

Ref#	Ongoing State Funds	One-time State Funds	Total Funds <sup>1</sup>	Base Funding/ Fund Balance(2)	Budget Reduction Options <sup>3</sup> - <u>Chair Proposal</u>	Requires Other Changes?
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	<u>\$ (2,052,600)</u>	<u>\$ (1,112,600)</u>	<u>\$ (8,119,800)</u>		<b>Consensus Funding Reduction Items</b>	<u>No</u>
8	<del>\$(24,000)</del>	<del>\$</del>	<del>\$(47,900)</del>	\$134,700	<b>DOH - Reduction in Attorney General Charges</b> - Beginning in FY 2020, the Department of Health will be charged \$47,900 total funds less by the Attorney General based on FY 2018 utilization of legal services. The department anticipates FY 2020 utilization costs to be higher based on FY 2019 utilization.	No
9	\$ (50,000)	\$ -	\$ (50,000)	\$ 50,000	<b>DOH - Maliheh Free Clinic</b> - The Maliheh Free Clinic received direct ongoing funding from the State of \$50,000 General Fund beginning in FY 2018. There is already a competitive state grant program for these types of clinics serving the underinsured to apply for. The \$50,000 represents 1.5% of the Maliheh Free Clinic's \$3.24 million in 2017 revenues.	No
10	<del>\$(55,000)</del>	<del>\$</del>	<del>\$(55,000)</del>	<del>\$ 55,000</del>	<b>DOH - Dental Lifeline Network</b> - The Dental Lifeline Network received direct ongoing funding from the State of \$55,000 General Fund beginning in FY 2019. There is already a competitive state grant program for these types of service providers to apply for. The \$55,000 represents 0.2% of the Dental Lifeline Network's estimated \$25 million in 2017-2018 revenues and support.	No
11	<del>\$(450,000)</del>	<del>\$(110,000)</del>	<del>\$(1,050,000)</del>	<del>\$ 4,220,000</del>	<b>DOH - Reduce Operating Deficit in State-run Medical and Dental Clinics</b> - Between FY 2015 and FY 2018 the state-run three medical and three dental clinics have run an average combined operating deficit of (\$2.5) million total funds. This reduction assumes that the Department of Health could reduce all of the operating deficit or close the clinics and have the clients receive services elsewhere. For example, the medical clinics, helped managed some of the 1,000 clients on the restricted program (one provider and one pharmacy for a client with potential to misuse services), but only received \$120 per month per accountable care organization client served. Since FY 2015 through FY 2018 the only year and clinic to not have an operating deficit was the mobile dental clinic in FY 2017. This reduction assumes that with the 43% projected enrollment increase of new clients for Medicaid expansion, the operating deficit will be reduced by 43% beginning April 1, 2019.	No
12	<del>\$(510,000)</del>	<del>\$(130,000)</del>	<del>\$(510,000)</del>	<del>\$ 1,873,500</del>	<b>DOH - Medicaid Expansion Savings for Primary Care Grants</b> - full Medicaid expansion starting on April 1, 2019 may reduce the number of uninsured in Utah by 27% from 148,400 newly eligible or currently eligible clients signing up for services vs a current estimate of uninsured individuals of 316,300. This assumes that the State could reduce primary care grants to medical and dental clinics serving underinsured individuals by 27% starting on April 1, 2019.	No
13	<del>\$(17,000)</del>	<del>\$(4,000)</del>	<del>\$(17,000)</del>	<del>\$ 137,300</del>	<b>DOH - Medicaid Expansion Savings for Bleeding Disorders</b> - full Medicaid expansion starting on April 1, 2019 provides full medical coverage to all individuals with incomes up to 138% of the federal poverty level. At least 4 of 32 current clients receiving assistance for bleeding disorders have incomes that would qualify them for Medicaid. This assumes that the State could move these 4 clients to Medicaid starting on April 1, 2019.	No

