Act No. 150
Public Acts of 1995
Approved by the Governor
July 9, 1995
Filed with the Secretary of State
July 11, 1995

STATE OF MICHIGAN 88TH LEGISLATURE REGULAR SESSION OF 1995

Introduced by Reps. Bankes, Middleton, Dolan, Jellema, Gilmer, Johnson, McNutt, Oxender and Bobier

ENROLLED HOUSE BILL No. 4420

AN ACT to make appropriations for the department of public health for the fiscal years ending September 30, 1995 and September 30, 1996; to provide for the expenditure of those appropriations; to provide for reports; to prescribe certain powers and duties of the department of public health and certain departments; and to provide for the disposition of fees and other income received by the department of public health.

The People of the State of Michigan enact:

Sec. 101. There is appropriated for the department of public health for the fiscal year ending September 30, 1996, from the following funds:

DEPARTMENT OF PUBLIC HEALTH

| APPROPRIATION SUMMARY: | |
|----------------------------------------------------------------|-------------------|
| Full-time equated unclassified positions | |
| Full-time equated classified positions | |
| GROSS APPROPRIATION | \$ 688,007,000 |
| Interdepartmental grant revenues: | |
| Total interdepartmental grants and intradepartmental transfers | 23,653,500 |
| ADJUSTED GROSS APPROPRIATION | \$ 664,353,500 |
| Federal revenues: | |
| Total federal revenues | 351,303,500 |
| Special revenue funds: | |
| Total local revenues | 292,700 |
| Total private revenues | 36,348,800 |
| Total other state restricted revenues | 93,860,600 |
| State general fund/general purpose | \$ 182,547,900 |
| EXECUTIVE SERVICES | |
| Full-time equated unclassified positions6.0 | |
| Total full-time equated positions313.0 | |
| Unclassified positions—6.0 FTE positions | \$ 363,800 |
| Executive administration—78.5 FTE positions | 5,095,700 |
| Contractual services, supplies, and materials | 280,000 |
| Building occupancy charges | 356,700 |
| Equipment | 1,016,200 |
| Rent | 600,200 |

| | | For Fiscal Year Ending Sept. 30, 1996 |
|--------------------------------------------------------------------------------------------------------|-----|---------------------------------------------|
| Utilities | | 1,364,700 |
| Worker's compensation | | 271,800 |
| Federal contingency funds | | 15,000,000 |
| Local and private contingency funds | | 1,750,000 |
| State restricted contingency funds | | 4,000,000 |
| Health planning—11.8 FTE positions | | 945,100 |
| Joint DNR/DPH laboratory operations—8.0 FTE positions | | 960,200 |
| Management information systems—67.9 FTE positions | | 6,949,200 |
| Maternal and infant health data and evaluation—6.5 FTE positions | | 580,000 |
| Minority health grants and contracts | | 650,000 |
| Office of general services—61.5 FTE positions | | 3,672,300 |
| Office of minority health—3.0 FTE positions | | 268,400 |
| Vital records & health statistics—75.8 FTE positions | | 5,703,700 |
| GROSS APPROPRIATION | | 49,828,000 |
| | Ф | 43,020,000 |
| Appropriated from: Interdepartmental grant revenues: | | |
| . • | | 50,000 |
| Interdepartmental grant from social services | | 50,000 |
| Intradepartmental transfer-automated data processing charges | | 3,927,000 |
| Federal revenues: | | 10.007.000 |
| Total federal revenues | | 19,227,300 |
| Special revenue funds: | | 50.000 |
| Local funds | | 50,000 |
| Private funds | | 1,700,000 |
| Fees and collections | | 6,123,100 |
| Michigan health initiative fund | | 148,000 |
| State restricted-tobacco tax revenue | 4. | 256,500 |
| State general fund/general purpose | \$ | 18,346,100 |
| NFECTIOUS DISEASE CONTROL ADMINISTRATION Total full-time equated positions4.0 | | |
| Infectious disease control administration—4.0 FTE positions | | 328,000 |
| Contractual services, supplies, and materials | Ψ | 22,100 |
| GROSS APPROPRIATION | œ. | 350,100 |
| | Φ | 550,100 |
| Appropriated from: | . ф | 350,100 |
| State general fund/general purpose | •⊅ | 550,100 |
| NFECTIOUS DISEASE CONTROL Total full-time equated positions86.8 | | |
| AIDS counseling and testing | œ | 4,133,000 |
| AIDS education and outreach | | 2,193,500 |
| | | 1,006,000 |
| AIDS program administration—13.0 FTE positions | | 4,931,200 |
| AIDS referral and care network grants | | 2,835,300 |
| AIDS surveillance and prevention program—16.0 FTE positions | | , , |
| Disease surveillance—4.0 FTE positions | | 360,800 |
| Division administration—6.0 FTE positions | | 483,700 |
| Immunization local agreements | | 17,810,700 |
| Immunization program management and field support—11.0 FTE positions | | 2,079,000 |
| Lyme disease grant—0.3 FTE positions | | 75,000 |
| National vaccine compensation fund | | 9,424,200 |
| Sexually transmitted disease control local agreements. | | 2,205,700 |
| | | 2,454,400 |
| Sexually transmitted disease control management and field support—32.0 FTE positions | | |
| Sexually transmitted disease control management and field support—32.0 FTE positions | | • |
| Sexually transmitted disease control management and field support—32.0 FTE positions Tuberculosis aid | | 860,900 |
| Sexually transmitted disease control management and field support—32.0 FTE positions Tuberculosis aid | | 162,000 860,900 51,015,400 |
| Sexually transmitted disease control management and field support—32.0 FTE positions Tuberculosis aid | | 860,900 |
| Sexually transmitted disease control management and field support—32.0 FTE positions Tuberculosis aid | | 860,900 |

| | | 19945 |
|-----------------------------------------------------------------|----------------------------------------------|--------------------------------|
| Federal revenues: | | |
| Total federal revenues | | 27,593,600 |
| Special revenue funds: | | |
| Local funds | | 242,700 |
| Private funds | | 75,000 |
| Fees and collections | | 30,000 |
| Michigan health initiative fund | | 4,550,800 |
| State restricted-tobacco tax revenue | | 1,774,300 |
| Vaccine sales and processing revenue | | 11,666,800 |
| State general fund/general purpose | \$ | 3,879,200 |
| I A DOD ATOD V CEDVICES | | |
| LABORATORY SERVICES | | |
| Total full-time equated positions | (P | 5 010 000 |
| Laboratory services administration—107.8 FTE positions | Þ | 5,819,900 |
| Contractual services, supplies, and materials | | 1,766,800 |
| EPSDT blood lead screening—6.0 FTE positions | | 661,300 |
| Newborn genetic screening—24.8 FTE positions | \$ — | $\frac{1,765,700}{10,013,700}$ |
| Appropriated from: | φ | 10,010,100 |
| Interdepartmental grant revenues: | | |
| Interdepartmental grant from corrections | | 137,500 |
| Interdepartmental grant from social services | | 661,300 |
| Federal revenues: | | 001,500 |
| Total federal revenues | | 150,000 |
| | | 150,000 |
| Special revenue funds: | | 2,833,900 |
| Fees and collections | œ. | 6,231,000 |
| State general fund/general purpose | •⊅ | 0,231,000 |
| DIOI OCIÓ DDODIICTO | | |
| BIOLOGIC PRODUCTS The self-self-self-self-self-self-self-self- | | |
| Total full-time equated positions | æ | 2 241 200 |
| Biologic products administration—56.0 FTE positions | Ф | 3,241,300 |
| Contractual services, supplies, and materials | | 915,400 |
| Biologic products processing—67.0 FTE positions | | 8,127,500 |
| Contracts for projects—7.5 FTE positions | <u>. </u> | 1,052,900 |
| GROSS APPROPRIATION | Ð | 13,337,100 |
| Appropriated from: | | |
| Interdepartmental grant revenues: | | FF 400 |
| Interdepartmental grant from social services | | 55,400 |
| Federal revenues: | | 1 100 000 |
| Total federal revenues | | 1,120,000 |
| Special revenue funds: | | 0.505.000 |
| Biologic products sales and other revenues | | 8,585,200 |
| Red cross contract and processing revenues | • | 725,000 |
| State general fund/general purpose | ð | 2,851,500 |
| ENVIRONMENTAL HEALTH ADMINISTRATION AND SUPPORT SERVICES | | |
| Total full-time equated positions | | |
| Environmental health administration—5.0 FTE positions | e | 370,100 |
| Contractual services, supplies, and materials | Ψ | 21,300 |
| Health risk assessment—34.2 FTE positions | | 4,273,100 |
| · · | ę – | 4,664,500 |
| GROSS APPROPRIATION | •p | 4,004,000 |
| Appropriated from: | | |
| Interdepartmental grant revenues: | | 460,000 |
| Interdepartmental grant from natural resources | | 460,000 |
| Federal revenues: | | 9 975 000 |
| Total federal revenues | | 2,275,000 |
| Special revenue funds: | | EE 100 |
| Fees and collections | œ | 55,100 |
| State general fund/general purpose | Ð | 1,874,400 |

