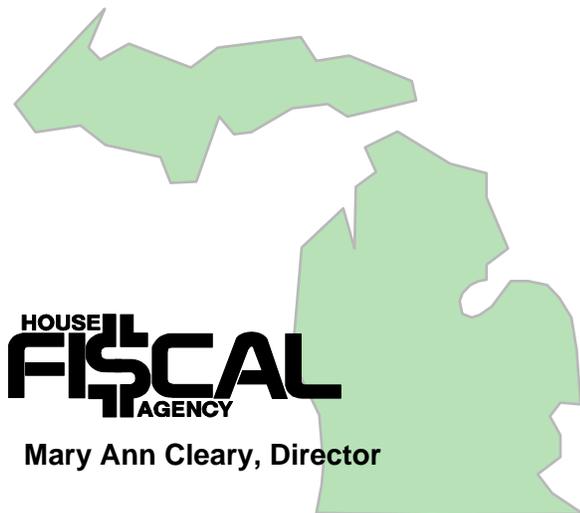


LINE ITEM AND BOILERPLATE SUMMARY

COMMUNITY HEALTH

Fiscal Year 2011-12
Article IV, Public Act 63 of 2011
House Bill 4526 as Enacted



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September 2011

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September 2011

TO: Members of the Michigan House of Representatives

The House Fiscal Agency has prepared a **Line Item Summary** for each of the FY 2011-12 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), or from Kathryn Bateson, Administrative Assistant (373-8080 or 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 the management of Michigan's publicly-funded health care systems. The Department, established by Executive Order in 1996, consolidated the former Departments of Mental Health and Public Health with Medicaid and the Office of Drug Control Policy (abolished 10/1/09). In 1997, the Adult Home Help Program, and the Social Services to the Physically Disabled Program were brought into DCH from the former Family Independence Agency (now the Department of Human Services). The Office of Services to the Aging and the Crime Victim Services Commission were transferred from the former Department of Management and Budget (now the Department of Technology, Management, and Budget) to DCH in 1997. The Bureaus of Health Services and Health Systems were transferred from the former Department of Consumer and Industry Services (now the Department of Licensing and Regulatory Affairs) in 2003. Executive Order 2011-4, effective April 23, 2011, transferred the Bureaus of Health Professions and Health Systems, Emergency Medical Services (Part 209 of the Public Health Code), and the Controlled Substances Advisory Commission to the Department of Licensing and Regulatory Affairs (the reorganized Department of Energy, Labor, and Economic Growth).

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 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 mission of the Public Health Administration is to protect and promote 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 Department's Medical Services unit provides health care coverage for low income persons throughout the state who meet the eligibility requirements for Medicaid, MICHild, and indigent care programs.

The mission of the Office of Services to the Aging is to promote independence and enhance the dignity of Michigan's older persons and their families through supportive programs, services, policies and advocacy.

The Crime Victim Services Commission's mission is to protect and enhance the health, safety, dignity and rights of victims of crime through programs and grants for services, support and victim compensation.

Full-time equated unclassified positions	6.0	Full-time equated (FTE) positions not in the state classified service.
Full-time equated classified positions	3,634.2	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.
GROSS APPROPRIATION \$14,241,316,400 Total of all applicable line item appropriations.		
Total interdepartmental grants/intradepartmental transfers	6,569,400	Total of all funds received from other departments and transfer of funds.
ADJUSTED GROSS APPROPRIATION	\$14,234,747,000	Total net amount of all line item gross appropriations less (or minus) interdepartmental grants (IDGs) and intradepartmental transfers (IDTs).
Total federal revenue	8,986,611,000	Total federal grant or matchable revenue.
Total local revenue	250,605,900	Total revenue from local units of government.
Total private revenue	96,494,700	Total private grant revenue.

Merit award trust fund	86,744,500	Total Merit Award Trust Fund revenue from the 1998 master settlement agreement with tobacco companies.
Total state restricted revenue	2,043,107,400	State revenue dedicated to a specific fund (other than the General Fund); or revenue earmarked for a specific purpose.
GENERAL FUND/ GENERAL PURPOSE	\$2,771,183,500	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

NOTE: The totals shown above correspond to the amounts shown in the summary unit of the budget article, which account only for standard line item appropriations. Additionally, a total of **\$52,962,800** in Gross appropriations is appropriated and designated for one-time purposes under boilerplate section 1901. The appropriations are funded from the following fund sources: **\$30,862,800** Federal and **\$22,100,000** GF/GP.

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	175.2	Full-time equated (FTE) positions in the state classified service.
Director and other unclassified – 6.0 FTE positions	\$583,900	Salaries of Director and five other unclassified positions; does not include fringe benefits. Funding Source(s): GF/GP 583,900 <i>Related Boilerplate Section(s): None</i>
Departmental administration and management – 165.2 FTE positions	21,787,400	Funds administrative staff carrying out powers and duties of DCH; includes FTEs in the Director's Office, Workforce Transformation, Budget Division, Accounting Division, Medicaid, Mental Health and MAIN Support Division, Office of Audit, and Grants and Purchasing Division including Infrastructure Services; funds various contracts and fringe benefits for unclassified FTE positions. Funding Source(s): Federal 8,637,600 Restricted 621,200 GF/GP 12,528,600 <i>Related Boilerplate Section(s): None</i>
Worker's compensation program	8,754,700	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 8,754,700 <i>Related Boilerplate Section(s): None</i>
Rent and building occupancy	9,252,200	Payments for rental space in privately-owned buildings statewide (Chandler Building, Mercantile Building, Capital Commons, Washington Square, and Capitol View Building); payments to DTMB for rent, security, and operating costs of state-owned buildings. Funding Source(s): Federal 2,139,400 Private 35,100 Restricted 128,300 GF/GP 6,949,400 <i>Related Boilerplate Section(s): None</i>
Developmental disabilities council and projects – 10.0 FTE positions	2,855,700	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 2,855,700 <i>Related Boilerplate Section(s): None</i>
GROSS APPROPRIATION	\$43,233,900	Total of all applicable line item appropriations.

Total federal revenue	13,632,700	Includes Title XIX of the Social Security Act Medicaid funds, Title XIX of the Social Security Act Medicaid random moment sampling cost revenue, Title XXI of the Social Security Act State Children's Health Insurance Program funds, random moment sampling 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 revenue	35,100	Parking fees realized from DCH employees parking at Capitol Commons privately-owned building.
Total state restricted revenue	749,500	Includes Michigan Health Initiative Fund revenue, newborn screening fees, and certificate of need (CON) fees.
GENERAL FUND/ GENERAL PURPOSE	\$28,816,600	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

**SECTION 103: MENTAL HEALTH/SUBSTANCE ABUSE SERVICES
ADMINISTRATION AND SPECIAL PROJECTS**

This appropriation unit contains funding for the administration of mental health and substance abuse services, several mental health and substance abuse programs, 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	111.5	Full-time equated (FTE) positions in the state classified service.						
Mental health/substance abuse program administration – 110.5 FTE positions	\$17,586,800	<p>Funds staff administering mental health and substance abuse programs for DCH such as Deputy Director for Behavioral Health and Developmental Disabilities Administration, Bureau of Administration, Bureau of Substance Abuse and Addiction Services (formerly the Office of Drug Control Policy), Bureau of Hospital, Center for Forensic Mental Health Services, Office of Recipient Rights, and Bureau of Community Mental Health Services; finances mental health and substance abuse program administration contracts; private funds to evaluate Assertive Community Treatment (ACT) services and outcomes for persons with serious mental illness and assess relationship of ACT program practices to consumer outcomes; private funds to continue substance abuse, monitoring, and surveillance; 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; new federal funds for the enhancement and data sharing on mental and physical health care for individuals served within the public health system.</p> <p align="right">Funding Source(s):</p> <table border="0"> <tr> <td>Federal</td> <td align="right">5,832,700</td> </tr> <tr> <td>Private</td> <td align="right">390,000</td> </tr> <tr> <td>GF/GP</td> <td align="right">11,364,100</td> </tr> </table> <p align="center"><i>Related Boilerplate Section(s): None</i></p>	Federal	5,832,700	Private	390,000	GF/GP	11,364,100
Federal	5,832,700							
Private	390,000							
GF/GP	11,364,100							
Gambling addiction – 1.0 FTE position	3,000,000	<p>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.</p> <p align="right">Funding Source(s):</p> <table border="0"> <tr> <td>Restricted</td> <td align="right">3,000,000</td> </tr> </table> <p align="center"><i>Related Boilerplate Section(s): None</i></p>	Restricted	3,000,000				
Restricted	3,000,000							
Protection and advocacy services support	194,400	<p>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.</p> <p align="right">Funding Source(s):</p> <table border="0"> <tr> <td>GF/GP</td> <td align="right">194,400</td> </tr> </table> <p align="center"><i>Related Boilerplate Section(s): None</i></p>	GF/GP	194,400				
GF/GP	194,400							
Community residential and support services	1,777,200	<p>Finances community residential leases under DCH responsibility; expired lease arrangements transferred to the financial responsibility of CMHSPs.</p> <p align="right">Funding Source(s):</p> <table border="0"> <tr> <td>Federal</td> <td align="right">700,000</td> </tr> <tr> <td>GF/GP</td> <td align="right">1,077,200</td> </tr> </table> <p align="center"><i>Related Boilerplate Section(s): None</i></p>	Federal	700,000	GF/GP	1,077,200		
Federal	700,000							
GF/GP	1,077,200							