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14	\$ (17,000)	\$ -	\$ -	\$ 780,000	<b>DOH - Medicaid Funds for Utah Statewide Immunization Information System (USIIS)</b> -- "There is CMS guidance that would allow the state to draw down admin match at 50% to cover a proportionate share of USIIS. We would likely use the number of Medicaid eligibles compared with total population in the state. We are using a similar method with the mental health crisis lines. HITECH funds can be used to design, program and implement. However they are scheduled to expire in 2021." "As the HITECH program is scheduled to expire in a short amount of time and previous CDC grants were used for similar activities as the HITECH funding, exploration of such funding will require further study. However, Medicaid admin match is something that we will explore further as an ongoing source of funding. Medicaid eligible compared with total population in the state is relatively low, and USIIS would be required to provide the state match for any Medicaid funding drawn, so it is not likely that this amount would be a very large source of funding, despite being a good option to explore." In 2011 Medicaid provided a \$69,200 in total funding at a General Fund cost of \$34,600. This reduction assumes that the program could get that same amount and reduce General Fund 1:1 for the increased federal funds received and allows the department to keep 50% of the projected increase.	No
15	\$ (315,400)	\$ (80,500)	\$ -	\$ 460,000	<b>DOH - End of Payments to Special Unit at State Hospital</b> - The Department of Health previously paid \$460,000 General Fund to the Utah State Hospital for a special unit to provide inpatient hospital services for residents of five rural counties. As of April 2018 this unit has been closed and these clients are now receiving mental health inpatient hospital services that are Medicaid eligible. The Department of Health can continue to provide \$460,000 of total funds assistance beginning April 1, 2019, but draw down federal funds to reduce the General Fund spend.	No
16	\$ (30,000)	\$ -	\$ (30,000)	\$ 13,802,900	<b>DHS - Reduce Unused General Fund for Local Aging Services</b> -- Local Area Agencies on Aging have expended less General Fund than expected in most years since FY 2014, leading the Division of Aging and Adult Services to carry forward a balance each year. This reduction would reduce the accumulation of the balance year-to-year.	No
17	\$ (61,000)	\$ -	\$ (69,000)	\$ 6,018,100	<b>DHS - Recover Costs from Building Lease Ending</b> - Child and Family Services plans to vacate a leased building in Orem by the end of June 2019 and move into a less expensive state-owned building. The division reports that any savings should be directed toward standardized lease rate increases and moving expenses.	No
18	\$ -	\$ (25,000)	\$ (25,000)	\$ 25,000	<b>DHS - Recover Unused Funds for A Crisis Nursery Needs Assessment</b> -- The Legislature appropriated \$25,000 in FY 2017 for a study of whether a crisis nursery was needed and could be built in the Rose Park/Glendale area. The Division of Child and Family Services awarded a contract to the Family Support Center in January 2017, but the center has not yet requested reimbursement.	No
19	\$ -	\$ (15,000)	\$ (15,000)	\$ 100,000	<b>DHS - Recover Unused Suicide Prevention Grant Funds</b> -- H.B. 346, "Suicide Prevention Programs" (2017 G.S.) provided \$100,000 ongoing for grants beginning in FY 2018. Only \$85,000 was disbursed in FY 2018. The remaining \$15,000 would have been carried forward into FY 2019 in the division's nonlapsing balance.	No

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20	<del>\$(1,255,600)</del>	<del>\$(313,900)</del>	<del>\$(1,255,600)</del>	<del>\$4,650,400</del>	<b>DHS - Reduce Drug Court Treatment Funding</b> - Medicaid expansion reduced the need for separate behavioral health treatment funding for Drug Courts. Individuals with incomes <138% FPL would be eligible and their treatment costs would be paid by Medicaid. An estimated 27% of uninsured individuals would be covered by Medicaid; this reduction is 27% of Drug Courts funding that comes from or passes through the State. The one-time amount is for savings in FY 2019 after Medicaid expansion takes effect April 1, 2019.	No
21	<del>\$(741,700)</del>	<del>\$(185,400)</del>	<del>\$(741,700)</del>	<del>\$2,747,100</del>	<b>DHS - Reduce Drug Offender Reform Act (DORA) Treatment Funding</b> - Medicaid expansion reduced the need for separate behavioral health treatment funding for DORA. Individuals with incomes <138% FPL would be eligible and their treatment costs would be paid by Medicaid. An estimated 27% of uninsured individuals would be covered by Medicaid; this reduction is 27% of DORA funding. The one-time amount is for savings in FY 2019 after Medicaid expansion takes effect April 1, 2019.	No
