



**HEALTH AND HUMAN SERVICES
H.B. 5274**

06/08/2016

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FULL-TIME EQUATED (FTE) POSITIONS/ FUNDING SOURCE	FY 2015-16 YEAR-TO-DATE	FY2016-17 GOV'S REC.	FY2016-17 SENATE PASSED	FY2016-17 HOUSE PASSED	FY2016-17 CONFERENCE / ENROLLED	CHANGES FROM FY 2015-16 YEAR-TO-DATE			
						GOVERNOR AMOUNT	SENATE AMOUNT	HOUSE AMOUNT	CONF/ ENRLD AMOUNT
FTE Positions.....	15,437.0	15,554.5	15,499.5	15,554.5	15,570.5	117.5	62.5	117.5	133.5
GROSS.....	25,137,449,000	24,707,967,700	24,783,861,400	24,872,843,000	24,841,836,800	(429,481,300)	(353,587,600)	(264,606,000)	(295,612,200)
Less:									
Interdepartmental Grants Received.....	13,551,600	13,513,700	13,513,700	13,663,700	13,513,700	(37,900)	(37,900)	112,100	(37,900)
ADJUSTED GROSS.....	25,123,897,400	24,694,454,000	24,770,347,700	24,859,179,300	24,828,323,100	(429,443,400)	(353,549,700)	(264,718,100)	(295,574,300)
Less:									
Federal Funds.....	18,470,968,600	17,730,579,000	17,796,663,100	17,908,814,900	17,880,902,200	(740,389,600)	(674,305,500)	(562,153,700)	(590,066,400)
Local and Private.....	280,745,300	280,072,000	280,171,600	278,705,100	278,705,100	(673,300)	(573,700)	(2,040,200)	(2,040,200)
TOTAL STATE SPENDING.....	6,372,183,500	6,683,803,000	6,693,513,000	6,671,659,300	6,668,715,800	311,619,500	321,329,500	299,475,800	296,532,300
Less:									
Other State Restricted Funds.....	2,218,475,300	2,328,800,000	2,342,745,600	2,359,233,400	2,294,167,500	110,324,700	124,270,300	140,758,100	75,692,200
GENERAL FUND/GENERAL PURPOSE.....	4,153,708,200	4,355,003,000	4,350,767,400	4,312,425,900	4,374,548,300	201,294,800	197,059,200	158,717,700	220,840,100
PAYMENTS TO LOCALS.....	1,224,137,400	1,259,438,500	1,231,794,000	1,299,265,400	1,321,260,100	35,301,100	7,656,600	75,128,000	97,122,700

Includes ongoing and one-time appropriations.

							CHANGE TO FY 2015-16 YEAR-TO-DATE:		
		FY 2015-16 YEAR-TO-DATE	FY 2016-17 SENATE	FY 2016-17 HOUSE	FY 2016-17 CONFERENCE		SENATE	HOUSE	CONFERENCE
DEPARTMENT OF HEALTH AND HUMAN SERVICES									
In this document "Conference Committee" means the proposed conference report									
GENERAL BUDGET DECISIONS									
1. <u>Change in Base Medicaid Match Rate for FY 2016-17</u>									
The regular Medicaid match rate will decrease from 65.60% in FY 2015-16 to 65.15% in FY 2016-17, leading to an increase in GF/GP costs.	Gross	NA	NA	NA	NA	0	0	0	0
	Federal	NA	NA	NA	NA	(58,486,200)	(58,486,200)	(58,486,200)	(58,486,200)
	Local	NA	NA	NA	NA	441,400	441,400	441,400	441,400
	Restricted	NA	NA	NA	NA	9,534,100	9,534,100	9,534,100	9,534,100
	GF/GP	NA	NA	NA	NA	48,510,700	48,510,700	48,510,700	48,510,700
2. <u>Change in Title XXI Match Rate for FY 2016-17</u>									
The Federal Title XXI match rate, used to support the MI-Child program, will decrease from 98.92% to 98.61%.	Gross	NA	NA	NA	NA	0	0	0	0
	Federal	NA	NA	NA	NA	(187,100)	(187,100)	(187,100)	(187,100)
	GF/GP	NA	NA	NA	NA	187,100	187,100	187,100	187,100
3. <u>January 1, 2017 Change in Healthy Michigan Plan (HMP) Match Rate</u>									
The match rate for the Healthy Michigan Plan, also known as the Medicaid expansion, will drop from 100% to 95% on January 1, 2017, resulting in an increase in GF/GP costs.	Gross	NA	NA	NA	NA	0	0	0	0
	Federal	NA	NA	NA	NA	(127,824,900)	(127,824,900)	(127,824,900)	(127,824,900)
	GF/GP	NA	NA	NA	NA	127,824,900	127,824,900	127,824,900	127,824,900

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GENERAL BUDGET DECISIONS (continued)								
4. <u>Economic Adjustments</u>								
The Governor's budget includes the usual adjustments for negotiated salary and wage increases, insurance, retirement, food, worker's compensation, and other post-employment benefits (OPEB).	Gross	NA	NA	NA	NA	42,814,700	42,814,700	42,814,700
	IDG	NA	NA	NA	NA	231,000	231,000	231,000
	Federal	NA	NA	NA	NA	23,655,600	17,032,900	19,551,000
	Local	NA	NA	NA	NA	738,400	658,800	658,800
	Private	NA	NA	NA	NA	252,100	232,100	232,100
	Restricted	NA	NA	NA	NA	867,400	835,900	835,900
	GF/GP	NA	NA	NA	NA	17,070,200	23,824,000	21,305,900
Executive Revision								
Executive Revision 2017-1 corrected fund sourcing for employee economics. The adjustment reduced Federal funds by \$4,104,600, made minor reductions to Local, Private, and Restricted funds, and increased GF/GP economic costs by \$4,235,700. The bulk of these adjustments, which reflected revised estimates of available Federal matching funds, were in the Child Welfare and Field Operations units.								
House Changes								
The House made adjustments similar to those recommended by the Executive but used a different split of GF/GP and TANF.								
Conference Changes								
The Conference Report concurred with the Governor.								
TABLE 1: ECONOMIC ADJUSTMENTS								
	Item	Gross	GF/GP					
	Salaries and Wages	\$23,409,800	\$9,258,500					
	Insurance	5,350,700	2,042,000					
	OPEB	8,747,200	3,460,600					
	Retirement	2,241,700	876,800					
	Workers' Compensation	289,500	231,800					
	<u>Other</u>	<u>2,775,800</u>	<u>1,200,500</u>					
	Total:	\$42,814,700	\$17,070,200					

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GENERAL BUDGET DECISIONS (continued)

5. Changes in Federal Authorization

The Governor's budget included a series of adjustments throughout the budget to reflect the actual level of Federal funding expected to be received in the FY 2016-17 budget. See Table 2.

FTE	NA	NA	NA	NA	1.0	1.0	1.0
Gross	NA	NA	NA	NA	2,950,600	2,950,600	2,950,600
Federal	NA	NA	NA	NA	2,950,600	2,950,600	2,950,600
GF/GP	NA	NA	NA	NA	0	0	0

Item	Increase/(Decrease)	
	Gross	Federal
Community Behavioral Health Clinic Planning Grant	\$982,400	\$982,400
Michigan Youth Mental Health Treatment Infrastructure Enhancement (1.0 FTE)	420,100	420,100
End of Federal Housing and Urban Development Asthma Grant	(150,000)	(150,000)
Increased Prosecuting Attorney contract	500,000	500,000
New Adult Immunization Grant	517,400	517,400
Additional Stroke Registry Grant Funding	390,000	390,000
Increase in Violence Prevention Grant	290,700	290,700
Total:	\$2,950,600	\$2,950,600

6. Unclassified Salaries

The Governor's budget provided an increase to the Director and Other Unclassifieds line item.

Gross	1,092,000	1,119,300	1,119,300	1,119,300	27,300	27,300	27,300
Federal	356,500	365,400	365,400	365,400	8,900	8,900	8,900
GF/GP	735,500	753,900	753,900	753,900	18,400	18,400	18,400

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GENERAL BUDGET DECISIONS (continued)									
7. <u>End of Deferred Sick Leave Payout</u>									
The budget recognized that the obligations tied to former employees who opted into the 2010 early retirement program with deferred sick leave payments over five years have been satisfied.	Gross	NA	NA	NA	NA	(6,363,600)	(6,363,600)	(6,363,600)	
	IDG	NA	NA	NA	NA	(200)	(200)	(200)	
	Federal	NA	NA	NA	NA	(3,769,300)	(3,769,300)	(3,769,300)	
	Restricted	NA	NA	NA	NA	(53,700)	(53,700)	(53,700)	
	GF/GP	NA	NA	NA	NA	(2,540,400)	(2,540,400)	(2,540,400)	
8. <u>Reversal of Already-Enacted FY 2015-16 Flint Supplemental Funding</u>									
The Governor's budget removed funding associated with the two FY 2015-16 Flint-related supplementals.	Gross	17,307,100	0	0	0	(17,307,100)	(17,307,100)	(17,307,100)	
	Federal	2,845,000	0	0	0	(2,845,000)	(2,845,000)	(2,845,000)	
	Restricted	3,552,000	0	0	0	(3,552,000)	(3,552,000)	(3,552,000)	
	GF/GP	10,910,100	0	0	0	(10,910,100)	(10,910,100)	(10,910,100)	
9. <u>Reversal of FY 2015-16 Boilerplate Appropriations Adjustments</u>									
The Governor's budget did not continue certain FY 2015-16 information technology adjustments that were made via boilerplate authorization. These adjustments totaled \$21,608,900 Gross with no GF/GP impact. The Governor's budget also did not reflect the impact of FY 2015-16 contingency fund transfers, a total of \$28,895,900 Gross.	Gross	NA	NA	NA	NA	(50,504,800)	(50,504,800)	(50,504,800)	
	Federal	NA	NA	NA	NA	(48,854,700)	(48,854,700)	(48,854,700)	
	Private	NA	NA	NA	NA	(996,400)	(996,400)	(996,400)	
	Restricted	NA	NA	NA	NA	(653,700)	(653,700)	(653,700)	
	GF/GP	NA	NA	NA	NA	0	0	0	
10. <u>Complete Building Occupancy Transfer with Department of Licensing and Regulatory Affairs (LARA)</u>									
The Governor's budget included an adjustment to fully fund the transfer of Bureau of Child and Adult Licensing to LARA in EO 2015-3 to reflect State owned building occupancy costs.	Gross	523,800	515,400	515,400	515,400	(8,400)	(8,400)	(8,400)	
	GF/GP	523,800	515,400	515,400	515,400	(8,400)	(8,400)	(8,400)	

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GENERAL BUDGET DECISIONS (continued)									
11.	<u>Roll up Capped Federal Funds Fund Source</u>								
	The Governor eliminated the separate listing of capped Federal revenues and rolled the capped funds into total other Federal revenues.								
	This action does not apply to TANF, which was still listed as a separate fund source in the Governor's recommendation.								
		Gross	596,693,800	596,693,800	596,693,800	596,693,800	0	0	0
		Federal	596,693,800	596,693,800	596,693,800	596,693,800	0	0	0
		GF/GP	0	0	0	0	0	0	0
	Senate Changes	The Senate bill did not roll up capped Federal revenues.							
	House Changes	The House bill did not roll up capped Federal revenues.							

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GENERAL BUDGET DECISIONS (continued)									
12. <u>Swap of Temporary Assistance for Needy Families (TANF) with GF/GP</u>									
The Governor reflected the Federal government's ruling that in-home care expenditures for services provided to youth in the juvenile justice system not be eligible for either TANF Federal or TANF maintenance of effort (MOE). Enforcement of the policy is to commence on July 1, 2016. In order to comply with this policy, all in-home care expenses currently funded with TANF must henceforth be funded with GF/GP. The \$43.8 million in additional GF/GP would be freed up by using TANF to support the Child Welfare Field Staff line (\$28.8 million) and the Family Independence Program line (\$15.0 million), so there is no net GF impact.		Gross	43,800,500	43,800,500	43,800,500	43,800,500	0	0	0
		Federal	43,800,500	51,543,500	50,103,600	59,662,700	7,743,000	6,303,100	15,862,200
		GF/GP	0	(7,743,000)	(6,303,100)	(15,862,200)	(7,743,000)	(6,303,100)	(15,862,200)
Senate Changes									
The Senate bill reflected the shifting of significant amounts of TANF dollars to offset GF/GP funding. These adjustments included increasing TANF support for Children Services Administration by \$300,000, Peer Coaches by \$300,000, Adoption Subsidies by \$4,883,100 (with a \$900,000 reduction in Other Federal), Family Independence Program by \$1,159,900, Child Care Fund by \$1,500,000, and Field Staff by \$500,000. Net GF reduction of \$7,743,000.									
House Changes									
The House also shifted TANF to offset GF/GP, but only in the Public Assistance unit.									
Conference Changes									
The Conference Report shifted TANF funding in the Child Welfare Field Staff line and reflected \$5.8 million more TANF being available for the Family Independence Program due to a program not being funded in the Department of Talent and Economic Development.									

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GENERAL BUDGET DECISIONS (continued)								
13.	<u>One-Time Funding: Flint Declaration of Emergency</u>							
	For FY 2016-17 the Governor proposed one-time funding totaling \$15,138,100 Gross,	Gross	0	15,138,100	15,138,100	15,138,100	15,138,100	15,138,100
	\$9,094,200 GF/GP. The Federal amount	Federal	0	5,570,000	5,570,000	5,570,000	5,570,000	5,570,000
	consists of \$3,520,000 TANF; \$1,956,300	Restricted	0	473,900	473,900	473,900	473,900	473,900
	Medicaid; \$66,000 Supplemental Nutrition	GF/GP	0	9,094,200	9,094,200	9,094,200	9,094,200	9,094,200
	Assistance Program (SNAP); and \$27,700							
	WIC for a total of \$5,570,000. State Restricted							
	funding of \$473,800 Healthy Michigan Fund							
	and \$100 Flint Emergency Reserve Fund is							
	also included.							
	House Changes							
	The House renamed the Flint line item "Drinking Water Declaration of Emergency".							

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GENERAL BUDGET DECISIONS (continued)									
14. <u>Dissolution of Units, Unit Name Changes, and New Unit</u>									
The Governor's budget dissolved several units by transferring the line items within to other units (see Transfers below). The dissolved units included Public Health Administration, Chronic Disease and Injury Prevention and Health Promotion, Women Infants and Children Food and Nutrition Program, and the Crime Victims Services Commission.		Gross	NA	NA	NA	NA	0	0	0
		GF/GP	NA	NA	NA	NA	0	0	0
Three units were renamed: Epidemiology and Infectious Disease became Disease Control, Prevention, and Epidemiology. Local Health Administration and Grants became Local Health and Administrative Services. Family, Maternal, and Children's Health Services became Family, Maternal, and Child Health.									
The budget also included a new unit, comprised of the Emergency Medical Services and Bioterrorism Preparedness lines, named Emergency Medical Services, Trauma, and Preparedness.									
15. <u>Department of Health and Human Services (DHHS) Expenditure Consensus</u>									
Conference Changes		Gross	0	0	0	179,180,000	0	0	179,180,000
The Conference Report reflected the DHHS base, caseload, and expenditure consensus agreed to on May 10, 2016 by the House Fiscal Agency, the Senate Fiscal Agency, and the State Budget Office.		Federal	0	0	0	145,448,300	0	0	145,448,300
		GF/GP	0	0	0	33,731,700	0	0	33,731,700

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GENERAL BUDGET DECISIONS (continued)								
16.	<u>DHHS Requested Technical Adjustments</u>							
Conference Changes	FTE	0.0	0.0	0.0	43.0	0.0	0.0	43.0
The Conference Report reflected DHHS requested	Gross	0	0	0	(1,765,500)	0	0	(1,765,500)
technical adjustments that had no GF/GP impact.	Federal	0	0	0	(1,765,500)	0	0	(1,765,500)
	GF/GP	0	0	0	0	0	0	0

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TRANSFERS

17. Transfers of Line Items and Programs Between Units

The Governor's budget included significant line item and program shifts. See Table 3.	Gross GF/GP	NA NA	NA NA	NA NA	NA NA	0 0	0 0	0 0
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Senate Changes

The Senate rejected the roll-up of Public Health Administration into the Essential Local Public Health Services line.

House Changes

The House also rejected the Public Health Administration roll-up. The House also rejected the transfer of the Child Welfare Training Institute to the Field Operations unit and rejected the transfer of Community Residential Services to the State Facilities unit.

Conference Changes

The Conference Report concurred with the House.

Transferred Item	Old Unit	New Unit	FTE	Gross	GF/GP
1 Adult Services Administration Staff	Aging/Adult Svcs	Field Operations	10.0	\$1,346,500	\$420,100
2 Alzheimer's Disease In-home Care Pilot	Chronic Disease	Aging/Adult Svcs	0.0	150,000	150,000
3 Bioterrorism Preparedness Program	Disease/Epidem.	EMS	52.0	30,077,600	0
4 Child Care Fund Administration	CSA-CW	Depart Admin	2.0	208,900	208,900
5 Child Welfare Training Institute	Child Welfare	Field Operations	45.0	7,687,400	3,257,300
6 Chronic Disease Admin and Programs	Chronic Disease	Local Health	96.1	94,473,100	1,770,900
7 Community Residential/Support Services	Behav Health Adm	State Facilities	0.0	592,100	292,100
8 Community Services Admin/homeless programs	Depart Admin	Comm Services	4.0	561,100	363,300
9 Consolidation of Legal Affairs	Multiple	Depart. Admin	26.0	3,720,700	2,358,200
10 Crime Victims Services Unit	Crime Victims	Comm Services	13.0	78,279,100	0
11 Dental Programs	Fam/Mat/Child	Local Health	3.8	1,943,000	425,800
12 Emergency Medical Services Program	Health Policy	EMS	23.0	6,518,900	1,405,100
13 Health and Wellness Initiatives	Public Health Adm	Local Health	11.7	8,946,400	3,739,300
14 Housing and Homeless Services Division	Behav Health	Comm Services	7.0	13,896,100	1,265,700
15 Legislative Services	Depart Admin	Health Policy	3.0	353,300	190,200
16 MiCAFE Elder Law Contract	Aging/Adult Svcs	Field Operations	0.0	350,000	175,000
17 Office of Family Advocate	Depart Admin	Child Welfare	3.0	423,200	423,200
18 Office of Professional Development	Depart Admin	Field Operations	3.0	328,000	111,700
19 Program of All-Inclusive Care for the Elderly	Aging/Adult Svcs	Medicaid	0.0	65,938,500	22,979,600
20 Public Health Administration	Public Health Adm	Local Health	7.0	1,535,900	1,311,900
21 Smoking Prevention Program	Chronic Disease	Local Health	12.0	2,107,600	0
22 STD Control Program	Disease/Epidem.	Local Health	20.0	6,246,900	795,200
23 Travel Line Rollout	Depart Admin	Multiple	0.0	8,141,400	2,506,300
24 Violence Prevention Program	Chronic Disease	Local Health	2.9	1,823,700	0
25 Vital Records and Health Statistics	Public Health Adm	Local Health	81.4	11,763,400	432,000
26 Women, Infants, and Children program	WIC	Fam/Mat/Child	45.0	274,190,900	304,300

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DEPARTMENTWIDE ADMINISTRATION									
18.	<u>Encryption Software Maintenance and Support</u>								
	The Governor included funding for encryption, ongoing maintenance, and support for Department databases.	Gross	151,516,300	151,516,400	151,938,300	151,938,300	100	422,000	422,000
		IDG	1,067,000	1,067,000	1,067,000	1,067,000	0	0	0
		Federal	94,752,100	94,752,100	95,068,600	95,068,600	0	316,500	316,500
		Restricted	1,985,800	1,985,800	1,985,800	1,985,800	0	0	0
	Senate Changes	GF/GP	53,711,400	53,711,500	53,816,900	53,816,900	100	105,500	105,500
	The Senate reduced funding for this initiative to a \$100 placeholder.								
19.	<u>Medicaid Fraud Detection Software Maintenance and Support</u>								
	The budget increased funding for a fraud detection system in Medicaid. The funding would cover maintenance and support for the information technology (IT) components.	Gross	50,201,100	50,201,200	50,634,400	50,634,400	100	433,300	433,300
		Federal	22,621,000	22,621,000	22,837,600	22,837,600	0	216,600	216,600
		Private	20,000,000	20,000,000	20,000,000	20,000,000	0	0	0
		GF/GP	7,580,100	7,580,200	7,796,800	7,796,800	100	216,700	216,700
	Senate Changes	The Senate reduced funding for this initiative to a \$100 placeholder.							
20.	<u>Department of Technology, Management, and Budget (DTMB) Services Transition</u>								
	The budget reflected a proposal that the Department purchase information technology (IT) services from DTMB on an as-needed basis rather than DTMB IT employees directly being assigned to the Department's projects.	Gross	0	100	6,343,000	6,343,000	100	6,343,000	6,343,000
		Federal	0	0	4,122,900	4,122,900	0	4,122,900	4,122,900
		GF/GP	0	100	2,220,100	2,220,100	100	2,220,100	2,220,100
	Senate Changes	The Senate reduced funding for this initiative to a \$100 placeholder.							

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DEPARTMENTWIDE ADMINISTRATION (continued)									
21.	<u>MiSACWIS Implementation (Ongoing and One-Time Funding)</u>								
	The Governor recommended that the Michigan Statewide Automated Child Welfare Information System (MiSACWIS) receive an increase in funding to achieve compliance under the Implementation, Sustainability, and Exit Plan (ISEP) agreed to in Federal court on 2/2/2016. The ISEP replaces the Modified Settlement Agreement with Children's Rights, Inc. The request would fund DTMB employee costs, Consulting service costs, hardware and software purchase costs, and other IT related costs. Of this funding \$11,538,600, all Federal, would be one-time funding.	FTE	0.0	10.0	50.0	23.0	10.0	50.0	23.0
		Gross	0	9,752,700	17,408,500	19,528,400	9,752,700	17,408,500	19,528,400
		Federal	0	8,792,800	11,107,700	13,781,500	8,792,800	11,107,700	13,781,500
		GF/GP	0	959,900	6,300,800	5,746,900	959,900	6,300,800	5,746,900
	Senate Changes								
	The Senate reduced funding for the MiSACWIS implementation. The one-time funding was reduced by 50% for a reduction of \$5,769,300 in TANF funding and the ongoing funding was reduced by \$6,787,000 GF and 40.0 FTEs from the Governor's Recommendation.								
	House Changes								
	The House also reduced funding for the MiSACWIS implementation. Ongoing funding was reduced by \$2.0 million Gross, \$1.4 million GF/GP and one-time funding was reduced by \$2.9 million, all Federal.								
	Conference Changes								
	The Conference Report reflected a \$2,000,000 GF/GP reduction to the Governor.								
22.	<u>Align State Office of Administrative Hearings and Rules Funding with LARA</u>								
	The Governor's budget aligned funding for the State Office of Administrative Hearings and Rules with the actual funding in the Department of Licensing and Regulatory Affairs.	Gross	68,400	68,400	68,400	68,400	0	0	0
		Federal	34,200	34,200	34,200	34,200	0	0	0
		GF/GP	34,200	34,200	34,200	34,200	0	0	0

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DEPARTMENTWIDE ADMINISTRATION (continued)									
23.	<u>Reduction to Departmentwide Administration and Management</u>								
	The Governor's budget assumed savings in the Departmental Administration and Management line tied to the merger of the former Departments of Community Health and Human Services.	Gross	56,005,600	55,905,600	53,005,600	55,905,600	(100,000)	(3,000,000)	(100,000)
		IDG	419,800	419,800	419,800	419,800	0	0	0
		Federal	28,404,000	28,404,000	28,404,000	28,404,000	0	0	0
		Restricted	668,000	668,000	668,000	668,000	0	0	0
		GF/GP	26,513,800	26,413,800	23,513,800	26,413,800	(100,000)	(3,000,000)	(100,000)
House Changes									
The House assumed greater savings.									
24.	<u>One-Time Funding: Remove Pay for Success Funding</u>								
	The budget removed FY 2015-16 one-time funding for the "Pay for Success" program.	Gross	1,500,000	0	0	0	(1,500,000)	(1,500,000)	(1,500,000)
		GF/GP	1,500,000	0	0	0	(1,500,000)	(1,500,000)	(1,500,000)
25.	<u>Increased Funding for 2-1-1 Services</u>								
House Changes									
	The House included \$450,000 in ongoing and \$500,000 in one-time funding to support the 2-1-1 human services phone line.	Gross	550,000	550,000	1,500,000	1,300,000	0	950,000	750,000
		GF/GP	550,000	550,000	1,500,000	1,300,000	0	950,000	750,000
Note: The Senate included a \$100 placeholder in the Community Services unit.									
Conference Changes									
The Conference Report reduced the one-time House funding by \$200,000.									
26.	<u>Inspector General Funding</u>								
House Changes									
	The House included placeholder funding to reflect potential costs if Senate Bill 384, which would give limited police powers to the Department's Office of Inspector General, is enacted.	Gross	0	0	100	0	0	100	0
		GF/GP	0	0	100	0	0	100	0

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DEPARTMENTWIDE ADMINISTRATION (continued)										
27.	<u>Medicaid Cloud Interactive Analytics Platform</u>									
	House Changes	Gross	0	0	100	0	0	100	0	
	The House included placeholder funding for a Medicaid cloud interactive analytics platform.		GF/GP	0	0	100	0	0	100	0

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CHILD SUPPORT ENFORCEMENT									
28.	<u>Increase Child Support Enforcement Operations due to Caseload Increase</u>								
	Due to an average 5% growth in child support cases in FY 2013-14 and FY 2014-15, the budget reflected an increase in GF/GP matching funds to meet Federal Title IV-D requirements.	Gross	21,288,300	21,698,700	21,698,700	21,698,700	410,400	410,400	410,400
		Federal	13,650,800	13,650,800	13,650,800	13,650,800	0	0	0
		GF/GP	7,637,500	8,047,900	8,047,900	8,047,900	410,400	410,400	410,400

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COMMUNITY SERVICES AND OUTREACH									
29.	<u>Public Act 318 of 2014 Funding</u>								
	The Governor included funding to implement Public Act 318 of 2014, which created the Sexual Assault Evidence Kit Tracking and Reporting Commission.	Gross GF/GP	0 0	25,000 25,000	25,000 25,000	25,000 25,000	25,000 25,000	25,000 25,000	
30.	<u>Food Bank Michigan Agricultural Surplus System (MASS)</u>								
	Senate Changes The Senate included new funding for the MASS program, which transfers unused produce to food banks.	Gross GF/GP	0 0	700,000 700,000	0 0	0 0	700,000 700,000	0 0	
	Conference Changes The Conference Report concurred with the House.								
31.	<u>Mobile Food Market</u>								
	Senate Changes The Senate bill included placeholder funding to support a mobile food market.	Gross GF/GP	0 0	100 100	0 0	0 0	100 100	0 0	
32.	<u>Placeholder for Additional 2-1-1 Funding</u>								
	Senate Changes The Senate included a placeholder for an increase to support the 2-1-1 human services phone line.	Gross GF/GP	0 0	100 100	0 0	0 0	100 100	0 0	
	Note: The House included \$450,000 ongoing and \$500,000 one-time funding, with the former funding being reflected in the Departmentwide Administration unit.								
33.	<u>Sexual Assault Comprehensive Services Program Grants Placeholder</u>								
	House Changes The House included placeholder funding for grants to support sexual assault comprehensive services programs.	Gross GF/GP	0 0	0 0	100 100	0 0	0 0	100 100	

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COMMUNITY SERVICES AND OUTREACH (continued)									
34.	<u>Funding for Ottawa County Facility Renovations</u>								
	Conference Changes								
	The Conference Report included funding for renovations for a Hope Network facility in Ottawa County that will be used for skills retraining.	Gross	0	0	0	250,000	0	0	250,000
		GF/GP	0	0	0	250,000	0	0	250,000

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CHILDREN'S SERVICES AGENCY - CHILD WELFARE									
35.	<u>Foster Care Payments Base, Fund Source, and Caseload</u>								
	The budget reflected a foster care caseload decrease of 125 cases for FY 2016-17 to 5,950. The average annual cost per case for FY 2016-17 was increased to \$29,400 from \$27,877.	Gross	187,783,300	188,789,200	188,789,200	188,789,200	1,005,900	1,005,900	1,005,900
		Federal	89,857,700	99,946,200	99,946,200	99,946,200	10,088,500	10,088,500	10,088,500
		Local	14,194,000	14,194,000	14,194,000	14,194,000	0	0	0
		Private	2,805,900	2,424,000	2,424,000	2,424,000	(381,900)	(381,900)	(381,900)
		GF/GP	80,925,700	72,225,000	72,225,000	72,225,000	(8,700,700)	(8,700,700)	(8,700,700)
36.	<u>Adoption Subsidies Base, Fund Source, and Caseload</u>								
	The budget assumed an FY 2016-17 average adoption subsidy caseload of 24,740, down from the current year caseload of 25,064. The assumed average cost per case decreased from \$745.00 to \$734.64.	Gross	229,337,200	223,365,400	223,365,400	223,365,400	(5,971,800)	(5,971,800)	(5,971,800)
		Federal	156,360,500	149,665,400	149,665,400	149,665,400	(6,695,100)	(6,695,100)	(6,695,100)
		GF/GP	72,976,700	73,700,000	73,700,000	73,700,000	723,300	723,300	723,300
37.	<u>Child Care Fund Base, Fund Source, and Caseload</u>								
	The budget reflected increased costs for the Child Care Fund. Due to the enforcement of a Federal rule prohibiting TANF funds from being used for juvenile justice in-home care, all of the increased caseload was funded with GF/GP.	Gross	177,131,800	183,426,000	183,426,000	183,426,000	6,294,200	6,294,200	6,294,200
		Federal	86,715,600	86,714,500	86,714,500	86,714,500	(1,100)	(1,100)	(1,100)
		GF/GP	90,416,200	96,711,500	96,711,500	96,711,500	6,295,300	6,295,300	6,295,300

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CHILDREN'S SERVICES AGENCY - CHILD WELFARE (continued)									
38.	<u>Guardianship Assistance Program Base, Fund Source, and Caseload</u>								
	The budget reflected an assumed FY 2016-17 guardianship assistance caseload increase to 1,280 cases. The average monthly cost per case was projected to drop from \$825.94 to \$778.05.	Gross	9,223,400	11,966,500	11,966,500	11,966,500	2,743,100	2,743,100	2,743,100
		Federal	4,086,200	3,321,300	3,321,300	3,321,300	(764,900)	(764,900)	(764,900)
		GF/GP	5,137,200	8,645,200	8,645,200	8,645,200	3,508,000	3,508,000	3,508,000
39.	<u>Family Support Subsidy Base and Caseload</u>								
	The budget reflected an FY 2016-17 projected average Family Support Subsidy caseload of 6,360, down from 6,616, with an average monthly cost per case at \$222.11.	Gross	17,633,600	16,951,400	16,951,400	16,951,400	(682,200)	(682,200)	(682,200)
		Federal	17,633,600	16,951,400	16,951,400	16,951,400	(682,200)	(682,200)	(682,200)
		GF/GP	0	0	0	0	0	0	0
40.	<u>Transfer Psychiatric Evaluations from Foster Care Line to Child Welfare Evaluations Line</u>								
	The budget moved funding for psychological assessments and evaluations from the Foster Care Payments line to the Child Welfare Medical/Psychiatric Evaluations line. The Foster Care line has included \$2.0 million for psychological assessments, counseling and medical testing and evaluations. A statewide drug testing contract has been phased in over the past two fiscal years.	Gross	1,700,000	1,700,000	1,700,000	1,700,000	0	0	0
		Federal	425,000	425,000	425,000	425,000	0	0	0
		GF/GP	1,275,000	1,275,000	1,275,000	1,275,000	0	0	0

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CHILDREN'S SERVICES AGENCY - CHILD WELFARE (continued)								
41.	<u>Correct Title of Prosecuting Attorney Contracts Line</u>							
	The Governor's budget corrected the title of the Prosecuting Attorney Contracts line to reflect its traditional name.	Gross Federal GF/GP	2,561,700 2,561,700 0	2,561,700 2,561,700 0	2,561,700 2,561,700 0	2,561,700 2,561,700 0	0 0 0	0 0 0
42.	<u>Eliminate Adoption Family Support Network Parent to Parent Contract</u>							
	The Governor proposed eliminating this program.	Gross GF/GP	350,000 350,000	350,000 350,000	0 0	250,000 250,000	0 0	(350,000) (350,000)
	Senate Changes The Senate restored the program.							(100,000) (100,000)
	Conference Changes The Conference Report reduced funding.							
43.	<u>Eliminate County Hold Harmless Funding</u>							
	The Governor proposed elimination of the county hold harmless provision for new administrative cases, private residential rates, and private administrative agency rates.	Gross Federal Local Private GF/GP	364,915,100 176,573,300 14,194,000 2,805,900 171,341,900	364,915,100 176,573,300 14,194,000 2,805,900 171,341,900	364,915,100 176,573,300 14,194,000 2,805,900 171,341,900	364,915,100 176,573,300 14,194,000 2,805,900 171,341,900	0 0 0 0 0	0 0 0 0 0
	Senate Changes The Senate restored this funding.							
	House Changes The House restored this funding.							
	Conference Changes The Conference Report restored this funding.							

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CHILDREN'S SERVICES AGENCY - CHILD WELFARE (continued)									
44.	<u>One-time Funding: Expand Family Preservation</u>								
	The Governor included funding to expand the Family Preservation and Support Services from Wayne County to Genesee and Macomb Counties. The family preservation and support services, specifically the Parent Partner Program, is an in-home approach to parent mentoring by employing former foster care service recipients who have achieved reunification and maintained their children in their care. The average service cost per family is approximately \$3,750 for a six-month intervention. The approximate expenditures of the \$10 million (over 3 years) is: \$2.4 million for Parent Partner, \$7.2 million for the Family Reunification Program, and \$0.4 million for 1.0 FTE and associated costs	FTE	0.0	1.0	1.0	1.0	1.0	1.0	
		Gross	0	3,133,300	3,400,000	6,098,200	3,133,300	3,400,000	6,098,200
		Federal	0	3,133,300	3,400,000	6,098,200	3,133,300	3,400,000	6,098,200
		GF/GP	0	0	0	0	0	0	0
	Senate Changes The Senate reduced funding for this initiative.								
	House Changes The House reduced funding for this initiative.								
	Conference Changes The Conference Report funded this program at a higher level than the Senate and House.								
45.	<u>Assumed Savings Tied to Child Care Fund Audit</u>								
	Senate Changes	Gross	177,131,800	176,131,800	177,131,800	175,131,800	(1,000,000)	0	(2,000,000)
	The Senate assumed savings in the Child Care Fund	Federal	86,715,600	86,715,600	86,715,600	86,715,600	0	0	0
	Fund line from implementation of audit recommendations.	GF/GP	90,416,200	89,416,200	90,416,200	88,416,200	(1,000,000)	0	(2,000,000)
	Conference Changes The Conference Report assumed greater savings.								

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CHILDREN'S SERVICES AGENCY - CHILD WELFARE (continued)									
46.	<u>Funding for Muskegon Covenant Academy</u>								
	Senate Changes	Gross	0	280,000	0	280,000	280,000	0	280,000
	The Senate included the first of proposed three years of funding for services provided at the Muskegon Covenant Academy.	GF/GP	0	280,000	0	280,000	280,000	0	280,000
	Conference Changes	The Conference Report concurred with the Senate.							
47.	<u>Increase in Private Agency Administrative Rate to \$45 per Day</u>								
	Senate Changes	Gross	187,783,300	195,283,300	187,783,400	195,283,300	7,500,000	100	7,500,000
	The Senate included funding to increase the private agency administrative rate to \$45 per day.	Federal	89,857,700	89,857,700	89,857,700	91,802,700	0	0	1,945,000
		Local	14,194,000	14,194,000	14,194,000	14,194,000	0	0	0
		Private	2,805,900	2,805,900	2,805,900	2,805,900	0	0	0
	House Changes	GF/GP	80,925,700	88,425,700	80,925,800	86,480,700	7,500,000	100	5,555,000
	The House included a placeholder for a possible increase in the administrative rate.								
	Conference Changes	The Conference Report increased the rate to \$45 per day but adjusted the fund sourcing.							
48.	<u>Elimination of Fostering Futures Program</u>								
	House Changes	Gross	750,000	750,000	0	750,000	0	(750,000)	0
	The House removed funding for the Fostering Futures program.	GF/GP	750,000	750,000	0	750,000	0	(750,000)	0

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CHILDREN'S SERVICES AGENCY - JUVENILE JUSTICE									
49.	<u>Maxey Fund Source and Funding Level</u>								
	The Governor corrected Maxey financing.	Gross	1,000,000	750,000	1,000,000	500,000	(250,000)	0	(500,000)
	When funds were removed for Maxey closure,	Local	0	0	0	0	0	0	0
	all Local funds were taken out of County	GF/GP	1,000,000	750,000	1,000,000	500,000	(250,000)	0	(500,000)
	Chargeback, but \$889,000 of Local education								
	funding was ignored leaving a negative balance								
	of \$889,000 for Local Chargeback and a								
	positive balance of \$889,000 in Maxey.								
	Senate Changes								
	The Senate reduced funding for the now-closed								
	Maxey facility.								
	Conference Changes								
	The Conference Report assumed greater savings.								
50.	<u>Expiration of Juvenile Accountability Block Grants</u>								
	The Governor's budget recognized that the	FTE	0.5	0.0	0.0	0.0	(0.5)	(0.5)	(0.5)
	Juvenile Accountability Block Grant (JABG)	Gross	1,281,300	0	0	0	(1,281,300)	(1,281,300)	(1,281,300)
	funds will expire at the end of FY 2015-16.	Federal	1,214,500	0	0	0	(1,214,500)	(1,214,500)	(1,214,500)
	The last JABG grant was awarded by the	GF/GP	66,800	0	0	0	(66,800)	(66,800)	(66,800)
	Federal government in FY 2012-13 and								
	FY 2015-16 was the last year the funds								
	could be expended.								
51.	<u>Eliminate Home Rural County Community Care Grants</u>								
	The Governor proposed elimination of this	Gross	400,000	400,000	0	0	0	(400,000)	(400,000)
	program.	GF/GP	400,000	400,000	0	0	0	(400,000)	(400,000)
	Senate Changes								
	The Senate restored the program.								
	Conference Changes								
	The Conference Report eliminated the program.								

