

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
5820	5820	Qualified Patient Enterprise Fund	<p>The Center for Medical Cannabis (CMC) implements the department's duties under the Utah Medical Cannabis Act (26-61a). The CMC duties include (1) licensing and regulation of medical cannabis pharmacies and cannabis couriers; registration of medical cannabis card holders; registration of medical providers, pharmacy medical providers, pharmacy agents, and courier agents. (2) Management of software contracts used to run Utah's medical cannabis program; (3) Administrative and medical research support for the Compassionate Use Board and the Cannabinoid Product Board; (4) education of and coordination with licensees and stakeholders regarding cannabis software and cannabis laws; (5) establishment of guidelines for the suggested use of medical cannabis; (6) customer service to medical cannabis card applicants needed assistance completing online card applications; (7) auditing of medical cannabis pharmacy inventory; (8) collection of and reporting of medical cannabis data. (9) responding to data requests from the industry and medical researchers.</p>	State Statute Mandated	Utah Code 26-61a

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2251	4339	Traumatic Brain and Spine Rehabilitation	The Traumatic Spinal Cord (SCI) and Brain Injury (TBI) Rehabilitation (Rehab) fund is used to implement the purposes of the Fund as specified in UT Code: Title 26 Ch 54. Funds are contracted to 501(c) charitable clinics to provide physical, occupational and speech therapy and other rehab services to individuals with SCI and TBI. Individuals with SCI or TBI who qualify and their families benefit from the services provided by the Fund. FTE 0	State Statute Mandated	26-54
2250	4354	Traumatic Brain Injury Fund	The Traumatic brain Injury (TBI) Fund is used to implement the purposes of the Fund as specified in UT Code: Title 26 Ch 50. Funds are contracted to non-profit organizations to provide TBI resource facilitation services, and education or training on TBI. Funds are also contracted to select Local Health Departments to provide TBI Preventive services for their local health districts. In addition, the funds are used to conduct outreach and increase statewide public awareness of TBI and prevention messages through media and other outlets. Statewide all ages benefit from the TBI awareness and prevention messages. Individuals with a TBI who qualify and their families benefit from the TBI services provided by the Fund. FTE 3	State Statute Mandated	26-50
LXA	4452	Immunization Federal - Provider Vaccine	To maintain a state infrastructure to increase immunization coverage rates among all state populations and to reduce the spread of vaccine preventable disease in Utah. FTE 21	Not Mandated	
LLA	3811	Local Health Department General Fund Block Grant	General Funds pass through to 13 Local Health Departments for general support of public health services.	State Statute Mandated	26A-1-116

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LEA	3102	Division GRAMA Clearing Acct			
LEA	3103	Administrative Clearing			
LEA	3105	Director's Office	Division of Disease Control and Prevention Administration. 2.5 FTEs	Not Mandated	
LEA	3106	Division Support Services	Division of Disease Control and Prevention Supportive Services provides administrative financial support for the Division, 1.5 FTEs	Not Mandated	
LEA	3107	Lab Director's Office	Bureau of Utah Public Health Laboratories Supportive Services provides administrative support for the Bureau, 4.72 FTEs	Not Mandated	
LEA	3110	Laboratory Finance Office	Provide Financial Oversight Services for the Utah Public Health Laboratory		
LEA	3113	Operations & Maintenance - New Lab	Lab maintenance and operation expenses	Not Mandated	

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LEA	3151	Utah Public Health Lab Non Lapsing Capital	Non-lapsed funds for lab equipment	Not Mandated	
LEA	3180	Lab Information Technology Projects	DTS Support clearing account. 0 FTEs	Not Mandated	
LEA	3182	Lab Epidemiology Projects	Lab ware Public Health Template Upgrade Project .75 FTE	Not Mandated	
LED	3210	Environmental Testing Administration	The Chemical and Environmental Services laboratory provides testing of water, soil, and air for toxic contaminants to enable our partners to monitor the environment for compliance with health and safety standards, and to respond to emergencies such as chemical spills and contaminated drinking water. The United States Environmental Protection Agency certifies the State laboratory as the principal laboratory for water testing.	State Statute Mandated	UT Code Title 19, Chapters 1 10
LED	3214	Chemistry Special Projects			
LED	3215	Organic Chemistry	Combined - See 3210	State Statute Mandated	see 3210
LED	3216	Radiation Chemistry			
LED	3218	Environmental Microbiology	Combined - See 3210	State Statute Mandated	see 3210
LED	3220	Inorganic Chemistry	Combined - See 3210	State Statute Mandated	see 3210

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LED	3225	Metals/Radio Chemistry	Combined - See 3210	State Statute Mandated	see 3210
LED	3235	Four Corner States Environmental Monitoring	No longer an active grant		
LED	3285	Forensic Toxicology Administration	The Forensic Toxicology laboratory (Lab) conducts analyses of tissues and body fluids to determine the presence of alcohol, drugs, and other toxic substances. Staff routinely provide expert testimony regarding toxicology results in courts of law. Toxicology services are provided to the Office of the Medical Examiner (OME) and to more than 180 law enforcement agencies statewide. Toxicology results are used to assist the OME in determining the cause and manner of death (Utah Code 26-4-7) and to provide information in cases involving automobile homicide (Utah Code 76-5-207) or suspects driving under the influence (DUI) of alcohol and/or drugs (Utah Code 41-6a-502). The laboratory also tests certain sexual assault kits in suspected drug facilitated crimes (Utah Code 76-5-6) 15.4 FTE	State Statute Mandated	UT Code 26-4-7; 76-5-207; 41-6a-502; 76-5-6
LED	3286	Law Enforcement/Office of the Medical Examiner Toxicology	Combined - See 3285	State Statute Mandated	Combined - See 3285
LED	3288	Motor Vehicle Death Legislation Funds			
LED	3294	Coverdell Grant	Combined - See 3285	State Statute Mandated	

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LED	3310	Laboratory Operations Administration	Lab Operations Support (Supervision of Technical Services staff, and special projects including: Employee Support, Records, and Compliance, Building Support and DFCM Liaison, OSHA safety and Emergency & Response Lead, Evacuation Hazardous Waste Disposal, TempTrak system Admin, Security Access System Admin, Building Incident Tracking System Admin, Reception and Security. Also, some IT support, Haz Waste Officer and Industrial Hygiene support, DDCP Security Officer support	State Statute Mandated	
LED	3311	Lab Central Lab Support	Lab Technical Services (Autoclaving and lab wares Washing, Shipping and Receiving, Dock and Warehouse 2.0 FTE + 1.0 Temp	State Statute Mandated	
LED	3312	Lab Central Supply Cleaning	A clearing account for central supplies such as office supplies and general lab supplies	Not Mandated	
LED	3330	Safety/Quality Assurance/Training	Lab Safety Expenses, including training supplies, OSHA required SDS access, spill clean-up supplies, defibrillator maintenance, first aid kit maintenance, etc.	State Statute Mandated	
LED	3335	Specimen Processing	Combined - See 3315	State Statute Mandated	
LED	3410	Newborn Screening Administration	Covers the administrative components of the Newborn Screening Program.	State Statute Mandated	

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LED	3415	Newborn Screening Program	Cover the screening (testing) components of the Newborn Screening Program. From Sample receiving to follow-up.	State Statute Mandated	26-10-6; R438-15
LED	3417	Newborn Screening Non-Lapsing	Non-Lapsed funds for the Newborn Screening Program		
LED	3418	Centers for Disease Control and Prevention Grant For Implementation of Mucopolysaccharidosis type I, Pompe & X-linked adrenoleukodystrophy	No longer an active grant		
LED	3421	Newborn Screening/Non-Department of Health Providers	Unit Set up to track expenses for newborn screening done by other providers	State Statute Mandated	
LED	3422	Newborn Screening Info Systems	Unit Set up to track expenses for information systems costs related to Newborn Screening	State Statute Mandated	
LED	3424	Severe Combined Immunodeficiency Newborn Testing			

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LED	3425	Infectious Diseases Administration	The Infectious Diseases Program provides laboratory testing and consultation services for local health departments; hospitals, clinical laboratories, and physicians throughout Utah. The areas of support include: sexually-transmitted diseases (HIV, syphilis, chlamydia, and gonorrhea), agents of bioterrorism surveillance, respiratory virus surveillance and subtyping, arbovirus surveillance, virology, rabies testing, bacteriology, mycobacteriology, as well as communicable disease outbreak support, i.e. - influenza, tuberculosis, and food borne diseases.		
LED	3426	Virus Isolation Projects			
LED	3427	Immunology & Virology Testing	See Infectious Disease Administration (activities specific to STD and viral etiologies)		
LED	3427	Immunology and Virology Testing			
LED	3430	Bacteriology	See Infectious Disease Administration (activities specific to food borne diseases, antibiotic resistance and bacterial etiologies)	State Statute Mandated	
LED	3442	Tuberculosis Federal	Support of TB surveillance in Utah through CDC funding		



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LED	3443	Tuberculosis-General Fund	Support of TB surveillance in Utah through State funds	State Statute Mandated	
LED	3450	Molecular Testing	See Infectious Disease Administration (activities specific to arbovirus surveillance)		
LED	3460	Pulsenet	See Infectious Disease Administration (activities specific to food borne disease surveillance)	Federally Mandated	
LED	3461	Lab Arboviral	See Infectious Disease Administration (activities specific to arbovirus surveillance)	State Statute Mandated	
LED	3462	Rabies			
LED	3463	Lab Capacity	CDC grant supporting: Lab Infrastructures and Innovation (e.g. Advanced Molecular Diagnostics)	State Statute Mandated	

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LED	3464	Grant-National Antimicrobial Resistance Monitoring System	CDC grant supporting: Antibiotic Resistance Surveillance		
LED	3465	Lab Flu	CDC grant supporting: Flu Surveillance	State Statute Mandated	
LED	3466	Lab Capacity	CDC grant supporting: Lab Infrastructures and Innovation (e.g. Advanced Molecular Diagnostics)		
LED	3466	Epidemiology, Laboratory Capacity - Lab Capacity			
LED	3467	Ebola Lab and Biosafety			
LED	3468	Advanced Molecular Detection	No Longer an active Unit		
LED	3469	Foodcore Lab	See Infectious Disease Administration (activities specific to food borne disease surveillance)		

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LED	3470	Healthcare Associated Infection & Antimicrobial Resistance Lab Capacity	CDC grant supporting: Antibiotic Resistance monitoring		
LED	3471	Non-Flu Diagnosis & Testing	No longer an active grant		
LED	3472	Ebola, Lab & Biosafety	No longer an active grant		
LED	3473	Lab Arboviral	No longer an active grant		
LED	3474	Zika Supplemental Pers	No longer an active grant		
LED	3475	Epidemiology-Lab Capacity COVID-19 - Lab	Federal grant to respond to the COVID-19 crisis	Federally Mandated	
LED	3490	Epidemiology Influenza Incidence Surveillance	Federal grant to study impact of Flu on hospitalized cases	Federally Mandated	
LEE	3315	Environmental Lab Certification	The mission of both the Environmental Certification Program and Clinical Laboratory Improvement Amendments (CLIA) Certification Program is to improve the quality of test results produced in clinical and environmental laboratories through consultation, training, and certification. These two programs establish and enforce standards for laboratories performing tests that impact Utah Public Health Code 26-1-30(m). They inspect and certify all clinical laboratories in Utah. They also inspect and certify all environmental laboratories that submit laboratory data to Utah Department of Environmental Quality. 5.22 FTE	State Statute Mandated and Federal	UT Code 26-1-30/ 40 CFR 141
LEE	3316	Blood/Alcohol Testing			

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LEE	3320	Clinical Laboratory Improvement Amendments Grant	Combined - See 3315	State Statute Mandated and Federal	UT Code 26-1-30/ 42 CFR 493.3
LEH	3501	Immunization Prevention and Public Health Fund			
LEH	3503	Local Health Emergency Fund	Local Health Department Emergency		
LEH	3505	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Treatment & Care	HIV/AIDS Administrative budget, used for maintenance of effort on a federal grant (0.45 FTE)	Not Mandated	
LEH	3506	Student Vaccination Exemption	Vaccination Exemption Web		
LEH	3508	Hepatitis A Vaccine Support For 2017/2018 Outbreak			
LEH	3510	Bureau of Epidemiology Administration	Bureau of Epidemiology Administration., including Bureau Director, State Epidemiologist, Program Manager for Communicable Disease Investigation and Response, financial and office support. 5.4 FTEs	Not Mandated	
LEH	3511	Epidemiology Non-Lapsed			
LEH	3512	Regional Epidemiologist			

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LEH	3513	Human Immunodeficiency Virus Ryan White Part B Supplemental	Provides HIV-related medications to Utah residents living with HIV/AIDS	Federally Mandated	Section 2620 of Title XXVI of the Public Health Service Act, (42 U.S.C.300ff-29a )as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87)

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LEH	3517	Ryan White Title II	Provides HIV-related medications and insurance assistance to Utah residents living with HIV/AIDS. Funding also supports quality management and HIV planning activities (5.75 FTE)	Federally Mandated	Sections 2611-23 and 2693 of title XXVI of the Public Health Service Act, 42 U.S.C.300ff-21-300ff-31b and 300ff-121, as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87)

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LEH	3518	Ryan White Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Program Part B COVID-19 Response	Emergency relief funds to prevent the implementation of a ADAP wait list; funds are used to provide medications to Utah residents living with HIV/AIDS (0 FTE)	Federally Mandated	Public Health Service Act, Section 2691, (42 U.S.C. 300ff-101), as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87)
LEH	3526	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Education	The purpose is to implement high impact, comprehensive HIV Prevention Programs to achieve maximum impact on reducing new HIV infections. This will be accomplished through the following activities: HIV Testing, Comprehensive Prevention with Positives, and Policy Initiatives. (FTE 4.10)	State Statute Mandated	Rule R386-702. Communicable Disease Rule.
LEH	3527	Human Immunodeficiency Virus Prevention Category C Project			

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LEH	3532	Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome Surveillance Federal	Human Immunodeficiency Virus (HIV) surveillance activities support all surveillance efforts required to report HIV infections in the state of Utah. HIV is a reportable disease mandate by the Communicable Disease Rule. Non-financial support is provided to all Local Health Departments (LHDs) and medical providers/facilities in HIV diagnosis and reporting. Data analysis is also completed to further understand the spread of the virus within Utah. 2.75 FTE	State Statute Mandated	Rule R386-702. Communicable Disease Rule.
LEH	3537	Control & Prevention of Sexually Transmitted Diseases - H.B. 15	Improving Sexually Transmitted Disease Programs through Assessment, Assurance, Policy Development, and Prevention Strategies. (FTE .35)_	Not Mandated	
LEH	3538	STD Surveillance Network (Ssun) Sexually Transmitted Disease Surveillance	The STD Surveillance Network (SSuN) Part B grant will work towards connecting Planned Parenthood Association of Utah's (PPAU) electronic health records system to the Utah Department of Health's national electronic disease surveillance system to improve the timeliness, accuracy, and completeness of STD surveillance data. PPAU currently uses an electronic health record system that will allow Department of Health to develop an innovative method for a provider to report case information and submit valuable data to guide prevention efforts. (FTE 1.25)	Not Mandated	



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LEH	3545	Human Immunodeficiency Virus Ryan White Supplemental	Emergency relief funds to prevent the implementation of a ADAP wait list; funds are used to provide medications to Utah residents living with HIV/AIDS.	Federally Mandated	Section 311(c) of the Public Health Service Act, 42 U.S.C. 243(c) and Title XXVI of the Public Health Service Act, Sections 2611-23, (42 U.S.C. 300ff-21-31(b)), as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87)

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LEH	3550	Ryan White Drug Rebate	Drug Rebates from Ryan White utilization from Federal Grant. These funds are required by the federal grant to be used on Ryan White clients for medications.	Not Mandated	
LEH	3555	Tuberculosis State	This funding provides Tuberculosis control activities including medical consultation, treatment medications and funding for local health departments for tuberculosis control throughout the state. The program also provides housing for homeless tuberculosis patients. 2.05 FTE	State Statute Mandated	UCA R388-804
LEH	3560	Refugee Tuberculosis Wfs	Refugee Medical Health Coordination. The program contracts with the resettlement agencies to provide these services: 1) Coordinating medical appointments for refugees; 2) Arranging for and/or providing medical interpreter services; 3) Arranging for and/or providing transportation to medical appointments. 1.0 FTE	Not Mandated	
LEH	3561	H.B. 430 Genital Mutilation			

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LEH	3562	Refugee Tuberculosis Wfs	Refugee Health Screening and Prevention. The program coordinates with resettlement agencies the identification of refugees who need medical screening, provides medical screening, medical interpretation, medical education and orientation. The program also tracks the timeliness of health screenings, the referral to providers and treatment of patients for medical, dental and mental health conditions identified in the screening. 3.65 FTEs	Federally Mandated	Federal Refugee Act 1980 and INA Public Health Service Act
LEH	3563	Refugee Mental Health - Salt Lake County Funding			
LEH	3564	Refugee Mental Health			
LEH	3567	Tuberculosis Elimination	The purpose of this grant is to assist states in the prevention and control of tuberculosis through contracts with local health departments who identify active tuberculosis disease, through providing medical consultants and by providing out-patient medical services such as tuberculosis testing and chest x-rays, and providing training and education. These funds cannot be used for the treatment of tuberculosis. 0.8 FTEs	Federally Mandated	Section 317E of the Public Health Service Act, [42 U.S.C. Section 247b-6] as amended. The Catalog of Federal Domestic Assistance Number is 93.116.
LEH	3570	Pandemic Flu Planning			
LEH	3570	Refugee General	The purpose of this grant is to promote health and mental health among newly arrived and vulnerable refugees; streamline health promotion activities into refugee resettlement processes from arrival to self-sufficiency, as well as to coordinate and support community-based outreach, education and orientation around health and mental health services. No FTEs	Not Mandated	
LEH	3572	Refugee Gen Federal			

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LEH	3572	Refugee Pandemic Planning			
LEH	3584	Strengthening Surveillance of Hcv & Hbv Infections Grant			
LEH	3585	Human Immunodeficiency Virus Hepatitis	Provide technical assistance, training, education and coordination of rapid Hepatitis C testing in correctional and substance abuse facilities as well as Local Health Departments and CBOs. (1 FTE)	Not Mandated	
LEH	3586	Viral Hepatitis Epidemiologic Profiles			
LEH	3587	Syringe Service Program			
LEH	3588	Fentanyl - Division of Substance Abuse and Mental Health			
LEH	3589	Comprehensive Syringe Exchange Plan			
LEH	3591	Sexually Transmitted Disease Federal Grant	Improving Sexually Transmitted Disease Programs through Assessment, Assurance, Policy Development, and Prevention Strategies. (2.53 FTE)	State Statute Mandated	R386. Health, Disease Control and Prevention, Epidemiology.
LEH	3704	Food and Drug Administration Po			

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LEH	3706	Food Safety	The Environmental Sanitation program (ESP) at the Utah Department of Health is responsible to set the public health sanitation standards for a clean and sanitary environment for food service facilities, public pools, public lodging, as well as other public facilities. To accomplish this, the ESP has oversight of 17 state sanitation rules, and assists the local health departments in their responsibility of enforcement of these rules. The ESP also coordinates environmental sanitation issues with the local health departments, and other state and federal agencies. \$150,000 of the funds go to the local health departments for enforcement. At UDOH: 3 FTE (including secretarial support). the funds directly benefit the public as they are spent responding to complaints and prevention of disease outbreaks. (3 FTE)	State Statute Mandated	26-15;26-15a
LEH	3707	Summer Food	This program is funded by the Utah State Board of Education with pass through moneys from USDA. The program supports the inspection of summer food facilities by the LHDs to ensure cleanliness of summer food facilities in the state. It directly affects children attending summer school programs. (.05 FTE)	Not Mandated	Not mandated
LEH	3708	Utah Risk Factor Study			
LEH	3717	Environmental Public Health Track	Collects, standardizes and presents public health data, measures, indicators and other information about environmental public health topics to the public and to public health policy makers. Conducts state analysis of environmental public health concerns. The statewide population, local health departments, and public health policy makers benefit from this program. 7 FTE	Contractually Mandated	2U38EH00095 4
LEH	3721	Health Care & Other Facilities For Utah - National Electronic Disease Surveillance System			
LEH	3723	Centers for Disease Control and Prevention Bio Sense	Recruit and onboard facilities for the timely exchange of electronic health-related information between healthcare providers and public health authorities. Promote meaningful use of the Bio Sense program to improve the science, analytic, and workforce practice of situational awareness and syndromic surveillance at the national, state, and local levels. (1 FTE).	Not Mandated	

