

Department of Human Services
Executive Director Operations (EDO)

The Legislature intends the departments of Health, Human Services, and Workforce Services and the Utah State Office of Rehabilitation provide to the Office of the Legislative Fiscal Analyst by **June 1, 2015** a report outlining how funds are distributed within the state when passed through to local government entities or allocated to various regions and how often these distributions are reviewed and altered to reflect the relevant factors associated with the programs.

- (1) Is the program considered a statewide program (this would include something that serves all rural areas)?
 - a. Is the implementation of the program really statewide? If not, is there a compelling reason why?
- (2) Who gets the money (by county)?
- (3) What is the methodology for distributing the money?
 - a. How does the distribution compare to actual need as expressed by population? [If distributions are not reflecting current need (as represented by population), please explain why not?]
 - b. If not done by population, what is the reason?
- (4) Does statute say anything about distribution and equity for the program?

PROGRAM NAME **Social Services Block Grant - Local Discretionary Distribution**

- (1) Yes, this is considered a statewide program
 - a. All counties, or associations of counties within the state, are awarded a portion of the funding for services throughout the state. However the entities themselves are responsible for implementation of programs in their areas.

(2) FY15 Allocation:

Davis	Weber/Morgan	Tooele	Salt Lake	San Juan	Bear River	Uintah Basin	Mountainland	Southeast Utah	Five County	Six County	TOTAL
105,600	81,500	53,900	353,900	58,900	55,700	52,700	202,100	47,500	69,900	59,000	1,140,700

- (3) The methodology for distributing the money is based on the following formula (R495-861):
 Each area with less than 15,000 population will receive a base of \$54,000.
 Each area with less than 150,000 population will receive a base of \$34,000
 The remainder of the money will be allocated based on a percentage of each areas' population to the State population.
 - a. The distribution is based on population as outlined in R495-861
 - b. n/a
- (4) No

Department of Human Services

Division of Substance Abuse and Mental Health (DSAMH)

The Legislature intends the departments of Health, Human Services, and Workforce Services and the Utah State Office of Rehabilitation provide to the Office of the Legislative Fiscal Analyst by **June 1, 2015** a report outlining how funds are distributed within the state when passed through to local government entities or allocated to various regions and how often these distributions are reviewed and altered to reflect the relevant factors associated with the programs.

- (1) Is the program considered a statewide program (this would include something that serves all rural areas)?
 - a. Is the implementation of the program really statewide? If not, is there a compelling reason why?
- (2) Who gets the money (by county)?
- (3) What is the methodology for distributing the money?
 - a. How does the distribution compare to actual need as expressed by population? [If distributions are not reflecting current need (as represented by population), please explain why not?]
 - b. If not done by population, what is the reason?
- (4) Does statute say anything about distribution and equity for the program?

PROGRAM NAME: Mental Health

- (1) Yes
 - a. It is state wide.
- (2) We are organized by Local Mental Health and Substance Abuse Authorities. Some of the smaller counties have banded together to form a local authority that represents the needs for that particular group. You would need to contact the local authorities to determine what funding ultimately gets spent in which county.

1,878,200	Bear River Mental Health (Box, Cache, Rich)
1,145,100	Central Utah Mental Health (Juab, Millard, Piute, Sanpete, Sevier, Wayne)
3,347,100	Davis Behavioral Health (Davis)
613,800	Four Corners Behavioral Health (Carbon, Emery, Grand)
738,100	Northeastern Counseling Center (Daggett, Duchesne, Uintah)
11,275,200	Optum Health (Salt Lake County)
430,600	Valley Mental Health (Summit)
650,400	Valley mental Health (Tooele)
2,441,900	Southwest Center (Beaver, Garfield, Iron, Kane, Washington)
2,564,300	Weber Mental Health (Morgan, Weber)
5,728,600	Wasatch Mental Health (Utah)
322,300	Wasatch County
213,100	San Juan County
\$ 31,348,700	
- (3) Population: Outlined in 62A-15-108 Formula for allocation of funds to local substance abuse authorities and local mental health authorities and Rule R523-4-8 Formula for Allocation of funding
 - a. Currently, needs exceed resources available to the department/local authorities. Funds are allocated based upon statute and/or rule.
 - b. It is done by Population with a rural differential

