

**COLORADO GENERAL ASSEMBLY
JOINT BUDGET COMMITTEE**



SUPPLEMENTAL REQUESTS FOR FY 2009-10

**DEPARTMENT OF PUBLIC HEALTH AND
ENVIRONMENT**

Administration and Health Divisions

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

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Prioritized Supplementals

**Supplemental Request, Department Priority #1
Replacement Servers for Newborn Screening Operating System**

	Request	Recommendation
Total - CF	(\$72,248)	(\$72,248)

Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria? [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]	YES
JBC staff and the Department agree that this request is the result of <i>data that was not available when the original appropriation was made.</i>	

Department Request: The Department requests a FY 2009-10 appropriation of \$72,248 to purchase two computer servers, a storage area network, and associated software that will be used by the Newborn Screening program. These will replace two four-year-old servers and a storage area network that are no longer capable of supporting the program's volume of activity. This is a one-time increase in spending for FY 2009-10. The funding source is the Newborn Screening and Genetic Counseling Cash Fund. The Department states that the increased spending can be supported from current fund balance without an increase in fees.

Staff Recommendation: Staff recommends that the Committee approve this request and appropriate \$72,248 cash funds from the Newborn Screening and Genetic Counseling Cash Fund for FY 2009-10. This is a one-time appropriation.

Background and Staff Analysis: Since the 1970's, the laboratory at the Department of Public Health has screened blood samples taken from all Colorado newborns for disorders such as phenylketonuria and congenital hypothyroidism. The Newborn Screening and Genetic Counseling and Education Act, found in Section 25-4-1001 through 1006, C.R.S., provides statutory authority for the program. Over the years, the number of disorders screened has grown to about 30, with a substantial increase occurring in 2006 when the lab began using tandem mass spectrometry to analyze specimens. If these disorders are detected promptly, before damage occurs, and treatment begins immediately, adverse health consequences can often be substantially reduced. Phenylketonuria, for example, is an inherited metabolic disease that affects about one in 15,000 newborns and results in mental retardation and other neurological problems when treatment is not started within the first weeks after birth.

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The newborn testing fee, which currently equals \$85, covers all costs associated with the program. This fee is usually paid by an insurance company, medicaid, or a hospital. A recent study in the journal *Pediatrics* (*Pediatrics* Vol. 117 No. 5 May 2006) indicates many other states also cover such costs with fees.

Computer support for the program is provided by two servers that were purchased in 2006. One is a production server that supports day-to-day operations and the other is a backup server that also provides a test environment when changes are made to the system. Two-server installations of this sort are common. These servers are critical to the operation of the tandem mass spectrometry testing process and store the substantial volume of data that the process generates – data that the lab retains because of its potential value in diagnosing conditions that may not be suspected until a child is older – perhaps following the birth of a sibling with a condition that causes concern. It is not uncommon for the lab to provide physicians with data from tests that it performed during the 1990's. The servers also match the results of the screening with the appropriate newborn and the newborn's physician to ensure proper reporting of results.

During the summer of 2009, frequent server outages began to occur, culminating in the failure of the production server, which brought testing and analysis to a halt for two days as IT staff switched the program to the backup server. Had this outage lasted another 24 hours, the lab would have invoked its continuity of operations plan, which involves shipping infant samples to Pennsylvania for analysis, an alternative that would have cost \$24,500 per day had it been necessary to implement it.

A review by the Department and by the Office of Information and Technology (OIT) concluded that the two servers are past their expected end-of-life and are unable to meet current program requirements. OIT has approved the request.

Staff recommends that the Committee approve this request. Without two servers with sufficient processing and storage capacity, the program will face frequent system outages and risk a system failure that would force it to implement its continuity of operations plan at a substantial cost. In addition, the delay inherent in shipping samples to another state could increase the amount of time it takes to identify an infant with a metabolic disorder.

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**Supplemental Request, Department Priority #2
 Medical Marijuana Registry**

	Request	Recommendation
Total	<u>\$197,579</u>	<u>\$186,702</u>
FTE	0.0	0.0
Cash Funds	168,566	157,689
Reappropriated Funds	29,013	29,013

Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria? [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]	YES
<i>JBC staff and the Department agree that this request is the result of data that was not available when the original appropriation was made.</i>	

Department Request: The Department requests a FY 2009-10 appropriation of \$197,579, comprised of \$168,566 cash funds and \$29,013 reappropriated funds for its Medical Marijuana Registry program. No FTE are requested for FY 2009-10. With this appropriation, the Department plans to hire ten temporary employees from April through June 2010 to process applications for medical marijuana registry cards. The temporary employees will try to reduce the substantial backlog of applications that the Department has received in recent months and will also process new applications, which have been arriving at the rate of almost 5,000 per month. The Department will use the remaining \$29,013 of this appropriation for legal services and postage costs. The funding source for the cash funds is the Medical Marijuana Program Cash Fund, which is supported a \$90 annual fee paid by those who receive medical marijuana registry cards, the reappropriated funds come from indirect cost assessments paid by the Medical Marijuana Registry program.

This FY 2009-10 supplemental request is accompanied by a FY 2010-11 budget amendment that requests \$1,195,658 cash funds and \$220,477 reappropriated funds for the Medical Marijuana Registry program. This request, which will be considered during FY 2010-11 figure setting, 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.

Staff Recommendation: Staff recommends that the Committee approve an appropriation of \$186,702 cash funds to the Department, comprised of \$157,689 cash funds from the Medical

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Marijuana Program Cash Fund and \$29,013 of reappropriated funds from indirect cost assessments. This appropriation will allow the Department to start working through its very substantial backlog of medical marijuana registry card applications, but, because it only allows for the hiring of temporary employees, does not commit the program to continue operating at this level in FY 2010-11.

Background and Staff Analysis:

Key Medical Marijuana Provisions: In 2000, Colorado voters approved Amendment 20, which added Section 14 to Article XVIII (the "miscellaneous" article) of the state Constitution. The amendment provides an exception to Colorado's criminal marijuana laws for patients, primary care givers, and physicians. The article permits the medical use of marijuana if:

1. A patient was previously diagnosed by a physician who is licensed in Colorado and is in good standing as having a debilitating medical condition. A debilitating condition is defined as:
 - a. Cancer, glaucoma, HIV or AIDS; or
 - b. A chronic or debilitating disease or medical condition, or treatment for such conditions, which produces, for a specific patient, one or more of the following, and for which, in the professional opinion of the patient's physician, such condition or conditions reasonably may be alleviated by the medical use of marijuana: cachexia; severe pain; severe nausea; seizures, including those that are characteristic of epilepsy; or persistent muscle spasms, including those that are characteristic of multiple sclerosis; or
 - c. Other conditions that the Department may add in response to petitions.
2. The patient was advised by his or her physician, in the context of a bonafide physician-patient relationship, that the patient might benefit from the medical use of marijuana in connection with a debilitating medical conditions; and
3. The patient and his or her primary care-giver were collectively in possession of an amount of marijuana permitted by the amendment. (Two ounces of usable marijuana; up to six plants, with three or fewer being flowering, mature plants. Larger amounts are permissible if medically necessary.)
4. The patient doesn't use the marijuana in a public place or in a way that endangers others.

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If an individual satisfies conditions 1 through 4 (the "diagnosis - benefit - amount - use" conditions) he or she is exempt from the state's criminal marijuana laws.

The Constitution also requires a state health agency, designated initially by the governor and now designated through statute as the Department of Public Health and Environment, to establish and maintain a confidential medical marijuana 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 individual must submit to CDPHE a form, signed by the individual's physician, stating that in the physician's opinion conditions 1 and 2 (diagnosis-benefit) have been satisfied. 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 its role in the program.

