 population greater than 500,000 according to the most recent
- 5 federal decennial census.
- 6 (2) It is the intent of the legislature that each pilot7 project shall be designed to last at least 3 years.
- 8 (3) If funding becomes available, by March 1 of the current
 9 fiscal year, the department shall report to the senate and house
 10 subcommittees on the department budget, the senate and house fiscal
 11 agencies, the senate and house policy offices, and the state budget
- 12 office on all of the following:

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- (a) The number of participants by pilot project site.
- 14 (b) The number of participants by crime type, broken down by
 15 pilot project site.
- 16 (c) The number of direct service providers by pilot project17 site.
- (d) The number of direct services provided, broken down bytype of service and by pilot project site.
 - (e) The administrative costs by pilot project site.
- 21 (f) The average length of service provision by pilot project 22 site.
- (g) The average length of service provision, broken down bytype of service and by pilot project site.
 - (h) The average cost per participant by pilot project site.
- (4) The department may explore the development of a mobiletrauma recovery center to provide services to rural areas in thisstate.
- Sec. 463. From the funds appropriated in part 1 for runaway

and homeless youth grants and domestic violence prevention and treatment, the department is authorized to make allocations of TANF revenue only to agencies that report necessary data to the department for the purpose of meeting TANF eligibility reporting requirements.

Sec. 464. From the funds appropriated in part 1 for diaper assistance payments, \$1,500,000.00 must be allocated as grants to diaper assistance programs established as of January 1, 2020. The funds must be used only to purchase diapering supplies for children under 36 months of age. Funds must be evenly distributed to all regions of this state as defined by the Michigan economic recovery council. From the funds appropriated in this section, the department shall allocate \$1,000,000.00 to pregnancy resource centers to fund the purchase of diapering supplies for children under 36 months of age.

Sec. 465. (1) From the funds appropriated in part 1 for community services and outreach administration, \$950,000.00 must be distributed as provided in subsection (2). The amount distributed under this subsection must not exceed 50% of the total operating expenses of the program described in subsection (2), with the remaining 50% paid by local United Way organizations and other nonprofit organizations and foundations.

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

2005.

- (3) Michigan 2-1-1 shall refer to the department any calls received reporting fraud, waste, or abuse of state-administered public assistance.
- (4) Michigan 2-1-1 shall report annually to the department, the house and senate standing committees with primary jurisdiction over matters relating to human services and telecommunications, the senate and house appropriations subcommittees on the department budget, and the senate and house fiscal agencies on 2-1-1 system performance, including, but not limited to, call volume by health and human service needs and unmet needs identified through caller data and number and percentage of callers referred to public or private provider types.

CHILDREN'S SERVICES AGENCY - CHILD WELFARE

- Sec. 501. (1) A goal is established that not more than 25% of all children in foster care at any given time during the current fiscal year, if in the best interest of the child, will have been in foster care for 24 months or more.
 - (2) By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report describing the steps that will be taken to achieve the specific goal established in this section and on the percentage of children who currently are in foster care and who have been in foster care a total of 24 or more months.
- Sec. 502. From the funds appropriated in part 1 for foster care, the department shall provide 50% reimbursement to Indian

- tribal governments for foster care expenditures for children who
 are under the jurisdiction of Indian tribal courts and who are not
 otherwise eligible for federal foster care cost sharing. The
 department may provide up to 100% reimbursement to Indian tribal
 governments that enter into a state-tribal title IV-E agreement
 allowed under this state's title IV-E state plan.
 - Sec. 503. (1) In accordance with the final report of the Michigan child welfare performance-based funding task force issued in response to section 503 of article X of 2013 PA 59, the department shall continue to review, update, or develop actuarially sound case rates for necessary child welfare foster care case management services that achieve permanency by the department and private child placing agencies in a prospective payment system under a performance-based funding model.
 - (2) In accordance with the final report of the Michigan child welfare performance-based funding task force issued in response to section 503 of article X of 2013 PA 59, the department shall continue an independent, third-party evaluation of the performance-based funding model.
 - (3) The department shall only implement the performance-based funding model into additional counties where the department, private child welfare agencies, the county, and the court operating within that county have signed a memorandum of understanding that incorporates the intentions of the concerned parties in order to implement the performance-based funding model.
 - (4) The department, in conjunction with members from both the house of representatives and senate, private child placing agencies, the courts, and counties shall continue to implement the recommendations that are described in the workgroup report that was

- provided in section 503 of article X of 2013 PA 59 to establish a performance-based funding model pilot program for public and private child welfare services providers. The department shall provide quarterly reports on the status of the performance-based contracting model to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, and the senate and house fiscal agencies and policy offices.
 - (5) From the funds appropriated in part 1 for the performance-based funding model pilot, the department shall continue to work with the West Michigan Partnership for Children Consortium on the implementation of the performance-based funding model pilot. The consortium shall accept and comprehensively assess referred youth, assign cases to members of its continuum or leverage services from other entities, and make appropriate case management decisions during the duration of a case. The consortium shall operate an integrated continuum of care structure, with services provided by both private and public agencies, based on individual case needs. The consortium shall demonstrate significant organizational capacity and competencies, including experience with managing risk-based contracts, financial strength, experienced staff and leadership, and appropriate governance structure.
 - Sec. 504. (1) From the funds appropriated in part 1, the department shall continue the master agreement with the West Michigan Partnership for Children Consortium for a performance-based child welfare contracting program. The consortium shall consist of a network of affiliated child welfare service providers that will accept and comprehensively assess referred youth, assign cases to members of its continuum or leverage services from other

entities, and make appropriate case management decisions during the duration of a case.

- (2) As a condition for receiving the funding in part 1, the West Michigan Partnership of Children Consortium shall maintain a contract agreement with the department that supports a global capitated payment model. The capitated payment amount shall be based on historical averages of the number of children served in Kent County and for the costs per foster care case. The West Michigan Partnership for Children Consortium is required to manage 10 the cost of the child population it serves. The capitated payment 11 amount shall be reviewed and adjusted no less than twice during the current fiscal year or due to any policy changes implemented by the 12 department that result in a volume of placements that differ in a 13 14 statistically significant manner from the amount allocated in the 15 annual contract between the department and the West Michigan 16 Partnership for Children Consortium as determined by an independent 17 actuary as well as to account for changes in case volumes and any statewide rate increases that are implemented. The contract 18 19 agreement requires that the West Michigan Partnership for Children 20 Consortium shall maintain the following stipulations and 21 conditions:
 - (a) That the service component of the capitated payment will be calculated assuming rates paid to providers under the program are generally consistent with the department's payment policies for providers throughout the rest of this state.
 - (b) To maintain a risk reserve of at least \$1,500,000.00 to ensure it can meet unanticipated expenses within a given fiscal year.
 - (c) That until the risk reserve is established, the West

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- Michigan Partnership for Children Consortium shall submit to the department a plan for how they will manage expenses to fit within their capitated payment revenue. The department shall review and approve any new investments in provider payments above statewide rates and norms to ensure they are supported by offsetting savings so that costs remain within available revenue.
 - (d) To cooperate with the department on an independent fiscal analysis of costs incurred and revenues received during the course of the program to date.
 - (3) By March 1 of the current fiscal year, the consortium shall provide to the department and the house and senate appropriations subcommittees on the department budget a report on the consortium, including, but not limited to, actual expenditures, number of children placed by agencies in the consortium, fund balance of the consortium, and the outcomes measured.
 - Sec. 505. By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office a report on youth referred or committed to the department for care or supervision in the previous fiscal year and in the first quarter of the current fiscal year outlining the number of youth served by the department within the juvenile justice system, the type of setting for each youth, performance outcomes, and financial costs or savings.
 - Sec. 506. From the funds appropriated in part 1 for attorney general contract, by March 1 of the current fiscal year, the department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal

- agencies, the senate and house policy offices, and the state budget office, a report on the juvenile justice system in any county in which funds appropriated in part 1 are expended. The report shall include, but not be limited to, the following:
 - (a) The number of youth referred or committed to the department for care or supervision in the previous fiscal year and in the first quarter of the current fiscal year.
 - (b) The number of youth referred or committed to the care or supervision of the county in which funds appropriated in part 1 were expended for the previous fiscal year and the first quarter of the current fiscal year.
- (c) The type of setting for each youth referred or committed for care or supervision, any applicable performance outcomes, and identified financial costs or savings.
 - Sec. 507. The department's ability to satisfy appropriation deducts in part 1 for foster care private collections is not limited to collections and accruals pertaining to services provided only in the current fiscal year but may include revenues collected during the current fiscal year for services provided in prior fiscal years.
 - Sec. 508. (1) In addition to the amount appropriated in part 1 for children's trust fund grants, money granted or money received as gifts or donations to the children's trust fund created by 1982 PA 249, MCL 21.171 to 21.172, is appropriated for expenditure.
 - (2) For the funds described in subsection (1), the department shall ensure that administrative delays are avoided and the local grant recipients and direct service providers receive money in an expeditious manner. The department and board shall make available the children's trust fund contract funds to grantees within 31 days

1 of the start date of the funded project.

Sec. 509. From the funds appropriated in part 1 for adoption support services, the department shall maintain the increase of contracted rates paid to private child placing agencies for adoption placement rates.

Sec. 510. The department may ask a state or private child placing agency contracted by the receiving state to carry out required visits and any additional visits that the department finds necessary for a child placed in family foster care home out of state.

Sec. 511. The department shall provide reports on a semiannual basis to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, and the senate and house fiscal agencies and policy offices on the number and percentage of children who received timely physical and mental health examinations after entry into foster care. The goal of the program is that at least 85% of children shall have an initial medical and mental health examination within 30 days after entry into foster care.

Sec. 512. As required by the settlement, by March 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the following information for cases of child abuse or child neglect from the previous fiscal year:

- (a) The total number of relative care placements.
- 29 (b) The total number of relatives with a placement who became

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- (c) A list of the reasons from a sample of cases where relatives were denied foster home licensure as documented by the department.
- Sec. 513. (1) The department shall not expend funds appropriated in part 1 to pay for the direct placement by the department of a child in an out-of-state facility unless all of the following conditions are met:
 - (a) There is no appropriate placement available in this state as determined by the department's interstate compact office.
 - (b) An out-of-state placement exists that is nearer to the child's home than the closest appropriate in-state placement as determined by the department's interstate compact office.
- 14 (c) The out-of-state facility meets all of the licensing
 15 standards of this state for a comparable facility.
 - (d) The out-of-state facility meets all of the applicable licensing standards of the state in which it is located.
 - (e) The department has done an on-site visit to the out-of-state facility, reviewed the facility records, reviewed licensing records and reports on the facility, and believes that the facility is an appropriate placement for the child.
 - (2) The department shall not expend money for a child placed in an out-of-state facility without approval of the executive director of the children's services agency.
- 25 (3) The department shall submit an annual report by March 1 of 26 the current fiscal year to the state court administrative office, 27 the house and senate appropriations subcommittees on the department 28 budget, the house and senate fiscal agencies, the house and senate 29 policy offices, and the state budget office on the number of

Michigan children residing in out-of-state facilities in the previous fiscal year and shall include the total cost and average per diem cost of these out-of-state placements to this state, and a list of each such placement arranged by the Michigan county of residence for each child.

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

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

Sec. 517. From the funds appropriated in part 1, no title IV-E funds are appropriated under any title IV-E appeals policy that differs from the appeals policy in place as of the fiscal year ending September 30, 2017.

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

Sec. 520. (1) The department shall submit a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate

- policy offices, and the state budget office by February 15 of the 1 current fiscal year on the number of days of care and expenditures 2 by funding source for the previous fiscal year for out-of-home 3 placements by specific placement programs for child abuse or child 4 5 neglect and juvenile justice, including, but not limited to, paid 6 relative placement, department direct family foster care, private 7 agency supervised foster care, private child caring institutions, 8 county-supervised facilities, court-supervised facilities, and independent living. The report shall also include the number of 9 10 days of care for department-operated residential juvenile justice 11 facilities by security classification.
- (2) For the purposes of the report in subsection (1), living arrangements include, but are not limited to, paid relative placement, department direct family foster care, private agency supervised foster care, private child caring institutions, county-supervised facilities, court-supervised facilities, and independent living.
- Sec. 521. (1) From the funds appropriated in part 1 for child care fund - indirect cost allotment, the department shall allocate \$3,500,000.00 to counties and tribal governments that receive reimbursements in part 1 from child care fund.
- 22 (2) The amount described in subsection (1) shall be
 23 distributed to each county or tribal government in the same
 24 proportion as indirect cost allotments are provided to counties in
 25 the manner described in section 117a of the social welfare act,
 1939 PA 280, MCL 400.117a.
- Sec. 522. (1) From the funds appropriated in part 1 for youth in transition, the department shall allocate \$750,000.00 for scholarships through the fostering futures scholarship program in

- the Michigan education trust to youths who were in foster care
 because of child abuse or child neglect and are attending a college
 or a career technical educational institution located in this
 state. Of the funds appropriated, 100% shall be used to fund
 scholarships for the youths described in this section.
 - (2) By June 1 of the current fiscal year, the department shall provide a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office that includes the number of youths who applied for scholarships under this section, the number of youths who received scholarships under this section and the amount of each scholarship, and the total amount of funds spent or encumbered in the current fiscal year.
 - Sec. 523. By February 15 of the current fiscal year, the department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report on the families first, family reunification, and families together building solutions family preservation programs. The report shall provide population and outcome data based on contractually required follow-up evaluations for families who received family preservation services and shall include information for each program on any innovations that may increase child safety and risk reduction.
 - Sec. 524. As a condition of receiving funds appropriated in part 1 for strong families/safe children, counties must submit the service spending plan to the department by October 1 of the current fiscal year for approval. The department shall approve the service

spending plan within 30 calendar days after receipt of a properly completed service spending plan.

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

Sec. 526. From the funds appropriated in part 1 for courtappointed special advocates, the department shall allocate \$1,000,000.00 to fund a project with a nonprofit, community-based organization organized under the laws of this state that are exempt from federal income tax under section 501(c)(3) of the internal revenue code of 1986, 26 USC 501, located in a charter township with a population of between 18,900 and 19,000 according to the most recent federal decennial census that is located in a county with a population of between 655,000 and 660,000 according to the most recent federal decennial census. The nonprofit organization recipient shall have an existing network of affiliate programs operating in at least 25 counties in this state. The nonprofit organization shall use the funds to recruit, screen, train, and supervise volunteers who provide advocacy services on behalf of abused and neglected children.

Sec. 528. From the funds appropriated in part 1 for adoption support services, the department shall allocate \$10,000,000.00 to fund marketing programs that promote the adoption of infants and to develop factual educational information materials on adoption as an alternative to abortion including the ability of the birth mother to establish a pre-birth plan. The department shall issue a request

- for proposal for a contract for the development of marketing programs and information materials. The department shall notify the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices on vendors submitting bids for the contract, vendors receiving the contract, the evaluation process, and criteria used by the department to award the contract for marketing programs.
 - Sec. 529. From the funds appropriated in part 1 for family preservation programs, the department shall maintain the total combined funding levels of the families first, family reunification, and families together building solutions family preservation programs as of September 30, 2021. For the current fiscal year as the department moves towards implementation of the federal Family First Prevention Services Act, Public Law 115-123, the funding available to serve families through the existing family preservation programs shall not be reduced.
 - Sec. 530. (1) All master contracts relating to foster care and adoption services as funded by the appropriations in section 105 of part 1 shall be performance-based contracts that employ a client-centered results-oriented process that is based on measurable performance indicators and desired outcomes and includes the annual assessment of the quality of services provided.
 - (2) By February 1 of the current fiscal year, the department shall provide the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office a report detailing measurable performance indicators, desired outcomes, and an assessment of the quality of services provided by the department

during the previous fiscal year.

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

Sec. 532. From the funds appropriated in part 1 for adoption support services, the department shall allocate \$2,000,000.00 to fund a tax credit to adoptive parents. The department shall coordinate with the department of treasury to ensure timely processing and issuance of tax credits to adoptive parents.

Sec. 533. The department shall make payments to child placing facilities for in-home and out-of-home care services and adoption services within 30 days after receiving all necessary documentation from those agencies. It is the intent of the legislature that the burden of ensuring that these payments are made in a timely manner and no payments are in arrears is upon the department.

Sec. 534. The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by March 1 of the current fiscal year a report on the adoption subsidies expenditures from the previous fiscal year. The report shall include, but is not limited to, the range of non-\$0.00 annual adoption support subsidy amounts, for both title IV-E eligible cases and state-funded cases, paid to

adoptive families, the number of title IV-E and state-funded cases, the number of cases in which the adoption support subsidy request of adoptive parents for assistance was denied by the department, and the number of adoptive parents who requested a redetermination of adoption support subsidy.

Sec. 535. (1) From the funds appropriated in part 1 for foster care payments, the department shall allocate up to \$1,500,000.00 of private revenues from The New Foster Care Inc. to fund a 3-year culturally competent kinship placement, support, and licensing services pilot program in a county with a population between 1,270,000 and 1,280,000 according to the most recent federal decennial census and a county with a population over 1,500,000 according to the most recent federal decennial census based on the work conducted by A Second Chance Inc. The goal of the pilot program is to increase the kinship licensure rate and reduce the average length of stay for children in foster care with the intent to expand the program statewide, contingent on legislative appropriations. Efforts to reach this goal shall include the following:

- 20 (a) Locate appropriate kinship family for out-of-home21 placement of children.
 - (b) Provide support to kinship care providers and facilitate connections to programs and services to assist them in meeting the needs of children.
 - (c) Assist kinship care providers in meeting state foster parent licensing requirements.
 - (d) Support parents to expedite permanency planning.
- 28 (2) Subject to part 1 appropriations and pursuant to an annual evaluation, the department through legislative appropriations shall

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- reallocate any savings and revenue stemming from program services that result in a reduction in the length of stay in foster care for the children served by the program compared to the average and maximize federal funds associated with this pilot program.
 - (3) The agency selected to administer the pilot program will be selected with input from The New Foster Care, Inc. and approved by the executive director of the children's services agency.

Sec. 536. By March 1 of the current fiscal year, the department shall submit to the senate and house appropriations 10 subcommittees on the department budget, the senate and house fiscal 11 agencies, and the policy offices a report on the status of the 12 department's planned and achieved implementation of the federal family first prevention services act, Public Law 115-123. The 13 14 report shall include, but not be limited to, an estimate of the 5-15 year spending plan for administrative and compliance costs, a 16 summary of all historical expenditures made to date for 17 implementation by line-item appropriation and program type, 18 information regarding compliance with title IV-E prevention 19 requirements, the status of statewide compliance with the qualified 20 residential treatment program requirements, a summary of provider 21 concerns with respect to requirements under the qualified 22 residential treatment program as that term is defined in section 1 of 1973 PA 116, MCL 722.111, a detailed methodology in determining 23 24 any savings realized or estimated from a reduction in congregate 25 care or residential placements, the department's conformity with federal model licensing standards, the department's plan for 26 27 tracking and preventing child maltreatment deaths, and the department's plan for extending John H. Chafee foster care 28 29 independence programs up to age 23.

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Sec. 537. By March 1 of the current fiscal year, the department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices a report on the number of unlicensed relative providers with a relative placement denied a foster home license for not meeting the standards established for state licensing for foster care. The report shall also include the status of title IV-E claims for foster care maintenance payments and foster care administrative payments for licensed relative caregivers with placements.

Sec. 538. By October 1 of the current fiscal year, the department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the policy offices a report on the status of the department's program improvement plan associated with round 3 of the child and family services review (CFSR). The report shall also include, but not be limited to, a specific and detailed plan to provide an update on areas of substantial nonconformity identified in the CFSR such as the inadequacy of caseworker training provided by the department, the estimated costs necessary to reduce travel time for service delivery to rural areas, plans to improve caseworker engagement to reduce maltreatment in care, and steps undertaken by the department to emphasize permanency in case planning. Additionally, the department shall include the status for items currently being implemented and the description and cost estimate for the implementation for items that will be implemented in the current fiscal year.

Sec. 539. The department, in collaboration with child placing agencies, shall continue to comply with section 1150 of the social

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welfare act, 1939 PA 280, MCL 400.1150. Department caseworkers
responsible for preparing a recommendation to a court concerning a
juvenile placement shall provide, as part of the recommendation,
information regarding the requirements of section 1150 of the
social welfare act, 1939 PA 280, MCL 400.1150.

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

Sec. 541. From the funds appropriated in part 1, the department shall implement a program to help foster care caseworkers achieve forgiveness for their student loan debt. By July 1 of the current fiscal year, the department shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices a report on the department's findings.

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

(2) By September 30 of the current fiscal year, the department shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and

the house and senate policy offices a report on the strategies developed by the department.

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

Sec. 544. The department may require all foster care parents, caseworkers, and guardians ad litem to receive trauma-informed training.

Sec. 545. From the funds appropriated in part 1 for the child welfare institute, the department shall provide training that is consistent with the practices taught under therapeutic crisis intervention training to all department employees responsible for the investigation of complaints and licensing determinations for child caring institutions and shall offer trauma support directly to all department child welfare caseworkers to help deal with the effects of secondary trauma.

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

(2) From the funds appropriated in part 1, the department shall pay providers of independent living plus services statewide per diem rates for staff-supported housing and host-home housing based on proposals submitted in response to a solicitation for pricing. The independent living plus program provides staff-

supported housing and services for foster youth ages 16 through 19 who, because of their individual needs and assessments, are not initially appropriate for general independent living foster care.

- (3) If required by the federal government to meet title IV-E requirements, providers of foster care services shall submit quarterly reports on expenditures to the department to identify actual costs of providing foster care services.
- (4) From the funds appropriated in part 1, the department shall maintain rates that are no less than the rates in place on 10 March 20, 2020 provided to each private provider of residential 11 services.
 - Sec. 547. (1) From the funds appropriated in part 1 for the quardianship assistance program, the department shall pay a minimum rate that is not less than the approved age-appropriate payment rates for youth placed in family foster care.
 - (2) The department shall report on an annual basis to the state budget office, the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices quarterly data on the number of children enrolled in the quardianship assistance and foster care - children with serious emotional disturbance waiver programs.
 - Sec. 550. (1) The department shall not offset against reimbursement payments to counties or seek reimbursement from counties for charges that were received by the department more than 12 months before the department seeks to offset against reimbursement. A county shall not request reimbursement for and reimbursement payments shall not be paid for a charge that is more than 12 months after the date of service or original status

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determination when initially submitted by the county.

- (2) All service providers shall submit a request for payment within 12 months after the date of service. Any request for payment submitted 12 months or more after the date of service requires the provider to submit an exception request to the county or the department for approval or denial.
- (3) The county is not subject to any offset, chargeback, or reimbursement liability for prior expenditures resulting from an error in foster care fund source determinations.

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

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

Sec. 553. It is the intent of the legislature that a child protective services caseworker shall not be allowed to place an individual on the child abuse and neglect central registry without prior court approval.

Sec. 554. From the funds appropriated in part 1 for foster care payments, the department shall allocate \$50,000.00 to a nonprofit organization organized under the laws of this state that is exempt from federal income tax under section 501(c)(3) of the

- 1 internal revenue code of 1986, 26 USC 501, that currently has
- 2 locations in 3 cities and operates on a 100% volunteer basis with a
- 3 board of directors consisting of up to 15 members, and are a
- 4 dedicated community of individuals that give their time, talent,
- 5 and resources to provide the best quality shopping environment they
- 6 can to local children in need and provide clothing, shoes, toys,
- 7 linens, nursery furniture, strollers, car seats, school supplies,
- 8 hygiene products, and safety equipment to local foster children and
- 9 their families free of charge.
- Sec. 555. The department shall explore the requirement that
- 11 foster care parents caring for a foster child for whom a petition
- 12 of adoption has been filed with the court shall continue to receive
- 13 the regularly scheduled maintenance payments until the child is no
- 14 longer in their care.
- 15 Sec. 556. From the funds appropriated in part 1 for child
- 16 welfare licensing, the department shall work to develop and
- implement a simpler and more streamlined process for the annual
- 18 renewal of the license for family foster care homes, and shall
- 19 explore the development of a simpler and more efficient version of
- 20 the application form for renewal of the license for family foster
- 21 care homes.
- Sec. 557. If a vehicle that is owned by the state is available
- 23 and not scheduled for use by other state workers, the department
- 24 may consider it an allowable use of the vehicle for a child
- 25 protective services caseworker or a foster care caseworker to drive
- 26 it to foster home visits or to drive it to their own home if it
- 27 would be helpful to the worker in conducting their work.
- Sec. 558. From the funds appropriated in part 1 for child
- 29 welfare institute, the department shall train private child placing

- agency staff in the pre-service training requirements for child welfare caseworkers and supervisors. All private child placing agency staff will be provided an opportunity to complete training at their private child placing agency facilities in a virtual format. A hybrid format that includes virtual and in-person instruction will also be available to all private child placing agency staff according to the preference of a given private child placing agency.
 - Sec. 559. (1) From the funds appropriated in part 1 for adoption support services, the department shall allocate \$250,000.00 to the Adoptive Family Support Network by December 1 of the current fiscal year to operate and expand its adoptive parent mentor program to provide a listening ear, knowledgeable guidance, and community connections to adoptive parents and children who were adopted in this state or another state.
 - (2) The Adoptive Family Support Network shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by March 1 of the current fiscal year a report on the program described in subsection (1), including, but not limited to, the number of cases served and the number of cases in which the program prevented an out-of-home placement.
 - Sec. 562. The department shall provide time and travel reimbursements for foster parents who transport a foster child to parent-child visitations. As part of the foster care parent contract, the department shall provide written confirmation to foster parents that states that the foster parents have the right to request these reimbursements for all parent-child visitations.

1 The department shall provide these reimbursements within 60 days
2 after receiving a request for eligible reimbursements from a foster
3 parent.

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

- (2) Per the court-ordered number of required meetings between caseworkers and a parent, the caseworkers shall achieve a success rate of 85%, after accounting for factors outside of the caseworkers' control.
- (3) By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a report on the following:
- (a) The percentage of success rate for parent-child visitations and court-ordered required meetings between caseworkers referenced in subsections (1) and (2) for the previous year.
- (b) The barriers to achieve the success rates in subsections(1) and (2) and how this information is tracked.
 - Sec. 567. The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by March 1 of the current fiscal year a report on transfer of medical passports for children in foster care, including the following:
- (a) From the total medical passports transferred, thepercentage that transferred within 2 weeks after the date of

1 placement or return to the home.

