

FY 2010 Adjustments - General Fund, Education Fund, and 'Proxies'

FY 2010 Adjustments by Line Item	FY 2009 Revised	FY 2010 Base	Ongoing Adjustments	One-time Adjustments	Other Ongoing	Other One-time	FY 2010 Appropriated	FY 2011 Base
Health	373,101,700	385,546,900	(57,031,700)	38,144,000	(3,891,000)	8,213,700	370,981,900	324,624,200
<i>Children's Health Insurance Program</i>	1,817,600	4,702,200	(435,800)		(3,755,700)		510,700	510,700
Reduce In-state travel by 20%			(100)					
Reduce out-of-state travel			(100)					
Incentive Reward Elimination			(300)					
Increase premiums for Plan C CHIP children			(72,000)					
New Late Premium Fee in CHIP			(10,000)					
No New CHIP Media Outreach			(70,000)					
Personal Services & Current Expense Reductions			(7,000)					
FMAP Rate Change			(276,300)					
Bill of Bills					(3,756,000)			
ISF rate impact					300			
<i>Community and Family Health Services</i>	14,690,700	15,161,900	(2,890,400)	1,000,000	8,600		13,280,100	12,280,100
Neonatal Follow-up Program			(128,000)					
Adaptive Behavior and Learning			(240,000)					
Program Manager			(70,500)					
Tobacco Media			(118,800)					
Personnel Reductions			(201,000)					
1,000 Less Children in Children with Special Health Care Needs Clinics			(1,000,000)	1,000,000				
14% Administration Charge on Select Grants With the University of Utah			(13,600)					
2007 GS - Utah Birth Defect Network			(96,000)					
Reduction in Newborn Screening			(51,100)					
Autism Registry (HB 263, 2008 GS, Hutchings)			(49,900)					
Baby Your Baby Licensing Rights			(20,000)					
Baby Your Baby Longer Phone Wait Times			(32,400)					
Center for Multicultural Health Duties (HB 142, 2006 GS, Romero)			(16,700)					
Reduce In-state travel by 20%			(12,900)					
Defund Boards & Commissions			(500)					
Pregnancy Riskline			(9,700)					
Reduce out-of-state travel			(8,700)					
End Cervical Cancer Outreach (HB 358, 2007 GS, Morgan)			(25,000)					
Incentive Reward Elimination			(17,700)					
Personal Services & Current Expense Reductions			(459,000)					
Reduce mileage rate from 50.5 to 36 cents			(6,900)					
Reduce Reproductive Health Program			(20,000)					

Reduction FY 2011	FY 2010 Reduction Status	FY 2011 Reduction Proposal
	Reduction in in-state travel by 20%	
	Eliminate out-of-state travel	
	Eliminate incentive awards	
	Quarterly premiums went from \$60 to \$75	
	Impose \$15 late payment fee on quarterly premiums	
	Reduction in CHIP Media outreach	
	Current expenses such as computers and supplies reduced.	
	FMAP increased for FY2010.	
	Budget adjusted as appropriated.	
	Operating budget to reflect appropriations	
	Closed one clinic and cut 0.8 FTE	
	Cut older children multidisciplinary clinics and reorganized birth to 8 years CSHCH clinics in SLS. 2.5 FTEs	
	Reduction of 1 FTE program manager	
	Reduction in Tobacco Media programs	
	Reduction of 1.5 FTEs	
(1,000,000)	Backfill in 2010.	Operating budget will be reduced to reflect appropriations including reduction of approximately 9 FTEs and significant reduction in services
	Reduction in current expenses.	
	MCH lessened impact by utilizing federal MCH dollars for 1/2 GF loss on a one-time basis. Internal savings in travel, training and other current expenses allowed this federal support.	Full effect of reduction realized. An additional FTE will be lost.
	MCH lessened impact by utilizing federal MCH dollars for 1/2 GF loss on a one-time basis. Internal savings in travel, training and other current expenses allowed this federal support.	Metabolic and Genetic services for children with metabolic disorders will be reduced.
	MCH lessened impact by utilizing federal MCH dollars for 1/2 GF loss on a one-time basis. Internal savings in travel, training and other current expenses allowed this federal support.	Full effect of reduction realized. An additional FTE will be lost.
	Fewer dollars for media advertising.	
	Reduced staff resulting in delayed response time to callers.	
	Reduced funding for capacity building for translation services.	
	Reduction in in-state travel by 20%	
	Reduce funding for Boards & Commissions	
	Response time delay	Maintain same level as FY 2010. Loss of federal funding will result in 1 FTE loss
	Eliminate out-of-state travel	
	Eliminate public and provider education outreach efforts for cervical cancer and the HPV vaccine.	
	Eliminate incentive awards	
	Billing staff position, clinic administration, 4.5 FTEs	
	Reduce mileage rate	
	Educational materials (booklet and video) put on internet.	