(4) Yes, in brief this section outlines that funding shall be distributed by need, and then defines need as being measured by population, "unless the division establishes, by valid and accepted data, that other defined factors are relevant and reliable indicators of need." The mechanics and more detail of how allocations happen are found in Utah Administrative Rule R523-4-8 Formula for Allocation of funding. Ideas in this section that pertain to the question are:

- 1) The Division shall establish formulas by rule for the annual allocations,
- 2) But that this does not apply to discretionary grants awarded to the Division or funds appropriated for drug courts and the Drug Offender Reform Act.
- 3) The cost of the Division's administration shall not exceed 5% of the total annual appropriation
- 4) Population data shall be updated annually
- 5) Local Authorities shall provide a 20% match to the funding they receive
- 6) Local authorities qualify for only those funds the county matches as outlined above
- 7) Any unmatched funding may be allocated on a one-time basis to other local authorities

When population is used to distribute funding, mental health dollars use a local differential:

1) 5% of the total distributed funding shall go to the 24 smallest counties as follows:

- a. 35% of that 5% goes to the 6 smallest counties
- b. 30% of that 5% goes to the 7th-12th smallest counties
- c. 20% of that 5% goes to the 13th – 18th smallest counties
- d. 15% of that 5% goes to the 19th – 24th smallest counties

While the remaining funding is allocated based on population.

PROGRAM NAME: Unfunded Clients Allocation

(1) Yes

- a. Yes, it is state wide.

(2) We are organized by Local Mental Health and Substance Abuse Authorities. Some of the smaller counties have banded together to form a local authority that represents the needs for that particular group. You wo

178,000	Bear River Mental Health (Box, Cache, Rich)
107,800	Central Utah Mental Health (Juab, Millard, Piute, Sanpete, Sevier, Wayne)
240,600	Davis Behavioral Health (Davis)
81,600	Four Corners Behavioral Health (Carbon, Emery, Grand)
91,800	Northeastern Counseling Center (Daggett, Duchesne, Uintah)
810,600	Optum Health (Salt Lake County)
79,000	Valley Mental Health (Summit)
95,600	Valley mental Health (Tooele)
210,300	Southwest Center (Beaver, Garfield, Iron, Kane, Washington)
212,800	Weber Mental Health (Morgan, Weber)
411,900	Wasatch Mental Health (Utah)
70,000	Wasatch County
70,000	San Juan County

\$ 2,660,000

(3) Population: Outlined in 62A-15-108 Formula for allocation of funds to local substance abuse authorities and local mental health authorities and Rule R523-4-8 Formula for Allocation of funding

- a. Currently, needs exceed resources available to the department/local authorities. Funds are allocated based upon statute and/or rule.
- b. It is done by Population with a rural differential

(4) Yes, In brief this section outlines that funding shall be distributed by need, and then defines need as being measured by population, "unless the division establishes, by valid and accepted data, that other defined factors are relevant and reliable indicators of need." The mechanics and more detail of how allocations happen are found in Utah Administrative Rule R523-4-8 Formula for Allocation of funding. Ideas in this section that pertain to the question are:

- 1) The Division shall establish formulas by rule for the annual allocations,
- 2) But that this does not apply to discretionary grants awarded to the Division or funds appropriated for drug courts and the Drug Offender Reform Act.
- 3) The cost of the Division's administration shall not exceed 5% of the total annual appropriation
- 4) Population data shall be updated annually
- 5) Local Authorities shall provide a 20% match to the funding they receive
- 6) Local authorities qualify for only those funds the county matches as outlined above
- 7) Any unmatched funding may be allocated on a one-time basis to other local authorities

When population is used to distribute funding, mental health dollars use a local differential:

- 1) 5% of the total distributed funding shall go to the 24 smallest counties as follows:
 - a. 35% of that 5% goes to the 6 smallest counties
 - b. 30% of that 5% goes to the 7th-12th smallest counties
 - c. 20% of that 5% goes to the 13th – 18th smallest counties
 - d. 15% of that 5% goes to the 19th – 24th smallest counties
- While the remaining funding is allocated based on population.

PROGRAM NAME: Early Intervention

Yes

(1) a. Yes, it is state wide.