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LEH	3725	Environmental Epidemiology	Responds to chemical and radiological public health concerns. Provides administrative support for the tracking and assessment sections. Serves as the senior department consultant for topics related to toxicology and environmental epidemiology. The statewide population, local health departments, and public health policy makers benefit from this program. (1.5 FTE)	Not Mandated	
LEH	3734	Council of State and Territorial Epidemiologists Influenza Hospitalization Surveillance Project	Surveillance grant collaborating Utah Department of Health Bureau of Epidemiology, Utah Public Health Laboratory, and the Salt Lake County Health Department to calculate and report influenza rates, trends, clinical features, etiologic agents, and case ascertainment of residents of a defined metropolitan catchment area. (.40 FTE)	Not Mandated	
LEH	3742	Hepatitis Testing & Treatment			
LEH	3742	Hepatitis Testing and Treatment			
LEH	3744	Task Force For Global Health Ecr Implementation			

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LEH	3746	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Administration	<p>These funds are broadly intended to provide critical resources to state health departments in support of a broad range of COVID-19/SARS-CoV-2 testing and epidemiologic surveillance related activities. Funds are intended to leverage and build upon existing ELC infrastructure that emphasizes the coordination and critical integration of laboratory with epidemiology and health information systems in order to maximize the public health impact of available resources. Funds for Administration support managerial staff to oversee grant activities and strategies, financial and contract staff, as well as administrative support staff. A portion of these funds have been passed through to local health departments to support contact tracing.</p>	Authorized and mandated by state statute	26-6, 26-23b; R386-702

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LEH	3747	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Epidemiology	These funds are broadly intended to provide critical resources to state health departments in support of a broad range of COVID-19/SARS-CoV-2 testing and epidemiologic surveillance related activities. Funds are intended to leverage and build upon existing ELC infrastructure that emphasizes the coordination and critical integration of laboratory with epidemiology and health information systems in order to maximize the public health impact of available resources. Funds for Epidemiology support COVID-19 surveillance, case investigation, contact tracing, hot spot detection and outbreak response and mitigation efforts.	Authorized and mandated by state statute	26-6, 26-23b; R386-702



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LEH	3749	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Utah Public Health Laboratory	These funds are broadly intended to provide critical resources to state health departments in support of a broad range of COVID-19/SARS-CoV-2 testing and epidemiologic surveillance related activities. Funds are intended to leverage and build upon existing ELC infrastructure that emphasizes the coordination and critical integration of laboratory with epidemiology and health information systems in order to maximize the public health impact of available resources. Funds for the Utah Public Health Laboratory support COVID-19 testing (including rapid and PCR testing), and purchase and distribution of rapid test kits.	Authorized and mandated by state statute	26-6, 26-23b; R386-702
LEH	3751	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Mobile Testing	These funds are broadly intended to provide critical resources to state health departments in support of a broad range of COVID-19/SARS-CoV-2 testing and epidemiologic surveillance related activities. Funds are intended to leverage and build upon existing ELC infrastructure that emphasizes the coordination and critical integration of laboratory with epidemiology and health information systems in order to maximize the public health impact of available resources. Funds for Mobile Test Teams support staff, equipment, and supplies, needed to establish several Mobile Test Teams that can rapidly deploy to congregate living facilities (including long-term care facilities, correctional facilities, and shelters), schools, hot spot areas, etc. to perform large-scale COVID-19 testing.	Authorized and mandated by state statute	26-6, 26-23b; R386-702

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LEH	3755	Surv Atsor Appletree	Investigates, evaluates and provides consultation and recommendations about site specific and other environmental health hazards involving chemical or radiological exposures. Provides site health hazards assessment to the EPA for designated national priority list (superfund) sites to fulfill federal CERCLA statutory requirements. Impacted communities, local health departments and local policy makers benefit from this program. (2 FTE)	Contractually Mandated	2U61TS000154
LEH	3758	Epidemiology-Lab Capacity - COVID-19			
LEH	3759	Cross-Cutting Outbreak Investigat, Resp & Reporting			
LEH	3760	Affordable Care Act Outbreak			
LEH	3761	Affordable Care Act Actc Elr			
LEH	3761	Health Information Systems - Pcv			
LEH	3762	Affordable Care Act Actc Elr	Public health staff and IT developer time to develop and maintain the Electronic Message Staging Area to support Electronic Laboratory Reporting, and other design, development, and implementation activities related to health information systems in support of communicable disease detection, reporting and investigation. Supported (3 FTE) ( 2 Department of Health and 1 IT developer) in FY14.	State Statute Mandated	26-1-30, 26-6-3; R386-702
LEH	3764	Legionella	General support of epidemiologic capacity, including funding for leadership, data entry, and flexible epidemiologic support. This org was carried forward from a prior grant year, so was discontinued 7/31/2014.	State Statute Mandated	26-1-30, 26-6-3; R386-702
LEH	3765	Affordable Care Act West Nile Virus			
LEH	3765	Ep Arboviral	Surveillance to detect WNV and protect public. Coordination between many partners (epidemiologic, laboratory, healthcare, mosquito abatement, etc.) through conference calls. (1 FTE) supported for Epi in FY14.	State Statute Mandated	26-1-30, 26-6-3; R386-702

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LEH	3766	Affordable Care Act Foodcore	Surveillance, detection, and investigation of enteric disease cases, clusters and outbreaks. Pulsed Field Gel Electrophoresis (PFGE) analysis of bacterial enteric pathogens and reporting of PFGE data to CDC. On-line foodborne illness complaint system (iGotsick). Support to Local Health Departments related to enteric disease case and outbreak investigation. Program benefits local health departments, health care providers, and the public. (1.8 FTE + 1.5 seasonal interns).	State Statute Mandated	26-1-30, 26-6-3; R386-702
LEH	3767	Affordable Care Act Healthcare Associated Infection			
LEH	3767	Epidemiology Healthcare Associated Infection Coordination/Prevention			
LEH	3772	Evaluation			
LEH	3773	Epidemiology Flu	Comprehensive national influenza surveillance grant collaborating the Centers for Disease Control, Utah Department of Health Bureau of Epidemiology, Utah Public Health Laboratory, and Local Public Health jurisdictions. The activities of the grant encompass thorough and timely coordination and exchange of influenza surveillance data across jurisdictions and the CDC and maintaining laboratory infrastructure proficient in influenza testing and subtyping. (.70 FTE)	Not Mandated	
LEH	3774	Epidemiology Capacity	General support of epidemiologic capacity, including funding for leadership, data entry, and flexible epidemiologic support. Included contracts to support LHDs. (1.9 FTE) in FY14.	State Statute Mandated	26-1-30, 26-6-3; R386-702

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LEH	3775	Epidemiology Capacity - Cap	The purpose of the CDC Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) Cooperative Agreement is to support the ability of public health to detect, respond to, control, and prevent infectious diseases, including vaccine-preventable diseases, influenza, foodborne and enteric diseases, arboviral infections, healthcare associated infections, and antibiotic resistant disease threats. The funding supports personnel, training, laboratory testing, case investigation and contact tracing, and outbreak detection and response. Some of the funding is passed through to local health departments. The program benefits local health departments, health care providers, and the public.	Not Mandated	
LEH	3776	Affordable Care Act Pcv13 Cap			
LEH	3777	Affordable Care Act Mcv			
LEH	3778	Affordable Care Act Cre			
LEH	3780	Ebola Healthcare Associated Infection Assessment			
LEH	3781	Ebola Healthcare Associated Infection Prevention			
LEH	3782	Crosscutting - Enhanced Evaluation			
LEH	3783	Epidemiology Healthcare Associated Infection			
LEH	3783	Healthcare Associated Infection Prevention Infrastructure Pcv			
LEH	3784	Enhanced Prion Surveillance			

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEH	3785	Epidemiology - National Electronic Disease Surveillance System			
LEH	3785	Healthcare Associated Infection State	The Healthcare Associated Infections (HAI) Prevention and Reporting Program strives to understand the burden of HAIs within the state, how these infections occur and work collaboratively with healthcare facilities, Local Health Departments (LHDs), and other partners toward their reduction and elimination. The program uses HAI data reported by Utah healthcare facilities to the National Healthcare and Safety Network (NHSN) to compile an annual report for public distribution. The program also produces an annual report for public distribution detailing healthcare worker influenza vaccination rates in acute care facilities. The HAI program is responsible for the development and revision of R386-705, the Health Care Associated Infection Rule, which identifies Utah's HAI reporting requirements and specifies data sharing requirements for HAI data reported by facilities to the NHSN. (1.0 FTE)	State Statute Mandated	26-6-31
LEH	3786	Mycotics			
LEH	3787	Prevent Infection & Reduce Inter-Individual Transmission			
LEH	3788	Advance Interoperability Thru Healthcare Information Technology			
LEH	3789	Epidemiology Electronic Case Reporting			
LEH	3790	Epidemiology Zika Registry			

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEH	3791	Nonflu Respiratory Diseases			
LEH	3792	Epidemiology Healthcare Associated Infection			
LEH	3793	Ep Arboviral			
LEH	3795	Enhanced Evaluation Capacity			
LEH	3796	Healthcare Associated Infection Coordination, Prevention & Stewardship			
LEH	3797	Zika Supplemental			
LEH	3798	Zika Supplemental Personnel			
LEH	3799	Vaccine Preventable Disease Surveillance	Funds used to support manager of the UT-NEDSS (Trisano) electronic disease reporting and investigation system. Funds in this org ended 12/31/13, and support of activities shifted fully to org 3771 at that time. (This was a transition to a new grant year.) (1.80 FTE)	State Statute Mandated	26-1-30, 26-6-3; R386-702
LEH	3820	Infertility Study			
LEH	4131	Utah Statewide Immunization Information System State	UT Statewide Immunization System (USIIS) is a web application used by public and private healthcare providers, pharmacies, hospitals, long-term facilities, schools, and day care facilities throughout the state, and by Indian Health Services clinics in three border states. USIIS consolidates immunization histories of individuals across providers, provides clinical decision support for healthcare providers, provides immunization records for individuals, and assists with disease outbreak management. USIIS benefits Utah Healthcare providers, Utah residents, Utah schools and daycare facilities and Health Plans providing access to patients' immunization histories, reducing the costs of over immunization, School Immunization Reports and HEDIS (Healthcare effectiveness Data and Information Set.)	Not Mandated	

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEH	4133	Utah Statewide Immunization Information System Private Donations	UT Statewide Immunization System (USIIS) is a web application used by public and private healthcare providers, pharmacies, hospitals, long-term facilities, schools, and day care facilities throughout the state, and by Indian Health Services clinics in three border states. USIIS consolidates immunization histories of individuals across providers, provides clinical decision support for healthcare providers, provides immunization records for individuals, and assists with disease outbreak management. USIIS benefits Utah Healthcare providers, Utah residents, Utah schools and daycare facilities and Health Plans providing access to patients' immunization histories, reducing the costs of over immunization, School Immunization Reports and HEDIS (Healthcare effectiveness Data and Information Set.)	Not Mandated	
LEH	4135	Utah Statewide Immunization Information System Prevention and Public Health Fund 2012 Capacity Building			
LEH	4136	Prevention and Public Health Fund 15 Interoperability			
LEH	4137	Utah Statewide Immunization Information System Enhancing System (Afix)			
LEH	4139	Utah Statewide Immunization Information System Supplemental			

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEH	4451	Immunization Tsf	Funding was used to purchase vaccine and vaccine monitoring for state identified groups and projects that benefit Utah Citizens across the lifespan. The majority of the funds purchase vaccine for special projects. 1. Senior Outreach: provides Utah residents 60+ help with obtaining Shingles and Pneumococcal vaccines if they are un-insured or those whose Medicare supplemental plan does not cover these antigens. 2. Adult High Risk/Hep B Initiative: Provide vaccine to uninsured adults who are at risk for contracting Hepatitis B. If the adult qualifies for Twinrix, they may also be offered other vaccine, including HPV, PPV23, and Tdap. 3. Bridge to Delegations: Provides replenishment vaccine to participating local health departments to vaccinate children 0-18 years of age who have health insurance that does not cover any vaccine, select vaccines, or has a cap on their vaccine coverage. 4. Other special Projects: This may include limited projects such as an outbreak or flu vaccine. As funds are available, they were used to provide one time support to local health department contracts to support the provision of immunization services to citizens in their communities. FTE 0	Not Mandated	
LEH	4452	Immunization Federal	To maintain a state infrastructure to increase immunization coverage rates among all state populations and to reduce the spread of vaccine preventable disease in Utah. FTE 21	Not Mandated	
LEH	4453	Prevention and Public Health Fund - Human Papillomavirus Vaccination			
LEJ	3800	Phc Crisis Response			
LEJ	3801	Phc Jurisdictional Recovery			
LEJ	3802	Phc Biosurveillance			
LEJ	3803	Phc Information Management			
LEJ	3804	Phc Countermeasures			
LEJ	3805	Phc Jurisdictional Recovery			



Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	3806	Utah Overdose Data To Action	The Utah Overdose to Action program provides high quality, comprehensive, and timelier data on opioid prescribing, morbidity, and mortality, and uses those data to inform prevention. This grant has 2 components to enhance surveillance of opioid prescribing, opioid related injury and opioid overdose deaths. The CDC requires the state to allocate at least 20% of the prevention component award to fund targeted mini-grants and sub-awards to counties / cities / communities (including NGOs and coalitions) to address opioid overdose in high burden areas, particularly those identified by the surveillance component of this grant.	Not mandated	N/A
LEJ	3814	Prescription Drug Data Quality Improvement	Expired Grant. This federal grant ran from October 1, 2018 - September 30, 2020. The goals of this grant were to improve the quality and accuracy of Utah's Prescription Drug Monitoring Program, known as the Controlled Substance Database and assess the efficiency and effectiveness of the CSD program and specific initiatives.	Not Mandated	N/A

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	3815	Public Safety & Public Health Info Partnerships	Collective efforts with the Department of Public Safety to develop a timely information sharing system to inform local opioid overdose prevention efforts.	Not Mandated	N/A
LEJ	3821	Utah Nonfatal Suicide Surveillance	Suicide is a national public health crisis and Utah’s rate is consistently higher than the U.S. rate Utah had the fifth highest suicide rate in the U.S. in 2017 and an average of 627 deaths and 4,574 attempts each year. Overall, more Utahns are hospitalized or treated in an emergency department for suicide attempts than are fatally injured. The average total charges per year for hospitalizations and ED visits for suicide attempts were \$34.8 million for Utahns. overall goal is to enhance local surveillance of nonfatal suicide-related outcomes by implementing the following two strategies: 1) Increase the timeliness of aggregate reporting of nonfatal suicide-related outcomes, and 2) Disseminate surveillance finding to key stakeholders working to prevent or respond to suicide-related outcomes in Utah. The proposed goals, strategies, and activities will have the intended effect of enhancing surveillance of nonfatal suicide-related outcomes to inform response efforts in Utah.		

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	3825	Victims of Crime Public Awareness and Outreach	Statewide effort to direct victims of sexual violence to services across Utah. VIPP worked with state and local partners, including local crisis and crime victim service providers, to develop a collaborative statewide effort to increase use of warm handoffs and more centralized information so victims can more readily and conveniently access the referral and resource information they want and need.	Not Mandated	N/A
LEJ	3830	Utah Produce Incentives/Double Up Food Bucks	These programs make fruits and vegetables more affordable for Utahns experiencing food insecurity. 3830 currently funds a small Produce Rx program that provides fruit and vegetable vouchers to low-income, food insecure Utah's through healthcare and clinic partners. The majority of the budget is match for the federal grant (3831) that supports the Double Up Food Bucks program. Double Up Food Bucks provides a dollar for dollar match for SNAP recipients that purchase fresh fruits and vegetables at Utah farmers markets.	Not Mandated	
LEJ	3831	Utah Food Bucks	The Utah Double Up Food Bucks provides a dollar for dollar match for SNAP recipients that purchase fresh fruits and vegetables at Utah farmers markets. This is funded through a federal grant from USDA/NIFA; the 1 to 1 matching funds required for this grant come from the state appropriation for produce incentives (3830).	Not Mandated	
LEJ	3840	Bewise Family Support (Association of State and Territorial Health Officials)			
LEJ	3841	Cancer Population Health Approaches			

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	3852	Enhancing Surveillance of Opioid Mortality & Morbidity	Expired Grant: Project Period 9/1/2017-8/31/2019	Not Mandated	
LEJ	3853	Falls Prevention (Prevention and Public Health Fund)	This program embeds falls prevention network into the broader integrated program network utilized by local area agencies on aging and expands falls prevention programs to clients that are served within this network.	Not mandated	N/A
LEJ	3854	Stop The Opidemic Campaign			
LEJ	3855	Opioid Overdose Death Reduction	Expired		
LEJ	3856	Opioid Misuse & Overdose Prevention	Expired		
LEJ	3856	Opioid Misuse and Overdose Prevention			
LEJ	3857	Traumatic Brain Injury State Partnership Program Partner State Funding	Strengthen Utah's infrastructure to support and maximize the independence, well-being, and health of all Utahns with TBIs.	Not mandated	N/A

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	3858	Utah Drug Enforcement Administration 360 Program			
LEJ	3859	Essentials For Childhood	Work with key stakeholders to implement child maltreatment primary prevention strategies. VIPP works with key stakeholders, including the already established Utah Coalition for Protecting Childhood (UCPC), to decrease risk factors and increase protective factors for child maltreatment by addressing structural and system factors, including social determinants of health, that contribute to maltreatment and facilitate safe, stable, nurturing relationships and environments for children and families in Utah.	Not mandated	N/A
LEJ	3860	Sudden Unexpected Infant Death	Provides funding to monitor and review SUID. Facilitates the Advanced Medical Review Committee of the Child Fatality Review Committee. This Committee is comprised of pediatric experts who review medical findings to improve cause of death findings. This program contributes data and findings to a national SUID registry.	Not mandated	N/A
LEJ	3861	Sudden Death In Youth Surveillance	Provides funding to monitor and review child and adolescent deaths that are sudden or unexpected. Facilitates the Advanced Medical Review Committee of the Child Fatality Review Committee. This Committee is comprised of pediatric experts who review medical findings to improve cause of death findings. This program contributes data and findings to a national child fatality registry.	Not mandated	N/A
LEJ	3862	Opiate Abuse Prevention Pamphlet			
LEJ	4211	Health Promotion Administration State	Supports infrastructure to ensure the many programs in the Bureau of Health Promotion (BHP) function effectively and in a coordinated manner. This funding supports overarching functions that support all BHP programs including epidemiology, website development, and health communications. FTE 1.62	Not Mandated	
LEJ	4212	A Healthier You			

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4213	Youth Risk Behavior Survey-Federal	Support the administration of Youth Risk Behavior in odd years, and administration of the School Health Policies Survey in odd years. Supports a portion of an epidemiologist at the Utah Department of Health to coordinate the survey, analyze the data, and prepare and disseminate reports. Also supports a contractor to administer the surveys in the schools, via the Utah Division of Substance Abuse and Mental Health. FTE .43	Not Mandated	
LEJ	4216	School Health Consultant	Maternal Child Health Block Grant allocation to fund school nurse consultant shared between Utah Department of Health and Utah State Office of Education FTE 1	Not Mandated	
LEJ	4217	Centers for Disease Control and Prevention School Health			
LEJ	4218	Health Promotion Activities	Community projects to promote healthy lifestyle. FTE 0	Not Mandated	

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4219	Improving Health Disabilities	The Utah Disability and Health Program (DHP) works to improve health and quality of life among adults with mobility limitations (ML) and/or intellectual/developmental disabilities (IDD) through adaptation and implementation of evidence-based strategies in their communities.	Not Mandated	

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4220	WISEWOMAN (BeWise Program)	<p>Utah’s WISEWOMAN Program, known locally as the BeWise Program, provides cardiovascular screening and health behavior support services to eligible Utah women ages 40-64. Grant funding enables qualifying women to receive free screenings and counseling about their risk for heart disease and stroke. Women are then supported as they participate in evidence-based lifestyle programs, individual health coaching, or referred to other community resources. Services delivered by the BeWise Program are designed to promote lifelong heart-healthy lifestyle changes. <a href="https://www.cdc.gov/wisewoman/">https://www.cdc.gov/wisewoman/</a></p>	Not Mandated	



Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4221	Breast & Cervical Cancer - State	To provide mammograms and other screening services to younger women who do not qualify for the Federal Program ( 4FTE)	Federally Mandated	Maintenance of effort required by Federal Breast and Cervical Cancer grant PL 101-354
LEJ	4222	Breast & Cervical Cancer - Federal	The purpose of this funding opportunity announcement is to implement cancer prevention and control programs to reduce morbidity, mortality, and related health disparities. In accordance with the Healthy People 2020 Goals for the nation, this project focuses on addressing the national cancer burden by conducting cancer surveillance, increasing access to screening, improving health outcomes for people living with cancer, and providing the evidence for and evaluation of policy and environmental approaches. FTE. 8.55	Not Mandated	

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4223	National Comprehensive Cancer Control	The purpose of this funding opportunity announcement is to implement cancer prevention and control programs to reduce morbidity, mortality, and related health disparities. In accordance with the Healthy People 2020 Goals for the nation, this project focuses on addressing the national cancer burden by conducting cancer surveillance, increasing access to screening, improving eHealth outcomes for people living with cancer, and providing the evidence for and evaluation of policy and environmental approaches. FTE. 5.25	Not Mandated	
LEJ	4225	Colorectal Screening-Federal			
LEJ	4226	Cancer Policy Implementation			
LEJ	4227	Cancer Koman Foundation	Utah receives Susan G. Komen funding is designated to provide screening mammograms to women age 40-49. Funds are used to serve women who are uninsured or underinsured and live in rural areas and hard to reach populations. Susan G. Komen funds are used when Federal funding cannot be used.	Not Mandated	
LEJ	4228	Cervical Cancer Education-State	This distribution is in accordance with statute: UCA 26-21a-302; authorizing language in House Bill 130, Cancer Research Group License Plate; 2012 General Session of the Utah State Legislature. The Contractor will maintain their designation as an Official Cancer Center of Utah as designated by Senate Joint Resolution 017, 2005 General Session of the Utah State Legislature and as a National Cancer Institute designated center. Contractor will expend the distributed funds to conduct cancer research and prevention of cancer at the molecular and genetic levels. FTE. 0	State Statute Mandated	UCA-26-21a-302; HB 130
LEJ	4229	Prostate Cancer Support			

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4230	Diabetes/Hypertension Risk Factors - 1815	<p>Diabetes/Hypertension Risk Factors - 1815</p> <p>Supports efforts that promote diabetes management and care in clinical and community settings; diabetes prevention efforts; hypertension control in clinical settings; cholesterol management in clinical settings; CHW infrastructure.</p>	Not Mandated	

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4231	Cardio Vascular- Preventive Health Block Grant	Supplements efforts to prevent heart disease and stroke including reduction of hypertension FTE .50	Not Mandated	
LEJ	4232	Cardio Vascular- Preventive Health Block Grant			
LEJ	4233	Association of State and Territorial Health Officials Cardiovascular Health Collaboration	This funding has ended, but the purpose was to identify high risk, high cost, underserved populations with hypertension; develop and test innovative payment mechanisms and/or healthcare delivery models to support improvement of blood pressure control; strengthen statewide capacity to collect, assess, share and use data to identify and monitor individuals and systems performance; analyze and communicate the value and potential cost savings on care delivery.	Not Mandated	
LEJ	4235	Sup Domain 3 - Heart Disease			
LEJ	4236	Heart & Stroke Risk Factors - 1815			
LEJ	4237	Centers for Disease Control and Prevention Heart Disease			
LEJ	4238	Eppicc 1305 Basic Component Physical Activity, Nutrition, and Obesity			
LEJ	4239	Domain 3 - Diabetes			
LEJ	4240	Domain 4 - School Health			

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4241	Diabetes Control - Federal			
LEJ	4244	Sup Domain 4 - Diabetes			
LEJ	4245	Chc Basic - School			
LEJ	4247	Centers for Disease Control and Prevention Diabetes			
LEJ	4248	HealthInsight Diabetes Prevention (National Diabetes Prevention Program)			
LEJ	4249	Domain 4 - Heart & Stroke			
LEJ	4250	Epiic 1305 Basic			
LEJ	4252	Cancer Genomic Best Practices	The Utah Cancer Genomics Program aims to increase the number of people who know their family history of cancer and share it with a health care provider, increase the number of people appropriately referred to genetic counseling and testing, and develop best practices & establish an evidence base for cancer genomics in public health practice through sustainable systems changes and strong community partnerships. The UCGP benefits both the public and healthcare providers.	Not Mandated	N/A

Appropriatio	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4255	Diabetes/Heart & Stroke With State & Local Strategies - 1817	This billing code for this grant has been updated to be 4260. See line 237 for information.	Not Mandated	
LEJ	4257	Cancer Management, Leadership & Coordination			

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4260	Heart & Stroke/Diabetes With State & Local Strategies - 1817	Innovative State and Local Public Health Strategies to Prevent and Manage Diabetes and Heart Disease and Stroke		

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4261	Arthritis - Federal - Centers for Disease Control and Prevention	Develop and expand a sustainable infrastructure for the systematic delivery of arthritis management evidence-based programs. Primary system partners include Area Agencies of Aging, Healthcare Systems, and Local Health Departments. FTE 3	Not Mandated	
LEJ	4263	Arthritis Administration on Aging			



Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4264	Arthritis Chronic Pain Self Management	Expired Grant. This federal grant ran from August 1, 2017- July 31, 2020. The goals of this grant were to expand reach and utilize innovative funding models for sustainability of self-management education for adults 60+ and adults 18+ with disabilities.	Not Mandated	

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4265	Administration on Aging Arthritis	Expired Grant. This grant ran from August 1, 2016 - July 31, 2018. The goals of this grant included 1) expand reach and 2) utilize innovative funding models for sustainability of Stanford's Chronic Disease Self-Management Education (CDSME) and Enhance Fitness (EF) for Utah adults 60+ and adults 18+ with disabilities.	Not Mandated	

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4271	Asthma-Federal	To maximize the reach, impact, efficiency, and sustainability of comprehensive asthma control services to ensure that all individuals with asthma have the access, resources, and knowledge to improve quality of life. FTE 2.68	Not Mandated	
LEJ	4273	Northeast Genomics Project			

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4285	Worksite Lactation Accommodation	This funding has ended. Funding received from ASTHO for 2020 worksite lactation accommodations mini-grants.	Not Mandated	
LEJ	4287	Physical Activity, Nutrition, Obesity - 1807	Funds from Centers for Disease Control that fund activities related to breastfeeding, nutrition (food service guidelines), physical activity and built environment. 25% of funds are contracted to 13 local health departments. FTE 4.75	Not Mandated	
LEJ	4289	Student Vision Screenings	State funds used to purchase vision screening kits for LEAs and partially fund School Nurse Consultant.	Mandated	<a href="http://choosehealth.utah.gov/documents/pdfs/school-nurses/Vision%20Forms/53G-9-404_vision.pdf">http://choosehealth.utah.gov/documents/pdfs/school-nurses/Vision%20Forms/53G-9-404_vision.pdf</a>

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4290	Local Health Department Physical Activity, Nutrition, and Obesity Prevention Blk	Provide resources to Local Health Departments to address the National Healthy People 2030 Objectives which are deemed state priorities. Some funds reserved at state level to fund FTE .25	Not Mandated	
LEJ	4292	Nutrition Physical Activity, Obesity Tobacco Settlement	Supplements efforts to combat childhood obesity including increasing physical activity and improving nutrition in schools and childcare centers FTE 1.3	Not Mandated	
LEJ	4295	Student Asthma Relief	Supplements School Nurse Consultant and training activities for emergency inhaler use at schools.	Mandated	<a href="https://le.utah.gov/xcode/Title26/Chapter41/26-41.html">https://le.utah.gov/xcode/Title26/Chapter41/26-41.html</a>

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4297	Centers for Disease Control and Prevention Obesity			
LEJ	4299	Domain 2 - School Health			
LEJ	4320	Local Health Department Violence And Injury Prevention Program Prevention Block	Contractual funds that go to LHD's to provide local injury prevention services (car seat checks, falls prevention, RX Drug Overdose prevention, suicide prevention etc.) within their local health districts. Funding benefits all ages in the respective local health districts. FTE 0	Not Mandated	
LEJ	4321	Injury Prevention Maternal and Child Health	Funding that provides the key staffing and infrastructure to support and make possible all the many statewide injury prevention activities we provide (Student Injury Report, Child, Suicide, as well as Domestic Violence Fatality Reviews, Safe Kids, etc.). In addition, this staffing and infrastructure that this funding provides is to successfully compete for the several Federal grants which we have received. Funding benefits all ages statewide. FTE 5	Not Mandated	N/A
LEJ	4323	Violence And Injury Prevention Program Competitive Projects - Preventive Health Block Grant	Provide support and funding to LHD's to implement prevention activities addressing shared risk and protective factors of injury.	Not Mandated	N/A
LEJ	4324	National Violent Death Review	Maintain and enhance the Utah Violence Death Reporting System which provides timely, quality data from multiple agencies. FTE 2.85	Not Mandated	N/A

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4325	Child Fatality Review	Provides support to VIPP to conduct child fatality review. All child deaths receive a case review by the Utah Child Fatality Review Committee.	Not Mandated	N/A
LEJ	4326	Utah Evidence-Based Falls Prevention			
LEJ	4327	Prescription Drug Overdose Death Prevention			
LEJ	4328	Community Injury Prevention	Contractual funds that go to LHDs to provide local injury prevention services (car seat check, falls prevention, RX Drug Overdose prevention, suicide prevention etc.) within their local health districts. Funding benefits all ages in the respective local health districts. FTE 0	Not Mandated	

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4329	Rape Crisis Center- Preventive Health Block Grant	Funding is federally mandated set-aside as part of the Preventive Health and Human Services Block Grant and is used to supplement CDC funding for the primary prevention of sexual violence in Utah. It benefits two programs in Salt Lake County, the Utah Coalition Against Sexual Assault and the Rape Recovery Center and the population's in which they serve. The VIPP approaches sexual violence from a public health perspective - recognizing that primary prevention, including efforts to change cultural norms, behaviors, and practices - is essential to create a violence free community. FTE .30	Not Mandated	
LEJ	4330	Rape Prevention Education	Provide funding and assistance to community based organizations to maintain sexual violence prevention in their communities. FTE 1	Not Mandated	
LEJ	4331	Rape Prevention - State	The goal of this funding is to promote primary prevention projects that increase protective factors and decrease risk factors for sexual violence, and eliminate and/or reduce the incidence of sexual violence perpetration and victimization in Utah, especially among underserved communities. The UDOH/VIPP approaches sexual violence from a public health perspective, recognizing that primary prevention, including efforts to change cultural norms, behaviors, and practices is essential to create a community climate free from violence.	Not mandated	N/A
LEJ	4332	Harold Rogers Prescription Drug Monitoring Program	Expired		



Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4334	Alcohol Epidemiology Capacity	Conduct surveillance of frequency and intensity of alcohol use and misuse and use the findings to design and implement evidence-based strategies in Utah. Provide expertise and guidance to stakeholders and the public on excessive drinking and related harms.	Not mandated	N/A
LEJ	4335	Council of State and Territorial Epidemiologists Substance Abuse Indicators			
LEJ	4342	Baby Your Baby Media Campaign			
LEJ	4345	Baby Your Baby Outreach-Medicaid	Medicaid Matching for Baby Your Baby Outreach. FTE 0	Not Mandated	
LEJ	4348	Baby Your Baby - Children's Health Insurance Program Title 21 Federal	Medicaid Match for CHIP Program administrative support. FTE 2	Not Mandated	
LEJ	4349	Health Resource Center	Administrative Financial Support for the Baby Your Baby Program. FTE. 3.5	Not Mandated	
LEJ	4350	Violence Prevention Integration	Enable the Utah Department of Health to plan and build systems for state injury programs and policies. FTE 2.4	Not Mandated	

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4351	Violence Prevention Surveillance			
LEJ	4353	Spinal Cord and Brain Injury Fund Administration			
LEJ	4355	Drug Poisoning Prevention	Support UCO-OP, targeted naloxone distribution	Legislative Appropriations	
LEJ	4357	Drug Abuse & Misuse Prevention	Expired		
LEJ	4357	Drug Abuse and Misuse Prevention			
LEJ	4358	Naloxone Jag			
LEJ	4359	Rescue Meds In School	Supplements School Nurse Consultant and training activities for seizure rescue medication use at schools.	Mandated	<a href="https://le.utah.gov/xcode/Title53G/Chapter9/53G-9-S505.html">https://le.utah.gov/xcode/Title53G/Chapter9/53G-9-S505.html</a>
LEJ	4360	Component 1 - Heart Disease			
LEJ	4361	Component 1 - Diabetes			
LEJ	4363	Component 2 - Heart Disease			
LEJ	4364	Component 2 - Diabetes			
LEJ	4370	Comprehensive Tobacco Centers for Disease Control and Prevention - Competitive Component			

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4373	Tobacco Youth	Supplemental funds supporting anti tobacco campaign for print and broadcast media reaching youth and adult populations FTE 1	Not Mandated	
LEJ	4375	Tobacco Media Campaign	Medicaid Matching funds from Media Buys supporting anti tobacco campaign. Reaching general population FTE 0	Not Mandated	

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4377	Tobacco Tax - Restricted Revenue	Increase capacity in the local areas and within disparate communities to help smokers quit, reduce exposure to secondhand smoke and to prevent youth initiation of tobacco use. These funds also help support a mass media campaign and the Quit line. Reach: Tobacco users, general population FTE3	State Statute Mandated	Utah code Ann. Sec. 51-9-201
LEJ	4378	Comprehensive Tobacco Centers for Disease Control and Prevention	To reduce morbidity and mortality associated with tobacco use and to eliminate associated health disparities by supporting capacity building, program planning, development, implementation, evaluation and surveillance. FTE 6.05	Not Mandated	

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4379	Tobacco Settlement-State	The purpose of this funding is to increase capacity in the local areas and within disparate communities to help smokers quit, reduce exposure to secondhand smoke and to prevent youth initiation of tobacco use. These funds also help support a mass media campaign and the Tobacco Quit line FTE 4	State Statute Mandated	Utah Code Ann. Sec. 51-9-201
LEJ	4381	Cannabinoid Product Board	This funding covers the cost of department staffing and per diem for members of the Cannabinoid Product Board (CPB). Duties of the CPB include reviewing scientific research related to the human use of cannabis and to develop guidelines for treatment with cannabis.	State Statute Mandated	26-61-202
LEJ	4382	Vaping/Lung Disease Education	This unit is not currently being used by the program. It was used specifically for the EVALI ( e-cigarette or vaping product use-associated lung injury) response efforts (2019-2020). Unit 4376, which is our current e-cigarette Restricted Tax funding is not listed on this spreadsheet and is the unit where vaping education, media and enforcement currently occurs.	Not Mandated	

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4387	Tobacco Prevention Non Lapsed	One time dollars to strengthen mass media campaign: print media, youth, internet, radio and television outlets to reach the general populations FTE 0	Not Mandated	

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4388	Quitline Sustainability	The 5 year cycle of funding ended FY20. CDC merged this funding for the next 5 year cycle into 1 grant identified by 2 components and is now part of the unit 4378. FTE 1.5	Not Mandated	
LEJ	4391	Sexual Assault Prevention			
LEJ	4393	Primary Violence Prevention			

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4394	Alzheimer's Statewide Education	Provide dementia education and supports statewide. DOH is responsible for ADRD State Plan implementation, facilitation of the ADRD Coordinating Council and its 4 workgroups; working with contracted partners to provide services and supports; and ensure ADRD efforts are not duplicated throughout the state. This funding is broken down into four parts and was contracted out through an RFP process.	Mandated appropriation through Health and Human Services Committee	UCA26-1-30
LEJ	4396	Healthy Brain Initiative - Alzheimer's Association			



Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEJ	4397	Alzheimer State Plan	The Alzheimer's Disease and Related Dementias (ADRD) State Plan was created to combat stigma and raise awareness of ADRD; to emphasize person-centered care practices for those with dementia diagnosis and their caregivers; and to provide services in dementia diagnosis and caregiving to underserved populations. ADRD is the 4th leading cause of death in Utah and the 6th leading cause of death in the United States. This state plan benefits all Utahns who are or will be affected by dementia and caregiving efforts. The state plan goes alongside with the ADRD Coordinating Council, which has over 120 partners statewide and meets quarterly. This Coordinating Council includes non-profit organizations, colleges, universities, volunteers and many others. The goal of this council is to reduce duplication of efforts related to ADRD in Utah and engage professional caregivers to provide the best care possible. FTE: 2	Mandated	UCA26-1-30
LEJ	4398	Prevention Block Administration	Supports effective grant administration and program implementation of the Preventive Health and Health Services Block Grant.	Federal Statute Mandated	US Code Title 42, Chapter 6A, Subchapter XVII, Part A
LEJ	4399	Parkinson's Disease Registry	Starting July 2020, this project no longer receives funding		

Appropriation	Unit	Program	Program Description (What does it do? Who does it benefit?)	Mandate Status	Mandate Citation (R =
LEK	1401	Medical Examiner	The OME is responsible for the investigation and certification of sudden and unexpected deaths that occur within the borders of the State. This unit admin. funds to pay for all expenditures and personnel costs required to perform according to the OME statute. OME functions/mandated statute benefits all Utah citizens. 30.05 FTE	State Statute Mandated	26-4-(1-30)
LEK	1402	Medical Examiner Body Transportation	The OME pays for roundtrip transportation of bodies under its jurisdiction. A contracted transportation service is used along the Wasatch Front area; funeral homes provide all other transportation. This unit admin. funds to pay for all transportation costs. OME functions/mandated statute benefits all Utah citizens.	State Statute Mandated	26-4-(1-30)
LEK	1404	Office of the Medical Examiner Investigators	The OME pays for the investigation of all cases in the State that fall under its jurisdiction. Contracted investigators are used through-out the State for case investigation. This unit admin. funds to pay for all vendor investigator's costs. OME functions/mandated statute benefits all Utah citizens.	State Statute Mandated	26-4-(1-30)
LEK	1405	New Office of the Medical Examiner Building Equipment			
LEM	4259	Skin Cancer Donations			
LEO	3850	Opiate Overdose Response			
		<b>Grand Total</b>			

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
5820	5820	Qualified Patient Enterprise Fund	HB 3001 passed in 2018 and it mandated that the department play a significant role in implementing Utah's medical cannabis program.	<p>(1) Performance Measure 1: Utah's Medical Cannabis Program will launch by March 1, 2020. The CMC already met this goal. (2) Performance Measure 2: All 14 medical cannabis pharmacy locations will open for business between March 2020 and June 2021. Since January 2020, 11 of 14 medical cannabis pharmacy locations have opened for business and all 14 will be open by the June 2021 statutory deadline (three more will open between today and May 30, 2021). (3) Performance Measure 3: The Compassionate Use Board will complete reviews of all board petitions and recommend to the department for approval or denial within 90 days of submittal. All board petitions have been reviewed by the CUB and recommended to UDOH for denial or approval within 90 days. Only three Board petitions have been denied. 4. Performance Measure 4: All medical cannabis card applications will be processed and a card issued to a qualifying patients within 15 days of UDOH receiving a complete application. All non-CUB medical cannabis card applications are processed and a card issued to qualifying patients within 15 days of UDOH receiving a complete application. Applications are processed between 0-5 days depending on the volume of applications that are "awaiting state review". 5. Performance Measure 5: All qualified medical provider, pharmacy medical provider, pharmacy agent, and courier agent applications will be processed and a card issued by UDOH to qualifying applicants within 15 days of UDOH receiving the complete application. 6. Performance Measure 6: The Cannabinoid</p>

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
2251	4339	Traumatic Brain and Spine Rehabilitation	The Fund was established during the 2012 Utah Legislative Session as a restricted special revenue fund to provide physical, occupational, and speech therapy; and equipment necessary for daily living activities for people with spinal cord and brain injuries. VIPP contracts with two agencies to provide these services to Utahns.	Increase in the number of patients receiving intensive services after sustaining a TBI.
2250	4354	Traumatic Brain Injury Fund	Established by the Utah State Legislature in 2008, Individuals with a TBI may receive help with resource facilitation or neuropsychological testing through the TBI Fund. Resource facilitation is a process that involves working with caring, trained experts who understand what someone with a TBI is going through. These experts provide short-term support to help the person with the TBI and their family members meet their goals and successfully return to school, work, or other daily activities.	Increase in the number of patients who are able to receive resource facilitation and testing help following a TBI. The TBI Fund is a payor of last resort, meaning individuals have no other financial means available to obtain these services
LXA	4452	Immunization Federal - Provider Vaccine	This program within the LXA appropriation was created to track the value of vaccines being distributed by the Federal Agency to providers statewide.	Please see response in LEH 4452
LLA	3811	Local Health Department General Fund Block Grant	Funding is provided to support having minimum capacity to meet what is required by statute for LHDs	LHDs have minimum capacity

