

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
Underlining highlights changes to the original request for appropriation by legislators.						
	\$ (505,600)			Reductions authorized for use by the Social Services Appropriations Subcommittee.		
A	\$ 4,133,300	\$ 13,856,200	\$ 259,972,500	<p>DHS - Additional Needs for Individuals Receiving DSPD Services - Individuals participating in the Medicaid waiver program are entitled to "basic health and safety needs," and needs usually increase over time. This request includes funding for youth with disabilities that have been in the custody of Juvenile Justice Services or Child and Family Services and have aged out of those programs. The request consists of: \$1,854,600 for additional needs; \$891,500 for youth that aged into services in FY 2017, which was funded one-time; and \$1,387,200 for youth that will age into services in FY 2018. The Governor also recommended a (\$300,000) one-time reduction, which the Subcommittee approved. (See consensus reduction green sheet Item 9).</p> <p>How to Measure Success? Percent of respondents to the National Core Indicators Family Guardian Survey that report their family member's 1) residential setting and 2) day or employment setting is healthy and safe.</p>	Gov.	The Legislature could consider changing UCA 62A-5-102(7)(b) so that attrition funds cover federally required increased needs of those currently in services rather than using them to take individuals off of the waiting list who are new to services.
B	\$ 10,800,000	\$ 36,200,000	\$ 2,743,209,900	<p>DOH - Medicaid Caseload, Inflation and Program Changes - The following areas create costs for the state in Medicaid: (1) caseload - estimated increase of 4,200 or 1.3% clients in FY 2018 and tobacco settlement fund shortfalls, (2) inflationary changes - 2% projected increase in accountable care organization contracts starting in January 2017 and 2018, increases in Medicare buy-in costs, and Clawback payments, (3) program changes - end of seeding by Healthy U for its administrative rate and new federal regulation to provide autism spectrum disorder-related services when medically necessary up to age 21. The Governor's budget suggested a funding level of \$8.0 million due to lower cost assumptions for Medicare Part B costs.</p> <p>How to Measure Success? Department of Health has sufficient funding to cover growth and other changes to Medicaid as authorized by the Legislature.</p>	http://le.utah.gov/interim/2016/pdf/00004578.pdf	(1) Rollback all \$2,700,000 ongoing General Fund discretionary provider rate increases that began July 1, 2016. (2) Provider assessments. (3) Have hospital assessment pay proportion of the increase based on current contribution levels.

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
Underlining highlights changes to the original request for appropriation by legislators.						
C	\$ 475,000	\$ 475,000	\$ 3,099,400	<p>DWS USOR - Independent Living Centers Increased Services - "The \$475,000 building block request will be divided, per formula, amongst the six Independent Living Programs." The funding will be used to increase center personnel and ancillary costs (\$225,700), fund transportation (\$27,900), provide additional center support such as interpreters and supplies (\$36,900), and increase funding for the assistive technology loan bank (\$9,500). <u>Chair proposal change the \$300,000 ongoing request to one-time.</u></p> <p>How to Measure Success?</p> <ul style="list-style-type: none"> - Number of consumers served by IL Centers will meet or exceed previous year (target 7,687) - Percentage of consumers served by IL who are new consumers will meet or exceed 20% (target 1,537) - For consumer records closed, the percentage of consumers who achieved all planned goals will meet or exceed 15% (target 364) 	ILCs, Gov.	Estimate an assessed contribution requirement for recipients based upon a sliding fee schedule and reduce the requested amount by that estimate. Apply this fee uniformly statewide (current "donations from individuals" received varies widely from ILC to ILC. Require each center to fund a certain % from private contributions (once again, the figures vary widely from center to center). Move to redistribute state pass thru funds based upon clients served to better match state money with services and thereby reduce demand.
D	\$ 3,300,000	\$ 3,300,000	\$ 19,433,000	<p>DHS - Jail-Based Forensic Competency Restoration - Individuals with mental illness who are in jails and deemed "not competent to proceed" are referred to the Utah State Hospital (USH). The USH operates an in-patient and an outreach program but has a waiting list of 86 individuals. This request is for a 22-bed program that could restore individuals requiring a level of care in between the existing programs.</p> <p>How to Measure Success?</p> <p>1) Reduction in rate of growth of the referral list (target 75%) and 2) percent restored to competency (target 70%).</p>	Gov.	(1) Cover partially with block grant. (2) Utah may be eligible for up \$5.5 million federal funds annually for two years via State Targeted Response to the Opioid Crisis Grants (medically-assisted therapy). DHS states, "Medicaid does not pay for forensic patients."

