

**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:

DEPARTMENT OF HEALTH AND HUMAN SERVICES

APPROPRIATION SUMMARY

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



1	Average population	798.0	
2	GROSS APPROPRIATION		\$ 37,763,528,400
3	Interdepartmental grant revenues:		
4	Total interdepartmental grants and		
5	intradepartmental transfers		14,707,900
6	ADJUSTED GROSS APPROPRIATION		\$ 37,748,820,500
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	State general fund/general purpose		\$ 6,768,198,600
18	Sec. 102. DEPARTMENTAL ADMINISTRATION AND		
19	SUPPORT		
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	GROSS APPROPRIATION		\$ 250,190,200
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	State general fund/general purpose		\$ 119,643,300
24	Sec. 103. CHILD SUPPORT ENFORCEMENT		
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	GROSS APPROPRIATION		\$ 191,164,900
3	Appropriated from:		
4	Federal revenues:		
5	Capped federal revenues		16,273,100
6	Total other federal revenues		149,397,500
7	State general fund/general purpose		\$ 25,494,300
8	Sec. 104. COMMUNITY SERVICES AND OUTREACH		
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	GROSS APPROPRIATION		\$ 160,580,700
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	State general fund/general purpose		\$ 25,690,400
2	Sec. 105. CHILDREN'S SERVICES AGENCY - CHILD		
3	WELFARE		
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	GROSS APPROPRIATION		\$ 1,472,054,700
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	State general fund/general purpose	\$	758,761,100
6	Sec. 106. CHILDREN'S SERVICES AGENCY - JUVENILE		
7	JUSTICE		
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	GROSS APPROPRIATION		\$ 32,038,100
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	State general fund/general purpose	\$	16,207,400
27	Sec. 107. PUBLIC ASSISTANCE		
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	GROSS APPROPRIATION	\$	4,497,341,000
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	State general fund/general purpose	\$	103,048,600
3	Sec. 108. LOCAL OFFICE OPERATIONS AND SUPPORT		
4	SERVICES		
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	GROSS APPROPRIATION	\$	756,630,400
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	State general fund/general purpose	\$	318,531,300
10	Sec. 109. DISABILITY DETERMINATION SERVICES		
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	GROSS APPROPRIATION		\$ 126,590,400
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	State general fund/general purpose	\$	3,839,000
24	Sec. 110. BEHAVIORAL HEALTH PROGRAM		
25	ADMINISTRATION AND SPECIAL PROJECTS		
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	GROSS APPROPRIATION		\$ 319,789,300
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	State general fund/general purpose		\$ 51,759,500
21	Sec. 111. BEHAVIORAL HEALTH SERVICES		
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	GROSS APPROPRIATION		\$ 5,082,398,700
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	State general fund/general purpose		\$ 1,553,829,300
22	Sec. 112. STATE PSYCHIATRIC HOSPITALS AND		
23	FORENSIC MENTAL HEALTH SERVICES		
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	GROSS APPROPRIATION		\$ 371,763,800
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	State general fund/general purpose		\$ 285,649,400
27	Sec. 113. HEALTH AND HUMAN SERVICES POLICY AND		
28	INITIATIVES		



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	GROSS APPROPRIATION		\$ 190,749,000
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	State general fund/general purpose	\$	57,698,200
21	Sec. 114. EPIDEMIOLOGY, EMERGENCY MEDICAL		
22	SERVICES, AND LABORATORY		
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	GROSS APPROPRIATION		\$ 199,745,400
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	State general fund/general purpose		\$ 86,539,500
19	Sec. 115. LOCAL HEALTH AND ADMINISTRATIVE		
20	SERVICES		
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	GROSS APPROPRIATION		\$ 276,100,300
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	State general fund/general purpose		\$ 91,409,500
21	Sec. 116. FAMILY HEALTH SERVICES		
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	GROSS APPROPRIATION		\$ 435,691,200
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	State general fund/general purpose		\$ 55,277,800
24	Sec. 117. CHILDREN'S SPECIAL HEALTH CARE		
25	SERVICES		
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	GROSS APPROPRIATION	\$	306,371,300
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	State general fund/general purpose	\$	140,865,100
13	Sec. 118. AGING SERVICES		
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	GROSS APPROPRIATION	\$	126,245,100
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	State general fund/general purpose	\$	51,289,000



1	Sec. 119. HEALTH AND AGING SERVICES		
2	ADMINISTRATION		
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	GROSS APPROPRIATION		\$ 135,490,900
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	State general fund/general purpose		\$ 45,246,300
15	Sec. 120. HEALTH SERVICES		
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	GROSS APPROPRIATION		\$ 22,164,021,700
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	State general fund/general purpose		\$ 2,709,027,400
24	Sec. 121. INFORMATION TECHNOLOGY		
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	GROSS APPROPRIATION		\$ 536,041,400
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	State general fund/general purpose		\$ 147,137,200
19	Sec. 122. ONE-TIME APPROPRIATIONS		
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 prothesis	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	First responder and public safety staff mental	
14	health	2,500,000
15	Health equity statewide curriculum	500,000
16	Home health care authority	1,000,000
17	Homeless programs	2,750,000
18	Hospice caregiver support center	1,000,000
19	Inpatient behavioral health facility	5,000,000
20	Maternal health services	420,000
21	Medical center robotic surgery	2,000,000
22	Medical debt relief pilot program	100
23	Mental health educational interventions	1,000,000
24	Multicultural integration funding	8,600,000
25	Narcotics awareness program	5,000,000
26	Native American health services	1,000,000
27	Nurse incentive program	2,500,000
28	Nurse workforce development	10,000,000



1	Opioid response activities	9,820,000
2	Patient-centered medical home	1,000,000
3	Pediatric lead testing pilot	1,000,000
4	Pediatric psychiatric urgent care center	5,000,000
5	Permanent supportive housing	100
6	Preweatherization services	10,000,000
7	Sexual assault and domestic violence prevention	
8	services	3,500,000
9	Sickle cell center	2,500,000
10	Suicide loss survivor program	250,000
11	State employees' retirement system	
12	implementation costs	700,000
13	Supportive home visitation	1,000,000
14	Transitional housing	1,750,000
15	Tribal homeless shelter operations	750,000
16	Water affordability	10,000,000
17	GROSS APPROPRIATION	\$ 132,529,900
18	Appropriated from:	
19	Federal revenues:	
20	Total other federal revenues	1,454,900
21	Special revenue funds:	
22	Total other state restricted revenues	9,820,000
23	State general fund/general purpose	\$ 121,255,000

PART 2

PROVISIONS CONCERNING APPROPRIATIONS

FOR FISCAL YEAR 2024-2025

GENERAL SECTIONS

Sec. 201. In accordance with section 30 of article IX of the



1 state constitution of 1963, for the current fiscal year, total
 2 state spending under part 1 from state sources is
 3 \$10,705,460,100.00 and state spending under part 1 from state
 4 sources to be paid to local units of government is
 5 \$2,087,194,300.00. The following itemized statement identifies
 6 appropriations from which spending to local units of government
 7 will occur:

8	DEPARTMENT OF HEALTH AND HUMAN SERVICES	
9	CHILD SUPPORT ENFORCEMENT	
10	Child support incentive payments	\$ 9,570,000
11	Legal support contracts	1,300
12	COMMUNITY SERVICES AND OUTREACH	
13	Homeless programs	9,900
14	Housing and support services	124,700
15	CHILDREN'S SERVICES AGENCY - CHILD WELFARE	
16	Child care fund	181,742,300
17	Child care fund - indirect cost allotment	3,500,000
18	Child welfare licensing	68,300
19	Children's trust fund	60,800
20	Contractual services, supplies, and materials	10,500
21	Family preservation programs	2,000
22	Foster care payments	3,344,200
23	Prosecuting attorney contracts	1,269,100
24	Strong families/safe children	65,400
25	Youth in transition	300
26	CHILDREN'S SERVICES AGENCY - JUVENILE JUSTICE	
27	Bay Pines Center	49,700
28	Community support services	333,500



1	County juvenile officers	73,300
2	Shawono Center	2,000
3	PUBLIC ASSISTANCE	
4	Emergency services local office allocations	10,996,900
5	Indigent burial	6,000
6	Michigan energy assistance program	356,100
7	State disability assistance payments	174,200
8	LOCAL OFFICE OPERATIONS AND SUPPORT SERVICES	
9	Contractual services, supplies, and materials	91,700
10	Employment and training support services	6,200
11	DISABILITY DETERMINATION SERVICES	
12	Disability determination operations	2,000
13	BEHAVIORAL HEALTH PROGRAM ADMINISTRATION AND	
14	SPECIAL PROJECTS	
15	Behavioral health program administration	121,700
16	Community substance use disorder prevention,	
17	education, and treatment	8,783,500
18	Gambling addiction	1,333,700
19	Mental health diversion council	255,100
20	Opioid response activities	31,770,500
21	BEHAVIORAL HEALTH SERVICES	
22	Autism services	118,168,600
23	Behavioral health community supports and	
24	services	171,800
25	Certified community behavioral health clinic	
26	demonstration	122,766,700
27	Community mental health non-Medicaid services	125,578,200
28	Health homes	4,725,900



1	Healthy Michigan plan - behavioral health	53,653,100
2	Medicaid mental health services	1,096,529,500
3	Medicaid substance use disorder services	34,166,300
4	Multicultural integration funding	1,064,400
5	Nursing home PAS/ARR-OBRA	3,789,400
6	State disability assistance program substance	
7	use disorder services	2,018,000
8	STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL	
9	HEALTH SERVICES	
10	Caro Regional Mental Health Center -	
11	psychiatric hospital - adult	183,600
12	Center for forensic psychiatry	674,000
13	Kalamazoo Psychiatric Hospital - adult	66,200
14	Walter P. Reuther Psychiatric Hospital - adult,	
15	children, and adolescents	109,900
16	HEALTH AND HUMAN SERVICES POLICY AND	
17	INITIATIVES	
18	Crime victim rights services grants	11,593,000
19	Domestic violence prevention and treatment	163,000
20	Primary care services	79,800
21	EPIDEMIOLOGY, EMERGENCY MEDICAL SERVICES, AND	
22	LABORATORY	
23	Emergency medical services program	4,800
24	Epidemiology administration	448,700
25	Healthy homes program	1,301,700
26	PFAS and environmental contamination response	200
27	LOCAL HEALTH AND ADMINISTRATIVE SERVICES	
28	AIDS prevention, testing, and care programs	2,705,800



1	Cancer prevention and control program	43,600
2	Essential local public health services	71,269,300
3	Local health services	1,928,900
4	Public health administration	200
5	Sexually transmitted disease control program	775,400
6	Smoking prevention program	242,100
7	FAMILY HEALTH SERVICES	
8	Dental programs	25,000
9	Drinking water declaration of emergency	136,500
10	Family planning local agreements	224,000
11	Immunization program	2,155,600
12	Pregnancy prevention program	65,000
13	Prenatal care outreach and service delivery	
14	support	8,806,900
15	CHILDREN'S SPECIAL HEALTH CARE SERVICES	
16	Medical care and treatment	796,700
17	Outreach and advocacy	2,708,200
18	AGING SERVICES	
19	Community services	33,526,500
20	Nutrition services	12,597,200
21	Respite care program	5,800,000
22	Senior volunteer service programs	954,100
23	HEALTH AND AGING SERVICES ADMINISTRATION	
24	Aging services administration	200,200
25	HEALTH SERVICES	
26	Adult home help services	81,900
27	Ambulance services	840,600
28	Dental services	787,000



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

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

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

- 16 (a) "AIDS" means acquired immunodeficiency syndrome.
- 17 (b) "CCBHC" means certified community behavioral health
18 clinic.
- 19 (c) "CMHSP" means a community mental health services program
20 as that term is defined in section 100a of the mental health code,
21 1974 PA 258, MCL 330.1100a.
- 22 (d) "CMS" means the Centers for Medicare and Medicaid
23 Services.
- 24 (e) "CPT" means current procedural terminology.
- 25 (f) "Current fiscal year" means the fiscal year ending
26 September 30, 2025.
- 27 (g) "Department" means the department of health and human
28 services.
- 29 (h) "Director" means the director of the department.



1 (i) "EPSDT" means early and periodic screening, diagnosis, and
2 treatment.

3 (j) "Federal poverty level" means the poverty guidelines
4 revised periodically and published in the Federal Register by the
5 Secretary of the United States Department of Health and Human
6 Services under the Secretary's authority to revise the poverty line
7 under 42 USC 9902.

8 (k) "FQHC" means federally qualified health center.

9 (l) "FTE" means full-time equated.

10 (m) "GME" means graduate medical education.

11 (n) "Health plan" means, at a minimum, an organization that
12 meets the criteria for delivering the comprehensive package of
13 services under the department's comprehensive health plan.

14 (o) "HEDIS" means health care effectiveness data and
15 information set.

16 (p) "HMO" means health maintenance organization.

17 (q) "IDEA" means the individuals with disabilities education
18 act, 20 USC 1400 to 1482.

19 (r) "IDG" means interdepartmental grant.

20 (s) "MCH" means maternal and child health.

21 (t) "Medicaid" means subchapter XIX of the social security
22 act, 42 USC 1396 to 1396w-8.

23 (u) "Medicare" means subchapter XVIII of the social security
24 act, 42 USC 1395 to 1395III.

25 (v) "MiCAFE" means Michigan's coordinated access to food for
26 the elderly.

27 (w) "MiChild" means the program described in section 1670 of
28 this part.

29 (x) "MiSACWIS" means Michigan statewide automated child



1 welfare information system.

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

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

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

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

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

19 (dd) "Previous fiscal year" means the fiscal year ending
20 September 30, 2024.

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

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

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

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

29 (ii) "Standard report recipients" means the senate and house



1 of representatives appropriations subcommittees on the department
2 budget, the senate and house fiscal agencies, the senate and house
3 of representatives policy offices, and the state budget office.