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEA	3102	Division GRAMA Clearing Acct		
LEA	3103	Administrative Clearing		
LEA	3105	Director's Office	Created for administration and leadership for the Division.	
LEA	3106	Division Support Services	Created for administrative and financial support for the Division.	
LEA	3107	Lab Director's Office	Created to assist UPHL Laboratory Sections with technical Support Functions and UPHL leadership with special projects related to the day-to-day running of a production facility.	Tracking of quality, issues, incidents. Feedback from other laboratory leadership and staff. Continual monitoring of processes and activity
LEA	3110	Laboratory Finance Office	To facilitate the functions of the Utah Public Health Laboratory that have a financial aspect. This includes budget tracking, procurement of lab supplies and services, invoicing for lab testing, accounts receivable functions, fixed asset tracking, facilitating the contract process, coordinating travel and fleet needs, and other miscellaneous functions that are financial in nature.	We know we are successful if we are in compliance with all applicable rules and regulations (no audit findings), keep the operations of the lab within budget each year, maintain good relationships with our vendors and customers, and consistently meet the needs of the lab staff that we support.
LEA	3113	Operations & Maintenance - New Lab	To track the annual expense for the cost of the Unified Public Health Lab building which comes as a transfer from DHRM	Not applicable, as this unit was set up for that one expense that is transferred each year

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEA	3151	Utah Public Health Lab Non Lapsing Capital	The annual non-lapsing funds (should there be any) are tracked in this unit. The non-lapsing funds are approved for capital equipment or infrastructure needs, including information systems development	By keeping a schedule of when fixed assets have met their useful life and having a plan to replace them using the non-lapsing funds. Also, but making sure these funds are fully spent each year in the most optimal way possible to benefit the lab and it's operations.
LEA	3180	Lab Information Technology Projects	To track information technology expenses that are not specific to one section of the lab, but rather benefit the entire lab as a whole.	By ensuring that all general lab information system-related expenses are budgeted for, tracked, and billed to this unit
LEA	3182	Lab Epidemiology Projects		
LED	3210	Environmental Testing Administration	Statutory to monitor clean water, drinking water and air. Radiology and air are no longer part of testing at UPHL.	Passing proficiency testing and compliance with TAT requirements. Fulfillment of EPA objectives for certification.
LED	3214	Chemistry Special Projects		
LED	3215	Organic Chemistry	Organic contamination monitoring for drinking water monitoring requirements.	see above
LED	3216	Radiation Chemistry		
LED	3218	Environmental Microbiology	Monitoring for legionella for hospitals, health care facilities, Total coliform , E.coli monitoring for drinking water for Total coliform rule.	see above CDC elite program participation
LED	3220	Inorganic Chemistry	Inorganic contamination monitoring in drinking water and for clean water act.	PT, audits, certifications

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LED	3225	Metals/Radio Chemistry	Metal contamination monitoring in drinking water and for clean water Act.	PT, audits, certifications
LED	3235	Four Corner States Environmental Monitoring		
LED	3285	Forensic Toxicology Administration	The Tox Lab was created to serve the law enforcement and medical examiner community in the State of Utah and by extension the citizens of Utah to help improve safe roadways in Utah (enforce DUI laws) and aid in the investigation of drug facilitated sexual assault. Also to aid in the investigation of drug overdose deaths (OME).	DPS and Highway Safety collect Tox Lab generated DUI data to create a report to the state legislature each year accounting for the number of alcohol & drug related DUIs, etc. The OME incorporates Toxicology results into their final autopsy reports in determining manner and cause of death. The Tox Lab continues to increase its scope of testing for both law enforcement and the OME to ensure as comprehensive a testing program as resources allow. The Tox Lab also maintains a national accreditation certificate (ABFT-ANAB) ensuring continued quality of work based on national standards. More recently the Tox Lab has worked to ensure compliance with state statute that all sexual assault kits be submitted for testing. Feedback from all agencies also helps measure success. The Tox Lab has also used CQI/SUCCESS metrics to measure performance.
LED	3286	Law Enforcement/Office of the Medical Examiner Toxicology	Combined - See 3285	Combined - See 3285
LED	3288	Motor Vehicle Death Legislation Funds		
LED	3294	Coverdell Grant	Combined - See 3285	Combined - See 3285

Appropriatio	Unit	Program	Why was the program created?	How do you know if you are being successful?
LED	3310	Laboratory Operations Administration	Created to assist UPHL Laboratory Sections with non-technical Support Functions and UPHL leadership with special projects related to the day-to-day running of a production facility.	Tracking of quality, issues, incidents. Feedback from laboratory leadership and staff. Continual monitoring of processes and activity
LED	3311	Lab Central Lab Support	Shipping & Receiving, Warehousing (short and long term, lab supplies, customer supplies, records, chemicals, gases), Waste Disposal (autoclaving bio-waste, assisting with hazardous waste transfer, recycling and shredding), Glassware and reusable labware washing, laundry services, etc.	Tracking of quality, issues, incidents. Feedback from laboratory leadership and staff. Continual monitoring of processes and activity
LED	3312	Lab Central Supply Cleaning	To create an efficient and central way to purchase general office and lab supplies and then allocate the expenses out to the programs that use them on a monthly basis	Allocating all expenses out to the proper section of the lab that uses/requests the supplies
LED	3330	Safety/Quality Assurance/Training	To meet requirements of OSHA and bloodborne pathogen safety. Meet requirements for health department employees vaccination policies.	Accidents are documented and monitored, training and vaccinations are documented
LED	3335	Specimen Processing		
LED	3410	Newborn Screening Administration	Aid with Newborn screening program operations	screen >99% of Utah's newborns and provide timely diagnosis and treatment with infants affected by one of the disorders on the NBS panel.



Appropriatio	Unit	Program	Why was the program created?	How do you know if you are being successful?
LED	3415	Newborn Screening Program	Newborn screening constitutes one of the most successful public health efforts worldwide. The goal of NBS is to identify babies affected by NBS disorders and initiate timely treatment to avoid suffering and death. Utah mandated screening for PKU in 1965 and each hospital completed their own screens. In 1979, the state centralized the program for continuity of care and required screening for additional disorders. Today Utah screens for 42 disorders.	Approximately 1 in 300 infants each year are identified with treatable disorders. When these disorders are identified prior to onset of symptoms, we minimize or completely prevent disabilities and in some cases even prevent death.
LED	3417	Newborn Screening Non-Lapsing	Mechanisms to re-invest savings from process improvement projects and to purchase capital equipment.	yes. performance metrics include "was capital equipment purchase successfully executed"
LED	3418	Centers for Disease Control and Prevention Grant For Implementation of Mucopolysaccharidosis type I, Pompe & X-linked adrenoleukodystrophy		
LED	3421	Newborn Screening/Non-Department of Health Providers	Newborn screening constitutes one of the most successful public health efforts worldwide. The goal of NBS is to identify babies affected by NBS disorders and initiate timely treatment to avoid suffering and death.	performance metric based: YES performance metric includes % of all births screened >99%
LED	3422	Newborn Screening Info Systems	IAPD funding/capital support to upgrade outdated infrastructure.	Monitoring project goals versus actual achievements. LIMS check; EHR connectivity check, in progress in progress
LED	3424	Severe Combined Immunodeficiency Newborn Testing		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LED	3425	Infectious Diseases Administration	Infectious Diseases surveillance, outbreak response and testing of vulnerable populations are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.
LED	3426	Virus Isolation Projects		
LED	3427	Immunology & Virology Testing	Infectious Diseases surveillance, outbreak response and testing of vulnerable populations are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.
LED	3427	Immunology and Virology Testing		
LED	3430	Bacteriology	Infectious Diseases surveillance, outbreak response and testing of vulnerable populations are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.
LED	3442	Tuberculosis Federal	Infectious Diseases surveillance, outbreak response and testing of vulnerable populations are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>Why was the program created?</b>	<b>How do you know if you are being successful?</b>
LED	3443	Tuberculosis-General Fund	Infectious Diseases surveillance, outbreak response and testing of vulnerable populations are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.
LED	3450	Molecular Testing	Infectious Diseases surveillance, outbreak response and testing of vulnerable populations are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.
LED	3460	Pulsenet	Infectious Diseases surveillance, outbreak response and testing of vulnerable populations are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.
LED	3461	Lab Arboviral	Infectious Diseases surveillance, outbreak response and testing of vulnerable populations are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.
LED	3462	Rabies		
LED	3463	Lab Capacity	Infectious Diseases surveillance, outbreak response and testing of vulnerable populations are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LED	3464	Grant-National Antimicrobial Resistance Monitoring System	Infectious Diseases surveillance, outbreak response and testing of vulnerable populations are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.
LED	3465	Lab Flu	Infectious Diseases surveillance, outbreak response and testing of vulnerable populations are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.
LED	3466	Lab Capacity	Infectious Diseases surveillance, outbreak response and testing of vulnerable populations are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.
LED	3466	Epidemiology, Laboratory Capacity - Lab Capacity		
LED	3467	Ebola Lab and Biosafety		
LED	3468	Advanced Molecular Detection		
LED	3469	Foodcore Lab	Infectious Diseases surveillance, outbreak response are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LED	3470	Healthcare Associated Infection & Antimicrobial Resistance Lab Capacity		
LED	3471	Non-Flu Diagnosis & Testing		
LED	3472	Ebola, Lab & Biosafety		
LED	3473	Lab Arboviral		
LED	3474	Zika Supplemental Pers		
LED	3475	Epidemiology-Lab Capacity COVID-19 - Lab	Infectious Diseases surveillance, outbreak response are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.
LED	3490	Epidemiology Influenza Incidence Surveillance	Infectious Diseases surveillance, outbreak response are essential elements of Public Health	Providing testing capacity appropriate to a public health response need. Achieve turn around times optimal to ensure effective interventions. Achieve milestones set by Federal grants. Prevent mortality and morbidity. Provide actionable results yielding cost-savings for the community.
LEE	3315	Environmental Lab Certification	The Environmental Lab Certification Program was created to meet the requirements of 40 CFR 141 and the National Drinking Water Primacy requirements. The program also exists to meet the requirements of other state Departments such as the Department of Health or Department of Environmental Quality that require that samples submitted for compliance be analyzed by a Utah certified laboratory.	The program itself if recognized by US EPA region 8 and as a NELAP accreditation body. These recognitions require certain time frames to be met in regards to performance of key actions such as laboratory assessments, submittal of application, and review of laboratory proficiency testing
LEE	3316	Blood/Alcohol Testing		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEE	3320	Clinical Laboratory Improvement Amendments Grant	The objective of the CLIA program is to ensure quality laboratory testing and patient safety. The CLIA program regulates all laboratory testing (except research) performed on humans in Utah.	The CLIA program is monitored and evaluated by the CMS Regional office and Central office. Timeframes for surveys and submissions of documentation and review are monitored.
LEH	3501	Immunization Prevention and Public Health Fund		
LEH	3503	Local Health Emergency Fund		
LEH	3505	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Treatment & Care		
LEH	3506	Student Vaccination Exemption		
LEH	3508	Hepatitis A Vaccine Support For 2017/2018 Outbreak		
LEH	3510	Bureau of Epidemiology Administration		
LEH	3511	Epidemiology Non-Lapsed		
LEH	3512	Regional Epidemiologist		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3513	Human Immunodeficiency Virus Ryan White Part B Supplemental	Part B of the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87) provides grants to States and Territories to improve the quality, availability, and organization of HIV health care and support services.	As required by HRSA, the Program has a Quality Management Program. The Quality Management Program utilizes HRSA developed and designated performance measures. The Program has a quality management plan that is reviewed and updated annually. Performance measures are monitored and evaluated no less than quarterly. The Program also convenes a Quality Management Committee that meets quarterly to review performance measure reporting and to advise the Program on performance measures for each service. In addition to the Program Quality Management Program, the Program develops implementation plans for each service that it provides. Each implementation plan features anticipated clients to be served and projected outcomes. Lastly, the overall Program goal is to increase the community viral suppression rate for eligible clients. The Program goal is monitored at least quarterly.

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3517	Ryan White Title II	<p>Part B of the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87) provides grants to States and Territories to improve the quality, availability, and organization of HIV health care and support services.</p>	<p>As required by HRSA, the Program has a Quality Management Program. The Quality Management Program utilizes HRSA developed and designated performance measures. The Program has a quality management plan that is reviewed and updated annually. Performance measures are monitored and evaluated no less than quarterly. The Program also convenes a Quality Management Committee that meets quarterly to review performance measure reporting and to advise the Program on performance measures for each service. In addition to the Program Quality Management Program, the Program develops implementation plans for each service that it provides. Each implementation plan features anticipated clients to be served and projected outcomes. Lastly, the overall Program goal is to increase the community viral suppression rate for eligible clients. The Program goal is monitored at least quarterly.</p>



Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3518	Ryan White Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Program Part B COVID-19 Response	Part B of the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87) provides grants to States and Territories to improve the quality, availability, and organization of HIV health care and support services.	As required by HRSA, the Program has a Quality Management Program. The Quality Management Program utilizes HRSA developed and designated performance measures. The Program has a quality management plan that is reviewed and updated annually. Performance measures are monitored and evaluated no less than quarterly. The Program also convenes a Quality Management Committee that meets quarterly to review performance measure reporting and to advise the Program on performance measures for each service. In addition to the Program Quality Management Program, the Program develops implementation plans for each service that it provides. Each implementation plan features anticipated clients to be served and projected outcomes. Lastly, the overall Program goal is to increase the community viral suppression rate for eligible clients. The Program goal is monitored at least quarterly.
LEH	3526	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Education		
LEH	3527	Human Immunodeficiency Virus Prevention Category C Project		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3532	Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome Surveillance Federal		
LEH	3537	Control & Prevention of Sexually Transmitted Diseases - H.B. 15		
LEH	3538	STD Surveillance Network (Ssun) Sexually Transmitted Disease Surveillance		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3545	Human Immunodeficiency Virus Ryan White Supplemental	Part B of the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87) provides grants to States and Territories to improve the quality, availability, and organization of HIV health care and support services.	As required by HRSA, the Program has a Quality Management Program. The Quality Management Program utilizes HRSA developed and designated performance measures. The Program has a quality management plan that is reviewed and updated annually. Performance measures are monitored and evaluated no less than quarterly. The Program also convenes a Quality Management Committee that meets quarterly to review performance measure reporting and to advise the Program on performance measures for each service. In addition to the Program Quality Management Program, the Program develops implementation plans for each service that it provides. Each implementation plan features anticipated clients to be served and projected outcomes. Lastly, the overall Program goal is to increase the community viral suppression rate for eligible clients. The Program goal is monitored at least quarterly.

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3550	Ryan White Drug Rebate	Part B of the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87) provides grants to States and Territories to improve the quality, availability, and organization of HIV health care and support services.	As required by HRSA, the Program has a Quality Management Program. The Quality Management Program utilizes HRSA developed and designated performance measures. The Program has a quality management plan that is reviewed and updated annually. Performance measures are monitored and evaluated no less than quarterly. The Program also convenes a Quality Management Committee that meets quarterly to review performance measure reporting and to advise the Program on performance measures for each service. In addition to the Program Quality Management Program, the Program develops implementation plans for each service that it provides. Each implementation plan features anticipated clients to be served and projected outcomes. Lastly, the overall Program goal is to increase the community viral suppression rate for eligible clients. The Program goal is monitored at least quarterly.
LEH	3555	Tuberculosis State		
LEH	3560	Refugee Tuberculosis Wfs		
LEH	3561	H.B. 430 Genital Mutilation		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3562	Refugee Tuberculosis Wfs		
LEH	3563	Refugee Mental Health - Salt Lake County Funding		
LEH	3564	Refugee Mental Health		
LEH	3567	Tuberculosis Elimination		
LEH	3570	Pandemic Flu Planning		
LEH	3570	Refugee General		
LEH	3572	Refugee Gen Federal		

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>Why was the program created?</b>	<b>How do you know if you are being successful?</b>
LEH	3572	Refugee Pandemic Planning		
LEH	3584	Strengthening Surveillance of Hcv & Hbv Infections Grant		
LEH	3585	Human Immunodeficiency Virus Hepatitis		
LEH	3586	Viral Hepatitis Epidemiologic Profiles		
LEH	3587	Syringe Service Program		
LEH	3588	Fentanyl - Division of Substance Abuse and Mental Health		
LEH	3589	Comprehensive Syringe Exchange Plan		
LEH	3591	Sexually Transmitted Disease Federal Grant		
LEH	3704	Food and Drug Administration Po		

Appropriatio	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3706	Food Safety		
LEH	3707	Summer Food		
LEH	3708	Utah Risk Factor Study		
LEH	3717	Environmental Public Health Track		
LEH	3721	Health Care & Other Facilities For Utah - National Electronic Disease Surveillance System		
LEH	3723	Centers for Disease Control and Prevention Bio Sense		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3725	Environmental Epidemiology		
LEH	3734	Council of State and Territorial Epidemiologists Influenza Hospitalization Surveillance Project		
LEH	3742	Hepatitis Testing & Treatment		
LEH	3742	Hepatitis Testing and Treatment		
LEH	3744	Task Force For Global Health Ecr Implementation		



Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3746	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Administration	This program was created to provide administrative support for Utah's COVID-19 pandemic response efforts.	<p>The grant requires regular fiscal and programmatic reporting on key metrics set forth by the CDC ELC Program (monthly to quarterly); success is measured by meeting key milestones and showing appropriate progress in spending funds as expected. Monitoring status of the outbreak, including reviewing data by geographic and demographic characteristics for incidence and vaccinations, is key to demonstrating progress towards reducing disease burden in Utah; data can be found in tabs accessed here: <a href="https://coronavirus.utah.gov/case-counts/">https://coronavirus.utah.gov/case-counts/</a> Additionally, activities supported by these funds are captured within the Unified Response Plan; metrics are monitored and available here: <a href="https://coronavirus.utah.gov/case-counts/">https://coronavirus.utah.gov/case-counts/</a> - click on "Unified Response Plan Scoreboard". Work through this grant also supports strategies and efforts key to meeting HB294 measures as well; see: <a href="https://coronavirus.utah.gov/legislative-response/">https://coronavirus.utah.gov/legislative-response/</a></p>

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3747	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Epidemiology	This program was created to provide epidemiologic support for Utah's COVID-19 pandemic response efforts.	<p>The grant requires regular fiscal and programmatic reporting on key metrics set forth by the CDC ELC Program (monthly to quarterly); success is measured by meeting key milestones and showing appropriate progress in spending funds as expected. Monitoring status of the outbreak, including reviewing data by geographic and demographic characteristics for incidence and vaccinations, is key to demonstrating progress towards reducing disease burden in Utah; data can be found in tabs accessed here: <a href="https://coronavirus.utah.gov/case-counts/">https://coronavirus.utah.gov/case-counts/</a> Additionally, activities supported by these funds are captured within the Unified Response Plan; metrics are monitored and available here: <a href="https://coronavirus.utah.gov/case-counts/">https://coronavirus.utah.gov/case-counts/</a> - click on "Unified Response Plan Scoreboard". Work through this grant also supports strategies and efforts key to meeting HB294 measures as well; see: <a href="https://coronavirus.utah.gov/legislative-response/">https://coronavirus.utah.gov/legislative-response/</a></p>

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3749	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Utah Public Health Laboratory	This program was created to provide laboratory support for Utah's COVID-19 pandemic response efforts.	<p>The grant requires regular fiscal and programmatic reporting on key metrics set forth by the CDC ELC Program (monthly to quarterly); success is measured by meeting key milestones and showing appropriate progress in spending funds as expected. Monitoring status of the outbreak, including reviewing data by geographic and demographic characteristics for incidence and vaccinations, is key to demonstrating progress towards reducing disease burden in Utah; data can be found in tabs accessed here: <a href="https://coronavirus.utah.gov/case-counts/">https://coronavirus.utah.gov/case-counts/</a> Additionally, activities supported by these funds are captured within the Unified Response Plan; metrics are monitored and available here: <a href="https://coronavirus.utah.gov/case-counts/">https://coronavirus.utah.gov/case-counts/</a> - click on "Unified Response Plan Scoreboard". Work through this grant also supports strategies and efforts key to meeting HB294 measures as well; see: <a href="https://coronavirus.utah.gov/legislative-response/">https://coronavirus.utah.gov/legislative-response/</a></p>
LEH	3751	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Mobile Testing	This program was created to provide flexible, rapid, and large scale COVID-19 sample collection and rapid testing support for Utah's COVID-19 pandemic response efforts.	2