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
<u>Underlining highlights changes to the original request for appropriation by legislators.</u>						
E	\$ 2,672,800	\$ 2,672,800	\$ 24,415,200	<p>DOH - More Monthly Visits to Developmentally Delayed Infants - The Baby Watch program serves children from birth to age three with at least a moderate developmental delay. Health: "The most recent national survey of Part C providers conducted by the national IDEA Infant & Toddler Coordinator's Association found that the average number of hours of service delivered to children and families is ...4.3 one-hour service visits." The Department of Health believes this funding would increase the FY 2017 funded level of 1.4 visits per month to 1.5 visits. The department indicates that none of the funding would go for state administration and all would go to the fifteen contracted regional service providers. The Governor's budget suggested funding \$1,172,800 of the request with one-time funds. This program received \$1.5 million in one-time funds for FY 2017. Each \$1.2 million increase in funding provides an increase of about 0.1 visits monthly.</p> <p>How to Measure Success? (1) Average number of visits per child per month, (2) The percent of children who demonstrated improvement in social-emotional skills, including social relationships (Goal = 70%), (3) The percent of children who demonstrated improvement in their rate of growth in acquisition and use of knowledge and skills, including early language/ communication and early literacy (Goal=72.5% or more), and (4) the percent of children who demonstrated improvement in their rate of growth in the use of appropriate behaviors to meet their needs (Goal=73.5% or more).</p>	Gov.	(1) Increasing parent contributions that are currently \$350,000 annually and are based on a monthly sliding fee schedule of \$0 to \$200 based on income. (2) Have Utah Schools for the Deaf and Blind help pay for the vision and hearing screenings done by Baby Watch providers. These schools ended FY 2015 with \$2.8 million in unspent funds.

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
<u>Underlining highlights changes to the original request for appropriation by legislators.</u>						
F	\$ 600,000	\$ 600,000	\$ 47,679,900	<p>DWS USOR - Independent Living Assistive Technology Program - Assist individuals with disabilities to live more independently in their homes and communities. "It is anticipated that by the end of state fiscal year 2017, the waiting list will be comprised of approximately 133 consumers needing over 175 pieces of assistive technology equipment."</p> <p>See Ref 18 One Time Tab</p> <p>How to Measure Success?</p> <ul style="list-style-type: none"> - Total number of consumers provided services will exceed previous year (256) - Total number of assistive technology devices will exceed previous year (282) 	ILCs, Gov (\$600,000)	Estimate an assessed contribution requirement for recipients based upon a sliding fee schedule and reduce the requested amount by that estimate. Apply this fee uniformly statewide (current "donations from individuals" received varies widely from ILC to ILC. Require each center to fund a certain % from private contributions (once again, the figures vary widely from center to center). Move to redistribute state pass thru funds based upon clients served to better match state money with services and thereby reduce demand.
G	\$ 111,400	\$ 191,200	\$ 814,200	<p>DHS - Office of Public Guardian FTE and Contract Rate - This request would provide an additional FTE guardian and increase the rate paid to contracted guardians (from \$92.29 to \$135/client/month), to meet increased demand for services and offer a more competitive contract. Thirty additional cases could be managed with this funding increase.</p> <p>How to Measure Success?</p> <p>1) Serve as guardian for an additional 30 individuals (10 on contract) in FY18, 2) increase front end capacity (info and referral, assessments, locating family, etc.) by 20%, and 3) Fund the contract at the rate of \$134.81 per client per month.</p>	Gov.	

