



Nick Lyon, Director

Department Overview

Presentation to Senate Appropriations Subcommittee

Health and Human Services

February 14, 2017



Our Guiding Principles

Mission

The Michigan Department of Health and Human Services provides opportunities, services, and programs that promote a healthy, safe, and stable environment for residents to be self-sufficient.



Vision

Develop and encourage measurable health, safety and self-sufficiency outcomes that reduce and prevent risks, promote equity, foster healthy habits, and transform the health and human services system to improve the lives of Michigan families.



Michigan Department of Health and Human Services 2017 Strategic Priorities

CHILDREN

Ensure that Michigan youth are healthy, protected, and supported on their path to adulthood.

ADULTS

Safeguard, respect, and encourage the wellbeing of Michigan adults in our communities and our care.

FAMILY SUPPORT

Support families and individuals on their road to self-sufficiency through responsive, innovative, and accessible service delivery.

HEALTH SERVICES

Transform the healthcare system and behavioral health coordination to improve outcomes for residents.

POPULATION HEALTH

Promote and protect the health, wellness, and safety of all Michigan residents.

WORKFORCE

Strengthen opportunities, promote diversity, and empower our workforce to contribute to Michigan's economic development.

MDHHS Services Statistics



- 1.7 million total average eligible - traditional Medicaid
- 1.2 million children served in Medicaid
- 380,000 people with disabilities served in Medicaid
- 656,744 individuals enrolled in Healthy Michigan Plan
- Nearly 810,000 children enrolled in Healthy Kids Dental
- Provided food assistance to 776,240 households and a total of 1,473,614 people
- 23,407 average monthly cases received cash assistance through the Family Independence Program (FIP)
- 65.1% of FIP cases met Federal Work Participation requirements
- 322,711 low-income households received basic heating assistance
- \$1.4 billion in child support payments processed
- 882,224 children in child support cases
- 827,056 emergency shelter bed nights provided
- 273,366 nights of domestic shelter services provided
- 35,063 people provided housing assistance
- Pathways to Potential in 259 Michigan schools
- 241,329 people served by CMHSPs and PIHPs
- 5 state-operated hospitals and centers
- 2,104 licensed psychiatric adult beds in the community; 260 for licensed child/adolescent psychiatric beds in the community
- 72,386 persons received substance use disorder treatment and recovery services
- 3,703 youth approved for autism applied behavior analysis
- Nearly 12,700 children in foster care
- 84,289 domestic violence and 10,198 sexual assault crisis calls answered
- More than 2,000 children adopted
- 2 state-operated secure residential facilities for juveniles
- 92,267 Children's Protective Services investigations
- 43,129 Adult Protective Services referrals
- 2 million older adults (aged 60+) in Michigan
- 1,356 received problem gambling assistance
- 10.4 million home delivered/congregate meals provided to aging population in Michigan
- 104,605 older adults received a wide variety of community-based services
- 7,073 older adults participated in volunteer programs
- 3,535 children received autism diagnostic services
- 75% of children aged 19 through 35 months of age completed the recommended vaccine series (MCIR)
- 1,755,307 doses of vaccine valued at over \$98 million distributed through the Vaccine for Children Program to providers.
- 201,684 low-income households served by Michigan Community Action Agencies
- 46,107 front-end eligibility fraud investigations conducted



Vision: Transform the Health and Human services system to improve the lives of Michigan families

Strategy

Support families and individuals on their road to self-sufficiency through responsive, innovative, and accessible service delivery.

Objectives

- Deliver services in ways that recognize and support the unique needs of each person.
- Work with partners who support and aid people in achieving self-sufficiency and independence.
- Educate and encourage individuals and communities to support healthy behaviors and lifestyles.



MDHHS Key Accomplishments

Collaboration Across Health and Human Services

- Leveraged State Emergency Relief funds to support residents whose abated homes also needed furnace or water heater replacements
- Collaborating with counties and courts to assess best practices for child care fund efforts utilizing financial reviewers and strengthening partnerships between the department and stakeholders
- Expanded health care coverage for children under 21 and pregnant women impacted by the Flint water crisis, up to 400% FPL
- Secured CMS approval to implement a groundbreaking expansion of lead abatement activities in Michigan
- Expanding Medicaid Autism Applied Behavior Analysis service to birth through age 20 and Healthy Kids Dental to cover all Medicaid-eligible children up to age 21
- Building a pilot assistance program application that reflects clients needs and provides some caseworker relief
- Continue to successfully merge processes, functions and financials and closed FY16 books under a merged \$25 billion cost allocation plan.



Flint Water Crisis Actions

Purchase of Water Resources | \$10,883,130

MDHHS has purchased 206,418 filter systems, 250,365 replacement filters, and 127,680 cases of water. In addition, MDHHS provided \$3,000,000 to DEQ to replace faucets and fixtures in approximately 4,000 homes and \$100,000 to United Way to purchase shower filters for approximately 100 homes.

Food Safety Inspections | \$500,000

MDHHS has partnered with the Genesee County Health Department to provide additional food service establishment inspections to assess compliance of water requirements. To date, 441 compliance checks have been conducted.

