

<u>Rank</u>	<u>One-time</u>	<u>Total Funds</u>	<u>Chairs' One-time State Funds Building Block Priority List</u>	<u>Source</u>	<u>Alternative Funding Sources?</u>
<u>1</u>	\$ 419,600	\$ 4,196,000	<p><b>DWS - Health Care Exchange</b> - Administrative costs to implement the health care exchange due to the mandatory provisions of the Affordable Care Act.</p> <p><b>How Measure Success?</b> Affordable Care Act compliant connection of public assistance to an exchange.</p>	Gov. & Agency	None.
<u>2</u>	\$ 642,400	\$ 2,616,100	<p><b>DWS - Affordable Care Act Mandatory Changes</b> - This is for the implementation costs to prepare eligibility systems and get the necessary infrastructure (equipment, space, etc.) in place for the mandatory provisions of the Affordable Care Act.</p> <p><b>How Measure Success?</b> Successful implementation of the mandatory provisions of Affordable Care Act.</p>	Gov. & Agency	Aren't there some employees who are more productive than others? Could you get more employees working at similar levels?
<u>3</u>	\$ 4,000,000	\$ 40,000,000	<p><b>DOH - MMIS Replacement Phase 3 of 4 (FY 2014)</b> - Money is for phase 3 of 4 for the replacement of the Medicaid Management Information System. The Department estimates that another \$2,000,000 one-time General Fund would finish the replacement.</p> <p><b>How Measure Success?</b> Project completed and performing functions as specified in the system design.</p>	Gov. & Agency	One-time FY13 Medicaid surpluses could be used to fund the MMIS project.
<u>4</u>	\$ (1,405,000)	\$ (2,810,000)	<p><b>DWS - Affordable Care Act Mandatory Changes - One-time Offset</b> assumes that Workforce Services does not need the new FTEs until November 2013 since the eligibility changes do not start until January 2014.</p>	LFA	Aren't there some employees who are more productive than others? Could you get more employees working at similar levels?

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<u>5</u>	\$ 213,600	\$ 427,100	<p><b>DOH - Data Security and Privacy Office</b> - Money is for 6 FTEs to address security gaps in the Department's information systems as recommended by a study by Deloitte.</p> <p><b>How Measure Success?</b> (See #6 in ongoing list for outcome measures)</p> <p><b>Performance Measures:</b> (1) Implement the 100 HIPAA Privacy and Security Policies and update policies, procedures and standards as required (2) Conduct annual training for all HIPAA covered employees (3) Coordinate risk assessment and implement risk management for 116 "confidential/restrict" information systems annually (4) In year 1 establish and implement the business mechanism to assure management of security controls and system application changes. (5) Review and audit third-party IT products to assure contractors/vendors meet the DOH privacy and security requirements (6) Develop, update, and test contingency/emergency operation plans annually (7) Coordinate an efficient information security governance.</p>	Gov. & Agency	
<u>6</u>	\$ 42,900	\$ 171,600	<p><b>DHS - Federal Pre-admission Screening and Resident Review (PASRR) (FY 2013)</b> - to help ensure individuals with a mental illness or intellectual disability-related condition, and who have no substantial physical impairments, are not warehoused in nursing facilities.</p> <p><b>How Measure Success?</b> Complete evaluations within the required time frames (Feds, CMS)</p>	Agency	None. All States are required to pay the match for Medicaid for this service.

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<u>7</u>	\$ 250,000	\$ 250,000	<p><b>USOR - One-time Assistive Technology Funding</b> - assist individuals with disabilities to be more independent in their homes and communities - provides items such as wheelchairs for mobility, ramps to get into their homes, grab bars to transfer to the toilet, and hand bars to drive a car.</p> <p><b>How Measure Success?</b> Number of AT devices provided. Number of individuals whose independence has increased because of AT to the VR program and become employed</p>	Gov. & Agency	No alternative funding available
<u>8</u>	\$ 284,500	\$ 284,500	<p><b>DHS - Drug Courts (FY 2013)</b> – Drug courts provide treatment, community supervision, and intensive judicial review to individuals with serious and chronic substance use disorders - provided through coordinated efforts of the judiciary, prosecution, defense counsel, probation, law enforcement, and social services.</p> <p><b>How Measure Success?</b> Alcohol and drug use at admission and discharge. Arrests 30 days prior to admission and 30 days prior to discharge. Percentage of patients who are homeless at admission and discharge. Employment at admission and discharge. Number of children reunified with parents (reduce the number of participants who have their parental rights terminated).</p>	Agency	No alternative funding sources.
<u>9</u>	\$ 250,000	\$ 250,000	<p><b>DOH - Local Health Department Emergency Assistance Fund</b> - Money is to fund SB 20 Local Public Health Emergency Funding (Stowell) from the 2009 General Session.</p> <p><b>How Measure Success?</b> 1) Negotiated threshold for the use of the fund. 2) Adequate emergency reserve fund is maintained to ensure statewide public health response to disease outbreaks.</p>	Agency	One-time FY13 Medicaid surplus could be used to address one-time needs or supplemental within the Social Services Appropriation Subcommittee.
<u>10</u>	\$ 922,000	\$ 922,000	<p><b>DOH - Credit Monitoring</b> - Provide an additional year of credit monitoring for up to 59,000 data breach victims.</p> <p><b>How Measure Success?</b></p>	Gov.	One-time FY13 Medicaid surplus could be used to address one-time needs.

