

# JOINT BUDGET COMMITTEE



## STAFF FIGURE SETTING FY 2024-25

### 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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## HOW TO USE THIS DOCUMENT

The Department Overview contains a table summarizing the staff recommended incremental changes followed by brief explanations of each incremental change. A similar overview table is provided for each division, but the description of incremental changes is not repeated, since it is available under the Department Overview. More details about the incremental changes are provided in the sections following the Department Overview and the division summary tables.

Decision items, both department-requested items and staff-initiated items, are discussed either in the Decision Items Affecting Multiple Divisions or at the beginning of the most relevant division. Within a section, decision items are listed in the requested priority order, if applicable.

In some of the analysis of decision items in this document, you may see language denoting certain 'levels of evidence', e.g. theory-informed, evidence-informed, or proven. For a detailed explanation of what is meant by 'levels of evidence', and how those levels of evidence are categorized, please refer to Section 2-3-210 (2), C.R.S.

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# DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

## DEPARTMENT OVERVIEW

The Department of Public Health and Environment's administrative and public health programming resides in the following divisions:

### ADMINISTRATION AND SUPPORT

- Houses the Health Disparities Program, which provides grants for health initiatives aimed at reducing and eliminating disparities in the provision of health services across the state; and
- Houses the Office of Planning, Partnerships, and Improvement, which oversees the distribution of state funds to local public health agencies (LPHAs).

### CENTER FOR HEALTH AND ENVIRONMENTAL DATA (CHED)

- Maintains a database of all Colorado births, deaths, marriages, and divorces;
- Provides birth and death certificates;
- Gathers and analyzes health data for use by public and private agencies; and
- Operates the Medical Marijuana Registry.

### DISEASE CONTROL AND PUBLIC HEALTH RESPONSE (DCPHR)

- Operates the Immunization Program, which includes the Immunization Outreach Program, the Colorado Immunization Information System, and grants to LPHAs for operation of immunization clinics;
- Assesses the threat risk from environmental contaminants on human health, and, when needed, takes action to contain and/or nullify these threats;
- Provides testing, analysis, and results reporting of laboratory tests on specimens and samples submitted by other divisions, departments, and private clients;
- Includes the following laboratory units: Molecular Sciences and Newborn Screening Units, Public Health Microbiology and Environmental Microbiology Units, Organic and Inorganic Units, and Evidential Breath and Alcohol Testing and Certification Units;
- Works with local agencies and other state departments to ensure Colorado is prepared for, and able to respond to, a variety of natural and man-made disasters; and
- Coordinates a statewide network of laboratories, local agencies, hospitals, and other resources that can be utilized during disaster response.

### OFFICE OF STI, HIV, AND VIRAL HEPATITIS (OSHV)

- Identifies, contains, controls, and tracks the spread of communicable diseases, with a focus on hepatitis, tuberculosis, sexually transmitted infections, and HIV/AIDS;
- Houses the Colorado HIV and AIDS Prevention Grant Program (CHAPP); and
- Houses the Ryan White Program.

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## PREVENTION SERVICES DIVISION (PSD)

- Tobacco Education, Prevention, and Cessation Program and the Cancer, Cardiovascular Disease, and Chronic Pulmonary Disease Prevention, Early Detection, and Treatment Program;
- Breast and Cervical Cancer Screening Program;
- Programs for children with special needs and the Genetics Counseling Program;
- The School-Based Health Centers Program;
- Injury and suicide prevention programs;
- Primary Care Office and Oral Health Program; and
- Women, Infants, and Children and Child and Adult Care Food federal assistance programs.

## HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION (HFEMSD)

- Enforces, through certification and inspections, the standards for the operation of health care facilities, including hospitals and nursing facilities; and
- Inspects and certifies emergency medical and trauma service providers.

## SUMMARY OF STAFF RECOMMENDATIONS

DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$808,083,100	\$115,954,005	\$295,300,422	\$66,298,363	\$330,530,310	1,848.6
Other legislation	23,371,471	18,357,576	1,435,745	3,578,150	0	33.1
HB 24-1196 (CDPHE Supplemental)	11,016,262	1,773,331	1,739,178	7,503,753	0	0.9
<b>TOTAL</b>	<b>\$842,470,833</b>	<b>\$136,084,912</b>	<b>\$298,475,345</b>	<b>\$77,380,266</b>	<b>\$330,530,310</b>	<b>1,882.6</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$842,470,833	\$136,084,912	\$298,475,345	\$77,380,266	\$330,530,310	1,882.6
R1 Public health infrastructure	15,014,300	15,014,300	0	0	0	83.0
R2 Stationary sources control fund	5,900,000	0	5,900,000	0	0	0.0
R3 Health facility licensure funding	3,740,881	3,190,368	550,513	0	0	1.8
R4 State syphilis response	1,912,065	1,912,065	0	0	0	3.8
R5 State lab operating	3,602,198	1,117,149	2,485,049	0	0	0.0
R6 Tuberculosis program infrastructure	38,881	38,881	0	0	0	0.0
R7 Environmental justice	0	0	0	0	0	0.0
R8 Lead testing support	1,209,055	1,209,055	0	0	0	2.7
R9 Office of health equity and environmental justice	3,396,753	193,738	1,115,938	1,964,493	122,584	10.3
R10 Office of health equity tribal relations	(115,059)	93,446	0	0	(208,505)	0.9
R11a FPP technical adjustments	0	0	0	0	0	0.0
R11b DEHS technical adjustment	0	0	0	0	0	0.0
R12 Common policy provider rate adjustment	429,967	381,236	48,731	0	0	0.0
BA1 Medicaid facility oversight	318,308	0	0	318,308	0	3.7
BA2 EBAT database funding	169,800	0	169,800	0	0	0.0
BA3 State lab utilities	97,000	0	0	97,000	0	0.0
BA4 Phone system modernization	145,000	0	0	145,000	0	0.0
BA5 Waste tire program	745,000	0	745,000	0	0	0.0
BA6 OEPR (M) note	3,568,814	0	0	0	3,568,814	0.0
Staff-initiated annualize HB24-1214CCV funding	250,000	0	250,000	0	0	0.0
Staff-initiated healthy eating incentives program	0	0	0	0	0	0.0
MSA, A35, Prop EE tobacco adjustments	(7,869,765)	0	(7,114,871)	(754,894)	0	0.0
Centrally appropriated line items	11,109,141	3,397,632	17,296,564	(7,754,501)	(1,830,554)	0.0
Non-prioritized decision items	2,151,994	1,463,701	(30,159)	716,843	1,609	0.0
Indirect cost assessment	1,082,062	0	290,008	351,605	440,449	0.0
Annualize prior year legislation	(5,470,691)	(13,852,566)	14,770,452	(6,388,577)	0	(103.0)
Annualize prior year budget actions	(17,962,987)	(5,300,011)	(2,798,764)	(3,123,114)	(6,741,098)	6.5
<b>TOTAL</b>	<b>\$865,933,550</b>	<b>\$144,943,906</b>	<b>\$332,153,606</b>	<b>\$62,952,429</b>	<b>\$325,883,609</b>	<b>1,892.3</b>
<b>INCREASE/(DECREASE)</b>	<b>\$23,462,717</b>	<b>\$8,858,994</b>	<b>\$33,678,261</b>	<b>(\$14,427,837)</b>	<b>(\$4,646,701)</b>	<b>9.7</b>
Percentage Change	2.8%	6.5%	11.3%	(18.6%)	(1.4%)	0.5%
FY 2024-25 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	\$446,779	(\$855,686)	\$4,706,146	\$237,754	(\$3,641,435)	8.5

## DESCRIPTION OF INCREMENTAL CHANGES

**R1 PUBLIC HEALTH INFRASTRUCTURE:** The recommendation includes an increase of \$15.0 million General Fund in FY 2024-25 and ongoing to extend appropriations from S.B. 21-243 (Public Health Infrastructure). The Division of Disease Control and Public Health Response would receive \$7.5 million of this funding and continue to support 83.0 FTE, and the other \$7.5 million would go towards distributions to local public health agencies.

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**R3 HEALTH FACILITY LICENSURE FUNDING [LEGISLATION RECOMMENDED]:** The recommendation includes:

- JBC sponsored legislation to increase fees by 10.0 percent in FY 2026-27, 6.0 percent or prior calendar year CPI, whichever is higher, in FY 2027-28 through FY 2028-29, and then adjust fees to prior calendar year CPI in each year following.
- Increased cash fund spending authority of \$550,513 in FY 2024-25 increasing through FY 2028-29 reflective of the fee increases, and corresponding General Fund appropriations of \$3.2 million in FY 2024-25 decreasing through FY 2028-29, and remaining constant at \$2.2 million in each year after; and
- Combining the Home and Community Survey and Nursing and Acute Care Survey line items into a new Health Facility Survey line item to allow the Division to manage the programs as a whole, maximize the flexibility of General Fund, and allow staff to work across programs serving different facilities as needed.

**R4 STATE SYPHILIS RESPONSE:** The recommendation includes \$1.91 million General Fund and 3.8 FTE in FY 2024-25 annualizing to \$1.96 million General Fund and 4.0 FTE in FY 2025-26 through FY 2027-28 to address increased incidence of syphilis in the State and fund programs to increase access to testing and treatment. The funding would be used for marketing, provider engagement, screening and testing, and treatment, and the FTEs would support outreach, linkage to care and program coordination, data evaluation, field treatment, and Bicillin delivery. The four year timeline to respond to the syphilis outbreak is based on other outbreaks the Department has seen and responded to.

**R5 STATE LAB OPERATING:** The recommendation includes an increase of \$2.7 million total funds, with \$1.1 million coming from the General Fund, \$1.4 million from the Newborn Screening Fund, and \$173,951 from the Laboratory Cash Fund for FY 2024-25 and ongoing for the State Lab to support:

- Courier services that deliver samples to the lab from across Colorado;
- Distribution of supplies to healthcare providers;
- Biological and chemical waste disposal; and
- iPassport software which manages standard operating procedures, regulations, safety requirements and equipment at the State Lab.

**R6 TUBERCULOSIS PROGRAM INFRASTRUCTURE:** The recommendation includes an appropriation of General Fund appropriation \$38,881 in FY 2024-25 and ongoing for translating forms and educational materials into additional languages, purchasing TB treatment drugs, and contracts for TB nurses to assist the LPHAs with case management.

**R10 OFFICE OF HEALTH EQUITY TRIBAL RELATIONS:** The recommendation includes \$93,446 General Fund and 0.9 FTE in FY 2024-25 annualizing to \$113,285 General Fund and 1.0 FTE in FY 2025-26 and ongoing to support 1.0 FTE for a Tribal Data Systems Specialist on the Tribal Relations Team to continue addressing health disparities observed in Colorado Ute and Southern Ute tribes. Federal funding from a CDC Health Disparities Grant previously supported 2.0 data specialists on the Tribal Relations Team; the funding is not renewable and will end after FY 2023-24. This team supports and advises the Department in its role as a member of the Colorado Commission of Indian Affairs (CCIA) and coordinates requests for consultation from Tribal representatives.



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**R11A FPP TECHNICAL ADJUSTMENTS:** The recommendation includes a net-zero technical change to the Long Bill to: (1) Combine all of the Family Planning Program lines in the Long Bill into one line called “Reproductive Health Program”; and (2) rename the subcategory (1) Women’s Health to (1) Community Health. This change would allow for more flexibility in the use of the funds for services which would ensure ability to fully expend the allocations as well as accurately describe the subcategory which includes family planning services and the disordered eating prevention program which provide services to individuals regardless of gender.

**R12 COMMON POLICY PROVIDER RATE INCREASE:** The recommendation includes an increase of \$381,236 General Fund and \$48,731 in cash fund spending authority from the Marijuana Tax Cash Fund, for a provider rate increase of 2.5 percent for LPHAs in FY 2024-25 and ongoing. This provider rate increase is calculated including the \$7.5 million General Fund recommended in R1. This decision item is linked to actions the Committee takes on the Community Provider Rate common policy.

**BA1 MEDICAID FACILITY OVERSIGHT:** The recommendation includes an increase of \$318,263 reappropriated funds and 3.7 FTE in FY 2024-25 annualizing to \$387,895 reappropriated funds and 4.0 FTE in FY 2025-26 and ongoing. The source of the reappropriated funds would be a mix of Medicaid General Fund and Medicaid federal funds from the Department of Healthcare Policy Financing (HCPF), and would create 4.0 new positions to support the Department’s work in regulating health facilities that serve individuals receiving services funded through Medicaid.

**BA2 EVIDENTIAL BREATH ALCOHOL TESTING (EBAT) DATABASE FUNDING:** The recommendation includes an increase of \$169,800 cash fund spending authority from the Law Enforcement Assistance Fund (LEAF) in FY 2024-25, annualizing to \$25,800 in FY 2025-26 and ongoing for the Evidential Breath Alcohol Testing (EBAT) Program to develop and maintain a new vendor-supported and cloud-hosted breath test sample results database.

**BA3 STATE LAB UTILITIES:** The request includes an increase of \$97,000 in reappropriated fund spending authority for FY 2023-24 and ongoing for State laboratory utilities from departmental indirect cost recoveries.

**BA4 PHONE SYSTEM MODERNIZATION:** The recommendation includes an increase of \$145,000 in reappropriated fund spending authority for FY 2023-24 and ongoing for its phone system modernization project coming from departmental indirect cost recoveries.

**BA6 OEPR (M) NOTE:** The recommendation includes replacing the (M) note on the Emergency Preparedness and Response Program line item within the Division of Diseases Control and Public Health Response with a footnote on the line item, indicating the match rate and requiring the Department to notify the Joint Budget Committee by November 1<sup>st</sup> of each fiscal year of changes to the match rate or federal funding available. The recommendation also includes a true-up of federal funds in FY 2023-24 and FY 2024-25.

**STAFF-INITIATED HEALTHY EATING INCENTIVES PROGRAM [LEGISLATION RECOMMENDED]:** The recommendation is for the Committee to sponsor legislation to move funding for the Healthy Food and Active Living Program from a footnote to its own line item. This requires legislation to create the program in statute and appropriate funding directly to that program.

**STAFF-INITIATED ANNUALIZE HB24-1214 CCV FUNDING:** The recommendation includes adding annual ongoing appropriations of \$1.25 million from the Community Crime Victims Grant (CCVG) Program Cash Fund, in order to annualize H.B. 24-1214 (Community Crime Victims Funding), a JBC-sponsored bill that was introduced with the supplemental package. The recommendation is that these appropriations allow for one additional year of spending authority in order to ensure grantees can expend the funding in accordance with their fiscal calendars. This out-year spending authority will be denoted in a footnote.

**MSA, A35, PROPOSITION EE TOBACCO ADJUSTMENTS:** The recommendation includes several line item adjustments for programs affected by Tobacco Master Settlement Agreement, Amendment 35, and Proposition EE revenues based on the December 2023 and January 2024 Legislative Council Staff forecasts.

**CENTRALLY APPROPRIATED LINE ITEMS:** The recommendation includes the following adjustments to centrally appropriated line items; final amounts will reflect the Committee's decisions on Common Policy. *These request items will be addressed in separate staff figure settings for Compensation Common Policies, the Department of Personnel, and the Governor's Office.*

CENTRALLY APPROPRIATED LINE ITEMS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
Salary survey	\$9,690,876	\$2,388,298	\$3,857,178	\$931,173	\$2,514,227	0.0
PERA Direct Distribution	3,568,988	2,059,306	1,202,749	306,933	0	0.0
Step Plan	2,299,066	563,285	831,908	270,274	633,599	0.0
Payments to OIT	1,555,208	1,277,850	10,687,365	(8,387,667)	(2,022,340)	0.0
Paid Family & Medical Leave Insurance	811,715	149,858	273,661	67,786	320,410	0.0
Risk management & property adjustment	238,851	297,341	0	(58,490)	0	0.0
Workers' compensation	71,049	112	0	70,937	0	0.0
ALJ services	36,591	8,792	639	27,160	0	0.0
Capitol Complex leased space	4,830	356	0	4,474	0	0.0
AED/SAED base adjustment	0	0	0	0	0	0.0
AED	0	0	0	0	0	0.0
SAED	0	0	0	0	0	0.0
Health, life, and dental	(4,771,343)	(1,735,764)	(287,419)	(123,924)	(2,624,236)	0.0
AED and SAED adjustment	(958,996)	(1,259,298)	834,672	(20,158)	(514,212)	0.0
CORE adjustment	(690,547)	(72,117)	0	(618,430)	0	0.0
Legal services	(396,519)	(198,260)	0	(198,259)	0	0.0
Health, life, dental true-up	(339,174)	(63,994)	(117,320)	(26,216)	(131,644)	0.0
Short-term disability	(11,454)	(18,133)	13,131	(94)	(6,358)	0.0
<b>TOTAL</b>	<b>\$11,109,141</b>	<b>\$3,397,632</b>	<b>\$17,296,564</b>	<b>(\$7,754,501)</b>	<b>(\$1,830,554)</b>	<b>0.0</b>

**NON-PRIORITIZED DECISION ITEMS:** The recommendation includes a net increase of \$2.2 million total funds including \$1.5 million General Fund for non-prioritized decision items including; final amounts will reflect the Committee's decisions on the non-prioritized decision items and common policies. *These request items will be addressed in separate staff figure settings for Compensation Common Policies, the Department of Personnel, and the Governor's Office.*

NON-PRIORITIZED DECISION ITEMS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
NP Central Services Omnibus Request	\$2,180,924	\$1,466,412	\$0	\$714,512	\$0	0.0
NP SWICAP adjustment	38,999	0	30,650	8,349	0	0.0

NON-PRIORITIZED DECISION ITEMS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
DPS Digital trunk radio	3,866	3,866	0	0	0	0.0
NP4 Convert contractor resources to FTE	1,609	0	0	0	1,609	0.0
CORE Operating Resources	0	0	0	0	0	0.0
NP1 Annual fleet vehicle request	(73,404)	(6,577)	(60,809)	(6,018)	0	0.0
<b>TOTAL</b>	<b>\$2,151,994</b>	<b>\$1,463,701</b>	<b>(\$30,159)</b>	<b>\$716,843</b>	<b>\$1,609</b>	<b>0.0</b>

**INDIRECT COST ASSESSMENT:** The recommendation includes a net increase of \$1,082,062 total funds to reflect the Department's indirect cost assessment.

**ARPA FUND SOURCE ADJUSTMENTS:** The summary includes an informational adjustment related to ARPA funds to account for the executive branch qualifying ARPA funds as federal funds, while JBC staff account for them as cash funds.

**ANNUALIZE PRIOR YEAR LEGISLATION:** The recommendation includes a net decrease of \$5.5 million total funds to reflect the FY 2024-25 impact of bills passed in previous sessions, summarized in the following table.

ANNUALIZE PRIOR YEAR LEGISLATION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
SB23-193 Air quality investments	\$21,406,281	\$0	\$21,406,281	\$0	\$0	(5.0)
HB20-1427 Prop EE	20,000,000	0	20,000,000	0	0	7.0
HB23-1257 Mobile home parks water quality	2,213,164	1,106,582	0	1,106,582	0	5.5
HB23-1244 Regional health	1,506,413	1,506,413	0	0	0	0.1
HB22-1244 Toxic air contaminants	1,298,074	1,298,074	0	0	0	12.5
SB23-240 Dairy fees	390,059	0	390,059	0	0	0.0
SB22-254 Increased safety in ALR	101,884	101,884	0	0	0	0.8
SB23-014 Disordered eating	64,719	64,719	0	0	0	0.8
HB23-1223 Grants task force	54,157	54,157	0	0	0	0.6
SB22-178 Deter tampering	48,730	48,730	0	0	0	1.3
SB23-198 Clean energy plans	36,371	36,371	0	0	0	0.6
SB23-172 POWER Act	25,490	25,490	0	0	0	0.1
HB22-1289 Health benefits	10,349	10,349	0	0	0	0.0
SB23-290 Natural medicine regulation	5,650	5,650	0	0	0	0.8
HB23-1242 Water conservation	2,742	0	2,742	0	0	0.0
HB23-1213 Stop the bleed	504	504	0	0	0	0.0
SB21-243 Public health infrastructure	(21,090,149)	0	(21,090,149)	0	0	(121.4)
HB23-1194 Closed landfills	(14,991,406)	(15,000,000)	0	8,594	0	0.2
HB24-1196 CDPHE supplemental	(13,423,080)	(1,773,331)	(4,145,996)	(7,503,753)	0	0.0
SB22-182 Econ mobility program	(1,828,548)	0	(1,828,548)	0	0	(3.8)
SB23-271 Intoxicating cannabinoids	(422,276)	(422,276)	0	0	0	0.1
HB23-1008 Food accessibility	(250,000)	(250,000)	0	0	0	0.0
SB23-189 Reproductive health care	(200,000)	(200,000)	0	0	0	0.0
SB23-186 COGCC study methane	(75,410)	(75,410)	0	0	0	(0.1)
HB23-1218 Health facility patient info denied services	(64,627)	(64,627)	0	0	0	(0.7)
SB22-225 Ambulance sustainability	(62,476)	(62,476)	0	0	0	(0.3)
HB19-1279 Regulation of firefighting foam	(55,278)	(55,278)	0	0	0	(0.7)
SB23-148 Illegal drug labs	(38,453)	(74,516)	36,063	0	0	(0.5)
HB22-1401 Hospital nurse staffing	(36,573)	(36,573)	0	0	0	(0.4)
HB23-1077 Informed consent	(32,915)	(32,915)	0	0	0	(0.4)
HB23-1161 Appliance standards	(26,439)	(26,439)	0	0	0	0.3
SB23-167 Certified midwives	(15,393)	(15,393)	0	0	0	(0.2)
SB23-016 GG reduction measures	(14,706)	(14,706)	0	0	0	(0.2)

ANNUALIZE PRIOR YEAR LEGISLATION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
SB23-253 Compostable products	(4,036)	(4,036)	0	0	0	(0.1)
SB23-002 Medicaid reimbursement	(3,340)	(3,340)	0	0	0	0.0
HB23-1294 Pollution prevention	(173)	(173)	0	0	0	0.1
<b>TOTAL</b>	<b>(\$5,470,691)</b>	<b>(\$13,852,566)</b>	<b>\$14,770,452</b>	<b>(\$6,388,577)</b>	<b>\$0</b>	<b>(103.0)</b>

**ANNUALIZE PRIOR YEAR BUDGET ACTIONS:** The recommendation includes a net decrease of \$18.0 million total funds to reflect the FY 2024-25 impact of budget decisions made in previous sessions, summarized in the following table.

ANNUALIZE PRIOR YEAR BUDGET ACTIONS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY22-23 R1 APCD transformation	\$2,114,422	\$0	\$2,114,422	\$0	\$0	0.0
FY23-24 R1 Protective water quality	484,079	484,079	0	0	0	6.4
FY23-24 BA2 BRFS Assistance	54,559	54,559	0	0	0	0.0
FY23-24 R13 CCC registry staffing	35,197	35,197	0	0	0	0.0
FY23-24 R7 Address syphilis	20,540	20,540	0	0	0	0.1
FY23-24 R15 DETC leased space	7,020	0	7,020	0	0	0.0
FY23-24 BA3 Preventing outbreaks	5,450	5,450	0	0	0	0.0
FY23-24 CCVS LB amendment	0	0	0	0	0	0.0
A35, Tobacco, CCPD adjustment	0	0	0	0	0	0.0
FY23-24 IT accessibility	(8,365,460)	(3,510,984)	(1,100,058)	(2,695,351)	(1,059,067)	0.0
Prior year salary survey	(7,843,836)	(1,221,852)	(1,720,148)	(404,086)	(4,497,750)	0.0
FY23-24 R3 Health facilities CF relief	(2,100,000)	0	(2,100,000)	0	0	0.0
FY23-24 Birth defects monitoring and FF true-up	(1,184,281)	0	0	0	(1,184,281)	0.0
FY23-24 FPP LB amendment	(500,000)	(500,000)	0	0	0	0.0
FY23-24 R4 Dairy protection fee relief	(412,000)	(412,000)	0	0	0	0.0
FY23-24 R6 VSRCF fee relief	(180,000)	(180,000)	0	0	0	0.0
FY23-24 Mental health first aid LB amendment	(75,000)	(75,000)	0	0	0	0.0
FY23-24 BA4 Indirect spending authority	(14,000)	0	0	(14,000)	0	0.0
FY23-24 NP1 OIT budget request	(9,677)	0	0	(9,677)	0	0.0
<b>TOTAL</b>	<b>(\$17,962,987)</b>	<b>(\$5,300,011)</b>	<b>(\$2,798,764)</b>	<b>(\$3,123,114)</b>	<b>(\$6,741,098)</b>	<b>6.5</b>

## MAJOR DIFFERENCES FROM THE REQUEST

The following are the major differences from the Department's request:

- **MSA, A35, Prop EE tobacco adjustments:** The recommendation includes adjustments for tobacco revenue;
- **R3 Health facility licensure funding:** The recommendation includes greater cash fund and General Fund spending authority;
- **R5 State lab operating:** The recommendation is the same total amount, however includes less General Fund and greater cash fund appropriations;
- **R6 Tuberculosis infrastructure:** The recommendation does not include the requested FTE and funding for those FTE;
- **First year FTE requests:** Throughout the document, staff does not recommend appropriations for first year centrally appropriated costs for new FTE requests per JBC policy; and
- **Supplemental bill annualizations:** Staff recommendation includes the annualization of H.B. 24-1196 (CDPHE Supplemental) and H.B. 24-1214 (CCVG Funding).

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## DECISION ITEMS AFFECTING MULTIPLE DIVISIONS

### → R1 PUBLIC HEALTH INFRASTRUCTURE

*REQUEST:* The Department is requesting \$15.0 million in ongoing General Fund to extend appropriations from S.B. 21-243 (Colorado Department of Public Health and Environment Appropriation Public Health Infrastructure) on a permanent basis in order to support the State's ability to effectively prevent, monitor, and respond to emerging disease outbreaks and other public health emergencies.

*RECOMMENDATION:* **Staff recommends approval of the request.**

*EVIDENCE LEVEL:* The Department indicated that this request item is theory-informed, which is defined as “a program or practice that reflects a moderate to low or promising level of confidence of effectiveness, ineffectiveness, or harmfulness as determined by tracking and evaluating performance measures including pre- and post-intervention evaluation of program outcomes, evaluation of program outputs, identification and implementation of a theory of change, or equivalent measures,” per Section 2-3-210 (3a), C.R.S.

**Staff agree that the overall request to provide continual funding in order to effectively further address public health is theory-informed.**<sup>1</sup> The increased funding to local public health agencies is backed up by data, however is more difficult to determine specific outcomes because of the varied uses of the funding. The Department's FTE portion of the request appears to align with research stating investments in public health can lead to public health gains, however the funding is more focused on administrative activities and harder to link directly to outcomes.

#### **PUBLIC HEALTH INVESTMENTS EVIDENCE**

The Department claims that (1) available evidence has demonstrated that spending on the public health system can result in important population health gains. Research suggests that these health gains can translate into resulting financial impacts beyond what was originally invested, (2) cuts to public health budgets are likely to generate significant additional costs to the health services and wider economy, and (3) public health activities that occur in a given year will not only improve population health in that same year, but will also improve population health for many years into the future.

- A 2018 report on “The Return on Investment of Public Health System Spending”<sup>2</sup> notes that public health spending can improve health outcomes finding: on a national level, a study of health department expenditures from 1993 to 2005 found that a \$10 per capita increase in local public health expenditures resulted in a 7.4 percent decrease in infectious disease morbidity and a 1.5 percent decrease in premature mortality on the county level, however local populations can differ in their priorities and needs regarding public health and the magnitude of impact associated with public health spending varies.
- A 2017 article, titled “Return on Investment of Public Health Interventions: A Systematic Review,”<sup>3</sup> suggests that local public health interventions are cost-saving, and offer substantial returns on investments, nationwide programs even more so.

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<sup>1</sup> The evidence-based analysis in this section was completed by JBC Staff Assistant Alanna Jackson

<sup>2</sup> [https://academyhealth.org/sites/default/files/roi\\_public\\_health\\_spending\\_june2018.pdf](https://academyhealth.org/sites/default/files/roi_public_health_spending_june2018.pdf)

<sup>3</sup> <https://jech.bmj.com/content/jech/71/8/827.full.pdf>

- The Department cites a 2016 article, titled “Return on Investment in California County Departments of Public Health,”<sup>4</sup> which suggests that there can be large return on investments for county departments of public health. The article supports the Department’s claim that the benefits to individuals in the same year that public health activities are performed; however, the article noted that “impacts of base-year public health activities are also felt in future years, but are much smaller.” The article explains that the diminishing reduction in mortality plays out for approximately a decade, with the number of additional lives slowly decreasing each year.

Staff identified additional research showing how public health entities can further their effectiveness in communities:

- One study found that effectiveness of local health agencies, including providing a greater number of services directly, was associated with having a full-time agency head, a larger budget derived from a greater number of funding sources, and a larger number of staff.<sup>5</sup>
- Another study observed that public health practices that enlist community engagement can be effective in increasing health consequences, health behavior self-efficacy, and perceived social support.<sup>6</sup>
- An additional study found that, in public health, “the need for increased investment in prevention and population-based services must be married to a recognition of the organizational needs for such tasks.” The study further notes that individualized care and collective care of populations must have the appropriate personnel, resources, and organizational structure in order to be effective.<sup>7</sup> This study most closely aligns with the requested administrative funding in DCPHR.

#### *ANALYSIS:*

#### **BACKGROUND**

#### **PUBLIC HEALTH FUNDING AND THE COVID-19 PANDEMIC**

Prior to the pandemic, the Department had already begun the process of identifying gaps in services in the existing public health infrastructure, which were highlighted with the onset of the COVID-19 pandemic. The 2019 Public Health Needs Assessment calculated that it would require between \$167 million to \$188 million per year in additional funding to support full implementation of all of the Core Public Health Services in Colorado’s local public health system. The State has a decentralized public health structure, even more so prior to COVID, meaning there was not a strong regional coordination network to rely on when the State was coordinating its pandemic response. Additionally, public health response programs and local public health agencies are majority federally funded. This federal funding is highly categorical, and does not allow the Department or local agencies flexibility in the use of these funds as crises arise.

During the COVID-19 pandemic, the Department received large amounts of federal funding and resources which scaled up the public health response team from 300 to 1,500 people in a very short amount of time. The Department found that as new COVID-related resources were allocated for crisis response, the Department lacked the underlying infrastructure to quickly scale up and use the additional resources to respond to the threats as needed. It lacked the mid-level management positions

<sup>4</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4940648/pdf/AJPH.2016.303233.pdf>

<sup>5</sup> <https://pubmed.ncbi.nlm.nih.gov/9009540/>

<sup>6</sup> <https://link.springer.com/article/10.1186/s12889-015-1352-y>

<sup>7</sup> [https://ajph.aphapublications.org/doi/full/10.2105/AJPH.2005.064444#\\_i6](https://ajph.aphapublications.org/doi/full/10.2105/AJPH.2005.064444#_i6)

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that could lead teams, provide regional coordination, and quickly scale up activities to meet public health response needs and effectively utilize increased resources.

### **INITIAL REQUEST**

In January of 2021, the Department submitted a request (BA2 - Public Health Infrastructure) for \$31.2 million General Fund and 121.4 FTE in FY 2021-22, annualizing to \$27.6 million General Fund and 157.2 FTE in FY 2022-23 and ongoing. JBC Staff recommended approval of \$30.8 million General Fund and 116.4 FTE for FY 2021-22, annualizing to \$23.7 million General fund and 130.2 FTE in FY 2022-23 and ongoing, however also indicated that a request of this size might also be appropriate for committees of reference.

This request was based upon an analysis of the number of staff members needed to strengthen Colorado's public health response as well as have the ability to scale up quickly to meet the demands of future public health emergencies. The requested funding was proposed to be used to strengthen Colorado's public health response by:

- Increasing ongoing funding to support LPHAs;
- Improving disease reporting systems;
- Expanding immunization education and outreach;
- Improving technology infrastructure for the 21st century;
- Increasing lab capacity and expanding the ability for case investigation and contact tracing; and
- Adding essential capacity to enable timely and consistent disease control, laboratory, and emergency preparedness services.

The Department's request was in direct response to the COVID-19 pandemic, which highlighted gaps in resources within the current public health funding model. The Department has broad statutory authority to "To establish and operate programs which the department determines are important in promoting, protecting, and maintaining the public's health by preventing, delaying, or detecting the onset of environmental and chronic diseases." And "To investigate and control the causes of epidemic and communicable diseases affecting the public health." As outlined in Section 25-1.5-105 (1)(a) C.R.S. and Section 25-1.5-102 (1)(a)(I) C.R.S. respectively. This authority was the basis for the initial and current request, as the Department feels these resources are necessary to be able to quickly and effectively respond to future public health crises.

The appropriation related to this request was not included in the FY 2021-22 Long Bill. Instead, Speaker McCluskie and Senator Moreno sponsored S.B. 21-243, which included appropriations and was approved by the General Assembly.

### **SENATE BILL 21-243 (COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT APPROPRIATION PUBLIC HEALTH INFRASTRUCTURE)**

For FY 2021-22 through FY 2023-24, S.B. 21-243 increased annual expenditures in CDPHE by \$21.1 million. In FY 2021-22, expenditures were from the Economic Recovery and Relief Cash Fund, and in FY 2022-23 and FY 2023-24, expenditures were planned to come from the General Fund. The JBC made the decision last year to have the FY 2023-24 appropriation come from the Revenue Loss Restoration Cash Fund. These expenditures would be distributed in the following amounts:

- \$11.1 million and 121.3 FTEs for the Division of Disease Control and Public Health Response to support the Division for administration and support, research, outreach, laboratory services, and emergency preparedness and disaster response activities; and

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- \$10.0 million to distribute to local public health agencies across the State for administration and support.

The Department reports this funding significantly improved the State's response to public health crises and ensured congruency of operations. This funding provided the resources to sustain not only routine surveillance but also respond to emerging threats and outbreaks. The Division utilized the S.B. 21-243 resources and staff to control and limit the spread of COVID-19, Mpox, influenza, HPAI, and RSV, as well as respond to disasters impacting Colorado communities like the Marshall Fire and Club Q shooting. At the same time, it was able to continue to provide other public health needs. Additionally, nine health equity regional coordinators were hired with SB 21-243 funding to establish a regional support network for local communities. While these regional coordinators primarily addressed the impacts of COVID-19 on community health, they also worked with community-based groups to advance health equity and address social determinants of health among higher risk and underserved populations.

### **FEDERAL FUNDING**

The Division received significant COVID-19 funding from the federal government, roughly estimated at a minimum of \$640.0 million dollars. The Division allocated these funds to various activities and programs that allowed the State to effectively prevent, monitor, and respond to COVID-19, while simultaneously increasing the Division's ability to do the same for future emerging disease outbreaks and other public health emergencies. Federal funding that supports COVID-19-specific activities ends beginning January 2024, and by July 2026, all federal COVID-19 funding streams will end.

Apart from COVID-19 funding, some of the Department's primary federal awards from entities such as the Centers for Disease Control have diminished over time. A large amount of Federal funding for State and local health departments comes from grants provided by the Prevention and Public Health Fund (PPHF) established under the Affordable Care Act. However, the PPHF has consistently been diverted for programming beyond public health. In 2012, federal legislation was signed reducing the PPHF budget by more than \$6.0 billion over nine years to pay for cuts to Medicare physician payments. In 2013, \$450.0 million was diverted to set up the federal health insurance marketplace. In 2017, another \$750.0 million from the fund was used for a federal Tax Cuts and Jobs Act. In 2023, as part of debt ceiling negotiations, the CDC lost approximately \$400 million of public health grant to fund disease intervention specialists in states.

The federal response during the COVID-19 pandemic is reflective of trends over the last twenty years, to allocate large influxes of resources in response to specific disease threats, while decreasing per capita spending over that same timeframe. Over the last ten years and prior to the passage of S.B. 21-243, the Department's total budget had grown by 36.9 percent, but federal funds reflected in the Long Bill, had grown by just 13.1 percent. This resulted in the overall share federal funds in the budget falling by 10.4 percent, shown in the table on the next page. It is also important to note that federal funds are informational in the State budget, and the Department has several environment programs which receive also federal funds.



FEDERAL FUNDS AS A PERCENTAGE OF THE TOTAL CDPHE BUDGET			
FISCAL YEAR	TOTAL BUDGET	FEDERAL FUNDS	PERCENTAGE
FY11-12	\$446,906,027	\$266,186,228	59.6%
FY12-13	468,998,263	245,427,880	52.3%
FY13-14	527,047,365	290,623,521	55.1%
FY14-15	552,219,752	291,317,631	52.8%
FY15-16	537,837,301	294,153,882	54.7%
FY16-17	566,968,574	288,692,568	50.9%
FY17-18	580,007,988	297,512,266	51.3%
FY18-19	591,246,445	299,022,334	50.6%
FY19-20	620,331,634	301,861,481	48.7%
FY20-21	611,685,192	300,970,024	49.2%
FY21-22	690,117,176	315,772,579	45.8%

### CDPHE AND LPHA COLLABORATION

Both the LPHAs and the Department assert that public health requires a collaborative and coordinated effort to create an effective system, and see themselves as partners in this work. With 56 local health departments, there are varying needs and desires for interactions with the state agency. The 2019 Public Health Needs Assessment calculated that it would require between \$167 million to \$188 million per year in additional funding to support full implementation of all of the Core Public Health Services in Colorado's local public health system, and costs for personnel, medical supplies and equipment, IT infrastructure, and administration have only increased since then. This gap necessitates having a strategic approach that creates efficiencies where there is flow of resources, support, and knowledge between all of the public health agencies and CDPHE. So while there may be differences of opinion between the LPHAs and the state in public health work, both agree that the largest issue is lack of resources.

The LPHAs and the Department state that Post-COVID, the expectations of public health agencies have increased significantly and the relationship between the LPHAs and the state agency has been permanently altered. Employees previously hired by local agencies shifted to being state employees to increase regional coordination efforts. CALPHO states this process still requires some smoothing out, however has been a positive change in terms of collaboration and provided more flexibility and opportunities for resources for the LPHAs. Without the resources to continue to invest in these coordinating relationships and ensure state resources are felt beyond just the Denver metro county agencies, the improvements made during the pandemic would stagnate. The Department holds monthly calls with the agency directors and has created a baseline level of collaboration with the local agencies that all parties are invested in maintaining.

The Department states it provides expertise and resources at a level that would be unreasonable for LPHAs to maintain in-house such as:

- Employing epidemiologists with the expertise to monitor and research respiratory illnesses, healthcare-associated infections, multidrug-resistant organisms, and zoonotic diseases such as West Nile and Highly Pathogenic Avian Influenza on a statewide level.
- Employing field epidemiologists who support LPHAs in responding to large outbreaks within and across counties.
- Developing and maintaining case and outbreak investigation protocols for reportable conditions and training LPHAs on those protocols.

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- Housing the State Public Health Laboratory to provide access to testing and providing the LPHAs with sample collection and handling guidance.
  - Operating the state's electronic disease surveillance system utilized by all LPHAs which serves as the data backbone for epidemiological work in Colorado.
  - Maintaining the state's infrastructure to receive and input disease case reports from health care providers, health systems, and laboratories across Colorado.
  - Operating the state's Health Alert Network system to deliver urgent disease control information and guidance to Colorado's clinical community.
  - Tracking and investigating communicable disease cases and outbreaks.
  - Managing shelter operations and health care access, especially for smaller LPHAs, to maximize emergency preparedness and response.
  - Employing regional equity coordinators on staff to help LPHAs connect with BIPOC, homeless, LGBTQIA+, and differently abled populations.

The Department states its goal is to equip LPHAs with the resources and information to handle a wide variety of public health concerns. When LPHAs are stretched beyond their capacity or request assistance, CDPHE provides support for epidemiological surveillance, provision of vaccines and testing services, communication and messaging, and coordination with other agencies and CDPHE divisions. A real world example of the Department's support for LPHAs is occurring in Garfield County. The County requested assistance with about 130 migrants that they are currently sheltering or are in their community. The Division's epidemiologists are providing surveillance and outbreak investigation support, the State Lab is providing rapid COVID tests and DCPHR's office of emergency preparedness and response is delivering them, the health equity team is providing cultural navigators and translation support, the immunization branch is providing vaccinations, and the Mobile Public Health Clinic program has held a vaccine clinic in the county.

## **R1 PUBLIC HEALTH INFRASTRUCTURE PART 1 - DCPHR**

### **CURRENT DIVISION STRUCTURE AND FUNDING**

As currently structured, DCPHR employs approximately 640.0 FTE in both term-limited and permanent positions. These FTE primarily comprise nine main groups that cooperate on Colorado's disease control and public health response efforts. The branches of DCPHR are detailed below, showing the existing programming that is made possible with the current S.B. 21-243 appropriations.

#### **Immunization Branch**

- Works to reduce vaccine-preventable disease by promoting education, optimizing vaccine resources, and assuring access to vaccines to increase overall vaccine uptake rates.
- Maintains the Colorado Immunization Information System (CIIS) and administers the federal Vaccines for Children (VFC) and Section 317 programs.
- Oversees the stewardship and accountability of all publicly-purchased vaccines distributed in Colorado.

#### **Office of Emergency Preparedness and Response (OEPR)**

- Responsible for assessing, planning, preparing, training, evaluating, responding to emergencies, and staffing the State Emergency Operations Center or Department Operations Center.

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## **Health Equity Branch**

- Expands and promotes equitable access to opportunities and resources that impact individuals' or communities' overall health and well-being.
- Partners with community-based organizations, healthcare entities, and LPHAs to promote health equity and implement strategies tailored to address the complex causes of health disparities that often stem from structural racism, historic disenfranchisement, and discrimination against marginalized groups, such as racial and ethnic minorities, low-income populations, and members of the LGBTQ+ community.

## **State Public Health Laboratory**

- Provides critical and specialized expertise in laboratory services to protect the health and environment of Colorado.
- Performs diagnostic testing of clinical, environmental, and chemical samples, as well as whole genome sequencing, wastewater surveillance, and more.
- Comprises the following programs: Newborn Screening, Microbiology, Chemistry, EBAT, Lab Certification, and Cannabis and Natural Medicine Sciences.
- Works with other units and Divisions to respond to emerging public health threats and coordinate outbreak testing when needed.

## **Communicable Disease Branch**

- Monitors, investigates, and manages epidemic and communicable diseases affecting public health in Colorado, as required under Colorado statute including: invasive bacterial diseases, foodborne/enteric diseases, waterborne diseases, respiratory diseases, including COVID-19, vaccine preventable diseases, healthcare-associated infections, tuberculosis, and zoonotic/vector borne diseases.

## **Strategy and Operations**

- Provides functional support to the internal operations of DCPHR crucial to streamlining and maintaining oversight of all DCPHR-led programs.
- The technology unit also manages an enhanced disease management, reporting, and analytics ecosystem. This ecosystem, funded with COVID-19-related federal grant dollars, enables more efficient data entry, robust capabilities to share data with public health partners, and widely reporting and analysis capabilities.

## **Policy and Stakeholder Engagement Program**

- Functions as the liaison between DCPHR and all legislative matters and works with division programs to disseminate information to relevant stakeholders who may be impacted by policy.

## **Electronic Disease Reporting Branch**

- Collects, stores, and governs Colorado's reportable conditions data for integration with CDPHE programs and public health partners.
- Responsible for monitoring and ensuring the accuracy, completeness, consistency, timeliness, and validity of data received; providing data standards and technical support to reporting partners; and providing consultation and recommendations to solve public health data issues.

## **Mobile Public Health Clinic Program**

- Bridges gaps in access to disease control and public health services, and rapidly responds to emergent issues with an emphasis on serving low-income and underserved areas of the State.

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## GIS and Data Visualization Program

- Facilitates the reach of public health services by demonstrating the spread of disease, allocation of resources, and distribution of vaccines and treatments in the state by using interactive maps, graphs, and tables that provide current data and information.

## Critical Administration

- Serves as the necessary fiscal infrastructure and leadership capacity to enable rapid response and ensure compliance as federal dollars are utilized during responses, including processes surrounding contracts, procurement, and financial management.
- Includes personnel aimed at improving recruitment and retention efforts for public health professionals, both within CDPHE itself and in support of our LPHA partners.

As the Division primarily responsible for the COVID-19 pandemic response, all of these teams play important roles in DCPHR. In partnership with local and federal governments, DCPHR responded to the pandemic by quickly scaling up free testing sites, distributing vaccines, ensuring health care systems had the personal protective equipment and resources needed, deploying resources to congregate settings, protecting hospital capacity, and providing support to LPHAs as needed. The Division has responded to COVID-19, Mpox, influenza, and RSV as well as disasters such as the Marshall Fire. The Department states Colorado unequivocally benefited from the work of these FTE within the above programs.

## *IMPACT OF S.B. 21-243 FUNDING*

The following describe outreach and programs that are a direct result of the increased funding:

- Development of the EpiTrax system which consolidated a number of disease tracking platforms into one system for case management, contact tracing, and outbreak and facility management. This will allow the State to determine when to scale up its public health response as disease transmission is surging, and to scale down when transmission is low.
- Development of CDPHE's Data Lakehouse to automate data analytics from systems including the Colorado Immunization Information System (CIIS), EpiTrax, Vital Statistics, STI/HIV, and Newcomer Health.
- Increasing the onboarding and maintaining of laboratory feeds to the Electronic Lab Reporting team from 20 to 7,893.
- Increasing organizations utilizing Electronic case reporting (eCR) from one to eight healthcare organizations to receive case information on 54 reportable conditions.
- Doubled the disease reporting team. Since 2019, 11 reportable conditions have been added, two reportable conditions have been removed and 18 reportable conditions have been modified. These changes generate increased complexity in the systems and processing of data that needs to be modified, as well as, increased staff to manage the additional burden of these changes. This improvement allows epidemiological investigation staff to more efficiently conduct disease control and prevention.
- Hiring a dedicated Product Manager for the Immunization Branch to assume responsibilities related to contract management, scope of work development, and project management for several major IT platforms maintained by the Immunization Branch.
- Hiring communications staff to launch successful vaccine campaigns.
- Performing 4.0 million total or 19.2% of all COVID-19 tests at the State Lab.
- Providing more than 1.25 million COVID-19 vaccinations.

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- Funding a Healthcare Associated Infections (HAI) team to provide preventive technical Healthcare Associated Infections/ Microbial Resistance assistance to healthcare facilities identified based on risk.
  - Hiring a medical entomologist to track insect disease vectors across the state and monitor for the introduction of potential new vector-borne diseases in Colorado.
  - Hiring an epidemiologist who led a response to Cyclospora, a parasite that causes gastrointestinal symptoms, outbreak that occurred in a restaurant in Ouray County, and contributing epidemiological information to federal partners as part of a multistate investigation.
  - Funding an epidemiologist to manage the viral respiratory disease program, lead a response to the largest RSV epidemic reported in Colorado in the fall of 2022, and respond to outbreaks of highly pathogenic avian influenza affecting poultry in commercial farms across the state.
  - Establishing the nine regional outreach coordinator positions to establish a regional support network for local communities, help community-based groups access services, support, and resources, and direct health equity programming.
  - Funding a Health Educator to expand the capacity of the Immunization Branch to deliver immunization-related training to healthcare providers and to develop culturally responsive communications.
  - Funding a Racial Equity Specialist to support the Immunization Branch in community engagement through the expansion of its Champions for Vaccine Equity program.

The Department states that this investment in public health infrastructure has led to decreased rates of disease transmission and effective community support. While the majority of the service delivery and client outcomes focused on COVID-19, the last three years demonstrate the State's capacity to act quickly and prevent disruptive spread of disease in general. The Department states that while COVID-19's threat to the public is not as great as it was in 2020, there are other diseases that the State must continue to respond to, and DCPHR intends to utilize staff to implement effective methods of disease control and prevention.

## **R1 PUBLIC HEALTH INFRASTRUCTURE REQUEST**

The Department is requesting \$7.5 million to support approximately 83.0 FTE within DCPHR. The 83.0 requested FTE would support the State's ability to effectively prevent, monitor, and respond to emerging disease outbreaks and other public health emergencies. This request allows for incorporation of lessons learned into Colorado's public health and disease response operations to ensure stable, scalable, and flexible State disease control and public health response infrastructure for the future. The requested funding reflects about a 50.0 percent increase in funding for these programs from pre-pandemic levels, however also reflects about a 25.0 percent decrease from funding levels under S.B. 21-243. Federal funding for COVID-19 responses activities will end starting in 2024, and the Department is responding to new and differing public health issues while also attempting to maintain the necessary infrastructure to be responsive to the next public health crisis.

In the spring of 2023, CDPHE and DCPHR worked with an independent vendor to undertake an extensive analysis of DCPHR's operations as enhanced federal funding expires. The Department engaged Government Performance Solutions (GPS) to assess future FTE requirements, focusing on capabilities and capacities that allow for enhanced preparedness and rapid scaling to respond to potential threats. GPS worked with senior leadership to develop scenarios and then engaged leaders in each unit to understand the capacity needed for each scenario, as well as the case to preserve current capabilities. The scenario analysis did not increase the roles or workforce of the Division, but instead

evaluated how to most efficiently equip DCPHR for everyday and emerging public health issues. This evaluation also resulted in the identification of future priorities as DCPHR continues its work in the evolving healthcare landscape. These priorities include:

- 1 **Data & Infrastructure:** DCPHR has built, and must maintain, a backbone of systems and critical infrastructure to conduct on-demand testing, deliver data to decision makers, and enhance provider engagement.
- 2 **Enhanced Surveillance & Accelerated Response:** Increased ability to monitor signals, identify threats, and rapidly build and execute response plans.
- 3 **Support for Local Public Health and Public Engagement:** Enhancing the ability to effectively communicate the science and the directives to multiple audiences through multiple channels, including local partners, in their communities with a focus and emphasis on driving equitable outcomes.
- 4 **Critical Administration:** Invest in the fiscal infrastructure and leadership capacity to enable rapid response and ensure compliance as federal dollars are utilized during responses.

As part of this analysis, GPS worked with leadership to conduct an in-depth evaluation of the current funding sources for DCPHR's workforce. The analysis made specific FTE recommendations to continue staffing at higher levels than pre-pandemic but lower than during the COVID-19 peak. The staff members requested in the decision item are a result of this analysis. The five sections of the Division all identified existing services that should continue in alignment with the Division's identified priorities above, and how many staff would be needed to carry out this charge, and a review was conducted for each of those staff members to determine their funding source.

414.0 FTE was determined as the optimal number of employees the current budget could support, while allowing DCPHR to continue providing adequate and effective disease control and public health response services in accordance with the expectations of elected officials, LPHAs, and the public while balancing statewide funding priorities. Of these 414.0 FTE, approximately 331.0 FTE can be funded with existing State and federal appropriations, and funding for the 83.0 is being requested.

#### *IMPACTS OF APPROVAL OF REQUEST*

The Department states it has filled all positions that the appropriations from S.B. 21-243 would accommodate, and it expects to fully expend the FY 2023-24 appropriation. The Department is currently holding vacancies in other federally funded programs, and has a plan to transition a number of other positions to federal funding sources at the beginning of FY 2024-25. The Department is wanting to mitigate large amounts of layoffs, however some layoffs will need to be considered. The table below highlights the identified changes in staffing that would occur with the end of S.B. 21-243 appropriations and approval of the R1 request.

STAFFING CHANGES RELATED TO PUBLIC HEALTH INFRASTRUCTURE REQUESTED IN R1				
PROGRAM	TOTAL FTEs CURRENTLY FUNDED BY SB21-243	FTEs NOT REQUESTED IN R1	FTEs REQUESTED IN R1	Funding for FTEs
Administration and Fiscal Services	38.0	8.0	30.0	\$2,605,415
Emergency Preparedness & Response	13.0	3.0	10.0	776,227
Epi & Reporting	16.5	6.0	10.5	989,965
Laboratory Services	16.0	9.0	7.0	746,902
Policy, Equity, and Immunization	24.0	9.0	15.0	1,455,338
Strategy & Ops	13.5	3.0	10.5	940,463
<b>Total</b>	<b>121.0</b>	<b>38.0</b>	<b>83.0</b>	<b>\$7,514,300</b>

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For each branch, DCPHR's comprehensive review identified outcome targets for the use of S.B. 21-243 dollars, as well as requested FTE allocations. The following section contains summaries of the outcomes of S.B. 21-243 dollars and the continued focus of the programs along with the requested FTEs.

### **Critical Administration and Fiscal Services (30.0 FTE)**

CDPHE has used the S.B. 21-243 appropriation to enhance internal processes that support Colorado's broad public health infrastructure. Additionally, fiscal and business review processes surrounding contracts, procurement, and financial management, and reporting have greatly expanded the capacity to audit programs both for adherence to financial regulations and programmatic effectiveness. This branch also includes investments in new personnel aimed at improving our recruitment and retention efforts for public health professionals, both within CDPHE itself and in support of LPHA partners.

### **Emergency Preparedness and Response (10.0 FTE)**

The Office of Emergency Preparedness and Response (OEPR) works to ensure that CDPHE, local public health, local behavioral health, and medical agencies have plans for responding to emergency events and have the capacity to administer interventions to all citizens in Colorado. The FTE funded by S.B. 21-243 allow the Department to better target responses to public health emergencies. As an example, during the Marshall Fire, the Department enhanced surveillance for waterborne illness from the water supply both during and after the incident. CDPHE provided disease control consultation for shelters in the aftermath of the fire as residents temporarily relocated. The Department engaged in hazardous material monitoring and coordinated with long-term care facilities and hospitals on evacuation plans.

### **Epidemiology & Reporting (10.5 FTE)**

#### Communicable Disease

The Communicable Disease branch focuses on protecting individuals from epidemic and communicable diseases affecting public health in Colorado. Staff from S.B. 21-243 are dedicated to the infection prevention program which allows the Department to respond to public health emergencies impacting populations at high risk for adverse outcomes.

#### Electronic Disease Reporting Branch

The Electronic and Disease Reporting branch is the source for integrating all CDPHE's communicable disease data collected and is reportable by State law. The branch acts as the hub of communication of disease rates between CDPHE and public health partners. The Division relies on staff to accurately translate and describe data reports in a manner that is publicly accessible.

### **Laboratory Services (7.0 FTE)**

The requested staffing for the State Lab would allow continued increased services such as on-demand pickups and sending sample collection materials to hospitals and local public health agencies. The COVID-19 pandemic response resulted in process improvements to state lab operations, and ongoing funding would allow for the continuation of critical infrastructure for microbiology, genomic surveillance, environmental chemistry, newborn screening, and laboratory data systems.

### **Policy, Equity, and Immunization (15.0 FTE)**

#### Health Equity Branch

In CDPHE's work tackling historical inequities in health care access across the state, the Health Equity Branch has been focused on providing access to vaccines to underserved communities to bridge the

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gap in vaccination rates between these communities and the majority populations. The current level of engagement allows the Department to collect data on marginalized communities and build relationships so it can offer culturally relevant services and deliver a more robust strategy for engagement to policy makers.

#### Policy and Stakeholder Engagement

During the COVID-19 pandemic, collaboration with LPHAs, all levels of government and other partners was instrumental in ensuring a rapid community response for testing and vaccine administration. Staff will continue to serve as a resource for LPHAs and other key partners, and interact with the Board of Health to ensure that board members are provided accurate and timely data regarding the Department's activities and regulatory requests.

#### Immunization Branch

The Immunization Branch works to increase immunization rates in the state and provide education, technical assistance and resources to communities and providers on immunization best practices. Staff funded by S.B. 21-243 help administer the Colorado Immunization Information System (CIIS), and work to ensure immunizing providers report immunization and exemption data to CIIS. Staff will also continue to educate the public on the Vaccines for Children Program while providing funding to LPHAs to implement a variety of strategies locally.

#### GIS and Data Visualization Program

At the onset of the spread of SARS-CoV-2, DCPHR recognized a current gap in disease tracking and information to direct public health efforts. The solution was to build the infrastructure to integrate visual data into the State's public health response strategy that would allow the State to communicate to public health partners and the public about the spread of disease. This program provides real-time, interactive data for both the public and the Department.

#### **Strategy & Operations (10.5 FTE)**

Business administration, communications, and project management support the functioning of this Division that has grown in size and complexity since the COVID-19 emergency. Communications staff will allow the Division to continue to disseminate educational information and guidance to the public and policy makers. The staff funded by S.B. 21-243 will continue to manage appropriations and contracts that ensure compliance with regulatory requirements as well as establish processes for internal and external audits.

#### **IMPACTS OF DENIAL OF REQUEST**

Since the onset of the pandemic, DCPHR's responsibilities have increased and its role in the State's health care landscape has been solidified. The Department states that the pandemic highlighted areas of disease control that need to be targeted to prevent future catastrophe or strain on the healthcare system. The expectations of what the statewide public health Department must do have fundamentally changed post-COVID. Individuals and local public health agencies look to the Department for regional coordination between agencies and hospitals, vaccination support, and accurate and up to date data. The Division states that without this additional funding it will be unable to meet these baseline expectations and the needs of the State.

In partnership with local and federal governments, DCPHR responded to the pandemic by quickly scaling up free testing sites, distributing vaccines, ensuring health care systems have the personal protective equipment and resources they need, deploying resources to congregate settings, and



protecting hospital capacity. The Division believes a continuation of this infrastructure and collaboration with local partners is crucial to preparing to respond to future disease outbreaks and disaster emergencies. The State has experienced a number of disaster emergencies over the last three years (the Marshall Wildfire, Mpox, COVID-19, Club Q Shooting, King Soopers shooting, and RSV), which have required dedicated staff and experts in the public health field to respond to. It states without these individuals, the State would lose expert knowledge and be vulnerable to future pandemics, disasters, and emergencies.

#### *MPOX RESPONSE*

When the State saw an outbreak of Mpox in 2022, the Department was able to quickly scale up, respond to the outbreak, and contain it within the year. It was able to do this because of the existing disease surveillance and response coordination systems created during the COVID-19 pandemic. The Division was able to do specific work around historically marginalized communities and brought on testing in the State lab before private labs were able to do so. The existing infrastructure allowed the Division to rapidly scale up programs, support LPHAs, coordinate with necessary partners, and quickly set up vaccine clinics to contain outbreaks.

#### **RECOMMENDATION ON DCPHR FUNDING**

The Department is requesting a partial continuation of S.B. 21-243 funding at \$7,514,300 General Fund, the amount necessary to support the salaries and operating costs of 83.0 FTE to maintain efficient disease crisis response capabilities and core public health infrastructure. Staff is recommending approval of the request for the following reasons:

- Staff recommendation is in concurrence with the previous staff recommendation on the initial request in FY 2021-22 for \$23.7 million General fund and 130.2 FTE on an ongoing basis;
- The Department appears to have conducted a significant analysis on the necessary FTE to maintain essential programs and is better equipped to perform an analysis of necessary programming post-pandemic than JBC staff;
- Research shows that increased investments in public health funding lead to positive health outcomes, and part of this investment is in administrative tasks; and
- When calculating FTE costs, due to the STEP increases, actual costs would be \$7,777,823 for the requested FTE, so staff is instead recommending the requested amount of \$7,514,300.

If the Committee does not want to approve the funding for DCPHR in its entirety, staff would recommend the Committee consider funding the request as a percentage rather than on the basis of merit of the individual FTEs. This is because the Department is going to allocate the resources it receives as it deems necessary, and will need to undergo some restructuring once funding for FY 2024-25 and ongoing is determined. Staff would recommend the Committee consider funding levels as an investment in disease control and public health response based on what the Department has provided as a 100.0 percent investment. Percentages of the requested funding are laid out in the table below.

PERCENTAGE OF REQUESTED FUNDING FOR DCPHR IN R1		
PERCENTAGE	AMOUNT	FTE
100.0%	\$7,514,300	83.0
90.0%	6,762,870	74.7
75.0%	5,635,725	62.3
50.0%	3,757,150	41.5

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## R1 PUBLIC HEALTH INFRASTRUCTURE PART 2 - LPHAS

### LOCAL PUBLIC HEALTH AGENCIES

When the Public Health Act of 2008 was passed (S.B. 08-194), a primary tenant of that Act was to ensure that core public health services are available with a consistent standard of quality, to every person in Colorado, regardless of where they live. The Office of Public Health Practice, Planning and Local Partnerships (OPHP) within CDPHE distributes annual funding to the LPHAs which enables them to implement these core public health services. OPHP support is allocated based on a funding formula determined by the Board of Health, including a base amount, variables related to social vulnerability, population density, health outcomes, and a per capita amount. With the additional \$10.0 million from S.B. 21-243, OPHP was able to raise the base funding for every LPHA to \$55,000. Prior to the bill, some LPHAs received as little as \$13,705 per year. The additional funding allowed CDPHE and the LPHAs to agree on a common value that the OPHP funding should be able to fund at least one FTE at every LPHA. Without the additional distributions from S.B. 21-243, this base amount would be eroded, and the Department could not ensure 1.0 FTE be funded by the State at each LPHA.

CDPHE funding of LPHAs is multifaceted and includes both categorical and flexible funding streams. CDPHE receives categorical funding from the federal government that is passed through to LPHA's including for programs like WIC, HIV prevention, Family Planning, Emergency Preparedness and Response and many others. CDPHE also receives dollars from state sources like the taxes on tobacco products that it passes through to LPHAs for programs like tobacco use and HIV prevention. These dollars are declining as tobacco use declines. The Department states that despite the essential nature of these services, State funds and Medicaid billing often fall short in covering the full costs of these programs. The shortfall affects the ability of the LPHAs to staff these programs adequately, for example with family planning services, LPHAs are receiving less than half of actual operational costs.

### LPHAS AND SAFETY NET CARE

Local public health plays a pivotal role in the safety net healthcare system, which is designed to provide health services to populations who might otherwise lack access due to financial, geographic, or social barriers. The key roles of local public health in this system include:

- **Access to Care:** LPHAs ensure access to essential healthcare services for underserved and vulnerable populations. This includes providing or facilitating primary care, vaccinations, maternal and child health services, and mental health care.
- **Disease Prevention and Health Promotion:** LPHAs focus on disease prevention and health promotion, which includes running vaccination clinics, health education programs, and disease surveillance and prevention initiatives. These efforts help reduce the burden on the healthcare system by preventing illnesses.
- **Community Health Assessments:** LPHAs conduct community health assessments to identify health needs, especially among marginalized groups, and tailor services to meet these needs effectively.
- **Linkage to Services:** Local public health acts as a bridge, connecting individuals to various healthcare and social services. This includes referral to specialty care, social services, and support programs like food assistance and housing.
- **Health Education and Literacy:** LPHAs provide health education to the community, increasing health literacy and empowering individuals to make informed health decisions. This is especially important for populations that might have limited access to health information.

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Health agency directors specifically emphasized the following key areas as currently vital roles for LPHAs in the safety net healthcare system:

- **Family Planning:** Offering essential family planning services to the community, often at reduced costs or on a sliding scale. Funding sources like Title X don't fully cover the program's costs, including staffing. The actual cost of running these family planning programs is often significantly higher than the funding received.
- **Sexually Transmitted Infection (STI) Screening:** Specializing in STI screening and management, public health departments not only provide direct services but also impart training to other healthcare providers, showcasing their expertise in this area.
- **Home Visitation:** Conducting home visits for various health needs, which is a critical component of community health, especially for vulnerable populations.
- **Immunization:** Administering vaccines to protect against various infectious diseases is an essential public health service.

### ISSUES LPHAS ARE FACING

- Influx of migrants in the state requiring long-term coordination;
- Local environmental contamination like contamination from PFAS, meth production, or under-regulated CBD processors;
- Behavioral health and substance use, LPHAs assess community needs and implement prevention and educational programs to reduce mental health issues and substance misuse;
- Increased demand for food safety inspections in childcare settings;
- Addressing the health impacts of climate change, including emergency preparedness for events like heat waves or natural disasters;
- Coordination challenges with health care providers, social services, education, and housing;
- Suicide prevention remains a significant community concern for LPHAs;
- Addressing the decline in community connectedness and impacts health and other issues like reduced civic engagement, domestic violence, misinformation proliferation, and limited access to healthful foods and physical activity; and
- Providing more complex care coordination and health interventions related to the surge in housing instability and homelessness.

These issues highlight the complex challenges local public health agencies face, requiring not only more funding but also innovative approaches and collaborative efforts across various sectors to address these emerging public health needs effectively.

### IMPACTS OF S.B. 21-243 FUNDING

In the past two years, S.B. 21-243 funding has allowed LPHAs to hire data analysts, epidemiologists, community outreach coordinators, registered nurses, emergency preparedness and response professionals, finance staff, mobile clinic staff, registered dietitians, harm reduction staff, behavioral health programs, and many other core public health staff. With this funding, LPHAs have been able to stabilize their workforce, provide training, and work on strategic initiatives in their public health improvement plans. Below are some examples that illustrate how public health agencies have leveraged S.B. 21-243 funding to implement tailored programs and initiatives in their communities:

- **Elbert County Public Health:** Staffed by 3 people at the start of the pandemic, this agency has expanded to provide clinical services, hired a full-time health educator and two part-time nurse practitioners, and is recruiting for a new finance and grant specialist position. The county also

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improved its technological infrastructure with an electronic health records system, which enables better tracking of patient care and outcomes and also places the agency on the path to begin billing public and private insurance for provided services.