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
<u>Underlining highlights changes to the original request for appropriation by legislators.</u>						
H	\$ 250,000	\$ 250,000	\$ 1,570,000	<p>DOH - Drug Overdose Prevention Initiatives - fund public outreach prevention program targeting opioid misuse and death. In 2015 37 Utahans died monthly from accidental/undetermined intent involving opioids. Also pay for manually abstracting unintentional drug overdose death data from the Medical Examiner. Health: "Naloxone is available 'over the counter' only when pharmacies have collaborative practice agreements or standing orders. On December 8th, a statewide standing order was issued by the Utah Department of Health. In one week, 67 pharmacies...voluntarily enrolled to participate in the statewide standing order." Health: "Strategies for proposed on-going funding include: 1) change prescribing behavior and patient expectations, 2) promote public awareness, 3) maintain data collection efforts, 4) expand access to naloxone, and 5) maintain the Utah Coalition for Opioid Overdose Prevention." See http://health.utah.gov/vipp/pdf/RxDrugs/PDODeaths2015.pdf for more information. The Governor's budget suggested funding this with one-time funds.</p> <p>How to Measure Success? (1) Average number of opioid prescriptions per person decreased by 10%. (2) Rate of opioid prescriptions dispensed per 1,000 population decreased by 10%. (3) Percent of opioid prescription dispensed with a daily Morphine Milligram Equivalents (MME) > 90 decreased by 10%. (4) Number of reported naloxone reversals increased by 10%. (5) Rate of drug overdose deaths involving opioids per 100,000 population decreased by 10%.</p>	Gov.	(1) New federal funds coming to Utah of \$1,570,000 annually starting in 2017 through August 2019 (Prescription Drug Overdose Prevention, Drug Monitoring, and Strategic Prevention Framework) (2) Intermountain Healthcare pledged funding of \$1 million for the next year for some outreach and training primarily within its health system (3) DHS is currently providing \$100,000 to purchase naloxone kits from federal substance abuse block grant funds. (4) Utah may be eligible for up to \$5.5 million federal funds annually for two years via State Targeted Response to the Opioid Crisis Grants (medically-assisted therapy).

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
<u>Underlining highlights changes to the original request for appropriation by legislators.</u>						
I	\$ 500,000	\$ 1,676,200	\$ 259,972,500	<p>DHS - DSPD Waiting List Services - The Home and Community Based waiver program serves 5,312 individuals and has a waiting list of 2,510. The requested \$1 million would bring approximately 165 individuals into services. Of new funding for waiting list services, 85% must go to bringing individuals into services and 15% must be used for respite services only. <u>The chairs propose reducing the \$1 million request to \$500,000.</u></p> <p>How to Measure Success? Percent of respondents to the National Core Indicators Family Guardian Survey that report their family member's 1) residential setting and 2) day or employment setting is healthy and safe. Percent of individuals receiving respite services that report 3) decreased stress and 4) increased satisfaction in other areas of life.</p>	Gov.	
J	\$ 108,700	\$ -	\$ 8,700,000	<p>DOH - Replace Tobacco Funds for Drug Abuse Prevention - The \$108,700 was already removed in the base budget due to the end of strategic contribution payments to all states beginning in FY 2018 as part of the nationwide tobacco settlement agreement. The Department of Health uses these funds for "efforts to prevent youth initiation of tobacco use, promote quitting among adults and youth, eliminate exposure to secondhand smoke, and identify and eliminate tobacco-related disparities and associated disease, disability and death." Health: "If the funding is not provided the Department will be unable to fund an additional Disparity-Network, a community based organization who works directly with their community to reduce tobacco-related disparities, as we had planned to do. This would limit the work we can do with the LGBT population in Utah." The amount represents 1.2% of the total tobacco prevention control funding in FY 2017. For more information on the shortfall please see the issue brief available at http://le.utah.gov/interim/2016/pdf/00002655.pdf. A related request for one-time funds is in Item BS.</p> <p>How to Measure Success? By July 1, 2018, TPCP will fund one additional Disparity Network to reduce tobacco use within the LGBT population in Utah.</p>	Gov.	(1) Increase the cigarette tax. (2) Qualifies for funding with the federal Preventive Health and Health Services block grant, but Health says that there are no uncommitted funds available.

