# COLORADO GENERAL ASSEMBLY JOINT BUDGET COMMITTEE



# FY 2010-11 STAFF FIGURE SETTING

# DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

(Administrative and Health Divisions)

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

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# FY 2010-11 FIGURE SETTING DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT (ADMINISTRATIVE AND HEALTH DIVISIONS)

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#### FY 2010-11 Joint Budget Committee Staff Figure Setting Department of Public Health and Environment (Administrative and Health Divisions)

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
DEPARTMENT OF PUBLIC HEALTH AND ENVIR	ONMENT					
(Administration and Health Divisions)						
Executive Director: Martha Rudolph						
(1) ADMINISTRATION AND SUPPORT						
This division provides policy direction and support service	os includina: acc	ounting hudgeti	иа			
facilities, procurement, internal audit, management analy.			0			
Executive Director's Office, Office of Communications, Of						
Office of Policy and Public-Private Initiatives and the Off	0 0	0 1 00				
funds and cash funds exempt sources include the Pollution	U	-				
recoveries.	i I reveniion I un	a ana maneer e	031			
(A) Administration						
Personal Services	4,413,834	4,596,076	4,839,672 S	4,799,582 B	4,828,272	
FTE	<u>58.4</u>	<u>60.2</u>	<u>61.9</u>	<u>61.9</u>	<u>61.9</u>	
General Fund	0	0	0	0	0	
Cash Funds	76,457	82,570	82,742	85,303	85,303	
FTE		1.4		0.0	0.0	
Cash Funds Exempt/RF	4,258,363	4,484,816	4,756,930	4,714,279	4,714,279	
FTE		58.6		0.0	0.0	
Federal Funds	79,014	28,690	0	0	28,690	
FTE		0.2		0.0	0.0	
Retirements	527,990	469,915	481,145	481,145	481,145	
Cash Funds	0	0	0	0	0	
Cash Funds Exempt/RF	527,990	469,915	481,145	481,145	481,145	
Cubi z alub Enomporte	527,990	10,,,10	101,110	101,110	101,115	

	FY 2007-08	FY 2008-09	FY 2009-10		010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Health, Life, and Dental	2,253,801	2,333,057	6,690,969	<u>6,322,899</u> B	Pending	DI #NP11
General Fund	359,056	431,808	520,859	496,050		
Cash Funds	953,636	1,464,998	2,090,455	2,159,819		
Cash Funds Exempt/RF	941,109	436,251	916,175	633,963		
Federal Funds	0	0	3,163,480	3,033,067		
Medicaid Cash Funds	2,774	261,864	318,565	248,349		
GF in Medicaid CF	1,387	68,862	110,225	84,481		
Net General Fund	360,443	500,670	631,084	580,531		
Short-term Disability	<u>45,535</u>	<u>52,362</u>	<u>122,601</u> S	<u>118,802</u> B	<u>116,631</u>	DI #NP11
General Fund	6,258	7,992	9,160	8,883	8,830	
Cash Funds	20,390	30,695	41,788	39,818	40,744	
Cash Funds Exempt/RF	18,887	13,675	16,814	12,210	12,801	
Federal Funds	0	0	54,839	57,891	54,256	
Medicaid Cash Funds	0	5,975	5,886	4,942	4,942	
GF in Medicaid CF	0	3,768	3,738	1,689	1,689	
Net General Fund	6,258	11,760	12,898	10,572	10,519	
S.B. 04-257 Amortization Equalization Disbursement	<u>418,719</u>	<u>642,400</u>	<u>1,579,925</u> S	<u>1,860,207</u> B		DI #NP11, BA-1
General Fund	56,161	96,310	116,162	137,537	134,762	
Cash Funds	188,218	377,795	539,200	637,223	651,555	
Cash Funds Exempt/RF	174,340	168,295	216,960	189,065	198,220	
Federal Funds	0	0	707,603	896,382	840,109	
Medicaid Cash Funds	0	67,815	88,196	76,513	76,513	
GF in Medicaid CF	0	8,264	30,199	26,157	26,157	
Net General Fund	56,161	104,574	146,361	163,694	160,919	
S.B. 06-235 Supplemental Amortization Equalization						
Disbursement	<u>85,562</u>	<u>280,154</u>	<u>986,186</u> S	<u>1,356,400</u> B		DI #NP11, BA-1
General Fund	10,029	43,544	71,335	100,287	97,245	
Cash Funds	39,212	158,140	337,000	464,641	475,092	
Cash Funds Exempt/RF	36,321	78,470	135,599	137,860	144,535	
Federal Funds	0	0	442,252	653,612	612,580	
Medicaid Cash Funds	0	27,285	47,467	55,791	55,791	
GF in Medicaid CF	0	401	16,250	19,074	19,074	
Net General Fund	10,029	43,945	87,585	119,361	116,319	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Salary Survey and Senior Executive Service	<u>1,339,210</u>	<u>1,343,417</u>	<u>0</u>	<u>0</u>	<u>0</u>	
General Fund	192,053	206,252	0		0	
Cash Funds	586,636	775,239	0		0	
Cash Funds Exempt/RF	560,521	361,926	0		0	
Federal Funds	0	0	0		0	
Medicaid Cash Funds	0	125,846	0		0	
GF in Medicaid CF	0	34,263	0		0	
Net General Fund	192,053	240,515	0	0	0	
Performance-based Pay Awards	<u>548,475</u>	614,627	<u>0</u>	<u>0</u>	<u>0</u>	
General Fund	78,291	94,718	0		0	
Cash Funds	240,770	366,046	0		0	
Cash Funds Exempt/RF	229,414	153,863	0		0	
Federal Funds	0	0	0		0	
Medicaid Cash Funds	0	53,500	0		0	
GF in Medicaid CF	0	18,211	0		0	
Net General Fund	78,291	112,929	0	0	0	
Shift Differential	11,703	<u>0</u>	<u>9,362</u>	14,883	14,883	
Federal Funds	11,703	$\overline{0}$	9,362	14,883	14,883	
Workers' Compensation	214,216	273,205	<u>325,758</u> S	360,196	Pending	
General Fund	0	0	0	0	g	
Cash Funds	0	0	0	0		
Cash Funds Exempt/RF	214,216	273,205	325,758	360,196		
Operating Expenses	1,140,244	1,198,755	1,264,072 S	1,262,707 B	1,262,707	BA-1
Cash Funds Exempt/RF	1,140,244	1,198,755	1,264,072	1,262,707 B	1,262,707	21
Federal Funds	0	0	1,204,072	0	1,202,707	
	0	0	0	0	0	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	)10-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Legal Services	<u>1,470,856</u>	<u>1,731,226</u>	<u>1,976,890</u> S	<u>2,014,354</u> B	Pending	BA-1
Hours	0	0	26,226	26,723		
General Fund	8,132	0	0	0		
Cash Funds	99,989	662,378	10,000	0		
Cash Funds Exempt/RF	1,283,935	941,356	1,966,890	2,014,354		BA-1
Federal Funds	78,800	127,492	0	0		
Administrative Law Judge Services	<u>7,951</u>	<u>7,640</u>	<u>15,200</u> S	44,763	44,763	
Cash Funds Exempt/RF	7,951	7,640	15,200	44,763	44,763	
Payment to Risk Management and Property Funds	108,802	<u>155,605</u>	<u>161,399</u>	56,136	Pending	
Cash Funds	2,997	6,904	9,069	9,069		
Cash Funds Exempt/RF	105,805	148,701	152,330	47,067		
Vehicle Lease Payments	<u>235,433</u>	<u>255,940</u>	<u>296,864</u> S	429,950	<u>429,950</u>	DI #NP12
General Fund	970	0	1,081	1,081	1,081	
Cash Funds	88,176	158,207	219,729	319,581	319,581	
Cash Funds Exempt/RF	88,738	39,554	56,874	78,522	78,522	
Federal Funds	57,549	58,179	19,180	30,766	30,766	
Medicaid Cash Funds	0	0	15,475	15,475	15,475	
GF in Medicaid CF	0	0	4,952	4,952	4,952	
Net General Fund	970	0	6,033	6,033	6,033	
Leased Space	<u>4,905,361</u>	<u>4,846,326</u>	<u>5,691,403</u>	<u>5,909,582</u> B	<u>5,909,582</u>	DI #2, BA-1
Cash Funds	0	158,402	198,567	233,106	233,106	
Cash Funds Exempt/RF	4,871,560	4,663,160	5,454,448	5,638,088	5,638,088	
Federal Funds	33,801	24,764	38,388	38,388	38,388	
Capitol Complex Leased Space	<u>32,233</u>	<u>31,663</u>	32,867	<u>33,037</u>	33,037	
Cash Funds Exempt/RF	32,233	31,663	32,867	33,037	33,037	
Communications Services Payments	<u>6,509</u>	<u>6,799</u>	<u>6,799</u>	<u>6,446</u>	<u>6,446</u>	
Cash Funds Exempt/RF	6,509	6,799	6,799	6,446	6,446	

	FY 2007-08	FY 2008-09	FY 2009-10		)10-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Utilities	425,778	472,362	<u>648,427</u> S	<u>674,227</u> B	<u>596,671</u>	DI #2
Cash Funds	5,295	58,799	135,524	161,324	161,324	
Cash Funds Exempt/RF	369,364	368,943	390,727	390,727	390,727	
Federal Funds	51,119	44,620	122,176	122,176	44,620	
Building Maintenance and Repair	<u>274,851</u>	<u>271,785</u>	<u>271,858</u>	271,858	271,858	
Cash Funds Exempt/RF	274,851	271,785	271,858	271,858	271,858	
Reimbursement for Members of the State Board of Health	<u>3,840</u>	<u>5,413</u>	<u>4,500</u>	<u>4,500</u>	4,500	
General Fund	3,840	4,500	4,500	4,500	4,500	
Cash Funds Exempt/RF		913	0	0	0	
Indirect Cost Assessment	269,227	<u>364,345</u>	<u>414,671</u> S	422,611	Pending	
Cash Funds	51,565	183,696	207,941	220,000		
Cash Funds Exempt/RF	41,759	1,936	95,759	75,759		
Federal Funds	175,903	178,713	110,971	126,852		
SUBTOTAL - (A) Administration	18,740,130	19,953,072	25,820,568	26,444,285	17,154,543	
FTE	<u>58.4</u>	<u>60.2</u>	<u>61.9</u>	<u>61.9</u>	<u>61.9</u>	
General Fund	714,790	885,124	723,097	748,338	246,418	
Cash Funds	2,353,341	4,483,869	3,872,015	4,329,884	1,966,705	
Cash Funds Exempt/RF	15,184,110	14,121,621	16,557,205	16,392,046	13,277,128	
Federal Funds	487,889	462,458	4,668,251	4,974,017	1,664,292	
Medicaid Cash Funds	2,774	542,285	475,589	401,070	152,721	
GF in Medicaid CF	1,387	133,769	165,364	136,353	51,872	
Net General Fund	716,177	1,018,893	888,461	884,691	298,290	
(B) Special Health Programs						
(1) Health Disparities Program						
Personal Services	195,653	428,136	402,377 S	404,365 B	404,365	
FTE	3.3	<u>6.4</u>	<u>6.3</u>	<u>6.3</u>	6.3	
General Fund	0	51,246	49,917	50,178	50,178	
FTE	0.0	0.6		0.0	0.0	
Cash Funds Exempt/RF	195,653	376,890	352,460	354,187	354,187	
FTE	3.3	5.8		0.0	0.0	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Operating Expenses	<u>43,845</u>	<u>36,946</u>	<u>65,838</u>	<u>65,838</u>	<u>65,838</u>	
General Fund	0	6,931	6,931	6,931	6,931	
Cash Funds Exempt/RF	43,845	30,015	58,907	58,907	58,907	
Health Disparities Grants - CFE/RF	2,365,458	2,980,718	7,463,419	1,000,000	5,163,148	BR #NP5
SUBTOTAL - (B) Health Disparities Program	2,604,956	3,445,800	7,931,634	1,470,203	5,633,351	
FTE	<u>3.3</u>	<u>6.4</u>	<u>6.3</u>	<u>6.3</u>	<u>6.3</u>	
General Fund	0	58,177	56,848	57,109	57,109	
Cash Funds Exempt/RF	2,604,956	3,387,623	7,874,786	1,413,094	5,576,242	
(C) Special Environmental Programs						
Environmental Leadership and Pollution Prevention	978,837	1,300,067	858,531 S		860,176	
FTE	<u>7.2</u>	<u>8.2</u>	<u>7.0</u>	<u>7.0</u>	<u>7.0</u>	
Cash Funds	82,003	87,729	172,385	170,521	170,521	
FTE	0.7	0.9		0.0	0.0	
Cash Funds Exempt/RF	37,177	0	0	0	0	
Federal Funds	859,657	1,212,338	686,146	689,655	689,655	
FTE	6.5	7.3		0.0	0.0	
Housed Commercial Swine Feeding Operations Program -						
CF	58,220	53,880	58,576 S	58,726 B	58,726	
FTE	0.5	0.5	0.5	0.5	0.5	
Recycling Resources Economic Opportunity Program - CF	326,589	2,047,005	2,626,798 S	, ,	2,627,279	
FTE	0.6	1.6	1.6	1.6	1.6	
Advanced Technology Research Grants	77,393	551,515	495,000	495,000	495,000	
Cash Funds	0	551,515	495,000	495,000	495,000	
Cash Funds Exempt/RF	77,393	0	0	0	0	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
SUBTOTAL - (C) Special Environmental Programs	1,441,039	3,952,467	4,038,905	4,041,181	4,041,181	
FTE	<u>8.3</u>	<u>10.3</u>	<u>9.1</u>	<u>9.1</u>	<u>9.1</u>	
Cash Funds	466,812	2,740,129	3,352,759	3,351,526	3,351,526	
Cash Funds Exempt/RF	114,570	0	0	0	0	
Federal Funds	859,657	1,212,338	686,146	689,655	689,655	
TOTAL - (1) ADMINISTRATION AND SUPPORT	22,786,125	27,351,339	37,791,107	31,955,669	26,829,075	
FTE	<u>70.0</u>	<u>76.9</u>	<u>77.3</u>	<u>77.3</u>	<u>77.3</u>	
General Fund	714,790	943,301	779,945	805,447	303,527	
Cash Funds	2,820,153	7,223,998	7,224,774	7,681,410	5,318,231	
Cash Funds Exempt/RF	17,903,636	17,509,244	24,431,991	17,805,140	18,853,370	
Federal Funds	1,347,546	1,674,796	5,354,397	5,663,672	2,353,947	
Medicaid Cash Funds	2,774	542,285	475,589	401,070	152,721	
GF in Medicaid CF	1,387	133,769	165,364	136,353	51,872	
Net General Fund	716,177	1,077,070	945,309	941,800	355,399	

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

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

(A) Health Statistics and Vital Records						
Personal Services	3,140,231	3,254,370	2,780,999 S	3,542,201 B	4,050,124	DI #NP11, BA-1
FTE	49.2	51.1	55.2	65.6	65.6	
General Fund	0	0	0	0	0	
Cash Funds	1,640,745	1,970,418	2,188,938	2,949,532	3,003,622	
Cash Funds Exempt/RF	143,193	101,148	3,550	101,148	3,550	
Federal Funds	1,356,293	1,182,804	588,511	491,521	1,042,952	
Medicaid Cash Funds	3,550	3,550	3,550	3,550	3,550	
GF in Medicaid CF	1,775	1,775	1,775	1,775	1,775	
Net General Fund	1,775	1,775	1,775	1,775	1,775	

	FY 2007-08 Actual	FY 2008-09 Actual	FY 2009-10 Appropriation	FY 20 Request	010-11 Staff Recommend	Change
				*		Request
Operating Expenses	264,040	<u>307,866</u>	<u>206,950</u> S	<u>333,315</u>	<u>483,157</u>	BA-1
Cash Funds	54,367	101,976	171,976	277,266	298,341	
Cash Funds Exempt/RF	26,534	21,074	0	21,075	0	
Federal Funds	183,139	184,816	34,974	34,974	184,816	
SUBTOTAL - (A) Health Statistics and Vital Records	3,404,271	3,562,236	2,987,949	3,875,516	4,533,281	
FTE	<u>49.2</u>	<u>51.1</u>	<u>55.2</u>	<u>65.6</u>	<u>65.6</u>	
General Fund	0	0	0	0	0	
Cash Funds	1,695,112	2,072,394	2,360,914	3,226,798	3,301,963	
Cash Funds Exempt/RF	169,727	122,222	3,550	122,223	3,550	
Federal Funds	1,539,432	1,367,620	623,485	526,495	1,227,768	
Medicaid Cash Funds	3,550	3,550	3,550	3,550	3,550	
GF in Medicaid CF	1,775	1,775	1,775	1,775	1,775	
Net General Fund	1,775	1,775	1,775	1,775	1,775	
(B) Information Technology Services	0 104 705	0.054.740	0.007.000	070 515 D	070 515	DI WIDI I
Personal Services	2,124,725	2,056,768	2,237,998 S	279,515 B		DI #NP11
FTE	<u>21.1</u>	<u>20.5</u>	<u>23.7</u>	<u>1.8</u>	<u>1.8</u>	
General Fund	0	0	0	0	0	
FTE	0.0	0.0	0.0	0.0	0.0	
Cash Funds	137,334	139,595	164,664	72,028	72,028	
FTE Coale Franke Franket (DF	0.5	0.6	0.6	0.2	0.2	
Cash Funds Exempt/RF	1,690,473	1,756,940	1,796,154	202,338	202,338	
FTE Factorial Francia	20.6	18.5	20.4	1.6	1.6	
Federal Funds FTE	296,918 0.0	160,233 1.4	277,180 2.7	5,149 0.0	5,149 0.0	
FIE Medicaid Cash Funds	0.0 15,145	1.4 15,145	2.7 15,145	0.0 15,145	15,145	
GF in Medicaid CF	7,573	7,573	7,573	7,573	7,573	
Net General Fund	7,573	7,573	7,573	7,573	7,573	
Operating Expenses	782,574	<u>788,058</u>	886,125	886,125	<u>790,314</u>	
Cash Funds	101,677	101,677	103,927	103,927	103,927	
Cash Funds Exempt/RF	661,203	661,213	661,219	661,219	661,219	
Federal Funds	19,694	25,168	120,979	120,979	25,168	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 2	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Purchase of Services from Computer Center	<u>110,957</u>	<u>385,773</u>	<u>376,376</u> S	<u>5,502,727</u>	5,502,727	DI #NP11
General Fund	0	0	0	254,031	254,031	
Cash Funds	31,488	42,572	42,572	741,747	741,747	
Cash Funds Exempt/RF	69,358	328,800	297,730	1,831,284	1,831,284	
Federal Funds	10,111	14,401	36,074	2,675,665	2,675,665	
Medicaid Cash Funds	0	0	0	129,402	129,402	
GF in Medicaid CF	0	0	0	42,826	42,826	
Net General Fund	0	0	0	296,857	296,857	
Multiuse Network Payments	<u>52,135</u>	<u>55,275</u>	<u>61,792</u>	<u>611,578</u>	<u>611,578</u>	DI #NP11
General Fund	0	0	0	10,612	10,612	
Cash Funds	0	0	0	1,008	1,008	
Cash Funds Exempt/RF	52,135	55,275	55,275	352,653	352,653	
Federal Funds	0	0	6,517	247,305	247,305	
Management and Administration of OIT	<u>0</u>	<u>111,907</u>	<u>100,799</u> S	<u>496,108</u>	496,108	<u>DI #NP11</u>
Cash Funds Exempt/RF	0	111,907	100,799	293,073	293,073	
Federal Funds	0	0	0	203,035	203,035	
SUBTOTAL - (B) Information Technology Services	3,070,391	3,397,781	3,663,090	7,776,053	7,680,242	
FTE	<u>21.1</u>	<u>20.5</u>	<u>23.7</u>	<u>1.8</u>	<u>1.8</u>	
General Fund	0	0	0	264,643	264,643	
FTE	0.0	0.0	0.0	0.0	0.0	
Cash Funds	270,499	283,844	311,163	918,710	918,710	
FTE	0.5	0.6	0.6	0.2	0.2	
Cash Funds Exempt/RF	2,473,169	2,914,135	2,911,177	3,340,567	3,340,567	
FTE	20.6	18.5	20.4	1.6	1.6	
Federal Funds	326,723	199,802	440,750	3,252,133	3,156,322	
FTE	0.0	1.4	2.7	0.0	0.0	
Medicaid Cash Funds	15,145	15,145	15,145	144,547	144,547	
GF in Medicaid CF	7,573	7,573	7,573	50,399	50,399	
Net General Fund	7,573	7,573	7,573	315,042	315,042	

	FY 2007-08 Actual	FY 2008-09 Actual	FY 2009-10 Appropriation	FY 2 Request	010-11 Staff Recommend	Change Request
(C) Indirect Cost Assessment	602,040	607,692	835,177 S	*	Pending	11010000
Cash Funds	311,669	349,689	550,663	510,000	<u>r onding</u>	
Cash Funds Exempt/RF	16,410	12,392	37,678	47,678		
Federal Funds	273,961	245,611	246,836	253,543		
Medicaid Cash Funds		0				
TOTAL - (2) CENTER FOR HEALTH AND						
ENVIRONMENTAL INFORMATION (CHEIS)	7,076,702	7,567,709	7,486,216	12,462,790	12,213,523	
FTE	<u>70.3</u>	71.6	<u>78.9</u>	<u>67.4</u>	<u>67.4</u>	
General Fund	0	0	0	264,643	264,643	
Cash Funds	2,277,280	2,705,927	3,222,740	4,655,508	4,220,673	
Cash Funds Exempt/RF	2,659,306	3,048,749	2,952,405	3,510,468	3,344,117	
Federal Funds	2,140,116	1,813,033	1,311,071	4,032,171	4,384,090	
Medicaid Cash Funds	18,695	18,695	18,695	148,097	148,097	
GF in Medicaid CF	<i>9,348</i>	9,348	9,348	52,174	52,174	
Net General Fund	9,348	<i>9,34</i> 8	9,348	316,817	316,817	

#### (3) LABORATORY SERVICES

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

(A) Director's Office						
Personal Services	538,878	545,311	715,554 S	592,910 B	474,692	DI #NP11
FTE	<u>8.1</u>	<u>7.4</u>	<u>8.1</u>	<u>6.4</u>	<u>5.3</u>	
General Fund	0	0	0	0	0	
FTE		0.0	0.0	0.0	0.0	
Cash Funds	505,581	545,311	597,336	474,692	474,692	
FTE		7.4	7.0	5.3	5.3	
Cash Funds Exempt/RF	13,298	0	0	0	0	
FTE		0.0	0.0	0.0	0.0	
Federal Funds	19,999	0	118,218	118,218	0	
FTE		0.0	1.1	1.1	0.0	
Cash Funds Exempt/RF FTE Federal Funds		0 0.0 0	0 0.0 118,218	0 0.0 118,218	0 0.0 0	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Operating Expenses	<u>21,579</u>	<u>1,885</u>	<u>30,597</u>	<u>30,597</u>	22,421	
General Fund	0	0	0	0	0	
Cash Funds	21,497	1,885	22,421	22,421	22,421	
Federal Funds	82	0	8,176	8,176	0	
Indirect Cost Assessment	<u>1,220,316</u>	<u>1,256,889</u>	<u>1,591,175</u> S	<u>1,410,593</u>	Pending	
Cash Funds	766,376	842,144	1,233,152	1,057,429		
Cash Funds Exempt/RF	0	0	30,000	53,153		
Federal Funds	453,940	414,745	328,023	300,011		
SUBTOTAL - (A) Director's Office	1,780,773	1,804,085	2,337,326	2,034,100	497,113	
FTE	<u>8.1</u>	<u>7.4</u>	<u>8.1</u>	<u>6.4</u>	<u>5.3</u>	
General Fund	0	0	0	0	0	
FTE		0.0	0.0	0.0	0.0	
Cash Funds	1,293,454	1,389,340	1,852,909	1,554,542	497,113	
FTE		7.4	7.0	5.3	5.3	
Cash Funds Exempt/RF	13,298	0	30,000	53,153	0	
FTE		0.0	0.0	0.0	0.0	
Federal Funds	474,021	414,745	454,417	426,405	0	
FTE		0.0	1.1	1.1	0.0	
(B) Chemistry and Microbiology						
Personal Services	3,304,075	3,576,829	5,165,844 S	5,074,219 B	4,203,563	DI #NP11
FTE	<u>48.7</u>	<u>55.8</u>	<u>65.6</u>	<u>65.1</u>	<u>60.9</u>	
General Fund	158,992	162,269	758,953	751,834	751,834	
FTE		2.1	11.2	11.2	11.2	
Cash Funds	2,042,279	2,244,195	2,375,128	2,341,613	2,341,613	
FTE		35.6	32.0	32.0	32.0	
Cash Funds Exempt/RF	207,488	133,690	132,926	95,304	95,304	
FTE		3.9	4.0	3.5	3.5	
Federal Funds	895,316	1,036,675	1,898,837	1,885,468	1,014,812	
FTE		14.2	18.4	18.4	14.2	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Operating Expenses	2,617,014	2,656,312	3,297,500	S <u>3,300,461</u>	<u>3,378,797</u>	
General Fund	12,712	12,711	316,278	316,278	316,278	
Cash Funds	2,077,171	2,213,873	2,629,197	2,632,158	2,632,158	
Cash Funds Exempt/RF	186,225	139,486	140,119	140,119	140,119	
Federal Funds	340,906	290,242	211,906	211,906	290,242	
Equipment Replacement - CF	16,844	0	0	0	0	
SUBTOTAL - (B) Laboratory Services - Chemistry						
and Microbiology	5,937,933	6,233,141	8,463,344	8,374,680	7,582,360	
FTE	<u>48.7</u>	<u>55.8</u>	<u>65.6</u>	<u>65.1</u>	<u>60.9</u>	
General Fund	171,704	174,980	1,075,231	1,068,112	1,068,112	
FTE		2.1	11.2	11.2	11.2	
Cash Funds	4,136,294	4,458,068	5,004,325	4,973,771	4,973,771	
FTE		35.6	32.0	32.0	32.0	
Cash Funds Exempt/RF	393,713	273,176	273,045	235,423	235,423	
FTE		3.9	4.0	3.5	3.5	
Federal Funds	1,236,222	1,326,917	2,110,743	2,097,374	1,305,054	
FTE		14.2	18.4	18.4	14.2	
(C) Certification						
Personal Services	629,200	567,160	711,801	S 708,516 B	704,319	
FTE	7.6	<u>9.0</u>	10.3	10.3	10.5	
General Fund	0	0	0	0	0	
FTE		0.0	0.0	0.0	0.0	
Cash Funds	443,270	381,051	526,800	522,520	522,520	
FTE		6.4	7.9	7.9	7.9	
Cash Funds Exempt/RF	0	0	0	0	0	
Federal Funds	185,930	186,109	185,001	185,996	181,799	
FTE	,	2.6	2.4	2.4	2.6	
Operating Expenses	<u>65,154</u>	<u>97,818</u>	<u>89,886</u>	<u>89,886</u>	<u>98,002</u>	
Cash Funds	43,476	60,299	60,483	60,483	60,483	
Federal Funds	21,678	37,519	29,403	29,403	37,519	
SUBTOTAL - (C) Certification	694,354	664,978	801,687	798,402	802,321	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 2	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
FTE	<u>7.6</u>	<u>9.0</u>	<u>10.3</u>	<u>10.3</u>	<u>10.5</u>	
General Fund	0	0	0	0	0	
FTE		0.0	0.0	0.0	0.0	
Cash Funds	486,746	441,350	587,283	583,003	583,003	
FTE		6.4	7.9	7.9	7.9	
Cash Funds Exempt/RF	0	0	0	0	0	
Federal Funds	207,608	223,628	214,404	215,399	219,318	
FTE		2.6	2.4	2.4	2.6	
TOTAL - (3) LABORATORY SERVICES	8,413,060	8,702,204	11,602,357	11,207,182	8,881,794	
FTE	<u>64.4</u>	<u>72.2</u>	<u>84.0</u>	<u>81.8</u>	<u>76.7</u>	
General Fund	171,704	174,980	1,075,231	1,068,112	1,068,112	
FTE		2.1		11.2	0.0	
Cash Funds	5,916,494	6,288,758	7,444,517	7,111,316	6,053,887	
FTE		49.4		45.2	(1.7)	
Cash Funds Exempt/RF	407,011	273,176	303,045	288,576	235,423	
FTE		3.9		3.5	(0.5)	
Federal Funds	1,917,851	1,965,290	2,779,564	2,739,178	1,524,372	
FTE		16.8		21.9	(5.1)	