- **Jefferson County Public Health:** Experienced a budget shortfall and potential staff reduction, but was able to maintain critical positions during the pandemic. The county also created a five-person health equity and community engagement program and enhanced community trust and understanding through community health assessments.
- **Broomfield Department of Public Health and Environment:** Prioritized becoming a data-driven organization during the pandemic. Broomfield utilized specific programmatic funding for a COVID-19 data analyst to produce hyperlocal data. This position developed key performance indicators and developed a community care coordination platform to connect community members to other programs provided by the city, county, or nonprofit entities.
- **Dolores County Public Health:** Serves a low-income rural area with limited access to healthcare and behavioral health services. With the funding, the county started a "Prescription Pickup" program to address medication access issues.
- **Gilpin County Public Health:** Strategically enhanced its environmental health capabilities by hiring a dedicated environmental health specialist. This move was coupled with the decision to relocate their on-site wastewater treatment system program from the community development department directly under the purview of the public health agency.
- **Silver Thread Public Health (Hinsdale and Mineral Counties):** Maintained zero staff turnover in the last year, part of this was the agency's initiative to raise the base salaries of its employees to more competitive levels and foster a stable and committed workforce.

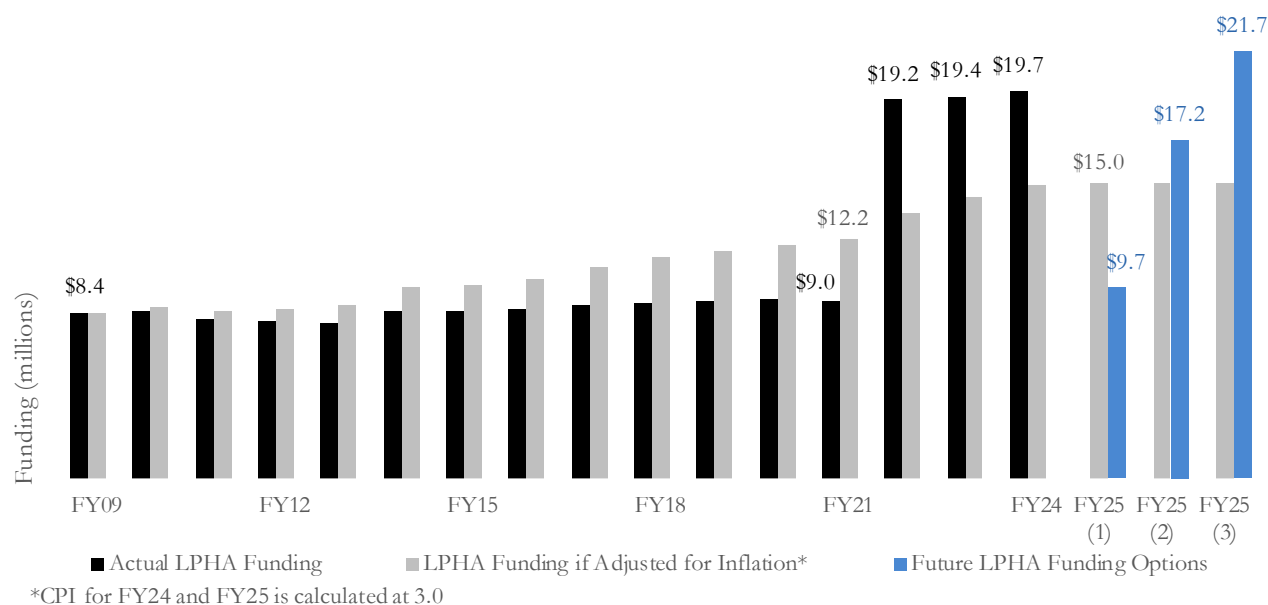
## **R1 PUBLIC HEALTH INFRASTRUCTURE REQUEST**

The Department is requesting \$7.5 million General Fund in FY 2024-25 and ongoing for a permanent extension of a portion of the original S.B. 21-243 appropriations to distribute to the LPHAs. The LPHA funding would continue to support agencies in building complex teams of public health professionals, and address statewide gaps in care and disease response. The LPHAs have requested this funding be increased to \$12.0 million on an ongoing basis.

## **IMPACTS OF APPROVAL OF REQUEST**

If approved, the continuation of increased State funding for LPHAs would maintain public health investments. State per capita spending was below \$2.00 prior to 2019, the additional \$7.5 million in funding would bring State per capita public health spending to \$2.80 and \$12.0 million would bring this to \$3.53. Local Public health agencies must contribute \$1.50 per capita per Section 25-1-512 C.R.S., however many LPHAs contribute more. An estimated 119.48 LPHA staff have been funded by S.B. 21-243. If R1 is approved, this would reflect a 25.0 percent reduction in funding, from \$10.0 million to \$7.5 million, which could result in a proportional reduction of an estimated 30.0 LPHA staff. Many LPHAs, especially those with the least access to funding, might look to pare down or cut other programs or services if they cannot fill in from other funding sources.

If State funding distributed to LPHAs had kept pace with inflation the actual amount would be in light with the black bars shown below. The LPHA funding options for FY 2024-25, are laid out in blue below and include are (1) no additional funding, (2) \$7.5 million additional funding, and (3) \$12.0 million additional funding.



The State currently provides \$9.7 million General Fund, in addition to the \$10.0 million from S.B. 21-243, to LPHAs. With this request, LPHAs would be allocated \$17.2 million annually utilizing the distribution mechanism. The LPHAs have requested an annual distribution of \$21.7 million. The continued funding would ideally be able to continue to ensure that every LPHA can employ at least one full-time employee focused on core public health services, however would vary across agency. The requested funding would support LPHAs in their Public Health Improvement Plans, which are essential components of their core services and mandated by statute. For the LPHAs, S.B. 21-243 has provided a consistent and flexible fund source that allowed them address funding and resource gaps and be adaptive to community public health needs.

### IMPACTS OF DENIAL OF REQUEST

Without any of the S.B. 21-243 funding, annual LPHA allocations would return to \$9.7 million General Fund. Without a continuation of State support, many LPHAs have indicated that they would need to stop programs or lay off staff. If R1 is denied, per capita State public health spending would drop to \$1.58, lower than in 2009 when it was \$1.72. An estimated 119.48 LPHA staff members have been funded by S.B. 21-243. If R1 is denied, this could result in all of those staff positions ending.

Most federal LPHA funding sources are inflexible and have strict limitations are placed on the usage of the funds. Inflexible funds comprise the majority of an LPHA's budget and place agencies in a continuous cycle of having to find and obtain flexible funds that allow them to address agency-wide issues such as paying competitive salaries and infrastructure improvements. According to the LPHAs, without a continuation of the requested LPHA funding, 58.0 percent of LPHAs will have to lay off critical staff such as nurses, contact tracers and epidemiologists and 69.0 percent of LPHAs will have to reduce programming and service coverage.

## RECOMMENDATION

The Department is requesting a partial continuation of S.B. 21-243 funding at \$7.5 million General Fund to distribute annually to LPHAs. Staff is recommending approval of the request for the following reasons:

- The 2019 Public Health Needs Assessment, performed prior to the COVID-19 pandemic, identified a funding gap of between \$167 million to \$188 million per year in additional funding to support full implementation of all of the Core Public Health Services in Colorado's local public health system; and
- Research strongly supports the investment in local public health as leading to more positive health outcomes and long-term costs savings.

The LPHA's are requesting annual distributions of \$12.0 million, and for the above mentioned reasons, staff would support additional funding for LPHAs, however this ultimately a consideration for the Committee on the investment it would like to make in local public health funding.

## → MSA, A35, PROPOSITION EE TOBACCO ADJUSTMENTS

**RECOMMENDATION:** Staff recommends a decrease of \$7.9 million total funds for programs receiving revenue from Amendment 35, Proposition EE, and the Tobacco Master Settlement Agreement. Adjustments are shown in the table below, as well as in descriptions included with each impacted line item in the divisions of Administration and Support, Disease Control and Public Health Response, Office of HIV, Viral Hepatitis and STIs, and Prevention Services.

The adjustments are based on three factors:

- Committee approved revenue projections and distributions for Amendment 35, Proposition EE, and the Tobacco Master Settlement Agreement;
- Existing fund balances for specific programs; and
- Spending authority for related lines, such as personal services or indirect costs.

TOBACCO RELATED ADJUSTMENTS			
DIVISION/LINE ITEM	REQUESTED APPROPRIATION	RECOMMENDED APPROPRIATION	RECOMMENDED ADJUSTMENT
<b>Administration and Support</b>			
Health Disparities Grants	\$11,014,813	\$8,702,871	(\$2,311,942)
<b>Disease Control and Public Health Response</b>			
Immunization Operating Expenses	\$2,793,752	\$3,606,844	\$813,092
Appropriation from the Tobacco Tax Cash Fund to the General Fund	322,323	270,943	(51,380)
<b>Office of HIV, Viral Hepatitis, and STIs</b>			
HIV and AIDS Operating Expenses	\$4,882,189	\$5,352,714	\$470,525
Ryan White Act Operating Expenses	5,788,077	6,627,244	839,167
<b>Prevention Services</b>			
Transfer to the Health Disparities Grant Program Fund	\$2,841,381	\$2,430,344	(\$411,037)
Breast and Cervical Cancer Screening	3,829,657	3,240,458	(589,199)
Cancer, Cardiovascular Disease, and Chronic Pulmonary Disease Grants	18,284,001	15,243,053	(3,040,948)
Tobacco Education, Prevention, and Cessation Grants	40,953,346	37,316,698	(3,636,648)
Oral Health Programs	911,328	876,577	(34,751)
Primary Care Office	3,765,102	3,848,458	83,356
<b>TOTAL</b>	<b>\$95,385,969</b>	<b>\$87,516,206</b>	<b>(\$7,869,763)</b>

The following table summarizes the Committee's actions during the January 29, 2024 Tobacco Revenue Streams figure setting presentation on the allocation of Tobacco Master Settlement Agreement revenues for Department programs in FY 2024-25.

TOBACCO MASTER SETTLEMENT AGREEMENT FY 2024-25 DISTRIBUTIONS				
PROGRAM	PERCENTAGE	FY 2022-23 ACTUAL	FY 2023-24 PRELIMINARY	FY 2024-25 ESTIMATE
<b>Department of Law</b>				
Tobacco Settlement Defense Account	2.5%	\$2,221,120	\$2,326,821	\$2,168,655
<b>Department of Human Services</b>				
Nurse Home Visitors	26.7	23,721,560	24,850,452	23,161,238
Tony Grampas Youth Services	7.5	6,663,360	6,980,464	6,505,966
<b>Department of Health Care Policy and Financing</b>				
Children's Basic Health Plan Trust	18.0	15,992,063	16,753,114	15,614,317
<b>Department of Higher Education</b>				
CU Health Sciences Center <sup>1</sup>	17.5	15,547,839	16,287,749	15,180,586
<b>Department of Public Health and Environment</b>				
AIDS Drug Assistance	5.0	4,442,240	4,653,643	4,337,310
HIV Prevention	3.5	3,109,568	3,257,550	3,036,117
Immunizations	2.5	2,221,120	2,326,821	2,168,655
Health Services Corps	1.0	888,448	930,729	867,462
Dental Loan Repayment	1.0	888,448	930,729	867,462
<b>Capital Construction</b>				
Fitzsimons Trust Fund	8.0	7,107,584	7,445,828	6,939,697
<b>Department of Personnel and Administration</b>				
Supplement State Employee Insurance Plans	2.3	2,043,430	2,140,676	1,995,163
<b>Department of Military and Veterans Affairs</b>				
Veterans Trust Fund	1.0	888,448	930,729	867,462
<b>Unallocated Portion<sup>2</sup></b>				
Unallocated amount formerly to autism treatment	2.0	1,776,896	1,861,457	1,734,924
<b>Total Funds Distributed</b>	<b>100.0</b>	<b>\$88,844,795</b>	<b>\$93,072,854</b>	<b>\$86,746,208</b>

Source: Department of the Treasury and Legislative Council Staff Forecast

<sup>1</sup>2% of this amount is required to be spent for tobacco-related in-state cancer research

<sup>2</sup>Unallocated amounts remain in the Tobacco Litigation Settlement Cash Fund, reducing future accelerated payments from the fund

The following table summarizes the Committee's actions on the distribution of Amendment 35 and Proposition EE funds from the Tobacco Tax Cash Fund for Department programs in FY 2024-25.

DISTRIBUTION OF TOBACCO TAX CASH FUND (TTCF) DOLLARS					
DEPT.	PROGRAM AND/OR FUND	PERCENT	FY 24-25 A35 DISTRIBUTION	FY 24-25 PROP EE DISTRIBUTION	TOTAL FY 24-25 DISTRIBUTION
HCPF	Health Care Expansion Fund	46.0%	\$41,544,587	\$5,037,000	\$46,581,587
HCPF	Primary Care Fund	19.0	17,159,721	2,080,500	19,240,221
PHE	Tobacco Education Programs Fund	16.0	14,450,291	1,752,000	16,202,291
PHE	Prevention, Early Detection and Treatment Fund	16.0	14,450,291	1,752,000	16,202,291
HCPF	Old Age Pension Fund	1.5	1,354,715	164,250	1,518,965
REV	Local governments to compensate for lost revenue from tobacco taxes	0.9	812,829	98,550	911,379
PHE	Immunizations performed by small local public health agencies	0.3	270,943	32,850	303,793
HCPF	Children's Basic Health Plan	0.3	270,943	32,850	303,793
<b>Total Distribution</b>		<b>100.0%</b>	<b>\$90,314,321</b>	<b>\$10,950,000</b>	<b>\$101,264,321</b>

Money that is credited to the Prevention Early Detection and Treatment Fund is further divided among three programs: the Breast and Cervical Cancer Program, Health Disparities Program Fund, and Center for Health and Environmental Data. The following table summarizes how the total funds credited to the Prevention, Early Detection and Treatment Fund are further allocated all within the Department of Public Health and Environment, and the distributions for FY 2024-25.

## BREAKDOWN OF MONEY CREDITED TO THE PREVENTION, EARLY DETECTION AND TREATMENT (PEDT) FUND

	ALLOCATION	FY 24-25 A35 DISTRIBUTION	FY 24-25 PROP EE DISTRIBUTION	TOTAL FY 24-25 DISTRIBUTION
<b>Total amount credited to PEDT Fund</b>		<b>\$14,450,291</b>	<b>\$1,752,000</b>	<b>\$16,202,291</b>
Breast and Cervical Cancer Program	20.0%	2,890,058	350,400	3,240,458
Health Disparities Program Fund	15.0%	2,167,544	262,800	2,430,344
Center for Health and Environmental Data	Fixed \$	116,942	0	116,942
<i>Remains in the Prevention, Early Detection and Treatment Fund*</i>		<i>9,275,747</i>	<i>1,138,800</i>	<i>10,414,547</i>

\*Whatever remains in the PEDT Fund is distributed to the CCPD Program

The table below is updated from the staff presentation on tobacco revenue streams on January 29, 2024, detailing distributions of Proposition EE revenue in FY 2024-25. That table failed to account for the \$20.0 million distribution to the Tobacco Education Programs Fund, which is included in the table below.

PROPOSITION EE REVENUE DISTRIBUTION - BASED ON LCS DECEMBER 2023 FORECAST			
PROGRAM/FUND	FY 2023-24	FY 2024-25	FY 2025-26
General Fund	\$4,050,000	\$4,050,000	\$4,050,000
Tobacco Education Programs Fund	-	20,000,000	20,000,000
Tobacco Tax Cash Fund <sup>1</sup>	10,950,000	10,950,000	10,950,000
Preschool Programs Cash Fund <sup>2</sup>	188,618,730	194,523,157	204,735,513
Rural Schools Fund	-	-	-
Housing Development Grant Fund	-	-	-
Eviction Legal Defense Fund	-	-	-
State Education Fund <sup>2</sup>	-	-	-
<b>Total</b>	<b>\$203,618,730</b>	<b>\$229,523,157</b>	<b>\$239,735,513</b>

<sup>1</sup>Dollars distributed to the Tobacco Tax Cash Fund are accounted for in the considerations for A35 distributions.

<sup>2</sup>These funds will begin seeing revenue after the other fund obligations outlined in statute have been fulfilled.

## → CENTRALLY APPROPRIATED COMMON POLICY AND NON-PRIORITIZED ITEMS

This document includes a number of non-prioritized items that are for the Department's share of common policy items and requests addressed in presentations for other departments. **Staff requests permission to apply Committee decisions on non-prioritized and centrally-appropriated items that are still pending as well as the decision items in other divisions.**



## (1) ADMINISTRATION AND SUPPORT

This division is comprised of three subdivisions:

### (A) ADMINISTRATION

This subdivision provides department-wide administrative services including accounting, budgeting, human resources, and purchasing. The appropriations for this subdivision include funds for expenses incurred through the provision of department-wide services, and centrally appropriated personnel line items like salary survey and health, life and dental. Funding for this subdivision is primarily from reappropriated funds from departmental indirect cost recoveries with a small amount from Medicaid reappropriated funds. This subdivision also receives appropriations from the General Fund, cash funds including the AIR subaccount of the Highway Users Tax Fund, and federal funds.

### (B) OFFICE OF HEALTH EQUITY

This subdivision provides grants for health initiatives aimed at reducing and eliminating disparities in the provision of health services across the state. Funding for this subdivision is primarily from Amendment 35 tobacco tax revenue that is transferred into the Health Disparities Grant Fund and a small amount of General Fund for the Necessary Document Assistance Program.

### (C) OFFICE OF PUBLIC HEALTH PRACTICE, PLANNING AND LOCAL PARTNERSHIPS

This subdivision oversees the distribution of state funds to local public health agencies. Funding for this subdivision is a combination of General Fund, Marijuana Tax Cash Funds, and federal funds.

ADMINISTRATION AND SUPPORT						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 Appropriation</b>						
SB 23-214 (Long Bill)	\$159,513,946	\$44,936,693	\$38,445,809	\$46,597,110	\$29,534,334	124.1
Other legislation	578,968	540,902	0	38,066	0	0.9
HB 24-1196 (CDPHE Supplemental)	7,954,356	450,603	0	7,503,753	0	0.0
<b>TOTAL</b>	<b>\$168,047,270</b>	<b>\$45,928,198</b>	<b>\$38,445,809</b>	<b>\$54,138,929</b>	<b>\$29,534,334</b>	<b>125.0</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$168,047,270	\$45,928,198	\$38,445,809	\$54,138,929	\$29,534,334	125.0
R1 Public health infrastructure	7,500,000	7,500,000	0	0	0	0.0
R3 Health facility licensure funding	0	0	0	0	0	0.0
R4 State syphilis response	0	0	0	0	0	0.0
R6 Tuberculosis program infrastructure	0	0	0	0	0	0.0
R7 Environmental justice	0	0	0	0	0	0.0
R8 Lead testing support	0	0	0	0	0	0.0
R9 Office of health equity and environmental justice	3,672,394	193,738	1,115,938	2,240,134	122,584	13.3
R10 Office of health equity tribal relations	93,446	93,446	0	0	0	0.9
R11b DEHS technical adjustment	0	0	0	0	0	0.0
R12 Common policy provider rate adjustment	429,967	381,236	48,731	0	0	0.0
BA3 State lab utilities	97,000	0	0	97,000	0	0.0
BA4 Phone system modernization	145,000	0	0	145,000	0	0.0
MSA, A35, Prop EE tobacco adjustments	(2,311,942)	0	(1,557,048)	(754,894)	0	0.0
Centrally appropriated line items	8,206,049	2,239,302	15,576,578	(7,779,277)	(1,830,554)	0.0
Non-prioritized decision items	2,150,385	1,463,701	(30,159)	716,843	0	0.0
Indirect cost assessment	1,082,062	0	290,008	351,605	440,449	0.0
Annualize prior year legislation	(17,886,166)	(622,655)	(10,000,000)	(7,263,511)	0	0.1
Annualize prior year budget actions	(18,894,377)	(6,154,025)	(3,735,793)	(3,447,742)	(5,556,817)	0.0

ADMINISTRATION AND SUPPORT						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>TOTAL</b>	<b>\$152,331,088</b>	<b>\$51,022,941</b>	<b>\$40,154,064</b>	<b>\$38,444,087</b>	<b>\$22,709,996</b>	<b>139.3</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$15,716,182)</b>	<b>\$5,094,743</b>	<b>\$1,708,255</b>	<b>(\$15,694,842)</b>	<b>(\$6,824,338)</b>	<b>14.3</b>
Percentage Change	(9.4%)	11.1%	4.4%	(29.0%)	(23.1%)	11.4%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$152,057,775</b>	<b>\$50,111,066</b>	<b>\$40,713,886</b>	<b>\$38,595,448</b>	<b>\$22,637,375</b>	<b>140.3</b>
Request Above/(Below) Recommendation	(\$273,313)	(\$911,875)	\$559,822	\$151,361	(\$72,621)	1.0

## DECISION ITEMS – ADMINISTRATION AND SUPPORT

### → R10 OFFICE OF HEALTH EQUITY TRIBAL RELATIONS

**REQUEST:** The Office of Health Equity within the Department requests an appropriation of \$142,876 General Fund and 0.9 FTE in FY 2024-25 and \$145,651 GF and 1.0 FTE in FY 2025-26 and ongoing to further address health disparities in Colorado Ute and Southern Ute tribes through a Tribal Data Systems Specialist.

**RECOMMENDATION:** Staff recommends approval of the request for General Fund appropriations to support the 1.0 FTE for a Tribal Data Systems Specialist on the Tribal Relations Team on an ongoing basis. The recommendation includes \$93,446 General Fund and 0.9 FTE in FY 2024-25 annualizing to \$113,285 General Fund and 1.0 FTE in FY 2025-26 and ongoing.

**EVIDENCE LEVEL:** The Department indicated that this request item is theory-informed, which is defined as “a program or practice that reflects a moderate to low or promising level of confidence of effectiveness, ineffectiveness, or harmfulness as determined by tracking and evaluating performance measures including pre- and post-intervention evaluation of program outcomes, evaluation of program outputs, identification and implementation of a theory of change, or equivalent measures,” per Section 2-3-210 (3), C.R.S. (d).

Staff believes the evidence level is not applicable to this request. While the outputs of the program are measurable, and increased data collection may inform future evidence-based policy making, this is an FTE request which JBC staff are not designating as relevant to the evidence-based policy making model. The Department’s central theory is that “better data will induce better outcomes”. There is little evidence backing up this claim provided in the request, however the Department did provide a link to the Council of State and Territorial Epidemiology Toolkit, which recommends data-sharing between state and local health departments and tribal entities to improve public health surveillance. Ultimately, the evidence suggests that increased ability to gather and share data can be helpful for addressing health disparities, but the ways in which the Department chooses to address these disparities appear to be more directly applicable to the evidence-based policy making model.

#### ANALYSIS:

##### TRIBAL RELATIONS TEAM

The Tribal Relations Team, within the Office of Health Equity, liaises with Tribal governments, Native organizations, Tribal Epidemiology Centers (TECs), and coordinates with the Colorado Commission of Indian Affairs (CCIA) to develop and strengthen Tribal relationships with the Department. The team provides support throughout CDPHE’s programs and commitments to Tribes and Native

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communities in Colorado. The Department states the Tribes' inherent and codified sovereignty creates unique challenges and opportunities when it comes to state agency collaboration. The Tribal Relations Team currently contains 3.0 FTE: one (1) Tribal Liaison and two (2) Tribal Health Data Specialists.

In 2011, the Department entered into a Tribal Consultation Agreement with the two Ute Tribes in Colorado: the Southern Ute Indian Tribe and the Ute Mountain Ute Tribe in order to collaborate on policies impacting American Indian/Alaska Native (AI/AN) populations. The Team coordinates formal requests for consultation from Tribal representatives as part of the Tribal Consultation Agreement. The Tribal team has been able to facilitate partnerships for CDPHE programs for maternal and child health, COVID-19 response, immunization, cancer prevention, STI/HIV/HepC prevention, vital statistics, air quality regulation, and environmental justice, among others.

The Tribal Relations Team responds to requests from internal and external partners. Non-data related requests are generally fielded by the Tribal Liaison and the Tribal Health Data Specialists focus on the data requests. The team receives requests from Tribal government programs, Tribal Epidemiology Centers, the Urban Indian Health Organization, Native community organizations, academic institutions and other external entities. In addition to responding to requests, the Tribal Relations Team proactively outreaches to Tribal and Native community partners, and brings their needs back to the Department, and facilitates response and coordination.

### **External Request Examples**

- Requests for certain kinds of data;
- Assistance in establishing relationships with CDPHE programs to improve or inform data handling or collection;
- Inquiries about new funding or resource opportunities;
- Feedback or inquiries about CDPHE programs;
- Requests for presentations, meetings, and outreach; and
- Tribal Consultation meeting and coordination.

### **Inter-Departmental Request Examples**

- Requests for American Indian/Alaska Native data;
- Training or coaching requests;
- Assistance in outreaching to Tribal and Native community partners;
- Tribal Consultation coordination;
- Material or report review; and
- New funding or program partnership coordination.

The Tribal Relations Team recorded 150 distinct requests in all of FY 2022-23, and from July through November of 2023 the team received 143 requests. The Team's work in FY 2022-23 included:

- Facilitating a total of 22 funding streams to Tribes and Native Community Organizations in collaboration with CDPHE programs and the Centralized Tribal Contract Monitoring Team;
- Working with 42 CDPHE projects or programs by providing thought partnership, consultation, and coaching in order to facilitate stronger partnerships with Tribes and Native communities; and
- Fielding 51 distinct requests from Tribal and Native Community Partners.

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## **DATA SHARING**

The Department states that historically, Tribal partners have often been hesitant to share data with the state, and have not always seen a benefit from state-held data to their communities. Simultaneously, gaps in Tribal data can impede equitable response to public and environmental health concerns. In particular, Tribal governments that maintain sovereign jurisdiction on Tribal lands need access to relevant data in order to inform their public and environmental health decisions. The goal of the Tribal data specialists is to provide a clear benefit to Tribal and Native community partners by ensuring they have access to needed data in a usable format.

The Tribal Data Specialists have developed data relationships with Tribal partners, including TECs, Ute Mountain Ute and Southern Ute Tribal government programs, and the Urban Indian Health Organization (UIHO) in Colorado. This year they facilitated the first data sharing agreement put in place between CDPHE and a Tribal Epidemiology Center. The Department's data and program partnerships with the regional TECs also increased from one to six this year.

## **TRIBAL RELATIONS TEAM OUTCOMES**

The Department states that the response to the addition of these positions at CDPHE from Tribal partners has been positive, with partners regularly reaching out to request information from state data systems. Tribal and Native community partners often have data needs beyond what is readily available on public dashboards. The tribal data specialists will pull specific queries from state data systems, and clean and format that data so that it is relevant and useful to Tribal partners. If data sharing agreements are necessary, they will work with the CDPHE program and Office of Legal and Regulatory Compliance to facilitate those agreements. The data specialists work across a number of programs within the Department to address gaps in American Indian/Alaska Native public health and environmental data, and improve practices for Tribal data handling. While respect for Tribal sovereignty is a critical understanding for successful Tribal partnerships of any kind, many agency programs require guidance on the implications of Tribal sovereignty on their particular areas of data work. The Department states these internal knowledge and capacity building efforts further improve CDPHE's data relationships with Tribal partners.

The team also engages in data Tribal sovereignty conversations across the sector and the field. This year they collaborated with CCIA to develop and present data sovereignty principles for state agencies to the Commission, as well as at the Colorado Public Health Association (CPHA) Culture of Data and Public Health in the Rockies conferences.

## **TRIBAL RELATIONS WORK**

The work of the Tribal Relations Team relies on building relationships and trust with Tribal and Native community partners. Prior to the Tribal Liaison being brought on near the end of 2019, collaboration between the Department and Tribal partners was extremely limited. The Department states that as the presence of a Tribally-focused position and the pressures of the pandemic led to increased feedback from, and gradually improving relations with Tribal partners, the need for improved data relationships became clear. The team provides a link between State and Tribal partners to help avoid previous negative outcomes that have occurred in other states and Colorado such as:

- Inappropriate release of Tribal COVID case counts, leading to litigation between Tribes and states in the midst of the pandemic;
- Tribes turning down resources for responding to the pandemic due to concerns about the state holding data and the level of respect for Tribal sovereignty with that data; and

- Tribal partners asking the Department not to collect Tribal affiliation when collecting COVID data due to concerns about the level of sovereignty-affirming data governance practices, when this information can inform public health decisions.

The Department believes that building and strengthening the relationship with Tribal partners around health and environmental data can help the State to avoid these types of scenarios and help Tribal partners and the State collect beneficial data. Other states are facing similar challenges and working to grow their Tribal relationships. Washington, New Mexico, Utah, Oklahoma, Arizona, and other states are all looking to grow Tribal relationships through Tribal Relations/Affairs teams within their departments of health.

## FUNDING

The current program is supported by 3.0 FTE:

- The Tribal Liaison position is funded by General Fund and leads the work of the team; and
- The two Tribal Health Data Specialists are term-limited from June 2022 through May 2024 via the CDC Health Disparities Grant.

There is an option for a no-cost extension for the CDC grant, but there is no renewal option available. This would allow the Department to glide the position to the end of FY 2023-24, but there will not be any additional funds to support this position in FY 2024-25. If the request is approved, the team will still be reduced to two members. The Department will continue to explore ways to support the capacity of this team if additional federal or grant funds become available.

## REQUEST

The Department requests General Fund to make one Tribal Data Systems Specialist position permanent. It states that a permanently-funded team member will more sustainably aid the Department in fulfilling state obligations to Tribes in Colorado, government-to-government requirements, and assist the Department in reducing disparities in American Indian/Alaska Native communities. The Department states that without the ongoing work of this team, it will not be able to provide timely support and technical assistance for internal and external requests, or progress the Department's capacity to build data relationships with Tribal partners.

## RECOMMENDATION

**Staff recommends approval of the request for General Fund appropriations to support the 1.0 FTE for a Tribal Data Systems Specialist on the Tribal Relations Team on an ongoing basis.**

The total recommended amount in FY 2024-25 does not account for POTS-related costs and is detailed below.

R10 RECOMMENDATION COST BREAKDOWN		
	FY 2024-25	FY 2025-26 AND ONGOING
FTE	0.9	1.0
Personal Services	\$69,124	\$76,804
Standard Operating	1,152	1,280
Capital Outlay	6,670	0
Centrally Appropriated (POTS)	0	18,701
Travel	4,000	4,000
Database/Technology	10,000	10,000
<b>Total</b>	<b>\$93,446</b>	<b>\$113,285</b>

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## → R12 COMMON POLICY PROVIDER RATE INCREASE

*REQUEST:* The Department requests an increase of \$304,988 General Fund and \$38,986 in cash fund spending authority from the Marijuana Tax Cash Fund, for a provider rate increase of 2.0 percent for LPHAs in FY 2024-25 and ongoing. This provider rate increase is calculated including the \$7.5 million General Fund requested in R1. This decision item is linked to actions the Committee takes on the Community Provider Rate common policy.

*RECOMMENDATION:* **Staff recommends approval of this request consistent with the Committee's decision on common policy.** Staff requests permission to incorporate any subsequent modifications to Community Provider Rate common policy in the appropriation for local public health agencies. A 2.5 percent increase for this line item based on the decisions made in R1 would impact the General Fund appropriations for this line as follows:

- Denial of R1: \$193,736 GF
- Approval of R1: \$381,236 GF
- Approval of \$12.0 GF million for LPHAs: \$493,736 GF

*ANALYSIS:* During the FY 2015-16 figure setting process, the Committee voted to apply the Committee's community provider rate policy to the funding allocated to local public health agencies for provision of required health and environmental services pursuant to Section 25-1-512, C.R.S. From FY 2021-22 through FY 2023-24, the three percent increase applied only to the "base" amount distributed to local public health agencies, and not the additional \$10.0 million added to the line via S.B. 21-243 (Public Health Infrastructure), which is exempt from this increase.

Dependent on decisions made in R1, staff is recommending applying provider rate increase to full amount of General Fund approved in line item as the amount will no longer be based on temporary funding. Staff also believes that given the uncertainty about future Marijuana Tax Cash Fund appropriations, for the sake of sustainability of the program, there might be a time when MTCF appropriations would need to be reduced, and calculating the provider rate increase with the full General Fund appropriation may cushion this reduction in the future.

## → BA3 STATE LAB UTILITIES

*REQUEST:* The Department requests an increase of \$97,000 in reappropriated fund spending authority for FY 2024-25 and ongoing for State laboratory utilities from departmental indirect cost recoveries.

*RECOMMENDATION:* On February 18<sup>th</sup>, the committee approved staff's supplemental recommendation for approval of the request in the FY 2023-24 Long Bill. **Staff recommends maintaining the requested increase in the FY 2024-25 Long Bill and on an ongoing basis.**

*ANALYSIS:*

In FY 2023-24, the Department reports that State Lab utility expenses have outpaced projections due to the prior expansion of the Lab and a rise in utility rate costs. In the first four months of FY 2023-24, gas, electric, and water use has been about 60.0 percent higher on average than the previous two years. This increased use is due to updates and expansions of the State Lab that have occurred over the last few years. Additionally, utility rates have increased in FY 2023-24 compared to the previous two years. The Department was appropriated \$390,727 in reappropriated funds for State Lab utilities in FY 2023-24, and the projected need will be \$487,605. The request is to meet this gap in funding of

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\$96,878, with an appropriation rounded up to \$97,000 to allow for monthly fluctuations, and assumed ongoing increased costs in the future.

## ➔ BA4 PHONE SYSTEM MODERNIZATION

*REQUEST:* The Department requests an increase of \$145,000 in reappropriated fund spending authority for FY 2024-25 and ongoing for its phone system modernization project coming from departmental indirect cost recoveries.

*RECOMMENDATION:* On February 18<sup>th</sup>, the committee approved staff's supplemental recommendation for approval of the request in the FY 2023-24 Long Bill. **Staff recommends maintaining the requested increase in the FY 2024-25 Long Bill and on an ongoing basis.**

### *ANALYSIS:*

The Department initially requested \$395,250 General Fund in FY 2022-23 to transition to an OIT-supported phone system. Staff recommended and the Committee approved an appropriation of \$259,686 reappropriated funds for the project. Based on recent numbers, the project will end up costing closer to the initially requested amount, and this request would cover the current funding gap, allow for monthly fluctuations, and account for the increased ongoing annual costs. The source of the reappropriated funds will be departmental indirect cost recoveries directly billed to the divisions for actual usage of the system as these costs are already built into the Department's indirect cost structure.

The initial request to update the Department's phone system was set to start in the fall or winter of 2022. Implementation was delayed due to a new vendor being on-boarded by OIT. OIT eventually directed the Department to utilize the existing vendor in early 2023, and implementation occurred in July of 2023. This delay is what caused the request to be submitted as a supplemental request for FY 2023-24.

The expected cost of the system was originally \$395,250 per the FY 2022-23 decision item. The Department states that the increase in cost to \$404,686 is primarily due to a slight increase in demand to increased staffing in DCPHR and APCD over the past two legislative sessions and the implementation of a softphone option that allowed staff working remotely to utilize the Department's phone system versus cell phones or personnel phones.

## LINE ITEM DETAIL — ADMINISTRATION AND SUPPORT

### (A) ADMINISTRATION

#### PERSONAL SERVICES

This line funds the personnel expenses for the Department's administration.

*STATUTORY AUTHORITY:* Sections 25-1-102, 25-1-106, and 25-1-109, C.R.S.

*REQUEST:* The Department requests an appropriation of \$11,087,675 total funds, including \$2,034,660 General Fund, and 91.3 FTE.

*RECOMMENDATION:* **Staff recommendation is shown in the table below.**

ADMINISTRATION AND SUPPORT, ADMINISTRATION, PERSONAL SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$10,587,827	\$1,914,284	\$11,369	\$8,482,937	\$179,237	90.3
Other legislation	42,743	42,743	0	0	0	0.9
<b>TOTAL</b>	<b>\$10,630,570</b>	<b>\$1,957,027</b>	<b>\$11,369</b>	<b>\$8,482,937</b>	<b>\$179,237</b>	<b>91.2</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$10,630,570	\$1,957,027	\$11,369	\$8,482,937	\$179,237	91.2
Centrally appropriated line items	442,994	63,522	162	379,310	0	0.0
Annualize prior year legislation	14,111	14,111	0	0	0	0.1
<b>TOTAL</b>	<b>\$11,087,675</b>	<b>\$2,034,660</b>	<b>\$11,531</b>	<b>\$8,862,247</b>	<b>\$179,237</b>	<b>91.3</b>
<b>INCREASE / (DECREASE)</b>	<b>\$457,105</b>	<b>\$77,633</b>	<b>\$162</b>	<b>\$379,310</b>	<b>\$0</b>	<b>0.1</b>
Percentage Change	4.3%	4.0%	1.4%	4.5%	0.0%	0.1%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$11,087,675</b>	<b>\$2,034,660</b>	<b>\$11,531</b>	<b>\$8,862,247</b>	<b>\$179,237</b>	<b>91.3</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## HEALTH, LIFE, AND DENTAL

This line funds the Department's share of the state's group health, life and dental insurance plans for state employees.

*STATUTORY AUTHORITY:* Sections 24-50-603 (9) and 24-50-611, C.R.S.

*REQUEST:* The Department requests an appropriation of \$27,368,762 total funds, including \$5,110,948 General Fund.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, HEALTH, LIFE, AND DENTAL						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$31,756,606	\$6,756,940	\$9,753,224	\$2,307,578	\$12,938,864	0.0
<b>TOTAL</b>	<b>\$31,756,606</b>	<b>\$6,756,940</b>	<b>\$9,753,224</b>	<b>\$2,307,578</b>	<b>\$12,938,864</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$31,756,606	\$6,756,940	\$9,753,224	\$2,307,578	\$12,938,864	0.0
Annualize prior year budget actions	318,645	(64,908)	383,553	0	0	0.0
R3 Health facility licensure funding	0	0	0	0	0	0.0
R4 State syphilis response	0	0	0	0	0	0.0
R6 Tuberculosis program infrastructure	0	0	0	0	0	0.0
R7 Environmental justice	0	0	0	0	0	0.0
R8 Lead testing support	0	0	0	0	0	0.0
R9 Office of health equity and environmental justice	0	0	0	0	0	0.0
R10 Office of health equity tribal relations	0	0	0	0	0	0.0
Centrally appropriated line items	(5,110,517)	(1,799,758)	(404,739)	(150,140)	(2,755,880)	0.0
<b>TOTAL</b>	<b>\$26,964,734</b>	<b>\$4,892,274</b>	<b>\$9,732,038</b>	<b>\$2,157,438</b>	<b>\$10,182,984</b>	<b>0.0</b>



ADMINISTRATION AND SUPPORT, ADMINISTRATION, HEALTH, LIFE, AND DENTAL						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>INCREASE/(DECREASE)</b>	<b>(\$4,791,872)</b>	<b>(\$1,864,666)</b>	<b>(\$21,186)</b>	<b>(\$150,140)</b>	<b>(\$2,755,880)</b>	<b>0.0</b>
Percentage Change	(15.1%)	(27.6%)	(0.2%)	(6.5%)	(21.3%)	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$27,368,762</b>	<b>\$5,110,948</b>	<b>\$9,752,449</b>	<b>\$2,311,348</b>	<b>\$10,194,017</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$404,028	\$218,674	\$20,411	\$153,910	\$11,033	0.0

### SHORT-TERM DISABILITY

This line item funds the Department's share of the state's short-term disability program which is administered by the Department of Personnel (PER).

*STATUTORY AUTHORITY:* Sections 24-50-603 (9) and 24-50-611, C.R.S.

*REQUEST:* The Department requests an appropriation of \$274,232 total funds, including \$51,475 General Fund.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, SHORT-TERM DISABILITY						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 APPROPRIATION</b>						
SB 23-214 (Long Bill)	\$282,025	\$68,086	\$78,089	\$22,689	\$113,161	0.0
<b>TOTAL</b>	<b>\$282,025</b>	<b>\$68,086</b>	<b>\$78,089</b>	<b>\$22,689</b>	<b>\$113,161</b>	<b>0.0</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$282,025	\$68,086	\$78,089	\$22,689	\$113,161	0.0
R3 Health facility licensure funding	0	0	0	0	0	0.0
R4 State syphilis response	0	0	0	0	0	0.0
R6 Tuberculosis program infrastructure	0	0	0	0	0	0.0
R7 Environmental justice	0	0	0	0	0	0.0
R8 Lead testing support	0	0	0	0	0	0.0
R9 Office of health equity and environmental justice	0	0	0	0	0	0.0
R10 Office of health equity tribal relations	0	0	0	0	0	0.0
Centrally appropriated line items	(11,454)	(18,133)	13,131	(94)	(6,358)	0.0
Annualize prior year budget actions	(958)	(958)	0	0	0	0.0
<b>TOTAL</b>	<b>\$269,613</b>	<b>\$48,995</b>	<b>\$91,220</b>	<b>\$22,595</b>	<b>\$106,803</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$12,412)</b>	<b>(\$19,091)</b>	<b>\$13,131</b>	<b>(\$94)</b>	<b>(\$6,358)</b>	<b>0.0</b>
Percentage Change	(4.4%)	(28.0%)	16.8%	(0.4%)	(5.6%)	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$274,232</b>	<b>\$51,475</b>	<b>\$91,382</b>	<b>\$24,413</b>	<b>\$106,962</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$4,619	\$2,480	\$162	\$1,818	\$159	0.0

### PAID FAMILY AND MEDICAL LEAVE INSURANCE

Colorado Proposition 118, Paid Family Medical Leave Initiative, was approved by voters in November 2020 and created a paid family and medical leave insurance program for all Colorado employees administered by the Colorado Department of Labor and Employment. This requires employers and

employees in Colorado to pay a payroll premium (.90 percent with a minimum of half paid by the employer) to finance paid family and medical leave insurance benefits beginning January 1, 2023. It will finance up to 12 weeks of paid family and medical leave to eligible employees beginning January 1, 2024.

*STATUTORY AUTHORITY:* Section 8-13.3-516, C.R.S.

*REQUEST:* The Department requests an appropriation of \$624,126 total funds, including \$54,492 General Fund.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

EXECUTIVE DIRECTOR'S OFFICE, PAID FAMILY AND MEDICAL LEAVE INSURANCE						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
Centrally appropriated line items	\$624,126	\$54,492	\$277,810	\$3,121	\$288,703	0.0
<b>TOTAL</b>	<b>\$624,126</b>	<b>\$54,492</b>	<b>\$277,810</b>	<b>\$3,121</b>	<b>\$288,703</b>	<b>0.0</b>
<b>INCREASE / (DECREASE)</b>	<b>\$624,126</b>	<b>\$54,492</b>	<b>\$277,810</b>	<b>\$3,121</b>	<b>\$288,703</b>	<b>0.0</b>
Percentage Change	n/a	n/a	n/a	n/a	n/a	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$624,126</b>	<b>\$54,492</b>	<b>\$277,810</b>	<b>\$3,121</b>	<b>\$288,703</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

#### UNFUNDED LIABILITY AMORTIZATION EQUALIZATION DISBURSEMENT PAYMENTS

This line item provides funding for amortization and supplemental amortization payments to increase the funded status of the Public Employees' Retirement Association (PERA).

*STATUTORY AUTHORITY:* Section 24-51-411, C.R.S.

*REQUEST:* The Department requests an appropriation of \$18,273,486 total funds, including \$3,431,824 General Fund for FY 2024-25.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, UNFUNDED LIABILITY AMORTIZATION EQUALIZATION DISBURSEMENT PAYMENTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
Centrally appropriated line items	\$18,038,116	\$3,330,192	\$6,081,350	\$1,506,358	\$7,120,216	0.0
R3 Health facility licensure funding	0	0	0	0	0	0.0
R4 State syphilis response	0	0	0	0	0	0.0
R6 Tuberculosis program infrastructure	0	0	0	0	0	0.0
R7 Environmental justice	0	0	0	0	0	0.0

ADMINISTRATION AND SUPPORT, ADMINISTRATION, UNFUNDED LIABILITY AMORTIZATION EQUALIZATION DISBURSEMENT PAYMENTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
R8 Lead testing support	0	0	0	0	0	0.0
R9 Office of health equity and environmental justice	0	0	0	0	0	0.0
R10 Office of health equity tribal relations	0	0	0	0	0	0.0
Annualize prior year budget actions	(53,398)	(53,398)	0	0	0	0.0
<b>TOTAL</b>	<b>\$17,984,718</b>	<b>\$3,276,794</b>	<b>\$6,081,350</b>	<b>\$1,506,358</b>	<b>\$7,120,216</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>\$17,984,718</b>	<b>\$3,276,794</b>	<b>\$6,081,350</b>	<b>\$1,506,358</b>	<b>\$7,120,216</b>	<b>0.0</b>
Percentage Change	n/a	n/a	n/a	n/a	n/a	0.0%
Request Above/(Below) Recommendation	(\$17,984,718)	(\$3,276,794)	(\$6,081,350)	(\$1,506,358)	(\$7,120,216)	0.0

### SALARY SURVEY

This line item funds the recommended salary adjustments pursuant to DPA's annual compensation report done to determine if the state salary structure is comparable to general market conditions.

*STATUTORY AUTHORITY:* Section 24-50-104, C.R.S.

*REQUEST:* The Department requests an appropriation of \$8,460,594 total funds, including \$1,696,040 General Fund.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, SALARY SURVEY						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$10,983,241	\$2,742,989	\$2,872,369	\$870,133	\$4,497,750	0.0
<b>TOTAL</b>	<b>\$10,983,241</b>	<b>\$2,742,989</b>	<b>\$2,872,369</b>	<b>\$870,133</b>	<b>\$4,497,750</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$10,983,241	\$2,742,989	\$2,872,369	\$870,133	\$4,497,750	0.0
Centrally appropriated line items	6,344,790	1,166,446	2,137,030	527,087	2,514,227	0.0
Annualize prior year budget actions	(10,983,241)	(2,742,989)	(2,872,369)	(870,133)	(4,497,750)	0.0
<b>TOTAL</b>	<b>\$6,344,790</b>	<b>\$1,166,446</b>	<b>\$2,137,030</b>	<b>\$527,087</b>	<b>\$2,514,227</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$4,638,451)</b>	<b>(\$1,576,543)</b>	<b>(\$735,339)</b>	<b>(\$343,046)</b>	<b>(\$1,983,523)</b>	<b>0.0</b>
Percentage Change	(42.2%)	(57.5%)	(25.6%)	(39.4%)	(44.1%)	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$8,460,594</b>	<b>\$1,696,040</b>	<b>\$2,907,212</b>	<b>\$782,137</b>	<b>\$3,075,205</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$2,115,804	\$529,594	\$770,182	\$255,050	\$560,978	0.0

### PERA DIRECT DISTRIBUTION

This line item is included as a common policy allocation payment for the state portion of the PERA Direct Distribution created in Section 24-51-414, C.R.S., enacted in S.B. 18-200.

*STATUTORY AUTHORITY:* Section 24-51-414, (2) C.R.S.

*REQUEST:* The Department requests \$1,537,579 total funds, including \$811,961 General Fund.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, PERA DIRECT DISTRIBUTION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$514,049	\$118,427	\$143,755	\$251,867	\$0	0.0
<b>TOTAL</b>	<b>\$514,049</b>	<b>\$118,427</b>	<b>\$143,755</b>	<b>\$251,867</b>	<b>\$0</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$514,049	\$118,427	\$143,755	\$251,867	\$0	0.0
Centrally appropriated line items	3,568,988	2,059,306	1,202,749	306,933	0	0.0
<b>TOTAL</b>	<b>\$4,083,037</b>	<b>\$2,177,733</b>	<b>\$1,346,504</b>	<b>\$558,800</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>\$3,568,988</b>	<b>\$2,059,306</b>	<b>\$1,202,749</b>	<b>\$306,933</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	694.3%	1,738.9%	836.7%	121.9%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$1,537,579</b>	<b>\$811,961</b>	<b>\$421,388</b>	<b>\$304,230</b>	<b>\$0</b>	<b>0.0</b>
Request Above/(Below) Recommendation	(\$2,545,458)	(\$1,365,772)	(\$925,116)	(\$254,570)	\$0	0.0

## TEMPORARY EMPLOYEES RELATED TO AUTHORIZED LEAVE

*STATUTORY AUTHORITY:* n/a

*REQUEST:* The Department requests an appropriation of \$268,051 total funds, including \$39,372 General Fund, which reflects a continuation level of funding.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, TEMPORARY EMPLOYEES RELATED TO AUTHORIZED LEAVE						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$268,051	\$39,372	\$0	\$0	\$228,679	0.0
<b>TOTAL</b>	<b>\$268,051</b>	<b>\$39,372</b>	<b>\$0</b>	<b>\$0</b>	<b>\$228,679</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$268,051	\$39,372	\$0	\$0	\$228,679	0.0
<b>TOTAL</b>	<b>\$268,051</b>	<b>\$39,372</b>	<b>\$0</b>	<b>\$0</b>	<b>\$228,679</b>	<b>0.0</b>
Percentage Change	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$268,051</b>	<b>\$39,372</b>	<b>\$0</b>	<b>\$0</b>	<b>\$228,679</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## LEAVE PAYOUTS

Under state personnel rules, the Department is required to pay retiring and terminating employees for unused accrued leave. Pursuant to federal regulations in OMB Circular A-87, the Department cannot directly charge these costs to the federal grants. The Department uses indirect cost recoveries to pay these costs to federally funded employees. Any funds in this line item not required for the payout of federally funded employees is used to pay the leave payouts of General Fund and cash funded employees.

*STATUTORY AUTHORITY:* Sections 25-1-102, 25-1-106, and 25-1-109, C.R.S., and OMB Circular A-87.

*REQUEST:* The Department requests an appropriation of \$1,293,323 reappropriated funds which represents a continuation level of funding,

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

## WORKERS' COMPENSATION

This line item is used to pay the Department's share of the state's workers' compensation program run by DPA.

*STATUTORY AUTHORITY:* Section 24-30-1510.7, C.R.S.

*REQUEST:* The Department requests an appropriation of \$447,496 total funds, including \$574 General Fund.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, WORKERS' COMPENSATION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$362,963	\$574	\$0	\$362,389	\$0	0.0
<b>TOTAL</b>	<b>\$362,963</b>	<b>\$574</b>	<b>\$0</b>	<b>\$362,389</b>	<b>\$0</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$362,963	\$574	\$0	\$362,389	\$0	0.0
Centrally appropriated line items	71,049	112	0	70,937	0	0.0
<b>TOTAL</b>	<b>\$434,012</b>	<b>\$686</b>	<b>\$0</b>	<b>\$433,326</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>\$71,049</b>	<b>\$112</b>	<b>\$0</b>	<b>\$70,937</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	19.6%	19.5%	0.0%	19.6%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	\$13,484	(\$112)	\$0	\$13,596	\$0	0.0

## OPERATING EXPENSES

This line item funds the operating expenses of the Administration subdivision.

*STATUTORY AUTHORITY:* Sections 25-1-102, 25-1-106, and 25-1-109, C.R.S.

*REQUEST:* The Department requests an appropriation of \$3,437,902 total funds, including \$234,078 General Fund.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

ADMINISTRATION AND SUPPORT, ADMINISTRATION, OPERATING EXPENSES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$3,305,552	\$232,728	\$0	\$3,072,824	\$0	0.0
HB 24-1196 (CDPHE Supplemental)	145,000	0	0	145,000	0	0.0
Other legislation	7,208	7,208	0	0	0	0.0
<b>TOTAL</b>	<b>\$3,457,760</b>	<b>\$239,936</b>	<b>\$0</b>	<b>\$3,217,824</b>	<b>\$0</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$3,457,760	\$239,936	\$0	\$3,217,824	\$0	0.0
BA4 Phone system modernization	145,000	0	0	145,000	0	0.0
Annualize prior year legislation	(150,858)	(5,858)	0	(145,000)	0	0.0
Annualize prior year budget actions	(14,000)	0	0	(14,000)	0	0.0
<b>TOTAL</b>	<b>\$3,437,902</b>	<b>\$234,078</b>	<b>\$0</b>	<b>\$3,203,824</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$19,858)</b>	<b>(\$5,858)</b>	<b>\$0</b>	<b>(\$14,000)</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(0.6%)	(2.4%)	0.0%	(0.4%)	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$3,437,902</b>	<b>\$234,078</b>	<b>\$0</b>	<b>\$3,203,824</b>	<b>\$0</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## LEGAL SERVICES

This line item is used to pay the Department of Law for the provision of legal services to all divisions.

*STATUTORY AUTHORITY:* Sections 25-31-101 (1) (a), C.R.S. as defined in Section 24-75-112 (1) (i), C.R.S.

*REQUEST:* The Department requests an appropriation of \$6,529,337 total funds, including \$2,136,988 General Fund.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, LEGAL SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$6,326,261	\$2,013,961	\$642,765	\$3,669,535	\$0	0.0
Other legislation	529,017	490,951	0	,066	0	0.0
<b>TOTAL</b>	<b>\$6,855,278</b>	<b>\$2,504,912</b>	<b>\$642,765</b>	<b>\$3,707,601</b>	<b>\$0</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						

ADMINISTRATION AND SUPPORT, ADMINISTRATION, LEGAL SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 Appropriation	\$6,855,278	\$2,504,912	\$642,765	\$3,707,601	\$0	0.0
Annualize prior year legislation	70,578	(169,664)	0	240,242	0	0.0
Centrally appropriated line items	(396,519)	(198,260)	0	(198,259)	0	0.0
<b>TOTAL</b>	<b>\$6,529,337</b>	<b>\$2,136,988</b>	<b>\$642,765</b>	<b>\$3,749,584</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$325,941)</b>	<b>(\$367,924)</b>	<b>\$0</b>	<b>\$41,983</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(4.8%)	(14.7%)	0.0%	1.1%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$6,529,337</b>	<b>\$2,136,988</b>	<b>\$642,765</b>	<b>\$3,749,584</b>	<b>\$0</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### ADMINISTRATIVE LAW JUDGE SERVICES

This line item funds the cost of purchasing administrative law judge services from PER.

*STATUTORY AUTHORITY:* Section 24-30-1003 (1), C.R.S.

*REQUEST:* The Department requests an appropriation of \$121,906 total funds, including \$47,424 General.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, ADMINISTRATIVE LAW JUDGE SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$69,416	\$16,679	\$1,213	\$51,524	\$0	0.0
<b>TOTAL</b>	<b>\$69,416</b>	<b>\$16,679</b>	<b>\$1,213</b>	<b>\$51,524</b>	<b>\$0</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$69,416	\$16,679	\$1,213	\$51,524	\$0	0.0
Centrally appropriated line items	36,591	8,792	639	27,160	0	0.0
Annualize prior year legislation	9,000	9,000	0	0	0	0.0
<b>TOTAL</b>	<b>\$115,007</b>	<b>\$34,471</b>	<b>\$1,852</b>	<b>\$78,684</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>\$45,591</b>	<b>\$17,792</b>	<b>\$639</b>	<b>\$27,160</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	65.7%	106.7%	52.7%	52.7%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$121,906</b>	<b>\$47,424</b>	<b>\$1,213</b>	<b>\$73,269</b>	<b>\$0</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$6,899	\$12,953	(\$639)	(\$5,415)	\$0	0.0

### PAYMENT TO RISK MANAGEMENT AND PROPERTY FUNDS

This line item is used to reimburse the Department of Personnel for the Department's share of the state's liability and property insurance.

*STATUTORY AUTHORITY:* Sections 24-30-1510 and 24-30-1510.5, C.R.S.

**REQUEST:** The Department has requested an appropriation of \$937,596 total funds, including \$129,771 General Fund.

**RECOMMENDATION:** **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, PAYMENT TO RISK MANAGEMENT AND PROPERTY FUNDS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
HB 24-1196 (CDPHE Supplemental)	\$1,213,102	\$145,272	\$0	\$1,067,830	\$0	0.0
SB 23-214 (Long Bill)	1,083,657	129,771	0	953,886	0	0.0
<b>TOTAL</b>	<b>\$2,296,759</b>	<b>\$275,043</b>	<b>\$0</b>	<b>\$2,021,716</b>	<b>\$0</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$2,296,759	\$275,043	\$0	\$2,021,716	\$0	0.0
Centrally appropriated line items	238,851	297,341	0	(58,490)	0	0.0
Annualize prior year legislation	(1,213,102)	(145,272)	0	(1,067,830)	0	0.0
<b>TOTAL</b>	<b>\$1,322,508</b>	<b>\$427,112</b>	<b>\$0</b>	<b>\$895,396</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE / (DECREASE)</b>	<b>(\$974,251)</b>	<b>\$152,069</b>	<b>\$0</b>	<b>(\$1,126,320)</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(42.4%)	55.3%	0.0%	(55.7%)	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$937,596</b>	<b>\$129,771</b>	<b>\$0</b>	<b>\$807,825</b>	<b>\$0</b>	<b>0.0</b>
Request Above/(Below) Recommendation	(\$384,912)	(\$297,341)	\$0	(\$87,571)	\$0	0.0

## VEHICLE LEASE PAYMENTS

This line item provides funding for annual payments to PER for the cost of administration, loan repayment, and lease-purchase payments for new and replacement motor vehicles used by the Department.

**STATUTORY AUTHORITY:** Section 24-30-1104 (2), C.R.S.

**REQUEST:** The Department requests an appropriation of \$425,334 total funds, including \$38,108 General Fund.

**RECOMMENDATION:** **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, VEHICLE LEASE PAYMENTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$498,738	\$44,685	\$413,163	\$40,890	\$0	0.0
HB 24-1196 (CDPHE Supplemental)	0	0	0	0	0	0.0
<b>TOTAL</b>	<b>\$498,738</b>	<b>\$44,685</b>	<b>\$413,163</b>	<b>\$40,890</b>	<b>\$0</b>	<b>0.0</b>



ADMINISTRATION AND SUPPORT, ADMINISTRATION, VEHICLE LEASE PAYMENTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$498,738	\$44,685	\$413,163	\$40,890	\$0	0.0
Non-prioritized decision items	(73,404)	(6,577)	(60,809)	(6,018)	0	0.0
<b>TOTAL</b>	<b>\$425,334</b>	<b>\$38,108</b>	<b>\$352,354</b>	<b>\$34,872</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$73,404)</b>	<b>(\$6,577)</b>	<b>(\$60,809)</b>	<b>(\$6,018)</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(14.7%)	(14.7%)	(14.7%)	(14.7%)	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$425,334</b>	<b>\$38,108</b>	<b>\$352,354</b>	<b>\$34,872</b>	<b>\$0</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### LEASED SPACE

The Department has eight leased spaces throughout the state. The "main campus" is located near the intersection of Colorado Boulevard and Cherry Creek Drive in Denver and houses the majority of the Department's programs and staff. There are additional spaces leased throughout the state primarily for the Air Pollution Control Division and Water Quality Control Division.

*STATUTORY AUTHORITY:* Section 25-7-104 through 110.5, C.R.S.

*REQUEST:* The Department requests an appropriation of \$9,129,846 total funds, including \$641,222 General Fund.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, LEASED SPACE						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$9,329,526	\$641,222	\$973,292	\$7,701,512	\$13,500	0.0
<b>TOTAL</b>	<b>\$9,329,526</b>	<b>\$641,222</b>	<b>\$973,292</b>	<b>\$7,701,512</b>	<b>\$13,500</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$9,329,526	\$641,222	\$973,292	\$7,701,512	\$13,500	0.0
Annualize prior year budget actions	(199,680)	0	(199,680)	0	0	0.0
<b>TOTAL</b>	<b>\$9,129,846</b>	<b>\$641,222</b>	<b>\$773,612</b>	<b>\$7,701,512</b>	<b>\$13,500</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$199,680)</b>	<b>\$0</b>	<b>(\$199,680)</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(2.1%)	0.0%	(20.5%)	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$9,129,846</b>	<b>\$641,222</b>	<b>\$773,612</b>	<b>\$7,701,512</b>	<b>\$13,500</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### CAPITOL COMPLEX LEASED SPACE

The Department leases 3,996 square feet of space in the State Services Building in Grand Junction for staff working in the Water Quality Control, Hazardous Materials and Waste Management, Disease Control, and Health Facilities divisions.

*STATUTORY AUTHORITY:* Section 24-30-1104 (4) and Part 1 of Article 82 of Title 24, C.R.S.

*REQUEST:* The Department requests an appropriation of \$56,566 total funds, including \$11,830 General Fund.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, CAPITOL COMPLEX LEASED SPACE						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$38,600	\$2,847	\$0	\$35,753	\$0	0.0
<b>TOTAL</b>	<b>\$38,600</b>	<b>\$2,847</b>	<b>\$0</b>	<b>\$35,753</b>	<b>\$0</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$38,600	\$2,847	\$0	\$35,753	\$0	0.0
Centrally appropriated line items	4,830	356	0	4,474	0	0.0
<b>TOTAL</b>	<b>\$43,430</b>	<b>\$3,203</b>	<b>\$0</b>	<b>\$40,227</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>\$4,830</b>	<b>\$356</b>	<b>\$0</b>	<b>\$4,474</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	12.5%	12.5%	0.0%	12.5%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	\$13,136	\$8,627	\$0	\$4,509	\$0	0.0

#### ANNUAL DEPRECIATION-LEASE EQUIVALENT PAYMENTS

Senate Bill 15-211 ("Automatic Funding for Capital Assets") requires departments to set aside funding in the operating budget for depreciation-equivalent payments on capital assets. Departments are required to add new line items in the operating budget for depreciation-equivalent payments for the request year following the completion of a capital project when capital assets are eligible for depreciation. The amount included in the line item is for three years' worth of depreciation for one project completed in FY 2015-16.

*STATUTORY AUTHORITY:* Section 24-30-1310 (2)(b), C.R.S.

*REQUEST:* The Department requests an appropriation of \$483,626 total funds, including \$380,068 General Fund, which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the request for continuation funding.**

ADMINISTRATION AND SUPPORT, ADMINISTRATION, ANNUAL DEPRECIATION-LEASE EQUIVALENT PAYMENT						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$483,626	\$380,068	\$103,558	\$0	\$0	0.0
<b>TOTAL</b>	<b>\$483,626</b>	<b>\$380,068</b>	<b>\$103,558</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>

ADMINISTRATION AND SUPPORT, ADMINISTRATION, ANNUAL DEPRECIATION-LEASE EQUIVALENT  
PAYMENT

	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$483,626	\$380,068	\$103,558	\$0	\$0	0.0
<b>TOTAL</b>	<b>\$483,626</b>	<b>\$380,068</b>	<b>\$103,558</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change						
	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST						
	\$483,626	\$380,068	\$103,558	\$0	\$0	0.0
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### PAYMENTS TO OIT

This line item funds all the information technology services provided by the Governor's Office of Information Technology (OIT).

*STATUTORY AUTHORITY:* Section 24-37.5-104, C.R.S.

*REQUEST:* The Department requests an appropriation of \$19,121,823 total funds, including \$8,379,329 General Fund.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, PAYMENTS TO OIT

	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$17,605,610	\$7,121,120	\$64,806	\$8,397,344	\$2,022,340	0.0
HB 24-1196 (CDPHE Supplemental)	914,778	305,331	0	609,447	0	0.0
<b>TOTAL</b>	<b>\$18,520,388</b>	<b>\$7,426,451</b>	<b>\$64,806</b>	<b>\$9,006,791</b>	<b>\$2,022,340</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$18,520,388	\$7,426,451	\$64,806	\$9,006,791	\$2,022,340	0.0
Centrally appropriated line items	1,555,208	1,277,850	10,687,365	(8,387,667)	(2,022,340)	0.0
Annualize prior year legislation	(934,419)	(324,972)	0	(609,447)	0	0.0
Annualize prior year budget actions	(9,677)	0	0	(9,677)	0	0.0
<b>TOTAL</b>	<b>\$19,131,500</b>	<b>\$8,379,329</b>	<b>\$10,752,171</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
INCREASE/(DECREASE)						
	\$611,112	\$952,878	\$10,687,365	(\$9,006,791)	(\$2,022,340)	0.0
Percentage Change						
	3.3%	12.8%	16,491.3%	(100.0%)	(100.0%)	0.0%
FY 2024-25 EXECUTIVE REQUEST						
	\$19,131,500	\$8,379,329	\$10,752,171	\$0	\$0	0.0
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### DIGITAL TRUNK RADIO PAYMENTS

This line item provides funding for payments to the Office of Public Safety Communications in the Department of Public Safety related to digital trunk radio user charges. This is a new line item that reflects the transfer of digital trunk radio administration from the Office of Information Technology

to the Office of Public Safety Communications as created by H.B. 22-1353 (Public Safety Communications Transfer).

