

This document has the following parts:

1. The February 24, 2011, JBC Staff figure setting document for the Department of Public Health And Environment.
2. Two March 16, 2011, comeback memos that alter recommendations in the figure setting document.

**COLORADO GENERAL ASSEMBLY
JOINT BUDGET COMMITTEE**



**FY 2011-12 STAFF FIGURE SETTING
DEPARTMENT OF PUBLIC HEALTH
AND ENVIRONMENT**

(Administrative and Health Divisions)

**JBC Working Document - Subject to Change
Staff Recommendation Does Not Represent Committee Decision**

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February 24, 2011**

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**FY 2011-12 FIGURE SETTING
DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT
(ADMINISTRATIVE AND HEALTH DIVISIONS)**

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**FY 2011-12 Joint Budget Committee Staff Figure Setting
Department of Public Health and Environment**

(Administrative and Health Divisions)

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|---------|-------------------------------|-------------------|
|--|----------------------|----------------------|-----------------------------|---------|-------------------------------|-------------------|

**DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT
(Administration and Health Divisions)
Executive Director: Chris Urbina**

(1) ADMINISTRATION AND SUPPORT

This division provides policy direction and support services including: accounting budgeting, facilities, procurement, internal audit, management analysis and human services. It includes the Executive Director's Office, Office of Communications, Office of Legal And Regulatory Affairs, Office of Policy and Public-Private Initiatives and the Office Of Customer Service. The primary cash funds and cash funds exempt sources include the Pollution Prevention Fund and indirect cost recoveries.

(A) Administration

| | | | | | | |
|----------------------|----------------|----------------|----------------|----------------|----------------|---------|
| Personal Services | 4,513,506 | 4,732,011 | 4,742,969 | 4,742,425 | 4,664,454 | BR #NP6 |
| FTE | <u>58.8</u> | <u>60.8</u> | <u>61.1</u> | <u>61.1</u> | <u>61.1</u> | |
| General Fund | 0 | 0 | 0 | 0 | 0 | |
| Cash Funds | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds Exempt/RF | 4,484,816 | 4,709,204 | 4,714,279 | 4,713,914 | 4,641,647 | |
| FTE | 58.6 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 28,690 | 22,807 | 28,690 | 28,511 | 22,807 | |
| FTE | 0.2 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Retirements | <u>469,915</u> | <u>481,145</u> | <u>481,145</u> | <u>481,145</u> | <u>481,145</u> | |
| Cash Funds | 0 | 0 | 0 | 0 | 0 | |
| Cash Funds Exempt/RF | 469,915 | 481,145 | 481,145 | 481,145 | 481,145 | |

| | FY 2008-09 | FY 2009-10 | FY 2010-11 | FY 2011-12 | | Change |
|---|------------------|------------------|------------------|------------------|------------------|---------|
| | Actual | Actual | Appropriation | Request | Staff Recommend | Request |
| Health, Life, and Dental | <u>2,333,057</u> | <u>2,337,971</u> | <u>6,531,678</u> | <u>7,022,045</u> | <u>7,079,144</u> | DI #3, |
| General Fund | 431,808 | 460,272 | 511,770 | 588,221 | 588,613 | DI #NP5 |
| Cash Funds | 1,464,998 | 1,318,190 | 2,250,677 | 2,442,119 | 2,463,310 | |
| Cash Funds Exempt/RF | 436,251 | 559,509 | 640,921 | 792,053 | 801,856 | |
| Federal Funds | 0 | 0 | 3,128,310 | 3,199,652 | 3,225,365 | |
| <i>Medicaid Reappropriated Funds</i> | <i>261,864</i> | <i>0</i> | <i>233,203</i> | <i>275,062</i> | <i>275,437</i> | |
| <i>GF in Medicaid RF</i> | <i>68,862</i> | <i>0</i> | <i>50,123</i> | <i>96,240</i> | <i>96,424</i> | |
| <i>Net General Fund</i> | <i>500,670</i> | <i>460,272</i> | <i>561,893</i> | <i>684,461</i> | <i>685,037</i> | |
| | | | | | | |
| Short-term Disability | <u>52,362</u> | <u>67,762</u> | <u>116,631</u> | <u>139,140</u> | <u>128,479</u> | DI #3 |
| General Fund | 7,992 | 9,160 | 8,830 | 11,523 | 11,399 | |
| Cash Funds | 30,695 | 41,788 | 40,744 | 48,307 | 45,122 | |
| Cash Funds Exempt/RF | 13,675 | 16,814 | 12,801 | 16,145 | 14,375 | |
| Federal Funds | 0 | 0 | 54,256 | 63,165 | 57,583 | |
| <i>Medicaid Reappropriated Funds</i> | <i>4,755</i> | <i>5,886</i> | <i>4,942</i> | <i>5,463</i> | <i>5,463</i> | |
| <i>GF in Medicaid RF</i> | <i>1,645</i> | <i>3,738</i> | <i>1,483</i> | <i>1,898</i> | <i>1,898</i> | |
| <i>Net General Fund</i> | <i>9,637</i> | <i>12,898</i> | <i>10,313</i> | <i>13,421</i> | <i>13,297</i> | |
| | | | | | | |
| S.B. 04-257 Amortization Equalization Disbursement | <u>642,400</u> | <u>872,322</u> | <u>1,824,646</u> | <u>2,201,140</u> | <u>2,030,344</u> | DI #3 |
| General Fund | 96,310 | 116,162 | 134,762 | 182,281 | 178,175 | |
| Cash Funds | 377,795 | 539,200 | 651,555 | 764,176 | 713,792 | |
| Cash Funds Exempt/RF | 168,295 | 216,960 | 198,220 | 255,460 | 227,459 | |
| Federal Funds | 0 | 0 | 840,109 | 999,223 | 910,918 | |
| <i>Medicaid Reappropriated Funds</i> | <i>67,815</i> | <i>88,196</i> | <i>76,513</i> | <i>86,483</i> | <i>86,483</i> | |
| <i>GF in Medicaid RF</i> | <i>8,264</i> | <i>30,199</i> | <i>14,954</i> | <i>30,060</i> | <i>30,060</i> | |
| <i>Net General Fund</i> | <i>104,574</i> | <i>146,361</i> | <i>149,716</i> | <i>212,341</i> | <i>208,235</i> | |
| | | | | | | |
| S.B. 06-235 Supplemental Amortization Equalization Disbursement | <u>280,154</u> | <u>543,934</u> | <u>1,329,452</u> | <u>1,768,990</u> | <u>1,630,786</u> | DI #3 |
| General Fund | 43,544 | 71,335 | 97,245 | 146,476 | 142,218 | |
| Cash Funds | 158,140 | 337,000 | 475,092 | 614,070 | 573,583 | |
| Cash Funds Exempt/RF | 78,470 | 135,599 | 144,535 | 205,497 | 182,997 | |
| Federal Funds | 0 | 0 | 612,580 | 802,947 | 731,988 | |
| <i>Medicaid Reappropriated Funds</i> | <i>27,285</i> | <i>47,467</i> | <i>55,791</i> | <i>69,712</i> | <i>69,712</i> | |

| | FY 2008-09 | FY 2009-10 | FY 2010-11 | FY 2011-12 | | Change |
|--|------------------|------------------|--------------------|--------------------|------------------|-------------|
| | Actual | Actual | Appropriation | Request | Staff Recommend | Request |
| <i>GF in Medicaid RF</i> | 401 | 16,250 | 11,737 | 24,263 | 24,263 | |
| <i>Net General Fund</i> | 43,945 | 87,585 | 108,982 | 170,739 | 166,481 | |
| Salary Survey and Senior Executive Service | <u>1,343,417</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | |
| General Fund | 206,252 | 0 | 0 | | 0 | |
| Cash Funds | 775,239 | 0 | 0 | | 0 | |
| Cash Funds Exempt/RF | 361,926 | 0 | 0 | | 0 | |
| Federal Funds | 0 | 0 | 0 | | 0 | |
| <i>Medicaid Reappropriated Funds</i> | 125,846 | 0 | 0 | | 0 | |
| <i>GF in Medicaid RF</i> | 34,263 | 0 | 0 | | 0 | |
| <i>Net General Fund</i> | 240,515 | 0 | 0 | 0 | 0 | |
| Performance-based Pay Awards | <u>614,627</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | |
| General Fund | 94,718 | 0 | 0 | | 0 | |
| Cash Funds | 366,046 | 0 | 0 | | 0 | |
| Cash Funds Exempt/RF | 153,863 | 0 | 0 | | 0 | |
| Federal Funds | 0 | 0 | 0 | | 0 | |
| <i>Medicaid Reappropriated Funds</i> | 53,500 | 0 | 0 | | 0 | |
| <i>GF in Medicaid RF</i> | 18,211 | 0 | 0 | | 0 | |
| <i>Net General Fund</i> | 112,929 | 0 | 0 | 0 | 0 | |
| Shift Differential | <u>0</u> | <u>0</u> | <u>14,883</u> | <u>14,546</u> | <u>Pending</u> | |
| General Fund | 0 | 0 | 0 | 230 | | |
| Cash Funds | 0 | 0 | 0 | 3,633 | | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 20 | | |
| Federal Funds | 0 | 0 | 14,883 | 10,663 | | |
| Workers' Compensation | <u>273,205</u> | <u>325,758</u> | <u>330,463</u> | <u>368,588</u> | <u>Pending</u> | |
| General Fund | 0 | 0 | 0 | 0 | | |
| Cash Funds | 0 | 0 | 0 | 0 | | |
| Cash Funds Exempt/RF | 273,205 | 325,758 | 330,463 | 368,588 | | |
| Operating Expenses | <u>1,198,755</u> | <u>1,237,364</u> | <u>1,297,907</u> S | <u>1,267,262</u> B | <u>1,262,707</u> | DI #1, BA-1 |
| Cash Funds Exempt/RF | 1,198,755 | 1,237,364 | 1,297,907 | 1,267,262 | 1,262,707 | |
| Federal Funds | 0 | 0 | 0 | 0 | 0 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|---|----------------------|----------------------|-----------------------------|---|-----------------------|-------------------------------|-------------------|
| Legal Services | <u>1,731,226</u> | <u>1,900,772</u> | <u>2,208,366</u> | S | <u>2,141,805</u> | <u>Pending</u> | DI #4 |
| <i>Hours</i> | 0 | | 28,523 | | | | |
| General Fund | 0 | 0 | 0 | | 0 | | |
| Cash Funds | 662,378 | 0 | 115,633 | | 0 | | |
| Cash Funds Exempt/RF | 941,356 | 1,900,772 | 2,092,733 | | 2,141,805 | | |
| Federal Funds | 127,492 | 0 | 0 | | 0 | | |
| Administrative Law Judge Services | <u>7,640</u> | <u>25,160</u> | <u>44,128</u> | | <u>9,369</u> | <u>Pending</u> | |
| Cash Funds Exempt/RF | 7,640 | 25,160 | 44,128 | | 9,369 | | |
| Payment to Risk Management and Property Funds | <u>155,605</u> | <u>151,439</u> | <u>51,806</u> | | <u>113,109</u> | <u>Pending</u> | |
| Cash Funds | 6,904 | 9,069 | 9,069 | | 9,069 | | |
| Cash Funds Exempt/RF | 148,701 | 142,370 | 42,737 | | 104,040 | | |
| Vehicle Lease Payments | <u>255,940</u> | <u>236,836</u> | <u>330,847</u> | S | <u>348,348</u> | <u>Pending</u> | DI #NP7 |
| General Fund | 0 | 1,081 | 1,081 | | 1,081 | | |
| Cash Funds | 158,207 | 149,402 | 244,005 | | 260,170 | | |
| Cash Funds Exempt/RF | 39,554 | 39,738 | 61,800 | | 61,450 | | |
| Federal Funds | 58,179 | 46,615 | 23,961 | | 25,647 | | |
| <i>Medicaid Reappropriated Funds</i> | 0 | 15,475 | 15,475 | | 15,475 | | |
| <i>GF in Medicaid RF</i> | 0 | 4,952 | 4,952 | | 4,952 | | |
| <i>Net General Fund</i> | 0 | 6,033 | 6,033 | | 6,033 | | |
| Leased Space | <u>4,846,326</u> | <u>5,148,502</u> | <u>6,039,316</u> | S | <u>5,909,582</u> | <u>5,883,438</u> | |
| Cash Funds | 158,402 | 158,672 | 233,106 | | 233,106 | 233,106 | |
| Cash Funds Exempt/RF | 4,663,160 | 4,977,586 | 5,767,822 | | 5,638,088 | 5,638,088 | |
| Federal Funds | 24,764 | 12,244 | 38,388 | | 38,388 | 12,244 | |
| Capitol Complex Leased Space | <u>31,663</u> | <u>32,847</u> | <u>33,037</u> | | <u>32,954</u> | <u>Pending</u> | |
| Cash Funds Exempt/RF | 31,663 | 32,847 | 33,037 | | 32,954 | | |
| Communications Services Payments | <u>6,799</u> | <u>6,799</u> | <u>6,382</u> | | <u>6,506</u> | <u>Pending</u> | |
| Cash Funds Exempt/RF | 6,799 | 6,799 | 6,382 | | 6,506 | | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| Utilities | <u>472,362</u> | <u>541,404</u> | <u>596,671</u> | <u>596,671</u> | <u>567,514</u> | |
| Cash Funds | 58,799 | 135,214 | 161,324 | 161,324 | 161,324 | |
| Cash Funds Exempt/RF | 368,943 | 390,727 | 390,727 | 390,727 | 390,727 | |
| Federal Funds | 44,620 | 15,463 | 44,620 | 44,620 | 15,463 | |
| Building Maintenance and Repair | <u>271,785</u> | <u>296,838</u> | <u>271,858</u> | <u>271,858</u> | <u>271,858</u> | |
| Cash Funds Exempt/RF | 271,785 | 296,838 | 271,858 | 271,858 | 271,858 | |
| Reimbursement for Members of the State Board of Health | <u>5,413</u> | <u>5,050</u> | <u>4,500</u> | <u>4,500</u> | <u>4,500</u> | |
| General Fund | 4,500 | 4,500 | 4,500 | 4,500 | 4,500 | |
| Cash Funds Exempt/RF | 913 | 550 | 0 | 0 | 0 | |
| Indirect Cost Assessment | <u>401,909</u> | <u>481,788</u> | <u>448,913</u> | <u>406,197</u> | <u>Pending</u> | BA NP-14 |
| Cash Funds | 183,696 | 196,292 | 207,941 | 207,941 | | |
| Cash Funds Exempt/RF | 1,936 | 95,759 | 95,759 | 53,043 | | |
| Federal Funds | 216,277 | 189,737 | 145,213 | 145,213 | | |
| SUBTOTAL - (A) Administration | 19,908,066 | 19,425,702 | 26,705,598 | 27,846,180 | 24,004,369 | |
| FTE | <u>58.8</u> | <u>60.8</u> | <u>61.1</u> | <u>61.1</u> | <u>61.1</u> | |
| General Fund | 885,124 | 662,510 | 758,188 | 934,312 | 924,905 | |
| Cash Funds | 4,401,299 | 2,884,827 | 4,389,146 | 4,743,915 | 4,190,237 | |
| Cash Funds Exempt/RF | 14,121,621 | 15,591,499 | 16,627,254 | 16,809,924 | 13,912,859 | |
| Federal Funds | 500,022 | 286,866 | 4,931,010 | 5,358,029 | 4,976,368 | |
| <i>Medicaid Reappropriated Funds</i> | <i>541,065</i> | <i>157,024</i> | <i>385,924</i> | <i>452,195</i> | <i>437,095</i> | |
| <i>GF in Medicaid RF</i> | <i>131,646</i> | <i>55,139</i> | <i>83,249</i> | <i>157,413</i> | <i>152,645</i> | |
| <i>Net General Fund</i> | <i>1,016,770</i> | <i>717,649</i> | <i>841,437</i> | <i>1,091,725</i> | <i>1,077,550</i> | |
| (B) Special Health Programs | | | | | | |
| (1) Health Disparities Program | | | | | | |
| Personal Services | 409,812 | 402,377 | 403,863 | 267,670 | 397,720 | BR #NP2, |
| FTE | <u>6.4</u> | 6.0 | <u>6.3</u> | <u>4.3</u> | <u>6.3</u> | BR #NP6 |
| General Fund | 51,246 | 49,917 | 49,676 | 49,067 | 49,323 | BA NP-14 |
| FTE | 0.6 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds Exempt/RF (Amendment 35) | 358,566 | 352,460 | 354,187 | 218,603 | 348,397 | |
| FTE | 5.8 | 0.0 | 0.0 | 0.0 | 0.0 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|---|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|----------------------|
| Operating Expenses | <u>36,946</u> | <u>28,168</u> | <u>35,838</u> | <u>25,663</u> B | <u>65,838</u> | BA NP-14, |
| General Fund | 6,931 | 6,931 | 6,931 | 6,931 | 6,931 | BA NP-16 |
| Cash Funds Exempt/RF (Amendment 35) | 30,015 | 21,237 | 28,907 | 18,732 | 58,907 | |
| Health Disparities Grants - CFE/RF | 2,980,718 | 4,076,396 | 712,713 | 523,415 | 3,531,904 | BR #NP3, BA NP-14 |
| SUBTOTAL - (B) Health Disparities Program | 3,427,476 | 4,506,941 | 1,152,414 | 816,748 | 3,995,462 | |
| FTE | <u>6.4</u> | <u>6.0</u> | <u>6.3</u> | <u>4.3</u> | <u>6.3</u> | |
| General Fund | 58,177 | 56,848 | 56,607 | 55,998 | 56,254 | |
| Cash Funds Exempt/RF | 3,369,299 | 4,450,093 | 1,095,807 | 760,750 | 3,939,208 | |
| (C) Local Public Health Planning and Support | | | | | | |
| Assessment and Planning Program | 530,487 | 543,333 | 661,389 S | 661,941 | 664,285 | BR #NP2, BR #NP6 |
| FTE | <u>5.2</u> | <u>6.1</u> | <u>8.4</u> | <u>8.4</u> | <u>8.4</u> | |
| General Fund | 259,974 | 308,320 | 306,536 | 304,098 | 305,600 | BA NP-16 |
| FTE | 2.2 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds | 48,282 | 15,631 | 137,851 | 139,396 | 139,303 | |
| FTE | 0.6 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 222,231 | 219,382 | 217,002 | 218,447 | 219,382 | |
| FTE | 2.4 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Distributions to Local Public Health Agencies | 8,439,892 | <u>8,540,933</u> | <u>8,249,086</u> | <u>8,249,086</u> B | <u>8,040,835</u> | BA NP-16 |
| General Fund | 5,962,731 | 5,962,731 | 5,962,731 | 5,962,731 | 5,962,731 | |
| Cash Funds (Tobacco Settlement) | 2,477,161 | 2,578,202 | 2,286,355 | 2,286,355 | 2,078,104 | |
| Cash Funds Exempt/RF (Tobacco Settlement) | 0 | 0 | 0 | 0 | 0 | |
| Environmental Health Services Not Provided by Local Health Departments - GF | 234,296 | 241,726 | 242,358 | 242,358 | 242,358 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|---|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| SUBTOTAL - (C) LOCAL PUBLIC HEALTH | | | | | | |
| PLANNING AND SUPPORT | 9,204,675 | 9,325,992 | 9,152,833 | 9,153,385 | 8,947,478 | |
| FTE | 5.2 | 6.1 | <u>8.4</u> | <u>8.4</u> | <u>8.4</u> | |
| General Fund | 6,457,001 | 6,512,777 | 6,511,625 | 6,509,187 | 6,510,689 | |
| FTE | 2.2 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds | 2,525,443 | 2,593,833 | 2,424,206 | 2,425,751 | 2,217,407 | |
| FTE | 0.6 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| Federal Funds | 222,231 | 219,382 | 217,002 | 218,447 | 219,382 | |
| FTE | 2.4 | 0.0 | 0.0 | 0.0 | 0.0 | |
| | | | | | | |
| (D) Special Environmental Programs | | | | | | |
| Program Costs | 1,382,637 | 1,076,277 | 945,479 | 947,363 | 1,169,041 | BR #NP6 |
| FTE | <u>9.6</u> | <u>9.9</u> | <u>7.8</u> | <u>7.8</u> | <u>0.0</u> | |
| Cash Funds | 170,299 | 162,941 | 255,824 | 256,348 | 255,705 | |
| FTE | 2.3 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| Federal Funds | 1,212,338 | 913,336 | 689,655 | 691,015 | 913,336 | |
| FTE | 7.3 | 0.0 | 0.0 | 0.0 | 0.0 | |
| | | | | | | |
| Animal Feeding Operations (AFO) Program | 53,880 | 442,596 | 474,339 | 469,201 B | 464,960 | BR #NP6 |
| FTE | 0.5 | 3.2 | 3.5 | 3.5 | 0.0 | BA NP-16 |
| General Fund | 0 | 100,000 | 100,000 | 100,000 | 100,000 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds | 53,880 | 342,596 | 374,339 | 369,201 | 364,960 | |
| FTE | 0.5 | 0.0 | 0.0 | 0.0 | 0.0 | |
| | | | | | | |
| Recycling Resources Economic Opportunity Program - CF | 2,047,005 | 1,864,726 | 2,640,716 | 1,853,846 | 1,852,324 | BR #NP6 |
| FTE | 1.6 | 1.6 | 1.6 | 1.6 | 1.6 | |
| | | | | | | |
| Advanced Technology Research Grants | <u>551,515</u> | <u>1,082,107</u> | <u>0</u> | <u>0</u> | <u>0</u> | |
| Cash Funds | 551,515 | 1,082,107 | 0 | 0 | 0 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| Oil and Gas Consultation, Personal Services - CF | 0 | 128,219 | 110,904 | 108,208 | 106,544 | BR #NP6 |
| FTE | 0.0 | 1.4 | 1.0 | 1.0 | 1.0 | |
| Oil and Gas Consultation, Operating Expenses - CF | 0 | 1,214 | 9,789 | 9,789 | 9,789 | |
| Innovative Higher Education Research Fund - CF | 0 | 0 | 0 S | 0 | 0 | |
| Waste Tire Program Costs - CF | 0 | 0 | 3,052,850 | 3,367,663 | 3,366,509 | |
| FTE | 0.0 | 0 | 0.8 | 1.0 | 1.0 | |
| SUBTOTAL - (D) Special Environmental Programs | 4,035,037 | 4,595,139 | 7,234,077 | 6,756,070 | 6,969,167 | |
| FTE | <u>11.7</u> | <u>16.1</u> | <u>14.7</u> | <u>14.9</u> | <u>3.6</u> | |
| General Fund | 0 | 100,000 | 100,000 | 100,000 | 100,000 | |
| Cash Funds | 2,822,699 | 3,581,803 | 6,444,422 | 5,965,055 | 5,955,831 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| Federal Funds | 1,212,338 | 913,336 | 689,655 | 691,015 | 913,336 | |
| TOTAL - (1) ADMINISTRATION AND SUPPORT | 36,575,254 | 37,853,774 | 44,244,922 | 44,572,383 | 43,916,476 | |
| FTE | <u>82.1</u> | <u>89.0</u> | <u>90.5</u> | <u>88.7</u> | <u>79.4</u> | |
| General Fund | 7,400,302 | 7,332,135 | 7,426,420 | 7,599,497 | 7,591,848 | |
| Cash Funds | 9,749,441 | 9,060,463 | 13,257,774 | 13,134,721 | 12,363,475 | |
| Cash Funds Exempt/RF | 17,490,920 | 20,041,592 | 17,723,061 | 17,570,674 | 17,852,067 | |
| Federal Funds | 1,934,591 | 1,419,584 | 5,837,667 | 6,267,491 | 6,109,086 | |
| <i>Medicaid Reappropriated Funds</i> | <i>541,065</i> | <i>157,024</i> | <i>385,924</i> | <i>452,195</i> | <i>437,095</i> | |
| <i>GF in Medicaid RF</i> | <i>131,646</i> | <i>55,139</i> | <i>83,249</i> | <i>157,413</i> | <i>152,645</i> | |
| <i>Net General Fund</i> | <i>7,531,948</i> | <i>7,387,274</i> | <i>7,509,669</i> | <i>7,756,910</i> | <i>7,744,493</i> | |

(2) CENTER FOR HEALTH AND ENVIRONMENTAL INFORMATION (CHEIS)

The Health Statistics and Vital Records section maintains data for all births, deaths, marriages, and marriage dissolutions; tracks data for internal and external use; and provides records to other agencies and the public.

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|---|----------------------|----------------------|-----------------------------|---|-----------------------|-------------------------------|-------------------|
| (A) Health Statistics and Vital Records | | | | | | | |
| Personal Services | 3,254,370 | 3,206,607 | 5,968,038 | S | 4,868,689 | B 4,944,611 | DI #1, DI #3, |
| FTE | 51.1 | 53.1 | 68.9 | | 69.4 | 69.4 | BR #NP2, |
| General Fund | 0 | 0 | 0 | | 0 | 0 | BR #NP6 |
| Cash Funds | 1,970,418 | 2,076,450 | 4,921,572 | | 3,814,172 | 3,812,151 | BA-1, BA-2 |
| Cash Funds Exempt/RF | 101,148 | 3,550 | 3,514 | | 5,872 | 5,853 | |
| Federal Funds | 1,182,804 | 1,126,607 | 1,042,952 | | 1,048,645 | 1,126,607 | |
| <i>Medicaid Reappropriated Funds</i> | 3,550 | 3,550 | 3,514 | | 5,872 | 5,890 | |
| <i>GF in Medicaid RF</i> | 1,775 | 1,608 | 1,757 | | 2,936 | 2,945 | |
| <i>Net General Fund</i> | 1,775 | 1,608 | 1,757 | | 2,936 | 2,945 | |
| Operating Expenses | 307,866 | 316,445 | 597,409 | S | 420,531 | B 438,394 | DI #1 |
| Cash Funds | 101,976 | 153,766 | 412,593 | | 235,715 | 275,715 | BA NP-14 |
| Cash Funds Exempt/RF | 21,074 | 0 | 0 | | 0 | 0 | |
| Federal Funds | 184,816 | 162,679 | 184,816 | | 184,816 | 162,679 | |
| Transfer to DORA for Medical Marijuana (New Line) - CF | | | 593,333 | | 121,766 | 121,766 | |
| SUBTOTAL - (A) Health Statistics and Vital Records | 3,562,236 | 3,523,052 | 7,158,780 | | 5,410,986 | 5,504,771 | |
| FTE | <u>51.1</u> | <u>53.1</u> | <u>68.9</u> | | <u>69.4</u> | <u>69.4</u> | |
| General Fund | 0 | 0 | 0 | | 0 | 0 | |
| Cash Funds | 2,072,394 | 2,230,216 | 5,927,498 | | 4,171,653 | 4,209,632 | |
| Cash Funds Exempt/RF | 122,222 | 3,550 | 3,514 | | 5,872 | 5,853 | |
| Federal Funds | 1,367,620 | 1,289,286 | 1,227,768 | | 1,233,461 | 1,289,286 | |
| <i>Medicaid Reappropriated Funds</i> | 3,550 | 3,550 | 3,514 | | 5,872 | 5,890 | |
| <i>GF in Medicaid RF</i> | 1,775 | 1,608 | 1,757 | | 2,936 | 2,945 | |
| <i>Net General Fund</i> | 1,775 | 1,608 | 1,757 | | 2,936 | 2,945 | |
| (B) Information Technology Services | | | | | | | |
| Personal Services | 2,056,768 | 2,244,482 | 279,364 | S | 254,616 | 250,905 | DI #3, BR #NP2, |
| FTE | <u>20.5</u> | <u>20.1</u> | <u>1.8</u> | | <u>1.8</u> | <u>1.8</u> | BR #NP6 |
| General Fund | 0 | 0 | 0 | | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | | 0.0 | 0.0 | |
| Cash Funds | 139,595 | 160,855 | 72,028 | | 70,972 | 69,893 | |
| FTE | 0.6 | 0.5 | 0.2 | | 0.2 | 0.2 | |

| | FY 2008-09 | FY 2009-10 | FY 2010-11 | FY 2011-12 | | Change |
|---|----------------|----------------|------------------|------------------|-----------------|---------|
| | Actual | Actual | Appropriation | Request | Staff Recommend | Request |
| Cash Funds Exempt/RF | 1,756,940 | 1,796,152 | 202,187 | 183,644 | 181,012 | |
| FTE | 18.5 | 17.0 | 1.6 | 1.6 | 1.6 | |
| Federal Funds | 160,233 | 287,475 | 5,149 | 0 | 0 | |
| FTE | 1.4 | 2.6 | 0.0 | 0.0 | 0.0 | |
| <i>Medicaid Reappropriated Funds</i> | <i>15,145</i> | <i>15,145</i> | <i>14,994</i> | <i>0</i> | <i>303</i> | |
| <i>GF in Medicaid RF</i> | <i>7,573</i> | <i>6,860</i> | <i>7,497</i> | <i>0</i> | <i>151</i> | |
| <i>Net General Fund</i> | <i>7,573</i> | <i>6,860</i> | <i>7,497</i> | <i>0</i> | <i>151</i> | |
| Operating Expenses | <u>788,058</u> | <u>757,295</u> | <u>790,314</u> | <u>790,314</u> | <u>765,146</u> | |
| Cash Funds | 101,677 | 96,076 | 103,927 | 103,927 | 103,927 | |
| Cash Funds Exempt/RF | 661,213 | 661,219 | 661,219 | 661,219 | 661,219 | |
| Federal Funds | 25,168 | 0 | 25,168 | 25,168 | 0 | |
| Purchase of Services from Computer Center | <u>385,773</u> | <u>287,654</u> | <u>5,389,819</u> | <u>5,409,655</u> | <u>Pending</u> | |
| General Fund | 0 | 0 | 248,229 | 274,819 | | |
| Cash Funds | 42,572 | 36,807 | 725,891 | 910,648 | | |
| Cash Funds Exempt/RF | 328,800 | 234,461 | 1,799,269 | 1,693,912 | | |
| Federal Funds | 14,401 | 16,386 | 2,616,430 | 2,530,276 | | |
| <i>Medicaid Reappropriated Funds</i> | <i>0</i> | <i>0</i> | <i>144,547</i> | <i>144,547</i> | | |
| <i>GF in Medicaid RF</i> | <i>0</i> | <i>0</i> | <i>52,147</i> | <i>52,147</i> | | |
| <i>Net General Fund</i> | <i>0</i> | <i>0</i> | <i>300,376</i> | <i>326,966</i> | | |
| Multiuse Network Payments | <u>55,275</u> | <u>55,275</u> | <u>598,361</u> | <u>681,089</u> | <u>Pending</u> | |
| General Fund | 0 | 0 | 10,354 | 10,613 | | |
| Cash Funds | 0 | 0 | 983 | 1,008 | | |
| Cash Funds Exempt/RF | 55,275 | 55,275 | 345,560 | 422,148 | | |
| Federal Funds | 0 | 0 | 241,464 | 247,320 | | |
| Management and Administration of OIT | <u>111,907</u> | <u>100,799</u> | <u>521,554</u> S | <u>576,027</u> | <u>Pending</u> | |
| General Fund | 0 | 0 | 0 | 0 | | |
| Cash Funds | 0 | 0 | 33,750 | 78,000 | | |
| Cash Funds Exempt/RF | 111,907 | 100,799 | 289,223 | 294,481 | | |
| Federal Funds | 0 | 0 | 198,581 | 203,546 | | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| SUBTOTAL - (B) Information Technology Services | 3,397,781 | 3,445,505 | 7,579,412 | 7,711,701 | 1,016,051 | |
| FTE | <u>20.5</u> | <u>20.1</u> | <u>1.8</u> | <u>1.8</u> | <u>1.8</u> | |
| General Fund | 0 | 0 | 258,583 | 285,432 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds | 283,844 | 293,738 | 936,579 | 1,164,555 | 173,820 | |
| FTE | 0.6 | 0.5 | 0.2 | 0.2 | 0.2 | |
| Cash Funds Exempt/RF | 2,914,135 | 2,847,906 | 3,297,458 | 3,255,404 | 842,231 | |
| FTE | 18.5 | 17.0 | 1.6 | 1.6 | 1.6 | |
| Federal Funds | 199,802 | 303,861 | 3,086,792 | 3,006,310 | 0 | |
| FTE | 1.4 | 2.6 | 0.0 | 0.0 | 0.0 | |
| <i>Medicaid Reappropriated Funds</i> | <i>15,145</i> | <i>15,145</i> | <i>159,541</i> | <i>144,547</i> | <i>303</i> | |
| <i>GF in Medicaid RF</i> | <i>7,573</i> | <i>6,860</i> | <i>59,644</i> | <i>52,147</i> | <i>151</i> | |
| <i>Net General Fund</i> | <i>7,573</i> | <i>6,860</i> | <i>318,227</i> | <i>337,579</i> | <i>151</i> | |
| | | | | | | |
| (C) Indirect Cost Assessment | <u>607,692</u> | <u>815,844</u> | <u>1,175,177</u> S | <u>835,177</u> | <u>1,092,186</u> | |
| Cash Funds | 349,689 | 541,974 | 800,663 | 550,663 | 800,663 | |
| Cash Funds Exempt/RF | 12,392 | 10,025 | 27,678 | 37,678 | 27,678 | |
| | | | | | | |
| Federal Funds | 245,611 | 263,845 | 346,836 | 246,836 | 263,845 | |
| <i>Medicaid Reappropriated Funds</i> | 0 | 0 | 0 | 0 | 0 | |
| | | | | | | |
| TOTAL - (2) CENTER FOR HEALTH AND ENVIRONMENTAL INFORMATION (CHEIS) | 7,567,709 | 7,784,401 | 15,913,369 | 13,957,864 | 7,613,008 | |
| FTE | <u>71.6</u> | <u>73.2</u> | <u>70.7</u> | <u>71.2</u> | <u>71.2</u> | |
| General Fund | 0 | 0 | 258,583 | 285,432 | 0 | |
| Cash Funds | 2,705,927 | 3,065,928 | 7,664,740 | 5,886,871 | 5,184,115 | |
| Cash Funds Exempt/RF | 3,048,749 | 2,861,481 | 3,328,650 | 3,298,954 | 875,762 | |
| Federal Funds | 1,813,033 | 1,856,992 | 4,661,396 | 4,486,607 | 1,553,131 | |
| <i>Medicaid Reappropriated Funds</i> | <i>18,695</i> | <i>18,695</i> | <i>163,055</i> | <i>150,419</i> | <i>6,193</i> | |
| <i>GF in Medicaid RF</i> | <i>9,348</i> | <i>8,468</i> | <i>61,401</i> | <i>55,083</i> | <i>3,096</i> | |
| <i>Net General Fund</i> | <i>9,348</i> | <i>8,468</i> | <i>319,984</i> | <i>340,515</i> | <i>3,096</i> | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|

(3) LABORATORY SERVICES

Provides testing and analyses for both health and environmental programs. Program areas include: chemistry, microbiology, newborn screening, and radioactive materials certification. The primary cash funds and cash funds exempt sources include the following: Newborn Screening and Genetic Counseling Fund, Radiation Control Cash Fund, Law Enforcement Assistance Fund, funds appropriated to the Water Quality Control Division and indirect cost recoveries.

(A) Director's Office

| | | | | | | |
|--------------------------|------------------|------------------|------------------|------------------|----------------|---------|
| Personal Services | 545,311 | 413,010 | 474,692 | 470,671 | 499,772 | BR #NP6 |
| FTE | <u>7.4</u> | <u>5.9</u> | <u>5.3</u> | <u>5.3</u> | <u>5.5</u> | |
| General Fund | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds | 545,311 | 376,713 | 474,692 | 470,671 | 463,475 | |
| FTE | 7.4 | 5.7 | 5.3 | 5.3 | 5.3 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 0 | 36,297 | 0 | 0 | 36,297 | |
| FTE | 0.0 | 0.2 | 0.0 | 0.0 | 0.2 | |
| Operating Expenses | <u>1,885</u> | <u>20,199</u> | <u>22,421</u> | <u>22,421</u> | <u>22,421</u> | |
| General Fund | 0 | 0 | 0 | 0 | 0 | |
| Cash Funds | 1,885 | 20,199 | 22,421 | 22,421 | 22,421 | |
| Federal Funds | 0 | 0 | 0 | 0 | 0 | |
| Indirect Cost Assessment | <u>1,256,889</u> | <u>1,566,647</u> | <u>1,491,175</u> | <u>1,591,175</u> | <u>Pending</u> | |
| Cash Funds | 842,144 | 1,113,058 | 1,153,152 | 1,233,152 | | |
| Cash Funds Exempt/RF | 0 | 0 | 10,000 | 30,000 | | |
| Federal Funds | 414,745 | 453,589 | 328,023 | 328,023 | | |

| | FY 2008-09 | FY 2009-10 | FY 2010-11 | FY 2011-12 | | Change |
|---|------------------|------------------|------------------|--------------------|------------------|-----------------|
| | Actual | Actual | Appropriation | Request | Staff Recommend | Request |
| SUBTOTAL - (A) Director's Office | 1,804,085 | 1,999,856 | 1,988,288 | 2,084,267 | 522,193 | |
| FTE | <u>7.4</u> | <u>5.9</u> | <u>5.3</u> | <u>5.3</u> | <u>5.5</u> | |
| General Fund | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds | 1,389,340 | 1,509,970 | 1,650,265 | 1,726,244 | 485,896 | |
| FTE | 7.4 | 5.7 | 5.3 | 5.3 | 5.3 | |
| Cash Funds Exempt/RF | 0 | 0 | 10,000 | 30,000 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 414,745 | 489,886 | 328,023 | 328,023 | 36,297 | |
| FTE | 0.0 | 0.2 | 0.0 | 0.0 | 0.2 | |
| (B) Chemistry and Microbiology | | | | | | |
| Personal Services | 3,576,829 | 3,984,968 | 4,196,045 S | 4,234,868 B | 4,408,486 | DI #2, BR #NP2, |
| FTE | <u>55.8</u> | <u>51.7</u> | <u>60.9</u> | <u>61.9</u> | <u>63.6</u> | BR #NP6 |
| General Fund | 162,269 | 758,952 | 744,316 | 733,713 | 737,540 | BA NP-16 |
| FTE | 2.1 | 11.2 | 11.2 | 11.2 | 11.2 | |
| Cash Funds | 2,244,195 | 1,958,622 | 2,341,613 | 2,399,210 | 2,363,476 | |
| FTE | 35.6 | 21.5 | 32.0 | 33.0 | 33.0 | |
| Cash Funds Exempt/RF | 133,690 | 49,234 | 95,304 | 90,747 | 89,310 | |
| FTE | 3.9 | 3.1 | 3.5 | 3.5 | 3.5 | |
| Federal Funds | 1,036,675 | 1,218,160 | 1,014,812 | 1,011,198 | 1,218,160 | |
| FTE | 14.2 | 15.9 | 14.2 | 14.2 | 15.9 | |
| Operating Expenses | <u>2,656,312</u> | <u>3,570,996</u> | <u>3,378,797</u> | <u>3,647,916</u> B | <u>3,932,635</u> | DI #2 |
| General Fund | 12,711 | 316,278 | 316,278 | 316,278 | 316,278 | BA NP-16 |
| Cash Funds | 2,213,873 | 2,539,638 | 2,632,158 | 2,901,277 | 2,901,277 | |
| Cash Funds Exempt/RF | 139,486 | 140,119 | 140,119 | 140,119 | 140,119 | |
| Federal Funds | 290,242 | 574,961 | 290,242 | 290,242 | 574,961 | |
| Equipment Replacement - CF | 0 | 0 | 0 | 0 | 0 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|---------------------|
| SUBTOTAL - (B) Laboratory Services - Chemistry and Microbiology | 6,233,141 | 7,555,964 | 7,574,842 S | 7,882,784 | 8,341,121 | |
| FTE | <u>55.8</u> | <u>51.7</u> | <u>60.9</u> | <u>61.9</u> | <u>63.6</u> | |
| General Fund | 174,980 | 1,075,230 | 1,060,594 | 1,049,991 | 1,053,818 | |
| FTE | 2.1 | 11.2 | 11.2 | 11.2 | 11.2 | |
| Cash Funds | 4,458,068 | 4,498,260 | 4,973,771 | 5,300,487 | 5,264,753 | |
| FTE | 35.6 | 21.5 | 32.0 | 33.0 | 33.0 | |
| Cash Funds Exempt/RF | 273,176 | 189,353 | 235,423 | 230,866 | 229,429 | |
| FTE | 3.9 | 3.1 | 3.5 | 3.5 | 3.5 | |
| Federal Funds | 1,326,917 | 1,793,121 | 1,305,054 | 1,301,440 | 1,793,121 | |
| FTE | 14.2 | 15.9 | 14.2 | 14.2 | 15.9 | |
| (C) Certification | | | | | | |
| Personal Services | 567,160 | 629,451 | 704,319 | 703,616 | 659,417 | BR #NP2, BR #NP6 |
| FTE | <u>9.0</u> | <u>9.2</u> | <u>10.5</u> | <u>10.5</u> | <u>10.1</u> | |
| General Fund | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds | 381,051 | 482,728 | 522,520 | 520,667 | 512,694 | |
| FTE | 6.4 | 7.0 | 7.9 | 7.9 | 7.9 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| FTE | | | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 186,109 | 146,723 | 181,799 | 182,949 | 146,723 | |
| FTE | 2.6 | 2.2 | 2.6 | 2.6 | 2.2 | |
| Operating Expenses | <u>97,818</u> | <u>80,170</u> | <u>98,002</u> | <u>98,002</u> | <u>80,170</u> | |
| Cash Funds | 60,299 | 60,483 | 60,483 | 60,483 | 60,483 | |
| Federal Funds | 37,519 | 19,687 | 37,519 | 37,519 | 19,687 | |
| SUBTOTAL - (C) Certification | 664,978 | 709,621 | 802,321 | 801,618 | 739,587 | |
| FTE | <u>9.0</u> | <u>9.2</u> | <u>10.5</u> | <u>10.5</u> | <u>10.1</u> | |
| General Fund | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds | 441,350 | 543,211 | 583,003 | 581,150 | 573,177 | |
| FTE | 6.4 | 7.0 | 7.9 | 7.9 | 7.9 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 223,628 | 166,410 | 219,318 | 220,468 | 166,410 | |
| FTE | 2.6 | 2.2 | 2.6 | 2.6 | 2.2 | |
| TOTAL - (3) LABORATORY SERVICES | 8,702,204 | 10,265,441 | 10,365,451 | 10,768,669 | 9,602,901 | |
| FTE | <u>72.2</u> | <u>66.8</u> | <u>76.7</u> | <u>77.7</u> | <u>79.2</u> | |
| General Fund | 174,980 | 1,075,230 | 1,060,594 | 1,049,991 | 1,053,818 | |
| FTE | 2.1 | 11.2 | 11.2 | 11.2 | 11.2 | |
| Cash Funds | 6,288,758 | 6,551,441 | 7,207,039 | 7,607,881 | 6,323,826 | |
| FTE | 49.4 | 34.2 | 45.2 | 46.2 | 46.2 | |
| Cash Funds Exempt/RF | 273,176 | 189,353 | 245,423 | 260,866 | 229,429 | |
| FTE | 3.9 | 3.1 | 3.5 | 3.5 | 3.5 | |
| Federal Funds | 1,965,290 | 2,449,417 | 1,852,395 | 1,849,931 | 1,995,828 | |
| FTE | 16.8 | 18.3 | 16.8 | 16.8 | 18.3 | |

(Former 4) LOCAL PUBLIC HEALTH PLANNING AND SUPPORT

Provides technical assistance and financial support to local health agencies around the state. This support covers both health and environmental services. Agencies receiving the "per capita" distributions are free to use the moneys as they see fit.

