

State of Utah
Federal Receipts Reporting
and
Plan of Potential 5 % and 25 %
Federal Receipts Reductions
For State Fiscal Year 2012



To: The Executive Appropriations Committee

November 30, 2012

Prepared by: Department of Administrative Services, Division of Finance



Department of Health
ADAP Shortfall Relief-Ryan White Part B Supplemental

Plan of Potential 5 % and 25 % Federal Receipts Reductions
Based on Fiscal Year 2012
—Does not include ARRA—

CFDA numbers that comprise this program	93.917
Agency contact name and phone number	Cristie Chesler, (801) 538-9465

Fiscal Year 2012 Federal Program Information:

Federal Receipts	\$ 4,689,682
Number of FTEs	0
Recipients/Clients Served	85
Describe Recipients/Clients Served	85 HIV positive clients receive HIV medications. The clients either have no insurance or are underinsured.

Potential 5 % and 25 % federal receipts reductions based on fiscal year 2012:

(Insert amount of expected increase/(decrease) in State/other funds and FTEs associated with the potential federal reductions.)

Funding Information	5 %	25 %
Federal	(\$234,484)	(\$1,172,421)
State:		
General Fund		
Education Fund		
Transportation Fund		
Transportation Investment Fund		
Restricted Fund/Account Name:		

Other Fund:		

Dedicated Credits		
Other: _____		
Other: _____		
TOTAL	(\$234,484)	(\$1,172,421)

FTEs	0	0
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Maintenance of Effort (Describe any State matching and/or maintenance of effort requirements. Include references to federal laws, regulations, or grant provisions.)	There is not matching or maintenance of effort requirements.
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Describe the program, activity, or expenditure type that would be impacted by the proposed federal funds receipts reductions. Would this reduction require a change in statute or rules? If so list references.	
5 %	Reducing this funding source by 5% would result in 4 HIV positive individuals being removed from the Program. No change in statute or rules is required.
25 %	Reducing this funding source by 25% would result in 21 HIV positive individuals being removed from the Program. No change in statute or rules is required.

What would be the impact on recipients (including state and local agencies) receiving these services? What changes in program(s), services, expenditures, fees, etc. would be made if this reduction is implemented?	
5 %	The change would be that the four individuals affected would not receive their HIV drugs and would need to find another way to obtain HIV drugs. The drugs are expensive (approximately \$9000 a year) and individuals cannot afford them without assistance. There is no other state or local programs that assist with HIV drugs.

25 %	The change would be that the twenty-one individuals affected would not receive their HIV drugs and would need to find another way to obtain HIV drugs. The drugs are expensive (approximately \$9000 a year) and individuals cannot afford them without assistance. There is no other state or local programs that assist with HIV drugs.
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Are there mandated federal services that the State would have to maintain even though federal funding is cut?
Are there other resources available to meet these needs?

5 %	The State is not obligated to provide medications to HIV positive individuals, but when the individuals became sick from lack of medications, the hospitals are obligated to provide medical care which would be much more expensive than the cost of the medications. They may be able to receive the drugs through a pharmacy assistance program, but this is uncertain and depends on what HIV drugs the patient is on.
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25 %	The State is not obligated to provide medications to HIV positive individuals, but when the individuals became sick from lack of medications, the hospitals are obligated to provide medical care which would be much more expensive than the cost of the medications. They may be able to receive the drugs through a pharmacy assistance program, but this is uncertain and depends on what HIV drugs the patient is on.
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Department of Health
AIDS Prevention

Plan of Potential 5 % and 25 % Federal Receipts Reductions
Based on Fiscal Year 2012
—Does not include ARRA—

CFDA numbers that comprise this program	93.940, 93.944
Agency contact name and phone number	Lynn Meinor, (801) 538-6198

Fiscal Year 2012 Federal Program Information:

Federal Receipts	\$ 1,581,894
Number of FTEs	12
Recipients/Clients Served	21,916
Describe Recipients/Clients Served	7,000 clients were tested for HIV in 2011. In addition, 15,228 clients were reached through various interventions in the state.

Potential 5 % and 25 % federal receipts reductions based on fiscal year 2012:

(Insert amount of expected increase/(decrease) in State/other funds and FTEs associated with the potential federal reductions.)

Funding Information	5 %	25 %
Federal	(\$79,095)	(\$395,474)
State:		
General Fund		
Education Fund		
Transportation Fund		
Transportation Investment Fund		
Restricted Fund/Account Name:		

Other Fund:		

Dedicated Credits		
Other: _____		
Other: _____		
TOTAL	(\$79,095)	(\$395,474)

FTEs	0	-2
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Maintenance of Effort (Describe any State matching and/or maintenance of effort requirements. Include references to federal laws, regulations, or grant provisions.)	None
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Describe the program, activity, or expenditure type that would be impacted by the proposed federal funds receipts reductions. Would this reduction require a change in statute or rules? If so list references.