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

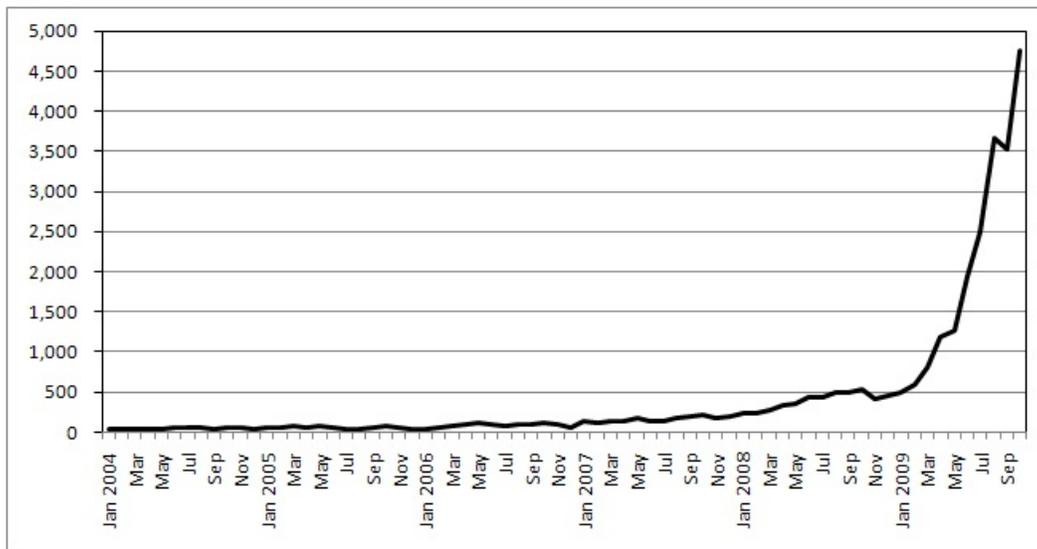
Why would an individual want a registry identification card, since, as noted above, once the "diagnosis - benefit - amount - use" conditions are met, a medical marijuana patient is exempt from the state's criminal marijuana laws? A registry card is useful because it provides a patient with a convenient means of demonstrating to law-enforcement officials and to his care giver that the diagnosis - benefit conditions have been met.

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 and Characteristics of Applicants: The following table, which shows the number of monthly applications for medical marijuana registry cards that CDPHE has

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received over the last six years, illustrates the reason why they Department has submitted this supplemental request.



Monthly Applications for Placement on the Medical Marijuana Registry

The above graph ends in Oct. 2009 and indications are that the avalanche of mail is continuing. The department received 13,737 pieces of mail in November; not all of these pieces of mail contain applications.

Relevant characteristics of approved applicants as of June 30, 2009 are as follows:

- 72 percent are male,
- Average age is 41,
- 51 percent of patients reside in the Denver- Metro/Boulder area,
- Over 800 different Colorado physicians have signed for patients,
- Severe pain accounts for 89 percent of all reported conditions,
- 65 percent of patients have designated a caregiver.

Current Appropriation: The current appropriation for operation of the medical marijuana registry is \$139,466 from the Medical Marijuana Program Cash Fund and 1.0 FTE, an FTE count that has remained constant since FY 2001-02. This FTE appropriation was adequate to handle the volume of applications that occurred from 2001 through 2006. In 2007, however, the volume of applications for registry cards began to increase significantly, causing the program to fall behind.

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Current Application Procession Procedures: As of December 2009 the Department is engaging in what may be described as triage. It conducts a quick review 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 deposits the payment, enters the approved application into the registry database, and prints and mails a registration card within 3 months of receiving the application, which exceeds the 35-day response required by the Constitution.
- Amendment 20 requires registry cardholders to notify the state if they change their care-giver or their address within 10 days of the event. The registry formerly mailed the cardholder a new card incorporating the changes. Because of volume, the department sought and received an amendment to the medical marijuana program rules adopted by the state Board of Health, and the registry no longer issues a new card for changes but instructs the cardholders to retain a copy of the change notification that they sent to the state. At this time, the department is unable to update the database with change information.

The Supplemental Request: This supplemental request would expand operation of the Medical Marijuana program for the months of April, May and June of 2010. The Department's much larger request for FY 2010-11 will be considered during figure setting. The Department anticipates filling ten temporary Administrative Assistant III Positions starting in April of 2010 at a cost \$96,991. Because the employees are temporary, an FTE appropriation is not required. Operating expenses, which include computers, software, office equipment and telephones for these temporary employees are estimated at \$49,075. Not included in the operating expense is a \$16,500 appropriation for postage within the Administration and Support Division, which assumes that 12,500 will be mailed monthly at a cost of \$0.44 per piece. In addition, there is a legal services request that equates to 166 hours of legal services at the common-policy rate of \$75.38, which is based on actual legal costs incurred by the program during FY 2007-2008.

Based on past experience, the Department estimates that an FTE will process 5,172 applicants per year. Thus the ten temporary employees that the Department plans to hire for three months in FY 2009-10 will be able to process about $5,172 * 2.5 = 12,930$ applications in a year or $12,930 / 3 = 4,310$ per month.

The fees that the Department is receiving for Medical Marijuana applications are more than sufficient to cover the cost of the requested appropriation. The 12,930 applications that the temporary

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employees are expected to process will generate an expected \$1,163,700 of revenue. The Department expects to receive a total of 75,000 applications during FY 2009-10, which would generate \$6,750,000 in revenue. It seems almost certain that the application and renewal fee, which is set by the Board of Health, will have to be reduced to put program revenues in line with the direct and indirect costs of running the program, as required by the Constitution.

Workload estimates provided by the Department suggest that the 10 temporary employees that the Department proposes to hire will be able to collectively process 4,310 applications per month, which would keep the application backlog constant until the start of FY 2010-11 if new applications continue to arrive at the pace set in October. If applications decline to levels experienced in August and September, these 10 temporary employees may be able to reduce the backlog that is causing the Department to exceed the 35 day response time specified in the Constitution, but it seems unlikely that they will eliminate it.

Staff Recommendation: Staff recommends that the Committee approve this request with one adjustment: Staff recommends replacing the temporary Administrative Assistant III's, which the Department proposes to hire at the bottom of the pay range, with Administrative Assistant II's, also hired at the bottom of the pay range. This reduces the personal services appropriation from \$96,991 to \$86,114, a reduction of \$10,877.

**Supplemental Request, Department Priority #3
 Adult Stem Cell Spending Authority (HB 09-1372)**

	Request	Recommendation
Total	<u>\$42,192</u>	<u>\$42,192</u>
Cash Funds	42,192	42,192

Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria? [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]	YES
JBC staff and the Department agree that this request is the result of <i>an unforeseen contingency</i> .	

Department Request: The Department requests a FY 2009-10 appropriation of \$42,192 cash funds to implement HB 08-1372. The cash funds derive from a tax return check-off. The Department requests the creation of a new Long Bill line item for this appropriation titled "Adult Stem Cells

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Cure Fund". This line item will probably persist for several years and then disappear when the tax-return check-off expires.

Staff Recommendation: Staff recommends that the Committee approve this request and create a new Long Bill line item title "Adult Stem Cells Cure Fund" to appropriate \$42,192 cash funds to the Department in FY 2009-10.

Staff Analysis: 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.

The Department has presented this request as a supplemental because it was informed by the Department of Revenue in August of 2009 that the money was available.