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
<u>Underlining highlights changes to the original request for appropriation by legislators.</u>						
K	\$ 6,400,000	\$ 21,933,300	\$ 24,727,400	<p>DHS - Medicaid Match Funds for Local Mental Health Authorities - These funds are used to draw down federal dollars to support the existing system. This amount has been funded one-time since FY 2015. The Governor recommended \$4.4 million be one-time.</p> <p>How to Measure Success? 1) Percent of individuals who received mental health services and either stabilized or improved, 2) percent of individuals who achieved abstinence from alcohol and/or drugs at discharge.</p>	Gov.	Changes could be made to local county taxing authority or reduce the amount of the request by the \$3.5 million the counties were previously paying and have now redirected to other programs.
L	\$ 1,204,200	\$ 1,204,200	\$ 1,121,200	<p>DHS - Replace Tobacco Funds for Drug Court Treatment - DSAMH receives an annual appropriation of \$2,325,400 from the Tobacco Settlement Restricted Account to fund drug court programs but fund collections are forecasted to decline due to the end of strategic contribution payments to all states beginning in FY 2018. For more information on the shortfall please see the issue brief available at http://le.utah.gov/interim/2016/pdf/00002655.pdf.</p> <p>How to Measure Success? 1) Maintaining or increasing the number of clients served.</p>	Gov.	
M	\$ 1,200,000	\$ 4,000,000	\$ 24,461,200	<p>DOH - Maintain Primary Care Network Access - H.B. 437, Health Care Revisions, (2016 General Session) authorized a Utah Medicaid expansion program to start on January 1, 2017. The fiscal note included \$1.2 million ongoing General Fund savings from 4,900 clients who would no longer be served by the Primary Care Network (limited medical benefit package) and would now receive full Medicaid benefits. This funding allows 4,900 new clients to fill those vacated spots in the Primary Care Network.</p> <p>How to Measure Success? Success would be measured by maintaining FY 2016 enrollment targets (under 25,000).</p>	Gov.	

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
<u>Underlining highlights changes to the original request for appropriation by legislators.</u>						
N	\$ 123,000	\$ -	\$ 1,446,700	<p>DHS - Compensation Funding Mix Exception - DHS requests an exception such that funds transferred from Temporary Assistance for Needy Families (TANF) to Social Security Block Grant (SSBG) be treated as General Fund for calculating the proportional distribution of compensation adjustments. The requested amount reflects the additional amount of General Fund needed for a 1% salary increase and other benefit adjustments, compared to the current funding. A related request for one-time funds is in Item AU.</p> <p>How to Measure Success? Success will be measured by increasing all eligible employees salaries with the compensation increases.</p>	Agency	
O	\$ 429,600	\$ 1,400,000	\$ -	<p>DOH - Pay for Adult Preventative Exams - Pay for Medicaid coverage for preventative medical exams of: (1) about 1,200 clients over 65, (2) about 3,000 blind/disabled clients, and (3) about 2,600 non-disabled clients 19-64. Health: "While it is expected that the coverage of preventative services will improve members' health, it is unclear whether or not there will be cost savings."</p> <p>How to Measure Success? Number of adults who receive preventative services and the cost of said services.</p>	Gov.	(1) Medicaid's accountable care organizations, serving about 90% of clients could already do this on their own if they thought it beneficial. (2) If the changes might result in savings, the Legislature could fund the program one-time for one or two years.
P	\$ 18,800	\$ 55,400	\$ -	<p>DHS & DOH - Compensation Increase for DCFS Nurses - DHS contracts with DOH for nursing services for foster children. Although the nurses are state employees, because of the contract arrangement neither agency receives additional funds when other state employees receive a salary and benefits increase. This amount would provide a 1% salary and associated benefits increase. A related request for one-time funds is in Item AV.</p> <p>How to Measure Success? Success will be measured by increasing all eligible employees salaries with the compensation increases.</p>	Agency	