5 %	HIV Prevention program activities including counseling and testing, prevention education and behavioral interventions would need to be reduced. Free testing of at-risk individuals would be reduced and less HIV positive individuals would be identified and referred to care. No change in statute or rules.
25 %	HIV Prevention program activities listed above would be severely reduced and funding to local health departments and community based organizations would be cut. Personnel at the state level would be cut by 2 FTEs. No change in statute or rules.

What would be the impact on recipients (including state and local agencies) receiving these services? What changes in program(s), services, expenditures, fees, etc. would be made if this reduction is implemented?

5 %	Free HIV testing would be reduced and limited only to those at highest risk due to limited test kit purchases. Fewer individuals would receive education programs and behavioral interventions. Fees may be charged for trainings and technical assistance
25 %	Local Health Departments and funded contracted agencies would receive significant decreases in HIV Prevention funding. Individuals will be limited in their access to HIV testing and prevention education. Positions will be cut at the Utah Department of Health and contracted local health departments and community based organizations.

<p>Are there mandated federal services that the State would have to maintain even though federal funding is cut? Are there other resources available to meet these needs?</p>	
5 %	There are no mandated federal services in HIV Prevention.
25 %	There are no mandated federal services in HIV Prevention.

Department of Health
Children's Health Insurance Program – CHIP

Plan of Potential 5 % and 25 % Federal Receipts Reductions
Based on Fiscal Year 2012
—Does not include ARRA—

CFDA numbers that comprise this program	93.767
Agency contact name and phone number	Shari Watkins, (801) 538-6601

Fiscal Year 2012 federal program information:

Federal Receipts	\$ 56,040,844
Number of FTEs	8.9
Recipients/Clients Served	37,372 / month
Describe Recipients/Clients Served	CHIP eligible children with family incomes less than or equal to 200% FLP

Potential 5 % and 25 % federal receipts reductions based on fiscal year 2012:

(Insert amount of expected increase/(decrease) in State/other funds and FTEs associated with the potential federal reductions.)

Funding Information	5 %	25 %
Federal	(\$2,802,042)	(\$14,010,211)
State:		
General Fund	(250,323)	(1,251,614)
Education Fund		
Transportation Fund		
Transportation Investment Fund		
Restricted Fund/Account Name: Tobacco Settlement	(539,824)	(2,699,124)
Other Fund:		

Dedicated Credits	(99,403)	(497,015)
Other: _____		
Other: _____		
TOTAL	(\$3,691,592)	(\$18,457,964)

FTEs	0	0
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Maintenance of Effort (Describe any State matching and/or maintenance of effort requirements. Include references to federal laws, regulations, or grant provisions.)	The Patient Protection and Affordable Care Act (ACA) specifies that existing coverage for children under the Medicaid or CHIP program will remain in place until 2019. It is assumed that this restriction will be lifted if either 5% or 25% cuts are required.
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Describe the program, activity, or expenditure type that would be impacted by the proposed federal funds receipts reductions. Would this reduction require a change in statute or rules? If so list references.	
5 %	The average monthly enrollment in CHIP would have to be reduced by 1,991 recipients. Currently the State is required by law to be open to any qualifying child. This law would have to be rescinded and CHIP enrollment would need to be capped at 35,381.
25 %	The average monthly enrollment in CHIP would have to be reduced by 9,956 recipients. Currently the State is required by law to be open to any qualifying child. This law would have to be rescinded and CHIP enrollment would need to be capped at 27,416. This could be accomplished by capping CHIP family eligibility incomes at less than or equal to 150% FLP

<p>What would be the impact on recipients (including state and local agencies) receiving these services? What changes in program(s), services, expenditures, fees, etc. would be made if this reduction is implemented?</p>	
5 %	<p>The average monthly enrollment in CHIP would have to be reduced by 1,991 recipients. Currently the State is required by law to be open to any qualifying child. This law would have to be rescinded and CHIP enrollment would need to be capped at 35,381. Current law does not allow for reduction in services. CHIP premiums are paid at a capitated rate. Reduction to this rate would likely cause all service providers to sever their contracts.</p>
25 %	<p>The average monthly enrollment in CHIP would have to be reduced by 9,956 recipients. Currently the State is required by law to be open to any qualifying child. This law would have to be rescinded and CHIP enrollment would need to be capped at 27,416. This could be accomplished by capping CHIP family eligibility incomes at less than or equal to 150% FLP. Current law does not allow for reduction in services. CHIP premiums are paid at a capitated rate. Reduction to this rate would likely cause all service providers to sever their contracts.</p>

<p>Are there mandated federal services that the State would have to maintain even though federal funding is cut? Are there other resources available to meet these needs?</p>	
5 %	<p>This cut would make 1,991 CHIP eligible lose coverage. It is likely that they will be uninsured. If a catastrophic event occurs, it will increase the amount of uncompensated care cost to hospitals.</p>
25 %	<p>This cut would make 9,956 CHIP eligible lose coverage. It is likely that they will be uninsured. If a catastrophic event occurs, it will increase the amount of uncompensated care cost to hospitals.</p>

Department of Health
Core Capacity Tobacco – Collaborative Chronic Disease

Plan of Potential 5 % and 25 % Federal Receipts Reductions
Based on Fiscal Year 2012
—Does not include ARRA—

CFDA numbers that comprise this program	93.283
Agency contact name and phone number	Janae Duncan, (801) 538-9273

Fiscal Year 2012 Federal Program Information:

Federal Receipts	\$ 1,200,152
Number of FTEs	7.25
Recipients/Clients Served	200,000
Describe Recipients/Clients Served	Utah tobacco users

Potential 5 % and 25 % federal receipts reductions based on fiscal year 2012:

(Insert amount of expected increase/(decrease) in State/other funds and FTEs associated with the potential federal reductions.)