**Supplemental Request, Department Priority #4
 Indirect Cost Recoveries Adjustments**

	Request	Recommendation
Total	\$0	\$0
Cash Funds	183,282	183,282
Reappropriated Funds	(13,153)	(13,153)
Federal Funds	(170,129)	(170,129)

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Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria? [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]	YES
<i>JBC staff and the Department agree that this request is the result of data that was not available when the original appropriation was made.</i>	

Department Request: The Department requests adjustments to the indirect cost assessments in its FY 2009-10 Long Bill appropriations in order to take into account new information. Assessments involving a variety of cash and federal funds are involved. The total appropriations for these assessments will not change.

Staff Recommendation and request: Staff recommends that the Committee approve the Department's requested changes to its indirect cost assessments. In addition, common policy supplemental requests submitted by the Department are likely to cause further changes in indirect cost assessments if they are approved by the Committee. Staff requests permission to incorporate any necessary changes to indirect cost assessments into the Department's supplemental bill if common policy changes approved by the Committee necessitate such changes.

Background: The Department's indirect cost assessments allocate its overhead expenses among most of its cash- and federally-funded programs, with each program paying an assessment that is based on program expenditure. Different assessment rates apply to different types of spending; there is a rate for on-site spending and a rate for off-site spending, for example, and there are different rates for federal and cash fund expenditures.

After the Committee establishes the Department's spending levels during figure setting, the Department can accurately project its overhead expenses for the following fiscal year. It also knows the overall level of spending by cash-funded programs that pay overhead, but it does not know the spending "mix," the proportion of cash-funded spending that will be on- and off-site. The Department also does not know the level or mix of federally-funded programs.

Following figure setting, the Department submits its proposed indirect cost assessments for the fiscal year in question. JBC staff reviews these proposals and, with Committee approval, incorporates them into the Long Bill. Because of uncertainty regarding the mix of the various types of cash-fund spending and uncertainty concerning the mix and amount of federally-funded spending, these overhead assessments invariably prove inaccurate, meaning that the Department finds some of its indirect cost assessment appropriations are too large to be fully utilized and other assessment appropriations are too small. When an assessment appropriation is too small it can prevent the

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Department from collecting indirect costs from some of the federally funded and cash funded programs that are subject to that assessment.

With this supplemental request, the Department asks that the Long Bill be adjusted to reflect the latest available information. The numbers pages show the overall funding changes that will result from altering the indirect cost assessments in question.

**Supplemental Request, Department Priority #5
 Technical Corrections**

	Request	Recommendation
Total	\$0	\$0
Cash Funds	65,835	65,835
Reappropriated Funds	(65,835)	(65,835)

Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria? [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]	YES
JBC staff and the Department agree that this request is the result of <i>a technical error in calculating the original appropriation.</i>	

Department Request: This request is comprised of four parts, numbered Technical #2 through Technical #5, which are conceptually distinct from one another. Technical #1 will be considered during the presentation of the Department’s supplementals for its environmental divisions.

Staff recommendation: Staff recommends that the Committee approve each of these technical supplementals.

Technical #2: The Department requests the following amendment to letternote a in (9) Disease Control and Environmental Epidemiology Division, (A) Administration, General Disease Control and Surveillance, which attaches to the reappropriated funds appropriations for FY 2009-10 Operating Expenses and Indirect Cost Assessment.

^a These amounts shall be from ~~the sale of rabies vaccines.~~ VARIOUS SOURCES OF CASH FUNDS.

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Analysis: The amendment recognizes the fact that the appropriations are supported by sources in addition to the sale of rabies vaccines.

Technical #3: The Department requests the following amendment to letternote b attached to (2) Center for Health and Environmental Information, (C) Indirect Cost Assessment:

^b ~~Of this amount, \$2,000 shall be from Medicaid funds appropriated to the Department of Health Care Policy and Financing and \$45,678~~ THIS AMOUNT shall be from various sources of reappropriated funds.

and the following related amendment to letternote c attached to (10) Prevention Services Division; (A) Prevention Programs; (1) Programs and Administration, Indirect Cost Assessment:

^c ~~This amount~~ OF THIS AMOUNT \$1,502 SHALL BE FROM MEDICAID FUNDS APPROPRIATED TO THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING AND \$23,498 shall be from various sources of reappropriated funds.

Analysis: These letternote changes correct a \$498 discrepancy between the amount of Medicaid cash funds that are appropriated to CDPHE in the HCPF section of the Long Bill and the amount of Medicaid cash funds that are appropriated to CDPHE in the CDPHE section of the Long Bill; these changes increase the use of Medicaid cash funds by the Prevention Services Division by \$1,502 and reduce the use of Medicaid cash funds by the Center for Health and Environmental Information by \$2,000.

Technical #4: The Department requests that the cash funds appropriations for (2) Center for Health and Environmental Information, (A) Health Statistics and Vital Records, Personal Services and Operating Expenses, be increased by \$95,760 and \$21,075 respectively while the reappropriated funds appropriations for the same lines be decreased by \$95,760 and \$21,075 respectively. This will zero the appropriation of reappropriated funds for Operating Expenses. In addition the Department requests the following related amendments to letternotes a and b for this subdivision:

^a Of these amounts, \$1,544,113 shall be from the Vital Statistics Records Cash Fund created in Section 25-2-121 (2) (b) (I), C.R.S., \$139,466 shall be from the Medical Marijuana Program Cash Fund created in Section 25-1.5-106 (2), C.R.S., \$116,835 SHALL BE FROM THE PREVENTION, EARLY DETECTION, AND TREATMENT FUND CREATED IN SECTION 24-22-117 (2) (d) (I), C.R.S., \$116,597 shall be from the Tobacco Education Programs Fund created in Section 24-22-117 (2) (c) (I), C.R.S., and \$292,356 shall be from various sources of cash funds. The Tobacco Education Programs Fund consists of revenues from additional state cigarette and tobacco taxes imposed pursuant to Section 21 of Article X of the State

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Constitution; appropriations from this fund do not constitute fiscal year spending for the purposes of Section 20 of Article X of the State Constitution.

^b ~~Of these amounts, \$116,835 shall be from the Prevention, Early Detection, and Treatment Fund Expenditures appropriation in the Prevention Services Division, and \$3,550~~ THIS AMOUNT shall be from Medicaid funds appropriated to the Department of Health Care Policy and Financing.

Analysis: During figure setting for FY 2009-10, the Committee approved the elimination of several two-step appropriations that began with an appropriation called "Prevention, Early Detection, and Treatment Fund Expenditures" in the Prevention Services Division. The appropriation out of "Prevention, Early Detection, and Treatment Fund Expenditures" in (2) Center for Health and Environmental Information, (A) Health Statistics and Vital Records should have been eliminated as a consequence, but was not. The Department's request corrects the resulting error.

Technical #5: The Department requests that the reappropriated funds appropriation for (1) Administration and Support, (A) Administration, Utilities, be increased by \$51,000 in FY 2009-10 and that the cash funds appropriation for (7) Hazardous Materials and Waste Management Division; (E) Contaminated Site Cleanups, Contaminated Sites Operation and Maintenance be decreased by \$51,000 for the same fiscal year. The Department requests the following change to letternote a for Utilities, which also attaches to several other line items:

^a Of these amounts, \$689,814 shall be from the Department of Public Health and Environment subaccount of the Automobile Inspection and Readjustment Account of the Highway Users Tax Fund established in Section 42-3-304 (18) (c), C.R.S., \$87,783 shall be from the Stationary Sources Control Fund created in Section 25-7-114.7 (2) (b) (I), C.R.S., \$51,000 SHALL BE FROM THE HAZARDOUS SUBSTANCE RESPONSE FUND CREATED IN SECTION 25-16-104.6 (1) (a), C.R.S., and \$3,051,470 shall be from various sources of cash funds.