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
<u>Underlining highlights changes to the original request for appropriation by legislators.</u>						
Q	\$ 935,500	\$ 7,162,000	\$ -	DOH & DWS - Provide Family Planning Services to All Individuals Under 100% FPL - Health: "Provide family planning and sterilization services to 10,900 adults at or below 100% of the federal poverty level who are otherwise not eligible for Medicaid." Services covered include intrauterine devices, tubal ligation, vasectomies, and contraceptives. Abortions would not be covered. A related request for one-time funds is in Item AT. How to Measure Success? Number of eligible adults enrolled and the costs of the related services.	Gov.	If the changes might result in savings, the Legislature could fund the program one-time for one or two years.
R	<u>\$ 1,870,000</u>	<u>\$ 6,270,000</u>	\$ 1,037,985,000	DOH - Managed Care Rate Increase - Provide Medicaid accountable care organizations an additional rate increase of 1.5% (3.5% total if fund "Medicaid Caseload, Inflation and Program Changes" Item B). <u>The chairs propose combining this request with the following smaller agency request for \$726,000 General Fund:</u> a 0.6% additional rate increase that matches the fiscal analyst-estimated medical inflation for Utah for FY 2018. For additional information on estimated medical inflation in Utah please visit the brief available at http://le.utah.gov/interim/2016/pdf/00004578.pdf . How to Measure Success? The increase is included in the pool for the Actuarial Rate Setting Process.	Gov. & Christensen	Provider assessments.
S	\$ 16,359,900	\$ 16,359,900	\$ 4,500,000	DHS - Behavioral Health Treatment of JRI population - "To assist those within the Justice Reinvestment Initiative (JRI) population suffering from mental health illnesses and or substance use disorders."	Hutchings	
T	\$ 5,000,000	\$ 16,700,000	\$ 24,727,400	DHS - Medicaid Mental Health Match - "Increase funding of State Match for Optional Outpatient Medicaid Mental Health Services to draw down additional federal dollars for treatment of severe persistent mental illness in the Medicaid eligible population of our state."	Redd	County funds

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
<u>Underlining highlights changes to the original request for appropriation by legislators.</u>						
U	\$ 2,000,000	\$ 6,666,700	\$ 259,972,500	<p>DHS - DSPD Direct Care Staff Salary Increase Phase III - This request would fund the third year of an agency-proposed three-year plan to raise the salaries of contracted direct care staff, with the goal of reducing turnover. DHS received about \$5 million GF in both FY 2016 and FY 2017, and reports that starting salaries have increased from \$8.16/hour to \$10.27/hour as a result; following FY 2016 only, turnover decreased from 86% to 57%. The requested \$5 million is expected to raise starting salaries to \$11.12/hour. The Governor did not recommend this item. <u>The chairs propose reducing the ongoing request from \$5 million to \$2 million.</u></p> <p>How To Measure Success? 1) Staff turnover rates and 2) staff salary rates, as reported by providers and collected by the National Core Indicators Staff Salary Stability Survey.</p>	Ray	
V	\$ 5,000,000	\$ 5,000,000	\$ -	<p>DWS - Utah Intergenerational Poverty Work and Self Sufficiency Tax Credit "Description: An earned income tax credit for qualifying members of the Intergenerational Poverty cohort. Credit will promote work and self-sufficiency for families in intergenerational poverty. Bill (yet to be numbered) allows for transfer from GF to EF to cover revenue decrease."</p>	Westwood	
W	\$ 1,691,100	\$ 5,700,000	\$ -	<p>DOH - Reproductive Health and Medicaid Amendments (HB 57) - "provide family planning services for Medicaid eligible individuals"</p>	King	If the changes might result in savings, the Legislature could fund the program one-time for one or two years.