Funding Information	5 %	25 %
Federal	(\$60,008)	(\$300,038)
State:		
General Fund		
Education Fund		
Transportation Fund		
Transportation Investment Fund		
Restricted Fund/Account Name:		

Other Fund:		

Dedicated Credits		
Other: _____		
Other: _____		
TOTAL	(\$60,008)	(\$300,038)

FTEs	0	0
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Maintenance of Effort (Describe any State matching and/or maintenance of effort requirements. Include references to federal laws, regulations, or grant provisions.)	1:3 required State match
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Describe the program, activity, or expenditure type that would be impacted by the proposed federal funds receipts reductions. Would this reduction require a change in statute or rules? If so list references.

5 %	Reductions to Utah Tobacco Quit Line cessation interventions (resulting in 150-200 callers not served) and reductions in local health department community interventions. No change in statute required.
25 %	Reductions to Utah Tobacco Quit Line cessation interventions (resulting in 150-200 callers not served) and reductions in local health department community interventions (with a loss of approximately 2–2.5 FTEs in the health districts). No change in statute required.

What would be the impact on recipients (including state and local agencies) receiving these services? What changes in program(s), services, expenditures, fees, etc. would be made if this reduction is implemented?

5 %	Decreased access to tobacco quit services and community programs and policies that reduce the burden of tobacco; Increased smoking with resulting health and economic costs to Utah.
25 %	Decreased access to tobacco quit services and community programs and policies that reduce the burden of tobacco; Increased smoking with resulting health and economic costs to Utah.

Are there mandated federal services that the State would have to maintain even though federal funding is cut? Are there other resources available to meet these needs?	
5 %	N/A
25 %	N/A

Department of Health
Epidemiology and Lab Capacity for Infectious Disease

Plan of Potential 5 % and 25 % Federal Receipts Reductions
Based on Fiscal Year 2012
—Does not include ARRA—

CFDA numbers that comprise this program	93.283
Agency contact name and phone number	Melissa Stevens Dimond, (801) 538-6810

Fiscal Year 2012 Federal Program Information:

Federal Receipts	\$ 1,073,841
Number of FTEs	8.3
Recipients/Clients Served	Statewide
Describe Recipients/Clients Served	Contractual funds were provided to UTA for bus ads (for the "Fight the Bite" WNV prevention campaign); Utah State University for tick studies (for Lyme Disease); and Collaborative Software Initiatives, Inc. for maintenance of the UT-NEDSS/TriSano surveillance system.

Potential 5 % and 25 % federal receipts reductions based on fiscal year 2012:

(Insert amount of expected increase/(decrease) in State/other funds and FTEs associated with the potential federal reductions.)

Funding Information	5 %	25 %
Federal	(\$53,692)	(\$268,460)
State:		
General Fund		
Education Fund		
Transportation Fund		
Transportation Investment Fund		
Restricted Fund/Account Name:		

Other Fund:		

Dedicated Credits		
Other: _____		
Other: _____		
TOTAL	(\$53,692)	(\$268,460)

FTEs	0	-2.5
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Maintenance of Effort (Describe any State matching and/or maintenance of effort requirements. Include references to federal laws, regulations, or grant provisions.)	N/A
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Describe the program, activity, or expenditure type that would be impacted by the proposed federal funds receipts reductions. Would this reduction require a change in statute or rules? If so list references.	
5 %	At the 5% level, contracts would be severely impacted in order to maintain personnel. Contracts for activities associated with the "Fight the Bite"/WNV prevention campaign and tick surveillance and education would be eliminated. Funds available for the contract for maintenance of UT-NEDSS would be reduced, which could impact the system. This reduction would not require a change in statute or rule.
25 %	At the 25% level, contracts would be eliminated in order to preserve personnel; in addition, 2 to 3 FTEs would have to be eliminated at this level. This reduction would not require a change in statute or rule.