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<u>11</u>	\$ 500,000	\$ 500,000	<b>DWS - Pamela Atkinson Homeless Trust Fund (FY 2014)</b> <b>How Measure Success?</b> Additional case managers would be hired to manage caseloads associated with the 10-Year Plan to End Chronic Homelessness. This is a priority for ongoing success in this program.	Gov. & Eliason	None.
<u>12</u>	\$ 500,000	\$ 500,000	<b>DWS - Road Home Homeless Shelter</b> <b>How Measure Success?</b> Funds would be used to make necessary modifications and improvements to the Midvale Overflow Shelter recently purchased (rather than leased) by The Road Home.	Gov.	A number of private financiers have come to the table with loan funds for this project. Funds to be repaid with lease savings.
<u>13</u>	\$ 130,000	\$ 130,000	<b>DOH - Health Facility Licensing Funding for HB 497</b> - The agency estimates \$130,000 annual General Fund costs beginning in FY 2013 to implement the provisions of HB 497 Clearance for Direct Patient Access from the 2012 General Session. The fiscal note ( <a href="http://le.utah.gov/lfa/fnotes/2012/HB0497S02.fn.pdf">http://le.utah.gov/lfa/fnotes/2012/HB0497S02.fn.pdf</a> ) for the bill stated that there would be ongoing costs to the state but not until FY 2015. From the fiscal note: "The Department of Health will have increased costs of \$15,200 one-time in FY2012 and \$105,000 ongoing beginning in FY2013 for 0.5 FTE and data maintenance contracts for a new system for administering background checks. In FY2013 and FY2014 these administrative increases will be paid for with the federal funds mentioned above. Beginning in FY2015 these ongoing costs would be paid for with General Fund." <b>How Measure Success?</b> (See <u>item with same title on the ongoing list</u> for measures #1 & #2) (3) Increase the scope of background checks that also checks state regulatory registries and records. (4) Increase the scope of employees that are checked in the system.	Agency	

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14	\$ 56,100	\$ 56,100	<b>DOH - Tobacco Funding Shift</b> - The fiscal analyst recommends providing \$56,100 General Fund one-time in FY 2013 to the Department of Health to reflect the actions taken by the Social Services Appropriations Subcommittee during the 2012 General Session. During the preparation of budget bills the \$56,100 ended up in another line item to address a revenue shortfall.	LFA	N/A
15	\$ 650,000	\$ 650,000	<b>DOH - Healthy Eating &amp; Active Living in Utah Neighborhoods - 1 FTE</b> statewide coordinator and money for local interventions to try and reduce the prevalence of obesity. <b>How Measure Success?</b> (1) Increase the percentage of Utahans who meet the physical activity recommendations (2) Increase the number of business, school, religious and community partnerships in funded local health departments (3) Increase the percentage of Utahans who consume 2 cups of fruit and 2.5 cups of vegetables per day	Gov. & Agency	(1) Cigarette Tax increases or a change in the current cigarette tax distributions could be used to fund this request. (2) One-time FY13 Medicaid surpluses with non lapsing could be used to fund the \$650,000 one-time funding included in the Governor's budget.
16	\$ (477,200)	\$ 2,355,400	<b>DWS &amp; DOH - Optional Medicaid Expansion - One-time Offsets</b> Assumes that Medicaid Expansion costs and savings appropriated as ongoing. Since Medicaid expansion would start in January 2014, assumes that new FTEs not needed until November 2013. Three parts: (1) DOH - Medicaid Optional Expansion Administration - one-time savings of \$190,000 General Fund \$380,000 total fund. (2) DOH - Medicaid Optional Expansion Services - assumes that the Primary Care Network ends in January so only a half year of savings in year one. One-time offset of ongoing savings of \$2,450,000 General Fund and \$8,209,800 total fund. (3) DWS - Optional Medicaid Expansion - 203 FTEs - one-time savings of \$2,737,200 General Fund and \$5,474,400 total fund.	LFA	