| | | | | | | |
|---|------------|------------|------------|------------|------------|--|
| Assessment and Planning Program | 0 | 0 | 0 | 0 | 0 | |
| FTE | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | |
| General Fund | 0 | 0 | 0 | | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | | 0.0 | |
| Cash Funds | 0 | 0 | 0 | | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | | 0.0 | |
| Distributions to Local Public Health Agencies | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | |
| General Fund | 0 | 0 | 0 | | 0 | |
| Cash Funds | 0 | 0 | 0 | | 0 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | | 0 | |
| Environmental Health Services Not Provided by Local Health Departments - GF | 0 | 0 | 0 | | 0 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| Local Public Health Nursing Consultation and Training | 0 | 0 | 0 | 0 | 0 | 0 |
| FTE | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | 0.0 | 0.0 |
| General Fund | 0 | 0 | 0 | 0 | 0 | 0 |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Cash Funds | 0 | 0 | 0 | 0 | 0 | 0 |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Federal Funds | 0 | 0 | 0 | 0 | 0 | 0 |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Indirect Cost Assessment - FF | 0 | 0 | 0 | 0 | 0 | 0 |
| TOTAL - (Former 4) LOCAL PUBLIC HEALTH PLANNING AND SUPPORT | 0 | 0 | 0 | 0 | 0 | 0 |
| FTE | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | 0.0 | 0.0 |
| General Fund | 0 | 0 | 0 | 0 | 0 | 0 |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Cash Funds | 0 | 0 | 0 | 0 | 0 | 0 |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | 0 |
| Federal Funds | 0 | 0 | 0 | 0 | 0 | 0 |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| (4) AIR QUALITY CONTROL DIVISION | | | | | | |
| (5) WATER QUALITY CONTROL DIVISION | | | | | | |
| (6) HAZARDOUS MATERIALS AND WASTE MANAGEMENT DIVISION | | | | | | |
| (7) CONSUMER PROTECTION | | | | | | |
| <i>These environmental divisions are presented separately by another analyst</i> | | | | | | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|---|----------------------|----------------------|-----------------------------|---|-----------------------|-------------------------------|-------------------|
| (8) DISEASE CONTROL AND ENVIRONMENTAL EPIDEMIOLOGY DIVISION | | | | | | | |
| <i>This division seeks to reduce illness and premature deaths with programs that focus on preventing and controlling communicable diseases, related diseases, and their complications. This includes investigating incidents, assessing the prevalence of diseases, and evaluating potential risks posed by environmental and toxicological exposures. The primary source of cash funds exempt is federal funds appropriated in the Department of Human Services.</i> | | | | | | | |
| (A) Administration, General Disease Control and Surveillance | | | | | | | |
| Personal Services | 878,119 | 924,275 | 809,664 | S | 807,002 | B 818,165 | BR #NP2, |
| FTE | <u>9.0</u> | <u>10.3</u> | <u>13.1</u> | | <u>13.1</u> | <u>13.3</u> | BR #NP6 |
| General Fund | 589,890 | 642,394 | 545,504 | | 533,501 | 536,284 | BA NP-16 |
| FTE | 6.0 | 7.3 | 10.3 | | 10.3 | 10.3 | |
| Federal Funds | 288,229 | 281,881 | 264,160 | | 273,501 | 281,881 | |
| FTE | 3.0 | 3.0 | 2.8 | | 2.8 | 3.0 | |
| Operating Expenses | <u>290,524</u> | <u>310,791</u> | <u>264,579</u> | | <u>264,579</u> | <u>282,329</u> | BA NP-16 |
| General Fund | 255,616 | 258,133 | 223,133 | | 223,133 | 223,133 | |
| Cash Funds | 0 | 0 | 6,538 | | 6,538 | 6,538 | |
| Federal Funds | 34,908 | 52,658 | 34,908 | | 34,908 | 52,658 | |
| Indirect Cost Assessment | <u>2,286,841</u> | <u>2,381,543</u> | <u>2,559,367</u> | S | <u>2,826,900</u> | <u>2,391,856</u> | |
| Cash Funds | 13,878 | 23,653 | 33,966 | | 33,966 | 33,966 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | | 0 | 0 | |
| Federal Funds | 2,272,963 | 2,357,890 | 2,525,401 | | 2,792,934 | 2,357,890 | |
| SUBTOTAL - (A) Administration, General Disease Control and Surveillance | | | | | | | |
| | 3,455,484 | 3,616,609 | 3,633,610 | | 3,898,481 | 3,492,350 | |
| FTE | <u>9.0</u> | <u>10.3</u> | <u>13.1</u> | | <u>13.1</u> | <u>13.3</u> | |
| General Fund | 845,506 | 900,527 | 768,637 | | 756,634 | 759,417 | |
| FTE | 6.0 | 7.3 | 10.3 | | 10.3 | 10.3 | |
| Cash Funds | 13,878 | 23,653 | 40,504 | | 40,504 | 40,504 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | | 0 | 0 | |
| Federal Funds | 2,596,100 | 2,692,429 | 2,824,469 | | 3,101,343 | 2,692,429 | |
| FTE | 3.0 | 3.0 | 2.8 | | 2.8 | 3.0 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|---|-----------------------|-------------------------------|-------------------|
| (B) Special Purpose Disease Control Programs | | | | | | | |
| (1) Immunization | | | | | | | |
| Personal Services | 2,657,561 | 2,634,949 | 2,560,719 | S | 2,552,133 | B 2,592,897 | BR #NP2, |
| FTE | <u>24.9</u> | <u>29.2</u> | <u>35.6</u> | | <u>35.6</u> | <u>32.0</u> | BR #NP6 |
| General Fund | 852,922 | 854,038 | 817,527 | | 807,789 | 811,986 | BA NP-16 |
| FTE | 2.9 | 8.9 | 11.7 | | 11.7 | 11.7 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | | 0 | 0 | |
| Federal Funds | 1,804,639 | 1,780,911 | 1,743,192 | | 1,744,344 | 1,780,911 | |
| FTE | 22.0 | 20.3 | 23.9 | | 23.9 | 20.3 | |
| Operating Expenses | <u>4,145,502</u> | <u>4,979,006</u> | <u>12,618,249</u> | | <u>12,618,249</u> | <u>4,269,794</u> | BA NP-16 |
| General Fund | 697,885 | 687,285 | 652,285 | | 652,285 | 652,285 | |
| General Fund Exempt | 0 | 0 | 0 | | 0 | 0 | |
| Cash Funds (Tobacco Settlement) | 1,550,797 | 1,400,000 | 844,789 | | 844,789 | 725,788 | |
| Cash Funds Exempt/RF (Tobacco Settlement) | 0 | 0 | 0 | | 0 | 0 | |
| Federal Funds | 1,896,820 | 2,891,721 | 11,121,175 | | 11,121,175 | 2,891,721 | |
| Appropriation from Tobacco Tax Cash Fund to the General Fund | <u>478,004</u> | <u>445,362</u> | <u>447,000</u> | | <u>422,149</u> | <u>439,200</u> | |
| Cash Funds (Amendment 35) | 478,004 | 445,362 | 447,000 | | 422,149 | 439,200 | |
| Cash Funds Exempt/RF (Amendment 35) | 0 | 0 | 0 | | 0 | 0 | |
| Immunizations by Local Public Health Agencies in Areas Formerly Served by Nursing Services- GFE (Amendment 35) | 478,004 | 445,362 | 447,000 | | 422,149 | 439,200 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| Subtotal - (1) Immunization | 7,759,071 | 8,504,679 | 16,072,968 | 16,014,680 | 7,741,091 | |
| FTE | <u>24.9</u> | <u>29.2</u> | <u>35.6</u> | <u>35.6</u> | <u>32.0</u> | |
| General Fund | 1,550,807 | 1,541,323 | 1,469,812 | 1,460,074 | 1,464,271 | |
| FTE | 2.9 | 8.9 | 11.7 | 11.7 | 11.7 | |
| General Fund Exempt | 478,004 | 445,362 | 447,000 | 422,149 | 439,200 | |
| Cash Funds | 2,028,801 | 1,845,362 | 1,291,789 | 1,266,938 | 1,164,988 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| Federal Funds | 3,701,459 | 4,672,632 | 12,864,367 | 12,865,519 | 4,672,632 | |
| FTE | 22.0 | 20.3 | 23.9 | 23.9 | 20.3 | |
| (2) Sexually Transmitted Infections, HIV and AIDS | | | | | | |
| Personal Services | 3,833,795 | 3,755,850 | 3,622,784 | 3,621,650 | 3,754,548 | BR #NP6 |
| FTE | <u>47.2</u> | <u>46.5</u> | <u>45.7</u> | <u>45.7</u> | <u>46.6</u> | |
| General Fund | 0 | 0 | 0 | 0 | 0 | |
| Cash Funds | 76,765 | 75,960 | 75,818 | 75,820 | 74,658 | |
| FTE | 1.2 | 1.1 | 1.2 | 1.2 | 1.2 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 3,757,030 | 3,679,890 | 3,546,966 | 3,545,830 | 3,679,890 | |
| FTE | 46.0 | 45.4 | 44.5 | 44.5 | 45.4 | |
| Operating Expenses | <u>5,082,785</u> | <u>5,628,785</u> | <u>5,748,115</u> | <u>5,748,115</u> | <u>4,575,425</u> | |
| Cash Funds (Tobacco Settlement) | 2,197,049 | 2,753,366 | 2,862,379 | 2,862,379 | 1,700,006 | |
| Cash Funds Exempt/RF (Tobacco Settlement) | 0 | 0 | 0 | 0 | 0 | |
| Federal Funds | 2,885,736 | 2,875,419 | 2,885,736 | 2,885,736 | 2,875,419 | |
| Subtotal - (2) Sexually Transmitted Disease, HIV and AIDS | 8,916,580 | 9,384,635 | 9,370,899 | 9,369,765 | 8,329,973 | |
| FTE | <u>47.2</u> | <u>46.5</u> | <u>45.7</u> | <u>45.7</u> | <u>46.6</u> | |
| General Fund | 0 | 0 | 0 | 0 | 0 | |
| Cash Funds | 2,273,814 | 2,829,326 | 2,938,197 | 2,938,199 | 1,774,664 | |
| FTE | 1.2 | 1.1 | 1.2 | 1.2 | 1.2 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|---|----------------------|----------------------|-----------------------------|---|-----------------------|-------------------------------|-------------------|
| Federal Funds | 6,642,766 | 6,555,309 | 6,432,702 | | 6,431,566 | 6,555,309 | |
| FTE | 46.0 | 45.4 | 44.5 | | 44.5 | 45.4 | |
| (3) Ryan White Act | | | | | | | |
| Personal Services | 983,188 | 1,023,160 | 950,136 | S | 950,582 | 1,022,388 | BR #NP2, |
| FTE | <u>11.8</u> | <u>12.3</u> | <u>11.7</u> | | <u>11.7</u> | <u>12.6</u> | BR #NP6 |
| General Fund | 27,309 | 28,556 | 28,162 | | 27,642 | 27,784 | BA NP-16 |
| FTE | 0.3 | 0.1 | 0.4 | | 0.4 | 0.4 | |
| Federal Funds | 955,879 | 994,604 | 921,974 | | 922,940 | 994,604 | |
| FTE | 11.5 | 12.2 | 11.3 | | 11.3 | 12.2 | |
| Operating Expenses | <u>17,527,191</u> | <u>17,211,975</u> | <u>17,748,772</u> | | <u>17,748,772</u> | <u>16,747,980</u> | |
| General Fund | 1,357,404 | 1,357,404 | 1,357,404 | | 1,357,404 | 1,357,404 | |
| Cash Funds (Tobacco Settlement) | 3,400,575 | 3,622,156 | 3,622,156 | | 3,622,156 | 3,158,161 | |
| Cash Funds Exempt/RF (Tobacco Settlement) | 0 | 0 | 0 | | 0 | 0 | |
| Federal Funds | 12,769,212 | 12,232,415 | 12,769,212 | | 12,769,212 | 12,232,415 | |
| Subtotal - (3) Ryan White Act | | | | | | | |
| FTE | <u>11.8</u> | <u>12.3</u> | <u>11.7</u> | | <u>11.7</u> | <u>12.6</u> | |
| General Fund | 1,384,713 | 1,385,960 | 1,385,566 | | 1,385,046 | 1,385,188 | |
| FTE | 0.3 | 0.1 | 0.4 | | 0.4 | 0.4 | |
| Cash Funds | 3,400,575 | 3,622,156 | 3,622,156 | | 3,622,156 | 3,158,161 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | | 0 | 0 | |
| Federal Funds | 13,725,091 | 13,227,019 | 13,691,186 | | 13,692,152 | 13,227,019 | |
| FTE | 11.5 | 12.2 | 11.3 | | 11.3 | 12.2 | |
| (4) Tuberculosis Control and Treatment | | | | | | | |
| Personal Services | 1,124,726 | 1,351,030 | 1,088,459 | S | 1,085,964 | 1,329,968 | BR #NP2, |
| FTE | <u>11.5</u> | <u>14.4</u> | <u>12.0</u> | | <u>12.0</u> | <u>5.5</u> | BR #NP6 |
| General Fund | 116,791 | 122,742 | 121,598 | | 118,222 | 118,838 | BA NP-16 |
| FTE | 1.2 | 1.2 | 1.2 | | 1.2 | 1.2 | |
| Cash Funds Exempt/RF | 95,554 | 95,554 | 95,554 | | 79,829 | 78,396 | |
| FTE | 1.0 | 10.6 | 1.7 | | 1.7 | 1.7 | |
| Federal Funds | 912,381 | 1,132,734 | 871,307 | | 887,913 | 1,132,734 | |
| FTE | 9.3 | 2.6 | 9.1 | | 9.1 | 2.6 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| Operating Expenses | <u>2,217,461</u> | <u>3,443,103</u> | <u>2,217,462</u> | <u>2,217,462</u> B | <u>3,443,103</u> | BA NP-16 |
| General Fund | 1,191,913 | 1,191,913 | 1,191,913 | 1,191,913 | 1,191,913 | |
| Cash Funds Exempt/RF | 210,019 | 210,020 | 210,020 | 210,020 | 210,020 | |
| Federal Funds | 815,529 | 2,041,170 | 815,529 | 815,529 | 2,041,170 | |
| Subtotal - (4) Tuberculosis Control and Treatment | 3,342,187 | 4,794,133 | 3,305,921 | 3,303,426 | 4,773,071 | |
| FTE | <u>11.5</u> | <u>14.4</u> | <u>12.0</u> | <u>12.0</u> | <u>5.5</u> | |
| General Fund | 1,308,704 | 1,314,655 | 1,313,511 | 1,310,135 | 1,310,751 | |
| FTE | 1.2 | 1.2 | 1.2 | 1.2 | 1.2 | |
| Cash Funds Exempt/RF | 305,573 | 305,574 | 305,574 | 289,849 | 288,416 | |
| FTE | 1.0 | 10.6 | 1.7 | 1.7 | 1.7 | |
| Federal Funds | 1,727,910 | 3,173,904 | 1,686,836 | 1,703,442 | 3,173,904 | |
| FTE | 9.3 | 2.6 | 9.1 | 9.1 | 2.6 | |
| SUBTOTAL - (B) Special Purpose Disease Programs | 38,528,217 | 40,918,582 | 47,448,696 | 47,387,225 | 38,614,503 | |
| FTE | <u>95.4</u> | <u>102.4</u> | <u>105.0</u> | <u>105.0</u> | <u>96.7</u> | |
| General Fund | 4,244,224 | 4,241,938 | 4,168,889 | 4,155,255 | 4,160,210 | |
| FTE | 4.4 | 10.2 | 13.3 | 13.3 | 13.3 | |
| General Fund Exempt | 478,004 | 445,362 | 447,000 | 422,149 | 439,200 | |
| Cash Funds | 7,703,190 | 8,296,844 | 7,852,142 | 7,827,293 | 6,097,813 | |
| FTE | 1.2 | 1.1 | 1.2 | 1.2 | 1.2 | |
| Cash Funds Exempt/RF | 305,573 | 305,574 | 305,574 | 289,849 | 288,416 | |
| FTE | 1.0 | 10.6 | 1.7 | 1.7 | 1.7 | |
| Federal Funds | 25,797,226 | 27,628,864 | 34,675,091 | 34,692,679 | 27,628,864 | |
| FTE | 88.8 | 80.5 | 88.8 | 88.8 | 80.5 | |
| (C) Environmental Epidemiology | | | | | | |
| (1) Birth Defects Monitoring and Prevention | | | | | | |
| Personal Services | 323,907 | 394,419 | 328,691 S | 323,765 B | 407,683 | BR #NP2, |
| FTE | <u>2.9</u> | <u>3.8</u> | <u>3.6</u> | <u>3.6</u> | <u>4.7</u> | BR #NP6 |
| General Fund | 121,631 | 124,288 | 117,433 | 115,149 | 115,749 | BA NP-16 |
| FTE | 1.1 | 1.2 | 1.6 | 1.6 | 1.6 | |
| Cash Funds | 100,455 | 107,953 | 134,244 | 131,766 | 129,756 | |
| FTE | 0.9 | 0.9 | 1.4 | 1.4 | 1.4 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| Federal Funds | 101,821 | 162,178 | 77,014 | 76,850 | 162,178 | |
| FTE | 0.9 | 1.7 | 0.6 | 0.6 | 1.7 | |
| Operating Expenses | <u>11,415</u> | <u>11,875</u> | <u>12,840</u> | <u>12,840</u> | <u>13,300</u> | |
| Cash Funds | 0 | 0 | 1,425 | 1,425 | 1,425 | |
| Federal Funds | 11,415 | 11,875 | 11,415 | 11,415 | 11,875 | |
| Subtotal - (1) Birth Defects Monitoring | 335,322 | 406,294 | 341,531 | 336,605 | 420,983 | |
| FTE | <u>2.9</u> | <u>3.8</u> | <u>3.6</u> | <u>3.6</u> | <u>4.7</u> | |
| General Fund | 121,631 | 124,288 | 117,433 | 115,149 | 115,749 | |
| FTE | 1.1 | 1.2 | 1.6 | 1.6 | 1.6 | |
| Cash Funds | 100,455 | 107,953 | 135,669 | 133,191 | 131,181 | |
| FTE | 0.9 | 0.9 | 1.4 | 1.4 | 1.4 | |
| Federal Funds | 113,236 | 174,053 | 88,429 | 88,265 | 174,053 | |
| FTE | 0.9 | 1.7 | 0.6 | 0.6 | 1.7 | |
| (2) Federal Grants - FF | 1,488,055 | 1,441,163 | 1,456,257 | 1,455,122 | 1,441,163 | BR #NP2, |
| FTE | 8.5 | 10.2 | 8.3 | 8.3 | 10.2 | BR #NP6 |
| SUBTOTAL - (C) Environmental Epidemiology | 1,823,377 | 1,847,457 | 1,797,788 | 1,791,727 | 1,862,146 | |
| FTE | <u>11.4</u> | <u>14.0</u> | <u>11.9</u> | <u>11.9</u> | <u>14.9</u> | |
| General Fund | 121,631 | 124,288 | 117,433 | 115,149 | 115,749 | |
| FTE | 1.1 | 1.2 | 1.6 | 1.6 | 1.6 | |
| Cash Funds | 100,455 | 107,953 | 135,669 | 133,191 | 131,181 | |
| FTE | 0.9 | 0.9 | 1.4 | 1.4 | 1.4 | |
| Federal Funds | 1,601,291 | 1,615,216 | 1,544,686 | 1,543,387 | 1,615,216 | |
| FTE | 9.4 | 11.9 | 8.9 | 8.9 | 11.9 | |
| (Formerly D) Emergency Management | | | | | | |
| Personal Services | 126,545 | 0 | 0 | 0 | 0 | |
| FTE | <u>1.3</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | | 0.0 | |
| Federal Funds | 126,545 | 0 | 0 | | 0 | |
| FTE | 1.3 | 0.0 | 0.0 | | 0.0 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| Operating Expenses | <u>71,308</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> |
| Federal Funds | 71,308 | 0 | 0 | | | 0 |
| SUBTOTAL - (D) Emergency Management | 197,853 | 0 | 0 | 0 | 0 | 0 |
| FTE | <u>1.3</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | 0 |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Federal Funds | 197,853 | 0 | 0 | 0 | 0 | 0 |
| FTE | 1.3 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| (D) Federal Grants - FF | 4,027,852 | 8,581,903 | 3,778,596 | 3,817,457 | 8,581,903 | BR #NP2, |
| FTE | 22.3 | 30.1 | 20.5 | 20.5 | 30.1 | BR #NP6 |
| TOTAL - (8) DISEASE CONTROL AND ENVIRONMENTAL EPIDEMIOLOGY DIVISION | 48,032,783 | 54,964,551 | 56,658,690 | 56,894,890 | 52,550,902 | |
| FTE | <u>139.4</u> | <u>156.8</u> | <u>150.5</u> | <u>150.5</u> | <u>155.0</u> | |
| General Fund | 5,211,361 | 5,266,753 | 5,054,959 | 5,027,038 | 5,035,376 | |
| FTE | 11.5 | 18.7 | 25.2 | 25.2 | 25.2 | |
| General Fund Exempt | 478,004 | 445,362 | 447,000 | 422,149 | 439,200 | |
| Cash Funds | 7,817,523 | 8,428,450 | 8,028,315 | 8,000,988 | 6,269,498 | |
| FTE | 2.1 | 2.0 | 2.6 | 2.6 | 2.6 | |
| Cash Funds Exempt/RF | 305,573 | 305,574 | 305,574 | 289,849 | 288,416 | |
| FTE | 1.0 | 10.6 | 1.7 | 1.7 | 1.7 | |
| Federal Funds | 34,220,322 | 40,518,412 | 42,822,842 | 43,154,866 | 40,518,412 | |
| FTE | 124.8 | 125.5 | 121.0 | 121.0 | 125.5 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|--|-----------------------|-------------------------------|-------------------|
|--|----------------------|----------------------|-----------------------------|--|-----------------------|-------------------------------|-------------------|

(9) PREVENTION SERVICES DIVISION

This division provides health care and related preventive services to people who have low incomes or limited access to health care. The division also provides programs designed to reduce crime and violence among youth. In addition, this division seeks to control and prevent the causes of chronic disease and injury for individuals at all income levels in all racial and ethnic groups. It also includes dental programs and women's health services. The services are provided directly or through contract agreements. The primary cash funds and cash funds exempt sources include: Newborn Screening and Genetic Counseling Fund, Medicaid funds initially appropriated to the Department of Health Care Policy and Financing, Colorado Children's Trust Fund, Tobacco Litigation Settlement Cash Fund federal funds appropriated to the Department of Human Services.

(A) Prevention Programs

(1) Programs and Administration

| | | | | | | | | |
|--|------------------|------------------|------------------|---|------------------|---|------------------|----------|
| Personal Services | 1,720,433 | 1,811,866 | 1,677,139 | S | 1,626,818 | B | 1,800,147 | BR #NP2, |
| FTE | <u>21.4</u> | <u>21.7</u> | <u>22.9</u> | | <u>21.4</u> | | <u>22.5</u> | BR #NP6 |
| General Fund | 113,677 | 118,231 | 117,295 | | 114,448 | | 115,046 | BA NP-16 |
| FTE | 1.9 | 1.9 | 2.0 | | 2.0 | | 2.0 | BA NP-14 |
| Cash Funds (Amendment 35) | 0 | 670,429 | 643,403 | | 592,188 | | 661,895 | |
| FTE | 0.0 | 9.3 | 10.0 | | 8.5 | | 10.0 | |
| Cash Funds Exempt/RF (Amendment 35) | 669,447 | 0 | 0 | | 0 | | 0 | |
| FTE | 8.6 | 0.0 | 0.0 | | 0.0 | | 0.0 | |
| Federal Funds | 937,309 | 1,023,206 | 916,441 | | 920,182 | | 1,023,206 | |
| FTE | 10.9 | 10.5 | 10.9 | | 10.9 | | 10.5 | |
| Operating Expenses | <u>1,067,239</u> | <u>1,183,916</u> | <u>1,007,239</u> | | <u>1,017,239</u> | B | <u>1,184,705</u> | BA NP-14 |
| Cash Funds (Amendment 35) | 0 | 117,651 | 58,440 | | 68,440 | | 118,440 | |
| Cash Funds Exempt/RF (Amendment 35) | 118,440 | 0 | 0 | | 0 | | 0 | |
| Federal Funds | 948,799 | 1,066,265 | 948,799 | | 948,799 | | 1,066,265 | |
| Transfer to the Health Disparities Grant Program Fund - CF (Amendment 35) | 0 | 3,562,898 | 3,576,000 | | 3,576,000 | | 3,506,400 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|---|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| Transfer to the Department of Health Care Policy and Financing for Disease Management | <u>0</u> | <u>2,000,000</u> | <u>2,000,000</u> | <u>2,000,000</u> | <u>2,000,000</u> | |
| Cash Funds (Amendment 35) | 0 | 2,000,000 | 2,000,000 | 2,000,000 | 2,000,000 | |
| Cash Funds Exempt/RF (Amendment 35) | 0 | 0 | 0 | 0 | 0 | |
| Prevention Early Detection and Treatment Fund Expenditures | <u>34,786,921</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | |
| Cash Funds (Amendment 35) | 34,786,921 | 0 | 0 | | 0 | |
| Cash Funds Exempt/RF (Amendment 35) | 0 | 0 | 0 | | 0 | |
| Cancer, Cardiovascular Disease, and Pulmonary Disease Grants | <u>23,305,114</u> | <u>13,086,051</u> | <u>6,957,799</u> | <u>2,778,104</u> B | <u>13,277,470</u> | BR #NP3 |
| Cash Funds (Amendment 35) | 0 | 13,086,051 | 6,957,799 | 2,778,104 | 13,277,470 | BA NP-14 |
| Cash Funds Exempt/RF (Amendment 35) | 23,305,114 | 0 | 0 | 0 | 0 | |
| Short Term Innovative Health Program Grants | 592,679 | 0 | 0 | 0 | 0 | |
| FTE | <u>0.4</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | |
| Cash Funds (Tobacco Settlement) | 592,679 | 0 | 0 | 0 | 0 | |
| FTE | 0.4 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds Exempt/RF (Tobacco Settlement) | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Indirect Cost Assessment | <u>3,488,875</u> | <u>2,980,109</u> | <u>3,032,251</u> S | <u>2,730,749</u> B | <u>Pending</u> | DI #3 |
| Cash Funds | 513,481 | 506,877 | 805,656 | 505,656 | | BA NP-14 |
| Cash Funds Exempt/RF | 400,000 | 186 | 25,000 | 23,498 | | |
| Federal Funds | 2,575,394 | 2,473,046 | 2,201,595 | 2,201,595 | | |
| <i>Medicaid Reappropriated Funds</i> | 0 | 0 | 0 | (1,502) | | |
| <i>GF in Medicaid RF</i> | 0 | 0 | 0 | 0 | | |
| <i>Net General Fund</i> | 0 | 0 | 0 | 0 | | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|---|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| Subtotal - (1) Programs and Administration | 64,961,261 | 24,624,840 | 18,250,428 | 13,728,910 | 21,768,722 | |
| FTE | <u>21.8</u> | <u>21.7</u> | <u>22.9</u> | <u>21.4</u> | <u>22.5</u> | |
| General Fund | 113,677 | 118,231 | 117,295 | 114,448 | 115,046 | |
| FTE | 1.9 | 1.9 | 2.0 | 2.0 | 2.0 | |
| Cash Funds | 35,893,081 | 19,943,906 | 14,041,298 | 9,520,388 | 19,564,205 | |
| FTE | 0.4 | 9.3 | 10.0 | 8.5 | 10.0 | |
| Cash Funds Exempt/RF | 24,493,001 | 186 | 25,000 | 23,498 | 0 | |
| FTE | 8.6 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 4,461,502 | 4,562,517 | 4,066,835 | 4,070,576 | 2,089,471 | |
| FTE | 10.9 | 10.5 | 10.9 | 10.9 | 10.5 | |
| <i>Medicaid Reappropriated Funds</i> | 0 | 0 | 0 | (1,502) | 0 | |
| <i>GF in Medicaid RF</i> | 0 | 0 | 0 | 0 | 0 | |
| <i>Net General Fund</i> | <i>113,677</i> | <i>118,231</i> | <i>117,295</i> | <i>114,448</i> | <i>115,046</i> | |
| (2) Cancer Registry | | | | | | |
| Personal Services | 794,421 | 823,575 | 781,801 S | 781,859 B | 822,869 | BR #NP2, |
| FTE | <u>10.2</u> | <u>10.4</u> | <u>10.2</u> | <u>10.2</u> | <u>10.5</u> | BR #NP6 |
| General Fund | 188,105 | 189,350 | 188,483 | 187,669 | 188,644 | BA NP-16 |
| FTE | 2.0 | 1.9 | 2.0 | 2.0 | 2.0 | |
| Cash Funds | 0 | 0 | 0 | 0 | 0 | |
| Federal Funds | 606,316 | 634,225 | 593,318 | 594,190 | 634,225 | |
| FTE | 8.2 | 8.5 | 8.2 | 8.2 | 8.5 | |
| Operating Expenses | <u>90,555</u> | <u>54,232</u> | <u>90,557</u> | <u>90,557</u> B | <u>54,234</u> | BA NP-16 |
| General Fund | 30,550 | 30,550 | 30,552 | 30,552 | 30,552 | |
| Federal Funds | 60,005 | 23,682 | 60,005 | 60,005 | 23,682 | |
| Subtotal - (2) Cancer Registry | 884,976 | 877,807 | 872,358 | 872,416 | 877,103 | |
| FTE | <u>10.2</u> | <u>10.4</u> | <u>10.2</u> | <u>10.2</u> | <u>10.5</u> | |
| General Fund | 218,655 | 219,900 | 219,035 | 218,221 | 219,196 | |
| FTE | 2.0 | 1.9 | 2.0 | 2.0 | 2.0 | |
| Cash Funds | 0 | 0 | 0 | 0 | 0 | |
| Federal Funds | 666,321 | 657,907 | 653,323 | 654,195 | 657,907 | |
| FTE | 8.2 | 8.5 | 8.2 | 8.2 | 8.5 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| (3) Chronic Disease and Cancer Prevention Grants | | | | | | |
| Program | | | | | | |
| Chronic Disease and Cancer Prevention Grants | 4,771,210 | 4,350,135 | 4,502,866 | 4,490,478 | 4,225,859 | BR #NP6 |
| FTE | <u>27.0</u> | <u>28.6</u> | <u>27.5</u> | <u>27.5</u> | <u>27.6</u> | |
| Cash Funds | 359,960 | 243,620 | 124,689 | 121,256 | 119,344 | |
| FTE | 1.5 | 3.0 | 2.0 | 2.0 | 2.0 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 4,411,250 | 4,106,515 | 4,378,177 | 4,369,222 | 4,106,515 | |
| FTE | 25.5 | 25.6 | 25.5 | 25.5 | 25.6 | |
| Transfer to the Department of Health Care Policy and Financing for Breast and Cervical Cancer Treatment | <u>638,398</u> | <u>928,088</u> | <u>1,215,340</u> | <u>1,215,340</u> | <u>1,215,340</u> | |
| Cash Funds (Amendment 35) | 0 | 928,088 | 1,215,340 | 1,215,340 | 1,215,340 | |
| Cash Funds Exempt/RF (Amendment 35) | 638,398 | 0 | 0 | 0 | 0 | |
| Breast and Cervical Cancer Screening | 6,708,729 | 7,625,109 | 6,348,091 | 4,723,091 B | 6,955,836 | BA NP-14 |
| FTE | <u>1.5</u> | <u>1.3</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | |
| Cash Funds (Amendment 35) | 483,600 | 4,330,933 | 3,661,660 | 2,036,660 | 3,661,660 | |
| FTE | 1.5 | 1.3 | 0.0 | 0.0 | 0.0 | |
| Cash Funds Exempt/RF (Amendment 35) | 3,538,698 | 0 | 0 | 0 | 0 | |
| Federal Funds | 2,686,431 | 3,294,176 | 2,686,431 | 2,686,431 | 3,294,176 | |
| Subtotal - (3) Chronic Disease and Cancer Prevention Grants Program | 12,118,337 | 12,903,332 | 12,066,297 | 10,428,909 | 12,397,035 | |
| FTE | 28.5 | 29.9 | 27.5 | 27.5 | 27.6 | |
| Cash Funds | 843,560 | 5,502,641 | 5,001,689 | 3,373,256 | 4,996,344 | |
| FTE | 3.0 | 4.3 | 2.0 | 2.0 | 2.0 | |
| Cash Funds Exempt/RF | 4,177,096 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 7,097,681 | 7,400,691 | 7,064,608 | 7,055,653 | 7,400,691 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|---|-----------------------|-------------------------------|-------------------|
| FTE | 25.5 | 25.6 | 25.5 | | 25.5 | 25.6 | |
| (4) Suicide Prevention | 282,767 | 285,063 | 283,843 | S | 281,601 | 282,915 | BR #NP2, |
| FTE | <u>2.0</u> | <u>2.1</u> | <u>2.0</u> | | <u>2.0</u> | <u>2.0</u> | BR #NP6 |
| General Fund | 282,767 | 285,063 | 283,843 | | 281,601 | 282,915 | BA NP-16 |
| FTE | 2.0 | 2.1 | 2.0 | | 2.0 | 2.0 | |
| Cash Funds | 0 | 0 | 0 | | 0 | 0 | |
| (5) Tobacco Education, Prevention, and Cessation | | | | | | | |
| Personal Services | 737,609 | 503,344 | 702,970 | | 621,442 | 730,173 | BR #NP6 |
| FTE | <u>9.4</u> | <u>6.5</u> | <u>10.0</u> | | <u>8.5</u> | <u>10.0</u> | BA NP-14 |
| Cash Funds (Amendment 35) | 737,609 | 503,344 | 702,970 | | 621,442 | 730,173 | |
| FTE | 9.4 | 6.5 | 10.0 | | 8.5 | 10.0 | |
| Cash Funds Exempt/RF (Amendment 35) | 0 | 0 | 0 | | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | | 0.0 | 0.0 | |
| Operating Expenses | <u>173,365</u> | <u>62,509</u> | <u>100,000</u> | | <u>75,000</u> | <u>175,000</u> | |
| Cash Funds (Amendment 35) | 173,365 | 62,509 | 100,000 | | 75,000 | 175,000 | |
| Cash Funds Exempt/RF (Amendment 35) | 0 | 0 | 0 | | 0 | 0 | |
| Tobacco Cessation and Prevention Grants | <u>26,885,441</u> | <u>11,334,362</u> | <u>7,007,811</u> | | <u>5,546,358</u> | <u>23,207,058</u> | BR #NP3 |
| Cash Funds (Amendment 35) | 26,885,441 | 11,334,362 | 7,007,811 | | 5,546,358 | 23,207,058 | BA NP-14 |
| Cash Funds Exempt/RF (Amendment 35) | 0 | 0 | 0 | | 0 | 0 | |
| Subtotal - (5) Tobacco Education, Prevention, and Cessation | 27,796,415 | 11,900,215 | 7,810,781 | | 6,242,800 | 24,112,231 | |
| FTE | <u>9.4</u> | <u>6.5</u> | <u>10.0</u> | | <u>8.5</u> | <u>10.0</u> | |
| Cash Funds | 27,796,415 | 11,900,215 | 7,810,781 | | 6,242,800 | 24,112,231 | |
| FTE | 9.4 | 6.5 | 10.0 | | 8.5 | 10.0 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | | 0.0 | 0.0 | |

| | FY 2008-09 | FY 2009-10 | FY 2010-11 | | FY 2011-12 | Change | |
|---|-------------|-------------|---------------|---|-------------|-----------------|----------------|
| | Actual | Actual | Appropriation | | Request | Staff Recommend | |
| | | | | | | Request | |
| (6) Oral Health Programs | 1,094,004 | 1,245,377 | 861,784 | S | 837,950 | B 1,208,647 | BR #NP2, |
| FTE | <u>3.7</u> | <u>4.9</u> | <u>3.0</u> | | <u>3.0</u> | <u>4.8</u> | BR #NP6 |
| General Fund | 382,008 | 240,501 | 179,764 | | 179,014 | 179,366 | BA NP-16 |
| FTE | 0.8 | 0.9 | 0.8 | | 0.8 | 0.8 | |
| Cash Funds (Tobacco Settlement) | 246,130 | 178,504 | 224,667 | | 199,684 | 202,909 | |
| FTE | 0.2 | 0.2 | 0.2 | | 0.2 | 0.2 | |
| Cash Funds Exempt/RF (Tobacco Settlement) | 0 | 0 | 0 | | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | | 0.0 | 0.0 | |
| Federal Funds | 465,866 | 826,372 | 457,353 | | 459,252 | 826,372 | |
| FTE | 2.7 | 3.8 | 2.0 | | 2.0 | 3.8 | |
| SUBTOTAL (A) - Prevention Programs | 107,137,760 | 51,836,634 | 40,145,491 | | 32,392,586 | 60,646,653 | |
| FTE | <u>75.6</u> | <u>75.5</u> | <u>75.6</u> | | <u>72.6</u> | <u>77.4</u> | |
| General Fund | 997,107 | 863,695 | 799,937 | | 793,284 | 796,523 | |
| FTE | 6.7 | 6.8 | 6.8 | | 6.8 | 6.8 | |
| Cash Funds | 64,779,186 | 37,525,266 | 27,078,435 | | 19,336,128 | 48,875,689 | |
| FTE | 13.0 | 20.3 | 22.2 | | 19.2 | 22.2 | |
| Cash Funds Exempt/RF | 28,670,097 | 186 | 25,000 | | 23,498 | 0 | |
| FTE | 8.6 | 0.0 | 0.0 | | 0.0 | 0.0 | |
| Federal Funds | 12,691,370 | 13,447,487 | 12,242,119 | | 12,239,676 | 10,974,441 | |
| FTE | 47.3 | 48.4 | 46.6 | | 46.6 | 48.4 | |
| <i>Medicaid Reappropriated Funds</i> | 0 | 0 | 0 | | (1,502) | 0 | |
| <i>GF in Medicaid RF</i> | 0 | 0 | 0 | | 0 | 0 | |
| <i>Net General Fund</i> | 997,107 | 863,695 | 799,937 | | 793,284 | 796,523 | |
| (B) Women's Health - Family Planning | | | | | | | |
| Personal Services | 1,460,821 | 1,197,321 | 1,180,566 | S | 1,116,909 | B 1,082,396 | DI #3, BR #NP2 |
| FTE | <u>15.9</u> | <u>12.6</u> | <u>13.9</u> | | <u>13.0</u> | <u>12.6</u> | BR #NP6 |
| General Fund | 438,756 | 442,484 | 388,768 | | 383,566 | 385,568 | BA NP-16 |
| FTE | 5.2 | 5.2 | 5.8 | | 5.8 | 5.8 | |
| Cash Funds | 0 | 0 | 0 | | 0 | 0 | |
| FTE | 1.5 | 0.0 | 0.0 | | 0.0 | 0.0 | |
| Cash Funds Exempt/RF | 181,962 | 59,169 | 58,577 | | 0 | 1,160 | |
| FTE | 1.0 | 0.6 | 0.9 | | 0.0 | 0.0 | |
| Federal Funds | 840,103 | 695,668 | 733,221 | | 733,343 | 695,668 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| FTE | 8.2 | 6.8 | 7.2 | 7.2 | 6.8 | |
| <i>Medicaid Reappropriated Funds</i> | 59,169 | 59,169 | 58,577 | 0 | 296 | |
| <i>GF in Medicaid RF</i> | 29,585 | 29,585 | 29,289 | 0 | 148 | |
| <i>Net General Fund</i> | 468,341 | 472,069 | 418,057 | 383,566 | 385,716 | |
| Operating Expenses - GF | 3,355 | 3,355 | 3,355 | 3,355 | 3,355 | |
| Purchase of Services | <u>4,579,716</u> | <u>4,811,233</u> | <u>4,579,716</u> | <u>4,554,211</u> B | <u>4,794,753</u> | DI #3 |
| General Fund | 1,229,003 | 1,229,003 | 1,229,003 | 1,229,003 | 1,229,003 | BA NP-16 |
| Cash Funds Exempt/RF | 25,505 | 16,480 | 25,505 | 0 | 0 | |
| Federal Funds | 3,325,208 | 3,565,750 | 3,325,208 | 3,325,208 | 3,565,750 | |
| <i>Medicaid Reappropriated Funds</i> | 25,505 | 16,480 | 25,505 | 0 | 0 | |
| <i>GF in Medicaid RF</i> | 12,753 | 8,240 | 12,753 | 0 | 0 | |
| <i>Net General Fund</i> | 1,241,756 | 1,237,243 | 1,241,756 | 1,229,003 | 1,229,003 | |
| Adult Stem Cells Cure Fund - CF | 0 | 42,192 | 140,000 | 140,000 | 140,000 | |
| Federal Grants - FF | 359,387 | 410,248 | 332,037 | 333,811 | 410,248 | BR #NP6 |
| FTE | 4.0 | 4.0 | 3.8 | 3.8 | 4.0 | |
| SUBTOTAL (B) - Women's Health - Family Planning | 6,403,279 | 6,464,349 | 6,235,674 | 6,148,286 | 6,430,752 | |
| FTE | <u>19.9</u> | <u>16.6</u> | <u>17.7</u> | <u>16.8</u> | <u>16.6</u> | |
| General Fund | 1,671,114 | 1,674,842 | 1,621,126 | 1,615,924 | 1,617,926 | |
| FTE | 5.2 | 5.2 | 5.8 | 5.8 | 5.8 | |
| Cash Funds | 0 | 42,192 | 140,000 | 140,000 | 140,000 | |
| FTE | 1.5 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds Exempt/RF | 207,467 | 75,649 | 84,082 | 0 | 1,160 | |
| FTE | 1.0 | 0.6 | 0.9 | 0.0 | 0.0 | |
| Federal Funds | 4,524,698 | 4,671,666 | 4,390,466 | 4,392,362 | 4,671,666 | |
| FTE | 12.2 | 10.8 | 11.0 | 11.0 | 10.8 | |
| <i>Medicaid Reappropriated Funds</i> | 84,674 | 75,649 | 84,082 | 0 | 296 | |
| <i>GF in Medicaid RF</i> | 42,338 | 37,825 | 42,042 | 0 | 148 | |
| <i>Net General Fund</i> | 1,713,452 | 1,712,667 | 1,663,168 | 1,615,924 | 1,618,074 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|---|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| (C) Primary Care Office | | | | | | |
| Program Costs | 0 | 35,407 | 133,647 | 132,787 | 801,982 | BR #NP6 |
| FTE | 0.0 | 0.6 | 1.5 | 1.5 | 1.5 | |
| Cash Funds | | 35,407 | 53,647 | 52,787 | 51,982 | |
| FTE | | 0.6 | 0.5 | 0.5 | 0.5 | |
| Federal Funds | | 0 | 80,000 | 80,000 | 750,000 | |
| FTE | | 0.0 | 1.0 | 1.0 | 1.0 | |
| Federal Grants - FF | 254,876 | 127,755 | 252,386 | 253,364 | 127,755 | BR #NP6 |
| FTE | 1.2 | 1.2 | 1.2 | 1.2 | 1.2 | |
| SUBTOTAL (C) - Primary Care Office | 254,876 | 163,162 | 386,033 | 386,151 | 929,737 | |
| FTE | <u>1.2</u> | <u>1.8</u> | <u>2.7</u> | <u>2.7</u> | <u>2.7</u> | |
| Cash Funds | 0 | 35,407 | 53,647 | 52,787 | 51,982 | |
| FTE | 0.0 | 0.6 | 0.5 | 0.5 | 0.5 | |
| Federal Funds | 254,876 | 127,755 | 332,386 | 333,364 | 877,755 | |
| FTE | 1.2 | 1.2 | 2.2 | 2.2 | 2.2 | |
| (D) Prevention Partnerships | | | | | | |
| (1) Interagency Prevention Programs Coordination | | | | | | |
| Personal Services | 206,483 | 114,913 | 114,504 S | 113,175 B | 113,770 | BR #NP2, |
| FTE | <u>2.8</u> | <u>1.9</u> | <u>2.0</u> | <u>2.0</u> | <u>2.0</u> | BR #NP6 |
| General Fund | 206,483 | 114,913 | 114,504 | 113,175 | 113,770 | BA NP-16 |
| FTE | 2.8 | 1.9 | 2.0 | 2.0 | 2.0 | |
| Cash Funds | 0 | 0 | 0 | 0 | 0 | |
| Operating Expenses | <u>16,763</u> | <u>16,762</u> | <u>16,769</u> | <u>16,769</u> B | <u>16,769</u> | BA NP-16 |
| General Fund | 16,763 | 16,762 | 16,769 | 16,769 | 16,769 | |
| Subtotal - (1) Interagency Prevention Programs | | | | | | |
| Coordination | 223,246 | 131,675 | 131,273 | 129,944 | 130,539 | |
| FTE | <u>2.8</u> | <u>1.9</u> | <u>2.0</u> | <u>2.0</u> | <u>2.0</u> | |
| General Fund | 223,246 | 131,675 | 131,273 | 129,944 | 130,539 | |
| FTE | 2.8 | 1.9 | 2.0 | 2.0 | 2.0 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|---|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| Cash Funds | 0 | 0 | 0 | 0 | 0 | |
| (2) Tony Grampsas Youth Services Program | | | | | | |
| Prevention Services Programs | 5,073,334 | 3,986,075 | 3,841,275 | 1,953,870 B | 3,609,327 | BR #NP6 |
| FTE | <u>2.8</u> | <u>3.0</u> | <u>3.0</u> | <u>3.0</u> | <u>3.0</u> | BA NP-15 |
| General Fund | 999,301 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds (Tobacco Settlement) | 4,074,033 | 3,986,075 | 3,841,275 | 1,953,870 | 3,609,327 | |
| FTE | 2.8 | 3.0 | 3.0 | 3.0 | 3.0 | |
| Cash Funds Exempt/RF (Tobacco Settlement) | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Colorado Student Before-and-After-School Project - CFE/RF | 299,190 | 0 | 0 | 0 | 0 | |
| Colorado Student Before-and-After-School Project Fund - GF | 300,000 | 0 | 0 | 0 | 0 | |
| Subtotal - (2) Tony Grampsas Youth Services Program | 5,672,524 | 3,986,075 | 3,841,275 | 1,953,870 | 3,609,327 | |
| FTE | <u>2.8</u> | <u>3.0</u> | <u>3.0</u> | <u>3.0</u> | <u>3.0</u> | |
| General Fund | 1,299,301 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds | 4,074,033 | 3,986,075 | 3,841,275 | 1,953,870 | 3,609,327 | |
| FTE | 2.8 | 3.0 | 3.0 | 3.0 | 3.0 | |
| Cash Funds Exempt/RF | 299,190 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| (3) Colorado Children's Trust Fund | | | | | | |
| Personal Services | 136,951 | 96,423 | 176,586 | 175,800 | 139,724 | BR #NP6 |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| FTE | <u>1.6</u> | <u>1.3</u> | <u>1.5</u> | <u>1.5</u> | <u>1.5</u> | |
| Cash Funds | 36,680 | 31,798 | 76,315 | 76,253 | 75,099 | |
| FTE | 0.5 | 1.3 | 1.5 | 1.5 | 1.5 | |
| Federal Funds | 100,271 | 64,625 | 100,271 | 99,547 | 64,625 | |
| FTE | 1.1 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Operating Expenses | <u>928,616</u> | <u>736,966</u> | <u>1,106,734</u> | <u>1,106,734</u> | <u>869,206</u> | |
| Cash Funds | 217,019 | 262,897 | 395,137 | 395,137 | 395,137 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| Federal Funds | 711,597 | 474,069 | 711,597 | 711,597 | 474,069 | |
| Subtotal - (3) Colorado Children's Trust Fund | 1,065,567 | 833,389 | 1,283,320 | 1,282,534 | 1,008,930 | |
| FTE | <u>1.6</u> | <u>1.3</u> | <u>1.5</u> | <u>1.5</u> | <u>1.5</u> | |
| Cash Funds | 253,699 | 294,695 | 471,452 | 471,390 | 470,236 | |
| FTE | 0.5 | 1.3 | 1.5 | 1.5 | 1.5 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| Federal Funds | 811,868 | 538,694 | 811,868 | 811,144 | 538,694 | |
| FTE | 1.1 | 0.0 | 0.0 | 0.0 | 0.0 | |
| SUBTOTAL - (D) PREVENTION PARTNERSHIPS | 6,961,337 | 4,951,139 | 5,255,868 | 3,366,348 | 4,748,796 | |
| FTE | <u>7.2</u> | <u>6.2</u> | <u>6.5</u> | <u>6.5</u> | <u>6.5</u> | |
| General Fund | 1,522,547 | 131,675 | 131,273 | 129,944 | 130,539 | |
| FTE | 2.8 | 1.9 | 2.0 | 2.0 | 2.0 | |
| Cash Funds | 4,327,732 | 4,280,770 | 4,312,727 | 2,425,260 | 4,079,563 | |
| FTE | 3.3 | 4.3 | 4.5 | 4.5 | 4.5 | |
| Cash Funds Exempt/RF | 299,190 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 811,868 | 538,694 | 811,868 | 811,144 | 538,694 | |
| FTE | 1.1 | 0.0 | 0.0 | 0.0 | 0.0 | |
| (E) Family and Community Health | | | | | | |
| (1) Maternal and Child Health | 3,353,092 | 3,513,154 | 3,312,106 | 3,318,653 | 3,513,154 | BR #NP6 |
| FTE | <u>9.8</u> | <u>18.9</u> | <u>9.8</u> | <u>9.8</u> | <u>18.9</u> | |
| General Fund | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |

| | FY 2008-09 | FY 2009-10 | FY 2010-11 | | FY 2011-12 | Change |
|--|------------|------------|---------------|---|-----------------|------------|
| | Actual | Actual | Appropriation | | Request | Request |
| | | | | | Staff Recommend | |
| Federal Funds | 3,353,092 | 3,513,154 | 3,312,106 | | 3,318,653 | 3,513,154 |
| FTE | 9.8 | 18.9 | 9.8 | | 9.8 | 18.9 |
| (2) Child, Adolescent, and School Health | | | | | | |
| Nurse Home Visitor Program | 12,361,408 | 12,737,350 | 13,444,464 | 0 | 16,729,707 | 16,822,575 |
| FTE | <u>3.2</u> | <u>3.5</u> | <u>3.0</u> | # | <u>3.0</u> | <u>3.0</u> |
| Cash Funds (Tobacco Settlement) | 12,361,408 | 12,737,350 | 13,444,464 | | 13,442,109 | 13,534,977 |
| FTE | 3.2 | 3.5 | 3.0 | | 3.0 | 3.0 |
| Cash Funds Exempt/RF (Tobacco Settlement) | 0 | 0 | 0 | | 0 | 0 |
| FTE | 0.0 | 0.0 | 0.0 | | 0.0 | 0.0 |
| Federal Funds | | | | | 3,287,598 | 3,287,598 |
| FTE | | | | | 0.0 | 0.0 |
| School-Based Health Centers - GF | 974,810 | 998,542 | 998,204 | S | 997,943 | 998,229 |
| FTE | 0.6 | 0.5 | 0.7 | | 0.7 | 0.7 |
| Federal and Private Grants | 301,230 | 1,217,844 | 294,413 | | 296,137 | 1,217,844 |
| FTE | <u>3.2</u> | <u>3.1</u> | <u>3.2</u> | | <u>3.2</u> | <u>3.1</u> |
| Cash Funds Exempt/RF | 0 | 0 | 0 | | 0 | 0 |
| Federal Funds | 301,230 | 1,217,844 | 294,413 | | 296,137 | 1,217,844 |
| FTE | 3.2 | 3.1 | 3.2 | | 3.2 | 3.1 |
| Subtotal - (2) Child, Adolescent, and School Health | 13,637,448 | 14,953,736 | 14,737,081 | 0 | 18,023,787 | 19,038,648 |
| FTE | <u>7.0</u> | <u>7.1</u> | <u>6.9</u> | # | <u>6.9</u> | <u>6.8</u> |
| General Fund | 974,810 | 998,542 | 998,204 | 0 | 997,943 | 998,229 |
| FTE | 0.6 | 0.5 | 0.7 | # | 0.7 | 0.7 |
| Cash Funds | 12,361,408 | 12,737,350 | 13,444,464 | 0 | 13,442,109 | 13,534,977 |
| FTE | 3.2 | 3.5 | 3.0 | # | 3.0 | 3.0 |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | 0 |
| FTE | 0.0 | 0.0 | 0.0 | # | 0.0 | 0.0 |
| Federal Funds | 301,230 | 1,217,844 | 294,413 | 0 | 3,583,735 | 4,505,442 |
| FTE | 3.2 | 3.1 | 3.2 | # | 3.2 | 3.1 |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|---|----------------------|----------------------|-----------------------------|---|-----------------------|-------------------------------|-------------------|
| (3) Children With Special Needs | | | | | | | |
| (a) Health Care Program for Children with Special Needs | | | | | | | |
| Personal Services | 1,238,770 | 1,115,719 | 1,171,596 | S | 1,163,082 | 1,048,659 | BR #NP2, |
| FTE | <u>13.2</u> | <u>11.6</u> | <u>15.9</u> | | <u>15.9</u> | <u>13.6</u> | BR #NP6 |
| General Fund | 667,172 | 675,504 | 621,904 | | 605,285 | 608,444 | BA NP-16 |
| FTE | 7.4 | 7.6 | 9.6 | | 9.6 | 9.6 | |
| Federal Funds | 571,598 | 440,215 | 549,692 | | 557,797 | 440,215 | |
| FTE | 5.8 | 4.0 | 6.3 | | 6.3 | 4.0 | |
| Operating Expenses | <u>100,577</u> | <u>69,758</u> | <u>71,939</u> | | <u>71,939</u> | <u>71,668</u> | BA NP-16 |
| General Fund | 87,577 | 57,029 | 58,939 | | 58,939 | 58,939 | |
| Federal Funds | 13,000 | 12,729 | 13,000 | | 13,000 | 12,729 | |
| Purchase of Services | 3,410,286 | 3,544,821 | 3,451,160 | | 3,451,160 | 3,585,695 | BA NP-16 |
| FTE | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | | <u>0.0</u> | <u>0.0</u> | |
| General Fund | 1,856,473 | 1,856,473 | 1,856,473 | | 1,856,473 | 1,856,473 | |
| Cash Funds | 0 | 0 | 40,874 | | 40,874 | 40,874 | |
| FTE | 0.0 | 0.0 | 0.0 | | 0.0 | 0.0 | |
| Federal Funds | 1,553,813 | 1,688,348 | 1,553,813 | | 1,553,813 | 1,688,348 | |
| Traumatic Brain Injury Services - CFE/RF | 120,995 | 119,927 | 187,782 | | 187,846 | 187,016 | BR #NP6 |
| FTE | 0.0 | 0.4 | 1.0 | | 1.0 | 1.0 | |
| Subtotal - (a) Health Care Program for Children with Special Needs | 4,870,628 | 4,850,225 | 4,882,477 | | 4,874,027 | 4,893,038 | |
| FTE | <u>13.2</u> | <u>12.0</u> | <u>16.9</u> | | <u>16.9</u> | <u>14.6</u> | |
| General Fund | 2,611,222 | 2,589,006 | 2,537,316 | | 2,520,697 | 2,523,856 | |
| FTE | 7.4 | 7.6 | 9.6 | | 9.6 | 9.6 | |
| Cash Funds | 0 | 0 | 40,874 | | 40,874 | 40,874 | |
| FTE | 0.0 | 0.0 | 0.0 | | 0.0 | 0.0 | |
| Cash Funds Exempt/RF | 120,995 | 119,927 | 187,782 | | 187,846 | 187,016 | |
| FTE | 0.0 | 0.4 | 1.0 | | 1.0 | 1.0 | |
| Federal Funds | 2,138,411 | 2,141,292 | 2,116,505 | | 2,124,610 | 2,141,292 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| FTE | 5.8 | 4.0 | 6.3 | 6.3 | 4.0 | |
| (b) Genetics Counseling | | | | | | |
| Personal Services - CF | 58,902 | 75,132 | 78,974 | 78,968 | 77,759 | BR #NP6 |
| FTE | 0.9 | 1.0 | 1.0 | 1.0 | 1.0 | |
| Operating Expenses | <u>1,226,016</u> | <u>1,472,352</u> | <u>1,501,817</u> | <u>1,575,057</u> | <u>1,575,057</u> | DI #2 |
| Cash Funds | 1,226,016 | 1,472,352 | 1,501,817 | 1,575,057 | 1,575,057 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| Subtotal - (b) Genetics Counseling | 1,284,918 | 1,547,484 | 1,580,791 | 1,654,025 | 1,652,816 | |
| FTE | 0.9 | 1.0 | 1.0 | 1.0 | 1.0 | |
| Cash Funds | 1,284,918 | 1,547,484 | 1,580,791 | 1,654,025 | 1,652,816 | |
| FTE | 0.9 | 1.0 | 1.0 | 1.0 | 1.0 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| Subtotal - (3) Children With Special Needs - Genetics | 6,155,546 | 6,397,709 | 6,463,268 | 6,528,052 | 6,545,854 | |
| FTE | <u>14.1</u> | <u>13.0</u> | <u>17.9</u> | <u>17.9</u> | <u>15.6</u> | |
| General Fund | 2,611,222 | 2,589,006 | 2,537,316 | 2,520,697 | 2,523,856 | |
| FTE | 7.4 | 7.6 | 9.6 | 9.6 | 9.6 | |
| Cash Funds | 1,284,918 | 1,547,484 | 1,621,665 | 1,694,899 | 1,693,690 | |
| FTE | 0.9 | 1.0 | 1.0 | 1.0 | 1.0 | |
| Cash Funds Exempt/RF | 120,995 | 119,927 | 187,782 | 187,846 | 187,016 | |
| FTE | 0.0 | 0.4 | 1.0 | 1.0 | 1.0 | |
| Federal Funds | 2,138,411 | 2,141,292 | 2,116,505 | 2,124,610 | 2,141,292 | |
| FTE | 5.8 | 4.0 | 6.3 | 6.3 | 4.0 | |
| (4) Department of Human Services Grant | | | | | | |
| Cash Funds Exempt/RF | 25,176 | 0 | 29,790 | 29,790 | 29,790 | |
| FTE | 0.2 | 0.0 | 0.2 | 0.2 | 0.2 | |
| (5) Federal Grants - FF | | | | | | |
| FTE | 538,105 | 801,650 | 424,871 | 423,161 | 801,650 | BR #NP6 |
| FTE | 2.4 | 3.2 | 1.2 | 1.2 | 3.2 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| SUBTOTAL - (E) Family and Community Health | 23,709,367 | 25,666,249 | 24,967,116 | 28,323,443 | 29,929,096 | |
| FTE | <u>33.5</u> | <u>42.2</u> | <u>36.0</u> | <u>36.0</u> | <u>44.7</u> | |
| General Fund | 3,586,032 | 3,587,548 | 3,535,520 | 3,518,640 | 3,522,085 | |
| FTE | 8.0 | 8.1 | 10.3 | 10.3 | 10.3 | |
| Cash Funds | 13,646,326 | 14,284,834 | 15,066,129 | 15,137,008 | 15,228,667 | |
| FTE | 4.1 | 4.5 | 4.0 | 4.0 | 4.0 | |
| Cash Funds Exempt/RF | 146,171 | 119,927 | 217,572 | 217,636 | 216,806 | |
| FTE | 0.2 | 0.4 | 1.2 | 1.2 | 1.2 | |
| Federal Funds | 6,330,838 | 7,673,940 | 6,147,895 | 9,450,159 | 10,961,538 | |
| FTE | 21.2 | 29.2 | 20.5 | 20.5 | 29.2 | |
| (F) Nutrition Services | | | | | | |
| Women, Infants, and Children Supplemental Food Grant - | | | | | | |
| FF | 91,763,930 | 91,938,849 | 111,913,876 | 111,907,757 | 95,200,000 | BR #NP6 |
| FTE | 22.8 | 22.9 | 17.8 | 17.8 | 22.9 | |
| Child and Adult Care Food Program - FF | | | | | | |
| FTE | 22,594,553 | 23,278,564 | 22,580,394 | 22,582,646 | 23,278,564 | BR #NP6 |
| FTE | 7.7 | 7.9 | 7.7 | 7.7 | 7.9 | |
| SUBTOTAL - (F) Nutrition Services - FF | 114,358,483 | 115,217,413 | 134,494,270 | 134,490,403 | 118,478,564 | |
| FTE | 30.5 | 30.8 | 25.5 | 25.5 | 30.8 | |
| (G) Federal Grants - FF | 433,129 | 404,188 | 423,804 | 429,172 | 404,188 | BR #NP6 |
| FTE | 2.7 | 3.1 | 2.7 | 2.7 | 3.1 | |
| TOTAL - (9) PREVENTION SERVICES DIVISION | 259,258,231 | 204,703,134 | 211,908,256 | 205,536,389 | 221,567,786 | |
| FTE | <u>170.6</u> | <u>176.2</u> | <u>166.7</u> | <u>162.8</u> | <u>181.8</u> | |
| General Fund | 7,776,800 | 6,257,760 | 6,087,856 | 6,057,792 | 6,067,073 | |
| FTE | 22.7 | 22.0 | 24.9 | 24.9 | 24.9 | |
| Cash Funds | 82,753,244 | 56,168,469 | 46,650,938 | 37,091,183 | 68,375,901 | |
| FTE | 21.9 | 29.7 | 31.2 | 28.2 | 31.2 | |
| Cash Funds Exempt/RF | 29,322,925 | 195,762 | 326,654 | 241,134 | 217,966 | |
| FTE | 9.8 | 1.0 | 2.1 | 1.2 | 1.2 | |
| Federal Funds | 139,405,262 | 142,081,143 | 158,842,808 | 162,146,280 | 146,906,846 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|-------------------------------|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| FTE | 116.2 | 123.5 | 108.5 | 108.5 | 124.5 | |
| Medicaid Reappropriated Funds | 84,674 | 75,649 | 84,082 | (1,502) | 296 | |
| GF in Medicaid RF | 42,338 | 37,825 | 42,042 | 0 | 148 | |
| Net General Fund | 7,819,138 | 6,295,585 | 6,129,898 | 6,057,792 | 6,067,221 | |

(10) HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION

This division establishes and enforces standards for the operation of health care facilities and emergency medical services. The programs focus on education, inspection, investigation and enforcement. The primary sources of cash funds and reappropriated fund for this division include: Health Facilities Licensure Cash Fund, Assisted Living Cash Fund, Medication Administration Cash Fund, Trauma System Cash Fund, Medical Services Account in the Highway Users Tax Fund and Medicaid funds appropriated to the Department of Health Care Policy and Financing.

(A) Licensure

| | | | | | | |
|---|-------------|-------------|-------------|-------------|-------------|----------|
| Health Facilities General Licensure Program | 812,193 | 1,515,418 | 2,912,218 | S 2,902,308 | B 2,863,863 | BR #NP2, |
| FTE | <u>10.9</u> | <u>18.2</u> | <u>44.8</u> | <u>44.8</u> | <u>44.8</u> | BR #NP6 |
| General Fund | 153,977 | 157,747 | 154,988 | 153,612 | 154,249 | BA NP-16 |
| FTE | 1.9 | 1.3 | 0.0 | 0.0 | 0.0 | |
| Cash Funds | 658,216 | 1,357,671 | 2,757,230 | 2,748,696 | 2,709,614 | |
| FTE | 9.0 | 16.9 | 0.0 | 0.0 | 0.0 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| Assisted Living Facilities Program | 727,888 | 821,772 | 914,796 | S 912,208 | B 901,609 | BR #NP2, |
| FTE | <u>10.2</u> | <u>10.2</u> | <u>11.2</u> | <u>11.2</u> | <u>11.2</u> | BR #NP6 |
| General Fund | 110,452 | 109,797 | 109,275 | 110,670 | 111,181 | BA NP-16 |
| FTE | 1.6 | 1.6 | 0.0 | 0.0 | 0.0 | |
| Cash Funds | 617,436 | 711,975 | 805,521 | 801,538 | 790,428 | |
| FTE | 8.6 | 8.6 | 0.0 | 0.0 | 0.0 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| Medication Administration Program | 191,922 | 183,259 | 213,064 | 212,860 | 209,665 | BR #NP2, |
| FTE | <u>0.7</u> | <u>0.6</u> | <u>1.0</u> | <u>1.0</u> | <u>1.0</u> | BR #NP6 |
| Cash Funds | 191,922 | 183,259 | 213,064 | 212,860 | 209,665 | |
| FTE | 0.7 | 0.6 | 0.0 | 0.0 | 0.0 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|---|-----------------------|-------------------------------|-------------------|
| Medicaid/Medicare Certification Program | 7,940,478 | 8,047,295 | 7,624,803 | S | 7,579,356 | 7,840,230 | BR #NP2, |
| FTE | <u>94.2</u> | <u>94.7</u> | <u>93.6</u> | | <u>93.6</u> | <u>93.6</u> | BR #NP6 |
| Cash Funds Exempt/RF | 3,881,085 | 3,996,999 | 3,811,902 | | 3,771,505 | 3,789,934 | |
| FTE | 49.2 | 49.5 | 0.0 | | 0.0 | 0.0 | |
| Federal Funds | 4,059,393 | 4,050,296 | 3,812,901 | | 3,807,851 | 4,050,296 | |
| FTE | 45.0 | 45.2 | 0.0 | | 0.0 | 0.0 | |
| <i>Medicaid Reappropriated Funds</i> | <i>3,881,085</i> | <i>3,996,999</i> | <i>3,811,902</i> | | <i>3,771,505</i> | <i>3,789,933</i> | |
| <i>GF in Medicaid RF</i> | <i>1,168,422</i> | <i>1,347,724</i> | <i>1,334,166</i> | | <i>1,320,027</i> | <i>1,326,477</i> | |
| <i>Net General Fund</i> | <i>1,168,422</i> | <i>1,347,724</i> | <i>1,334,166</i> | | <i>1,320,027</i> | <i>1,326,477</i> | |
| SUBTOTAL (A) - Licensure | 9,672,481 | 10,567,744 | 11,664,881 | | 11,606,732 | 11,815,367 | |
| FTE | <u>116.0</u> | <u>123.7</u> | <u>150.6</u> | | <u>150.6</u> | <u>150.6</u> | |
| General Fund | 264,429 | 267,544 | 264,263 | | 264,282 | 265,430 | |
| FTE | 3.5 | 2.9 | 0.0 | | 0.0 | 0.0 | |
| Cash Funds | 1,467,574 | 2,252,905 | 3,775,815 | | 3,763,094 | 3,709,707 | |
| FTE | 18.3 | 26.1 | 0.0 | | 0.0 | 0.0 | |
| Cash Funds Exempt/RF | 3,881,085 | 3,996,999 | 3,811,902 | | 3,771,505 | 3,789,934 | |
| FTE | 49.2 | 49.5 | 0.0 | | 0.0 | 0.0 | |
| Federal Funds | 4,059,393 | 4,050,296 | 3,812,901 | | 3,807,851 | 4,050,296 | |
| FTE | 45.0 | 45.2 | 0.0 | | 0.0 | 0.0 | |
| <i>Medicaid Reappropriated Funds</i> | <i>3,881,085</i> | <i>3,996,999</i> | <i>3,811,902</i> | | <i>3,771,505</i> | <i>3,789,933</i> | |
| <i>GF in Medicaid RF</i> | <i>1,168,422</i> | <i>1,347,724</i> | <i>1,334,166</i> | | <i>1,320,027</i> | <i>1,326,477</i> | |
| <i>Net General Fund</i> | <i>1,432,851</i> | <i>1,615,268</i> | <i>1,598,429</i> | | <i>1,584,309</i> | <i>1,591,907</i> | |
| (B) Emergency Medical Services | | | | | | | |
| State EMS Coordination, Planning and Certification | 1,069,165 | 1,354,468 | 1,373,398 | | 1,369,718 | 1,351,968 | BR #NP6 |
| FTE | <u>11.1</u> | <u>11.6</u> | <u>16.4</u> | | <u>16.4</u> | <u>16.4</u> | |
| Cash Funds | 1,069,165 | 1,354,468 | 1,373,398 | | 1,369,718 | 1,351,968 | |
| FTE | 11.1 | 11.6 | 16.4 | | 16.4 | 16.4 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | | 0.0 | 0.0 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|---|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| Distributions to Regional Emergency Medical and Trauma Councils (RETACs) | | | | | | |
| Cash Funds | <u>1,785,000</u> | <u>1,785,000</u> | <u>1,785,000</u> | <u>1,785,000</u> | <u>1,785,000</u> | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | |
| Emergency Medical Services Provider Grants | | | | | | |
| Cash Funds | <u>1,890,728</u> | <u>6,455,509</u> | <u>6,793,896</u> | <u>6,793,896</u> | <u>6,793,896</u> | |
| Cash Funds Exempt/RF | 71,300 | 0 | 0 | 0 | 0 | |
| Trauma Facility Designation Program - CF | | | | | | |
| FTE | 319,807 | 361,327 | 385,869 | 385,753 | 380,212 | BR #NP6 |
| | 1.7 | 1.9 | 2.1 | 2.1 | 2.1 | |
| Federal Grants - FF | | | | | | |
| FTE | 132,692 | 255,779 | 105,591 | 108,122 | 255,779 | BR #NP6 |
| | 1.2 | 2.5 | 0.9 | 0.9 | 2.5 | |
| Poison Control - GF | | | | | | |
| | 1,421,442 | 1,421,442 | 1,421,442 | 1,421,442 | 1,421,442 | |
| SUBTOTAL - (B) Emergency Medical Services | | | | | | |
| FTE | <u>14.0</u> | <u>16.0</u> | <u>19.4</u> | <u>19.4</u> | <u>21.0</u> | |
| General Fund | | | | | | |
| Cash Funds | 1,421,442 | 1,421,442 | 1,421,442 | 1,421,442 | 1,421,442 | |
| Cash Funds | 4,993,400 | 9,956,304 | 10,338,163 | 10,334,367 | 10,311,076 | |
| FTE | 12.8 | 13.5 | 18.5 | 18.5 | 18.5 | |
| Cash Funds Exempt/RF | | | | | | |
| FTE | 71,300 | 0 | 0 | 0 | 0 | |
| | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | | | | | | |
| FTE | 132,692 | 255,779 | 105,591 | 108,122 | 255,779 | |
| | 1.2 | 2.5 | 0.9 | 0.9 | 2.5 | |
| (C) Indirect Cost Assessment | | | | | | |
| Cash Funds | <u>1,662,761</u> | <u>1,696,653</u> | <u>2,110,311</u> | <u>1,730,311</u> | <u>Pending</u> | |
| Cash Funds Exempt/RF | 416,651 | 549,415 | 929,415 | 549,415 | | |
| Federal Funds | 502,647 | 456,634 | 552,760 | 552,760 | | |
| <i>Medicaid Reappropriated Funds</i> | 743,463 | 690,604 | 628,136 | 628,136 | | |
| | 502,647 | 456,634 | 552,760 | 552,760 | | |
| <i>GF in Medicaid RF</i> | 0 | 0 | 0 | 0 | 0 | |
| <i>Net General Fund</i> | 0 | 0 | 0 | 0 | 0 | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|---|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| TOTAL - (10) HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION | 17,954,076 | 23,897,922 | 25,640,388 | 25,200,974 | 23,803,664 | |
| FTE | <u>130.0</u> | <u>139.7</u> | <u>170.0</u> | <u>170.0</u> | <u>171.6</u> | |
| General Fund | 1,685,871 | 1,688,986 | 1,685,705 | 1,685,724 | 1,686,872 | |
| FTE | 3.5 | 2.9 | | 0.0 | 0.0 | |
| Cash Funds | 6,877,625 | 12,758,624 | 15,043,393 | 14,646,876 | 14,020,783 | |
| FTE | 31.1 | 39.6 | | 18.5 | 18.5 | |
| Cash Funds Exempt/RF | 4,455,032 | 4,453,633 | 4,364,662 | 4,324,265 | 3,789,934 | |
| FTE | 49.2 | 49.5 | | 0.0 | 0.0 | |
| Federal Funds | 4,935,548 | 4,996,679 | 4,546,628 | 4,544,109 | 4,306,075 | |
| FTE | 46.2 | 47.7 | | 0.9 | 2.5 | |
| <i>Medicaid Reappropriated Funds</i> | 4,383,732 | 4,453,633 | 4,364,662 | 4,324,265 | 3,789,933 | |
| <i>GF in Medicaid RF</i> | 1,168,422 | 1,347,724 | 1,334,166 | 1,320,027 | 1,326,477 | |
| <i>Net General Fund</i> | 2,854,293 | 3,036,710 | 3,019,871 | 3,005,751 | 3,013,349 | |

(11) EMERGENCY PREPAREDNESS AND RESPONSE DIVISION

The Department requests creation of this new division, which will handle emergency preparedness. It will prepare for a wide variety of disasters, natural as well as man-made, including floods, wildfires, tornados, infectious disease epidemics, food and water borne disease outbreaks, and terrorist attacks.

| | | | | | | |
|-------------------------------|-------------|-------------|--------------|--------------|-------------|----------|
| Program Costs | 18,555,728 | 36,078,143 | 19,840,519 S | 19,806,752 B | 36,955,981 | BR #NP2, |
| FTE | <u>45.8</u> | <u>33.9</u> | <u>42.5</u> | <u>42.5</u> | <u>35.0</u> | BR #NP6 |
| General Fund | 0 | 878,214 | 1,757,179 | 1,754,626 | 1,756,052 | BA NP-16 |
| FTE | 0.0 | 0.9 | 2.0 | 2.0 | 2.0 | |
| Federal Funds | 18,555,728 | 35,199,929 | 18,083,340 | 18,052,126 | 35,199,929 | |
| FTE | 45.8 | 33.0 | 40.5 | 40.5 | 33.0 | |
| Indirect Cost Assessment - FF | 0 | 892,743 | 1,127,412 | 1,448,879 | Pending | |

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Appropriation | FY 2011-12 Request | FY 2011-12 Staff Recommend | Change Request |
|--|----------------------|----------------------|-----------------------------|-----------------------|-------------------------------|-------------------|
| TOTAL - (11) EMERGENCY PREPAREDNESS AND RESPONSE DIVISION (REQUESTED) | 18,555,728 | 36,970,886 | 20,967,931 | 21,255,631 | 36,955,981 | |
| FTE | <u>45.8</u> | <u>33.9</u> | <u>42.5</u> | <u>42.5</u> | <u>35.0</u> | |
| General Fund | 0 | 878,214 | 1,757,179 | 1,754,626 | 1,756,052 | |
| FTE | 0.0 | 0.9 | 2.0 | 2.0 | 2.0 | |
| Federal Funds | 18,555,728 | 36,092,672 | 19,210,752 | 19,501,005 | 35,199,929 | |
| FTE | 45.8 | 33.0 | 40.5 | 40.5 | 33.0 | |
| PUBLIC HEALTH AND ENVIRONMENT - HEALTH AND ADMINISTRATIVE DIVISIONS | | | | | | |
| TOTAL | 396,645,985 | 376,440,109 | 385,699,007 | 378,186,800 | 396,010,718 | |
| FTE | <u>711.7</u> | <u>735.6</u> | <u>767.6</u> | <u>763.4</u> | <u>773.2</u> | |
| General Fund | 22,249,314 | 22,499,078 | 23,331,296 | 23,460,100 | 23,191,039 | |
| General Fund Exempt | 478,004 | 445,362 | 447,000 | 422,149 | 439,200 | |
| Cash Funds | 116,192,518 | 96,033,375 | 97,852,199 | 86,368,520 | 112,537,598 | |
| Cash Funds Exempt/RF | 54,896,375 | 28,047,395 | 26,294,024 | 25,985,742 | 23,253,574 | |
| Federal Funds | 202,829,774 | 229,414,899 | 237,774,488 | 241,950,289 | 236,589,307 | |
| <i>Medicaid Reappropriated Funds</i> | <i>5,028,166</i> | <i>4,705,001</i> | <i>4,997,723</i> | <i>4,925,377</i> | <i>4,233,517</i> | |
| <i>GF in Medicaid RF</i> | <i>1,351,754</i> | <i>1,449,156</i> | <i>1,520,857</i> | <i>1,532,523</i> | <i>1,482,366</i> | |
| <i>Net General Fund</i> | <i>23,601,068</i> | <i>23,948,234</i> | <i>24,852,153</i> | <i>24,992,623</i> | <i>24,673,405</i> | |

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The Department of Public Health and Environment has three principle parts: Administration, Environmental Programs, and Health Programs. Administration includes central administration, information technology, support services, and laboratory services. Environmental programs include air and water quality control, hazardous materials, waste management, and consumer protection. Health programs include disease control, inspection of health facilities, prevention programs, emergency medical services, and health promotion.

The figure setting recommendations in this document deal with Administration and Health Programs. Another analyst separately presents recommendations for the Environmental Programs.

Adjustments to Federal Funds Appropriations

This document proposes a number of adjustments to appropriations of federal funds. These appropriations are designed to reflect amounts that are expected to be received in FY 2011-12. When the Department prepares its budget submissions, it reports the amount of federal funds that it received in the two most recently completed fiscal years. With a few exceptions, the Department does not adjust its federal funds *requests*; in most cases it simply sets this year's federal funds request equal to last year's appropriation. This approach is understandable given the uncertain status of a federal funds appropriation by the General Assembly and the difficulties that the Department faces when trying to forecast federal grant revenue. However, repeatedly setting this year's request equal to last year's request can create situations in which the federal funds listed in the Long Bill are badly out of date. Throughout this document, Staff recommends adjustments to these federal funds amounts that are designed to bring these numbers into closer alignment with the federal funding that the Department has been receiving in recent years. Specifically, these adjustments will set federal funds appropriations for FY 2011-12 equal to actual federal funds received in FY 2009-10, the latest year for which actual data is available. Actions that the Committee may take to balance the budget later this session may alter these adjustments. Staff asks permission to change the adjustments so the resulting FY 2011-12 federal funds appropriations equal actual FY 2009-10 values.

A Note on Department requests shown in this document. This document presents the Department requests that were received on January 2, 2011 as modified by some of the amendments received on February 15, 2011. The requests do not include the added 2 percent PERA reduction and the additional 1 percent General Fund reduction received February 15.

(1) ADMINISTRATION AND SUPPORT

Subdivisions:

(A) Administration

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- (B) Special Health Programs
 - (1) Health Disparities Program
- (C) Local Public Health Planning and Support
- (D) Special Environmental Programs

(A) Administration

This office oversees, coordinates, and supports the Department's eleven divisions. Its functions include communications, building operations, telecommunications, internal audit, management analysis, accounting, budgeting, contracts, payroll, purchasing, human resources, and oversight of tobacco settlement-funded programs.

Administration appropriations fall into two categories:

- Appropriations that pay the actual cost of running the office, such as salaries for administration personnel, and
- Central appropriations or "Pots" , such as Health, Life and Dental, that the Department allocates among its divisions.

The Administration Division pays most of its actual costs with indirect cost assessments that are collected from the Department's various divisions and transferred as reappropriated funds to the Administration Division. The central appropriations are paid directly by the divisions that use the pots. As a consequence, the "potted" appropriations are a mixture of General Fund, cash funds, reappropriated funds, and federal funds, reflecting the funding sources of the divisions to which the central appropriations will be distributed.

Personal Services. This line item finances personal services expenditures in the Administration subdivision. Like all subsequent personal services appropriations in this document, this appropriation funds employees' salaries and wages, as well as the associated state contribution to the Public Employees Retirement Association (PERA) and the state share of federal Medicare taxes. This line item also provides funding for contract professional and temporary services.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Accounting | 11.0 | 10.2 | 10.2 | 10.2 |
| Administrative Support Staff | 6.2 | 7.0 | 7.0 | 7.0 |
| Auditor | 2.0 | 2.0 | 2.0 | 2.0 |
| Budget Analyst | 2.7 | 4.0 | 4.0 | 4.0 |

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|--|--------------------|---------------------|---------------------|------------------------|
| Controller | 2.9 | 3.0 | 3.0 | 3.0 |
| Environmental Protection Specialist | 0.0 | 0.0 | 0.0 | 0.0 |
| Executive Director | 0.9 | 1.0 | 1.0 | 1.0 |
| Mail Room/Print Shop/Maintenance Staff | 6.0 | 6.0 | 6.0 | 6.0 |
| Management | 7.1 | 7.0 | 7.0 | 7.0 |
| Professional Engineer | 0.1 | 0.0 | 0.0 | 0.0 |
| Staff / General Professional | 21.9 | 20.9 | 20.9 | 20.9 |
| Total | 60.8 | 61.1 | 61.1 | 61.1 |

The Committee-approved Option 8 computation and the related recommendation are as follows:

| Personal Services | Total | GF | CF | RF | FF | FTE |
|--|------------------|----------|----------|------------------|---------------|-------------|
| FY 2010-11 Appropriation | 4,742,969 | 0 | 0 | 4,714,279 | 28,690 | 61.1 |
| State PERA contribution back to 10.15% | 103,488 | 0 | 0 | 103,488 | 0 | 0.0 |
| 1.5% base reduction | (72,697) | 0 | 0 | (72,267) | (430) | 0.0 |
| State PERA contribution down to 7.65% | (104,032) | 0 | 0 | (103,853) | (179) | 0.0 |
| Federal Funds Adjustment | (5,274) | 0 | 0 | 0 | (5,274) | 0.0 |
| FY 2011-12 Recommendation | 4,664,454 | 0 | 0 | 4,641,647 | 22,807 | 61.1 |
| FY 2011-12 Request | 4,742,425 | 0 | 0 | 4,713,914 | 28,511 | 61.1 |
| Recommendation - Request | (77,971) | 0 | 0 | (72,267) | (5,704) | 0.0 |

Retirements. The Retirements appropriation covers the anticipated payouts for retiring and terminating employees who have unused accrued annual and sick leave. The Department is required under state personnel rules to pay retiring and terminating employees for unused accrued leave. Compensation costs for sick and annual leave payouts are included in the Department's indirect cost rates and are funded from indirect cost recoveries. The Department funds annual and sick leave payouts to retiring and terminating employees with indirect cost recoveries because federal regulations do not allow the Department to charge these payouts directly to federal grants. (Title 2, Part 225, Appendix 2 of the Code of Federal Regulations states: "Payments for unused leave when an employee retires or terminates employment are allowable in the year of payment provided they are allocated as a general administrative expense to all activities of the governmental unit or component." Federal auditors check for compliance with this rule.) Because cash funded programs also pay indirect cost recoveries, these employees are paid from the Retirements line item as well, to the extent that the Department has the spending authority to do so. When the Department exhausts

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the spending authority, the cash and General Funded employee payouts must be absorbed within their Division's personal services lines. There is no General Fund contribution to the line, though termination benefits to employees who were partially salaried from the General Fund are partially paid from this line.

The Retirements line item represents the only way that the Department can get the Federal Government to share in the cost of annual and sick leave payouts. If this line is under funded, the Department will have to pay for a portion of its retirement and sick-leave payouts through vacancy savings. Since vacancy savings cannot be generated with federally funded programs, this means that the cost of retirement and sick-leave payouts for state employees who worked on federally-supported programs and then left their state jobs would be born by vacancy savings generated by state-supported programs.

Staff recommends that the Committee approve the Department's request for \$481,145 of reappropriated funds for this line item, a continuation level of funding. The funding source is indirect cost recoveries.

Health, Life, and Dental. In accord with Committee-approved common policy, Staff recommends an appropriation that equals the Department's request, with the following adjustments:

| Health, Life, and Dental | Total | GF | CF | RF | FF |
|--|------------------|----------------|------------------|----------------|------------------|
| FY 2011-12 Department Request ignoring: <ul style="list-style-type: none"> • DI #3, Prenatal Plus Program Transfer to HCPF • Pro-rata Benefits bill (a common policy) | 7,088,063 | 588,613 | 2,463,310 | 810,775 | 3,225,365 |
| Subtract: DI #3, Prenatal Plus Administration Transfer (Recommended later in this document) | (8,919) | 0 | 0 | (8,919) | 0 |
| FY 2011-12 Recommendation | 7,079,144 | 588,613 | 2,463,310 | 801,856 | 3,225,365 |

If the Pro-rata Benefits bill that the Governor has proposed becomes law in the form proposed by the Governor, its appropriation clause will make the following adjustments to the Department's Health, Life, and Dental appropriation:

| Pro-rata Benefits Adjustment | Total | GF | CF | RF | FF |
|-------------------------------------|--------------|-----------|-----------|-----------|-----------|
| Pro-rata benefits | (57,099) | (392) | (21,191) | (9,803) | (25,713) |

Short-term Disability. The Staff recommendation, which is calculated in accord with Committee common policy, is as follows:

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| Short-term Disability | Total | GF | CF | RF | FF |
|---|----------------|---------------|---------------|---------------|---------------|
| Short-term Disability appropriation ignoring DI #3, Prenatal Plus Program Transfer to HCPF | 128,667 | 11,399 | 45,122 | 14,563 | 57,583 |
| Subtract: DI #3, Prenatal Plus Administration Transfer (Recommended later in this document) | (188) | 0 | 0 | (188) | 0 |
| FY 2011-12 Recommendation | 128,479 | 11,399 | 45,122 | 14,375 | 57,583 |

S.B. 04-257 Amortization Equalization Disbursement (AED). The Staff recommendation, which is calculated in accord with Committee common policy, is as follows:

| Amortization Equalization Disbursement | Total | GF | CF | RF | FF |
|---|------------------|----------------|----------------|----------------|----------------|
| S.B. 04-257 Amortization Equalization Disbursement appropriation ignoring DI #3, Prenatal Plus Program Transfer to HCPF | 2,033,252 | 178,175 | 713,792 | 230,367 | 910,918 |
| Subtract: DI #3, Prenatal Plus Administration Transfer (Recommended later in this document) | (2,908) | 0 | 0 | (2,908) | 0 |
| FY 2011-12 Recommendation | 2,030,344 | 178,175 | 713,792 | 227,459 | 910,918 |

S.B. 06-235 Supplemental Amortization Equalization Disbursement (SAED). The Staff recommendation, which is calculated in accord with Committee common policy, is as follows:

| Supplemental Amortization Equalization Disbursement | Total | GF | CF | RF | FF |
|--|------------------|----------------|----------------|----------------|----------------|
| S.B. 06-235 Supplemental Amortization Equalization Disbursement appropriation ignoring DI #3, Prenatal Plus Program Transfer to HCPF | 1,632,906 | 142,218 | 573,583 | 185,117 | 731,988 |
| Subtract: DI #3, Prenatal Plus Administration Transfer (Recommended later in this document) | (2,120) | 0 | 0 | (2,120) | 0 |
| FY 2011-12 Recommendation | 1,630,786 | 142,218 | 573,583 | 182,997 | 731,988 |

Salary Survey and Senior Executive Service. The Department has not requested and, in accord with Committee common policy, **Staff does not recommend an appropriation for this line item.**

Performance-based Pay Awards. The Department has not requested and, in accord with Committee common policy, **Staff does not recommend an appropriation for this line item.**

Shift Differential. The Department requests an appropriation of \$14,883 Federal Funds. The staff recommendation is pending Committee approval of a common policy.

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Workers' Compensation. The Department requests an appropriation of \$360,196 reappropriated funds for this line item. **A staff recommendation for this line item is pending Committee approval of a common policy for Workers' Compensation.**

Workers's Compensation is the first of several pending common policy items. **Staff requests permission to apply Committee common policy for pending items that are approved later and include the resulting appropriations in the Long Bill.**

Operating Expenses. The following table shows the computation of the operating expense request.

| Operating Expenses | Total | GF | CF | RF | FF |
|--|------------------|-----------|-----------|------------------|-----------|
| FY 2010-11 Appropriation | 1,297,907 | 0 | 0 | 1,297,907 | 0 |
| End of one-time medical marijuana interim supplemental approved in June 2010 | (35,200) | 0 | 0 | (35,200) | 0 |
| FY 2011-12 Recommendation | 1,262,707 | 0 | 0 | 1,262,707 | 0 |
| FY 2011-12 Request | 1,267,262 | 0 | 0 | 1,267,262 | 0 |
| Recommendation - Request | (4,555) | 0 | 0 | (4,555) | 0 |

The difference between the request and the recommendation is due to the statewide decision item relating to Printing of Statewide Warrants and Mainframe Documents, which the Committee did not approve.

Legal Services. This line item funds legal expenses incurred throughout the Department. The following table shows the Staff computation of the recommended number of hours of legal services that the Department will purchase from the Department of Law. The dollar value of the corresponding appropriation *based the FY 2010-11 legal services rate* (which will differ from the rate that will be used in the FY 2011-12 Long Bill) is shown in the right hand column. Staff has included this column to give an approximate idea of the dollar amounts that are involved.

| Legal Services | Hours | \$ at the FY 10-11 legal rate of \$73.37 |
|---|--------------|---|
| FY 2010-11 appropriation of legal hours | 30,099 | 2,208,366 |
| 2 nd year impact of S.B. 10-109, Medical Marijuana Dr. Patient Relations | (907) | (66,561) |
| 2 nd year impact of H.B. 10-1018, Medical Marijuana Regulation | (150) | (11,006) |
| Reverse the supplemental appropriation of FY 2010-11 legal service hours for the Air Pollution Control Division | (1,800) | (132,066) |

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| Legal Services | Hours | \$ at the FY 10-11 legal rate of \$73.37 |
|---|--------|---|
| Pending Decision Item: 1,800 hours of legal services for the Air Pollution Control Division, which will require the Department of Law to add 1.0 FTE. This request will be considered during figure setting for the Environmental Divisions. | 1,800 | 132,066 |
| Pending: Staff recommendation for legal service hours | 29,042 | 2,130,800 |

The legal services appropriation for FY 2011-12 is pending (1) the Committee's Decision on the request for 1,800 legal services hours for the Air Pollution Control Division and (2) approval of the legal rate, which will be established during figure setting for the Department of Law. Once a legal rate is approved, staff will multiply the approved legal hours by the approved legal rate to compute the appropriation.

Fund sources for legal expenditures: The Department pays the legal service expenditures that are appropriated in the Long Bill through indirect cost recoveries. Legal services in special bills are funded either through indirect cost recoveries or by a direct appropriation from a cash fund. If the legal expenses in a special bill continue into the bill's second year, they are funded via indirect cost recoveries, which requires a fund split adjustment if the expenses were initially cash funded. This is what happened during the 2009 session when the Department received a \$10,000 cash funds, 133 hour legal services appropriation for implementation of H.B. 09-1330 (CDPHE Fees for Feeding Operations). The 133-hour legal expense in the bill's second year was financed with indirect costs, i.e. with reappropriated funds.

Administrative Law Judge Services. The Department requests an appropriation of \$44,763 reappropriated funds for this line item. **Staff recommendation is pending Committee approval of a common policy for Administrative Law Judge Services.**

Payment to Risk Management and Property Funds. The Department requests total funding for this line item of \$56,136, comprised of \$9,069 cash funds and \$47,067 reappropriated funds. **Staff recommendation is pending Committee approval of a common policy for Risk Management.**

Vehicle Lease Payments. The following table summarizes the Department's vehicle lease request:

| Vehicle Lease | Total | GF | CF | RF | FF |
|---------------|---------|-------|---------|--------|--------|
| Request | 347,268 | 1,081 | 260,170 | 61,450 | 25,647 |

The Department has 115 vehicles, 43 of which are assigned to the health and administration divisions with the remainder assigned to the environmental divisions. The Department requests that 11 of these vehicles be replaced during FY 2011-12. One of these replacement vehicles is assigned

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to the state laboratory; the remaining vehicles are assigned to the environmental divisions. The environmental-divisions analyst will make recommendations for the environmental division vehicles; this staff member will make recommendations for the state lab vehicle.

Staff recommends that the state lab vehicle be replaced. The vehicle is a 2003 Expedition, a large 4-wheel-drive SUV. It will have been driven an estimated 160,000 miles at the time that it would be replaced in the spring of 2012. Laboratory staff drive it to court and to other legal proceedings where they testify on the results of drug and alcohol tests, testimony that provides important support for law enforcement efforts. The lease payments for the vehicle will be from cash funds from toxicology fees collected by the lab. A 4-wheel-drive vehicle is required because laboratory staff must appear in court in all seasons, including courts in mountain counties, but rather than an Expedition staff recommends an Escape Hybrid, which is a smaller more fuel efficient vehicle that is available to the state fleet.

Staff recommendation of an appropriation is pending Committee approval of a common policy for vehicle lease payments.

Leased Space. The Department's "main campus" is located near the intersection of Colorado Blvd. and Cherry Creek Drive in Denver. Like most commercial leases, the lease for the main campus contains provisions that allow for the partial or complete pass through of various operating expenses paid by the building owner. These expenses include such items as electricity, gas, property taxes, security, trash removal, and landscaping. The following table shows the leased space recommendation.

| Leased Space | Total | GF | CF | RF | FF |
|--|------------------|-----------|----------------|------------------|---------------|
| FY 2010-11 Appropriation | 6,039,316 | 0 | 233,106 | 5,767,822 | 38,388 |
| End of one-time interim medical marijuana supplemental | (129,734) | 0 | 0 | (129,734) | 0 |
| Federal Funds Adjustment | (26,144) | 0 | 0 | 0 | (26,144) |
| FY 2011-12 Recommendation | 5,883,438 | 0 | 233,106 | 5,638,088 | 12,244 |
| FY 2011-12 Request | 5,909,582 | 0 | 233,106 | 5,638,088 | 38,388 |
| Recommendation - Request | (26,144) | 0 | 0 | 0 | (26,144) |

Capitol Complex Leased Space. The Department requests an appropriation of \$32,954 reappropriated funds for the 3,996 square feet of space that it occupies at the State Services Building in Grand Junction. Most of the Department's divisions have one or more employees who are based at this facility. The funding source is indirect cost recoveries. **Staff recommends a continuation level of leased space for this line item.** The corresponding appropriation awaits Committee approval of a common policy rate for capitol complex leased space. **Staff requests permission to**

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use the common policy lease rate to determine the corresponding dollar appropriation and include it in the Long Bill.

Communication Services Payments. The Department requests total funding for this line item of \$6,506 reappropriated funds, a continuation appropriation. **Staff recommendation is pending Committee approval of a common policy for Communication Services Payments.** The funding source is indirect cost recoveries.

Utilities. This line item primarily funds utility expenses at the lab but it also funds utilities at remote monitoring stations. Most of the utility costs of the main campus are included in the lease expense line item. **The following table summarizes the Department's request and the staff recommendation.**

| Utilities | Total | GF | CF | RF | FF |
|----------------------------------|----------------|-----------|----------------|----------------|---------------|
| FY 2010-11 Appropriation | 596,671 | 0 | 161,324 | 390,727 | 44,620 |
| Federal Funds Adjustment | (29,157) | 0 | 0 | 0 | (29,157) |
| FY 2011-12 Recommendation | 567,514 | 0 | 161,324 | 390,727 | 15,463 |
| FY 2011-12 Request | 596,671 | 0 | 161,324 | 390,727 | 44,620 |
| Recommendation - Request | (29,157) | 0 | 0 | 0 | (29,157) |

Building Maintenance and Repair. This appropriation funds maintenance and repair at the Department's main campus and at the state-owned laboratory building at Lowry. The line item was created as a supplemental to the 2001 Long Bill, when it was funded with corresponding reductions in the Operating Expenses and Leased Space line items. **The Department requests and staff recommends a continuation appropriation of \$271,858 reappropriated funds.** The funding source is indirect cost recoveries.

Reimbursement for Members of the State Board of Health. Pursuant to Sections 25-1-104 and 24-34-102(13), C.R.S., members of the State Board of Health receive a payment of \$50 per day as compensation when they attend meetings. Travel and per diem for board members are paid separately from the Division's operating expenses line. **The Department requests and Staff recommends a continuation level of funding of \$4,500 General Fund for this line item.**

Indirect Cost Assessment. Indirect cost assessments are the means by which the Department charges its cash- and federally-funded programs for the services they are provided by its administration and IT divisions and for the Department's share of the statewide indirect cost assessment. The indirect assessments are based upon the size and classification of the cash or federally funded expenditures that occur in each division. The indirect assessment equals the

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expenditure multiplied by the assessment rate with the assessment rates depending upon the category of expenditure. Proposed federal rates must be reviewed and approved by the "cognizant" federal agency, in this case the U.S. Department of Health and Human Services. Once the Federal rates are approved, the indirect revenue generated by those rates, as applied to projected federal spending, can be computed. The difference between this estimated amount, and the total indirect revenue need, is used to calculate the indirect rates to be applied to cash fund expenditures.

The indirect cost line item in the Administration division includes assessments paid by the special health and special environmental programs that are housed in the division and assessments that are based on expenditures of central appropriations on behalf of the Department's various divisions. It is easier for the Department to collect the assessment in the administration division than it is to collect it in the divisions.

Like the other indirect cost assessments in this document, this assessment is pending because it cannot be computed until all of the other pending appropriations within the Administration and Support Division are known. The Department's request is a continuation of last year's appropriation; it is a placeholder that gives a general idea of the likely assessment. **Staff requests permission, once the Committee has approved appropriations for all pending items, to work with the Department to compute the indirect assessments and incorporate them into the Long Bill.**

(B) Special Health Programs

(1) Health Disparities Program

Amendment 35 background. This is the first of several parts of this document that deal with Amendment 35, Tobacco Taxes for Health Related Purposes, which voters approved in November 2004. The amendment imposed a 64¢ tax on each pack of cigarettes. In comparison, the tobacco Master Settlement Agreement has been estimated to add about 43¢ to the cost of a pack of cigarettes. Amendment 35 revenues are exempt from TABOR because the revenues resulted from a voter-approved tax increase.

The following table shows the December 2010 Legislative Council Staff forecast of Amendment 35 revenues. The highlighted FY 2011-12 forecast serves as the starting point for the FY 2011-12 appropriations of Amendment 35 revenues in this document.

| Amendment 35 Tax Revenue | | | | |
|---------------------------------|------------|------------------------|-------------------|-------------------|
| Fiscal Year | Cigarettes | Other Tobacco Products | Total Tax Revenue | Percentage Change |
| Actual: | | | | |
| 2005-06 | \$158.0 | \$11.7 | \$169.7 | |

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| Fiscal Year | Cigarettes | Other Tobacco Products | Total Tax Revenue | Percentage Change |
|--------------------|-------------------|-------------------------------|--------------------------|--------------------------|
| 2006-07 | 155.1 | 12.9 | 168.0 | -1.0% |
| 2007-08 | 150.3 | 12.6 | 162.9 | -3.0% |
| 2008-09 | 146.7 | 14.3 | 161.0 | -1.2% |
| 2009-10 | 135.7 | 14.6 | 150.3 | -6.6% |
| Forecast: | | | | |
| 2010-11 | 135.7 | 16.0 | 151.7 | 0.9% |
| 2011-12 | 130.2 | 15.9 | 146.1 | -3.7% |
| 2012-13 | 125.6 | 17.2 | 142.8 | -2.3% |

Amounts are in \$ million.

As this table shows, Amendment 35 tax revenues have generally trended downward since the tax was imposed, with an especially sharp drop occurring in FY 2009-10. The FY 2009-10 decline is due in part to the recession and due in part the 61.6¢ per pack federal excise tax that was placed on cigarettes in April 2009.

Pursuant to Section 21 of Article X of the Colorado Constitution and Section 24-22-117, C.R.S., revenues from Amendment 35's tobacco tax are allocated among Amendment 35 programs in the fixed percentages shown in the following table. This table also shows projected dollar allocations, based on the December 2010 Legislative Council Staff revenue forecast.

| Department - Amendment 35 Fund or Program / Purpose | Percent | Projected FY 11-12 Allocation |
|---|----------------|--------------------------------------|
| HCPF - Health Care Expansion Fund, to provide funding to the Children's Basic Health Plan and Medicaid | 46.0% | \$67,206,000 |
| HCPF - Primary Care Fund, to provide funding to clinics and hospitals that offer health care services to the uninsured or medically indigent | 19.0% | 27,759,000 |
| CDPHE - Tobacco Education Programs Fund, to support grants for tobacco education, prevention and cessation | 16.0% | 23,376,000 |
| CDPHE - Prevention, Early Detection and Treatment Fund, to support (1) cancer, cardiovascular and pulmonary disease grants, and (2) breast and cervical cancer screening and treatment. | 13.6% | 19,869,600 |
| CDPHE - Health Disparities Grant Program Fund, to support grants to reduce health disparities | 2.4% | 3,506,400 |
| DHS - Old Age Pension Fund | 1.5% | 2,191,500 |
| Revenue - Local governments, to compensate for lost revenue from tobacco taxes | 0.9% | 1,314,900 |
| CDPHE - Immunizations performed by local public health agencies that were formerly county nursing services | 0.3% | 438,300 |

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| Department - Amendment 35 Fund or Program / Purpose | Percent | Projected FY 11-12 Allocation |
|---|---------------|-------------------------------------|
| HCPF - Health Care Expansion Fund, to provide funding to the Children's Basic Health Plan and Medicaid | 46.0% | \$67,206,000 |
| HCPF - Pediatric Specialty Hospital Fund to provide funding to Children's Hospital in Denver for Medicaid and indigent care | 0.3% | 438,300 |
| Total | 100.0% | \$146,100,000 |

If a joint resolution declaring a fiscal emergency is passed by a *two thirds* vote of both houses of the General Assembly and signed by the Governor, the allocation rules in the above table are suspended for one year and Amendment 35 revenues can be appropriated for any health-related purpose. This is exactly what happened when S.J.R. 09-035 and S.J.R. 10-010 were enacted, declaring fiscal emergencies for FY 2009-10 and FY 2010-11. These emergencies allowed the General Assembly to pass H.B. 10-1381 which redirected a substantial part of the Amendment 35 revenue that otherwise would have flowed to programs in CDPHE, to HCPF where the moneys paid for Medical Services Premiums. The Governor is requesting similar transfers for FY 2011-12.

The Governor's Requested Amendment 35 Transfers and Other Adjustments: The following table shows the Amendment 35 amounts that were redirected from CDPHE to HCPF for FY 2009-10 and FY 2010-11 and the Governor's requested transfers for FY 2011-12. The bottom two rows of these tables give some idea of the impact on the affected CDPHE programs.

| Cash Fund | FY 09-10 Transfer | FY 10-11 Transfer | FY 11-12 Requested Transfer |
|--|----------------------|----------------------|-----------------------------------|
| Health Disparities Grant Program Fund (19F) - RF | \$2,000,000 | \$4,490,435 | \$3,286,351 |
| Tobacco Education Program Fund (18M) - CF | 15,000,000 | 15,521,625 | 17,758,594 |
| Prevention Early Detection and Treatment Fund (18N) - CF | 19,000,000 | 5,679,358 | 11,955,055 |
| Total transfer | \$36,000,000 | \$25,691,418 | \$33,000,000 |
| Amount of Amendment 35 revenue allocated to these programs (a forecast for FY 2011-12) | 48,103,871 | 48,525,444 | 46,752,000 |
| Transfer as percent of the allocation | 74.8% | 52.9% | 70.6% |

In addition to the requested transfers, the Department requests that 13 of its appropriations of Amendment 35 revenues be reduced by a total \$33,000,000 in order to free the funds that would be transferred to HCPF.

Introduced and Proposed Legislation Affecting Amendment 35 Programs in FY 2011-12

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Senate Joint Resolution 11-009. This JBC bill, which has already been introduced, would declare a state fiscal emergency for FY 2011-12, thus allowing Amendment 35 tobacco-tax revenues to be again appropriated for any health-related purpose during that year. The bill, which like its predecessors requires a two thirds vote of both houses, is awaiting action on the Senate floor.