22	<del>\$</del>	<del>\$(75,900)</del>	<del>\$(75,900)</del>	<del>\$1,125,000</del>	<b>DHS - Recover One-Time Funding for Medication Assisted Treatment for the Uninsured</b> - Medicaid expansion reduced the need for separate substance use disorder treatment medication funding for criminal justice-involved individuals. All major medications are covered by Medicaid. Individuals with incomes <138% FPL would be eligible and their treatment costs would be paid by Medicaid. An estimated 27% of uninsured individuals would be covered by Medicaid; this reduction is 27% of the \$1 million one-time for Salt Lake and Davis Counties and \$125,000 one-time for Carbon County appropriated in FY 2019, for the portion of FY 2019 after Medicaid expansion takes effect April 1, 2019.	No
23	<u>\$(77,200)</u>	<u>\$(124,200)</u>	<u>\$(154,300)</u>	<u>\$154,300</u>	<b>DHS - Recover State Hospital Funds for Closed Unit</b> - The Acute Recovery Treatment Center (ARTC) unit provided acute inpatient treatment for individuals from certain rural Local Mental Health Authorities. It closed April 5, 2018. In FY 2017, the unit was funded with \$460,000 from DOH and \$154,300 from the State Hospital. The \$154,300 is no longer needed, one-time in FY 2019 and ongoing in FY 2020. In FY 2018, the State Hospital did not spend \$94,000 of the allocation from Health, which would have been carried forward into FY 2019 in the division's nonlapsing balance. <u>The chairs propose taking one half of the original proposed reduction amount.</u>	No
24	<del>\$(500,000)</del>	<del>\$(500,000)</del>	<del>\$(500,000)</del>	<del>\$1,600,000</del>	<b>DHS - Use Increased Medicare Collections</b> - Starting in FY 2018, the Utah State Hospital was authorized to bill Medicare for eligible individuals who are served in the forensic unit, with increased estimated collections of \$1.1 million in FY 2019 and \$879,000 in FY 2020. With this new revenue, General Fund could be reduced while leaving some new revenue for safety upgrades required by federal regulation.	No
25	<del>\$</del>	<u>\$(1,250,000)</u>	<u>\$(1,250,000)</u>	<u>\$4,582,900</u>	<b>DHS - Recover Nonlapsing Balance from Disability Services</b> - The Division of Services for People with Disabilities (DSPD) carried over \$4.5 million from FY 2018 to FY 2019. DSPD reports a higher rate of spending in FY 2019 than FY 2018, but anticipates that the full balance will not be spent in FY 2019. <u>The chairs propose taking one half of the original proposed reduction amount.</u>	No

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26	<del>\$(200,000)</del>	<del>\$</del>	<del>\$(200,000)</del>	<del>\$ 2,515,300</del>	<b>DHS – Capture Savings from Consolidation of Contract Monitoring</b> – Human Services consolidated contract monitoring functions from four divisions into one office. The department transferred \$2 million in FY 2019. This reduction assumes an efficiency savings from consolidation of 10 percent.	No
27	<del>\$(178,800)</del>	<del>\$</del>	<del>\$(178,800)</del>	<del>\$ 3,079,300</del>	<b>DHS – Use Increased Child Support Collections Processing Fee</b> – Beginning in FY 2017, the Legislature increased the processing fee for child support collections to "6 percent of payment disbursed up to a maximum of \$12 per month." The Office of Recovery Services collected more in dedicated credits than expected and lapsed \$178,800 General Fund in FY 2018 as a result. This reduction is ongoing in FY 2020. The office plans to use FY 2019 funds for technology upgrades.	No
28	<u>\$(101,300)</u>	\$ -	\$ -	\$ 202,600	<b>DWS - Fund Office of Child Care with federal grant funds-</b> the Office of Child Care receives \$202,600 General Fund each year. Its programs, including early childhood teacher training, intergenerational poverty school readiness scholarships, and student access to high quality school readiness grants, match the expenditure categories for the Child Care and Development Fund federal grants, through which DWS receives approximately \$70-\$80 million per year. This grant funding could replace General Fund spending. This funding is currently being claimed as matching funds to draw down federal Child Care and Development Fund dollars, but third-party expenditures can be claimed as matching funds instead. <u>The chairs propose taking one half of the original proposed reduction amount.</u>	No