*STATUTORY AUTHORITY:* Section 24-33.5-2508, C.R.S.

*REQUEST:* The Department requests \$106,320 General Fund.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, DIGITAL TRUNK PAYMENTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$102,454	\$102,454	\$0	\$0	\$0	0.0
<b>TOTAL</b>	<b>\$102,454</b>	<b>\$102,454</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$102,454	\$102,454	\$0	\$0	\$0	0.0
Non-prioritized decision items	3,866	3,866	0	0	0	0.0
<b>TOTAL</b>	<b>\$106,320</b>	<b>\$106,320</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
INCREASE/(DECREASE)						
	\$3,866	\$3,866	\$0	\$0	\$0	0.0
Percentage Change	3.8%	3.8%	0.0%	0.0%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## IT ACCESSIBILITY

This line item was requested for FY 2023-24 to comply with the requirements of H.B. 21-1110.

*STATUTORY AUTHORITY:* Section 24-85-104, C.R.S.

*REQUEST/RECOMMENDATION:* **The Department did not request and staff does not recommend an appropriation for this line.**

## CORE OPERATIONS

This line item was created in FY 2012-13 to fund the five-phase project to replace the statewide accounting system (COFRS) used by the Office of the State Controller to record all state revenues and expenditures. Prior to the FY 2015-16 Long Bill this line item was titled COFRS Modernization.

*STATUTORY AUTHORITY:* Section 24-30-209, C.R.S.

*REQUEST:* The Department requests an appropriation of \$357,733 total funds, including \$141,296 General Fund.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, CORE OPERATIONS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$921,191	\$96,204	\$0	\$824,987	\$0	0.0
<b>TOTAL</b>	<b>\$921,191</b>	<b>\$96,204</b>	<b>\$0</b>	<b>\$824,987</b>	<b>\$0</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$921,191	\$96,204	\$0	\$824,987	\$0	0.0
Non-prioritized decision items	0	0	0	0	0	0.0
Centrally appropriated line items	(690,547)	(72,117)	0	(618,430)	0	0.0
<b>TOTAL</b>	<b>\$230,644</b>	<b>\$24,087</b>	<b>\$0</b>	<b>\$206,557</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$690,547)</b>	<b>(\$72,117)</b>	<b>\$0</b>	<b>(\$618,430)</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(75.0%)	(75.0%)	0.0%	(75.0%)	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$357,733</b>	<b>\$141,296</b>	<b>\$0</b>	<b>\$216,437</b>	<b>\$0</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$127,089	\$117,209	\$0	\$9,880	\$0	0.0

## UTILITIES

The primary use of funds in this line item is for utility expenses incurred by the State Laboratory. Additionally, the utility expenses incurred by remote monitoring stations used by the Air Pollution Division are funded from this line item. Utility expenses for leased spaces are included in the cost of the lease and appropriated in the leased space line item.

*STATUTORY AUTHORITY:* Sections 25-1.5-101 (1) (e) and 25-7-130, C.R.S.

*REQUEST:* The Department requests an appropriation of \$660,651 total funds, including \$29,909 General Fund.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

ADMINISTRATION AND SUPPORT, ADMINISTRATION, UTILITIES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$563,651	\$29,909	\$161,324	\$360,818	\$11,600	0.0
HB 24-1196 (CDPHE Supplemental)	\$97,000	\$0	\$0	\$97,000	\$0	0.0
<b>TOTAL</b>	<b>\$660,651</b>	<b>\$29,909</b>	<b>\$161,324</b>	<b>\$457,818</b>	<b>\$11,600</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$660,651	\$29,909	\$161,324	\$457,818	\$11,600	0.0
BA3 State lab utilities	97,000	0	0	97,000	0	0.0
Annualize prior year legislation	(97,000)	0	0	(97,000)	0	0.0
<b>TOTAL</b>	<b>\$660,651</b>	<b>\$29,909</b>	<b>\$161,324</b>	<b>\$457,818</b>	<b>\$11,600</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$660,651</b>	<b>\$29,909</b>	<b>\$161,324</b>	<b>\$457,818</b>	<b>\$11,600</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## BUILDING MAINTENANCE AND REPAIR

This appropriation funds maintenance and repair at the Department's main campus and at the state-owned laboratory building at Lowery.

*STATUTORY AUTHORITY:* Section 25-1-102, 25-1-106, 25-1-109, and 25-1.5-101 (1) (e), C.R.S.

*REQUEST:* The Department requests an appropriation of \$447,181 total funds, including \$23,252 General Fund which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation funding request.**

## REIMBURSEMENT FOR MEMBERS OF THE STATE BOARD OF HEALTH

This line time funds the \$50 daily per diem for State Board of Health Members when they attend board meetings pursuant to Section 25-1-104, C.R.S. All other approved travel expenses are paid through the operating expenses line item in this subdivision.

*STATUTORY AUTHORITY:* Section 25-1-104, C.R.S.

*REQUEST:* The Department requests an appropriation of \$5,100 General Fund which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation funding request.**

## ENVIRONMENTAL JUSTICE OMBUDSPERSON

This line time was added in FY 2021-22 by HB 21-1266 (Environmental Justice Disproportionate Impacted Community).

*STATUTORY AUTHORITY:* Section 24-4-109, C.R.S.

*REQUEST:* The Department does not request an appropriation for this line item.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

ADMINISTRATION AND SUPPORT, ADMINISTRATION, ENVIRONMENTAL JUSTICE OMBUDSPERSON						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$884,062	\$0	\$884,062	\$0	\$0	7.7
<b>TOTAL</b>	<b>\$884,062</b>	<b>\$0</b>	<b>\$884,062</b>	<b>\$0</b>	<b>\$0</b>	<b>7.7</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$884,062	\$0	\$884,062	\$0	\$0	7.7
R9 Office of health equity and environmental justice	(884,062)	0	(884,062)	0	0	(7.7)
<b>TOTAL</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE / (DECREASE)</b>	<b>(\$884,062)</b>	<b>\$0</b>	<b>(\$884,062)</b>	<b>\$0</b>	<b>\$0</b>	<b>(7.7)</b>
Percentage Change	(100.0%)	0.0%	(100.0%)	0.0%	0.0%	(100.0%)

ADMINISTRATION AND SUPPORT, ADMINISTRATION, ENVIRONMENTAL JUSTICE OMBUDSPERSON						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### INDIRECT COSTS ASSESSMENT

This line item funds the indirect cost assessments paid to cover the costs of the department-wide services (like budgeting, human resources, information technology services, and risk management costs).

*STATUTORY AUTHORITY:* Section 24-75-1401, C.R.S.

*REQUEST:* The Department requests an appropriation of \$ 1,769,758 total funds, including \$268,738 General Fund.

*RECOMMENDATION:* **The staff recommendation is provided in the table below and is consistent with Committee action on common policy.** Staff requests permission to make adjustments as necessary to reflect the Committee's final action on total compensation policy.

ADMINISTRATION AND SUPPORT, ADMINISTRATION, INDIRECT COSTS ASSESSMENT						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 APPROPRIATION</b>						
HB 24-1196 (CDPHE Supplemental)	\$5,584,476	\$0	\$0	\$5,584,476	\$0	0.0
SB 23-214 (Long Bill)	\$648,697	\$0	\$339,422	\$88,603	\$220,672	0.0
<b>TOTAL</b>	<b>\$6,233,173</b>	<b>\$0</b>	<b>\$339,422</b>	<b>\$5,673,079</b>	<b>\$220,672</b>	<b>0.0</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$6,233,173	\$0	\$339,422	\$5,673,079	\$220,672	0.0
Indirect cost assessment	1,082,062	0	290,008	351,605	440,449	0.0
Non-prioritized decision items	38,999	0	30,650	8,349	0	0.0
Annualize prior year legislation	(5,584,476)	0	0	(5,584,476)	0	0.0
<b>TOTAL</b>	<b>\$1,769,758</b>	<b>\$0</b>	<b>\$660,080</b>	<b>\$448,557</b>	<b>\$661,121</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$4,463,415)</b>	<b>\$0</b>	<b>\$320,658</b>	<b>(\$5,224,522)</b>	<b>\$440,449</b>	<b>0.0</b>
Percentage Change	(71.6%)	0.0%	94.5%	(92.1%)	199.6%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$1,769,758</b>	<b>\$268,738</b>	<b>\$660,080</b>	<b>\$179,819</b>	<b>\$661,121</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$0	\$268,738	\$0	(\$268,738)	\$0	0.0

### STATEWIDE ADMINISTRATIVE SERVICES [NEW LINE ITEM]

This line item provides funding for payments for statewide administrative services provide by the Department of Personnel's Executive Director's Office.

*STATUTORY AUTHORITY:* Article 50.3 of Title 24, C.R.S.

*REQUEST:* The Department requests an appropriation of \$194,424 total funds, including \$130,727 General Fund and \$63,697 reappropriated funds for creation of a new line item to accommodate a

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new common policy to provide annual funding for administrative services provide by the Department of Personnel.

*RECOMMENDATION:* The staff **recommendation is pending** the Committee common policy decision for this line item. Staff requests permission to update pending line items and apply necessary fund split adjustments once Committee policy is established.

#### OFFICE OF THE STATE ARCHITECT SERVICES [NEW LINE ITEM]

This line item provides funding for payments statewide services provide by the Department of Personnel's Office of the State Architect.

*STATUTORY AUTHORITY:* Part 13 of Article 30 of Title 24, C.R.S.

*REQUEST:* The Department requests an appropriation of \$4,775 total funds, including \$3,211 General Fund and \$1,564 reappropriated funds, for creation of a new line item to accommodate a new common policy to provide annual funding for administrative services provide by the Department of Personnel.

*RECOMMENDATION:* The staff **recommendation is pending** the Committee common policy decision for this line item. Staff requests permission to update pending line items and apply necessary fund split adjustments once Committee policy is established.

#### STATE AGENCY SERVICES [NEW LINE ITEM]

This line item provides funding for payments for statewide human resource services provide by the Department of Personnel's Division of Human Resources.

*STATUTORY AUTHORITY:* Part 13 of Article 30 of Title 24, C.R.S.

*REQUEST:* The Department requests an appropriation of \$317,454 total funds, including \$213,450 General Fund and \$104,004 reappropriated funds, for creation of a new line item to accommodate a new common policy to provide annual funding for administrative services provide by the Department of Personnel.

*RECOMMENDATION:* The staff **recommendation is pending** the Committee common policy decision for this line item. Staff requests permission to update pending line items and apply necessary fund split adjustments once Committee policy is established.

#### STATEWIDE TRAINING SERVICES [NEW LINE ITEM]

This line item provides funding for payments to the Center for Organizational Effectiveness, which provides professional development and training services for state employees.

*STATUTORY AUTHORITY:* Section 24-50-122, C.R.S.

*REQUEST:* The Department requests an appropriation of The Department requests an appropriation of \$63,990 total funds, including \$43,026 General Fund and \$20,964 reappropriated funds, for creation of a new line item to accommodate a new common policy to provide annual funding for administrative services provide by the Department of Personnel.



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*RECOMMENDATION:* The staff **recommendation is pending** the Committee common policy decision for this line item. Staff requests permission to update pending line items and apply necessary fund split adjustments once Committee policy is established.

#### LABOR RELATIONS SERVICES [NEW LINE ITEM]

This line item provides funding for payments for statewide labor relation services provide by the Department of Personnel's Division of Human Resources, Labor Relations Unit.

*STATUTORY AUTHORITY:* Part 11, Article 50, of Title 24, C.R.S.

*REQUEST:* The Department requests an appropriation of \$476,215 total funds, including \$320,198 General Fund and \$156,017 reappropriated funds, for creation of a new line item to accommodate a new common policy to provide annual funding for administrative services provide by the Department of Personnel.

*RECOMMENDATION:* The staff **recommendation is pending** the Committee common policy decision for this line item. Staff requests permission to update pending line items and apply necessary fund split adjustments once Committee policy is established.

#### FINANCIAL OPERATIONS AND REPORTING SERVICES [NEW LINE ITEM]

This line item provides funding for payments for statewide financial operations and reporting services provide by the Department of Personnel's Division of Accounts and Control.

Statutory Authority: Sections 24-30-201 through 24-30-207, C.R.S.

Request: The Department requests an appropriation of \$694,162 total funds, including \$466,741 General Fund and \$227,421 reappropriated funds, for creation of a new line item to accommodate a new common policy to provide annual funding for administrative services provide by the Department of Personnel.

Recommendation: The staff recommendation is pending the Committee common policy decision for this line item. Staff requests permission to update pending line items and apply necessary fund split adjustments once Committee policy is established.

#### PROCUREMENT AND CONTRACTS SERVICES [NEW LINE ITEM]

This line item provides funding for payments for statewide procurement and contracts services provide by the Department of Personnel's Division of Accounts and Control.

Statutory Authority: Sections 24-102-201 through 207 and 24-102-301, C.R.S.

Request: The Department requests an appropriation of \$429,904 total funds, including \$289,059 General Fund and \$140,845 reappropriated funds, for creation of a new line item to accommodate a new common policy to provide annual funding for administrative services provide by the Department of Personnel.

*RECOMMENDATION:* The staff recommendation is pending the Committee common policy decision for this line item. Staff requests permission to update pending line items and apply necessary fund split adjustments once Committee policy is established.

## (B) OFFICE OF HEALTH EQUITY

### PERSONAL SERVICES

This line item funds the personnel and operating expenses of the Office of Health Equity.

*STATUTORY AUTHORITY:* Section 25-4-2201 through 2207, C.R.S.

*REQUEST:* The Department requests an appropriation of \$2,388,493 total funds, including \$1,638,982 General Fund, and 19.5 FTE.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

ADMINISTRATION AND SUPPORT, OFFICE OF HEALTH EQUITY, PERSONAL SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$1,871,234	\$1,315,903	\$51,783	\$503,548	\$0	18.6
<b>TOTAL</b>	<b>\$1,871,234</b>	<b>\$1,315,903</b>	<b>\$51,783</b>	<b>\$503,548</b>	<b>\$0</b>	<b>18.6</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,871,234	\$1,315,903	\$51,783	\$503,548	\$0	18.6
Annualize prior year budget actions	393,806	199,626	52,761	141,419	0	0.0
R10 Office of health equity tribal relations	93,446	93,446	0	0	0	0.9
<b>TOTAL</b>	<b>\$2,358,486</b>	<b>\$1,608,975</b>	<b>\$104,544</b>	<b>\$644,967</b>	<b>\$0</b>	<b>19.5</b>
<b>INCREASE/(DECREASE)</b>	<b>\$487,252</b>	<b>\$293,072</b>	<b>\$52,761</b>	<b>\$141,419</b>	<b>\$0</b>	<b>0.9</b>
Percentage Change	26.0%	22.3%	101.9%	28.1%	0.0%	4.8%
FY 2024-25 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	\$30,007	\$30,007	\$0	\$0	\$0	0.0

### HEALTH DISPARITIES GRANTS

This line item funds the grants awarded by the Office of Health Disparities. The dollar amount available each fiscal year is based on the amount of Amendment 35 tobacco tax revenue and unspent funds from the previous fiscal year.

*STATUTORY AUTHORITY:* Section 25-4-2201 through 2207, C.R.S.

*REQUEST:* The Department requests an appropriation of \$11,014,813 total funds including \$3,655,639 General Fund.

*RECOMMENDATION:* **Staff recommendation is detailed below.** The recommendation is based off of available revenue from both Amendment 35 and Proposition EE, as well as the available cash fund balance.

ADMINISTRATION AND SUPPORT, OFFICE OF HEALTH EQUITY, HEALTH DISPARITIES GRANTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$11,014,813	\$4,700,000	\$3,655,639	\$2,659,174	\$0	0.0
<b>TOTAL</b>	<b>\$11,014,813</b>	<b>\$4,700,000</b>	<b>\$3,655,639</b>	<b>\$2,659,174</b>	<b>\$0</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$11,014,813	\$4,700,000	\$3,655,639	\$2,659,174	\$0	0.0
MSA, A35, Prop EE tobacco adjustments	(2,311,942)	0	(1,557,048)	(754,894)	0	0.0
<b>TOTAL</b>	<b>\$8,702,871</b>	<b>\$4,700,000</b>	<b>\$2,098,591</b>	<b>\$1,904,280</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE / (DECREASE)</b>	<b>(\$2,311,942)</b>	<b>\$0</b>	<b>(\$1,557,048)</b>	<b>(\$754,894)</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(21.0%)	0.0%	(42.6%)	(28.4%)	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$11,014,813</b>	<b>\$4,700,000</b>	<b>\$3,655,639</b>	<b>\$2,659,174</b>	<b>\$0</b>	<b>0.0</b>
Request Above / (Below) Recommendation	\$2,311,942	\$0	\$1,557,048	\$754,894	\$0	0.0

### NECESSARY DOCUMENT ASSISTANCE PROGRAM

This line item was added by H.B. 16-1386 (Necessary Document Program) and funds the Necessary Document Assistance Program to support a grant program for an organization to assist individuals in obtaining these necessary documents (e.g. driver's licenses, birth certificates, and social security cards). Section 25-4-2208 (3), C.R.S. requires the General Assembly to appropriate up to \$300,000 General Fund for the Necessary Document Assistance Program.

*STATUTORY AUTHORITY:* Section 25-4-2208, C.R.S.

*REQUEST:* The Department requests, an appropriation of \$310,544 General Fund and 0.1 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

ADMINISTRATION AND SUPPORT, OFFICE OF HEALTH EQUITY, NECESSARY DOCUMENT ASSISTANCE						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$300,570	\$300,570	\$0	\$0	\$0	0.1
<b>TOTAL</b>	<b>\$300,570</b>	<b>\$300,570</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.1</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$300,570	\$300,570	\$0	\$0	\$0	0.1
Annualize prior year budget actions	9,974	9,974	0	0	0	0.0
<b>TOTAL</b>	<b>\$310,544</b>	<b>\$310,544</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.1</b>
<b>INCREASE / (DECREASE)</b>	<b>\$9,974</b>	<b>\$9,974</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	3.3%	3.3%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$310,544</b>	<b>\$310,544</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.1</b>
Request Above / (Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## (C) OFFICE OF PLANNING, PARTNERSHIPS AND IMPROVEMENT

### ASSESSMENT, PLANNING, AND SUPPORT PROGRAM

This Program provides local public health agencies with planning, technical, and financial assistance in the development, and implementation and service delivery of health and environmental services.

*STATUTORY AUTHORITY:* Section 25-1-501 through 515, C.R.S.

*REQUEST:* The Department requests an appropriation of \$914,304 total funds including \$ 299,268 General Fund and 7.4 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

ADMINISTRATION AND SUPPORT, OFFICE OF PUBLIC HEALTH PRACTICE, PLANNING AND LOCAL PARTNERSHIPS, ASSESSMENT, PLANNING, AND SUPPORT PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$904,692	\$289,656	\$0	\$0	\$615,036	7.4
<b>TOTAL</b>	<b>\$904,692</b>	<b>\$289,656</b>	<b>\$0</b>	<b>\$0</b>	<b>\$615,036</b>	<b>7.4</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$904,692	\$289,656	\$0	\$0	\$615,036	7.4
Annualize prior year budget actions	9,612	9,612	0	0	0	0.0
<b>TOTAL</b>	<b>\$914,304</b>	<b>\$299,268</b>	<b>\$0</b>	<b>\$0</b>	<b>\$615,036</b>	<b>7.4</b>
<b>INCREASE / (DECREASE)</b>	<b>\$9,612</b>	<b>\$9,612</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	1.1%	3.3%	0.0%	0.0%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST						
Request Above / (Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### DISTRIBUTIONS TO LOCAL PUBLIC HEALTH AGENCIES

This line item funds the money allocated to local public health agencies for provision of required health and environmental services pursuant to Section 25-1-512, C.R.S. In FY 2013-14 funding for environmental health services not provided by local public health agencies was consolidated into this line item because of changes in the structure of local public health agencies as a result of S.B. 08-094.

Larger local public health agencies conduct their own environmental health inspections and cover these expenses from a combination of fees and local funds. The smaller agencies have two options: ask the Department to conduct these inspections for them, or conduct the inspections themselves and receive a subsidy from the Department. A portion of the General Fund in this line item is used to pay for the subsidy provided to local public health agencies. During the FY 2015-16 figure setting decision process, the Committee voted to apply the Committee's community provider rate policy to this line item.

*STATUTORY AUTHORITY:* Section 25-1-501 through 515, C.R.S.

*REQUEST:* The Department requests an appropriation of \$17,542,632 total funds, of which \$15,554,406 is General Fund, and \$1,988,226 is cash funds from the Marijuana Tax Cash Fund.

**RECOMMENDATION: Staff recommendation is detailed below.** The recommendation reflects a 2.5 percent increase in the community provider, consistent with common policy. Staff requests permission to make adjustments based on the Committee’s final action on common policies.

ADMINISTRATION AND SUPPORT, OFFICE OF PUBLIC HEALTH PRACTICE, PLANNING AND LOCAL PARTNERSHIPS, DISTRIBUTIONS TO LOCAL PUBLIC HEALTH AGENCIES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 APPROPRIATION</b>						
SB 23-214 (Long Bill)	\$19,698,658	\$7,749,418	\$11,949,240	\$0	\$0	0.0
HB 24-1196 (CDPHE Supplemental)	0	0	0	0	0	0.0
<b>TOTAL</b>	<b>\$19,698,658</b>	<b>\$7,749,418</b>	<b>\$11,949,240</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$19,698,658	\$7,749,418	\$11,949,240	\$0	\$0	0.0
R1 Public health infrastructure	7,500,000	7,500,000	0	0	0	0.0
R12 Common policy provider rate adjustment	429,967	381,236	48,731	0	0	0.0
R11b DEHS technical adjustment	0	0	0	0	0	0.0
Annualize prior year legislation	(10,000,000)	0	(10,000,000)	0	0	0.0
<b>TOTAL</b>	<b>\$17,628,625</b>	<b>\$15,630,654</b>	<b>\$1,997,971</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$2,070,033)</b>	<b>\$7,881,236</b>	<b>(\$9,951,269)</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(10.5%)	101.7%	(83.3%)	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>						
Request Above/(Below) Recommendation	(\$85,993)	(\$76,248)	(\$9,745)	\$0	\$0	0.0

## (2) CENTER FOR HEALTH AND ENVIRONMENTAL DATA

This division is comprised of four subdivisions including: Administration, Health Statistics and Vital Records, Medical Marijuana Registry, and Health Data Programs and Information.

### (A) ADMINISTRATION

This subdivision provides division-wide services to the three programs within this division. Funding for this subdivision is from the General Fund, cash funds from the Vital Statistics Records Cash Funds, and departmental indirect cost recoveries.

### (B) HEALTH STATISTICS AND VITAL RECORDS

This subdivision is responsible for the maintenance of Colorado birth, death, marriage, divorce, and other vital records-related certificates. The subdivision administers the Voluntary Adoption Registry, which facilitates voluntary contact between Colorado-born adoptees 18 years of age and older and their birth parents. Division staff provide training on vital records rules, regulations and statutes to individuals and local public health agencies. Data users include the Center for Disease Control, local public health agencies, and epidemiologists. This subdivision is primarily funded with cash funds from the Vital Statistic Records Cash Funds and federal funds.

### (C) MEDICAL MARIJUANA REGISTRY

This subdivision serves as the state database for all individuals who have satisfied the medical requirements to use medical marijuana and have paid the Medical Marijuana Registry fee. The Medical Marijuana Registry is entirely cash funded by the Medical Marijuana Program Cash Fund.

### (D) HEALTH DATA PROGRAMS AND INFORMATION

This subdivision houses a number of the Department's health data programs which gather health data and survey information including the Cancer Registry, Birth Defects Monitoring Program, the funding to connect a number of the health data systems with the statewide Health Information Exchange, and funding for Local Public Health Agencies to build electronic health records which can communicate with the Health Information Exchange. Funding for this subdivision consists of General Fund, Vital Statistics Records Cash Fund, and federal funds.

CENTER FOR HEALTH AND ENVIRONMENTAL DATA						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 Appropriation</b>						
SB 23-214 (Long Bill)	\$13,981,117	\$2,035,913	\$7,585,924	\$6,196	\$4,353,084	104.5
HB 24-1196 (CDPHE Supplemental)	(1,203,409)	0	(1,203,409)	0	0	0.0
<b>TOTAL</b>	<b>\$12,777,708</b>	<b>\$2,035,913</b>	<b>\$6,382,515</b>	<b>\$6,196</b>	<b>\$4,353,084</b>	<b>104.5</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$12,777,708	\$2,035,913	\$6,382,515	\$6,196	\$4,353,084	104.5
Annualize prior year legislation	(1,193,060)	10,349	(1,203,409)	0	0	0.0
Annualize prior year budget actions	(1,002,627)	(42,611)	223,519	746	(1,184,281)	0.0
<b>TOTAL</b>	<b>\$10,582,021</b>	<b>\$2,003,651</b>	<b>\$5,402,625</b>	<b>\$6,942</b>	<b>\$3,168,803</b>	<b>104.5</b>
<b>INCREASE / (DECREASE)</b>	<b>(\$2,195,687)</b>	<b>(\$32,262)</b>	<b>(\$979,890)</b>	<b>\$746</b>	<b>(\$1,184,281)</b>	<b>0.0</b>

CENTER FOR HEALTH AND ENVIRONMENTAL DATA						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
Percentage Change	(17.2%)	(1.6%)	(15.4%)	12.0%	(27.2%)	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$11,785,430</b>	<b>\$2,003,651</b>	<b>\$6,606,034</b>	<b>\$6,942</b>	<b>\$3,168,803</b>	<b>104.5</b>
Request Above/(Below) Recommendation	\$1,203,409	\$0	\$1,203,409	\$0	\$0	0.0

### DECISION ITEMS - CENTER FOR HEALTH AND ENVIRONMENTAL DATA

The Executive Branch did not submit any decision items for this division.

### LINE ITEM DETAIL - CENTER FOR HEALTH AND ENVIRONMENTAL DATA

#### (A) ADMINISTRATION AND SUPPORT

##### PROGRAM COSTS

This line item was created in FY 2015-16 as a result of implementing the divisional indirect cost plan in the Long Bill and funds the personnel services and operating expenses for providing division-wide services.

*STATUTORY AUTHORITY:* Section 25-2-102, C.R.S.

*REQUEST:* The Department requests an appropriation of \$579,040 total funds, including \$105,623 General Fund and 3.8 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

CENTER FOR HEALTH AND ENVIRONMENTAL DATA, ADMINISTRATION AND SUPPORT, PROGRAM COSTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 APPROPRIATION</b>						
SB 23-214 (Long Bill)	\$565,766	\$99,723	\$189,138	\$0	\$276,905	3.8
<b>TOTAL</b>	<b>\$565,766</b>	<b>\$99,723</b>	<b>\$189,138</b>	<b>\$0</b>	<b>\$276,905</b>	<b>3.8</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$565,766	\$99,723	\$189,138	\$0	\$276,905	3.8
Annualize prior year budget actions	13,274	5,900	7,374	0	0	0.0
<b>TOTAL</b>	<b>\$579,040</b>	<b>\$105,623</b>	<b>\$196,512</b>	<b>\$0</b>	<b>\$276,905</b>	<b>3.8</b>
<b>INCREASE/(DECREASE)</b>	<b>\$13,274</b>	<b>\$5,900</b>	<b>\$7,374</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	2.3%	5.9%	3.9%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$579,040</b>	<b>\$105,623</b>	<b>\$196,512</b>	<b>\$0</b>	<b>\$276,905</b>	<b>3.8</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

#### (B) HEALTH STATISTICS AND VITAL RECORDS

##### PERSONAL SERVICES

This line item funds the personnel expenses of this subdivision. Approximately half the staff is responsible for collecting, modifying, and certifying birth and death records. The other half is

responsible for the collection, preparation, and analysis of health data including behavioral health data such as the Pregnancy Risk Assessment and Monitoring System and the Behavioral Risk Factor Surveillance System.

*STATUTORY AUTHORITY:* Sections 1-2-302, 2-101-121, 14-2-106, 14-10-120, 19-6-106 and 106, 19-6-124, and 24-72-112, C.R.S.

*REQUEST:* The Department requests an appropriation of \$4,581,635 total funds including \$205,070 General Fund and 51.0 FTE.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

CENTER FOR HEALTH AND ENVIRONMENTAL DATA, HEALTH STATISTICS AND VITAL RECORDS, PERSONAL SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$5,501,811	\$193,615	\$3,809,562	\$6,196	\$1,492,438	51.0
HB 24-1196 (CDPHE Supplemental)	(1,203,409)	0	(1,203,409)	0	0	0.0
<b>TOTAL</b>	<b>\$4,298,402</b>	<b>\$193,615</b>	<b>\$2,606,153</b>	<b>\$6,196</b>	<b>\$1,492,438</b>	<b>51.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$4,298,402	\$193,615	\$2,606,153	\$6,196	\$1,492,438	51.0
Annualize prior year budget actions	160,733	11,455	148,532	746	0	0.0
Annualize prior year legislation	(1,080,909)	0	(1,080,909)	0	0	0.0
<b>TOTAL</b>	<b>\$3,378,226</b>	<b>\$205,070</b>	<b>\$1,673,776</b>	<b>\$6,942</b>	<b>\$1,492,438</b>	<b>51.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$920,176)</b>	<b>\$11,455</b>	<b>(\$932,377)</b>	<b>\$746</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(21.4%)	5.9%	(35.8%)	12.0%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	\$1,203,409	\$0	\$122,500	\$0	\$1,080,909	(0.0)

## OPERATING EXPENSES

This line item funds the operating expenses of the Health Statistics and Vital Records Sections.

*STATUTORY AUTHORITY:* Sections 2-10-121, 19-6-124, and 25-1-101 through 121, C.R.S.

*REQUEST:* The Department requests an appropriation of \$656,406 total funds including \$205,613 General Fund.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

CENTER FOR HEALTH AND ENVIRONMENTAL DATA, HEALTH STATISTICS AND VITAL RECORDS, OPERATING EXPENSES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$958,906	\$385,613	\$385,185	\$0	\$188,108	0.0
HB 24-1196 (CDPHE Supplemental)	\$0	\$0	\$0	\$0	\$0	0.0



CENTER FOR HEALTH AND ENVIRONMENTAL DATA, HEALTH STATISTICS AND VITAL RECORDS, OPERATING EXPENSES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>TOTAL</b>	<b>\$958,906</b>	<b>\$385,613</b>	<b>\$385,185</b>	<b>\$0</b>	<b>\$188,108</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$958,906	\$385,613	\$385,185	\$0	\$188,108	0.0
Annualize prior year budget actions	(180,000)	(180,000)	0	0	0	0.0
Annualize prior year legislation	(122,500)	0	(122,500)	0	0	0.0
<b>TOTAL</b>	<b>\$656,406</b>	<b>\$205,613</b>	<b>\$262,685</b>	<b>\$0</b>	<b>\$188,108</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$302,500)</b>	<b>(\$180,000)</b>	<b>(\$122,500)</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(31.5%)	(46.7%)	(31.8%)	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$656,406</b>	<b>\$205,613</b>	<b>\$140,185</b>	<b>\$0</b>	<b>\$310,608</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$0	\$0	(\$122,500)	\$0	\$122,500	0.0

## HEALTH SURVEY

This line item was added in the 2022 supplemental bill. The Survey Unit operates a number of health surveys to generate data for the state. A survey of birthing parents (Baby&You) gives people who have given birth the opportunity to share opinions and experiences during the first few years of their babies' lives. The Behavioral Risk Factor Surveillance System (BRFSS) survey collects and reports data on health risk behaviors, preventive health practices and health care access. The Pregnancy Risk Assessment Monitoring System (PRAMS) survey collects data on maternal behaviors and experiences before, during and shortly after pregnancy. Survey data informs federal, State and local Colorado policies and programs designed to address public health issues and advance health equity.

*STATUTORY AUTHORITY:* Sections 2-10-121, 19-6-124, and 25-1-101 through 121, C.R.S.

*REQUEST:* The Department requests an appropriation of \$751,057 General Fund and 2.7 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

CENTER FOR HEALTH AND ENVIRONMENTAL DATA, HEALTH STATISTICS AND VITAL RECORDS, HEALTH SURVEY						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$686,149	\$686,149	\$0	\$0	\$0	2.7
<b>TOTAL</b>	<b>\$686,149</b>	<b>\$686,149</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.7</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$686,149	\$686,149	\$0	\$0	\$0	2.7
Annualize prior year budget actions	54,559	54,559	0	0	0	0.0
Annualize prior year legislation	10,349	10,349	0	0	0	0.0
<b>TOTAL</b>	<b>\$751,057</b>	<b>\$751,057</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.7</b>
<b>INCREASE/(DECREASE)</b>	<b>\$64,908</b>	<b>\$64,908</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	9.5%	9.5%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$751,057</b>	<b>\$751,057</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.7</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## REIMBURSEMENT TO CORONERS

This line item was added by HB 21-1317 (Regulating Marijuana Concentrates).

*STATUTORY AUTHORITY:* Section 25-1.5-106, C.R.S.

*REQUEST:* The Department requests an appropriation of \$159,050 General Fund which represents a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation funding request.**

## (C) MEDICAL MARIJUANA REGISTRY

### PERSONAL SERVICES

This line item funds the personnel expenses of the Medical Marijuana Registry.

*STATUTORY AUTHORITY:* Section 25-1.5-106, C.R.S.

*REQUEST:* The Department requests an appropriation of \$1,463,976 cash funds and 22.2 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

CENTER FOR HEALTH AND ENVIRONMENTAL DATA, MEDICAL MARIJUANA REGISTRY, PERSONAL SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$1,409,039	\$0	\$1,409,039	\$0	\$0	22.2
<b>TOTAL</b>	<b>\$1,409,039</b>	<b>\$0</b>	<b>\$1,409,039</b>	<b>\$0</b>	<b>\$0</b>	<b>22.2</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,409,039	\$0	\$1,409,039	\$0	\$0	22.2
Annualize prior year budget actions	54,937	0	54,937	0	0	0.0
<b>TOTAL</b>	<b>\$1,463,976</b>	<b>\$0</b>	<b>\$1,463,976</b>	<b>\$0</b>	<b>\$0</b>	<b>22.2</b>
<b>INCREASE/(DECREASE)</b>	<b>\$54,937</b>	<b>\$0</b>	<b>\$54,937</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	3.9%	0.0%	3.9%	0.0%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	(0.0)

### OPERATING EXPENSES

This line item funds the operating expenses of the Medical Marijuana Registry.

*STATUTORY AUTHORITY:* Section 25-1.5-106, C.R.S.

*REQUEST:* The Department requests an appropriation of \$340,882 cash funds which represents a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation funding request.**

## (D) HEALTH DATA PROGRAMS AND INFORMATION

### CANCER REGISTRY

This line item funds the operation of the Cancer Registry. The Registry provides population-based data on cancer treatment, incidence, death, and survival. The Registry uses the dollars from a federal grant from the National Program for Cancer Registries for system enhancements, data quality improvements, increased timeliness of reporting and processing of cancer-related data. These dollars are also used to encourage the use of data by researchers in reporting cancer incidence rates and trends to the public. The federal grant includes a maintenance of effort requirement which is satisfied by the General Fund appropriation.

*STATUTORY AUTHORITY:* Section 25-1-107 (1) (z), C.R.S.

*REQUEST:* The Department requests an appropriation of \$1,338,149 total funds, including \$435,719 General Fund, and 10.2 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

CENTER FOR HEALTH AND ENVIRONMENTAL DATA, HEALTH DATA PROGRAMS AND INFORMATION, CANCER REGISTRY						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$1,280,579	\$378,149	\$0	\$0	\$902,430	10.2
<b>TOTAL</b>	<b>\$1,280,579</b>	<b>\$378,149</b>	<b>\$0</b>	<b>\$0</b>	<b>\$902,430</b>	<b>10.2</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,280,579	\$378,149	\$0	\$0	\$902,430	10.2
Annualize prior year budget actions	57,570	57,570	0	0	0	0.0
<b>TOTAL</b>	<b>\$1,338,149</b>	<b>\$435,719</b>	<b>\$0</b>	<b>\$0</b>	<b>\$902,430</b>	<b>10.2</b>
<b>INCREASE/(DECREASE)</b>	<b>\$57,570</b>	<b>\$57,570</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	4.5%	15.2%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$1,338,149</b>	<b>\$435,719</b>	<b>\$0</b>	<b>\$0</b>	<b>\$902,430</b>	<b>10.2</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### BIRTH DEFECTS AND SPECIAL NEEDS PROGRAM

This line item funds the expenses of the Birth Defects Monitoring and Prevention Program. Program staff oversees the monitoring and prevention program for children, newborn to age three, who have birth defects, developmental disabilities, or risks of developmental delay. Once a child is identified as eligible for the program, they are referred to a community provider of early intervention services. The goal of this program is to reduce and/or prevent secondary disabilities. Approximately 9,000 children are identified each year, and approximately half are referred to service providers for additional services. Division staff also administers a federally funded birth defects registry, which is used for epidemiological surveillance to learn about the occurrence of birth defects and developmental disabilities.

*STATUTORY AUTHORITY:* Section 25-1-107, C.R.S.

*REQUEST:* The Department requests an appropriation of \$ 479,312 total funds, including \$141,519 General Fund and 14.6 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

CENTER FOR HEALTH AND ENVIRONMENTAL DATA, HEALTH DATA PROGRAMS AND INFORMATION, BIRTH DEFECTS MONITORING AND PREVENTION PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$1,643,012	\$133,614	\$325,117	\$0	\$1,184,281	14.6
<b>TOTAL</b>	<b>\$1,643,012</b>	<b>\$133,614</b>	<b>\$325,117</b>	<b>\$0</b>	<b>\$1,184,281</b>	<b>14.6</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,643,012	\$133,614	\$325,117	\$0	\$1,184,281	14.6
Annualize prior year budget actions	(1,163,700)	7,905	12,676	0	(1,184,281)	0.0
<b>TOTAL</b>	<b>\$479,312</b>	<b>\$141,519</b>	<b>\$337,793</b>	<b>\$0</b>	<b>\$0</b>	<b>14.6</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$1,163,700)</b>	<b>\$7,905</b>	<b>\$12,676</b>	<b>\$0</b>	<b>(\$1,184,281)</b>	<b>0.0</b>
Percentage Change	(70.8%)	5.9%	3.9%	0.0%	(100.0%)	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$479,312</b>	<b>\$141,519</b>	<b>\$337,793</b>	<b>\$0</b>	<b>\$0</b>	<b>14.6</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## (E) INDIRECT COST ASSESSMENT

### INDIRECT COST ASSESSMENT

Collection of funding to pay for centralized department functions.

*STATUTORY AUTHORITY:* Section 24-75-1401, C.R.S.

*REQUEST:* The Department requests an appropriation of \$1,127,001 cash funds and \$308,922 federal funds which represents a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

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### (3) DISEASE CONTROL AND PUBLIC HEALTH RESPONSE

This division is comprised of the following four sections: Administration, General Disease Control and Surveillance, Laboratory Services, and Office of Emergency Preparedness and Response.

#### (A) ADMINISTRATION

This subdivision provides managerial and administrative support for the Division. Funding for the subdivision is from the General Fund; cash funds including the Laboratory Cash Fund, Newborn Screening and Genetics Counseling Cash Funds, and the Law Enforcement Assistance Cash Fund; divisional reappropriated funds; and federal funds.

#### (B) GENERAL DISEASE CONTROL AND SURVEILLANCE

This subdivision is responsible for maintaining and monitoring the disease-monitoring network, and the operation of the Immunization Program, as well as Tuberculosis control. This subdivision also houses the Marijuana Health Effects Monitoring Program, which is responsible for researching the health impacts of marijuana use. This subdivision is funded by General Fund, cash funds from the Tobacco Master Settlement Agreement and Marijuana Tax Cash Fund, and federal funds.

#### (C) LABORATORY SERVICES

This subdivision performs the following activities: analysis of blood and tissue specimens, testing for newborn genetic disorders, diagnostic testing for bacterial diseases, analysis for disease outbreaks, and water and environmental testing. Laboratory Services also houses the States Certification Sections, which certifies private medical laboratories, environmental laboratories, including water testing laboratories, on-site dairy laboratories, and the state and local law enforcement breath-alcohol testing devices (intoxilyzers) throughout the state. This section is also responsible for surveying marijuana testing facilities and making certification recommendations to the Department of Revenue. The Department also operates a marijuana reference library to supplement the certification work in the Department of Revenue of private marijuana labs. Funding for this section is from the General Fund, cash funds from the Laboratory Cash Fund, and the Newborn Screening and Genetics Counseling Cash Funds, , and federal funds.

#### (D) OFFICE OF EMERGENCY PREPAREDNESS AND RESPONSE

The Office of Emergency Preparedness and Response develops and implements emergency response plans to enable the Department to ensure the protection of health and the medical response for victims when an emergency occurs in Colorado. The Office works to ensure the Department, local public health agencies, and medical agencies have plans for responding to emergency events and administering medication in mass quantities to all citizens in Colorado. Funding for this division includes General Fund and federal funds. The amount of federal dollars this Division receives is driven by formulas that are based, in part, on state population, and if the state accepts the federal funds the state must provide the required match amount.

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 Appropriation</b>						
SB 23-214 (Long Bill)	\$117,266,709	\$14,200,111	\$25,321,679	\$664,800	\$77,080,119	351.6
Other legislation	1,626,223	1,626,223	0	0	0	6.0
HB 24-1196 (CDPHE Supplemental)	927,790	0	927,790	0	0	0.0
<b>TOTAL</b>	<b>\$119,820,722</b>	<b>\$15,826,334</b>	<b>\$26,249,469</b>	<b>\$664,800</b>	<b>\$77,080,119</b>	<b>357.6</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$119,820,722	\$15,826,334	\$26,249,469	\$664,800	\$77,080,119	357.6
R1 Public health infrastructure	7,514,300	7,514,300	0	0	0	83.0
R5 State lab operating	3,602,198	1,117,149	2,485,049	0	0	0.0
R6 Tuberculosis program infrastructure	38,881	38,881	0	0	0	0.0
R10 Office of health equity tribal relations	(208,505)	0	0	0	(208,505)	0.0
BA2 EBAT database funding	169,800	0	169,800	0	0	0.0
BA6 OEPR (M) note	3,568,814	0	0	0	3,568,814	0.0
MSA, A35, Prop EE tobacco adjustments	761,712	0	761,712	0	0	0.0
Annualize prior year legislation	(12,244,233)	(226,294)	(12,017,939)	0	0	(120.5)
Annualize prior year budget actions	1,123,859	920,357	194,129	9,373	0	0.0
<b>TOTAL</b>	<b>\$124,147,548</b>	<b>\$25,190,727</b>	<b>\$17,842,220</b>	<b>\$674,173</b>	<b>\$80,440,428</b>	<b>320.1</b>
<b>INCREASE/(DECREASE)</b>	<b>\$4,326,826</b>	<b>\$9,364,393</b>	<b>(\$8,407,249)</b>	<b>\$9,373</b>	<b>\$3,360,309</b>	<b>(37.5)</b>
Percentage Change	3.6%	59.2%	(32.0%)	1.4%	4.4%	(10.5%)
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$119,097,688</b>	<b>\$25,588,542</b>	<b>\$15,963,359</b>	<b>\$674,173</b>	<b>\$76,871,614</b>	<b>322.1</b>
Request Above/(Below) Recommendation	(\$5,049,860)	\$397,815	(\$1,878,861)	\$0	(\$3,568,814)	2.0

## DECISION ITEMS – DISEASE CONTROL AND PUBLIC HEALTH RESPONSE

### → R5 STATE LAB OPERATING

**REQUEST:** The Department requests an ongoing increase of \$1.3 million General Fund and \$1.4 million in cash fund spending authority in FY 2024-25 and ongoing for the State Lab, and would fund courier services that deliver samples to the lab from across Colorado; distribution of supplies to healthcare providers; biological and chemical waste disposal, and iPassport software which manages standard operating procedures, regulations, safety requirements and equipment at the State Lab. The cash fund spending authority is requested from the Newborn Screening Genetic Counseling Cash Fund.

**RECOMMENDATION:** Staff recommendation is an ongoing increase of \$2.7 million total funds, with \$1,117,149 coming from the General Fund, \$1,367,900 from the Newborn Screening Fund, and \$173,951 from the Laboratory Cash Fund.

#### ANALYSIS:

##### STATE LABORATORY

The State Lab is housed within the Division of Disease Control and Public Health Response Division (DCPHR) and is responsible for state disease response through diagnostic testing of clinical, environmental, and chemical samples, as well as whole genome sequencing, wastewater surveillance, and more. The State Lab comprises the following programs: Newborn Screening, Microbiology, Genomic Surveillance, Environmental Chemistry, Evidential Breath Alcohol Testing, Laboratory

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Certification, Donor Conceived Persons, Marijuana Health Effects, and Cannabis and Natural Medicines Reference.

In recent years, the State Lab's operations have been increasing due to legislation, communicable disease outbreaks including COVID-19 and MPOX, and greater awareness of the State Lab's services to test for food and water safety. The Department states that significant legislation has been passed since 2021 that has directly impacted the workload and operations of the State Lab. This includes:

- Increases in hemp and natural medicine testing at the State Lab (S.B. 23-271 and S23-290);
- Water testing increases related to the expansion of the Water Quality Control Division within schools, child care centers, and mobile park homes (H.B. 17-1308, H.B. 22-1358, H.B. 23-1298, H.B. 23-1221, H.B. 23-1257); and
- Recent changes with Colorado's Board of Health Rule 6 CCR 1009-1 requiring the submission of foodborne illness samples for further characterization following a positive test in a clinical lab, thus increasing the submission of samples to the lab for *Mycobacterium tuberculosis* and carbapenemase-producing organisms.

The Department states the added responsibilities from these changes has resulted in an increase in the complexity and volume of samples received and tested, and the compounding effect has been an increase to the workload and required expenditures to effectively carry out these added duties. Using sample volume data that excludes COVID-19 testing, sample volume grew by 12.5 percent between 2019 and 2022. The sample volume of 2023 is expected to be 140.0 percent greater than 2022.

#### *BIOLOGICAL AND CHEMICAL WASTE DISPOSAL*

Biological and chemical waste is a natural byproduct of testing bacteria, viruses, cultured human and animal cells, parasites, and toxins. These byproducts need to be disposed of according to State and Federal regulations. The lab output has remained higher than in years prior to the pandemic. This increased output and rising costs due to inflation is what is causing the State Lab to seek additional resources to remove increased byproducts safely.

#### *COURIER NETWORK AND REQUIRED "INFECTIOUS SUBSTANCE" TRANSPORT*

The State Lab receives samples from across the state. The courier network includes 21 routes per day, spanning 2,550 miles, covering 43 counties, and utilizes 40 local drivers who are trained to transport infectious or hazardous substances. The courier network can accommodate a pickup anywhere within Colorado's 64 counties and 104,185 square miles. The network ensures that the State Lab receives newborn screening and other samples within the time allotment dictated by statute. Colorado has a centralized public health laboratory system in which highly specialized testing is performed at the centrally located State Public Health Laboratory. The State Lab is the only location providing specialized critical testing such as newborn screening and genomic sequencing for detection and tracing of outbreaks. The courier service allows local public health agencies across the state to access testing that is not otherwise available within their communities, and has had unreliable success of sample delivery when working with other delivery services like Fedex.

Samples sent to the State Lab can contain what is federally defined as an "Infectious Substance." Infectious substances are required to meet stringent packaging and handling requirements, as directed by 49 CFR Parts 171-180, which is best accomplished by a trained courier service. Samples sent incorrectly expose both the receiver and the sender to financial penalization of violations.

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The courier system has been functioning for over 10 years and was previously supported through the Laboratory Cash Fund, General Fund, and Newborn Screening Cash Fund. During the pandemic, the courier system was expanded and supported through General Fund, Newborn Screening Cash Fund, and federal funds through a funding split algorithm defined by sample volumes. The Department states that baseline courier costs can no longer be absorbed by the current Laboratory Cash Fund, General Fund, and Newborn Screening Cash Fund appropriations.

#### *IPASSPORT SOFTWARE AND PURPOSE*

All State Lab samples are processed through iPassport, which provides the safeguards and protection for the lab to manage equipment requirements, staff proficiencies, staff qualifications, certifications, and competencies. The State Lab is a regulated laboratory conducting testing under the federal Clinical Laboratory Improvement Act (CLIA'88), EPA and ISO17025 accreditation. These regulations require a high level of quality assessment of all equipment and staff qualifications. The iPassport regulatory compliance software tracks these requirements to maintain licensure, accreditation and compliance with regulations set forth by federal partners such as CDC, EPA, ISO and CLIA.

The laboratory currently has no dedicated funding source to cover the cost of this type of software. iPassport software was selected through a competitive bid process and has been used at the State Lab for eight years and has been integrated with all other lab processes and systems. The Department states that using any other software would have similar costs and would not be feasible at this time due to the level of data and integration that would need to be transferred.

#### *STATE'S ROLE IN SUPPLY DISTRIBUTION*

The State Lab relies on nearly 100 staff to complete the specialized work associated with gathering and handling infectious samples associated with foodborne illnesses, hospital associated infections, wastewater, STIs, HIV, tuberculosis, rabies, COVID-19, mpox, and much more. It is the Lab's responsibility to ensure that these professionals across Colorado are supplied with the necessary safety equipment to conduct their work appropriately, including laboratory coats, kits for well water testing, swabs for animal bite or scratch testing, bodily fluid testing for disease, and testing of all newborns for screening. Newborn screening tests are required by statute and the State has taken on the responsibility of distributing the appropriate supplies for testing to occur.

There has been an increase in demand for sample supplies across the state. Appropriate sample collection supplies help ensure that samples are collected and packaged properly for transport so that they arrive at the lab in acceptable condition for testing. The Department states that the State Lab currently does not have the financial ability to keep up with the demand without reallocating funding from other areas.

#### **REQUEST**

The Department requests \$1,291,100 General Fund for FY 2024-25 and ongoing, and \$1,367,900 Newborn Screening Genetic Counseling Cash Fund spending authority in FY 2024-25 and FY 2025-26 for State Lab operations including:

- Courier services that deliver samples to the State Lab from across Colorado (\$2,280,000);
- Distribution of supplies to healthcare providers \$240,000);
- Biological and chemical waste disposal (\$98,000); and
- iPassport software which manages standard operating procedures, regulations, safety requirements and equipment at the State Lab (\$29,000).



The Department states this funding request would continue the State’s ability to conduct public health surveillance, monitor environmental concerns, respond to public health threats, and connect patients to care.

#### RECOMMENDATION

Staff is recommending approval of the total amount of funding requested on an ongoing basis, \$2.7 million, however is recommending \$1.1 million come from the General Fund and \$1.5 million come from cash funds. The State Lab receives cash fund appropriations from the Laboratory Cash Fund and Newborn Screening Cash Fund. While staff agrees with the Department that neither cash fund could fully absorb the total requested amount, staff believes that any increased spending authority should partially come from these funds.

R5 RECOMMENDATION FUND SPLITS			
	CURRENT APPROPRIATION	REQUESTED INCREASED APPROPRIATION	RECOMMENDED INCREASED APPROPRIATION
Lab Cash Fund	\$258,677	\$0	\$173,951
Newborn Screening Fund	2,660,349	1,367,900	1,367,900
General Fund	412,224	1,291,100	1,117,149
<b>Total</b>	<b>\$3,331,250</b>	<b>\$2,659,000</b>	<b>\$2,659,000</b>

Staff’s recommended amounts include an increase from the Lab Cash Fund of \$173,851. This amount was calculated with the amounts the fund appears to be able to currently absorb, \$100,000, plus an 8.01 percent increase in revenue to the fund, assuming fees are increased to reflect last year’s CPI adjustment. This recommended appropriated amount from the Newborn Screening Fund is not changes, as the revenue from this fund can only cover increases in testing related to the fees. Staff would note though that the fund appears to require fee increases to stay solvent in the future, however the Department has stated it has no intent to increase fees to this fund.

If the Committee does not want to approve the funding for the State Lab in its entirety, staff would recommend the Committee consider funding the General Fund requested as a percentage investment in public health infrastructure, similar to R1.

#### ➔ R6 TUBERCULOSIS PROGRAM INFRASTRUCTURE

**REQUEST:** The Department requests a one-time increase of \$305,702 General Fund and 2.0 FTE in FY 2024-25 to support two tuberculosis (TB) nurse consultants to help Local Public Health Agencies manage the increase in TB cases and respond to complex or advanced TB presentations. The request would also cover translating forms and educational materials into additional languages, purchasing TB treatment drugs, and contracting to help TB nurses with case management.

**RECOMMENDATION:** Staff recommendation is a General Fund appropriation \$38,881 in FY 2024-25 and ongoing for translating forms and educational materials into additional languages, purchasing TB treatment drugs, and contracting to help TB nurses with case management.

**EVIDENCE LEVEL:** The Department indicated that this request item is theory-informed, which is defined as “a program or practice that reflects a moderate to low or promising level of confidence of effectiveness, ineffectiveness, or harmfulness as determined by tracking and evaluating performance measures including pre- and post-intervention evaluation of program outcomes, evaluation of

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program outputs, identification and implementation of a theory of change, or equivalent measures,” per Section 2-3-210 (3f), C.R.S.

Staff believes the evidence level is not applicable to this request as JBC staff are not designating FTE requests as relevant to the evidence-based policy making model. Staff also would note that the evidence provided by the Department does not support the proposed nurse consultants. The Department effectively highlights the increased costs to treat and prevent TB, and the need for increased resources, but not necessarily a temporary nurse consulting team.

*ANALYSIS:* The Department’s TB Program supports statewide TB prevention, treatment, and case management activities conducted by LPHAs for statewide control management. Current statute dictates that the Department and LPHAs cooperatively promote control and treatment of tuberculosis cases. The State program pays for all tuberculosis medication for patients with TB in Colorado. It also pays for tuberculosis infection medications for close contacts and others at elevated risk for progression to tuberculosis disease. Additionally, it provides support to LPHAs who do not have the capacity for case investigation or observed medical therapy.

The Department provides funding to LPHAs for tuberculosis treatment and control, and considers the number of active, suspected, and latent tuberculosis cases undergoing therapy in each agency's jurisdiction when determining funding levels. LPHAs have reported a cut in their tax base or other factors limiting their ability to investigate exposure, engage in contact tracing, and manage cases through the 6-12 months of the daily care regimen. The Department states that these constraints have created a gap in the State’s ability to respond to, investigate, treat, and manage TB cases in Colorado.

## **FUNDING**

Colorado’s Tuberculosis Program receives \$1.6 million General Fund alongside granted federal funds. The federal CDC funding is determined based on a rolling 5-year average of verified cases of tuberculosis disease plus how the state fulfills several performance-based metrics in the CDC funding formula. Federal funding is not expected to increase significantly in the future. In the calendar year 2024, Colorado will receive \$570,638 in federal funding, an increase of \$20,600 from 2023.

The Public Health Institute at Denver Health (PHIDH) is currently responsible for all services across the seven metro counties (Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, and Jefferson). LPHAs in the metro region pay PHIDH for their TB services, and funding is distributed to LPHAs based on surveillance data reflecting TB burden. Denver Health and Northeast Colorado receive a total of \$102,000 of CDPHE’s appropriated federal funds while all other LPHAs receive a portion of CDPHE’s General Fund. In FY 2022-23, the Department provided funding directly to twelve LPHAs, including one regional collaborative in the San Luis Valley with higher TB disease case burdens. The Department anticipates funding thirteen LPHAs, including the San Luis Valley regional collaborative in FY 2023-24. The funding supports case management and prevention activities. CDPHE also reserves funding and resources to support unfunded LPHAs and Tribal Nations when TB disease cases occur in their jurisdictions.

## **COLORADO TUBERCULOSIS CASES**

TB case rates in Colorado in 2023 are higher than in past years, with 89 cases reported to date in 2023, compared to 57 in 2022. Tuberculosis can spread among people residing in congregate settings such as shelters, correctional settings, residential healthcare settings, and schools, and requires a coordinated response from both local and state governments to effectively control. The table on the next page

details county cases in Colorado from 2014 through 2023, showing a concentrated increase in 2023 in the Denver metro counties.

COLORADO TB CASES BY COUNTY AND YEAR*										
COUNTY	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
<b>Total</b>	<b>64</b>	<b>73</b>	<b>64</b>	<b>84</b>	<b>64</b>	<b>66</b>	<b>52</b>	<b>58</b>	<b>57</b>	<b>89</b>
Denver	23	17	22	25	14	19	11	18	12	35
Arapahoe	14	14	18	19	10	18	9	9	9	14
Adams	7	7	4	6	12	9	7	10	6	13
El Paso	1	3	3	10	5	4	8	4	3	5
Weld	3	1	1	4	3	1	3	1	7	5
Jefferson	4	3	3	3	2	4	4	4	2	4
Douglas	1	8	1	0	3	2	0	3	3	3
Garfield	1	2	2	1	0	1	1	1	1	2
Eagle	1	1	0	0	0	0	1	1	0	1
Fremont	0	0	0	1	1	0	0	0	0	1
Larimer	1	2	4	1	1	1	2	1	2	1
Mesa	0	1	1	0	4	0	1	0	1	1
Moffat	0	0	0	0	0	0	0	0	0	1
Montezuma	0	0	0	0	0	2	0	0	1	1
Pueblo	2	3	2	3	2	1	1	1	1	1
Teller	0	1	0	0	0	0	0	0	0	1

\*Only counties reporting at least one case in 2023 are listed

In 2023, the CDPHE TB Program and the TB Clinic at PHIDH, held three meetings with the Denver metro LPHAs to discuss TB investigation and response duties. The Department states that a recurring theme at these meetings was the limited funding available to support TB work at the county level, funding not keeping pace with the cost of the work, and turnover in staff knowledgeable about TB. In late 2023, the CDPHE TB Program conducted an environmental scan to assess strengths and opportunities around TB response statewide. Among the 45 LPHA respondents, 57.8 percent responded that they do not have the funds or resources necessary to respond to the increase in TB activity that is occurring and 35.6 percent were unsure if they had the funds and resources necessary to respond.

## COSTS OF TREATING AND PREVENTING TUBERCULOSIS

The Department states that current resources and funding do not cover the full costs of TB case management and prevention across the state, and LPHAs are having to tap into local funds to make up the difference or defer work back to CDPHE. The Department states that while General Fund for the TB program has remained constant over the last twenty years, the costs of trained staff, TB medications, TB diagnostics, and other aspects of TB case management have increased significantly. A comparison of TB medication costs between 2018 and 2023 shows that a number of common TB treatments have increased substantially, from anywhere between 28.7 to 148.6 percent dependent on the medication.

TB case management activities conducted by public health agencies and individuals can span from six to twelve months for any case given the long duration of treatment needed to eliminate the bacteria. Treatment typically involves the patient taking daily antibiotics, which must be observed, either in-person or remotely, to ensure compliance. Some TB disease cases are more complicated and require more in-depth and protracted public health interventions, such as individuals who are infected with multidrug resistant (MDR) or extremely drug resistant (XDR) strains of the TB bacteria. The CDC analysis on the next page shows the costs associated with different types of TB disease case including hospitalization and outpatient costs in the direct treatment cost.

CDC COST PER PATIENT ESTIMATES IN 2020 U.S. DOLLARS			
COST /CASE	NON-MDR TB	MDR TB2	XDR TB2
Direct Treatment Costs	\$20,211	\$182,186	\$567,708

TB disproportionately affects individuals who have immigrated from areas of the world with high rates of TB, are experiencing homelessness, have conditions that weaken the immune system, and substance use disorders. TB cases can cause large scale, protracted contact investigations with cases detected in congregate settings. The Department states that it is important that public health agencies are funded at levels to maintain TB response expertise and ensure access to appropriate medications, testing supplies, and case supports, like housing for infectious cases that are experiencing homelessness, to prevent additional cases and large outbreaks. This extended involvement with case management, increasingly expensive treatment, and potential case support costs like housing mean that even a single case can end up being very expensive to treat.

### REQUEST

The Department requests one-time funding for 2.0 term-limited FTE nurse consultants, epidemiologists, or trained tuberculosis clinicians to manage the influx of LPHAs needing consultation services, provide clinical support managing confirmed tuberculosis patients, support large tuberculosis contact investigations, or working-up presumptive tuberculosis patients. It states that this would alleviate a burden for LPHAs to hire additional staff or expend resources not originally allocated for tuberculosis response. The Department believes this support would also provide an opportunity to train LPHA staff on tuberculosis response activities, and believe this to be a more effective response than distributing small amounts of money across the LPHAs. The Department's expectation is that LPHAs will be able to take on more of the burden of TB management and treatment if their staff has been trained on these skills.

The Department is also requesting funding to provide forms and educational materials that are translated into Arabic, Spanish, Nepali, Somali, and Dari in lieu of LPHAs incurring this expense and to expand access to care for underserved populations. Finally, the Department is requesting additional funding to purchase necessary tuberculosis medication that can be distributed to LPHAs as needed.

### RECOMMENDATION

After working with the Department through this request, staff remains confused on a number of aspects of the request including:

- How can nurse consultants alone respond to increased cases of TB alongside increasing costs of treatment and case management, with only an additional \$40,000 in funding requested alongside the 2.0 FTE?
- The Department has made a case for the need for increased funding and resources to treat and manage TB both for the State and LPHAs on an ongoing basis, given this, why is the Department requesting one-time funding?
- Why is there no plan to increase response funding to the LPHA's or increase funding to support medication which can be distributed to the LPHAs in this request?

Given staff's questions and concerns about the proposal, staff is only recommending a General Fund appropriation \$38,881 in FY 2024-25 and ongoing for translating forms and educational materials into additional languages, purchasing TB treatment drugs, and contracting to help TB nurses with case management. Staff also recommends the Committee request a comeback from the Department in

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order to clarify the above questions and determine whether additional funding is warranted to distribute medications or other resources to LPHAs alongside the consulting positions.

As an alternative option, the Committee could approve the requested \$305,702 General Fund but only in the operating expenses line item to support the Department and LPHA's in TB management and treatment. This would not require the Department to put forth another proposal this year, but would not give the Committee answers to the above questions, and would be up to the Committee to decide if this funding should be one-time or ongoing.

### ➔ BA2 EVIDENTIAL BREATH ALCOHOL TESTING (EBAT) DATABASE FUNDING

*REQUEST:* The Department requests an increase of \$169,800 cash fund spending authority from the Law Enforcement Assistance Fund (LEAF) in FY 2024-25, annualizing to \$25,800 in FY 2025-26 and ongoing for the Evidential Breath Alcohol Testing (EBAT) Program's operation

*RECOMMENDATION:* **Staff recommends approval of the request.**

#### *ANALYSIS:*

#### **EVIDENTIAL BREATH ALCOHOL TESTING (EBAT)**

The EBAT program is housed in the State Public Health Laboratory within the Disease Control and Public Health Response Division. The program repairs, calibrates, and certifies the instrumentation used to collect breath samples of evidentiary quality from individuals suspected of driving under the influence of alcohol. These instruments, which are named Intoxilyzer 9000 (I-9000), are used by law enforcement statewide. The EBAT program also trains and certifies law enforcement officers who perform these tests using the I-9000. The Department states the EBAT Program has established rigorous scientific standards of performance that every Intoxilyzer 9000 used for evidential breath alcohol testing must meet prior to being certified by the department and placed into service. The testing performed on the instruments prior to certification ensures that the results reported by the instruments are accurate, precise, and fair.

In fiscal years 2021 and 2022, 6,488 breath alcohol tests were performed in suspected driving under the influence or driving while intoxicated incidents. The reliability of these tests depends on the Department's maintenance of these devices and the data collection process associated with this type of forensic testing. The 6,488 breath tests resulted in approximately 4,500 administrative filings with the Colorado Department of Revenue's Division of Motor Vehicles and 5,500 criminal filings in the state's courts.

#### **CURRENT DATABASE**

Per Section 42-4-1301(6)(c)(III) C.R.S., the Department maintains a database of breath test sample results. The Department states the current database was developed in-house in 2015, and has become outdated and difficult to maintain. That database was also funded through LEAF. The data platform to access blood alcohol data is not supported by OIT, and the staff that built it are no longer with the Department, leaving the program with no understanding of the data architecture. The Department states the aging, unsupported system is a security risk to sensitive data and makes it unfeasible to build or validate data queries.

EBAT is funded by the Law Enforcement Assistance Fund (LEAF) which is used for the prevention of drunken driving and enforcement of laws pertaining to driving under the influence of alcohol or

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drugs. Per Section 43-4-402(2) C.R.S, CDPHE receives a direct allocation of LEAF “in an amount sufficient to pay for the costs of evidential breath alcohol testing.” The Department of Public Safety (DPS), Colorado Department of Transportation (CDOT), and Colorado Department of Human Services (CDHS) also receive allocations out of LEAF. CDPHE and DPS are primary recipients while CDOT and CDHS receive secondary allocations based on remaining balance in the fund. LEAF has out-year ending fund balance projections of \$1.1 million, so staff believes these costs to be absorbable by the fund.