Food Bank Resources | \$2,047,200

MDHHS has partnered with the Food Bank of Michigan to deliver fresh produce, eggs and dairy products to Flint Residents with no income requirements. To date, 2,352,714 million pounds of food have been delivered to 95,069 citizens of Flint.

Double Up Food Bucks | \$760,000

MDHHS and the MDARD have expanded incentives to encourage greater consumption of fresh produce. Customers have brought home \$39,748 worth of additional fresh fruits and vegetables.

Children's Healthcare Access Project | \$575,000

MDHHS has partnered with the Greater Flint Health Coalition to assist children in establishing a primary care medical home and obtain timely and essential services. A total of 3,017 children have been seen since May of 2016.

Crisis Counseling | \$500,000

MDHHS has partnered with Genesee Health System to provide psychological first aid and crisis counseling to individuals or families. To date, 7,760 crisis counseling contacts have been made.



Flint Water Crisis Actions

Child and Adolescent Health Centers | \$1,522,400

MDHHS has partnered with Michigan Primary Care Association and University of Michigan to establish health centers inside of Flint community schools. Health centers are now fully staffed at three schools and MDHHS is actively working with the Flint community schools to establish more.

Pathways to Potential | \$1,020,000

MDHHS has partnered with Flint Community schools and to have a presence in every school to assist parents and children in removing barriers to success.

Non-Emergency Medical Transportation | Total Allocated: \$200,000

MDHHS partnered with the Mass Transportation authority to begin to provide same day non-emergency medical transportation. To date, 6,468 trips have been provided to 1,072 people.

Nurse Case Management | \$966,300

MDHHS has partnered with Greater Flint Health Coalition to provide nurse case management to children identified with elevated blood levels. To date, more than 100 children are receiving services.

Nurse Family Partnership | \$500,000

MDHHS has partnered with the Hurley Medical Center to provide specialized home visiting services to low income, first time mothers enrolled before the third trimester.

Lead Investigation and Abatement | \$4,152,655

MDHHS has partnered with ETC Inc. and Southeastern Michigan Health Association to provide home lead investigations and abatement. To date, 177 homes have been investigated and 110 are in the abatement process.

Flint Medicaid Waiver | \$39,300,000

MDHHS has expanded Medicaid coverage to an estimated 15,000 newly eligible beneficiaries under the waiver. As of today, there are 25,785 individuals enrolled in the waiver.

What Impacts Michigan Health?



Michigan Department of Health & Human Services
RICK SNYDER, GOVERNOR | NICK LYON, DIRECTOR



Counseling and Awareness
Warning Labels, Promoting Health



Medical Care
Treating Physical and Mental Disease



Preventive Care
Vaccines, Regular Screenings



Making Healthy Decisions Easy
Health Laws, Policy Changes



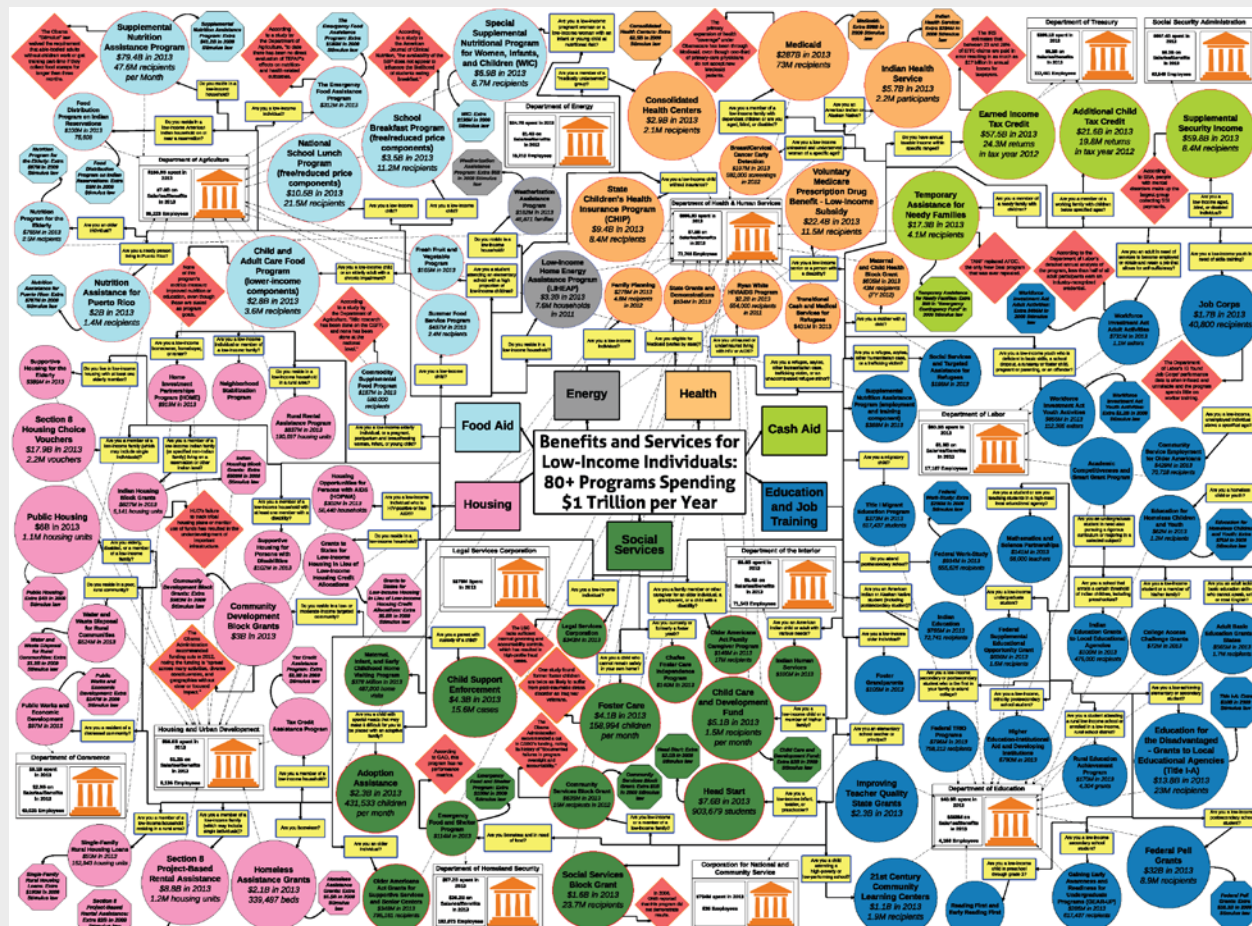
Environment and Social Factors
Education, Housing, Income, Food, Transportation, Community Safety

