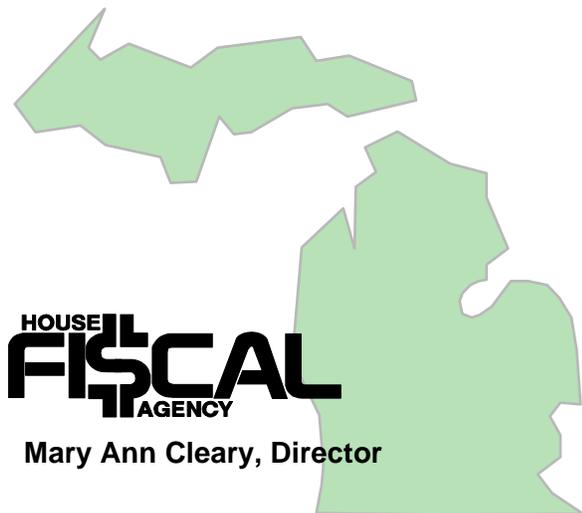


# LINE ITEM AND BOILERPLATE SUMMARY

## COMMUNITY HEALTH

Fiscal Year 2013-14  
Article IV, Public Act 59 of 2013  
House Bill 4328 as Enacted



Prepared and Compiled by:

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September 2013

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**Jase Bolger**

**Jim Stamas**

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September 2013

TO: Members of the Michigan House of Representatives

The House Fiscal Agency has prepared a **Line Item Summary** for each of the FY 2013-14 appropriation acts. Each **Summary** contains line-by-line appropriation and revenue source detail, and a brief explanation of each boilerplate section in the appropriation bill.

In this report, line item vetoes are presented in the following manner: appropriation amounts shown in ~~strikeout~~ are those that appear in the enrolled bill; amounts shown directly below ~~strikeout~~ amounts reflect the effect of the veto.

Line Item Summaries are available on the HFA website ([www.house.mi.gov/hfa](http://www.house.mi.gov/hfa)), or from Kathryn Bateson, Administrative Assistant (373-8080 or [kbateson@house.mi.gov](mailto:kbateson@house.mi.gov)).

A handwritten signature in black ink that reads "Mary Ann Cleary".

Mary Ann Cleary, Director



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# GLOSSARY

## STATE BUDGET TERMS

**Gross Appropriations (Gross):** The total of all applicable appropriations (statutory spending authorizations) in a budget bill.

**Adjusted Gross Appropriations (Adjusted Gross):** The net amount of all gross appropriations after subtracting interdepartmental grants (IDGs) and intradepartmental transfers (IDTs).

**Lapses:** Appropriation amounts that are unspent/unobligated at the end of a fiscal year. Appropriations are automatically terminated at the end of a fiscal year unless otherwise provided by law.

**Work Project:** A statutorily-authorized account which allows a spending authorization to be carried over from one fiscal year to a succeeding fiscal year or years—i.e., allows funds to be spent over a period of years.

## APPROPRIATION BILL TERMS

**Line Item:** Specific funding amount in an appropriation bill which establishes spending authorization for a particular program or function (may be for a single purpose or for multiple purposes).

**Boilerplate:** Specific language sections in an appropriation bill which direct, limit or restrict line item expenditures, express legislative intent, and/or require reports.

## REVENUE SOURCES

**General Fund/General Purpose (GF/GP):** Unrestricted General Fund revenue available to fund any activity accounted for in the General Fund; unused GF/GP revenue lapses to the General Fund at the end of a fiscal year.

**State Restricted (Restricted):** State revenue restricted by state law or outside restriction that is available only for specified purposes; at year-end, unused restricted revenue remains in the restricted fund.

**Federal Revenue:** Federal grant or matchable revenue dedicated to specific programs.

**Local Revenue:** Revenue from local units of government.

**Private Revenue:** Revenue from non-government entities: rents, royalties or interest payments, payments from hospitals or individuals, and gifts and bequests.

**Interdepartmental Grant (IDG):** Revenue or funds received by one state department from another state department (usually for a service provided by the receiving department).

**Intradepartmental Transfer (IDT):** Transfers or funds being provided from one appropriation unit to another in the same department.

## MAJOR STATE FUNDS

**Budget Stabilization Fund (BSF):** The countercyclical economic and budget stabilization fund; also known as the "rainy day" fund.

**School Aid Fund (SAF):** A restricted fund; the primary funding source for K-12 schools and Intermediate School Districts (ISDs).

**General Fund:** The General Fund (funded from taxes and other general revenue) is used to account for the ordinary operations of a governmental unit that are not accounted for in another fund.



## DEPARTMENT OF COMMUNITY HEALTH

*The Department of Community Health (DCH) is responsible for the development of health policy and management of Michigan's publicly-funded health care service systems.*

*The Department's Medical Services Administration provides health care coverage for low income persons throughout the state who meet the eligibility requirements for Medicaid, MICHild, and indigent care programs.*

*The vision of the Behavioral Health and Developmental Disabilities Administration is that all people in Michigan will have access to a public mental health and substance abuse services system that supports individuals with mental illness, emotional disturbance, developmental disabilities, and substance use disorders. The mission of this Administration is to provide leadership by establishing, articulating, and implementing policies, standards, and practices that assure high quality, effective and efficient services and supports.*

*The Public Health Administration protects and promotes the public health. The Department's commitment is to prevent and control infectious and chronic disease, injury, and environmental health hazards, and to reduce and eliminate health disparities in vulnerable populations.*

*The Office of Services to the Aging promotes independence and enhances the dignity of Michigan's older persons and their families through supportive programs, services, policies and advocacy.*

*The Crime Victim Services Commission protects and enhances the health, safety, dignity and rights of victims of crime through programs and grants for services, support and victim compensation.*

*The Department was established by Executive Order in 1996, consolidating the former Departments of Mental Health and Public Health with the Medicaid program. In 1997, the Adult Home Help Program, Social Services to the Physically Disabled Program, Office of Services to the Aging, and Crime Victim Services Commission were transferred to DCH from other departments. The following agencies were once part of DCH but have been transferred to other departments or abolished: Bureau of Health Professions, Controlled Substances Advisory Commission, and the Office of Drug Control Policy (abolished).*

Full-time equated unclassified positions	6.0	Full-time equated (FTE) positions not in the state classified service.
Full-time equated classified positions	3,585.6	Full-time equated (FTE) positions in the state classified service.
Average population	893.0	Average number of patients at four state-operated psychiatric hospitals, and the Forensic Center.
<b>GROSS APPROPRIATION \$15,385,348,600 Total of all applicable line item appropriations.</b>		
Total interdepartmental grants/intradepartmental transfers	10,056,100	Total of all funds received from other departments and transfer of funds.
<b>ADJUSTED GROSS APPROPRIATION</b>	<b>\$15,375,292,500</b>	<b>Total net amount of all line item gross appropriations less (or minus) interdepartmental grants (IDGs) and intradepartmental transfers (IDTs).</b>
Total federal revenues	9,896,101,600	Total federal grant or matchable revenue.
Social security act, temporary assistance for needy families	19,545,400	Total federal temporary assistance for needy families (TANF) grant revenue.
Total local revenues	251,820,200	Total revenue from local units of government.

Total private revenues	126,342,400	Total private grant revenue.
Merit award trust fund	85,834,700	Total Merit Award Trust Fund revenue from the 1998 master settlement agreement with tobacco companies.
Total other state restricted revenues	2,079,601,100	State revenue dedicated to a specific fund (other than the General Fund); or revenue earmarked for a specific purpose.
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$2,916,047,100</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>
		GF/GP Subtotals: Ongoing 2,904,972,100 One-time 11,075,000

## SECTION 102: DEPARTMENTWIDE ADMINISTRATION

*This appropriation unit contains funding for the centralized administrative functions of DCH and Michigan Developmental Disabilities Council.*

Full-time equated unclassified positions	6.0	Full-time equated (FTE) positions not in the state classified service.
Full-time equated classified positions	186.7	Full-time equated (FTE) positions in the state classified service.
Director and other unclassified – 6.0 FTE positions	\$707,000	Salaries of Director and five other unclassified positions; does not include fringe benefits. Funding Source(s): GF/GP 707,000 <i>Related Boilerplate Section(s): None</i>
Departmental administration and management – 176.7 FTE positions	26,250,700	Funds administrative staff carrying out powers and duties of DCH: includes FTEs in the Director's Office, Communications Office, Governmental Affairs Office, Transformation Office, Budget Division, Accounting Division, Medicaid, Mental Health and MAIN Support Division, Office of Audit, and the Grants and Purchasing Division including Infrastructure Services; funds various contracts and fringe benefits for unclassified FTE positions. Funding Source(s): Federal 9,946,700 Restricted 664,300 GF/GP 15,639,700 <i>Related Boilerplate Section(s): None</i>
Worker's compensation program	6,963,000	Central funding source for worker's compensation claims against DCH; funds wage, salary, and related fringe benefits for employees who return to work under limited duty assignments. Funding Source(s): GF/GP 6,963,000 <i>Related Boilerplate Section(s): None</i>
Rent and building occupancy	9,791,300	Payments for rental space in privately-owned buildings statewide (Chandler Building, Mercantile Building, Capitol Commons, Washington Square, and Capitol View Building); payments to DTMB for rent, security, and operating costs of state-owned buildings. Funding Source(s): Federal 2,225,200 Private 35,200 Restricted 128,400 GF/GP 7,402,500 <i>Related Boilerplate Section(s): None</i>
Developmental disabilities council and projects – 10.0 FTE positions	3,024,700	21-member Council recreated within DCH pursuant to EO 2006-12 and required by federal law, Developmental Disabilities and Assistance Bill of Rights Act of 2000 (P.L. 106-402); funded with federal funds and 25% match at local level; Council charged with advocating and conducting projects on behalf of persons with developmental disabilities, and developing and implementing the State Developmental Disabilities Plan. Funding Source(s): Federal 3,024,700 <i>Related Boilerplate Section(s): None</i>
<b>GROSS APPROPRIATION</b>	<b>\$46,736,700</b>	<b>Total of all applicable line item appropriations.</b>

Total federal revenues	15,196,600	Includes Title XIX of the Social Security Act Medicaid funds, Title XIX of the Social Security Act Medicaid random moment sampling (RMS) cost revenue, Title XXI of the Social Security Act State Children's Health Insurance Program funds, RMS cost revenue, block grant for prevention and treatment of substance abuse, developmental disabilities basic support and advocacy grant, and Women, Infants, and Children (WIC) revenue.
Total private revenues	35,200	Parking fees realized from DCH employees parking at Capitol Commons privately-owned building.
Total other state restricted revenues	792,700	Includes Michigan Health Initiative Fund revenue, newborn screening fees, and certificate of need (CON) fees.
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$30,712,200</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>

## SECTION 103: BEHAVIORAL HEALTH PROGRAM ADMINISTRATION AND SPECIAL PROJECTS

*This appropriation unit contains funding for behavioral health program administration, behavioral health programs such as housing and support services, gambling addiction, and family support subsidy, and Michigan Protection and Advocacy Service, Inc., an agency designated by the Governor, to protect the rights of individuals with mental illness and developmental disabilities.*

Full-time equated classified positions	104.0	Full-time equated (FTE) positions in the state classified service.									
Behavioral health program administration – 103.0 FTE positions	\$19,689,400	Funds staff administering behavioral health programs for DCH such as Deputy Director for Behavioral Health and Developmental Disabilities Administration, Office of Recovery-Oriented Systems of Care, Bureau of State Hospitals and Behavioral Health Administrative Operations, Office of Recipient Rights, and Bureau of Community Based Services; finances behavioral health program administration contracts; manage contracts which provide technical assistance and consultation to, and monitor the quality of care provided by the community mental health services programs (CMHSPs) and department-designed community health entities for substance abuse services; funds to improve mental health and substance abuse service quality for veterans and their families; finances jail diversion programs initiative; private funds for social, emotional, and mental health screening, assessment, referral, and follow-up for Medicaid children who have been recently placed in foster care settings; federal funds to promote community-based systems of care and substance abuse data development, strengthen the substance abuse delivery system, and coordinate mental health, public health, and children's special health care services; federal funds for the enhancement and data sharing on mental and physical health care for individuals served within the public health system; and federal funds to conduct undercover buys, education, sales compliance enforcement, and advertising and labeling inspections of tobacco retailers as part of a statewide effort to reduce youth access to tobacco.									
		Funding Source(s):	<table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-left: 20px;">Federal</td> <td style="text-align: right;">5,497,900</td> </tr> <tr> <td style="padding-left: 20px;">TANF</td> <td style="text-align: right;">180,500</td> </tr> <tr> <td style="padding-left: 20px;">Private</td> <td style="text-align: right;">200,000</td> </tr> <tr> <td style="padding-left: 20px;">GF/GP</td> <td style="text-align: right;">13,811,000</td> </tr> </table>	Federal	5,497,900	TANF	180,500	Private	200,000	GF/GP	13,811,000
Federal	5,497,900										
TANF	180,500										
Private	200,000										
GF/GP	13,811,000										
		<i>Related Boilerplate Section(s): 500</i>									
Gambling addiction – 1.0 FTE position	3,002,800	Education, prevention, research, treatment, and evaluation services related to pathological gambling addictions; toll-free compulsive gambler help-line number; funds FTE who is liaison to the Lottery Bureau.									
		Funding Source(s):	<table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-left: 20px;">Restricted</td> <td style="text-align: right;">3,002,800</td> </tr> </table>	Restricted	3,002,800						
Restricted	3,002,800										
		<i>Related Boilerplate Section(s): None</i>									
Protection and advocacy services support	194,400	Agency, designated by the Governor, with authority to pursue legal, administrative, and other appropriate remedies to protect the rights of persons with mental illness and developmental disabilities, and investigate allegations of abuse or neglect of persons with mental illness and developmental disabilities.									
		Funding Source(s):	<table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-left: 20px;">GF/GP</td> <td style="text-align: right;">194,400</td> </tr> </table>	GF/GP	194,400						
GF/GP	194,400										
		<i>Related Boilerplate Section(s): None</i>									

Community residential and support services	992,100	Finances community residential leases under DCH responsibility; expired lease arrangements transferred to the financial responsibility of CMHSPs. Funding Source(s): Federal 700,000 GF/GP 292,100 <i>Related Boilerplate Section(s): None</i>
Federal and other special projects	3,111,200	Contingency funding authorization for federal grants if they become available and grants to: improve access to health care and other services for individuals with traumatic brain injuries and their families; develop and implement an integrated approach to parent leadership on human services policies; conduct undercover buys, education, sales compliance enforcement, and advertising and labeling inspections of tobacco retailers; coordinate activities related to underage drinking among persons aged 12 to 20, and prescription drug misuse among persons aged 12 to 25. Funding Source(s): Federal 3,111,200 <i>Related Boilerplate Section(s): None</i>
Family support subsidy	19,364,900	Provides \$222.11 monthly payment to an average of 7,095 income-eligible families with a child under age 18 living at home who is severely mentally impaired, severely multiply impaired, or autistic. Funding Source(s): TANF 19,364,900 <i>Related Boilerplate Section(s): None</i>
Housing and support services	11,322,500	Costs and contracts for housing and rental assistance programs for persons with mental illness and disabilities who are homeless or at risk of homelessness, and housing assistance for persons living with AIDS; grant supports contracts for housing assistance to homeless persons who have co-existing disorders of a qualifying mental health disability and substance abuse. Funding Source(s): Federal 10,616,900 GF/GP 705,600 <i>Related Boilerplate Section(s): None</i>
<b>GROSS APPROPRIATION</b>	<b>\$57,677,300</b>	<b>Total of all applicable line item appropriations.</b>
Total federal revenues	19,926,000	Includes oil and gas royalties, Title XIX of the Social Security Act Medicaid funds, block grant for prevention and treatment of substance abuse, projects in assistance for transition from homelessness (PATH), contingency fund authorization for federal grants and the following grants: housing opportunities for persons with AIDS (HOPWA), state data collection synectics annual award, federal Department of Education Early On, Shelter Plus Care, Supportive Housing Program (SHP-PATH), Supportive Housing Program (SHP-CHRONIC), Supportive Housing Program (SHP-Statewide Leasing), fetal alcohol syndrome disease prevention, freedom initiative financial support, parent leadership, state data infrastructure (enhanced information for integrated health project), traumatic brain injury state demonstration program, Federal Drug Administration (FDA) tobacco retail inspection, and new Strategic Prevention Framework Partnership for Success.
Social security act, temporary assistance for needy families	19,545,400	Federal temporary assistance for needy families (TANF) grant funds for the Family Support Subsidy Program.
Total private revenues	200,000	Private funds from the Flinn Family Foundation.
Total other state restricted revenues	3,002,800	Includes lottery funds, horse racing revenue, and casino licensing fees that are deposited in the Compulsive Gaming Prevention Fund that was created in accordance with 1997 PA 70.

