

Rank	State Funds	Total Funds	Ongoing State Funds Building Block Priority List - Department of Human Services	Source	Alternative Funding Sources?
1	\$ 2,543,300	\$ 8,395,000	<p><b>DHS - DSPD Structural Imbalance in Medicaid Waiver</b> - to replace one-time funds currently covering a structural imbalance in the Medicaid Community Supports Waiver program.</p> <p><b>How Measure Success?</b> DSPD will not have to impose a rate reduction to all contracted service providers effective July 1, 2013.</p>	Gov. & Agency	None
2	\$ 1,866,000	\$ 6,210,700	<p><b>DHS - DSPD Mandated Additional Needs</b> - a Medicaid requirement that the health and safety service needs of individuals receiving waivers be met. Of the 4,800 covered individuals, 650 or 13.0 % identified as having increased health and safety needs.</p> <p><b>How Measure Success?</b> DSPD will meet the basic health and safety needs of Medicaid waiver recipients and avoid the loss of federal funding for needed services.</p>	Gov. & Agency	None
3	\$ 62,800	\$ 251,200	<p><b>DHS - Federal Pre-admission Screening and Resident Review (PASRR)</b> - to help ensure individuals with a mental illness or intellectual disability-related condition, and who have no substantial physical impairments, are not warehoused in nursing facilities.</p> <p><b>How Measure Success?</b> Complete evaluations within the required time frames (Feds, CMS)</p>	Agency	None. All States are required to pay the match for Medicaid for this service
4	\$ 97,500	\$ 157,200	<p><b>DHS - Human Services Licensing Caseload Growth</b> - Current licensing specialist caseloads are at 146 cases with a projected caseload of 159 cases by FY 2014 if current trends continue. Of particular concern is the licensing of foster parents.</p> <p><b>How Measure Success?</b> Issuance of a license within 30 days after verification of compliance.</p>	Agency	A 50% licensing fee increase across the board for all Human Service licensed programs could generate as much as \$92,000 for the General Fund (based on FY12 collections) to offset the cost of this building block.

5	\$ 3,500,000	\$ 3,500,000	<p><b>DHS - Mental Health Early Intervention for Children/Youth</b> - children's mental health promotion/mental illness prevention, funded one time during the 2012 General Session.</p> <p><b>How Measure Success?</b> Is the child/youth living at home? Is the child/youth in school? Is the child/youth staying out of trouble? Is there a reduction in symptoms, are they in recovery or returned to the community norm? Is there an increase in the child/youth's ability to cope?</p>	Agency	Re-Prioritize services and take money that has traditionally gone out on formula for general services to the Local Mental Health Authorities (LMHA) and require funding for Mental Health Early Intervention Services (decrease other services). One-time DCFS non-lapsing of \$1.5 m.
6	\$ 1,054,100	\$ 1,054,100	<p><b>DHS - Youth Aging Out of DCFS Custody</b> - Maintain youth with intellectual disabilities on the Medicaid waiver who are aging out DCFS custody.</p> <p><b>How Measure Success?</b> DSPD will meet the basic health and safety needs of Medicaid waiver recipients and avoid the loss of federal funding for needed services.</p>	Gov. & Agency	None
7	\$ 227,600	\$ 227,600	<p><b>DHS - Adult Protective Services Caseload Increases</b> -3 additional caseworkers, 2 of which will help with increasing field caseloads (particularly in rural areas of the state) and 1 with increasing intake caseloads.</p> <p><b>How Measure Success?</b> APS measures cases/caseload and # of dropped calls on the intake line.</p>	Gov. & Agency	None