We are organized by Local Mental Health and Substance Abuse Authorities. Some of the smaller counties have banded together to form a local authority that represents the needs for that particular group. You wo

(2)	213,300	Bear River Mental Health (Box, Cache, Rich)
	13,200	Central Utah Mental Health (Juab, Millard, Piute, Sanpete, Sevier, Wayne)
	360,000	Davis Behavioral Health (Davis)
	69,200	Four Corners Behavioral Health (Carbon, Emery, Grand)
	84,400	Northeastern Counseling Center (Daggett, Duchesne, Uintah)
	1,212,800	Optum Health (Salt Lake County)
	50,600	Valley Mental Health (Summit)
	75,500	Valley mental Health (Tooele)
	269,000	Southwest Center (Beaver, Garfield, Iron, Kane, Washington)
	288,300	Weber Mental Health (Morgan, Weber)
	616,200	Wasatch Mental Health (Utah)
	36,100	Wasatch County
	24,400	San Juan County
	<u>\$</u>	<u>3,313,000</u>

- (3) Population: Outlined in 62A-15-108 Formula for allocation of funds to local substance abuse authorities and local mental health authorities and Rule R523-4-8 Formula for Allocation of funding
- a. Currently, needs exceed resources available to the department/local authorities. Funds are allocated based upon statute and/or rule.
 - b. It is done by Population with a rural differential

- (4) Yes, In brief this section outlines that funding shall be distributed by need, and then defines need as being measured by population, “unless the division establishes, by valid and accepted data, that other defined factors are relevant and reliable indicators of need.” The mechanics and more detail of how allocations happen are found in Utah Administrative Rule R523-4-8 Formula for Allocation of funding. Ideas in this section that pertain to the question are:
- 1) The Division shall establish formulas by rule for the annual allocations,
 - 2) But that this does not apply to discretionary grants awarded to the Division or funds appropriated for drug courts and the Drug Offender Reform Act.
 - 3) The cost of the Division’s administration shall not exceed 5% of the total annual appropriation
 - 4) Population data shall be updated annually
 - 5) Local Authorities shall provide a 20% match to the funding they receive
 - 6) Local authorities qualify for only those funds the county matches as outlined above
 - 7) Any unmatched funding may be allocated on a one-time basis to other local authorities
- When population is used to distribute funding, mental health dollars use a local differential:
- 1) 5% of the total distributed funding shall go to the 24 smallest counties as follows:
 - a. 35% of that 5% goes to the 6 smallest counties
 - b. 30% of that 5% goes to the 7th-12th smallest counties
 - c. 20% of that 5% goes to the 13th – 18th smallest counties
 - d. 15% of that 5% goes to the 19th – 24th smallest counties
- While the remaining funding is allocated based on population.

PROGRAM NAME: USH Adult Beds

- (1) Yes
- a. Yes, it is state wide.
- (2) We are organized by Local Mental Health and Substance Abuse Authorities. Some of the smaller counties have banded together to form a local authority that represents the needs for that particular group. You would
- 8 Bear River Mental Health (Box, Cache, Rich)
 - 4 Central Utah Mental Health (Juab, Millard, Piute, Sanpete, Sevier, Wayne)
 - 16 Davis Behavioral Health (Davis)
 - 2 Four Corners Behavioral Health (Carbon, Emery, Grand)
 - 3 Northeastern Counseling Center (Daggett, Duchesne, Uintah)
 - 59 Optum Health (Salt Lake County)
 - 2 Valley Mental Health (Summit)
 - 3 Valley mental Health (Tooele)
 - 11 Southwest Center (Beaver, Garfield, Iron, Kane, Washington)
 - 14 Weber Mental Health (Morgan, Weber)
 - 28 Wasatch Mental Health (Utah)
 - 1 Wasatch County
 - 1 San Juan County