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CHILDREN'S SERVICES AGENCY - JUVENILE JUSTICE (continued)										
52.	<u>Juvenile Justice Vision 20/20 Funding</u>									
	Senate Changes		Gross	0	1,000,000	0	0	1,000,000	0	0
	The Senate included funding to support the Juvenile Justice Vision 20/20 program.		GF/GP	0	1,000,000	0	0	1,000,000	0	0

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PUBLIC ASSISTANCE									
53.	<u>Family Independence Program (FIP) Base and Caseload</u>								
	The budget reflected an FY 2016-17 caseload of 24,800 cases at an average cost of \$365.61 per month.	Gross	112,992,700	109,104,600	109,104,600	109,104,600	(3,888,100)	(3,888,100)	(3,888,100)
		Federal	42,731,900	41,261,600	41,261,600	41,261,600	(1,470,300)	(1,470,300)	(1,470,300)
		Restricted	42,548,700	41,084,500	41,084,500	41,084,500	(1,464,200)	(1,464,200)	(1,464,200)
		GF/GP	27,712,100	26,758,500	26,758,500	26,758,500	(953,600)	(953,600)	(953,600)
54.	<u>State Disability Assistance (SDA) Base and Caseload</u>								
	The budget reflected an FY 2016-17 caseload of 4,900 cases at an average cost of \$210.10 per month.	Gross	14,018,300	12,353,900	12,353,900	12,353,900	(1,664,400)	(1,664,400)	(1,664,400)
		Restricted	5,480,900	5,480,900	5,480,900	5,480,900	0	0	0
		GF/GP	8,537,400	6,873,000	6,873,000	6,873,000	(1,664,400)	(1,664,400)	(1,664,400)
55.	<u>Supplemental Security Income (SSI) Base and Caseload</u>								
	The budget reflected an FY 2016-17 caseload of 277,300 cases at an average cost of \$19.04 per month.	Gross	63,194,100	63,357,400	63,357,400	63,357,400	163,300	163,300	163,300
		GF/GP	63,194,100	63,357,400	63,357,400	63,357,400	163,300	163,300	163,300
56.	<u>Food Assistance Program (FAP) Base and Caseload</u>								
	The budget reflected a reduced FY 2016-17 caseload of 795,400 cases at an average cost of \$246.01 per month. The average cost per case climbed due to annual inflationary adjustments of 1.4% per year.	Gross	2,419,025,900	2,348,117,400	2,348,117,400	2,348,117,400	(70,908,500)	(70,908,500)	(70,908,500)
		Federal	2,413,025,900	2,342,117,400	2,342,117,400	2,342,117,400	(70,908,500)	(70,908,500)	(70,908,500)
		Restricted	6,000,000	6,000,000	6,000,000	6,000,000	0	0	0
		GF/GP	0	0	0	0	0	0	0

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PUBLIC ASSISTANCE (continued)									
57.	<u>Increase in Multicultural Funding</u>								
	The budget increased total funding for various multicultural organizations that provide social services programs for special populations in Southeastern Michigan. The Arab Chaldean Council, ACCESS, and the Jewish Federation would each get \$3.0 million while the Chaldean Chamber Foundation would get \$2.6 million, with the rest going for veterans, Asian, and Latino population services.	Gross	11,858,300	13,303,800	13,303,800	13,303,800	1,445,500	1,445,500	1,445,500
		Federal	1,115,500	1,115,500	1,115,500	1,115,500	0	0	0
		GF/GP	10,742,800	12,188,300	12,188,300	12,188,300	1,445,500	1,445,500	1,445,500
58.	<u>Increase in FIP Clothing Allowance</u>								
	The budget included an increase in the FIP clothing allowance from \$140 to \$200 per year. The budget also would extend the clothing allowance from child-only cases to all children in the FIP program, increasing the number of children receiving the clothing allowance by 25,000.	Gross	112,992,700	116,382,700	117,762,700	116,382,700	3,390,000	4,770,000	3,390,000
		Federal	42,731,900	46,121,900	47,501,900	46,121,900	3,390,000	4,770,000	3,390,000
		Restricted	42,548,700	42,548,700	42,548,700	42,548,700	0	0	0
		GF/GP	27,712,100	27,712,100	27,712,100	27,712,100	0	0	0
	Senate Changes The Senate bill expanded the clothing allowance to all FIP children but kept the amount at the current level, \$140 per year.								
	House Changes The House also expanded the clothing allowance to all FIP children and increased the amount to \$170 per year.								
	Conference Changes The Conference Report concurred with the Senate.								
59.	<u>Reduction in Funding for Suspicion-Based Drug Testing Pilot</u>								
	House Changes The House reduced funding for this initiative.	Gross	300,000	300,000	50,000	300,000	0	(250,000)	0
		Federal	300,000	300,000	50,000	300,000	0	(250,000)	0
		GF/GP	0	0	0	0	0	0	0

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PUBLIC ASSISTANCE (continued)									
60.	<u>Increase in Food Bank Funding</u>								
	House Changes	Gross	1,795,000	1,795,000	2,045,000	2,045,000	0	250,000	250,000
	The House provided more money for Food Bank services.	Federal	250,000	250,000	250,000	250,000	0	0	0
		GF/GP	1,545,000	1,545,000	1,795,000	1,795,000	0	250,000	250,000
	Note: The Senate provided funding for the expansion of the MASS program in the Community Services unit.								
	Conference Changes								
	The Conference Report concurred with the House.								
61.	<u>Increase in Indigent Burial Rates</u>								
	House Changes	Gross	4,300,000	4,300,000	4,375,000	4,375,000	0	75,000	75,000
	The House increased indigent burial rates by \$5 per case.	Federal	300,000	300,000	300,000	300,000	0	0	0
		GF/GP	4,000,000	4,000,000	4,075,000	4,075,000	0	75,000	75,000
	Conference Changes								
	The Conference Report concurred with the House.								
62.	<u>Reduction in Emergency Local Services Allocations</u>								
	House Changes	Gross	11,357,500	11,357,500	10,857,500	11,357,500	0	(500,000)	0
	The House reduced emergency services funding.	Federal	5,915,000	5,915,000	5,915,000	5,915,000	0	0	0
		Restricted	1,000,000	1,000,000	1,000,000	1,000,000	0	0	0
		GF/GP	4,442,500	4,442,500	3,942,500	4,442,500	0	(500,000)	0

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PUBLIC ASSISTANCE (continued)									
63.	<u>Restoration of "Heat and Eat" Program</u>								
	House Changes	Gross	2,419,025,900	2,419,025,900	2,560,333,300	2,419,025,900	0	141,307,400	0
	The House included funding to reflect restoration of the	Federal	2,413,025,900	2,413,025,900	2,551,182,300	2,413,025,900	0	138,156,400	0
	"Heat and Eat" program. This program would reinstate	Restricted	6,000,000	6,000,000	6,000,000	6,000,000	0	0	0
	\$21 per month payments from the Low-Income Home	GF/GP	0	0	3,151,000	0	0	3,151,000	0
	Energy Assistance Program (LIHEAP) to certain Food								
	Assistance cases to enable those individuals to								
	receive expanded food assistance payments. \$3,151,000								
	in GF/GP funding in the LIHEAP line would offset the								
	Federal LIHEAP dollars used to make these payments.								
	Food Assistance expenditures, funded completely with								
	Federal dollars, would increase by \$138,156,400.								
	Conference Changes								
	The Conference Report did not include this item.								

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FIELD OPERATIONS AND SUPPORT SERVICES									
64.	<u>Line Item Roll-Ups</u>								
	The Governor proposed the following line item roll-ups: Adult Services Field Staff into Public Assistance Field Staff, the Administrative Support Workers into Public Assistance Field Staff, and the Wage Employment Verification into Field Policy and Administration.	Gross	NA	NA	NA	NA	0	0	0
		GF/GP	NA	NA	NA	NA	0	0	0
Senate Changes									
The Senate rejected the rolling up of Adult Services Field Staff and Administrative Support Workers into the Public Assistance Field Staff line.									
House Changes									
The House also rejected these roll-ups.									
Conference Changes									
The Conference Report concurred with the House and Senate.									
65.	<u>Swap GF/GP between Michigan Rehabilitation Services (MRS) and Centers for Independent Living with Capped Federal</u>								
	The Governor adjusted the MRS appropriation and the FY 2015-16 GF/GP reduction in Independent Living by swapping GF/GP and Capped Federal funds. This adjustment would have no impact on total funding for either program.	Gross	NA	NA	NA	NA	0	0	0
		Federal	NA	NA	NA	NA	0	0	0
		GF/GP	NA	NA	NA	NA	0	0	0

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FIELD OPERATIONS AND SUPPORT SERVICES (continued)									
66.	<u>Move TALX/SAVE Contract to Field Policy and Administration line</u>								
	The Governor transferred the TALX and SAVE income verification contracts from Field Operations CSS&M to Field Operations Policy and Administration. The contracts are administrated in field administration and the administration stated that moving the funding for these contracts will delineate the difference between funding for local offices.	Gross	1,325,000	1,325,000	1,325,000	1,325,000	0	0	0
		Federal	834,700	834,700	834,700	834,700	0	0	0
		GF/GP	490,300	490,300	490,300	490,300	0	0	0
67.	<u>Transfer Capped Federal Funds from Volunteer Services to Field Staff</u>								
	The Governor swapped Capped Federal authorization from Volunteer Services to Public Assistance Field Staff. The Social Services Block Grant statute limits the flexibility at the county level to use the appropriated dollars. The Governor's recommendation reflected the belief that these funds can be utilized elsewhere as the block grant is a capped Federal revenue source.	Gross	NA	NA	NA	NA	0	0	0
		Federal	NA	NA	NA	NA	0	0	0
		GF/GP	NA	NA	NA	NA	0	0	0

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FIELD OPERATIONS AND SUPPORT SERVICES (continued)									
68.	<u>Adjust Michigan Rehabilitation Services Restricted Dollars to Actual</u>								
	The Governor lowered the authorization for the Second Injury Fund from \$149,400 to \$40,000. This fund reimburses or pays directly the workers' compensation benefit obligations and vocational rehabilitation costs when Michigan employers hire certain individuals with medical impairments. The Governor also reduced authorization for the Rehabilitation Service Fees from \$1.4 million to \$0.4 million to reflect actual revenue.	Gross	130,927,900	129,759,300	129,759,300	129,759,300	(1,168,600)	(1,168,600)	(1,168,600)
		Federal	104,419,900	104,419,900	104,419,900	104,419,900	0	0	0
		Local	6,534,600	6,534,600	6,534,600	6,534,600	0	0	0
		Private	1,844,600	1,844,600	1,844,600	1,844,600	0	0	0
		Restricted	1,591,400	422,800	422,800	422,800	(1,168,600)	(1,168,600)	(1,168,600)
		GF/GP	16,537,400	16,537,400	16,537,400	16,537,400	0	0	0
69.	<u>One-time: Remove FY 2015-16 Employment and Training Services Funding</u>								
	The budget eliminated FY 2015-16 one-time funding for employment and training services.	Gross	800,000	0	0	0	(800,000)	(800,000)	(800,000)
		Federal	400,000	0	0	0	(400,000)	(400,000)	(400,000)
		GF/GP	400,000	0	0	0	(400,000)	(400,000)	(400,000)
70.	<u>Agrability Grant through Michigan Rehabilitation Services</u>								
	Senate Changes	Gross	0	50,000	50,000	50,000	50,000	50,000	50,000
	The Senate included funding for an agrability contract funded through Michigan Rehabilitation Services.	GF/GP	0	50,000	50,000	50,000	50,000	50,000	50,000
	House Changes	The House also included this funding.							
	Conference Changes	The Conference Report concurred with the House and Senate.							
71.	<u>Pathways to Potential Placeholder</u>								
	House Changes	Gross	0	0	100	0	0	100	0
	The House included placeholder funding for expansion of Pathways to Potential services in Detroit.	GF/GP	0	0	100	0	0	100	0

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DISABILITY DETERMINATION SERVICES									
72.	<u>Increase in Medical Costs</u>								
	The Governor's budget reflected increased medical costs for Disability Determination Services. This trend is expected to continue through FY 2016-17 as it has in past years. There is enough Federal authorization to cover this increase but GF/GP would have to be added to cover the matching portion.	Gross	109,419,900	109,558,700	109,558,700	109,558,700	138,800	138,800	138,800
		IDG	172,600	172,600	172,600	172,600	0	0	0
		Federal	106,009,400	106,009,400	106,009,400	106,009,400	0	0	0
		GF/GP	3,237,900	3,376,700	3,376,700	3,376,700	138,800	138,800	138,800
73.	<u>New Disability Determination Services Contract</u>								
	Senate Changes	Gross	0	500,000	500,000	500,000	500,000	500,000	500,000
	The Senate included funding for a disability determination services contract with Legal Services of Michigan.	GF/GP	0	500,000	500,000	500,000	500,000	500,000	500,000
	House Changes								
	The House included funding for a contract as well, under a different line item name, "SSI Advocacy Legal Services" in the Field Operations unit.								
	Conference Changes								
	The Conference Report concurred with the House.								

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BEHAVIORAL HEALTH ADMINISTRATION								
74.	<u>Move Recipient Rights Services into New Separate Line Item</u>							
	The Governor's budget shifted \$2.7 million	FTE	19.0	19.0	19.0	19.0	0.0	0.0
	Gross for the Office of Recipient Rights from	Gross	2,700,000	2,700,000	2,700,000	2,700,000	0	0
	the Behavioral Health Administration line to	GF/GP	2,700,000	2,700,000	2,700,000	2,700,000	0	0
	a new Office of Recipient Rights line.							
House Changes								
The House corrected the transfer to reflect the shift of 19.0 FTEs to the new line.								
75.	<u>One-time: Remove one-time Mental Health and Wellness Commission Funding</u>							
	The Governor's budget removed one-time	Gross	1,500,000	0	0	0	(1,500,000)	(1,500,000)
	funding for implementation of Mental Health	GF/GP	1,500,000	0	0	0	(1,500,000)	(1,500,000)
	and Wellness Commission Recommendations.							
76.	<u>One-time: Remove Drug Policy Initiatives Funding</u>							
	The Governor's budget removed one-time	Gross	1,500,000	0	0	0	(1,500,000)	(1,500,000)
	funding for drug policy initiatives to reduce	GF/GP	1,500,000	0	0	0	(1,500,000)	(1,500,000)
	prescription drug abuse and support recovery.							
77.	<u>One-time: Autism Alliance Navigator</u>							
	The Governor's budget included funding for an	Gross	0	100	1,125,000	565,000	100	1,125,000
	assessment of the state's expansion of the	GF/GP	0	100	1,125,000	565,000	100	1,125,000
	Medicaid autism benefit up to age 21 and to							
	provide support for families of autistic							
	children seeking services.							
Senate Changes								
The Senate bill reduced funding for this initiative to a \$100 placeholder.								
Conference Changes								
The Conference Report included roughly one half the Governor's proposed funding.								

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BEHAVIORAL HEALTH ADMINISTRATION (continued)									
78.	<u>Mental Health and Wellness Commission Funding</u>								
Senate Changes		Gross	27,562,500	22,050,000	27,562,500	22,050,000	(5,512,500)	0	(5,512,500)
The Senate reduced funding for the Mental Health		Federal	18,242,500	14,594,000	18,242,500	14,594,000	(3,648,500)	0	(3,648,500)
and Wellness Commission recommendations by 20%.		GF/GP	9,320,000	7,456,000	9,320,000	7,456,000	(1,864,000)	0	(1,864,000)
Conference Changes		The Conference Report concurred with the Senate.							

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BEHAVIORAL HEALTH SERVICES									
79.	<u>Medicaid Mental Health Services Base and Caseload</u>								
	The budget included a slight decrease to cover the projected FY 2016-17 funding need for Medicaid mental health services. These funds are provided on a capitated basis to the Medicaid Pre-Paid Inpatient Health Plans (PIHPs).	Gross	2,383,364,300	2,345,043,400	2,345,043,400	2,345,043,400	(38,320,900)	(38,320,900)	(38,320,900)
		Federal	1,564,003,300	1,539,037,100	1,539,037,100	1,539,037,100	(24,966,200)	(24,966,200)	(24,966,200)
		Local	25,228,900	25,228,900	25,228,900	25,228,900	0	0	0
		Restricted	20,728,500	20,728,500	20,728,500	20,728,500	0	0	0
		GF/GP	773,403,600	760,048,900	760,048,900	760,048,900	(13,354,700)	(13,354,700)	(13,354,700)
80.	<u>Medicaid Substance Use Disorder Services Base and Caseload</u>								
	The budget included a slight increase to cover the projected FY 2016-17 funding need for Medicaid substance use disorder services.	Gross	47,495,700	47,821,000	47,821,000	47,821,000	325,300	325,300	325,300
		Federal	31,156,800	31,368,800	31,368,800	31,368,800	212,000	212,000	212,000
		GF/GP	16,338,900	16,452,200	16,452,200	16,452,200	113,300	113,300	113,300
81.	<u>Healthy Michigan Plan (HMP) Behavioral Health Base and Caseload</u>								
	The budget included a decrease to align funding with actual program caseload, account for an adjustment in the PIHP capitation rates, and reflect an assumed 1.0% growth in caseload.	Gross	355,432,600	232,696,100	232,696,100	232,696,100	(122,736,500)	(122,736,500)	(122,736,500)
		Federal	342,103,900	223,970,000	223,970,000	223,970,000	(118,133,900)	(118,133,900)	(118,133,900)
		GF/GP	13,328,700	8,726,100	8,726,100	8,726,100	(4,602,600)	(4,602,600)	(4,602,600)
82.	<u>Medicaid Autism Services Base and Caseload</u>								
	The Governor's budget included an increase for Medicaid Autism Services to reflect the expansion of eligibility to children between the ages of 6 and 21 as well as an increase in caseload.	Gross	36,418,500	62,721,900	62,721,900	62,721,900	26,303,400	26,303,400	26,303,400
		Federal	23,890,500	41,027,200	41,027,200	41,027,200	17,136,700	17,136,700	17,136,700
		GF/GP	12,528,000	21,694,700	21,694,700	21,694,700	9,166,700	9,166,700	9,166,700

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BEHAVIORAL HEALTH SERVICES (continued)								
83. <u>Actuarial Soundness Adjustment for Medicaid Mental Health and Substance Abuse Disorder Services</u>								
Under the Medicaid mental health managed care waiver, the State is require to pay actuarially sound capitation rates to PIHPs for Medicaid mental health and substance abuse services. The Governor proposed a 1.5% increase in these rates.	Gross	2,430,860,000	2,465,089,200	2,465,089,200	2,465,089,200	34,229,200	34,229,200	34,229,200
	Federal	1,595,160,100	1,617,460,400	1,617,460,400	1,617,460,400	22,300,300	22,300,300	22,300,300
	Local	25,228,900	25,228,900	25,228,900	25,228,900	0	0	0
	Restricted	20,728,500	20,728,500	20,728,500	20,728,500	0	0	0
	GF/GP	789,742,500	801,671,400	801,671,400	801,671,400	11,928,900	11,928,900	11,928,900
84. <u>Actuarial Soundness Adjustment for HMP Behavioral Health Services</u>								
The Governor's budget included a similar 2.0% increase to reflect actuarially sound capitation rates for the behavioral health services provided under Medicaid expansion, the Healthy Michigan Plan.	Gross	355,432,600	360,086,500	360,086,500	360,086,500	4,653,900	4,653,900	4,653,900
	Federal	342,103,900	346,583,300	346,583,300	346,583,300	4,479,400	4,479,400	4,479,400
	GF/GP	13,328,700	13,503,200	13,503,200	13,503,200	174,500	174,500	174,500
85. <u>Placeholder for Direct Care Worker Wage Increase</u>								
Senate Changes	Gross	2,383,364,300	2,383,364,400	2,383,364,300	2,383,364,300	100	0	0
The Senate included a placeholder for a behavioral health direct care worker wage increase.	Federal	1,564,003,300	1,564,003,400	1,564,003,300	1,564,003,300	100	0	0
	Local	25,228,900	25,228,900	25,228,900	25,228,900	0	0	0
	Restricted	20,728,500	20,728,500	20,728,500	20,728,500	0	0	0
	GF/GP	773,403,600	773,403,600	773,403,600	773,403,600	0	0	0
86. <u>Increase for Community Mental Health (CMH) non-Medicaid Services</u>								
House Changes	Gross	117,050,400	117,050,400	118,806,200	120,050,400	0	1,755,800	3,000,000
The House included a 1.5% increase in funding for CMH non-Medicaid Services.	GF/GP	117,050,400	117,050,400	118,806,200	120,050,400	0	1,755,800	3,000,000
Conference Changes	The Conference Report included a larger increase.							

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BEHAVIORAL HEALTH SERVICES (continued)									
87.	<u>Base Adjustment for Children with Serious Emotional Disturbance (SED) Waiver</u>								
	House Changes	Gross	12,647,900	12,647,900	10,000,000	10,000,000	0	(2,647,900)	(2,647,900)
	The House reduced funding to reflect estimated demand for services.	Federal	9,302,100	9,302,100	7,563,800	7,563,800	0	(1,738,300)	(1,738,300)
		GF/GP	3,345,800	3,345,800	2,436,200	2,436,200	0	(909,600)	(909,600)
	Conference Changes	The Conference Report concurred with the House.							
88.	<u>Reduction to University Autism Funding</u>								
	House Changes	Gross	2,500,000	2,500,000	1,000,000	1,000,000	0	(1,500,000)	(1,500,000)
	The House reduced funding for autism services provided through five State universities.	GF/GP	2,500,000	2,500,000	1,000,000	1,000,000	0	(1,500,000)	(1,500,000)
	Conference Changes	The Conference Report concurred with the House.							

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HEALTH POLICY									
91.	<u>Carryforward Emergency Medical Services (EMS) Revenue</u>								
	The budget included an increase in	Gross	6,415,200	6,518,900	6,518,900	6,518,900	103,700	103,700	103,700
	Emergency Medical Services spending	Federal	1,113,800	1,113,800	1,113,800	1,113,800	0	0	0
	authorization to reflect carryforward revenues.	Restricted	3,896,300	4,000,000	4,000,000	4,000,000	103,700	103,700	103,700
		GF/GP	1,405,100	1,405,100	1,405,100	1,405,100	0	0	0
92.	<u>Eliminate one-time LARA IDG for Nursing Transitions</u>								
	The Governor's budget removed one-time	Gross	268,700	0	0	0	(268,700)	(268,700)	(268,700)
	funding from LARA to support a Nursing	IDG	268,700	0	0	0	(268,700)	(268,700)	(268,700)
	Transition to Practice project conducted by	GF/GP	0	0	0	0	0	0	0
	the Michigan Public Health Institute.								
93.	<u>Reduce State Innovation Model (SIM) Grant to Placeholder</u>								
	Senate Changes	Gross	25,000,000	100	25,000,000	10,000,000	(24,999,900)	0	(15,000,000)
	The Senate reduced the SIM grant to a placeholder	Federal	25,000,000	100	25,000,000	10,000,000	(24,999,900)	0	(15,000,000)
	amount.	GF/GP	0	0	0	0	0	0	0
	Conference Changes								
	The Conference Report recognized \$10 million in funding								
	from the SIM grant.								
94.	<u>Remove Bone Marrow Registry Funding</u>								
	House Changes	Gross	250,000	250,000	0	250,000	0	(250,000)	0
	The House removed funding for the bone marrow	GF/GP	250,000	250,000	0	250,000	0	(250,000)	0
	"Be the Match" registry.								
	Conference Changes								
	The Conference Report concurred with the Senate.								

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HEALTH POLICY (continued)									
95.	<u>Reduction to Health Innovations Grants</u>								
	House Changes	Gross	1,500,000	1,500,000	1,000,000	1,000,000	0	(500,000)	(500,000)
	The House reduced funding for this line.	GF/GP	1,500,000	1,500,000	1,000,000	1,000,000	0	(500,000)	(500,000)
	Conference Changes								
	The Conference Report concurred with the House.								
96.	<u>One-time: Opioid Prevention Pilot</u>								
	House Changes	Gross	0	0	850,000	0	0	850,000	0
	The House included one-time funding for a pilot project funded through Western Michigan University.	GF/GP	0	0	850,000	0	0	850,000	0
	Conference Changes								
	The Conference Report did not fund this item.								

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DISEASE CONTROL, PREVENTION, AND EPIDEMIOLOGY									
97.	<u>Roll AIDS Surveillance and Tuberculosis Control Lines into Administrative Line</u>								
	The Governor's budget rolled up \$1.85 million from the AIDS Surveillance and Prevention Program line, along with \$867,000 from the Tuberculosis Control and Prevention line into the Epidemiology Administration line.	Gross	2,721,100	2,721,100	2,721,100	2,721,100	0	0	0
		Federal	2,721,100	2,721,100	2,721,100	2,721,100	0	0	0
		GF/GP	0	0	0	0	0	0	0
98.	<u>Removal of Vaccine Funding</u>								
	House Changes	Gross	2,500,000	2,500,000	0	1,500,000	0	(2,500,000)	(1,000,000)
	The House removed FY 2015-16 funding for a new program to promote immunization, that featured a 4-1 Private to GF/GP match.	Federal	0	0	0	1,000,000	0	0	1,000,000
		Private	2,000,000	2,000,000	0	0	0	(2,000,000)	(2,000,000)
		GF/GP	500,000	500,000	0	500,000	0	(500,000)	0
	Conference Changes	The Conference Report replaced this funding with a \$2 million Gross, \$1 million payment through the Medicaid health plans to help promote immunization. The current year GF/GP funding would be carried forward.							
99.	<u>\$100 Increase for Lead Abatement</u>								
	Senate Changes	Gross	4,384,300	4,384,400	4,384,300	4,384,300	100	0	0
	The Senate increased funding for the Healthy Homes lead abatement line item.	Federal	1,843,800	1,843,800	1,843,800	1,843,800	0	0	0
		Private	77,400	77,400	77,400	77,400	0	0	0
		Restricted	713,900	713,900	713,900	713,900	0	0	0
		GF/GP	1,746,200	1,746,300	1,746,200	1,746,200	100	0	0
100.	<u>Interdepartmental Grant from DNR to Combat Zika Virus</u>								
	House Changes	Gross	0	0	150,000	0	0	150,000	0
	The House reflected an IDG from the Department of Natural Resources for education, outreach, prevention, detection, monitoring, screening, and testing for the Zika virus.	IDG	0	0	150,000	0	0	150,000	0
		GF/GP	0	0	0	0	0	0	0
	Conference Changes	The Conference Report did not fund this item.							

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LOCAL HEALTH AND ADMINISTRATIVE SERVICES									
101.	<u>Roll Local Health Services Line into Essential Local Public Health Services Line</u>								
	The Governor's budget transferred 1.3 FTEs and \$447,700 from the Local Health Services line into the Essential Local Public Health Services line.	Gross	447,700	447,700	447,700	447,700	0	0	0
		Federal	447,700	447,700	447,700	447,700	0	0	0
		GF/GP	0	0	0	0	0	0	0
	Senate Changes								
	The Senate rejected the roll-up of the Local Health Services line into the Essential Local Public Health Services line.								
	House Changes								
	The House also rejected this roll-up.								
	Conference Changes								
	The Conference Report concurred with the House and Senate.								
102.	<u>Placeholder for Traumatic Brain Injury Treatment</u>								
	House Changes	Gross	0	0	100	0	0	100	0
	The House included a placeholder for efforts to expand treatment for traumatic brain injury.	GF/GP	0	0	100	0	0	100	0
	Conference Changes								
	The Conference Report did not fund this item.								

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FAMILY, MATERNAL, AND CHILD HEALTH									
103.	<u>Roll Pregnancy Prevention Line into Family Planning Line</u>								
	The Governor's budget transferred the Pregnancy Prevention line into the Family Planning Local Agreements line.	Gross Federal GF/GP	602,100 602,100 0	602,100 602,100 0	602,100 602,100 0	602,100 602,100 0	0 0 0	0 0 0	0 0 0
House Changes									
The House rejected this roll-up.									
Conference Changes									
The Conference Report concurred with the House.									
104.	<u>Replace Expiring Carryforward Funding for Real Alternatives Program</u>								
	Senate Changes The Senate increased funding for the Real Alternatives program, using TANF dollars, to replace expiring carryforward funding.	Gross Federal GF/GP	50,000 0 50,000	400,000 400,000 0	400,000 400,000 0	400,000 400,000 0	350,000 400,000 (50,000)	350,000 400,000 (50,000)	350,000 400,000 (50,000)
House Changes									
The House made the same adjustment as the Senate.									
105.	<u>Replace Expiring Carryforward Funding for Rural Visitation</u>								
	Senate Changes The Senate replaced expiring carryforward funding for the rural visitation program with GF/GP.	Gross GF/GP	1,750,000 1,750,000	2,300,000 2,300,000	2,300,000 2,300,000	2,300,000 2,300,000	550,000 550,000	550,000 550,000	550,000 550,000
House Changes									
The House made the same adjustment as the Senate.									
106.	<u>Name Change for Sudden Infant Death Syndrome Line</u>								
	House Changes The House changed the name of the line to "Sudden and Unexpected Infant Death and Suffocation Program".	Gross Federal GF/GP	321,300 321,300 0	321,300 321,300 0	321,300 321,300 0	321,300 321,300 0	0 0 0	0 0 0	0 0 0
Conference Changes									
The Conference Report concurred with the House.									

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CHILDREN'S SPECIAL HEALTH CARE SERVICES (CSHCS)									
107.	<u>Medical Care and Treatment Base and Caseload</u>								
	The budget reflected the projected FY 2016-17 expenditures and fund sourcing for the CSHCS program.	Gross	188,291,400	185,641,900	185,641,900	185,641,900	(2,649,500)	(2,649,500)	(2,649,500)
		Federal	100,157,900	97,989,100	97,989,100	97,989,100	(2,168,800)	(2,168,800)	(2,168,800)
		Restricted	3,340,100	3,340,100	3,340,100	3,340,100	0	0	0
		GF/GP	84,793,400	84,312,700	84,312,700	84,312,700	(480,700)	(480,700)	(480,700)
108.	<u>Adjust Parent Participation Revenue to Actual</u>								
	The Governor's budget reflected a slight decrease in revenue collections for parent fees, and a projected growth in costs for FY 2016-17.	Gross	188,291,400	187,812,300	187,812,300	187,812,300	(479,100)	(479,100)	(479,100)
		Federal	100,157,900	100,157,900	100,157,900	100,157,900	0	0	0
		Restricted	3,340,100	2,861,000	2,861,000	2,861,000	(479,100)	(479,100)	(479,100)
		GF/GP	84,793,400	84,793,400	84,793,400	84,793,400	0	0	0
109.	<u>Full Year Cost of Cystic Fibrosis Drug Orkambi</u>								
	The Governor's budget annualized the cost of the new Cystic Fibrosis drug, Orkambi. Funding for this treatment was first included in the FY 2015-16 budget by Legislative Transfer 2016-1.	Gross	188,291,400	235,783,900	235,783,900	235,783,900	47,492,500	47,492,500	47,492,500
		Federal	100,157,900	109,292,400	109,292,400	109,292,400	9,134,500	9,134,500	9,134,500
		Restricted	3,340,100	3,340,100	3,340,100	3,340,100	0	0	0
		GF/GP	84,793,400	123,151,400	123,151,400	123,151,400	38,358,000	38,358,000	38,358,000

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CRIME VICTIMS SERVICES COMMISSION									
110.	<u>Victims of Crime Act (VOCA) Grant Increase</u>								
	The budget reflects an increase in Federal Victim of Crime Act (VOCA) Grants to provide direct services to crime victims, as well as enhanced training to counselors and advocates.								
		Gross	15,000,000	59,279,300	59,279,300	59,279,300	44,279,300	44,279,300	44,279,300
		Federal	15,000,000	59,279,300	59,279,300	59,279,300	44,279,300	44,279,300	44,279,300
		GF/GP	0	0	0	0	0	0	0

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AGING AND ADULT SERVICES ADMINISTRATION									
111.	<u>Increased Funding for Senior Nutrition Services</u>								
	Senate Changes	Gross	39,044,000	44,044,000	39,044,000	39,044,000	5,000,000	0	0
	The Senate increased funding for Senior Nutrition Services.	Federal	27,657,000	27,657,000	27,657,000	27,657,000	0	0	0
		Private	300,000	300,000	300,000	300,000	0	0	0
		GF/GP	11,087,000	16,087,000	11,087,000	11,087,000	5,000,000	0	0
	Conference Changes	The Conference Report did not fund this increase.							
112.	<u>Increased Funding for Senior Community Services</u>								
	House Changes	Gross	39,013,900	39,013,900	39,850,600	41,513,900	0	836,700	2,500,000
	The House increased funding for community services.	Federal	22,280,400	22,280,400	22,280,400	22,280,400	0	0	0
		GF/GP	16,733,500	16,733,500	17,570,200	19,233,500	0	836,700	2,500,000
	Conference Changes	The Conference Report increased funding for community services.							
113.	<u>Placeholder for Guardianship Contracts</u>								
	House Changes	Gross	0	0	100	2,726,000	0	100	2,726,000
	The House included a placeholder to increase funding for guardianship services.	Federal	0	0	0	1,776,000	0	0	1,776,000
		GF/GP	0	0	100	950,000	0	100	950,000
	Conference Changes	The Conference Report increased the guardianship rate from \$60 per month to \$83 per month, with the funding being reflected in the Medicaid Long Term Care Services line.							

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MEDICAL SERVICES ADMINISTRATION									
114.	<u>State Children's Health Insurance Program (SCHIP) Administrative Match</u>								
	The Governor's budget adjusted the match rate for SCHIP administrative expenses that used the enhanced FMAP of 98.92% instead of the regular rate of 75.92%.	Gross	3,500,000	3,500,000	3,500,000	3,500,000	0	0	0
		Federal	3,462,200	2,657,200	3,462,200	3,462,200	(805,000)	0	0
		GF/GP	37,800	842,800	37,800	37,800	805,000	0	0
	House Changes								
	The House assumed continuation of the 98.92% match rate.								
	Conference Changes								
	The Conference Report concurred with the House.								
115.	<u>Fund Sourcing for New FY 2015-16 Staff</u>								
	The Governor's budget adjusted fund sourcing for 5.0 FTEs for the Office of the Inspector General from 100% Federal to 50% Federal and 50% GF/GP.	Gross	NA	NA	NA	NA	0	0	0
		Federal	NA	NA	NA	NA	(600,000)	0	0
		GF/GP	NA	NA	NA	NA	600,000	0	0
	House Changes								
	The House assumed the 100% match rate.								
	Conference Changes								
	The Conference Report concurred with the House.								
116.	<u>Decreased Match Funding for Dual Eligible Staff</u>								
	The budget reflected a reduction in the Federal match rate from 100% to 50% as 5.0 FTEs are phased over from implementing the MI Health Link program to administering the program.	Gross	NA	NA	NA	NA	0	0	0
		Federal	NA	NA	NA	NA	(144,200)	(144,200)	(144,200)
		GF/GP	NA	NA	NA	NA	144,200	144,200	144,200

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MEDICAL SERVICES ADMINISTRATION (continued)									
117.	<u>Consolidate MiChild Administration with Medical Services Administration Line</u>								
	The budget rolled the MiChild Administration line into the Medical Services Administration line to reflect the transfer of the MiChild Program into Health Plan Services.	Gross	3,500,000	3,500,000	3,500,000	3,500,000	0	0	0
		Federal	3,462,200	3,462,200	3,462,200	3,462,200	0	0	0
		GF/GP	37,800	37,800	37,800	37,800	0	0	0
118.	<u>End of Facility Inspection Contract</u>								
	The Governor's budget reflected the end of the DHHS contract with LARA to provide fire and safety facility inspections.	Gross	132,800	0	0	0	(132,800)	(132,800)	(132,800)
		GF/GP	132,800	0	0	0	(132,800)	(132,800)	(132,800)
119.	<u>End of Integrated Care for Dual Eligibles Grant</u>								
	The Governor's budget reflected the end of the second year of the Dual Eligibles Implementation Grant as the demonstration will move from the implementation to operationalization phase. The reduction accounts for reduced Federal funding for additional dual eligible FTEs.	Gross	5,656,000	0	0	0	(5,656,000)	(5,656,000)	(5,656,000)
		Federal	4,242,000	0	0	0	(4,242,000)	(4,242,000)	(4,242,000)
		GF/GP	1,414,000	0	0	0	(1,414,000)	(1,414,000)	(1,414,000)

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MEDICAL SERVICES ADMINISTRATION (continued)									
120.	<u>Technology Supporting Integrated Service Delivery (Ongoing and One-time)</u>								
	The Governor's budget included funding for the development of Integrated Service Delivery technology to enhance the delivery of DHHS services to Michigan residents. Of the total funding \$36.9 million Gross is one-time federal funding.	FTE	0.0	0.0	15.0	15.0	0.0	15.0	15.0
		Gross	0	36,922,600	24,615,000	43,230,500	36,922,600	24,615,000	43,230,500
		Federal	0	36,922,500	23,999,600	42,599,700	36,922,500	23,999,600	42,599,700
		GF/GP	0	100	615,400	630,800	100	615,400	630,800
Senate Changes									
The Senate reduced the ongoing funding for this initiative to \$100 placeholder funding.									
House Changes									
The House delayed the implementation of this initiative to April 1, 2017, reducing ongoing funding by \$6.2 million Gross and \$615,400 GF/GP and one-time funding by \$18.5 million Gross and Federal.									
Conference Changes									
The Conference Report included the one-time funding and reduced GF/GP funding by \$600,000, with a corresponding reduction in Federal match.									
121.	<u>Reduce Healthy Michigan Plan (HMP) Call Center Funding to Placeholder</u>								
	House Changes	Gross	19,536,300	19,536,300	100	11,426,400	0	(19,536,200)	(8,109,900)
	The House reduced HMP call center funding to a \$100 placeholder.	Federal	13,888,800	13,888,800	0	7,348,500	0	(13,888,800)	(6,540,300)
		GF/GP	5,647,500	5,647,500	100	4,077,900	0	(5,647,400)	(1,569,600)
Conference Changes									
The Conference Report reduced GF/GP and TANF funding.									
122.	<u>Reduce HMP Marketing Funding</u>								
	House Changes	Gross	2,000,000	2,000,000	1,000,000	1,000,000	0	(1,000,000)	(1,000,000)
	The House reduced HMP marketing funding by half.	Federal	1,000,000	1,000,000	500,000	500,000	0	(500,000)	(500,000)
		GF/GP	1,000,000	1,000,000	500,000	500,000	0	(500,000)	(500,000)
Conference Changes									
The Conference Report concurred with the House.									

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MEDICAL SERVICES ADMINISTRATION (continued)							
123.	<u>Funding for a Study to Maximize "Early On" Claims</u>						
	House Changes						
	Gross	0	0	50,000	0	0	50,000
	The House included funding to study ways to maximize	0	0	25,000	0	0	25,000
	Medicaid reimbursement for "Early On" services.	0	0	25,000	0	0	25,000
	Conference Changes						
	The Conference Report did not fund this item.						

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MEDICAL SERVICES (MEDICAID)									
124.	<u>Traditional Medicaid Base and Caseload Adjustments</u>								
	The budget included the typical Medicaid base and caseload adjustments. The largest changes were tied to Federal Medicare changes. The State pays Medicare premiums for those dually eligible for Medicare and Medicaid and those premiums were increased significantly, increasing costs by \$48.7 million Gross and \$16.9 million GF/GP. The costs of the State's "clawback" payments for Medicare Part D are projected to increase by \$58.4 million Gross and GF/GP. The budget also reflects cost increases tied to "old eligibles"; people enrolled in the Healthy Michigan Plan who previously would have been eligible for traditional Medicaid and whose costs are reimbursed at the regular Medicaid match rate.	Gross	10,290,203,000	10,510,714,200	10,510,714,200	10,510,714,200	220,511,200	220,511,200	220,511,200
		Federal	6,738,778,000	6,844,473,100	6,844,473,100	6,844,473,100	105,695,100	105,695,100	105,695,100
		Local	21,236,300	21,236,300	21,236,300	21,236,300	0	0	0
		Private	2,100,000	2,100,000	2,100,000	2,100,000	0	0	0
		Restricted	1,856,543,100	1,881,182,200	1,881,182,200	1,881,182,200	24,639,100	24,639,100	24,639,100
		GF/GP	1,671,545,600	1,761,722,600	1,761,722,600	1,761,722,600	90,177,000	90,177,000	90,177,000
125.	<u>Healthy Michigan Plan Base and Caseload Adjustments</u>								
	The budget reflected the removal of excess authorization for the Healthy Michigan Plan. Expenditures, in particular those for enhanced hospital payments, are running below the appropriated amount.	Gross	3,726,633,700	3,336,120,000	3,336,120,000	3,336,120,000	(390,513,700)	(390,513,700)	(390,513,700)
		Federal	3,586,884,900	3,211,015,500	3,211,015,500	3,211,015,500	(375,869,400)	(375,869,400)	(375,869,400)
		GF/GP	139,748,800	125,104,500	125,104,500	125,104,500	(14,644,300)	(14,644,300)	(14,644,300)

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MEDICAL SERVICES (MEDICAID) (continued)									
126. <u>Medicaid Fund Source Adjustments</u>									
a. <u>Health Insurance Claims Assessment Revenue (HICA) and Rate Reversion</u>									
The Governor's budget assumed that the managed care Use Tax, per Federal guidance, will no longer be collected after December 31, 2016. The State's HICA statute specifies that, once the managed care Use Tax is no longer eligible for Federal match, the HICA rate will revert from 0.75% back to 1.0%. The budget assumed increased HICA revenue from this January 1, 2017 rate increase and a corresponding GF/GP savings.	Gross	NA	NA	NA	NA	0	0	0	
	Restricted	NA	NA	NA	NA	58,187,300	58,187,300	39,441,300	
	GF/GP	NA	NA	NA	NA	(58,187,300)	(58,187,300)	(39,441,300)	
Conference Changes									
The Conference Report reflected the consensus estimate of a larger HICA rebate than was budgeted.									
b. <u>Adjustments to Hospital Quality Assurance Assessment Program (QAAP) Retainer</u>									
The FY 2015-16 budget included a one-time hospital QAAP retainer of \$92.9 million. The Governor's FY 2016-17 assumed a statutory change replacing that one-time retainer with a Healthy Michigan Plan retainer of \$105.0 million, which would increase net hospital QAAP revenue and offset an equal amount of GF/GP costs.	Gross	NA	NA	NA	NA	0	0	0	
	Restricted	NA	NA	NA	NA	12,143,900	12,143,900	12,143,900	
	GF/GP	NA	NA	NA	NA	(12,143,900)	(12,143,900)	(12,143,900)	
c. <u>Medicaid Benefits Trust Fund (MBTF) Revenue</u>									
The Governor's budget reflected an increase in the amount of available Medicaid Benefits Trust Fund revenue which was used to offset an equivalent amount of GF/GP in the Long Term Care Services line.	Gross	NA	NA	NA	NA	0	0	0	
	Restricted	NA	NA	NA	NA	17,500,000	17,500,000	22,500,000	
	GF/GP	NA	NA	NA	NA	(17,500,000)	(17,500,000)	(22,500,000)	
Conference Changes									
The Conference Report reflected the tobacco tax revenue consensus.									