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<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$15,003,100</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>
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## SECTION 104: BEHAVIORAL HEALTH SERVICES

*This appropriation unit contains Medicaid and non-Medicaid funding for: 46 community mental health services programs (CMHSPs) which have been established pursuant to the Mental Health Code to provide community-based services and supports for individuals who have a serious mental illness, developmental disability, serious emotional disturbance, or addictive disorder, and 18 prepaid inpatient health plans (PIHPs) established pursuant to the Mental Health Code, Social Welfare Act (MCL 400.109f and 400.109g) and federal Medicaid waiver provisions. Effective January 1, 2014, there will be 10 PIHP regions given the realignment of the PIHP system. The unit also includes funding for mental health services for special populations, federal mental health block grant programs, children's waiver home care program, nursing home PAS/ARR - OBRA, civil service charges, children with serious emotional disturbance waiver program, and department-designated community mental health entities for a continuum of substance abuse prevention, education, and treatment programs.*

Full-time equated classified positions	9.5	Full-time equated (FTE) positions in the state classified service.										
Medicaid mental health services	\$2,152,917,100	<p>Medicaid managed care capitated funds for CMHSPs or PIHPs serving state residents; mental health services provided by CMHSP or PIHP, or contract with public or private agencies.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td>IDG</td> <td style="text-align: right;">2,925,900</td> </tr> <tr> <td>Federal</td> <td style="text-align: right;">1,427,925,600</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">20,492,500</td> </tr> <tr> <td>Local</td> <td style="text-align: right;">25,228,900</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">676,344,200</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 401, 402, 404, 418, 428, 496, 504</i></p>	IDG	2,925,900	Federal	1,427,925,600	Restricted	20,492,500	Local	25,228,900	GF/GP	676,344,200
IDG	2,925,900											
Federal	1,427,925,600											
Restricted	20,492,500											
Local	25,228,900											
GF/GP	676,344,200											
Community mental health non-Medicaid services	283,688,700	<p>Non-Medicaid funds to CMHSPs serving residents of the state's 83 counties who are not covered by Medicaid or who require services that are not benefits under the state Medicaid plan; mental health services provided directly by CMHSP, or by contract with public or private agencies.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td>GF/GP</td> <td style="text-align: right;">283,688,700</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 401, 402, 404, 428, 492, 496</i></p>	GF/GP	283,688,700								
GF/GP	283,688,700											
Medicaid adult benefits waiver	31,989,600	<p>Funds to CMHSPs to provide limited mental health and substance abuse services to an average of 46,900 low-income childless eligible adults; beneficiaries are paid under a prepaid capitation basis with CMHSPs and department-designated community mental health entities for substance abuse services.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td>Federal</td> <td style="text-align: right;">21,215,500</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">10,774,100</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>	Federal	21,215,500	GF/GP	10,774,100						
Federal	21,215,500											
GF/GP	10,774,100											
Mental health services for special populations	8,842,800	<p>Funds to CMHSPs to contract with providers that serve multicultural populations and groups such as Chinese American, Asian American, Hispanics, Arab/Chaldean, and ACCESS; funds to Michigan Inter-Tribal Council, Jewish Federation, Chaldean Community Foundation, Vietnam Veterans, and Hispanic/Latino Commission within the Department of Civil Rights; FY 2012-13 one-time appropriation of \$3.0 million GF/GP is transferred to ongoing appropriation.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td>GF/GP</td> <td style="text-align: right;">8,842,800</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 403</i></p>	GF/GP	8,842,800								
GF/GP	8,842,800											

Medicaid substance abuse services	46,184,400	Capitated funds for Medicaid substance abuse services managed by PIHPs pursuant to the federal Health Care Financing Administration approval of Michigan's 1915(b) waiver request submitted under 42 USC 1396n. Funding Source(s): Federal 30,629,100 GF/GP 15,555,300 <i>Related Boilerplate Section(s): 402, 404, 410, 418, 428</i>
CMHSP, purchase of state services contracts	137,761,600	Used by CMHSPs to purchase state services for clients in their catchment areas or develop their own community alternatives to utilization of state hospitals. Funding Source(s): GF/GP 137,761,600 <i>Related Boilerplate Section(s): None</i>
Civil service charges	1,499,300	Pays civil service charges authorized by the State Constitution. Funding Source(s): GF/GP 1,499,300 <i>Related Boilerplate Section(s): None</i>
Federal mental health block grant – 2.5 FTE positions	15,440,000	Awards to primarily CMHSPs or PIHPs for community-based services for adults with serious mental illness and children with serious emotional disturbances such as wraparound services, adult dual diagnosis programs, psychosocial rehabilitation programs, and assertive community treatment teams; approximately 2/3 of grant funds for adults with mental illness and 1/3 of grant funds for children with serious emotional disturbance; funds FTEs, contractual services, supplies, travel, and other costs related to administering the federal block grant. Funding Source(s): Federal 15,440,000 <i>Related Boilerplate Section(s): None</i>
State disability assistance program substance abuse services	2,018,800	Supports per diem room and board payments for needy persons 18 years of age or older, emancipated minors, and persons who do not qualify for SSI who reside in substance abuse residential facilities. Funding Source(s): GF/GP 2,018,800 <i>Related Boilerplate Section(s): 282, 406, 408, 410</i>
Community substance abuse prevention, education, and treatment programs	80,093,000	Funds primarily distributed to department-designated community mental health entities for substance abuse services and authorized for services to chemically dependent pregnant women and injecting drug users, and children's access to tobacco; funds Salvation Army Harbor Light program and Odyssey House; federal block grants used to educate and counsel persons on abuse of substances. Funding Source(s): Federal 65,539,600 Restricted 1,784,200 GF/GP 12,769,200 <i>Related Boilerplate Section(s): 282, 407, 408, 410, 412, 497</i>
Children's waiver home care program	21,544,900	Home and community-based services for 469 eligible children with developmental disabilities that enables them to reside at home with their birth or adoptive families, and who would otherwise require institutional care; federal funds reimbursed to CMHSPs for reported allowable administrative costs for waiver program. Funding Source(s): Federal 15,673,000 GF/GP 5,871,900 <i>Related Boilerplate Section(s): None</i>

Nursing home PAS/ARR – OBRA – 7.0 FTE positions	12,252,100	Staff, supplies, related costs, and contracts for implementing the federal mandate addressing inappropriate placement in nursing homes of persons who are mentally ill or developmentally disabled (includes pre-admission screening, assessment of needs for individuals in nursing homes and for active treatment, and alternative services for persons found to be inappropriately placed).
		Funding Source(s): Federal 9,530,400 GF/GP 2,721,700

*Related Boilerplate Section(s): None*

Children with serious emotional disturbance waiver	12,651,000	Implements federally-approved waiver allowing 37 counties and 25 CMHSPs to provide home- and community-based mental health services to 804 eligible children with serious emotional disturbance, including a program with the Department of Human Services that provides services for abused and neglected children.
		Funding Source(s): IDG 3,269,000 Federal 9,372,100 GF/GP 9,900

*Related Boilerplate Section(s): None*

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**GROSS APPROPRIATION \$2,806,883,300 Total of all applicable line item appropriations.**

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Interdepartmental grant from the department of human services	6,194,900	Federal funds from the Department of Human Services for Medicaid mental health services and children with serious emotional disturbance waiver program.
Total federal revenues	1,595,325,300	Includes Title XIX of the Social Security Act Medicaid funds, block grant for community mental health services, and block grant for prevention and treatment of substance abuse.
Total local revenues	25,228,900	Received from CMHSPs.
Total other state restricted revenues	22,276,700	Includes substance abuse licensing fees and fines, and quality assurance assessment program (QAAP) revenue.

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**STATE GENERAL FUND/ GENERAL PURPOSE \$1,157,857,500 The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.**

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## SECTION 105: STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL HEALTH SERVICES

*This appropriation unit contains funding for: one state-operated psychiatric hospital for adults with mental illness and individuals with developmental disabilities; two state-operated psychiatric hospitals for adults with mental illness, one state-operated psychiatric hospital for children and adolescents with mental illness; and the Forensic Center created pursuant to the state's Mental Health Code. This unit also finances costs associated with the operation of state hospitals and centers such as purchase of medical services for residents of hospitals and centers, and special maintenance; and provides funding for federal and private projects.*

Total average population 893.0 Average number of patients at state-operated psychiatric hospitals for adults, children, and adolescents with mental illness and persons with developmental disabilities, and the Forensic Center.

Total full-time equated classified positions 2,130.9 Full-time equated (FTE) positions in the state classified service.

Caro Regional Mental Health Center-psychiatric hospital – adult – 461.3 FTE positions  
*185.0 average population*

\$55,019,700 FTEs, contractual services, supplies, materials, food, drugs, fuel and utilities, travel, and other costs for state-operated psychiatric hospital in Caro, Michigan, for adults with mental illness.

	Funding Source(s):		
	Federal		9,414,100
	Local		4,090,400
	CMHSP		37,532,400
	Restricted		3,982,800

*Related Boilerplate Section(s): 605, 606, 608*

Kalamazoo Psychiatric Hospital – adult – 466.1 FTE positions  
*189.0 average population*

63,649,300 FTEs, contractual services, supplies, materials, food, drugs, fuel and utilities, travel, and other costs for state-operated psychiatric hospital in Kalamazoo, Michigan, for adults with mental illness and individuals with developmental disabilities.

	Funding Source(s):		
	Federal		2,738,300
	Local		3,785,900
	CMHSP		50,712,200
	Restricted		6,412,900

*Related Boilerplate Section(s): 605, 606, 608*

Walter P. Reuther Psychiatric Hospital – adult – 420.8 FTE positions  
*234.0 average population*

54,087,000 FTEs, contractual services, supplies, materials, food, drugs, fuel and utilities, travel and other costs for state-operated psychiatric hospital in Westland, Michigan, for adults with mental illness.

	Funding Source(s):		
	Federal		2,290,500
	Local		4,695,300
	CMHSP		43,127,100
	Restricted		3,974,100

*Related Boilerplate Section(s): 605, 606, 608*

Hawthorn Center – psychiatric hospital – children and adolescents – 226.4 FTE positions  
*75.0 average population*

28,433,800 FTEs, contractual services, supplies, materials, food, drugs, fuel and utilities, travel and other costs for state-operated psychiatric hospital in Northville, Michigan, for children and adolescents with mental illness.

	Funding Source(s):		
	Federal		19,579,700
	Local		1,588,200
	CMHSP		6,389,900
	Restricted		876,000

*Related Boilerplate Section(s): 605, 606, 608*

Center for forensic psychiatry – 556.3 FTE positions <i>210.0 average population</i>	71,187,800	FTEs, contractual services, supplies, materials, food, drugs, fuel and utilities, travel and other costs for the Forensic Center in Ann Arbor, Michigan, which provides psychiatric treatment for criminal defendants ruled incompetent to stand trial and/or acquitted by reason of insanity, specialized mental health services for transferred prisoners, diagnostic services to the criminal justice system, and examinations conducted by multi-disciplinary teams on an outpatient basis at the Center and other sites. Funding Source(s): Federal 11,700 Local 5,004,000 Restricted 780,500 GF/GP 65,391,600
<i>Related Boilerplate Section(s): 605, 606, 608</i>		
Revenue recapture	750,000	Project generates revenue (from third parties related to closed or inactive cases) for DCH costs and contractual fees associated with retroactive collections and improving ongoing DCH reimbursement management functions. Funding Source(s): Federal 375,000 Restricted 375,000
<i>Related Boilerplate Section(s): 601</i>		
IDEA, federal special education	120,000	Supplements state psychiatric hospital special education programs for persons with mental illness; funds directed toward upgrading computer skills, daily living skills, and academics; allocations based on annual counts of students aged 5 through 26. Funding Source(s): Federal 120,000
<i>Related Boilerplate Section(s): None</i>		
Special maintenance	332,500	Maintenance projects at state hospitals and centers; client-related, administrative, housekeeping, and maintenance equipment needs; maintenance and operation of leased properties. Funding Source(s): Restricted 332,500
<i>Related Boilerplate Section(s): None</i>		
Purchase of medical services for residents of hospitals and centers	445,600	Special, emergency, and other medical-related services rendered off-site for residents of state hospitals and centers without insurance or ability to pay. Funding Source(s): GF/GP 445,600
<i>Related Boilerplate Section(s): None</i>		
Gifts and bequests for patient living and treatment environment	1,000,000	Authority for DCH to accept gifts and bequests for specific enhancements (consistent with donor stipulation) for residents of state-operated facilities. Funding Source(s): Private 1,000,000
<i>Related Boilerplate Section(s): 602</i>		
<b>GROSS APPROPRIATION</b>	<b>\$275,025,700</b>	<b>Total of all applicable line item appropriations.</b>
Total federal revenues	34,529,300	Includes Title XIX of the Social Security Act Medicaid funds, national school lunch program funds, and special education grant as authorized through the Individuals with Disabilities Education Act (IDEA) funds.
CMHSP, purchase of state services contracts	137,761,600	Funds from CMHSPs, as part of authorization process, to offset line item in Behavioral Health Services appropriation unit.
Other local revenues	19,163,800	County match revenue and local school aid funds.
Total private revenues	1,000,000	Patient gifts and bequests.

Total other state restricted revenues	16,733,800	Includes lease/rental revenue, and first and third party reimbursement.
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$65,837,200</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>



<b>GROSS APPROPRIATION</b>	<b>\$21,722,600</b>	<b>Total of all applicable line item appropriations.</b>
Interdepartmental grant from the department of human services	1,199,200	Federal funds granted from Department of Human Services for vital records and central paternity registry access related to Medicaid eligibility determination, paternity, child support cases, and protective services.
Total federal revenues	4,224,400	Social Security Act Title XIX Medicaid funds, preventive health and health services block grant, CDC vital statistics birth records and national death index grants, cancer registry grant, social security birth and death enumeration grants, and minority health state partnership grant.
Total other state restricted revenues	11,970,700	Vital records services fee revenue, vital records data agreement revenue, Michigan Health Initiative Fund revenue from software tax (1987 PA 258), and Healthy Michigan Fund revenue from cigarette tax (3.75% of gross collections).
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$4,328,300</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>

## SECTION 107: HEALTH POLICY

*This appropriation unit provides funding for Emergency Medical Services and Trauma Section, Health Policy Administration, and Nurse Education and Research Program. This unit also provides funding for the Certificate of Need (CON) Program, Rural Health Services, Michigan Essential Health Care Provider Program, and Primary Care Services.*

Full-time equated classified positions	64.8	Full-time equated (FTE) positions in the state classified service.						
Emergency medical services program – 23.0 FTE positions	\$6,187,400	<p>FTEs, related costs, grants, and contracts for the following Emergency Medical Services (EMS) and Trauma Section programs: licensure of over 800 medical first responder and life support operations, 3,300 life support vehicles, and 30,000 EMS personnel, continuing education, agency and vehicle inspections, approval of medical control authorities which provide community based pre-hospital emergency care oversight; and statewide trauma system development. Line item is rolled up and renamed from 2 prior line items, EMS Program State Staff, and EMS Grants and Services. Fee increases and new fees are budgeted for FY 2013-14.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">908,900</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">4,887,800</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">390,700</td> </tr> </table> <p style="text-align: center;"><i>Related Boilerplate Section(s): 704</i></p>	Federal	908,900	Restricted	4,887,800	GF/GP	390,700
Federal	908,900							
Restricted	4,887,800							
GF/GP	390,700							
Health policy administration – 24.1 FTE positions	4,377,600	<p>FTEs, related costs and contracts for the Bureau of Policy and Planning, and the Bureau of Legal and Policy Affairs, Appeals Section, health workforce planning, and pain management projects.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">IDG</td> <td style="text-align: right;">1,296,500</td> </tr> <tr> <td>Federal</td> <td style="text-align: right;">1,043,600</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">2,037,500</td> </tr> </table> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>	IDG	1,296,500	Federal	1,043,600	GF/GP	2,037,500
IDG	1,296,500							
Federal	1,043,600							
GF/GP	2,037,500							
Health innovation grants	1,500,000	<p>New competitive health innovation grants program to address emerging health care and service delivery system issues and needs, and encourage innovative advances and improvements.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">GF/GP</td> <td style="text-align: right;">1,500,000</td> </tr> </table> <p style="text-align: center;"><i>Related Boilerplate Section(s): 717</i></p>	GF/GP	1,500,000				
GF/GP	1,500,000							
Nurse education and research program – 3.0 FTE positions	769,900	<p>FTEs, related costs and contracts to promote safe patient care in all nursing practice environments, advance the safe practice of the nursing profession, assure continuous supply of high-quality direct care nurses, nursing faculty, and nursing education programs; and funding for Chief Nurse Executive.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">IDG</td> <td style="text-align: right;">769,900</td> </tr> </table> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>	IDG	769,900				
IDG	769,900							
Certificate of need program administration – 12.3 FTE positions	2,763,700	<p>FTEs, contractual services, supplies, travel, equipment and other costs to administer health facility Certificate of Need (CON) regulatory program to balance cost, quality, and access issues, and ensure that only needed health services and facilities are developed. Fee increases and new fees are budgeted for FY 2013-14.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">IDG</td> <td style="text-align: right;">114,900</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">2,648,800</td> </tr> </table> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>	IDG	114,900	Restricted	2,648,800		
IDG	114,900							
Restricted	2,648,800							

Rural health services – 1.0 FTE position	1,531,500	FTE costs and contract with Michigan Center for Rural Health at Michigan State University to coordinate, plan, and advocate for improved health care for residents in rural areas through health network and hospital systems, assist small rural hospitals to comply with federal privacy and prospective pay system guidelines, and provide technical assistance to DCH on rural health issues.
		Funding Source(s): Federal 1,380,500 GF/GP 151,000