The Department requests the following change to letternote a for Contaminated Sites Operation and Maintenance, which also attaches to another line item:

^a Of these amounts, ~~\$2,779,513~~ \$2,728,513 shall be from the Hazardous Substance Response Fund created in Section 25-16-104.6 (1) (a), C.R.S., \$6,102 shall be from fees collected under the Colorado Open Records Act, and \$50,000 shall be from various sources of cash funds.

Analysis: For FY 2009-10 the Department submitted a Decision Item (FY 2009-10 DI#5: "Operation and Maintenance of the Argo Tunnel Water Treatment Plant") to change funding for the

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operation and maintenance of the ARGO tunnel from federal funds to cash funds. When the request was written, the Department included the utilities costs in the Hazardous Materials and Waste Management Division operating and Maintenance line instead of the central Utilities line in Administration where all other utility costs are accounted for in the department's budget. This request will move the \$51,000 for FY 2009-10 from the division line to the central Utilities line.

Non-Prioritized Supplementals

August Emergency Supplemental Requests #1, #2 and #3 involve CDPHE and HCPF. In each case a FY 2009-10 appropriation to CDPHE from an Amendment 35 tobacco-tax cash fund is reduced and the savings is appropriation to HCPF for Medical Services Premiums, thus allowing General Fund appropriations for Medical Services Premiums within HCPF to be reduced by an equal amount. This document presents the analysis for CDPHE. The analysis for HCPF will be presented by the HCPF analyst. The recommendations made by this analyst have been coordinated with the recommendations made by the HCPF analyst.

CDPHE's FY 2009-10 budget request includes another \$25.7 million in appropriations from the same cash funds, this time to support HCPF Medical Services Premiums in FY 2010-11. Though the proposed reductions continue into FY 2010-11, they are temporary in nature because they require an annual two-thirds vote of the General Assembly plus approval of the Governor to be extended.

**August Emergency Supplemental #1
 Cash Fund Transfer from Tobacco Education Program Fund**

	Request	Recommendation
Total - CF	(\$7,000,000)	(\$7,000,000)
FTE	<u>0.0</u>	<u>0.0</u>

Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria? [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]	YES
The Department submitted this request in August 2009, but it did not specify a criteria. JBC staff believes that this request is the result of <i>an emergency</i> .	

Department Request: The Department requests that the FY 2009-10 cash funds appropriation for (10) Prevention Services Division; (A) Prevention Programs; (5) Tobacco Education, Prevention, and Cessation; Tobacco Education, Prevention, and Cessation Grants be reduced by \$7,000,000. This

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appropriation is from the Tobacco Education Programs Fund, which is supported by Amendment 35 tobacco-tax revenues.

In a related supplemental, the Department of Health Care Policy and Financing requests that the cash funds appropriation for Medical Services Premiums from the Tobacco Education Programs Fund be increased by \$7,000,000 and the General Fund appropriation for Medical Services Premiums be reduced by \$7,000,000.

Staff Recommendation: Staff recommends that the Committee approve this request and reduce the appropriation for Tobacco Education, Prevention, and Cessation Grants by \$7,000,000 for FY 2009-10.

Staff Analysis:

No legislation is required for this request because it takes advantage of two bills that were part of the JBC's budget balancing package during the 2009 session:

- **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 upon declaration of a state fiscal emergency by a two-thirds vote of each chamber of the General Assembly and approval of the Governor. The resolution applies to *any* appropriations of Amendment 35 moneys that occur in FY 2009-10, including FY 2009-10 appropriations that may be included in supplemental bills. It does not apply to FY 2010-11 appropriations.
- **Senate Bill 09-271** allows moneys in the Prevention, Early Detection and Treatment Fund, and the Tobacco Education Programs Fund to be appropriated without limit for any health-related purpose in FY 2009-10.

The requested \$7 million appropriation to HCPF from the Tobacco Education Programs Fund is in addition to an \$8 million appropriation to HCPF from this fund that was contained in S.B. 09-271. Staff estimates the two appropriations to HCPF have reduced FY 2009-10 grant-making by the program from about \$26 million to about \$11 million.

In August and September, the review committee that selects grantees for Tobacco Education, Cessation and Prevention grants decided to make the following cuts to grant programs:

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- Colorado QuitLine – reduced by 50 percent (Subsequently the Department announced that health insurance companies had agreed to pick up QuitLine costs for their members. As a consequence it is hoped that the QuitLine will be able to continue to serve all callers.)
- Local Health agencies – reduced by 53 percent.
- Get R!EAL youth movement – reduced by 60 percent
- Health communications and media – reduced by 82 percent
- Health care systems change – reduced by 75 percent
- Disparities planning and implementation grants – reduced by 50 percent . Funding for disparities grantees was distributed through a similar process as the local health agencies, looking at smoking prevalence and population size. Also, low socioeconomic status is high in nearly all the disparate populations.
- Tobacco advocacy and resource partnership – reduced by 60 percent
- Surveillance and evaluation – reduced by 80 percent
- School based programs – reduced by 75 percent
- Collegiate programs – reduced by 75 percent
- Youth cessation programs – reduced by 75 percent
- Secondhand smoke interventions for childcare providers – reduced by 50 percent
- Tony Grampas Youth Services Tobacco Initiative (TTI) – reduced by 82 percent

At the same time, the following contracts were completely eliminated:

- Catholic Charities of the Archdiocese of Denver
 - Chaffee County Department of Health and Human Services
 - City Wild
 - Early Childhood Council of Larimer County
 - Jefferson County Mental Health
 - Montezuma County Partners
 - Park County School District
 - Pikes Peak Family Connections
 - Rocky Mountain Youth Corps
-

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**August Emergency Supplemental #2
Cash Fund Transfer from Prevention, Early Detection, and Treatment Fund**

	Request	Recommendation
Total - CF	(\$7,000,000)	(\$7,000,000)
FTE	<u>0.0</u>	<u>0.0</u>

Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria? [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]	YES
The Department submitted this request in August 2009, but it did not specify a criteria. JBC staff believes that this request is the result of <i>an emergency</i> .	

Department Request: The Department requests that the FY 2009-10 cash funds appropriation for (10) Prevention Services Division; (A) Prevention Programs; (1) Programs and Administration; Cancer, Cardiovascular Disease, and Pulmonary Disease Grants be reduced by \$7,000,000. This appropriation is from the Prevention, Early Detection, and Treatment Fund, which is supported by Amendment 35 tobacco-tax revenues.

In a related supplemental, the Department of Health Care Policy and Financing requests that the cash funds appropriation for Medical Services Premiums from the Prevention, Early Detection, and Treatment Fund be increased by \$7,000,000 and the General Fund appropriation for Medical Services Premiums be reduced by \$7,000,000.

Staff Recommendation: Staff recommends that the Committee approve this request and reduce the appropriation for Cancer, Cardiovascular Disease, and Pulmonary Disease Grants by \$7,000,000 for FY 2009-10.

Staff Analysis:

As is the case with the previous Amendment 35 supplemental, no legislation is required for this request; it takes advantage of S.J.R. 09-035 and S.B. 09-271 which together declared a state fiscal emergency for FY 2009-10 and allowed moneys in the Prevention, Early Detection and Treatment Fund to be appropriated for any health-related purpose.