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MEDICAL SERVICES (MEDICAID) (continued)									
126. <u>Medicaid Fund Source Adjustments (continued)</u>									
d. <u>Merit Award Trust Fund Revenue</u>									
The budget recognized a reduction in available Merit Award Trust Fund revenue used to offset GF/GP in the Long Term Care Services line resulting from a decline in Tobacco Settlement Revenue. The amount of available Merit Award Trust Fund revenue was also decreased by the creation of the Detroit Public Schools Trust Fund using Tobacco Settlement revenue.		Gross	NA	NA	NA	NA	0	0	0
		Tobacco	NA	NA	NA	NA	(23,661,900)	(23,661,900)	(74,626,800)
		GF/GP	NA	NA	NA	NA	23,661,900	23,661,900	74,626,800
Conference Changes									
The Conference Report reflected the target stipulation, which directed more Merit Award Trust Fund revenue outside of DHHS.									
e. <u>SCHIP Recoupment Match for Children Formerly on Medicaid</u>									
The Governor's budget recognized authorization via the Federal Affordable Care Act (ACA) for SCHIP funding for children previously matched at the traditional Medicaid match rate. While the ACA authorized this enhanced SCHIP rate through FY 2018-19, the enhanced funds were only reflected in the Federal budget through FY 2016-17.		Gross	NA	NA	NA	NA	0	0	0
		Federal	NA	NA	NA	NA	30,000,000	30,000,000	45,000,000
		GF/GP	NA	NA	NA	NA	(30,000,000)	(30,000,000)	(45,000,000)
Conference Changes									
The Conference Report reflected a greater savings estimate.									
f. <u>Health Plan Services Fund Source</u>									
House Changes		Gross	4,942,970,200	4,942,970,200	4,942,970,200	4,942,970,200	0	0	0
The House projected that there is excess GF/GP in the Health Plan Services line item and removed it, creating a GF/GP savings		Federal	3,295,120,900	3,295,120,900	3,310,120,900	3,295,120,900	0	15,000,000	0
		Local	14,617,500	14,617,500	14,617,500	14,617,500	0	0	0
		Restricted	1,168,471,000	1,168,471,000	1,168,471,000	1,168,471,000	0	0	0
		GF/GP	464,760,800	464,760,800	449,760,800	464,760,800	0	(15,000,000)	0
Conference Changes									
The Conference Report concurred with the Senate.									

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MEDICAL SERVICES (MEDICAID) (continued)									
127. <u>Medicaid Special Financing and Provider Tax Adjustments</u>									
a. <u>Increase in Michigan Access to Care Initiative (MACI) Payments</u>									
The budget reflected the anticipated maximum allowed expenditures for MACI, which is funded through the hospital Quality Assurance Assessment Program (QAAP).	Gross Federal Restricted GF/GP	NA NA NA NA	NA NA NA NA	NA NA NA NA	NA NA NA NA	28,300,000 14,403,500 18,449,100 (4,552,600)	28,300,000 14,403,500 18,449,100 (4,552,600)	28,300,000 14,403,500 18,449,100 (4,552,600)	
b. <u>Physician Adjustor (PA) and Specialty Network Access Fee (SNAF) Adjustments</u>									
The budget reflected maximum allowable payments under the fee for service and managed care public clinic physician payment enhancement.	Gross Federal Local Restricted GF/GP	NA NA NA NA NA	NA NA NA NA NA	NA NA NA NA NA	NA NA NA NA NA	(20,000,000) (13,030,000) (627,300) (6,342,700) 0	(20,000,000) (13,030,000) (627,300) (6,342,700) 0	(20,000,000) (13,030,000) (627,300) (6,342,700) 0	
c. <u>Adjust Healthy Michigan Plan Hospital Rate Adjustor (HRA) Payments</u>									
Due to the expiration of the one-time hospital QAAP retainer, the special Healthy Michigan Plan HRA payment was removed. If the new HMP retainer is enacted, it is expected that there will be an HRA payment increase to help offset the cost of the new retainer.	Gross Federal Restricted GF/GP	92,856,100 92,856,100 0 0	105,000,000 101,062,500 3,937,500 0	64,361,000 65,429,500 (1,068,500) 0	64,361,000 65,429,500 (1,068,500) 0	12,143,900 8,206,400 3,937,500 0	(28,495,100) (27,426,600) (1,068,500) 0	(28,495,100) (27,426,600) (1,068,500) 0	
Senate Changes									
The Senate included a \$105 million HRA payment to help offset the cost of the new retainer.									
House Changes									
The House made adjustments to reflect the estimated HMP HRA payment and Michigan Access to Care Initiative (MACI) payment.									
Conference Changes									
The Conference Report concurred with the House.									

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MEDICAL SERVICES (MEDICAID) (continued)									
127. <u>Medicaid Special Financing and Provider Tax Adjustments (continued)</u>									
d. <u>School Based Services Reduced Savings</u>									
The budget reflected the allowable school-based services reimbursements.		Gross	112,102,700	112,102,700	112,102,700	112,102,700	0	0	0
		Federal	112,102,700	110,659,000	110,659,000	110,659,000	(1,443,700)	(1,443,700)	(1,443,700)
		GF/GP	0	1,443,700	1,443,700	1,443,700	1,443,700	1,443,700	1,443,700
e. <u>State Psychiatric Disproportionate Share Hospital (DSH) Payment</u>									
House Changes		Gross	NA	NA	NA	NA	0	0	0
The House made minor technical adjustments to fund sourcing for the State Psychiatric payment.		Federal	NA	NA	NA	NA	0	(9,100)	(9,100)
		GF/GP	NA	NA	NA	NA	0	9,100	9,100
Conference Changes									
The Conference Report concurred with the House.									
f. <u>Adjustments to HMP Special Payment Fund Sourcing</u>									
House Changes		Gross	NA	NA	NA	NA	0	0	0
The House made technical adjustments to reflect actual HMP special payment fund sourcing.		Federal	NA	NA	NA	NA	0	(26,301,400)	(26,301,400)
		Local	NA	NA	NA	NA	0	633,100	633,100
		Restricted	NA	NA	NA	NA	0	25,668,300	25,668,300
Conference Changes		GF/GP	NA	NA	NA	NA	0	0	0
The Conference Report concurred with the House.									
128. <u>Traditional Medicaid Actuarial Soundness</u>									
Under the Medicaid physical health managed care waiver, the State is required to pay actuarially sound capitation rates to HMOs. The Governor's budget proposed a 1.5% increase in these rates for traditional Medicaid.		Gross	5,011,623,000	5,066,435,800	5,066,435,800	5,066,435,800	54,812,800	54,812,800	54,812,800
		Federal	3,343,249,800	3,378,960,300	3,378,960,300	3,378,960,300	35,710,500	35,710,500	35,710,500
		Local	14,617,500	14,617,500	14,617,500	14,617,500	0	0	0
		Restricted	682,894,000	682,894,000	682,894,000	682,894,000	0	0	0
		GF/GP	485,577,000	504,679,300	504,679,300	504,679,300	19,102,300	19,102,300	19,102,300

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129.	<u>Healthy Michigan Plan Actuarial Soundness</u>								
	Under the Medicaid physical health managed care waiver, the State is required to pay actuarially sound capitation rates to HMOs. The Governor's budget proposed a 2.0% increase in these rates for expansion Medicaid.	Gross	3,726,633,700	3,751,201,600	3,751,201,600	3,751,201,600	24,567,900	24,567,900	24,567,900
		Federal	3,586,884,900	3,610,531,500	3,610,531,500	3,610,531,500	23,646,600	23,646,600	23,646,600
		GF/GP	139,748,800	140,670,100	140,670,100	140,670,100	921,300	921,300	921,300
130.	<u>Expansion of Program of All-Inclusive Care for the Elderly (PACE)</u>								
	The budget increased the PACE line item by \$26,585,900, to \$92.5 million, to allow expansion to two new sites and more slots within existing sites. The increase is funded through an equivalent assumed reduction in long term care expenditures.	Gross	65,938,500	65,938,500	65,938,500	65,938,500	0	0	0
		Federal	42,958,900	42,958,900	42,663,800	42,663,800	0	(295,100)	(295,100)
		GF/GP	22,979,600	22,979,600	23,274,700	23,274,700	0	295,100	295,100
	House Changes The House corrected the fund sourcing.								
	Conference Changes The Conference Report concurred with the House.								
131.	<u>SCHIP Match Rate Impact on Poison Control Funding</u>								
	The Governor's budget reflected the impact of the SCHIP match rate reduction from 98.92% to 98.61% on the poison control payment. The cap on funding eligible for match is \$1,347,800, which is paid at the SCHIP match rate. In FY 2015-16 \$14,600 GF/GP was used to pull down the full amount of Federal match, while the remaining \$372,100 in GF/GP was used to provide a separate payment which allowed for a significant increase in funding. In the current budget, \$18,700 is needed to pull down the full amount of Federal match, reducing the separate payment by \$4,100 and resulting in a reduction in Gross funding.	Gross	1,347,800	1,343,700	1,343,700	1,343,700	(4,100)	(4,100)	(4,100)
		Federal	1,333,200	1,329,100	1,329,100	1,329,100	(4,100)	(4,100)	(4,100)
		GF/GP	14,600	14,600	14,600	14,600	0	0	0

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132.	<u>Transfer FY 2015-16 MiChild Costs to Individual Line Items and Annualize Transfer to Health Plans</u>								
	The Governor's budget annualized the carve-in of the MiChild Program into the Medicaid HMOs.	Gross	22,211,200	22,211,200	22,211,200	22,211,200	0	0	0
		Federal	21,397,200	21,397,200	21,397,200	21,397,200	0	0	0
		Restricted	650,000	650,000	650,000	650,000	0	0	0
		GF/GP	164,000	164,000	164,000	164,000	0	0	0
133.	<u>Transfer of Integrated Care Organization (ICO) Funding to Reflect Anticipated Expenditures</u>								
	The Governor's budget reflected the estimated costs of the Medicare/Medicaid dual eligible waiver. Services are provided through the ICOs and funding was adjusted among the Medicaid lines to reflect the projected level of enrollment in the ICOs.	Gross	NA	NA	NA	NA	0	0	0
		Federal	NA	NA	NA	NA	0	0	0
		GF/GP	NA	NA	NA	NA	0	0	0
134.	<u>Moratorium on Affordable Care Act (ACA) Health Insurer Fee: Impact on Actuarial Soundness Payments</u>								
	The Medicaid health maintenance organizations (HMOs) began having to pay a Federal health insurer fee in 2014. Due to actuarial soundness requirements, the State had to increase payments to the HMOs to cover the costs of the fee. Federal legislation has created a moratorium on the fee effective January 1, 2017, which would reduce actuarial soundness payments and thus reduce State expenditures.	Gross	8,738,256,700	8,601,081,300	8,601,081,300	8,601,081,300	(137,175,400)	(137,175,400)	(137,175,400)
		Federal	6,930,134,700	6,829,669,700	6,830,115,700	6,829,669,700	(100,465,000)	(100,019,000)	(100,465,000)
		Local	14,617,500	14,617,500	14,617,500	14,617,500	0	0	0
		Restricted	682,894,000	682,894,000	682,894,000	682,894,000	0	0	0
		GF/GP	625,325,800	588,615,400	588,169,400	588,615,400	(36,710,400)	(37,156,400)	(36,710,400)
House Changes									
The House corrected the fund sourcing to reflect the effective date of January 1, 2017.									
Conference Changes									
The Conference Report reflected the consensus agreement and concurred with the Governor.									

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135.	<u>Assumed December 31, 2016 Expiration of Managed Care Use Tax: Impact on Actuarial Soundness Payments</u>								
	Medicaid managed care organizations have been subject to a managed care Use Tax since 2014. Due to actuarial soundness requirements, the State had to increase payments to these managed care organizations to cover the costs of the tax. The Federal government has indicated that it will no longer support Michigan's managed care Use Tax after December 31, 2016. At that point the State will no longer have to reimburse the managed care organizations for the cost of the tax, resulting in a reduction in expenditures. The Governor's budget assumed savings of \$140.4 million GF/GP.	Gross	11,169,116,700	10,556,213,100	10,703,010,300	10,689,580,100	(612,903,600)	(466,106,400)	(479,536,600)
		Federal	8,525,294,800	8,052,836,000	8,182,464,900	8,171,300,300	(472,458,800)	(342,829,900)	(353,994,500)
		Local	39,846,400	39,846,400	39,846,400	39,846,400	0	0	0
		Restricted	703,622,500	703,622,500	703,622,500	703,622,500	0	0	0
		GF/GP	1,415,068,300	1,274,623,500	1,291,791,800	1,289,526,200	(140,444,800)	(123,276,500)	(125,542,100)
	House Changes The House corrected the savings tied to the expiration.								
	Conference Changes The Conference Report reflected the consensus agreement.								
136.	<u>One-time: Removal of Hospice Funding</u>								
	The Governor's budget removed one-time GF/GP funding for hospice room and board payments. These payments were determined to no longer be eligible for Federal match and were discontinued in FY 2013-14.	Gross	2,500,000	2,500,000	100	2,500,000	0	(2,499,900)	0
		GF/GP	2,500,000	2,500,000	100	2,500,000	0	(2,499,900)	0
	Senate Changes The Senate bill restored the funding as ongoing.								
	House Changes The House retained placeholder funding.								
	Conference Changes The Conference Report concurred with the Senate.								

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137.	<u>Complete Expansion of Healthy Kids Dental Program</u>								
	The Governor's budget included funding to complete the expansion of the Healthy Kids Dental Program to all children in Kent, Oakland, and Wayne counties.	Gross	233,674,300	259,275,300	259,275,300	259,275,300	25,601,000	25,601,000	25,601,000
		Federal	152,685,100	169,364,200	169,364,200	169,364,200	16,679,100	16,679,100	16,679,100
		GF/GP	80,989,200	89,911,100	89,911,100	89,911,100	8,921,900	8,921,900	8,921,900
138.	<u>Impact of Ambulance Quality Assurance Assessment Program (QAAP) on Other Lines</u>								
	The Governor's budget annualized the roll-out of the Ambulance QAAP. Additionally, the budget corrected the oversight that only provided authorization adjustments in the fee-for-service traditional Medicaid program, to reflect estimated expenditures in the managed care traditional Medicaid program and the Healthy Michigan Plan.	Gross	NA	NA	NA	NA	48,115,500	35,507,000	35,507,000
		Federal	NA	NA	NA	NA	36,206,200	26,718,800	26,718,800
		Restricted	NA	NA	NA	NA	15,810,200	11,667,200	11,667,200
		GF/GP	NA	NA	NA	NA	(3,900,900)	(2,879,000)	(2,879,000)
	Senate Changes								
	The Senate corrected the fund sourcing of the annualization of the ambulance QAAP.								
	House Changes								
	The House also corrected the fund sourcing, at a slightly different amount.								
	Conference Changes								
	The Conference Report concurred with the House.								

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139.	<u>Full Year Cost of Hepatitis C Harvoni Drug Medicaid Coverage</u>								
	The Governor's budget reflected full-year costs stemming from the implementation of new treatments for Hepatitis C. Treatment was covered beginning April 1, 2016 through Legislative Transfer 2016-1.	Gross	0	327,805,200	245,853,900	238,223,500	327,805,200	245,853,900	238,223,500
		Federal	0	236,323,000	177,242,200	171,741,300	236,323,000	177,242,200	171,741,300
		GF/GP	0	91,482,200	68,611,700	66,482,200	91,482,200	68,611,700	66,482,200
House Changes									
The House assumed a caseload of 5,250 instead of the 7,000 assumed in the Governor's Recommendation, resulting in a reduction to the Governor.									
Conference Changes									
The Conference Report reflected a target stipulation and reduced estimated costs by \$25 million GF/GP.									
140.	<u>Full Year Cost of Cystic Fibrosis Orkambi Medicaid Drug Coverage</u>								
	The Governor's budget reflected full-year costs stemming from the implementation of new treatments for Cystic Fibrosis. Treatment was covered beginning April 1, 2016 through Legislative Transfer 2016-1.	Gross	0	18,783,600	18,783,600	18,783,600	18,783,600	18,783,600	18,783,600
		Federal	0	13,445,000	13,445,000	13,445,000	13,445,000	13,445,000	13,445,000
		GF/GP	0	5,338,600	5,338,600	5,338,600	5,338,600	5,338,600	5,338,600

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141.	<u>One-time Funding: Create Medicaid Pharmacy Reserve</u>								
	The Governor's budget included funding to establish the Pharmacy Reserve Fund. As effective, but costly, medications known as "biologics" continue to enter the market, the fund is intended to alleviate the potential impact of drugs deemed medically necessary, or required to be covered by State or Federal law.	Gross	0	57,388,800	43,041,600	0	57,388,800	43,041,600	0
		Federal	0	37,388,800	28,041,600	0	37,388,800	28,041,600	0
		GF/GP	0	20,000,000	15,000,000	0	20,000,000	15,000,000	0
Senate Changes									
The Senate reduced funding for the Pharmacy Reserve Reserve Fund.									
House Changes									
The House also reduced funding.									
Conference Changes									
The Conference Report reflected the target stipulation and did not fund this program.									
142.	<u>U-D Dental Clinic Funding</u>								
	Senate Changes	Gross	1,000,000	100	4,300,000	2,000,000	(999,900)	3,300,000	1,000,000
	The Senate reduced funding for the U-D Dental Clinic to a placeholder.	GF/GP	1,000,000	100	4,300,000	2,000,000	(999,900)	3,300,000	1,000,000
House Changes									
The House added \$1,150,000 ongoing and \$2,150,000 in one-time funding for the program.									
Conference Changes									
The Conference Report increased ongoing funding by \$1 million.									

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143.	<u>Other Dental Clinic Funding</u>									
	Senate Changes	Gross	0	100	0	1,550,000	100	0	1,550,000	
	The Senate bill included placeholder funding to support services provided by rural dental clinics.		GF/GP	0	100	0	1,550,000	100	0	1,550,000
	Conference Changes	The Conference Report included funding and placed the funding in the public health dentistry line.								
144.	<u>Medicaid Adult Dental Services Enhancement</u>									
	Senate Changes	Gross	233,674,300	256,712,100	233,674,300	233,674,300	23,037,800	0	0	
	The Senate included funding to enhance Medicaid adult dental services effective July 1, 2017. This enhancement would be based on the managed care model included by the Administration in the Governor's proposed FY 2015-16 budget.		Federal	152,685,100	167,694,200	152,685,100	152,685,100	15,009,100	0	0
		GF/GP	80,989,200	89,017,900	80,989,200	80,989,200	8,028,700	0	0	
	Conference Changes	The Conference Report did not fund this item.								
145.	<u>Direct Primary Care Pilot</u>									
	Senate Changes	Gross	0	2,266,000	0	0	2,266,000	0	0	
	The Senate included funding for the first year of a proposed three year pilot program to examine the impact of enrolling Medicaid recipients in a direct primary care model.		Federal	0	1,436,000	0	0	1,436,000	0	0
		GF/GP	0	830,000	0	0	830,000	0	0	
	Conference Changes	The Conference Report did not fund this item.								

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146.	<u>Adult Home Help Fraud Detection</u>								
	Senate Changes								
	The Senate included funding to support an Adult Home Help fraud detection pilot.	Gross	0	500,000	25,000	25,000	500,000	25,000	25,000
		Federal	0	250,000	0	0	250,000	0	0
		GF/GP	0	250,000	25,000	25,000	250,000	25,000	25,000
	House Changes	The House included one-time funding to study potential ways to enhance fraud detection.							
	Conference Changes	The Conference Report concurred with the House and funded this as a one-time item.							
147.	<u>Increase Medicaid Private Duty Nursing Reimbursement Rates</u>								
	Senate Changes								
	The Senate included a 20% increase in Medicaid private duty nursing reimbursement. These services are in-home skilled nursing care services provided to individuals with complex medical needs.	Gross	32,998,500	39,598,200	36,298,400	37,948,400	6,599,700	3,299,900	4,949,900
		Federal	21,498,500	25,798,200	23,648,400	24,723,400	4,299,700	2,149,900	3,224,900
		GF/GP	11,500,000	13,800,000	12,650,000	13,225,000	2,300,000	1,150,000	1,725,000
	House Changes	The House increased rates by 10%.							
	Conference Changes	The Conference Report increased rates by 15%.							
148.	<u>6% Increase in Medicaid Primary Care Reimbursement Rates</u>								
	Senate Changes								
	The Senate included a 6.0% rate increase for Medicaid primary care services.	Gross	354,436,000	375,689,200	354,436,000	354,436,000	21,253,200	0	0
		Federal	231,612,000	245,493,300	231,612,000	231,612,000	13,881,300	0	0
		GF/GP	122,824,000	130,195,900	122,824,000	122,824,000	7,371,900	0	0
	Conference Changes	The Conference Report did not fund this item.							

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In this document "Conference Committee" means the proposed conference report								
MEDICAL SERVICES (MEDICAID) (continued)								
149.	<u>Placeholder for Ambulatory Surgical Center Rate Increase</u>							
	House Changes	Gross	0	0	100	0	0	100
	The House included placeholder funding for an	Federal	0	0	0	0	0	0
	increase in Medicaid reimbursement for ambulatory	GF/GP	0	0	100	0	0	100
	surgical centers.							
	Conference Changes	The Conference Report did not fund this item.						
150.	<u>Increase in Adult Foster Care Personal Care Services Rate</u>							
	House Changes	Gross	11,762,300	11,762,300	12,479,700	12,479,700	0	717,400
	The House included a \$15 per month increase in the	Federal	7,716,100	7,716,100	8,183,500	8,183,500	0	467,400
	personal care services rate paid to adult foster care	GF/GP	4,046,200	4,046,200	4,296,200	4,296,200	0	250,000
	providers.							250,000
	Conference Changes	The Conference Report concurred with the House.						
151.	<u>Fund Source Shift for Graduate Medical Education (GME)</u>							
	Conference Changes	Gross	162,888,300	162,888,300	162,888,300	162,888,300	0	0
	The Conference Report reflected projected GF/GP	Federal	106,121,700	106,121,700	106,121,700	113,921,700	0	7,800,000
	savings as about \$24.0 million of GME payments are	GF/GP	56,766,600	56,766,600	56,766,600	48,966,600	0	(7,800,000)
	paid through the Healthy Michigan Plan line item and							
	thus are reimbursed at a greater match rate. There							
	would be no change in total GME funding from this							
	adjustments.							
152.	<u>Savings from Assumed Reduction of Rates of Emergency Department Admissions</u>							
	Conference Changes	Gross	NA	NA	NA	NA	0	0
	The Conference Report included savings from an	Federal	NA	NA	NA	NA	0	0
	assumed reduction in the rate of Emergency	GF/GP	NA	NA	NA	NA	0	0
	Department utilization by managed care clients.							(37,857,100)

							CHANGE TO FY 2015-16 YEAR-TO-DATE:		
							SENATE	HOUSE	CONFERENCE
		FY 2015-16 YEAR-TO-DATE	FY 2016-17 SENATE	FY 2016-17 HOUSE	FY 2016-17 CONFERENCE				
DEPARTMENT OF HEALTH AND HUMAN SERVICES									
In this document "Conference Committee" means the proposed conference report									
MEDICAL SERVICES (MEDICAID) (continued)									
153.	<u>Expansion of Dental Coverage for Pregnant Women</u>								
	Conference Changes	Gross	NA	NA	NA	NA	0	0	2,726,000
	The Conference Report included funding to expand reimbursement and access to dental services for pregnant women enrolled in Medicaid.	Federal	NA	NA	NA	NA	0	0	1,776,000
		GF/GP	NA	NA	NA	NA	0	0	950,000

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
	GENERAL SECTIONS			
1.	Payments to Units of Local Government. Provides summary of total State spending from State resources for the Department in FY 2014-15. Provides further breakdown of State spending from State resources for the Department to local units of government in FY 2014-15.	Sec. 201	<i>Executive</i>	Sec. 8-201. Technical adjustments to reflect dollar decisions.
			<i>Senate</i>	Sec. 201. Technical adjustments to reflect dollar decisions.
			<i>House</i>	Sec. 201. Technical adjustments to reflect dollar decisions.
			<i>Conference</i>	Sec. 201. Technical adjustments to reflect dollar decisions.
2.	Management and Budget Act. (1) States that appropriations authorized under this Part and Part 1 are subject to the Management and Budget Act (P.A. 431 of 1984).	Sec. 202	<i>Executive</i>	Sec. 8-202. Changed "part and part 1" to "article"
			<i>Senate</i>	Sec. 202.
			<i>House</i>	Sec. 202.
			<i>Conference</i>	Sec. 202.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
3.	Definitions.	Sec. 203	<i>Executive</i>	Sec. 8-203. Deleted subsection (d). Inserted new subsection (t) which reads ""MiSACWIS" means Michigan Statewide Automated Child Welfare Information System". Inserted new subsection (u) which reads ""MMIS" means Medicaid Management Information System". Deleted subsection (w). Inserted new subsection (aa) which reads ""Title IV-B" means part B of title IV of the social security act, 42 USC 620 to 629M". Re-lettered remaining sections.
			<i>Senate</i>	Sec. 203. Deleted subsection (a). Deleted subsection (d). Inserted new subsection (p) which reads ""Medicaid" means subchapter XIX of the social security act, 42 USC 1396 to 1396w-5". Inserted new subsection (t) which reads ""MiSACWIS" means Michigan Statewide Automated Child Welfare Information System". Inserted new subsection (u) which reads ""MMIS" means Medicaid Management Information System". Deleted subsection (w). Inserted new subsection (z) which reads ""Title IV-B" means part B of title IV of the social security act, 42 USC 620 to 629M". Changed "title X" to "subchapter VIII" in subsection (cc). Deleted subsection (dd). Re-lettered remaining sections.
			<i>House</i>	Sec. 203. Deleted subsection (a). Modified subsection (d) to change "2016" to "2017". Added subsection (u) ""MiSACWIS" means Michigan Statewide Automated Child Welfare Information System". Modified subsection (w) to change "2015" to "2016". Added subsection (bb) ""Title IV-B" means part B of title IV of the social security act, 42 USC 620 to 629M". Modified (cc) by changing "title X" to "subchapter VIII" in subsection. Deleted "Title XIX" in (dd). Reordered and re-lettered remaining sections.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	Deleted subsection (a). Modified subsection (d) to change "2016" to "2017". Added subsection (u) ""MiSACWIS" means Michigan Statewide Automated Child Welfare Information System". Modified subsection (w) to change "2015" to "2016". Added subsection (bb) ""Title IV-B" means part B of title IV of the social security act, 42 USC 620 to 629M". Modified (cc) by changing "title X" to "subchapter VIII" in subsection. Deleted "Title XIX" in (dd). Reordered and re-lettered remaining sections.
4.	<p>Performance Metrics. Requires the Department to report a list of program-specific metrics to measure performance by November 1, 2015, for all new programs or program enhancements with appropriations greater than \$1.0 million. An update on the progress of the program and tracking program-specific metrics is required to be given at an appropriations subcommittee meeting called to discuss benchmarks and their status.</p>	Sec. 204	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 204. Language rewritten to read: "Concurrent with submission of the executive budget recommendation, the state budget office shall provide the senate and house appropriations committees, the senate and house appropriations subcommittees on the department budget, and the senate and house fiscal agencies and policy offices with a report that lists each new program or program enhancement for which the funds in excess of \$500,000.00 are appropriated in part 1. The listing of new or enhanced programs shall be ranked in the order of estimated return on taxpayer investment determined by the state budget office. The program performance shall use program-specific metrics, in addition to the metrics required under section 447 of the management and budget act, 1984 PA 431, MCL 18.1447, to measure the return on taxpayer investment. The state budget office shall use the estimated performance of the new program or program enhancement as the basis for any increase in funds appropriated in part 1 from the prior fiscal year. The department shall provide a report on its status in meeting the program specific metrics and the progress in meeting the programs estimated return on taxpayer investment by September 30 of the current fiscal year to the senate and house appropriations subcommittees the department budget, and the senate and house fiscal agencies and policy offices."
			<i>House</i>	Sec. 204. Replaced "2015" with "of the current fiscal year".

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	Not included.
5.	Define Budget as Addendum to Social Welfare Act. The Department shall treat the budget and boilerplate language as an addendum to the Social Welfare Act.	Sec. 205	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 205.
			<i>House</i>	Sec. 205.
			<i>Conference</i>	Sec. 205. Replaced "pursuant" with "according".
6.	Contingency Fund. Authorizes contingency fund appropriations. Amount in these funds not to exceed (1) \$400.0 million Federal, (2) \$45.0 million State Restricted, (3) \$40.0 million local, and (4) \$60.0 million private.	Sec. 206	<i>Executive</i>	Sec. 8-206. Changed second "part 1" to "this article" in (1).
			<i>Senate</i>	Sec. 206.
			<i>House</i>	Sec. 206.
			<i>Conference</i>	Sec. 206.
7.	Department Scorecard. Requires Department to maintain a department scorecard identifying, tracking, and updating key metrics used to monitor and improve the Department's performance.	Sec. 207	<i>Executive</i>	Sec. 8-207. Changed "department's" to "agency's".
			<i>Senate</i>	Sec. 207.
			<i>House</i>	Sec. 207.
			<i>Conference</i>	Sec. 207.
8.	Internet Reporting. Requires the Department to use the Internet to fulfill the reporting requirements of this Act unless otherwise specified. This includes transmission of reports via e-mail or placement of reports on Internet/Intranet site.	Sec. 208	<i>Executive</i>	Sec. 8-208. Language rewritten to allow for multiple avenues to fulfill the reporting requirements by using the internet. The Department may choose between emailing the report to identified recipients or place the report on an internet or intranet site.
			<i>Senate</i>	Sec. 208.
			<i>House</i>	Sec. 208.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	Sec. 208.
9.	Buy American/Michigan Intent Language. Prohibits the use of funds for purchase of foreign goods/services if competitively priced and comparable quality American goods/services are available. Indicates that preference should be given to goods/services provided by Michigan businesses if they are competitively priced and of comparable quality; and in particular, preference should be given to Michigan businesses owned and operated by veterans.	Sec. 209	<i>Executive</i>	Sec. 8-209. Replaced third "shall" with "should".
			<i>Senate</i>	Sec. 209. Replaced third "shall" with "should".
			<i>House</i>	Sec. 209.
			<i>Conference</i>	Sec. 209.
10.	Deprived and Depressed Communities. Requires the Department Director and the Director of the Aging and Adult Services Agency to take all reasonable steps to ensure that businesses in deprived and depressed communities compete for and perform contracts. The directors are further required to encourage firms who contract with the Department to subcontract with businesses in deprived and depressed communities.	Sec. 210	<i>Executive</i>	Sec. 8-210. Replaced fourth "the" with "each". Deleted both occurrences of "and the director of the aging and adult services agency".
			<i>Senate</i>	Sec. 210. Replaced fourth "the" with "each". Deleted both occurrences of "and the director of the aging and adult services agency".
			<i>House</i>	Sec. 210. Replaced fourth "the" with "each". Deleted both occurrences of "and the director of the aging and adult services agency".
			<i>Conference</i>	Sec. 210. Replaced fourth "the" with "each". Deleted both occurrences of "and the director of the aging and adult services agency".
11.	Carry Forward of Revenue. Allows excess fee and collection revenue to be carried forward into the subsequent fiscal year (subject to approval by the State Budget Director). This revenue is to be used as the first source of funding in that year.	Sec. 211	<i>Executive</i>	Sec. 8-211.
			<i>Senate</i>	Sec. 211.
			<i>House</i>	Sec. 211.
			<i>Conference</i>	Sec. 211.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
12.	Revenue Sources and Amounts; Reporting Requirement. Requires the Department to: (1) report by February 1 of the current fiscal year on name and amounts of revenue supporting each line item in this Act, (2) report the amounts and detailed sources of revenue proposed to support the next executive budget proposal.	Sec. 212	<i>Executive</i>	Sec. 8-212. Inserted "estimated" before "federal" in (1).
			<i>Senate</i>	Sec. 212. Inserted "estimated" before "federal" in (1).
			<i>House</i>	Sec. 212. Inserted "estimated" before "federal" in (1).
			<i>Conference</i>	Sec. 212. Inserted "estimated" before "federal" in (1).
13.	Requirements for Receipt of Tobacco Tax (Healthy Michigan) Funds. Requires report by April 1 of the current fiscal year from agencies receiving tobacco tax funds and Healthy Michigan fund revenue in Part 1 regarding: (a) planned spending and a summary of organizations receiving funds, (b) allocation/bid processes, (c) eligibility criteria, (d) outcome and effectiveness measures, and (e) other necessary information.	Sec. 213	<i>Executive</i>	Sec. 8-213.
			<i>Senate</i>	Sec. 213.
			<i>House</i>	Sec. 213.
			<i>Conference</i>	Sec. 213.
14.	Salary and Wage/FTE Report. Bimonthly, Department shall report on the number of FTEs in pay status by type of staff.	Sec. 214	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 214.
			<i>House</i>	Sec. 214. Replaced quarterly with "By March 1 and August 1 of the current fiscal year".
			<i>Conference</i>	Sec. 214. Replaced quarterly with "By March 1 and August 1 of the current fiscal year".
15.	Federal Statute Conflict. If a legislative objective of this Act or of a bill or amendment to a bill to amend the Social Welfare cannot be implemented due to conflict with Federal regulations, the Department shall notify the State Budget Director, the House and Senate Appropriations Committees, and the House and Senate Fiscal Agencies and Policy Offices of that fact.	Sec. 215	<i>Executive</i>	Sec. 8-215.
			<i>Senate</i>	Sec. 215.
			<i>House</i>	Sec. 215.
			<i>Conference</i>	Sec. 215.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
16.	Write-offs of Accounts Receivable, Deferrals, and Prior Year Obligations. (1) Allows the use of prior year revenue for the write-off of accounts receivable, deferrals, and prior year obligations. (2) Permits the Department to use prior year reimbursements, refunds, and settlements to support spending.	Sec. 216	<i>Executive</i>	Sec. 8-216.
			<i>Senate</i>	Sec. 216.
			<i>House</i>	Sec. 216.
			<i>Conference</i>	Sec. 216.
17.	Restrictions on Travel. (1) Requires report on out of State travel no later than January 1, listing all travel by employees outside the State funded with appropriated funds, submitted to the fiscal agencies and the State Budget Director. Report shall include: (a) dates of travel, and (b) transportation costs including portion funded by GF/GP, State Restricted, Federal, and other revenues.	Sec. 217	<i>Executive</i>	Sec. 8-217
			<i>Senate</i>	Sec. 217.
			<i>House</i>	Sec. 217.
			<i>Conference</i>	Sec. 217.
18.	Basic Health Services. Lists basic health services required by the public health code: immunizations, communicable and sexually transmitted disease control, tuberculosis control, prevention of gonorrhea eye infection in newborns, screening newborns for the 8 conditions listed in the Public Health Code, community health annex of the emergency management plan, and prenatal care.	Sec. 218	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 218. Modified by adding "but not be limited to" after the first clause.
			<i>Conference</i>	Sec. 218. Modified by adding "but not be limited to" after the first clause.
19.	Contracting with Michigan Public Health Institute (MPHI). (1) Allows the Department to contract with the MPHI for up to 3 years without employing the bid process; annual report due January 1 providing detailed information on each project is required. (2) Requires the Department to annually submit to the Legislature all reports, studies, and publications produced by the Institute, its subcontractors, and the Department, with funds appropriated to the Institute.	Sec. 219	<i>Executive</i>	Sec. 8-219.
			<i>Senate</i>	Sec. 219.
			<i>House</i>	Sec. 219.
			<i>Conference</i>	Sec. 219.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
20.	Faith-based Organizations. Establishes non-discrimination guidelines to ensure that qualified, faith-based organizations are able to apply and compete for services, programs, or contracts.	Sec. 220	<i>Executive</i>	Sec. 8-220.
			<i>Senate</i>	Sec. 220.
			<i>House</i>	Sec. 220.
			<i>Conference</i>	Sec. 220.
21.	Policy Notifications. Department will list the changes to policies annually and will ensure that the policy and procedure manuals are publically accessible.	Sec. 222	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 222.
			<i>House</i>	Sec. 222. Deleted subsection (1). Adds "policy offices" to the list of report recipients in subsection (3).
			<i>Conference</i>	Sec. 222. Deleted subsection (1). Adds "policy offices" to the list of report recipients in subsection (3).
22.	DHHS May Establish and Collect Fees. Allows the Department to charge fees to offset the cost of publications, videos, conferences, and workshops. Prohibits the Department from collecting fees that exceed the cost of expenditures.	Sec. 223	<i>Executive</i>	Sec. 8-223.
			<i>Senate</i>	Sec. 223.
			<i>House</i>	Sec. 223.
			<i>Conference</i>	Sec. 223.
23.	Food Assistance Program (FAP) Retainer. The Department may retain all of the State's share of food assistance overissuance collections as an offset to general fund/general purpose costs.	Sec. 224	<i>Executive</i>	Sec. 8-224. Replaced "executive operations" with "departmentwide administration".
			<i>Senate</i>	Sec. 224. Replaced "executive operations" with "departmentwide administration".
			<i>House</i>	Sec. 224. Replaced "executive operations" with "departmentwide administration".