## (4) LOCAL PUBLIC HEALTH PLANNING AND SUPPORT

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

Assessment and Planning Program	0	78,282	165,806	S 166,478 B	166,478
FTE	<u>0.0</u>	<u>0.6</u>	<u>3.0</u>	<u>3.0</u>	<u>3.0</u>
General Fund	0	30,000	28,311	28,627	28,627
FTE	0.0	0.0	0.5	0.5	0.5
Cash Funds	0	48,282	137,495	137,851	137,851
FTE	0.0	0.6	2.5	2.5	2.5

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Distributions to Local Public Health Agencies	7,201,479	<u>8,439,892</u>	8,540,933	8,540,933	8,249,086	
General Fund	5,962,731	5,962,731	5,962,731	5,962,731	5,962,731	
Cash Funds	0	2,477,161	2,578,202	2,578,202	2,286,355	
Cash Funds Exempt/RF	1,238,748	0	0	0	0	
Environmental Health Services Not Provided by Local						
Health Departments - GF	242,358	234,296	242,358	242,358	242,358	
Local Public Health Nursing Consultation and Training	475,364	452,205	495,852	S 497,912 B	497,865	
FTE	<u>5.0</u>	<u>4.6</u>	<u>5.4</u>	<u>5.4</u>	<u>7.8</u>	
General Fund	253,086	229,974	280,009	280,863	280,863	
FTE		2.2		0.0	0.0	
Cash Funds	0	0	0	0	0	
FTE		0.0		0.0	0.0	
Federal Funds	222,278	222,231	215,843	217,049	217,002	
FTE		2.4		0.0	2.4	
Indirect Cost Assessment - FF	38,630	37,564	34,242	40,924	Pending	
TOTAL - (4) LOCAL PUBLIC HEALTH PLANNING						
AND SUPPORT	7,957,831	9,242,239	9,479,191	9,488,605	9,155,787	
FTE	<u>5.0</u>	<u>5.2</u>	8.4	<u>8.4</u>	<u>10.8</u>	
General Fund	6,458,175	6,457,001	6,513,409	6,514,579	6,514,579	
FTE	0.0	2.2	0.5	0.5	0.5	
Cash Funds	0	2,525,443	2,715,697	2,716,053	2,424,206	
FTE	0.0	0.6	2.5	2.5	2.5	
Cash Funds Exempt/RF	1,238,748	0	0	0	0	
Federal Funds	260,908	259,795	250,085	257,973	217,002	
FTE	0.0	2.4	0.0	0.0	2.4	

### (5) AIR QUALITY CONTROL DIVISION

(6) WATER QUALITY CONTROL DIVISION

### (7) HAZARDOUS MATERIALS AND WASTE MANAGEMENT DIVISION

## (8) CONSUMER PROTECTION

These environmental divisions are presented separately by another analyst

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
(9) DISEASE CONTROL AND ENVIRONMENTAL E	PIDEMIOLO	<b>GY DIVISION</b>				
This division seeks to reduce illness and premature deaths			eventing and con	trolling		
communicable diseases, related diseases, and their compli		•	•	0		
prevalence of diseases, and evaluating potential risks posed		0	0	•		
source of cash funds exempt is federal funds appropriated	•		• •	1 2		
	1	0				
(A) Administration, General Disease Control and Surve	eillance					
Personal Services	873,627	878,119	940,323	S 841,475 B	815,174	DI #NP11
FTE	<u>9.7</u>	<u>9.0</u>	<u>15.3</u>	<u>14.0</u>	<u>13.1</u>	
General Fund	576,071	589,890	642,394	551,014	551,014	
FTE	6.7	6.0	11.4	10.3	10.3	
Federal Funds	297,556	288,229	297,929	290,461	264,160	
FTE	3.0	3.0	3.9	3.7	2.8	
Operating Expenses	285,142	<u>290,524</u>	<u>378,512</u>	<u>343,512</u> B	264,579	
General Fund	255,616	255,616	258,133	223,133	223,133	
Cash Funds	1,252	0	6,538	6,538	6,538	
Federal Funds	28,274	34,908	113,841	113,841	34,908	
Indirect Cost Assessment	3,290,144	2,286,841	2,790,246	S <u>3,050,328</u>	Pending	
Cash Funds	0	13,878	33,966	50,000		
Cash Funds Exempt/RF	5,606	0	0	0		
Federal Funds	3,284,538	2,272,963	2,756,280	3,000,328		
SUBTOTAL - (A) Administration, General Disease						
Control and Surveillance	4,448,913	3,455,484	4,109,081	4,235,315	1,079,753	
FTE	<u>9.7</u>	9.0	<u>15.3</u>	<u>14.0</u>	<u>13.1</u>	
General Fund	831,687	845,506	900,527	774,147	774,147	
FTE	6.7	6.0	11.4	10.3	10.3	
Cash Funds	1,252	13,878	40,504	56,538	6,538	
Cash Funds Exempt/RF	5,606	0	0	0	0	
Federal Funds	3,610,368	2,596,100	3,168,050	3,404,630	299,068	
FTE	3.0	3.0	3.9	3.7	2.8	

(B) Special Purpose Disease Control Programs

(1) Immunization

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	)10-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Personal Services	1,821,882	2,657,561	1,942,800	S 1,889,565 B	2,568,977	DI #NP11
FTE	<u>21.5</u>	<u>24.9</u>	<u>31.0</u>	<u>30.4</u>	<u>35.6</u>	
General Fund	85,702	852,922	854,038	825,785	825,785	
FTE	0.8	2.9	12.0	11.7	11.7	
Cash Funds Exempt/RF	0	0	0	0	0	
Federal Funds	1,736,180	1,804,639	1,088,762	1,063,780	1,743,192	
FTE	20.7	22.0	19.0	18.7	23.9	
Operating Expenses	<u>3,478,010</u>	4,145,502	22,746,733	<u>12,711,733</u> B	<u>12,618,249</u>	
General Fund	808,659	697,885	687,285	652,285	652,285	
General Fund Exempt	0	0	0	0	0	
Cash Funds	0	1,550,797	938,273	938,273	844,789	
Cash Funds Exempt/RF	663,871	0	0	0	0	
Federal Funds	2,005,480	1,896,820	21,121,175	11,121,175	11,121,175	
Appropriation from Tobacco Tax Cash Fund to the						
General Fund	<u>490,885</u>	478,004	<u>504,000</u>	450,000	447,000	
Cash Funds	0	478,004	504,000	450,000	447,000	
Cash Funds Exempt/RF	490,885	0	0	0	0	
Immunizations Performed by County Public Health						
Nursing Services and successor agencies- GFE	512,791	478,004	504,000	450,000	447,000	
Subtotal - (1) Immunization	6,303,568	7,759,071	25,697,533	15,501,298	16,081,226	
FTE	<u>21.5</u>	<u>24.9</u>	<u>31.0</u>	<u>30.4</u>	<u>35.6</u>	
General Fund	894,361	1,550,807	1,541,323	1,478,070	1,478,070	
FTE	0.8	2.9	12.0	11.7	11.7	
General Fund Exempt	512,791	478,004	504,000	450,000	447,000	
Cash Funds	0	2,028,801	1,442,273	1,388,273	1,291,789	
Cash Funds Exempt/RF	1,154,756	0	0	0	0	
Federal Funds	3,741,660	3,701,459	22,209,937	12,184,955	12,864,367	
FTE	20.7	22.0	19.0	18.7	23.9	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	)10-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
(2) Sexually Transmitted Disease, HIV and AIDS						
Personal Services	3,664,158	3,833,795	3,305,638 S	3,188,848 B	3,622,784	DI #NP11
FTE	<u>48.5</u>	<u>47.2</u>	<u>55.8</u>	<u>54.3</u>	<u>45.7</u>	
General Fund	0	0				
Cash Funds	0	76,765	75,961	75,818	75,818	
FTE	0.0	1.2	1.2	1.2	1.2	
Cash Funds Exempt/RF	75,688	0	0	0	0	
FTE	1.2	0.0	0.0	0.0	0.0	
Federal Funds	3,588,470	3,757,030	3,229,677	3,113,030	3,546,966	
FTE	47.3	46.0	54.6	53.1	44.5	
Operating Expenses	<u>5,088,256</u>	5,082,785	7,515,405	7,515,405	5,748,115	
Cash Funds	0	2,197,049	2,702,405	2,702,405	2,862,379	
Cash Funds Exempt/RF	1,675,901	0	0	0	0	
Federal Funds	3,412,355	2,885,736	4,813,000	4,813,000	2,885,736	
Subtotal - (2) Sexually Transmitted Disease, HIV and						
AIDS	8,752,414	8,916,580	10,821,043	10,704,253	9,370,899	
FTE	<u>48.5</u>	<u>47.2</u>	<u>55.8</u>	<u>54.3</u>	<u>45.7</u>	
General Fund	0	0	0	0	0	
Cash Funds	0	2,273,814	2,778,366	2,778,223	2,938,197	
FTE	0.0	1.2	1.2	1.2	1.2	
Cash Funds Exempt/RF	1,751,589	0	0	0	0	
FTE	1.2	0.0	0.0	0.0	0.0	
Federal Funds	7,000,825	6,642,766	8,042,677	7,926,030	6,432,702	
FTE	47.3	46.0	54.6	53.1	44.5	
(3) Ryan White Act						
Personal Services	832,652	983,188	293,176 S	285,924 B	950 420	DI #NP11
FTE	<u>9.3</u>	<u>11.8</u>	<u>4.0</u>	<u>3.8</u>	<u>11.7</u>	
General Fund	<u>26,303</u>	27,309	<u>4.0</u> 28,556	<u></u>	28,446	
FTE	0.4	0.3	0.4	0.4	0.4	
Federal Funds	806,349	955,879	264,620	257,478	921,974	
FTE	8.9	11.5	3.6	3.4	11.3	
	0.7	11.5	5.0	5.4	11.5	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Operating Expenses	<u>15,874,751</u>	<u>17,527,191</u>	<u>12,951,560</u>	12,951,560	<u>17,748,772</u>	
General Fund	1,357,404	1,357,404	1,357,404	1,357,404	1,357,404	
Cash Funds	0	3,400,575	3,622,156	3,622,156	3,622,156	
Cash Funds Exempt/RF	3,151,836	0	0	0	0	
Federal Funds	11,365,511	12,769,212	7,972,000	7,972,000	12,769,212	
Subtotal - (3) Ryan White Act	16,707,403	18,510,379	13,244,736	13,237,484	18,699,192	
FTE	<u>9.3</u>	<u>11.8</u>	<u>4.0</u>	<u>3.8</u>	<u>11.7</u>	
General Fund	1,383,707	1,384,713	1,385,960	1,385,850	1,385,850	
FTE	0.4	0.3	0.4	0.4	0.4	
Cash Funds	0	3,400,575	3,622,156	3,622,156	3,622,156	
Cash Funds Exempt/RF	3,151,836	0	0	0	0	
Federal Funds	12,171,860	13,725,091	8,236,620	8,229,478	13,691,186	
FTE	8.9	11.5	3.6	3.4	11.3	
(4) Tuberculosis Control and Treatment						
Personal Services	963,310	1,124,726	616,374	S 602,314 B	1,089,687	DI #NP11
FTE	<u>9.7</u>	<u>11.5</u>	<u>6.8</u>	<u>6.6</u>	12.0	
General Fund	64,487	116,791	122,742	122,826	122,826	
FTE	1.2	1.2	1.2	1.2	1.2	
Cash Funds Exempt/RF	94,788	95,554	95,554	95,554	95,554	
FTE	1.7	1.0	1.7	1.7	1.7	
Federal Funds	804,035	912,381	398,078	383,934	871,307	
FTE	6.8	9.3	3.9	3.7	9.1	
Operating Expenses	1,606,736	<u>2,217,461</u>	<u>1,872,933</u>	<u>1,872,933</u>	<u>2,217,462</u>	
General Fund	950,047	1,191,913	1,191,913	1,191,913	1,191,913	
Cash Funds Exempt/RF	185,689	210,019	210,020	210,020	210,020	
Federal Funds	471,000	815,529	471,000	471,000	815,529	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Subtotal - (4) Tuberculosis Control and Treatment	2,570,046	3,342,187	2,489,307	2,475,247	3,307,149	
FTE	<u>9.7</u>	<u>11.5</u>	<u>6.8</u>	<u>6.6</u>	<u>12.0</u>	
General Fund	1,014,534	1,308,704	1,314,655	1,314,739	1,314,739	
FTE	1.2	1.2	1.2	1.2	1.2	
Cash Funds Exempt/RF	280,477	305,573	305,574	305,574	305,574	
FTE	1.7	1.0	1.7	1.7	1.7	
Federal Funds	1,275,035	1,727,910	869,078	854,934	1,686,836	
FTE	6.8	9.3	3.9	3.7	9.1	
SUBTOTAL - (B) Special Purpose Disease Programs	34,333,431	38,528,217	52,252,619	41,918,282	47,458,466	
FTE	<u>89.0</u>	<u>95.4</u>	<u>97.6</u>	<u>95.1</u>	<u>105.0</u>	
General Fund	3,292,602	4,244,224	4,241,938	4,178,659	4,178,659	
FTE	2.4	4.4	13.6	13.3	13.3	
General Fund Exempt	512,791	478,004	504,000	450,000	447,000	
Cash Funds	0	7,703,190	7,842,795	7,788,652	7,852,142	
FTE	0.0	1.2	1.2	1.2	1.2	
Cash Funds Exempt/RF	6,338,658	305,573	305,574	305,574	305,574	
FTE	2.9	1.0	1.7	1.7	1.7	
Federal Funds	24,189,380	25,797,226	39,358,312	29,195,397	34,675,091	
FTE	83.7	88.8	81.1	78.9	88.8	
(C) Environmental Epidemiology						
(1) Birth Defects Monitoring and Prevention						
Personal Services	295,303	323,907	442,658 S	410,102 B	329,877	DI #NP11
FTE	2.7	2.9	5.8	5.3	3.6	
General Fund	117,297	121,631	124,288	118,619	118,619	
FTE	1.7	1.1	1.7	1.6	1.6	
Cash Funds	0	100,455	142,232	134,244	134,244	
FTE	0.0	0.9	1.5	1.4	1.4	
Federal Funds	178,006	101,821	176,138	157,239	77,014	
FTE	1.0	0.9	2.6	2.3	0.6	
Operating Expenses	<u>7,806</u>	<u>11,415</u>	<u>35,667</u>	<u>35,667</u>	<u>12,840</u>	
Cash Funds	0	0	1,425	1,425	1,425	
Federal Funds	7,806	11,415	34,242	34,242	11,415	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Subtotal - (1) Birth Defects Monitoring	303,109	335,322	478,325	445,769	342,717	
FTE	<u>2.7</u>	<u>2.9</u>	<u>5.8</u>	<u>5.3</u>	<u>3.6</u>	
General Fund	117,297	121,631	124,288	118,619	118,619	
FTE	1.7	1.1	1.7	1.6	1.6	
Cash Funds	0	100,455	143,657	135,669	135,669	
FTE	0.0	0.9	1.5	1.4	1.4	
Federal Funds	185,812	113,236	210,380	191,481	88,429	
FTE	1.0	0.9	2.6	2.3	0.6	
(2) Federal Grants - FF	1,761,440	1,488,055	2,352,311 S	2,343,202 B	1 456 257	DI #NP11
FTE	1,701,440	8.5	15.5	15.3	8.3	
TIE	10.1	0.5	15.5	15.5	0.5	
SUBTOTAL - (C) Environmental Epidemiology	2,064,549	1,823,377	2,830,636	2,788,971	1,798,974	
FTE	<u>12.8</u>	<u>11.4</u>	<u>21.3</u>	<u>20.6</u>	<u>11.9</u>	
General Fund	117,297	121,631	124,288	118,619	118,619	
FTE	1.7	1.1	1.7	1.6	1.6	
Cash Funds	0	100,455	143,657	135,669	135,669	
FTE	0.0	0.9	1.5	1.4	1.4	
Federal Funds	1,947,252	1,601,291	2,562,691	2,534,683	1,544,686	
FTE	11.1	9.4	18.1	17.6	8.9	
(Formerly D) Emergency Management						
Personal Services	95,091	126,545	0	0	0	
FTE	0.9	<u>1.3</u>	0.0	0.0	<u>0.0</u>	
Cash Funds Exempt/RF	0	0	0	0	0	
FTE	0.0	0.0	0.0	0.0	0.0	
Federal Funds	95,091	126,545	0	0	0	
FTE	0.9	1.3	0.0	0.0	0.0	
Operating Expenses	54,324	71,308	<u>0</u>	<u>0</u>	<u>0</u>	
Federal Funds	54,324	71,308	$\frac{\mathbf{o}}{0}$	$\frac{\mathbf{o}}{0}$	$\frac{0}{0}$	
	5 1,52 1	, 1,500	v	5	0	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	)10-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
SUBTOTAL - (D) Emergency Management	149,415	197,853	0	0	0	
FTE	<u>0.9</u>	<u>1.3</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	
Cash Funds Exempt/RF	0	0	0	0	0	
FTE	0.0	0.0	0.0	0.0	0.0	
Federal Funds	149,415	197,853	0	0	0	
FTE	0.9	1.3	0.0	0.0	0.0	
(D) Federal Grants - FF	31,192,748	4,027,852	9,498,769 S		3,778,596	DI #NP11
FTE	63.6	22.3	49.3	47.5	20.5	
TOTAL - (9) DISEASE CONTROL AND						
ENVIRONMENTAL EPIDEMIOLOGY DIVISION	72,189,056	48,032,783	68,691,105	58,295,514	54,115,789	
FTE	<u>176.0</u>	<u>139.4</u>	<u>183.5</u>	<u>177.2</u>	<u>150.5</u>	
General Fund	4,241,586	5,211,361	5,266,753	5,071,425	5,071,425	
FTE	10.8	11.5	26.7	25.2	25.2	
General Fund Exempt	512,791	478,004	504,000	450,000	447,000	
Cash Funds	1,252	7,817,523	8,026,956	7,980,859	7,994,349	
FTE	0.0	2.1	2.7	2.6	2.6	
Cash Funds Exempt/RF	6,344,264	305,573	305,574	305,574	305,574	
FTE	2.9	1.0	1.7	1.7	1.7	
Federal Funds	61,089,163	34,220,322	54,587,822	44,487,656	40,297,441	
FTE	162.3	124.8	152.4	147.7	121.0	

#### (10) PREVENTION SERVICES DIVISION

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

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
(A) Prevention Programs						
(1) Programs and Administration						
Personal Services	1,660,148	1,720,433	1,590,971 S	1,598,983 B	1,708,324	
FTE	22.4	21.4	23.7	<u>23.7</u>	<u>22.9</u>	
General Fund	116,152	113,677	118,232	118,480	118,480	
FTE	2.0	1.9	2.0	2.0	2.0	
Cash Funds	0	0	670,455	673,403	673,403	
FTE	0.0	0.0	10.0	10.0	10.0	
Cash Funds Exempt/RF	655,664	669,447	0	0	0	
FTE	9.5	8.6	0.0	0.0	0.0	
Federal Funds	888,332	937,309	802,284	807,100	916,441	
FTE	10.9	10.9	11.7	11.7	10.9	
Operating Expenses	<u>1,204,124</u>	<u>1,067,239</u>	783,293	783,293	<u>1,067,239</u>	
Cash Funds	0	0	118,440	118,440	118,440	
Cash Funds Exempt/RF	128,055	118,440	0	0	0	
Federal Funds	1,076,069	948,799	664,853	664,853	948,799	
Transfer to the Health Disparities Grant Program Fund -	0	0	3,984,000	3,984,000	3,576,000	
Transfer to the Department of Health Care Policy and						
Financing for Disease Management	<u>0</u>	<u>0</u>	2,000,000	2,000,000	2,000,000	
Cash Funds	0	0	2,000,000	2,000,000	2,000,000	
Cash Funds Exempt/RF	0	0	0	0	0	
Prevention Early Detection and Treatment Fund						
Expenditures	<u>0</u>	34,786,921	<u>0</u>	<u>0</u>	<u>0</u>	
Cash Funds	$\overline{\overline{0}}$	34,786,921	0	$\overline{0}$	$\overline{0}$	
Cash Funds Exempt/RF	0	0	0	0	0	
Cancer, Cardiovascular Disease, and Pulmonary Disease						
Grants	17,862,681	23,305,114	<u>17,271,382</u> S	8,000,000	12,482,157	BR #NP5
Cash Funds	<u>17,802,081</u> 0	<u>23,303,114</u> 0	17,271,382 5	<u>8,000,000</u> 8,000,000	12,482,157	
Cash Funds Exempt/RF	17,862,681	23,305,114	0	0	12,402,137	
	17,002,001	23,303,114	v	U	0	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 2	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Short Term Innovative Health Program Grants	832,940	592,679	0	0	0	
FTE	<u>0.4</u>	<u>0.4</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	
Cash Funds	0	592,679	0	0	0	
FTE	0.0	0.4	0.0	0.0	0.0	
Cash Funds Exempt/RF	832,940	0	0	0	0	
FTE	0.4	0.0	0.0	0.0	0.0	
Indirect Cost Assessment	<u>3,113,652</u>	<u>3,488,875</u>	<u>2,912,251</u> S	<u>3,138,765</u>	Pending	
Cash Funds	28,377	513,481	685,656	908,003		
Cash Funds Exempt/RF	697,744	400,000	25,000	25,000		
Federal Funds	2,387,531	2,575,394	2,201,595	2,205,762		
Medicaid Cash Funds	0	0	0	0		
GF in Medicaid CF	0	0	0	0		
Net General Fund	0	0	0	0		
Subtotal - (1) Programs and Administration	24,673,545	64,961,261	28,541,897	19,505,041	20,833,720	
FTE	22.8	<u>21.8</u>	<u>23.7</u>	23.7	<u>22.9</u>	
General Fund	116,152	113,677	118,232	118,480	118,480	
FTE	2.0	1.9	2.0	2.0	2.0	
Cash Funds	28,377	35,893,081	24,729,933	15,683,846	18,850,000	
FTE	0.0	0.4	10.0	10.0	10.0	
Cash Funds Exempt/RF	20,177,084	24,493,001	25,000	25,000	0	
FTE	9.9	8.6	0.0	0.0	0.0	
Federal Funds	4,351,932	4,461,502	3,668,732	3,677,715	1,865,240	
FTE	10.9	10.9	11.7	11.7	10.9	
Medicaid Cash Funds	0	0	0	0	0	
GF in Medicaid CF	0	0	0	0	0	
Net General Fund	116,152	113,677	118,232	118,480	118,480	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	)10-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
(2) Cancer Registry						
Personal Services	734,798	794,421	654,963 S	658,999 B	783,705	
FTE	<u>10.0</u>	<u>10.2</u>	<u>10.0</u>	<u>10.0</u>	<u>10.2</u>	
General Fund	181,339	188,105	189,351	190,387	190,387	
FTE	2.0	2.0	2.0	2.0	2.0	
Cash Funds	0	0	0	0	0	
Federal Funds	553,459	606,316	465,612	468,612	593,318	
FTE	8.0	8.2	8.0	8.0	8.2	
Operating Expenses	<u>51,292</u>	<u>90,555</u>	<u>365,552</u>	<u>365,552</u>	<u>90,557</u>	
General Fund	30,550	30,550	30,552	30,552	30,552	
Federal Funds	20,742	60,005	335,000	335,000	60,005	
Subtotal - (2) Cancer Registry	786,090	884,976	1,020,515	1,024,551	874,262	
FTE	<u>10.0</u>	<u>10.2</u>	<u>10.0</u>	<u>10.0</u>	<u>10.2</u>	
General Fund	211,889	218,655	219,903	220,939	220,939	
FTE	2.0	2.0	2.0	2.0	2.0	
Cash Funds	0	0	0	0	0	
Federal Funds	574,201	666,321	800,612	803,612	653,323	
FTE	8.0	8.2	8.0	8.0	8.2	
(3) Chronic Disease and Cancer Prevention Grants	6,418,254	4,771,210	5,602,447 S	5,610,079 B	4,378,177	
FTE	<u>24.6</u>	<u>27.0</u>	<u>23.8</u>	<u>23.8</u>	<u>25.5</u>	
Cash Funds	0	359,960			0	
FTE	0.0	1.5			0.0	
Cash Funds Exempt/RF	282,533	0	0	0	0	
FTE	0.5	0.0		0.0	0.0	
Federal Funds	6,135,721	4,411,250	5,602,447	5,610,079	4,378,177	
FTE	24.1	25.5	23.8	23.8	25.5	
(4) Suicide Prevention	278,756	282,767	285,064 S	S 285,591 B	285,591	
FTE	<u>1.6</u>	<u>2.0</u>	<u>2.0</u>	<u>2.0</u>	<u>2.0</u>	
General Fund	278,756	282,767	285,064	285,591	285,591	
FTE	1.6	2.0	2.0	2.0	2.0	
Cash Funds	0	0	0	0	0	

