

Program - Program Description (What Does it do? Who Does it Benefit?)	Mandate Status - Mandate Citation	FY 2020 State Funds ¹	FY 2020 Total Funds	Staff Recommendations, Adopted by Subcommittee in June or August	Staff Recommendations, To Be Considered by Subcommittee in October	Agency Position?
Executive Director's Operations Line Item Total		\$ 9,891,500	\$17,559,900	4	4	
Executive Director Program Total		\$ 1,946,400	\$ 4,046,600	We recommend that the Department of Health review programs not currently contributing to indirect costs that are primarily funded from sources that are not General Fund nor federal funds and have total program funds over \$100,000 and report on what the funding impact and amount would be if those programs paid indirect costs by October 1, 2019. (See full report at https://le.utah.gov/interim/2019/pdf/00004197.pdf .)	We recommend that all programs in the Department of Health share in at least some of the department-wide indirect costs. We recommend that \$16,600 of current ongoing General Fund for indirect costs be replaced with 1% of the full potential indirect cost charges identified by the Department of Health for programs currently not paying any indirect costs.	Support - We feel this is a reasonable amount to charge that does not have a significant impact on public health programs.
Executive Director - DOH Executive Directors Office provides overall management and direction for DOH. Lead health liaison between government and other, non-government health agencies. 2 FTE - Executive Director and admin support.	State Statute Mandated - 26-1-8 thru 17	\$ 263,600	\$ 539,000			
Deputy Director - DOH Deputy Directors Office provides overall management and direction and serves as Chief Medical Officer. Also funds the legislative liaison position. 3 FTE - Deputy Director, Legislative Liaison, and admin support.	State Statute Mandated - 26-1-9	\$ 283,700	\$ 586,200			
Office Of Public Health Assessment - Funds the management of the IBIS-Indicator Base Information System. A comprehensive data base of health data available on line for all health professionals, policy makers, academics and the general public.	Not directly mandated but responsible for mandate - 26-3-4	\$ 127,900	\$ 233,300			
Organizational Development & Performance Improvement - Oversees continuous quality improvement projects within the department and accreditation maintenance. Also responsible to guide efforts to establish Department strategic priorities. 2 FTE	Not Mandated - None	\$ 140,100	\$ 289,600			
Gaining Ground Grant - Grant from the National Network of Public Health Institutes to promote understanding and value of the national public health standards and measures, to provide learning opportunities to advance community health assessments, community health improvement plans, strategic plans and accreditation readiness.	Not Mandated - None	\$ -	\$ -			

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Legal Counsel - Attorney General staff and supporting costs to provide legal assistance, litigate claims, write rules, review contractual agreements etc. are charged here. The Department currently has 5 full-time AG's assigned to us. One AG is designated to Medicaid, so Medicaid shares total costs with EDO.	State Statute Mandated - 67-5-1	\$ 404,200	\$ 835,300			
Wellness Council - The Wellness Council strives to improve the environment, culture, and policies which support the emotional, physical, financial, social, spiritual, environmental, and intellectual health of UDOH employees.	Not Mandated - None	\$ 2,000	\$ 2,000			
Local Health Services - Partial funding support for the Director of Utah Local Health Association which partners with DOH for Local Health Services.	Not Mandated - None	\$ 19,400	\$ 40,000			
Human Resource Management - Department of Human Resource Management staff and supporting costs to provide HR support are charged here. The Department currently has 5 full-time DHRM representatives assigned to us.	State Statute Mandated - 67-19-5	\$ 371,800	\$ 747,800			
Security Office - The Office of Health Data Security develops and implements data security and privacy policies within the Utah Department of Health. It also provides training on data security and privacy management to DOH staff. These roles and responsibilities exceed the support offered by DTS, but are necessary because of the sensitive data handled by the department. 3 FTE.	Federally Mandated - (26-1-13), HIPAA	\$ 200,300	\$ 402,000	Performance Measure Change: Information Systems Reviewed for Risks - By changing the time frame, such as systems will be reviewed for risks and mitigations planned within 24 months of review, the target could be reset to 100%.		
Public Information - This team provides public information and communication service for all DOH health programs. Staff direct charge some of their time to individual programs as allowed by those programs (in compliance with federal regulations, etc.) This unit is budgeted for approximately 2.25 FTE.	Not Mandated - (26-1-13)	\$ 133,400	\$ 371,400			
Center for Health Data (CHD) and Informatics Program Total		\$ 4,549,400	\$ 6,352,400			