The requested \$7 million appropriation to HCPF from the Prevention, Early Detection and Treatment Fund is in addition to a \$12 million appropriation to HCPF from this fund that was contained in S.B.

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09-271. Staff estimates that the two appropriations to HCPF have reduced FY 2009-10 Cancer, Cardiovascular Disease, and Pulmonary Disease grants from about \$23 million to about \$14 million – the program had a substantial fund balance coming into FY 2009-10 with which it absorbed about half of the \$19 million appropriation to HCPF. That fund balance has now been eliminated.

In August and September, the review committee that selects Cancer, Cardiovascular Disease, and Pulmonary Disease grantees decided to focus the reduced grant money on programs in the following core areas:

- Screening and treatment of colorectal cancer through endoscopic screening;
- Screening and treatment for high blood pressure and high cholesterol;
- Secondary prevention of heart disease, stroke and heart failure readmissions;
- Asthma self management for African Americans and Latinos;
- The Stanford model of chronic disease management; and
- Program evaluation.

Application of these criteria resulted in 34 programs being continued with a reduced budget and scope of work and 24 programs being discontinued in their entirety.

**August Emergency Supplemental #3
 Cash Fund Transfer from Health Disparities Grant Program Fund**

	Request	Recommendation
Total - RF	(\$1,000,000)	(\$1,000,000)
FTE	<u>0.0</u>	<u>0.0</u>

Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria? [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]	YES
The Department submitted this request in August 2009, but it did not specify a criteria. JBC staff believes that this request is the result of <i>an emergency</i> .	

This request requires separate legislation.

Department Request: The Department requests that the FY 2009-10 cash funds appropriation for (1) Administration and Support; (B) Special Health Programs; (1) Health Disparities Program;

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Health Disparities Grants be reduced by \$1,000,000. This appropriation is from the Health Disparities Grant Program Fund, which is supported by Amendment 35 tobacco-tax revenues.

In a related supplemental, the Department of Health Care Policy and Financing requests that the cash funds appropriation for Medical Services Premiums from the Health Disparities Grant Program Fund be increased by \$1,000,000 and the General Fund appropriation for Medical Services Premiums be reduced by \$1,000,000.

Staff Recommendation: Staff recommends that the Committee approve this request and reduce the appropriation for Health Disparities Grants by \$1,000,000 for FY 2009-10.

Staff Analysis:

Legislation is required for this request. Senate Joint Resolution 09-035 has already declared a state fiscal emergency, but a bill similar to S.B. 09-271 must be passed that permits moneys in the Health Disparities Grant Program Fund to be appropriated for any health related purpose. The bill would also contain an appropriation clause that reduces the appropriation for Health Disparities Grants by \$1 million, appropriates \$1 million from the Health Disparities Grant Program Fund to HCPF for Medical Services Premiums, and reduces HCPF's General Fund appropriation for Medical Services Premiums by \$1 million.

This would be the first time that the Health Disparities Grant Program Fund has been appropriated in support of Medical Services Premiums. Since the fund has a substantial balance, there will be no need to reduce the FY 2009-10 Health-Disparities grant awards that were announced last spring; however, staff estimates that this fund balance will be exhausted by end of FY 2009-10 and further appropriations for Medical Services Premiums in FY 2010-11 are likely to reduce grant making dollar for dollar.

**August Emergency Supplemental #4
 Reduce Tony Grampas Youth Services Grants**

	Request	Recommendation
Total - GF	(\$1,000,000)	(\$1,000,000)
FTE	<u>0.0</u>	<u>0.0</u>

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Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria? [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]	YES
The Department submitted this request in August 2009, but it did not specify a criteria. JBC staff believes that this request is the result of <i>an emergency</i> .	

Department Request: The Department requests that the FY 2009-10 General Fund appropriation for the Tony Grampas Youth Services Program be reduced by \$1 million. The Department's budget request for FY 2010-11 doesn't include a General Fund appropriation for the program, so the Department is proposing that the reduction last for at least one more year.

Staff Recommendation: Staff recommends that the Committee approve this request and reduce the FY 2009-10 General Fund appropriation for the Tony Grampas Youth Services Program by \$1 million.

Staff Analysis: The Tony Grampas Youth Services Program awards grants to community-based programs that target youth and their families for intervention services in an effort to reduce youth crime and violence and prevent child abuse and neglect. It is supported by a statutory 4 percent share of tobacco settlement payments, which amounts to \$4.0 million in the FY 2009-10 Long Bill, plus a \$1 million General Fund appropriation. Thus elimination of the program's General Fund appropriation amounts to a 20 percent cut in program funding. Following the Governor's announcement of this cut last August, the program's board voted to:

- Reduce administrative expenses by 29 percent
- Reduce program evaluation expenses by 25 percent
- Uniformly reduce all grants by 19 percent, thus reducing total grants from \$4.4 million to \$3.6 million.

The program makes grants for 3 year periods and will probably maintain the same uniform grantee cuts in FY 2010-11.

**August Emergency Supplemental #5
Reduce the Dental Care Act Funding**

	Request	Recommendation
Total - GF	(\$520,131)	(\$437,131)
FTE	<u>0.0</u>	<u>0.0</u>

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Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria? [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]	YES
The Department submitted this request in August 2009, but it did not specify a criteria. JBC staff believes that this request is the result of <i>an emergency</i> .	

Department Request: The Department requests the elimination of \$520,131 of FY 2009-10 General Fund appropriations which currently fund dental programs. Of this amount, \$427,131 supports the Dental Assistance Program for Seniors and \$93,000 supports an annual grant to the Colorado Foundation of Dentistry for the Handicapped.

Staff Recommendation: Staff recommends that the Committee eliminate the \$427,131 appropriation that supports the Dental Assistance Program for Seniors but that it reduce to \$83,000 the \$93,000 annual grant to the Colorado Foundation of Dentistry for the Handicapped. The result is a \$437,131 reduction in General Fund appropriations.

Staff Analysis: The Department's request would eliminate appropriations for two dental programs. The first is a \$427,131 appropriation for the Dental Assistance Program for Seniors, which provides reimbursement for dental work and appliances for seniors who qualify for the Old Age Pension fund. It typically serves about 800 seniors annually, which is about 3 percent of the eligible Old Age Pension population.

The second is a \$93,000 appropriation for an annual grant to the Colorado Foundation of Dentistry for the Handicapped. The Foundation has a total budget of \$148,000, which includes this state support and about \$23,000 in Medicaid funding received through nursing homes. In addition to a moderate amount of cash support from private sources, the program receives substantial in-kind support from private sources, including a van that was recently donated by Delta Dental. The program annually provides dental care for about 800 individuals who cannot travel to a dentist's office. The program serves citizens of all ages, though most are elderly. Most of its patients live in nursing homes, but it also serves a few homebound patients. The program began receiving state moneys in the 1980's and has received General Fund support since that time. The foundation that runs the program has indicated that it will be forced to stop operating the program if it loses state funding.

The grant to the Colorado Foundation of Dentistry for the Handicapped is made under authority of Section 25-21-108, C.R.S., which requires the Department to administer a program of dental care for infirm people who are unable to travel to dental offices.

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There's a striking difference in the cost of operating these two programs which both serve about 800 people annually. In a typical year, it costs \$427,000 for the Dental Assistance Program for Seniors to serve approximately 800 seniors, which equates to \$534 per patient. In contrast, the state pays \$93,000 to the Dentistry for the Handicapped program to also serve 800 patients, which works out to \$116 per patient served -- a cost to the state that equals 22 percent of the cost of the Dental Assistance Program for Seniors. Staff was astonished to learn of this differential and, after investigating, concluded that the program is extremely effective in leveraging private in-kind donations. Dentures provide a case in point -- the program works with a lab that will provide dentures for the program's patients at cost. The result might be a full set of dentures for \$200, dentures that are identical to those that a regular dentist would provide for \$3,000 after a substantial markup.