Federal and other special projects	2,497,200	Contingency funding authorization for federal grants if they become available and grants to: improve the delivery and coordination of services related to traumatic brain injury; improve competitive employment opportunities for individuals with developmental disabilities; develop and implement an integrated approach to parent leadership on human services policies; and decrease the incidence of fetal alcohol syndrome disease for women of child-bearing age or pregnant women in substance abuse treatment programs. Funding Source(s): Federal 2,497,200 <i>Related Boilerplate Section(s): None</i>
Family support subsidy	19,470,500	Provides \$222.11 monthly payment to an average of 7,159 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): Federal 19,470,500 <i>Related Boilerplate Section(s): None</i>
Housing and support services	9,306,800	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 8,601,200 GF/GP 705,600 <i>Related Boilerplate Section(s): None</i>
GROSS APPROPRIATION	\$53,832,900	Total of all applicable line item appropriations.
Total federal revenue	37,101,600	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), and temporary assistance for needy families (TANF), and the following grants: housing opportunities for persons with AIDS (HOPWA), Medicaid Infrastructure to Support the Competitive Employment of People with Disabilities, synectics annual award, federal Department of Education Early On, shelter plus care, Supportive Housing Program (SHP-PATH), Supportive Housing Program (SHP-Chronic), state mental health infrastructure, fetal alcohol syndrome disease prevention, new freedom initiative, parent leadership, and state data infrastructure grant (enhanced information for integrated health project).
Total private revenue	390,000	Private funds from the Flinn Family Foundation and State Epidemiological Outcome Workgroup.
Total state restricted revenue	3,000,000	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.
GENERAL FUND/ GENERAL PURPOSE	\$13,341,300	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

SECTION 104: COMMUNITY MENTAL HEALTH/SUBSTANCE ABUSE SERVICES PROGRAMS

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 persons 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 waiver provisions. 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 for 16 coordinating agencies 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	\$2,149,977,900	<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 style="padding-right: 20px;">Federal</td> <td style="text-align: right;">1,421,995,400</td> </tr> <tr> <td style="padding-right: 20px;">Restricted</td> <td style="text-align: right;">20,530,700</td> </tr> <tr> <td style="padding-right: 20px;">Local</td> <td style="text-align: right;">25,228,900</td> </tr> <tr> <td style="padding-right: 20px;">GF/GP</td> <td style="text-align: right;">682,222,900</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 401, 402, 404, 411, 418, 428, 470, 474, 491, 494, 495, 496</i></p>	Federal	1,421,995,400	Restricted	20,530,700	Local	25,228,900	GF/GP	682,222,900
Federal	1,421,995,400									
Restricted	20,530,700									
Local	25,228,900									
GF/GP	682,222,900									
Community mental health non-Medicaid services	273,908,100	<p>Non-Medicaid funds to CMHSPs or PIHPs 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 PIHP, 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 style="padding-right: 20px;">GF/GP</td> <td style="text-align: right;">273,908,100</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 401, 402, 404, 411, 428, 462, 470, 474, 490, 492, 494, 496</i></p>	GF/GP	273,908,100						
GF/GP	273,908,100									
Medicaid adult benefits waiver	32,056,100	<p>Funds to CMHSPs or PIHPs to provide limited mental health and substance abuse services to an average of 49,700 low-income childless eligible adults; beneficiaries are paid under a prepaid capitation basis with CMHSPs and coordinating agencies.</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;">21,201,900</td> </tr> <tr> <td style="padding-right: 20px;">GF/GP</td> <td style="text-align: right;">10,854,200</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>	Federal	21,201,900	GF/GP	10,854,200				
Federal	21,201,900									
GF/GP	10,854,200									
Mental health services for special populations	5,842,800	<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, and Vietnam Veterans; does not include one-time boilerplate appropriation of \$3.0 million GF/GP.</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;">5,842,800</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 403, 1901</i></p>	GF/GP	5,842,800						
GF/GP	5,842,800									

Medicaid substance abuse services	46,709,700	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; PIHPs that are not coordinating agencies for substance abuse services may contract with coordinating agencies for services. Funding Source(s): Federal 30,893,800 GF/GP 15,815,900 <i>Related Boilerplate Section(s): 402, 404, 410, 418, 428, 470, 490</i>
CMHSP, purchase of state services contracts	134,201,900	Used by CMHSPs or PIHPs 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 134,201,900 <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	15,397,500	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 15,397,500 <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, or emancipated minors who reside in substance abuse residential facilities, and persons who do not qualify for SSI. Funding Source(s): GF/GP 2,018,800 <i>Related Boilerplate Section(s): 282, 406, 408, 410, 468, 470, 490</i>
Community substance abuse prevention, education, and treatment programs	81,737,500	Funds primarily distributed to 16 coordinating agencies 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 67,160,800 Restricted 1,784,200 GF/GP 12,792,500 <i>Related Boilerplate Section(s): 282, 407, 408, 410, 412, 468, 470, 490, 497</i>
Children's waiver home care program	18,944,800	Home and community-based services for 464 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. Funding Source(s): Federal 13,038,000 GF/GP 5,906,800 <i>Related Boilerplate Section(s): None</i>

Nursing home PAS/ARR – OBRA – 7.0 FTE positions	12,179,300	Staff, supplies, related costs, and contracts for implementing the federal mandate addressing inappropriate placement in nursing homes of persons who are mentally ill or developmental 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 9,462,100 GF/GP 2,717,200

Related Boilerplate Section(s): None

Children with serious emotional disturbance waiver	8,188,000	Implements federally-approved waiver in eighteen counties and 12 CMHSPs that provide home and community-based mental health services to up to 357 eligible children with serious emotional disturbance, including a program with the DHS that provides services for abused and neglected children.
		Funding Source(s): IDG 2,769,000 Federal 5,419,000

Related Boilerplate Section(s): None

GROSS APPROPRIATION \$2,782,661,700 Total of all applicable line item appropriations.

Interdepartmental grant from the department of human services	2,769,000	Federal funds from the Department of Human Services for the children with serious emotional disturbance waiver.
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Total federal revenue	1,584,568,500	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.
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Total local revenue	25,228,900	Received from CMHSPs or PIHPs.
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Total state restricted revenue	22,314,900	Includes substance abuse licensing fees and fines, and quality assurance assessment program (QAAP) revenue.
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GENERAL FUND/ GENERAL PURPOSE	\$1,147,780,400	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: two state-operated psychiatric hospitals for adults with mental illness and persons with developmental disabilities; one state-operated psychiatric hospital 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 2,194.2 Full-time equated (FTE) positions in the state classified service.

Caro Regional Mental Health Center-psychiatric hospital – adult – 468.3 FTE positions
185.0 average population

\$56,772,200 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 and persons with developmental disabilities.

Funding Source(s):	Federal	7,376,000
	Local	3,677,000
	CMHSP	41,953,800
	Restricted	3,765,400

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

Kalamazoo Psychiatric Hospital – adult – 483.1 FTE positions
189.0 average population

54,782,400 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 persons with developmental disabilities.

Funding Source(s):	Federal	2,000,500
	Local	3,425,000
	CMHSP	43,329,400
	Restricted	6,027,500

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

Walter P. Reuther Psychiatric Hospital – adult – 433.3 FTE positions
234.0 average population

52,297,800 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	1,853,300
	Local	4,312,300
	CMHSP	42,304,300
	Restricted	3,827,900

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

Hawthorn Center – psychiatric hospital – children and adolescents – 230.9 FTE positions
75.0 average population

27,075,900 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	18,187,300
	Local	1,449,300
	CMHSP	6,614,400
	Restricted	824,900

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

Center for forensic psychiatry – 578.6 FTE positions <i>210.0 average population</i>	66,767,900	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 9,100 Local 4,630,900 Restricted 795,200 GF/GP 61,332,700
<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>			
GROSS APPROPRIATION	\$260,344,300	Total of all applicable line item appropriations.	
Total federal revenue	29,921,200	Includes Title XIX of the Social Security Act Medicaid funds, national school lunch program revenue, and Title I of the Individuals with Disabilities Education Act (IDEA) funds.	
CMHSP, purchase of state services contracts	134,201,900	Funds from CMHSPs and PIHPs, as part of authorization process, to offset line item in Community Mental Health/Substance Abuse Services Programs appropriation unit.	
Other local revenue	17,494,500	County match revenue and local school aid funds.	
Total private revenue	1,000,000	Patient gifts and bequests.	

Total state restricted revenue	15,948,400	Includes miscellaneous, first and third party reimbursement, and lease and rental revenue.
GENERAL FUND/ GENERAL PURPOSE	\$61,778,300	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

SECTION 106: PUBLIC HEALTH ADMINISTRATION

This appropriation unit provides funding for the administrative, policy, and leadership functions necessary to ensure the implementation of the public health mission, address health disparities of minority populations, record the state's vital events, and promote healthy behaviors.