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	Sec. 224. Replaced "executive operations" with "departmentwide administration".
24.	Preferential Treatment Prohibition. Cannot have more strident penalties against private agencies than public entities and prohibits preferential treatment for agencies with collective bargaining agreements.	Sec. 225	<i>Executive</i>	Sec. 8-225.
			<i>Senate</i>	Sec. 225.
			<i>House</i>	Sec. 225.
			<i>Conference</i>	Sec. 225.
25.	HMP Advertising. Allocates \$1.0 million to the Medicaid health plans to inform residents about Healthy Michigan plan incentives shown to improve health outcomes. Prohibits the Department from using funds to advertise enrollment in the Healthy Michigan Plan.	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 228.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 228.
26.	Michigan Works! and TANF Report. Report from workgroup	Sec. 229	<i>Executive</i>	Not included.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
	to determine the proper amount of TANF funding needed for Michigan Works! Population.		<i>Senate</i>	Sec. 229. Language rewritten to read: "(1) The department shall extend the interagency agreement with the talent investment agency for the duration of the current fiscal year, which concerns TANF funding to provide job readiness and welfare-to-work programming. The interagency agreement shall include specific outcome and performance reporting requirements as described in this section. TANF funding provided to the talent investment agency in the current fiscal year is contingent on compliance with the data and reporting requirements described in this section. The interagency agreement must require the talent investment agency to provide all of the following items by January 1 of the current fiscal year for the previous year to the senate and house appropriations committees on the department budget: (a) An itemized spending report on TANF funding, including all of the following: (i) Direct services to recipients. (ii) Administrative expenditures. (b) The number of family independence program (FIP) recipients served through the TANF funding, including all of the following: (i) The number and percentage who obtained employment through Michigan Works! (ii) The number and percentage who fulfilled their TANF work requirement through other job readiness programming. (iii) Average TANF spending per recipient. (iv) The number and percentage of recipients who were referred to Michigan Works! but did not receive a job or job readiness placement and the reasons why. (2) Not later than March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices an annual report on the following matters itemized by MichiganWorks! Agency: the number of referrals to MichiganWorks! Job readiness programs, the number of referrals to MichiganWorks! job readiness programs who became a participant in the MichiganWorks! job readiness
			<i>House</i>	Not included.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	<p>Sec. 229. Language rewritten to read: "(1) The department shall extend the interagency agreement with the talent investment agency for the duration of the current fiscal year, which concerns TANF funding to provide job readiness and welfare-to-work programming. The interagency agreement shall include specific outcome and performance reporting requirements as described in this section. TANF funding provided to the talent investment agency in the current fiscal year is contingent on compliance with the data and reporting requirements described in this section. The interagency agreement must require the talent investment agency to provide all of the following items by January 1 of the current fiscal year for the previous year to the senate and house appropriations committees on the department budget: (a) An itemized spending report on TANF funding, including all of the following: (i) Direct services to recipients. (ii) Administrative expenditures. (b) The number of family independence program (FIP) recipients served through the TANF funding, including all of the following: (i) The number and percentage who obtained employment through Michigan Works! (ii) The number and percentage who fulfilled their TANF work requirement through other job readiness programming. (iii) Average TANF spending per recipient. (iv) The number and percentage of recipients who were referred to Michigan Works! but did not receive a job or job readiness placement and the reasons why. (2) Not later than March 1 of the current fiscal year, the department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the senate and house policy offices an annual report on the following matters itemized by MichiganWorks! Agency: the number of referrals to MichiganWorks! Job readiness programs, the number of referrals to MichiganWorks! job readiness programs who became a participant in the MichiganWorks! job readiness programs, the number of participants who obtained employment, and the cost per participant case."</p>

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
27.	IT Project Expansions. Requires the Department to issue and submit to the Legislature an implementation plan for any expansion of information technology projects before spending any funds. Also includes a list of eight requirements for items that must be included in the implementation plan.	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 230.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 230. Language rewritten to read: (1) By December 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office all of the following information: (a) The process used to define requests for proposals for each expansion of information technology projects, including timelines, project milestones, and intended outcomes, (b) If the department decides not to contract the services out to design and implement each element of the information technology expansion, the department shall submit its own project plan, which includes, at a minimum, the requirements in subdivision (a), (c) A recommended project management plan with milestones and time frames, and (d) The proposed benefits from implementing the information technology expansion, including customer service improvement, form reductions, potential time savings, caseload reduction, and return on investment. (2) Once an award for an expansion of information technology is made, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office a projected cost of the expansion broken down by use and type of expense.
28.	Travel Cost Reimbursement to Counties. Department shall allocate up to \$100,000.00 towards reimbursing counties for their out-of-pocket travel costs.	Sec. 231	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 231.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	Sec. 231.
29.	<p>Report on DCH/DHS Merger. Requires a report on a quarterly basis on the status of the merger of DCH and DHS. Report must include: (a) impact on client service delivery or access, (b) cost changes resulting from rent or building occupancy changes, (c) facilities in use, (d) current status of FTE positions, including the number of FTEs that were eliminated or added, and (e) any other efficiencies, costs, or savings.</p>	Sec. 233	<i>Executive</i>	Sec. 8-233. Deleted "each fiscal quarter of". Deleted third "and". Inserted ",and the state budget office" after "policy offices".
			<i>Senate</i>	Sec. 233. Deleted third "and". Inserted ",and the state budget office" after "policy offices".
			<i>House</i>	Sec. 233. Deleted "each fiscal quarter of" and added "March 31 and September 30". Deleted third "and". Inserted ",and the state budget office" after "policy offices".
			<i>Conference</i>	Sec. 233. Deleted "each fiscal quarter of" and added "March 31 and September 30". Deleted third "and". Inserted ",and the state budget office" after "policy offices".
30.	<p>MSF Interagency TANF Agreement. The Department shall include specific outcome and performance reporting requirements in the interagency agreement with the Michigan Strategic Fund for TANF funding.</p>	Sec. 234	<i>Executive</i>	Sec. 8-234. Changed all occurrences of "Michigan strategic fund" to "Michigan talent investment agency". Inserted "and the state budget office" after "appropriations committees".
			<i>Senate</i>	Moved to Sec. 229 with revisions.
			<i>House</i>	Sec. 234. Replaced "Michigan Strategic Fund" with "Michigan Talent Investment Agency" in three instances. Added the "fiscal" in between previous and year. Added "the state budget office" as a report recipient.
			<i>Conference</i>	Sec. 234. Replaced "Michigan Strategic Fund" with "Michigan Talent Investment Agency" in three instances. Added the "fiscal" in between previous and year. Added "the state budget office" as a report recipient.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
31.	Notification of Contract Changes. Department shall notify the Legislature of any changes to a child welfare master contract not less than 30 days before the change takes effect.	Sec. 240	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 240.
			<i>House</i>	Sec. 240.
			<i>Conference</i>	Sec. 240.
32.	Healthy Michigan Plan. Should the provisions of the Social Welfare Act contained in 2013 PA 107 be amended, repealed, or otherwise altered to eliminate the Healthy Michigan Plan the remaining funds in the line would only be able to be used to pay bills accrued up until the effective date of amend, repeal, or alteration.	Sec. 252	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 252.
			<i>House</i>	Sec. 252.
			<i>Conference</i>	Sec. 252.
33.	DHHS to Notify Legislature Upon Waiver Submission. (1) Requires the Department to notify the Legislature upon submission of a Medicaid waiver, State plan amendment, or	Sec. 263	<i>Executive</i>	Sec. 8-263. Deleted subsection (3).
			<i>Senate</i>	Sec. 263. Deleted subsection (3).

DEPARTMENT OF HEALTH AND HUMAN SERVICES

	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
	<p>similar proposal to CMS. (2) Requires the Department to present biannual reports on any new or ongoing discussions with CMS or HHS regarding potential waiver applications. (3) Directs Department to inform the subcommittees and fiscal agencies of any alterations or adjustments made to the dual Medicare/Medicaid eligible waiver when the final version of the plan is submitted to the Federal government.</p>		<i>House</i>	<p>Sec. 263. Rewritten to read: (1) Before submission of a waiver, a state plan amendment, or a similar proposal to the Centers for Medicare and Medicaid Services or other federal' agency, the department shall provide written notification to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies and policy offices, and the state budget office of the planned submission. (2) The department shall provide written biannual reports to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office summarizing the status of any new or ongoing discussions with the Centers for Medicare and Medicaid Services or the United States Department of Health and Human Services or other federal agency regarding potential or future waiver applications, as well as the status of submitted waivers that have not yet received federal approval. If, at the time a biannual report is due, there are no reportable items, then no report is required to be provided"</p>

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	Sec. 263. Changed "Upon" to "Except as otherwise provided in this subsection, before" in subsection (1). Deleted first and second occurrences of "Medicaid" in subsection (1). Inserted "or other federal agency" after "Services" in subsection (1). Replaced "notify" with "provide written notification of the planned submission to" in subsection (1). Inserted "and policy offices" after "agencies" in subsection (1). Changed "Of the submission" to ".This subsection does not apply to the submission of a waiver, a state plan amendment, or a similar proposal that does not propose a material change or is outside of the ordinary course of waiver, state plan amendment, or similar proposal submissions" in subsection (1). Deleted "or verbal" in subsection (2). Inserted "or other federal agency" after "Services" in subsection (2). Deleted second occurrence of "Medicaid" in subsection (2). Inserted "as well as the status of submitted waivers that have not yet received federal approval. If, at the time a biannual report is due, there are no reportable items, then no report is required to be provided" after "applications" in subsection (2).
34.	Communication with Department Staff. Prohibits the Department from punishing an employee for communicating with a member of the Legislature or their staff.	Sec. 264	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 264.
			<i>House</i>	Sec. 264.
			<i>Conference</i>	Sec. 264.
35.	Estimated Fund Balances. Requires report within 14 days of the release of the budget on Restricted Fund balances, revenues, and expenditures for previous and current fiscal years.	Sec. 265	<i>Executive</i>	Sec. 8-265. Replaced "2015" with "2016" and "2016" with "2017".
			<i>Senate</i>	Sec. 265. Replaced "2015" with "2016" and "2016" with "2017".

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>House</i>	Sec. 265. Inserted "on the department budget" after "chairs". Changed "fiscal years ending September 30, 2015 and September 30, 2016" with "previous fiscal year and the current fiscal year".
			<i>Conference</i>	Sec. 265. Inserted "on the department budget" after second "chairs". Changed "fiscal years ending September 30, 2015 and September 30, 2016" with "previous fiscal year and the current fiscal year".
36.	Program Waiver Restrictions. Requesting or receiving Federal approval for a program waiver does not convey authority for the Department to execute the waiver. The Department must present to and receive approval from the Legislature.	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 266.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
37.	Attorney General Medicaid Recoveries. Language requires the Department to notify the Legislature and the State Budget Office of any recovery of Medicaid funds through legal action. By November 1 and May 1 a report is required, which must include details about (a) the total amount of the recovery, (b) the program or service through which the funds were originally paid, (c) the disposition of the recovered funds, and (d) the facts related to the legal action.	Sec. 270	<i>Executive</i>	Sec. 8-270.
			<i>Senate</i>	Sec. 270.
			<i>House</i>	Sec. 270.
			<i>Conference</i>	Sec. 270.
38.	Capped Federal Funds. Requires the Department, during annual budget development presentation, to report on spending and revenue projections for capped Federal funds, including TANF, Title XX, and Title IV-B.	Sec. 274	<i>Executive</i>	Sec. 8-274. Removed subsection (2) and deleted remaining numbering.
			<i>Senate</i>	Sec. 274. Changed "2016" to "2017" in subsection (1).

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Boilerplate Summary				
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>House</i>	Sec. 274. Added new subsection (1) reading "The department, in collaboration with the state budget office, shall not utilize capped federal funding for economics adjustments for FTEs or other economics costs that are included as part of the budget submitted to the legislature by the governor for the ensuing fiscal year." Removed subsection (2). Renumbered remaining sections.
			<i>Conference</i>	Sec. 274. Changed "2016" to "2017" in subsection (1). Added new subsection (2) reading "The department, in collaboration with the state budget office, shall not utilize capped federal funding for economics adjustments for FTEs or other economics costs that are included as part of the budget submitted to the legislature by the governor for the ensuing fiscal year." Renumbered remaining sections.
39.	Capped Federal Funds Realignment. As part of the year-end closing of the books, department with approval of budget director may realign capped federal funds to maximize federal revenues.	NEW CONF. SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 275.
40.	Legal Services. Forbids use of appropriated funds by the Department to provide legal services that are the responsibility of the State Attorney General.	Sec. 276	<i>Executive</i>	Sec. 8-276.
			<i>Senate</i>	Sec. 276.
			<i>House</i>	Sec. 276.
			<i>Conference</i>	Sec. 276.
41.	Performance Based Contracts. Master contracts shall be performance-based in nature and employ measurable performance indicators. The Department shall report on the	Sec. 279	<i>Executive</i>	Sec. 8-279.
			<i>Senate</i>	Sec. 279.

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
	contracts to the Legislature.		<i>House</i>	Sec. 279.
			<i>Conference</i>	Sec. 279.
42.	Payroll Taxes and Fringe Benefits. Department will provide monthly reports to the Legislature on the status of personnel costs and projected shortfalls.	Sec. 280	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 280.
			<i>House</i>	Sec. 280. Reporting changed to a quarterly report.
			<i>Conference</i>	Sec. 280. Reporting changed to a quarterly report.
43.	General Fund Lapses. Language directs the State Budget Office, by November 30, to prepare and transmit a report that provides for estimates of the total General Fund/General Purpose appropriation lapses at the close of the previous fiscal year. This report shall summarize the projected year-end General Fund/General Purpose appropriations lapses by major departmental program or program areas.	Sec. 287	<i>Executive</i>	Sec. 8-287.
			<i>Senate</i>	Sec. 287.
			<i>House</i>	Sec. 287.
			<i>Conference</i>	Sec. 287.
44.	Limits Administrative Component of New Contracts. (1) Requires that by October 1, 2014, a minimum of 90% of new contracts financed through State Restricted funds or General Funds to provide for specific services for individuals must be spent on those services. (2) Allows a contract to exceed the administrative and services cost limitation if it can be demonstrated that an exception should be made. (3) The Department is required to submit a report by September 30 th of the current fiscal year the rationale for all exceptions made as well as the number of contracts terminated due to violations of the cost limitations.	Sec. 288	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 288.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 288.
45.	Fraud Hotline Advertising. Any public advertisement for State assistance shall also inform the public of the welfare fraud hotline operated by the Department.	Sec. 290	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 290.

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>House</i>	Sec. 290. Modified to read "Any public advertisement for state food assistance"
			<i>Conference</i>	
46.	E-Verify System. The Department shall verify, using the e-verify system, that all persons paid from funds appropriated in Part 1, are legally present in the United States. The Department shall report to the Legislature about the e-verify process.	Sec. 291	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 291.
			<i>House</i>	Sec. 291. Removed subsection (2). Deleted remaining numbering.
			<i>Conference</i>	Sec. 290.
47.	Report on Expenditures. (1) Requires Department to cooperate with the Department of Technology, Management, and Budget to create and maintain a free searchable website including fiscal year-to-date expenditures by category, appropriation unit, and vendor. Also would include employees by job classification, job specifications, and wage rates.	Sec. 292	<i>Executive</i>	Sec. 8-292.
			<i>Senate</i>	Sec. 292.
			<i>House</i>	Sec. 292.
			<i>Conference</i>	Sec. 292.
48.	Medicaid Interactive Analytics Platform Pilot. (1) Requires the Department to implement a cloud-based, interactive analytics platform pilot for Medicaid claims. Includes requirements for the platform. (2) The pilot must include a methodology to measure savings generated by the pilot, and the amount appropriated for the pilot cannot exceed the anticipated savings. (3) Designates unexpended funds as a work project.	NEW HOUSE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 293.
			<i>Conference</i>	Sec. 293. Replaced "From the funds appropriated in part 1 for Michigan Medicaid information system, \$100.00 shall be allocated for a pilot" with "The department shall explore a" in subsection (1). Replaced all occurrences of "shall" with "would" in subsection (1). Deleted all occurrences of "pilot" in subsection (2). Changed all occurrences of "shall" to "would" in subsection (2). Inserted "legislative intent is that an" after third "the" in subsection (2).

DEPARTMENT OF HEALTH AND HUMAN SERVICES

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
49.	<p>Michigan/Illinois Medicaid Alliance. Allocates \$20.0 million from the Michigan Medicaid Information System (MMIS) line item to support the Michigan/Illinois Alliance, as Illinois will be paying the State of Michigan to use the MMIS with its Medicaid program.</p>	Sec. 294	<i>Executive</i>	Sec. 8-294. Replaced "will be allocated for the Michigan-Illinois alliance Medicaid management information systems project" with "may be received from and allocated for other states interested in participating as part of the broader Michigan Medicaid MMIS initiative".
<i>Senate</i>			Sec. 294. Replaced "will be allocated for the Michigan-Illinois alliance Medicaid management information systems project" with "may be received from and allocated for other states interested in participating as part of the broader Michigan Medicaid MMIS initiative".	
<i>House</i>			Sec. 294. Inserted "(MMIS)" after first "system". Replaced "will be allocated for the Michigan-Illinois alliance Medicaid management information systems project" with "may be received from and allocated for other states interested in participating as part of the broader MMIS initiative. By March 1 of the current fiscal year, the department shall provide a report on the use of MMIS by other states for the previous fiscal year, including a list of states, type of use, and revenue and expenditures related to the agreements with the other states to use the MMIS. The report shall be provided to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies and the state budget office."	

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	Sec. 294. Inserted "(MMIS)" after first "system". Replaced "will be allocated for the Michigan-Illinois alliance Medicaid management information systems project" with "may be received from and allocated for other states interested in participating as part of the broader MMIS initiative. By March 1 of the current fiscal year, the department shall provide a report on the use of MMIS by other states for the previous fiscal year, including a list of states, type of use, and revenue and expenditures related to the agreements with the other states to use the MMIS. The report shall be provided to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies and the state budget office."
50.	<p>Multicultural Contracts. (1) Requires the Department to competitively award grants consistent with the requirements in subsection (2). States that the State shall not be liable for any spending above the contract amount. (2) Requires the Department to require each contractor who receives more than \$1.0 million to provide information on performance related metrics that may include, but are not limited to: each contractor or subcontractor shall (a) have accreditations that attest to their competency and effectiveness as behavioral health and social service agencies, (b) have a mission consistent with the purpose of multicultural integration funding, (c) validate that all subcontractors share the mission of the agency being funded, (d) shall demonstrate cost effectiveness, (e) ensure their ability to utilize private dollars to enhance services, (f) provide reports on number of clients served, units of services provided and ability to meet goals. (3) Directs that the Department require a report from contractors receiving funding 60 days after the end of the contract period including specific information as listed in the boilerplate.</p>	<p>NEW EXEC. SECTION</p>	<i>Executive</i>	Sec. 8-295.
			<i>Senate</i>	Sec. 295. Replaced "shall not be" with "is not" in subsection (1). Changed "\$1.0 million" to "\$1,000,000.00" in subsection (2).
			<i>House</i>	Sec. 295.
			<i>Conference</i>	Sec. 295. Replaced "shall not be" with "is not" in subsection (1). Changed "\$1.0 million" to "\$1,000,000.00" in subsection (2).

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
51.	<p>SENATE-Medicaid Behavioral Health Report. Requires a report by February 1 detailing a proposal to enhance services and reform payment process. The report must include, but is not limited to, all of the following: (a) increase access to high value services and choice of provider, (b) increase access to integrated behavioral and physical health services, (c) increase utilization of high-value services while decreasing utilization of low-value services, (d) integrate behavioral and physical health patient population risk stratification, and (e) align behavioral and physical health care providers' clinical and claims data sharing.</p> <p>HOUSE- Medicaid Behavioral Health Workgroup. (1) Requires the Department to work with a workgroup to recommend the most effective financing model and policies for behavioral and physical health coordination. Includes workgroup participants. (2) Workgroup goals must include: (a) core principles of person-centered planning, (b) avoiding the return to a medical and institutional model, and (c) coordination of physical and behavioral health services at the point of service. (3) Workgroup recommendations must include a plan for transition to any new financing model or recommended policies, including a plan to ensure continuity of care, and consideration of 1 or more pilot programs. (4) Requires a status update after each workgroup meeting and a final report by December 1. (5) Prohibits the transfer of responsibility for behavioral health services from the PIHPs to any other entity without legislative authorization.</p>	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 296.
			<i>House</i>	Sec. 298.
			<i>Conference</i>	Sec. 298. Language rewritten: (1) Requires the Department to work with a workgroup to recommend the most effective financing model and policies for behavioral and physical health coordination. Includes workgroup participants. (2) Workgroup goals must include: (a) core principles of person-centered planning, (b) avoiding the return to a medical and institutional model, and (c) coordination of physical and behavioral health services at the point of service, (d) ensure full access to community-based services and supports, (e) ensure full access o integrated behavioral and physical health services, (f) reinvest efficiencies gained back into services, and (g) ensure transparency. (3) Workgroup recommendations must include a plan for transition to any new financing model or recommended policies, including a plan to ensure continuity of care, and consideration of 1 or more pilot programs. (4) Requires the workgroup to recommend annual benchmarks to measure progress in implementation of any new financing model or policy recommendations over a 3 year-period. (5) Requires a status update after each workgroup meeting and a final report by January 15. (6) Prohibits the transfer of responsibility for behavioral health services from the PIHPs to any other entity without legislative authorization, except for pilot programs as described in (3).

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Boilerplate Summary				
		FY 2015-16 PA 84		FY 2016-17 Changes
52.	Legacy Costs. Specifies legacy costs in FY 2015-16, including \$203,794,100 for pension-related costs and \$155,250,000 for retiree health care costs.	Sec. 297	<i>Executive</i>	Sec. 8-297. Replaced "2016" with "2017", replaced "359,044,100.00" with "364,972,800.00", "203,764,100.00" is replaced with "202,368,400.00", and replaced "155,250,000.00" with "162,604,400.00".
			<i>Senate</i>	Sec. 297. Replaced "2016" with "2017", replaced "359,044,100.00" with "364,972,800.00", "203,764,100.00" is replaced with "202,368,400.00", and replaced "155,250,000.00" with "162,604,400.00".
			<i>House</i>	Sec. 297. Replaced "fiscal year ending September 30, 2016" with "current fiscal year", replaced "359,044,100.00" with "364,972,800.00", "203,764,100.00" is replaced with "202,368,400.00", and replaced "155,250,000.00" with "162,604,400.00".
			<i>Conference</i>	Sec. 297. Replaced "fiscal year ending September 30, 2016" with "current fiscal year", replaced "359,044,100.00" with "364,972,800.00", "203,764,100.00" is replaced with "202,368,400.00", and replaced "155,250,000.00" with "162,604,400.00".
53.	Supervisor-to-Staff Ratios. The Department shall notify the Legislature as to the supervisor-to-staff ratio by Department divisions and subdivisions.	Sec. 298	<i>Executive</i>	Not included.
			<i>Senate</i>	Moved to Sec. 293.
			<i>House</i>	Moved to Sec. 296.
			<i>Conference</i>	Moved to Sec. 289.
54.	Behavioral Health Integration to Managed Care. (1) Requires the Department to transfer responsibility for Medicaid and HMP Behavioral Health Services from the PIHPs to Medicaid HMOs by September 30, 2017. In order to implement this change the Department must (a) amend the	NEW EXEC. SECTION	<i>Executive</i>	Sec. 8-298.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
	<p>HMO contracts to include responsibility for coverage of the mental health services referenced in the boilerplate upon completion of a plan to integrate those services, and (b) engage external stakeholders in the development of the integration plan, and (c) contract with an administrative service to oversee the CMHSPs and health plans to ensure continuity of care. States the minimum responsibilities of the administrative service organization. (2) States that the contract amendment must require the health plans to contract with existing CMHSPS for specialty services and supports. (3) Requires a report 60 days prior to completing the contract amendment which must include at least (a) a timeline for integration completion, (b) the assumed rate change that will be provided to the health plans, (c) the projected fiscal impact including any administrative savings, (d) a plan to ensure that consumers will not experience service disruptions, and (e) a plan describing how the Department shall ensure the readiness of the health plans to take over responsibility of services.</p>		<i>Conference</i>	Not included.

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
55.	<p>Requests for Proposal, Information, and Qualification. Bars the Department from issuing a request for proposal in excess of \$5.0 million unless the Department has first considered issuing a request for information or qualification. Requires Department to notify the Department of Technology, Management, and Budget if a request for information or qualification was not necessary.</p>	Sec. 299	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 299. Added: " (2) From funds appropriated in part 1, for all RFPs issued during the current fiscal year where an existing service received proposals by multiple vendors, the department shall notify all vendors within 30 days of the RFP decision. The notification to vendors shall include detail on the RFP process including the respective RFP scores and the respective cost for each vendor. If the highest scored RFP or lowest cost RFP does not receive the contract for an existing service offered by the department, the notification shall issue an explanation for the reasons that the highest scored RFP or lowest cost RFP did not receive the contract and detail the incremental cost target amount or service level required that was required to migrate the service to a new vendor. Additionally, the department shall include in the notification details as to why a cost or service difference is justifiable if the highest scored or lowest vendor does not receive the contract. (3) The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by September 30 of the current fiscal year a report that summarizes all RFPs during the current fiscal year where an existing service received proposals by multiple vendors. The report shall list all finalized RFPs where there was a divergence from awarding the contract to the lowest cost or highest scoring vendor. The report shall also include the cost or service threshold required by department policy that must be satisfied in order for an existing contract to be received by new vendor."
			<i>House</i>	Sec. 299.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES				
Boilerplate Summary				
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	<p>Sec. 299. Added: "(2) From funds appropriated in part 1, for all RFPs issued during the current fiscal year where an existing service received proposals by multiple vendors, the department shall notify all vendors within 30 days of the RFP decision. The notification to vendors shall include detail on the RFP process including the respective RFP scores and the respective cost for each vendor. If the highest scored RFP or lowest cost RFP does not receive the contract for an existing service offered by the department, the notification shall issue an explanation for the reasons that the highest scored RFP or lowest cost RFP did not receive the contract and detail the incremental cost target amount or service level required that was required to migrate the service to a new vendor. Additionally, the department shall include in the notification details as to why a cost or service difference is justifiable if the highest scored or lowest vendor does not receive the contract. (3) The department shall submit to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by September 30 of the current fiscal year a report that summarizes all RFPs during the current fiscal year where an existing service received proposals by multiple vendors. The report shall list all finalized RFPs where there was a divergence from awarding the contract to the lowest cost or highest scoring vendor. The report shall also include the cost or service threshold required by department policy that must be satisfied in order for an existing contract to be received by new vendor."</p>
	<u>DEPARTMENTWIDE ADMINISTRATION</u>			
56.	2-1-1 Statewide Projects. \$500,000.00 of demonstration project funding shall be distributed to support a statewide 2-1-1 system.	Sec. 307	<i>Executive</i>	Sec. 8-307.
			<i>Senate</i>	Sec. 307. Inserted "of 1986" after "code" in subsection (2).

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DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>House</i>	Sec. 307. Demonstration amount changed from "\$500,000" to "\$950,000". Adds appropriations subcommittees and fiscal agencies to reporting requirements.
			<i>Conference</i>	Sec. 307. Demonstration amount changed from "\$500,000" to "\$950,000". Inserted "of 1986" after "code" in subsection (2). Adds appropriations subcommittees and fiscal agencies to reporting requirements.
57.	Nonprofit Services for At-Risk Children. The Department should work with youth-oriented nonprofit organizations to provide mentoring programming for children of incarcerated parents and other at-risk children.	Sec. 310	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 310.
			<i>House</i>	Sec. 310.
			<i>Conference</i>	Sec. 310.
58.	Licensing Standards for Adult Assisted Living. The Department and other groups shall conduct a workgroup to develop quality metrics.	Sec. 315	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
59.	Terminal Leave Payouts. Prevents the Department from spending more than the amount appropriated in the Terminal Leave Payouts line item unless funding comes from a legislative transfer.	Sec. 316	<i>Executive</i>	Sec. 8-316.
			<i>Senate</i>	Sec. 316.
			<i>House</i>	Sec. 316.
			<i>Conference</i>	Sec. 316.
60.	Office Closure in Munising. The Department shall not expend funds for rental payments or operational expenses for the premises located at 103 Court Street in Munising,	Sec. 320	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
	Michigan.		<i>House</i>	Sec. 320.
			<i>Conference</i>	Not included.
61.	Office Closure in Flint. The Department shall not expend funds rental payments or operational expenses for the premises located at 660 South Saginaw in Flint, Michigan.	Sec. 321	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
	<u>CHILD SUPPORT ENFORCEMENT</u>			
62.	Child Support Incentive Payments. Assumes total Federal incentive payment of \$26.5 million, \$12.0 million retained by the State, and \$14.5 million allocated to counties. Includes provisions when Federal payments to the State are more than \$26.5 million; if they are less, the county and State shares are to be reduced by 50% of the shortfall.	Sec. 401	<i>Executive</i>	Sec. 8-401.
			<i>Senate</i>	Sec. 401.
			<i>House</i>	Sec. 401.
			<i>Conference</i>	Sec. 401.
63.	Child Support Excess Collections. If statewide retained child support collections exceed \$38,300,000.00, 75% of the amount in excess of \$38,300,000.00 is appropriated to legal support contracts. This excess appropriation may be distributed to eligible counties.	Sec. 409	<i>Executive</i>	Sec. 8-409.
			<i>Senate</i>	Sec. 409.
			<i>House</i>	Sec. 409.
			<i>Conference</i>	Sec. 409.
64.	Escheated Child Support Collections. If Title IV-D child support collections are escheated, SBO Director may adjust the financing of legal support contracts, both reducing Federal authorization and increasing general funding by 66% of the escheated amount.	Sec. 410	<i>Executive</i>	Sec. 8-410.
			<i>Senate</i>	Sec. 410.
			<i>House</i>	Sec. 410.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	
	<u>COMMUNITY SERVICES AND OUTREACH</u>			Sec. 410.
65.	School Success Partnership. Appropriates \$450,000 to the Northeast Michigan Community Services Agency for the School Success Partnership and requires a report on outcomes.	Sec. 450	<i>Executive</i>	Sec. 8-450. Modified to include the State Budget Office as report recipient.
			<i>Senate</i>	Sec. 450. Modified to include the State Budget Office as report recipient.
			<i>House</i>	Sec. 450. Modified to include the State Budget Office as report recipient.
			<i>Conference</i>	Sec. 450. Modified to include the State Budget Office as report recipient.
66.	Forensic Nurse Examiner Programs. Directs the Department to continue to support justice assistance grants for expansion of forensic nurse examiner programs to facilitate training for improved evidence collection for prosecution of sexual assault. Funds are used for program coordination and training.	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Moved to Sec. 452.
			<i>House</i>	Moved to Sec. 451.
			<i>Conference</i>	Moved to Sec. 452.
67.	Sexual Assault Grants. Allocates \$100 to fund sexual assault comprehensive services program grants in addition to the amount of funding allocated for these grants in FY 16.	NEW HOUSE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 452.
			<i>Conference</i>	Not included.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
	<u>CHILDREN'S SERVICES AGENCY - CHILD WELFARE</u>			
68.	Foster Care Length of Stay Target. Requires that no more than 27% of children will be in foster care for 24 months or more. Also requires a report on the specific steps taken to achieve this goal by March 1.	Sec. 501	<i>Executive</i>	Sec. 8-501. Subsection 2 detailing the reporting requirement is not included.
			<i>Senate</i>	Sec. 501.
			<i>House</i>	Sec. 501. "27%" is changed to "25%".
			<i>Conference</i>	Sec. 501. "27%" is changed to "25%".
69.	Indian Tribal Government Foster Care Reimbursement. Department shall provide 50% reimbursement to Indian tribal governments for foster care expenditures.	Sec. 502	<i>Executive</i>	Sec. 8-502.
			<i>Senate</i>	Sec. 502.
			<i>House</i>	Sec. 502.
			<i>Conference</i>	Sec. 502.
70.	Actuarially Sound Rates for Out-of-Home Child Welfare Services. Requires the Department to develop actuarially sound case rates for out-of-home child welfare services, develop a prospective rate system, implement a 5-year evaluation of the model, do a cost analysis, to limit expansion to counties that are willing participants, and to issue quarterly status reports on the outcomes. Also allows the Department	Sec. 503	<i>Executive</i>	Sec. 8-503. Subsections 3, 5, and 7 are not included. Subsection 3 refers to a 9/30/2016 deadline to complete the full cost analysis of the actuarial rate. Subsection 5 refers to the implementation of performance-based funding into counties that have an agreement in place with all parties. Subsection 7 refers to a master agreement with a child welfare service provider consortium.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
	to provide funding to a consortium for performance-based funding implementation.		<i>Senate</i>	Sec. 503. Replaced subsection (3) with: "By October 1, 2016, the department shall provide to the senate and house appropriations committees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office a report on the full cost analysis of the performance-based funding model. The report shall include background information on the project and give details about the contractual costs covered through the case rate." Modified subsection (5) to allow for performance-based funding models into counties that have "signed a memorandum of understanding that incorporates the intentions of the concerned parties". Added "in Kent County" to subsection (7).
			<i>House</i>	Sec. 503. Modifies reporting dates to "If not provided in the previous year, by September 30, of the current fiscal year". Adds state budget office as a report recipient. In subsection (7), replaces reference to the description of a consortium with "shall continue to work with the West Michigan Partnership for Children consortium on the implementation of the performance-based funding model pilot. The consortium shall..."

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	Sec. 503. Replaces subsection (3) with: "By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations committees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office a report on the full cost analysis of the performance-based funding model. The report shall include background information on the project and give details about the contractual costs covered through the case rate." Modifies subsection (5) to allow for performance-based funding models into counties that have "signed a memorandum of understanding that incorporates the intentions of the concerned parties". Subsection (7) replaces reference to the description of a consortium with "shall continue to work with the West Michigan Partnership for Children consortium on the implementation of the performance-based funding model pilot. The consortium shall..."
71.	Kent County Consortium. Appropriates \$500,000 to a consortium located in Kent County in order to pilot a performance-based funding child welfare system. The consortium must be a nonprofit organization, provide a continuum of care structure, and have the capacity to provide the services.	Sec. 504	<i>Executive</i>	Sec. 8-504. Subsection (1) is not included. Subsection (1) allocates \$500,000 of start-up funding to Kent County. Subsection 2 is modified to directly state that a master agreement for the pilot performance-based funding model will be undertaken in Kent County.
<i>Senate</i>			Sec. 504. Revised subsection (2) to allow for the consortium to be in Kent County. Revised subsection (4) to include more reporting requirements such as the "number of children placed by agencies in the consortium, fund balance of the consortium, and the status of the consortium evaluation."	
<i>House</i>			Sec. 504. Subsection (1) is not included. Subsection (2) is changed to reference the Kent Country consortium. Subsection (3) added the fiscal agencies and the state budget office as a report recipient.	

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	Sec. 504. Subsection (1) is not included. Subsection (2) is changed to reference the West Michigan Partnership for Children. Revised subsection (4) to include more reporting requirements such as the "number of children placed by agencies in the consortium, fund balance of the consortium, and the status of the consortium evaluation." and added the fiscal agencies and the state budget office as a report recipient.
72.	Juvenile Justice. The Department and Wayne County shall provide a report to the Legislature on the number of youth served in the previous fiscal year and in the first quarter of the current fiscal year outlining the number of youth served within each juvenile justice system, the type of setting for each youth, performance outcomes, and financial costs or savings.	Sec. 505.	<i>Executive</i>	Sec. 8-505.
			<i>Senate</i>	Sec. 505.
			<i>House</i>	Sec. 505. Revised the reporting requirement to be the subcommittee rather than the full appropriation committee.
			<i>Conference</i>	Sec. 505. Revised the reporting requirement to be the subcommittee rather than the full appropriation committee.
73.	Private Collections. Allows for foster care private collections collected during the current fiscal year to include revenues for services provided in prior years.	Sec. 507	<i>Executive</i>	Sec. 8-507.
			<i>Senate</i>	Sec. 507.
			<i>House</i>	Sec. 507.
			<i>Conference</i>	Sec. 507.
74.	Children's Trust Fund. Additional money granted or received as gifts, or donations are appropriated to the Children's Trust Fund that is overseen by the State Child Abuse and Neglect Prevention Board. The Board may initiate a joint project with another State agency. The Department may use interest and investment revenue for programs, administration, and services sanctioned by the Board.	Sec. 508	<i>Executive</i>	Sec. 8-508.
			<i>Senate</i>	Sec. 508.
			<i>House</i>	Sec. 508.
			<i>Conference</i>	Sec. 508.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
75.	Timely Assessments. The Department shall provide quarterly reports to the Legislature on the number and percentage of children who received timely health examinations after entry into foster care and the number and percentage of children entering foster care who received a required mental health examination after entry into foster care.	Sec. 511	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 511.
			<i>House</i>	Sec. 511. Reporting is changed to semi-annually.
			<i>Conference</i>	Sec. 511. Reporting is changed to semi-annually.
76.	Out-of-State Placements. Provides conditions under which out-of-state children's placements can occur. Also states Legislative intent that the Department shall work with the courts to secure recidivism rates on adjudicated youth, as well as a report to the Legislature by March 1 on the efforts to obtain these data.	Sec. 513	<i>Executive</i>	Sec. 8-513. Altered language by not including subsections (2), (4), (5), and (6). Subsection (2) required any out-of-state placement to have the approval of the deputy director of children's services and added State Budget Office as report recipient. Subsection (4) is an annual report on the current fiscal year per diem costs in residential facilities. Subsection 5 is a requirement for the department to determine the statewide recidivism rate for adjudicated youth. Subsection 6 is a requirement for a notification that the preceding subsection requirement is completed.
			<i>Senate</i>	Sec. 513.
			<i>House</i>	Sec. 513. Altered language of subsections (2) by removing requirement that the department notify of out of state placement, added State Budget Office as report recipient, and did not include subsection (4).
			<i>Conference</i>	Sec. 513. Altered language of subsections (2) by removing requirement that the department notify of out of state placement, added State Budget Office as report recipient, and did not include subsection (4).
77.	Child Protective Service Report. Requires an annual child protective service report by January 1 that must include specific information, such as child abuse and neglect investigations' statistics, on cases classified under categories	Sec. 514	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 514. Deleted subdivision (c). Re-lettered remaining subdivisions.

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
	I to V, new child protective service policies, the Department's policy on termination of parental rights, and the policy regarding children who have been exposed to the production of methamphetamine.		<i>House</i>	Sec. 514. Changed reporting date to March 1. Revised subdivision (c) and included list of necessary statistical information to provide with the report.
			<i>Conference</i>	Sec. 514. Changed reporting date to March 1. Revised subdivision (c) and included list of necessary statistical information to provide with the report. Strike "at a minimum" from subsection (1) and replace with "but not limited to". Added "but not limited to" to subsection (3).
78.	Foster Care Privatization in Kent County. Requires an annual report on privatization of child welfare services in Kent County.	Sec. 515	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 515. Modified reporting date to October 1 from March 1.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 515. Modified reporting date to October 1 from March 1.
79.	Treatment Foster Care. The Department shall permit any private agency that has an existing contract with this State to provide foster care services to be also eligible to provide treatment foster care services.	Sec. 519	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 519.
			<i>House</i>	Sec. 519.
			<i>Conference</i>	Sec. 519.
80.	Foster Care Scholarships. Language appropriates \$750,000 to the Fostering Futures Scholarship program to provide scholarships to foster youth. An annual report is due by March 1.	Sec. 522	<i>Executive</i>	Sec. 8-522. Deleted third "and" in (2). Inserted ", and the state budget office" after "policy offices" in (2).
			<i>Senate</i>	Sec. 522. Deleted third "and" in (2). Inserted ", and the state budget office" after "policy offices" in (2).
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 522. Deleted third "and" in (2). Inserted ", and the state budget office" after "policy offices" in (2).

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
81.	Family Preservation Program Report. Requires a report on the status of the prevention services program during the annual budget presentation. Requires youth in-transition, domestic violence, and teen parent counseling contracted agencies to report required TANF data elements in order to receive TANF funds. Also requires a report on family preservation programs: family's first, family reunification, and families together building solutions.	Sec. 523	<i>Executive</i>	Sec. 8-523. Reporting requirements are modified to include the State Budget Office as a reporting recipient.
			<i>Senate</i>	Sec. 523. Reporting requirements are modified to include the State Budget Office as a report recipient.
			<i>House</i>	Sec. 523. Reporting requirements are modified to include the State Budget Office as a report recipient and added information on any innovations that may increase savings in administrative costs.
			<i>Conference</i>	Sec. 523. Reporting requirements are modified to include the State Budget Office as a report recipient and added information on any innovations that may increase savings in administrative costs.
82.	Strong Families/ Safe Children Spending Plans. Requires DHHS to submit spending plans on the Strong Families/Safe Children program by October 1 to the Legislature.	Sec. 524	<i>Executive</i>	Sec. 8-524. Subsection 1 is modified by not including specific inclusions in the reporting requirement. In place of the exact reporting specifications, this language is added: "provide an estimate of total cost savings as a result of avoiding placement of children in foster care for families who received family preservation services."
			<i>Senate</i>	Sec. 524.
			<i>House</i>	Sec. 524.
			<i>Conference</i>	Sec. 524.
83.	Residential Facility Evaluation Process. The Department shall implement the same on-site evaluation processes for privately operated child welfare and juvenile justice residential facilities as is used to evaluate state-operated facilities.	Sec. 525	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 525.
			<i>House</i>	Sec. 525.
			<i>Conference</i>	Sec. 525.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
84.	Title IV-E Waiver Request. Department may implement a Federally approved Title IV-E child welfare waiver demonstration project. As required under the waiver, any savings resulting from the demonstration project must be quantified and reinvested into child welfare programming.	Sec. 526	<i>Executive</i>	Sec. 8-526.
			<i>Senate</i>	Sec. 526.
			<i>House</i>	Sec. 526.
			<i>Conference</i>	Sec. 526.
85.	Annual State Licensing Compliance Review. Requires the collaboration between the Department and Private Child and Family Agencies for an annual review of State licensing policies, practices, and procedures in accordance with the annual contract compliance review regarding child placing agencies and child caring institutions. Reviews of nationally accredited agencies are to take place no more than once every two years. Licensing of foster care providers and relatives of foster children shall follow high standards of care.	Sec. 532	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 532. Modified requirement to conduct licensing review every 3 years rather than every 2.
			<i>House</i>	Sec. 532. Did not include subsection (2).
			<i>Conference</i>	Sec. 532. Modified requirement to conduct licensing review every 4 years rather than every 2.
86.	Payment Processing for Out-of-Home Care. Requires the Department to make payments, within 30 days of receiving documentation, to private nonprofit child placing facilities for in-home and out-of-home care services.	Sec. 533	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 533. Added to (1) "It is the intent of the legislature that the burden of ensuring that these payments are made in a timely matter and no payments are in arrears is upon the department." Revised (2): "The department shall submit a report no later than March 1 to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office that details each private child placing agency and the percentage of payments that were in excess of 30 days during the entire prior fiscal year and the first quarter of the current fiscal year."
			<i>House</i>	Sec. 533. Added the appropriations subcommittees, the fiscal agencies, and the state budget director as report recipients.

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	Sec. 533. Added to (1) "It is the intent of the legislature that the burden of ensuring that these payments are made in a timely matter and no payments are in arrears is upon the department." Revised (2): "The department shall submit a report no later than March 1 to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office that details each private child placing agency and the percentage of payments that were in excess of 30 days during the entire prior fiscal year and the first quarter of the current fiscal year."