JBC Staff considers this program to be an excellent example of a public-private partnership that should be preserved, even in the face of an economic downturn.

Interestingly, the \$93,000 cut to the Dentistry for the Handicapped program was not mentioned in the supplemental write-up that CDPHE provided to staff in August 2009 and has posted online at the OSPB web site. That write-up indicates that the entire \$520,131 cut will come from elimination of the OAP dental program.

Statewide Furlough Impact

	Request	Recommendation
Total	(\$1,617,465)	(\$1,617,465)
FTE	<u>0.0</u>	<u>0.0</u>
General Fund	(101,904)	(101,904)
Cash Funds	(276,405)	(276,405)
Reappropriated Funds	(52,497)	(52,497)
Federal Funds	(1,186,659)	(1,186,659)

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Does JBC staff believe the request meets the Joint Budget Committee's supplemental criteria? [An emergency or act of God; a technical error in calculating the original appropriation; data that was not available when the original appropriation was made; or an unforeseen contingency.]	YES
The Department did not specify a criteria. JBC staff believes that this request is the result of <i>data that was not available when the original appropriation was made.</i>	

Department Request: The General Assembly included a statewide personal services reduction equivalent to 1.82 percent of the appropriation to each agency in the FY 2009-10 Long Bill (S.B. 09-259). The overall FY 2009-10 impact of the one-time reduction was \$26.5 million, of which \$16.1 million was General Fund. The executive branch was given the flexibility to develop and implement a plan to meet the mandated reduction. The Governor requests an adjustment to the personal services reductions within the FY 2009-10 Long Bill to reflect the actual staffing actions taken within each agency to achieve a decrease of 1.82 percent. The Department of Public Health and Environment requests a decrease of \$1,617,465, comprised of \$101,904 General Fund, \$276,405 cash funds, \$52,497 reappropriated funds, and \$1,186,659 federal funds, with the adjustments divided among 72 lines in the Department's Long Bill.

Staff Recommendation: Staff recommends that the Committee approve the Department's request and reduce the Department's FY 2009-10 appropriation by \$1,617,465, comprised of \$101,904 General Fund, \$276,405 cash funds, \$52,497 reappropriated funds, and \$1,186,659 federal funds. Staff requests permission to adjust letter notes to reflect the JBC's actions.

These supplemental reductions combine with the reductions already included in the FY 2009-10 Long Bill (S.B. 09-259). The following table shows the total amount that funding will be reduced, relative to base appropriations, when this supplemental is added to the reductions already in the Long Bill.

Adjustment	Total	General Fund	Cash Funds	Reapprop. Funds	Federal Funds	FTE
Personal Services base reduction in the 2009 Long Bill (S.B. 09-259)	(\$739,792)	(\$70,872)	(\$474,052)	(\$194,868)	\$0	0.0
Base reductions in this supplemental	(1,617,465)	(101,904)	(276,405)	(52,497)	(1,186,659)	0.0
Total reduction from Base Personal Services Appropriation for CDPHE	(\$2,357,257)	(\$172,776)	(\$750,457)	(\$247,365)	(\$1,186,659)	0.0

Statewide Common Policy Supplemental Requests

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These requests are not prioritized and are not analyzed in this packet. The JBC will act on these items later when it makes decisions regarding common policies.

Department's Portion of Statewide Supplemental Request	Total	General Fund	Cash Funds	Reapprop. Funds	Federal Funds	FTE
Risk Management Contract Review and Reduction	(4,898)	0	0	(4,898)	0	0.0
Capitol Complex Building Maintenance Reductions	0	0	0	0	0	0.0
Risk Management Reduction of Liability, Property and Workers' Compensation Volatility	(24,340)	0	0	(24,340)	0	0.0
Elimination of Noxious Weed Abatement	0	0	0	0	0	0.0
State Fleet Rebates - One Time Refinance	(44,718)	(177)	(32,763)	(8,631)	(3,147)	0.0
Annual Fleet Vehicle Replacement True-up	24,255	0	20,000	4,255	0	0.0
Mail Equipment Upgrade	(7,643)	0	0	(7,643)	0	0.0
OIT Personal Services Reduction Initiative	(31,070)	0	0	(31,070)	0	0.0
FY 2009-10 OIT Management and Administration One-time Adjustment	(16,649)	0	0	(16,649)	0	0.0
Department's Total Statewide Supplemental Requests	(105,063)	(177)	(12,763)	(88,976)	(3,147)	0.0

Staff Recommendation: The staff recommendation for these requests is pending Committee approval of common policy supplementals. **Staff asks permission to include the corresponding appropriations in the Department's supplemental bill when the Committee approves this common policy supplemental.** If staff believes there is reason to deviate from the common policy, staff will appear before the Committee later to present the relevant analysis.

	FY 2008-09	FY 2009-10	Fiscal Year 2009-10 Supplemental		
	Actual	Appropriation	Requested Change	Recommended Change	New Total with Recommendation

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Administrative and Health Divisions
Executive Director - Martha E. Rudolph

Supplemental #1 - Replacement Servers for Newborn Screening Operating System

(3) Laboratory Services Division, (B) Chemistry and Microbiology

Operating Expenses	<u>2,656,312</u>	<u>3,225,252</u>	<u>72,248</u>	<u>72,248</u>	<u>3,297,500</u>
General Fund	12,711	316,278	0	0	316,278
Cash Funds	2,213,873	2,556,949	72,248	72,248	2,629,197
Reappropriated Funds	139,486	140,119	0	0	140,119
Federal Funds	290,242	211,906	0	0	211,906

Supplemental #2 - Medical Marijuana Registry

(1) Administration and Support, (A) Administration

Operating Expenses	<u>1,198,755</u>	<u>1,255,215</u>	<u>16,500</u>	<u>16,500</u>	<u>1,271,715</u>
Cash Funds	0	0	0	0	0
Reappropriated Funds	1,198,755	1,255,215	16,500	16,500	1,271,715
Legal Services	<u>1,731,226</u>	<u>1,964,377</u>	<u>12,513</u>	<u>12,513</u>	<u>1,976,890</u>
Cash Funds	662,378	10,000	0	0	10,000
Reappropriated Funds	941,356	1,954,377	12,513	12,513	1,966,890
Federal Funds	127,492	0	0	0	0

	FY 2008-09	FY 2009-10	Fiscal Year 2009-10 Supplemental		
	Actual	Appropriation	Requested Change	Recommended Change	New Total with Recommendation
<i>(2) Center for Health and Environmental Information, (A) Health Statistics and Vital Records</i>					
Personal Services	<u>3,254,370</u>	<u>2,743,889</u>	<u>96,991</u>	<u>86,114</u>	<u>2,830,003</u>
Cash Funds	1,970,418	2,013,206	96,991	86,114	2,099,320
Reappropriated Funds	101,148	99,310	0	0	99,310
Federal Funds	1,182,804	631,373	0	0	631,373
Operating Expenses	<u>307,866</u>	<u>135,375</u>	<u>71,575</u>	<u>71,575</u>	<u>206,950</u>
Cash Funds	101,976	79,326	71,575	71,575	150,901
Reappropriated Funds	21,074	21,075	0	0	21,075
Federal Funds	184,816	34,974	0	0	34,974
Total for Supplemental #2	<u>6,492,217</u>	<u>6,098,856</u>	<u>197,579</u>	<u>186,702</u>	<u>6,285,558</u>
Cash Funds	2,734,772	2,102,532	168,566	157,689	2,260,221
Reappropriated Funds	2,262,333	3,329,977	29,013	29,013	3,358,990
Federal Funds	1,495,112	666,347	0	0	666,347
Supplemental #3 - Adult Stem Cell Spending Authority (HB 09-1372)					
<i>(10) Prevention Services Division, (B) Women's Health – Family Planning</i>					
Adult Stem Cells Cure Fund (New Line) - CF	0	0	42,192	42,192	42,192

