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

(FY2020 Appropriation Act - Public Act 67 of 2019)

February 1, 2020

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.



Michigan Department of Health and Human Services 2019 Public Act 67 Section 251 Report #4

				ES	TIMATED	E	STIMATED			
					ANNUAL		EAR-END	% ESTIMATED		
APPROP#	APPROP NAME	APPROPRI	ATED	EXP	ENDITURES		BALANCE	EXCEEDANCE	EXPLANATION FOR EXCEEDANCE	PLANNED CORRECTIVE ACTION
APPROP#	APPROP NAME	APPROPRI	ATED	EXP	ENDITURES		BALANCE	EXCEEDANCE	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 2020 (FY20) 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	PLANNED CORRECTIVE ACTION
									areas as well. Due to the additional services and the overall increase of medications in FY20, additional private authorization is	
30750	AIDS prevention, testing, and care programs	\$ 63,7	52,200	\$	96,502,200	\$	(32,750,000)	51.4%	needed to support these activities.	Contingency Fund Transfer or Supplemental Appropriation
									Sec. 31n.(5) of the State School Aid Act appropriated \$6.5 million to be distributed by DHHS to child and adolescent health centers to place a licensed master's level behavioral health provider in schools that currently do not have these services available to general education students, as well as Sec. 31a.(7) - At Risk Line for Child and Adolescent Health Center for CAHC Expansion in the amount of \$1.9 million. There was not a corresponding authorization	
43000	Family, maternal, and child health administration	\$ 9,7	38,300	\$	18,181,000	\$	(8,442,700)	86.7%	adjustment in the DHHS budget.	Contingency Fund Transfer or Supplemental Appropriation
68850	Violence Prevention	\$ 3,3	10,400	\$	10,310,400	\$	(7,000,000)	211.5%	Recognize federal opioid prevention and control grant.	Contingency Fund Transfer or Supplemental Appropriation
34300	Child Protection Aging and Adult Services administration		00,300		1,050,300 9,227,600		(250,000)		Recognize a federal grant to address Michigan's problem of child maltreatment injuries and fatailities, and improve child victim service delivery. Recognize private revenues from a Michigan Health Endowment Fund grant for Implementing the National Core Indicators-Aging and Disabilities.	Contingency Fund Transfer or Supplemental Appropriation Contingency Fund Transfer or Supplemental Appropriation
	Nursing Home PAS/ARR-OBRA				12,988,600		(697,300)		Increased costs in this federally required program as a result of an	Contingency Fund Transfer or Supplemental Appropriation