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3755	Surv Atsor Appletree		
LEH	3758	Epidemiology-Lab Capacity - COVID-19		
LEH	3759	Cross-Cutting Outbreak Investigat, Resp & Reporting		
LEH	3760	Affordable Care Act Outbreak		
LEH	3761	Affordable Care Act Actc Elr		
LEH	3761	Health Information Systems - Pcv		
LEH	3762	Affordable Care Act Actc Elr		
LEH	3764	Legionella		
LEH	3765	Affordable Care Act West Nile Virus		
LEH	3765	Ep Arboviral		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3766	Affordable Care Act Foodcore		
LEH	3767	Affordable Care Act Healthcare Associated Infection		
LEH	3767	Epidemiology Healthcare Associated Infection Coordination/Prevention		
LEH	3772	Evaluation		
LEH	3773	Epidemiology Flu		
LEH	3774	Epidemiology Capacity		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3775	Epidemiology Capacity - Cap	The Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) Cooperative Agreement was created to strengthen the ability of U.S. health departments' to combat infectious diseases.	Progress on work plan activities is monitored quarterly by CDC. In addition, there are required performance measures for each of the 11 funded projects which must be reported at least annually.
LEH	3776	Affordable Care Act Pcv13 Cap		
LEH	3777	Affordable Care Act Mcv		
LEH	3778	Affordable Care Act Cre		
LEH	3780	Ebola Healthcare Associated Infection Assessment		
LEH	3781	Ebola Healthcare Associated Infection Prevention		
LEH	3782	Crosscutting - Enhanced Evaluation		
LEH	3783	Epidemiology Healthcare Associated Infection		
LEH	3783	Healthcare Associated Infection Prevention Infrastructure Pcv		
LEH	3784	Enhanced Prion Surveillance		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3785	Epidemiology - National Electronic Disease Surveillance System		
LEH	3785	Healthcare Associated Infection State		
LEH	3786	Mycotics		
LEH	3787	Prevent Infection & Reduce Inter-Individual Transmission		
LEH	3788	Advance Interoperability Thru Healthcare Information Technology		
LEH	3789	Epidemiology Electronic Case Reporting		
LEH	3790	Epidemiology Zika Registry		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	3791	Nonflu Respiratory Diseases		
LEH	3792	Epidemiology Healthcare Associated Infection		
LEH	3793	Ep Arboviral		
LEH	3795	Enhanced Evaluation Capacity		
LEH	3796	Healthcare Associated Infection Coordination, Prevention & Stewardship		
LEH	3797	Zika Supplemental		
LEH	3798	Zika Supplemental Personnel		
LEH	3799	Vaccine Preventable Disease Surveillance		
LEH	3820	Infertility Study		
LEH	4131	Utah Statewide Immunization Information System State		



Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	4133	Utah Statewide Immunization Information System Private Donations		
LEH	4135	Utah Statewide Immunization Information System Prevention and Public Health Fund 2012 Capacity Building		
LEH	4136	Prevention and Public Health Fund 15 Interoperability		
LEH	4137	Utah Statewide Immunization Information System Enhancing System (Afix)		
LEH	4139	Utah Statewide Immunization Information System Supplemental		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEH	4451	Immunization Tsf		
LEH	4452	Immunization Federal		
LEH	4453	Prevention and Public Health Fund - Human Papillomavirus Vaccination		
LEJ	3800	Phc Crisis Response		
LEJ	3801	Phc Jurisdictional Recovery		
LEJ	3802	Phc Biosurveillance		
LEJ	3803	Phc Information Management		
LEJ	3804	Phc Countermeasures		
LEJ	3805	Phc Jurisdictional Recovery		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	3806	Utah Overdose Data To Action	Utah’s unintentional and undetermined opioid death rate has been significantly higher than the U.S. for over a decade. Opioids are highly addictive narcotic substances commonly prescribed to treat pain. On average 475 people a year in Utah die from unintentional drug poisoning deaths. Between 2016-2018, Utah ranked 28th in the U.S. for unintentional drug poisoning deaths, which have outpaced deaths due to firearms, falls, and motor vehicle crashes. On average in Utah a year, 323 people die from a prescription opioid drug overdose, 156 people die from a heroin overdose, and 88 people die from synthetic opioid overdose. In Utah, 2,265,300 opioid prescriptions were dispensed in 2018 and 80% of heroin users started with prescription opioids.	Outcome measures have been developed for this grant. Some of these measures are: Increased use of PDMP by providers and pharmacists Identification of high risk prescribing and patient behaviors. Better tracking of opioid prescriptions Decrease in high risk prescribing behaviors Decrease in opioid overdose deaths. Greater awareness of drug and opioid overdose epidemic by state health departments, with respect to burden and resources, including at the city / county level Increase state involvement in local-level prevention efforts. Increased preparedness and response at the local level.
LEJ	3814	Prescription Drug Data Quality Improvement	These efforts will assist in developing an interoperable CSD program within Utah and ensure timely and quality data is being used to inform prevention efforts. It is vital to enhance the infrastructure of the CSD and determine data quality and accuracy to effectively determine prescribing patterns, specialties, and settings with the highest risk of overdose and provide targeted information to those health systems and communities.	The project goals were three-fold: 1) develop a data quality assurance program, 2) improve CSD infrastructure and reports, and 3) develop the infrastructure for users and system audit logging. We know we were successful because all three goals were met.

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	3815	Public Safety & Public Health Info Partnerships	<p>Although Utah has taken various initiatives to implement strategies to monitor and conduct surveillance activities throughout the state, efforts are disjointed and data is not timely enough to act upon to make effective impacts. The proposed project will increase the timelines of data and selected indicators to help inform public health and public safety efforts. The proposed project supports the Utah Coalition for Opioid Overdose Prevention strategic plan in improving timeliness of data to local communities. Unfortunately, it is difficult to gain support to obtain funding to improve data timeliness, quality, and efficiency. The Utah Department of Health and the Department of Public Safety Statewide Information and Analysis Center will look for ways to leverage existing funding when appropriate. It is vital to enhance the data infrastructure to effectively determine opioid trends in a timely manner.</p>	<p>We know if we are being successful when the following goals are met and a decrease in opioid overdose morbidity and mortality is observed: 1) expand an internal dashboard that automates the collection of the data and provides it by local health district for surveillance, 2) identify local health departments for weekly monitoring of indicators for anomalies, 3) implement response protocols when applicable, and 4) enter select data weekly for specific indicators.</p>
LEJ	3821	Utah Nonfatal Suicide Surveillance	<p>To provide funding to improve timeliness and quality of non-fatal suicide attempts to inform suicide response and prevention of suicide.</p>	<p>Outcome measures have been developed for this grant. They are:</p> <ul style="list-style-type: none"> <li>● Increased nonfatal suicide-related outcome surveillance findings provided to key stakeholders,</li> <li>● Improved use of surveillance data to geographically identify populations at greatest risk of nonfatal suicide-related outcomes,</li> <li>● Increased use of data to implement evidence-based prevention programs and policies,</li> <li>● Increased documentation of best practices and success stories,</li> <li>● Decreased rate of suicide, and</li> <li>● Decreased rate of suicide attempts</li> </ul>

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	3825	Victims of Crime Public Awareness and Outreach	The Utah Office on Victims of Crime reached out to VIPP to request that VIPP apply for funding to work with partners to design a public media campaign to increase awareness of available services for victims of rape or sexual assault.	We will evaluate the effort to measure its effectiveness in increasing the number of victims contacting rape crisis centers for services, information, or support.
LEJ	3830	Utah Produce Incentives/Double Up Food Bucks	Research shows strong correlations between eating a healthy diet and chronic disease outcomes. Fruits and vegetables, especially fresh fruits and vegetables, are often more expensive than highly processed foods with less nutritional value. In 2019, only 30% of Utahns ate two or more servings of fruit per day and only 12.5% reported eating three or more servings of vegetables per day. For Utahns living in poverty, these numbers were 24.5% and 8.9% respectively. These programs were created to increase access to fruits and vegetables for low-income Utahans.	The evaluation for the Produce Rx program measures program outcomes such as changes in fruit and vegetable intake, perceived health, interactions with healthcare systems, and food insecurity. This data is collected via pre and post surveys distributed to all program participants. We have a robust program data monitoring system in place for the Double Up Food Bucks program and participating in national evaluation efforts attached to our federal grant.
LEJ	3831	Utah Food Bucks	In addition to addressing food insecurity, this program supports Utah farmers and the local economy by keeping food dollars in the community.	We have a robust program data monitoring system in place for the Double Up Food Bucks program and participating in national evaluation efforts attached to our federal grant.
LEJ	3840	Bewise Family Support (Association of State and Territorial Health Officials)		
LEJ	3841	Cancer Population Health Approaches		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	3852	Enhancing Surveillance of Opioid Mortality & Morbidity	The overall strategies are to: 1) increase the timeliness of emergency department and emergency medical services opioid overdose reporting, 2) increase the timeliness of death certificate and medical examiner fatal opioid overdose and associated risk factor reporting, 3) disseminate surveillance findings to key stakeholders working to prevent or respond to opioid overdoses, and 4) partner with the CDC to ensure success of the cooperative agreement and share lessons learned.	Increased use of stakeholders receiving information about trends in state and county nonfatal opioid overdoses to assist in prevention planning. Increased use of stakeholders receiving information on fatal opioid overdoses to assist in targeted prevention planning.
LEJ	3853	Falls Prevention (Prevention and Public Health Fund)	Every day, fall-related events result in 30 older adults activating the 911 emergency medical services (EMS) system and 19 being transported to an emergency department (ED) or a hospital.	An increase in local capacity to deliver and embed evidence-based falls programs into an integrated program network that focus on social determinants of health and reduce falls and falls risk in older adults.
LEJ	3854	Stop The Opidemic Campaign		
LEJ	3855	Opioid Overdose Death Reduction		
LEJ	3856	Opioid Misuse & Overdose Prevention		
LEJ	3856	Opioid Misuse and Overdose Prevention		
LEJ	3857	Traumatic Brain Injury State Partnership Program Partner State Funding	1) Support and maintain Utah's TBI Advisory Board, 2) Create a Utah TBI registry, 3) Enhance the TBI workforce through professional training, 4) Provide information about TBI to families and referrals to appropriate services, and 5) Improve local and national coordination and collaboration around TBI services and supports.	1. More Utahns are aware of the signs and symptoms of a TBI. 2. More awareness of available resources by Utahns with a TBI and the professionals who they work with. 3. Increased access to services by Utahns with TBI. 4. Increased training to professionals. 5. Functioning TBI registry.

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	3858	Utah Drug Enforcement Administration 360 Program		
LEJ	3859	Essentials For Childhood	This funding allows VIPP and the Utah Coalition for Protecting Childhood to enhance the state action plan to better address child maltreatment risk and protective factors through a public health approach that uses data-driven decision-making to select target populations and strategies and takes into consideration social determinants of health and health disparities.	Outcome indicators have been developed for this grant. They are: 1. # of state policies/ laws based on the best available CAN (e.g. economic supports) evidence are signed/ enacted by the state legislature 2. Decrease in the number of Utahns in high-risk populations and 3) Decrease in the rate of child maltreatment.
LEJ	3860	Sudden Unexpected Infant Death	To provide a mechanism for better understanding, better investigation, and better certification of sudden unexplained infant deaths.	Decrease in the number of infant deaths being classified as unexplained.
LEJ	3861	Sudden Death In Youth Surveillance	To provide a mechanism for better understanding, better investigation, and better certification of sudden unexpected deaths in children and adolescents	Decrease in the number of child and adolescent deaths that are certified as undetermined cause.
LEJ	3862	Opiate Abuse Prevention Pamphlet		
LEJ	4211	Health Promotion Administration State	To provide infrastructure, support and leadership to programs in the Bureau of Health Promotion (BHP).	Reduced morbidity and mortality for chronic diseases, violence, and injury through coordinated approaches.
LEJ	4212	A Healthier You		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4213	Youth Risk Behavior Survey-Federal	Systematic data collection to monitor health-related behaviors among adolescents is critical to ensuring the health and well-being of students, informing programmatic interventions, engaging partners, and assessing progress. Youth Risk Behavior Survey (YRBS) data have and will continue to be used to describe risk and protective factors in terms of prevalence and trends, to identify disparities and prioritize health-risk behaviors among youth. School Health Profiles Survey (Profiles) data have and will continue to be used to monitor school policies and environments with respect to health education, physical education, health services, healthy and safe school environments, and family and community involvement.	Indicators are positively trending. Data is analyzed and shared with key stakeholders. Data is being used by programs to target prevention efforts.
LEJ	4216	School Health Consultant	Funds were allocated from the MCH block grant to focus on school efforts to improve child nutrition, increase family meals, decrease bullying and increase physical activity.	Data is collected at USBE on free and reduced lunch applications. Data is also collected through various school surveys including the YRBS, PNA and School Health Profiles to learn about family meals, bullying and physical activity.
LEJ	4217	Centers for Disease Control and Prevention School Health		
LEJ	4218	Health Promotion Activities	Funds are allocated to support emerging health promotion activities in targeted communities.	Reduced morbidity and mortality for chronic diseases, violence, and injury through coordinated approaches.



Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4219	Improving Health Disabilities	One in five (22.3%) of Utah adults are living with a disability. Adults with disabilities experience significant differences in their health behaviors and overall health compared with adults without disabilities. People with disabilities are more likely to engage in unhealthy behaviors like inactivity and tobacco usage and experience a higher incidence of chronic health conditions like diabetes and obesity.	We use various performance measures to measure success. These include measuring reach, number of partnerships, participant-level data, changes in knowledge and behaviors, increases in policy, system and environmental changes (PSEs).

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4220	WISEWOMAN (BeWise Program)	<p>Accounting for 1 in every 4 deaths, heart disease is the leading cause of death for women in the United States. The WISEWOMAN (Well-Integrated Screening and Evaluation for WOMen Across the Nation) program was created to help women understand and reduce their risk for heart disease and stroke by providing services to promote lasting heart-healthy lifestyles. Working with low-income, uninsured and underinsured women aged 40 to 64 years, the program provides heart disease and stroke risk factor screenings and services that promote healthy behaviors. Utah first received funding to provide these services in July 2008. Services are currently offered in 6 of 13 health jurisdictions using WISEWOMAN funding from the Centers for Disease Control and Prevention (CDC).</p>	<p>The BeWise program has 6 performance measures reported annually to the Centers for Disease Control and Prevention (CDC) and are as follows: 1. Number and percent of WISEWOMAN participants whose WISEWOMAN provider has a protocol for identifying patients with undiagnosed hypertension. 2. Number and percent of WISEWOMAN participants whose WISEWOMAN provider has policies or systems to implement a multi-disciplinary team approach to blood pressure control. 3. Number and percent of at risk women in WISEWOMAN referred to an appropriate healthy behavior support service. 4. Number and percent of WISEWOMAN providers with an implemented community referral system (tracking bi-directional referrals) for healthy behavior support services for people with high risk for cardiovascular disease. 5. Number and percent of women in WISEWOMAN referred to a healthy behavior support service who attend at least one session. 6. Number and percent of women in WISEWOMAN with known high blood pressure who have achieved or are currently maintaining blood pressure control. In addition to CDC reported measures, the program completes evaluation activities to measure changes in self-reported health behaviors and improvements participants report making because of their participation in the program.</p>

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4221	Breast & Cervical Cancer - State	Maintenance of Effort is required for this program in accordance with the authorizing legislation PL 101-354. The average amount of non-Federal contributions toward breast and cervical cancer programs and activities for the two year period preceding the first Federal fiscal year of funding for NBCCEDP is referred to as Maintenance of Effort (MOE). Only those non-Federal contributions in excess of the MOE amount may be considered matching funds.	Increased screening rates, increased enrollment numbers. Improvement of enrollment process to remove barriers from those seeking services.
LEJ	4222	Breast & Cervical Cancer - Federal	The Utah Breast and Cervical Cancer Program, through the national Breast and Cervical Cancer Early Detection program (NBCCEDP), provides breast and cervical cancer screening to Utahns. This is accomplished by collaborating with: 1) Chronic disease and health promotion programs on prevention and risk reduction activities; 2) Utah Cancer Registry for report and use of cancer burden data; 3) Partners such as Huntsman Cancer Institute, Intermountain Healthcare and American Cancer Society breast health equity. We continue to establish and enhance program infrastructure to increase breast and cervical cancer screening rates by establishing contracts and MOUs with program partners on clinical service delivery and implementation of health system intervention strategies. Work with employers to implement wellness policies. Partner with CHWs and health educators for outreach and referrals to medical homes.	Increased screening rates, increased enrollment numbers. Improvement of enrollment process to remove barriers from those seeking services.

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4223	National Comprehensive Cancer Control	The Comprehensive Cancer Control Program (CCC) establishes statewide priorities related to cancer prevention and control in Utah and works with a diverse set of community partners to implement policies, systems, and environmental changes to improve health outcomes for all Utahns. CCC currently focuses efforts on creating healthy neighborhood environments, addressing food insecurity, improving access to high quality healthcare services, and alleviating financial toxicity for cancer survivors, caregivers, and communities.	The CCC develops and annually updates a program evaluation plan that outlines specific activities and provides measures to track progress and success. This evaluation plan focuses on areas related to State Cancer Plan implementation and progress, coalition effectiveness, and program progress. In addition, the State Cancer Plan includes a diverse set of targets for change that include specific data sources and measures and changes to these measures over the course of plan implementation.
LEJ	4225	Colorectal Screening-Federal		
LEJ	4226	Cancer Policy Implementation		
LEJ	4227	Cancer Koman Foundation	To provide screenings for women age 40-49, allowing more women in Utah to receive mammogram screening services.	Number of women screened
LEJ	4228	Cervical Cancer Education-State	To conduct cancer research and prevention of cancer. Funds are passed to Huntsman Cancer Institute.	Reaching the goal of number of license plates sold
LEJ	4229	Prostate Cancer Support		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4230	Diabetes/Hypertension Risk Factors - 1815	<p>Diabetes and hypertension are among the most common causes of mortality and morbidity in Utah. Diabetes in particular is an expensive disease to treat and manage, and hypertension is the leading risk factor for heart attacks and strokes. The program was created to help manage hypertension and diabetes among the adult population in Utah to reduce healthcare costs and reduce mortality due to these conditions.</p>	<p>Performance measures are collected annually to measure the impact of the program. Performance measures include: -Access to and participation in evidence based diabetes self management education programs and diabetes prevention programs throughout the state and in underserved areas. -Number of patients served by healthcare organizations with systems to 1) identify patients with prediabetes and refer them to diabetes prevention programs, 2) identify patients with hypertension and/or high blood cholesterol; 3) implement team based care from patients with chronic conditions; 4) implement self-measured blood pressure monitoring. -Number of CHWs covered under state efforts to expand CHW curricula and training delivery vehicles, CHW certification systems, and CHW payment mechanisms.</p> <p>-Proportion of people with diabetes that have their condition under control (A1C&lt;9). -Proportion of participants in diabetes prevention programs that achieved their weight loss goal. -Proportion of adults with high blood pressure and/or high blood cholesterol who have their condition managed. Intensive evaluation is also conducted annually to measure the success of the program, ways the program can improve, and to demonstrate the impact of the program. Components included in the intensive evaluation include five key areas: approach, effectiveness, efficiency, sustainability, and impact.</p>

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4231	Cardio Vascular- Preventive Health Block Grant		Heart disease is the leading cause of death in Utah and hypertension is one of the leading risk factors for heart disease. Hypertension rates are increasing in Utah. The program was created to address cardiovascular disease in Utah.
LEJ	4232	Cardio Vascular- Preventive Health Block Grant		
LEJ	4233	Association of State and Territorial Health Officials Cardiovascular Health Collaboration	Heart disease is the leading cause of death in Utah and hypertension is one of the leading risk factors for heart disease. Hypertension rates are increasing in Utah. The program was created to pilot innovative approaches to improving hypertension control and reduce healthcare costs for treating patients.	Meeting and progress notes sent regularly to funder; performance tracking for pharmacies and other partners funded through the project.
LEJ	4235	Sup Domain 3 - Heart Disease		
LEJ	4236	Heart & Stroke Risk Factors - 1815		
LEJ	4237	Centers for Disease Control and Prevention Heart Disease		
LEJ	4238	Eppicc 1305 Basic Component Physical Activity, Nutrition, and Obesity		
LEJ	4239	Domain 3 - Diabetes		
LEJ	4240	Domain 4 - School Health		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4241	Diabetes Control - Federal		
LEJ	4244	Sup Domain 4 - Diabetes		
LEJ	4245	Chc Basic - School		
LEJ	4247	Centers for Disease Control and Prevention Diabetes		
LEJ	4248	HealthInsight Diabetes Prevention (National Diabetes Prevention Program)		
LEJ	4249	Domain 4 - Heart & Stroke		
LEJ	4250	Epiic 1305 Basic		
LEJ	4252	Cancer Genomic Best Practices	The program was created to meet the goals of the CDC Cancer Genomics Program in the state of Utah in order to develop best practices in genomics.	The UCGP has a robust evaluation process to measure program impact. We continue to grow our partnership and collaboration networks with community organizations, health systems, as well as other UDOH programs. We host an annual competitive Request for Proposals application to fund systems changes to meet program goals, and this year three new projects and established three additional formal partnerships. Through our Utah Cancer Genomics Surveillance System, we monitor the burden of hereditary cancers, as well as the knowledge, attitudes, and utilization of genetic services (including genetic counseling, genetic testing, and associated clinical services) associated with BRCA1/2 and Lynch syndrome.