- (b) From the total school records, the percentage that transferred within 2 weeks after the date of placement or return to the home.
- (c) The implementation steps that have been taken to improve the outcomes for the measures in subdivision (a).
- Sec. 568. (1) The department shall ensure youths transitioning out of foster care are given assistance with obtaining a driver license or state identification card and are issued a copy of their Social Security number as required by department policy. Assistance must be provided to youths who are eligible to obtain a driver license or state identification card and a Social Security card based on the youth's citizenship and legal residency status.
- (2) The department shall provide a report on a semiannual basis to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on the number of youths who received assistance obtaining a driver license or state identification card, the number of youths who received assistance obtaining a Social Security card, the number of youths eligible for assistance who did not receive it, and an explanation as to why those youths did not receive assistance in obtaining the documents.
- Sec. 569. The department shall reimburse private child placing agencies that complete adoptions at the rate according to the date on which the petition for adoption and required support documentation was accepted by the court and not according to the date the court's order placing for adoption was entered.
- Sec. 570. From the funds appropriated in part 1 for adoption

- support services, the department shall pay not less than a \$23.00 contractor per diem adoption rate from case acceptance to the date of adoption petition acceptance or for 150 days, whichever occurs sooner, for licensed foster care agencies and nonprofit licensed adoption agencies to provide adoption services for foster youth referred for adoptive services. This per diem rate is to be separate from the outcome-based reimbursement system and shall not be deducted from the total reimbursement an agency receives for the applicable placement or finalization rate of an adoption.
 - Sec. 573. (1) From the funds appropriated in part 1 for foster care payments and child care fund, the department shall, if funds become available, pay providers of foster care services a per diem daily administrative rate for every case on a caseworker's caseload for the duration of a case from referral acceptance to the discharge of wardship.
 - (2) The department shall complete an actuarial study to review case rates paid to private child placing agencies every even-numbered year.
 - (3) The department shall submit a request to the settlement monitor to define caseload ratios in the settlement to only include active cases or to designate a zero case weight for cases that are routed for case closure but remain open to complete administrative activities.
 - Sec. 574. (1) From the funds appropriated for foster care payments, \$1,375,000.00 is allocated to support family incentive grants to private and community-based foster care service providers to assist with home improvements or payment for physical exams needed by foster families and unlicensed relatives caring for a family member through the child welfare system to accommodate

1 children in foster care.

- (2) By March 1 of the current fiscal year, the department shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office a report on the total amount expended in the previous year for grants to private and community-based foster care service providers for home improvements or physical exams as referenced in subsection (1) and the number of grants issued.
- Sec. 575. From the funds appropriated in part 1 for children's services administration, the department shall allocate \$200,000.00 to provide support and coordinated services to the kinship caregiver advisory council. The responsibilities of the council may include all of the following:
- (a) Establish a public awareness campaign to educate the public about kinship caregivers and the state's efforts to better serve kinship caregivers.
- (b) Consult and coordinate with the kinship caregiver navigator program to collect aggregate data on individuals being served by the kinship caregiver navigator program, including information on what services these individuals need.
- (c) Consult and collaborate with the provider of the kinship caregiver navigator program on the design and administration of that program.
- (d) Establish, maintain, and update a list of local support groups and programs that provide services to kinship families, and devise a plan of action for engaging with the groups and programs on the list in order to obtain a better understanding of the issues facing kinship families.

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

Sec. 578. The department shall explore the development and implementation of a foster care worker apprenticeship program for college students majoring in social work or other human services field who are interested in working in child welfare. The goals of the program would be to expose students directly to foster care work and provide work experience to aid in the recruitment of future child welfare caseworkers, and to provide current caseworkers with apprentice support staff. By August 1 of the current fiscal year, the department shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices a report on the department's recommendation for an apprenticeship program. It is the intent of the legislature that the department develop the program so that it can be implemented in the following year and that students in the apprenticeship program would receive payment for their services, if funding is made available.

Sec. 579. The department shall require caseworkers ensure a motion is filed with the court to request that children who are victims of child abuse or child neglect have court redetermination hearings more frequently than every 90 days when in the best interest of the child. The intent of this language is to decrease the time it will take for permanency to be finalized for the child.

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- Sec. 580. (1) From the funds appropriated in part 1 for child legal representation, the department shall allocate \$500,000.00 to implement 2 pilot projects to improve the quality of legal representation for children and parents in child protective hearings. The pilot projects must emphasize the reduction of caseloads for lawyer-quardians ad litem, more frequent engagement between the child and the families and the lawyer-quardians ad litem, timely permanency and the expedition of legal milestones in cases, and elevated training requirements and increased compensation for lawyer-guardians ad litem.
 - (2) From the funding allocated in subsection (1), the department shall allocate \$350,000.00 for a child legal representation pilot project in the circuit court of a county with a population between 655,000 and 660,000 according to the most recent federal decennial census and allocate \$150,000.00 for a child legal representation pilot project in the circuit court of a county with a population between 103,500 and 104,000 according to the most recent federal decennial census.
 - Sec. 581. From the funds appropriated in part 1 for foster care payments, the department shall allocate \$50,000.00 for caseworkers to provide immediate assistance with urgent needs such as food, clothing, etc., for children upon removal from their home or other dangerous environment, including children who are victims of human trafficking. The department shall develop policies for the use and access to these funds. The department shall track the distribution of the funds and by June 1 of the current fiscal year shall submit to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices a report on the number of funds

1 distributed and the number of children impacted.

Sec. 583. By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, the senate and house fiscal agencies and policy offices, and the state budget office a report that includes all of the following:

- (a) The number and percentage of foster parents that dropped out of the program in the previous fiscal year, the reasons the foster parents left the program, and how those figures compare to prior fiscal years.
- 12 (b) The number and percentage of foster parents successfully
 13 retained in the previous fiscal year and how those figures compare
 14 to prior fiscal years.
- 15 Sec. 585. The department shall make available at least 1 pre-16 service training class each month in which new caseworkers for 17 private foster care and adoption agencies can enroll.
 - Sec. 588. (1) Concurrently with public release, the department shall transmit all reports from the court-appointed settlement monitor, including, but not limited to, the needs assessment and period outcome reporting, to the state budget office, the senate and house appropriations subcommittees on the department budget, and the senate and house fiscal agencies and policy offices, without revision.
 - (2) By October 1 of the current fiscal year, the department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the policy offices a detailed plan that will terminate and dismiss with prejudice the settlement by September 30 of the current fiscal

1 year.

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

- (2) On a quarterly basis, the department shall report on the monthly number of all foster care cases administered by the department and all foster care cases administered by private providers.
- Sec. 592. The department shall submit quarterly reports to the chairs of the house and senate standing oversight committees, the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office that include data from children's protective services staff for each of the following for the most recent 30-day period before the report is submitted:
- 16 (a) The percent of investigations commenced within 24 hours17 after receiving a report.
 - (b) The percent of central registry reviews performed for required individuals.
 - (c) The percent of face-to-face contacts made within the established timeframe required by the department.
 - (d) In appropriate cases, the percent of sibling placement evaluations completed when 1 or more children remain in the home after a child has been removed.
- (e) The percent of supervisory reviews performed in a timelymanner.
- 27 (f) The results of a department survey of child protective
 28 services investigators on the number of investigators who are
 29 concerned for his or her own personal safety.

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

Sec. 593. (1) The department shall conduct an annual review in each county to determine if the county has adopted and implemented standard child abuse and child neglect investigation and interview protocols as required in section 8(6) of the child protection law, 1975 PA 238, MCL 722.628.

(2) By March 1 of the current fiscal year, the department shall submit an annual report to the chairs of the house and senate standing oversight committees, the governor's task force on child abuse and neglect, the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on the findings of each county's review described in subsection (1).

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

Sec. 595. (1) Due to the exigent circumstances found in the department's children's protective services (CPS) program by the office of the auditor general (OAG) audit number 431-1285-16, from

the funds appropriated in part 1, the department shall expend the funding for children's protective services - caseload staff in order to dedicate resources to CPS investigations. The department shall hire staff from the funds appropriated in part 1 for children's protective services - caseload staff for the department to come into compliance and sustain measured corrective action as

determined by the OAG for OAG audit number 431-1285-16.

- (2) From the funds appropriated in part 1 for foster care services caseload staff, the department shall not expend any funds on hiring foster care workers or licensing workers and shall not assume any direct supervisory responsibility of foster care cases unless 1 of the following conditions is met:
- (a) An initial review of the case indicated that the case isnot eligible for title IV-E reimbursement.
 - (b) The department is already providing direct foster care service to 1 or more siblings of the child ordered into a placement, and a department direct service provision can provide placement to the entire sibling group.
 - (c) The court has ordered placement for only some of the children in the family, requiring the department to monitor the children remaining at home.
 - (3) From the funds appropriated in part 1 for foster care payments, all new foster care cases coming into care shall be placed with a private child placing agency supervision unless any of the conditions in subsection (1) are met or until the statewide ratio of foster care cases is 55% for private child placing agency supervision to 45% department case management supervision respectively.
 - (4) This section does not require an individual county to meet

the case ratio described in subsection (3).

(5) This section does not modify or amend caseload ratios required under the settlement.

Sec. 598. Partial child care fund reimbursements to counties for undisputed charges must be made within 45 business days after the receipt of the required forms and documentation. The department shall commence activity to investigate and resolve a disputed reimbursement charge from a county within 15 business days after receiving the request for reimbursement. The activity to investigate and resolve a disputed reimbursement request may include, but is not limited to, the use of a formal appeals process, pursuant to statute and department chargeback policy. The department shall reimburse for corrected charges within 45 business days after a properly corrected submission by the county.

PUBLIC ASSISTANCE

Sec. 601. Whenever a client agrees to the release of his or her name and address to the local housing authority, the department shall request from the local housing authority information regarding whether the housing unit for which vendoring has been requested meets applicable local housing codes. Vendoring shall be terminated for those units that the local authority indicates in writing do not meet local housing codes until the local authority indicates in writing that local housing codes have been met.

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

Sec. 603. For any change in the income of a recipient of the food assistance program, the family independence program, or state

- disability assistance that results in a benefit decrease, the 1 department must notify the affected recipient of the decrease in 2 benefits amount no later than 15 work days before the first day of 3 4 the month in which the change takes effect.
- Sec. 604. (1) From the funds appropriated in part 1 for state disability assistance payments, the department shall operate a state disability assistance program. Except as provided in subsection (3), persons eligible for this program shall include needy citizens of the United States or aliens exempted from the 9 10 supplemental security income citizenship requirement who are at 11 least 18 years of age or emancipated minors who meet 1 or more of 12 the following requirements:
- (a) Is a recipient of supplemental security income, social 13 14 security, or medical assistance due to disability or 65 years of 15 age or older.
 - (b) Is an individual with a physical or mental impairment that meets federal supplemental security income disability standards, except that the minimum duration of the disability shall be 90 days. Substance use disorder alone is not defined as a basis for eligibility.
- 21 (c) Is a resident of an adult foster care facility, a home for the aged, a county infirmary, or a substance use disorder treatment 22 23 center.
 - (d) Is an individual receiving 30-day postresidential substance use disorder treatment.
- 26 (e) Is an individual diagnosed as having acquired 27 immunodeficiency syndrome.
- (f) Is an individual receiving special education services 28 29 through a local intermediate school district.

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- (g) Is a caretaker of a disabled individual who meets the requirements specified in subdivision (a), (b), (e), or (f).
 - (2) Applicants for and recipients of the state disability assistance program shall be considered needy if they do both of the following:
 - (a) Meet the same asset test as is applied for the family independence program.
 - (b) Have a monthly budgetable income that is less than the payment standards.
- 10 (3) Except for an individual described in subsection (1)(c) or 11 (d), an individual is not disabled for purposes of this section if 12 his or her drug addiction or alcoholism is a contributing factor 13 material to the determination of disability. "Material to the 14 determination of disability" means that, if the person stopped 15 using drugs or alcohol, his or her remaining physical or mental 16 limitations would not be disabling. If his or her remaining 17 physical or mental limitations would be disabling, then the drug addiction or alcoholism is not material to the determination of 18 19 disability and the person may receive state disability assistance. 20 Such a person must actively participate in a substance abuse 21 treatment program, and the assistance must be paid to a third party or through vendor payments. For purposes of this section, substance 22 23 abuse treatment includes receipt of inpatient or outpatient 24 services or participation in alcoholics anonymous or a similar 25 program.
 - Sec. 605. The level of reimbursement provided to state disability assistance recipients in licensed adult foster care facilities shall be the same as the prevailing supplemental security income rate under the personal care category.

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Sec. 606. County department offices shall require each recipient of family independence program and state disability assistance who has applied with the social security administration for supplemental security income to sign a contract to repay any assistance rendered through the family independence program or state disability assistance program upon receipt of retroactive supplemental security income benefits.

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

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

Sec. 608. Adult foster care facilities providing domiciliary care or personal care to residents receiving supplemental security income or homes for the aged serving residents receiving supplemental security income shall not require those residents to reimburse the home or facility for care at rates in excess of those legislatively authorized. To the extent permitted by federal law, adult foster care facilities and homes for the aged serving residents receiving supplemental security income are not prohibited from accepting third-party payments in addition to supplemental

- security income if the payments are not for food, clothing,
 shelter, or result in a reduction in the recipient's supplemental
 security income payment.
 - Sec. 609. The state supplementation level under the supplemental security income program for the personal care/adult foster care and home for the aged categories shall not be reduced during the current fiscal year. The legislature shall be notified not less than 30 days before any proposed reduction in the state supplementation level.
- Sec. 610. (1) In developing good cause criteria for the state emergency relief program, the department shall grant exemptions if the emergency resulted from unexpected expenses related to maintaining or securing employment.
- 14 (2) For purposes of determining housing affordability
 15 eligibility for state emergency relief, a group is considered to
 16 have sufficient income to meet ongoing housing expenses if their
 17 total housing obligation does not exceed 75% of their total net
 18 income.
 - (3) State emergency relief payments shall not be made to individuals who have been found guilty of fraud in regard to obtaining public assistance.
- (4) State emergency relief payments shall not be made
 available to persons who are out-of-state residents or illegal
 immigrants.
- (5) State emergency relief payments for rent assistance shall
 be distributed directly to landlords and shall not be added to
 Michigan bridge cards.
- Sec. 611. The state supplementation level under thesupplemental security income program for the living independently

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- or living in the household of another categories shall not exceed the minimum state supplementation level as required under federal law or regulations.
- Sec. 613. (1) The department shall provide reimbursements for the final disposition of indigent persons. The reimbursements shall include all of the following:
- 7 (a) The maximum allowable reimbursement for the final8 disposition is \$840.00.
 - (b) The adult burial with services allowance is \$765.00.
- 10 (c) The adult burial without services allowance is \$530.00.
 - (d) The infant burial allowance is \$210.00.
- 12 (2) Reimbursement for a cremation permit fee of up to \$75.00

 13 and for mileage at the standard rate will be made available for an

 14 eligible cremation. The reimbursements under this section shall

 15 take into consideration religious preferences that prohibit

 16 cremation.
 - (3) The department shall report to the senate and house of representatives appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by January 31 of the current fiscal year on burial services payments issued from the state emergency relief program during the previous fiscal year. The report shall include the number of payments by burial services category for the following:
 - (a) Fetus or infant under age 1 month.
- 26 (b) Burial with memorial service.
- (c) Burial without memorial service.
- 28 (d) Cremation with memorial service.
- 29 (e) Cremation without memorial service.

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- (f) Transportation of a donated or unclaimed body being
 cremated.
 - (g) Cremation permit fee for an unclaimed body.
- 4 (h) Disposition of an unclaimed body.

- (i) Payment where an irrevocable funeral agreement exists.
- 6 (j) Unclaimed bodies received by universities.

Sec. 614. The department shall report to the senate and house of representatives appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices by January 15 of the current fiscal year on the number and percentage of state disability assistance recipients who were determined to be eligible for federal supplemental security income benefits in the previous fiscal year.

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

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

Sec. 618. By July 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office the

quarterly number of supervised individuals who have absconded from supervision and whom a law enforcement agency, the department of corrections, or the department is actively seeking according to section 84 of the corrections code of 1953, 1953 PA 232, MCL 791.284.

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

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

(2) The department shall provide quarterly reports to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the percentage of determinations of Medicaid eligibility that were completed within the required time frame for both applications that include disability as a determination factor and applications that do not include disability as a determination factor, as described under subsection (1), and for medical review team reviews achieved statewide and at each local office.

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

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

Sec. 654. The department shall notify recipients of food assistance program benefits that their benefits can be spent with their bridge cards at many farmers' markets in the state. The department shall also notify recipients about the Double Up Food Bucks program that is administered by the Fair Food Network. Recipients shall receive information about the Double Up Food Bucks program, including information that when the recipient spends \$20.00 at participating farmers' markets through the program, the recipient can receive an additional \$20.00 to buy Michigan produce.

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

1 offices, and the state budget office.

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28 29 Sec. 669. From the funds appropriated in part 1 for family independence program, the department shall allocate \$7,230,000.00 for the annual clothing allowance. The allowance shall be granted to all eligible children in a family independence program group.

Sec. 672. (1) The department's office of inspector general shall report to the senate and house of representatives appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices by February 15 of the current fiscal year on department efforts to reduce inappropriate use of Michigan bridge cards and food assistance program trafficking. The department shall provide information on the number of recipients of services who used their Michigan bridge card inappropriately and the current status of each case, the number of recipients whose benefits were revoked, whether permanently or temporarily, as a result of inappropriate use, and the number of retailers that were fined or removed from the electronic benefit transfer program for permitting inappropriate use of the cards. The report shall also include the number of Michigan bridge card trafficking instances and overall welfare fraud referrals that includes such information as the number of investigations completed, fraud and intentional program violation dollar amounts identified, the number of referrals to prosecutors, the number of administrative hearing referrals and waivers, and the number of program disqualifications imposed. The report shall distinguish between savings and cost avoidance. Savings include receivables established from instances of fraud committed. Cost avoidance includes expenditures avoided due to front-end eligibility investigations and other preemptive actions undertaken

1 in the prevention of fraud.

- (2) If a fourth Michigan bridge card has been issued in a 12-month period, the department shall notify the household that they have reached the number of issued cards threshold. At their fifth and each subsequent card replacement request, a card will not be issued until the recipient has spoken directly to the local office district manager or county director. The district manager or county director may issue a new Michigan bridge card under their authority based on their assessment of the recipient's situation and explanation.
 - (3) As used in this section:
- (a) "Food assistance trafficking" means the buying and selling of food assistance benefits for cash or items not authorized under the 2008 food and nutrition act, 7 USC 2036b.
 - (b) "Inappropriate use" means not used to meet a family's ongoing basic needs, including food, clothing, shelter, utilities, household goods, personal care items, and general incidentals.
 - Sec. 677. (1) The department shall establish a state goal for the percentage of family independence program cases involved in employment activities. The percentage established shall not be less than 50%. The goal for long-term employment shall be 15% of cases for 6 months or more.
- 23 (2) The department shall provide an annual report, providing
 24 quarterly data, to the senate and house appropriations
 25 subcommittees on the department budget, the senate and house fiscal
 26 agencies and policy offices, and the state budget director on the
 27 number of cases referred to Partnership. Accountability. Training.
 28 Hope. (PATH), the current percentage of family independence program
 29 cases involved in PATH employment activities, an estimate of the

- current percentage of family independence program cases that meet federal work participation requirements on the whole, and an estimate of the current percentage of the family independence program cases that meet federal work participation requirements for those cases referred to PATH.
 - (3) The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office an annual report, providing quarterly data, that include all of the following:
 - (a) The number and percentage of nonexempt family independence program recipients who are employed.
 - (b) The average and range of wages of employed family independence program recipients.
 - (c) The number and percentage of employed family independence program recipients who remain employed for 6 months or more.
 - Sec. 686. (1) The department shall confirm that individuals presenting personal identification issued by another state seeking assistance through the family independence program, food assistance program, state disability assistance program, or medical assistance program are not receiving benefits from any other state.
 - (2) The department shall confirm the address provided by any individual seeking family independence program benefits or state disability assistance benefits.
 - (3) The department shall prohibit individuals with property assets assessed at a value higher than \$200,000.00 from accessing assistance through department-administered programs, unless such a prohibition would violate federal rules and guidelines.
 - (4) The department shall obtain an up-to-date telephone number

- during the eligibility determination or redetermination process for individuals seeking medical assistance benefits.
- Sec. 687. (1) The department shall, in quarterly reports,

 compile and make available on its website all of the following

 information about the family independence program, state disability

 assistance, the food assistance program, Medicaid, and state

 emergency relief:
- 8 (a) The number of applications received.
- 9 (b) The number of applications approved.
- 10 (c) The number of applications denied.
- (d) The number of applications pending and neither approvednor denied.
- (e) The number of cases opened.
- 14 (f) The number of cases closed.
- 15 (g) The number of cases at the beginning of the quarter and the number of cases at the end of the quarter.
- 17 (2) The information provided under subsection (1) shall be
 18 compiled and made available for the state as a whole and for each
 19 county and reported separately for each program listed in
 20 subsection (1).
 - (3) The department shall, in quarterly reports, compile and make available on its website the following family independence program information:
 - (a) The number of new applicants who successfully met the requirements of the 10-day assessment period for PATH.
- (b) The number of new applicants who did not meet therequirements of the 10-day assessment period for PATH.
- (c) The number of cases sanctioned because of the schooltruancy policy.

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- 1 (d) The number of cases closed because of the 48-month and 60-2 month lifetime limits.
 - (e) The number of first-, second-, and third-time sanctions.
 - (f) The number of children ages 0-5 living in family independence program-sanctioned households.

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

Sec. 690. (1) From the funds appropriated in part 1 for legal assistance, \$50,000.00 must be distributed to a county legal assistance center located in a city with a population between 5,200 and 5,300 according to the most recent federal decennial census, located within a county with a population between 120,500 and 120,600 according to the most recent federal decennial census. The grantee must provide civil law legal assistance to low-income individuals.

(2) The funds appropriated in part 1 for legal assistance must be disbursed no later than March 1 of the current fiscal year.

CHILDREN'S SERVICES AGENCY - JUVENILE JUSTICE

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

Sec. 706. Counties shall be subject to 50% chargeback for the

use of alternative regional detention services, if those detention 1 services do not fall under the basic provision of section 117e of the social welfare act, 1939 PA 280, MCL 400.117e, or if a county operates those detention services programs primarily with professional rather than volunteer staff.

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

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

(2) Counties must submit amendments to current fiscal year

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- county service plans to the department no later than August 30. Counties must submit current fiscal year payable estimates to the department no later than September 15.
- (3) The department shall submit a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy 7 offices, and the state budget office by February 15 of the current 8 fiscal year on the number of counties that fail to submit a service spending plan by August 15 of the previous fiscal year and the 9 10 number of service spending plans not approved by October 15. The 11 report shall include the number of county service spending plans that were not approved as first submitted by the counties, as well 12 as the number of plans that were not approved by the department 13 14 after being resubmitted by the county with the first revisions that 15 were requested by the department.
 - Sec. 709. The department's master contract for juvenile justice residential foster care services shall prohibit contractors from denying a referral for placement of a youth, or terminating a youth's placement, if the youth's assessed treatment needs are in alignment with the facility's residential program type, as identified by the court or the department. In addition, the master contract shall require that youth placed in juvenile justice residential foster care facilities must have regularly scheduled treatment sessions with a licensed psychologist or psychiatrist, or both, and access to the licensed psychologist or psychiatrist as needed.
- 27 Sec. 715. (1) As a condition of receiving funds appropriated in part 1 for raise the age fund, by deadlines established and 28 29 advised by the department, counties or tribal entities shall have

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- an approved raise the age fund budget plan for the current fiscal 1 year. Counties must submit the raise the age fund budget plan for 2 the following fiscal year to the department by February 1 of the 3 current fiscal year. The raise the age fund budget plan shall 4 5 specifically identify the types of costs to be reimbursed, 6 estimated costs for each item, and the total estimated cost to be 7 reimbursed. The types of costs to be reimbursed must comply with 8 the requirements of section 117i of the social welfare act, 1939 PA 280, MCL 400.117i. \$500,000.00 of the raise the age fund shall be 9 reserved for tribal entities. If total raise the age fund requests 10 11 from tribal entities are less than \$500,000.00, the funding may be allocated to meet requests from counties. From the funds 12 appropriated in part 1 for raise the age fund, each county and 13 14 tribal entity eligible for reimbursement shall receive a minimum 15 \$10,000.00 allocation from the raise the age fund.
 - (2) County and tribal entity reimbursement from the raise the age fund is limited to eligible youth and items specifically identified in approved raise the age fund budget plans and shall not exceed the total estimated cost included in the approved raise the age fund budget plan.
 - (3) Counties and tribal entities must submit amendments to current fiscal year raise the age fund budget plans by deadlines established and advised by the department. Counties must submit current fiscal year payable estimates for raise the age funds to the department by deadlines established and advised by the department.
- (4) As used in this section, "eligible youth" includes both ofthe following:
 - (a) Pre-adjudication eligible youth: A youth for whom a

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petition has been filed alleging commission of a status or criminal offense on or after his or her reaching the age of 17, but before reaching the age of 18.

(b) Post-adjudication eligible youth: A youth who has been adjudicated for a status or criminal offense for which a petition was filed alleging commission of a status or criminal offense on or after his or her reaching the age of 17, but before reaching the age of 18.

FIELD OPERATIONS AND SUPPORT SERVICES

Sec. 801. (1) The department shall report monthly to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on the most recent food assistance program error rate derived from the active cases, reported to the United States Department of Agriculture - Food and Nutrition Services for the supplemental nutrition assistance program.

(2) The department shall report quarterly on the progress of the corrective action taken utilizing the funds appropriated for food assistance reinvestment in lowering the food assistance program error rate and improving program payment accuracy.

Sec. 802. From the funds appropriated in part 1 for field staff travel, the department shall allocate up to \$100,000.00 annually toward reimbursing the out-of-pocket costs of county board members and county department directors to attend statewide meetings of the Michigan County Social Services Association.

Sec. 807. From the funds appropriated in part 1 for Elder Law of Michigan MiCAFE contract, the department shall allocate not less

- than \$350,000.00 to the Elder Law of Michigan MiCAFE to assist this 1 2 state's elderly population in participating in the food assistance program. Of the \$350,000.00 allocated under this section, the 3 4 department shall use \$175,000.00, which are general fund/general purpose funds, as state matching funds for not less than 5 6 \$175,000.00 in United States Department of Agriculture funding to 7 provide outreach program activities, such as eligibility screening 8 and information services, as part of a statewide food assistance hotline. 9
- 10 Sec. 808. By March 1 of the current fiscal year, the 11 department shall provide a report to the senate and house 12 appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and 13 14 the state budget office on the nutrition education program. The 15 report shall include requirements made by the agriculture 16 improvement act of 2018, Public Law 115-334, such as how the 17 department shall use an electronic reporting system to evaluate 18 projects and an accounting of allowable state agency administrative costs. The report shall also include documentation of the steps the 19 20 department shall take to ensure that projects and subgrantee programs are evidence-based, appropriated for, and meet the 21 criteria for an eligible individual as that term is defined in 22 section 2036a(a) of the food and nutrition act, 7 USC 2036a, and 23 quantitative evidence that the programs contribute to a reduction 24 25 in obesity or an increase in the consumption of healthy foods. Additionally, the report shall include planned allocation and 26 27 actual expenditures for the supplemental nutrition assistance program education funding, planned and actual grant amounts for the 28 29 supplemental nutrition assistance program education funding, the

total amount of expected carryforward balance at the end of the current fiscal year for the supplemental nutrition assistance program education funding and for each subgrantee program, a list of all supplemental nutrition assistance program education funding programs by implementing agency, and the stated purpose of each of the programs and each of the subgrantee programs.