*Related Boilerplate Section(s): 716*

Michigan essential health provider	2,491,300	Federal program to assist medical, dental and mental health providers who practice in designated medically underserved and health professional shortage areas in the repayment of health education loans; matching funds are provided by state, local or private source; a portion of the state funds supports a reduction from 50% to 25% of the non-federal share of loan repayment costs for primary care physicians, particularly obstetricians and gynecologists.
		Funding Source(s): Federal 1,236,300 Private 255,000 GF/GP 1,000,000

*Related Boilerplate Section(s): 709*

Primary care services – 1.4 FTE positions	3,731,300	FTE costs, contracts, and grants to agencies for primary health care, outreach, and health education services in medically underserved and health professional shortage areas; grants to free health clinics; disproportionate share (DSH) primary care grants; funds for rural primary health care services; and nursing interprofessional collaborative practice project. See also Sec. 121 one-time appropriation for primary care services island health clinics.
		Funding Source(s): Federal 2,594,700 GF/GP 1,136,600

*Related Boilerplate Section(s): 712, 713, 715, 716*

<b>GROSS APPROPRIATION</b>	<b>\$23,352,700</b>	<b>Total of all applicable line item appropriations.</b>
Interdepartmental grant from the department of licensing and regulatory affairs	2,066,400	Grant from Department of Licensing and Regulatory Affairs for costs related to health workforce planning in health policy administration line, and costs for the nurse education and research program line.
Interdepartmental grant from the department of treasury, Michigan state hospital finance authority	114,900	Grant from Department of Treasury, Michigan State Hospital Finance Authority for costs related to certificate of need program.
Total federal revenues	7,164,000	Includes Social Security Act Title XIX Medicaid funds, random moment sampling cost revenue, and the following grants: preventive health and health services block, EMS for children partnership, state rural health flexibility program, state Office of Rural Health, small rural hospital improvement program, state loan repayment program, primary care grant, and nurse education, practice, quality, and retention - interprofessional collaborative practice grant.
Total private revenues	255,000	Revenue from health care employers or other entities making loan repayments on behalf of providers serving in underserved areas.
Total other state restricted revenues	7,536,600	Includes Crime Victim's Rights Fund revenue from fees assessed against convicted criminal defendants, certificate of need fee revenue, and emergency medical services licensure fee revenue.
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$6,215,800</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>

## SECTION 108: INFECTIOUS DISEASE CONTROL

*This appropriation unit provides funding to prevent and control morbidity, disability, and death associated with communicable diseases through assessment, surveillance, intervention, and evaluation.*

Full-time equated classified positions	49.5	Full-time equated (FTE) positions in the state classified service.						
AIDS prevention, testing, and care programs – 15.7 FTE positions	\$69,164,400	<p>FTEs, related costs, laboratory services, contracts, and grants to local health departments and other agencies for: HIV/AIDS counseling, testing, referral, and partner notification; HIV/AIDS education and outreach; HIV/AIDS risk reduction program focusing on at-risk populations through prevention, care, and laboratory testing; HIV/AIDS continuum of care program of health care and support services to families and individuals living with HIV/AIDS, including drug assistance and dental programs; minority AIDS initiative; and expanded HIV testing programs in healthcare settings to address racial and ethnic disparities. Rebate revenue from private pharmaceutical manufacturers supports drug assistance program.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">26,115,600</td> </tr> <tr> <td>Private</td> <td style="text-align: right;">38,278,400</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">4,770,400</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 218, 804</i></p>	Federal	26,115,600	Private	38,278,400	Restricted	4,770,400
Federal	26,115,600							
Private	38,278,400							
Restricted	4,770,400							
Immunization program – 12.8 FTE positions	14,999,000	<p>FTEs, related costs, contracts, and grants to local public health departments, community health centers, and other agencies to administer state immunization program of disease surveillance and disease outbreak control, including immunization clinics, free vaccinations for eligible children, vaccine handling and distribution, statewide Michigan Care Improvement Registry (MCIR) of individual immunization history, outreach and education, perinatal hepatitis B prevention, provider quality assurance, field staff training and technical support, immunization program infrastructure and capacity building, and other projects. Line item is rolled up and renamed from 2 prior line items, Immunization Local Agreements, and Immunization Program Management and Field Support.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">12,092,400</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">850,000</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">2,056,600</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 218</i></p>	Federal	12,092,400	Restricted	850,000	GF/GP	2,056,600
Federal	12,092,400							
Restricted	850,000							
GF/GP	2,056,600							
Pediatric AIDS prevention and control – 1.0 FTE position	1,233,100	<p>FTE, related costs, and contracts to coordinate comprehensive medical care and social support services for HIV-infected infants, children, and their families, including outreach, primary and specialty medical care, psychological services, case management, HIV risk reduction and prevention education, recreation activities, and logistical support for coordination of services.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">1,233,100</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 218</i></p>	Federal	1,233,100				
Federal	1,233,100							

Sexually transmitted disease control program – 20.0 FTE positions	6,213,800	FTEs, related costs, contracts, and grants to monitor and control the occurrence of sexually transmitted diseases (STD), promote prevention and education, provide support for state, local and national STD control goals, and fund primary STD treatment drugs and laboratory services costs. Local grants are targeted to high incidence communities for disease surveillance, investigation, diagnosis, primary treatment, screening, casefinding, prevention, laboratory services, and special projects. Line item is rolled up and renamed from 2 prior line items, STD Control Local Agreements, and STD Control Management and Field Support.
		Funding Source(s):
		Federal
		Restricted
		GF/GP
		3,341,900
		2,076,300
		795,600

*Related Boilerplate Section(s): 218, 1103*

<b>GROSS APPROPRIATION</b>	<b>\$91,610,300</b>	<b>Total of all applicable line item appropriations.</b>
Total federal revenues	42,783,000	Preventive health and health services block grant, maternal and child health services block grant, immunization grant and vaccines for children funds, HIV prevention grant, expanded and integrated HIV testing grant, Ryan White Part B HIV care formula and AIDS drug assistance program grants, sexually transmitted disease control grant, Ryan White Part D pediatric AIDS prevention grant, Ryan White minority AIDS initiative Part B grant, Ryan White Part A supplemental grant, Social Security Act Title XIX Medicaid funds, and immunization capacity building grant.
Total private revenues	38,278,400	Private funds from pharmaceutical manufacturer rebates for AIDS drug assistance program.
Total other state restricted revenues	7,696,700	Michigan Health Initiative Fund revenue from the software tax (1987 PA 258), and Pharmaceutical Products Fund interest income from revenue related to the 1999 sale of Michigan Biologic Products Institute.
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$2,852,200</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>

## SECTION 109: LABORATORY SERVICES

*This appropriation unit provides funding for laboratory diagnostic testing, analytical services, and related functions to detect disease or the source of disease.*

Full-time equated classified positions	100.0	Full-time equated (FTE) positions in the state classified service.
Laboratory services – 100.0 FTE positions	\$18,167,000	FTEs, supplies, travel, equipment, computer, and contracts for laboratory services: tests to identify and monitor infectious disease agents; collect epidemiological and analytical laboratory data to assess human health risks; tests of blood samples of children screened for lead and newborn infants screened for genetic handicapping conditions; tests for environmental risks such as lead in soil and toxins in fish and other food that may be consumed; tests to detect biologic and chemical terrorist agents; biowatch continuous bioterrorism air monitoring coordination; funds for regional and local laboratory services; and test, monitor and evaluate occurrence of drug-resistant staph infections in collaboration with epidemiology staff.
		Funding Source(s):
		IDG 480,700
		Federal 2,271,300
		Restricted 8,728,000
		GF/GP 6,687,000
		<i>Related Boilerplate Section(s): None</i>
<b>GROSS APPROPRIATION</b>	<b>\$18,167,000</b>	<b>Total of all applicable line item appropriations.</b>
Interdepartmental grant from the department of environmental quality	480,700	Grant from the Department of Environmental Quality for costs related to laboratory testing and analysis of Michigan fish for chemical contaminants.
Total federal revenues	2,271,300	Preventive health and health services block grant, tuberculosis control grant, immunization grant, epidemiology and laboratory capacity grant, tuberculosis genotyping grant, enterics research investigational network cooperative research centers grant, food emergency response network grant, and biowatch program grant.
Total other state restricted revenues	8,728,000	Fee revenue collected for laboratory services and for newborn screening services, and Michigan Health Initiative Fund revenue from the software tax (1987 PA 258).
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$6,687,000</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>

## SECTION 110: EPIDEMIOLOGY

*This appropriation unit funds surveillance, assessment, and monitoring of the status of infectious and chronic disease, environmental health, and injury in Michigan as well as conditions that adversely affect maternal and child health. This unit is also responsible for the following: Michigan Fish Advisory, lead abatement, asthma prevention, tuberculosis control, newborn screening, genomics programs, and preparedness for pandemic influenza and for chemical events that threaten human health including bioterrorism.*

Full-time equated classified positions	115.1	Full-time equated (FTE) positions in the state classified service.
AIDS surveillance and prevention program	\$2,254,100	Contractual services for integrated surveillance of statewide HIV and AIDS cases to measure incidence and prevalence of disease, and to develop targeted HIV prevention and intervention programs. Funding Source(s):           Federal           2,254,100  <i>Related Boilerplate Section(s): None</i>
Bioterrorism preparedness – 55.0 FTE positions	35,466,400	FTEs, related costs, and contracts with local health departments, tribal governments, medical control authorities and other agencies for preparedness and response by the public health system, cities, and hospitals to bioterrorism, and other public health threats and emergencies. Public health system preparedness priorities include: medical and pharmaceutical supply stockpile planning, disease and epidemiology surveillance, biological and chemical laboratory capacity, training, communications, Health Alert Network, education, volunteer registry, mass dispensing and vaccination, and dissemination of risk and health information. Hospital preparedness priorities include: pharmaceutical and vaccine supply, quarantine and decontamination facilities, regional capacity and surge planning, and communications. Funding Source(s):           Federal           35,466,400  <i>Related Boilerplate Section(s): None</i>
Epidemiology administration – 41.6 FTE positions	12,257,200	FTEs and related costs to: monitor disease activity, toxins, and environmental conditions in order to detect, prevent, and control risk and spread of communicable and non-communicable disease; coordinate epidemiological investigation, behavioral risk factor survey, Michigan fish consumption advisory, environmental health risk assessment, and pregnancy risk assessment monitoring and surveillance; maintain Michigan Disease Surveillance System, polybrominated biphenyl (PBB) registry, and birth defects registry; evaluate occurrence of drug-resistant staph infections; licensing of body art facilities; develop and implement a climate and health adaptation plan; asthma prevention and control programs; and other projects, including: viral hepatitis prevention initiative; human papillomavirus (HPV) study; birth defects prevention and preconception health behaviors; surveillance data files for university research; precancerous lesion registry and study; reassessment of fish toxins in 9 areas of the state; eat safe fish and game project; development of genetic services pilot for pulse oximetry screening of newborns; STD epidemiological surveillance, and other projects. Funding Source(s):           Federal           9,401,900 Private           161,600 Restricted       680,600 GF/GP           2,013,100  <i>Related Boilerplate Section(s): 650</i>

Healthy homes program – 8.0 FTE positions	4,212,400	FTEs, related costs, and contracts for: lead abatement/safe removal of lead hazards from older homes in areas of the state with high incidence of lead-poisoned children, and local oversight; certification of individuals to perform lead abatement and lead hazard remediation and training; compliance assistance and enforcement; education and outreach; local coalition building and grant writing; Healthy Homes indoor environmental asthma and injury demonstration project in Ingham County; and environmental assessment, asthma trigger reduction and education project in multi-housing properties in Ingham County. Line item is renamed from Lead Abatement Program.
	Funding Source(s):	Federal 2,175,900 Private 76,400 Restricted 710,100 GF/GP 1,250,000

*Related Boilerplate Section(s): 851*

Newborn screening follow-up and treatment services – 10.5 FTE positions	6,026,100	FTEs, related costs, and contracts to screen all newborn infants for hearing impairment and over 50 genetic disorders, and provide follow-up services such as education, diagnosis, counseling, treatment and medical management when a newborn child tests positive; early hearing screening and detection program; and genetic disease program for adults and children. Newborn screening fee is \$103.53 as of October 1, 2013.
	Funding Source(s):	Restricted 6,026,100

*Related Boilerplate Section(s): 218*

Tuberculosis control and prevention	867,000	Funding to local health departments and contractors for prevention and control of tuberculosis, including directly-observed therapy, medication administration, surveillance, and care for certain patients with tuberculosis.
	Funding Source(s):	Federal 867,000

*Related Boilerplate Section(s): 218*

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**GROSS APPROPRIATION      \$61,083,200      Total of all applicable line item appropriations.**

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Total federal revenues	50,165,300	Federal grants for: health risk assessment, HIV/AIDS surveillance, HIV behavioral surveillance, HIV/AIDS morbidity and risk behavior surveillance (medical monitoring), tuberculosis control, epidemiology and laboratory capacity, core occupational safety and health research, hospital preparedness program and public health emergency preparedness aligned cooperative agreement (HPP and PHEP), behavioral risk factor surveillance, asthma, arthritis, birth defects surveillance, genomics and chronic disease prevention, Housing and Urban Development (HUD) lead-based paint hazard control, Environmental Protection Agency (EPA) lead grant for certification of lead-based paint professionals, HUD healthy homes demonstration program, HUD asthma interventions in public and assisted multi-family housing, pregnancy risk assessment monitoring system (PRAMS), adult viral hepatitis prevention coordinator, environmental public health and emergency response (climate and health adaptation plan), biomonitoring of toxic substances in fish eaters, Michigan State Police homeland security, Michigan ECL-1 initiative, Minnesota great lakes healthcare partnership, EPA Michigan fish advisory, EPA eat safe fish and game, hemoglobinopathy surveillance, CDC maternal and child health infertility project, sport-caught fish, genetic services, biosense 2.0, CDC STD epidemiology surveillance, bed bug prevention, transfusion exposure, cancer genomics through University of Michigan (U-M), HIV transmission through U-M, and sickle cell through U-M.
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Total private revenues	238,000	Includes grant from March of Dimes for work related to birth defects and prevention materials on preconception health behaviors, healthy homes grant from Kresge Foundation, and influenza hospitalization surveillance project grant from Council of State and Territorial Epidemiologists.
Total other state restricted revenues	7,416,800	Fee revenue collected from: newborn screening program, lead abatement professional worker certification, body art facility licensure, and surveillance data file research requests; and Michigan Health Initiative Fund revenue from software tax (1987 PA 258).
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$3,263,100</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>



## SECTION 112: CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION

*This appropriation unit provides funding for programs to promote healthy lifestyles, prevent chronic diseases, and reduce injuries and violent behavior statewide and for vulnerable and high-risk populations, to improve the length and quality of life for Michigan residents.*

Full-time equated classified positions	63.3	Full-time equated (FTE) positions in the state classified service.						
Cancer prevention and control program – 11.0 FTE positions	\$14,987,100	<p>FTEs, related costs, and contracts for cancer prevention and control including prevention activities, screening and follow-up services for breast, cervical, ovarian, prostate, and colorectal cancer, public and provider education, early detection awareness, Michigan Cancer Consortium support, heart and chronic disease screening and referrals (WISEWOMAN), federal demonstration project to focus on successful cancer, tobacco, and obesity strategies, and cancer and chronic disease leadership coordination and effectiveness project.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">13,222,600</td> </tr> <tr> <td>Private</td> <td style="text-align: right;">500,000</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">1,264,500</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>	Federal	13,222,600	Private	500,000	GF/GP	1,264,500
Federal	13,222,600							
Private	500,000							
GF/GP	1,264,500							
Chronic disease control and health promotion administration – 29.4 FTE positions	6,273,100	<p>FTEs, related costs, and contracts for the following: division administration and infrastructure for health promotion and chronic disease prevention; chronic disease surveillance activities; collaborative community, school and worksite-based chronic disease, injury, and violence prevention programs including obesity, cardiovascular health, physical fitness, nutrition, arthritis, heart disease and stroke prevention, and health promotion for persons with disabilities; statewide stroke registry for acute care hospitals; and Michigan nutrition network projects in schools and communities.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">5,240,800</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">532,900</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">499,400</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>	Federal	5,240,800	Restricted	532,900	GF/GP	499,400
Federal	5,240,800							
Restricted	532,900							
GF/GP	499,400							
Diabetes and kidney program – 8.0 FTE positions	1,885,600	<p>FTEs, related costs, and contracts for diabetes prevention, education, control, and outreach projects; grants to regions and communities with a high incidence of diabetes; and funds for kidney disease prevention programs and for implementation of the State Chronic Kidney Disease Strategic Plan.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">1,690,100</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">195,500</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>	Federal	1,690,100	Restricted	195,500		
Federal	1,690,100							
Restricted	195,500							
Injury control intervention project	1,450,000	<p>Funding to support use of traumatic brain injury treatment interactive software at 4 trauma hospitals, and for public health traumatic brain injury treatment services programming.</p> <p style="text-align: right;">Funding Source(s):</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">100,000</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">1,350,000</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>	Federal	100,000	GF/GP	1,350,000		
Federal	100,000							
GF/GP	1,350,000							