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
<u>Underlining highlights changes to the original request for appropriation by legislators.</u>						
X	\$ 1,400,000	\$ 5,500,000	\$ -	<p>DOH - Provide Adult Dental Services for the Blind or Disabled - Health: "This request is for on-going funding to expand dental coverage to include some preventive and restorative procedures, including routine exams, X-rays, cleanings, crowns, and full dentures for blind and disabled adults, as described in S.B. 39 from the 2016 General Session." Provide dental services to 34,500 blind or disabled adults already eligible for Medicaid. Salt Lake County dental services shall be provided to the extent possible (about 40%) through the University of Utah School of Dentistry. That school will also pay 40% of the state match or about \$250,000 for Salt Lake County. This program received \$500,000 in one-time funding for FY 2017.</p> <p>How to Measure Success? Number who receive services and the cost of said services.</p>	Gov. & Eliason	(1) Primary Care grants are currently funding at least (and maybe more) \$100,000 of dental services to the 65+ clients on Medicaid (2) Dental provider assessment (about 0.1% tax of gross receipts would generate funding needed). (3) Program likely will only use \$230K in FY 2017, if provide nonlapsing authority can offset \$270K in FY 2018 one-time.
Y	\$ 1,263,300	\$ 4,188,300	\$ -	<p>DOH - Treatment of Post-partum Depression - "HB122 is a bill that requires the Department of Health to apply for an amendment to the current 1115 Waiver to provide mental health coverage for women between 40% FPL and 138% FPL from 60 days postpartum to 12 months postpartum. The intent is to effectively treat post-partum depression. Effective treatment of postpartum depression helps improve first-year maternal-infant bonding and nurturing and reduce the long-term risks and negative effects of childhood trauma, abuse, and neglect. This will result in improved outcomes in maternal and child mental and physical health with long-term reductions in state expenditures for Medicaid, mental health, DCFS services, juvenile and criminal justice expenditures and welfare costs etc. Because this will become part of the current 1115 waiver the FMAP will draw down \$70 of federal funds for every \$30 of state general fund spent." A related request for one-time funds is in Item BN.</p>	Redd	

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
<u>Underlining highlights changes to the original request for appropriation by legislators.</u>						
Z	\$ 1,133,000	\$ 1,133,000	\$ 700,000	DOH - Utah Statewide Immunization Information System Modernization - "Allow the Utah Statewide Immunization Information System to update their programming to be able to receive and manage data from all health care providers. A centralized accurate database will significantly reduce the costs of duplicate and unneeded vaccines."	Thurston	Assess user charges.
AA	\$ 1,049,200	\$ 1,049,200	\$ -	DHS - HB 131 - Child Placement Revisions - "The funds will pay for legal expenses incurred by DCFS for hearings where an adoption placement decision is contested." A related request for one-time funds is in Item BP.	Christofferson	
AB	\$ 1,000,000	\$ 1,000,000	\$ 2,137,500	DOH - Local Health Department Funding for Statewide Performance Measures - "Provide funding for local health departments to implement statewide performance measures. Also verifying compliance of local health departments by external committee every three years. improve local health department ability to meet statewide performance measures"	Ray	
AC	\$ 1,000,000	\$ 1,767,800	\$ 22,950,700	DHS - Foster Families of Utah - "Proposed Reimbursement Increase - An appropriation of \$1,000,000 for state licensed foster parents. It will provide a 20% increase to foster parents that will directly impact foster children in the state of Utah."	Weiler	Transfer kids in proctor care to Level III foster care, which should save about \$1 million GF. DHS states that TANF and Federal IV-E funding cannot be used.
AD	\$ 939,000	\$ 939,000	\$ 30,000	DHS - Domestic Violence Local Shelters - The Domestic Violence Coalition requests additional funding for local non-profit domestic violence shelters to meet demand for shelter and supportive services. In the 2016 G.S., the coalition received \$108,000 each year for three years for Lethality Assessment Protocol (LAP) training for law enforcement officers and \$787,000 one-time for domestic violence shelters, both from Temporary Assistance for Needy Families (TANF) funds.	Christensen	Previously funded with TANF