Most Individual Effort Needed

Biggest Health Impact

Adapted from the Centers for Disease Control and Prevention's
A Framework for Public Health Action: The Health Impact Pyramid

Where We Stand: Today's Complex System



Source: House Ways and Means Committee staff, using Congressional Research Service reports and other data.

Service Delivery Transformation



Today: Program Focus



Transactional and enrollment focused



Siloed service delivery that does not solve the root problem



Manual processes that add layers of duplication



Program focus



Limited supports that focus on a finite segment



Overloaded case workers

Tomorrow: Person Focus



Holistic, proactive, and preventative approach focused on outcomes



Government and communities collaborating to serve customers better



Highly automated, streamlined with self-service capabilities



Person focus



Providing well-rounded, localized and targeted support to maximize results



Case workers focusing on people to improve outcomes



Current ISD Focus

- **Integrated Service Delivery Portal-** An online experience guiding residents through a process which assesses needs, connects supports, and develops goals to improve stability.
- **Universal Caseload Management-** A casework system which assigns tasks to staff members working on a specific part of the casework process, allowing casework to be shared and improving efficiency.
- **Contact Center-** A streamlined customer contact point which better manages incoming phone calls and other contact types, in addition to offering more self-service options.
- **Supporting Services-** A multitude of system and information integration strategies including both technological infrastructure and data sharing arrangements which support the three main components of ISD (above).



Integrated Service Delivery Portal

Today

- MDHHS' MI Bridges portal allows residents to apply for some benefit programs and complete some self-service tasks like reporting a change or checking basic case status

Opportunity

- MDHHS can make the experience of accessing benefits and other supports simpler, more comprehensive, and proactive

FY17 Transformation

- MDHHS is developing a new portal to guide residents through a process which assesses their needs, connects residents with supports (including community resources) that meet those needs, and creates goals with customers to improve stability over time
- The portal will make common MDHHS processes easier for residents, improving their experience and providing more options for self-service
- The portal will help community partner organizations play a more significant role in helping residents access benefits and supports



Universal Caseload Management

Today

- A MDHHS customer's casework is managed by one local office staff member from start to finish, requiring staff members to maintain large caseloads and expertise on all casework tasks

Opportunity

- MDHHS can improve caseload balance for local office staff and make casework tasks more efficient to ensure timely and accurate service for customers

FY17 Transformation

- MDHHS is developing a universal caseload management system where casework tasks are assigned to groups of staff members working on a specific part of the casework process
- Instead of one staff member being responsible for all tasks in their caseload, casework will be shared across teams and offices
- Universal caseload will support a better work experience for MDHHS staff and an improved customer experience as a result of more efficient casework processes



Contact Center

Today

- The majority of MDHHS customer phone calls are directed to a single local office staff member assigned to each customer

Opportunity

- MDHHS can provide an easier and more timely way to reach the Department, including more self-service for simple interactions

FY17 Transformation

- MDHHS is implementing new technology to provide one phone number for most customer questions and interactions
- That phone number will offer self-service options over the phone and route customer calls to the most appropriate team to help
- As part of Universal caseload, some MDHHS local office staff will be organized in a virtual contact center team, managing incoming phone calls that would have previously been answered by a single assigned caseworker in real time



What's Next for ISD

- MDHHS is currently in the process of designing and developing the technological systems, business processes, program policies and readiness supports needed to move forward with practical tests of each new ISD component.
- **ISD Portal Pilot-** MDHHS is on track to complete initial ISD portal development in August 2017, followed by a pilot with customers and community partners in one county beginning in September 2017.
- **Universal Caseload and Contact Center Pilot-** MDHHS is also working to implement universal caseload and contact center components in December 2017, followed by a pilot in two counties beginning in January 2018.
- **Post-Pilot-** MDHHS intends to use both pilot experiences to refine ISD strategies and systems before transitioning into a phased statewide rollout of all three ISD components during 2018.



Healthy Michigan Plan

What Makes Michigan Unique

- The Healthy Michigan Plan (HMP) is unique in its emphasis on personal responsibility and healthy behaviors for enrollees
- HMP enrollees pay a share of the cost of the program- in the form of contributions to an account that pays a portion of the cost of services they use
 - Six months after enrolling, each enrollee begins to pay co-pays for care through a savings account called a MI Health Account. Enrollees with incomes above the federal poverty level also pay contributions (premiums) of up to 5 percent of their income into this account, to cover part of the cost of their care
- The program also uses incentives, in the form of reduced co-pays and contributions, to encourage individuals to adopt healthy behaviors, such as quitting tobacco use and losing weight
 - This aspect of HMP effectively promotes wellness, and simultaneously serves as a tool to contain costs over the long term



County	Enrollee Count	County	Enrollee Count	County	Enrollee Count
ALCONA	714	HILLSDALE	2822	MONTCALM	4052
ALGER	508	HOUGHTON	2319	MONTMORENCY	635
ALLEGAN	4988	HURON	1806	MUSKEGON	13595
ALPENA	2203	INGHAM	19885	NEWAYGO	3356
ANTRIM	1478	IONIA	3262	OAKLAND	54753
ARENAC	1142	IOSCO	2154	OCEANA	1919
BARAGA	631	IRON	792	OGEMAW	1882
BARRY	2617	ISABELLA	4147	ONTONAGON	440
BAY	7062	JACKSON	10546	OSCEOLA	1521
BENZIE	1177	KALAMAZOO	15077	OSCODA	657
BERRIEN	10264	KALKASKA	1379	OTSEGO	1785
BRANCH	2570	KENT	33793	OTTAWA	8241
CALHOUN	9364	KEWEENAW	153	PRESQUE ISLE	968
CASS	2966	LAKE	1057	ROSCOMMON	2088
CHARLEVOIX	1391	LAPEER	4976	SAGINAW	14697
CHEBOYGAN	2177	LEELANAU	837	SAINT CLAIR	10537
CHIPPEWA	2205	LENAWEE	5342	SAINT JOSEPH	3897
CLARE	2662	LIVINGSTON	5727	SANILAC	2483
CLINTON	2541	LUCE	434	SCHOOLCRAFT	603
CRAWFORD	1120	MACKINAC	648	SHIAWASSEE	4059
DELTA	2413	MACOMB	55084	TUSCOLA	3777
DICKINSON	1477	MANISTEE	1710	UNKNOWN *	522
EATON	4673	MARQUETTE	4235	VAN BUREN	5232
EMMET	2009	MASON	2037	WASHTENAW	17642
GENESEE	35962	MECOSTA	2808	WAYNE (City of Detroit)	88400
GLADWIN	1786	MENOMINEE	1336	WAYNE (excluding Detroit)	92517
GOGEBIC	1151	MIDLAND	4641	WEXFORD	2562
GRAND TRAVERSE	4846	MISSAUKEE	987	Total	656,744
GRATIOT	2351	MONROE	7482		

656,744 individuals now have access to regular, affordable preventive care through the Healthy Michigan Plan.

* County may be unknown due to the homeless population or changes in address that are currently in process.



Healthy Michigan Plan Impact

Since the program began in April 2014:

- 590,337 enrollees received a primary care visit
- 3,194,526 total primary care visits
- 465,449 preventive visits have been covered
- 321,816 enrollees received a dental visit
- 1,159,973 total dental care visits
- 15,477 enrollees received an OB visit (Antepartum, Delivery, Postpartum)
- 251,797 mammograms have been covered
- 115,869 colonoscopies/ colon cancer screenings
- Over 9,000 individuals had access to Substance Use Disorder detox and residential treatment that would not otherwise been covered
- 63% of newly eligible enrollees received a visit with their Primary Care Provider within 150 days of enrollment
- 83% of enrollees received at least one primary or preventive care visit



Healthy Michigan Plan Impact

Uncompensated Care

- For decades, hospitals across Michigan have written off the cost of hundreds of millions of dollars' worth of healthcare every year after caring for people who didn't have health insurance
- A 2015 University of Michigan study shows that soon after the passage of the Healthy Michigan Plan, many hospitals saw a major drop in this uncompensated care
- For the 88 hospitals that have reported a full year's worth of data from the post Healthy Michigan Plan era, which also represents 62 percent of all hospitals in Michigan, the amount of uncompensated care dropped by about half overall
- In 2013, these hospitals spent about 5.2 percent of their total budget on writing off the cost of unpaid care, absorbing \$627 million in total costs. In 2015, uncompensated care costs represented 2.9 percent or \$327.1 million