Smoking prevention program – 12.0 FTE positions	2,576,800	FTEs, related costs, and contracts for smoking prevention and cessation programs including: smoking cessation hotline; free nicotine Quit Kits, nicotine replacement therapy, materials, and up to five cessation counseling sessions; local projects of schools and communities; smoke-free initiatives for hospitals, apartments and other environments; and enforcement of Clean Indoor Air Act. Funding Source(s): Federal 2,576,800 <i>Related Boilerplate Section(s): None</i>
Violence prevention – 2.9 FTE positions	2,170,600	FTEs, related costs and contractual services for: sexual violence prevention including rape and sexual assault primary prevention and education programs; youth suicide primary prevention and early intervention programs, training, infrastructure, and awareness; and violent death statewide surveillance and reporting system. Funding Source(s): Federal 2,170,600 <i>Related Boilerplate Section(s): None</i>
<b>GROSS APPROPRIATION</b>	<b>\$29,343,200</b>	<b>Total of all applicable line item appropriations.</b>
Total federal revenues	25,000,900	Includes the following grants: preventive health and health services block, breast and cervical cancer early detection program, comprehensive cancer control, Social Security Act Title XIX Medicaid, diabetes control, colorectal cancer, arthritis, tobacco use prevention, tobacco quitline, well integrated screening and evaluation for women across the nation (WISEWOMAN), rape prevention and education, obesity, youth suicide prevention and early intervention, health promotion for persons with disabilities, stroke registry and quality improvement, heart disease and stroke prevention, Michigan nutrition network - shaping positive lifestyles and attitudes through school health, Michigan nutrition network - nutrition and physical activity education, violent death reporting system, investigations and technical assistance for demonstrating the capacity of comprehensive cancer control programs, coordinated chronic disease prevention and health promotion, and program management leadership and cancer coordination.
Total private revenues	500,000	Private funds from Karmanos Cancer Institute in Detroit for cancer screenings.
Total other state restricted revenues	728,400	Michigan Health Initiative Fund revenue from software tax (1987 PA 258).
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$3,113,900</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>



Family planning local agreements	9,085,700	Grants to local health departments and agencies for the following family planning services: reproductive health assessment, comprehensive contraceptive services, health education, counseling, referral; and funding for special projects including training, and sexually transmitted disease testing and education. Funding Source(s): Federal 8,805,900 GF/GP 279,800
<i>Related Boilerplate Section(s): 1103, 1104, 1106, 1119, 1138</i>		
Local MCH services	7,018,100	Maternal and child health grants to local health departments on a per capita basis for locally-identified needs including prenatal care, immunizations, and well-child services; and grants to agencies for programs to address high infant mortality, including fetal infant mortality review. Funding Source(s): Federal 7,018,100
<i>Related Boilerplate Section(s): 1103, 1104</i>		
Pregnancy prevention program	602,100	Grants to local health departments and other agencies for family planning and primary pregnancy prevention programs, services, and special projects, including expanded programming beyond the federal Title X family planning program. Funding Source(s): Federal 602,100
<i>Related Boilerplate Section(s): 1103, 1104, 1108, 1119, 1138</i>		
Prenatal care outreach and service delivery support – 4.0 FTE positions	11,301,400	FTEs, related costs, grants and contracts for prenatal programs including: grants to local health departments and other agencies for local nurse family partnership prenatal support services serving first-time low-income pregnant women and teenagers in communities with high infant mortality rates including federal Medicaid matching funds on state and local funding, evidence-based maternal, infant, and early childhood home visiting program for families in at-risk communities and statewide coordination, implement August 2012 infant mortality reduction plan, promote regional perinatal care system, improve health of women of childbearing age, encourage infant safe sleep practices, alternative pregnancy and parenting support pilot program, and enhanced support for evidence-based infant mortality programs including client and provider recruitment and strategic planning. Funding Source(s): Federal 6,601,400 GF/GP 4,700,000
<i>Related Boilerplate Section(s): 218, 1103, 1104, 1136, 1137</i>		
Special projects – 2.5 FTE positions	7,927,700	FTEs, related costs, grants and contracts for maternal and child health special projects including: maternal mortality study, safe delivery of newborns hotline, comprehensive early childhood system planning and local collaborative development, fetal alcohol spectrum disorders program, prenatal care and infant mortality programs, prenatal smoking cessation, infant safe sleep, birth through age 8 child wellness Project LAUNCH program, sexual abstinence and contraception education and personal responsibility programs for targeted populations with high teen birth rates, funding for Eastern Michigan University Autism Collaborative Center (see also Sec. 121 one-time appropriation for university autism centers and services and Sec. 1902 boilerplate), and other projects. Funding Source(s): Federal 7,209,800 GF/GP 717,900
<i>Related Boilerplate Section(s): 1103</i>		

Sudden infant death syndrome program	321,300	Autopsies, grief counseling, follow-up and referral services for parents who have lost a child to sudden infant death syndrome; infant safe sleep and risk reduction education for the public and for health care and child care providers; and reporting and surveillance.
		Funding Source(s): Federal 321,300

*Related Boilerplate Section(s): None*

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**GROSS APPROPRIATION      \$46,539,500      Total of all applicable line item appropriations.**

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Total federal revenues	36,619,400	Includes the following federal grants: preventive health and health services block, maternal and child health services block, Social Security Act Title XIX Medicaid, Public Health Service Act Title X family planning, early-on for infants and families with disabilities Part C, oral disease prevention, universal newborn hearing screening, early hearing detection and intervention, special projects of regional and national significance (SPRANS) - state systems development initiative (SSDI), comprehensive school health education, early childhood comprehensive systems, project LAUNCH - linking actions for unmet needs in children's health, abstinence education, personal responsibility education program, healthy homes and lead poisoning prevention program, oral health workforce activities, and Patient Protection and Affordable Care Act maternal, infant, and early childhood home visiting program grant.
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Total local revenues	75,000	Local school district funds originated from the state School Aid Fund, to support teen health centers; here used for related local administrative services.
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Total private revenues	874,500	Private funding from: Delta Dental Foundation for dental sealant services, fluoridation equipment, and infant oral health programs, and W. K. Kellogg Foundation to address social determinants of racial disparities in infant mortality.
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**STATE GENERAL FUND/  
GENERAL PURPOSE      \$8,970,600      The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.**

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**SECTION 114: WOMEN, INFANTS, AND CHILDREN  
FOOD AND NUTRITION PROGRAM**

*This appropriation unit provides funding for special supplemental nutritious foods, nutrition education, breast feeding education and support, and referrals for health care to low-income pregnant, breastfeeding and postpartum women, and infants and children to age five determined to be at nutritional risk.*

Full-time equated classified positions	45.0	Full-time equated (FTE) positions in the state classified service
Women, infants, and children program administration and special projects – 45.0 FTE positions	\$17,832,600	FTEs, related costs, grants and contracts to administer federal Women, Infants, and Children (WIC) Special Supplemental Food and Nutrition Programs and special projects: WIC Project FRESH farmer's market nutrition program, WIC breastfeeding peer counseling, breastfeeding support services, local agency infrastructure support, summer meal program for children, and independent validation and verification consulting. Funding Source(s): Federal 17,528,300 Private 304,300  <i>Related Boilerplate Section(s): None</i>
Women, infants, and children program local agreements and food costs	256,285,000	Federal program of funding for grants to local public health departments and other agencies to provide supplemental nutritious food, infant formula, and counseling and education on nutrition, health, and breast-feeding to at-risk pregnant women and new mothers, infants, and children up to age five; referrals to health care and other services, local program administration and training, and local enrollment of participants. Rebate funds from infant formula manufacturers support food costs per federal program regulations. Participation in FY 2011-12 averaged 256,000, an increase from 252,700 in FY 2010-11. Funding Source(s): Federal 195,511,400 Private 60,773,600  <i>Related Boilerplate Section(s): None</i>
<b>GROSS APPROPRIATION</b>	<b>\$274,117,600</b>	<b>Total of all applicable line item appropriations.</b>
Total federal revenues	213,039,700	Includes the following grants: WIC special supplemental nutrition program for food and administration, WIC farmer's market nutrition program, breastfeeding peer counseling, summer electronic benefit transfer for children.
Total private revenues	61,077,900	Rebates from infant formula manufacturers for WIC program, and revenue from private companies and foundations related to WIC farmer's market nutrition programs.
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$0</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>

## SECTION 115: CHILDREN'S SPECIAL HEALTH CARE SERVICES

*This appropriation unit funds medical care provided through the Children's Special Health Care Services program (CSHCS) and for related administrative functions. The program pays for health services primarily to children under 21 years of age with certain chronic medical conditions that require specialty care.*

Full-time equated classified positions	46.8	Full-time equated (FTE) positions in the state classified service.
Children's special health care services administration – 44.0 FTE positions	\$5,506,600	Staffing, contractual services, supplies, and other administrative costs for the Children's Special Health Care Services Division. The division includes three sections: Policy and Program Development, Quality and Program Services, and Customer Support. The division also oversees the Family Center for Children and Youth with Special Health Care Needs, a parent-directed initiative which helps advise CSHCS policies and procedures, and provides staff to administer the Children with Special Needs Fund. <div style="text-align: right; margin-left: 20px;">                     Funding Source(s):      Federal      2,629,700                         Restricted      100,900                         GF/GP      2,776,000                 </div>
<i>Related Boilerplate Section(s): 1204,1205</i>		
Bequests for care and services – 2.8 FTE positions	1,524,100	Payment for services not covered by Medicaid or CSHCS such as wheelchair ramps and van lifts; supports Parent Participation Program with monies from Trust Fund for Children with Special Health Care Needs. <div style="text-align: right; margin-left: 20px;">                     Funding Source(s):      Federal      104,600                         Private      1,005,900                         Restricted      413,600                 </div>
<i>Related Boilerplate Section(s): None</i>		
Outreach and advocacy	5,510,000	Grants to local health departments to identify and enroll children in the program; and case management and care coordination services. <div style="text-align: right; margin-left: 20px;">                     Funding Source(s):      Federal      2,755,000                         GF/GP      2,755,000                 </div>
<i>Related Boilerplate Section(s): None</i>		
Nonemergency medical transportation	1,505,900	Transportation costs for CSHCS eligible families eligible who also have Medicaid coverage (below 200% of poverty level) in need of assistance to access health care services. <div style="text-align: right; margin-left: 20px;">                     Funding Source(s):      Federal      100,000                         GF/GP      1,405,900                 </div>
<i>Related Boilerplate Section(s): 1861</i>		
Medical care and treatment	147,545,600	Reimburses hospitals, physicians, pharmacies, and other health care professionals providing medical services to CSHCS eligible persons. <div style="text-align: right; margin-left: 20px;">                     Funding Source(s):      Federal      66,043,500                         Restricted      3,340,100                         GF/GP      78,162,000                 </div>
<i>Related Boilerplate Section(s): 1202</i>		
<b>GROSS APPROPRIATION</b>	<b>\$161,592,200</b>	<b>Total of all applicable line item appropriations.</b>
Total federal revenues	71,632,800	Maternal and child health block grant, Title XIX Medicaid funds, and Title V sec. 501(a)(2) integrated community services systems funds.
Total private revenues	1,005,900	Individual and corporate donations, and interest on those donations.

Total other state restricted revenues	3,854,600	Funds from parent pay agreements and fees associated with CSHCS programs.
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$85,098,900</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>

## SECTION 116: CRIME VICTIM SERVICES COMMISSION

*This appropriation unit provides funding for the Crime Victim Services Commission and victim programs. The Commission oversees grants, services, support, and compensation for victims of crime to protect and enhance victim health, safety, dignity and rights. The five-member Commission is appointed by the Governor.*

Full-time equated classified positions	13.0	Full-time equated (FTE) positions in the state classified service.
Grants administration services – 13.0 FTE positions	\$2,099,100	<p>FTEs, related costs, and contracts to manage crime victim service programs and grants, provide public awareness, outreach, and publications for crime victims, and administer statewide automated Michigan Crime Victim Notification Network (MCVNN) using the VINE (Victim Information and Notification Everyday) application system.</p> <p style="text-align: right;">Funding Source(s):      Federal      618,700  <span style="margin-left: 150px;">Restricted      1,480,400</span></p> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>
Justice assistance grants	19,106,100	<p>Grants to public and private non-profit agencies for direct services to crime victims including crisis counseling, personal and legal advocacy, therapy, shelter, and referral, with priority to victims of sexual assault, spousal abuse, child abuse, and underserved victims such as survivors of homicide and drunk driving.</p> <p style="text-align: right;">Funding Source(s):      Federal      19,106,100</p> <p style="text-align: center;"><i>Related Boilerplate Section(s): 1302</i></p>
Crime victim rights services grants	16,570,000	<p>Funding for: compensation as payor of last resort to crime victims who suffer bodily injury for medical expenses, counseling, burial assistance, and loss of earnings caused by the injury; reimbursement to health care providers for victim forensic exams related to sexual assault (SAFE response); training for local prosecutors, law enforcement, sheriffs, courts, jails, and other agencies to notify, inform, consult, and protect victims of crime as required by statute including victim advocate programs in county prosecutor offices; and the Crime Victim Notification Network connecting prosecutors' offices with jails to inform crime victims of perpetrator status changes and court dates.</p> <p style="text-align: right;">Funding Source(s):      Federal      3,770,000  <span style="margin-left: 150px;">Restricted      12,800,000</span></p> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>
<b>GROSS APPROPRIATION</b>	<b>\$37,775,200</b>	<b>Total of all applicable line item appropriations</b>
Total federal revenues	23,494,800	Victims of Crime Act justice assistance grant, and Victims of Crime Act victim compensation grant.
Total other state restricted revenues	14,280,400	Crime Victim's Rights Fund revenue from fees assessed against convicted criminal defendants.
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$0</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>

## SECTION 117: OFFICE OF SERVICES TO THE AGING

*This appropriation unit provides funding for the Office of Services to the Aging to provide supportive community-based and in-home programs, services, policies and advocacy for Michigan's older persons and their families. The fifteen-member Commission on Services to the Aging is appointed by the Governor. The Office of Services to the Aging is a state Type I agency, as defined in Act 380 of the Public Acts of 1965.*

Full-time equated classified positions	40.0	Full-time (FTE) equated positions in the state classified service.									
Office of services to aging administration – 40.0 FTE positions	\$6,389,200	<p>FTEs, related costs, and contracts to develop and administer services for Michigan's older citizens pursuant to State Plan and federal and state law; also funding for Kinship Care Center, state long term care ombudsman, state planning for long-term care supports and services, quality assurance reviews of publicly funded long-term care programs, and development of Aging and Disability Resource Center partnerships.</p> <table style="margin-left: 40px;"> <tr> <td style="padding-left: 20px;">Funding Source(s):</td> <td style="padding-left: 20px;">Federal</td> <td style="text-align: right;">3,916,700</td> </tr> <tr> <td></td> <td style="padding-left: 20px;">Private</td> <td style="text-align: right;">177,500</td> </tr> <tr> <td></td> <td style="padding-left: 20px;">GF/GP</td> <td style="text-align: right;">2,295,000</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 282, 1417</i></p>	Funding Source(s):	Federal	3,916,700		Private	177,500		GF/GP	2,295,000
Funding Source(s):	Federal	3,916,700									
	Private	177,500									
	GF/GP	2,295,000									
Community services	36,614,400	<p>Grants to regional Area Agencies on Aging for the following programs:</p> <p><u>Access to Local Services</u>: information assistance, outreach, case coordination, transportation.</p> <p><u>Alternative Care Services</u>: in-home services, adult day care.</p> <p><u>Care Management Services</u>: plan and manage various services to allow frail elderly to live independently at home.</p> <p><u>Community Services</u>: health education and wellness, health screening, counseling, legal assistance, senior citizen center support, and home repair.</p> <p><u>Elder Abuse Prevention and Treatment</u>: education and training coordination in collaboration with local and statewide organizations; strengthen legal system and community services for victims of violence against women.</p> <p><u>In-Home Services</u>: personal care, and homemaker, chore, and home health aide services for frail elderly who have no support network.</p> <p><u>Long Term Care Ombudsman</u>: local advocacy and education services for long-term care facility residents and their family members.</p> <p><u>Medicare/Medicaid Assistance and Medicare Improvement Programs</u>: outreach, health benefits counseling and assistance for seniors with Medicare and Medicaid; and improvements in outreach to low-income seniors who are Medicare beneficiaries.</p> <p><u>National Family Caregiver Support Program</u>: information, assistance, counseling and support, caregiver training, respite care, and supplemental services for informal caregivers.</p> <p><u>Preventive Health Services</u>: health promotion and disease prevention services, disease self-management programs, and nutrition education.</p> <p><u>Evidence-Based Prevention Program</u>: pilot program for balance, fitness and chronic disease self-management programs for seniors.</p> <p><u>Alzheimer's and Dementia Program</u> for caregivers, and for caregivers of veterans.</p> <p style="text-align: center;">(Community services continued on next page)</p>									

(Community services)

(Continued from previous page)

Aging and Disability Resource Centers: develop statewide model for: centers, options counseling standards, operations and staff protocols, and pilot training curriculum.

Personal Care and Home Care Aide Training Program: develop and strengthen training and certification programs for aides to strengthen the direct-care workforce.

Locally-Determined Needs: \$1.1 million GF/GP is allocated to area agencies on aging for locally-determined needs per Section 1421.