Sec. 809. (1) The purpose of the pathways to potential program is to reduce chronic absenteeism, increase graduation rate, and decrease the number of students who repeat grades for schools that are current or future participants in the pathways to potential program. Before any deployment of resources into a participant school, the department and the participant school shall establish performance objectives for each participant school based on a 2year baseline prior to pathways to potential being established in the participant school and shall evaluate the progress made in the above categories from the established baseline. By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices a report listing all participant schools, the number of staff assigned to each school by participant school, and the percentage of participating schools that achieved improved performance in each of the 3 outcomes listed above compared to the previous year, by each individual outcome. It is the intent of the legislature that after a 2-year period without attaining an increase in success in meeting the 3 listed outcomes from the established baseline, the department shall work with the participant school to examine the cause of the lack of progress and shall seek to implement a plan to increase success in meeting the

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- identified outcomes. It is the intent of the legislature that 1 progress or the lack of progress made in meeting the performance objectives shall be used as a determinant in future pathways to 3 potential resource allocation decisions. 4
 - (2) As used in this section, "baseline" means the initial set of data from the center for educational performance and information in the department of technology, management, and budget of the 3 measured outcomes as described in subsection (1).
 - Sec. 825. (1) From the funds appropriated in part 1, the department shall provide individuals not more than \$500.00 for vehicle repairs, including any repairs done in the previous 12 months. However, the department may in its discretion pay for repairs up to \$900.00. Payments under this section shall include the combined total of payments made by the department and work participation program.
 - (2) By November 30 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices a report detailing the total number of payments for repairs, the number of payments for repairs that exceeded \$500.00, the number of payments for repairs that cost exactly \$500.00, and the number of payments for repairs that cost exactly \$900.00 in the previous fiscal year.
 - Sec. 826. (1) From the funds appropriated in part 1 for field policy and administration, not less than \$300,000.00 shall be allocated for the department to contract with the Prosecuting Attorneys Association of Michigan to provide the support and services necessary to increase the capability of this state's prosecutors, adult protective service system, and criminal justice

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system to effectively identify, investigate, and prosecute elder abuse and financial exploitation.

- (2) By March 1 of the current fiscal year, the Prosecuting Attorneys Association of Michigan shall provide a report to the department on the efficacy of the contract. The department shall submit the report to the state budget office, the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices within 30 days after receipt from the Prosecuting Attorneys Association of Michigan.
- Sec. 850. (1) The department shall maintain out-stationed eligibility specialists in community-based organizations, community mental health agencies, nursing homes, adult placement and independent living settings, federally qualified health centers, and hospitals unless a community-based organization, community mental health agency, nursing home, adult placement and independent living setting, federally qualified health centers, or hospital requests that the program be discontinued at its facility.
- (2) From the funds appropriated in part 1 for donated funds positions, the department shall enter into contracts with agencies that are able and eligible under federal law to provide the required matching funds for federal funding, as determined by federal statute and regulations.
- (3) A contract for an assistance payments donated funds position must include, but not be limited to, the following performance metrics:
- (a) Meeting a standard of promptness for processing
 applications for Medicaid and other public assistance programs
 under state law.

- (b) Meeting required standards for error rates in determining programmatic eligibility as determined by the department.
- (4) The department shall only fill additional donated funds positions after a new contract has been signed. That position shall also be abolished when the contract expires or is terminated.
- (5) The department shall classify as limited-term FTEs any new employees who are hired to fulfill the donated funds position contracts or are hired to fill any vacancies from employees who transferred to a donated funds position.
- (6) By March 1 of the current fiscal year, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office detailing information on the donated funds positions, including the total number of occupied positions, the total private contribution of the positions, and the total cost to the state for any nonsalary expenditure for the donated funds position employees.
- Sec. 851. (1) From the funds appropriated in part 1 for adult services field staff, the department shall seek to reduce the number of older adults who are victims of crime and fraud by increasing the standard of promptness in every county, as measured by commencing an investigation within 24 hours after a report is made to the department, establishing face-to-face contact with the client within 72 hours after a report is made to the department, and completing the investigation within 30 days after a report is made to the department.
- (2) The department shall report no later than March 1 of the current fiscal year to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal

agencies, and the house and senate policy offices on the services provided to older adults who were victims of crime or fraud in the previous fiscal year. The report shall include, but is not limited to, the following by county: the percentage of investigations commenced within 24 hours after a report is made to the department, the number of face-to-face contacts established with the client within 72 hours after a report is made to the department, the number of investigations completed within 30 days after a report is made to the department, and the total number of older adults that were victims of crime or fraud in the previous fiscal year and were provided services by the department as a result of being victims of crime or fraud.

DISABILITY DETERMINATION SERVICES

Sec. 890. From the funds appropriated in part 1 for disability determination services, the department shall maintain the unit rates in effect on September 30, 2019 for medical consultants performing disability determination services, including physicians, psychologists, and speech-language pathologists.

BEHAVIORAL HEALTH SERVICES ADMINISTRATION AND SPECIAL PROJECTS

Sec. 901. The funds appropriated in part 1 are intended to support a system of comprehensive community mental health services under the full authority and responsibility of local CMHSPs or PIHPs in accordance with the mental health code, 1974 PA 258, MCL 330.1001 to 330.2106, the Medicaid provider manual, federal Medicaid waivers, and all other applicable federal and state laws. Sec. 902. (1) From the funds appropriated in part 1, final

authorizations to CMHSPs or PIHPs shall be made upon the execution

- ${f 1}$ of contracts between the department and CMHSPs or PIHPs. The
- 2 contracts shall contain an approved plan and budget as well as
- 3 policies and procedures governing the obligations and
- 4 responsibilities of both parties to the contracts. Each contract
- 5 with a CMHSP or PIHP that the department is authorized to enter
- 6 into under this subsection shall include a provision that the
- 7 contract is not valid unless the total dollar obligation for all of
- 8 the contracts between the department and the CMHSPs or PIHPs
- 9 entered into under this subsection for the current fiscal year does
- ${f 10}$ not exceed the amount of money appropriated in part 1 for the
- 11 contracts authorized under this subsection.
- 12 (2) The department shall immediately report to the senate and
- 13 house appropriations subcommittees on the department budget, the
- 14 senate and house fiscal agencies, and the state budget director if
- 15 either of the following occurs:
- 16 (a) The department enters into any new contracts with CMHSPs
- or PIHPs that would affect rates or expenditures.
- 18 (b) The department amends any contracts the department has
- 19 entered into with CMHSPs or PIHPs that would affect rates or
- 20 expenditures.
- 21 (3) The report required by subsection (2) shall include
- 22 information about the changes to the contracts and their effects on
- 23 rates and expenditures.
- Sec. 904. (1) By May 31 of the current fiscal year, the
- 25 department shall provide a report on the CMHSPs, PIHPs, and
- 26 designated regional entities for substance use disorder prevention
- 27 and treatment to the members of the house and senate appropriations
- 28 subcommittees on the department budget, the house and senate fiscal
- 29 agencies, and the state budget director that includes the

1 information required by this section.

- (2) The report required under subsection (1) shall contain, unless otherwise noted, information for each CMHSP, PIHP, and designated regional entity for substance use disorder prevention and treatment, and a statewide summary, each of which shall include at least the following information:
- (a) A statewide summary of the demographic description of service recipients that, minimally, shall include reimbursement eligibility, client population, age, ethnicity, housing arrangements, and diagnosis.
- (b) Per capita expenditures in total and by client populationgroup.
 - (c) A statewide summary of Medicaid-funded cost information for the 4 diagnosis groups of adults with a mental illness, children with a serious emotional disturbance, individuals with an intellectual or developmental disability, and individuals with a substance use disorder that, minimally, includes expenditures by service category for each of the 4 diagnosis groups, and cases, units, and cost of each specific service code index or health care common procedure coding system (HCPCS) code for each of the 4 diagnosis groups.
 - (d) Financial information on non-Medicaid mental health services by general fund cost reporting category.
 - (e) Information about access to CMHSPs, PIHPs, and designated regional entities for substance use disorder prevention and treatment that includes, but is not limited to, the following:
 - (i) The number of individuals receiving requested services.
- 28 (ii) The number of individuals who requested services but did 29 not receive services.

- (f) The number of second opinions requested under the mental health code, 1974 PA 258, MCL 330.1001 to 330.2106, and the determination of any appeals.
- (g) Lapses and carryforwards during the previous fiscal year for CMHSPs, PIHPs, and designated regional entities for substance use disorder prevention and treatment.
- (h) Performance indicator information required to be submitted to the department in the contracts with CMHSPs, PIHPs, and designated regional entities for substance use disorder prevention and treatment.
- (i) Administrative expenditures of each CMHSP, PIHP, and designated regional entity for substance use disorder prevention and treatment that include a breakout of the salary, benefits, and pension of each executive-level staff and shall include the director, chief executive, and chief operating officers and other members identified as executive staff.
- (3) The report in subsection (1) shall contain the following information from the previous fiscal year on substance use disorder prevention, education, and treatment programs:
- (a) The expenditures stratified by department-designated community mental health entity, by fund source, by subcontractor, by population served, and by service type.
- (b) The expenditures per state client, with data on the distribution of expenditures reported using a histogram approach.
- (c) The number of services provided by subcontractor and by service type. Additionally, data on length of stay, referral source, and participation in other state programs.
- (d) The collections from other first- or third-party payers,private donations, or other state or local programs, by department-

- designated community mental health entity, by subcontractor, by
 population served, and by service type.
 - (4) The department shall include data reporting requirements listed in subsections (2) and (3) in the annual contract with each individual CMHSP, PIHP, and designated regional entity for substance use disorder prevention and treatment.
 - (5) The department shall take all reasonable actions to ensure that the data required are complete and consistent among all CMHSPs, PIHPs, and designated regional entities for substance use disorder prevention and treatment.
 - Sec. 907. (1) The amount appropriated in part 1 for community substance use disorder prevention, education, and treatment shall be expended to coordinate care and services provided to individuals with severe and persistent mental illness and substance use disorder diagnoses.
- 16 (2) The department shall approve managing entity fee schedules
 17 for providing substance use disorder services and charge
 18 participants in accordance with their ability to pay.
 - (3) The managing entity shall continue current efforts to collaborate on the delivery of services to those clients with mental illness and substance use disorder diagnoses with the goal of providing services in an administratively efficient manner.
 - Sec. 908. As a condition of their contracts with the department, PIHPs and CMHSPs, in consultation with the Community Mental Health Association of Michigan, shall work with the department to implement section 206b of the mental health code, 1974 PA 258, MCL 330.1206b, to establish a uniform community mental health services credentialing program.
- Sec. 909. From the funds appropriated in part 1 for health

homes, the department shall use available revenue from the marihuana regulatory fund established in section 604 of the medical marihuana facilities licensing act, 2016 PA 281, MCL 333.27604, to improve physical health, expand access to substance use disorder prevention and treatment services, and strengthen the existing prevention, treatment, and recovery systems.

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

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

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

Sec. 912. The department shall contract directly with the Salvation Army Harbor Light program, at an amount not less than the amount provided during the fiscal year ending September 30, 2020,

- to provide non-Medicaid substance use disorder services if the local coordinating agency or the department confirms the Salvation Army Harbor Light program meets the standard of care. The standard of care shall include, but is not limited to, utilization of the medication assisted treatment option.
 - Sec. 913. (1) From the funds appropriated in part 1 for behavioral health program administration, the department shall allocate \$1,025,000.00 for the autism navigator program. The department shall require any contractor receiving funds under this section to comply with performance-related metrics to maintain eligibility for funding. The performance-related metrics shall include, but not be limited to, all of the following:
 - (a) Each contractor shall have accreditations that attest to their competency and effectiveness in providing services.
 - (b) Each contractor shall demonstrate cost-effectiveness.
 - (c) Each contractor shall ensure their ability to leverage private dollars to strengthen and maximize service provision.
 - (d) Each contractor shall provide quarterly reports to the department regarding the number of clients served by PIHP region, units of service provision by PIHP region, and ability to meet their stated goals.
 - (2) The department shall require an annual report from any contractor receiving funding from this section. The annual report, due to the department 60 days following the end of the contract period, shall include specific information on services and programs provided, the client base to which the services and programs were provided, and the expenditures for those services. The department shall provide the annual reports to the senate and house appropriations subcommittees on the department budget, the senate

1 and house fiscal agencies, and the state budget office.

Sec. 914. By June 1 of the current fiscal year, the department shall submit a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on outcomes of the funds provided in part 1 to the Michigan Child Collaborative Care (MC3). The outcomes reported must include, but is not limited to, the number of same-day telephone consultations with primary care providers and the number of local resource recommendations made to primary care providers who are providing medical care to patients who need behavioral health services.

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

Sec. 916. From the funds appropriated in part 1 for behavioral health program administration, the department shall allocate \$100,000.00 as a grant to a nonprofit mental health clinic located in a county with a population between 290,000 and 300,000 according to the most recent federal decennial census that provides counseling services, accepts clients regardless of their ability to pay for services through sliding scale copayments and volunteer services, and uses fundraising to support their clinic.

Sec. 917. From the funds appropriated in part 1 for opioid

- response activities, the department shall allocate \$16,000,000.00 from the Michigan opioid healing and recovery fund created under section 3 of the Michigan trust fund act, 2000 PA 489, MCL 12.253, to create or supplement opioid-related programs and services in a manner consistent with the opioid judgement, settlement, or compromise of claims pertaining to violations, or alleged violations, of law related to the manufacture, marketing, distribution, dispensing, or sale of opioids.
 - Sec. 918. On a quarterly basis, providing monthly data, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget director on the amount of funding paid to PIHPs to support the Medicaid managed mental health care program. The information shall include the total paid to each PIHP, per capita rate paid for each eligibility group for each PIHP, and number of cases in each eligibility group for each PIHP, and year-to-date summary of eligibles and expenditures for the Medicaid managed mental health care program.
 - Sec. 920. (1) As part of the Medicaid rate-setting process for behavioral health services, the department shall work with PIHP network providers and actuaries to include any state and federal wage and compensation increases that directly impact staff who provide Medicaid-funded community living supports, personal care services, respite services, skill-building services, and other similar supports and services as part of the Medicaid rate.
 - (2) It is the intent of the legislature that any increased Medicaid rate related to state minimum wage increases shall also be distributed to direct care employees.
- Sec. 924. From the funds appropriated in part 1 for autism

services, for the purposes of actuarially sound rate certification 1 and approval for Medicaid behavioral health managed care programs, the department shall maintain a fee schedule for autism services reimbursement rates for direct services. Expenditures used for rate setting shall not exceed those identified in the fee schedule. The rates for behavioral technicians shall not be less than \$50.00 per 7 hour and not more than \$55.00 per hour.

Sec. 926. (1) From the funds appropriated in part 1 for community substance use disorder prevention, education, and treatment, \$500,000.00 is allocated for a specialized substance use disorder detoxification project administered by a 9-1-1 service district in conjunction with a substance use and case management provider and at a hospital within a 9-1-1 services district with at least 600,000 residents and 15 member communities within a county with a population of at least 1,500,000 according to the most recent federal decennial census.

- (2) The substance use and case management provider receiving funds under this section shall collect and submit to the department data on the outcomes of the project throughout the duration of the project and the department shall submit a report on the project's outcomes to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office.
- Sec. 927. (1) The department shall, in consultation with the Community Mental Health Association of Michigan, establish, maintain, and review as necessary, a uniform community mental health services auditing process for use by CMHSPs and PIHPs.
- (2) The uniform auditing process required under this section 28 29 must do all of the following:

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- (a) Create uniformity in the collection of data and consistent measurement of the quality, efficacy, and cost effectiveness of provided services and supports.
- (b) Establish a uniform audit tool that contains information necessary for the uniform community mental health services auditing process and adheres to national standards.
- (c) Strive to meet the needs of community mental health service beneficiaries and meet all statewide audit requirements.
 - (d) Maintain audit responsibility at the local agency level.
- (3) By March 1 of the current fiscal year, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices on the implementation status of the uniform auditing process and any barriers to implementation.
- (4) A state department or agency that provides, either directly or through a contract, community mental health services and supports must comply with the uniform auditing process and utilize the audit tool maintained by the department. All forms, processes, and contracts used by the state that relate to the provision of community mental health services and supports must comply with the uniform auditing process.
- (5) As used in this section, "national standards" means standards established by a national accrediting entity such as the Joint Commission, Commission on Accreditation of Rehabilitation Facilities, Council on Accreditation, National Committee for Quality Assurance, or other credible body approved by the department.
- Sec. 928. (1) Each PIHP shall provide, from internal

- resources, local funds to be used as a part of the state match
 required under the Medicaid program in order to increase capitation
 rates for PIHPs. These funds shall not include either state funds
 received by a CMHSP for services provided to non-Medicaid
 recipients or the state matching portion of the Medicaid capitation
 payments made to a PIHP.
 - (2) It is the intent of the legislature that any funds that lapse from the funds appropriated in part 1 for Medicaid mental health services shall be redistributed to individual CMHSPs as a reimbursement of local funds on a proportional basis to those CMHSPs whose local funds were used as state Medicaid match. By April 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the lapse by PIHP from the previous fiscal year and the projected lapse by PIHP in the current fiscal year.
 - (3) It is the intent of the legislature that the amount of local funds used in subsection (1) be phased out and offset with state general fund/general purpose revenue in equal amounts over a 5-year period.
 - (4) Until the local funds are phased out as described in subsection (3), each PIHP shall not be required to provide local funds, used as part of the state match required under the Medicaid program in order to increase capitation rates for PIHPs, at an amount greater than what each PIHP received from local units of government, either directly or indirectly, during the fiscal year ending September 30, 2018 for this purpose.
- Sec. 935. A county required under the provisions of the mental

- health code, 1974 PA 258, MCL 330.1001 to 330.2106, to provide 1 matching funds to a CMHSP for mental health services rendered to 2 residents in its jurisdiction shall pay the matching funds in equal 3 4 installments on not less than a quarterly basis throughout the fiscal year, with the first payment being made by October 1 of the 5 current fiscal year.
 - Sec. 940. (1) According to section 236 of the mental health code, 1974 PA 258, MCL 330.1236, the department shall review expenditures for each CMHSP to identify CMHSPs with projected allocation surpluses and to identify CMHSPs with projected allocation shortfalls. The department shall encourage the board of a CMHSP with a projected allocation surplus to concur with the department's recommendation to reallocate those funds to CMHSPs with projected allocation shortfalls.
- 15 (2) A CMHSP that has its funding allocation transferred out 16 during the current fiscal year as described in subsection (1) is 17 not eligible for any additional funding reallocations during the remainder of the current fiscal year, unless that CMHSP is 18 responding to a public health emergency as determined by the 19 20 department.
 - (3) CMHSPs shall report to the department on any proposed reallocations described in this section at least 30 days before any reallocations take effect.
 - (4) The department shall notify the chairs of the appropriation subcommittees on the department budget when a request is made and when the department grants approval for reallocation as described in subsection (1). By September 30 of the current fiscal year, the department shall provide a report on the amount of funding reallocated to the senate and house appropriations

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subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office.

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

Sec. 950. From the funds appropriated in part 1 for courtappointed guardian reimbursements, the department shall allocate \$100.00 to reimburse court-appointed public guardians for recipients who also receive CMHSP services at a reimbursement of \$50.00 per month. It is the intent of the legislature that these funds be used in addition to any other funds currently paid to court-appointed public quardians, but a court-appointed public quardian shall not be compensated more than \$83.00 per month for any CMHSP eligible recipients regardless of funding source. By September 15 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on the number of court-appointed public quardians who received these funds, the number of court-appointed public quardians who were also reimbursed by the counties, and the permonth reimbursement rates provided by the counties.

Sec. 959. (1) The department shall continue to convene a workgroup in collaboration with the chairs of the house and senate appropriations subcommittees on the department budget or their designees, CMHSP members, autism services provider clinical and

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- administrative staff, community members, Medicaid autism services clients, and family members of Medicaid autism services clients to make recommendations to ensure appropriate cost and service provision, including, but not limited to, the following:
 - (a) Evaluation and reduction of the variability in diagnostic rates across different regions of the state.
 - (b) Evaluation of the factors resulting in the voluntary disenrollment from, or declination of, therapeutic services by eligible families.
- 10 (2) By April 15 of the current fiscal year, the department
 11 shall provide an update on the workgroup's recommendations and
 12 findings to the senate and house appropriations subcommittees on
 13 the department budget, the senate and house fiscal agencies, and
 14 the state budget office.
- Sec. 960. (1) From the funds appropriated in part 1 for autism services, the department shall continue to cover all Medicaid autism services to Medicaid enrollees eligible for the services that were covered on January 1, 2019.
- 19 (2) To restrain cost increases in the autism services line
 20 item, the department shall do all of the following:
 - (a) By March 1 of the current fiscal year, develop and implement specific written guidance for standardization of Medicaid PIHPs and CMHSPs autism spectrum disorder administrative services, including, but not limited to, reporting requirements, coding, and reciprocity of credentialing and training between PIHPs and CMHSPs to reduce administrative duplication at the PIHP, CMHSP, and service provider levels.
- (b) Require consultation with the client's evaluationdiagnostician and PIHP to approve the client's ongoing therapy for

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- 3 years, unless the client's evaluation diagnostician recommended
 an evaluation before the 3 years or if a clinician on the treatment
 team recommended an evaluation for the client before the third
 year.
- (c) Limit the authority to perform a diagnostic evaluation for
 Medicaid autism services to qualified licensed practitioners.
 Qualified licensed practitioners are limited to the following:
 - (i) A physician with a specialty in psychiatry or neurology.
 - (ii) A physician with a subspecialty in developmental pediatrics, development-behavioral pediatrics, or a related discipline.
 - (iii) A physician with a specialty in pediatrics or other appropriate specialty with training, experience, or expertise in autism spectrum disorders or behavioral health.
 - (iv) A psychologist with a specialty in clinical child psychology, behavioral and cognitive psychology, or clinical neuropsychology, or other appropriate specialty with training, experience, or expertise in autism spectrum disorders or behavioral health.
 - (ν) A clinical social worker with at least 1 year of experience working within his or her scope of practice who is qualified and experienced in diagnosing autism spectrum disorders.
 - (vi) An advanced practice registered nurse with training, experience, or expertise in autism spectrum disorders or behavioral health.
 - (vii) A physician's assistant with training, experience, or expertise in autism spectrum disorders or behavioral health.
- (d) Require that a client whose initial diagnosis wasperformed by a diagnostician with master's level credentials have

- their diagnosis and treatment recommendations reviewed by a physician, psychiatric nurse practitioner, physician's assistant with training, experience, or expertise in autism spectrum disorders or behavioral health, or fully credentialed psychologist.
 - (e) Allow and expand the utilization of telemedicine and telepsychiatry to increase access to diagnostic evaluation services.
 - (f) Coordinate with the department of insurance and financial services on oversight for compliance with the Paul Wellstone and Pete Domenici mental health parity and addiction equity act of 2008, Public Law 110-343, as it relates to autism spectrum disorder services, to ensure appropriate cost sharing between public and private payers.
 - (g) Require that Medicaid eligibility be confirmed through prior evaluations conducted by physicians, psychiatric nurse practitioners, physician's assistant with training, experience, or expertise in autism spectrum disorders or behavioral health, or fully credentialed psychologists to the extent possible.
 - (h) Maintain regular statewide provider trainings on autism spectrum disorder standard clinical best practice guidelines for treatment and diagnostic services.
 - (3) By March 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on total autism services spending broken down by PIHP and CMHSP for the previous fiscal year and current fiscal year and total administrative costs broken down by PIHP, CMHSP, and the type of administrative cost for the previous fiscal year and current fiscal

1 year.

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

Sec. 964. By October 1 of the current fiscal year, the department shall provide the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office with the standardized fee schedule for Medicaid behavioral health services and supports. The report shall also include the adequacy standards to be used in all contracts with PIHPs and CMHSPs. In the development of the standardized fee schedule for Medicaid behavioral health services and supports during the current fiscal year, the department must prioritize and support essential service providers and must develop a standardized fee schedule for revenue code 0204.

Sec. 965. From the funds appropriated in part 1, the department and the PIHPs shall increase the comparison rates and any associated reimbursement rates of the bundled rate H0020 for the administration and services of methadone to \$19.00.

Sec. 970. The department shall maintain the policies in effect on October 1, 2018 for the federal home and community-based services rule as it relates to skill building assistance services. The skill building assistance services shall remain eligible for federal match until March 17, 2022 as stated in the CMS informational bulletin dated May 9, 2017. From the funds appropriated in part 1, the department shall continue to seek

29 federal matching funds for skill building assistance services. As a

condition of their contracts with the department, CMHSPs shall retain any federally approved skill building assistance services available as of October 1, 2018.

Sec. 972. From the funds appropriated in part 1 for behavioral health program administration, the department shall allocate not less than \$3,000,000.00 general fund/general purpose revenue and any associated federal match or federal grant funding, including, but not limited to, associated federal 988 grant funding for the mental health telephone access line known as the Michigan crisis and access line (MiCAL), to provide primary coverage in regions where a regional national suicide prevention lifeline center does not provide coverage and for statewide secondary coverage, to establish and make available to the public MiCAL in accordance with section 165 of the mental health code, 1974 PA 258, MCL 330.1165.

Sec. 974. The department and PIHPs shall allow an individual with an intellectual or developmental disability who receives supports and services from a CMHSP to instead receive supports and services from another provider if the individual shows that he or she is eligible and qualified to receive supports and services from another provider. Other providers may include, but are not limited to, MIChoice and program of all-inclusive care for the elderly (PACE). The department may contract with an independent personplanning company to coordinate these services.

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

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

Sec. 979. If funds become available, the department shall seek the appropriate federal approvals to allow for the utilization of Medicaid funding for services provided at adult psychiatric residential treatment facilities. By March 1 of the current fiscal year, the department shall report on its progress toward receiving the appropriate federal approvals to allow for federal Medicaid reimbursements for services provided at adult psychiatric residential treatment facilities to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office.

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

(2) By March 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices on the planned allocation of the funds appropriated for mental health diversion council.

Sec. 996. From the funds appropriated in part 1 for family support subsidy, the department shall make monthly payments of \$229.31 to the parents or legal guardians of children approved for the family support subsidy by a CMHSP.