Healthy Michigan Plan Impact

Enrollees

- According to a University of Michigan Survey Report submitted in September 2016, 60 percent of HMP enrollees reported their ability to get primary care was better than before being enrolled in the program
- 70 percent reported that they were more likely to contact their doctor's office before going to the Emergency Department (ED)
 - As a result, far fewer enrollees reported that the ED was a regular source of care after enrolling in HMP (16% to 1.7%)
- 86 percent also reported their ability to pay medical bills has been better since enrolling in the program

State Economy

- According to an article published in the New England Journal of Medicine in February 2017, HMP has resulted in the creation of over 39,000 jobs in 2016, including nearly 22,000 jobs outside of the health care sector
- The increased personal income associated with this new employment is estimated to be nearly \$2.2 billion in 2016
- Result: ~\$145 million boost in tax revenue to the state



Strengthening and Improving Michigan's Child Welfare System

Federal Consent Decree Update: The Implementation, Sustainability, and Exit Plan (ISEP) was approved February 2, 2016.

- The ISEP permits rolling exit of individual items which sets the state on a path toward exiting federal court oversight which will decrease spending on oversight.
- The first six-month reporting period for the ISEP ended June 30, 2016. The Monitor Report and Status Court Hearing will be in the spring of 2017.

Juvenile Justice: Currently developing and enhancing of reporting capability in MiSACWIS for Juvenile Justice.

Children's Trust Fund Dispersed \$1.7 million in 2016 to support 24 child abuse prevention grants and 73 local Child Abuse Prevention Councils.

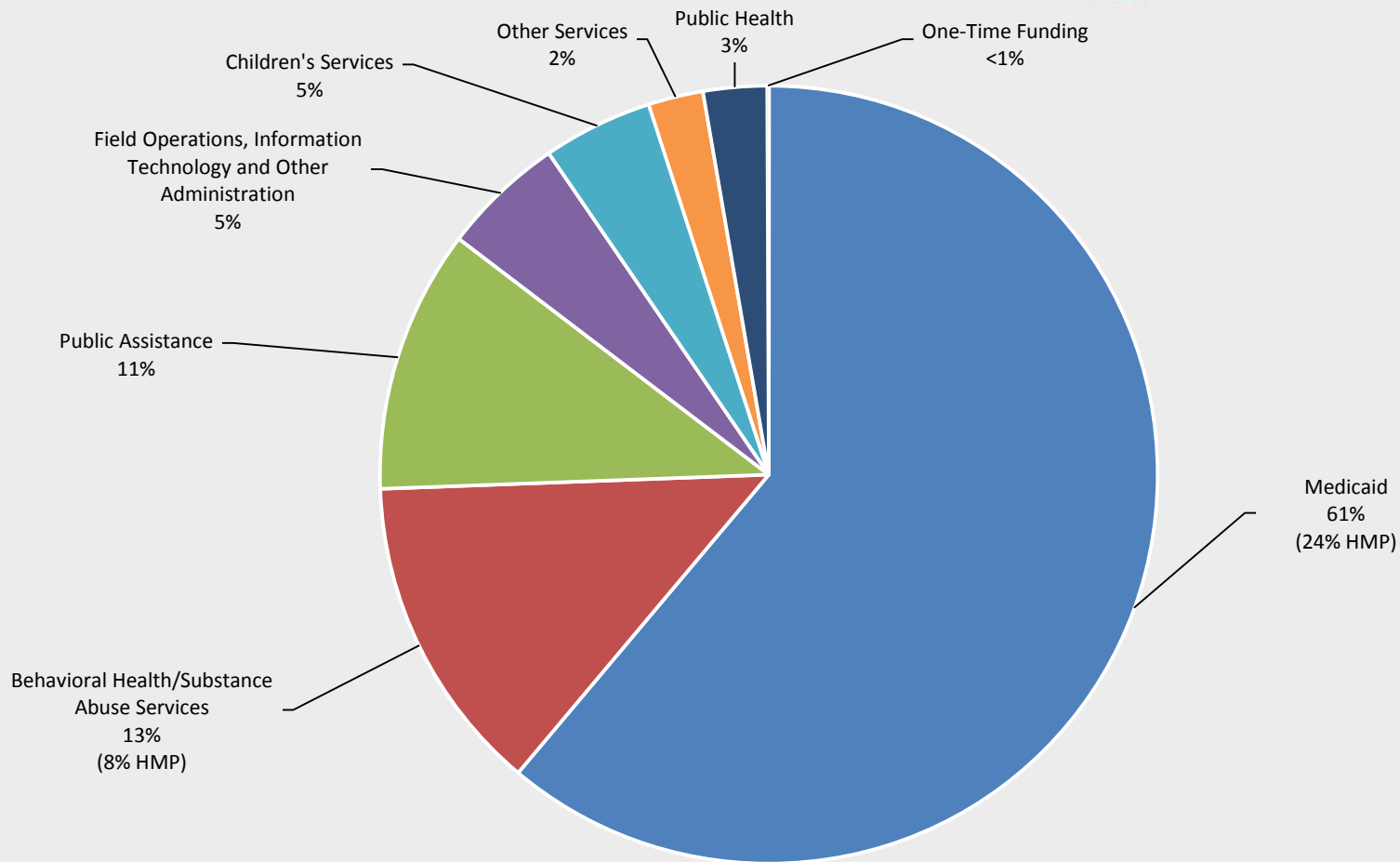
County Child Care Fund (CCF): MDHHS and our stakeholders have been engaged in a collaborative effort to rewrite CCF policies to take effect in FY 2018. This will improve the CCF budget and billing process and will ensure the successful delivery of services and support systems.

