

**SUBSTITUTE FOR  
HOUSE BILL NO. 5556**

A bill to make appropriations for the department of health and human services for the fiscal year ending September 30, 2025; and to provide for the expenditure of the appropriations.

**THE PEOPLE OF THE STATE OF MICHIGAN ENACT:**

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PART 1

LINE-ITEM APPROPRIATIONS

Sec. 101. There is appropriated for the department of health and human services for the fiscal year ending September 30, 2025, from the following funds:

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

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**APPROPRIATION SUMMARY**

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Full-time equated unclassified positions	6.0
Full-time equated classified positions	15,891.5

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1	Average population	798.0	
2	<b>GROSS APPROPRIATION</b>		<b>\$ 37,769,528,400</b>
3	Interdepartmental grant revenues:		
4	Total interdepartmental grants and		
5	intradepartmental transfers		14,707,900
6	<b>ADJUSTED GROSS APPROPRIATION</b>		<b>\$ 37,754,820,500</b>
7	Federal revenues:		
8	Social security act, temporary assistance for		
9	needy families		597,514,000
10	Capped federal revenues		516,972,500
11	Total other federal revenues		25,588,661,400
12	Special revenue funds:		
13	Total local revenues		160,445,300
14	Total private revenues		179,764,200
15	Michigan merit award trust fund		92,268,700
16	Total other state restricted revenues		3,844,995,800
17	<b>State general fund/general purpose</b>		<b>\$ 6,774,198,600</b>
18	<b>Sec. 102. DEPARTMENTAL ADMINISTRATION AND</b>		
19	<b>SUPPORT</b>		
20	Full-time equated unclassified positions	6.0	
21	Full-time equated classified positions	959.4	
22	Unclassified salaries--FTEs	6.0	\$ 1,431,500
23	Administrative hearings officers		9,995,400
24	Child welfare institute--FTEs	55.0	9,552,100
25	Demonstration projects--FTEs	7.0	7,070,800
26	Departmental administration and management--		
27	FTEs	660.4	110,361,300
28	Legal services		100,000

1	Office of inspector general--FTEs	211.0	29,165,400
2	Property management		62,608,700
3	Terminal leave payments		7,091,300
4	Training and program support--FTEs	26.0	3,751,700
5	Warehouse operations		1,400,000
6	Worker's compensation		7,662,000
7	<b>GROSS APPROPRIATION</b>		<b>\$ 250,190,200</b>
8	Appropriated from:		
9	Interdepartmental grant revenues:		
10	IDG from department of lifelong education,		
11	advancement, and potential		1,839,800
12	IDG from department of technology, management,		
13	and budget - office of retirement services		600
14	Federal revenues:		
15	Social security act, temporary assistance for		
16	needy families		27,456,600
17	Capped federal revenues		19,632,800
18	Total other federal revenues		76,353,900
19	Special revenue funds:		
20	Total local revenues		86,000
21	Total private revenues		3,846,900
22	Total other state restricted revenues		1,330,300
23	<b>State general fund/general purpose</b>		<b>\$ 119,643,300</b>
24	<b>Sec. 103. CHILD SUPPORT ENFORCEMENT</b>		
25	Full-time equated classified positions	193.7	
26	Child support enforcement operations--FTEs	187.7	\$ 26,773,600
27	Child support incentive payments		24,409,600
28	Legal support contracts		132,600,300

1	State disbursement unit--FTEs	6.0		7,381,400
2	<b>GROSS APPROPRIATION</b>		<b>\$</b>	<b>191,164,900</b>
3	Appropriated from:			
4	Federal revenues:			
5	Capped federal revenues			16,273,100
6	Total other federal revenues			149,397,500
7	<b>State general fund/general purpose</b>		<b>\$</b>	<b>25,494,300</b>
8	<b>Sec. 104. COMMUNITY SERVICES AND OUTREACH</b>			
9	Full-time equated classified positions	56.0		
10	Bureau of community services and outreach--FTEs	24.0	\$	3,569,800
11	Community services and outreach administration-			
12	-FTEs	20.0		8,682,000
13	Community services block grant			25,840,000
14	Diaper assistance grant			4,404,400
15	Homeless programs--FTE	1.0		27,504,100
16	Housing and support services			13,031,000
17	Kids' food basket			1,025,000
18	Runaway and homeless youth grants			13,126,100
19	School success partnership program			1,525,000
20	Weatherization assistance			21,860,300
21	Weatherization assistance - IIJA--FTEs	11.0		40,013,000
22	<b>GROSS APPROPRIATION</b>		<b>\$</b>	<b>160,580,700</b>
23	Appropriated from:			
24	Federal revenues:			
25	Social security act, temporary assistance for			
26	needy families			22,165,800
27	Capped federal revenues			98,063,300
28	Total other federal revenues			14,661,200

1	<b>State general fund/general purpose</b>		<b>\$ 25,690,400</b>
2	<b>Sec. 105. CHILDREN'S SERVICES AGENCY - CHILD</b>		
3	<b>WELFARE</b>		
4	Full-time equated classified positions	4,117.2	
5	Adoption subsidies		\$ 212,000,000
6	Adoption support services--FTEs	10.0	42,131,400
7	Attorney general contract		5,191,100
8	Child abuse and neglect - children's justice		
9	act--FTE	1.0	628,900
10	Child care fund		273,181,650
11	Child care fund - indirect cost allotment		3,500,000
12	Child protection		2,050,300
13	Child welfare administration travel		390,000
14	Child welfare field staff - noncaseload		
15	compliance--FTEs	353.0	42,404,300
16	Child welfare licensing--FTEs	59.0	7,570,100
17	Child welfare medical/psychiatric evaluations		9,428,500
18	Children's protective services - caseload		
19	staff--FTEs	1,615.0	176,060,700
20	Children's protective services supervisors--		
21	FTEs	387.0	49,359,000
22	Children's services administration--FTEs	218.2	28,681,400
23	Children's trust fund--FTEs	12.0	5,059,800
24	Contractual services, supplies, and materials		9,567,600
25	Court-appointed special advocates		2,500,000
26	Education planners--FTEs	15.0	1,990,000
27	Family preservation and prevention services		
28	administration--FTEs	9.0	1,422,400

1	Family preservation programs--FTEs	34.0	69,223,700
2	Foster care payments		323,318,050
3	Foster care services - caseload staff--FTEs	966.0	100,870,900
4	Foster care services supervisors--FTEs	227.0	31,894,700
5	Guardianship assistance program		11,360,600
6	Interstate compact		179,600
7	Peer coaches--FTEs	45.5	6,476,300
8	Performance-based funding implementation--FTEs	3.0	560,400
9	Permanency resource managers--FTEs	28.0	3,599,400
10	Prosecuting attorney contracts		8,142,800
11	Second line supervisors and technical staff--		
12	FTEs	126.0	20,335,200
13	Settlement monitor		2,709,800
14	Strong families/safe children		11,600,000
15	Title IV-E compliance and accountability		
16	office--FTEs	4.0	471,900
17	Youth in transition--FTEs	4.5	8,194,200
18	<b>GROSS APPROPRIATION</b>		<b>\$ 1,472,054,700</b>
19	Appropriated from:		
20	Interdepartmental grant revenues:		
21	IDG from department of lifelong education,		
22	advancement, and potential		244,400
23	Federal revenues:		
24	Social security act, temporary assistance for		
25	needy families		294,818,000
26	Capped federal revenues		105,533,500
27	Total other federal revenues		271,418,700
28	Special revenue funds:		

1	Local funds - county chargeback		33,264,600
2	Private - collections		1,503,300
3	Children's trust fund		2,895,300
4	Total other state restricted revenues		3,615,800
5	<b>State general fund/general purpose</b>	<b>\$</b>	<b>758,761,100</b>
6	<b>Sec. 106. CHILDREN'S SERVICES AGENCY - JUVENILE</b>		
7	<b>JUSTICE</b>		
8	Full-time equated classified positions	147.5	
9	Bay Pines Center--FTEs	60.0	\$ 7,826,700
10	Committee on juvenile justice administration--		
11	FTEs	2.5	368,200
12	Committee on juvenile justice grants		3,000,000
13	Community support services--FTEs	3.0	2,513,200
14	County juvenile officers		3,977,600
15	Juvenile justice, administration and		
16	maintenance--FTEs	21.0	6,383,600
17	Shawono Center--FTEs	61.0	7,968,800
18	<b>GROSS APPROPRIATION</b>		<b>\$ 32,038,100</b>
19	Appropriated from:		
20	Federal revenues:		
21	Capped federal revenues		7,709,300
22	Total other federal revenues		223,200
23	Special revenue funds:		
24	Local funds - state share education funds		1,374,400
25	Local funds - county chargeback		6,523,800
26	<b>State general fund/general purpose</b>	<b>\$</b>	<b>16,207,400</b>
27	<b>Sec. 107. PUBLIC ASSISTANCE</b>		
28	Full-time equated classified positions	1.0	

1	Emergency services local office allocations	\$	38,813,500
2	Fair food network - double up food bucks		3,000,000
3	Family independence program		80,877,500
4	Family independence program - clothing		
5	allowance		10,000,000
6	Family independence program - small child		
7	supplemental payment		16,240,100
8	Food assistance program benefits		4,018,370,000
9	Food Bank Council of Michigan		12,045,000
10	Indigent burial		4,333,400
11	Low-income home energy assistance program		174,951,600
12	Michigan energy assistance program--FTE	1.0	57,500,000
13	Prenatal and infant support program		9,621,700
14	Refugee assistance program		7,954,200
15	State disability assistance payments		7,057,200
16	State supplementation		54,770,700
17	State supplementation administration		1,806,100
18	<b>GROSS APPROPRIATION</b>	<b>\$</b>	<b>4,497,341,000</b>
19	Appropriated from:		
20	Federal revenues:		
21	Social security act, temporary assistance for		
22	needy families		132,538,100
23	Capped federal revenues		182,905,800
24	Total other federal revenues		4,013,660,000
25	Special revenue funds:		
26	Child support collections		8,751,200
27	Low-income energy assistance fund		50,000,000
28	Public assistance recoupment revenue		4,868,300



1	Supplemental security income recoveries		1,569,000
2	<b>State general fund/general purpose</b>	<b>\$</b>	<b>103,048,600</b>
3	<b>Sec. 108. LOCAL OFFICE OPERATIONS AND SUPPORT</b>		
4	<b>SERVICES</b>		
5	Full-time equated classified positions	5,758.5	
6	Administrative support workers--FTEs	167.0	\$ 14,934,500
7	Adult services local office staff--FTEs	550.0	68,661,300
8	Contractual services, supplies, and materials		31,051,000
9	Donated funds positions--FTEs	237.0	29,274,400
10	Elder Law of Michigan MiCAFE contract		350,000
11	Electronic benefit transfer (EBT)		9,714,000
12	Employment and training support services		4,219,100
13	Food assistance reinvestment--FTEs	16.0	7,494,300
14	Local office policy and administration--FTEs	125.0	20,565,600
15	Local office staff travel		8,252,400
16	Medical/psychiatric evaluations		1,120,100
17	Nutrition education--FTEs	2.0	33,040,900
18	Pathways to potential--FTEs	231.0	26,143,300
19	Public assistance local office staff--FTEs	4,430.5	501,434,500
20	SSI advocacy legal services grant		375,000
21	<b>GROSS APPROPRIATION</b>	<b>\$</b>	<b>756,630,400</b>
22	Appropriated from:		
23	Interdepartmental grant revenues:		
24	IDG from department of corrections		120,200
25	IDG from department of lifelong education,		
26	advancement, and potential		8,315,800
27	Federal revenues:		

1	Social security act, temporary assistance for		
2	needy families		73,233,900
3	Capped federal revenues		55,328,300
4	Total other federal revenues		286,502,800
5	Special revenue funds:		
6	Local funds - donated funds		4,378,900
7	Private funds - donated funds		9,969,200
8	Private revenues		250,000
9	<b>State general fund/general purpose</b>	<b>\$</b>	<b>318,531,300</b>
10	<b>Sec. 109. DISABILITY DETERMINATION SERVICES</b>		
11	Full-time equated classified positions	628.4	
12	Disability determination operations--FTEs	624.3	\$ 125,947,100
13	Retirement disability determination--FTEs	4.1	643,300
14	<b>GROSS APPROPRIATION</b>		<b>\$ 126,590,400</b>
15	Appropriated from:		
16	Interdepartmental grant revenues:		
17	IDG from department of lifelong education,		
18	advancement, and potential		16,000
19	IDG from department of technology, management,		
20	and budget - office of retirement services		819,900
21	Federal revenues:		
22	Total other federal revenues		121,909,300
23	<b>State general fund/general purpose</b>	<b>\$</b>	<b>3,839,000</b>
24	<b>Sec. 110. BEHAVIORAL HEALTH PROGRAM</b>		
25	<b>ADMINISTRATION AND SPECIAL PROJECTS</b>		
26	Full-time equated classified positions	86.0	
27	Behavioral health program administration--FTEs	46.0	\$ 63,656,100

1	Community substance use disorder prevention,		
2	education, and treatment--FTEs	9.0	81,626,200
3	Family support subsidy		15,670,900
4	Federal and other special projects		2,535,600
5	Gambling addiction--FTE	4.0	9,521,300
6	Mental health diversion council		3,850,000
7	Michigan Clinical Consultation and Care		5,289,000
8	Office of recipient rights--FTEs	25.0	3,502,800
9	Opioid response activities--FTEs	2.0	133,943,000
10	Protection and advocacy services support		194,400
11	<b>GROSS APPROPRIATION</b>		<b>\$ 319,789,300</b>
12	Appropriated from:		
13	Federal revenues:		
14	Social security act, temporary assistance for		
15	needy families		15,670,900
16	Total other federal revenues		170,863,100
17	Special revenue funds:		
18	Total private revenues		2,904,700
19	Total other state restricted revenues		78,591,100
20	<b>State general fund/general purpose</b>		<b>\$ 51,759,500</b>
21	<b>Sec. 111. BEHAVIORAL HEALTH SERVICES</b>		
22	Full-time equated classified positions	11.0	
23	Autism services		\$ 342,723,900
24	Behavioral health community supports and		
25	services--FTEs	7.0	43,969,700
26	Certified community behavioral health clinic		
27	demonstration		519,414,300
28	Civil service charges		297,500

1	Community mental health non-Medicaid services		125,578,200
2	Federal mental health block grant--FTEs	4.0	24,471,700
3	Health homes		53,418,500
4	Healthy Michigan plan - behavioral health		535,228,600
5	Medicaid mental health services		3,304,837,600
6	Medicaid substance use disorder services		97,941,400
7	Multicultural integration funding		17,284,900
8	Nursing home PAS/ARR-OBRA		15,213,600
9	State disability assistance program substance		
10	use disorder services		2,018,800
11	<b>GROSS APPROPRIATION</b>		<b>\$ 5,082,398,700</b>
12	Appropriated from:		
13	Federal revenues:		
14	Social security act, temporary assistance for		
15	needy families		421,000
16	Capped federal revenues		184,500
17	Total other federal revenues		3,449,212,000
18	Special revenue funds:		
19	Total local revenues		10,190,500
20	Total other state restricted revenues		68,561,400
21	<b>State general fund/general purpose</b>		<b>\$ 1,553,829,300</b>
22	<b>Sec. 112. STATE PSYCHIATRIC HOSPITALS AND</b>		
23	<b>FORENSIC MENTAL HEALTH SERVICES</b>		
24	Full-time equated classified positions	2,546.6	
25	Average population	798.0	
26	Caro Regional Mental Health Center -		
27	psychiatric hospital - adult--FTEs	530.7	\$ 61,299,100
28	Average population	145.0	

1	Center for forensic psychiatry--FTEs	624.5	102,649,400
2	Average population	240.0	
3	Developmental disabilities council and		
4	projects--FTEs	10.0	3,196,800
5	Gifts and bequests for patient living and		
6	treatment environment		1,000,000
7	IDEA, federal special education		120,000
8	Kalamazoo Psychiatric Hospital - adult--FTEs	561.2	72,573,300
9	Average population	170.0	
10	Purchase of medical services for residents of		
11	hospitals and centers		445,600
12	Revenue recapture		750,100
13	Special maintenance		924,600
14	State hospital administration--FTEs	34.0	5,735,000
15	Walter P. Reuther Psychiatric Hospital - adult,		
16	children, and adolescents--FTEs	786.2	123,069,900
17	Average population	243.0	
18	<b>GROSS APPROPRIATION</b>		<b>\$ 371,763,800</b>
19	Appropriated from:		
20	Federal revenues:		
21	Total other federal revenues		46,642,000
22	Special revenue funds:		
23	Total local revenues		23,283,200
24	Total private revenues		1,000,000
25	Total other state restricted revenues		15,189,200
26	<b>State general fund/general purpose</b>		<b>\$ 285,649,400</b>
27	<b>Sec. 113. HEALTH AND HUMAN SERVICES POLICY AND</b>		
28	<b>INITIATIVES</b>		

1	Full-time equated classified positions	74.3	
2	Cellular therapy for Versiti Michigan		\$ 750,000
3	Certificate of need program administration--		
4	FTEs	11.3	2,744,600
5	Child advocacy centers		1,407,000
6	Child advocacy centers - supplemental grants		2,000,000
7	Community health programs		12,500,000
8	Crime victim grants administration services--		
9	FTEs	17.0	3,092,300
10	Crime victim justice assistance grants		78,579,300
11	Crime victim rights services grants		19,869,900
12	Crime victim rights sustaining grants		30,000,000
13	Critical health and wellness center operations		1,500,000
14	Domestic violence prevention and treatment--		
15	FTEs	15.6	18,383,500
16	Human trafficking intervention services--FTE	1.0	200,000
17	Michigan essential health provider		3,519,600
18	Minority health grants and contracts--FTEs	3.0	1,159,700
19	Nurse education and research program--FTEs	3.0	823,600
20	Policy and planning administration--FTEs	19.9	2,768,500
21	Primary care services--FTEs	3.0	3,809,200
22	Rape prevention and services--FTEs	0.5	7,097,300
23	Rural health services		175,000
24	Uniform statewide sexual assault evidence kit		
25	tracking system		369,500
26	<b>GROSS APPROPRIATION</b>		<b>\$ 190,749,000</b>
27	Appropriated from:		
28	Interdepartmental grant revenues:		

1	IDG from department of licensing and regulatory		
2	affairs		823,600
3	IDG from department of lifelong education,		
4	advancement, and potential		2,400
5	IDG from department of treasury, Michigan		
6	finance authority		117,700
7	Federal revenues:		
8	Social security act, temporary assistance for		
9	needy families		6,736,000
10	Capped federal revenues		10,704,100
11	Total other federal revenues		86,260,100
12	Special revenue funds:		
13	Total private revenues		865,000
14	Child advocacy centers fund		1,407,000
15	Compulsive gaming prevention fund		1,040,500
16	Crime victim's rights fund		18,784,900
17	Sexual assault victims' prevention and		
18	treatment fund		3,000,000
19	Total other state restricted revenues		3,309,500
20	<b>State general fund/general purpose</b>	<b>\$</b>	<b>57,698,200</b>
21	<b>Sec. 114. EPIDEMIOLOGY, EMERGENCY MEDICAL</b>		
22	<b>SERVICES, AND LABORATORY</b>		
23	Full-time equated classified positions	449.9	
24	Bioterrorism preparedness--FTEs	53.0	\$ 31,009,800
25	Childhood lead program--FTEs	4.5	2,342,900
26	Emergency medical services program--FTEs	27.0	10,530,000
27	Epidemiology administration--FTEs	73.5	26,350,100
28	Healthy homes program--FTEs	66.0	56,569,600

1	Laboratory services--FTEs	102.0	31,002,000
2	Newborn screening follow-up and treatment		
3	services--FTEs	10.5	9,837,500
4	PFAS and environmental contamination response--		
5	FTEs	43.0	20,530,400
6	Vital records and health statistics--FTEs	70.4	11,573,100
7	<b>GROSS APPROPRIATION</b>		<b>\$ 199,745,400</b>
8	Appropriated from:		
9	Interdepartmental grant revenues:		
10	IDG from department of environment, Great		
11	Lakes, and energy		1,797,800
12	Federal revenues:		
13	Capped federal revenues		81,100
14	Total other federal revenues		77,506,000
15	Special revenue funds:		
16	Total private revenues		1,342,600
17	Total other state restricted revenues		32,478,400
18	<b>State general fund/general purpose</b>		<b>\$ 86,539,500</b>
19	<b>Sec. 115. LOCAL HEALTH AND ADMINISTRATIVE</b>		
20	<b>SERVICES</b>		
21	Full-time equated classified positions	190.1	
22	AIDS prevention, testing, and care programs--		
23	FTEs	79.5	\$ 110,825,500
24	Cancer prevention and control program--FTEs	18.0	15,911,400
25	Chronic disease control and health promotion		
26	administration--FTEs	28.4	10,429,400
27	Diabetes and kidney program--FTEs	8.0	4,198,800
28	Essential local public health services		76,419,300



1	Implementation of 1993 PA 133, MCL 333.17015		20,000
2	Local health services--FTEs	3.3	8,724,200
3	Medicaid outreach cost reimbursement to local		
4	health departments		12,500,000
5	Public health administration--FTEs	9.0	2,289,200
6	Sexually transmitted disease control program--		
7	FTEs	20.0	8,555,700
8	Smoking prevention program--FTEs	15.0	7,164,700
9	Violence prevention--FTEs	8.9	19,062,100
10	<b>GROSS APPROPRIATION</b>		<b>\$ 276,100,300</b>
11	Appropriated from:		
12	Federal revenues:		
13	Social security act, temporary assistance for		
14	needy families		2,300
15	Total other federal revenues		90,556,700
16	Special revenue funds:		
17	Total local revenues		5,150,000
18	Total private revenues		74,556,600
19	Total other state restricted revenues		14,425,200
20	<b>State general fund/general purpose</b>		<b>\$ 91,409,500</b>
21	<b>Sec. 116. FAMILY HEALTH SERVICES</b>		
22	Full-time equated classified positions	136.1	
23	Child and adolescent health care and centers		\$ 41,242,700
24	Dental programs--FTEs	5.3	7,546,800
25	Drinking water declaration of emergency		4,271,000
26	Family, maternal, and child health		
27	administration--FTEs	49.0	10,837,300
28	Family planning local agreements		15,810,700

1	Immunization program--FTEs	20.8	20,696,600
2	Local MCH services		7,018,100
3	Pregnancy prevention program		1,297,900
4	Prenatal care and premature birth avoidance		
5	grant		1,000,000
6	Prenatal care outreach and service delivery		
7	support--FTEs	19.0	48,400,800
8	Special projects		6,289,100
9	Sudden and unexpected infant death and		
10	suffocation prevention program		321,300
11	Women, infants, and children program		
12	administration and special projects--FTEs	42.0	19,673,900
13	Women, infants, and children program local		
14	agreements and food costs		251,285,000
15	<b>GROSS APPROPRIATION</b>		<b>\$ 435,691,200</b>
16	Appropriated from:		
17	Federal revenues:		
18	Total other federal revenues		268,760,500
19	Special revenue funds:		
20	Total local revenues		42,817,700
21	Total private revenues		64,785,700
22	Total other state restricted revenues		4,049,500
23	<b>State general fund/general purpose</b>		<b>\$ 55,277,800</b>
24	<b>Sec. 117. CHILDREN'S SPECIAL HEALTH CARE</b>		
25	<b>SERVICES</b>		
26	Full-time equated classified positions	51.8	
27	Bequests for care and services--FTEs	9.8	\$ 2,087,100

1	Children's special health care services		
2	administration--FTEs	42.0	8,743,800
3	Medical care and treatment		288,818,200
4	Outreach and advocacy		6,722,200
5	<b>GROSS APPROPRIATION</b>		<b>\$ 306,371,300</b>
6	Appropriated from:		
7	Federal revenues:		
8	Total other federal revenues		160,028,800
9	Special revenue funds:		
10	Total private revenues		1,044,100
11	Total other state restricted revenues		4,433,300
12	<b>State general fund/general purpose</b>		<b>\$ 140,865,100</b>
13	<b>Sec. 118. AGING SERVICES</b>		
14	Community services		\$ 60,706,900
15	Employment assistance		3,500,000
16	Nutrition services		50,004,200
17	Respite care program		7,268,700
18	Senior volunteer service programs		4,765,300
19	<b>GROSS APPROPRIATION</b>		<b>\$ 126,245,100</b>
20	Appropriated from:		
21	Federal revenues:		
22	Total other federal revenues		67,787,400
23	Special revenue funds:		
24	Total private revenues		300,000
25	Michigan merit award trust fund		4,068,700
26	Total other state restricted revenues		2,800,000
27	<b>State general fund/general purpose</b>		<b>\$ 51,289,000</b>

1	<b>Sec. 119. HEALTH AND AGING SERVICES</b>		
2	<b>ADMINISTRATION</b>		
3	Full-time equated classified positions	473.0	
4	Aging services administration--FTEs	43.0	\$ 9,629,400
5	Health services administration--FTEs	430.0	125,861,500
6	<b>GROSS APPROPRIATION</b>		<b>\$ 135,490,900</b>
7	Appropriated from:		
8	Federal revenues:		
9	Total other federal revenues		88,149,300
10	Special revenue funds:		
11	Total local revenues		37,700
12	Total private revenues		1,721,300
13	Total other state restricted revenues		336,300
14	<b>State general fund/general purpose</b>		<b>\$ 45,246,300</b>
15	<b>Sec. 120. HEALTH SERVICES</b>		
16	Adult home help services		\$ 540,996,100
17	Ambulance services		23,768,100
18	Auxiliary medical services		6,723,400
19	Dental clinic program		1,000,000
20	Dental services		314,199,000
21	Federal Medicare pharmaceutical program		426,126,000
22	Health plan services		8,048,064,900
23	Healthy Michigan plan		6,362,405,100
24	Home health services		3,748,400
25	Hospice services		167,506,900
26	Hospital services and therapy		616,810,800
27	Integrated care organizations		370,574,900
28	Long-term care services		2,406,027,000

1	Maternal and child health		26,340,400
2	Medicaid home- and community-based services		
3	waiver		516,444,000
4	Medicare premium payments		926,166,300
5	Personal care services		6,196,100
6	Pharmaceutical services		300,638,800
7	Physician services		290,325,600
8	Plan first		6,567,500
9	Program of all-inclusive care for the elderly		299,357,000
10	Recuperative care		297,600
11	School-based services		172,147,500
12	Special Medicaid reimbursement		310,113,900
13	Transportation		21,476,400
14	<b>GROSS APPROPRIATION</b>		<b>\$ 22,164,021,700</b>
15	Appropriated from:		
16	Federal revenues:		
17	Total other federal revenues		15,811,314,700
18	Special revenue funds:		
19	Total local revenues		33,331,800
20	Total private revenues		10,423,900
21	Michigan merit award trust fund		88,200,000
22	Total other state restricted revenues		3,511,723,900
23	<b>State general fund/general purpose</b>		<b>\$ 2,709,027,400</b>
24	<b>Sec. 121. INFORMATION TECHNOLOGY</b>		
25	Full-time equated classified positions	11.0	
26	Bridges information system--FTEs	10.0	\$ 114,678,900
27	Child support automation		44,243,200
28	Comprehensive child welfare information system		8,274,700

1	Information technology services and projects		244,807,200
2	Michigan Medicaid information system--FTE	1.0	102,482,000
3	Michigan statewide automated child welfare		
4	information system		21,555,400
5	<b>GROSS APPROPRIATION</b>		<b>\$ 536,041,400</b>
6	Appropriated from:		
7	Interdepartmental grant revenues:		
8	IDG from department of lifelong education,		
9	advancement, and potential		609,700
10	Federal revenues:		
11	Social security act, temporary assistance for		
12	needy families		24,471,400
13	Capped federal revenues		20,556,700
14	Total other federal revenues		335,999,300
15	Special revenue funds:		
16	Total private revenues		5,250,000
17	Total other state restricted revenues		2,010,400
18	<b>State general fund/general purpose</b>		<b>\$ 147,137,200</b>
19	<b>Sec. 122. ONE-TIME APPROPRIATIONS</b>		
20	ALS services		\$ 829,900
21	Behavioral health services		3,500,000
22	Behavioral health urgent care		1,700,000
23	Child advocacy centers		3,500,000
24	Children's behavioral health service expansion		2,000,000
25	Children's services administration training		2,000,000
26	CMHSP crisis services		2,000,000
27	Community substance use disorder, education,		
28	and treatment		1,800,000

1	Complex medical condition center	500,000
2	Cranial hair prosthesis	250,000
3	Critical access hospital facility and equipment	2,000,000
4	Deferred maintenance	1,000,000
5	Dental clinic	2,900,000
6	Dental programs	2,500,000
7	Domestic violence shelter operations	300,000
8	Doula training and continuing education	2,909,800
9	Emergency medical services program	500,000
10	Employment and training support services	2,500,000
11	Firearm injury and violence prevention	7,500,000
12	Firearm safety and violence prevention	1,800,000
13	Firefighter health care	3,500,000
14	First responder and public safety staff mental	
15	health	5,000,000
16	Health equity statewide curriculum	500,000
17	Home health care authority	1,000,000
18	Homeless programs	2,750,000
19	Hospice caregiver support center	1,000,000
20	Inpatient behavioral health facility	5,000,000
21	Maternal health services	420,000
22	Medical center robotic surgery	2,000,000
23	Medical debt relief pilot program	100
24	Mental health educational interventions	1,000,000
25	Multicultural integration funding	8,600,000
26	Narcotics awareness program	5,000,000
27	Native American health services	1,000,000
28	Nurse incentive program	2,500,000

1	Nurse workforce development	10,000,000
2	Opioid response activities	9,820,000
3	Patient-centered medical home	1,000,000
4	Pediatric lead testing pilot	1,000,000
5	Pediatric psychiatric urgent care center	5,000,000
6	Permanent supportive housing	100
7	Preweatherization services	10,000,000
8	Sexual assault and domestic violence prevention	
9	services	3,500,000
10	Sickle cell center	2,500,000
11	Suicide loss survivor program	250,000
12	State employees' retirement system	
13	implementation costs	700,000
14	Supportive home visitation	1,000,000
15	Transitional housing	1,750,000
16	Tribal homeless shelter operations	750,000
17	Water affordability	10,000,000
18	<b>GROSS APPROPRIATION</b>	<b>\$ 138,529,900</b>
19	Appropriated from:	
20	Federal revenues:	
21	Total other federal revenues	1,454,900
22	Special revenue funds:	
23	Total other state restricted revenues	9,820,000
24	<b>State general fund/general purpose</b>	<b>\$ 127,255,000</b>

PART 2

PROVISIONS CONCERNING APPROPRIATIONS

FOR FISCAL YEAR 2024-2025

**GENERAL SECTIONS**



1           Sec. 201. In accordance with section 30 of article IX of the  
 2 state constitution of 1963, for the current fiscal year, total  
 3 state spending under part 1 from state sources is  
 4 \$10,711,463,100.00 and state spending under part 1 from state  
 5 sources to be paid to local units of government is  
 6 \$2,087,194,300.00. The following itemized statement identifies  
 7 appropriations from which spending to local units of government  
 8 will occur:

9	<b>DEPARTMENT OF HEALTH AND HUMAN SERVICES</b>	
10	<b>CHILD SUPPORT ENFORCEMENT</b>	
11	Child support incentive payments	\$ 9,570,000
12	Legal support contracts	1,300
13	<b>COMMUNITY SERVICES AND OUTREACH</b>	
14	Homeless programs	9,900
15	Housing and support services	124,700
16	<b>CHILDREN'S SERVICES AGENCY - CHILD WELFARE</b>	
17	Child care fund	181,742,300
18	Child care fund - indirect cost allotment	3,500,000
19	Child welfare licensing	68,300
20	Children's trust fund	60,800
21	Contractual services, supplies, and materials	10,500
22	Family preservation programs	2,000
23	Foster care payments	3,344,200
24	Prosecuting attorney contracts	1,269,100
25	Strong families/safe children	65,400
26	Youth in transition	300
27	<b>CHILDREN'S SERVICES AGENCY - JUVENILE JUSTICE</b>	
28	Bay Pines Center	49,700

1	Community support services	333,500
2	County juvenile officers	73,300
3	Shawono Center	2,000
4	<b>PUBLIC ASSISTANCE</b>	
5	Emergency services local office allocations	10,996,900
6	Indigent burial	6,000
7	Michigan energy assistance program	356,100
8	State disability assistance payments	174,200
9	<b>LOCAL OFFICE OPERATIONS AND SUPPORT SERVICES</b>	
10	Contractual services, supplies, and materials	91,700
11	Employment and training support services	6,200
12	<b>DISABILITY DETERMINATION SERVICES</b>	
13	Disability determination operations	2,000
14	<b>BEHAVIORAL HEALTH PROGRAM ADMINISTRATION AND</b>	
15	<b>SPECIAL PROJECTS</b>	
16	Behavioral health program administration	121,700
17	Community substance use disorder prevention,	
18	education, and treatment	8,783,500
19	Gambling addiction	1,333,700
20	Mental health diversion council	255,100
21	Opioid response activities	31,770,500
22	<b>BEHAVIORAL HEALTH SERVICES</b>	
23	Autism services	118,168,600
24	Behavioral health community supports and	
25	services	171,800
26	Certified community behavioral health clinic	
27	demonstration	122,766,700
28	Community mental health non-Medicaid services	125,578,200

1	Health homes	4,725,900
2	Healthy Michigan plan - behavioral health	53,653,100
3	Medicaid mental health services	1,096,529,500
4	Medicaid substance use disorder services	34,166,300
5	Multicultural integration funding	1,064,400
6	Nursing home PAS/ARR-OBRA	3,789,400
7	State disability assistance program substance	
8	use disorder services	2,018,000
9	<b>STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL</b>	
10	<b>HEALTH SERVICES</b>	
11	Caro Regional Mental Health Center -	
12	psychiatric hospital - adult	183,600
13	Center for forensic psychiatry	674,000
14	Kalamazoo Psychiatric Hospital - adult	66,200
15	Walter P. Reuther Psychiatric Hospital - adult,	
16	children, and adolescents	109,900
17	<b>HEALTH AND HUMAN SERVICES POLICY AND</b>	
18	<b>INITIATIVES</b>	
19	Crime victim rights services grants	11,593,000
20	Domestic violence prevention and treatment	163,000
21	Primary care services	79,800
22	<b>EPIDEMIOLOGY, EMERGENCY MEDICAL SERVICES, AND</b>	
23	<b>LABORATORY</b>	
24	Emergency medical services program	4,800
25	Epidemiology administration	448,700
26	Healthy homes program	1,301,700
27	PFAS and environmental contamination response	200
28	<b>LOCAL HEALTH AND ADMINISTRATIVE SERVICES</b>	

1	AIDS prevention, testing, and care programs	2,705,800
2	Cancer prevention and control program	43,600
3	Essential local public health services	71,269,300
4	Local health services	1,928,900
5	Public health administration	200
6	Sexually transmitted disease control program	775,400
7	Smoking prevention program	242,100
8	<b>FAMILY HEALTH SERVICES</b>	
9	Dental programs	25,000
10	Drinking water declaration of emergency	136,500
11	Family planning local agreements	224,000
12	Immunization program	2,155,600
13	Pregnancy prevention program	65,000
14	Prenatal care outreach and service delivery	
15	support	8,806,900
16	<b>CHILDREN'S SPECIAL HEALTH CARE SERVICES</b>	
17	Medical care and treatment	796,700
18	Outreach and advocacy	2,708,200
19	<b>AGING SERVICES</b>	
20	Community services	33,526,500
21	Nutrition services	12,597,200
22	Respite care program	5,800,000
23	Senior volunteer service programs	954,100
24	<b>HEALTH AND AGING SERVICES ADMINISTRATION</b>	
25	Aging services administration	200,200
26	<b>HEALTH SERVICES</b>	
27	Adult home help services	81,900
28	Ambulance services	840,600

1	Dental services	787,000
2	Healthy Michigan plan	896,700
3	Hospital services and therapy	400,000
4	Long-term care services	88,061,900
5	Medicaid home- and community-based services	
6	waiver	14,314,200
7	Personal care services	17,600
8	Physician services	2,854,200
9	Transportation	597,300
10	<b>ONE-TIME APPROPRIATIONS</b>	
11	CMHSP crisis services	2,000,000
12	<b>TOTAL OF PAYMENTS TO LOCAL UNITS OF GOVERNMENT</b>	<b>\$ 2,087,194,300</b>

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

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

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

18       (b) "CCBHC" means certified community behavioral health  
19 clinic.