| COMMUNITY ENVIRONMENTAL HEALTH | | |
|-------------------------------------------------------------------------------|------|----------------------|
| Total full-time equated positions | | |
| Community environmental health administration—97.2 FTE positions | \$ | 6,864,700 |
| Contractual services, supplies, and materials | | 335,500 |
| Implementation of environmental response act | | 10,500,000 |
| Medical waste program—2.0 FTE positions | | 360,300 |
| Migratory labor housing fund | | 300,000 |
| Water laboratory certification program | | 165,000 |
| Water supply program | | 169,600 5,699,000 |
| Water system monitoring program—14.0 FTE positions | ę - | 24,394,100 |
| Appropriated from: | Φ | 24,004,100 |
| Interdepartmental grant revenues: | | 14.0 |
| Interdepartmental grant from natural resources | | 10,500,000 |
| Federal revenues: | | 20,000,000 |
| Total federal revenues | | 3,522,300 |
| Special revenue funds: | | -,,- |
| Fees and collections | | 4,540,900 |
| State general fund/general purpose | \$ | 5,830,900 |
| S | · | , , |
| OCCUPATIONAL HEALTH | | |
| Total full-time equated positions | | |
| Occupational health standards commission (\$50 per diem and related expenses) | \$ | 9,300 |
| Occupational health administration—68.4 FTE positions | | 4,625,400 |
| Contractual services, supplies, and materials | | 241,300 |
| Asbestos and lead abatement program—10.0 FTE positions | | 3,276,400 |
| Dry cleaning program—5.0 FTE positions | | 305,700 |
| Employer/employee education and training—5.0 FTE positions | | 599,400 |
| Occupational risk reporting system | | 165,800 |
| GROSS APPROPRIATION | \$ | 9,223,300 |
| Appropriated from: | | |
| Interdepartmental grant revenues: | | 000 100 |
| Interdepartmental grant from labor | | 320,100 |
| Federal revenues: | | r 702 500 |
| Total federal revenues | | 5,723,500 |
| Special revenue funds: | | 972,100 |
| Fees and collections | œ | 2,207,600 |
| State general fund/general purpose | Φ | 2,2,01,000 |
| RADIOLOGICAL HEALTH | | |
| Total full-time equated positions43.6 | | |
| Radiological health administration—33.5 FTE positions | \$ | 1,984,700 |
| Contractual services, supplies, and materials | • | 127,100 |
| Radiological health projects—10.1 FTE positions | | 1,240,800 |
| GROSS APPROPRIATION | \$ - | 3,352,600 |
| Appropriated from: | | |
| Interdepartmental grant revenues: | | |
| Interdepartmental grant from commerce, public service commission | | 555,800 |
| Federal revenues: | | |
| Total federal revenues | | 789,800 |
| Special revenue funds: | | |
| Fees and collections | | 1,234,900 |
| Sale of publications | | 4,500 |
| State general fund/general purpose | \$ | 767,600 |
| TIPAY MIL QUONDAG A DATAHOMD AMIONI | | |
| HEALTH SYSTEMS ADMINISTRATION The local time asserted positions 228.0 | | |
| Total full-time equated positions | e | 15,087,000 |
| Health systems administration—210.7 FTE positions | \$ | 568,100 |
| Contractual services, supplies, and materials | | 300,100 |

| | | For Fiscal Year Ending Sept. 30, 1996 |
|----------------------------------------------------------------------------------|----|---------------------------------------------|
| Administrative hearings—2.5 FTE positions | | 165,200 |
| Clinical laboratory improvement—6.0 FTE positions | | , |
| | | 1,000,000 |
| Emergency medical services program state staff—11.0 FTE positions | | 1,070,100 |
| Fire safety inspection | | 175,000 |
| Health facilities management information system | | 613,400 |
| Local health services—6.9 FTE positions | | 364,400 |
| Primary care services grant—1.8 FTE positions | | 167,600 |
| Training and evaluation | | 320,000 |
| GROSS APPROPRIATION | \$ | 19,530,800 |
| Appropriated from: | | |
| Interdepartmental grant revenues: | | |
| Interdepartmental grant from treasury, Michigan state hospital finance authority | | 93,400 |
| Federal revenues: | | |
| Total federal revenues | | 10,957,800 |
| Special revenue funds: | | |
| Fees and collections | | 2,669,500 |
| State restricted-tobacco tax revenue | | 468,500 |
| State general fund/general purpose | \$ | 5,341,600 |
| | | |
| HEALTH SYSTEMS LOCAL GRANTS | | |
| Communities first | \$ | 191,000 |
| Emergency medical services grants and contracts | | 962,100 |
| Indian health care | | 309,500 |
| Local public health infrastructure | | 825,300 |
| Local public health surveillance | | 2,275,000 |
| Michigan essential health care provider program | | 1,229,100 |
| Primary care services | | 1,922,200 |
| Refugee health program | | 142,300 |
| Rural health grant | | 168,800 |
| State/local cost sharing | | 32,687,300 |
| GROSS APPROPRIATION | \$ | 40,712,600 |
| Appropriated from: | * | ,, |
| Interdepartmental grant revenues: | | |
| Interdepartmental grant from social services | | 190,000 |
| Federal revenues: | | , |
| Total federal funds | | 3,186,900 |
| Special revenue funds: | | 0,100,000 |
| Private funds. | | 40,000 |
| State restricted-tobacco tax revenue | | 2,775,000 |
| State general fund/general purpose | S | 34,520,700 |
| State general fund/general purpose | Ψ | 04,020,100 |
| CENTER FOR HEALTH PROMOTION | | |
| Total full-time equated positions | | |
| AIDS and risk reduction clearinghouse and media campaign | \$ | 1,700,000 |
| Alzheimer's information network | Ψ | 150,000 |
| Cancer prevention and control program—17.0 FTE positions | | 7,955,700 |
| Center administration—4.0 FTE positions | | 314,200 |
| Chronic disease prevention—2.5 FTE positions | | 9,115,600 |
| Diabetes local agreements | | 209,900 |
| Employee wellness program grants (includes \$50.00 per diem and expenses for | | 200,000 |
| | | 2,450,000 |
| the risk reduction and AIDS policy commission) | | 1,985,000 |
| Health education, promotion, and research programs—23.0 FTE positions | | |
| Injury control intervention project—1.0 FTE positions | | 324,800 1.750.000 |
| Physical fitness, nutrition, and health—2.0 FTE positions | | 1,750,000 |
| Public health traffic safety coordination—1.0 FTE positions | | 152,600 |
| School health curriculum | | 2,000,000 |
| School health education project | | 80,000 |
| Smoking prevention program—3.2 FTE positions | | 1,487,500 |