### REQUEST

The Department requests a one-time appropriation of \$169,800 in cash fund spending authority from LEAF in FY 2024-25 annualizing to \$25,800 in FY 2025-26 and ongoing to develop and maintain a new vendor-supported and cloud-hosted breath test sample results database. The Department states the system will ensure up-to-date security and accessibility standards are maintained, connectivity state-wide to Intoxilyzer instruments used by law enforcement in the field and improved access to data for records requests used in judicial proceedings. The Department has concerns about continuing to manage data with integrity with the current aging system that it is unable to support internally. It states the new database would be able to keep up with security updates and ongoing vendor support would ensure compliance with changing security measures. Staff is recommending approval of the request.

### → BA6 OEPR (M) NOTE

*REQUEST:* The Department requests permission to remove the existing (M) note on the General Fund appropriation to the Emergency Preparedness and Response Program line item within the Division of Diseases Control and Public Health Response, and replace it with a footnote detailing the match rate for the grant program.

*RECOMMENDATION:* **Staff recommends approval of the request.** Staff recommends replacing the (M) note with a footnote on the line item, indicating the match rate and requiring the Department to notify the Joint Budget Committee by November 1<sup>st</sup> of each fiscal year if there is a change to the match rate. Staff has included a true-up of federal funds in the recommendation for FY 2023-24 and FY 2024-25. Staff is also recommending adding an RFI for the Department to update the Committee on the federal funds awarded through the grant.

### *ANALYSIS:*

#### **(M) NOTES**

According to the headnotes of the Long Bill, where an (M) note occurs next to a General Fund appropriation it indicates that the appropriation is used to support a federally supported program and is the maximum amount of General Fund that may be expended in that program. If the federal funding for that program increases, the (M) noted General Fund is decreased by the increased amount. If the federal funding decreases, the (M) noted General Fund is decreased proportionally. The (M) notes are utilized in scenarios where a match is uncertain and the General Assembly wants to appropriate funding only if the federal match comes through.

### **EMERGENCY PREPAREDNESS AND RESPONSE PROGRAM**

The Department currently receives General Fund to support the following programs which receive federal funding and requires a 10.0 percent state funding match. The line item is currently appropriated a total of \$1.5 million General Fund. The federal grant programs include:

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- Public Health Emergency and Preparedness (PHEP) - Approx. \$10.6M to prepare public health systems for emergencies;
  - Cities Readiness Initiative (CRI) - Approx. \$1.2M to enhance major city emergency preparedness
  - Hospital Preparedness Program (HPP) - Approx. \$3.5M for health care planning for large scale emergencies

Localities are receiving and spending these federal grant moneys, however, because the federal funds are expendable over two years and expenditure deadlines are based on the federal fiscal year, the General Funds are being spent first in order to align with the state fiscal year. At the end of the state fiscal year, there is federal funding that remains unspent. The Controller's interpretation of the (M) note on this line, is that if the localities want to spend this federal funding across state fiscal years, this must be reflected in the Long Bill. If federal funding is added to this line item with an (M) note on the General Fund, it would then decrease the General Fund in future years, which would consequently decrease the federal funding received.

From JBC staff's perspective, as long as the appropriations reflect the match rate in the state fiscal year, the year in which the federal funds are expended is irrelevant, particularly because these funds are informational in the Long Bill and expenditure authority comes from the federal government. The Controller's current interpretation would prohibit local governments from spending federal emergency grant funds beyond the state fiscal year they are received in.

The Department states that currently, \$3.6 million in federal funds remain from state fiscal year 2022-23, that can still be spent by localities within the two year federal grant spending period. Based upon the Controller's interpretation of the (M) note, the federal fund appropriation in the Long Bill would need to be increased by this amount in FY 2023-24 and ongoing, which would require General Fund decrease of 10.0 percent or \$360,000. The Department states, and staff agrees, that this would penalize localities when they appear to be complying with state and federal expenditure deadlines and requirements. Staff believes it would be more appropriate to indicate the match rate through a footnote on the line as well as detail that the federal funds may be spent over the granted period rather than based on the state fiscal year. Staff is also recommending an RFI on the federal funding received.

## LINE ITEM DETAIL - DISEASE CONTROL AND PUBLIC HEALTH RESPONSE

### (A) ADMINISTRATION

#### ADMINISTRATION AND SUPPORT

This line item funds the personal and operating costs of the proposed new division.

*STATUTORY AUTHORITY:* Section 25-1-122, C.R.S.

*REQUEST:* The Department requests an appropriation of \$12,653,605 total funds, including \$9,835,725 General Fund, and 143.6 FTE

*RECOMMENDATION:* **Staff recommendation is detailed below.**

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, ADMINISTRATION, ADMINISTRATION AND SUPPORT						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$15,334,650	\$1,562,137	\$11,609,081	\$29,437	\$2,133,995	180.0
Other legislation	787,821	787,821	0	0	0	1.9
HB 24-1196 (CDPHE Supplemental)	927,790	0	927,790	0	0	0.0
<b>TOTAL</b>	<b>\$17,050,261</b>	<b>\$2,349,958</b>	<b>\$12,536,871</b>	<b>\$29,437</b>	<b>\$2,133,995</b>	<b>181.9</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$17,050,261	\$2,349,958	\$12,536,871	\$29,437	\$2,133,995	181.9
R1 Public health infrastructure	7,514,300	7,514,300	0	0	0	83.0
Annualize prior year budget actions	338,927	203,411	134,887	629	0	0.0
Annualize prior year legislation	(12,249,883)	(231,944)	(12,017,939)	0	0	(121.3)
<b>TOTAL</b>	<b>\$12,653,605</b>	<b>\$9,835,725</b>	<b>\$653,819</b>	<b>\$30,066</b>	<b>\$2,133,995</b>	<b>143.6</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$4,396,656)</b>	<b>\$7,485,767</b>	<b>(\$11,883,052)</b>	<b>\$629</b>	<b>\$0</b>	<b>(38.3)</b>
Percentage Change	(25.8%)	318.5%	(94.8%)	2.1%	0.0%	(21.1%)
FY 2024-25 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## INDIRECT COST ASSESSMENT

Collection of funding to pay for centralized department functions.

*STATUTORY AUTHORITY:* Section 24-75-1401, C.R.S.

*REQUEST:* The Department requests a continuation appropriation of \$7,035,138 total funds including \$1,773,231 cash funds, \$46,243 reappropriated funds, and \$5,215,664 federal funds which represents a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

## (B) GENERAL DISEASE CONTROL AND SURVEILLANCE

### IMMUNIZATION PERSONAL SERVICES

This line item funds the personnel expenses of the Immunization Program.

*STATUTORY AUTHORITY:* Sections 25-4-901 through 909, and 25-4-1701 through 1711, C.R.S.

*REQUEST:* The Department requests an appropriation of \$4,391,844 total funds, including \$1,605,844 General Fund, and 25.4 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, GENERAL DISEASE CONTROL AND SURVEILLANCE, IMMUNIZATION PERSONAL SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						



DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, GENERAL DISEASE CONTROL AND SURVEILLANCE, IMMUNIZATION PERSONAL SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
SB 23-214 (Long Bill)	\$4,206,833	\$1,420,833	\$0	\$0	\$2,786,000	25.4
<b>TOTAL</b>	<b>\$4,206,833</b>	<b>\$1,420,833</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,786,000</b>	<b>25.4</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$4,206,833	\$1,420,833	\$0	\$0	\$2,786,000	25.4
Annualize prior year budget actions	185,011	185,011	0	0	0	0.0
<b>TOTAL</b>	<b>\$4,391,844</b>	<b>\$1,605,844</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,786,000</b>	<b>25.4</b>
<b>INCREASE / (DECREASE)</b>	<b>\$185,011</b>	<b>\$185,011</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	4.4%	13.0%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$4,391,844</b>	<b>\$1,605,844</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,786,000</b>	<b>25.4</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### IMMUNIZATION OPERATING EXPENSES

This line item funds the operating expenses of the Immunization Program.

*STATUTORY AUTHORITY:* Sections 24-22-117 (1) (l) (b), 25-4-901 through 909, and 25-4-1701 through 1711, C.R.S.

*REQUEST:* The Department requests an appropriation of \$55,248,436 total funds, including \$4,099,360 General Fund.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, GENERAL DISEASE CONTROL AND SURVEILLANCE, IMMUNIZATION OPERATING EXPENSES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$55,744,777	\$4,901,025	\$2,793,752	\$0	\$48,050,000	0.0
<b>TOTAL</b>	<b>\$55,744,777</b>	<b>\$4,901,025</b>	<b>\$2,793,752</b>	<b>\$0</b>	<b>\$48,050,000</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$55,744,777	\$4,901,025	\$2,793,752	\$0	\$48,050,000	0.0
Annualize prior year budget actions	(496,341)	(496,341)	0	0	0	0.0
<b>TOTAL</b>	<b>\$55,248,436</b>	<b>\$4,404,684</b>	<b>\$2,793,752</b>	<b>\$0</b>	<b>\$48,050,000</b>	<b>0.0</b>
<b>INCREASE / (DECREASE)</b>	<b>(\$496,341)</b>	<b>(\$496,341)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(0.9%)	(10.1%)	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$55,248,436</b>	<b>\$4,404,684</b>	<b>\$2,793,752</b>	<b>\$0</b>	<b>\$48,050,000</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## APPROPRIATION FROM THE TOBACCO TAX FUND TO THE GENERAL FUND

Pursuant to 24-22-117 (1)(c), C.R.S., 0.3 percent of the Amendment 35 revenue deposited into the Tobacco Tax Cash Fund must be appropriated to the General Fund, and then reappropriated for health-related purposes. This 0.3 percent must go into the exempt account of the General Fund because it derives from a voter-approved tax increase thus making these dollars exempt from TABOR. The exempt status is derived from Amendment 35 and not from Referendum C. This is the only part of Amendment 35 revenue that is appropriated to the General Fund, because it is required by the language of Amendment 35.

*STATUTORY AUTHORITY:* Section 24-22-117 (1) (a), C.R.S.

*REQUEST:* The Department requests an appropriation of \$322,323 cash funds.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, GENERAL DISEASE CONTROL AND SURVEILLANCE, APPROP. FROM THE TOBACCO TAX CASH FUND TO THE GENERAL FUND						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$322,323	\$0	\$322,323	\$0	\$0	0.0
<b>TOTAL</b>	<b>\$322,323</b>	<b>\$0</b>	<b>\$322,323</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$322,323	\$0	\$322,323	\$0	\$0	0.0
MSA, A35, Prop EE tobacco adjustments	(51,380)	0	(51,380)	0	0	0.0
<b>TOTAL</b>	<b>\$270,943</b>	<b>\$0</b>	<b>\$270,943</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$51,380)</b>	<b>\$0</b>	<b>(\$51,380)</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(15.9%)	0.0%	(15.9%)	0.0%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	\$51,380	\$0	\$51,380	\$0	\$0	0.0

## FEDERAL GRANTS

This line item reflects various federal grants received by the Division for a variety of disease control programs and activities.

*STATUTORY AUTHORITY:* Section 25-1.5-101 (1) (m), C.R.S.

*REQUEST:* The Department requests an appropriation of \$1,124,587 federal funds and 9.2 FTE.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, GENERAL DISEASE CONTROL AND SURVEILLANCE, FEDERAL GRANTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$1,333,092	\$0	\$0	\$0	\$1,333,092	9.2

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, GENERAL DISEASE CONTROL AND SURVEILLANCE, FEDERAL GRANTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>TOTAL</b>	<b>\$1,333,092</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,333,092</b>	<b>9.2</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,333,092	\$0	\$0	\$0	\$1,333,092	9.2
R10 Office of health equity tribal relations	(208,505)	0	0	0	(208,505)	0.0
<b>TOTAL</b>	<b>\$1,124,587</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,124,587</b>	<b>9.2</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$208,505)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>(\$208,505)</b>	<b>0.0</b>
Percentage Change	(15.6%)	0.0%	0.0%	0.0%	(15.6%)	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$1,124,587</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,124,587</b>	<b>9.2</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### TUBERCULOSIS CONTROL AND TREATMENT PERSONAL SERVICES

The Department is required to administer 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.

*STATUTORY AUTHORITY:* Section 25-4-501 through 513, C.R.S.

*REQUEST:* The Department requests \$1,165,147 total funds, including \$385,747 General Fund and 15.1 FTE.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, GENERAL DISEASE CONTROL AND SURVEILLANCE, TUBERCULOSIS CONTROL AND TREATMENT, PERSONAL SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$923,933	\$144,533	\$0	\$0	\$779,400	13.1
<b>TOTAL</b>	<b>\$923,933</b>	<b>\$144,533</b>	<b>\$0</b>	<b>\$0</b>	<b>\$779,400</b>	<b>13.1</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$923,933	\$144,533	\$0	\$0	\$779,400	13.1
Annualize prior year budget actions	18,820	18,820	0	0	0	0.0
R6 Tuberculosis program infrastructure	0	0	0	0	0	0.0
<b>TOTAL</b>	<b>\$942,753</b>	<b>\$163,353</b>	<b>\$0</b>	<b>\$0</b>	<b>\$779,400</b>	<b>13.1</b>
<b>INCREASE/(DECREASE)</b>	<b>\$18,820</b>	<b>\$18,820</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	2.0%	13.0%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$1,165,147</b>	<b>\$385,747</b>	<b>\$0</b>	<b>\$0</b>	<b>\$779,400</b>	<b>15.1</b>
Request Above/(Below) Recommendation	\$222,394	\$222,394	\$0	\$0	\$0	2.0

## TUBERCULOSIS CONTROL AND TREATMENT OPERATING EXPENSES

This line item funds the operating expenses associated with the tuberculosis control and treatment activities of the Division.

*STATUTORY AUTHORITY:* Section 25-4-501 through 513, C.R.S.

*REQUEST:* The Department request \$1,540,812 total funds, including \$1,229,112 General Fund.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, GENERAL DISEASE CONTROL AND SURVEILLANCE, TUBERCULOSIS CONTROL AND TREATMENT, OPERATING EXPENSES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$1,500,461	\$1,188,761	\$0	\$0	\$311,700	0.0
<b>TOTAL</b>	<b>\$1,500,461</b>	<b>\$1,188,761</b>	<b>\$0</b>	<b>\$0</b>	<b>\$311,700</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,500,461	\$1,188,761	\$0	\$0	\$311,700	0.0
R6 Tuberculosis program infrastructure	38,881	38,881	0	0	0	0.0
<b>TOTAL</b>	<b>\$1,539,342</b>	<b>\$1,227,642</b>	<b>\$0</b>	<b>\$0</b>	<b>\$311,700</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>\$38,881</b>	<b>\$38,881</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	2.6%	3.3%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$1,540,812</b>	<b>\$1,229,112</b>	<b>\$0</b>	<b>\$0</b>	<b>\$311,700</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$1,470	\$1,470	\$0	\$0	\$0	0.0

## MARIJUANA HEALTH EFFECTS MONITORING

This line item was created by S.B. 13-283 (Implement Amendment 64 Consensus Recommendations) to provide funding for research on the health impacts of marijuana use, the analysis of data related to marijuana use, and communicate research and analysis results with stakeholders. This line item is funded by Marijuana Tax Cash Fund dollars since FY 2015-16 (prior to FY 2015-16 the funding was from the Marijuana Cash Fund, which was repealed and replaced with the Marijuana Tax Cash Fund).

*STATUTORY AUTHORITY:* Section 25-1.5-110, C.R.S.

*REQUEST:* The Department requests an appropriation of \$375,426 cash funds from the Marijuana Tax Cash Fund and 4.0 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, GENERAL DISEASE CONTROL AND SURVEILLANCE, MARIJUANA HEALTH EFFECTS MONITORING						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$371,114	\$0	\$371,114	\$0	\$0	4.0
<b>TOTAL</b>	<b>\$371,114</b>	<b>\$0</b>	<b>\$371,114</b>	<b>\$0</b>	<b>\$0</b>	<b>4.0</b>

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, GENERAL DISEASE CONTROL AND SURVEILLANCE, MARIJUANA HEALTH EFFECTS MONITORING						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$371,114	\$0	\$371,114	\$0	\$0	4.0
Annualize prior year budget actions	4,312	0	4,312	0	0	0.0
<b>TOTAL</b>	<b>\$375,426</b>	<b>\$0</b>	<b>\$375,426</b>	<b>\$0</b>	<b>\$0</b>	<b>4.0</b>
<b>INCREASE/(DECREASE)</b>	<b>\$4,312</b>	<b>\$0</b>	<b>\$4,312</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	1.2%	0.0%	1.2%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$375,426</b>	<b>\$0</b>	<b>\$375,426</b>	<b>\$0</b>	<b>\$0</b>	<b>4.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### (C) LABORATORY SERVICES

#### CHEMISTRY AND MICROBIOLOGY PERSONAL SERVICES

The Chemistry and Microbiology Section of the Laboratory conducts tests and analysis for a variety of state programs, including the Water Quality Control Division and the Colorado State Patrol, as well as private, non-state clients. This section of the lab analyzes blood, urine, and bodily fluid specimens, performs water and environmental testing, and analysis for disease outbreaks and newborn screenings. This line item funds the personnel expenses of this section of the State Lab.

*STATUTORY AUTHORITY:* Sections 17-2-201 (5.5) (c) (III), 25-4-802, 25-4-1001, C.R.S.

*REQUEST:* The Department requests an appropriation of \$6,005,927 total funds, including \$733,871 General Fund, and 54.1 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, LABORATORY SERVICES, CHEMISTRY AND MICROBIOLOGY PERSONAL SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$5,884,218	\$649,321	\$2,900,092	\$162,143	\$2,172,662	54.1
<b>TOTAL</b>	<b>\$5,884,218</b>	<b>\$649,321</b>	<b>\$2,900,092</b>	<b>\$162,143</b>	<b>\$2,172,662</b>	<b>54.1</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$5,884,218	\$649,321	\$2,900,092	\$162,143	\$2,172,662	54.1
Annualize prior year budget actions	121,709	84,550	33,696	3,463	0	0.0
<b>TOTAL</b>	<b>\$6,005,927</b>	<b>\$733,871</b>	<b>\$2,933,788</b>	<b>\$165,606</b>	<b>\$2,172,662</b>	<b>54.1</b>
<b>INCREASE/(DECREASE)</b>	<b>\$121,709</b>	<b>\$84,550</b>	<b>\$33,696</b>	<b>\$3,463</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	2.1%	13.0%	1.2%	2.1%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$6,005,927</b>	<b>\$733,871</b>	<b>\$2,933,788</b>	<b>\$165,606</b>	<b>\$2,172,662</b>	<b>54.1</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

#### CHEMISTRY AND MICROBIOLOGY OPERATING EXPENSES

This line item funds the operating expenses of the Chemistry and Microbiology Section.

*STATUTORY AUTHORITY:* Sections 17-2-201 (5.5) (c) (III), 25-4-802, 25-4-1001, C.R.S.

*REQUEST:* The Department requests an appropriation of \$7,840,202 total funds, including \$1,703,324 General Fund.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, LABORATORY SERVICES, CHEMISTRY AND MICROBIOLOGY OPERATING EXPENSES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$5,181,202	\$412,224	\$3,724,602	\$179,676	\$864,700	0.0
<b>TOTAL</b>	<b>\$5,181,202</b>	<b>\$412,224</b>	<b>\$3,724,602</b>	<b>\$179,676</b>	<b>\$864,700</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$5,181,202	\$412,224	\$3,724,602	\$179,676	\$864,700	0.0
R5 State lab operating	3,602,198	1,117,149	2,485,049	0	0	0.0
<b>TOTAL</b>	<b>\$8,783,400</b>	<b>\$1,529,373</b>	<b>\$6,209,651</b>	<b>\$179,676</b>	<b>\$864,700</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>\$3,602,198</b>	<b>\$1,117,149</b>	<b>\$2,485,049</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	69.5%	271.0%	66.7%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$7,840,202</b>	<b>\$1,703,324</b>	<b>\$5,092,502</b>	<b>\$179,676</b>	<b>\$864,700</b>	<b>0.0</b>
Request Above/(Below) Recommendation	(\$943,198)	\$173,951	(\$1,117,149)	\$0	\$0	0.0

## CERTIFICATION

The Certification Section inspects and certifies private medical laboratories, environmental laboratories, including water testing labs, on-site dairy laboratories, and alcohol and drug toxicology testing laboratories. This section is also responsible for certification of the breath alcohol-testing devices used by state and local law enforcement.

*STATUTORY AUTHORITY:* Sections 18-3-106 and 205, 25-4-202, 25-11-101, 25-60-2201, 42-4-1301 and 1303, and 41-2-102, C.R.S.

*REQUEST:* The Department requests an appropriation of \$2,518,799 total funds including \$57,999 General Funds and 22.3 FTE.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, LABORATORY SERVICES, CERTIFICATION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$2,315,802	\$51,317	\$1,827,484	\$247,301	\$189,700	22.3
<b>TOTAL</b>	<b>\$2,315,802</b>	<b>\$51,317</b>	<b>\$1,827,484</b>	<b>\$247,301</b>	<b>\$189,700</b>	<b>22.3</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$2,315,802	\$51,317	\$1,827,484	\$247,301	\$189,700	22.3
BA2 EBAT database funding	169,800	0	169,800	0	0	0.0

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, LABORATORY SERVICES, CERTIFICATION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
Annualize prior year budget actions	33,197	6,682	21,234	5,281	0	0.0
<b>TOTAL</b>	<b>\$2,518,799</b>	<b>\$57,999</b>	<b>\$2,018,518</b>	<b>\$252,582</b>	<b>\$189,700</b>	<b>22.3</b>
<b>INCREASE/(DECREASE)</b>	<b>\$202,997</b>	<b>\$6,682</b>	<b>\$191,034</b>	<b>\$5,281</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	8.8%	13.0%	10.5%	2.1%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$2,518,799</b>	<b>\$57,999</b>	<b>\$2,018,518</b>	<b>\$252,582</b>	<b>\$189,700</b>	<b>22.3</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### REGULATORY OVERSIGHT PROGRAM

As created in S.B. 22-224 (Protections for Donor-conceived Persons and Families), this line item includes funding for new rules and regulations concerning donor-conceived persons. The State Board of Health and CDPHE are responsible for licensing gamete banks and fertility clinics and ensuring these facilities are in compliance with state regulations and prioritizing the best interests of donor conceived persons and their families.

*STATUTORY AUTHORITY:* Sections 25-57-104, C.R.S.

*REQUEST:* The Department requests an appropriation of \$293,320 General Fund and 4.0 FTE which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

### NATURAL MEDICINE PROGRAM

The line item includes funding for establishing natural medicine testing standards as well as associated operating costs for the state laboratory established by S.B. 23-290 (Natural Medicine Regulation and Legalization).

*STATUTORY AUTHORITY:* Section 25-1.5-120, C.R.S.

*REQUEST:* The Department requests an appropriation of \$844,052 General Fund and 4.9 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, LABORATORY SERVICES, NATURAL MEDICINE PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 APPROPRIATION</b>						
Other legislation	\$838,402	\$838,402	\$0	\$0	\$0	4.1
<b>TOTAL</b>	<b>\$838,402</b>	<b>\$838,402</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>4.1</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$838,402	\$838,402	\$0	\$0	\$0	4.1
Annualize prior year legislation	5,650	5,650	0	0	0	0.8
<b>TOTAL</b>	<b>\$844,052</b>	<b>\$844,052</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>4.9</b>
<b>INCREASE/(DECREASE)</b>	<b>\$5,650</b>	<b>\$5,650</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.8</b>

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, LABORATORY SERVICES, NATURAL MEDICINE PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
Percentage Change	0.7%	0.7%	0.0%	0.0%	0.0%	19.5%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$844,052</b>	<b>\$844,052</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>4.9</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## (D) OFFICE OF EMERGENCY PREPAREDNESS AND RESPONSE

### EMERGENCY PREPAREDNESS AND RESPONSE PROGRAM

This line item funds the personnel and operating expenses of the Division.

*STATUTORY AUTHORITY:* Section 25-7-104 through 110.5, C.R.S.

*REQUEST:* The Department requests an appropriation of \$14,924,408 total funds, including \$1,681,202 is General Fund and 21.1 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, OFFICE OF EMERGENCY PREPAREDNESS AND RESPONSE, EMERGENCY PREPAREDNESS AND RESPONSE PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 APPROPRIATION</b>						
SB 23-214 (Long Bill)	\$14,730,715	\$1,487,509	\$0	\$0	\$13,243,206	21.1
<b>TOTAL</b>	<b>\$14,730,715</b>	<b>\$1,487,509</b>	<b>\$0</b>	<b>\$0</b>	<b>\$13,243,206</b>	<b>21.1</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$14,730,715	\$1,487,509	\$0	\$0	\$13,243,206	21.1
Annualize prior year budget actions	193,693	193,693	0	0	0	0.0
<b>TOTAL</b>	<b>\$14,924,408</b>	<b>\$1,681,202</b>	<b>\$0</b>	<b>\$0</b>	<b>\$13,243,206</b>	<b>21.1</b>
<b>INCREASE/(DECREASE)</b>	<b>\$193,693</b>	<b>\$193,693</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	1.3%	13.0%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$14,924,408</b>	<b>\$1,681,202</b>	<b>\$0</b>	<b>\$0</b>	<b>\$13,243,206</b>	<b>21.1</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### STATE DIRECTED EMERGENCY PREPAREDNESS AND RESPONSE ACTIVITIES

This line item was created in FY 2015-16 and funds division activities not tied to the federal funds that are required either by State Board of Health rules or statute. These activities include staffing the Governor's Expert Emergency Epidemic Response Committee, running the Department's emergency operations center during emergencies, overseeing agreements between local municipalities which enable the sharing of equipment and materials in the event of emergencies (these MOUs are not required by the federal government), and regulating the cache of certain antibiotics within the State.

*STATUTORY AUTHORITY:* Sections 25-7-104 through 110.5, C.R.S.

*REQUEST:* The Department requests an appropriation of \$2,438,662 General Fund and 18.4 FTE.



*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE, OFFICE OF EMERGENCY PREPAREDNESS AND RESPONSE, STATE DIRECTED EMERGENCY PREPAREDNESS AND RESPONSE ACTIVITY						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$1,714,131	\$1,714,131	\$0	\$0	\$0	18.4
<b>TOTAL</b>	<b>\$1,714,131</b>	<b>\$1,714,131</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>18.4</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,714,131	\$1,714,131	\$0	\$0	\$0	18.4
Annualize prior year budget actions	724,531	724,531	0	0	0	0.0
<b>TOTAL</b>	<b>\$2,438,662</b>	<b>\$2,438,662</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>18.4</b>
<b>INCREASE/(DECREASE)</b>	<b>\$724,531</b>	<b>\$724,531</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	42.3%	42.3%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>						
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	(0.0)

APPROPRIATION TO THE COMMUNITY BEHAVIORAL HEALTH DISASTER PREPAREDNESS AND RESPONSE CASH FUND

The line item includes funding appropriated to the Office of Emergency Preparedness and Response for behavioral health disaster preparedness and response.

*STATUTORY AUTHORITY:* Section 25-20.5-1302, C.R.S.

*REQUEST:* The Department requests an appropriation of \$375,000 General Fund which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

## (8) OFFICE OF STI'S, VIRAL HEPATITIS, AND HIV

This Division is responsible for disease control programs that are designed to control and prevent certain communicable diseases including: sexually transmitted infections (STI's), HIV and AIDS, and tuberculosis. The Division also houses the Ryan White Program and the Colorado HIV and AIDS Prevention Grant Program (CHAPP). This Division is funded by General Fund, cash funds from the Tobacco Master Settlement Agreement, and federal funds.

OFFICE OF STI/HIV/VH						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 Appropriation</b>						
SB 23-214 (Long Bill)	\$38,487,907	\$3,156,668	\$11,665,815	\$15,252	\$23,650,172	53.6
<b>TOTAL</b>	<b>\$38,487,907</b>	<b>\$3,156,668</b>	<b>\$11,665,815</b>	<b>\$15,252</b>	<b>\$23,650,172</b>	<b>53.6</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$38,487,907	\$3,156,668	\$11,665,815	\$15,252	\$23,650,172	53.6
R4 State syphilis response	1,912,065	1,912,065	0	0	0	3.8
MSA, A35, Prop EE tobacco adjustments	1,309,692	0	1,309,692	0	0	0.0
Annualize prior year budget actions	33,555	26,725	6,172	658	0	0.1
<b>TOTAL</b>	<b>\$41,743,219</b>	<b>\$5,095,458</b>	<b>\$12,981,679</b>	<b>\$15,910</b>	<b>\$23,650,172</b>	<b>57.5</b>
<b>INCREASE/(DECREASE)</b>	<b>\$3,255,312</b>	<b>\$1,938,790</b>	<b>\$1,315,864</b>	<b>\$658</b>	<b>\$0</b>	<b>3.9</b>
Percentage Change	8.5%	61.4%	11.3%	4.3%	0.0%	7.3%
<b>FY 2024-25 EXECUTIVE REQUEST</b>						
Request Above/(Below) Recommendation	(\$1,316,270)	(\$6,578)	(\$1,309,692)	\$0	\$0	0.0

### DECISION ITEMS – OFFICE OF STI'S, VIRAL HEPATITIS, AND HIV

#### ➔ R4 STATE SYPHILIS RESPONSE

**REQUEST:** The Department requests an increase of \$1.97 million General Fund and 3.8 FTE in FY 2024-25, annualizing to \$1.96 million General Fund and 4.0 FTE in FY 2025-26 through FY 2027-28, to address increased incidence of syphilis in the State and fund programs to increase access to testing and treatment.

**RECOMMENDATION:** Staff recommendation includes \$1.91 million General Fund and 3.8 FTE in FY 2024-25 annualizing to \$1.96 million General Fund and 4.0 FTE in FY 2025-26 through FY 2027-28.

**EVIDENCE LEVEL:** The Department indicated that this request item is evidence-informed, which is defined as “means a program or practice that reflects a moderate, supported, or promising level of confidence of effectiveness, ineffectiveness, or harmfulness as determined by an evaluation with a comparison group, multiple pre- and post-evaluations, or an equivalent measure,” per Section 2-3-210 (3a), C.R.S. **Staff agrees with the Department that the request is evidence-informed.** The Department has provided resources that support this level of evidence, and has also included

information on the success of opt-out screening at emergency departments and field-delivered therapy.<sup>8</sup>

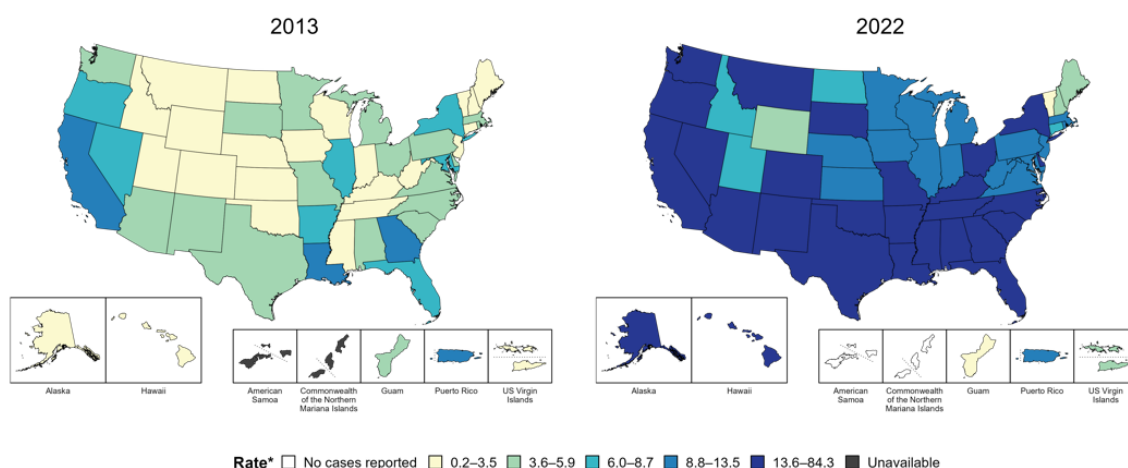
#### ANALYSIS:

#### SYPHILIS INFECTION RATES IN THE U.S.

Syphilis is a sexually transmitted infection (STI), which if untreated, can cause permanent damage to the body and can even be fatal. Effects of untreated syphilis include nervous system and brain impairment (neurosyphilis), blindness (ocular syphilis), hearing loss, and vertigo (otosyphilis). Untreated syphilis infections can also be passed on to a fetus in utero, leading to significant negative health outcomes (congenital syphilis). Syphilis is curable when treated with antibiotics such as Penicillin G Benzathine Injectable (Bicillin L-A). The further an infection progresses, the more rounds of treatment are necessary to combat the infection. Currently there is no vaccine to prevent syphilis infections, however, there is new research around utilizing doxycycline post sexual contact to reduce instances of STIs including syphilis. The disease was close to being eradicated in the U.S. in the 1990s.

The CDC's 2022 Sexually Transmitted Infections (STI) Surveillance report found that syphilis cases (all stages and congenital syphilis) have increased 78.9 percent in the past five years. More than 3,700 congenital syphilis cases were reported in 2022, reflecting an alarming 937 percent increase in the past decade.<sup>9</sup> The graphic below details the changes in rates of reported cases across states<sup>10</sup>.

### Primary and Secondary Syphilis — Rates of Reported Cases by Jurisdiction, United States and Territories, 2013 and 2022



#### SYPHILIS INFECTION RATES IN COLORADO

According to data collected by the Department as a part of the federally mandated surveillance requirements, between 2017 and 2022, Colorado has experienced a:

- 263 percent increase in the overall rate of syphilis;
- 831 percent increase in rate of syphilis among women of reproductive age (ages 15-44); and

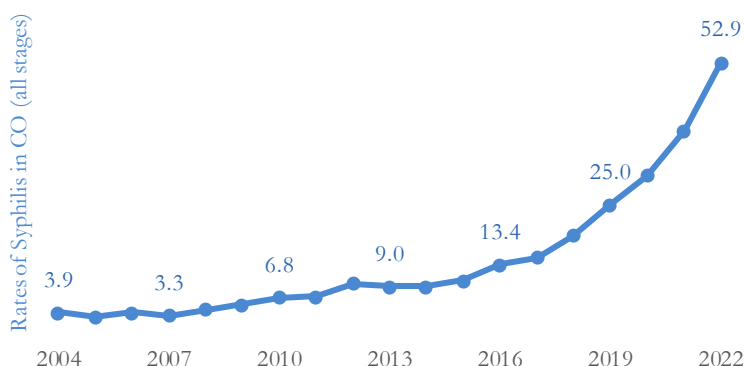
<sup>8</sup> Evidence-based analysis in this section was completed by JBC Staff Assistant Alanna Jackson

<sup>9</sup> <https://www.cdc.gov/std/statistics/2022/default.htm>

<sup>10</sup> <https://www.cdc.gov/std/statistics/2022/figures.htm>

- 537 percent increase in rate of congenital syphilis, shown in the table on the next page.

Overall rates of syphilis infections in Colorado have drastically increased over the last 20 years.



Public health officials have speculated that syphilis and congenital syphilis may be increasing due to a number of potential factors:

- The CDC’s budget for addressing STIs has not kept up with inflation in the last 10 years, and during federal debt ceiling negotiations in 2023, it lost the final two years of what was meant to be a \$1.0 billion investment in public health workforce funds, directly impacting states.
- Syphilis is easily missed or misdiagnosed; the only way to know if someone has a syphilis infection is to screen for it, and syphilis infections can present without symptoms. Thus, changes in access to sexual health care can affect the number of infections diagnosed and reported. Disruptions in STI-related prevention and care activities related to the U.S. response to the COVID-19 pandemic had a pronounced impact on trends in STI surveillance data.
- While increases in congenital syphilis rates predate the COVID-19 pandemic, disruptions in health care and public health systems and resource redistributions related to the pandemic continue to put pressure on public health agency resources.
- Barriers such as incarceration, homelessness, mental health, economic vulnerability, substance use, and stigma present challenges to reaching and engaging individuals to test for and treat syphilis.
- Over the past year, there has been a shortage of Bicillin, the antibiotic used to treat syphilis, with just around 100 doses currently available in the state.

The CDC states that “as syphilis rates rise, it is important to consider increased syphilis testing and treatment efforts. Healthcare providers can use primary and secondary syphilis rates in their counties to better direct their syphilis screening efforts. The CDC recommends screening all pregnant people at least once during their pregnancy and an individual, risk-based approach to syphilis screening for others. For many sexually active people, the most significant risk factor for syphilis is living in a county with high rates of syphilis. However, the threshold for high rates of syphilis is not currently defined.”

## CONGENITAL SYPHILIS

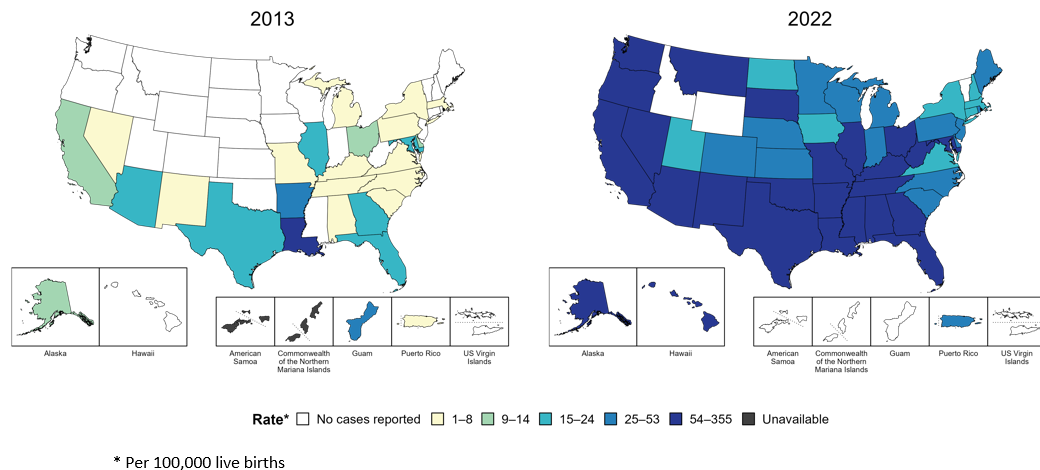
Congenital syphilis (CS) is a preventable outcome of untreated syphilis in pregnant individuals who pass the infection to the fetus. It can result in death, stillbirth, preterm birth, and physical, developmental, and neurologic disabilities<sup>11</sup>. Syphilis can be treated in mothers, with penicillin being 98.0 percent effective at preventing congenital syphilis<sup>12</sup>. The earlier on an infection is detected and

<sup>11</sup> <https://www.cdc.gov/std/syphilis/stdfact-congenital-syphilis.htm>

<sup>12</sup> <https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6444a3.htm>

treated in the mother, the lower the risks of negative outcomes for the pregnancy and baby<sup>13</sup>. Nationwide, rates of congenital syphilis have been trending upwards<sup>14</sup>, as shown in the map below<sup>15</sup>. In 2022, a total of 3,761 congenital syphilis cases were reported to the CDC<sup>16</sup>, representing a 31.7 percent increase in reported congenital syphilis cases from 2021. More than 10 times as many congenital syphilis cases were reported in 2022 (3,761) than in 2012 (334).

## Congenital Syphilis — Rates of Reported Cases by Year of Birth and Jurisdiction, United States and Territories, 2013 and 2022



The CDC collects information on missed prevention opportunities for mothers delivering infants with congenital syphilis. Based on this data, the CDC found that the largest missed opportunities for preventing congenital syphilis in 2022 were:

- Inadequate treatment during pregnancy (39.7 percent);
- No or no timely testing (36.8 percent); and
- No treatment during pregnancy (11.2 percent).<sup>17</sup>

The CDC found that timely testing and treatment during pregnancy could have prevented 9 out of 10 newborn syphilis cases in 2022.<sup>18</sup>

Colorado reported a rate of 49.2 cases of congenital syphilis per 100,000 live births in 2022, which represents 31 cases. In 2023, the state reported 50 cases of CS and three fatalities. So far in 2024, there have been 12 reported cases and three fatalities. About half of these cases are being diagnosed and treated in emergency departments. A majority of these cases are also occurring with individuals who are unhoused, may be in and out of jails, and who are not receiving prenatal care. The Department of Health Care and Policy Financing estimates that the cost of care for babies born with syphilis is around \$30,000 in their first year of life. The table on the next page highlights where syphilis rates among women ages 15-44 were reported in the state in 2021, these rates have only increased in 2022 and 2023.

<sup>13</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2819963/>

<sup>14</sup> <https://www.cdc.gov/std/statistics/2022/tables/31.htm>

<sup>15</sup> <https://www.cdc.gov/std/statistics/2022/figures.htm>

<sup>16</sup> [https://www.cdc.gov/mmwr/volumes/72/wr/mm7246e1.htm?s\\_cid=mm7246e1\\_w](https://www.cdc.gov/mmwr/volumes/72/wr/mm7246e1.htm?s_cid=mm7246e1_w)

<sup>17</sup> [https://www.cdc.gov/mmwr/volumes/72/wr/mm7246e1.htm?s\\_cid=mm7246e1\\_w](https://www.cdc.gov/mmwr/volumes/72/wr/mm7246e1.htm?s_cid=mm7246e1_w)

<sup>18</sup> <https://www.cdc.gov/nchhstp/newsroom/2023/syphilis-cases-in-newborns.html>

REPORTED SYPHILIS RATES ACROSS CO COUNTIES IN 2021 AMONG WOMEN AGED 15-44 <sup>19</sup>		
COUNTY*	RATE PER 100,000	OFFER SYPHILIS TESTING TO ALL SEXUALLY ACTIVE PEOPLE AGED 15-44 YEARS*
Pueblo	112.9%	Yes
La Plata	56.8	Yes
Denver	28.1	Yes
Alamosa	27.0	Yes
Fremont	15.8	Yes
Adams	14.1	Yes
Weld	14.1	Yes
Arapahoe	13.2	Yes
Jefferson	9.7	Yes
El Paso	7.1	Yes
Boulder	5.7	Yes
Douglas	4.2	No
Larimer	3.8	No
Mesa	3.4	No

\*all other counties reported no incidence of syphilis infections among this population

### OFFICE OF STI/HIV/VH (OSHV)

The Department's Office of STI/HIV/VH works alongside LPHAs, community-based organizations (CBOs), and other eligible entities to deliver services, innovate public health practices, and develop community partnerships to disrupt health inequities. Within the Office, limited federal grants fund some programs that provide resources including: STI testing and treatment support; testing kits and supplies; clinical testing and lab credits; and data collection and dissemination. The Department does not have dedicated funding to test, treat, or monitor general syphilis across Colorado.

Within existing resources dedicated to STI treatment and prevention, the Office has sought out opportunities to enhance community engagement, provide educational opportunities for community partners and medical providers, collect and monitor data, and supply community partners and providers with test kits. The Office has taken several measures to respond to the rates of syphilis in the state including:

- Working with the Denver Metro STI Coalition, which has allowed for multiple partnerships and opportunities to present data on syphilis and congenital syphilis to a large provider network;
- Partnering with the Denver Prevention Training Center to provide education and awareness on syphilis and congenital syphilis to local providers and agencies;
- In 2019, launching an HIV home-testing program and then successfully transitioning this program to include STIs.
- Creating multiple workgroups to help address the rise in syphilis here in Colorado on: effective and timely communication plans for the community and providers, the operating principles, structure, and composition of a congenital syphilis review board, strategies to address the increase in syphilis cases in Colorado, and priorities for coordination and sources of funding for projects related to testing, treatment, provider engagement, and community outreach.

In August 2022, the Office partnered with the Pueblo Department of Public Health and Environment to implement a field-delivered therapy (FDT) pilot to address some of these barriers in the small, early phase of the program. Since August 2022, 14 of 16 patients completed all three Bicillin doses and were

<sup>19</sup> <https://www.cdc.gov/nchhstp/atlas/syphilis/index.html>

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considered to be adequately treated, four of whom were pregnant. Additionally, three partners received preventative treatment through FDT. This highlights the potential of FDT to effectively reach persons otherwise unlikely to seek treatment and prevent congenital syphilis. However, the current program's scope only serves women of reproductive age (15-44) and their partners who reside in Pueblo County.

### **PUEBLO CONGENITAL SYPHILIS REDUCTION PILOT**

As a demonstration project, the CDC awarded funding to four jurisdictions, including CDPHE, to develop, implement, and evaluate interventions to reduce congenital syphilis. These projects were designed to build the CDC's portfolio of effective interventions to combat congenital syphilis. This funding was extended through July 2024 and will not be renewed. CDPHE's pilot project in Pueblo focused on preventing and treating congenital syphilis among women of reproductive age (WRAs), ages 15-44, in county jails. The Pueblo pilot project was a specifically designed intervention based on an intensive case review of congenital syphilis in Colorado in 2020. The pilot found successful outcomes were achieved through rapid screenings and same-day treatment as well as collaboration between the detention center, public health agency, and community-based organizations. In the first year of this grant, the program tested 281 individuals and provided treatment to 56. The program reported:

- 23.1 percent rate of positive syphilis tests among WRAs in the Pueblo County Detention Center;
- 12.8 percent positivity rate among WRAs in outreach settings; and
- 9 pregnant women screened positive for syphilis in both settings combined.

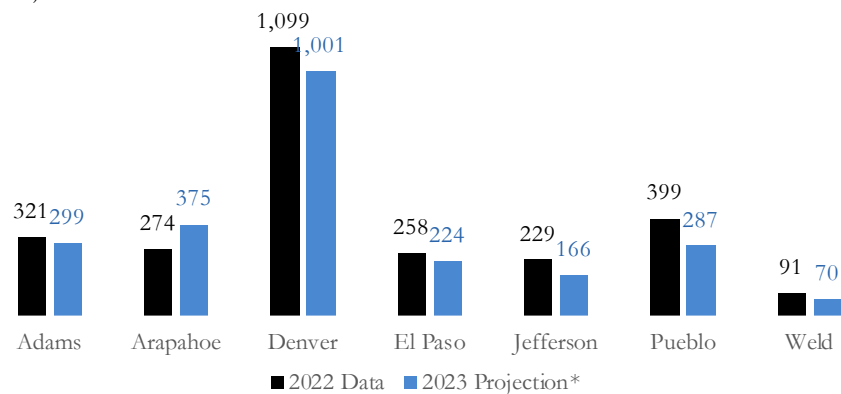
### **CONGENITAL SYPHILIS REDUCTION EXPANSION**

For FY 2023-24, the JBC and General Assembly approved an ongoing increase of General Fund spending authority of \$1.3 million to extend the pilot in Pueblo County, and expand the program into El Paso and Jefferson Counties. This expansion occurred with Pueblo County remaining a top priority amongst the three counties based on incidence, shown in the chart on the next page, and the Office's partnership the County. From July 1, 2023 through September 14, 2023 the program had the following outcomes:

- 182 women of reproductive age (15-44) were screened for syphilis in Pueblo County, 10 were pregnant at the time of screening, and two had a reactive syphilis test;
- Overall, there were 37 reactive results for a positivity rate of 20.3 percent;
- The treatment completion rate averaged 70.0 percent, and both pregnant individuals received treatment, averting two potential cases of congenital syphilis; and
- 59.3 percent of individuals received screening for substance use and mental health referrals.

Since July, CDPHE finalized and executed contracts with El Paso and Jefferson County, and both counties hired and trained their RNs and finalized standard operating procedures. Additionally, MOUs with the Health Departments, Detention Centers and Detention Center's contracted medical vendors were completed. Both counties have begun testing as of December, 2023.

Reported Syphilis Cases in Colorado by Select Counties in 2022 and Projections for 2023



### FEDERAL FUNDING

The Office receives federal funding for STD prevention and control; however, the CDC only allows the Office to use 10.0 percent of the award for the testing and treatment of all STIs. This includes testing for gonorrhea, chlamydia, and syphilis, for all clinical, non-clinical, and at-home testing settings, as well as treatment for any STIs. The Office uses the majority of this funding to provide STI medication reimbursement and testing credits to LPHAs, in order for the LPHAs to provide free STI testing to individuals who are uninsured or underinsured. The federal government continues to indicate there will be no additional funding made available, and has confirmed the funding for the Pueblo pilot will end after July 2024. As part of the debt ceiling agreement this summer, the federal government cut funding to the CDC for public health workforce funds by \$400 million. This will directly impact State and local health departments across the U.S.

Under current appropriations, the Office currently does not have the resources to establish a medication access delivery program or other interventions. The Department provides reimbursement to LPHAs who purchase STI medications at 340B pricing on a limited basis. However, this does not help non-340B providers gain access to syphilis treatment or prevention medications nor does it help providers who cannot store medications at their office due to shelf-life and the high cost of the medication. Finally, as a consequence of limited dedicated resources for the testing, treatment, prevention, and monitoring of syphilis in Colorado, only one known emergency department performs routine screening for HIV, hepatitis C, and syphilis in the Denver metro area.

### REQUEST

The proposed solution includes multiple actions aimed to increase access to testing and treatment for Colorado's populations most at-risk for syphilis. The Department is proposing the following actions:

- 5 Increase access to testing and screening in emergency departments and communities;
- 6 Developing a statewide field-delivered therapy (FDT) program; and
- 7 Increase access to treatment and prevention medications by building a state-level Bicillin inventory and delivery program and increasing the access to Doxycycline Post-Exposure Prophylaxis (doxy-PEP).

This request would provide resources for a statewide response to the increase in syphilis rates, particularly to prevent congenital syphilis, and will focus on the communities with the highest rates using evidence-informed interventions. The funding would be used for marketing, provider engagement, screening and testing, and treatment. Additionally, the FTEs would support outreach, linkage to care and program coordination, data evaluation, field treatment, and Bicillin delivery. The



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timeline to respond to the syphilis outbreak is based on other outbreaks the Department has seen and responded to. The program would focus on Pueblo, El Paso, and Jefferson counties, which are all in the top five counties with the highest rates of Syphilis in the State.

#### *INCREASE ACCESS TO TESTING AND SCREENING*

The Department proposes initiating a pilot program for emergency department opt-out syphilis screening at two sites in counties with a high prevalence of syphilis, including the Denver Metro area and Pueblo County. Emergency departments represent safety net and healthcare access point for marginalized communities affected by increasing syphilis cases. Clinicians that offer opt-out testing will notify a patient that the test will include screening for syphilis unless the patient declines. The increased screening will boost the early identification of syphilis cases, linkage to care, and will contribute to the statewide mission of reducing the incidence of syphilis and congenital syphilis in Colorado. Increased screening will allow for providers to detect both symptomatic and asymptomatic cases. Upon a positive result from screening, team members from public health and the emergency department or CBO will work together to link the patient to care and treatment. This will result in increased early detection, reduced transmission, and reduced morbidity and mortality from syphilis.

The Department will identify one emergency department in the Denver Metro and one in Pueblo County as part of a one to two-year pilot project to stand up opt-out testing for syphilis. Additionally, the Department will create options for CBOs throughout Colorado to increase screening for priority populations through the use of rapid tests and increase the capacity for on-site specimen collection for confirmatory testing. Once emergency departments or CBOs identify cases, a patient navigator from the emergency department and the state public health department (DIS) will assist with linkage to care. Linkage to care will depend on a number of factors but can include follow-up with an established primary care physician, sexual health clinic, returning to the emergency department, or field-delivered treatment. Beyond reducing the incidence and prevalence of syphilis and congenital syphilis, the Department hopes to achieve increased collaboration between local emergency departments, state health departments, and local health departments. If outcomes are successful, the Department will consider expanding the pilot program to include other emergency departments or urgent care centers in Colorado, based on readiness and incidences. The Department will monitor positivity rates for syphilis, HCV, and HIV in targeted high-prevalence communities; treatment completion rates to ensure effective linkage to care; and for the reduction of the congenital syphilis rate compared to the cost of treatment and morbidity/mortality of congenital syphilis.

#### Evidence

- The Department cites a 2021 report<sup>20</sup> analyzing a syphilis screening program implemented in June 2017 at the University Hospitals Cleveland Medical Center in Cleveland, Ohio. The report's funding note "The epidemiological trend of increased incidence of syphilis infections among marginalized populations who use the ED for care, including cities such as Cleveland, suggests that this clinical environment [emergency departments] may benefit from co-testing of syphilis along with other sexually transmitted infections." The report notes that creation of a collaborative initiative among the emergency department, laboratory, local health department, and other stakeholders can help to overcome some of the challenges in syphilis testing.

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<sup>20</sup><https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8093848/#:~:text=Research%20on%20syphilis%20testing%20in,syphilis%20in%20single%2Dinstitution%20studies>

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- A 2020 article from the Society for Academic Emergency Medicine<sup>21</sup> argues that screening programs in the emergency department are effective for identifying individuals at highest transmission risk.
  - A 2019 Open Forum Infectious Diseases Journal article<sup>22</sup> outlines an emergency department syphilis screening program implemented in Northern California which found that automated emergency department syphilis screening programs can be effective methods for maximizing screening in all emergency department patients seeking treatment for sexually transmitted infections. Additionally, the data suggests that most of the patients undergoing STI testing in emergency departments are not screened for syphilis, which is concerning since the prevalence of infection in those screened is significant.
  - A 2021 article from the Journal of the American Sexually Transmitted Diseases Association<sup>23</sup> found that: 1) High rates of undiagnosed syphilis were observed in the sample of patients participating in universal, opt-out syphilis testing; 2) A large percentage of those testing positive did not present with complaints that would have triggered testing; and 3) Opt-out testing has shown to result in higher rates of testing.

#### *STATEWIDE FIELD-DELIVERED THERAPY PROGRAM*

The Department proposes to develop a statewide field-delivered therapy (FDT) program in which a qualified medical provider would deliver treatment for syphilis at a person's home. FDT will strengthen the ability to locate clients, provide post-treatment, follow-up/referrals, and increase compliance and completion of treatment. The Office will work to identify one to three local public health agencies (LPHAs) that would like to participate in an FDT program. The Department will choose the health department(s) based on incidences and readiness. The identified LPHA(s), in collaboration with The Office, will implement FDT for all persons diagnosed with syphilis and their sexual partners who are unwilling or unlikely to receive treatment through a medical provider. Pueblo Department of Public Health and Environment will provide necessary technical assistance as needed, as they currently deliver FDT as a part of their STI Correctional Screening Project. The Office will meet with the contracted agencies on a monthly basis to establish quality improvement activities to ensure that this program reaches the intended target population with the desired outcomes.

All persons diagnosed with syphilis and their sexual partners would qualify for the program upon referral from a prenatal care provider, local public health agency, community-based organization, medical provider, or disease intervention specialist (DIS) after one failed attempt to schedule an appointment for treatment in the provider's office. If the individual meets the eligibility criteria for this service, a public health nurse and DIS will offer treatment of syphilis at a visit to the individual's home. This treatment consists of Benzathine Penicillin (Bicillin) injections that the public health nurse would administer to a person diagnosed with syphilis or an identified sexual contact of a person diagnosed with syphilis. Upon treatment, all women of reproductive age with an unknown pregnancy status will receive a free pregnancy test in order to capture pregnancy status. If the individual tests positive for pregnancy, the LPHA will provide referrals to prenatal care for those who have not engaged in care or will help to facilitate follow-up with existing prenatal or primary care providers with whom the patient has an established relationship.

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<sup>21</sup> <https://pubmed.ncbi.nlm.nih.gov/31802561/>

<sup>22</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6809151/>

<sup>23</sup> [https://journals.lww.com/stdjournal/fulltext/2021/05000/opt\\_out\\_routine\\_emergency\\_department\\_syphilis.8.aspx](https://journals.lww.com/stdjournal/fulltext/2021/05000/opt_out_routine_emergency_department_syphilis.8.aspx)

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Navigation and referrals may include, but are not limited to; access to PrEP, access to doxy-PEP, medication-assisted treatment (MAT), mental health, WIC, temporary housing, Medicaid or insurance enrollment, and free counseling services offered by CDPHE's Sexual Health Service Providers (SHSP). The proposed solution helps build collaborative and effective partnerships between the Department, LPHAs, CBOs, and medical providers. Additionally, LPHAs will provide treatment education and outreach to reduce the burden on providers for syphilis management and provide awareness and outreach to community agencies serving the targeted population.

The Department will evaluate the FDT program by measuring the number of individuals offered FDT, the number of individuals accepting treatment, the percent of cases that the program has adequately treated, the number of partners treated in the field, collect reported barriers to accessing treatment, report the number of congenital syphilis cases averted, and characterize the population receiving field treatment. The Department will collect this data from the LPHAs and store and evaluate it from REDCap.

### Evidence

- 2002 article titled “Field-Delivered Treatment for Chlamydia and Gonorrhea”<sup>24</sup> which explains how field-delivered therapy was effective to treat chlamydia and gonorrhea in San Francisco and found: (1) oral, single-dose medications for uncomplicated chlamydial and gonococcal infections can be safely administered in the field, (2) Field-delivered therapy is an effective means to increase the proportion of patients treated, especially young people and women, and (3) Field-delivered therapy is a feasible new tool for STD control that can be adopted by local health departments
- The Department notes that it partnered with the Pueblo Department of Public Health and Environment in August 2022 to implement an FTD pilot program, which has allowed 14 out of 16 patients to complete all three Bicillin doses.

### *MEDICATION ACCESS DELIVERY PROGRAM*

The Department proposes to increase access to treatment and prevention medications throughout the state of Colorado, particularly in the areas most impacted by syphilis. This includes but is not limited to access to Bicillin and doxy-PEP. Through the implementation of a statewide medication access delivery program that would deliver low or no-cost treatment and prevention to individuals disproportionately impacted by syphilis, the Department would eliminate barriers to timely treatment and prevention.

The national Bicillin shortage has highlighted challenges for providers who cannot access medications for patients in need, and an access delivery program would leverage the Office of STI/HIV/VH's 340B designation to eliminate distribution barriers faced by healthcare providers across the state. The 340B Drug Pricing federal program requires drug manufacturers to provide prescription drugs to eligible, covered entities at significantly reduced prices. In short, an access delivery program would have the following significant impacts:

- Assure appropriate and timely treatment and prevention for syphilis
- Decrease congenital syphilis rates in Colorado
- Decrease transmission of syphilis and co-occurring STIs in Colorado
- Decrease STI morbidity and mortality rates in Colorado

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<sup>24</sup> <https://ajph.aphapublications.org/doi/full/10.2105/AJPH.93.6.882>

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An access delivery program using the Office of STI/HIV/VH's 340B designation fulfills the Department's public health authority for syphilis control and creates a comprehensive safety net for syphilis treatment and prevention medications. This aligns with CDC guidance for healthcare providers who experience challenges obtaining Bicillin for syphilis treatments. Additionally, this program would enable the Office to use existing relationships, protocols, and evaluation infrastructure to prioritize distribution to the geographic regions, populations, and communities with disproportionately high rates of syphilis and a high need for increased access to medications for both treatment and prevention.

Programs can purchase the medications using the 340B Drug Pricing Program, which greatly reduces the cost of the medication, maximizes limited funding, and helps STD programs meet the demands of increasing syphilis cases. The Department will conduct an audit of medications purchased at 340B cost to determine compliance with federal 340B regulations and to ensure that providers use all medications distributed through this program to treat eligible patients per the 340B patient definition. The Office will track this data via medication requests submitted and will include the name, date of birth, and lab results for the patient(s) needing treatment; the number of Bicillin injections needed to provide adequate treatment; the stage of syphilis infection; and clinic/provider information and licensure.

The Department will establish a contract with a 340B pharmaceutical drug distributor through predetermined state procurement processes and set up accounts for fiscal monitoring and appropriate medication distribution and replenishment. Additionally, the program will coordinate with a contracted health pharmacy to ensure that the pharmacy can support the state's physical inventory of 340B Bicillin, and has sufficient refrigeration facilities, workforce resources, and training for the appropriate storage and handling of medication. The Department will also create and implement a medication access protocol for diagnosing providers (both 340B & non-340B) across the state and provide safe and timely delivery of medications to providers through a courier service or Department staff. The Department proposes implementing memorandums of understanding (MOUs) as needed with community providers and partner organizations in regions with high incidences of syphilis to access the statewide Bicillin access delivery program.

#### *GOALS OF PROPOSAL*

- The Department has a goal to ensure syphilis treatment completion for 872 women and 1,917 men in Colorado.
- For medication access, the Department estimates it can reach just over 600 clients in the coming year assuming that syphilis cases in 2024 will not exceed the levels reached in 2022 or 2023.

A concern for staff is the concentration of cases in the southwest corner of the state. The CDC has found that racial and ethnic minorities continue to be disproportionately affected by syphilis infections, and specifically American Indian or Alaska Native people experienced the highest rate of congenital syphilis. There is nothing explicit in the request about support for this region, however given the Southern Ute and Ute Mountain reservations are located in this region, staff has concerns about the disproportionate impact to this area. The Department has stated it will continue to work with its partners and make resources available to community and government partners in this work.

### *TIMELINE*

The Department is hoping to reverse the increasing trends of syphilis cases by 2028. Due to the steady increase in syphilis cases over time, the Department states it has been challenging to find an outbreak that would provide a comparable example. This response modeled after the timelines in responding to Hepatitis A and mpox outbreaks. These are not directly comparable, particularly because they are both vaccine-preventable and syphilis is not, but they do provide an example that through efforts at CPDHE and in partnership with local entities and community-based partners, the State can disrupt the progression and increase of disease.

### **RECOMMENDATION**

Staff is recommending \$1.9 million General Fund and 3.8 FTE in FY 2024-25 annualizing to \$2.0 million General Fund and 4.0 FTE in FY 2025-26 through FY 2027-28 as detailed in the table below. The Department is hopeful that this investment will positively impact rates in the requested time frame given the investment, and will continue to work with community organization and health agencies with the detailed resources below.

RECOMMENDATION COST BREAKDOWN				
	FY24-25		FY25-26 THROUGH FY27-28	
	APPROPRIATION	FTE	APPROPRIATION	FTE
Contractor Costs				
Marketing	\$200,000	-	\$200,000	-
Provider Engagement	210,000	-	210,000	-
Screening/Testing - ED & rapid tests and confirmatory testing	688,200	-	688,200	-
Treatment - FDT & Medication Delivery	515,000	-	515,000	-
<b>Contractor Cost Total</b>	<b>\$1,613,200</b>	<b>-</b>	<b>\$1,613,200</b>	<b>-</b>
Department Personnel Costs				
Community Engagement - Outreach	\$38,901	0.5	\$32,231	0.5
Screening/Testing - Linkage to care and program coordination	70,511	0.9	70,934	1
Screening/Testing - data evaluation	34,668	0.5	27,998	0.5
Treatment - FDT	112,648	1.4	106,401	1.5
Treatment - Bicillin Delivery Program	42,137	0.5	35,467	0.5
Centrally appropriated costs	0	-	71,118	-
<b>Department Personnel Costs Total</b>	<b>\$287,428</b>	<b>3.8</b>	<b>\$344,150</b>	<b>4.0</b>
<b>Total</b>	<b>\$1,912,065</b>	<b>3.8</b>	<b>\$1,957,350</b>	<b>4.0</b>

### LINE ITEM DETAIL - OFFICE OF STP'S, VIRAL HEPATITIS, AND HIV

#### ADMINISTRATION AND SUPPORT

This line item funds the administrative costs for the Division.

*STATUTORY AUTHORITY:* Sections 25-4-1301 et seq., 25-7-138, and 25-16.5-106.7, C.R.S.

*REQUEST:* The Department requests an appropriation of \$278,610 General Fund and 2.5 FTE.

**RECOMMENDATION:** Staff recommends approval of the request. Details are shown below.

OFFICE OF HIV, VIRAL HEPATITIS AND STI'S, ADMINISTRATION AND SUPPORT, ADMINISTRATION AND SUPPORT						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$273,929	\$273,929	\$0	\$0	\$0	2.5
<b>TOTAL</b>	<b>\$273,929</b>	<b>\$273,929</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.5</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$273,929	\$273,929	\$0	\$0	\$0	2.5
Annualize prior year budget actions	4,681	4,681	0	0	0	0.0
<b>TOTAL</b>	<b>\$278,610</b>	<b>\$278,610</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.5</b>
<b>INCREASE/(DECREASE)</b>	<b>\$4,681</b>	<b>\$4,681</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	1.7%	1.7%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$278,610</b>	<b>\$278,610</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.5</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### SEXUALLY TRANSMITTED INFECTIONS, HIV AND AIDS, PERSONAL SERVICES

The program costs for prevention and treatment of sexually transmitted infections, HIV and AIDS programs are funded through this line item and the following line item. Prevention services include ensuring those at high risk for an STI or HIV receive test results, and have access to risk-reduction counseling and partner notification services. This line item funds the personnel costs for staff that is responsible for tracking and maintaining a record of the number of STI and HIV infections. The staff also reviews disease reports in order to identify outbreaks and coordinate the Departments, local public health agencies and health care provider's response.