- (3) Population: Outlined in 62A-15-108 Formula for allocation of funds to local substance abuse authorities and local mental health authorities and Rule R523-4-10 Allocation of Utah State Hospital Adult Bed Days to Local Mental Health Authorities
- a. Currently, needs exceed resources available to the department/local authorities. Funds are allocated based upon statute and/or rule.
 - b. It is done by Population with a urban differential
- (4) Yes, In brief this section outlines that funding shall be distributed by need, and then defines need as being measured by population, “unless the division establishes, by valid and accepted data, that other defined factors are relevant and reliable indicators of need.” The mechanics and more detail of how allocations happen are found in Utah Administrative Rule R523-4-10 Allocation of Utah State Hospital Adult Bed Days to Local Mental Health Authorities. Ideas in this section that pertain to the question are:
- 1) The Division shall establish formulas by rule for the annual allocations,
 - 3) Population data shall be updated annually
 - 4) Urban counties are identified (county classifications are determined by the lieutenant governor’s office pursuant to Subsections 17-50-501 and 17-50-502 and the most recent classifications are used to determine which counties are defined as urban)
 - 5) 4.8% of Adult beds are subtracted from the total and allocated as an urban differential.
 - 6) The total number of available adult beds minus the urban differential is multiplied by the county’s percentage of the state’s total adult population to determine the number of allocated beds for each county.
 - 7) At least one adult bed is allocated to each LMHA
 - 8) A LMHA may sell or loan its allocation of adult beds to another LMHA.

PROGRAM NAME: USH Pediatric Beds

- (1) Yes
- a. Yes, it is state wide.
- (2) We are organized by Local Mental Health and Substance Abuse Authorities. Some of the smaller counties have banded together to form a local authority that represents the needs for that particular group. You wo
- 4 Bear River Mental Health (Box, Cache, Rich)
 - 2 Central Utah Mental Health (Juab, Millard, Piute, Sanpete, Sevier, Wayne)
 - 8 Davis Behavioral Health (Davis)
 - 1 Four Corners Behavioral Health (Carbon, Emery, Grand)
 - 1 Northeastern Counseling Center (Daggett, Duchesne, Uintah)
 - 25 Optum Health (Salt Lake County)
 - 1 Valley Mental Health (Summit)
 - 2 Valley mental Health (Tooele)
 - 5 Southwest Center (Beaver, Garfield, Iron, Kane, Washington)
 - 6 Weber Mental Health (Morgan, Weber)
 - 15 Wasatch Mental Health (Utah)
 - 1 Wasatch County
 - 1 San Juan County
- 72
- (3) Population: Outlined in 62A-15-108 Formula for allocation of funds to local substance abuse authorities and local mental health authorities and Rule Allocation of Utah State Hospital Pediatric Beds to Local Mental Health Authorities
- a. Currently, needs exceed resources available to the department/local authorities. Funds are allocated based upon statute and/or rule.
- b. It is done by Population with a urban differential
- (4) Yes, In brief this section outlines that funding shall be distributed by need, and then defines need as being measured by population, "unless the division establishes, by valid and accepted data, that other defined factors are relevant and reliable indicators of need." The mechanics and more detail of how allocations happen are found in Utah Administrative Rule Allocation of Utah State Hospital Pediatric Beds to Local Mental Health Authorities. Ideas in this section that pertain to the question are:
- 1) The Division shall establish formulas by rule for the annual allocations,
 - 3) Population data shall be updated annually
 - 4) The total number of available beds is multiplied by the county's percentage of the state's total adult population to determine the number of allocated beds for each county.
 - 5) At least one adult bed is allocated to each LMHA
 - 6) A LMHA may sell or loan its allocation of adult beds to another LMHA.

PROGRAM NAME: Autism

- (1) No
- a. No - The legislature-appropriated the funds for these particular areas.
- (2) Here are the organizations that the legislature identified in the legislation.
- 443,300 Weber Mental Health (Morgan, Weber)
 - 443,300 Wasatch Mental Health (Utah)
 - 609,500 Valley Mental Health
 - 350,900 Southwest Education Dev. Center
- \$ 1,847,000
- (3) Funds directed with appropriation
- a. It doesn't. There is need throughout the State; however, current funding covers the LMHA's outlined in (2).
- b. Funds directed with appropriation

(4) Yes, In brief this section outlines that funding shall be distributed by need, and then defines need as being measured by population, "unless the division establishes, by valid and accepted data, that other defined factors are relevant and reliable indicators of need." The mechanics and more detail of how allocations happen are found in Utah Administrative Rule R523-4-8 Formula for Allocation of funding. Ideas in this section that pertain to the question are:

- 1) The Division shall establish formulas by rule for the annual allocations,
- 2) But that this does not apply to discretionary grants awarded to the Division or funds appropriated for drug courts and the Drug Offender Reform Act.
- 3) The cost of the Division's administration shall not exceed 5% of the total annual appropriation
- 4) Population data shall be updated annually
- 5) Local Authorities shall provide a 20% match to the funding they receive
- 6) Local authorities qualify for only those funds the county matches as outlined above
- 7) Any unmatched funding may be allocated on a one-time basis to other local authorities

When population is used to distribute funding, mental health dollars use a local differential:

1) 5% of the total distributed funding shall go to the 24 smallest counties as follows:

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- b. 30% of that 5% goes to the 7th-12th smallest counties
- c. 20% of that 5% goes to the 13th – 18th smallest counties
- d. 15% of that 5% goes to the 19th – 24th smallest counties

While the remaining funding is allocated based on population.