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

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

BEHAVIORAL HEALTH SERVICES

Sec. 1001. By December 31 of the current fiscal year, each CMHSP shall submit a report to the department that identifies populations being served by the CMHSP broken down by program eligibility category. The report shall also include the percentage of the operational budget that is related to program eligibility enrollment. By February 15 of the current fiscal year, the department shall submit the report described in this section to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office.

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

Sec. 1004. The department shall provide the senate and house appropriations subcommittees on the department budget, the senate

- 1 and house fiscal agencies, and the state budget office any rebased
- 2 formula changes to either Medicaid behavioral health services or
- 3 non-Medicaid mental health services 90 days before implementation.
- 4 The notification shall include a table showing the changes in
- 5 funding allocation by PIHP for Medicaid behavioral health services
- 6 or by CMHSP for non-Medicaid mental health services.
- 7 Sec. 1005. (1) From the funds appropriated in part 1 for
- 8 health homes, the department shall maintain the number of
- 9 behavioral health homes in PIHP regions 1, 2, and 8 and maintain
- 10 the number of substance use disorder health homes in PIHP regions
- 11 1, 2, 4, and 9. The department shall expand the number of
- behavioral health homes in regions 6 and 7, expand the number of
- 13 substance use disorder health homes in regions 6, 7, and 10, and
- 14 create and implement intellectual or developmental disability
- 15 health homes in at least 2 regions.
- 16 (2) On a quarterly basis, the department shall provide a
- 17 report to the house and senate appropriations subcommittees on the
- 18 department budget, the house and senate fiscal agencies, the house
- 19 and senate policy offices, and the state budget office on the
- 20 number of individuals being served and expenditures incurred by
- 21 each PIHP region by site.
- 22 Sec. 1008. PIHPs and CMHSPs shall do all of the following:
- 23 (a) Work to reduce administration costs by ensuring that PIHP
- 24 and CMHSP responsible functions are efficient in allowing optimal
- 25 transition of dollars to those direct services considered most
- 26 effective in assisting individuals served. Any consolidation of
- 27 administrative functions must demonstrate, by independent analysis,
- 28 a reduction in dollars spent on administration resulting in greater
- 29 dollars spent on direct services. Savings resulting from increased

- efficiencies shall not be applied to PIHP and CMHSP net assets, internal service fund increases, building costs, increases in the number of PIHP and CMHSP personnel, or other areas not directly related to the delivery of improved services.
 - (b) Take an active role in managing mental health care by ensuring consistent and high-quality service delivery throughout its network and promote a conflict-free care management environment.
 - (c) Ensure that direct service rate variances are related to the level of need or other quantifiable measures to ensure that the most money possible reaches direct services.
 - (d) Whenever possible, promote fair and adequate direct care reimbursement, including fair wages for direct service workers.
 - Sec. 1010. The funds appropriated in part 1 for behavioral health community supports and services must be used to reduce waiting lists at state-operated hospitals and centers through costeffective community-based and residential services, including, but not limited to, assertive community treatment (ACT), forensic assertive community treatment (FACT), crisis stabilization units in accordance with chapter 9A of the mental health code, 1974 PA 258, MCL 330.1971 to 330.1979, and psychiatric residential treatment facilities in accordance with section 137a of the mental health code, 1974 PA 258, MCL 330.1137a.
 - Sec. 1011. To the extent permissible under section 919 of the mental health code, 1974 PA 258, MCL 330.1919, the funds appropriated in part 1 for behavioral health services may be used to reimburse out-of-state providers of crisis resolution services and outpatient services if the out-of-state provider is enrolled as a state Medicaid provider and the out-of-state provider is located

closer to the client's home than an in-state provider.

Sec. 1012. It is the intent of the legislature that the department pursue any and all federal Medicaid waivers to maximize the use of federal Medicaid reimbursements for substance use disorder services and treatments for justice-involved individuals. By March 9 of the current fiscal year, the department shall provide a report on the types of substance use disorder waivers submitted by the department, whether those waivers have been approved by the Centers for Medicare and Medicaid Services, and the steps the department will take to request any and all federal Medicaid waivers to maximize the use of federal Medicaid reimbursements for substance use disorder services and treatments to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office.

Sec. 1013. CMHSPs that operate preadmission screening units, or that have designated a hospital as a preadmission screening unit, may permit a sheriff's office to use a qualified contracted entity to transport an individual for preadmission screening.

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

(2) The department shall require each contractor described in subsection (1) that receives greater than \$1,000,000.00 in state grant funding to comply with performance-related metrics to

maintain their eligibility for funding. The performance-related metrics shall include, but not be limited to, all of the following:

- (a) Each contractor or subcontractor shall have accreditations that attest to their competency and effectiveness as behavioral health and social service agencies.
- (b) Each contractor or subcontractor shall have a mission that is consistent with the purpose of the multicultural agency.
- (c) Each contractor shall validate that any subcontractors utilized within these appropriations share the same mission as the lead agency receiving funding.
- (d) Each contractor or subcontractor shall demonstrate cost-effectiveness.
- (e) Each contractor or subcontractor shall ensure their ability to leverage private dollars to strengthen and maximize service provision.
- (f) Each contractor or subcontractor shall provide timely and accurate reports regarding the number of clients served, units of service provision, and ability to meet their stated goals.
- (3) The department shall require an annual report from the contractors described in subsection (2). The annual report, due 60 days following the end of the contract period, shall include specific information on services and programs provided, the client base to which the services and programs were provided, information on any wraparound services provided, and the expenditures for those services. By February 1 of the current fiscal year, the department shall provide the annual reports to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office.

mental health block grant, the department shall, to the extent possible, provide grants, pursuant to federal laws, rules, and regulations, to local public entities that provide mental health services and to 1 private entity that has a statewide contract to provide community-based mental health services.

STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL HEALTH SERVICES

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

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

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

(2) All closures or consolidations are dependent upon adequate department-approved CMHSP and PIHP plans that include a discharge

- and aftercare plan for each individual currently in the facility. A discharge and aftercare plan shall address the individual's housing needs. A homeless shelter or similar temporary shelter arrangements are inadequate to meet the individual's housing needs.
- (3) Four months after the certification of closure required in section 19(6) of the state employees' retirement act, 1943 PA 240, MCL 38.19, the department shall provide a closure plan to the house and senate appropriations subcommittees on the department budget and the state budget director.
- (4) Upon the closure of state-run operations and after transitional costs have been paid, the remaining balances of funds appropriated for that operation shall be transferred to CMHSPs or PIHPs responsible for providing services for individuals previously served by the operations.

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

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

1 through the outsourcing of such services.

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

- (a) The average wait time for individuals determined incompetent to stand trial before admission to the center for forensic psychiatry.
- (b) The average wait time for individuals determined incompetent to stand trial before admission to other state-operated psychiatric facilities.
 - (c) The average number of individuals waiting to receive admission into the center for forensic psychiatry.
- (d) The average number of individuals waiting to receive admission into the other state-operated hospitals and centers.
- (e) The average wait time for individuals awaiting admission
 into the other state-operated hospitals and centers through the
 civil admissions process.
 - (f) The number of individuals determined not guilty by reason of insanity or incompetent to stand trial by an order of a probate court that have been determined to be ready for discharge to the community, and the average wait time between being determined to be ready for discharge to the community and actual community placement.
- 24 (g) The number of individuals denied admission into the center
 25 for forensic psychiatry.
 - (h) The number of individuals denied admission into the other state-operated hospitals and centers.
- 28 (2) By March 1 of the current fiscal year, the department29 shall report to the house and senate appropriations subcommittees

on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on the outcomes and performance measures in subsection (1).

Sec. 1060. By March 1 of the current fiscal year, the department shall provide a report on mandatory overtime, staff turnover, and staff retention at the state psychiatric hospitals and centers to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office. The report shall include, but is not limited to, the following:

- (a) The number of direct care and clinical staff positions that are currently vacant by hospital, and how that compares to the number of vacancies during the previous fiscal year.
- (b) A breakdown of voluntary and mandatory overtime hours worked by position and by hospital, and how that compares to the breakdown of voluntary and mandatory overtime hours during the previous fiscal year.
- (c) The ranges of wages paid by position and by hospital, andhow that compares to wages paid during the previous fiscal year.
 - Sec. 1061. The funds appropriated in part 1 for Caro Regional Mental Health Center shall only be utilized to support a psychiatric hospital located at its current location. It is the intent of the legislature that the Caro Regional Mental Health Center shall remain open and operational at its current location on an ongoing basis. Capital outlay funding shall be utilized for planning and construction of a new or updated facility at the current location instead of at a new location.
- 28 Sec. 1063. (1) From the funds appropriated in part 1 for 29 Hawthorn Center - psychiatric hospital - children and adolescents,

- the department shall maintain a psychiatric transitional unit and children's transition support team. These programs shall augment the continuum of behavioral health services for high-need youth and provide additional continuity of care and transition into supportive community-based services.
 - (2) Outcomes and performance measures for these programs include, but are not limited to, the following:
 - (a) The rate of rehospitalization for youth served through the program at 30 and 180 days.
 - (b) The measured change in the Child and Adolescent Functional Assessment Scale for children served through these programs.

HEALTH AND HUMAN SERVICES POLICY AND INITIATIVES

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

Sec. 1142. The department shall continue to seek means to increase retention of Michigan medical school students for completion of their primary care residency requirements within this state and ultimately, for some period of time, to remain in this state and serve as primary care physicians. The department is encouraged to work with Michigan institutions of higher education.

Sec. 1143. From the funds appropriated in part 1 for primary care services, the department shall allocate no less than \$675,000.00 for island primary health care access and services

including island clinics, in the following amounts:

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

- (b) Mackinac Island, \$250,000.00.
 - (c) Drummond Island, \$150,000.00.
- 5 (d) Bois Blanc Island, \$25,000.00.

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

Sec. 1148. The department shall provide a report by November 1 of the current fiscal year to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget director on the implementation of the appropriation from the previous fiscal year of \$100,000.00 from the policy and planning administration line item for informational materials related to section 27(2)(a) of article I of the state constitution of 1963 regarding human embryo and embryonic stem cell research.

Sec. 1151. (1) The department shall coordinate with the department of licensing and regulatory affairs, the department of the attorney general, all appropriate law enforcement agencies, and the Medicaid health plans to work with local substance use disorder agencies and addiction treatment providers to help inform Medicaid beneficiaries of all medically appropriate treatment options for opioid addiction when their treating physician stops prescribing prescription opioid medication for pain, and to address other appropriate recommendations of the prescription drug and opioid

abuse task force outlined in its report of October 2015.

(2) By October 1 of the current fiscal year, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on how the department is working with local substance use disorder agencies and addiction treatment providers to ensure that Medicaid beneficiaries are informed of all available and medically appropriate treatment options for opioid addiction when their treating physician stops prescribing prescription opioid medication for pain, and to address other appropriate recommendations of the task force. The report shall include any potential barriers to medication-assisted treatment, as recommended by the Michigan medication-assisted treatment guidelines, for Medicaid beneficiaries in both office-based opioid treatment and opioid treatment program facility settings.

EPIDEMIOLOGY, EMERGENCY MEDICAL SERVICES, AND LABORATORY

Sec. 1180. From the funds appropriated in part 1 for epidemiology administration and for childhood lead program, the department shall maintain a public health drinking water unit and maintain enhanced efforts to monitor child blood lead levels. The public health drinking water unit shall ensure that appropriate investigations of potential health hazards occur for all community and noncommunity drinking water supplies where chemical exceedances of action levels, health advisory levels, or maximum contaminant limits are identified. The goals of the childhood lead program shall include improving the identification of affected children, the timeliness of case follow-up, and attainment of nurse care

management for children with lead exposure, and to achieve a longterm reduction in the percentage of children in this state with elevated blood lead levels.

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

Sec. 1182. (1) From the funds appropriated in part 1 for healthy homes program, no less than \$7,291,000.00 of general fund/general purpose funds and \$18,259,000.00 of federal funds shall be allocated for lead abatement of homes.

- (2) By April 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office on the expenditures and activities undertaken by the lead abatement program in the previous fiscal year from the funds appropriated in part 1 for the healthy homes program. The report shall include, but is not limited to, a funding allocation schedule, the expenditures by category of expenditure and by subcontractor, the revenues received, a description of program elements, the number of housing units abated of lead-based paint hazards, and a description of program accomplishments and progress.
- Sec. 1184. (1) From the funds appropriated in part 1 for

- emergency medical services program, the department shall, in coordination with the state emergency medical services coordination committee established under section 20915 of the public health code, 1978 PA 368, MCL 333.20915, medical control authorities, and other emergency medical services organizations, review, revise, and improve the process for the consideration, discussion, announcement, and implementation of any changes proposed by the department for emergency medical services system guidance, quidelines, or protocols.
 - (2) The goal to improve the current process shall be the effective and safe provision of emergency medical services.
 - (3) The revised and improved process shall include, but not be limited to, the following:
 - (a) Increased communication, transparency, and collaboration, to culminate in clarity of, and real-time access to, current department guidance, guidelines, or protocols, and the status of any changes being considered.
 - (b) Formal notification of proposed changes to guidance, guidelines, or protocols from the department to the state emergency medical services coordination committee no less than 30 days before implementation.
 - (c) Receipt by the department of a recommendation from the state emergency medical services coordination committee regarding the proposed changes to guidance, guidelines, or protocols before implementation by the department of the changes.
 - (4) The department shall provide access and status updates, including any proposed rules being considered through the administrative rules process, to the public on the department's website, which shall be updated by the department on a weekly

1 basis.

 (5) The department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies and policy offices, and the state budget director by April 15 of the current fiscal year on the findings of the review and include summaries of actions undertaken to identify, revise, and improve any weaknesses in the current process.

Sec. 1185. From the funds appropriated in part 1 for emergency medical services program, \$25,000.00 is allocated for a grant to fund a free family emergency readiness public expo event held in a county with a population between 193,000 and 194,000 according to the most recent federal decennial census. The purpose of the event shall be to educate local residents about preparedness in an emergency, disaster, or crisis including planning, assessing specific personal and household needs, and skills to cope, survive, recover, and prevail.

Sec. 1186. (1) From the funds appropriated in part 1 for emergency medical services program, the department shall allocate \$3,000,000.00 to establish a statewide stroke and STEMI system of care for time-sensitive emergencies. This system must be integrated into the statewide trauma care system within the emergency medical services system and must include at least all of the following:

- (a) The designation of facilities as stroke and STEMI facilities based on a verification that national certification or accreditation standards, as approved by the stroke advisory subcommittee and the STEMI advisory subcommittee as established under section 20910(1)(m) of the public health code, 1978 PA 368, MCL 333.20910, have been met.
 - (b) A requirement that a hospital is not required to be

designated as providing certain levels of care for stroke or STEMI.

- (c) The development and utilization of stroke and STEMI registries that utilize nationally recognized data platforms with confidentiality standards, as approved by the stroke advisory subcommittee and the STEMI advisory subcommittee as established under section 20910(1)(m) of the public health code, 1978 PA 368, MCL 333.20910.
- (2) By March 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies and policy offices, and the state budget office on the expenditures and activities undertaken by the statewide stroke and STEMI system of care program in the previous fiscal year from the funds appropriated under section 1186(1) of article 6 of 2021 PA 87. The report must include, but is not limited to, a funding allocation schedule, expenditures by category of expenditure and by vendor or grantee, and a description of program accomplishments and progress.
- (3) For the purposes of this section, "STEMI" means an ST-elevation myocardial infarction.

LOCAL HEALTH AND ADMINISTRATIVE SERVICES

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

333.17015.

Sec. 1221. If a county that has participated in a district health department or an associated arrangement with other local health departments takes action to cease to participate in that arrangement after October 1 of the current fiscal year, the department may assess a penalty from the local health department's operational accounts in an amount equal to no more than 6.25% of the local health department's essential local public health services funding. This penalty shall only be assessed to the local county that requests the dissolution of the health department.

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

- (2) Local public health departments shall be held to contractual standards for the services in subsection (1).
- (3) Distributions in subsection (1) shall be made only to counties that maintain local spending in the current fiscal year of at least the amount expended in fiscal year 1992-1993 for the services described in subsection (1).
- 28 (4) If a local health officer has an emergency order under29 section 2453 of the public health code, 1978 PA 368, MCL 333.2453,

- in effect as of October 1, 2022, the funds appropriated in part 1 for essential local public health services are unappropriated. This subsection does not apply if a county board of commissioners passes a nonbinding resolution by a record roll call vote to support any emergency orders the local health officer has in effect on October 1 of the current fiscal year.
 - (5) By February 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director on the planned allocation of the funds appropriated for essential local public health services.
 - (6) The department shall continue implementation of the distribution formula for the allocation of essential local public health services funding to local health departments as specified by section 1234 of article X of 2018 PA 207.
 - (7) From the funds appropriated in part 1 for essential local public health services, each local public health department is allocated not less than the amount allocated to that local public health department during the previous fiscal year.
 - (8) Distributions in subsection (1) for the second, third, and fourth quarterly allocations must be made only to counties that have submitted a request for the quarterly allocation that includes, from the county board of commissioners, a statement of approval of the local health department's quarterly budget for the essential local public health services funding.
 - Sec. 1225. The department shall work with the Michigan health endowment fund corporation established under section 653 of the nonprofit health care corporation reform act, 1980 PA 350, MCL

550.1653, to explore ways to fund and evaluate current and future policies and programs.

Sec. 1227. The department shall establish criteria for all funds allocated for health and wellness initiatives. The criteria must include a requirement that all programs funded be evidence-based and supported by research, include interventions that have been shown to demonstrate outcomes that lower cost and improve quality, and be designed for statewide impact. Preference must be given to programs that utilize the funding as match for additional resources, including, but not limited to, federal sources.

Sec. 1231. (1) From the funds appropriated for local health services, up to \$4,750,000.00 shall be allocated for grants to local public health departments to support PFAS response and emerging public health threat activities. A portion of the funding shall be allocated by the department in a collaborative fashion with local public health departments in jurisdictions experiencing PFAS contamination. The remainder of the funding shall be allocated to address infectious and vector-borne disease threats, and other environmental contamination issues such as vapor intrusion, drinking water contamination, and lead exposure. The funding shall be allocated to address issues including, but not limited to, staffing, planning and response, and creation and dissemination of materials related to PFAS contamination issues and other emerging public health issues and threats.

(2) By March 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office on actual expenditures in the previous fiscal year and planned spending in the current fiscal

1 year of the funds described in subsection (1), including recipient
2 entities, amount of allocation, general category of allocation, and
3 detailed uses.

Sec. 1232. The department may work to ensure that the United States Department of Defense reimburses the state for costs associated with PFAS and environmental contamination response at military training sites and support facilities.

Sec. 1233. General fund and state restricted fund appropriations in part 1 shall not be expended for PFAS and environmental contamination response where federal funding or private grant funding is available for the same expenditures.

Sec. 1239. The department shall participate in and give necessary assistance to the Michigan PFAS action response team (MPART) pursuant to Executive Order No. 2019-03. The department shall collaborate with MPART and other departments to carry out appropriate activities, actions, and recommendations as coordinated by MPART. Efforts shall be continuous to ensure that the department's activities are not duplicative with activities of another department or agency.

Sec. 1240. From the funds appropriated in part 1 for chronic disease control and health promotion administration, \$70,000.00 is allocated to support a rare disease advisory council and responsibilities of the council, which may include all of the following:

- (a) Developing a list of rare diseases.
- (b) Posting the list of rare diseases on the department'swebsite.
- 28 (c) Updating the list of rare diseases.
- 29 (d) Annually investigating and reporting to the legislature on

1 rare disease on the list, and including legislative recommendations in the report.

FAMILY HEALTH SERVICES

Sec. 1301. (1) Before April 1 of the current fiscal year, the department shall submit a report to the house and senate fiscal agencies and the state budget director on planned allocations from the amounts appropriated in part 1 for local MCH services, prenatal care outreach and service delivery support, family planning local agreements, and pregnancy prevention programs. Using applicable federal definitions, the report shall include information on all of the following:

- (a) Funding allocations.
- (b) Actual number of women, children, and adolescents served and amounts expended for each group for the previous fiscal year.
- (c) A breakdown of the expenditure of these funds between urban and rural communities.
- (2) The department shall ensure that the distribution of funds through the programs described in subsection (1) takes into account the needs of rural communities.
- (3) As used in this section, "rural" means a county, city, village, or township with a population of 30,000 or less, including those entities if located within a metropolitan statistical area.

Sec. 1303. The department shall not contract with an organization that provides elective abortions, abortion counseling, or abortion referrals, for services that are to be funded with state restricted or state general fund/general purpose funds appropriated in part 1 for family planning local agreements. An organization under contract with the department shall not

subcontract with an organization that provides elective abortions, abortion counseling, or abortion referrals, for services that are to be funded with state restricted or state general fund/general purpose funds appropriated in part 1 for family planning local agreements.

Sec. 1304. The department shall not use state restricted funds or state general funds, or allow grantees or subcontractors to use those funds, appropriated in part 1 in the pregnancy prevention program or family planning local agreements appropriation line items for abortion counseling, referrals, or services.

Sec. 1305. (1) From the funds appropriated in part 1 for family planning local agreements and the pregnancy prevention program, the department shall not contract with or award grants to an entity that engages in 1 or more of the activities described in section 1(1) of 2002 PA 360, MCL 333.1091, if the entity is located in a county or health district where family planning or pregnancy prevention services are provided by the county, the health district, or a qualified entity that does not engage in any of the activities described in section 1(1) of 2002 PA 360, MCL 333.1091.

(2) The department shall give priority to counties or health districts where no contracts or grants currently exist for family planning or pregnancy prevention services before contracting with or awarding grants to an entity that engages in 1 or more of the activities described in section 1(1) of 2002 PA 360, MCL 333.1091, if that entity is located in a county where family planning and pregnancy prevention services are provided by the county, the health district, or another qualified entity that does not engage in the activities described in section 1(1) of 2002 PA 360, MCL 333.1091.

- Sec. 1306. (1) From the funds appropriated in part 1 for the drinking water declaration of emergency, the department shall allocate funds to address needs in a city in which a declaration of emergency was issued because of drinking water contamination. These funds may support, but are not limited to, the following activities:
- 7 (a) Nutrition assistance, nutritional and community education,8 food bank resources, and food inspections.
 - (b) Epidemiological analysis and case management of individuals at risk of elevated blood lead levels.
- (c) Support for child and adolescent health centers,children's health care access program, and pathways to potentialprogramming.
- (d) Nursing services, breastfeeding education, evidence-based home visiting programs, intensive services, and outreach for children exposed to lead coordinated through local community mental health organizations.
- 18 (e) Department field operations costs.
- (f) Lead poisoning surveillance, investigations, treatment,and abatement.
- (g) Nutritional incentives provided to local residents throughthe double up food bucks expansion program.
- (h) Genesee County health department food inspectors toperform water testing at local food service establishments.
 - (i) Transportation related to health care delivery.
- 26 (j) Senior initiatives.
- 27 (k) Lead abatement contractor workforce development.
- (2) From the funds appropriated in part 1 for the drinkingwater declaration of emergency, the department shall allocate

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- \$300,000.00 for Revive Community Health Center for health support 1 services as the center pursues certification as a federally qualified health center. 3
 - (3) From the funds appropriated in part 1 for the drinking water declaration of emergency, the department shall allocate \$500,000.00 for rides to wellness through the Flint mass transportation authority.

8 Sec. 1307. From the funds appropriated in part 1 for prenatal care outreach and service delivery support, \$700,000.00 of TANF 9 10 revenue shall be allocated for a pregnancy and parenting support 11 services program, which must promote childbirth, alternatives to abortion, and grief counseling. The department shall establish a 12 program with a qualified contractor that will contract with 13 14 qualified service providers to provide free counseling, support, 15 and referral services to eligible women during pregnancy through 12 16 months after birth. As appropriate, the goals for client outcomes 17 shall include an increase in client support, an increase in 18 childbirth choice, an increase in adoption knowledge, an improvement in parenting skills, and improved reproductive health 19 through abstinence education. The contractor of the program shall 20 provide for program training, client educational material, program 21 marketing, and annual service provider site monitoring. The 22 23 department shall submit a report to the house and senate appropriations subcommittees on the department budget and the house 24 25 and senate fiscal agencies by April 1 of the current fiscal year on the number of clients served. 26

Sec. 1308. From the funds appropriated in part 1 for prenatal care outreach and service delivery support, not less than \$500,000.00 of funding shall be allocated for evidence-based

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programs to reduce infant mortality including nurse family partnership programs. The funds shall be used for enhanced support and education to nursing teams or other teams of qualified health professionals, client recruitment in areas designated as underserved for obstetrical and gynecological services and other high-need communities, strategic planning to expand and sustain programs, and marketing and communications of programs to raise awareness, engage stakeholders, and recruit nurses.

Sec. 1309. Funds appropriated for educational and other programs and services primarily pertaining to family planning or reproductive health services, or both, in any line item in section 116 of part 1 for family health services, shall be allocated by the department according to section 1 of 2002 PA 360, MCL 333.1091.

Sec. 1311. From the funds appropriated in part 1 for prenatal care outreach and service delivery support, not less than \$2,750,000.00 state general fund/general purpose funds shall be allocated for a rural home visit program. Equal consideration shall be given to all eligible evidence-based providers in all regions in contracting for rural home visitation services.

Sec. 1312. From the funds appropriated in part 1 for prenatal care and premature birth avoidance grant, the department shall allocate \$1,000,000.00 as a grant to help fulfill contract obligations between the department and a federal Healthy Start Program located in a county with a population between 650,000 and 660,000 according to the most recent federal decennial census. To be eligible to receive funding, the organization must be a partnership between various health agencies, and utilize a social impact bonding strategy approved by the department to enhance support to underserved populations for prenatal care and premature

1 birth avoidance.

Sec. 1313. (1) The department shall continue developing an outreach program on fetal alcohol syndrome services, targeting health promotion, prevention, and intervention.

- (2) The department shall explore federal grant funding to address prevention services for fetal alcohol syndrome and reduce alcohol consumption among pregnant women.
- (3) By February 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office on planned spending of appropriations within the department budget for fetal alcohol syndrome projects and services, including appropriation line item, agency or recipient entities, amount and purpose of allocation, and detailed uses. The report shall include a summary of outcomes accomplished by the funding investments and metrics used to determine outcomes, if available.

Sec. 1314. The department shall seek to enhance education and outreach efforts that encourage women of childbearing age to seek confirmation at the earliest indication of possible pregnancy and initiate continuous and routine prenatal care upon confirmation of pregnancy. The department shall seek to ensure that department programs, policies, and practices promote prenatal and obstetrical care by doing the following:

- (a) Supporting access to care.
- (b) Reducing and eliminating barriers to care.
- (c) Supporting recommendations for best practices.
- (d) Encouraging optimal prenatal habits such as prenatalmedical visits, use of prenatal vitamins, and cessation of use of

tobacco, alcohol, or drugs.