| | | For Fiscal Year Ending Sept. 30, 1996 |
|----------------------------------------------------------------------------------|----|---------------------------------------------|
| Spinal cord and traumatic brain injury registry | | 50,000 |
| Survey and analysis—5.0 FTE positions | | 460,300 |
| Tobacco free Michigan—3.5 FTE positions | | 4,659,300 |
| Violence prevention—2.0 FTE positions | | 2,746,600 |
| GROSS APPROPRIATION | \$ | 37,591,500 |
| Appropriated from: | | |
| Federal revenues: | | |
| Total federal funds | | 11,411,100 |
| Special revenue funds: | | |
| Fees and collections | | 17,500 |
| Michigan health initiative fund | | 4,874,000 |
| Sales of publications | | 45,000 |
| State restricted-tobacco tax revenue | | 17,421,300 |
| State general fund/general purpose | \$ | 3,822,600 |
| BUREAU OF CHILD AND FAMILY SERVICES | | |
| Total full-time equated positions100.8 | | |
| Child and family services administration—90.8 FTE positions | \$ | 6,025,500 |
| Contractual services, supplies, and materials | | 1,322,500 |
| Automated data processing | | 3,490,000 |
| Special projects—10.0 FTE positions | | 2,284,300 |
| GROSS APPROPRIATION | \$ | 13,122,300 |
| Appropriated from: | | |
| Federal revenues: | | |
| Total federal revenue | | 10,526,300 |
| Special revenue funds: | | |
| Private funds | | 213,000 |
| State restricted-tobacco tax revenues | | 155,100 |
| State general fund/general purpose | \$ | 2,227,900 |
| CHILD AND FAMILY SERVICES GRANTS | | |
| Adolescent health care services | \$ | 2,892,300 |
| Children and adult respite care-reimbursement to the department of mental health | | 2,500,000 |
| Dental programs | | 460,400 |
| Early and periodic screening, diagnosis, and treatment outreach | | 7,600,000 |
| Family planning local agreements | | 7,492,600 |
| Healthy Michigan for children-reimbursement to the department of management | | |
| and budget | | 800,000 |
| Infant and child support services-reimbursement to the department of social | | |
| services | | 1,800,000 |
| Lead paint program | | 491,800 |
| Local MCH services | | 1,271,200 |
| Maternity, infant, and children's health care local agreements | | 7,034,700 |
| Migrant health care | | 166,100 |
| Poison control | | 300,000 |
| Pregnancy prevention program | | 7,243,100 |
| Prenatal care community demonstration projects | | 58,200 |
| Prenatal care outreach and service delivery support | | 8,462,100 |
| Sudden infant death syndrome program | | 121,300 |
| Women, infants, and children program local agreements and food costs | | 137,491,700 |
| GROSS APPROPRIATION | Þ | 186,185,500 |
| Appropriated from: | | |
| Interdepartmental grant revenues: | | 4 000 000 |
| Interdepartmental grant from department of social services | | 4,800,000 |
| Federal revenues: Total federal revenue | | 196 901 600 |
| | | 126,381,600 |
| Special revenue funds: Private funds | | 532,400 |
| I IIValt lulus | | 552,400 |

| | | For Fiscal Year Ending Sept. 30, 1996 |
|----------------------------------------------------------------------------|-------|---------------------------------------------|
| Private-WIC food program formula rebates | | 33,332,500 |
| State restricted-tobacco tax revenue | | 12,600,000 |
| State general fund/general purpose | \$ | 8,539,000 |
| CHILDREN'S SPECIAL HEALTH CARE SERVICES Total full-time equated positions | | |
| Program administration—84.5 FTE positions | \$ | 4,999,400 |
| Contractual services, supplies, and materials | • | 883,100 |
| Amputee program | | 184,600 |
| Bequests for care and services—2.0 FTE positions | | 810,500 |
| Case management services | | 3,923,500 |
| Conveyor contract | | 489,100 |
| Medical care and treatment | | 102,638,800 |
| Pediatric AIDS prevention and control | | 582,200 |
| Sickle cell and other genetic services | | 1,729,400 |
| GROSS APPROPRIATION | \$ | 116,240,600 |
| | •Þ | 110,240,000 |
| Appropriated from: | | |
| Interdepartmental grant revenues: | | 700 000 |
| Interdepartmental grant from mental health | | 700,000 |
| Federal revenues: | | F7 F50 000 |
| Total federal revenue | | 57,579,800 |
| Special revenue funds: | | 455 4000 |
| Private-bequests | | 455,900 |
| Fees and collections | | 5,023,600 |
| State restricted-tobacco tax revenue | | 2,750,000 |
| State general fund/general purpose | \$ | 49,731,300 |
| SUBSTANCE ABUSE PROGRAM ADMINISTRATION Total full-time equated positions | da da | 0.049.000 |
| Substance abuse program administration—38.5 FTE positions | Ð | 2,243,800 |
| Contractual services, supplies, and materials | | 136,300 |
| Federal projects—12.5 FTE positions | φ. | 1,384,300 |
| GROSS APPROPRIATION | \$ | 3,764,400 |
| Appropriated from: | | |
| Federal revenues: | | 1 001 100 |
| Total federal revenue | | 1,261,400 |
| Special revenue funds: | | 200 000 |
| State license and fine revenues | _ | 200,000 |
| State general fund/general purpose | * | 2,303,000 |
| SUBSTANCE ABUSE GRANTS AND CONTRACTS | æ | 9 100 000 |
| Chemically-dependent pregnant women and children program | •Þ | 2,100,000 |
| Community substance abuse prevention, education, and treatment grants | | 65,840,400 |
| Federal and other special projects | | 7,011,700 |
| Highway safety projects | | 337,200 |
| Medicaid reimbursement for substance abuse services | | 21,653,600 |
| Program enhancement, evaluation, and data services | | 1,137,600 |
| State disability assistance program substance abuse services | | 6,600,000 |
| GROSS APPROPRIATION | * | 104,680,500 |
| Appropriated from: | | |
| Federal revenues: | | |
| Total federal revenue | | 69,597,100 |
| Special revenue funds: | | |
| State license and fine revenues | | 1,360,000 |
| State general fund/general purpose | \$ | 33,723,400 |
| | | |

Sec. 102. There is appropriated for the department of public health for the fiscal year ending September 30, 1995 from the following funds:

| DEPARTMENT OF PUBLIC HEALTH | |
|----------------------------------------------------------------|------------------|
| APPROPRIATION SUMMARY: | |
| GROSS APPROPRIATION | \$ 12,166,200 |
| Interdepartmental grant revenues: | |
| Total interdepartmental grants and intradepartmental transfers | 0 |
| ADJUSTED GROSS APPROPRIATION | \$ 12,166,200 |
| Federal revenues: | |
| Total federal revenues | 7,166,200 |
| Special revenue funds: | |
| Total local revenues | 0 |
| Total private revenues | 0 |
| Total other state restricted revenues | 0 |
| State general fund/general purpose | \$ 5,000,000 |
| CHILDREN'S SPECIAL HEALTH CARE SERVICES | |
| Medical care and treatment | 12,166,200 |
| GROSS APPROPRIATION | \$ 12,166,200 |
| Appropriated from: | |
| Federal revenues: | |
| Total federal revenue | 7,166,200 |
| State general fund/general purpose | \$ 5,000,000 |
| | |

GENERAL SECTIONS FOR FISCAL YEAR 1994-95

Sec. 103. In accordance with the provisions of section 30 of article IX of the state constitution of 1963, total state spending in section 102 is \$5,000,000.00 and state spending to units of local government is \$0.