	FY 2008-09	FY 2009-10	Fiscal Year 2009-10 Supplemental		
	Actual	Appropriation	Requested Change	Recommended Change	New Total with Recommendation
Supplemental #4 - Indirect Cost Recoveries Adjustments					
<i>(1) Administration and Support</i>					
<i>(A) Administration</i>					
Indirect Cost Assessment	<u>364,345</u>	<u>422,611</u>	<u>13,867</u>	<u>13,867</u>	<u>436,478</u>
Cash Funds	183,696	220,000	(12,059)	(12,059)	207,941
Reappropriated Funds	1,936	75,759	20,000	20,000	95,759
Federal Funds	178,713	126,852	5,926	5,926	132,778
 <i>(2) Center for Health and Environmental Information</i>					
<i>(C) Indirect Cost Assessment</i>					
Indirect Cost Assessment	<u>416,692</u>	<u>811,221</u>	<u>23,956</u>	<u>23,956</u>	<u>835,177</u>
Cash Funds	349,689	510,000	40,663	40,663	550,663
Reappropriated Funds	12,392	47,678	(10,000)	(10,000)	37,678
Federal Funds	54,611	253,543	(6,707)	(6,707)	246,836
 <i>(3) Laboratory Services</i>					
<i>(A) Director's Office</i>					
Indirect Cost Assessment	<u>1,256,889</u>	<u>1,395,476</u>	<u>195,699</u>	<u>195,699</u>	<u>1,591,175</u>
Cash Funds	842,144	1,042,312	190,840	190,840	1,233,152
Reappropriated Funds	0	53,153	(23,153)	(23,153)	30,000
Federal Funds	414,745	300,011	28,012	28,012	328,023

	FY 2008-09	FY 2009-10	Fiscal Year 2009-10 Supplemental		
	Actual	Appropriation	Requested Change	Recommended Change	New Total with Recommendation
<i>(4) Local Public Health Planning and Support</i>					
Indirect Cost Assessment	<u>37,564</u>	<u>40,924</u>	<u>(6,682)</u>	<u>(6,682)</u>	<u>34,242</u>
Cash Funds	0	0	0	0	0
Reappropriated Funds	0	0	0	0	0
Federal Funds	37,564	40,924	(6,682)	(6,682)	34,242
<i>(5) Air Quality Control Division</i>					
<i>(A) Administration</i>					
Indirect Cost Assessment	<u>2,062,754</u>	<u>2,574,743</u>	<u>290,553</u>	<u>290,553</u>	<u>2,865,296</u>
Cash Funds	1,589,216	2,213,464	246,297	246,297	2,459,761
Reappropriated Funds	0	0	0	0	0
Federal Funds	473,538	361,279	44,256	44,256	405,535
<i>(6) Water Quality Control Division</i>					
<i>(A) Administration</i>					
Indirect Cost Assessment	<u>2,041,517</u>	<u>1,900,340</u>	<u>157,748</u>	<u>157,748</u>	<u>2,058,088</u>
Cash Funds	672,027	1,000,180	(93,292)	(93,292)	906,888
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,369,490	900,160	251,040	251,040	1,151,200
<i>(7) Hazardous Materials and Waste Management Division</i>					
<i>(A) Division Director's Office</i>					
Indirect Cost Assessment	<u>1,722,847</u>	<u>1,886,576</u>	<u>167,355</u>	<u>167,355</u>	<u>2,053,931</u>
Cash Funds	808,835	1,200,576	50,020	50,020	1,250,596
Reappropriated Funds	30,234	36,000	0	0	36,000
Federal Funds	883,778	650,000	117,335	117,335	767,335

	FY 2008-09	FY 2009-10	Fiscal Year 2009-10 Supplemental		
	Actual	Appropriation	Requested Change	Recommended Change	New Total with Recommendation
<i>(8) Consumer Protection</i>					
Indirect Cost Assessment	<u>137,145</u>	<u>222,281</u>	<u>(28,399)</u>	<u>(28,399)</u>	<u>193,882</u>
Cash Funds	91,379	164,458	(19,290)	(19,290)	145,168
Reappropriated Funds	0	7,000	0	0	7,000
Federal Funds	45,766	50,823	(9,109)	(9,109)	41,714
<i>(9) Disease Control and Environmental Epidemiology Division</i>					
<i>(A) Administration, General Disease Control and Surveillance</i>					
Indirect Cost Assessment	<u>2,286,841</u>	<u>3,050,328</u>	<u>(160,082)</u>	<u>(160,082)</u>	<u>2,890,246</u>
Cash Funds	13,878	50,000	(16,034)	(16,034)	33,966
Reappropriated Funds	0	0	0	0	0
Federal Funds	2,272,963	3,000,328	(144,048)	(144,048)	2,856,280
<i>(10) Prevention Services Division</i>					
<i>(A) Prevention Programs</i>					
<i>(1) Programs and Administration</i>					
Indirect Cost Assessment	<u>3,128,875</u>	<u>3,138,765</u>	<u>(226,514)</u>	<u>(226,514)</u>	<u>2,912,251</u>
Cash Funds	513,481	908,003	(222,347)	(222,347)	685,656
Reappropriated Funds	40,000	25,000	0	0	25,000
Federal Funds	2,575,394	2,205,762	(4,167)	(4,167)	2,201,595

	FY 2008-09	FY 2009-10	Fiscal Year 2009-10 Supplemental		
	Actual	Appropriation	Requested Change	Recommended Change	New Total with Recommendation
<i>(11) Health Facilities and Emergency Medical Services Division</i>					
<i>(D) Indirect Cost Assessment</i>	<u>1,662,761</u>	<u>1,758,691</u>	<u>(28,380)</u>	<u>(28,380)</u>	<u>1,730,311</u>
Cash Funds	416,651	530,931	18,484	18,484	549,415
Reappropriated Funds	502,647	552,760	0	0	552,760
Federal Funds	743,463	675,000	(46,864)	(46,864)	628,136
<i>(12) Emergency Preparedness and Response Division</i>					
(D) Indirect Cost Assessment - FF	932,408	1,848,000	(399,121)	(399,121)	1,448,879
Total for Supplemental #4	<u>16,050,638</u>	<u>19,049,956</u>	<u>0</u>	<u>0</u>	<u>19,049,956</u>
Cash Funds	5,480,996	7,839,924	183,282	183,282	8,023,206
Reappropriated Funds	587,209	797,350	(13,153)	(13,153)	784,197
Federal Funds	9,982,433	10,412,682	(170,129)	(170,129)	10,242,553
Supplemental #5 - Technical Corrections					
<i>(1) Administration and Support</i>					
<i>(A) Administration</i>					
Utilities	<u>472,362</u>	<u>597,427</u>	<u>51,000</u>	<u>51,000</u>	<u>648,427</u>
Cash Funds	58,799	84,524	0	0	84,524
Reappropriated Funds	368,943	390,727	51,000	51,000	441,727
Federal Funds	44,620	122,176	0	0	122,176