Funding Source(s):	Federal	23,080,900
	Private	200,000
	GF/GP	13,333,500

*Related Boilerplate Section(s): 1420, 1421*

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Nutrition services	37,244,000	Grants to regional Area Agencies on Aging for food and nutrition services for vulnerable elderly adults including at least one hot or other appropriate meal per day in a congregate setting or as a home-delivered meal, and nutrition education services; federal cash and/or commodities for meal preparation supports congregate and home-delivered meals; and funding for Senior Project FRESH Farmer's Market Nutrition Program.
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Funding Source(s):	Federal	27,657,000
	Private	300,000
	GF/GP	9,287,000

*Related Boilerplate Section(s): 1403*

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Foster grandparent volunteer program	2,233,600	Grants to local agencies for the Foster Grandparent Program to support low-income seniors who volunteer 20 hours per week to assist children and youth in need of personal attention and special help; a stipend is paid to volunteers; established under federal Corporation for National and Community Service.
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Funding Source(s):	GF/GP	2,233,600
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*Related Boilerplate Section(s): None*

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Retired and senior volunteer program	627,300	Grants to local agencies for the Retired and Senior Volunteer Program to support community senior citizen volunteers; established under federal Corporation for National and Community Service.
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Funding Source(s):	GF/GP	627,300
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*Related Boilerplate Section(s): None*

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Senior companion volunteer program	1,604,400	Grants to local agencies for the Senior Companion Program to support low-income seniors who provide 20 volunteer hours per week of individualized care and assistance to frail and at-risk adults; a stipend is paid to volunteers; established under federal Corporation for National and Community Service.
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Funding Source(s):	GF/GP	1,604,400
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*Related Boilerplate Section(s): None*

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Employment assistance	3,500,000	Grants to regional Area Agencies on Aging to administer federal Senior Community Service Employment Program to provide subsidized part-time community service interim employment opportunities for low-income seniors.
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Funding Source(s):	Federal	3,500,000
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*Related Boilerplate Section(s): None*

Respite care program	5,868,700	Grants to regional Area Agencies on Aging for respite care services to assist family caregivers providing care to an elderly person in need of constant supervision; respite may be provided in the home or in an adult day care setting.
		Funding Source(s): Merit Award 4,068,700 Other Restricted 1,800,000

*Related Boilerplate Section(s): None*

<b>GROSS APPROPRIATION</b>	<b>\$94,081,600</b>	<b>Total of all applicable line item appropriations.</b>
Total federal revenues	58,154,600	Federal revenue includes Older Americans Act Title III grants for supportive services (Part B), congregate and home-delivered nutrition services (C-1 and C-2), disease prevention (D), and national family caregiver support (E), Title V senior community service employment grants, Title VII grants for prevention of elder abuse (G) and long-term care ombudsman (A), Health and Human Services (HHS) nutrition services incentive program grant, USDA senior farmers market nutrition program grant, Social Security Act Title XIX Medicaid funds, Centers for Medicare and Medicaid Services (CMS) research demonstration and evaluation grant, Medicaid/Medicare assistance program grant, evidence-based prevention grant, Alzheimer's disease innovation grants for caregivers of veterans and for creating confident caregivers expansion, Medicare Improvements for Patients and Providers Act enrollment assistance grant, aging and disability resource center grant, violence against older women grant, Patient Protection and Affordable Care Act personal and home care aide state training program grant, and HHS bridging the gap: Michigan partners on the PATH grant.
Total private revenues	677,500	Private contributions collected by county cooperative extension agencies to support administration of Senior Project FRESH Farmer's Market Nutrition programs; private Relatives as Parents Program grant from the Brookdale Foundation used to support Michigan State University Kinship Care Resource Center; and civil monetary penalty funds from nursing home noncompliance with medical services certification regulations.
Merit award trust fund	4,068,700	State revenue from 1998 master settlement agreement with tobacco companies.
Total other state restricted revenues	1,800,000	Senior Care Respite Fund revenue from escheats to the state from uncashed benefits paid to subscribers or providers by the nonprofit health care corporation Blue Cross and Blue Shield of Michigan.
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$29,380,800</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>

## SECTION 118: MEDICAL SERVICES ADMINISTRATION

*This appropriation unit contains funding for staffing, contracts, and other administrative functions related to the Medicaid, MICHild, and indigent care programs. The functions carried out by the Medical Services Administration include the approval and payment of medical services claims, program and policy development, provider enrollment, collection of third-party resources, payment recovery, efforts to maximize the use of federal matching funds, and the development of health information technology initiatives.*

Full-time equated classified positions	458.5	Full-time equated (FTE) positions in the state classified service.															
Medical services administration – 434.5 FTE positions	\$69,509,000	<p>Salary, other personnel costs, office supplies, contracts, travel, and non-computer-related equipment expenditures related to the Medical Services Administration, which administers the Medicaid program. The Administration is made up of the following bureaus and offices:</p> <p><u>Medicaid Policy and Health Systems Innovation</u>: Program policy, actuarial and long-term care services.</p> <p><u>Medicaid Financial Management &amp; Administrative Services</u>: Third party liability, Medicaid payments, hospital and clinic reimbursement, provider relations, long-term care reimbursement and rate setting.</p> <p><u>Medicaid Program Operations and Quality Assurance</u>: Customer service, managed care plans, data management, office of medical affairs and pharmacy, and program review.</p> <p><u>Health Care Reform Office</u>: Track laws, rules and federal guidance issued regarding healthcare reform and Medicaid eligibility simplification.</p> <p><u>Medicaid Health Information Technology Office</u>: Information technology services for Medicaid programs.</p> <table style="margin-left: 40px;"> <tr> <td style="padding-left: 20px;">Funding Source(s):</td> <td style="padding-left: 20px;">Federal</td> <td style="text-align: right;">45,043,800</td> </tr> <tr> <td></td> <td style="padding-left: 20px;">Local</td> <td style="text-align: right;">105,900</td> </tr> <tr> <td></td> <td style="padding-left: 20px;">Private</td> <td style="text-align: right;">100,000</td> </tr> <tr> <td></td> <td style="padding-left: 20px;">Restricted</td> <td style="text-align: right;">330,000</td> </tr> <tr> <td></td> <td style="padding-left: 20px;">GF/GP</td> <td style="text-align: right;">22,929,300</td> </tr> </table> <p style="margin-left: 40px;"><i>Related Boilerplate Section(s): 1502, 1756, 1757, 1770, 1775, 1793, 1804, 1837, 1846, 1854, 1865, 1870, 1872, 1873, 1874, 1878, 1886</i></p>	Funding Source(s):	Federal	45,043,800		Local	105,900		Private	100,000		Restricted	330,000		GF/GP	22,929,300
Funding Source(s):	Federal	45,043,800															
	Local	105,900															
	Private	100,000															
	Restricted	330,000															
	GF/GP	22,929,300															
Facility inspection contract	132,800	<p>Funds for Medicaid's share of fire safety inspections of medical care facilities conducted by the Department of Licensing and Regulatory Affairs.</p> <table style="margin-left: 40px;"> <tr> <td style="padding-left: 20px;">Funding Source(s):</td> <td style="padding-left: 20px;">GF/GP</td> <td style="text-align: right;">132,800</td> </tr> </table> <p style="margin-left: 40px;"><i>Related Boilerplate Section(s): None</i></p>	Funding Source(s):	GF/GP	132,800												
Funding Source(s):	GF/GP	132,800															
MICHild administration	4,327,800	<p>Administrative services, eligibility determination, and contract monitoring costs related to MICHild program.</p> <table style="margin-left: 40px;"> <tr> <td style="padding-left: 20px;">Funding Source(s):</td> <td style="padding-left: 20px;">Federal</td> <td style="text-align: right;">4,327,800</td> </tr> </table> <p style="margin-left: 40px;"><i>Related Boilerplate Section(s): 1670, 1673, 1677</i></p>	Funding Source(s):	Federal	4,327,800												
Funding Source(s):	Federal	4,327,800															

Electronic health record incentive program – 24.0 FTE positions	144,193,800	Salary, other personnel costs, office supplies, contracts, travel and provider incentive payments supporting the Electronic Health Records Incentive Program. Electronic health record (EHR) incentive payments are made to eligible professionals, hospitals and critical access hospitals as they adopt, implement, upgrade or demonstrate meaningful use of certified EHR technology. An EHR is an electronic record of patient health information generated by one or more encounters in any care delivery setting.
		Funding Source(s): Federal 142,844,400 GF/GP 1,349,400

*Related Boilerplate Section(s): 1501*

<b>GROSS APPROPRIATION</b>	<b>\$218,163,400</b>	<b>Total of all applicable line item appropriations.</b>
Total federal revenues	192,216,000	Federal Title XIX Medicaid funds, Title XXI State Children's Health Insurance Program (SCHIP) funds, and Deficit Reduction Act sec. 6071 Money Follows the Person funds.
Total local revenues	105,900	Funds from public hospitals and local schools.
Total private revenues	100,000	Private funds from foundations.
Total other state restricted revenues	330,000	Funds from public university and college hospitals.
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$25,411,500</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>

## SECTION 119: MEDICAL SERVICES

*This appropriation unit contains funding for payment of health care services to low-income persons eligible for Medicaid, MICHild, Medicare Part D, and indigent care programs. Also included are special Medicaid financing payments which increase federal earnings, thereby reducing state GF/GP costs.*

Hospital services and therapy	\$1,186,608,000	Inpatient/outpatient hospital, mental hospital, and psychiatric unit services for Medicaid eligible patients. Funding Source(s): <table style="float: right; margin-left: 20px;"> <tr> <td style="padding-right: 10px;">Federal</td> <td style="text-align: right;">790,188,800</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">303,851,700</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">92,567,500</td> </tr> </table>	Federal	790,188,800	Restricted	303,851,700	GF/GP	92,567,500	
Federal	790,188,800								
Restricted	303,851,700								
GF/GP	92,567,500								
<i>Related Boilerplate Section(s): 1611, 1631, 1641, 1657, 1842, 1846, 1866, 1873</i>									
Hospital disproportionate share payments	45,000,000	Special payments to hospitals that serve a high percentage of low-income patients that are either uninsured or are covered by Medicaid, State Medical Programs, or Children's Special Health Care Services. Funding Source(s): <table style="float: right; margin-left: 20px;"> <tr> <td style="padding-right: 10px;">Federal</td> <td style="text-align: right;">29,844,000</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">6,114,900</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">9,041,100</td> </tr> </table>	Federal	29,844,000	Restricted	6,114,900	GF/GP	9,041,100	
Federal	29,844,000								
Restricted	6,114,900								
GF/GP	9,041,100								
<i>Related Boilerplate Section(s): 1699</i>									
Physician services	451,403,600	Medicaid covered office/home visits provided by physicians, nurse midwives, and nurse practitioners; immunizations, early periodic screening, diagnosis and treatment (EPSDT), prenatal care, podiatric care, family planning, and medical clinics. Funding Source(s): <table style="float: right; margin-left: 20px;"> <tr> <td style="padding-right: 10px;">Federal</td> <td style="text-align: right;">333,648,200</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">117,755,400</td> </tr> </table>	Federal	333,648,200	GF/GP	117,755,400			
Federal	333,648,200								
GF/GP	117,755,400								
<i>Related Boilerplate Section(s): 1631, 1862</i>									
Medicare premium payments	427,208,000	Medicare premiums/co-payments/deductibles for Medicaid-eligible persons who also qualify for Medicare, and certain other low-income Medicare beneficiaries; insurance premiums for persons with AIDS. Funding Source(s): <table style="float: right; margin-left: 20px;"> <tr> <td style="padding-right: 10px;">Federal</td> <td style="text-align: right;">369,904,300</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">57,303,700</td> </tr> </table>	Federal	369,904,300	GF/GP	57,303,700			
Federal	369,904,300								
GF/GP	57,303,700								
<i>Related Boilerplate Section(s): None</i>									
Pharmaceutical services	289,310,900	Prescription drugs, laboratory, orthotics, prosthetics, medical and oxygen supplies provided under Medicaid program. Funding Source(s): <table style="float: right; margin-left: 20px;"> <tr> <td style="padding-right: 10px;">Federal</td> <td style="text-align: right;">190,701,300</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">98,609,600</td> </tr> </table>	Federal	190,701,300	GF/GP	98,609,600			
Federal	190,701,300								
GF/GP	98,609,600								
<i>Related Boilerplate Section(s): 1620, 1629, 1724, 1879</i>									
Home health services	5,000,000	Inpatient/outpatient hospital, mental hospital, and psychiatric unit services for Medicaid eligible patients. Funding Source(s): <table style="float: right; margin-left: 20px;"> <tr> <td style="padding-right: 10px;">Federal</td> <td style="text-align: right;">3,315,900</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">1,684,100</td> </tr> </table>	Federal	3,315,900	GF/GP	1,684,100			
Federal	3,315,900								
GF/GP	1,684,100								
<i>Related Boilerplate Section(s): 1641</i>									

Hospice services	115,000,000	Health services to terminally ill Medicaid eligible individuals with life expectancy of six months or less: physician services, nursing care, social work, and counseling which may be provided at home or in an adult foster care facility, boarding home, home for the aged, or assisted living facility.	Funding Source(s):	Federal	76,267,900
				GF/GP	38,732,100
<i>Related Boilerplate Section(s): 1641</i>					
Transportation	23,935,800	Non-emergency transportation costs paid most often through local DHS offices for Medicaid recipients to obtain regular medical care.	Funding Source(s):	Federal	14,242,400
				GF/GP	9,693,400
<i>Related Boilerplate Section(s): 1641, 1861</i>					
Auxiliary medical services	9,000,000	Hearing, speech, and vision services covered by Medicaid.	Funding Source(s):	Federal	5,928,000
				GF/GP	3,072,000
<i>Related Boilerplate Section(s): 1631, 1641, 1657, 1857</i>					
Dental services	190,697,600	Dental services covered by Medicaid program.	Funding Source(s):	Federal	125,858,800
				GF/GP	64,838,800
<i>Related Boilerplate Section(s): 1630, 1631, 1641</i>					
Ambulance services	11,775,900	Medicaid covered emergency medical transportation and medically necessary non-emergency transportation services.	Funding Source(s):	Federal	7,757,500
				GF/GP	4,018,400
<i>Related Boilerplate Section(s): 1641, 1847</i>					
Long-term care services	1,780,000,000	Long-term care services to Medicaid eligible persons in nursing home settings, county medical care facilities, and hospital critical care units.	Funding Source(s):	Federal	1,165,258,100
				Local	6,618,800
				Private	2,100,000
				Merit Award	81,766,000
				Restricted	249,140,800
				GF/GP	275,116,300
<i>Related Boilerplate Section(s): 1606, 1641, 1682, 1689, 1777, 1793</i>					
Integrated care organization services	100	Placeholder for future allocation related to integrated health care services for individuals who are both Medicare and Medicaid eligible.	Funding Source(s):	GF/GP	100
<i>Related Boilerplate Section(s): 1878, 1879</i>					
Medicaid home- and community-based services waiver	299,895,900	Non-institutional services including case management, personal care, homemaker services, home delivered meals, transportation, respite care, adult day care, medical supplies and equipment, and private duty nursing provided to the elderly and disabled to enable them to remain in their home.	Funding Source(s):	Federal	192,309,500
				Local	265,000
				GF/GP	107,321,400
<i>Related Boilerplate Section(s): 1641, 1684, 1689, 1875</i>					

Adult home help services	318,684,800	Adult home help services to Medicaid eligible aged, blind, and disabled persons to enable them to remain in independent living arrangements; includes assistance with eating, toileting, bathing, dressing, taking medication, shopping, housecleaning, meal preparation, and laundry services. Funding Source(s): Federal 211,563,800 GF/GP 107,121,000
<i>Related Boilerplate Section(s): 1641</i>		
Personal care services	12,891,100	Payment made directly to an adult foster care home or home for the aged to support personal care service needs of Medicaid eligibles. Funding Source(s): Federal 8,550,100 GF/GP 4,341,800
<i>Related Boilerplate Section(s): 1601, 1641</i>		
Program of all-inclusive care for the elderly	50,254,300	Social and medical services for frail, elderly individuals that meet Medicaid's criteria for nursing facility level of care. This capitated benefit authorized by the Balanced Budget Act of 1997 (BBA) provides a comprehensive service delivery system and integrated Medicare and Medicaid financing permitting participants to continue living at home while receiving services rather than being institutionalized. A single PACE organization becomes the sole source of services for Medicare and Medicaid beneficiaries who choose to enroll. Funding Source(s): Federal 33,328,800 GF/GP 16,925,500
<i>Related Boilerplate Section(s): 1641</i>		
Autism services	35,171,800	Autism spectrum disorder treatment for Medicaid eligible children who are 18 years of age or under. Funding Source(s): Federal 23,325,900 GF/GP 11,854,900
<i>Related Boilerplate Section(s): 1858</i>		
Health plan services	4,746,202,000	Comprehensive medical services provided by health maintenance organizations enrolled as Medicaid qualified health plans and reimbursed through a fixed capitation fee. Funding Source(s): Federal 3,274,050,200 Local 13,857,500 Restricted 1,297,966,300 GF/GP 160,328,000
<i>Related Boilerplate Section(s): 402, 404, 411, 418, 428, 435, 470, 474, 494, 1204, 1607, 1641, 1657, 1659, 1662, 1740, 1764, 1815, 1820, 1846, 1850, 1862, 1873, 1881</i>		
MiChild program	69,720,100	Comprehensive health care services to non-Medicaid eligible low-income children in households with income up to 200% of poverty, including the recent addition of autism spectrum disorder coverage. Funding Source(s): Federal 53,279,300 GF/GP 16,440,800
<i>Related Boilerplate Section(s): 1670, 1673, 1677</i>		

Plan first family planning waiver	13,628,100	<p>Family planning services benefit for non-pregnant women ages 19 through 44, at or below 185% of poverty level and who meet Medicaid eligibility. The Plan First! Medicaid family planning waiver program began July 2007 to provide preventative health care for women with intent to reduce infant mortality, child abuse and neglect, and unintended pregnancy. Program does not include coverage for abortions or treatment of infertility.</p> <p>Funding Source(s): Federal 12,265,200 GF/GP 1,362,900</p> <p><i>Related Boilerplate Section(s): None</i></p>
Medicaid adult benefits waiver	105,877,700	<p>Limited health care coverage for low income (at or below 35% of federal poverty level) adults between 19 and 64 years of age with no minor or dependent children living in their home, who are not covered by health care insurance. Services covered include pharmacy, emergency room and physician.</p> <p>Funding Source(s): Federal 70,217,900 Restricted 11,553,800 GF/GP 24,106,000</p> <p><i>Related Boilerplate Section(s): 1641</i></p>
Special indigent care payments	95,738,900	<p>Health care coverage through county indigent care agreements for former State Medical Program eligible persons, indigent care recipients, and other low income uninsured adults. Third Share Plans provide health care coverage through medical insurance for low-income working families not eligible for Medicaid; plans are funded by equal support from employees, employers and counties.</p> <p>Funding Source(s): Federal 63,494,000 Local 32,244,900</p> <p><i>Related Boilerplate Section(s): 1641</i></p>
Federal Medicare pharmaceutical program	183,628,900	<p>Phased-down state contribution (clawback provision) as required by Medicare Part D drug program.</p> <p>Funding Source(s): GF/GP 183,628,900</p> <p><i>Related Boilerplate Section(s): None</i></p>
Maternal and child health	20,279,500	<p>Payments to local health departments providing maternal and child health services under Title V of Social Security Act for the difference between actual costs and Medicaid payment rates.</p> <p>Funding Source(s): Federal 20,279,500</p> <p><i>Related Boilerplate Section(s): 1641</i></p>
Subtotal basic medical services program	10,486,913,800	Total authorization for regular Medicaid, MICHild and other medical services programs.
School-based services	131,502,700	<p>Federal Medicaid funds paid to local school districts for language, speech, hearing, nursing services, counseling, physical and occupational therapy, and health screening services for Medicaid eligible students in school settings.</p> <p>Funding Source(s): Federal 131,502,700</p> <p><i>Related Boilerplate Section(s): 1641, 1692</i></p>
Special Medicaid reimbursement	337,217,600	<p>Special payments to various health providers which allow the state to earn additional federal Medicaid funds.</p> <p>Funding Source(s): Federal 223,642,700 Local 11,348,800 Restricted 101,848,100 GF/GP 378,000</p> <p><i>Related Boilerplate Section(s): 1641, 1693, 1694</i></p>

Subtotal special medical services payments	468,720,300	Total authorization for school based services and special Medicaid reimbursement.
<b>GROSS APPROPRIATION</b>	<b>\$10,955,634,100</b>	<b>Total of all applicable line item appropriations.</b>
Total federal revenues	7,430,724,800	Federal Title XIX Medicaid funds, Title XXI State Children's Health Insurance Program (SCHIP) funds, Title IV D TANF funds and Money Follows the Person funds.
Total local revenues	64,335,000	From county indigent care programs, county maintenance of effort payments for medical care facilities, Medicaid special adjustor payments, and public school district funds for teen health centers.
Total private revenues	2,100,000	Civil monetary penalties and private funds from Federally Qualified Health Centers.
Merit award trust fund	81,766,000	State revenue from 1998 master settlement agreement with tobacco companies.
Total other state restricted revenues	1,970,475,600	Health and Safety Fund, Healthy Michigan Fund, Medicaid Benefits Trust Fund, Wayne County Tobacco Tax, Health Insurance Claims Assessment Fund, provider assessments, intergovernmental transfers, special financing and legal settlements.
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$1,406,232,700</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>

## SECTION 120: INFORMATION TECHNOLOGY

*This appropriation unit contains funds for information technology services and projects administered by the Department of Technology, Management and Budget and Michigan Medicaid information system.*

Information technology services and projects	\$36,763,300	Information technology services and projects administered by the Department of Technology, Management and Budget, and user fees for these projects and services.
		Funding Source(s):
		Federal 22,614,900
		Restricted 1,977,300
		GF/GP 12,171,100

*Related Boilerplate Section(s): None*

Michigan Medicaid information system	50,201,100	Funds used for the Community Health Automated Medicaid Processing System (CHAMPS).
		Funding Source(s):
		Federal 22,621,000
		Private 20,000,000
		GF/GP 7,580,100

*Related Boilerplate Section(s): 298*

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**GROSS APPROPRIATION      \$86,964,400      Total of all applicable line item appropriations.**

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Total federal revenues	45,235,900	Includes Title XIX of the Social Security Act Medicaid funds, WIC revenue, block grant for prevention and treatment of substance abuse, Victims of Crime Act grant funds.
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Total private revenues	20,000,000	Revenue realized from the Michigan-Illinois Alliance Medicaid management information systems project.
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Total other state restricted revenues	1,977,300	Includes vital records fees, fees assessed against convicted defendants and deposited in Crime Victim's Rights Services Fund, newborn screening fees, first and third party revenue from hospitals and centers, emergency medical services fees, and certificate of need fees.
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**STATE GENERAL FUND/  
GENERAL PURPOSE      \$19,751,200      The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.**

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<b>GROSS APPROPRIATION</b>	<b>\$29,939,200</b>	<b>Total of all applicable line item appropriations.</b>
Total federal revenues	18,864,200	Includes Title XIX of the Social Security Act Medicaid funds.
<b>STATE GENERAL FUND/ GENERAL PURPOSE</b>	<b>\$11,075,000</b>	<b>The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.</b>

## BOILERPLATE SECTION INFORMATION

### **GENERAL SECTIONS**

#### **Sec. 201. State Spending**

Total FY 2013-14 state spending from state resources under Part 1 and state spending from state resources to be paid to local units of government.

#### **Sec. 202. Authorized Appropriations**

Provides that appropriations authorized under this article are subject to the Management and Budget Act, 1984 PA 431, MCL 18.1101 to 18.1594.

#### **Sec. 203. Terms and Acronyms**

Provides definitions for terms and acronyms used in Article IV, 2013 PA 59.

#### **Sec. 206. Contingency Funds**

Appropriates up to \$200 million federal contingency funds, up to \$40 million state restricted contingency funds, up to \$20 million local contingency funds, and up to \$40 million private contingency funds. Specifies that contingency funds are not available for expenditure until transferred according to Section 393(2) of the Management and Budget Act, 1984 PA 431, MCL 18.1393.

#### **Sec. 207. Performance Metrics**

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

#### **Sec. 208. Internet Reporting Requirements**

Requires departments and agencies receiving Part 1 appropriations to use the Internet to fulfill the reporting requirements of article IV, 2013 PA 59.

#### **Sec. 209. American Goods or Services and Michigan Goods or Services**

Prohibits the purchase of foreign goods or services, or both, if competitively priced and comparable quality American goods or services, or both, are available. Requires that preference be given to goods or services, or both, manufactured by Michigan businesses if competitively priced and of comparable quality. Requires that preference be given to goods or services, or both, manufactured by Michigan businesses owned and operated by veterans if competitively priced and of comparable quality.

#### **Sec. 210. Businesses in Deprived and Depressed Communities**

Requires the Director of DCH to take all reasonable steps to ensure businesses in deprived and depressed communities compete for and perform contracts to provide services or supplies, or both. Requires the Director to strongly encourage firms with which DCH contracts to subcontract with certified businesses in deprived and depressed communities for services or supplies, or both.

#### **Sec. 211. Fee Revenue and Restricted Fund Balances**

Allows the carry forward of fee revenue, with approval of the State Budget Director, into the next fiscal year. Allows fee revenue to be used as the first source of funding in that fiscal year.

#### **Sec. 212. Fund Sources Supporting Line Items**

Requires report on or before February 1, 2014, on detailed name and amounts of federal, restricted, private, and local revenue sources that support FY 2013-14 appropriations by each line item. Requires report on amounts and detailed sources of federal, restricted, private, and local revenue proposed to support funds appropriated in each of the Part 1 line items in FY 2014-15 Executive budget recommendation, upon release of the proposal.

#### **Sec. 213. Report on Tobacco Tax and Healthy Michigan Funds**

Requires state departments, agencies, and commissions receiving tobacco tax and Healthy Michigan funds to report on programs and organizations utilizing these funds by April 1, 2014, to the House and Senate Appropriations Committees, House and Senate Fiscal Agencies, and State Budget Director. Requires the report to include the following information: detailed spending plan by appropriation line item; description of allocations or bid processes; eligibility criteria for program participating and maximum benefit levels where applicable; and program outcome measures.

#### **Sec. 216. Use of Prior-Year Revenue**

Allows the use of prior-year revenue for write-offs of accounts receivables, deferrals, and prior-year obligations. Does not limit DCH's ability to satisfy appropriation deductions in Part 1 to collections and accruals in the current fiscal year.

## BOILERPLATE SECTION INFORMATION

### **Sec. 218. Basic Health Services**

Lists eight basic health services embodied in Part 23 of the Public Health Code, 1978 PA 368, MCL 333.2301 to 333.2321, that are to be available and accessible throughout the state.

### **Sec. 219. DCH Contracts with the Michigan Public Health Institute**

Allows DCH to contract with the Michigan Public Health Institute for the design and implementation of projects and other public health-related activities. Requires DCH to report on each funded project by January 1, 2014. Requires DCH to provide, by September 30, 2014, copies of all reports, studies, and publications produced by the Institute.

### **Sec. 223. Fees for Publications, Videos, Conferences, and Workshops**

Allows DCH to establish and collect fees for publications, videos and related materials, conferences, and workshops. Requires collected fees to be used to offset expenditures for printing and mailing costs of publications, videos and related materials, and costs of conferences and workshops. Prohibits DCH from collecting fees that exceed expenditures.

### **Sec. 264. Submission and Applications for Medicaid Waivers**

Requires DCH to notify the House and Senate Appropriations Subcommittees on Community Health and House and Senate Fiscal Agencies upon the submission of a Medicaid waiver, a Medicaid state plan amendment, or similar proposal to the federal Centers for Medicare and Medicaid Services (CMS). Requires written and verbal biannual reports on the status of discussions with federal agencies on potential or future Medicaid waiver applications. Requires DCH to inform the entities noted above of any alterations or adjustments made to the published plan for integrated care for individuals who are dual Medicare/Medicaid eligibles when the final version of the plan has been submitted to CMS or federal Department of Health and Human Services. Requires DCH to submit the plan for integrated care for individuals who are dual eligibles to the Legislature for review at least 30 days before implementation of the plan.

### **Sec. 265. Retention of Reports**

Directs departments and agencies receiving Part 1 appropriations to receive and retain copies of all reports funded from Part 1 appropriations. Permits DCH to electronically retain copies of reports unless required by federal and state guidelines.

### **Sec. 266. Out-of-State Travel**

Requires departments and agencies to prepare a report on out-of-state travel by classified and unclassified employees funded by appropriations within the department's budget in the immediately preceding fiscal year. Requires the report to include the dates of each travel occurrence and the transportation and related costs of each travel occurrence.

### **Sec. 267. Disciplinary Action Against State Employee**

Prohibits DCH from taking disciplinary action against an employee for communicating with a member of the Legislature or his/her staff.

### **Sec. 270. Notification from Attorney General on Legal Actions**

Requires DCH to provide a written report on total amounts recovered from legal actions, programs, or services for which monies were originally expended; details on disposition of funds recovered from legal actions; and descriptions of facts involved in legal actions within 180 days after receipt of notice from the Attorney General of legal actions in which expenses have been recovered.

### **Sec. 276. Legal Services of Attorney General**

Prohibits the use of appropriated funds by DCH to hire a person to provide legal services that are the responsibility of the Attorney General. Provides that the prohibition does not apply to legal services for bonding activities and those outside services authorized by the Attorney General.

### **Sec. 282. Administrative Costs for Coordinating Agencies and Area Agencies on Aging**

Requires DCH to establish uniform definitions, standards, and instructions for the classification, allocation, assignment, calculation, recording, and reporting of administrative costs by the following entities: coordinating agencies on substance abuse, Salvation Army Harbor Light program, and area agencies on aging and local providers. Requires DCH to provide a written draft of its proposed definitions, standards, and instructions by May 15, 2014.

## BOILERPLATE SECTION INFORMATION

### **Sec. 287. General Fund/General Purpose Appropriation Lapses**

Requires the State Budget Office to report on the estimated general fund/general purpose appropriation lapses by major departmental program or program areas at the close of the prior fiscal year by no later than November 30, 2013.

### **Sec. 292. Fiscal Year-To-Date Expenditures and Payments**

Requires DCH, in cooperation with the DTMB, to maintain on a searchable website accessible by the public at no cost, all of the following information: fiscal year-to-date expenditures by category and appropriation unit, fiscal year-to-date payments to a selected vendor, number of active department employees by job classification, and job specifications and wage rates.

### **Sec. 296. State Restricted Fund Balances, Revenues, and Expenditures**

Requires annual report on estimated state restricted fund balances, projected revenues, and expenditures for FY 2012-13 and FY 2013-14 within 14 days after the release of the Executive budget recommendation. Requires DCH, in cooperation with the State Budget Office, to provide the report to Chairs of the House and Senate Appropriations Committees, the House and Senate Appropriations Subcommittees on Community Health, and the House and Senate Fiscal Agencies.

### **Sec. 298. Michigan-Illinois Alliance Medicaid Management Information Systems Project**

Allocates \$20 million in private revenue for the Michigan-Illinois Alliance Medicaid Management Information Systems Project.

### **Sec. 299. Request for Proposal (RFP) for Contract**

Prohibits a state department or agency from issuing RFP for a contract in excess of \$5 million, unless the department or agency has first considered issuing a request for information (RFI) or a request for qualification (RFQ) relative to that contract to better enable the department or agency to learn more about the market for products or services that are subject of the RFP. Requires the department or agency to notify the DTMB of the evaluation process used to determine if an RFI or RFQ was not necessary prior to issuing the RFP.

## **BEHAVIORAL HEALTH SERVICES**

### **Sec. 401. Comprehensive System of CMH Services**

Provides that Part 1 appropriated funds are to support a comprehensive system of CMH services under the full authority and responsibility of local CMHSPs or prepaid inpatient health plans (PIHPs). Requires that DCH ensure each CMHSP or PIHP provides a complete array of mental health services, coordination of inpatient and outpatient hospital services, individualized plans of services, a case or care management system, and a system that serves at-risk and delinquent youth pursuant to provisions of the Mental Health Code, 1974 PA 258, MCL 330.1001 to 330.2106.

### **Sec. 402. Contracts Between DCH and CMHSPs/PIHPs**

Requires final authorizations to CMHSPs or PIHPs be made upon the execution of contracts between DCH and CMHSPs or PIHPs. Requires each contract with a CMHSP or PIHP to include a provision that it is not valid unless the total dollar obligation of all contracts entered into between DCH and CMHSPs or PIHPs for FY 2013-14 does not exceed Part 1 appropriations. Requires DCH to report immediately to the House and Senate Appropriations Subcommittees on Community Health, House and Senate Fiscal Agencies, and State Budget Director if there are new contracts or amendments to contracts with CMHSPs or PIHPs that would affect enacted rates or expenditures.

### **Sec. 403. Mental Health Services for Special Populations**

Requires DCH to ensure CMHSPs or PIHPs meet with multicultural service providers to develop a workable framework for contracting, service delivery, and reimbursement. Prohibits appropriations for mental health services for special populations from being utilized for services to illegal immigrants, fugitive felons, and individuals who are not residents of the state. Requires January 1, 2014 annual report from independent organizations receiving mental health services for special populations funding.

### **Sec. 404. Report on CMHSPs**

Requires DCH to report by May 31, 2014, on the following for CMHSPs or PIHPs: expenditures and services data, information about access to CMHSPs, lapses and carryforwards during FY 2012-13, information on the CMH Medicaid managed care program, performance indicator information required to be submitted to DCH in contracts with CMHSPs or PIHPs, and an estimate of the number of mental health direct care workers.

## BOILERPLATE SECTION INFORMATION

### **Sec. 406. Appropriations for State Disability Assistance Substance Abuse Services Program**

Requires funds appropriated for the state disability assistance substance abuse services program be used to support per diem and board payments in substance abuse residential facilities. Requires DCH to reimburse all eligible licensed substance abuse programs at a rate equivalent to that paid by DHS to adult foster care providers.

### **Sec. 407. Substance Abuse Prevention, Education, and Treatment Grants**

Requires that appropriations for substance abuse prevention, education, and treatment grants be expended to coordinate care and services provided to individuals with severe and persistent mental illness and substance abuse diagnoses. Requires DCH to approve the managing entity fee schedules for providing substance abuse services and charge participants in accordance with their ability to pay. Requires the managing entity to continue current efforts to collaborate on the delivery of services to those clients with mental illness and substance abuse diagnoses with the goal of providing services in an administratively efficient manner.

### **Sec. 408. Report on Substance Abuse Prevention, Education, and Treatment Programs**

Requires DCH to report by April 1, 2014, on expenditures and services data on substance abuse prevention, education, and treatment programs for FY 2012-13.

### **Sec. 410. Substance Abuse Treatment for DHS Recipients**

Requires DCH to assure that substance abuse treatment is provided to applicants and recipients of public assistance through DHS who are required to obtain substance abuse treatment as a condition of eligibility for public assistance.

### **Sec. 411. Jail Diversion Services for Persons with Mental Illness or Developmental Disability**

Directs DCH to ensure that each contract with a CMHSP or PIHP requires the CMHSP or PIHP to implement programs to encourage diversions for individuals with mental illness, serious emotional disturbance, or developmental disability from possible jail incarceration when appropriate. Requires each CMHSP or PIHP to have jail diversion services and work toward establishing relationships with representative staff of local law enforcement agencies.

### **Sec. 412. Non-Medicaid Substance Abuse Services**

Requires DCH to contract with the Salvation Army Harbor Light Program for providing non-Medicaid substance abuse services.

### **Sec. 418. Monthly Report on Medicaid Managed Mental Health Program**

Requires DCH to report on the amount of funding paid to PIHPs to support the Medicaid managed mental health program in the preceding month including total paid to each PIHP, per capita rate paid for each eligibility group for each PIHP, number of cases in each eligibility group, and year-to-date summary of eligibles and expenditures.

### **Sec. 424. Timely Claims Process for PIHPs**

Requires that PIHPs contracting with DCH to provide services to the Medicaid population adhere to the timely claims processing and payments procedure to claims submitted by health professionals and facilities as described in Section 111i of the Social Welfare Act, 1939 PA 280, MCL 400.111i.

### **Sec. 428. Capitation Rates Increase for PIHPs**

Requires PIHPs to provide local funds from internal resources that can be used as a bona fide source for the state match required under the Medicaid program in order to increase capitation rates for PIHPs.

### **Sec. 435. County Matching Funds to CMHSP**

Directs counties required under provisions of the Mental Health Code to provide matching funds to CMHSPs for mental health services rendered to residents in its jurisdiction to pay these funds in equal installments on a quarterly basis throughout the fiscal year.

### **Sec. 474. Guardianship of Recipients**

Directs DCH to ensure each contract with a CMHSP or PIHP requires the CMHSP or PIHP to provide each recipient and his/her family with information regarding the different types of guardianship. Prohibits a CMHSP or PIHP from attempting to reduce or restrict the ability of a recipient or his/her family from obtaining legal guardianship without just cause.

## BOILERPLATE SECTION INFORMATION

### **Sec. 490. Uniform Standards for Providers Contracting with PIHPs and CMHSPs**

Requires the Department to develop a plan to maximize uniform and consistent standards required of providers contracting directly with PIHPs and CMHSPs. Requires the standards to include contract language, training requirements for direct support staff, performance indicators, financial and program audits, and billing procedures. Requires a status report on implementation of the plan by July 1, 2014.

### **Sec. 491. Habilitation Supports Waiver for Persons with Developmental Disabilities**

Requires the Department to explore changes in the Habilitation Supports Waiver for Persons with Developmental Disabilities that would permit a slot to become available to a county that has demonstrated a greater need for the services.

### **Sec. 492. Mental Health Services to County Jail Inmates**

Does not allow the Department to prohibit the use of GF/GP dollars by CMHSPs to provide mental health services to inmates of a county jail if a CMHSP has entered into an agreement with a county or county sheriff.

### **Sec. 494. National Accreditation Review Criteria for Behavioral Health Services**

Requires the Department to consider a CMHSP, PIHP, or subcontracting provider agency in compliance with state program review and audit requirements that are addressed by a national accrediting entity for behavioral health care services by April 1, 2014, contingent upon federal approval. Requires a report by June 1, 2014 that lists each CMHSP, PIHP, and subcontracting provider agency that is considered in compliance with state requirements that are addressed by a national accrediting agency which includes: naming of the requirements that the CMHSP, PIHP, or subcontracting provider agency is considered in compliance with; and the national accrediting entity that reviewed and accredited the noted entities.

### **Sec. 496. CMHSPs and PIHPs Funding Reductions**

Permits CMHSPs and PIHPs to offset state funding reductions by limiting the administrative component of their contracts with providers and case management to a maximum of 9%.

### **Sec. 497. Distribution of Substance Abuse Block Grant Funds**

Requires population data from the most recent federal census be used in determining the distribution of substance abuse block grant funds.

### **Sec. 498. Effectiveness of Substance Use Disorders Treatment Programs**

Requires DCH to use standard program evaluation measures to assess the effectiveness of heroin and other opiates treatment programs provided through coordinating agencies and service providers in reducing and preventing the incidence of substance use disorders. Requires a May 1, 2014 report on the effectiveness of treatment programs for heroin and other opiates.

### **Sec. 499. Mental Health Needs of Deaf and Hard-of-Hearing Persons**

Requires the Department to continue efforts to use mental health funding to address the mental health needs of deaf and hard-of-hearing persons. Requires a March 1, 2014 report on the results of this process.

### **Sec. 500. Jail Diversion Programs Initiative**

Requires DCH in allocating funds for the jail diversion programs initiative that priority is given to county sheriffs including St. Joseph County Sheriff, and community court projects including the 36th District Court community court project.

### **Sec. 502. Fetal Alcohol Syndrome Services**

Requires the Department to explore developing an outreach program on fetal alcohol syndrome services and report on efforts to prevent, combat, and reduce the incidence of fetal alcohol syndrome.

### **Sec. 503. Policies and Procedures for PIHPs or CMHSPs**

Requires DCH to consult with CMHSPs from across the state when developing policies and procedures that will impact PIHPs or CMHSPs.

### **Sec. 504. Workgroup on PIHPs Capitation Payments**

Requires the Department to create a Workgroup to make recommendations to achieve more uniformity in capitation payments made to the PIHPs. Requires the Department to provide the Workgroup's recommendation to the Senate and House Appropriations Subcommittees on Community Health, Senate and House Fiscal Agencies, and State Budget Director by March 1, 2014.

## BOILERPLATE SECTION INFORMATION

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

#### ***Sec. 601. Third-Party Payments and Revenue Recapture Project***

Requires DCH to continue a revenue recapture project to generate additional third party revenue from cases that are closed or inactive. Permits a portion of collected revenues to be used for departmental costs and contractual fees associated with retroactive collections.

#### ***Sec. 602. Gifts and Bequests***

Specifies that gifts and bequests are to provide specific enhancements for individuals residing at state-operated facilities consistent with the stipulation of the donor.

#### ***Sec. 605. Closures or Consolidations of State Hospitals and Centers***

Prohibits DCH from implementing any closures or consolidations of state hospitals, centers, and agencies until CMHSPs or PIHPs have programs and services in place for those individuals currently in the facilities. Requires DCH to provide a closure plan four months after certification of the closure to the House and Senate Appropriations Subcommittees on Community Health and State Budget Director. Requires the transfer of remaining operational funds from closed state hospitals, centers, and agencies to CMHSPs or PIHPs responsible for providing services to individuals previously served by the state-run operations.

#### ***Sec. 606. Patient Reimbursement***

Allows DCH to collect revenue for patient reimbursement from first and third party payers, including Medicaid and local county CMHSP payers, to cover the cost of placement in state hospitals and centers. Authorizes DCH to adjust financing sources for patient reimbursement based on actual revenue earned. Allows the carryforward of revenue collected that exceeds current-year expenditures if approved by the State Budget Director.

#### ***Sec. 608. Privatization of Food and Custodial Services***

Allows DCH, in consultation with the DTMB, to maintain a bid process to identify 1 or more private contractors to provide food and custodial services for the administrative areas at any state hospital identified by DCH as capable of generating savings through the outsourcing of those services.

### **PUBLIC HEALTH ADMINISTRATION**

#### ***Sec. 650. Fish Consumption Advisory Methodology***

Directs DCH to report to the Legislature by October 1, 2013 on the process by which Michigan fish consumption advisories are created and revised, and identifies specific information to be included in the report.

#### ***Sec. 651. Michigan Health Endowment Fund***

Requires the Department to work with the Michigan Health Endowment Fund Corporation established under the Blue Cross and Blue Shield reform enacted in Act 4 PA 2013 (SB 61), to explore ways to expand health and wellness programs.

#### ***Sec. 654. Before- and After-School Healthy Exercise Program***

Allocates \$1.0 million for a pilot before- and after-school healthy exercise program for children kindergarten through grade 6. Department shall incorporate evidence-based best practices for program model and guidelines. Program goals for participating children are indicated and a 20% match is required of grantees. Department shall seek third party financial support for program.

### **HEALTH POLICY**

#### ***Sec. 704. Emergency Medical Services (EMS) Personnel Serving Rural Areas***

Requires DCH to continue to contract with EMS grantees funded from Part 1 appropriations to ensure that a sufficient number of qualified EMS personnel exist to serve rural areas of the state.

#### ***Sec. 709. Michigan Essential Health Care Provider Program***

Allows funds appropriated for Michigan Essential Health Care Provider Program to also be used to provide loan and repayment for dentists that meet the criteria established in Part 27 of the Public Health Code in addition to other providers. Allows DCH to use appropriated funds to reduce local and private share of loan repayment costs to 25% for primary care physicians, particularly obstetricians and gynecologists working in underserved areas.

#### ***Sec. 712. Free Health Clinic Funding***

Allocates \$250,000 to free health clinics from the funds appropriated for primary care services. Requires DCH to distribute funds equally to each free health clinic. Defines free health clinic as a nonprofit organization that uses volunteer health professions to provide care to uninsured individuals.

## BOILERPLATE SECTION INFORMATION

### **Sec. 713. Funding for Multicultural Agencies Providing Primary Care Services**

Requires DCH to continue support of multicultural agencies that provide primary care services, from the funds appropriated in Part 1.

### **Sec. 715. Options for Incentivizing Primary Care Medical School Students to Stay in Michigan**

Requires DCH to evaluate options for incentivizing students attending medical schools in Michigan to meet their primary care residency requirements in Michigan, and to practice in Michigan.

### **Sec. 716. Incentivizing Medical Students to Serve in Counties Under 100,000 Population**

Encourages the Department to create a pilot program incentivizing students attending Michigan medical schools to provide primary care or other designated specialty medical services in counties of less than 100,000 residents with a medically underserved population. Requires an evaluation and report by September 30, 2014.

### **Sec. 717. Health Innovation Grants**

Establishes parameters for new health innovation grants program to address emerging issues and encourage innovative advances in health care. Allocates \$250,000 of the \$1.5 million Part 1 appropriation for a chronic fatigue syndrome study. Unexpended funds are considered work project appropriations, with tentative work project completion date of September 30, 2018.

## **INFECTIOUS DISEASE CONTROL**

### **Sec. 804. HIV and Hepatitis C Cooperative Program with Department of Corrections**

Directs DCH to cooperate with Department of Corrections to share data and information regarding prisoners being released who test positive for HIV or Hepatitis C, related to the Michigan prisoner reentry initiative.

## **EPIDEMIOLOGY**

### **Sec. 851. Lead Abatement**

Allocates new funding of \$1.25 million from the Part 1 healthy homes program appropriation to expand lead abatement efforts. Direct the Department to coordinate lead abatement efforts with the Michigan Public Service Commission on the issue of window replacement.

## **LOCAL HEALTH ADMINISTRATION AND GRANTS**

### **Sec. 901. Reimbursement of Local Costs Related to Informed Consent Law**

Directs DCH to reimburse local health departments for costs incurred for informational services provided in accordance with the Informed Consent Law to a woman seeking an abortion.

### **Sec. 902. Penalty for Dissolution of Multi-County Local Health Department**

Provides authority for DCH to assess a penalty on a county of up to 6.25% of the county health department's essential local public health services funding if that county ceases to be part of a district health department or multi-county local health department.

### **Sec. 904. Essential Local Public Health Services**

Directs that essential local public health services line item funds shall be prospectively allocated to local public health departments to support costs for nine state and local cost-shared services. Certain of these services shall be provided in consultation with Department of Agriculture and Rural Development and with Department of Environmental Quality. Local public health departments shall be held to contractual standards for these services. Local eligibility is contingent upon local spending of at least the amount expended in FY 1992-93 for these services.

## **FAMILY, MATERNAL, AND CHILDREN'S HEALTH SERVICES**

### **Sec. 1103. Report of Sexual and Maternal Health Demographics and Expenditures by Marital Status**

Requires annual report by January 3, 2014 of an estimate of public funds administered by DCH for family planning, sexually transmitted infection prevention and treatment, pregnancies, and births, and to report demographics collected by DCH that are voluntarily self-reported by clients. Requires DCH to report expenditure data by marital status, and permits the use of state public assistance applications to determine marital status for data report.

### **Sec. 1104. Report Regarding Pregnancy Planning, Prenatal, and Maternal and Child Health Programs**

Requires DCH to report by April 1, 2014 on funding allocations, breakdown of expenditures by urban and rural, and prior fiscal year service and expenditure data by population groups for the local maternal and child health, prenatal care, family planning, and pregnancy prevention programs. DCH shall ensure that needs of rural communities are considered in distribution of funds for these programs. Defines "rural" as having a population of 30,000 or less.

## BOILERPLATE SECTION INFORMATION

**Sec. 1106. Family Planning Federal Title X Funding Compliance**

Requires family planning programs receiving federal Title X funds to be in compliance with federal performance and quality assurance indicators; agencies not in compliance shall not receive supplemental or reallocated funds.

**Sec. 1108. Prohibit Use of Pregnancy Prevention Funding for Abortion Counseling, Referrals, or Services**

Prohibits pregnancy prevention program appropriation line item funds from being used for abortion counseling, referrals, or services.

**Sec. 1109. Volunteer Dental Services Program for the Uninsured**

Allocates funds from dental program line item to the Michigan Dental Association to administer a volunteer program of dental services to the uninsured; and requires a report by December 1, 2013 on program services provided in the prior fiscal year.

**Sec. 1119. No Use of Funds to Encourage or Support Abortion Services**

Directs that no state funds appropriated for family planning local agreements or pregnancy prevention programs shall be used to encourage or support abortion services.

**Sec. 1135. School Health Education Curriculum Model and State Steering Committee**

Establishes that if funds become available, provision of a school health education curriculum shall be in accordance with health education goals of the Michigan Model for Comprehensive School Health Education State Steering Committee; establishes steering committee membership; and requires curriculum materials be made available upon request.

**Sec. 1136. Alternative Pregnancy and Parenting Support Services Pilot**

Allocates \$700,000 for a new alternative pregnancy and parenting support services pilot program to provide enhanced counseling and support for women during pregnancy through 12 months after birth, and promote childbirth and alternatives to abortion.

**Sec. 1137. Enhanced Nurse Family Partnership Program Support**

Allocates new funding of \$500,000 for evidence-based programs to reduce infant mortality including nurse family partnership programs, for enhanced support and education to nursing and other health professional teams, client recruitment in high need or underserved communities, strategic planning, nurse and provider recruitment, and awareness.

**Sec. 1138. Maternal and Child Health Contractual Services**

Requires the Department to allocate funds appropriated for family, maternal, and children's health services pursuant to section 1 of Public Act 360 of 2002, related to a system of prioritization for awarding contracts for family planning and pregnancy prevention services with consideration for a contractor's provision of abortion services or referrals.

**CHILDREN'S SPECIAL HEALTH CARE SERVICES**

**Sec. 1202. Children's Special Health Care Services Coverage**

Allows the Children's Special Health Care Services program to provide special formula for persons with certain metabolic and allergic disorders, treatment to persons age 21 or older with cystic fibrosis, services to persons age 21 or older with hemophilia, and provide human growth hormone to eligible patients.

**Sec. 1204. CSHCS Eligibles and Medicaid HMOs**

Requires the Department to report on its plan for enrolling Medicaid eligible CSHCS recipients into Medicaid health plans.

**Sec. 1205. Expansion of Telemedicine Capacity**

Authorizes the Department to use up to \$500,000 for continued development and expansion of telemedicine capacity to allow CSHCS children better access to specialty providers.

**CRIME VICTIM SERVICES COMMISSION**

**Sec. 1302. Allocation of Funds for Forensic Nurse Examiner Programs**

Allocates up to \$200,000 of justice assistance grants line item funds for expansion of forensic nurse examiner programs to facilitate training for improved evidence collection for the prosecution of sexual assault. Funds shall be used for program coordination and training.

## BOILERPLATE SECTION INFORMATION

### **OFFICE OF SERVICES TO THE AGING**

#### ***Sec. 1403. Home-Delivered Meals Waiting Lists***

Requires area agency on aging regions to report home-delivered meals waiting lists by February 1, 2014 to the Office of Services to the Aging and the Legislature; establishes standard criteria for persons included on the waiting list, including an initial determination of likely eligibility for home-delivered meals services.

#### ***Sec. 1417. Reporting of Area Agency on Aging Allocations and Expenditures***

Requires DCH to report by March 30, 2014 on total allocation of state resources to each area agency on aging by program and administration, and detail of expenditures by each area agency on aging of all state and local funds by program and administration.

#### ***Sec. 1420. Aging Care Management Pilot for Nursing Services Only***

Directs DCH to establish, if funds become available, an aging care management services pilot project with services provide solely by nurses; pilot shall be established in a county with a population between 150,000 and 250,000 persons.

#### ***Sec. 1421. Allocation of \$1.1 Million for Locally-Determined Needs***

Provides that funding of \$1.1 million appropriated for community services be allocated to area agencies on aging for locally-determined needs.

### **MEDICAL SERVICES ADMINISTRATION**

#### ***Sec. 1501. Electronic Health Records Incentive Program Work Project***

Establishes unexpended funds for the Electronic Health Records Incentive program as a work project appropriation with the completion date estimated to be September 30, 2018.