<p>What would be the impact on recipients (including state and local agencies) receiving these services? What changes in program(s), services, expenditures, fees, etc. would be made if this reduction is implemented?</p>	
5 %	<p>At the 5% level, contracts with vendors would be impacted as described above. This would impact our ability to provide education and prevention messages for WNV and tick-borne diseases, and would impact UT-NEDSS maintenance. This could impact the use of the system by Local Health Departments and UDOH staff.</p>
25 %	<p>At the 25% level, all contractual funds would be eliminated as described above. In addition, personnel would be eliminated (presumably within Epidemiology and the Unified State Laboratories: Public Health), resulting in increased workload for existing staff which would result in problems with productivity, customer service, and morale.</p>

<p>Are there mandated federal services that the State would have to maintain even though federal funding is cut? Are there other resources available to meet these needs?</p>	
5 %	<p>No.</p>
25 %	<p>No – mandated services would be from the State level; investigation of cases and outbreaks is required in State statute and rule. Internal personnel would be assigned to cover investigations and other critical work previously assigned to cut positions.</p>

Department of Health
Hospital Preparedness Program

Plan of Potential 5 % and 25 % Federal Receipts Reductions
Based on Fiscal Year 2012
—Does not include ARRA—

CFDA numbers that comprise this program	93.889
Agency contact name and phone number	Kevin McCulley 801-273-6669

Fiscal Year 2012 Federal Program Information:

Federal Receipts	\$ 3,184,701
Number of FTEs	5.4
Recipients/Clients Served	Utah Hospitals, long term care facilities, LHDs, healthcare association, EMS, others/Statewide
Describe Recipients/Clients Served	The HPP provides services to the entire state through funding and developing preparedness strengths within healthcare systems, from hospitals, to local public health, to EMS, to long-term care, to outpatient clinics. Sub grantees include all (12) local health departments, 50 of 51 hospitals in the state, 96 long-term care facilities, all Community Health Center organizations in the state, and internally to the Bureau of EMSP.

Potential 5 % and 25 % federal receipts reductions based on fiscal year 2012:

(Insert amount of expected increase/(decrease) in State/other funds and FTEs associated with the potential federal reductions.)

Funding Information	5 %	25 %
Federal	(\$159,235)	(\$796,175)
State:		
General Fund		
Education Fund		
Transportation Fund		
Transportation Investment Fund		
Restricted Fund/Account Name:		

Other Fund:		

Dedicated Credits		
Other: _Parent Fee		
Other: _____		
TOTAL	(\$159,235)	(\$796,175)

FTEs	0	-2
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<p>Maintenance of Effort (Describe any State matching and/or maintenance of effort requirements. Include references to federal laws, regulations, or grant provisions.)</p>	<p>Per ASPR HPP FOA FY11: HPP CA funding must be matched by nonfederal contributions beginning with the distribution of FY09 funds. Nonfederal contributions (match) may be provided directly or through donations from public or private entities and may be in cash or in-kind donations, fairly evaluated, including plant, equipment, or services. Amounts provided by the federal government may not be included in determining the amount of such nonfederal contributions. Awardees will be required to provide matching funds as described: • For FY11, not less than 10% of such costs (\$1 for each \$10 of federal funds provided in the CA).</p> <p>Please refer to 45 CFR § 92.24 for match requirements, including descriptions of acceptable match resources. Documentation of match, including methods and sources, must be included in the FY11 application for funds, follow procedures for generally accepted accounting practices and meet audit requirements. We use FTE match from 8 hospital emergency managers who work full time on HPP related projects to satisfy our match requirement. (Ex. A hospital emergency manager earns \$50,000 and works 100% FTE on projects funded by HPP, so that is a \$50,000 match toward total).</p>
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	<p>MOF: Awardees must demonstrate that they intend to maintain expenditures for healthcare preparedness at a level that is not less than the average of such expenditures maintained by the entity for the preceding 2-year period. These expenditures encompass <u>all funds spent by the State</u> for healthcare preparedness. The awardee must 'certify with a sentence' that they have maintained the average level of expenditures required. All preparedness funds are Federal, so we report state expenditures as \$0 and 'certify with a sentence'.</p>
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Describe the program, activity, or expenditure type that would be impacted by the proposed federal funds receipts reductions. Would this reduction require a change in statute or rules? If so list references.	
5 %	See below, no statute or rule change needed.
25 %	See below, no statute or rule change needed.

What would be the impact on recipients (including state and local agencies) receiving these services? What changes in program(s), services, expenditures, fees, etc. would be made if this reduction is implemented?	
5 %	5% Cut will result in a slight reduction of facility level funds for hospitals, long-term care facilities, and community health clinics. It will also result in a reduction in local health department funding, but only for funds that were allocated for shared healthcare coalition purchases. Additional slight losses would be seen in UDOH program elements, including available funds for EMS Strike Teams, Disaster Response Units, and other projects. Overall the impact would be minimal on achieving successful project outcomes.
25 %	A 25% cut would result in a loss of \$796,175 for the HPP program. In order to keep under the administrative cap of 15% per the ASPR HPP grant, at least 2 FTE would have to be cut from the 5.4 FTE currently funded under the program. Additionally, travel would be cut by 40%, and equipment and supplies would be cut by half. Facility level funds would be reduced by as much as 20%, as well as funding to local health districts by a similar amount. Funding for UDOH projects such as EMS Strike Teams and maintenance of disaster response trailers would also be cut by as much as half under this scenario. This would have a severe impact to the program in terms of meeting all proposed outcomes for FY11, but we could scale back expectations and pass-through funding and still have a viable program that demonstrates success. The bigger concern would be with the reduction of UDOH FTE that get paid off this program, unsure how we would cover these losses with other funds.