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<p>Health Care Statistics - Funds the general activities of the Office of Health Care Statistics in collecting, analyzing and distributing health system data under the direction of the Health Data Committee. The Office produces reports that transform health system data into objective baseline trend and performance measurement information and then makes this information available to the Health Data Committee, healthcare providers, policy makers, the academic community and the public through printed and Web-based media.</p>	<p>State Statute Mandated - 26-33a</p>	<p>\$ 692,600</p>	<p>\$ 841,000</p>		<p>(1) We recommend that the Department of Health study the pros and cons of outsourcing the office of health care statistics including cost implications and report its findings to the Social Services Appropriations Subcommittee by May 1, 2020. (2) We recommend that the Department of Health investigate the possibility of receiving a higher federal match for some Health Care Statistics Program functions and report on its feasibility to the Social Services Appropriations Subcommittee by May 1, 2020.</p>	<p>Support - (1) We have no objection to looking at this. We already outsource many of our functions, and can explore outsourcing the rest. (2) We will explore potential to increase the matching funds.</p>
<p>Center For Health Data And Informatics - General Admin for the director's office of the Center for Health Data and Informatics, general management and direction</p>	<p>Not directly mandated but responsible for mandate - 26-9f</p>	<p>\$ 10,000</p>	<p>\$ 39,300</p>		<p>We recommend that the Department of Health pursue getting ongoing Medicaid funding for some of the costs in Public Health Informatics Program and report its findings to the Social Services Appropriations Subcommittee by May 1, 2020.</p>	<p>Support - We will work with Medicaid to explore other options related to Medicaid funding</p>
<p>Master Person Index Advanced Planning Document - Funds the Informatics Program in the Center for Health Data and Informatics, including the Master Person Index project (dohMPI). dohMPI provides a mechanism for UDOH to manage multiple data streams, while maintaining confidentiality of health information and supporting the mission of public health to identify patterns of illness, apply effective interventions, and conduct program evaluation. For example, dohMPI is integral to the Early Childhood Integrated Data Systems (ECIDS) project that is an integrated, data-driven approach to better coordinate policy, programming, and funding among early childhood programs. The ThSisU initiative will extend the use dohMPI to external master person indexes, such as Utah's Health Information exchange (HIE), to help effectively enhance care coordination. For example, ThSisU will help link Controlled Substance Database (CSD) patients to the HIE to allow providers to easily access a patient's controlled substance prescription within their current workflow.</p>	<p>Not directly mandated but responsible for mandate - 26-1-30 (30) and 26-1-37</p>	<p>\$ 99,600</p>	<p>\$ 400,500</p>			

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All Payer Database - Funds the All Payer Claims Database (APCD), which contains pharmacy and medical claims data from years 2011- mid-2013, and includes information about medical procedures, diagnoses, and prescription drugs. Data from the APCD is made available to qualified users for authorized purposes. This program has provided valuable information to researchers, health plans, health systems and others to help guide decisions about benefit design, cost control, seeking value care, improving medical care and many other uses.	State Statute Mandated - 26-33a	\$ 735,500	\$ 857,700			
Total Cost Of Care - The Network for Regional Healthcare Improvement sponsored a nation-wide collaborative to develop a standard method for comparing total cost of care on a consistent basis. (See https://www.nrhi.org/work/multi-region-innovation-pilots/tcoc/)	Not Mandated - None	\$ -	\$ -			
Cycle III Grant - The Cycle III grant provides funding to support health insurance rate reviews and increase transparency in health care.	Grant mandate - None	\$ -	\$ -			
Cycle IV Grant - The Cycle IV grant provides funding to support health insurance rate reviews and increase transparency in health care.	Grant mandate - None	\$ -	\$ -			
Informatics Program - Funds the storage, cleansing, and deduplication of UDOH's copy of the Controlled Substance Database (CSD) to create analytic data files which are used for public health surveillance purposes. This program also funds the enhancement of DOPL's CSD such as the development of the patient and prescriber dashboard and improvement of the data quality.	None - None	\$ -	\$ 296,300			
CHD Vital Records - Funds the Office of Vital Records and Statistics in maintaining the statewide vital records system required by Utah Statute which entails collection, preservation, tabulation of records for all births, deaths, marriages, and divorces.	State Statute Mandated - 26-2-(1-28)	\$ 2,156,600	\$ 2,256,100	Performance Measure Change: Deaths registered certified using the electronic death registration system - By changing the tracked measure to match SUCCESS this would streamline this reporting requirement.	We recommend that the Department of Health report on the proposed revenue impact to the state and individual local health departments of changing to sharing the revenue for all birth certificates to the Social Services Appropriations Subcommittee by December 1, 2019.	Support - We will report on the proposed revenue impact by December 2019.
CHD VSCP - Funding for the Vital Statistics Cooperative Program (VSCP) in which states send vital statistics to the National Center for Health Statistics for use in producing national vital statistics base on data from the nation's birth, death, fetal death, marriage and divorce records.	Federally Mandated - 42 U.S.C. 242k, Section 306(h) of the Public Health Service Act	\$ 607,300	\$ 607,300			