	FY 2008-09	FY 2009-10	Fiscal Year 2009-10 Supplemental		
	Actual	Appropriation	Requested Change	Recommended Change	New Total with Recommendation
<i>(2) Center for Health and Environmental Information</i>					
<i>(A) Health Statistics and Vital Records</i>					
Personal Services	<u>3,254,370</u>	<u>2,743,889</u>	<u>0</u>	<u>0</u>	<u>2,743,889</u>
Cash Funds	1,970,418	2,013,206	95,760	95,760	2,108,966
Reappropriated Funds	101,148	99,310	(95,760)	(95,760)	3,550
Federal Funds	1,182,804	631,373	0	0	631,373
Operating Expenses	<u>307,866</u>	<u>135,375</u>	<u>0</u>	<u>0</u>	<u>135,375</u>
Cash Funds	101,976	79,326	21,075	21,075	100,401
Reappropriated Funds	21,074	21,075	(21,075)	(21,075)	0
Federal Funds	184,816	34,974	0	0	34,974
<i>(7) Hazardous Materials and Waste Management Division</i>					
<i>(E) Contaminated Site Cleanup</i>					
Contaminated Sites Operating and					
Maintenance	<u>1,285,107</u>	<u>2,088,864</u>	<u>(51,000)</u>	<u>(51,000)</u>	<u>2,037,864</u>
Cash Funds	152,984	1,191,186	(51,000)	(51,000)	1,140,186
Reappropriated Funds	0	0	0	0	0
Federal Funds	1,132,123	897,678	0	0	897,678
Total for Supplemental #5	<u>5,319,705</u>	<u>5,565,555</u>	<u>0</u>	<u>0</u>	<u>5,565,555</u>
Cash Funds	2,284,177	3,368,242	65,835	65,835	3,434,077
Reappropriated Funds	491,165	511,112	(65,835)	(65,835)	445,277
Federal Funds	2,544,363	1,686,201	0	0	1,686,201

	FY 2008-09	FY 2009-10	Fiscal Year 2009-10 Supplemental		
	Actual	Appropriation	Requested Change	Recommended Change	New Total with Recommendation
August Emergency Supplemental #1 - Cash Fund Transfer from Tobacco Education Program Fund					
<i>(10) Prevention Services Division</i>					
<i>(A) Prevention Programs</i>					
<i>(5) Tobacco Education, Prevention, and Cessation</i>					
Tobacco Education, Prevention, and Cessation					
Grants - CF	26,885,441	26,283,727	(7,000,000)	(7,000,000)	19,283,727
<hr/>					
August Emergency Supplemental #2 - Cash Fund Transfer from Prevention, Early Detection, and Treatment Fund					
<i>(10) Prevention Services Division</i>					
<i>(A) Prevention Programs</i>					
<i>(1) Programs and Administration</i>					
Cancer, Cardiovascular Disease, and					
Pulmonary Disease Grants - CF	23,305,114	24,271,382	(7,000,000)	(7,000,000)	17,271,382
<hr/>					
August Emergency Supplemental #3 - Cash Fund Transfer from Health Disparities Grant Program Fund					
<i>(1) Administration and Support</i>					
<i>(B) Special Health Programs</i>					
<i>(1) Health Disparities Program</i>					
Health Disparities Grants - RF	2,980,718	8,463,419	(1,000,000)	(1,000,000)	7,463,419
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	FY 2008-09	FY 2009-10	Fiscal Year 2009-10 Supplemental		
	Actual	Appropriation	Requested Change	Recommended Change	New Total with Recommendation
August Emergency Supplemental #4 - Reduce Tony Grampas Youth Services Grants					
<i>(10) Prevention Services Division</i>					
<i>(D) Prevention Partnerships</i>					
<i>(2) Tony Grampas Youth Services Program</i>					
Prevention Services Programs	5,073,334	4,992,530	(1,000,000)	(1,000,000)	3,992,530
FTE	<u>2.8</u>	<u>3.0</u>	<u>0.0</u>	<u>0.0</u>	<u>3.0</u>
General Fund	999,301	1,000,000	(1,000,000)	(1,000,000)	0
Cash Funds	4,074,033	3,992,530	0	0	3,992,530
August Emergency Supplemental #5 - Reduce the Dental Care Act Funding					
<i>(10) Prevention Services Division</i>					
<i>(1) Rural Primary Care</i>					
Dental Programs	1,094,004	1,117,339	(520,131)	(437,131)	680,208
FTE	<u>3.3</u>	<u>3.0</u>	<u>0.0</u>	<u>0.0</u>	<u>3.0</u>
General Fund	382,008	579,356	(520,131)	(437,131)	142,225
Cash Funds	246,130	200,000	0	0	200,000
Federal Funds	465,866	337,983	0	0	337,983
Statewide Furlough Impact					
FTE	N.A.	244,655,741	(1,617,465)	(1,617,465)	243,038,276
General Fund		<u>1,288.1</u>	<u>0.0</u>	<u>0.0</u>	<u>1,288.1</u>
Cash Funds		11,786,159	(101,904)	(101,904)	11,684,255
Reappropriated Funds		57,530,887	(276,405)	(276,405)	57,254,482
Federal Funds		12,209,838	(52,497)	(52,497)	12,157,341
		163,128,857	(1,186,659)	(1,186,659)	<u>161,942,198.0</u>

	FY 2008-09	FY 2009-10	Fiscal Year 2009-10 Supplemental		
	Actual	Appropriation	Requested Change	Recommended Change	New Total with Recommendation

Totals Excluding Pending Items					
Department of Public Health and Environment					
Totals for ALL Departmental line items	393,905,263	390,499,054	(17,825,577)	(17,753,454)	372,745,600
FTE	<u>711.7</u>	<u>815.8</u>	<u>0.0</u>	<u>0.0</u>	<u>815.8</u>
General Fund	21,759,643	24,400,170	(1,622,035)	(1,539,035)	22,861,135
General Fund Exempt	478,004	504,000	0	0	504,000
Cash Funds	113,967,540	126,110,993	(13,744,282)	(13,755,159)	112,355,834
Reappropriated Funds	54,870,302	34,101,055	(1,102,472)	(1,102,472)	32,998,583
Federal Funds	202,829,774	205,382,836	(1,356,788)	(1,356,788)	204,026,048

Statewide Common Policy Supplementals					
(see narrative for more detail)	<u>N.A.</u>	<u>N.A.</u>	<u>(105,063)</u>	<u>Pending</u>	<u>N.A.</u>
General Fund			(177)		
Cash Funds			(12,763)		
Reappropriated Funds			(88,976)		
Federal Funds			(3,147)		

	FY 2008-09	FY 2009-10	Fiscal Year 2009-10 Supplemental		
	Actual	Appropriation	Requested Change	Recommended Change	New Total with Recommendation
Totals Including Pending Items					
Department of Public Health and Environment					
Totals for ALL Departmental line items	393,905,263	390,499,054	(17,930,640)	(17,753,454)	372,745,600
FTE	<u>711.7</u>	<u>815.8</u>	<u>0.0</u>	<u>0.0</u>	815.8
General Fund	21,759,643	24,400,170	(1,622,212)	(1,539,035)	22,861,135
General Fund Exempt	478,004	504,000	0	0	504,000
Cash Funds	113,967,540	126,110,993	(13,757,045)	(13,755,159)	112,355,834
Reappropriated Funds	54,870,302	34,101,055	(1,191,448)	(1,102,472)	32,998,583
Federal Funds	202,829,774	205,382,836	(1,359,935)	(1,356,788)	204,026,048

Key: