SUMMARY

The Division of Community and Family Health Services (CFHS) assures that women, infants, children, and their families have access to comprehensive, coordinated, affordable, community-based, quality health care. The Division coordinates efforts, identifies needs, prioritizes programs and develops resources necessary to reduce illness, disability, and death from: adverse pregnancy outcomes, chronic diseases, disabling conditions, injury and violence, and vaccine-preventable infections.

ISSUES AND RECOMMENDATIONS

The Analyst recommendation as listed in the base budget bill and this Budget Brief is $103,691,500. The recommendation reflects adjustments to the General Fund allocation between programs made during FY 2006, as well as many of the minor adjustments to the Federal Funds, Restricted Funds, Transfers, Dedicated Credit Revenue and Nonlapsing balances.

Caseload growth is an important factor dealing with the Early Intervention and other programs.

This budget funds four programs within the line item, including:

Director’s Office $ 2,513,000
Health Promotion $20,621,000
Maternal and Child Health $56,640,600
Children with Special Health Care Needs $23,916,900

The funding level supports 285.26 FTE positions.

ACCOUNTABILITY DETAIL

The Division of Community and Family Health Services provides either access to or direct services for women, infants and children. The tables on the next page show the performance measures as reported by the three Bureaus. There are numerous activities within each of these Bureaus, all of which report data and performance. Only a few of the key measures are used for the purpose of this Budget Brief.

Directors Office

The Director’s Office provides the policy direction and administrative support to the Bureaus. Financial management is a major function of this office. The Office provides preparation and management of budgets, contracts and the financial aspects of grants for the Bureaus in this line item.
Health Promotion

One area in Health Promotion that has received significant attention as well as significant funding is the Tobacco Prevention and Control Program. Funding was increased following the Master Settlement Agreement (MSA) between the big tobacco companies and the states. Among other activities funded with MSA funds, Utah decided to increase anti-tobacco programs. In addition, anti-tobacco programs have received a portion of the increase in cigarette taxes each of the last two times the tax was increased. Over the past five years, the total number of adult and youth smokers has decreased. Child exposure to second hand smoke has also been decreased.

The chart to the right identifies one of the key program performance measures. Some of the FY 2006 State’s tobacco settlement funds were withheld due to pending litigation. Additional information is provided in the Tobacco Issue Brief. More information is also available in the Compendium of Budget Information.

Maternal and Child Health (MCH)

Utah has the highest birth rate in the nation at 21.7/1,000 compared to 13.9/1,000 for the U.S. as a whole. The MCH Bureau oversees six programs that work to address the health care needs of mothers and children. These programs are: Child Adolescent and School Health; Data Resources; Immunizations; Oral Health; Reproductive Health; and Women, Infants, and Children Supplemental Nutrition (WIC) Programs. The performance measure graph to the right shows the Bureau’s activity related to the “Baby-Your-Baby” hotline. This serves as an indicator of information being disseminated in an effort to: 1) Encourage early entry into prenatal care; 2) increase the percent of low birth weight infants that are born in appropriate facilities to render proper care; and 3) lower the teen birth rate. These statistics are tracked as well.

Children with Special Health Care Needs

Baby Watch/Early Intervention is a program within the Bureau that provides early developmental interventions statewide for young children with developmental delays and/or disabilities from birth to age three. Services include evaluation and assessment, service coordination, specialty and therapy services such as nursing, physical therapy, occupational therapy, speech therapy, special instruction, family support and other related services. This program has grown significantly over the past several years. The 2006 Legislature funded the caseload
growth increase for FY 2007, but not a provider rate increase. Services are directly provided in the home, impacting transportation costs. During the past few years, tightening eligibility and instituting a parent fee has reduced the rate of growth. Still, it has grown over 14 percent during the last two years.

**Budget Detail**

**Budget Recommendation**

The Analyst recommends an ongoing base budget funding in the amount of $103,691,500 as listed in the base budget bill. Of this amount $9,791,100 is from the General Fund, $61,943,700 is from Federal Funds, $16,080,100 from Dedicated Credits, $9,438,900 is from General Fund Restricted Accounts and $6,437,700 from Transfers. The recommendation covers the programs for the Director’s Office; Health Promotion; Maternal and Child Health; and Children with Special Health Care Needs.

**Intent Language**

The Division has traditionally had intent language approved making the tobacco funding nonlapsing. The following intent language has again been requested. The Legislature should consider putting this language into statute.

> *It is the intent of the Legislature that the funding for alcohol, tobacco, and other drug prevention reduction, cessation and control programs be nonlapsing.*

**Legislative Action**

The Executive Appropriations Committee requests that the Subcommittee adopt base budgets for each agency under the Subcommittee’s purview, fund Subcommittee priorities, first by reallocating revenue among programs, and provide a prioritized list of desired items for funding. Adoption of this base budget as listed in this document enables the programs to continue for the next fiscal year at relatively the same level as the current fiscal year.