The Amendment 35 transfer bill. Based on the assumption that S.J.R. 11-009 will become law, the HCPF analyst will recommend that an "Amendment 35 transfer" bill be introduced as part of the FY 2011-12 Long Bill package. The bill would be similar to H.B. 10-1381, a JBC bill enacted last year. The HCPF analyst spoke to the Committee about this bill during briefing for HCPF. The bill would change the rules governing the CCPD, STEPP, and Health Disparities grant funds so that moneys in these funds can be appropriated for Medical Services Premiums in FY 2011-12. The bill's appropriation clause would then adjust appropriations in the FY 2011-12 Long Bill, decreasing Amendment 35 appropriations to CDPHE by \$33 million and appropriating the moneys to HCPF for Medical Services Premiums. The General Fund appropriation for Medical Services Premiums would then be reduced by an offsetting amount.

Two sets of Amendment 35 Recommendations: Because S.J.R. 11-009 is not yet law and the Amendment 35 transfer bill has not even been approved by the Committee, Staff must make two recommendations for each Amendment 35 program. The first recommendation, called the "Long Bill Recommendation" will reflect current law. The Committee's decision regarding this recommendation will be written into the FY 2011-11 Long Bill. If S.J.R. 11-009 or the Amendment 35 transfer bill fail to become law, this appropriation will determine spending during FY 2011-12. The second recommendation, called the "Transfer Bill Recommendation" will take into account the Governor's transfer request. The decisions that the Committee makes regarding this second recommendation will be included in the appropriation clause of the Amendment 35 transfer bill and will take effect if it become law. The numbers pages show the recommendation under current law, however the Decision Item and Base Reduction Item notations in the numbers pages do show where Amendment 35 reductions would occur.

With this background, appropriations to the Health Disparities Program, the first Amendment 35 program, can be considered.

Health disparities refer to differences in the quality of health care and health outcomes across racial and ethnic groups. The Office of Health Disparities began operating in 2004 when the program received a private grant and the Department's Executive Director gave the office administrative approval. The Office is dedicated to eliminating racial and ethnic health disparities in Colorado, by fostering systems change and capacity building. The Health Disparities Grant Program, which is housed within the Office of Health Disparities, was created by H.B. 05-1262, which implemented Amendment 35. (See Section 25-4-2201, C.R.S.) The grant program, which made its first grants in

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FY 2005-06, provides grants for the prevention, early detection and treatment of cancer, cardiovascular disease and pulmonary disease among African Americans, Latinos, Native Americans and other groups. Senate Bill 07-242 converted the Office of Health Disparities from an administratively established program into a statutory program. When the private grants that initially supported the Office ended at the conclusion of FY 2007-08, the General Assembly began funding the Office with a combination of General Fund and Amendment 35 moneys.

Much of the funding for the Office and all the funding for the Disparities Grant Program come from the Health Disparities Grant Program Fund, which receives a 2.4 percent share of Amendment 35's tobacco tax revenues. Moneys in the Health Disparities Grant Program Fund (the "Disparities" fund) that are not expended in a given year remain in the fund and are available for appropriation the following year. Prior to the current economic downturn, substantial unspent balances carried forward each year because the program awarded multiple year grants and wanted to ensure that funding was available to meet these obligations.

The Amendment 35 moneys that are appropriated to the program are first appropriated within the Prevention Services Division to satisfy an Amendment 35 requirement that will be discussed later and are then reappropriated to the Health Disparities program.

Personal Services.

Long Bill Recommendation: (Shown in the numbers pages.) The following table shows staffing levels for the Health Disparities Grant Program and the associated recommendation for the Long Bill.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Staff / General Professional | 6.0 | 6.3 | 6.3 | 6.3 |
| Total | 6.0 | 6.3 | 6.3 | 6.3 |

The corresponding Option 8 calculations for the Long Bill are as follows:

| Personal Services | Total | GF | CF | RF | FF | FTE |
|---|---------|--------|----|---------|----|-----|
| FY 2010-11 Appropriation | 403,863 | 49,676 | 0 | 354,187 | 0 | 6.3 |
| Reverse 1% GF Personal Services Reduction | 502 | 502 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 8,618 | 1,131 | 0 | 7,487 | 0 | 0.0 |
| 1.5% base reduction | (6,195) | (770) | 0 | (5,425) | 0 | 0.0 |

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| Personal Services | Total | GF | CF | RF | FF | FTE |
|--|--------------|-----------|-----------|-----------|-----------|------------|
| State PERA contribution down to 7.65% | (9,068) | (1,216) | 0 | (7,852) | 0 | 0.0 |
| FY 2011-12 Long Bill Recommendation | 397,720 | 49,323 | 0 | 348,397 | 0 | 6.3 |

There is no corresponding request; all of the Department's requests for line items that would be affected by transfer bill assume that the transfer bill becomes law.

Transfer Bill Recommendation: The Department requests that the Health Disparities Personal Services appropriation be reduced by \$135,219 cash funds and 2.0 FTE. This request, like all of the other requests that would be in the transfer bill, is a one year request.

When compared to the FY 2010-11 personal services appropriation, \$135,219 and 2.0 FTE represents a 32 percent decline in FTE and a 39 percent decline in the dollar appropriation. Since the requested transfer will take approximately 80 percent of the resources that would otherwise be available to the Health Disparities Program, is this personal services reduction appropriate? JBC staff believes that it is.

Though FY 2011-12 would be the third year that Amendment 35 moneys have been transferred to HCPF, the transfers are clearly temporary. As soon as one third of the members of either house of the General Assembly conclude that the state's fiscal emergency has passed, the fiscal-emergency declarations that allow these transfers to occur will end. When the emergency declarations end, the Health Disparities Program will come roaring back and will start receiving 2.4 percent of Amendment 35 revenues or approximately \$3.5 million annually. Grants, now at a very low level, will rise quickly. It would be mistake to lay off too many experienced staff members at this time. In the hopefully not too distant future, they will be needed to develop and issue grant requests, provide grant-writing assistance, provide expert support to decision makers, coordinate the application review process, communicate with applicants and grantees, monitor grantee performance, approve grantee reimbursement statements, approve grantee budget revisions, conduct grantee site visits, and evaluate grantee performance. One should also remember that the Office does more than handle grants so the lack of grants will not translate into a lack of useful activities for the employees who remain. Of the Office's 6.3 FTE, 3.3 support the Grant Program and the other 3.0 support the Office's non-grant activities. JBC staff has spoken with stakeholders in the Amendment 35 community and has learned that they value the contribution of the Amendment 35 support staff and are aware that it took several rounds of decision items spread over several years to reach the current staffing levels. One worried aloud that it might be difficult to get these FTE back following a reduction.

The Department requests and Staff recommends that the transfer bill reduce the Long Bill appropriation for personal services by \$135,219 reappropriated funds and 2.0 FTE.

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Operating Expenses. The FY 2010-11 Operating Expenses appropriation to the Health Disparities program included a \$30,000 reduction relative to FY 2009-10 that was a consequence of the transfer of Amendment 35 revenue to HCPF. This reduction should be restored if the FY 2011-12 fiscal emergency bill or the FY 2011-12 transfer bill fails to become law. This leads to the Long Bill recommendation in the middle of the following table. For the Transfer Bill, the Department requests that the RF appropriation be reduced by \$40,175, which leads to the recommendation at the bottom of the table.

| Operating Expenses | Total | GF | CF | RF | FF |
|--|---------------|--------------|-----------|---------------|-----------|
| FY 2010-11 Appropriation | 35,838 | 6,931 | 0 | 28,907 | 0 |
| Federal Funds Adjustment | 30,000 | 0 | 0 | 30,000 | 0 |
| FY 2011-12 Recommendation | 65,838 | 6,931 | 0 | 58,907 | 0 |
| Requested Reduction for the Transfer Bill | (40,175) | 0 | 0 | (40,175) | 0 |
| FY 2011-12 Transfer Bill Recommendation | 25,663 | 6,931 | 0 | 18,732 | 0 |

Health Disparities Grants. The Health Disparities Grant program established in Section 25-4-2201, C.R.S., provides grants for the prevention, early detection and treatment of cancer, cardiovascular disease and pulmonary disease among African Americans, Latinos, Native Americans and other groups. The amount available for grants is the residual after removing the appropriations of Amendment 35 revenues for health-disparities personal services and operating expenses, as computed in the following table:

| FY 2011-12 Appropriations for Health Disparities Grants | RF |
|---|--------------------|
| Projected balance in the Health Disparities Grant Program Fund (19F) at the start of FY 2011-12 (Includes estimates of FY 2010-11 revenue still to be received and lapsed spending authority from FY 2010-11, such as reversions from grantees.) | \$535,427 |
| + Forecast of Amendment 35 revenue that the fund will receive during FY 2011-12 (2.4% of the December 2010 Legislative Council Staff Revenue forecast) | 3,506,400 |
| + Interest earned during FY 2011-12 by the fund (zero thru FY 11-12 due to S.B. 09-270) | 0 |
| - RF portion of the Long Bill Personal Services appropriation | (348,397) |
| - RF portion of the Long Bill Operating Expenses appropriation | (58,907) |
| - Estimated indirect cost assessment | (82,619) |
| - Estimated allocation of RF POTS to the Personal Services line item | (20,000) |
| = Recommended Long Bill appropriation for Health Disparities Grants | \$3,531,904 |

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Staff recommends that the transfer bill reduce the Health Disparities Grants appropriation in the Long Bill by \$3,008,489, which will make the grants appropriation equal to \$523,415.

The following table summarizes the effect of the Health Disparities reductions that would be contained in the transfer bill.

| | Amendment 35 funding before transfer bill | Recommended reduction in transfer bill | Amendment 35 funding after transfer bill | Percentage Reduction |
|--------------------|---|--|--|-------------------------|
| Personal Services | 348,397 | (135,219) | 213,178 | -38.8% |
| FTE | 6.3 | (2.0) | 4.3 | -31.7% |
| Operating Expenses | 65,838 | (40,175) | 25,663 | -61.0% |
| Grants | 3,531,904 | (3,008,489) | 523,415 | -85.2% |
| Total | 3,946,145 | (3,183,885) | 762,260 | -80.7% |

(C) Local Public Health Planning and Support

This unit provides planning and assessment assistance as well as technical and financial support for health and environmental services that are delivered by local health agencies around the state. The unit works to ensure that local health agencies provide preventive health services and public health surveillance functions for their communities. The unit is supported by the General Fund, cash funds from tobacco-settlement revenues, and federal funds.

Prior to the passage of S.B. 08-194, Public Health Reorganization, every county in Colorado was served either by a health department or by a public health nursing service. Senate Bill 08-194 eliminated nursing services, requiring that they reorganize as county health agencies or that they join with one or more other counties to form district health agencies.

Senate Bill 08-194 also assigned new duties to the Department, requiring it, in conjunction with the State Board of Health, to develop and every five years revise a comprehensive, statewide public health improvement plan, provide technical assistance to local public health agencies as they develop local public health improvement plans, and identify core public health services that each local public health agency must provide.

The program provides technical assistance, consultation, training and monitoring services for local public health agencies; it typically provides more support for the smaller agencies, which often lack the expertise and resources of the larger agencies.

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The General Fund appropriation for this line item fulfills part of the maintenance of effort and match requirement for the state's Maternal and Child Health block grant, which provides the state with approximately \$8 million of annual federal funding.

Assessment and Planning Program. The following tables detail staffing and the Option 8 computation for the Assessment and Planning Program.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|----------------------------|--------------------|---------------------|---------------------|------------------------|
| Staff/General Professional | 3.1 | 4.0 | 4.0 | 4.0 |
| Nurse Consultant | 3.0 | 4.4 | 4.4 | 4.4 |
| Total | 6.1 | 8.4 | 8.4 | 8.4 |

| Assessment and Planning Program | Total | GF | CF | RF | FF | FTE |
|--|----------------|----------------|----------------|----------|----------------|------------|
| FY 2010-11 Appropriation | 661,389 | 306,536 | 137,851 | 0 | 217,002 | 8.4 |
| Reverse 1% FY 2010-11 GF Personal Services Reduction | 2,954 | 2,954 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 11,848 | 5,074 | 1,545 | 0 | 5,229 | 0.0 |
| 1.5% base reduction | (7,682) | (4,507) | (93) | 0 | (3,082) | 0.0 |
| State PERA contribution down to 7.65% | (8,241) | (4,457) | 0 | 0 | (3,784) | 0.0 |
| Federal Funds Adjustment | 4,017 | 0 | 0 | 0 | 4,017 | 0.0 |
| FY 2011-12 Recommendation | 664,285 | 305,600 | 139,303 | 0 | 219,382 | 8.4 |
| FY 2011-12 Request | 661,941 | 304,098 | 139,396 | 0 | 218,447 | 8.4 |
| Recommendation - Request | 2,344 | 1,502 | (93) | 0 | 935 | 0.0 |

Recommended Line Item Name Change: This line item combines two line items that appeared in the FY 2009-10 Long Bill: the "Assessment and Planning Program" item and the "Local Public Health Nursing Consultation and Training" item. The current name of the combined line item does not refer to the nursing consultation and training component. To make the Long Bill better reflect the Department's duties, **Staff recommends that this line item be retitled "Assessment, Planning, and Support Program."**

Distributions to Local Public Health Agencies. Pursuant to Section 25-1-512, C.R.S., the Department allocates moneys appropriated by the General Assembly to local health agencies to help them perform their health and environmental duties. These moneys come from the General Fund and from tobacco-settlement revenues, with the settlement appropriation equal to 7 percent of the

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settlement payments received by Tier 2 tobacco programs. The formula for allocating these moneys among local health agencies is established by the State Board of Health. The General Fund component is frequently referred to as a "per capita" payment, a reference to terminology that was formerly in statute.

The following table uses the Committee-approved tobacco-settlement revenue forecast to compute the resulting distribution:

| Distributions to Local Public Health Agencies | Total | GF | CF | RF | FF |
|---|------------------|------------------|------------------|-----------|-----------|
| FY 2010-11 Appropriation | 8,249,086 | 5,962,731 | 2,286,355 | 0 | 0 |
| Adjustment due to reduced tobacco settlement revenues | (208,251) | 0 | (208,251) | 0 | 0 |
| FY 2011-12 Recommendation | 8,040,835 | 5,962,731 | 2,078,104 | 0 | 0 |
| FY 2011-12 Request | 8,249,086 | 5,962,731 | 2,286,355 | 0 | 0 |
| Recommendation - Request | (208,251) | 0 | (208,251) | 0 | 0 |

Environmental Health Services Not Provided by Local Health Agencies. The larger local health agencies conduct their own food and environmental inspections, paying for these services with a combination of inspection fees and local funds. Areas served by the smaller local health agencies have two choices: (1) they can request that these duties be performed by the Department's Consumer Protection Division, or (2) they can perform these duties themselves and receive a payment from the state that covers part of the cost. This payment comes from this line item.

The Department requests and Staff recommends a continuation appropriation of \$242,358 General Fund for this line item.

Indirect Cost Assessment. The indirect cost assessment applies to the federal funds that support the Assessment and Planning Program will be calculated after the Committee makes its final decisions on the Department's budget and is therefore shown as pending.

(D) Special Environmental Programs

This environmental subdivision is presented separately by the analyst for the Department's Environmental Divisions.

(2) CENTER FOR HEALTH AND ENVIRONMENTAL INFORMATION

Subdivisions:

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- (A) Health Statistics and Vital Records
- (B) Information Technology Services
- (C) Indirect Cost Assessment

(A) Health Statistics and Vital Records

The Health Statistics and Vital Records Section maintains birth, death, marriage, divorce, and other vital records and issues related certificates. It also administers the Medical Marijuana Registry, which issues registry cards to those who have complied with the state's medical marijuana laws, and the Voluntary Adoption Registry, which facilitates voluntary contact between Colorado-born adoptees 18 years of age and older and their birth parents. The section has over 5 million birth and death records in its system and annually records some 70,000 births and 30,000 deaths. It provides training and education on vital records rules, regulations, and statutes to individuals and local agencies. Its databases include information on birth defects, injury, pregnancy, and suicide. Data users include the federal Centers for Disease Control, health professionals, the general public, legislators, local and county health departments, epidemiologist, genealogists, and the news media. The section is supported entirely with funds from cash, reappropriated and federal sources with the bulk of the cash funding coming from the Vital Statistics Records Cash Fund, which derives most of its revenue from fees paid for birth, marriage, death and other certificates. As directed by Section 25-2-121 (2) (a), the Department adjusts its fees so that the revenue generated approximates its costs, which are controlled by the appropriation decisions of the General Assembly. The federal funds are from three primary sources: the Centers for Disease Control, the Social Security Administration and the Department of Labor.

Decision Item #1, Medical Marijuana.

The Department requests that the cash funds appropriation for the medical-marijuana registry be increased by \$710,911 cash funds and 1.0 FTE relative to the appropriation that it would otherwise expect to receive for FY 2011-12. The funding source is the Medical Marijuana Program Cash Fund. As compared to FY 2010-11 appropriations, this would result in an appropriations decrease for registry-related work.

Background: Colorado's medical marijuana program is administered by two agencies, CDPHE and the Department of Revenue. CDPHE administers the Medical Marijuana Registry, as it has since voters added medical marijuana provisions to Colorado's constitution in 2000. The Department of Revenue licenses and regulates the cultivation, manufacture IS THIS WHAT YOU WANT?, distribution, and sale of medical marijuana.

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The Medical Marijuana Registry tracks patients who have satisfied the requirements to use medical marijuana and have paid the \$90 annual registry fee. Prior to 2009, the medical marijuana registry at CDPHE operated for nearly a decade with 1.0 FTE. Prior to 2008 annual registry applications never exceeded 2000. During 2008 the number of medical marijuana registry applications began to rise, approaching 500 monthly by year's end. The rate of increase accelerated sharply in 2009; by year's end applications reached 10,000 per month and subsequently stayed near that level.

The General Assembly responded by increasing Long Bill appropriations to the registry and by enacting legislation, with associated appropriations, that changed the statutory framework governing medical marijuana. The following table lists the relevant bills and the appropriation changes. The funding source is the fee paid by registry applicants, who must reapply annually.

The follow table shows how appropriations to the Medical Marijuana Registry got to the point where they are today.

| Medical Marijuana Registry Appropriations History | | Total registry approp | Approp change in bill | FTE change in bill |
|--|--|------------------------------|------------------------------|---------------------------|
| 1 | FY 02-03 Long Bill appropriation | 87,224 | | 1.0 |
| 2 | FY 04-05 Long Bill appropriation | 48,224 | (39,000) | 0.0 |
| 3 | FY 05-06 Long Bill appropriation | 58,224 | 10,000 | 0.0 |
| 4 | FY 08-09 Long Bill appropriation | 41,950 | (16,274) | 0.0 |
| FY 09-10 | | | | |
| 5 | Long Bill. A letternote change increased the registry's appropriation and reduced other appropriations to the Center for Health and Environmental Information by offsetting amounts. CDPHE used the extra funding to hire temporary employees ("temps") to process the rising number of applications but lacked the spending authority to hire sufficient temps as applications soared to 10,000 per month. A backlog resulted. | 139,466 | 97,516 | 0.0 |
| 6 | January 2010 Supplemental. This supplemental request was submitted with the FY 10-11 "Registry Expansion" decision item (DI), and it begin implementing the plan contained in that DI. The Department used this supplemental to add 10 temps in April 2010. The supplemental also contained funding for postage and legal services. | 326,168 | 186,702 | 0.0 |
| FY 10-11 | | | | |

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| Medical Marijuana Registry Appropriations History | Total registry approp | Approp change in bill | FTE change in bill |
|---|--------------------------------------|--------------------------------------|-----------------------------------|
| 7 Long Bill - The "Registry Expansion" Decision Item (DI) was approved. This DI was designed to raise staffing to a level that would support 75,000 registrants. It was also hoped that the extra staff could eliminate the registry's backlog. This DI added 12.0 permanent FTE and provided funding for continued employment of the 10 temps hired in April 2010. The DI also provided extra funding for leased space, postage, legal services, and IT. CDPHE requested temps because it was uncertain of the number of future applicants, uncertainty that was compounded by the prospect of medical marijuana legislation. Temps can easily be released if registry volume declines. CDPHE also required new permanent employees to waive their retention rights so that they could more easily be released. | 1,475,323 | 1,149,155 | 12.0 |
| 8 S.B.10-109, Medical Marijuana Doctor Patient Relations. Added \$122,012 for the registry, \$99,879 for CDPHE legal expenses, and \$593,333 for a transfer to DORA to support the Colorado Medical Board and pay its legal expenses. | 2,290,547 | 815,224 | 2.1 |
| 9 H.B.10-1284, Medical Marijuana Regulations. This bill primarily affected the Department of Revenue. | 2,350,294 | 59,747 | 1.2 |
| 10 June 2010 Interim Supplemental. After the FY 10-11 Registry Expansion DI was approved, but before FY 10-11 began, application trends indicated that registrants would grow to 150,000, twice the forecast underlying the Registry Expansion DI. In June 2010 CDPHE requested a temporary Interim supplemental with which it added 13 more temps, bringing the total to 23, and hired Integrated Document Solutions (IDS) at DPA to enter information in the registry database. CDPHE will continue using IDS in future years. This Interim supplemental is currently eliminating the backlog. | 4,359,671 | 2,009,377 | 0.0 |
| 11 January 2011 supplemental, the "Computer System" supplemental was approved to create computer links between the registry and law enforcement and to add an IT professional at OIT. The "Registry Expansion" DI provided only \$25,000 for this purpose, an insufficient amount, so this supplemental was required. | 4,439,421 | 79,750 | 0.0 |
| FY 11-12 scheduled changes that are a consequence of FY 10-11 decision items and bills | | | |
| 12 Expiration of the June 2010 Interim supplemental. | 2,430,044 | (2,009,377) | 0.0 |
| 13 "Registry Expansion" decision item - 2 nd year impact. | 2,368,004 | (62,040) | 0.0 |
| 14 "Computer System" supplemental - 2 nd year impact. | 2,363,754 | (4,250) | 0.0 |
| 15 S.B.10-109 - 2 nd year impact. Most significant change: the transfer to DORA declines to \$121,766. | 1,789,263 | (574,491) | 0.0 |
| 16 H.B.10-1284 - 2 nd year impact | 1,777,302 | (11,961) | |

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| Medical Marijuana Registry Appropriations History | Total registry approp | Approp change in bill | FTE change in bill |
|--|-----------------------|-----------------------|--------------------|
| 17 FY 11-12 DI #1, Medical Marijuana. The expiration of the June interim supplemental leaves the department with enough staff to support 75,000 registrants. Based on recent trends the Department forecasts 111,000 registrants and requests an appropriation that will allow it to hire 1.0 additional permanent FTE and 11.6 additional temporary employees. This will bring the registry's permanent FTE count to 14.0 and put temporary employee count at 23.0. CDPHE will continue using IDS at DPA for data entry. | 2,488,213 | 710,911 | 1.0 |

Notes: This table consolidates registry appropriations that affect a number of line items. For simplicity the table excludes personal-services-related central appropriations, such as health, life and dental. It also excludes some smaller appropriations adjustments, such as adjustments for changes to the legal services rate and the PERA contribution rate.

A focus on the capacity building appropriations in the above table, which are labeled 5-6-7, reveals that an initial FY 2009-10 appropriation of \$139,466, plus appropriations of \$186,702 and \$1,149,155 gave the registry the capacity to handle 75,000 registrants at an annual cost of \$1,475,323, which is a per registrant annual cost of \$19.67. The June 2010 interim supplemental temporarily increased this capacity by another 140 percent and allowed the Department to work through its backlog. When the June interim supplemental expires, capacity will return to 75,000 registrants. The Department is now projecting 111,000 registrants, which means that it need to increase capacity by 36,000. It plans to do so at cost of \$710,911, which works out to \$19.75 per registrant.

The most significant factors to note about the appropriation are the following:

- The Department proposes to hire a program director, who will be a health professional VI, paid an annual salary of \$77,000. The director will supervise all program staff, work with the advisory board, and be responsible for all aspects of program administration. The director will also be the Department's expert on medical marijuana, will work with other agencies that have Medical Marijuana responsibilities (i.e. the Departments of Revenue and Public Safety), and will be responsible for public communication, which by itself may be a significant task.
- The Department continues to be cautious about hiring permanent FTE. Other than the permanent program directory, everyone else hired with this request will be a temp hired through a temporary hiring agency at a cost of approximately \$3,100 per worker per month. If the number of registrants falls, the Department can easily eliminate these temporary workers. JBC staff estimates that the number of registrants would need to fall below 40,000 before the Department would need to start eliminating its permanent medical-marijuana FTE. Since the Department asked these workers to waive their retention rights when hired, even then it should be possible to also lay off these individuals without excessive complication.

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Staff Recommendation: Staff recommends that the Committee approve this request.

Second Year of the "Medical Marijuana Computer System" Supplemental. The Committee approved the "Medical Marijuana Computer System" supplemental in January. This supplemental had the following components:

1. CDPHE and the Department of Revenue will transfer to the Department of Public Safety, a combined \$16,000 in FY 2010-11 and a combined \$92,000 in FY 2011-12 for development of a computer system that law enforcement personnel can use to obtain information from the medical marijuana databases maintained by CDPHE and the Department of Revenue. Since costs are shared equally, this leads to the following transfers from CDPHE:

| | CDPHE Transfers to the Department of Public Safety |
|--|---|
| FY 2010-11 | 92,000 /2 = 46,000 |
| FY 2011-12 | 16,000 /2 = 8,000 |
| Change in FY 2011-12 relative to FY 2010-11 | (38,000) |

2. CDPHE and the Department of Revenue will pay OIT a combined \$67,500 in FY 2010-11 and a combined \$135,000 in FY 2011-12 for a project manager who will coordinate the development of medical marijuana computer systems that will support the medical marijuana programs at CDPHE and the Department of Revenue. Since costs are shared equally, this leads to the following payments from CDPHE.

| | CDPHE Payments to OIT |
|--|------------------------------|
| FY 2010-11 | 67,500 /2 = 33,750 |
| FY 2011-12 | 135,000 /2 = 67,500 |
| Change in FY 2011-12 relative to FY 2010-11 | 33,750 |

During Supplementals in January, the Committee approved the FY 2010-11 transfers. **Staff recommends that the Committee approve the FY 2011-12 transfers listed in the above tables.** These transfers are the logical consequence of the Committee's supplemental decisions.

Personal Services. Of this section's FTE, 11.3 are responsible for the Medical Marijuana Registry and approximately half of the remainder are responsible for collecting, modifying and certifying birth and death records while the other half are responsible for the collection, preparation and analysis of

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health data, including behavioral health data such as the Pregnancy Risk Assessment and Monitoring System and the Behavioral Risk Factor Surveillance System. Staffing is summarized below.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Accounting | 1.9 | 2.0 | 2.0 | 2.0 |
| administrative Support | 16.0 | 19.0 | 19.0 | 19.0 |
| Budget Analyst | 0.6 | 0.6 | 0.6 | 0.6 |
| Information Systems Staff | 1.0 | 0.0 | 0.0 | 0.0 |
| Management | 0.4 | 0.4 | 0.4 | 0.4 |
| Technician | 18.6 | 21.5 | 21.5 | 21.5 |
| Staff / General Professional | 14.6 | 25.4 | 25.9 | 25.9 |
| Total | 53.1 | 68.9 | 69.4 | 69.4 |

The next table summarizes staff's calculation of the personal services recommendation.

| Personal Services | Total | GF | CF | RF | FF | FTE |
|---|------------------|----------|------------------|--------------|------------------|-------------|
| FY 2010-11 Appropriation | 5,968,038 | 0 | 4,921,572 | 3,514 | 1,042,952 | 68.9 |
| Expiration of the June 2020 Interim Medical Marijuana supplemental | (1,731,600) | 0 | (1,731,600) | 0 | 0 | 0.0 |
| 2nd year impact of S.B. 10-109, Medical Marijuana Doctor-Patient Relations | (26,081) | 0 | (26,081) | 0 | 0 | (0.5) |
| 2nd year impact of H.B. 10-1284, Medical Marijuana Regulations | 1,043 | 0 | 1,043 | 0 | 0 | 0.0 |
| 2nd year impact of Medical Marijuana Computer System | 8,000 | 0 | 8,000 | 0 | 0 | 0.0 |
| Reverse 1% GF Personal Services Reduction | 36 | 0 | 0 | 36 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 70,181 | 0 | 36,474 | 0 | 33,707 | 0.0 |
| 1.5% base reduction | (64,261) | 0 | (48,021) | (90) | (16,150) | 0.0 |
| State PERA contribution down to 7.65% | (66,927) | 0 | (38,856) | (57) | (28,014) | 0.0 |
| DI-1 Medical Marijuana, as amended by BA-1a | 689,620 | 0 | 689,620 | 0 | 0 | 1.0 |
| DI-3 Prenatal Plus Administration Transfer to HCPF (recommended later in this document) | 2,450 | 0 | 0 | 2,450 | 0 | 0.0 |
| Federal Funds Adjustment | 94,112 | 0 | 0 | 0 | 94,112 | 0.0 |
| FY 2011-12 Recommendation | 4,944,611 | 0 | 3,812,151 | 5,853 | 1,126,607 | 69.4 |

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| Personal Services | Total | GF | CF | RF | FF | FTE |
|--------------------------|--------------|-----------|-----------|-----------|-----------|------------|
| FY 2011-12 Request | 4,868,689 | 0 | 3,814,172 | 5,872 | 1,048,645 | 69.4 |
| Recommendation - Request | 75,922 | 0 | (2,021) | (19) | 77,962 | 0.0 |

Operating Expenses. The following table presents the computation of the Operating Expenses appropriation:

| Operating Expenses | Total | GF | CF | RF | FF |
|--|----------------|-----------|----------------|-----------|----------------|
| FY 2010-11 Appropriation | 597,409 | 0 | 412,593 | 0 | 184,816 |
| Expiration of the June 2020 Interim Medical Marijuana supplemental | (112,843) | 0 | (112,843) | 0 | 0 |
| 2nd year impact of, HB10-1381, Tobacco Revenues Offset Medical Services (reverses one-time Amendment 35 transfer reductions to BRSS) | 40,000 | 0 | 40,000 | 0 | 0 |
| 2nd year impact of S.B. 10-109, Medical Marijuana Doctor-Patient Relations | (10,282) | 0 | (10,282) | 0 | 0 |
| 2nd year impact of H.B. 10-1284, Medical Marijuana Regulations | (13,004) | 0 | (13,004) | 0 | 0 |
| 2nd year impact of Decision Item, Medical Marijuana Registry Expansion | (62,040) | 0 | (62,040) | 0 | 0 |
| DI-1 Medical Marijuana | 21,291 | | 21,291 | | |
| Federal Funds Adjustment | (22,137) | 0 | 0 | 0 | (22,137) |
| FY 2011-12 Recommendation | 438,394 | 0 | 275,715 | 0 | 162,679 |
| FY 2011-12 Request | 420,531 | 0 | 235,715 | 0 | 184,816 |
| Recommendation - Request | 17,863 | 0 | 40,000 | 0 | (22,137) |

Transfer to DORA for Medical Marijuana (New Line Item). This line item pays from a transfer to DORA for regulatory activities of the Colorado Medical Board, which licenses physicians. The transfer was established by S.B. 10-109, Medical Marijuana Doctor Patient Relationship. The bill included a \$593,333 FY 2010-11 appropriation for this transfer. **The fiscal note for S.B. 10-109 projects a transfer of \$121,766 for FY 2011-12, which staff recommends.**

Requested \$8,060,000 Medical Marijuana Program Cash Fund Transfer

The Department proposes that \$8,060,000 be transferred from the Medical Marijuana Program Cash Fund to the General Fund to support General Fund Revenues in FY 2011-12. A transfer requires a bill but the transfer could be combined with others in a single piece of legislation.

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Background: This transfer is the second of two medical marijuana transfers proposed by the Governor. In January Staff presented the Governor's request to transfer \$9 million from the Medical Marijuana Program Cash in support of FY 2010-11 General Fund revenues. Staff concluded that a \$9 million transfer could not be supported by fund revenues and recommended that the Committee instead approve a variable end-of-fiscal-year transfer that would leave a \$1,000,000 balance in the fund. Staff projected that the result would be a \$6.4 million transfer. The Committee decided not to accept either the Governor's request or the Staff recommendation.

The January decision not to make a transfer left additional money in the fund. The following table, based on data and projections supplied by the Department suggests that a transfer of \$15 million is now possible.

| | FY 2008-09 Actual | FY 2009-10 Actual | FY 2010-11 Estimate | FY 2011-12 Estimate |
|---|----------------------|----------------------|------------------------|------------------------|
| Beginning Balance | 217,337 | 340,194 | 3,962,377 | 7,426,275 |
| Revenues | 782,825 | 4,670,966 | 11,028,313 | 9,990,000 |
| Expenditures | (401,233) | (1,048,783) | (4,564,415) | (1,946,929) |
| Subtotal | 598,929 | 3,962,377 | 10,426,275 | 15,469,346 |
| Previously authorized transfer to GF in S.B. 09-208 | (258,735) | 0 | 0 | 0 |
| Previously authorized transfer to GF in S.B. 09-279 | 0 | 0 | (3,000,000) | 0 |
| Ending Balance | 340,194 | 3,962,377 | 7,426,275 | 15,469,346 |

Since the Committee previously decided not to make a transfer from the Medical Marijuana Program Cash Fund to the General Fund, Staff recommends that this request not be considered further.

(B) Information Technology Services

The size of this division was substantially reduced by the OIT Consolidation Decision Item, which transferred most of the Department's IT staff to OIT and OIT. OIT provides most of the IT services for the Department. The Department pays for these services via the appropriations for Purchase of Services from the Computer Center, Multiuse Network Payments, and Management and Administration of OIT. The primary funding source is reappropriated funds from indirect cost assessments paid by the Department's various divisions.

Personal Services. The following table presents the distribution of the few FTE who remain.

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|--------------------------------|--------------------|---------------------|---------------------|------------------------|
| Accounting Technician | 0.0 | 0.0 | 0.0 | 0.0 |
| Budget Analyst | 0.4 | 0.0 | 0.0 | 0.0 |
| Information Systems Staff | 16.2 | 0.0 | 0.0 | 0.0 |
| Management | 0.6 | 0.0 | 0.0 | 0.0 |
| Electronic Specialist Spec III | 0.8 | 0.8 | 0.8 | 0.8 |
| Staff / General Professional | 2.1 | 1.0 | 1.0 | 1.0 |
| Total | 20.1 | 1.8 | 1.8 | 1.8 |

The next table computes the personal services recommendation. The table includes the effects of Decision Item #3, which would transfer the Prenatal Plus Program to the Department of Health Care Policy and Financing. This transfer will be discussed in more detail during the presentation of appropriations for the Prevention Services Division.

| Personal Services | Total | GF | CF | RF | FF | FTE |
|---|----------------|----------|---------------|----------------|----------|------------|
| FY 2010-11 Appropriation | 279,364 | 0 | 72,028 | 202,187 | 5,149 | 1.8 |
| Reverse 1% GF Personal Services Reduction | 151 | 0 | 0 | 151 | 0 | 0.0 |
| Prenatal Plus Transfer to HCPF (recommended later in this document) | (14,607) | 0 | 0 | (14,607) | 0 | 0.0 |
| State PERA contribution back to 10.15% | 2,715 | 0 | (100) | 7,964 | (5,149) | 0.0 |
| 1.5% base reduction | (4,014) | 0 | (1,079) | (2,935) | 0 | 0.0 |
| State PERA contribution down to 7.65% | (12,704) | 0 | (956) | (11,748) | 0 | 0.0 |
| FY 2011-12 Recommendation | 250,905 | 0 | 69,893 | 181,012 | 0 | 1.8 |
| FY 2011-12 Request | 254,616 | 0 | 70,972 | 183,644 | 0 | 1.8 |
| Recommendation - Request | (3,711) | 0 | (1,079) | (2,632) | 0 | 0.0 |

Operating Expenses. The following table shows the recommendation and request for operating expenses.

| Operating Expenses | Total | GF | CF | RF | FF |
|----------------------------------|----------------|----------|----------------|----------------|----------|
| FY 2010-11 Appropriation | 790,314 | 0 | 103,927 | 661,219 | 25,168 |
| Federal Funds Adjustment | (25,168) | 0 | 0 | 0 | (25,168) |
| FY 2011-12 Recommendation | 765,146 | 0 | 103,927 | 661,219 | 0 |
| FY 2011-12 Request | 790,314 | 0 | 103,927 | 661,219 | 25,168 |

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| Operating Expenses | Total | GF | CF | RF | FF |
|---------------------------|--------------|-----------|-----------|-----------|-----------|
| Recommendation - Request | (25,168) | 0 | 0 | 0 | (25,168) |

Purchase of Services from Computer Center. The following table shows the request for Purchase of Services from Computer Center. Because the Committee has not yet made a common policy decision, **the recommendation is pending.**

| Purchase of Services from Computer Center | Total | GF | CF | RF | FF |
|--|--------------|-----------|----------------|-----------|-------------|
| FY 2010-11 Appropriation | 5,389,819 | 248,229 | 725,891 | 1,799,269 | 2,616,430 |
| Common Policy Adjustments | | | Pending | | |
| Federal Funds Adjustment | (2,513,890) | 0 | 0 | 0 | (2,513,890) |
| FY 2011-12 Recommendation | | | Pending | | |
| FY 2011-12 Request | 5,409,655 | 274,819 | 910,648 | 1,693,912 | 2,530,276 |

Multiuse Network Payments. The following table shows the request for Multiuse Network Payments. Because the Committee has not yet made a common policy decision, **the recommendation is pending.**

| Multiuse Network Payments | Total | GF | CF | RF | FF |
|----------------------------------|--------------|-----------|----------------|-----------|-----------|
| FY 2010-11 Appropriation | 598,361 | 10,354 | 983 | 345,560 | 241,464 |
| Common Policy Adjustments | | | Pending | | |
| Federal Funds Adjustment | (247,320) | 0 | 0 | 0 | (247,320) |
| FY 2011-12 Recommendation | | | Pending | | |
| FY 2011-12 Request | 681,089 | 10,613 | 1,008 | 422,148 | 247,320 |

Management and Administration of OIT. The following table shows the request for Management and Administration of OIT. The table incorporates the adjustment for the second year impact of the "Medical Marijuana Computer System" supplemental discussed earlier. Because the Committee has not yet made a common policy decision, **the recommendation is pending.**

| Management and Administration of OIT | Total | GF | CF | RF | FF |
|---|--------------|-----------|----------------|-----------|-----------|
| FY 2010-11 Appropriation | 521,554 | 0 | 33,750 | 289,223 | 198,581 |
| 2 nd year impact of "Medical Marijuana Computer System" supplemental | 33,750 | 0 | 33,750 | 0 | 0 |
| Common Policy Adjustments | | | Pending | | |
| Federal Funds Adjustment | (203,546) | 0 | 0 | 0 | (203,546) |

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| Management and Administration of OIT | Total | GF | CF | RF | FF |
|--------------------------------------|-----------|----|----------------|-----------|-----------|
| FY 2011-12 Recommendation | | | Pending | | |
| FY 2011-12 Request | 576,027 | 0 | 78,000 | 294,481 | 203,546 |
| Recommendation - Request | (576,027) | 0 | (78,000) | (294,481) | (203,546) |

(C) Indirect Cost Assessment

The indirect cost assessment will be calculated after the Committee makes its final decisions on the Department's budget and is therefore shown as **pending**.

(3) LABORATORY SERVICES

Subdivisions:

- (A) Director's Office
- (B) Laboratory Services - Chemistry and Microbiology
- (C) Certification

(A) Director's Office

The Director's Office provides managerial and administrative support for the Division. The office is supported through cash funds and federal funds. The cash fund sources include various testing fees that are charged for lab services. The federal funds include the Preventive Health Block Grant, the Laboratory Training Grant and the Clinical Laboratory Inspection Grant.

Personal Services. The following table presents the distribution of FTE within the Director's office.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|---------------------------|--------------------|---------------------|---------------------|------------------------|
| Administrative Support | 0.8 | 0.7 | 0.7 | 0.7 |
| Information Systems Staff | 1.1 | 0.0 | 0.0 | 0.0 |
| Management | 0.5 | 0.5 | 0.5 | 0.5 |
| General Professional | 2.3 | 2.3 | 2.3 | 2.5 |
| Physical Scientist | 0.4 | 1.3 | 1.3 | 1.3 |
| Program Assistant | 0.8 | 0.5 | 0.5 | 0.5 |
| Total | 5.9 | 5.3 | 5.3 | 5.5 |

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The next table, which employs Option 8, summarizes staff's calculation of the personal services recommendation.

| Personal Services | Total | GF | CF | RF | FF | FTE |
|--|----------------|-----------|----------------|-----------|---------------|------------|
| FY 2010-11 Appropriation | 474,692 | 0 | 474,692 | 0 | 0 | 5.3 |
| State PERA contribution back to 10.15% | 5,054 | 0 | 5,054 | 0 | 0 | 0.0 |
| 1.5% base reduction | (7,196) | 0 | (7,196) | 0 | 0 | 0.0 |
| State PERA contribution down to 7.65% | (9,075) | 0 | (9,075) | 0 | 0 | 0.0 |
| Federal Funds Adjustment | 36,297 | 0 | 0 | 0 | 36,297 | 0.2 |
| FY 2011-12 Recommendation | 499,772 | 0 | 463,475 | 0 | 36,297 | 5.5 |
| FY 2011-12 Request | 470,671 | 0 | 470,671 | 0 | 0 | 5.3 |
| Recommendation - Request | 29,101 | 0 | (7,196) | 0 | 36,297 | 0.2 |

Operating Expenses. Staff recommends that the Committee approve the Department's request for a \$22,421 cash funds continuation appropriation for operating expenses.

Indirect Cost Assessment. The indirect cost assessment will be calculated after the Committee makes its final decisions on the Department's budget and is therefore shown as pending.

Decision Item #2: Newborn Screening Laboratory and Genetics Counseling. The Department requests a cash funds appropriation of \$396,637 and 1.0 FTE to add two tests to the panel of blood tests performed on all Colorado newborns:

1. \$376,637 to add Severe Combined Immunodeficiency Disorder (SCID, pronounced "skid", also known as Bubble Boy Syndrome), and
2. \$20,000 to add follow-up confirmatory testing for Alpha Thalassemia.

The fund source is the newborn screening fee, currently \$85, which is usually paid by insurers. The fee will rise by \$7 as a result of this decision item. This fee pays for both the screening component and the genetics counseling and education follow-up component of the newborn screening program.

The Department operates its Newborn Screening and Genetics Counseling program under authority of Sections 25-4-1001 through 1006, C.R.S., which require that all newborns be screened for certain conditions and that medical follow-up services, including genetic counseling and education, be provided. Under this statute, a blood sample from all newborns is sent to the state lab and screened for a variety of medical conditions that are established in statute and by Board of Health rule. Screening results are sent to the infant's primary care physician and, in most cases, abnormal results

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are sent to the appropriate specialty clinic for confirmatory and diagnostic follow-up. If infants have an abnormal result, or test positive for one of the conditions, the family is eligible for genetic counseling and other services intended to improve health outcomes for the infant. Fees paid by hospitals (and ultimately by insurance companies) when babies are born fund the Newborn Screening Program. The fee funds both the laboratory services screening component and the genetics counseling and education follow-up component of the newborn screening program. Insurance is also billed whenever possible.

SCID is a genetic deficiency. The most common type of SCID, called X-SCID is linked to the X chromosome and only affects males. A child with SCID cannot make the T cells that his body needs to fight infection. The T-cell deficiency is not usually apparent during the first weeks of life because mothers pass antibodies to their newborn children and these antibodies provide initial protection. As a baby with undetected SCID grows and the immunity received from mom wanes, he will develop increasingly severe infections. Without treatment, the inevitable outcome is death. The incidence of SCID is thought to be in the range of 1 in 35,000 to less than 1 in 100,000; there is uncertainty because an unknown number of children die of undiagnosed SCID each year.

SCID can be successfully treated with a bone marrow transplant; the best donor is often a sibling but parents and unrelated individuals can also donate. The costs of a delayed SCID diagnosis can be severe. Data from Duke University show that if the condition is diagnosed before a child starts getting infections, usually within the first 100 days of life, the cost of a bone marrow transplant is about \$50,000. If the diagnosis is delayed until the child is 6 months old, the inevitable infections often increase the cost of care and treatment to \$1 to \$2 million, with babies frequently spending long periods in an intensive care unit. Even with a successful bone marrow transplant, the residual damage from a severe infection is likely to linger for the remainder of such a child's life.

Both the federal Health Resources and Services Administration Advisory Committee on Heritable Disorders in Newborns and Children and the Colorado Newborn Screening Advisory Committee have recommended adding SCID to Colorado's newborn blood screening panel. The Department expects the State Board of Health to consider and support this recommendation in the next few months.

In 2008, Wisconsin started screening all newborns for SCID. Subsequently Massachusetts, New York, and California began SCID screening. So far, Massachusetts has found SCID at the rate of 1 in 100,000 babies while California's rate has equaled 1 in 40,000. All California SCID children discovered thus far are Hispanic. These rates suggest that Colorado, with 70,000 annual births, will detect about 1 SCID case per year.

Statute requires that the "Cost-benefit consequences of screening are acceptable." With a screening cost of \$6.49 per newborn, the annual cost of statewide screening, genetic counseling and follow-up

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services (\$376,637) is significantly less than the \$1 to \$2 million cost of treating a case detected when a child is 6 months old.

Thalassemia is an hereditary blood disorder characterized by abnormal hemoglobin that results in excessive destruction of red blood cells and anemia. In severe cases it can cause heart failure and liver problems. It is more common among those of Asian, Mediterranean, or African descent. The state lab currently screens for **Alpha Thalassemia**, which is one of the two most common types of Thalassemia. Unfortunately, the Alpha-Thalassemia screen has a high false positive rate and the lab performs no confirmatory testing. Each year, the lab notifies approximately 300 families that their newborn might have Alpha Thalassemia. It is believed that half of these children do not have the condition, leading to unnecessary alarm for their parents. A confirmatory test performed within the first week of life is fairly simple, but after the first week of life a key genetic marker disappears, making the confirmatory test more complex and expensive. Adding the confirmatory test to the standard newborn screen would eliminate unnecessary anxiety and medical costs at a cost of \$0.29 per child.

Staff recommends that the Committee approve both parts of this Decision Item. The additional appropriations would be funded by increasing the newborn blood screening fee from \$85 to \$92. This fee is usually paid by insurers or by Medicaid.

(B) Chemistry and Microbiology

This section conducts tests and provides analysis and advice for the Department's health and environmental programs and for outside clients. Its activities include analysis of blood and tissue specimens, testing for newborn genetic disorders, diagnostic testing for bacterial diseases, analysis for disease outbreaks, water testing, and environmental testing. The section obtains its cash funds from various fees, the most important being newborn screening fees. About half of its reappropriated funding is transferred from the Water Quality Control Division. The General Fund appropriation supports dairy testing activities.

The JBC is currently sponsoring S.B. 10-161, which would create a cash fund for laboratory revenues that are not currently deposited in a cash fund.

Personal Services. The following table presents the distribution of FTE within Laboratory Services.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------|--------------------|---------------------|---------------------|------------------------|
| Accounting | 2.0 | 4.0 | 4.0 | 4.0 |
| Administrative support | 2.2 | 4.4 | 4.4 | 4.4 |

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|-------------------------------------|--------------------|---------------------|---------------------|------------------------|
| Environmental Protection Specialist | 1.0 | 1.0 | 1.0 | 1.0 |
| Management | 0.5 | 0.5 | 0.5 | 0.5 |
| Program Assistant | 0.1 | 1.0 | 1.0 | 1.0 |
| Information Systems Staff | 1.2 | 0.0 | 0.0 | 0.0 |
| Laboratory Technician | 15.8 | 15.0 | 16.0 | 16.0 |
| Materials Supervisor | 0.0 | 0.0 | 0.0 | 0.0 |
| Materials Handler III | 1.0 | 1.0 | 1.0 | 1.0 |
| Physical Scientist | 26.2 | 28.0 | 28.0 | 28.0 |
| Staff / General Professional | 1.7 | 6.0 | 6.0 | 7.7 |
| Total | 51.7 | 60.9 | 61.9 | 63.6 |

The next table, based on the Option 8 common policy approved by the Committee, summarizes staff's calculation of the personal services recommendation.

| Personal Services | Total | GF | CF | RF | FF | FTE |
|---|------------------|----------------|------------------|---------------|------------------|-------------|
| FY 2010-11 Appropriation | 4,196,045 | 744,316 | 2,341,613 | 95,304 | 1,014,812 | 60.9 |
| Reverse 1% GF Personal Services Reduction | 7,518 | 7,518 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 76,592 | 13,572 | 40,668 | 489 | 21,863 | 0.0 |
| 1.5% base reduction | (64,202) | (11,481) | (35,734) | (1,437) | (15,550) | 0.0 |
| State PERA contribution down to 7.65% | (84,257) | (16,385) | (37,349) | (5,046) | (25,477) | 0.0 |
| DI-2, Newborn Screening and Genetics Counseling | 54,278 | 0 | 54,278 | 0 | 0 | 1.0 |
| Federal Funds Adjustment | 222,512 | 0 | 0 | 0 | 222,512 | 1.7 |
| FY 2011-12 Recommendation | 4,408,486 | 737,540 | 2,363,476 | 89,310 | 1,218,160 | 63.6 |
| FY 2011-12 Request | 4,234,868 | 733,713 | 2,399,210 | 90,747 | 1,011,198 | 61.9 |
| Recommendation - Request | 173,618 | 3,827 | (35,734) | (1,437) | 206,962 | 1.7 |

Operating Expenses. The following table shows the recommendation and request for operating expenses.

| Operating Expenses | Total | GF | CF | RF | FF |
|---|-----------|---------|-----------|---------|---------|
| FY 2010-11 Appropriation | 3,378,797 | 316,278 | 2,632,158 | 140,119 | 290,242 |
| DI-2, Newborn Screening and Genetics Counseling | 269,119 | 0 | 269,119 | 0 | 0 |

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| Operating Expenses | Total | GF | CF | RF | FF |
|----------------------------------|------------------|----------------|------------------|----------------|----------------|
| Federal Funds Adjustment | 284,719 | 0 | 0 | 0 | 284,719 |
| FY 2011-12 Recommendation | 3,932,635 | 316,278 | 2,901,277 | 140,119 | 574,961 |
| FY 2011-12 Request | 3,647,916 | 316,278 | 2,901,277 | 140,119 | 290,242 |
| Recommendation - Request | 284,719 | 0 | 0 | 0 | 284,719 |

(C) Certification

This division certifies private medical laboratories, environmental laboratories (including water testing labs), dairy on-site laboratories, and law enforcement breath-alcohol testing devices throughout the state. About three fourths of the unit's funding is from cash fund sources with the remainder from federal sources. About 75 percent of the cash funds come from the Law Enforcement Assistance Fund, which, pursuant to Section 42-4-402, C.R.S., receives revenue from a \$75 fee paid by individuals who commit drug or alcohol related driving offenses. This fund also supports activities of the Office of Transportation Safety and the Division of Alcohol and Drug Abuse in the Department of Human Services.