PROGRAM NAME: Substance Abuse & Women's treatment

(1) Yes

- a. Yes, it is state wide.

(2) We are organized by Local Mental Health and Substance Abuse Authorities. Some of the smaller counties have banded together to form a local authority that represents the needs for that particular group. You wo

1,277,300	Bear River Health (Box, Cache, Rich)
701,800	Central Utah Health (Juab, Millard, Piute, Sanpete, Sevier, Wayne)
2,262,000	Davis Behavioral Health (Davis)
467,800	Four Corners Behavioral Health (Carbon, Emery, Grand)
613,000	Northeastern Counseling Center (Daggett, Duchesne, Uintah)
9,090,800	Optum Health (Salt Lake County)
474,100	Valley Mental Health (Summit)
614,300	Valley mental Health (Tooele)
1,679,400	Southwest Center (Beaver, Garfield, Iron, Kane, Washington)
2,098,300	Weber Health (Morgan, Weber)
2,949,300	Utah County Drug & Alc. (Utah)
196,500	Wasatch County
223,400	San Juan County

\$ 22,648,000

(3) Population & Need: Outlined in 62A-15-108 Formula for allocation of funds to local substance abuse authorities and local mental health authorities and Rule R523-4-8 Formula for Allocation of funding

- a. Currently, needs exceed resources available to the department/local authorities. Funds are allocated based upon statute and/or rule.
- b. It is done by Population

(4) Yes, In brief this section outlines that funding shall be distributed by need, and then defines need as being measured by population, “unless the division establishes, by valid and accepted data, that other defined factors are relevant and reliable indicators of need.” The mechanics and more detail of how allocations happen are found in Utah Administrative Rule R523-4-8 Formula for Allocation of funding. Ideas in this section that pertain to the question are:

- 1) The Division shall establish formulas by rule for the annual allocations,
- 2) But that this does not apply to discretionary grants awarded to the Division or funds appropriated for drug courts and the Drug Offender Reform Act.
- 3) The cost of the Division’s administration shall not exceed 5% of the total annual appropriation
- 4) Population data shall be updated annually
- 5) Local Authorities shall provide a 20% match to the funding they receive
- 6) Local authorities qualify for only those funds the county matches as outlined above
- 7) Any unmatched funding may be allocated on a one-time basis to other local authorities

When population is used to distribute funding, mental health dollars use a local differential:

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 - a. 35% of that 5% goes to the 6 smallest counties
 - b. 30% of that 5% goes to the 7th-12th smallest counties
 - c. 20% of that 5% goes to the 13th – 18th smallest counties
 - d. 15% of that 5% goes to the 19th – 24th smallest counties
- While the remaining funding is allocated based on population.

When population is used to distribute funding, substance abuse dollars use the rural differential above, but add:

- 2) 60% of the remaining funding after step 1 above is allocated based on incidence and prevalence of substance abuse based on:
 - a. Percent of binge and chronic drinkers as measured by the Behavioral Risk Factor Surveillance System (BRFSS).
 - b. Percent of youth reporting alcohol use within the past 30 days, youth binge drinking, and youth needing drug treatment as reported by the Student Health and Risk Protection Survey (SHARP).

PROGRAM NAME: DORA

- (1) No
- a. No, there isn't sufficient funding to operate the program state wide and the Utah Substance Abuse Council has oversight responsibilities for DORA and has chosen the areas of operation.

We are organized by Local Mental Health and Substance Abuse Authorities. Some of the smaller counties have banded together to form a local authority that represents the needs for that particular group. You

- (2) would need to contact the local authorities to determine what funding ultimately gets spent in which county.