Full-time equated classified positions	91.7	Full-time equated (FTE) positions in the state classified service.
Public health administration – 7.3 FTE positions	\$1,557,200	FTEs, contractual services, and other related costs for administration of community public health. <div style="text-align: right; margin-left: 200px;"> Funding Source(s): Federal 92,100 Restricted 210,600 GF/GP 1,254,500 </div>
<i>Related Boilerplate Section(s): 218, 653</i>		
Healthy Michigan fund programs	5,000,000	New line item established to consolidate individual Healthy Michigan Fund (HMF) public health prevention project appropriations at a total funding level for projects of \$5.0 million. DCH planned allocations of the \$5.0 HMF as of 9/7/2011 are for cardiovascular health, health disparities, Michigan care improvement immunization registry, smoking prevention, and local public health accreditation programs. See also boilerplate sections 1901 and 1902 related to additional one-time basis HMF program appropriations of \$3.0 million GF/GP for public health prevention projects in FY 2011-12. DCH planned allocations of this funding as of 9/7/2011 are for cancer, diabetes, health disparities, school health, and pregnancy prevention programs. <div style="text-align: right; margin-left: 200px;"> Funding Source(s): Restricted 5,000,000 </div>
<i>Related Boilerplate Section(s): 1135</i>		
Minority health grants and contracts – 3.0 FTE positions	612,700	Program costs and contracts to improve health status of minority populations and reduce health disparities through prevention, health promotion, screening, and dental programs for African-Americans, Hispanic/Latinos, Arab/Chaldeans, American Indians, and Asian/Pacific Islanders. <div style="text-align: right; margin-left: 200px;"> Funding Source(s): Federal 612,700 </div>
<i>Related Boilerplate Section(s): None</i>		
Promotion of healthy behaviors	975,900	Extended final year of funding for the four-year Generation With Promise project of middle-school student-led programs in underserved communities to improve health related behaviors and address health disparities; and nutrition education for food stamp recipients in collaboration with Department of Human Services and Michigan State University Extension. <div style="text-align: right; margin-left: 200px;"> Funding Source(s): Federal 675,900 Private 300,000 </div>
<i>Related Boilerplate Section(s): None</i>		

Vital records and health statistics – 81.4 FTE positions	9,442,800	FTEs, related costs, and contracts to administer state's vital records and statistics system: register all vital events; maintain repository of vital record documents; maintain data and electronic transferal systems; issue certified copies of records; amend vital records; conduct surveillance of vital events; conduct fraud detection; vital records improvement projects; report on mortality, morbidity, and certain conditions including cancer and birth defects; maintain birth verification system for Medicaid program and paternity registry for Department of Human Services, Friend of the Court, and prosecutors' offices; and data services agreements with Michigan State University.
		Funding Source(s):
		IDG
		Federal
		Restricted
		1,171,500
		3,507,200
		4,764,100

Related Boilerplate Section(s): None

GROSS APPROPRIATION	\$17,588,600	Total of all applicable line item appropriations.
Interdepartmental grant from the department of human services	1,171,500	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 revenue	4,887,900	Social Security Act Title XIX Medicaid funds, preventive health and health services block grant, CDC vital statistics grants, cancer registry grant, social security birth and death enumeration grants, minority health state partnership grant, and Michigan nutrition network food stamp nutrition education grant.
Total private revenue	300,000	Private Generation With Promise grant from the W. K. Kellogg Foundation for promotion of healthy behaviors.
Total state restricted revenue	9,974,700	Fee revenue from vital records services and data services agreements, Michigan Health Initiative Fund revenue from software tax (1987 PA 258), and Healthy Michigan Fund revenue from cigarette tax (3.75% of gross collections).
GENERAL FUND/ GENERAL PURPOSE	\$1,254,500	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

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 Certificate of Need (CON) Program Administration, Rural Health Services, Michigan Essential Health Care Provider Program, and Primary Care Services.

Full-time equated classified positions	66.8	Full-time equated (FTE) positions in the state classified service.									
Emergency medical services program state staff – 23.0 FTE positions	\$4,850,300	<p>Emergency Medical Services (EMS) and Trauma Section license and re-licenses approximately 828 medical first responder and life support agencies and 3,303 life support vehicles and 30,400 EMS personnel; approve medical control authorities which provide community based pre-hospital emergency care oversight; includes funding for statewide trauma system.</p> <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">216,300</td> </tr> <tr> <td></td> <td>Restricted</td> <td style="text-align: right;">4,277,800</td> </tr> <tr> <td></td> <td>GF/GP</td> <td style="text-align: right;">356,200</td> </tr> </table> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>	Funding Source(s):	Federal	216,300		Restricted	4,277,800		GF/GP	356,200
Funding Source(s):	Federal	216,300									
	Restricted	4,277,800									
	GF/GP	356,200									
Emergency medical services grants and services	660,000	<p>Contracts administered by EMS Section for continuing education, agency and vehicle inspections; administers licensure examinations.</p> <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">660,000</td> </tr> </table> <p style="text-align: center;"><i>Related Boilerplate Section(s): 704</i></p>	Funding Source(s):	Federal	660,000						
Funding Source(s):	Federal	660,000									
Health policy administration – 24.4 FTE positions	4,150,800	<p>Includes staff support for the Health Policy and Access Division as well as the Bureau of Legal and Policy Affairs, Appeals Section.</p> <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">IDG</td> <td style="text-align: right;">1,296,500</td> </tr> <tr> <td></td> <td>Federal</td> <td style="text-align: right;">974,400</td> </tr> <tr> <td></td> <td>GF/GP</td> <td style="text-align: right;">1,879,900</td> </tr> </table> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>	Funding Source(s):	IDG	1,296,500		Federal	974,400		GF/GP	1,879,900
Funding Source(s):	IDG	1,296,500									
	Federal	974,400									
	GF/GP	1,879,900									
Nurse education and research program – 3.0 FTE positions	744,200	<p>Promotes safe patient care in all nursing practice environments, advances the safe practice of the nursing profession, assures continuous supply of high-quality direct care nurses, nursing faculty, and nursing education programs; funds Chief Nurse Executive.</p> <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">IDG</td> <td style="text-align: right;">744,200</td> </tr> </table> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>	Funding Source(s):	IDG	744,200						
Funding Source(s):	IDG	744,200									
Certificate of need program administration – 14.0 FTE positions	2,071,100	<p>FTEs, contractual services, supplies, travel, equipment and other costs to carry out Certificate of Need (CON) program (state regulatory program to balance cost, quality, and access issues, and ensure that only needed health services and facilities are developed in Michigan).</p> <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">IDG</td> <td style="text-align: right;">116,300</td> </tr> <tr> <td></td> <td>Restricted</td> <td style="text-align: right;">1,954,800</td> </tr> </table> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>	Funding Source(s):	IDG	116,300		Restricted	1,954,800			
Funding Source(s):	IDG	116,300									
	Restricted	1,954,800									

Rural health services – 1.0 FTE position	1,410,300	Contract to Michigan Center for Rural Health to coordinate, plan, and advocate for improved health and health care for residents in rural areas, assist small rural hospitals to comply with federal privacy and prospective pay system guidelines, and provide technical assistance to DCH on rural health issues and programs. Funding Source(s): Federal 1,284,300 GF/GP 126,000
<i>Related Boilerplate Section(s): None</i>		
Michigan essential health provider	872,700	Assist primary care physicians, psychiatrists, dentists, nurse practitioners, nurse midwives, and physician assistants who practice in designated medically underserved and health professional shortage areas in the repayment of health education loans. Funding Source(s): Federal 436,300 Local 100,000 Private 255,000 GF/GP 81,400
<i>Related Boilerplate Section(s): 709</i>		
Primary care services – 1.4 FTE positions	2,886,900	Grants to community health centers for primary health care, outreach, and health education services in medically underserved and health professional shortage areas; funds equally distributed to free health clinics; funds for rural health services; does not include one-time boilerplate appropriation of \$300,000 GF/GP for island health clinics. Funding Source(s): Federal 1,861,300 GF/GP 1,025,600
<i>Related Boilerplate Section(s): 712, 713, 1901</i>		
GROSS APPROPRIATION	\$17,646,300	Total of all applicable line item appropriations.
Interdepartmental grant from the department of treasury, Michigan state hospital finance authority	116,300	From Department of Treasury's Michigan State Hospital Finance Authority for part of costs related to certificate of need program.
Interdepartmental grant from the department of licensing and regulatory affairs	2,040,700	From Department of Licensing and Regulatory Affairs for part and all of the costs respectively related to health policy administration and nurse education and research program.
Total federal revenue	5,432,600	Includes Title XIX of the Social Security Act 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, and primary care.
Total local revenue	100,000	Local match provided by CMHSPs for federal state loan repayment program revenue.
Total private revenue	255,000	Realized from loan repayments on behalf of primary care providers in underserved areas.
Total state restricted revenue	6,232,600	Includes fees assessed against convicted defendants and deposited in Crime Victim's Rights Services Fund, CON fee revenue, and emergency medical services fees.
GENERAL FUND/ GENERAL PURPOSE	\$3,469,100	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

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	50.7	Full-time equated (FTE) positions in the state classified service.						
AIDS prevention, testing, and care programs – 12.7 FTE positions	\$59,449,300	<p>FTEs, related costs, laboratory services, and grants to local health departments and other agencies for: HIV 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.</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;">27,103,700</td> </tr> <tr> <td>Private</td> <td style="text-align: right;">27,707,700</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">4,637,900</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 218, 804</i></p>	Federal	27,103,700	Private	27,707,700	Restricted	4,637,900
Federal	27,103,700							
Private	27,707,700							
Restricted	4,637,900							
Immunization local agreements	11,975,200	<p>Funds to local public health departments, community health centers, and other agencies for 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, and other 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;">Federal</td> <td style="text-align: right;">9,428,200</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;">1,697,000</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 218</i></p>	Federal	9,428,200	Restricted	850,000	GF/GP	1,697,000
Federal	9,428,200							
Restricted	850,000							
GF/GP	1,697,000							
Immunization program management and field support – 15.0 FTE positions	1,786,300	<p>FTEs and related costs to administer state immunization program including disease surveillance and disease outbreak control.</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;">1,436,000</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">350,300</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 218</i></p>	Federal	1,436,000	GF/GP	350,300		
Federal	1,436,000							
GF/GP	350,300							
Pediatric AIDS prevention and control – 1.0 FTE position	1,231,400	<p>FTE and contract costs 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;">1,231,400</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 218</i></p>	Federal	1,231,400				
Federal	1,231,400							
Sexually transmitted disease control local agreements	3,360,700	<p>Funds to local public health departments to monitor and control the occurrence of sexually transmitted diseases in the state, especially in the 15 highest incidence areas representing over 90% of all cases, for surveillance, investigation, diagnosis, primary treatment, screening, casefinding, prevention, laboratory services, and special 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;">Federal</td> <td style="text-align: right;">3,185,500</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">175,200</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 218, 1103</i></p>	Federal	3,185,500	GF/GP	175,200		
Federal	3,185,500							
GF/GP	175,200							