1. The Analyst recommends that the Health and Human Services Appropriations Subcommittee approve a base budget for FY 2008 for Community and Family Health Services in the amount of $103,691,500 with funding as listed in the Budget Detail Table.

2. The Analyst recommends the adoption of the proposed intent language with consideration that this intent language be adopted into statute.

3. The Legislature should consider the following adjustments and additions to the base budget as described in the respective Issue Briefs:
   - DOH IB 08-07 - Utah Birth Defect Network
   - DOH IB 08-08 - Baby Watch/Early Intervention caseload growth and base adjustment
   - DOH IB 08-09 - Vaccine Funding
## Budget Detail Table

### Health - Community & Family Health

<table>
<thead>
<tr>
<th>Sources of Finance</th>
<th>FY 2006</th>
<th>FY 2007</th>
<th>Changes</th>
<th>Revised</th>
<th>Changes</th>
<th>Base Budget</th>
</tr>
</thead>
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<tr>
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<td>(12,400)</td>
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<td>62,665,300</td>
<td>(721,600)</td>
<td>61,943,700</td>
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<td>Dedicated Credits Revenue</td>
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<td>17,161,300</td>
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<td>16,216,900</td>
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<td>GFR - Cigarette Tax Rest</td>
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<td>GFR - Tobacco Settlement</td>
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<td>Transfers - H - Medical Assistance</td>
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<td>17,100</td>
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<td>Transfers - Intergovernmental</td>
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<td>Transfers - Other Agencies</td>
<td>864,900</td>
<td>(131,600)</td>
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<td>Transfers - Public Safety</td>
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<td>Transfers - Within Agency</td>
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<td>5,579,800</td>
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<td>Beginning Nonlapsing</td>
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<td>Closing Nonlapsing</td>
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<td>0</td>
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<tr>
<td><strong>Total</strong></td>
<td>$100,010,000</td>
<td>$105,305,800</td>
<td>($332,600)</td>
<td>$104,973,200</td>
<td>($1,281,700)</td>
<td>$103,691,500</td>
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### Programs

<table>
<thead>
<tr>
<th>Category</th>
<th>FY 2006</th>
<th>FY 2007</th>
<th>Changes</th>
<th>Revised</th>
<th>Changes</th>
<th>Base Budget</th>
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</thead>
<tbody>
<tr>
<td>Director’s Office</td>
<td>2,254,300</td>
<td>2,324,700</td>
<td>480,400</td>
<td>2,804,100</td>
<td>579,600</td>
<td>2,383,700</td>
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<td>Health Promotion</td>
<td>20,364,500</td>
<td>20,696,300</td>
<td>91,800</td>
<td>21,608,100</td>
<td>903,300</td>
<td>20,621,000</td>
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<tr>
<td>Maternal and Child Health</td>
<td>53,320,800</td>
<td>56,563,500</td>
<td>12,242,700</td>
<td>56,786,200</td>
<td>223,700</td>
<td>56,640,000</td>
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<td>Children with Special Health Care Needs</td>
<td>24,070,400</td>
<td>25,721,300</td>
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<td>651,900</td>
<td>23,916,000</td>
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<tr>
<td><strong>Total</strong></td>
<td>$100,010,000</td>
<td>$105,305,800</td>
<td>($332,600)</td>
<td>$104,973,200</td>
<td>($1,281,700)</td>
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### Categories of Expenditure

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<tr>
<th>Category</th>
<th>FY 2006</th>
<th>FY 2007</th>
<th>Changes</th>
<th>Revised</th>
<th>Changes</th>
<th>Base Budget</th>
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<tbody>
<tr>
<td>Personal Services</td>
<td>18,151,800</td>
<td>19,363,700</td>
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<td>In-State Travel</td>
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<td>229,800</td>
<td>66,500</td>
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<td>Out of State Travel</td>
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<td>187,600</td>
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<td>Current Expense</td>
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<td>477,100</td>
<td>21,229,000</td>
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<td>DP Current Expense</td>
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<td>Other Charges/Pass Thru</td>
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<td>(193,000)</td>
<td>63,246,900</td>
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<tr>
<td><strong>Total</strong></td>
<td>$100,010,000</td>
<td>$105,305,800</td>
<td>($332,600)</td>
<td>$104,973,200</td>
<td>($1,281,700)</td>
<td>$103,691,500</td>
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### Other Data

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<tr>
<th>Category</th>
<th>FY 2006</th>
<th>FY 2007</th>
<th>Changes</th>
<th>Revised</th>
<th>Changes</th>
<th>Base Budget</th>
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<tbody>
<tr>
<td>Budgeted FTE</td>
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*Does not include amounts in excess of subcommittee's state fund allocation that may be recommended by the Fiscal Analyst.