161,000	Bear River (Box, Cache)
322,300	Davis County
58,400	Four Corners Behavioral Health (Carbon, Emery, Grand)
1,085,200	Salt Lake County
58,000	Tooele
231,500	Southwest Center (Iron, Washington)
387,900	Weber Health (Morgan, Weber)
442,800	Utah County Drug & Alc. (Utah)
<u>2,747,100</u>	

- (3) Population and Incidence & Prevalence numbers supplied by the Utah Department of Corrections.
- a. Currently, needs exceed resources available to the department/local authorities. Funds are allocated based upon statute and/or rule.
 - b. It is a mixture of population and need as determined by the Utah Substance Abuse Council, who has oversight responsibility for DORA funding methodologies and areas in which DORA will operate.
- (4) Statute 63M-7-305. Drug Offender Reform Act – Coordination provides that the Utah Substance Abuse Advisory Council will include guidelines on how funds appropriated under the act should be used.

PROGRAM NAME: Drug Court Program

- (1) Yes
- a. Yes, it is state wide
- (2) We are organized by Local Mental Health and Substance Abuse Authorities. Some of the smaller counties have banded together to form a local authority that represents the needs for that particular group. You wo
- | | |
|---------|--|
| 299,900 | Bear River Health (Box, Cache, Rich) |
| 156,400 | Central Utah Health (Juab, Millard, Piute, Sanpete, Sevier, Wayne) |
| 352,300 | Davis Behavioral Health (Davis) |
| 344,800 | Four Corners Behavioral Health (Carbon, Emery, Grand) |

148,200	Northeastern Counseling Center (Daggett, Duchesne, Uintah)
1,393,500	Optum Health (Salt Lake County)
34,100	Valley Mental Health (Summit)
96,600	Valley mental Health (Tooele)
620,000	Southwest Center (Beaver, Garfield, Iron, Kane, Washington)
640,000	Weber Health (Morgan, Weber)
527,400	Utah County Drug & Alc. (Utah)
61,400	Wasatch County
37,600	San Juan County
309,400	DSAMA Training & System Wide Contracts
<u>5,021,600</u>	

(3) Population and Incidence & Prevalence numbers supplied by the Utah Department of Corrections.

- a. Currently, needs exceed resources available to the department/local authorities. Funds are allocated based upon statute and/or rule.
- b. It is a mixture of population and need as determined by the Utah Substance Abuse Council, who has oversight responsibility for DORA funding methodologies and areas in which DORA will operate.

(4) Statute 63M-7-305. Drug Offender Reform Act -- Coordination provides that the Utah Substance Abuse Advisory Council will include guidelines on how funds appropriated under the act should be used.

Department of Human Services

Division of Child and Family Services (DCFS)

The Legislature intends the departments of Health, Human Services, and Workforce Services and the Utah State Office of Rehabilitation provide to the Office of the Legislative Fiscal Analyst by **June 1, 2015** a report outlining how funds are distributed within the state when passed through to local government entities or allocated to various regions and how often these distributions are reviewed and altered to reflect the relevant factors associated with the programs.

- (1) Is the program considered a statewide program (this would include something that serves all rural areas)?
 - a. Is the implementation of the program really statewide? If not, is there a compelling reason why?
- (2) Who gets the money (by county)?
- (3) What is the methodology for distributing the money?
 - a. How does the distribution compare to actual need as expressed by population? [If distributions are not reflecting current need (as represented by population), please explain why not?]
 - b. If not done by population, what is the reason?
- (4) Does statute say anything about distribution and equity for the program?