	FY 2007-08	FY 2008-09	FY 2009-10		)10-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
(5) Tobacco Education, Prevention, and Cessation						
Personal Services	729,469	737,609	734,900	S 737,970 B	737,970	
FTE	<u>10.0</u>	<u>9.4</u>	<u>10.0</u>	<u>10.0</u>	<u>10.0</u>	
Cash Funds	0	737,609	734,900	737,970	737,970	
FTE	0.0	9.4	10.0	10.0	10.0	
Cash Funds Exempt/RF	729,469	0	0	0	0	
FTE	10.0	0.0	0.0	0.0	0.0	
Operating Expenses	168,628	173,365	175,000	175,000	<u>175,000</u>	
Cash Funds	0	173,365	175,000	175,000	175,000	
Cash Funds Exempt/RF	168,628	0	0	0	0	
Tobacco Cessation and Prevention Grants	25,398,482	<u>26,885,441</u>	<u>19,283,727</u>	S <u>8,350,000</u>	<u>22,674,436</u>	BR #NP5
Cash Funds	0	26,885,441	19,283,727	8,350,000	22,674,436	
Cash Funds Exempt/RF	25,398,482	0	0	0	0	
Subtotal - (5) Tobacco Education, Prevention, and						
Cessation	26,296,579	27,796,415	20,193,627	9,262,970	23,587,406	
FTE	<u>10.0</u>	<u>9.4</u>	<u>10.0</u>	<u>10.0</u>	<u>10.0</u>	
Cash Funds	0	27,796,415	20,193,627	9,262,970	23,587,406	
FTE	0.0	9.4	10.0	10.0	10.0	
Cash Funds Exempt/RF	26,296,579	0	0	0	0	
FTE	10.0	0.0	0.0	0.0	0.0	
SUBTOTAL (A) - Prevention Programs	58,453,224	98,696,629	55,643,550	35,688,232	49,959,156	
FTE	<u>69.0</u>	<u>70.4</u>	<u>69.5</u>	<u>69.5</u>	<u>70.6</u>	
General Fund	606,797	615,099	623,199	625,010	625,010	
FTE	5.6	5.9	6.0	6.0	6.0	
Cash Funds	28,377	64,049,456	44,923,560	24,946,816	42,437,406	
FTE	0.0	11.3	20.0	20.0	20.0	
Cash Funds Exempt/RF	46,756,196	24,493,001	25,000	25,000	0	
FTE	20.4	8.6	0.0	0.0	0.0	
Federal Funds	11,061,854	9,539,073	10,071,791	10,091,406	6,896,740	
FTE	43.0	44.6	43.5	43.5	44.6	
Medicaid Cash Funds	0	0	0	0	0	
GF in Medicaid CF	0	0	0	0	0	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Net General Fund	606,797	615,099	623,199	625,010	625,010	
(B) Women's Health - Family Planning						
Personal Services	1,221,710	1,460,821	1,277,681 S	1,143,107 B	1,312,580	DI #NP11
FTE	<u>14.0</u>	<u>15.9</u>	<u>19.3</u>	<u>17.7</u>	<u>15.9</u>	
General Fund	424,655	438,756	442,484	392,695	392,695	
FTE	5.3	5.2	6.4	5.8	5.8	
Cash Funds	0	0	124,041	127,495	127,495	
FTE	0.0	1.5	0.0	0.0	0.0	
Cash Funds Exempt/RF	179,442	181,962	59,169	59,169	59,169	
FTE	2.8	1.0	2.9	2.9	2.9	
Federal Funds	617,613	840,103	651,987	563,748	733,221	
FTE	5.9	8.2	10.0	9.0	7.2	
Medicaid Cash Funds	59,169	59,169	59,169	59,169	59,169	
GF in Medicaid CF	29,585	29,585	29,585	29,585	29,585	
Net General Fund	454,240	468,341	472,069	422,280	422,280	
Operating Expenses - GF	3,355	3,355	3,355	3,355	3,355	
Purchase of Services	4,486,648	4,579,716	<u>3,434,214</u>	3,434,214	<u>4,579,716</u>	
General Fund	1,229,003	1,229,003	1,229,003	1,229,003	1,229,003	
Cash Funds Exempt/RF	25,024	25,505	25,505	25,505	25,505	
Federal Funds	3,232,621	3,325,208	2,179,706	2,179,706	3,325,208	
Medicaid Cash Funds	25,024	25,505	25,505	25,505	25,505	
GF in Medicaid CF	12,512	12,753	12,753	12,753	12,753	
Net General Fund	1,241,515	1,241,756	1,241,756	1,241,756	1,241,756	
Transfer to the Department of Health Care Policy and						
Financing for Breast and Cervical Cancer Treatment	732,186	<u>638,398</u>	1,215,340	1,215,340	1,215,340	
Cash Funds	0	0	1,215,340	1,215,340	1,215,340	
Cash Funds Exempt/RF	732,186	638,398	0	0	0	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Breast and Cervical Cancer Screening	6,205,878	6,708,729	7,287,660	7,287,660	6,348,091	
FTE	<u>0.2</u>	<u>1.5</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	
Cash Funds	0	483,600	3,661,660	3,661,660	3,661,660	
FTE	0.2	1.5				
Cash Funds Exempt/RF	3,088,784	3,538,698	0	0	0	
Federal Funds	3,117,094	2,686,431	3,626,000	3,626,000	2,686,431	
Adult Stem Cells Cure Fund - CF	0	0	42,192 S	140,000 B	140,000	BA-2
Federal Grants - FF	492,206	359,387	340,166 S	322,650	332,037	DI #NP11
FTE	5.5	4.0	3.0	2.8 B	3.8	
SUBTOTAL (B) - Women's Health - Family Planning	13,141,983	13,750,406	13,600,608	13,546,326	13,931,119	
FTE	<u>19.7</u>	<u>21.4</u>	<u>22.3</u>	<u>20.5</u>	<u>19.7</u>	
General Fund	1,657,013	1,671,114	1,674,842	1,625,053	1,625,053	
FTE	5.3	5.2	6.4	5.8	5.8	
Cash Funds	0	483,600	5,043,233	5,144,495	5,144,495	
FTE	0.2	3.0	0.0	0.0	0.0	
Cash Funds Exempt/RF	4,025,436	4,384,563	84,674	84,674	84,674	
FTE	2.8	1.0	2.9	2.9	2.9	
Federal Funds	7,459,534	7,211,129	6,797,859	6,692,104	7,076,897	
FTE	11.4	12.2	13.0	11.8	11.0	
Medicaid Cash Funds	84,193	84,674	84,674	84,674	84,674	
GF in Medicaid CF	42,097	42,338	42,338	42,338	42,338	
Net General Fund	1,699,110	1,713,452	1,717,180	1,667,391	1,667,391	
(C) Rural-Primary Care						
Dental Programs	1,286,017	1,094,004	1,104,765 S	586,991 B	837,474	Entered
FTE	<u>4.4</u>	<u>3.7</u>	<u>3.0</u>	<u>3.0</u>	<u>3.7</u>	DENTAL
General Fund	530,502	382,008	577,668	57,854	180,454	PROGRAMS
FTE	0.7	0.8	0.8	0.8	0.8	HERE
Cash Funds	0	246,130	199,591	199,667	199,667	
FTE	0.0	0.2	0.2	0.2	0.2	
Cash Funds Exempt/RF	198,271	0	0	0	0	
FTE	0.2	0.0	0.0	0.0	0.0	
Federal Funds	557,244	465,866	327,506	329,470	457,353	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 2	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
FTE	3.5	2.7	2.0	2.0	2.7	
Primary Care Office	0	0	133,647	133,647	133,647	
FTE	0.0	0.0	1.5	1.5	1.5	
Cash Funds			53,647	53,647	53,647	
FTE			0.5	0.5	0.5	
Federal Funds			80,000	80,000	80,000	
FTE			1.0	1.0	1.0	
Federal Grants - FF	228,081	254,876	114,935 S	115,510 B	252,386	
FTE	1.3	1.2	1.5	1.5	1.2	
SUBTOTAL (C) - Rural Primary Care	1,514,098	1,348,880	1,353,347	836,148	1,223,507	
FTE	<u>5.7</u>	<u>4.9</u>	<u>6.0</u>	<u>6.0</u>	<u>6.4</u>	
General Fund	530,502	382,008	577,668	57,854	180,454	
FTE	0.7	0.8	0.8	0.8	0.8	
Cash Funds	0	246,130	253,238	253,314	253,314	
FTE	0.0	0.2	0.7	0.7	0.7	
Cash Funds Exempt/RF	198,271	0	0	0	0	
FTE	0.2	0.0	0.0	0.0	0.0	
Federal Funds	785,325	720,742	522,441	524,980	789,739	
FTE	4.8	3.9	4.5	4.5	4.9	
(D) Prevention Partnerships (1) Interagency Prevention Programs Coordination						
Personal Services	221,705	206,483	114,914 S	115,661 B	115,661	
FTE	<u>3.1</u>	<u>2.8</u>	<u>2.0</u>	<u>2.0</u>	<u>2.0</u>	
General Fund	221,705	206,483	114,914	115,661	115,661	
FTE	3.1	2.8	2.0	2.0	2.0	
Cash Funds	0	0	0	0	0	
Operating Expenses	<u>16,766</u>	<u>16,763</u>	<u>16,769</u>	<u>16,769</u>	<u>16,769</u>	
General Fund	16,766	16,763	16,769	16,769	16,769	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Subtotal - (1) Interagency Prevention Programs						
Coordination	238,471	223,246	131,683	132,430	132,430	
FTE	<u>3.1</u>	<u>2.8</u>	<u>2.0</u>	2.0	<u>2.0</u>	
General Fund	238,471	223,246	131,683	132,430	132,430	
FTE	3.1	2.8	2.0	2.0	2.0	
Cash Funds	0	0	0	0	0	
(2) Tony Grampsas Youth Services Program						
Prevention Services Programs	3,560,387	5,073,334	3,987,528 S	3,988,466 B	3,841,275	
FTE	<u>2.1</u>	<u>2.8</u>	<u>3.0</u>	<u>3.0</u>	<u>3.0</u>	
General Fund	0	999,301	0	0	0	
FTE	0.0	0.0	0.0	0.0	0.0	
Cash Funds	0	4,074,033	3,987,528	3,988,466	3,841,275	
FTE	0.0	2.8	3.0	3.0	3.0	
Cash Funds Exempt/RF	3,560,387	0	0	0	0	
FTE	2.1	0.0	0.0	0.0	0.0	
Federal Funds	0	0	0	0	0	
FTE	0.0	0.0	0.0	0.0	0.0	
Colorado Student Before-and-After-School Project -						
CFE/RF	296,843	299,190	0	0	0	
Colorado Student Before-and-After-School Project Fund -						
GF	296,843	300,000	0	0	0	
Subtotal - (2) Tony Grampsas Youth Services Program	4,154,073	5,672,524	3,987,528	3,988,466	3,841,275	
FTE	<u>4,154,075</u> <u>2.1</u>	<u>2.8</u>	<u>3.0</u>	<u>3.0</u>	<u>3.0</u>	
General Fund	296,843	1,299,301	<u>5.0</u> 0	<u>5.0</u> 0	<u>5.0</u> 0	
FTE	0.0	0.0	0.0	0.0	0.0	
Cash Funds	0.0	4,074,033	3,987,528	3,988,466	3,841,275	
FTE	0.0	4,074,033	3,987,328	3,988,400	3,841,273	
Cash Funds Exempt/RF	3,857,230	2.8 299,190	3.0 0	3.0 0	5.0 0	
FTE	5,857,250 2.1	299,190		0.0		
			0.0		0.0	
Federal Funds	0	0	0	0	0	
FTE	0.0	0.0	0.0	0.0	0.0	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
(3) Colorado Children's Trust Fund						
Personal Services	31,896	136,951	76,173	S 76,315 B	176,586	
FTE	<u>0.5</u>	<u>1.6</u>	<u>1.5</u>	<u>1.5</u>	<u>1.5</u>	
Cash Funds	31,896	36,680	76,173	76,315	76,315	
FTE	0.5	0.5	1.5	1.5	1.5	
Federal Funds	0	100,271			100,271	
FTE	0.0	1.1				
Operating Expenses	879,702	<u>928,616</u>	495,137	495,137	<u>1,106,734</u>	
Cash Funds	157,137	217,019	395,137	395,137	395,137	
Cash Funds Exempt/RF	56,888	0	0	0	0	
Federal Funds	665,677	711,597	100,000	100,000	711,597	
Subtotal - (3) Colorado Children's Trust Fund	911,598	1,065,567	571,310	571,452	1,283,320	
FTE	<u>0.5</u>	<u>1.6</u>	<u>1.5</u>	<u>1.5</u>	<u>1.5</u>	
Cash Funds	189,033	253,699	471,310	471,452	471,452	
FTE	0.5	0.5	1.5	1.5	1.5	
Cash Funds Exempt/RF	56,888	0	0	0	0	
Federal Funds	665,677	811,868	100,000	100,000	811,868	
FTE	0.0	1.1	0.0	0.0	0.0	
SUBTOTAL - (D) PREVENTION PARTNERSHIPS	5,304,142	6,961,337	4,690,521	4,692,348	5,257,025	
FTE	<u>5,50 1,1 12</u>	<u>7.2</u>	<u>6.5</u>	<u>6.5</u>	<u>6.5</u>	
General Fund	535,314	1,522,547	131,683	132,430	132,430	
FTE	3.1	2.8	2.0	2.0	2.0	
Cash Funds	189,033	4,327,732	4,458,838	4,459,918	4,312,727	
FTE	0.5	3.3	4.5	4.5	4.5	
Cash Funds Exempt/RF	3,914,118	299,190	0	0	0	
FTE	2.1	0.0	0.0	0.0	0.0	
Federal Funds	665,677	811,868	100,000	100,000	811,868	
FTE	0.0	1.1	0.0	0.0	0.0	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	)10-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
(E) Family and Community Health						
(1) Maternal and Child Health	3,610,396	3,353,092	3,842,555 S	3,852,014 B	3,312,106	
FTE	<u>13.0</u>	<u>9.8</u>	<u>13.0</u>	<u>13.0</u>	<u>9.8</u>	
General Fund	0	0	0	0	0	
FTE	0.0	0.0	0.0	0.0	0.0	
Federal Funds	3,610,396	3,353,092	3,842,555	3,852,014	3,312,106	
FTE	13.0	9.8	13.0	13.0	9.8	
(2) Child, Adolescent, and School Health						
Private Grants - CFE	0	0	0	0	0	
FTE	0.0	0.0	0.0	0.0	0.0	
Nurse Home Visitor Program	9,995,323	12,361,408	13,448,040 S	13,449,105 B	13,444,464	
FTE	3.5	3.2	4.0	4.0	4.0	
Cash Funds	0	12,361,408	13,448,040	13,449,105	13,444,464	
FTE	0.0	3.2	4.0	4.0	4.0	
Cash Funds Exempt/RF	9,995,323	0	0	0	0	
FTE	3.5	0.0	0.0	0.0	0.0	
School-Based Health Centers - GF	499,810	974,810	998,542 S	998,779 B	998,779	
FTE	0.4	0.6	0.7	0.7	0.7	
Federal AND PRIVATE Grants	401,673	301,230	524,610 S	526,183 B	294,413	
FTE	<u>2.9</u>	<u>3.2</u>	<u>2.2</u>	<u>2.2</u>	<u>3.2</u>	
Cash Funds Exempt/RF	0	0	0	0	0	
Federal Funds	401,673	301,230	524,610	526,183	294,413	
FTE	2.9	3.2	2.2	2.2	3.2	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	)10-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Subtotal - (2) Child, Adolescent, and School Health	10,896,806	13,637,448	14,971,192	14,974,067	14,737,656	
FTE	<u>6.8</u>	<u>7.0</u>	<u>6.9</u>	<u>6.9</u>	<u>7.9</u>	
General Fund	499,810	974,810	998,542	998,779	998,779	
FTE	0.4	0.6	0.7	0.7	0.7	
Cash Funds	0	12,361,408	13,448,040	13,449,105	13,444,464	
FTE	0.0	3.2	4.0	4.0	4.0	
Cash Funds Exempt/RF	9,995,323	0	0	0	0	
FTE	3.5	0.0	0.0	0.0	0.0	
Federal Funds	401,673	301,230	524,610	526,183	294,413	
FTE	2.9	3.2	2.2	2.2	3.2	
(3) Children With Special Needs						
(a) Health Care Program for Children with Special						
Needs						
Personal Services	1,282,630	1,238,770	1,318,600 S	1,267,895 B	1,177,878	DI #NP11
FTE	<u>15.1</u>	<u>13.2</u>	<u>17.5</u>	<u>16.9</u>	<u>15.9</u>	
General Fund	645,624	667,172	675,504	628,186	628,186	
FTE	8.1	7.4	10.1	9.6	9.6	
Federal Funds	637,006	571,598	643,096	639,709	549,692	
FTE	7.0	5.8	7.4	7.3	6.3	
Operating Expenses	<u>100,577</u>	<u>100,577</u>	<u>100,577</u>	<u>71,939</u> B	<u>71,939</u>	
General Fund	87,577	87,577	87,577	58,939	58,939	
Federal Funds	13,000	13,000	13,000	13,000	13,000	
Purchase of Services	3,563,864	3,410,286	3,604,750	3,604,750	3,451,160	
FTE	<u>0.0</u>	0.0	0.0	0.0	0.0	
General Fund	1,856,473	1,856,473	1,856,473	1,856,473	1,856,473	
Cash Funds	0	0	40,874	40,874	40,874	
FTE	0.0	0.0	0.0	0.0	0.0	
Federal Funds	1,707,391	1,553,813	1,707,403	1,707,403	1,553,813	
Traumatic Brain Injury Services - CFE/RF	146,656	120,995	187,636 S	187,782 B	187,782	
FTE	0.4	0.0	1.0	107,782 B 1.0	1.0	
	0.7	0.0	1.0	1.0	1.0	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 2010-11		Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Subtotal - (a) Health Care Program for Children with						
Special Needs	5,093,727	4,870,628	5,211,563	5,132,366	4,888,759	
FTE	<u>15.5</u>	<u>13.2</u>	<u>18.5</u>	<u>17.9</u>	<u>16.9</u>	
General Fund	2,589,674	2,611,222	2,619,554	2,543,598	2,543,598	
FTE	8.1	7.4	10.1	9.6	9.6	
Cash Funds	0	0	40,874	40,874	40,874	
FTE	0.0	0.0	0.0	0.0	0.0	
Cash Funds Exempt/RF	146,656	120,995	187,636	187,782	187,782	
FTE	0.4	0.0	1.0	1.0	1.0	
Federal Funds	2,357,397	2,138,411	2,363,499	2,360,112	2,116,505	
FTE	7.0	5.8	7.4	7.3	6.3	
(b) Genetics Counseling	20 427	59.000	70 (0( 0	70.074 D	70.074	
Personal Services - CF	39,437	58,902	78,606 S	· · · · · · · · · · · · · · · · · · ·	78,974	
FTE	0.8	0.9	1.0	1.0	1.0	
Operating Expenses	<u>1,169,942</u>	1,226,016	<u>1,501,817</u>	<u>1,501,817</u>	<u>1,501,817</u>	
Cash Funds	1,169,942	1,226,016	1,501,817	1,501,817	1,501,817	
Cash Funds Exempt/RF	0	0	0	0	0	
Subtotal - (b) Genetics Counseling	1,209,379	1,284,918	1,580,423	1,580,791	1,580,791	
FTE	0.8	0.9	1,500,425	1,500,751	1,500,791	
Cash Funds	1,209,379	1,284,918	1,580,423	1,580,791	1,580,791	
FTE	0.8	0.9	1,000,120	1,500,791	1,500,771	
Cash Funds Exempt/RF	0.0	0	0	0	0	
Subtotal - (3) Children With Special Needs - Genetics	6,303,106	6,155,546	6,791,986 S	6,713,157	6,469,550	
FTE	<u>16.3</u>	<u>14.1</u>	<u>19.5</u>	<u>18.9</u>	<u>17.9</u>	
General Fund	2,589,674	2,611,222	2,619,554	2,543,598	2,543,598	
FTE	8.1	7.4	10.1	9.6	9.6	
Cash Funds	1,209,379	1,284,918	1,621,297	1,621,665	1,621,665	
FTE	0.8	0.9	1.0	1.0	1.0	
Cash Funds Exempt/RF	146,656	120,995	187,636	187,782	187,782	
FTE	0.4	0.0	1.0	1.0	1.0	
Federal Funds	2,357,397	2,138,411	2,363,499	2,360,112	2,116,505	
FTE	7.0	5.8	7.4	7.3	6.3	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	FY 2010-11	
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
(4) Department of Human Services Grant						
Cash Funds Exempt/RF	29,279	25,176	29,790	29,790	29,790	
FTE	0.0	0.2	0.2	0.2	0.2	
(5) Federal Grants - FF	187,333	538,105	500,151 S	394,766 B	424,871	DI #NP11
FTE	1.3	2.4	4.6	3.4	1.2	
SUBTOTAL - (E) Family and Community Health	21,026,920	23,709,367	26,135,674	25,963,794	24,973,973	
FTE	<u>37.4</u>	<u>33.5</u>	44.2	42.4	<u>37.0</u>	
General Fund	3,089,484	3,586,032	3,618,096	3,542,377	3,542,377	
FTE	8.5	8.0	10.8	10.3	10.3	
Cash Funds	1,209,379	13,646,326	15,069,337	15,070,770	15,066,129	
FTE	0.8	4.1	5.0	5.0	5.0	
Cash Funds Exempt/RF	10,171,258	146,171	217,426	217,572	217,572	
FTE	3.9	0.2	1.2	1.2	1.2	
Federal Funds	6,556,799	6,330,838	7,230,815	7,133,075	6,147,895	
FTE	24.2	21.2	27.2	25.9	20.5	
(F) Nutrition Services						
Women, Infants, and Children Supplemental Food Grant -						
FF	83,080,552	91,763,930	69,364,966 S	89,560,894 B	111,913,876	DI #NP11
FTE	20.2	22.8	21.3	16.3	17.8	
Child and Adult Care Food Program - FF	21,214,960	22,594,553	24,052,217 S	24,055,485	22,580,394	
FTE	7.6	7.7	12.8	12.8	7.7	
SUBTOTAL - (F) Nutrition Services - FF	104,295,512	114,358,483	93,417,183	113,616,379	134,494,270	
FTE	27.8	30.5	34.1	29.1	25.5	
(G) Federal Grants - FF	371,545	433,129	638,523 S	,	423,804	
FTE	3.2	2.7	5.3	5.3	2.7	
TOTAL - (10) PREVENTION SERVICES DIVISION	204,107,424	259,258,231	195,479,406	194,983,902	230,262,854	
FTE	<u>168.5</u>	<u>170.6</u>	<u>187.9</u>	<u>179.3</u>	<u>168.4</u>	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 2010-11		Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
General Fund	6,419,110	7,776,800	6,625,488	5,982,724	6,105,324	
FTE	23.2	22.7	26.0	24.9	24.9	
Cash Funds	1,426,789	82,753,244	69,748,206	49,875,313	67,214,071	
FTE	1.5	21.9	30.2	30.2	30.2	
Cash Funds Exempt/RF	65,065,279	29,322,925	327,100	327,246	302,246	
FTE	29.4	9.8	4.1	4.1	4.1	
Federal Funds	131,196,246	139,405,262	118,778,612	138,798,619	156,641,213	
FTE	114.4	116.2	127.6	120.1	109.2	
Medicaid Cash Funds	84,193	84,674	84,674	84,674	84,674	
GF in Medicaid CF	42,097	42,338	42,338	42,338	42,338	
Net General Fund	6,461,207	7,819,138	6,667,826	6,025,062	6,147,662	

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

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

(A) Licensure						
Health Facilities General Licensure Program	483,574	812,193	2,374,182 S	2,913,475 B	2,913,475 DI #NP11	
FTE	<u>6.5</u>	<u>10.9</u>	<u>34.9</u>	44.8	<u>44.8</u>	
General Fund	156,141	153,977	157,747	156,245	156,245	
FTE	1.0	1.9				
Cash Funds	345,541	658,216	2,216,435	2,757,230	2,757,230	
FTE	5.5	9.0				
Cash Funds Exempt/RF	(18,108)	0	0	0	0	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Assisted Living Residences Program	683,139	727,888	927,303 S	915,771 B	915,771	DI #NP11
FTE	<u>8.9</u>	<u>10.2</u>	<u>11.4</u>	<u>11.2</u>	<u>11.2</u>	
General Fund	107,217	110,452	109,797	110,250	110,250	
FTE	1.4	1.6				
Cash Funds	453,574	617,436	817,506	805,521	805,521	
FTE	7.5	8.6				
Cash Funds Exempt/RF	122,348	0	0	0	0	
Medication Administration Program	188,588	191,922	212,849 S	213,064 B	213,064	
FTE	0.8	<u>0.7</u>	<u>1.0</u>	1.0	<u>1.0</u>	
Cash Funds	172,375	191,922	212,849	<u>1.0</u> 213,064	213,064	
FTE	0.8	0.7	1.0	1.0	1.0	
Cash Funds Exempt/RF	16,213	0.7	0	0	1.0	
FTE	0.0	0.0	0.0	0.0	0.0	
Medicaid/Medicare Certification Program	7,395,171	7,940,478	6,855,162 S	6,492,963 B	7.660.895	DI #NP11
FTE	<u>89.6</u>	<u>94.2</u>	<u>97.4</u>	<u>93.6</u>	<u>93.6</u>	
Cash Funds Exempt/RF	3,637,979	3,881,085	3,996,999	3,847,994	3,847,994	
FTE	47.2	49.2				
Federal Funds	3,757,192	4,059,393	2,858,163	2,644,969	3,812,901	
FTE	42.4	45.0				
Medicaid Cash Funds	3,637,979	3,881,085	3,985,071	3,847,994	3,847,994	
GF in Medicaid CF	1,091,991	1,168,422	1,343,550	1,298,244	1,298,245	
Net General Fund	1,091,991	1,168,422	1,343,550	1,298,244	1,298,245	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	)10-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
SUBTOTAL (A) - Licensure	8,750,472	9,672,481	10,369,496	10,535,273	11,703,205	
FTE	<u>105.8</u>	<u>116.0</u>	144.7	150.6	150.6	
General Fund	263,358	264,429	267,544	266,495	266,495	
FTE	2.4	3.5		0.0		
Cash Funds	971,490	1,467,574	3,246,790	3,775,815	3,775,815	
FTE	13.8	18.3		1.0		
Cash Funds Exempt/RF	3,758,432	3,881,085	3,996,999	3,847,994	3,847,994	
FTE	47.2	49.2		0.0		
Federal Funds	3,757,192	4,059,393	2,858,163	2,644,969	3,812,901	
FTE	42.4	45.0		0.0		
Medicaid Cash Funds	3,637,979	3,881,085	3,985,071	3,847,994	3,847,994	
GF in Medicaid CF	1,091,991	1,168,422	1,343,550	1,298,244	1,298,245	
Net General Fund	1,355,349	1,432,851	1,611,094	1,564,739	1,564,740	
(B) Emergency Medical Services						
State EMS Coordination, Planning and Certification	975,433	1,069,165	1,367,590 S	1,305,419 B	1,305,419	DI #NP11
FTE	<u>11.4</u>	<u>11.1</u>	<u>16.3</u>	<u>15.5</u>	<u>15.5</u>	
Cash Funds	17,261	1,069,165	1,367,590	1,305,419	1,305,419	
FTE	2.2	11.1	16.3	15.5	15.5	
Cash Funds Exempt/RF	958,172	0	0	0	0	
FTE	9.2	0.0	0.0	0.0	0.0	
Distributions to Regional Emergency Medical and Trauma						
Councils (RETACs)	1,785,000	1,785,000	1,785,000	1,785,000	1,785,000	
Cash Funds	0	1,785,000	1,785,000	1,785,000	1,785,000	
Cash Funds Exempt/RF	1,785,000	0	0	0	0	
Emergency Medical Services Provider Grants	1,767,302	1,890,728	6,776,982	<u>6,793,896</u>	6,793,896	
Cash Funds	0	1,819,428	6,776,982	6,793,896	6,793,896	
Cash Funds Exempt/RF	1,767,302	71,300	0	0	0	
Trauma Facility Designation Program - CF	254,414	319,807	385,198 S	385,869 B	385,869	
FTE	2.0	1.7	2.1	2.1	2.1	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Federal Grants - FF	173,588	132,692	131,340 S	110,899 B	105,591	DI #NP11
FTE	1.7	1.2	0.8	0.5	0.9	
Poison Control - GF	1,420,941	1,421,442	1,421,442	1,421,442	1,421,442	
SUBTOTAL - (B) Emergency Medical Services	6,376,678	6,618,834	11,867,552	11,802,525	11,797,217	
FTE	<u>15.1</u>	<u>14.0</u>	<u>19.2</u>	<u>18.1</u>	<u>18.5</u>	
General Fund	1,420,941	1,421,442	1,421,442	1,421,442	1,421,442	
Cash Funds	271,675	4,993,400	10,314,770	10,270,184	10,270,184	
FTE	4.2	12.8	18.4	17.6	17.6	
Cash Funds Exempt/RF	4,510,474	71,300	0	0	0	
FTE	9.2	0.0	0.0	0.0	0.0	
Federal Funds	173,588	132,692	131,340	110,899	105,591	
FTE	1.7	1.2	0.8	0.5	0.9	
(C) Indirect Cost Assessment	1,244,002	1,662,761	<u>1,730,311</u> S	<u>1,894,416</u>	Pending	
Cash Funds	140,969	416,651	549,415	666,656	renaniz	
Cash Funds Exempt/RF	447,654	502,647	552,760	552,760		
Federal Funds	655,379	743,463	628,136	675,000		
Medicaid Cash Funds	655,379	502,647	552,760	552,760		
GF in Medicaid CF	447,654	0	0	0		
Net General Fund	447,654	0	0	0		
TOTAL - (11) HEALTH FACILITIES AND						
EMERGENCY MEDICAL SERVICES DIVISION	16,371,152	17,954,076	23,967,359	24,232,214	23,500,422	
FTE	<u>120.9</u>	<u>130.0</u>	<u>163.9</u>	<u>168.7</u>	<u>169.1</u>	
General Fund	1,684,299	1,685,871	1,688,986	1,687,937	1,687,937	
FTE	2.4	3.5	1,000,000	0.0	1,001,901	
Cash Funds	1,384,134	6,877,625	14,110,975	14,712,655	14,045,999	
FTE	18.0	31.1	.,,	18.6	,,	
Cash Funds Exempt/RF	8,716,560	4,455,032	4,549,759	4,400,754	3,847,994	
FTE	56.4	49.2	, , ,	0.0	,- ,- ,- ,- ,- ,- ,- ,- ,- ,- ,- ,- ,- ,	
Federal Funds	4,586,159	4,935,548	3,617,639	3,430,868	3,918,492	
FTE	44.1	46.2	- , ,	0.5	- , , - , - , - , - , - , - , - , -	
Medicaid Cash Funds	4,293,358	4,383,732	4,537,831	4,400,754	3,847,994	
GF in Medicaid CF	1,539,645	1,168,422	1,343,550	1,298,244	1,298,245	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 20	)10-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
Net General Fund	3,223,944	2,854,293	3,032,536	2,986,181	2,986,182	
(12) EMERGENCY PREPAREDNESS AND RESPON	SF DIVISION					
<i>The Department requests creation of this new division, wh</i>		mergency prepa	redness. It will p	prepare for a		
wide variety of disasters, natural as well as man-made, inc			-			
epidemics, food and water borne disease outbreaks, and te		• ·	~			
	0	10 555 500		17.0<0.001 D	10.042.075	
Program Costs	0	18,555,728	16,615,798		19,843,275	DI #NPI1
FTE	<u>0.0</u>	<u>45.8</u>	<u>31.9</u>	<u>26.7</u>	42.5	
General Fund	0	0	878,214	1,759,935	1,759,935	
FTE	0.0	0.0	1.9	2.0	2.0	
Federal Funds	0	18,555,728	15,737,584	15,302,946	18,083,340	
FTE	0.0	45.8	30.0	24.7	40.5	
Indirect Cost Assessment - FF		0	1,448,879	S 1,848,000	Pending	
TOTAL - (12) EMERGENCY PREPAREDNESS AND						
<b>RESPONSE DIVISION (REQUESTED)</b>	0	18,555,728	18,064,677	18,910,881	19,843,275	
FTE	<u>0.0</u>	<u>45.8</u>	<u>31.9</u>	<u>26.7</u>	<u>42.5</u>	
General Fund	0	0	878,214	1,759,935	1,759,935	
FTE	0.0	0.0	1.9	2.0	2.0	
Federal Funds	0	18,555,728	17,186,463	17,150,946	18,083,340	
FTE	0.0	45.8	30.0	24.7	40.5	

	FY 2007-08	FY 2008-09	FY 2009-10	FY 2	010-11	Change
	Actual	Actual	Appropriation	Request	Staff Recommend	Request
PUBLIC HEALTH AND ENVIRONMENT -						
HEALTH AND ADMINISTRATIVE DIVISIONS						
TOTAL	338,901,350	396,664,309	372,561,418	361,536,757	384,802,519	
FTE	<u>675.1</u>	<u>711.7</u>	<u>815.8</u>	786.8	762.7	
General Fund	19,689,664	22,249,314	22,828,026	23,154,802	22,775,482	
General Fund Exempt	512,791	478,004	504,000	450,000	447,000	
Cash Funds	13,826,102	116,192,518	112,493,865	94,733,114	107,271,416	
Cash Funds Exempt/RF	102,334,804	54,914,699	32,869,874	26,637,758	26,888,724	
Federal Funds	202,537,989	202,829,774	203,865,653	216,561,083	227,419,897	
Medicaid Cash Funds	4,399,020	5,029,386	5,116,789	5,034,595	4,233,486	
GF in Medicaid CF	1,592,477	1,353,877	1,560,600	1,529,109	1,444,629	
Net General Fund	21,282,141	23,603,191	24,388,626	24,683,911	24,220,111	
S = Appropriation was amended by a supplemental bill th	at is not yet law.		DI = Decision It	em	NP = Non Prioritized	1

B = The request was changed by a budget amendment.