DEPARTMENT OF HEALTH AND HUMAN SERVICES

	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
87.	<p>Statewide Automated Child Welfare Information System (SACWIS). Department shall issue report by November 1 on the status of the implementation and operation of SACWIS. The report must include areas where implementation went as planned, any known issues, number of help tickets, and staffing to address help tickets.</p>	Sec. 534	<i>Executive</i>	<p>Sec. 8-534. Entire section is revised to read: "(1) The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by November 1 of the current fiscal year an implementation plan regarding the appropriation in part 1 to implement the Michigan statewide automated child welfare information system. The plan shall include, but not be limited to, efforts to bring the system into compliance with the Dwayne B. v Snyder modified settlement agreement and other federal guidelines set forth by the united states department of health and human services administration for children and families. (2) The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by June 1 of the current fiscal year a status report regarding the appropriation in part 1 to implement the Michigan statewide automated child welfare information system. The report shall provide details on the planning, implementation, and operation of the system including, but not limited to, all of the following: (a) Areas where implementation went as planned. (b) The number of known issues. (c) Any additional overtime or other staffing costs to address known issues. (d) Any contract revisions to address known issues. (e) Other strategies undertaken to improve implementation. (f) Progress developing cross- system trusted data exchanges with MiSACWIS. (g) Progress moving away from a statewide/tribal automated child welfare information system (SACWIS/TACWIS) to a comprehensive child welfare information system (CCWIS). (h) Progress developing and implementing a program to monitor data quality. (i) Progress developing and implementing custom integrated systems for private agencies and tribal governments".</p>

DEPARTMENT OF HEALTH AND HUMAN SERVICES

	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Senate</i>	<p>Sec. 534. Entire section revised: (1) The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by November 1 of the current fiscal year an implementation plan regarding the appropriation in part 1 to implement the Michigan statewide automated child welfare information system. The plan shall include, but not be limited to, efforts to bring the system in compliance with the Dwayne B. v Snyder modified settlement agreement and other federal guidelines set forth by the United States Department of Health and Human Services Administration for Children and Families. (2) The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by June November 1of the current fiscal year a status report on the planning, implementation, and operation, regardless of the current operational status, regarding the appropriation in part 1 to implement the Michigan of the statewide automated child welfare information system. The report shall provide details on the planning, implementation, and operation of the system including, include, but not be limited to, all of the following: (a) Areas where implementation went as planned. (b) The number of known issues. (c) The average number of help tickets submitted per day. (d) Any additional overtime or other staffing costs to address known issues and volume of help tickets. (e) Any contract revisions to address known issues and volume of help tickets. (f) Other strategies undertaken to improve implementation. (h) Progress developing cross-system trusted data exchange with MiSACWIS (g) Progress in moving away from a statewide/tribal automated child welfare information system (SACWIS/TACWIS) to a comprehensive child welfare information system (CCWIS) (h) Progress developing and implementing a program to monitor data quality. (i) Progress developing and implementing custom integrated systems for private agencies and tribal governments.</p>

DEPARTMENT OF HEALTH AND HUMAN SERVICES

	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>House</i>	<p>(1) The department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by November 1 of the current fiscal year an implementation plan regarding the appropriation in part 1 to implement the MISACWIS. The plan shall include, but not be limited to, efforts to bring the system into compliance with the Dwayne B. v Snyder modified settlement agreement and other federal guidelines set forth by the United States Department of Health and Human Services Administration for Children and Families. (2) The department shall provide to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by June 1 of the current fiscal year a status report regarding the appropriation in part 1 to implement the MISACWIS. The report shall provide details on the planning, implementation, and operation of the system, including, but not limited to, all of the following: (a) Areas where implementation went as planned. (b) The number of known issues. (c) Any additional overtime or other staffing costs to address known issues. (d) Any contract revisions to address known issues. (e) Other strategies undertaken to improve implementation. (f) Progress developing cross-system trusted data exchanges with MISACWIS. (g) Progress moving away from a statewide/tribal automated child welfare information system to a comprehensive child welfare information system. (h) Progress developing and implementing a program to monitor data quality. (i) Progress developing and implementing custom integrated systems for private agencies and tribal governments.</p>

DEPARTMENT OF HEALTH AND HUMAN SERVICES

	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	<p>Sec. 534. Entire section revised: (1) The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by November 1 of the current fiscal year an implementation plan regarding the appropriation in part 1 to implement the Michigan statewide automated child welfare information system. The plan shall include, but not be limited to, efforts to bring the system in compliance with the Dwayne B. v Snyder modified settlement agreement and other federal guidelines set forth by the United States Department of Health and Human Services Administration for Children and Families. (2) The department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office by June November 1of the current fiscal year a status report on the planning, implementation, and operation, regardless of the current operational status, regarding the appropriation in part 1 to implement the Michigan of the statewide automated child welfare information system. The report shall provide details on the planning, implementation, and operation of the system including, include, but not be limited to, all of the following: (a) Areas where implementation went as planned. (b) The number of known issues. (c) The average number of help tickets submitted per day. (d) Any additional overtime or other staffing costs to address known issues and volume of help tickets. (e) Any contract revisions to address known issues and volume of help tickets. (f) Other strategies undertaken to improve implementation. (h) Progress developing cross-system trusted data exchange with MiSACWIS (g) Progress in moving away from a statewide/tribal automated child welfare information system (SACWIS/TACWIS) to a comprehensive child welfare information system (CCWIS) (h) Progress developing and implementing a program to monitor data quality. (i) Progress developing and implementing custom integrated systems for private agencies and tribal governments.</p>

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
88.	Foster Care Performance Standards. The Department, in collaboration with child placing agencies, shall develop a strategy to implement Section 115o of the Social Welfare Act. The strategy shall include a requirement that a Department caseworker responsible for preparing a recommendation to a court concerning a juvenile placement shall provide selected information.	Sec. 537	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 537.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 537. Replaced "Between February 1 and February 29,2016" with "By March 1 of the current fiscal year" in subsection (2).
89.	Psychotropic Medication Approval. Department shall, if the ward is a State ward, make a determination on the proposed change in psychotropic medication within 7 business days after the request or, if the ward is a temporary court ward, seek parental consent within 7 business days after the request. If parental consent is not provided within 7 business days, the Department shall petition the court on the eighth business day.	Sec. 540	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 540.
			<i>House</i>	Sec. 540.
			<i>Conference</i>	Sec. 540.
90.	Private Agency Per Diem Rates. Sets administrative rates for private and nonprofit foster care and independent living services. Ensures that providers of foster care services receive no less than a \$37.00 administrative rate, providers of general independent living services no less than a \$28.00 administrative rate, and to pay per diem rates for independent living plus that are to-be-determined.	Sec. 546	<i>Executive</i>	Sec. 8-546. Subsections (4) & (6) are not included. Subsection (4) refers to the additional \$3 increase for the administrative rate for foster care service providers. Subsection (6) details that DHHS shall provide an increase to each private provider of residential services.
			<i>Senate</i>	Sec. 546. Replaced "\$3.00" with ""\$8.00" in subsection (4).
			<i>House</i>	Sec. 546. Subsection (1) is replaced with "(1) From the funds appropriated in part 1 for foster care payments and from the child care fund, the department shall pay providers of foster care services not less than a \$40.00 administrative rate. The department shall pay 100% of the administrative rate for these cases. Payments under this subsection shall be made not less than on a monthly basis." Subsection (4) is not included. Subsection (6) adds a quarterly report on the number of all foster care cases administered by the department and private providers.

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Boilerplate Summary				
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	Sec. 546. Replaced "\$3.00" with ""\$8.00" in subsection (4).
91.	Guardianship Assistance Rate. The Department shall pay a minimum rate that is not less than the approved age-appropriate payment rates for youth placed in family foster care.	Sec. 547	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 547.
			<i>House</i>	Sec. 547.
			<i>Conference</i>	Sec. 547.
92.	Adoptive Parents Notification and Requests. Requires an annual report by December 1 with the number of complaints filed by adoptive parents who were not notified that their adopted child had special needs.	Sec. 556	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 556.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 556. Added policy offices as reporting recipient.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
93.	Child Welfare Training Institute. The language requires a report on the activities and outcomes of the Child Welfare Training Institute.	Sec. 558	<i>Executive</i>	Sec. 8-558. Subsection (2) that details the reporting requirement for training programs or courses provided through the child welfare training institute is not included.
			<i>Senate</i>	Sec. 558. Replaced subsection (1): "The department shall permit private nationally accredited foster care and adoption agencies to conduct their own staff training, based on current department policies and procedures, if the agency trainer and training materials are certified by the department through a train the trainer model and agency documents to the department that the training was provided. The department shall provide access to all training materials the private agencies will need to facilitate this training." New subsection (2) is added: "The department shall post on the department's website a list of all relevant departmental training materials available to private child placing agencies that are allowed to conduct their own training in accordance with this section. The department shall also provide to private child placing agencies that are allowed to conduct their own training any updated training materials as they become available." Current subsection (2) is renumbered to subsection (3). Subsection (3) adds subsection (e): "For courses which are in-person or not accessible online, attendance figures for each course." Subsection (4) is added: "The department shall not hire any employee of a private child placing agency if he or she was instructed by the child welfare training institute for no less than 6 months after the final course has been completed by the employee."
			<i>House</i>	Sec. 558. Strikes subsection (2).

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			<i>Conference</i>	Sec. 558. Replaced subsection with: "(2) The department shall conduct a workgroup consisting of members from the department, private child placing agencies, and child caring institutions, with the goal of reducing the current four weeks of centralized child welfare institute training class time. It is the intent of the legislature that the number of days of in-person pre-service child welfare training be reduced by fifty percent. Not later than November of the current fiscal year, the department shall provide a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office on the findings of the workgroup including the timeline, feasibility, and cost for the implementation plan required to implement the child welfare training institute redesign."
94.	Parent-to-Parent Mentors. Appropriates \$350,000 to the Adoptive Family Support Network for a peer coaching program for adoptive parents and requires a report by March 1.	Sec. 559	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 559.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 559. Modified to "\$250,000".
95.	Travel Reimbursements for Foster Parents. Requires the Department to provide travel reimbursements to foster parents who bring their foster children to parent-child visits.	Sec. 562	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 562.
			<i>House</i>	Sec. 562.
			<i>Conference</i>	Sec. 562.
96.	Parent-Child Visitation Success Rate. Department shall meet a 65% success rate in terms of required meetings for parent-child visitations and meetings between caseworkers	Sec. 564	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.

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	and parents, after accounting for circumstances that are outside the caseworker's control.		<i>House</i>	Sec. 564. Reporting date is changed to by March 1.
			<i>Conference</i>	Sec. 564. Reporting date is changed to by March 1.
97.	Medical Service Plan. Requires a caseworker or supervisor to complete a medical passport for any foster care transferring to a new placement within two weeks of the transfer, and also requires a report by March 1 on the number and percentage of cases that met this goal.	Sec. 567	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 567.
			<i>House</i>	Sec. 567.
			<i>Conference</i>	Sec. 567.
98.	Adoption Subsidy Negotiation Prohibition. Requires the Department to provide an adoption subsidy rate that is not less than 95% of the rate that an adopted child would have been eligible to receive from foster care payments.	Sec. 568	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 568.
			<i>House</i>	Sec. 568.
			<i>Conference</i>	Sec. 568.
99.	Reimbursements for Adoptions. Places a timeline on the Department to reimburse private child placing agencies for completed adoptions.	Sec. 569	<i>Executive</i>	Sec. 8-569.
			<i>Senate</i>	Sec. 569.
			<i>House</i>	Sec. 569.
			<i>Conference</i>	Sec. 569.
100.	Foster Care Licensure and Services. Allocates \$2,500,000.00 to support performance based contracts with child placing agencies to facilitate the licensure of relative caregivers as foster parents. Agencies receive \$2,300.00 per licensure completed within 180 days and a portion thereafter,	Sec. 574	<i>Executive</i>	Sec. 8-574.
			<i>Senate</i>	Sec. 574.
			<i>House</i>	Sec. 574.

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		FY 2015-16 PA 84		FY 2016-17 Changes
	and must provide case management services for at least 50% of their total licensures. Also allocates \$375,000.00 to family incentive grants for private and community-based foster care service providers.		<i>Conference</i>	Sec. 574.
101.	Foster Care Parent Dropouts. The Department shall provide a report to the Legislature that includes: (a) The number and percentage of foster parents that dropped out of the program in the previous fiscal year and the reasons the foster parents left the program and how those figures compare to prior fiscal years. (b) The number and percentage of foster parents successfully retained in the previous fiscal year and how those figures compare to prior fiscal years.	Sec. 583	<i>Executive</i>	Sec. 8-583.
			<i>Senate</i>	Sec. 583.
			<i>House</i>	Sec. 583.
			<i>Conference</i>	Sec. 583.
102.	Private Agency Staff Training. The Department shall make available at least 1 pre-service training class each month in which new caseworkers for private foster care and adoption agencies can enroll.	Sec. 585	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 585.
			<i>House</i>	Sec. 585.
			<i>Conference</i>	Sec. 585.
103.	Juvenile Justice Vision 20/20. Appropriates \$1.0 million to the College of Community and Public Service at GVSU to implement the juvenile justice vision 20/20 database. Section also lists data sharing arrangements and a reporting requirement.	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 586.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.

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104.	In-Home Community Care. Appropriates \$0.4 million to expand or create new in-home community care programs in rural counties for adjudicated youth, and requires a report by March 1.	Sec. 587	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 587. Modified subsection (1): "From the funds appropriated in part 1 to in-home community care programs, \$400,000.00 shall be used to expand or create new in-home care and community-based juvenile justice services for rural counties through their county spending plans that comply with the requirements of the social welfare act, 1939 PA 280, MCL 400.1 to 400.119b." Subsection (2) is added: "Counties shall describe the proposed funds to be used, the programming enhancements to be achieved, and the youth to be served by the additional funding in their spending plan. Counties that received funds for the purpose described in section 587 of article X of 2015 PA 84 are not eligible to receive the funds in this section. The department shall expend the full amount of funds on a first-come, first-served basis no later than December 31 of the current fiscal year to counties that apply in their approved spending plan. Counties with greater than 75,000 in population as of 10/1/2016 are not eligible for the funding described in subsection (1). Funding to a given program in a county shall not exceed \$25,000." Current subsection (2) is renumbered to subsection (3).
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
105.	Child Welfare Reporting. Requires all reports from the court-appointed settlement monitor be distributed without revision by the Department. Requires quarterly reports on the number of children in the guardianship assistance and foster care-children with serious emotional disturbance waiver program.	Sec. 588	<i>Executive</i>	Sec. 8-588.
			<i>Senate</i>	Sec. 588.
			<i>House</i>	Sec. 588. Adds the policy offices as a reporting recipient.
			<i>Conference</i>	Sec. 588. Adds the policy offices as a reporting recipient.

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106.	Foster Care Transfer Rates. DHHS must pay 100% of the administrative rate for all new cases referred to providers of foster care services. A monthly report on new foster care cases administered by private providers is also required.	Sec. 589	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 589.
			<i>House</i>	Moved to Sec. 546.
			<i>Conference</i>	Sec. 589.
107.	Staffing Ratio for Residential Services. The Department may allow residential service providers for abuse and neglect cases to implement a staff ratio during waking hours of 1 staff to 5 children.	Sec. 593	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 593. Inserted "child" before "abuse" and "neglect".
			<i>House</i>	Sec. 593.
			<i>Conference</i>	Sec. 593. Inserted "child" before "abuse" and "neglect".
	<u>PUBLIC ASSISTANCE</u>			
108.	Rent Vending. Vending shall be terminated for those units that the local authority indicates in writing do not meet local housing codes until such time as the local authority indicates in writing that local housing codes have been met.	Sec. 601	<i>Executive</i>	Sec. 8-601.
			<i>Senate</i>	Sec. 601.
			<i>House</i>	Sec. 601.
			<i>Conference</i>	Sec. 601.
109.	Disability Applications and Assistance Needs. Department shall establish a policy to conduct a full evaluation of an individual's assistance needs if the individual has applied or disability assistance 2 times within a 1 year period.	Sec. 602	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 602.
			<i>House</i>	Sec. 602.
			<i>Conference</i>	Sec. 602.

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		FY 2015-16 PA 84		FY 2016-17 Changes
110.	Medicaid Claims for Community-Based Services. Language requires a workgroup to maximize Medicaid claims for community-based and outpatient treatment for foster care and juvenile justice children. Requires a report to the Legislature by March 1.	Sec. 603	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 603. Reporting period is changed to "February 28, 2017" from "February 29, 2016".
			<i>House</i>	Sec. 603. Reporting date is changed to "by March 1" and the reference to the Medicaid claim workgroup is to implement the action plan rather than forming the workgroup.
			<i>Conference</i>	Sec. 603. Reporting date is changed to "by March 1" and the reference to the Medicaid claim workgroup is to implement the action plan rather than forming the workgroup.
111.	State Disability Assistance (SDA) Program. The language outlines the SDA program operation and eligibility criteria, including needs test, and specific terms related to substance abuse treatment.	Sec. 604	<i>Executive</i>	Sec. 8-604.
			<i>Senate</i>	Sec. 604. Replaced all instances of "substance abuse" with "substance use disorder".
			<i>House</i>	Sec. 604.
			<i>Conference</i>	Sec. 604. Replaced all instances of "substance abuse" with "substance use disorder".
112.	SDA Reimbursement for Adult Foster Care. Requires grant payment for the SDA recipient living in licensed adult foster care to equal that of a recipient of retroactive SSI benefits.	Sec. 605	<i>Executive</i>	Sec. 8-605.
			<i>Senate</i>	Sec. 605.
			<i>House</i>	Sec. 605.
			<i>Conference</i>	Sec. 605.
113.	Repayment of SDA and FIP Benefits. Requires the SDA recipients to repay any assistance received under those programs upon receipt of retroactive SSI benefits.	Sec. 606	<i>Executive</i>	Sec. 8-606.
			<i>Senate</i>	Sec. 606.
			<i>House</i>	Sec. 606.

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		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	Sec. 606.
114.	SDA/SSI Recoveries. Allows appropriation revenue for SDA/SSI recoveries be satisfied by all related net recoveries received in the given fiscal year.	Sec. 607	<i>Executive</i>	Sec. 8-607.
			<i>Senate</i>	Sec. 607.
			<i>House</i>	Sec. 607.
			<i>Conference</i>	Sec. 607.
115.	Adult Foster Care Reimbursements. Prohibits adult foster care and homes for the aged service providers from requiring reimbursement from SSI recipients in excess of legislatively authorized rates. Also includes authorization for providers to accept third-party payments unless it results in reduction of SSI payment.	Sec. 608	<i>Executive</i>	Sec. 8-608.
			<i>Senate</i>	Sec. 608. Changed "provided that" to "if".
			<i>House</i>	Sec. 608.
			<i>Conference</i>	Sec. 608. Changed "provided that" to "if".
116.	Adult Personal Care Services. Personal care services payment for eligible (adult foster care and home for the aged) SSI recipients shall not be reduced in the current fiscal year. A not-less-than 30-day notification to the Legislature must be made before any reduction in the State supplemental payment level.	Sec. 609	<i>Executive</i>	Sec. 8-609.
			<i>Senate</i>	Sec. 609.
			<i>House</i>	Sec. 609.
			<i>Conference</i>	Sec. 609.
117.	State Emergency Relief (SER) Grants. Requires the Department to grant SER payment exceptions if unexpected expenses related to maintaining or securing employment occur.	Sec. 610	<i>Executive</i>	Sec. 8-610.
			<i>Senate</i>	Sec. 610.
			<i>House</i>	Sec. 610.
			<i>Conference</i>	Sec. 610.

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118.	SSI State Supplementation. Requires DHHS to provide no more than the minimum SSI payments required by the Federal government for couples living independently or in the household of another.	Sec. 611	<i>Executive</i>	Sec. 8-611.
			<i>Senate</i>	Sec. 611.
			<i>House</i>	Sec. 611.
			<i>Conference</i>	Sec. 611.
119.	Indigent Disposition Reimbursement Rates. Provides a maximum reimbursement rate of \$800.00 for final disposition of indigent persons, and reimbursements for permit fees up to \$75. Allows for burial if an individual's religion prohibits cremation.	Sec. 613	<i>Executive</i>	Sec. 8-613. Subsection (2) detailing legislative intent that the rate increases for funeral goods and services is not included.
			<i>Senate</i>	Sec. 613.
			<i>House</i>	Sec. 613. The adult burial rate with services is raised to \$725.00, The adult burial rate without services is raised to \$490.00, and the infant burial rate is raised to \$170.00. The increase in payments to funeral directors is changed to \$5.00 from \$20.00.
			<i>Conference</i>	Sec. 613. The adult burial rate with services is raised to \$725.00, The adult burial rate without services is raised to \$490.00, and the infant burial rate is raised to \$170.00. The increase in payments to funeral directors is changed to \$5.00 from \$20.00.
120.	Federal Disability Eligibility. Requires a report by January 15 to the Legislature on the percent of State Disability Assistance recipients who were eligible for Federal disability in the previous fiscal year.	Sec. 614	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 614.
			<i>House</i>	Sec. 614.
			<i>Conference</i>	Sec. 614.
121.	Illegal Alien Assistance. Prohibits public assistance payments for persons who are illegal aliens, except for food bank and emergency shelter.	Sec. 615	<i>Executive</i>	Sec. 8-615.
			<i>Senate</i>	Sec. 615.

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		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>House</i>	Sec. 615.
			<i>Conference</i>	Sec. 615.
122.	BRIDGE Card Retailer Fee Cap. The Department shall require retailers that participate in the electronic benefits transfer program to charge no more than \$2.50 in fees for cash back as a condition of participation.	Sec. 616	<i>Executive</i>	Sec. 8-616.
			<i>Senate</i>	Sec. 616.
			<i>House</i>	Sec. 616.
			<i>Conference</i>	Sec. 616.
123.	LEIN Report. Requires DHHS to provide a report by January 15 to the Legislature on the number and percent of public assistance recipients who were no longer eligible for assistance due to their status in the Law Enforcement Information Network (LEIN).	Sec. 617	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 617.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 617.
124.	Drug Felony Exemption. Provides an exemption for individuals convicted of drug related felonies, who were convicted after August 22, 1996, from denial of Title IV-A assistance and food assistance benefits under certain conditions.	Sec. 619	<i>Executive</i>	Sec. 8-619.
			<i>Senate</i>	Sec. 619.
			<i>House</i>	Sec. 619. Adjusted language slightly by deleting "provided that" and added "if".
			<i>Conference</i>	Sec. 619. Adjusted language slightly by deleting "provided that" and added "if".

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125.	<p>Medicaid Eligibility Review. Requires Medicaid eligibility determination within 90 days of information submission when disability is a determining factor and 45 days for all other Medicaid applications. Requires bi-annual reports to the Legislature on the standard of promptness for eligibility determination.</p>	Sec. 620	<i>Executive</i>	Sec. 8-620. Modified to change the semi-annual report in subsection (2) to a quarterly report and to include the State Budget Office as a report recipient.
			<i>Senate</i>	Sec. 620. Modified to change the semi-annual report in subsection (2) to a quarterly report and to include the State Budget Office as a report recipient. Deleted the third "and" in subsection (2). Also changed language
			<i>House</i>	Sec. 620. Modified to change the semi-annual report in subsection (2) to a quarterly report and to include the State Budget Office as a report recipient.
			<i>Conference</i>	Sec. 620. Modified to change the semiannual report in subsection (2) to a quarterly report and to include the State Budget Office as a report recipient.
126.	<p>Legal Services for Federal Disability Applicants. Allows the Department to contract with Legal Services Association of Michigan to help individuals apply for SSI or other disability programs.</p>	Sec. 625	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 625. Changed first "the" to "From the funds appropriated in part 1". Replaced "may" with "shall allocate \$500,000.00 to". Replaced all occurrences of "clients" to "recipients".
			<i>House</i>	Sec. 625. Changed first "the" to "From the funds appropriated in part 1 for SSI advocacy legal services". Added "up to \$500,000.00 shall be paid to the legal services association of Michigan for SSI advocacy legal services". Replaced all occurrences of "clients" to "recipients".
			<i>Conference</i>	Sec. 625. Changed first "the" to "From the funds appropriated in part 1 for SSI advocacy legal services". Added "up to \$500,000.00 shall be paid to the legal services association of Michigan for SSI advocacy legal services". Replaced all occurrences of "clients" to "recipients".

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127.	Drug Testing Pilot. Requires the Department to implement a drug testing pilot program for FIP according to a plan described in the Social Welfare Act.	Sec. 630	<i>Executive</i>	Sec. 8-630. Section is revised by changing phrasing from: "...the department shall implement a suspicion-based drug testing pilot program..." to "...the department shall conduct a suspicion-based drug testing pilot program...".
			<i>Senate</i>	Sec. 630. Section is revised by changing phrasing from: "...the department shall implement a suspicion-based drug testing pilot program..." to "...the department shall conduct a suspicion-based drug testing pilot program...".
			<i>House</i>	Sec. 630. Section is revised by changing phrasing from: "...the department shall implement a suspicion-based drug testing pilot program..." to "...the department shall conduct a suspicion-based drug testing pilot program...".
			<i>Conference</i>	Sec. 630. Section is revised by changing phrasing from: "...the department shall implement a suspicion-based drug testing pilot program..." to "...the department shall conduct a suspicion-based drug testing pilot program...".
128.	Allocation of Funds for Homeless Programs. Requires the Department to allocate the full amount of funding that is appropriated to homeless services.	Sec. 642	<i>Executive</i>	Sec. 8-642.
			<i>Senate</i>	Sec. 642.
			<i>House</i>	Sec. 642.
			<i>Conference</i>	Sec. 642.
129.	Emergency Shelter Funding and TANF. Requires the shelter programs to report required TANF data elements in order to receive TANF funds; also requires non-reporting shelters to forfeit any amount over its FY 1999-2000 reimbursement in TANF funds.	Sec. 643	<i>Executive</i>	Sec. 8-643.
			<i>Senate</i>	Sec. 643.
			<i>House</i>	Sec. 643.
			<i>Conference</i>	Sec. 643.

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130.	Domestic Violence and SER Eligibility. Outlines definitions of homeless individual or family and domestic violence for the purpose of state emergency relief eligibility; coincides with department policies on good cause in not cooperating with child support and paternity requirements.	Sec. 645	<i>Executive</i>	Sec. 8-645.
			<i>Senate</i>	Sec. 645.
			<i>House</i>	Sec. 645.
			<i>Conference</i>	Sec. 645.
131.	Food Assistance Exemption. An individual who is the victim of domestic violence and does not qualify for any other exemption may be exempt from the 3-month in 36-month limit on receiving food assistance.	Sec. 653	<i>Executive</i>	Sec. 8-653.
			<i>Senate</i>	Sec. 653.
			<i>House</i>	Sec. 653.
			<i>Conference</i>	Sec. 653.
132.	Bridge Cards and Farmer's Markets. Requires the Department to notify Bridge card recipients that they may use the card at farmers' markets in the State and to provide information about the Double Up Food Bucks program.	Sec. 654	<i>Executive</i>	Sec. 8-654.
			<i>Senate</i>	Sec. 654.
			<i>House</i>	Sec. 654.
			<i>Conference</i>	Sec. 654.
133.	LIHEAP Spending Plan. Requires DHHS to provide the LIHEAP spending plan to the Legislature within 14 days of its approval.	Sec. 655	<i>Executive</i>	Sec. 8-655. Adds the State Budget Office to the report recipients.
			<i>Senate</i>	Sec. 655. Adds the State Budget Office to the report recipients.
			<i>House</i>	Sec. 655. Adds the State Budget Office to the report recipients.
			<i>Conference</i>	Sec. 655. Adds the State Budget Office to the report recipients.

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134.	Heat and Eat Program. Appropriates up to \$3.151 million of federal funding to provide an additional \$21 payment to certain FAP cases to enable additional FAP cases to receive expand food assistance benefits through the Heat and Eat Program.	NEW HOUSE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 656.
			<i>Conference</i>	Not included.
135.	Food Bank Funding and TANF. Agencies receiving food bank funding must report required TANF data elements in order to receive TANF funds. The appropriation is not considered an on-going funding commitment.	Sec. 660	<i>Executive</i>	Sec. 8-660.
			<i>Senate</i>	Sec. 660.
			<i>House</i>	Sec. 660.
			<i>Conference</i>	Sec. 660. Changed "food bank funding" to "Food Bank Council of Michigan".
136.	Clothing Allowance. Department shall allocate \$2,880,000.00 for the annual clothing allowance. Allowance shall be granted to all eligible children in a family independence program group that does not include an adult.	Sec. 669	<i>Executive</i>	Sec. 8-669. Modified to increase the allocation of the clothing allowance from \$2.8 million to \$9.0 million, also removes the restriction to child only Family Independence Program recipients. Adds subsection (2) to identify performance measures and outcomes for economically disadvantaged students.
			<i>Senate</i>	Sec. 669. Replaced "\$2,880,000.00" with "\$6,270,000.00". Deleted "that does not include an adult".
			<i>House</i>	Sec. 669. Replaced "\$2,880,000.00" with "\$7,650,000.00". Deleted "that does not include an adult".
			<i>Conference</i>	Sec. 669. Replaced "\$2,880,000.00" with "\$6,270,000.00". Deleted "that does not include an adult".
137.	Inappropriate Use of Electronic Benefit Card (EBT). The Department will report to the Legislature by February 15 of current fiscal year on efforts to reduce inappropriate use of	Sec. 672	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 672.

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	EBTs that includes the number and status of cases, the number of people whose benefits were revoked, and the number of retailers that were fined or removed from the program.		<i>House</i>	Sec. 672.
			<i>Conference</i>	Sec. 672.
138.	Fraud Prevention Workgroup. A workgroup shall meet to minimize fraud in all MiBridges programs. A report is due to the Legislature by February 16.	Sec. 673	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
139.	State Goal of FIP Employment. Requires the Department to establish a State goal of not less than 50% for the percentage of FIP cases involved in work related activities through PATH, if the goal is not met during two consecutive quarters, requires submission of a plan to increase percentage. A monthly progress report is required.	Sec. 677	<i>Executive</i>	Sec. 8-677. Reporting requirement is revised from a monthly report to a quarterly report.
			<i>Senate</i>	Sec. 677.
			<i>House</i>	Sec. 677. Reporting requirement is revised from a monthly report to a quarterly report. Added "when data becomes available" to subsection (3)(c).
			<i>Conference</i>	Sec. 677. Reporting requirement is revised from a monthly report to a quarterly report. Added "when data becomes available" to subsection (3)(c).
140.	Benefits from Other States and Eligibility. Requires the Department to confirm assistance program applicants are not receiving benefits from another state; to confirm the address on the application; to explore new eligibility limitations, including a cap of \$200,000 on the value of a home; and to obtain updated phone numbers for those receiving medical assistance.	Sec. 686	<i>Executive</i>	Sec. 8-686.
			<i>Senate</i>	Sec. 686.
			<i>House</i>	Sec. 686.
			<i>Conference</i>	Sec. 686.

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141.	Public Assistance Data Reporting. The DHHS shall issue quarterly reports beginning January 1, 2014 on FIP, SDA, FAP, Medicaid, and SER recipients. Special requirements for FIP include the PATH work program, truancy, sanctions and lifetime limits.	Sec. 687	<i>Executive</i>	Sec. 8-687. Subsection 4 requiring reporting from the department notification is not included.
			<i>Senate</i>	Sec. 687.
			<i>House</i>	Sec. 687.
			<i>Conference</i>	Sec. 687.
142.	Multicultural Contracts. (1) Permits the Department to require each contractor to provide information on performance related metrics that may include, but are not limited to: each contractor or subcontractor shall (a) have a mission consistent with the purpose of multicultural integration funding, (b) validate that all subcontractors share the mission of the agency being funded, (c) shall demonstrate cost effectiveness, (d) ensure their ability to utilize private dollars to enhance services, and (e) provide reports on number of clients served, units of services provided and ability to meet goals. (2) Directs that the Department require a report from contractors receiving funding 60 days after the end of the contract period including specific information as listed in the boilerplate. (3) Requires DCH and DHS to form a workgroup to consider moving towards competitive bidding and including accreditation in contractor specifications. Contractors required to provide data in this section must be invited to participate in the workgroup.	Sec. 695	<i>Executive</i>	Not included.
			<i>Senate</i>	Moved to Sec. 295.
			<i>House</i>	Moved to Sec. 295.
			<i>Conference</i>	Moved to Sec. 295.
	<u>CHILDREN'S SERVICES AGENCY-JUVENILE JUSTICE</u>			
143.	Juvenile Justice Private Contract Changes. Department shall not alter the terms of any signed contract with a private residential facility serving children under State or court supervision without written consent from a representative of	Sec. 701	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 701.
			<i>House</i>	Sec. 701.

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		FY 2015-16 PA 84		FY 2016-17 Changes
	the private residential facility.		<i>Conference</i>	Sec. 701.
144.	Regional Detention Services Cost. If alternative regional detention services do not meet State legislative requirements, counties must pay 50% of the costs.	Sec. 706	<i>Executive</i>	Sec. 8-706.
			<i>Senate</i>	Sec. 706.
			<i>House</i>	Sec. 706.
			<i>Conference</i>	Sec. 706.
145.	Child Care Fund Reporting. For reimbursement of child care fund expenditures, counties are required to submit Department-developed reports to enable the Department to document potential Federally claimable expenditures.	Sec. 707	<i>Executive</i>	Sec. 8-707.
			<i>Senate</i>	Sec. 707.
			<i>House</i>	Sec. 707.
			<i>Conference</i>	Sec. 707.
146.	Child Care Fund Service Plan. Counties must provide a service plan for child care fund expenditures by December 15 and submit the plan by October 15 of the current fiscal year for approval. DHHS must notify the counties within 30 days as to whether the plan was approved.	Sec. 708	<i>Executive</i>	Sec. 8-708. Subsection (2) reporting requirement is not included.
			<i>Senate</i>	Sec. 708.
			<i>House</i>	Sec. 708. Subsection (2) is changed by adding " If 1 or more Michigan counties do not submit a service spending plan to the department by October 1 of the current fiscal year"

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			<i>Conference</i>	Sec. 708. Modified subsection (1): " As a condition of receiving funds appropriated in part 1 for the child care fund line item, by December 15 of the current fiscal year, counties shall have an approved service spending plan for the current fiscal year. Counties must submit the service spending plan to the department by October 1 of the current fiscal year for approval. Upon submission of the county service spending plan, the department shall approve within 30 calendar days after receipt of a properly completed service plan that complies with the requirements of the social welfare act, 1939 PA 280, MCL 400.1 to 400.119b. The department shall notify and submit county service spending plan revisions to any county whose county service spending plan is not accepted upon initial submission. The department shall not request any additional revisions to a county service spending plan outside of the requested revision notification submitted to the county by the department. The department shall notify a county within 30 days after approval that its service plan was approved." Added the following to the end of subsection (2): " The report shall include the number of county service spending plans that were not approved as first submitted by the counties, as well as the number of plans that were not approved by the department after being resubmitted by the county with the first revisions that were requested by the department."
147.	Closure of Maxey Training School. The DHHS shall close of the public juvenile justice facility by October 15 and the transfer of youth to other placements by October 1. There is a prohibition on private and other public agencies from rejecting the transferred youth and establishes a reimbursement rate. A quarterly status report is due to the Legislature.	Sec. 709	<i>Executive</i>	Sec. 8-709. Subsections (1), (2), and (5) are not included. Subsections (1) and (2) detail the closure of the W.J. Maxey Training School. Subsection (5) details the quarterly reporting requirement.
			<i>Senate</i>	Sec. 709. Subsections (1) and (2) not included.
			<i>House</i>	Sec. 709. Subsections (1) and (2) not included. Subsection (3) has changed to from quarterly to annually.

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			<i>Conference</i>	Sec. 709. Subsections (1) and (2) not included. Subsection (3) has changed to from quarterly to annually.
148.	Behavioral Health Study. Requires the Department to report to the Legislature on the outcomes of a contract with a third-party to complete a comprehensive study of the State's juvenile detainees.	Sec. 711	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 711. Subsection (1) adds the phrase "Unless provided in the previous fiscal year" to the first line.
			<i>Conference</i>	Not included.
149.	Juvenile Justice Facility Closure. The Department shall notify the Legislature at least 30 days before closing or making any change in the status, including the licensed bed capacity and operating bed capacity, of a State juvenile justice facility.	Sec. 719	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 719.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
150.	Residential Placement of Last Resort. The Department shall provide a 30-day notice to the Legislature prior to closing or making any change in a State facility's status.	Sec. 721	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 721.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 721.
<u>FIELD OPERATIONS AND SUPPORT SERVICES</u>				
151.	Centers for Independent Living. Funding for the Centers for Independent Living must be used according to Federal guidelines, and the Department shall establish criteria for contracts with service providers. Department may leverage	Sec. 801	<i>Executive</i>	Sec. 8-801.
			<i>Senate</i>	Sec. 801. Inserted "the general operations of" after first "support" in subsection (1). Deleted "core" in subsection (1).

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		FY 2015-16 PA 84		FY 2016-17 Changes
	Federal funding with the appropriation to the CILs.		<i>House</i>	Sec. 801.
			<i>Conference</i>	Sec. 801. Inserted "the general operations of" after first "support" in subsection (1). Deleted "core" in subsection (1).
152.	Funding for Vocational Rehabilitation. The Michigan rehabilitation services shall work collaboratively with the bureau of services for blind persons, service organizations, and government entities to identify qualified match dollars to maximize use of available federal vocational rehabilitation funds.	Sec. 802	<i>Executive</i>	Sec. 8-802.
			<i>Senate</i>	Sec. 802.
			<i>House</i>	Sec. 802.
			<i>Conference</i>	Sec. 802.
153.	MRS Audit and Fund Availability. The appropriation to MRS is contingent upon the resolution of deficiencies identified in an audit from the Auditor General. Also requires quarterly status reports to the Legislature on the Department's progress.	Sec. 803	<i>Executive</i>	Sec. 8-803. Modified to remove the reference to the "most recent auditor general report". Added "improved the"
			<i>Senate</i>	Sec. 803. Modified to remove the reference to the "most recent auditor general report". Simplified reporting language.
			<i>House</i>	Sec. 803. Modified to remove the reference to the "most recent auditor general report". Added "improve".
			<i>Conference</i>	Sec. 803. Modified to remove the reference to the "most recent auditor general report". Added "improve".
154.	Agricultural Worker Rehabilitation. Appropriates \$50,000 to allow additional Federal match funds to help farm workers with disabilities.	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 804.
			<i>House</i>	Not included.

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			<i>Conference</i>	Sec. 804. Replaced section with: " From the funds appropriated in part 1 for Michigan rehabilitation services, the department shall allocate \$50,000 along with available federal match to support the provision of vocational rehabilitation services to eligible agricultural workers with disabilities. Authorized services shall assist agricultural workers with disabilities in acquiring or maintaining quality employment and independence."
155.	Order of Selection. Language states Legislative intent that the State shall not implement an order of selection for vocational and rehabilitative services.	Sec. 805	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 805.
			<i>House</i>	Sec. 805.
			<i>Conference</i>	Sec. 805.
156.	Service Contracts. Language states that the Department must allocate funding for community-based rehabilitation organizations to provide support services.	Sec. 806	<i>Executive</i>	Sec. 8-806. Removed the word "accredited".
			<i>Senate</i>	Sec. 806.
			<i>House</i>	Sec. 806. Replaced the word "contracts" with "authorizations" Removed the word "accredited".
			<i>Conference</i>	Sec. 806. Replaced the word "contracts" with "authorizations" Removed the word "accredited".
157.	Food for the Elderly. \$350,000 is appropriated to Elder Law of Michigan to assist the State's elderly population participate in the food assistance program through MiCAFE.	NEW HOUSE SECTION	<i>Executive</i>	Sec. 8-1423.
			<i>Senate</i>	Sec. 1423.
			<i>House</i>	Moved to Sec. 807. Replaced "to participate" with "in participating". Changed "screen" to "screening".
			<i>Conference</i>	Moved to Sec. 807. Replaced "to participate" with "in participating". Changed "screen" to "screening".

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		FY 2015-16 PA 84		FY 2016-17 Changes
158.	Vehicle Repairs. Places a limit of \$500 on vehicle repairs, with exceptions up to \$900. Also requires an annual report to the Legislature by November 30.	Sec. 825	<i>Executive</i>	Sec. 8-825.
			<i>Senate</i>	Sec. 825.
			<i>House</i>	Sec. 825.
			<i>Conference</i>	Sec. 825.
159.	Out-Station Eligibility Waivers. Department shall maintain out-station eligibility workers at sites unless the site requests the program be discontinued. The Department shall approve that contracts for any agency that requests a donated funds position and is able to provide the matching funds for Federal funding.	Sec. 850	<i>Executive</i>	Sec. 8-850. Modified subsection (1), (2), and did not include subsection (6). Inserted "adult placement and independent living settings, federal qualified health clinics," after "nursing homes" in (1). Subsection (2) revises language from "any agency that requests a donated funds position and is..." to "agencies that are..." and does not include the part of subsection (2) that details the citation of federal statute or regulation that would allow the department to deny a donated funds position. Subsection (6) stipulates that by Fiscal Year 2016 the department may increase the number of donated funds FTEs by 200.0.
			<i>Senate</i>	Sec. 850. Subsection (6) adds this clause: " By March 1 of the current fiscal year, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office detailing information on the donated funds positions including the total number of occupied positions, the total private contribution of the positions, and the total cost to the state for any non-salary expenditure for the donated funds position employees."