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BRFSS STATE - State funding for the collection of health and risk factor information impacting the health of Utah's citizens through the Behavioral Risk Factor Surveillance System (BRFSS) and other health surveys.	Grant mandate - all states participate - None	\$ 107,000	\$ 157,200			
OPHA STATE - Funding from federal funds that come through the environmental public health tracking program at CDC; helps to support the development and maintenance of the Indicator Based Information System (IBIS).	Not directly mandated but responsible for mandate - 26-3-4	\$ 137,800	\$ 225,900			
BRFSS PHBG - Money from the CDC Prevention Block Grant funding through the Bureau of Health Promotion helps to support both IBIS and BRFSS.	Not directly mandated but responsible for mandate - 26-3-4	\$ -	\$ 50,000			
Behavioral Risk Survey Fed - Behavioral Risk Factor Surveillance System (BRFSS) federal grant from CDC that supports survey center functions and the BRFSS program.	Grant mandate - all states participate - None	\$ -	\$ 360,600			
Survey Center - Funding received by providing additional "state-added" questions to the BRFSS survey and by conducting other ad-hoc telephone surveys for UDOH programs.	Not Mandated - None	\$ 3,000	\$ 260,500			
Program Operations Program Total		\$ 2,946,700	\$ 6,430,700			
Information Technology - Department-wide DTS service charges are coded to this unit.	State Statute Mandated - 63F-1-103	\$ 1,447,200	\$ 2,940,700			
Office of Fiscal Operations Finance - The Office of Fiscal Operations led by the Chief Administrative Operations Director provides accounting, purchasing, budgeting, and financial reporting services for the department. Employee Support (see below) reports to the Chief Administrative Operations Director. 24.5 FTEs	State Statute Mandated - 63A-3; 26-1-22	\$ 1,302,900	\$ 3,075,000			
Employee Support - Employee support personnel perform building support services including maintenance of office space, building supplies, motor pool, warehousing, and mail services. Employee support has 5 FTEs and a small portion of their FTE costs are allocated to units 1262 and 1266.	State Statute Mandated - 63A-5, 26-1-13	\$ 153,600	\$ 320,700			

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Employee Support Motor Pool - This unit is a clearing account for motor pools costs of vehicles assigned to DOH as well as the housing unit for the mini motor pool. Costs of owning vehicles (such as cleaning and some maintenance) are not included in the motor pool rates and are the responsibility of the Department.	State Statute Mandated - 63A-9	\$ 24,900	\$ 47,200			
Employee Support Unallocated Costs - This unit accounts for general building maintenance costs which have no basis for allocation to the divisions and programs.	State Statute Mandated - 63A-5, 26-1-13	\$ 18,100	\$ 47,100			
Office Of Internal Audit - The internal audit group performs internal audit services for the entire department. 6 FTEs	State Statute Mandated - 63I-5-201	\$ 392,600	\$ 673,800	(1) We recommend that Health and Human Services create an email address or online form for internal audit tip line submissions. (2) We recommend that all agencies promote their internal audit tip lines (phone number and email address/online form) to employees and the public... (3) We recommend that agencies add these processes to their annual risk assessment: Health and Human Services Survey of a subset of employees, in addition to directors		
Adoption Records Registry - Funding for adoption registry	State Statute Mandated - 78B-6-144	\$ 56,400	\$ 56,400			
(1) State Funds = General Fund, General Fund Restricted, and Dedicated Credits Revenue.						