Rank	One-time	Total Funds	One-time State Funds Building Block Priority List - Department of Health	Source	Alternative Funding Sources?
1	$ 213,600	$ 427,100	**DOH - Data Security and Privacy Office -** Money is for 6 FTEs to address security gaps in the Department's information systems as recommended by a study by Deloitte. **How Measure Success?** (See #6 in ongoing list for outcome measures) **Performance Measures:** (1) Implement the 100 HIPAA Privacy and Security Policies and update policies, procedures and standards as required (2) Conduct annual training for all HIPAA covered employees (3) Coordinate risk assessment and implement risk management for 116 "confidential/restrict" information systems annually (4) In year 1 establish and implement the business mechanism to assure management of security controls and system application changes. (5) Review and audit third-party IT products to assure contractors/vendors meet the DOH privacy and security requirements (6) Develop, update, and test contingency/emergency operation plans annually (7) Coordinate an efficient information security governance.	Gov. & Agency	
2	$ 4,000,000	$ 40,000,000	**DOH - MMIS Replacement Phase 3 of 4 (FY 2014) -** Money is for phase 3 of 4 for the replacement of the Medicaid Management Information System. The Department estimates that another $2,000,000 one-time General Fund would finish the replacement. **How Measure Success?** Project completed and performing functions as specified in the system design.	Gov. & Agency	One-time FY13 Medicaid surpluses could be used to fund the MMIS project.
3	$ 250,000	$ 250,000	**DOH - Local Health Department Emergency Assistance Fund -** Money is to fund SB 20 Local Public Health Emergency Funding (Stowell) from the 2009 General Session. **How Measure Success?** 1) Negotiated threshold for the use of the fund. 2) Adequate emergency reserve fund is maintained to ensure statewide public health response to disease outbreaks.	Agency	One-time FY13 Medicaid surplus could be used to address one-time needs or supplemental within the Social Services Appropriation Subcommittee.

4	$ (40,900,000)	$ (134,583,700)	**DOH - Medicaid Caseload Decrease -** Medicaid ended FY 2012 with unexpected unspent balances of $19.1 million or 5% in unspent General Fund. The surplus is 1.4% due to caseload and 3.6% due to per member per month (PMPM) cost estimates. Additionally this building block includes the following: (1) Estimated increase of 5,900 or 2% clients in FY 2013. A utilization increase of 3% in FY 2013. (2) Additional $2.5 million in FY 2013 for funding of costs for the run out associated with change to accountable care organizations in January 2013. **How Measure Success?** Actual Medicaid enrollment and associated per member per month (PMPM) costs, as well as the FY2012 carry-forward balance.	Gov. & Agency	This one-time unspent funding could be used to address one-time needs within the department.
5	$ 922,000	$ 922,000	**DOH - Credit Monitoring -** Provide an additional year of credit monitoring for up to 59,000 data breach victims. **How Measure Success?**	Gov.	One-time FY13 Medicaid surplus could be used to address one-time needs.
6	$ (3,800,000)	$ (18,069,400)	**DOH - CHIP Caseload Growth-Inflation -** Actual caseloads and per member per month costs have been lower than originally forecasted. **How Measure Success?**	Gov.	
7	$ 130,000	$ 130,000	**DOH - Health Facility Licensing Funding for HB 497 -** The agency estimates $130,000 annual General Fund costs beginning in FY 2013 to implement the provisions of HB 497 Clearance for Direct Patient Access from the 2012 General Session. The fiscal note (http://le.utah.gov/lfa/fnotes/2012/HB0497S02.fn.pdf) for the bill stated that there would be ongoing costs to the state but not until FY 2015. From the fiscal note: "The Department of Health will have increased costs of $15,200 one-time in FY2012 and $105,000 ongoing beginning in FY2013 for 0.5 FTE and data maintenance contracts for a new system for administering background checks. In FY2013 and FY2014 these administrative increases will be paid for with the federal funds mentioned above. Beginning in FY2015 these ongoing costs would be paid for with General Fund." **How Measure Success?** (See #11 in ongoing list for measures #1 & #2) (3) Increase the scope of background checks that also checks state regulatory registries and records. (4) Increase the scope of employees that are checked in the system.	Agency	

8	$ (65,000)	$ (65,000)	**DOH - All Payers Database Delay -** To reflect the half year without a vendor to provide services for the all-payer database for medical claims. The contractor stopped submitting bills in January 2012 and ceased serving the State in September 2012. In January 2013 the Department is in the process of identifying a new contractor. The full year cost of the contract is $230,000 General Fund.	LFA	N/A
9	$ (60,100)	$ (60,100)	**DOH - HB 256, 2011 GS Funding Not Needed -** The Legislature provided the Department of Health $60,100 in SB 3 to implement capitated dental contracts as per HB 256 Children's Health Insurance and Medicaid Administrative Simplification from the 2011 General Session. The Department has indicated that they did not have a vendor that would save the State money in an urban area. This money is available beginning in FY 2013. **How Measure Success?** (See #12 in ongoing list)	LFA	N/A
10	$ 56,100	$ 56,100	**DOH - Tobacco Funding Shift -** The fiscal analyst recommends providing $56,100 General Fund one-time in FY 2013 to the Department of Health to reflect the actions taken by the Social Services Appropriations Subcommittee during the 2012 General Session. During the preparation of budget bills the $56,100 ended up in another line item to address a revenue shortfall.	LFA	N/A
11	$ (59,800)	$ (139,200)	**DOH - 3% from the Nursing Care Facilities Account -** There is a 3% maximum for administration from the Nursing Care Facilities Account as permitted by UCA 26-35a-106. There is $59,800 ongoing available beginning in FY 2013.	LFA	N/A
	$ (39,313,200)	**$ (111,132,200)**	**Total**		