Are there mandated federal services that the State would have to maintain even though federal funding is cut? Are there other resources available to meet these needs?	
5 %	We have two projects that help define our performance benchmarks for the HPP 1) ESAR-VHP (Utah Responds) – an electronic system that enrolls, tracks, credentials, and deploys healthcare volunteers; and 2) HAvBED (Utah Healthcare Resources Management System (UHRMS)) – an electronic system to track available beds in Utah hospitals. I anticipate under either scenario that we would need to maintain operability of these systems. UDOH does receive funding for the ESAR-VHP program through a separate grant, but not for the HAvBED. Additionally, we provide support to Utah’s Health Alert Network (Utah Notification and Information System (UNIS)) which will need to continue operations.
25 %	Yes/Yes in part – See above

Department of Health
Immunization and Vaccines for Children

Plan of Potential 5 % and 25 % Federal Receipts Reductions
Based on Fiscal Year 2012
—Does not include ARRA—

CFDA numbers that comprise this program	93.268
Agency contact name and phone number	Linda Abel, (801) 538-6905

Fiscal Year 2012 Federal Program Information:

Federal Receipts	\$ 2,990,082
Number of FTEs	19
Recipients/Clients Served	Utah's children
Describe Recipients/Clients Served	26.6% of Utah children are served through the Vaccine for Children Program

Potential 5 % and 25 % federal receipts reductions based on fiscal year 2012:

(Insert amount of expected increase/(decrease) in State/other funds and FTEs associated with the potential federal reductions.)

Funding Information	5 %	25 %
Federal	(\$149,504)	(\$747,521)
State:		
General Fund		
Education Fund		
Transportation Fund		
Transportation Investment Fund		
Restricted Fund/Account Name:		

Other Fund:		

Dedicated Credits		
Other: _____		
Other: _____		
TOTAL	(\$149,504)	(\$747,521)

FTEs	-2	-10
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Maintenance of Effort (Describe any State matching and/or maintenance of effort requirements. Include references to federal laws, regulations, or grant provisions.)	No state matching dollars are required.
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Describe the program, activity, or expenditure type that would be impacted by the proposed federal funds receipts reductions. Would this reduction require a change in statute or rules? If so list references.	
5 %	The immunization programs ability to meet federal grant guidelines and reporting would be reduced. The reduction would not require a change in statute or rule.
25 %	The reduction would seriously impact the programs ability to oversee the accountability of 350 provider groups. The reduction would not require a change in statute or rule.

What would be the impact on recipients (including state and local agencies) receiving these services? What changes in program(s), services, expenditures, fees, etc. would be made if this reduction is implemented?	
5 %	There would be a 5% reduction in past through funding to local Health departments. A reduction in force (RIF) of 2 FTEs. Program staff would be required. This impact would reduce immunization services.
25 %	There would be a 25% reduction in past through funding to local Health departments. An additional 8 Program staff FTE would be reduced. This impact would reduce immunization services significantly.

Are there mandated federal services that the State would have to maintain even though federal funding is cut? Are there other resources available to meet these needs?	
5 %	No
25 %	No

Department of Health
Infants and Toddlers with Disabilities

Plan of Potential 5 % and 25 % Federal Receipts Reductions
Based on Fiscal Year 2012
—Does not include ARRA—

CFDA numbers that comprise this program	84.181
Agency contact name and phone number	Susan Ord 801-584-8441

Fiscal Year 2012 Federal Program Information:

Federal Receipts	\$ 5,397,470
Number of FTEs	5.38
Recipients/Clients Served	7,393
Describe Recipients/Clients Served	Children birth to three with diagnosed conditions or moderate developmental delays and their families.

Potential 5 % and 25 % federal receipts reductions based on fiscal year 2012:

(Insert amount of expected increase/(decrease) in State/other funds and FTEs associated with the potential federal reductions.)

Funding Information	5 %	25 %
Federal	(\$269,874)	(\$1,349,368)
State:		
General Fund		
Education Fund		
Transportation Fund		
Transportation Investment Fund		
Restricted Fund/Account Name:		

Other Fund:		

Dedicated Credits		
Other: Parent Fee	(13,800)	(69,000)
Other: _____		
TOTAL	(\$283,674)	(\$1,418,368)

FTEs	0	0
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Maintenance of Effort (Describe any State matching and/or maintenance of effort requirements. Include references to federal laws, regulations, or grant provisions.)	Non-supplanting requirement states that the same amount of state dollars must spent on program activities as in the previous year.
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Describe the program, activity, or expenditure type that would be impacted by the proposed federal funds receipts reductions. Would this reduction require a change in statute or rules? If so list references.	
5 %	Would not require a change in statute or rule. We would reduce either the amount of funding distributed to early intervention programs through contracts with local health departments, universities, and private non-profit agencies, or the amount of supplies, training and IT services purchased to implement systems activities.
25 %	Would reduce both the amount of funding distributed through contracts to early intervention programs, and the amount of supplies, training and IT services purchased to implement systems activities. Reduction to early intervention program contracts would require a change in child eligibility for services thereby limiting the number of children served in the program. This action would require approval from the federal funding agency, as well as a change in state rule R398.20.