Since FY 2006-07 immunization staff have administered the Colorado HIV and AIDS Prevention Grant Program (CHAPP), established in Section 25-4-1403, C.R.S. The cash funds appropriated for CHAPP are from the AIDS and HIV Prevention Fund which receives 3.5 percent of Tobacco Master Settlement revenue. Funds are used in the operating expenses line for competitive grants to organizations that focus on addressing local community needs of medically accurate HIV and AIDS prevention and education. Pursuant to Section 25-4-1405 (3), C.R.S. the Department may use up to 5.0 percent of the money annually appropriated from the AIDS and HIV Prevention Fund for the actual costs incurred in administering the HIV and AIDS Prevention and Education Programs.

**STATUTORY AUTHORITY:** Section 25-4-1403 through 1405, C.R.S.

**REQUEST:** The Department requests an appropriation of \$4,047,692 total funds, including \$346,642 General Fund and 44.8 FTE.

**RECOMMENDATION:** Staff recommendation is detailed in the table below.

OFFICE OF STI/HIV/VH, ADMINISTRATION AND SUPPORT, SEXUALLY TRANSMITTED INFECTIONS, HIV AND AIDS, PERSONAL SRV.						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$3,758,536	\$64,316	\$129,820	\$14,017	\$3,550,383	40.9
<b>TOTAL</b>	<b>\$3,758,536</b>	<b>\$64,316</b>	<b>\$129,820</b>	<b>\$14,017</b>	<b>\$3,550,383</b>	<b>40.9</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$3,758,536	\$64,316	\$129,820	\$14,017	\$3,550,383	40.9
R4 State syphilis response	253,981	253,981	0	0	0	3.8
Annualize prior year budget actions	27,809	20,979	6,172	658	0	0.1
<b>TOTAL</b>	<b>\$4,040,326</b>	<b>\$339,276</b>	<b>\$135,992</b>	<b>\$14,675</b>	<b>\$3,550,383</b>	<b>44.8</b>
<b>INCREASE/(DECREASE)</b>	<b>\$281,790</b>	<b>\$274,960</b>	<b>\$6,172</b>	<b>\$658</b>	<b>\$0</b>	<b>3.9</b>
Percentage Change	7.5%	427.5%	4.8%	4.7%	0.0%	9.5%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$4,047,692</b>	<b>\$346,642</b>	<b>\$135,992</b>	<b>\$14,675</b>	<b>\$3,550,383</b>	<b>44.8</b>
Request Above/(Below) Recommendation	\$7,366	\$7,366	\$0	\$0	\$0	0.0

### SEXUALLY TRANSMITTED INFECTIONS, HIV AND AIDS OPERATING EXPENSES

This line item funds the operating expenses of the prevention and treatment services for sexually transmitted infections (STIs), and the HIV and AIDS Prevention and Education Programs, and the maintenance of data and records related to infection rates. Approximately 80.0 percent of the federal funds are used for grants to county and local governments and to non-profit organizations to conduct STIs monitoring, prevention and education efforts. The cash funds are from the HIV and AIDS Prevention Fund which receives 3.5 percent of the annual Tobacco Master Settlement Agreement revenue.

*STATUTORY AUTHORITY:* Section 25-4-1402 through 1405, C.R.S.

*REQUEST:* The Department requests an appropriation of \$9,006,121 total funds including \$2,788,797 General Fund.

*RECOMMENDATION:* **Staff recommendation is detailed in the table below.**

OFFICE OF STI/HIV/VH, ADMINISTRATION AND SUPPORT, SEXUALLY TRANSMITTED INFECTIONS, HIV AND AIDS, OPERATING EXP						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$7,361,317	\$1,143,993	\$4,882,189	\$1,235	\$1,333,900	0.0
<b>TOTAL</b>	<b>\$7,361,317</b>	<b>\$1,143,993</b>	<b>\$4,882,189</b>	<b>\$1,235</b>	<b>\$1,333,900</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$7,361,317	\$1,143,993	\$4,882,189	\$1,235	\$1,333,900	0.0
R4 State syphilis response	1,658,084	1,658,084	0	0	0	0.0
MSA, A35, Prop EE tobacco adjustments	470,525	0	470,525	0	0	0.0
Annualize prior year budget actions	664	664	0	0	0	0.0
<b>TOTAL</b>	<b>\$9,490,590</b>	<b>\$2,802,741</b>	<b>\$5,352,714</b>	<b>\$1,235</b>	<b>\$1,333,900</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>\$2,129,273</b>	<b>\$1,658,748</b>	<b>\$470,525</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>

OFFICE OF STI/HIV/VH, ADMINISTRATION AND SUPPORT, SEXUALLY TRANSMITTED INFECTIONS, HIV AND AIDS, OPERATING EXP

	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
Percentage Change	28.9%	145.0%	9.6%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$9,006,121</b>	<b>\$2,788,797</b>	<b>\$4,882,189</b>	<b>\$1,235</b>	<b>\$1,333,900</b>	<b>0.0</b>
Request Above/(Below) Recommendation	(\$484,469)	(\$13,944)	(\$470,525)	\$0	\$0	0.0

**RYAN WHITE ACT PERSONAL SERVICES**

This line item funds the staff who administers the federal grants received under the federal Ryan White Comprehensive AIDS Resources Emergency (CARE) Act, and the AIDS Drug Assistance Program (ADAP), which is funded by a combination of tobacco master settlement dollars and federal funds. ADAP provides AIDS/HIV treatment related drugs and opportunistic infection fighting drugs to individuals who are not covered by private insurance, are not Medicaid eligible, and have incomes at or below 400.0 percent of the federal poverty level. ADAP provides provide drug cost assistance to individuals who can no longer the drugs under private insurance and meet the other eligibility conditions.

Federal funds from the federal Ryan White CARE Act fund 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 a maintenance of effort requirement that is met 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.

*STATUTORY AUTHORITY:* Section 25-4-1411, C.R.S.

*REQUEST:* The Department requests an appropriation of \$2,425,208 total funds, including \$23,766 General Fund and 10.2 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

OFFICE OF HIV, VIRAL HEPATITIS AND STTs, ADMINISTRATION AND SUPPORT, RYAN WHITE ACT, PERSONAL SERVICES

	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 APPROPRIATION</b>						
SB 23-214 (Long Bill)	\$2,424,807	\$23,365	\$0	\$0	\$2,401,442	10.2
<b>TOTAL</b>	<b>\$2,424,807</b>	<b>\$23,365</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,401,442</b>	<b>10.2</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$2,424,807	\$23,365	\$0	\$0	\$2,401,442	10.2
Annualize prior year budget actions	401	401	0	0	0	0.0
<b>TOTAL</b>	<b>\$2,425,208</b>	<b>\$23,766</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,401,442</b>	<b>10.2</b>
<b>INCREASE/(DECREASE)</b>	<b>\$401</b>	<b>\$401</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>



OFFICE OF HIV, VIRAL HEPATITIS AND STI'S, ADMINISTRATION AND SUPPORT, RYAN WHITE ACT, PERSONAL SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
Percentage Change	0.0%	1.7%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$2,425,208</b>	<b>\$23,766</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,401,442</b>	<b>10.2</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### RYAN WHITE OPERATING EXPENSES

This line item funds the operating expenses of the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act programs, and the Drug Assistance Program. The cash funds appropriated for the operating expenses of the Drug Assistance Program is from the Drug Assistance Program Fund which receives 5.0 percent of the annual Tobacco Master Settlement Agreement money.

*STATUTORY AUTHORITY:* Section 25-4-1411, C.R.S.

*REQUEST:* The Department requests an appropriation of \$23,391,242 total funds, including \$1,451,065 General Fund which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

### VIRAL HEPATITIS PROGRAM COSTS

The Department is required to administer a statewide response to disease outbreaks. This line is specifically for the prevention and containment of hepatitis.

*STATUTORY AUTHORITY:* Section 25-1-122, C.R.S.

*REQUEST:* The Department requests a continuation appropriation of \$200,000 General Fund which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

### INDIRECT COST ASSESSMENT

Collection of funding to pay for centralized department functions.

*STATUTORY AUTHORITY:* Section 24-75-1401, C.R.S.

*REQUEST:* The Department requests an appropriation of \$1,078,076 total funds including \$265,729 cash funds and \$812,347 federal funds, which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

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## (9) PREVENTION SERVICES DIVISION

This division is comprised of the following five subdivisions: Administration, Chronic Disease Prevention Programs, Primary Care Office, Family and Community Health, and Nutrition Services.

### (A) ADMINISTRATION

This subdivision provides administrative services to the other division programs. Funding for this subdivision is from the General Fund, various division cash funds, and federal funds.

### (B) CHRONIC DISEASE PREVENTION PROGRAMS

This subdivision provides prevention services for specific chronic diseases including: breast and cervical cancer, lung cancer, and cardiovascular and chronic pulmonary disease. This subdivision also includes oral health programs and tobacco cessation, education, and prevention programs. Funding for this subdivision includes the Prevention, Early Detection, and Treatment Fund and the Tobacco Education Programs Fund, which receive revenue from the Amendment 35 tobacco tax, Medicaid reappropriated funds, and federal funds.

### (C) PRIMARY CARE OFFICE

This subdivision 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. Funding for this subdivision includes General Fund, cash funds from the Tobacco Master Settlement Agreement, and federal funds.

### (D) FAMILY AND COMMUNITY HEALTH

This subdivision includes the following three program areas: (1) Women's Health Programs, (2) Children and Youth Programs, (3) Injury, Suicide, and Violence Prevention Programs, and (4) Office of Gun Violence Prevention. Women's Health Programs include health and family planning services for low-income women, prenatal and postpartum services, counseling and education to low-income pregnant women and their newborns, and disordered eating prevention. Children and Youth Programs include the children with special needs health care program, genetics counseling for children with possible genetic disorders, and school-based health centers. Injury, Suicide and Prevention Programs include suicide and injury prevention programs. Funding for this subdivision includes General Fund, cash funds from the Newborn Screening and Genetic Counseling Cash Funds and the Marijuana Tax Cash Fund, and federal funds.

### (E) NUTRITION SERVICES

This subdivision includes the Women, Infants, and Children (WIC) Nutrition Program and the Child and Adult Food Care Program. WIC provides a monthly check to low-income (185.0 percent of federal poverty guidelines) women and children who are at-risk of poor nutritional outcomes. The Child and Adult Food Care Program provides reimbursement for nutritious foods to participating child care centers, Head Start programs, family day care homes, and adult day care centers. These programs are almost entirely federally funded.

PREVENTION SERVICES DIVISION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 Appropriation</b>						
SB 23-214 (Long Bill)	\$269,552,890	\$31,208,224	\$77,918,241	\$11,272,755	\$149,153,670	230.0
Other legislation	(2,188,998)	(3,188,998)	1,000,000	0	0	4.1
HB 24-1196 (CDPHE Supplemental)	0	0	0	0	0	0.0
<b>TOTAL</b>	<b>\$267,363,892</b>	<b>\$28,019,226</b>	<b>\$78,918,241</b>	<b>\$11,272,755</b>	<b>\$149,153,670</b>	<b>234.1</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$267,363,892	\$28,019,226	\$78,918,241	\$11,272,755	\$149,153,670	234.1
R11a FPP technical adjustments	0	0	0	0	0	0.0
Staff-initiated annualize HB24-1214 CCV funding	250,000	0	250,000	0	0	0.0
Staff-initiated healthy eating incentives program	0	0	0	0	0	0.0
MSA, A35, Prop EE tobacco adjustments	(7,629,227)	0	(7,629,227)	0	0	0.0
Annualize prior year legislation	19,343,401	1,171,949	18,171,452	0	0	4.7
Non-prioritized decision items	1,609	0	0	0	1,609	0.0
Annualize prior year budget actions	(29,486)	(305,691)	222,706	53,499	0	0.0
<b>TOTAL</b>	<b>\$279,300,189</b>	<b>\$28,885,484</b>	<b>\$89,933,172</b>	<b>\$11,326,254</b>	<b>\$149,155,279</b>	<b>238.8</b>
<b>INCREASE/(DECREASE)</b>	<b>\$11,936,297</b>	<b>\$866,258</b>	<b>\$11,014,931</b>	<b>\$53,499</b>	<b>\$1,609</b>	<b>4.7</b>
Percentage Change	4.5%	3.1%	14.0%	0.5%	0.0%	2.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>						
Request Above/(Below) Recommendation	\$6,379,227	\$0	\$6,379,227	\$0	\$0	(0.0)

## DECISION ITEMS – PREVENTION SERVICES DIVISION

### → R11A FPP TECHNICAL ADJUSTMENTS

*REQUEST:* The Department requests approval for a net-zero technical change to the Long Bill to:

- Combine all of the Family Planning Program lines in the Long Bill into one line called “Reproductive Health Program”; and
- Rename the subcategory (1) Women’s Health to (1) Community Health.

*RECOMMENDATION:* **Staff recommends approval of the request.**

#### *ANALYSIS:*

#### **FAMILY PLANNING PROGRAM (FPP)**

The Family Planning Program (FPP), within the Prevention Services Division, was established in 1970 as part of the Public Health Service Act. The FPP provides comprehensive sexual and reproductive health services to patients of all identities, prioritizing low-income, underinsured, and uninsured persons. The program serves individuals throughout the state with a variety of contraceptive-related services such as education, counseling, and provision of contraceptive methods. Other services also include pelvic examinations, breast and cervical cancer screenings, sexually transmitted disease (STD) and HIV prevention education, counseling, testing, and referral, pregnancy and fertility counseling, and, pregnancy testing and counseling.

The FPP is not a direct service provider. Instead, the Program contracts with 80 Title X clinics across the state to provide reimbursable services. Available funding for each clinic is determined via a formula based on the number of clients seen at each clinic. Clinics then submit for reimbursement based on the qualifying services provided. Clinics first bill a client’s insurance, if available. If a client does not

have insurance, or does not wish to use insurance, services are offered based on a sliding fee scale. However, 77.0 percent of clients are 100.0 percent below poverty level and pay no fees. The Department estimates an average cost of \$404 per visit.

## FPP FUNDING

Historically, the program has been funded with a mix of state, federal, local, and private funding, with federal funding coming from Title X dollars. The Title X Family Planning program, enacted in 1970 as Title X of the Public Health Service Act, is a federal grant program designed to provide access to contraceptive services, with a priority to low-income families. The Family Planning Program's current appropriation totals \$10.1 million General fund and federal funds for administration, purchase of services, and federal grants. The federal Title X grant requires that there be financial support from other sources besides the Title X grant, however there is no specific amount required. Federal funding has remained level in the last five years. The current line item structure is shown below. The program is not required to share the same name as the federal grant, and many states have named their Title X projects differently.

FAMILY PLANNING PROGRAM LONG BILL STRUCTURE				
LINE ITEMS	TOTAL FUNDS	GENERAL FUND	FEDERAL FUNDS	FTE
Family Planning Program Administration	\$1,593,407	\$409,337	\$1,184,070	9.9
Family Planning Purchase of Services	8,348,361	4,759,461	3,588,900	0.0
Family Planning Federal Grants	184,300	0	184,300	2.0

Federal grants the Department receives are booked to the Family Planning Federal Grants line item in the Long Bill. The amount identified in this line item in the Long Bill is informational, and the actual amount booked in CORE ties to the Notice of Award received each year. In FY 2022-23, this award was \$1.3 million.

## FPP FUNDING INEFFICIENCIES

The Department states that splitting the program funding across multiple line items for administration and purchase of services creates an unnecessary administrative burden with tracking the varying funding sources across these two lines when the program is intertwined. The Department states that this current structure limits the flexibility of the program in budgeting, and in recent years has caused the program to be unable to fully spend its appropriations. In some years, there have been funds unspent in the administration line that could not be shifted to the purchase of services line with the current structure. With a structure shift, the Department is hopeful that if there were savings in the administration line, these funds could be utilized to provide additional services.

UNSPENT ANNUAL APPROPRIATIONS FOR FPP				
LONG BILL LINE	2020	2021	2022	2023**
Family Planning Program Administration(GF)	\$0	\$0	\$3,534	\$7,697
Family Planning Purchase of Services	0	0	0	0
Family Planning Federal Grants*(FF)	0	0	0	139,554

\*FFY23 federal grant unspent dollars can be spent until 3/31/24

## LONG BILL CATEGORIZATION

The FPP program falls under the Women's Health sub-subdivision in the Family and Community Health subdivision of the Prevention Services Division. The Department states that the "Women's Health" subcategory is inaccurate, because the programs housed in the category include family

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planning services and the disordered eating prevention program which provide services to individuals regardless of gender. The Department also believes that title Family Planning is not inclusive of the full range of services offered in the program. It believes “Reproductive Health,” would be more accurate as it encompasses a broader range of services (e.g., STI testing and treatment).

### REQUEST

The Department’s request seeks to reduce administrative burden, improve program budget management, and make the Long Bill line and sub-category labels more accurate with the following two part request. The request is to:

- Combine all of the Family Planning Program lines in the Long Bill (currently located under (9) Prevention Services Division, (D) Family and Community Health, (1) Women’s Health) into one line called “Reproductive Health Program”; and
- Rename the subcategory (1) Women’s Health to (1) Community Health.

### RECOMMENDATION

Staff is recommending approval of the request and believes this would allow the Department greater flexibility in the use of the funds for provision of services, ability to fully expend the allocations, and more accurate naming and subcategorization of the programs. If desired, the Committee could add a footnote delineating the maximum portion of the line that should be used for administrative costs, however staff would be concerned that this might create a similar spending issue in the future, and this decision might be best left up to the administrators of the program. An alternative option would be for the Committee to request an RFI on the amounts spent on administration versus services annually, which might give the Committee better information to add such a delineation in the future.

## ➔ STAFF-INITIATED ANNUALIZE H.B. 24-1214 CCV FUNDING

**RECOMMENDATION:** Staff recommendation is to add annual ongoing appropriations of \$1.25 million from the Community Crime Victims Grant (CCVG) Program Cash Fund, in order to annualize H.B. 24-1214 (Community Crime Victims Funding), a JBC-sponsored bill that was introduced with the supplemental package. Staff is recommending these appropriations allow for one additional year of spending authority in order to ensure grantees can expend the funding in accordance with their fiscal calendars. This out-year spending authority will be denoted in a footnote.

### ANALYSIS:

#### COMMUNITY CRIME VICTIMS GRANT (CCVG) PROGRAM

The CCVG Program was created via H.B. 18-1409 (Crime Survivors Grant Program and Presumptive Parole) in response to a study that found that people of color, youth, and men typically experience the highest rates of victimization, but are also the least likely to pursue and obtain victim support services. So far, the program has found that participants seeking services through the program reflect high levels of satisfaction and the number of participants consistently exceeds program goals. Waitlists for services remain heavy because the grantee organizations are beyond their maximum capacity. A sunset review of the program recommended a continuation, and S.B. 23-160 (Sunset Continue Community Crime Victims Grant Program) continued the program through September 1, 2028, with another sunset review of the grant program before its repeal.

The program receives an annual General Fund appropriation of \$882,349, which is adjusted annually for salary increases. The amount supports 0.3 FTE, administrative costs, and annual grants. All money in the CCVG Cash Fund will revert to General Fund in September 2029. The cash fund received

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General Fund transfers in FY 2019-20 (\$568,431) and FY 2020-21 (\$402,407). Senate Bill 22-183 (Crime Victims Services) transferred \$1.0 million General Fund to the CCVS cash fund in FY 2022-23.

#### **FY 2023-24 LONG BILL AMENDMENT**

The program received a one-time \$4.0 million General Fund appropriation for FY 2023-24 via a Long Bill amendment introduced by Representative Lynch and Senators Smallwood and Van Winkle, that it cannot spend by the end of FY 2023-24. The Department expects to spend approximately \$460,000 of the \$4.0 million appropriation from the Long Bill amendment in FY 2023-24. The Department states that planned expenditures will vary across each fiscal year due to the nature of the work and changing community needs, and it plans to distribute the appropriation through FY 2027-28. This funding would be allocated to existing grantees to sustain and grow services and would also be used to fund at least two new community partners. A request for proposals was released in late 2023 and new grantees will be awarded in FY 2023-24.

#### **HOUSE BILL 24-1214 (COMMUNITY CRIME VICTIMS FUNDING)**

As part of the supplemental package, the Committee introduced H.B. 24-1214 to ensure the program was able to fully expend the appropriation over time. House Bill 24-1214 made the following changes in FY 2023-24:

- Reduced the General Fund appropriation to the program by \$4.0 million;
- Transferred \$4.0 million General Fund into the CCVG Program Cash Fund;
- Made the CCVG Program Cash Fund subject to annual appropriation; and
- Added an appropriation of \$1.0 million with one year of roll-forward from the cash fund for the program in FY 2023-24.

#### **RECOMMENDATION**

During the supplemental process, staff recommended adding ongoing annual appropriations to the program in order to ensure the program's ability to expend the full amount over time. In order to do this, staff is recommending annual ongoing appropriations of \$1.25 million from the CCVG Program Cash Fund to the program. The additional \$0.25 million in the appropriation is being recommended in accordance with the program's plan to spend that amount in FY 2027-28. Staff recommendation includes an annual footnote in the Long Bill, denoting one year of out-year spending authority on the appropriation. This will allow grantees to spend funds in a time-frame that aligns with their fiscal calendar.

#### **➔ STAFF-INITIATED HEALTHY EATING INCENTIVES PROGRAM [LEGISLATION RECOMMENDED]**

**RECOMMENDATION:** Staff recommendation is that the Committee sponsor legislation to move funding for the Healthy Food and Active Living Program from a footnote to its own line item. Staff believes it is more appropriate to fund the program through its own line item rather than via a footnote on another line item. This requires legislation to create the program in statute and appropriate funding directly to that program.

#### **LONG BILL FOOTNOTE**

The footnote first appeared in the FY 2018-2019 Long Bill during the 2018 legislative session. It appears to have been added through committee action taken during the closing of the Long Bill. The

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footnote is on the Chronic Disease and Cancer Prevention Grants line item within the Prevention Services Division. The grants issued through this program focus on the research and treatment of problems afflicting Colorado residents: cancer, diabetes, cardiovascular disease, arthritis, asthma, obesity, and tobacco use, and the program implements activities in accordance with guidance from the federal Centers for Disease Control and Prevention (CDC). The program currently includes \$601,619 General Fund for the Healthy Food Incentive Fund to improve access to Colorado-grown fresh fruits and vegetables for low-income individuals.

The footnote currently reads: “It is the General Assembly's intent that all but \$227,752 of the General Fund in this line item go to a statewide not-for-profit organization to provide healthy eating program incentives among Colorado's low-income populations. As a part of the Department's responsibilities under section 25-20.5-104, C.R.S., such funds are to be used for improving access to fresh Colorado grown fruits and vegetables. It is the general assembly's further intent that the Department and the nonprofit will minimize their administrative expenses with the Department using no more than \$10,000 and the nonprofit using 5% of the total fund amount for such purposes. It is the General Assembly's further intent that the statewide not-for-profit organization have experience in supporting healthy eating incentive programs, such as programs at local farmers markets, and experience with coordinating healthy eating programs and funding between local, state, and federal programs.”

#### **HOUSE BILL 23-1008 (FOOD ACCESSIBILITY)**

House Bill 23-1008 appropriated \$250,000 to the program via the existing line item and footnote. It added an appropriation to the program in statute, however the section is repealed after September 2025.

##### *SECTION 25-20.5-104 (2.5) C.R.S.:*

“(a) For state fiscal year 2023-24, the general assembly shall appropriate two hundred fifty thousand dollars to the division for the division to partner with a statewide nonprofit organization to provide healthy eating program incentives among Colorado’s low-income populations. These program incentives must attempt to improve access to fresh Colorado-grown fruits and vegetables among Colorado’s low-income populations.

(b) The statewide nonprofit organization selected by the division for the partnership described in this subsection (2.5) shall have experience in supporting healthy eating incentives programs, such as programs at local farmers markets, and experience with coordinating healthy eating programs and funding between local, state, and federal programs.

(c) In providing the program incentives described in this subsection (2.5), both the division and the nonprofit shall minimize their administrative expenses. The division shall not use more than ten thousand dollars and the nonprofit shall not use more than five percent of the amount transferred pursuant to subsection (2.5)(a) of this section for their administrative expenses.

(d) The division shall use the funding provided in subsection (2.5)(a) of this section to supplement, not supplant, other general fund appropriations to the division.

(e) All but seventy-seven thousand seven hundred fifty-two dollars of the amount transferred pursuant to subsection (2.5)(a) of this section must be expended for healthy eating program incentives among Colorado’s low-income populations.

(f) This subsection (2.5) is repealed, effective September 1, 2025.”

## PROPOSED BILL

Staff is recommending the Committee sponsor a bill to:

- Formally create the Healthy Food and Active Living Program in statute;
- Maintain the language about the program and the nonprofit it will partner with as created in H.B. 23-1008;
- Maintain the language indicating the Division will use no more than \$10,000 and the nonprofit will use no more than 5.0 percent of the funding for administrative expenses; and
- Not have the section repeal in 2025.

Staff believes that because the General Assembly has approved the funding for this program since 2018 and increased funding for the program in 2023, it is more appropriate to directly fund the program in the Long Bill rather than state the General Assembly's intent to fund the program via a footnote.

## RECOMMENDATION

Staff recommendation is to retain the program in statute, create a new line item specifically for this program, and shift the funding from the Chronic Disease and Cancer Prevention Grants line item to this new item on an ongoing basis. This would also allow for removal of the footnote denoting the General Assembly's intent and rather directly funding the program. This would shift \$601,619 General Fund to the new line item, as well as potentially some federal funding based on CDC grants.

## LINE ITEM DETAIL - PREVENTION SERVICES DIVISION

### (A) ADMINISTRATION

#### ADMINISTRATION

This line item funds the staff and associated operating expenses for those the general administration and oversight of the Programs within this division.

*STATUTORY AUTHORITY:* Sections 25-1-107 (f) (1) and 24-22-117, C.R.S.

*REQUEST:* The Department requests an appropriation of \$3,307,173 total funds, including \$683,839 General Fund and 35.9 FTE.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

PREVENTION SERVICES DIVISION, ADMINISTRATION, ADMINISTRATION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$3,158,723	\$674,519	\$827,465	\$26,629	\$1,630,110	34.9
<b>TOTAL</b>	<b>\$3,158,723</b>	<b>\$674,519</b>	<b>\$827,465</b>	<b>\$26,629</b>	<b>\$1,630,110</b>	<b>34.9</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$3,158,723	\$674,519	\$827,465	\$26,629	\$1,630,110	34.9
Annualize prior year legislation	40,068	0	40,068	0	0	(0.5)
Annualize prior year budget actions	18,450	9,320	8,987	143	0	0.0
<b>TOTAL</b>	<b>\$3,217,241</b>	<b>\$683,839</b>	<b>\$876,520</b>	<b>\$26,772</b>	<b>\$1,630,110</b>	<b>34.4</b>
<b>INCREASE/(DECREASE)</b>	<b>\$58,518</b>	<b>\$9,320</b>	<b>\$49,055</b>	<b>\$143</b>	<b>\$0</b>	<b>(0.5)</b>



PREVENTION SERVICES DIVISION, ADMINISTRATION, ADMINISTRATION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
Percentage Change	1.9%	1.4%	5.9%	0.5%	0.0%	(1.4%)
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$3,217,241</b>	<b>\$683,839</b>	<b>\$876,520</b>	<b>\$26,772</b>	<b>\$1,630,110</b>	<b>34.4</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	(0.0)

## INDIRECT COSTS ASSESSMENT

Collection of funding to pay for centralized department functions.

*STATUTORY AUTHORITY:* Section 24-75-1401, C.R.S.

*REQUEST:* The Department requests a continuation appropriation of \$7,909,584 total funds including \$3,683,142 cash funds, \$35,292 reappropriated funds, and \$4,191,150 federal funds, which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

## (B) CHRONIC DISEASE PREVENTION PROGRAMS

### TRANSFER TO THE HEALTH DISPARITIES CASH FUND

This line item reflects the portion of Amendment 35 Tobacco Tax money required by the State Constitution to be transferred into the Health Disparities Grant Program Fund. The Office of Health Equity uses the Health Disparities Grant Program Fund for administration costs and grants. This line item equals 15.0 percent of the Amendment 35 dollars deposited into the Prevention, Detection, and Early Treatment Fund pursuant to Section 24-22-117 (d) (III), C.R.S.

*STATUTORY AUTHORITY:* Section 24-22-117 (d) (III), C.R.S.

*REQUEST:* The Department requests an appropriation of \$2,841,381 cash funds.

*RECOMMENDATION:* **Staff recommendation is detailed below.** The recommendation includes approved tobacco related adjustments.

PREVENTION SERVICES DIVISION, CHRONIC DISEASE PROGRAMS, TRANSFER TO THE HEALTH DISPARITIES GRANT PROGRAM FUND						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 APPROPRIATION</b>						
SB 23-214 (Long Bill)	\$2,841,381	\$0	\$2,841,381	\$0	\$0	0.0
<b>TOTAL</b>	<b>\$2,841,381</b>	<b>\$0</b>	<b>\$2,841,381</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$2,841,381	\$0	\$2,841,381	\$0	\$0	0.0
MSA, A35, Prop EE tobacco adjustments	(411,037)	0	(411,037)	0	0	0.0
<b>TOTAL</b>	<b>\$2,430,344</b>	<b>\$0</b>	<b>\$2,430,344</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$411,037)</b>	<b>\$0</b>	<b>(\$411,037)</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(14.5%)	0.0%	(14.5%)	0.0%	0.0%	0.0%

PREVENTION SERVICES DIVISION, CHRONIC DISEASE PROGRAMS, TRANSFER TO THE HEALTH DISPARITIES GRANT PROGRAM FUND						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$2,841,381</b>	<b>\$0</b>	<b>\$2,841,381</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$411,037	\$0	\$411,037	\$0	\$0	0.0

### CHRONIC DISEASE AND CANCER PREVENTION GRANTS PROGRAM

The grants issued by the Cancer Prevention Grants Program focus on the research and treatment of problems afflicting Colorado residents: cancer, diabetes, cardiovascular disease, arthritis, asthma, obesity, and tobacco use. This program also provides funding to promote healthy lifestyles for all Coloradans. This program implements activities in accordance with guidance from the federal Centers for Disease Control and Prevention. Both programs have statewide strategic plans, develop a disease report, and partner with coalitions or advisory groups to extend the reach of the programs. The program currently includes General Fund for a food incentive program to improve access to Colorado-grown fresh fruits and vegetables for low-income individuals. This section is a combined personal services and operating line in the Long Bill.

*STATUTORY AUTHORITY:* Section 25-1.5-105 (1), C.R.S.

*REQUEST:* The Department requests an appropriation of \$7,635,498 total funds, including \$829,371 General Fund and 38.8 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, CHRONIC DISEASE PROGRAMS, CHRONIC DISEASE AND CANCER PREVENTION GRANTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 APPROPRIATION</b>						
SB 23-214 (Long Bill)	\$7,624,195	\$818,068	\$0	\$0	\$6,806,127	38.8
Other legislation	\$250,000	\$250,000	\$0	\$0	\$0	0.0
<b>TOTAL</b>	<b>\$7,874,195</b>	<b>\$1,068,068</b>	<b>\$0</b>	<b>\$0</b>	<b>\$6,806,127</b>	<b>38.8</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$7,874,195	\$1,068,068	\$0	\$0	\$6,806,127	38.8
Annualize prior year budget actions	11,303	11,303	0	0	0	0.0
Annualize prior year legislation	(250,000)	(250,000)	0	0	0	0.0
<b>TOTAL</b>	<b>\$7,635,498</b>	<b>\$829,371</b>	<b>\$0</b>	<b>\$0</b>	<b>\$6,806,127</b>	<b>38.8</b>
<b>INCREASE/(DECREASE)</b>						
Percentage Change	(3.0%)	(22.3%)	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>						
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### BREAST AND CERVICAL CANCER SCREENING

There are two parts to the Breast and Cervical Cancer Program:

- The screening program with this Department, which provides free breast and cervical cancer screenings through the Women's Wellness Connection run by this Department; and

- The treatment program run by the Department of Health Care Policy and Financing for women who are screen and found to have breast or cervical cancer

The Women's Wellness Connection provides free breast and cervical cancer screening and diagnostic services to low income (less than 250.0 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. Local community coordinators, coalition volunteers, and outreach workers provide education to women about the importance of regular screening and early detection of breast and cervical cancer. The program also conducts education and recruitment activities for eligible health professionals.

*STATUTORY AUTHORITY:* Sections 25-4-1501 through 1505, C.R.S.

*REQUEST:* The Department requests an appropriation of \$6,483,557 total funds and 7.2 FTE, of which, \$3,829,657 is a cash fund appropriation from the Tobacco Tax Cash Fund.

*RECOMMENDATION:* **Staff recommendation is detailed in the table below.** The recommendation includes approved tobacco related adjustments.

PREVENTION SERVICES DIVISION, CHRONIC DISEASE PROGRAMS, BREAST AND CERVICAL CANCER SCREENING						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$6,442,412	\$0	\$3,788,512	\$0	\$2,653,900	7.2
<b>TOTAL</b>	<b>\$6,442,412</b>	<b>\$0</b>	<b>\$3,788,512</b>	<b>\$0</b>	<b>\$2,653,900</b>	<b>7.2</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$6,442,412	\$0	\$3,788,512	\$0	\$2,653,900	7.2
Annualize prior year budget actions	41,145	0	41,145	0	0	0.0
MSA, A35, Prop EE tobacco adjustments	(589,199)	0	(589,199)	0	0	0.0
<b>TOTAL</b>	<b>\$5,894,358</b>	<b>\$0</b>	<b>\$3,240,458</b>	<b>\$0</b>	<b>\$2,653,900</b>	<b>7.2</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$548,054)</b>	<b>\$0</b>	<b>(\$548,054)</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(8.5%)	0.0%	(14.5%)	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$6,483,557</b>	<b>\$0</b>	<b>\$3,829,657</b>	<b>\$0</b>	<b>\$2,653,900</b>	<b>7.2</b>
Request Above/(Below) Recommendation	\$589,199	\$0	\$589,199	\$0	\$0	0.0

## CANCER, CARDIOVASCULAR DISEASE, AND CHRONIC PULMONARY DISEASE PROGRAM ADMINISTRATION

This line item was added to the FY 2010-11 Long Bill, and funds the personnel and operating expenses of the Cancer, Cardiovascular Disease, and Chronic Pulmonary Disease Program (CCPD Program). This line item is funded by Amendment 35 revenues credited to the Prevention, Early Detection and Treatment Cash Fund. Pursuant to Section 25-20.5-306 (1), C.R.S. administrative expenses funded by Amendment 35 revenues for this program are capped at 5.0 percent of funds appropriate for the grants and administrative costs.

*STATUTORY AUTHORITY:* Section 24-22-117, (2)(d)(I), C.R.S.

*REQUEST:* The Department requests an appropriation of \$670,122 cash funds and 6.7 FTE.

*RECOMMENDATION:* **Staff recommendation is detailed in the table below.** The recommendation includes approved tobacco related adjustments.

PREVENTION SERVICES DIVISION, CHRONIC DISEASE PROGRAMS, CANCER, CARDIOVASCULAR DISEASE, AND CHRONIC PULMONARY DISEASE PROGRAM ADMINISTRATION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$641,060	\$0	\$641,060	\$0	\$0	6.7
<b>TOTAL</b>	<b>\$641,060</b>	<b>\$0</b>	<b>\$641,060</b>	<b>\$0</b>	<b>\$0</b>	<b>6.7</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$641,060	\$0	\$641,060	\$0	\$0	6.7
Annualize prior year budget actions	29,062	0	29,062	0	0	0.0
<b>TOTAL</b>	<b>\$670,122</b>	<b>\$0</b>	<b>\$670,122</b>	<b>\$0</b>	<b>\$0</b>	<b>6.7</b>
<b>INCREASE/(DECREASE)</b>	<b>\$29,062</b>	<b>\$0</b>	<b>\$29,062</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	4.5%	0.0%	4.5%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$670,122</b>	<b>\$0</b>	<b>\$670,122</b>	<b>\$0</b>	<b>\$0</b>	<b>6.7</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

#### CANCER, CARDIOVASCULAR DISEASE, AND PULMONARY DISEASE GRANTS

This line item funds competitive grants for activities and programs that work to provide a cohesive approach to the treatment of cancer, cardiovascular disease, and pulmonary disease. The grants are funded with revenue from the Amendment 35 tobacco tax pursuant to Section 25-20.5-302 (1), C.R.S.

*STATUTORY AUTHORITY:* Section 24-22-117 (2) (d) (I) and 25-20.5-301 through 306, C.R.S.

*REQUEST:* The Department requests an appropriation of \$18,284,001 cash funds.

*RECOMMENDATION:* **Staff recommendation is detailed in the table below.** The recommendation includes approved tobacco related adjustments.

PREVENTION SERVICES DIVISION, CHRONIC DISEASE PROGRAMS, CANCER, CARDIOVASCULAR DISEASE, AND CHRONIC PULMONARY DISEASE GRANTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$18,306,101	\$0	\$18,306,101	\$0	\$0	0.0
<b>TOTAL</b>	<b>\$18,306,101</b>	<b>\$0</b>	<b>\$18,306,101</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$18,306,101	\$0	\$18,306,101	\$0	\$0	0.0
MSA, A35, Prop EE tobacco adjustments	(3,040,948)	0	(3,040,948)	0	0	0.0
Annualize prior year budget actions	(22,100)	0	(22,100)	0	0	0.0
<b>TOTAL</b>	<b>\$15,243,053</b>	<b>\$0</b>	<b>\$15,243,053</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$3,063,048)</b>	<b>\$0</b>	<b>(\$3,063,048)</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>

PREVENTION SERVICES DIVISION, CHRONIC DISEASE PROGRAMS, CANCER, CARDIOVASCULAR DISEASE, AND CHRONIC PULMONARY DISEASE GRANTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
Percentage Change	(16.7%)	0.0%	(16.7%)	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$18,284,001</b>	<b>\$0</b>	<b>\$18,284,001</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$3,040,948	\$0	\$3,040,948	\$0	\$0	0.0

#### TOBACCO EDUCATION, PREVENTION, AND CESSATION PROGRAM ADMINISTRATION

This line item funds the personnel and operating expenses of the State Tobacco Education, Prevention, and Cessation Program. This line item is funded by Amendment 35 revenues credited to the Tobacco Education Programs Fund. Pursuant to Section 25-3.5-808, C.R.S. administrative expenses funded by Amendment 35 revenues for this program are capped at 5.0 percent of total funds available for the grants and administrative costs.

*STATUTORY AUTHORITY:* Section 24-22-117 (2) (c) (I), and 25-3.5-801 through 809, C.R.S.

*REQUEST:* The Department requests an appropriation of \$1,328,895 cash funds and 12.9 FTE.

*RECOMMENDATION:* **Staff recommendation is detailed in the table below.** The recommendation includes approved tobacco related adjustments.

PREVENTION SERVICES DIVISION, CHRONIC DISEASE PROGRAMS, TOBACCO EDUCATION, PREVENTION, AND CESSATION PROGRAM ADMINISTRATION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 APPROPRIATION</b>						
SB 23-214 (Long Bill)	\$619,502	\$0	\$619,502	\$0	\$0	6.9
<b>TOTAL</b>	<b>\$619,502</b>	<b>\$0</b>	<b>\$619,502</b>	<b>\$0</b>	<b>\$0</b>	<b>6.9</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$619,502	\$0	\$619,502	\$0	\$0	6.9
Annualize prior year legislation	650,000	0	650,000	0	0	6.0
Annualize prior year budget actions	59,393	0	59,393	0	0	0.0
<b>TOTAL</b>	<b>\$1,328,895</b>	<b>\$0</b>	<b>\$1,328,895</b>	<b>\$0</b>	<b>\$0</b>	<b>12.9</b>
<b>INCREASE/(DECREASE)</b>	<b>\$709,393</b>	<b>\$0</b>	<b>\$709,393</b>	<b>\$0</b>	<b>\$0</b>	<b>6.0</b>
Percentage Change	114.5%	0.0%	114.5%	0.0%	0.0%	87.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$1,328,895</b>	<b>\$0</b>	<b>\$1,328,895</b>	<b>\$0</b>	<b>\$0</b>	<b>12.9</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

#### TOBACCO EDUCATION, PREVENTION, AND CESSATION GRANTS

The following three grant programs are funded through this line item:

- The State Tobacco Education and Prevention Program (STEPP) which based on decisions of the Tobacco Education, Prevention, and Cessation Review Committee, awards grants to programs aimed at reducing the use of tobacco by youth, promoting cessation among youth and adults who already use tobacco, and reducing exposure to second-hand smoke. Funding for grants is from the Tobacco Education Program Fund which revenues 16.0 percent of Amendment 35 revenues.

- The Tobacco Education, Prevention, and Cessation Program which awards grants to governmental and non-governmental agencies, and as required by Section 25-3.5-805, C.R.S., at least 15.0 percent of these grants are used for the reduction of health disparities among minority and high risk populations, and up to 15.0 percent of the grants go to Tony Grampsas Youth Services Program grantees. Funding for these grants is from the Tobacco Education Program Fund.
- The component of the Colorado QuitLine which provides services to Medicaid eligible clients. Funding for this component is provided as Medicaid reappropriated funds. House Bill 12-1202 allowed for the appropriation of Tobacco Education Programs Fund money to the Department of Health Care Policy and Financing. Federal matching funds are then drawn and reappropriated to the Department of Public Health and Environment for Colorado QuitLine Program services provided to Medicaid eligible individuals.

*STATUTORY AUTHORITY:* Section 24-22-117 (2) (c) (I), and 25-3.5-801 through 809, C.R.S.

*REQUEST:* The Department requests an appropriation of \$42,239,072 total funds, including \$40,953,346 cash funds and \$1,285,726 Medicaid reappropriated funds.

*RECOMMENDATION:* **Staff recommendation is detailed in the table below.** The recommendation includes approved tobacco related adjustments.

PREVENTION SERVICES DIVISION, CHRONIC DISEASE PROGRAMS, TOBACCO EDUCATION, PREVENTION, AND CESSATION GRANTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$23,071,737	\$0	\$21,786,011	\$1,285,726	\$0	0.0
<b>TOTAL</b>	<b>\$23,071,737</b>	<b>\$0</b>	<b>\$21,786,011</b>	<b>\$1,285,726</b>	<b>\$0</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$23,071,737	\$0	\$21,786,011	\$1,285,726	\$0	0.0
Annualize prior year legislation	19,220,000	0	19,220,000	0	0	0.0
MSA, A35, Prop EE tobacco adjustments	(3,636,648)	0	(3,636,648)	0	0	0.0
Annualize prior year budget actions	(52,665)	0	(52,665)	0	0	0.0
<b>TOTAL</b>	<b>\$38,602,424</b>	<b>\$0</b>	<b>\$37,316,698</b>	<b>\$1,285,726</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>\$15,530,687</b>	<b>\$0</b>	<b>\$15,530,687</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	67.3%	0.0%	71.3%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$42,239,072</b>	<b>\$0</b>	<b>\$40,953,346</b>	<b>\$1,285,726</b>	<b>\$0</b>	<b>0.0</b>
Request Above/(Below) Recommendation	\$3,636,648	\$0	\$3,636,648	\$0	\$0	0.0

## ORAL HEALTH PROGRAMS

This line item funds the costs of the following two Oral Health Programs which work to increase the availability of oral health services in Colorado:

- The Dental Loan Repayment Program is available to dentists and dental hygienists who agree to serve for two years in medically underserved populations in rural or urban settings, and receives \$200,000 from tobacco settlement dollars. Dentists are eligible for up to \$25,000 in loan repayment funds and dental hygienists are eligible for up to \$6,000 in loan repayment funds.

- The Dental House Calls Program is run by the Dental Lifeline Network, and provides dental services to homebound elderly and handicapped; and
- Senate Bill 14-180 (Transfer Senior Dental Program to HCPF) transferred the Dental Assistance Program on July 1, 2016 to the Department of Health Care Policy and Financing. For informational purposes the Dental Assistance Program provides grants to dental providers for services to individuals who are 60 years or older, and eligible for the Old Age Pension program or Medicaid, but not receiving long-term care services through Medicaid. The General Assembly passed H.B. 12-1326 which appropriated General Fund to the Department to reinstate the Dental Assistance Program in FY 2012-13.

*STATUTORY AUTHORITY:* Sections 25-21 101 and 104, 25-21-108, C.R.S.

*REQUEST:* The Department requests an appropriation of \$2,595,092 total funds, including \$806,164 General Fund and 4.1 FTE.

*RECOMMENDATION:* **Staff recommendation is detailed in the table below.** The recommendation includes approved tobacco related adjustments.

PREVENTION SERVICES DIVISION, CHRONIC DISEASE PROGRAMS, ORAL HEALTH PROGRAMS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$2,574,314	\$795,177	\$901,537	\$0	\$877,600	4.1
<b>TOTAL</b>	<b>\$2,574,314</b>	<b>\$795,177</b>	<b>\$901,537</b>	<b>\$0</b>	<b>\$877,600</b>	<b>4.1</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$2,574,314	\$795,177	\$901,537	\$0	\$877,600	4.1
Annualize prior year budget actions	20,778	10,987	9,791	0	0	0.0
MSA, A35, Prop EE tobacco adjustments	(34,751)	0	(34,751)	0	0	0.0
<b>TOTAL</b>	<b>\$2,560,341</b>	<b>\$806,164</b>	<b>\$876,577</b>	<b>\$0</b>	<b>\$877,600</b>	<b>4.1</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$13,973)</b>	<b>\$10,987</b>	<b>(\$24,960)</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(0.5%)	1.4%	(2.8%)	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$2,595,092</b>	<b>\$806,164</b>	<b>\$911,328</b>	<b>\$0</b>	<b>\$877,600</b>	<b>4.1</b>
Request Above/(Below) Recommendation	\$34,751	\$0	\$34,751	\$0	\$0	(0.0)

## MARIJUANA EDUCATION CAMPAIGN

This line item funds the marijuana education and prevention campaigns authorized by S.B. 14-215 (Disposition of Legal Marijuana Related Revenue). The campaign will primarily use television ads to prevent the use of marijuana, provide five regional training for community providers to implement youth develop strategies, coordinate with the Department of Revenue on messages to retailers, tourists and users, and create educational materials.

*STATUTORY AUTHORITY:* Section 25-3.5-1001, C.R.S.

*REQUEST:* The Department requests an appropriation of \$976,202 cash funds from the Marijuana Tax Cash Fund and 2.0 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, CHRONIC DISEASE PROGRAMS, MARIJUANA EDUCATION CAMPAIGN						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$965,714	\$0	\$965,714	\$0	\$0	2.0
<b>TOTAL</b>	<b>\$965,714</b>	<b>\$0</b>	<b>\$965,714</b>	<b>\$0</b>	<b>\$0</b>	<b>2.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$965,714	\$0	\$965,714	\$0	\$0	2.0
Annualize prior year budget actions	10,488	0	10,488	0	0	0.0
<b>TOTAL</b>	<b>\$976,202</b>	<b>\$0</b>	<b>\$976,202</b>	<b>\$0</b>	<b>\$0</b>	<b>2.0</b>
<b>INCREASE/(DECREASE)</b>	<b>\$10,488</b>	<b>\$0</b>	<b>\$10,488</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	1.1%	0.0%	1.1%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$976,202</b>	<b>\$0</b>	<b>\$976,202</b>	<b>\$0</b>	<b>\$0</b>	<b>2.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

#### COMMUNITY HEALTH WORKERS INITIATIVE

This line item, created by S.B. 23-002 (Medicaid Reimbursement for Community Health Services), provides staff and funding to maintain a registry of community health workers available to provide services in Colorado.

*STATUTORY AUTHORITY:* Section 25.5-5-334, C.R.S.

*REQUEST:* The Department requests an appropriation of \$166,633 General Fund and 2.0 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, CHRONIC DISEASE PROGRAMS, COMMUNITY HEALTH WORKERS INITIATIVE						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
Other legislation	\$169,973	\$169,973	\$0	\$0	\$0	2.0
<b>TOTAL</b>	<b>\$169,973</b>	<b>\$169,973</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$169,973	\$169,973	\$0	\$0	\$0	2.0
Annualize prior year legislation	(3,340)	(3,340)	0	0	0	0.0
<b>TOTAL</b>	<b>\$166,633</b>	<b>\$166,633</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$3,340)</b>	<b>(\$3,340)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(2.0%)	(2.0%)	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$166,633</b>	<b>\$166,633</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0



## REGIONAL HEALTH CONNECTOR PROGRAM

This line item, created by H.B. 23-1244 (Regional Health Connector Program), provides staff and funding to support the transfer of the Regional Health Connector Program from the Department of Education to CDPHE. The program's goal is to connect Colorado citizens with various health resources including primary care, public health, social services, and other community resources.

*STATUTORY AUTHORITY:* Section 25-20.5-2001, C.R.S.

*REQUEST:* The Department requests an appropriation of \$1,578,316 General Fund and 1.0 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, CHRONIC DISEASE PROGRAMS, REGIONAL HEALTH CONNECTOR PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
Other legislation	\$71,903	\$71,903	\$0	\$0	\$0	0.9
<b>TOTAL</b>	<b>\$71,903</b>	<b>\$71,903</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.9</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$71,903	\$71,903	\$0	\$0	\$0	0.9
Annualize prior year legislation	1,506,413	1,506,413	0	0	0	0.1
<b>TOTAL</b>	<b>\$1,578,316</b>	<b>\$1,578,316</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>1.0</b>
<b>INCREASE/(DECREASE)</b>						
<b>INCREASE/(DECREASE)</b>	<b>\$1,506,413</b>	<b>\$1,506,413</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.1</b>
Percentage Change	2,095.1%	2,095.1%	0.0%	0.0%	0.0%	11.1%
<b>FY 2024-25 EXECUTIVE REQUEST</b>						
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$1,578,316</b>	<b>\$1,578,316</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>1.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## (C) PRIMARY CARE OFFICE

### PRIMARY CARE OFFICE

This line item funds the personnel and operating expenses of the Primary Care Office, 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. Health Professional Shortage Areas (HPSAs) are designations that indicate health care provider shortages in primary care, dental health, or mental health. These shortages may be geographic, population, or facility based.

- A shortage of providers for the entire population within a defined geographic area.
- A shortage of providers for a specific population group(s) within a defined geographic area (e.g., low income, migrant farmworkers, and other groups)
- Facilities which includes:
  - Other Facility - public or non-profit private medical facilities serving a population or geographic area designated as a HPSA with a shortage of health providers.
  - Correctional Facility - medium to maximum security federal and state correctional institutions and youth detention facilities with a shortage of health providers.
  - State Mental Hospitals - state or county hospitals with a shortage of psychiatric professionals (mental health designations only).

- Automatic Facility HPSAs - a facility that is automatically designated as a HPSA by statute or through regulation without having to apply for a designation.

*STATUTORY AUTHORITY:* Sections 25-21 101, 104, and 108, C.R.S.

*REQUEST:* The Department requests an appropriation of \$11,198,139 total funds, including \$2,660,772 General Fund, and 6.6 FTE.

*RECOMMENDATION:* **Staff recommendation is detailed below.** The recommendation includes adjustments for approved allocation of Tobacco Master Settlement Agreement revenue.

PREVENTION SERVICES DIVISION, PRIMARY CARE OFFICE, PRIMARY CARE OFFICE						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$11,082,277	\$2,624,509	\$7,329,268	\$0	\$1,128,500	6.6
<b>TOTAL</b>	<b>\$11,082,277</b>	<b>\$2,624,509</b>	<b>\$7,329,268</b>	<b>\$0</b>	<b>\$1,128,500</b>	<b>6.6</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$11,082,277	\$2,624,509	\$7,329,268	\$0	\$1,128,500	6.6
Annualize prior year budget actions	115,862	36,263	79,599	0	0	0.0
MSA, A35, Prop EE tobacco adjustments	83,356	0	83,356	0	0	0.0
<b>TOTAL</b>	<b>\$11,281,495</b>	<b>\$2,660,772</b>	<b>\$7,492,223</b>	<b>\$0</b>	<b>\$1,128,500</b>	<b>6.6</b>
<b>INCREASE/(DECREASE)</b>	<b>\$199,218</b>	<b>\$36,263</b>	<b>\$162,955</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	1.8%	1.4%	2.2%	0.0%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	(\$83,356)	\$0	(\$83,356)	\$0	\$0	(0.0)

## TRANSFER TO THE HEALTH CORPS SERVICE FUND

This line item was added by SB 21-158 and transfers \$400,000 to the Health Service Corps Fund.

*STATUTORY AUTHORITY:* Sections 25-1.5-506

*REQUEST:* The Department requests an appropriation of \$400,000 General Fund which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

## (D) FAMILY AND COMMUNITY HEALTH

### (1) Women's Health

#### FAMILY PLANNING PROGRAM ADMINISTRATION

This line item funds the personnel and operating expenses associated with the administration of the Family Planning Program, the Prenatal Program, and the Prenatal Plus Program. The Family Planning Program provides a range of preventive health services for approximately 55,000 teens and women whose income is at or below 185.0 percent of the federal poverty level each year. Services include physical examinations, pregnancy testing, screening for sexually transmitted infections, counseling and

education, and referrals to other health and social services. The federal Title X dollars fund contracts between the Division, local family providers, and local health facilities and non-profit clinics, who are often the primary health care provider for non-Medicaid eligible, low income women. Neither Title X nor General Fund dollars support abortion activities, per federal Title X requirements and per the state constitution. Note that Title X is not an entitlement program and does not have associated match or maintenance of effort requirements, but does require a cost share from the state.

The Prenatal Program encourages Medicaid-eligible, high risk pregnant women to utilize early prenatal care to reduce the risk of maternal and newborn illness or complications. The goal of this program is to assist eligible women have healthy babies and have access to postpartum family planning services. The Prenatal Plus Program 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.

*STATUTORY AUTHORITY:* Sections 25-1-107, 25-1-212, and 25-6-101 through 206, C.R.S.

*REQUEST:* The Department requests an appropriation of \$1,593,407 total funds, including \$409,337 General Fund, and 9.9 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, FAMILY PLANNING PROGRAM ADMINISTRATION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$1,587,828	\$403,758	\$0	\$0	\$1,184,070	9.9
Other legislation	\$200,000	\$200,000	\$0	\$0	\$0	0.0
<b>TOTAL</b>	<b>\$1,787,828</b>	<b>\$603,758</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,184,070</b>	<b>9.9</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,787,828	\$603,758	\$0	\$0	\$1,184,070	9.9
Annualize prior year budget actions	5,579	5,579	0	0	0	0.0
R11a FPP technical adjustments	0	0	0	0	0	0.0
Annualize prior year legislation	(200,000)	(200,000)	0	0	0	0.0
<b>TOTAL</b>	<b>\$1,593,407</b>	<b>\$409,337</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,184,070</b>	<b>9.9</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$194,421)</b>	<b>(\$194,421)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(10.9%)	(32.2%)	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$1,593,407</b>	<b>\$409,337</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,184,070</b>	<b>9.9</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## FAMILY PLANNING PURCHASE OF SERVICES

This line item funds the dollars provided to clinics which provide family planning services.

*STATUTORY AUTHORITY:* Sections 25-1-107, 25-1-212, and 25-6-101 through 206, C.R.S.

*REQUEST:* The Department requests an appropriation of \$8,348,361 total funds, including \$4,759,461 is General Fund.

**RECOMMENDATION:** Staff recommends approval of the request. Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, FAMILY PLANNING PURCHASE OF SERVICES						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$8,848,361	\$5,259,461	\$0	\$0	\$3,588,900	0.0
<b>TOTAL</b>	<b>\$8,848,361</b>	<b>\$5,259,461</b>	<b>\$0</b>	<b>\$0</b>	<b>\$3,588,900</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$8,848,361	\$5,259,461	\$0	\$0	\$3,588,900	0.0
R11a FPP technical adjustments	0	0	0	0	0	0.0
Annualize prior year budget actions	(500,000)	(500,000)	0	0	0	0.0
<b>TOTAL</b>	<b>\$8,348,361</b>	<b>\$4,759,461</b>	<b>\$0</b>	<b>\$0</b>	<b>\$3,588,900</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$500,000)</b>	<b>(\$500,000)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(5.7%)	(9.5%)	0.0%	0.0%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

#### FAMILY PLANNING FEDERAL GRANTS

This line item reflects for informational purposes, federal grants awarded to the Department for family planning programs and activities.

**STATUTORY AUTHORITY:** Sections 25-1-107, 25-1-212, and 25-6-101 through 206, C.R.S.

**REQUEST:** The Department requests an appropriation of \$184,300 federal funds and 2.0 FTE which reflects a continuation level of funding.

**RECOMMENDATION:** Staff recommends approval of the continuation appropriation request.

#### MATERNAL AND CHILD HEALTH ADMINISTRATION

This line item funds the personnel and operating expenses of staff responsible for coordination of maternal and child health programs and services. The office is funded primarily through federal funds provided by the Maternal and Child Health Grant.

**STATUTORY AUTHORITY:** Section 25-1-107, C.R.S.

**REQUEST:** The Department requests an appropriation of \$6,873,772 total funds, including \$272,263 General Fund and 14.5 FTE.

**RECOMMENDATION:** Staff recommendation is detailed below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, MATERNAL AND CHILD HEALTH						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, MATERNAL AND CHILD HEALTH						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
SB 23-214 (Long Bill)	\$6,850,939	\$268,552	\$1,760,687	\$0	\$4,821,700	14.5
<b>TOTAL</b>	<b>\$6,850,939</b>	<b>\$268,552</b>	<b>\$1,760,687</b>	<b>\$0</b>	<b>\$4,821,700</b>	<b>14.5</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$6,850,939	\$268,552	\$1,760,687	\$0	\$4,821,700	14.5
Annualize prior year budget actions	22,833	3,711	19,122	0	0	0.0
Annualize prior year legislation	(1,738,616)	0	(1,738,616)	0	0	(2.3)
<b>TOTAL</b>	<b>\$5,135,156</b>	<b>\$272,263</b>	<b>\$41,193</b>	<b>\$0</b>	<b>\$4,821,700</b>	<b>12.2</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$1,715,783)</b>	<b>\$3,711</b>	<b>(\$1,719,494)</b>	<b>\$0</b>	<b>\$0</b>	<b>(2.3)</b>
Percentage Change	(25.0%)	1.4%	(97.7%)	0.0%	0.0%	(15.9%)
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$5,135,156</b>	<b>\$272,263</b>	<b>\$41,193</b>	<b>\$0</b>	<b>\$4,821,700</b>	<b>12.2</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### DISORDERED EATING PREVENTION PROGRAM

This line item funds the resources and staff associated with the disordered eating prevention and research grant programs created in S.B. 23-214 (Disordered Eating Prevention). Statute directs the Department to create a resource bank for research, intervention methods, treatment resources, crisis services, awareness programs, and educational resources regarding disordered eating prevention and care. The bill also created the Disordered Eating Prevention Research Grant Program to provide financial assistance for research related to risk factors, impacts, and root causes of disordered eating. The grant program repeals July 1, 2027. CDPHE is authorized to seek, accept, and expend gifts, grants, or donations from private or public sources, and must report annually beginning November 1, 2025 on recommendations and information regarding disordered eating prevention.

*STATUTORY AUTHORITY:* Section 25-20.5-2103 (1) C.R.S.

*REQUEST:* The Department requests an appropriation of \$91,398 General Fund and 1.0 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, DISORDERED EATING PREVENTION PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
Other legislation	\$26,679	\$26,679	\$0	\$0	\$0	0.2
<b>TOTAL</b>	<b>\$26,679</b>	<b>\$26,679</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.2</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$26,679	\$26,679	\$0	\$0	\$0	0.2
Annualize prior year legislation	64,719	64,719	0	0	0	0.8
<b>TOTAL</b>	<b>\$91,398</b>	<b>\$91,398</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>1.0</b>
<b>INCREASE/(DECREASE)</b>	<b>\$64,719</b>	<b>\$64,719</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.8</b>
Percentage Change	242.6%	242.6%	0.0%	0.0%	0.0%	400.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$91,398</b>	<b>\$91,398</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>1.0</b>

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, DISORDERED EATING PREVENTION PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	(0.0)

*(2) Children and Youth Health*

**HEALTHY KIDS COLORADO SURVEY**

This line item was added by S.B. 14-215 (Disposition of Leal Marijuana Revenues) to fund the administration of the Healthy Kids Colorado Survey which is the state's unified adolescent health data collection system and is a partnership between the Departments of Education, Human Services, and Public Health and Environment. The primary use of Healthy Kids Colorado Survey data is to identify trends and enhance school-, community- and state -based programs that improve the health and well-being of young people. The Department contracts with the University of Colorado to conduct recruitment and data collection and to analyze and report on the data at the district and school level. Staff funded in this line are responsible for analyzing and reporting on the survey at the state and health statistics region levels. The next survey will be administered in the fall of 2017.

*STATUTORY AUTHORITY:* Section 25.5-1-206, C.R.S.

*REQUEST:* The Department requests an appropriation of \$768,127 cash funds from the Marijuana Tax Cash Fund and 1.5 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, HEALTHY KIDS COLORADO SURVEY						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 APPROPRIATION</b>						
SB 23-214 (Long Bill)	\$759,874	\$0	\$759,874	\$0	\$0	1.5
<b>TOTAL</b>	<b>\$759,874</b>	<b>\$0</b>	<b>\$759,874</b>	<b>\$0</b>	<b>\$0</b>	<b>1.5</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$759,874	\$0	\$759,874	\$0	\$0	1.5
Annualize prior year budget actions	8,253	0	8,253	0	0	0.0
<b>TOTAL</b>	<b>\$768,127</b>	<b>\$0</b>	<b>\$768,127</b>	<b>\$0</b>	<b>\$0</b>	<b>1.5</b>
<b>INCREASE/(DECREASE)</b>	<b>\$8,253</b>	<b>\$0</b>	<b>\$8,253</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	1.1%	0.0%	1.1%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$768,127</b>	<b>\$0</b>	<b>\$768,127</b>	<b>\$0</b>	<b>\$0</b>	<b>1.5</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

**HEALTH CARE PROGRAM FOR CHILDREN WITH SPECIAL NEEDS**

This line item funds the personnel and operating expenses of the Health Care Program for Children with Special Needs. The Program is responsible for developing a network of potential services for children with special health care needs. The Program receives federal Maternal and Child Health Block Grant dollars, which have a maintenance of effort requirement that is met with General Fund dollars. Clients are assessed fees on a sliding scale based on income and are the source of cash funds, and

reappropriated funds are from the Department of Human Services for Traumatic Brain Injury services.

*STATUTORY AUTHORITY:* Sections 25-1-107, 25-4- 1004.7, and 26-4-105, C.R.S.

*REQUEST:* The Department requests an appropriation of \$1,220,516 total funds, including \$764,416 General Fund, and 14.4 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, HEALTH CARE PROGRAM FOR CHILDREN WITH SPECIAL NEEDS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$1,210,098	\$753,998	\$0	\$0	\$456,100	14.4
<b>TOTAL</b>	<b>\$1,210,098</b>	<b>\$753,998</b>	<b>\$0</b>	<b>\$0</b>	<b>\$456,100</b>	<b>14.4</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,210,098	\$753,998	\$0	\$0	\$456,100	14.4
Annualize prior year budget actions	10,418	10,418	0	0	0	0.0
<b>TOTAL</b>	<b>\$1,220,516</b>	<b>\$764,416</b>	<b>\$0</b>	<b>\$0</b>	<b>\$456,100</b>	<b>14.4</b>
<b>INCREASE/(DECREASE)</b>	<b>\$10,418</b>	<b>\$10,418</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	0.9%	1.4%	0.0%	0.0%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	(0.0)

## HEALTH CARE PROGRAM FOR CHILDREN WITH SPECIAL NEEDS PURCHASE OF SERVICES

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

*STATUTORY AUTHORITY:* Sections 25-1-107, 25-4- 1004.7, and 26-4-105, C.R.S.

*REQUEST:* The Department requests an appropriation of \$3,075,399 total funds, including \$1,847,899 General Fund, which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

## GENETICS COUNSELING PROGRAM COSTS

This line item funds the personnel and operating expenses of the Genetics Counseling Program and funds contracts with providers who offer genetics counseling services to families. The Program contracts with the University of Colorado Health Sciences Center to provide examinations, diagnostic evaluations and genetic counseling services to individuals and families with newborns who are at risk of having genetic disorders, or whose newborns have been identified through newborn screening tests of possibility having a genetic disorder. Three to 5.0 percent of newborns have a clinically significant health problem evident at birth or a congenital disease that is detectable by screening blood tests taken from newborns in the first few days of life, and without early detection these diseases can result in

death or serious disability. The genetic screening follow-up coordinator assures follow-up of screening results to connect families with diagnosis and treatment services.