Personal Services. Staffing levels for Certification are shown in the following table:

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|-------------------------|----------------------------|-----------------------------|-----------------------------|--------------------------------|
| Electronic Specialist | 2.7 | 2.5 | 2.5 | 2.5 |
| Program Assistant | 1.0 | 1.0 | 1.0 | 1.0 |
| Laboratory Technician | 0.8 | 2.5 | 2.5 | 2.5 |
| Physical Scientist | 4.7 | 4.5 | 4.5 | 4.1 |
| Total | 9.2 | 10.5 | 10.5 | 10.1 |

The next table uses the Option 8 common policy to calculate the personal services recommendation.

| Personal Services | Total | GF | CF | RF | FF | FTE |
|--|--------------|-----------|-----------|-----------|-----------|------------|
| FY 2010-11 Appropriation | 704,319 | 0 | 522,520 | 0 | 181,799 | 10.5 |
| State PERA contribution back to 10.15% | 13,343 | 0 | 9,033 | 0 | 4,310 | 0.0 |
| 1.5% base reduction | (10,765) | 0 | (7,973) | 0 | (2,792) | 0.0 |
| State PERA contribution down to 7.65% | (14,046) | 0 | (10,886) | 0 | (3,160) | 0.0 |
| Federal Funds Adjustment | (33,434) | 0 | 0 | 0 | (33,434) | (0.4) |

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| Personal Services | Total | GF | CF | RF | FF | FTE |
|----------------------------------|--------------|-----------|-----------|-----------|-----------|------------|
| FY 2011-12 Recommendation | 659,417 | 0 | 512,694 | 0 | 146,723 | 10.1 |
| FY 2011-12 Request | 703,616 | 0 | 520,667 | 0 | 182,949 | 10.5 |
| Recommendation - Request | (44,199) | 0 | (7,973) | 0 | (36,226) | (0.4) |

Operating Expenses. The following table summarizes staff's computations for the operating expense recommendation.

| Operating Expenses | Total | GF | CF | RF | FF |
|----------------------------------|--------------|-----------|-----------|-----------|-----------|
| FY 2010-11 Appropriation | 98,002 | 0 | 60,483 | 0 | 37,519 |
| Federal Funds Adjustment | (17,832) | 0 | 0 | 0 | (17,832) |
| FY 2011-12 Recommendation | 80,170 | 0 | 60,483 | 0 | 19,687 |
| FY 2011-12 Request | 98,002 | 0 | 60,483 | 0 | 37,519 |
| Recommendation - Request | (17,832) | 0 | 0 | 0 | (17,832) |

- (4) AIR QUALITY CONTROL DIVISION**
- (5) WATER QUALITY CONTROL DIVISION**
- (6) HAZARDOUS MATERIALS AND WASTE MANAGEMENT DIVISION**
- (7) CONSUMER PROTECTION**

These environmental divisions are presented separately by another analyst

(8) DISEASE CONTROL AND ENVIRONMENTAL EPIDEMIOLOGY DIVISION

Subdivisions:

- (A) Administration, General Disease Control and Surveillance
- (B) Special Purpose Disease Control Programs
- (C) Environmental Epidemiology
- (D) Federal Grants

The Disease Control and Environmental Epidemiology Division works to track, control and prevent the spread of communicable diseases throughout the state. The Division maintains a disease-monitoring network, working with Colorado's health care providers to ensure prompt reporting of diseases, to identify the causes and modes of transmission and to stop epidemics. Data are also collected for birth defects monitoring and prevention. The division's staff provides technical

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assistance statewide in the control and treatment of certain infectious diseases such as tuberculosis. Disease prevention is accomplished by using public information, education, and training to encourage behavior change. In addition, prevention planning is coordinated with coalitions of interested and affected groups. Division staff also assess the risks from toxic exposures in the environment, assist with medical monitoring programs near contaminated sites, conduct special studies, provide environmental health education and make recommendations on reducing toxic hazards.

(A) Administration, General Disease Control and Surveillance

The Administration subdivision provides management and oversight for the Division's special purpose disease control programs and also administers specific programs. The office is supported by the General Fund, federal funds and a small amount of cash funds derived from rabies vaccines that the Department supplies to small hospitals. The federal funds primarily derive from the Department's Preventive Health and Health Services Block Grant.

Personal Services. The following table presents the distribution of FTE within this subdivision.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|-------------------------------------|--------------------|---------------------|---------------------|------------------------|
| Administrative Support Staff | 2.3 | 2.5 | 2.5 | 2.5 |
| Budget & Policy Analyst | 0.5 | 0.5 | 0.5 | 0.5 |
| Information Systems Staff | 1.7 | 0.0 | 0.0 | 0.0 |
| Management | 0.0 | 0.1 | 0.1 | 0.1 |
| Medical Health Professional | 2.6 | 6.3 | 6.3 | 6.3 |
| Physical Scientist | 0.6 | 0.5 | 0.5 | 0.5 |
| Public Health Medical Administrator | 0.4 | 0.2 | 0.2 | 0.2 |
| Staff / General Professional | 2.2 | 3.0 | 3.0 | 3.2 |
| Total | 10.3 | 13.1 | 13.1 | 13.3 |

The related Option 8 calculation, with Staff recommendation, is as follows:

| Personal Services | Total | GF | CF | RF | FF | FTE |
|---|----------|---------|----|----|---------|------|
| FY 2010-11 Appropriation | 809,664 | 545,504 | 0 | 0 | 264,160 | 13.1 |
| Reverse 1% GF Personal Services Reduction | 5,510 | 5,510 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 19,079 | 5,416 | 0 | 0 | 13,663 | 0.0 |
| 1.5% base reduction | (12,513) | (8,346) | 0 | 0 | (4,167) | 0.0 |

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| Personal Services | Total | GF | CF | RF | FF | FTE |
|---------------------------------------|----------------|----------------|-----------|-----------|----------------|-------------|
| State PERA contribution down to 7.65% | (16,122) | (11,800) | 0 | 0 | (4,322) | 0.0 |
| Federal Funds Adjustment | 12,547 | 0 | 0 | 0 | 12,547 | 0.2 |
| FY 2011-12 Recommendation | 818,165 | 536,284 | 0 | 0 | 281,881 | 13.3 |
| FY 2011-12 Request | 807,002 | 533,501 | 0 | 0 | 273,501 | 13.1 |
| Recommendation - Request | 11,163 | 2,783 | 0 | 0 | 8,380 | 0.2 |

Operating Expenses. The following table summarizes staff's computations for the operating expense recommendation.

| Operating Expenses | Total | GF | CF | RF | FF |
|----------------------------------|----------------|----------------|--------------|-----------|---------------|
| FY 2010-11 Appropriation | 264,579 | 223,133 | 6,538 | 0 | 34,908 |
| Federal Funds Adjustment | 17,750 | 0 | 0 | 0 | 17,750 |
| FY 2011-12 Recommendation | 282,329 | 223,133 | 6,538 | 0 | 52,658 |
| FY 2011-12 Request | 264,579 | 223,133 | 6,538 | 0 | 34,908 |
| Recommendation - Request | 17,750 | 0 | 0 | 0 | 17,750 |

Last year the Department requested that the General Fund appropriation for this line item be reduced by \$35,000 in FY 2010-11 relative to FY 2009-10, be held at this lower level during FY 2011-12, and be returned in FY 2012-13 to the FY 2009-10 level. The Department indicated that this reduction would not affect the delivery of services provided funding is restored in FY 2012-13.

Indirect Cost Assessment. The indirect cost assessment will be calculated after the Committee makes its final decisions on the Department's budget and is therefore shown as pending.

(B) Special Purpose Disease Control Programs

(1) Immunization

Colorado's immunization programs work to decrease preventable illness through the use of vaccines. Appropriations include General Fund, cash funds and federal funds. The cash funds derive from tobacco-settlement revenues and from Amendment 35 tobacco tax revenues.

General Fund Programs. The Immunization subdivision's General Fund appropriations support two programs:

1. The Colorado Immunization Information System, a computerized system that collects immunization information about Colorado children. The system, which uses about 68 percent of

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the General Fund Operating Expenses and Personal Services for Immunizations, keeps track of immunizations and enables immunization providers to quickly check a child's immunization status during a health-care visit, thus helping to ensure that children receive all recommended immunizations and are not over-immunized. The system can also send reminders to parents of children who are not up-to-date on their immunizations. A 2008-session decision item moved the Colorado Immunization Information System from the CU Health Sciences Center to CDPHE.

2. The Immunization Outreach Program, which runs free immunization clinics around the state and uses about 32 percent of General Fund Operating Expenses and Personal Services for Immunizations. This program was created by a 2004-session decision item.

Cash Fund Programs. The Immunization subdivision's cash fund expenditures are distributed to contractors, such as local health agencies. The following table shows the projected FY 2011-12 allocation.

| Item | Percentage |
|---|------------|
| Colorado Immunization Information System | 11% |
| Immunizations clinics operated by local health agencies | 41% |
| Other (a substantial portion is distributed to local health agencies) | 49% |

Federal Funds Programs. The Immunization Program's Federal funds come from the federal Vaccines for Children Program, which pays for the vaccine (i.e. the serum) but does not pay the cost of administering the vaccine.

These programs are mixed together in the Immunization subdivisions personal services and operating expenses lines.

Personal Services. The following table summarizes staffing.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Management | 0.9 | 1.0 | 1.0 | 1.0 |
| Accounting | 0.1 | 0.5 | 0.5 | 0.5 |
| Administrative Support Staff | 3.2 | 3.5 | 3.5 | 3.5 |
| Information Systems Staff | 1.4 | 0.0 | 0.0 | 0.0 |
| Medical Health Professional | 10.8 | 12.0 | 12.0 | 8.4 |
| Nurse Consultant | 6.6 | 8.8 | 8.8 | 8.8 |

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|-------------------------------------|--------------------|---------------------|---------------------|------------------------|
| Public Health Medical Administrator | 0.1 | 0.3 | 0.3 | 0.3 |
| Program Assistant | 0.3 | 2.0 | 2.0 | 2.0 |
| Staff / General Professional | 5.7 | 7.0 | 7.0 | 7.0 |
| Statistical Analyst | 0.1 | 0.5 | 0.5 | 0.5 |
| Total | 29.2 | 35.6 | 35.6 | 32.0 |

The Option 8 calculation is as follows.

| Personal Services | Total | GF | CF | RF | FF | FTE |
|---|------------------|----------------|----------|----------|------------------|-------------|
| FY 2010-11 Appropriation | 2,560,719 | 817,527 | 0 | 0 | 1,743,192 | 35.6 |
| Reverse 1% GF Personal Services Reduction | 8,258 | 8,258 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 50,273 | 13,730 | 0 | 0 | 36,543 | 0.0 |
| 1.5% base reduction | (39,289) | (12,593) | 0 | 0 | (26,696) | 0.0 |
| State PERA contribution down to 7.65% | (50,327) | (14,936) | 0 | 0 | (35,391) | 0.0 |
| Federal Funds Adjustment | 63,263 | 0 | 0 | 0 | 63,263 | (3.6) |
| FY 2011-12 Recommendation | 2,592,897 | 811,986 | 0 | 0 | 1,780,911 | 32.0 |
| FY 2011-12 Request | 2,552,133 | 807,789 | 0 | 0 | 1,744,344 | 35.6 |
| Recommendation - Request | 40,764 | 4,197 | 0 | 0 | 36,567 | (3.6) |

Operating Expenses. To simplify the presentation, staff will divide the recommendation into two parts.

Part 1. GF and FF Operating Expenses: The following table presents the staff recommendation and the Department's request.

| GF and FF Operating Expenses | Total | GF | CF | RF | FF |
|----------------------------------|------------------|----------------|-----------------|----------|------------------|
| FY 2010-11 Appropriation | 11,773,460 | 652,285 | Presented below | 0 | 11,121,175 |
| Federal Funds Adjustment | (8,229,454) | 0 | | 0 | (8,229,454) |
| FY 2011-12 Recommendation | 3,544,006 | 652,285 | | 0 | 2,891,721 |
| FY 2011-12 Request | 11,773,460 | 652,285 | | 0 | 11,121,175 |
| Recommendation - Request | (8,229,454) | 0 | | 0 | (8,229,454) |

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Last year the Department requested that the General Fund appropriation for this line item be reduced by \$35,000 in FY 2010-11 relative to FY 2009-10, be held at this lower level during FY 2011-12, and be returned in FY 2012-13 to the FY 2009-10 level. The Department indicated that this reduction would not affect the delivery of services provided funding is restored in FY 2012-13.

Part 2. CF Operating Expenses: The cash funds portion of Operating Expenses derives from tobacco settlement revenues: the Colorado Immunization Fund receives 4 percent of the tobacco-settlement revenue that is allocated to Tier 2 tobacco programs and the cash fund appropriations for operating expenditures are made from this fund.

The diversion to HCPF for cervical cancer vaccination: A portion of the moneys that the Colorado Immunization Fund receives each year have been appropriated to HCPF rather than to CDPHE. The diversion to HCPF funds cervical cancer vaccinations (also known as human papillomavirus vaccinations or HPV vaccinations) for Children's Basic Health Plan participants. This arrangement was established in the appropriation clause of H.B. 07-1301 Cervical Cancer Immunizations, which reflected the corresponding Legislative Council Staff Fiscal Note. The HCPF appropriation is not required by statute but it has been continued and has grown from the original \$91,000 to slightly more than \$460,000 since H.B. 07-1301 became law. The diverted moneys are appropriated in the "Indigent Care Program" division of HCPF's Long Bill where they supply a small portion (0.3 percent) of the funding for the "Children's Basic Health Plan Premium Costs" line item. According to HCPF, the CBHP appropriations for cervical cancer immunization qualify for an enhanced 1.5 to 1 match.

The Fiscal Note for H.B. 07-1301 also indicated that CDPHE would make payments from the Colorado Immunization Fund to local public health agencies to compensate them for the costs of administering HPV shots to 6th grade girls, the recommended age for the HPV vaccine. The Fiscal Note indicated a \$42,600 annual expenditure and the Department indicates that it has been devoting \$42,600 to this purpose. This expenditure is not required by statute.

For FY 2011-12, staff recommends that the diversion to HCPF for HPV vaccines be continued at the FY 2010-11 level.

| CF Operating Expenses | CF |
|---|----------------|
| Projected allocation of tobacco settlement revenues to Colorado Immunization Fund | \$1,187,488 |
| Recommended diversion to HCPF for immunizations by the Children's Basic Health Plan | (461,700) |
| FY 2011-12 CF Appropriation Recommendation | 725,788 |

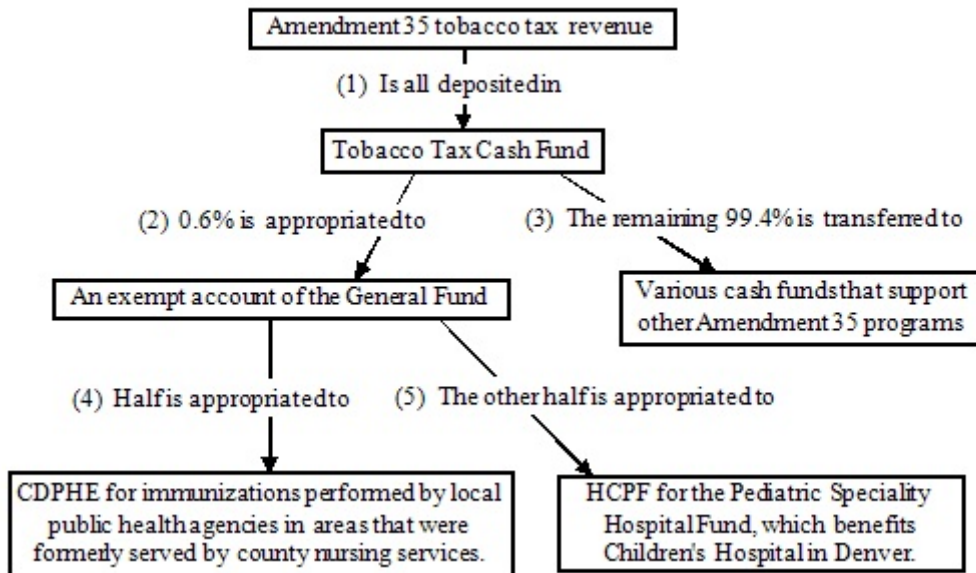
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A substantial portion of the tobacco settlement revenue flowing to the Colorado Immunization Fund now funds HPV immunizations. The following table summarizes the combined effect of the diversion to HCPF and the payments to local health agencies to administer HPV shots if the Committee approves this HCPF transfer recommendation.

| Fiscal Year | Tobacco Revenue Allocation | HPV payments to local public health agencies | HPV diversion to HCPF | Remainder (Non HPV) | HPV share of allocation |
|-------------|----------------------------|--|-----------------------|---------------------|-------------------------|
| 2007-08 | 685,155 | (42,600) | (90,765) | 551,790 | 19.5% |
| 2008-09 | 1,469,167 | (42,600) | (171,251) | 1,255,316 | 14.6% |
| 2009-10 | 1,442,600 | (42,600) | (461,727) | 938,273 | 35.0% |
| 2010-11 | 1,306,489 | (42,600) | (461,700) | 802,189 | 38.6% |
| 2011-12 | 1,187,488 | (42,600) | (461,700) | 683,188 | 42.5% |

Immunizations by Local Public Health Agencies in Areas Formerly Served by Nursing Services.

A portion of the funding for immunizations derives from the Amendment 35 tobacco tax. The following diagram shows the flow of Amendment 35 dollars as implemented in Section 24-22-117, C.R.S.



Referring to the numbers in parentheses in the above diagram:

- (1) All of Amendment 35's tobacco tax revenues are deposited into the Tobacco Tax Cash Fund.

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(2) Three percent of the amount deposited into the Tobacco Tax Cash Fund must be appropriated for "health-related purposes", and 20 percent of this 3 percent must be appropriated to the General Fund, which leads to the $3\% * 20\% = 0.6\%$ appropriation at (2) above.

Comments:

- The money appropriated to the General Fund goes into an exempt account of the General Fund because it derives from a voter-approved tax increase, which makes it exempt from TABOR, an exempt status that derives from Amendment 35, not from Referendum C.
- Appropriations out of this General Fund Exempt account are also exempt from the Six Percent limit on the growth of General Fund appropriations because they represent an appropriation of moneys from a voter-approved tax increase (See Section 24-75-201.1 (1) (a) (III) (B), C.R.S.).
- This is the only part of the Amendment 35 revenue that is appropriated to the General Fund. The wording of Amendment 35 requires this appropriation.

(4) Half the appropriation to the Exempt Account of the General Fund goes to CDPHE for immunizations performed by local public health agencies in areas that were formerly served by county nursing services. This appropriation was placed in statute before the passage of S.B. 08-194, Public Health Reorganization. Prior to S.B. 08-194, every county in Colorado was served either by a health department or by a public health nursing service, with nursing services typically serving less populous counties. Senate Bill 08-194 eliminated the distinction between health departments and nursing services, requiring that they reorganize as county health agencies or that they join with one or more other counties to form district health agencies.

(5) The other half of the appropriation to the Exempt Account of the General Fund goes to the Pediatric Speciality Hospital Fund, which supports Children's Hospital in Denver.

Recommended CDPHE appropriations

The General Fund Exempt appropriation in the above diagram is unusual and has been the subject of past confusion, Staff continues to recommend that half of this appropriation be placed in CDPHE's portion of the Long Bill and the other half be placed in HCPF's portion of the Long Bill. This places CDPHE's General Fund Exempt appropriation close to the related immunizations appropriation and places HCPF's General Fund Exempt appropriation close to the related appropriation to the Pediatric Specialty Hospital Fund.

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The following table shows staff's calculation of the recommended appropriation from the Tobacco Tax Cash Fund to the General Fund, based on last December's Legislative Council Staff revenue forecast:

| | |
|--|------------------|
| December 2010 Legislative Council Staff forecast of FY 2011-12 Amendment 35 revenue | \$146,100,000 |
| Allocation to <i>Immunizations Performed by Local Public Health Agencies that Were Formerly Nursing Services</i> (0.3% of this revenue) | \$438,300 |
| Correction for extra revenue received in prior year that was not appropriated | \$900 |
| Recommended FY 2011-12 allocation to Immunizations Performed by Local Public Health Agencies that Were Formerly Nursing Services (0.3% of this revenue) | \$439,200 |

- **An appropriation of \$439,200 from the Tobacco Tax Cash Fund to the General Fund.** This appropriation is classified as cash funds because the source is cash funds.
- **An appropriation of \$439,200, General Fund Exempt, for Immunizations Performed by Local Public Health Agencies that Were Formerly Nursing Services.**

Legislative Council Staff will issue a revised Amendment 35 revenue forecast in March when they issue the economic forecast. The March forecast may alter the calculation of this appropriation. Staff requests permission to update these appropriations to reflect the March forecast if it becomes available in time to revise the Long Bill before it is introduced. The update requires a mechanical application of statutory rules.

(2) Sexually Transmitted Infections (STI), HIV and AIDS. Prior to FY 2006-07, the program was exclusively federally funded with grants from the federal Centers for Disease Control. These grants, which have no maintenance of effort or matching requirements, focus on prevention, treatment, and surveillance. The prevention and treatment activities provide statewide follow-up to ensure persons infected with, or at high risk for STI and HIV receive test results, treatment, risk-reduction counseling, referrals, partner notification services, and prevention case management services. The prevention program also provides public information and selected group level interventions. The surveillance program tracks STI/HIV infections in Colorado and maintains an STI/HIV Registry. Department staff identify disease outbreaks and coordinate the response by CDPHE, collaborating agencies, and health care providers.

Since FY 2006-07 this section has also administered the Colorado HIV and AIDS Prevention Grant Program (CHAPP), which is established in Section 25-4-1413, C.R.S., and receives 2 percent of tobacco settlement payments with a two million dollar cap. The grant program, which is overseen by

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a 7-member advisory committee, provides competitive grants to organizations that addresses local community needs in the areas of medically accurate HIV and AIDS prevention and education.

Personal Services. Staffing levels for the Sexually Transmitted Infection, HIV and AIDS section are shown in the table below.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|-------------------------------------|--------------------|---------------------|---------------------|------------------------|
| Accounting | 0.2 | 0.2 | 0.2 | 0.2 |
| Administrative Support Staff | 0.8 | 0.5 | 0.5 | 0.5 |
| Information Systems Staff | 1.3 | 0.0 | 0.0 | 0.0 |
| Management | 0.4 | 0.5 | 0.5 | 0.5 |
| Medical Health Professional | 22.7 | 24.0 | 24.0 | 24.9 |
| Public Health Medical Administrator | 0.0 | 0.0 | 0.0 | 0.0 |
| Medical Records Technician | 0.6 | 0.5 | 0.5 | 0.5 |
| Program Assistant | 3.3 | 3.5 | 3.5 | 3.5 |
| Staff / General Professional | 15.6 | 15.0 | 15.0 | 15.0 |
| Statistical Analyst | 0.0 | 0.0 | 0.0 | 0.0 |
| Technician | 1.6 | 1.5 | 1.5 | 1.5 |
| Total | 46.5 | 45.7 | 45.7 | 46.6 |

The following table presents the corresponding Option 8 calculation.

| Personal Services | Total | GF | CF | RF | FF | FTE |
|--|------------------|----------|---------------|----------|------------------|-------------|
| FY 2010-11 Appropriation | 3,622,784 | 0 | 75,818 | 0 | 3,546,966 | 45.7 |
| State PERA contribution back to 10.15% | 75,141 | 0 | 1,673 | 0 | 73,468 | 0.0 |
| 1.5% base reduction | (55,469) | 0 | (1,162) | 0 | (54,307) | 0.0 |
| State PERA contribution down to 7.65% | (76,275) | 0 | (1,671) | 0 | (74,604) | 0.0 |
| Federal Funds Adjustment | 188,367 | 0 | 0 | 0 | 188,367 | 0.9 |
| FY 2011-12 Recommendation | 3,754,548 | 0 | 74,658 | 0 | 3,679,890 | 46.6 |
| FY 2011-12 Request | 3,621,650 | 0 | 75,820 | 0 | 3,545,830 | 45.7 |
| Recommendation - Request | 132,898 | 0 | (1,162) | 0 | 134,060 | 0.9 |

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Of the total FTE in this table, 1.2 are the cash-funded FTE of the HIV and AIDS Prevention Grant Program; the cash funds appropriation is for those FTE.

Operating Expenses. Like the Personal Services appropriation, the Operating Expenses appropriation has two components: cash funds from tobacco-settlement revenues and federal funds. For simplicity, staff will deal with each separately.

Part 1, FF Operating Expenses. Staff recommends that the Committee approve an appropriation of 2,875,419 for federally-funded operating expenses, which equals the FY 2010-11 appropriation minus a \$10,317 federal funds adjustment. The Department request equals \$2,885,736. About 80 percent of the federal funding in this line item is used for grants to county and local governments and to non-profit organizations to conduct STI monitoring, prevention and education efforts.

Part 2, CF Operating Expenses. The cash funds portion of the Operating Expenses appropriation is computed in the following table. Staff recommends that the Committee hold back \$30,000 in order to keep a balance in the fund equal to approximately one percent of annual tobacco-revenue receipts. This fund balance could be used in the future to avoid small negative supplemental adjustments if tobacco settlement payments come in slightly lower than the forecast. The fund balance could also be used to cushion a decline if tobacco settlement payments fall more sharply.

After subtracting the cash funds appropriation for personal services calculated above, this leads to the following appropriation for operating expenses. CHAPP grants are made from this appropriation.

| CF Operating Expenses (The Colorado HIV and AIDS Prevention Grant Program - "CHAPP") | CF |
|---|------------------|
| Projected tobacco settlement revenue based on the January 2010 Legislative Council Forecast | 1,804,664 |
| + Projected fund balance in the AIDS and HIV Prevention Fund (19S), carried from prior year | 0 |
| - Recommended fund balance held in reserve | (30,000) |
| - Recommended cash fund personal services appropriation computed above | (74,658) |
| FY 2011-12 CF Recommendation | 1,700,006 |
| FY 2011-12 CF Request | 2,862,379 |

Note that the Department's request equals the FY 2010-11 appropriation, which was based on what was believed to be a large carryforward balance from FY 2009-10. However, due to accounting errors that balance proved to be largely illusory. As a result the FY 2010-11 appropriation exceeded the available funding by a substantial margin.

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(3) Ryan White Act

This section administers the grants that Colorado receives under the federal Ryan White Comprehensive AIDS Resources Emergency (CARE) Act. It also administers Colorado's AIDS Drug Assistance Program (ADAP) which is authorized in Section 25-4-1411, C.R.S., and is funded with a combination of tobacco settlement dollars and federal funds. CDPHE administers the program in consultation with a subcommittee of the Governor's advisory group on AIDS (Section 25-4-1411 (4), C.R.S.).

ADAP provides AIDS/HIV treatment related drugs and opportunistic infection fighting drugs at no cost on an outpatient basis to Colorado residents who are not covered by private insurance (or are covered by private insurance that they can no longer afford, in which case the program offers assistance with premiums), are not eligible for Medicaid, and have incomes at or below 400 percent of the federal poverty level. The related federal Ryan White CARE Act funds primary care and support services for individuals living with HIV and AIDS who lack health insurance and financial resources to pay for their care. Drug assistance, ambulatory health care, and support services are the primary focus of the program, but training and technical assistance for providers is also funded. Services include primary care, dental care, mental health care, substance abuse counseling, transportation, hospice care, emergency services, drug assistance, food bank, respite care assistance, adoption and foster care, and nutrition counseling.

There is no federal matching requirement, but there is a maintenance of effort requirement. The state can meet this requirement by maintaining the prior year's level of funding for AIDS programs throughout state government, not just through spending by the Department of Public Health and Environment.

Colorado's AIDS drug assistance program receives 3.5 percent of tobacco settlement moneys, with a \$5 million cap. These settlement moneys appear exclusively on the operating expense line.

Personal Services. The following table shows program staffing.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Administrative Support Staff | 0.1 | 0.1 | 0.1 | 0.1 |
| Information Technology | 0.1 | 0.0 | 0.0 | 0.0 |
| Management | 0.5 | 0.5 | 0.5 | 0.5 |
| Medical Health Professional | 2.9 | 2.6 | 2.6 | 2.6 |
| Program Assistant | 1.4 | 1.5 | 1.5 | 1.5 |

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Staff / General Professional | 7.3 | 7.0 | 7.0 | 7.9 |
| Total | 12.3 | 11.7 | 11.7 | 12.6 |

The next table, which employs the Option 8 common policy approved by the Committee, summarizes staff's calculation of the personal services recommendation.

| Personal Services | Total | GF | CF | RF | FF | FTE |
|---|------------------|---------------|----------|----------|----------------|-------------|
| FY 2010-11 Appropriation | 950,136 | 28,162 | 0 | 0 | 921,974 | 11.7 |
| Reverse 1% GF Personal Services Reduction | 284 | 284 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 21,604 | 0 | 0 | 0 | 21,604 | 0.0 |
| 1.5% base reduction | (14,581) | (427) | 0 | 0 | (14,154) | 0.0 |
| State PERA contribution down to 7.65% | (20,873) | (235) | 0 | 0 | (20,638) | 0.0 |
| Federal Funds Adjustment | 85,818 | 0 | 0 | 0 | 85,818 | 0.9 |
| FY 2011-12 Recommendation | 1,022,388 | 27,784 | 0 | 0 | 994,604 | 12.6 |
| FY 2011-12 Request | 950,582 | 27,642 | 0 | 0 | 922,940 | 11.7 |
| Recommendation - Request | 71,806 | 142 | 0 | 0 | 71,664 | 0.9 |

Of the FTE in the above table, 0.4 are supported by the General Fund.

Operating Expenses.

Extra Funding for ADAP from CHAPP in FY 2009-10 and FY 2010-11: During the 2010 session, concern over the adverse impact that reduced tobacco settlement revenue would have on the AIDS Drug Assistance Program (ADAP) led the General Assembly to include a provision in H.B. 10-1323 that allowed moneys in the AIDS and HIV Prevention Cash Fund, which supports CHAPP grants, to be appropriated to ADAP in FY 2010-11. This extended a provision that allowed similar appropriations in FY 2009-10. In FY 2009-10, \$128,692 was appropriated from the CHAPP cash fund to ADAP. Using this appropriation authority, the FY 2010-11 Long Bill included an appropriation of \$261,040 from the AIDS and HIV Prevention Cash Fund to ADAP. This appropriation, in combination with the projected allocation of tobacco-settlement dollars to the program, kept cash fund appropriations for ADAP at the FY 2008-09 and FY 2009-10 level of \$3,622,156.

The following table summarizes the operating expense recommendation. Note that the CF column is the tobacco-settlement appropriation.

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| Operating Expenses | Total | GF | CF | RF | FF |
|---|-------------------|------------------|------------------|-----------|-------------------|
| FY 2010-11 appropriation | 17,748,772 | 1,357,404 | 3,622,156 | 0 | 12,769,212 |
| Expiration of the provision in H.B. 10-1323 that allows appropriations from the AIDS and HIV Prevention (CHAPP) Cash Fund to ADAP | (261,040) | 0 | (261,040) | 0 | 0 |
| Reduced tobacco-settlement revenue allocation (= FY 2011-12 forecast minus FY 2010-11 forecast) | (202,955) | 0 | (202,955) | 0 | 0 |
| Federal Funds Adjustment | (536,797) | 0 | 0 | 0 | (536,797) |
| FY 2011-12 Recommendation | 16,747,980 | 1,357,404 | 3,158,161 | 0 | 12,232,415 |
| FY 2011-12 Request | 17,748,772 | 1,357,404 | 3,622,156 | 0 | 12,769,212 |
| Recommendation - Request | (1,000,792) | 0 | (463,995) | 0 | (536,797) |

The recommended CF appropriation in this table, which is based on statutory provisions in effect for FY 2011-12, represents a 12.8 percent reduction relative to appropriations in FY 2008-09 through FY 2010-11, when transfers from CHAPP held CF appropriations for ADAP constant. Since the FY 2010-11 appropriation was based on a forecast that was too high, the reduction relative to CF funds actually available in FY 2010-11 is a slightly smaller 11.4%. Unfortunately, it is difficult to extend the transfer from CHAPP into FY 2011-12 because, unlike past years, the CHAPP Cash Fund has no fund balance entering FY 2011-12; it is making as many grants as possible. Thus a transfer to ADAP would come at the cost of reduced prevention grants. Regrettably, this decline is occurring during a period when a weak economy has increased the number of eligible participants. As a consequence there is a possibility that the ADAP program will implement a waiting list for the first time since 2004.

The following e-mail exchange between JBC staff and CDPHE is relevant:

Question: In each of the past two years, special statutory provisions have allowed moneys in the AIDS and HIV Prevention Cash Fund to be appropriated to ADAP in order to keep tobacco-settlement funding for ADAP at a constant level. What is the Department's position on a similar extension for FY 11-12? I compute the required transfer from the CHAPP cash fund to ADAP at \$463,995 for FY 11-12. If a \$463,995 transfer was made for FY 11-12, what would be the effect on CHAPP grants?

Response received from CDPHE, February 22, 2011: Because of the lack of fund balance in the AIDS/HIV Prevention Program Fund, this transfer to the ADAP program will significantly restrict the grants available for the CHAPP Program. However, the Department feels that it

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is an appropriate transfer as the funds are needed to provide medications via the ADAP program.

Ryan White Act Request for Information. Staff recommends that the following request for information, which was also submitted to the Governor last year, be submitted again this session, with the indicated changes:

- 56. Department of Public Health and Environment, Disease Control and Environmental Epidemiology Division, Special Purpose Disease Control Programs, Ryan White Act --** The Department is requested to report annually to the Joint Budget Committee with regard to the AIDS drug assistance program. The report should be submitted on or before ~~October 20, 2010~~ October 20, 2011. The report should include, but not be limited to: (1) A NARRATIVE DESCRIPTION OF PROGRAM CHANGES WITHIN THE PAST YEAR, INCLUDING CHANGES THAT HAVE ENHANCED THE PROGRAM AND ITS COVERAGE AND CHANGES THAT HAVE BEEN DETRIMENTAL TO THE PROGRAM AND ITS COVERAGE, WITH AN EXPLANATION OF THE REASONS FOR CHANGE; ~~(1)~~ (2) the total NUMBER OF ENROLLED CLIENTS and ~~average monthly~~ THE number of clients ACTUALLY served, with a description of the demographic profile of the client population; ~~(2)~~ (3) the total and average monthly costs to provide pharmaceutical products to ~~those~~ clients ACTUALLY SERVED; ~~(3)~~ (4) a listing of the pharmaceuticals on the formulary, the manufacturer of each product, and the respective average price TO THE PROGRAM for a month's supply of each product; and ~~(4)~~ (5) the total amount of available funds, including state ~~General Fund support~~ funds, federal ~~Title I and Title II~~ RYAN WHITE CARE ACT PART A, PART B AND DEDICATED ADAP funds, and any other source as appropriate; and (6) ADMINISTRATIVE COSTS OF THE PROGRAM AS A PERCENTAGE OF TOTAL PROGRAM EXPENDITURES.

A similar information request first appeared as a footnote in the FY 1998-99 Long Bill at a time when the state's AIDS/HIV costs were rising rapidly and funding shortfalls left some on waiting lists. Staff believes that the requested report provides valuable information for program monitoring.

(4) Tuberculosis Control and Treatment

Pursuant to Sections 25-4-501 to 513, C.R.S., the Department conducts a statewide tuberculosis program that relies on surveillance and treatment. Counties are responsible for investigating reported or suspect cases, and can order quarantine or isolation if necessary. About 45 percent of the program's funding comes from the General Fund, with 40 percent deriving from federal sources and the remainder coming from transfers from the Department of Human Services that derive from a federal source.

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Personal Services. This line item provides financing for the personal services expenditures related to this program. The following table shows staffing levels.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Accounting | 0.1 | 0.1 | 0.1 | 0.1 |
| Administrative Support Staff | 3.7 | 3.4 | 3.4 | 1.4 |
| Budget & Policy Analyst | 0.0 | 0.0 | 0.0 | 0.0 |
| Information Systems Staff | 0.3 | 0.0 | 0.0 | 0.0 |
| Management | 0.9 | 0.0 | 0.0 | 0.0 |
| Medical Health Professional | 4.7 | 4.5 | 4.5 | 2.5 |
| Public Health Administrator | 0.2 | 0.0 | 0.0 | 0.0 |
| Nurse Consultant | 1.0 | 1.0 | 1.0 | 1.0 |
| Program Assistant | 1.1 | 1.0 | 1.0 | 0.0 |
| Staff / General Professional | 2.5 | 2.0 | 2.0 | 0.5 |
| Total | 14.5 | 12.0 | 12.0 | 5.5 |

The next table, which employs the Option 8 common policy approved by the Committee, summarizes staff's calculation of the personal services recommendation.

| Personal Services | Total | GF | CF | RF | FF | FTE |
|---|------------------|----------------|----------|---------------|------------------|------------|
| FY 2010-11 Appropriation | 1,088,459 | 121,598 | 0 | 95,554 | 871,307 | 12.0 |
| Reverse 1% GF Personal Services Reduction | 1,228 | 1,228 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 21,892 | 360 | 0 | 0 | 21,532 | 0.0 |
| 1.5% base reduction | (16,674) | (1,848) | 0 | (1,433) | (13,393) | 0.0 |
| State PERA contribution down to 7.65% | (23,151) | (2,500) | 0 | (15,725) | (4,926) | 0.0 |
| Federal Funds Adjustment | 258,214 | 0 | 0 | 0 | 258,214 | (6.5) |
| FY 2011-12 Recommendation | 1,329,968 | 118,838 | 0 | 78,396 | 1,132,734 | 5.5 |
| FY 2011-12 Request | 1,085,964 | 118,222 | 0 | 79,829 | 887,913 | 12.0 |
| Recommendation - Request | 244,004 | 616 | 0 | (1,433) | 244,821 | (6.5) |

The reappropriated funds in this appropriation are transferred from a Department of Human Services federal source of funding.

Operating Expenses. The following table summarizes the staff recommendation.

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| Operating Expenses | Total | GF | CF | RF | FF |
|----------------------------------|------------------|------------------|-----------|----------------|------------------|
| FY 2010-11 Appropriation | 2,217,462 | 1,191,913 | 0 | 210,020 | 815,529 |
| Federal Funds Adjustment | 1,225,641 | 0 | 0 | 0 | 1,225,641 |
| FY 2011-12 Recommendation | 3,443,103 | 1,191,913 | 0 | 210,020 | 2,041,170 |
| FY 2011-12 Request | 2,217,462 | 1,191,913 | 0 | 210,020 | 815,529 |
| Recommendation - Request | 1,225,641 | 0 | 0 | 0 | 1,225,641 |

(C) Environmental Epidemiology

(1) Birth Defects Monitoring and Prevention

This is a monitoring and prevention program for children, newborn to age three, with birth defects, developmental disabilities, or risks of developmental delay. Eligible children are identified from multiple sources, including reports from hospitals, laboratories, clinics, and physicians. Once identified, children are referred to community-level early intervention services that help prevent secondary disabilities. About 9,000 children are identified each year and about half are referred to additional services. The program includes a birth defects registry, which is funded entirely with federal grants. The registry is used to perform epidemiological surveillance to learn about the occurrence of birth defects and developmental disabilities.

The program was established in 1989 under the general authority that Section 25-1.5-105, C.R.S., gives the Department to operate programs that prevent chronic diseases. Prior to FY 2008-09 the program was funded with a combination of General Fund and federal funds. House Bill 08-1100, Office of State Registrar Adjust Fees, added cash fund support; it gave the Department the authority to increase fees for birth, marriage, death and other certificates so as to bring in an extra \$187,500 of revenue and directed it to use the revenue to expand the Birth Defects Monitoring and Prevention program. These fees also support the Health Statistics and Vital Records section of the Center for Health and Environmental Information Division. Though the bill permitted the department to increase any of these fees, the Legislative Council Staff Fiscal Note for the bill indicated that the Department would increase birth certificate fees to finance the funding increase. Information provided with the Department's budget request indicates that it has done so. As a consequence of this funding arrangement, the General Assembly now influences birth certificate fees through the cash fund appropriations that it approves for this program. An increase in the cash funds appropriation for this line item that exceeds the growth of birth-certificate fee revenue that would occur with fees held constant would require the Department to increase those fees.

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Personal Services. The following table presents the distribution of FTE within Birth Defects Monitoring and Prevention.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Administrative Support Staff | 0.0 | 0.3 | 0.3 | 0.3 |
| Information Systems Staff | 1.0 | 0.0 | 0.0 | 0.0 |
| Medical Health Professional | 0.0 | 0.0 | 0.0 | 0.0 |
| Physical Scientist | 0.5 | 1.0 | 1.0 | 1.0 |
| Staff / General Professional | 2.3 | 2.3 | 2.3 | 2.3 |
| Total | 3.8 | 3.6 | 3.6 | 3.6 |

The next table, which employs the Option 8 common policy approved by the Committee, summarizes staff's calculation of the personal services recommendation:

| Personal Services | Total | GF | CF | RF | FF | FTE |
|---|----------------|----------------|----------------|----------|----------------|------------|
| FY 2010-11 Appropriation | 328,691 | 117,433 | 134,244 | 0 | 77,014 | 3.6 |
| Reverse 1% GF Personal Services Reduction | 1,186 | 1,186 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 4,164 | 1,369 | (270) | 0 | 3,065 | 0.0 |
| 1.5% base reduction | (5,011) | (1,800) | (2,010) | 0 | (1,201) | 0.0 |
| State PERA contribution down to 7.65% | (7,876) | (2,439) | (2,208) | 0 | (3,229) | 0.0 |
| Federal Funds Adjustment | 86,529 | 0 | 0 | 0 | 86,529 | 1.1 |
| FY 2011-12 Recommendation | 407,683 | 115,749 | 129,756 | 0 | 162,178 | 4.7 |
| FY 2011-12 Request | 323,765 | 115,149 | 131,766 | 0 | 76,850 | 3.6 |
| Recommendation - Request | 83,918 | 600 | (2,010) | 0 | 85,328 | 1.1 |

Operating Expenses. Staff recommends an appropriation for operating expenses of \$13,300, comprised of \$1,425 cash funds and \$11,875 federal funds.

(2) Federal Grants. This line reflects federal grants that do not fit elsewhere within the division's budget. Among the recent grants are \$435,000 for Surveillance and Epidemiological Research and \$550,000 for Fetal Alcohol Syndrome Prevention. Staffing levels for these federal grants are summarized below.

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|-------------------------------------|----------------------------|-----------------------------|-----------------------------|--------------------------------|
| Accounting | 0.1 | 0.0 | 0.0 | 0.0 |
| Administrative Support Staff | 0.3 | 0.3 | 0.3 | 0.3 |
| Environmental Protection Specialist | 0.2 | 0.5 | 0.5 | 0.5 |
| Information Systems Staff | 0.4 | 0.0 | 0.0 | 0.0 |
| Medical Health Professional | 1.8 | 1.5 | 1.5 | 1.5 |
| Physical Scientist | 3.0 | 3.0 | 3.0 | 3.0 |
| Program Assistant | 0.1 | 0.0 | 0.0 | 0.0 |
| Public Health Medical Administrator | 0.4 | 0.0 | 0.0 | 0.0 |
| Staff / General Professional | 2.0 | 2.0 | 2.0 | 3.9 |
| Statistical Analyst | 0.9 | 0.5 | 0.5 | 0.5 |
| Technician | 1.0 | 0.5 | 0.5 | 0.5 |
| Total | 10.2 | 8.3 | 8.3 | 10.2 |

Staff recommends an appropriation of 1,441,163 federal funds and 10.2 FTE for this line item. The recommended appropriation reflects recent actual federal grant levels.

(D) Federal Grants

This line item reflects federal grants that do not fit elsewhere within the division's budget. Staffing levels for these federal grants are presented in the table below.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|-------------------------------------|----------------------------|-----------------------------|-----------------------------|--------------------------------|
| Accounting | 0.2 | 0.2 | 0.2 | 0.2 |
| Administrative Support Staff | 3.6 | 1.5 | 1.5 | 1.5 |
| Health Professionals | 11.4 | 10.5 | 10.5 | 20.1 |
| laboratory Technician | 1.1 | 2.0 | 2.0 | 2.0 |
| Information Technology | 1.7 | 0.0 | 0.0 | 0.0 |
| Nurse Consultant | 0.0 | 0.0 | 0.0 | 0.0 |
| Environmental Protection Specialist | 0.5 | 0.5 | 0.5 | 0.5 |
| Physical Scientist | 4.7 | 1.5 | 1.5 | 1.5 |
| Public Health Medical Administrator | 0.8 | 0.8 | 0.8 | 0.8 |

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|----------------------------|-----------------------------|-----------------------------|--------------------------------|
| Staff / General Professional | 6.1 | 3.5 | 3.5 | 3.5 |
| Total | 30.1 | 20.5 | 20.5 | 30.1 |

Staff recommends that the Long Bill reflect \$8,581,903 federal funds and 30.1 FTE for this line. The recommended appropriation reflects recent actual federal grant levels.

(9) PREVENTION SERVICES DIVISION

Subdivisions:

- (A) Prevention Programs
- (B) Women's Health - Family Planning
- (C) Primary Care Office
- (D) Prevention Partnerships
- (E) Family and Community Health
- (F) Nutrition Services
- (G) Federal Grants

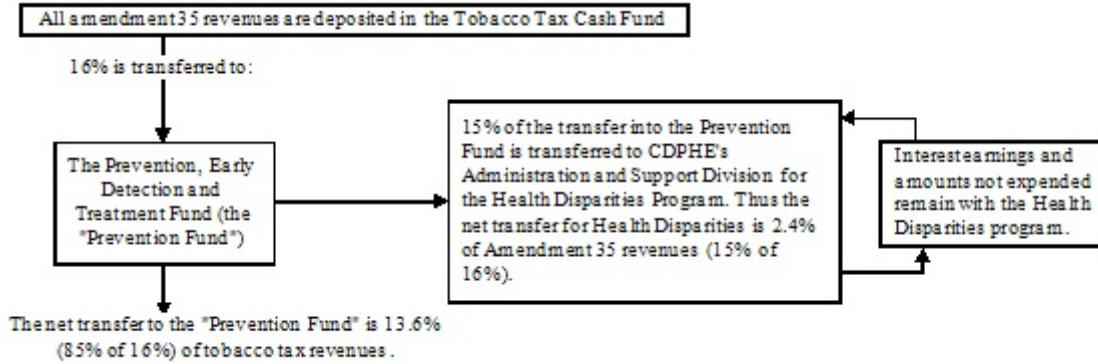
The Prevention Services Division oversees a wide range of health promotion and disease- and injury-prevention programs for children, youth, and adults.

Amendment 35 Funding for Cancer, Cardiovascular and Pulmonary Diseases

Amendment 35, Tobacco Taxes for Health Related Purposes, added Article X, Section 21 (5) (d) to the Colorado Constitution, which requires that 16 percent of the revenues raised by the Amendment's tobacco tax be appropriated to the Prevention Services Division for the prevention, early detection and treatment of cancer, cardiovascular disease and pulmonary disease. Appropriations of this "cancer-cardiovascular-pulmonary disease" (CCPD) revenue occur in several places in the Prevention Services Division and this portion of the figure setting presentation provides background for these appropriations.