What would be the impact on recipients (including state and local agencies) receiving these services? What changes in program(s), services, expenditures, fees, etc. would be made if this reduction is implemented?

5 %	Reduce funding of local health departments and other service provider's contracts by 5%. Limit local health departments and service provider's budgets for purchasing supplies, training, and IT support.
25 %	Reduce funding of contracts to local health departments and other service providers by 25%; Consider changing eligibility to serve only children with severe delays. This would reduce the number of children with developmental delays served.

Are there mandated federal services that the State would have to maintain even though federal funding is cut? Are there other resources available to meet these needs?	
5 %	The state would be required to continue to provide the full array of services to all children enrolled in the early intervention program. These services are mandated by federal law. There are no other resources to meet these needs.
25 %	The state would be required to continue to provide the full array of services to all children enrolled in the early intervention program. These services are mandated by federal law. There are no other resources to meet these needs.

Department of Health
Maternal and Child Health Block Grant

Plan of Potential 5 % and 25 % Federal Receipts Reductions
Based on Fiscal Year 2012
—Does not include ARRA—

CFDA numbers that comprise this program	93.994
Agency contact name and phone number	Nan Streeter 801-538-9363

Fiscal Year 2012 Federal Program Information:

Federal Receipts	\$ 5,668,230
Number of FTEs	42.76
Recipients/Clients Served	Not available
Describe Recipients/Clients Served	These funds are used for all women of childbearing age and all children in the state.

Potential 5 % and 25 % federal receipts reductions based on fiscal year 2012:

(Insert amount of expected increase/(decrease) in State/other funds and FTEs associated with the potential federal reductions.)

Funding Information	5 %	25 %
Federal	(\$283,412)	(\$1,417,058)
State:		
General Fund		
Education Fund		
Transportation Fund		
Transportation Investment Fund		
Restricted Fund/Account Name:		

Other Fund:		

Dedicated Credits		
Other: Collections/Clinical	(16,902)	(84,508)
Other: _____		
TOTAL	(\$300,314)	(\$1,501,566)

FTEs	-1	-6
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Maintenance of Effort (Describe any State matching and/or maintenance of effort requirements. Include references to federal laws, regulations, or grant provisions.)	Per grant requirements, MOE is the amount spent in 1989 which is \$3,897,700. Match requirement is 3 state to 4 federal \$s and is not in addition to the MOE.
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Describe the program, activity, or expenditure type that would be impacted by the proposed federal funds receipts reductions. Would this reduction require a change in statute or rules? If so list references.	
5 %	This level of cut might result in RIFs to several staff, cuts of 5% to contracts
25 %	This level of cut would result in RIFs and/or dissolution of programs as well as cuts to contracts.

What would be the impact on recipients (including state and local agencies) receiving these services? What changes in program(s), services, expenditures, fees, etc. would be made if this reduction is implemented?	
5 %	Reduce funding of contracts to LHDs and others by 5%, reduce current expenses by 5%, and reduce travel expenses. This cut would reduce the numbers of mothers, infants, children including those with special health care needs served in the Department (CSHCN clinics) and in local health departments.

25 %	Reduce funding of contracts to LHDs and others by 25%; reduce current expenses by 25%; reduce travel expenses by 25%; review all state positions to determine if cuts need to be made to get to a total reduction of 25%. Results of a 25% would limit our ability to serve mothers, infants, children including those with special health care needs, reduce the services provided by the State, local health departments, and others with whom we have contracts.
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Are there mandated federal services that the State would have to maintain even though federal funding is cut?
Are there other resources available to meet these needs?

5 %	We are required to use 30% of the federal funds for Children with Special Health Care Needs and another 30% for children. There are no additional resources that could be used to offset the cut.
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25 %	We are required to use 30% of the federal funds for Children with Special Health Care Needs and another 30% for children. There are no additional resources that could be used to offset the cut.
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Department of Health
Medicaid — Medical Assistance Program

Plan of Potential 5 % and 25 % Federal Receipts Reductions
Based on Fiscal Year 2012
—Does not include ARRA—

CFDA numbers that comprise this program	93.778
Agency contact name and phone number	Shari Watkins, (801) 538-6601

Fiscal Year 2012 federal program information:

Federal Receipts	\$ 1,275,173,058
Number of FTEs	N/A
Recipients/Clients Served	290,114 / month
Describe Recipients/Clients Served	People with low income, with physical or mental disabilities, and the aged.

Potential 5 % and 25 % federal receipts reductions based on fiscal year 2012:

(Insert amount of expected increase/(decrease) in State/other funds and FTEs associated with the potential federal reductions.)