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		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>House</i>	Sec. 850. Modified subsection (1), (2), and did not include subsection (6). Inserted "adult placement and independent living settings, federal qualified health clinics," after "nursing homes" in (1). Subsection (2) revises language from "any agency that requests a donated funds position and is..." to "agencies that are..." and does not include the part of subsection (2) that details the citation of federal statute or regulation that would allow the department to deny a donated funds position. Subsection (6) stipulates that by Fiscal Year 2016 the department may increase the number of donated funds FTEs by 200.0.
			<i>Conference</i>	Sec. 850. Subsection (1) modified by inserting: "Inserted "adult placement and independent living settings, federal qualified health clinics," after "nursing homes". Replaced current subsection (6) with: "By March 1 of the current fiscal year, the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office detailing information on the donated funds positions including the total number of occupied positions, the total private contribution of the positions, and the total cost to the state for any non-salary expenditure for the donated funds position employees."
	<u>BEHAVIORAL HEALTH SERVICES</u>			
160.	Community Mental Health Services Program (CMHSP) Contractual Requirements. Defines the Community Mental Health system as being under full authority and responsibility of local CMHSPs or PIHPs. Sets requirements for each CMHSP and PIHP to operate in accordance with the Mental Health Code, 1974 PA 258, MCL 330.1001 to 330.2106, the Medicaid provider manual, Federal Medicaid waivers, and all other applicable Federal and State laws.	Sec. 901	<i>Executive</i>	Sec. 8-901.
			<i>Senate</i>	Sec. 901.
			<i>House</i>	Sec. 901.
			<i>Conference</i>	Sec. 901.

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161.	<p>Authorization of Funding to CMHSPs. (1) Requires final authorizations to CMHSPs or PIHPs be made upon execution of contracts with the Department and include: an approved plan and budget, policies governing the responsibilities of both parties, language invalidating the contract if the total contracted amounts exceed appropriations. (2) Requires report to the Legislature on any new or amended contracts that affect rates or expenditures. (3) Report shall include information about the changes and their effects on rates and expenditures.</p>	Sec. 902	<i>Executive</i>	Sec. 8-902.
			<i>Senate</i>	Sec. 902. Replaced "enacted" with "entered into" in subsection (2)(a) and (2)(b).
			<i>House</i>	Sec. 902.
			<i>Conference</i>	Sec. 902. Inserted "the department has entered into" after "contracts" in (2) (a) and (2) (b). Deleted "are enacted" in (2) (a) and (2) (b).
162.	<p>Reporting of Data by CMHSPs. (1) Requires report to the Legislature on services provided through the community mental health system by May 31 of each fiscal year. (2) Report to include relevant information about: (a) recipient demographics, (b) per capita expenditures (c) financial information, (d) service outcomes, (e) access to services including (i) number of people receiving services and (ii) number of people requesting but not receiving services. (f) Number of second opinions, (g) appropriateness of services provided, (h) lapses and carry forwards during current fiscal year (i) contracts for mental health services entered into by CMHSPs or specialty prepaid health plans, including (i) The amount of the contract, organized by type of service provided. (ii) Payment rates, organized by the type of service provided. (iii) Administrative costs for services provided to CMHSPs or specialty prepaid health plans, and (j) Medicaid managed care</p>	Sec. 904	<i>Executive</i>	Sec. 8-904. Inserted new subsection (l) which requires the report to include substance use disorder, prevention, education and treatment program expenditure information by agency to subsection (2). Inserted new subsection (m) which requires the report to include substance use disorder, prevention, education and treatment program expenditure information per client agency to subsection (2). Inserted new subsection (n) which requires the report to include substance use disorder, prevention, education and treatment program services provided agency to subsection (2). Inserted new subsection (o) which requires the report to include substance use disorder, prevention, education and treatment program collections data through first and third party payers agency to subsection (2).
			<i>Senate</i>	Sec. 904.

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	<p>and Healthy Michigan Plan information including (i) expenditures for CMH Medicaid managed care services. (ii) expenditures and utilization information for each service category. (iii) performance information, and (k) administrative expenditures including a breakout of salary, benefits and pensions of executive level staff. (3) Requires the Department to include data reporting requirements in the annual contracts with each CMHSP or specialty prepaid health plan. (4) Requires the Department to ensure that all data is complete and consistent.</p>		<i>House</i>	<p>Sec. 904. Inserted "in total and" after "expenditures" in (2)(b). Replaced "client group" with "diagnosis group, service category," in (2)(c). Changed "fund source" to "reimbursement eligibility" in (2)(c). Deleted third "and" in (2)(c). Replaced "service category" with "state appropriated non-Medicaid mental health services, local funding, and other fund sources" in (2)(c). Deleted "General fund expenditures should reflect those funds used to cover uninsured individuals including Medicaid spenddowns" in (2)(c). Deleted (2)(g), (2)(i), and (2)(j). Inserted new subsection (j) which requires the report to include substance use disorder, prevention, education and treatment program expenditure information by agency to subsection (2). Removed reference to subcontractor and administrative expenditures by CMH entities. Inserted new subsection (k) which requires the report to include substance use disorder, prevention, education and treatment program expenditure information per client agency to subsection (2). Inserted new subsection (l) which requires the report to include substance use disorder, prevention, education and treatment program services provided agency to subsection (2). Removed reference to subcontractors. Inserted new subsection (m) which requires the report to include substance use disorder, prevention, education and treatment program collections data through first and third party payers agency to subsection (2). Removed reference to subcontractor.</p>
			<i>Conference</i>	<p>Sec. 904. Inserted "in total and" after "expenditures" in (2)(b). Replaced "client group" with "diagnosis group, service category," in (2)(c). Changed "fund source" to "reimbursement eligibility" in (2)(c). Deleted third "and" in (2)(c). Replaced "service category" with "state appropriated non-Medicaid mental health services, local funding, and other fund sources" in (2)(c). Deleted "General fund expenditures should reflect those funds used to cover uninsured individuals including Medicaid spenddowns" in (2)(c). Deleted (2)(g), (2)(i), (2)(j)(i) and (2)(j)(ii). Relettered remaining sections.</p>

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163.	State Disability Assistance Substance Use Disorder Services Program. (1) Requires State Disability Assistance Substance Use Disorder Services Program funding be used for per diem room and board payments in substance use disorder residential facilities. (2) States that licensed substance use disorder service providers will be reimbursed at a rate equivalent to that paid by the Department of Human Services to adult foster care providers. Accredited programs are to be reimbursed at the personal care rate, while all others are to be reimbursed at the domiciliary care rate.	Sec. 906	<i>Executive</i>	Sec. 8-906.
			<i>Senate</i>	Sec. 906.
			<i>House</i>	Sec. 906.
			<i>Conference</i>	Sec. 906.
164.	Contracting with Substance Use Disorder Coordinating Agencies (CAs); Establishment of Fee Schedule. (1) Directs that non-Medicaid substance use disorder funds be paid out through contracts with local CAs or designated service providers. Requires coordination between CAs and CMHSPs or PIHPs for dually diagnosed clients. (2) Requires the Department to establish managing entity fee schedules and charge participants on ability to pay. (3) States intent of Legislature that managing entities continue efforts to collaborate on delivery of services to those with mental illness and substance use disorder diagnoses.	Sec. 907	<i>Executive</i>	Sec. 8-907.
			<i>Senate</i>	Sec. 907.
			<i>House</i>	Sec. 907.
			<i>Conference</i>	Sec. 907.
165.	Reporting of Data by Substance Use Disorder CAs. (1) Requires report on substance use disorder prevention, education, and treatment programs by April 1 of the current fiscal year. Data to include (a) expenditure information by agency, (b) expenditure information per client (c) services provided, and (d) collections data through first and third party payers. (2) Requires the Department to ensure that data is complete and consistent.	Sec. 908	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 908.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 908.
166.	Substance Use Disorder Treatment for Certain Public Assistance Recipients. Directs the Department to assure that substance use disorder treatment is provided to public	Sec. 910	<i>Executive</i>	Sec. 8-910.
			<i>Senate</i>	Sec. 910. Changed "assure" to "ensure".

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	assistance recipients and applicants who are required to obtain such services as a condition of eligibility for public assistance.		<i>House</i>	Sec. 910.
			<i>Conference</i>	Sec. 910. Changed "assure" to "ensure".
167.	Jail Diversion Services. (1) Directs the Department to ensure that each contract with a CMHSP or PIHPS requires the CMHSP or PIHP to implement programs to encourage diversion of individuals with mental illness, emotional impairment, or developmental disabilities from jail incarceration. (2) Directs each CMHSP or PIHP to have jail diversion services and work toward establishing working relationships with law enforcement and justice system personnel; written interagency agreements delineating responsibilities and procedures for local jail diversion efforts are encouraged.	Sec. 911	<i>Executive</i>	Sec. 8-911.
			<i>Senate</i>	Sec. 911.
			<i>House</i>	Sec. 911.
			<i>Conference</i>	Sec. 911.
168.	Salvation Army Harbor Light. Requires the Department to contract directly with the Salvation Army Harbor Light program to provide non-Medicaid substance use disorder services.	Sec. 912	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 912. Inserted "if the local coordinating agency or the Department confirm the Salvation Army harbor light program meets the standard of care. The standard of care shall include, but is not limited to, utilization of the medication assisted treatment option" after "services".
			<i>House</i>	Sec. 912.
			<i>Conference</i>	Sec. 912. Inserted "if the local coordinating agency or the Department confirm the Salvation Army harbor light program meets the standard of care. The standard of care shall include, but is not limited to, utilization of the medication assisted treatment option" after "services".
169.	Reporting on Mental Health Capitation Rates. Requires the Department to provide a monthly report on amount of funding paid to PIHPs for the Medicaid managed mental health care	Sec. 918	<i>Executive</i>	Sec. 8-918.
			<i>Senate</i>	Sec. 918.

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	program. Report shall include PIHPs spending, caseloads, and a year-to-date summary of eligibles and expenditures.		<i>House</i>	Sec. 918.
			<i>Conference</i>	Sec. 918.
170.	Timely Payment by PIHPs. Requires PIHPs to adhere to timely claims processing and payment procedure for Medicaid claims submitted by health professionals and facilities. Lists timely claim processing requirements.	Sec. 924	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 924.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
171.	Contingency Funding Using Local Funds as State Match. Each PIHP shall provide, from internal resources, local funds to be used as a bona fide part of the State match required under the Medicaid program in order to increase capitation rates for PIHPs.	Sec. 928	<i>Executive</i>	Sec. 8-928. Deleted "a bona fide".
			<i>Senate</i>	Sec. 928.
			<i>House</i>	Sec. 928. Deleted "a bona fide".
			<i>Conference</i>	Sec. 928. Deleted "a bona fide". Inserted new subsection (2) stating legislative intent that lapsed Medicaid mental health funding shall be redistributed as a reimbursement of local funds on a proportional basis. Requires a report by April 1 on the lapse by PIHP from the previous year and the project lapse by PIHP in the current fiscal year.
172.	Requirement Counties Make CMHSP Payments on At Least a Quarterly Basis. Directs counties to pay the matching funds for mental health services to CMHSPs in equal installments on not less than a quarterly basis throughout the fiscal year, with the first payment being made by October 1 of the current fiscal year.	Sec. 935	<i>Executive</i>	Sec. 8-935.
			<i>Senate</i>	Sec. 935.
			<i>House</i>	Sec. 935.
			<i>Conference</i>	Sec. 935.
173.	Reallocation or Withdrawal of CMHSP Funding. (1) Requires the department to do both of the following: (a) review expenditures for each CMHSP and encourage those with a	NEW CONF. SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.

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	projected surplus to concur with the recommendation to reallocate funds to those with projected shortfalls, and (b) withdraw funds from a CMHSP is those funds were expended in a manner not provided for in the approved contract. (2) A CMHSP that has its funding allocation transferred out or withdrawn is not eligible for any additional funding reallocations. (3) Requires the department to notify the chairs of the appropriations subcommittee when a request is made and when the department grants approval for reallocation or withdraw of funds from a CMHSP. Requires a report by September 30.		<i>House</i>	Not included.
			<i>Conference</i>	Sec. 940.
174.	Spend-down Cost Support. Appropriates no less than \$3.0 million to support costs related to Medicaid spend-down beneficiaries having to satisfy monthly deductible requirements.	NEW CONF. SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 941.
175.	Termination of CMHSP Services. Requires a CMHSP to provide 30 days' notice before reducing, terminating, or suspending services, with the exception of services authorized by a physician that are no longer medically necessary.	NEW CONF. SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 942.
176.	Medicaid Coverage for Autism Spectrum Disorders. Directs that treatment of autism spectrum disorders be covered by the Medicaid program for Medicaid eligible children as defined in the Federally approved Medicaid State plan.	Sec. 958	<i>Executive</i>	Sec. 8-958. Changed "such alternatives" to "these services".
			<i>Senate</i>	Sec. 958. Changed "such alternatives" to "these services".
			<i>House</i>	Sec. 958. Changed "such alternatives" to "these services".
			<i>Conference</i>	Sec. 958. Changed "such alternatives" to "these services".

DEPARTMENT OF HEALTH AND HUMAN SERVICES

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
177.	<p>Autism Projects Funding. Allocates funding for university autism programs through a grant process in order to increase the number of ABA therapists, diagnostic centers, treatment centers, employment programs and increase the clinical expertise of health care providers.</p>	Sec. 960	<i>Executive</i>	Sec. 8-960. Language rewritten: (1) Allocates funding for university autism programs through a grant process in order to increase the number of ABA therapists, diagnostic services provided, and employment of those with autism. (2) Outcomes and performance measures must include (a) increase in the number of ABA therapists, (b) autism diagnostic services provided, and (c) employment rate of employment program participants.
<i>Senate</i>			Sec. 960.	
<i>House</i>			Sec. 960. Language rewritten: (1) Allocates funding for university autism programs through a grant process in order to increase the number of ABA therapists, diagnostic services provided, and employment of those with autism. (2) Requires universities who accept grants to track and report where individuals who have completed applied behavioral analysis training are initially employed. (3) Outcomes and performance measures must include (a) increase in the number of ABA therapists, (b) autism diagnostic services provided, (c) employment rate of employment program participants, and (d) the employment rate of applied behavioral analysts trained through the university autism programs.	
<i>Conference</i>			Sec. 960. Language rewritten: (1) Allocates funding for university autism programs through a grant process in order to increase the number of ABA therapists, diagnostic services provided, and employment of those with autism. (2) Requires universities who accept grants to track and report where individuals who have completed applied behavioral analysis training are initially employed. (3) Outcomes and performance measures must include (a) increase in the number of ABA therapists, (b) autism diagnostic services provided, (c) employment rate of employment program participants, and (d) the employment rate of applied behavioral analysts trained through the university autism programs.	

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
178.	Deemed Status for CMHSPs, PIHPs, and Subcontractors. (1) Directs that mental health subcontractors be deemed in compliance with program review and audit requirements if accredited by national accrediting agencies, contingent upon Federal approval. (2) Requires report to subcommittees, fiscal agencies, and State Budget Office report listing subcontractors in compliance, list of requirements the entities are in compliance with, and the accrediting agencies involved. (3) Requires the Department to comply with State and Federal law and not initiate actions that would negatively impact beneficiary safety. (4) Defines "national accrediting agency".	Sec. 994	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 994.
			<i>House</i>	Sec. 994.
			<i>Conference</i>	Sec. 994.
179.	Mental Health Diversion Council Recommendations. Provides \$4.35 million in funding for the Mental Health Diversion Council Recommendations.	Sec. 995	<i>Executive</i>	Sec. 8-995.
			<i>Senate</i>	Sec. 995.
			<i>House</i>	Sec. 995.
			<i>Conference</i>	Sec. 995.
180.	Distribution of Substance Use Disorder Block Grant Funds. Directs that the distribution of substance use disorder block grant funds be based on the most recent Federal census.	Sec. 997	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 997.
			<i>Conference</i>	Sec. 997.
181.	Distribution of GF to CMHSPs. Requires that, if the Department decides to use census data to distribute GF to CMHSPs, they must use the most recent Federal census data available.	Sec. 998	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 998.
			<i>House</i>	Sec. 998.
			<i>Conference</i>	Sec. 998.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
182.	Fetal Alcohol Syndrome Services. (1) Directs the Department to work to continue developing an outreach program on fetal alcohol syndrome services. (2) Requires the Department to explore Federal grant funding to address FAS.	Sec. 1002	<i>Executive</i>	Moved to Sec. 8-1313.
			<i>Senate</i>	Moved to Sec. 1313.
			<i>House</i>	Moved to Sec. 1313. Inserted ", targeting health promotion, prevention, and intervention as described in the Michigan fetal alcohol spectrum disorders five year plan 2015-2020" after "services" in subsection (1).
			<i>Conference</i>	Moved to Sec. 1313. Inserted ", targeting health promotion, prevention, and intervention as described in the Michigan fetal alcohol spectrum disorders five year plan 2015-2020" after "services" in subsection (1).
183.	Consultation with CMHSPs. Directs the Department to notify the Michigan Association of Community Mental Health Boards about policies that will affect CMHSPs or PIHPs.	Sec. 1003	<i>Executive</i>	Sec. 8-1003.
			<i>Senate</i>	Sec. 1003.
			<i>House</i>	Sec. 1003.
			<i>Conference</i>	Sec. 1003.
184.	Statewide Uniformity in PIHP Capitation Rates. (1) Directs the Department to continue to work with the workgroup to achieve more uniformity in capitation payments made to PIHPs. (2) Requires Department to provide workgroup's progress report to the subcommittees, the fiscal agencies, and the State Budget Director by March 1.	Sec. 1004	<i>Executive</i>	Sec. 8-1004. Replaced "continue to work with the workgroup created to make recommendations" with "report on implementation of recommendations" in (1). Inserted "by March 1 st of the current fiscal year" after "PIHPs" in (1). Deleted subsection (2). Removed remaining numbering.
			<i>Senate</i>	Not included.

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>House</i>	Sec. 1004. Replaced "continue to work with the workgroup created to make recommendations" with "report on implementation of recommendations" in (1). Inserted "to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget director by March 1 of the current fiscal year" after "PIHPs" in (1). Deleted subsection (2). Removed remaining numbering.
			<i>Conference</i>	Sec. 1004. Language rewritten to read: The department shall provide the senate and house appropriations subcommittee on the department budget, the senate and house fiscal agencies, and the state budget office any rebased formula changes to either Medicaid behavioral health services or non-Medicaid mental health services 90 days before implementation. The notification shall include a table showing the changes in funding allocation by PIHP for Medicaid behavioral health services or by CMHSP for non-Medicaid mental health services.
185.	Special Projects including NGRI. Allows the Department to contract directly with service providers for the purposes of special projects involving high-need children or adults, including the not guilty by reason of insanity population.	Sec. 1005	<i>Executive</i>	Sec. 8-1005.
			<i>Senate</i>	Sec. 1005.
			<i>House</i>	Sec. 1005.
			<i>Conference</i>	Sec. 1005.
186.	CMHSP Cost Data Report. Requires the Department to provide the most recent cost data information from CMHSPs on how appropriated funds were expended by June 1 of the current fiscal year. Lists the minimum amount of information to be included.	Sec. 1006	<i>Executive</i>	Sec. 8-1006.
			<i>Senate</i>	Sec. 1006.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
187.	Children's Behavioral Action Team. (1) Requires the Department to establish a psychiatric residential treatment facility and Children's Behavioral Action Team to provide additional care to high need youth. (2) Outcomes and performance measures must include (a) rate of rehospitalization for youth in the program, and (b) measured change in the child and adolescent functional assessment scale for youth in the program.	Sec. 1007	<i>Executive</i>	Sec. 8-1007. Changed "establish" to "maintain" in (1).
			<i>Senate</i>	Sec. 1007. Changed "establish" to "maintain" in (1).
			<i>House</i>	Sec. 1007. Changed "establish" to "maintain" in (1).
			<i>Conference</i>	Sec. 1007. Changed "establish" to "maintain" in (1).
188.	PIHP Administrative Cost. Requires PIHPs to reduce administrative costs by ensuring efficiencies, which send the maximum possible dollars to direct services. These efficiencies are to include limiting the duplication of administration, minimizing PIHP delegated services, taking an active role in managing mental health care. Additionally PIHPS shall ensure direct service rate variances are related to quantifiable measures, and shall promote fair and adequate direct care reimbursement when possible.	Sec. 1008	<i>Executive</i>	Sec. 8-1008.
			<i>Senate</i>	Sec. 1008.
			<i>House</i>	Sec. 1008.
			<i>Conference</i>	Sec. 1008.
189.	Workgroup on Staff Recruitment and Retention. (1) Requires the Department to work with PIHPs to analyze the challenges of recruitment and retention of staff who provide Medicaid funded community living supports, personal care services, respite services, skill building services, and other similar services. The workgroup will consider a plan to attract and retain staff. (2) States required membership of the workgroup. (3) Requires a status report on the workgroup's efforts.	Sec. 1009	<i>Executive</i>	Sec. 8-1009. Inserted "provide a progress report on implementation of recommendations from" after "shall" in (1). Inserted "by May 1 of the current fiscal year" after "services" in (1). Deleted "The department workgroup must consider ways to attract and retain staff to provide Medicaid funded supports and services" in (1). Deleted subsection (2). Deleted subsection (3). Removed remaining numbering.
			<i>Senate</i>	Sec. 1009. Replaced first "the" with "By October 1 of the current fiscal year the" in subsection (3).

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>House</i>	Sec. 1009. Inserted "provide a progress report on the implementation of recommendations from" after "shall" in (1). Inserted "by May 1 of the current fiscal year to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget director" after "services" in (1). Deleted "The department workgroup must consider ways to attract and retain staff to provide Medicaid funded supports and services" in (1). Deleted subsection (2). Deleted subsection (3). Removed remaining numbering.
			<i>Conference</i>	Sec. 1009. Replaced first "the" with "By March 1 of the current fiscal year the" in subsection (3).
190.	Redistribution of Lapsed PIHP and CMHSP Funds. States legislative intent that lapsed funds be redistributed to individual CMHSPS based on the current year community mental health non-Medicaid services distribution formula. Requires a report by April 1 on PIHP lapses from the previous fiscal year and projected PIHP lapses for the current fiscal year.	Sec. 1010	<i>Executive</i>	Sec. 8-1010. Language rewritten to read "From the funds appropriated in part 1 for behavioral health program administration, \$2,000,000.00 shall be allocated to address the implementation of court ordered Assisted Outpatient Treatment associated with Public Act 497 of 2004".
			<i>Senate</i>	Sec. 1010.
			<i>House</i>	Sec. 1010. Language rewritten to read "From the funds appropriated in part 1 for behavioral health program administration, \$2,000,000.00 shall be allocated to address the implementation of court ordered assisted outpatient treatment as provided under chapter 4 of the mental health code, 1974 PA 258, MCL 330.1400 to 330.1491."
			<i>Conference</i>	Sec. 1010. Language rewritten to read "From the funds appropriated in part 1 for behavioral health program administration, up to \$2,000,000.00 shall be allocated to address the implementation of court ordered assisted outpatient treatment as provided under chapter 4 of the mental health code, 1974 PA 258, MCL 330.1400 to 330.1491."

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Boilerplate Summary				
		FY 2015-16 PA 84		FY 2016-17 Changes
191.	Redistribution of Lapsed PIHP and CMHSP Funds. States legislative intent that lapsed funds be redistributed to individual CMHSPS based on the current year community mental health non-Medicaid services distribution formula. Requires a report by April 1 on PIHP lapses from the previous fiscal year and projected PIHP lapses for the current fiscal year.	NEW HOUSE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1010.
			<i>House</i>	Sec. 1011.
			<i>Conference</i>	Not included.
192.	SENATE-Direct Care Worker Wage Increase. (1) Requires the Department to work with PIHPs and actuaries to consider including state minimum wage increases that affect direct-care staff when setting Medicaid rates. (2) States legislative intent that Medicaid rate increase resulting from a minimum wage increase shall be passed through to the direct care staff. HOUSE-Direct Care Worker Wage Increase. (1) Requires the Department to work with PIHPs and actuaries to include state minimum wage increases that affect direct-care staff when setting Medicaid rates. (2) States legislative intent that Medicaid rate increase resulting from a minimum wage increase shall be passed through to the direct care staff	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1011.
			<i>House</i>	Sec. 920. Replaced “consider including” with “include” in subsection (1). Changed “increase in the” to “increased” in subsection (2).
			<i>Conference</i>	Sec. 920. Replaced “consider including” with “include” in subsection (1). Changed “minimum wage” to “and federal wage and compensation” in subsection (1). Changed “increase in the” to “increased” in subsection (2).
193.	Spend-Down Workgroup. (1) Directs the Department to create a workgroup to address the challenges of meeting spend-down requirements. Specifies the composition of the workgroup and requires the workgroup to address all of the following: (a) average number of individuals who do not meet	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1012.
			<i>House</i>	Not included.

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Boilerplate Summary				
		FY 2015-16 PA 84		FY 2016-17 Changes
	<p>their monthly Medicaid deductibles, (b) how the reduction in GF/GP investment for non-Medicaid services has affected a person's ability to meet their spend-down requirements, and (c) what is the protected level of income and how it compares to other states. (2) Requires a report on the workgroup's findings by September 30.</p>		<i>Conference</i>	<p>Sec. 1012. Replaced first "the" with "By September 30 of the current fiscal year, the" in subsection (1). Changed "conduct a workgroup to address" to "submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office addressing" in subsection (1). Replaced "The members of the workgroup shall include, but are not limited to, representatives from the medical services division within the department, PIHP network providers, CMHSPs, and members of the public. The workgroup" with "The report" in subsection (1). Changed "at minimum take into consideration and make recommendations on all" the "include, but not be limited to, in subsection (1). Replaced "Michigan" with "this state" in subsection (1)(a). Inserted new subdivision (1)(d) that reads "an action plan for implementation of any proposed changes," to subsection (1). Inserted new subdivision (1)(e) that reads "an estimate of the costs that may be incurred from adoption of recommendations included in the report" to "subsection (1). Deleted subsection (2). Removed remaining numbering.</p>
	<u>STATE PSYCHIATRIC HOSPITALS AND FORENSIC MENTAL HEALTH SERVICES</u>			
194.	<p>Collection of Third-Party Payments for Individuals in Institutions. Requires the Department to continue revenue recapture project. States that a portion of revenues collected through project efforts may be used for departmental costs and contractual fees and to improve ongoing departmental reimbursement management functions.</p>	Sec. 1051	<i>Executive</i>	Sec. 8-1051.
			<i>Senate</i>	Sec. 1051.
			<i>House</i>	Sec. 1051.
			<i>Conference</i>	Sec. 1051.
195.	<p>Gifts and Bequests. States that the purpose of gifts/bequests is to provide living enhancements for individuals residing at state operated facilities.</p>	Sec. 1052	<i>Executive</i>	Sec. 8-1052.
			<i>Senate</i>	Sec. 1052.

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Boilerplate Summary				
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>House</i>	Sec. 1052.
			<i>Conference</i>	Sec. 1052.
196.	Closures and Consolidations of State Hospitals and Centers. (1) Prohibits the Department from closing or consolidating facilities until CMHSPs or PIHPs have services in place for individuals housed in those facilities. (2) Requires a discharge plan for each individual currently in these facilities. (3) Requires that a closure plan be filed with the Legislature four months after certification of closure. (4) Directs that the remaining appropriations for a closed facility be transferred to the CMHSPs or specialty prepaid health plans responsible for providing services for individuals previously served by the facility.	Sec. 1055	<i>Executive</i>	Sec. 8-1055.
			<i>Senate</i>	Sec. 1055.
			<i>House</i>	Sec. 1055.
			<i>Conference</i>	Sec. 1055.
197.	Adjustments to Reflect Actual First and Third Party Revenue. Allows the Department to collect revenue for patient reimbursement from 1 st and 3 rd party payers to cover the cost of placement in State hospitals and centers. Authorizes the Department to adjust financing sources for patient reimbursement based on actual revenues earned. Allows revenue above expenditures to be carried forward into the subsequent fiscal year with approval of State Budget Director.	Sec. 1056	<i>Executive</i>	Sec. 8-1056.
			<i>Senate</i>	Sec. 1056.
			<i>House</i>	Sec. 1056.
			<i>Conference</i>	Sec. 1056.
198.	Hawthorn Center Appraisal. Requires the Department to work with DTMB to secure an appraisal of the Hawthorn Center and develop a proposal for the possible replacement of the facility at the same location or a new location.	NEW HOUSE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 1057.

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
			<i>Conference</i>	Sec. 1057. Language rewritten to read: The department shall work with the department of management and budget to evaluate the condition of the Hawthorn Center and the Caro Center, the cost effectiveness of improvements and investments and make recommendations to improve the quality of the facilities needed by the patients.
199.	Private Provision of Food and Custodial Services. Permits the Department to maintain a bid process to identify private contracts to provide food and custodial services at State hospitals.	Sec. 1058	<i>Executive</i>	Sec. 8-1058.
			<i>Senate</i>	Sec. 1058.
			<i>House</i>	Sec. 1058.
			<i>Conference</i>	Sec. 1058.
200.	Center for Forensic Psychiatry Expansion. (1) Directs the Department to open an eighth wing at the Center for Forensic Psychiatry in the current fiscal year. (2) Outcomes and performance measures must include at least (a) the average wait time for persons incompetent to stand trial before admission to the Center, (b) the average wait time for persons incompetent to stand trial at other State operated psychiatric facilities, (c) the number of persons waiting to receive services at the Center, and (d) the number of persons waiting to receive services at other State operated hospitals and centers.	NEW EXEC. SECTION	<i>Executive</i>	Sec. 8-1059.
			<i>Senate</i>	Sec. 1059. Replaced "in the current fiscal year" with "by April 1 of the current fiscal year" in subsection (1).
			<i>House</i>	Sec. 1059. Deleted ". The purpose of this program is" in (1). Changed "and" to "or" in (1).
			<i>Conference</i>	Sec. 1059. Deleted ". The purpose of this program is" in (1). Changed "and" to "or" in (1).

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
	<u>PUBLIC HEALTH ADMINISTRATION</u>			
201.	Diabetes/Kidney Health and Wellness Programming and Blue Cross Health Endowment Fund. Directs the Department to work with the Health Endowment Fund Corporation set up in the Blue Cross/Blue Shield Legislation (P.A. 3 and 4 of 2013) to explore ways to fund and evaluate current and future policies and programs.	Sec. 1101	<i>Executive</i>	Not included.
			<i>Senate</i>	Moved to Sec. 1225. Inserted "By December 1 of the current fiscal year the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office detailing the steps they have taken to work with the Michigan health endowment fund." after "programs."
			<i>House</i>	Moved to Sec. 1225.
			<i>Conference</i>	Moved to Sec. 1225. Inserted "It is the intent of the legislature that, by March 1 of the current fiscal year, the senate and house appropriations subcommittees on the department budget shall hold a joint hearing, for the purpose of a presentation by the Michigan health endowment fund corporation and the department, detailing the steps taken to work together, and to report on initiatives supported by the Michigan health endowment fund" after "programs."
202.	Healthy Exercise Program Pilot. Allocates \$1.0 million for a school children's healthy exercise program aimed at K-8 schoolchildren. No less than half of the funds will be granted for before- and after-school programs. Directs the Department to establish guidelines for program sites. States that program shall encourage local determination of site activities and inclusion of youth in decision-making regarding activities. States goals of program. Requires program sites to provide a 20% match. Directs the Department to seek financial support from private entities for the program.	Sec. 1102	<i>Executive</i>	Not included.
			<i>Senate</i>	Moved to Sec. 1226.
			<i>House</i>	Moved to Sec. 1226.
			<i>Conference</i>	Moved to Sec. 1226.

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Boilerplate Summary				
		FY 2015-16 PA 84		FY 2016-17 Changes
203.	Health and Wellness Initiative Criteria. Requires the Department to establish criteria for all Health and Wellness Initiatives. States some of the criteria, which must be included and requires that preference be given to programs that pull down match funding.	Sec. 1103	<i>Executive</i>	Not included.
			<i>Senate</i>	Moved to Sec. 1227.
			<i>House</i>	Moved to Sec. 1227.
			<i>Conference</i>	Moved to Sec. 1227.
<u>HEALTH POLICY</u>				
204.	Free Health Clinic Funding. Allocates \$250,000 be equally distributed to free health clinics throughout the State.	Sec. 1140	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 1140.
			<i>Conference</i>	Sec. 1140.
205.	Multi-Cultural Agencies. Directs the Department to continue to support multi-cultural agencies providing primary care services with funds appropriated in Part 1.	Sec. 1141	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
206.	Incentives for In-State Residencies. Directs the Department to continue to seek means to increase retention of in-state medical students to meet their primary care residency requirements in Michigan and to remain in Michigan to serve as primary care physicians. Encourages the Department to work with institutions of higher education.	Sec. 1142	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1142.
			<i>House</i>	Sec. 1142.
			<i>Conference</i>	Sec. 1142.
207.	Health Innovation Grants. Permits Department to award health innovation grants to public and private sector, allows the Department to receive and spend revenues and donations in this effort.	Sec. 1143	<i>Executive</i>	Sec. 8-1143.
			<i>Senate</i>	Sec. 1143.
			<i>House</i>	Sec. 1143.
			<i>Conference</i>	Sec. 1143.
208.	Federal State Innovation Model Grant Funding. (1) Directs the Department to allocate SIM Grand funding which supports the implementation of the health delivery system innovations. (2) Outcomes and performance measures to include (a) increasing the number of physician practices fulfilling medical home functions, and (b) reducing inappropriate health utilization. (3) Requires a report by March 1 and September 1 on the status of the program. (4) Outlines five standards that the Department must follow for creation of a data aggregator.	Sec. 1144	<i>Executive</i>	Sec. 8-1144. Replaced "over the next 4 years this" with "this" in subsection (1). Deleted subsection (4).
			<i>Senate</i>	Sec. 1144.
			<i>House</i>	Sec. 1144. Deletes "Over the next 4 years" in subsection (1). Deleted subsection (4).
			<i>Conference</i>	Sec. 1144. Deletes "Over the next 4 years" in subsection (1).
209.	I/T/U Facility Supplemental Payments. Directs that Indian Health Service, Tribal or Urban Indian Health Program (I/T/U) facilities receive the maximum amount allowable under Federal law for Medicaid services.	Sec. 1145	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1145. Replaced "assure that" with "work with". Inserted "to ensure that those facilities" after "entity".
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1145. Replaced "assure that" with "work with". Inserted "to ensure that those facilities" after "entity".

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	Boilerplate Summary			
		FY 2015-16 PA 84		FY 2016-17 Changes
210.	Michigan Blood. Allocates \$250,000 to Michigan Blood to offset tissue typing expenses, and expand services, associated with donor recruitment and collection services.	Sec. 1146	<i>Executive</i>	Sec. 8-1146.
			<i>Senate</i>	Sec. 1146.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1146.
211.	Opioid Fraud. Directs the Department to dedicate 1 FTE to coordinate with LARA, the Department of Attorney General and the Medicaid Health Plans to reduce fraud related to opioid prescribing within Medicaid. Requires a report by October 1 on the steps the Department has taken to coordinate with the entities listed above.	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1150.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1150. Changed "hired 1 FTE dedicated to coordinating" to "dedicate 1.0 FTE to coordinate". Inserted "all appropriate law enforcement agencies," after "general". Inserted "and to address other appropriate recommendations of the prescription drug and opioid abuse task force outlined in its report of October 2015" after second "Medicaid". Replaced "committees" with "subcommittees. Inserted ", and to address other appropriate recommendations of the task force" after second "prescribing".
212.	Opioid Addiction Treatment. Directs the Department to dedicate 1 FTE to coordinate with LARA, the Department of Attorney General and the Medicaid Health Plans to help inform Medicaid enrollees of medically appropriate treatment options for opioid addiction. Requires a report by October 1 on	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1151.
			<i>House</i>	Not included.

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	how the Department is ensuring Medicaid recipients are informed of all available treatment options, and shall include any potential barriers to treatment.		<i>Conference</i>	Sec. 1151. Changed "hired 1 FTE dedicated to coordinating" to "dedicate 1.0 FTE to coordinate". Inserted "all appropriate law enforcement agencies," after "general". Replaced "coordinating agencies" with "local substance use disorder agencies and addiction treatment providers". Changed "residents" to Medicaid beneficiaries". Inserted "and to address other appropriate recommendations of the prescription drug and opioid abuse task force outlined in its report of October 2015" after first "pain". Replaced "committees" with "subcommittees. Changed "recipients" to Beneficiaries". Inserted ", and to address other appropriate recommendations of the task force" after second "pain". Changed "eligible residents" to "beneficiaries".
	<u>EPIDEMIOLOGY AND INFECTIOUS DISEASE DISEASE CONTROL, PREVENTION AND EPIDEMIOLOGY</u>			
213.	Healthy Homes Funding. Allocates \$1.75 million for lead abatement of homes.	Sec. 1180	<i>Executive</i>	Sec. 8-1180.
			<i>Senate</i>	Sec. 1180.
			<i>House</i>	Sec. 1180. Inserted new subsection (2) which reads "By January 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director on the expenditures and activities undertaken by the lead abatement program in the previous fiscal year from the funds appropriated in part 1 for the healthy homes program. The report shall include, but is not limited to, a funding allocation schedule, expenditures by category of expenditure and by subcontractor, revenues received, description of program elements, and description of program accomplishments and progress".

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			<i>Conference</i>	Sec. 1180. Inserted new subsection (2) which reads "By January 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director on the expenditures and activities undertaken by the lead abatement program in the previous fiscal year from the funds appropriated in part 1 for the healthy homes program. The report shall include, but is not limited to, a funding allocation schedule, expenditures by category of expenditure and by subcontractor, revenues received, description of program elements, and description of program accomplishments and progress".
214.	Immunizations. Requires the Department to implement a plan to improve the State's adolescent immunization rates as well as work with statewide organizations to provide immunizations as well as education. Lists examples of organizations the Department should work with.	Sec. 1181	<i>Executive</i>	Sec. 8-1181.
			<i>Senate</i>	Sec. 1181.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
215.	Immunization Education. Directs the Department to provide one dollar in State contribution, for every four dollars in Private matching funds received, up to \$500,000, to provide and promote education about vaccinations.	Sec. 1182	<i>Executive</i>	Sec. 8-1182.
			<i>Senate</i>	Sec. 1182.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
216.	Zika Virus. Allocates \$150,000 for Zika virus education and outreach, prevention, detection, monitoring, and screening and testing as recommended by the CDC. Requires a quarterly report on public health issues in the state related to the Zika virus.	NEW HOUSE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.

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	<u>LOCAL HEALTH ADMINISTRATION AND GRANTS AND ADMINISTRATIVE SERVICES</u>			
217.	Cost Reimbursement to Local Health Departments (LHDs) for Services Related to 1993 P.A. 133. Requires that funds appropriated for the Abortion Informed Consent Act be used to reimburse LHDs for costs related to that purpose.	Sec. 1220	<i>Executive</i>	Sec. 8-1220.
			<i>Senate</i>	Sec. 1220.
			<i>House</i>	Sec. 1220.
			<i>Conference</i>	Sec. 1220.
218.	Penalty Upon LHD Separation. Allows the Department to assess a penalty from a local health department's operational account of up to 6.25% of that local health department's local public health operations funding for any county that seeks to separate from a district health department.	Sec. 1221	<i>Executive</i>	Sec. 8-1221.
			<i>Senate</i>	Sec. 1221.
			<i>House</i>	Sec. 1221.
			<i>Conference</i>	Sec. 1221.
219.	Allocation of Funds for Essential Local Public Health Services. (1) Prospective funding will be provided to LHDs to support immunizations, infectious disease control, STD control and prevention, hearing and vision services, food protection, public water supply, private groundwater supply, and sewage management. (2) LHDs will be held to contractual standards for these services. (3) Funding distribution will only be made to counties whose spending on these services in FY 2008-09 is at or above the amount spent in FY 1992-93.	Sec. 1222	<i>Executive</i>	Sec. 8-1222.
			<i>Senate</i>	Sec. 1222. Delete subsection (1) and subsection (2). Replaced "Distributions in subsection (1) shall be made only" with "Funds appropriated in part 1 for essential local public health services shall only be distributed" in (3). Changed "for the services described in subsection (1)" to "by local health departments to support immunizations, infectious disease control, sexually transmitted disease control and prevention, hearing screening, vision services, food protection, public water supply, private groundwater supply, and on-site sewage management" in (3). Remove remaining numbering.

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			<i>House</i>	Sec. 1222. Inserted new subsection (4) which reads "By December 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director on the planned allocation of the funds appropriated for essential local public health services.
			<i>Conference</i>	Sec. 1222. Inserted new subsection (4) which reads "By December 1 of the current fiscal year, the department shall provide a report to the house and senate appropriations subcommittees on the department budget, the house and senate fiscal agencies, and the state budget director on the planned allocation of the funds appropriated for essential local public health services.
220.	Volunteer Dental Program. (1) Requires funds to be allocated to the Michigan Dental Association for the administration of a volunteer dental program that shall provide services to the uninsured. (2) Not later than December 1 of the current fiscal year, the Department shall report the number of individual patients treated, number of procedures performed, and approximate total market value of those procedures from the immediately preceding fiscal year.	NEW EXEC. SECTION	<i>Executive</i>	Moved to Sec. 8-1223. Deleted second "and" in subsection (2). Inserted "and the state budget office" after "health policy" in subsection (2).
			<i>Senate</i>	Moved to Sec. 1223. Deleted second "and" in subsection (2). Inserted "and the state budget office" after "health policy" in subsection (2).
			<i>House</i>	Moved to Sec. 1223. Replaced "amounts" with "funds" in subsection (1). Changed "funds" to "\$150,000.00" in subsection (1). Deleted second "and" in subsection (2). Inserted "the senate and house fiscal agencies, and the state budget office" after "health policy" in subsection (2).
			<i>Conference</i>	Moved to Sec. 1223. Replaced "amounts" with "funds" in subsection (1). Changed "funds" to "\$150,000.00" in subsection (1). Deleted second "and" in subsection (2). Inserted "the senate and house fiscal agencies, and the state budget office" after "health policy" in subsection (2).

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221.	Mobile Dentistry Fees. Directs the Department to use funds collected for Mobile Dentistry Facility Permit Fees to offset the cost of the program.	NEW EXEC. SECTION	<i>Executive</i>	Moved to Sec. 8-1224.
			<i>Senate</i>	Moved to Sec. 1224.
			<i>House</i>	Moved to Sec. 1224.
			<i>Conference</i>	Moved to Sec. 1224.
222.	Diabetes/Kidney Health and Wellness Programming and Blue Cross Health Endowment Fund. Directs the Department to work with the Health Endowment Fund Corporation set up in the Blue Cross/Blue Shield Legislation (P.A. 3 and 4 of 2013) to explore ways to fund and evaluate current and future policies and programs.	NEW SENATE AND HOUSE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Moved to Sec. 1225. Inserted "By December 1 of the current fiscal year the department shall submit a report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, the senate and house policy offices, and the state budget office detailing the steps they have taken to work with the Michigan health endowment fund." after "programs.".
			<i>House</i>	Moved to Sec. 1225.
			<i>Conference</i>	Moved to Sec. 1225. Inserted "It is the intent of the legislature that, by March 1 of the current fiscal year, the senate and house appropriations subcommittees on the department budget shall hold a joint hearing for the purpose of a presentation by the Michigan health endowment fund corporation and the department, detailing the steps taken to work together, and to report on initiatives supported by the Michigan health endowment fund" after "programs."
223.	Healthy Exercise Program Pilot. Allocates \$1.0 million for a school children's healthy exercise program aimed at K-8 schoolchildren. No less than half of the funds will be granted for before- and after-school programs. Directs the Department to establish guidelines for program sites. States that program	NEW SENATE AND HOUSE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Moved to Sec. 1226.
			<i>House</i>	Moved to Sec. 1226.

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	shall encourage local determination of site activities and inclusion of youth in decision-making regarding activities. States goals of program. Requires program sites to provide a 20% match. Directs the Department to seek financial support from private entities for the program.		<i>Conference</i>	Moved to Sec. 1226.
224.	Health and Wellness Initiative Criteria. Requires the Department to establish criteria for all Health and Wellness Initiatives. States some of the criteria, which must be included and requires that preference be given to programs that pull down match funding.	NEW SENATE AND HOUSE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Moved to Sec. 1227.
			<i>House</i>	Moved to Sec. 1227.
			<i>Conference</i>	Moved to Sec. 1227.
225.	Traumatic Brain Injury Pilot. Requires the Department to work with the vendor to evaluate and analyze the costs and benefits of the Traumatic Brain Injury pilot, upon request.	NEW CONF. SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1228.
226.	Dental Homes. (1) Appropriates funds to be distributed to local health departments that partner with qualified, non-profit dental service providers for the purpose of providing dental homes. (2) In order to be considered a qualified, non-profit dental service the provider must have an effective insurance enrollment process for uninsured patients, and demonstrate an effective process of charging patients on a sliding scale. (3) Outcomes and performance measures must include the following: (a) number of uninsured patients who visited a participating dentist, (b) number of patients assisted with health insurance enrollment, and (c) a 5-year trend of the number of uninsured patients being served.		<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1895.
			<i>House</i>	Not included.
			<i>Conference</i>	Moved to Sec. 1229. Replaced "\$100.00" with "\$1,550,000.00".

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<u>CHRONIC DISEASE AND INJURY PREVENTION AND HEALTH PROMOTION</u>				
227.	<p>Alzheimer's Pilot Project. Allocates \$150,000 for a pilot program located in Macomb, Monroe, and St. Joseph counties. The fiduciary for the funds is the Alzheimer's Association- Greater Michigan Chapter, who will provide enhanced services to persons with Alzheimer's and dementia. Additionally, the Alzheimer's Association will partner with a Michigan public university to study the relationship between the provision of in-home support services and delays in the need for residential long term care services.</p>	Sec. 1260	<i>Executive</i>	Moved to Sec. 8-1424. Changed "Alzheimer's disease in-home care pilot" to "community services".
			<i>Senate</i>	Moved to Sec. 1424. Changed "Alzheimer's disease in-home care pilot" to "community services".
			<i>House</i>	Moved to Sec. 1424. Changed "Alzheimer's disease in-home care pilot" to "community services".
			<i>Conference</i>	Moved to Sec. 1424. Changed "Alzheimer's disease in-home care pilot" to "community services".
<u>FAMILY, MATERNAL, AND CHILDREN'S HEALTH SERVICES</u>				
228.	<p>Reporting of Data on Family Planning, Sexually Transmitted Disease, and Pregnancy Costs. Directs the Department to issue an annual report by January 3 estimating DCH expenditures on family planning, sexually transmitted diseases, pregnancies, and births as well as demographics, including actual or estimated expenditures by marital status. Reporting by individuals is voluntary.</p>	Sec. 1300	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 1300. Replaced "By January 3 of the current fiscal year the" with "The". Changed "annually issue to the legislature, and to the public on the Internet, a report providing" with "monitor". Changed all occurrences of "provide" to "monitor". Inserted "The department shall provide this information upon request of the legislature." to the end of the section.
			<i>Conference</i>	Sec. 1300. Replaced "By January 3 of the current fiscal year the" with "The". Changed "annually issue to the legislature, and to the public on the Internet, a report providing" with "monitor". Changed all occurrences of "provide" to "monitor". Inserted "The department shall provide this information upon request of the legislature." to the end of the section.

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229.	<p>Report on Planned Allocations for Certain Programs. (1) Requires the Department to report by April 1 the allocations, utilization, and expenditures of the following appropriations: local MCH services, prenatal care outreach, service delivery support, family planning local agreements, and pregnancy prevention program. Report to include: (a) funding allocations, (b) actual number of women, children, and adolescents served and amounts expended for each group for the fiscal year, (c) a breakdown of expenditures between urban and rural communities. (2) The Department must ensure that the distribution of funds accounts for the needs of rural communities. (3) Language provides a definition of "rural" for the purposes of this section.</p>	Sec. 1301	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1301.
			<i>House</i>	Sec. 1301.
			<i>Conference</i>	Sec. 1301.
230.	<p>Requirements for Receiving Family Planning Funds. Requires agencies receiving Federal family planning funding to comply with the Federal Program Guidelines for Project Grants for Population Affairs Services; prohibits non-compliant agencies from receiving supplemental or reallocated funds.</p>	Sec. 1302	<i>Executive</i>	Sec. 8-1302.
			<i>Senate</i>	Sec. 1302.
			<i>House</i>	Sec. 1302.
			<i>Conference</i>	Sec. 1302.
231.	<p>Prohibition on Use of Funds for Agencies That Provide Abortions. Prohibits the use of State Restricted or State General Funds for contracts with organizations that provide elective abortions, abortion counseling, or abortion referrals which are funded from appropriations for family planning local agreements. Also prohibits organizations under contract with the Department from subcontracting with such an organization for services funded with State Restricted or State General Funds from appropriations for family planning local agreements.</p>	Sec. 1303	<i>Executive</i>	Sec. 8-1303.
			<i>Senate</i>	Sec. 1303.
			<i>House</i>	Sec. 1303.
			<i>Conference</i>	Sec. 1303.
232.	<p>Prohibition on Use of Funds for Abortion. Prohibits the use of State Restricted or State General Funds for abortion counseling, referrals, and services.</p>	Sec. 1304	<i>Executive</i>	Sec. 8-1304. Deleted "pregnancy prevention program or".
			<i>Senate</i>	Sec. 1304. Deleted "pregnancy prevention program or".

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			<i>House</i>	Sec. 1304.
			<i>Conference</i>	Sec. 1304.
233.	Volunteer Dental Program. (1) Requires funds to be allocated to the Michigan Dental Association for the administration of a volunteer dental program that shall provide services to the uninsured. (2) Not later than December 1 of the current fiscal year, the Department shall report the number of individual patients treated, number of procedures performed, and approximate total market value of those procedures from the immediately preceding fiscal year.	Sec. 1305	<i>Executive</i>	Moved to Sec. 8-1223. Deleted the second "and" in subsection (2). Inserted "and the state budget office" after "health policy" in subsection (2).
			<i>Senate</i>	Moved to Sec. 1223. Deleted the second "and" in subsection (2). Inserted "and the state budget office" after "health policy" in subsection (2).
			<i>House</i>	Moved to Sec. 1223. Replaced "amounts" with "funds" in subsection (1). Changed "funds" to "\$150,000.00" in subsection (1). Deleted second "and" in subsection (2). Inserted "the senate and house fiscal agencies, and the state budget office" after "health policy" in subsection (2).
			<i>Conference</i>	Moved to Sec. 1223. Replaced "amounts" with "funds" in subsection (1). Changed "funds" to "\$150,000.00" in subsection (1). Deleted second "and" in subsection (2). Inserted "the senate and house fiscal agencies, and the state budget office" after "health policy" in subsection (2).
234.	Mobile Dentistry Fees. Directs the Department to use funds collected for Mobile Dentistry Facility Permit Fees to offset the cost of the program.	Sec. 1306	<i>Executive</i>	Moved to Sec. 8-1224.
			<i>Senate</i>	Moved to Sec. 1224.
			<i>House</i>	Moved to Sec. 1224.
			<i>Conference</i>	Moved to Sec. 1224.
235.	New Pregnancy and Parenting Pilot Program. Allocates \$50,000 for a real alternatives pregnancy and parenting support program that must promote childbirth, alternatives to abortion, and grief counseling. Directs that the Department	Sec. 1307	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1307. Changed "\$50,000.00" to "\$400,000.00 of TANF revenue".

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	established a fee-for-service contract with one or more agencies to provide counseling, support, and referral services to women from pregnancy through twelve months after birth. Sets outcome goals. Requires contractor to provide for training, educational material, marketing, and provider site monitoring. Requires a report by April 1 of the current fiscal year on the number of clients served.		<i>House</i>	Sec. 1307. Changed "\$50,000.00" to "\$400,000.00". Inserted new subsection (2): States that unexpended funds are designated as work project appropriations.
			<i>Conference</i>	Sec. 1307. Changed "\$50,000.00" to "\$400,000.00 of TANF revenue".
236.	Nurse Family Partnership Funding. Allocates \$500,000 for evidence-based programs to reduce infant mortality, including the nurse family partnership. Directs that funds be used for enhanced support and education to nursing or other teams, for client recruitment in underserved areas, strategic planning, and marketing and communications.	Sec. 1308	<i>Executive</i>	Sec. 8-1308.
			<i>Senate</i>	Sec. 1308.
			<i>House</i>	Sec. 1308.
			<i>Conference</i>	Sec. 1308.
237.	Priority for Family, Maternal, and Children's Health Services Contractors. Directs the Department to allocate funds pursuant to provisions in the Public Health Code.	Sec. 1309	<i>Executive</i>	Sec. 8-1309. Replaced "children's health services" with "child health".
			<i>Senate</i>	Sec. 1309. Replaced "children's health services" with "child health".
			<i>House</i>	Sec. 1309. Changed "119" to "117". Replaced "children's health services pursuant" with "child health according".
			<i>Conference</i>	Sec. 1309. Changed "119" to "117". Replaced "children's health services pursuant" with "child health according".
238.	Housing Rehabilitation and Hazard Abatement. Requires the Department to work with DHS and MSHDA to review housing rehabilitation, energy and weatherization, and hazard abatement program policies. Allows the task force to give recommendations to the Department.	Sec. 1310	<i>Executive</i>	Sec. 8-1310.
			<i>Senate</i>	Sec. 1310.
			<i>House</i>	Sec. 1310.
			<i>Conference</i>	Sec. 1310.

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239.	Equal Consideration in Rural Health Visitation Services. Requires that equal consideration be given to all eligible evidence-based providers when contracting for rural health visitation services for prenatal care outreach.	Sec. 1311	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 1311. Changed "health" to "home".
			<i>Conference</i>	Sec. 1311. Changed "health" to "home".
240.	Rural Home Visitation Program Work Project. Directs the Department to spend any available work project money to enhance services provided under the rural home visitation program.	Sec. 1312	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
241.	Fetal Alcohol Syndrome Services. (1) Directs the Department to work to continue developing an outreach program on fetal alcohol syndrome services. (2) Requires the Department to explore Federal grant funding to address FAS.	NEW EXEC. SECTION	<i>Executive</i>	Moved to Sec. 8-1313.
			<i>Senate</i>	Moved to Sec. 1313.
			<i>House</i>	Moved to Sec. 1313. Inserted ", targeting health promotion, prevention, and intervention as described in the Michigan fetal alcohol spectrum disorders five year plan 2015-2020" after "services" in subsection (1).
			<i>Conference</i>	Moved to Sec. 1313. Inserted ", targeting health promotion, prevention, and intervention as described in the Michigan fetal alcohol spectrum disorders five year plan 2015-2020" after "services" in subsection (1).

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<u>WOMEN, INFANTS, AND CHILDREN FOOD AND NUTRITION PROGRAM</u>				
242.	WIC Cost Reduction. Requires WIC to encourage participants to choose the lowest price product available. The products must satisfy the nutritional requirements of the program.	Sec. 1340	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1340. Rewritten to read "The Department shall include national brand peanut butter on the list of approved WIC basket items."
			<i>House</i>	Sec. 1340. Replaced "The" with "For the". Inserted "the department" after first "program". Replaced "encourage participants to choose the lowest price product available at the time of purchase. All products must satisfy" with "make national brand products available if it is determined by the department that the price per unit is more cost effective and satisfies". Inserted "determination must be made during the" before "biannual". Changed "guidelines will be updated to reflect these changes" to "evaluation".
			<i>Conference</i>	Sec. 1340. Rewritten to read "The Department shall include national brand peanut butter on the list of approved Women, Infants, and Children Special Supplemental Nutrition Program basket items."
<u>CHILDREN'S SPECIAL HEALTH CARE SERVICES (CSHCS)</u>				
243.	CSHCS Program Guidelines. States that CSHCS program may (a) cover provision of formula to clients with allergic disorders, (b) cover medical care for eligible individuals over the age of 21 who have cystic fibrosis, (c) cover medical care for eligible individuals over the age of 21 with hemophilia, and (d) provide human growth hormone to eligible patients.	Sec. 1360	<i>Executive</i>	Sec 8-1360.
			<i>Senate</i>	Sec. 1360.
			<i>House</i>	Sec. 1360.
			<i>Conference</i>	Sec. 1360.

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244.	Telemedicine for CSHCS. Authorizes the Department to spend appropriated funds to support development and expansion of telemedicine for CSHCS families to access specialty providers.	Sec. 1361	<i>Executive</i>	Sec. 8-1361.
			<i>Senate</i>	Sec. 1361.
			<i>House</i>	Sec. 1361.
			<i>Conference</i>	Sec. 1361.
	<u>CRIME VICTIMS SERVICES COMMISSION</u>			
245.	Forensic Nurse Examiner Programs. Directs the Department to continue to support justice assistance grants for expansion of forensic nurse examiner programs to facilitate training for improved evidence collection for prosecution of sexual assault. Funds are used for program coordination and training.	Sec. 1380	<i>Executive</i>	Not included.
			<i>Senate</i>	Moved to Sec. 452.
			<i>House</i>	Moved to Sec. 451.
			<i>Conference</i>	Moved to Sec. 452.
	<u>AGING AND ADULT SERVICES AGENCY</u>			
246.	Food Bank Council Collaboration with AAA. Permits the Department to encourage collaboration between the Area Agencies on Aging and the Food Bank Council of Michigan to secure the food security of vulnerable seniors.	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1402.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1402. Replaced "security" with "access".
247.	Waiting Lists for Home Delivered Meals. (1) Requires regions to report by February 1 to the Aging and Adult Services Agency their waiting lists on home delivered meals for eligible persons based on (a) recipient degree of frailty, (b) recipient's ability to prepare his/her own meals, (c) whether there is another provider available, and (d) whether there are	Sec. 1403	<i>Executive</i>	Sec. 8-1403.
			<i>Senate</i>	Sec. 1403.
			<i>House</i>	Sec. 1403.

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	other requirements they would normally need to meet to receive program services. (2) This data will only be recorded for individuals who have applied for and are initially determined to be eligible for home delivered meals.		<i>Conference</i>	Sec. 1403.
248.	Area Agency on Aging (AAA) Reporting. Requires the Department to provide the Legislature, the State Budget Director, and the fiscal agencies a report by March 30, of the current fiscal year detailing (a) the total allocation of public funds to each AAA in the State by individual program and administration, (b) detail on the expenditure of these funds broken down by individual program, and administration including both State funded resources and locally funded resources.	Sec. 1417	<i>Executive</i>	Sec. 8-1417.
			<i>Senate</i>	Sec. 1417.
			<i>House</i>	Sec. 1417.
			<i>Conference</i>	Sec. 1417.
249.	Allocation of New Aging Funding. Allocates \$1.1 million in new Aging Community Services funding to area agencies on aging for locally determined needs.	Sec. 1421	<i>Executive</i>	Sec. 8-1421.
			<i>Senate</i>	Sec. 1421.
			<i>House</i>	Sec. 1421.
			<i>Conference</i>	Sec. 1421.
250.	Prosecuting Attorney Contracts for Elder Abuse. The Department shall contract with the attorneys for two staff people to handle elder abuse cases. By March 1, Prosecuting Attorney's Association of Michigan will report to the Legislature on the program.	Sec. 1422	<i>Executive</i>	Sec. 8-1422. Deleted subsection (2). Removed remaining numbering.
			<i>Senate</i>	Sec. 1422.
			<i>House</i>	Sec. 1422. Inserted "not less than \$300,000.00 shall be allocated for" after "administration" in subsection (1). Replaced "shall" with "to" in subsection (1). Deleted subsection (2). Removed remaining numbering.
			<i>Conference</i>	Sec. 1422. Inserted "not less than \$300,000.00 shall be allocated for" after "administration" in subsection (1). Replaced "shall" with "to" in subsection (1).

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251.	Food for the Elderly. \$350,000 is appropriated to Elder Law of Michigan to assist the State's elderly population participate in the food assistance program through MiCAFE.	Sec. 1423	<i>Executive</i>	Sec. 8-1423.
			<i>Senate</i>	Sec. 1423.
			<i>House</i>	Moved to Sec. 807. Replaced "to participate" with "in participating". Changed "screen" to "screening".
			<i>Conference</i>	Moved to Sec. 807. Replaced "to participate" with "in participating". Changed "screen" to "screening".
252.	Alzheimer's Pilot Project. Allocates \$150,000 for a pilot program located in Macomb, Monroe, and St. Joseph counties. The fiduciary for the funds is the Alzheimer's Association- Greater Michigan Chapter, who will provide enhanced services to persons with Alzheimer's and dementia. Additionally, the Alzheimer's Association will partner with a Michigan public university to study the relationship between the provision of in-home support services and delays in the need for residential long term care services.	NEW EXEC. SECTION	<i>Executive</i>	Moved to Sec. 8-1424. Changed "Alzheimer's disease in-home care pilot" to "community services".
			<i>Senate</i>	Moved to Sec. 1424. Changed "Alzheimer's disease in-home care pilot" to "community services".
			<i>House</i>	Moved to Sec. 1424. Changed "Alzheimer's disease in-home care pilot" to "community services".
			<i>Conference</i>	Moved to Sec. 1424. Changed "Alzheimer's disease in-home care pilot" to "community services".
253.	Nursing Home Closures. Requires the Department to coordinate with LARA to ensure notice of the receipt of an order of suspension of a licensed adult foster care home, home for the aged or nursing home, is provided to the subcommittee.	NEW CONF. SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1425.
	<u>MEDICAL SERVICES ADMINISTRATION</u>			
254.	Electronic Health Records Work Project. Designates the electronic health records incentive program appropriation as a work project to be carried into subsequent fiscal years.	Sec. 1501	<i>Executive</i>	Sec. 8-1501.
			<i>Senate</i>	Sec. 1501.

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	Stated completion date is September 30, 2020.		<i>House</i>	Sec. 1501. Changed "2020" to "2021" in (d).
			<i>Conference</i>	Sec. 1501. Changed "2020" to "2021" in (d).
255.	Transparency Database Website. Allocates available work project revenue and any associated Federal match to create and develop a transparency database website. Makes funding contingent on enactment of enabling legislation.	Sec. 1502.	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1502.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1502.
256.	Healthy Michigan Administration. Requires the Department to maintain an accounting structure within the Michigan Administrative Information Network to identify administrative expenditures associated with the plan.	Sec. 1503	<i>Executive</i>	Sec. 8-1503.
			<i>Senate</i>	Sec. 1503.
			<i>House</i>	Sec. 1503.
			<i>Conference</i>	Sec. 1503.
257.	OIG and TPL Report. Requires the Department to submit a report on March 1 and projecting the annual increase in reimbursement savings and cost offsets resulting from the additional funds for OIG and TPL efforts, and then a report on the actual increase in reimbursement savings and cost offsets by September 1.	Sec. 1505	<i>Executive</i>	Sec. 8-1505. Deleted all occurrences of "additional".
			<i>Senate</i>	Sec. 1505.
			<i>House</i>	Sec. 1505. Deleted all occurrences of "additional".
			<i>Conference</i>	Sec. 1505. Deleted all occurrences of "additional".
258.	Healthy Michigan Call Center. Requires quarterly reports from the Department on the volume and type of calls that are received at the center, among other data.	Sec. 1506	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 1506.

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			<i>Conference</i>	Sec. 1506. Changed all occurrences of "Healthy Michigan" to "public assistance". Deleted "plan" in subdivision (b).
259.	Integrated Services Delivery Call Center. (1) Directs the Department to establish new IT tools and enhance existing systems to improve the eligibility and enrollment process. (2) Outcomes and performance measures must include (a) successful consolidation of data warehouses maintained by the department, (b) amount of time caseworkers devote to data entry when initiating an enrollee application, (c) a reduction in wait times to speak with Department staff, and (d) a reduction in caseworker workload.	NEW EXEC. SECTION	<i>Executive</i>	Sec. 8-1506.
			<i>Senate</i>	Sec. 1506. Changed "date" to "data" in subsections (2)(a) and (2)(b).
			<i>House</i>	Sec. 1507. Changed "date" to "data" in subsections (2)(a) and (2)(b). Inserted new subsection (3) that requires a report by December 1 that includes information on (a) the process used to define requests for proposal for each element of the plan, (b) requires the Department to submit a project plan as required in (a) if they decide not to contract out the services, (c) a recommended project management plan, and (d) the proposed benefits from implementing the integrated service delivery plan. Inserted new subsection (4) that requires the information required in (3)(d) be posted on the Department's website.
			<i>Conference</i>	Sec. 1507. Changed "date" to "data" in subsections (2)(a) and (2)(b).
	<u>MEDICAL SERVICES</u>			
260.	Determining Medicaid Eligibility for Adult Foster Care and Long-Term Care Residents. States that the cost of remedial services for residents of licensed adult foster care and licensed homes for the aged shall be used in determining eligibility for Medicaid.	Sec. 1601	<i>Executive</i>	Sec. 8-1601.
			<i>Senate</i>	Sec. 1601.
			<i>House</i>	Sec. 1601.
			<i>Conference</i>	Sec. 1601.
261.	Medicaid Buy-In Program. (1) Allows the Department to establish a program to allow individuals to purchase Medicaid coverage. (2) Allows the Department to receive and expend	Sec. 1603	<i>Executive</i>	Sec. 8-1603.
			<i>Senate</i>	Sec. 1603.

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	premiums in addition to the amounts appropriated. (3) Requires premiums to be classified as private funds.		<i>House</i>	Sec. 1603.
			<i>Conference</i>	Sec. 1603.
262.	Protected Income Level. Sets the protected income level for Medicaid coverage at 100% of the related public assistance standard.	Sec. 1605	<i>Executive</i>	Sec. 8-1605.
			<i>Senate</i>	Sec. 1605.
			<i>House</i>	Sec. 1605.
			<i>Conference</i>	Sec. 1605.
263.	Guardian and Conservator Charges as Allowable Expense. Allows the Department to deduct up to \$60 per month for guardian and conservator charges as an allowable expense when determining Medicaid eligibility and patient payments.	Sec. 1606	<i>Executive</i>	Sec. 8-1606.
			<i>Senate</i>	Sec. 1606.
			<i>House</i>	Sec. 1606.
			<i>Conference</i>	Sec. 1606. Changed "\$60.00" to "\$83.00".
264.	Presumed Eligibility for Medicaid. (1) States that a pregnant Medicaid applicant will be presumed eligible for Medicaid unless the preponderance of evidence indicates otherwise. The applicant will be allowed to select or remain with the Medicaid participating obstetrician of her choice. (2) Such an applicant shall be given a letter of authorization to receive Medicaid pregnancy-related services and a listing of Medicaid participating physicians and managed care plans in her area. States that all qualifying applicants shall be entitled to receive all medically necessary obstetrical and prenatal care without prior authorization from a health plan.	Sec. 1607	<i>Executive</i>	Sec. 8-1607.
			<i>Senate</i>	Sec. 1607.
			<i>House</i>	Sec. 1607.

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	Requires all claims for obstetrical and prenatal care to be paid at the Medicaid fee-for-services rate in the event that a contract does not exist between the provider and managed care plan. (3) If applicant is subsequently found to be ineligible, a Medicaid physician or managed care provider that has been providing pregnancy services to the applicant is entitled to reimbursement for those services until they are notified by the Department that the applicant is ineligible. (4) If the preponderance of evidence indicates that the applicant is not eligible for Medicaid, the Department shall refer that applicant to the nearest public health clinic as a potential source for receiving services. (5) Requires the Department to develop an enrollment process for pregnant women covered under this section that facilitates the selection of a managed care plan at the time of application. (6) Mandates the enrollment of women who are eligible for Medicaid due to pregnancy in a Medicaid HMO. (7) Language directs the Department to encourage physicians to provide pregnant women with a referral to a Medicaid-participating dentist.		<i>Conference</i>	Sec. 1607.
265.	Third Party Payment as Payment In Full. (1) Prohibits reimbursement for services provided to Medicaid eligibles from exceeding amounts established for Medicaid-only payments; requires Medicaid payment to be accepted as payment in full. (2) Reimbursement for hospital services for dual Medicaid/Medicare recipients with Part B coverage only shall equal Medicaid reimbursement levels including capital payments.	Sec. 1611	<i>Executive</i>	Sec. 8-1611.
			<i>Senate</i>	Sec. 1611.
			<i>House</i>	Sec. 1611.
			<i>Conference</i>	Sec. 1611.
266.	Pharmacy Dispensing Fee and Copayments. (1) Directs that the dispensing fee for recipients who do not reside in a nursing home will be \$2.75, or the pharmacy's usual or customary charge, whichever is less. In the case of nursing home recipients, the dispensing fee will be \$3.00, or the pharmacy's usual or customary charge, whichever is less. (2) Requires Medicaid prescription copayment of \$1 for a generic	Sec. 1620	<i>Executive</i>	Sec. 8-1620. Inserted "administration of this co-payment shall be consistent with the terms and conditions established by the centers for Medicare and Medicaid Services linked to the section 1115 waiver authorizing the Healthy Michigan Plan" after first sentence of subsection (3).
			<i>Senate</i>	Sec. 1620.

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	drug and \$3 for a brand-name drug when an equivalent generic drug is available for persons not enrolled in the HMP or with an income less than 100% of the FPL. (3) Requires Medicaid prescription copayment of \$4 for a generic drug and \$8 for a brand-name drug for persons enrolled in the HMP with an income of at least 100% of the FPL.		<i>House</i>	Sec. 1620. Language in subsection (1) rewritten to require the Department to establish a pharmaceutical dispensing fee for fee-for-service pharmacy benefits that take into account the state's long-term financial exposure and access to care. Requires the fee not be set lower than the amount in effect on October 1, 2015. Inserted "administration of this co-payment shall be consistent with the terms and conditions established by the centers for Medicare and Medicaid services linked to the federal waiver authorizing the healthy Michigan Plan" after first sentence of subsection (3).
			<i>Conference</i>	Sec. 1620. Language in subsection (1) rewritten to require the Department to establish a pharmaceutical dispensing fee for fee-for-service pharmacy benefits that take into account the state's long-term financial exposure and access to care. Requires the fee not be set lower than the amount in effect on October 1, 2015.
267.	Maximum Allowable Cost (MAC) Pricing. Requires the Department to utilize MAC pricing for generic drugs. The MAC price will be based on wholesaler pricing to providers that is available from at least two wholesalers who deliver in Michigan.	Sec. 1629	<i>Executive</i>	Sec. 8-1629.
			<i>Senate</i>	Sec. 1629.
			<i>House</i>	Sec. 1629.
			<i>Conference</i>	Sec. 1629.
268.	Copayments for Medicaid Services. (1) Directs the Department to require copayments on dental, podiatric, and vision services provided to Medicaid recipients, except as prohibited by Federal or State law or regulation. (2) Establishes copayments for persons not enrolled in the HMP or with an income less than 100% of the FPL: (a) \$2 for physician visits, (b) \$3 for emergency room visit (c) \$50 for	Sec. 1631	<i>Executive</i>	Sec. 8-1631. Inserted "and consistent with the terms and conditions established by the Centers for Medicare and Medicaid Services linked to the section 1115 waiver authorizing the Healthy Michigan Plan" after "regulation" in subsection (3).
			<i>Senate</i>	Sec. 1631.

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	first day of inpatient hospitalization, and (d) \$1 for outpatient hospitalization services. (3) Establishes copayments for persons enrolled in the HMP with income of at least 100% of the FPL: (a) \$4 for physician visits, (b) \$8 for emergency room visit (c) \$190 for first day of inpatient hospitalization, and (d) \$4 for outpatient hospitalization services.		<i>House</i>	Sec. 1631. Inserted "and consistent with the terms and conditions established by the centers for Medicare and Medicaid services linked to the federal waiver authorizing the healthy Michigan plan" after "regulation" in subsection (3).
			<i>Conference</i>	Sec. 1631.
269.	Requirements for Institutional Cost Reports. States that institutional provider cost reports shall be submitted, completed in full, within five months after the end of the fiscal year.	Sec. 1641	<i>Executive</i>	Sec. 8-1641.
			<i>Senate</i>	Sec. 1641.
			<i>House</i>	Sec. 1641.
			<i>Conference</i>	Sec. 1641.
270.	Nursing Home QAAP Recalculation. Requires the Department to review and recalculate the prior year QAAP for nursing homes and hospital long-term care units to reflect actual days of care provided rather than using projected days of care provided.	NEW HOUSE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 1645.
			<i>Conference</i>	Sec. 1645. Language rewritten to require the Department to consider using the most recent 3 years of actual days of care provided to establish the nursing home QAAP. Directs the Department to report the excess amount assessed when the estimated days of care compared to the actual days of care create an aggregate over-payment of \$1.0 million or more. Requires the Department to report by April 1 on the feasibility of creating a more accurate formula for the assessment.
271.	Reimbursement of Hospital Emergency Rooms (ER) by Medicaid HMOs. (1) Prohibits an HMO to make reimbursement for screening and stabilization medical services provided to a Medicaid recipient in an ER contingent on HMO authorization; requires the HMO to be notified within	Sec. 1657	<i>Executive</i>	Sec. 8-1657.
			<i>Senate</i>	Sec. 1657.
			<i>House</i>	Sec. 1657.

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	24 hours of ER discharge. (2) Requires HMO prior authorization before post-ER hospitalization or medical services. (3) States that these requirements are not intended to require alteration of existing contractual arrangements or a requirement that HMO must reimburse medically unnecessary services.		<i>Conference</i>	Sec. 1657.
272.	Boilerplate Sections Relating to Medicaid Managed Care. Lists language sections that shall apply to all Medicaid managed care programs.	Sec. 1659	<i>Executive</i>	Technical adjustments.
			<i>Senate</i>	Technical adjustments.
			<i>House</i>	Technical adjustments.
			<i>Conference</i>	Technical adjustments.
273.	External Quality Review of Medicaid HMOs Components and Training. (1) Directs the Department to require an external quality review contractor to conduct a review of each Medicaid HMO on measures of quality, timeliness, and access to services. (2) Language requires that the Department provide EPSDT utilization data through the encounter data system, and health employer data and information set well child health measures in accordance with the National Committee on Quality Assurance prescribed methodology. (3) Requires the Department to provide a copy of this annual external quality review report to the Legislature and the State Budget Director.	Sec. 1662	<i>Executive</i>	Sec. 8-1662.
			<i>Senate</i>	Sec. 1662. Changed "assure" to "ensure" in subsection (1).
			<i>House</i>	Sec. 1662.
			<i>Conference</i>	Sec. 1662. Changed "assure" to "ensure" in subsection (1).
274.	MiChild Program. (1) States that the MiChild program appropriation is for the provision of a state-based private health care program to children under age 19 with family income of less than 212% of the Federal poverty level who are uninsured and have not had coverage for at least 6 months prior to application. (2) Requires the Department to provide one year of continuous eligibility in the program. (3) Assures that children whose eligibility changes between MiChild and Medicaid will be able to keep their providers through the course of their treatment. (4) Children must reside in a	Sec. 1670	<i>Executive</i>	Sec. 8-1670. Deleted "federally approved MiChild" in subsection (2). Deleted "from the line item appropriation associated with the program" in subsection (7). Deleted subsections (3), (5), (6), (8), (9) and (10). Renumbered remaining sections.
			<i>Senate</i>	Sec. 1670. Deleted "federally approved MiChild" in subsection (2). Deleted "from the line item appropriation associated with the program" in subsection (7). Deleted subsections (5), (6), (8) and (9). Renumbered remaining sections.

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	household with adjusted gross income of 212% FPL or below to be eligible. (5) Directs Department to contract with Medicaid health plans to provide services to MIChild, with current coverage arrangements grandfathered until statewide coverage through the Medicaid health plans can be put into place (6) Allows the Department to enter into contracts to obtain certain MIChild services from CMHSPs. (7) Allows program spending for health care services from the MIChild appropriation or any other appropriation associated with the program as described in the State plan. (8) Language directs the Department to ensure that an external quality review of each MIChild contractor is conducted. (9) Requires Department to create an automated enrollment algorithm. (10) Directs that the MIChild program cover autism spectrum disorder treatments for children as defined in the Federally approved State plan.		<i>House</i>	Sec. 1670. Deleted “federally approved MIChild” in subsection (2). Deleted “from the line item appropriation associated with the program” in subsection (7). Deleted subsections (3), (5), (6), (8), (9) and (10). Renumbered remaining sections.
			<i>Conference</i>	Sec. 1670. Deleted “federally approved MIChild” in subsection (2). Deleted “from the line item appropriation associated with the program” in subsection (7). Deleted subsections (3), (5), (6), (8), (9) and (10). Renumbered remaining sections.
275.	MIChild Premiums. Allows the Department to establish premiums, for families with income at or below 212% FPL, The monthly premiums shall be \$10 per month for MIChild eligibility.	Sec. 1673	<i>Executive</i>	Sec. 8-1673.
			<i>Senate</i>	Sec. 1673.
			<i>House</i>	Sec. 1673.
			<i>Conference</i>	Sec. 1673.
276.	MIChild Benefits. States that the MIChild program must provide, at a minimum, all benefits available under the Michigan benchmark plan that are delivered through contracted providers, including a) inpatient mental health services other than substance use disorder, including State	Sec. 1677	<i>Executive</i>	Sec. 8-1677.
			<i>Senate</i>	Sec. 1677.
			<i>House</i>	Sec. 1677.

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	mental hospitals and private psychiatric hospital beds, b) outpatient mental health services other than substance use disorder, c) durable medical equipment, prosthetics, and orthotics, d) dental services, e) substance use disorder services, f) care management services for mental health, g) physical therapy, occupational therapy, and services for those with speech, hearing, and language disorders, and h) emergency ambulance services.		<i>Conference</i>	Sec. 1677.
277.	Nursing Home Facility Enforcement Penalty Revenue. Allows Department to impose civil monetary penalties and spend penalty money received. (3) Requires that unexpended penalty revenue be carried forward into subsequent fiscal year.	Sec. 1682	<i>Executive</i>	Sec. 8-1682.
			<i>Senate</i>	Sec. 1682.
			<i>House</i>	Sec. 1682.
			<i>Conference</i>	Sec. 1682.
278.	Medicaid School-Based Services. (1) Authorizes the Department to pursue Medicaid reimbursement for eligible services provided in schools. The Department may enter into agreements with the Department of Education and school districts sharing Federal reimbursement for these services. (2) Authorizes the Department to (a) finance activities within the Medical Services Administration related to this project, (b) reimburse participating school districts, and (c) offset General Fund costs associated with the Medicaid program.	Sec. 1692	<i>Executive</i>	Sec. 8-1692.
			<i>Senate</i>	Sec. 1692.
			<i>House</i>	Sec. 1692.
			<i>Conference</i>	Sec. 1692.
279.	Special Adjustor Payments. Allows the special adjustor appropriation to be increased if the Department submits a medical services state plan amendment at a level higher than the appropriation. Allows the Department to adjust sources of financing in accordance with increased appropriation.	Sec. 1693	<i>Executive</i>	Sec. 8-1693.
			<i>Senate</i>	Sec. 1693.
			<i>House</i>	Sec. 1693.
			<i>Conference</i>	Sec. 1693.

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280.	Children's Hospitals with High Indigent Care Volume. Directs the Department to distribute \$386,700 GF/GP plus associated Federal match to an academic health care system with a children's hospital with high indigent care volume.	Sec. 1694	<i>Executive</i>	Sec. 8-1694. Replaced "\$386,700.00 with "up to \$12,600.00".
			<i>Senate</i>	Sec. 1694. Replaced "\$386,700.00 with "up to \$12,600.00".
			<i>House</i>	Sec. 1694.
			<i>Conference</i>	Sec. 1694.
281.	Disproportionate Share Hospital (DSH) and Graduate Medical Education (GME) Payments. (1) Allows the Department to make separate DSH and GME payments directly to qualifying hospitals, with DSH payments totaling \$45.0 million. If a hospital receives DSH or GME payments from the Department, it cannot include these costs in their HMO contracts. (2) Allocates \$45.0 million to "large" DSH pool. (3) Requires report by September 30.	Sec. 1699	<i>Executive</i>	Sec. 8-1699.
			<i>Senate</i>	Sec. 1699. Replaced "clients" with "recipients".
			<i>House</i>	Sec. 1699. Deleted subsection (3).
			<i>Conference</i>	Sec. 1699. Replaced "clients" with "recipients". Deleted subsection (3).
282.	Distribution of Special Hospital Payments. (1) Requires a report by December 1 on the distribution of funding provided, and the net benefit if the special hospital payment is not finance with GF, to each eligible hospital during the prior fiscal year from the following special hospital payments: (a) DSH, separate out by unique DSH pool, (b) GME, (c) Special rural hospital payments, and (d) lump sum payments to rural hospitals for obstetrical care. (2) Requires a report by May 1 on the projected distribution of funding provided, and the net benefit if the special hospital payment is not finance with GF, to each eligible hospital from the following special hospital payments: (a) DSH, separate out by unique DSH pool, (b) GME, (c) Special rural hospital payments, and (d) lump sum payments to rural hospitals for obstetrical care.	NEW HOUSE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 1700.
			<i>Conference</i>	Sec. 1700. Replaced "prior" with "previous" in subsection (1).
283.	Maximizing Medicaid Funding for Children Eligible for Early On. Requires the Department to work with DOE to investigate funding opportunities for Early On and early	NEW HOUSE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.

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	intervention services for eligible children. The study must focus on strategies used in other states that include the feasibility of maximizing Medicaid reimbursement and any barriers to maximizing Medicaid funds. Requires a report by January 1 on the report findings.		<i>House</i>	Sec. 1703.
			<i>Conference</i>	Not included.
284.	Pregnant Women Dental Benefit. (1) Appropriates \$2.726 million to enhance the Medicaid dental benefit for pregnant women. (2) Outcomes and performance measures must include, but are not limited to: (a) the number of pregnant women who visited a dentist over the previous year, and (b) the number of dentists who provide dental services to pregnant women enrolled in Medicaid.	NEW CONF. SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1704.
285.	Ambulatory Surgical Centers. Requires a report by March 1 to evaluate the various reimbursement rates provided to ambulatory surgical centers, explain why differences in rates exist, and recommend changes to the reimbursement rate.	NEW CONF. SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1705.
286.	Injectable Drugs. Requires the Department to allow licensed pharmacies to purchase injectable drugs, for the treatment of respiratory syncytial virus for shipment to physicians' offices to be administered to specific patients. If the affected patients are Medicaid eligible, requires the Department to reimburse pharmacies for the dispensing of the injectable drugs and reimburse physicians for the administration of the injectable drugs.	Sec. 1724	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 1724
			<i>Conference</i>	Sec. 1724.
287.	Pregnant/ New Mother Literacy Program. (1) Requires the Department to work with the Dept. of Ed. to evaluate the possibility of including an assessment tool to promote literacy in the MIHP. (2) Requires a report on the study in section (1) by March 1.	Sec. 1730	<i>Executive</i>	Sec. 8-1730.
			<i>Senate</i>	Sec. 1730.
			<i>House</i>	Sec. 1730.

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			<i>Conference</i>	Sec. 1730.
288.	Medicaid Eligibility Process and Proof of Citizenship. Requires the Department to direct Department of Human Services to obtain proof from Medicaid recipients that they are legally residing in the United States and State of Michigan prior to providing program benefits.	Sec. 1757	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1757.
			<i>House</i>	Sec. 1757.
			<i>Conference</i>	Sec. 1757.
289.	Certification of Health Plan and Specialty Prepaid Inpatient Health Plan Rates as Actuarially Sound. Language states the Department will annually certify rates as actuarially sound and will provide a copy of the rate certification and approval documents to the Legislature. Directs that the Department to take into account all Medicaid policy bulletins affecting Medicaid health plans issued after the most recent actuarial rate development process ended when calculating actuarial soundness adjustments.	Sec. 1764	<i>Executive</i>	Sec. 8-1764. Replaced sixth "and" with ",". Inserted ", and the state budget office" after "fiscal agencies".
			<i>Senate</i>	Sec. 1764. Replaced sixth "and" with ",". Changed all occurrences of "prepaid inpatient health plans" to "PIHPs". Inserted ", and the state budget office" after "fiscal agencies". Replaced all occurrences of "house" with "senate". Replaced all occurrences of "senate" with "house". Designated current year boilerplate as (1). Inserted "The department shall require all Medicaid policy bulletins affecting Medicaid health plans issued after the federal certification of rates to include an economic analysis demonstrating that the approved rates will not be compromised due to the new policy". Inserted subsection (2) directing that the Department include language in contracts between the state and Medicaid Health Plans stating that the full cost of all taxes will be reimbursed annually. For the purposes of this section, defines the full cost of the health insurer fee as both the fee itself and the allowance to reflect the Federal and state income tax.
			<i>House</i>	Sec. 1764. Replaced sixth "and" with ",". Inserted ", and the state budget office" after "fiscal agencies".

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			<i>Conference</i>	Sec. 1764. Replaced sixth "and" with ",". Changed all occurrences of "prepaid inpatient health plans" to "PIHPs". Inserted ", and the state budget office" after "fiscal agencies". Replaced all occurrences of "house" with "senate".
290.	Laboratory Services Fee Reduction Savings. Requires the Department to report on the savings from the reduction in managed care laboratory services fees originally enacted under EO 2015-5. This report must include the actual gross reduction in expenditures by Medicaid health plans due to the reduction in the fees.	Sec. 1770	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1770.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
291.	Medicaid Managed Long-Term Care. (1) Requires the Department to report on the progress in implementing the MI Health Link Waiver on March 1 and September 1 of the current fiscal year. (2) Requires the existence of an independent ombudsman to help assist with complaint and dispute resolution mechanisms.	Sec. 1775	<i>Executive</i>	Sec. 8-1775.
			<i>Senate</i>	Sec. 1775.
			<i>House</i>	Sec. 1775.
			<i>Conference</i>	Sec. 1775.
292.	Immunization Awareness. Appropriates \$0.5 million GF/GP plus available match to the Medicaid health plans through a capitation rate increase for children. This rate increase shall be used to support a statewide media campaign to improve the state's immunization rates.	NEW CONF. SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1782.
293.	Medicaid Value Pool. Requires the Department to develop a formula to distribute funds from the Medicaid value pools based on quality of care, cost and traditional DSH hospital	Sec. 1800	<i>Executive</i>	Sec. 8-1800.
			<i>Senate</i>	Sec. 1800.

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	factors. Requires a report by May 1 on the distribution of each pool.		<i>House</i>	Sec. 1800. Deleted "By May 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on the distribution of each pool".
			<i>Conference</i>	Sec. 1800. Deleted "By May 1 of the current fiscal year, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on the distribution of each pool".
294.	Primary Care Services Medicaid Rate Increase. Allocates \$33.3 million GF/GP plus associated Federal match to increase Medicaid rates for primary care services provided only by primary care providers. Provides a definition of primary care provider for the purposes of this section and directs the Department to examine including the subspecialty of neonatal medicine in its definition.	Sec. 1801	<i>Executive</i>	Sec. 8-1801.
			<i>Senate</i>	Sec. 1801.
			<i>House</i>	Sec. 1801. Inserted "including the subspecialty of neonatal medicine," after "pediatric medicine". Deleted "The department shall examine including the subspecialty of neonatal medicine in its definition of primary care provider."
			<i>Conference</i>	Sec. 1801. Deleted ""use \$33,318,800.00 in general fund/general purpose plus associated federal match to". Deleted "The department shall examine including the subspecialty of neonatal medicine in its definition of primary care provider". Designated current year language as subsection (1). Inserted new subsection (2) that requires a report by April 1 on the following: (a) a list of medical specialties and licensed providers that were paid enhanced primary care rates in FY 15, and (b) information on the geographic distribution of specialists who received enhanced rates in FY 15.
295.	Obstetrical and Newborn Care Lump Sum Payment. Directs that a lump sum payment be made to hospitals that qualify for rural hospital access payments in FY 2013-14 and	Sec. 1802	<i>Executive</i>	Sec. 8-1802.
			<i>Senate</i>	Sec. 1802.

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	provide obstetrical care in the current fiscal year. The payment is set at \$830 for each obstetrical care case and newborn care case payment billed by the hospital for FY 2012-13.		<i>House</i>	Sec. 1802.
			<i>Conference</i>	Sec. 1802.
296.	Veterans Benefits Eligibility. Language requires the Department, in cooperation with the Department of Human Services and the Department of Military and Veterans Affairs, to work with the Federal government to identify Medicaid recipients who are veterans and may be eligible for Federal veteran's health care benefits or other benefits.	Sec. 1804	<i>Executive</i>	Sec. 8-1804.
			<i>Senate</i>	Sec. 1804.
			<i>House</i>	Sec. 1804.
			<i>Conference</i>	Sec. 1804.
297.	GME Quality Data Reporting. Requires hospitals receiving GME funds to submit fully completed quality data to the same national nonprofit organization. States that the reporting shall use consensus based standards, which meet NQF-endorsed safe practices. Directs the organization must be one that uses a severity-adjusted risk model and measures to help patients identify hospitals most likely to have the best outcomes. Includes a penalty for hospitals that don't comply.	Sec. 1805	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1805. Deleted "fourth quarter".
			<i>House</i>	Sec. 1805. Replaced "the same' with "a". Inserted "or to the centers for Medicare and Medicaid services hospital compare quality reporting website" after "website". Deleted "The department shall withhold a hospital's fourth quarter graduate medical education payment until the hospital submits the data to the qualifying nonprofit organization described in this section".
			<i>Conference</i>	Sec. 1805. Changed "the same national" to "a". Replaced "The department shall withhold a hospital's fourth quarter graduate medical education payment until the hospital submits the data to the qualifying nonprofit organization described in this section" with "The public website shall provide information to allow consumers to compare safe practices by hospital campus, including but not limited to perinatal care, hospital-acquired infection, and serious reportable events. Hospitals receiving medical services payments for graduate medical education shall also make their fully completed quality data available on the hospital's website".

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298.	<p>Common Formulary. (1) Directs that the contracts for Medicaid health plans effective January 1, 2016, require cooperation in a workgroup develops and implements a common formulary to be used by all contracting health plans. Requires the Department to convene the workgroup, make final decisions, and consult with health plans. (2) Allows the Department to establish performance standards to measure the progress towards implementation. (3) Requires implementation of the formulary to include consideration of the Department's preferred drug list. (4) Allows the contracted health plans to use evidence-based utilization management techniques in the implementation of the common formulary. (5) Requires the Department and the contracted health plans to continue emphasizing the value of e-prescribing and electronic medical records.</p>	Sec. 1806	<i>Executive</i>	Sec. 8-1806. Deleted subsection (1). Inserted "used by all contracted Medicaid health plans" after "formulary" in subsection (2). Deleted "development and" in subsection (4). Renumbered remaining subsections.
			<i>Senate</i>	Sec. 1806. Deleted subsection (1). Inserted "used by all contracted Medicaid health plans" after "formulary" in subsection (2). Deleted "development and" in subsection (4). Renumbered remaining subsections.
			<i>House</i>	Sec. 1806. Deleted subsection (1). Inserted "used by all contracted Medicaid health plans" after "formulary" in subsection (2). Renumbered remaining subsections.
			<i>Conference</i>	Sec. 1806. Deleted subsection (1). Inserted "used by all contracted Medicaid health plans" after "formulary" in subsection (2). Deleted "development and" in subsection (4). Renumbered remaining subsections.
299.	<p>Comprehensive Health Plan RFP. Requires the RFP for the comprehensive health plan contract assure a fair, transparent and deliberative process that emphasizes the value of choice and access for beneficiaries.</p>	Sec. 1807	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
300.	<p>Contract Performance Standards. Directs the Department to establish separate contract performance standards for Medicaid health plans that adhere to the provisions associated with the .75% and .25% capitation withhold. Leaves the determination of these standards to the Department, but includes suggested concepts, which must be included.</p>	Sec. 1809	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1809. Deleted "recognized concepts such as encouraging"
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1809. Deleted "recognized concepts such as encouraging".

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301.	Encounter Data Improvement. Requires the Department to develop rules to make each health plan's encounter data as complete as possible. Additionally, the rules would require a fair measure of acuity of each health plan's enrolled population for risk adjustment purposes, capitation rate setting, DRG rate setting, and analysis of program efficiencies.	Sec. 1810	<i>Executive</i>	Sec. 8-1810.
			<i>Senate</i>	Sec. 1810.
			<i>House</i>	Sec. 1810.
			<i>Conference</i>	Sec. 1810.
302.	GME Cost and Retention Reporting. (1) Requires a report by June 1 from each hospital receiving GME funding disclosing all direct and indirect costs associated with their residency training program. (2) Requires a report by August 1 from each hospital receiving GME fund to identify and explain (a) the marginal cost to add one additional slot, (b) the number of additional slots which would result in additional administrative costs, and (c) the postresidency retention rate of the past 10 years. (3) Specifies the penalty for GME recipients who do not comply with the requirements of the preceding sections. (4) Directs the Department to convene a workgroup to use the reports in the preceding sections to develop new metrics for the distribution of GME funding and requires a report on results by September 30. States	Sec. 1812	<i>Executive</i>	Sec. 8-1812. Inserted "and the state budget office" after "fiscal agencies" in subsection (1). Removed "It is the intent of the legislature that, beginning with the budget for the fiscal year ending September 30, 2017, the metrics developed by this workgroup be used to determine the distribution of funds for graduate medical education" from subsection (4).
			<i>Senate</i>	Sec. 1812. Deleted third "and" in subsection (1). Inserted ", and the state budget office" after "fiscal agencies" in subsection (1). Replaced all occurrences of "house" with "senate" in subsection (1). Replaced all occurrences of "senate" with "house" in subsection (1). Remove "fourth quarter" in subsection (3). Replaced "2017" with "2018" in subsection (4).

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	legislative intent that the metrics developed by this workgroup be used to distribute GME funds starting with FY 2016-17. (5) Directs the Department to seek a waiver, if needed, to complete the requirements of this Section.		<i>House</i>	Sec. 1812. Inserted "and using the most recent available cost reports" after "year" in (1). Changed "require" to "complete a report of all direct and indirect costs associated with residency training programs for" in (1). Replaced "to submit a report disclosing all direct and indirect costs associated with the residency training program to the department" with ".The report shall be submitted to" in (1). Inserted ", and the state budget office" after "fiscal agencies" in (1). Changed "shall require each hospital that receives funds appropriated in part 1 for graduate medical education to submit a report identifying and explain the following" to "develop a template for hospitals receiving funds appropriated in part 1 for graduate medical education to report the following in a standard format:" in (2). Deleted subsection (3). Changed "2017" to "2018" in (4). Renumbered remaining subsections.
			<i>Conference</i>	Sec. 1812. Inserted "and using the most recent available cost reports" after "year" in (1). Changed "require" to "complete a report of all direct and indirect costs associated with residency training programs for" in (1). Replaced "to submit a report disclosing all direct and indirect costs associated with the residency training program to the department" with ".The report shall be submitted to" in (1). Inserted ", and the state budget office" after "fiscal agencies" in (1). Changed "shall require each hospital that receives funds appropriated in part 1 for graduate medical education to submit a report identifying and explain the following" to "develop a template for hospitals receiving funds appropriated in part 1 for graduate medical education to report the following in a standard format:" in (2). Deleted subsection (3). Changed "2017" to "2018" in (4). Renumbered remaining subsections.
303.	HMO Accrediting Organizations. (1) Directs the Department to use national accreditation review criteria to determine compliance with State requirements for Medicaid health plans.	Sec. 1820	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1820.

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	(2) Requires the Department to comply with State and Federal law and not initiate actions that would negatively impact beneficiary safety. (3) Defines "national accrediting agency". (4) Requires report by July 1 of the current fiscal year on implementation.		<i>House</i>	Sec. 1820.
			<i>Conference</i>	Sec. 1820.
304.	Utilization of Telemedicine and Tele-Psychiatry. Directs the Department to continue, and expand where appropriate, utilization of telemedicine and tele-psychiatry in medically underserved areas.	Sec. 1837	<i>Executive</i>	Sec. 8-1837.
			<i>Senate</i>	Sec. 1837.
			<i>House</i>	Sec. 1837.
			<i>Conference</i>	Sec. 1837.
305.	GME Funding Objectives. Directs the Department to distribute allocated funds to (a) encourage the training of physicians in specialties, including primary care, that are necessary to meet the future needs of residents of this State and (b) train physicians in settings that include ambulatory sites and rural locations.	Sec. 1846	<i>Executive</i>	Sec. 8-1846.
			<i>Senate</i>	Sec. 1846.
			<i>House</i>	Sec. 1846.
			<i>Conference</i>	Sec. 1846.
306.	Health Plan Assistance with Eligibility Redetermination. Permits the Department to allow Medicaid health plans to assist with the eligibility redetermination process to ensure continuation of Medicaid eligibility.	Sec. 1850	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1850.
			<i>House</i>	Sec. 1850.
			<i>Conference</i>	Sec. 1850.
307.	Pilot Program for Nonemergency Transportation. Requires the Department to encourage cooperation between the Medicaid managed health plans, non-profit organizations, and other health providers to create a nonemergency transportation pilot.	Sec. 1861	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 1861. Replaced "help facilitate" with "continue the facilitation of".

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			<i>Conference</i>	Sec. 1861. Replaced "help facilitate" with "continue the facilitation of".
308.	Medicaid Obstetrical Rate Increase. Directs the Department to maintain the payment rates for Medicaid obstetrical services at 95% of Medicare levels by October 1, 2014.	Sec. 1862	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1862.
			<i>House</i>	Sec. 1862.
			<i>Conference</i>	Sec. 1862.
309.	Rural Hospital Funding. (1) Directs that the \$12.0 million GF/GP for rural and sole community hospitals, along with any Federal match, be awarded to hospitals that meet criteria established by the Department for services to low-income residents. Includes assistance with labor and delivery services as one of the criteria. (2) Limits payments for any hospital or hospital system to a maximum of 10% of the pool. (3) Directs Department to provide hospitals with the methodology for distribution by August 1. (4) Report to Legislature due by April 1.	Sec. 1866	<i>Executive</i>	Sec. 8-1866. Replaced second "and" with "," in subsection (4). Inserted ", and the state budget office" after "fiscal agencies," in subsection (4).
			<i>Senate</i>	Sec. 1866. Replaced second "and" with "," in subsection (4). Inserted ", and the state budget office" after "fiscal agencies," in subsection (4).
			<i>House</i>	Sec. 1866. Deletes subsection (4).
			<i>Conference</i>	Sec. 1866. Deletes subsection (4).

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310.	<p>Graduate Medical Education (GME). Directs the Department to collaborate with Michigan based medical schools to create a GME consortium "MiDocs". MiDocs shall help develop new freestanding residency training programs as well as redesign existing programs in order to address future concerns about physician shortages. In developing these programs special consideration will be given to small and rural hospitals with a GME program director. This language specifies the membership of MiDocs, including the Department as a non-voting member, as well as allows for the addition of other non-voting members. Once established, MiDocs will be responsible for the initial and continuing accreditation from the ACGME, financial accountability, clinical quality, and compliance, along with an annual report detailing per resident costs for medical training and clinical quality measures. Requires that the consortium be established by January 10, 2015. Allocates work project money to legally create the consortium, prepare to obtain ACGME accreditation, develop new residency programs, and prepare a report on topics listed within the language.</p>	Sec. 1870	<i>Executive</i>	Not included.
			<i>Senate</i>	<p>Sec. 1870. Language rewritten: (1) Requires the Department to work with MiDocs to create a 501(c)(3) entity to serve as the fiduciary for any state funds appropriated for a future pilot project. (2) Requires MiDocs to develop a grant mechanism to determine potential pilot funding and develop an incentive program to place residents in underserved communities. (3) Directs the Department to work with MiDocs to identify the specifics for new MiDocs residency slots with a goal of 50 residents per class. (4) Directs the Michigan area health education centers to do all of the following: (a) develop a database protocol for collecting and distributing educational and clinical quality outcomes, (b) incorporate interprofessional education best practices, (c) ascertain small hospitals willingness to train residents, (d) develop criteria and certification for clinical rotation sites, and € assist MiDocs in developing reporting tools. (5) Requires a report by December 1 on the information required by subsections (3) and (4) as well as a funding plan for a pilot project. (6) States legislative intent that a pilot project will be implemented in FY 18.</p>
			<i>House</i>	<p>Sec. 1870. Language rewritten to read: "The department shall continue to work with the MiDocs consortium to explore alternative graduate medical education financing sources and mechanisms that expand residency opportunities for primary care training, per approval from the centers for Medicare and Medicaid services. By December 1 of the current fiscal year, the MiDocs consortium shall submit a report presenting a comprehensive funding plan to the senate and house appropriations subcommittees on the department budget and the senate and house fiscal agencies."</p>

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			<i>Conference</i>	Sec. 1870. Language rewritten to read: "The department shall continue to work with the MiDocs consortium to explore alternative graduate medical education financing sources and mechanisms that expand residency opportunities for primary care training, per approval from the centers for Medicare and Medicaid services. By December 1 of the current fiscal year, the MiDocs consortium shall submit a report presenting a comprehensive funding plan to the senate and house appropriations subcommittees on the department budget and the senate and house fiscal agencies."
311.	<p>SENATE-Electronic Service Verifications (ESV). Allocates \$500,000 to develop a mobile ESV solution using biometric identity verification to reduce error and minimize fraud.</p> <p>HOUSE-Electronic Service Verification Study. Appropriates \$25,000 for a mobile electronic service verification study to review the outcomes and performance improvements of developing and piloting a mobile solution to reduce fraud in the Adult Home Help Program.</p>	NEW SENATE SECTION	<i>Executive</i> <i>Senate</i> <i>House</i> <i>Conference</i>	<p>Not included.</p> <p>Sec. 1872.</p> <p>Sec. 1912.</p> <p>Sec. 1912.</p>
312.	<p>Nursing Facility Transition Initiative. Appropriates up to \$3.7 million for outreach and education for nursing home residents, and coordination of housing. Directs the Department to consider developing a plan for the ongoing sustainability of the initiative.</p>	NEW SENATE SECTION	<i>Executive</i> <i>Senate</i> <i>House</i> <i>Conference</i>	<p>Not included.</p> <p>Sec. 1873.</p> <p>Not included.</p> <p>Sec. 1873.</p>
313.	<p>Program for All Inclusive Care for the Elderly (PACE). (1) Requires the Department to ensure that PACE is included as an option in all options counseling and enrollment brokering for aging services and managed care programs in counties where PACE is available. (2) Establishes a workgroup to</p>	NEW SENATE SECTION	<i>Executive</i> <i>Senate</i> <i>House</i>	<p>Not included.</p> <p>Sec. 1874.</p> <p>Not included.</p>

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	address, at a minimum, the following PACE program issues: (a) timely eligibility processing, (b) barriers to new enrollment, and (c) future expansion criteria. (3) Requires a report on the workgroup findings by April 1.		<i>Conference</i>	Sec. 1874.
314.	Prior Authorization for Certain Drugs. (1) Prohibits the Department from subjecting Medicaid prescriptions to prior authorization procedures if the drugs are: (a) a drug that is generally recognized in a standard medical reference or the American Psychiatric Association's diagnostic and statistical manual for treatment of a psychiatric disorder, or (b) a prescription drug that is generally recognized in a standard medical reference to treat cancer, HIV, epilepsy or seizure disorder, or organ replacement therapy. (2) Defines "prior authorization" for use in this Section.	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1875.
			<i>House</i>	Sec. 1704.
			<i>Conference</i>	Sec. 1875. Language rewritten: (1) Prohibits the department from subjecting drugs that are carved-out or not subject to prior authorization procedures as of May 9, and are recognized for the treatment of a psychiatric disorder from being subjected to prior authorization procedures. (2) Prohibits the department from subjecting drugs that are carved-out or not subject to prior authorization procedures as of May 9, and are recognized for the treatment of epilepsy, or seizure disorder, or organ replacement therapy from being subjected to prior authorization procedures. (3) Defines "prior authorization" for use in this section.
315.	MedIncentive Demonstration Project. (1) Appropriates \$830,000 to implement a demonstration project in the Healthy Michigan Plan that does all of the following: (a) target HMP enrollees above 100% of the FPL in a minimum of 2 prosperity regions, (b) implement a web-based technology to address	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1876.
			<i>House</i>	Not included.

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	deficiencies in medical literacy, and (c) identify specific behavior changes that will result. (2) Requires the demonstration project by implemented by April1 after a presentation to the legislature on the estimated cost of the demonstration, and intended measurable results. (3) Outcomes and performance measures must include: (a) total annual per capita or per-member-per-year healthcare expenditures, (b) per-member-per-year healthcare expenditures of a similar population not covered by the demonstration, and (c) analysis of other process metrics. (4) States legislative intent that, beginning with the FY 18 budget, the Department shall submit quarterly reports detailing the info required in subsection (3).		<i>Conference</i>	Sec. 1876.
316.	HMP Incentive Tracking. Requires the Department to identify metrics and data collection protocols to measure the movement of enrollees in the HMP. States that the goal is to increase utilization of high value services, decrease utilization of low value services, and increase employment opportunities. By December 31, the Department must present the first generation of the assessments.	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1877.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1877. Language rewritten to read: The department shall evaluate and report to the house and senate appropriations subcommittees on the department budget on how the Healthy Michigan plan has contributed to assisting individuals in utilizing high-value services, minimized the use of low-value services, and how individuals lives may be improving as a result of their access to services provided though the Healthy Michigan plan.
317.	Hepatitis C Tracking. Requires a report by March 1 on Hepatitis C tracking data that must include all of the following for individuals treated with a Hepatitis C treatment in the current fiscal year and any previous fiscal year: (a) total number of persons treated broken down by traditional	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1878.
			<i>House</i>	Not included.

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	Medicaid and HMP, (b) total cost of treatment, (c) total cost of treatment broken down by traditional Medicaid and HMP, (d) total amount of rebates received from purchase of Hepatitis C specialty pharmaceuticals, (e) outstanding rebates the Department expects to receive, (f) cure rate broken down by four categories, and (g) reinfection rate broken down by four categories.		<i>Conference</i>	Sec. 1878.
318.	Third Party Collections. Requires that Medicaid health plans be considered an "agent of the department" for purposes of third party collections in order to access other carrier data that is provided to the Department.	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1879.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
319.	SENATE-Direct Primary Care Pilot. (1) Appropriates funds to implement a direct primary care pilot in Wayne, Oakland, and Livingston counties. The pilot shall include 400 Medicaid enrollees from each of the six categories listed in the section. (2) Directs that each pilot participant shall be enrolled in a	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1880.
			<i>House</i>	Sec. 1701.

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	<p>direct primary care plan, but shall be eligible for claims to the managed care provider (MCO) for services not covered by the direct primary care plan. (3) Allows the Department to take out a stop loss policy to mitigate potential cost impacts, but directs that the cost of the stop loss policy will not be used to assess the success of the pilot. (4) The contract required in subsection (2) must include all of the following provisions: (a) the monthly direct primary care enrollment fee shall not exceed a weighted average of \$70/month, (b) the direct primary care provider must not accept any 3rd party payments for healthcare services, (c) the MCO must designate a participating direct primary care provider as the "gatekeeper" for the pilot participant, (d) the MCO shall not be liable for increased costs resulting from the pilot, (e) the MCO shall retain 50% of the net total savings, while the remaining 50% shall lapse to the state, and (f) allows the MCO to share their portion of the savings with the direct primary care provider. (5) Requires a quarterly report on the implementation of the pilot and specifies 12 metrics that must be included in the report. (6) Designates unexpended funds as a work project.</p> <p>HOUSE-Direct Primary Care Pilot. Directs the Department to consider implementing a Direct Primary Care Pilot for Medicaid Enrollees. Each participant in the pilot will be enrolled in a DPC provider plan that is under contract with one or more MCO. Outcomes and performance measures include, but are not limited to: (a) the number of enrollees in the pilot by Medicaid eligibility category, (b) DPC cost per enrollee, and (c) other Medicaid managed care cost savings generated from the pilot.</p>		<i>Conference</i>	Sec. 1701.
320.	Medicaid Research Activities. Requires the Department to partner with MAHP to develop and implement strategies for the use of IT services for Medicaid research. Directs the Department to make state medical assistance program data available, free of charge, to any vendors the Department	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1881.
			<i>House</i>	Not included.

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	considers qualified.		<i>Conference</i>	Not included.
321.	Michigan Health Information Network Shared Services (MHINSS) Expenses. Requires a report by October 31 on the expenses incurred by the Medicaid Health Plans and PIHPs for meeting the requirement to join MHINSS and incentivizing providers to become members of the Health Information Exchange Qualified Organization in the previous fiscal year. Report must include an estimate of expenses that will be incurred in the current fiscal year for the same purpose.	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1882.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1882. Changed "October" to "December".
322.	Observation Stay Policy. Directs the Department to consider developing an appropriate policy and rate for observation stays.	Sec. 1883	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
323.	SENATE-Private Duty Nursing. Requires the Department to increase Medicaid private duty nursing rates by 20%. HOUSE-Private Duty Nursing Rates for Frail Children. Requires the Department to increase private duty nursing rates for Medicaid beneficiaries under the age of 21 by 10%. These funds must be used to attract high quality RNs and LPNs.	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1883.
			<i>House</i>	Sec. 1702.
			<i>Conference</i>	Sec. 1702. Language rewritten to require the Department to increase private duty nursing rates for Medicaid beneficiaries under the age of 21 by 15%. These funds must be used to attract high quality RNs and LPNs.
324.	Medicaid Primary Care Physician Rates. (1) Directs the Department to increase Medicaid primary care physician rates by 6%. (2) Requires a report by April 1 on the following: (a) a list of medical specialties that were paid enhanced primary care rates in FY 16, and (b) information on the geographic	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1884.
			<i>House</i>	Not included.

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	distribution of specialists who received enhanced rates in FY 16.		<i>Conference</i>	Not included.
325.	Medicaid Health Plan Performance Standards. Directs the Department to establish contract performance standards associated with capitation withhold provisions for Medicaid health plans at least 3 months before their implementation. Fulfillment of performance standards will be based primarily on such concepts as one-year continuous enrollment and the healthcare effectiveness data and information set, HEDIS, and audited data.	Sec. 1888	<i>Executive</i>	Sec. 8-1888. Deleted "at least 3 months".
			<i>Senate</i>	Sec. 1888. Replaced first "The" with "By July 1 of the current fiscal year". Deleted "at least 3 months in advance of the implementation of those standards".
			<i>House</i>	Sec. 1888.
			<i>Conference</i>	Sec. 1888.
326.	Breast Pumps. Requires the Department to ensure that Medicaid recipients have access to breast pumps. The Department must adjust Medicaid policy to provide at least an individual double electric style pump to mothers upon prescription by a physician. If these pumps are provided through a contract with a medical equipment provider, the Department must guarantee the pumps are in stock and provide them to recipients without unnecessary delay or restriction.	Sec. 1890	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1890.
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1890.
327.	Healthy Kids Dental. (1) Directs the Department to expand the healthy kids dental program to kids between the ages of 0 and 13 in Kent, Oakland, and Wayne counties. (2) Outcomes and performance measures must include: (a) the number of Medicaid-enrolled kids from Part (1) of this Section who visited the dentist over the prior year, (b) the number of dentists in Kent, Oakland, and Wayne counties who accept Medicaid payment for services to children, and (c) the change in dental utilization in Kent, Oakland and Wayne Counties. (3) States legislative intent that the program be expanded to cover	Sec. 1894	<i>Executive</i>	Sec. 8-1894. Language rewritten: (1) Directs the Department to expand the healthy kids dental program to all kids in Kent, Oakland, and Wayne counties. (2) Outcomes and performance measures must include: (a) the number of Medicaid-enrolled kids in Kent, Oakland, and Wayne counties who visited the dentist in the prior year, (b) the number of dentists in Kent, Oakland, and Wayne counties who accept Medicaid payment, and (c) the change in dental utilization in Kent, Oakland, and Wayne counties before and after implementation.

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	additional children in the next fiscal year.		<i>Senate</i>	Sec. 1894. Language rewritten: (1) Directs the Department to expand the healthy kids dental program to all kids in Kent, Oakland, and Wayne counties. (2) Outcomes and performance measures must include: (a) the number of Medicaid-enrolled kids in Kent, Oakland, and Wayne counties who visited the dentist in the prior year, (b) the number of dentists in Kent, Oakland, and Wayne counties who accept Medicaid payment, and (c) the change in dental utilization in Kent, Oakland, and Wayne counties before and after implementation.
			<i>House</i>	Sec. 1894. Language rewritten: (1) Directs the Department to expand the healthy kids dental program to all eligible kids in Kent, Oakland, and Wayne counties. (2) Outcomes and performance measures must include: (a) the number of Medicaid-enrolled kids in Kent, Oakland, and Wayne counties who visited the dentist in the prior year, (b) the number of dentists in Kent, Oakland, and Wayne counties who accept Medicaid payment, and (c) the change in dental utilization in Kent, Oakland, and Wayne counties before and after implementation.
			<i>Conference</i>	Sec. 1894. Language rewritten: (1) Directs the Department to expand the healthy kids dental program to all eligible kids in Kent, Oakland, and Wayne counties. (2) Outcomes and performance measures must include: (a) the number of Medicaid-enrolled kids in Kent, Oakland, and Wayne counties who visited the dentist in the prior year, (b) the number of dentists in Kent, Oakland, and Wayne counties who accept Medicaid payment, and (c) the change in dental utilization in Kent, Oakland, and Wayne counties before and after implementation.
328.	Dental Homes. (1) Appropriates funds to be distributed to local health departments that partner with qualified, non-profit dental service providers for the purpose of providing dental	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1895.

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	homes. (2) In order to be considered a qualified, non-profit dental service the provider must have an effective insurance enrollment process for uninsured patients, and demonstrate an effective process of charging patients on a sliding scale. (3) Outcomes and performance measures must include the following: (a) number of uninsured patients who visited a participating dentist, (b) number of patients assisted with health insurance enrollment, and (c) a 5-year trend of the number of uninsured patients being served.		<i>House</i>	Not included.
			<i>Conference</i>	Moved to Sec. 1229. Replaced "\$100.00" with "\$1,550,000.00".
329.	Adult Dental Services. (1) Requires the Department to contract with a managed care organization to administer the Medicaid adult dental benefit. (2) The managed care contract in Part (1) of this Section will begin at least 8 months after the start date of new physical health Medicaid services contracts. (3) Outcomes and performance measures must include: (a) the number of Medicaid-enrolled adults who visited a dentist over the prior year, and (b) the number of dentists who participate in the dental managed care organizations provider network.	NEW SENATE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1896.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
330.	Personal Care Services Increase. Directs the Department to maintain the personal care services rate at the level in effect on October 1, 2014.	Sec. 1899	<i>Executive</i>	Sec. 8-1899.
			<i>Senate</i>	Sec. 1899.
			<i>House</i>	Sec. 1899. Language rewritten to read: "From the funds appropriated in part 1 for personal care services, beginning October 1, 2016, the department shall increase the monthly Medicaid personal care supplement paid to adult foster care facilities and homes for the aged that provide personal care services to Medicaid beneficiaries by \$15.00".

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			<i>Conference</i>	Sec. 1899. Language rewritten to read: "From the funds appropriated in part 1 for personal care services, beginning October 1, 2016, the department shall increase the monthly Medicaid personal care supplement paid to adult foster care facilities and homes for the aged that provide personal care services to Medicaid beneficiaries by \$15.00".
<u>ONE-TIME BASIS ONLY APPROPRIATIONS</u>				
331.	Pay for Success Contracts. (1) Permits the Department to initiate pay for success programs with private and not-for-profit vendors using fund appropriated in Part 1. These contracts will be selected through a competitive bid process and payments will not be issued to funding intermediaries or vendors until the contractual performance measures have been achieved and projects savings confirmed by a third-party evaluator. (2) Requires a copy of executed contracts be provided to the Legislature within 30 days. (3) Designates unexpended funds as work project appropriations and states that the following are in compliance with the Management and Budget Act of 1984: (a) the purpose of the projects is to coordinate cost-saving projects to the State with public-private partnerships, (b) the projects will be carried out through contracts with private and not-for-profit vendors, (c) the estimated cost of this work project is \$1.5 million, and (d) the estimated work project completion date is September 30, 2020.	Sec. 1906	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
332.	Drug Policy Initiatives. (1) Directs the Department to develop and implement a plan to address the problem of drug abuse. (2) Outcomes and performance measures must include: (a) a decrease in the number of residents above the age of 12 who have experienced substance abuse or	Sec. 1907	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Not included.

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	dependence in the last year, and (b) a decrease in the number of residents using pain relievers inappropriately or binging on alcohol. (3) Prohibits the Department from spending the funds until a statewide plan has been issued by the governor and submitted to the subcommittees on the Department budget.		<i>Conference</i>	Not included.
333.	Hospice Room and Board. Requires that funds appropriated in Part 1 for hospice services be expended to provide room and board for Medicaid recipients who meet hospice eligibility requirements and receive services at Medicaid enrolled hospice residences in the state. The qualifying hospice residences must be enrolled with Medicaid by October 1, 2015.	Sec. 1908	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 1908. Changed "The qualifying hospice residences must be enrolled with Medicaid by October 1, 2014" to "The qualifying hospice residences must have been enrolled with Medicaid by October 1, 2014".
			<i>House</i>	Not included.
			<i>Conference</i>	Sec. 1908. Changed "The qualifying hospice residences must be enrolled with Medicaid by October 1, 2014" to "The qualifying hospice residences must have been enrolled with Medicaid by October 1, 2014".
334.	Parent Partner and Family Reunification Programs. (1) Directs the Department to expand the Parent Partner Program and Family Reunification Program. (2) Outcomes and performance measures must include the (a) percentage of children that were discharged from foster care in less than 12 months, (b) median length of stay in months from removal to discharge, (c) percentage of children that re-entered foster care in less than 12 months, (d) percentage of children, who were victims of a substantiated or indicated maltreatment allegation, there were not victims of another within 6 months,	NEW EXEC. SECTION	<i>Executive</i>	Sec. 8-1909.
			<i>Senate</i>	Sec. 1909. Changed "\$10,000,000.00" to "\$3,133,300.00" in subsection (3)(c).
			<i>House</i>	Sec. 1909. Language in subsection (3) rewritten to read: "The projects will be carried out through contracts with private and not-for-profit vendors to expand the parent partner program and family reunification program to additional counties throughout the state".

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	and (e) measurable effects of this program expansion on reducing the rate of children who live in families with income below the FPL. (3) States that unexpended funds will be designated as a work project and that (a) the purpose of the project is to expand and enhance family preservation and support services, (b) the projects will be carried out through contracts with private and not-for-profit vendors, (c) the estimated cost of the work project is \$10.0 million, and (d) the estimated work project completion date is September 30, 2019.		<i>Conference</i>	Sec. 1909. Changed "\$10,000,000.00" to "\$6,098,200t.00" in subsection (3)(c).
335.	Flint Declaration of Emergency. Requires the Department to allocate funds to address needs related to the crisis. Activities may include, but are not limited to: (a) emergency nutrition assistance, nutritional and community education, food bank resources, food inspections, (b) epidemiological analysis and case management, (c) support for child and adolescent health centers, children's health care access program and pathways to potential programming, (d) nursing services, home visiting programs, (e) field operation costs, and (f) assessment of potential linkages to other diseases.	NEW EXEC. SECTION	<i>Executive</i>	Sec. 8-1910.
			<i>Senate</i>	Sec. 1910. Replaced "the Flint" to "drinking water". Replaced "issued on January 5, 2016" with "in a city in which a declaration of emergency was issued because of drinking water contamination".
			<i>House</i>	Sec. 1910. Replaced "the Flint" to "drinking water". Changed "related to the" with "in a city in which a". Inserted "was" after "emergency". Inserted "because of drinking water contamination" after "2016".
			<i>Conference</i>	Sec. 1910. Replaced "the Flint" to "drinking water". Replaced "issued on January 5, 2016" with "in a city in which a declaration of emergency was issued because of drinking water contamination".
336.	Pharmacy Reserve. Funds appropriated for the pharmacy	NEW	<i>Executive</i>	Not included.

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	reserve cannot be spent until the following conditions are met: (a) the funds have been transferred to another line item, and (b) 30 days have passed since the Department provided a report to the legislature including all of the following: (1) the pharmaceuticals that would now be covered, (2) the basis for the decision to cover these pharmaceuticals, (3) Estimate of the Gross and GF/GP cost of covering the drugs for the current and subsequent fiscal year, and (4) a list of metrics to determine the efficacy of the decision.	SENATE SECTION	<i>Senate</i>	Sec. 1911.
			<i>House</i>	Not included.
			<i>Conference</i>	Not included.
337.	Opiate Prevention Pilot. Requires the Department to develop a pilot program to develop a genomic based test to predict opioid response and abuse. The pilot program shall be operated by WMU and shall analyze archived blood samples from opiate overdose cases. Requires a report by June 1 on the results of the pilot program.	NEW HOUSE SECTION	<i>Executive</i>	Not included.
			<i>Senate</i>	Not included.
			<i>House</i>	Sec. 1911.
			<i>Conference</i>	Not included.
	<u>GENERAL INTENT SECTIONS FOR FY 2017-18</u>			
338.	Legislative Intent on FY 2017-18 Appropriations. States legislative intent that FY 2017-18 appropriations shall be the same as in FY 2016-17 except for adjustments related to caseloads, Federal match rates, economic factors, and available revenue.	Sec. 2001	<i>Executive</i>	Not included.
			<i>Senate</i>	Sec. 2001. General language with date change.
			<i>House</i>	Sec. 2001. General language with date change.
			<i>Conference</i>	Sec. 2001. General language with date change.