Section 24-22-117 (2) (d), which implements this portion of Amendment 35, transfers 16 percent of Amendment 35's revenues to the Prevention Early Detection and Treatment Fund (the "Prevention" fund) and then requires that 15 percent of this 16 percent be transferred to the Health Disparities Grant Program Fund. The net result is that 13.6 percent (85 percent of 16 percent) of Amendment 35's total revenues are transferred to the Prevention Fund as shown in the following diagram:

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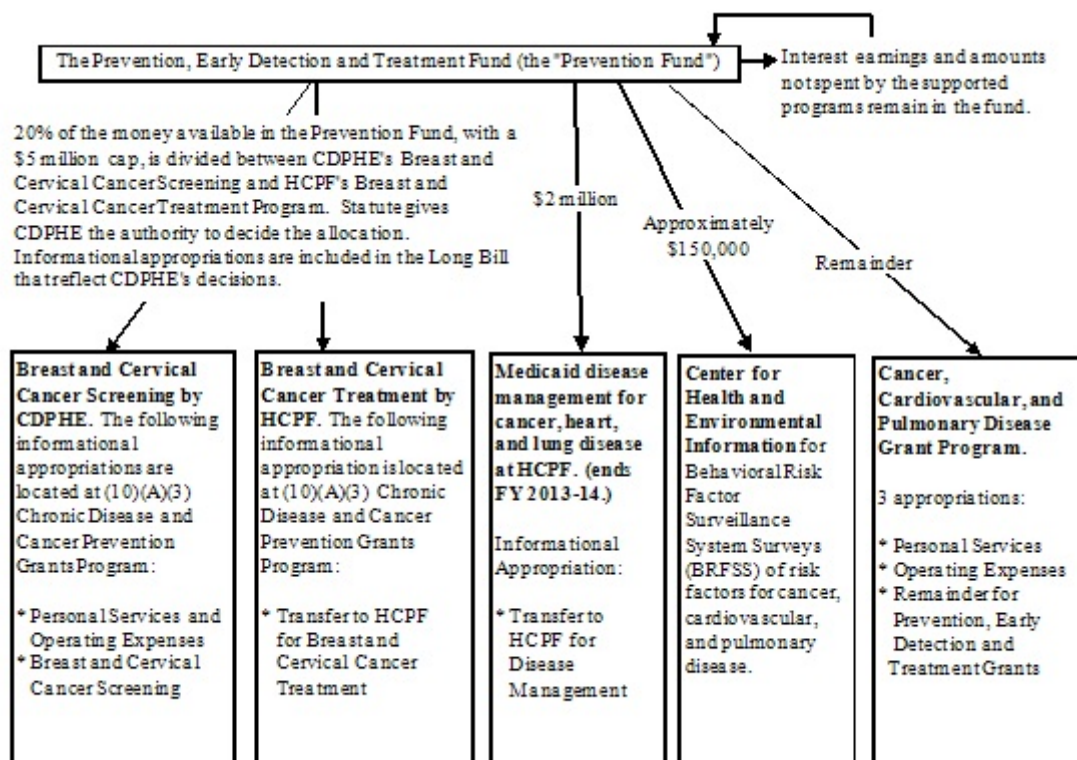


To comply with the constitutional requirement that all cancer-cardiovascular-pulmonary revenue be appropriated to the Prevention Services Division, the Long Bill contains several appropriations that initially appropriate the cancer-cardiovascular-pulmonary funds within the Prevention Services Division. Reappropriations of these moneys in other divisions of CDPHE and HCPF then route these funds to the supported programs. The first of these Prevention Services Division appropriations is the "Transfer to the Health Disparities Grant Program Fund," an appropriation equal to 2.4 percent of projected Amendment 35 revenues.

Recommended Transfer to the Health Disparities Grant Program Fund: Based on the December 2010 Legislative Council Staff forecast of Amendment 35 revenue, staff recommends that the Committee approve an appropriation of \$3,506,400 for the "Transfer to the Health Disparities Grant Program Fund" line item. (2.4 percent of projected Amendment 35 Revenue).

The following diagram shows the flow of the Amendment 35 dollars to the programs that are supported by the Prevention Fund after the transfer to Health Disparities:

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Observations on this diagram:

- Pursuant to Section 24-22-117 (2) (d) (II), C.R.S., CDPHE "allocates" 20 percent up to a maximum of \$5 million of the appropriation from the Prevention Fund and divides it between (1) Breast and Cervical Cancer Screenings, which are handled by CDPHE contractors, and (2) Early Detection and Treatment, which is handled by HCPF. Statute does not indicate the proportions to be spent on each. CDPHE decides how much to spend on personal services, operations, and screenings – there are no statutory guidelines or limits. Staff is not sure whether this grants CDPHE the authority to choose the level of FTE for the program. The amount transferred to HCPF for breast and cervical cancer treatment (as opposed to screening) is driven by the needs of the treatment program. The amount spent on screenings is basically a residual.

Statute is unclear concerning the base on which the 20 percent allocation should be calculated, in particular, it is unclear whether it should include the amount diverted to Health Disparities. For calculations in this document, staff assumes that it does.

- Though no appropriation is required, the Long Bill includes informational appropriations on the following lines that reflect CDPHE's allocation decisions:

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- (9) Prevention Services Division
 - (B) Women's Health - Family Planning
 - (1) Personal Services
 - (2) Operating Expenses
 - (3) Breast and Cervical Cancer Screening
 - (4) Transfer to the Department of Health Care Policy and Financing
for Breast and Cervical Cancer Treatment

The last of these appropriations is designed to satisfy the constitutional requirement that all cancer-cardiovascular-pulmonary revenue be appropriated to the Prevention Services Division.

- 3. The allocation for Cancer, Cardiovascular, and Pulmonary Disease Grants is a residual. This program receives the moneys that are not allocated to breast and cervical cancer screening and treatment or to disease management.

Two sets of Amendment 35 Recommendations: As was the case with the appropriations for Health Disparities, Staff must make two recommendations for these Amendment 35 programs. The "Long Bill Recommendation" will reflect current law and will be written into the FY 2011-12 Long Bill. If S.J.R. 11-009 or the Amendment 35 transfer bill fail to become law, this appropriation will determine spending during FY 2011-12. The "Transfer Bill Recommendation" will adjust appropriations by the amount need to pay for the Governor's requested transfers to HCPF. The decisions that the Committee makes regarding the transfer recommendation will be included in the appropriation clause of the transfer bill and will take effect if that bill become law. The numbers pages again show the recommendations under current law. The explanations for the recommendations are similar to those that were offered during the presentation of the Health Disparities recommendations.

Applying the December 2010 Legislative Council Staff forecast of Amendment 35 revenues yields the following allocation for grants:

| Item | Amount |
|--|-------------|
| Projected balance in the Prevention Fund (18N) at the start of FY 2011-12. (Includes estimates of FY 2010-11 revenue still to be received, lapsed spending authority from FY 2010-11, such as reversions from grantees, and the transfer for FY 2010-11 Medical Services Premiums) | \$1,608,205 |
| 13.6% of projected Amendment 35 revenue | 19,869,600 |
| + Interest earned during FY 2011-12 by the fund (zero thru FY 11-12 due to S.B. 09-270) | 0 |
| - \$2 million transfer to HCPF for disease management | (2,000,000) |

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| Item | Amount |
|---|-------------------|
| - Transfer to the Center for Health and Environmental Information for the Behavioral Risk Factor Surveillance System (BRFSS), including BRFSS POTS and Indirect Cost Assessments | (140,000) |
| - Allocation to Breast and Cervical Cancer Screening and Treatment (20% of amount available for appropriation in the Prevention Fund, not to exceed \$5.0 million) | (5,000,000) |
| = Total available to the Cancer, Cardiovascular, and Pulmonary Disease Grants Program. This amount will be divided among Personal Services, Operating Expenses, and Grants | 14,337,805 |

The appropriations associated with this table will be presented later.

Staff requests permission to update the Amendment 35 appropriations if the March Legislative Council Staff revenue forecast differs from the December forecast and it becomes available in time to revise the Long Bill before it is introduced. All of these appropriations are dictated by statute, so the updates are mechanical. **Staff will talk to the Committee if something unanticipated occurs.**

Staff proposes to update:

1. The transfer to the Health Disparities Program,
2. The transfers to HCPF,
3. The grant appropriation for the Health Disparities Grant Program,
4. The grant appropriation for the Cancer, Cardiovascular, and Chronic Pulmonary Disease Prevention, Early Detection and Treatment Program,
5. The grant appropriation for the Tobacco Education, Prevention, and Cessation Program, and
6. The appropriations for Immunizations Performed by County Public Health Nursing Services.

Supplementals for the Amendment 35 appropriations are unlikely. In 2006 the Committee decided that it would generally not "true up" appropriations during January supplementals in order to reflect the latest revenue forecast. An exception could occur if projected revenues were to slump sharply. In such a case, a negative supplemental would be required.

(A) Prevention Programs

(1) Programs and Administration

The Programs and Administration section provides general oversight for the prevention programs and also staffs and funds specific federal grant programs. The goal is to reduce disease and injuries through prevention and education.

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Personal Services. The following table presents the distribution of FTE within Programs and Administration.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Accounting | 1.0 | 1.0 | 1.0 | 1.0 |
| Public Health Administrator | 0.0 | 0.3 | 0.3 | 0.3 |
| Administrative Support Staff | 2.0 | 2.0 | 2.0 | 2.0 |
| Health Professional | 1.4 | 2.1 | 2.1 | 2.1 |
| Management | 0.5 | 0.5 | 0.5 | 0.5 |
| Staff / General Professional | 12.7 | 13.4 | 13.4 | 13.0 |
| Program Assistant | 3.3 | 2.7 | 2.7 | 2.7 |
| Statistical Analyst | 0.8 | 0.9 | 0.9 | 0.9 |
| Total | 21.7 | 22.9 | 22.9 | 22.5 |

Long Bill Appropriation: The Option 8 calculation yields the following recommendations:

| Personal Services | Total | GF | CF | RF | FF | FTE |
|--|------------------|----------------|----------------|----------|------------------|-------------|
| FY 2010-11 Appropriation | 1,677,139 | 117,295 | 643,403 | 0 | 916,441 | 22.9 |
| Reverse the reduction in H.B. 10-1381 (last year's Amendment 35 transfer bill) | 30,000 | 0 | 30,000 | 0 | 0 | 0.0 |
| Reverse 1% GF Personal Services Reduction | 1,185 | 1,185 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 34,718 | 1,075 | 12,775 | 0 | 20,868 | 0.0 |
| 1.5% base reduction | (26,146) | (1,793) | (10,293) | 0 | (14,060) | 0.0 |
| State PERA contribution down to 7.65% | (33,833) | (2,716) | (13,990) | 0 | (17,127) | 0.0 |
| Federal Funds Adjustment | 117,084 | 0 | 0 | 0 | 117,084 | (0.4) |
| FY 2011-12 Long Bill Recommendation | 1,800,147 | 115,046 | 661,895 | 0 | 1,023,206 | 22.5 |

Transfer Bill Appropriation: The Department requests and Staff recommends that the cash funds Personal Services appropriation in the transfer bill be reduced by \$80,000 and 1.5 FTE.

Operating Expenses. The following table shows the computation of the Operating Expenses recommendation:

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| Operating Expenses | Total | GF | CF | RF | FF |
|--|------------------|-----------|----------------|-----------|------------------|
| FY 2010-11 Appropriation | 1,007,239 | 0 | 58,440 | 0 | 948,799 |
| Reverse the reduction in H.B. 10-1381 | 60,000 | 0 | 60,000 | 0 | 0 |
| Federal Funds Adjustment | 117,466 | 0 | 0 | 0 | 117,466 |
| FY 2011-12 Recommendation | 1,184,705 | 0 | 118,440 | 0 | 1,066,265 |
| Requested reductions for the Transfer Bill | (50,000) | 0 | (50,000) | 0 | 0 |
| FY 2011-12 Transfer Bill recommendation | 1,134,705 | 0 | 68,440 | 0 | 1,066,265 |

The appropriation in the cash funds column of the above table is for operating expenses of the Prevention, Early Detection and Treatment Grants Program.

Cancer, Cardiovascular Disease, and Pulmonary Disease Grants (CCPD). These grants are authorized by Section 25-20.5-304, C.R.S. The amount available for grants is the residual after subtracting the appropriation for personal services and operating expenses, as computed in the following table. The appropriation is cash funds.

| CCPD Grants Computation | CF |
|--|--------------|
| Total available to the Cancer, Cardiovascular, and Pulmonary Disease Grants Program (CCPD, computed above) | \$14,337,805 |
| – Personal Services appropriation for the Grants Program (CF column of the above Personal Services table) plus any CF POTS allocated to the Personal Services Line Item | (661,895) |
| – Operating Expenses appropriation for the Grants Program (CF column of the above Operating Expenses table) | (118,440) |
| – Indirect Cost Assessment | (140,000) |
| – Transfer to the Center for Health and Environmental Information for the Behavioral Risk Factor Surveillance System (BRFSS), including BRFSS POTS and Indirect Cost Assessments | (140,000) |
| = Recommended Long Bill appropriation for grants | \$13,277,470 |

Staff recommends that the transfer bill reduce the CCPD Grants appropriation in the Long Bill by \$10,289,366, which will make the grants appropriation equal to \$2,778,104. Thus the proposed transfers to HCPF will reduce Cancer, Cardiovascular Disease, and Pulmonary Disease Grants by 78.7% relative to their level in the absence of transfers.

Five percent administrative expense limitation will be violated: Section 25-20.5-306, C.R.S., states that up to 5 percent of the moneys annually appropriated to the Prevention Services Division from the Prevention, Early Detection, and Treatment Fund may be used for administrative expenses.

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Since Personal Services plus Operating Expenses equal \$780,335, and $780,335 / (780,335 + 13,277,470 \text{ [grants]} + 2,000,000 \text{ [transfer to HCPF for disease management]} + 3,506,400 \text{ [transfer to Health Disparities]} + 4,877,000 \text{ [breast and cervical cancer screening and treatment]}) = 3.26\%$, as appropriated for the Long Bill the program is within this limitation. If the Amendment 35 transfer bill becomes law, the administrative expense percentage will equal $650,335 / (650,335 + 2,988,104 \text{ [grants]} + 2,000,000 \text{ [transfer to HCPF for disease management]} + 3,506,400 \text{ [transfer to Health Disparities]} + 3,252,000 \text{ [breast and cervical cancer screening and treatment]})$, which evaluates to 5.2%, slightly out of compliance.)

Staff recommends that the Committee insert a provision in the transfer bill that suspends the administrative expense limitation in Section 25-20.5-306, C.R.S., when fiscal emergency is in effect or reword the section so appropriations to other departments from the Prevention, Early Detection, and Treatment Fund are part of the denominator when the administrative expense percentage is calculated.

Transfer to the Health Disparities Cash Fund. As discussed earlier, Section 24-22-117 (d) (III) requires that 15 percent of the 16 percent of Amendment 35 revenues transferred to the Prevention Fund be transferred to the Health Disparities Grant Program Fund. **Staff recommends a \$3,506,400 cash funds appropriation.**

Transfer to the Department of Health Care Policy and Financing for Disease Management. Section 24-22-117 (d) (IV.5) requires a \$2 million transfer to HCPF from the Prevention Fund for Medicaid disease management programs that address cancer, heart disease and lung disease. This transfer continues until and including fiscal year 2012-13. **Staff recommends a \$2 million cash funds appropriation.**

Short Term Innovative Health Program Grants. Section 25-36-101, C.R.S., gives the Department the authority to make short term grants for innovative health programs ("Innovative" grants). These grants, which may be of no more than one fiscal year in duration, fund innovative health programs that are designed to improve the health of Coloradans. The Short-term Innovative Health Program Grant Fund (the "Innovative" Fund), which supports this program, receives 6 percent of Tier 2 tobacco settlement revenues plus the reversions and income of most other Tier 2 tobacco settlement programs. In addition, Section 22-24-115 (1) (b) requires that all unexpended and unencumbered moneys in the Tobacco Litigation Settlement Cash Fund, which is the main tobacco cash fund, be transferred to the Innovative Fund at the end of each year. The following table shows the end-of-year transfers into the Innovative Fund since the Innovative Grants program was established by S.B. 07-97. The transfers of unspent principal and interest from FY 2007-08 to FY 2009-10 total \$1,469,145.

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| Sources of transfers to the Innovative Fund. Source Department - Program | FY 07-08 transfer to Innovative Fund | Transfer as % of allocation to program | FY 08-09 transfer to Innovative Fund | Transfer as % of allocation to program | FY 09-10 transfer to Innovative Fund | Transfer as % of alloc. to program |
|--|--------------------------------------|--|--------------------------------------|--|--------------------------------------|------------------------------------|
| HED - University of Colorado, Health Sciences Center | \$18,830 | 0.2% | | | | |
| DHS - Offender Mental Health Services | 301,901 | 14.5% | \$55,575 | 1.3% | \$286,008 | 6.8% |
| DHS - Possibly Veterans Mental Health Services Pilot Program (established by S.B. 07-146)* | | | | | 112,281 | |
| DHS - Alcohol and Drug Abuse | 1,267 | 0.2% | 22,632 | 2.1% | 87,675 | 8.4% |
| HCPF - Medicaid shortfalls at Children's Hospital | 384 | 0.2% | 4,691 | 1.5% | | |
| HCPF - Children's Basic Health Plan | 368,792 | 1.6% | | | | |
| DPA - Supplemental State Contribution for Group Benefit Plans | 38,387 | 4.9% | | | | |
| CDPHE - Distributions to Local Public Health Agencies | 22,842 | 1.9% | 48,188 | 2.0% | | |
| CDPHE - Colorado Immunization Program | 17,303 | 2.5% | 82,388 | 5.6% | | |
| Total Transfers | \$769,706 | | \$213,474 | | \$485,964 | |

* This transfer came from a refund from a vendor for work performed more than a year earlier.

During the 2007 session the Innovative Fund served as a source of funding for several bills, including the Veterans Mental Health Services Pilot Program, which is listed in the above table. Only one of these programs continues to draw upon this fund source, the Health Professional Loan Repayment Program, which will receive \$90,070 from the Innovative Fund in FY 2011-12.

The Innovative Grant Program was slow getting started after it was established by S.B. 07-97; it did not hire the 1.0 FTE envisioned in the S.B. 07-97 fiscal note and it made few grants. The following table shows the history of the fund:

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| | FY 06-07 | FY 07-08 | FY 08-09 | FY 09-10 |
|---|-----------|-----------|-------------|-----------|
| Starting balance | 0 | 1,280,767 | 3,495,133 | 1,833,386 |
| Transfer in of tobacco-settlement revenue | 1,280,767 | 2,195,173 | 2,786,230 | 2,842,921 |
| Interest earned directly by Innovative Fund | 0 | 82,426 | 283,547 | 53,377 |
| Transfers in from other settlement programs, including interest they earned | 0 | 769,707 | 213,474 | 485,964 |
| Innovative Grant Program Expenditures - Includes transfers to programs supported by the Innovative Fund | 0 | (832,940) | (592,679) | (390,870) |
| Transfer to General Fund | 0 | 0 | (4,352,319) | 0 |
| Ending Balance | 1,280,767 | 3,495,133 | 1,833,386 | 4,824,778 |

History of transfers from the Innovative Fund to the General Fund:

- Senate Bill 09-208 (*Augment FY 2008-09 General Fund Revenues*, an omnibus transfer bill sponsored by the JBC) required the \$4,352,319 transfer to the General Fund listed in the above table.
- The table does not show a \$1,100,000 transfer to the General Fund in April 2009 from the Tobacco Litigation Settlement Cash Fund of moneys that would have otherwise been transferred to the Innovative Fund. This transfer was required by S.B. 09-269, a JBC bill.)
- Pursuant to H.B. 10-1323, another JBC bill, the end-of-FY 2010-11 balance of the Innovative Fund will be transferred to the General Fund on June 30, 2011 to support FY 2010-11 General Fund revenues. Staff estimates that this transfer will deposit \$6.5 million in the General Fund.

In the absence of additional transfers, the FY 2011-12 appropriation for Innovative Grants is then computed as follows:

| Item | Amount |
|--|------------------|
| FY 2011-12 tobacco settlement revenue allocation | 1,691,162 |
| + Fund balance carried forward into FY 2011-12 (The June 30 transfer to the General Fund in H.B. 10-1323 will leave nothing behind.) | 0 |
| + Interest earned directly by the innovative fund. Conservatively forecast to equal 0. | 0 |
| + Reversions and income of most other Tier 2 settlement programs and sweep unexpended moneys in the Tobacco Litigation Settlement Cash Fund. Conservatively forecast to equal 0. | 0 |
| - FY 2011-12 obligations of Innovative Fund resulting from 2007 session bills | (90,070) |
| = FY 2011-12 Possible Appropriation for Innovative Grants | 1,601,092 |

Zero Appropriation + Transfer Recommendation. Staff recommends that the Committee set the FY 2011-12 Long Bill appropriation for Innovative Grants equal to zero and sponsor legislation to

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transfer the balance in the Innovative Fund to the General Fund at the end of FY 2011-12 to support FY 2011-12 General Fund revenues.

Indirect Cost Assessment. The indirect cost assessment line item, which combines the assessments for all programs in the division, will be calculated after the Committee makes its final decisions on the Department's budget and is therefore shown as pending.

Recommended separate Long Bill presentation for the CCPD grant program. Appropriations for the Cancer, Cardiovascular and Pulmonary Disease Grant program are mixed with other appropriations in (9) Prevention Services Division, (A) Prevention Programs, (1) Programs and Administration. Staff recommends that the appropriations for this program be presented in a separate subdivision called "Cancer, Cardiovascular and Pulmonary Disease Grants," similar to the "Tobacco Education, Prevention, and Cessation" subdivision. This will make it easier for casual readers of the Long Bill to track the program's appropriations and its administrative expenditures. Staff further recommends that the personal services and operating expenses line items for the CCPD grant program be combined into a single "program" line item titled "Program Administration." Staff believes that the modest loss of detail from this consolidation will be more than offset by the additional flexibility consolidation provides, particularly during a time when program appropriations are declining.

(2) Cancer Registry

This line item supports a statewide central cancer registry, which provides population-based data on cancer treatment, incidence, death, and survival. Currently, there are 18,000 new cancer patients every year in Colorado. The Department continues to receive a federal grant from the National Program for Cancer Registries, to be used specifically to enhance and improve the quality of statewide cancer data, increase the timeliness of reporting and processing of cancer-related data, and to encourage the use of data by researchers in reporting cancer incidence rates and trends to the public. The General Fund in this line item is used to meet the maintenance of effort requirement that enables the program to qualify for the federal grants.

Personal Services. The staffing mix is summarized in the following table.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Staff / General Professional | 9.6 | 9.2 | 9.2 | 9.5 |
| Statistical Analyst | 0.8 | 1.0 | 1.0 | 1.0 |
| Total | 10.4 | 10.2 | 10.2 | 10.5 |

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The following table presents the Option 8 computations and the Staff recommendation.

| Personal Services | Total | GF | CF | RF | FF | FTE |
|---|----------------|----------------|-----------|-----------|----------------|-------------|
| FY 2010-11 Appropriation | 781,801 | 188,483 | 0 | 0 | 593,318 | 10.2 |
| Reverse 1% GF Personal Services Reduction | 1,904 | 1,904 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 17,488 | 4,490 | 0 | 0 | 12,998 | 0.0 |
| 1.5% base reduction | (12,018) | (2,923) | 0 | 0 | (9,095) | 0.0 |
| State PERA contribution down to 7.65% | (15,436) | (3,310) | 0 | 0 | (12,126) | 0.0 |
| Federal Funds Adjustment | 49,130 | 0 | 0 | 0 | 49,130 | 0.3 |
| FY 2011-12 Recommendation | 822,869 | 188,644 | 0 | 0 | 634,225 | 10.5 |
| FY 2011-12 Request | 781,859 | 187,669 | 0 | 0 | 594,190 | 10.2 |
| Recommendation - Request | 41,010 | 975 | 0 | 0 | 40,035 | 0.3 |

Operating Expenses. The following table details the operating expense calculations:

| Operating Expenses | Total | GF | CF | RF | FF |
|----------------------------------|---------------|---------------|-----------|-----------|---------------|
| FY 2010-11 Appropriation | 90,557 | 30,552 | 0 | 0 | 60,005 |
| Federal Funds Adjustment | (36,323) | 0 | 0 | 0 | (36,323) |
| FY 2011-12 Recommendation | 54,234 | 30,552 | 0 | 0 | 23,682 |
| FY 2011-12 Request | 90,557 | 30,552 | 0 | 0 | 60,005 |
| Recommendation - Request | (36,323) | 0 | 0 | 0 | (36,323) |

Recommended line item consolidation item: Staff recommends that the personal services and operating expenses line items for the Cancer Registry be combined into a single "program" line item titled "Cancer Registry." Staff believes that the modest loss of detail in the Long Bill would be more that offset by the additional flexibility consolidation would provide to the program. If operating expenses detail is needed at some point in the future, perhaps for personal services base reduction calculation, it could be readily obtained by asking the Department to provide it.

(3) Chronic Disease and Cancer Prevention Grants Program

This program, which receives federal grants, focuses on the six most common forms of cancer: breast, cervical, colon, lung, prostate, and skin. The line encompasses grants from the Centers for Disease Control and Prevention for Asthma, Cancer, Diabetes, Obesity, Arthritis and Heart Disease prevention, as well as Physical Activity and Healthy Aging promotion. Chronic disease prevention programs implement activities following CDC guidance. Each program has developed a statewide

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strategic plan, a burden of disease report, and partners with coalitions or advisory groups to extend the reach of the programs statewide.

Staffing levels are shown in the following table.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Accounting | 0.1 | 0.1 | 0.1 | 0.1 |
| Public Health Administrator | 0.0 | 0.3 | 0.3 | 0.3 |
| Administrative Support Staff | 4.4 | 4.2 | 4.2 | 4.2 |
| Health Professional | 3.1 | 3.2 | 3.2 | 3.2 |
| Management | 0.9 | 1.0 | 1.0 | 1.0 |
| Staff / General Professional | 20.0 | 17.2 | 17.2 | 17.3 |
| Statistical Analyst | 0.1 | 1.5 | 1.5 | 1.5 |
| Total | 28.6 | 27.5 | 27.5 | 27.6 |

The option 8 calculation and the resulting recommendation is as follows:

| | Total | GF | CF | RF | FF | FTE |
|--|------------------|----------|----------------|----------|------------------|-------------|
| FY 2010-11 Appropriation | 4,502,866 | 0 | 124,689 | 0 | 4,378,177 | 27.5 |
| State PERA contribution back to 10.15% | 35,879 | 0 | 2,806 | 0 | 33,073 | 0.0 |
| 1.5% base reduction | (52,139) | 0 | (1,912) | 0 | (50,227) | 0.0 |
| State PERA contribution down to 7.65% | (48,267) | 0 | (6,239) | 0 | (42,028) | 0.0 |
| Federal Funds Adjustment | (212,480) | 0 | 0 | 0 | (212,480) | 0.1 |
| FY 2011-12 Recommendation | 4,225,859 | 0 | 119,344 | 0 | 4,106,515 | 27.6 |
| FY 2011-12 Request | 4,490,478 | 0 | 121,256 | 0 | 4,369,222 | 27.5 |
| Recommendation - Request | (264,619) | 0 | (1,912) | 0 | (262,707) | 0.1 |

The Colorado Women's Cancer Control Initiative (CWCCI) funded by the Centers for Disease Control and Prevention (CDC) provides free breast and cervical cancer screening and diagnostic services to low income (less than 250 percent of the federal poverty level) women age 40 and older at over 100 sites statewide through contracts with 44 local health and community agencies. The services are provided at no cost to the client. A minimum of 75 percent of the mammograms are provided to women age 50-64 years. Local community coordinators, coalition volunteers, and outreach workers provide education to women statewide about the importance of regular screening

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and early detection of breast and cervical cancer. The program also conducts education and recruitment activities for eligible health professionals.

The passage of Amendment 35 substantially boosted the breast and cervical cancer screening program. Prior to Amendment 35, the Department spent about \$4.1 million of federal funds on screening. Amendment 35 moneys almost doubled that amount.

Note that there are two parts to the state's breast and cervical cancer programs. The first is this screening program, run by CDPHE. The second is the Breast and Cervical Cancer treatment program run by HCPF, to which qualifying women are directed if they are found to have cancer.

The cash funds are transferred from the Prevention Fund. As noted earlier, statute gives the Department the authority to determine the amount of Amendment 35 tobacco tax moneys expended on cervical cancer screening, so the amount transferred from the Prevention, Early Detection, and Treatment Fund Expenditures line is included for informational purposes. Since 2.0 FTE are supported with Amendment 35 tobacco tax moneys, these FTE are also included for informational purposes.

Transfer to the Department of Health Care Policy and Financing for Breast and Cervical Cancer Treatment. CDPHE in consultation with HCPF determines the amount of this transfer, based on the needs of HCPF's Breast and Cervical Cancer treatment program. CDPHE plans to transfer \$1,215,340, a continuation appropriation. **Staff recommends a corresponding informational appropriation of \$1,215,340 cash funds (Amendment 35 dollars) for this line item.**

Breast and Cervical Cancer Screening. **Staff recommends an informational Long Bill appropriation for this line item of \$6,955,836, comprised of \$3,661,660 cash funds (Amendment 35 dollars) and \$3,294,176 federal funds.** This recommendation includes a positive \$607,745 federal funds adjustment.

Appropriation for the Amendment 35 transfer bill: the Department requests and Staff recommends that the transfer bill reduce Long Bill appropriations for Breast and Cervical Cancer Screening by \$1,625,000, which represents a 44% reduction in the amount of Amendment 35 revenue spent on screening.

Staff further recommends that the Committee use this bill, to the extent allowed by the bill's title, to clarify the statutory provisions relating to this expenditure. Specifically, the bill should clarify that the General Assembly controls this expenditure and the related transfer to HCPF for breast and cervical cancer treatment via the annual appropriation process. The bill should also clarify the base

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on which the 20 percent allocation for breast and cervical cancer screening and treatment is to be calculated.

This concludes the presentation of line items that receive funding from the Prevention, Early Detection and Treatment Fund. The following table summarizes the effect of the proposed transfer bill on programs supported by the fund:

| | Amendment 35 funding before transfer bill | Recommended reduction in transfer bill | Amendment 35 funding after transfer bill | Percentage Reduction |
|--|---|--|--|-------------------------|
| Cancer, Cardiovascular and Pulmonary Disease Grant Program: | | | | |
| Personal Services | 661,895 | (80,000) | 581,895 | -12.1% |
| FTE | 10.0 | (1.5) | 8.5 | -15.0% |
| Operating Expenses | 118,440 | (50,000) | 68,440 | -42.2% |
| Grants | 13,277,470 | (10,289,366) | 2,988,104 | -77.5% |
| Other Supported Programs: | | | | |
| Transfer to HCPF for Disease Management | 2,000,000 | 0 | 2,000,000 | 0.0% |
| Transfer to HCPF for Breast and Cervical Cancer Treatment | 1,215,340 | 0 | 1,215,340 | 0.0% |
| Breast and Cervical Cancer Screening | 3,661,660 | (1,625,000) | 2,036,660 | -44.4% |
| Total | 20,934,815 | (12,044,368) | 8,890,448 | -57.5% |

In FY 2009-10, almost 17,000 women were screened by the Breast and Cervical Cancer Screening program. With this reduction in funding, 5,100 women would not receive services. The Department estimates that 85 cases of cancer might go undetected as a result of this reduction.

(4) Suicide Prevention

Colorado has one of the highest per capita suicide rates in the nation, ranking sixth in 2007, behind five other western states, with a suicide rate two and a half times higher than the rates in New York and New Jersey, the two lowest states. In 2009, a record 940 Colorado citizens took their own lives. In a typical year there are more Colorado suicides than deaths from pneumonia, motor vehicle crashes, or breast cancer. House Bill 00-1432 created a suicide prevention program within the Department (Section 25-1.5-101 (1) (w), C.R.S.), charging it to act as coordinator for suicide prevention programs throughout the state. This program has worked cooperatively with other groups, such as the Suicide Prevention Coalition of Colorado, to implement awareness campaigns and otherwise combat suicide. There are three main components to the program: a statewide public information campaign, training on the recognition and response to suicide, and development of local suicide prevention and education services.

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Staffing levels for this program are summarized in the table below.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Staff / General Professional | 2.1 | 2.0 | 2.0 | 2.0 |
| Total | 2.1 | 2.0 | 2.0 | 2.0 |

The corresponding Option 8 calculation is as follows.

| | Total | GF | CF | RF | FF | FTE |
|---|----------------|----------------|----------|----------|----------|------------|
| FY 2010-11 Appropriation | 283,843 | 283,843 | 0 | 0 | 0 | 2.0 |
| Reverse 1% GF Personal Services Reduction | 1,748 | 1,748 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 2,286 | 2,286 | 0 | 0 | 0 | 0.0 |
| 1.5% base reduction | (2,228) | (2,228) | 0 | 0 | 0 | 0.0 |
| State PERA contribution down to 7.65% | (2,734) | (2,734) | 0 | 0 | 0 | 0.0 |
| FY 2011-12 Recommendation | 282,915 | 282,915 | 0 | 0 | 0 | 2.0 |
| FY 2011-12 Request | 281,601 | 281,601 | 0 | 0 | 0 | 2.0 |
| Recommendation - Request | 1,314 | 1,314 | 0 | 0 | 0 | 0.0 |

(5) Tobacco Education, Prevention, and Cessation

This program began in 2000, when the state received its first tobacco settlement payments and was, until 2005, funded by those payments. The program's goals are to reduce initiation of tobacco use by children and youth, promote cessation among youth and adults who already use tobacco, and reduce exposure to second-hand smoke. The program awards grants to school and community-based and statewide tobacco education programs that promote these goals. Within the tobacco control community, the program is commonly referred to as STEPP, which stands for State Tobacco Education, Prevention, and Cessation Program

The funding source for the STEPP program changed following voter approval of Amendment 35. The amendment directed 16 percent of revenues from its tobacco tax to a tobacco education and prevention grant program. House Bill 05-1261 ended tobacco settlement support for this program. Working within the structure prescribed by Amendment 35, H.B. 05-1262 directed 16 percent of the Amendment 35's revenues into the new Tobacco Education Programs Fund and laid out the following distribution rules:

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Transfer: 16% of total Amendment 35 tobacco tax revenues are transferred by the Treasurer to the Tobacco Education Programs Fund (Section 24-22-117 (2) (c), C.R.S.).

Credit: An amount equal to the interest earned on this fund may be used to reimburse tobacco wholesalers and distributors for tobacco tax they pay on bad-debt sales, i.e. on credit sales which they must write off because the buyer never pays. However, the Department of Revenue is not using this provision; it is giving credit in another fashion.

Appropriation: The entire amount of money projected to be available in this fund, including any carryforward from the prior year and any interest earnings in the current year, after subtracting the credit, is appropriated by the General Assembly each year as follows (Section 24-22-117 (2) (d) (I), C.R.S.).

(1) Up to \$350,000 is appropriated to the Department of Revenue to enforce tobacco-sales-to-minors laws.

(2) The remainder is appropriated to the Prevention Services Division for tobacco education, prevention, and cessation programs. This amount is divided between personal services of program employees, operating expenses, and grants.

Any amounts that are appropriated under the above rules but remain unexpended and unencumbered at the end of a fiscal year remain with the program and are appropriated the next year.

Personal Services. This line item supports the personal services costs associated with administering the tobacco education program. The following table shows the distribution of FTE.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Administrative Support Staff | 2.3 | 1.2 | 1.2 | 1.2 |
| Management | 0.1 | 0.2 | 0.2 | 0.2 |
| Statistical Analyst | 1.1 | 1.0 | 1.0 | 1.0 |
| Staff / General Professional | 3.0 | 7.6 | 7.6 | 7.6 |
| Total | 6.5 | 10.0 | 10.0 | 10.0 |

The next table shows the corresponding Option 8 computation and the related Long Bill recommendation.

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| Personal Services | Total | GF | CF | RF | FF | FTE |
|--|----------------|-----------|----------------|-----------|-----------|-------------|
| FY 2010-11 Appropriation | 702,970 | 0 | 702,970 | 0 | 0 | 10.0 |
| Reverse the reduction in H.B. 10-1381 (last year's Amendment 35 transfer bill) | 35,000 | 0 | 35,000 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 13,303 | 0 | 13,303 | 0 | 0 | 0.0 |
| 1.5% base reduction | (11,269) | 0 | (11,269) | 0 | 0 | 0.0 |
| State PERA contribution down to 7.65% | (9,831) | 0 | (9,831) | 0 | 0 | 0.0 |
| FY 2011-12 Long Bill Recommendation | 730,173 | 0 | 730,173 | 0 | 0 | 10.0 |

FY 2011-12 Transfer Bill Recommendation: The Department requests and Staff recommends that the Amendment 35 Transfer bill reduce the cash funds appropriation for Personal Services by \$120,000 and 1.5 FTE.

Operating Expenses. The following table shows the computation of the Operating Expenses recommendation:

| Operating Expenses | Total | GF | CF | RF | FF |
|--|----------------|-----------|----------------|-----------|-----------|
| FY 2010-11 Appropriation | 100,000 | 0 | 100,000 | 0 | 0 |
| Reverse the reduction in H.B. 10-1381 | 75,000 | 0 | 75,000 | 0 | 0 |
| FY 2011-12 Recommendation | 175,000 | 0 | 175,000 | 0 | 0 |
| Requested reductions for the transfer bill | (100,000) | 0 | (100,000) | 0 | 0 |
| FY 2011-12 transfer bill recommendation | 75,000 | 0 | 75,000 | 0 | 0 |

Recommended line item consolidation item: Staff recommends that the personal services and operating expenses line items for the Tobacco Education, Prevention, and Cessation be combined into a single "program" line item titled "Program Administration." Staff believes that the modest loss of detail in the Long Bill would be more that offset by the additional flexibility consolidation would provide to the program, especially during a period when the program is being forced to contract substantially.

Tobacco Education, Prevention, and Cessation Grants. This line item is the heart of the STEPP program; it provides grants to governmental and non-governmental organizations to promote smoking cessation and prevention. Section 25-3.5-805, C.R.S. requires that at least 15 percent of these grants be for the reduction of health disparities among minority and high risk populations and up to 15 percent of the grants go to Tony Grampsas Youth Services Program grantees. The health disparities and Tony Grampsas grants, like all of the other Tobacco Cessation and Prevention grants are made

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by the Tobacco Education, Prevention, and Cessation Review Committee, not by the Tony Grampsas program or by the Health Disparities program.

Section 24-22-117 (1) (c) requires that the General Assembly appropriate all of the moneys in the Tobacco Education Programs Fund each year. This means that all the Tobacco Education Programs Fund moneys not appropriated for personal services or operating expenses, or appropriated to the Department of Revenue, must be appropriated for grants. Thus one must forecast (1) the balance that will exist in the fund at the beginning of the next fiscal year, (2) the revenue that the fund will receive during the next fiscal year, including interest earnings, (3) the amount that will be appropriated to the Department of Revenue, and (4) the amount that will be appropriated for operating expenses and personal services in the Tobacco Education, Prevention, and Cessation program. As a practical matter, these forecasts will invariably prove inaccurate, and the amount appropriated will not exactly equal the amount available. (One might think that at least elements (3) and (4) of this calculation could be forecast exactly, but the potted central appropriations in the Executive Director's Offices of the Department of Revenue and in the Administration Division of CDPHE draw from the Tobacco Education Programs Fund, and these amounts are difficult to forecast exactly. For practical reasons, these central appropriations are assumed to be zero in the computations below. And, in passing, one might note that this problem applies to many other tobacco-settlement and Amendment 35 appropriations in the Department.) Applied to FY 2011-12, this yields the following:

| Tobacco Cessation and Prevention Grants | CF |
|--|------------|
| Projected balance in the Tobacco Education and Prevention Fund (18M) at start of FY 2011-12. (Includes estimates of FY 2010-11 revenue still to be received, lapsed spending authority from FY 2010-11, such as reversions from grantees, and the FY 2010-11 transfer for Medical Services Premiums) | 1,167,266 |
| + Forecast of Amendment 35 tobacco tax revenue that the Tobacco Education and Prevention Fund will receive during FY 2011-12 (based on the December 2010 Legislative Council Staff Revenue forecast) | 23,376,000 |
| + Forecast of interest earned during FY 2011-12 by the fund (zero thru FY 11-12 due to S.B. 09-270) | 0 |
| - Appropriation to Department of Revenue's Enforcement Business Group to enforce tobacco-sales-to-minors laws.* | (350,000) |
| - Personal Services appropriation, computed above | (730,173) |
| - Operating Expenses appropriation, computed above | (75,000) |
| - Allocation of POTS to the STEPP Personal Services Line Item (based on recent actuals) | 0 |
| - Indirect Cost Assessment | (41,035) |
| - Transfer to the Center for Health and Environmental Information for the Behavioral Risk Factor Surveillance System (BRFSS), including BRFSS POTS and Indirect Cost Assessments | (140,000) |
| = Recommended FY 2011-12 Long Bill appropriation for Tobacco Cessation and Prevention Grants | 23,207,058 |

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*This appropriation, which appears in the Department of Revenue's Enforcement Business Group, is established during figure setting for the Department of Revenue, but has equaled \$350,000 since the inception of this program.

Staff recommends that the transfer bill reduce the Tobacco Cessation and Prevention Grants appropriation in the Long Bill by \$17,660,700, which will make the grants appropriation equal to \$5,546,358. Thus the proposed transfers to HCPF will reduce Tobacco Cessation and Prevention Grants by 76.1 percent relative to their level in the absence of transfers.

The following table summarizes the impact of the Tobacco Education, Prevention, and Cessation reductions that would be contained in the transfer bill.

| | Amendment 35 funding before transfer bill | Recommended reduction in transfer bill | Amendment 35 funding after transfer bill | Percentage Reduction |
|--|---|--|--|-------------------------|
| Personal Services | 730,173 | (120,000) | 610,173 | -16.4% |
| FTE | 10.0 | (1.5) | 8.5 | -15.0% |
| Operating Expenses | 175,000 | (40,175) | 134,825 | -23.0% |
| Tobacco Education, Prevention, and Cessation Grants | 23,207,058 | (17,660,700) | 5,546,358 | -76.1% |
| Total | 24,112,231 | (17,820,875) | 6,291,356 | -73.9% |

Staff requests permission to update the Tobacco Cessation and Prevention Grant appropriation when the March forecast becomes available and when the appropriation to the Department of Revenue's Enforcement Business Group has been established.

Five percent administrative expense limit will be violated: Section 25-3.5-808, C.R.S., states that up to 5 percent of the moneys annually appropriated from the Tobacco Education Programs Fund (which would include appropriations for Medical Services Premiums) may be utilized for administrative expenses of the Tobacco Education, Prevention, and Cessation Program. With the recommended Long Bill appropriation, this ratio equals 3.8 percent. With the recommended transfer bill appropriations the ratio equals 11.8 percent, which is well outside the limitation.

(6) Oral Health Programs

This office focuses on increasing the availability of oral health services. The office operates the Dental Loan Repayment Program, which is available to dentists and dental hygienists who agree to serve medically underserved populations in rural or urban settings. Dentists are eligible for up to \$25,000 and dental hygienists are eligible for up to \$6,000. The Repayment Program is supported

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with an annual appropriation of \$200,000 from the state's tobacco settlement receipts. Each provider in the program serves a two-year term, treating an average of 1,397 under-served Coloradans annually. The office also helps fund the "Dental Housecalls" program, run by the Colorado Foundation of Dentistry for the Handicapped, a program that provides dental services to homebound elderly and handicapped. The office's staff are responsible for collection and analysis of dental health data and the monitoring and coordination of dental care. The funding source is a combination of General Fund, tobacco-settlement money, and federal funds.

The following table presents the distribution of FTE within the program.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Administrative Support Staff | 0.0 | 0.3 | 0.3 | 0.3 |
| Health Professional | 2.1 | 1.0 | 1.0 | 1.0 |
| Management | 0.1 | 0.1 | 0.1 | 0.1 |
| Staff / General Professional | 2.7 | 1.6 | 1.6 | 3.4 |
| Total | 4.9 | 3.0 | 3.0 | 4.8 |

The next table, which uses the Option 8 common policy approved by the Committee, summarizes staff's calculation of the recommendation.

| | Total | GF | CF | RF | FF | FTE |
|--|------------------|----------------|----------------|----------|----------------|------------|
| FY 2010-11 Appropriation | 861,784 | 179,764 | 224,667 | 0 | 457,353 | 3.0 |
| Reverse Dental Loan Supplemental, which provided \$25,000 of extra spending authority for FY 2010-11 to correct an accounting error. | (25,000) | 0 | (25,000) | 0 | 0 | 0.0 |
| Provide extra FY 2011-12 spending authority to spend available Dental-loan fund balance | 3,225 | 0 | 3,225 | 0 | 0 | 0.0 |
| Reverse 1% GF Personal Services Reduction | 690 | 690 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 10,217 | 1,371 | 333 | 0 | 8,513 | 0.0 |
| 1.5% base reduction (Reduction not recommended for Dental Loan program because the reduction would cut grants.) | (5,177) | (1,055) | 0 | 0 | (4,122) | 0.0 |
| State PERA contribution down to 7.65% | (8,334) | (1,404) | (316) | 0 | (6,614) | 0.0 |
| Federal Funds Adjustment | 371,242 | 0 | 0 | 0 | 371,242 | 1.8 |
| FY 2011-12 Recommendation | 1,208,647 | 179,366 | 202,909 | 0 | 826,372 | 4.8 |
| FY 2011-12 Request | 837,950 | 179,014 | 199,684 | 0 | 459,252 | 3.0 |

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| | Total | GF | CF | RF | FF | FTE |
|--------------------------|---------|-----|-------|----|---------|-----|
| Recommendation - Request | 370,697 | 352 | 3,225 | 0 | 367,120 | 1.8 |

(B) Women's Health - Family Planning

Women's Health - Family Planning is comprised of the following programs:

The Family Planning Program, which provides a range of preventive health services including physical examinations, contraceptive supplies, pregnancy testing, counseling, patient education, voluntary sterilization, and screening for sexually transmitted infections, basic infertility services and referrals to other health and social services. The services are available to clients who are at or below 185 percent of the federal poverty level. The program is funded with General Fund and federal Title X funds that pay for contracts with local family planning providers. Often, local health facilities and non-profit clinics serve as the primary health care facility for low income women who are not Medicaid-eligible. The program serves approximately 55,000 clients per year, primarily women and teens. Neither Title X nor General Fund dollars support abortion activities, per federal Title X requirements and per state statute. Note that Title X is not an entitlement program, and has no associated match or maintenance of effort requirements; it does, however, require a cost share from the state.

The Prenatal Program, which encourages early prenatal care to reduce the risk of maternal and newborn illness or complications. The goal of the Prenatal Plus Program is to improve the health of high risk, Medicaid-eligible pregnant women (with incomes at 133 percent or less of the federal poverty level) to assure healthy birth outcomes and decrease the incidence of low weight births by assuring access to early and appropriate prenatal services, promoting healthy behavior and risk reduction during pregnancy, and facilitating postpartum access to family planning services.

Prenatal Plus is designed to complement the medical component of prenatal care by providing comprehensive risk assessments, case management, home visits, nutrition consultation, and psycho social counseling to high risk, Medicaid-eligible pregnant women.

Decision Item #3. Prenatal Plus Administration Transfer. Both the Department of Public Health and Environment and the Department of Health Care Policy and Financing request that most of the Prenatal Plus Program, which is Medicaid funded, be transferred from CDPHE to HCPF. This program, which targets pregnant women who are at risk of delivering low-birth-weight infants, costs \$119,000 annually to operate, with half of this cost tracing to the General Fund and half tracing to federal funds. On average, about 2,000 women participate in the program each year. Approximately \$6,000 of program costs would remain in CDPHE for vital-records work and the remainder would

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be transferred to HCPF. CDPHE and HCPF both state that HCPF can administer the program more effectively. HCPF states that the program would have to be scaled back or possibly discontinued if a cost-effective alternative to CDPHE administration cannot be found. The overall savings to the state budget would equal \$1,502. The impact on CDPHE would be spread across nine line items with approximately 75 percent of the changes (as measured in dollars) occurring in Women's Health - Family Planning. Since this is a Medicaid program, all of the appropriations within CDPHE take the form of reappropriated funds transferred from HCPF.

HCPF states that CDPHE has followed a model of direct oversight and close supervision of Prenatal Plus providers. This supervision model is costly and is straining the limits of the available funding. The two departments believe that HCPF can effectively administer the program at lower cost by using less direct supervision. HCPF manages most of its Medicaid programs through online instructions and by providing advice through telephone calls with the providers as needed. Close supervision is used by HCPF only when serious problems arise. HCPF states that this has worked well for its other Medicaid programs.

This staff member and the HCPF analyst both recommend that this program be transferred from CDPHE to HCPF.