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
<u>Underlining highlights changes to the original request for appropriation by legislators.</u>						
AE	\$ 800,000	\$ 2,700,000	\$ -	DOH - 12 Month Eligibility for Children on Medicaid - "Request for Medicaid to change its eligibility policies for children ages 0-18, so that if a child is found eligible, that eligibility will continue for a year. In our current system, children frequently lose their Medicaid coverage part of the way through the year. At times this is simply due to the Red Tape of their parents not keeping up with the required documentation during the year. As a result, Utah has one of the lower rates of Children who actually have health coverage. This would make sure that more children get the basic services that Medicaid provides."	Ward	
AF	\$ 750,000	\$ 750,000	\$ 3,100,000	DOH - Primary Care Grants - "Offer grants, on competitive basis, to clinics & groups to expand primary care. Expand primary health care."	Christensen	
AG	\$ 663,800	\$ 2,232,100	\$ 84,856,900	DOH - Direct Care Staff Salary Increase in Intermediate Care Facilities - State funding would increase the average wage of direct care staff workers in 16 intermediate care facilities for individuals with intellectual disabilities from \$1.10 to \$2.30 per hour based on FY 2016's increase. The Legislature funded with \$200,000 General Fund and a voluntary 86% match from providers an average hourly wage increase of \$0.60 to \$1.30 per hour in FY 2016. The turnover rates decreased or remained the same for 10 facilities and increased for 5 facilities in the first year of the increase. Starting wages went from \$8.99 to \$9.63. 95% of the voluntary match came from six providers. For the prior increase the Department defined the following as direct care staff: (1) nursing directors, (2) nursing staff, (3) recreation personnel, and (4) active treatment providers. For more information please see http://le.utah.gov/interim/2015/pdf/00004116.pdf . How to Measure Success? Increased rates.	Ray	Authorize an increase in the existing provider assessment for these facility types. Health: "Based upon the most recently audited facility cost reports, there is [\$357,000] available under the 6% max assessment cap."

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
<u>Underlining highlights changes to the original request for appropriation by legislators.</u>						
AH	\$ 650,000	\$ 650,000	\$ -	<p>DHS - United Way 2-1-1 Information and Referral System - "2-1-1 provides information and referral services to Utahns in need of accessing health and human services and volunteer opportunities. Also a number to connect people to resources during times of disaster." United Way of Salt Lake indicates that the request supports: 1) 24/7 referral to resources, 2) a statewide database and software, 3) disaster preparedness preparation, 4) statewide outreach, and 5) data analysis. The Governor recommended one-time funding.</p> <p>How to Measure Success? Wider access will be measured annually by pulling reports from: 1) number of calls received, chats conducted, and emails answered, 2) number of website hits and bounce rates, 3) online database searches conducted and referral reports generated, 4) follow up surveys with callers with the goal to have 90% accuracy in referrals made, 5) 100% resources in the database will be updated annually, 6) ongoing quality monitoring with the goal to have the average scores be above 85%, 7) quality assurance surveys with the goal for 95% of callers to indicate a positive experience, and other additional measures.</p>	Weiler	Fund internally through re-prioritizing of United Way private donations or apply for Emergency Food Network funds (2-1-1 received \$20,000 in 2013).
AI	\$ 600,000	\$ 600,000	\$ 490,000	<p>DHS - Non-Foster Care Kinship Support - Grandfamilies - This request supports the Children's Service Society of Utah and would continue and expand the organization's education and outreach services for grandparent-headed families in Salt Lake, Weber, Davis, and Cache Counties. The Governor recommended \$200,000 one-time.</p> <p>How to Measure Success? (1) Continuation of the Grandfamilies program at the same service levels as currently funded.</p>	Christensen	Private grants and donations
AK	\$ 500,000	\$ 500,000	\$ 4,279,600	<p>DWS - Division of Blind and Visually Impaired - "Restore funds taken in economic downturn. Restore funding for Division of blind and visually impaired after the budget cuts form the most recent down turn."</p>	Buxton	Fees