- (e) Tracking of birth outcomes to study improvements in the prevalence of neonatal substance exposure, fetal alcohol syndrome, and other preventable neonatal disease.
- (f) Tracking of maternal increase in healthy behaviors following childbirth.
- Sec. 1315. (1) From the funds appropriated in part 1 for dental programs, \$150,000.00 shall be allocated to the Michigan Dental Association for the administration of a volunteer dental program that provides dental services to the uninsured.
- (2) By February 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on health policy, the senate and house fiscal agencies, and the state budget office the number of individual patients treated, number of procedures performed, and approximate total market value of those procedures from the previous fiscal year.
- Sec. 1316. The department shall use revenue from mobile dentistry facility permit fees received under section 21605 of the public health code, 1978 PA 368, MCL 333.21605, to offset the costs of processing and issuing mobile dentistry facility permits.
- Sec. 1317. (1) From the funds appropriated in part 1 for dental programs, \$1,750,000.00 of general fund/general purpose revenue and any associated federal match shall be distributed to local health departments who partner with a qualified nonprofit provider of dental services for the purpose of providing high-quality dental homes for seniors, children, and adults enrolled in Medicaid, and low-income uninsured.
 - (2) In order to be considered a qualified nonprofit provider

1 of dental services, the provider must demonstrate the following:

- (a) An effective health insurance enrollment process for uninsured patients.
 - (b) An effective process of charging patients on a sliding scale based on the patient's ability to pay.
 - (c) Utilization of additional fund sources including, but not limited to, federal Medicaid matching funds.
- (3) Providers shall report to the department by September 30 of the current fiscal year on outcomes and performance measures for the program under this section including, but not limited to, the following:
- (a) The number of uninsured patients who visited a
 participating dentist over the previous year, broken down between
 adults and children.
- 15 (b) The number of patients assisted with health insurance
 16 enrollment, broken down between adults and children.
- - (d) The number of unique patient visits by center.
- (e) The number of unique Medicaid or Healthy Michigan planpatients served broken down by center.
- (f) The number of children, seniors, and veterans servedbroken down by center.
- (g) The total value of services rendered by the organizationbroken down by center.
- 26 (4) Within 15 days after receipt of the report required in 27 subsection (3), the department shall provide a copy of the report 28 to the senate and house appropriations subcommittees on the 29 department budget, the senate and house fiscal agencies, the senate

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1 and house policy offices, and the state budget office.

Sec. 1320. It is the intent of the legislature that funds appropriated in part 1 that may be expended for a public media campaign regarding publicly funded family planning or pregnancy prevention services shall not be used to communicate in that media campaign any message that implies, states, or can be interpreted to mean that abortion is a method of family planning or pregnancy prevention.

Sec. 1321. From the funds appropriated in part 1 for the Michigan model for health comprehensive health education curriculum in the family, maternal, and child health administration line item, the department may, in consultation with the department of education, the Michigan domestic and sexual violence prevention and treatment board, and the Michigan Coalition to End Domestic and Sexual Violence, redraft the curriculum for the "Growing Up & Staying Healthy" and "Healthy & Responsible Relationships" modules to include age-appropriate information about each of the following:

- (a) The importance of consent, setting and respecting personal boundaries, and the prevention of child sexual abuse as outlined in section 1505 of the revised school code, 1976 PA 451, MCL 380.1505, and consistent with the recommendations and guidelines set by the task force on the prevention of sexual abuse of children created under section 12b of the child protection law, 1975 PA 238, MCL 722.632b.
 - (b) The prevention of sexual assault and dating violence.
 - (c) The prevention of human trafficking.
- Sec. 1322. (1) The department shall provide a report by April

 15 of the current fiscal year to the house and senate
- 29 appropriations subcommittees on the department budget, the house

and senate fiscal agencies, the house and senate policy offices, and the state budget office on state immunization policy and practices. The report shall include all of the following items:

- (a) A list of recommended vaccinations.
- (b) The basis and rationale for inclusion of each listed item.
- (c) The indicators, measures, and performance outcomes that document improvement in human health for each listed item.
- (2) From the funds appropriated in part 1 for immunization program, \$50,000.00 shall be allocated for the purpose of publishing and printing the report described in subsection (1) in a summary format to be made available to the public as an informational brochure, provided free of charge through the department's health promotions clearinghouse to providers, groups, or individuals for free distribution.
- Sec. 1323. From the funds appropriated in part 1 for maternity home program, the department shall allocate \$4,000,000.00 for grants and other expenditures for safe housing and comprehensive supportive services without charge for pregnant women who are without a safe home and in need statewide, which must include access to health and prenatal care, parenting and life skill development, and services and education for a stable transition to independent living. The department shall provide grants of up to \$50,000.00 to support and expand existing maternity home housing and services programs as described under this section. The department shall conduct a statewide assessment to identify underserved communities in need of greater access to maternity home programs.
- 28 Sec. 1341. The department shall utilize income eligibility and verification guidelines established by the Food and Nutrition

Service agency of the United States Department of Agriculture in determining eligibility of individuals for the special supplemental nutrition program for women, infants, and children (WIC) as stated in current WIC policy.

Sec. 1342. From the funds appropriated in part 1 for family, maternal, and child health administration, \$500,000.00 shall be allocated for a school children's healthy exercise program to promote and advance physical health for school children in kindergarten through grade 8. The department shall recommend model 10 programs for sites to implement that incorporate evidence-based 11 best practices. The department shall grant the funds appropriated in part 1 for before- and after-school programs. The department 12 shall establish quidelines for program sites, which may include 13 14 schools, community-based organizations, private facilities, 15 recreation centers, or other similar sites. The program format 16 shall encourage local determination of site activities and shall 17 encourage local inclusion of youth in the decision-making regarding 18 site activities. Program goals shall include children experiencing improved physical health and access to physical activity 19 20 opportunities, the reduction of obesity, providing a safe place to play and exercise, and nutrition education. To be eligible to 21 participate, program sites shall provide a 20% match to the state 22 23 funding, which may be provided in full, or in part, by a corporation, foundation, or private partner. The department shall 24 25 seek financial support from corporate, foundation, or other private partners for the program or for individual program sites. 26

Sec. 1343. From the funds appropriated in part 1 for dental programs, the department shall allocate \$1,760,000.00 of state and local funds plus any private contributions received to support the

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program to establish and maintain a dental oral assessment program to provide assessments to school children as provided in section 9316 of the public health code, 1978 PA 368, MCL 333.9316.

Sec. 1344. Programs funded in the department budget in the previous fiscal year with federal title X family planning funds or federal social security act title V MCH block grant funds shall be funded in the current fiscal year with general fund/general purpose funds. For these programs, the department shall not contract with any direct or third-party vendor that provides abortion services.

Sec. 1345. From the funds appropriated in part 1 for maternal navigator pilot program, the department must establish not less than 2 geographically diverse maternal navigator pilot programs. Eligible maternal navigator pilot program grantees must be a nonprofit counseling or other similar nonprofit service organization that promotes childbirth and alternatives to abortion. The services provided by the maternal navigator pilot programs must include, but are not limited to, all of the following:

- (a) Referral services, and partial or full reimbursement, for counseling for victims of rape and other forms of abuse and violence that result in pregnancy.
- (b) Referral services, and partial or full reimbursement, for specialized substance use disorder services, including residential services.
- (c) Referral services, and partial or full reimbursement, to a hospital or health system for information and services for women of childbearing age who are seeking nutritional, prenatal, childbirth, and postnatal care and who are also in need of assistance with understanding recent advances in prenatal and postnatal medicines.
 - (d) Referral services, and partial or full reimbursement, for

counseling, emotional support services, genetic counseling, and other services to individuals and couples experiencing difficulties or having genetic concerns related to pregnancy or parenting.

Sec. 1346. (1) From the funds appropriated in part 1 for pregnancy resource centers, the department shall allocate \$1,500,000.00 as grants to pregnancy resource centers operating in the state. The department shall accept applications from pregnancy resource centers through December 31 of the current fiscal year and distribute the grant funds equally to each eligible pregnancy resource center applicant.

(2) As used in this section, "pregnancy resource centers" means private nonprofit organizations that promote childbirth and alternatives to abortion, provide referrals and information, and may also provide other services related to pregnancy or post-pregnancy.

Sec. 1347. The department shall not use state restricted funds or state general funds appropriated in part 1, or allow grantees or subcontractors to use those funds, for abortion counseling, referrals, or services, or for any activities regarding human cloning or research in which a human embryo or embryos are destroyed or discarded.

Sec. 1348. From the funds appropriated in part 1, the department shall submit a report by February 18 of the current fiscal year to the senate and house appropriations committees, the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices on any request for proposals issued by this state for the healthy moms healthy babies program and on any healthy moms healthy babies programs that are established.

Sec. 1349. Subject to federal approval, from the funds appropriated in part 1 for immunization program, the department shall allocate \$740,000.00 general fund/general purpose plus any available work project funds and federal match through an administered contract with oversight from health services administration and public health administration. The funds shall be used to support a statewide media campaign for improving this state's immunization rates.

CHILDREN'S SPECIAL HEALTH CARE SERVICES

Sec. 1360. The department may do 1 or more of the following:

- (a) Provide special formulas for eligible clients with specified metabolic and allergic disorders.
- 14 (b) Provide medical care and treatment to eligible patients15 with cystic fibrosis who are 21 years of age or older.
 - (c) Provide medical care and treatment to eligible patients with hereditary coagulation defects, commonly known as hemophilia, who are 21 years of age or older.
 - (d) Provide human growth hormone to eligible patients.
 - (e) Provide mental health care for mental health needs that result from, or are a symptom of, the individual's qualifying medical condition.
 - (f) Provide medical care and treatment to eligible patients with sickle cell disease who are 21 years of age or older.

Sec. 1361. From the funds appropriated in part 1 for medical care and treatment, the department may spend those funds for the continued development and expansion of telemedicine capacity to allow families with children in the children's special health care services program to access specialty providers more readily and in

a more timely manner. The department may spend funds to support chronic complex care management of children enrolled in the children's special health care services program to minimize hospitalizations and reduce costs to the program while improving outcomes and quality of life.

Sec. 1363. From the funds appropriated in part 1 for children's special health care services administration, the department shall allocate \$1,000,000.00 as a grant to an independent biomedical research and science education organization in a county with a population between 600,000 and 700,000 and in a city with a population over 185,000 according to the most recent federal decennial census to be used for matching federal funds, private and nonprofit grants, and private contributions.

AGING SERVICES AGENCY

Sec. 1402. The department may encourage the Food Bank Council of Michigan to collaborate directly with each area agency on aging and any other organizations that provide senior nutrition services to secure the food access of older adults.

Sec. 1403. (1) By February 1 of the current fiscal year, the aging services agency shall require each region to report to the aging services agency and to the legislature home-delivered meals waiting lists based upon standard criteria. Determining criteria shall include all of the following:

- (a) The recipient's degree of frailty.
- 26 (b) The recipient's inability to prepare his or her own meals27 safely.
 - (c) Whether the recipient has another care provider available.
- 29 (d) Any other qualifications normally necessary for the

recipient to receive home-delivered meals.

(2) Data required in subsection (1) shall be recorded only for individuals who have applied for participation in the homedelivered meals program and who are initially determined as likely to be eligible for home-delivered meals.

Sec. 1417. The department shall provide to the senate and house appropriations subcommittees on the department budget, senate and house fiscal agencies, and state budget director a report by March 30 of the current fiscal year that contains all of the following:

- (a) The total allocation of state resources made to each area agency on aging by individual program and administration.
- (b) Detailed expenditures by each area agency on aging by individual program and administration including both state-funded resources and locally funded resources.

Sec. 1421. From the funds appropriated in part 1 for community services, \$1,100,000.00 shall be allocated to area agencies on aging for locally determined needs.

Sec. 1425. The department shall coordinate with the department of licensing and regulatory affairs to ensure that, upon receipt of the order of suspension of a licensed adult foster care home, home for the aged, or nursing home, the department of licensing and regulatory affairs shall provide notice to the department, to the house and senate appropriations subcommittees on the department budget, and to the members of the house and senate that represent the legislative districts of the county in which the facility lies.

HEALTH SERVICES ADMINISTRATION

Sec. 1501. (1) From the funds appropriated in part 1 for

- health services administration, the department shall allocate

 \$200,000.00 to assess Medicaid reimbursement rates for medical,

 behavioral, and dental services relative to Medicare reimbursement
 rates for the same services.
 - (2) By July 1 of the current fiscal year, the department shall report on the findings of subsection (1) and submit the provider reimbursement rate comparison tables to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office. The provider reimbursement rate comparison tables shall include, but not be limited to, all of the following:
- (a) Medicaid reimbursement rates, as of October 1, 2022,
 itemized by current procedural terminology (CPT) code, by provider
 type.
- 16 (b) Medicare reimbursement rates for Michigan Locality 01, as
 17 of October 1 2022, itemized by CPT code, by provider type.
 - (c) Comparison between Medicaid and Medicare reimbursement rates by CPT code detailing the current Medicaid reimbursement rates as a percentage of the current Medicare reimbursement rates for Michigan Locality 01, by provider type.
 - (3) As used in this section, "provider type" means all of the following categories of procedure codes, fee screens, or other billing reimbursement information administered by the department:
- 25 (a) Ambulance.
- 26 (b) Chiropractors.
- (c) Dental.

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- 28 (d) Family planning.
- 29 (e) Genetic counselors.

- 1 (f) Hearing services and hearing aid dealers.
- 2 (q) Home health.
- 3 (h) Hospice.
- 4 (i) Independent diagnostic testing facilities.
- 5 (j) Laboratory.
- 6 (k) Maternal infant health program.
- 7 (l) Medical suppliers, including, orthotists, prosthetists, and8 durable medical equipment dealers.
- 9 (m) Non-physician behavioral health.
- 10 (n) Physicians, practitioners, and medical clinics.
- 11 (o) Portable X-ray suppliers.
- 12 (p) Private duty nurse.
- 13 (q) Occupational, physical, and speech therapies.
- 14 (r) Urgent care centers.
- 15 (s) Vision.
- Sec. 1502. By March 1 of the current fiscal year, the
 department shall report to the house and senate appropriations
 subcommittees on the department budget, the house and senate fiscal
- 19 agencies, the house and senate policy offices, and the state budget
- 20 office on the administrative expenditures of each Medicaid health
- 21 plan and include a breakout of the salary, benefits, and pension of
- 22 each executive-level staff, including the director, chief
- 23 executive, chief operating officer, and other members identified as
- 24 executive staff.
- 25 Sec. 1505. By March 1 of the current fiscal year, the
- 26 department shall submit a report to the senate and house
- 27 appropriations subcommittees on the department budget, the senate
- 28 and house fiscal agencies, and the state budget office on the
- 29 actual reimbursement savings and cost offsets that have resulted

from the funds appropriated in part 1 for the office of inspector general and third party liability efforts in the previous fiscal year.

Sec. 1507. From the funds appropriated in part 1 for office of inspector general, the inspector general shall audit and recoup inappropriate or fraudulent payments from Medicaid managed care organizations to health care providers. Unless authorized by federal or state law, the department shall not fine, temporarily halt operations of, disenroll as a Medicaid provider, or terminate a managed care organization or health care provider from providing services due to the discovery of an inappropriate payment found during the course of an audit.

Sec. 1511. On a monthly basis, the department shall work with the department of labor and economic opportunity to report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the utilization of workforce development programs by Healthy Michigan plan recipients through Michigan Works! The report shall include, but not be limited to, all of the following:

- (a) The number of recipients currently receiving employment supports and services through workforce development programs.
- (b) The total year-to-date number of recipients who have received employment supports and services through workforce development programs.
- (c) The number of recipients who secured employment in this state after receiving employment supports and services through workforce development programs.
- 29 (d) A summary of employment supports and services provided to

recipients through workforce development programs.

Sec. 1512. The updated Medicaid utilization and net cost report shall continue to separate nonclinical administrative costs from actual claims and encounter costs.

Sec. 1513. By September 30 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the implementation of recommendations made by the workgroup required by section 1513 of 2019 PA 67. The report shall include, but is not limited to, the following:

- (a) Updates on the recommendations being implemented.
- (b) Updates on the recommendations not being implemented and barriers preventing implementation.

Sec. 1514. From the funds appropriated in part 1 for health services administration, the department shall allocate \$300,000.00 general fund/general purpose revenue and any associated federal match to support a predictive modeling tool to improve provider billing accuracy and reduce fraud, waste, and abuse in the Medicaid program. The tool must provide a prepayment cost avoidance solution that uses statistical predictive modeling techniques to identify outlier claims.

Sec. 1515. A qualified job placement agency may request contact information from the department for Healthy Michigan plan recipients for the geographic region the agency services. This contact information shall not include personal health information or extensive personal identifying information. As used in this section, a "qualified job placement agency" means a regional Michigan Works! agency or another nonprofit, governmental, or

quasi-governmental body that provides job placement assistance as designated by the department.

Sec. 1517. By October 1 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office on the progress of the implementation of the specialty Medicaid managed care health plan for children in foster care, as required under section 1517 of article 6 of 2021 PA 87.

HEALTH SERVICES

Sec. 1601. The cost of remedial services incurred by residents of licensed adult foster care homes and licensed homes for the aged shall be used in determining financial eligibility for the medically needy. Remedial services include basic self-care and rehabilitation training for a resident.

Sec. 1605. The protected income level for Medicaid coverage determined pursuant to section 106(1) (b) (iii) of the social welfare act, 1939 PA 280, MCL 400.106, shall be 100% of the related public assistance standard.

Sec. 1606. For the purpose of guardian and conservator charges, the department may deduct up to \$83.00 per month as an allowable expense against a recipient's income when determining Medicaid eligibility and patient pay amounts.

Sec. 1607. (1) An applicant for Medicaid, whose qualifying condition is pregnancy, shall immediately be presumed to be eligible for Medicaid coverage unless the preponderance of evidence in her application indicates otherwise. The applicant who is qualified as described in this subsection shall be allowed to

select or remain with the Medicaid participating obstetrician of her choice.

- (2) All qualifying applicants shall be entitled to receive all medically necessary obstetrical and prenatal care without preauthorization from a health plan. All claims submitted for payment for obstetrical and prenatal care shall be paid at the Medicaid fee-for-service rate in the event a contract does not exist between the Medicaid participating obstetrical or prenatal care provider and the managed care plan. The applicant shall receive a listing of Medicaid physicians and managed care plans in the immediate vicinity of the applicant's residence.
- (3) In the event that an applicant, presumed to be eligible under subsection (1), is subsequently found to be ineligible, a Medicaid physician or managed care plan that has been providing pregnancy services to an applicant under this section is entitled to reimbursement for those services until they are notified by the department that the applicant was found to be ineligible for Medicaid.
- (4) If the preponderance of evidence in an application indicates that the applicant is not eligible for Medicaid, the department shall refer that applicant to the nearest public health clinic or similar entity as a potential source for receiving pregnancy-related services.
- (5) The department shall develop an enrollment process for pregnant women covered under this section that facilitates the selection of a managed care plan at the time of application.
- (6) The department shall mandate enrollment of women, whose qualifying condition for Medicaid is pregnancy, into Medicaid managed care plans.

(7) The department shall encourage physicians to provide women, whose qualifying condition for Medicaid is pregnancy, with a referral to a Medicaid participating dentist at the first pregnancy-related appointment.

Sec. 1611. (1) For care provided to Medicaid recipients with other third-party sources of payment, Medicaid reimbursement shall not exceed, in combination with such other resources, including Medicare, those amounts established for Medicaid-only patients. The Medicaid payment rate shall be accepted as payment in full. Other than an approved Medicaid co-payment, no portion of a provider's charge shall be billed to the recipient or any person acting on behalf of the recipient. This section does not affect the level of payment from a third-party source other than the Medicaid program. The department shall require a nonenrolled provider to accept Medicaid payments as payment in full.

- (2) Notwithstanding subsection (1), Medicaid reimbursement for hospital services provided to dual Medicare/Medicaid recipients with Medicare part B coverage only shall equal, when combined with payments for Medicare and other third-party resources, if any, those amounts established for Medicaid-only patients, including capital payments.
- Sec. 1615. (1) To minimize errors and overpayments, and to ensure the quality of actuarial rate setting of capitated rates, the department shall provide effective oversight and ensure the integrity of encounter claims submitted to the department by Medicaid health plans.
- (2) The department may require Medicaid health plans to provide medical records to support claims data, upon request by the department. This subsection shall not require the disclosure of

personal identifying information or any information that would be in violation of the health insurance portability and accountability act of 1996, Public Law 104-191.

- (3) It is the intent of the legislature that the department perform annual internal audits of Medicaid claims provided by Medicaid health plans and report the findings to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office. Internal audits performed under this subsection shall be conducted utilizing quantitative methodologies that provide for valid statistical results to include, but not be limited to, minimizing the impact of selection bias and insufficient sample sizes.
- (4) If an internal audit performed in accordance with this section identifies discrepancies in the quality of actuarial rates, the department shall develop and implement actuarial procedures to reconcile encounter claims data and shall provide for a publicly available explanation of these procedures on the department's website.
- Sec. 1616. (1) By October 1 of the current fiscal year, the department shall consult the federal government on potential allowable avenues to further utilize Community Health Workers (CHW), including doulas, as Medicaid providers and obtain federal Medicaid matching funds for CHW services. The potential expansion should be geographically broad based, evidence-based, and commensurate with CHW training.
- (2) By March 1 of the current fiscal year, the department
 shall report on the expansion of the use of CHW, including doulas,
 as Medicaid providers and any federal Medicaid match obtained for

- CHW services, as required under section 1616 of article 6 of 2021

 PA 87, to the chairs of the house and senate appropriations

 subcommittees on the department budget, the house and senate fiscal
- agencies, the house and senate policy offices, and the state budgetoffice.
 - (3) As used in this section, "doula" means a professional labor assistant who provides physical and emotional support during and after pregnancy.
- Sec. 1617. (1) The department shall evaluate the merits of 9 10 transitioning the Medicaid reimbursement methodology for federally 11 qualified health centers from a prospective payment system to an alternative payment methodology. The alternative payment 12 methodology must be a population-based capitated payment system 13 14 that is based on a per-patient per-month reimbursement for each 15 Medicaid recipient assigned to each federally qualified health 16 center.
 - (2) By September 30 of the current fiscal year, the department shall report on the findings of the evaluation required under subsection (1) to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office.
 - Sec. 1620. (1) For fee-for-service Medicaid claims, the professional dispensing fee for drugs indicated as specialty medications on the Michigan pharmaceutical products list is \$20.02 or the pharmacy's submitted dispensing fee, whichever is less.
- 26 (2) For fee-for-service Medicaid claims, for drugs not 27 indicated as specialty drugs on the Michigan pharmaceutical 28 products list, the professional dispensing fee for medications is 29 as follows:

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- (a) For medications indicated as preferred on the department's preferred drug list, \$10.80 or the pharmacy's submitted dispensing fee, whichever is less.
 - (b) For medications not on the department's preferred drug list, \$10.64 or the pharmacy's submitted dispensing fee, whichever is less.
 - (c) For medications indicated as nonpreferred on the department's preferred drug list, \$9.00 or the pharmacy's submitted dispensing fee, whichever is less.
 - (3) The department shall require a prescription co-payment for Medicaid recipients not enrolled in the Healthy Michigan plan or with an income less than 100% of the federal poverty level of \$1.00 for a generic drug or any drug indicated as preferred on the department's preferred drug list and \$3.00 for a brand-name drug not indicated as preferred on the department's preferred drug list, except as prohibited by federal or state law or regulation.
 - (4) The department shall require a prescription co-payment for Medicaid recipients enrolled in the Healthy Michigan plan with an income of at least 100% of the federal poverty level of \$4.00 for a generic drug or any drug indicated as preferred on the department's preferred drug list and \$8.00 for a brand-name drug not indicated as preferred on the department's preferred drug list, except as prohibited by federal or state law or regulation.
 - Sec. 1625. The department shall not enter into any contract with a Medicaid managed care organization that relies on a pharmacy benefit manager that does not do all of the following:
- (a) For pharmacies with not more than 7 retail outlets, utilizes a pharmacy reimbursement methodology of the national average drug acquisition cost plus a professional dispensing fee

- comparable to the applicable professional dispensing fee provided through section 1620. The pharmacy benefit manager or the involved pharmacy services administrative organization shall not receive any portion of the additional professional dispensing fee. The department shall identify the pharmacies this subdivision applies to and provide the list of applicable pharmacies to the Medicaid managed care organizations.
 - (b) For pharmacies with not more than 7 retail outlets, utilizes a pharmacy reimbursement methodology, when a national average drug acquisition cost price is not available, for brand drugs of the lesser of the wholesale acquisition cost, the average wholesale price less 16.7% plus a professional dispensing fee comparable to the applicable professional dispensing fee provided through section 1620, or the usual and customary charge by the pharmacy. The department shall identify the pharmacies this subdivision applies to and provide the list of applicable pharmacies to the Medicaid managed care organizations.
 - (c) For pharmacies with not more than 7 retail outlets, utilizes a pharmacy reimbursement methodology, when a national average drug acquisition cost price is not available, for generic drugs of the lesser of wholesale acquisition cost plus a professional dispensing fee comparable to the applicable professional dispensing fee provided through section 1620, average wholesale price less 30.0% plus a professional dispensing fee comparable to the applicable professional dispensing fee provided through section 1620, or the usual and customary charge by the pharmacy. The department shall identify the pharmacies this subdivision applies to and provide the list of applicable pharmacies to the Medicaid managed care organizations.

- (d) Reimburses for a legally valid claim at a rate not less than the rate in effect at the time the original claim adjudication as submitted at the point of sale.
- (e) Agrees to move to a transparent "pass-through" pricing model, in which the pharmacy benefit manager discloses the administrative fee as a percentage of the professional dispensing costs to the department.
- (f) Agrees to not create new pharmacy administration fees and to not increase current fees more than the rate of inflation. This subdivision does not apply to any federal rule or action that creates a new fee.
- (g) Agrees to not terminate an existing contract with a pharmacy with not more than 7 retail outlets for the sole reason of the additional professional dispensing fee authorized under this section.
- Sec. 1626. (1) By January 15 of the current fiscal year, each pharmacy benefit manager that receives reimbursements, either directly or through a Medicaid health plan, from the funds appropriated in part 1 for medical services must submit all of the following information to the department for the previous fiscal year:
 - (a) The total number of prescriptions that were dispensed.
- (b) The aggregate wholesale acquisition cost for each drug onits formulary.
 - (c) The aggregate amount of rebates, discounts, and price concessions that the pharmacy benefit manager received for each drug on its formulary. The amount of rebates shall include any utilization discounts the pharmacy benefit manager receives from a manufacturer.