GENERAL SECTIONS FOR FISCAL YEAR 1995-96

Sec. 201. (1) In accordance with the provisions of section 30 of article IX of the state constitution of 1963, total state spending from state resources in this bill is \$276,408,500.00 and state appropriations to be paid to units of local government in section 101 are as follows:

| government in section for are as follows. | For Fiscal Year Ending Sept. 30, 1996 |
|----------------------------------------------------------------------------------|---------------------------------------------|
| DEPARTMENT OF PUBLIC HEALTH | |
| INFECTIOUS DISEASE CONTROL | |
| AIDS counseling and testing | 687,800 |
| AIDS referral and care network grants | 223,000 |
| Recalcitrant AIDS and tuberculosis aid | 6,500 |
| Sexually transmitted disease control local agreements | 468,600 |
| COMMUNITY ENVIRONMENTAL HEALTH Water system monitoring program | 725,000 |
| HEALTH SYSTEMS LOCAL GRANTS | |
| Local public health infrastructure | 825,300 |
| Local public health surveillance | 2,275,000 |
| Refugee health grant | 29,600 |
| State/local cost sharing | 32,687,300 |
| CENTER FOR HEALTH PROMOTION Chronic disease prevention Diabetes local agreements | 3,300,000 41,600 |

| | For Fiscal Year Ending Sept. 30, 1996 |
|-----------------------------------------------------------------------|---------------------------------------------|
| Employee wellness program grants | 2,390,000 |
| School health curriculum | 2,000,000 |
| Tobacco free Michigan | 1,200,000 |
| CHILD AND FAMILY SERVICES GRANTS | |
| Adolescent health care services | 1,300,000 |
| Dental programs | 60,000 |
| Family planning local agreements | 1,570,000 |
| Maternity, infants, and children's health care local agreements | 700,000 |
| Pregnancy prevention program | 2,250,000 |
| Prenatal care outreach and service delivery support | 2,885,000 |
| CHILDREN'S SPECIAL HEALTH CARE SERVICES Case management services | 1,433,200 |
| SUBSTANCE ABUSE GRANTS AND CONTRACTS | |
| Community substance abuse prevention, education, and treatment grants | 16,870,700 73,928,600 |

(2) When it appears to the principal executive officer of each department that state spending allocated to local units of government will be less than the amount that was projected to be expended for any quarter, the principal executive officer shall immediately give notice of the approximate shortfall to the department of management and budget, the senate and house appropriations committees, and the senate and house fiscal agencies.

Sec. 202. The appropriations made and the expenditures authorized under this act and the departments, agencies, commissions, boards, offices, and programs for which an appropriation is made under this act are subject to the management and budget act, Act No. 431 of the Public Acts of 1984, being sections 18.1101 to 18.1594 of the Michigan Compiled Laws.

Sec. 203. As used in this act:

- (a) "AIDS" means acquired immunodeficiency syndrome.
- (b) "CHASS" means community health and social services.
- (c) "Department" or "DPH" means the department of public health.
- (d) "DNR" means department of natural resources.
- (e) "EPSDT" means early and periodic screening, diagnosis, and treatment.
- (f) "FTE" means full-time equated.
- (g) "Title XVIII" means title XVIII of the social security act, chapter 531, 49 Stat. 620, 42 U.S.C. 1395 to 1395b, 1395b-2, 1395c to 1395i, 1395i-2 to 1395i-4, 1395j to 1395t, 1395u to 1395w-2, 1395w-4 to 1395zz, and 1395bbb to 1395ccc.
- (h) "Title XIX" means title XIX of the social security act, chapter 531, 49 Stat. 620, 42 U.S.C. 1396 to 1396d, 1396f to 1396g, and 1396i to 1396s.
 - (i) "WIC" means women, infants, and children.

Sec. 204. Basic health services for the fiscal year beginning October 1, 1995, for the purpose of part 23 of the public health code, Act No. 368 of the Public Acts of 1978, being sections 333.2301 to 333.2321 of the Michigan Compiled Laws, are those described by the department in its proposed program statement dated October 16, 1981, and in the "prenatal postpartum care, proposed basic health service program statement" included in the department document entitled "A Study of Prenatal Care as a Basic Service," dated March 1, 1986, and for which the legislature has made funds available in amounts necessary to ensure their availability and accessibility or a subsequent list of services developed pursuant to proposed changes in the public health code, Act No. 368 of the Public Acts of 1978, should these changes become effective during fiscal year 1995-96. The services described in the statement are: immunizations, communicable disease control, venereal disease control, tuberculosis control, prevention of gonorrhea eye infection in newborns, screening newborns for phenylketonuria, screening newborns for hypothyroidism, health/medical annex of emergency preparedness plan, licensing and surveillance of agricultural labor camps, and prenatal care. If a subsequent service list is developed, it shall be submitted to the members of the senate and house appropriations subcommittees on public health, the senate and house fiscal agencies, and the department of management and budget, who will have 30 days to review and comment prior to implementation.

Sec. 205. If the revenue collected by the department from fees and collections exceeds the amount appropriated in section 101, the revenue may be carried forward into the subsequent fiscal year. The revenue carried forward under this section shall be used as the first source of funds in the subsequent fiscal year.

Sec. 206. The department shall not pay for a billing received from a contractor or service provider that is submitted more than 12 months after the bill for good or service is provided.

Sec. 207. (1) Beginning October 1, 1995, there is a hiring freeze imposed on the state classified civil service. State departments and agencies are prohibited from hiring any new full-time state classified civil service employees or prohibited from filling any vacant state classified civil service positions. This hiring freeze does not apply to internal transfers of classified employees from 1 position to another within a department or to positions that are funded with 80% or more federal or restricted funds.

(2) The director of the department of management and budget shall grant exceptions to this hiring freeze when the director believes that the hiring freeze will result in the state department or agency being unable to deliver basic services. The director of the department of management and budget shall report by the fifteenth of each month to the chairpersons of the senate and house appropriations committees the number of exclusions to the hiring freeze approved during the previous month and the justification for the exclusion.

Sec. 208. (1) From the amounts appropriated in section 101, no greater than the following amounts are supported with federal maternal and child health, preventive health and health services, and substance abuse block grant funds:

- (a) Maternal and child health block grant \$21,633,200 (b) Preventive health and health services block grant \$6,984,800
- (2) On or before February 1, 1996, the department shall report to the house and senate appropriations subcommittees on public health, the senate and house fiscal agencies, and the department of management and budget on the amounts and federal sources of revenue that support the appropriations in each of the appropriations units in section 101 of Act No. 201 of the Public Acts of 1994.
- (3) The department shall report on or before February 1, 1996, to the same parties specified in subsection (2) on the amounts and sources of federal revenue proposed to support the total federal funds appropriated in each of the appropriations units in section 101 of the fiscal year 1996-97 executive budget proposal.

Sec. 209. The department may contract with the Michigan public health institute for the design and implementation of projects and for other public health related activities prescribed in section 2611 of the public health code, Act No. 368 of the Public Acts of 1978, being section 333.2611 of the Michigan Compiled Laws. The department may develop a master agreement with the institute for up to a 3-year period to carry out these purposes. The department shall report on projects to be carried out by the institute, expected project duration, and project cost by November 1, 1995 and May 1, 1996 to the house and senate appropriations subcommittees on public health, senate and house fiscal agencies, and the department of management and budget. If the reports are not received by the specified dates, no funds shall be disbursed. For the purposes of this section, the Michigan public health institute shall be considered a public health agency.

Sec. 210. The department of public health shall develop RFP guidelines for funds to be distributed under the tobacco tax. The guidelines shall provide opportunities for funding by nongovernmental agencies. The department shall not specify funding for any particular type of organization, except that line item that is identified as funding for local health departments. Where line item appropriations are awarded through an RFP process, the most appropriate agency or agencies agreeing to meet the department's guidelines shall be chosen. Local health departments may be offered the opportunity to administer funds to community based organizations, when the local health department is deemed appropriate and agrees to administer the contract in accordance with the department's guidance.

Sec. 211. The state departments, agencies, and commissions receiving tobacco tax funds from section 101 shall report quarterly beginning October 1, 1995, to the senate and house appropriations committees, the senate and house fiscal agencies, and the department of management and budget on the following:

- (a) Detailed spending plan by appropriation line item including description of programs.
- (b) Allocations from funds appropriated under these sections.
- (c) Description of allocations or bid processes including need or demand indicators used to determine allocations.
- (d) Eligibility criteria for program participation and maximum benefit levels where applicable.
- (e) Outcome measures to be used to evaluate programs.
- (f) Any other information deemed necessary by the house or senate appropriations committees or the department of management and budget.

Sec. 212. The use of state restricted tobacco tax revenue received for the purpose of tobacco prevention, education, and reduction efforts and deposited in the healthy Michigan fund shall not be used for lobbying as defined in Act No. 472 of the Public Acts of 1978, being sections 4.411 to 4.431 of the Michigan Compiled Laws.