Personal Services. This line item finances the personal services costs associated with the Women's Health program. The FTE distribution is summarized in the following table.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|-----------------|------------------|------------------|---------------------|
| Administrative Support Staff | 0.8 | 1.0 | 1.0 | 1.0 |
| Health Professional | 2.8 | 3.4 | 2.5 | 2.5 |
| Information Systems Staff | 1.6 | 0.0 | 0.0 | 0.0 |
| Management | 0.2 | 0.5 | 0.5 | 0.5 |
| Staff / General Professional | 7.2 | 8.0 | 8.0 | 7.6 |
| Statistical Analyst | 0.0 | 1.0 | 1.0 | 1.0 |
| Total | 12.6 | 13.9 | 13.0 | 12.6 |

The following table summarizes staff's Option 8 computation and the related recommendation.

| Personal Services | Total | GF | CF | RF | FF | FTE |
|---|-----------|---------|----|--------|---------|------|
| FY 2010-11 Appropriation | 1,180,566 | 388,768 | 0 | 58,577 | 733,221 | 13.9 |
| Reverse 1% GF Personal Services Reduction | 4,519 | 3,927 | 0 | 592 | 0 | 0.0 |

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| Personal Services | Total | GF | CF | RF | FF | FTE |
|---|------------------|----------------|-----------|--------------|----------------|-------------|
| State PERA contribution back to 10.15% | 20,454 | 7,742 | 0 | 0 | 12,712 | 0.0 |
| Decision Item #3. Prenatal Plus Administration Transfer | (57,634) | 0 | 0 | (57,634) | 0 | (0.9) |
| 1.5% base reduction | (17,219) | (6,007) | 0 | (23) | (11,189) | 0.0 |
| State PERA contribution down to 7.65% | (21,804) | (8,862) | 0 | (352) | (12,590) | 0.0 |
| Federal Funds Adjustment | (26,486) | 0 | 0 | 0 | (26,486) | (0.4) |
| FY 2011-12 Recommendation | 1,082,396 | 385,568 | 0 | 1,160 | 695,668 | 12.6 |
| FY 2011-12 Request | 1,116,909 | 383,566 | 0 | 0 | 733,343 | 13.0 |
| Recommendation - Request | (34,513) | 2,002 | 0 | 1,160 | (37,675) | (0.4) |

The reappropriated funds are Medicaid Reappropriated Funds transferred from the Department of Health Care Policy and Financing, where they are appropriated on the Enhanced Prenatal Care Training and Technical Assistance line item in the Other Medical Services Division. They are comprised of 50 percent General Fund and 50 percent federal funds.

Operating Expenses. Staff recommends approval of the Department's request of \$3,355 General Fund for this line item, a continuation appropriation.

Recommended line item consolidation item: Staff recommends that the Personal Services line item and the Operating Expenses line item in Women's Health - Family Planning be combined into a single "program" line item titled "Program Administration." Staff believes that the modest loss of detail in the Long Bill would be more that offset by the additional flexibility consolidation would provide.

Purchase of Services. The following table summarizes the staff recommendation:

| Purchase of Services | Total | GF | CF | RF | FF |
|---|------------------|------------------|-----------|-----------|------------------|
| FY 2010-11 Appropriation | 4,579,716 | 1,229,003 | 0 | 25,505 | 3,325,208 |
| Decision Item #3. Prenatal Plus Administration Transfer | (25,505) | 0 | 0 | (25,505) | 0 |
| Federal Funds Adjustment | 240,542 | 0 | 0 | 0 | 240,542 |
| FY 2011-12 Recommendation | 4,794,753 | 1,229,003 | 0 | 0 | 3,565,750 |
| FY 2011-12 Request | 4,554,211 | 1,229,003 | 0 | 0 | 3,325,208 |
| Recommendation - Request | 240,542 | 0 | 0 | 0 | 240,542 |

Adult Stem Cells Cure Fund. Staff recommends a continuation appropriation of \$140,000 cash funds. House Bill 08-1372 (Adult Stem Cell Donation Awareness) created a new voluntary income

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tax checkoff as a funding mechanism for the Adult Stem Cells Cure Fund, which provides money for advancing umbilical cord blood collection for public blood banks. (Note that adult stem cells are obtained from tissues that have already undergone some degree of development, thus stem cells obtained from umbilical cord blood are classified as "adult" stem cells even though they come from newborns.) Donated stem cells are used for treatment of diseases such as leukemia and lymphoma, and for research into cures for other serious illnesses. The tax checkoff was added to the state income tax form for tax years 2008 through 2010. At least 70 percent of moneys in the Adult Stem Cells Cure Fund must be used to advance cord blood collection, up to 25 percent can be used for public awareness activities, and 5 percent for administrative costs. The Department contracts with entities that are already involved in umbilical cord blood donation activities.

Federal Grants. This line reflects federal grants that do not fit elsewhere within the Women's Health - Family Planning budget. Staffing levels for these federal grants are summarized in the table below.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|----------------------------------|--------------------|---------------------|---------------------|------------------------|
| Health Professional | 2.1 | 2.1 | 2.1 | 2.1 |
| Information Systems Professional | 0.2 | 0.0 | 0.0 | 0.0 |
| Staff / General Professional | 1.7 | 1.7 | 1.7 | 1.9 |
| Total | 4.0 | 3.8 | 3.8 | 4.0 |

The staff recommends an appropriation of \$410,248 federal funds and 4.0 FTE for this line item.

Abortion Footnote. Staff recommends that the following footnote, which appeared in the FY 2010-11 Long Bill, be continued:

44 Department of Public Health and Environment, Prevention Services Division, Women's Health - Family Planning -- Pursuant to Article V, Section 50, of the Colorado Constitution, no public funds shall be used by the State of Colorado, its agencies or political subdivisions to pay or otherwise reimburse, either directly or indirectly, any person, agency or facility for the performance of any induced abortion, provided however, that the General Assembly, by specific bill, may authorize and appropriate funds to be used for those medical services necessary to prevent the death of either a pregnant woman or her unborn child under circumstances where every reasonable effort is made to preserve the life of each.

This footnote reiterates provisions forbidding public funding for abortions contained in Section 50 of Article 5 of the state constitution and in Section 26-4-512, C.R.S.

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(C) Primary Care Office

Primary Care Office. This line item was created by H.B. 09-1111, Health Resources for Underserved Areas. The Office assesses the need for primary health care professionals in various parts of the state and directs incentives to qualified professionals and clinics willing to serve in areas that are short of providers. The following table shows staffing

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Staff / General Professional | 0.6 | 1.5 | 1.5 | 1.5 |
| Total | 0.6 | 1.5 | 1.5 | 1.5 |

The following table summarizes the Option 8 calculation:

| Primary Care Office | Total | GF | CF | RF | FF | FTE |
|---|----------------|----------|---------------|----------|----------------|------------|
| FY 2010-11 Appropriation | 133,647 | 0 | 53,647 | 0 | 80,000 | 1.5 |
| Reverse 1% GF Personal Services Reduction | | | | | | |
| State PERA contribution back to 10.15% (The Office was new in FY 2010-11, so there's no appropriation to restore) | 0 | 0 | 0 | 0 | 0 | 0.0 |
| 1.5% base reduction | (805) | 0 | (805) | 0 | 0 | 0.0 |
| State PERA contribution down to 7.65% | (860) | 0 | (860) | 0 | 0 | 0.0 |
| Federal Funds Adjustment | 670,000 | 0 | 0 | 0 | 670,000 | 0.0 |
| FY 2011-12 Recommendation | 801,982 | 0 | 51,982 | 0 | 750,000 | 1.5 |
| FY 2011-12 Request | 132,787 | 0 | 52,787 | 0 | 80,000 | 1.5 |
| Recommendation - Request | 669,195 | 0 | (805) | 0 | 670,000 | 0.0 |

Federal Grants. This line reflects federal grants that do not fit elsewhere within the division's budget. Staffing levels for these federal grants are summarized in the following table.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Administrative Support Staff | 0.1 | 0.1 | 0.1 | 0.1 |
| Staff / General Professional | 1.1 | 1.1 | 1.1 | 1.1 |
| Total | 1.2 | 1.2 | 1.2 | 1.2 |

Staff recommends that this line item reflect \$127,755 of federal funds and 1.2 FTE.

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Recommended line item consolidation item: Staff recommends that the Primary Care Office line item and the Federal Grants line item be combined into a single "program" line item titled "Primary Care Office." Given the uncertain nature of General Assembly control over Federal Grants, the resulting loss of detail would be of little significance.

(D) Prevention Partnerships

(1) Interagency Prevention Programs Coordination

This unit, which implements Sections 25-20.5-101 through 109, C.R.S., provides support and coordination services for youth prevention programs in the Departments of Education, Human Services, Public Health and Environment, Public Safety, and Transportation. The focus is on reducing duplication and creating efficiencies by sharing resources across programs and agencies. Statute directs the program to: (a) develop a state plan for delivery of prevention, intervention and treatment services to children and youth throughout the state, (b) identify performance indicators for prevention, intervention, and treatment programs, (c) act as a liaison with communities throughout the state, assisting them in their efforts to assess their needs and to secure funding and provide technical assistance in the implementation of appropriate prevention, intervention and treatment programs, (d) operate prevention and intervention programs for children and youth, (e) review federal funding guidelines and seeking waivers to promote the greatest flexibility in awarding combined program funding to community-based prevention, intervention and treatment programs, (f) develop a website with information on existing programs and potential funding sources, (g) develop uniform minimum standards for the operations of prevention/intervention programs and (i) conduct an annual review of programs.

Background: House Bill 00-1342 created the Division of Prevention and Intervention Services for Children and Youth in CDPHE and moved the Tony Grampsas Youth Services Program from the Department of Local Affairs to the new division. The move was part of an effort to consolidate the provision of prevention and intervention services for children and youth within a single area in one department. H.B. 00-1025 moved the Colorado Children's Trust Fund, created in Article 3.5 of Title 19, C.R.S., from the Department of Higher Education to the new division. The Family Development Center Program created in Section 26-18-104, C.R.S. was also moved to the new division. Subsequently the Division of Prevention and Intervention Services for Children and Youth became part of today's Prevention Services Division.

Personal Services. Staffing levels for this office and the Option 8 calculation are summarized in the tables below.

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|-----------------|------------------|------------------|---------------------|
| Staff / General Professional | 1.9 | 2.0 | 2.0 | 2.0 |
| Total | 1.9 | 2.0 | 2.0 | 2.0 |

| Personal Services | Total | GF | CF | RF | FF | FTE |
|---|----------------|----------------|----------|----------|----------|------------|
| FY 2010-11 Appropriation | 114,504 | 114,504 | 0 | 0 | 0 | 2.0 |
| Reverse 1% GF Personal Services Reduction | 1,157 | 1,157 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 3,237 | 3,237 | 0 | 0 | 0 | 0.0 |
| 1.5% base reduction | (1,783) | (1,783) | 0 | 0 | 0 | 0.0 |
| State PERA contribution down to 7.65% | (3,345) | (3,345) | 0 | 0 | 0 | 0.0 |
| FY 2011-12 Recommendation | 113,770 | 113,770 | 0 | 0 | 0 | 2.0 |
| FY 2011-12 Request | 113,175 | 113,175 | 0 | 0 | 0 | 2.0 |
| Recommendation - Request | 595 | 595 | 0 | 0 | 0 | 0.0 |

Operating Expenses. Staff recommends that the Committee approve the Department's continuation request of \$16,769 General Fund for this line item.

Recommended line item consolidation item: Staff recommends that the personal services and operating expenses line items for the Interagency Prevention Programs Coordination be combined into a single "program" line item titled "Interagency Prevention Programs Coordination." Staff believes that the modest loss of detail in the Long Bill would be more that offset by the additional flexibility consolidation would provide to the program, especially during a period when the program is being forced to contract substantially.

(2) Tony Grampsas Youth Services Program

Prevention Services Programs. The Tony Grampsas Youth Services Program, created in Section 25-20.5-201, C.R.S., awards grants to community-based programs that target youth for intervention services in an effort to reduce incidents of youth crime and violence. It is supported by a 4 percent share of the state's tobacco settlement payments up to a maximum of \$5 million.

The following tables presents program staffing.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|-----------------|------------------|------------------|---------------------|
| Staff / General Professional | 3.0 | 3.0 | 3.0 | 3.0 |

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------|--------------------|---------------------|---------------------|------------------------|
| Total | 3.0 | 3.0 | 3.0 | 3.0 |

Based on the January 2010 Legislative Council Staff forecast of tobacco settlement revenue, **Staff recommends an appropriation of \$3,609,327 cash funds and 3.0 FTE.**

Requested Funding Reduction: The Department requests that the FY 2011-12 appropriation to the Tony Grampsas Youth Services Program (TGYS) be reduced by \$1,887,747 cash funds and that the savings be transferred to the General Fund. This represents an approximately 50 percent reduction in funding for the TGYS program. **The Department states that this is an ongoing request.**

Analysis: Section 25-20.5-201 (2) (c), C.R.S., gives the General Assembly little discretion regarding appropriations to the TGYS program. The paragraph states that "the general assembly shall appropriate to the division for the Tony Grampsas Youth Services program four percent of the amount of money transmitted to the state treasurer in accordance with the master settlement agreement." Thus the only way to implement the Department's request would be to introduce a bill that permanently modifies this rule. The simplest modification would be to reduce the program's allocation of settlement dollars from 4 percent to 2 percent and permanently direct the freed 2 percent to the General Fund.

Staff Recommendation: Staff recommends that the Committee not approve this request. The request is similar to a Staff recommendation that was presented to the Committee earlier during this budget cycle. Noting that the TGYS program includes few health-care components, Staff proposed that all tobacco-settlement funding for the TGYS program be eliminated. The Committee did not approve the Staff recommendation.

Colorado Student Before-and-After-School Project. Appropriations for this program were eliminated during the FY 2009-10 budget cycle.

Tony Grampsas Youth Services Request for Information. Staff recommends that the following information request, which was also an information request last year, **be continued** with the indicated changes:

57. Department of Public Health and Environment, Prevention Services Division, Prevention Partnerships, Tony Grampsas Youth Services Program, Prevention Services Programs --

The Department is requested to submit a report to the Joint Budget Committee on the Tony Grampsas Youth Services Program by ~~December 1, 2010~~ December 1, 2011. This report should include the following information for Fiscal Year ~~2009-10~~ 2010-11: (1) Names of all applicants

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and the amount requested by each; (2) names of all grantees, amount of each grantee's award, period covered by each grant, the number of years each grantee has previously received grants, the number of persons served under the grant, a brief description of the funded program; (3) the most recently available report evaluating the effectiveness of programs operated by grantees.

The Tony Grampsas Youth Services program is a continuing source of interest to the General Assembly and this report provides valuable information on program operations. However, it is difficult for the Department to submit the requested report by October 20th. In the past, the Department has requested that the report be submitted by January, which would mean that it would arrive too late for briefing. December 1st is a compromise. Staff also believes that program evaluation reports are of sufficient interest to warrant their submission but requests the "most recently available report" because the FY 2010-11 report may not be ready.

(3) Colorado Children's Trust Fund

The Colorado Children's Trust Fund is supported by a \$15 fee on petitioners for the dissolution of marriage, legal separation, or the declaration of legal invalidity of marriage. Moneys in the Trust provide grants to local prevention and education programs that deal with child abuse and neglect. Grant decisions are made by the Colorado Children's Trust Fund Board. The statute governing the Children's Trust Fund envisions building the trust fund balance until it reaches \$5 million and subsequently eliminating the fee that supports the trust, meaning that the program would then subsist on the interest earned on its fund balance. However, in 2003 \$980,396 was transferred to the General Fund from the Trust to support other state programs and the fund balance has not recovered.

Personal Services. The following tables summarize staffing levels for this program and the Option 8 calculation.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Staff / General Professional | 1.3 | 1.5 | 1.5 | 1.5 |
| Total | 1.3 | 1.5 | 1.5 | 1.5 |

| Personal Services | Total | GF | CF | RF | FF | FTE |
|--|---------|----|---------|----|---------|-----|
| FY 2010-11 Appropriation | 176,586 | 0 | 76,315 | 0 | 100,271 | 1.5 |
| State PERA contribution back to 10.15% | 616 | 0 | 616 | 0 | 0 | 0.0 |
| 1.5% base reduction | (2,658) | 0 | (1,154) | 0 | (1,504) | 0.0 |
| State PERA contribution down to 7.65% | (1,402) | 0 | (678) | 0 | (724) | 0.0 |

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| Personal Services | Total | GF | CF | RF | FF | FTE |
|----------------------------------|----------------|-----------|---------------|-----------|---------------|------------|
| Federal Funds Adjustment | (33,418) | 0 | 0 | 0 | (33,418) | 0.0 |
| FY 2011-12 Recommendation | 139,724 | 0 | 75,099 | 0 | 64,625 | 1.5 |
| FY 2011-12 Request | 175,800 | 0 | 76,253 | 0 | 99,547 | 1.5 |
| Recommendation - Request | (36,076) | 0 | (1,154) | 0 | (34,922) | 0.0 |

Operating Expenses. Staff recommends an appropriation of \$869,206, comprised of \$395,137 cash funds and \$474,069 federal funds for this line item.

(E) Family and Community Health

(1) Maternal and Child Health.

This office provides management and support to the programs throughout the Maternal and Child Health portion of the division. It is responsible for the coordination of programs and services. The office is funded primarily through federal funds provided by the Maternal and Child Health Grant.

The following tables summarize staffing levels and the Option 8 calculation.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|----------------------------|-----------------------------|-----------------------------|--------------------------------|
| Nurse Consultant | 1.3 | 1.3 | 1.3 | 1.3 |
| Health Professional | 0.1 | 0.1 | 0.1 | 0.1 |
| Staff / General Professional | 13.1 | 6.4 | 6.4 | 16.5 |
| Statistical Analyst | 3.6 | 1.0 | 1.0 | 1.0 |
| Total | 18.1 | 8.8 | 8.8 | 18.9 |

| Personal Services | Total | GF | CF | RF | FF | FTE |
|--|------------------|-----------|-----------|-----------|------------------|-------------|
| FY 2010-11 Appropriation | 3,312,106 | 0 | 0 | 0 | 3,312,106 | 9.8 |
| State PERA contribution back to 10.15% | 40,986 | 0 | 0 | 0 | 40,986 | 0.0 |
| 1.5% base reduction | (34,249) | 0 | 0 | 0 | (34,249) | 0.0 |
| State PERA contribution down to 7.65% | (34,439) | 0 | 0 | 0 | (34,439) | 0.0 |
| Federal Funds Adjustment | 228,750 | 0 | 0 | 0 | 228,750 | 9.1 |
| FY 2011-12 Recommendation | 3,513,154 | 0 | 0 | 0 | 3,513,154 | 18.9 |
| FY 2011-12 Request | 3,318,653 | 0 | 0 | 0 | 3,318,653 | 9.8 |

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| Personal Services | Total | GF | CF | RF | FF | FTE |
|--------------------------|--------------|-----------|-----------|-----------|-----------|------------|
| Recommendation - Request | 194,501 | 0 | 0 | 0 | 194,501 | 9.1 |

(2) Child, Adolescent, and School Health

These programs focus on the prevention of child and adolescent health problems. Funding sources include tobacco settlement money, Medicaid, and various federal funds.

Nurse Home Visitor Program. The Nurse Home Visitor Program, which was established by S.B. 00-71 and is found in Title 25, Article 30 of the Colorado Revised Statutes, operates through contractors who provide health education and counseling services by specially trained nurse home visitors to low-income, first-time mothers beginning in pregnancy and lasting until their child's second birthday. Since the inception of the program in 2000, approximately 12,000 low income first time mothers have participated. The goal of the program is to provide educational, health and other resources for new mothers during pregnancy and the first years of their infants' lives. Participants can earn up to 200% of the Federal Poverty Level. The program was developed and is monitored by the National Center for Children, Families and Communities at the CU Health Sciences Center. The program originally received 3 percent of tobacco settlement revenues, with the percentage increasing 2 percentage points per year until it reached 19 percent in FY 2008-09. House Bill 04-1421, a JBC bill enacted during the last economic downturn, stopped the growth of the program for one year and slowed subsequent growth to 1 percentage point annually until it reaches 19 percent of settlement revenue. During the current economic downturn, S.B. 09-269 delayed the growth of the program for one year; there was no growth from FY 2008-09 to FY 2009-10. The ceiling remains 19 percent. As the Nurse Home Visitor Program's resources have expanded, its reach around the state has grown. Currently, it has programs in all but 8 counties.

Medicaid Matching Funds: The Nurse Home Visitor program also draws matching federal funds, but those matching funds do not appear in CDPHE's budget; a portion of the Nurse Home Visitor appropriation in CDPHE's budget is transferred to the Other Medical Services Division in HCPF's portion of the Long Bill, where HCPF applies for the match. Payments work as follows: when a Nurse Home Visitor contractor provides services to non-Medicaid-eligible clients, the contractor bills CDPHE. When a contractor provides services to Medicaid-eligible clients, it bills HCPF. HCPF then asks CDPHE to transfer the money to HCPF and HCPF applies for the federal match. HCPF's FY 2010-11 appropriation of Nurse-Home-Visitor funds transferred from CDPHE equals \$1,156,141, which by design exceeds the transfers that HCPF needs to pay contractors.

Decision Item BA-3, new federal support: The Department requests \$3,287,598 of spending authority for the Nurse Home Visitor Program line item. Section 25-31-107 (2) (b) requires that all public or private gifts, grants, or donations received by the program, *including any money received*

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from the United State federal government for the program, be credited to the Nurse Home Visitor Program Fund and states that the fund is subject to annual appropriation by the General Assembly. The Department has received approximately \$700,000 of this money already and anticipates that the remaining federal funds will be received early in FY 2011-12. This request provides spending authority to expend these moneys. The moneys will be received from the U.S. Department of Human Services Maternal, Infant, and Early Childhood Home Visiting Program Established by the Patient Protection and Affordable Care Act (PPACA). The moneys cannot be expended until the federal government approves a state plan, and approved is expected fairly early in FY 2011-12. Based on federal guidance that the Department has received, it appears that this will be an ongoing source of funding at approximately this level for the next five years. Nurse visitation programs other than the state's current program, which is run by the Nurse Family Partnership and Invest in Kids, can apply for these funds.

These federal moneys have a maintenance of effort requirement, so there could be problems if state funding for the Nurse Home Visitor Program is reduced below the FY 2010-11 level.

Staffing levels and the Option 8 computation for the program are summarized below.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Staff / General Professional | 3.5 | 3.0 | 3.0 | 3.0 |
| Total | 3.5 | 3.0 | 3.0 | 3.0 |

| Nurse Home Visitor Program | Total | GF | CF | RF | FF | FTE |
|--|-------------------|----------|-------------------|----------|------------------|------------|
| FY 2010-11 Appropriation | 13,444,464 | 0 | 13,444,464 | 0 | 0 | 3.0 |
| State PERA contribution back to 10.15% | 4,617 | 0 | 4,617 | 0 | 0 | 0.0 |
| 1.5% base reduction | (5,052) | 0 | (5,052) | 0 | 0 | 0.0 |
| State PERA contribution down to 7.65% | (6,972) | 0 | (6,972) | 0 | 0 | 0.0 |
| Changed allocation of tobacco settlement revenue | 97,920 | 0 | 97,920 | 0 | 0 | 0.0 |
| Decision Item BA-3 | 3,287,598 | 0 | 0 | 0 | 3,287,598 | 0.0 |
| FY 2011-12 Recommendation | 16,822,575 | 0 | 13,534,977 | 0 | 3,287,598 | 3.0 |
| FY 2011-12 Request | 16,729,707 | 0 | 13,442,109 | 0 | 3,287,598 | 3.0 |
| Recommendation - Request | 92,868 | 0 | 92,868 | 0 | 0 | 0.0 |

The FY 2011-12 cash funds appropriation of \$13,534,977 represents a 2.4 percent increase in funding over FY 2010-11, an increase that is due to the automatic increase in the share of tobacco settlement

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revenue allocated to the program. Had the program's share of settlement revenue remained constant, cash funding would have declined by 4.4 percent.

School-Based Health Centers. House Bill 06-1396 created a grant program within CDPHE for the support of school-based health centers and funded it with an appropriation of \$500,000 General Fund and 0.7 FTE. The General Assembly increased funding for this program by \$500,000 in FY 2009-10. Eligible health centers provide standard clinic services on school district property. The centers are run by the school districts in cooperation with other health service providers such as hospitals, medical providers, and community health centers. In 2009-10, this line item helped fund 41 school-based health centers around the state.

The following tables report the program's staffing and present the Option 8 calculations:

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Staff / General Professional | 0.5 | 0.7 | 0.7 | 0.7 |
| Total | 0.5 | 0.7 | 0.7 | 0.7 |

| | Total | GF | CF | RF | FF | FTE |
|---|----------------|----------------|----------|----------|----------|------------|
| FY 2010-11 Appropriation | 998,204 | 998,204 | 0 | 0 | 0 | 0.7 |
| Reverse 1% GF Personal Services Reduction | 575 | 575 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 1,031 | 1,031 | 0 | 0 | 0 | 0.0 |
| 1.5% base reduction | (884) | (884) | 0 | 0 | 0 | 0.0 |
| State PERA contribution down to 7.65% | (697) | (697) | 0 | 0 | 0 | 0.0 |
| FY 2011-12 Recommendation | 998,229 | 998,229 | 0 | 0 | 0 | 0.7 |
| FY 2011-12 Request | 997,943 | 997,943 | 0 | 0 | 0 | 0.7 |
| Recommendation - Request | 286 | 286 | 0 | 0 | 0 | 0.0 |

Federal Grants. This line reflects federal grants that do not fit elsewhere within the division's budget. Among the larger current grants is \$132,000 for Early Childhood Development. Staffing levels for these federal grants are summarized in the table below.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------|--------------------|---------------------|---------------------|------------------------|
| Nurse Consultant | 0.1 | 0.2 | 0.2 | 0.2 |

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|----------------------------|-----------------------------|-----------------------------|--------------------------------|
| Staff / General Professional | 2.8 | 2.0 | 2.0 | 1.9 |
| Statistical Analyst | 0.2 | 1.0 | 1.0 | 1.0 |
| Total | 3.1 | 3.2 | 3.2 | 3.1 |

Staff recommends that the Committee approve an appropriation of \$1,217,844 federal funds and 3.1 FTE for this line item.

(3) Children with Special Needs

(a) Health Care Program for Children with Special Needs

This program is charged with developing a network of potential services for children with special health care needs. The program is supported through a mixture of General Fund, cash funds, reappropriated funds, and federal funds. The General Fund is used as part of the maintenance of effort and matching requirement for the Maternal and Child Health Block Grant. The cash funds are from patient fees that are assessed on a sliding scale based on income. The reappropriated funds, which are for Traumatic Brain Injury Services, are from the Department of Human Services. The federal funds are from the Maternal and Child Health Block Grant.

Personal Services. The following tables show the distribution of FTE and staff's Option 8 calculations.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|----------------------------|-----------------------------|-----------------------------|--------------------------------|
| Accounting | 0.0 | 0.5 | 0.5 | 0.5 |
| Administrative Support Staff | 2.9 | 3.0 | 3.0 | 3.0 |
| Health Professional | 0.7 | 1.3 | 1.3 | 1.3 |
| Information Systems Staff | 1.0 | 0.0 | 0.0 | 0.0 |
| Nurse Consultant | 1.8 | 3.2 | 3.2 | 3.2 |
| Staff / General Professional | 5.2 | 7.9 | 7.9 | 5.6 |
| Total | 11.6 | 15.9 | 15.9 | 13.6 |

The following table summarizes the Option 8 computation and the related recommendation:

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| Personal Services | Total | GF | CF | RF | FF | FTE |
|---|------------------|----------------|-----------|-----------|----------------|-------------|
| FY 2010-11 Appropriation | 1,171,596 | 621,904 | 0 | 0 | 549,692 | 15.9 |
| Reverse 1% GF Personal Services Reduction | 6,282 | 6,282 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 18,587 | 3,604 | 0 | 0 | 14,983 | 0.0 |
| 1.5% base reduction | (17,947) | (9,477) | 0 | 0 | (8,470) | 0.0 |
| State PERA contribution down to 7.65% | (20,747) | (13,869) | 0 | 0 | (6,878) | 0.0 |
| Federal Funds Adjustment | (109,112) | 0 | 0 | 0 | (109,112) | (2.3) |
| FY 2011-12 Recommendation | 1,048,659 | 608,444 | 0 | 0 | 440,215 | 13.6 |
| FY 2011-12 Request | 1,163,082 | 605,285 | 0 | 0 | 557,797 | 15.9 |
| Recommendation - Request | (114,423) | 3,159 | 0 | 0 | (117,582) | (2.3) |

Operating Expenses. Staff recommends an appropriation of \$71,668, comprised of \$58,939 General Fund and \$12,729 federal funds. This continues the FY 2010-11 General Fund appropriation and aligns federal funds with those received in FY 2009-10.

Last year the Department requested that the General Fund appropriation for this line item be reduced by \$28,638 in FY 2010-11 relative to FY 2009-10, be held at this lower level during FY 2011-12, and be returned in FY 2012-13 to the FY 2009-10 level. The Department indicated that this reduction would not affect the delivery of services provided funding is restored in FY 2012-13.

Recommended line item consolidation item: Staff recommends that the personal services and operating expenses line items for the Health Care Program for Children with Special Needs Coordination be combined into a single "program" line item titled "Health Care Program for Children with Special Needs." Staff believes that the modest loss of detail in the Long Bill would be more that offset by the additional flexibility consolidation would provide to the program, especially during a period when the program is being forced to contract substantially.

Purchase of Services. This line item provides funding to the local health agencies that provide care coordination, referral and family support services statewide for children with special needs.

Staff recommends an appropriation of \$3,585,695, comprised of \$1,856,473 General Fund, \$40,874 cash funds and \$1,688,348 federal funds. This continues the FY 2010-11 General Fund and cash fund appropriations and aligns federal funds with those received in FY 2009-10.

Traumatic Brain Injury Services. The Health Care Program for Children with Special Needs indirectly contracts with the Department of Human Services to administer case management (care coordination) services for children eligible for benefits created by H.B. 02-1281, the Colorado

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Traumatic Brain Injury Program. The agreement allows the Program's statewide network of 14 regional offices, which already have expertise providing case management services for children with special health care needs, to also serve children in the traumatic brain injury program.

Each of the program's regional offices has a multi-disciplinary team specializing in care coordination and family-centered services. The program also holds pediatric specialty clinics throughout rural areas of the state staffed by some of the state's leading pediatric providers. The regional offices work closely with the local health agencies in their areas to serve children in even the most remote geographic areas of Colorado.

The following tables summarize staffing and staff's Option 8 calculations.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Staff / General Professional | 0.4 | 1.0 | 1.0 | 1.0 |
| Total | 0.4 | 1.0 | 1.0 | 1.0 |

| Traumatic Brain Injury Services | Total | GF | CF | RF | FF | FTE |
|--|----------------|----------|----------|----------------|----------|------------|
| FY 2010-11 Appropriation | 187,782 | 0 | 0 | 187,782 | 0 | 1.0 |
| State PERA contribution back to 10.15% | 634 | 0 | 0 | 634 | 0 | 0.0 |
| 1.5% base reduction | (830) | 0 | 0 | (830) | 0 | 0.0 |
| State PERA contribution down to 7.65% | (570) | 0 | 0 | (570) | 0 | 0.0 |
| FY 2011-12 Recommendation | 187,016 | 0 | 0 | 187,016 | 0 | 1.0 |
| FY 2011-12 Request | 187,846 | 0 | 0 | 187,846 | 0 | 1.0 |
| Recommendation - Request | (830) | 0 | 0 | (830) | 0 | 0.0 |

(b) Genetics Counseling

This program contracts with the University of Colorado Health Sciences Center to provide examinations, diagnostic evaluations and genetic counseling services to individuals and families with or at risk of having genetic disorders. The program is cash funded with fees from the newborn screening program. The program currently has 1.0 FTE to coordinate the care provided by the Health Sciences Center.

Personal Services. The following tables summarize staffing and staff's Option 8 calculations.

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|----------------------------|-----------------------------|-----------------------------|--------------------------------|
| Staff / General Professional | 1.0 | 1.0 | 1.0 | 1.0 |
| Total | 1.0 | 1.0 | 1.0 | 1.0 |

| Personal Services | Total | GF | CF | RF | FF | FTE |
|--|---------------|-----------|---------------|-----------|-----------|------------|
| FY 2010-11 Appropriation | 78,974 | 0 | 78,974 | 0 | 0 | 1.0 |
| State PERA contribution back to 10.15% | 1,595 | 0 | 1,595 | 0 | 0 | 0.0 |
| 1.5% base reduction | (1,209) | 0 | (1,209) | 0 | 0 | 0.0 |
| State PERA contribution down to 7.65% | (1,601) | 0 | (1,601) | 0 | 0 | 0.0 |
| FY 2011-12 Recommendation | 77,759 | 0 | 77,759 | 0 | 0 | 1.0 |
| FY 2011-12 Request | 78,968 | 0 | 78,968 | 0 | 0 | 1.0 |
| Recommendation - Request | (1,209) | 0 | (1,209) | 0 | 0 | 0.0 |

Operating Expenses. This appropriation is affected by Decision Item #2, Newborn Screening Laboratory and Genetics Counseling, which was discussed during the earlier presentation of appropriations for the Laboratory Services Division. This Decision Item would add two tests to the panel of blood tests performed on all Colorado newborns: Severe Combined Immunodeficiency Disorder (SCID), and follow-up confirmatory testing for Alpha Thalassemia. The following table shows the impact of the decision item.

| Operating Expenses | Total | GF | CF | RF | FF |
|---|------------------|-----------|------------------|-----------|-----------|
| FY 2010-11 Appropriation | 1,501,817 | 0 | 1,501,817 | 0 | 0 |
| Decision Item #2, Newborn Screening and Genetics Counseling | 73,240 | 0 | 73,240 | 0 | 0 |
| FY 2011-12 Recommendation | 1,575,057 | 0 | 1,575,057 | 0 | 0 |
| FY 2011-12 Request | 1,575,057 | 0 | 1,575,057 | 0 | 0 |
| Recommendation - Request | 0 | 0 | 0 | 0 | 0 |

(4) Department of Human Services Grant

This program is federally funded through a transfer from the Department of Human Services, thus appropriations are classified as reappropriated funds. The project provides a part-time project coordinator to oversee and monitor multi-disciplinary and medical clinics designed to diagnose and

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evaluate children with possible developmental delays. Diagnosis is needed to develop appropriate intervention and treatment plans. Staffing is shown in the following table:

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------|--------------------|---------------------|---------------------|------------------------|
| Nurse Consultant | 0.0 | 0.2 | 0.2 | 0.2 |
| Total | 0.0 | 0.2 | 0.2 | 0.2 |

Staff recommends an appropriation of \$29,790 reappropriated funds and 0.2 FTE for this program. The funding source is a transfer from the Department of Human Services. Because the funding traces to exclusively federal sources, Staff does not recommend a base reduction.

(5) Federal Grants

This line reflects federal grants that do not fit elsewhere within the division's budget. Among the larger recent grants are \$250,000 for Promoting Integration of State Health Systems and \$200,000 for Early Hearing Detection & Intervention Tracking. Staffing levels for these grants are summarized in the table below.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Information Systems Staff | 0.9 | 0.0 | 0.0 | 0.0 |
| Staff / General Professional | 2.3 | 1.2 | 1.2 | 3.2 |
| Total | 3.2 | 1.2 | 1.2 | 3.2 |

Staff recommends that the Committee approve an appropriation of \$801,650 federal funds and 3.2 FTE for this line item, which aligns the appropriation with FY 2009-10 actual federal grants.

(F) Nutrition Services

Women, Infants and Children Supplemental Food Grant. The WIC nutrition federal program provides monthly checks to low-income women and children (185 percent of the federal poverty level) who are nutritionally at-risk. Participants can use their checks to buy designated foods at approved food retailers throughout the state. Clients also receive nutrition education and referrals to health services. Services are provided through local public health agencies.

Staffing levels for this program are summarized in the table below.

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Accounting | 0.2 | 0.2 | 0.2 | 0.2 |
| Health Professional | 5.6 | 5.7 | 5.7 | 5.7 |
| Information Systems Staff | 5.2 | 0.0 | 0.0 | 0.0 |
| Management | 0.1 | 0.1 | 0.1 | 0.1 |
| Staff / General Professional | 11.8 | 11.8 | 11.8 | 16.9 |
| Total | 22.9 | 17.8 | 17.8 | 22.9 |

Staff recommends that the Long Bill reflect \$95,200,000 federal funds and 22.9 FTE for this program, which aligns with expected FY 2011-12 federal funding.

Child and Adult Food Care Program. The Child and Adult Food Care Program is a federally funded program that provides reimbursement for nutritious foods to participating child care centers, Head Start programs, family day care homes, and adult day care centers. Monitoring, technical assistance, and training is also provided. The program serves approximately 42,500 children and adults annually in over 500 care centers and nearly 5,000 family day care homes.

Staffing levels for this program are summarized in the table below.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Administrative Support Staff | 0.9 | 0.9 | 0.1 | 0.1 |
| Accounting | 0.8 | 1.0 | 1.0 | 1.0 |
| Health Professional | 3.9 | 3.8 | 4.6 | 4.8 |
| Information Systems Staff | 0.3 | 0.0 | 0.0 | 0.0 |
| Staff / General Professional | 2.0 | 2.0 | 2.0 | 2.0 |
| Total | 7.9 | 7.7 | 7.7 | 7.9 |

Staff recommends that the Long Bill reflect \$23,278,564 federal funds and 7.9 FTE for this program, which aligns with FY 2009-10 actual federal funding.

(G) Federal Grants.

This line reflects federal grants that do not fit elsewhere within the division's budget. Among the larger current grants are \$320,000 for Maternal and Child Health Asthma Surveillance and Education

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and \$255,000 for Rape Prevention and Education. Staffing levels for these grants are summarized below.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Staff / General Professional | 2.7 | 2.7 | 2.7 | 3.1 |
| Total | 2.7 | 2.7 | 2.7 | 3.1 |

Staff recommends this line item reflect \$404,188 federal funds and 3.1 FTE.

(10) HEALTH FACILITIES AND EMERGENCY SERVICES DIVISION

Subdivisions:

- (A) Licensure
- (B) Emergency Medical Services
- (D) Indirect Cost Assessment

The division licenses, certifies and inspects a variety of different types of health facilities in an effort to assure that patients and residents receive quality care. It focuses on education, inspection, investigation of complaints, and enforcement. The division also establishes and enforces standards for emergency medical services.

(A) Licensure

Health Facilities General Licensure Program. This program licenses and regulates 11 types of medical facilities, including hospitals, nursing homes, hospices, ambulatory surgical care centers, community clinics, and mental health centers. Over 850 facilities are currently licensed. The licensing activities conducted by the division include performing fitness reviews, conducting fire safety inspections, investigating complaints and conducting enforcement activities. The General Fund appropriation is a consequence of the requirement in Section 25-3-103, C.R.S., that fees paid by non-government owned facilities not subsidize the regulation of government-owned facilities.

The following table summarizes program staffing levels.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------|--------------------|---------------------|---------------------|------------------------|
| Accounting | 0.1 | 0.5 | 0.5 | 0.5 |

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Administrative Support Staff | 5.8 | 6.5 | 6.5 | 6.5 |
| Budget Analyst | 0.2 | 0.2 | 0.2 | 0.2 |
| Health Professional | 6.4 | 8.0 | 8.0 | 8.0 |
| Inspector | 1.6 | 19.8 | 19.8 | 19.8 |
| Information Technology | 0.7 | 0.0 | 0.0 | 0.0 |
| Management | 0.3 | 0.5 | 0.5 | 0.5 |
| Program Assistant | 0.4 | 2.0 | 2.0 | 2.0 |
| Public Health Administrator | 0.0 | 0.3 | 0.3 | 0.3 |
| Staff / General Professional | 2.8 | 7.0 | 7.0 | 7.0 |
| Total | 18.3 | 44.8 | 44.8 | 44.8 |

The Option 8 calculation for the program and the related recommendation is as follows.

| Health Facilities General Licensure Program | Total | GF | CF | RF | FF | FTE |
|---|------------------|----------------|------------------|----------|----------|-------------|
| FY 2010-11 Appropriation | 2,912,218 | 154,988 | 2,757,230 | 0 | 0 | 44.8 |
| Reverse 1% GF Personal Services Reduction | 1,257 | 1,257 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 19,525 | 1,710 | 17,815 | 0 | 0 | 0.0 |
| 1.5% base reduction | (40,994) | (1,912) | (39,082) | 0 | 0 | 0.0 |
| State PERA contribution down to 7.65% | (28,143) | (1,794) | (26,349) | 0 | 0 | 0.0 |
| FY 2011-12 Recommendation | 2,863,863 | 154,249 | 2,709,614 | 0 | 0 | 44.8 |
| FY 2011-12 Request | 2,902,308 | 153,612 | 2,748,696 | 0 | 0 | 44.8 |
| Recommendation - Request | (38,445) | 637 | (39,082) | 0 | 0 | 0.0 |

Assisted Living Facilities Program. Pursuant to Section 25-27-104, C.R.S., the Department sets minimum standards for assisted living facilities. Section 25-27-104 (2) (a) C.R.S., requires the Department to inspect personal care boarding facilities annually. In addition to inspecting facilities, the program also investigates complaints and provides technical assistance to the facilities.

The following table presents staffing levels for this program.

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Accountant | 0.1 | 0.1 | 0.1 | 0.1 |
| Administrative Support Staff | 1.4 | 2.5 | 2.5 | 2.5 |
| Budget Analyst | 0.0 | 0.1 | 0.1 | 0.1 |
| Health Professional | 4.6 | 4.5 | 4.5 | 4.5 |
| Information Systems Staff | 0.1 | 0.0 | 0.0 | 0.0 |
| Inspector | 1.5 | 1.5 | 1.5 | 1.5 |
| Management | 0.1 | 0.2 | 0.2 | 0.2 |
| Program Assistant | 0.6 | 0.3 | 0.3 | 0.3 |
| records management | 0.1 | 0.1 | 0.1 | 0.1 |
| Staff / General Professional | 1.7 | 1.9 | 1.9 | 1.9 |
| Total | 10.2 | 11.2 | 11.2 | 11.2 |

The Option 8 common policy approved by the Committee yields the following personal services recommendation.

| Assisted Living Facilities Program | Total | GF | CF | RF | FF | FTE |
|---|----------------|----------------|----------------|----------|----------|-------------|
| FY 2010-11 Appropriation | 914,796 | 109,275 | 805,521 | 0 | 0 | 11.2 |
| Reverse 1% GF Personal Services Reduction | 975 | 975 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 13,896 | 4,654 | 9,242 | 0 | 0 | 0.0 |
| 1.5% base reduction | (12,644) | (1,534) | (11,110) | 0 | 0 | 0.0 |
| State PERA contribution down to 7.65% | (15,414) | (2,189) | (13,225) | 0 | 0 | 0.0 |
| FY 2011-12 Recommendation | 901,609 | 111,181 | 790,428 | 0 | 0 | 11.2 |
| FY 2011-12 Request | 912,208 | 110,670 | 801,538 | 0 | 0 | 11.2 |
| Recommendation - Request | (10,599) | 511 | (11,110) | 0 | 0 | 0.0 |

Medication Administration Program. Title 25, Article 1.5, Part 3, allows properly trained but unlicensed staff members in correctional facilities, assisted living residences, adult day-care facilities, residential child care facilities, and mental-health facilities to administer medications. The program contracts with licensed instructors who provide medication administration training. Attendees are charged \$55 for the course and the exam. Costs of the contract instructors and other program costs are paid from this fee.

The following table presents staffing levels for this program.

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| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Health Professional | 0.1 | 0.0 | 0.0 | 0.0 |
| Staff / General Professional | 0.5 | 1.0 | 1.0 | 1.0 |
| Total | 0.6 | 1.0 | 1.0 | 1.0 |

The following table shows the related Option 8 calculation and the related recommendation:

| Medication Administration Program | Total | GF | CF | RF | FF | FTE |
|--|----------------|----------|----------------|----------|----------|------------|
| FY 2010-11 Appropriation | 213,064 | 0 | 213,064 | 0 | 0 | 1.0 |
| State PERA contribution back to 10.15% | 932 | 0 | 932 | 0 | 0 | 0.0 |
| 1.5% base reduction | (3,195) | 0 | (3,195) | 0 | 0 | 0.0 |
| State PERA contribution down to 7.65% | (1,136) | 0 | (1,136) | 0 | 0 | 0.0 |
| FY 2011-12 Recommendation | 209,665 | 0 | 209,665 | 0 | 0 | 1.0 |
| FY 2011-12 Request | 212,860 | 0 | 212,860 | 0 | 0 | 1.0 |
| Recommendation - Request | (3,195) | 0 | (3,195) | 0 | 0 | 0.0 |

Recommended Line Item Consolidation. Staff recommends that the Health Facilities General Licensure Program, the Assisted Living Facilities Program, and the Medication Administration Program be combined into a single line item titled Health Facilities General Licensure Program. The existing Health Facilities General Licensure Program regulates eleven different types of facilities and, in terms of work and funding sources, the Assisted Living Facilities Program is similar to these eleven. The Medication Administration Program differs more substantially but is small relative to the other programs. There will be relatively little loss of information content in the Long Bill if the three are combined because the letternotes will reveal details of the cash funds appropriations to each program; the only information loss will relate to the General Fund split between the Health Facilities General Licensure Program and the Assisted Living Facilities Program, but staff believes the added General Fund flexibility justifies the change.

The Department did not request this change.

Medicaid/Medicare Certification Program. This program certifies nursing homes and hospitals so they can receive federal Medicaid and Medicare payments. Funding for the program is a combination of reappropriated and federal funds. The reappropriated funds, which pay for certification of facilities caring for Medicaid patients, are Medicaid Reappropriated Funds transferred from the Department of Health Care Policy and Financing where they are appropriated in the

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Executive Director's Office on the line item titled *Transfer to Department of Public Health and Environment for Survey and Certification*. The federal funds, which pay for certification of facilities caring for Medicare patients, are Title XVIII Medicare funds. The federal match rate for Medicaid certification that underlies the reappropriated funds varies, depending upon the type of activity the certification program is engaged in, and has recently averaged 1.86 federal dollars per state dollar.

Staffing levels for this program are summarized below along with staff's Option 8 computation.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Accounting | 0.8 | 1.0 | 1.0 | 1.0 |
| Administrative Support Staff | 8.4 | 9.0 | 9.0 | 9.0 |
| Budget Analyst | 0.5 | 0.5 | 0.5 | 0.5 |
| Compliance Investigator | 0.7 | 1.0 | 1.0 | 1.0 |
| Health Professional | 60.7 | 64.0 | 64.0 | 64.0 |
| Information Systems Staff | 3.7 | 0.0 | 0.0 | 0.0 |
| Inspector | 5.0 | 5.0 | 5.0 | 5.0 |
| Management | 0.9 | 1.1 | 1.1 | 1.1 |
| Program Assistant | 4.3 | 5.0 | 5.0 | 5.0 |
| records Administrator | 0.8 | 1.0 | 1.0 | 1.0 |
| Staff / General Professional | 9.0 | 6.0 | 6.0 | 6.0 |
| Total | 94.8 | 93.6 | 93.6 | 93.6 |

The corresponding Option 8 computation and recommendation is:

| Medicaid/Medicare Certification Program | Total | GF | CF | RF | FF | FTE |
|---|------------------|----------|----------|------------------|------------------|-------------|
| FY 2010-11 Appropriation | 7,624,803 | 0 | 0 | 3,811,902 | 3,812,901 | 93.6 |
| Reverse 1% GF Personal Services Reduction | 36,092 | 0 | 0 | 36,092 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 144,028 | 0 | 0 | 76,394 | 67,634 | 0.0 |
| 1.5% base reduction | (104,990) | 0 | 0 | (55,284) | (49,706) | 0.0 |
| State PERA contribution down to 7.65% | (151,854) | 0 | 0 | (79,170) | (72,684) | 0.0 |
| Federal Funds Adjustment | 292,151 | 0 | 0 | 0 | 292,151 | 0.0 |
| FY 2011-12 Recommendation | 7,840,230 | 0 | 0 | 3,789,934 | 4,050,296 | 93.6 |
| FY 2011-12 Request | 7,579,356 | 0 | 0 | 3,771,505 | 3,807,851 | 93.6 |

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| Medicaid/Medicare Certification Program | Total | GF | CF | RF | FF | FTE |
|--|--------------|-----------|-----------|-----------|-----------|------------|
| Recommendation - Request | 260,874 | 0 | 0 | 18,429 | 242,445 | 0.0 |

(B) Emergency Medical Services

State EMS Coordination, Planning and Certification Program. This section oversees Colorado's emergency medical and trauma services system, which provides transportation and immediate care to the sick and injured. "Emergency medical services" are provided to those who suddenly become ill, for example with a heart attack or stroke, while "trauma care services" are provided to those who have been injured, for example in an automobile accident. The section provides technical and financial assistance; develops and implements EMS programs and coordinates activities with local programs; certifies emergency medical technicians, and oversees certification training and education.