29	<del>\$</del>	<del>\$(2,373,200)</del>	<del>\$(2,373,200)</del>	<del>\$ 3,190,000</del>	<b>DWS – Redirect Special Administrative Expense Account Balances to Higher Priority Needs</b> – DWS estimates Special Administrative Expense Account (Fund 1281) realistic collections (available for use) at \$3.19 million for FY 2020. Twenty five percent of these funds, or \$812,500, will go towards collection costs associated with collecting the debts on this fund, leaving \$2,373,200 available for legislatively determined purposes. DWS has requested approval to spend FY 2020 funds on the following programs, which have been approved by the Governor's Office: Accelerated Credentialing to Employment (ACE) for Veterans (\$400,000), Successful Transition Requires Independence, Vocation & Education (STRIVE) Program Employment Skills Program for Blind Youth (\$75,000), and Talent Ready Utah (pathways programs, educational and industrial partnerships, work-based learning opportunities) (\$1,635,000), plus \$263,200 in administrative costs. Annual caseloads for job seekers served has declined 50% over the past five years, from 305,181 in FY14 to 151,164 in FY18, indicating a lower demand for job-related services.	No
30	<del>\$(286,200)</del>	<del>\$</del>	<del>\$(286,200)</del>	<del>\$ 286,200</del>	<b>DWS – Eliminate Emergency Food Network</b> – This program provides funding through a competitive grant process to help in one-time funding purposes to increase the access, availability, and distribution of food resources to low income individuals. Grant amounts in FY19 ranged from \$3K to \$50K, with an average grant award of \$19K. Grant awards in these amounts could potentially be funded by the local government or private donations. Grantees in FY 2019 include the Box Elder Community Pantry, Cache Community Food Pantry, Catholic Community Services of Utah, Central Utah Food Sharing, Christian Center of Park City, Family Connection Center, Friends of Switchpoint, Friends of the Coalition, Jewish Family Service, Sanpete Pantry, and St. Anne's Center (Lantern House).	No

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31	<del>\$(915,000)</del>	<del>\$</del>	<del>\$(915,000)</del>	<del>\$ 915,000</del>	<b>DWS - Eliminate Qualified Emergency Food Agencies Fund</b> -This Fund receives money from a designated sales tax (roughly \$900,000 annually) and is allocated to qualified emergency food agencies for the purchase of food for distribution to individuals. The fund is permitted to spend whatever is brought into the fund, without any additional legislative action. Prior to legislative action during G.S. 17, this fund had consistently spent less than its ongoing General Fund appropriation of \$915,000 (between FY 2011 and FY 2017, the fund spent approximately \$820,000 annually, on average). SB 224 (GS 17) altered statute language calculating how benefits were distributed. This allowed DWS to allocate more and reverse the backlog of accumulated funds. However, decreased state assistance over a prolonged period of time did not appear to do significant harm to the food agencies.	Yes - UCA 35A-8-1009
32	<del>\$(100,000)</del>	<del>\$</del>	<del>\$(100,000)</del>	<del>\$ 100,000</del>	<b>DWS - Reduce INN Between funding due to Medicaid expansion</b> -The INN Between currently receives \$100,000 per year in ongoing General Fund to provide nursing facility services to homeless individuals. Medicaid expansion may result in increased reimbursement for services to the INN Between, thus decreasing the need for state funding.	No
25	<u>\$ (7,937,800)</u>	<u>\$ (6,299,700)</u>	<u>\$ (18,019,400)</u>		<b>Grand Total - Budget Reduction Options</b>	
		<u>-1.4%</u>	<u>\$ (14,237,500)</u>	<u>\$ 1,013,957,400</u>	<b>Grand Total - State Funds (Ongoing and One-time)</b>	
6	<u>\$ (2,657,500)</u>	<u>\$ (2,567,300)</u>	<u>\$ (5,224,800)</u>	<u>-0.5%</u>	<b>Proposed Reductions - General Fund</b>	
<b>(1) If there are numbers in both the Ongoing and One-Time State Funds columns, Total Funds represents ongoing funds.</b>						
<b>(2) The Base Funding/Fund Balance refers to ongoing FY 2020 funding or the full one-time allocation or balance from all sources for this program or purpose.</b>						
<b>(3) DOH = Department of Health, DHS = Department of Human Services, DWS = Department of Workforce Services</b>						
<b>Please visit <a href="https://le.utah.gov/lfa/cobi/cobi.html?cobiID=5&amp;tab=issuesTab&amp;year=2019">https://le.utah.gov/lfa/cobi/cobi.html?cobiID=5&amp;tab=issuesTab&amp;year=2019</a> for updated descriptions of reduction options.</b>						