

Line Item Appropriation Department Estimates Total Annual Expenditures Would Exceed Funds 5%

(FY2021 Appropriation Act - Public Act 166 of 2020)

January 1, 2021

Sec. 251. On a monthly basis, the department shall report to the senate and house appropriations subcommittees on the department budget, the senate and house fiscal agencies, and the state budget office on any line-item appropriation for which the department estimates total annual expenditures would exceed the funds appropriated for that line-item appropriation by 5% or more. The department shall provide a detailed explanation for any relevant line-item appropriation exceedance and shall identify the connective actions undertaken to mitigate line-item appropriation expenditures from exceeding the funds appropriated for that line-item appropriation by a greater amount. This section does not apply for line-item appropriations that are part of the May revenue estimating conference caseload and expenditure estimates.



**2020 Public Act 166
Section 251 Report #3**

APPROP #	APPROP NAME	APPROPRIATED	ESTIMATED ANNUAL EXPENDITURES	ESTIMATED YEAR-END BALANCE	% ESTIMATED EXCEEDANCE	EXPLANATION FOR EXCEEDANCE	PLANNED CORRECTIVE ACTION
42850	Family Preservation Program	\$ 50,812,500	\$ 66,434,500	\$ (15,622,000)	30.7%	Recognize additional federal revenue for Family First Preservation Services Act Transition grant.	Supplemental Request 2021-1
36400	Community Substance Abuse Prevention Education and Treatment	\$ 108,333,400	\$ 144,774,300	\$ (36,440,900)	33.6%	Recognize Additional Federal Revenue - the Department was awarded SAMHSA State Opioid Response (SOR) II Grant in the amount of \$36,440,925.	Supplemental Request 2021-1
44800	Food Assistance Program Benefits	\$ 1,760,805,700	\$ 3,300,192,800	\$ (1,539,387,100)	87.4%	Recognize caseload adjustment for FAP PEBT, increase based on actual FY20 expenditures and expected future expenditures based on FY21 approval from FNS	Supplemental Request 2021-2 for the Pandemic Electronic Benefit Transfer Program (P-EBT) ; additional supplemental request will be required as well
48700A	Immunization Program	\$ 19,103,100	\$ 24,991,500	\$ (5,888,400)	30.8%	New COVID-19 Federal grant related to immunization and vaccines for children received in the amount of \$6,084,237, of which \$5,888,400 is COVID-related.	Supplemental Request 2021-2
35701	Children's Trust Fund Administration	\$ 596,300	\$ 651,300	\$ (55,000)	9.2%	Recognize additional federal revenue for Minority Health Grant	Supplemental Request
35702	Children's Trust Fund Grants	\$ 3,577,200	\$ 3,972,200	\$ (395,000)	11.0%	Recognize additional federal revenue for Minority Health Grant as well as an increase in the Community-based Child Abuse Prevention Federal Grant	Supplemental Request
64050	Settlement Monitor	\$ 2,034,100	\$ 2,144,100	\$ (110,000)	5.4%	Recognize inflationary increase to Public Catalyst contract.	Supplemental or Transfer Request
70000	Women, infants, and children program administration and special projects	\$ 18,358,700	\$ 19,399,400	\$ (1,040,700)	5.7%	USDA has directed the WIC Program to spend all fines and penalties accumulated from FY11-FY20 and has approved a plan for \$1,040,700 in private funds.	Supplemental Request
30750	AIDS prevention, testing, and care programs	\$ 63,752,200	\$ 73,252,200	\$ (9,500,000)	14.9%	With the implementation of the Affordable Care Act, some Michiganders became Medicaid eligible which reduced the private expenditures for this program. However, due to a slight increase in AIDS Drug Assistance Program (ADAP) rebates for eligible individuals, the ADAP private funds have continued to increase slightly. In Fiscal Year 2021 (FY21) the DHHS increased contracts with hospitals, health departments, and nonprofit agencies to provide additional ADAP private funds to support additional services related to HIV medical care; tobacco use reduction and intervention for people with HIV/AIDS; obesity, and hypertension program services; cancer prevention, aging services, diabetes prevention, breast feeding, informatics, and housing; and HIV care coordination. The focus is on clientele that were not Medicaid eligible or had another form of insurance to cover the high cost of services. MDHHS is establishing medical centers in underserved areas as well. Due to the additional services and the overall increase of medications in FY21, additional private authorization is needed to support these activities.	Supplemental Request