#### ***Sec. 1502. Transparency Database Website***

Requires the Department to spend \$300,000 GF/GP and any associated federal match to create a transparency database website. Enabling legislation is required.

### **MEDICAL SERVICES**

#### ***Sec. 1601. Remedial Services Costs and Medicaid Eligibility***

Requires remedial service costs to be used in determining medically-needy eligibility for those in adult foster care and homes for the aged.

#### ***Sec. 1603. Medical Services Buy-In Program***

Allows DCH to establish a statewide program for persons to purchase medical coverage at a rate determined by DCH.

#### ***Sec. 1605. Medicaid Protected Income Level***

Establishes the Medicaid protected income level at 100% of the public assistance standard.

#### ***Sec. 1606. Medicaid Eligibility Deduction for Guardian and Conservator Charges***

Limits the allowable deduction for guardian and conservator charges to \$60 per month when determining Medicaid eligibility and patient pay amounts.

#### ***Sec. 1607. Medicaid Presumptive Eligibility for Pregnant Women***

Stipulates that Medicaid applicants whose qualifying condition is pregnancy shall be presumed to be eligible unless the preponderance of evidence in the application indicates otherwise. Sets procedures to facilitate access to health care for pregnant women including provision of an authorization letter, a listing of Medicaid physicians and health plans, referral to public health clinics for ineligible persons, and allowing qualified applicants to select or remain with the participating obstetrician of her choice. Specifies that obstetrical and prenatal care claims are to be paid at Medicaid fee-for-service rates if there is no contract between provider and managed care plan. Mandates enrollment of Medicaid eligible pregnant women into Medicaid HMOs and requires DCH to encourage physicians to provide these women a referral to a Medicaid participating dentist at the first pregnancy-related appointment.

#### ***Sec. 1611. Medicaid Payment Rates***

Requires Medicaid payment rate to be accepted as payment in full, including payments from other third-party sources. Hospital service payments for persons dually eligible for Medicare and Medicaid are to include capital payments in determining Medicaid reimbursement amount.

## BOILERPLATE SECTION INFORMATION

### **Sec. 1620. Pharmacy Dispensing Fee and Prescription Drug Copayments**

Establishes the pharmacy dispensing fee at \$2.75 for recipients not in nursing homes and \$3.00 for nursing home residents, or the pharmacy's usual and customary charge, whichever is less. Specifies prescription copayments for Medicaid recipients of \$1.00 for generic drugs and \$3.00 for brand-name drugs except as prohibited by federal or state law or regulation. States legislative intent that if DCH realizes savings resulting from the way Medicaid pays pharmacists for prescriptions from average wholesale price to average manufacturer price, the savings shall be returned to pharmacies as an increase in the dispensing fee of no more than \$2.00.

### **Sec. 1629. Maximum Allowable Cost (MAC) Drug Pricing**

Requires DCH to base its MAC prices for generic drugs on pricing available from at least two wholesalers who deliver in Michigan.

### **Sec. 1631. Medical Services Copayments**

Requires copayments on dental, podiatric, and vision services unless prohibited by law or regulation. Specifies copayments of \$6 for a hospital emergency room visit, \$50 for the first day of an in-patient hospital stay, and \$1 for an out-patient hospital visit.

### **Sec. 1641. Institutional Provider Costs Reports**

Requires institutional providers to submit their cost reports within five months of the end of the fiscal year.

### **Sec. 1657. HMO Reimbursement for Hospital ER Service, and Medicaid ER Financial Incentives**

Requires reimbursement for emergency room (ER) services to screen and stabilize a patient without prior authorization by an HMO, and notice to the HMO regarding a patient's diagnosis and treatment within 24 hours of discharge; prior authorization by the HMO is required for further services beyond stabilization.

### **Sec. 1659. Applicable Boilerplate Sections for Medicaid Managed Care**

Specifies the Medical Services boilerplate sections that apply to Medicaid managed care programs.

### **Sec. 1662. Review and Analysis of HMO Performance, EPSDT and MIHP Technical Assistance**

Directs DCH to assure that an external quality review of each HMO is performed resulting in an analysis and evaluation of aggregated information on quality, timeliness, and access to health care services either contracted or directly provided to Medicaid beneficiaries; requires Medicaid HMOs to provide EPSDT utilization data and well child health measures; directs DCH to submit copies of analysis of HMO HEDIS reports and annual external quality review report within 30 days.

### **Sec. 1670. MICHild Program Eligibility**

Specifies that funds appropriated for MICHild program are to be used to provide health care to children under age 19 in families with income below 200% of federal poverty level who have not had health insurance within six months of making application for MICHild benefits. Allows DCH to provide up to one year of continuous eligibility for MICHild program unless family members no longer meet eligibility criteria or family fails to pay the monthly premium. Assures continuity of care for persons whose category of MICHild eligibility changes due to family income. Specifies income level and verification requirements to determine MICHild program eligibility. Requires DCH to contract with any qualified HMO, dental care corporation, health care corporation or other entity which offers to provide MICHild health care benefit at the capitated rate. Allows DCH to obtain certain MICHild services contractually through community mental health agencies. Requires DCH to assure that an external quality review of each MICHild services contractor is performed, which analyzes quality, timeliness, and access to health care services provided by the contractor to MICHild beneficiaries. Requires DCH to develop automatic enrollment algorithm based on quality and performance factors. MICHild services shall include treatments for autism spectrum disorders as defined in the federally approved Medicaid state plan.

### **Sec. 1673. MICHild Premiums and Prohibition on MICHild Copayments**

Allows DCH to establish premiums for eligible individuals above 150% of poverty level of \$10 to \$15 per month for a family.

### **Sec. 1677. MICHild Benefits**

Specifies the benefits to be covered by the MICHild program based on the state employee insurance plan.

## BOILERPLATE SECTION INFORMATION

### **Sec. 1682. OBRA Nursing Home Enforcement Provisions**

Authorizes DCH to implement federal nursing home enforcement provisions and receive/expend noncompliance penalty money; to provide funds to the Disability Network/Michigan to be distributed to 15 Centers for Independent Living for the purpose of assisting individuals with disabilities who reside in nursing homes to return to their homes; and to conduct a survey of residents, their families and employees, evaluating nursing home consumer satisfaction and quality of care. Unexpended penalty money may be carried forward to the next fiscal year.

### **Sec. 1689. Home- and Community-Based Services (HCBS) Waiver**

Requires a report by April 30 on the number of individuals transitioned from nursing homes; the number of individuals enrolled in MIChoice; the unique number of Medicaid individuals served; the number of days of care provided during the fiscal year; average cost per day; number of individuals on the waiting list, all as of September 30 of the previous fiscal year.

### **Sec. 1692. Medicaid School-Based Services**

Provides authorization for Medicaid reimbursement of school-based services.

### **Sec. 1693. Special Medicaid Reimbursement Payments Increase**

Allows for an increase in Special Medicaid Reimbursement payments if a Medicaid state plan amendment for such payments above the appropriated level is submitted.

### **Sec. 1694. Poison Control Services**

Requires distribution of \$378,000 GF/GP, and any associated federal match, for poison control services to an academic health care system that includes a children's hospital with high indigent care volume. A report on the adequacy of the funding amount shall be provided by the Department.

### **Sec. 1699. Disproportionate Share Hospital (DSH) and Graduate Medical Education (GME) Payments**

Authorizes separate payments for hospitals serving a disproportionate share of indigent patients in the amount of \$45.0 million, and those hospitals providing GME training programs. Distribution is based on a methodology used in FY 2003-04. A distribution report is due by September 30 of the current fiscal year.

### **Sec. 1724. Injectable Drugs for Respiratory Syncytial Virus**

Directs DCH to allow pharmacies to purchase injectable drugs for treatment of respiratory syncytial virus for shipment to physician's offices; allows Medicaid reimbursement for dispensing and administration if patients are eligible.

### **Sec. 1740. Graduate Medical Education Funds Distribution**

Requires assurance from DCH that all GME funds continue to be promptly distributed to hospitals using a methodology developed in consultation with the graduate medical education advisory group during FY 2006-07.

### **Sec. 1756. Beneficiary Monitoring Program**

Requires the Department to expand and improve the beneficiary monitoring program and provide a report to the Legislature.

### **Sec. 1757. Medicaid Applicants, Legal Residence, and Fugitive Felon Status**

Requires DCH to direct Department of Human Services to require Medicaid applicants to prove that they are residing legally in the United States and that they are residents of Michigan.

### **Sec. 1764. Actuarial Soundness Certification of Medicaid Health Plan Rates**

Requires DCH to annually certify that rates paid to Medicaid health plans and specialty prepaid inpatient health plans are actuarially sound and to notify the House, Senate, and fiscal agencies immediately upon rate certification and approval. The DCH shall include an economic impact of the approved rates on Medicaid health plans.

### **Sec. 1775. Medicaid Managed Care for Dual Eligibles**

Requires the Department to report to the Legislature quarterly on progress in implementing the federally-approved managed care waiver for dual Medicare/Medicaid eligibles.

### **Sec. 1777. Nursing Home Dining Assistants**

Directs DCH to permit nursing homes to use dining assistants to feed eligible residents, in accordance with federal and state law. DCH will not be responsible for training costs.

### **Sec. 1793. Pilot Project On Preventable Hospitalizations**

Requires the Department to consider the development of a pilot project focusing on the prevention of preventable hospitalizations from nursing homes.

## BOILERPLATE SECTION INFORMATION

### **Sec. 1804. Identification of Medicaid Beneficiaries Who Are War Veterans**

Requires DCH, in cooperation with Department of Human Services and the Department of Military and Veterans Affairs, to work with the federal government's public assistance reporting information system to identify Medicaid recipients who are veterans and may be eligible for federal veteran's health care benefits.

### **Sec. 1815. Cap on Health Plan Capitation Withhold**

Prohibits DCH from implementing a capitation withhold as part of overall health plan capitation rate schedule that exceeds the 0.19% withhold administered during FY 2008-09.

### **Sec. 1820. Recognition of Medicaid Health Plan Accreditation**

Requires the Department to give consideration to Medicaid health plan accreditation when establishing compliance with State program review criteria or audit requirements; includes a report requirement; requires the Department to continue to comply with federal and State laws and not initiate any action that would jeopardize beneficiary safety.

### **Sec. 1837. Telemedicine and Telepsychiatry Use in Underserved Areas**

Requires that DCH explore the use of telemedicine and telepsychiatry as a means to increase Medicaid recipients who reside in underserved areas access to primary care services.

### **Sec. 1842. Hospital Outpatient Medicaid Rate Adjustment**

Requires the Department, subject to the availability of funds and the hospital qualifying, to adjust outpatient Medicaid reimbursement rates to be the actual cost of delivering outpatient services to that hospital's Medicaid recipients. The term qualifying hospital is defined.

### **Sec. 1846. Graduate Medical Education Funding Effectiveness**

Requires the Department to conduct research on the effectiveness of graduate medical education (GME) funding. The research shall; identify physician shortages; efforts of other states using GME to address shortages; consider policy changes to GME to address shortages. A final report of the research will be produced.

### **Sec. 1847. Ambulance Quality Assurance Assessment Program**

By April 1, 2014 the Department shall explore the creation of a structure for an ambulance quality assurance assessment program in consultation with the Michigan Association of Ambulance Services.

### **Sec. 1850. Eligibility Redetermination by Medicaid Health Plans**

Department may allow HMOs to assist in redetermination of Medicaid recipient's eligibility.

### **Sec. 1854. Kidney Dialysis and Renal Care Health Homes**

The Department shall work with providers of kidney dialysis services and renal care to develop a chronic condition health home program for Medicaid enrollees; develop metrics to evaluate the program; submit a report to the Legislature.

### **Sec. 1857. Legislative Intent of Wheelchair Reimbursement**

Indicates Legislative intent that there be no reduction of Medicaid reimbursement for wheelchairs.

### **Sec. 1858. Autism Spectrum Disorder Treatment**

Includes treatment for autism spectrum disorders as a required service as defined in the federally approved state plan.

### **Sec. 1861. Nonemergency Medical Transportation Pilot Program**

The Department shall report by October 31, 2014, on the emergency medical transportation pilot program.

### **Sec. 1862. Obstetrical Rate Increase**

Requires the Department to continue the 20% obstetrical services reimbursement rate increase at not less than what was in effect on October 1, 2012.

### **Sec. 1865. Integrated Care for Dual Eligibles Administration Plan and Organizational Chart**

Requires the Department to report on how it intends to administer and oversee a federally approved proposal for integrated care for dual eligibles. The report shall include how the Department intends to organize staff in an integrated manner for effective implementation.

## BOILERPLATE SECTION INFORMATION

### **Sec. 1866. Rural Hospital Payments**

Requires the Department to award \$12.0 million GF/GP, and any associated federal Medicaid match, to hospitals providing services to low-income rural residents with those hospitals meeting certain criteria established by the Department and that one of the components of the distribution formula shall be assistance with labor and delivery services. No hospital or hospital system may receive more than 5% of the total distribution; DCH must provide each hospital the distribution methodology and data used to determine payment amounts by August 1, 2014; publish payment distribution information for both the immediate and preceding fiscal years; and submit a distribution report to the Legislature by April 1, 2014.

### **Sec. 1870. Graduate Medical Education Consortium and Demonstration Project**

The Department shall work on a collaborative plan to develop accredited physician-based primary care graduate medical education programs to enhance the training of primary care physicians in Michigan. The collaboration will be between the DCH and a consortium made up of medical school-affiliated faculty practice physician groups that are capable of developing free standing residency programs, referred to as the Michigan Graduate Medical Education Consortium. An action plan is due to the Legislature no later than March 31, 2014. The Department shall also explore seeking a federal waiver to implement a program similar to the one in the state of Utah.

### **Sec. 1872. Diabetes Quality of Care Project**

Requires the Department to consider creating a pilot program in consultation with the Michigan Podiatric Association to reduce costs for lower extremity diabetes care.

### **Sec. 1873. Hospital Funding Workgroup**

Directs the Department to report the findings of the workgroup established to discuss new ways to distribute funding paid for by the hospital quality assurance assessment program tax. A report is required.

### **Sec. 1874. Medicaid Fraud, Waste and Abuse Reduction**

Permits the DCH to explore ways of working with private providers to reduce Medicaid fraud, waste and abuse.

### **Sec. 1875. Expansion of Medicaid Home- and Community-Based Services**

Permits the Department to seek to expand home- and community-based services and seek federal match funding.

### **Sec. 1878. Integrated Health Care of Dual Eligibles - Ombudsman**

Encourages the Department to assure the existence of an ombudsman and ombudsman program for activities undertaken with a federally negotiated integrated health care for dual eligibles program.

### **Sec. 1879. Integrated Health Care of Dual Eligibles - Medicare Part D Benefit**

Directs the Department to seek to use Medicare Part D prescription drug coverage for any federally negotiated program of integrated health care for dual eligibles.

### **Sec. 1881. Enrollment of Newborns Into Medicaid HMOs**

Requires the Department to create a default eligibility and enrollment that assigns newborns, at birth, to the same Medicaid HMO as the mother.

### **Sec. 1883. Observation Stay Policy**

Directs the Department to consider developing an appropriate policy and rate for observation stays.

### **Sec. 1886. Medicaid Claim Maximization In Community-Based Treatment Programs for Youth**

Requires the Department to work with the Department of Human Services to determine how to maximize Medicaid claims for community-based and outpatient treatment services to foster care children and adjudicated youths who are placed in community-based treatment programs.

## **ONE-TIME APPROPRIATIONS**

### **Sec. 1901. Mental Health Innovations**

Permits DCH to expend funds to achieve mental health innovations which address emerging issues and improve mental health services for children. Provides that unexpended funds appropriated for mental health innovations are considered work project appropriations and any unencumbered or unallotted funds are carried forward into the fiscal year. Specifies that the following is in compliance with the work project provision of the Management and Budget Act, 1984 PA 431, MCL 18.1451a: the purpose of the project carried forward is to improve mental health services for children in Michigan; the project will be accomplished through early intervention focusing on training and awareness, home-based services, and care management and treatment for high-risk youth; the estimated completion cost is \$5 million; and the tentative completion date is September 30, 2018.

## BOILERPLATE SECTION INFORMATION

**Sec. 1902. University Autism Centers and Services**

Allocates \$500,000 each to four higher education institutions for university autism centers and services including Eastern Michigan University, Central Michigan University, Oakland University, and Western Michigan University.

**PART 2A**

**PROVISIONS CONCERNING ANTICIPATED APPROPRIATIONS FOR FISCAL YEAR 2014-2015**

**GENERAL SECTIONS**

**Sec. 2001. Fiscal Year 2014-15 Anticipated Appropriations**

Expresses Legislature's intent to provide appropriations for FY 2014-15 for the line items listed in Part 1 for FY 2013-14, except the line items will be adjusted for changes in caseload and related costs, federal fund match rates, economic factors, and available revenue. Provides that the adjustments will be determined after the January 2014 Consensus Revenue Estimating Conference.

**Sec. 2002. Retirement Costs for Fiscal Year 2014-15**

Expresses the Legislature's intent that the DCH identify the amounts for normal and legacy retirement costs for FY 2014-15 Part 1 line items.



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AREAS OF RESPONSIBILITY

Table with 2 columns: Area of Responsibility and Contact Name. Includes categories like Agriculture and Rural Development, Attorney General, Auditor General, etc.



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