Title IV-E: MDHHS underwent a federal program review of title IV-E expenditures in September 2016. Michigan was found in substantial compliance; failure to pass this review could jeopardize over \$249 million in federal funds.



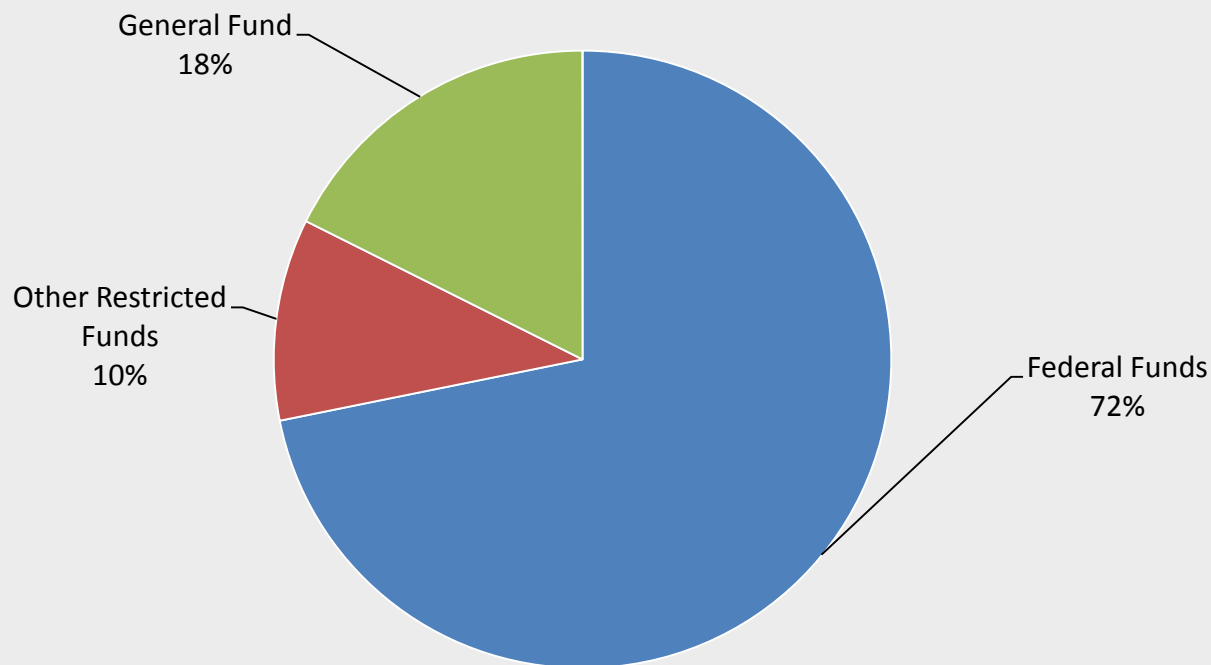
Governor Snyder's FY18 Recommendation

MDHHS 2018 Budget Recommendation





MDHHS 2018 Budget Recommendation Types of Funding





MDHHS 2018 Total Budget Recommendation

(In millions)

	Gross	GF/GP
Medicaid	\$15,611.1	\$2,041.3
Behavioral Health/Substance Abuse Services/State Hospitals	\$3,391.7	\$1,240.6
Public Assistance	\$2,794.1	\$129.9
Field Operations, Information Technology and Other Administration	\$1,299.1	\$456.1
Children's Services	\$1,167.5	\$423.4
Other Services	\$582.3	\$87.1
Public Health	\$673.2	\$77.2
One-Time Funding	\$18.4	\$6.1

MDHHS 2018 Budget Recommended Changes

(In millions)

Ongoing
GF/GP

Ongoing
HMF

Ongoing
Gross

Statewide Non-Emergency Medical Transportation Expansion	\$3.4		\$12.0
Additional Adult Services Workers	\$8.1		\$11.3
Private Agency Foster Care and Residential Provider Rate Increase	\$6.8		\$14.2
Pathways to Potential Expansion	\$3.3		\$5.6
Integrated Service Delivery/Universal Caseload and Bridges Improved Business Delivery	\$3.5		\$45.1
Emergency Shelter Program Enhancement	\$3.7		\$3.7
Foster Parent and Youth Support Expansion	\$2.8		\$3.6
Direct Care Wage Increase	\$14.2		\$45.0
State Psychiatric Hospital Staffing	\$4.9		\$7.2
Vapor Intrusion Unit	\$2.2		\$2.2
Population Health Initiatives		\$4.2	\$4.2

MDHHS 2018 Budget Recommended Changes

(In millions)	Ongoing GF/GP	Ongoing Gross	One-Time HMF	One-Time GF/GP	One-Time Gross
Increase Food Assistance Benefits Through "Heat and Eat"	\$6.8	\$6.8			
Increase Family Independence Program Clothing Allowance		\$2.7			
MDHHS Finance and Accounting Staff for SIGMA	\$0.9	\$1.8			
Eliminate Senior Services Waiting Lists	\$3.5	\$3.5			
Flint Water Crisis Actions			\$8.9	\$1.0	\$13.4
Food Bank Council of Michigan				\$0.5	\$0.5
Child Lead Poisoning Elimination Board Recommendations				\$2.0	\$2.0
Refugee Services				\$1.0	\$1.0
Autism Navigator				\$0.565	\$0.565
University Autism Funding				\$1.0	\$1.0



MDHHS 2018 Current Services Baseline Requests

FMAP Decrease

- Healthy Michigan Plan changes include an FMAP decrease from 96.25% in FY17 to 94.25% in FY18
\$55.2 M GF/GP

Actuarial Soundness

- Adjustments for Physical Health Medicaid-Traditional and HMP include a 1% increase
\$60.7 M Gross and \$24.7 M GF/GP
- Adjustment for Behavioral Health Medicaid-Traditional and HMP include a 1% increase
\$25.9 M Gross and \$15.0 M GF/GP
- Adjustment for Health Plan costs related to the reinstatement of the HMO Health Insurer Fee
\$101.5 M Gross
- Adjustment for Healthy Michigan Plan costs related to the reinstatement of the HMO Health Insurer Fee
\$65.5 M Gross



MDHHS 2018 Investments Health and Wellness

Direct Care Wage Increase

- Increase direct care wages for persons served in the Community Mental Health system
- The direct support workforce plays a critical role in securing a “great quality of life, safety, and independence” called for by the Michigan Mental Health and Wellness Commission
- \$45.0 M Gross and \$14.2 M GF/GP

State Hospitals and Centers

- Hire 72 additional staff members at the State Psychiatric Hospitals to increase the health and safety of patients and staff
- Construct a new 200-bed replacement facility for the Caro Center. The current waiting list is nearly 200 individuals
- \$7.2 M Gross and \$4.9 M GF/GP for hospital staffing
- \$115.0 M Gross included in Capital Outlay Budget for Caro Center



MDHHS 2018 Investments Health and Wellness

Statewide Non-Emergency Medical Transportation (NEMT) Expansion

- Federal regulations require Medicaid programs to ensure transportation to all eligible beneficiaries, and to provide the service in a consistent and equitable manner
- Implementation of a broader NEMT program that will improve transportation access and quality of services. It will also better coordinate inconsistencies in the administration of this benefit
- \$12.0 M Gross and \$3.4 M GF/GP

Emergency Shelter Program Enhancement

- Increase the Emergency Shelter Program per diem rate from \$12 to \$16 per bed night and require emergency shelters to provide holistic support to end homelessness
- \$3.7 M Gross and GF/GP



MDHHS 2018 Investments Health and Wellness

Child Lead Poisoning Elimination Board Recommendations

- Address the various recommendations made by the Child Lead Poisoning Elimination Board
- \$2.0 M Gross and GF/GP

Vapor Intrusion Unit

- Unit works in coordination with DEQ to address risks to public health caused by vapor intrusion
- \$2.2 M Gross and GF/GP

Population Health Initiatives

- Proposal focuses on public health drinking water and child lead prevention
- \$4.2 M Gross and HMF



MDHHS 2018 Investments Provide Support to Youth and Families

Private Child Placing Agencies and Residential Provider Rate Increase

- Increase to the per diem rates paid to Private Child Placing Agencies and Residential Foster Care providers
- Michigan relies heavily on our Private Child Placing Agencies and residential provider partners to provide case management and out-of-home care to children who cannot safely live at home with their parents
- \$14.2 M Gross and \$6.8 M GF/GP

Autism Navigator

- This proposal continues support for the Navigator program which assists families in the coordination of service options
- \$565,000 Gross and GF/GP

University Autism Funding

- This proposal continues grants to universities for the support of autism service related programs
- \$1.0 M Gross and GF/GP



MDHHS 2018 Investments Provide Support to Youth and Families

Foster Parent and Youth Support Expansion

- Implementing Regional Resource Teams in each Business Service Center to provide regional recruitment, retention and training for foster and adoptive parents
- Expanding the Michigan Youth Opportunities Initiative (MYOI) through allocation of ten additional coordinators, allowing statewide coverage (currently in 64 counties). MYOI provides programming and independent living supports to youth ages 14-25
- \$3.6 M Gross and \$2.8 M GF/GP

