# 2015 MIDTERM ADJUSTMENT SUMMARY

DPH48500 - Department of Public Health 11000 - General Fund

Priority	Adjustment Title	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
	REDUCTION				
0.00	0.00 AIDS Services*	4,975,686	-124,392	4,851,294	4,851,294
00.00	0.00 Children with Special Health Care Needs*	1,220,505	-3,208	1,217,297	1,217,297
0.00	0.00 Childrens Health Initiative*	2,065,957	-13,981	2,051,976	2,051,976
0.00	0.00 School Based Health Clinics*	12,638,716	-798,147	11,840,569	11,840,569
	REVENUE				
1.00	1.00 Extend on-line license renewal option to additional DPH programs	0	24,681	24,681	24,681
	TECHNICAL				
1.00	1.00 Implement Background Check Program for Long Term Care Employees	0	144,268	144,268	212,104
	ADJUSTMENT TOTAL	20,900,864	622'022-	20,130,085	20,197,921

Head of Budgeted Agency (Signature)

Jewel Mullen, Commissioner

October 17, 2013

Date submitted

DPH48500 - Department of Public Health 11000 - General Fund

### **AIDS Services\***

Susan J. Maheux 860-509-7225

Priority:

0

Creation Date: 10/17/2013

### Description and Reason/Measure of Impact

Required Reduction equal to 5% of Appropriation

This reductions will impact approximately \$20,000 in emergency financial assistance that support, for example, preventing utility shut offs or evictions for low income people living with HIV/AIDS who are Ryan White Part B clients. The additional \$104,392 will reduce the number of HIV testing kits and other HIV prevention program supplies such as condoms. The program will use resources from the federal HIV prevention grant for these items.

Hariciais							
Account	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized	
12236 - AIDS Services	4,726,902	4,975,686	4,975,686	-124,392	4,851,294	4,851,294	
Total	4,726,902	4,975,686	4,975,686	-124,392	4,851,294	4,851,294	

DPH48500 - Department of Public Health 11000 - General Fund

# Children with Special Health Care Needs\*

Susan J. Maheux 860-509-7225

Priority:

Creation Date: 10/17/2013

# Description and Reason/Measure of Impact

Required Reduction equal to 5% of Appropriation

Reduction of \$3,208 is in uncommitted funds.

Account	2013 2014 Actual Estimated		2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized	
12264 - Children with Special Health (	1,211,087	1,220,505	1,220,505	-3,208	1,217,297	1,217,297	
Total	1,211,087	1,220,505	1,220,505	-3,208	1,217,297	1,217,297	

DPH48500 - Department of Public Health 11000 - General Fund

# Childrens Health Initiative\*

Susan J. Maheux 860-509-7225

Priority:

0

Creation Date: 10/17/2013

### Description and Reason/Measure of Impact

Required Reduction equal to 5% of Appropriation

Reduction of \$13,980.65 is in uncommitted funds.

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Account	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized	
12126 - Children's Health Initiatives	2,012,658	2,042,633	2,065,957	-13,981	2,051,976	2,051,976	
Total	2,012,658	2,042,633	2,065,957	-13,981	2,051,976	2,051,976	

DPH48500 - Department of Public Health 11000 - General Fund

# School Based Health Clinics\*

Susan J. Maheux 860-509-7225

Priority:

0

Creation Date: 10/17/2013

### Description and Reason/Measure of Impact

Required Reduction equal to 5% of Appropriation

In FY13, DPH issued an RFP for 11 new and 6 expanded School Based Health Clinic (SBHC) sites. The bid proposal totaled less by \$798,147 in available dollars for distribution. The dollars cited is the balance of the initial RFP available dollars. DPH was intending to reissue the RFP in FY14 for FY15 implementation but will forego this effort if the dollars are accepted as part of the 5% Reduction Plan.

This fund is used to support Match and Maintenance of Effort of federal grants at \$2,500,000 and \$4,181,181 respectively.

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	Account	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
	17019 - School Based Health Clinics	10,110,645	12,747,463	12,638,716	-798,147	11,840,569	11,840,569
	Total	10,110,645	12,747,463	12,638,716	-798,147	11,840,569	11,840,569

DPH48500 - Department of Public Health 11000 - General Fund

# Extend on-line license renewal option to additional DPH programs

Susan J. Maheux, Chief Fiscal Officer

860-509-7225

Priority:

Creation Date: 10/15/2013

### Description and Reason/Measure of Impact

Description and Reason:

This proposal would authorize the Department to expand the on-line license renewal system to additional license types and to implement on-line applications for initial licensing. Impacted programs include health professional licenses; water operator certification; and child, group and family day care and youth camp licenses. The Department was mandated to establish an on-line license renewal system for physicians, dentists and nurses and implemented the system in July 2009. Legislation was passed during the 2013 Legislative Session to require mandatory on-line renewal for all physicians, dentists and nurses that expire on and after October 1, 2013 and to establish a \$5 surcharge to offset credit card transaction fees. This proposal would NOT seek mandatory online renewal but would seek to allow the Department to offer on-line renewal services to other licensed individuals and entities and to establish the same \$5 surcharge. Extending this option to other licensed professions and entities enhances efficiency in licensing operations and provides licensees with additional options. With the passing of this proposal, DPH estimates a cost outlay of \$117,709 annually in fees associated with online transactions.

### Measure and Impact:

If \$5 surcharge is enacted, it is estimated that the State would earn approximately \$24,681 (estimated revenue of \$142,390 less estimated expense in online transaction fees of \$117,709) in additional net revenue per year. DPH anticipates approximately \$5.8m in annual revenue from the estimated new 28,478 applicants anticipated to be using the online system. The associated cost of \$117,709 is 2% of the projected annual revenue of \$5,885,452 (\$5,743,062 + \$142,390). A corresponding legislative proposal was also submitted.

Program Contact: Jennifer Filippone (also Lori Mathieu for Water and Deb Johnson for CBR) (860) 509-7414

Measure Statistic	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
Estimated number of online applications	0	0	0	28,478	28,478	28,478

### Revenue

Verrue							
	2013 Actual	2014 Estimated	2015 Base	2015 OPM Adjustment	2015 Revised	2016 Adjustment - Annualized	
46300 - Credit Card Fees	0	0	0	24,681	24,681	24,681	i
Total Gross Revenue				24,681	24,681	24,681	
		Actual	Actual Estimated  46300 - Credit Card Fees 0 0	Actual Estimated Base  46300 - Credit Card Fees 0 0 0	Actual         Estimated         Base         Adjustment           46300 - Credit Card Fees         0         0         0         24,681	Actual         Estimated         Base         Adjustment         Revised           46300 - Credit Card Fees         0         0         0         24,681         24,681	Actual Estimated Base Adjustment Revised Adjustment - Annualized  46300 - Credit Card Fees 0 0 0 0 24,681 24,681 24,681

Account	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized	
Total	0	0	0	0	0	0	
Total Net Revenue	0	0	0	24,681	24,681	24,681	

DPH48500 - Department of Public Health 11000 - General Fund

# Implement Background Check Program for Long Term Care Employees

Susan J. Maheux 860-509-7225

Priority:

Creation Date: 08/29/2013

### Description and Reason/Measure of Impact

### Description and Reason

In October 2010 and September 2012, DPH was awared \$1,952,075 and \$859,991 respectively for a total of \$2,812,066 of federal Centers for Medicare and Medicaid Services (CMS) grant funds, Grant No. 1A1CMS330809-01, to establish a background check program for employees of long-term care facilities. The CMS federal grant award was instrumental in the enactment of CGS 19a-491c. requiring the DPH to create and implement a background check program "within available appropriations". The Federal grant funding expires September 29, 2014. CMS has confirmed that this program's funding will not continue beyond 9/29/2014. CMS has indicated that all states will be required to establish a background check program in the coming years. At this time, Connecticut has the benefit of technical assistance from CMS and a close partnership with Department fo Emergency Services and Public Protection (DESPP). The long-term care facility stakeholders are operating with the anticipation of this program going live. Funding from this grant supports 3 Office Assistants to assist in processing the anticipated 15,000+ background checks under this program. Accordingly, state funding will be necessary for the final three guarters of FY 2015 (9/30/2014-6/30/2015) to support this program upon the expiration of the supporting federal grant. This will require: i. a continuation of state funds to support One (1) HPA position and ii. Three (3) Office Assistant staff as previously provided under the federal grant award.

### Measure of Impact

Prior to the passage of the background check legislation, Connecticut was in the minority of 8 states with no background check requirement for employees of long-term care facilities. Current voluntary background checks processes typically do not include a fingerprint-based check of criminal history databases, which is a necessary component of a strong background check program. Accordingly, this new program for long-term care facilities and providers facilitates the processing of criminal history and patient abuse background searches. A web-based Applicant Background Check Management System (ABCMS) will provide long-term care entities with a centralized, automated database to process and manage the background checks on prospective direct patient access employees under this program, with 15,000+ background checks anticipated per year. The ABCMS database will display prospective employee profiles and import related background check history, thereby enhancing safeguards to protect the health and welfare of long-term care residents and clients while facilitating informed hiring decisions. Based upon the experience of six states participating in a Background Check Pilot Program during 2006 and 2007, DPH planned a phased-in implementation of the program by category of long-term care facility. The first facility type to participate in the program will be Connecticut's nursing homes (approximately 240 facilities). The Connecticut General Assembly, long term care providers, our partners in other state agencies, Patient Advocates and other interested stakeholders are eagerly awaiting the "go live" of this program that is necessary to ensure patient and client safety that is required by Connecticut statute.

Program Contacts: Wendy Furniss, Matthew Antonetti

Phone (860) 509 - 7638

Measure Statistic	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
# of Background Checks anticipated to be performed	0	15,000	15,000	0	15,000	15,000

DPH48500 - Department of Public Health 11000 - General Fund

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	2013 Actual	2014 Estimated	2015 Base	2015 Adjustment	2015 Revised	2016 Adjustment - Annualized
Number of Full Time Positions		0 0	0	4	4	4
SID Code / Title						L
10010 - Personal Services		0 0	C	144,268	144,268	212,104
Total		0 0	C	144,268	144,268	212,104



# STATE OF CONNECTICUT

### DEPARTMENT OF PUBLIC HEALTH

To:

Honorable Benjamin Barnes

Secretary

From: Jewel Mullen, MD, MPH, MPA

Commissioner

Date:

October 25, 2013

Re:

**Expansion Options** 

RECEIVED

Per the instructions from Secretary Barnes' 9/16/13 memorandum:

Expansion options: As noted in my August 5th memo, it is our expectation that few if any expansion requests will be considered. To the extent expansions are considered, the focus should be on economic growth. Please send me an outline of any proposed economic growth proposals along with the estimated resources being requested no later than October 28th, with copies to the Executive Budget Officer and your budget analyst. Consideration will be limited to areas identified by this office in discussions with the Governor regarding his policy initiatives. We will notify you directly if the Governor wants a formal proposal submitted for his review.

Please see attached three expansion options for consideration submitted by the Department of Public Health. Note that one option will be transferred to the Office of Early Childhood (OEC) upon separation.

These expansion requests include:

- An Act to Appropriate State Expenditures to Complete a Comprehensive Statewide Coordinated Public Water Supply Plan
- Epidemiologist 3 Healthcare Access Program
- An Act Concerning Nutrition Standards (OEC)

Should you have any questions, please contact Susan Maheux at 860-509-7225.

Lisa Davis, Deputy Commissioner, Department of Public Health cc: Mary Ann Harward, Chief Administrative Officer, Department of Public Health Jill Kentfield, Legislative Liaison, Department of Public Health Elizabeth Keyes, Executive Assistant to the Commissioner, Department of Public Health Katharine Lewis, Deputy Commissioner, Department of Public Health Susan Maheux, Chief Fiscal Officer, Department of Public Health Paul Potamianos, Executive Budget Officer, Office of Policy and Management Joan Soulsby, Principal Budget Specialist, Office of Policy and Management

# Department of Public Health (DPH) 2014-15 Budget Option

Type of Option (Choose One):			х	Expansion		Reduction	<u> </u>	Revenue
Option Title:	An Act Concerning 1	Nutrition Standard	İs					
Fi	scal Contact Person:	Susan J. Maheux,	Chief	f Fiscal Officer			Phone #:	860-509-7225
Prog	ram Contact Person:	Debra Johnson					Phone #:	860-509-7578
!	Statutory Reference:	CGS 19a-77 throu	gh 19	a-87a and 19a-77	through 87	<sup>7</sup> e		
Description and Reason:	child day care center or child on the prem hours to support the This proposal increa	;, group day care h ises of the center, g continuation and ses the regulatory:	ome o group durat respo	or family day car or family day ca ion of breastfeed onsibilities of Chil	e home sha re home, ot ing per AA d Care Lice	WIC Program legislativ Il provide a place for a l ther than a bathroom or P policy statement on b ensing Specialists to mor Office of Early Childho	oreastfeeding mother toilet stall, during no reastfeeding and use nitor compliance and	to feed her infant ormal business of human milk.
Measure and Impact:	One additional Child estimates approximational childing those relationships	ately 1845 inspectio	ons co	onducted each ye	ar in respor	ompliance and follow-u nse to complaint investi	p on issues of noncor gations and enforcem	npliance. DPH ent activities

# Quantifiable Statistics:

Fiscal Year	2013	2014	2015	2015	2015	2016	2016	2016
Description	Actual	Estimated	Base	Option	Revised	Base	Option	Revised
# of Minutes to conduct full unannounced routine inspection (Per Year)	221,400	221,400	221,400	9,225	230,625	230,625	-	230,625
# of Minutes to conduct complaint investigations and enforcement related to breastfeeding requirements. (per year)	4,500	4,500	4,500	2,160	6,660	6,600	-	6,600

<sup>\*</sup>Add more rows are needed

### Financials:

rinanciais:						DO4 E	2016	T and	2016
	Number of	2013	2014	2015	2015	2015	2016	2016	2016
SID Code	Positions/Units	Actual	Estimated	Base	Option	Revised	Base	Option	Revised
SID # 10010	1	. \$0	\$0	\$0	\$62,404	\$62,404	\$0	\$66,197	\$66,197
SID # 10020- Computer/Sfware	1 .	\$0	\$0	\$0	.\$1,010	\$1,010	\$0	\$0	\$0
SID # 10020- Telephone	1	\$0	\$0	\$0	<b>\$</b> 200	\$200	\$0	\$200	\$200
SID # 10020- Motor Vehicle (DAS Fleet)	1	\$0	\$0	\$0	\$300	\$300	\$0	\$300	\$300
Hotal		<u>\$0</u>	<u>\$0</u>	<u>50</u>	\$63,914	\$63,914	<u>\$0</u>	<u>\$66,697</u>	<u>\$66,697</u>

\*Add more rows if needed

# Department of Public Health (DPH) 2014-15 Budget Option

Type of Op	ption (Choose One):		Х	Expansion		Reduction			Revenue
ption Title:	Epidemiologist 3 He	ealthcare Acce	ess Program						
E;	scal Contact Person:	Sucan I Mahe	eny Chief F	iscal Officer				Phone #:	860-509-7225
	ram Contact Person:				ltant			Phone #:	860-509-7455
								i none #.	800-309-7433
	Statutory Reference:	Statutory Aut	morny: CG	5 Sections 19a-2	a anu 4-0.				
Description and Reason:	DPH is requesting for expanding School Boreporting and data of 82 to 93 centers in so and evaluation. Teareimbursements that for all state funded Sepidemiologist 3 por accuracy submitted responsible for the canalysis of this inforprogrammatic monitorial state of the canalysis of the canalysis of the canalysis of this inforprogrammatic monitorial school by the separation of the canalysis of this inforprogrammatic monitorial school by the separation of the sep	ased Health Co collection techn chool year 2013 chnical expertise rough third par SBHCs to subro sition will con by Communite creation of a M rmation and w	center Progra nical assista: 3-2014 are a ise varies wi rty billing or mit through mplete moni ty Health Ce ficrosoft Acc vill be respon	am and Commu- nce on an ongoing ble to report critically from schoo ccurs inconsister third party billing itoring of contractions of contractions center (CHC) contractions that the complete of the complete	nity Health C ng basis to en ical programu I based health ntly. The Epid ng for reimbu ct outcome m tractors (curre at would inch eting data and	enter Programs. The sure the School Base matic and financial of a center to school balemiologist 3 will prursement of Medical, easures and Uniformently 14 contractors and this information	e position is need to Health Centrol at a for program sed health centrol assistance Dental, and Ben Data Set (UD) with a total of 3 to facilitate the	eded to provi er Programs - mmatic planm er and submi te to ensure sy ehavioral Hea S) informatio 37 sites). This e monitoring,	ide information - expanded from hing, measurement ission for ystems are in place alth services. This on for clarity and s position may be management and
Measure and Impact:	reimbursement thro reinvestment in exp become less reliant to all 93 state funde new programmatic duties to be perform	ICs apart from lts Based Acco ough third part panding or sust on funds proved d School Based expectations to ned independents	n state fundicuntability for ty billing (in staining serverided through d Health Ce to align with ently: a) prong gathering	ng. Oversight vormat that ties and cluding Medicatices. The option of the Departmenter programs and Results Based Apprision of assistation of assistation of data from control of the department	will be improved the control of the	ved to ensure that SI putcomes to funding tate the SBHCs abilitiong term savings to lealth to sustain the lew state funded SBI y (RBA) implemental aluation of programmetations of informatic	received. Expany to successful the state as SB reports to programs in tion will require matic results to reported by	state funds a anded ability ly access add. HCs receivin ons. Assistance on future years re the following include both y Community	are reporting to submit for itional income for g state funds will ce will be provided s. Additionally, ng higher level a process and y Health Center

Quantifiable Statistics:

Fiscal Year	2013	2014	2015	2015	2015	2016	2016	2016
Description	Actual	Estimated	Base	Option	Revised	Base	Option	Revised
Generation of reports for SBHCs to respond to requests for quarterly / annual summary reports, Result Based Accountability(RBA), legislative needs	116	116	. 116	24	140	140	0	140
Number of SBHC Total Visits (medical/Behavioral Health/Dental)	42,200	42,200	42,200	13,800	56,000	56,000	0	56,000
Multi-phase data Technical Accountability and support to 93 SBHC sites in FY 2013	181	181	181	49	230	230	0	230

programs in the Section including Waterbury Health Access Program, Project Access New Haven and Planned Parenthood

analysis required for the RBA process includes a multistep analytical process involving multiple variables and their impact on the delivery of services and outcomes. The Epidemiologist 3 will need to analyze not only the number of clients served, but how well the program performs in providing services, and if clients are better off as a result. The Epidemiologist would also provide support to the other Health Access

\*Add more rows are needed

### Financials:

	Number of	2013	2014	2015	2015	2015	2016	2016	2016
SID Code	Positions/Units	Actual	Estimated	Base	Option	Revised	Base	Option	Revised
10010 (PS)	1	\$0	\$0	\$0	\$72,321	\$72,321	\$0	\$76,717	\$76,717
10020 - Computer	1	\$0	\$0	\$0	\$680	\$680	\$0	\$0	\$0
Total		<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	\$73,001	\$73,001	<u>\$0</u>	<u>\$76,717</u>	<u>\$76,717</u>

\*Add more rows if needed

### Department of Public Health (DPH) 2014-15 Budget Option

Type of Option (Choose One):			х	Expansion		Reduction			Revenue	
Option Title:	An Act to Ap	ppropriate State E	xpenditures to Co	omplete a Comp	orehensive Statev	vide Coordinated	Public Water Sup	ply Plan		
Fiscal Contact Person:		Susan J. Maheux	, Chief Fiscal Offi	icer				Phone #:	860-509-7225	
Program Contact Person		Lori Mathieu, DI	PH-Drinking Wat	er Section- Pub	lic Health Section	n Chief		Phone #:	860-509-7333	
Statutory Reference:		CGS Section 25-3	33g, CGS Section	25-33h						
Description and Reason	statewide coor technically acc state's public to providers. The adequacy and RESPONSIBI TIMING: Imm finding was in CGS Section 2 and well-bein waste. In orde Department of accountable D	rdinated public water curate, up to date conwater systems. Comy a providers will be a the water utility's concentration of the water utility's contended in the water utility's contended in the water utility's contended in the water completed as erformed in the proper completed as erformed in the proper completed in the proper completed in the proper completed in the proper complete in th	er supply planning a mprehensive DPH a pletion of the statew pproved by the DPF ommitment to increa of Health Pursuant that de priority item. The avisioned due to cest e General Assembly e state. Readily ava ent and effective deval administer proced sive Service Area (E	assigned to the Di approved statewinde coordinated of following supples of the public according to the coordinate of the	PH pursuant to CGS de water supply pla planning process wi by adequacy technic untability to any cor 33c through CGS S dinated public water nding and lack of a equate supply of po se in public water s state's public water e the planning of pu Il requires completi	ection 25-33i, inclusi r system planning provailable accurate pul table water for dome systems is limited an supply systems and ablic water supply syon.	of the statewide plat approved supply actatewide assignment ingent on demonstrative rocess that was create blic water supply tecestic, commercial and d should be developed to promote public hystems." The statewice	nning process will dequacy technical roof Exclusive Serviced current and futured as a result of a 1th hnical data. The find industrial use is ved with a minimum ealth, safety and wide assignment of re	produce a eviews of the ne Area (ESA) are supply 985 legislative ding codified as ital to the health n of loss and elfare, the sponsible and	
	The Department's assistance provided to the University of Connecticut's supplemental supply efforts included detailed supply adequacy technical reviews that were conducted for each supply alternatives under consideration. These efforts are a demonstration of the Department's ability to provide independent verification of a water utility's current and future water supply adequacy, a critical requirement necessary to ensure safe and adequate public water supplies for all Connecticut residents. The technical assistance likely contributed to significant cost savings to state residents; similar savings, of a lesser magnitude, could reasonably be achieve for several municipalities if analogous technical reviews of Connecticut's largest public water systems are completed by the DPH. These technical reviews are an essential, critical element of successfully completing an up to date, technically accurate comprehensive statewide coordinated water supply plan.									
Measure and Impact	Consultant Support Requested:	pport   Contract to complete legislative mandate for statewide coordinated public water supply planning   Consultant   \$750,000.00								
	Staff Salary Support Requested:	ort (5) Positions (Environmental Analyst 1) <u>Support</u> \$431,990.0								
Quantifiable Statistics:										
Fiscal Year	Ţ	2013	2014	2015	2015	2015	2016	2016	2016	

# Financials:

Description

N/A

Actual

0

Estimated

0

1 IIIIIICIAIS.									
	Number of	2013	2014	2015	2015	2015	2016	2016	2016
SID Code	Positions/U	Actual	Estimated	Base	Option	Revised	Base	Option	Revised
SID # 10010(PS)	5	\$0	\$0	\$0	\$275,232	\$275,232	\$0	\$292,220	\$292,220
SID # 10020-Consultant	0	\$0	\$0	\$0	<b>\$</b> 375,000	\$375,000	\$0	\$375,000	\$375,000
SID # 10020-Computer	5	\$0	. \$0	\$0	\$3,400	\$3,400	\$0	\$0	\$0
Total		<b>S</b> 0	\$0	\$0	\$653,632	\$653,632	50	\$667.220	\$667,220

Base

0

Option

0

Revised

0

Base

0

Option

0

Revised

0

<sup>\*</sup>Add more rows are needed