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Reduction in Provider Rates in the Baby Watch/Early Intervention Program			(292,000)								With continued growth of required services of 200 eligible infants and toddlers per year, a cut of 292,000 could negatively impact local provider reimbursement rebates. This could result in a loss of providers willing to provide these services.
ISF rate impact					8,600						
<i>Epidemiology & Lab Services</i>	5,620,800	6,003,900	(346,400)	(123,300)	9,000		5,543,200	5,666,500			
Reduce In-state travel by 20%			(900)								
Reduce out-of-state travel			(17,500)								
Incentive Reward Elimination			(7,100)								
No Quantity Test for Illegal Substances			(35,000)								Quantities are only reported for illegal substances in medical examiner cases and DUIs involving fatalities. May result in difficulties in prosecuting cases.
Personal Services & Current Expense Reductions			(161,500)								Loss of 3 FTEs which will diminish ability to maintain expertise in disease control.
Reduce mileage rate from 50.5 to 36 cents			(1,100)								Reduce mileage rate
Slower Environmental Outbreak Response			(60,000)								Transfer of staff to federal grants. State funded activities including cancer cluster investigations, contaminate fish evaluations and fish advisories, Japanese beetle eradication will be affected.
Slower Specimen Processing Time			(13,300)								0.5 FTE loss increasing turn around time
O & M for State Lab (delayed completion)				(123,300)							Delay completion of lab until 2010
Lab Equipment			(15,000)								Funding reduced for critical lab equipment
Tuberculosis Testing			(11,000)								Current expense, travel, supplies, and other operating cost reduction
Tuberculosis Education for Native Americans			(4,000)								Current expense, travel, supplies, and other operating cost reduction
Sexually Transmitted Disease Control			(20,000)								Current expense, travel, supplies, and other operating cost reduction
ISF rate impact					9,000						Operating budget to reflect appropriations
<i>Executive Director's Operations</i>	8,250,800	7,913,300	(488,000)		(84,700)		7,340,600	7,340,600			
3 FTEs Historical Data Record Entry			(125,000)								Eliminated 3 positions - through attrition
Reduce In-state travel by 20%			(4,400)								Reduction in in-state travel by 20%
Defund Boards & Commissions			(2,400)								Reduction Implemented
Drivers' License Monies to Medical Examiner's Office			(100,000)								No operating reduction - funding swap
Reduce out-of-state travel			(8,600)								Reduced out-of-state travel budget by appropriated reduction
Incentive Reward Elimination			(31,400)								Eliminate incentive award funding
ISF - Attorney General			(7,800)								Operating budget to reflect appropriations
Less Employee Training and Development			(4,000)								Training budgets have been reduced by appropriated reduction. Only training required to maintain program or professional standards.
Medical Examiner			200,000								Increase in funding to address budget shortfalls. No program reductions to the Medical Examiner.
Personal Services & Current Expense Reductions			(179,700)								Personnel reduced by 2 FTEs 1 RIF/retirement, 1 FTE through attrition, current expenses reduced
Policy Support Personnel Reductions			(10,300)								Reduction in use of AG services
Reduce mileage rate from 50.5 to 36 cents			(3,000)								Reduce mileage rate
Travel and Current Expense			(20,400)								Out of state travel budgets and computer replacement eliminated.
Reassign Personnel			(37,000)								GOPB will now be responsible for Budget Management System. Loss of IT budget support.
Support Services and Personnel Reductions			(154,000)								Personnel reduced by 2 FTEs RIF
ISF rate impact					(84,700)						Operating budget to reflect appropriations
<i>Health Care Financing</i>	4,900,400	5,487,200	(805,800)		(76,400)		4,605,000	4,605,000			
Cancel Research Contract			(79,000)								Eliminate research contract
Reduce In-state travel by 20%			(900)								Reduction in in-state travel by 20%

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Defund Boards & Commissions			(1,200)							Reduce funding for Boards & Commissions	
Reduce out-of-state travel			(1,600)							Reduction of out-of-state travel	
Incentive Reward Elimination			(10,500)							Eliminate incentive awards	
Personal Services & Current Expense Reductions			(205,900)							3 FTE through attrition	
Reduce mileage rate from 50.5 to 36 cents			(900)							Reduce mileage rate	
Reduce Third-Party Medicaid Analysis Contracts			(90,000)							Reduce 3rd party Medicaid Analysis contract	
Reduce KPMG Contract Workload			(80,000)							Reduce KPMG Contract	
Reductions in Administrative Staff and Computer Purchases			(14,000)							Computer replacement budget reduced	
Reassign Duties to Higher FMAP Area			(25,000)							Staff reassignment	
ISF rate impact					(76,400)					Operating budget to reflect appropriations	
Reallocation of reductions between line items			(296,800)							Operating budget to reflect appropriations	
Health Systems Improvement	5,674,400	6,302,800	(1,709,600)	30,600	7,500	125,000	4,756,300	4,600,700			
Child Care Licensing Reduction to Match Fewer Facilities			(108,700)							Impact will be minor assuming no growth in this industry. If child care expands as the economy improves, we will not have adequate staff to perform the required licensing and inspection visits.	
Reduce In-state travel by 20%			(9,400)							Reduction in in-state travel by 20%	
Defund Boards & Commissions			(6,600)							Reduce funding for Boards & Commissions	
Reduce out-of-state travel			(14,500)							Eliminate out-of-state travel	
EMS Program Reduction			(500,000)							Urban, EMS program reduced.	
End CPR Training for All 10th Graders			(300,000)							Eliminate CPR training for 10th Graders	
Incentive Reward Elimination			(2,100)							Eliminate incentive awards	
Personal Services & Current Expense Reductions			(184,300)							FTE 4.5 increased workload of existing staff	
Reduce mileage rate from 50.5 to 36 cents			(9,000)							Reduce mileage rate	
Reduce Primary Care Grants			(409,400)							Reduction of funding to Safety Net Providers. 5,000 fewer primary care encounters.	
Reduce Primary Care Grants to FY 2004 Levels			(30,600)	30,600					(30,600)	Operating budget to reflect appropriations	Additional reduction because of the loss of the 2010 backfill
Director's Office Current			(75,000)							1 FTE loss.	
Primary Care Grants			(60,000)							Reduction of funding to Safety Net Providers	
CVE/Health Care Reform						75,000				Operating budget to reflect appropriations	
ISF rate impact					7,500					Operating budget to reflect appropriations	
Doctor Free Clinic						50,000				Reduction in operating budget	
Local Health Departments	2,497,000	2,497,000	(374,600)	187,300			2,309,700	2,122,400			
Local Health Department Funding			(374,600)	187,300					(187,300)	Reduction of pass through to Local Health Departments.	Additional reduction because of the loss of the 2010 backfill
Medicaid Mandatory Services	221,859,600	221,494,500	(29,204,400)	28,936,400	300	8,088,700	229,315,500	192,290,400			
Reduce In-state travel by 20%			(1,900)							Reduction in in-state travel by 20%	
Reduce out-of-state travel			(500)							Eliminate out-of-state travel	
Incentive Reward Elimination			(27,100)							Eliminate incentive awards	
Medicaid Administrative Roll-back for HMO's			(1,321,800)							Admin rate reduced as per appropriation	
Medicaid Caseload/Utilization Increases				10,035,000					(10,035,000)	2010 caseload funded with one-time funding	Ongoing funding needed to replace one-time funding.
Medicaid Cost Containment			(2,400,000)	9,500,000					(9,500,000)	One-time funding to convert managed care contracts to risk based.	Contracts will be in place and savings ongoing.
Medicaid Inflation				5,317,400					(5,317,400)	One-time funding provided for mandatory inflation ie. Pharmacy, FQHCs, Medicare premiums	Ongoing funding needed to replace this one-time funding.
Personal Services & Current Expense Reductions			(131,600)							Operating budget to reflect appropriations	
Provider Rate Reduction - Medicaid Non-physician to FY 2008 Rate			(6,073,600)	677,400					(677,400)	Provider rates rolled back to 2008 levels	Without ongoing funding for backfill amounts additional cuts will occur.
Provider Rate Reduction - Medicaid Physicians to 7/1/08 Rates			(429,700)	284,000					(284,000)	Physician rates partially rolled back to 2008 levels.	Full reduction to 2008 level without ongoing funding of backfill.
Reduce Medicaid Hospital Rates			(16,923,700)	4,500,000					(4,500,000)	Reduction was part of the total 15% rate reduction Hospitals experience for FY 2010.	Additional reductions will be needed if one time money not made ongoing.
Reduce mileage rate from 50.5 to 36 cents			(600)							Reduce mileage rate	
Second Reduction of Rates for Medicaid Non-physician Before 7/1/07			(2,455,200)	1,622,600					(1,622,600)	Rates rolled back to 2007 levels.	Additional reductions will be needed if one time money not made ongoing.