DCFS

- (1) Yes, as we have caseworkers that cover all areas of the State for all programs (including In-Home and Out of Home) then we allocate resources statewide.
 - a. Not every county has the same providers in their county but every person in each county has access to services the Division provides.
- (2) DCFS is broken down by five regions and one administrative office. Money flows to the regions who serve specific counties with their respective regions:
Northern Region - Box Elder, Cache, Davis, Morgan, Rich, Weber counties. Allocated funds \$36,720,500, percent of population 25.54%, percent of funding 25.20%.
Salt Lake Region - Salt Lake and Tooele counties. Allocated funds \$47,972,700, percent of population 39.32%, percent of funding 32.92%.
Western Region - Juab, Millard, Summit, Utah and Wasatch counties. Allocated funds \$27,869,700, percent of population 22.06%, percent of funding 19.12%.
Southwest Region - Beaver, Garfield, Iron, Kane, Piute Sanpete, Sevier, Washington and Wayne counties. Allocated funds \$15,479,500 percent of population 9.19%, percent of funding 10.62%.
Eastern Region - Carbon, Daggett, Duchesne, Emery, Grand, San Juan and Uintah counties. Allocated funds \$17,689,000, percent of population 3.90%, percent of funding 12.14%.
- (3) Funds distributed based on past history with adj. for known program changes, specific Legislative funding (Garland and Hyrum Family Resource Centers, etc.) and regional input.
 - a. Current needs are met according to available funding. Northern, Southwest and Western region are all fairly close from historical distribution method compared to population. The real inequity are in Salt Lake and Eastern region. Based on population Eastern region would be severely limited in the number of services it could provide. This in turn would affect the divisions ability to provide state wide coverage. Salt Lakes funding (based on population) is redirected to the Eastern region so that they can meet the needs of clients in their region.
 - b. Population does not follow the distribution of services.
- (4) No

PROGRAM NAME: In-Home, Out of Home, CPS, Child Abuse Prevention and Adoptions

- (1) Yes, as we have caseworkers that cover all areas of the State for all programs (including In-Home and Out of Home) then we allocate resources statewide.
 - a. Not every county has the same providers in their county but every person in each county has access to services the division provides.
- (2) Northern Region - Rich, Box Elder, Cache, Weber, Morgan and Davis counties.
Salt Lake Region - Salt Lake and Tooele counties.
Western Region - Summit, Wasatch, Utah, Juab and Millard.
Southwest Region - Sanpete, Sevier, Wayne, Garfield, Kane, Washington, Iron, Beaver and Piute.
Eastern Region - Daggett, Duchesne, Uintah, Carbon, Emery, Grand and San Juan.
- (3) Funds distributed based on past history with adj. for known program changes, specific Legislative funding (Garland and Hyrum Family Resource Centers, etc.) and regional input.

a. Current needs are met according to available funding. Northern, Southwest and Western region are all fairly close from historical distribution method compared to population. The real inequity are in Salt Lake and Eastern region. Based on population Eastern region would be severely limited in the number of services it could provide. This in turn would affect the divisions ability to provide state wide coverage. Salt Lakes funding (based on population) is redirected to the Eastern region so that they can meet the needs of clients in their region.

b. Population does not follow the distribution of services.

(4) No

PROGRAM NAME: Domestic Violence

(1) Yes, as we have caseworkers that can cover all areas of the State to provide domestic violence services, then we allocate resources statewide.

a. Not every county has the same providers in their county, however, every person in a county can access domestic violence services provided by the division.

(2) Northern Region - Box Elder, Cache, Davis, Weber counties.

Salt Lake Region - Salt Lake and Tooele counties.

Western Region - Summit and Utah counties.

Southwest Region - Iron, Sevier and Washington counties.

Eastern Region - Carbon, Grand and Uintah counties.

Funding distributed by formula. Each shelter receives a base amount of \$100,000. Eight shelters are considered rural and receive an additional \$10,000. Your Community Connection gets an additional \$147,000 per the FY 2014 Legislative session. Ongoing and One-Time funds are distributed evenly to the thirteen shelters. After these allocations are made, the Federal portion allowable for administration (5%) is deducted along with contracts and funding for State shelters the balance is distributed by number of shelter days to the 13 private shelters.

(3)

a. Current needs are met according to available funding. Funding is allocated based on the number of shelters. Eastern and Southwest regions, who each have three shelters, is allocated more funding than Western that has two. Although, Eastern and Southwest's populations are less than Western's population. This leads to providing statewide coverage as Eastern and Southwest geographically cover more area than the other regions.

b. Population does not follow the distribution of services.

(4) No.

Department of Human Services
Division of Aging and Adult Services (DAAS)

The Legislature intends the departments of Health, Human Services, and Workforce Services and the Utah State Office of Rehabilitation provide to the Office of the Legislative Fiscal Analyst by **June 1, 2015** a report outlining how funds are distributed within the state when passed through to local government entities or allocated to various regions and how often these distributions are reviewed and altered to reflect the relevant factors associated with the programs.