Pathways to Potential Expansion

- Expands the successful Pathways to Potential program to additional counties and adds 51 staff dedicated to strengthening the program and the statewide Community Resource Coordination
- Funding will also be used for resources that will prepare the Success Coaches and Mentors to be most effective in their community setting
- \$5.6 M Gross and \$3.3 M GF/GP



MDHHS 2018 Investments Provide Support to Youth and Families

Increase Food Assistance Benefits through “Heat and Eat”

- This proposal allocates funding to enable food assistance program participants to receive an extra \$75 per month of food assistance. This is a continuation of the program that was reinstated in FY17 and will affect approximately 338,000 households
- \$6.8 M Gross and GF/GP

Increase Family Independence Program Clothing Allowance by \$60 per child

- This proposal raises the clothing allowance from \$140 to \$200
- \$2.7 M Gross

Refugee Services Enhancements

- This proposal will enhance services around the state aimed at the refugee population
- \$1.0 M Gross and GF/GP



MDHHS 2018 Investments Aging and Adult Services

Increase Adult Services Workers

- The number of Adult Protective Services cases has doubled since FY 2011 from 20,500 to over 40,000
- Current adult services caseload ratio will drop from 237:1 to 200:1, providing significant caseworker relief and addressing audit findings
- \$11.3 M Gross and \$8.1 M GF/GP

Eliminate Senior Services Waiting Lists

- Target the elimination of senior services waiting lists for home delivered meals and in-home services for nearly 7,000 seniors
- As of 9/30/16 there were 2,124 seniors on the home-delivered meals and 4,767 seniors on the in-home services waiting lists
- \$3.5 M Gross and GF/GP



MDHHS 2018 Investments Systems Support and Modernization

Technology Supporting Integrated Service Delivery

- Brings together a diverse set of benefits and services in a holistic, customer-focused experience aimed at impacting health, safety and self-sufficiency outcomes
- Modernizes and integrates the systems supporting MDHHS
- \$45.1 M Gross and \$3.5 M GF/GP



MDHHS 2018 Investments Flint-Related Initiatives

Continuing Our Efforts in Ensuring a Healthy Community

- Child and Adolescent Health Center Expansion (\$650,000 HMF)
- Parents as Teachers Expansion (\$259,500 HMF)
- Children's Health Access Program (CHAP) Expansion (\$375,000 HMF)
- Water Filter Cartridges and Filter Replacements (\$1.0 M GF/GP)
- Lead Abatement Contractor Infrastructure and Workforce Development (\$180,000 HMF)
- Comprehensive Lead Poisoning Prevention (\$831,100 HMF)



MDHHS 2018 Investments Flint-Related Initiatives

Providing Health and Nutrition Education

- Nutrition Outreach and Services (\$7.8 M Gross and \$4.3 M HMF)
- Mobile Food Bank (\$1.4 M HMF)
- Breastfeeding Support Initiative (\$300,000 HMF)

Increase Access to Physical and Behavioral Health Services

- Nurse Family Partnership Expansion for first time mothers (\$500,000 HMF)



MDHHS Senate Budget Presentation Schedule

<u>Administration</u>	<u>Presenter</u>	<u>Date</u>
MDHHS Overview	Nick Lyon MDHHS Director	February 14
Children's Services Agency	Steve Yager Executive Director	February 21
Population Health and Community Services	Sue Moran Senior Deputy Director	February 23
Aging and Adult Services Agency	Richard Kline Executive Director	February 23
Medical Services Administration	Chris Priest Senior Deputy Director	February 28
Behavioral Health and Developmental Disabilities Administration	Lynda Zeller Senior Deputy Director	March 2
Field Operations Administration	Terry Beurer Senior Deputy Director	March 7
Policy, Planning & Legislative Affairs Administration	Matt Lori Senior Deputy Director	March 7
Business Integration Center	Karen Parker Senior Deputy Director	March 7



MDHHS House Budget Presentation Schedule

<u>Administration</u>	<u>Presenter</u>	<u>Date</u>
MDHHS Overview	Nick Lyon MDHHS Director	February 15
Business Integration Center	Karen Parker Senior Deputy Director	February 15
Behavioral Health and Developmental Disabilities Administration	Lynda Zeller Senior Deputy Director	February 22
Children's Services Agency	Steve Yager Executive Director	March 1
Field Operations Administration	Terry Beurer Senior Deputy Director	March 1
Medical Services Administration	Chris Priest Senior Deputy Director	March 8
Population Health and Community Services	Sue Moran Senior Deputy Director	March 15
Aging and Adult Services Agency	Richard Kline Executive Director	March 15
Policy, Planning & Legislative Affairs Administration	Matt Lori Senior Deputy Director	March 15



MDHHS Contact Info and Useful Links

Legislative Liaison: Karla Ruest

Phone: (517) 241-1939

Website: <http://www.michigan.gov/mdhhs>

Legislative Service Bureau:

[http://www.legislature.mi.gov/\(S\(n4rbq4jwj2dfwz1qybtu01cu\)\)/mileg.aspx?page=home](http://www.legislature.mi.gov/(S(n4rbq4jwj2dfwz1qybtu01cu))/mileg.aspx?page=home)