Sec. 213. The department of civil service shall bill departments and/or agencies at the end of the first fiscal quarter for the 1% charges authorized by section 5 of article XI of the state constitution of 1963. Payments shall be made for the total amount of the billing by the end of the second fiscal quarter.

Sec. 214. A program for which money is appropriated under section 101 shall utilize each eligibility requirement and benefit level established for the program that was in effect on May 1, 1995, unless the legislature has enacted a modification.

Sec. 214a. Federal funds that become available after the effective date of this act and that are intended to replace federal money that had previously funded a program for which money is appropriated under section 101 shall be expended to continue that program. The continuation of a program and its funding under this section may occur by a transfer that complies with section 393 of the management and budget act, Act No. 431 of the Public Acts of 1984, being section 18.1393 of the Michigan Compiled Laws.

Sec. 214b. If after the effective date of this act the federal government appropriates money to this state that is not designated for deposit into a specified fund or designated to implement a specified state or federal program, the money shall be deposited in the state's general fund. All federal money deposited into the general fund under this section shall be appropriated from the state treasury in accordance with section 17 of article IX of the state constitution of 1963.

Sec. 215. A branch of government, a principal executive department, or a state agency that is appropriated funds in section 101 shall not use any of the funds for the purchase of foreign goods or services if competitively priced American goods or services of comparable quality are available.

Sec. 216. (1) The director of the department shall take all reasonable steps to ensure that businesses in deprived and depressed communities compete for and perform contracts to provide services or supplies, or both, for the department.

(2) The director of the department shall strongly encourage firms with which the department contracts to subcontract with businesses certified by the department of civil rights in depressed and deprived communities for services or supplies, or both.

Sec. 217. The healthy Michigan fund act requires that healthy Michigan funds shall be utilized to improve the public health of the citizens of Michigan. All unexpended funds shall lapse to the healthy Michigan fund and be available for appropriation in the following fiscal year.

Sec. 218. On April 1, 1996 and October 1, 1996, the department shall make a list available of reports prepared pursuant to the provisions of this act. The house and senate appropriations subcommittees on public health, house and senate fiscal agencies, and the department of management and budget, and the house and senate standing committees on health policy may request copies of those reports. The list of reports shall include, but shall not be limited to, the following programs in section 101:

- (a) Report on contractual services.
- (b) Vital records and health statistics.
- (c) Maternal and infant health data and evaluation.
- (d) State/local cost sharing.
- (e) Michigan health initiative fund.
- (f) Adolescent health care.
- (g) Maternity, infant and children's health care local agreements.
- (h) Prenatal care outreach and service delivery support.
- (i) Family planning local agreements.
- (i) Pregnancy prevention program.
- (k) Case management services.
- (l) Health systems local grants.

Sec. 219. No funds appropriated in section 101 shall be expended for media activities regarding the alleged dangers of naturally occurring radon gas.

Sec. 220. The source of funding for section 101 appropriation for spinal cord and traumatic brain injury registries, Arab-American-Chaldean council, and ACCESS primary care services, is the federal preventive health and health services block grant.

EXECUTIVE SERVICES

Sec. 301. The funds appropriated in section 101 in the line items identified as "federal contingency funds", "state restricted contingency funds", or "local and private contingency funds" are not available for expenditure until they have been transferred to another line item in this act pursuant to section 393(2) of the management and budget act, Act No. 431 of the Public Acts of 1984, being section 18.1393 of the Michigan Compiled Laws.

Sec. 302. Of the amount appropriated in section 101 from revenues from fees and collections, not more than \$250,000.00 received from the sale of vital records death data shall be used for improvements in the vital records and health statistics program. The amount described in this section shall not revert to the general fund at the end of the fiscal year ending September 30, 1996. Not later than December 1, 1996, the amount of any unexpended balances and the proposed uses for those balances shall be reported to the senate and house fiscal agencies.

Sec. 303. Before December 1, 1995, the department shall submit a list of projects by expenditure category to be supported with the funds appropriated in section 101 for maternal and infant health data and evaluation to the senate and house fiscal agencies. The list shall include a project that links birth outcomes to maternal participation in state funded maternal and child health programs.

Sec. 304. From the funds appropriated in section 101, the department may expend up to \$100,000.00 to print information related to reproductive issues.

INFECTIOUS DISEASE CONTROL

Sec. 401. State funds appropriated in any other account in section 101 may be used to supplant not more than \$350,000.00 in federal funds projected for immunization, if the federal funds are unavailable. The department shall inform the senate and house appropriations subcommittees on public health, senate and house fiscal agencies, and the department of management and budget of the specific line items reduced pursuant to this section.

Sec. 402. In the expenditure of funds appropriated in section 101 for AIDS programs, the department and its subcontractors shall ensure that adolescents receive priority for prevention, education, and outreach services.

Sec. 403. In developing and implementing AIDS provider education activities, the department may provide funding to the Michigan state medical society to continue to serve as lead agency to convene a consortium of health care providers, to design needed educational efforts, to fund other statewide provider groups, and to assure implementation of these efforts, in accordance with a plan approved by the department.

Sec. 404. If an employee of the department of corrections comes in contact with a prisoner and that contact involves the risk of exposure to the prisoner's blood or bodily fluids, upon the employee's request the department shall inform the employee of the results of the prisoner's HIV test if known by the department.

BIOLOGIC PRODUCTS

Sec. 501. Notwithstanding the alteration or transfer of the current operation of the biologic products division, the state has an obligation pursuant to section 9111 of the public health code, Act No. 368 of the Public Acts of 1978, being section 333.9111 of the Michigan Compiled Laws, to provide and distribute pharmaceutical, biologic, and diagnostic products at no cost upon the request of local health departments, hospitals, or physicians for use within this state. It is the intent of the legislature that any negotiation of the transfer or alteration of the biologic products division's authority to a private company to research, develop, or produce vaccines include, but not be limited to, an agreement that the state of Michigan has the first option to obtain vaccines as necessary for the immediate health needs of the residents of this state and that the vaccines be provided at a cost that reflects proportionate consideration for the use of Michigan's diphtheria and tetanus licenses and the investment in research and development of pertussis vaccine.

COMMUNITY ENVIRONMENTAL HEALTH

Sec. 601. The department shall review and certify laboratories used or intended for use in the testing of water from public water supplies in accordance with section 11 of the safe drinking water act, Act No. 399 of the Public Acts of 1976, being section 325.1011 of the Michigan Compiled Laws. The department may contract with the national sanitation foundation, international to assist in administering this section. The department may charge a fee for the review and certification. The review and certification fees charged by the department shall not exceed the fees charged by the national sanitation foundation, international for laboratory accreditation before the effective date of this section. The costs of the review and certification program shall not exceed the total amount collected from the fees.