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FMAP Rate Change			(3,708,100)					
Medicaid Restricted Account Fund Balance				(3,000,000)				
Reduce HMO Administrative Reimbursement			(881,200)					
Reduction of Inpatient Outlier Factor			(624,700)					
Provider Inflation Rollback			(3,428,500)					
Savings from Transition to "New Choices" Waiver		(39,501,200)	(1,093,000)					
ISF rate impact					300			
May Special Session Adjustment						5,919,500		
May Special Session Adjustment ARRA adjustment						2,169,200		
Reallocation of reductions between line items			10,296,800					
<i>Medicaid Optional Services</i>	107,364,500	115,558,200	(20,350,800)	8,113,000	400		103,320,800	95,207,800
5% Drug Reimbursement Reduction in Medicaid			(1,685,000)	1,129,000				
Medicaid Caseload/Utilization Increases				4,565,000				
Medicaid Inflation				2,419,000				
Start Prior Authorization for PDL			(1,474,300)					
FMAP Rate Change			(1,921,100)					
Crossover Reimbursement Payments			(2,719,900)					
Eliminate Primary Care Network Inpatient Physician			(500,000)					
Suspend Transition Program			(200,000)					
More Aggressive Operation of Utah Maximum Allowable Cost for Pharmacy			(1,378,100)					
Eliminate Selected Optional Services			(472,400)					
ISF rate impact					400			
Reallocation of reductions between line items			(10,000,000)					
<i>Workforce Financial Assistance</i>	425,900	425,900	(425,900)					
Eliminate Workforce Financial Assistance			(425,900)					

Reduction FY 2011	FY 2010 Reduction Status	FY 2011 Reduction Proposal
	Increased FMAP in FY2010 required fewer General Funds.	Unknown for FY2011.
	Operating budget to reflect appropriations	
	Operating budget reductions from Sept 2009 special session. Reduce from 9% to 8%	
	Inpatient hospital reimbursement reduced Oct 2008. Resulted in 1% reduction.	
	FY2009 rate increased rolled back to FY2008 levels.	
	Changed contracting to fee-for-service Oct 2008.	
	Operating budget to reflect appropriations	
(5,919,500)	one-time inpatient hospital funding to mitigate rate reductions.	Ongoing funding needed to replace this one-time funding.
	Reflects updated estimate of federal stimulus funding.	
	Operating budget to reflect appropriations	
(1,129,000)	Pharmacy rate reduction implemented - AWP adjusted to meet 5% reductions target	Additional reductions will be needed if one-time money not made ongoing.
(4,565,000)	2010 caseload funded with one-time funding	Ongoing funding needed to replace one-time funding.
(2,419,000)	One-time funding provided for mandatory inflation ie. Pharmacy, FQHCs, Medicare premiums	Ongoing funding needed to replace this one-time funding.
	Process change implemented	
	Increased FMAP in FY2010 required fewer General Funds.	
	Limited nursing home reimbursement for dually eligible Medicare and Medicaid clients. Effective November 2008	
	Eliminated coverage for physician services provided in the hospital setting for PCN clients. Nov 2008	
	Prevented ICF/MR clients from transitioning into community setting. Effective Oct 2008	
	Established maximum allowable cost on more pharmaceutical products. Effective Oct 2008	
	Operating budget reductions from Sept 2009 special session - eliminated physical and occupational therapy, speech therapy, hearing aids, chiropractic services. one-time funding provided in FY2010 for physical and occupational therapy.	Physical and Occupational therapy will no longer be funded.
	Operating budget to reflect appropriations	
	Operating budget to reflect appropriations	
	Program Eliminated	