- (d) The aggregate amount of administrative fees that the pharmacy benefit manager received from all pharmaceutical manufacturers.
 - (e) The aggregate amount identified in subdivisions (b) and(c) that were retained by the pharmacy benefit manager and did not pass through to the department or to the Medicaid health plan.
 - (f) The aggregate amount of reimbursements the pharmacy benefit manager pays to contracting pharmacies.
- (g) Any other information considered necessary by the department.
- (2) By March 1 of the current fiscal year, the department shall submit the information provided under subsection (1) to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office.
- 16 (3) Any nonaggregated information submitted under this section 17 shall be confidential and shall not be disclosed to any person by 18 the department. Such information is not considered a public record 19 of the department.
 - Sec. 1627. By March 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the house and senate policy offices on both of the following:
 - (a) The cost per Medicaid prescription for the fee-for-service population and separately the cost per Medicaid prescription for the managed care population for the fiscal years ending September 30, 2017 through the previous fiscal year.
 - (b) Projected cost per Medicaid prescription for the fee-for-

service population and projected cost per Medicaid prescription forthe managed care population for the current fiscal year.

Sec. 1629. The department shall utilize maximum allowable cost pricing for generic drugs that is based on wholesaler pricing to providers that is available from at least 2 wholesalers who deliver in this state.

Sec. 1631. (1) The department shall require co-payments on dental, podiatric, and vision services provided to Medicaid recipients, except as prohibited by federal or state law or regulation.

- (2) Except as otherwise prohibited by federal or state law or regulation, the department shall require Medicaid recipients not enrolled in the Healthy Michigan plan or with an income less than 100% of the federal poverty level to pay not less than the following co-payments:
 - (a) Two dollars for a physician office visit.
- (b) Three dollars for a hospital emergency room visit.
- 18 (c) Fifty dollars for the first day of an inpatient hospital19 stay.
 - (d) Two dollars for an outpatient hospital visit.
- 21 (3) Except as otherwise prohibited by federal or state law or regulation, the department shall require Medicaid recipients
 23 enrolled in the Healthy Michigan plan with an income of at least
 24 100% of the federal poverty level to pay the following co-payments:
 - (a) Four dollars for a physician office visit.
 - (b) Eight dollars for a hospital emergency room visit.
- (c) One hundred dollars for the first day of an inpatienthospital stay.
- 29 (d) Four dollars for an outpatient hospital visit or any other

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medical provider visit to the extent allowed by federal or state 1 law or regulation.

Sec. 1641. An institutional provider that is required to submit a cost report under the Medicaid program shall submit cost reports completed in full within 5 months after the end of its fiscal year.

Sec. 1644. (1) From the funds appropriated in part 1, the department shall continue the direct care wage increase to direct care workers employed by skilled nursing facilities for the current fiscal year. This funding must include all costs incurred by the employer, including payroll taxes, due to the wage increase. As used in this subsection, "direct care workers" means a registered professional nurse, licensed practical nurse, competency-evaluated nursing assistant, and respiratory therapist.

(2) From the funds appropriated in part 1, the department shall continue the direct care wage increase to direct care workers employed by licensed adult foster care facilities and licensed homes for the aged that provide Medicaid-funded fee-for-service personal care services that were not eligible for any direct care worker pay adjustment under Medicaid-funded managed care. This funding must include all costs incurred by the employer, including payroll taxes, due to the wage increase.

Sec. 1645. (1) The department shall update the Medicaid provider manual policy for the class I nursing facility current asset value bed limit to use a rolling 15-year history of new construction when establishing a current asset value bed limit for the fiscal year beginning on October 1, 2022.

(2) It is the intent of the legislature that, for the fiscal year beginning October 1, 2023 and subsequent fiscal years, the

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increase in the current asset value bed limit based on the rolling
formula 15-year history of new construction shall not exceed 4% of the
previous fiscal year's limit.

Sec. 1646. (1) From the funds appropriated in part 1 for long-term care services, the department shall continue to administer a nursing facility quality measure initiative program. The initiative shall be financed through the quality assurance assessment for nursing homes and hospital long-term care units, and the funds shall be distributed according to the following criteria:

- (a) The department shall award more dollars to nursing facilities that have a higher CMS 5-star quality measure domain rating, then adjusted to account for both positive and negative aspects of a patient satisfaction survey.
- (b) A nursing facility with a CMS 5-star quality measure domain star rating of 1 or 2 must file an action plan with the department describing how it intends to use funds appropriated under this section to increase quality outcomes before funding shall be released.
- (c) The total incentive dollars must reflect the following Medicaid utilization scale:
- (i) For nursing facilities with a Medicaid participation rate
 of above 63%, the facility shall receive 100% of the incentive
 payment.
- 24 (ii) For nursing facilities with a Medicaid participation rate 25 between 50% and 63%, the facility shall receive 75% of the 26 incentive payment.
- (iii) For nursing facilities with a Medicaid participation rate
 of less than 50%, the facility shall receive a payment
 proportionate to their Medicaid participation rate.

- (iv) For nursing facilities not enrolled in Medicaid, the facility shall not receive an incentive payment.
 - (d) Facilities designated as special focus facilities are not eligible for any payment under this section.
 - (e) Number of licensed beds.
- (2) The department and nursing facility representatives shall evaluate the quality measure incentive program's effectiveness on quality, measured by the change in the CMS 5-star quality measure domain rating since the implementation of quality measure incentive program. By March 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices on the findings of the evaluation.
- Sec. 1647. If a nursing home or hospital long-term care unit was overcharged for the quality assurance assessment during either the fiscal year ending September 30, 2018 or the fiscal year ending September 20, 2019, then, by no later than October 15 of the current fiscal year, the nursing home or hospital long-term care unit may request a retroactive recalculation and refund of the quality assurance assessment. By November 15 of the current fiscal year, the department shall issue the refunds and submit a report on the number of retroactive recalculation requests submitted by a nursing home or hospital long-term care unit and the status and amount of any refunds paid to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget office.
- Sec. 1657. (1) Reimbursement for Medicaid to screen and

- stabilize a Medicaid recipient, including stabilization of a

 psychiatric crisis, in a hospital emergency room shall not be made

 contingent on obtaining prior authorization from the recipient's

 HMO. If the recipient is discharged from the emergency room, the

 hospital shall notify the recipient's HMO within 24 hours of the

 diagnosis and treatment received.
 - (2) If the treating hospital determines that the recipient will require further medical service or hospitalization beyond the point of stabilization, that hospital shall receive authorization from the recipient's HMO prior to admitting the recipient.
 - (3) Subsections (1) and (2) do not require an alteration to an existing agreement between an HMO and its contracting hospitals and do not require an HMO to reimburse for services that are not considered to be medically necessary.
 - Sec. 1662. (1) The department shall ensure that an external quality review of each contracting HMO is performed that results in an analysis and evaluation of aggregated information on quality, timeliness, and access to health care services that the HMO or its contractors furnish to Medicaid beneficiaries.
 - (2) The department shall require Medicaid HMOs to provide EPSDT utilization data through the encounter data system, and HEDIS well child health measures in accordance with the National Committee for Quality Assurance prescribed methodology.
 - (3) The department shall provide a copy of the analysis of the Medicaid HMO annual audited HEDIS reports and the annual external quality review report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget director, within 30 days after the department's receipt of the final reports from the contractors.

- Sec. 1670. (1) The appropriation in part 1 for the MIChild 1 program is to be used to provide comprehensive health care to all 2 children under age 19 who reside in families with income at or 3 below 212% of the federal poverty level, who are uninsured and have 4 5 not had coverage by other comprehensive health insurance within 6 6 months of making application for MIChild benefits, and who are 7 residents of this state. The department shall develop detailed 8 eligibility criteria through the health services administration public concurrence process, consistent with the provisions of this 9 10 part and part 1.
 - (2) The department may provide up to 1 year of continuous eligibility to children eligible for the MIChild program unless the family fails to pay the monthly premium, a child reaches age 19, or the status of the children's family changes and its members no longer meet the eligibility criteria as specified in the state plan.
 - (3) The department may make payments on behalf of children enrolled in the MIChild program as described in the MIChild state plan approved by the United States Department of Health and Human Services, or from other medical services.
 - Sec. 1673. The department may establish premiums for MIChild eligible individuals in families with income at or below 212% of the federal poverty level. The monthly premiums shall be \$10.00 per month.
- Sec. 1677. The MIChild program shall provide, at a minimum, all benefits available under the Michigan benchmark plan that are delivered through contracted providers and consistent with federal law, including, but not limited to, the following medically necessary services:

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- (a) Inpatient mental health services, other than substance use disorder treatment services, including services furnished in a state-operated mental hospital and residential or other 24-hour therapeutically planned structured services.
 - (b) Outpatient mental health services, other than substance use disorder services, including services furnished in a stateoperated mental hospital and community-based services.
- (c) Durable medical equipment and prosthetic and orthotic devices. 9
- 10 (d) Dental services as outlined in the approved MIChild state 11 plan.
- (e) Substance use disorder treatment services that may include 12 inpatient, outpatient, and residential substance use disorder 13 14 treatment services.
 - (f) Care management services for mental health diagnoses.
- 16 (q) Physical therapy, occupational therapy, and services for 17 individuals with speech, hearing, and language disorders.
 - (h) Emergency ambulance services.
- 19 Sec. 1682. (1) In addition to the appropriations in part 1, 20 the department is authorized to receive and spend penalty money 21 received as the result of noncompliance with Medicaid certification regulations. Penalty money, characterized as private funds, 22 23 received by the department shall increase authorizations and 24 allotments in the long-term care accounts.
- 25 (2) Any unexpended penalty money, at the end of the year, shall carry forward to the following year. 26
- 27 Sec. 1692. (1) The department is authorized to pursue reimbursement for eligible services provided in Michigan schools 28 29 from the federal Medicaid program. The department and the state

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- budget director are authorized to negotiate and enter into 1 agreements, together with the department of education, with local 2 and intermediate school districts regarding the sharing of federal 3 Medicaid services funds received for these services. The department
- is authorized to receive and disburse funds to participating school 6 districts pursuant to such agreements and state and federal law.
 - (2) From the funds appropriated in part 1, the department is authorized to do all of the following:
 - (a) Finance activities within the health services administration related to this project.
- 11 (b) Reimburse participating school districts pursuant to the fund-sharing ratios negotiated in the state-local agreements 12 authorized in subsection (1). 13
- 14 (c) Offset general fund costs associated with the Medicaid 15 program.
- 16 Sec. 1693. The special Medicaid reimbursement appropriation in 17 part 1 may be increased if the department submits a Medicaid state 18 plan amendment pertaining to this line item at a level higher than the appropriation. The department is authorized to appropriately 19 20 adjust financing sources in accordance with the increased 21 appropriation.
- 22 Sec. 1694. From the funds appropriated in part 1 for special Medicaid reimbursement, \$1,121,400.00 of general fund/general 23 24 purpose revenue and any associated federal match shall be 25 distributed for poison control services to an academic health care system that has a high indigent care volume. 26
- 27 Sec. 1697. The department shall require that Medicaid health plans administering Healthy Michigan plan benefits maintain a 28 29 network of dental providers in sufficient numbers, mix, and

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1 geographic locations throughout their respective service areas in
2 order to provide adequate dental care for Healthy Michigan plan
3 enrollees.

Sec. 1698. From the funds appropriated in part 1 for dental services, the adult dental fee-for-service reimbursement rates shall be increased by 100%.

Sec. 1699. (1) The department may make separate payments in the amount of \$45,000,000.00 directly to qualifying hospitals serving a disproportionate share of indigent patients and to hospitals providing GME training programs. If direct payment for GME and DSH is made to qualifying hospitals for services to Medicaid recipients, hospitals shall not include GME costs or DSH payments in their contracts with HMOs.

14 (2) The department shall allocate \$45,000,000.00 in DSH
15 funding using the distribution methodology used in fiscal year
16 2003-2004.

Sec. 1700. By December 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on the distribution of funding provided, and the net benefit if the special hospital payment is not financed with general fund/general purpose revenue, to each eligible hospital during the previous fiscal year from the following special hospital payments:

- (a) DSH, separated out by unique DSH pool.
- 26 (b) GME.

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- (c) Special rural hospital payments provided under section1802(2) of this part.
- 29 (d) Lump-sum payments to rural hospitals for obstetrical care

provided under section 1802(1) of this part.

 Sec. 1702. From the funds appropriated in part 1, the department shall provide a 15% rate increase for private duty nursing services for Medicaid beneficiaries under the age of 21. These additional funds must be used to attract and retain highly qualified registered nurses and licensed practical nurses to provide private duty nursing services so that medically frail children can be cared for in the most homelike setting possible.

Sec. 1704. (1) From the funds appropriated in part 1 for health plan services, the department shall maintain the Medicaid adult dental benefit for pregnant women enrolled in a Medicaid program.

- (2) By April 15 of the current fiscal year, the department shall report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office on the following:
- (a) The number of pregnant women enrolled in Medicaid who visited a dentist over the previous fiscal year.
- (b) The number of dentists statewide who participate in providing dental services to pregnant women enrolled in Medicaid.

Sec. 1757. The department shall obtain proof from all Medicaid recipients that they are United States citizens or otherwise legally residing in this country and that they are residents of this state before approving Medicaid eligibility.

Sec. 1763. Upon expiration of contract no. 071b7700073, the department shall issue an RFP for a 3-year contract for actuarial services, including, but not limited to, capitation rate setting for Medicaid and the Healthy Michigan plan. The department shall notify the senate and house appropriations subcommittees on the

department budget, the senate and house fiscal agencies, and the senate and house policy offices on what vendors submitted bids for the contract, which vendor received the contract, the evaluation process, and the criteria used by the department in awarding the contract for actuarial services.

Sec. 1764. The department shall annually certify whether rates paid to Medicaid health plans and specialty PIHPs are actuarially sound in accordance with federal requirements and shall provide a copy of the rate certification and approval of rates paid to Medicaid health plans and specialty PIHPs for any fiscal year within 10 business days after certification to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office. Following the rate certification, the department shall ensure that no new or revised state Medicaid policy bulletin that is promulgated materially impacts the capitation rates that have been certified.

Sec. 1775. (1) By March 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on progress in implementing the waiver to implement managed care for individuals who are eligible for both Medicare and Medicaid, known as MI Health Link, including any planned expansion into other geographic regions and any problems and potential solutions as identified by the ombudsman described in subsection (2).

(2) The department shall ensure the existence of an ombudsman program that is not associated with any project service manager or provider to assist MI Health Link beneficiaries with navigating complaint and dispute resolution mechanisms and to identify

problems in the demonstrations and in the complaint and dispute
resolution mechanisms.

Sec. 1788. From the funds appropriated in part 1, the department shall provide Medicaid reimbursement rates, including Medicaid reimbursements from the ambulance provider quality assurance assessment, for ground ambulance services at not less than 100% of the Medicare rates for Locality 01 for those services in effect on the date the services are provided to eligible Medicaid recipients.

Sec. 1790. The department shall maintain the current practitioner rates paid for current procedural terminology (CPT) codes 90791 through 90899 for psychiatric procedures through Medicaid fee-for-service and through the comprehensive Medicaid health plans for psychiatric procedures provided for Medicaid recipients under the age of 21.

Sec. 1791. From the funds appropriated in part 1 for health plan services and physician services, the department shall provide Medicaid reimbursement rates for neonatal services at 100% of the Medicare rate received for those services in effect on the date the services are provided to eligible Medicaid recipients. The current procedural terminology (CPT) codes that are eligible for this reimbursement rate increase are 99468, 99469, 99471, 99472, 99475, 99476, 99477, 99478, 99479, and 99480.

Sec. 1792. By April 30 of the current fiscal year, the department shall evaluate pharmacy encounter data through the first 2 quarters of the fiscal year to determine, in consultation with the Medicaid health plans, if rates must be recertified. By May 30 of the current fiscal year, the department shall report the evaluation results to the senate and house appropriations

subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, the state budget office, and the Medicaid health plans.

Sec. 1801. From the funds appropriated in part 1 for physician services and health plan services, the department shall continue the increase to Medicaid rates for primary care services provided only by primary care providers. Providers performing a service and whose primary practice is as a non-primary-care subspecialty are not eliqible for the increase. The department shall establish policies that most effectively limit the increase to primary care providers for primary care services only. As used in this section, "primary care provider" means a physician, or a practitioner working in collaboration with a physician, who is either licensed under part 170 or part 175 of the public health code, 1978 PA 368, MCL 333.17001 to 333.17097 and 333.17501 to 333.17556, and working as a primary care provider in general practice or board-eligible or certified with a specialty designation of family medicine, general internal medicine, or pediatric medicine, or a provider who provides the department with documentation of equivalency. Sec. 1802. (1) From the funds appropriated in part 1 for

hospital services and therapy, \$7,995,200.00 in general fund/general purpose revenue shall be provided as lump-sum payments to noncritical access hospitals that qualified for rural hospital access payments in fiscal year 2013-2014 and that provide obstetrical care in the current fiscal year. Payment amounts shall be based on the volume of obstetrical care cases and newborn care cases for all such cases billed by each qualified hospital in the most recent year for which data is available. Payments shall be made by January 1 of the current fiscal year.

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- (2) From the funds appropriated in part 1 for hospital services and therapy and Healthy Michigan plan, \$13,904,800.00 in general fund/general purpose revenue and any associated federal match shall be awarded as rural access payments to noncritical access hospitals that meet criteria established by the department for services to low-income rural residents. One of the reimbursement components of the distribution formula shall be assistance with labor and delivery services. The department shall ensure that the rural access payments described in this subsection 10 are distributed in a manner that ensures that a hospital does not 11 receive more than 10.0% of the total rural access funding 12 referenced in this subsection.
 - (3) The methodology for distribution under subsection (2) and its applicable data that are used to determine the payment amounts are provided to each hospital by August 1 of the current fiscal year. The department shall publish the distribution of payments for the current fiscal year and the previous fiscal year.
 - Sec. 1804. (1) The department shall utilize the federal public assistance reporting information system to identify Medicaid recipients who are veterans and who may be eliqible for federal veterans' health care benefits or other benefits. The department shall identify the specific outcomes and performance reporting requirements described in this section. The department shall acquire all of the following information by January 1 of the current fiscal year and report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices on the following:
 - (a) The number of veterans identified by the department

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through eligibility determinations.

- (b) The number of veterans referred to the department of military and veterans affairs.
- (c) The number of referrals made by the department that were contacted by the department of military and veterans affairs.
- (d) The number of referrals made by the department that were eligible for veterans health care benefits or other benefits.
- (e) The specific actions and efforts undertaken by the department and the department of military and veterans affairs to identify female veterans who are applying for public assistance benefits, but who are eligible for veterans benefits.
- (2) By October 1 of the current fiscal year, the department shall change the public assistance application form from asking whether the prospective applicant was a veteran to asking whether the applicant had ever served in the military.
- (3) This section does not prohibit the department from entering into interagency agreements with any other public department or agency in this state in order to obtain the information detailed in subsection (1).
- Sec. 1810. In advance of the annual rate setting development, Medicaid health plans shall be given at least 60 days to dispute and correct any discarded encounter data before rates are certified. The department shall notify each contracting Medicaid health plan of any encounter data that have not been accepted for the purposes of rate setting.
- Sec. 1812. By June 1 of the current fiscal year, and using the most recent available cost reports, the department shall complete a report of all direct and indirect costs associated with residency training programs for each hospital that receives funds

appropriated in part 1 for graduate medical education or through the MiDocs consortium. The report shall be submitted to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget office.

Sec. 1820. (1) In order to avoid duplication of efforts, the department shall utilize applicable national accreditation review criteria to determine compliance with corresponding state requirements for Medicaid health plans that have been reviewed and accredited by a national accrediting entity for health care services.

- (2) The department shall continue to comply with state and federal law and shall not initiate an action that negatively impacts beneficiary safety.
- (3) As used in this section, "national accrediting entity" means the National Committee for Quality Assurance, the URAC, formerly known as the Utilization Review Accreditation Commission, or other appropriate entity, as approved by the department.

Sec. 1837. The department shall continue, and expand where appropriate, utilization of telemedicine and telepsychiatry as strategies to increase access to services for Medicaid recipients.

Sec. 1846. From the funds appropriated in part 1 for graduate medical education, the department shall distribute the funds with an emphasis on the following health care workforce goals:

- (a) The encouragement of the training of physicians in specialties, including primary care, that are necessary to meet the future needs of residents of this state.
- (b) The training of physicians in settings that include ambulatory sites and rural locations.
 - (c) The training of practitioners providing pediatric

psychiatry services.

 Sec. 1850. The department may allow Medicaid health plans to assist with maintaining eligibility through outreach activities to ensure continuation of Medicaid eligibility and enrollment in managed care. This may include mailings, telephone contact, or face-to-face contact with beneficiaries enrolled in the individual Medicaid health plan. Health plans may offer assistance in completing paperwork for beneficiaries enrolled in their plan.

Sec. 1851. From the funds appropriated in part 1 for adult home help services, the department shall allocate \$150,000.00 state general fund/general purpose revenue plus any associated federal match to develop and deploy a mobile electronic visit verification solution to create administrative efficiencies, reduce error, and minimize fraud. The development of the solution shall be predicated on input from the results of the 2017 stakeholder survey.

Sec. 1854. The funds appropriated in part 1 for program of all-inclusive care for the elderly (PACE) must support a current fiscal year enrollment cap that is not less than 7,288.

Sec. 1855. From the funds appropriated in part 1 for program of all-inclusive care for the elderly (PACE), to the extent that funding is available in the PACE line item and unused program slots are available, the department may do the following:

- (a) Increase the number of slots for an already-established local PACE program if the local PACE program has provided appropriate documentation to the department indicating its ability to expand capacity to provide services to additional PACE clients.
- (b) Suspend the 10 member per month individual PACE program enrollment increase cap in order to allow unused and unobligated slots to be allocated to address unmet demand for PACE services.

Sec. 1856. (1) From the funds appropriated in part 1 for 1 2 hospice services, \$5,000,000.00 shall be expended to provide room and board for Medicaid recipients who meet hospice eligibility 3 4 requirements and receive services at Medicaid enrolled hospice 5 residences in this state. The department shall distribute funds 6 through grants based on the total beds located in all eligible 7 residences that have been providing these services as of October 1, 8 2017. The initial grant amount must be established at a daily rate of \$270.00 for each Medicaid-approved recipient who is receiving 9 10 hospice care. Any eligible grant applicant may inform the 11 department of their request to reduce the grant amount allocated 12 for their residence and the funds shall be distributed proportionally to increase the total grant amount of the remaining 13 14 grant-eligible residences. Grant amounts shall be paid out monthly 15 with 1/12 of the total grant amount distributed each month to the 16 grantees.

- (2) By September 15 of the current fiscal year, each Medicaidenrolled hospice with a residence that receives funds under this section shall provide a report to the department on the utilization of the grant funding provided in subsection (1). The report shall be provided in a format prescribed by the department and shall include the following:
 - (a) The number of patients served.
 - (b) The number of days served.
 - (c) The daily room and board rates for the patients served.
- 26 (d) If there is not sufficient funding to cover the total room
 27 and board need, the number of patients who did not receive care due
 28 to insufficient grant funding.
- 29 (3) If there is funding remaining at the end of the current

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fiscal year, the Medicaid-enrolled hospice with a residence shall
return funding to the state.

Sec. 1858. By April 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget and the senate and house fiscal agencies on all of the following elements related to the current Medicaid pharmacy carve-out of pharmaceutical products as provided for in section 109h of the social welfare act, 1939 PA 280, MCL 400.109h:

- (a) The number of prescriptions paid by the department duringthe previous fiscal year.
- 12 (b) The total amount of expenditures for prescriptions paid by
 13 the department during the previous fiscal year.
- (c) The number of and total expenditures for prescriptions
 paid for by the department for generic equivalents during the
 previous fiscal year.

Sec. 1859. The department shall partner with the Michigan Association of Health Plans (MAHP) and Medicaid health plans to develop and implement strategies for the use of information technology services for Medicaid research activities. The department shall make available state medical assistance program data, including Medicaid behavioral data, to MAHP and Medicaid health plans or any vendor considered qualified by the department for the purpose of research activities consistent with this state's goals of improving health; increasing the quality, reliability, availability, and continuity of care; and reducing the cost of care for the eligible population of Medicaid recipients.

appropriations subcommittees, the senate and house fiscal agencies, and the state budget office on uncollected co-pays and premiums in the Healthy Michigan plan. The report shall include information on the number of participants who have not paid their co-pays and premiums, the total amount of uncollected co-pays and premiums, and steps taken by the department and health plans to ensure greater collection of co-pays and premiums.

Sec. 1862. From the funds appropriated in part 1, the department shall maintain payment rates for Medicaid obstetrical services at 95% of Medicare levels effective October 1, 2014.

Sec. 1867. (1) The department shall continue a workgroup that includes psychiatrists, other relevant prescribers, and pharmacists to identify best practices and to develop a protocol for psychotropic medications. Any changes proposed by the workgroup shall protect a Medicaid beneficiary's current psychotropic pharmaceutical treatment regimen by not requiring a physician currently prescribing any treatment to alter or adjust that treatment.

(2) By March 1 of the current fiscal year, the department shall provide the workgroup's recommendations to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office.

Sec. 1869. The department shall allocate \$100.00 general fund/general purpose revenue, any local funding, and any federal matching revenue, to a community-based residency training program, accredited by the Accreditation Council for Graduate Medical Education (ACGME) and operated by community-based organizations such as federally qualified health centers, which operates from the local funds appropriated in this section, to administer a

- community-based residency training program. The funds appropriated in this section may be allocated and administered on a local level to communities with high disparities related to COVID-19 and high infant mortality rates for community and public health-based training programs for providers in family medicine. The community-based residency training program shall have a particular emphasis on addressing local psychiatric issues, local health disparities, and local maternal child health issues. The department may secure federal matching funds on local funds allocated in this section to serve Medicaid and uninsured individuals through this community-based residency training program.
 - Sec. 1870. (1) From the funds appropriated in part 1 for hospital services and therapy, the department shall appropriate \$6,400,000.00 in general fund/general purpose revenue plus any contributions from public entities, up to \$5,000,000.00, and any associated federal match to the MiDocs consortium to create new primary care residency slots in underserved communities. The new primary care residency slots must be in 1 of the following specialties: family medicine, general internal medicine, general pediatrics, general OB-GYN, psychiatry, or general surgery.
 - (2) The department shall seek any necessary approvals from CMS to allow the department to implement the program described in this section.
 - (3) Assistance with repayment of medical education loans, loan interest payments, or scholarships provided by MiDocs shall be contingent upon a minimum 2-year commitment to practice in an underserved community in this state post-residency and an agreement to forego any sub-specialty training for at least 2 years post-residency with the exception of a child and adolescent psychiatry

- 1 fellowship which must be integrated with a psychiatry residency
 2 training program in a MiDocs affiliated institution.
- 3 (4) The MiDocs shall work with the department to integrate the 4 Michigan inpatient psychiatric admissions discussion (MIPAD) 5 recommendations and, when possible, prioritize training 6 opportunities in state psychiatric hospitals and community mental 7 health organizations.
 - (5) The department shall maintain the MiDocs initiative advisory council to help support implementation of the program described in this section, and provide oversight. The advisory council shall be composed of the MiDocs consortium, the Michigan Area Health Education Centers, the Michigan Primary Care Association, the Michigan Center for Rural Health, the Michigan Academy of Family Physicians, and any other appointees designated by the department.
- 16 (6) By September 1 of the current fiscal year, MiDocs shall
 17 report to the senate and house appropriations subcommittees on the
 18 department budget, the senate and house fiscal agencies, the senate
 19 and house policy offices, and the state budget office, on the
 20 following:
 - (a) Audited financial statement of per-resident costs.
 - (b) Education and clinical quality data.
- (c) Roster of trainees, including areas of specialty andlocations of training.
 - (d) Medicaid revenue by training site.
- (7) Outcomes and performance measures for this programinclude, but are not limited to, the following:
- (a) Increasing this state's ability to recruit, train, andretain primary care physicians and other select specialty

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physicians in underserved communities.

- (b) Maximizing training opportunities with community health centers, rural critical access hospitals, solo or group private practice physician practices, schools, and other community-based clinics, in addition to required rotations at inpatient hospitals.
- (c) Increasing the number of residency slots for family medicine, general internal medicine, general pediatrics, general OB-GYN, psychiatry, and general surgery.
- (8) Unexpended and unencumbered funds up to a maximum \$6,400,000.00 in general fund/general purpose revenue plus any contributions from public entities, up to \$5,000,000.00, and any associated federal match remaining in accounts appropriated in part 1 for hospital services and therapy are designated as work project appropriations, and any unencumbered or unallotted funds shall not lapse at the end of the fiscal year and shall be available for expenditures for the MiDocs consortium to create new primary care residency slots in underserved communities under this section until the work project has been completed. All of the following are in compliance with section 451a(1) of the management and budget act, 1984 PA 431, MCL 18.1451a:
 - (a) The purpose of the work project is to fund the cost of the MiDocs consortium to create new primary care residency slots in underserved communities.
 - (b) The work project will be accomplished by contracting with the MiDocs consortium to oversee the creation of new primary care residency slots.
- (c) The total estimated completion cost of the work project is\$20,200,000.00.
- 29 (d) The tentative completion date is September 30, 2027.

Sec. 1871. The funds appropriated in part 1 for the Healthy Michigan plan healthy behaviors incentives program shall only provide reductions in cost-sharing responsibilities and shall not include other financial rewards such as gift cards.

Sec. 1872. From the funds appropriated in part 1 for personal care services, the department shall maintain the monthly Medicaid personal care supplement paid to adult foster care facilities and homes for the aged that provide personal care services to Medicaid recipients in place during the previous fiscal year.

Sec. 1873. From the funds appropriated in part 1 for long-term care services, the department may allocate up to \$3,700,000.00 for the purpose of outreach and education to nursing home residents and the coordination of housing in order to move out of the facility. In addition, any funds appropriated shall be used for other quality improvement activities of the program. The department shall consider working with all relevant stakeholders to develop a plan for the ongoing sustainability of the nursing facility transition initiative.

Sec. 1874. The department shall ensure, in counties where program of all-inclusive care for the elderly or PACE services are available, that the program of all-inclusive care for the elderly (PACE) is included as an option in all options counseling and enrollment brokering for aging services and managed care programs, including, but not limited to, Area Agencies on Aging, centers for independent living, and the MiChoice home and community-based waiver. Such options counseling must include approved marketing and discussion materials.

Sec. 1879. The department must allow contracted Medicaid health plans to manage their own preferred drug lists to be used by

their Medicaid managed health care program enrollees. Changes to each contracted Medicaid health plan's preferred drug list shall be made in consultation with the Michigan pharmacy and therapeutics committee to ensure sufficient access to medically necessary drugs for each disease state.

Sec. 1881. The managed care capitation rates for the fiscal year ending September 30, 2023 shall not include a 2-way risk corridor.

Sec. 1888. The department shall establish contract performance standards associated with the capitation withhold provisions for Medicaid health plans at least 3 months before the implementation of those standards. The determination of whether performance standards have been met shall be based primarily on recognized concepts such as 1-year continuous enrollment and the health care effectiveness data and information set, HEDIS, audited data.

Sec. 1894. By March 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the Healthy Kids Dental program. The report shall include, but is not limited to, the following:

- (a) The number of children enrolled in the Healthy Kids Dental program who visited the dentist during the previous fiscal year broken down by dental benefit manager.
- (b) The number of dentists who accept payment from the Healthy Kids Dental program broken down by dental benefit manager.
- (c) The annual change in dental utilization of childrenenrolled in the Healthy Kids Dental program broken down by dentalbenefit manager.

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- (d) Service expenditures for the Healthy Kids Dental program broken down by dental benefit manager.
 - (e) Administrative expenditures for the Healthy Kids Dental program broken down by dental benefit manager.
 - Sec. 1895. From the funds appropriated in part 1 for long-term care services, the department shall adjust the variable cost component (VCC) and plant cost component of Medicaid reimbursement to class I, class III, and class IV nursing home providers as follows:
- 10 (a) An interim VCC rate and plant cost component rate for each 11 facility must be established at 102.5% of the interim rate provided 12 on October 1 of the previous fiscal year.
 - (b) The quality assurance supplement (QAS) amount must be calculated for nursing home providers using the following factors:
- 15 (i) For class 1 providers, the QAS must be based on the updated16 interim VCC multiplied by 21.76%.
 - (ii) For governmental class III providers, the QAS must be subject to the class I updated variable cost limit (VCL).
 - (iii) For nongovernmental class III providers, the QAS must be based on their VCC or VCL, as applicable, multiplied by 21.76%.
 - (c) The department shall audit the final 2023 VCC and plant costs to establish the final audited rate provided to facilities for services provided in the current fiscal year.

INFORMATION TECHNOLOGY

Sec. 1901. (1) The department shall provide a report on a semiannual basis to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget

office on all of the following information:

- (a) The process used to define requests for proposals for each expansion of information technology projects, including timelines, project milestones, and intended outcomes.
- (b) If the department decides not to contract the services out to design and implement each element of the information technology expansion, the department's own project plan that includes, at a minimum, the requirements in subdivision (a).
- (c) A recommended project management plan with milestones and time frames.
 - (d) The proposed benefits from implementing the information technology expansion, including customer service improvement, form reductions, potential time savings, caseload reduction, and return on investment.
 - (e) Details on the implementation of the integrated service delivery project, and the progress toward meeting the outcomes and performance measures listed in section 1904(2) of this part.
 - (f) A list of projects approved in the previous 6 months and the purpose for approving each project including any federal, state, court, or legislative requirement for each project.
 - (2) Once an award for an expansion of information technology is made, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a projected cost of the expansion broken down by use and type of expense.
- Sec. 1902. From the funds appropriated in part 1 for the Michigan Medicaid information system (MMIS) line item, private revenue may be received from and allocated for other states

- 1 interested in participating as part of the broader MMIS initiative.
- 2 By March 1 of the current fiscal year, the department shall provide
- ${f 3}$ a report on the use of MMIS by other states for the previous fiscal
- 4 year, including a list of states, type of use, and revenue and
- 5 expenditures related to the agreements with the other states to use
- 6 the MMIS. The report shall be provided to the house and senate
- 7 appropriations subcommittees on the department budget, the house
- 8 and senate fiscal agencies, and the state budget office.
- 9 Sec. 1903. (1) The department shall report to the senate and
- 10 house appropriations subcommittees on the department budget, the
- 11 senate and house fiscal agencies, the senate and house policy
- offices, and the state budget office by November 1 of the current
- 13 fiscal year the status of an implementation plan regarding the
- 14 appropriation in part 1 to modernize the MiSACWIS. The report shall
- 15 include, but not be limited to, an update on the status of the
- 16 settlement and efforts to bring the system in compliance with the
- 17 settlement and other federal guidelines set forth by the United
- 18 States Department of Health and Human Services Administration for
- 19 Children and Families.
- 20 (2) The department shall report quarterly to the senate and
- 21 house appropriations subcommittees on the department budget, the
- 22 senate and house fiscal agencies, the senate and house policy
- 23 offices, and the state budget office a status report on the
- 24 planning, implementation, and operation, regardless of the current
- 25 operational status, regarding the appropriation in part 1 to
- 26 implement the MiSACWIS. The report shall provide details on the
- 27 planning, implementation, and operation of the MiSACWIS, including,
- 28 but not limited to, all of the following:
- 29 (a) Areas where implementation went as planned, and in each

area including whether the implementation results in either
 enhanced user interface or portal access, conversion to new
 modules, or substantial operation improvement to the MiSACWIS.

- (b) The number of known issues.
- (c) The average number of help tickets submitted per day.
- 6 (d) Any additional overtime or other staffing costs to address7 known issues and volume of help tickets.
 - (e) Any contract revisions to address known issues and volume of help tickets.
 - (f) Other strategies undertaken to improve implementation, and for each strategy area including whether the implementation results in either enhanced user interface or portal access, conversion to new modules, or substantial operation improvement to the MiSACWIS.
- 14 (g) Progress developing cross-system trusted data exchange15 with the MiSACWIS.
- (h) Progress in moving away from a statewide automated child
 welfare information system (SACWIS) to a comprehensive child
 welfare information system (CCWIS).
 - (i) Progress developing and implementing a program to monitor data quality.
 - (j) Progress developing and implementing custom integrated systems for private agencies.
 - (k) A list of all change orders, planned or in progress.
- 24 (1) The status of all change orders, planned or in progress.
 - (m) The estimated costs for all planned change orders.
- (n) The estimated and actual costs for all change orders inprogress.
- 28 (3) By July 1 of the current fiscal year, the department shall29 submit to the house and senate appropriations subcommittees on the

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- 1 department budget, the house and senate fiscal agencies, and the
- 2 house and senate policy offices a report on the department's
- 3 efforts and recommendations to develop and implement a simpler and
- 4 more streamlined process for the annual renewal of the licenses for
- 5 family foster care homes, and the development of a simpler and more
- 6 efficient version of the application form for renewal of the
- 7 licenses for family foster care homes.
- 8 Sec. 1904. (1) From the funds appropriated in part 1 for the
- 9 technology supporting integrated service delivery line item, the
- 10 department shall maintain information technology tools and enhance
- 11 existing systems to improve the eligibility and enrollment process
- 12 for citizens accessing department administered programs. This
- information technology system shall consolidate beneficiary
- 14 information, support department caseworker efforts in building a
- 15 success plan for beneficiaries, and better support department staff
- in supporting enrollees in assistance programs.
- 17 (2) Outcomes and performance measures for the initiative under
- 18 subsection (1) include, but are not limited to, the following:
- 19 (a) Successful consolidation of data warehouses maintained by
- 20 the department.
- 21 (b) The amount of time a department caseworker devotes to data
- 22 entry when initiating an enrollee application.
- 23 (c) A reduction in wait times for persons enrolled in
- 24 assistance programs to speak with department staff and get
- 25 necessary changes made.
- 26 (d) A reduction in department caseworker workload.
- Sec. 1905. (1) The department shall report on a quarterly
- 28 basis to the chairs of the senate and house standing committees on
- 29 appropriations, the senate and house appropriations subcommittees

- on the department budget, the senate and house appropriations subcommittees on the general government budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on all of the following:
 - (a) Fiscal year-to-date information technology spending for the current fiscal year by service and project and by line-item appropriation.
 - (b) Planned information technology spending for the remainder of the current fiscal year by service and project and by line-item appropriation.
 - (c) Total fiscal year-to-date information technology spending and planned spending for the current fiscal year by service and project and by line-item appropriation.
- (d) A list of all information technology projects estimated to cost more than \$250,000.00 that exceed their allotted budget and all information technology projects that have exceeded their allotted budget by 25% or more.
- (a) Community health automated Medicaid processing system(CHAMPS).
 - (b) Bridges and MiBridges eligibility determination.
- (c) MiSACWIS.

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- 24 (d) Integrated service delivery.
- (3) The department shall develop a strategic plan for
 information technology services and projects for the department.
 The strategic plan shall identify any scheduled changes in the
- 28 federal and state shares of costs related to information technology
- 29 services and projects over the 5-year period. As part of the

strategic plan, the department shall include total information 1 technology expenditures from the previous fiscal year by fund 2 source and total information technology appropriations as a 3 percentage of total department appropriations by fund source, by 4 5 completed project, for all information technology expenditures in 6 the previous fiscal year. All projects beginning after October 1, 7 2021 will follow department of management and budget benefits realization methodology, for reporting when completed in a future 8 fiscal year's report. The strategic plan shall also develop 9 benchmarks for comparison that include, for the previous 5 fiscal 10 11 years, the department's information technology spending compared to 12 the spending in the areas of public health, Medicaid, child protective services, child welfare, family and social services, 13 14 human services, and child support enforcement for similar 15 departments in 3 other states located in the Midwest. 16 Sec. 1906. From the funds appropriated in part 1 for 17 information technology services and projects, the department shall allocate \$100.00 general fund/general purpose revenue, and all 18 associated federal matching revenue, to a public and private 19 20 nonprofit collaboration that is designated as this state's statewide health information exchange by cooperative agreement, to 21 implement health information technology strategies for health 22 23 information exchange development, data management, and population health at a statewide level. 24 25 Sec. 1907. By March 1 of the current fiscal year, the department shall report to the house and senate appropriations 26 27 subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, and the state budget 28 29 office on all current, contracted information technology-related

projects, total contractual costs, spending in previous fiscal years, planned spending for the current fiscal year, and fiscal year-to-date spending, by project.

Sec. 1908. From the funds appropriated in part 1 for information technology services and projects, the department shall allocate \$100.00 to purchase a 4-year subscription from a technology company that provides real-time visibility platforms for complex supply chains and operates as a cloud-based software as a service model (SaaS) located in a city with a population between 10 123,800 and 123,900, located within a county with a population 11 between 372,200 and 372,300, according to the most recent federal decennial census, for an unlimited number of integrations to the 12 state's statewide emergency preparedness information technology and 13 14 data platforms.

Sec. 1909. (1) From the funds appropriated in part 1 for child support automation, the department shall only encumber or expend funds for the operation, maintenance, and improvements of the Michigan child support enforcement system (MiCSES).

- (2) From the funds appropriated in part 1 for bridges information system, the department shall only encumber or expend funds for the operation, maintenance, and improvements of Bridges and MIBridges.
- (3) From the funds appropriated in part 1 for technology supporting integrated service delivery, the department shall only encumber or expend funds for the operation, maintenance, and improvements of integrated service delivery.
- (4) From the funds appropriated in part 1 for Michigan Medicaid information system, the department shall only encumber or expend funds for the operation, maintenance, and improvements of

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the community health automated Medicaid processing system (CHAMPS).

- (5) From the funds appropriated in part 1 for Michigan statewide automated child welfare information system, the department shall only encumber or expend funds for the operation, maintenance, and improvements of MiSACWIS.
- (6) From the funds appropriated in part 1 for comprehensive child welfare information system, the department shall only encumber or expend funds for the operation, maintenance, and improvements to the comprehensive child welfare information system.
- 10 (7) From the funds appropriated in part 1 for comprehensive 11 child welfare information system, the department shall allocate \$29,478,300.00 to develop a new information system to replace 12 MiSACWIS consistent with the plan provided by the department to the 13 14 United States District Court for Eastern District of Michigan as a 15 part of the settlement. The development of the comprehensive child 16 welfare information system shall adhere to department of 17 technology, management, and budget and IT Investment Fund (ITIF) policies and practices, including use of the state unified 18 information technology environment methodology and agile 19 20 development. The project team shall also participate in and comply with the enterprise portfolio management office process and product 21 quality assurance. To ensure full transparency, the project shall 22 23 be included in the ITIF portfolio for executive, legislative, and external reporting purposes. As a component of the ITIF portfolio, 24 25 the project is subject to governance and oversight by the IT 26 investment management board.
- Sec. 1910. (1) From the funds appropriated in part 1, \$516,491,000.00 is appropriated for information technology services and projects including:

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- 1 (a) \$63,416,300.00 for bridges information system.
- (b) \$21,542,100.00 for Michigan statewide automated child
 welfare information system.
 - (c) \$99,529,200.00 for Michigan Medicaid information system.
- 5 (d) \$44,604,800.00 for child support automation.
- 6 (e) \$16,053,100.00 for technology supporting integrated7 service delivery.
- 8 (f) \$3,373,200.00 for comprehensive child welfare information9 system.
 - (2) For all expenditures of funds appropriated in subsection (1), the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices by April 1 of the current fiscal year total information technology expenditures from the previous fiscal year and all information technology expenditures made under an agile software development plan from the previous fiscal year with details on the agile software implementation.
 - (3) From the funds appropriated as described in subsection (1)(f) for comprehensive child welfare information system, this state shall be the owner of any software purchased or developed from the expenditures made under this subsection or it shall be committed to the public domain.
 - (4) The department shall report by March 1 of the current fiscal year to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices on the selection of a product owner for the comprehensive child welfare information system.
 - (5) The department shall provide updates as requested by the

- chairs of the house and senate appropriations committees or the 1 chairs of the house and senate appropriations subcommittees on the 2 department budget. Information updates provided by the department, 3 upon request, shall also be accessible to the house and senate 4 5 fiscal agencies, the house and senate policy offices, and the state 6 budget office on the status of the work completed to date. The 7 updates shall include demonstrations of the completed work during 8 the sprint period. During these demonstrations, the department shall provide a quality assessment surveillance plan as shown in 9 10 appendix B of "De-risking custom technology projects" from the 11 United States General Services Administration. At each demonstration, the department shall validate which user stories 12 have been included into the software development and the remaining 13 14 user stories that will be included into the product.
 - (6) As used in this section:
 - (a) "Agile software development" means the use of development methodologies using iterative development with work completed by cross-functional teams of software development.
 - (b) "Product owner" means a department employee who iteratively prioritizes and defines the work for the product team, works with users, stakeholders, technologists, and the software vendor to envision the direction for the product, and ensures that value is being delivered to end users as quickly as possible.
 - (c) "User-centered design" means software development that places the highest priority on the needs of the specific people who are expected to use the software.
 - (d) "User stories" means a task that the agile software development team will focus on over a given 2-week development period and includes clearly labeled progress toward meeting the

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needs of the end users.

ONE-TIME APPROPRIATIONS

Sec. 1951. From the funds appropriated in part 1 for adoption support services, the department shall allocate \$100,000.00 of state general fund/general purpose revenue to a nonprofit, community-based organization organized under the laws of this state that is exempt from federal income tax under section 501(c)(3) of the internal revenue code of 1986, 26 USC 501, with a marketing initiative to find older foster children adoptive homes before they age out of the foster care system through the production of personalized videos of foster children who are waiting for adoption. Funding must be used to renovate a building to create a safe living space, provide life skills training, assist with the transition into adulthood, and provide counseling for youth who have aged out of foster care.

Sec. 1952. (1) From the funds appropriated in part 1 for ARP - PACE program supports, the department shall allocate \$9,000,000.00 of state fiscal recovery fund revenue to assist with facility costs, equipment costs, and any other start-up costs associated with establishing not fewer than 3 programs of all-inclusive care for the elderly locations in rural, underserved communities.

- (2) From the funds appropriated in part 1 for ARP PACE program supports, the department shall allocate \$31,000,000.00 of state fiscal recovery fund revenue to assist current PACE programs with any eligible COVID-related costs, services, or programming.
- (3) Funds allocated under this section do not constitute a future guarantee of permitting approval for any project.
- 29 (4) The funds allocated under this section must be expended in

- compliance with federal regulations established under the American 1 rescue plan act of 2021, Public Law 117-2, including all 2 regulations and requirements around the use of the state fiscal 3 4 recovery fund.
- Sec. 1953. From the funds appropriated in part 1 for autism comprehensive care center, the department shall allocate \$2,500,000.00 to a nonprofit organization with at least 20 years of experience providing behavioral services and with at least 11 sites across this state with a main office located in a county with a 9 10 population between 1,200,000 and 1,500,000, according to the most 11 recent federal decennial census and in a city with a population between 24,000 and 24,500, according to the most recent federal 12 decennial census for capital expenses, services, and program 13 14 operations for an autism comprehensive care center that would 15 provide personalized services, including, but not limited to, the 16 following:
 - (a) Autism programming, including screening, evaluations, therapy offerings, and intensive behavioral care and support.
 - (b) Speech and occupational therapy.
 - (c) Family and sibling therapy.
- 21 (d) Experiential life skills.
 - Sec. 1954. (1) From the funds appropriated in part 1 for ARP first responder and public safety staff mental health, the department shall allocate \$7,500,000.00 toward a grant program to support firefighters, police officers, emergency medical services personnel, public safety tele-communicators, local correctional officers, juvenile detention employees, and those working on special teams such as internet sex crimes, sexual crimes against children, or traffic fatalities suffering from post-traumatic

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program must primarily provide grants to behavioral health
providers and may also include funding to the Michigan crisis and
action line established under section 165 of the mental health

stress syndrome and other mental health conditions. The grant

- 5 code, 1974 PA 258, MCL 330.1165, to improve information and
- 6 referrals for these services. The grant program must coordinate and
- 7 integrate with the Michigan crisis and access line established
- f 8 under section 165 of the mental health code, 1974 PA 258, MCL
- **9** 330.1165.

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- 10 (2) The unexpended funds appropriated in part 1 for ARP -11 first responder and public safety staff mental health are designated as a work project appropriation. Unencumbered or 12 unallotted funds shall not lapse at the end of the fiscal year and 13 14 shall be available for expenditures under this section until the 15 project has been completed. All of the following is in compliance 16 with section 451a of the management and budget act, 1984 PA 431, 17 MCL 18.1451a:
 - (a) The purpose of the project is to ensure that first responder and public safety staff who are dealing with post-traumatic stress syndrome and other mental health conditions have access to enhanced mental health services.
 - (b) The project will be accomplished by utilizing state employees, contracts with vendors, or local partners.
- 24 (c) The estimated completion cost of the project is \$7,500,000.00.
- 26 (d) The tentative completion date is September 30, 2027.
- Sec. 1955. From the funds appropriated in part 1 for behavioral health patient health information tool, the department
- 29 shall allocate \$850,000.00 to create an online and interactive

- version of the protected health information consent tool and make 1 any revisions to the tool to reflect any recent legislative 2 changes. The contracting entity that receives the funds 3 appropriated in this section shall also develop accompanying 4 5 trainings and resources for users. Additionally, the contracting 6 entity that receives the funds appropriated in this section shall 7 work closely with the Michigan health information network and the 8 department to develop the technical specifications for integrating the protected health information consent tool with other relevant 9 10 systems and applications, including, but not limited to, 11 CareConnect 360.
- Sec. 1956. From the funds appropriated in part 1 for healthy communities grant, \$100.00 shall be allocated for a 1-time grant to Leaders Advancing and Helping Communities for community healthy living, obesity prevention, and substance abuse prevention programs.
- 17 Sec. 1957. From the funds appropriated in part 1 for behavioral health professionals for schools, the department shall 18 allocate a \$500,000.00 grant to a CMHSP with a primary office 19 20 located in a county with a population between 37,000 and 37,500, according to the most recent federal decennial census and a 21 \$500,000.00 grant to a CMHSP with a primary office located in a 22 23 county with a population between 14,000 and 14,500, according to 24 the most recent federal decennial census for each CMHSP to provide 25 mental health professional or counselor visits at each school within the CMHSP's geographic region for the purpose of providing 26 27 1-to-1 care to students.
- Sec. 1958. From the funds appropriated in part 1 for narcotics awareness program, the department shall allocate \$100.00 to a

nonprofit organization organized under the laws of this state that 1 is exempt from federal income tax under section 501(c)(3) of the 2 internal revenue code of 1986, 26 USC 501, and with headquarters in 3 a charter township with a population between 100,000 and 105,000, 4 5 according to the most recent federal decennial census within a 6 county with a population between 700,000 and 1,000,000, according 7 to the most recent federal decennial census. To be eligible to receive funding, the nonprofit organization must have a stated 8 mission to offer community-based, compassionate, best-9 10 practice/evidence-based services to those suffering from addiction, as well as their loved ones, and to erase the stigma of addiction 11

and instill compassion and hope.

Sec. 1959. From the funds appropriated in part 1 for bone marrow donor and blood bank programs, the following allocations must be made to a blood center with a stem cell (marrow) program that is the partner of the match registry of the National Marrow Donor Program and that is in a city with a population between 198,000 and 199,000, according to the most recent federal decennial census:

- (a) \$50.00 must be used to offset ongoing tissue typing expenses associated with donor recruitment and collection services and to expand those services to better serve the citizens of this state.
- (b) \$50.00 must be used to enhance the collection of fetal umbilical cord blood and stem cells for transplant, expand cord blood laboratory capabilities, and expand the diversity of collections.
- 28 Sec. 1960. From the funds appropriated in part 1 for child 29 advocacy centers, the department shall allocate \$200,000.00 to a

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child advocacy center located in a county with a population between 115,000 and 125,000, according to the most recent federal decennial census to establish a new building and expand services available to children who are victims of abuse and to their families.

Sec. 1961. (1) From the funds appropriated in part 1 for jail diversion fund, the department shall allocate \$100.00 to create the jail diversion fund. The jail diversion fund shall be administered by the mental health diversion council, in accordance with recommendations of the Michigan joint task force on jail and pretrial incarceration.

- (2) The mental health diversion council shall distribute grants to local entities for the purpose of establishing or expanding jail diversion programs in partnership with local law enforcement and private or public behavioral health service providers. Grants must be distributed as follows:
- (a) Half shall be distributed to community-based mobile crisis intervention services in partnership between law enforcement and mental health practitioners. The mental health diversion council must give priority to grant applications that demonstrate a commitment to a comprehensive co-response model that includes at least all of the following:
 - (i) Full integration with existing 911 dispatch centers.
- 23 (ii) Inclusion of both co-responder clinicians and co-responder $\mathbf{24}$ peers.
 - (iii) Access to residential treatment facilities.
- (iv) Inclusion of telehealth response and follow-up services.
- (v) Mental health professionals employed independently fromlaw enforcement.
- (vi) Other best practices as identified by the council.