- (1) Is the program considered a statewide program (this would include something that serves all rural areas)?
 a. Is the implementation of the program really statewide? If not, is there a compelling reason why?
- (2) Who gets the money (by county)?
- (3) What is the methodology for distributing the money?
 a. How does the distribution compare to actual need as expressed by population? [If distributions are not reflecting current need (as represented by population), please explain why not?]
 b. If not done by population, what is the reason?
- (4) Does statute say anything about distribution and equity for the program?

PROGRAM NAME: Title III, VII, NSIP

- (1) Yes
 a. Yes, the AAAs are geographically based with coverage for all of Utah

(2) The money is passed through to the AAAs who directly service the residents in their community, which can be 1 county or multiple counties

BRAG	Weber	Salt Lake	Davis	Tooele	Mountainland	Six County	Five County	UBAG	Uintah Co.	Southeastern	San Juan	Total
777,200	1,211,000	4,039,200	1,120,900	318,400	1,737,400	636,000	1,522,100	206,500	254,800	457,800	224,200	12,505,500

- (3) Distribution of funds is determined by formula based on 125% of poverty level
 a. Formula is directed by the Older Americans Act based on population
 b. N/A

- (4) Yes; UCA 62A-3-104
 F: OOA (42 USC Sec 3000 et seq)

PROGRAM NAME: Alternatives

- (1) Yes
 a. Yes, the AAAs are geographically based with coverage for all of Utah

(2) The money is passed through to the AAAs who directly service the residents in their community, which can be 1 county or multiple counties

Brag	Weber	Salt Lake	Davis	Tooele	Mountainland	Six County	Five County	UBAG	Uintah Co.	Southeastern	San Juan	Total
220,100	398,300	1,388,000	373,000	94,400	549,100	205,300	331,300	57,200	83,200	124,200	64,500	3,888,600

- (3) Distribution of funds is determined by formula based on 100% of poverty level
 a. Formula is directed by the Older Americans Act based on population and the DAAS Board.
 b. N/A

- (4) Yes; S. 62A-3-104
 F: OOA (42 USC Sec 3000 et seq)

PROGRAM NAME: Waiver

- (1) Yes
 a. Yes, the AAAs are geographically based with coverage for all of Utah

(2) The money is passed through to the AAAs who directly service the residents in their community, which can be 1 county or multiple counties

Brag	Weber	Salt Lake	Davis	Tooele	Mountainland	Six County	Five County	Uintah Co.	Southeastern	San Juan	Total
77,000	66,000	209,000	27,500	11,000	209,000	110,000	77,000	6,600	60,500	104,500	958,100

- (3) Distribution of funds is based on of poverty level, number of clients on waiting list and caseload.
 a. Number of clients on waiting list and caseload for each AAA

b. N/A

(4) Yes; S. 62A-3-104
F: OOA (42 USC Sec 3000 et seq)

PROGRAM NAME: APS

- (1) Yes
- a. Yes, APS is currently set up in three separate regions with statewide coverage.
- (2) Funds are budgeted by region.
- (3) Money is budgeted to the regions based on caseload and geographic coverage.
- a. Caseload per region and geographic coverage influences the distribution of funds.
- b. Caseload and geographic coverage.

Yes; S. 62A-3-104

(4) F: OOA (42 USC Sec 3000 et seq)

PROGRAM NAME: Non-Formula Funds (SHIP, MIPPA, SCSEP & SMP)

- (1) Yes
- a. Yes, the AAAs are geographically based with coverage for all of Utah
- (2) The money is passed through to the AAAs who directly service the residents in their community, which can be 1 county or multiple counties:

	BRAG	Weber	Salt Lake	Davis	Tooele	Mountainland	Six County	Five County	UBAG	Uintah Co.	Southeastern	San Juan	TOTAL
SHIP	20,600	20,600	20,600	20,600	17,900	20,600	20,600	20,600	20,600	20,600	20,600	20,600	244,500
MIPPA	15,000	15,000	15,000	15,000		15,000	15,000	15,000	15,000				120,000
SMP	1,900	19,000	19,000	19,000	1,900	19,000	19,100	19,100	19,100		1,900	1,900	140,900
SCSEP			540,000										540,000

- (3) Money is budgeted to the AAAs based on specific program offered and need of residents served by each AAA.
- a. Actual services offered and caseload
- b. Actual services offered and caseload

(4) Yes; S. 62A-3-104

F: OOA (42 USC Sec 3000 et seq)