Sexually transmitted disease control management and field support – 22.0 FTE positions	3,743,300	FTEs and related costs for state administration to monitor the occurrence of sexually transmitted diseases, promote prevention and education, and provide support for state, local and national STD control goals; and funding for primary STD treatment drugs and laboratory costs.
		Funding Source(s):
		Federal
		Restricted
		GF/GP
		1,156,400
		1,982,700
		604,200

Related Boilerplate Section(s): 218, 1103

GROSS APPROPRIATION	\$81,546,200	Total of all applicable line item appropriations.
Total federal revenue	43,541,200	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 ADAP (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, and Social Security Act Title XIX Medicaid funds.
Total private revenue	27,707,700	Private funds from pharmaceutical manufacturer rebates for AIDS drug assistance program.
Total state restricted revenue	7,470,600	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.
GENERAL FUND/ GENERAL PURPOSE	\$2,826,700	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

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	111.0	Full-time equated (FTE) positions in the state classified service.								
Laboratory services – 111.0 FTE positions	\$17,183,900	<p>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; funds for regional and local laboratory services; and test, monitor and evaluate occurrence of drug-resistant staph infections in collaboration with epidemiology staff.</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;">471,900</td> </tr> <tr> <td>Federal</td> <td style="text-align: right;">2,092,300</td> </tr> <tr> <td>Restricted</td> <td style="text-align: right;">8,267,600</td> </tr> <tr> <td>GF/GP</td> <td style="text-align: right;">6,352,100</td> </tr> </table>	IDG	471,900	Federal	2,092,300	Restricted	8,267,600	GF/GP	6,352,100
IDG	471,900									
Federal	2,092,300									
Restricted	8,267,600									
GF/GP	6,352,100									
<i>Related Boilerplate Section(s): None</i>										
GROSS APPROPRIATION	\$17,183,900	Total of all applicable line item appropriations.								
Interdepartmental grant from the department of environmental quality	471,900	Grant from the Department of Environmental Quality for costs related to laboratory testing and analysis of Michigan fish for chemical contaminants.								
Total federal revenue	2,092,300	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, and food emergency response network grant.								
Total state restricted revenue	8,267,600	Fee revenue collected for laboratory services and for newborn screening services, and Michigan Health Initiative Fund revenue from the software tax (1987 PA 258).								
GENERAL FUND/ GENERAL PURPOSE	\$6,352,100	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.								

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	126.7	Full-time equated (FTE) positions in the state classified service.
AIDS surveillance and prevention program	\$2,254,100	<p>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.</p> <p style="text-align: right;">Funding Source(s): Federal 2,254,100</p> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>
Asthma prevention and control – 2.6 FTE positions	856,900	<p>FTEs and contracts for statewide and community-based asthma programs for surveillance, elimination of disparities, patient and provider education, public awareness, school-based programs, environmental quality programs, implement Michigan Asthma Strategic Plan, and Michigan Asthma Communication Network.</p> <p style="text-align: right;">Funding Source(s): Federal 856,900</p> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>
Bioterrorism preparedness – 66.6 FTE positions	49,286,900	<p>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; hospital preparedness funds are administered through eight regional medical control authorities.</p> <p style="text-align: right;">Funding Source(s): Federal 49,286,900</p> <p style="text-align: center;"><i>Related Boilerplate Section(s): None</i></p>

Epidemiology administration – 40.0 FTE positions	8,202,000	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 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; develop lupus registry; evaluate occurrence of drug-resistant staph infections; viral hepatitis prevention initiative; human papillomavirus (HPV) study; national children's study; birth defects prevention materials on preconception health behaviors; surveillance data file preparation for university research; precancerous lesion registry and study; licensing of body art facilities; develop and implement a climate and health adaptation plan; and other related projects.
		Funding Source(s):
		Federal
		Private
		Restricted
		GF/GP
		6,042,800
		25,000
		346,000
		1,788,200

Related Boilerplate Section(s): 650

Lead abatement program – 7.0 FTE positions	2,647,700	FTEs, related costs, and contracts for: 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; and Healthy Homes indoor environmental asthma and injury demonstration project in Ingham County.
		Funding Source(s):
		Federal
		Restricted
		1,963,600
		684,100

Related Boilerplate Section(s): None

Newborn screening follow-up and treatment services – 10.5 FTE positions	5,337,800	FTEs, related costs, and contracts to screen all newborn infants for hearing impairment and 49 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.
		Funding Source(s):
		Restricted
		5,337,800

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

GROSS APPROPRIATION	\$69,452,400	Total of all applicable line item appropriations.
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Total federal revenue	61,271,300	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, CDC public health preparedness and response for bioterrorism, ASPR (assistant secretary for preparedness and response) bioterrorism hospital preparedness, behavioral risk factor surveillance, asthma, arthritis/lupus, 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, pregnancy risk assessment monitoring system (PRAMS), adult viral hepatitis prevention coordinator, national children's study, 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, EPA Michigan fish advisory, EPA eat safe fish and game, hemoglobinopathy surveillance, and CDC maternal and child health infertility project.
Total private revenue	25,000	Grant from March of Dimes for work related to birth defects including prevention materials on preconception health behaviors.
Total state restricted revenue	6,367,900	Fee revenue collected from: newborn screening program, lead abatement professional worker certification, body art facility licenses, and surveillance data file fees; and Michigan Health Initiative Fund revenue from software tax (1987 PA 258).
GENERAL FUND/ GENERAL PURPOSE	\$1,788,200	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

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	75.5	Full-time equated (FTE) positions in the state classified service.												
Cancer prevention and control program – 12.0 FTE positions	\$14,298,200	<p>FTEs, related costs, and contracts for cancer prevention and control including prevention activities, screening and follow-up services for breast, cervical, prostate, and colorectal cancer, public and provider education, early detection awareness, Michigan Cancer Consortium support, heart and chronic disease screening and referrals (WISEWOMAN), and federal demonstration project to focus on successful cancer, tobacco, and obesity strategies.</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">13,033,700</td> </tr> <tr> <td></td> <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): 1004, 1902</i></p>	Funding Source(s):	Federal	13,033,700		GF/GP	1,264,500						
Funding Source(s):	Federal	13,033,700												
	GF/GP	1,264,500												
Chronic disease control and health promotion administration – 33.4 FTE positions	5,950,100	<p>FTEs, related costs, and contracts for the following: division administration and infrastructure for health promotion and chronic disease prevention; chronic disease surveillance activities; 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; establishment of statewide stroke registry for acute care hospitals; childhood obesity prevention project with Michigan State University; safe routes to schools program; and Michigan nutrition network projects in schools and communities.</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">4,968,900</td> </tr> <tr> <td></td> <td>Private</td> <td style="text-align: right;">61,600</td> </tr> <tr> <td></td> <td>Restricted</td> <td style="text-align: right;">468,000</td> </tr> <tr> <td></td> <td>GF/GP</td> <td style="text-align: right;">451,600</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>	Funding Source(s):	Federal	4,968,900		Private	61,600		Restricted	468,000		GF/GP	451,600
Funding Source(s):	Federal	4,968,900												
	Private	61,600												
	Restricted	468,000												
	GF/GP	451,600												
Diabetes and kidney program – 12.2 FTE positions	1,777,600	<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 implementation of the State Chronic Kidney Disease Strategic Plan.</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">1,595,900</td> </tr> <tr> <td></td> <td>Restricted</td> <td style="text-align: right;">181,700</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>	Funding Source(s):	Federal	1,595,900		Restricted	181,700						
Funding Source(s):	Federal	1,595,900												
	Restricted	181,700												
Public health traffic safety coordination – 1.0 FTE position	87,500	<p>FTE, costs and contracts for projects to prevent motor vehicle-related injuries to children, and to promote parent involvement with children learning to drive.</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">87,500</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>	Funding Source(s):	Federal	87,500									
Funding Source(s):	Federal	87,500												

Smoking prevention program – 14.0 FTE positions	2,075,000	FTEs, related costs, and contracts for smoking prevention and cessation programs including: smoking cessation hotline; free nicotine Quit Kits and nicotine replacement therapy; 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 2,075,000 <i>Related Boilerplate Section(s): None</i>
Violence prevention – 2.9 FTE positions	2,123,200	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 2,123,200 <i>Related Boilerplate Section(s): None</i>
GROSS APPROPRIATION	\$26,311,600	Total of all applicable line item appropriations.
Total federal revenue	23,884,200	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, prostate cancer, ovarian cancer, colorectal cancer, arthritis, lupus, tobacco use prevention, well integrated screening and evaluation for women across the nation (WISEWOMAN), rape prevention and education, obesity, Great Lakes stroke network, 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, translating the checkpoints (traffic safety), healthy communities, violent death reporting system, investigations and technical assistance for demonstrating the capacity of comprehensive cancer control programs, and safe routes to schools via Michigan Department of Transportation and Michigan Fitness Foundation.
Total private revenue	61,600	Private Robert Wood Johnson Foundation grant through Michigan State University for building evidence to prevent childhood obesity.
Total state restricted revenue	649,700	Michigan Health Initiative Fund revenue from software tax (1987 PA 258).
GENERAL FUND/ GENERAL PURPOSE	\$1,716,100	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

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</i>					
Prenatal care outreach and service delivery support	3,794,200	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.	Funding Source(s):	Federal GF/GP	2,294,200 1,500,000
<i>Related Boilerplate Section(s): 218, 1103, 1104, 1117</i>					
Special projects – 2.5 FTE positions	8,397,800	Grants and contracts for maternal and child health special projects: 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, evidence-based maternal, infant, and early childhood home visiting program for families in at-risk communities, birth through age 8 child wellness Project LAUNCH program, first time motherhood and new parents initiative, sexual abstinence and contraception education and personal responsibility programs for teenagers, and other projects.	Funding Source(s):	Federal GF/GP	8,179,900 217,900
<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; risk reduction education for the public and for health care and child care providers; and reporting and surveillance.	Funding Source(s):	Federal	321,300
<i>Related Boilerplate Section(s): None</i>					
GROSS APPROPRIATION	\$38,008,300	Total of all applicable line item appropriations.			

Total federal revenue	32,846,800	Includes the following federal grants: preventive health and health services block, maternal and child health services block, childhood lead poisoning prevention and surveillance, 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, children's oral healthcare access, project LAUNCH - linking actions for unmet needs in children's health, SPRANS - first time motherhood and new parents initiative, abstinence education, personal responsibility education program, and Patient Protection and Affordable Care Act maternal, infant, and early childhood home visiting program grant.
Total local revenue	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.
GENERAL FUND/ GENERAL PURPOSE	\$5,086,500	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

**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	\$15,900,800	FTEs, contractual services, supplies, and other related costs 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, WIC electronic benefit system infrastructure, technical standardization of management information systems, breastfeeding support services, local agency infrastructure support, summer lunch program for children, and independent validation and verification consulting. Funding Source(s): Federal 15,601,100 Private 299,700 <i>Related Boilerplate Section(s): 1153</i>
Women, infants, and children program local agreements and food costs	253,825,500	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 breastfeeding 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 2009-10 averaged 256,200, an increase from 243,300 in FY 2008-09. Funding Source(s): Federal 195,511,400 Private 58,314,100 <i>Related Boilerplate Section(s): 1153</i>
GROSS APPROPRIATION	\$269,726,300	Total of all applicable line item appropriations.
Total federal revenue	211,112,500	Includes the following grants: WIC special supplemental nutrition program for food and administration, WIC farmer's market nutrition program, breastfeeding peer counseling, WIC electronic benefit transfer system infrastructure, technical standardization of management information systems, summer electronic benefit transfer for children, and other projects.
Total private revenue	58,613,800	Rebates from infant formula manufacturers for WIC program, and revenue from private companies and foundations related to WIC farmer's market nutrition programs.
GENERAL FUND/ GENERAL PURPOSE	\$0	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

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	47.8	Full-time equated (FTE) positions in the state classified service.
Children's special health care services administration – 45.0 FTE positions	\$5,245,700	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: 200px;"> Funding Source(s): Federal 2,466,800 Restricted 93,500 GF/GP 2,685,400 </div>
<i>Related Boilerplate Section(s): None</i>		
Bequests for care and services – 2.8 FTE positions	1,511,400	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: 200px;"> Funding Source(s): Federal 104,600 Private 996,800 Restricted 410,000 </div>
<i>Related Boilerplate Section(s): None</i>		
Outreach and advocacy	3,773,500	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: 200px;"> Funding Source(s): Federal 2,490,300 GF/GP 1,283,200 </div>
<i>Related Boilerplate Section(s): None</i>		
Nonemergency medical transportation	2,679,300	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: 200px;"> Funding Source(s): Federal 686,700 GF/GP 1,992,600 </div>
<i>Related Boilerplate Section(s): None</i>		
Medical care and treatment	294,056,500	Reimburses hospitals, physicians, pharmacies, and other health care professionals providing medical services to CSHCS eligible persons. <div style="text-align: right; margin-left: 200px;"> Funding Source(s): Federal 169,559,800 Restricted 3,340,100 GF/GP 121,156,600 </div>
<i>Related Boilerplate Section(s): 1202, 1204</i>		
GROSS APPROPRIATION	\$307,266,400	Total of all applicable line item appropriations.
Total other federal revenues	175,308,200	Maternal and child health block grant, Title XIX Medicaid funds, and Title V sec. 501(a)(2) integrated community services systems funds.
Total private revenue	996,800	Individual and corporate donations, and interest on those donations.

Total state restricted revenue	3,843,600	Funds from parent pay agreements and fees associated with CSHCS programs.
GENERAL FUND/ GENERAL PURPOSE	\$127,117,800	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

SECTION 116: CRIME VICTIM SERVICES COMMISSION

This appropriation unit provides funding for the Crime Victim Services Commission. 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	\$1,811,300	<p>FTEs, related costs, and contracts to manage crime victim service programs and grants, provide publications for crime victims, and administer statewide automated Michigan Crime Victim Notification Network.</p> <p style="text-align: right;">Funding Source(s): Federal 591,100 Restricted 1,220,200</p> <p style="text-align: right;"><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: right;"><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 Restricted 12,800,000</p> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>
GROSS APPROPRIATION	\$37,487,400	Total of all applicable line item appropriations
Total federal revenue	23,467,200	Victims of Crime Act justice assistance grant, and Victims of Crime Act victim compensation grant.
Total state restricted revenue	14,020,200	Crime Victim's Rights Fund revenue from fees assessed against convicted criminal defendants.
GENERAL FUND/ GENERAL PURPOSE	\$0	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

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 Type I agency, as defined in Act 380 of the Public Acts of 1965.

Full-time equated classified positions	43.5	Full-time (FTE) equated positions in the state classified service.									
Office of services to aging administration – 43.5 FTE positions	\$6,408,800	<p>FTEs, related costs, and contracts to develop and administer services for Michigan's older citizens pursuant to State Plan, and to 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: auto; margin-right: auto;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">4,142,600</td> </tr> <tr> <td></td> <td>Private</td> <td style="text-align: right;">177,500</td> </tr> <tr> <td></td> <td>GF/GP</td> <td style="text-align: right;">2,088,700</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 282, 1417</i></p>	Funding Source(s):	Federal	4,142,600		Private	177,500		GF/GP	2,088,700
Funding Source(s):	Federal	4,142,600									
	Private	177,500									
	GF/GP	2,088,700									
Community services	35,314,400	<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><u>Aging and Disability Resource Centers</u>: develop statewide model for: centers, options counseling standards, operations and staff protocols, and pilot training curriculum.</p> <p style="text-align: center;">(Community services continued on next page)</p>									

(Community services)

(Continued from previous page)

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

Funding Source(s):	Federal	22,880,900
	Private	200,000
	GF/GP	12,233,500

Related Boilerplate Section(s): 1401, 1420

Nutrition services	35,430,200	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 per-meal reimbursement 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	26,343,200
	Private	300,000
	GF/GP	8,787,000

Related Boilerplate Section(s): 1401, 1403

Foster grandparent volunteer program	2,233,600	Grants to local agencies for the Foster Grandparent Program: low-income seniors volunteer 20 hours per week to assist children and youth who need 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

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

Senior companion volunteer program	1,604,400	Grants to local agencies for the Senior Companion Program: low-income seniors provide 20 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

Employment assistance	3,792,500	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	3,792,500
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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.
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Funding Source(s):	Merit Award	4,468,700
	Other Restricted	1,400,000

Related Boilerplate Section(s): None

GROSS APPROPRIATION	\$91,279,900	Total of all applicable line item appropriations.
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Total federal revenue	57,159,200	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 nutrition services incentive program grant (formerly U.S. Department of Agriculture commodity supplement funds), 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, CMS state profile grant, Medicare Improvements for Patients and Providers Act enrollment assistance grant, aging and disability resource center grant, violence against older women grant, and Patient Protection and Affordable Care Act personal and home care aide state training program grant.
Total private revenue	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	4,468,700	State revenue from 1998 master settlement agreement with tobacco companies.
Total other state restricted revenue	1,400,000	Senior Care Respite Fund revenue from escheats to the state from uncashed benefits paid by the nonprofit health care corporation Blue Cross and Blue Shield of Michigan.
GENERAL FUND/ GENERAL PURPOSE	\$27,574,500	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

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	415.0	Full-time equated (FTE) positions in the state classified service.															
Medical services administration – 415.0 FTE positions	\$65,057,000	<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:</p> <p><u>Medicaid Policy and Actuarial Services:</u> Program policy, actuarial, home and community based services, and long-term care operations and support.</p> <p><u>Medicaid Financial Management & Administrative Services:</u> Third party liability, Medicaid payments, hospital/health plan/long-term care reimbursement, 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> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">43,149,100</td> </tr> <tr> <td></td> <td>Local</td> <td style="text-align: right;">105,900</td> </tr> <tr> <td></td> <td>Private</td> <td style="text-align: right;">100,000</td> </tr> <tr> <td></td> <td>Restricted</td> <td style="text-align: right;">110,100</td> </tr> <tr> <td></td> <td>GF/GP</td> <td style="text-align: right;">21,591,900</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): 1756, 1757, 1770, 1775, 1793, 1804, 1832, 1837, 1849, 1854</i></p>	Funding Source(s):	Federal	43,149,100		Local	105,900		Private	100,000		Restricted	110,100		GF/GP	21,591,900
Funding Source(s):	Federal	43,149,100															
	Local	105,900															
	Private	100,000															
	Restricted	110,100															
	GF/GP	21,591,900															
Facility inspection contract	132,800	<p>Funds for Medicaid's share of fire safety inspections of medical care facilities conducted by the Department of Labor and Economic Growth.</p> <table style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">GF/GP</td> <td style="text-align: right;">132,800</td> </tr> </table> <p style="text-align: right;"><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: auto; margin-right: 0;"> <tr> <td style="padding-right: 20px;">Funding Source(s):</td> <td style="padding-right: 20px;">Federal</td> <td style="text-align: right;">4,327,800</td> </tr> </table> <p style="text-align: right;"><i>Related Boilerplate Section(s): None</i></p>	Funding Source(s):	Federal	4,327,800												
Funding Source(s):	Federal	4,327,800															
GROSS APPROPRIATION	\$69,517,600	Total of all applicable line item appropriations.															
Total federal revenue	47,476,900	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 revenue	105,900	Funds from public hospitals.															
Total private revenue	100,000	Private funds from foundations.															
Total state restricted revenue	110,100	Funds from public university and college hospitals.															
GENERAL FUND/ GENERAL PURPOSE	\$21,724,700	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.															