8	\$ 99,300	\$ 292,200	<p><b>DHS - ORS - Addition of System Development Staff</b> - add 2 system development staff to reduce a significant number of state and federally mandated system enhancements/changes backlogged.</p> <p><b>How Measure Success?</b> This is a difficult measurement to predict. The results would depend on the skill sets possessed by the individuals hired and which projects those individuals could immediately impact. Two potential project areas where new developers could have a significant impact are the further automation of ORS accounting systems (where success would be measured by the increased number of payments received and posted automatically) or the ongoing document generation system replacement (where success would be measured by the increased number of forms generated from the new system; and the associated savings for postage, mail preparation time, printing costs, etc).</p>	Gov. & Agency	There are no external alternative funding sources to access. The only option would be to decrease staff members dedicated to caseload management and customer service and shift those FTE positions to the technical group to meet the federally mandated enhancement deadlines.
9	\$ 313,700	\$ 922,600	<p><b>DHS - ORS - Child Support Staff Due to Federal Health Care Reform</b> - As a condition of eligibility for Medicaid, participants are required to cooperate with the federal child support program (ORS in the state of Utah) to establish paternity, child support, and medical support. This results in at least one child support case per family.</p> <p><b>How Measure Success?</b> The successful use of additional staff members would be demonstrated by continuing to meet the federally regulated performance standards, improving overall collection totals, and demonstrating the mitigated increases to individual caseload sizes due to the additional staff members, despite the fact that the total number of cases handled by ORS continues to rise each year.</p>	Agency	There are no external alternative funding sources to access. ORS will continue its current practice of cutting non-personnel-related costs where options become available in favor of funding as many of the necessary staff positions as possible.

10	\$ 250,000	\$ 250,000	<p><b>DHS - Replace One-time Meals on Wheels Fund with Ongoing Funding</b>  - program provides one meal a day that meets 1/3 of the dietary reference intake for elderly persons who are age 60 or over, home bound, and who have limited capacity to provide nutritionally-balanced meals for themselves.  <b>How Measure Success?</b> The AAAs keep track of the # of meals served.</p>	Gov. & Agency	None
11	\$ 823,300	\$ 1,120,200	<p><b>DHS - DCFS - Out of Home Care Services</b> - there is an increase in the numbers and costs for children in custody with severe needs. These children require high cost, individualized residential treatment services.  <b>How Measure Success?</b> A) There would be a decreased time that clients are in foster care. When proper service is provided, it decreases the likelihood that a child's time in foster care is extended.</p>	Agency	DCFS received permission to use nonlapsing funds for ongoing programs
12	\$ 253,500	\$ 263,900	<p><b>DHS - Foster Parent Rate Increase</b> - Foster parent rates were reduced as part of budget reductions in the 2009 General Session. This request has two components: 1) \$188,900 General Fund to restore foster parent rates back to 2009 General Session levels and 2) \$64,500 General Fund to make rates paid by DCFS to disability providers consistent with the rates paid by DSPD to those same providers.  <b>How Measure Success?</b> A) Greater ability to recruit and retain foster parents. B) Basic care and supervision needs of foster children are provided.</p>	Agency	None

13	\$ 2,435,900	\$ 2,435,900	<p><b>DHS - Drug Courts</b> – Drug courts provide treatment, community supervision, and intensive judicial review to individuals with serious and chronic substance use disorders - provided through coordinated efforts of the judiciary, prosecution, defense counsel, probation, law enforcement, and social services.</p> <p><b>How Measure Success?</b> Alcohol and drug use at admission and discharge. Arrests 30 days prior to admission and 30 days prior to discharge. Percentage of patients who are homeless at admission and discharge. Employment at admission and discharge. Number of children reunified with parents (reduce the number of participants who have their parental rights terminated).</p>	Agency	No alternative funding sources
14	\$ 47,700	\$ 47,700	<p><b>DHS - State Hospital - Restore Funding Loss Due to Fed ACA</b> - restore a Disproportionate Share Hospital (DSH) funding loss resulting from provisions in the federal Affordable Care Act.</p> <p><b>How Measure Success?</b> clinical outcome tools demonstrate patient improvement</p>	Agency	reduce staff hours or services
15	\$ 4,485,200	\$ 4,485,200	<p><b>DHS - Local Mental Health Authority Medicaid Match</b> - many of the local authorities are struggling to provide the Medicaid match with limited state and local county revenue.</p> <p><b>How Measure Success?</b> The DSAMH has a broad array of performance measures for each local authority and these measures, with the corresponding results, are published annually in a scorecard. The performance scorecards are available on the DSAMH website.</p>	Agency	No alternative funding sources. Clients are indigent and have no resources to pay for services.