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- (b) Half shall be distributed to any type of pre-arrest or post-arrest diversion program in which individuals with behavioral health needs are identified and diverted out of the criminal justice system. The mental health diversion council must give priority to local entities located in counties without an urbanized area of at least 50,000 people, according to the 2010 federal decennial census.
 - (3) Grant applications may be made by any applicable local entity and must be distributed to local entities using a prospective payment methodology.
 - (4) The department shall seek federal authority as outlined under section 9813 of the American Rescue Plan Act of 2021, Public Law 117-2, to utilize enhanced federal Medicaid matching funds for the operation of the programs described in this section. It is the intent of the legislature that local entities receiving grants under this section partner with philanthropic organizations to supplement state funding.
 - (5) Local entities receiving grants under this section must submit a report containing metrics pertinent to the progress of their diversion program to the mental health diversion council annually. The council must compile and submit an annual report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office and make the report publicly available within 30 days after receiving the report. Local entities may utilize a portion of grant funding received under this section to contract with independent organizations for the purpose of fulfilling this requirement. The mental health diversion council shall determine the specific metrics required and notify the local

- entities at the time of the first grant disbursement. Metrics for grants may include, but are not limited to, all of the following:
- 3 (a) The number of calls to which co-responders are dispatched
 4 alone and the number of calls to which co-responders are dispatched
 5 alongside law enforcement.
 - (b) The number of calls transferred to telehealth corresponders with physical response follow-up and the number of calls transferred to telehealth co-responders without physical response follow-up.
- 10 (c) The law enforcement call clear time when co-responders are 11 dispatched, and the law enforcement call clear time when co-12 responders are not dispatched.
- (d) The co-responder, co-responder clinician, and co-responderpeer call time per call.
- 15 (e) The number of co-responder-attended calls resulting in the
 16 following:
- 17 (i) Jail admission.

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- 18 (ii) On-location de-escalation.
- (iii) Crisis center or crisis stabilization unit residential admission.
- (iv) Behavioral health facility inpatient admission.
- (v) Referral for behavioral or mental health services withoutresidential or inpatient admission.
- 24 (vi) Referral to community or social services such as homeless shelters, women's shelters, food pantries, or other similar services.
- (f) The number of individuals served by co-responder-attendedcalls broken down by age, gender, and race and ethnicity.
- 29 (g) The reduction in frequency of law enforcement interaction

1 with known frequently served individuals.

- 2 (h) The number of follow-up visits, including method and3 location.
 - (i) The overall program costs broken down by administration, training, co-responder clinician, co-responder, and per-call costs.
 - (6) The unexpended funds appropriated in part 1 for jail diversion fund are designated as a work project appropriation, and any unencumbered or unallotted funds do not lapse at the end of the fiscal year and are available for expenditures for projects under this section until the fund is depleted. The following is in compliance with section 451a(1) of the management and budget act, 1984 PA 431, MCL 18.1451a:
 - (a) The purpose of the project is to distribute grant funds to local entities establishing or expanding jail diversion programs.
 - (b) The projects will be accomplished through grants to local entities establishing or expanding jail diversion programs in partnership with local law enforcement and private or public behavioral health service providers.
 - (c) The total estimated cost of the work project is \$100.00.
 - (d) The tentative completion date is September 30, 2027.
 - Sec. 1962. From the funds appropriated in part 1 for children's health care, the department shall match 100% of any private funds, up to \$100.00 for a grant to a nonprofit health care facility with less than 190 beds that is affiliated with a physician partner group to build a children's rehabilitation hospital. To be eligible for funding under this section, the nonprofit health care facility must be located in a county with a population between 450,000 and 850,000, according to the most

recent federal decennial census, in a city with a population

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between 80,000 and 250,000, according to the most recent federaldecennial census.

Sec. 1963. From the funds appropriated in part 1 for the committee on juvenile justice grants, the department shall allocate \$500,000.00 to reestablish in-home care grants for in-home care and community-based juvenile justice services for rural counties as an alternative to residential placement by juvenile courts.

Sec. 1964. From the funds appropriated in part 1 for domestic violence prevention and treatment, the department shall allocate \$210,300.00 for operating expenses and providing violence prevention programs to a community shelter located in a county with a population between 62,400 and 62,500, according to the most recent federal decennial census. The community shelter must have a mission to provide a temporary, secure, nurturing environment, and support to enable victims of domestic violence to make appropriate life-altering changes.

Sec. 1965. From the funds appropriated in part 1 for doula care services initiative, \$100.00 shall be allocated for a pilot program to provide doula care services for high-risk families.

Sec. 1966. (1) From the funds appropriated in part 1 for human trafficking victims inclusive services grant program, the department shall allocate \$1,000,000.00 to create and implement the human trafficking victims services expansion pilot program. The pilot program shall utilize victim-centered and trauma informed approaches to serve human trafficking victims.

- (2) The human trafficking victims services expansion pilot program is a 3-year project administered by the division of victim services and shall do all of the following:
- (a) Encourage the development of specific and dedicated human

trafficking victims services.

- (b) Focus on building capacity within eligible organizations to offer services specifically designed to meet the needs of human trafficking victims.
- (c) Provide training and technical assistance to established organizations that support the development of human trafficking victims services that align with the criteria set forth in subsection (4).
- (d) Increase organizations' capacity to provide victim services designed to meet the unique needs of human trafficking victims.
- (e) Fund human trafficking service organizations that agree to develop services and accompanying policies and procedures for human trafficking victims aligned with the criteria of subsection (4).
- (3) By January 1 of the current fiscal year, the division of victim services shall make available to eligible entities the human trafficking victims service expansion pilot request for proposal.
- (4) In order to be considered for funding under the human trafficking victims service expansion pilot program, eligible organizations must meet all of the following:
- (a) Be a nonprofit organization that is exempt from taxation under section 501(c)(3) of the internal revenue code, 26 USC 501.
- (b) Have engaged in at least 1 year of providing human trafficking victims services or demonstrate meaningful collaboration with a human trafficking organization in its community.
- (c) Adhere to the mission of the human trafficking health
 advisory board created in the human trafficking health advisory
 board act, 2014 PA 461, MCL 752.991 to 752.994.

- (d) Agree to develop policies and procedures and provide services in accordance with the standards set forth by the division of victim services throughout the duration of the pilot program that include, at a minimum, both of the following:
 - (i) Providing victim-centered services.
- (ii) Providing empowerment-based services that encourage self-determination.
- (5) The unexpended portion of funds appropriated in part 1 for human trafficking victims inclusive services grant program is designated as a work project appropriation. Any unencumbered or unallotted funds shall not lapse at the end of the fiscal year and shall be available for expenditure for the project under this section until the project has been completed. The following is in compliance with section 451a(1) of the management and budget act, 1984 PA 431, MCL 18.1451a:
- (a) The purpose of the work project is to provide funding for human trafficking victims services expansion pilot as provided by this section.
- 19 (b) The project will be accomplished through funding to the
 20 division of victim services for administration of the pilot
 21 program.
- (c) The total estimated cost of the work project is\$1,000,000.00.
- 24 (d) The estimated completion date is September 30, 2027.
- 25 (6) As used in this section, "human trafficking" means any of
 26 the following:
- (a) Sex trafficking in which a commercial sex act is induced
 by force, fraud, or coercion, or in which the person induced to
 perform that act has not attained 18 years of age.

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- (b) The recruitment, harboring, transportation, provision, or
 obtaining of a person for labor or services, through the use of
 force, fraud, or coercion for the purpose of subjection to
 involuntary servitude, peonage, debt bondage, or slavery.
 - (c) A violation under chapter LXVIIA of the penal code, 1931 PA 328, MCL 750.462a to 750.462h.

Sec. 1967. From the funds appropriated in part 1 for food distribution, the department shall allocate \$500,000.00 for a grant to a nonprofit, community-based organization that specializes in the distribution of surplus and donated food for low-income families. The organization must operate in at least 40 counties in this state, and the grant must be used for maintenance and improvements for a facility located in a county with a population between 657,900 and 658,000, according to the most recent federal decennial census, in a city with a population between 54,300 and 54,400, according to the most recent federal decennial census.

Sec. 1968. From the funds appropriated in part 1 for foster care services, the department shall allocate \$1,000,000.00 to a nonprofit, community-based organization organized under the laws of this state that is exempt from federal income tax under section 501(c)(3) of the internal revenue code of 1986, 26 USC 501, with the mission to ensure that individuals with developmental disabilities are valued in order that they and their families can fully participate in and contribute to their community, to provide supports for special education system navigation, and to improve educational outcomes for youth in foster care who have a diagnosed disability or suspected disability.

Sec. 1969. From the funds appropriated in part 1 for Great Lakes recovery center, the department shall allocate a grant of

- \$250,000.00 for costs related to a women's recovery center and men's campus to a nonprofit organization accredited by CARF International with a mission to empower recovery through hope and change and that provides a variety of behavioral health services across the Upper Peninsula.
 - Sec. 1970. (1) From the funds appropriated in part 1 for health workforce development, the department shall allocate all of the following:
 - (a) \$500,000.00 general fund/general purpose revenue shall be allocated for a 4-year pilot program to increase the number of prepared psychiatric-mental health nurse practitioners to expand access to mental health services and provide care in underserved communities throughout this state. The office of nursing programs may oversee the program. The pilot program shall be through a college of nursing at a 4-year state university located in a county with a population greater than 1,500,000, according to the most recent federal decennial census.
 - (b) \$1,600,000.00 general fund/general purpose revenue must be allocated for a 4-year pilot program to increase the number of prepared psychiatric-mental health nurse practitioners to expand access to mental health services and provide care in underserved communities throughout this state. The office of nursing programs may oversee the pilot program. The pilot program must be through a college of nursing at a 4-year state university located in a county with a population between 284,000 and 285,000, according to the most recent federal decennial census.
 - (c) \$1,650,000.00 general fund/general purpose revenue must be allocated for a 4-year pilot certification program to train social workers to manage crisis stabilization to increase the number of

- social workers managing crisis stabilization. The pilot
 certification program must be through a school of social work at a
 4-year state university located in a county with a population
 greater than 1,500,000, according to the most recent federal
 decennial census.
 - (d) \$2,800,000.00 general fund/general purpose revenue must be allocated for a program to train direct care workers using a comprehensive, person-centered training program that provides direct care workers with the skills needed to deliver in-home, high-quality supports and services. The program must be provided by an organization that is a coalition of researchers, direct care workers, clients, and agencies working to develop, build, and strengthen a competent direct care workforce.
 - (2) The unexpended portion of funds appropriated in part 1 for health workforce development is designated as a work project appropriation. Any unencumbered or unallotted funds shall not lapse at the end of the fiscal year and shall be available for expenditure for the programs under this section until the programs have been completed. All of the following is in compliance with section 451a(1) of the management and budget act, 1984 PA 431, MCL 18.1451a:
 - (a) The purpose of the work project is to provide and expand health workforce development through 4 projects to increase the number of psychiatric-mental health nurse practitioners, train social workers to manage crisis stabilization, and provide skills development and training for direct care workers.
- (b) The work project will be accomplished through funding to
 an organization and 4-year state universities with oversight by the
 department and the office of nursing programs.

- (c) The total estimated completion cost of the work project is \$6,550,000.00 of general fund/general purpose revenue.
- (d) The estimated completion date of the work project is September 30, 2027.
- Sec. 1971. (1) From the funds appropriated in part 1 for human trafficking victims inclusive services grant program, the department shall allocate \$250,000.00 to counties or coalitions of counties to support collaborative teams to address human trafficking and coordinate with specialists in the department of state police and Federal Bureau of Investigation.
 - (2) Collaborative teams shall facilitate trauma-informed support throughout each county within multidisciplinary groups to engage law enforcement, health care professionals, and entities that provide survivor-centered services and are collectively focused on providing advocacy to human trafficking survivors. Collaborative teams are tasked with the prevention of opportunities for predators to engage in both sex and labor trafficking.
 - (3) The department shall allocate grants to counties or coalitions of counties in amounts ranging from \$3,000.00 to \$20,000.00 that can be used to pay for human trafficking-related training, equipment, supplies, meeting expenses, and victim services.
- Sec. 1972. From the funds appropriated in part 1 for long-term care quality improvement, the department shall allocate \$100.00 to supplement a Michigan Health Endowment Fund grant award to a nonprofit research and consulting organization that is focused on designing and implementing solutions to improve the health of individuals with fewer financial resources and populations disenfranchised by the health care system for training, coaching,

and technical assistance in long-term care facilities to implement person-centered practices that enable staff to recognize and intervene to help residents who are struggling to cope with loss, loneliness, depression, lack of appetite, weight loss, and other manifestations of stress.

Sec. 1973. From the funds appropriated in part 1 for mediation services, the department shall allocate \$40,000.00 to a nonprofit organization located in a county with a population between 290,000 and 300,000, according to the most recent federal decennial census, in a charter township with a population between 30,000 and 40,000, according to the most recent federal decennial census, that provides mediation services using a co-mediator approach to add 1 additional mediator to provide mediation services within a county with a population between 290,000 and 300,000, according to the most recent federal decennial census, a county with a population between 115,000 and 125,000, according to the most recent federal decennial census, and a county with a population between 62,000 and 63,000, according to the most recent federal decennial census.

Sec. 1974. From the funds appropriated in part 1 for parental stress and child mental health programs, the department shall allocate \$500,000.00 to a nonprofit organization that has at least 20 years of experience providing behavioral services with at least 11 sites across this state, that has a main office located in a county with a population between 1,200,000 and 1,500,000, according to the most recent federal decennial census, and in a city with a population between 24,000 and 24,500, according to the most recent federal decennial census, and that has a purpose to increase evidence-based family and children services programs for parental stress and child mental health at schools and at other locations of

- community partnerships. The funds may be used for additional
 staffing, evidence-based training, parent curriculum platforms,
 telehealth services technology, or health monitoring.
- Sec. 1975. From the funds appropriated in part 1 for pathway
 hub, the department shall allocate \$3,400,000.00 to a health care
 provider working with a health plan and a federally qualified
 health center for existing services and implementation of a pathway
 hub at a community health center located in a city with a
- 9 population between 9,500 and 10,000, according to the most recent
- 10 federal decennial census, and within a county with a population
- 11 between 170,000 and 180,000, according to the most recent federal
- 12 decennial census, to support the social and medical needs of the
- 13 community served by the community health center. The funds
- 14 appropriated in this section must be used for start-up costs and
- 15 first-year costs of implementing a pathway hub model for the
- 16 surrounding community, including any of the following:
- 17 (a) Data integration.
- (b) Care managers or recovery coaches.
- 19 (c) Mobile health units.
- 20 (d) Behavioral health urgent care.
- (e) Supplemental health care, including medical adherence, airconditioning units, or home blood pressure cuffs.
- 23 (f) Smoking cessation.
- 24 (g) Maternal health.
- 25 (h) Nutrition.
- 26 (i) Dental health.
- 27 Sec. 1976. From the funds appropriated in part 1 for 28 technology upgrades, the department shall do both of the following:
- 29 (a) Allocate \$100.00 general fund/general purpose revenue, and

- any associated federal revenue, in order to support application technology upgrades for the Michigan Medicaid information system. The purpose of these funds is to support improvements to enhance system security and enable implementation of state and federal compliance measures.
- 6 (b) Allocate \$400,000.00 general fund/general purpose revenue, 7 and any associated federal revenue, in order to support an 8 automated collaboration software system and portal with the purpose of promoting administrative simplification between state health 9 10 care contractors to streamline receipt, validation, and 11 visualization of health plan contract performance. The system must provide a centralized communication and collaboration portal for 1-12 stop submission of contract deliverables, and support performance 13 14 visualizations to help improve quality, address social determinants 15 of health, and reduce health disparities through transparent 16 collaboration between state health care payers and their health 17 plans.
- 18 Sec. 1977. From the funds appropriated in part 1 for safe harbor, the department shall allocate \$100.00 as grant funding to 19 20 the Salvation Army to work in collaboration with the department, 21 local hospitals, Medicaid health plans, and PIHPs, for a safe harbor program to improve service delivery utilizing a 22 23 multidisciplinary team approach in coordination of care, including medical, behavioral health, and substance use disorder 24 25 professionals, working together to provide prompt substance use 26 disorder engagement, assessment, education, encouragement, 27 transportation, and coordination of integrative health services. The Salvation Army must leverage existing capabilities in providing 28

these supports and services.

Sec. 1978. From the funds appropriated in part 1 for teen 1 2 walk-in mental health, the department shall allocate \$50,000.00 to a nonprofit organization whose registered agent is located in a 3 4 county with a population between 290,000 and 300,000, according to the most recent federal decennial census, in a township with a 5 population between 18,100 and 19,000, according to the most recent 6 7 federal decennial census, that is focused on the development and 8 implementation of mental wellness resources and services with a mission to empower teens, young adults, and their support networks 9 10 to prevent suicide and achieve lifelong mental wellness. The funds 11 must be used for any of the following:

- 12 (a) Mental health symptom education.
- 13 (b) Individual and family access to service navigation.
- 14 (c) Access to mental health support groups and services.
- 15 (d) Community education and engagement.
- 16 (e) Suicide and mental health screening.
 - (f) Capital expenditures related to the establishment of a dedicated site for services.

Sec. 1979. From the funds appropriated in part 1 for wellness center pilot project, the department shall allocate \$1,000,000.00 for the purpose of developing a wellness center pilot project incorporating a community adult day center and mixed-use affordable housing to help individuals prepare for, access, and afford long-term care services and supports for a planned build in a county with a population of less than 35,000, according to the most recent federal decennial census, within the region VII area agency on aging geographic area.

Sec. 1980. From the funds appropriated in part 1 for wraparound services, the department shall allocate \$200,000.00 for a

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- grant to a nonprofit, community-based organization that provides wrap-around services designed to promote achievement through targeting both academic and nonacademic barriers to learning during out-of-school periods. The grant must be used for maintenance and improvements to an existing facility located in a county with a population between 103,800 and 103,900, according to the most recent federal decennial census, in a city with a population between 32,600 and 32,700, according to the most recent federal decennial census.
 - Sec. 1984. (1) From the funds appropriated in part 1 for ARP behavioral health care services and facilities and behavioral health care services and facilities, the department shall allocate \$263,600,000.00 in response to the broad impact the COVID-19 pandemic has had on individuals' behavioral health. From the funds allocated in this section, the department must allocate all of the following:
 - (a) \$85,000,000.00 for the planning and construction of a new Hawthorn Center for children and adolescents.
 - (b) \$50,000,000.00 to a nonprofit organization that offers a full continuum of behavioral health services, including psychiatric urgent care, inpatient and partial hospitalization, residential, outpatient, and teletherapy services, addiction treatment and recovery, extensive child and adolescent programs, and senior care services with a campus located in a county with a population between 600,000 and 700,000, according to the most recent federal decennial census, in a charter township with a population between 28,000 and 30,000, according to the most recent federal decennial census, for capital costs of a pediatric behavioral health center for excellence.

- (c) \$45,000,000.00 to a CMHSP located in a county with a population of at least 1,750,000, according to the most recent federal decennial census for capital costs of an integrated care center facility that includes a walk-in behavioral health crisis services center.
- (d) \$30,000,000.00 to create a 1-time grant program for entities interested in establishing crisis stabilization units in accordance with chapter 9A of the mental health code, 1974 PA 258, MCL 330.1971 to 330.1979. Grant applicants must demonstrate to the department how the requested grant funding will be used for certification standards and requirements or for obtaining accreditation requirements. The department shall allocate the funds described in this subdivision as follows:
- (i) \$6,000,000.00 is allocated to a CMHSP located in a county
 with a population of at least 1,750,000, according to the most
 recent federal decennial census to establish a crisis stabilization
 unit.
- 18 (ii) \$3,000,000.00 is allocated to a CMHSP with a primary
 19 office located in a county with a population between 270,000 and
 20 290,000 according to the most recent federal decennial census, to
 21 establish a crisis stabilization unit.
- 22 (iii) \$3,000,000.00 is allocated to a CMHSP located in a county
 23 with a population between 600,000 and 700,000, according to the
 24 most recent federal decennial census, to establish a crisis
 25 stabilization unit.
- 26 (iv) \$3,000,000.00 is allocated to a CMHSP located in a county 27 with a population between 260,000 and 265,000, according to the 28 most recent federal decennial census, to establish a crisis 29 stabilization unit.

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- (v) \$3,000,000.00 is allocated to a CMHSP located in a county with a population between 400,000 and 450,000, according to the most recent federal decennial census, to establish a crisis stabilization unit.
- (vi) \$3,000,000.00 is allocated to a CMHSP with a primary office located in a county with a population between 65,500 and 66,500, according to the most recent federal decennial census, to establish a crisis stabilization unit.
- (vii) \$3,000,000.00 is allocated to a CMHSP with a primary office located in a county with a population between 95,000 and 96,000, according to the most recent federal decennial census, to enhance the CMHSP's crisis welcoming center that shall serve as the foundation for a future crisis stabilization unit.
- (viii) \$6,000,000.00 is allocated as competitive grants to private entities to establish crisis stabilization units. Each grant described in this subparagraph must not exceed \$3,000,000.00.
- (e) \$11,000,000.00 to a health system associated with a 4-year medical school located in a county with a population between 350,000 and 390,000, according to the most recent federal decennial census, for capital costs to expand its adolescent and children's emergency psychiatry unit through the addition of a dedicated emergency room for children and adolescents and to establish a behavioral health day program for children and adults who require more comprehensive support for their mental health needs.
- (f) \$10,000,000.00 to create a 1-time grant program for entities interested in establishing psychiatric residential treatment facilities in accordance with section 137a of the mental health code, 1974 PA 258, MCL 330.1137a. Grant applicants must demonstrate to the department how the requested grant funding will

be used for certification standards and requirements or for obtaining accreditation requirements.

- (g) \$10,000,000.00 to a wellness center to develop an adolescent behavioral wrap-around health care program in an underserved area. The wellness center must meet all of the following requirements:
- (i) Be dedicated to enhancing the well-being of individuals by providing an array of comprehensive behavioral and physical health services in a trauma-informed environment and promoting quality of life, continuous improvement, social awareness, and healing.
- (ii) Have its administrative office located in a county with a population of at least 1,750,000, according to the most recent federal decennial census, in a city with a population between 109,000 and 111,000, according to the most recent federal decennial census.
 - (iii) Be accredited by CARF International.
- (h) \$5,000,000.00 to a nonprofit Michigan health care system organized under the laws of this state that is exempt from federal income tax under section 501(c)(3) of the internal revenue code of 1986, 26 USC 501, that is located in a county with a population between 25,400 and 25,800 according to the most recent federal decennial census and in a city with a population between 4,500 and 5,000 according to the most recent federal decennial census for the purpose of creating an adolescent partial hospitalization program that will serve at least 20 adolescent patients and supporting emergency unit safe rooms for behavioral health patients.
- (i) \$5,000,000.00 to create a 1-time grant for capital expenditures for not less than 1 hospital to increase the number of inpatient pediatrics psychiatric beds located in a county with a

- population between 190,000 and 191,000, or 103,000 and 104,000, according to the most recent federal decennial census.
 - (j) \$5,000,000.00 to create a 1-time grant for capital expenditures for not less than 1 hospital to increase the number of inpatient pediatrics psychiatric beds located in a county with a population between 260,000 and 265,000, or 154,000 and 154,500, according to the most recent federal decennial census.
 - (k) \$3,600,000.00 to renovate unused current space and update the layout to increase the number of private inpatient psychiatric rooms at a hospital located in a county with a population between 36,500 and 36,800, according to the most recent federal decennial census, in a charter township with a population of at least 4,000, according to the most recent federal decennial census, in response to "no roommate orders" and to increase levels of acuity of behavioral health patients.
- (1) \$3,000,000.00 to a nonprofit Michigan health care system organized under the laws of this state that is exempt from federal income tax under section 501(c)(3) of the internal revenue code of 1986, 26 USC 501, that is located in a county with a population between 25,400 and 25,800, according to the most recent federal decennial census, and in a city with a population between 4,500 and 5,000, according to the most recent federal decennial census, for the purpose of supporting an emergency psychiatric assessment, treatment, and healing (EmPATH) unit. The EmPATH unit shall provide immediate access to an emergency psychiatrist, and staff shall be trained for the needs of EmPATH unit patients. Funding must also include at least 10 additional psychiatric beds to serve, at a minimum, patient emergency behavioral health needs.
 - (m) \$1,000,000.00 to a nonprofit health care system organized

- under the laws of this state that is exempt from federal income tax under section 501(c)(3) of the internal revenue code of 1986, 26 USC 501, for a pilot program located in a county with a population between 280,000 and 290,000, according to the most recent federal decennial census, for the purpose of operating a pilot program to ensure that the behavioral and physical health needs of Michigan residents are addressed. This pilot program shall seek to provide additional behavioral health services in a more efficient manner due to a partnership with state-based institutions on staffing assistance and shared services with a Michigan-based health system.
 - (2) The funds allocated under this section must be expended in compliance with federal regulations established under the American rescue plan act of 2021, Public Law 117-2, including all regulations and requirements around the use of the state fiscal recovery fund, including, but not limited to, behavioral health care and capital expenditures.
 - (3) Funds allocated under this section do not constitute a future guarantee of permitting approval for any project.
 - (4) The unexpended funds appropriated in part 1 for ARP behavioral health care services and facilities and behavioral health care services and facilities are designated as a work project appropriation. Any unencumbered or unallotted funds shall not lapse at the end of the fiscal year and shall be made available for behavioral health care services and facilities. The following is in compliance with section 451a of the management and budget act, 1984 PA 431, MCL 18.1451a:
 - (a) The purpose of the project is to provide behavioral health care in response to the broad impact the COVID-19 pandemic has had on individuals' behavioral health in accordance with all applicable

state and federal requirements. 1

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- (b) The project will be accomplished by utilizing state employees or contracts with service providers, or both. 3
- (c) The total estimated cost of the project is 4 \$263,600,000.00. 5
- 6 (d) The tentative completion date is September 30, 2027.
 - Sec. 1987. (1) From the funds appropriated in part 1 for food security council, \$100.00 is allocated for all of the following:
 - (a) An assessment of information technology investments, and associated costs, that would be necessary to effectively coordinate with other departments, agencies, and information technology systems in this state in order to improve access to public assistance programs and community resources that improve food security.
- 15 (b) Building food supply for distribution during declarations 16 of disaster or emergency.
 - (c) Expanding food assistance infrastructure, including new buildings in northern Michigan to serve northern Michigan and the Upper Peninsula.
- 20 (d) Pandemic response efforts, including support to local food 21 banks and organizations for food purchasing.
- 22 (2) By March 1 of the current fiscal year, the department 23 shall report the findings of the information technology investments 24 assessment required under subsection (1) to the house and senate 25 appropriations subcommittees on the department budget, the house and senate fiscal agencies, the house and senate policy offices, 26 27 and the state budget office.
- Sec. 1989. From the funds appropriated in part 1 for home 28 29 repair and plumbing assistance grants, the department shall

establish a grant program administered by community action agencies
to provide assistance to households with incomes at or below 200%
of the federal poverty level for minor home repairs and plumbing
updates to prepare homes for weatherization. The purpose of this
grant program is to allow low-income families to safely remain in

their homes.