Appropriatio	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4255	Diabetes/Heart & Stroke With State & Local Strategies - 1817		
LEJ	4257	Cancer Management, Leadership & Coordination		



Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4260	Heart & Stroke/Diabetes With State & Local Strategies - 1817	<p>Diabetes and hypertension are among the most common causes of mortality and morbidity in Utah. Diabetes in particular is an expensive disease to treat and manage, and hypertension is the leading risk factor for heart attacks and strokes. The program was created to develop innovative ways to help manage hypertension and diabetes among the adult population in Utah to reduce healthcare costs and reduce mortality due to these conditions.</p>	<p>Performance measures are collected annually to measure the impact of the program. Performance measures include: -Access to and participation in evidence based diabetes self management education programs and diabetes prevention programs throughout the state and in underserved areas. -Number of people reached by tailored communication/messaging to increase awareness of prediabetes. -Number of patients served by healthcare organizations with systems to 1) use bi-directional referral systems with lifestyle change programs; 2) improve health outcomes for people with diabetes; 3) promote early detection of chronic kidney disease; 4) identify patients with undiagnosed hypertension; 5) connect patients with chronic conditions to a CHW to link patients to community resources. - Number of people screened for diabetic retinopathy. - Proportion of people with diabetes that have their condition under control (A1C&lt;9). -Proportion of participants in diabetes prevention programs that achieved their weight loss goal. -Proportion of adults with high blood pressure and/or high blood cholesterol who have their condition managed. Intensive evaluation is also conducted annually to measure the success of the program, ways the program can improve, and to demonstrate the impact of the program. Components included in the intensive evaluation include five key areas: approach, effectiveness, efficiency, sustainability, and impact.</p>

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4261	Arthritis - Federal - Centers for Disease Control and Prevention	<p>The Healthy Aging Program (HAP) was created to provide access to high-quality, evidence-based programs that help others manage ongoing health conditions focused on physical and mental health. We work across Utah with partners in local governments, businesses, health care systems, community organizations, as well as with patients and caregivers in addition to coordinating the Utah Alzheimer's Disease and Related Dementias State Plan.</p>	<p>The Healthy Aging Program uses a mix of process and outcome measures in order to track success. For long-term outcomes, the HAP analyzes data for adults with arthritis and their caregivers from the Behavioral Risk Factor Surveillance System (BRFSS). BRFSS outcome measures are focused on both health behaviors and best practices for the management of arthritis (e.g. physical activity levels, participation in evidence-based self-management workshops, providers recommending their patients be physically active) and health outcomes/quality of life (e.g. self-rated health, level of pain). The BRFSS measures are further analyzed by demographic groups and geographic locations to track success among targeted groups and priority areas. As many factors contribute to the health of Utahns, more proximal and process measures are used to gauge HAP efforts and impact. These measures include the reach and acceptability of evidence-based programs statewide and for disparate, target groups, and the reported impact of the program on participants (e.g. confidence to manage conditions, levels of isolation, self-rated health, etc.). There is an Evaluation and Performance Measurement Plan for the arthritis outcome and process measures, evaluation plans, and quality improvement processes. This plan can be shown during our meeting.</p>
LEJ	4263	Arthritis Administration on Aging		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4264	Arthritis Chronic Pain Self Management	<p>The purpose and scope of the project from August 2017 - July 2020, included two primary approaches to target older adults and adults with disabilities. First, the prescription opioid epidemic was addressed in partnership with Intermountain Healthcare (IHC), the Violence and Injury Prevention Program (VIPPP), and other stakeholders from our Living Well Coalition (LWC) to offer the only community self-management program available for physician referrals to target those suffering from prescription opioid misuse. Second, we coordinated with Utah State University's Center for Persons with Disabilities (USUCPD), to reach persons with disabilities utilizing one of three classes including the Chronic Pain Self-Management Program (CPSMP), Living Well with a Disability (LWD), later rebranded as the Living Well in the Community (LWCommunity) program, and Better Choices, Better Health (BCBH).</p>	

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4265	Administration on Aging Arthritis	To achieve these goals, this project took a three-fold approach. First, to expand access, the UAP piloted an intensive CDSME expansion into rural communities by partnering with Central Utah Public Health Department (CUPHD). Second, coordinated with Comagine, the state's Quality Improvement Organization (QIO), to build a reimbursement model viable in Utah and obtain healthcare buy-in for systematic physician referrals. Third, expand the Enhance Fitness program statewide, which has shown to be highly successful in terms of reach and retention in Salt Lake City. This focused approach to self-management education expansion will also empower the UAP to transition the current partners in its Evidence-Based Program Network (EBPN) to sustainability by moving them off state funds, while still providing support needed for robust EBP implementation.	

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4271	Asthma-Federal	To decrease asthma-related emergency department visits and improve quality of life for individuals with asthma. We increase access to comprehensive asthma control services by building linkages to guidelines-based healthcare, asthma self-management education, housing remediation services, and community services that address social determinants of health.	Outcome data is collected for individuals that receive asthma self-management education (AS-ME) including emergency department visits, hospitalizations, asthma control test scores, and missed school and work days. In addition, we have developed a strategic evaluation plan that outlines evaluation and continuous quality improvement (CQI) projects to assess program services. The strategic evaluation plan is developed with community stakeholders, and each individual evaluation is conducted by both internal and external stakeholders. For each evaluation, we define the criteria of success and the tools and methods that will be used to measure progress towards these criteria. Performance Measures collected include: 1. Number and percentage of core measures updated, analyzed and disseminated/used during the reporting period; 2. Documented activities of the recipient, and outcomes achieved, to establish and/or expand linkages between components of the EXHALE technical package at the organizational level; 3. Number and description of existing, new, and discontinued services supported by recipient and partners, by geographic area and intervention type; and alignment of services with high burden geographic areas; 4. Documented improvements in the quality of care or health outcomes as a result of CQI initiatives; 5. Actions taken or decisions made during the reporting period to improve program activities and increase program effectiveness as a result of evaluation findings; 6. AS-ME Completion Rates; 7. Improvement in
LEJ	4273	Northeast Genomics Project		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4285	Worksite Lactation Accommodation	Association of State and Territorial Health Officials (ASTHO) offered competitive funding to states to increase equitable opportunities for breastfeeding women. Utah passed funding along to worksites to create or improve lactation rooms at businesses.	Funded employers shared improvements made to lactation accommodations along with their current lactation policies.
LEJ	4287	Physical Activity, Nutrition, Obesity - 1807	This funding was based on a competitive application from the Centers for Disease Control and Prevention to fund states to increase policies around nutrition, breastfeeding and physical activity.	Performance measures are collected annually to measure the impact of the program. Performance measures include: -Number of hospitals that have implemented evidence-based maternity care practices and policies. - Number of worksites that fully implement the federal lactation accommodation law. -Number of early childcare education (ECE) centers that are impacted by 1) ECE standards added or enhanced; 2) new or enhanced system-level supports. -Number of community sites and worksites with implemented food service guidelines. - Number of 1) linear miles connecting everyday destinations and 2) new or enhanced sites connected by activity-friendly routes which were built as a result of new or improved plans or policies. Intensive evaluation is also conducted annually to measure the success of the program, ways the program can improve, and to demonstrate the impact of the program.
LEJ	4289	Student Vision Screenings	This program was created in 2018 in response to legislation requiring vision screenings in school settings.	All children are screened for vision issues and referred to a health care provider as necessary.

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4290	Local Health Department Physical Activity, Nutrition, and Obesity Prevention Blk	This funding is flexible funding from the Centers for Disease Control and Prevention that has been traditionally used to fund local health departments to supplement other federal funds for physical activity, nutrition and obesity efforts. Over the past few years, the focus was changed to align with the Utah Health Improvement Plan priorities, and then further changed to move upstream to Social Determinants of Health.	-Reduced the proportion of children and adolescents who are considered obese. -Decrease the percent of Utah children, grades K-6th grades, who are overweight by 17%, from 20.4% to 17%. -Increase the percent of adolescents who are physically active at least 60 minutes per day from 19.7% to 19.9%. -Number of worksites that revise, develop and/or adopt policies or formal communications to implement nutrition policies.
LEJ	4292	Nutrition Physical Activity, Obesity Tobacco Settlement	This state funding has supported work in schools around obesity and related chronic conditions.	Overall the funding is used to support its intent, to combat childhood obesity. Reduction in childhood obesity, increased number of policies related to reducing childhood obesity. Both the School Nurse Consultant and the EPICC intern have metrics that determine whether they are successful in their job responsibilities.
LEJ	4295	Student Asthma Relief	This program was created due to legislation requiring training for and availability of emergency inhalers at all schools.	All schools stock emergency inhalers and have staff trained to administer them to students when needed.

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4297	Centers for Disease Control and Prevention Obesity		
LEJ	4299	Domain 2 - School Health		
LEJ	4320	Local Health Department Violence And Injury Prevention Program Prevention Block		
LEJ	4321	Injury Prevention Maternal and Child Health	To provide violence and injury prevention strategies for children and their mothers.	Decrease in childhood injuries. Decrease in bullying. Decrease in students injured at school. Decrease
LEJ	4323	Violence And Injury Prevention Program Competitive Projects - Preventive Health Block Grant	To provide support and funding to local health departments to prevent injury in their communities.	Decrease in injuries by local health district.
LEJ	4324	National Violent Death Review	To conduct surveillance of violent death incidents in Utah. Violent deaths include homicide, suicide, some undetermined deaths, and all firearm related deaths.	Timely and accurate data is collected, analyzed and shared widely.



Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4325	Child Fatality Review	Each year about 450 children ages 0-18 die in Utah. In response to these deaths, an interagency Child Fatality Review Committee (CFRC) was established by the Utah Department of Health in 1992. The CFRC was charged with the review of the circumstances and cause of all childhood deaths in the state. The purpose of the CFRC is to develop a better understanding of child deaths in order to reduce the number of intentional and unintentional deaths of Utah children.	Reduction in child deaths. Increased awareness of the risk factors associated with child death.
LEJ	4326	Utah Evidence-Based Falls Prevention		
LEJ	4327	Prescription Drug Overdose Death Prevention		
LEJ	4328	Community Injury Prevention	To provide funding to local health departments to conduct injury prevention in their health districts. LHD's are required to address one or more of the following in their strategic plans: 1. Policies and programs shown to improve access to care including behavioral health care. 2. Policies and programs shown to change harmful social norms . 3. Policies and programs shown to increase economic stability 4. Policies and programs shown to increase connectedness. 5. Policies and programs that enhance the physical environment to improve injury or violence outcomes	LHD's will evaluate their prevention programs to ensure that the activities they focus on have the expected outcome.

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4329	Rape Crisis Center- Preventive Health Block Grant	This is required, congressional, set-aside, block-grant funding for rape prevention.	Prevention activities are taking place in communities across Utah
LEJ	4330	Rape Prevention Education	This is federal formula funding given to all states to implement strategies to prevent sexual violence. Goals of the program are: 1. Advance social norms that support healthy, respectful relationships throughout the lifespan 2. Advance policies that 1) reduce the risk of victimization and perpetration of sexual violence, and/or 2) increase factors that protect against victimization and perpetration. 3. Provide funding and support at least 14 RPE-funded organizations using a public health approach	A robust evaluation plan was developed for this program and outcome indicator measures identified to measure short, intermediate, and long-term outcomes.
LEJ	4331	Rape Prevention - State	The program was created through a legislative appropriation of TANF reserve funds in response to a request from community partners working in sexual violence prevention in Utah.	It is very difficult to measure outcomes of this program as it is one-year funding that is historically delayed in finalizing contracts. Grantees only have about 9 months to implement their programs and evaluate them and often have a tough time expended the full allocation.
LEJ	4332	Harold Rogers Prescription Drug Monitoring Program		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4334	Alcohol Epidemiology Capacity	To address Utah's high frequency and intensity of binge drinking and high rate of alcohol poisoning deaths.	Evaluation is part of the program. It is expected that the objectives and activities will have the intended effect of decrease excessive alcohol use and related harms in Utah
LEJ	4335	Council of State and Territorial Epidemiologists Substance Abuse Indicators		
LEJ	4342	Baby Your Baby Media Campaign		
LEJ	4345	Baby Your Baby Outreach-Medicaid	This program was created in 1988 as a campaign to encourage all pregnant women to seek early and regular prenatal care in an effort to decrease the infant death rate in Utah.	Low birth weight rate measure, increase in early and adequate prenatal care measure. Commercial views, social media interaction.
LEJ	4348	Baby Your Baby - Children's Health Insurance Program Title 21 Federal	When CHIP began, leadership looked to Baby Your Baby who had current staff successfully answering public calls about Medicaid. CHIP paid for one staff to join Baby Your Baby. An additional staff member was added when PCN and UPP began and CHIP calls increased.	Number of calls, number of successful links with the national hotline.
LEJ	4349	Health Resource Center	This program was created to answer the phone calls for Baby Your Baby and later, many other UDOH programs.	Number of calls, number of enrollments in Baby Your Baby and Breast & Cervical Cancer
LEJ	4350	Violence Prevention Integration	To implement, evaluate and disseminate strategies that address injury and violence issues including: child abuse and neglect, traumatic brain injury, motor vehicle crash injury and death, and intimate partner/sexual violence.	An evaluation plan has been developed and is being implemented to measure success and outcomes of the prevention strategies.

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4351	Violence Prevention Surveillance		
LEJ	4353	Spinal Cord and Brain Injury Fund Administration		
LEJ	4355	Drug Poisoning Prevention	To address the gaps in opioid prevention efforts that could not be addressed with federal funding.	Decrease in opioid overdose deaths. Increased naloxone distribution.
LEJ	4357	Drug Abuse & Misuse Prevention		
LEJ	4357	Drug Abuse and Misuse Prevention		
LEJ	4358	Naloxone Jag		
LEJ	4359	Rescue Meds In School	This state funding was established to create a training program for lay personnel to administer seizure rescue medication under certain conditions at schools.	Rescue medication is administered appropriately under emergency conditions.
LEJ	4360	Component 1 - Heart Disease		
LEJ	4361	Component 1 - Diabetes		
LEJ	4363	Component 2 - Heart Disease		
LEJ	4364	Component 2 - Diabetes		
LEJ	4370	Comprehensive Tobacco Centers for Disease Control and Prevention - Competitive Component		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4373	Tobacco Youth	<p>These are supplemental state dollars which are used to support primarily the media campaign. However, funding has been used to support program evaluation and a portion of some staff time.</p>	<p>To monitor the success of TPCP programs, the TPCP uses an evaluation planning matrix (EPM). The EPM tracks short-term, intermediate, and long-term objectives under the TPCP goal area of preventing youth tobacco use. TPCP interventions are adjusted if the EPM shows lack of progress in key outcomes. The EPM prevention objectives include: - Reducing youth cigarette smoking and other tobacco product use - Reducing youth vaping - Reducing experimentation with tobacco and vape products - Increasing quit attempts among youth tobacco or vape product users - Decreasing access to tobacco and vape products - Decreasing knowledge, attitudes, and intentions that are favorable to tobacco use</p>
LEJ	4375	Tobacco Media Campaign	<p>The UDOH has a contract with Medicaid through SEED money. Medicaid matches against media buys which are placed by the program media vendor which reached Medicaid clients.</p>	<p>The TPCP monitors the success of its media campaign through rigorous formative testing of media messages and regular outcome evaluations. Formative testing focuses on perceived effectiveness of anti-tobacco media messages before campaigns are finalized. The outcome evaluations track overall ad awareness, links between ad awareness and quit intentions, and quit service utilization.</p>

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4377	Tobacco Tax - Restricted Revenue	<p>A tobacco tax is one of the most effective approaches and best practices in reducing tobacco use rates, particularly when the money from the tax goes back to prevention and public health. The number of cigarette packs sold in the state have declined by 70% since 1990, in-part due to increases in cigarette taxes.</p>	<p>The TPCP uses an Evaluation Planning Matrix (EPM) as the basis for its comprehensive evaluation and performance measurement plan. The EPM follows the TPCP goal areas of prevention, cessation, and elimination of secondhand smoke exposure and disparities. It tracks TPCP activities in each of these areas as well as outputs and short-term, intermediate, and long-term objectives related to each activity. EPM indicators are updated and reviewed annually in TPCP meetings and shared with partners as needed. TPCP work plans are adjusted to ensure that objectives are met.</p>
LEJ	4378	Comprehensive Tobacco Centers for Disease Control and Prevention	<p>This Funding Opportunity and related Program supports the achievement of four National Tobacco Control Program (NTCP) goals to 1) Prevent initiation of commercial tobacco use among youth and young adults; 2) Eliminate exposure to secondhand smoke (SHS); 3) Promote quitting among adults and youth; and 4) Identify and eliminate tobacco-related disparities. Achievement of these goals will reduce chronic disease morbidity, mortality, and disability related to commercial tobacco use and dependence and SHS exposure in Utah.</p>	<p>The TPCP works closely with the CDC, local health departments, the TPCP disparities networks, the media contractor, and the quitline contractor to determine and track performance measures and evaluations for activities/projects outlined in the comp tobacco CDC grant. These measures and evaluations form a subset of indicators included in the TPCP's comprehensive Evaluation Planning Matrix.</p>

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4379	Tobacco Settlement-State	On November 23, 1998, the attorneys general from 46 states, including Utah, agreed to a settlement with the five major tobacco companies. The significant points of the settlement involve annual payment to the states, the elimination of marketing geared toward young people, the limitation of corporate sponsorships, and the prohibition of the companies' lobbying state and local governments. The amount each state receives from the total settlement is based on a formula agreed upon by the attorneys general. In return, the tobacco companies now have the assurance that all pending lawsuits against them will be dropped and no new suits will be filed. The settlement contains no requirements on how the funds must be used. Distribution of payments is based on percentages agreed upon by the states' attorney generals as listed in the MSA. Utah's allocation is 0.44%.	The TPCP uses an Evaluation Planning Matrix (EPM) as the basis for its comprehensive evaluation and performance measurement plan. The EPM follows the TPCP goal areas of prevention, cessation, and elimination of secondhand smoke exposure and disparities. It tracks TPCP activities in each of these areas as well as outputs and short-term, intermediate, and long-term objectives related to each activity. EPM indicators are updated and reviewed annually in TPCP meetings and shared with partners as needed. TPCP work plans are adjusted to ensure that objectives are met.
LEJ	4381	Cannabinoid Product Board	To collect and review scientific research related to the human use of cannabis and to develop guidelines for treatment with cannabis.	When the CPB completes reviews of scientific research related to the human use of cannabis and updates its guidelines for treatment with cannabis with new information collected from those studies.
LEJ	4382	Vaping/Lung Disease Education	This funding was provided strictly for the EVALI emergency response. It's use was primarily to cover staff hours, activities and media efforts to prevent and EVALI epidemic.	While it is possible that some cases of EVALI still occur, the emergency situation that existed in 2019 no longer exists. Program efforts were successful in bringing an end to the epidemic in Utah.