Funding Information	5 %	25 %
Federal	(\$63,758,653)	(\$318,793,265)
State:		
General Fund	(9,745,719)	(51,018,073)
Education Fund		
Transportation Fund		
Transportation Investment Fund		
Restricted Fund/Account Name: Hospital and Nursing Home Assessments		(61,805,032)
Other Fund:		
Dedicated Credits	(18,496,006)	(28,366,811)
Other: _____		
Other: _____		
TOTAL	(\$92,000,378)	(\$459,983,181)

FTEs	0	0
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Maintenance of Effort (Describe any State matching and/or maintenance of effort requirements. Include references to federal laws, regulations, or grant provisions.)	The Patient Protection and Affordable Care Act (ACA) specifies that existing coverage for adults under the Medicaid program will remain in place until the Secretary of Health and Human Services determines that an Exchange established by the State under section 1311 of ACA is fully operational. It is assumed that this restriction will be lifted if either 5% or 25% cuts are required.
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Describe the program, activity, or expenditure type that would be impacted by the proposed federal funds receipts reductions. Would this reduction require a change in statute or rules? If so list references.	
5 %	<p>Coverage groups eliminated: Presumptive Eligibility for Pregnant Women (Baby your Baby), Foster Care Independent Living, and Breast & Cervical Cancer.</p> <p>Services Eliminated: Optional Transplants, Vision & Dental for Pregnant Women, Interpretive Services, Personal Care, Physical Therapy, Occupational Therapy, Podiatry and Hospice.</p> <p>Programs Eliminated: Graduate Medical Education (GME), University of Utah Medical Group (UUMG) Physician Enhanced Payments, Inpatient Upper Payment Limit (UPL).</p> <p>Administrative Functions: Funds for administrative functions would be lost for DOH, Division of Medicaid, DWS and DHS. This would result in the reduction of staff which would impact the following: services to clients/patients oversight and management of programs and services, fiscal functions, and IT related services.</p>

25 %	<p>All the same from the 5% group and:</p> <p>Eliminate Disproportional Share Hospital (DSH) payments. Eliminate Coverage for Medically Needy Individuals. Eliminate the Nursing Home Assessment. Eliminate the Hospital Assessment. Considerable reduction in administrative staff and services.</p>

What would be the impact on recipients (including state and local agencies) receiving these services?
What changes in program(s), services, expenditures, fees, etc. would be made if this reduction is implemented?

5 %	<p>3,609 individuals will lose coverage. 19,236 individuals will lose partial coverage. The University of Utah will take reductions in funding from the Physician Enhancement. All hospitals that have Graduate Medical Education (GME) programs will take reductions. All hospitals participating in the Inpatient UPL program will take reductions. The loss of administrative funds will result in the loss of services where program staff is reduced. The oversight of programs would also be lost which could result in disallowances.</p>
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25 %	<p>All the same from the 5% scenario plus:</p> <p>23,489 more individuals will lose coverage. All hospitals in the state will take a dramatic reimbursement reduction. All nursing homes will take a significant reimbursement reduction. People that usually qualify for Medicaid when a catastrophic event occurs (such as a premature birth) will no longer have that safety net. All hospitals qualifying for Disproportionate Share Payments (DSH) will take reductions. The University of Utah Hospital will take another large cut due to the elimination of the Inpatient UPL.</p>
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Are there mandated federal services that the State would have to maintain even though federal funding is cut?
Are there other resources available to meet these needs?

5 %	<p>All programs cut are optional and coverage groups are optional; however, many of the individuals who are cut may qualify through the spend down program. We assume federal maintenance of effort requirements will be lifted if the federal funding is cut.</p>
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25 %	<p>Nothing mandated; however, uncompensated care costs to hospitals will increase. We assume federal maintenance of effort requirements will be lifted if the federal funding is cut.</p>
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Department of Health
Medicaid — Federal Survey and Certification Title 18

Plan of Potential 5 % and 25 % Federal Receipts Reductions
Based on Fiscal Year 2012
—Does not include ARRA—

CFDA numbers that comprise this program	93.777
Agency contact name and phone number	Joel Hoffman, (801) 538-6279

Fiscal Year 2012 Federal Program Information:

Federal Receipts	\$ 1,952,451
Number of FTEs	20.40
Recipients/Clients Served	Health Facilities
Describe Recipients/Clients Served	Home health agencies, hospitals, surgery centers, dialysis centers, hospice agencies

Potential 5 % and 25 % federal receipts reductions based on fiscal year 2012:

(Insert amount of expected increase/(decrease) in State/other funds and FTEs associated with the potential federal reductions.)

Funding Information	5 %	25 %
Federal	(\$97,623)	(\$488,113)
State:		
General Fund		
Education Fund		
Transportation Fund		
Transportation Investment Fund		
Restricted Fund/Account Name:		

Other Fund:		

Dedicated Credits		
Other: _____		
Other: _____		
TOTAL	(\$97,623)	(\$488,113)

FTEs	-1	-5
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Maintenance of Effort (Describe any State matching and/or maintenance of effort requirements. Include references to federal laws, regulations, or grant provisions.)	None
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Describe the program, activity, or expenditure type that would be impacted by the proposed federal funds receipts reductions. Would this reduction require a change in statute or rules? If so list references.	
5 %	This would not require a change in rule or statute. A 5% cut would result in the reduction of one staff that inspects surgery centers, home health and hospice agencies, hospitals and dialysis centers. These inspections are done to certify these health providers to receive Medicare funding for health services. Staff also completes complaint investigations on these types of facilities. This would reduce the ability of the office to respond to complaints from the public.
25 %	This would not require a change in rule or statute. A 25% cut would result in the reduction of 5 staff that inspects surgery centers, home health and hospice agencies, hospitals and dialysis centers. These inspections are done to certify these health providers to receive Medicare funding for health services. Staff also completes complaint investigations on these types of facilities. This would significantly reduce the ability of the office to respond to complaints from the public.

<p>What would be the impact on recipients (including state and local agencies) receiving these services? What changes in program(s), services, expenditures, fees, etc. would be made if this reduction is implemented?</p>	
5 %	<p>If this reduction was implemented, our office would not be able to meet the Federal survey requirements to ensure that health providers are in compliance with Medicare requirements. Certification of these health providers to obtain Medicare funding may be in jeopardy.</p>
25 %	<p>If this reduction was implemented, our office would not be able to meet the Federal survey requirements to ensure compliance with Medicare requirements. Certification of these health providers to obtain Medicare funding may be in jeopardy. 25% would create a larger problem.</p>

<p>Are there mandated federal services that the State would have to maintain even though federal funding is cut? Are there other resources available to meet these needs?</p>	
5 %	<p>There is no state money to support this function. Certification for Medicare is solely based on the Federal requirement for facilities that receive Medicare funding.</p>
25 %	<p>There is no state money to support this function. Certification for Medicare is solely based on the Federal requirement for facilities that receive Medicare funding.</p>

Department of Health
Medicaid — Federal Survey and Certification Title 19

Plan of Potential 5 % and 25 % Federal Receipts Reductions
Based on Fiscal Year 2012
—Does not include ARRA—

CFDA numbers that comprise this program	93.777
Agency contact name and phone number	Joel Hoffman, (801) 538-6279

Fiscal Year 2012 Federal Program Information:

Federal Receipts	\$ 853,021
Number of FTEs	15.96
Recipients/Clients Served	Health Facilities
Describe Recipients/Clients Served	Nursing Care Facilities, Hospitals

Potential 5 % and 25 % federal receipts reductions based on fiscal year 2012:

(Insert amount of expected increase/(decrease) in State/other funds and FTEs associated with the potential federal reductions.)

Funding Information	5 %	25 %
Federal	(\$42,651)	(\$213,255)
State:		
General Fund		
Education Fund		
Transportation Fund		
Transportation Investment Fund		
Restricted Fund/Account Name:		

Other Fund:		

Dedicated Credits		
Other: _____		
Other: _____		
TOTAL	(\$42,651)	(\$213,255)

FTEs	-5	-3
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Maintenance of Effort (Describe any State matching and/or maintenance of effort requirements. Include references to federal laws, regulations, or grant provisions.)	Match rate is 75/25 or 50/50 depending on activity.
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Describe the program, activity, or expenditure type that would be impacted by the proposed federal funds receipts reductions. Would this reduction require a change in statute or rules? If so list references.	
5 %	This would not require a change in rule or statute. A 5% cut would result in the reduction of .5 staff that inspects nursing facilities. These inspections are done to certify these providers to receive Medicaid funding for health services. Staff also completes complaint investigations on these types of facilities. This would reduce the ability of the office to respond to complaints from the public.
25 %	This may require a change in the state Medicaid Plan. A 25% cut would result in the reduction of 3 staff that inspects nursing facilities. These inspections are done to certify these providers to receive Medicaid funding for health services. If they cannot be certified, then Federal funding would not be available. Staff also completes complaint investigations on these types of facilities. This would significantly reduce the ability of the office to respond to complaints from the public.

<p>What would be the impact on recipients (including state and local agencies) receiving these services? What changes in program(s), services, expenditures, fees, etc. would be made if this reduction is implemented?</p>	
5 %	<p>If this reduction was implemented, our office would not be able to meet the Federal survey requirements to ensure that nursing home providers are in compliance with Medicaid requirements. Certification of these health providers to obtain Medicaid funding may be in jeopardy.</p>
25 %	<p>If this reduction was implemented, our office would not be able to meet the Federal survey requirements to ensure that nursing home providers are in compliance with Medicaid requirements. Certification of these health providers to obtain Medicaid funding would be in jeopardy.</p>

<p>Are there mandated federal services that the State would have to maintain even though federal funding is cut? Are there other resources available to meet these needs?</p>	
5 %	<p>There is no extra state money to support this function of certification inspections. Certification for Medicaid is based on the State and Federal requirements for facilities that receive Medicaid funding.</p>
25 %	<p>There is no extra state money to support this function of certification inspections. Certification for Medicaid is based on the State and Federal requirements for facilities that receive Medicaid funding.</p>