20       (c) "CMHSP" means a community mental health services program  
21 as that term is defined in section 100a of the mental health code,  
22 1974 PA 258, MCL 330.1100a.

23       (d) "CMS" means the Centers for Medicare and Medicaid  
24 Services.

25       (e) "CPT" means current procedural terminology.

26       (f) "Current fiscal year" means the fiscal year ending  
27 September 30, 2025.

28       (g) "Department" means the department of health and human  
29 services.

- 1 (h) "Director" means the director of the department.
- 2 (i) "EPSDT" means early and periodic screening, diagnosis, and  
3 treatment.
- 4 (j) "Federal poverty level" means the poverty guidelines  
5 revised periodically and published in the Federal Register by the  
6 Secretary of the United States Department of Health and Human  
7 Services under the Secretary's authority to revise the poverty line  
8 under 42 USC 9902.
- 9 (k) "FQHC" means federally qualified health center.
- 10 (l) "FTE" means full-time equated.
- 11 (m) "GME" means graduate medical education.
- 12 (n) "Health plan" means, at a minimum, an organization that  
13 meets the criteria for delivering the comprehensive package of  
14 services under the department's comprehensive health plan.
- 15 (o) "HEDIS" means health care effectiveness data and  
16 information set.
- 17 (p) "HMO" means health maintenance organization.
- 18 (q) "IDEA" means the individuals with disabilities education  
19 act, 20 USC 1400 to 1482.
- 20 (r) "IDG" means interdepartmental grant.
- 21 (s) "MCH" means maternal and child health.
- 22 (t) "Medicaid" means subchapter XIX of the social security  
23 act, 42 USC 1396 to 1396w-8.
- 24 (u) "Medicare" means subchapter XVIII of the social security  
25 act, 42 USC 1395 to 1395III.
- 26 (v) "MiCAFE" means Michigan's coordinated access to food for  
27 the elderly.
- 28 (w) "MiChild" means the program described in section 1670 of  
29 this part.

1 (x) "MiSACWIS" means Michigan statewide automated child  
2 welfare information system.

3 (y) "PACE" means program of all-inclusive care for the  
4 elderly.

5 (z) "PAS/ARR-OBRA" means the preadmission screening and annual  
6 resident review required under the omnibus budget reconciliation  
7 act of 1987, section 1919(e) (7) of the social security act, 42 USC  
8 1396r.

9 (aa) "PATH" means Partnership. Accountability. Training. Hope.

10 (bb) "PFAS" means perfluoroalkyl and polyfluoroalkyl  
11 substances.

12 (cc) "PIHP" means an entity designated by the department as a  
13 regional entity or a specialty prepaid inpatient health plan for  
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 (dd) "Previous fiscal year" means the fiscal year ending  
21 September 30, 2024.

22 (ee) "Quarterly basis" means February 1, April 1, July 1, and  
23 September 30 of the current fiscal year.

24 (ff) "Semiannual basis" means March 1 and September 30 of the  
25 current fiscal year.

26 (gg) "Settlement" means the settlement agreement entered in  
27 the case of *Dwayne B. v Snyder*, Docket No. 2:06-cv-13548 in the  
28 United States District Court for the Eastern District of Michigan.

29 (hh) "SSI" means supplemental security income.

1 (ii) "Standard report recipients" means the senate and house  
2 of representatives appropriations subcommittees on the department  
3 budget, the senate and house fiscal agencies, the senate and house  
4 of representatives policy offices, and the state budget office.

5 (jj) "STEMI" means an ST-elevation myocardial infarction.

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

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

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

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

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

18 Sec. 204. The department shall use the internet to fulfill the  
19 reporting requirements of this part. This requirement includes  
20 transmitting reports to the standard report recipients and any  
21 other required recipients by email and posting the reports on an  
22 internet site.

23 Sec. 205. To the extent permissible under section 261 of the  
24 management and budget act, 1984 PA 431, MCL 18.1261, all of the  
25 following apply to the expenditure of funds appropriated in part 1:

26 (a) The funds must not be used for the purchase of foreign  
27 goods or services, or both, if competitively priced and of  
28 comparable quality American goods or services, or both, are  
29 available.



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

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

8 Sec. 206. To the extent permissible under the management and  
9 budget act, 1984 PA 431, MCL 18.1101 to 18.1594, the director shall  
10 take all reasonable steps to ensure geographically-disadvantaged  
11 business enterprises compete for and perform contracts to provide  
12 services or supplies, or both. The director shall strongly  
13 encourage firms with which the department contracts to subcontract  
14 with certified geographically-disadvantaged business enterprises  
15 for services, supplies, or both. As used in this section,  
16 "geographically-disadvantaged business enterprises" means that term  
17 as defined in Executive Directive No. 2019-08.

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

28 (a) The dates of each travel occurrence.

29 (b) The total transportation and related expenses of each

1 travel occurrence and the proportions funded with state general  
2 fund/general purpose revenues, state restricted revenues, federal  
3 revenues, and other revenues.

4 Sec. 208. The department shall not use funds appropriated in  
5 part 1 to hire a person to provide legal services that are the  
6 responsibility of the attorney general. This section does not apply  
7 to legal services for bonding activities or to outside services  
8 that the attorney general authorizes.

9 Sec. 209. Not later than December 15, the state budget office  
10 shall prepare and submit a report that provides estimates of the  
11 total general fund/general purpose appropriation lapses at the  
12 close of the previous fiscal year. The report must summarize the  
13 projected year-end general fund/general purpose appropriation  
14 lapses by major departmental program or program areas. The state  
15 budget office shall submit the report to the standard report  
16 recipients and to the chairpersons of the senate and house of  
17 representatives appropriations committees.

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

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

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

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

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

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

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

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

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

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

26 (e) Job specifications and wage rates.

27 Sec. 212. Not later than 14 days after the release of the  
28 executive budget recommendation, the department shall cooperate  
29 with the state budget office to provide an annual report on

1 estimated state restricted fund balances, state restricted fund  
2 projected revenues, and state restricted fund expenditures for the  
3 previous 2 fiscal years. The report must be submitted to the  
4 standard report recipients and to the chairpersons of the senate  
5 and house of representatives appropriations committees.

6 Sec. 215. If either of the following events occurs, not later  
7 than 30 days after the event occurs, the department shall notify  
8 the standard report recipients of that fact:

9 (a) A legislative objective of this part or of a bill or  
10 amendment to a bill to amend the social welfare act, 1939 PA 280,  
11 MCL 400.1 to 400.119b, cannot be implemented because implementation  
12 would conflict with or violate federal law.

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

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

21 (2) The department's ability to satisfy appropriation fund  
22 sources in part 1 is not limited to collections and accruals  
23 pertaining to services provided in the current fiscal year and  
24 includes reimbursements, refunds, adjustments, and settlements from  
25 prior years.

26 Sec. 217. Not later than February 1 of the current fiscal  
27 year, the department shall submit, to the standard report  
28 recipients, a report on the detailed names and amounts of estimated  
29 federal, restricted, private, and local sources of revenue that

1 support the appropriations in each of the line items in part 1 for  
2 the previous fiscal year. The report must itemize, rather than  
3 aggregate, specific revenue sources deposited into the generic  
4 statewide integrated governmental management application (SIGMA)  
5 fund numbers 1200, 1274, 4000, and 5000.

6 Sec. 218. As required under part 23 of the public health code,  
7 1978 PA 368, MCL 333.2301 to 333.2321, the appropriations in part 1  
8 must include the following:

9 (a) Immunizations.

10 (b) Communicable disease control.

11 (c) Sexually transmitted infection control.

12 (d) Tuberculosis control.

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

14 (f) Screening newborn infants for the conditions listed in  
15 section 5431 of the public health code, 1978 PA 368, MCL 333.5431,  
16 or recommended by the newborn screening quality assurance advisory  
17 committee created under section 5430 of the public health code,  
18 1978 PA 368, MCL 333.5430.

19 (g) Health and human services annex of the Michigan Emergency  
20 Management Plan.

21 (h) Prenatal care.

22 (i) Mental health.

23 Sec. 219. (1) The department may contract with the Michigan  
24 Public Health Institute for the design and implementation of  
25 projects and for other public health-related activities prescribed  
26 in section 2611 of the public health code, 1978 PA 368, MCL  
27 333.2611. The department may develop a master agreement with the  
28 Michigan Public Health Institute to carry out the activities  
29 described in this subsection for up to a 1-year period.

1           (2) On a semiannual basis, the department shall submit, to the  
2 standard report recipients, a report that includes all of the  
3 following:

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

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

8           (c) The expected project duration.

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

12           (3) On a semiannual basis, the department shall provide, to  
13 the standard report recipients, a copy of all reports, studies, and  
14 publications produced by the Michigan Public Health Institute, its  
15 subcontractors, or the department with the funds appropriated in  
16 the department's budget in the previous fiscal year and allocated  
17 to the Michigan Public Health Institute.

18           Sec. 220. The department shall ensure that faith-based  
19 organizations are able to apply and compete for services, programs,  
20 or contracts that the organizations are qualified and suitable to  
21 fulfill. The department shall not disqualify faith-based  
22 organizations solely on the basis of the religious nature of the  
23 organizations or the guiding principles or statements of faith for  
24 the organizations.

25           Sec. 221. In accordance with section 1b of the social welfare  
26 act, 1939 PA 280, MCL 400.1b, the department shall treat part 1 and  
27 this part as a time-limited addendum to the social welfare act,  
28 1939 PA 280, MCL 400.1 to 400.119b.

29           Sec. 222. (1) The department shall submit a report to the

1 standard report recipients of a major policy change at least 30  
2 days before the implementation date of the policy change.

3 (2) The department shall make the entire policy and procedures  
4 manual available and accessible to the public on the department's  
5 website.

6 (3) Not later than April 1, the department shall report on  
7 each specific policy change made to implement a public act  
8 affecting the department that took effect during the previous  
9 calendar year. The department shall submit the report to the  
10 standard report recipients, the senate and house of representatives  
11 appropriations committees, and to the joint committee on  
12 administrative rules.

13 (4) The department shall attach each policy bulletin issued  
14 during the prior calendar year to the report issued in subsection  
15 (3).

16 Sec. 223. The department may establish and collect fees for  
17 publications, videos and related materials, conferences, and  
18 workshops. Collected fees are appropriated when received and must  
19 be used to offset expenditures for publication printing and  
20 mailing, costs of the publications, videos and related materials,  
21 conferences, and workshops. The department shall not collect fees  
22 under this section that exceed the cost of the expenditures. If  
23 collected fees are appropriated under this section in an amount  
24 that exceeds the current fiscal year appropriation, not later than  
25 30 days after the collected fee appropriation, the department shall  
26 notify the standard report recipients of that fact.

27 Sec. 224. The department may retain all of this state's share  
28 of food assistance overissuance collections as an offset to general  
29 fund/general purpose costs. Retained collections must be applied

1 against federal funds deductions in all appropriation units where  
2 department costs related to the investigation and recoupment of  
3 food assistance overissuances are incurred. Retained collections in  
4 excess of the investigation and recoupment costs must be applied  
5 against the federal funds deducted in the departmental  
6 administration and support appropriation unit.

7 Sec. 226. If the revenue collected by the department from fees  
8 and collections exceeds the amount appropriated in part 1, the  
9 revenue may be carried forward with the approval of the state  
10 budget director into the subsequent fiscal year. The revenue  
11 carried forward under this section must be used as the first source  
12 of funds in the subsequent fiscal year.

13 Sec. 227. If the department receives tobacco tax funds and  
14 Healthy Michigan fund revenue from part 1, not later than April 1  
15 of the current fiscal year, the department shall submit, to the  
16 standard report recipients, a report on both of the following  
17 activities during the previous fiscal year:

18 (a) Tobacco tax revenue appropriations in the Medicaid  
19 program.

20 (b) Information for each project implemented with revenue  
21 under this section, including all of the following:

22 (i) The project's name.

23 (ii) The appropriation line item and amount.

24 (iii) The project's target population.

25 (iv) A description of the project.

26 (v) The outcomes or accomplishments of the project.

27 Sec. 228. If the department is authorized under federal law or  
28 the law of this state to collect an overpayment owed to the  
29 department, beginning 60 days after the initial notification date



1 of the overpayment amount, the department may assess a penalty of  
2 1% per month. If an overpayment is caused by department error, a  
3 penalty may be assessed 6 months after the initial notification  
4 date of the overpayment amount. The department shall not collect  
5 penalty interest in an amount that exceeds the amount of the  
6 original overpayment. This state's share of any funds collected  
7 under this section must be deposited in the general fund of this  
8 state.

9 Sec. 230. Not later than December 31 of the current fiscal  
10 year, the department shall submit, to the standard report  
11 recipients, a report on the status of the implementation of any  
12 noninflationary, noncaseload, programmatic funding increases in the  
13 current fiscal year from the previous fiscal year. The report must  
14 confirm the implementation of already-implemented funding increases  
15 and provide an explanation for any planned implementation of  
16 funding increases that have not yet occurred. For any planned  
17 implementation of funding increases that have not yet occurred, the  
18 report must include an expected implementation date and the reason  
19 for delayed implementation.

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

25 (a) Continue the direct care wage increase funded at the same  
26 level as the previous fiscal year for the services noted in the  
27 department's Medicaid provider letter L 21-76 under the Medicaid  
28 managed care organization's relevant program.

29 (b) Ensure, to the greatest extent possible, that the full

1 amount of funds appropriated for a direct care worker wage, except  
2 for costs incurred by the employer, including payroll taxes, is  
3 provided to direct care workers through maintained increased wages.

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

7 (d) Require each direct care worker agency that the Medicaid  
8 managed care organization subcontracts with to track and report  
9 annually the total amount and percentage of Medicaid reimbursements  
10 paid to the direct care worker agency that are used to pay direct  
11 care worker wages.

12 (e) Require each direct care worker agency that the Medicaid  
13 managed care provider subcontracts with to track and report  
14 annually the hourly wages paid for each direct care worker hired by  
15 the direct care worker agency.

16 (f) Track annually the hourly wages paid to each direct care  
17 worker hired directly by the Medicaid managed care organization or  
18 CMHSP.

19 (g) Submit, to the department, a report that includes the  
20 information tracked or reported under subdivisions (d), (e), and  
21 (f).

22 (2) Not later than March 1 of the current fiscal year, the  
23 department shall provide the report required under subsection  
24 (1)(g) to the standard report recipients.

25 Sec. 232. The department shall provide the approved spending  
26 plan for each line item receiving an appropriation in the current  
27 fiscal year to the senate and house of representatives  
28 appropriations subcommittees on the department budget and the  
29 senate and house fiscal agencies not later than 60 days after

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

25 Sec. 234. The department shall receive and retain copies of  
26 all reports funded from appropriations in part 1. The department  
27 shall follow federal and state guidelines for short-term and long-  
28 term retention of records. The department may electronically retain  
29 copies of reports unless otherwise required by federal and state

1 guidelines.

2 Sec. 235. (1) Funds appropriated in part 1 must not be used to  
3 restrict or impede a marginalized community's access to government  
4 resources, programs, or facilities.

5 (2) From the funds appropriated in part 1, local governments  
6 shall report any action or policy that attempts to restrict or  
7 interfere with the duties of the local health officer.

8 Sec. 238. It is the intent of the legislature that the  
9 department maximize the efficiency of the state workforce and, if  
10 possible, prioritize in-person work, and post its in-person,  
11 remote, or hybrid work policy on its website.

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

19 Sec. 240. To the extent possible, the department shall not  
20 expend appropriations under part 1 until all existing authorized  
21 work project funds available for the same purposes are exhausted.

22 Sec. 241. Not later than March 1 of the current fiscal year,  
23 the department shall submit, to the standard report recipients, a  
24 report on total actual expenditures in the previous fiscal year for  
25 advertising and media outreach, including the purpose, amount, and  
26 fund source by program or appropriation line item.

27 Sec. 242. Not later than March 1 of the current fiscal year,  
28 the department shall submit a description of programs report to the  
29 standard report recipients. For each program, the report must

1 include the appropriation unit; the line item name and number; the  
2 appropriation history; the program name; the program overview; a  
3 financing summary; and, where applicable, the program's legal  
4 basis, effectiveness, and outcomes.

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

17       Sec. 253. (1) The department shall ensure that each federally  
18 recognized tribe is able to apply and compete for services,  
19 programs, grants, and contracts.

20       (2) For competitive grant programs described in this part,  
21 each federally recognized tribe is eligible to apply for grant  
22 funds made available to organizations exempt from federal income  
23 tax under section 501(c)(3) of the internal revenue code of 1986,  
24 26 USC 501, and to local units of government.

25       Sec. 263. (1) Except as provided in this subsection, before  
26 submission of a waiver, state plan amendment, or similar proposal  
27 to CMS or another federal agency, the department shall notify the  
28 standard report recipients of the planned submission. This  
29 subsection does not apply to the submission of a waiver, state plan

1 amendment, or similar proposal that does not propose a material  
2 change or is outside of the ordinary course of a waiver, state plan  
3 amendment, or similar proposal.

4 (2) On a semiannual basis, the department shall submit, to the  
5 standard report recipients, a report that summarizes the status of  
6 any new or ongoing discussions with CMS, the United States  
7 Department of Health and Human Services, or another federal agency  
8 regarding any potential or future waiver applications and the  
9 status of any submitted waivers that have not yet received federal  
10 approval. If there is not a reportable item at the time that a  
11 semiannual report is due, a report is not required.

12 Sec. 264. The department shall not take disciplinary action  
13 against an employee of the department for communicating with a  
14 member of the senate or house of representatives or a member's  
15 staff, unless the communication is prohibited by law and the  
16 department is exercising its authority as provided by law.

17 Sec. 270. The department shall advise the legislature of the  
18 receipt of a notification from the attorney general's office of a  
19 legal action in which expenses had been recovered under section  
20 106(6) of the social welfare act, 1939 PA 280, MCL 400.106. If  
21 applicable, not later than February 1 of the current fiscal year,  
22 the department shall submit, to the standard report recipients, a  
23 report that includes, but is not limited to, all of the following:

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

25 (b) The program or service for which the money was originally  
26 expended.

27 (c) Details on the disposition of the funds recovered, such as  
28 the appropriation or revenue account in which the money was  
29 deposited.

1 (d) A description of the facts involved in the legal action.  
2 Sec. 274. On the day that is 1 week after the day that the  
3 governor submits the executive budget proposal for the ensuing  
4 fiscal year to the legislature, the department, in collaboration  
5 with the state budget office, shall submit, to the standard report  
6 recipients, a report on spending and revenue projections for each  
7 of the capped federal funds listed in this subsection. The report  
8 must contain actual spending and revenue in the previous fiscal  
9 year, spending and revenue projections for the current fiscal year  
10 as enacted, and spending and revenue projections in the executive  
11 budget proposal for the immediately ensuing fiscal year for each  
12 individual line item for the department budget. The report must  
13 also include federal funds transferred to other departments. The  
14 capped federal funds include, but are not limited to, all of the  
15 following:

- 16 (a) TANF.  
17 (b) Title XX social services block grant.  
18 (c) Title IV-B subpart I child welfare services block grant.  
19 (d) Title IV-B subpart II promoting safe and stable families  
20 funds.  
21 (e) Low-income home energy assistance program.

22 Sec. 275. (1) On a quarterly basis, the department, with the  
23 approval of the state budget director, is authorized to realign  
24 sources between other federal, TANF, and capped federal financing  
25 authorizations to maximize federal revenues. The realignment of  
26 financing must not produce any of the following:

- 27 (a) A gross increase or decrease in the department's total  
28 individual line item authorizations.  
29 (b) A net increase or decrease in total federal revenues.

1 (c) A net increase in TANF authorization.

2 (2) On a quarterly basis, the department shall submit, to the  
3 standard report recipients, a report on the realignment of federal  
4 fund sources transacted to date in the current fiscal year under  
5 subsection (1), including the dates, line items, and amounts of the  
6 transactions. If, at the time a quarterly report is due, a  
7 transaction was not made under subsection (1), a report is not  
8 required.

9 (3) Not later than 30 days after the date on which year-end  
10 book closing is completed, the department shall submit, to the  
11 standard report recipients, a report on the realignment of federal  
12 fund sources that took place as part of the year-end closing  
13 process for the previous fiscal year.

14 Sec. 290. Any public advertisement for public assistance must  
15 inform the public of the welfare fraud hotline operated by the  
16 department.

17 Sec. 295. Not later than April 1 of the current fiscal year,  
18 the department shall submit, to the standard report recipients, a  
19 report on funds appropriated for the healthy moms, healthy babies  
20 initiative. The report must include the budgeted amount, year-to-  
21 date expenditures, remaining balance of appropriations, and the  
22 percent of budget spent for each appropriation related to the  
23 initiative. The report must also include information on how the  
24 funds have assisted with meeting the goals and outcomes of the  
25 initiative.

26 Sec. 296. From the funds appropriated in part 1, the  
27 department, to the extent permissible under section 8 of 1964 PA  
28 170, MCL 691.1408, is responsible for the necessary and reasonable  
29 attorney fees and costs incurred by private and independent legal



1 counsel chosen by current and former classified and unclassified  
2 department employees in the defense of the employees in any state  
3 or federal lawsuit or investigation related to the water system in  
4 a city or community in which a declaration of emergency was issued  
5 because of drinking water contamination.

6 Sec. 297. On a quarterly basis, the department shall report on  
7 the number of full-time equated positions in pay status by civil  
8 service classification, including a comparison by line item of the  
9 number of full-time equated positions authorized from funds  
10 appropriated in part 1 to the actual number of full-time equated  
11 positions employed by the department at the end of the reporting  
12 period. The report must be submitted to the senate and house of  
13 representatives appropriations committees and to the standard  
14 report recipients.

15

16 **CHILD SUPPORT ENFORCEMENT**

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

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

22 (3) From the federal money received for child support  
23 incentive payments, \$14,500,000.00 must be paid to counties based  
24 on each county's performance level for each of the performance  
25 measures under 45 CFR 305.2.

26 (4) If the child support incentive payment to this state from  
27 the federal government is greater than \$26,500,000.00, then 100% of  
28 the amount in excess must be retained by this state and is  
29 appropriated until the total retained by this state reaches

1 \$15,397,400.00.

2 (5) If the child support incentive payment to this state from  
3 the federal government is greater than the amount needed to satisfy  
4 subsections (1), (2), (3), and (4), the additional funds are  
5 subject to appropriation by the legislature.

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

10 Sec. 409. (1) If statewide retained child support collections  
11 exceed \$38,300,000.00, 75% of the amount in excess of  
12 \$38,300,000.00 is appropriated to legal support contracts. The  
13 excess appropriation may be distributed to eligible counties to  
14 supplement, but not supplant, county title IV-D funding.

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

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

1 (2) Not later than 30 days after an adjustment under  
2 subsection (1), the department shall notify the standard report  
3 recipients of the adjustment.

4  
5 **COMMUNITY SERVICES AND OUTREACH**

6 Sec. 450. (1) From the funds appropriated in part 1 for school  
7 success partnership program, not later than December 1 of the  
8 current fiscal year, the department shall allocate \$1,525,000.00 of  
9 TANF revenue to support Northeast Michigan Community Service Agency  
10 programming. The department shall require the Northeast Michigan  
11 Community Service Agency to measure and report the following  
12 performance objectives for the duration of the state funding for  
13 the school success partnership program:

14 (a) Increasing school attendance and decreasing chronic  
15 absenteeism.

16 (b) Increasing grade-based academic performance, with emphasis  
17 on math and reading.

18 (c) Identifying barriers to attendance and success and  
19 connecting families with resources to reduce the barriers.

20 (d) Increasing parent involvement.

21 (2) Not later than July 15 of the current fiscal year, the  
22 Northeast Michigan Community Service Agency shall submit a report  
23 to the department on the number of children and families served and  
24 the services that were provided to families to meet the performance  
25 objectives identified in this section. Not later than 1 week after  
26 the department receives the report, the department shall distribute  
27 the report to the standard report recipients.

28 Sec. 453. (1) From the funds appropriated in part 1 for  
29 homeless programs, the department shall allocate funds to the

1 emergency shelter program to support efforts of shelter providers  
2 to move homeless individuals and households into permanent housing  
3 as quickly as possible. The funds must be equal to or exceed the  
4 amount that a provider would receive if the provider is paid a  
5 \$19.00 per diem rate. Expected outcomes are increased shelter  
6 discharges to stable housing destinations, decreased recidivism  
7 rates for shelter clients, and a reduction in the average length of  
8 stay in emergency shelters.

9 (2) Not later than March 1 of the current fiscal year, the  
10 department shall submit, to the standard report recipients, a  
11 report on the total amount expended for the emergency shelter  
12 program in the prior 2 fiscal years, the total number of shelter  
13 nights provided, and the average length of stay in an emergency  
14 shelter.

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

19 Sec. 455. As a condition of receipt of federal TANF revenue,  
20 after admitting a family to a homeless shelter, the homeless  
21 shelter and human services agencies shall collaborate with the  
22 department to obtain necessary TANF eligibility information on the  
23 family as soon as possible. From the funds appropriated in part 1  
24 for homeless programs, the department is authorized to make  
25 allocations of TANF revenue only to the homeless shelters and human  
26 services agencies that report necessary data to the department to  
27 meet TANF eligibility reporting requirements. Homeless shelters or  
28 human services agencies that do not report necessary data to the  
29 department to meet TANF eligibility reporting requirements shall

1 not receive reimbursements that exceed the per diem amount the  
2 homeless shelters or human service agencies received in fiscal year  
3 2000. The use of TANF revenue under this section is not an ongoing  
4 commitment of funding.

5 Sec. 456. From the funds appropriated in part 1 for homeless  
6 programs, the department shall allocate \$10,000.00 to reimburse  
7 public service agencies that provide documentation of paying birth  
8 certificate fees on behalf of category 1 homeless clients at county  
9 clerk's offices. Each public service agency must be reimbursed for  
10 the cost of the birth certificate fees quarterly until the  
11 allocation is fully spent.

12 Sec. 457. From the funds appropriated in part 1 for homeless  
13 programs, the department shall allocate \$3,500,000.00 to provide  
14 housing supports for families involved with child welfare.

15 Sec. 460. From the funds appropriated in part 1 for kids' food  
16 basket, the department shall allocate \$1,025,000.00 to fund a  
17 project with a nonprofit, community-based organization organized  
18 under the laws of this state that is exempt from federal income tax  
19 under section 501(c)(3) of the internal revenue code of 1986, 26  
20 USC 501, and is located in a city with a population between 185,000  
21 and 200,000 and in a county with a population between 600,000 and  
22 700,000, according to the most recent federal decennial census. The  
23 nonprofit organization recipient must have an existing network of  
24 food delivery to low-income children in not less than 3 counties in  
25 this state. The nonprofit organization shall use the funds to  
26 expand its services to additional schools and communities. The  
27 funding may be used to cover employee costs, food and supplies,  
28 equipment, and other operational costs identified by the  
29 organization to support its mission and goals.

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

6           Sec. 464. (1) From the funds appropriated in part 1 for diaper  
7 assistance grant, \$4,404,400.00 must be allocated as grants to  
8 diaper assistance programs, maternity homes, and other nonprofit  
9 agencies that distribute diapers free of charge and were  
10 established as of January 1, 2020. The funds must be used only to  
11 purchase diapering supplies and to cover related administrative  
12 costs. Not more than 15% of the funds appropriated in part 1 are  
13 expendable for administrative purposes.

14           (2) Not later than March 1 of the current fiscal year, the  
15 department shall submit, to the standard report recipients, a  
16 report on the distribution of diaper assistance grant funds that  
17 includes, but is not limited to, the names and locations of grant  
18 recipients and the total amount of grant funding distributed to  
19 each recipient.

20           Sec. 465. (1) From the funds appropriated in part 1 for  
21 community services and outreach administration, \$3,950,000.00 must  
22 be distributed as provided in subsection (2). The amount  
23 distributed as provided in subsection (2) must not exceed 50% of  
24 the total operating expenses of Michigan 2-1-1, which is described  
25 in subsection (2), with the remaining 50% paid by local United Way  
26 organizations and other nonprofit organizations and foundations.

27           (2) Funds distributed under subsection (1) must be distributed  
28 to Michigan 2-1-1, a nonprofit corporation organized under the laws  
29 of this state that is exempt from federal income tax under section

1 501(c)(3) of the internal revenue code of 1986, 26 USC 501, and  
2 whose mission is to coordinate and support a statewide 2-1-1  
3 system. Michigan 2-1-1 shall use the funds only to fulfill the  
4 Michigan 2-1-1 business plan adopted by Michigan 2-1-1 in January  
5 2005.

6 (3) Michigan 2-1-1 shall refer any received calls that report  
7 fraud, waste, or abuse of state-administered public assistance to  
8 the department.

9 (4) Michigan 2-1-1 shall submit, to the department, the senate  
10 and house of representatives standing committees with primary  
11 jurisdiction over matters relating to human services and  
12 telecommunications on 2-1-1 system performance, and the standard  
13 report recipients, a report that includes, but is not limited to,  
14 call volume by health and human service needs and unmet needs  
15 identified through caller data and number and the percentage of  
16 callers referred to public or private provider types.

17 Sec. 466. (1) From the funds appropriated in part 1 for  
18 runaway and homeless youth grants, the department shall allocate  
19 \$5,342,100.00 that consists of \$1,146,900.00 in general  
20 fund/general purpose revenue and \$4,195,200.00 of TANF revenue to  
21 support the expansion of runaway and homeless youth capacity. The  
22 funding must be allocated as follows:

23 (a) \$3,205,300.00 to cover the 18 counties that are presently  
24 unserved by any runaway and homeless youth program and to expand  
25 the capacity for counties that are underserved.

26 (b) \$1,068,400.00 across 19 providers statewide to provide  
27 infrastructure support for expanded staff, supervision, and  
28 training to continue to meet the complex mental health needs of the  
29 population served.

1 (c) \$1,068,400.00 across 19 providers statewide to support  
2 upgrading technology and facilities to maintain safety in  
3 environments where youth are sheltered.

4 (2) Not later than March 1 of the current fiscal year, the  
5 department shall submit to the standard report recipients a report  
6 on the runaway homeless youth program, including, but not limited  
7 to, all of the following:

8 (a) A list of counties served and the amount of funding  
9 allocated to each county.

10 (b) The amount of funding being allocated to previously  
11 underserved communities and how capacity has been expanded or is  
12 planned to be expanded in those communities.

13 (c) Identified barriers that have hindered providers from  
14 expanding capacity.

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

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

21 (2) Not later than March 1 of the current fiscal year, the  
22 department shall submit, to the standard report recipients, a  
23 report describing the steps that will be taken to achieve the goal  
24 under subsection (1). The report must also include the following:

25 (a) An explanation of the most significant barriers that  
26 prevent long-term foster children from permanent placements.

27 (b) The number of children currently in foster care that  
28 qualify for specialty behavioral health supports and services  
29 through the CMHSPs and the percentage of those children that remain



1 in foster care for longer than 24 months.

2 Sec. 502. From the funds appropriated in part 1 for foster  
3 care, the department shall reimburse Indian tribal governments for  
4 50% of the foster care expenditures for children who are under the  
5 jurisdiction of Indian tribal courts and are not otherwise eligible  
6 for federal foster care cost sharing. However, the department may  
7 reimburse up to 100% of the foster care expenditures for an Indian  
8 tribal government that enters into a state-tribal title IV-E  
9 agreement allowed under this state's title IV-E state plan.

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

18 (2) The department, in conjunction with members from both the  
19 senate and house of representatives, private child placing  
20 agencies, the courts, and counties, shall continue to implement the  
21 recommendations that are described in the workgroup report that was  
22 provided in section 503 of article X of 2013 PA 59 to establish a  
23 performance-based funding model pilot program for public and  
24 private child welfare service providers. Not later than July 1 of  
25 the current fiscal year, the department shall submit a report on  
26 the status of the performance-based funding model to the standard  
27 report recipients and the senate and house of representatives  
28 standing committees that cover subject matters dealing with  
29 families and human services.

1           Sec. 504. (1) From the funds appropriated in part 1, the  
2 department shall implement a 3-year master agreement, with an  
3 option for 2 additional years, with the West Michigan Partnership  
4 for Children Consortium to maintain a performance-based child  
5 welfare contracting program. The Consortium must consist of a  
6 network of affiliated child welfare service providers that will  
7 accept and comprehensively assess referred youth, assign cases to  
8 its members or leverage services from other entities, and make  
9 appropriate case management decisions during the duration of a  
10 case.

11           (2) As a condition for receiving the funding in part 1, the  
12 West Michigan Partnership of Children Consortium shall maintain a  
13 contract agreement with the department that supports a global  
14 capitated payment model. The capitated payment amount must be based  
15 on historical averages of both the number of children served in  
16 Kent County and the costs per foster care case. The West Michigan  
17 Partnership for Children Consortium shall manage the cost of the  
18 child population it serves. The administrative portion of the  
19 contracted agreement must reflect the cumulative annual percentage  
20 change in the Detroit Consumer Price Index from the previous year.  
21 The capitated payment amount must be reviewed and adjusted not less  
22 than 2 times during the current fiscal year or for 1 or more of the  
23 following:

24           (a) Changes implemented by the department that result in a  
25 volume of placements that differ in a statistically significant  
26 manner from the amount allocated in the annual contract between the  
27 department and the West Michigan Partnership for Children  
28 Consortium, as determined by an independent actuary.

29           (b) Changes in case volumes and any statewide rate increases

1 that are implemented.

2 (3) The contract agreement under this section must require the  
3 following stipulations and conditions:

4 (a) That the service component of the capitated payment will  
5 be calculated under the assumption that rates paid to providers  
6 under the program are generally consistent with the department's  
7 payment policies for providers throughout the rest of this state.

8 (b) That the West Michigan Partnership for Children Consortium  
9 maintain a risk reserve of not less than \$1,500,000.00 to ensure it  
10 can meet unanticipated expenses within a given fiscal year.

11 (c) That the West Michigan Partnership for Children Consortium  
12 cooperate with the department on an independent fiscal analysis of  
13 costs incurred and revenues received.

14 (4) Not later than March 1 of the current fiscal year, the  
15 Consortium shall submit, to the standard report recipients, a  
16 report on the Consortium, including, but not limited to, its actual  
17 expenditures, the number of children placed by agencies in the  
18 Consortium, the fund balance of the Consortium, and the outcomes  
19 measured.

20 Sec. 505. Not later than March 1 of the current fiscal year,  
21 the department shall submit, to the standard report recipients, a  
22 report on youth referred or committed to the department for care or  
23 supervision in the previous fiscal year that outlines the number of  
24 youth served by the department in the juvenile justice system by  
25 the type of setting for each youth.

26 Sec. 506. From the funds appropriated in part 1 for attorney  
27 general contract, not later than March 1 of the current fiscal  
28 year, the department shall submit, to the standard report  
29 recipients, a report on the juvenile justice system in any county

1 in which funds appropriated in part 1 are expended. The report must  
2 include, but not be limited to, all of the following:

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

6 (b) The number of youth referred or committed to the care or  
7 supervision of the county in which funds appropriated in part 1  
8 were expended for the previous fiscal year and the first quarter of  
9 the current fiscal year.

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

13 (d) The required and actual staff-to-youth ratios.

14 Sec. 507. The department's ability to satisfy appropriation  
15 deductions in part 1 for foster care private collections is not  
16 limited to collections and accruals pertaining to services provided  
17 only in the current fiscal year and may include revenues collected  
18 during the current fiscal year for services provided in prior  
19 fiscal years.

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

24 (2) For the funds described in subsection (1), the department  
25 shall ensure that administrative delays are avoided and local grant  
26 recipients and direct service providers receive money in an  
27 expeditious manner. The department and the state board as that term  
28 is defined in section 2 of the child abuse and neglect prevention  
29 act, 1982 PA 250, MCL 722.601, shall make the children's trust fund

1 contract funds available to grantees not later than 31 days after  
2 the start date of the funded project.

3 Sec. 509. From the funds appropriated in part 1 for adoption  
4 support services, the department shall maintain the increase of  
5 contracted rates paid to private child placing agencies, including  
6 the \$23.00 per diem for all foster youth from the date of the case  
7 acceptance to the date of adoption petition acceptance or 150 days,  
8 whichever occurs sooner, for licensed child placing agencies  
9 contracted with the department to provide adoption services for  
10 foster youth. The per diem rate must be separate from the outcome-  
11 based reimbursement system and must not be deducted from the total  
12 reimbursement an agency receives for the applicable placement or  
13 finalization rate of an adoption.

14 Sec. 510. (1) From the funds appropriated in part 1 for child  
15 care fund and foster care payments, the department shall contract  
16 with licensed private foster care residential facilities to provide  
17 600 residential beds for foster youth, a 9% increase to the current  
18 rates provided to each provider of residential services for  
19 occupied beds, and an unoccupied bed rate that is not less than 90%  
20 of the licensed private foster care residential facility's occupied  
21 rate.

22 (2) The funds appropriated in this section must be used by a  
23 licensed private foster care residential facility to retain and  
24 recruit staff and to provide the appropriate levels of services to  
25 the foster youth.

26 (3) The funds appropriated in this section must not be used by  
27 the department to require, either through policy or contract, a  
28 licensed private foster care residential facility to comply with  
29 any of the following:

1 (a) Agree to rates that are less than the rates established  
2 under this section for each service type.

3 (b) Agree to create or comply with a pay schedule for hourly  
4 worker salaries.

5 (c) Agree to not deny services or remove a youth from the  
6 facility regardless of a residential facility's ability to properly  
7 care for the youth.

8 (d) Agree to penalties resulting in a residential facility  
9 having less than 100% filled capacity for any reason.

10 (e) Agree that a residential facility cover the cost of more  
11 than 6 months of aftercare for youth who have been discharged from  
12 its care.

13 (4) The department shall submit, to the standard report  
14 recipients, monthly reports on the number of children awaiting  
15 placement in a child caring institution in this state. Each report  
16 must include the number of children awaiting placement by child  
17 caring institution and must state the reason for the delay in  
18 placement, including, but not limited to, facility bed shortages,  
19 placement process delays, or other reasons.

20 Sec. 511. The department shall submit, to the standard report  
21 recipients and the senate and house of representatives standing  
22 committees that cover subject matters dealing with families and  
23 human services, reports on a semiannual basis that include the  
24 number and percentage of children who received timely physical and  
25 mental health examinations after entry into foster care. The goal  
26 of the program is for not less than 85% of children to have an  
27 initial medical and mental health examination that is not later  
28 than 30 days after entry into foster care.

29 Sec. 512. (1) The department shall complete an examination of

1 the effectiveness of the performance-based contracting model  
2 detailed in section 504(1) of article 6 of 2023 PA 119 to determine  
3 whether the contract should be continued.

4 (2) The review detailed in subsection (1) may include  
5 contractor performance in meeting contract performance measures  
6 related to child permanency, safety, and well-being as well as the  
7 cost effectiveness and efficiency of the program.

8 (3) The department shall submit to the standard report  
9 recipients a report on the findings of the review detailed in  
10 subsection (1) not later than 30 days after the review has been  
11 completed.

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

16 (a) An appropriate placement is not available in this state,  
17 as determined by the department's interstate compact office.

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

21 (c) The out-of-state facility meets all of the licensing  
22 standards for a comparable facility in this state.

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

25 (e) The department has visited the site of the out-of-state  
26 facility; has reviewed the facility records, licensing records, and  
27 reports; and believes that the facility is an appropriate placement  
28 for the child.

29 (2) The department shall not expend money for a child placed

1 in an out-of-state facility without approval of the executive  
2 director of the children's services agency.

3 (3) Not later than March 1 of the current fiscal year, the  
4 department shall submit, to the state court administrative office  
5 and the standard report recipients, a report on the number of  
6 Michigan children residing in out-of-state facilities in the  
7 previous fiscal year, the total cost and average per diem cost of  
8 the out-of-state placements to this state, and a list of each out-  
9 of-state placement arranged by the Michigan county of residence for  
10 each child.

11 Sec. 514. (1) From the funds appropriated in part 1 for foster  
12 care payments, the department shall maintain a statewide respite  
13 care services network available to licensed foster parents and  
14 unlicensed relative caregivers that care for children in foster  
15 care.

16 (2) Not later than March 1 of the current fiscal year, the  
17 department shall submit, to the standard report recipients, a  
18 report on the total number of licensed foster parents and  
19 unlicensed relative caregivers that were provided respite services,  
20 the average amount of respite time per month, and the total amount  
21 of funding spent on respite services during the first 6 months of  
22 the current fiscal year.

23 Sec. 516. (1) From funds appropriated in part 1 for child care  
24 fund, the administrative or indirect cost payment equal to 10% of a  
25 county's total monthly gross expenditures must be distributed to  
26 the county on a monthly basis, and a county is not required to  
27 submit documentation to the department for any of the expenditures  
28 that are covered under the 10% payment as described in section  
29 117a(4)(b)(ii) and (iv) of the social welfare act, 1939 PA 280, MCL



1 400.117a.

2 (2) From the funds appropriated in part 1 for child care fund  
3 - indirect cost allotment, the department shall allocate  
4 \$3,500,000.00 to counties and tribal governments that receive  
5 reimbursements in part 1 from child care fund.

6 (3) The amount described in subsection (2) must be distributed  
7 to each county or tribal government in the same proportion as  
8 indirect cost allotments are provided to counties in the same  
9 manner described in section 117a of the social welfare act, 1939 PA  
10 280, MCL 400.117a.

11 Sec. 517. For a child placed in a family foster care home  
12 located out of this state, the department may ask a state or  
13 private child placing agency contracted by the receiving state to  
14 carry out required visits and any additional visits that the  
15 department finds necessary.

16 Sec. 518. Not later than March 1 of the current fiscal year,  
17 the department shall submit, to the standard report recipients, a  
18 report on the cumulative child care fund expenditures of in-home  
19 juvenile justice care that are eligible for the 75% state and 25%  
20 local split required under section 117a(4) (i) of the social welfare  
21 act, 1939 PA 280, MCL 400.117a. Eligible expenditures include  
22 community-based juvenile supervision, services, and related  
23 practices, and per diem rates for the use of respite and shelter  
24 for less than 30 days. The report must also include the  
25 expenditures by county and type of service provided, the number of  
26 youth receiving care, and the number of days of care.

27 Sec. 520. Not later than February 15 of the current fiscal  
28 year, the department shall submit, to the standard report  
29 recipients, a report on the number of days of care and expenditures

1 by funding source for the previous fiscal year for out-of-home  
2 placements by specific placement programs for child abuse or child  
3 neglect and juvenile justice, including, but not limited to, paid  
4 relative placement, department direct family foster care, private-  
5 agency-supervised foster care, private child caring institutions,  
6 county-supervised facilities, and independent living. The report  
7 must also include the number of days of care for department-  
8 operated residential juvenile justice facilities by security  
9 classification.

10 Sec. 522. (1) From the funds appropriated in part 1 for youth  
11 in transition, the department shall allocate \$750,000.00 for  
12 scholarships through the fostering futures scholarship program in  
13 the Michigan education trust to youth who were in foster care  
14 because of child abuse or child neglect and are attending a college  
15 or a career technical educational institution located in this  
16 state. One hundred percent of the funds appropriated must be used  
17 to fund scholarships for the youth described in this section.

18 (2) Not later than June 1 of the current fiscal year, the  
19 department shall submit, to the standard report recipients, a  
20 report that includes the number of youth who applied for  
21 scholarships under this section, the number of youth who received  
22 scholarships under this section and the amount of each scholarship,  
23 and the total amount of funds spent or encumbered in the current  
24 fiscal year.

25 Sec. 523. (1) Not later than February 15 of the current fiscal  
26 year, the department shall submit, to the standard report  
27 recipients, a report on the families first, family reunification,  
28 and families together building solutions family preservation  
29 programs. The report must include both of the following:

1 (a) Population and outcome data based on families served.

2 (b) For each program, information on any innovations that may  
3 increase child safety and reduce risk.

4 (2) Not later than October 1 of the current fiscal year, from  
5 the funds appropriated in part 1 for family preservation services,  
6 the department shall increase the rates established by the increase  
7 under section 523(3) of article 6 of 2020 PA 166.

8 Sec. 524. As a condition of receiving funds appropriated in  
9 part 1 for strong families/safe children, not later than October 1  
10 of the current fiscal year, counties shall submit the service  
11 spending plan to the department for approval. Not later than 30  
12 calendar days after receipt of a properly completed service  
13 spending plan, the department shall approve the service spending  
14 plan.

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

21 Sec. 526. From the funds appropriated in part 1 for court-  
22 appointed special advocates, the department shall allocate  
23 \$2,500,000.00 to fund a project with a nonprofit, community-based  
24 organization organized under the laws of this state that is exempt  
25 from federal income tax under section 501(c)(3) of the internal  
26 revenue code of 1986, 26 USC 501, located in a charter township  
27 with a population between 18,000 and 19,000 that is located in a  
28 county with a population between 600,000 and 700,000, according to  
29 the most recent federal decennial census. The nonprofit

1 organization recipient must have an existing network of affiliate  
2 programs operating in not less than 25 counties in this state. The  
3 recipient nonprofit organization shall use the funds to recruit,  
4 screen, train, and supervise volunteers who provide advocacy  
5 services on behalf of abused and neglected children.

6 Sec. 528. From the funds appropriated in part 1 for child care  
7 fund, the department shall allocate \$3,730,300.00 to support the  
8 annual basic grant to counties with a population of less than  
9 75,000, according to the most recent federal decennial census, and  
10 as described in section 117e of the social welfare act, 1939 PA  
11 280, MCL 400.117e, and to eligible tribal entities. The basic grant  
12 must be \$56,520.00 to eligible counties and tribal entities.

13 Sec. 529. From the funds appropriated in part 1 for family  
14 preservation programs, the department shall increase the total  
15 combined funding levels of the families first, family  
16 reunification, and families together building solutions family  
17 preservation programs at an amount not less than the amount  
18 provided as of September 30, 2021.

19 Sec. 530. (1) All master contracts relating to foster care and  
20 adoption services as funded by the appropriations in section 105 of  
21 part 1 must be performance-based contracts that employ a client-  
22 centered and results-oriented process that is based on measurable  
23 performance indicators and desired outcomes and includes an annual  
24 assessment of the quality of services provided.

25 (2) Not later than February 1 of the current fiscal year, the  
26 department shall submit, to the standard report recipients, a  
27 report detailing measurable performance indicators, desired  
28 outcomes, and an assessment of the quality of services provided by  
29 the department during the previous fiscal year.

1           Sec. 533. Not later than 30 days after receiving all necessary  
2 documentation from a child placing facility, the department shall  
3 make payments to the child placing facility for in-home and out-of-  
4 home care services and adoption services. It is the intent of the  
5 legislature that the department has the burden of ensuring that the  
6 payments are made in a timely manner and are not in arrears.

7           Sec. 534. Not later than March 1 of the current fiscal year,  
8 the department shall submit, to the standard report recipients, a  
9 report on the adoption subsidies expenditures from the previous  
10 fiscal year. The report must include, but is not limited to, the  
11 range of non-\$0.00 annual adoption support subsidy amounts, for  
12 both title IV-E eligible cases and state-funded cases, paid to  
13 adoptive families; the number of title IV-E and state-funded cases;  
14 the number of cases in which an adoption support subsidy request by  
15 an adoptive parent was denied by the department; and the number of  
16 adoptive parents who requested an adoption support subsidy  
17 redetermination.

18           Sec. 537. Not later than March 1 of the current fiscal year,  
19 the department shall submit, to the standard report recipients, a  
20 report on the following information for cases of child abuse or  
21 child neglect from the previous fiscal year:

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

23           (b) The total number of relative care placements into  
24 unlicensed relative homes.

25           (c) The total number of relative care placements into licensed  
26 relative homes.

27           (d) The total number of unlicensed relative providers with a  
28 relative placement that were denied a foster home license due to  
29 not meeting the standards established for foster care licensing in

1 this state.

2 (e) From a sample of cases, a list of the reasons documented  
3 by the department for denial of relative foster home licensure.

4 (f) For licensed relative caregivers without placements, the  
5 status of title IV-E claims for foster care maintenance payments  
6 and foster care administrative payments.

7 Sec. 540. If a physician or psychiatrist who is providing  
8 services to a state or court ward placed in a residential facility  
9 submits a formal request to the department to change the  
10 psychotropic medication for a ward, the department shall, if the  
11 ward is a state ward, make a determination on the proposed change  
12 not later than 7 business days after the request or, if the ward is  
13 a temporary court ward, seek parental consent not later than 7  
14 business days after the request. If the determination or parental  
15 consent is not provided by the seventh business day, the department  
16 shall petition the court for the determination or consent on the  
17 eighth business day.

18 Sec. 546. (1) From the funds appropriated in part 1 for foster  
19 care payments and from child care fund, the department shall pay an  
20 administrative rate of not less than \$60.20 to providers of general  
21 foster care, independent living, and trial reunification services.

22 (2) From the funds appropriated in part 1, the department  
23 shall pay providers of independent living plus services per diem  
24 statewide rates for staff-supported housing and host-home housing  
25 that are based on proposals submitted in response to a solicitation  
26 for pricing. The independent living plus program provides staff-  
27 supported housing and services for foster youth 16 years of age to  
28 19 years of age who, because of their individual needs and  
29 assessments, are not initially appropriate for general independent

1 living foster care.

2 (3) If required by the federal government to meet title IV-E  
3 requirements, on a quarterly basis, providers of foster care  
4 services shall submit a report on expenditures to the department to  
5 identify actual costs of providing foster care services.

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

10 (2) The department shall submit, to the standard report  
11 recipients, a report that includes quarterly data on the number of  
12 children enrolled in the guardianship assistance and foster care -  
13 children with serious emotional disturbance waiver programs.

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

22 (2) Not later than 12 months after a date of service, a  
23 service provider shall submit a request for payment. A request for  
24 payment submitted later than 12 months after the date of service  
25 requires the provider to submit an exception request to the county  
26 or the department for approval or denial.

27 (3) A county is not subject to any offset, chargeback, or  
28 reimbursement liability for a prior expenditure resulting from an  
29 error in a foster care fund source determination.

1           Sec. 551. Not later than 30 days after a county requests a  
2 clarification through the department's child care fund management  
3 unit email address, the department shall respond to the request.

4           Sec. 552. Sixty days after a county's child care fund review  
5 is completed, including the receipt of all requested documentation  
6 from the county, the department shall provide the results of the  
7 review to the county. In the review, the department shall not  
8 evaluate the relevancy, quality, effectiveness, efficiency, or  
9 impact of the services provided to youth by the county's child care  
10 fund programs. The department shall not release the results of a  
11 county's child care fund review to a third party without the  
12 permission of the county.

13           Sec. 554. From the funds appropriated in part 1 for foster  
14 care payments, the department shall allocate \$50,000.00 to a  
15 nonprofit organization organized under the laws of this state that  
16 is exempt from federal income tax under section 501(c)(3) of the  
17 internal revenue code of 1986, 26 USC 501; currently has locations  
18 in 3 cities; operates on a 100% volunteer basis with a board of  
19 directors consisting of not more than 15 members; is a dedicated  
20 community of individuals that give their time, talent, and  
21 resources to provide the best quality shopping environment that  
22 they can to local children in need; and provides clothing, shoes,  
23 toys, linens, nursery furniture, strollers, car seats, school  
24 supplies, hygiene products, and safety equipment to local foster  
25 children and their families free of charge.

26           Sec. 557. If a vehicle that is owned by the state is available  
27 and not scheduled for use by other state workers, the department  
28 may consider a children's protective services caseworker or a  
29 foster care caseworker driving the vehicle to a foster home visit



1 or driving the vehicle to the caseworker's own home as an allowable  
2 use of the vehicle if the driving would be helpful to the  
3 caseworker in conducting the caseworker's work.

4 Sec. 559. (1) From the funds appropriated in part 1 for  
5 adoption support services, not later than December 1 of the current  
6 fiscal year, the department shall allocate \$750,000.00 to the  
7 Adoptive Family Support Network to operate and expand its adoptive  
8 parent mentor program to provide a listening ear, knowledgeable  
9 guidance, and community connections to adoptive parents and  
10 children who were adopted in this state or another state.

11 (2) Not later than March 1 of the current fiscal year, the  
12 Adoptive Family Support Network shall submit, to the standard  
13 report recipients, a report on the program described in subsection  
14 (1), including, but not limited to, the number of cases served and  
15 the number of cases in which the program prevented an out-of-home  
16 placement.

17 Sec. 560. From funds appropriated in part 1 for foster care  
18 payments, the department shall allocate \$100,000.00 to reimburse  
19 children in foster care for the costs of extracurricular  
20 activities, which include, but are not limited to, athletics,  
21 music, band, drama, and other enrichment activities.

22 Sec. 561. From the funds appropriated in part 1 for foster  
23 care payments, the department shall allocate \$1,000,000.00 to a  
24 nonprofit, community-based organization organized under the laws of  
25 this state that is exempt from federal income tax under section  
26 501(c)(3) of the internal revenue code of 1986, 26 USC 501, with  
27 the mission to ensure that individuals with developmental  
28 disabilities are valued so they and their families can fully  
29 participate in and contribute to their community, to provide

1 support for special education system navigation, and to improve  
2 educational outcomes for the following youth who have a diagnosed  
3 disability or suspected disability:

- 4 (a) Youth in foster care.
- 5 (b) Youth pursuing young adult voluntary foster care.
- 6 (c) Youth who were adopted within the past year.
- 7 (d) Youth who are part of a children's protective services'  
8 case of abuse and neglect.
- 9 (e) Youth in kinship care.

10 Sec. 562. If a foster parent transports a foster child to  
11 parent-child visitation, the department shall reimburse the foster  
12 parent for the foster parent's time and travel. As part of the  
13 foster care parent contract, the department shall provide written  
14 confirmation to foster parents that states that the foster parents  
15 have the right to request reimbursement for all parent-child  
16 visitations. Not later than 60 days after receiving a request from  
17 a foster parent for eligible reimbursement, the department shall  
18 provide the reimbursement.

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

23 (2) In accordance with the court-ordered number of required  
24 meetings between caseworkers and a parent, the caseworkers shall  
25 achieve a success rate of 85%, after accounting for factors outside  
26 of caseworker control.

27 (3) Not later than March 1 of the current fiscal year, the  
28 department shall submit, to the standard report recipients, a  
29 report on the following:

1 (a) The success rates for parent-child visitations and court-  
2 ordered required meetings under subsections (1) and (2) for the  
3 previous fiscal year.

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

6 Sec. 568. (1) The department shall ensure each youth  
7 transitioning out of foster care is given assistance with obtaining  
8 a driver license or state identification card and is issued a copy  
9 of the youth's Social Security number, as required by department  
10 policy. Assistance must be provided to each youth who is eligible  
11 to obtain a driver license or state identification card and, based  
12 on the youth's citizenship and legal residency status, a Social  
13 Security card.

14 (2) Not later than April 1 of the current fiscal year, the  
15 department shall submit, to the standard report recipients, a  
16 report on the number of youth who received assistance with  
17 obtaining a driver license or state identification card, the number  
18 of youth who received assistance with obtaining a Social Security  
19 card, and the number of youth who were eligible for assistance but  
20 did not receive the assistance and an explanation as to why the  
21 youth did not receive the assistance.

22 Sec. 569. The department shall reimburse each private child  
23 placing agency that completes an adoption at the rate on the date  
24 when the petition for adoption and the required support  
25 documentation were accepted by the court and not the rate on the  
26 date when the court's order placing for adoption was entered.

27 Sec. 574. (1) From the funds appropriated in part 1 for foster  
28 care payments, \$1,375,000.00 is allocated to support family  
29 incentive grants to private and community-based foster care service

1 providers for assistance with home improvements and items needed to  
2 ensure compliance with licensing rule requirements, including  
3 payment for physical exams needed by foster families, and, to  
4 accommodate children in foster care, alleviating potential safety  
5 concerns for unlicensed relatives caring for a family member  
6 through the child welfare system.

7 (2) Not later than March 1 of the current fiscal year, the  
8 department shall submit, to the standard report recipients, a  
9 report on the total amount expended in the previous year for grants  
10 to private and community-based foster care service providers for  
11 home improvements or physical exams described in subsection (1) and  
12 the number of grants issued.

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

18 (a) Establishing a public awareness campaign to educate the  
19 public about kinship caregivers and this state's efforts to better  
20 serve kinship caregivers.

21 (b) Consulting and coordinating with the kinship caregiver  
22 navigator program to collect aggregate data on individuals being  
23 served by the kinship caregiver navigator program, including  
24 information on what services the individuals need.

25 (c) Consulting and collaborating with the provider of the  
26 kinship caregiver navigator program on the design and  
27 administration of the program.

28 (d) Establishing, maintaining, and updating a list of local  
29 support groups and programs that provide services to kinship

1 families and, in order to obtain a better understanding of the  
2 issues facing kinship families, devising a plan of action for  
3 engaging with the groups and programs on the list.

4 (e) Developing methods to promote and improve collaboration  
5 between state, county, and local governments and agencies and  
6 private stakeholders for all of the following reasons:

7 (i) To obtain a broad understanding of the characteristics and  
8 prevalence of kinship caregiving.

9 (ii) To improve service delivery.

10 (iii) To include the methods in the council's recommendations.

11 Sec. 578. (1) From the funds appropriated in part 1 for foster  
12 care payments, the department shall allocate up to \$1,744,100.00 in  
13 Title IV-E passthrough funds for educational pilot programs to  
14 strengthen this state's child welfare workforce. The department  
15 shall enter into contractual arrangements with state universities  
16 to provide bachelor of social work and master of social work  
17 educational training, including field placements and stipends for  
18 tuition and educational expenses. In exchange, students completing  
19 eligible educational programs are contractually obligated to work  
20 for Michigan child welfare agencies for a minimum of 1 year. The  
21 matching funds for the Title IV-E funds must be provided by the  
22 participating state universities from the expenses incurred for  
23 training child welfare students who participate in the program.

24 (2) Not later than March 1 of the current fiscal year, the  
25 department shall submit, to the standard report recipients, a  
26 report on the status of pilot programs under subsection (1) that  
27 includes, but is not limited to, the total number of applicants,  
28 the total number of program participants, a list of state  
29 universities that participated in the pilot programs, and the total

1 amount of matching funds that each state university contributed to  
2 the programs.

3       Sec. 581. From the funds appropriated in part 1 for foster  
4 care payments, the department shall allocate \$50,000.00 for  
5 caseworkers to provide immediate assistance with urgent needs,  
6 including, but not limited to, food, clothing, and other basic  
7 necessities, for children, including children who are victims of  
8 human trafficking, on the children's removal from the children's  
9 homes or other dangerous environments. The department shall track  
10 the distribution of the funds and, not later than June 1 of the  
11 current fiscal year, submit, to the standard report recipients, a  
12 report on the amount of funds distributed and the number of  
13 children impacted.

14       Sec. 583. Not later than March 1 of the current fiscal year,  
15 the department shall submit, to the standard report recipients and  
16 the senate and house of representatives standing committees that  
17 cover subject matters dealing with families and human services, a  
18 report that includes both of the following:

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

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

26       (c) The number and percentage of licensed foster homes that  
27 terminated or did not renew their license because they adopted  
28 their foster child.

29       Sec. 585. Each month, the department shall make available at

1 least 1 pre-service training class in which new caseworkers for  
2 private foster care and adoption agencies can enroll.

3 Sec. 588. (1) Concurrently with public release, the department  
4 shall transmit, without revision, all reports from the court-  
5 appointed settlement monitor, including, but not limited to, the  
6 needs assessment and period outcome reporting, to the standard  
7 report recipients.

8 (2) Not later than October 1 of the current fiscal year, the  
9 department shall submit, to the standard report recipients, a  
10 detailed plan that addresses the status and progress toward exiting  
11 the settlement by September 30 of the current fiscal year. The  
12 report must include an update on the department's child welfare  
13 initiative.

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

17 (2) On a quarterly basis, the department shall submit a  
18 report, to the standard report recipients, on the monthly number of  
19 all foster care cases administered by the department and all foster  
20 care cases administered by private providers.

21 Sec. 592. On a quarterly basis, the department shall submit,  
22 to the chairs of the senate and house of representatives standing  
23 oversight committees and the standard report recipients, a report  
24 that includes data from children's protective services staff for  
25 each of the following for the most recent quarter before the  
26 applicable report is submitted:

27 (a) The percent of investigations commenced in 24 hours  
28 immediately after receiving a report.

29 (b) The percent of central registry reviews performed for

1 required individuals.

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

4 (d) In appropriate cases, the percent of sibling placement  
5 evaluations completed when 1 or more children remain in the home  
6 after a child has been removed.

7 (e) The percent of supervisory reviews performed in a timely  
8 manner.

9 (f) The results of a department survey of children's  
10 protective services investigators on the number of investigators  
11 who are concerned for their own personal safety.

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

14 Sec. 593. The department shall conduct an annual review in  
15 each county to determine if the county has adopted and implemented  
16 standard child abuse and child neglect investigation and interview  
17 protocols under section 8(6) of the child protection law, 1975 PA  
18 238, MCL 722.628.

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



1           Sec. 598. Partial child care fund reimbursements to counties  
2 for undisputed charges must not be made later than 45 business days  
3 after receipt of the required forms and documentation. Not later  
4 than 15 business days after receiving a request from a county for  
5 reimbursement of a disputed charge, the department shall commence  
6 activity to investigate and resolve the disputed reimbursement  
7 charge. The activity to investigate and resolve a disputed  
8 reimbursement charge may include, but is not limited to, the use of  
9 a formal appeals process under applicable law and the department  
10 chargeback policy. Not later than 45 business days after a properly  
11 corrected submission by the county, the department shall reimburse  
12 the county for the corrected charge or charges.

13  
14 **PUBLIC ASSISTANCE**

15           Sec. 601. After a client agrees to the release of the client's  
16 name and address to the local housing authority, the department  
17 shall request from the local housing authority information  
18 regarding whether the housing unit for which vendoring has been  
19 requested meets applicable local housing codes. Vendoring must be  
20 terminated if the local housing authority indicates in writing that  
21 the unit does not meet local housing codes and until the local  
22 housing authority indicates in writing that the local housing codes  
23 have been met.

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

27           Sec. 603. For any change in the income of a recipient of the  
28 food assistance program, the family independence program, or state  
29 disability assistance that results in a benefit decrease, the

1 department shall notify the recipient of the amount of the decrease  
2 not later than 15 work days before the first day of the month in  
3 which the decrease takes effect.

4 Sec. 604. (1) From the funds appropriated in part 1 for state  
5 disability assistance payments, the department shall operate a  
6 state disability assistance program. Except as provided in  
7 subsection (3), to be eligible for the program, an individual must  
8 be a needy citizen of the United States or alien exempted from the  
9 SSI citizenship requirement who is not less than 18 years of age,  
10 or an emancipated minor, and meets 1 or more of the following  
11 requirements:

12 (a) Is a recipient of SSI, Social Security, or medical  
13 assistance due to disability or being 65 years of age or older.

14 (b) Is an individual with a physical or mental impairment that  
15 meets federal SSI disability standards, except that the minimum  
16 duration of the disability must be 90 days. Substance use disorder  
17 alone is not a basis for eligibility.

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

21 (d) Is an individual receiving 30-day postresidential  
22 substance use disorder treatment.

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

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

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

28 (2) An applicant for or recipient of state disability  
29 assistance is considered needy if the applicant or recipient does

1 both of the following:

2 (a) Meets the same asset test as is applied for the family  
3 independence program.

4 (b) Has a monthly budgetable income that is less than the  
5 payment standards.

6 (3) Except for an individual described in subsection (1)(c) or  
7 (d), an individual is not disabled under this section if the  
8 individual's drug addiction or alcoholism is a contributing factor  
9 material to the determination of disability.

10 (4) As used in this section:

11 (a) "Material to the determination of disability" means that,  
12 if the individual stopped using drugs or alcohol, the individual's  
13 remaining physical or mental limitations would not be disabling. If  
14 the individual's remaining physical or mental limitations would be  
15 disabling, then the drug addiction or alcoholism is not material to  
16 the determination of disability and the individual may receive  
17 state disability assistance, but the individual must actively  
18 participate in a substance abuse treatment program, and the  
19 assistance must be paid to a third party or through vendor  
20 payments.

21 (b) "Substance abuse treatment" includes receipt of inpatient  
22 or outpatient services or participation in Alcoholics Anonymous or  
23 a similar program.

24 Sec. 605. The level of reimbursement provided to state  
25 disability assistance recipients in licensed adult foster care  
26 facilities must be the same as the prevailing SSI rate under the  
27 personal care category.

28 Sec. 606. County department offices shall require each  
29 recipient of family independence program and state disability

1 assistance who has applied with the Social Security Administration  
2 for SSI to sign a contract to repay any assistance rendered through  
3 the family independence program or state disability assistance  
4 program on receipt of retroactive SSI benefits.

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

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

17       Sec. 608. An adult foster care facility that provides  
18 domiciliary care or personal care to a resident receiving SSI or a  
19 home for the aged serving a resident receiving SSI shall not  
20 require a resident described in this section to reimburse the home  
21 for the aged or adult foster care facility for care at a rate in  
22 excess of a rate that is authorized by the legislature. To the  
23 extent permitted by federal law, an adult foster care facility and  
24 home for the aged that serves a resident receiving SSI is not  
25 prohibited from accepting a third-party payment in addition to SSI  
26 if the payment is not for food, clothing, or shelter, or would  
27 result in a reduction in the resident's SSI payment.

28       Sec. 609. The department shall not reduce the state  
29 supplementation level under the SSI program for the personal

1 care/adult foster care and home for the aged categories during the  
2 current fiscal year. Not later than 30 days before a proposed  
3 reduction in the state supplementation level, the department shall  
4 notify the legislature of the proposed reduction.

5 Sec. 610. (1) In developing good-cause criteria for the state  
6 emergency relief program, the department shall grant an exemption  
7 from the good-cause criteria if an emergency results from an  
8 unexpected expense related to maintaining or securing employment.

9 (2) In determining housing affordability eligibility for state  
10 emergency relief, a group is considered to have sufficient income  
11 to meet ongoing housing expenses if the group's total housing  
12 obligation does not exceed 75% of the group's total net income.

13 (3) The department shall not make a state emergency relief  
14 payment to an individual who has been found guilty of fraud in  
15 obtaining public assistance.

16 (4) The department shall not make a state emergency relief  
17 payment to an individual who is an out-of-state or nonlegal  
18 resident.

19 (5) The department shall distribute a state emergency relief  
20 payment for rent assistance directly to a landlord and shall not  
21 add the payment to a Michigan bridge card.

22 Sec. 611. The state supplementation level under the SSI  
23 program for the living independently category or living in the  
24 household of another category must not exceed the minimum state  
25 supplementation level as required under federal law.

26 Sec. 613. (1) The department shall provide a reimbursement for  
27 the final disposition of an indigent individual. A reimbursement  
28 under this section must comply with all of the following:

29 (a) The maximum allowable reimbursement for the final

1 disposition is \$941.00.

2 (b) The adult burial with services allowance is \$857.00.

3 (c) The adult burial without services allowance is \$594.00.

4 (d) The infant burial allowance is \$235.00.

5 (2) The department shall reimburse up to \$84.00 for a  
6 cremation permit fee and for mileage at the standard rate for an  
7 eligible cremation. A reimbursement under this subsection must take  
8 into consideration whether an indigent individual's religious  
9 preference prohibits cremation.

10 (3) By January 31 of the current fiscal year, the department  
11 shall submit a report to the standard report recipients on burial  
12 service payments issued from the state emergency relief program  
13 during the previous fiscal year. The report must include the number  
14 of applicants denied and the number of payments by the following  
15 burial service categories:

16 (a) Fetus or infant less than 1 month of age.

17 (b) Burial with memorial service.

18 (c) Burial without memorial service.

19 (d) Cremation with memorial service.

20 (e) Cremation without memorial service.

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

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

24 (h) Disposition of an unclaimed body.

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

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

27 Sec. 614. By January 15 of the current fiscal year, the  
28 department shall submit a report to the standard report recipients  
29 on the number and percentage of state disability assistance

1 recipients who were determined to be eligible for federal SSI  
2 benefits in the previous fiscal year.

3 Sec. 615. Except as required by federal law, the department  
4 shall not use funds appropriated in part 1 to provide public  
5 assistance to an individual who is not a United States citizen,  
6 permanent resident alien, or refugee. This section does not  
7 prohibit the department from entering into a contract with a food  
8 bank, emergency shelter provider, or another human service agency  
9 that may, as a normal part of doing business, provide food or  
10 emergency shelter.

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

15 Sec. 619. The department shall not deny a title IV-A  
16 assistance and food assistance benefit under 21 USC 862a to an  
17 individual who has been convicted of a felony for the possession,  
18 use, or distribution of a controlled substance, if both of the  
19 following are met:

20 (a) The act that resulted in the conviction occurred after  
21 August 22, 1996.

22 (b) The individual is not in violation of the individual's  
23 probation or parole requirements.

24 Sec. 620. (1) The department shall determine a Medicaid  
25 applicant's Medicaid eligibility not later than 90 days after the  
26 Medicaid applicant completes a Medicaid application if the Medicaid  
27 applicant's disability is an eligibility factor. For other Medicaid  
28 applicants, including an applicant who is a patient of a nursing  
29 home, the department shall determine the applicant's Medicaid

1 eligibility within 45 days after receiving the Medicaid applicant's  
2 application.

3 (2) On a quarterly basis, the department shall submit a report  
4 to the standard report recipients on the number of recipients who  
5 were ineligible for Medicaid after Medicaid eligibility  
6 redeterminations resumed after federal continuous enrollment  
7 requirements ended. The report must include, in a monthly data  
8 format, the number of recipients who had their eligibility examined  
9 directly, through an ex parte eligibility process or through a  
10 passive eligibility process. The report must also include a copy of  
11 each baseline and monthly report that the department provides to  
12 CMS for unwinding data reporting and the number of recipients who  
13 did not respond to the department through eligibility outreach or  
14 data requests.

15 Sec. 645. The department shall consider an individual or  
16 family to be homeless for purposes of eligibility for state  
17 emergency relief, if the individual or family is living temporarily  
18 with another in order to escape domestic violence. The department  
19 shall define and verify domestic violence in the same manner as the  
20 department defines and verifies that term in the department's  
21 policies on good cause for not cooperating with child support and  
22 paternity requirements.

23 Sec. 653. From the funds appropriated in part 1 for food  
24 assistance program benefits, an individual who is the victim of  
25 domestic violence or human trafficking and who does not qualify for  
26 any other exemption may be exempt from the 3-month in 36-month  
27 limit on receiving food assistance under 7 USC 2015. The department  
28 may extend the exemption for an additional 3 months if an  
29 individual described in this section demonstrates to the department



1 a continuing need.

2 Sec. 654. The department shall notify a recipient of food  
3 assistance program benefits that the recipient's benefits can be  
4 spent with the recipient's Michigan bridge card at many farmers  
5 markets in this state. The department shall also provide a  
6 recipient with information about the double up food bucks program  
7 that is administered by the Fair Food Network. The information  
8 about the double up food bucks program must include, but is not  
9 limited to, information that if the recipient spends \$20.00 at a  
10 participating farmers market through the program, the recipient may  
11 receive an additional \$20.00 to buy Michigan produce.

12 Sec. 655. Not later than 14 days after the spending plan for  
13 low-income home energy assistance program is approved by the state  
14 budget office, the department shall provide the spending plan,  
15 including itemized projected expenditures and itemized expenditures  
16 for the previous fiscal year, to the standard report recipients.

17 Sec. 660. From the funds appropriated in part 1 for Food Bank  
18 Council of Michigan, the department shall allocate \$12,045,000.00  
19 for procuring and distributing the Michigan agricultural surplus  
20 system to distribute surplus produce to low-income residents of  
21 this state.

22 Sec. 669. From the funds appropriated in part 1 for family  
23 independence program - clothing allowance, the department shall  
24 allocate \$10,000,000.00 for the annual clothing allowance. The  
25 department shall grant the allowance to eligible children in a  
26 family independence program group.

27 Sec. 672. (1) By February 15 of the current fiscal year, the  
28 department's office of inspector general shall submit a report to  
29 the standard report recipients on the department's efforts to

1 reduce the inappropriate use of Michigan bridge cards and food  
2 assistance program trafficking. The department shall provide  
3 information on the number of recipients of services who used their  
4 Michigan bridge card inappropriately and the current status of each  
5 case, the number of recipients whose benefits were permanently and  
6 temporarily revoked as a result of inappropriately using their  
7 Michigan bridge cards, and the number of retailers that were fined  
8 or removed from the electronic benefit transfer program for  
9 permitting the inappropriate use of Michigan bridge cards. The  
10 report must also include the number of Michigan bridge card  
11 trafficking instances and overall welfare fraud referrals, that  
12 includes, but is not limited to, information on the number of  
13 investigations completed, fraud and intentional program violation  
14 dollar amounts identified, the number of referrals to prosecutors,  
15 the number of administrative hearing referrals and waivers, and the  
16 number of program disqualifications imposed. The report must  
17 distinguish between savings and cost avoidance. As used in this  
18 subsection:

19 (a) "Savings" includes receivables established from instances  
20 of fraud committed.

21 (b) "Cost avoidance" includes expenditures avoided due to  
22 front-end eligibility investigations and other preemptive actions  
23 undertaken in the prevention of fraud.

24 (2) If a fourth Michigan bridge card has been issued to a  
25 household in a 12-month period, the department shall notify the  
26 household that the household has reached the number of issued cards  
27 threshold. At a household's fifth and each subsequent card  
28 replacement request, a card will not be issued until a recipient  
29 from the household has spoken directly to the local office district

1 manager or county director. The district manager or county director  
2 may issue a new Michigan bridge card based on the district  
3 manager's or county director's assessment of the recipient's  
4 situation and the recipient's explanation.

5 (3) As used in this section:

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

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

13 Sec. 677. (1) The department shall establish a state goal for  
14 the percentage of family independence program cases involved in  
15 employment activities. The percentage established must not be less  
16 than 50%. The goal for long-term employment must be 15% of cases  
17 for 6 months or more.

18 (2) The department shall submit an annual report, providing  
19 quarterly data, to the standard report recipients on the number of  
20 cases referred to PATH, the current percentage of family  
21 independence program cases involved in PATH employment activities,  
22 an estimate of the current percentage of family independence  
23 program cases that meet federal work participation requirements on  
24 the whole, and an estimate of the current percentage of the family  
25 independence program cases that meet federal work participation  
26 requirements for those cases referred to PATH.

27 (3) The department shall submit a report to the standard  
28 report recipients. The report must include quarterly data on all of  
29 the following:

1 (a) The number and percentage of nonexempt family independence  
2 program recipients who are employed.

3 (b) The average and range of wages of employed family  
4 independence program recipients.

5 (c) The number and percentage of employed family independence  
6 program recipients who remain employed for 6 months or more.

7 Sec. 678. From the funds appropriated in part 1 for family  
8 independence program - small child supplement payment, the  
9 department shall establish a supplement payment for households with  
10 small children. The small child supplement payment program will  
11 increase monthly family independence program payments by \$150.00  
12 for each child under the age of 6 in an enrolled household.

13 Sec. 686. (1) The department shall confirm that an individual  
14 who presents a personal identification issued by another state and  
15 is seeking assistance through the family independence program, food  
16 assistance program, state disability assistance program or medical  
17 assistance program is not receiving benefits from another state.

18 (2) The department shall confirm the address provided by an  
19 individual who is seeking family independence program benefits or  
20 state disability assistance benefits.

21 (3) The department shall prohibit an individual who has  
22 property assets assessed at a value higher than \$200,000.00 from  
23 receiving assistance through a department-administered program,  
24 unless prohibiting assistance would violate a federal law or  
25 guideline.

26 (4) The department shall make a reasonable attempt to obtain  
27 an up-to-date telephone number for an individual seeking medical  
28 assistance benefits during the eligibility determination or  
29 redetermination process for the individual.

1           Sec. 687. (1) On a quarterly basis, the department shall  
2 compile and make available a report on its website that contains  
3 all of the following information about the family independence  
4 program, state disability assistance, the food assistance program,  
5 indigent burial, Medicaid, and state emergency relief:

6           (a) The number of applications received.

7           (b) The number of applications approved.

8           (c) The number of applications denied.

9           (d) The number of applications pending and neither approved  
10 nor denied.

11           (e) The number of cases opened.

12           (f) The number of cases closed.

13           (g) The number of cases at the beginning of the quarter and  
14 the number of cases at the end of the quarter.

15           (2) The department shall compile and make the information  
16 provided under subsection (1) available for this state as a whole  
17 and for each county and shall report the information separately for  
18 each program listed in subsection (1).

19           (3) On a quarterly basis, the department shall compile and  
20 make available a report on its website of the following family  
21 independence program information:

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

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

26           (c) The number of cases closed because of lifetime limits.

27           (d) The number of first-, second-, and third-time sanctions.

28           (e) The number of children 0 to 5 years of age who are living  
29 in a family independence program-sanctioned household.

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

7           Sec. 689. (1) From the funds appropriated in part 1 for  
8 prenatal and infant support program, the department shall allocate  
9 \$9,621,700.00 for programs that are intended to improve the  
10 economic stability of households with very young children.

11           (2) In allocating the funds referenced in subsection (1), the  
12 department shall give preference to programs that demonstrate the  
13 following:

14           (a) Effectiveness in improving the economic stability of  
15 households with pregnant women at a minimum of 20 weeks gestation,  
16 and with young children.

17           (b) Partnerships with local health care providers and  
18 nonprofit human service agencies that provide for improved maternal  
19 and infant health outcomes.

20           (c) Compliance with TANF requirements established by the  
21 Administration for Children and Families within the United States  
22 Department of Health and Human Services.

23           Sec. 699. (1) From the funds appropriated in part 1 for fair  
24 food network - double up food bucks, the department shall work with  
25 the fair food network and the department of agriculture and rural  
26 development to ensure that the funds allocated to the double up  
27 food bucks program are directly used to increase the number of  
28 participating vendors.

29           (2) The department shall work with the department of

1 agriculture and rural development to do all of the following:

2 (a) Notify recipients of food assistance program benefits that  
3 food assistance program benefits can be accessed with Michigan  
4 bridge cards at many farmers markets in this state.

5 (b) Notify recipients of food assistance program benefits  
6 about the double up food bucks program that is administered by the  
7 fair food network. Food assistance program recipients shall receive  
8 information about the double up food bucks program.

9 (3) The department shall work with the fair food network and  
10 the department of agriculture and rural development to expand  
11 access to the double up food bucks program in each of the state's  
12 counties with grocery stores or farmers markets that meet the  
13 program's eligibility requirements.

14 (4) Not later than September 30 of the current fiscal year,  
15 the department shall submit a report on activities and outcomes of  
16 the double up food bucks program to the standard report recipients.  
17 The report must contain all of the following:

18 (a) Counties in this state with participating double up food  
19 bucks vendors, the number of vendors by county, and the name and  
20 location of vendors, as of October 1 of the previous fiscal year.

21 (b) Counties in this state with new participating double up  
22 food bucks vendors, the number of new vendors by county, and the  
23 name and location of the new vendors. As used in this subdivision,  
24 "new vendors" means vendors that started participating in the  
25 program since October 1 of the current fiscal year.

26 (c) The number of individuals participating in the program, by  
27 county.

28

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

1           Sec. 701. Unless required by a change to federal law or the  
2 law of this state or at the request of a provider, the department  
3 shall not alter the terms of a signed contract with a private  
4 residential facility that serves children who are under state or  
5 court supervision without receiving written consent from a  
6 representative of the private residential facility.

7           Sec. 706. A county is subject to a 50% chargeback for the use  
8 of an alternative regional detention service, if the detention  
9 service does not fall under the basic grant provision of section  
10 117e of the social welfare act, 1939 PA 280, MCL 400.117e, or if a  
11 county operates the detention service program primarily with  
12 professional rather than volunteer staff.

13           Sec. 707. To be reimbursed for child care fund expenditures, a  
14 county shall submit to the department the report required under  
15 section 117a(11) of the social welfare act, 1939 PA 280, MCL  
16 400.117a, to enable the department to document a potential  
17 federally claimable expenditure.

18           Sec. 708. (1) As a condition of receiving funds appropriated  
19 in part 1 for the child care fund line item, by October 15 of the  
20 current fiscal year, a county shall have an approved service  
21 spending plan for the current fiscal year. Not later than August 15  
22 of the current fiscal year, a county shall submit the county's  
23 service spending plan for the following fiscal year to the  
24 department for approval. The department shall approve a county's  
25 service spending plan not later than 30 calendar days after the  
26 department receives a properly completed service spending plan from  
27 the county that complies with the requirements of the social  
28 welfare act, 1939 PA 280, MCL 400.1 to 400.119b. The department  
29 shall notify and submit revisions to a service spending plan to a



1 county whose service spending plan is not approved after initial  
2 submission. The department shall not request any additional  
3 revisions to a county's service spending plan outside of the  
4 requested revision notification submitted to the county by the  
5 department. The department shall notify a county that its service  
6 spending plan is approved not later than 30 days after the  
7 department considers the county's revisions to the county's service  
8 spending plan.

9 (2) A county shall submit an amendment to its county service  
10 spending plan for the current fiscal year to the department not  
11 later than August 30 of the current fiscal year. A county shall  
12 submit payable estimates for the current fiscal year to the  
13 department not later than September 15 of the current fiscal year.

14 (3) Not later than February 15 of the current fiscal year, the  
15 department shall submit a report to the standard report recipients  
16 on the number of counties that fail to submit a service spending  
17 plan by August 15 of the previous fiscal year and the number of  
18 service spending plans not approved by October 15. The report must  
19 include the number of county service spending plans that were not  
20 initially approved by the department and the number of service  
21 spending plans that were not approved by the department after being  
22 resubmitted by the county after revisions were requested by the  
23 department under subsection (1).

24 Sec. 709. The department's master contract for juvenile  
25 justice residential foster care services must prohibit a contractor  
26 from denying a referral for placing a youth, or terminating a  
27 youth's placement, if the youth's assessed treatment needs are in  
28 alignment with the facility's residential program type, as  
29 identified by a court or the department. The master contract must

1 also require that a youth placed in a juvenile justice residential  
2 foster care facility has regularly scheduled treatment sessions  
3 with a licensed psychologist or a psychiatrist, or both, and access  
4 to the licensed psychologist or a psychiatrist as needed.  
5

6 **LOCAL OFFICE OPERATIONS AND SUPPORT SERVICES**

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

12       (2) Not later than April 1 of the current fiscal year, the  
13 department shall submit a report to the standard report recipients  
14 on the corrective action plan undertaken to lower food assistance  
15 program error rates. The report must include the error rates for  
16 each local office, by month, in the previous fiscal year,  
17 information on the percentage of errors attributable to the  
18 department and applicants, a narrative description of each type of  
19 error occurring for the department and applicants, and a complete  
20 description of how error rates have decreased from the 8 actions  
21 described in the April 1, 2023 report provided under section 801(2)  
22 of article 6 of 2022 PA 166.

23       Sec. 802. From the funds appropriated in part 1 for local  
24 office staff travel, the department shall allocate up to  
25 \$100,000.00 annually toward reimbursing the out-of-pocket costs of  
26 county board members and county department directors to attend  
27 statewide meetings of the Michigan County Social Services  
28 Association.

29       Sec. 807. From the funds appropriated in part 1 for Elder Law

1 of Michigan MiCAFE contract, the department shall allocate not less  
2 than \$350,000.00 to the Elder Law of Michigan MiCAFE to assist this  
3 state's elderly population in participating in the food assistance  
4 program. Of the \$350,000.00 allocated under this section, the  
5 department shall use \$175,000.00 of general fund/general purpose  
6 revenue as state matching funds to receive not less than  
7 \$175,000.00 in funding from the United States Department of  
8 Agriculture to provide outreach program activities as part of a  
9 statewide food assistance hotline. The outreach program activities  
10 may include eligibility screening and information services.

11 Sec. 808. Not later than March 1 of the current fiscal year,  
12 the department shall submit a report to the standard report  
13 recipients on the nutrition education program. The report must  
14 include all of the following information:

15 (a) All of the following for the supplemental nutrition  
16 assistance program education funding:

17 (i) The planned allocation and actual expenditures, by location  
18 of programs.

19 (ii) Planned and actual grant amounts, by location of programs.

20 (iii) The total amount of expected carryforward balance at the  
21 end of the current fiscal year.

22 (b) For each subgrantee program, a list of all supplemental  
23 nutrition assistance program education funding programs by  
24 implementing agency with the amount of funding allocated.

25 Sec. 809. From the funds appropriated in part 1 for pathways  
26 to potential program, the department shall submit a report by June  
27 1 of the current fiscal year to the standard report recipients that  
28 lists each school that participates in the pathways to potential  
29 program, the number of program staff assigned to each school by

1 participant school, and the number of students that interacted with  
2 pathways to potential staff.

3       Sec. 825. From the funds appropriated in part 1, the  
4 department shall provide an individual with not more than \$2,000.00  
5 for vehicle repairs, including a repair done in the previous 12  
6 months. The \$2,000.00 limit described in this section includes the  
7 combined total of payments made by the department and the work  
8 participation program.

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

17       (2) Not later than March 1 of the current fiscal year, the  
18 Prosecuting Attorneys Association of Michigan shall submit a report  
19 to the department on the efficacy of the contract. The department  
20 shall submit the report to the standard report recipients not later  
21 than 30 days after the department receives the report from the  
22 Prosecuting Attorneys Association of Michigan.

23       Sec. 850. (1) The department shall maintain each out-stationed  
24 eligibility specialist in a community-based organization, community  
25 mental health agency, nursing home, adult placement and independent  
26 living setting, FQHC, and hospital, unless the community-based  
27 organization, community mental health agency, nursing home, adult  
28 placement and independent living setting, FQHC, or hospital  
29 requests to discontinue the positions at its facility.

1           (2) From the funds appropriated in part 1 for donated funds  
2 positions, the department shall enter into a contract with any  
3 agency that is able and eligible under federal law to provide the  
4 required matching funds for federal funding, as determined by  
5 federal law.

6           (3) A contract for a donated funds position for assistance  
7 payments must include, but not be limited to, performance metrics  
8 on both of the following topics:

9           (a) Meeting a standard of promptness for processing an  
10 application for Medicaid and other public assistance programs under  
11 the law of this state.

12           (b) Meeting required standards for error rates in determining  
13 programmatic eligibility, as determined by the department.

14           (4) The department shall fill an additional donated funds  
15 position only after a new contract has been signed with an agency.  
16 The position must be abolished when the contract expires or is  
17 terminated.

18           (5) The department shall classify as a limited-term FTE  
19 position a new employee who is hired to fill a donated funds  
20 position contract or is hired to fill a vacancy from an employee  
21 who transferred to a donated funds position.

22           (6) By March 1 of the current fiscal year, the department  
23 shall submit a report to the standard report recipients detailing  
24 information on the donated funds positions. The report must  
25 include, but is not limited to, the total number of occupied  
26 positions, the total private contribution of the positions, and the  
27 total cost to this state for a nonsalary expenditure for the  
28 donated funds position employees.

29           Sec. 851. (1) From the funds appropriated in part 1 for adult

1 services local office staff, the department shall seek to reduce  
2 the number of older adults who are victims of crime and fraud by  
3 increasing the standard of promptness in every county, as measured  
4 by commencing an investigation not later than 24 hours after a  
5 report is made to the department, establishing face-to-face contact  
6 with the client not later than 72 hours after a report is made to  
7 the department, and completing the investigation not later than 30  
8 days after a report is made to the department.

9 (2) Not later than March 1 of the current fiscal year, the  
10 department shall submit a report to the standard report recipients  
11 on the services provided to older adults who were victims of crime  
12 or fraud in the previous fiscal year. The report must include, but  
13 is not limited to, all of the following information by county:

14 (a) The number of cases referred to law enforcement.

15 (b) The percentage of investigations commenced not later than  
16 24 hours after a report is made to the department.

17 (c) The number of face-to-face contacts established with the  
18 older adults described in this section not later than 72 hours  
19 after a report is made to the department.

20 (d) The number of investigations completed not later than 30  
21 days after a report is made to the department.

22 (e) The total number of older adults who were victims of crime  
23 or fraud in the previous fiscal year and were provided services by  
24 the department as a result of being victims of crime or fraud.

25 (f) The final disposition of older adults provided services  
26 for being a victim of crime or fraud.

27

28 **DISABILITY DETERMINATION SERVICES**

29 Sec. 890. From the funds appropriated in part 1 for disability

1 determination services, the department shall maintain the unit  
2 rates in effect on September 30, 2019 for medical consultants  
3 performing disability determination services, including physicians,  
4 psychologists, and speech-language pathologists.

5  
6 **BEHAVIORAL HEALTH SERVICES ADMINISTRATION AND SPECIAL PROJECTS**

7       Sec. 901. The department shall use the funds appropriated in  
8 part 1 to support a system of comprehensive community mental health  
9 services under the full authority and responsibility of local  
10 CMHSPs or PIHPs in accordance with the mental health code, 1974 PA  
11 258, MCL 330.1001 to 330.2106, the Medicaid provider manual,  
12 federal Medicaid waivers, and all other applicable federal law and  
13 the law of this state.

14       Sec. 902. (1) From the funds appropriated in part 1, the  
15 department shall make a final authorization to a CMHSP or PIHP on  
16 the execution of a contract between the department and the CMHSP or  
17 PIHP. The contract must contain an approved plan and budget and any  
18 policy and procedure governing the obligations and responsibilities  
19 of each party to the contract. Each contract with a CMHSP or PIHP  
20 that the department is authorized to enter into under this  
21 subsection must include a provision that the contract is not valid  
22 unless the total dollar obligation for all of the contracts between  
23 the department and the CMHSPs or PIHPs entered into under this  
24 subsection for the current fiscal year does not exceed the amount  
25 of money appropriated in part 1 for the contracts authorized under  
26 this subsection.

27       (2) The department shall immediately submit a report to the  
28 standard report recipients if either of the following occurs:

29       (a) The department enters into a new contract with a CMHSP or

1 PIHP that would affect a rate or expenditure.

2 (b) The department amends a contract that the department has  
3 entered into with a CMHSP or PIHP that would affect a rate or  
4 expenditure.

5 (3) The report required by subsection (2) must include  
6 information about any changes to the contract and the change's  
7 effects on rates and expenditures.

8 Sec. 904. (1) Not later than May 31 of the current fiscal  
9 year, the department shall provide a report on the CMHSPs, PIHPs,  
10 and designated regional entities for substance use disorder  
11 prevention and treatment to the standard report recipients that  
12 includes the information required by this section.

13 (2) The report required under subsection (1) must contain,  
14 unless otherwise noted, information for each CMHSP, PIHP, and  
15 designated regional entity for substance use disorder prevention  
16 and treatment, and a statewide summary, as follows:

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

21 (b) Per capita expenditures in total and by client population  
22 group.

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



1 common procedure coding system code for each of the 3 diagnosis  
2 groups.

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

5 (e) Information about access to each CMHSP, PIHP, and  
6 designated regional entity for substance use disorder prevention  
7 and treatment, that includes, but is not limited to, all of the  
8 following:

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

10 (ii) The number of individuals who requested services but did  
11 not receive services.

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

15 (g) Lapses and carryforwards during the previous fiscal year  
16 for each CMHSP, PIHP, and designated regional entity for substance  
17 use disorder prevention and treatment.

18 (h) Performance indicator information required to be submitted  
19 to the department in the contracts with each CMHSP, PIHP, and  
20 designated regional entity for substance use disorder prevention  
21 and treatment.

22 (i) Administrative expenditures of each CMHSP, PIHP, and  
23 designated regional entity for substance use disorder prevention  
24 and treatment that include a breakout of the salary, benefits, and  
25 pension of each executive-level staff, which includes, but is not  
26 limited to, the director, chief executive, and chief operating  
27 officer.

28 (3) The report required under subsection (1) must contain the  
29 following information from the previous fiscal year on substance

1 use disorder prevention, education, and treatment programs:

2 (a) The expenditures stratified by department-designated  
3 community mental health entity, by fund source, by subcontractor,  
4 by population served, and by service type.

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

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

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

14 (4) The department shall include the data reporting  
15 requirements described in subsections (2) and (3) in the  
16 department's annual contract with each CMHSP, PIHP, and designated  
17 regional entity for substance use disorder prevention and  
18 treatment.

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

23 Sec. 907. (1) The department shall expend the amount  
24 appropriated in part 1 for community substance use disorder  
25 prevention, education, and treatment to coordinate care and  
26 services provided to individuals with severe and persistent mental  
27 illness and substance use disorder diagnoses.

28 (2) Each managing entity shall continue current efforts to  
29 collaborate on the delivery of services to clients with mental

1 illness and substance use disorder diagnoses, with the goal of  
2 providing services in an administratively efficient manner.

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

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

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

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

1           Sec. 912. The department shall contract directly with the  
2 Salvation Army Harbor Light program, at an amount not less than the  
3 amount provided during the fiscal year ending September 30, 2020,  
4 to provide non-Medicaid substance use disorder services if the  
5 local coordinating agency or the department confirms the Salvation  
6 Army Harbor Light program meets the standard of care established by  
7 the department. The standard of care must include, but is not  
8 limited to, using a medication assisted treatment option.

9           Sec. 913. (1) From the funds appropriated in part 1 for  
10 behavioral health program administration, the department shall  
11 allocate \$2,025,000.00 for the autism navigator program. The  
12 department shall require a contractor receiving funds under this  
13 section to comply with performance-related metrics established by  
14 the department to maintain eligibility for funding. The  
15 performance-related metrics must include, but not be limited to,  
16 all of the following:

17           (a) Each contractor shall have an accreditation that attests  
18 to the contractor's competency and effectiveness in providing  
19 services.

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

21           (c) Each contractor shall ensure the contractor's ability to  
22 leverage private dollars to strengthen and maximize service  
23 provision.

24           (d) Each contractor shall provide quarterly reports to the  
25 department on the number of clients served by PIHP region, units of  
26 service provision by PIHP region, and ability to meet their stated  
27 goals.

28           (2) The department shall require a report from a contractor  
29 receiving funds under this section. A contractor shall submit the

1 report to the department not later than 60 days after the end of  
2 the contract period. The report must include specific information  
3 on services and programs provided by the contractor, the client  
4 base to which the services and programs were provided by the  
5 contractor, and the contractor's expenditures for the services. The  
6 department shall submit the reports to the standard report  
7 recipients.

8       Sec. 914. Not later than June 1 of the current fiscal year,  
9 the department shall submit a report to the standard report  
10 recipients on outcomes of the funds provided in part 1 to the  
11 Michigan Clinical Consultation and Care program (MC3). The outcomes  
12 reported must include, but are not limited to, the number of same-  
13 day telephone consultations with primary care providers and the  
14 number of local resource recommendations made to primary care  
15 providers who are providing medical care to patients who need  
16 behavioral health services.

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

24       Sec. 916. From the funds appropriated in part 1 for behavioral  
25 health program administration, the department shall allocate  
26 \$100,000.00 as a grant to a nonprofit mental health clinic located  
27 in a county with a population between 290,000 and 300,000 according  
28 to the most recent federal decennial census that provides  
29 counseling services, accepts clients regardless of their ability to

1 pay for services through sliding scale copayments and volunteer  
2 services, and uses fundraising to support their clinic.

3 Sec. 917. (1) From the funds appropriated in part 1 for opioid  
4 response activities, the department shall allocate \$76,605,600.00  
5 from the Michigan opioid healing and recovery fund created under  
6 section 3 of the Michigan trust fund act, 2000 PA 489, MCL 12.253,  
7 to create or supplement opioid-related programs and services in a  
8 manner consistent with the opioid judgment, settlement, or  
9 compromise of claims pertaining to violations, or alleged  
10 violations, of law related to the manufacture, marketing,  
11 distribution, dispensing, or sale of opioids.

12 (2) From the funds appropriated in this section, the  
13 department shall allocate as grants from the Michigan opioid  
14 healing and recovery fund all of the following:

15 (a) \$30,000,000.00 to department-designated community mental  
16 health entities for regional specific programming and supports with  
17 a goal to also collaborate with municipal opioid settlement funds.

18 (b) \$8,333,300.00 for non-Medicaid hospital peer recovery  
19 coach services.

20 (c) \$5,000,000.00 for tribal communities, with the  
21 distribution method and types of uses of these funds determined in  
22 collaboration with the United Tribes of Michigan and each  
23 individual sovereign nation.

24 (d) \$250,000.00 to an association of recovery community  
25 organizations for peer recovery coach training.

26 (e) \$3,620,000.00, allocated on a 1-time basis, to a nonprofit  
27 organization that is organized under the laws of this state, that  
28 is exempt from federal income tax under section 501(c)(3) of the  
29 internal revenue code of 1986, 26 USC 501, and is located in a city

1 with a population greater than 10,000 that is located in a county  
2 with a population between 36,500 and 36,850, according to the most  
3 recent federal decennial census, to expand a women's recovery  
4 center that provides residential substance use disorder services,  
5 behavioral and physical health care, social services, and housing  
6 assistance.

7 (f) \$3,200,000.00, allocated on a 1-time basis, to supplement  
8 grants to recovery community organizations under section 978.

9 (g) \$3,000,000.00, allocated on a 1-time basis, to a nonprofit  
10 organization that is organized under the laws of this state, that  
11 is exempt from federal income tax under section 501(c)(3) of the  
12 internal revenue code of 1986, 26 USC 501, and that currently has  
13 50 permanent supportive recovery apartments located in a city with  
14 a population between 31,000 and 32,000, according to the most  
15 recent federal decennial census, to expand long-term housing for  
16 recovering patients and their families into additional communities.

17 (3) On a semiannual basis, the department shall submit to the  
18 standard report recipients a report on all of the following:

19 (a) Total revenues deposited into and expenditures and  
20 encumbrances from the Michigan opioid healing and recovery fund  
21 since the creation of the fund.

22 (b) Revenues deposited into and expenditures and encumbrances  
23 from the Michigan opioid healing and recovery fund during the  
24 previous 6 months.

25 (c) Estimated revenues to be deposited into and the spending  
26 plan for the Michigan opioid healing and recovery fund for the next  
27 12 months.

28 Sec. 918. On a quarterly basis, providing monthly data, the  
29 department shall submit a report to the standard report recipients

1 on the amount of funding paid to PIHPs to support the Medicaid  
2 managed mental health care program. The report must include  
3 information on the total paid to each PIHP, per capita rate paid  
4 for each eligibility group for each PIHP, the number of cases in  
5 each eligibility group for each PIHP, and a year-to-date summary of  
6 eligibles and expenditures for the Medicaid managed mental health  
7 care program.

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

16 Sec. 922. From the funds appropriated in part 1 for behavioral  
17 health program administration, the department shall allocate  
18 \$1,600,000.00 to a nonprofit organization organized under the laws  
19 of this state that is exempt from federal income tax under section  
20 501(c)(3) of the internal revenue code of 1986, 26 USC 501, and is  
21 located in a city with a population between 66,000 and 67,000  
22 according to the most recent federal decennial census as follows:

23 (a) \$1,000,000.00 for an initiative focused on training and  
24 educating primary care physicians to screen and treat mild to  
25 moderate behavioral health issues, increasing use of telehealth,  
26 supporting the use of health information exchange for closed-loop  
27 referrals to connect primary care physicians to licensed behavioral  
28 health providers, and peer recovery support services.

29 (b) \$600,000.00 to administer an online and interactive



1 version of the protected health information consent tool and make  
2 any revisions to the tool to reflect any recent legislative  
3 changes. The contracting entity that receives funds appropriated in  
4 this section shall also develop accompanying trainings and  
5 resources for users. Additionally, the contracting entity that  
6 receives funds appropriated in this section shall work closely with  
7 the Michigan health information network and the department to  
8 develop the technical specifications for integrating the protected  
9 health information consent tool with other relevant systems and  
10 applications, including, but not limited to, CareConnect 360.

11 Sec. 924. From the funds appropriated in part 1, for the  
12 purposes of actuarially sound rate certification and approval for  
13 Medicaid behavioral health managed care programs, the department  
14 shall maintain a fee schedule for autism services reimbursement  
15 rates for direct services. Expenditures used for rate setting shall  
16 not exceed the rates identified in the fee schedule. The fee  
17 schedule must include a rate for behavioral technicians that is not  
18 less than \$62.00 per hour.

19 Sec. 926. (1) From the funds appropriated in part 1 for  
20 community substance use disorder prevention, education, and  
21 treatment, \$1,500,000.00 is allocated for a specialized substance  
22 use disorder detoxification project administered by a 9-1-1 service  
23 district in conjunction with a substance use and case management  
24 provider. The project must be located at a hospital within a 9-1-1  
25 service district with at least 600,000 residents and 15 member  
26 communities and that is located within a county with a population  
27 of at least 1,500,000 according to the most recent federal  
28 decennial census.

29 (2) The substance use and case management provider receiving

1 funds under this section shall collect and submit to the department  
2 data on the outcomes of the project throughout the duration of the  
3 project and the department shall submit a report on the project's  
4 outcomes to the standard report recipients.

5 Sec. 928. (1) Each PIHP shall provide, from the PIHP's  
6 internal resources, local funds to be used as a part of the state  
7 match required under the Medicaid program in order to increase  
8 capitation rates for PIHPs. The local funds must not include either  
9 of the following:

10 (a) State funds received by a CMHSP for services provided to  
11 non-Medicaid recipients.

12 (b) The state matching portion of the Medicaid capitation  
13 payments made to a PIHP.

14 (2) Not later than April 1 of the current fiscal year, the  
15 department shall report to the standard report recipients on the  
16 lapse by PIHP from the previous fiscal year and the projected lapse  
17 by PIHP in the current fiscal year.

18 Sec. 929. From the funds appropriated in part 1 for Michigan  
19 Clinical Consultation and Care, the department shall allocate at  
20 least \$350,000.00 to address needs in a city in which a declaration  
21 of emergency was issued because of drinking water contamination.

22 Sec. 930. From the funds appropriated in part 1 for community  
23 substance use disorder prevention, education, and treatment, the  
24 department shall allocate \$1,500,000.00 for comprehensive addiction  
25 medicine training programming, including anti-stigma education,  
26 fellowship graduate medical education positions, and addiction  
27 specialist physicians.

28 Sec. 935. A county required under the mental health code, 1974  
29 PA 258, MCL 330.1001 to 330.2106, to provide matching funds to a

1 CMHSP for mental health services rendered to residents in the  
2 county's jurisdiction shall pay the matching funds in equal  
3 installments on not less than a quarterly basis throughout the  
4 fiscal year, with the first payment being made by October 1 of the  
5 current fiscal year.

6 Sec. 940. (1) In accordance with section 236 of the mental  
7 health code, 1974 PA 258, MCL 330.1236, the department shall review  
8 expenditures for each CMHSP to identify any CMHSP with a projected  
9 allocation surplus and to identify any CMHSP with a projected  
10 allocation shortfall. The department shall encourage the board of a  
11 CMHSP with a projected allocation surplus to concur with the  
12 department's recommendation to reallocate the projected surplus to  
13 a CMHSP with a projected allocation shortfall.

14 (2) A CMHSP that has its projected surplus reallocated during  
15 the current fiscal year as described in subsection (1) is not  
16 eligible for an additional funding reallocation during the  
17 remainder of the current fiscal year, unless the CMHSP is  
18 responding to a public health emergency as determined by the  
19 department.

20 (3) A CMHSP shall report to the department on a proposed  
21 reallocation described in this section at least 30 days before the  
22 reallocation takes effect.

23 (4) The department shall notify the chairs of the  
24 appropriation subcommittees on the department budget when a request  
25 is made and when the department grants approval for a reallocation  
26 described in subsection (1). Not later than September 30 of the  
27 current fiscal year, the department shall submit a report on the  
28 amount of funding reallocated to the standard report recipients.

29 Sec. 942. A CMHSP shall provide at least 30 days' notice

1 before reducing, terminating, or suspending a service provided by  
2 the CMHSP to a CMHSP client, unless the service is authorized by a  
3 physician and the service no longer meets established criteria for  
4 medical necessity.

5 Sec. 960. (1) From the funds appropriated in part 1 for autism  
6 services, the department shall continue to cover all Medicaid  
7 autism services to Medicaid enrollees eligible for the services  
8 that were covered on January 1, 2019.

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

11 (a) Not later than March 1 of the current fiscal year, develop  
12 and implement specific written guidance for standardization of  
13 Medicaid PIHPs and CMHSPs autism spectrum disorder administrative  
14 services, including, but not limited to, reporting requirements,  
15 coding, and reciprocity of credentialing and training between PIHPs  
16 and CMHSPs to reduce administrative duplication at the PIHP, CMHSP,  
17 and service provider levels.

18 (b) Require consultation with the client's evaluation  
19 diagnostician and PIHP to approve the client's ongoing therapy for  
20 3 years, unless the client's evaluation diagnostician recommended  
21 an evaluation before the 3 years or if a clinician on the treatment  
22 team recommended an evaluation for the client before the third  
23 year.

24 (c) Limit the authority to perform a diagnostic evaluation for  
25 Medicaid autism services to qualified licensed practitioners as  
26 determined by the department and CMHSP.

27 (d) Allow and expand the utilization of telemedicine and  
28 telepsychiatry to increase access to diagnostic evaluation  
29 services.

1 (e) Coordinate with the department of insurance and financial  
2 services on oversight for compliance with the Paul Wellstone and  
3 Pete Domenici mental health parity and addiction equity act of  
4 2008, Public Law 110-343, as it relates to autism spectrum disorder  
5 services, to ensure appropriate cost sharing between public and  
6 private payers.

7 (f) Require that Medicaid eligibility be confirmed through  
8 prior evaluations conducted by physicians, psychiatric nurse  
9 practitioners, physician's assistant with training, experience, or  
10 expertise in autism spectrum disorders or behavioral health, or  
11 fully credentialed psychologists to the extent possible.

12 (g) Maintain regular statewide provider trainings on autism  
13 spectrum disorder standard clinical best practice guidelines for  
14 treatment and diagnostic services.

15 (3) Not later than March 1 of the current fiscal year, the  
16 department shall submit a report to the standard report recipients  
17 on total autism services spending broken down by PIHP and CMHSP for  
18 the previous fiscal year and current fiscal year and total  
19 administrative costs broken down by PIHP, CMHSP, and the type of  
20 administrative cost for the previous fiscal year and current fiscal  
21 year.

22 Sec. 962. For special projects involving high-need children or  
23 adults, including the not guilty by reason of insanity population,  
24 the department may contract directly with providers of services to  
25 the children and adults described in this section.

26 Sec. 972. From the funds appropriated in part 1 for behavioral  
27 health program administration, the department shall allocate not  
28 less than \$11,286,400.00 of general fund/general purpose revenue  
29 and any associated federal match or federal grant funding,

1 including, but not limited to, associated federal 988 grant funding  
2 for the mental health telephone access line known as the Michigan  
3 crisis and access line (MiCAL), to provide for both of the  
4 following in accordance with section 165 of the mental health code,  
5 1974 PA 258, MCL 330.1165:

6 (a) Primary coverage in a region where a regional national  
7 suicide prevention lifeline center does not provide coverage.

8 (b) Statewide secondary coverage.

9 Sec. 974. The department and a PIHP shall allow an individual  
10 with an intellectual or developmental disability who receives  
11 supports and services from a CMHSP to instead receive supports and  
12 services from another provider if the individual is eligible and  
13 qualified to receive supports and services from another provider.  
14 Other providers may include, but are not limited to, MIChoice and  
15 PACE.

16 Sec. 978. From the funds appropriated in part 1 for community  
17 substance use disorder prevention, education, and treatment and  
18 recovery community organizations, the department shall allocate  
19 \$3,000,000.00, with \$1,800,000.00 allocated on a 1-time basis, as  
20 grants for recovery community organizations in accordance with  
21 section 273b of the mental health code, 1974 PA 258, MCL 330.1273b.  
22 A grant must be used to offer or expand recovery support center  
23 services or recovery community center services to individuals  
24 seeking long-term recovery from substance use disorders.

25 Sec. 995. (1) From the funds appropriated in part 1 for mental  
26 health diversion council, the department shall allocate  
27 \$3,850,000.00 to continue to implement the jail diversion pilot  
28 programs that are intended to address the recommendations of the  
29 mental health diversion council.

1 (2) Not later than March 1 of the current fiscal year, the  
2 department shall submit a report to the standard report recipients  
3 on the planned allocation of the funds appropriated for the mental  
4 health diversion council.

5 (3) As used in this section, "mental health diversion council"  
6 means the council as that term is defined in section 207e of the  
7 mental health code, 1974 PA 258, MCL 330.1207e.

8 Sec. 996. From the funds appropriated in part 1 for family  
9 support subsidy, the department shall make monthly payments of  
10 \$300.36 to a parent or legal guardian of a child approved for the  
11 family support subsidy by a CMHSP.

12 Sec. 997. The department shall use population data from the  
13 most recent federal data from the United States Census Bureau in  
14 determining the distribution of substance use disorder block grant  
15 funds.

16 Sec. 998. If the department decides to use census data to  
17 distribute state general funds to CMHSPs, the department shall use  
18 the most recent federal data from the United States Census Bureau.

19

20 **BEHAVIORAL HEALTH SERVICES**

21 Sec. 1001. Not later than December 31 of the current fiscal  
22 year, each CMHSP shall submit a report to the department that  
23 identifies populations being served by the CMHSP broken down by  
24 program eligibility category. The report must also include the  
25 percentage of the operational budget that is related to program  
26 eligibility enrollment. Not later than February 15 of the current  
27 fiscal year, the department shall submit the reports described in  
28 this section to the standard report recipients.

29 Sec. 1002. (1) The department shall expand the certified

1 community behavioral health clinic demonstration to include  
2 organizations that meet both of the following criteria:

3 (a) Be either a current CMHSP or an eligible organization as  
4 defined in section 223(a)(2)(F) of the protecting access to  
5 Medicare act of 2014, Public Law 113-93, with a CCBHC grant from  
6 the federal substance abuse and mental health services  
7 administration for at least 1 year.

8 (b) Achieve CCBHC certification by meeting all state and  
9 federal requirements by September 1, 2024, unless otherwise  
10 specified in the CCBHC Demonstration Handbook.

11 (2) The funds appropriated in part 1 for the expansion of  
12 CCBHC must prioritize funding for organizations that would provide  
13 CCBHC services in a county that does not already have a CCBHC  
14 located in the county.

15 (3) Not later than March 1 of the current fiscal year, the  
16 department shall submit to the standard report recipients an  
17 outcomes report for CCBHCs during the previous fiscal year that  
18 includes both statewide and CCBHC site-specific information on all  
19 of the following:

20 (a) Total number of distinct individuals served by the CCBHCs.

21 (b) The percentage of individuals served by the CCBHCs that  
22 were Medicaid recipients.

23 (c) The percentage of individuals served by the CCBHCs that  
24 were not Medicaid recipients.

25 (d) Total number of CCBHC daily visits.

26 (e) Total number of CCBHC services provided broken down by the  
27 9 core CCBHC services.

28 (f) Total expenditures from base and supplemental payments.

29 (g) Staffing and vacancy levels of the CCBHCs.



1           Sec. 1003. The department shall notify the Community Mental  
2 Health Association of Michigan when developing a policy or  
3 procedure that will impact a PIHP or CMHSP.

4           Sec. 1004. The department shall submit a report to the  
5 standard report recipients on any rebased formula changes to either  
6 Medicaid behavioral health services or non-Medicaid mental health  
7 services 90 days before the department implements the formula  
8 change. The notification must include a table showing the changes  
9 in funding allocation by PIHP for Medicaid behavioral health  
10 services or by CMHSP for non-Medicaid mental health services.

11           Sec. 1005. (1) From the funds appropriated in part 1 for  
12 health homes, the department shall maintain the number of  
13 behavioral health homes and maintain the number of substance use  
14 disorder health homes, in place by PIHP region as of September 30  
15 of the previous fiscal year. The department may expand the number  
16 of behavioral health homes and the number of substance use disorder  
17 health homes in a PIHP region added after October 1 of the current  
18 fiscal year.

19           (2) On a semiannual basis, the department shall submit a  
20 report to the standard report recipients on the number of  
21 individuals being served and expenditures incurred by each PIHP  
22 region by site.

23           Sec. 1008. A PIHP and CMHSP shall do all of the following:

24           (a) Work to reduce administration costs by ensuring that PIHP  
25 and CMHSP responsible functions are efficient in allowing optimal  
26 transition of dollars to the direct services considered most  
27 effective in assisting individuals served. Any consolidation of  
28 administrative functions must demonstrate, by independent analysis,  
29 a reduction in dollars spent on administration resulting in greater

1 dollars spent on direct services. Savings resulting from increased  
2 efficiencies must not be applied to PIHP and CMHSP net assets,  
3 internal service fund increases, building costs, increases in the  
4 number of PIHP and CMHSP personnel, or other areas not directly  
5 related to the delivery of improved services.

6 (b) Take an active role in managing mental health care by  
7 ensuring consistent and high-quality service delivery throughout  
8 its network and promote a conflict-free care management  
9 environment.

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

13 (d) Whenever possible, promote fair and adequate direct care  
14 reimbursement, including, but not limited to, fair wages for direct  
15 service workers.

16 Sec. 1010. (1) The department shall use the funds appropriated  
17 in part 1 for behavioral health community supports and services to  
18 reduce waiting lists at state-operated hospitals and centers  
19 through cost-effective community-based and residential services,  
20 including, but not limited to, assertive community treatment,  
21 forensic assertive community treatment, crisis stabilization units  
22 in accordance with chapter 9A of the mental health code, 1974 PA  
23 258, MCL 330.1971 to 330.1979, and psychiatric residential  
24 treatment facilities in accordance with section 137a of the mental  
25 health code, 1974 PA 258, MCL 330.1137a.

26 (2) From the funds appropriated in part 1 for behavioral  
27 health community supports and services, the department shall  
28 allocate \$30,450,000.00 to reimburse private providers for  
29 intensive psychiatric treatments and services that are provided

1 outside of state-operated hospitals and centers and for support  
2 efforts related to overseeing community-based programs placement.

3 (3) If a private provider has an existing wait list for  
4 intensive psychiatric treatments and services, a reimbursement to  
5 the private provider under this section must not be conditioned on  
6 the private provider giving wait-list priority to individuals  
7 placed with funds appropriated in this section.

8 (4) Not later than March 1 of the current fiscal year, the  
9 department shall submit a report to the standard report recipients  
10 on all of the following:

11 (a) The types of community supports and services purchased.

12 (b) The quantity, measured by days or other relevant unit of  
13 service, of each community support and service purchased.

14 (c) The quantifiable impact the purchase of community supports  
15 and services had on the state-operated hospital and center waiting  
16 lists during the previous fiscal year.

17 Sec. 1014. (1) From the funds appropriated in part 1 to  
18 agencies providing physical and behavioral health services to  
19 multicultural populations, the department shall award grants in  
20 accordance with the requirements of subsection (2). This state is  
21 not liable for any spending above the contract amount. The  
22 department shall not release funds until reporting requirements  
23 under section 1014 of article 6 of 2023 PA 119 are satisfied.

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

29 (a) Each contractor or subcontractor shall have accreditations

1 that attest to their competency and effectiveness as behavioral  
2 health and social service agencies.

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

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

8 (d) Each contractor or subcontractor shall demonstrate cost-  
9 effectiveness.

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

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

16 (3) The department shall require an annual report from the  
17 contractors described in subsection (2). The annual report, due 60  
18 days following the end of the contract period, must include  
19 specific information on services and programs provided, the client  
20 base to which the services and programs were provided, information  
21 on any wraparound services provided, and the expenditures for those  
22 services. Not later than February 1 of the current fiscal year, the  
23 department must submit the annual reports to the standard report  
24 recipients.

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

1 mental health services.

2

3 **STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL HEALTH SERVICES**

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

11 Sec. 1052. The department shall use gifts and bequests  
12 received for patient living and treatment environments for  
13 additional private funds to provide specific enhancements for  
14 individuals residing at state-operated facilities. The department  
15 shall use the gifts and bequests consistent with the stipulation of  
16 the donor. The department shall use gift and bequest donations  
17 within 3 years unless otherwise stipulated by the donor.

18 Sec. 1055. (1) The department shall not implement a closure or  
19 consolidation of a state hospital, center, or agency, until each  
20 CMHSP or PIHP affected by the closure or consolidation has programs  
21 and services in place for the individuals currently in the  
22 hospital, center, or agency that is to be closed or consolidated,  
23 and has a plan for providing services to the individuals who would  
24 have been admitted to the hospital, center, or agency.

25 (2) A closure or consolidation is dependent on adequate  
26 department-approved CMHSP and PIHP plans that include a discharge  
27 and aftercare plan for each individual currently in a facility  
28 described in subsection (1). A discharge and aftercare plan must  
29 address an individual's housing needs. A homeless shelter or

1 similar temporary shelter arrangement is inadequate to meet an  
2 individual's housing needs.

3 (3) Four months after a closure is certified under section  
4 19(6) of the state employees' retirement act, 1943 PA 240, MCL  
5 38.19, the department shall provide a closure plan to the standard  
6 report recipients.

7 (4) On the closure of a hospital, center, or agency and after  
8 transitional costs have been paid, the remaining balances of funds  
9 appropriated for the hospital, center, or agency must be  
10 transferred to CMHSPs or PIHPs responsible for providing services  
11 for individuals previously served by the hospital, center, or  
12 agency.

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

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

29 Sec. 1059. (1) The department shall identify specific outcomes

1 and performance measures for state-operated hospitals and centers,  
2 including, but not limited to, the following:

3 (a) The average wait time from the time of the receipt of a  
4 court order for the treatment of an individual who is determined  
5 incompetent to stand trial until the individual's admission to the  
6 center for forensic psychiatry or other state-operated psychiatric  
7 facility.

8 (b) The average number of individuals determined not guilty by  
9 reason of insanity by an order of the probate court who, on the  
10 first day of each month, are waiting to receive admission into the  
11 center for forensic psychiatry or other state-operated psychiatric  
12 facility. The average described in this subdivision must be  
13 calculated based on the most recent 12 months.

14 (c) The average number of adults who, on the first day of each  
15 month, are waiting to receive admission into another state-operated  
16 hospital or center through the civil admissions process. The  
17 average described in this subdivision must be calculated based on  
18 the most recent 12 months.

19 (d) The average number of children who, on the first day of  
20 each month, are waiting to receive admission into another state-  
21 operated hospital or center through the civil admissions process.  
22 The average described in this subdivision must be calculated based  
23 on the most recent 12 months.

24 (e) The average wait time for an adult who is awaiting  
25 admission into another state-operated hospital or center through  
26 the civil admissions process. The average described in this  
27 subdivision must be calculated based on the most recent 12 months.

28 (f) The average wait time for a child who is awaiting  
29 admission into another state-operated hospital or center through

1 the civil admissions process. The average described in this  
2 subdivision must be calculated based on the most recent 12 months.

3 (g) The number of individuals determined not guilty by reason  
4 of insanity or incompetent to stand trial by an order of a probate  
5 court that have been determined to be ready for discharge to the  
6 community, and the average wait time between being determined to be  
7 ready for discharge to the community and actual community  
8 placement.

9 (h) The number of adults admitted through the civil admission  
10 process that have been determined to be ready for discharge to the  
11 community, and the average wait time between being determined to be  
12 ready for discharge to the community and actual community  
13 placement.

14 (i) The number of children admitted through the civil  
15 admission process that have been determined to be ready for  
16 discharge to the community, and the average wait time between being  
17 determined to be ready for discharge to the community and actual  
18 community placement.

19 (j) The most recent 12-month total number of individuals  
20 determined not guilty by reason of insanity by an order of the  
21 probate court ordering the individual to be admitted into the  
22 center for forensic psychiatry or other state-operated psychiatric  
23 facility.

24 (k) The most recent 12-month total number of adults requested  
25 to be admitted to a state-operated hospital or center through the  
26 civil admissions process.

27 (l) The most recent 12-month total number of children requested  
28 to be admitted to a state-operated hospital or center through the  
29 civil admissions process.



1 (m) The number of individuals determined not guilty by reason  
2 of insanity by an order of the probate court that were removed from  
3 the admissions waiting list and the reason for the removal from the  
4 admissions waiting list.

5 (n) The number of adults awaiting admission through the civil  
6 admission process removed from the admission waiting list and the  
7 reason for the removal from the admission waiting list.

8 (o) The number of children awaiting admission through the  
9 civil admission process removed from the admission waiting list and  
10 the reason for the removal from the admission waiting list.

11 (p) The number of individuals determined not guilty by reason  
12 of insanity by an order of the probate court and not admitted into  
13 the center for forensic psychiatry or other state-operated hospital  
14 or center, and the rationale for the individual not being admitted.

15 (q) The number of adults not admitted into the other state-  
16 operated hospitals or centers through the civil admissions process  
17 and the rationale for the individual not being admitted.

18 (r) The number of children not admitted into a state-operated  
19 hospital or center through the civil admission process and the  
20 rationale for the individual not being admitted.

21 (2) Not later than April 1 of the current fiscal year, the  
22 department shall submit a report to the standard report recipients  
23 of this part on the outcomes and performance measures required  
24 under subsection (1).

25 Sec. 1060. Not later than March 1 of the current fiscal year,  
26 the department shall submit a report on mandatory overtime, staff  
27 turnover, and staff retention at the state psychiatric hospitals  
28 and centers to the standard report recipients. The report must  
29 include, but is not limited to, the following:

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

4 (b) A breakdown of voluntary and mandatory overtime hours  
5 worked by position and by hospital, and how that breakdown compares  
6 to the breakdown of voluntary and mandatory overtime hours during  
7 the previous fiscal year.

8 (c) The ranges of wages paid by position and by hospital, and  
9 how the ranges of wages paid compare to wages paid during the  
10 previous fiscal year.

11 Sec. 1062. Not later than March 1 of the current fiscal year,  
12 the department shall provide an update on their 5-year plan from  
13 the fiscal year ending September 30, 2022 to address the need for  
14 adult and children's inpatient psychiatric beds to the standard  
15 report recipients. The report must include updated recommendations  
16 for utilizing both public and private partnership beds, including  
17 the following information:

18 (a) The recommended number of public adult beds for  
19 individuals determined not guilty by reason of insanity or  
20 incompetent to stand trial by an order of the probate court versus  
21 the current number of available beds for this purpose.

22 (b) The recommended number of public civil admission adult  
23 beds versus the current number of available beds for this purpose.

24 (c) The recommended number of public civil admission children  
25 beds versus the current number of available beds for this purpose.

26 (d) The recommended number of public-private partnership adult  
27 beds for individuals determined not guilty by reason of insanity or  
28 incompetent to stand trial by an order of the probate court versus  
29 the current number of available beds for this purpose.

1 (e) The recommended number of public-private partnership civil  
2 admission adult beds versus the current number of available beds  
3 for this purpose.

4 (f) The recommended number of public-private partnership civil  
5 admission children beds versus the current number of available beds  
6 for this purpose.

7 Sec. 1063. (1) From the funds appropriated in part 1 for  
8 Walter P. Reuther psychiatric hospital - adult, children, and  
9 adolescents, the department shall maintain a psychiatric  
10 transitional unit and children's transition support team. The unit  
11 and support team described in this subsection shall augment the  
12 continuum of behavioral health services for high-need youth and  
13 provide additional continuity of care and transition into  
14 supportive community-based services.

15 (2) The outcome and performance measures for the unit and  
16 support team described in subsection (1) include, but are not  
17 limited to, the following:

18 (a) The rate of rehospitalization for youth served through the  
19 unit or support team at 30 and 180 days.

20 (b) The measured change in the Child and Adolescent Functional  
21 Assessment Scale for children served through the unit or support  
22 team.

23  
24 **HEALTH AND HUMAN SERVICES POLICY AND INITIATIVES**

25 Sec. 1140. From the funds appropriated in part 1 for primary  
26 care services, \$400,000.00 is allocated to free health clinics  
27 operating in this state. The department shall distribute the funds  
28 equally to each free health clinic. As used in this section, "free  
29 health clinic" means a nonprofit organization that uses a volunteer

1 health professional to provide care to an uninsured individual.

2 Sec. 1141. (1) From the funds appropriated in part 1 for  
3 critical health and wellness center operations, the department  
4 shall allocate \$1,500,000.00 to operate a health and wellness hub  
5 that is located in a county with a population between 66,600 and  
6 66,700 according to the most recent federal decennial census and  
7 that includes an FQHC located on-site. The health and wellness hub  
8 shall provide health services and child care services in a manner  
9 that increases access to affordable services.

10 (2) The department shall allocate \$750,000.00 of the funding  
11 described in this section to a nonprofit organization organized  
12 under the laws of this state that is exempt from federal income tax  
13 under section 501(c)(3) of the internal revenue code of 1986, 26  
14 USC 501, and that is located in a county with a population between  
15 600,000 and 700,000 according to the most recent federal decennial  
16 census.

17 (3) The department shall allocate \$750,000.00 of the funding  
18 described in this section to an FQHC that operates in 6 counties of  
19 this state and that has its main office located in a county with a  
20 population between 600,000 and 700,000 according to the most recent  
21 federal decennial census.

22 Sec. 1143. From the funds appropriated in part 1 for primary  
23 care services, the department shall allocate no less than  
24 \$675,000.00 for island primary health care access and services  
25 including island clinics, in the following amounts:

- 26 (a) Beaver Island, \$250,000.00.
- 27 (b) Mackinac Island, \$250,000.00.
- 28 (c) Drummond Island, \$150,000.00.
- 29 (d) Bois Blanc Island, \$25,000.00.

1           Sec. 1145. The department shall take steps necessary to work  
2 with the Indian Health Service, tribal health program facilities,  
3 or Urban Indian Health Program facilities, that provide services  
4 under a contract with a Medicaid managed care entity to ensure that  
5 the facilities described in this section receive the maximum amount  
6 allowable under federal law for Medicaid services.

7           Sec. 1147. From the funds appropriated in part 1 for cellular  
8 therapy for Versiti Michigan, \$750,000.00 is allocated to Versiti  
9 Michigan. The funds must be used to enhance the collection of fetal  
10 umbilical cord blood and stem cells for transplant, expand cord  
11 blood laboratory capabilities, expand the diversity of collections,  
12 and build information technology infrastructure.

13           Sec. 1153. From the funds appropriated in part 1 for crime  
14 victim rights sustaining grants, the department shall allocate  
15 \$102,600.00 of state general fund/general purpose revenue for a  
16 sexual assault nurse examiners program at a hospital that is  
17 located in a city with a population between 21,600 and 21,700 in a  
18 county with a population between 64,300 and 64,400, according to  
19 the most recent federal decennial census. The funds allocated under  
20 this section must be used to support staff compensation and  
21 training, victim needs, and community awareness, education, and  
22 prevention programs.

23           Sec. 1155. (1) From the funds appropriated in part 1 for the  
24 uniform statewide sexual assault evidence kit tracking system, in  
25 accordance with the final report of the Michigan sexual assault  
26 evidence kit tracking and reporting commission, the department  
27 shall allocate \$369,500.00 for administering a uniform statewide  
28 sexual assault evidence kit tracking system. The system must  
29 include all of the following:

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

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

6 (c) Secure electronic access for victims.

7 (d) The ability to accommodate concurrent data entry with kit  
8 collection through mechanisms that include, but are not limited to,  
9 web entry through computers or smartphones, and through scanning  
10 devices.

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

19 Sec. 1157. From the funds appropriated in part 1 for child  
20 advocacy centers - supplemental grants, the department shall  
21 allocate \$2,000,000.00 to provide additional funding to child  
22 advocacy centers to support the general operations of child  
23 advocacy centers. The department shall allocate the additional  
24 funding to each center consistent with the regular allocation  
25 formula for the child advocacy centers. The purpose of the  
26 additional funding is to increase the amount of services provided  
27 to children and their families who are victims of abuse over the  
28 amount provided in the previous fiscal year.

29 Sec. 1158. From the funds appropriated in part 1 for crime

1 victim rights sustaining grants, the department shall allocate  
2 \$29,897,400.00 to supplement the loss of federal victims of crime  
3 act and state crime victim rights funding. The department must  
4 distribute the funds consistent with the regular allocation formula  
5 for crime victim justice grants and crime victim rights services  
6 grants.

7 Sec. 1159. (1) From the funds appropriated in part 1 for  
8 community health programs, the department shall support  
9 preventative health supports and services in regions with high  
10 health care access and outcome disparities. The department shall  
11 use the funds appropriated pursuant to this section to provide for  
12 all of the following:

13 (a) Financial support for the creation and operation of  
14 community-based health clinics. A community-based health clinic  
15 shall provide preventative health supports and services, be  
16 established in communities with high social vulnerability and  
17 health disparities, and be operated in cooperation with trusted  
18 community partners with demonstrated experience in serving as an  
19 access point for preventative health supports and services.

20 (b) Financial support for the operation of healthy community  
21 zones. The zones must utilize long-term strategies to address  
22 access to healthy food, affordable housing, and safety networks.

23 (c) Financial support for the operation of mobile health units  
24 to provide preventative health services for individuals residing in  
25 areas with high disparities in health care outcome and access.

26 (2) Not later than March 1 of the current fiscal year, the  
27 department shall submit to the standard report recipients a report  
28 on the outcome of the community health programs described in  
29 subsection (1). The report must include, but is not limited to, all

1 of the following:

2 (a) The list of communities served.

3 (b) The types of health services offered by grant recipients.

4 (c) A spending report from the grant recipients.

5

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

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

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



1           Sec. 1182. Not later than April 1 of the current fiscal year,  
2 the department shall submit a report to the standard report  
3 recipients on the expenditures and activities undertaken by the  
4 lead abatement program during the previous fiscal year using the  
5 funds previously appropriated for the healthy homes program. The  
6 report must include, but is not limited to, a funding allocation  
7 schedule, the expenditures by category of expenditure and by  
8 subcontractor, the revenues received, a description of program  
9 elements, the number of housing units abated of lead-based paint  
10 hazards, and a description of program accomplishments and progress.

11           Sec. 1186. (1) From the funds appropriated in part 1 for  
12 emergency medical services program, the department shall allocate  
13 \$2,000,000.00 for a stroke and STEMI system. The department shall  
14 integrate the stroke and STEMI system into the statewide trauma  
15 care system within the emergency medical services system and shall  
16 ensure that the stroke and STEMI system complies with at least all  
17 of the following requirements:

18           (a) A requirement that a facility is designated as a stroke  
19 and STEMI facility if the department verifies that national  
20 certification or accreditation standards for the facility have been  
21 met.

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

24           (c) A requirement to develop and use stroke and STEMI  
25 registries that utilize nationally recognized data platforms with  
26 confidentiality standards.

27           (2) Not later than March 1 of the current fiscal year, the  
28 department shall submit a report to the standard report recipients  
29 on the expenditures and activities undertaken by the stroke and

1 STEMI system in the previous fiscal year from the funds  
2 appropriated under section 1186(1) of article 6 of 2021 PA 87. The  
3 report must include, but is not limited to, a funding allocation  
4 schedule, expenditures by category of expenditure and by vendor or  
5 grantee, and a description of program accomplishments and progress.

6 Sec. 1187. From the funds appropriated in part 1 for emergency  
7 medical services program, the department shall allocate  
8 \$2,000,000.00, of which \$500,000.00 is allocated on a 1-time basis,  
9 to develop and implement a system to support ground emergency  
10 medical transport. Funding must be used to develop a system for  
11 obtaining and recording federal Medicaid funding for the program.  
12 The department may apply for federal funds to support the program.  
13

14 **LOCAL HEALTH AND ADMINISTRATIVE SERVICES**

15 Sec. 1220. The amount appropriated in part 1 for  
16 implementation of the 1993 additions of or amendments to sections  
17 9161, 16221, 16226, 17014, 17015, and 17515 of the public health  
18 code, 1978 PA 368, MCL 333.9161, 333.16221, 333.16226, 333.17014,  
19 333.17015, and 333.17515, must be used to reimburse local health  
20 departments for costs incurred to implement section 17015(18) of  
21 the public health code, 1978 PA 368, MCL 333.17015.

22 Sec. 1221. If a county that participates in a district health  
23 department or has an associated arrangement with another local  
24 health department takes action to stop participating in that  
25 arrangement after October 1 of the current fiscal year, the  
26 department may assess a penalty from the local health department's  
27 operational accounts in an amount equal to no more than 6.25% of  
28 the local health department's essential local public health  
29 services funding. The department shall assess a penalty only if a

1 county requests the dissolution of the county's local health  
2 department.

3       Sec. 1222. (1) The department shall prospectively allocate  
4 funds appropriated in part 1 for essential local public health  
5 services to local health departments to support immunizations,  
6 infectious disease control, sexually transmitted disease control  
7 and prevention, hearing screening, vision services, food  
8 protection, public water supply, private groundwater supply, and  
9 on-site sewage management. The department shall consult with the  
10 department of agriculture and rural development before allocating  
11 funds for food protection under this section. The department shall  
12 consult with the department of environment, Great Lakes, and energy  
13 before allocating funds for public water supply, private  
14 groundwater supply, and on-site sewage management under this  
15 section.

16       (2) The department shall not distribute funds under subsection  
17 (1) to a county unless the county maintains local spending in the  
18 current fiscal year in an amount that is equal to or exceeds the  
19 amount the county expended in fiscal year 1992-1993 for the  
20 services described in subsection (1).

21       (3) Not later than February 1 of the current fiscal year, the  
22 department shall submit a report to the standard report recipients  
23 on the planned allocation of the funds appropriated for essential  
24 local public health services.

25       (4) The department shall continue to implement the  
26 distribution formula for allocating essential local public health  
27 services funding to local health departments as specified in  
28 section 1234 of article X of 2018 PA 207.

29       (5) From the funds appropriated in part 1 for essential local

1 public health services, each local public health department is  
2 allocated not less than the amount allocated to that local public  
3 health department during the previous fiscal year.

4 Sec. 1227. The department shall establish criteria for all  
5 funds allocated for health and wellness initiatives. The criteria  
6 must include a requirement that a program receiving funding is  
7 evidence-based and supported by research, includes interventions  
8 that have been shown to demonstrate outcomes that lower cost and  
9 improve quality, and is designed for statewide impact. The  
10 department shall give preference to a program that uses the funding  
11 as match for additional resources, including, but not limited to,  
12 federal sources.

13 Sec. 1231. (1) From the funds appropriated for local health  
14 services, up to \$4,750,000.00 is allocated for grants to local  
15 health departments to support PFAS response and emerging public  
16 health threat activities. The department shall allocate a portion  
17 of the funding in a collaborative fashion with local health  
18 departments in jurisdictions experiencing PFAS contamination. The  
19 department shall allocate the remainder of the funding to address  
20 infectious and vector-borne disease threats, and other  
21 environmental contamination issues, including, but not limited to,  
22 vapor intrusion, drinking water contamination, and lead exposure.  
23 The department shall allocate the funding to address issues  
24 including, but not limited to, staffing, planning and response, and  
25 creating and disseminating materials related to PFAS contamination  
26 issues and other emerging public health issues and threats.

27 (2) Not later than March 1 of the current fiscal year, the  
28 department shall submit a report to the standard report recipients  
29 on actual expenditures in the previous fiscal year and planned

1 spending in the current fiscal year of the funds described in  
2 subsection (1). The report must include recipient entities, the  
3 amount of allocation, the general category of allocation, and  
4 detailed uses.

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

9 Sec. 1233. The department shall not expend general fund and  
10 state restricted fund appropriations in part 1 for PFAS and  
11 environmental contamination response if federal funding or private  
12 grant funding is available for the same expenditures.

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

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

- 26 (a) Developing a list of rare diseases.  
27 (b) Posting the list of rare diseases on the department's  
28 website.  
29 (c) Updating the list of rare diseases.

1 (d) Investigating and reporting to the legislature on 1 rare  
2 disease on the list, and including legislative recommendations in  
3 the report to the legislature.  
4

5 **FAMILY HEALTH SERVICES**

6 Sec. 1301. (1) Not later than April 1 of the current fiscal  
7 year, the department shall submit to the standard report recipients  
8 a report on planned allocations from the amounts appropriated in  
9 part 1 for local MCH services, prenatal care outreach and service  
10 delivery support, family planning local agreements, and pregnancy  
11 prevention programs. Using applicable federal definitions, the  
12 report must include information on all of the following:

13 (a) The funding allocations.

14 (b) The actual number of women, children, and adolescents  
15 served and the amounts expended for each group for the previous  
16 fiscal year.

17 (c) A breakdown of the expenditure of the funds between urban  
18 and rural communities.

19 (2) The department shall ensure that the distribution of funds  
20 through the programs described in subsection (1) takes into account  
21 the needs of rural communities.

22 (3) As used in this section, "rural community" means any of  
23 the following:

24 (a) A county, city, village, or township with a population of  
25 30,000 or less.

26 (b) A county, city, village, or township described in  
27 subdivision (a), if it is located within a metropolitan statistical  
28 area.

29 Sec. 1306. (1) From the funds appropriated in part 1 for the

1 drinking water declaration of emergency, the department shall  
2 allocate funds to address needs in a city in which a declaration of  
3 emergency was issued because of drinking water contamination. The  
4 funds allocated under this section may be used to support any of  
5 the following activities:

6 (a) Nutrition assistance, nutritional and community education,  
7 food bank resources, and food inspections.

8 (b) Epidemiological analysis and case management of  
9 individuals at risk of elevated blood lead levels.

10 (c) Support for child and adolescent health centers,  
11 children's health care access program, and pathways to potential  
12 programming.

13 (d) Nursing services, breastfeeding education, evidence-based  
14 home visiting programs, intensive services, and outreach for  
15 children exposed to lead coordinated through local community mental  
16 health organizations.

17 (e) Department local office operations costs.

18 (f) Lead poisoning surveillance, investigations, treatment,  
19 and abatement.

20 (g) Nutritional incentives provided to local residents through  
21 the double up food bucks expansion program.

22 (h) Genesee County health department food inspectors to  
23 perform water testing at local food service establishments.

24 (i) Transportation related to health care delivery.

25 (j) Senior initiatives.

26 (k) Lead abatement contractor workforce development.

27 (l) Any other activity that the department considers  
28 appropriate.

29 (2) From the funds appropriated in part 1 for the drinking

1 water declaration of emergency, the department shall allocate  
2 \$300,000.00 for Revive Community Health Center for health support  
3 services as the center pursues certification as a federally  
4 qualified health center.

5 (3) From the funds appropriated in part 1 for the drinking  
6 water declaration of emergency, the department shall allocate  
7 \$500,000.00 for rides to wellness through the Flint mass  
8 transportation authority.

9 Sec. 1308. From the funds appropriated in part 1 for prenatal  
10 care outreach and service delivery support, the department shall  
11 allocate not less than \$500,000.00 for evidence-based programs to  
12 reduce infant mortality. The funds must be used for enhanced  
13 support and education to nursing teams or other teams of health  
14 professionals that the department considers qualified, client  
15 recruitment in areas designated as underserved for obstetrical and  
16 gynecological services and in other high-need communities,  
17 strategic planning to expand and sustain programs, and marketing  
18 and communications of programs to raise awareness, engage  
19 stakeholders, and recruit nurses.

20 Sec. 1311. From the funds appropriated in part 1 for prenatal  
21 care outreach and service delivery support, the department shall  
22 allocate not less than \$2,750,000.00 of state general fund/general  
23 purpose revenue for a rural home visit program. The department  
24 shall give equal consideration to all eligible evidence-based  
25 providers in all regions in contracting for rural home visitation  
26 services.

27 Sec. 1312. (1) From the funds appropriated in part 1 for  
28 prenatal care and premature birth avoidance grant, the department  
29 shall allocate \$1,000,000.00 through a competitive grant process



1 after fulfilling contract obligations between the department and a  
2 federal Healthy Start Program located in a county with a population  
3 between 600,000 and 700,000 according to the most recent federal  
4 decennial census. The grant described in this subsection must be  
5 used to improve health outcomes before, during, and after pregnancy  
6 and to reduce racial and ethnic differences in infant death rates  
7 and negative maternal outcomes. To be eligible to receive a grant  
8 under this subsection, an organization must partner with health  
9 agencies, and provide support to underserved populations for  
10 women's health, prenatal care, and premature birth avoidance.

11 (2) Not later than March 1 of the current fiscal year, the  
12 department shall submit to the legislature a spending report from  
13 the recipient of a grant under subsection (1).

14 Sec. 1313. (1) From the funds appropriated in part 1, the  
15 department shall continue developing an outreach program on fetal  
16 alcohol syndrome services, targeting health promotion, prevention,  
17 and intervention.

18 (2) The department shall explore federal grant funding to  
19 address prevention services for fetal alcohol syndrome and to  
20 reduce alcohol consumption among pregnant women.

21 (3) Not later than February 1 of the current fiscal year, the  
22 department shall submit a report to the standard report recipients  
23 on planned spending of funds appropriated within the department  
24 budget for fetal alcohol syndrome projects and services. The report  
25 must include, but not be limited to, all of the following  
26 information:

27 (a) The appropriation line item.

28 (b) The agency or recipient entity of the funds.

29 (c) The amount and purpose of the allocation of the funds.

1 (d) Detailed uses of the funds.

2 (e) A summary of the outcomes accomplished by the funding  
3 investments and the metrics used to determine the outcomes, if  
4 available.

5 Sec. 1314. From the funds appropriated in part 1, the  
6 department shall enhance the department's education and outreach  
7 efforts that encourage women of childbearing age to seek the  
8 confirmation of a pregnancy at the earliest indication of a  
9 possible pregnancy and to initiate continuous and routine prenatal  
10 care on the confirmation of a pregnancy. The department shall  
11 ensure that the department's programs, policies, and practices  
12 promote prenatal and obstetrical care by doing all of the  
13 following:

14 (a) Supporting access to care.

15 (b) Reducing and eliminating barriers to care.

16 (c) Supporting recommendations for best practices.

17 (d) Encouraging optimal prenatal habits, including, but not  
18 limited to, prenatal medical visits, use of prenatal vitamins, and  
19 the cessation of tobacco use, alcohol use, or drug use.

20 (e) Tracking birth outcomes to study improvements in  
21 prevalence of neonatal substance exposure, fetal alcohol syndrome,  
22 and other preventable neonatal disease.

23 (f) Tracking maternal increase in healthy behaviors following  
24 childbirth.

25 Sec. 1315. From the funds appropriated in part 1 for dental  
26 programs, \$200,000.00 is allocated to the Michigan Dental  
27 Association for the administration of a volunteer dental program  
28 that provides dental services to the uninsured.

29 Sec. 1316. The department shall use revenue from permit fees

1 for mobile dental facilities that the department receives under  
2 section 21605 of the public health code, 1978 PA 368, MCL  
3 333.21605, to offset the costs of processing and issuing permits  
4 for mobile dental facilities.

5 Sec. 1325. From the funds appropriated in part 1 for prenatal  
6 care outreach and service delivery support, the department shall  
7 allocate \$10,000,000.00 to support grants to local collaboratives  
8 to enhance the ability of local collaboratives to coordinate and  
9 improve maternal and infant health outcomes. To receive a grant  
10 under this section, a local collaborative must be a part of a  
11 perinatal quality collaborative that provides screening and  
12 treatment for perinatal substance use disorder.

13 Sec. 1341. The department shall use income eligibility and  
14 verification guidelines established by the Food and Nutrition  
15 Service agency of the United States Department of Agriculture to  
16 determine eligibility of individuals for the special supplemental  
17 nutrition program for women, infants, and children (WIC) as stated  
18 in current WIC policy.

19 Sec. 1342. From the funds appropriated in part 1 for family,  
20 maternal, and child health administration, the department shall  
21 allocate \$500,000.00 for a school children's healthy exercise  
22 program to promote and advance physical health for school children  
23 in kindergarten through grade 8. The department shall recommend  
24 model programs that incorporate evidence-based best practices for  
25 program sites to implement. The department shall grant the funds  
26 appropriated in part 1 for before- and after-school programs. The  
27 department shall establish guidelines for program sites. The  
28 program format must encourage local determination of program site  
29 activities and encourage including local youth in deciding program

1 site activities. Program goals must include children experiencing  
2 improved physical health and access to physical activity  
3 opportunities, the reduction of obesity, providing a safe place to  
4 play and exercise, and nutrition education. To be eligible to  
5 participate, a program site shall provide a 20% match to the state  
6 funding, which may be provided in full, or in part, by a  
7 corporation, foundation, or private partner. As used in this  
8 section, "program sites" means a school, community-based  
9 organization, private facility, recreation center, or similar site.

10 Sec. 1343. (1) From the funds appropriated in part 1 for  
11 dental programs, the department shall allocate \$4,260,000.00 of  
12 state and local funds, plus any private contributions received to  
13 support the program, to establish and maintain the dental oral  
14 assessment program described in section 9316 of the public health  
15 code, 1978 PA 368, MCL 333.9316.

16 (2) Not later than December 31 of the current fiscal year, the  
17 department shall submit a report to the standard report recipients  
18 that provides a summary of the dental reports the department  
19 receives from principals and administrators under section 9316 of  
20 the public health code, 1978 PA 368, MCL 333.9316.

21 Sec. 1349. Subject to federal approval, from the funds  
22 appropriated in part 1 for immunization program, the department  
23 shall allocate all of the following funds to support a statewide  
24 media campaign for improving this state's immunization rates:

25 (a) \$740,000.00 of general fund/general purpose revenue.

26 (b) Any available work project funds.

27 (c) Any available federal match through a contract

28 administered by the department with oversight from the behavioral  
29 and physical health and aging services administration and the

1 public health administration.

2  
3 **CHILDREN'S SPECIAL HEALTH CARE SERVICES**

4 Sec. 1360. From the funds appropriated in part 1, the  
5 department may do 1 or more of the following:

6 (a) Provide special formulas for eligible individuals with  
7 specified metabolic and allergic disorders.

8 (b) Provide medical care and treatment to eligible individuals  
9 with cystic fibrosis who are 26 years of age or older.

10 (c) Provide medical care and treatment to eligible individuals  
11 with hereditary coagulation defects, commonly known as hemophilia,  
12 who are 26 years of age or older.

13 (d) Provide human growth hormone to eligible individuals.

14 (e) Provide mental health care to eligible individuals for  
15 mental health needs that result from, or are a symptom of, the  
16 individual's qualifying medical condition.

17 (f) Provide medical care and treatment to eligible individuals  
18 with sickle cell disease who are 26 years of age or older.

19 Sec. 1361. From the funds appropriated in part 1 for medical  
20 care and treatment, the department may spend the funds to continue  
21 developing and expanding telemedicine capacity to allow families  
22 with children in the children's special health care services  
23 program to access specialty providers more readily and in a more  
24 timely manner. The department may spend funds to support chronic  
25 complex care management of children enrolled in the children's  
26 special health care services program to minimize hospitalizations  
27 and reduce costs to the program while improving outcomes and  
28 quality of life. As used in this section, "children's special  
29 health care services program" or "program" means the program

1 established under section 5815 of the public health code, 1978 PA  
2 368, MCL 333.5815.

3  
4 **AGING SERVICES**

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

9 Sec. 1404. From the funds appropriated in part 1 for community  
10 services, the department shall allocate \$658,000.00 to area  
11 agencies on aging for home and community-based services.

12 Sec. 1417. Not later than March 31 of the current fiscal year,  
13 the department shall submit to the standard report recipients a  
14 report that contains all of the following information:

15 (a) The total allocation of state resources made to each area  
16 agency on aging by individual program and administration.

17 (b) Detailed expenditures by each area agency on aging by  
18 individual program and administration, including both state-funded  
19 resources and locally funded resources.

20 Sec. 1421. From the funds appropriated in part 1 for community  
21 services, \$1,100,000.00 is allocated for locally determined needs  
22 that are provided by area agencies on aging.

23  
24 **HEALTH AND AGING SERVICES ADMINISTRATION**

25 Sec. 1505. Not later than March 1 of the current fiscal year,  
26 the department shall submit a report to the standard report  
27 recipients on the actual reimbursement savings and cost offsets  
28 that have resulted from the funds appropriated in part 1 for the  
29 office of inspector general and third-party liability efforts in

1 the previous fiscal year.

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

11 Sec. 1510. (1) From the funds appropriated in part 1 for  
12 health services administration, the department shall allocate  
13 \$1,650,000.00 to partner with a health centers careers training  
14 program to provide additional recruitment and training  
15 opportunities for individuals employed in FQHCs operating in this  
16 state.

17 (2) The partnering health centers careers training program  
18 must do all of the following:

19 (a) Provide recruiting and training opportunities for  
20 professions including, but not limited to, medical and dental  
21 assistants, community health workers, doulas, medical billing and  
22 coding professionals, pharmacy technicians, and opticians.

23 (b) Provide paid clinical or internship experience  
24 opportunities for behavioral health students.

25 (c) Provide on-the-job training and apprenticeship  
26 opportunities.

27 (d) Support opportunities to grow workforce and career  
28 opportunities for low-income and underserved communities.

29 Sec. 1518. The department shall coordinate with the department

1 of licensing and regulatory affairs to ensure that, on the issuance  
2 of an order suspending the license of an adult foster care  
3 facility, home for the aged, or nursing home, the department of  
4 licensing and regulatory affairs provides a notice to the  
5 department, to the house and senate appropriations subcommittees on  
6 the department budget, and to the members of the house of  
7 representatives and senate that represent the legislative districts  
8 of the county in which the adult foster care facility, home for the  
9 aged, or nursing home is located.

10

11 **HEALTH SERVICES**

12 Sec. 1601. The department shall use the cost of remedial  
13 services incurred by residents of licensed adult foster care  
14 facilities and licensed homes for the aged to determine financial  
15 eligibility for the medically needy. As used in this section,  
16 "remedial services" includes, but is not limited to, basic self-  
17 care and rehabilitation training for a resident.

18 Sec. 1602. (1) From the funds appropriated in part 1, the  
19 department shall seek federal authority to implement a transitional  
20 Medicaid benefit for incarcerated individuals to provide for not  
21 more than 90 days of health care before release.

22 (2) On a semiannual basis, the department shall report to the  
23 standard report recipients all of the following information:

24 (a) The status of receiving federal authority to implement  
25 this section and estimated start date.

26 (b) The number of incarcerated individuals receiving  
27 transitional Medicaid services in the current fiscal year, by  
28 facility.

29 (c) The cost per case, for each individual, by facility.



1           Sec. 1605. The protected income level for Medicaid coverage  
2 determined under section 106(1)(b) (iii) of the social welfare act,  
3 1939 PA 280, MCL 400.106, is 100% of the related public assistance  
4 standard.

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

9           Sec. 1607. (1) The department shall immediately presume that  
10 an applicant for Medicaid whose qualifying condition is pregnancy  
11 is eligible for Medicaid coverage, unless the preponderance of  
12 evidence in the applicant's application indicates otherwise. The  
13 applicant who is qualified as described in this subsection is  
14 allowed to select or remain with the Medicaid participating  
15 obstetrician of the applicant's choice.

16           (2) Each qualifying applicant is entitled to receive all  
17 medically necessary obstetrical and prenatal care without  
18 preauthorization from a health plan. All claims submitted for  
19 payment for obstetrical and prenatal care must be paid at the  
20 Medicaid fee-for-service rate if a contract does not exist between  
21 the Medicaid participating obstetrical or prenatal care provider  
22 and the managed care plan. The applicant must receive a listing of  
23 Medicaid physicians and managed care plans in the immediate  
24 vicinity of the applicant's residence.

25           (3) If an applicant, presumed to be eligible for Medicaid  
26 under subsection (1), is subsequently found to be ineligible, a  
27 Medicaid physician or managed care plan that has been providing  
28 pregnancy services to the applicant is entitled to reimbursement  
29 for the services until the Medicaid physician or managed care plan

1 is notified by the department that the applicant was found to be  
2 ineligible for Medicaid.

3 (4) If the preponderance of evidence in an application under  
4 subsection (1) indicates that the applicant is not eligible for  
5 Medicaid, the department shall refer the applicant to the nearest  
6 public health clinic or similar entity as a potential source for  
7 receiving pregnancy-related services.

8 (5) The department shall develop an enrollment process for  
9 applicants covered under this section that facilitates the  
10 selection of a managed care plan at the time of application.

11 (6) The department shall require that Medicaid managed care  
12 plans enroll women whose qualifying condition for Medicaid is  
13 pregnancy.

14 (7) The department shall encourage physicians to provide an  
15 applicant whose qualifying condition for Medicaid is pregnancy with  
16 a referral to a Medicaid participating dentist at the applicant's  
17 first pregnancy-related appointment.

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

29 (2) Notwithstanding subsection (1), if a hospital service is

1 provided to a dual Medicare/Medicaid recipient with only Medicare  
2 part B coverage, the Medicaid reimbursement must equal, when  
3 combined with a payment for Medicare or other third-party source of  
4 payment, the amount established for a Medicaid-only patient,  
5 including a capital payment.

6 Sec. 1620. (1) If a Medicaid claim is a fee-for-service  
7 Medicaid claim, the professional dispensing fee for a drug that is  
8 listed as a medication on the Michigan pharmaceutical products list  
9 is \$20.02 or the pharmacy's submitted dispensing fee, whichever is  
10 less.

11 (2) If a Medicaid claim is a fee-for-service Medicaid claim, a  
12 drug that is not listed as a specialty medication on the Michigan  
13 pharmaceutical products list is as follows:

14 (a) If the drug is indicated as preferred on the department's  
15 preferred drug list, \$10.80 or the pharmacy's submitted dispensing  
16 fee, whichever is less.

17 (b) If the drug is not on the department's preferred drug  
18 list, \$10.64 or the pharmacy's submitted dispensing fee, whichever  
19 is less.

20 (c) If the drug is indicated as nonpreferred on the  
21 department's preferred drug list, \$9.00 or the pharmacy's submitted  
22 dispensing fee, whichever is less.

23 Sec. 1626. (1) Not later than January 15 of the current fiscal  
24 year, each pharmacy benefit manager that receives reimbursements,  
25 either directly or through a Medicaid health plan, from the funds  
26 appropriated in part 1 for medical services must submit all of the  
27 following information to the department for the previous fiscal  
28 year:

29 (a) The total number of prescriptions that were dispensed.

1 (b) The aggregate fiscal year paid pharmacy claims repriced  
2 using the wholesale acquisition cost for each drug on its  
3 formulary.

4 (c) The aggregate amount of rebates, discounts, and price  
5 concessions that the pharmacy benefit manager received for each  
6 drug on its formulary. The aggregate amount of rebates must include  
7 any utilization discounts the pharmacy benefit manager received  
8 from a manufacturer.

9 (d) The aggregate amount of administrative fees that the  
10 pharmacy benefit manager received from all pharmaceutical  
11 manufacturers.

12 (e) The aggregate amount identified in subdivisions (b) and  
13 (c) that were retained by the pharmacy benefit manager and did not  
14 pass through to the department or to the Medicaid health plan.

15 (f) The aggregate amount of reimbursements the pharmacy  
16 benefit manager paid to contracting pharmacies.

17 (g) Any other information considered necessary by the  
18 department.

19 (2) Not later than March 1 of the current fiscal year, the  
20 department shall submit a report including the information provided  
21 under subsection (1) to the standard report recipients.

22 (3) Any nonaggregated information submitted under this section  
23 is confidential and must not be disclosed to any person by the  
24 department. The information described in this subsection is not a  
25 public record of the department.

26 Sec. 1628. From the funds appropriated in part 1 for hospital  
27 services and therapy and Healthy Michigan plan, the department  
28 shall continue to allocate \$3,000,000.00 in general fund/general  
29 purpose revenue and any associated federal match to maintain the

1 Medicaid reimbursement rate for dental services provided at  
2 ambulatory surgical centers and outpatient hospitals. The funding  
3 provided in this section must be used to maintain the minimum rate  
4 of reimbursement for dental services provided in ambulatory  
5 surgical centers at \$1,495.00 and maintain the minimum rate of  
6 reimbursement for dental services provided in outpatient hospitals  
7 at \$2,300.00.

8 Sec. 1629. The department shall utilize maximum allowable cost  
9 pricing for generic drugs that is based on wholesaler pricing to  
10 providers. The wholesaler pricing must be based on the price  
11 available from at least 2 wholesalers who deliver drugs in this  
12 state.

13 Sec. 1630. Not later than April 1 of the current fiscal year,  
14 from the funds appropriated in part 1 for dental services, the  
15 department shall submit a report to the standard report recipients  
16 on the dental service benefit. The report must cover all of the  
17 following areas:

18 (a) Information on the implementation of the Adult Medicaid  
19 dental benefit redesign including all of the following information:

20 (i) The number of dental providers, by Medicaid health plan in  
21 this state, who provided 1 or more Medicaid dental services in the  
22 fiscal year ending September 30, 2022, and the number of additional  
23 providers who were added in the previous fiscal year, with a  
24 delineation in the reported numbers based on the average payment  
25 per visit and before and after the implementation of the Adult  
26 Medicaid dental benefit redesign.

27 (ii) The status of enhanced care coordination.

28 (iii) The array of covered dental benefits and services before  
29 the Adult Medicaid dental benefit redesign and how the available

1 benefits and services changed or expanded after the Adult Medicaid  
2 dental benefit redesign.

3 (b) Information on the Healthy Kids Dental program including  
4 all of the following information:

5 (i) The number of children enrolled in the Healthy Kids Dental  
6 program who visited the dentist in the previous fiscal year broken  
7 down by dental benefit manager.

8 (ii) The number of dentists who accept payment from the Healthy  
9 Kids Dental program broken down by dental benefit manager.

10 (iii) The annual change in dental utilization of children  
11 enrolled in the Healthy Kids Dental program broken down by dental  
12 benefit manager.

13 (iv) Service expenditures for the Healthy Kids Dental program  
14 broken down by dental benefit manager.

15 (v) Administrative expenditures for the Healthy Kids Dental  
16 program broken down by dental benefit manager.

17 Sec. 1631. (1) The department shall require copayments on  
18 dental, podiatric, and vision services provided to Medicaid  
19 recipients, except as prohibited by federal law or a law of this  
20 state.

21 (2) Except as otherwise prohibited by federal law or a law of  
22 this state, the department shall require Medicaid recipients to pay  
23 the following copayments:

24 (a) Two dollars for a physician office visit.

25 (b) Three dollars for a hospital emergency room visit.

26 (c) Fifty dollars for the first day of an inpatient hospital  
27 stay.

28 (d) Two dollars for an outpatient hospital visit.

29 (e) One dollar for a generic drug or any drug indicated as

1 preferred on the department's preferred drug list and \$3.00 for a  
2 brand-name drug not indicated as preferred on the department's  
3 preferred drug list.

4 Sec. 1641. An institutional provider that is required to  
5 submit a cost report under the Medicaid program shall submit cost  
6 reports completed in full not more than 5 months after the end of  
7 the institutional provider's fiscal year.

8 Sec. 1644. (1) From the funds appropriated in part 1, the  
9 department shall maintain wage subsidy payments to direct care  
10 workers and eligible non-clinical staff employed by skilled nursing  
11 facilities at the amount in effect on October 1, 2023. This funding  
12 must include all costs incurred by the employer, including, but not  
13 limited to, payroll taxes, due to the wage increase. As used in  
14 this subsection, "direct care workers" means a registered  
15 professional nurse, licensed practical nurse, competency-evaluated  
16 nursing assistant, and respiratory therapist.

17 (2) From the funds appropriated in part 1, the department  
18 shall maintain wage subsidy payments at the amount in effect on  
19 October 1, 2023 to direct care workers who are employed by licensed  
20 adult foster care facilities and licensed homes for the aged and  
21 who provide Medicaid-funded fee-for-service personal care services  
22 that were not eligible for any direct care worker pay adjustment  
23 under Medicaid-funded managed care. This funding must include all  
24 costs incurred by the employer, including, but not limited to,  
25 payroll taxes, due to the wage increase.

26 Sec. 1645. (1) From the funds appropriated in part 1, the  
27 department shall increase wages by \$0.85 per hour to eligible non-  
28 clinical staff employed by skilled nursing facilities from the  
29 previous fiscal year. This funding must include all costs incurred

1 by the employer, including payroll taxes, due to the wage increase.

2 (2) The non-clinical staff eligible for the wage increase  
3 under subsection (1) are individuals whose costs are reported in  
4 the following job classifications in nursing facility institutional  
5 cost reports shared with the department:

- 6 (a) Other housekeeping.
- 7 (b) Other maintenance worker.
- 8 (c) Other plant operations.
- 9 (d) Other laundry.
- 10 (e) Dining room assistants.
- 11 (f) Other dietary workers.
- 12 (g) Other medical records.
- 13 (h) Other social services.
- 14 (i) Other diversion therapy.
- 15 (j) Beauty and barber.
- 16 (k) Gift, flower, coffee, and canteen worker.

17 Sec. 1646. From the funds appropriated in part 1, the  
18 department shall increase Medicaid reimbursement rates for  
19 orthopedic providers to not less than 74% of Medicare reimbursement  
20 rates for similar equipment and services.

21 Sec. 1657. (1) The department shall not make reimbursement for  
22 Medicaid to screen and stabilize a Medicaid recipient, including  
23 stabilization of a psychiatric crisis, in a hospital emergency  
24 room, contingent on obtaining prior authorization from the  
25 recipient's HMO. If the recipient is discharged from the emergency  
26 room, the hospital shall notify the recipient's HMO within 24 hours  
27 of the diagnosis and treatment received.

28 (2) If the treating hospital determines that the recipient  
29 will require further medical service or hospitalization beyond the



1 point of stabilization, that hospital shall receive authorization  
2 from the recipient's HMO prior to admitting the recipient.

3 (3) Subsections (1) and (2) do not require an alteration to an  
4 existing agreement between an HMO and its contracting hospitals and  
5 do not require an HMO to reimburse for services that are not  
6 considered to be medically necessary.

7 Sec. 1662. (1) From the funds appropriated in part 1, the  
8 department shall require an annual external quality review of each  
9 contracting HMO. The external quality review must analyze and  
10 evaluate aggregated information on quality, timeliness, and access  
11 to health care services that the HMO or its contractors furnish to  
12 Medicaid beneficiaries. The department shall create a report  
13 containing each quality review required under this subsection.

14 (2) The department shall require Medicaid HMOs to provide  
15 EPSDT utilization data through the encounter data system, and HEDIS  
16 well child health measures in accordance with the National  
17 Committee for Quality Assurance prescribed methodology.

18 (3) The department shall submit a copy of the analysis of the  
19 Medicaid HMO annual audited reports on HEDIS and the report under  
20 subsection (1) to the standard report recipients within 30 days  
21 after the department's receipt of the final information required  
22 from the contractors.

23 Sec. 1670. (1) The appropriation in part 1 for the MICHild  
24 program is to be used to provide comprehensive health care to all  
25 children under age 19 who reside in families with an income at or  
26 below 212% of the federal poverty level, who are uninsured and have  
27 not had coverage by other comprehensive health insurance within 6  
28 months of applying for MICHild benefits, and who are residents of  
29 this state. The department shall develop detailed eligibility

1 criteria through the behavioral and physical health and aging  
2 services administration public concurrence process. The eligibility  
3 criteria must be consistent with the provisions of this part and  
4 part 1.

5 (2) The department shall provide up to 1 year of continuous  
6 eligibility to children eligible for the MIChild program.

7 Sec. 1677. From the funds appropriated in part 1 for the  
8 MIChild program, the department shall provide, at a minimum, all  
9 benefits available under the Michigan benchmark plan that are  
10 delivered through contracted providers and consistent with federal  
11 law, including, but not limited to, the following medically  
12 necessary services:

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

17 (b) Outpatient mental health services, other than substance  
18 use disorder services, including services furnished in a mental  
19 hospital operated by this state and community-based services.

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

22 (d) Dental services as outlined in the approved MIChild state  
23 plan.

24 (e) Substance use disorder treatment services that may include  
25 inpatient, outpatient, and residential substance use disorder  
26 treatment services.

27 (f) Care management services for mental health diagnoses.

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

1 (h) Emergency ambulance services.

2 Sec. 1682. (1) In addition to the appropriations in part 1,  
3 the department is authorized to receive and spend penalty money  
4 received as the result of noncompliance with Medicaid certification  
5 regulations. Penalty money, characterized as private funds,  
6 received by the department shall increase authorizations and  
7 allotments in the long-term care accounts.

8 (2) Any unexpended penalty money, at the end of the year, must  
9 carry forward to the following year.

10 (3) Not later than March 1 of the current fiscal year, the  
11 department shall report to the standard report recipients on  
12 penalty money received by the department as described in subsection  
13 (1). The report must include, but is not limited to, the following  
14 information:

15 (a) The amount of penalty monies received by the department in  
16 the previous fiscal year listed by the assessed entity.

17 (b) A list of the entities that were assessed penalties in the  
18 previous fiscal year with the rationale for each penalty.

19 Sec. 1692. (1) The department is authorized to pursue  
20 reimbursement for eligible services provided in Michigan schools  
21 from the federal Medicaid program. The department and the state  
22 budget director are authorized to negotiate and enter into  
23 agreements, together with the department of education, with local  
24 and intermediate school districts regarding the sharing of federal  
25 Medicaid services funds received for these services. The department  
26 is authorized to receive and disburse funds to participating school  
27 districts pursuant to agreements described in this subsection and  
28 pursuant to federal law and a law of this state.

29 (2) From the funds appropriated in part 1 for health services

1 school-based services payments, the department is authorized to do  
2 all of the following:

3 (a) Finance activities within the behavioral and physical  
4 health and aging services administration related to eligible  
5 services.

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

9 (c) Offset general fund costs associated with the Medicaid  
10 program.

11 Sec. 1693. The special Medicaid reimbursement appropriation in  
12 part 1 may be increased if the department submits a Medicaid state  
13 plan amendment pertaining to this line item at a level higher than  
14 the appropriation. The department is authorized to appropriately  
15 adjust financing sources in accordance with the increased  
16 appropriation.

17 Sec. 1694. From the funds appropriated in part 1 for special  
18 Medicaid reimbursement, \$2,629,900.00 of general fund/general  
19 purpose revenue and any associated federal match must be  
20 distributed for poison control services to an academic health care  
21 system that has a high volume of providing care to indigent  
22 individuals.

23 Sec. 1697. The department shall require that Medicaid health  
24 plans administering Healthy Michigan plan benefits maintain a  
25 network of dental providers in sufficient numbers, mix, and  
26 geographic locations throughout their respective service areas in  
27 order to provide adequate dental care for Healthy Michigan plan  
28 enrollees.

29 Sec. 1700. Not later than December 1 of the current fiscal

1 year, the department shall report to the standard report recipients  
2 on the distribution of funding provided, and the net benefit if the  
3 special hospital payment is not financed with general fund/general  
4 purpose revenue, to each eligible hospital during the previous  
5 fiscal year from the following special hospital payments:

6 (a) GME.

7 (b) Special rural hospital payments provided under section  
8 1802(2) of this part.

9 (c) Lump-sum payments to rural hospitals for obstetrical care  
10 provided under section 1802(1) of this part.

11 Sec. 1702. From the funds appropriated in part 1, the  
12 department shall increase the rates in place as of September 30,  
13 2023 by 25% for private duty nursing services for Medicaid  
14 beneficiaries under the age of 21. These additional funds must be  
15 used to attract and retain highly qualified registered nurses and  
16 licensed practical nurses to provide private duty nursing services  
17 so that medically fragile individuals can be cared for in the most  
18 homelike setting possible.

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

23 Sec. 1764. The department shall annually certify whether rates  
24 paid to Medicaid health plans and specialty PIHPs are actuarially  
25 sound in accordance with federal requirements. The department shall  
26 provide to the standard report recipients a copy of the rate  
27 certification required under this section and the approval of rates  
28 paid to Medicaid health plans and specialty PIHPs for any fiscal  
29 year not later than October 1 for Medicaid capitation rate

1 certifications and not later than February 15, May 15, and August  
2 15 for any Medicaid capitation rate amendments. Following the rate  
3 certification, the department shall ensure that no new or revised  
4 state Medicaid policy bulletin that is promulgated materially  
5 impacts the capitation rates that have been certified.

6 Sec. 1786. From the funds appropriated in part 1, the  
7 department shall maintain Medicaid reimbursement for the  
8 administration of injectable and oral vaccines at \$23.03.

9 Sec. 1788. From the funds appropriated in part 1, the  
10 department shall provide Medicaid reimbursement rates, including  
11 Medicaid reimbursements from the ambulance provider quality  
12 assurance assessment, for ground ambulance services at not less  
13 than 100% of the Medicare base rates for Locality 01 for ground  
14 ambulance services in effect on January 1, 2023.

15 Sec. 1790. The department shall maintain the current  
16 practitioner rates paid for CPT codes 90791 through 90899 for  
17 psychiatric procedures through Medicaid fee-for-service and through  
18 the comprehensive Medicaid health plans for psychiatric procedures  
19 provided for Medicaid recipients under the age of 21.

20 Sec. 1791. From the funds appropriated in part 1 for health  
21 plan services and physician services, the department shall provide  
22 Medicaid reimbursement rates for neonatal services at 100% of the  
23 Medicare rate received for those services in effect on the date the  
24 services are provided to eligible Medicaid recipients. The neonatal  
25 services and physician services eligible for reimbursement rates  
26 under this section are described as CPT codes 99468, 99469, 99471,  
27 99472, 99475, 99476, 99477, 99478, 99479, and 99480.

28 Sec. 1792. Not later than April 30 of the current fiscal year,  
29 the department shall evaluate pharmacy encounter data through the

1 first 2 quarters of the fiscal year to determine, in consultation  
2 with the Medicaid health plans, if rates must be recertified. Not  
3 later than May 30 of the current fiscal year, the department shall  
4 report the evaluation results to the standard report recipients and  
5 the Medicaid health plans.

6 Sec. 1794. (1) From the funds appropriated in part 1, the  
7 department shall provide Medicaid reimbursements for hospital-based  
8 substance use disorder peer-supports.

9 (2) Not later than March 1 of the current fiscal year, the  
10 department shall report to the standard report recipients on the  
11 statewide amounts and each hospital amount for hospital-based  
12 substance use disorder peer-supports during the first quarter of  
13 the current fiscal year, including for all of the following:

- 14 (a) The number of individuals served.
- 15 (b) The Medicaid reimbursement utilization.
- 16 (c) The total expenditures.

17 Sec. 1801. From the funds appropriated in part 1 for physician  
18 services and health plan services, the department shall continue  
19 the increase to Medicaid rates for primary care services provided  
20 only by primary care providers. The department shall not provide  
21 the increase to Medicaid rates under this section to primary care  
22 providers whose primary practice is as a non-primary-care  
23 subspecialty. The department shall establish policies that most  
24 effectively limit the increase to primary care providers for  
25 primary care services only. As used in this section, "primary care  
26 provider" means a physician, or a practitioner working in  
27 collaboration with a physician, who is either licensed under part  
28 170 or part 175 of the public health code, 1978 PA 368, MCL  
29 333.17001 to 333.17097 and 333.17501 to 333.17556, and who works as

1 a primary care provider in general practice or is board-eligible or  
2 certified with a specialty designation of family medicine, general  
3 internal medicine, or pediatric medicine, or is a provider who  
4 provides the department with documentation of equivalency.

5 Sec. 1802. (1) From the funds appropriated in part 1 for  
6 hospital services and therapy:

7 (a) \$8,470,200.00 in general fund/general purpose revenue must  
8 be provided as lump-sum payments to noncritical access hospitals  
9 that qualified for rural hospital access payments in fiscal year  
10 2013-2014 and that provide obstetrical care this fiscal year.  
11 Payment amounts must be based on the volume of obstetrical care  
12 cases and newborn care cases for all such cases billed by each  
13 qualified hospital in the most recent year for which data is  
14 available. For the current fiscal year, a hospital that met  
15 established occupied bed criteria based on Medicaid cost reports as  
16 of the fiscal year ending September 30, 2011, and that is located  
17 within a county with a population of not more than 165,000 and in a  
18 city, village, or township with a population of not more than  
19 16,000, according to the 2000 federal decennial census, is  
20 eligible.

21 (b) \$15,204,800.00 in general fund/general purpose revenue and  
22 any associated federal match must be awarded as rural access  
23 payments to noncritical access hospitals that meet criteria  
24 established by the department for services to low-income rural  
25 residents. One of the reimbursement components of the distribution  
26 formula must be assistance with labor and delivery services. For  
27 the current fiscal year, a hospital that met established occupied  
28 bed criteria based on Medicaid cost reports as of the fiscal year  
29 ending September 30, 2011, and that is located within a county with



1 a population of not more than 165,000 and in a city, village, or  
2 township with a population of not more than 16,000, according to  
3 the 2000 federal decennial census, is eligible solely for the rural  
4 access pool general fund/general purpose revenue portion.

5 (2) The department shall make payments not later than January  
6 1 of the current fiscal year.

7 (3) The department shall publish the distribution of payments  
8 for the current fiscal year and the previous fiscal year.

9 Sec. 1804. The department may utilize the federal public  
10 assistance reporting information system to continue to work to  
11 identify Medicaid recipients who are veterans and who may be  
12 eligible for federal veterans' health care benefits or other  
13 benefits and shall continue to refer veterans to the department of  
14 military and veterans affairs for assistance in securing additional  
15 benefits.

16 Sec. 1805. The department shall modify Medicaid policy in the  
17 Medicaid Manual, Nursing Facility Chapter, Certification, Survey  
18 and Enforcement Appendix, Section 2.3 and submit a Medicaid state  
19 plan amendment to CMS to seek approval to allow the department to  
20 approve or deny any application seeking Medicaid bed certification  
21 and provider enrollment for dual certification of Medicare-only  
22 beds. The modified Medicaid policy must replace the current  
23 certification criteria. The modified Medicaid policy must provide  
24 that the department grant Medicaid bed certification if the  
25 application meets all of the following:

26 (a) A verification from the state survey agency that the beds  
27 listed in the applications are Medicare-certified.

28 (b) The state survey agency finds that the facility named in  
29 the application is in substantial compliance with federal

1 regulations at the time of application.

2 (c) If there is an accepted submitted plan of correction for  
3 any survey activity occurring following the date of the application  
4 submission, the facility named in the application will be deemed to  
5 have satisfactory survey performance.

6 Sec. 1810. In advance of the annual rate setting development,  
7 Medicaid health plans must be given at least 60 days to dispute and  
8 correct any discarded encounter data before rates are certified.  
9 The department shall notify each contracting Medicaid health plan  
10 of any encounter data that have not been accepted for the purposes  
11 of rate setting.

12 Sec. 1812. Not later than June 1 of the current fiscal year,  
13 and using the most recent available cost reports, the department  
14 shall complete a report of all direct and indirect costs associated  
15 with residency training programs for each hospital that receives  
16 funds appropriated in part 1 for graduate medical education or  
17 through the MiDocs consortium. The report shall be submitted to the  
18 standard report recipients.

19 Sec. 1820. (1) In order to avoid duplication of efforts, if a  
20 Medicaid health plan has been reviewed and accredited by a national  
21 accrediting entity for health care services, the department shall  
22 use applicable national accreditation review criteria to determine  
23 compliance with corresponding requirements in this state.

24 (2) The department shall continue to comply with federal law  
25 and laws of this state and shall not initiate an action that  
26 negatively impacts beneficiary safety.

27 (3) As used in this section, "national accrediting entity"  
28 means the National Committee for Quality Assurance, the URAC,  
29 formerly known as the Utilization Review Accreditation Commission,

1 or another appropriate entity, as approved by the department.

2 Sec. 1830. From the funds appropriated in part 1 for hospital  
3 services and therapy, the department shall allocate \$7,500,000.00  
4 to support prenatal health care providers operating in this state  
5 to provide services for existing group-based prenatal care programs  
6 that include 1 or more health care professionals leading small  
7 groups of expectant mothers - in the same phase of pregnancy - in  
8 discussions and other health services that promote the well-being  
9 and health of mothers and babies.

10 Sec. 1831. From the funds appropriated in part 1 for hospital  
11 services and therapy, the department shall allocate \$10,000,000.00  
12 to continue to support hospitals in this state to improve maternal  
13 safety and outcomes by administering and expanding a data-driven  
14 maternal safety and quality improvement initiative that is based on  
15 interdisciplinary and consensus-based practices. The initiative  
16 expansion must focus on mitigating pregnancy-associated injury and  
17 death, work to improve outcomes for underserved groups, and address  
18 problems related to substance use disorders.

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

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

25 (a) The encouragement of the training of physicians in  
26 specialties, including primary care, that are necessary to meet the  
27 future needs of residents of this state.

28 (b) The training of physicians in settings that include  
29 ambulatory sites and rural locations.

1 (c) The training of practitioners providing pediatric  
2 psychiatry services.

3 Sec. 1850. The department may allow Medicaid health plans to  
4 assist with maintaining eligibility through outreach activities to  
5 ensure continuation of Medicaid eligibility and enrollment in  
6 managed care. The assistance may include mailings, telephone  
7 contact, or face-to-face contact with beneficiaries enrolled in the  
8 individual Medicaid health plan. Medicaid health plans may offer  
9 assistance in completing paperwork for beneficiaries enrolled in  
10 the Medicaid health plan. In partnership with the National Kidney  
11 Foundation of Michigan, the department shall allocate \$950,000.00  
12 in general fund/general purpose revenue and any associated federal  
13 match from the Healthy Michigan plan to enhance Medicaid health  
14 plan outreach to improve access and utilization of Medicaid covered  
15 services. These funds must also support outreach efforts by the  
16 Morris Hood III Chronic Kidney Disease and COVID-19 Complications  
17 Prevention Initiative to identify, educate, and prevent chronic  
18 kidney disease in high-risk populations and regions.

19 Sec. 1854. The funds appropriated in part 1 for PACE must  
20 support a current fiscal year enrollment cap that is not less than  
21 8,543.

22 Sec. 1855. From the funds appropriated in part 1 for PACE, to  
23 the extent that funding is available in the PACE line item and  
24 unused program slots are available, the department may do the  
25 following:

26 (a) Increase the number of slots for a local and already-  
27 established PACE if the local PACE has provided appropriate  
28 documentation to the department indicating its ability to expand  
29 capacity to provide services to additional PACE clients.

1 (b) Suspend the 10 member per month individual PACE enrollment  
2 increase cap in order to allow unused and unobligated slots to be  
3 allocated to address unmet demand for PACE services.

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

18 (2) Not later than September 15 of the current fiscal year,  
19 each Medicaid-enrolled hospice with a residence that receives funds  
20 under this section shall provide a report to the department on the  
21 utilization of the grant funding provided in subsection (1). The  
22 report must be provided in a format prescribed by the department  
23 and must include the following information:

24 (a) The number of patients served.

25 (b) The number of days served.

26 (c) The daily room and board rates for the patients served.

27 (d) If there is not sufficient funding to cover the total room  
28 and board need, the number of patients who did not receive care due  
29 to insufficient grant funding.

1 (3) If funds awarded under this section remain unused at the  
2 end of the current fiscal year, the Medicaid-enrolled hospice with  
3 a residence shall return those unused funds to this state.

4 Sec. 1858. Not later than April 1 of the current fiscal year,  
5 from the funds appropriated in part 1, the department shall submit  
6 a report to the standard report recipients that contains all of the  
7 following elements related to the current Medicaid pharmacy carve-  
8 out of pharmaceutical products as provided for in section 109h of  
9 the social welfare act, 1939 PA 280, MCL 400.109h:

10 (a) The number of prescriptions paid by the department during  
11 the previous fiscal year.

12 (b) The total amount of expenditures for prescriptions paid by  
13 the department during the previous fiscal year.

14 (c) The number of and total expenditures for prescriptions  
15 paid for by the department for generic equivalents during the  
16 previous fiscal year.

17 Sec. 1859. The department shall partner with the Michigan  
18 Association of Health Plans and Medicaid health plans to develop  
19 and implement strategies for the use of information technology  
20 services for Medicaid research activities. The department shall  
21 make available state medical assistance program data, including  
22 Medicaid behavioral data, to the Michigan Association of Health  
23 Plans and Medicaid health plans or any vendor considered qualified  
24 by the department to perform research activities consistent with  
25 this state's goals of improving health; increasing the quality,  
26 reliability, availability, and continuity of care; and reducing the  
27 cost of care for the eligible population of Medicaid recipients.

28 Sec. 1862. From the funds appropriated in part 1, the  
29 department shall maintain payment rates for Medicaid obstetrical

1 services at 95% of Medicare levels effective October 1, 2014.

2 Sec. 1870. (1) From the funds appropriated in part 1 for  
3 hospital services and therapy, the department shall allocate  
4 \$11,000,000.00 in general fund/general purpose revenue plus any  
5 contributions from public entities, up to \$5,000,000.00, and any  
6 associated federal match to the MiDocs consortium to create new  
7 primary care residency slots in underserved communities. The new  
8 primary care residency slots must be in 1 of the following  
9 specialties: family medicine, general internal medicine, general  
10 pediatrics, general OB-GYN, psychiatry, or general surgery.

11 (2) The department shall seek any necessary approvals from CMS  
12 to allow the department to implement the program described in this  
13 section.

14 (3) Assistance with repayment of medical education loans, loan  
15 interest payments, or scholarships provided by the MiDocs  
16 consortium shall be contingent upon a minimum 2-year commitment to  
17 practice in an underserved community in this state post-residency  
18 and an agreement to forego any sub-specialty training for at least  
19 2 years post-residency with the exception of a child and adolescent  
20 psychiatry fellowship that must be integrated with a psychiatry  
21 residency training program in a MiDocs consortium affiliated  
22 institution.

23 (4) The MiDocs consortium shall work with the department to  
24 integrate the Michigan inpatient psychiatric admissions discussion  
25 (MIPAD) recommendations and, when possible, prioritize training  
26 opportunities in state psychiatric hospitals and community mental  
27 health organizations.

28 (5) The department shall maintain the MiDocs consortium  
29 initiative advisory council to help support implementation of the

1 program described in this section, and to provide oversight. The  
2 advisory council must be composed of the MiDocs consortium, the  
3 Michigan Area Health Education Centers, the Michigan Primary Care  
4 Association, the Michigan Center for Rural Health, the Michigan  
5 Academy of Family Physicians, and any other appointees designated  
6 by the department.

7 (6) Not later than September 1 of the current fiscal year, the  
8 MiDocs consortium shall submit a report to the standard report  
9 recipients that includes all of the following information:

10 (a) Audited financial statement of per-resident costs.

11 (b) Education and clinical quality data.

12 (c) Roster of trainees, including areas of specialty and  
13 locations of training.

14 (d) Medicaid revenue by training site.

15 (7) The department shall monitor outcome and performance  
16 measures for this program, including, but not limited to, the  
17 following:

18 (a) Increasing this state's ability to recruit, train, and  
19 retain primary care physicians and other select specialty  
20 physicians in underserved communities.

21 (b) Maximizing training opportunities with community health  
22 centers, rural critical access hospitals, solo or group private  
23 practice physician practices, schools, and other community-based  
24 clinics, in addition to the required training through rotations at  
25 inpatient hospitals.

26 (c) Increasing the number of residency slots for family  
27 medicine, general internal medicine, general pediatrics, general  
28 OB-GYN, psychiatry, and general surgery.

29 (8) Unexpended and unencumbered funds up to a maximum



1 \$11,000,000.00 in general fund/general purpose revenue plus any  
2 contributions from public entities, up to \$5,000,000.00, and any  
3 associated federal match remaining in accounts appropriated in part  
4 1 for hospital services and therapy are designated as work project  
5 appropriations, and any unencumbered or unallotted funds must not  
6 lapse at the end of the fiscal year and must be available for  
7 expenditures for the MiDocs consortium to create new primary care  
8 residency slots in underserved communities under this section until  
9 the work project has been completed. All of the following are in  
10 compliance with section 451a(1) of the management and budget act,  
11 1984 PA 431, MCL 18.1451a:

12 (a) The purpose of the work project is to fund the cost of the  
13 MiDocs consortium to create new primary care residency slots in  
14 underserved communities.

15 (b) The work project will be accomplished by contracting with  
16 the MiDocs consortium to oversee the creation of new primary care  
17 residency slots.

18 (c) The total estimated completion cost of the work project is  
19 \$29,400,000.00.

20 (d) The tentative completion date for the work project is  
21 September 30, 2029.

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

27 Sec. 1874. The department shall ensure, in counties where PACE  
28 services are available, that PACE is included as an option in all  
29 options counseling and enrollment brokering for aging services and

1 managed care programs, including, but not limited to, Area Agencies  
2 on Aging, centers for independent living, and the MiChoice home and  
3 community-based waiver. The department must include approved  
4 marketing and discussion materials for options counseling.

5       Sec. 1879. (1) The department shall maintain a single,  
6 standard preferred drug list to be used by all contracted Medicaid  
7 managed health care programs. If the department makes changes to  
8 the preferred drug list, the department shall consult with all  
9 contracted managed health care programs and the Michigan pharmacy  
10 and therapeutics committee to ensure sufficient access to medically  
11 necessary drugs for each disease state. The department has final  
12 authority over the list and shall design the list to ensure access  
13 to clinically effective and appropriate drug therapies and to  
14 maximize federal rebates and supplemental rebates.

15       (2) Not later than July 15 of the current fiscal year, the  
16 department shall submit a report to the standard report recipients  
17 that compares the managed care pharmacy expenditures, utilization,  
18 and rebates before implementing a single, standard preferred drug  
19 list to managed care pharmacy expenditures, utilization, and  
20 rebates after implementing a single, standard preferred drug list.  
21 The report must include quarterly data on collected rebates,  
22 pharmacy utilization, and expenditures by quarter for at least 8  
23 quarters before implementing a single, standard preferred drug  
24 list, and the experienced rebates, pharmacy utilization, and  
25 expenditures for at least 18 quarters, and the projected rebates,  
26 pharmacy utilization, and expenditures for quarters 19 through 24  
27 after implementing a single, standard preferred drug list. The data  
28 must be aggregated by the department so as not to disclose the  
29 proprietary or confidential drug-specific information, or the

1 proprietary or confidential information that directly or indirectly  
2 identifies financial information linked to a single manufacturer.

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

10 Sec. 1896. From the funds appropriated in part 1, the  
11 department shall maintain a Medicaid recuperative care and  
12 transitional services benefit for beneficiaries experiencing  
13 homelessness. These services, which include medical and care  
14 coordination support, must be provided to eligible beneficiaries as  
15 part of a hospital discharge process.

16

17 **INFORMATION TECHNOLOGY**

18 Sec. 1901. (1) The department shall submit a report on a  
19 semiannual basis to the standard report recipients that lists the  
20 projects approved in the previous 6 months and provides the purpose  
21 for approving each project including any federal, state, court, or  
22 legislative requirement for each project.

23 (2) Once an award for an expansion of information technology  
24 is made, the department shall submit a report to the standard  
25 report recipients that provides the projected cost of the expansion  
26 broken down by use and type of expense.

27 Sec. 1906. From the funds appropriated in part 1 for  
28 information technology services and projects, the department shall  
29 allocate \$4,950,000.00 general fund/general purpose revenue, and

1 all associated federal matching revenue, to a public and private  
2 nonprofit collaboration that is designated as this state's  
3 statewide health information exchange by cooperative agreement, to  
4 implement health information technology strategies for health  
5 information exchange development, data management, and population  
6 health at a statewide level.

7 Sec. 1907. Not later than March 1 of the current fiscal year,  
8 the department shall submit a report to the standard report  
9 recipients on all current, contracted information technology-  
10 related projects. The report must include, by project, the total  
11 contractual costs, spending in previous fiscal years, planned  
12 spending for the current fiscal year, and fiscal year-to-date  
13 spending.

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

18 (2) From the funds appropriated in part 1 for bridges  
19 information system, the department shall only encumber or expend  
20 funds for the operation, maintenance, and improvements of Bridges  
21 and MIBridges.

22 (3) From the funds appropriated in part 1 for Michigan  
23 Medicaid information system, the department shall only encumber or  
24 expend funds for the operation, maintenance, and improvements of  
25 the community health automated Medicaid processing system.

26 (4) From the funds appropriated in part 1 for Michigan  
27 statewide automated child welfare information system, the  
28 department shall only encumber or expend funds for the operation,  
29 maintenance, and improvements of MiSACWIS.

1 (5) From the funds appropriated in part 1 for comprehensive  
2 child welfare information system, the department shall only  
3 encumber or expend funds for the operation, maintenance, and  
4 improvements to the comprehensive child welfare information system.

5 (6) From the funds appropriated in part 1 for comprehensive  
6 child welfare information system, the department shall continue to  
7 develop a new information system to replace MiSACWIS consistent  
8 with the plan provided by the department to the United States  
9 District Court for Eastern District of Michigan as a part of the  
10 settlement. The development of the comprehensive child welfare  
11 information system must adhere to department of technology,  
12 management, and budget and information technology investment fund  
13 (ITIF) policies and practices, including use of the state unified  
14 information technology environment methodology and agile  
15 development. The project team shall also participate in and comply  
16 with the enterprise portfolio management office process and product  
17 quality assurance. To ensure full transparency, the project must be  
18 included in the ITIF portfolio for executive, legislative, and  
19 external reporting purposes. As a component of the ITIF portfolio,  
20 the project is subject to governance and oversight by the  
21 information technology investment management board.

22 Sec. 1910. From the funds appropriated in part 1,  
23 \$536,041,400.00 is appropriated for information technology services  
24 and projects including:

25 (a) \$114,678,900.00 for bridges information system.

26 (b) \$21,555,400.00 for Michigan statewide automated child  
27 welfare information system.

28 (c) \$102,482,000.00 for Michigan Medicaid information system.

29 (d) \$44,243,200.00 for child support automation.

1 (e) \$8,274,700.00 for comprehensive child welfare information  
2 system.

3  
4 **ONE-TIME APPROPRIATIONS**

5 Sec. 1920. From the funds appropriated in part 1 for ALS  
6 services, the department shall allocate \$829,900.00 to the ALS  
7 Association to provide free ALS care services including, but not  
8 limited to, in home visits, caregiver training, support groups,  
9 durable medical equipment, and respite care. As used in this  
10 section, "ALS" means amyotrophic lateral sclerosis.

11 Sec. 1922. From the funds appropriated in part 1 for  
12 behavioral health services, the department shall allocate  
13 \$3,500,000.00 to a nonprofit organization organized under the laws  
14 of this state that is exempt from federal income tax under section  
15 501(c)(3) of the internal revenue code of 1986, 26 USC 501, and is  
16 located in a city with a population between 138,000 and 140,000  
17 that is located in a county with a population between 881,000 and  
18 882,000, according to the most recent federal decennial census. To  
19 be eligible for funds under this section, an organization must have  
20 current experience providing support services to immigrant children  
21 and families from Afghanistan, Iraq, Syria, Yemen, and other Middle  
22 Eastern countries, and Ukraine.

23 Sec. 1924. (1) From the funds appropriated in part 1 for  
24 behavioral health urgent care, the department shall allocate  
25 \$1,700,00.00 as a grant to a nonprofit organization that is  
26 organized under the laws of this state, is exempt from federal  
27 income tax under section 501(c)(3) of the internal revenue code of  
28 1986, 26 USC 501, is located in a city with a combined population  
29 greater than 100,000 that is located in a county with a population

1 between 280,000 and 290,000, according to the most recent federal  
2 decennial census, and that has a mission to help people in crisis  
3 by offering home, healing, and recovery. The grant must be used to  
4 support the establishment of a behavioral health urgent care  
5 program.

6 (2) The unexpended funds appropriated in part 1 for behavioral  
7 health urgent care are designated as a work project appropriation.  
8 Unencumbered or unallotted funds shall not lapse at the end of the  
9 fiscal year and shall be available for expenditures under this  
10 section until the project has been completed. The following are in  
11 compliance with section 451a of the management and budget act, 1984  
12 PA 431, MCL 18.1451a:

13 (a) The purpose of the project is to provide funds for  
14 behavioral health urgent care services, including mental health  
15 assessments, psychiatric evaluations, short term prescriptions,  
16 intervention and therapy, and care coordination with ongoing health  
17 providers.

18 (b) The project will be accomplished by a nonprofit  
19 organization exempt from federal income tax under section 501(c)(3)  
20 of the internal revenue code of 1986, 26 USC 501.

21 (c) The estimated cost of the project is \$1,700,000.00.

22 (d) The tentative completion date is September 30, 2029.

23 Sec. 1926. From the funds appropriated on part 1 for child  
24 advocacy centers, the department shall allocate \$3,500,000.00 to  
25 support the expansion of services provided by child advocacy  
26 centers. The department must distribute the funds consistent with  
27 the regular allocation formula for child advocacy centers.

28 Sec. 1928. From the funds appropriated in part 1 for  
29 children's behavioral health service expansion, the department

1 shall allocate \$2,000,000.00 to a nonprofit organization organized  
2 under the laws of this state that is exempt from federal income tax  
3 under section 501(c)(3) of the internal revenue code of 1986, 26  
4 USC 501, founded in 1929, and located in a city with a population  
5 greater than 600,000, according to the most recent federal  
6 decennial census, to support increased operational capacity in  
7 order to provide clinical mental health treatment for children and  
8 families, primary care coordination, and provider recruitment,  
9 retention, and training.

10 Sec. 1930. (1) From the funds appropriated in part 1 for  
11 children's services administration training, the department shall  
12 provide grant funding to support improvements in the current  
13 training program for children's services administration staff that  
14 will include experiential child safety training.

15 (2) The unexpended funds appropriated in part 1 for children's  
16 services administration training are designated as a work project  
17 appropriation, and any unencumbered or unallotted funds shall not  
18 lapse at the end of the fiscal year and shall be available for  
19 expenditures under this section until the work project has been  
20 completed. The following are in compliance with section 451a of the  
21 management and budget act, 1984 PA 431, MCL 18.1451a:

22 (a) The purpose of the work project is to fund experiential  
23 child safety training to be provided to children's services  
24 administration staff.

25 (b) The work project will be accomplished by utilizing state  
26 employees or contracts with service providers.

27 (c) The total estimated completion cost of the work project is  
28 \$2,000,000.00.

29 (d) The tentative completion date is September 30, 2029.



1           Sec. 1932. From the funds appropriated in part 1 for CMHSP  
2 crisis services, the department shall allocate \$2,000,000.00 to a  
3 CMHSP located in a county with a population between 1,200,000 and  
4 1,300,000 according to the most recent federal decennial census to  
5 renovate a crisis hub, to improve crisis service coordination for  
6 youth and family care, for assessment center renovations, for peer  
7 respite services, and for an urgent care clinic.

8           Sec. 1934. (1) From the funds appropriated in part 1 for  
9 complex medical condition center, the department shall allocate  
10 \$500,000.00 as a grant to a nonprofit organization that operates a  
11 facility in a county with a population between 600,000 and 700,000  
12 according to the most recent federal decennial census and that  
13 provides children up to age 26 with weak immune systems with an  
14 ability to fulfill their social, emotional, and physical needs. The  
15 facility must provide a safe and infection-controlled environment  
16 consisting of MERV 14 air filtration, building pressurization,  
17 antimicrobial surfaces, and other hospital-grade features.  
18 Programming must be specifically designed for children with complex  
19 medical conditions and their immediate family to interact socially  
20 and to feel a sense of belonging through the use of therapeutic,  
21 evidence-based, and organizational-led activities targeted to  
22 address both behavioral and physical health outcomes.

23           (2) The nonprofit organization identified under subsection (1)  
24 shall partner with the largest provider-owned nonprofit Medicaid  
25 health maintenance organization headquartered in the same county  
26 for which the nonprofit organization is providing services to  
27 identify and enroll 100 qualifying children up to age 26 for  
28 programmatic services. The provider-owned nonprofit Medicaid health  
29 maintenance organization shall be responsible for the collection of

1 data and metric identification for each of the 100 enrollees,  
2 including, but not limited to, utilization trends and health  
3 outcomes associated with isolation and loneliness, mental health  
4 concerns, emergency department visits, and hospitalizations.

5 (3) The provider-owned nonprofit Medicaid health maintenance  
6 organization shall create and utilize a new pilot program code to  
7 track the metrics identified in subsection (2). This pilot program  
8 code must encompass a group of services provided by the nonprofit  
9 organization. The services provided and that are reflected in the  
10 pilot program code must include services that align with existing  
11 reimbursable service codes such as care management and group  
12 therapy and select other services without a code or without  
13 Medicaid program reimbursement, including, but not limited to, play  
14 therapy, parent support services, and transportation services. The  
15 following existing codes shall be included in the new pilot program  
16 code, group therapy: 90853, and care management: 99487, 99495,  
17 99496, 98968, 98962, 99484, G9001, G9002, and G9007. The following  
18 services without existing codes must also be included in the pilot  
19 program:

20 (a) Social support or social support programming.

21 (b) Play therapy or recreation therapy.

22 (c) Educational support services.

23 (d) Parent or caregiver respite or support.

24 (4) Not later than September 30 of the current fiscal year,  
25 the grant recipient under this section shall submit a report to the  
26 department that demonstrates the effectiveness of the program in  
27 fulfilling the social, emotional, and physical needs of the  
28 patients served by the grant recipient. This report must include  
29 the data and metrics identified in subsection (2).

1           (5) The department shall explore Medicaid waiver options  
2 available from the Centers for Medicare and Medicaid, which, upon  
3 approval, would authorize the department to expend Medicaid funds  
4 on similar supports and services as those offered under this  
5 program and pilot program code for Medicaid recipients.

6           Sec. 1936. From the funds in part 1 for cranial hair  
7 prosthesis, the department shall allocate \$250,000.00 to a nonprofit  
8 organization organized under the laws of this state that is exempt  
9 from federal income tax under section 501(c)(3) of the internal  
10 revenue code of 1986, 26 USC 501, and is located in a city with a  
11 population between 58,800 and 59,000 that is located in a county  
12 with a population between 881,000 and 882,000, according to the  
13 most recent federal decennial census. To be eligible for funds  
14 under this section, an organization must have current experience  
15 providing wigs and support services to children and young adults  
16 experiencing hair loss as a result of an illness.

17           Sec. 1938. From the funds appropriated in part 1 for critical  
18 access hospital facility and equipment, the department shall  
19 allocate \$2,000,000.00 to a critical access hospital located in a  
20 city with a population between 1,900 and 2,100 in a county with a  
21 population between 8,500 and 9,000, according to the most recent  
22 federal decennial census, for hospital equipment repairs and  
23 replacements and for facility repairs.

24           Sec. 1940. From the funds appropriated on part 1 for deferred  
25 maintenance, the department shall allocate \$1,000,000.00 to a  
26 privately owned and operated secure residential juvenile justice  
27 facility located in a city with a population between 8,960 and  
28 9,000 that is located in a county with a population between  
29 1,700,000 and 1,800,000, according to the most recent federal

1 decennial census. The funds must be used to support capital  
2 improvements and security upgrades needed to reopen the facility.

3 Sec. 1942. From the funds appropriated in part 1 for dental  
4 clinic, the department shall allocate \$2,900,000.00 to United Way  
5 of Northwest Michigan for the cost of purchasing, rather than  
6 leasing, a building that houses both a dental clinic and the United  
7 Way of Northwest Michigan.

8 Sec. 1944. (1) From the funds appropriated in part 1 for  
9 dental programs, \$2,500,000.00 of general fund/general purpose  
10 revenue and any associated federal match must be distributed to a  
11 qualified nonprofit provider of dental services that partners with  
12 local health departments for the purpose of expanding capacity and  
13 ensuring operational efficiencies that may include equipment and  
14 technology upgrades.

15 (2) In order to be considered a qualified nonprofit provider  
16 of dental services, the provider must demonstrate all of the  
17 following:

18 (a) The provider has an effective health insurance enrollment  
19 process for uninsured patients.

20 (b) The provider has an effective process of charging patients  
21 on a sliding scale based on the patient's ability to pay.

22 (c) The provider uses additional fund sources including, but  
23 not limited to, federal Medicaid matching funds.

24 Sec. 1946. From the funds in part 1 for domestic violence  
25 shelter operations, the department shall allocate \$300,000.00 to a  
26 nonprofit organization organized under the laws of this state that  
27 is exempt from federal income tax under section 501(c)(3) of the  
28 internal revenue code of 1986, 26 USC 501, and is located in a city  
29 with a population between 9,100 and 9,200 that is located in a

1 county with a population between 154,000 and 155,000, according to  
2 the most recent federal decennial census. Funds must be used to  
3 support domestic violence shelter operations and building  
4 renovations.

5 Sec. 1948. (1) From the funds appropriated in part 1 for doula  
6 training and continuing education, the department shall support  
7 professional development for doulas participating in the  
8 department's doula registry.

9 (2) The unexpended funds appropriated in part 1 for doula  
10 training and continuing education are designated as a work project  
11 appropriation. Unencumbered or unallotted funds shall not lapse at  
12 the end of the fiscal year and shall be available for expenditures  
13 under this section until the project has been completed. The  
14 following are in compliance with section 451a of the management and  
15 budget act, 1984 PA 431, MCL 18.1451a:

16 (a) The purpose of the work project is to provide training and  
17 continuing education for new and established doulas that serve the  
18 residents of this state.

19 (b) The work project will be accomplished by utilizing state  
20 employees or contracts.

21 (c) The total estimated cost of the work project is  
22 \$2,909,800.00.

23 (d) The tentative completion date is September 30, 2029.

24 Sec. 1950. (1) From the funds appropriated in part 1 for  
25 employment and training support services, the department shall  
26 allocate \$2,500,000.00 to support individuals and families to  
27 remain employed and become self-sufficient.

28 (2) The unexpended funds appropriated in part 1 for employment  
29 and training support services are designated as a work project

1 appropriation. Unencumbered or unallotted funds shall not lapse at  
2 the end of the fiscal year and shall be available for expenditures  
3 under this section until the project has been completed. The  
4 following are in compliance with section 451a(1) of the management  
5 and budget act, 1984 PA 431, MCL 18.1451a:

6 (a) The purpose of the work project is to provide funds for  
7 vehicle repairs, purchases, and other services to assist  
8 individuals in accessing and retaining employment.

9 (b) The work project will be accomplished by utilizing state  
10 employees or contracts.

11 (c) The total estimated cost of the work project is  
12 \$2,500,000.00.

13 (d) The tentative completion date is September 30, 2029.

14 Sec. 1952. (1) From the funds appropriated in part 1 for  
15 firearm injury and violence prevention, the department shall  
16 allocate \$7,500,000.00 to contract with a public university located  
17 in a city with a population between 100,000 and 130,000 in a county  
18 with a population between 370,000 and 380,000, according to the  
19 most recent federal decennial census, to provide training,  
20 technical assistance, evaluations, and infrastructure to support  
21 all of the following:

22 (a) The implementation of local prevention strategies intended  
23 to reduce school violence. Prevention strategies may include, but  
24 are not limited to, any of the following:

25 (i) School climate improvement.

26 (ii) Student care and threat assessment teams.

27 (iii) Anonymous reporting systems.

28 (iv) Restorative justice practices.

29 (v) Evidence-based student leadership development.

1 (b) The implementation of the extreme risk protective order  
2 act, 2023 PA 38, MCL 691.1801 to 691.1821.

3 (c) The collection of more complete data about fatal and  
4 nonfatal firearm injuries in this state.

5 (2) The unexpended funds appropriated in part 1 for firearm  
6 injury and violence prevention are designated as a work project  
7 appropriation, and any unencumbered or unallotted funds shall not  
8 lapse at the end of the fiscal year and shall be available for  
9 expenditures for projects under this section until the projects  
10 have been completed. The following are in compliance with section  
11 451a of the management and budget act, 1984 PA 431, MCL 18.1451a:

12 (a) The purpose of the work project is to provide training,  
13 technical support, and program evaluations to reduce firearm  
14 injuries in this state and to establish new infrastructure for data  
15 collection on injuries in this state.

16 (b) The work project will be accomplished by utilizing state  
17 employees or contracts.

18 (c) The total estimated cost of the work project is  
19 \$7,500,000.00.

20 (d) The tentative completion date is September 30, 2029.

21 Sec. 1954. From the funds appropriated in part 1 for firearm  
22 safety and violence prevention, the department shall allocate  
23 \$1,800,000.00 to support community-based firearm safety and  
24 prevention efforts. Funds must be allocated to community-based  
25 organizations that provide training and programming on extreme risk  
26 protective orders issued under the extreme risk protection order  
27 act, 2023 PA 38, MCL 691.1801 to 691.1821, and the safe storage law  
28 described in section 9 of 1927 PA 372, MCL 28.429.

29 [Sec. 1955. From the funds appropriated in part 1 for](#)

1 firefighter health care, the department shall allocate  
2 \$3,500,000.00 for health screenings for firefighters. To be  
3 eligible for funding under this section, the entity must only  
4 request funding for a health screening of a firefighter that is  
5 employed and compensated on a full-time basis and the entity is 1  
6 the following:

7 (a) A fire department of an airport operated by a county,  
8 public airport authority, or state university or college.

9 (b) A fire department of a city, township, or village.

10 (c) A public fire authority.

11 Sec. 1956. (1) From the funds appropriated in part 1 for first  
12 responder and public safety staff mental health, the department  
13 shall allocate \$5,000,000.00 for a grant program to support  
14 firefighters, police officers, emergency medical services  
15 personnel, public safety tele-communicators, local correctional  
16 officers, juvenile detention employees, prosecutors, and  
17 individuals working on special teams to address crimes such as  
18 internet sex crimes, sexual crimes against children, or traffic  
19 fatalities suffering from post-traumatic stress syndrome and other  
20 mental health conditions. The grant program must primarily provide  
21 grants to behavioral health providers and may also include funding  
22 to the Michigan crisis and action line established under section  
23 165 of the mental health code, 1974 PA 258, MCL 330.1165, to  
24 improve information and referrals for these services. The  
25 department shall coordinate and integrate the grant program with  
26 the Michigan crisis and access line established under section 165  
27 of the mental health code, 1974 PA 258, MCL 330.1165.

28 (2) The unexpended funds appropriated in part 1 for first  
29 responder and public safety staff mental health are designated as a



1 work project appropriation. Unencumbered or unallotted funds shall  
2 not lapse at the end of the fiscal year and shall be available for  
3 expenditures under this section until the project has been  
4 completed. All of the following are in compliance with section 451a  
5 of the management and budget act, 1984 PA 431, MCL 18.1451a:

6 (a) The purpose of the work project is to ensure that first  
7 responder and public safety staff who are dealing with post-  
8 traumatic stress syndrome and other mental health conditions have  
9 access to enhanced mental health services.

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

13 (c) The estimated cost of the work project is \$5,000,000.00.

14 (d) The tentative completion date is September 30, 2029.

15 Sec. 1958. From the funds appropriated in part 1 for health  
16 equity statewide curriculum, the department shall allocate  
17 \$500,000.00 to partner with a state medical professional society  
18 located in a city with a population between 47,000 and 48,000 in a  
19 county with a population between 284,000 and 285,000, according to  
20 the most recent federal decennial census, to develop a statewide  
21 health equity curriculum for implementation in medical schools and  
22 continuing medical education in this state.

23 Sec. 1960. From the funds appropriated in part 1 for home  
24 health care authority, the department shall allocate \$1,000,000.00  
25 to support the creation of a home health care public authority.  
26 Once established, the home health care public authority must  
27 provide supportive services to Medicaid recipients by accessing  
28 eligible community-based supports, their families, and those who  
29 serve them. Supportive services may include program orientation,

1 training, and patient matching services to home health care  
2 workers.

3 Sec. 1962. (1) From the funds appropriated in part 1 for  
4 homeless programs, the department shall allocate \$2,750,000.00 to  
5 support family shelters, individuals, or families who are homeless  
6 and at risk of being homeless. Eligible expenditures from this line  
7 must include the following:

8 (a) Emergency hotels for families experiencing homelessness.

9 (b) Creating additional spaces at family homeless shelters.

10 (2) The unexpended funds appropriated in part 1 for homeless  
11 programs are designated as a work project appropriation.

12 Unencumbered or unallotted funds shall not lapse at the end of the  
13 fiscal year and shall be available for expenditures under this  
14 section until the project has been completed. The following are in  
15 compliance with section 451a(1) of the management and budget act,  
16 1984 PA 431, MCL 18.1451a:

17 (a) The purpose of the work project is to provide emergency  
18 hotels for families in need and build up family shelter capacity.

19 (b) The work project will be accomplished by utilizing state  
20 employees or contracts.

21 (c) The total estimated cost of the work project is  
22 \$2,750,000.00.

23 (d) The tentative completion date is September 30, 2029.

24 Sec. 1964. From the funds appropriated in part 1 for hospice  
25 caregiver support center, the department shall allocate  
26 \$1,000,000.00 to a nonprofit hospice organization that is organized  
27 under the laws of this state, is exempt from federal income tax  
28 under section 501(c)(3) of the internal revenue code of 1986, 26  
29 USC 501, and provides hospice services in 50 counties, to develop

1 and operate a caregiver support center to expand the center's  
2 capacity to support and guide hospice patients and family  
3 caregivers that are receiving care through nonprofit hospice  
4 organizations.

5       Sec. 1966. From the funds appropriated in part 1 for inpatient  
6 behavioral health facility, the department shall allocate  
7 \$5,000,000.00 to a nonprofit organization that is organized under  
8 the laws of this state, is exempt from federal income tax under  
9 section 501(c)(3) of the internal revenue code of 1986, 26 USC 501,  
10 and is located in a city with a population greater than 10,000 that  
11 is located in a county with a population between 36,500 and 36,850,  
12 according to the most recent federal decennial census, for  
13 construction costs of an inpatient behavioral health and skilled  
14 nursing facility.

15       Sec. 1968. From the funds appropriated in part 1 for maternal  
16 health services, the department shall allocate \$420,000.00 in  
17 general fund/general purpose revenue to maintain sustainability at  
18 existing nurse family partnership sites in a county with a  
19 population between 250,000 and 270,000 according to the most recent  
20 federal decennial census and to include an additional outreach  
21 worker position.

22       Sec. 1970. From the funds appropriated in part 1 for medical  
23 center robotic surgery, the department shall allocate \$2,000,000.00  
24 to a medical center that was founded in 1908 and is located in a  
25 city with a population between 80,000 and 82,000 according to the  
26 most recent federal decennial census, to expand the utilization of  
27 robotic surgery for the purposes of improving patient outcomes and  
28 reducing recovery times.

29       Sec. 1972. (1) From the funds appropriated in part 1 for

1 medical debt relief pilot program, the department shall allocate  
2 \$100.00 to a national nonprofit organization organized under the  
3 laws of this state that is exempt from federal income tax under  
4 section 501(c)(3) of the internal revenue code of 1986, 26 USC 501,  
5 and established in 2014 for the purpose of purchasing bundles of  
6 medical debt on secondary markets or directly from providers to  
7 abolish the medical debt for a group or groups of patients. The  
8 department shall ensure the following conditions and criteria are  
9 met before awarding a grant under this section:

10 (a) The grant recipient will use an award under this section  
11 only to eliminate medical debt to patients with an income below the  
12 federal poverty level with a financial need or who face insolvency.

13 (b) The grant recipient will ensure that a patient described  
14 under subdivision (a) will not have adverse tax or income  
15 implications due to the elimination of the medical debt.

16 (c) The grant recipient provides evidence to the department  
17 that the grant recipient has a track record of performing the work  
18 described in this section.

19 (d) The grant recipient will work with local units of  
20 government to eliminate medical debt for residents of those local  
21 units of government. A local unit of government that provides a  
22 dollar of matching funds for every dollar appropriated under this  
23 section must be given preference.

24 (2) Not later than March 1 of the current fiscal year, the  
25 department shall provide a report, to the standard reporting  
26 recipients, that details the status on any spending on purchasing  
27 medical debt bundles and the total medical debt purchased.

28 (3) The unexpended funds appropriated in part 1 for medical  
29 debt relief pilot program are designated as a work project

1 appropriation. Unencumbered or unallotted funds must not lapse at  
2 the end of the fiscal year and must be available for expenditures  
3 under this section until the project has been completed. All of the  
4 following are in compliance with section 451a of the management and  
5 budget act, 1984 PA 431, MCL 18.1451a:

6 (a) The purpose of the work project is to purchase bundles of  
7 medical debt on secondary markets or directly from providers to  
8 abolish the medical debt for a group or groups of patients.

9 (b) The work project will be accomplished by a national  
10 nonprofit organization that is exempt from federal income tax under  
11 section 501(c)(3) of the internal revenue code of 1986, 26 USC 501.

12 (c) The estimated cost of the work project is \$100.00.

13 (d) The tentative completion date is September 30, 2029.

14 Sec. 1974. From the funds appropriated in part 1 for mental  
15 health educational interventions, the department shall allocate  
16 \$1,000,000.00 to a public benefit corporation that is located in a  
17 city with a population between 19,000 and 20,000 in a county with a  
18 population between 1,200,000 and 1,300,000, according to the most  
19 recent federal decennial census, and that provides modern mental  
20 health education by purchasing user licenses for a program that  
21 provides preventative evidence-based mental health educational  
22 interventions for adolescents and their families.

23 Sec. 1976. (1) From the funds appropriated in part 1 for narcotics  
24 awareness program, the department shall allocate \$5,000,000.00 to a  
25 nonprofit organization organized under the laws of this state that is  
26 exempt from federal income tax under section 501(c)(3) of the internal  
27 revenue code of 1986, 26 USC 501, and with a headquarters in a charter  
28 township with a population between 100,000 and 105,000 in a county with a  
29 population between 700,000 and 1,000,000, according to the most recent

1 federal decennial census. To be eligible to receive funding, the nonprofit  
2 organization must have a stated mission to offer community-based,  
3 compassionate, best-practice/evidence-based services to those suffering  
4 from addiction, as well as to their loved ones, and to erase the stigma of  
5 addiction and instill compassion and hope.

6 (2) The unexpended funds appropriated in part 1 for narcotics  
7 awareness program are designated as a work project appropriation.  
8 Unencumbered or unallotted funds shall not lapse at the end of the fiscal  
9 year and shall be available for expenditures under this section until the  
10 project has been completed. The following are in compliance with section  
11 451a of the management and budget act, 1984 PA 431, MCL 18.1451a:

12 (a) The purpose of the work project is to offer community-based,  
13 compassionate, best-practice/evidence-based services to those suffering  
14 from addiction, as well as to their loved ones, and to erase the stigma of  
15 addiction and instill compassion and hope.

16 (b) The work project will be accomplished by a nonprofit  
17 organization that is exempt from federal income tax under section  
18 501(c)(3) of the internal revenue code of 1986, 26 USC 501.

19 (c) The estimated cost of the work project is \$5,000,000.00.

20 (d) The tentative completion date is September 30, 2029.

21 Sec. 1978. (1) From the funds appropriated in part 1 for  
22 Native American health services, the department shall allocate  
23 \$1,000,000.00 for a grant to an organization that specializes in  
24 American Indian health services and that has a clientele that is  
25 comprised of a majority of Medicaid recipients to build a medical,  
26 behavioral health, and community wellness center located in a city  
27 with a population greater than 600,000 and located in a county with  
28 a population greater than 1,500,000 according to the most recent  
29 federal decennial census.

1           (2) Before receiving the grant described in subsection (1),  
2 the department shall require the grantee to provide periodic  
3 updates on the construction of the facility until it is open and  
4 operational.

5           (3) Not later than September 30 of the current fiscal year,  
6 the department shall report on the updates described in subsection  
7 (2) to the standard report recipients.

8           Sec. 1980. (1) From the funds appropriated in part 1 for nurse  
9 incentive program, the department shall allocate \$2,500,000.00 to  
10 provide loan repayment assistance to eligible nurses who work in  
11 state operated and nonstate operated facilities. The department  
12 shall provide loan repayment assistance under this section only to  
13 a nurse who agrees in writing to repay the loan repayment  
14 assistance the nurse receives if the nurse does not maintain  
15 employment in a state operated or nonstate operated facility for  
16 not less than 4 years.

17           (2) The unexpended funds appropriated in part 1 for nurse  
18 incentive program are designated as a work project appropriation,  
19 and any unencumbered or unallotted funds shall not lapse at the end  
20 of the fiscal year and shall be available for expenditures for  
21 projects under this section until the projects have been completed.  
22 The following are in compliance with section 451a of the management  
23 and budget act, 1984 PA 431, MCL 18.1451a:

24           (a) The purpose of the work project is to expand financial  
25 support provided through loan repayment assistance to eligible  
26 nurses.

27           (b) The work project will be accomplished by utilizing state  
28 employees or contracts.

29           (c) The total estimated cost of the work project is

1 \$2,500,000.00.

2 (d) The tentative completion date is September 30, 2029.

3 Sec. 1982. From the funds appropriated in part 1 for nurse  
4 workforce development, the department shall allocate \$10,000,000.00  
5 to a 4-year state university located in a county with a population  
6 greater than 1,500,000 according to the most recent federal  
7 decennial census. Funding must be used to support efforts to  
8 increase retention and reduce nurse faculty turnover. Eligible uses  
9 for funds under this section include, but are not limited to, the  
10 following:

11 (a) Providing salary increases for qualified clinicians  
12 serving as clinical educators.

13 (b) Providing tuition support for nurses wishing to pursue a  
14 graduate certificate in nursing education.

15 (c) Providing agency incentives for full semester clinical  
16 placements.

17 (d) Supporting nurse residency programming.

18 (e) Supporting research designed to develop effective methods  
19 to reduce staff turnover.

20 Sec. 1984. From the funds appropriated in part 1 for patient-  
21 centered medical home, the department shall allocate \$1,000,000.00  
22 to a nonprofit organization that is organized under the laws of  
23 this state, is exempt from federal income tax under section  
24 501(c)(3) of the internal revenue code of 1986, 26 USC 501, is  
25 located in a city with a population between 9,500 and 10,500 in a  
26 county with a population between 170,000 and 180,000, according to  
27 the most recent federal decennial census, and that provides  
28 medical, pharmaceutical, dental, obstetrical, and mental health  
29 services to economically disadvantaged individuals to build a



1 comprehensive health clinic.

2 Sec. 1986. From the funds appropriated on part 1 for pediatric  
3 lead testing pilot, the department shall allocate \$1,000,000.00 to  
4 a toxicology laboratory located in a county with a population  
5 between 260,000 and 262,000. Funds must be used to establish a  
6 pediatric oral fluid lead testing pilot.

7 Sec. 1988. From the funds appropriated in part 1 for pediatric  
8 psychiatric urgent care center, the department shall allocate  
9 \$5,000,000.00 to a nonprofit organization organized under the laws  
10 of this state that is exempt from federal income tax under section  
11 501(c)(3) of the internal revenue code of 1986, 26 USC 501, that  
12 was founded in 1910, and that offers a full continuum of behavioral  
13 health services, including psychiatric urgent care; inpatient and  
14 partial hospitalization; residential, outpatient, and teletherapy  
15 services; addiction treatment and recovery; extensive child and  
16 adolescent programs; senior care services; and specialized  
17 assessment and treatment clinics. The funds allocated under this  
18 section must be used to open a pediatric psychiatric urgent care  
19 center to provide all of the following:

- 20 (a) Psychiatric assessments.  
21 (b) Referrals into inpatient and other services.  
22 (c) Prescriptions.  
23 (d) Aftercare planning, workforce development, and telehealth  
24 technology improvements.

25 Sec. 1990. (1) From the funds appropriated in part 1 for  
26 permanent supportive housing, the department shall allocate \$100.00  
27 to expand supportive housing services. Organizations that received  
28 funding under section 1983 of article 6 of 2023 PA 166 shall be  
29 eligible to apply for and receive funding under this section. The

1 funds must prioritize people living in supportive housing who need  
2 additional services to maintain stability and currently homeless  
3 individuals moving into supportive housing.

4 (2) From the funds appropriated in this section, 9% must be  
5 allocated as grants to organizations providing permanent supportive  
6 housing for capacity building necessary to develop and sustain high  
7 quality service delivery, and to build administrative capacity to  
8 seek Medicaid reimbursement for eligible services.

9 (3) The unexpended funds appropriated in part 1 for permanent  
10 supportive housing are designated as a work project appropriation.  
11 Unencumbered or unallotted funds shall not lapse at the end of the  
12 fiscal year and shall be available for expenditures under this  
13 section until the project is completed. The following are in  
14 compliance with section 451a of the management and budget act, 1984  
15 PA 431, MCL 18.1451a:

16 (a) The purpose of the work project is to provide funding for  
17 grants for eligible entities to provide permanent supportive  
18 housing services for eligible households.

19 (b) The work project will be accomplished through partnerships  
20 with community-based agencies that provide supportive housing  
21 services, the Michigan State Housing Development Authority, and  
22 local governments.

23 (c) The total estimated cost of the work project is \$100.00.

24 (d) The tentative completion date for the work project is  
25 September 30, 2029.

26 Sec. 1992. (1) From the funds appropriated in part 1 for  
27 preweatherization services, the department shall allocate  
28 \$10,000,000.00 to support preweatherization efforts to reduce  
29 energy costs for low-income families.

1           (2) The unexpended funds appropriated in part 1 for  
2 preweatherization services are designated as a work project  
3 appropriation. Unencumbered or unallotted funds shall not lapse at  
4 the end of the fiscal year and shall be available for expenditures  
5 under this section until the project has been completed. The  
6 following are in compliance with section 451a(1) of the management  
7 and budget act, 1984 PA 431, MCL 18.1451a:

8           (a) The purpose of the work project is to reduce energy costs  
9 for low-income families, particularly for the elderly, people with  
10 disabilities, and children, while ensuring their health and safety.

11           (b) The work project will be accomplished by utilizing state  
12 employees or contracts.

13           (c) The total estimated cost of the work project is  
14 \$10,000,000.00.

15           (d) The tentative completion date is September 30, 2029.

16           Sec. 1994. From the funds appropriated on part 1 for sexual  
17 assault and domestic violence prevention services, the department  
18 shall allocate \$3,500,000.00 to supplement the loss of federal  
19 victims of crime act and state crime victim rights funding. The  
20 department must distribute these the funds consistent with the  
21 regular allocation formula for crime victim justice grants and  
22 crime victim rights services grants.

23           Sec. 1996. From the funds appropriated in part 1 for sickle  
24 cell center, the department shall allocate \$2,500,000.00 to the  
25 Sickle Cell Disease Association of America for the Sickle Cell  
26 Center of Excellence.

27           Sec. 1998. From the funds appropriated in part 1 for suicide  
28 loss survivor program, the department shall allocate \$250,000.00 to  
29 a nonprofit organization organized under the laws of this state

1 that is exempt from federal income tax under section 501(c)(3) of the  
2 internal revenue code of 1986, 26 USC, and is located in a city with a  
3 population that is greater than 600,000 that is located in a county with a  
4 population greater than 1,700,000, according to the most recent federal  
5 decennial census. Funds shall be used to support the suicide loss survivor  
6 program.

7 Sec. 2000. The funds appropriated in part 1 for state  
8 employees' retirement system implementation costs must be expended  
9 by the department to cover additional pension-related costs if the  
10 following bills of the 102nd Legislature are enacted into law:

11 (a) House Bill No. 4665.

12 (b) House Bill No. 4666.

13 (c) House Bill No. 4667.

14 Sec. 2002. From the funds appropriated in part 1 for  
15 supportive home visitation, the department shall allocate  
16 \$1,000,000.00 to a nonprofit organization organized under the laws  
17 of this state that is exempt from federal income tax under section  
18 501(c)(3) of the internal revenue code of 1986, 26 USC 501, and  
19 that is located in a county with a population between 260,000 and  
20 262,000, according to the most recent federal decennial census.  
21 Funds under this section must be used to support women and infants  
22 through a home visitation program designed to improve parenting  
23 skills.

24 Sec. 2004. From the funds appropriated in part 1 for  
25 transitional housing, the department shall allocate \$1,750,000.00  
26 to a nonprofit organization organized under the laws of this state  
27 that is exempt from federal income tax under section 501(c)(3) of  
28 the internal revenue code of 1986, 26 USC 501, and that is located  
29 in a city with a population between 109,000 and 110,000 in a county

1 with a population between 1,700,000 and 1,800,000, according to the most  
2 recent federal decennial census. Funds under this section must be used to  
3 renovate and establish transitional housing for domestic abuse survivors  
4 and their families. To be eligible for funds under this section, an  
5 organization must have current experience providing support to vulnerable  
6 and underserved communities through a teaching community model.

7       Sec. 2006. From the funds appropriated in part 1 for tribal  
8 homeless shelter operations, the department shall allocate  
9 \$750,000.00 to support a tribal homeless shelter in a county with a  
10 population between 36,500 and 36,800 according to the most recent  
11 federal decennial census. Funds under this section must be used to  
12 support shelter services provided to tribal members.

13       Sec. 2008. From the funds appropriated in part 1 for water  
14 affordability, the department shall allocate \$10,000,000.00 to  
15 support water affordability efforts. Eligible uses for funds  
16 include, but are not limited to, erasing water arrearages for  
17 eligible residents at risk of having their water shut off and  
18 subsidizing water affordability programs.

19