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4387	Tobacco Prevention Non Lapsed	<p>This unit is used for supplemental non-lapsing funding that is allocated to the program through the Division.</p> <p>This unit is not always used, but typically we do have funds in this unit.</p>	<p>The TPCP monitors the success of its media campaigns through rigorous formative testing of media messages and regular outcome evaluations. Formative testing focuses on perceived effectiveness of anti-tobacco media messages before campaigns are finalized. The outcome evaluations track overall ad awareness, links between ad awareness and quit intentions, and quit service utilization.</p>



Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4388	Quitline Sustainability	<p>Improve quitline infrastructure to streamline intake, enhance services, absorb increases in demand, and accept e-referrals. Enhance quitline sustainability by increasing partnerships to diversify funding and working with private/public insurers and employers to provide or reimburse the cost of barrier-free quit support services. Conduct strategic efforts to increase awareness of quit support services to providers, tobacco users, and populations experiencing tobacco-related disparities (e.g., Medicaid) using culturally-appropriate protocols, channels, and messages to increase quitlines use and referrals.</p>	<p>The success of Utah's Tobacco Quit Line is monitored through weekly, monthly, and annual reports that include measures of service use by type of service, by user demographics, as well as measures of consumer satisfaction, quit attempts, and successful quits. In addition, the TPCP conducts annual "secret shopper" events to gather qualitative information on quit service use experiences for different population groups. To evaluate Utah's Commercial Tobacco Use and Dependence Treatment Support System, TPCP epidemiologists work closely with the TPCP quitline liaison and the quitline service provider to collect intake data, service utilization data, and 7-month follow-up data. Inform and educate private and public health systems, including medical and dental providers; health insurers; and employers about how quitting tobacco use reduces tobacco-related disease and death, and health care costs.</p>
LEJ	4391	Sexual Assault Prevention		
LEJ	4393	Primary Violence Prevention		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4394	Alzheimer's Statewide Education	<p>Following the funding of the Alzheimer's Disease and Related Dementias (ADRD) State Plan, there was a need for funding to complete the goals and objectives within the plan. DOH ADRD State Plan Specialist worked with partners including the Alzheimer's Association along with the DHS Division of Aging and Adult Services and members of the ADRD Coordinating Council worked to have funding appropriated to support the ADRD State Plan.</p>	<p>The ADRD program monitors the State Plan and objectives to ensure they are being met. Each overarching goal has a dedicated workgroup that meets bi-monthly to discuss the goal and its objectives and work toward meeting the objectives. This is monitored closely and reported to the Coordinating Council annually. BRFSS data is also obtained through the utilization of the Cognitive Decline and Caregiver modules provided by CDC. Annual Wellness Visit billing codes are reported by Comagine Health for our tracking purposes as well. Reports are created using this data and shared with partners.</p>
LEJ	4396	Healthy Brain Initiative - Alzheimer's Association		

Appropriation	Unit	Program	Why was the program created?	How do you know if you are being successful?
LEJ	4397	Alzheimer State Plan	<p>The program was created with the assistance of the Alzheimer's Association, Utah Chapter to address the stigma and hardships of dementia on the community. Supports were needed to provide assistance for those with the diagnosis and their caregivers. The ADRD was created with stakeholders statewide. Four goals were created within the state plan with supporting objectives. The four goals are: 1- Create a dementia-aware Utah; 2- Create a dementia competent workforce; 3- Enable supported and empowered caregivers; and 4- Expand dementia research in Utah. The original state plan was developed in 2012 and did not have any funding attached. In 2015 the Alzheimer's Association worked with Representative Paul Ray to secure funding to assign the ADRD State Plan to the Department of Health because 85% of the objectives within the state plan were within the Department of Health parameters. This funding was used to hire a full time ADRD State Plan Specialist, create and facilitate the Coordinating Council and work to meet the goals and objectives within the state plan.</p>	<p>The ADRD program monitors the State Plan and objectives to ensure they are being met. Each overarching goal has a dedicated workgroup that meets bi-monthly to discuss the goal and its objectives and work toward meeting the objectives. This is monitored closely and reported to the Coordinating Council annually. BRFSS data is also obtained through the utilization of the Cognitive Decline and Caregiver modules provided by CDC. Reports are created using this data and shared with partners. CDC published the Healthy Brain Initiative Roadmap and Utah was highlighted (<a href="https://www.cdc.gov/aging/pdf/2018-2023-Road-Map-508.pdf">https://www.cdc.gov/aging/pdf/2018-2023-Road-Map-508.pdf</a>) on page 50.</p>
LEJ	4398	Prevention Block Administration	<p>PHHS BG funds are allocated to those health concerns that have no other source of state or federal funds or wherein combined state and federal funds are insufficient to address the extent of the problem. More than 80% of PHHSBG funds are allocated to local agencies.</p>	<p>Selected population health indicators from Healthy People 2030 are trending positively.</p>
LEJ	4399	Parkinson's Disease Registry		

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>Why was the program created?</b>	<b>How do you know if you are being successful?</b>
LEK	1401	Medical Examiner	Elimination of the coroner system in Utah in the 1960s. Allowed for implementation of a statewide medical examiner system in place of individual county coroners.	Completion of autopsy and examination reports in 90% of cases under jurisdiction within 60 days. Timely response to scenes. Completion of investigative reports and follow-up to allow for completion of reports as noted above.
LEK	1402	Medical Examiner Body Transportation	Pays for costs of transportation of cases to and from the OME in Salt Lake county. Removes financial costs from family to the ME system.	Timely removal of decedents under OME jurisdiction from the scene of death and subsequent timely transportation to the OME if examination is required.
LEK	1404	Office of the Medical Examiner Investigators	Vendor investigators are used throughout the state in all jurisdictions not served by full-time or part-time investigators to respond to deaths under OME jurisdiction, gather information, write an initial report and arrange for transportation of the body (when required) to the OME.	Vendor investigators are able to provide timely initial death investigation and arrange for transportation of the decedent to the OME.
LEK	1405	New Office of the Medical Examiner Building Equipment		
LEM	4259	Skin Cancer Donations		
LEO	3850	Opiate Overdose Response		
		<b>Grand Total</b>		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
5820	5820	Qualified Patient Enterprise Fund	The CMC helps ensure that qualifying patients have access to medical cannabis under the supervision of a qualified medical provider and a pharmacist.	No other entity legally under state law provides this function. There are many illegal entities that provide similar functions.

Appropriatio	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
2251	4339	Traumatic Brain and Spine Rehabilitation	These intensive services can make a dramatic difference in the ability to be independent for Utahns with TBI's. Insurance normally pays for just a fraction of the services Utahns with TBI's need to become independent. Without this funding these services or Utahns would not happen.	None
2250	4354	Traumatic Brain Injury Fund	The TBI Fund is a payor of last resort, meaning individuals have no other financial means available to obtain these services. These services are shown to increase the individual's ability to be independent. Without this funding, these patients would be unable to receive these services decreasing their ability to be independent.	None
LXA	4452	Immunization Federal - Provider Vaccine	Please see response in LEH 4452	Outside entities including local health departments, for profits clinics and providers, and non profit clinics and providers are the direct recipients of these vaccines.
LLA	3811	Local Health Department General Fund Block Grant	Funding addresses underlying issues by ensuring a base capacity for epidemiology at the local level	Some of these functions can be provided at the state level, but local capacity is critical to statewide coverage. It is critical to public health infrastructure that this capacity is maintained at the local level for a comprehensive coverage and approach.

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>How does the program focus on treating the underlying issue?</b>	<b>What other entities (government, private, non-profit, etc.) perform</b>
LEA	3102	Division GRAMA Clearing Acct		
LEA	3103	Administrative Clearing		
LEA	3105	Director's Office		None, specific to Division Administration
LEA	3106	Division Support Services		None, Specific to Division Financial Support
LEA	3107	Lab Director's Office	Support of laboratory operations	none, specific to laboratory operations
LEA	3110	Laboratory Finance Office	not applicable	There are other finance staff within the department, but we are the only ones assigned to the Utah Public Health Laboratory.
LEA	3113	Operations & Maintenance - New Lab	Not applicable, as this unit was set up for that one expense that is transferred each year	Not applicable, as this unit was set up for that one expense that is transferred each year

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEA	3151	Utah Public Health Lab Non Lapsing Capital	not applicable	This is the only unit that is used for tracking the lab's non-lapsing funding each year.
LEA	3180	Lab Information Technology Projects	not applicable	none, specific to laboratory operations
LEA	3182	Lab Epidemiology Projects		
LED	3210	Environmental Testing Administration	provides monitoring and sample analysis.	Commercial laboratories, no public service providers.
LED	3214	Chemistry Special Projects		
LED	3215	Organic Chemistry	compliance with drinking , organic disinfection by-products monitoring , harmful algae bloom monitoring (rivers, lakes), Lab is ready for Per- and polyfluoroalkyl substances (PFOA , PFOS) compounds contamination monitoring.	Commercial laboratories.
LED	3216	Radiation Chemistry		
LED	3218	Environmental Microbiology	compliance with drinking water monitoring requirements. 40 CFR part 141 and 40 CFR part 131 requirements.	E.coli total coliform tested by commercial sources; no commercial source for legionella.
LED	3220	Inorganic Chemistry	compliance with drinking water and clean water ACT requirements. 40 CFR part 141 and 40 CFR part 131 requirements.	commercial laboratories.



Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LED	3225	Metals/Radio Chemistry	compliance with drinking water monitoring requirements and clean water act monitoring. 40 CFR part 141 and 40 CFR part 131 requirements.	commercial laboratories.
LED	3235	Four Corner States Environmental Monitoring		
LED	3285	Forensic Toxicology Administration	The Tox Lab provides forensically defensible test results (reports) that document measured drugs and/ alcohol in biological matrices. These results are used in the prosecution of DUI and sexual assaults, driver license hearings and also used as diagnostic tools to determine manner and cause of death. Aggregate data generated by the laboratory are also used to analyze drug/alcohol use trends on Utah Roads, the frequency of drug facilitated sexual assault, and emerging trends in drug related overdoses.	There are no private, government, non-profit labs within Utah (to the best of my knowledge) that provide the same level of service as the Tox Lab (forensic testing with NO direct billing to LE/OME agency, direct reporting, aggregate data sharing, expert witness service at no hourly charge, etc.) Each state has a laboratory similar to Utah with varying degrees of service. There are also several for-profit commercial reference laboratories in the U.S. that provide fee-for-service based testing and hourly rate based expert witness/ consulting services.
LED	3286	Law Enforcement/Office of the Medical Examiner Toxicology	Combined - See 3285	Combined - See 3285
LED	3288	Motor Vehicle Death Legislation Funds		
LED	3294	Coverdell Grant	Combined - See 3285	Combined - See 3285

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LED	3310	Laboratory Operations Administration	Support of laboratory operations	none, specific to laboratory operations
LED	3311	Lab Central Lab Support	Support of laboratory operations	none, specific to laboratory operations
LED	3312	Lab Central Supply Cleaning	Not applicable	None, specific to laboratory operations
LED	3330	Safety/Quality Assurance/Training	focus is on employee safety	similar to all operations in each state building. OSHA and Risk Management requirements are universal
LED	3335	Specimen Processing		
LED	3410	Newborn Screening Administration	support NBS program operations	None, administrative oversight is necessary to ensure compliance with the state statute and rule.

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LED	3415	Newborn Screening Program	Focus is follow-up of abnormal screen results. Follow-up staff notify healthcare providers and families of next steps when additional testing is necessary or emergent clinical consultation is required.	Alternative service providers include PerkinElmer Genetics (PA) as well as potentially other state NBS programs for the lab testing portion. Alternative services would not work well for the follow-up portion of NBS since the community connections and trust would be missing
LED	3417	Newborn Screening Non-Lapsing	it is really a band-aid. A systemic solution is missing.	alternative service providers include PerkinElmer Genetics (PA) as well as potentially other state NBS programs
LED	3418	Centers for Disease Control and Prevention Grant For Implementation of Mucopolysaccharidosis type I, Pompe & X-linked adrenoleukodystrophy		
LED	3421	Newborn Screening/Non-Department of Health Providers	yes; performance metric includes number of missed cases.	PerkinElmer Genetics (PA) and other state programs
LED	3422	Newborn Screening Info Systems	the funding provided capital resource to address outdated IT infrastructure that could not have been addressed through kit fees	N/A
LED	3424	Severe Combined Immunodeficiency Newborn Testing		

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>How does the program focus on treating the underlying issue?</b>	<b>What other entities (government, private, non-profit, etc.) perform</b>
LED	3425	Infectious Diseases Administration	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.
LED	3426	Virus Isolation Projects		
LED	3427	Immunology & Virology Testing	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.
LED	3427	Immunology and Virology Testing		
LED	3430	Bacteriology	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.
LED	3442	Tuberculosis Federal	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>How does the program focus on treating the underlying issue?</b>	<b>What other entities (government, private, non-profit, etc.) perform</b>
LED	3443	Tuberculosis-General Fund	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.
LED	3450	Molecular Testing	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.
LED	3460	Pulsenet	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.
LED	3461	Lab Arboviral	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.
LED	3462	Rabies		
LED	3463	Lab Capacity	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>How does the program focus on treating the underlying issue?</b>	<b>What other entities (government, private, non-profit, etc.) perform</b>
LED	3464	Grant-National Antimicrobial Resistance Monitoring System	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.
LED	3465	Lab Flu	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.
LED	3466	Lab Capacity	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.
LED	3466	Epidemiology, Laboratory Capacity - Lab Capacity		
LED	3467	Ebola Lab and Biosafety		
LED	3468	Advanced Molecular Detection		
LED	3469	Foodcore Lab	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LED	3470	Healthcare Associated Infection & Antimicrobial Resistance Lab Capacity		
LED	3471	Non-Flu Diagnosis & Testing		
LED	3472	Ebola, Lab & Biosafety		
LED	3473	Lab Arboviral		
LED	3474	Zika Supplemental Pers		
LED	3475	Epidemiology-Lab Capacity COVID-19 - Lab	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.
LED	3490	Epidemiology Influenza Incidence Surveillance	New test validation, capacity building, addressing logistic roadblocks	Surveillance and outbreak response is typically performed by Public Health Laboratories. Some overlap exists with clinical testing performed by private clinical labs in areas such as: STD, blood borne pathogens, TB.
LEE	3315	Environmental Lab Certification	The programs ensure that data of known and documented quality is submitted by the laboratory for compliance.	US EPA requires that laboratories performing drinking water analysis must be certified by a state accreditation body. For a state to maintain drinking water primacy the state must operate a certification program.
LEE	3316	Blood/Alcohol Testing		

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>How does the program focus on treating the underlying issue?</b>	<b>What other entities (government, private, non-profit, etc.) perform</b>
LEE	3320	Clinical Laboratory Improvement Amendments Grant	The program focuses on patient safety by providing guidance and surveying all laboratories performing testing on human specimens in the state.	There are private and non profit agencies that assess laboratories such as CAP and COLA. The CLIA program works with these programs and performs a certain number of validation surveys each year to confirm their acceptance. CLIA is a federally mandated program.
LEH	3501	Immunization Prevention and Public Health Fund		
LEH	3503	Local Health Emergency Fund		
LEH	3505	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Treatment & Care		
LEH	3506	Student Vaccination Exemption		
LEH	3508	Hepatitis A Vaccine Support For 2017/2018 Outbreak		
LEH	3510	Bureau of Epidemiology Administration		
LEH	3511	Epidemiology Non-Lapsed		
LEH	3512	Regional Epidemiologist		



Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3513	Human Immunodeficiency Virus Ryan White Part B Supplemental	<p>Program provides medical and non-medical case management. Case management is a proven tool to ensure people remain in care and are adherent to HIV treatment. Case managers conduct in-depth and client-centered assessments to determine underlying issues that are presenting barriers to remaining in care and adherent to treatment. The case manager then works with the client to resolve these barriers. In addition, the Program offers other core and support services, such as emergency financial assistance, oral health services, medical transportation, etc., to address underlying issues.</p>	<p>University of Utah Hospital Infectious Diseases Clinic is the Ryan White Part C and D recipient. Ryan White Part C and D services have slight overlap in services offered by Part B. Part B works collaboratively with the Part C and D Program to ensure services are not duplicated. Part C and D funding is significantly lower than Part B funding and services are more limited than Part B.</p>

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3517	Ryan White Title II	<p>Program provides medical and non-medical case management. Case management is a proven tool to ensure people remain in care and are adherent to HIV treatment. Case managers conduct in-depth and client-centered assessments to determine underlying issues that are presenting barriers to remaining in care and adherent to treatment. The case manager then works with the client to resolve these barriers. In addition, the Program offers other core and support services, such as emergency financial assistance, oral health services, medical transportation, etc., to address underlying issues.</p>	<p>University of Utah Hospital Infectious Diseases Clinic is the Ryan White Part C and D recipient. Ryan White Part C and D services have slight overlap in services offered by Part B. Part B works collaboratively with the Part C and D Program to ensure services are not duplicated. Part C and D funding is significantly lower than Part B funding and services are more limited than Part B.</p>

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3518	Ryan White Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Program Part B COVID-19 Response	<p>Program provides medical and non-medical case management. Case management is a proven tool to ensure people remain in care and are adherent to HIV treatment. Case managers conduct in-depth and client-centered assessments to determine underlying issues that are presenting barriers to remaining in care and adherent to treatment. The case manager then works with the client to resolve these barriers. In addition, the Program offers other core and support services, such as emergency financial assistance, oral health services, medical transportation, etc., to address underlying issues.</p>	<p>University of Utah Hospital Infectious Diseases Clinic is the Ryan White Part C and D recipient. Ryan White Part C and D services have slight overlap in services offered by Part B. Part B works collaboratively with the Part C and D Program to ensure services are not duplicated. Part C and D funding is significantly lower than Part B funding and services are more limited than Part B.</p>
LEH	3526	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Education		
LEH	3527	Human Immunodeficiency Virus Prevention Category C Project		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3532	Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome Surveillance Federal		
LEH	3537	Control & Prevention of Sexually Transmitted Diseases - H.B. 15		
LEH	3538	STD Surveillance Network (Ssun) Sexually Transmitted Disease Surveillance		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3545	Human Immunodeficiency Virus Ryan White Supplemental	<p>Program provides medical and non-medical case management. Case management is a proven tool to ensure people remain in care and are adherent to HIV treatment. Case managers conduct in-depth and client-centered assessments to determine underlying issues that are presenting barriers to remaining in care and adherent to treatment. The case manager then works with the client to resolve these barriers. In addition, the Program offers other core and support services, such as emergency financial assistance, oral health services, medical transportation, etc., to address underlying issues.</p>	<p>No other entities offer functions similar to the Utah AIDS Drug Assistance Program (ADAP).</p>

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3550	Ryan White Drug Rebate	<p>Program provides medical and non-medical case management. Case management is a proven tool to ensure people remain in care and are adherent to HIV treatment. Case managers conduct in-depth and client-centered assessments to determine underlying issues that are presenting barriers to remaining in care and adherent to treatment. The case manager then works with the client to resolve these barriers. In addition, the Program offers other core and support services, such as emergency financial assistance, oral health services, medical transportation, etc., to address underlying issues.</p>	<p>University of Utah Hospital Infectious Diseases Clinic is the Ryan White Part C and D recipient. Ryan White Part C and D services have slight overlap in services offered by Part B. Part B works collaboratively with the Part C and D Program to ensure services are not duplicated. Part C and D funding is significantly lower than Part B funding and services are more limited than Part B.</p>
LEH	3555	Tuberculosis State		
LEH	3560	Refugee Tuberculosis Wfs		
LEH	3561	H.B. 430 Genital Mutilation		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3562	Refugee Tuberculosis Wfs		
LEH	3563	Refugee Mental Health - Salt Lake County Funding		
LEH	3564	Refugee Mental Health		
LEH	3567	Tuberculosis Elimination		
LEH	3570	Pandemic Flu Planning		
LEH	3570	Refugee General		
LEH	3572	Refugee Gen Federal		

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>How does the program focus on treating the underlying issue?</b>	<b>What other entities (government, private, non-profit, etc.) perform</b>
LEH	3572	Refugee Pandemic Planning		
LEH	3584	Strengthening Surveillance of Hcv & Hbv Infections Grant		
LEH	3585	Human Immunodeficiency Virus Hepatitis		
LEH	3586	Viral Hepatitis Epidemiologic Profiles		
LEH	3587	Syringe Service Program		
LEH	3588	Fentanyl - Division of Substance Abuse and Mental Health		
LEH	3589	Comprehensive Syringe Exchange Plan		
LEH	3591	Sexually Transmitted Disease Federal Grant		
LEH	3704	Food and Drug Administration Po		



Appropriatio	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3706	Food Safety		
LEH	3707	Summer Food		
LEH	3708	Utah Risk Factor Study		
LEH	3717	Environmental Public Health Track		
LEH	3721	Health Care & Other Facilities For Utah - National Electronic Disease Surveillance System		
LEH	3723	Centers for Disease Control and Prevention Bio Sense		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3725	Environmental Epidemiology		
LEH	3734	Council of State and Territorial Epidemiologists Influenza Hospitalization Surveillance Project		
LEH	3742	Hepatitis Testing & Treatment		
LEH	3742	Hepatitis Testing and Treatment		
LEH	3744	Task Force For Global Health Ecr Implementation		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3746	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Administration	Robust testing with rapid reporting of results combined with prompt case investigation and contact tracing to ensure COVID-19 cases isolate and their contacts quarantine according to established guidelines, have been essential in mitigating COVID spread in Utah. Data collected from investigations has helped inform policy decisions and has also been essential in measuring the effectiveness of mitigation measures.	Within the Admin Program, contractual funds have been provided to local health departments to support local investigation and contact tracing capacity; robust capacity for surveillance, testing, investigation, and contact tracing throughout the public health system at the local and state level has been essential in ensuring adequate response capacity for COVID-19.