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	\$1,273,299,300	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>Federal</td><td style="text-align: right;">844,332,000</td></tr> <tr><td>Restricted</td><td style="text-align: right;">334,093,100</td></tr> <tr><td>GF/GP</td><td style="text-align: right;">94,874,200</td></tr> </table>	Federal	844,332,000	Restricted	334,093,100	GF/GP	94,874,200	
Federal	844,332,000								
Restricted	334,093,100								
GF/GP	94,874,200								
<i>Related Boilerplate Section(s): 1611, 1631, 1641, 1642, 1657, 1699, 1712, 1740, 1842, 1846, 1855, 1901, 1903</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>Federal</td><td style="text-align: right;">29,763,000</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;">9,122,100</td></tr> </table>	Federal	29,763,000	Restricted	6,114,900	GF/GP	9,122,100	
Federal	29,763,000								
Restricted	6,114,900								
GF/GP	9,122,100								
<i>Related Boilerplate Section(s): 1699</i>									
Physician services	303,223,900	Medicaid covered office/home visits provided by physicians, nurse midwives, and nurse practitioners; immunizations, EPSDT, prenatal care, podiatric care, family planning, and medical clinics. Funding Source(s): <table style="float: right; margin-left: 20px;"> <tr><td>Federal</td><td style="text-align: right;">200,524,200</td></tr> <tr><td>GF/GP</td><td style="text-align: right;">102,699,700</td></tr> </table>	Federal	200,524,200	GF/GP	102,699,700			
Federal	200,524,200								
GF/GP	102,699,700								
<i>Related Boilerplate Section(s): 1630, 1631</i>									
Medicare premium payments	409,169,400	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>Federal</td><td style="text-align: right;">330,445,800</td></tr> <tr><td>GF/GP</td><td style="text-align: right;">78,723,600</td></tr> </table>	Federal	330,445,800	GF/GP	78,723,600			
Federal	330,445,800								
GF/GP	78,723,600								
<i>Related Boilerplate Section(s): None</i>									
Pharmaceutical services	338,717,500	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>Federal</td><td style="text-align: right;">222,861,200</td></tr> <tr><td>GF/GP</td><td style="text-align: right;">115,856,300</td></tr> </table>	Federal	222,861,200	GF/GP	115,856,300			
Federal	222,861,200								
GF/GP	115,856,300								
<i>Related Boilerplate Section(s): 1620, 1627, 1629, 1724, 1822</i>									
Home health services	6,791,100	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>Federal</td><td style="text-align: right;">4,491,600</td></tr> <tr><td>GF/GP</td><td style="text-align: right;">2,299,500</td></tr> </table>	Federal	4,491,600	GF/GP	2,299,500			
Federal	4,491,600								
GF/GP	2,299,500								
<i>Related Boilerplate Section(s): 1641, 1712</i>									
Hospice services	139,637,700	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): <table style="float: right; margin-left: 20px;"> <tr><td>Federal</td><td style="text-align: right;">92,356,300</td></tr> <tr><td>GF/GP</td><td style="text-align: right;">47,281,400</td></tr> </table>	Federal	92,356,300	GF/GP	47,281,400			
Federal	92,356,300								
GF/GP	47,281,400								
<i>Related Boilerplate Section(s): None</i>									

Transportation	16,009,800	Non-emergency transportation costs paid most often through local DHS offices for Medicaid recipients to obtain regular medical care. Funding Source(s): Federal 9,284,100 GF/GP 6,725,700
<i>Related Boilerplate Section(s): 1773</i>		
Auxiliary medical services	6,252,100	Hearing, speech, and vision services covered by Medicaid. Funding Source(s): Federal 4,094,500 GF/GP 2,157,600
<i>Related Boilerplate Section(s): 1631, 1836, 1857</i>		
Dental services	162,930,800	Dental services covered by Medicaid program. Funding Source(s): Federal 107,152,300 GF/GP 55,778,500
<i>Related Boilerplate Section(s): 1630, 1631</i>		
Ambulance services	10,900,000	Medicaid covered emergency medical transportation and medically necessary non-emergency transportation services. Funding Source(s): Federal 7,157,100 GF/GP 3,742,900
<i>Related Boilerplate Section(s): 1847</i>		
Long-term care services	1,686,454,600	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 1,133,338,700 Local 6,618,800 Merit Award 82,275,800 Restricted 256,925,600 GF/GP 207,295,700
<i>Related Boilerplate Section(s): 1606, 1641, 1682, 1685, 1689, 1741, 1775, 1777, 1793</i>		
Medicaid home- and community-based services waiver	229,921,000	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 146,177,400 Local 265,000 Private 2,100,000 GF/GP 81,378,600
<i>Related Boilerplate Section(s): 1684, 1689, 1834</i>		
Adult home help services	289,032,800	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 193,370,300 GF/GP 95,662,500
<i>Related Boilerplate Section(s): 1718</i>		
Personal care services	14,421,500	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 9,538,500 GF/GP 4,883,000
<i>Related Boilerplate Section(s): 1601</i>		

Program of all-inclusive care for the elderly	30,707,800	<p>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.</p> <p>Funding Source(s): Federal 20,310,200 GF/GP 10,397,600</p> <p><i>Related Boilerplate Section(s): 1813</i></p>
Health plan services	4,093,812,400	<p>Comprehensive medical services provided by health maintenance organizations enrolled as Medicaid qualified health plans and reimbursed through a fixed capitation fee.</p> <p>Funding Source(s): Federal 2,708,141,600 Local 13,702,900 Restricted 1,238,392,400 GF/GP 133,575,500</p> <p><i>Related Boilerplate Section(s): 404, 411, 418, 428, 474, 494, 1204, 1607, 1657, 1659, 1662, 1689, 1699, 1740, 1764, 1772, 1787, 1815, 1820, 1822, 1835, 1846, 1850, 1853</i></p>
MICchild program	51,753,100	<p>Comprehensive health care services to non-Medicaid eligible low-income children in households with income up to 200% of poverty.</p> <p>Funding Source(s): Federal 39,487,600 GF/GP 12,265,500</p> <p><i>Related Boilerplate Section(s): 1670, 1673</i></p>
Plan first family planning waiver	13,089,200	<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 11,780,300 GF/GP 1,308,900</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 70,027,300 Local 6,653,800 Restricted 6,100,000 GF/GP 23,096,600</p> <p><i>Related Boilerplate Section(s): None</i></p>
Special indigent care payments	88,518,500	<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 58,546,100 Local 29,972,400</p> <p><i>Related Boilerplate Section(s): None</i></p>

Federal Medicare pharmaceutical program	185,599,300	Phased-down state contribution (clawback provision) as required by Medicare Part D drug program. Funding Source(s): GF/GP 185,599,300 <i>Related Boilerplate Section(s): None</i>
Maternal and child health	20,279,500	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. Funding Source(s): Federal 20,279,500 <i>Related Boilerplate Section(s): None</i>
Subtotal basic medical services program	9,521,399,000	Total authorization for regular Medicaid, MICHild and other medical services programs.
School-based services	91,296,500	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. Funding Source(s): Federal 91,296,500 <i>Related Boilerplate Section(s): 1692</i>
Special Medicaid reimbursement	339,382,000	Special payments to various health providers which allow the state to earn additional federal Medicaid funds. Funding Source(s): Federal 224,459,400 ARRA 13,851,400 Local 11,036,800 Private 4,232,200 Restricted 99,265,700 GF/GP 387,900 <i>Related Boilerplate Section(s): 1693, 1694</i>
Subtotal special medical services payments	430,678,500	Total authorization for Medicaid school based services and special Medicaid reimbursement.
GROSS APPROPRIATION	\$9,952,077,500	Total of all applicable line item appropriations.
Total other federal revenues	6,579,215,500	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 revenue	68,249,700	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 revenue	6,332,200	Civil monetary penalties and private funds from Federally Qualified Health Centers.
Merit award trust fund	82,275,800	State revenue from 1998 master settlement agreement with tobacco companies.
Total state restricted revenue	1,940,891,700	Health and Safety Fund, Healthy Michigan Fund, Medicaid Benefits Trust Fund, provider assessments, intergovernmental transfers, special financing and legal settlements.
GENERAL FUND/ GENERAL PURPOSE	\$1,275,112,600	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

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	\$33,521,400	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
		Restricted
		GF/GP
		21,302,200
		1,865,900
		10,353,300

Related Boilerplate Section(s): 259, 294

Michigan Medicaid information system	25,723,700	Funds used for the Community Health Automated Medicaid System (CHAMPS).
		Funding Source(s):
		Federal
		GF/GP
		22,889,000
		2,834,700

Related Boilerplate Section(s): None

GROSS APPROPRIATION	\$59,245,100	Total of all applicable line item appropriations.
Total federal revenue	44,191,200	Includes Title XIX of the Social Security Act Medicaid funds, WIC revenue, block grant for prevention and treatment of substance abuse, Victim of Crime Act grant.
Total state restricted revenue	1,865,900	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.
GENERAL FUND/ GENERAL PURPOSE	\$13,188,000	The state's primary operating fund; the portion of the state's General Fund that does not include restricted revenue.

BOILERPLATE SECTION INFORMATION

GENERAL SECTIONS

Sec. 201. State Spending

Total FY 2011-12 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 this article.

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 \$20 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. 208. Internet Reporting Requirements

Requires that DCH use the Internet to fulfill the reporting requirements of article IV, 2011 PA 63.

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

Prohibits 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 DCH to take all reasonable steps to ensure that businesses in deprived and depressed communities compete for and perform contracts to provide services or supplies, or both.

Sec. 211. Fee Revenue and Restricted Fund Balances

Allows the carryforward 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 by February 1, 2012, on detailed name and amounts of revenue sources by line item that support FY 2011-12 appropriations. Requires report on amounts and detailed revenue sources by line item proposed to support FY 2012-13 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 utilizing these funds by April 1, 2012, to the House and Senate Appropriations Committees, House and Senate Fiscal Agencies, and State Budget Director.

Sec. 215. Policy Changes Implementing Public Acts

Requires a report by April 1, 2012 on each policy change made to implement a public act affecting DCH which took effect during the preceding calendar year. Prohibits the use of appropriated funds by DCH on adopting a rule that will apply and have a disproportionate economic impact on small businesses.

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.

Sec. 218. Basic Health Services

Lists 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.

BOILERPLATE SECTION INFORMATION

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, 2012. Requires DCH to provide, by September 30, 2012, 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. 259. User Fees for Information Technology (IT) Services and Projects

Directs departments and agencies to pay user fees to the Department of Technology, Management, and Budget (DTMB) for technology-related services and projects from Part 1 appropriated funds for IT. Subjects user fees to provisions of an interagency agreement between DCH and agencies, and DTMB.

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 Centers for Medicare and Medicaid Services. Requires written and verbal biannual reports on the status of discussions with federal agencies on potential or future Medicaid waiver applications.

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

Limits FY 2011-12 out-of-state travel to when it is required by legal mandate, is necessary to protect the health or safety of Michigan citizens, produce budgetary savings or increase state revenue, comply with federal requirements, or secure specialized training for staff financed entirely by federal or nonstate funds. Requires the State Budget Director to report monthly on exceptions made to specified out-of-state travel conditions.

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 activities 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, 2012.

Sec. 287. General Fund/General Purpose Lapses

Requires DCH to report on the estimated general fund/general purpose appropriations lapses at the close of the previous fiscal year by no later than November 15, 2011.

BOILERPLATE SECTION INFORMATION

Sec. 292. Publicly Accessible Internet Website

Requires DCH to maintain on a publicly accessible Internet website, 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. Permits DCH to develop and operate its own website to provide the information or reference the state's central transparency website as the source for the information.

Sec. 294. Information Technology (IT) Work Projects

Permits amounts appropriated for IT to be designated as work projects and carried forward to support technology projects under the direction of the DTMB. Provides that IT funds are not available for expenditure until approved as work projects under section 451a of the Management and Budget Act, 1984 PA 431, MCL 18.1451a.

Sec. 295. Privatization of Program and Service Areas

Requires DCH to explore program and other service areas, including eligibility determination, where privatization may lead to increased efficiencies and budgetary savings.

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

Requires annual report on estimated state restricted fund balances, projected revenues, and expenditures for FY 2010-11 and FY 2011-12 within 14 days after the release of the Executive budget recommendation.

COMMUNITY MENTAL HEALTH/SUBSTANCE ABUSE SERVICES PROGRAMS

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 2011-12 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, 2012 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, 2012, on the following for CMHSPs or PIHPs: expenditures and services data, information about access to CMHSPs, lapses and carry-forwards during FY 2010-11, 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.

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.

BOILERPLATE SECTION INFORMATION

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

Requires that appropriations for substance abuse prevention, education, and treatment grants be expended for contracting with coordinating agencies. Requires coordinating agencies work with CMHSPs or PIHPs to coordinate care and services provided to individuals with severe and persistent mental illness and substance abuse diagnoses. Requires DCH to approve a coordinating agency fee schedule for providing substance abuse services and charge participants in accordance with their ability to pay. States legislative intent that coordinating agencies continue current efforts to collaborate on the delivery of services to those clients with mental illness and substance abuse diagnoses. Requires coordinating agencies that are located completely within the boundary of a PIHP to conduct a study on administrative costs and efficiencies associated with consolidation with that PIHP. Stipulates that a coordinating agency realizing an administrative cost savings of 5% or greater of their current costs initiate discussions regarding a potential merger in accordance with section 6226 of the Public Health Code (MCL 333.6226).

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

Requires DCH to report by April 1, 2012, on expenditures and services data on substance abuse prevention, education, and treatment programs for FY 2010-11.

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. Contingency Appropriation 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. 458. Recommendations of Michigan Mental Health Commission and Cost-Benefit Analysis for Residential Facilities and Specialized Mental Health Court Program

Requires DCH to report by April 15, 2012, on the following: an updated plan for implementing each recommendation of the Michigan Mental Health Commission report on October 15, 2004; a cost-benefit analysis of establishing secure residential facilities of fewer than 17 beds for adults with serious mental illness including residential facilities' potential impact on the state's need for adult mental health facilities; and a cost-benefit analysis of establishing specialized mental health court program that diverts adults with serious mental illness alleged to have committed an offense deemed nonserious into treatment prior to the filing of any charges.

BOILERPLATE SECTION INFORMATION

Sec. 462. Funding Formula for CMH Non-Medicaid Services

Requires DCH to further implement the FY 2009-10 funding formula for the FY 2011-12 funding reduction to the Community Mental Health Non-Medicaid Services line, except the funding reduction cannot exceed 4% for each CMHSP. Permits DCH to convene a Workgroup, including CMHSPs, regarding the allocation of the current fiscal year administrative reduction up to \$3.4 million.

Sec. 468. Incorporation of Coordinating Agencies into CMH Authorities

Requires DCH to maintain criteria for the incorporation of a city, county, or regional substance abuse coordinating agency into a local CMH authority. Allows DCH to make accommodations and adjustments in the formula distribution to coordinating agencies if all of the following are met: funding not exceeding \$75,000 is provided to any coordinating agency for administrative costs incurred by incorporating into a CMH authority, accommodations and adjustments do not favor coordinating agencies who voluntarily elect to integrate with CMH authorities, and accommodations and adjustments do not negatively affect other coordinating agencies.

Sec. 470. Integration of Mental Health and Substance Abuse Services

Directs DCH to establish written expectations, such as the coordination and consolidation of administrative functions, for CMHSPs, PIHPs, coordinating agencies, and counties on the integration of mental health and substance abuse services for those coordinating agencies that have voluntarily incorporated into CMH authorities and accepted funding from DCH for administrative costs incurred when incorporating into authorities. Requires May 1, 2012 status report on the integration of mental health and substance abuse services.

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.

Sec. 490. Uniform Standards for Providers Contracting with PIHPs, CMHSPs, and Coordinating Agencies

Requires the Department to continue a Workgroup to develop a plan to maximize uniform and consistent standards required of providers contracting directly with PIHPs, CMHSPs, and substance abuse coordinating agencies. Requires the standards to apply to community living supports, personal care services, substance abuse services, skill-building services, and other similar supports and services. Requires the Workgroup to include representatives of DCH, PIHPs, CMHSPs, substance abuse coordinating agencies, and affected providers. Requires a status report on the Workgroup's efforts by June 1, 2012.

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 utilize applicable national accreditation review criteria to determine compliance with corresponding state requirements for CMHSPs, PIHPs, or subcontracting provider agencies that have been reviewed and accredited by a national accrediting entity for behavioral health care services, in order to avoid duplication of efforts. Requires a progress report by July 1, 2012 on implementation of the section.

Sec. 495. Medical Home for Recipients of Medicaid Mental Health Benefits

Expresses Legislature's intent that the Department begin working with the Centers for Medicare and Medicaid Services to develop a program that creates a medical home for individuals receiving Medicaid mental health benefits.

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.

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

Authorizes the carryforward of unexpended and unencumbered funds up to \$1,000,000 from gifts and bequests for patient living and treatment environments for one fiscal year. Specifies that gifts and bequests are to provide specific enhancements for individuals residing at state-operated facilities.

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 closure certification 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 Department of Technology, Management and Budget, 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

Directs DCH to report to the Legislature by April 1, 2012 on the criteria and methodology used to derive information provided in the annual Michigan fish advisory.

Sec. 653. Public Health Emergency Planning

Requires DCH to maintain plans to address potential state public health emergencies.

HEALTH POLICY

Sec. 704. Emergency Medical Services (EMS) Grantees and Contractors

Requires DCH to continue to work 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 be used to provide loan repayment for dentists that meet the criteria established in Part 27 of the Public Health Code.

Sec. 712. Free Health Clinics

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

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

Directs DCH to continue to support multicultural agencies that provide primary care services from Part 1 appropriated funds.

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.

BOILERPLATE SECTION INFORMATION

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 services provided in accordance with the Informed Consent Law.

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

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.

CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION

Sec. 1004. Cancer Rate Investigations

Establishes legislative intent that DCH continue to collaborate with St. Clair County and the City of Detroit's southwest community to investigate and evaluate cancer rates.

FAMILY, MATERNAL, AND CHILDREN'S HEALTH SERVICES

Sec. 1103. Sexual and Maternal Health Expenditure and Demographics Report

Requires DCH to annually report an estimate of public funds administered by the department for family planning, sexually transmitted infection prevention and treatment, pregnancies, and births, and to report demographics collected by DCH that are self-reported by individuals utilizing those services.

Sec. 1104. Department Report Regarding Certain Pregnancy Planning and Prenatal Programs

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

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. Restrictions on Use of Pregnancy Prevention Funding

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 on services provided in the prior fiscal year.

Sec. 1117. Stillbirth Awareness

DCH may pursue efforts to reduce the incidence of stillbirth if federal or state funds are available, including awareness, education, and standardization of data collection and definitions. Directs DCH to seek grant funds.

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. 1133. Infant Mortality Data Release

Requires DCH to release infant mortality rate data to all local public health departments 72 hours or more prior to releasing infant mortality rate data to the public.

Sec. 1135. School Health Education Curriculum

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.

BOILERPLATE SECTION INFORMATION

WOMEN, INFANTS, AND CHILDREN FOOD AND NUTRITION PROGRAM

Sec. 1153. WIC Program Access in Rural Communities

Requires DCH to ensure that individuals residing in rural communities have sufficient access to the services offered through the Women, Infants, and Children Food and Nutrition Program.

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.

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.

OFFICE OF SERVICES TO THE AGING

Sec. 1401. Eligibility for Senior Community Services and Nutrition Services Programs

Eligibility for services funded by the community services and nutrition services appropriation line items shall be restricted to individuals at least 60 years of age who fail to qualify for home care services under Titles XVIII, XIX, or XX of the Social Security Act.

Sec. 1403. Home-Delivered Meals Waiting Lists

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

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

Requires DCH to report by March 30 on allocations 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.

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.

BOILERPLATE SECTION INFORMATION

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.

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. 1627. Drug Rebates for the MICHild, MOMS and CSHCS Programs

Authorizes DCH to secure manufacturer drug rebates for participants in MICHild, MOMS, and Children's Special Health Care Services (CSHCS) programs that are equivalent to Medicaid rebates, and allows for preauthorization of drugs if rebates are not provided.

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. 1630. Medicaid Podiatric and Dental Services

Continues podiatric and adult dental services at not less than the level in effect on October 1, 2002.

Sec. 1631. Medical Services Copayments

Requires copayments on dental, podiatric, and vision services unless prohibited by law or regulation. Specifies copayments of \$2 for a physician office visit, \$3 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. 1642. Ambulatory Surgery Centers

Requires DCH to allow ambulatory surgery centers in the state to fully participate in the Medicaid program.

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.

BOILERPLATE SECTION INFORMATION

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.

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. 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. 1684. Home- and Community-Based Services (HCBS) Waiver Costs

Requires report that identifies by waiver agent Medicaid HCBS waiver costs by administration, case management, and direct services.

Sec. 1685. Prospective Setting of Medicaid Nursing Home Payment Rates

Requires that Medicaid nursing home payment rates be set 30 days in advance of the facility's fiscal year, and be based on the most recent cost report submitted.

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

Gives priority in HCBS enrollment to nursing home residents and those eligible for nursing homes, and requires screening to prevent unnecessary nursing home admissions. Indicates Legislative intent that funding follow the person through a transfer, by appropriation, from the Long-Term Care Services line to the Medicaid Home- and Community-Based Services Waiver line. Requires an annual report on HCBS allocations and expenditures by region, net cost savings by moving individuals from nursing home to the HCBS program, number of individuals transitioned and on HCBS waiting lists by region, amount of funds transferred during the year, and number of persons served and days of care for the HCBS program and in nursing homes. Requires DCH to develop system to collect and analyze information on persons on HCBS waiting list to identify community support and assistance they receive and the extent to which these supports help individuals to avoid entry into a nursing home. Requires the maintaining of policies and regulations in order to limit the self-determination option within HCBS program to services furnished by approved home-based services providers meeting waiver qualifications.

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. Allocation to Children's Hospitals

Authorizes distribution of \$1,122,300 to an academic health care system that includes a children's hospital with high indigent care volume.

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. The Department is required to form a workgroup to derive a new DSH formula or formulas with the result to be reported to the Legislature.

BOILERPLATE SECTION INFORMATION

Sec. 1712. Rural Health Initiative

Subject to availability of funds, requires DCH to implement a rural health initiative with funds to be first allocated to a rural outpatient hospital adjustor, and remaining funds for defibrillator grants, EMT training, or other similar programs.

Sec. 1718. Adult Home Help Review Process

Authorizes Medicaid adult home help beneficiaries to request a departmental review of any decisions that may adversely affect their access to home help services.

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. 1741. Nursing Home Interim Payments

Directs DCH to continue to provide nursing homes the opportunity to receive interim payments upon their request; the Department has the ability to disapprove requests or discontinue interim payments that result in financial risk to the State; and that these payments are as similar to expected cost-settled payments as possible.

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 are actuarially sound and to notify the House, Senate, and fiscal agencies immediately upon rate certification and approval.

Sec. 1770. Quarterly Medicaid Policy Changes

Specifies that DCH shall attempt to make adjustments to the Medicaid provider manual and effective dates for proposed Medicaid policy bulletins on October 1, January 1, April 1, or July 1 after the end of the consultation period.

Sec. 1775. Medicaid Managed Care for Dual Eligibles

Requires the Department to report to the Legislature on a 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. 1787. Medicaid Beneficiary Telephone Numbers Provided to Health Plans

Requires DCH's managed care enrollment broker to maintain telephone numbers of Medicaid beneficiaries and provide Medicaid health plans the telephone numbers of that health plan's enrollees on a monthly basis.

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.

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

Requires DCH, in cooperation with Department of Human Services, 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.

BOILERPLATE SECTION INFORMATION

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. 1822. Coverage for Mental Health Prescription Drugs

Directs DCH, the DCH contracted pharmacy benefits manager, and Medicaid health plans to implement coverage for a mental health prescription drug within 30 days of that drug's approval by the DCH Pharmacy and Therapeutics Committee.

Sec. 1832. Form Standardization, E-Billing and Rejected Claims

Requires DCH to continue efforts to standardize forms, formats and documents, and the reporting of accepted and rejected encounter records received in the data warehouse. DCH shall convene a workgroup on making e-billing mandatory and a report will be provided to the Legislature by April 1. Also by April 1, DCH shall provide a report detailing the percentage of Medicaid reimbursement claims that were initially rejected in the first quarter of FY 2011-12.

Sec. 1835. HMO Encounter Data

Requires DCH to develop and implement processes to report rejected and accepted encounters to Medicaid health plans, enhance encounter data reporting processes, promulgate rules that make HMO's encounter data as complete as possible, measure acuity of each HMO's population for risk adjustment purposes, and minimize HMO administrative expenses.

Sec. 1836. Coverage for Certain Optical Services

Requires DCH to expand adult Medicaid optical coverage to medically necessary optical devices and other treatment services when conventional treatments do not provide functional vision correction.

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 Workgroup

Requires the Department to establish a workgroup on graduate medical education funding, identifies workgroup representation, goals of the workgroup and must issue a report.

Sec. 1847. Ambulance Quality Assurance Assessment Program

Requires the Department to meet with the Michigan Association of Ambulance Services to discuss the possible structure of an ambulance quality assurance assessment program.

Sec. 1849. Voluntary In-Home Visitation Services

Requires the Department to use 50% of the funds allocated for in-home visiting services for evidence-based models and submit a report to the Legislature.

Sec. 1850. Eligibility Redetermination by Medicaid Health Plans

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

Sec. 1853. Medicaid HMO Enrollee Automatic Assignment Workgroup

Requires the Department to form a workgroup to develop revisions to the process of automatic assignment of new Medicaid recipients to HMOs if the recipient has not chosen an HMO upon enrollment.

Sec. 1854. Kidney Dialysis and Renal Care Health Homes

The Department may work with a provider 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. 1855. Emergency Department Redirection of Non-Emergent Patients

The Department may consider the feasibility of revenue a neutral and a financially risk averse solution to redirect non-emergent Medicaid patients from emergency departments.

BOILERPLATE SECTION INFORMATION

Sec. 1857. Legislative Intent of Wheelchair Reimbursement

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

ONE-TIME BASIS ONLY

Sec. 1901. One-Time Funding For FY 2011-12

Appropriates one-time FY 2011-12 funding of \$22.1 million GF/GP, \$53.0 million gross for the following:

Mental health services for special populations.....	\$3,000,000
Healthy Michigan Fund programs	\$3,000,000
Primary care services - island health clinics	\$300,000
Hospital services and therapy - graduate medical education.....	\$17,129,400
Hospital services and therapy - rural and sole community hospitals .	\$29,533,400

Sec. 1902. Allocation of Healthy Michigan Funds for Cancer Prevention and Control

Allocates \$900,000 for cancer prevention and control from the one-time funds appropriated in Sec. 1901 for Healthy Michigan Fund programs.

Sec. 1903. Rural and Sole Community Hospitals

Establishes that \$10.0 million of GF/GP and associated federal match within the Hospital Services and Therapy-Rural and Sole Community Hospitals item in Sec. 1901 shall be awarded based on criteria to be established which includes services to low-income rural residents and that no hospital shall receive more than 5% of the total funding. A report is due to the Legislature.

PART 2A

GENERAL SECTIONS

Sec. 2001. Fiscal Year 2012-13 Anticipated Appropriations

Expresses legislative intent to provide appropriations for FY 2012-13 for the line items listed in Part 1 for FY 2011-12 , except the line items will be adjusted for changes in caseload and related costs, federal fund match rates, economic factors, and available revenue.



Mary Ann Cleary, Director
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AREAS OF RESPONSIBILITY

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



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