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<u>17</u>	\$ (1,500,000)	\$ (1,500,000)	<b>DHS - Reduce DCFS General Fund One-time to fund other Legislative Priorities (FY 2013)</b> – Since 2007, DCFS has carried forward between 6.0 percent and 11.0 percent of its General Fund appropriation at the end of each fiscal year ranging in size from \$5.6 million to \$12.2 million. DCFS has a nonlapsing fund balance of \$7,254,000 as of July 1, 2012.	LFA	
<u>18</u>	\$ (59,800)	\$ (139,200)	<b>DOH - 3% from the Nursing Care Facilities Account</b> - There is a 3% maximum for administration from the Nursing Care Facilities Account as permitted by UCA 26-35a-106. There is \$59,800 ongoing available beginning in FY 2013.	LFA	N/A
<u>19</u>	\$ (65,000)	\$ (65,000)	<b>DOH - All Payers Database Delay</b> - To reflect the half year without a vendor to provide services for the all-payer database for medical claims. The contractor stopped submitting bills in January 2012 and ceased serving the State in September 2012. In January 2013 the Department is in the process of identifying a new contractor. The full year cost of the contract is \$230,000 General Fund.	LFA	N/A
<u>20</u>	\$ (60,100)	\$ (60,100)	<b>DOH - HB 256, 2011 GS Funding Not Needed</b> - The Legislature provided the Department of Health \$60,100 in SB 3 to implement capitated dental contracts as per HB 256 Children's Health Insurance and Medicaid Administrative Simplification from the 2011 General Session. The Department has indicated that they did not have a vendor that would save the State money in an urban area. This money is available beginning in FY 2013. <b>How Measure Success?</b> (See <u>item with same title on the ongoing list</u> )	LFA	N/A
<u>21</u>	\$ 70,000	\$ 70,000	<b>Alliance House</b>	Weiler	
<u>22</u>	\$ 500,000	\$ 500,000	<b>Lantern House</b>	Wilcox	
<u>23</u>	\$ 25,000	\$ 25,000	<b>Utah Hemophilia Foundation</b>		
<u>24</u>	\$ 200,000	\$ 200,000	<b>Health Emergency Assistance</b>	Weiler	
<u>25</u>	\$ 70,000	\$ 70,000	<b>Volunteers of America Detox Center</b>	Eliason	
<u>26</u>	\$ 350,000	\$ 350,000	<b>Family Respite Program</b>	Ray	

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27	\$ 4,000	\$ 4,000	<u>HB 81 Cytomegalovirus Public Health Initiative</u>	<u>Menlove</u>	
28	\$ (61,900)	\$ (61,900)	<u>HB 276 Newborn Screening for Critical Congenital Heart Defects</u>	<u>Ray</u>	

\$ 6,451,100 \$ 49,891,600 Totals

**Removed from list, potentially to be addressed via motions**

	\$	\$ 4,576,000	<p><del><b>DWS – Employment Services</b> – DWS is requesting authorization to use additional Reed Act funds it received in the past to provide an increased focus on employment activities. The use of this reserve fund is time limited and at the current pace is expected to be depleted in FY 2015.</del></p> <p><del><b>How Measure Success?</b> Total job orders placed = Employer job openings listed in DWS' labor exchange system; Total employers served = Employers provided services through DWS' labor exchange system; Total job seekers served = Job seekers provided a service through DWS' labor exchange system.</del></p>	Gov. & Agency	None.
	\$	\$ 5,890,300	<p><del><b>DWS – Job Growth Projects</b> – continue what DWS refers to as 'demand driven employment activities.' Statute sets a 22% collection cost that must be repaid, when funds are used for non-unemployment purposes.</del></p> <p><del><b>How Measure Success?</b> Jobs Created, Placements, Certificate and Degree Graduates</del></p>	Gov. & Agency	None.

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**Moved to Higher Education Appropriations Subcommittee**

3	\$ 2,763,000	\$ 2,763,000	<p><del><b>DWS—UtahFutures Continued Development (FY 2014)</b>— joint agency effort to establish UtahFutures.org as Utah’s career information system for students, job seekers, employment service providers, and educational institutions provided free of charge. This funding would continue development of the website.</del></p> <p><del><b>How Measure Success?</b> Objectives and performance measures include using analytics to measure the effectiveness of the website, dashboard analytics to measure key performance indicators of economic development and education achievement. The impact of such measures will determine if goals are met based on Utah state revenue indicators, including wage and tax revenue information and Utah occupational projections and results.</del></p>	Gov. & Agency	Could we get the other partners in the project to pay of these costs? Potential for partial funding using Reed-Act funds, other partners contribute more.
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**Removed from the list, likely to be addressed by the Executive Appropriations Committee**

	\$ (40,900,000)	\$ (134,583,700)	<p><del><b>DOH—Medicaid Caseload Decrease</b>— Medicaid ended FY 2012 with unexpected unspent balances of \$19.1 million or 5% in unspent General Fund. The surplus is 1.4% due to caseload and 3.6% due to per member per month (PMPM) cost estimates. Additionally this building block includes the following: (1) Estimated increase of 5,900 or 2% clients in FY 2013. A utilization increase of 3% in FY 2013. (2) Additional \$2.5 million in FY 2013 for funding of costs for the run out associated with change to accountable care organizations in January 2013.</del></p> <p><del><b>How Measure Success?</b> Actual Medicaid enrollment and associated per member per month (PMPM) costs, as well as the FY2012 carry forward balance.</del></p>	Gov. & Agency	This one time unspent funding could be used to address one time needs within the department.
	\$ (3,800,000)	\$ (18,069,400)	<p><del><b>DOH—CHIP Caseload Growth Inflation</b>— Actual caseloads and per member per month costs have been lower than originally forecasted.</del></p> <p><del><b>How Measure Success?</b></del></p>	Gov.	