- Sec. 602. (1) The department shall not reimburse a claim by an operator of an agricultural labor camp pursuant to sections 12431 and 12432 of the public health code, Act No. 368 of the Public Acts of 1978, being sections 333.12431 and 333.12432 of the Michigan Compiled Laws, from the amount appropriated in section 101 for migrant labor housing grants, until that portion of the labor camp utilized for migrant housing is in compliance with all state statutes and rules pertaining to the licensure of migrant labor camps as determined by on-site inspections both before and after occupancy.
- (2) The amount appropriated in section 101 for migrant labor housing grants expended by the department for remodeling projects shall only be expended on remodeling projects started after January 1, 1987. The department of public health shall report before February 1, 1996 to the department of management and budget, the senate and house appropriations subcommittees on public health, and the senate and house fiscal agencies on the utilization of the program and program expenditures. The report shall include the name of each agricultural labor camp that received a grant, the amount of the grant for each agricultural labor camp, and any amount that was received by the agricultural labor camp from any other governmental unit.
- (3) The department shall report by April 1, 1996 to the senate and house appropriations subcommittees on public health and the senate and house fiscal agencies on both of the following:
 - (a) The number of migrant labor housing units licensed in 1987 and 1995.
- (b) The percentage of migrant labor housing units in 1987 and 1995 not meeting state migrant housing licensure standards.
- (4) An agricultural labor camp operator receiving a grant from the department for remodeling from the amount appropriated in section 101 for migrant labor housing grants shall not do either of the following:
- (a) Convert a migratory housing unit that has been remodeled with grant funding to a use other than for migratory housing within 3 years after receipt of the grant.
- (b) Charge rent to an occupant of a migratory housing unit that has been remodeled with grant funding within 3 years after receipt of the grant.
- (5) If an agricultural labor camp operator violates subsection (4), the department shall institute proceedings to recover the grant funds from the operator.
- (6) The department may also expend the amount appropriated in section 101 for migrant labor housing grants for construction of new migrant labor housing. Project grants shall not exceed \$2,000.00 per unit. An applicant is not eligible for more than a \$10,000.00 grant in any fiscal year. Units shall be equivalent in construction to units approved by the farmers home administration for low interest construction loans and shall be not less than 484 square feet in size with a minimum of 1 bedroom, a kitchen, flush toilet, lavatory, and bathing facilities.
- (7) Effective October 1, 1995, only 1 valid matching grant application and/or 1 valid new migrant labor housing grant application per camp is allowed to be on file with the department. All other grant applications are to be voided.
- (8) Any unexpended migrant labor housing funds from the prior year shall be available for grants in the subsequent fiscal year.
- Sec. 603. (1) From the amounts appropriated in section 101 for migrant labor housing, no less than \$100,000.00 shall be allocated to a private, nonprofit entity for the purpose of providing matching grants for the improvement or new construction of migrant labor housing. The terms or requirements imposed on a recipient of a grant awarded for migrant labor housing improvement or new construction by a private, nonprofit entity shall be no less stringent than those imposed by the department on recipients of similar grants awarded by the department. An entity receiving funds under this section shall use no greater than 7% of the state allocation for the administration of this program.
- (2) A private nonprofit entity which receives an allocation to administer a migrant labor housing construction grant program shall give priority to grant applicants who are on the department's waiting list of applicants for migrant labor housing construction grants. The applicants for migrant labor construction grants administered by a nonprofit entity who are on the department's waiting list shall be served in the order in which they reside on the department's waiting list.

Sec. 604. It is the legislature's intent that the provisions of R 325.3623 of the Michigan administrative code requiring a 2-compartment sink and scheduled to take effect December 14, 1995 shall apply at that time only to persons who receive or have received a grant for a migrant housing improvement project under the rules and for all other persons shall begin to apply effective December 14, 1996.

HEALTH SYSTEMS LOCAL GRANTS

Sec. 701. The amount appropriated in section 101 for state/local cost sharing may be used for special grants to local health departments to satisfy minimum funding levels prescribed by section 2477 of the public health code, Act No. 368 of the Public Acts of 1978, being section 333.2477 of the Michigan Compiled Laws, and any other authorized supplement. The special grants shall not exceed a total of \$250,000.00. If proposed changes to sections 2471 to 2498 of the public health code, Act No. 368 of the Public Acts of 1978, being sections 333.2471 to 333.2498 of the Michigan Compiled Laws, are enacted during fiscal year 1994-95, the department shall adjust funding from the amount appropriated in section 101 for state/local cost sharing to comply with the revisions in the public health code.

Sec. 702. If a county receiving funding from the amount appropriated in section 101 for local public health infrastructure is part of a district health department or in an associated arrangement with other local health departments on June 1, 1992 and then ceases to be part of such an arrangement, the allocation to that county from the local public health infrastructure appropriation shall be reduced by 50% from the amount originally allocated.

Sec. 703. Of the amount appropriated in section 101 for state/local cost sharing, \$15,608,100.00 is an increase from fiscal year 1993-94. Distributions from the increased appropriation shall be made only in the counties that maintain local spending in fiscal year 1995-96 of at least the amount expended in fiscal year 1992-93.

Sec. 704. (1) Funds appropriated in section 101 for state/local cost sharing shall be allocated as follows:

- (a) To reimburse local health departments on a 50% basis of the net allowable costs for providing the following 9 required services: immunizations, infectious disease control, sexually transmitted disease control, hearing screening, vision services, food protection, public water supply, private groundwater supply, and on-site sewage management.
 - (b) As grants for core services based upon an agreed modified formula.
 - (c) As public health improvement block grants to insure that all local health departments will be held harmless.
- (2) By April 1, 1995, the department shall provide to the senate and house fiscal agencies the funding schedule for the 9 required services, core service grants, and public health improvement block grants to local health departments.

Sec. 705. The funds appropriated in section 101 for the Michigan essential health care provider program may also provide loan repayment for dentists that fit the criteria established by part 27 of the public health code, Act No. 368 of the Public Acts of 1978, being sections 333.2701 to 333.2727 of the Michigan Compiled Laws.

Sec. 706. From the amounts appropriated in section 101 for primary care services, the Arab-American-Chaldean council and the ACCESS primary care services projects shall each be allocated \$25,000.00 more than was allocated in fiscal year 1994-95.

CENTER FOR HEALTH PROMOTION

Sec. 801. By April 1, 1995, the department shall report to the senate and house fiscal agencies on the major risk factors and preventable diseases or conditions, including, but not limited to, AIDS. The report shall provide information regarding the worksite community health promotion program, the Michigan health initiative fund, and the employee wellness services program, including the actual number of persons served, the funds expended by each agency that received funds under the program, and the amount spent on direct services to employees, spouses, and retirees.

Sec. 802. From the state funds appropriated in section 101 for the center for health promotion, the department shall allocate funds to promote awareness, education, and early detection of breast, cervical, and prostate cancer, and provide for other health promotion media activities.

Sec. 803. Of the amount appropriated in section 101 for the spinal cord and traumatic brain injury registry, no less than \$35,000.00 shall be provided to the southeastern Michigan spinal cord injury system (SMSCIS) for the design and implementation of a spinal cord and traumatic brain injury registry if SMSCIS submits a proposal that is acceptable to the department.

Sec. 804. (1) The amount appropriated in section 101 for the school health curricula shall be allocated in 1995-96 to provide grants to or contract with certain districts and intermediate districts for the provision of a school health education curriculum. Provision of the curriculum, such as the Michigan model or another comprehensive school health education curriculum, shall be in accordance with the health education goals established by the Michigan model for the comprehensive school health education state steering committee. The state steering committee shall be comprised of a representative from each of the following offices and departments:

- (a) The department of education.
- (b) The department of mental health.
- (c) The department of public health.
- (d) The office of substance abuse services in the department of public health.
- (e) The department of social services.
- (f) The department of state police.
- (2) Upon written or oral request, a pupil not less than 18 years of age or a parent or legal guardian of a pupil less than 18 years of age, within a reasonable period of time after the request is made, shall be informed of the content of a course in the health education curriculum and may examine textbooks and other classroom materials that are provided to the pupil or materials that are presented to the pupil in the classroom. This subsection does not require a school board to permit pupil or parental examination of test questions and answers, scoring keys, or other examination instruments or data used to administer an academic examination.
- Sec. 805. Of the funds appropriated in section 101 for Alzheimer's information network, the department shall allocate funds to regional information and referral centers, to be used only for information and referral services.
- Sec. 806. The department shall ensure that outreach networks supported with funds appropriated in section 101 for chronic disease prevention shall cover a regional area that would serve more than 3 counties or 2 local health departments.
- Sec. 807. The funds appropriated in section 101 for physical fitness, nutrition, and health shall not be used for per diem reimbursement to members of the governor's council on physical fitness.
- Sec. 808. The funds appropriated in section 101 for physical fitness, nutrition, and health shall be distributed for the purpose of lifetime physical fitness. These activities shall include, but are not limited to, walking, jogging, aerobics, swimming, bicycling, weight training, stretching, and dance. The funds shall not be used to support team sports activities.
- Sec. 809. From the funds appropriated in section 101 for physical fitness, nutrition, and health, up to \$1,000,000.00 may be allocated to the Michigan physical fitness and sports foundation. The allocation to the Michigan physical fitness and sports foundation is contingent upon the foundation providing at least a 20% cash match.
- Sec. 810. Of the funds appropriated in section 101 for tobacco free Michigan, not less than \$50,000.00 shall be allocated for prenatal smoking cessation programs.
- Sec. 811. From the funds appropriated in section 101 for tobacco free Michigan, a maximum of 2.5% shall be allocated to adolescent health care centers that currently provide smoking prevention programs. These funds shall be distributed under the current adolescent health center allocation formula.
- Sec. 812. (1) The funds appropriated in section 101 for violence prevention shall be used for, but not be limited to, the following:
 - (a) Programs aimed at the prevention of spouse, partner, or child abuse and rape.
 - (b) Programs aimed at the prevention of workplace violence.
- (2) The emphasis of programs supported with the funds appropriated in section 101 for violence prevention and for the state coordinating council on violence shall be on prevention.
- (3) In awarding grants from the amounts appropriated in section 101 for violence prevention, the department shall give equal consideration to public and private nonprofit applicants.
- Sec. 813. From the funds appropriated in section 101 for violence prevention, the department shall include local school districts as recipients of the funds for family violence prevention programs.
- Sec. 814. (1) From the amount appropriated in section 101 for the cancer prevention and control program, \$1,000,000.00 shall be allocated to a regional cancer program operated jointly by Wayne State University, the Detroit medical center, and the Michigan cancer foundation.
 - (2) The funds for the program in subsection (1) shall be expended for the following:
 - (a) Cancer outreach and education programs.
 - (b) Evaluation of outreach and education programs.

- (c) Screening for cancer in minority communities.
- (3) None of the funds for the program in subsection (1) shall be expended for clinical research programs.
- (4) The department shall report quarterly starting January 1, 1995, to the house and senate appropriations subcommittee on public health, house and senate fiscal agencies, and the department of management and budget on all of the following:
 - (a) Detailed spending plan.
 - (b) Clients served by race.
 - (c) Communities served.
 - (d) Any other information deemed necessary by the house or senate appropriations subcommittees on public health.

CHILD AND FAMILY SERVICES GRANTS

Sec. 901. The department shall review the basis for the distribution of funds to local health departments and other public and private agencies for the women, infants, and children food supplement program; family planning; early and periodic screening, diagnosis, and treatment program; and prenatal care outreach and service delivery support program and indicate the basis upon which any projected underexpenditures by local public and private agencies shall be reallocated to other local agencies that demonstrate need.

Sec. 902. (1) Agencies receiving funds appropriated from section 101 for adolescent health care services shall meet all of the following criteria:

- (a) Require each adolescent health clinic funded by the agency to report to the department on an annual basis all of the following information:
 - (i) Funding sources of the adolescent health clinic.
 - (ii) Demographic information of populations served including sex, age, and race.
 - (iii) Utilization data that reflects the number of visits and repeat visits and types of services provided per visit.
 - (iv) Types and number of referrals to other health care agencies.
- (b) Require each local school board funded by the agency to establish a local advisory committee before the planning phase of an adolescent health clinic intended to provide services within that school district. The advisory committee shall be comprised of not less than 50% residents of the local school district, and shall not be comprised of more than 50% health care providers. A person who is employed by the sponsoring agency shall not have voting privileges as a member of the advisory committee. All advisory committee meetings shall be open to the public with at least a 1-week notice of the meeting date published in the local newspaper.
- (c) Not allow an adolescent health clinic funded by the agency, as part of the services offered, to provide abortion counseling or services or make referrals for abortion services.
- (d) If a local advisory committee established under subdivision (b) recommends that family planning be provided as a service, require that any public information brochure include family planning in its description of the entire array of services provided by the adolescent health clinic.
- (e) Require each adolescent health clinic funded by the agency to have a written policy on parental consent, developed by the local advisory committee and submitted to the local school board for approval if the services are provided in a building where instruction is provided in grades kindergarten through 12.
- (2) A local advisory committee established under subsection (1)(b), in cooperation with the sponsoring agency, shall submit written recommendations regarding the implementation and types of services rendered by an adolescent health clinic to the local school board for approval of adolescent health services rendered in a building where instruction is provided in grades kindergarten through 12.
- (3) The department shall submit a report to the members of the senate and house fiscal agencies based on the information provided under subsection (1)(a). The report is due 90 days after the end of the calendar year.

Sec. 903. Of the funds appropriated in section 101 for adolescent health care services, \$1,840,830.00 shall be allocated to teen centers as follows: \$90,000.00 base funding, and of the remaining funding 25% distributed on the number of users, 50% distributed on the number of visits, and 25% distributed on the number of services. This formula does not apply to the alternative models.

Sec. 904. Before April 1, 1995, the department shall submit a report to the house and senate fiscal agencies on planned allocations from the amounts appropriated in section 101 for maternity, infant, and children's health care local

agreements, prenatal care outreach and service delivery support, family planning local agreements, and pregnancy prevention programs. Using applicable federal definitions, the report shall include information on all of the following:

- (a) Funding allocations.
- (b) Basis for grantee selection.
- (c) Expected cost per client served by grantee.
- (d) Number of women, children, and/or adolescents expected to be served.
- (e) Expected first and third party collections by source of payment.
- (f) The extent to which grantees meet federal indicators, when applicable.
- (g) Actual numbers served and amounts expended in the categories described in subdivisions (a) to (e) for the fiscal year 1994-95.

Sec. 905. For all programs for which an appropriation is made in section 101 for child and family services grants, the department shall contract with those local public and private nonprofit agencies best able to serve clients. Factors to be used by the department in evaluating agencies under this section shall include ability to serve high-risk population groups; ability to serve low-income clients, where applicable; availability of, and access to, service sites; management efficiency; and ability to meet federal standards, where applicable.

Sec. 906. Each family planning program receiving federal title X family planning funds shall be in compliance with all performance and quality assurance indicators that the United States bureau of community health services specifies as its common reporting requirements. An agency not in compliance with the indicators shall not receive supplemental or reallocated funds.

Sec. 907. Of the amount appropriated in section 101 for prenatal care outreach and service delivery support, not more than 10% shall be expended for local administration, data processing, and evaluation.

Sec. 908. The funds appropriated in section 101 for adolescent health care services shall not be used to fund grants for planning for or community coordination of additional adolescent health care programs.

Sec. 909. (1) Subject to subsection (2), by December 1, 1995, the department shall submit a plan for the allocation of amounts appropriated in section 101 for the pregnancy prevention program to members of the house and senate fiscal agencies.

(2) In the spending of the funds appropriated for the pregnancy prevention program, the department shall continue to fund at existing levels programs to prevent teen pregnancy and programs that provide long-term implanted or injectable contraceptive devices. The department shall submit a plan for the allocation of amounts appropriated in section 101 for the pregnancy prevention program.

Sec. 910. (1) From the amount appropriated in section 101 for the pregnancy prevention program, the department shall fund 4 competitively bid demonstration projects. The projects shall increase the availability of pregnancy prevention services to persons at or below 185% of the federal poverty level, including expansion of the availability of services to substance abusing individuals. The maximum demonstration project amount shall be \$225,000.00. No more than 25% of each project's allocation may be used for innovative outreach and community awareness efforts.

- (2) The projects funded under the provisions of subsection (1) shall be located in counties with the greatest number of pregnancies of individuals age 17 and under in calendar year 1990.
 - (3) In reviewing project proposals, the department shall consider the provisions of section 912.

Sec. 911. A clinic, institution, or other health facility receiving state funding for family planning purposes shall provide to a client seeking family planning services, at initial contact, a pamphlet containing educational information to assist the patient in making responsible parenting decisions. The pamphlet shall include, but not be limited to, information regarding the physical, financial, and time commitment involved in parenting. The pamphlets required by this section shall be provided by the department. The pamphlets shall be written in English and in clear, nontechnical terms. Copies of the pamphlets shall also be printed in Spanish and distributed upon request to the clinics, institutions, and other health facilities described in this section.