BA = Budget Amendment

NP = Non Prioritized

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

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

## **Adjustments to Federal Funds Appropriations**

This document proposes a number of adjustments to appropriations of federal funds. When the Department prepares its budget submissions, it carefully reports the amount of federal funds that it received in the two most recent "actual" years. With a few exceptions, it does not adjust its federal funds *requests*; in most cases it simply sets this year's federal funds request equal to last year's appropriation. This approach is understandable given the uncertain status of a federal funds appropriation by the General Assembly, and the difficulties that the Department faces when trying to forecast federal grant revenue. However, repeatedly setting this year's request equal to last year's request can create situations in which the federal funds listed in the Long Bill are badly out of date. In many places in this document, Staff recommends adjustments to these federal funds amounts. These adjustments are designed to bring these numbers into closer alignment with the federal funding that the Department has recently been receiving in recent years.

# (1) ADMINISTRATION AND SUPPORT

## Subdivisions:

- (A) Administration
- (B) Special Health Programs
- (C) Special Environmental Programs

## (A) Administration

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

Administration appropriations fall into two categories:

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

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

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request*	FY 10-11 Recommend.*
Accounting	10.9	11.0	11.0	11.0
Administrative Support Staff	6.1	6.5	6.5	6.5
Auditor	1.9	2.0	2.0	2.0
Budget Analyst	3.9	4.0	4.0	4.0
Controller	3.0	3.0	3.0	3.0
Environmental Protection Specialist	0.5	0.5	0.5	0.5
Executive Director	1.0	1.0	1.0	1.0
Mail Room/Print Shop/Maintenance Staff	5.8	6.0	6.0	6.0
Management	6.5	7.0	7.0	7.0
Professional Engineer	0.1	0.0	0.0	0.0
Staff / General Professional	20.5	20.9	20.9	20.9
Total	60.2	61.9	61.9	61.9

\*The request and recommendation exclude the impact of DI #3, Long Bill Reorganization, which would move \$85,303 and 0.8 FTE to (1) Administration and Support, (C) Special Environmental Programs. This portion of Decision Item #3 will be presented by the environmental division's analyst.

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	4,839,672	0	82,742	4,756,930	0	61.9
Reverse 1.82% base reduction	87,179	0	1,550	85,629	0	0.0
Reverse Furlough Supplemental	41,219	0	1,011	40,208	0	0.0
2 <sup>nd</sup> year impact of 2009 DI#10 (New Accounts Receivable System)	(65,000)	0	0	(65,000)	0	0.0
PERA Adjustment	(103,488)	0	0	(103,488)	0	0.0
Federal Funds Adjustment	28,690	0	0	0	28,690	0.0
FY 2010-11 Recommendation*	4,828,272	0	85,303	4,714,279	28,690	61.9
FY 2010-11 Request*	4,799,582	0	85,303	4,714,279	0	61.9

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

\*Excludes the impact of DI #3.

Note that the 1.82 percent base reduction, which was included in the 2009-10 Long Bill, and the furlough adjustment, which was included in the Department's recently introduced supplemental bill, were both temporary adjustments which require reversal. The furlough adjustment reallocated the 1.82 percent base reduction among departments and among line items.

**Retirements.** The Retirements appropriation covers the anticipated payouts for retiring and terminating employees who have unused accrued annual and sick leave. The Department is required under state personnel rules to pay retiring and terminating employees for unused accrued leave. Compensation costs for sick and annual leave payouts are included in the Department's indirect cost rates and are funded from indirect cost recoveries. The Department funds annual and sick leave payouts to retiring and terminating employees with indirect cost recoveries because federal regulations do not allow the Department to charge these payouts directly to federal grants. (Title 2, Part 225, Appendix 2 of the Code of Federal Regulations states: "Payments for unused leave when an employee retires or terminates employment are allowable in the year of payment provided they are allocated as a general administrative expense to all activities of the governmental unit or component." Federal auditors check for compliance with this rule.) Because cash funded programs also pay indirect cost recoveries, these employees are paid from the Retirements line item as well, to the extent that the Department has the spending authority to do so. When the Department exhausts the spending authority, the cash and General Funded employee payouts must be absorbed within their Division's personal services lines. There is no General Fund contribution to the line, though termination benefits to employees who were partially salaried from the General Fund are partially paid from this line.

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

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

<u>Health, Life, and Dental</u>. The Department requests an appropriation of \$6,322,899, comprised of \$496,050 General Fund, \$2,159,819 cash funds, \$633,963 reappropriated funds, and \$3,033,067 federal funds. The Staff recommendation for this line item is pending Committee approval of a common policy for Health, Life, and Dental.

Short-term Disability. The Department requests an appropriation of \$118,802, comprised of \$8,883 General Fund, \$39,818 cash funds, \$12,210 reappropriated funds, and \$57,891 federal funds. Based on Committee-approved common policy for short-term disability, **Staff recommends an appropriation of \$116,631**, comprised of \$8,830 General Fund, \$40,744 cash funds, \$12,801 reappropriated funds, and \$54,256 federal funds

**S.B. 04-257 Amortization Equalization Disbursement** (AED). The Department requests an appropriation \$1,860,207, comprised of \$137,537 General Fund, \$637,223 cash funds, \$189,065 reappropriated funds, and \$896,382 federal funds. Based on Committee-approved common policy for short-term disability, Staff recommends an appropriation of \$1,824,646, comprised of \$134,762 General Fund, \$651,555 cash funds, \$198,220 reappropriated funds, and \$840,109 federal funds. This includes an AED appropriation for the 12.0 FTE that Staff recommends be added to the Medical Marijuana Registry program as described in the presentation of the Medical Marijuana Decision Item.

**S.B. 06-235 Supplemental Amortization Equalization Disbursement (SAED). The Department requests an appropriation \$1,356,400,** comprised of \$100,287 General Fund, \$464,641 cash funds, \$137,860 reappropriated funds, and \$653,612 federal funds. Based on Committee-approved common policy for short-term disability, **Staff recommends an appropriation of \$1,329,452,** comprised of \$97,245 General Fund, \$475,092 cash funds, \$144,535 reappropriated funds, and \$612,580 federal funds. This includes an SAED appropriation for the 12.0 FTE that Staff recommends be added to the Medical Marijuana Registry program as described in the presentation of the Medical Marijuana Decision Item.

24-Feb-10

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

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

<u>Shift Differential</u>. The Department requests an appropriation of \$14,883 Federal Funds. Since the Long Bill reflects federal funds, rather than appropriating them, **Staff recommends that the Committee approve this request.** 

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

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

Operating Expenses	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	1,264,072	0	0	1,264,072	0
2 <sup>nd</sup> Year Impact of 2009 DI #10 (New Accounts Receivable System)	(43,500)	0	0	(43,500)	0
2 <sup>nd</sup> year impact of 2009 DI #11, Human Resources FTE	(5,228)	0	0	(5,228)	0
Net impact of 2009 and 2010 Mail Equipment DI and Supplementals	(2,137)	0	0	(2,137)	0
Remove one-time supplemental for 2009-10 Medical Marijuana Registry postage expenses	(16,500)	0	0	(16,500)	0
Medical Marijuana Registry DI - postage expenses for 2010-11	66,000	0	0	66,000	0
FY 2010-11 Recommendation	1,262,707	0	0	1,262,707	0
FY 2010-11 Request	1,262,707	0	0	1,262,707	0

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

**Legal Services.** This line item funds legal expenses incurred throughout the Department. The following table shows the Staff computation of the recommended number of hours of legal services that the Department will purchase from the Department of Law:

Legal Services	Hours
FY 2009-10 Appropriation	26,226
Remove one-time supplemental for 2009-10 Medical Marijuana Registry legal expenses	(166)
Decision Item: Medical Marijuana Registry legal expenses for 2010-11	663
Staff Recommendation for legal service hours	26,723

**The legal services appropriation is pending approval of the legal rate,** which will be established during figure setting for the Department of Law. Staff will multiply the approved legal hours by the approved legal rate to compute the appropriation.

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

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

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

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

Vehicle Lease	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	296,864	1,081	219,729	56,874	19,180
Remove Technical Adjustment Supplemental	(24,255)	0	(20,000)	(4,255)	0
2 <sup>nd</sup> year impact of 2009 DI #3, Health Facilities Fees	20,938	0	20,938	0	0
DI for Annual Fleet Vehicle Replacements & Technical True-up	2,018	0	0	2,018	0
DI for Annual Fleet Vehicle Replacement	134,385	0	98,914	23,885	11,586

Vehicle Lease	Total	GF	CF	RF	FF
FY 2009-10 Recommendation	429,950	1,081	319,581	78,522	30,766
FY 2009-10 Request	429,950	1,081	319,581	78,522	30,766

The increase in the cash funds appropriation reflects the 13 new vehicles that were added last year. Two were added by S.B. 08-153, License Home Health Care, and eleven were added by 2009 Decision Item #3, which expanded the health facilities license program. In addition, 12 high-milage vehicles met the criteria for replacement and were replaced.

This year a single Department vehicle is under consideration for replacement. The environmentaldivisions analyst will make the relevant recommendation. The table above assumes that this vehicle will be replaced; if it is not, Staff will adjust the above appropriation to reflect the reduced cost.

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

Leased Space	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	5,691,403	0	198,567	5,454,448	38,388
2 <sup>nd</sup> year impact of 2009 DI #13, Denver Emission Technical Center Leased Space	4,539	0	4,539	0	0
2 <sup>nd</sup> year impact of 2009 DI #9, Leased Space	19,140	0	0	19,140	0
Lease escalator based on current lease	60,000	0	0	60,000	0
Decision Item: Medical Marijuana Registry leased space	104,500	0	0	104,500	0
FY 2010-11 Recommendation excluding DI #2	5,879,582	0	203,106	5,638,088	38,388
DI #2, North Front Range Emissions Tech Center Request (The recommendation will be made by the analyst for CDPHE's environmental divisions)	30,000	0	30,000	0	0
FY 2010-11 Recommendation if DI #2 request is approved	5,909,582	0	233,106	5,638,088	38,388
FY 2010-11 Request	5,909,582	0	233,106	5,638,088	38,388

Staff will adjust the Lease Space appropriation to reflect the Committee's decision on Decision Item #2.

<u>Capitol Complex Leased Space</u>. The Department requests an appropriation of \$33,037 reappropriated funds for the 3,996 square feet of space that it occupies at the State Services Building in Grand Junction. Most of the Department's divisions have one or more employees who are based at this facility. The funding source is indirect cost recoveries. **Staff recommends a continuation level of leased space for this line item.** The corresponding appropriation awaits Committee approval of a common policy rate for capitol complex leased space. **Staff requests permission to use the common policy lease rate to determine the corresponding dollar appropriation and include it in the Long Bill.** 

<u>Communication Services Payments</u>. The Department requests total funding for this line item of \$6,446 reappropriated funds, computed as shown in the following table. **Staff recommendation is pending Committee approval of a common policy for Communication Services Payments**. The funding source is indirect cost recoveries.

<u>Utilities</u>. This line item primarily funds utility expenses at the lab but it also funds utilities at remote monitoring stations. Most of the utility costs of the main campus are included in lease expense line item. The following table summaries the Department's request and the staff recommendation, a portion of which is pending figure setting for CDPHE's environmental divisions. Staff will adjust the Utilities appropriation to reflect the committee's decision on Decision Item #2.

Utilities	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	648,427	0	135,524	390,727	122,176
Federal Funds Adjustment	(77,556)	0	0	0	(77,556)
2 <sup>nd</sup> year impact of 2009 DI #5, Operation and Maintenance of the Argo Tunnel Water Treatment Plant	15,000	0	15,000	0	0
FY 2010-11 Recommendation excluding DI #2	585,871	0	150,524	390,727	44,620
DI #2, North Front Range Emissions Tech Center Request (The recommendation will be made by the analyst for CDPHE's environmental divisions)	10,800	0	10,800	0	0
FY 2010-11 Recommendation if DI #2 request is approved	596,671	0	161,324	390,727	44,620
FY 2010-11 Request (corrected for fund split error)	674,227	0	161,324	390,727	122,176

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

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

**Indirect Cost Assessment.** Indirect cost assessments are the means by which the Department charges its cash- and federally-funded programs for the services they are provided by its administration and IT divisions and for the Department's share of the statewide indirect cost assessment. The indirect assessments are based upon the size and classification of the cash or federally funded expenditures that occur in each division. The indirect assessment equals the expenditure multiplied by the assessment rate with the assessment rates depending upon the category of expenditure. Proposed federal rates must be reviewed and approved by the "cognizant" federal agency, in this case the U.S. Department of Health and Human Services. Once the Federal rates are approved, the indirect revenue generated by those rates, as applied to projected federal spending, can be computed. The difference between this estimated amount, and the total indirect revenue need, is used to calculate the indirect rate to be applied to cash fund expenditures.

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

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

## **(B) Special Health Programs**

# (1) Health Disparities Program

Amendment 35 background. This is the first of several parts of this document that deal with Amendment 35, Tobacco Taxes for Health Related Purposes, which voters approved in November 2004. The amendment imposed a \$6.40 tax on each 10-box carton of cigarettes. In comparison, the tobacco Master Settlement Agreement has been estimated to add about \$4.30 to the cost of a carton

of cigarettes. Amendment 35 revenues are exempt from TABOR because the revenues resulted from a voter-approved tax increase.

The following table shows the December 2009 Legislative Council Staff forecast of Amendment 35 revenues. The highlighted FY 2010-11 forecast serves as the starting point for the FY 2010-11 appropriations of Amendment 35 revenues in this document.

	Amendment 35 Tax Revenue							
Fiscal Year	Cigarettes	Other Tobacco Products	Total Tax Revenue	Percentage Change				
2005-06*	\$158.0	\$11.7	\$169.6					
2006-07*	155.1	12.9	168.0	-0.9%				
2007-08*	150.3	12.6	162.9	-3.0%				
2008-09*	146.7	14.3	161.0	-1.2%				
2009-10	132.5	15.6	148.0	-8.1%				
2010-11	132.5	16.5	149.0	0.7%				
2011-12	128.8	16.5	145.3	-2.5%				
A mounts are	in & million							

Amounts are in \$ million.

\*Actual

As the following table shows, forecasts of FY 2009-10 and FY 2010-11 revenue have steadily declined during the last year.

Deteriorating Amendment 35 Revenue Forecasts							
Date of Forecast	FY 2009-10 Revenue Forecast	Percentage Change from Prior Forecast	FY 2010-11 Revenue Forecast	Percentage Change from Prior Forecast			
December 2008	166.0		166.3				
March 2009	153.5	-7.5%	153.7	-7.6%			
June 2009	154.0	0.3%	154.1	0.3%			
September 2009	157.2	2.1%	157.4	2.1%			
December 2009	148.0	-5.9%	149.0	-5.3%			

Amounts are in \$ million.

The steadily worsening forecasts are especially relevant because they reduce the amounts that can be transferred from Amendment 35 programs to support General Fund programs. The declines effect potential FY 2010-11 transfers in two ways:

- The FY 2009-10 declines reduce the fund balances that are available at the start of FY 2010-11, thus reducing potential transfers during FY 2010-11.
- The FY 2010-11 declines reduce fund income during FY 2010-11, also reducing potential transfers during FY 2010-11.

Since the Governor's November budget submission was based on the September 2009 Amendment 35 revenue forecast, these changes suggest that the governor's requests for Amendment 35 transfers may overestimate the available revenue.

## 2009 Session Legislation Affecting Amendment 35 Programs

Three bills, which were all part of the FY 2009-10 JBC budget balancing package, were enacted during the 2009 session:

- Senate Bill 09-270 credits interest and income earned by the cash funds that receive Amendment 35 tobacco tax revenue to the General Fund for FY 2008-09 through FY 2011-12.
- Senate Joint Resolution 09-035 declared a state fiscal emergency for FY 2009-10, thus activating a constitutional provision that allows Amendment 35 tobacco-tax revenues to be used for any health-related purpose during that year.
- Senate Bill 09-271 utilized the state fiscal emergency declared by S.J.R. 09-035 to appropriate \$20 million of Amendment 35 moneys to FY 2009-10 Medical Services Premiums in HCPF. These moneys would otherwise have been allocated to Cancer, Cardiovascular and Pulmonary Disease (CCPD) Grants and to Tobacco Education, and Prevention (STEPP) Grants.

# 2010 Session Legislation Affecting Amendment 35 Programs in FY 2009-10:

- House Bills 10-1300 and 10-1311 (the FY 2009-10 supplemental bills for HCPF and CDPHE) utilize the state fiscal emergency declared by S.J.R. 09-035 and the authorization in S.B. 09-271 to appropriate another \$14 million of Amendment 35 moneys for FY 2009-10 Medical Services Premiums. These moneys would otherwise have been allocated to CCPD and STEPP Grants.
- Senate Bill 10-1320 (Use Of Tobacco Tax Fiscal Emergency) utilizes the state fiscal emergency declared by S.J.R. 09-035 to appropriate \$2 million of Amendment 35 moneys to support FY 2009-10 Medical Services Premiums. These moneys would otherwise have been allocated to Health Disparities Grants.

Reductions in FY 2009-10 Allocations to Amendment 35 Grant Programs	Health Disparities Grants	Cancer, Cardiovascular and Pulmonary Disease Grants (CCPD)	Tobacco Education, and Prevention Grants (STEPP)	Total
S.B. 09-271	\$0	(\$12,000,000)	(\$8,000,000)	(\$20,000,000)
H.B. 10-1300 and 10-1311	0	(7,000,000)	(7,000,000)	(14,000,000)
Н.В. 10-1320	(2,000,000)	0	0	(2,000,000)
Total change of Amendment 35 revenues allocated to grant programs	(2,000,000)	(19,000,000)	(15,000,000)	(36,000,000)

The following table summarizes the FY 2009-10 impact of these bills on the allocation of revenues to Amendment 35 grant programs:

### Introduced and Proposed Legislation Affecting Amendment 35 Programs in FY 2010-11

Senate Joint Resolution 10-010. This bill, which has already been introduced, would declare a state fiscal emergency for FY 2010-11, thus allowing Amendment 35 tobacco-tax revenues to be used for any health-related purpose during that year. The bill, which requires a two thirds vote, is on third reading in the Senate. Because it is a Joint Resolution, it did not have a second reading.

Amendment 35 Transfer Bill. If S.J.R. 10-010 becomes law, staff recommends that an "amendment 35 transfer" bill be introduced as part of the FY 2010-11 Long Bill package. The HCPF analyst has already spoken to the Committee about this bill. The bill would temporarily change the rules governing the CCPD, STEPP, and Health Disparities grant funds so that moneys in these funds can be appropriated for any health-related purpose in FY 2010-11. The bill's appropriation clause would then adjust appropriations in the FY 2010-11 Long Bill.

The Governor's November 2009 budget request asks the General Assembly to appropriate an additional \$25,691,418 of Amendment 35 tobacco-tax moneys to HCPF for Medical Services Premiums for FY 2010-11. It asks that allocations to Amendment 35 grant programs be reduced as follows:

kequested keductions of Anocations to Amendment 35 Programs				
Grant Program	Amount			
STEPP	(\$15,521,625)			
CCPD	(5,679,358)			
Health Disparities	(4,490,435)			
Total	(\$25,691,418)			

# Paguested Reductions of Allocations to Amondment 35 Programs

These adjustments would be included in the Amendment 35 transfer bill. The bill's appropriation clause would reduce the FY 2010-11 General Fund appropriation for Medical Services Premiums by \$25,691,418 and would reduce FY 2010-11 appropriations for STEPP, CCPD and Health Disparities grants by the amounts indicated in the table. The savings would then be appropriated for Medical Services Premiums.

**Two sets of Amendment 35 Recommendations:** Because S.J.R. 10-010 is not yet law and the Amendment 35 transfer bill has not even been approved by the Committee, Staff must make two recommendations for each Amendment 35 program. The first recommendation will reflect current law. The Committee's decision regarding this recommendation will be written into the FY 2010-11 Long Bill. If S.J.R. 10-010 or the Amendment 35 transfer bill fail to become law, this appropriation will govern spending during FY 2010-11. The second recommendation will take into account the Governor's request. The decisions that the Committee makes regarding this second recommendation will take effect if it become law.

Staff has placed the Long Bill recommendation in the Recommendation column of the numbers pages.

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

**Health disparities** refer to differences in the quality of health care and health outcomes across racial and ethnic groups. The Office of Health Disparities began operating in 2004 when the program received a private grant and the Department's Executive Director gave the office administrative approval. The Health Disparities Grant Program, which is housed within the Office of Health Disparities, was created by H.B. 05-1262, which implemented Amendment 35. (See Section 25-4-2201, C.R.S.) The grant program, which made its first grants in FY 2005-06, provides grants for the prevention, early detection and treatment of cancer, cardiovascular disease and pulmonary disease among African Americans, Latinos, Native Americans and other groups. Senate Bill 07-242, Create Office Health Disparities, converted the Office of Health Disparities from an administratively established program into a statutory program. When the private grants that initially supported the Office ended at the conclusion of FY 2007-08, the General Assembly began funding the Office with a combination of General Fund and Amendment 35 moneys.

Much of the funding for the Office and all the funding for the Grant Program come from the Health Disparities Grant Program Fund, which receives a 2.4 percent share of Amendment 35's tobacco tax revenues. Moneys in the Health Disparities Grant Program Fund (the "Disparities" fund) that are not expended in a given year remain in the fund and are available for appropriation the following year. Since the inception of the fund, substantial unspent balances have carried forward each year

because the program has awarded multiple year grants and wants to ensure that funding is available to meet these obligations.

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

**Personal Services.** The following table shows staffing levels for the Health Disparities Grant Program and the associated recommendation for the Long Bill.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Staff / General Professional	6.4	6.3	6.3	6.3
Total	6.4	6.3	6.3	6.3

The corresponding Option 8 calculations under current law are as follows:

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	402,377	49,917	0	352,460	0	6.3
Reverse Furlough Supplemental	10,606	1,392	0	9,214	0	0.0
PERA Adjustment	(8,618)	(1,131)	0	(7,487)	0	0.0
FY 2010-11 Recommendation for the Long Bill	404,365	50,178	0	354,187	0	6.3
FY 2010-11 Request	404,365	50,178	0	354,187	0	6.3

As indicated above, the Governor has requested that \$4,490,435 be diverted from the Health Disparities Grant program and appropriated to Medical Services Premiums. The Department's budget submission requests that this entire \$4.5 million come from Health Disparities Grants with no corresponding reduction in the personal services or operating expenses appropriation. Since this transfer will drastically reduce health disparities grants for FY 2010-11 it is natural to ask whether there should also be a reduction in the CDPHE staff that handles health disparities grants.

Based on past decision items affecting the Office of Health Disparities, JBC Staff concludes that the personal services appropriation for health disparities can be broken down as follows:

Office of Health Disparities Personal Services	Total	GF	RF	FTE
Grant Program Support	\$201,887	\$0	\$201,887	3.3
Other Activities of the Office	202,478	50,178	152,300	3.0

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Office of Health Disparities Personal Services	Total	GF	RF	FTE
Total	404,365	50,178	354,187	6.3

For the reasons outlined below, JBC staff recommends a *one year* personal services reduction of \$66,000 reappropriated funds and 1.1 FTE for the Office of Health Disparities, which represents an approximately one third cut for grant support staff. In making this recommendation, JBC staff took the following considerations into account.

- 1. The level of grants during FY 2010-11 will be about a quarter of the level of grants during FY 2009-10. Staff support work for existing grants will decline substantially.
- 2. The complete burden of cuts should not fall upon grantees, who the Department often refers to as its "partners." These partners will be cutting deeply and will no doubt have to release valued employees. Partnership requires shared sacrifice.
- 3. Experienced staff members are valuable. They develop and issue grant requests, provide grant-writing assistance, provide expert support to decision makers, coordinate the application review process, communicate with applicants and grantees, monitor grantee performance, approve grantee reimbursement statements, approve grantee budget revisions, conduct grantee site visits, and evaluate grantee performance. Experienced staff members perform these functions more effectively than inexperienced staff members.
- 4. Because experienced staff are valuable, and because staff will probably be needed midway through FY 2011-12 to ramp up the grant process, grant staff should not be reduced excessively. Grant funding will be fully restored as soon as the General Assembly stops declaring annual fiscal emergencies. If fiscal-emergency declarations end in FY 2011-12, as is the Governor's stated intention, over \$3 million of FY 2011-12 grant funding will become available to the program and, starting in the second half of FY 2010-11, grant applications will have to be solicited, evaluated, and selected.
- 5. JBC Staff has spoken with stakeholders in the Amendment 35 community and some have expressed concern that staff reductions such as this will become permanent. Stakeholders value the contribution of the Amendment 35 support staff and are aware that it took several rounds of decision items spread over several years to reach the current staffing level. In order to reassure stakeholders that the reductions are temporary, staff recommends that a legislative declaration be added to the Amendment 35 transfer bill stating that the staff reductions are temporary and the General Assembly intends to restore lost staff when fiscal emergency declarations cease.

The Option 8 calculations for the Amendment 35 transfer bill are as follows:

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Recommendation for the Long Bill	404,365	50,178	0	354,187	0	6.3
Recommended reduction to include in the Amendment 35 transfer bill	(66,000)	0	0	(66,000)	0	(1.1)
FY 2009-10 Recommendation for the Amendment 35 transfer bill	338,365	50,178	0	288,187	0	5.2
FY 2009-10 Request	404,365	50,178	0	354,187	0	6.3

## **Operating Expenses**

Based on past decision items affecting the Office of Health Disparities, JBC Staff concludes that the operating expenses appropriation for health disparities can be broken down as follows:

Office of Health Disparities	Total	GF	RF
Grant Program Support	\$38,290	\$0	\$38,290
Other Activities of the Office	27,548	6,931	20,617
Total	65,838	6,931	58,907

**Appropriation for the Long Bill:** (Shown in the numbers pages.) Staff recommends a continuation appropriation for operating expenses of \$65,838, comprised of \$6,931 General Fund and \$58,907 of reappropriated funds, which is a continuation of last year's appropriation.

**Appropriation for the Amendment 35 Transfer Bill:** Staff recommends a reduction of \$13,000 reappropriated funds, which is about one third of the RF portion of operating expenses. This corresponds to an appropriation of \$6,931 General Fund and \$45,907 of reappropriated Amendment 35 revenues.

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

FY 2010-11Appropriations for Health Disparities Grants	RF
Projected balance in the Health Disparities Grant Program Fund (19F) at start of FY 2010-11 (Includes estimates of FY 2009-10 revenue still to be received, lapsed spending authority from FY 2009-10, such as reversions from grantees, and the \$1 million transferred for FY 2009-10 Medical Services Premiums by the introduced version of H.B. 10-1320.)	\$2,082,861
Forecast of Amendment 35 revenue that the fund will receive during FY 2010-11 (2.4% of the December 2009 Legislative Council Staff Revenue forecast)	3,576,000
Forecast of interest earned during FY 2010-11 by the fund (zero thru FY 11-12 due to S.B. 09-270)	0
RF portion of the Personal Services appropriation for the Long Bill	(354,187)
RF portion of the Operating Expenses appropriation for the Long Bill	(58,907)
Estimated indirect cost assessment	(82,619)
Estimated allocation of POTS to the Personal Services line item	0
= Recommended Long Bill appropriation for Health Disparities Grants	\$5,163,148
Proposed FY 2010-11 reduction to support Medical Services Premiums	(4,490,435)
Additional revenues available due to reduced Personal Services and Operating Appropriations	79,000
= Computed appropriation for the Amendment 35 transfer bill	\$751,713

Note that the House version of H.B. 10-1320 would transfer \$2 million from the Health Disparities Grant Program Fund. If this version of the bill becomes law, the ending balance in the above table would be negative.