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

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

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

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

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

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

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

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

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

29 (b) Preference must be given to goods or services, or both,



1 manufactured or provided by Michigan businesses, if they are
2 competitively priced and of comparable quality.

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

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

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

27 (a) The dates of each travel occurrence.

28 (b) The total transportation and related expenses of each
29 travel occurrence and the proportions funded with state general



1 fund/general purpose revenues, state restricted revenues, federal
2 revenues, and other revenues.

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

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

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

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



1 393(2) of the management and budget act, 1984 PA 431, MCL 18.1393.

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

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

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

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

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

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

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

25 (e) Job specifications and wage rates.

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



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

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

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

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

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

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

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



1 the previous fiscal year. The report must itemize, rather than
2 aggregate, specific revenue sources deposited into the generic
3 statewide integrated governmental management application (SIGMA)
4 fund numbers 1200, 1274, 4000, and 5000.

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

8 (a) Immunizations.

9 (b) Communicable disease control.

10 (c) Sexually transmitted infection control.

11 (d) Tuberculosis control.

12 (e) Prevention of gonorrhea eye infection in newborns.

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

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

20 (h) Prenatal care.

21 (i) Mental health.

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

29 (2) On a semiannual basis, the department shall submit, to the



1 standard report recipients, a report that includes all of the
2 following:

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

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

7 (c) The expected project duration.

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

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

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

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

28 Sec. 222. (1) The department shall submit a report to the
29 standard report recipients of a major policy change at least 30



1 days before the implementation date of the policy change.

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

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

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

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

26 Sec. 224. The department may retain all of this state's share
27 of food assistance overissuance collections as an offset to general
28 fund/general purpose costs. Retained collections must be applied
29 against federal funds deductions in all appropriation units where



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

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

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

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

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

21 (i) The project's name.

22 (ii) The appropriation line item and amount.

23 (iii) The project's target population.

24 (iv) A description of the project.

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

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



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

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

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

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

28 (b) Ensure, to the greatest extent possible, that the full
29 amount of funds appropriated for a direct care worker wage, except



1 for costs incurred by the employer, including payroll taxes, is
2 provided to direct care workers through maintained increased wages.

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

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

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

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

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

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

24 Sec. 232. The department shall provide the approved spending
25 plan for each line item receiving an appropriation in the current
26 fiscal year to the senate and house of representatives
27 appropriations subcommittees on the department budget and the
28 senate and house fiscal agencies not later than 60 days after
29 approval by the department or not later than January 15 of the



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

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



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

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

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

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

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

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

26 Sec. 242. Not later than March 1 of the current fiscal year,
27 the department shall submit a description of programs report to the
28 standard report recipients. For each program, the report must
29 include the appropriation unit; the line item name and number; the



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

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

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

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

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



1 change or is outside of the ordinary course of a waiver, state plan
2 amendment, or similar proposal.

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

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

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

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

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

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

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



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

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

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

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



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

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

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

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

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



1 department employees in the defense of the employees in any state
2 or federal lawsuit or investigation related to the water system in
3 a city or community in which a declaration of emergency was issued
4 because of drinking water contamination.

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

14

15 **CHILD SUPPORT ENFORCEMENT**

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

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

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

25 (4) If the child support incentive payment to this state from
26 the federal government is greater than \$26,500,000.00, then 100% of
27 the amount in excess must be retained by this state and is
28 appropriated until the total retained by this state reaches
29 \$15,397,400.00.



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

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

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

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

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

29 (2) Not later than 30 days after an adjustment under



1 subsection (1), the department shall notify the standard report
2 recipients of the adjustment.

3

4 **COMMUNITY SERVICES AND OUTREACH**

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

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

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

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

19 (d) Increasing parent involvement.

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

27 Sec. 453. (1) From the funds appropriated in part 1 for
28 homeless programs, the department shall allocate funds to the
29 emergency shelter program to support efforts of shelter providers



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

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

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

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



1 homeless shelters or human service agencies received in fiscal year
2 2000. The use of TANF revenue under this section is not an ongoing
3 commitment of funding.

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

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

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

29 Sec. 463. From the funds appropriated in part 1 for runaway



1 and homeless youth grants and domestic violence prevention and
2 treatment, the department is authorized to make allocations of TANF
3 revenue only to agencies that report necessary data to the
4 department to meet TANF eligibility reporting requirements.

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

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

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

26 (2) Funds distributed under subsection (1) must be distributed
27 to Michigan 2-1-1, a nonprofit corporation organized under the laws
28 of this state that is exempt from federal income tax under section
29 501(c) (3) of the internal revenue code of 1986, 26 USC 501, and



1 whose mission is to coordinate and support a statewide 2-1-1
2 system. Michigan 2-1-1 shall use the funds only to fulfill the
3 Michigan 2-1-1 business plan adopted by Michigan 2-1-1 in January
4 2005.

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

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

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

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

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

29 (c) \$1,068,400.00 across 19 providers statewide to support



1 upgrading technology and facilities to maintain safety in
2 environments where youth are sheltered.

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

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

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

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

14

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

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

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

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

26 (b) The number of children currently in foster care that
27 qualify for specialty behavioral health supports and services
28 through the CMHSPs and the percentage of those children that remain
29 in foster care for longer than 24 months.



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

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

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

29 Sec. 504. (1) From the funds appropriated in part 1, the



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

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

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

28 (b) Changes in case volumes and any statewide rate increases
29 that are implemented.



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

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

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

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

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

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

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



1 include, but not be limited to, all of the following:

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

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

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

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

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

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

23 (2) For the funds described in subsection (1), the department
24 shall ensure that administrative delays are avoided and local grant
25 recipients and direct service providers receive money in an
26 expeditious manner. The department and the state board as that term
27 is defined in section 2 of the child abuse and neglect prevention
28 act, 1982 PA 250, MCL 722.601, shall make the children's trust fund
29 contract funds available to grantees not later than 31 days after



1 the start date of the funded project.

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

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

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

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

29 (a) Agree to rates that are less than the rates established



1 under this section for each service type.

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

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

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

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

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

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

28 Sec. 512. (1) The department shall complete an examination of
29 the effectiveness of the performance-based contracting model



1 detailed in section 504(1) of article 6 of 2023 PA 119 to determine
2 whether the contract should be continued.

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

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

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

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

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

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

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

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

28 (2) The department shall not expend money for a child placed
29 in an out-of-state facility without approval of the executive



1 director of the children's services agency.

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

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

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

22 Sec. 516. (1) From funds appropriated in part 1 for child care
23 fund, the administrative or indirect cost payment equal to 10% of a
24 county's total monthly gross expenditures must be distributed to
25 the county on a monthly basis, and a county is not required to
26 submit documentation to the department for any of the expenditures
27 that are covered under the 10% payment as described in section
28 117a(4) (b) (ii) and (iv) of the social welfare act, 1939 PA 280, MCL
29 400.117a.



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

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

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

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

26 Sec. 520. Not later than February 15 of the current fiscal
27 year, the department shall submit, to the standard report
28 recipients, a report on the number of days of care and expenditures
29 by funding source for the previous fiscal year for out-of-home



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

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

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

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

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



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

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

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

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

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



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

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

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

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

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

29 Sec. 533. Not later than 30 days after receiving all necessary



1 documentation from a child placing facility, the department shall
2 make payments to the child placing facility for in-home and out-of-
3 home care services and adoption services. It is the intent of the
4 legislature that the department has the burden of ensuring that the
5 payments are made in a timely manner and are not in arrears.

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

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

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

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

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

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



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

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

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

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

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



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

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

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

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

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

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

29 Sec. 551. Not later than 30 days after a county requests a



1 clarification through the department's child care fund management
2 unit email address, the department shall respond to the request.

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

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

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



1 use of the vehicle if the driving would be helpful to the
2 caseworker in conducting the caseworker's work.

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

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

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

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



1 educational outcomes for the following youth who have a diagnosed
2 disability or suspected disability:

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

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

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

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

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

- 29 (a) The success rates for parent-child visitations and court-



1 ordered required meetings under subsections (1) and (2) for the
2 previous fiscal year.

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

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

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

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

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



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

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

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

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

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

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

27 (d) Establishing, maintaining, and updating a list of local
28 support groups and programs that provide services to kinship
29 families and, in order to obtain a better understanding of the



1 issues facing kinship families, devising a plan of action for
2 engaging with the groups and programs on the list.

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

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

8 (ii) To improve service delivery.

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

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

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



1 the programs.

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

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

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

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

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

28 Sec. 585. Each month, the department shall make available at
29 least 1 pre-service training class in which new caseworkers for



1 private foster care and adoption agencies can enroll.

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

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

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

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

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

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

28 (b) The percent of central registry reviews performed for
29 required individuals.



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

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

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

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

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

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

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

29 Sec. 598. Partial child care fund reimbursements to counties



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

12

13 **PUBLIC ASSISTANCE**

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

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

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



1 not later than 15 work days before the first day of the month in
2 which the decrease takes effect.

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

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

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

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

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

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

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

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

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



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

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

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

9 (4) As used in this section:

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

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

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

27 Sec. 606. County department offices shall require each
28 recipient of family independence program and state disability
29 assistance who has applied with the Social Security Administration



1 for SSI to sign a contract to repay any assistance rendered through
2 the family independence program or state disability assistance
3 program on receipt of retroactive SSI benefits.

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

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

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

27 Sec. 609. The department shall not reduce the state
28 supplementation level under the SSI program for the personal
29 care/adult foster care and home for the aged categories during the



1 current fiscal year. Not later than 30 days before a proposed
2 reduction in the state supplementation level, the department shall
3 notify the legislature of the proposed reduction.

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

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

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

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

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

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

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

28 (a) The maximum allowable reimbursement for the final
29 disposition is \$941.00.



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

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

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

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

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

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

16 (b) Burial with memorial service.

17 (c) Burial without memorial service.

18 (d) Cremation with memorial service.

19 (e) Cremation without memorial service.

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

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

23 (h) Disposition of an unclaimed body.

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

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

26 Sec. 614. By January 15 of the current fiscal year, the
27 department shall submit a report to the standard report recipients
28 on the number and percentage of state disability assistance
29 recipients who were determined to be eligible for federal SSI



1 benefits in the previous fiscal year.

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

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

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

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

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

23 Sec. 620. (1) The department shall determine a Medicaid
24 applicant's Medicaid eligibility not later than 90 days after the
25 Medicaid applicant completes a Medicaid application if the Medicaid
26 applicant's disability is an eligibility factor. For other Medicaid
27 applicants, including an applicant who is a patient of a nursing
28 home, the department shall determine the applicant's Medicaid
29 eligibility within 45 days after receiving the Medicaid applicant's



1 application.

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

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

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



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

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

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

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

26 Sec. 672. (1) By February 15 of the current fiscal year, the
27 department's office of inspector general shall submit a report to
28 the standard report recipients on the department's efforts to
29 reduce the inappropriate use of Michigan bridge cards and food



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

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

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

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



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

4 (3) As used in this section:

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

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

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

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

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

29 (a) The number and percentage of nonexempt family independence



1 program recipients who are employed.

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

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

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

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

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

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

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

29 Sec. 687. (1) On a quarterly basis, the department shall



1 compile and make available a report on its website that contains
2 all of the following information about the family independence
3 program, state disability assistance, the food assistance program,
4 indigent burial, Medicaid, and state emergency relief:

5 (a) The number of applications received.

6 (b) The number of applications approved.

7 (c) The number of applications denied.

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

10 (e) The number of cases opened.

11 (f) The number of cases closed.

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

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

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

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

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

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

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

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

29 Sec. 688. From the funds appropriated in part 1 for the low-



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

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

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

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

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

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

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

28 (2) The department shall work with the department of
29 agriculture and rural development to do all of the following:



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

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

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

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

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

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

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

27

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

29 Sec. 701. Unless required by a change to federal law or the



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

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

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

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



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

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

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

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



1 foster care facility has regularly scheduled treatment sessions
2 with a licensed psychologist or a psychiatrist, or both, and access
3 to the licensed psychologist or a psychiatrist as needed.

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

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

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

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

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



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

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

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

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

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

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

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

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



1 pathways to potential staff.

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

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

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

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

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



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

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

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

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

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

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

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

28 Sec. 851. (1) From the funds appropriated in part 1 for adult
29 services local office staff, the department shall seek to reduce



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

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

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

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

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

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

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

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

26

27 **DISABILITY DETERMINATION SERVICES**

28 Sec. 890. From the funds appropriated in part 1 for disability
 29 determination services, the department shall maintain the unit



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

4
 5 **BEHAVIORAL HEALTH SERVICES ADMINISTRATION AND SPECIAL PROJECTS**

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

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

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

28 (a) The department enters into a new contract with a CMHSP or
 29 PIHP that would affect a rate or expenditure.



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

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

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

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

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

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

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



1 groups.

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

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

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

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

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

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

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

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

27 (3) The report required under subsection (1) must contain the
28 following information from the previous fiscal year on substance
29 use disorder prevention, education, and treatment programs:



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

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

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

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

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

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

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

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



1 providing services in an administratively efficient manner.

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

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

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

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

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



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

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

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

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

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

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

27 (2) The department shall require a report from a contractor
28 receiving funds under this section. A contractor shall submit the
29 report to the department not later than 60 days after the end of



1 the contract period. The report must include specific information
2 on services and programs provided by the contractor, the client
3 base to which the services and programs were provided by the
4 contractor, and the contractor's expenditures for the services. The
5 department shall submit the reports to the standard report
6 recipients.

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

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

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



1 services, and uses fundraising to support their clinic.

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

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

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

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

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

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

25 (e) \$3,620,000.00, allocated on a 1-time basis, to a nonprofit
26 organization that is 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 greater than 10,000 that is located in a county



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

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

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

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

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

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

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

27 Sec. 918. On a quarterly basis, providing monthly data, the
28 department shall submit a report to the standard report recipients
29 on the amount of funding paid to PIHPs to support the Medicaid



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

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

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

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

28 (b) \$600,000.00 to administer an online and interactive
29 version of the protected health information consent tool and make



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

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

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

28 (2) The substance use and case management provider receiving
29 funds under this section shall collect and submit to the department



1 data on the outcomes of the project throughout the duration of the
2 project and the department shall submit a report on the project's
3 outcomes to the standard report recipients.