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
<u>Underlining highlights changes to the original request for appropriation by legislators.</u>						
AL	\$ 361,400	\$ 361,400	\$ 972,300	DHS - Fiscal Intermediary Rate Adjustment - "Funding to bring fiscal intermediary rates into line with national averages."	Thurston	
AM	\$ 278,000	\$ 278,000	\$ -	DHS - Crisis Intervention Team Training - "Crisis Intervention Team training provides training on mental health and de-escalation techniques for law enforcement officers. It also develops partnerships with law enforcement, mental health and community providers to assist people living with mental illness to get the treatment they need. Utah recognizes the Crisis Intervention Team Program training as the model of best practice for law enforcement intervention with persons who have a mental illness. The program encourages law enforcement agencies and community mental health centers to work together in conjunction with other community partners to have a cadre of certified Crisis Intervention Team-trained officers in all jurisdictions and to develop and maintain active crisis intervention team programs regionally throughout the state."	Edwards	
AN	\$ 250,000	\$ 838,100	\$ 259,972,500	DHS - Disability Waiting List - "Continue to allocate funds to disability waiting list." This request has the same purpose as Item I.	Eliason	
AO	\$ 233,700	\$ 233,700	\$ -	DWS - Out-of-Wedlock Pregnancy Prevention "Description: Since 2014, Fathers and Families Coalition of Utah has served over 500 low income teens (14-18 yrs). The Young Parent Prevention Program provides healthy relationships, job skills, and increased earning income through employment and college. Purpose: The Young Parent Prevention Program will work with students to help expand their long-term employment opportunities, increasing tax revenue, income, and economic independence."	Winder	Private grants and donations.

Ref. #	Ongoing	Total Funds	Base Funding/Fund Balance	Building Block Prioritized List ¹ Ongoing State Funds - Chair Proposal	Source	Alternative Funding Sources?
<u>Underlining highlights changes to the original request for appropriation by legislators.</u>						
AP	\$ 150,000	\$ 502,800	\$ 5,437,000	DHS - DSPD Motor Transportation Payment - "MTP is a payment made through DHS to private and public transportation providers who provide transportation services for people with severe intellectual and physical disabilities. Current MTP contract rate is \$10.41 per round trip per person. Actual costs may be as high as \$27.00 per round trip. Current providers are providing transportation by cost shifting expenses for transportation to other areas in their operating budgets, or deciding to stop providing the service. This is not an optional service for individuals with disabilities who are being provided services through DSPD."	Redd	
AQ	\$ 50,000	\$ 100,000	\$ -	DOH - Utah Anti-Bullying Coalition - "Leverage matching private funds to double the number of anti-bullying programs the UABC can perform in Utah schools during the 2017-2018 school year." A related request for one-time funds is in Item BG.	Ray	
BR	\$ 800,000	\$ 800,000	\$ -	DWS - Utah Data Research Center - "Established a research center for the date in the Utah Data Alliance. FTE - Director, 3 - Researcher, 1-Admin."	Anderegg	
43	\$ 78,549,100	\$ 177,796,300		Total		
		\$ 86,711,300		Total State Funds Requested (Ongoing and One-time)		
(1) DHS = Department of Human Services, DOH = Department of Health, DWS = Department of Workforce Services, DCFS = DHS Division of Child and Family Services, DSPD = DHS Division of Services for People with Disabilities, DSAMH = DHS Division of Substance Abuse and Mental Health						