The section is cash funded through a \$2.00 surcharge on the registration of motor vehicles in the state. The surcharge is deposited in the Emergency Medical Services Account within the Highway Users Tax Fund (the "EMS Account"), which is established in Section 25-3.5-603, C.R.S. Expenditures from this account are governed by the rules of that section. The surcharge was increased from \$1 to \$2 by S.B. 09-002.

This program also includes (1) air ambulance licensure, which licenses fixed-wing and rotor-wing ambulance services and is supported by the Fixed-Wing and Rotor-Wing Ambulances Cash Fund, and (2) EMS/Trauma Telecommunication Support, through which the Department transfers funding to the Department of Personnel to fund a communications engineer who assists EMS agencies statewide with communications issues.

The following tables present staffing information for the program.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|----------------------------|-----------------------------|-----------------------------|--------------------------------|
| Administrative Support Staff | 1.6 | 2.1 | 2.1 | 2.1 |
| Budget Analyst | 0.2 | 0.2 | 0.2 | 0.2 |
| Health professional | 1.0 | 4.7 | 4.7 | 4.7 |
| Information Systems | 1.0 | 0.0 | 0.0 | 0.0 |
| Program Assistant | 0.2 | 1.8 | 1.8 | 1.8 |
| Staff / General Professional | 7.6 | 7.6 | 7.6 | 7.6 |
| Total | 11.6 | 16.4 | 16.4 | 16.4 |

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The corresponding Option 8 calculation and recommendation are:

| | Total | GF | CF | RF | FF | FTE |
|--|------------------|----------|------------------|----------|----------|-------------|
| FY 2010-11 Appropriation | 1,373,398 | 0 | 1,373,398 | 0 | 0 | 16.4 |
| 2nd year impact of H.B. 10-1260, Sunset Review Board Medical Examiners, which transferred regulation of emergency medical technicians to this division from the Department of Regulatory Agencies. | 456 | 0 | 456 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 14,839 | 0 | 14,839 | 0 | 0 | 0.0 |
| 1.5% base reduction | (17,750) | 0 | (17,750) | 0 | 0 | 0.0 |
| State PERA contribution down to 7.65% | (18,975) | 0 | (18,975) | 0 | 0 | 0.0 |
| FY 2011-12 Recommendation | 1,351,968 | 0 | 1,351,968 | 0 | 0 | 16.4 |
| FY 2011-12 Request | 1,369,718 | 0 | 1,369,718 | 0 | 0 | 16.4 |
| Recommendation - Request | (17,750) | 0 | (17,750) | 0 | 0 | 0.0 |

The sources of cash funds are the Emergency Medical Services Account in the Highway User's Tax Fund and the Fixed-Wing and Rotary-Wing Ambulances Cash Fund.

Distributions to Regional Emergency Medical and Trauma Councils. Under the provisions of Section 25-3.5-704 (2) (c), C.R.S., the state is organized into 11 Regional Emergency Medical and Trauma Advisory Councils (RETACs) that assess regional needs and conduct emergency services and trauma planning. This line item provides funding for distributions to RETACs. Each RETAC has, since 2002, annually received \$75,000 plus \$15,000 for each county within the RETAC. The funds are for administrative costs, planning and the coordination of services in and between counties.

Staff recommends approval of the Department's request for \$1,785,000 cash funds for this line item, a continuation level of funding. The source of cash funds is the Emergency Medical Services Account in the Highway User's Tax Fund.

Emergency Medical Services Provider Grants. Pursuant to Section 25-3.5-604, C.R.S., this line item provides emergency medical service grants to local agencies for training, medical equipment such as defibrillators, communications equipment, data collection equipment, and new vehicles, with new vehicles typically accounting for more than half of the dollars granted. Grants are evaluated based on need, with priority given to replacement of old systems and equipment. Applicants must provide a 50 percent match unless they can demonstrate financial hardship.

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Staff recommends approval of the Department's request for \$6,793,896 cash funds for this line item, which is a continuation appropriation. The source of cash funds is the Emergency Medical Services Account in the Highway User's Tax Fund.

Trauma Facility Designation Program. The Statewide Trauma Care System Act (Section 25-3.5-701, C.R.S.) gives the State Board of Health and the Department oversight of the state's trauma care system. Health care facilities in the state may choose to be "non-designated" and thus agree not to keep trauma patients with complex injuries, or may agree to care for trauma patients, in which case they will receive site reviews and be designated by the state as Level I (highest) through Level V trauma centers. There are currently about 69 designated trauma centers in Colorado with the majority of acute care general hospitals and critical access hospitals and about one third of community clinics and emergency centers participating.

In order to fund its trauma facility oversight activities, the Department levies fees on trauma care facilities. Fees are set by the State Board of Health, based on program operating costs, and are deposited in the Trauma Care System Cash Fund, established in Section 25-3.5-705 (2), C.R.S. Pursuant to statute, these fees cover the cost of trauma facility designation, but cannot cover related costs, such as attorney fees, ongoing monitoring, provision of technical assistance, and rule making.

The following tables present staffing information.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Administrative Assistant | 0.1 | 1.1 | 1.1 | 1.1 |
| Staff / General Professional | 1.8 | 1.0 | 1.0 | 1.0 |
| Total | 1.9 | 2.1 | 2.1 | 2.1 |

The corresponding Option 8 calculation and recommendation are:

| Trauma Facility Designation Program | Total | GF | CF | RF | FF | FTE |
|--|----------------|----------|----------------|----------|----------|------------|
| FY 2010-11 Appropriation | 385,869 | 0 | 385,869 | 0 | 0 | 2.1 |
| State PERA contribution back to 10.15% | 2,909 | 0 | 2,909 | 0 | 0 | 0.0 |
| 1.5% base reduction | (5,541) | 0 | (5,541) | 0 | 0 | 0.0 |
| State PERA contribution down to 7.65% | (3,025) | 0 | (3,025) | 0 | 0 | 0.0 |
| FY 2011-12 Recommendation | 380,212 | 0 | 380,212 | 0 | 0 | 2.1 |
| FY 2011-12 Request | 385,753 | 0 | 385,753 | 0 | 0 | 2.1 |
| Recommendation - Request | (5,541) | 0 | (5,541) | 0 | 0 | 0.0 |

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The fund source is the Trauma Care System Cash Fund.

Federal Grants. This line reflects federal grants that do not fit elsewhere within the division's budget. Among the current grants are grants for Emergency Medical Services for Children and for Trauma Crash Data Analysis. The following table reports staffing levels for these grants.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|------------------------------|--------------------|---------------------|---------------------|------------------------|
| Health Professional | 1.0 | 0.4 | 0.4 | 0.4 |
| Information Systems | 0.0 | 0.0 | 0.0 | 0.0 |
| Staff / General Professional | 1.5 | 0.5 | 0.5 | 2.1 |
| Total | 2.5 | 0.9 | 0.9 | 2.5 |

The corresponding recommendation and request are:

| Federal Grants | Total | GF | CF | RF | FF | FTE |
|--|----------------|----------|----------|----------|----------------|------------|
| FY 2010-11 Appropriation | 105,591 | 0 | 0 | 0 | 105,591 | 0.9 |
| State PERA contribution back to 10.15% | 5,377 | 0 | 0 | 0 | 5,377 | 0.0 |
| 1.5% base reduction | (1,363) | 0 | 0 | 0 | (1,363) | 0.0 |
| State PERA contribution down to 7.65% | (2,846) | 0 | 0 | 0 | (2,846) | 0.0 |
| Federal Funds Adjustment | 149,020 | 0 | 0 | 0 | 149,020 | 1.6 |
| FY 2011-12 Recommendation | 255,779 | 0 | 0 | 0 | 255,779 | 2.5 |
| FY 2011-12 Request | 108,122 | 0 | 0 | 0 | 108,122 | 0.9 |
| Recommendation - Request | 147,657 | 0 | 0 | 0 | 147,657 | 1.6 |

Poison Control. Under the authority of the Poison Control Act (Title 25, Article 32, C.R.S.), the Department contracts with the Rocky Mountain Poison and Drug Center, an affiliate of Denver Health, to provide a 24-hour-a-day, toll free phone number that Colorado citizens can call to obtain poison information. The hotline handles over 70,000 cases per year with the average case involving 3 or 4 calls. The phones are staffed by nurses, pharmacists and "poison-information providers." Board-certified medical toxicologists are also on call.

Over half of the calls that the Center receives involve children. Usually these are cases of actual or suspected poisoning such as an overdose of an antibiotic or liquid bleach accidentally splashed in an

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eye. The Center also receives calls from emergency room physicians seeking expert advice on severe or unusual poisoning cases. The Center frequently receives calls from people who need help identifying unpackaged pills. Such calls may come from parents concerned about pills found in a teenager's backpack or from adult children who are trying to sort through a jumble of pills possessed by an older parent. Food poisoning calls are common and, since the 2001 terrorist attacks, there have been a number of calls seeking information about possible chemical or biological terrorism.

The Center is part of the state's response plan for chemical and biological terrorism. The center is also part of a nationwide monitoring system that looks for unusual patterns that could be the first sign of such an event. In addition, the Center provides statewide training for professionals and the public on prevention and proper treatment of poisonings.

Staff recommends that the Committee approve the Department's request for a continuation appropriation of \$1,421,442 General Fund.

(D) Indirect Cost Assessment.

The indirect cost assessment will be calculated after the Committee makes its final decisions on the Department's budget and is therefore shown as **pending**.

(11) EMERGENCY PREPAREDNESS AND RESPONSE DIVISION

Subdivisions:

None

This division helps responders prepare for a wide variety of disasters, natural as well as man-made, including floods, wildfires, tornados, infectious disease epidemics, food and water borne disease outbreaks, and terrorist attacks. The unit coordinates a statewide network of laboratories, agencies, hospitals, and other resources. Approximately half of its appropriation is redistributed to local public health agencies and hospitals to support emergency preparedness activities statewide. While the Division of Emergency Management in the Department of Local Affairs coordinates Colorado's statewide emergency response, all of the health, medical and mortuary portions of the State's emergency operations plan are assigned to CDPHE's Preparedness Unit. The Division relies heavily on Federal funding.

The division began operating in the late 1990's when several million dollars of federal funding became available. The division relied exclusively on federal dollars until FY 2009-10, when the federal Pandemic and All-Hazards Preparedness Act began requiring states to provide maintenance

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of effort and matching funds. The amount of federal money that the state receives is driven by formulas that are based in part on state population and the state can either accept the federal support in its entirety, with the required state match, or it can decline.

The following table shows the division's staffing request.

| Staffing Summary | FY 09-10 Actual | FY 10-11 Approp. | FY 11-12 Request | FY 11-12 Recommend. |
|-------------------------------------|--------------------|---------------------|---------------------|------------------------|
| Accounting | 0.0 | 0.0 | 0.0 | 0.0 |
| Administrative Support Staff | 1.0 | 1.8 | 1.8 | 1.8 |
| Environmental Protection Specialist | 0.0 | 0.0 | 0.0 | 0.0 |
| Health Professional | 0.3 | 5.0 | 5.0 | 5.0 |
| Information Technology | 2.7 | 0.0 | 0.0 | 0.0 |
| Laboratory Technician | 0.0 | 1.0 | 1.0 | 1.0 |
| Management | 0.9 | 1.0 | 1.0 | 1.0 |
| Nurse Consultant | 0.2 | 1.0 | 1.0 | 1.0 |
| Physical Scientist | 0.0 | 3.0 | 3.0 | 3.0 |
| Public Health Administrator | 0.2 | 0.2 | 0.2 | 0.2 |
| Staff / General Professional | 28.5 | 29.5 | 29.5 | 22.0 |
| Total | 33.8 | 42.5 | 42.5 | 35.0 |

Emergency Preparedness and Response Program

The following table shows the Option 8 calculation. As noted above, the federal Pandemic and All-Hazards Preparedness Act gives Colorado little choice regarding the General Fund appropriation.

| Emergency Preparedness and Response Program | Total | GF | CF | RF | FF | FTE |
|---|-------------------|------------------|----------|----------|-------------------|-------------|
| FY 2010-11 Appropriation | 19,840,519 | 1,757,179 | 0 | 0 | 18,083,340 | 42.5 |
| Reverse 1% GF Personal Services Reduction | 2,756 | 2,756 | 0 | 0 | 0 | 0.0 |
| State PERA contribution back to 10.15% | 26,445 | 2,399 | 0 | 0 | 24,046 | 0.0 |
| 1.5% base reduction | (46,848) | (4,134) | 0 | 0 | (42,714) | 0.0 |
| State PERA contribution down to 7.65% | (57,408) | (2,148) | 0 | 0 | (55,260) | 0.0 |
| Federal Funds Adjustment | 17,190,517 | 0 | 0 | 0 | 17,190,517 | (7.5) |
| FY 2011-12 Recommendation | 36,955,981 | 1,756,052 | 0 | 0 | 35,199,929 | 35.0 |

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| Emergency Preparedness and Response Program | Total | GF | CF | RF | FF | FTE |
|--|--------------|-----------|-----------|-----------|------------|------------|
| FY 2011-12 Request | 19,806,752 | 1,754,626 | 0 | 0 | 18,052,126 | 42.5 |
| Recommendation - Request | 17,149,229 | 1,426 | 0 | 0 | 17,147,803 | (7.5) |

Indirect Costs

The indirect cost assessment will be calculated after the Committee makes its final decisions on the Department's budget and is therefore shown as **pending**.

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Summary of Footnote and Information Request Recommendations

Footnotes to be continued:

Abortion.

- 44 Department of Public Health and Environment, Prevention Services Division, Women's Health - Family Planning -- Pursuant to Article V, Section 50, of the Colorado Constitution, no public funds shall be used by the State of Colorado, its agencies or political subdivisions to pay or otherwise reimburse, either directly or indirectly, any person, agency or facility for the performance of any induced abortion, provided however, that the General Assembly, by specific bill, may authorize and appropriate funds to be used for those medical services necessary to prevent the death of either a pregnant woman or her unborn child under circumstances where every reasonable effort is made to preserve the life of each.

Requests for information to be continued:

Ryan White Act.

56. Department of Public Health and Environment, Disease Control and Environmental Epidemiology Division, Special Purpose Disease Control Programs, Ryan White Act -- The Department is requested to report annually to the Joint Budget Committee with regard to the AIDS drug assistance program. The report should be submitted on or before ~~October 20, 2010~~; October 20, 2011. The report should include, but not be limited to: (1) A NARRATIVE DESCRIPTION OF PROGRAM CHANGES WITHIN THE PAST YEAR, INCLUDING CHANGES THAT HAVE ENHANCED THE PROGRAM AND ITS COVERAGE AND CHANGES THAT HAVE BEEN DETRIMENTAL TO THE PROGRAM AND ITS COVERAGE, WITH AN EXPLANATION OF THE REASONS FOR CHANGE; ~~(1)~~ (2) the total NUMBER OF ENROLLED CLIENTS and ~~average monthly~~ the number of clients ACTUALLY served, with a description of the demographic profile of the client population; ~~(2)~~ (3) the total and average monthly costs to provide pharmaceutical products to ~~those~~ clients ACTUALLY SERVED; ~~(3)~~ (4) a listing of the pharmaceuticals on the formulary, the manufacturer of each product, and the respective average price TO THE PROGRAM for a month's supply of each product; ~~and (4)~~ (5) the total amount of available funds, including state ~~General Fund support~~ funds, federal ~~Title I and Title II~~ RYAN WHITE CARE ACT PART A, PART B AND DEDICATED ADAP funds, and any other source as appropriate; and (6) ADMINISTRATIVE COSTS OF THE PROGRAM AS A PERCENTAGE OF TOTAL PROGRAM EXPENDITURES.

Tony Gramscas Youth Services.

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57. Department of Public Health and Environment, Prevention Services Division, Prevention Partnerships, Tony Grampsas Youth Services Program, Prevention Services Programs -- The Department is requested to submit a report to the Joint Budget Committee on the Tony Grampsas Youth Services Program by ~~December 1, 2010~~ December 1, 2011. This report should include the following information for Fiscal Year ~~2009-10~~ 2010-11: (1) Names of all applicants and the amount requested by each; (2) names of all grantees, amount of each grantee's award, period covered by each grant, the number of years each grantee has previously received grants, the number of persons served under the grant, a brief description of the funded program; (3) the most recently available report evaluating the effectiveness of programs operated by grantees.

MEMORANDUM

TO: Members of the Joint Budget Committee

FROM: Steve Allen, JBC Staff

SUBJECT: Department of Public Health and Environment Figure Setting Corrections

DATE: March 17, 2011

During figure setting for the Department of Public Health and Environment's Administrative and Health divisions:

1. Staff recommended and the Committee approved a 1.5 FTE appropriation for

Prevention Services Division
Primary Care Office
Program Costs.

The FTE total was correct, but the FTE fund split was not. Staff recommended that 0.5 FTE be supported by cash funds from the Visa Waiver Program Fund and 1.0 FTE be supported by federal funds. **Staff should have recommended that all 1.5 FTE be supported by cash funds; the federal grant for this line item cannot be used to hire FTE.**

2. Staff recommended and the Committee approved a \$4,944,611 appropriation for

Center for Health and Environmental Information (CHEIS)
Health Statistics and Vital Records
Personal Services.

This appropriation is comprised of \$3,812,151 cash funds, \$5,853 reappropriated funds, and \$1,126,607 federal funds. **Staff should have recommended an appropriation with \$46,000 less cash funds. The appropriation should have been \$4,899,301 with \$3,766,841 of cash funds.**

In computing the recommendation, Staff failed to account for the -\$46,000 second year impact of the Medical Marijuana Computer System supplemental that the Committee approved in January.

MEMORANDUM

TO: Members of the Joint Budget Committee

FROM: Steve Allen, JBC Staff

SUBJECT: Additional General Fund reductions for the Department of Public Health and Environment

DATE: March 17, 2011

The Department of Public Health and Environment requests and staff recommends that the FY 2011-12 appropriations to the Department's Administrative and Health divisions be reduced by an additional \$102,729 General Fund, which represents a 0.46 percent cut for most of the General Fund appropriations to the Department. The attached numbers pages show the recommended reductions.

This is the "Statewide 1% General Fund Reduction to Personal Services/Operating" that the Governor directed all departments to request.

FY 2011-12 Joint Budget Committee Staff Comebacks
Department of Public Health and Environment
(Administrative and Health Divisions)
Recommendations for Additional General Fund Reductions

| | FY 2008-09 | FY 2009-10 | FY 2010-11 | FY 2011-12 | | | | Change Request | | |
|---|------------|------------|------------|------------|--------------------|--------------------|---------------------|----------------|-----------|----------|
| | Actual | Actual | Approp | Request | Committee Decision | Added GF Reduction | New Staff Recommend | | | |
| DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT | | | | | | | | | | |
| (1) ADMINISTRATION AND SUPPORT | | | | | | | | | | |
| (B) Special Health Programs | | | | | | | | | | |
| (1) Health Disparities Program | | | | | | | | | | |
| Operating Expenses | 36,946 | 28,168 | 35,838 | 25,663 | B | 65,838 | (259) | 65,579 | BA NP-14, | |
| General Fund | 6,931 | 6,931 | 6,931 | 6,931 | | 6,931 | (259) | 6,672 | BA NP-16 | |
| Cash Funds Exempt/RF (Amendment 35) | 30,015 | 21,237 | 28,907 | 18,732 | | 58,907 | 0 | 58,907 | | |
| (C) Local Public Health Planning and Support | | | | | | | | | | |
| Assessment and Planning Program | 530,487 | 543,333 | 661,389 | S | 661,941 | 664,285 | (1,405) | 662,880 | BR #NP2, | |
| FTE | 5.2 | 6.1 | 8.4 | | 8.4 | 8.4 | 0.0 | 0.0 | BR #NP6 | |
| General Fund | 259,974 | 308,320 | 306,536 | | 304,098 | 305,600 | (1,405) | 304,195 | BA NP-16 | |
| FTE | 2.2 | 0.0 | 0.0 | | 0.0 | 0.0 | 0.0 | 0.0 | | |
| Cash Funds | 48,282 | 15,631 | 137,851 | | 139,396 | 139,303 | 0 | 139,303 | | |
| FTE | 0.6 | 0.0 | 0.0 | | 0.0 | 0.0 | 0.0 | 0.0 | | |
| Federal Funds | 222,231 | 219,382 | 217,002 | | 218,447 | 219,382 | 0 | 219,382 | | |
| FTE | 2.4 | 0.0 | 0.0 | | 0.0 | 0.0 | 0.0 | 0.0 | | |
| Distributions to Local Public Health Agencies | 8,439,892 | 8,540,933 | 8,249,086 | | 8,249,086 | B | 8,040,835 | (27,541) | 8,013,294 | BA NP-16 |
| General Fund | 5,962,731 | 5,962,731 | 5,962,731 | | 5,962,731 | | 5,962,731 | (27,541) | 5,935,190 | |
| Cash Funds (Tobacco Settlement) | 2,477,161 | 2,578,202 | 2,286,355 | | 2,286,355 | | 2,078,104 | 0 | 2,078,104 | |
| Cash Funds Exempt/RF (Tobacco Settlement) | 0 | 0 | 0 | | 0 | | 0 | 0 | 0 | |
| Environmental Health Services Not Provided by Local Health Departments - GF | 234,296 | 241,726 | 242,358 | | 242,358 | | 242,358 | (1,119) | 241,239 | |
| (D) Special Environmental Programs | | | | | | | | | | |
| Animal Feeding Operations (AFO) Program | 53,880 | 442,596 | 474,339 | | 469,201 | B | 464,960 | (462) | 464,498 | BR #NP6 |
| FTE | 0.5 | 3.2 | 3.5 | | 3.5 | | 0.0 | 0.0 | 0.0 | BA NP-16 |
| General Fund | 0 | 100,000 | 100,000 | | 100,000 | | 100,000 | (462) | 99,538 | |
| FTE | 0.0 | 0.0 | 0.0 | | 0.0 | | 0.0 | 0.0 | 0.0 | |
| Cash Funds | 53,880 | 342,596 | 374,339 | | 369,201 | | 364,960 | 0 | 364,960 | |
| FTE | 0.5 | 0.0 | 0.0 | | 0.0 | | 0.0 | 0.0 | 0.0 | |

| | FY 2008-09 | FY 2009-10 | FY 2010-11 | FY 2011-12 | | | Change | |
|---|------------------|------------------|------------------|--------------------|--------------------|--------------------|---------------------|-----------------|
| | Actual | Actual | Approp | Request | Committee Decision | Added GF Reduction | New Staff Recommend | Request |
| (3) LABORATORY SERVICES | | | | | | | | |
| (B) Chemistry and Microbiology | | | | | | | | |
| Personal Services | 3,576,829 | 3,984,968 | 4,196,045 S | 4,234,868 B | 4,408,486 | (3,389) | 4,405,097 | DI #2, BR #NP2, |
| FTE | <u>55.8</u> | <u>51.7</u> | <u>60.9</u> | <u>61.9</u> | <u>63.6</u> | <u>0.0</u> | <u>63.6</u> | BR #NP6 |
| General Fund | 162,269 | 758,952 | 744,316 | 733,713 | 737,540 | (3,389) | 734,151 | BA NP-16 |
| FTE | 2.1 | 11.2 | 11.2 | 11.2 | 11.2 | 0.0 | 11.2 | |
| Cash Funds | 2,244,195 | 1,958,622 | 2,341,613 | 2,399,210 | 2,363,476 | 0 | 2,363,476 | |
| FTE | 35.6 | 21.5 | 32.0 | 33.0 | 33.0 | 0.0 | 33.0 | |
| Cash Funds Exempt/RF | 133,690 | 49,234 | 95,304 | 90,747 | 89,310 | 0 | 89,310 | |
| FTE | 3.9 | 3.1 | 3.5 | 3.5 | 3.5 | 0.0 | 3.5 | |
| Federal Funds | 1,036,675 | 1,218,160 | 1,014,812 | 1,011,198 | 1,218,160 | 0 | 1,218,160 | |
| FTE | 14.2 | 15.9 | 14.2 | 14.2 | 15.9 | 0.0 | 15.9 | |
| Operating Expenses | <u>2,656,312</u> | <u>3,570,996</u> | <u>3,378,797</u> | <u>3,647,916</u> B | <u>3,932,635</u> | <u>(1,461)</u> | <u>3,931,174</u> | DI #2 |
| General Fund | 12,711 | 316,278 | 316,278 | 316,278 | 316,278 | (1,461) | 314,817 | BA NP-16 |
| Cash Funds | 2,213,873 | 2,539,638 | 2,632,158 | 2,901,277 | 2,901,277 | 0 | 2,901,277 | |
| Cash Funds Exempt/RF | 139,486 | 140,119 | 140,119 | 140,119 | 140,119 | 0 | 140,119 | |
| Federal Funds | 290,242 | 574,961 | 290,242 | 290,242 | 574,961 | 0 | 574,961 | |
| (8) DISEASE CONTROL AND ENVIRONMENTAL EPIDEMIOLOGY DIVISION | | | | | | | | |
| (A) Administration, General Disease Control and Surveillance | | | | | | | | |
| Personal Services | 878,119 | 924,275 | 809,664 S | 807,002 B | 818,165 | (2,464) | 815,701 | BR #NP2, |
| FTE | <u>9.0</u> | <u>10.3</u> | <u>13.1</u> | <u>13.1</u> | <u>13.3</u> | <u>0.0</u> | <u>13.3</u> | BR #NP6 |
| General Fund | 589,890 | 642,394 | 545,504 | 533,501 | 536,284 | (2,464) | 533,820 | BA NP-16 |
| FTE | 6.0 | 7.3 | 10.3 | 10.3 | 10.3 | 0.0 | 10.3 | |
| Federal Funds | 288,229 | 281,881 | 264,160 | 273,501 | 281,881 | 0 | 281,881 | |
| FTE | 3.0 | 3.0 | 2.8 | 2.8 | 3.0 | 0.0 | 3.0 | |
| Operating Expenses | <u>290,524</u> | <u>310,791</u> | <u>264,579</u> | <u>264,579</u> | <u>282,329</u> | <u>(1,031)</u> | <u>281,298</u> | BA NP-16 |
| General Fund | 255,616 | 258,133 | 223,133 | 223,133 | 223,133 | (1,031) | 222,102 | |
| Cash Funds | 0 | 0 | 6,538 | 6,538 | 6,538 | 0 | 6,538 | |
| Federal Funds | 34,908 | 52,658 | 34,908 | 34,908 | 52,658 | 0 | 52,658 | |
| (B) Special Purpose Disease Control Programs | | | | | | | | |
| (1) Immunization | | | | | | | | |
| Personal Services | 2,657,561 | 2,634,949 | 2,560,719 S | 2,552,133 B | 2,592,897 | (3,731) | 2,589,166 | BR #NP2, |
| FTE | <u>24.9</u> | <u>29.2</u> | <u>35.6</u> | <u>35.6</u> | <u>32.0</u> | <u>0.0</u> | <u>32.0</u> | BR #NP6 |
| General Fund | 852,922 | 854,038 | 817,527 | 807,789 | 811,986 | (3,731) | 808,255 | BA NP-16 |
| FTE | 2.9 | 8.9 | 11.7 | 11.7 | 11.7 | 0.0 | 11.7 | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Federal Funds | 1,804,639 | 1,780,911 | 1,743,192 | 1,744,344 | 1,780,911 | 0 | 1,780,911 | |
| FTE | 22.0 | 20.3 | 23.9 | 23.9 | 20.3 | 0.0 | 20.3 | |

| | FY 2008-09 | FY 2009-10 | FY 2010-11 | FY 2011-12 | | | | Change Request |
|--|------------------|------------------|-------------------|-------------------|--------------------|--------------------|---------------------|----------------|
| | Actual | Actual | Approp | Request | Committee Decision | Added GF Reduction | New Staff Recommend | |
| Operating Expenses | <u>4,145,502</u> | <u>4,979,006</u> | <u>12,618,249</u> | <u>12,618,249</u> | <u>4,269,794</u> | <u>(3,013)</u> | <u>4,266,781</u> | BA NP-16 |
| General Fund | 697,885 | 687,285 | 652,285 | 652,285 | 652,285 | (3,013) | 649,272 | |
| General Fund Exempt | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Cash Funds (Tobacco Settlement) | 1,550,797 | 1,400,000 | 844,789 | 844,789 | 725,788 | 0 | 725,788 | |
| Cash Funds Exempt/RF (Tobacco Settlement) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Federal Funds | 1,896,820 | 2,891,721 | 11,121,175 | 11,121,175 | 2,891,721 | 0 | 2,891,721 | |
| (3) Ryan White Act | | | | | | | | |
| Personal Services | 983,188 | 1,023,160 | 950,136 | S 950,582 | 1,022,388 | (6,398) | 1,015,990 | BR #NP2, |
| FTE | <u>11.8</u> | <u>12.3</u> | <u>11.7</u> | <u>11.7</u> | <u>12.6</u> | <u>0.0</u> | <u>12.6</u> | BR #NP6 |
| General Fund | 27,309 | 28,556 | 28,162 | 27,642 | 27,784 | (6,398) | 21,386 | BA NP-16 |
| FTE | 0.3 | 0.1 | 0.4 | 0.4 | 0.4 | 0.0 | 0.4 | |
| Federal Funds | 955,879 | 994,604 | 921,974 | 922,940 | 994,604 | 0 | 994,604 | |
| FTE | 11.5 | 12.2 | 11.3 | 11.3 | 12.2 | 0.0 | 12.2 | |
| (4) Tuberculosis Control and Treatment | | | | | | | | |
| Personal Services | 1,124,726 | 1,351,030 | 1,088,459 | S 1,085,964 | B 1,329,968 | (546) | 1,329,422 | BR #NP2, |
| FTE | <u>11.5</u> | <u>14.4</u> | <u>12.0</u> | <u>12.0</u> | <u>5.5</u> | <u>0.0</u> | <u>5.5</u> | BR #NP6 |
| General Fund | 116,791 | 122,742 | 121,598 | 118,222 | 118,838 | (546) | 118,292 | BA NP-16 |
| FTE | 1.2 | 1.2 | 1.2 | 1.2 | 1.2 | 0.0 | 1.2 | |
| Cash Funds Exempt/RF | 95,554 | 95,554 | 95,554 | 79,829 | 78,396 | 0 | 78,396 | |
| FTE | 1.0 | 10.6 | 1.7 | 1.7 | 1.7 | 0.0 | 1.7 | |
| Federal Funds | 912,381 | 1,132,734 | 871,307 | 887,913 | 1,132,734 | 0 | 1,132,734 | |
| FTE | 9.3 | 2.6 | 9.1 | 9.1 | 2.6 | 0.0 | 2.6 | |
| Operating Expenses | <u>2,217,461</u> | <u>3,443,103</u> | <u>2,217,462</u> | <u>2,217,462</u> | B <u>3,443,103</u> | <u>(5,505)</u> | <u>3,437,598</u> | BA NP-16 |
| General Fund | 1,191,913 | 1,191,913 | 1,191,913 | 1,191,913 | 1,191,913 | (5,505) | 1,186,408 | |
| Cash Funds Exempt/RF | 210,019 | 210,020 | 210,020 | 210,020 | 210,020 | 0 | 210,020 | |
| Federal Funds | 815,529 | 2,041,170 | 815,529 | 815,529 | 2,041,170 | 0 | 2,041,170 | |
| (C) Environmental Epidemiology | | | | | | | | |
| (1) Birth Defects Monitoring and Prevention | | | | | | | | |
| Personal Services | 323,907 | 394,419 | 328,691 | S 323,765 | B 407,683 | (532) | 407,151 | BR #NP2, |
| FTE | <u>2.9</u> | <u>3.8</u> | <u>3.6</u> | <u>3.6</u> | <u>4.7</u> | <u>0.0</u> | <u>4.7</u> | BR #NP6 |
| General Fund | 121,631 | 124,288 | 117,433 | 115,149 | 115,749 | (532) | 115,217 | BA NP-16 |
| FTE | 1.1 | 1.2 | 1.6 | 1.6 | 1.6 | 0.0 | 1.6 | |
| Cash Funds | 100,455 | 107,953 | 134,244 | 131,766 | 129,756 | 0 | 129,756 | |
| FTE | 0.9 | 0.9 | 1.4 | 1.4 | 1.4 | 0.0 | 1.4 | |
| Federal Funds | 101,821 | 162,178 | 77,014 | 76,850 | 162,178 | 0 | 162,178 | |
| FTE | 0.9 | 1.7 | 0.6 | 0.6 | 1.7 | 0.0 | 1.7 | |

| | FY 2008-09 | FY 2009-10 | FY 2010-11 | FY 2011-12 | | | Change | |
|---|---------------|---------------|---------------|-----------------|--------------------|--------------------|---------------------|----------|
| | Actual | Actual | Approp | Request | Committee Decision | Added GF Reduction | New Staff Recommend | Request |
| (9) PREVENTION SERVICES DIVISION | | | | | | | | |
| (A) Prevention Programs | | | | | | | | |
| (1) Programs and Administration | | | | | | | | |
| Personal Services | 1,720,433 | 1,811,866 | 1,677,139 S | 1,626,818 B | 1,800,147 | (529) | 1,799,618 | BR #NP2, |
| FTE | <u>21.4</u> | <u>21.7</u> | <u>22.9</u> | <u>21.4</u> | <u>22.5</u> | <u>0.0</u> | <u>22.5</u> | BR #NP6 |
| General Fund | 113,677 | 118,231 | 117,295 | 114,448 | 115,046 | (529) | 114,517 | BA NP-16 |
| FTE | 1.9 | 1.9 | 2.0 | 2.0 | 2.0 | 0.0 | 2.0 | BA NP-14 |
| Cash Funds (Amendment 35) | 0 | 670,429 | 643,403 | 592,188 | 661,895 | 0 | 661,895 | |
| FTE | 0.0 | 9.3 | 10.0 | 8.5 | 10.0 | 0.0 | 10.0 | |
| Cash Funds Exempt/RF (Amendment 35) | 669,447 | 0 | 0 | 0 | 0 | 0 | 0 | |
| FTE | 8.6 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 937,309 | 1,023,206 | 916,441 | 920,182 | 1,023,206 | 0 | 1,023,206 | |
| FTE | 10.9 | 10.5 | 10.9 | 10.9 | 10.5 | 0.0 | 10.5 | |
| (2) Cancer Registry | | | | | | | | |
| Personal Services | 794,421 | 823,575 | 781,801 S | 781,859 B | 822,869 | (867) | 822,002 | BR #NP2, |
| FTE | <u>10.2</u> | <u>10.4</u> | <u>10.2</u> | <u>10.2</u> | <u>10.5</u> | <u>0.0</u> | <u>10.5</u> | BR #NP6 |
| General Fund | 188,105 | 189,350 | 188,483 | 187,669 | 188,644 | (867) | 187,777 | BA NP-16 |
| FTE | 2.0 | 1.9 | 2.0 | 2.0 | 2.0 | 0.0 | 2.0 | |
| Cash Funds | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Federal Funds | 606,316 | 634,225 | 593,318 | 594,190 | 634,225 | 0 | 634,225 | |
| FTE | 8.2 | 8.5 | 8.2 | 8.2 | 8.5 | 0.0 | 8.5 | |
| Operating Expenses | <u>90,555</u> | <u>54,232</u> | <u>90,557</u> | <u>90,557</u> B | <u>54,234</u> | <u>(141)</u> | <u>54,093</u> | BA NP-16 |
| General Fund | 30,550 | 30,550 | 30,552 | 30,552 | 30,552 | (141) | 30,411 | |
| Federal Funds | 60,005 | 23,682 | 60,005 | 60,005 | 23,682 | 0 | 23,682 | |
| (4) Suicide Prevention | | | | | | | | |
| Personal Services | 282,767 | 285,063 | 283,843 S | 281,601 B | 282,915 | (1,301) | 281,614 | BR #NP2, |
| FTE | <u>2.0</u> | <u>2.1</u> | <u>2.0</u> | <u>2.0</u> | <u>2.0</u> | <u>0.0</u> | <u>2.0</u> | BR #NP6 |
| General Fund | 282,767 | 285,063 | 283,843 | 281,601 | 282,915 | (1,301) | 281,614 | BA NP-16 |
| FTE | 2.0 | 2.1 | 2.0 | 2.0 | 2.0 | 0.0 | 2.0 | |
| Cash Funds | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |

| | FY 2008-09 | FY 2009-10 | FY 2010-11 | FY 2011-12 | | | Change | |
|---|------------|------------|-------------|-------------|--------------------|--------------------|---------------------|----------------|
| | Actual | Actual | Approp | Request | Committee Decision | Added GF Reduction | New Staff Recommend | Request |
| (6) Oral Health Programs | 1,094,004 | 1,245,377 | 861,784 S | 837,950 B | 1,208,647 | (827) | 1,207,820 | BR #NP2, |
| FTE | 3.7 | 4.9 | 3.0 | 3.0 | 4.8 | 0.0 | 4.8 | BR #NP6 |
| General Fund | 382,008 | 240,501 | 179,764 | 179,014 | 179,366 | (827) | 178,539 | BA NP-16 |
| FTE | 0.8 | 0.9 | 0.8 | 0.8 | 0.8 | 0.0 | 0.8 | |
| Cash Funds (Tobacco Settlement) | 246,130 | 178,504 | 224,667 | 199,684 | 202,909 | 0 | 202,909 | |
| FTE | 0.2 | 0.2 | 0.2 | 0.2 | 0.2 | 0.0 | 0.2 | |
| Cash Funds Exempt/RF (Tobacco Settlement) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 465,866 | 826,372 | 457,353 | 459,252 | 826,372 | 0 | 826,372 | |
| FTE | 2.7 | 3.8 | 2.0 | 2.0 | 3.8 | 0.0 | 3.8 | |
| (B) Women's Health - Family Planning | | | | | | | | |
| Personal Services | 1,460,821 | 1,197,321 | 1,180,566 S | 1,116,909 B | 1,082,396 | (1,772) | 1,080,624 | DI #3, BR #NP2 |
| FTE | 15.9 | 12.6 | 13.9 | 13.0 | 12.6 | 0.0 | 12.6 | BR #NP6 |
| General Fund | 438,756 | 442,484 | 388,768 | 383,566 | 385,568 | (1,772) | 383,796 | BA NP-16 |
| FTE | 5.2 | 5.2 | 5.8 | 5.8 | 5.8 | 0.0 | 5.8 | |
| Cash Funds | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| FTE | 1.5 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Cash Funds Exempt/RF | 181,962 | 59,169 | 58,577 | 0 | 1,160 | 0 | 1,160 | |
| FTE | 1.0 | 0.6 | 0.9 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 840,103 | 695,668 | 733,221 | 733,343 | 695,668 | 0 | 695,668 | |
| FTE | 8.2 | 6.8 | 7.2 | 7.2 | 6.8 | 0.0 | 6.8 | |
| Medicaid Reappropriated Funds | 59,169 | 59,169 | 58,577 | 0 | 296 | 0 | 296 | |
| GF in Medicaid RF | 29,585 | 29,585 | 29,289 | 0 | 148 | 0 | 148 | |
| Net General Fund | 468,341 | 472,069 | 418,057 | 383,566 | 385,716 | (1,772) | 383,944 | |
| Operating Expenses - GF | 3,355 | 3,355 | 3,355 | 3,355 | 3,355 | (15) | 3,340 | |
| Purchase of Services | 4,579,716 | 4,811,233 | 4,579,716 | 4,554,211 B | 4,794,753 | (5,677) | 4,789,076 | DI #3 |
| General Fund | 1,229,003 | 1,229,003 | 1,229,003 | 1,229,003 | 1,229,003 | (5,677) | 1,223,326 | BA NP-16 |
| Cash Funds Exempt/RF | 25,505 | 16,480 | 25,505 | 0 | 0 | 0 | 0 | |
| Federal Funds | 3,325,208 | 3,565,750 | 3,325,208 | 3,325,208 | 3,565,750 | 0 | 3,565,750 | |
| Medicaid Reappropriated Funds | 25,505 | 16,480 | 25,505 | 0 | 0 | 0 | 0 | |
| GF in Medicaid RF | 12,753 | 8,240 | 12,753 | 0 | 0 | 0 | 0 | |
| Net General Fund | 1,241,756 | 1,237,243 | 1,241,756 | 1,229,003 | 1,229,003 | (5,677) | 1,223,326 | |

| | FY 2008-09 | FY 2009-10 | FY 2010-11 | FY 2011-12 | | | Change | |
|--|----------------|---------------|---------------|-----------------|--------------------|--------------------|---------------------|------------------|
| | Actual | Actual | Approp | Request | Committee Decision | Added GF Reduction | New Staff Recommend | Request |
| (D) Prevention Partnerships | | | | | | | | |
| (1) Interagency Prevention Programs Coordination | | | | | | | | |
| Personal Services | 206,483 | 114,913 | 114,504 S | 113,175 B | 113,770 | (523) | 113,247 | BR #NP2, |
| FTE | <u>2.8</u> | <u>1.9</u> | <u>2.0</u> | <u>2.0</u> | <u>2.0</u> | <u>0.0</u> | <u>2.0</u> | BR #NP6 |
| General Fund | 206,483 | 114,913 | 114,504 | 113,175 | 113,770 | (523) | 113,247 | BA NP-16 |
| FTE | 2.8 | 1.9 | 2.0 | 2.0 | 2.0 | 0.0 | 2.0 | |
| Cash Funds | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Operating Expenses | <u>16,763</u> | <u>16,762</u> | <u>16,769</u> | <u>16,769</u> B | <u>16,769</u> | <u>(77)</u> | <u>16,692</u> | BA NP-16 |
| General Fund | 16,763 | 16,762 | 16,769 | 16,769 | 16,769 | (77) | 16,692 | |
| School-Based Health Centers - GF | 974,810 | 998,542 | 998,204 S | 997,943 | 998,229 | (4,610) | 993,619 | BR #NP2, |
| FTE | 0.6 | 0.5 | 0.7 | 0.7 | 0.7 | 0.0 | 0.7 | BR #NP6, BA NP-1 |
| Federal and Private Grants | 301,230 | 1,217,844 | 294,413 | 296,137 | 1,217,844 | 0 | 1,217,844 | BR #NP6 |
| FTE | <u>3.2</u> | <u>3.1</u> | <u>3.2</u> | <u>3.2</u> | <u>3.1</u> | <u>0.0</u> | <u>3.1</u> | |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | | 0 | |
| Federal Funds | 301,230 | 1,217,844 | 294,413 | 296,137 | 1,217,844 | | 1,217,844 | BR #NP6 |
| FTE | 3.2 | 3.1 | 3.2 | 3.2 | 3.1 | | 3.1 | |
| (3) Children With Special Needs | | | | | | | | |
| (a) Health Care Program for Children with Special Needs | | | | | | | | |
| Personal Services | 1,238,770 | 1,115,719 | 1,171,596 S | 1,163,082 B | 1,048,659 | (2,796) | 1,045,863 | BR #NP2, |
| FTE | <u>13.2</u> | <u>11.6</u> | <u>15.9</u> | <u>15.9</u> | <u>13.6</u> | <u>0.0</u> | <u>13.6</u> | BR #NP6 |
| General Fund | 667,172 | 675,504 | 621,904 | 605,285 | 608,444 | (2,796) | 605,648 | BA NP-16 |
| FTE | 7.4 | 7.6 | 9.6 | 9.6 | 9.6 | 0.0 | 9.6 | |
| Federal Funds | 571,598 | 440,215 | 549,692 | 557,797 | 440,215 | 0 | 440,215 | |
| FTE | 5.8 | 4.0 | 6.3 | 6.3 | 4.0 | 0.0 | 4.0 | |
| Operating Expenses | <u>100,577</u> | <u>69,758</u> | <u>71,939</u> | <u>71,939</u> B | <u>71,668</u> | <u>(272)</u> | <u>71,396</u> | BA NP-16 |
| General Fund | 87,577 | 57,029 | 58,939 | 58,939 | 58,939 | (272) | 58,667 | |
| Federal Funds | 13,000 | 12,729 | 13,000 | 13,000 | 12,729 | 0 | 12,729 | |
| Purchase of Services | 3,410,286 | 3,544,821 | 3,451,160 | 3,451,160 B | 3,585,695 | (8,574) | 3,577,121 | BA NP-16 |
| FTE | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | <u>0.0</u> | |
| General Fund | 1,856,473 | 1,856,473 | 1,856,473 | 1,856,473 | 1,856,473 | (8,574) | 1,847,899 | |
| Cash Funds | 0 | 0 | 40,874 | 40,874 | 40,874 | 0 | 40,874 | |
| FTE | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Federal Funds | 1,553,813 | 1,688,348 | 1,553,813 | 1,553,813 | 1,688,348 | 0 | 1,688,348 | |

| | FY 2008-09 | FY 2009-10 | FY 2010-11 | FY 2011-12 | | | Change Request |
|--|--------------|--------------|--------------|--------------|--------------------|--------------------|---------------------|
| | Actual | Actual | Approp | Request | Committee Decision | Added GF Reduction | |
| (10) HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION | | | | | | | |
| (A) Licensure | | | | | | | |
| Health Facilities General Licensure Program | 812,193 | 1,515,418 | 2,912,218 S | 2,902,308 B | 2,863,863 | (710) | 2,863,153 BR #NP2, |
| FTE | <u>10.9</u> | <u>18.2</u> | <u>44.8</u> | <u>44.8</u> | <u>44.8</u> | <u>0.0</u> | <u>0.0</u> BR #NP6 |
| General Fund | 153,977 | 157,747 | 154,988 | 153,612 | 154,249 | (710) | 153,539 BA NP-16 |
| FTE | 1.9 | 1.3 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Cash Funds | 658,216 | 1,357,671 | 2,757,230 | 2,748,696 | 2,709,614 | 0 | 2,709,614 |
| FTE | 9.0 | 16.9 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Assisted Living Facilities Program | 727,888 | 821,772 | 914,796 S | 912,208 B | 901,609 | (511) | 901,098 BR #NP2, |
| FTE | <u>10.2</u> | <u>10.2</u> | <u>11.2</u> | <u>11.2</u> | <u>11.2</u> | <u>0.0</u> | <u>0.0</u> BR #NP6 |
| General Fund | 110,452 | 109,797 | 109,275 | 110,670 | 111,181 | (511) | 110,670 BA NP-16 |
| FTE | 1.6 | 1.6 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Cash Funds | 617,436 | 711,975 | 805,521 | 801,538 | 790,428 | 0 | 790,428 |
| FTE | 8.6 | 8.6 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Cash Funds Exempt/RF | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| (B) Emergency Medical Services | | | | | | | |
| Poison Control - GF | 1,421,442 | 1,421,442 | 1,421,442 | 1,421,442 | 1,421,442 | (6,566) | 1,414,876 |
| (11) EMERGENCY PREPAREDNESS AND RESPONSE DIVISION | | | | | | | |
| Program Costs | 18,555,728 | 36,078,143 | 19,840,519 S | 19,806,752 B | 36,955,981 | (8,105) | 36,947,876 BR #NP2, |
| FTE | <u>45.8</u> | <u>33.9</u> | <u>42.5</u> | <u>42.5</u> | <u>35.0</u> | <u>0.0</u> | <u>35.0</u> BR #NP6 |
| General Fund | 0 | 878,214 | 1,757,179 | 1,754,626 | 1,756,052 | (8,105) | 1,747,947 BA NP-16 |
| FTE | 0.0 | 0.9 | 2.0 | 2.0 | 2.0 | 0.0 | 2.0 |
| Federal Funds | 18,555,728 | 35,199,929 | 18,083,340 | 18,052,126 | 35,199,929 | 0 | 35,199,929 |
| FTE | 45.8 | 33.0 | 40.5 | 40.5 | 33.0 | 0.0 | 33.0 |
| PUBLIC HEALTH AND ENVIRONMENT - HEALTH AND ADMINISTRATIVE DIVISIONS | | | | | | | |
| TOTAL | 396,645,985 | 376,440,109 | 385,699,007 | 378,186,800 | 396,010,718 | (102,729) | 395,907,989 |
| FTE | <u>711.7</u> | <u>735.6</u> | <u>767.6</u> | <u>763.4</u> | <u>773.2</u> | <u>0.0</u> | <u>773.2</u> |
| General Fund | 22,249,314 | 22,499,078 | 23,331,296 | 23,460,100 | 23,191,039 | (102,729) | 23,088,310 |
| General Fund Exempt | 478,004 | 445,362 | 447,000 | 422,149 | 439,200 | 0 | 439,200 |
| Cash Funds | 116,192,518 | 96,033,375 | 97,852,199 | 86,368,520 | 112,537,598 | 0 | 112,537,598 |
| Cash Funds Exempt/RF | 54,896,375 | 28,047,395 | 26,294,024 | 25,985,742 | 23,253,574 | 0 | 23,253,574 |
| Federal Funds | 202,829,774 | 229,414,899 | 237,774,488 | 241,950,289 | 236,589,307 | 0 | 236,589,307 |
| Medicaid Reappropriated Funds | 5,028,166 | 4,705,001 | 4,997,723 | 4,925,377 | 4,233,517 | 0 | 4,233,517 |
| GF in Medicaid RF | 1,351,754 | 1,449,156 | 1,520,857 | 1,532,523 | 1,482,366 | 0 | 1,482,366 |
| Net General Fund | 23,601,068 | 23,948,234 | 24,852,153 | 24,992,623 | 24,673,405 | (102,729) | 24,570,676 |