16	\$ 150,000	\$ 150,000	<p><b>DHS - DSPD Family Preservation and Service Broker Services</b> -provide 30 percent of individuals on the disabilities waiting list (575) and their families with family preservation and service broker services. DSPD states that both programs are helpful in defraying and delaying high cost residential placements.</p> <p><b>How Measure Success?</b> At least 575 individuals currently on the DSPD waiting list will receive temporary, one-time services to help prevent the break-up of families and to connect families with available community resources.</p>	Agency	None
17	\$ 3,079,000	\$ 10,247,000	<p><b>DHS - Disabilities Waiting List</b> - Fund 25% of the current Disabilities Waiting List. s of June 30, 2012, there were 1,825 individuals with severe disabilities waiting for services at a total calculated cost of \$43,006,800 (\$12,461,200 in state General Fund).</p> <p><b>How Measure Success?</b> There will be a reduction in the number of people waiting for needed disability services.</p>	Agency	None
18	\$ 474,700	\$ 474,700	<p><b>DHS - Domestic Violence Shelters - Caseload Increases</b> -DCFS provides federal and state funds to 12 private domestic violence shelters. Shelters had to deny 2,515 requests for services in the past year.</p> <p><b>How Measure Success?</b> A) Fewer adult and child clients being declined services. B) Improved services for victims who have experienced family violence</p>	Agency	None
19	\$ 310,000	\$ 310,000	<p><b>DHS - Aging - Increase Caregiver/Respite Funding</b> - This program is meant to support many older adults who desire to live at home and stay close to their families for as long as appropriate.</p> <p><b>How Measure Success?</b> The AAAs keep track of the # of clients served.</p>	Agency	None

20	\$ 895,000	\$ 895,000	<p><b>DHS - Evidence-based Substance Abuse Prevention</b> - sustain and expand family-based programs for the prevention and treatment of child abuse and neglect related to substance use disorders.</p> <p><b>How Measure Success?</b> Increase parents' sense of self-worth, personal empowerment, empathy, bonding, and attachment. Increase the use of alternative strategies to harsh and abusive disciplinary practices. Increase parents' knowledge of age-appropriate developmental expectations. Reduce abuse and neglect rates.</p>	Agency	No alternative funding sources.
21	\$ 500,000	\$ 500,000	<p><b>DHS - Substance Abuse Medication Assisted Therapy</b> - provide Medication Assisted Therapies (MAT) to 200 qualifying individuals through the Access to Recovery (ATR) provider network in Salt Lake, Utah, and Weber counties.</p> <p><b>How Measure Success?</b> The performance of the program will be measured by the Government Performance Results Act (GPRA) outcome measure tool.</p> <ul style="list-style-type: none"> <li>- Abstinence from Alcohol and Drugs from intake to post six months.</li> <li>- Individuals currently employed or attending school from intake to post six months.</li> <li>- Individuals experiencing no alcohol or drug related health, behavioral or social consequences from intake to post six months.</li> <li>- Individuals with permanent housing from intake to post six months.</li> </ul>	Agency	No alternative funding sources.

22	\$ 1,161,900	\$ 2,256,000	<p><b>DHS - 1% Contract Provider Increase</b> - UCA 63J-1-201(4-5) requires the Governor to consider "the same percentage increase for wages and benefits that he includes in his budget for persons employed by the state" for certain contract providers. UCA 63J-1-201.7 requires the Legislature to also make a similar 'consideration.' (\$1,150,800 for all 'named' providers within Social Services)</p> <p><b>How Measure Success?</b> Contract Monitoring, ability to recruit and retain qualified providers.</p>	Agency	None
	\$ (512,500)	\$ -	<p><b>DHS - Federal Medical Assistance Percentage (FMAP) Rate Change</b> - represents the change in the federal share of the programmatic costs for Medicaid and federal Title IV-E (of the Social Security Act) programs.</p> <p><b>How Measure Success?</b></p>	LFA	
	<b>\$ 24,118,000</b>	<b>\$ 44,446,200</b>	<b>Total</b>		