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

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

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

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

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

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

27 Sec. 935. A county required under the mental health code, 1974
28 PA 258, MCL 330.1001 to 330.2106, to provide matching funds to a
29 CMHSP for mental health services rendered to residents in the



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

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

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

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

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

28 Sec. 942. A CMHSP shall provide at least 30 days' notice
29 before reducing, terminating, or suspending a service provided by



1 the CMHSP to a CMHSP client, unless the service is authorized by a
2 physician and the service no longer meets established criteria for
3 medical necessity.

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

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

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

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

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

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

29 (e) Coordinate with the department of insurance and financial



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

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

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

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

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

25 Sec. 972. From the funds appropriated in part 1 for behavioral
26 health program administration, the department shall allocate not
27 less than \$11,286,400.00 of general fund/general purpose revenue
28 and any associated federal match or federal grant funding,
29 including, but not limited to, associated federal 988 grant funding



1 for the mental health telephone access line known as the Michigan
2 crisis and access line (MiCAL), to provide for both of the
3 following in accordance with section 165 of the mental health code,
4 1974 PA 258, MCL 330.1165:

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

7 (b) Statewide secondary coverage.

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

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

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

29 (2) Not later than March 1 of the current fiscal year, the



1 department shall submit a report to the standard report recipients
 2 on the planned allocation of the funds appropriated for the mental
 3 health diversion council.

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

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

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

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

18

19 **BEHAVIORAL HEALTH SERVICES**

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

28 Sec. 1002. (1) The department shall expand the certified
 29 community behavioral health clinic demonstration to include



1 organizations that meet both of the following criteria:

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

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

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

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

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

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

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

24 (d) Total number of CCBHC daily visits.

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

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

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

29 Sec. 1003. The department shall notify the Community Mental



1 Health Association of Michigan when developing a policy or
2 procedure that will impact a PIHP or CMHSP.

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

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

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

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

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



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

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

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

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

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

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



1 efforts related to overseeing community-based programs placement.

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

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

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

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

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

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

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

28 (a) Each contractor or subcontractor shall have accreditations
 29 that attest to their competency and effectiveness as behavioral



1 health and social service agencies.

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

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

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

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

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

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

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



1

STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL HEALTH SERVICES

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

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

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

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



1 individual's housing needs.

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

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

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

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

28 Sec. 1059. (1) The department shall identify specific outcomes
29 and performance measures for state-operated hospitals and centers,



1 including, but not limited to, the following:

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

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

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

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

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

27 (f) The average wait time for a child who is awaiting
28 admission into another state-operated hospital or center through
29 the civil admissions process. The average described in this



1 subdivision must be calculated based on the most recent 12 months.

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

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

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

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

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

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

29 (m) The number of individuals determined not guilty by reason



1 of insanity by an order of the probate court that were removed from
 2 the admissions waiting list and the reason for the removal from the
 3 admissions waiting list.

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

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

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

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

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

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

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

29 (a) The number of direct care and clinical staff positions



1 that are currently vacant by hospital, and how that number compares
2 to the number of vacancies during the previous fiscal year.

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

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

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

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

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

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

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

29 (e) The recommended number of public-private partnership civil



1 admission adult beds versus the current number of available beds
2 for this purpose.

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

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

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

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

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

22

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

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



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

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

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

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

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

29 Sec. 1145. The department shall take steps necessary to work



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

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

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

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

29 (a) A uniform statewide system to track the submission and



1 status of sexual assault evidence kits.

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

5 (c) Secure electronic access for victims.

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

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

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

28 Sec. 1158. From the funds appropriated in part 1 for crime
29 victim rights sustaining grants, the department shall allocate



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

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

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

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

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

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



- 1 (a) The list of communities served.
- 2 (b) The types of health services offered by grant recipients.
- 3 (c) A spending report from the grant recipients.
- 4

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

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

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

29 Sec. 1182. Not later than April 1 of the current fiscal year,



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

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

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

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

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

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



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

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

13 **LOCAL HEALTH AND ADMINISTRATIVE SERVICES**

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

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



1 department.

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

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

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

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

28 (5) From the funds appropriated in part 1 for essential local
29 public health services, each local public health department is



1 allocated not less than the amount allocated to that local public
2 health department during the previous fiscal year.

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

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

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



1 subsection (1). The report must include recipient entities, the
2 amount of allocation, the general category of allocation, and
3 detailed uses.

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

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

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

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

- 25 (a) Developing a list of rare diseases.
26 (b) Posting the list of rare diseases on the department's
27 website.
28 (c) Updating the list of rare diseases.
29 (d) Investigating and reporting to the legislature on 1 rare



1 disease on the list, and including legislative recommendations in
 2 the report to the legislature.

3
 4 **FAMILY HEALTH SERVICES**

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

12 (a) The funding allocations.

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

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

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

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

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

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

28 Sec. 1306. (1) From the funds appropriated in part 1 for the
 29 drinking water declaration of emergency, the department shall



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

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

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

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

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

16 (e) Department local office operations costs.

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

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

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

23 (i) Transportation related to health care delivery.

24 (j) Senior initiatives.

25 (k) Lead abatement contractor workforce development.

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

28 (2) From the funds appropriated in part 1 for the drinking
29 water declaration of emergency, the department shall allocate



1 \$300,000.00 for Revive Community Health Center for health support
2 services as the center pursues certification as a federally
3 qualified health center.

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

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

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

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



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

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

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

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

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

- 26 (a) The appropriation line item.
27 (b) The agency or recipient entity of the funds.
28 (c) The amount and purpose of the allocation of the funds.
29 (d) Detailed uses of the funds.



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

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

13 (a) Supporting access to care.

14 (b) Reducing and eliminating barriers to care.

15 (c) Supporting recommendations for best practices.

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

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

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

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

28 Sec. 1316. The department shall use revenue from permit fees
29 for mobile dental facilities that the department receives under



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

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

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

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



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

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

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

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

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

25 (b) Any available work project funds.

26 (c) Any available federal match through a contract
27 administered by the department with oversight from the behavioral
28 and physical health and aging services administration and the
29 public health administration.



1

CHILDREN'S SPECIAL HEALTH CARE SERVICES

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

5 (a) Provide special formulas for eligible individuals with
6 specified metabolic and allergic disorders.

7 (b) Provide medical care and treatment to eligible individuals
8 with cystic fibrosis who are 26 years of age or older.

9 (c) Provide medical care and treatment to eligible individuals
10 with hereditary coagulation defects, commonly known as hemophilia,
11 who are 26 years of age or older.

12 (d) Provide human growth hormone to eligible individuals.

13 (e) Provide mental health care to eligible individuals for
14 mental health needs that result from, or are a symptom of, the
15 individual's qualifying medical condition.

16 (f) Provide medical care and treatment to eligible individuals
17 with sickle cell disease who are 26 years of age or older.

18 Sec. 1361. From the funds appropriated in part 1 for medical
19 care and treatment, the department may spend the funds to continue
20 developing and expanding telemedicine capacity to allow families
21 with children in the children's special health care services
22 program to access specialty providers more readily and in a more
23 timely manner. The department may spend funds to support chronic
24 complex care management of children enrolled in the children's
25 special health care services program to minimize hospitalizations
26 and reduce costs to the program while improving outcomes and
27 quality of life. As used in this section, "children's special
28 health care services program" or "program" means the program
29 established under section 5815 of the public health code, 1978 PA



1 368, MCL 333.5815.

2

3 **AGING SERVICES**

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

8 Sec. 1404. From the funds appropriated in part 1 for community
9 services, the department shall allocate \$658,000.00 to area
10 agencies on aging for home and community-based services.

11 Sec. 1417. Not later than March 31 of the current fiscal year,
12 the department shall submit to the standard report recipients a
13 report that contains all of the following information:

14 (a) The total allocation of state resources made to each area
15 agency on aging by individual program and administration.

16 (b) Detailed expenditures by each area agency on aging by
17 individual program and administration, including both state-funded
18 resources and locally funded resources.

19 Sec. 1421. From the funds appropriated in part 1 for community
20 services, \$1,100,000.00 is allocated for locally determined needs
21 that are provided by area agencies on aging.

22

23 **HEALTH AND AGING SERVICES ADMINISTRATION**

24 Sec. 1505. Not later than March 1 of the current fiscal year,
25 the department shall submit a report to the standard report
26 recipients on the actual reimbursement savings and cost offsets
27 that have resulted from the funds appropriated in part 1 for the
28 office of inspector general and third-party liability efforts in
29 the previous fiscal year.



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

10 Sec. 1510. (1) From the funds appropriated in part 1 for
11 health services administration, the department shall allocate
12 \$1,650,000.00 to partner with a health centers careers training
13 program to provide additional recruitment and training
14 opportunities for individuals employed in FQHCs operating in this
15 state.

16 (2) The partnering health centers careers training program
17 must do all of the following:

18 (a) Provide recruiting and training opportunities for
19 professions including, but not limited to, medical and dental
20 assistants, community health workers, doulas, medical billing and
21 coding professionals, pharmacy technicians, and opticians.

22 (b) Provide paid clinical or internship experience
23 opportunities for behavioral health students.

24 (c) Provide on-the-job training and apprenticeship
25 opportunities.

26 (d) Support opportunities to grow workforce and career
27 opportunities for low-income and underserved communities.

28 Sec. 1518. The department shall coordinate with the department
29 of licensing and regulatory affairs to ensure that, on the issuance



1 of an order suspending the license of an adult foster care
2 facility, home for the aged, or nursing home, the department of
3 licensing and regulatory affairs provides a notice to the
4 department, to the house and senate appropriations subcommittees on
5 the department budget, and to the members of the house of
6 representatives and senate that represent the legislative districts
7 of the county in which the adult foster care facility, home for the
8 aged, or nursing home is located.

9

10 **HEALTH SERVICES**

11 Sec. 1601. The department shall use the cost of remedial
12 services incurred by residents of licensed adult foster care
13 facilities and licensed homes for the aged to determine financial
14 eligibility for the medically needy. As used in this section,
15 "remedial services" includes, but is not limited to, basic self-
16 care and rehabilitation training for a resident.

17 Sec. 1602. (1) From the funds appropriated in part 1, the
18 department shall seek federal authority to implement a transitional
19 Medicaid benefit for incarcerated individuals to provide for not
20 more than 90 days of health care before release.

21 (2) On a semiannual basis, the department shall report to the
22 standard report recipients all of the following information:

23 (a) The status of receiving federal authority to implement
24 this section and estimated start date.

25 (b) The number of incarcerated individuals receiving
26 transitional Medicaid services in the current fiscal year, by
27 facility.

28 (c) The cost per case, for each individual, by facility.

29 Sec. 1605. The protected income level for Medicaid coverage



1 determined under section 106(1) (b) (iii) of the social welfare act,
2 1939 PA 280, MCL 400.106, is 100% of the related public assistance
3 standard.

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

8 Sec. 1607. (1) The department shall immediately presume that
9 an applicant for Medicaid whose qualifying condition is pregnancy
10 is eligible for Medicaid coverage, unless the preponderance of
11 evidence in the applicant's application indicates otherwise. The
12 applicant who is qualified as described in this subsection is
13 allowed to select or remain with the Medicaid participating
14 obstetrician of the applicant's choice.

15 (2) Each qualifying applicant is entitled to receive all
16 medically necessary obstetrical and prenatal care without
17 preauthorization from a health plan. All claims submitted for
18 payment for obstetrical and prenatal care must be paid at the
19 Medicaid fee-for-service rate if a contract does not exist between
20 the Medicaid participating obstetrical or prenatal care provider
21 and the managed care plan. The applicant must receive a listing of
22 Medicaid physicians and managed care plans in the immediate
23 vicinity of the applicant's residence.

24 (3) If an applicant, presumed to be eligible for Medicaid
25 under subsection (1), is subsequently found to be ineligible, a
26 Medicaid physician or managed care plan that has been providing
27 pregnancy services to the applicant is entitled to reimbursement
28 for the services until the Medicaid physician or managed care plan
29 is notified by the department that the applicant was found to be



1 ineligible for Medicaid.

2 (4) If the preponderance of evidence in an application under
3 subsection (1) indicates that the applicant is not eligible for
4 Medicaid, the department shall refer the applicant to the nearest
5 public health clinic or similar entity as a potential source for
6 receiving pregnancy-related services.

7 (5) The department shall develop an enrollment process for
8 applicants covered under this section that facilitates the
9 selection of a managed care plan at the time of application.

10 (6) The department shall require that Medicaid managed care
11 plans enroll women whose qualifying condition for Medicaid is
12 pregnancy.

13 (7) The department shall encourage physicians to provide an
14 applicant whose qualifying condition for Medicaid is pregnancy with
15 a referral to a Medicaid participating dentist at the applicant's
16 first pregnancy-related appointment.

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

28 (2) Notwithstanding subsection (1), if a hospital service is
29 provided to a dual Medicare/Medicaid recipient with only Medicare



1 part B coverage, the Medicaid reimbursement must equal, when
 2 combined with a payment for Medicare or other third-party source of
 3 payment, the amount established for a Medicaid-only patient,
 4 including a capital payment.

5 Sec. 1620. (1) If a Medicaid claim is a fee-for-service
 6 Medicaid claim, the professional dispensing fee for a drug that is
 7 listed as a medication on the Michigan pharmaceutical products list
 8 is \$20.02 or the pharmacy's submitted dispensing fee, whichever is
 9 less.

10 (2) If a Medicaid claim is a fee-for-service Medicaid claim, a
 11 drug that is not listed as a specialty medication on the Michigan
 12 pharmaceutical products list is as follows:

13 (a) If the drug is indicated as preferred on the department's
 14 preferred drug list, \$10.80 or the pharmacy's submitted dispensing
 15 fee, whichever is less.

16 (b) If the drug is not on the department's preferred drug
 17 list, \$10.64 or the pharmacy's submitted dispensing fee, whichever
 18 is less.

19 (c) If the drug is indicated as nonpreferred on the
 20 department's preferred drug list, \$9.00 or the pharmacy's submitted
 21 dispensing fee, whichever is less.

22 Sec. 1626. (1) Not later than January 15 of the current fiscal
 23 year, each pharmacy benefit manager that receives reimbursements,
 24 either directly or through a Medicaid health plan, from the funds
 25 appropriated in part 1 for medical services must submit all of the
 26 following information to the department for the previous fiscal
 27 year:

28 (a) The total number of prescriptions that were dispensed.

29 (b) The aggregate fiscal year paid pharmacy claims repriced



1 using the wholesale acquisition cost for each drug on its
2 formulary.

3 (c) The aggregate amount of rebates, discounts, and price
4 concessions that the pharmacy benefit manager received for each
5 drug on its formulary. The aggregate amount of rebates must include
6 any utilization discounts the pharmacy benefit manager received
7 from a manufacturer.

8 (d) The aggregate amount of administrative fees that the
9 pharmacy benefit manager received from all pharmaceutical
10 manufacturers.

11 (e) The aggregate amount identified in subdivisions (b) and
12 (c) that were retained by the pharmacy benefit manager and did not
13 pass through to the department or to the Medicaid health plan.

14 (f) The aggregate amount of reimbursements the pharmacy
15 benefit manager paid to contracting pharmacies.

16 (g) Any other information considered necessary by the
17 department.

18 (2) Not later than March 1 of the current fiscal year, the
19 department shall submit a report including the information provided
20 under subsection (1) to the standard report recipients.

21 (3) Any nonaggregated information submitted under this section
22 is confidential and must not be disclosed to any person by the
23 department. The information described in this subsection is not a
24 public record of the department.

25 Sec. 1628. From the funds appropriated in part 1 for hospital
26 services and therapy and Healthy Michigan plan, the department
27 shall continue to allocate \$3,000,000.00 in general fund/general
28 purpose revenue and any associated federal match to maintain the
29 Medicaid reimbursement rate for dental services provided at



1 ambulatory surgical centers and outpatient hospitals. The funding
 2 provided in this section must be used to maintain the minimum rate
 3 of reimbursement for dental services provided in ambulatory
 4 surgical centers at \$1,495.00 and maintain the minimum rate of
 5 reimbursement for dental services provided in outpatient hospitals
 6 at \$2,300.00.

7 Sec. 1629. The department shall utilize maximum allowable cost
 8 pricing for generic drugs that is based on wholesaler pricing to
 9 providers. The wholesaler pricing must be based on the price
 10 available from at least 2 wholesalers who deliver drugs in this
 11 state.

12 Sec. 1630. Not later than April 1 of the current fiscal year,
 13 from the funds appropriated in part 1 for dental services, the
 14 department shall submit a report to the standard report recipients
 15 on the dental service benefit. The report must cover all of the
 16 following areas:

17 (a) Information on the implementation of the Adult Medicaid
 18 dental benefit redesign including all of the following information:

19 (i) The number of dental providers, by Medicaid health plan in
 20 this state, who provided 1 or more Medicaid dental services in the
 21 fiscal year ending September 30, 2022, and the number of additional
 22 providers who were added in the previous fiscal year, with a
 23 delineation in the reported numbers based on the average payment
 24 per visit and before and after the implementation of the Adult
 25 Medicaid dental benefit redesign.

26 (ii) The status of enhanced care coordination.

27 (iii) The array of covered dental benefits and services before
 28 the Adult Medicaid dental benefit redesign and how the available
 29 benefits and services changed or expanded after the Adult Medicaid



1 dental benefit redesign.

2 (b) Information on the Healthy Kids Dental program including
3 all of the following information:

4 (i) The number of children enrolled in the Healthy Kids Dental
5 program who visited the dentist in the previous fiscal year broken
6 down by dental benefit manager.

7 (ii) The number of dentists who accept payment from the Healthy
8 Kids Dental program broken down by dental benefit manager.

9 (iii) The annual change in dental utilization of children
10 enrolled in the Healthy Kids Dental program broken down by dental
11 benefit manager.

12 (iv) Service expenditures for the Healthy Kids Dental program
13 broken down by dental benefit manager.

14 (v) Administrative expenditures for the Healthy Kids Dental
15 program broken down by dental benefit manager.

16 Sec. 1631. (1) The department shall require copayments on
17 dental, podiatric, and vision services provided to Medicaid
18 recipients, except as prohibited by federal law or a law of this
19 state.

20 (2) Except as otherwise prohibited by federal law or a law of
21 this state, the department shall require Medicaid recipients to pay
22 the following copayments:

23 (a) Two dollars for a physician office visit.

24 (b) Three dollars for a hospital emergency room visit.

25 (c) Fifty dollars for the first day of an inpatient hospital
26 stay.

27 (d) Two dollars for an outpatient hospital visit.

28 (e) One dollar for a generic drug or any drug indicated as
29 preferred on the department's preferred drug list and \$3.00 for a



1 brand-name drug not indicated as preferred on the department's
2 preferred drug list.

3 Sec. 1641. An institutional provider that is required to
4 submit a cost report under the Medicaid program shall submit cost
5 reports completed in full not more than 5 months after the end of
6 the institutional provider's fiscal year.

7 Sec. 1644. (1) From the funds appropriated in part 1, the
8 department shall maintain wage subsidy payments to direct care
9 workers and eligible non-clinical staff employed by skilled nursing
10 facilities at the amount in effect on October 1, 2023. This funding
11 must include all costs incurred by the employer, including, but not
12 limited to, payroll taxes, due to the wage increase. As used in
13 this subsection, "direct care workers" means a registered
14 professional nurse, licensed practical nurse, competency-evaluated
15 nursing assistant, and respiratory therapist.

16 (2) From the funds appropriated in part 1, the department
17 shall maintain wage subsidy payments at the amount in effect on
18 October 1, 2023 to direct care workers who are employed by licensed
19 adult foster care facilities and licensed homes for the aged and
20 who provide Medicaid-funded fee-for-service personal care services
21 that were not eligible for any direct care worker pay adjustment
22 under Medicaid-funded managed care. This funding must include all
23 costs incurred by the employer, including, but not limited to,
24 payroll taxes, due to the wage increase.

25 Sec. 1645. (1) From the funds appropriated in part 1, the
26 department shall increase wages by \$0.85 per hour to eligible non-
27 clinical staff employed by skilled nursing facilities from the
28 previous fiscal year. This funding must include all costs incurred
29 by the employer, including payroll taxes, due to the wage increase.



1 (2) The non-clinical staff eligible for the wage increase
2 under subsection (1) are individuals whose costs are reported in
3 the following job classifications in nursing facility institutional
4 cost reports shared with the department:

- 5 (a) Other housekeeping.
6 (b) Other maintenance worker.
7 (c) Other plant operations.
8 (d) Other laundry.
9 (e) Dining room assistants.
10 (f) Other dietary workers.
11 (g) Other medical records.
12 (h) Other social services.
13 (i) Other diversion therapy.
14 (j) Beauty and barber.
15 (k) Gift, flower, coffee, and canteen worker.

16 Sec. 1646. From the funds appropriated in part 1, the
17 department shall increase Medicaid reimbursement rates for
18 orthopedic providers to not less than 74% of Medicare reimbursement
19 rates for similar equipment and services.

20 Sec. 1657. (1) The department shall not make reimbursement for
21 Medicaid to screen and stabilize a Medicaid recipient, including
22 stabilization of a psychiatric crisis, in a hospital emergency
23 room, contingent on obtaining prior authorization from the
24 recipient's HMO. If the recipient is discharged from the emergency
25 room, the hospital shall notify the recipient's HMO within 24 hours
26 of the diagnosis and treatment received.

27 (2) If the treating hospital determines that the recipient
28 will require further medical service or hospitalization beyond the
29 point of stabilization, that hospital shall receive authorization



1 from the recipient's HMO prior to admitting the recipient.

2 (3) Subsections (1) and (2) do not require an alteration to an
3 existing agreement between an HMO and its contracting hospitals and
4 do not require an HMO to reimburse for services that are not
5 considered to be medically necessary.

6 Sec. 1662. (1) From the funds appropriated in part 1, the
7 department shall require an annual external quality review of each
8 contracting HMO. The external quality review must analyze and
9 evaluate aggregated information on quality, timeliness, and access
10 to health care services that the HMO or its contractors furnish to
11 Medicaid beneficiaries. The department shall create a report
12 containing each quality review required under this subsection.

13 (2) The department shall require Medicaid HMOs to provide
14 EPSDT utilization data through the encounter data system, and HEDIS
15 well child health measures in accordance with the National
16 Committee for Quality Assurance prescribed methodology.

17 (3) The department shall submit a copy of the analysis of the
18 Medicaid HMO annual audited reports on HEDIS and the report under
19 subsection (1) to the standard report recipients within 30 days
20 after the department's receipt of the final information required
21 from the contractors.

22 Sec. 1670. (1) The appropriation in part 1 for the MICHild
23 program is to be used to provide comprehensive health care to all
24 children under age 19 who reside in families with an income at or
25 below 212% of the federal poverty level, who are uninsured and have
26 not had coverage by other comprehensive health insurance within 6
27 months of applying for MICHild benefits, and who are residents of
28 this state. The department shall develop detailed eligibility
29 criteria through the behavioral and physical health and aging



1 services administration public concurrence process. The eligibility
2 criteria must be consistent with the provisions of this part and
3 part 1.

4 (2) The department shall provide up to 1 year of continuous
5 eligibility to children eligible for the MIChild program.

6 Sec. 1677. From the funds appropriated in part 1 for the
7 MIChild program, the department shall provide, at a minimum, all
8 benefits available under the Michigan benchmark plan that are
9 delivered through contracted providers and consistent with federal
10 law, including, but not limited to, the following medically
11 necessary services:

12 (a) Inpatient mental health services, other than substance use
13 disorder treatment services, including services furnished in a
14 state-operated mental hospital and residential or other 24-hour
15 therapeutically planned structured services.

16 (b) Outpatient mental health services, other than substance
17 use disorder services, including services furnished in a mental
18 hospital operated by this state and community-based services.

19 (c) Durable medical equipment and prosthetic and orthotic
20 devices.

21 (d) Dental services as outlined in the approved MIChild state
22 plan.

23 (e) Substance use disorder treatment services that may include
24 inpatient, outpatient, and residential substance use disorder
25 treatment services.

26 (f) Care management services for mental health diagnoses.

27 (g) Physical therapy, occupational therapy, and services for
28 individuals with speech, hearing, and language disorders.

29 (h) Emergency ambulance services.



1 Sec. 1682. (1) In addition to the appropriations in part 1,
2 the department is authorized to receive and spend penalty money
3 received as the result of noncompliance with Medicaid certification
4 regulations. Penalty money, characterized as private funds,
5 received by the department shall increase authorizations and
6 allotments in the long-term care accounts.

7 (2) Any unexpended penalty money, at the end of the year, must
8 carry forward to the following year.

9 (3) Not later than March 1 of the current fiscal year, the
10 department shall report to the standard report recipients on
11 penalty money received by the department as described in subsection
12 (1). The report must include, but is not limited to, the following
13 information:

14 (a) The amount of penalty monies received by the department in
15 the previous fiscal year listed by the assessed entity.

16 (b) A list of the entities that were assessed penalties in the
17 previous fiscal year with the rationale for each penalty.

18 Sec. 1692. (1) The department is authorized to pursue
19 reimbursement for eligible services provided in Michigan schools
20 from the federal Medicaid program. The department and the state
21 budget director are authorized to negotiate and enter into
22 agreements, together with the department of education, with local
23 and intermediate school districts regarding the sharing of federal
24 Medicaid services funds received for these services. The department
25 is authorized to receive and disburse funds to participating school
26 districts pursuant to agreements described in this subsection and
27 pursuant to federal law and a law of this state.

28 (2) From the funds appropriated in part 1 for health services
29 school-based services payments, the department is authorized to do



1 all of the following:

2 (a) Finance activities within the behavioral and physical
3 health and aging services administration related to eligible
4 services.

5 (b) Reimburse participating school districts pursuant to the
6 fund-sharing ratios negotiated in the state-local agreements
7 authorized in subsection (1).

8 (c) Offset general fund costs associated with the Medicaid
9 program.

10 Sec. 1693. The special Medicaid reimbursement appropriation in
11 part 1 may be increased if the department submits a Medicaid state
12 plan amendment pertaining to this line item at a level higher than
13 the appropriation. The department is authorized to appropriately
14 adjust financing sources in accordance with the increased
15 appropriation.

16 Sec. 1694. From the funds appropriated in part 1 for special
17 Medicaid reimbursement, \$2,629,900.00 of general fund/general
18 purpose revenue and any associated federal match must be
19 distributed for poison control services to an academic health care
20 system that has a high volume of providing care to indigent
21 individuals.

22 Sec. 1697. The department shall require that Medicaid health
23 plans administering Healthy Michigan plan benefits maintain a
24 network of dental providers in sufficient numbers, mix, and
25 geographic locations throughout their respective service areas in
26 order to provide adequate dental care for Healthy Michigan plan
27 enrollees.

28 Sec. 1700. Not later than December 1 of the current fiscal
29 year, the department shall report to the standard report recipients



1 on the distribution of funding provided, and the net benefit if the
2 special hospital payment is not financed with general fund/general
3 purpose revenue, to each eligible hospital during the previous
4 fiscal year from the following special hospital payments:

5 (a) GME.

6 (b) Special rural hospital payments provided under section
7 1802(2) of this part.

8 (c) Lump-sum payments to rural hospitals for obstetrical care
9 provided under section 1802(1) of this part.

10 Sec. 1702. From the funds appropriated in part 1, the
11 department shall increase the rates in place as of September 30,
12 2023 by 25% for private duty nursing services for Medicaid
13 beneficiaries under the age of 21. These additional funds must be
14 used to attract and retain highly qualified registered nurses and
15 licensed practical nurses to provide private duty nursing services
16 so that medically fragile individuals can be cared for in the most
17 homelike setting possible.

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

22 Sec. 1764. The department shall annually certify whether rates
23 paid to Medicaid health plans and specialty PIHPs are actuarially
24 sound in accordance with federal requirements. The department shall
25 provide to the standard report recipients a copy of the rate
26 certification required under this section and the approval of rates
27 paid to Medicaid health plans and specialty PIHPs for any fiscal
28 year not later than October 1 for Medicaid capitation rate
29 certifications and not later than February 15, May 15, and August



1 15 for any Medicaid capitation rate amendments. Following the rate
2 certification, the department shall ensure that no new or revised
3 state Medicaid policy bulletin that is promulgated materially
4 impacts the capitation rates that have been certified.

5 Sec. 1786. From the funds appropriated in part 1, the
6 department shall maintain Medicaid reimbursement for the
7 administration of injectable and oral vaccines at \$23.03.

8 Sec. 1788. From the funds appropriated in part 1, the
9 department shall provide Medicaid reimbursement rates, including
10 Medicaid reimbursements from the ambulance provider quality
11 assurance assessment, for ground ambulance services at not less
12 than 100% of the Medicare base rates for Locality 01 for ground
13 ambulance services in effect on January 1, 2023.

14 Sec. 1790. The department shall maintain the current
15 practitioner rates paid for CPT codes 90791 through 90899 for
16 psychiatric procedures through Medicaid fee-for-service and through
17 the comprehensive Medicaid health plans for psychiatric procedures
18 provided for Medicaid recipients under the age of 21.

19 Sec. 1791. From the funds appropriated in part 1 for health
20 plan services and physician services, the department shall provide
21 Medicaid reimbursement rates for neonatal services at 100% of the
22 Medicare rate received for those services in effect on the date the
23 services are provided to eligible Medicaid recipients. The neonatal
24 services and physician services eligible for reimbursement rates
25 under this section are described as CPT codes 99468, 99469, 99471,
26 99472, 99475, 99476, 99477, 99478, 99479, and 99480.

27 Sec. 1792. Not later than April 30 of the current fiscal year,
28 the department shall evaluate pharmacy encounter data through the
29 first 2 quarters of the fiscal year to determine, in consultation



1 with the Medicaid health plans, if rates must be recertified. Not
 2 later than May 30 of the current fiscal year, the department shall
 3 report the evaluation results to the standard report recipients and
 4 the Medicaid health plans.

5 Sec. 1794. (1) From the funds appropriated in part 1, the
 6 department shall provide Medicaid reimbursements for hospital-based
 7 substance use disorder peer-supports.

8 (2) Not later than March 1 of the current fiscal year, the
 9 department shall report to the standard report recipients on the
 10 statewide amounts and each hospital amount for hospital-based
 11 substance use disorder peer-supports during the first quarter of
 12 the current fiscal year, including for all of the following:

- 13 (a) The number of individuals served.
- 14 (b) The Medicaid reimbursement utilization.
- 15 (c) The total expenditures.

16 Sec. 1801. From the funds appropriated in part 1 for physician
 17 services and health plan services, the department shall continue
 18 the increase to Medicaid rates for primary care services provided
 19 only by primary care providers. The department shall not provide
 20 the increase to Medicaid rates under this section to primary care
 21 providers whose primary practice is as a non-primary-care
 22 subspecialty. The department shall establish policies that most
 23 effectively limit the increase to primary care providers for
 24 primary care services only. As used in this section, "primary care
 25 provider" means a physician, or a practitioner working in
 26 collaboration with a physician, who is either licensed under part
 27 170 or part 175 of the public health code, 1978 PA 368, MCL
 28 333.17001 to 333.17097 and 333.17501 to 333.17556, and who works as
 29 a primary care provider in general practice or is board-eligible or



1 certified with a specialty designation of family medicine, general
2 internal medicine, or pediatric medicine, or is a provider who
3 provides the department with documentation of equivalency.

4 Sec. 1802. (1) From the funds appropriated in part 1 for
5 hospital services and therapy:

6 (a) \$8,470,200.00 in general fund/general purpose revenue must
7 be provided as lump-sum payments to noncritical access hospitals
8 that qualified for rural hospital access payments in fiscal year
9 2013-2014 and that provide obstetrical care this fiscal year.
10 Payment amounts must be based on the volume of obstetrical care
11 cases and newborn care cases for all such cases billed by each
12 qualified hospital in the most recent year for which data is
13 available. For the current fiscal year, a hospital that met
14 established occupied bed criteria based on Medicaid cost reports as
15 of the fiscal year ending September 30, 2011, and that is located
16 within a county with a population of not more than 165,000 and in a
17 city, village, or township with a population of not more than
18 16,000, according to the 2000 federal decennial census, is
19 eligible.

20 (b) \$15,204,800.00 in general fund/general purpose revenue and
21 any associated federal match must be awarded as rural access
22 payments to noncritical access hospitals that meet criteria
23 established by the department for services to low-income rural
24 residents. One of the reimbursement components of the distribution
25 formula must be assistance with labor and delivery services. For
26 the current fiscal year, a hospital that met established occupied
27 bed criteria based on Medicaid cost reports as of the fiscal year
28 ending September 30, 2011, and that is located within a county with
29 a population of not more than 165,000 and in a city, village, or



1 township with a population of not more than 16,000, according to
2 the 2000 federal decennial census, is eligible solely for the rural
3 access pool general fund/general purpose revenue portion.

4 (2) The department shall make payments not later than January
5 1 of the current fiscal year.

6 (3) The department shall publish the distribution of payments
7 for the current fiscal year and the previous fiscal year.

8 Sec. 1804. The department may utilize the federal public
9 assistance reporting information system to continue to work to
10 identify Medicaid recipients who are veterans and who may be
11 eligible for federal veterans' health care benefits or other
12 benefits and shall continue to refer veterans to the department of
13 military and veterans affairs for assistance in securing additional
14 benefits.

15 Sec. 1810. In advance of the annual rate setting development,
16 Medicaid health plans must be given at least 60 days to dispute and
17 correct any discarded encounter data before rates are certified.
18 The department shall notify each contracting Medicaid health plan
19 of any encounter data that have not been accepted for the purposes
20 of rate setting.

21 Sec. 1812. Not later than June 1 of the current fiscal year,
22 and using the most recent available cost reports, the department
23 shall complete a report of all direct and indirect costs associated
24 with residency training programs for each hospital that receives
25 funds appropriated in part 1 for graduate medical education or
26 through the MiDocs consortium. The report shall be submitted to the
27 standard report recipients.

28 Sec. 1820. (1) In order to avoid duplication of efforts, if a
29 Medicaid health plan has been reviewed and accredited by a national



1 accrediting entity for health care services, the department shall
2 use applicable national accreditation review criteria to determine
3 compliance with corresponding requirements in this state.

4 (2) The department shall continue to comply with federal law
5 and laws of this state and shall not initiate an action that
6 negatively impacts beneficiary safety.

7 (3) As used in this section, "national accrediting entity"
8 means the National Committee for Quality Assurance, the URAC,
9 formerly known as the Utilization Review Accreditation Commission,
10 or another appropriate entity, as approved by the department.

11 Sec. 1830. From the funds appropriated in part 1 for hospital
12 services and therapy, the department shall allocate \$7,500,000.00
13 to support prenatal health care providers operating in this state
14 to provide services for existing group-based prenatal care programs
15 that include 1 or more health care professionals leading small
16 groups of expectant mothers - in the same phase of pregnancy - in
17 discussions and other health services that promote the well-being
18 and health of mothers and babies.

19 Sec. 1831. From the funds appropriated in part 1 for hospital
20 services and therapy, the department shall allocate \$10,000,000.00
21 to continue to support hospitals in this state to improve maternal
22 safety and outcomes by administering and expanding a data-driven
23 maternal safety and quality improvement initiative that is based on
24 interdisciplinary and consensus-based practices. The initiative
25 expansion must focus on mitigating pregnancy-associated injury and
26 death, work to improve outcomes for underserved groups, and address
27 problems related to substance use disorders.

28 Sec. 1837. The department shall continue, and expand where
29 appropriate, utilization of telemedicine and telepsychiatry as



1 strategies to increase access to services for Medicaid recipients.

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

5 (a) The encouragement of the training of physicians in
6 specialties, including primary care, that are necessary to meet the
7 future needs of residents of this state.

8 (b) The training of physicians in settings that include
9 ambulatory sites and rural locations.

10 (c) The training of practitioners providing pediatric
11 psychiatry services.

12 Sec. 1850. The department may allow Medicaid health plans to
13 assist with maintaining eligibility through outreach activities to
14 ensure continuation of Medicaid eligibility and enrollment in
15 managed care. The assistance may include mailings, telephone
16 contact, or face-to-face contact with beneficiaries enrolled in the
17 individual Medicaid health plan. Medicaid health plans may offer
18 assistance in completing paperwork for beneficiaries enrolled in
19 the Medicaid health plan. In partnership with the National Kidney
20 Foundation of Michigan, the department shall allocate \$950,000.00
21 in general fund/general purpose revenue and any associated federal
22 match from the Healthy Michigan plan to enhance Medicaid health
23 plan outreach to improve access and utilization of Medicaid covered
24 services. These funds must also support outreach efforts by the
25 Morris Hood III Chronic Kidney Disease and COVID-19 Complications
26 Prevention Initiative to identify, educate, and prevent chronic
27 kidney disease in high-risk populations and regions.

28 Sec. 1854. The funds appropriated in part 1 for PACE must
29 support a current fiscal year enrollment cap that is not less than



1 8,543.

2 Sec. 1855. From the funds appropriated in part 1 for PACE, to
3 the extent that funding is available in the PACE line item and
4 unused program slots are available, the department may do the
5 following:

6 (a) Increase the number of slots for a local and already-
7 established PACE if the local PACE has provided appropriate
8 documentation to the department indicating its ability to expand
9 capacity to provide services to additional PACE clients.

10 (b) Suspend the 10 member per month individual PACE enrollment
11 increase cap in order to allow unused and unobligated slots to be
12 allocated to address unmet demand for PACE services.

13 Sec. 1856. (1) From the funds appropriated in part 1 for
14 hospice services, \$5,000,000.00 shall be expended to provide room
15 and board for Medicaid recipients who meet hospice eligibility
16 requirements and receive services at Medicaid enrolled hospice
17 residences in this state. The department shall distribute funds
18 through grants based on the total beds located in all eligible
19 residences that have been providing these services as of October 1,
20 2017. An eligible grant applicant may inform the department of the
21 applicant's request to reduce the grant amount allocated for the
22 applicant's residence and the funds must be distributed
23 proportionally to increase the total grant amount of the remaining
24 grant-eligible residences. Grant amounts shall be paid out monthly
25 with 1/12 of the total grant amount distributed each month to the
26 grantees.

27 (2) Not later than September 15 of the current fiscal year,
28 each Medicaid-enrolled hospice with a residence that receives funds
29 under this section shall provide a report to the department on the



1 utilization of the grant funding provided in subsection (1). The
 2 report must be provided in a format prescribed by the department
 3 and must include the following information:

- 4 (a) The number of patients served.
 5 (b) The number of days served.
 6 (c) The daily room and board rates for the patients served.
 7 (d) If there is not sufficient funding to cover the total room
 8 and board need, the number of patients who did not receive care due
 9 to insufficient grant funding.

10 (3) If funds awarded under this section remain unused at the
 11 end of the current fiscal year, the Medicaid-enrolled hospice with
 12 a residence shall return those unused funds to this state.

13 Sec. 1858. Not later than April 1 of the current fiscal year,
 14 from the funds appropriated in part 1, the department shall submit
 15 a report to the standard report recipients that contains all of the
 16 following elements related to the current Medicaid pharmacy carve-
 17 out of pharmaceutical products as provided for in section 109h of
 18 the social welfare act, 1939 PA 280, MCL 400.109h:

- 19 (a) The number of prescriptions paid by the department during
 20 the previous fiscal year.
 21 (b) The total amount of expenditures for prescriptions paid by
 22 the department during the previous fiscal year.
 23 (c) The number of and total expenditures for prescriptions
 24 paid for by the department for generic equivalents during the
 25 previous fiscal year.

26 Sec. 1859. The department shall partner with the Michigan
 27 Association of Health Plans and Medicaid health plans to develop
 28 and implement strategies for the use of information technology
 29 services for Medicaid research activities. The department shall



1 make available state medical assistance program data, including
2 Medicaid behavioral data, to the Michigan Association of Health
3 Plans and Medicaid health plans or any vendor considered qualified
4 by the department to perform research activities consistent with
5 this state's goals of improving health; increasing the quality,
6 reliability, availability, and continuity of care; and reducing the
7 cost of care for the eligible population of Medicaid recipients.

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

11 Sec. 1870. (1) From the funds appropriated in part 1 for
12 hospital services and therapy, the department shall allocate
13 \$11,000,000.00 in general fund/general purpose revenue plus any
14 contributions from public entities, up to \$5,000,000.00, and any
15 associated federal match to the MiDocs consortium to create new
16 primary care residency slots in underserved communities. The new
17 primary care residency slots must be in 1 of the following
18 specialties: family medicine, general internal medicine, general
19 pediatrics, general OB-GYN, psychiatry, or general surgery.

20 (2) The department shall seek any necessary approvals from CMS
21 to allow the department to implement the program described in this
22 section.

23 (3) Assistance with repayment of medical education loans, loan
24 interest payments, or scholarships provided by the MiDocs
25 consortium shall be contingent upon a minimum 2-year commitment to
26 practice in an underserved community in this state post-residency
27 and an agreement to forego any sub-specialty training for at least
28 2 years post-residency with the exception of a child and adolescent
29 psychiatry fellowship that must be integrated with a psychiatry



1 residency training program in a MiDocs consortium affiliated
2 institution.

3 (4) The MiDocs consortium shall work with the department to
4 integrate the Michigan inpatient psychiatric admissions discussion
5 (MIPAD) recommendations and, when possible, prioritize training
6 opportunities in state psychiatric hospitals and community mental
7 health organizations.

8 (5) The department shall maintain the MiDocs consortium
9 initiative advisory council to help support implementation of the
10 program described in this section, and to provide oversight. The
11 advisory council must be composed of the MiDocs consortium, the
12 Michigan Area Health Education Centers, the Michigan Primary Care
13 Association, the Michigan Center for Rural Health, the Michigan
14 Academy of Family Physicians, and any other appointees designated
15 by the department.

16 (6) Not later than September 1 of the current fiscal year, the
17 MiDocs consortium shall submit a report to the standard report
18 recipients that includes all of the following information:

- 19 (a) Audited financial statement of per-resident costs.
20 (b) Education and clinical quality data.
21 (c) Roster of trainees, including areas of specialty and
22 locations of training.
23 (d) Medicaid revenue by training site.

24 (7) The department shall monitor outcome and performance
25 measures for this program, including, but not limited to, the
26 following:

- 27 (a) Increasing this state's ability to recruit, train, and
28 retain primary care physicians and other select specialty
29 physicians in underserved communities.



1 (b) Maximizing training opportunities with community health
2 centers, rural critical access hospitals, solo or group private
3 practice physician practices, schools, and other community-based
4 clinics, in addition to the required training through rotations at
5 inpatient hospitals.

6 (c) Increasing the number of residency slots for family
7 medicine, general internal medicine, general pediatrics, general
8 OB-GYN, psychiatry, and general surgery.

9 (8) Unexpended and unencumbered funds up to a maximum
10 \$11,000,000.00 in general fund/general purpose revenue plus any
11 contributions from public entities, up to \$5,000,000.00, and any
12 associated federal match remaining in accounts appropriated in part
13 1 for hospital services and therapy are designated as work project
14 appropriations, and any unencumbered or unallotted funds must not
15 lapse at the end of the fiscal year and must be available for
16 expenditures for the MiDocs consortium to create new primary care
17 residency slots in underserved communities under this section until
18 the work project has been completed. All of the following are in
19 compliance with section 451a(1) of the management and budget act,
20 1984 PA 431, MCL 18.1451a:

21 (a) The purpose of the work project is to fund the cost of the
22 MiDocs consortium to create new primary care residency slots in
23 underserved communities.

24 (b) The work project will be accomplished by contracting with
25 the MiDocs consortium to oversee the creation of new primary care
26 residency slots.

27 (c) The total estimated completion cost of the work project is
28 \$29,400,000.00.

29 (d) The tentative completion date for the work project is



1 September 30, 2029.

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

7 Sec. 1874. The department shall ensure, in counties where PACE
8 services are available, that PACE is included as an option in all
9 options counseling and enrollment brokering for aging services and
10 managed care programs, including, but not limited to, Area Agencies
11 on Aging, centers for independent living, and the MiChoice home and
12 community-based waiver. The department must include approved
13 marketing and discussion materials for options counseling.

14 Sec. 1879. (1) The department shall maintain a single,
15 standard preferred drug list to be used by all contracted Medicaid
16 managed health care programs. If the department makes changes to
17 the preferred drug list, the department shall consult with all
18 contracted managed health care programs and the Michigan pharmacy
19 and therapeutics committee to ensure sufficient access to medically
20 necessary drugs for each disease state. The department has final
21 authority over the list and shall design the list to ensure access
22 to clinically effective and appropriate drug therapies and to
23 maximize federal rebates and supplemental rebates.

24 (2) Not later than July 15 of the current fiscal year, the
25 department shall submit a report to the standard report recipients
26 that compares the managed care pharmacy expenditures, utilization,
27 and rebates before implementing a single, standard preferred drug
28 list to managed care pharmacy expenditures, utilization, and
29 rebates after implementing a single, standard preferred drug list.



1 The report must include quarterly data on collected rebates,
 2 pharmacy utilization, and expenditures by quarter for at least 8
 3 quarters before implementing a single, standard preferred drug
 4 list, and the experienced rebates, pharmacy utilization, and
 5 expenditures for at least 18 quarters, and the projected rebates,
 6 pharmacy utilization, and expenditures for quarters 19 through 24
 7 after implementing a single, standard preferred drug list. The data
 8 must be aggregated by the department so as not to disclose the
 9 proprietary or confidential drug-specific information, or the
 10 proprietary or confidential information that directly or indirectly
 11 identifies financial information linked to a single manufacturer.

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

19 Sec. 1896. From the funds appropriated in part 1, the
 20 department shall maintain a Medicaid recuperative care and
 21 transitional services benefit for beneficiaries experiencing
 22 homelessness. These services, which include medical and care
 23 coordination support, must be provided to eligible beneficiaries as
 24 part of a hospital discharge process.

25

26 **INFORMATION TECHNOLOGY**

27 Sec. 1901. (1) The department shall submit a report on a
 28 semiannual basis to the standard report recipients that lists the
 29 projects approved in the previous 6 months and provides the purpose



1 for approving each project including any federal, state, court, or
2 legislative requirement for each project.

3 (2) Once an award for an expansion of information technology
4 is made, the department shall submit a report to the standard
5 report recipients that provides the projected cost of the expansion
6 broken down by use and type of expense.

7 Sec. 1906. From the funds appropriated in part 1 for
8 information technology services and projects, the department shall
9 allocate \$4,950,000.00 general fund/general purpose revenue, and
10 all associated federal matching revenue, to a public and private
11 nonprofit collaboration that is designated as this state's
12 statewide health information exchange by cooperative agreement, to
13 implement health information technology strategies for health
14 information exchange development, data management, and population
15 health at a statewide level.

16 Sec. 1907. Not later than March 1 of the current fiscal year,
17 the department shall submit a report to the standard report
18 recipients on all current, contracted information technology-
19 related projects. The report must include, by project, the total
20 contractual costs, spending in previous fiscal years, planned
21 spending for the current fiscal year, and fiscal year-to-date
22 spending.

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

27 (2) From the funds appropriated in part 1 for bridges
28 information system, the department shall only encumber or expend
29 funds for the operation, maintenance, and improvements of Bridges



1 and MIBridges.

2 (3) From the funds appropriated in part 1 for Michigan
3 Medicaid information system, the department shall only encumber or
4 expend funds for the operation, maintenance, and improvements of
5 the community health automated Medicaid processing system.

6 (4) From the funds appropriated in part 1 for Michigan
7 statewide automated child welfare information system, the
8 department shall only encumber or expend funds for the operation,
9 maintenance, and improvements of MiSACWIS.

10 (5) From the funds appropriated in part 1 for comprehensive
11 child welfare information system, the department shall only
12 encumber or expend funds for the operation, maintenance, and
13 improvements to the comprehensive child welfare information system.

14 (6) From the funds appropriated in part 1 for comprehensive
15 child welfare information system, the department shall continue to
16 develop a new information system to replace MiSACWIS consistent
17 with the plan provided by the department to the United States
18 District Court for Eastern District of Michigan as a part of the
19 settlement. The development of the comprehensive child welfare
20 information system must adhere to department of technology,
21 management, and budget and information technology investment fund
22 (ITIF) policies and practices, including use of the state unified
23 information technology environment methodology and agile
24 development. The project team shall also participate in and comply
25 with the enterprise portfolio management office process and product
26 quality assurance. To ensure full transparency, the project must be
27 included in the ITIF portfolio for executive, legislative, and
28 external reporting purposes. As a component of the ITIF portfolio,
29 the project is subject to governance and oversight by the



1 information technology investment management board.

2 Sec. 1910. From the funds appropriated in part 1,
3 \$536,041,400.00 is appropriated for information technology services
4 and projects including:

5 (a) \$114,678,900.00 for bridges information system.

6 (b) \$21,555,400.00 for Michigan statewide automated child
7 welfare information system.

8 (c) \$102,482,000.00 for Michigan Medicaid information system.

9 (d) \$44,243,200.00 for child support automation.

10 (e) \$8,274,700.00 for comprehensive child welfare information
11 system.

12

13 **ONE-TIME APPROPRIATIONS**

14 Sec. 1920. From the funds appropriated in part 1 for ALS
15 services, the department shall allocate \$829,900.00 to the ALS
16 Association to provide free ALS care services including, but not
17 limited to, in home visits, caregiver training, support groups,
18 durable medical equipment, and respite care. As used in this
19 section, "ALS" means amyotrophic lateral sclerosis.

20 Sec. 1922. From the funds appropriated in part 1 for
21 behavioral health services, the department shall allocate
22 \$3,500,000.00 to a nonprofit organization organized under the laws
23 of this state that is exempt from federal income tax under section
24 501(c)(3) of the internal revenue code of 1986, 26 USC 501, and is
25 located in a city with a population between 138,000 and 140,000
26 that is located in a county with a population between 881,000 and
27 882,000, according to the most recent federal decennial census. To
28 be eligible for funds under this section, an organization must have
29 current experience providing support services to immigrant children



1 and families from Afghanistan, Iraq, Syria, Yemen, and other Middle
2 Eastern countries, and Ukraine.

3 Sec. 1924. (1) From the funds appropriated in part 1 for
4 behavioral health urgent care, the department shall allocate
5 \$1,700,00.00 as a grant to a nonprofit organization that is
6 organized under the laws of this state, is exempt from federal
7 income tax under section 501(c)(3) of the internal revenue code of
8 1986, 26 USC 501, is located in a city with a combined population
9 greater than 100,000 that is located in a county with a population
10 between 280,000 and 290,000, according to the most recent federal
11 decennial census, and that has a mission to help people in crisis
12 by offering home, healing, and recovery. The grant must be used to
13 support the establishment of a behavioral health urgent care
14 program.

15 (2) The unexpended funds appropriated in part 1 for behavioral
16 health urgent care are designated as a work project appropriation.
17 Unencumbered or unallotted funds shall not lapse at the end of the
18 fiscal year and shall be available for expenditures under this
19 section until the project has been completed. The following are in
20 compliance with section 451a of the management and budget act, 1984
21 PA 431, MCL 18.1451a:

22 (a) The purpose of the project is to provide funds for
23 behavioral health urgent care services, including mental health
24 assessments, psychiatric evaluations, short term prescriptions,
25 intervention and therapy, and care coordination with ongoing health
26 providers.

27 (b) The project will be accomplished by a nonprofit
28 organization exempt from federal income tax under section 501(c)(3)
29 of the internal revenue code of 1986, 26 USC 501.



1 (c) The estimated cost of the project is \$1,700,000.00.

2 (d) The tentative completion date is September 30, 2029.

3 Sec. 1926. From the funds appropriated on part 1 for child
4 advocacy centers, the department shall allocate \$3,500,000.00 to
5 support the expansion of services provided by child advocacy
6 centers. The department must distribute the funds consistent with
7 the regular allocation formula for child advocacy centers.

8 Sec. 1928. From the funds appropriated in part 1 for
9 children's behavioral health service expansion, the department
10 shall allocate \$2,000,000.00 to a nonprofit organization organized
11 under the laws of this state that is exempt from federal income tax
12 under section 501(c)(3) of the internal revenue code of 1986, 26
13 USC 501, founded in 1929, and located in a city with a population
14 greater than 600,000, according to the most recent federal
15 decennial census, to support increased operational capacity in
16 order to provide clinical mental health treatment for children and
17 families, primary care coordination, and provider recruitment,
18 retention, and training.

19 Sec. 1930. (1) From the funds appropriated in part 1 for
20 children's services administration training, the department shall
21 provide grant funding to support improvements in the current
22 training program for children's services administration staff that
23 will include experiential child safety training.

24 (2) The unexpended funds appropriated in part 1 for children's
25 services administration training are designated as a work project
26 appropriation, and any unencumbered or unallotted funds shall not
27 lapse at the end of the fiscal year and shall be available for
28 expenditures under this section until the work project has been
29 completed. The following are in compliance with section 451a of the



1 management and budget act, 1984 PA 431, MCL 18.1451a:

2 (a) The purpose of the work project is to fund experiential
3 child safety training to be provided to children's services
4 administration staff.

5 (b) The work project will be accomplished by utilizing state
6 employees or contracts with service providers.

7 (c) The total estimated completion cost of the work project is
8 \$2,000,000.00.

9 (d) The tentative completion date is September 30, 2029.

10 Sec. 1932. From the funds appropriated in part 1 for CMHSP
11 crisis services, the department shall allocate \$2,000,000.00 to a
12 CMHSP located in a county with a population between 1,200,000 and
13 1,300,000 according to the most recent federal decennial census to
14 renovate a crisis hub, to improve crisis service coordination for
15 youth and family care, for assessment center renovations, for peer
16 respite services, and for an urgent care clinic.

17 Sec. 1934. (1) From the funds appropriated in part 1 for
18 complex medical condition center, the department shall allocate
19 \$500,000.00 as a grant to a nonprofit organization that operates a
20 facility in a county with a population between 600,000 and 700,000
21 according to the most recent federal decennial census and that
22 provides children up to age 26 with weak immune systems with an
23 ability to fulfill their social, emotional, and physical needs. The
24 facility must provide a safe and infection-controlled environment
25 consisting of MERV 14 air filtration, building pressurization,
26 antimicrobial surfaces, and other hospital-grade features.
27 Programming must be specifically designed for children with complex
28 medical conditions and their immediate family to interact socially
29 and to feel a sense of belonging through the use of therapeutic,



1 evidence-based, and organizational-led activities targeted to
2 address both behavioral and physical health outcomes.

3 (2) The nonprofit organization identified under subsection (1)
4 shall partner with the largest provider-owned nonprofit Medicaid
5 health maintenance organization headquartered in the same county
6 for which the nonprofit organization is providing services to
7 identify and enroll 100 qualifying children up to age 26 for
8 programmatic services. The provider-owned nonprofit Medicaid health
9 maintenance organization shall be responsible for the collection of
10 data and metric identification for each of the 100 enrollees,
11 including, but not limited to, utilization trends and health
12 outcomes associated with isolation and loneliness, mental health
13 concerns, emergency department visits, and hospitalizations.

14 (3) The provider-owned nonprofit Medicaid health maintenance
15 organization shall create and utilize a new pilot program code to
16 track the metrics identified in subsection (2). This pilot program
17 code must encompass a group of services provided by the nonprofit
18 organization. The services provided and that are reflected in the
19 pilot program code must include services that align with existing
20 reimbursable service codes such as care management and group
21 therapy and select other services without a code or without
22 Medicaid program reimbursement, including, but not limited to, play
23 therapy, parent support services, and transportation services. The
24 following existing codes shall be included in the new pilot program
25 code, group therapy: 90853, and care management: 99487, 99495,
26 99496, 98968, 98962, 99484, G9001, G9002, and G9007. The following
27 services without existing codes must also be included in the pilot
28 program:

29 (a) Social support or social support programming.



1 (b) Play therapy or recreation therapy.

2 (c) Educational support services.

3 (d) Parent or caregiver respite or support.

4 (4) Not later than September 30 of the current fiscal year,
5 the grant recipient under this section shall submit a report to the
6 department that demonstrates the effectiveness of the program in
7 fulfilling the social, emotional, and physical needs of the
8 patients served by the grant recipient. This report must include
9 the data and metrics identified in subsection (2).

10 (5) The department shall explore Medicaid waiver options
11 available from the Centers for Medicare and Medicaid, which, upon
12 approval, would authorize the department to expend Medicaid funds
13 on similar supports and services as those offered under this
14 program and pilot program code for Medicaid recipients.

15 Sec. 1936. From the funds in part 1 for cranial hair
16 prosthesis, the department shall allocate \$250,000.00 to a nonprofit
17 organization organized under the laws of this state that is exempt
18 from federal income tax under section 501(c)(3) of the internal
19 revenue code of 1986, 26 USC 501, and is located in a city with a
20 population between 58,800 and 59,000 that is located in a county
21 with a population between 881,000 and 882,000, according to the
22 most recent federal decennial census. To be eligible for funds
23 under this section, an organization must have current experience
24 providing wigs and support services to children and young adults
25 experiencing hair loss as a result of an illness.

26 Sec. 1938. From the funds appropriated in part 1 for critical
27 access hospital facility and equipment, the department shall
28 allocate \$2,000,000.00 to a critical access hospital located in a
29 city with a population between 1,900 and 2,100 in a county with a



1 population between 8,500 and 9,000, according to the most recent
2 federal decennial census, for hospital equipment repairs and
3 replacements and for facility repairs.

4 Sec. 1940. From the funds appropriated on part 1 for deferred
5 maintenance, the department shall allocate \$1,000,000.00 to a
6 privately owned and operated secure residential juvenile justice
7 facility located in a city with a population between 8,960 and
8 9,000 that is located in a county with a population between
9 1,700,000 and 1,800,000, according to the most recent federal
10 decennial census. The funds must be used to support capital
11 improvements and security upgrades needed to reopen the facility.

12 Sec. 1942. From the funds appropriated in part 1 for dental
13 clinic, the department shall allocate \$2,900,000.00 to United Way
14 of Northwest Michigan for the cost of purchasing, rather than
15 leasing, a building that houses both a dental clinic and the United
16 Way of Northwest Michigan.

17 Sec. 1944. (1) From the funds appropriated in part 1 for
18 dental programs, \$2,500,000.00 of general fund/general purpose
19 revenue and any associated federal match must be distributed to a
20 qualified nonprofit provider of dental services that partners with
21 local health departments for the purpose of expanding capacity and
22 ensuring operational efficiencies that may include equipment and
23 technology upgrades.

24 (2) In order to be considered a qualified nonprofit provider
25 of dental services, the provider must demonstrate all of the
26 following:

27 (a) The provider has an effective health insurance enrollment
28 process for uninsured patients.

29 (b) The provider has an effective process of charging patients



1 on a sliding scale based on the patient's ability to pay.

2 (c) The provider uses additional fund sources including, but
3 not limited to, federal Medicaid matching funds.

4 Sec. 1946. From the funds in part 1 for domestic violence
5 shelter operations, the department shall allocate \$300,000.00 to a
6 nonprofit organization organized under the laws of this state that
7 is exempt from federal income tax under section 501(c)(3) of the
8 internal revenue code of 1986, 26 USC 501, and is located in a city
9 with a population between 9,100 and 9,200 that is located in a
10 county with a population between 154,000 and 155,000, according to
11 the most recent federal decennial census. Funds must be used to
12 support domestic violence shelter operations and building
13 renovations.

14 Sec. 1948. (1) From the funds appropriated in part 1 for doula
15 training and continuing education, the department shall support
16 professional development for doulas participating in the
17 department's doula registry.

18 (2) The unexpended funds appropriated in part 1 for doula
19 training and continuing education are designated as a work project
20 appropriation. Unencumbered or unallotted funds shall not lapse at
21 the end of the fiscal year and shall be available for expenditures
22 under this section until the project has been completed. The
23 following are in compliance with section 451a of the management and
24 budget act, 1984 PA 431, MCL 18.1451a:

25 (a) The purpose of the work project is to provide training and
26 continuing education for new and established doulas that serve the
27 residents of this state.

28 (b) The work project will be accomplished by utilizing state
29 employees or contracts.



1 (c) The total estimated cost of the work project is
2 \$2,909,800.00.

3 (d) The tentative completion date is September 30, 2029.
4 Sec. 1950. (1) From the funds appropriated in part 1 for
5 employment and training support services, the department shall
6 allocate \$2,500,000.00 to support individuals and families to
7 remain employed and become self-sufficient.

8 (2) The unexpended funds appropriated in part 1 for employment
9 and training support services are designated as a work project
10 appropriation. Unencumbered or unallotted funds shall not lapse at
11 the end of the fiscal year and shall be available for expenditures
12 under this section until the project has been completed. The
13 following are in compliance with section 451a(1) of the management
14 and budget act, 1984 PA 431, MCL 18.1451a:

15 (a) The purpose of the work project is to provide funds for
16 vehicle repairs, purchases, and other services to assist
17 individuals in accessing and retaining employment.

18 (b) The work project will be accomplished by utilizing state
19 employees or contracts.

20 (c) The total estimated cost of the work project is
21 \$2,500,000.00.

22 (d) The tentative completion date is September 30, 2029.

23 Sec. 1952. (1) From the funds appropriated in part 1 for
24 firearm injury and violence prevention, the department shall
25 allocate \$7,500,000.00 to contract with a public university located
26 in a city with a population between 100,000 and 130,000 in a county
27 with a population between 370,000 and 380,000, according to the
28 most recent federal decennial census, to provide training,
29 technical assistance, evaluations, and infrastructure to support



1 all of the following:

2 (a) The implementation of local prevention strategies intended
3 to reduce school violence. Prevention strategies may include, but
4 are not limited to, any of the following:

- 5 (i) School climate improvement.
6 (ii) Student care and threat assessment teams.
7 (iii) Anonymous reporting systems.
8 (iv) Restorative justice practices.
9 (v) Evidence-based student leadership development.

10 (b) The implementation of the extreme risk protective order
11 act, 2023 PA 38, MCL 691.1801 to 691.1821.

12 (c) The collection of more complete data about fatal and
13 nonfatal firearm injuries in this state.

14 (2) The unexpended funds appropriated in part 1 for firearm
15 injury and violence prevention are designated as a work project
16 appropriation, and any unencumbered or unallotted funds shall not
17 lapse at the end of the fiscal year and shall be available for
18 expenditures for projects under this section until the projects
19 have been completed. The following are in compliance with section
20 451a of the management and budget act, 1984 PA 431, MCL 18.1451a:

21 (a) The purpose of the work project is to provide training,
22 technical support, and program evaluations to reduce firearm
23 injuries in this state and to establish new infrastructure for data
24 collection on injuries in this state.

25 (b) The work project will be accomplished by utilizing state
26 employees or contracts.

27 (c) The total estimated cost of the work project is
28 \$7,500,000.00.

29 (d) The tentative completion date is September 30, 2029.



1 Sec. 1954. From the funds appropriated in part 1 for firearm
2 safety and violence prevention, the department shall allocate
3 \$1,800,000.00 to support community-based firearm safety and
4 prevention efforts. Funds must be allocated to community-based
5 organizations that provide training and programming on extreme risk
6 protective orders issued under the extreme risk protection order
7 act, 2023 PA 38, MCL 691.1801 to 691.1821, and the safe storage law
8 described in section 9 of 1927 PA 372, MCL 28.429.

9 Sec. 1956. (1) From the funds appropriated in part 1 for first
10 responder and public safety staff mental health, the department
11 shall allocate \$2,500,000.00 for a grant program to support
12 firefighters, police officers, emergency medical services
13 personnel, public safety tele-communicators, local correctional
14 officers, juvenile detention employees, prosecutors, and
15 individuals working on special teams to address crimes such as
16 internet sex crimes, sexual crimes against children, or traffic
17 fatalities suffering from post-traumatic stress syndrome and other
18 mental health conditions. The grant program must primarily provide
19 grants to behavioral health providers and may also include funding
20 to the Michigan crisis and action line established under section
21 165 of the mental health code, 1974 PA 258, MCL 330.1165, to
22 improve information and referrals for these services. The
23 department shall coordinate and integrate the grant program with
24 the Michigan crisis and access line established under section 165
25 of the mental health code, 1974 PA 258, MCL 330.1165.

26 (2) The unexpended funds appropriated in part 1 for first
27 responder and public safety staff mental health are designated as a
28 work project appropriation. Unencumbered or unallotted funds shall
29 not lapse at the end of the fiscal year and shall be available for



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

4 (a) The purpose of the work project is to ensure that first
5 responder and public safety staff who are dealing with post-
6 traumatic stress syndrome and other mental health conditions have
7 access to enhanced mental health services.

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

11 (c) The estimated cost of the work project is \$2,500,000.00.

12 (d) The tentative completion date is September 30, 2029.

13 Sec. 1958. From the funds appropriated in part 1 for health
14 equity statewide curriculum, the department shall allocate
15 \$500,000.00 to partner with a state medical professional society
16 located in a city with a population between 47,000 and 48,000 in a
17 county with a population between 284,000 and 285,000, according to
18 the most recent federal decennial census, to develop a statewide
19 health equity curriculum for implementation in medical schools and
20 continuing medical education in this state.

21 Sec. 1960. From the funds appropriated in part 1 for home
22 health care authority, the department shall allocate \$1,000,000.00
23 to support the creation of a home health care public authority.
24 Once established, the home health care public authority must
25 provide supportive services to Medicaid recipients by accessing
26 eligible community-based supports, their families, and those who
27 serve them. Supportive services may include program orientation,
28 training, and patient matching services to home health care
29 workers.



1 Sec. 1962. (1) From the funds appropriated in part 1 for
 2 homeless programs, the department shall allocate \$2,750,000.00 to
 3 support family shelters, individuals, or families who are homeless
 4 and at risk of being homeless. Eligible expenditures from this line
 5 must include the following:

6 (a) Emergency hotels for families experiencing homelessness.

7 (b) Creating additional spaces at family homeless shelters.

8 (2) The unexpended funds appropriated in part 1 for homeless
 9 programs are designated as a work project appropriation.

10 Unencumbered or unallotted funds shall not lapse at the end of the
 11 fiscal year and shall be available for expenditures under this
 12 section until the project has been completed. The following are in
 13 compliance with section 451a(1) of the management and budget act,
 14 1984 PA 431, MCL 18.1451a:

15 (a) The purpose of the work project is to provide emergency
 16 hotels for families in need and build up family shelter capacity.

17 (b) The work project will be accomplished by utilizing state
 18 employees or contracts.

19 (c) The total estimated cost of the work project is
 20 \$2,750,000.00.

21 (d) The tentative completion date is September 30, 2029.

22 Sec. 1964. From the funds appropriated in part 1 for hospice
 23 caregiver support center, the department shall allocate
 24 \$1,000,000.00 to a nonprofit hospice organization that is organized
 25 under the laws of this state, is exempt from federal income tax
 26 under section 501(c)(3) of the internal revenue code of 1986, 26
 27 USC 501, and provides hospice services in 50 counties, to develop
 28 and operate a caregiver support center to expand the center's
 29 capacity to support and guide hospice patients and family



1 caregivers that are receiving care through nonprofit hospice
2 organizations.

3 Sec. 1966. From the funds appropriated in part 1 for inpatient
4 behavioral health facility, the department shall allocate
5 \$5,000,000.00 to a nonprofit organization that is organized under
6 the laws of this state, is exempt from federal income tax under
7 section 501(c)(3) of the internal revenue code of 1986, 26 USC 501,
8 and is located in a city with a population greater than 10,000 that
9 is located in a county with a population between 36,500 and 36,850,
10 according to the most recent federal decennial census, for
11 construction costs of an inpatient behavioral health and skilled
12 nursing facility.

13 Sec. 1968. From the funds appropriated in part 1 for maternal
14 health services, the department shall allocate \$420,000.00 in
15 general fund/general purpose revenue to maintain sustainability at
16 existing nurse family partnership sites in a county with a
17 population between 250,000 and 270,000 according to the most recent
18 federal decennial census and to include an additional outreach
19 worker position.

20 Sec. 1970. From the funds appropriated in part 1 for medical
21 center robotic surgery, the department shall allocate \$2,000,000.00
22 to a medical center that was founded in 1908 and is located in a
23 city with a population between 80,000 and 82,000 according to the
24 most recent federal decennial census, to expand the utilization of
25 robotic surgery for the purposes of improving patient outcomes and
26 reducing recovery times.

27 Sec. 1972. (1) From the funds appropriated in part 1 for
28 medical debt relief pilot program, the department shall allocate
29 \$100.00 to a national nonprofit organization organized under the



1 laws of this state that is exempt from federal income tax under
2 section 501(c)(3) of the internal revenue code of 1986, 26 USC 501,
3 and established in 2014 for the purpose of purchasing bundles of
4 medical debt on secondary markets or directly from providers to
5 abolish the medical debt for a group or groups of patients. The
6 department shall ensure the following conditions and criteria are
7 met before awarding a grant under this section:

8 (a) The grant recipient will use an award under this section
9 only to eliminate medical debt to patients with an income below the
10 federal poverty level with a financial need or who face insolvency.

11 (b) The grant recipient will ensure that a patient described
12 under subdivision (a) will not have adverse tax or income
13 implications due to the elimination of the medical debt.

14 (c) The grant recipient provides evidence to the department
15 that the grant recipient has a track record of performing the work
16 described in this section.

17 (d) The grant recipient will work with local units of
18 government to eliminate medical debt for residents of those local
19 units of government. A local unit of government that provides a
20 dollar of matching funds for every dollar appropriated under this
21 section must be given preference.

22 (2) Not later than March 1 of the current fiscal year, the
23 department shall provide a report, to the standard reporting
24 recipients, that details the status on any spending on purchasing
25 medical debt bundles and the total medical debt purchased.

26 (3) The unexpended funds appropriated in part 1 for medical
27 debt relief pilot program are designated as a work project
28 appropriation. Unencumbered or unallotted funds must not lapse at
29 the end of the fiscal year and must be available for expenditures



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

4 (a) The purpose of the work project is to purchase bundles of
5 medical debt on secondary markets or directly from providers to
6 abolish the medical debt for a group or groups of patients.

7 (b) The work project will be accomplished by a national
8 nonprofit organization that is exempt from federal income tax under
9 section 501(c)(3) of the internal revenue code of 1986, 26 USC 501.

10 (c) The estimated cost of the work project is \$100.00.

11 (d) The tentative completion date is September 30, 2029.

12 Sec. 1974. From the funds appropriated in part 1 for mental
13 health educational interventions, the department shall allocate
14 \$1,000,000.00 to a public benefit corporation that is located in a
15 city with a population between 19,000 and 20,000 in a county with a
16 population between 1,200,000 and 1,300,000, according to the most
17 recent federal decennial census, and that provides modern mental
18 health education by purchasing user licenses for a program that
19 provides preventative evidence-based mental health educational
20 interventions for adolescents and their families.

21 Sec. 1976. (1) From the funds appropriated in part 1 for narcotics
22 awareness program, the department shall allocate \$5,000,000.00 to a
23 nonprofit organization organized under the laws of this state that is
24 exempt from federal income tax under section 501(c)(3) of the internal
25 revenue code of 1986, 26 USC 501, and with a headquarters in a charter
26 township with a population between 100,000 and 105,000 in a county with a
27 population between 700,000 and 1,000,000, according to the most recent
28 federal decennial census. To be eligible to receive funding, the nonprofit
29 organization must have a stated mission to offer community-based,



1 compassionate, best-practice/evidence-based services to those suffering
2 from addiction, as well as to their loved ones, and to erase the stigma of
3 addiction and instill compassion and hope.

4 (2) The unexpended funds appropriated in part 1 for narcotics
5 awareness program are designated as a work project appropriation.
6 Unencumbered or unallotted funds shall not lapse at the end of the fiscal
7 year and shall be available for expenditures under this section until the
8 project has been completed. The following are in compliance with section
9 451a of the management and budget act, 1984 PA 431, MCL 18.1451a:

10 (a) The purpose of the work project is to offer community-based,
11 compassionate, best-practice/evidence-based services to those suffering
12 from addiction, as well as to their loved ones, and to erase the stigma of
13 addiction and instill compassion and hope.

14 (b) The work project will be accomplished by a nonprofit
15 organization that is exempt from federal income tax under section
16 501(c)(3) of the internal revenue code of 1986, 26 USC 501.

17 (c) The estimated cost of the work project is \$5,000,000.00.

18 (d) The tentative completion date is September 30, 2029.

19 Sec. 1978. (1) From the funds appropriated in part 1 for
20 Native American health services, the department shall allocate
21 \$1,000,000.00 for a grant to an organization that specializes in
22 American Indian health services and that has a clientele that is
23 comprised of a majority of Medicaid recipients to build a medical,
24 behavioral health, and community wellness center located in a city
25 with a population greater than 600,000 and located in a county with
26 a population greater than 1,500,000 according to the most recent
27 federal decennial census.

28 (2) Before receiving the grant described in subsection (1),
29 the department shall require the grantee to provide periodic



1 updates on the construction of the facility until it is open and
2 operational.

3 (3) Not later than September 30 of the current fiscal year,
4 the department shall report on the updates described in subsection
5 (2) to the standard report recipients.

6 Sec. 1980. (1) From the funds appropriated in part 1 for nurse
7 incentive program, the department shall allocate \$2,500,000.00 to
8 provide loan repayment assistance to eligible nurses who work in
9 state operated and nonstate operated facilities. The department
10 shall provide loan repayment assistance under this section only to
11 a nurse who agrees in writing to repay the loan repayment
12 assistance the nurse receives if the nurse does not maintain
13 employment in a state operated or nonstate operated facility for
14 not less than 4 years.

15 (2) The unexpended funds appropriated in part 1 for nurse
16 incentive program are designated as a work project appropriation,
17 and any unencumbered or unallotted funds shall not lapse at the end
18 of the fiscal year and shall be available for expenditures for
19 projects under this section until the projects have been completed.
20 The following are in compliance with section 451a of the management
21 and budget act, 1984 PA 431, MCL 18.1451a:

22 (a) The purpose of the work project is to expand financial
23 support provided through loan repayment assistance to eligible
24 nurses.

25 (b) The work project will be accomplished by utilizing state
26 employees or contracts.

27 (c) The total estimated cost of the work project is
28 \$2,500,000.00.

29 (d) The tentative completion date is September 30, 2029.



1 Sec. 1982. From the funds appropriated in part 1 for nurse
2 workforce development, the department shall allocate \$10,000,000.00
3 to a 4-year state university located in a county with a population
4 greater than 1,500,000 according to the most recent federal
5 decennial census. Funding must be used to support efforts to
6 increase retention and reduce nurse faculty turnover. Eligible uses
7 for funds under this section include, but are not limited to, the
8 following:

9 (a) Providing salary increases for qualified clinicians
10 serving as clinical educators.

11 (b) Providing tuition support for nurses wishing to pursue a
12 graduate certificate in nursing education.

13 (c) Providing agency incentives for full semester clinical
14 placements.

15 (d) Supporting nurse residency programming.

16 (e) Supporting research designed to develop effective methods
17 to reduce staff turnover.

18 Sec. 1984. From the funds appropriated in part 1 for patient-
19 centered medical home, the department shall allocate \$1,000,000.00
20 to a nonprofit organization that is organized under the laws of
21 this state, is exempt from federal income tax under section
22 501(c)(3) of the internal revenue code of 1986, 26 USC 501, is
23 located in a city with a population between 9,500 and 10,500 in a
24 county with a population between 170,000 and 180,000, according to
25 the most recent federal decennial census, and that provides
26 medical, pharmaceutical, dental, obstetrical, and mental health
27 services to economically disadvantaged individuals to build a
28 comprehensive health clinic.

29 Sec. 1986. From the funds appropriated on part 1 for pediatric



1 lead testing pilot, the department shall allocate \$1,000,000.00 to a
2 toxicology laboratory located in a county with a population between
3 260,000 and 262,000. Funds must be used to establish a pediatric oral
4 fluid lead testing pilot.

5 Sec. 1988. From the funds appropriated in part 1 for pediatric
6 psychiatric urgent care center, the department shall allocate
7 \$5,000,000.00 to a nonprofit organization organized under the laws
8 of this state that is exempt from federal income tax under section
9 501(c)(3) of the internal revenue code of 1986, 26 USC 501, that
10 was founded in 1910, and that offers a full continuum of behavioral
11 health services, including psychiatric urgent care; inpatient and
12 partial hospitalization; residential, outpatient, and teletherapy
13 services; addiction treatment and recovery; extensive child and
14 adolescent programs; senior care services; and specialized
15 assessment and treatment clinics. The funds allocated under this
16 section must be used to open a pediatric psychiatric urgent care
17 center to provide all of the following:

- 18 (a) Psychiatric assessments.
19 (b) Referrals into inpatient and other services.
20 (c) Prescriptions.
21 (d) Aftercare planning, workforce development, and telehealth
22 technology improvements.

23 Sec. 1990. (1) From the funds appropriated in part 1 for
24 permanent supportive housing, the department shall allocate \$100.00
25 to expand supportive housing services. Organizations that received
26 funding under section 1983 of article 6 of 2023 PA 166 shall be
27 eligible to apply for and receive funding under this section. The
28 funds must prioritize people living in supportive housing who need
29 additional services to maintain stability and currently homeless



1 individuals moving into supportive housing.

2 (2) From the funds appropriated in this section, 9% must be
3 allocated as grants to organizations providing permanent supportive
4 housing for capacity building necessary to develop and sustain high
5 quality service delivery, and to build administrative capacity to
6 seek Medicaid reimbursement for eligible services.

7 (3) The unexpended funds appropriated in part 1 for permanent
8 supportive housing are designated as a work project appropriation.
9 Unencumbered or unallotted funds shall not lapse at the end of the
10 fiscal year and shall be available for expenditures under this
11 section until the project is completed. The following are in
12 compliance with section 451a of the management and budget act, 1984
13 PA 431, MCL 18.1451a:

14 (a) The purpose of the work project is to provide funding for
15 grants for eligible entities to provide permanent supportive
16 housing services for eligible households.

17 (b) The work project will be accomplished through partnerships
18 with community-based agencies that provide supportive housing
19 services, the Michigan State Housing Development Authority, and
20 local governments.

21 (c) The total estimated cost of the work project is \$100.00.

22 (d) The tentative completion date for the work project is
23 September 30, 2029.

24 Sec. 1992. (1) From the funds appropriated in part 1 for
25 preweatherization services, the department shall allocate
26 \$10,000,000.00 to support preweatherization efforts to reduce
27 energy costs for low-income families.

28 (2) The unexpended funds appropriated in part 1 for
29 preweatherization services are designated as a work project



1 appropriation. Unencumbered or unallotted funds shall not lapse at the end
2 of the fiscal year and shall be available for expenditures under this
3 section until the project has been completed. The following are in
4 compliance with section 451a(1) of the management and budget act, 1984 PA
5 431, MCL 18.1451a:

6 (a) The purpose of the work project is to reduce energy costs
7 for low-income families, particularly for the elderly, people with
8 disabilities, and children, while ensuring their health and safety.

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 \$10,000,000.00.

13 (d) The tentative completion date is September 30, 2029.

14 Sec. 1994. From the funds appropriated on part 1 for sexual
15 assault and domestic violence prevention services, the department
16 shall allocate \$3,500,000.00 to supplement the loss of federal
17 victims of crime act and state crime victim rights funding. The
18 department must distribute these the funds consistent with the
19 regular allocation formula for crime victim justice grants and
20 crime victim rights services grants.

21 Sec. 1996. From the funds appropriated in part 1 for sickle
22 cell center, the department shall allocate \$2,500,000.00 to the
23 Sickle Cell Disease Association of America for the Sickle Cell
24 Center of Excellence.

25 Sec. 1998. From the funds appropriated in part 1 for suicide
26 loss survivor program, the department shall allocate \$250,000.00 to
27 a nonprofit organization organized under the laws of this state
28 that is exempt from federal income tax under section 501(c)(3) of
29 the internal revenue code of 1986, 26 USC, and is located in a city



1 with a population that is greater than 600,000 that is located in a county
2 with a population greater than 1,700,000, according to the most recent
3 federal decennial census. Funds shall be used to support the suicide loss
4 survivor program.

5 Sec. 2000. The funds appropriated in part 1 for state
6 employees' retirement system implementation costs must be expended
7 by the department to cover additional pension-related costs if the
8 following bills of the 102nd Legislature are enacted into law:

9 (a) House Bill No. 4665.

10 (b) House Bill No. 4666.

11 (c) House Bill No. 4667.

12 Sec. 2002. From the funds appropriated in part 1 for
13 supportive home visitation, the department shall allocate
14 \$1,000,000.00 to a nonprofit organization organized under the laws
15 of this state that is exempt from federal income tax under section
16 501(c)(3) of the internal revenue code of 1986, 26 USC 501, and
17 that is located in a county with a population between 260,000 and
18 262,000, according to the most recent federal decennial census.
19 Funds under this section must be used to support women and infants
20 through a home visitation program designed to improve parenting
21 skills.

22 Sec. 2004. From the funds appropriated in part 1 for
23 transitional housing, the department shall allocate \$1,750,000.00
24 to a nonprofit organization organized under the laws of this state
25 that is exempt from federal income tax under section 501(c)(3) of
26 the internal revenue code of 1986, 26 USC 501, and that is located
27 in a city with a population between 109,000 and 110,000 in a county
28 with a population between 1,700,000 and 1,800,000, according to the
29 most recent federal decennial census. Funds under this section must



1 be used to renovate and establish transitional housing for domestic abuse
2 survivors and their families. To be eligible for funds under this section,
3 an organization must have current experience providing support to
4 vulnerable and underserved communities through a teaching community model.

5 Sec. 2006. From the funds appropriated in part 1 for tribal
6 homeless shelter operations, the department shall allocate
7 \$750,000.00 to support a tribal homeless shelter in a county with a
8 population between 36,500 and 36,800 according to the most recent
9 federal decennial census. Funds under this section must be used to
10 support shelter services provided to tribal members.

11 Sec. 2008. From the funds appropriated in part 1 for water
12 affordability, the department shall allocate \$10,000,000.00 to
13 support water affordability efforts. Eligible uses for funds
14 include, but are not limited to, erasing water arrearages for
15 eligible residents at risk of having their water shut off and
16 subsidizing water affordability programs.

17