Sec. 912. The legislature recognizes the importance of communicating to preteens about the importance of delaying sexual activity and therefore the legislature supports the development of abstinence programs for this age group. In addition, the legislature supports the use of comprehensive health care programs to address teen sexual activity, teenage pregnancy, and sexually transmitted diseases.

Sec. 913. The department is authorized to pursue reimbursement for family planning services for persons at or below 185% of the federal poverty level from the federal medicaid program. If the department receives such approval from the federal government, the department may receive and expend available federal funding to enhance or expand family planning services. Any such enhancement or expansion shall not result in general fund/general purpose expenditures more than existing general fund/general purpose appropriations for these purposes.

Sec. 914. Agencies that currently receive pregnancy prevention funds and either receive or are eligible for other family planning funds shall have the option of receiving all of their family planning funds directly from the department of public health and be designated as delegate agencies.

Sec. 915. The funds appropriated in section 101 for pregnancy prevention programs shall not be used to provide abortion counseling, referrals, or services.

Sec. 916. Of the funds appropriated in section 101 for poison control, the department of public health may transfer \$300,000.00 to the department of social services.

Sec. 918. In the event of a federal block grant consolidation of the women's, infants, and children supplemental food program, the department shall continue to competitively bid infant formula manufacturer rebate contracts.

Sec. 919. (1) From the amounts appropriated in section 101 for dental programs, \$150,000.00 shall be allocated to the Michigan dental association for the administration of a volunteer dental program that would provide dental services to the uninsured.

(2) Not later than November 1, 1996, the department shall report to the senate and house appropriations and standing committees on public health the number of individual patients treated, the number of procedures performed, and approximate total market value of those procedures through September 30, 1996.

Sec. 920. If federal medicaid revenues are earned in the family planning program under a federal family planning medicaid waiver, amounts appropriated from the tobacco tax equivalent to the federal medicaid earnings shall be allocated on a quarterly basis as follows:

- (a) 40% for violence prevention.
- (b) 25% for adolescent health care services.
- (c) 20% for dental programs.
- (d) 15% for prenatal care outreach and service delivery support.

CRIPPLED CHILDREN SERVICES

Sec. 1001. Money appropriated in section 101 for medical care and treatment of crippled children shall be paid according to reimbursement policies determined by the Michigan medical assistance program. Exceptions to these policies may be taken with the prior approval of the department of management and budget.

Sec. 1002. The department may do 1 or more of the following:

- (a) Provide special formula for eligible clients with specified metabolic and allergic disorders.
- (b) Provide medical care and treatment to eligible patients with cystic fibrosis who are 21 years of age or older.
- (c) Provide genetic diagnostic and counseling services for eligible families.
- (d) Provide medical care and treatment to eligible patients with hereditary coagulation defects, commonly known as hemophilia, who are 21 years of age or older.

Sec. 1003. (1) By April 1, 1995, the department shall submit a report to the members of the house and senate fiscal agencies on the crippled children case management services program. The report shall include funding allocations by local health departments or other contractors and the number of children and families expected to be served by the agency.

(2) The department shall report on the actual number of persons served and the amounts expended by each agency that received funds under the program for fiscal year 1994-95.

- Sec. 1004. (1) Before moving children dually-eligible for the children's special health care services (CSHCS) program and the medicaid program into mandatory medicaid managed care, the department of social services shall ensure that the program remain voluntary until all of the following safeguards are in place:
- (a) Informational materials about the plan, other plans available and choices families can make shall be available to assist families in making an informed choice.
 - (b) Participants will be assured access to primary care and developmentally appropriate medical specialty care.
- (c) Physician sponsors for individuals enrolled in CSHCS shall meet qualifications set forth in the CSHCS physician provider approval system. Procedures shall be developed to authorize physician sponsors to accommodate family choice for the purpose of maintaining an effective doctor-patient relationship.
- (d) The adapted plan shall provide for improved communication among providers of primary care, specialty care, and community services.
- (e) Children enrolled and their families shall have access to a simple, timely, user-friendly conflict resolution process to deal with problems related to the plan.
- (f) CSHCS, in collaboration with provider groups, shall develop training programs and information systems to build provider capacity to perform services required by CSHCS for children in the plan.
- (2) "Voluntary" means that families will take affirmative action that indicates their desire to enroll their child in a specific managed care plan before any enrollment action is taken by the departments.
- (3) The department shall provide a report on implementation of the medicaid managed care programs in the children's special health care services program to the house and senate appropriations subcommittees on public health, house and senate fiscal agencies, and the department of management and budget by September 30, 1996. This report shall summarize actions taken by the department to implement the managed care programs and include summary information on utilization costs, access to services, and summary information on consumer satisfaction measures.

SUBSTANCE ABUSE GRANTS AND CONTRACTS

Sec. 1101. Of the funds appropriated in section 101 for substance abuse, not more than 10% of state administered funds may be expended for administration of coordinating agencies.

Sec. 1102. The amount appropriated in section 101 for substance abuse prevention, education, and treatment grants shall be expended for contracting with coordinating agencies or designated service providers.

- Sec. 1103. (1) The charge of the task force on administrative efficiencies in the delivery of substance abuse services shall be to develop a plan to find administrative efficiencies to enable a greater proportion of substance abuse funding to be expended on direct services. Each of the 18 coordinating agencies may singly or jointly submit a plan to the department on administrative savings at the state or local coordinating agency level, or a combination of both. The plans must be submitted by July 31, 1995, prior to the task force meeting. The task force shall not convene prior to August 7, 1995 and shall develop a plan to implement administrative efficiencies in substance abuse administration by November 1, 1995. The task force shall consider recommendations from the coordinating agencies. Additionally, the task force shall consider state administrative savings. At least 1 of the task force members shall be a representative of the coordinating agencies.
- (2) Before administrative efficiencies are enacted, the department shall submit the changes and the impact on substance abuse coordinating agencies, programs, and services for review and approval to the members of the house and senate appropriations subcommittee on public health, house and senate fiscal agencies, and the department of management and budget.
- Sec. 1104. The funding in section 101 for substance abuse services shall be distributed in a manner so as to provide priority to service providers which furnish child care services to clients with children.
- Sec. 1105. In allocating the amount appropriated in section 101 for community substance abuse prevention, education, and treatment grants, the department shall follow federal laws and regulations.
- Sec. 1106. In spending the funds appropriated in section 101 for community substance abuse prevention, education, and treatment grants, the office of substance abuse services and its subcontractors shall ensure that chemically dependent pregnant women and women with dependent children receive priority for services.
- Sec. 1107. (1) The funds appropriated in section 101 for the state disability assistance substance abuse services program shall be used to support per diem room and board payments in substance abuse residential facilities. Eligibility

of clients for the state disability assistance substance abuse services program shall be determined in accordance with section 805 of Act No. 168 of the Public Acts of 1992.

(2) The department shall reimburse all licensed substance abuse programs eligible to participate in the program at a rate equivalent to that paid by the department of social services to adult foster care providers. Programs accredited by department-approved accrediting organizations shall be reimbursed at the personal care rate, while all other eligible programs shall be reimbursed at the domiciliary care rate.

Sec. 1108. The department and the department of social services shall initiate a transition to capitated managed care service delivery systems in the medicaid substance abuse services program. The managed care task force shall report its finding to the house and senate appropriations subcommittees prior to the implementation of the program.

Sec. 1109. If substance abuse coordinating agencies receiving funding from the amount appropriated in section 101 for substance abuse services cease to exist or merge with other coordinating agencies, or otherwise restructure, the administrative savings resulting from such a change will be redistributed to the restructured substance abuse coordinating agencies for substance abuse treatment services.

Sec. 1110. From the amounts appropriated in section 101 for substance abuse grants and contracts, the department shall allocate to the community alliance, resource, environment substance abuse program in fiscal year 1995-96 no less than the amounts allocated to that program in fiscal year 1994-95.

This act is ordered to take immediate effect.

| | Clerk of the House of Representatives. |
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| | Secretary of the Senate. |
| Approved | |
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| Governor. | |