The Department states that it has awarded \$1 million of continuation grants for FY 2010-11; next year these grantees will be in the second year of grants awarded in FY 2009-10. Based on the above calculation staff believes that there is a significant chance that \$1 million of revenue will not be available for grants, however, staff recommends a \$1 million grant appropriation for the transfer bill in case Amendment 35 revenues are greater than expected.

# (C) Special Environmental Programs

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

# (2) CENTER FOR HEALTH AND ENVIRONMENTAL INFORMATION

#### Subdivisions:

- (A) Health Statistics and Vital Records
- (B) Information Technology Services

(C) Indirect Cost Assessment

### (A) Health Statistics and Vital Records

The Health Statistics and Vital Records Section maintains birth, death, marriage, divorce, and other vital records and issues related certificates. It also administers the Medical Marijuana Registry, which issues registry cards to those who have complied with the state's medical marijuana laws, and the Voluntary Adoption Registry, which facilitates voluntary contact between Colorado-born adoptees 18 years of age and older and their birth parents. The section has over 5 million birth and death records in its system and annually records some 70,000 births and 29,000 deaths. It provides training and education on vital records rules, regulations, and statutes to individuals and local agencies. Its databases include information on birth defects, injury, pregnancy, and suicide. Data users include the federal Centers for Disease Control, health professionals, the general public, legislators, local and county health departments, epidemiologist, genealogists, and the news media. The section is supported entirely with funds from cash, reappropriated and federal sources with the bulk of the cash funding coming from the Vital Statistics Records Cash Fund, which derives most of its revenue from fees paid for birth, marriage, death and other certificates. As directed by Section 25-2-121 (2) (a), the Department adjusts its fees so that the revenue generated approximates its costs, which are controlled by the appropriation decisions of the General Assembly. The federal funds are from three primary sources: the Centers for Disease Control, the Social Security Administration and the Department of Labor.

Medical Marijuana Decision Item (This unnumbered decision item was submitted as a budget amendment)

The Department requests \$1,195,658 cash funds and \$220,477 reappropriated funds for the Medical Marijuana Registry program. This request will allow the Department to hire ten temporary employees and 12.0 FTE permanent staff to operate the registry. The Department is forecasting that the extra 12.0 FTE will be needed in FY 2011-12 and subsequent years to staff the registry, but it does not think that it will need temporary employees after FY 2010-11. This request is a companion to FY 2009-10 Medical Marijuana Registry supplemental request that the Committee approved in January.

**Background:** Statute designates the Department of Public Health and Environment as the agency that maintains a confidential registry of patients authorized to use marijuana for medical purposes. CDPHE has been assigned the task of processing applications, issuing registry identification cards, and promulgating rules consistent with constitutional and statutory provisions.

In order to be placed on the registry and issued an identification card, an patient must submit to CDPHE a form, signed by the patient's physician, stating that (1) in the physician's opinion,

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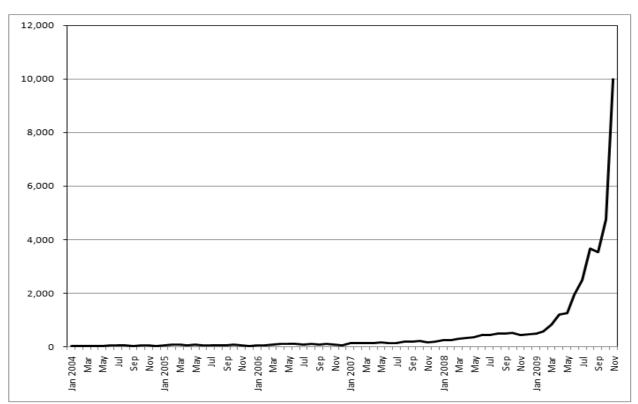
established in the context of a bonafide physician-patient relationship, the patient has one of the designated debilitating medical conditions identified in the Constitution and (2) the patient might benefit from the medical use of marijuana. The form must be submitted within 60 days of physician signature. The patient must also submit the following information

- 1. Name, address, date of birth, and social security number;
- 2. Name, address, and telephone number of the patient's physician; and
- 3. Name and address of the patient's primary care-giver, if one is designated at the time of application.
- 4. A \$90 non-refundable application fee. The Constitution states that this fee is to pay for direct and indirect administrative costs associated with CDPHE's role in the program.

Patients must reapply for cards annually and pay the \$90 application fee when they renew.

CDPHE is required by the Constitution to accept or reject medical marijuana applications within 35 days of submission. If more than 35 days elapse and the Department has not accepted or rejected the application, it is deemed to have been approved until the Department notifies the patient that it has been denied. A patient who is questioned by law enforcement officials after 35 days have elapsed can provide a copy of the submitted application along with proof of the date of submission, and the law enforcement official must accept this as the equivalent of a registry identification card.

**Growth of Registry Applications:** The following table, which shows the number of medical marijuana registry applicants received monthly since 2004, updates a table presented during December's JBC Staff Briefing for the Department and shows why the Department has submitted this request.



Monthly Applications for Placement on the Medical Marijuana Registry

The above graph ends in November 2009 when 9,991 applications were received. The Department cannot yet provide data for December or January, however it has provided the following information:

Complete applications received July 1, 2009 through Feb. 11, 2010	51,290
Registry cards sent July 1, 2009 through Feb. 11, 2010	13,102
Backlog as of Feb. 11, 2010	39,644
Backlog on June 30, 2009	1,456

This data suggests that applications are continuing to arrive at the rate of about 10,000 per month.

The Department is dealing with this backlog by conducting a quick review of all applications within 35 days of receipt. If it concludes that an application will be denied, it mails a rejection within 35 days of receipt. If it concludes that an application will be approved, it mails a registration card within 3 months of receipt, which exceeds the 35-day response period required by the Constitution.

The Department's request assumes that it will process 70,000 applications during FY 2010-11. Is this number reasonable? Extrapolation based on the 51,290 applications received between July 1,

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2009 and Feb. 11, 2010 implies 82,000 applications annually. The 10,000 applications received in November 2009 implies 120,000 applications annually. Looked at another way, 70,000 applicants is about 1.4 percent of Colorado's population. Data on medical marijuana use found at

MedicalMarijuana.procon.org/viewanswers.asp?questionID=001199

suggest that on average about 0.19 percent of the residents in states with medical marijuana laws use medical marijuana, with no state's usage exceeding 0.6 percent. This suggests that 70,000 applicants – 1.4 percent of Colorado's population – is too high. Another important question is the impact that medical marijuana bills that may be enacted during the 2010 session will have on the use of medical marijuana; they could substantially reduce applications. Yet another unknown is the reapplication rate – registry card holders must reapply for a new card once per year.

Based on this uncertainty, JBC staff accepts the Department's 70,000 annual estimate, but notes that the estimate could be substantially too high or low.

FY 2010-11 Medical Marijuana Registry Request	Total	GF	CF	RF	FF	FTE
Appropriations in CHEIS Division:						
Personal Services for 12.0 permanent positions	617,371	0	617,371	0	0	12.0
Personal Services for 10.0 temporary positions	344,576	0	344,576	0	0	0.0
One-time operating expenses	62,040	0	62,040	0	0	0.0
Continuing operating expenses	135,900	0	135,900	0	0	0.0
Appropriations in Administration Division:						
AED and SAED for 12.0 FTE	35,771	0	35,771	0	0	0.0
Leased Space	104,500	0	0	104,500	0	0.0
Legal Services – 663 hours	49,977	0	0	49,977	0	0.0
Postage (an operating expense)	66,000	0	0	66,000	0	0.0
Total Request	1,416,135	0	1,195,658	220,477	0	12.0
Recommended adjustment - hire temporary workers as Administrative Assistant II's	(43,508)	0	0	(43,508)	0	0.0
Recommendation	1,372,627	0	1,195,658	176,969	0	12.0

The following table details the Department's request and the staff recommendation:

The Department expects that the extra 12.0 FTE will be needed in FY 2011-12 and subsequent years, but it does not expect to need the temporary employees after FY 2010-11. Once the Department has caught up on the backlog, it will begin releasing the temporary staff and then the permanent staff if

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the workload will not support them. The Department will request that all newly hired, permanent employees waive their retention rights to avoid bumping issues. State Personnel rules include a provision that allows state employees to waive bumping rights. If these rights aren't waived, a terminated employee could bump other less senior employees in similar state government jobs, which would make layoffs substantially more difficult. JBC staff has been advised that the courts should uphold the waiver if a termination occurs, provided the Department can document the workload reduction and can show that those terminated were not selected in an arbitrary manner.

The department's proposal includes \$25,000 annually to establish and maintain a computer system that will allow law enforcement officials to verify registry data in real time when the official is with a person who possesses marijuana. The Governor's Office of Information and Technology has reviewed and approved this portion of the request. The constitution states that the registry is confidential, so care must be taken when providing this access.

**Staff Recommendation:** Staff recommends that the Committee approve this request with one modification: As was the case with the Medical Marijuana Registry supplemental, Staff recommends replacing the temporary Administrative Assistant III's, which the Department proposes to hire at the bottom of the Administrative Assistant III pay range, with Administrative Assistant II's, also hired at the bottom of the pay range.

## **Recommended Request for Information:**

Because of the uncertainty regarding the number of FTE and the appropriations needed to properly maintain the medical marijuana registry, staff recommends that the Committee submit the following request for information to the Governor:

XX. Department of Public Health and Environment, Center for Health and Environmental Information, Health Statistics and Vital Records -- The Department is requested to submit a report to the Joint Budget Committee by January 3, 2011 on the medical marijuana registry program. This report should estimate the appropriations and the FTE that the Department requires during Fiscal Years 2010-11 and 2011-12 to perform its statutory duties under Colorado's medical marijuana laws. The report should include data that supports these estimates.

Staff recommends a January 2011 submission date because the report will arrive shortly before supplementals and its data could be incorporated into staff supplemental recommendations. The report should also prove valuable during figure setting. A similar report may be useful in 2012.

## **Requested Medical Marijuana Program Cash Fund Transfer**

The Governor proposes that \$3,000,000 be transferred from the Medical Marijuana Program Cash Fund to support General Fund Revenues in FY 2010-11. This fund receives revenues from the \$90 fee paid by Medical Marijuana Registry applicants. The fee is set by the State Board of Health.

Using the *40,000* per year applicant forecast submitted by the Governor, Staff estimates that this transfer will have the following effect on the Medical Marijuana Program Cash Fund's balance:

Item	Amount
Beginning Balance, July 1, 2010. Submitted by the Department.	\$2,850,156
Projected revenue 40,000 applicants @\$90 per applicant during FY 2010-11	3,600,000
Projected expenditures:	
Current annual expenditures by the Medical Marijuana Registry	(481,822)
Cost of the Medical Marijuana Registry Decision Item presented above	(1,372,627)
Projected cost of H.B. 10-1284 (which doesn't yet have a fiscal note)	(378,000)
Projected cost of S.B. 10-109 (based on the fiscal note)	(815,224)
Year-end balance with no transfer	3,402,483
Projected Transfer	(3,000,000)
Year-end balance with a transfer	402,483

This analysis indicates that the proposed transfer could be absorbed without curtailing program operations. As discussed in detail above, there is great uncertainty concerning the number of Medical Marijuana Registry applications that the Department will receive. The 40,000 projection submitted by the Department, differs from the 70,000 forecast submitted by the Department for the Medical Marijuana decision item. Given that more than 50,000 applications were received between July 1, 2009 and Feb. 11, 2010, 40,000 appears to be a conservative estimate; however, it's possible that Medical Marijuana legislation enacted during the 2009 session could substantially reduce the number of applicants. None-the-less, Staff believes that \$3.0 million can be safely transferred.

**Staff recommends that the Committee approve a \$3.0 million transfer from the Medical Marijuana Program Cash Fund to support General Fund Revenues in FY 2010-11.** This transfer could be included in an omnibus transfer bill.

**Personal Services.** Of this section's FTE, approximately half are responsible for collecting, modifying and certifying birth and death records and the other half are 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. Staffing is summarized below.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Accounting	1.9	2.0	2.0	2.0
Administrative Support	13.7	14.0	20.0	20.0
Budget Analyst	0.7	0.6	0.6	0.6
Information Systems Staff	3.5	3.5	2.0	2.0
Management	1.0	1.0	1.0	1.0
Technician	15.1	19.1	20.0	20.0
Staff / General Professional	15.2	15.0	20.0	20.0
Total	51.1	55.2	65.6	65.6

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	2,780,999	0	2,188,938	3,550	588,511	55.2
Reverse FY 2009-10 Medical Marijuana Supplemental	(86,114)	0	(86,114)	0	0	0.0
Reverse FY 2009-10 1.82% base reduction	39,104	0	37,266	1,838	0	0.0
Reverse Furlough Supplemental	49,004	0	7,980	(1,838)	42,862	0.0
Medical Marijuana Decision Item	918,439	0	918,439	0	0	12.0
PERA adjustment	(71,588)	0	(36,763)	0	(34,825)	0.0
Federal Funds adjustment	<u>551,431</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>551,431</u>	<u>0.0</u>
FY 2010-11 Recommendation Before OIT Transfer	4,181,275	0	3,029,746	3,550	1,147,979	67.2
OIT Consolidation	(131,151)	0	(26,124)	0	(105,027)	(1.6)
FY 2010-11 Recommendation with OIT Transfer	4,050,124	0	3,003,622	3,550	1,042,952	65.6
FY 2010-11 Request	3,542,201	0	2,949,532	101,148	491,521	65.6

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

Operating Expenses	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	206,950	0	171,976	0	34,974

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Operating Expenses	Total	GF	CF	RF	FF
Reverse 2009-10 Medical Marijuana Supplemental	(71,575)	0	(71,575)	0	0
Medical Marijuana Decision Item	197,940	0	197,940	0	0
Federal Funds Adjustment	149,842	0	0	0	149,842
FY 2010-11 Recommendation	483,157	0	298,341	0	184,816
FY 2010-11 Request	333,315	0	277,266	21,075	34,974

## (B) Information Technology Services

The Information Technology Services section is responsible for technology planning and training, network installation, operation and maintenance, end-user and personal computer support, applications support, development and maintenance, and Internet support. The primary funding source is reappropriated funds from indirect cost assessments paid by the Department's various divisions.

The size of this division would be substantially reduced by the OIT Consolidation Decision Item, which is a common policy. This decision item would transfer most of the Department's IT staff to OIT and OIT would then provide IT services to the Department. The Department would pay for these services via increases in the appropriations for Purchase of Services from the Computer Center, Multiuse Network Payments, and Management and Administration of OIT.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Accounting Technician	1.0	1.0	1.0	1.0
Budget Analyst	0.3	0.4	0.3	0.3
Information Systems Staff	17.3	20.0	0.0	0.0
Management	0.1	0.5	0.5	0.5
Environ Protect Spec III	0.8	0.8	0.0	0.0
Staff / General Professional	1.0	1.0	0.0	0.0
Total	20.5	23.7	1.8	1.8

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

The next table computes the personal services recommendation.

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	2,237,998	0	164,664	1,796,154	277,180	23.7
Reverse FY 2009-10 1.82% base reduction	36,362	0	3,019	33,343	0	0.0
Reverse Furlough Supplemental	9,884	0	(1,587)	5,133	6,338	0.0
PERA Adjustment	(32,425)	<u>0</u>	<u>(1,163)</u>	(31,262)	<u>0</u>	<u>0.0</u>
FY 2010-11 Recommendation Before OIT Transfer	2,251,819	0	164,933	1,803,368	283,518	23.7
OIT Consolidation	(1,972,304)	0	(92,905)	(1,601,030)	(278,369)	(21.9)
FY 2010-11 Recommendation with OIT Transfer	279,515	0	72,028	202,338	5,149	1.8
FY 2010-11 Request	279,515	0	72,028	202,338	5,149	1.8

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

Operating Expenses	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	886,125	0	103,927	661,219	120,979
Federal Funds Adjustment	(95,811)	0	0	0	(95,811)
FY 2010-11 Recommendation	790,314	0	103,927	661,219	25,168
FY 2010-11 Request	886,125	0	103,927	661,219	120,979

<u>Purchase of Services from the Computer Center</u>. The following table shows the recommendation and request for Purchase of Services from the Computer Center.

Purchase of Services from the Computer Center	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	376,376	0	42,572	297,730	36,074
Common Policy Base Adjustment	474,659	<u>15,000</u>	<u>45,935</u>	<u>214,553</u>	<u>199,171</u>
FY 2010-11 Recommendation Before OIT Transfer	851,035	15,000	88,507	512,283	235,245
OIT Consolidation	4,651,692	239,031	653,240	1,319,001	2,440,420
FY 2010-11 Recommendation	5,502,727	254,031	741,747	1,831,284	2,675,665
FY 2010-11 Request	5,502,727	254,031	741,747	1,831,284	2,675,665

<u>Multiuse Network Payments</u>. The following table shows the recommendation and request for Multiuse Network Payments.

Multiuse Network Payments	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	61,792	0	0	55,275	6,517
Common Policy Base Adjustment	<u>6,532</u>	<u>0</u>	<u>0</u>	<u>5,843</u>	<u>689</u>
FY 2010-11 Recommendation Before OIT Transfer	68,324	0	0	61,118	7,206
OIT Consolidation	543,254	10,612	1,008	291,535	240,099
FY 2010-11 Recommendation	611,578	10,612	1,008	352,653	247,305
FY 2010-11 Request	611,578	10,612	1,008	352,653	247,305

<u>Management and Administration of OIT</u>. The following table shows the recommendation and request for Management and Administration of OIT.

Management and Administration of OIT	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	100,799	0	0	100,799	0
Reverse supplemental billing adjustment	16,649	0	0	16,649	0
Common Policy Base Adjustment	<u>133</u>	<u>0</u>	<u>0</u>	<u>133</u>	<u>0</u>
FY 2010-11 Recommendation Before OIT Transfer	117,581	0	0	117,581	0
OIT Consolidation	378,527	0	0	175,492	203,035
FY 2010-11 Recommendation	496,108	0	0	293,073	203,035
FY 2010-11 Request	496,108	0	0	293,073	203,035

## (C) Indirect Cost Assessment

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

# (3) LABORATORY SERVICES

Subdivisions:

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

### (C) Certification

## (A) Director's Office

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

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Administrative Support	1.7	1.7	1.7	1.7
Information Systems Staff	1.7	1.7	0.0	0.0
Management	0.9	0.9	0.9	0.9
General Professional	1.8	2.3	2.3	2.3
Physical Scientist	1.0	1.0	1.0	1.0
Program Assistant	0.3	0.5	0.5	0.5
Total	7.4	8.1	6.4	6.4

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	715,554	0	597,336	0	118,218	8.1
Reverse Furlough Supplemental	8,199	0	8,199	0	0	0.0
Federal Funds Adjustment	(118,218)	0	0	0	(118,218)	(1.1)
PERA Adjustment	(6,662)	0	(6,662)	0	0	0.0
FY 2010-11 Recommendation Before OIT Transfer	598,873	0	598,873	0	0	7.0
OIT Consolidation	(124,181)	0	(124,181)	0	0	(1.7)
FY 2010-11 Recommendation	474,692	0	474,692	0	0	5.3
FY 2010-11 Request	592,910	0	474,692	0	118,218	6.4

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

Operating Expenses	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	30,597	0	22,421	0	8,176
Federal Funds Adjustment	(8,176)	0	0	0	(8,176)
FY 2010-11 Recommendation	22,421	0	22,421	0	0
FY 2010-11 Request	30,597	0	22,421	0	8,176

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

## (B) Chemistry and Microbiology

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

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Accounting	2.0	4.5	4.5	4.5
Administrative support	3.9	4.5	4.5	4.5
Environmental Protection Specialist	5.6	5.6	5.6	5.6
Health Professional	0.0	0.0	0.0	0.0
Program Assistant	0.9	1.5	1.5	1.5
Information Systems Staff	0.5	0.5	0.0	0.0
Laboratory Technician	14.3	15.0	15.0	15.0
Materials Supervisor	0.0	0.0	0.0	0.0
Physical Scientist	23.3	25.0	25.0	20.8

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Staff / General Professional	5.3	9.0	9.0	9.0
Total	55.8	65.6	65.1	60.9

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	5,165,844	758,953	2,375,128	132,926	1,898,837	65.6
Reverse FY 2009-10 1.82% base reduction	48,789	3,063	43,296	2,430	0	0.0
Reverse Furlough Supplemental	(25,925)	3,390	(36,143)	(1,666)	8,494	0.0
PERA Reduction	(78,763)	(13,572)	(40,668)	(2,660)	(21,863)	0.0
Federal Funds Adjustment	(870,656)	<u>0</u>	<u>0</u>	<u>0</u>	<u>(870,656)</u>	<u>(4.2)</u>
FY 2010-11 Recommendation Before OIT Transfer	4,239,289	751,834	2,341,613	131,030	1,014,812	61.4
OIT Consolidation	(35,726)	0	0	(35,726)	0	(0.5)
FY 2010-11 Recommendation	4,203,563	751,834	2,341,613	95,304	1,014,812	60.9
FY 2010-11 Request	5,074,219	751,834	2,341,613	95,304	1,885,468	65.1

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

Operating Expenses	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	3,297,500	316,278	2,629,197	140,119	211,906
Reverse supplemental for replacement servers for newborn screening program.	(72,248)	0	(72,248)	0	0
2 <sup>nd</sup> year impact of 2009 DI#4, Newborn Screening and Genetics Counseling	75,209	0	75,209	0	0
Federal Funds Adjustment	78,336	0	0	0	78,336
FY 2009-10 Recommendation	3,378,797	316,278	2,632,158	140,119	290,242
FY 2009-10 Request	3,300,461	316,278	2,632,158	140,119	211,906

#### (C) Certification

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request*	FY 2010-11 Recommend.
Electronic Specialist	1.9	2.3	2.3	2.3
Program Assistant	1.0	1.0	1.0	1.0
Laboratory Technician	2.3	2.5	2.5	2.5
Physical Scientist	3.8	4.5	4.5	4.5
Total	9.0	10.3	10.3	10.3

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

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	711,801	0	526,800	0	185,001	10.3
Reverse Furlough Supplemental	10,058	0	4,753	0	5,305	0.0
PERA reduction	(13,343)	0	(9,033)	0	(4,310)	0.0
Federal Funds Adjustment	(4,197)	0	0	0	(4,197)	0.2
FY 2010-11 Recommendation	704,319	0	522,520	0	181,799	10.5
FY 2010-11 Request	708,516	0	522,520	0	185,996	10.3

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

Operating Expenses	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	89,886	0	60,483	0	29,403
Federal Funds Adjustment	8,116	0	0	0	8,116
FY 2010-11 Recommendation	98,002	0	60,483	0	37,519
FY 2010-11 Request	89,886	0	60,483	0	29,403

#### (4) LOCAL PUBLIC HEALTH PLANNING AND SUPPORT

#### Subdivisions:

None

This division provides technical and financial support for health and environmental services that are delivered by local health agencies around the state. The division is supported by the General Fund, cash funds from tobacco-settlement revenues, and federal funds.

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

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

Pursuant to Section 25-1-512, C.R.S., the Department allocates moneys appropriated by the General Assembly to local health agencies to help them perform their health and environmental duties. These moneys come from the General Fund and from tobacco-settlement revenues, with the settlement appropriation equal to 7 percent of the settlement payments received by Tier 2 tobacco programs. The formula for allocating these moneys among local health agencies is established by the State Board of Health.

**Proposed Long Bill Reorganization:** The Department requests that the Long Bill be reorganized and that this division be presented a subdivision of the Administration and Support division within the reorganized bill. Before considering this reorganization, staff will present recommended appropriations for each line item in the division, when necessary recasting the Department's request

to fit the Long Bill's current form. After considering each line item, Staff will make recommendations regarding the reorganization.

<u>Assessment and Planning Program</u>. The following table details the Option 8 computation for the Assessment and Planning Program established by S.B. 08-194.

Assessment and Planning Program	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	165,806	28,311	137,495	0	0	3.0
Reverse Furlough Supplemental	3,590	1,689	1,901	0	0	0.0
PERA Adjustment	(2,918)	(1,373)	(1,545)	0	0	0.0
FY 2010-11 Recommendation	166,478	28,627	137,851	0	0	3.0
FY 2010-11 Request	166,478	28,627	137,851	0	0	3.0

**Distributions to Local Public Health Agencies.** This appropriation includes a General Fund component, which can be adjusted without limitation by the General Assembly, and a cash fund component that is dictated by a formula contained in Section 24-75-1104.5, C.R.S. This formula requires the General Assembly to appropriate 7 percent of "Tier 2" tobacco settlement revenues for distributions to local health agencies; deviations from this appropriation require statutory change. The following table uses the Committee-approved tobacco-settlement revenue forecast to compute the resulting distribution:

Distributions to Local Public Health Agencies	Total	GF	CF	RF	FF
FY 2009-10 appropriation	8,540,933	5,962,731	2,578,202	0	0
Adjustment due to reduced tobacco settlement revenues	(291,847)		(291,847)		
FY 2010-11 Recommendation	8,249,086	5,962,731	2,286,355	0	0
FY 2010-11 Request	8,540,933	5,962,731	2,578,202	0	0

**Environmental Health Services Not Provided by Local Health Agencies.** This line item pays contract health specialists to provide retail food inspection and environmental health services in communities not served by local health agencies or by the Department's Consumer Protection Division. **Staff recommends that the Committee approve the Department's request for an appropriation of \$242,358 General Fund for this appropriation,** which is a continuation appropriation.

**Local Public Health Nursing Consultation and Training**. This program provides technical assistance, consultation, training and monitoring services for local public health agencies; it typically provides more support for the smaller agencies, which often lack the expertise and resources of the

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request*	FY 2010-11 Recommend*
Nurse Consultant	2.5	3.5	3.5	3.5
Management	0.2	0.0	0.0	0.0
Staff / General Professional	1.9	1.9	1.9	4.3
Total	4.6	5.4	5.4	7.8

Staffing levels for the program are summarized in the following table.

The option 8 computation is as follows:

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 appropriation	495,852	280,009	0	0	215,843	5.4
Reverse Furlough Supplemental	10,990	4,555	0	0	6,435	0.0
PERA Adjustment	(8,930)	(3,701)	0	0	(5,229)	0.0
Federal Funds Adjustment	(47)	0	0	0	(47)	2.4
FY 2010-11 Recommendation*	497,865	280,863	0	0	217,002	7.8
FY 2010-11 Request*	497,912	280,863	0	0	217,049	5.4

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

**Proposed Long Bill Reorganization:** The Department requests that the Long Bill be reorganized so that this division is presented as a subdivision of (1) Administration and Support, just as the Health Disparities Program is currently presented as an Administration and Support subdivision. The new subdivision would retain the name Local Public Health Planning and Support. Two of the division's line items, "Assessment and Planning Program" and "Local Public Health Nursing Consultation and Training" would be merged into a single line item. The Indirect Cost Assessment line item would be merged with the Indirect Cost Assessment line item in Administration and Support. The division's two other line items, "Distributions to Local Public Health Agencies" and

"Environmental Health Services Not Provided by Local Health Departments" would be moved but would not otherwise be changed. There overall level of spending would not be altered.

The Department offers relatively little justification for this request; it states that its objective is to make the Long Bill more closely reflect the actual structure of the Department.

**Staff recommends that the Committee approve this change.** Staff believes that any change that makes the Long Bill more closely resemble the actual structure of a department enhances transparency. While the consolidation of the "Assessment and Planning Program" and "Local Public Health Nursing Consultation and Training" line items into a single line item may result is a small loss of Long Bill detail and a modest reduction in the General Assembly's ability to control programs in detail, the loss will be small and may be offset by the benefits of increased flexibility.

Having spoken with CDPHE Staff about the consolidation, JBC Staff understands that this loss of "division" status does not in any way imply a de-emphasis of the Division's work. This division may be the Department's smallest in FTE terms, but its duties touch every other division because it is responsible for facilitating and encouraging the cooperation between CDPHE and local health agencies that was envisioned in S.B. 08-194, Public Health Reorganization.

# (5) AIR QUALITY CONTROL DIVISION (6) WATER QUALITY CONTROL DIVISION (7) HAZARDOUS MATERIALS AND WASTE MANAGEMENT DIVISION (8) CONSUMER PROTECTION

These environmental divisions are presented separately by another analyst

#### (9) DISEASE CONTROL AND ENVIRONMENTAL EPIDEMIOLOGY DIVISION

Subdivisions:

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

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

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

#### (A) Administration, General Disease Control and Surveillance

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Administrative Support Staff	2.2	3.0	3.0	3.0
Budget & Policy Analyst	0.8	0.8	0.8	0.8
Information Systems Staff	1.4	1.4	0.0	0.0
Management	0.1	0.1	0.1	0.1
Medical Health Professional	2.5	6.3	6.4	6.4
Physical Scientist	0.5	0.5	0.5	0.5
Public Health Medical Administrator	0.2	0.2	0.2	0.2
Staff / General Professional	1.3	3.0	3.0	3.0
Total	9.0	15.3	14.0	14.0

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

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	940,323	642,394	0	0	297,929	15.3
Reverse Furlough Supplemental	26,900	10,299	0	0	16,601	0.0
2 <sup>nd</sup> year impact of 2009 DI#1, Surveillance and Public Health Outbreak Response	4,856	4,856	0	0	0	0.1

Personal Services	Total	GF	CF	RF	FF	FTE
Federal Funds Adjustment	(26,301)	0	0	0	(26,301)	(0.9)
PERA Adjustment	(22,289)	(8,520)	<u>0</u>	<u>0</u>	(13,769)	<u>0.0</u>
FY 2010-11 Recommendation Before OIT Transfer	923,489	649,029	0	0	274,460	14.5
OIT Consolidation	(108,315)	(98,015)	0	0	(10,300)	(1.4)
FY 2010-11 Recommendation	815,174	551,014	0	0	264,160	13.1
FY 2010-11 Request	841,475	551,014	0	0	290,461	14.0

#### **Operating Expenses.**

**Budget Reduction Item: Proposed Two-year General Fund Reductions.** The Department proposes to eliminate for FY 2010-11 and FY 2011-12, \$98,636 of General Fund Operating Expenses. These are temporary reductions that take advantage of temporary opportunities to reduce spending. In order to create the savings, the Department will do such things as delay the replacement of computer software and hardware, reduce purchases of office supplies, and reduce staff training. The Department states that these reduction will not affect the delivery of services to Colorado citizens. It notes, however, but the delivery of services will suffer if the reduced funding is not restored in FY 2012-13.

The proposed General Fund reductions are as follows:

Line Item	FY 2010-11 Reduction	FY 2011-12 Reduction
(9) Disease Control and Environmental Epidemiology Division		
(A) Administration, General Disease Control and Surveillance, Operating Expenses	35,000	35,000
(B) Special Purpose Disease Control Programs, (1) Immunization Operating Expenses	35,000	35,000
(10) Prevention Services Division		
(E) Family and Community Health; (3) Children with Special Needs; (a) Health Care Program for Children with Special Needs, Operating Expenses	28,638	28,638
Total	98,638	98,638

**Recommendation:** Staff recommends that the Committee approve these reductions. Staff will include them in the computation of the appropriations for the affected line items, the first of which follows.

Administration Operating Expenses	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	378,512	258,133	6,538	0	113,841
Requested one-time General Fund reduction	(35,000)	(35,000)	0	0	0
Federal Funds Adjustment	(78,933)	0	0	0	(78,933)
FY 2009-10 Recommendation	264,579	223,133	6,538	0	34,908
FY 2009-10 Request	343,512	223,133	6,538	0	113,841

Cash fund revenues for this line item derive from the sale of rabies vaccines.

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

#### (B) Special Purpose Disease Control Programs

#### (1) Immunization

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

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

- 1. The Colorado Immunization Information System (CIIS), a computerized system that collects immunization information about Colorado children. CIIS enables immunization providers to quickly check a child's immunization status during a health-care visit, thus helping to ensure that children receive all recommended immunizations and are not over-immunized. The system can also send reminders to parents of children who are not up-to-date on their immunizations. A 2008 session decision moved CIIS from the Health Sciences Center to CDPHE.
- 2. The Immunization Outreach Program, which runs free immunization clinics around the state. This program was created by a FY 2004-05 decision item.

The following table shows the breakdown of total projected General Fund expenditures for FY 2009-10, which includes Operating Expenses and Personal Services. These expenditures, before supplementals, totaled \$1,538,076:

Item	Percentage
Colorado Immunization Information System (CIIS)	68.2%

Item	Percentage
Immunization Outreach Program	31.8%

**Cash Fund Programs.** The Immunization subdivision's entire projected \$1.4 million FY 2009-10 cash fund expenditure will be distributed to contractors such as local health agencies. The following table shows the projected allocation.

Item	Percentage
Colorado Immunization Information System (CIIS)	10.8%
Immunizations clinics operated by local health agencies	40.5%
Other (a substantial portion is distributed to local health agencies)	48.7%

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

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

Personal Services. The following table summarizes staffing.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Administrative Support Staff	2.8	3.0	3.0	3.0
Information Systems Staff	0.8	0.8	0.0	0.0
Medical Health Professional	7.3	10.0	10.0	10.0
Nurse Consultant	6.8	8.8	9.0	9.0
Public Health Medical Administrator	0.2	0.2	0.2	0.2
Program Assistant	1.1	2.0	2.0	2.0
Staff / General Professional	5.7	6.0	6.1	11.3
Statistical Analyst	0.1	0.1	0.1	0.1
Total	24.8	30.9	30.4	35.6

The Option 8 calculation is as follows.

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	1,942,800	854,038	0	0	1,088,762	31.0
Reverse Furlough Supplemental	33,218	(3,247)	0	0	36,465	0.0
Reverse FY 2009-10 1.82% base reduction	15,749	15,749	0	0	0	0.0
Federal Funds Adjustment	679,412	0	0	0	679,412	5.2
PERA Adjustment	(51,268)	(14,342)	0	0	(36,926)	0.0
FY 2010-11 Recommendation Before OIT Transfer	2,619,911	852,198	0	0	1,767,713	36.2
OIT Consolidation	(50,934)	(26,413)	0	0	(24,521)	(0.6)
FY 2010-11 Recommendation	2,568,977	825,785	0	0	1,743,192	35.6
FY 2009-10 Request	1,889,565	825,785	0	0	1,063,780	30.4

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

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

GF and FF Operating Expenses	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	21,808,460	687,285	Presented below	0	21,121,175
Proposed Two Year General Fund Reductions	(35,000)	(35,000)			0
Changed reimbursement methods for the Vaccines for Children Program	(10,000,000)	0		0	(10,000,000)
FY 2009-10 GF and CF Recommendation	11,773,460	652,285		0	11,121,175
FY 2009-10 GF and CF Request	11,773,460	652,285		0	11,121,175

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

**The diversion to HCPF for cervical cancer vaccination:** A portion of the moneys that the Colorado Immunization Fund receives each year have been appropriated to HCPF rather than to the CDPHE. The diversion to HCPF funds cervical cancer vaccinations (also known as human papillomavirus vaccinations or HPV vaccinations) for Children's Basic Health Plan participants. This

arrangement was established in the appropriation clause of H.B. 07-1301 Cervical Cancer Immunizations, which reflected the corresponding Legislative Council Staff Fiscal Note. The HCPF appropriation is not required by statute but it has been continued and has grown from the original \$91,000 to slightly more than \$460,000 since H.B. 07-1301 became law. The diverted moneys are appropriated in the "Indigent Care Program" division of HCPF's Long Bill where they supply a small portion (0.3%) of the funding for the "Children's Basic Health Plan Premium Costs" line item. According to HCPF, the CBHP appropriations for cervical cancer immunization qualify for an enhanced 1.5 to 1 match.

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

For FY 2010-11, staff recommends that the diversion to HCPF for HPV vaccines be continued at the FY 2009-10 level, with a small rounding adjustment to bring the transfer to \$461,700.

CF Operating Expenses	CF
Projected allocation of tobacco settlement revenues to Colorado Immunization Fund	\$1,306,489
Recommended diversion to HCPF for immunizations by the Children's Basic health Plan	(461,700)
FY 2009-10 CF Appropriation Recommendation	844,789

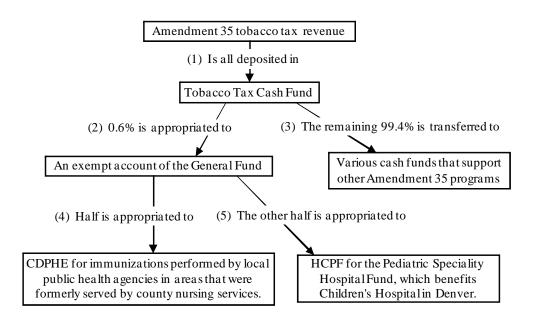
A substantial portion of the tobacco settlement revenue flowing to the Colorado Immunization Fund now funds HPV immunizations. The following table summarizes the combined effect of the diversion to HCPF and the payments to local health agencies to administer HPV shots if the Committee approves this HCPF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

Fiscal Year	Tobacco Revenue Allocation	HPV payments to local public health agencies	HPV diversion to HCPF	Remainder (Non HPV)	HPV share of allocation
2007-08	685,155	(42,600)	(90,765)	551,790	19.5%
2008-09	1,473,167	(42,600)	(171,251)	1,259,316	14.5%
2009-10	1,442,600	(42,600)	(461,727)	938,273	35.0%
2010-11	1,306,489	(42,600)	(461,700)	802,189	38.6%

Immunizations by Local Public Health Agencies That Were Formerly Nursing Services. A portion of the funding for immunizations derives from the Amendment 35 tobacco tax. The

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following diagram shows the flow of Amendment 35 dollars as implemented in Section 24-22-117, C.R.S.



Referring to the numbers in the above diagram:

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

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

Comments:

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

• This is the only part of the Amendment 35 revenue that is appropriated to the General Fund. The wording of Amendment 35 requires this appropriation.

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

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

#### **Recommended CDPHE appropriations**

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

**Recommended Line Item Name Change.** The implementation of S.B. 08-194, Public Health Reorganization, forced the state's county nursing services to become health agencies. In recognition of this change, staff recommends that the appropriation shown at (4) in the diagram above, which was formerly called "Immunizations Performed by County Public Health Nursing Services," be retitled "Immunizations Performed by Local Public Health Agencies that Were Formerly Nursing Services".

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

December 2009 Legislative Council Staff forecast of FY 2010-11 Amendment 35 revenue	\$149,000,000
Recommended FY 2010-11 allocation to Immunizations Performed by Local Public Health Agencies that Were Formerly Nursing Services (0.3% of this revenue)	\$447,000

- An appropriation of \$447,000 from the Tobacco Tax Cash Fund to the General Fund. This appropriation is classified as cash funds because the source is cash funds.
- An appropriation of \$447,000, General Fund Exempt, for Immunizations Performed by Local Public Health Agencies that Were Formerly Nursing Services.

**Recommended adjustment to last year's appropriation:** The FY 2009-10 Long Bill contains appropriations similar to those recommended above; it includes an appropriation of \$504,000 of Amendment 35 moneys to the General Fund and a companion \$504,000 appropriation for immunizations. These appropriations were based upon an overly optimistic revenue forecast; more recent data suggests that revenues will be \$450,000. Normally when revenues decline there is no need to amend these appropriations, but in the current instance, the HCPF analyst has recommended that an add-on be included in the FY 2010-11 Long Bill that reduces these appropriations to \$450,000. The HCPF analyst will propose similar adjustments to the parallel appropriations involving the Pediatric Specialty Hospital fund in order to qualify for ARRA funding and believes this it is wise to change this appropriation in a parallel fashion.

Legislative Council Staff will issue a revised Amendment 35 revenue forecast in March 2010 when they issue their economic forecast. This forecast is likely to alter the calculation in the of this appropriation. Staff requests permission to update these appropriations to reflect the March forecast if it becomes available in time to revise the Long Bill before it is introduced. The update requires a mechanical application of statutory rules.

**Immunization Request for Information.** Staff recommends that the following request for information, which was submitted to the Governor last year, be *discontinued*:

55. Department of Public Health and Environment, Disease Control and Environmental Epidemiology Division, Special Purpose Disease Control Programs, Immunization -- The Department is requested to submit a report to the Joint Budget Committee by November 1, 2009, detailing how immunization promotion funding was spent during FY 2008-09. The report should include the following information: (1) the location, number of children vaccinated, and total grant amount for each immunization outreach clinic funded; and (2) the expenditures for and major purchases of the media campaign.

The Department's past reports have provided data on the "Immunization Outreach" decision item that was approved by the General Assembly for FY 2004-05. The initial reports suggested that the program may not have been a cost effective means of reaching unvaccinated children, but the most recent report has allayed this concern.

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

Since FY 2006-07 this section has also been administering the Colorado HIV and AIDS Prevention Grant Program (CHAPP), which is established in Section 25-4-1413, C.R.S., and receives 2 percent of tobacco settlement payments with a two million dollar cap. The grant program, which is overseen by a 7-member advisory committee, provides competitive grants to organizations that addresses local community needs in the areas of medically accurate HIV and AIDS prevention and education.

Staffing Summary	2008-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Accounting	0.2	0.2	0.2	0.2
Administrative Support Staff	0.5	0.5	0.5	0.5
Information Systems Staff	1.5	1.5	0.0	0.0
Management	0.5	0.5	0.5	0.5
Medical Health Professional	21.9	25.6	25.6	25.6
Public Health Medical Administrator	0.4	0.4	0.4	0.4
Medical Records Technician	0.6	0.6	0.6	0.6
Program Assistant	3.9	5.0	5.0	5.0
Staff / General Professional	15.5	19.0	19.0	10.4
Statistical Analyst	0.5	0.5	0.5	0.5
Technician	1.7	2.0	2.0	2.0
Total	47.2	55.8	54.3	45.7

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

The following table presents the corresponding Option 8 calculation.

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Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	3,305,638	0	75,961	0	3,229,677	55.8
Reverse FY 2009-10 1.82% base reduction	1,418	0	1,418	0	0	0.0
Reverse Furlough Supplemental	94,076	0	659	0	93,417	0.0
Federal Funds Adjustment	433,936	0	0	0	433,936	(8.6)
PERA Adjustment	(77,739)	0	(1,690)	0	(76,049)	0.0
FY 2010-11 Recommendation Before OIT Transfer	3,757,329	0	76,348	0	3,680,981	47.2
OIT Consolidation	(134,545)	0	(530)	0	(134,015)	(1.5)
FY 2009-10 Recommendation	3,622,784	0	75,818	0	3,546,966	45.7
FY 2009-10 Request	3,188,848	0	75,818	0	3,113,030	54.3

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

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

**Part 1, FF Operating Expenses. Staff recommends that the Committee approve an appropriation of \$2,885,736 for federally-funded operating expenses.** About 80 percent of the federal funding in this line item is used for grants to county and local governments and to non-profit organizations to conduct STD monitoring, prevention and education efforts. This represents a \$1,927,264 reduction of the appropriation, which should bring it in line with recent federal funding.

**Part 2, CF Operating Expenses.** The cash funds portion of the Operating Expenses appropriation is computed in the following table. As the table indicates, the tobacco-settlement-funded AIDS and HIV Prevention Fund, the appropriation's source, will carry a balance into FY 2009-10. Staff recommends that the Committee hold back \$30,000 in order to keep a balance in the fund equal to approximately 1.5 percent of annual tobacco-revenue receipts. This fund balance could be used in the future to avoid small negative supplemental adjustments if tobacco settlement payments come in slightly lower than the forecast. The fund balance could also be used to cushion a decline if tobacco settlement payments fall more sharply.

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

CF Operating Expenses (The Colorado HIV and AIDS Prevention Grant Program - "CHAPP")	CF
Projected tobacco settlement revenue based on the January 2010 Legislative Council Forecast	1,920,638
+ Projected fund balance in the AIDS and HIV prevention fund (19S), carried forward from prior year	1,047,559
- Recommended fund balance held in reserve	(30,000)
- Recommended CF Personal Services appropriation computed above	(75,818)
FY 2009-10 CF Recommendation	2,862,379
FY 2009-10 CF Request	2,702,405

#### (3) Ryan White Act

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

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

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

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Administrative Support Staff	0.1	0.1	0.1	0.1
Information Technology	0.2	0.2	0.0	0.0
Management	0.3	0.2	0.2	0.2
Medical Health Professional	3.4	1.0	1.0	1.0
Program Assistant	1.3	0.5	0.5	0.5
Staff / General Professional	6.5	2.0	2.0	9.9
Total	11.8	4.0	3.8	11.7

Personal Services. The following table shows program staffing.

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	293,176	28,556	0	0	264,620	4.0
Reverse Furlough Supplemental	26,763	0	0	0	26,763	0.0
Federal Funds Adjustment	664,496	0	0	0	664,496	7.9
PERA Adjustment	(21,823)	0	0	0	(21,823)	0.0
FY 2010-11 Recommendation Before OIT Transfer	962,612	28,556	0	0	934,056	11.9
OIT Consolidation	(12,192)	(110)	0	0	(12,082)	(0.2)
FY 2010-11 Recommendation	950,420	28,446	0	0	921,974	11.7
FY 2010-11 Request	285,924	28,446	0	0	257,478	3.8

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

**Extra Funding for ADAP from CHAPP:** Last year S.B. 09-269 capped the amount of tobacco settlement revenue allocated among tobacco settlement programs in FY 2009-10 at \$100 million, thus causing the settlement revenues allocated to settlement programs to decline. Concerned about the impact of the reduced funding on the AIDS Drug Assistance Program (ADAP), the General Assembly included a provision in S.B. 09-269 that allowed moneys in the AIDS and HIV Prevention Cash Fund, which supports CHAPP grants, to be appropriated to ADAP in FY 2009-10. Using this appropriation authority, the bill then appropriated \$128,692 from the AIDS and HIV Prevention Cash Fund to ADAP, which kept funding for the ADAP program at its FY 2008-09 level. The AIDS and

HIV Prevention Cash Fund had sufficient fund balance to absorb the transfer without reducing grants.

House Bill 10-1323 contains a similar provision that allows moneys in the AIDS and HIV Prevention Cash Fund to be appropriated to ADAP in FY 2010-11. Based on the assumption that this bill will become law before the Long Bill is introduced, Staff recommends that the FY 2010-11 Long Bill include an appropriation of \$261,040 from the AIDS and HIV Prevention Cash Fund to ADAP. This appropriation, in combination with the projected allocation of tobacco-settlement dollars to the program, will keep funding for ADAP at its FY 2008-09 and FY 2009-10 level. If H.B. 10-1323 fails to become law or becomes law without this provision, Staff will remove this appropriation from the Long Bill.

**Operating Expenses.** The following table summarizes the operating expense recommendation. Note that the tobacco settlement appropriation is in the CF column. The difference between the request and the appropriation is due to differing tobacco revenue forecasts.

Operating Expenses	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	12,951,560	1,357,404	3,622,156	0	7,972,000
Expiration of provision in S.B. 09-269 that allowed appropriations from the AIDS and HIV Prevention Cash Fund	(128,692)	0	(128,692)	0	0
Change of tobacco-settlement allocation	(132,348)	0	(132,348)	0	0
Federal Funds Adjustment	4,797,212	0	0	0	4,797,212
Appropriation from AIDS and HIV Prevention Cash Fund to keep CF funding constant (allowed by H.B. 10-1323)	261,040	0	261,040	0	0
FY 2010-11 Recommendation	17,748,772	1,357,404	3,622,156	0	12,769,212
FY 2010-11 Request	12,951,560	1,357,404	3,622,156	0	7,972,000

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

**56. Department of Public Health and Environment, Disease Control and Environmental Epidemiology Division, Special Purpose Disease Control Programs, Ryan White Act --** The Department is requested to report annually to the Joint Budget Committee with regard to the AIDS drug assistance program. The report should be submitted on or before October 20, 2009. October 20, 2010. The report should include, but not be limited to: (1) the total and average monthly number of clients served, with a description of the demographic profile of the client

population; (2) the total and average monthly costs to provide pharmaceutical products to those clients; (3) a listing of the pharmaceuticals on the formulary, the manufacturer of each product, and the respective average price for a month's supply of each product; and (4) the total amount of available funds, including state General Fund support, federal Title I and Title II support; and any other source as appropriate.

This information request first appeared as a footnote in the FY 1998-99 Long Bill at a time when the state's AIDS/HIV costs were rising about \$2 million per year and funding shortfalls left some on waiting lists. Staff believes that the requested report provides valuable information for program monitoring.

#### (4) Tuberculosis Control and Treatment

Pursuant to Sections 25-4-501 to 513, C.R.S., the Department conducts a statewide tuberculosis program that relies on surveillance and treatment. Counties are responsible for investigating reported or suspect cases, and can order quarantine or isolation if necessary. About 45 percent of the program's funding comes from the General Fund, with 40 percent deriving from federal sources and the remainder coming from transfers from the Department of Human Services that derive from a federal source. This program was the subject of last year's Decision Item #1, Tuberculous Control and Treatment, which the General Assembly approved.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Accounting	0.1	0.1	0.1	0.1
Administrative Support Staff	2.1	2.1	2.1	2.1
Budget & Policy Analyst	0.1	0.0	0.0	0.0
Information Systems Staff	0.2	0.2	0.0	0.0
Management	1.0	0.0	0.0	0.0
Medical Health Professional	3.0	1.0	1.0	1.0
Nurse Consultant	1.9	0.8	0.8	0.8
Program Assistant	1.1	0.6	0.6	0.6
Staff / General Professional	2.0	2.0	2.0	7.4
Total	11.5	6.8	6.6	12.0

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

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	616,374	122,742	0	95,554	398,078	6.8
Reverse Furlough Supplemental	27,374	444	0	0	26,930	0.0
Federal Funds Adjustment	487,373	0	0	0	487,373	5.4
PERA Adjustment	(22,346)	<u>(360)</u>	<u>0</u>	<u>0</u>	<u>(21,986)</u>	<u>0.0</u>
FY 2010-11 Recommendation Before OIT Transfer	1,108,775	122,826	0	95,554	890,395	12.2
OIT Consolidation	(19,088)	0	0	0	(19,088)	(0.2)
FY 2010-11 Recommendation	1,089,687	122,826	0	95,554	871,307	12.0
FY 2010-11 Request	602,314	122,826	0	95,554	383,934	6.6

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

**Operating Expenses.** The following table summarizes the staff recommendation.

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	1,872,933	1,191,913	0	210,020	471,000	0.0
Reverse Furlough Supplemental	344,529	0	0	0	344,529	0.0
FY 2010-11 Recommendation	2,217,462	1,191,913	0	210,020	815,529	0.0
FY 2010-11 Request	1,872,933	1,191,913	0	210,020	471,000	0.0

#### (C) Environmental Epidemiology

#### (1) Birth Defects Monitoring and Prevention

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

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Administrative Support Staff	0.0	0.3	0.3	0.3
Information Systems Staff	0.4	0.5	0.0	0.0
Medical Health Professional	0.2	2.0	2.0	1.0
Physical Scientist	1.0	1.0	1.0	1.0
Staff / General Professional	1.3	2.0	2.0	1.3
Total	2.9	5.8	5.3	3.6

**<u>Personal Services</u>**. The following table presents the distribution of FTE within Birth Defects Monitoring and Prevention.

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	442,658	124,288	142,232	0	176,138	5.8
Reverse Furlough Supplemental	8,059	2,151	0	0	5,908	0.0
Federal Funds Adjustment	(80,225)	0	0	0	(80,225)	(1.7)
PERA Adjustment	<u>(6,553)</u>	<u>(1,748)</u>	<u>0</u>	<u>0</u>	<u>(4,805)</u>	<u>0.0</u>

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2010-11 Recommendation Before OIT Transfer	363,939	124,691	142,232	0	97,016	4.1
OIT Consolidation	(34,062)	(6,072)	(7,988)	0	(20,002)	(0.5)
FY 2010-11 Recommendation	329,877	118,619	134,244	0	77,014	3.6
FY 2010-11 Request	410,102	118,619	134,244	0	157,239	5.3

## <u>Operating Expenses</u>. Staff recommends an appropriation for operating expenses of \$12,840, comprised of \$1,425 cash funds and \$11,415 federal funds.

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Accounting	0.1	0.3	0.3	0.3
Administrative Support Staff	0.1	0.5	0.5	0.5
Environmental Protection Specialist	0.2	0.5	0.5	0.5
Information Systems Staff	0.2	0.2	0.0	0.0
Medical Health Professional	2.0	4.0	4.0	1.0
Physical Scientist	2.4	4.0	4.0	1.0
Program Assistant	0.1	1.0	1.0	1.0
Public Health Medical Administrator	0.5	0.0	0.0	0.0
Staff / General Professional	1.0	3.0	3.0	2.0
Statistical Analyst	0.8	1.0	1.0	1.0
Technician	1.0	1.0	1.0	1.0
Total	8.4	15.5	15.3	8.3

**Staff recommends an appropriation of \$1,456,257 federal funds and 8.3 FTE for this line item.** The recommended federal funds appropriation reflects recent actual spending levels.

#### (D) Federal Grants

24-Feb-10

Staffing Summary	FY 2007-08 Actual	FY 2008-09 Approp.	FY 2009-10 Request	FY 2009-10 Recommend.
Administrative Support Staff	4.7	2.0	2.0	2.0
Budget Analyst	0.2	0.0	0.0	0.0
Environmental Protection Specialist	1.6	1.6	1.6	1.6
Information Technology	9.0	8.0	8.0	8.0
Management	1.0	1.0	1.0	1.0
Medical Health Professional	13.5	13.0	13.0	3.4
Medical Records Technicians	0.1	0.0	0.0	0.0
Nurse Consultant	0.7	1.0	1.0	1.0
Physical Scientist	0.1	0.0	0.0	0.0
Professional Engineer	0.8	1.0	1.0	1.0
Program Administrator	0.1	0.0	0.0	0.0
Public Health Medical Administrator	0.4	0.5	0.5	0.5
Statistical Analyst	1.5	1.0	1.0	1.0
Staff / General Professional	29.9	20.2	20.2	1.0
Total	63.6	49.3	49.3	20.5

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

The Staff recommends that the Long Bill reflect \$3,778,596 federal funds and 20.5 FTE for this line.

#### (10) PREVENTION SERVICES DIVISION

#### Subdivisions:

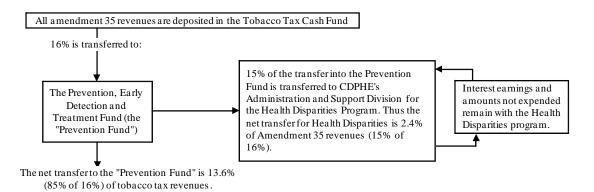
- (A) Prevention Programs
- (B) Women's Health Family Planning
- (C) Rural-Primary Care
- (D) Prevention Partnerships
- (E) Family and Community Health
- (F) Nutrition Services
- (G) Federal Grants

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

#### Amendment 35 Funding for Cancer, Cardiovascular and Pulmonary Diseases

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

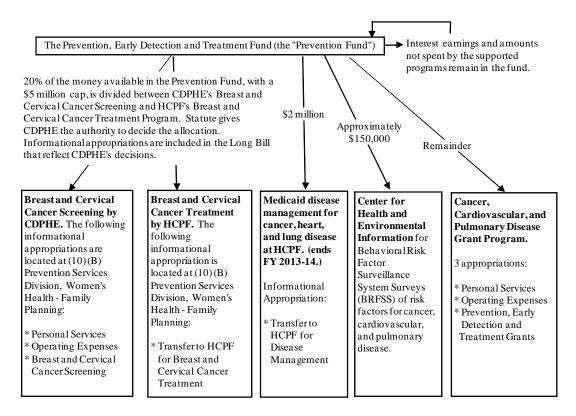
Section 24-22-117 (2) (d), which implements this portion of Amendment 35, transfers 16 percent of Amendment 35's revenues to the Prevention Early Detection and Treatment Fund (the "Prevention" fund) and then requires that 15 percent of this 16 percent be transferred to the Health Disparities Grant Program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



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

**Recommended Transfer to the Health Disparities Grant Program Fund:** Based on the December 2009 Legislative Council Staff forecast of Amendment 35 revenue, staff recommends that the Committee approve an appropriation of \$3,576,000 for the "Transfer to the Health Disparities Grant Program Fund" line item. (2.4% of projected Amendment 35 Revenue).

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



Observations on this diagram:

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

Statute is rather unclear concerning the base on which the 20 percent allocation should be calculated, in particular, it is unclear whether it should include the amount diverted to Health Disparities.

- 2. Though no appropriation is required, the Long Bill includes informational appropriations on the following lines that reflect CDPHE's allocation decisions:
  - (10) Prevention Services Division
    - (B) Women's Heath Family Planning
      - (1) Personal Services
      - (2) Operating Expenses
      - (3) Breast and Cervical Cancer Screening
      - (4) Transfer to the Department of Health Care Policy and Financing for Breast and Cervical Cancer Treatment

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

3. The allocation for Cancer, Cardiovascular, and Pulmonary Disease Grants is a residual. This program receives the moneys that are not allocated to breast and cervical cancer screening and treatment or to disease management. Applying the December 2008 Legislative Council Staff forecast of Amendment 35 revenues yields the following allocation for grants:

Item	Amount
Projected balance in the Prevention Fund (18N) at the start of FY 2010-11. (Includes estimates of FY 2009-10 revenue still to be received, lapsed spending authority from FY 2009-10, such as reversions from grantees, and the \$15.0 million transferred for FY 2009-10 Medical Services Premiums)	\$500,000
13.6% of projected Amendment 35 revenue	20,264,000
Forecast of interest earned during FY 2010-11 by the fund (zero thru FY 11-12 due to S.B. 09-270)	0
\$2 million transfer to HCPF for disease management	(2,000,000)
Transfer to the Center for Health and Environmental Information (CHEIS) for the Behavioral Risk Factor Surveillance System (BRFSS), including BRFSS POTS and Indirect Cost Assessments	(140,000)
Allocation to Breast and Cervical Cancer Screening and Treatment (20% of amount available for appropriation in the Prevention Fund, not to exceed \$5.0 million)	(5,000,000)
= Total available to the Cancer, Cardiovascular, and Pulmonary Disease Grants Program. This amount will be divided among Personal Services, Operating Expenses, and Grants	13,624,000

The appropriations associated with this table will be presented later.

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

Staff proposes to update:

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

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

#### (A) Prevention Programs

#### (1) Programs and Administration

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

**<u>Personal Services</u>**. The following table presents the distribution of FTE within Programs and Administration.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Accounting	1.0	1.0	1.0	1.0
Public Health Administrator	0.8	1.0	1.0	1.0
Administrative Support Staff	2.9	2.9	2.9	2.9
Health Professional	1.7	2.0	2.0	2.0
Management	0.5	0.5	0.5	0.5

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Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Staff / General Professional	12.5	13.4	13.4	13.4
Program Assistant	1.5	2.0	2.0	2.0
Statistical Analyst	0.5	0.9	0.9	0.9
Total	21.4	23.7	23.7	23.7

The corresponding Option 8 calculation yields the following recommendation:

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	1,590,971	118,232	670,455	0	802,284	23.7
Reverse Furlough Supplemental	27,954	(982)	3,252	0	25,684	0.0
Reverse FY 2009-10 1.82% base reduction	14,776	2,305	12,471	0	0	0.0
PERA Adjustment	(34,718)	(1,075)	(12,775)	0	(20,868)	0.0
Federal Funds Adjustment	109,341	0	0	0	109,341	(0.8)
FY 2010-11 Recommendation	1,708,324	118,480	673,403	0	916,441	22.9
FY 2010-11 Request	1,598,983	118,480	673,403	0	807,100	23.7

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

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

Operating Expenses	Total	GF	CF	RF	FF
FY 2009-10 Appropriation	783,293	0	0	118,440	664,853
Federal Funds Adjustment	283,946	0	0	0	283,946
FY 2010-11 Recommendation	1,067,239	0	0	118,440	948,799
FY 2010-11 Request	783,293	0	0	118,440	664,853

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

<u>Cancer, Cardiovascular Disease, and Pulmonary Disease Grants</u>. These grants are authorized by Section 25-20.5-304, C.R.S. The amount available for grants is the residual after subtracting the

appropriation for personal services and operating expenses, as computed in the following table. The appropriation is cash funds.

CCPD Grants Computation	CF
Total available to the Cancer, Cardiovascular, and Pulmonary Disease Grants Program (CCPD, Computed above)	\$13,624,000
<ul> <li>Personal Services appropriation for the Grants Program (CF column of above Personal Services table) plus any POTS allocated to the Personal Services Line Item</li> </ul>	(673,403)
<ul> <li>Operating Expenses appropriation for the Grants Program (CF column of above Operating Expenses table)</li> </ul>	(118,440)
- Indirect Cost Assessment	(350,000)
= Recommended Long Bill appropriation for grants	\$12,482,157

**The Governor's proposed transfer from CCPD to Medical Services Premiums.** The Governor's November 2009 budget request asks the General Assembly to appropriate the following amounts from Amendment 35 programs to support Medical Services Premiums:

<b>Requested Reductions of Allocations to Amendment 35 Programs</b>				
Grant Program	Amount			
STEPP	(\$15,521,625)			
CCPD	(5,679,358)			
Health Disparities	(4,490,435)			
Total	(\$25,691,418)			

These adjustments would be included in the Amendment 35 transfer bill that was described earlier and would only take effect if Senate Joint Resolution 10-010 becomes law and declares a fiscal emergency for FY 2010-11. The transfer bill's appropriation clause would reduce the appropriation for CCPD grants by \$5,679,358 and appropriate the savings to HCPF for Medical Services Premiums, thus freeing an equal amount of General Fund.

**Proposed reductions for the Amendment 35 Transfer Bill:** As with the other Amendment 35 grant programs, JBC staff believes that CCPD program grantees should not bear the sole burden of Amendment 35 reductions. However, because grant funding will be fully restored as soon as the General Assembly stops declaring annual fiscal emergencies, CCPD staff should not be reduced excessively. JBC staff estimates that CCPD grants will be reduced 61% next year relative to grant levels in recent years. For this reason JBC Staff recommends that the transfer bill reduce the CCPD personal services appropriation by 2.0 FTE and \$150,000 cash funds and reduce the CCPD operating

expenses appropriation by \$35,000. To reassure stakeholders, staff recommends that the bill contain a legislative declaration stating that the reductions are temporary.

**Five percent administrative expense limitation:** Section 25-20.5-306, C.R.S., states that up to 5 percent of the moneys annually appropriated to the Prevention Services Division from the Prevention, Early Detection, and Treatment Fund may be used for administrative expenses. Since Personal Services plus Operating Expenses equal \$791,843, the program is comfortably within this limitation.

<u>Transfer to the Health Disparities Cash Fund</u>. As discussed earlier, Section 24-22-117 (d) (III) requires that 15 percent of the 16 percent of Amendment 35 revenues transferred to the Prevention Fund be transferred to the Health Disparities Grant Program Fund. **Staff recommends a \$3,576,000 cash funds appropriation.** 

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

Short Term Innovative Health Program Grants. Section 25-36-101, C.R.S., gives the Department the authority to make short term grants for innovative health programs ("Innovative" grants). These grants, which may be of no more than one fiscal year in duration, fund innovative health programs that are designed to improve the health of Coloradans. The Short-term Innovative Health Program Grant Fund (the "Innovative" Fund), which supports this program, receives 4 percent of Tier 2 tobacco settlement revenues plus the reversions and income of most other Tier 2 tobacco settlement programs. In addition, Section 22-24-115 (1) (b) requires that all unexpended and unencumbered moneys in the Tobacco Litigation Settlement Cash Fund, which is the main tobacco cash fund, be transferred to the Innovative Fund at the end of each year.

This program was established by S.B. 07-97, but was slow getting started. It did not hire the 1.0 FTE envisioned in the S.B. 07-97 fiscal note and it made few grants.

During the 2007 session the Innovative Fund served as a source of funding for several bills that contained appropriations either directly or indirectly from the Short Term Innovative Health Program Grant Fund. The two following bills continue to draw upon this fund source.

2007 Session Bills with Appropriations Either Directly or Indirectly from the Short-term Innovative Health Programs Grant Fund in FY 2010-11 and 2011-12					
Bill #	Short Title	FY 2010-11	FY 2011-12		
H.B. 07-1057	Juvenile Justice Family Advocate Program	\$221,717	\$0		
S.B. 07-232	Health Professional Loan Repayment Program	60,000	60,000		
	Total taken from Innovative Fund\$281,717\$60,000				

The potential appropriation for Innovative Grants can then be computed as follows:

Item	Amount
FY 2010-11 tobacco settlement revenue allocation	1,959,733
+ Fund balance carried forward into FY 2009-10	0
+ Reversions and income of most other Tier 2 settlement programs and sweep unexpended moneys in the Tobacco Litigation Settlement Cash Fund (conservatively forecast = 0)	0
- FY 2010-11 obligations of Innovative Fund resulting from 2007 session bills	(281,717)
= Potential FY 2009-10 Appropriation for Innovative Grants	1,678,016

The Committee has introduced H.B. 10-1323, which includes a provision that will transfer to the General Fund for FY 2010-11 the entire balance of the Innovative Fund after all of its obligations have been met. If there are no appropriations from this fund, the preceding table indicates that 1,678,016 would be transferred to the General Fund.

## The Department requests and staff recommends that there be no appropriations for the Innovative Grants Program for FY 2010-11 in order to maximize the amount that will be transferred to the General Fund by H.B. 10-1323.

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

#### (2) Cancer Registry

This line item supports a statewide central cancer registry, which provides population-based data on cancer treatment, incidence, death, and survival. Currently, there are 18,000 new cancer patients every year in Colorado. The Department continues to receive a federal grant from the National Program for Cancer Registries, to be used specifically to enhance and improve the quality of statewide cancer data, increase the timeliness of reporting and processing of cancer-related data, and

to encourage the use of data by researchers in reporting cancer incidence rates and trends to the public. The General Fund in this line item is used to meet the maintenance of effort requirement that enables the program to qualify for the federal grants.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Staff / General Professional	9.2	9.0	9.0	9.0
Statistical Analyst	1.0	1.0	1.0	1.0
Total	10.2	10.0	10.0	10.0

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

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	654,963	189,351	0	0	465,612	10.0
Reverse Furlough Supplemental	21,524	5,526	0	0	15,998	0.0
PERA Adjustment	(17,488)	(4,490)	0	0	(12,998)	0.0
Federal Funds Adjustment	124,706	0	0	0	124,706	0.2
FY 2010-11 Recommendation	783,705	190,387	0	0	593,318	10.0
FY 2010-11 Request	658,999	190,387	0	0	468,612	10.0

## <u>Operating Expenses</u>. Staff recommends an appropriation of \$90,557, comprised of \$30,552 General Fund and \$60,005 federal funds.

#### (3) Chronic Disease and Cancer Prevention Grants

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

Staffing levels are shown in the following table.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Accounting	0.1	0.1	0.1	0.1
Public Health Administrator	0.3	0.3	0.3	0.3
Administrative Support Staff	2.3	2.3	2.3	2.3
Health Professional	3.2	3.2	3.2	3.2
Management	0.5	0.5	0.5	0.5
Staff / General Professional	18.2	15.0	15.0	16.7
Statistical Analyst	2.4	2.4	2.4	2.4
Total	27.0	23.8	23.8	25.5

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	5,602,447	0	0	0	5,602,447	23.8
Reverse Furlough Supplemental	40,705	0	0	0	40,705	0.0
PERA Adjustment	(33,073)	0	0	0	(33,073)	0.0
Federal Funds Adjustment	(1,231,902)	0	0	0	(1,231,902)	1.7
FY 2010-11 Recommendation	4,378,177	0	0	0	4,378,177	25.5
FY 2010-11 Request	5,610,079	0	0	0	5,610,079	23.8

#### (4) Suicide Prevention

Colorado has one of the highest per capita suicide rates in the nation, ranking sixth in 2005, behind five other western states, with a suicide rate almost three times higher than the rates in New York and New Jersey, the two lowest states. House Bill 00-1432 created a suicide prevention program within the Department, which has worked cooperatively with other groups, such as the Suicide Prevention Coalition of Colorado, to implement awareness campaigns and otherwise combat suicide. There are three main components to the program: a statewide public information campaign, training on the recognition and response to suicide, and development of local suicide prevention and education services.

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Staff / General Professional	2.0	2.0	2.0	2.0
Total	2.0	2.0	2.0	2.0

The corresponding Option 8 calculation is as follows.

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	285,064	285,064	0	0	0	2.0
Reverse Furlough Supplemental	2,813	2,813	0	0	0	0.0
PERA Adjustment	(2,286)	(2,286)	0	0	0	0.0
FY 2009-10 Recommendation	285,591	285,591	0	0	0	2.0
FY 2009-10 Request	285,591	285,591	0	0	0	2.0

#### (5) Tobacco Education, Prevention, and Cessation

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

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

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

**Credit:** An amount equal to the interest earned on this fund may be used to reimburse tobacco wholesalers and distributors for tobacco tax they pay on bad-debt sales, i.e. on credit sales which they must write off because the buyer never pays. However, the

Department of Revenue is not using this provision; it is giving credit in another fashion.

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

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

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

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

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Administrative Support Staff	1.2	1.2	1.2	1.2
Management	0.2	0.2	0.2	0.2
Statistical Analyst	0.4	1.0	1.0	1.0
Staff / General Professional	7.6	7.6	7.6	7.6
Total	9.4	10.0	10.0	10.0

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	734,900	0	734,900	0	0	10.0
Reverse Furlough Supplemental	16,373	0	16,373	0	0	0.0
PERA Adjustment	(13,303)	0	(13,303)	0	0	0.0
FY 2010-11 Recommendation for the Long Bill	737,970	0	737,970	0	0	10.0
FY 2010-11 Request	737,970	0	737,970	0	0	10.0

<u>Operating Expenses</u>. The Department requests and staff recommends a continuation appropriation of \$175,000 cash funds for this line item in the Long Bill.

**The Governor's proposed transfer from STEPP to Medical Services Premiums.** The Governor's November 2009 budget request asks the General Assembly to appropriate the following amounts from Amendment 35 programs to support Medical Services Premiums:

Grant Program	Amount
STEPP	(\$15,521,625)
CCPD	(5,679,358)
Health Disparities	(4,490,435)
Total	(\$25,691,418)

**Requested Reductions of Allocations to Amendment 35 Programs** 

These adjustments would be included in the Amendment 35 transfer bill that was described earlier and would only take effect if Senate Joint Resolution 10-010 becomes law and declares a fiscal emergency for FY 2010-11. The transfer bill's appropriation clause would reduce the appropriation for STEPP grants by \$15,521,625 and appropriate the savings to HCPF for Medical Services Premiums, thus freeing an equal amount of General Fund.

**Proposed reductions for the Amendment 35 Transfer Bill:** As with the other Amendment 35 grant programs, JBC staff believes that STEPP program grantees should not bear the sole burden of Amendment 35 reductions. However, because grant funding will be fully restored as soon as the General Assembly stops declaring annual fiscal emergencies, STEPP staff should not be reduced excessively. JBC staff estimates that STEPP grants will be reduced 68% next year relative to grant levels in recent years. For this reason JBC Staff recommends that the transfer bill reduce the STEPP personal services appropriation by 2.0 FTE and \$150,000 cash funds and reduce the STEEP operating expenses appropriation by \$35,000. To reassure stakeholders, staff again recommends that the bill contain a legislative declaration stating that the reductions are temporary.

**Tobacco Education, Prevention, and Cessation Grants.** This line item is the heart of the STEPP program; it provides grants to governmental and non-governmental organizations to promote smoking cessation and prevention. Section 25-3.5-805, C.R.S. requires that at least 15 percent of these grants be for the reduction of health disparities among minority and high risk populations and up to 15 percent of the grants go to Tony Grampsas Youth Services Program grantees. The health disparities and Tony Grampsas grants, like all of the other Tobacco Cessation and Prevention grants are made by the Tobacco Education, Prevention, and Cessation Review Committee, not by the Tony Grampsas program or by the Health Disparities program.

Section 24-22-117 (1) (c) requires that the General Assembly appropriate all of the moneys in the Tobacco Education Programs Fund each year. This means that all the Tobacco Education Programs Fund moneys not appropriated for personal services or operating expenses, or appropriated to the Department of Revenue, must be appropriated for grants. Thus one must forecast (1) the balance that will exist in the fund at the beginning of the next fiscal year, (2) the revenue that the fund will receive during the next fiscal year, including interest earnings, (3) the amount that will be appropriated to the Department of Revenue, and (4) the amount that will be appropriated for operating expenses and personal services in the Tobacco Education, Prevention, and Cessation program. As a practical matter, these forecasts will invariably prove inaccurate, and the amount appropriated will not exactly equal the amount available. (One might think that at least elements (3) and (4) of this calculation could be forecast exactly, but the potted central appropriations in the Executive Director's Offices of the Department of Revenue and in the Administration Division of CDPHE draw from the Tobacco Education Programs Fund, and these amounts are difficult to forecast exactly. For practical reasons, these central appropriations are assumed to be zero in the computations below. And, in passing, one might note that this problem applies to many other tobacco-settlement and Amendment 35 appropriations in the Department.) Applied to FY 2009-10, this yields the following:

Tobacco Cessation and Prevention Grants	CF
Projected balance in the Tobacco Education and Prevention Fund (18M) at start of FY 2010-11. (Includes estimates of FY 2009-10 revenue still to be received, lapsed spending authority from FY 2009-10, such as reversions from grantees, and the \$15.0 million transferred for FY 2009-10 Medical Services Premiums)	0
Forecast of Amendment 35 tobacco tax revenue that the Tobacco Education and Prevention Fund will receive during FY 2010-11 (based on the December 2009 Legislative Council Staff Revenue forecast)	23,840,000
Forecast of interest earned during FY 2010-11 by the fund (zero thru FY 11-12 due to S.B. 09-270)	0
Appropriation to Department of Revenue's Enforcement Business Group to enforce tobacco-sales-to-minors laws.*	(350,000)
Personal Services appropriation, computed above	(737,970)
Operating Expenses appropriation, computed above	(175,000)
Allocation of POTS to the STEPP Personal Services Line Item (based on recent actuals)	20,000
Indirect Cost Assessment	(62,594)
Transfer to the Center for Health and Environmental Information (CHEIS) for the Behavioral Risk Factor Surveillance System (BRFSS), including BRFSS POTS and Indirect Cost Assessments	140,000
= Recommended FY 2010-11 Long Bill appropriation for Tobacco Cessation and Prevention Grants	22,674,436
Proposed FY 2010-11 reduction to support Medical Services Premiums	(15,521,625)
Additional revenues available due to reduced Personal Services and Operating Appropriations	185,000
= Recommended appropriation for the Amendment 35 transfer bill	\$7,337,811

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

The Department's budget submission indicates that it plans to make \$8 million of grants in FY 2010-11. Based on the above calculation, staff believes that there is a significant chance that \$8 million of revenue will not be available for grants, however, staff recommends an \$8 million grant appropriation for the transfer bill in case Amendment 35 revenues are greater than expected.

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

**Five percent administrative expense limit:** Section 25-3.5-808, C.R.S., states that up to 5 percent of the moneys annually appropriated from the Tobacco Education Programs Fund (which would include appropriations for Medical Services Premiums) may be utilized for administrative expenses of the Tobacco Education, Prevention, and Cessation Program. The program is comfortably within this limitation.

# (B) Women's Health - Family Planning

This line funds family planning services to clients who are at or below 185 percent of the federal poverty level. The program is funded through General Fund and federal Title X funds for contracts with local family planning providers. Some of the services provided include breast and cervical cancer screening, physical exams, sexually transmitted disease screening, contraceptive counseling and supplies, and education. Title X is not an entitlement program, and has no associated match or maintenance of effort requirements.

Often, local health facilities and non-profit clinics serve as the primary health care facility for low income women who are not Medicaid-eligible. The program serves approximately 55,000 clients per year, primarily women and teens. Neither Title X nor General Fund dollars support abortion activities, per federal Title X requirements and per state statute.

This line item also includes several smaller programs to provide health services and education to women, including the Prenatal Plus program, which the Department manages for HCPF.

The passage of Amendment 35 substantially boosted the breast and cervical cancer screening program. Prior to Amendment 35, the Department spent about \$4.1 million of federal funds on screening. Amendment 35 moneys, as directed by H.B. 05-1262, almost doubled that amount.

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Administrative Support Staff	2.5	2.5	2.5	2.5
Health Professional	3.1	4.9	3.9	3.9
Information Systems Staff	1.6	1.6	0.0	0.0
Management	0.3	0.3	0.3	0.3
Staff / General Professional	8.1	9.0	10.0	8.2
Statistical Analyst	0.3	1.0	1.0	1.0
Total	15.9	19.3	17.7	15.9

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

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	1,277,681	442,484	124,041	59,169	651,987	19.3
Reverse Furlough Supplemental	34,396	12,299	3,454	0	18,643	0.0
Federal Funds Adjustment	169,473	0	0	0	169,473	(1.8)
PERA Adjustment	(25,140)	<u>(9,993)</u>	<u>0</u>	<u>0</u>	(15,147)	<u>0.0</u>
FY 2010-11 Recommendation Before OIT Transfer	1,456,410	444,790	127,495	59,169	824,956	17.5
OIT Consolidation	(143,830)	(52,095)	0	0	(91,735)	(1.6)
FY 2010-11 Recommendation	1,312,580	392,695	127,495	59,169	733,221	15.9
FY 2010-11 Request	1,143,107	392,695	127,495	59,169	563,748	17.7

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

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

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

**Purchase of Services. Staff recommends an appropriation of \$4,579,716, comprised of \$1,229,003 General Fund, \$25,505 reappropriated funds and \$3,325,208 federal funds.** The General Fund and reappropriated funds portion of this recommendation are continuation amounts. The federal funds portion of the recommendation has been adjusted to reflect recent federal grant receipts. The Reappropriated Funds are Medicaid cash funds transferred from the Department of Health Care Policy and Financing where they are appropriated on the Enhanced Prenatal Care Training and Technical Assistance line item in the Other Medical Services Division.

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

<u>Breast and Cervical Cancer Screening</u>. Staff recommends an informational appropriation for this line of \$6,348,091, comprised of \$3,661,660 cash funds and \$2,686,431 federal funds.

Adult Stem Cells Cure Fund. Staff recommends an appropriation of \$140,000 cash funds. House Bill 08-1372 (Adult Stem Cell Donation Awareness) created a new voluntary income tax checkoff as a funding mechanism for the Adult Stem Cells Cure Fund, which provides money for advancing umbilical cord blood collection for public blood banks. (Note that adult stem cells are obtained from tissues that have already undergone some degree of development, thus stem cells obtained from umbilical cord blood are classified as "adult" stem cells even though they are associated with newborns.) Donated stem cells are used for treatment of diseases such as leukemia and lymphoma, and for research into cures for other serious illnesses. The tax checkoff was added to the state income tax form for tax years 2008 through 2010. At least 70 percent of moneys in the Adult Stem Cells Cure Fund must be used to advance cord blood collection, up to 25 percent can be used for public awareness activities, and 5 percent for administrative costs. The Department will pursue these legislative objectives by contracting with entities that are already involved in umbilical cord blood donation activities. A Long Bill appropriation is consistent with the intent of the legislation.

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Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 2010-11 Request	FY 10-11 Recommend.
Health Professional	1.7	1.0	1.0	1.0
Information Systems Professional	0.3	0.2	0.0	0.0
Staff / General Professional	2.0	1.8	1.8	2.8
Total	4.0	3.0	2.8	3.8

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

The staff recommends an appropriation of \$332,037 federal funds and 3.8 FTE for this line item.

**Abortion Footnote. Staff recommends that the following footnote,** which appeared in the FY 2008-09 Long Bill, **be continued:** 

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

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

# (C) Rural-Primary Care

**Dental Programs.** This office focuses on increasing availability of oral health services. This office operates the Dental Loan Repayment Program, which is available to dentists and dental hygienists who agree to serve medically under served populations in rural or urban settings. Dentists are eligible for up to \$25,000 and dental hygienists are eligible for up to \$6,000. The Repayment Program is supported with an annual appropriation of \$200,000 from the state's Tobacco Settlement receipts. This office also monitors dental-related information such as: percentage of third-grade children with sealants (35 percent); number of participants in the dental loan repayment program (14); proportion of residents with access to fluoridated drinking water (75.4 percent); number of Old Age Pension

seniors receiving dental care and the number of homebound elderly served through the State dentist house call program (705).

The office utilizes volunteer dentists to provide services to homebound elderly and handicapped, and contracts with Area Agencies on Aging to provide dental services to Old Age Pension recipients. The office's staff are responsible for collection and analysis of dental health data and the monitoring and coordination of dental care. The funding source is a combination of General Fund, tobacco-settlement money, and federal funds.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Administrative Support Staff	0.3	0.3	0.3	0.3
Health Professional	1.4	1.0	1.0	1.0
Management	0.1	0.1	0.1	0.1
Staff / General Professional	1.9	1.6	1.6	2.3
Total	3.7	3.0	3.0	3.7

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

**The Department's Proposed Supplemental Reductions:** During supplementals, the Department requested the elimination of \$520,131 of FY 2009-10 General Fund appropriations for this line item. These appropriations fund the OAP Dental Assistance Program for Seniors and the "Dental Housecalls" program run by the Colorado Foundation of Dentistry for the Handicapped. (Despite its name, the Housecalls program mostly provides dental services in nursing homes.) During the Staff supplemental presentation, staff recommended that the Committee fund the Housecalls program but not the OAP dental program because the Housecalls program serves seniors at about a quarter of the cost of the OAP program. The JBC decided to continue funding both of these programs for FY 2009-10.

The Department's budget submission for FY 2010-11 again requests the elimination of these programs and Staff again recommends that the Committee fund the Housecalls program but not the OAP Dental Program. Staff considers Housecalls to be an excellent example of a public-private partnership that should be preserved.

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

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	1,104,765	577,668	199,591	0	327,506	3.0
Reverse Furlough Supplemental	12,574	1,688	409	0	10,477	0.0
PERA Adjustment	(10,217)	(1,371)	(333)	0	(8,513)	0.0
Federal Funds Adjustment	127,883	0	0	0	127,883	0.7
Eliminate the OAP Dental Program but not the Housecalls Program	(397,531)	(397,531)	0	0	0	0.0
FY 2009-10 Recommendation	837,474	180,454	199,667	0	457,353	3.7
FY 2009-10 Request	586,991	57,854	199,667	0	329,470	3.0

If the Committee wishes to retain the OAP dental program, the General Fund appropriation would be \$397,531 higher.

**Primary Care Office.** This is a new line item that was created by HB09-1111, Health Resources for Underserved Areas. The following table shows staffing

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Health Professional	0.0	1.5	1.5	1.5
Total	0.0	1.5	1.5	1.5

Staff recommends a continuation appropriation of \$133,647 and 1.5 FTE for this line item, comprised of \$53,647 cash funds and \$80,000 federal funds less a PERA reduction of unknown amount. Staff requests permission to work with the Department to calculate this reduction.

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Administrative Support Staff	0.2	0.2	0.2	0.2
Health Professional	0.1	0.4	0.4	0.4
Staff / General Professional	0.9	0.9	0.9	0.6
Total	1.2	1.5	1.5	1.2

#### Staff recommends that this line item reflect \$252,386 of federal funds and 1.2 FTE.

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# **(D) Prevention Partnerships**

# (1) Interagency Prevention Programs Coordination

These lines provide support and coordination services for youth prevention programs across state government, as well as CDPHE's own prevention programs. The Interagency Prevention Systems Program implements Sections 25-20.5-101 through 109, C.R.S. It handles the coordination of prevention, intervention and treatment services for children and youth for programs that are located in five state agencies. Statute directs the Division to: (a) develop a state plan for delivery of prevention, intervention and treatment services to children and youth throughout the state, (b) identify performance indicators for prevention, intervention, and treatment programs, (c) act as a liaison with communities throughout the state, assisting them in their efforts to assess their needs and to secure funding and provide technical assistance in the implementation of appropriate prevention, intervention and treatment programs, (d) operate prevention and intervention programs for children and youth, (e) review federal funding guidelines and seeking waivers to promote the greatest flexibility in awarding combined program funding to community-based prevention, intervention and treatment programs, (f) develop a website with information on existing programs and potential funding sources, (g) develop uniform minimum standards for the operations of prevention/intervention programs and (i) conduct an annual review of programs.

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

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

Staffing Summary	FY 08-09 Actual			FY 10-11 Request				FY 1( Recom	
Staff / General Professional	2.8	2.0		2.0		2.0			
Total	2.8	2.0		2.0		2.0 2.0			
Personal Services		Total	GF	CF	RF	FF	FTE		
FY 2009-10 Appropriation		114,914	114,914	0	0	0	2.0		

Personal Services	Total	GF	CF	RF	FF	FTE
Reverse Furlough Supplemental	3,984	3,984	0	0	0	0.0
PERA Adjustment	(3,237)	(3,237)	0	0	0	0.0
FY 2009-10 Recommendation	115,661	115,661	0	0	0	2.0
FY 2009-10 Request	115,661	115,661	0	0	0	2.0

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

# (2) Tony Grampsas Youth Services Program

**Prevention Services Programs.** The Tony Grampsas Youth Services Program awards grants to community-based programs that target youth for intervention services in an effort to reduce incidents of youth crime and violence. It is supported by a 4 percent share of tobacco settlement payments up to a maximum of \$5 million.

The following tables presents program staffing.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Staff / General Professional	2.8	3.0	3.0	3.0
Total	2.8	3.0	3.0	3.0

Based on the January 2010 Legislative Council Staff forecast of tobacco settlement revenue, **Staff recommends an appropriation of \$3,841,275 cash funds and 3.0 FTE.** 

<u>Colorado Student Before-and-After-School Project</u>. Appropriations for this program were eliminated during last year's budget cycle.

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

57. Department of Public Health and Environment, Prevention Services Division, Prevention Partnerships, Tony Grampsas Youth Services Program, Prevention Services Programs --The Department is requested to submit a report to the Joint Budget Committee on the Tony Grampsas Youth Services Program by December 1, 2009 December 1, 2010. This report should include the following information for Fiscal Year 2008-09: 2009-10: (1) Names of all applicants

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

The Tony Grampsas Youth Services program is a continuing source of interest to the General Assembly and this report provides valuable information on program operations. However, it is difficult for the Department to submit the requested report by October 20th. In the past, the Department has requested that the report be submitted by January, which would mean that that it would arrive too late for briefing. December 1st is a compromise. Staff also believes that program evaluation reports are of sufficient interest to warrant their submission but requests the "most recently available report" because the FY 2009-10 report may not be ready.

# (3) Colorado Children's Trust Fund

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Staff / General Professional	1.6	1.5	1.5	1.5
Total	1.6	1.5	1.5	1.5

**Personal Services.** The following table summarizes staffing levels for this program.

Staff recommends an appropriation of \$176,586 and 1.5 FTE, comprised of \$76,315 cash funds and \$100,271 federal funds for this line item.

**Operating Expenses.** Staff recommends an appropriation of \$1,106,734, comprised of \$395,137 cash funds and \$711,597 federal funds for this line item.

# (E) Family and Community Health

# (1) Maternal and Child Health.

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Management	1.0	1.0	1.0	1.0
Nurse Consultant	1.8	3.9	3.9	3.9
Health Professional	0.1	0.1	0.1	0.1
Staff / General Professional	6.9	8.0	8.0	4.8
Total	9.8	13.0	13.0	9.8

The following table summarizes staffing levels.

Staff recommends that the Long Bill reflect \$3,312,106 federal funds and 9.8 FTE for this program. This total reflects actual past funding levels for the line item.

# (2) Child, Adolescent, and School Health

This program focuses on the prevention of child and adolescent health problems. Funding sources include tobacco settlement money, Medicaid, and a variety of federal funds.

**Nurse Home Visitor Program.** The goal of the program is to provide educational, health and other resources for new mothers during pregnancy and the first years of their infants' lives. The program offers home visits by trained nurses to first-time mothers with incomes at or below 200 percent of the federal poverty level. The services are offered from pregnancy through the child's second birthday. Staffing levels for the program are summarized below. The program is financed with tobacco settlement revenue.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Staff / General Professional	3.2	3.5	4.0	4.0
Total	3.2	3.5	4.0	4.0

Based on the January 2009 Legislative Council Staff forecast for tobacco revenue, staff recommends an appropriation of 13,444,464.

**Medicaid Matching Funds:** The Nurse Home Visitor program also draws matching federal funds, but those matching funds do not appear in CDPHE's budget; a portion of the Nurse Home Visitor appropriation in CDPHE's budget is transferred to the Other Medical Services Division in HCPF's portion of the Long Bill, where HCPF applies for the match. Payments work as follows: when a Nurse Home Visitor contractor provides services to non-Medicaid-eligible clients, the contractor bills CDPHE. When a contractor provides services to Medicaid-eligible clients, it bills HCPF. HCPF then asks CDPHE to transfer the money to HCPF and HCPF applies for the federal match. HCPF's appropriation of Nurse-Home-Visitor funds transferred from CDPHE has equaled \$1,505,000 in recent years, which by design exceeds the transfers that HCPF has needed in order to pay contractors.

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Staff / General Professional	0.6	0.7	0.7	0.7
Total	0.6	0.7	0.7	0.7

The following table reports the program's staffing:

Staff recommends that the Committee approve the Department's request for \$998,779 of General Fund and 0.7 FTE for this line item, a continuation level of funding.

**Federal Grants.** This line reflects federal grants that do not fit elsewhere within the division's budget. Among the larger current grants are \$700,000 for an Abstinence Education Project and \$132,000 for Early Childhood Development. Staffing levels for these federal grants are summarized in the table below.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Nurse Consultant	0.2	0.2	0.2	0.2
Staff / General Professional	2.9	1.9	2.9	2.9
Statistical Analyst	0.1	0.1	0.1	0.1
Total	3.2	2.2	3.2	3.2

# Staff recommends that the Committee approve an appropriation of \$294,413 federal funds and 3.2 FTE for this line item.

# (3) Children with Special Needs(a) Health Care Program for Children with Special Needs

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Accounting	0.4	0.4	0.4	0.4
Administrative Support Staff	1.8	1.8	1.8	1.8
Health Professional	1.3	1.3	1.3	1.3
Information Systems Staff	0.6	0.6	0.0	0.0
Nurse Consultant	2.0	3.2	3.2	3.2
Staff / General Professional	7.1	10.2	10.2	9.2
Total	13.2	17.5	16.9	15.9

<u>**Personal Services.</u>** The following tables show the distribution of FTE and staff's Option 8 calculations.</u>

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2008-09 Appropriation	1,318,600	675,504	0	0	643,096	17.5
Reverse Furlough Supplemental	26,214	7,695	0	0	18,519	0.0
PERA Adjustment	(21,298)	(6,252)	0	0	(15,046)	0.0
Federal Funds Adjustment	(90,017)	0	0	0	(90,017)	(1.0)
FY 2010-11 Recommendation Before OIT Transfer	1,233,499	676,947	0	0	556,552	16.5

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Personal Services	Total	GF	CF	RF	FF	FTE
OIT Consolidation	(55,621)	(48,761)	0	0	(6,860)	(0.6)
FY 2009-10 Recommendation	1,177,878	628,186	0	0	549,692	15.9
FY 2009-10 Request	1,267,895	628,186	0	0	639,709	16.9

<u>Operating Expenses</u>. The Department requests that the appropriation for this line item be reduced by \$28,638 for FY 2010-11 and FY 1011-12. Staff recommends that the Committee approve the Department's request and appropriate \$71,939, comprised of \$58,939 General Fund and \$13,000 federal funds for this line item.

<u>Purchase of Services</u>. This line item provides funding to the 17 local health departments and 38 county nursing services that provide care coordination, referral and family support services statewide for children with special needs. **Staff recommends an appropriation of \$3,451,160, comprised of \$1,856,473 General Fund, \$40,874 cash funds and \$1,553,813 federal funds**.

**Traumatic Brain Injury Services.** The Health Care Program for Children with Special Needs indirectly contracts with the Department of Human Services to administer case management care coordination services for children eligible for benefits created by H.B. 02-1281, the Colorado Traumatic Brain Injury Program. The agreement allows the Program's statewide network of 17 local health departments and 38 county nursing services and 14 regional offices, which already have expertise providing case management services for children with special health care needs, to serve children in the traumatic brain injury program as well.

Each of the program's 14 regional offices has a multi-disciplinary team specializing in care coordination and family-centered services. The program also holds pediatric specialty clinics throughout rural areas of the state staffed by some of the state's leading pediatric providers. The regional offices work closely with the county nursing services in their areas to serve children in even the most remote geographic areas of Colorado.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Staff / General Professional	0.0	1.0	1.0	1.0
Total	0.0	1.0	1.0	1.0

**Staff recommends approval of the Department's request for \$187,782 of reappropriated funds and 1.0 FTE for this line.** The money is a transfer from the Department of Human Services.

# (b) Genetics Counseling

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

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Staff / General Professional	0.9	1.0	1.0	1.0
Total	0.9	1.0	1.0	1.0

Staff recommends approval of an appropriation of \$78,974 cash funds and 1.0 FTE for this line item.

<u>Operating Expenses</u>. Staff recommends approval of an appropriation of \$1,501,817 cash funds for this line item.

# (4) Department of Human Services Grant

This program is federally funded through a transfer from the Department of Human Services. The funds come to the Department of Public Health and Environment as reappropriated funds. This federal project provides a part-time project coordinator to oversee and monitor multi-disciplinary and medical clinics designed to diagnose and evaluate children with possible developmental delays. Diagnosis is needed to develop appropriate intervention and treatment plans. Staffing is shown in the following table:

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Nurse Consultant	0.2	0.2	0.2	0.2
Total	0.2	0.2	0.2	0.2

**Staff recommends an appropriation of \$29,790 reappropriated funds and 0.2 FTE for this program.** The funding source is a transfer from the Department of Human Services.

# (5) Federal Grants

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Information Systems Staff	1.2	1.2	0.0	0.0
Staff / General Professional	1.2	3.4	3.4	3.4
Total	2.4	4.6	3.4	3.4

# Staff recommends that the Committee approve an appropriation of \$424,871 federal funds and 1.2 FTE for this line item.

# (F) Nutrition Services

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

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Accounting	0.2	0.2	0.2	0.2
Health Professional	5.7	5.7	5.7	5.7
Information Systems Staff	4.6	5.0	0.0	0.0
Management	0.1	0.1	0.1	0.1
Staff / General Professional	12.2	10.3	10.3	11.8
Total	22.8	21.3	16.3	17.8

# Staff recommends that the Long Bill reflect a projection of \$111,913,876 federal funds and 17.8 FTE for this program.

<u>Child and Adult Food Care Program</u>. The Child and Adult Food Care Program is a federally funded program that provides reimbursement for nutritious foods to participating child care centers,

Head Start programs, family day care homes, and adult day care centers. Monitoring, technical assistance, and training is also provided. The program serves approximately 42,500 children and adults annually in 515 child care centers and 4,700 family day care homes.

Staffing Summary	FY 2008-09 Actual	FY 2009-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Administrative Support Staff	0.1	0.1	0.1	0.1
Accounting	0.8	1.0	1.0	1.0
Health Professional	3.7	5.0	5.0	5.0
Information Systems Staff	0.1	0.0	0.0	0.0
Staff / General Professional	3.0	6.7	1.6	1.6
Total	7.7	12.8	7.7	7.7

Past staffing patterns for this program are shown in the table below.

# Staff recommends an appropriation of \$22,580,394 federal funds and 7.7 FTE.

Staffing Summary	FY 2008-09 Actual	FY 2009-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Staff / General Professional	2.4	4.2	4.2	4.2
Management	0.1	0.1	0.1	0.1
Statistical Analyst	0.2	1.0	1.0	1.0
Total	2.7	5.3	5.3	5.3

# (G) Federal Grants.

This line reflects federal grants that do not fit elsewhere within the division's budget. Among the larger current grants are \$320,000 for Maternal and Child Health Asthma Surveillance and Education and \$255,000 for Rape Prevention and Education. Staffing levels for these grants are summarized below.

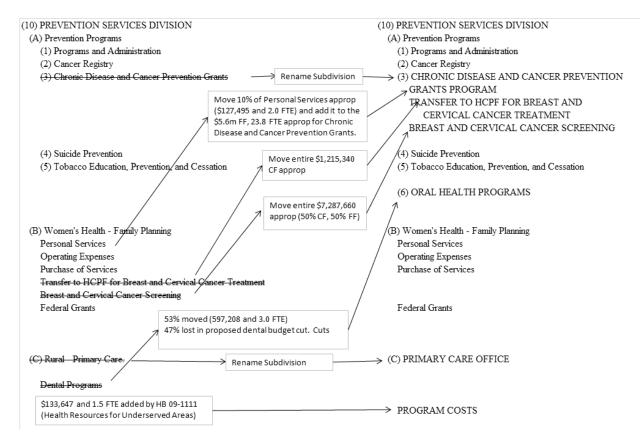
Staffing Summary	FY 2008-09 Actual	FY 2009-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Staff / General Professional	2.4	4.2	4.2	4.2
Management	0.1	0.1	0.1	0.1

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Staffing Summary	FY 2008-09 Actual	FY 2009-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Statistical Analyst	0.2	1.0	1.0	1.0
Total	2.7	5.3	5.3	5.3

#### Staff recommends this line item reflect \$423,804 of federal funds and 2.7 FTE.

**Proposed Long Bill Reorganization:** The Department requests that the presentation of the Prevention Services Division in the Long Bill be reorganized as shown in the following diagram. The diagram omits many subdivisions that are not affected by the proposal. The Department states that its objective is to make the Long Bill more closely reflect the actual structure of the Department. **Staff recommends that the Committee approve this change.** Since no line items are being combined, there is no loss of control or transparency. Staff also believes that changes that make the Long Bill more closely resemble the actual structure of the Department are beneficial. If the Committee approves this change, staff will rearrange the appropriations that were approved earlier into the structure shown in the right hand column of this diagram.



# (11) HEALTH FACILITIES AND EMERGENCY SERVICES DIVISION

Subdivisions:

#### (A) Licensure

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

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

#### (A) Licensure

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

The following table summarizes staffing levels for Health Facilities General Licensure Program.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Accounting	0.1	0.5	0.5	0.5
Administrative Support Staff	2.9	4.0	4.0	4.0
Budget Analyst	0.2	0.2	0.2	0.2
Health Professional	2.1	6.9	8.0	8.0
Inspector	1.0	16.0	23.5	23.5
Information Technology	0.7	0.7	0.0	0.0
Management	0.5	0.5	0.5	0.5
Program Assistant	0.2	1.0	2.0	2.0
Public Health Administrator	0.1	0.1	0.1	0.1
Staff / General Professional	3.1	5.0	6.0	6.0
Total	10.9	34.9	44.8	44.8

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	2,374,182	157,747	2,216,435	0	0	34.9
Reverse 1.82% base reduction	32,325	2,840	29,485	0	0	0.0
Reverse Furlough Supplemental	(11,933)	(570)	(11,363)	0	0	0.0
3rd year impact of S.B. 08-153, License Home Health Care	31,387	0	31,387	0	0	1.0
2 <sup>nd</sup> year impact of FY 2009-10 DI#3 - Health Facilities Fees	569,629	0	569,629	0	0	9.6
PERA Adjustment	<u>(21,298)</u>	<u>(1,845)</u>	<u>(19,453)</u>	<u>0</u>	<u>0</u>	<u>0.0</u>
FY 2010-11 Recommendation Before OIT Transfer	2,974,292	158,172	2,816,120	0	0	45.5
OIT Consolidation	(60,817)	(1,927)	(58,890)	0	0	(0.7)
FY 2010-11 Recommendation with OIT Transfer	2,913,475	156,245	2,757,230	0	0	44.8
FY 2010-11 Request	2,913,475	156,245	2,757,230	0	0	44.8

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

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

The following table presents staffing levels for this program.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Accountant	0.1	0.1	0.1	0.1
Administrative Support Staff	2.1	2.5	2.5	2.5
Budget Analyst	0.1	0.1	0.1	0.1
Health Professional	4.0	4.5	4.5	4.5
Information Systems Staff	0.1	0.2	0.0	0.0
Inspector	1.5	1.5	1.5	1.5
Management	0.2	0.2	0.2	0.2
Program Assistant	0.3	0.3	0.3	0.3
records management	0.1	0.1	0.1	0.1

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Staff / General Professional	1.7	1.9	1.9	1.9
Total	10.2	11.4	11.2	11.2

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	927,303	109,797	817,506	0	0	11.4
Reverse Furlough Supplemental	15,925	5,107	10,818	0	0	0.0
PERA Adjustment	(14,204)	(4,654)	(9,550)	0	0	0.0
FY 2010-11 Recommendation Before OIT Transfer	929,024	110,250	818,774	0	0	11.4
OIT Consolidation	(13,253)	0	(13,253)	0	0	(0.2)
FY 2010-11 Recommendation with OIT Transfer	915,771	110,250	805,521	0	0	11.2
FY 2010-11 Request	915,771	110,250	805,521	0	0	11.2

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

The following table presents staffing levels for this program.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Staff / General Professional	0.7	1.0	1.0	1.0
Total	0.7	1.0	1.0	1.0

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

Personal Services	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	212,849	0	212,849	0	0	1.0

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Personal Services	Total	GF	CF	RF	FF	FTE
Reverse Furlough Supplemental	1,147	0	1,147	0	0	0.0
PERA Adjustment	(932)	0	(932)	0	0	0.0
FY 2010-11 Recommendation	213,064	0	213,064	0	0	1.0
FY 2010-11 Request	213,064	0	213,064	0	0	1.0

<u>Medicaid/Medicare Certification Program</u>. This program certifies nursing homes and hospitals so they can receive federal Medicaid and Medicare payments. Funding for the program is a combination of reappropriated and federal funds. The reappropriated funds, which pay for certification of facilities caring for Medicaid patients, are Medicaid Cash Funds transferred from the Department of Health Care Policy and Financing where they are appropriated in the Executive Director's Office on the line item titled *Transfer to Department of Public Health and Environment for Survey and Certification*. The federal funds, which pay for certification of facilities caring for Medicare funds.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Accounting	0.9	1.0	1.0	1.0
Administrative Support Staff	8.8	9.0	9.0	9.0
Budget Analyst	0.5	0.5	0.5	0.5
Compliance Investigator	0.7	1.0	1.0	1.0
Health Professional	62.5	64.0	64.0	64.0
Information Systems Staff	3.9	3.8	0.0	0.0
Inspector	5.0	5.0	5.0	5.0
Management	1.1	1.1	1.1	1.1
Program Assistant	4.7	5.0	5.0	5.0
records Administrator	0.9	1.0	1.0	1.0
Staff / General Professional	5.2	6.0	6.0	6.0
Total	94.2	97.4	93.6	93.6

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

The corresponding Option 8 computation and recommendation is:

Total	GF	CF	RF	FF	FTE
6,855,162	0	0	3,996,999	2,858,163	97.4
69,441	0	0	69,441	0	0.0
21,370	0	0	(11,928)	33,298	0.0
(150,802)	0	0	(79,162)	(71,640)	0.0
<u>1,167,932</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>1,167,932</u>	<u>0.0</u>
7,963,103	0	0	3,975,350	3,987,753	97.4
(302,208)	0	0	(127,356)	(174,852)	(3.8)
7 660 895	0	0	3 8/17 99/	3 812 901	93.6
, ,	-	-			93.6
	6,855,162 69,441 21,370 (150,802) <u>1,167,932</u> 7,963,103	6,855,162       0         69,441       0         21,370       0         (150,802)       0         1,167,932       0         7,963,103       0         (302,208)       0         7,660,895       0	6,855,162       0       0         69,441       0       0         21,370       0       0         (150,802)       0       0         1,167,932       0       0         7,963,103       0       0         (302,208)       0       0         7,660,895       0       0	6,855,162       0       0       3,996,999         69,441       0       0       69,441         21,370       0       0       (11,928)         (150,802)       0       0       (79,162)         1,167,932       0       0       3,975,350         (302,208)       0       0       (127,356)         7,660,895       0       0       3,847,994	6,855,162       0       0       3,996,999       2,858,163         69,441       0       0       69,441       0         21,370       0       0       (11,928)       33,298         (150,802)       0       0       (79,162)       (71,640)         1,167,932       0       0       0       1,167,932         7,963,103       0       0       3,975,350       3,987,753         (302,208)       0       0       (127,356)       (174,852)         7,660,895       0       0       3,847,994       3,812,901

# (B) Emergency Medical Services

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

The section is cash funded through a \$2.00 surcharge on the registration of motor vehicles in the state. The surcharge is deposited in the Emergency Medical Services Account within the Highway Users Tax Fund (the "EMS Account"), which is established in Section 25-3.5-603, C.R.S. Expenditures from this account are governed by the rules of that section. The surcharge was increased from \$1 to \$2 by S.B. 09-02.

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

The following tables present staffing information for the program.

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Administrative Support Staff	2.1	2.1	2.1	2.1
Budget Analyst	0.1	0.1	0.1	0.1
Health professional	1.0	4.7	3.1	3.1
Information Systems	0.7	0.8	0.0	0.0
Program Assistant	0.2	1.0	0.2	0.2
Staff / General Professional	7.0	7.6	10.0	10.0
Total	11.1	16.3	15.5	15.5

The corresponding Option 8 calculation and recommendation are:

Program	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	1,367,590	0	1,367,590	0	0	16.3
Reverse Furlough Supplemental	20,491	0	20,491	0	0	0.0
Year 2 impact, S.B. 09-002, Increase Motor Vehicle Fee for Emergency Services	(16,914)	0	(16,914)	0	0	0.0
PERA Adjustment	(16,649)	<u>0</u>	<u>(16,649)</u>	<u>0</u>	<u>0</u>	<u>0.0</u>
FY 2010-11 Recommendation Before OIT Transfer	1,354,518	0	1,354,518	0	0	16.3
OIT Consolidation	(49,099)	0	(49,099)	0	0	(0.8)
FY 2010-11 Recommendation with OIT Transfer	1,305,419	0	1,305,419	0	0	15.5
FY 2010-11 Request	1,305,419	0	1,305,419	0	0	15.5

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

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

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

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

**Staff recommends approval of the Department's request for \$6,793,896 cash funds for this line item,** a \$16,914 increase over FY 2009-10, which reflects the second year impact of S.B. 09-002, Increase Motor Vehicle Fee for Emergency Services. The source of cash funds is the Emergency Medical Services Account in the Highway User's Tax Fund.

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

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Administrative Assistant	0.9	1.1	1.1	1.1
Staff / General Professional	0.8	1.0	1.0	1.0
Total	1.7	2.1	2.1	2.1

The following tables present staffing information.

The corresponding Option 8 calculation and recommendation are:

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Program	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	385,198	0	385,198	0	0	2.1
Reverse Furlough Supplemental	3,580	0	3,580	0	0	0.0
PERA Adjustment	(2,909)	0	(2,909)	0	0	0.0
FY 2010-11 Recommendation	385,869	0	385,869	0	0	2.1
FY 2010-11 Request	385,869	0	385,869	0	0	2.1

The fund source is the Trauma Care System Cash Fund.

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

Staffing Summary	FY 08-09 Actual	FY 09-10 Approp.	FY 10-11 Request	FY 10-11 Recommend.
Information Systems	0.3	0.3	0.0	0.0
Staff / General Professional	0.9	0.5	0.5	0.5
Total	1.2	0.8	0.5	0.5

The corresponding recommendation and request are:

Program	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	131,340	0	0	0	131,340	0.8
Reverse Furlough Supplemental	6,660	0	0	0	6,660	0.0
PERA Adjustment	(5,411)	0	0	0	(5,411)	0.0
Federal Funds Adjustment	(5,308)	<u>0</u>	<u>0</u>	<u>0</u>	(5,308)	<u>0.0</u>
FY 2010-11 Recommendation Before OIT Transfer	127,281	0	0	0	127,281	0.8
OIT Consolidation	(21,690)	0	0	0	(21,690)	(0.3)
FY 2010-11 Recommendation with OIT Transfer	105,591	0	0	0	105,591	0.5
FY 2010-11 Request	110,899	0	0	0	110,899	0.5

**Poison Control.** Under the authority of the Poison Control Act (Title 25, Article 32, C.R.S.), the Department contracts with the Rocky Mountain Poison and Drug Center, an affiliate of Denver

Health, to provide a 24-hour-a-day, toll free phone number that Colorado citizens can call to obtain poison information. The hotline handles over 70,000 cases per year with the average case involving 3 or 4 calls. The phones are staffed by nurses, pharmacists and "poison-information providers". Board-certified medical toxicologists are also on call.

Over half of the calls that the Center receives involve children. Usually these are cases of actual or suspected poisoning such as an overdose of an antibiotic or liquid bleach accidently splashed in an eye. The Center also receives calls from emergency room physicians seeking expert advice on severe or unusual poisoning cases. The Center frequently receives calls from people who need help identifying unpackaged pills. Such calls may come from parents concerned about pills found in a teenager's backpack or from adult children who are trying to sort through a jumble of pills possessed by an older parent. Food poisoning calls are common and, since the terrorist attacks of 9/11, there have been a number of calls seeking information about possible chemical or biological terrorism.

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

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

# (D) Indirect Cost Assessment.

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

# (12) EMERGENCY PREPAREDNESS AND RESPONSE DIVISION

Subdivisions: None

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

emergency operations plan are assigned to CDPHE's Preparedness Unit. The Division relies heavily on Federal funding.

The division began operating in the late 1990's when several million dollars of federal funding became available. The division relied exclusively on federal dollars until FY 2009-10, when the federal Pandemic and All-Hazards Preparedness Act began requiring states to provide maintenance of effort and matching funds. These federal matching requirements, under which the state pays 10 percent of costs, are an all-or-none proposition. The amount of federal money that the state receives is driven by formulas (based, at least in part, on state population) and the state can either accept the federal support in its entirety, with the required state match, or it can decline.

Staffing Summary	FY 2008-09 Actual	FY 2009-10 Approp.	FY 2010-11 Request	FY 2010-11 Recommend.
Accounting	0.2	0.0	0.0	0.0
Administrative Support Staff	2.0	2.0	2.0	2.0
Environmental Protection Specialist	1.2	0.0	0.0	0.0
Health Professional	2.5	2.5	2.5	2.5
Information Technology	4.5	4.5	0.0	0.0
Laboratory Technician	0.4	0.4	0.0	0.0
Management	1.4	1.0	1.0	1.0
Nurse Consultant	0.2	0.0	0.0	0.0
Physical Scientist	3.1	3.0	3.0	3.0
Public Health Administrator	0.4	0.4	0.4	0.4
Staff / General Professional	29.9	18.1	17.8	33.6
Total	45.8	31.9	26.7	42.5

The following table shows the division's staffing request.

# **Emergency Preparedness and Response Program**

The following table shows the Option 8 calculation. The large General Fund increase is a consequence of the 2009 decision item that created this division. As noted above, the federal Pandemic and All-Hazards Preparedness Act gives Colorado little choice regarding this appropriation.

Program	Total	GF	CF	RF	FF	FTE
FY 2009-10 Appropriation	16,615,798	878,214	0	0	15,737,584	31.9
Reverse Furlough Supplemental	40,703	2,953	0	0	37,750	0.0
2nd yr, 2009 DI#2, Emergency Preparedness and Response	881,167	881,167	0	0	0	0.1
PERA Adjustment	(33,501)	(2,399)	0	0	(31,102)	0.0
Federal Funds Adjustment	2,780,394	<u>0</u>	<u>0</u>	<u>0</u>	<u>2,780,394</u>	<u>15.8</u>
FY 2010-11 Recommendation Before OIT Transfer	20,284,561	1,759,935	0	0	18,524,626	47.8
OIT Consolidation	(441,286)	0	0	0	(441,286)	(5.3)
FY 2010-11 Recommendation with OIT Transfer	19,843,275	1,759,935	0	0	18,083,340	42.5
FY 2010-11 Request	17,062,881	1,759,935	0	0	15,302,946	26.7

# **Indirect Costs**

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

#### **Summary of Footnote and Information Request Recommendations**

#### Footnotes to be continued:

# Abortion.

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

# **Requests for information to be discontinued:**

#### Immunization.

55. Department of Public Health and Environment, Disease Control and Environmental Epidemiology Division, Special Purpose Disease Control Programs, Immunization -- The Department is requested to submit a report to the Joint Budget Committee by November 1, 2009, detailing how immunization promotion funding was spent during FY 2008-09. The report should include the following information: (1) the location, number of children vaccinated vaccinated, and total grant amount for each immunization outreach clinic funded; and (2) the expenditures for and major purchases of the media campaign.

#### **Requests for information to be continued:**

# Ryan White Act.

56. Department of Public Health and Environment, Disease Control and Environmental Epidemiology Division, Special Purpose Disease Control Programs, Ryan White Act -- The Department is requested to report annually to the Joint Budget Committee with regard to the AIDS drug assistance program. The report should be submitted on or before October 20, 2009. October 20, 2010. The report should include, but not be limited to: (1) the total and average monthly number of clients served, with a description of the demographic profile of the client population; (2) the total and average monthly costs to provide pharmaceutical products to those clients; (3) a listing of the pharmaceuticals on the formulary, the manufacturer of each product, and the respective average price for a month's supply of each

product; and (4) the total amount of available funds, including state General Fund support, federal Title I and Title II support; and any other source as appropriate.

# Tony Grampsas Youth Services.

57. Department of Public Health and Environment, Prevention Services Division, Prevention Partnerships, Tony Grampsas Youth Services Program, Prevention Services Programs -- The Department is requested to submit a report to the Joint Budget Committee on the Tony Grampsas Youth Services Program by December 1, 2009 December 1, 2010. This report should include the following information for Fiscal Year 2008-09: 2009-10: (1) Names of all applicants and the amount requested by each; (2) names of all grantees, amount of each grantee's award, period covered by each grant, the number of years each grantee has previously received grants, the number of persons served under the grant, a brief description of the funded program; (3) the most recently available report evaluating the effectiveness of programs operated by grantees.

# **Requests for information to be added:**

# Medical Marijuana Registry

<u>NN</u>. Department of Public Health and Environment, Center for Health and Environmental Information, Health Statistics and Vital Records -- The Department is requested to submit a report to the Joint Budget Committee by January 3, 2011 on the medical marijuana registry program. This report should estimate the appropriations and the FTE that the Department requires during Fiscal Years 2010-11 and 2011-12 to perform its statutory duties under Colorado's medical marijuana laws. The report should include data that supports these estimates.