*STATUTORY AUTHORITY:* Sections 25-1-107, 25-4- 1004.7, and 26-4-105, C.R.S.

*REQUEST:* The Department requests an appropriation of \$1,873,641 cash funds and 1.0 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, GENETICS COUNSELING PROGRAM COSTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$1,853,511	\$0	\$1,853,511	\$0	\$0	1.0
<b>TOTAL</b>	<b>\$1,853,511</b>	<b>\$0</b>	<b>\$1,853,511</b>	<b>\$0</b>	<b>\$0</b>	<b>1.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,853,511	\$0	\$1,853,511	\$0	\$0	1.0
Annualize prior year budget actions	20,130	0	20,130	0	0	0.0
<b>TOTAL</b>	<b>\$1,873,641</b>	<b>\$0</b>	<b>\$1,873,641</b>	<b>\$0</b>	<b>\$0</b>	<b>1.0</b>
<b>INCREASE / (DECREASE)</b>	<b>\$20,130</b>	<b>\$0</b>	<b>\$20,130</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	1.1%	0.0%	1.1%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$1,873,641</b>	<b>\$0</b>	<b>\$1,873,641</b>	<b>\$0</b>	<b>\$0</b>	<b>1.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## CHILD FATALITY PREVENTION

This line item was added by S.B. 13-255 (Child Fatality Review Teams) to fund: case specific reviews of child fatalities, if not performed by a local review team; the monitoring of trends in child fatalities and conducting a systemic review of child welfare issues; coordination with the Department of Human Services (DHS) concerning the DHS child fatality review process for fatalities involving child abuse and neglect; distribution of funding to local public health agencies for reviewing child fatalities at the local level; and the provision of technical assistance and training to local review teams.

*STATUTORY AUTHORITY:* Sections 25-1-506, 25-20.5-402 through 404, C.R.S.

*REQUEST:* The Department requests an appropriation of \$607,993 General Fund and 2.9 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, CHILD FATALITY PREVENTION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$599,707	\$599,707	\$0	\$0	\$0	2.9
<b>TOTAL</b>	<b>\$599,707</b>	<b>\$599,707</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.9</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$599,707	\$599,707	\$0	\$0	\$0	2.9



PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, CHILD FATALITY PREVENTION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
Annualize prior year budget actions	8,286	8,286	0	0	0	0.0
<b>TOTAL</b>	<b>\$607,993</b>	<b>\$607,993</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.9</b>
<b>INCREASE / (DECREASE)</b>	<b>\$8,286</b>	<b>\$8,286</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	1.4%	1.4%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$607,993</b>	<b>\$607,993</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.9</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## SCHOOL-BASED HEALTH CENTERS

This line item funds grants to school-based health centers (SBHCs) and the associated department administrative costs. House Bill 06-1396 created the School-Based Health Centers Grant Program to provide state support of school-based health centers. SBHCs provide medical and behavioral care to school child during the school day, and are run by the school districts in cooperation with other health service providers such as hospitals, medical providers, and community health centers.

*STATUTORY AUTHORITY:* Sections 25-20.5-501 through 503, C.R.S.

*REQUEST:* The Department requests an appropriation of \$5,100,080 General Fund and 2.8 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, SCHOOL-BASED HEALTH CENTERS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$5,030,571	\$5,030,571	\$0	\$0	\$0	2.8
<b>TOTAL</b>	<b>\$5,030,571</b>	<b>\$5,030,571</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.8</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$5,030,571	\$5,030,571	\$0	\$0	\$0	2.8
Annualize prior year budget actions	69,509	69,509	0	0	0	0.0
<b>TOTAL</b>	<b>\$5,100,080</b>	<b>\$5,100,080</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.8</b>
<b>INCREASE / (DECREASE)</b>	<b>\$69,509</b>	<b>\$69,509</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	1.4%	1.4%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$5,100,080</b>	<b>\$5,100,080</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.8</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	(0.0)

## COMPREHENSIVE SEXUAL EDUCATION

This line item, provides funding to the Comprehensive Sexual Education Grant Program established in HB19-1032. This line distributes funds to eligible entities for comprehensive sexual education instruction.

*STATUTORY AUTHORITY:* Section 22-1-128

*REQUEST:* The Department requests an appropriation of \$1,008,001 General Fund and 1.3 FTE.

**RECOMMENDATION: Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, COMPREHENSIVE SEXUAL EDUCATION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$994,263	\$994,263	\$0	\$0	\$0	1.3
<b>TOTAL</b>	<b>\$994,263</b>	<b>\$994,263</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>1.3</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$994,263	\$994,263	\$0	\$0	\$0	1.3
Annualize prior year budget actions	13,738	13,738	0	0	0	0.0
<b>TOTAL</b>	<b>\$1,008,001</b>	<b>\$1,008,001</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>1.3</b>
<b>INCREASE / (DECREASE)</b>	<b>\$13,738</b>	<b>\$13,738</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	1.4%	1.4%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$1,008,001</b>	<b>\$1,008,001</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>1.3</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### FEDERAL GRANTS

This line item reflects federal grants received by the Division for programs and activities relating to children and youth health.

**STATUTORY AUTHORITY:** Sections 25-1-107, 25-4- 1004.7, and 26-4-105, C.R.S.

**REQUEST:** The Department requests an appropriation of \$884,604 federal funds and 7.5 FTE, which reflects a continuation level of funding.

**RECOMMENDATION: Staff recommends approval of the continuation request.**

### (3) Injury and Violence Prevention - Mental Health Promotion

#### SUICIDE PREVENTION

The Suicide Prevention Program was created by H.B. 00-1432 and is responsible for coordinating suicide prevention programs throughout the state. There are three 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. Colorado has the seventh highest rate of suicides in 2014. There were 1,058 suicides in 2015 the highest number in Colorado history.

**STATUTORY AUTHORITY:** Section 25-1-101 (1) (w), C.R.S.

**REQUEST:** The Department requests an appropriation of \$1,340,552 General Fund and 2.9 FTE.

**RECOMMENDATION: Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, SUICIDE PREVENTION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$1,396,260	\$1,396,260	\$0	\$0	\$0	2.9
<b>TOTAL</b>	<b>\$1,396,260</b>	<b>\$1,396,260</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.9</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,396,260	\$1,396,260	\$0	\$0	\$0	2.9
Annualize prior year budget actions	(55,708)	(55,708)	0	0	0	0.0
<b>TOTAL</b>	<b>\$1,340,552</b>	<b>\$1,340,552</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.9</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$55,708)</b>	<b>(\$55,708)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	(4.0%)	(4.0%)	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$1,340,552</b>	<b>\$1,340,552</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.9</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## INJURY PREVENTION

This line item funds the personnel and operating expenses of the Division's activities associated with overseeing the state injury prevention strategic plan and provides leadership and technical assistance for local communities regarding the planning, implementation, and evaluation of evidence-based prevention strategies to reduce injuries and deaths.

*STATUTORY AUTHORITY:* Section 25-20.5-406, C.R.S.

*REQUEST:* The Department requests an appropriation of \$3,679,900 federal funds and 13.4 FTE which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

## SUBSTANCE ABUSE PREVENTION PROGRAM COSTS

This line item was created in FY 2016-17 to fund the personnel and operating costs of administering grants to communities through the Communities that Care model. Grants are funded in the Substance Abuse Prevention Grants line item. Both line items are funded with cash funds from the Marijuana Tax Cash Fund. The funding in this line item supports FTE who provide coaching, training and technical assistance to local communities that have been award grants.

*STATUTORY AUTHORITY:* Section 39-28.8-501 (2) (b), C.R.S.

*REQUEST:* The Department requests an appropriation of \$473,555 cash funds from the Marijuana Tax Cash Fund and 4.5 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, SUBSTANCE ABUSE PREVENTION PROGRAM COSTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$468,467	\$0	\$468,467	\$0	\$0	4.5
<b>TOTAL</b>	<b>\$468,467</b>	<b>\$0</b>	<b>\$468,467</b>	<b>\$0</b>	<b>\$0</b>	<b>4.5</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$468,467	\$0	\$468,467	\$0	\$0	4.5
Annualize prior year budget actions	5,088	0	5,088	0	0	0.0
<b>TOTAL</b>	<b>\$473,555</b>	<b>\$0</b>	<b>\$473,555</b>	<b>\$0</b>	<b>\$0</b>	<b>4.5</b>
<b>INCREASE/(DECREASE)</b>						
Percentage Change	1.1%	0.0%	1.1%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>						
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### SUBSTANCE ABUSE PREVENTION GRANTS

This line item, created in FY 2016-17 funds the grants issued to communities through the Communities That Care model. The Communities That Care model is a community-based prevention model that was evaluated in 24 communities across seven states with significant results, including preventing youth substance use initiation and criminal behaviors. Using prevention science, this model helps local communities assess the specific risk and protective factors among the youth in their communities. The communities then pick from a menu of effective, evidence-based programs and strategies to address the specific needs of the youth they serve.

The Department is working with 20 communities that have selected substance abuse prevention as a priority on their Public Health Improvement Plans and 25 additional communities selected through a competitive bid process to implement the Communities That Care model. Grant funding is provided to communities to implement evidence-based practices that have been selected to meet the specific needs of substance abuse prevention among youth in that community.

*STATUTORY AUTHORITY:* Section 39-28.8-501 (2) (b), C.R.S.

*REQUEST:* The Department requests an appropriation of \$8,995,512 cash funds from the Marijuana Tax Cash Fund, which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

### MENTAL HEALTH FIRST AID

This line item, transferred from the Department of Human Services in FY 2018-19, provides funding for the Mental First Aid training program. The program is an 8 hour course that teaches participants how to identify signs and symptoms of a mental health challenge or crisis, what to do in an emergency, and where to go for help. The training is offered at various locations around the state through a contract with a community agency.

*STATUTORY AUTHORITY:* Section 27-66-101, et seq., C.R.S. [Community mental health services]

*REQUEST:* The Department requests an appropriation of \$210,000 General Fund, which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

#### COMMUNITY CRIME VICTIMS GRANT PROGRAM

This line item provides funding to entities that support services and other and other interventions to crime victims and their immediate families.

*STATUTORY AUTHORITY:* Section 25-20.5-801

*REQUEST:* The Department requests an appropriation of \$894,541 General Fund.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, COMMUNITY CRIME VICTIMS GRANT PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$4,882,349	\$4,882,349	\$0	\$0	\$0	0.0
HB 24-1196 (CDPHE Supplemental)	\$0	\$0	\$0	\$0	\$0	0.0
Other legislation	(3,000,000)	(4,000,000)	1,000,000	0	0	0.0
<b>TOTAL</b>	<b>\$1,882,349</b>	<b>\$882,349</b>	<b>\$1,000,000</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,882,349	\$882,349	\$1,000,000	\$0	\$0	0.0
Staff-initiated annualize HB24-1214CCV funding	250,000	0	250,000	0	0	0.0
Annualize prior year budget actions	12,192	12,192	0	0	0	0.0
<b>TOTAL</b>	<b>\$2,144,541</b>	<b>\$894,541</b>	<b>\$1,250,000</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
<b>INCREASE/(DECREASE)</b>						
	<b>\$262,192</b>	<b>\$12,192</b>	<b>\$250,000</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	13.9%	1.4%	25.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>						
Request Above/(Below) Recommendation	(\$1,250,000)	\$0	(\$1,250,000)	\$0	\$0	0.0

#### OPIATE ANTAGONIST BULK PURCHASE

This line item allows the Department to use appropriated dollars to purchase opiate antagonists, and distribute to eligible entities, as well as provide technical assistance to ensure requirements are met.

*STATUTORY AUTHORITY:* Section 25-1.5-115

*REQUEST:* The Department requests an appropriation of \$162,825 General Fund and 2.0 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, OPIATE ANTAGONIST BULK PURCHASE						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$160,606	\$160,606	\$0	\$0	\$0	2.0
<b>TOTAL</b>	<b>\$160,606</b>	<b>\$160,606</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$160,606	\$160,606	\$0	\$0	\$0	2.0
Annualize prior year budget actions	2,219	2,219	0	0	0	0.0
<b>TOTAL</b>	<b>\$162,825</b>	<b>\$162,825</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.0</b>
<b>INCREASE / (DECREASE)</b>	<b>\$2,219</b>	<b>\$2,219</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	1.4%	1.4%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$162,825</b>	<b>\$162,825</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>2.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

#### APPROPRIATION TO THE HARM REDUCTION GRANT PROGRAM CASH FUND

This line item contains funds appropriated from the General Assembly for purposes of the Harm Reduction Grant Program outline in the next section.

*STATUTORY AUTHORITY:* Section 25-20.5-1102

*REQUEST:* The Department requests an appropriation of \$1,800,000 from the Marijuana Tax Cash Fund, which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

#### HARM REDUCTION GRANT PROGRAM

This line item, provides grant funding to eligible entities as part of the Department's overdose unit. The purpose of this funding is to reduce health risks associated with drug use by improving communication, coordination, and collaboration among law enforcement agencies, local public health agencies, and community-based organizations.

*STATUTORY AUTHORITY:* Section 25-20.5-101

*REQUEST:* The Department requests an appropriation of \$1,753,235 reappropriated funds from the Harm Reduction Grant Program Cash Fund.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, HARM REDUCTION GRANT PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$1,743,860	\$0	\$0	\$1,743,860	\$0	1.9
<b>TOTAL</b>	<b>\$1,743,860</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,743,860</b>	<b>\$0</b>	<b>1.9</b>

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, HARM REDUCTION GRANT PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,743,860	\$0	\$0	\$1,743,860	\$0	1.9
Annualize prior year budget actions	9,375	0	0	9,375	0	0.0
<b>TOTAL</b>	<b>\$1,753,235</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,753,235</b>	<b>\$0</b>	<b>1.9</b>
<b>INCREASE/(DECREASE)</b>	<b>\$9,375</b>	<b>\$0</b>	<b>\$0</b>	<b>\$9,375</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	0.5%	0.0%	0.0%	0.5%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### CARE NETWORK

This line item, provides medical exams and behavioral health assessments to children who are subject to physical or sexual abuse or neglect. The Department is to contract with a nonprofit organization to act as a resource center.

*STATUTORY AUTHORITY:* Section 25-20.5-901

*REQUEST:* The Department requests an appropriation of \$926,445 General Fund and 0.4 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, CARE NETWORK						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$913,819	\$913,819	\$0	\$0	\$0	0.4
<b>TOTAL</b>	<b>\$913,819</b>	<b>\$913,819</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.4</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$913,819	\$913,819	\$0	\$0	\$0	0.4
Annualize prior year budget actions	12,626	12,626	0	0	0	0.0
<b>TOTAL</b>	<b>\$926,445</b>	<b>\$926,445</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.4</b>
<b>INCREASE/(DECREASE)</b>	<b>\$12,626</b>	<b>\$12,626</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	1.4%	1.4%	0.0%	0.0%	0.0%	0.0%
FY 2024-25 EXECUTIVE REQUEST						
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### PREVENTION PROGRAMMING

This line item reflects funding for community prevention and early intervention programs, transferred from the Department of Human Services to CDPHE via H.B. 22-1278.

*STATUTORY AUTHORITY:* Sections 25-20.5-1801, C.R.S.

*REQUEST:* The Department requests an appropriation of \$8,870,915 total funds, including \$48,776 General Fund and 11.2 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, PREVENTION PROGRAMMING						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$8,819,856	\$48,111	\$590,497	\$8,181,248	\$0	11.2
<b>TOTAL</b>	<b>\$8,819,856</b>	<b>\$48,111</b>	<b>\$590,497</b>	<b>\$8,181,248</b>	<b>\$0</b>	<b>11.2</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$8,819,856	\$48,111	\$590,497	\$8,181,248	\$0	11.2
Annualize prior year budget actions	51,059	665	6,413	43,981	0	0.0
<b>TOTAL</b>	<b>\$8,870,915</b>	<b>\$48,776</b>	<b>\$596,910</b>	<b>\$8,225,229</b>	<b>\$0</b>	<b>11.2</b>
<b>INCREASE/(DECREASE)</b>	<b>\$51,059</b>	<b>\$665</b>	<b>\$6,413</b>	<b>\$43,981</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	0.6%	1.4%	1.1%	0.5%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$8,870,915</b>	<b>\$48,776</b>	<b>\$596,910</b>	<b>\$8,225,229</b>	<b>\$0</b>	<b>11.2</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

#### GRANT PRIORITIZATION TASK FORCE

This line item, created by HB 23-1223, creates a task force within the Department to establish shared goals, objectives, and guidelines for governmental agencies and community-based agencies to reduce youth violence, suicide, and delinquency risk for target communities.

*STATUTORY AUTHORITY:* Sections 25-1-107 (f) (1) and 24-22-117, C.R.S.

*REQUEST:* The Department requests an appropriation of \$146,604 General Fund and 1.0 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, GRANT PRIORITIZATION TASK FORCE						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
Annualize prior year legislation	\$54,157	\$54,157	\$0	\$0	\$0	0.0
<b>TOTAL</b>	<b>\$54,157</b>	<b>\$54,157</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
<b>INCREASE/(DECREASE)</b>	<b>\$54,157</b>	<b>\$54,157</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	n/a	n/a	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$146,604</b>	<b>\$146,604</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>1.0</b>
Request Above/(Below) Recommendation	\$92,447	\$92,447	\$0	\$0	\$0	1.0



#### (4) Office of Gun Violence Prevention

##### PROGRAM COSTS

The line was created by HB 21-1299 (Office of Gun Violence Prevention) to coordinate and promote effective efforts to reduce gun violence and related traumas and promote research regarding causes of, and evidence-based responses to, gun violence. This section is a combined personal services and operating line in the Long Bill.

*STATUTORY AUTHORITY:* Section 25-20.5-1202 C.R.S.

*REQUEST:* The Department requests an appropriation of \$3,044,093 General Fund and 4.0 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

PREVENTION SERVICES DIVISION, FAMILY AND COMMUNITY HEALTH, PROGRAM COSTS						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$3,002,605	\$3,002,605	\$0	\$0	\$0	4.0
<b>TOTAL</b>	<b>\$3,002,605</b>	<b>\$3,002,605</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>4.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$3,002,605	\$3,002,605	\$0	\$0	\$0	4.0
Annualize prior year budget actions	41,488	41,488	0	0	0	0.0
<b>TOTAL</b>	<b>\$3,044,093</b>	<b>\$3,044,093</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>4.0</b>
<b>INCREASE/(DECREASE)</b>	<b>\$41,488</b>	<b>\$41,488</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	1.4%	1.4%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$3,044,093</b>	<b>\$3,044,093</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>4.0</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

#### (E) NUTRITION SERVICES

##### WOMEN, INFANTS AND CHILDREN SUPPLEMENTAL FOOD GRANT

The Women, Infants and Children (WIC) Nutrition Program provides a monthly check to low-income (185.0 percent of the federal poverty level) women and children who are at-risk of poor nutritional options because of the lack of income. Clients are able to use these funds for purchasing designated food items at approved food retailers. Local public health agencies provide clients with nutrition education and referrals to additional health services.

*STATUTORY AUTHORITY:* Federal statute 42 U.S.C. sec. 1786 as referenced in Section 39-26-707 (1) (b), C.R.S. Regulations are issued Title 7, Subtitle B, Chapter 11, Subchapter A, Part 246.

*REQUEST:* The Department requests an appropriation of \$88,067,414 total funds, including \$125,705 General Fund and 16.9 FTE.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

PREVENTION SERVICES DIVISION, NUTRITION SERVICES, WOMEN, INFANTS, AND CHILDREN SUPPLEMENTAL FOOD GRANT						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$88,064,092	\$123,992	\$0	\$0	\$87,940,100	16.9
<b>TOTAL</b>	<b>\$88,064,092</b>	<b>\$123,992</b>	<b>\$0</b>	<b>\$0</b>	<b>\$87,940,100</b>	<b>16.9</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$88,064,092	\$123,992	\$0	\$0	\$87,940,100	16.9
Annualize prior year budget actions	1,713	1,713	0	0	0	0.0
Non-prioritized decision items	1,609	0	0	0	1,609	0.0
<b>TOTAL</b>	<b>\$88,067,414</b>	<b>\$125,705</b>	<b>\$0</b>	<b>\$0</b>	<b>\$87,941,709</b>	<b>16.9</b>
<b>INCREASE/(DECREASE)</b>	<b>\$3,322</b>	<b>\$1,713</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,609</b>	<b>0.0</b>
Percentage Change	0.0%	1.4%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$88,067,414</b>	<b>\$125,705</b>	<b>\$0</b>	<b>\$0</b>	<b>\$87,941,709</b>	<b>16.9</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

### 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. Each year the program serves approximately 42,500 children and adults in more than 500 care centers and nearly 5,000 family day care homes.

*STATUTORY AUTHORITY:* Section 17 of the National School Lunch Act (42 U.S.C. 1766). Regulations are issued by the U.S. Department of Agriculture under 7 CFR part 226.

*REQUEST:* The Department requests an appropriation of \$27,899,109 federal funds and 7.8 FTE, which reflects a continuation level of funding.

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

## (10) HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION

This division is comprised of three subdivisions: Operations and Management, Health Facilities Program, and Emergency Medical Services.

### (A) OPERATIONS MANAGEMENT

This subdivision provides division-wide services to the Health Facilities Program. Funding for this subdivision is from General Fund, divisional cash funds, and federal funds.

### (B) HEALTH FACILITIES PROGRAMS

This subdivision is responsible for the licensing and regulation of medical facilities. Licensing activities conducted by the division include performing fitness reviews, conducting fire safety inspections, investigating complaints, and conducting enforcement activities. General Fund is required pursuant to Section 25-3-103.1, C.R.S., so that fees paid by non-government owned facilities do not subsidize the regulation of government-owned facilities. Funding for this subdivision is from the General Fund, cash funds including the Assisted Living Residences Cash Fund and the Health Facilities General Licensure Cash Fund, Medicaid reappropriated funds, and federal funds.

### (C) EMERGENCY MEDICAL SERVICES

This subdivision supports the emergency medical and trauma services system in Colorado, which provides transportation and immediate care to the ill and injured 24 hours a day, 365 days a year. Emergency medical and trauma care services are defined as the immediate health care services needed because of an injury or sudden illness, particularly when there is a threat to life or long-term functional abilities. Funding through this subdivision is provided to the Rocky Mountain Poison Control Center for operation of the poison center and call line. Funding for this subdivision includes General Fund, cash funds including the Emergency Medical Services Account within the Highway Users Tax Fund, and federal funds.

HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 Appropriation</b>						
SB 23-214 (Long Bill)	\$44,645,762	\$3,335,018	\$27,999,345	\$7,208,612	\$6,102,787	201.0
Other legislation	268,476	268,476	0	0	0	1.4
<b>TOTAL</b>	<b>\$44,914,238</b>	<b>\$3,603,494</b>	<b>\$27,999,345</b>	<b>\$7,208,612</b>	<b>\$6,102,787</b>	<b>202.4</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$44,914,238	\$3,603,494	\$27,999,345	\$7,208,612	\$6,102,787	202.4
R3 Health facility licensure funding	3,740,881	3,190,368	550,513	0	0	1.8
BA1 Medicaid facility oversight	318,308	0	0	318,308	0	3.7
Annualize prior year legislation	(146,195)	(146,195)	0	0	0	(1.2)
Annualize prior year budget actions	(1,323,285)	63,429	(1,647,066)	260,352	0	0.0
<b>TOTAL</b>	<b>\$47,503,947</b>	<b>\$6,711,096</b>	<b>\$26,902,792</b>	<b>\$7,787,272</b>	<b>\$6,102,787</b>	<b>206.7</b>
<b>INCREASE/(DECREASE)</b>	<b>\$2,589,709</b>	<b>\$3,107,602</b>	<b>(\$1,096,553)</b>	<b>\$578,660</b>	<b>\$0</b>	<b>4.3</b>
Percentage Change	5.8%	86.2%	(3.9%)	8.0%	0.0%	2.1%
<b>FY 2024-25 EXECUTIVE REQUEST</b>						
Request Above/(Below) Recommendation	(\$1,095,982)	(\$1,034,616)	(\$147,759)	\$86,393	\$0	(0.1)

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## DECISION ITEMS – HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION

### → R3 HEALTH FACILITIES CASH FUND FEE RELIEF [LEGISLATION RECOMMENDED]

*REQUEST:* The Department is requesting:

- Increased cash spending authority of \$402,754 in FY 2024-25 and \$552,360 in FY 2025-26 to reflect additional revenue generated by a CPI based fee increase of 8.01 percent, going forward;
- \$2.2 million in increased General Fund in FY 2024-25 and ongoing to bridge the gap between current expenses and anticipated cash revenue and respond to workload increases with an additional 2.0 FTE;
- Combining the Home and Community Survey and Nursing and Acute Care Survey line items into a new Health Facility Survey line item to allow the Division to manage the programs as a whole, maximize the flexibility of General Fund, and allow staff to work across programs serving different facilities, as needed; and
- JBC sponsored legislation to increase fees based on prior year CPI on an annual basis.

*RECOMMENDATION:* **Staff recommendations are detailed within the write-up.**

*ANALYSIS:*

#### HEALTH FACILITY LICENSURE

The Health Facilities and Emergency Medical Services Division (HFEMSD) regulates health facilities to ensure that facility care meets state and federal health and safety requirements. State regulations are enforced through a licensing process; facilities pay a fee to obtain their license to legally operate in Colorado. Federal regulations are enforced through a certification process wherein the Division performs facility inspections and recommends certification to the federal Centers for Medicare and Medicaid Services (CMS) and the Department of Health Care Policy and Financing, allowing a facility to bill CMS for the services they provide. The Division's goal is to schedule re-licensing surveys once every three years, with the exception of assisted living residences which are statutorily required to occur annually. The schedules and frequency for licensing surveys and complaint investigations generally coincide with schedules set by CMS and State Medicaid for providers who are certified.

#### HEALTH FACILITY LICENSING FEES

- **General Licensure Cash Fund:** Fee increases are limited to CPI. Fees have been increased twice since 2015 by the Consumer Price Index (CPI), in 2019 (1.29 percent) and 2020 (3.17 percent).  
**Assisted Living Residence Cash Fund:** Fee increases are limited to CPI. Fees were essentially doubled over the course of two years in 2018 and 2019, and are calculated based on whether a facility is renewing as well as a per bed fee or per high Medicaid utilization bed fee.
- **Home Care Agency Cash Fund:** Fees are dependent on approval from the State Board of Health, and have not changed since 2012. Facilities are separated into two classes, and pay fees based on whether they are initially registering or renewing.

**The Division has calculated that in order to fully fund expenses with fees, fees would need to increase by approximately 85.0 percent.** At this same time last year, the calculated necessary fee increase was 40.0 to 45.0 percent, and the executive branch declined to increase fees at that time.

### STAKE HOLDING PROCESS FOR FEES

The Division's enabling statutes direct that fees collected pursuant to issuing state licenses shall cover the Division's costs for state licensing activities, including technical assistance, survey/inspections, complaint investigations, and enforcement. The Division engages in a stakeholder process regarding fee increases, since the Board of Health must approve any increases, which is open to all stakeholders and the public. Fees are usually based on a variety of parameters such as:

- Facility size (number of beds);
- Complexity of services provided; and
- Percent of Medicaid consumers.

During 2023, the Division conducted a series of stakeholder meetings to identify a long term sustainability plan for the health facilities programs. During the stakeholder meetings, Division staff presented background information, analysis of the cash funds, and the increase in resources necessary to meet the current workload. After the stakeholder meetings, a poll was sent to all facilities to ask them to evaluate the various funding options that were discussed and to choose their top three options. Of the 2,400 facilities 112 responded to the survey, indicating a response rate of 4.7 percent. The Department states that the general consensus of stakeholders was that the facilities cannot absorb a fee increase higher than CPI. The top three survey choices were:

- 1 A CPI based increase;
- 2 A tier based fee increase based on facility size; and
- 3 A facility bed fee.

**The Division is pursuing a CPI-based fee increase of 8.01 percent which will go into effect in July 2024.** The Division did not put forth additional proposals on a tier-based fee increase or facility bed fee. Going forward, the Division anticipates increasing the fees by CPI annually.

### FUND PROJECTIONS AND SHORTFALLS

Due to concerns regarding facilities' capacity to pay increased fees, the executive branch has not pursued a fee increase since 2020. This has resulted in insufficient revenue that, coupled with rising costs of survey and licensing activities, has exhausted the fund balances in the Health Facilities General Licensure, Assisted Living Residence, and Homecare Agency Cash Funds. Instead of increasing fees, the licensure funds received the following infusions:

- \$1.0 million General Fund in FY 2022-23;
- \$653,000 General Fund to waive fees for nursing facilities in FY 2022-23; and
- \$2.1 million from the Revenue Loss Restoration Cash Fund for fee relief in FY 2023-24.

The table below reflects the estimated cash fund balances for FY 2024-25 assuming the requested General Fund in R3 is not approved.

HEALTH FACILITIES CASH FUND BALANCE PROJECTIONS W/OUT R3 APPROVAL					
CASH FUND	PRIOR FEE RELIEF INFUSIONS	BALANCE AT FY 23-24 CLOSE	FY 24-25 REVENUE	FY 24-25 EXPENDITURES	BALANCE AT FY 24-25 CLOSE
Assisted Living	\$3,332,000	\$703,564	\$3,446,335	\$3,594,322	\$555,577
General Licensure	2,053,000	274,551	2,484,230	3,444,666	(685,885)
Home Care	1,100,000	679,049	1,495,698	2,195,784	(21,037)

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## IMPACTS OF FUND INSOLVENCY

The insolvency of these three health facility licensure cash funds is interfering with the Division's ability to carry out its statutorily mandated oversight activities. As a result of declining fund balances, the Division has already reduced expenditures, and the vast majority of expenditures from these funds cover personnel costs so this largely impacts the Division's ability to maintain staffing levels necessary to issue licenses and conduct inspections at the recommended intervals. **The Department is currently holding 43 surveyor positions vacant to reduce expenditures. As of September 2023, approximately 337 of the 2,497 state-licensed health facilities were overdue for re-licensure surveys.** Failure to visit facilities regularly limits state oversight and can result in deviations from minimum health and safety standards and continued non-compliance.

### STAFFING

The Division continues to fill some vacant positions, however states it is being careful about the number of positions to fill until a decision is made about long term sustainability of funding. If long-term sustainable funding is secured, the Division will continuously post all positions until filled. The Division is also in early stages of planning for an overall change to a long-standing recruitment and training process by hiring less experienced people into entry level positions and providing on the job didactic and field mentoring training under close supervision with a dedicated team of trainers. The Division states that it is engaging in a number of process improvement efforts to reflect the needs of the program including: increasing cross-trained staff to survey across programs and add variation to the jobs, reducing the classification level for starting employees and providing them more on the job training, being creative with recruitment and retention efforts, recognizing many staff view the position as a stepping stone and leaning into this as a recruitment tactic.

Staff is also concerned about the potential legal ramifications of the lack of oversight of State-regulated facilities. Approximately two-thirds of facilities licensed by the Division serve Medicaid and lower income clients. Many residents in health facilities are seniors, individuals with disabilities, and those with lower incomes. These residents can be limited in their ability to care for and advocate for themselves. Individuals in these high-risk groups need effective state oversight to protect their safety and well-being.

### INCREASED COMPLAINTS

In the Division, large increases in the number of complaints is driving additional workload. From FY 2014-15 to FY 2021-22, the number of facilities increased by 23.6 percent, while the number of complaints increased by 64.3 percent. The Department attributes this increase to consumers becoming more aware of and understanding the process to file complaints as well as potential understaffing. Survey staff have been redirected from the routine survey work to focus on complaints, and the Division is behind on responding to complaints as well as completing routine surveys. **An analysis by the Division indicates it would require an additional 11.5 FTE to respond to and investigate the increased volume of complaints.** The Division is only requesting an additional 2.0 FTE to assist with surveying facilities.

### STAFFING AND NURSING SHORTAGES

Workforce and staffing challenges in facilities are attributed to burnout and fatigue from healthcare providers after the COVID-19 pandemic. With the loss of staff, facilities have had to utilize staffing agencies which are reportedly charging upwards of 600.0 percent over the base wage facilities pay their own employees. This coupled with demands for higher wages has resulted in facilities needing to choose between fewer staff or vacant beds. For those facilities that provide care with fewer staff, the

Department has seen an increase in care issues that are identified through licensure and certification. Facilities have also had issues maintaining facility environments, providing training resources for staff, and stocking adequate supplies.

The Department reports that nursing shortages have created difficulties in hiring and retaining nurse surveyors due to the ability of nurses to find higher salaries in the private sector. To combat this, the Division has changed the hiring classification for staff in the Acute Care program (hospitals, ambulatory surgical centers, dialysis centers, etc.) to nurse consultants. The nurse consultant classification has a significantly higher pay range and can better compete with the prevailing nurse wage. Currently all 11.0 nurse consultant positions in the Acute Care Program are filled, as compared with a 17.0 percent vacancy rate in the other survey programs.

## MEDICAID

While the Division does not control Medicaid reimbursement rates, it does consider Medicaid rates in the fee schedules. The table below highlights the number of facilities and beds eligible for Medicaid reimbursement. The Medicaid eligible beds are not guaranteed for Medicaid residents, it remains at the discretion of the provider and their business model as to how many of those Medicaid certified beds will be filled with Medicaid eligible residents. The Department does not have access to actual census counts for facilities, and thus cannot determine how many Medicaid clients are being served by facilities. HCPF reports that across nursing facilities that serve Medicaid members, on average 77.0 percent of residents are Medicaid members. In addition, some fees, such as ALR per bed fees, are reduced for facilities that have a high Medicaid utilization rate. Facilities with a high Medicaid population pay the lower per bed rate.

HEALTH FACILITIES AND MEDICAID ELIGIBILITY						
FACILITY	TOTAL FACILITIES	NUMBER ACCEPTING MEDICAID	PERCENT ACCEPTING MEDICAID	TOTAL BEDS	MEDICAID ELIGIBLE BEDS	PERCENTAGE MEDICAID ELIGIBLE BEDS
Assisted Living Residences	665	301	45.0%	25,092	5,890	23.0%
Nursing Facilities	223	189	85.0%	20,300	18,326	90.0%

## PROPOSED SOLUTION

The Department has submitted a budget request for FY 2024-25 that would involve ongoing General Fund subsidization of health facility licensure cash funded programs within the Department, shown in the table below.

R3 ONGOING GENERAL FUND REQUESTS TO SUBSIDIZE HEALTH FACILITY LICENSURE CASH FUND EXPENDITURES			
CASH FUND	FY 2024-25	FY 2025-26	FY 2026-27
Health Facilities General Licensure	\$895,702	\$940,487	\$987,511
Home Care Agency	498,979	508,957	520,136
Assisted Living Residence	105,632	105,304	104,897
<b>Total</b>	<b>\$1,500,313</b>	<b>\$1,554,748</b>	<b>\$1,612,544</b>

Based on the cash fund reports submitted by the Department, staff has concerns that an ongoing General Fund subsidy and proposed fee changes would still not lead to permanent cash fund solvency, as all of these funds would continue to have negative net cash flow in out years, shown in the table below.

NET CASH FLOW PROJECTIONS W/R3 APPROVED				
CASH FUND	FY 2023-24	FY 2024-25	FY 2025-26	FY 2026-27
Health Facilities General Licensure	\$(636,174)	\$(64,734)	\$(130,363)	\$(61,877)
Home Care Agency	398,362	(201,107)	(172,826)	(144,545)
Assisted Living Residence	329,119	(42,355)	(33,982)	(34,598)

\*Shaded columns indicate years with net positive cash flow

The Division considered alternative sources of funding for this request, however did not provide information on the potential revenue that would be generated. Each of these alternatives would require legislation. These alternatives included:

- Increasing licensing fees by 85.0 percent to fully cash fund the programs;
- Rubber glove fee: a surcharge placed on each box of rubber gloves purchased which would impact private consumers, health facilities, doctors' offices, laboratories, veterinary clinics, and others;
- Per capita basis fee: a charge placed on all facilities based on the number of occupied beds, active patients or clients, or other count that varies from day to day;
- Surcharge on non-prescription medications; and
- Surcharge on prescription medications.

#### **PART 1: LEGISLATION TO ANNUALLY ADJUST FEES BY CPI**

The Department is requesting the JBC sponsor legislation to authorize automatic CPI increases to health facility licensing fees every July. The increases will be based on the Denver, Aurora, Lakewood CPI from the prior calendar year. Automatic CPI fee increases will provide predictability for the Division and licensed facilities which will facilitate budget planning. Automatic fee increases will also reduce workload for stakeholders, Division staff and the Board of Health while keeping with the spirit that service users should generally pay for the services provided.

Currently, the Department holds multiple stakeholder meetings to present the proposed fees based on CPI, and prepares and presents documents to the Board of Health based on Administrative Procedures Act (APA) requirements, which include a request for a hearing and posting by the Secretary of State. While the Board of Health has historically approved the Department's CPI fee increases, there is a potential that the Board of Health would reduce fee levels or deny the increase, resulting in lost cash fund fee revenue necessary to sustain the program. Furthermore, it has been determined that CPI fee increases are not retroactive, which means that, if the Division misses a fee increase in any given year, it cannot add that to future year increases, resulting in a permanent revenue loss.

Should the automatic fee increases be approved, the Department would notify facilities and post the revised fee amounts well in advance of the July 1 effective date. Additionally, since the fee increases are proposed to be based on the prior year CPI, facilities will know the fee increase amount, well in advance along with legislative staff and budget planners.

#### *RECOMMENDATION ON PART 1*

Staff recommends approval of the request for the JBC to sponsor legislation to increase fees annually by CPI at a minimum. This should assist with the funds' long-term solvency, and avoid an administratively burdensome process that the State Board of Health appears to view as cumbersome.



## PART 2: 8.01 PERCENT FEE INCREASE AND CASH FUND SPENDING AUTHORITY AND ONGOING GENERAL FUND APPROPRIATIONS

The Department is currently pursuing a flat CPI-based increase on all fees of 8.01 percent, and is requesting the necessary additional spending authority of \$0.4 million. Additionally, the Department is requesting an ongoing \$2.2 million General Fund appropriation to the program to bridge the gap between expenses and revenue, and respond to workload increases with an additional 2.0 FTE.

### RECOMMENDATION ON PART 2

General fund and cash fund appropriations for the program have varied over the years, however on average over the last 20 years of the program, 16.5 percent the programs expenditures came from the General Fund. If we used this percentage, this would be \$1,746,281 of expected expenditures in FY 2024-25. Given this, cash fund revenue would need to account for \$8,867,426 of expenditures which would be a significant increase. Instead of this percentage increase, staff is recommending the JBC sponsor legislation to increase fees by:

- 10.0 percent in FY 2026-27;
- 6.0 percent or prior calendar year CPI, whichever is higher, in FY 2027-28 through FY 2028-29; and
- Adjust fees to prior calendar year CPI in each year following.

As fees are increased over the five year period, staff recommends cash funds be increased to reflect the increased revenue, and the General Fund appropriations in the table below, highlighted in blue, with the program receiving ongoing General Fund appropriations of \$2.2 million in FY 2028-29 and ongoing. The red column shows the necessary General Fund appropriations given the Executive Branch's proposal for CPI-based fee increases.

REQUESTED VS RECOMMENDED FEE CHANGES AND NECESSARY GENERAL FUND APPROPRIATIONS						
YEAR	EXPENDITURES	CURRENT FEE REVENUE	REQUESTED FEE REVENUE – CPI BASED FEE INCREASES	GENERAL FUND NEEDED W/PROPOSED INCREASE	RECOMMENDED FEE REVENUE – 8% YEAR 1, 10% YEAR 2, 6% YEARS 3-5, CPI YEAR 6 AND ONGOING	GENERAL FUND NEEDED W/RECOMMENDED INCREASE
FY 24-25	\$10,613,707	\$6,872,826	\$7,423,339	\$3,190,368	\$7,423,339	\$3,190,368
FY 25-26	10,932,118	-	7,794,506	3,137,612	8,165,673	2,766,445
FY 26-27	11,260,082	-	8,028,341	3,231,741	8,655,613	2,604,468
FY 27-28	11,597,884	-	8,269,191	3,328,693	9,174,950	2,422,934
FY 28-29	11,945,821	-	8,517,267	3,428,554	9,725,447	2,220,374
FY 29-30	12,304,195	-	8,772,785	3,531,410	10,017,210	2,220,374

RECOMMENDED INCREASED CASH FUND APPROPRIATIONS AND FTE GIVEN APPROVAL OF FEE INCREASE LEGISLATION		
YEAR	STAFF PROPOSED INCREASED CASH FUND APPROPRIATION	FTE
FY 2024-25	\$550,513	1.8
FY 2025-26	742,334	2.0
FY 2026-27	489,940	-
FY 2027-28	519,337	-
FY 2028-29	550,497	-
FY 2029-30	-	-

The proposed and recommended fee increases would have the following impacts on facilities:

POTENTIAL FEE CHANGES			
FACILITY TYPE	LICENSE TYPE	CURRENT FEE	8.01% FEE INCREASE
Facilities for Persons with Intellectual or Developmental Disabilities (151 Facilities)	Community- Residential Home: Initial License	\$2,613	\$209
	Intermediate Care Facility: Initial License	6,270	502
	Community Residential Home: Renewal License	392	31
	Intermediate Care Facility: Renewal License	1,672	134
Community Clinics and Emergency Centers (84 Facilities)	Community Emergency Center: Renewal License	1,411	113
Freestanding Emergency Departments	Initial License	6,150	493
	Renewal License	3,400	272
Dialysis Treatment Clinics (81 Facilities)	Initial License	5,372	430
	Renewal License	1,672	134
Ambulatory Surgical Center (ASC) and ASC with a Convalescent Center (142 Facilities)	ASC Initial	6,897	552
	ASC with Convalescent: Initial	7,274	583
	Non Deemed ASC-Renewal	1,505	121
	Deemed ASC-Renewal	1,354	108

### PART 3: COMBINING LINE ITEMS

The Department requests to combine the Home and Community Survey and Nursing and Acute Care Survey line items into a new Health Facility Survey line item to allow the Division maximum flexibility of that General Fund.

#### RECOMMENDATION ON PART 3

Staff recommends approval of this part of the request. The programs are appropriated across two line items, however the funding sources are not discrete across these two line items, so staff is not concerned about losing transparency in the programs. This would allow for flexibility in the distribution of the appropriated General Fund in case of unexpected changes in the field. This also aligns with the program's intent to train staff across these program and allow for greater flexibility of staff in training and surveying activities. These line items stem from previous separate branches for nursing facilities and assisted living residences, and staff agrees with the overlap in programming, the differentiation is not necessary anymore.

### → BA1 MEDICAID FACILITY OVERSIGHT

**REQUEST:** The Department requests an increase of \$404,701 reappropriated funds and 3.6 FTE in FY 2024-25, annualizing to \$416,817 reappropriated funds and 4.0 FTE in FY 2025-26 and on-going. The source of the reappropriated funds would be a mix of Medicaid General Fund and Medicaid federal funds from the Department of Healthcare Policy Financing (HCPF), and would create 4.0 new positions to support the Department's work in regulating health facilities that serve individuals receiving services funded through Medicaid.

**RECOMMENDATION:** Staff recommendation includes an increase of \$318,263 reappropriated funds and 3.7 FTE in FY 2024-25 annualizing to \$387,895 reappropriated funds and 4.0 FTE in FY 2025-26 and ongoing.

**EVIDENCE LEVEL:** The Department indicated that this request item is theory-informed. When a request item is designated 'theory-informed' it means that the program "reflects a moderate to low or promising level of confidence of effectiveness, ineffectiveness, or harmfulness as determined by

tracking and evaluating performance measures including pre- and post-intervention evaluation of program outcomes, evaluation of program outputs, identification and implementation of a theory of change, or equivalent measures.” (Section 2-3-210 (2)(f), C.R.S.).

Staff believes the evidence level is not applicable to this request. While the outputs of the program are measurable, this is an FTE request which JBC staff are not designating as relevant to the evidence-based policy making model.

#### *ANALYSIS:*

#### **HEALTH FACILITIES PROGRAM BACKGROUND**

The Health Facilities programs within HFEMSD regulate more than 2,400 health facilities in Colorado. These facilities include, but are not limited to nursing facilities, homes for individuals with intellectual and developmental disabilities, assisted living residences, hospice, and home care agencies. In addition to certifying Medicaid facilities, some program staff also provide oversight for Medicare and State-licensed facilities. Oversight occurs at varying intervals; compliance with regulations is assessed and violations are reported for enforcement. Violations in Medicaid-certified facilities are reported to HCPF. Violations in Medicare-certified facilities are reported to the Centers for Medicare and Medicaid Services (CMS), a federal agency. Violations are related to quality of care, health, and safety standards (including infection control, patient rights, and adequacy of care).

#### **SURVEY REQUIREMENTS**

CMS establishes survey frequencies for certified facilities to protect patient and resident safety and well-being. Routine surveys can correct deviations from minimum health and safety standards before those deviations become systemic and result in negative patient and resident outcomes. Given that these facilities serve populations including seniors, people with disabilities, individuals with low income, and individuals living in rural and underserved communities, these risks would likely disproportionately affect these populations. The Department states that without these additional FTE, the Division will struggle to fulfill its contractual obligations to HCPF which would cause HCPF to be out of compliance with CMS requirements. This could result in federal sanctions and put millions of federal fund dollars at risk, which would need to be repaid to the federal government with General Fund. The table below provides a breakdown of complaints by facility type over the past four fiscal years.

COMPLAINT INTAKES BY FACILITY TYPE GROUP					
FACILITY TYPE	FUND	FY19-20	FY20-21	FY21-22	FY22-23*
Acute Care	General Licensure	134	191	234	196
Assisted Living Residence	Assisted Living Residence	476	609	674	326
Behavioral Health and Community	General Licensure	90	166	98	67
Home and Community	Home Care	203	141	107	33
Nursing Facility	General Licensure	656	669	655	336
<b>Totals</b>		<b>1,559</b>	<b>1,776</b>	<b>1,768</b>	<b>958</b>

\*Note: Data for 2023 only includes July - December 2022.

#### **MEDICAID PROGRAM FUNDING**

HFEMSD and HCPF have an inter-agency agreement by which HFEMSD completes surveys of Medicaid-certified facilities on behalf of HCPF. Funding for the IA is reappropriated from HCPF, and HFEMSD bills HCPF quarterly for actual costs incurred. The funding from HCPF is a combination of state General Fund and Federal Funds from CMS.

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The Medicaid Programs line in the Division has not received a funding increase, other than common policy increases, since 2018. Meanwhile, the number of certified facilities has grown from 2,235 to 2,497 in that same time. As a result, the Division has been unable to keep up with the Medicaid certification survey workload. The increased workload, exacerbated by COVID-19, has resulted in higher turnover and vacancy rates, a substantial backlog has developed, especially in the Home and Community-Based Settings facility types. As part of addressing the backlog, the Division has conducted a review of survey processes and is implementing a number of process improvements that will enhance efficiency, streamline surveys and eliminate the backlog. However, through the review process, the Division has identified the need for additional staff to stay current with workload and avoid further backlogs.

### **BACKLOG**

The Budget amendment focuses on the recertification surveys for facilities and not a complaint backlog for Medicaid facilities. The backlog is in routine recertification surveys. The backlog is in routine recertification surveys in accordance with federal agreements. This backlog may create a situation in which HCPF is out of compliance, and may lead to legal risk including: 1) denial, withholding, or a reduction of ongoing payments of federal matching funds for Medicaid programs, and 2) recoupment of payments that have been made during this period of backlog. The former could result in the state having to increase the General Fund portion of payments while the latter could result in significant financial penalties to the State of Colorado. Accordingly, the Department must catch-up on this backlog as expeditiously as possible.

Federal sanctions can include a reduction in federal financial participation (FFP), penalties in the form of corrective action plans (requiring additional funds be made available for ongoing remediation and additional requirements above what is currently agreed upon), and a disallowance which would be the repayment of the federal portion of funds in which the state did not have surveys on the relevant providers. The federal government has not threatened a specific action at this juncture, but the Department and HCPF are aware of national actions that are being taken following the public health emergency that significantly increase the possibility of these risks. The division is currently working on clearing the backlog. The division has revised the survey process and we do not yet know what the ongoing FTE need will be.

### **REQUEST**

The Department requests 3.6 FTE and \$404,701 reappropriated funds in FY 2024-25 which will annualize to 4.0 FTE and \$416,817 in future years. The request is for additional staff to help the Division to confirm minimum health and safety standards are being met in Medicaid-certified health facilities serving individuals with intellectual and developmental disabilities. The Behavioral Health and Community Services Program oversees approximately 1,017 facilities across a variety of facility types including services for individuals with intellectual and developmental disabilities. Of the requested \$404,701 reappropriated-Medicaid funds \$182,115 is Medicaid GF and \$222,586 is Medicaid federal funds via HCPF. This allocation is based on the standard 55.0 percent Medicaid federal fund 45.0 percent Medicaid General Fund split.

The Division states this is a short-term effort to continue to work on clearing the backlog of surveys and ensure sufficient facility oversight. The Division is in the process of implementing changes to the survey process, and does not yet know what the necessary ongoing FTE requirements will be in the future. HCPF has provided a letter in support of this request.

## RECOMMENDATION

**Staff recommends approval of the request for the funding to support the additional 4.0 FTE on an ongoing basis.** The total recommended amount in FY 2024-25 does not account for POTS-related costs, and considers the standard 55.0 percent Medicaid federal fund and 45.0 percent Medicaid General Fund split. Per the Department, staff believes this will be an ongoing issue, and this is a short-term rather than a permanent solution.

BA1 RECOMMENDATION COST BREAKDOWN		
	FY 2024-25	FY 2025-26 AND ONGOING
FTE	3.7	4.0
Personal Services	\$271,237	\$293,635
Standard Operating	4,736	5,120
Capital Outlay	26,680	0
Centrally Appropriated (POTS)	0	73,530
Travel - hotel	8,550	8,550
Travel - per diem	6,645	6,645
Cell phones	460	460
<b>Total</b>	<b>\$318,263</b>	<b>\$387,895</b>

## LINE ITEM DETAIL - HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION

### (A) OPERATIONS MANAGEMENT

#### ADMINISTRATION AND OPERATIONS

This line item funds the personal services and operating expenses for division administration. This line includes appropriations for the Stop the Bleed Program created in H.B. 23-1213, which adds appropriations through fiscal year 2025-26.

*STATUTORY AUTHORITY:* Section 25-25-102, C.R.S.

*REQUEST:* The Department requests an appropriation of \$3,018,466 total funds, including \$538,588 General Fund, and 27.8 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION, HEALTH FACILITIES PROGRAMS, HOME AND COMMUNITY SURVEY						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$2,640,012	\$180,870	\$2,459,142	\$0	\$0	26.0
<b>TOTAL</b>	<b>\$2,640,012</b>	<b>\$180,870</b>	<b>\$2,459,142</b>	<b>\$0</b>	<b>\$0</b>	<b>26.0</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$2,640,012	\$180,870	\$2,459,142	\$0	\$0	26.0
R3 Health facility licensure funding	5,467,768	4,121,873	1,345,895	0	0	17.5
Annualize prior year budget actions	149,318	6,374	142,944	0	0	0.0
Annualize prior year legislation	14,049	14,049	0	0	0	0.2
<b>TOTAL</b>	<b>\$8,271,147</b>	<b>\$4,323,166</b>	<b>\$3,947,981</b>	<b>\$0</b>	<b>\$0</b>	<b>43.7</b>

HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION, HEALTH FACILITIES PROGRAMS, HOME AND COMMUNITY SURVEY						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>INCREASE/(DECREASE)</b>	<b>\$5,631,135</b>	<b>\$4,142,296</b>	<b>\$1,488,839</b>	<b>\$0</b>	<b>\$0</b>	<b>17.7</b>
Percentage Change	213.3%	2,290.2%	60.5%	0.0%	0.0%	68.1%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$7,088,772</b>	<b>\$3,288,550</b>	<b>\$3,800,222</b>	<b>\$0</b>	<b>\$0</b>	<b>43.7</b>
Request Above/(Below) Recommendation	(\$1,182,375)	(\$1,034,616)	(\$147,759)	\$0	\$0	(0.0)

#### APPROPRIATION TO THE HEALTH FACILITIES GENERAL LICENSURE CASH FUND

**REQUEST/RECOMMENDATION:** The Department did not request and staff does not recommend an appropriation for this line item.

#### APPROPRIATION TO THE ASSISTED LIVING RESIDENCE CASH FUND

**REQUEST/RECOMMENDATION:** The Department did not request and staff does not recommend an appropriation for this line item.

#### APPROPRIATION TO THE HOME CARE AGENCY CASH FUND

**REQUEST/RECOMMENDATION:** The Department did not request and staff does not recommend an appropriation for this line item.

### (B) HEALTH FACILITIES PROGRAM

#### HOME AND COMMUNITY SURVEY

This line item funds the licensure, regulator, and surveys for home and community based providers including assisted living, home care agencies, hospice, psychiatric residential treatment, acute treatment, adult day care, and a couple of other small provider groups.

**STATUTORY AUTHORITY:** Section 25-1.5 103, C.R.S.

**REQUEST:** The Department requests an appropriation of \$7,088,772 total funds, including \$3,288,550 General Fund, and 17.5 FTE.

**RECOMMENDATION:** Staff recommendation is detailed below.

HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION, HEALTH FACILITIES PROGRAMS, HOME AND COMMUNITY SURVEY						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>FY 2023-24 APPROPRIATION</b>						
SB 23-214 (Long Bill)	\$2,640,012	\$180,870	\$2,459,142	\$0	\$0	26.0
<b>TOTAL</b>	<b>\$2,640,012</b>	<b>\$180,870</b>	<b>\$2,459,142</b>	<b>\$0</b>	<b>\$0</b>	<b>26.0</b>
<b>FY 2024-25 RECOMMENDED APPROPRIATION</b>						
FY 2023-24 Appropriation	\$2,640,012	\$180,870	\$2,459,142	\$0	\$0	26.0

HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION, HEALTH FACILITIES PROGRAMS, HOME AND COMMUNITY SURVEY						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
R3 Health facility licensure funding	7,623,520	6,277,625	1,345,895	0	0	17.5
Annualize prior year budget actions	149,318	6,374	142,944	0	0	0.0
Annualize prior year legislation	14,049	14,049	0	0	0	0.2
<b>TOTAL</b>	<b>\$10,426,899</b>	<b>\$6,478,918</b>	<b>\$3,947,981</b>	<b>\$0</b>	<b>\$0</b>	<b>43.7</b>
<b>INCREASE/(DECREASE)</b>	<b>\$7,786,887</b>	<b>\$6,298,048</b>	<b>\$1,488,839</b>	<b>\$0</b>	<b>\$0</b>	<b>17.7</b>
Percentage Change	295.0%	3,482.1%	60.5%	0.0%	0.0%	68.1%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$7,088,772</b>	<b>\$3,288,550</b>	<b>\$3,800,222</b>	<b>\$0</b>	<b>\$0</b>	<b>43.7</b>
Request Above/(Below) Recommendation	(\$3,338,127)	(\$3,190,368)	(\$147,759)	\$0	\$0	(0.0)

### NURSING FACILITY SURVEY

This line item funds the licensure, regulation, and surveys of hospitals, nursing homes, ambulatory surgical centers, end stage renal disease, and clinics.

*STATUTORY AUTHORITY:* Section 25-1.5-103, C.R.S.

*REQUEST:* The Department requests an appropriation of \$46,234 cash funds.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION, HEALTH FACILITIES PROGRAMS, NURSING FACILITY SURVEY						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$1,726,887	\$931,505	\$795,382	\$0	\$0	15.7
<b>TOTAL</b>	<b>\$1,726,887</b>	<b>\$931,505</b>	<b>\$795,382</b>	<b>\$0</b>	<b>\$0</b>	<b>15.7</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,726,887	\$931,505	\$795,382	\$0	\$0	15.7
Annualize prior year budget actions	79,061	32,827	46,234	0	0	0.0
R3 Health facility licensure funding	(1,726,887)	(931,505)	(795,382)	0	0	(15.7)
Annualize prior year legislation	(36,573)	(36,573)	0	0	0	(0.4)
<b>TOTAL</b>	<b>\$42,488</b>	<b>(\$3,746)</b>	<b>\$46,234</b>	<b>\$0</b>	<b>\$0</b>	<b>(0.4)</b>
<b>INCREASE/(DECREASE)</b>	<b>(\$1,684,399)</b>	<b>(\$935,251)</b>	<b>(\$749,148)</b>	<b>\$0</b>	<b>\$0</b>	<b>(16.1)</b>
Percentage Change	(97.5%)	(100.4%)	(94.2%)	0.0%	0.0%	(102.5%)
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$42,488</b>	<b>(\$3,746)</b>	<b>\$46,234</b>	<b>\$0</b>	<b>\$0</b>	<b>(0.4)</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	(0.0)

### MEDICAID/MEDICARE CERTIFICATION PROGRAM

This Program certifies nursing homes and hospitals so they are qualified to receive federal Medicaid and Medicare payments. Medicaid reappropriated funds pay for certification of facilities caring for Medicaid patients and originated in the Department of Health Care Policy and Financing. The federal Medicare funds pay for certification of facilities caring for Medicare patients. The federal match rate

for Medicaid certification funds varies depending upon the type of activity the certification program is engaged and averages a 35.0 percent to 65.0 percent state to federal split.

*STATUTORY AUTHORITY:* Section 25-1-107.5, C.R.S.

*REQUEST:* The Department requests an appropriation of \$11,231,173 total funds, including \$6,780,985 in Medicaid reappropriated funds, \$4,450,188 federal funds and 115.0 FTE.

*RECOMMENDATION:* **Staff recommendation is detailed below.**

HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION, HEALTH FACILITIES PROGRAMS, MEDICAID/MEDICARE CERTIFICATION PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$10,566,120	\$0	\$0	\$6,115,932	\$4,450,188	111.4
<b>TOTAL</b>	<b>\$10,566,120</b>	<b>\$0</b>	<b>\$0</b>	<b>\$6,115,932</b>	<b>\$4,450,188</b>	<b>111.4</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$10,566,120	\$0	\$0	\$6,115,932	\$4,450,188	111.4
BA1 Medicaid facility oversight	318,308	0	0	318,308	0	3.7
Annualize prior year budget actions	260,352	0	0	260,352	0	0.0
<b>TOTAL</b>	<b>\$11,144,780</b>	<b>\$0</b>	<b>\$0</b>	<b>\$6,694,592</b>	<b>\$4,450,188</b>	<b>115.1</b>
<b>INCREASE/(DECREASE)</b>	<b>\$578,660</b>	<b>\$0</b>	<b>\$0</b>	<b>\$578,660</b>	<b>\$0</b>	<b>3.7</b>
Percentage Change	5.5%	0.0%	0.0%	9.5%	0.0%	3.3%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$11,231,173</b>	<b>\$0</b>	<b>\$0</b>	<b>\$6,780,985</b>	<b>\$4,450,188</b>	<b>115.0</b>
Request Above/(Below) Recommendation	\$86,393	\$0	\$0	\$86,393	\$0	(0.1)

#### TRANSFER TO DEPARTMENT OF PUBLIC SAFETY

This line item funds the transfer of Medicaid reappropriated funds and federal Medicare funds to the Department of Public Safety for all the costs associated with the life safety code plan reviews and inspections of health facilities (including centrally-appropriated line items, personal services, and operating expenses). These responsibilities were transferred to the Department of Public Safety from this Department pursuant to H.B. 12-1268 and H.B. 13-1155.

*STATUTORY AUTHORITY:* Sections 24-33.5-1201 (5) and 25-1.5-103 (5) (c), C.R.S.

*REQUEST:* The Department requests an appropriation of \$699,072 total funds, including \$341,076 Medicaid reappropriated funds and \$357,996 is federal Medicare funds, which reflects a continuation level of funding

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

#### BEHAVIORAL HEALTH ENTITY LICENSING

This Program was added to the Department by HB 19-1237 Licensing Behavioral Health Entities and created a new licensing system for behavioral health entities while consolidating requirements that were split between this Department and the Department of Human Services.

*STATUTORY AUTHORITY:* Section 25-27.6-101, C.R.S.



*REQUEST:* The Department requests an appropriation of \$225,180 total funds including \$43,526 General Fund and 3.2 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION, HEALTH FACILITIES PROGRAMS, BEHAVIORAL HEALTH ENTITY LICENSING						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$217,310	\$42,044	\$109,877	\$0	\$65,389	3.2
<b>TOTAL</b>	<b>\$217,310</b>	<b>\$42,044</b>	<b>\$109,877</b>	<b>\$0</b>	<b>\$65,389</b>	<b>3.2</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$217,310	\$42,044	\$109,877	\$0	\$65,389	3.2
Annualize prior year budget actions	7,870	1,482	6,388	0	0	0.0
<b>TOTAL</b>	<b>\$225,180</b>	<b>\$43,526</b>	<b>\$116,265</b>	<b>\$0</b>	<b>\$65,389</b>	<b>3.2</b>
<b>INCREASE/(DECREASE)</b>	<b>\$7,870</b>	<b>\$1,482</b>	<b>\$6,388</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	3.6%	3.5%	5.8%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$225,180</b>	<b>\$43,526</b>	<b>\$116,265</b>	<b>\$0</b>	<b>\$65,389</b>	<b>3.2</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## NURSING HOME GRANTS

This Program was added to the Department by SB 21-128 (Modification to the Administration of the Nursing Home Penalty Cash Fund) and transfers the program from HCPF to CDPHE

*STATUTORY AUTHORITY:* Section 25-1-107.5, C.R.S.

*REQUEST:* The Department requests an appropriation of \$6,000,000 cash funds, which reflects a continuation level of funding

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

## (C) EMERGENCY MEDICAL SERVICES

### STATE EMS COORDINATION, PLANNING AND CERTIFICATION PROGRAM

The State Emergency Medical Services (EMS) Coordination, Planning and Certification Program oversees Colorado's Emergency Medical and Trauma Services System, certifies emergency medical technicians (EMTs), and provides technical assistance to local and regional emergency medical services providers and trauma centers. The Program assists the State Emergency Medical Services Advisory Council, which makes recommendations to the Department regarding emergency medical services and trauma system rules and allocation of funds. Finally, the Program assists the State Emergency Medical Practice Advisory Council, which advises the Department regarding the scope of practice for EMTs, supports the regional coordination of emergency medical and trauma care, and administers the grants program.

The Program also includes the air ambulance licensure program, which licenses fixed-wing and rotor-wing ambulance services and EMS/Trauma Telecommunication Support, through which the

Department transfers funding to DPA to fund a communications engineer that assists EMS agencies statewide with communications issues.

*STATUTORY AUTHORITY:* Section 25-3.5-101 through 709, C.R.S.

*REQUEST:* The Department requests an appropriation of \$1,928,014 total funds, including \$67,374 General Fund and 14.7 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are provided below.

HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION, EMERGENCY MEDICAL SERVICES, STATE EMS COORDINATION, PLANNING AND CERTIFICATION PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$1,823,506	\$65,081	\$1,758,425	\$0	\$0	14.7
<b>TOTAL</b>	<b>\$1,823,506</b>	<b>\$65,081</b>	<b>\$1,758,425</b>	<b>\$0</b>	<b>\$0</b>	<b>14.7</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$1,823,506	\$65,081	\$1,758,425	\$0	\$0	14.7
Annualize prior year budget actions	104,508	2,293	102,215	0	0	0.0
<b>TOTAL</b>	<b>\$1,928,014</b>	<b>\$67,374</b>	<b>\$1,860,640</b>	<b>\$0</b>	<b>\$0</b>	<b>14.7</b>
<b>INCREASE/(DECREASE)</b>	<b>\$104,508</b>	<b>\$2,293</b>	<b>\$102,215</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	5.7%	3.5%	5.8%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$1,928,014</b>	<b>\$67,374</b>	<b>\$1,860,640</b>	<b>\$0</b>	<b>\$0</b>	<b>14.7</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## DISTRIBUTIONS TO REGIONAL EMERGENCY MEDICAL AND TRAUMA COUNCILS

This line item funds the distribution of funds to the state's eleven Regional Emergency Medical and Trauma Advisory Councils (RETACs) pursuant to Section 25-3.5-603 (3) (b), C.R.S. RETACs are formed by the governing bodies of four or more counties having geographic proximity, and each is responsible for developing and implementing a system plan for coordinated delivery of emergency medical and trauma care within its region. 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.

*STATUTORY AUTHORITY:* Section 25-3.5-603 (3) (b), C.R.S.

*REQUEST:* The Department requests an appropriation of \$1,785,000 cash funds from the Emergency Medical Services Account in the HUTF, which reflects a continuation level of funding

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

## EMERGENCY MEDICAL SERVICES PROVIDER GRANTS

This line item funds emergency medical service grants to local agencies for training, medical, and telecommunications equipment such as defibrillators, communications equipment, data collection equipment, and new vehicles. New emergency 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, and applicants must provide a 50.0 percent match unless they can demonstrate financial hardship.

*STATUTORY AUTHORITY:* Section 25-3.5-603 (3), C.R.S.

*REQUEST:* The Department requests a continuation appropriation of \$8,378,896 cash funds from the Emergency Medical Services Account in the HUTF, which reflects a continuation level of funding

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

#### TRAUMA FACILITY DESIGNATION PROGRAM

The State Board of Health and this Division have oversight of the state's trauma care system, and health care facilities have the choice of becoming a designated trauma center. Trauma Centers are designated as Level I through Level V, with Level I centers providing the most complex care. Designation level reflects the amount and type of resources available to care for a severely injured patient.

Health care facilities that choose to be "non-designated" agree to not 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. Fees charged to trauma care facilities, are set by the State Board of Health, to 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.

*STATUTORY AUTHORITY:* Section 25-3.5-701 through 709, C.R.S.

*REQUEST:* The Department requests an appropriation of \$407,521 cash funds and 1.8 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION, EMERGENCY MEDICAL SERVICES, TRAUMA FACILITY DESIGNATION PROGRAM						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$385,134	\$0	\$385,134	\$0	\$0	1.8
<b>TOTAL</b>	<b>\$385,134</b>	<b>\$0</b>	<b>\$385,134</b>	<b>\$0</b>	<b>\$0</b>	<b>1.8</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$385,134	\$0	\$385,134	\$0	\$0	1.8
Annualize prior year budget actions	22,387	0	22,387	0	0	0.0
<b>TOTAL</b>	<b>\$407,521</b>	<b>\$0</b>	<b>\$407,521</b>	<b>\$0</b>	<b>\$0</b>	<b>1.8</b>
<b>INCREASE/(DECREASE)</b>	<b>\$22,387</b>	<b>\$0</b>	<b>\$22,387</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	5.8%	0.0%	5.8%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$407,521</b>	<b>\$0</b>	<b>\$407,521</b>	<b>\$0</b>	<b>\$0</b>	<b>1.8</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

#### FEDERAL GRANTS

This line reflects federal grants received by the Division for various activities and programs.

*STATUTORY AUTHORITY:* Section 25-1.5-101 (1) (m), C.R.S.

*REQUEST:* The Department requests an appropriation of \$290,300 federal funds, which reflects a continuation level of funding

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

## POISON CONTROL

Under the authority of the Poison Control Act, 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. The Center is part of the state's response plan for chemical and biological terrorism, and 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.

*STATUTORY AUTHORITY:* Section 25-32-101 through 106, C.R.S.

*REQUEST:* The Department requests an appropriation of \$1,595,240 total funds, including \$1,535,140 General Fund and \$60,100 cash funds from the Marijuana Tax Cash Fund, which reflects a continuation level of funding

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

## OFFICE OF CARDIAC ARREST

This line item was created in H.B. 22-1251, which requires the Department to: 1) coordinate and collect sudden cardiac arrest data; 2) implement an outreach campaign to raise awareness about sudden cardiac arrest and the use of public access defibrillators, and provide education about life-saving actions; 3) maintain a list of training and education programs offered in the state that teach skills, including cardiopulmonary resuscitation, and the use of a defibrillator; 4) employ a Cardiac Arrest Data Coordinator and any other necessary staff; and 5) coordinate data submissions concerning the location of public access defibrillators.

*STATUTORY AUTHORITY:* Section 25-53-201 et seq., C.R.S

*REQUEST:* The Department requests an appropriation of \$207,048 General Fund and 0.8 FTE.

*RECOMMENDATION:* **Staff recommends approval of the request.** Details are shown below.

HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION, EMERGENCY MEDICAL SERVICES, OFFICE OF CARDIAC ARREST						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
FY 2023-24 APPROPRIATION						
SB 23-214 (Long Bill)	\$200,000	\$200,000	\$0	\$0	\$0	0.8

HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION, EMERGENCY MEDICAL SERVICES, OFFICE OF CARDIAC ARREST						
	TOTAL FUNDS	GENERAL FUND	CASH FUNDS	REAPPROPRIATED FUNDS	FEDERAL FUNDS	FTE
<b>TOTAL</b>	<b>\$200,000</b>	<b>\$200,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.8</b>
FY 2024-25 RECOMMENDED APPROPRIATION						
FY 2023-24 Appropriation	\$200,000	\$200,000	\$0	\$0	\$0	0.8
Annualize prior year budget actions	7,048	7,048	0	0	0	0.0
<b>TOTAL</b>	<b>\$207,048</b>	<b>\$207,048</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.8</b>
<b>INCREASE/(DECREASE)</b>	<b>\$7,048</b>	<b>\$7,048</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0</b>
Percentage Change	3.5%	3.5%	0.0%	0.0%	0.0%	0.0%
<b>FY 2024-25 EXECUTIVE REQUEST</b>	<b>\$207,048</b>	<b>\$207,048</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.8</b>
Request Above/(Below) Recommendation	\$0	\$0	\$0	\$0	\$0	0.0

## (D) INDIRECT COST ASSESSMENT

### INDIRECT COST ASSESSMENT

Collection of funding to pay for centralized department functions.

*STATUTORY AUTHORITY:* Section 24-75-1401, C.R.S.

*REQUEST:* The Department requests a continuation appropriation of \$3,510,795 total funds, which reflects a continuation level of funding

*RECOMMENDATION:* **Staff recommends approval of the continuation request.**

## INDIRECT COSTS METHODOLOGY

Indirect costs are charged to cash and federally funded programs within the Department to pay for Department wide services (e.g. human resources, accounting, grant administration, etc.). The Department's indirect cost rate is calculated as a fraction of prior-year expenditures: the numerator equating to administrative overhead expenses, and the denominator equating to the total expenditure base for the entire Department. This methodology is shown in the graphic below. Any excess collections from the previous year are also reduced from the numerator with the expectation that a lower rate will correct against future over-collections. The Department's indirect cost recovery plan applies a uniform indirect rate across all fund sources, federal and state, except as specified according to statute, law, or grant.

$$\frac{\text{Administrative Expenditures (\$)}}{\text{Total Cost Base (\$)}} = \text{Indirect Cost Rate (\%)}$$

HISTORICAL INDIRECT COST RATE CALCULATIONS			
FISCAL YEAR	ADMINISTRATIVE EXPENSES (MILLIONS)	TOTAL COST BASE (MILLIONS)	INDIRECT COST RATE
2018-19	\$31.9	\$157.1	20.3%
2019-20	32.1	168.8	19.0
2020-21	32.4	190.5	19.6
2021-22	30.2	279.7	17.4
2022-23	30.4	317.9	13.4
2023-24*	35.5	-	4.2

\*estimate

The indirect rate is calculated from prior year data, so the indirect rate for any given year is applied to future year costs.

During the COVID-19 pandemic, the Department processed more than \$1.8 billion in related funding that was off-budget. During this time, the Department made an error in how it accounted for temporary administrative staff, classifying them as program staff paid for with direct federal dollars rather than indirect costs. Essentially the Department received federal indirect cost funding, but did not use the indirect cost funding for the associated staff. This led to a large over-collection of federal indirect costs, and raised the Department's balance in the Indirect Cost Excess Recovery Fund from \$2.3 million in 2020 to \$25.9 million 2023.

The over-collection of federal indirect costs is going to have a delayed but significant effect of reducing the Department's indirect cost rate down from 17.4 percent in FY 2021-22 to 13.4 percent in FY 2022-23 and down to an anticipated 4.2 percent in FY 2023-24, as shown in the table above. Accurately accounting for the increased administrative needs that each federal grant contributes to the Department's administrative services will help stabilize the indirect cost rate in the future by allowing the rates in the numerator to grow in proportion to the denominator. To begin to right size this appropriation, the Department has requested increased reappropriated fund spending authority to pay back indirect cost collections related to the CDC's Strengthening U.S. Public Health Infrastructure, Workforce, and Data Systems grant.

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## **INDIRECT COSTS EXCESS RECOVERY FUND**

Indirect cost rates are typically based on historical appropriations, and it is common for rates to change each year. For years when historical appropriations were higher, the rate may be too high and collections are greater than what is necessary to maintain operational costs. In years when historical appropriations are lower, the opposite is true and the Department may not collect sufficient indirect costs. Due to the varied nature of indirect cost collections, the General Assembly created the Indirect Costs Excess Recovery Fund in FY 2013-14 for the purpose of reducing budget adjustments related to the over- and under-collection of indirect costs in a given fiscal year. The fund is used by Departments to hold excess indirect cost collections for use in years when collections are insufficient.

While the Department's balance in the Indirect Cost Excess Recovery Fund began at \$25.9 million in FY 2023-24, it is estimated to decrease to \$9.0 million by June 2024. The Department already made a payment to the federal government of \$2.4 million in 2023, received spending authority to make a payment of \$5.6 million in 2024, and anticipates a final payment between \$2.0 and 3.0 million. It also continues to pay indirect costs out of the account. While forecasting for FY 2024-25 is difficult without FY 2023-24 rates confirmed, an unknown volume of grant awards, and the setting of the FY 2024-25 budget for the Department, ideally the balance of the account will be nearing \$0 in FY 2025-26. Given this, staff recommends caution in utilizing the Department's balance in the fund for anything other than repayments to the federal government and the Department's indirect costs.

## **FEDERAL GOVERNMENT AND INDIRECT COST PLANS**

The federal government allows state programs to charge federal funding they receive at a determined rate for indirect costs, however this year, the setting of the rate by the federal government did not occur until mid-FY 2023-24. The U.S. Department of Health and Human Services made a determination of the Department's indirect cost rates for FY 2023-24 on November 21, 2023. This email stated, "As a result of the adjustments, the On-Site, Off-Site, and Sub-Award rates will be 4.2%, 1.7%, and 0.7% respectively, given that CDPHE refunds the Federal Government \$5,584,476 for the FY 22 Sub-Award rate over-recovery....Also, please provide an estimated date for the refund payment or if CDPHE is able to make the Federal refund payment within 30 days so that I can proceed to issue the determination letter for the refund as well as the new rate agreement." The Department was granted spending authority to make the \$5.6 million payment to the federal government.

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## LONG BILL FOOTNOTES AND REQUESTS FOR INFORMATION

### LONG BILL FOOTNOTES

Staff recommends **ADDING** the following footnotes:

- N Department of Public Health and Environment, Division of Disease Control and Public Health Response, Office of Emergency Preparedness and Response, Emergency Preparedness and Response Program -- Amounts in this line item are calculated based on the assumed federal match rate of 10.0 percent state funds and are assumed to be demonstrated on a federal fiscal year basis. This line item is ineligible for salary survey adjustments unless additional federal grant funding is available. The Department shall notify the Joint Budget Committee by November 1<sup>st</sup> of each fiscal year of any changes to the match rate or federal funding made available to the state through the grant program in the current fiscal year.

**COMMENT:** This footnote expresses legislative intent and provides flexibility in the use of the federal funds so the Department may “overspend” the state share during the state fiscal year while ensuring match rate compliance during the federal fiscal year. This footnote is being recommended in place of an (M) note on the General Fund in this line item.

- N Department of Public Health and Environment, Prevention Services Division, Family and Community Health, Injury and Violence Prevention, Community Crime Victims Grant Program -- This appropriation remains available until all grantees in this fiscal year have been reimbursed or the close of the 2025-26 state fiscal year, whichever comes first.

**COMMENT:** This footnote allows the Department to extend grant funding to grantees over a two-year period to ensure grantees can fully expend funds.

Staff recommends **CONTINUING** the following footnotes:

- N Department of Public Health and Environment, Administration and Support, Administration, Leave Payouts -- The Department may use this line item for leave payouts for cash funded and federal funded employees only.

**COMMENT:** This footnote represents legislative intent around the use of funds for this purpose.

- N Department of Public Health and Environment, Disease Control and Public Health Response, General Disease Control, and Surveillance, Immunization Operating Expenses -- It is the General Assembly's intent to provide flexibility in the use of these funds toward a menu of evidence based immunization interventions, including but not limited to mobile health clinics, community and school based vaccination clinics, data improvement efforts, funding for VISTA/AmeriCorps volunteer efforts and family participation incentives.

**COMMENT:** This footnote represents legislative intent to allow the Department to flexibly use funding for immunizations.



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- N Department of Public Health and Environment, Prevention Services Division, Chronic Disease Prevention Programs, Transfer to Health Disparities Grant Program Fund -- It is the General Assembly's intent that if the amount of actual Amendment 35 tobacco tax revenues that are required by statute to be transferred to the Health Disparities Grant Program Fund are higher than the appropriation set forth in this line item, then the transfer to the Health Disparities Grant Program Fund of such tobacco tax revenues will be increased by an amount equal to the difference between such actual tobacco tax revenues and the appropriated amount.

**COMMENT:** This footnote provides the Department the authority to transfer the constitutionally amount of Amendment 35 revenue credited to the Prevention, Early Detection, and Treatment Fund to the Health Disparities Program Fund, regardless of the appropriation in the Long Bill. This footnote provides the Department the authority to comply with constitutional requirements without exceeding the Long Bill appropriation if actual Amendment 35 revenues are higher than the projected amount used to set the Long Bill appropriation.

- N Department of Public Health and Environment, Prevention Services Division, Family and Community Health, Women's Health, Family Planning Program Administration; Family Planning Purchase of Services; and Family Planning Federal Grants -- Article V, Section 50 of the Colorado Constitution states that "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."

**COMMENT:** This footnote reiterates the Colorado constitutional restriction on using state funds for abortion services. The Department is in compliance with this footnote.

- N Department of Public Health and Environment, Prevention Services Division, Family and Community Health, Children and Youth Health, School-based Health Centers -- It is the General Assembly's intent that this appropriation be used for the purpose of assisting the establishment, expansion, and ongoing operations of school-based health centers in Colorado.

**COMMENT:** This footnote expresses the General Assembly's intent for how the funds are used.

Staff recommends **CONTINUING AND MODIFYING** the following footnotes:

- N Department of Public Health and Environment, Health Facilities and Emergency Medical Services Division, Emergency Medical Services, Emergency Medical Services Provider Grants -- This appropriation remains available until all grantees in this fiscal year have been reimbursed or the close of the ~~2024-25~~ **2025-26** state fiscal year, whichever comes first.

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**COMMENT:** This footnote allows the Department to extend grant funding to grantees over a two-year period to ensure grantees can fully expend funds.

Staff recommends **DISCONTINUING** the following request for information:

- N Department of Public Health and Environment, Prevention Services Division, Family and Community Health, Injury and Violence Prevention - Mental Health Promotion, Suicide Prevention -- It is the General Assembly's intent that \$75,000 of this appropriation be used for mental health first aid training for students.

**COMMENT:** This footnote represents legislative intent about the use of funding related to a one-time appropriation via Long Bill amendment. The appropriation has been reduced for FY 2024-25, and the footnote is no longer necessary.

- N Department of Public Health and Environment, Prevention Services Division, Chronic Disease Prevention Programs, Chronic Disease and Cancer Prevention Grants -- It is the General Assembly's intent that all but \$227,752 of the General Fund in this line item go to a statewide not-for-profit organization to provide healthy eating program incentives among Colorado's low-income populations. As a part of the Department's responsibilities under section 25-20.5-104, C.R.S., such funds are to be used for improving access to fresh Colorado grown fruits and vegetables. It is the general assembly's further intent that the Department and the nonprofit will minimize their administrative expenses with the Department using no more than \$10,000 and the nonprofit using 5% of the total fund amount for such purposes. It is the General Assembly's further intent that the statewide not-for-profit organization have experience in supporting healthy eating incentive programs, such as programs at local farmers markets, and experience with coordinating healthy eating programs and funding between local, state, and federal programs.

**COMMENT:** This footnote represents legislative intent. Staff believes this would be more appropriately funded through its own line item rather than as a footnote, and is recommending removing this footnote along with sponsoring legislation to create the program in statute and appropriate funding directly to that program.

## REQUESTS FOR INFORMATION

Staff recommends **ADDING** the following request for information:

- 1 Department of Public Health and Environment, Division of Disease Control and Public Health Response, Office of Emergency Preparedness and Response, Emergency Preparedness and Response Program. The Department is requested to provide the federal grant funding received for the current fiscal year as well as any changes to the match rate or expected changes in available federal funds by November 1<sup>st</sup> of each fiscal year.

**COMMENT:** This RFI, in coordination with a footnote, replace an (M) note, and ensure the General Fund appropriated to the program is reflective of the federal grant funding the state receives. If the federal funding the Department received in the current fiscal year is lower than the expected amount that the initial General Fund appropriation was based on, then the General

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Fund appropriation in the current fiscal year should be reduced to reflect the 10.0 percent state funds to federal funds match.

Staff recommends **CONTINUING** the following request for information:

- 2 Department of Public Health and Environment; Office of Health Equity, Disease Control and Environmental Epidemiology Division, Prevention Services Division. The Department is requested to provide the following information to the Joint Budget Committee by November 1<sup>st</sup> each fiscal year for each program funded by Amendment 35 tax revenues: Name of the program, the amount of money received and expended by the program for the preceding fiscal year, a description of the program including the actual number of persons served and the services provided through the program, information evaluating the operation of the program including the effectiveness of the program in achieving its stated goals.

**COMMENT:** This RFI provides the Committee and staff with outcomes and expenditures for programs in the Department that receive Amendment 35 funding.

- 3 Department of Public Health and Environment, Office of HIV, Viral Hepatitis, and STPs -- The Department is requested to provide a report related to the congenital syphilis prevention program with the following information to the Joint Budget Committee by November 1<sup>st</sup> of each fiscal year:
  - Number of participants who receive a syphilis screening while detained in local county jails;
  - Number of participants who receive a syphilis screening from community sites;
  - Number of participants who receive a positive screen who receive syphilis treatment prior to release from detention at a local county jail;
  - Number of participants who receive a positive screen who receive syphilis treatment from community sites;
  - Number of participants who receive referrals for supportive services; and
  - Number of participants who test positive for syphilis and are pregnant.

**COMMENT:** This RFI provides the Committee and staff with outcomes related to the congenital syphilis county prevention project.

Staff recommends **DISCONTINUING** the following request for information:

- 4 Department of Public Health and Environment, Health Facilities and Emergency Medical Services Division. The Department is requested to provide the following information to the Joint Budget Committee by November 1st 2023: A sustainability plan for the Health Facilities General Licensure, the Assisted Living Residence, and Home Care Agency Cash Funds including possible changes to the fee structure, progress of stakeholder engagement in fee increases, and cash fund balance histories and projections

**COMMENT:** The Department submitted a budget request on this topic and has indicated there will be no further solvency issues related to the cash fund.

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## APPENDIX A: NUMBERS PAGES

Appendix A details actual expenditures for the last two state fiscal years, the appropriation for the current fiscal year, and the requested appropriation for next fiscal year. This information is listed by line item and fund source.

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

## Appendix A: Numbers Pages

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
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<b>DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT</b> <b>Jill Ryan, Executive Director</b>
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### (1) ADMINISTRATION AND SUPPORT

#### (A) Administration

Personal Services	<u>8,731,035</u>	<u>9,966,166</u>	<u>10,630,570</u>	<u>11,087,675</u>	<u>11,087,675</u>
FTE	81.2	86.3	91.2	91.3	91.3
General Fund	1,688,649	1,831,973	1,957,027	2,034,660	2,034,660
Cash Funds	9,947	10,847	11,369	11,531	11,531
Reappropriated Funds	6,997,059	7,800,019	8,482,937	8,862,247	8,862,247
Federal Funds	35,380	323,327	179,237	179,237	179,237
Health, Life, and Dental	<u>10,110,119</u>	<u>14,069,486</u>	<u>31,756,606</u>	<u>27,368,762</u>	<u>27,163,328</u> *
General Fund	2,238,276	5,861,286	6,756,940	5,110,948	4,905,514
Cash Funds	6,265,528	6,556,536	9,753,224	9,752,449	9,752,449
Reappropriated Funds	1,606,315	1,651,664	2,307,578	2,311,348	2,311,348
Federal Funds	0	0	12,938,864	10,194,017	10,194,017
Short-term Disability	<u>109,586</u>	<u>126,125</u>	<u>282,025</u>	<u>274,232</u>	<u>271,961</u> *
General Fund	25,702	38,496	68,086	51,475	49,204
Cash Funds	65,921	68,742	78,089	91,382	91,382
Reappropriated Funds	17,963	18,887	22,689	24,413	24,413
Federal Funds	0	0	113,161	106,962	106,962

\*this line item contains a decision item

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Paid Family and Medical Leave Insurance	<u>0</u>	<u>0</u>	<u>0</u>	<u>824,710</u>	<u>818,322</u> *
General Fund	0	0	0	156,834	150,446
Cash Funds	0	0	0	274,116	274,116
Reappropriated Funds	0	0	0	72,902	72,902
Federal Funds	0	0	0	320,858	320,858
Unfunded Liability Amortization Equalization					
Disbursement Payments	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>18,131,526</u> *
General Fund	0	0	0	0	3,289,864
Cash Funds	0	0	0	0	6,091,464
Reappropriated Funds	0	0	0	0	1,620,028
Federal Funds	0	0	0	0	7,130,170
S.B. 04-257 Amortization Equalization Disbursement	<u>3,607,026</u>	<u>4,126,084</u>	<u>9,498,556</u>	<u>9,136,743</u>	<u>0</u> *
General Fund	846,067	1,262,434	2,294,745	1,715,912	0
Cash Funds	2,169,711	2,246,655	2,623,339	3,045,732	0
Reappropriated Funds	591,248	616,995	763,258	810,014	0
Federal Funds	0	0	3,817,214	3,565,085	0
S.B. 06-235 Supplemental Amortization Equalization					
Disbursement	<u>3,607,026</u>	<u>4,126,084</u>	<u>9,498,556</u>	<u>9,136,743</u>	<u>0</u> *
General Fund	846,067	1,262,434	2,294,745	1,715,912	0
Cash Funds	2,169,711	2,246,655	2,623,339	3,045,732	0
Reappropriated Funds	591,248	616,995	763,258	810,014	0
Federal Funds	0	0	3,817,214	3,565,085	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Salary Survey	<u>2,362,890</u>	<u>2,835,021</u>	<u>10,983,241</u>	<u>8,460,594</u>	<u>6,344,790</u>
General Fund	554,393	934,199	2,742,989	1,696,040	1,166,446
Cash Funds	1,421,559	1,495,223	2,872,369	2,907,212	2,137,030
Reappropriated Funds	386,938	405,599	870,133	782,137	527,087
Federal Funds	0	0	4,497,750	3,075,205	2,514,227
Step Increases	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>2,299,066</u>
General Fund	0	0	0	0	563,285
Cash Funds	0	0	0	0	831,908
Reappropriated Funds	0	0	0	0	270,274
Federal Funds	0	0	0	0	633,599
PERA Direct Distribution	<u>2,834,045</u>	<u>2,572,609</u>	<u>514,049</u>	<u>1,537,579</u>	<u>4,083,037</u>
General Fund	1,587,286	1,381,438	118,427	811,961	2,177,733
Cash Funds	950,706	934,266	143,755	421,388	1,346,504
Reappropriated Funds	296,053	256,905	251,867	304,230	558,800
Federal Funds	0	0	0	0	0
Temporary Employees Related to Authorized Leave	<u>0</u>	<u>0</u>	<u>268,051</u>	<u>268,051</u>	<u>268,051</u>
General Fund	0	0	39,372	39,372	39,372
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	228,679	228,679	228,679
Leave Payments	<u>1,182,443</u>	<u>994,758</u>	<u>1,293,323</u>	<u>1,293,323</u>	<u>1,293,323</u>
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	1,182,443	994,758	1,293,323	1,293,323	1,293,323
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	<b>FY 2021-22 Actual</b>	<b>FY 2022-23 Actual</b>	<b>FY 2023-24 Appropriation</b>	<b>FY 2024-25 Request</b>	<b>FY 2024-25 Recommendation</b>
Workers' Compensation	<u>375,663</u>	<u>380,557</u>	<u>362,963</u>	<u>447,496</u>	<u>434,012</u>
General Fund	2,640	2,674	574	574	686
Cash Funds	0	0	0	0	0
Reappropriated Funds	373,023	377,883	362,389	446,922	433,326
Federal Funds	0	0	0	0	0
Operating Expenses	<u>2,812,420</u>	<u>2,663,903</u>	<u>3,457,760</u>	<u>3,437,902</u>	<u>3,437,902</u> *
General Fund	191,918	198,793	239,936	234,078	234,078
Cash Funds	0	0	0	0	0
Reappropriated Funds	2,620,502	2,465,110	3,217,824	3,203,824	3,203,824
Federal Funds	0	0	0	0	0
Legal Services	<u>3,530,643</u>	<u>5,163,015</u>	<u>6,855,278</u>	<u>6,529,337</u>	<u>6,529,337</u>
General Fund	744,053	1,077,707	2,504,912	2,136,988	2,136,988
Cash Funds	12,761	415,773	642,765	642,765	642,765
Reappropriated Funds	2,773,829	3,669,535	3,707,601	3,749,584	3,749,584
Federal Funds	0	0	0	0	0
Administrative Law Judge Services	<u>12,780</u>	<u>45,002</u>	<u>69,416</u>	<u>121,906</u>	<u>115,007</u>
General Fund	1,304	4,472	16,679	47,424	34,471
Cash Funds	0	0	1,213	1,213	1,852
Reappropriated Funds	11,476	40,530	51,524	73,269	78,684
Federal Funds	0	0	0	0	0
Payment to Risk Management and Property Funds	<u>839,252</u>	<u>1,147,367</u>	<u>2,296,759</u>	<u>937,596</u>	<u>1,322,508</u>
General Fund	108,208	148,237	275,043	129,771	427,112
Cash Funds	0	0	0	0	0
Reappropriated Funds	731,044	999,130	2,021,716	807,825	895,396
Federal Funds	0	0	0	0	0



*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	<b>FY 2021-22 Actual</b>	<b>FY 2022-23 Actual</b>	<b>FY 2023-24 Appropriation</b>	<b>FY 2024-25 Request</b>	<b>FY 2024-25 Recommendation</b>
Vehicle Lease Payments	<u>285,430</u>	<u>199,873</u>	<u>498,738</u>	<u>425,334</u>	<u>425,334</u> *
General Fund	0	0	44,685	38,108	38,108
Cash Funds	261,359	177,813	413,163	352,354	352,354
Reappropriated Funds	24,071	22,060	40,890	34,872	34,872
Federal Funds	0	0	0	0	0
Leased Space	<u>7,943,374</u>	<u>8,503,368</u>	<u>9,329,526</u>	<u>9,129,846</u>	<u>9,129,846</u>
General Fund	513,413	1,074,842	641,222	641,222	641,222
Cash Funds	224,186	242,708	973,292	773,612	773,612
Reappropriated Funds	7,190,101	7,170,017	7,701,512	7,701,512	7,701,512
Federal Funds	15,674	15,800	13,500	13,500	13,500
Capitol Complex Leased Space	<u>40,967</u>	<u>38,952</u>	<u>38,600</u>	<u>56,566</u>	<u>43,430</u>
General Fund	3,088	2,936	2,847	11,830	3,203
Cash Funds	0	0	0	0	0
Reappropriated Funds	37,879	36,016	35,753	44,736	40,227
Federal Funds	0	0	0	0	0
Annual Depreciation-lease Equivalent Payment	<u>44,673</u>	<u>498,795</u>	<u>483,626</u>	<u>483,626</u>	<u>483,626</u>
General Fund	44,673	395,237	380,068	380,068	380,068
Cash Funds	0	103,558	103,558	103,558	103,558
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Payments to OIT	<u>7,754,095</u>	<u>10,158,190</u>	<u>18,520,388</u>	<u>19,131,500</u>	<u>19,131,500</u>
General Fund	1,310,718	6,709,886	7,426,451	8,379,329	8,379,329
Cash Funds	1,051,643	626,826	64,806	10,752,171	10,752,171
Reappropriated Funds	4,388,211	2,599,861	9,006,791	0	0
Federal Funds	1,003,523	221,616	2,022,340	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Digital Trunk Payments	<u>0</u>	<u>0</u>	<u>102,454</u>	<u>106,320</u>	<u>106,320</u> *
General Fund	0	0	102,454	106,320	106,320
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
IT Accessibility	<u>0</u>	<u>0</u>	<u>8,365,460 0.0</u>	<u>0 0.0</u>	<u>0 0.0</u>
General Fund	0	0	3,510,984	0	0
Cash Funds	0	0	1,100,058	0	0
Reappropriated Funds	0	0	2,695,351	0	0
Federal Funds	0	0	1,059,067	0	0
CORE Operations	<u>858,916</u>	<u>1,081,804</u>	<u>921,191</u>	<u>357,733</u>	<u>230,644</u> *
General Fund	91,551	115,308	96,204	141,296	24,087
Cash Funds	0	0	0	0	0
Reappropriated Funds	767,365	966,496	824,987	216,437	206,557
Federal Funds	0	0	0	0	0
Utilities	<u>471,271</u>	<u>366,097</u>	<u>660,651</u>	<u>660,651</u>	<u>660,651</u> *
General Fund	29,909	29,909	29,909	29,909	29,909
Cash Funds	69,386	80,120	161,324	161,324	161,324
Reappropriated Funds	364,002	247,585	457,818	457,818	457,818
Federal Funds	7,974	8,483	11,600	11,600	11,600
Building Maintenance and Repair	<u>537,414</u>	<u>447,181</u>	<u>447,181</u>	<u>447,181</u>	<u>447,181</u>
General Fund	23,252	23,252	23,252	23,252	23,252
Cash Funds	0	0	0	0	0
Reappropriated Funds	514,162	423,929	423,929	423,929	423,929
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Reimbursement for Members of the State Board of					
Health	<u>4,251</u>	<u>4,300</u>	<u>5,100</u>	<u>5,100</u>	<u>5,100</u>
General Fund	4,251	4,300	5,100	5,100	5,100
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Environmental Justice Ombudsperson	<u>0</u>	<u>534,696</u>	<u>884,062</u>	<u>0</u>	<u>0</u> *
FTE	0.0	4.0	7.7	0.0	0.0
General Fund	0	534,746	0	0	0
Cash Funds	0	(50)	884,062	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Indirect Costs Assessment	<u>170,483</u>	<u>578,615</u>	<u>6,233,173</u>	<u>1,769,758</u>	<u>1,769,758</u>
General Fund	0	0	0	268,738	0
Cash Funds	80,983	314,422	339,422	660,080	660,080
Reappropriated Funds	65,755	27,642	5,673,079	179,819	448,557
Federal Funds	23,745	236,551	220,672	661,121	661,121
DPA Administration Services	<u>0</u>	<u>0</u>	<u>0</u>	<u>194,424</u>	<u>194,424</u> *
General Fund	0	0	0	130,727	130,727
Reappropriated Funds	0	0	0	63,697	63,697
Office of the State Architect	<u>0</u>	<u>0</u>	<u>0</u>	<u>4,775</u>	<u>4,775</u> *
General Fund	0	0	0	3,211	3,211
Reappropriated Funds	0	0	0	1,564	1,564

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
DHR State Agency Services	<u>0</u>	<u>0</u>	<u>0</u>	<u>317,454</u>	<u>317,454</u> *
General Fund	0	0	0	213,450	213,450
Reappropriated Funds	0	0	0	104,004	104,004
DHR Training Services	<u>0</u>	<u>0</u>	<u>0</u>	<u>63,990</u>	<u>63,990</u> *
General Fund	0	0	0	43,026	43,026
Reappropriated Funds	0	0	0	20,964	20,964
DHR Labor Relations Services	<u>0</u>	<u>0</u>	<u>0</u>	<u>476,215</u>	<u>476,215</u> *
General Fund	0	0	0	320,198	320,198
Reappropriated Funds	0	0	0	156,017	156,017
Financial Ops and Reporting Services	<u>0</u>	<u>0</u>	<u>0</u>	<u>694,162</u>	<u>694,162</u> *
General Fund	0	0	0	466,741	466,741
Reappropriated Funds	0	0	0	227,421	227,421
Procurement and Contracts Services	<u>0</u>	<u>0</u>	<u>0</u>	<u>429,904</u>	<u>429,904</u> *
General Fund	0	0	0	289,059	289,059
Reappropriated Funds	0	0	0	140,845	140,845
Shift Differential	<u>7</u>	<u>3,273</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	0	224	0	0	0
Cash Funds	7	3,049	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>SUBTOTAL - (A) Administration</b>	58,225,809	70,631,321	134,257,303	115,617,188	118,214,159
<i>FTE</i>	<u>81.2</u>	<u>90.3</u>	<u>98.9</u>	<u>91.3</u>	<u>91.3</u>
General Fund	10,855,418	22,894,783	31,572,651	27,373,533	28,306,869
Cash Funds	14,753,408	15,523,144	22,789,147	32,996,619	33,984,100
Reappropriated Funds	31,530,687	31,407,616	50,976,207	33,325,687	33,929,220
Federal Funds	1,086,296	805,779	28,919,298	21,921,349	21,993,970

**(B) Office of Health Equity**

Personal Services	<u>1,282,651</u>	<u>1,908,286</u>	<u>1,871,234</u>	<u>2,388,493</u>	<u>2,358,486</u> *
FTE	18.4	18.6	18.6	19.5	19.5
General Fund	1,288,887	1,367,134	1,315,903	1,638,982	1,608,975
Cash Funds	36	49,096	51,783	104,544	104,544
Reappropriated Funds	(6,272)	492,055	503,548	644,967	644,967
Federal Funds	0	0	0	0	0
Health Disparities Grants	<u>3,126,664</u>	<u>11,259,104</u>	<u>11,014,813</u>	<u>11,014,813</u>	<u>8,702,871</u>
General Fund	1,117,964	8,055,389	4,700,000	4,700,000	4,700,000
Cash Funds	0	559,251	3,655,639	3,655,639	2,098,591
Reappropriated Funds	2,008,700	2,644,464	2,659,174	2,659,174	1,904,280
Federal Funds	0	0	0	0	0
Necessary Document Assistance	<u>297,427</u>	<u>299,846</u>	<u>300,570</u>	<u>310,544</u>	<u>310,544</u>
FTE	0.1	0.1	0.1	0.1	0.1
General Fund	297,427	299,846	300,570	310,544	310,544
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Environmental Justice Ombudsperson	<u>0</u>	<u>0</u>	<u>0</u>	<u>166,631</u>	<u>166,631</u> *
FTE	0.0	0.0	0.0	1.2	1.2
General Fund	0	0	0	166,631	166,631
EJ Program Costs	<u>0</u>	<u>0</u>	<u>0</u>	<u>2,134,312</u>	<u>2,066,610</u> *
FTE	0.0	0.0	0.0	18.9	17.9
General Fund	0	0	0	67,702	0
Reappropriated Funds	0	0	0	1,965,620	1,965,620
Federal Funds	0	0	0	100,990	100,990
EJ Grants Program	<u>0</u>	<u>0</u>	<u>0</u>	<u>1,968,858</u>	<u>1,968,858</u> *
FTE	0.0	0.0	0.0	1.9	1.9
Cash Funds	0	0	0	1,968,858	1,968,858
<b>SUBTOTAL - (B) Office of Health Equity</b>	<b>4,706,742</b>	<b>13,467,236</b>	<b>13,186,617</b>	<b>17,983,651</b>	<b>15,574,000</b>
FTE	<u>18.5</u>	<u>18.7</u>	<u>18.7</u>	<u>41.6</u>	<u>40.6</u>
General Fund	2,704,278	9,722,370	6,316,473	6,883,859	6,786,150
Cash Funds	36	608,347	3,707,422	5,729,041	4,171,993
Reappropriated Funds	2,002,428	3,136,519	3,162,722	5,269,761	4,514,867
Federal Funds	0	0	0	100,990	100,990

**(C) Office of Public Health Practice, Planning and Local Partnerships**

Assessment, Planning, and Support Program	<u>361,980</u>	<u>277,166</u>	<u>904,692</u>	<u>914,304</u>	<u>914,304</u>
FTE	7.4	7.4	7.4	7.4	7.4
General Fund	268,653	277,166	289,656	299,268	299,268
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	93,327	0	615,036	615,036	615,036

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Distributions to Local Public Health Agencies	<u>9,231,540</u>	<u>19,364,190</u>	<u>19,698,658</u>	<u>17,542,632</u>	<u>17,628,625</u> *
General Fund	7,376,182	17,514,789	7,749,418	15,554,406	15,630,654
Cash Funds	1,855,358	1,849,402	11,949,240	1,988,226	1,997,971
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
<b>SUBTOTAL - (C) Office of Public Health Practice, Planning and Local Partnerships</b>	9,593,520	19,641,356	20,603,350	18,456,936	18,542,929
<i>FTE</i>	<u>7.4</u>	<u>7.4</u>	<u>7.4</u>	<u>7.4</u>	<u>7.4</u>
General Fund	7,644,835	17,791,955	8,039,074	15,853,674	15,929,922
Cash Funds	1,855,358	1,849,402	11,949,240	1,988,226	1,997,971
Reappropriated Funds	0	0	0	0	0
Federal Funds	93,327	0	615,036	615,036	615,036
<b>TOTAL - (1) Administration and Support</b>	72,526,071	103,739,913	168,047,270	152,057,775	152,331,088
<i>FTE</i>	<u>107.1</u>	<u>116.4</u>	<u>125.0</u>	<u>140.3</u>	<u>139.3</u>
General Fund	21,204,531	50,409,107	45,928,198	50,111,066	51,022,941
Cash Funds	16,608,802	17,980,892	38,445,809	40,713,886	40,154,064
Reappropriated Funds	33,533,115	34,544,135	54,138,929	38,595,448	38,444,087
Federal Funds	1,179,623	805,779	29,534,334	22,637,375	22,709,996

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
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**(2) CENTER FOR HEALTH AND ENVIRONMENTAL DATA**

**(A) Administration and Support**

Program Costs	<u>414,778</u>	<u>223,407</u>	<u>565,766</u>	<u>579,040</u>	<u>579,040</u>
FTE	3.8	3.9	3.8	3.8	3.8
General Fund	84,817	137,692	99,723	105,623	105,623
Cash Funds	149,849	(44,149)	189,138	196,512	196,512
Reappropriated Funds	0	0	0	0	0
Federal Funds	180,112	129,864	276,905	276,905	276,905

<b>SUBTOTAL - (A) Administration and Support</b>	414,778	223,407	565,766	579,040	579,040
FTE	<u>3.8</u>	<u>3.9</u>	<u>3.8</u>	<u>3.8</u>	<u>3.8</u>
General Fund	84,817	137,692	99,723	105,623	105,623
Cash Funds	149,849	(44,149)	189,138	196,512	196,512
Reappropriated Funds	0	0	0	0	0
Federal Funds	180,112	129,864	276,905	276,905	276,905

**(B) Health Statistics and Vital Records**

Personal Services	<u>4,198,199</u>	<u>3,562,592</u>	<u>4,298,402</u>	<u>4,581,635</u>	<u>3,378,226</u>
FTE	50.8	51.0	51.0	51.0	51.0
General Fund	160,960	131,999	193,615	205,070	205,070
Cash Funds	2,518,971	2,529,170	2,606,153	2,877,185	1,673,776
Reappropriated Funds	5,069	6,034	6,196	6,942	6,942
Federal Funds	1,513,199	895,389	1,492,438	1,492,438	1,492,438



*JBC Staff Figure Setting - FY 2024-25*  
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	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Operating Expenses	<u>768,946</u>	<u>879,397</u>	<u>958,906</u>	<u>656,406</u>	<u>656,406</u>
General Fund	46,668	55,126	385,613	205,613	205,613
Cash Funds	309,158	244,343	385,185	262,685	262,685
Reappropriated Funds	0	0	0	0	0
Federal Funds	413,120	579,928	188,108	188,108	188,108
Health Survey	<u>8,998</u>	<u>758,992</u>	<u>686,149</u>	<u>751,057</u>	<u>751,057</u>
FTE	0.0	2.5	2.7	2.7	2.7
General Fund	8,998	367,785	686,149	751,057	751,057
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	391,207	0	0	0
Reimbursement to Coroners	<u>27,726</u>	<u>60,855</u>	<u>159,050</u>	<u>159,050</u>	<u>159,050</u>
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	27,726	60,855	159,050	159,050	159,050
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
<b>SUBTOTAL - (B) Health Statistics and Vital</b>					
<b>Records</b>	5,003,869	5,261,836	6,102,507	6,148,148	4,944,739
FTE	<u>50.8</u>	<u>53.5</u>	<u>53.7</u>	<u>53.7</u>	<u>53.7</u>
General Fund	244,352	615,765	1,424,427	1,320,790	1,320,790
Cash Funds	2,828,129	2,773,512	2,991,338	3,139,870	1,936,461
Reappropriated Funds	5,069	6,034	6,196	6,942	6,942
Federal Funds	1,926,319	1,866,525	1,680,546	1,680,546	1,680,546

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
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**(C) Medical Marijuana Registry**

Medical Marijuana Registry fee. The Medical Marijuana Registry is entirely cash funded by the Medical Marijuana Program Cash Fund and was not impacted by any of the 2013 Session legislation on the implementation of Amendment 64.

Personal Services	<u>1,279,171</u>	<u>1,302,724</u>	<u>1,409,039</u>	<u>1,463,976</u>	<u>1,463,976</u>
FTE	19.6	23.5	22.2	22.2	22.2
General Fund	0	0	0	0	0
Cash Funds	1,279,171	1,302,724	1,409,039	1,463,976	1,463,976
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Operating Expenses	<u>241,572</u>	<u>199,501</u>	<u>340,882</u>	<u>340,882</u>	<u>340,882</u>
General Fund	0	0	0	0	0
Cash Funds	241,572	199,501	340,882	340,882	340,882
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

<b>SUBTOTAL - (C) Medical Marijuana Registry</b>	1,520,743	1,502,225	1,749,921	1,804,858	1,804,858
FTE	<u>19.6</u>	<u>23.5</u>	<u>22.2</u>	<u>22.2</u>	<u>22.2</u>
General Fund	0	0	0	0	0
Cash Funds	1,520,743	1,502,225	1,749,921	1,804,858	1,804,858
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
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	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(D) Health Data Programs and Information</b>					
Cancer Registry	<u>1,359,336</u>	<u>1,050,419</u>	<u>1,280,579</u>	<u>1,338,149</u>	<u>1,338,149</u>
FTE	10.2	10.2	10.2	10.2	10.2
General Fund	220,561	227,413	378,149	435,719	435,719
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,138,775	823,006	902,430	902,430	902,430
Birth Defects Monitoring and Prevention Program	<u>362,146</u>	<u>344,183</u>	<u>1,643,012</u>	<u>479,312</u>	<u>479,312</u>
FTE	14.6	14.6	14.6	14.6	14.6
General Fund	124,573	85,638	133,614	141,519	141,519
Cash Funds	237,573	258,545	325,117	337,793	337,793
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	1,184,281	0	0
Health Information Exchange	<u>7,496</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	7,496	0	0	0	0
<b>SUBTOTAL - (D) Health Data Programs and Information</b>	1,728,978	1,394,602	2,923,591	1,817,461	1,817,461
FTE	<u>24.8</u>	<u>24.8</u>	<u>24.8</u>	<u>24.8</u>	<u>24.8</u>
General Fund	345,134	313,051	511,763	577,238	577,238
Cash Funds	237,573	258,545	325,117	337,793	337,793
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,146,271	823,006	2,086,711	902,430	902,430

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(E) Indirect Cost Assessment</b>					
Indirect Cost Assessment	<u>1,039,683</u>	<u>1,218,812</u>	<u>1,435,923</u>	<u>1,435,923</u>	<u>1,435,923</u>
General Fund	0	0	0	0	0
Cash Funds	479,548	878,132	1,127,001	1,127,001	1,127,001
Reappropriated Funds	0	0	0	0	0
Federal Funds	560,135	340,680	308,922	308,922	308,922
<b>SUBTOTAL - (E) Indirect Cost Assessment</b>	1,039,683	1,218,812	1,435,923	1,435,923	1,435,923
<i>FTE</i>	<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	0
Cash Funds	479,548	878,132	1,127,001	1,127,001	1,127,001
Reappropriated Funds	0	0	0	0	0
Federal Funds	560,135	340,680	308,922	308,922	308,922
<b>TOTAL - (2) Center for Health and Environmental Data</b>	9,708,051	9,600,881	12,777,708	11,785,430	10,582,021
<i>FTE</i>	<u>99.0</u>	<u>105.7</u>	<u>104.5</u>	<u>104.5</u>	<u>104.5</u>
General Fund	674,303	1,066,508	2,035,913	2,003,651	2,003,651
Cash Funds	5,215,842	5,368,265	6,382,515	6,606,034	5,402,625
Reappropriated Funds	5,069	6,034	6,196	6,942	6,942
Federal Funds	3,812,837	3,160,074	4,353,084	3,168,803	3,168,803

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(3) DIVISION OF DISEASE CONTROL AND PUBLIC HEALTH RESPONSE</b>					
<b>(A) Administration</b>					
Administration and Support	<u>1,274,262</u>	<u>13,292,727</u>	<u>17,050,261</u>	<u>12,653,605</u>	<u>12,653,605</u> *
FTE	58.6	180.0	181.9	143.6	143.6
General Fund	1,396,511	13,210,192	2,349,958	9,835,725	9,835,725
Cash Funds	11,971	54,283	12,536,871	653,819	653,819
Reappropriated Funds	(134,220)	28,252	29,437	30,066	30,066
Federal Funds	0	0	2,133,995	2,133,995	2,133,995
Indirect Cost Assessment	<u>17,988,730</u>	<u>13,201,057</u>	<u>7,035,138</u>	<u>7,035,138</u>	<u>7,035,138</u>
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	0	0	0	0	0
Cash Funds	1,187,865	1,364,876	1,773,231	1,773,231	1,773,231
Reappropriated Funds	11,001	0	46,243	46,243	46,243
Federal Funds	16,789,864	11,836,181	5,215,664	5,215,664	5,215,664
<b>SUBTOTAL - (A) Administration</b>	19,262,992	26,493,784	24,085,399	19,688,743	19,688,743
FTE	<u>58.6</u>	<u>180.0</u>	<u>181.9</u>	<u>143.6</u>	<u>143.6</u>
General Fund	1,396,511	13,210,192	2,349,958	9,835,725	9,835,725
Cash Funds	1,199,836	1,419,159	14,310,102	2,427,050	2,427,050
Reappropriated Funds	(123,219)	28,252	75,680	76,309	76,309
Federal Funds	16,789,864	11,836,181	7,349,659	7,349,659	7,349,659

*JBC Staff Figure Setting - FY 2024-25*  
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	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(B) General Disease Control and Surveillance</b>					
Immunization Personal Services	<u>6,831,436</u>	<u>8,399,780</u>	<u>4,206,833</u>	<u>4,391,844</u>	<u>4,391,844</u>
FTE	25.4	25.4	25.4	25.4	25.4
General Fund	1,321,385	1,365,838	1,420,833	1,605,844	1,605,844
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	5,510,051	7,033,942	2,786,000	2,786,000	2,786,000
Immunization Operating Expenses	<u>130,965,470</u>	<u>126,668,862</u>	<u>55,744,777</u>	<u>55,248,436</u>	<u>56,061,528</u>
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	2,881,284	2,924,857	4,595,701	4,099,360	4,099,360
General Fund Exempt	0	0	305,324	305,324	305,324
Cash Funds	1,617,107	939,713	2,793,752	2,793,752	3,606,844
Reappropriated Funds	0	0	0	0	0
Federal Funds	126,467,079	122,804,292	48,050,000	48,050,000	48,050,000
Approp. From the Tobacco Tax Cash Fund to the					
General Fund	<u>364,131</u>	<u>339,124</u>	<u>322,323</u>	<u>322,323</u>	<u>270,943</u>
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	0	0	0	0	0
Cash Funds	364,131	339,124	322,323	322,323	270,943
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
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	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Federal Grants	<u>143,807,149</u>	<u>136,516,456</u>	<u>1,333,092</u>	<u>1,124,587</u>	<u>1,124,587</u> *
FTE	9.2	9.2	9.2	9.2	9.2
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	143,807,149	136,516,456	1,333,092	1,124,587	1,124,587
Tuberculosis Control and Treatment, Personal Services	<u>460,780</u>	<u>503,821</u>	<u>923,933</u>	<u>1,165,147</u>	<u>942,753</u> *
FTE	13.1	13.1	13.1	15.1	13.1
General Fund	134,159	138,704	144,533	385,747	163,353
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	326,621	365,117	779,400	779,400	779,400
Tuberculosis Control and Treatment, Operating Expenses	<u>1,228,199</u>	<u>1,437,619</u>	<u>1,500,461</u>	<u>1,540,812</u>	<u>1,539,342</u> *
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	1,186,093	1,188,761	1,188,761	1,229,112	1,227,642
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	42,106	248,858	311,700	311,700	311,700
Marijuana Health Effects Monitoring	<u>344,531</u>	<u>323,221</u>	<u>371,114</u>	<u>375,426</u>	<u>375,426</u>
FTE	4.0	4.0	4.0	4.0	4.0
General Fund	0	0	0	0	0
Cash Funds	344,531	323,221	371,114	375,426	375,426
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
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	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>SUBTOTAL - (B) General Disease Control and Surveillance</b>	284,001,696	274,188,883	64,402,533	64,168,575	64,706,423
<i>FTE</i>	<u>51.7</u>	<u>51.7</u>	<u>51.7</u>	<u>53.7</u>	<u>51.7</u>
General Fund	5,522,921	5,618,160	7,349,828	7,320,063	7,096,199
General Fund Exempt	0	0	305,324	305,324	305,324
Cash Funds	2,325,769	1,602,058	3,487,189	3,491,501	4,253,213
Reappropriated Funds	0	0	0	0	0
Federal Funds	276,153,006	266,968,665	53,260,192	53,051,687	53,051,687

**(C) Laboratory Services**

Chemistry and Microbiology Personal Services	<u>3,583,764</u>	<u>2,992,010</u>	<u>5,884,218</u>	<u>6,005,927</u>	<u>6,005,927</u>
FTE	53.6	54.1	54.1	54.1	54.1
General Fund	598,865	621,977	649,321	733,871	733,871
Cash Funds	2,403,599	1,896,562	2,900,092	2,933,788	2,933,788
Reappropriated Funds	152,706	157,604	162,143	165,606	165,606
Federal Funds	428,594	315,867	2,172,662	2,172,662	2,172,662
Chemistry and Microbiology Operating Expenses	<u>3,470,454</u>	<u>3,967,796</u>	<u>5,181,202</u>	<u>7,840,202</u>	<u>8,783,400</u> *
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	412,224	412,224	412,224	1,703,324	1,529,373
Cash Funds	2,445,570	2,852,565	3,724,602	5,092,502	6,209,651
Reappropriated Funds	179,676	179,676	179,676	179,676	179,676
Federal Funds	432,984	523,331	864,700	864,700	864,700



*JBC Staff Figure Setting - FY 2024-25*  
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	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Certification	<u>2,076,815</u>	<u>1,768,662</u>	<u>2,315,802</u>	<u>2,518,799</u>	<u>2,518,799</u> *
FTE	22.7	22.3	22.3	22.3	22.3
General Fund	50,000	50,000	51,317	57,999	57,999
Cash Funds	1,665,526	1,609,857	1,827,484	2,018,518	2,018,518
Reappropriated Funds	144,398	16,269	247,301	252,582	252,582
Federal Funds	216,891	92,536	189,700	189,700	189,700
Regulatory Oversight Program	<u>0</u>	<u>52,463</u>	<u>293,320</u>	<u>293,320</u>	<u>293,320</u>
FTE	0.0	1.6	4.0	4.0	4.0
General Fund	0	52,463	293,320	293,320	293,320
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Natural Medicine Program	<u>0</u>	<u>0</u>	<u>838,402</u>	<u>844,052</u>	<u>844,052</u>
FTE	0.0	0.0	4.1	4.9	4.9
General Fund	0	0	838,402	844,052	844,052
<b>SUBTOTAL - (C) Laboratory Services</b>	9,131,033	8,780,931	14,512,944	17,502,300	18,445,498
FTE	<u>76.3</u>	<u>78.0</u>	<u>84.5</u>	<u>85.3</u>	<u>85.3</u>
General Fund	1,061,089	1,136,664	2,244,584	3,632,566	3,458,615
Cash Funds	6,514,695	6,358,984	8,452,178	10,044,808	11,161,957
Reappropriated Funds	476,780	353,549	589,120	597,864	597,864
Federal Funds	1,078,469	931,734	3,227,062	3,227,062	3,227,062

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(D) Office of Emergency Preparedness and Response</b>					
Emergency Preparedness and Response Program	<u>22,312,529</u>	<u>25,799,024</u>	<u>14,730,715</u>	<u>14,924,408</u>	<u>18,493,222</u> *
FTE	21.5	21.1	21.1	21.1	21.1
General Fund	1,399,444	1,470,231	1,487,509	1,681,202	1,681,202
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	20,913,085	24,328,793	13,243,206	13,243,206	16,812,020
State Directed Emergency Preparedness and Response Activity	<u>742,829</u>	<u>746,189</u>	<u>1,714,131</u>	<u>2,438,662</u>	<u>2,438,662</u>
FTE	3.8	4.4	18.4	18.4	18.4
General Fund	742,829	746,189	1,714,131	2,438,662	2,438,662
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Appropriation to the Community Behavioral Health Disaster Preparedness and Response Cash Fund	<u>0</u>	<u>0</u>	<u>375,000</u>	<u>375,000</u>	<u>375,000</u>
General Fund	0	0	375,000	375,000	375,000
Appropriation to the Health Care Workforce and Resilience and Retention Cash Fund	<u>71,235,931</u> 122.4	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	14,500,000	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	56,735,931	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>SUBTOTAL - (D) Office of Emergency Preparedness and Response</b>	94,291,289	26,545,213	16,819,846	17,738,070	21,306,884
<i>FTE</i>	<u>147.7</u>	<u>25.5</u>	<u>39.5</u>	<u>39.5</u>	<u>39.5</u>
General Fund	16,642,273	2,216,420	3,576,640	4,494,864	4,494,864
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	77,649,016	24,328,793	13,243,206	13,243,206	16,812,020
<b>TOTAL - (3) Division of Disease Control and Public Health Response</b>	406,687,010	336,008,811	119,820,722	119,097,688	124,147,548
<i>FTE</i>	<u>334.3</u>	<u>335.2</u>	<u>357.6</u>	<u>322.1</u>	<u>320.1</u>
General Fund	24,622,794	22,181,437	15,521,010	25,283,218	24,885,403
General Fund Exempt	0	0	305,324	305,324	305,324
Cash Funds	10,040,300	9,380,201	26,249,469	15,963,359	17,842,220
Reappropriated Funds	353,561	381,801	664,800	674,173	674,173
Federal Funds	371,670,355	304,065,372	77,080,119	76,871,614	80,440,428

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
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**(3) LABORATORY SERVICES**

Chemistry and Microbiology Operating Expenses	<u>40</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	40	0	0	0	0
<b>TOTAL - (3) Laboratory Services</b>	40	0	0	0	0
<i>FTE</i>	<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	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	40	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
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**(4) AIR POLLUTION CONTROL DIVISION**

**(A) Administration**

Program Costs	<u>511,230</u>	<u>4,110,664</u>	<u>5,365,907</u>	<u>11,400,174</u>	<u>11,143,245</u> *
FTE	23.7	54.5	52.5	96.0	93.7
General Fund	493,460	3,838,131	1,296,409	5,340,774	5,083,845
Cash Funds	(342,795)	(145,125)	3,885,997	5,875,899	5,875,899
Reappropriated Funds	0	0	0	0	0
Federal Funds	360,565	417,658	183,501	183,501	183,501
Indirect Cost Assessment	<u>3,603,355</u>	<u>3,078,886</u>	<u>4,163,668</u>	<u>4,163,668</u>	<u>4,163,668</u>
General Fund	0	0	0	0	0
Cash Funds	2,967,880	2,661,322	3,491,683	3,491,683	3,491,683
Reappropriated Funds	0	0	0	0	0
Federal Funds	635,475	417,565	671,985	671,985	671,985

<b>SUBTOTAL - (A) Administration</b>	4,114,585	7,189,550	9,529,575	15,563,842	15,306,913
FTE	<u>23.7</u>	<u>54.5</u>	<u>52.5</u>	<u>96.0</u>	<u>93.7</u>
General Fund	493,460	3,838,131	1,296,409	5,340,774	5,083,845
Cash Funds	2,625,085	2,516,196	7,377,680	9,367,582	9,367,582
Reappropriated Funds	0	0	0	0	0
Federal Funds	996,040	835,222	855,486	855,486	855,486

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(B) Technical Services</b>					
Personal Services	<u>2,936,116</u>	<u>2,612,450</u>	<u>4,751,796</u>	<u>4,647,681</u>	<u>4,647,681</u>
FTE	33.7	33.7	44.7	40.7	40.7
General Fund	0	0	367,806	76,398	76,398
Cash Funds	2,324,745	2,240,243	3,160,760	3,348,053	3,348,053
Reappropriated Funds	0	0	0	0	0
Federal Funds	611,371	372,207	1,223,230	1,223,230	1,223,230
Operating Expenses	<u>374,440</u>	<u>2,785,297</u>	<u>3,266,050</u>	<u>3,024,213</u>	<u>3,024,213</u>
General Fund	0	2,059,142	241,837	0	0
Cash Funds	282,410	253,898	2,773,490	2,773,490	2,773,490
Reappropriated Funds	0	0	0	0	0
Federal Funds	92,030	472,257	250,723	250,723	250,723
Local Contracts	<u>675,289</u>	<u>697,898</u>	<u>912,938</u>	<u>1,212,938</u>	<u>1,212,938</u> *
General Fund	0	0	0	0	0
Cash Funds	552,474	548,459	567,638	867,638	867,638
Reappropriated Funds	0	0	0	0	0
Federal Funds	122,815	149,439	345,300	345,300	345,300
<b>SUBTOTAL - (B) Technical Services</b>	3,985,845	6,095,644	8,930,784	8,884,832	8,884,832
FTE	<u>33.7</u>	<u>33.7</u>	<u>44.7</u>	<u>40.7</u>	<u>40.7</u>
General Fund	0	2,059,142	609,643	76,398	76,398
Cash Funds	3,159,629	3,042,600	6,501,888	6,989,181	6,989,181
Reappropriated Funds	0	0	0	0	0
Federal Funds	826,216	993,902	1,819,253	1,819,253	1,819,253

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(C) Mobile Sources</b>					
Personal Services	<u>2,924,921</u>	<u>3,342,152</u>	<u>4,633,790</u>	<u>4,507,649</u>	<u>4,507,649</u>
FTE	26.7	27.4	39.9	36.2	36.2
General Fund	23,449	75,405	118,484	239,438	239,438
Cash Funds	2,492,832	2,937,450	4,103,906	3,856,811	3,856,811
Reappropriated Funds	0	0	0	0	0
Federal Funds	408,640	329,297	411,400	411,400	411,400
Operating Expenses	<u>200,976</u>	<u>177,485 8.3</u>	<u>22,369,984 0.0</u>	<u>44,061,034 0.0</u>	<u>44,061,034 0.0</u>
General Fund	9,405	7,950	47,276	3,375	3,375
Cash Funds	188,406	169,535	22,245,452	43,980,403	43,980,403
Reappropriated Funds	0	0	0	0	0
Federal Funds	3,165	0	77,256	77,256	77,256
Diesel Inspection/Maintenance Program	<u>632,587</u>	<u>389,775</u>	<u>720,187</u>	<u>734,503</u>	<u>734,503</u>
FTE	6.3	6.3	6.3	6.3	6.3
General Fund	0	0	0	0	0
Cash Funds	632,587	389,775	720,187	734,503	734,503
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Mechanic Certification Program	<u>5,657</u>	<u>5,369</u>	<u>7,000</u>	<u>7,000</u>	<u>7,000</u>
General Fund	0	0	0	0	0
Cash Funds	5,657	5,369	7,000	7,000	7,000
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Local Grants	<u>62,429</u>	<u>227,719</u>	<u>1,400,325</u>	<u>77,597</u>	<u>77,597</u>
General Fund	0	169,322	1,322,728	0	0
Cash Funds	62,429	58,397	77,597	77,597	77,597
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Transfer to Clean Fleet Enterprise	<u>445,877</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	445,877	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
<b>SUBTOTAL - (C) Mobile Sources</b>	<b>4,272,447</b>	<b>4,142,500</b>	<b>29,131,286</b>	<b>49,387,783</b>	<b>49,387,783</b>
FTE	<u>33.0</u>	<u>42.0</u>	<u>46.2</u>	<u>42.5</u>	<u>42.5</u>
General Fund	478,731	252,677	1,488,488	242,813	242,813
Cash Funds	3,381,911	3,560,527	27,154,142	48,656,314	48,656,314
Reappropriated Funds	0	0	0	0	0
Federal Funds	411,805	329,297	488,656	488,656	488,656

**(D) Stationary Sources**

Personal Services	<u>10,663,943</u>	<u>15,246,580</u>	<u>20,855,030</u>	<u>25,192,841</u>	<u>25,192,841</u> *
FTE	144.7	202.1	234.1	210.3	210.3
General Fund	1,362,063	10,398,331	1,891,764	1,112,906	1,112,906
Cash Funds	7,327,646	3,278,450	17,541,055	22,657,724	22,657,724
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,974,234	1,569,800	1,422,211	1,422,211	1,422,211



*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Operating Expenses	<u>989,133</u>	<u>1,483,891</u>	<u>2,073,398</u>	<u>2,027,393</u>	<u>2,027,393</u>
General Fund	745,708	1,112,035	37,177	11,172	11,172
Cash Funds	168,007	210,845	1,987,307	1,967,307	1,967,307
Reappropriated Funds	0	0	0	0	0
Federal Funds	75,418	161,012	48,914	48,914	48,914
Local Contracts	<u>944,518</u>	<u>1,495,944</u>	<u>798,500</u>	<u>1,298,500</u>	<u>1,298,500</u> *
General Fund	0	0	0	0	0
Cash Funds	641,092	652,039	700,000	1,200,000	1,200,000
Reappropriated Funds	0	0	0	0	0
Federal Funds	303,426	843,905	98,500	98,500	98,500
Preservation of the Ozone Layer	<u>152,898</u>	<u>89,055</u>	<u>214,121</u>	<u>218,377</u>	<u>218,377</u>
FTE	2.0	2.0	2.0	2.0	2.0
General Fund	0	0	0	0	0
Cash Funds	152,898	89,055	214,121	218,377	218,377
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Appropriation to the Stationary Sources Cash Fund	<u>0</u>	<u>25,500,000</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	0	25,500,000	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>SUBTOTAL - (D) Stationary Sources</b>	12,750,492	43,815,471	23,941,049	28,737,111	28,737,111
<i>FTE</i>	<u>146.7</u>	<u>204.1</u>	<u>236.1</u>	<u>212.3</u>	<u>212.3</u>
General Fund	2,107,771	37,010,366	1,928,941	1,124,078	1,124,078
Cash Funds	8,289,643	4,230,388	20,442,483	26,043,408	26,043,408
Reappropriated Funds	0	0	0	0	0
Federal Funds	2,353,078	2,574,717	1,569,625	1,569,625	1,569,625
<b>(E) Climate Services</b>					
Program Costs	<u>0</u>	<u>1,618,753 14.0</u>	<u>1,903,379 15.0</u>	<u>1,903,379 15.0</u>	
General Fund	0	0	0	0	
Cash Funds	0	1,618,753	1,903,379	1,903,379	
Reappropriated Funds	0	0	0	0	
Federal Funds	0	0	0	0	
<b>SUBTOTAL - (E) Climate Services</b>	0	1,618,753	1,903,379	1,903,379	
<i>FTE</i>	<u>0.0</u>	<u>14.0</u>	<u>15.0</u>	<u>15.0</u>	
General Fund	0	0	0	0	
Cash Funds	0	1,618,753	1,903,379	1,903,379	
Reappropriated Funds	0	0	0	0	
Federal Funds	0	0	0	0	
<b>TOTAL - (4) Air Pollution Control Division</b>	25,123,369	61,243,166	73,151,447	104,476,947	104,220,018
<i>FTE</i>	<u>237.1</u>	<u>334.3</u>	<u>393.5</u>	<u>406.5</u>	<u>404.2</u>
General Fund	3,079,962	43,160,317	5,323,481	6,784,063	6,527,134
Cash Funds	17,456,268	13,349,710	63,094,946	92,959,864	92,959,864
Reappropriated Funds	0	0	0	0	0
Federal Funds	4,587,139	4,733,138	4,733,020	4,733,020	4,733,020

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
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**(5) WATER QUALITY CONTROL DIVISION**

**(A) Administration**

Administration Program	<u>2,148,100</u>	<u>2,349,999</u>	<u>3,344,359</u>	<u>3,541,580</u>	<u>3,541,580</u> *
FTE	19.4	19.4	30.8	33.3	33.3
General Fund	516,101	540,172	738,188	768,423	768,423
Cash Funds	363,721	470,855	492,220	514,531	514,531
Reappropriated Funds	0	0	1,065,779	1,210,454	1,210,454
Federal Funds	1,268,278	1,338,972	1,048,172	1,048,172	1,048,172

Appropriation to the Mobile Home Park Water

Quality Fund	<u>0</u>	<u>0</u>	<u>3,611,859</u>	<u>3,611,859</u>	<u>3,611,859</u>
General Fund	0	0	3,611,859	3,611,859	3,611,859

<b>SUBTOTAL - (A) Administration</b>	<u>2,148,100</u>	<u>2,349,999</u>	<u>6,956,218</u>	<u>7,153,439</u>	<u>7,153,439</u>
FTE	<u>19.4</u>	<u>19.4</u>	<u>30.8</u>	<u>33.3</u>	<u>33.3</u>
General Fund	516,101	540,172	4,350,047	4,380,282	4,380,282
Cash Funds	363,721	470,855	492,220	514,531	514,531
Reappropriated Funds	0	0	1,065,779	1,210,454	1,210,454
Federal Funds	1,268,278	1,338,972	1,048,172	1,048,172	1,048,172

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(B) Clean Water Sectors</b>					
Commerce and Industry Sector	<u>2,036,640</u>	<u>2,034,219</u>	<u>2,349,801</u>	<u>2,437,887</u>	<u>2,437,887</u>
FTE	25.4	25.4	25.4	25.4	25.4
General Fund	938,101	976,224	1,028,455	1,070,579	1,070,579
Cash Funds	875,380	898,328	1,014,014	1,059,976	1,059,976
Reappropriated Funds	0	0	0	0	0
Federal Funds	223,159	159,668	307,332	307,332	307,332
Construction Sector	<u>1,527,926</u>	<u>1,781,123</u>	<u>2,085,536</u>	<u>2,168,578</u>	<u>2,168,578</u>
FTE	20.3	20.3	23.3	23.3	23.3
General Fund	279,412	292,929	306,260	318,804	318,804
Cash Funds	1,134,667	1,306,587	1,555,311	1,625,809	1,625,809
Reappropriated Funds	0	0	0	0	0
Federal Funds	113,847	181,607	223,965	223,965	223,965
Municipal Separate Storm Sewer System Sector	<u>236,143</u>	<u>249,823</u>	<u>279,258</u>	<u>289,769</u>	<u>289,769</u>
FTE	3.1	3.1	3.1	3.1	3.1
General Fund	111,676	116,049	121,551	126,530	126,530
Cash Funds	112,470	117,793	122,054	127,586	127,586
Reappropriated Funds	0	0	0	0	0
Federal Funds	11,997	15,981	35,653	35,653	35,653
Pesticides Sector	<u>183,396</u>	<u>208,995</u>	<u>303,539</u>	<u>311,902</u>	<u>311,902</u>
FTE	1.0	1.0	1.0	1.0	1.0
General Fund	180,274	192,627	197,461	205,549	205,549
Cash Funds	1,227	5,075	6,078	6,353	6,353
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,895	11,294	100,000	100,000	100,000

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Public and Private Utilities Sector	<u>3,223,079</u>	<u>3,603,575</u>	<u>4,086,471</u>	<u>4,242,267</u>	<u>4,242,267</u>
FTE	44.3	44.3	47.3	47.3	47.3
General Fund	1,526,786	1,596,366	1,671,504	1,739,967	1,739,967
Cash Funds	1,494,612	1,868,809	1,926,720	2,014,053	2,014,053
Reappropriated Funds	0	0	0	0	0
Federal Funds	201,681	138,400	488,247	488,247	488,247
Water Quality Certification Sector	<u>25,884</u>	<u>74,096</u>	<u>252,857</u>	<u>262,381</u>	<u>262,381</u>
FTE	1.5	1.5	1.5	1.5	1.5
General Fund	8,861	9,888	10,280	10,701	10,701
Cash Funds	4,491	58,544	200,821	209,924	209,924
Reappropriated Funds	0	0	0	0	0
Federal Funds	12,532	5,664	41,756	41,756	41,756
<b>SUBTOTAL - (B) Clean Water Sectors</b>	7,233,068	7,951,831	9,357,462	9,712,784	9,712,784
FTE	<u>95.6</u>	<u>95.6</u>	<u>101.6</u>	<u>101.6</u>	<u>101.6</u>
General Fund	3,045,110	3,184,082	3,335,511	3,472,130	3,472,130
Cash Funds	3,622,847	4,255,136	4,824,998	5,043,701	5,043,701
Reappropriated Funds	0	0	0	0	0
Federal Funds	565,111	512,614	1,196,953	1,196,953	1,196,953

**(C) Clean Water Program**

Clean Water Program Costs	<u>3,065,683</u>	<u>3,458,835</u>	<u>2,940,166</u>	<u>3,543,762</u>	<u>3,295,270</u> *
FTE	1.3	2.0	20.7	27.3	25.9
General Fund	425,222	499,696	2,145,950	2,943,840	2,695,348
Cash Funds	117,130	112,651	394,716	188,074	188,074
Reappropriated Funds	87,824	96,665	99,500	111,848	111,848
Federal Funds	2,435,507	2,749,824	300,000	300,000	300,000

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Local Grants and Contracts	<u>4,397,648</u>	<u>5,994,930</u>	<u>3,313,978</u>	<u>3,313,978</u>	<u>3,313,978</u>
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	0	0	1	1	1
Cash Funds	1,311,387	2,529,245	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	3,086,261	3,465,685	3,313,977	3,313,977	3,313,977
Water Quality Improvement	<u>1,366,196</u>	<u>744,564</u>	<u>1,852,901 0.0</u>	<u>1,936,888 0.0</u>	<u>1,936,888 0.0</u>
General Fund	0	0	0	0	0
Cash Funds	1,366,196	744,564	1,852,901	1,936,888	1,936,888
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
<b>SUBTOTAL - (C) Clean Water Program</b>	8,829,527	10,198,329	8,107,045	8,794,628	8,546,136
FTE	<u>1.3</u>	<u>2.0</u>	<u>20.7</u>	<u>27.3</u>	<u>25.9</u>
General Fund	425,222	499,696	2,145,951	2,943,841	2,695,349
Cash Funds	2,794,713	3,386,460	2,247,617	2,124,962	2,124,962
Reappropriated Funds	87,824	96,665	99,500	111,848	111,848
Federal Funds	5,521,768	6,215,508	3,613,977	3,613,977	3,613,977

**(D) Drinking Water Program**

Personal Services	<u>8,449,059</u>	<u>8,802,303</u>	<u>11,189,559</u>	<u>11,848,519</u>	<u>11,848,519</u>
FTE	64.4	72.8	79.3	79.7	79.7
General Fund	942,029	1,536,303	2,307,822	2,410,466	2,410,466
Cash Funds	443,684	502,177	462,003	484,319	484,319
Reappropriated Funds	0	0	2,303,603	2,837,603	2,837,603
Federal Funds	7,063,346	6,763,823	6,116,131	6,116,131	6,116,131

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Operating Expenses	<u>1,016,544</u>	<u>6,375,926</u>	<u>905,985</u>	<u>905,985</u>	<u>905,985</u>
General Fund	123,909	546,915	237,700	237,700	237,700
Cash Funds	458,790	3,841,718	24,815	24,815	24,815
Reappropriated Funds	0	1,114,368	0	0	0
Federal Funds	433,845	872,925	643,470	643,470	643,470
Appropriation to the Mobile Home Park Water					
Quality Fund	<u>0</u>	<u>0</u>	<u>0</u>	<u>1,106,582</u>	<u>1,106,582</u>
General Fund	0	0	0	1,106,582	1,106,582
Appropriation to the School and Child Care Clean					
Drinking Water Cash Fund	<u>0</u>	<u>21,000,000</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	0	21,000,000	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
<b>SUBTOTAL - (D) Drinking Water Program</b>	9,465,603	36,178,228	12,095,544	13,861,086	13,861,086
FTE	<u>64.4</u>	<u>72.8</u>	<u>79.3</u>	<u>79.7</u>	<u>79.7</u>
General Fund	1,065,938	23,083,217	2,545,522	3,754,748	3,754,748
Cash Funds	902,474	4,343,895	486,818	509,134	509,134
Reappropriated Funds	0	1,114,368	2,303,603	2,837,603	2,837,603
Federal Funds	7,497,191	7,636,748	6,759,601	6,759,601	6,759,601

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(E) Indirect Cost Assessments</b>					
Indirect Cost Assessment	<u>3,312,636</u>	<u>2,899,991</u>	<u>3,531,018</u>	<u>3,531,018</u>	<u>3,531,018</u>
General Fund	0	0	0	0	0
Cash Funds	1,217,601	1,180,174	1,451,368	1,451,368	1,451,368
Reappropriated Funds	0	0	0	0	0
Federal Funds	2,095,035	1,719,818	2,079,650	2,079,650	2,079,650
<b>SUBTOTAL - (E) Indirect Cost Assessments</b>	3,312,636	2,899,991	3,531,018	3,531,018	3,531,018
<i>FTE</i>	<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	0
Cash Funds	1,217,601	1,180,174	1,451,368	1,451,368	1,451,368
Reappropriated Funds	0	0	0	0	0
Federal Funds	2,095,035	1,719,818	2,079,650	2,079,650	2,079,650
<b>TOTAL - (5) Water Quality Control Division</b>	30,988,934	59,578,380	40,047,287	43,052,955	42,804,463
<i>FTE</i>	<u>180.7</u>	<u>189.8</u>	<u>232.4</u>	<u>241.9</u>	<u>240.5</u>
General Fund	5,052,371	27,307,167	12,377,031	14,551,001	14,302,509
Cash Funds	8,901,356	13,636,520	9,503,021	9,643,696	9,643,696
Reappropriated Funds	87,824	1,211,033	3,468,882	4,159,905	4,159,905
Federal Funds	16,947,383	17,423,659	14,698,353	14,698,353	14,698,353



*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
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**(6) HAZARDOUS MATERIALS AND WASTE MANAGEMENT DIVISION**

**(A) Administration**

Program Costs	<u>653,661</u>	<u>658,260</u>	<u>2,365,422</u>	<u>2,387,249</u>	<u>2,387,249</u>
FTE	13.2	13.2	14.2	13.7	13.7
General Fund	0	0	74,516	0	0
Cash Funds	650,031	657,671	1,517,205	1,613,548	1,613,548
Reappropriated Funds	0	0	0	0	0
Federal Funds	3,630	590	773,701	773,701	773,701
Indirect Cost Assessment	<u>3,000,195</u>	<u>2,429,165</u>	<u>3,049,000</u>	<u>3,049,000</u>	<u>3,049,000</u>
General Fund	0	0	0	0	0
Cash Funds	2,076,296	1,700,116	2,128,604	2,128,604	2,128,604
Reappropriated Funds	9,475	9,554	9,554	9,554	9,554
Federal Funds	914,424	719,495	910,842	910,842	910,842

<b>SUBTOTAL - (A) Administration</b>	<b>3,653,856</b>	<b>3,087,426</b>	<b>5,414,422</b>	<b>5,436,249</b>	<b>5,436,249</b>
FTE	<u>13.2</u>	<u>13.2</u>	<u>14.2</u>	<u>13.7</u>	<u>13.7</u>
General Fund	0	0	74,516	0	0
Cash Funds	2,726,327	2,357,787	3,645,809	3,742,152	3,742,152
Reappropriated Funds	9,475	9,554	9,554	9,554	9,554
Federal Funds	918,054	720,085	1,684,543	1,684,543	1,684,543

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(B) Hazardous Waste Control Program</b>					
Personal Services	<u>3,697,004</u>	<u>3,533,940</u>	<u>4,092,696</u>	<u>4,161,478</u>	<u>4,161,478</u>
FTE	25.9	25.9	25.9	25.9	25.9
General Fund	0	0	0	0	0
Cash Funds	1,560,193	1,625,918	1,731,196	1,799,978	1,799,978
Reappropriated Funds	0	0	0	0	0
Federal Funds	2,136,811	1,908,022	2,361,500	2,361,500	2,361,500
Operating Expenses	<u>43,744</u>	<u>106,591</u>	<u>130,349</u>	<u>130,349</u>	<u>130,349</u>
General Fund	0	0	0	0	0
Cash Funds	10,611	65,939	74,380	74,380	74,380
Reappropriated Funds	0	0	0	0	0
Federal Funds	33,133	40,652	55,969	55,969	55,969
Emerging Contaminants	<u>0</u>	<u>0</u>	<u>77,040</u>	<u>77,040</u>	<u>77,040</u>
FTE	0.0	0.0	0.9	0.9	0.9
General Fund	0	0	77,040	77,040	77,040
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
<b>SUBTOTAL - (B) Hazardous Waste Control</b>					
<b>Program</b>	3,740,748	3,640,531	4,300,085	4,368,867	4,368,867
FTE	<u>25.9</u>	<u>25.9</u>	<u>26.8</u>	<u>26.8</u>	<u>26.8</u>
General Fund	0	0	77,040	77,040	77,040
Cash Funds	1,570,804	1,691,857	1,805,576	1,874,358	1,874,358
Reappropriated Funds	0	0	0	0	0
Federal Funds	2,169,944	1,948,674	2,417,469	2,417,469	2,417,469

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
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**(C) Solid Waste Control Program**

Program Costs	<u>2,739,308</u>	<u>2,638,878</u>	<u>3,429,929</u>	<u>3,671,681</u>	<u>3,475,101</u> *
FTE	21.5	22.3	23.7	25.7	23.8
General Fund	0	96,004	137,899	335,020	138,440
Cash Funds	2,739,308	2,542,874	3,121,328	3,245,341	3,245,341
Reappropriated Funds	0	0	170,702	91,320	91,320
Federal Funds	0	0	0	0	0
Appropriation to the Closed Landfill Remediation					
Grant Program Fund	<u>0</u>	<u>0</u>	<u>15,000,000</u>	<u>0</u>	<u>0</u>
General Fund	0	0	15,000,000	0	0

<b>SUBTOTAL - (C) Solid Waste Control Program</b>	2,739,308	2,638,878	18,429,929	3,671,681	3,475,101
FTE	<u>21.5</u>	<u>22.3</u>	<u>23.7</u>	<u>25.7</u>	<u>23.8</u>
General Fund	0	96,004	15,137,899	335,020	138,440
Cash Funds	2,739,308	2,542,874	3,121,328	3,245,341	3,245,341
Reappropriated Funds	0	0	170,702	91,320	91,320
Federal Funds	0	0	0	0	0

**(D) Contaminated Site Cleanups and Remediation Programs**

Personal Services	<u>3,179,511</u>	<u>4,952,448</u>	<u>6,476,773</u>	<u>4,717,615</u>	<u>4,717,615</u>
FTE	18.8	18.8	18.8	18.8	18.8
General Fund	0	0	0	0	0
Cash Funds	688,325	768,236	2,827,959	1,068,801	1,068,801
Reappropriated Funds	0	0	0	0	0
Federal Funds	2,491,186	4,184,212	3,648,814	3,648,814	3,648,814

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	<b>FY 2021-22 Actual</b>	<b>FY 2022-23 Actual</b>	<b>FY 2023-24 Appropriation</b>	<b>FY 2024-25 Request</b>	<b>FY 2024-25 Recommendation</b>
Operating Expenses	<u>104,004</u>	<u>191,737</u>	<u>251,563</u>	<u>251,563</u>	<u>251,563</u>
General Fund	0	0	0	0	0
Cash Funds	6,109	9,730	10,663	10,663	10,663
Reappropriated Funds	0	0	0	0	0
Federal Funds	97,895	182,007	240,900	240,900	240,900
Contaminated Sites Operation and Maintenance	<u>2,708,555</u>	<u>2,943,149</u>	<u>13,307,700</u>	<u>13,419,352</u>	<u>13,419,352</u>
General Fund	0	0	0	0	0
Cash Funds	1,386,620	1,813,829	2,810,215	2,921,867	2,921,867
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,321,935	1,129,320	10,497,485	10,497,485	10,497,485
Brownsfield Cleanup Program	<u>621,315</u>	<u>1,322,149</u>	<u>250,000</u>	<u>250,000</u>	<u>250,000</u>
General Fund	0	0	0	0	0
Cash Funds	126,672	439,883	250,000	250,000	250,000
Reappropriated Funds	0	0	0	0	0
Federal Funds	494,643	882,267	0	0	0
Transfer to the Department of Law for CERCLA					
Related Costs	<u>404,839</u>	<u>431,666</u>	<u>771,537</u>	<u>771,537</u>	<u>771,537</u>
General Fund	0	0	0	0	0
Cash Funds	404,839	431,666	771,537	771,537	771,537
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
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	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Uranium Mill Tailings Remedial Action Program	<u>214,188</u>	<u>226,831</u>	<u>326,866</u>	<u>334,442</u>	<u>334,442</u>
FTE	2.5	2.5	2.5	2.5	2.5
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	148,522	114,037	307,509	315,085	315,085
Federal Funds	65,666	112,794	19,357	19,357	19,357
Rocky Flats Program Costs	<u>100,080</u>	<u>176,230</u>	<u>119,803</u>	<u>119,803</u>	<u>119,803</u>
FTE	2.1	2.1	2.1	2.1	2.1
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	100,080	176,230	119,803	119,803	119,803
<b>SUBTOTAL - (D) Contaminated Site Cleanups and Remediation Programs</b>	7,332,492	10,244,209	21,504,242	19,864,312	19,864,312
FTE	<u>23.4</u>	<u>23.4</u>	<u>23.4</u>	<u>23.4</u>	<u>23.4</u>
General Fund	0	0	0	0	0
Cash Funds	2,612,565	3,463,343	6,670,374	5,022,868	5,022,868
Reappropriated Funds	148,522	114,037	307,509	315,085	315,085
Federal Funds	4,571,405	6,666,829	14,526,359	14,526,359	14,526,359

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(E) Radiation Management</b>					
Personal Services	<u>2,008,974</u>	<u>2,069,646</u>	<u>2,205,906</u>	<u>2,286,040</u>	<u>2,286,040</u>
FTE	20.7	20.7	20.7	20.7	20.7
General Fund	0	0	0	0	0
Cash Funds	1,853,393	1,859,990	2,016,929	2,097,063	2,097,063
Reappropriated Funds	0	0	0	0	0
Federal Funds	155,581	209,657	188,977	188,977	188,977
Operating Expenses	<u>372,852</u>	<u>464,343</u>	<u>1,631,630</u>	<u>1,631,630</u>	<u>1,631,630</u>
General Fund	0	0	1,151,412	1,151,412	1,151,412
Cash Funds	275,011	208,541	315,565	315,565	315,565
Reappropriated Funds	0	0	0	0	0
Federal Funds	97,841	255,802	164,653	164,653	164,653
<b>SUBTOTAL - (E) Radiation Management</b>	<b>2,381,826</b>	<b>2,533,989</b>	<b>3,837,536</b>	<b>3,917,670</b>	<b>3,917,670</b>
FTE	<u>20.7</u>	<u>20.7</u>	<u>20.7</u>	<u>20.7</u>	<u>20.7</u>
General Fund	0	0	1,151,412	1,151,412	1,151,412
Cash Funds	2,128,404	2,068,531	2,332,494	2,412,628	2,412,628
Reappropriated Funds	0	0	0	0	0
Federal Funds	253,422	465,458	353,630	353,630	353,630

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(F) Waste Tire Program</b>					
Waste Tire Program Administration and Cleanup					
Program Enforcement	<u>1,758,752</u>	<u>2,200,835</u>	<u>2,225,511</u>	<u>2,958,932</u>	<u>3,058,932</u> *
FTE	7.8	7.8	7.8	7.8	7.8
General Fund	0	0	0	0	0
Cash Funds	1,758,752	2,200,835	2,225,511	2,958,932	3,058,932
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Waste Tire Rebates	<u>1,922,069</u>	<u>3,886,335</u>	<u>6,525,000</u>	<u>6,525,000</u>	<u>6,525,000</u>
General Fund	0	0	0	0	0
Cash Funds	1,922,069	3,886,335	6,525,000	6,525,000	6,525,000
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
<b>SUBTOTAL - (F) Waste Tire Program</b>	<b>3,680,821</b>	<b>6,087,171</b>	<b>8,750,511</b>	<b>9,483,932</b>	<b>9,583,932</b>
FTE	<u>7.8</u>	<u>7.8</u>	<u>7.8</u>	<u>7.8</u>	<u>7.8</u>
General Fund	0	0	0	0	0
Cash Funds	3,680,821	6,087,171	8,750,511	9,483,932	9,583,932
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
<b>TOTAL - (6) Hazardous Materials and Waste Management Division</b>	<b>23,529,051</b>	<b>28,232,203</b>	<b>62,236,725</b>	<b>46,742,711</b>	<b>46,646,131</b>
FTE	<u>112.5</u>	<u>113.3</u>	<u>116.6</u>	<u>118.1</u>	<u>116.2</u>
General Fund	0	96,004	16,440,867	1,563,472	1,366,892
Cash Funds	15,458,229	18,211,562	26,326,092	25,781,279	25,881,279
Reappropriated Funds	157,997	123,591	487,765	415,959	415,959
Federal Funds	7,912,825	9,801,046	18,982,001	18,982,001	18,982,001

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

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	<b>FY 2021-22 Actual</b>	<b>FY 2022-23 Actual</b>	<b>FY 2023-24 Appropriation</b>	<b>FY 2024-25 Request</b>	<b>FY 2024-25 Recommendation</b>
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*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
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**(7) DIVISION OF ENVIRONMENTAL HEALTH AND SUSTAINABILITY**

Administration and Support	<u>792,374</u>	<u>992,101</u>	<u>981,660</u>	<u>999,018</u>	<u>999,018</u>
FTE	7.5	7.5	7.6	7.5	7.5
General Fund	513,408	535,914	567,879	579,051	579,051
Cash Funds	181,748	128,156	312,067	318,253	318,253
Reappropriated Funds	0	0	0	0	0
Federal Funds	97,218	328,030	101,714	101,714	101,714
Environmental Health Programs	<u>4,404,296</u>	<u>3,192,616</u>	<u>3,839,333</u>	<u>3,892,462</u>	<u>3,892,462</u>
FTE	22.3	22.3	25.8	25.8	25.8
General Fund	706,579	1,096,756	1,287,496	914,486	914,486
Cash Funds	1,365,149	1,354,445	1,981,044	2,402,331	2,402,331
Reappropriated Funds	1,671,397	85,583	117,075	121,927	121,927
Federal Funds	661,171	655,832	453,718	453,718	453,718
Sustainability Programs	<u>509,271</u>	<u>712,143</u>	<u>793,433</u>	<u>797,421</u>	<u>797,421</u>
FTE	6.1	6.1	6.1	6.1	6.1
General Fund	0	0	0	0	0
Cash Funds	167,738	179,737	201,214	205,202	205,202
Reappropriated Funds	0	0	0	0	0
Federal Funds	341,533	532,406	592,219	592,219	592,219

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	<b>FY 2021-22 Actual</b>	<b>FY 2022-23 Actual</b>	<b>FY 2023-24 Appropriation</b>	<b>FY 2024-25 Request</b>	<b>FY 2024-25 Recommendation</b>
Animal Feeding Operations Program	<u>429,407</u>	<u>517,661</u>	<u>551,735</u>	<u>563,807</u>	<u>563,807</u>
FTE	3.4	3.4	3.4	3.4	3.4
General Fund	101,507	104,316	108,496	111,782	111,782
Cash Funds	327,900	413,345	443,239	452,025	452,025
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Recycling Resources Economic Opportunity Program	<u>2,797,516</u>	<u>3,516,808</u>	<u>5,296,899</u>	<u>5,401,890</u>	<u>5,401,890</u>
FTE	2.6	2.6	2.6	2.6	2.6
General Fund	0	0	0	0	0
Cash Funds	2,797,516	3,516,808	5,296,899	5,401,890	5,401,890
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Oil and Gas Consultation Program	<u>86,422</u>	<u>117,561</u>	<u>120,346</u>	<u>122,731</u>	<u>122,731</u>
FTE	0.9	0.9	0.9	0.9	0.9
General Fund	0	0	0	0	0
Cash Funds	86,422	117,561	120,346	122,731	122,731
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Household Take-back Medication Program	<u>539,717</u>	<u>541,328</u>	<u>547,908</u>	<u>564,501</u>	<u>564,501</u>
FTE	0.3	0.3	0.3	0.3	0.3
General Fund	539,717	541,328	547,908	564,501	564,501
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Cottage Foods Program	<u>91,195</u>	<u>93,749</u>	<u>97,714</u>	<u>100,673</u>	<u>100,673</u>
FTE	1.2	1.2	1.2	1.2	1.2
General Fund	91,195	93,749	97,714	100,673	100,673
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
 Toxicology and Environmental Epidemiology Unit	 <u>435,454</u>	 <u>549,814</u>	 <u>2,248,848</u>	 <u>3,064,229</u>	 <u>3,066,662</u> *
FTE	11.0	15.0	15.0	16.7	16.7
General Fund	77,784	231,376	764,207	1,565,088	1,567,521
Cash Funds	357,670	318,437	731,538	746,038	746,038
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	753,103	753,103	753,103
 Indirect Costs Assessment	 <u>1,091,514</u>	 <u>875,887</u>	 <u>1,145,761</u>	 <u>1,145,761</u>	 <u>1,145,761</u>
General Fund	0	0	0	0	0
Cash Funds	679,702	543,079	803,745	803,745	803,745
Reappropriated Funds	0	0	0	0	0
Federal Funds	411,812	332,808	342,016	342,016	342,016
 <b>TOTAL - (7) Division of Environmental Health and Sustainability</b>	 11,177,166	 11,109,668	 15,623,637	 16,652,493	 16,654,926
FTE	<u>55.3</u>	<u>59.3</u>	<u>62.9</u>	<u>64.5</u>	<u>64.5</u>
General Fund	2,030,190	2,603,440	3,373,700	3,835,581	3,838,014
Cash Funds	5,963,845	6,571,568	9,890,092	10,452,215	10,452,215
Reappropriated Funds	1,671,397	85,583	117,075	121,927	121,927
Federal Funds	1,511,734	1,849,077	2,242,770	2,242,770	2,242,770

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(8) OFFICE OF STI/HIV/VH</b>					
<b>(A) Administration and Support</b>					
Administration and Support	<u>267,890</u>	<u>268,977</u>	<u>273,929</u>	<u>278,610</u>	<u>278,610</u>
FTE	2.5	2.5	2.5	2.5	2.5
General Fund	267,890	268,977	273,929	278,610	278,610
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Sexually Transmitted Infections, HIV and AIDS,					
Personal Srv.	<u>4,130,666</u>	<u>5,463,217</u>	<u>3,758,536</u>	<u>4,047,692</u>	<u>4,040,326</u> *
FTE	39.9	39.9	40.9	44.8	44.8
General Fund	0	0	64,316	346,642	339,276
Cash Funds	73,367	91,995	129,820	135,992	135,992
Reappropriated Funds	0	14,017	14,017	14,675	14,675
Federal Funds	4,057,299	5,357,206	3,550,383	3,550,383	3,550,383
Sexually Transmitted Infections, HIV and AIDS,					
Operating Exp	<u>6,393,006</u>	<u>7,760,023</u>	<u>7,361,317</u>	<u>9,006,121</u>	<u>9,490,590</u> *
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	500,000	0	1,143,993	2,788,797	2,802,741
Cash Funds	2,123,633	2,213,364	4,882,189	4,882,189	5,352,714
Reappropriated Funds	0	0	1,235	1,235	1,235
Federal Funds	3,769,373	5,546,659	1,333,900	1,333,900	1,333,900

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	<b>FY 2021-22 Actual</b>	<b>FY 2022-23 Actual</b>	<b>FY 2023-24 Appropriation</b>	<b>FY 2024-25 Request</b>	<b>FY 2024-25 Recommendation</b>
Ryan White Act, Personal Services	<u>1,800,991</u>	<u>1,833,796</u>	<u>2,424,807</u>	<u>2,425,208</u>	<u>2,425,208</u>
FTE	10.2	10.2	10.2	10.2	10.2
General Fund	0	23,365	23,365	23,766	23,766
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,800,991	1,810,431	2,401,442	2,401,442	2,401,442
Ryan White Act, Operating Expenses	<u>14,604,698</u>	<u>13,302,703</u>	<u>23,391,242</u>	<u>23,391,242</u>	<u>24,230,409</u>
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	1,448,300	1,451,065	1,451,065	1,451,065	1,451,065
Cash Funds	4,003,803	3,254,580	6,388,077	6,388,077	7,227,244
Reappropriated Funds	0	0	0	0	0
Federal Funds	9,152,595	8,597,058	15,552,100	15,552,100	15,552,100
Viral Hepatitis Program Costs	<u>436,754</u>	<u>716,440</u>	<u>200,000</u>	<u>200,000</u>	<u>200,000</u>
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	198,176	195,089	200,000	200,000	200,000
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	238,578	521,351	0	0	0
Indirect Costs Assessment	<u>1,698,463</u>	<u>1,335,396</u>	<u>1,078,076</u>	<u>1,078,076</u>	<u>1,078,076</u>
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	0	0	0	0	0
Cash Funds	240,244	242,251	265,729	265,729	265,729
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,458,219	1,093,145	812,347	812,347	812,347

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

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	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>TOTAL - (8) Office of STI/HIV/VH</b>	29,332,468	30,680,552	38,487,907	40,426,949	41,743,219
<i>FTE</i>	<u>52.6</u>	<u>52.6</u>	<u>53.6</u>	<u>57.5</u>	<u>57.5</u>
General Fund	2,414,366	1,938,495	3,156,668	5,088,880	5,095,458
Cash Funds	6,441,047	5,802,189	11,665,815	11,671,987	12,981,679
Reappropriated Funds	0	14,017	15,252	15,910	15,910
Federal Funds	20,477,055	22,925,850	23,650,172	23,650,172	23,650,172

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
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**(8) DISEASE CONTROL AND ENVIRONMENTAL EPIDEMIOLOGY DIVISION**

**(B) Special Purpose Disease Control Programs**

Sexually Transmitted Infections, HIV and AIDS

Operating Expenses	<u>0</u>	<u>(118)</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	(118)	0	0	0

<b>SUBTOTAL - (B) Special Purpose Disease Control Programs</b>	0	(118)	0	0	0
<i>FTE</i>	<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	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	(118)	0	0	0

**(C) Environmental Epidemiology**

Environmental Epidemiology Federal Grants	<u>537,343</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	537,343	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>SUBTOTAL - (C) Environmental Epidemiology</b>	537,343	0	0	0	0
<i>FTE</i>	<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	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	537,343	0	0	0	0
<b>TOTAL - (8) Disease Control and Environmental Epidemiology Division</b>	537,343	(118)	0	0	0
<i>FTE</i>	<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	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	537,343	(118)	0	0	0



*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
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**(9) PREVENTION SERVICES DIVISION**

**(A) Administration**

Administration	<u>2,062,879</u>	<u>2,837,974</u>	<u>3,158,723</u>	<u>3,217,241</u>	<u>3,217,241</u>
FTE	31.9	33.4	34.9	34.4	34.4
General Fund	393,241	953,039	674,519	683,839	683,839
Cash Funds	350,435	118,913	827,465	876,520	876,520
Reappropriated Funds	(19,633)	26,629	26,629	26,772	26,772
Federal Funds	1,338,836	1,739,394	1,630,110	1,630,110	1,630,110
Indirect Cost Assessment	<u>7,523,677</u>	<u>7,067,805</u>	<u>7,909,584</u>	<u>7,909,584</u>	<u>7,909,584</u>
General Fund	0	0	0	0	0
Cash Funds	3,148,811	3,667,489	3,683,142	3,683,142	3,683,142
Reappropriated Funds	0	297,017	35,292	35,292	35,292
Federal Funds	4,374,866	3,103,299	4,191,150	4,191,150	4,191,150
Grant Prioritization Task Force	<u>0</u>	<u>0</u>	<u>92,447</u>	<u>0</u>	<u>0</u>
FTE	0.0	0.0	1.0	0.0	0.0
General Fund	0	0	92,447	0	0

<b>SUBTOTAL - (A) Administration</b>	9,586,556	9,905,779	11,160,754	11,126,825	11,126,825
FTE	<u>31.9</u>	<u>33.4</u>	<u>35.9</u>	<u>34.4</u>	<u>34.4</u>
General Fund	393,241	953,039	766,966	683,839	683,839
Cash Funds	3,499,246	3,786,402	4,510,607	4,559,662	4,559,662
Reappropriated Funds	(19,633)	323,646	61,921	62,064	62,064
Federal Funds	5,713,702	4,842,693	5,821,260	5,821,260	5,821,260

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
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**(B) Chronic Disease Programs**

Transfer to the Health Disparities Grant Program

Fund	<u>2,913,050</u>	<u>2,712,994</u>	<u>2,841,381</u>	<u>2,841,381</u>	<u>2,430,344</u>
General Fund	0	0	0	0	0
Cash Funds	2,913,050	2,712,994	2,841,381	2,841,381	2,430,344
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

Chronic Disease and Cancer Prevention Grants

FTE	<u>38.8</u>	<u>38.8</u>	<u>38.8</u>	<u>38.8</u>	<u>38.8</u>
General Fund	603,601	810,615	1,068,068	829,371	829,371
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	7,482,139	9,504,804	6,806,127	6,806,127	6,806,127

Breast and Cervical Cancer Screening

FTE	<u>7.2</u>	<u>7.2</u>	<u>7.2</u>	<u>7.2</u>	<u>7.2</u>
General Fund	0	0	0	0	0
Cash Funds	4,254,243	3,940,839	3,788,512	3,829,657	3,240,458
Reappropriated Funds	0	0	0	0	0
Federal Funds	2,699,249	3,161,588	2,653,900	2,653,900	2,653,900

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Cancer, Cardiovascular Disease, and Chronic Pulmonary Disease Program Administration	<u>512,472</u>	<u>591,094</u>	<u>641,060</u>	<u>670,122</u>	<u>670,122</u>
FTE	6.7	6.7	6.7	6.7	6.7
General Fund	0	0	0	0	0
Cash Funds	512,472	591,094	641,060	670,122	670,122
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Cancer, Cardiovascular Disease, and Chronic Pulmonary Disease Grants	<u>9,160,483</u>	<u>9,827,979</u>	<u>18,306,101</u>	<u>18,284,001</u>	<u>15,243,053</u>
General Fund	0	0	0	0	0
Cash Funds	9,160,483	9,827,979	18,306,101	18,284,001	15,243,053
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Tobacco Education, Prevention, and Cessation Program Administration	<u>455,180</u>	<u>496,809</u>	<u>619,502</u>	<u>1,328,895</u>	<u>1,328,895</u>
FTE	6.9	6.9	6.9	12.9	12.9
General Fund	0	0	0	0	0
Cash Funds	455,180	496,809	619,502	1,328,895	1,328,895
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Tobacco Education, Prevention, and Cessation Grants	<u>17,786,300</u>	<u>17,228,596</u>	<u>23,071,737</u>	<u>42,239,072</u>	<u>38,602,424</u>
General Fund	0	0	0	0	0
Cash Funds	17,721,878	17,175,979	21,786,011	40,953,346	37,316,698
Reappropriated Funds	64,422	52,618	1,285,726	1,285,726	1,285,726
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Oral Health Programs	<u>2,646,060</u>	<u>2,435,586</u>	<u>2,574,314</u>	<u>2,595,092</u>	<u>2,560,341</u>
FTE	4.1	4.1	4.1	4.1	4.1
General Fund	760,947	781,363	795,177	806,164	806,164
Cash Funds	837,989	838,029	901,537	911,328	876,577
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,047,124	816,194	877,600	877,600	877,600
Marijuana Education Campaign	<u>886,660</u>	<u>947,505</u>	<u>965,714</u>	<u>976,202</u>	<u>976,202</u>
FTE	2.0	2.0	2.0	2.0	2.0
General Fund	0	0	0	0	0
Cash Funds	886,660	947,505	965,714	976,202	976,202
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Community Health Workers Initiative	<u>0</u>	<u>0</u>	<u>169,973</u>	<u>166,633</u>	<u>166,633</u>
FTE	0.0	0.0	2.0	2.0	2.0
General Fund	0	0	169,973	166,633	166,633
Regional Health Connector Program	<u>0</u>	<u>0</u>	<u>71,903</u>	<u>1,578,316</u>	<u>1,578,316</u>
FTE	0.0	0.0	0.9	1.0	1.0
General Fund	0	0	71,903	1,578,316	1,578,316
<b>SUBTOTAL - (B) Chronic Disease Programs</b>	49,399,437	51,658,410	63,578,292	84,798,769	77,086,186
FTE	<u>65.7</u>	<u>65.7</u>	<u>68.6</u>	<u>74.7</u>	<u>74.7</u>
General Fund	1,364,548	1,591,978	2,105,121	3,380,484	3,380,484
Cash Funds	36,741,955	36,531,229	49,849,818	69,794,932	62,082,349
Reappropriated Funds	64,422	52,618	1,285,726	1,285,726	1,285,726
Federal Funds	11,228,512	13,482,586	10,337,627	10,337,627	10,337,627

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(C) Primary Care Office</b>					
Primary Care Office	<u>11,170,886</u>	<u>11,481,541</u>	<u>11,082,277</u>	<u>11,198,139</u>	<u>11,281,495</u>
FTE	6.7	6.5	6.6	6.6	6.6
General Fund	2,114,278	2,618,804	2,624,509	2,660,772	2,660,772
Cash Funds	7,761,827	7,642,955	7,329,268	7,408,867	7,492,223
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,294,781	1,219,782	1,128,500	1,128,500	1,128,500
Transfer to Health Service Corps Fund	<u>0</u>	<u>400,000</u>	<u>400,000</u>	<u>400,000</u>	<u>400,000</u>
General Fund	0	400,000	400,000	400,000	400,000
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
<b>SUBTOTAL - (C) Primary Care Office</b>	<b>11,170,886</b>	<b>11,881,541</b>	<b>11,482,277</b>	<b>11,598,139</b>	<b>11,681,495</b>
FTE	<u>6.7</u>	<u>6.5</u>	<u>6.6</u>	<u>6.6</u>	<u>6.6</u>
General Fund	2,114,278	3,018,804	3,024,509	3,060,772	3,060,772
Cash Funds	7,761,827	7,642,955	7,329,268	7,408,867	7,492,223
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,294,781	1,219,782	1,128,500	1,128,500	1,128,500

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(D) Family and Community Health</b>					
<b>(1) Women's Health</b>					
Family Planning Program Administration	<u>503,658</u>	<u>918,742</u>	<u>1,787,828</u>	<u>1,593,407</u>	<u>1,593,407</u> *
FTE	9.9	9.9	9.9	9.9	9.9
General Fund	377,591	383,048	603,758	409,337	409,337
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	126,067	535,694	1,184,070	1,184,070	1,184,070
Family Planning Purchase of Services	<u>8,985,973</u>	<u>8,603,909</u>	<u>8,848,361</u>	<u>8,348,361</u>	<u>8,348,361</u> *
General Fund	4,730,920	4,692,539	5,259,461	4,759,461	4,759,461
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	4,255,053	3,911,370	3,588,900	3,588,900	3,588,900
Family Planning Federal Grants	<u>1,195,830</u>	<u>1,316,622</u>	<u>184,300</u>	<u>184,300</u>	<u>184,300</u> *
FTE	2.0	2.0	2.0	2.0	2.0
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,195,830	1,316,622	184,300	184,300	184,300
Maternal and Child Health	<u>3,085,428</u>	<u>3,176,883</u>	<u>6,850,939</u>	<u>5,135,156</u>	<u>5,135,156</u>
FTE	11.6	11.9	14.5	12.2	12.2
General Fund	223,616	262,414	268,552	272,263	272,263
Cash Funds	0	0	1,760,687	41,193	41,193
Reappropriated Funds	0	0	0	0	0
Federal Funds	2,861,812	2,914,469	4,821,700	4,821,700	4,821,700

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Disordered Eating Prevention Program	<u>0</u>	<u>0</u>	<u>26,679</u>	<u>91,398</u>	<u>91,398</u>
FTE	0.0	0.0	0.2	1.0	1.0
General Fund	0	0	26,679	91,398	91,398
<b>SUBTOTAL - (1) Women's Health</b>	13,770,889	14,016,156	17,698,107	15,352,622	15,352,622
FTE	<u>23.5</u>	<u>23.8</u>	<u>26.6</u>	<u>25.1</u>	<u>25.1</u>
General Fund	5,332,127	5,338,001	6,158,450	5,532,459	5,532,459
Cash Funds	0	0	1,760,687	41,193	41,193
Reappropriated Funds	0	0	0	0	0
Federal Funds	8,438,762	8,678,155	9,778,970	9,778,970	9,778,970
<b>(2) Children and Youth Health</b>					
Healthy Kids Colorado Survey	<u>2,521,511</u>	<u>667,963</u>	<u>759,874</u>	<u>768,127</u>	<u>768,127</u>
FTE	1.5	1.5	1.5	1.5	1.5
General Fund	0	(95,000)	0	0	0
Cash Funds	752,447	752,564	759,874	768,127	768,127
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,769,064	10,399	0	0	0
Health Care Program for Children with Special Needs	<u>1,151,041</u>	<u>1,271,317</u>	<u>1,210,098</u>	<u>1,220,516</u>	<u>1,220,516</u>
FTE	14.4	14.4	14.4	14.4	14.4
General Fund	694,941	815,217	753,998	764,416	764,416
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	456,100	456,100	456,100	456,100	456,100

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	<b>FY 2021-22 Actual</b>	<b>FY 2022-23 Actual</b>	<b>FY 2023-24 Appropriation</b>	<b>FY 2024-25 Request</b>	<b>FY 2024-25 Recommendation</b>
Health Care Program for Children with Special					
Needs Purchase of Services	<u>3,075,399</u>	<u>3,075,399</u>	<u>3,075,399</u>	<u>3,075,399</u>	<u>3,075,399</u>
General Fund	1,847,899	1,847,899	1,847,899	1,847,899	1,847,899
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,227,500	1,227,500	1,227,500	1,227,500	1,227,500
Genetics Counseling Program Costs	<u>910,928</u>	<u>1,002,887</u>	<u>1,853,511</u>	<u>1,873,641</u>	<u>1,873,641</u>
FTE	1.0	1.0	1.0	1.0	1.0
General Fund	0	0	0	0	0
Cash Funds	910,928	1,002,887	1,853,511	1,873,641	1,873,641
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Child Fatality Prevention	<u>582,694</u>	<u>589,646</u>	<u>599,707</u>	<u>607,993</u>	<u>607,993</u>
FTE	2.9	2.9	2.9	2.9	2.9
General Fund	582,694	589,646	599,707	607,993	607,993
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
School-based Health Centers	<u>6,417,295</u>	<u>6,453,528</u>	<u>5,030,571</u>	<u>5,100,080</u>	<u>5,100,080</u>
FTE	2.4	2.4	2.8	2.8	2.8
General Fund	4,985,804	5,018,794	5,030,571	5,100,080	5,100,080
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,431,491	1,434,735	0	0	0



*JBC Staff Figure Setting - FY 2024-25*  
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	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Comprehensive Sexual Education	<u>875,848</u>	<u>987,964</u>	<u>994,263</u>	<u>1,008,001</u>	<u>1,008,001</u>
FTE	1.3	1.3	1.3	1.3	1.3
General Fund	875,848	987,964	994,263	1,008,001	1,008,001
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Federal Grants	<u>1,218,616</u>	<u>2,289,100</u>	<u>884,604</u>	<u>884,604</u>	<u>884,604</u>
FTE	7.5	7.5	7.5	7.5	7.5
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,218,616	2,289,100	884,604	884,604	884,604
Healthy Kids Colorado Survey	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
<b>SUBTOTAL - (2) Children and Youth Health</b>	16,753,332	16,337,805	14,408,027	14,538,361	14,538,361
FTE	<u>31.0</u>	<u>31.0</u>	<u>31.4</u>	<u>31.4</u>	<u>31.4</u>
General Fund	8,987,186	9,164,520	9,226,438	9,328,389	9,328,389
Cash Funds	1,663,375	1,755,451	2,613,385	2,641,768	2,641,768
Reappropriated Funds	0	0	0	0	0
Federal Funds	6,102,771	5,417,834	2,568,204	2,568,204	2,568,204

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(3) Injury and Violence Prevention - Mental Health Promotion</b>					
Suicide Prevention	<u>5,226,750</u>	<u>4,334,418</u>	<u>1,396,260</u>	<u>1,340,552</u>	<u>1,340,552</u>
FTE	2.9	2.9	2.9	2.9	2.9
General Fund	1,221,889	1,301,412	1,396,260	1,340,552	1,340,552
Cash Funds	279,885	270,544	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	3,724,976	2,762,462	0	0	0
Injury Prevention	<u>7,475,065</u>	<u>7,202,044</u>	<u>3,679,900</u>	<u>3,679,900</u>	<u>3,679,900</u>
FTE	13.4	13.4	13.4	13.4	13.4
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	7,475,065	7,202,044	3,679,900	3,679,900	3,679,900
Substance Abuse Prevention Program Costs	<u>613,269</u>	<u>589,905</u>	<u>468,467</u>	<u>473,555</u>	<u>473,555</u>
FTE	4.5	4.5	4.5	4.5	4.5
General Fund	0	0	0	0	0
Cash Funds	443,888	444,412	468,467	473,555	473,555
Reappropriated Funds	0	0	0	0	0
Federal Funds	169,381	145,493	0	0	0
Substance Abuse Prevention Grants	<u>8,142,278</u>	<u>8,498,831</u>	<u>8,995,512</u>	<u>8,995,512</u>	<u>8,995,512</u>
General Fund	0	0	0	0	0
Cash Funds	8,142,278	8,498,831	8,995,512	8,995,512	8,995,512
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	<b>FY 2021-22 Actual</b>	<b>FY 2022-23 Actual</b>	<b>FY 2023-24 Appropriation</b>	<b>FY 2024-25 Request</b>	<b>FY 2024-25 Recommendation</b>
Mental Health First Aid	<u>460,000</u>	<u>210,000</u>	<u>210,000</u>	<u>210,000</u>	<u>210,000</u>
General Fund	460,000	210,000	210,000	210,000	210,000
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Community Crime Victims Grant Program	<u>880,570</u>	<u>1,082,287</u>	<u>1,882,349</u>	<u>894,541</u>	<u>2,144,541</u>
General Fund	880,570	881,078	882,349	894,541	894,541
Cash Funds	0	201,209	1,000,000	0	1,250,000
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Opiate Antagonist Bulk Purchase	<u>1,212,846</u>	<u>182,432</u>	<u>160,606</u>	<u>162,825</u>	<u>162,825</u>
FTE	2.0	2.0	2.0	2.0	2.0
General Fund	153,048	155,550	160,606	162,825	162,825
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,059,798	26,882	0	0	0
Appropriation to the Harm Reduction Grant					
Program Cash Fund	<u>1,800,000</u>	<u>1,800,000</u>	<u>1,800,000</u>	<u>1,800,000</u>	<u>1,800,000</u>
General Fund	0	0	0	0	0
Cash Funds	1,800,000	1,800,000	1,800,000	1,800,000	1,800,000
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Harm Reduction Grant Program	<u>1,926,978</u>	<u>2,613,455</u>	<u>1,743,860</u>	<u>1,753,235</u>	<u>1,753,235</u>
FTE	1.9	1.9	1.9	1.9	1.9
General Fund	0	0	0	0	0
Cash Funds	493,164	888,021	0	0	0
Reappropriated Funds	1,433,814	1,725,434	1,743,860	1,753,235	1,753,235
Federal Funds	0	0	0	0	0
CARE Network	<u>819,739</u>	<u>912,651</u>	<u>913,819</u>	<u>926,445</u>	<u>926,445</u>
FTE	0.4	0.4	0.4	0.4	0.4
General Fund	819,739	912,651	913,819	926,445	926,445
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Prevention Programming	<u>0</u>	<u>15,240,176</u>	<u>8,819,856</u>	<u>8,870,915</u>	<u>8,870,915</u>
FTE	0.0	11.2	11.2	11.2	11.2
General Fund	0	30,092	48,111	48,776	48,776
Cash Funds	0	588,284	590,497	596,910	596,910
Reappropriated Funds	0	14,621,800	8,181,248	8,225,229	8,225,229
Federal Funds	0	0	0	0	0
Grant Prioritization Task Force	<u>0</u>	<u>0</u>	<u>0</u>	<u>146,604</u>	<u>146,604</u>
FTE	0.0	0.0	0.0	1.6	1.6
General Fund	0	0	0	146,604	146,604

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>SUBTOTAL - (3) Injury and Violence Prevention</b>					
<b>- Mental Health Promotion</b>	28,557,495	42,666,200	30,070,629	29,254,084	30,504,084
<i>FTE</i>	<u>25.1</u>	<u>36.3</u>	<u>36.3</u>	<u>37.9</u>	<u>37.9</u>
General Fund	3,535,246	3,490,783	3,611,145	3,729,743	3,729,743
Cash Funds	11,159,215	12,691,301	12,854,476	11,865,977	13,115,977
Reappropriated Funds	1,433,814	16,347,234	9,925,108	9,978,464	9,978,464
Federal Funds	12,429,220	10,136,882	3,679,900	3,679,900	3,679,900
<b>Office of Gun Violence Prevention</b>					
Program Costs	<u>87,293</u>	<u>3,803,365</u>	<u>3,002,605</u>	<u>3,044,093</u>	<u>3,044,093</u>
FTE	2.0	4.0	4.0	4.0	4.0
General Fund	87,293	3,803,365	3,002,605	3,044,093	3,044,093
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
<b>SUBTOTAL - Office of Gun Violence Prevention</b>	87,293	3,803,365	3,002,605	3,044,093	3,044,093
<i>FTE</i>	<u>2.0</u>	<u>4.0</u>	<u>4.0</u>	<u>4.0</u>	<u>4.0</u>
General Fund	87,293	3,803,365	3,002,605	3,044,093	3,044,093
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>SUBTOTAL - (D) Family and Community</b>					
<b>Health</b>	59,169,009	76,823,525	65,179,368	62,189,160	63,439,160
<i>FTE</i>	<u>81.6</u>	<u>95.1</u>	<u>98.3</u>	<u>98.4</u>	<u>98.4</u>
General Fund	17,941,852	21,796,669	21,998,638	21,634,684	21,634,684
Cash Funds	12,822,590	14,446,752	17,228,548	14,548,938	15,798,938
Reappropriated Funds	1,433,814	16,347,234	9,925,108	9,978,464	9,978,464
Federal Funds	26,970,753	24,232,871	16,027,074	16,027,074	16,027,074

**(E) Nutrition Services**

Women, Infants, and Children Supplemental Food

Grant	<u>83,084,552</u>	<u>93,343,628</u>	<u>88,064,092</u>	<u>88,067,414</u>	<u>88,067,414</u> *
FTE	16.9	16.9	16.9	16.9	16.9
General Fund	57,335	24,785	123,992	125,705	125,705
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	83,027,217	93,318,843	87,940,100	87,941,709	87,941,709
 Child and Adult Care Food Program	 <u>51,308,148</u>	 <u>31,044,589</u>	 <u>27,899,109</u>	 <u>27,899,109</u>	 <u>27,899,109</u>
FTE	7.8	7.8	7.8	7.8	7.8
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	51,308,148	31,044,589	27,899,109	27,899,109	27,899,109

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>SUBTOTAL - (E) Nutrition Services</b>	134,392,700	124,388,217	115,963,201	115,966,523	115,966,523
<i>FTE</i>	<u>24.7</u>	<u>24.7</u>	<u>24.7</u>	<u>24.7</u>	<u>24.7</u>
General Fund	57,335	24,785	123,992	125,705	125,705
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	134,335,365	124,363,432	115,839,209	115,840,818	115,840,818
<b>TOTAL - (9) Prevention Services Division</b>	263,718,588	274,657,472	267,363,892	285,679,416	279,300,189
<i>FTE</i>	<u>210.6</u>	<u>225.4</u>	<u>234.1</u>	<u>238.8</u>	<u>238.8</u>
General Fund	21,871,254	27,385,274	28,019,226	28,885,484	28,885,484
Cash Funds	60,825,618	62,407,337	78,918,241	96,312,399	89,933,172
Reappropriated Funds	1,478,603	16,723,497	11,272,755	11,326,254	11,326,254
Federal Funds	179,543,113	168,141,363	149,153,670	149,155,279	149,155,279

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
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**(10) HEALTH FACILITIES AND EMERGENCY MEDICAL SERVICES DIVISION**

**(A) Operations Management**

Administration and Operations	<u>2,415,972</u>	<u>2,618,652</u>	<u>2,995,966</u>	<u>3,018,466</u>	<u>3,018,466</u>
FTE	27.7	26.9	28.8	27.8	27.8
General Fund	269,069	423,506	648,854	538,588	538,588
Cash Funds	2,146,903	2,195,146	2,284,008	2,416,774	2,416,774
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	63,104	63,104	63,104
Appropriation to the Health Facilities General					
Licensure CF	<u>0</u>	<u>1,653,000</u>	<u>400,000</u>	<u>0</u>	<u>0</u>
General Fund	0	1,653,000	0	0	0
Cash Funds	0	0	400,000	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Appropriation to the Assisted Living Residence Cash					
Fund	<u>0</u>	<u>2,732,000</u>	<u>600,000</u>	<u>0</u>	<u>0</u>
General Fund	0	2,732,000	0	0	0
Cash Funds	0	0	600,000	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Appropriation to the Home Care Agency Cash Fund	<u>0</u>	<u>0</u>	<u>1,100,000</u>	<u>0</u>	<u>0</u>
Cash Funds	0	0	1,100,000	0	0



*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>SUBTOTAL - (A) Operations Management</b>	2,415,972	7,003,652	5,095,966	3,018,466	3,018,466
<i>FTE</i>	<u>27.7</u>	<u>26.9</u>	<u>28.8</u>	<u>27.8</u>	<u>27.8</u>
General Fund	269,069	4,808,506	648,854	538,588	538,588
Cash Funds	2,146,903	2,195,146	4,384,008	2,416,774	2,416,774
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	63,104	63,104	63,104

**(B) Health Facilities Programs**

Home and Community Survey	<u>2,367,989</u>	<u>2,303,907</u>	<u>2,640,012</u>	<u>7,088,772</u>	<u>8,271,147</u> *
FTE	21.5	25.8	26.0	43.7	43.7
General Fund	97,009	74,674	180,870	3,288,550	4,323,166
Cash Funds	2,270,980	2,229,233	2,459,142	3,800,222	3,947,981
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Nursing Facility Survey	<u>920,779</u>	<u>950,605</u>	<u>1,726,887</u>	<u>42,488</u>	<u>42,488</u> *
FTE	8.8	14.0	15.7	(0.4)	(0.4)
General Fund	84,422	183,053	931,505	(3,746)	(3,746)
Cash Funds	836,357	767,552	795,382	46,234	46,234
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Medicaid/Medicare Certification Program	<u>9,547,089</u>	<u>10,509,181</u>	<u>10,566,120</u>	<u>11,231,173</u>	<u>11,144,780</u> *
FTE	111.4	111.4	111.4	115.0	115.1
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	5,158,914	5,341,795	6,115,932	6,780,985	6,694,592
Federal Funds	4,388,175	5,167,386	4,450,188	4,450,188	4,450,188

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Transfer to Department of Public Safety	<u>327,283</u>	<u>449,324</u>	<u>699,072</u>	<u>699,072</u>	<u>699,072</u>
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	141,809	157,731	341,076	341,076	341,076
Federal Funds	185,474	291,593	357,996	357,996	357,996
Behavioral Health Entity Licensing	<u>236,280</u>	<u>76,021</u>	<u>217,310</u>	<u>225,180</u>	<u>225,180</u>
FTE	2.6	2.2	3.2	3.2	3.2
General Fund	74,319	36,425	42,044	43,526	43,526
Cash Funds	9,102	39,596	109,877	116,265	116,265
Reappropriated Funds	0	0	0	0	0
Federal Funds	152,859	0	65,389	65,389	65,389
Nursing Home Grants	<u>331,934</u>	<u>540,775</u>	<u>6,000,000</u>	<u>6,000,000</u>	<u>6,000,000</u>
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	0	0	0	0	0
Cash Funds	331,934	540,775	6,000,000	6,000,000	6,000,000
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
<b>SUBTOTAL - (B) Health Facilities Programs</b>	<b>13,731,354</b>	<b>14,829,812</b>	<b>21,849,401</b>	<b>25,286,685</b>	<b>26,382,667</b>
<b>FTE</b>	<b><u>144.3</u></b>	<b><u>153.4</u></b>	<b><u>156.3</u></b>	<b><u>161.5</u></b>	<b><u>161.6</u></b>
General Fund	255,750	294,152	1,154,419	3,328,330	4,362,946
Cash Funds	3,448,373	3,577,156	9,364,401	9,962,721	10,110,480
Reappropriated Funds	5,300,723	5,499,526	6,457,008	7,122,061	7,035,668
Federal Funds	4,726,508	5,458,978	4,873,573	4,873,573	4,873,573

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>(C) Emergency Medical Services</b>					
State EMS Coordination, Planning and Certification					
Program	<u>1,704,743</u>	<u>1,766,661</u>	<u>1,823,506</u>	<u>1,928,014</u>	<u>1,928,014</u>
FTE	14.1	14.7	14.7	14.7	14.7
General Fund	67,734	64,289	65,081	67,374	67,374
Cash Funds	1,637,009	1,702,372	1,758,425	1,860,640	1,860,640
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Distributions to Regional Emergency Medical and					
Trauma Councils (RETACs)	<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>
General Fund	0	0	0	0	0
Cash Funds	1,785,000	1,785,000	1,785,000	1,785,000	1,785,000
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Emergency Medical Services Provider Grants	<u>2,952,328</u>	<u>5,105,368</u>	<u>8,378,896</u>	<u>8,378,896</u>	<u>8,378,896</u>
General Fund	0	0	0	0	0
Cash Funds	2,952,328	5,105,368	8,378,896	8,378,896	8,378,896
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Trauma Facility Designation Program	<u>350,028</u>	<u>377,317</u>	<u>385,134</u>	<u>407,521</u>	<u>407,521</u>
FTE	1.8	1.8	1.8	1.8	1.8
General Fund	0	0	0	0	0
Cash Funds	350,028	377,317	385,134	407,521	407,521
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
Federal Grants	<u>0</u>	<u>0</u>	<u>290,300</u>	<u>290,300</u>	<u>290,300</u>
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	290,300	290,300	290,300
Poison Control	<u>1,595,240</u>	<u>1,595,240</u>	<u>1,595,240</u>	<u>1,595,240</u>	<u>1,595,240</u>
General Fund	1,535,140	1,535,140	1,535,140	1,535,140	1,535,140
Cash Funds	60,100	60,100	60,100	60,100	60,100
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Office of Cardiac Arrest	<u>0</u>	<u>121,800</u>	<u>200,000</u>	<u>207,048</u>	<u>207,048</u>
FTE	0.0	0.0	0.8	0.8	0.8
General Fund	0	121,800	200,000	207,048	207,048
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0
Appropriation to the EMS account	<u>0</u>	<u>2,000,000</u>	<u>0</u>	<u>0</u>	<u>0</u>
General Fund	0	2,000,000	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>SUBTOTAL - (C) Emergency Medical Services</b>	8,387,339	12,751,386	14,458,076	14,592,019	14,592,019
<i>FTE</i>	<u>15.9</u>	<u>16.5</u>	<u>17.3</u>	<u>17.3</u>	<u>17.3</u>
General Fund	1,602,874	3,721,229	1,800,221	1,809,562	1,809,562
Cash Funds	6,784,465	9,030,157	12,367,555	12,492,157	12,492,157
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	0	290,300	290,300	290,300

**(D) Indirect Cost Assessment**

Indirect Cost Assessment	<u>3,216,332</u>	<u>2,775,128</u>	<u>3,510,795</u>	<u>3,510,795</u>	<u>3,510,795</u>
General Fund	0	0	0	0	0
Cash Funds	1,844,583	1,677,726	1,883,381	1,883,381	1,883,381
Reappropriated Funds	648,776	503,234	751,604	751,604	751,604
Federal Funds	722,973	594,168	875,810	875,810	875,810
<b>SUBTOTAL - (D) Indirect Cost Assessment</b>	3,216,332	2,775,128	3,510,795	3,510,795	3,510,795
<i>FTE</i>	<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	0
Cash Funds	1,844,583	1,677,726	1,883,381	1,883,381	1,883,381
Reappropriated Funds	648,776	503,234	751,604	751,604	751,604
Federal Funds	722,973	594,168	875,810	875,810	875,810

<b>TOTAL - (10) Health Facilities and Emergency Medical Services Division</b>	27,750,997	37,359,978	44,914,238	46,407,965	47,503,947
<i>FTE</i>	<u>187.9</u>	<u>196.8</u>	<u>202.4</u>	<u>206.6</u>	<u>206.7</u>
General Fund	2,127,693	8,823,887	3,603,494	5,676,480	6,711,096
Cash Funds	14,224,324	16,480,184	27,999,345	26,755,033	26,902,792
Reappropriated Funds	5,949,499	6,002,760	7,208,612	7,873,665	7,787,272
Federal Funds	5,449,481	6,053,147	6,102,787	6,102,787	6,102,787

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

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	<b>FY 2021-22 Actual</b>	<b>FY 2022-23 Actual</b>	<b>FY 2023-24 Appropriation</b>	<b>FY 2024-25 Request</b>	<b>FY 2024-25 Recommendation</b>
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*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
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**(11) OFFICE OF EMERGENCY PREPAREDNESS AND RESPONSE**

Administration and Support	<u>0</u>	<u>55,941,119</u>	<u>0</u>	<u>0</u>	<u>0</u>
FTE	0.0	4.1	0.0	0.0	0.0
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	55,941,119	0	0	0
Emergency Preparedness and Response Program	<u>0</u>	<u>(156,357)</u>	<u>0</u>	<u>0</u>	<u>0</u>
FTE	0.0	0.0	0.0	0.0	0.0
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	(156,357)	0	0	0

<b>TOTAL - (11) Office of Emergency Preparedness and Response</b>	<u>0</u>	<u>55,784,762</u>	<u>0</u>	<u>0</u>	<u>0</u>
FTE	<u>0.0</u>	<u>4.1</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>
General Fund	0	0	0	0	0
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	0	55,784,762	0	0	0

*JBC Staff Figure Setting - FY 2024-25*  
*Staff Working Document - Does Not Represent Committee Decision*

	FY 2021-22 Actual	FY 2022-23 Actual	FY 2023-24 Appropriation	FY 2024-25 Request	FY 2024-25 Recommendation
<b>TOTAL - Department of Public Health and Environment</b>	901,079,088	1,007,995,668	842,470,833	866,380,329	865,933,550
<i>FTE</i>	<u>1,577.1</u>	<u>1,732.9</u>	<u>1,882.6</u>	<u>1,900.8</u>	<u>1,892.3</u>
General Fund	83,077,464	184,971,638	135,779,588	143,782,896	144,638,582
General Fund Exempt	0	0	305,324	305,324	305,324
Cash Funds	161,135,631	169,188,430	298,475,345	336,859,752	332,153,606
Reappropriated Funds	43,237,065	59,092,451	77,380,266	63,190,183	62,952,429
Federal Funds	613,628,928	594,743,149	330,530,310	322,242,174	325,883,609



# MEMORANDUM



## JOINT BUDGET COMMITTEE

TO               Members of the Joint Budget Committee  
FROM           Abby Magnus, JBC Staff (303-866-2149)  
DATE           February 28, 2024  
SUBJECT       R1 Public Health Infrastructure Recommended Appropriations

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Staff is recommending approval of the R1 Public Health Infrastructure request for General Fund to partially continue appropriations from S.B. 21-243 to support 83.0 FTE. During the supplemental budget adjustment process, the JBC approved \$927,790 in ARPA cash funding to cover a thirteenth month of salaries in FY 2023-24 related to the S.B. 21-243 funding. This was due to those costs being shifted from General Fund in FY 2022-23, which is pay date shifted, to cash funds in FY 2023-24, which are not. If approved, this request would shift those costs back to General Fund, which would mean only eleven months of salary costs in FY 2024-25.

If the Committee approves fully funding the request as recommended by staff, the actual amount for FY 2024-25 can be reduced by this \$927,790 for a total recommended amount of \$6,586,510 in FY 2024-25 annualizing to \$7,514,300 in FY 2025-26. If the Committee chooses to fund only a portion of the requested General Fund, staff will adjust the pay date shift-related decrease proportionally. Potential reduction amounts are shown in the table below.

PAY DATE SHIFT-RELATED REDUCTIONS TO R1 FUNDING AMOUNTS	
PERCENTAGE OF R1 FUNDING APPROVED	PAY DATE SHIFT-RELATED REDUCTION
100.0%	(\$927,790)
90.0	(835,011)
75.0	(695,843)
50.0	(463,895)