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3747	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Epidemiology	Robust testing with rapid reporting of results combined with prompt case investigation and contact tracing to ensure COVID-19 cases isolate and their contacts quarantine according to established guidelines, have been essential in mitigating COVID spread in Utah. Data collected from investigations has helped inform policy decisions and has also been essential in measuring the effectiveness of mitigation measures.	Local health departments (as noted under Admin in row 119, contracts are provided to LHDs through this funding to perform these critical activities)

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3749	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Utah Public Health Laboratory	Robust testing with rapid reporting of results combined with prompt case investigation and contact tracing to ensure COVID-19 cases isolate and their contacts quarantine according to established guidelines, have been essential in mitigating COVID spread in Utah. Data collected from investigations has helped inform policy decisions and has also been essential in measuring the effectiveness of mitigation measures.	Private laboratories
LEH	3751	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Mobile Testing	Robust testing with rapid reporting of results combined with prompt case investigation and contact tracing to ensure COVID-19 cases isolate and their contacts quarantine according to established guidelines, have been essential in mitigating COVID-19 spread in Utah. Data collected from investigations has helped inform policy decisions and has also been essential in measuring the effectiveness of mitigation measures. Maintaining Mobile Test Team capacity also mitigates equity concerns with testing resource availability. Team capacity at the state level can rapidly deploy to any area of the state without requiring local health departments alone to maintain testing capacity.	Private laboratories, TestUtah; some local health departments also have mobile testing capacity

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3755	Surv Atsor Appletree		
LEH	3758	Epidemiology-Lab Capacity - COVID-19		
LEH	3759	Cross-Cutting Outbreak Investigat, Resp & Reporting		
LEH	3760	Affordable Care Act Outbreak		
LEH	3761	Affordable Care Act Actc Elr		
LEH	3761	Health Information Systems - Pcv		
LEH	3762	Affordable Care Act Actc Elr		
LEH	3764	Legionella		
LEH	3765	Affordable Care Act West Nile Virus		
LEH	3765	Ep Arboviral		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3766	Affordable Care Act Foodcore		
LEH	3767	Affordable Care Act Healthcare Associated Infection		
LEH	3767	Epidemiology Healthcare Associated Infection Coordination/Prevention		
LEH	3772	Evaluation		
LEH	3773	Epidemiology Flu		
LEH	3774	Epidemiology Capacity		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3775	Epidemiology Capacity - Cap	Rapid detection and investigation of infectious disease cases and outbreaks allows for the mitigation of spread through prophylactic treatment, isolation, and quarantine. Identifying the source of infection (for example a contaminated food product) and removing it prevents additional illnesses. Also, routine surveillance helps us to understand what groups are being impacted most by infectious diseases and informs policy, education outreach, and other prevention measures.	Local health departments
LEH	3776	Affordable Care Act Pcv13 Cap		
LEH	3777	Affordable Care Act Mcv		
LEH	3778	Affordable Care Act Cre		
LEH	3780	Ebola Healthcare Associated Infection Assessment		
LEH	3781	Ebola Healthcare Associated Infection Prevention		
LEH	3782	Crosscutting - Enhanced Evaluation		
LEH	3783	Epidemiology Healthcare Associated Infection		
LEH	3783	Healthcare Associated Infection Prevention Infrastructure Pcv		
LEH	3784	Enhanced Prion Surveillance		



Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	3785	Epidemiology - National Electronic Disease Surveillance System		
LEH	3785	Healthcare Associated Infection State		
LEH	3786	Mycotics		
LEH	3787	Prevent Infection & Reduce Inter-Individual Transmission		
LEH	3788	Advance Interoperability Thru Healthcare Information Technology		
LEH	3789	Epidemiology Electronic Case Reporting		
LEH	3790	Epidemiology Zika Registry		

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>How does the program focus on treating the underlying issue?</b>	<b>What other entities (government, private, non-profit, etc.) perform</b>
LEH	3791	Nonflu Respiratory Diseases		
LEH	3792	Epidemiology Healthcare Associated Infection		
LEH	3793	Ep Arboviral		
LEH	3795	Enhanced Evaluation Capacity		
LEH	3796	Healthcare Associated Infection Coordination, Prevention & Stewardship		
LEH	3797	Zika Supplemental		
LEH	3798	Zika Supplemental Personnel		
LEH	3799	Vaccine Preventable Disease Surveillance		
LEH	3820	Infertility Study		
LEH	4131	Utah Statewide Immunization Information System State		

Appropriatio	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	4133	Utah Statewide Immunization Information System Private Donations		
LEH	4135	Utah Statewide Immunization Information System Prevention and Public Health Fund 2012 Capacity Building		
LEH	4136	Prevention and Public Health Fund 15 Interoperability		
LEH	4137	Utah Statewide Immunization Information System Enhancing System (Afix)		
LEH	4139	Utah Statewide Immunization Information System Supplemental		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEH	4451	Immunization Tsf		
LEH	4452	Immunization Federal		
LEH	4453	Prevention and Public Health Fund - Human Papillomavirus Vaccination		
LEJ	3800	Phc Crisis Response		
LEJ	3801	Phc Jurisdictional Recovery		
LEJ	3802	Phc Biosurveillance		
LEJ	3803	Phc Information Management		
LEJ	3804	Phc Countermeasures		
LEJ	3805	Phc Jurisdictional Recovery		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	3806	Utah Overdose Data To Action	<p>Providing more timely and informative data will allow Utah to better respond to outbreaks, focus prevention efforts, and allow for the program to continually improve. Prevention programs will allow for better monitoring of the Prescription drug monitoring programs, improving state and local integration, improving and enhancing linking patients to care, supporting health systems and providers, improving collaboration with partners, and empowering individuals to make healthy choices.</p>	None
LEJ	3814	Prescription Drug Data Quality Improvement	<p>Although various initiatives have been taken to implement the legal requirements to improve prescriber awareness of appropriate prescribing practices, no assessment has been conducted to understand the quality and accuracy of CSD data and make recommendations for improvement.</p>	None

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	3815	Public Safety & Public Health Info Partnerships	<p>The Department of Public Safety and UDOH have developed productive relationships in developing Utah's Drug Monitoring Initiative (DMI). The Utah Statewide Information and Analysis Center (SIAC) began working with other state agencies to identify a method to obtain overdose and death information, specifically targeting heroin overdoses. The SIAC is heading the establishment of a Drug Monitoring Initiative (DMI) within the State of Utah to assist in providing analytical support to law enforcement and health care service workers. The SIAC will establish processes to gather specific information regarding heroin use within the state, in coordination with the Utah Department of Health, Utah State Labs, Utah Poison Control Center, Utah Medical Examiner's Office and local/state law enforcement offices. The SIAC will build strong relationships with state agencies in order to identify significant increases in overdoses in specific areas within Utah in order to provide law enforcement and public health agencies the ability to focus efforts to the identified areas of concern.</p>	None
LEJ	3821	Utah Nonfatal Suicide Surveillance	<p>By identifying trends as well as risk and protective factors. By focusing efforts in high-risk populations. By using data to inform evidence-based strategies to prevent suicide.</p>	None

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	3825	Victims of Crime Public Awareness and Outreach	Less than 25% of victims of sexual assault report the crime to police. Many of these victims do not access services following the rape. This effort aims to increase the percent of victims obtaining services following an assault.	None
LEJ	3830	Utah Produce Incentives/Double Up Food Bucks	These programs focus on the primary prevention of chronic disease by addressing food insecurity. Decreasing the cost of fruits and vegetables makes it easier for low-income Utahns to make healthy eating choices.	We are the only entity overseeing implementation of Double Up Food Bucks in the state and the only entity that coordinates Produce Rx across multiple clinics
LEJ	3831	Utah Food Bucks	These programs focus on the primary prevention of chronic disease by addressing food insecurity. Decreasing the cost of fruits and vegetables makes it easier for low-income Utahns to make healthy eating choices.	We are the only entity overseeing implementation of Double Up Food Bucks in the state
LEJ	3840	Bewise Family Support (Association of State and Territorial Health Officials)		
LEJ	3841	Cancer Population Health Approaches		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	3852	Enhancing Surveillance of Opioid Mortality & Morbidity	Intended effect of enhancing surveillance of non-fatal and fatal opioid overdoses in Utah.	None
LEJ	3853	Falls Prevention (Prevention and Public Health Fund)	Increasing physical activity and improving social determinants of health are instrumental in preventing injury and death from falls. Falls are the leading cause of fatal injury and the most common cause of nonfatal trauma-related hospital admissions among older adults.	VIPP is the only program integrating falls prevention by addressing social determinants of health with older adults.
LEJ	3854	Stop The Opidemic Campaign		
LEJ	3855	Opioid Overdose Death Reduction		
LEJ	3856	Opioid Misuse & Overdose Prevention		
LEJ	3856	Opioid Misuse and Overdose Prevention		
LEJ	3857	Traumatic Brain Injury State Partnership Program Partner State Funding	Timely diagnosis of a TBI is important to improve health outcomes for Utahns who have sustained a TBI. A successful prevention program can help ward off poor health outcomes that come with a delayed diagnosis and delayed services.	None



Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	3858	Utah Drug Enforcement Administration 360 Program		
LEJ	3859	Essentials For Childhood	Risk for child abuse and neglect perpetration and victimization is influenced by a number of individual, family, and environmental factors, all of which interact to increase or decrease risk over time and within specific contexts. Protective factors are the factors that help build resiliency and protect against child maltreatment. This program identifies and targets the know risks or root causes of child maltreatment.	DCFS provides funding to community based organizations to implement strategies to prevent child maltreatment. VIPP works very closely with DCFS to align efforts and to measure similar outcomes.
LEJ	3860	Sudden Unexpected Infant Death	By improving understanding of the causes of infant death which will improve prevention strategies.	None
LEJ	3861	Sudden Death In Youth Surveillance	By improving understanding of the causes of child and adolescent sudden, unexpected, deaths.	None
LEJ	3862	Opiate Abuse Prevention Pamphlet		
LEJ	4211	Health Promotion Administration State	The Bureau of Health Promotion works diligently to reduce the leading causes of illness and death of Utahns through prevention, early detection, and management of injuries, chronic diseases and conditions, and promotion of early prenatal care in community, school, worksite, and health care settings.	None
LEJ	4212	A Healthier You		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4213	Youth Risk Behavior Survey-Federal	The Bureau of Health Promotion works diligently to reduce the leading causes of illness and death of Utahns through prevention, early detection, and management of injuries, chronic diseases and conditions, and promotion of early prenatal care in community, school, worksite, and health care settings.	The Division of Substance Abuse and Mental Health implement the Prevention Needs Assessment. The surveys are implemented together leveraging the same timing and resources.
LEJ	4216	School Health Consultant	From 2020 to 2021, MCH focused their grant efforts on moving upstream to focus on more SDoH issues, like equity related things including availability of school lunch and breakfast, family meals and bullying.	Get Healthy Utah and Select health offer some interventions in schools to increase physical activity: <a href="https://gethealthyutah.org/schools/#">https://gethealthyutah.org/schools/#</a> <a href="https://selecthealth.org/blog/2020/11/getting-kids-active-starts-online">https://selecthealth.org/blog/2020/11/getting-kids-active-starts-online</a>
LEJ	4217	Centers for Disease Control and Prevention School Health		
LEJ	4218	Health Promotion Activities	The Bureau of Health Promotion works diligently to reduce the leading causes of illness and death of Utahns through prevention, early detection, and management of injuries, chronic diseases and conditions, and promotion of early prenatal care in community, school, worksite, and health care settings.	None

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4219	Improving Health Disabilities	Stigma and exclusion are significant issues for the disability community. We are working to address this through increasing knowledge and awareness, adapting programs through the provision of technical assistance and support, and increasing our partnerships and increasing policy, system and environmental changes to create more inclusive and accessible opportunities for good health.	

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4220	WISEWOMAN (BeWise Program)	<p>CDC provides funding to local WISEWOMAN programs to enable qualifying women to receive free screenings and counseling about their risk for heart disease and stroke. Women are then supported as they participate in evidence-based lifestyle programs, individual health coaching, or referred to other community resources. The BeWise program ensures that eligible women can access these preventive health services and gain the wisdom, skills, and resources necessary to improve their health. The program works to increase the skills, knowledge, and confidence of women and support their personal desire to adopt healthy eating habits, increase physical activity, and live tobacco-free. By providing these services the program prevents, delays or controls cardiovascular disease and other chronic conditions. Contractors providing services address individual health needs that may arise during health coaching sessions and are trained in Motivational Interviewing. Once enrolled in the program women have access to health coaching and other health behavior support services that help them reach the goals they set. Examples of challenges individuals may need assistance with may include: domestic violence, mental health issues, food security, tobacco cessation, problem solving skills, sleep, mindfulness, social support, nutrition, physical activity etc.</p>	<p>The University of Utah Wellness Bus funded by the Larry H. &amp; Gail Miller Family Foundation provides similar screening services for at select community events low-cost or free and serve cities and areas within Salt Lake County, Weber county and Utah County. <a href="https://healthcare.utah.edu/wellness/driving-out-diabetes/mobile-health-program.php">https://healthcare.utah.edu/wellness/driving-out-diabetes/mobile-health-program.php</a> However, screening services are only available at limited locations and providing health behavior support services is not part of the options they provide.</p>

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4221	Breast & Cervical Cancer - State	Our entire program focuses on preventive screening. We partner with community clinics to provide preventive visits and pay for their clinical breast exam and pap test. We also work with worksites to implement worksite wellness policies for preventive health.	None
LEJ	4222	Breast & Cervical Cancer - Federal	Our entire program focuses on preventive screening. We partner with community clinics to provide preventive visits and pay for their clinical breast exam and pap test. We also work with worksites to implement worksite wellness policies for preventive health.	None

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4223	National Comprehensive Cancer Control	The CCC prioritizes the prevention of cancer in the State Cancer Plan, as a member of UCAN, and on all programmatic initiatives with both internal and external partners. CCC recognizes that, in a majority of instances, cancer is the unfortunate result of underlying issues relating to nutrition, physical activity, tobacco use, exposure to environmental carcinogens such as ultraviolet (UV) radiation or unhealthy air quality, and/or inadequate access to high quality healthcare services. Thus, CCC considers it imperative to address these underlying cancer-causing issues in order to prevent the development of cancer in Utahns across the state.	
LEJ	4225	Colorectal Screening-Federal		
LEJ	4226	Cancer Policy Implementation		
LEJ	4227	Cancer Koman Foundation	Funding from the Susan G Komen foundation is used to support breast cancer screening to disparate women as they move through the continuum of care receiving services that would not have happened otherwise.	Intermountain Healthcare
LEJ	4228	Cervical Cancer Education-State	Every dollar spent on cancer research leads us closer to finding a cure.	none
LEJ	4229	Prostate Cancer Support		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4230	Diabetes/Hypertension Risk Factors - 1815	The program emphasis patient education and self-management of diabetes and pre-diabetes, as well as promoting evidence-based clinical treatment of diabetes and hypertension. By focusing on personal education (diabetes) and controlling conditions once they've manifested, the patients may have less comorbidities.	Healthcare systems focus on patient education and treating these conditions among their patients, but no other entity is addressing these issues on a population-level. Local health departments, Comagine Health, and other nonprofits are directly involved in this program's funding as contractors and sub-recipients.

Appropriatio	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4231	Cardio Vascular- Preventive Health Block Grant	Reduction in heart disease and related risk factors and conditions and increased access to care for heart disease. Overall the funding is used to support its intent to address reducing heart disease and leading risk factors for heart disease. Both the state epidemiologist and a health promotion specialist have metrics that determine where they are successful in their job responsibilities.	Heart disease is exacerbated by hypertension. By identifying clinical interventions and cost-effective approaches to hypertension, heart disease outcomes may improve.
LEJ	4232	Cardio Vascular- Preventive Health Block Grant		
LEJ	4233	Association of State and Territorial Health Officials Cardiovascular Health Collaboration	Heart disease is exacerbated by hypertension. By identifying clinical interventions and cost-effective approaches to hypertension, heart disease outcomes may improve.	Healthcare clinics and systems are working within their own settings to treat patients with hypertension, but no other organization is strictly focused on hypertension control as a means to reduce hypertension from a population-based approach.
LEJ	4235	Sup Domain 3 - Heart Disease		
LEJ	4236	Heart & Stroke Risk Factors - 1815		
LEJ	4237	Centers for Disease Control and Prevention Heart Disease		
LEJ	4238	Eppicc 1305 Basic Component Physical Activity, Nutrition, and Obesity		
LEJ	4239	Domain 3 - Diabetes		
LEJ	4240	Domain 4 - School Health		



Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4241	Diabetes Control - Federal		
LEJ	4244	Sup Domain 4 - Diabetes		
LEJ	4245	Chc Basic - School		
LEJ	4247	Centers for Disease Control and Prevention Diabetes		
LEJ	4248	HealthInsight Diabetes Prevention (National Diabetes Prevention Program)		
LEJ	4249	Domain 4 - Heart & Stroke		
LEJ	4250	Epiic 1305 Basic		
LEJ	4252	Cancer Genomic Best Practices	<p>While we cannot change a person's genome or inherited risk of cancer, we can make efforts to shift the social and physical environments in which people live in order to improve their knowledge, awareness, and understanding of their risk for cancer. We can also improve systems to increase appropriate referrals to genetic services for patients who qualify by training healthcare providers on the benefits of understanding family history of cancer, regardless of the physician's medical specialty. As a program, we also prioritize equity in presenting our data in reports and presentations, and have taken active steps to change our language around data so as to not place undue blame or stigma on groups of people based on race, age, gender identity, health insurance status, screening behaviors, or general lived experiences. We actively collaborate with community leaders and groups so that our interventions and programming are adjusted to appropriately serve the populations we work with and include their voices in every step of the process.</p>	<p>There are many entities that understand the importance of cancer genomics, but they are specialized to fit the organization's needs. The Utah Cancer Genomics Program aims to take a holistic approach to meeting program goals, while collaborating with those other entities on specific projects.</p>

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4255	Diabetes/Heart & Stroke With State & Local Strategies - 1817		
LEJ	4257	Cancer Management, Leadership & Coordination		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4260	Heart & Stroke/Diabetes With State & Local Strategies - 1817	The program emphasis patient education and self-management of diabetes and pre-diabetes, as well as promoting evidence-based clinical treatment of diabetes and hypertension. By focusing on personal education (diabetes) and controlling conditions once they've manifested, the patients may have less comorbidities.	Healthcare systems focus on patient education and treating these conditions among their patients, but no other entity is addressing these issues on a population-level. Local health departments, Comagine Health, and other nonprofits are directly involved in this program from this program's funding as contractors and sub-recipients.

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4261	Arthritis - Federal - Centers for Disease Control and Prevention	HAP collaborates with key stakeholders to increase awareness, registration, retention and delivery of evidence-based programs for adults over 18 years old, including people with disabilities and caregivers.	HAP is the primary network hub for Utah's self-management programs including falls prevention and Alzheimer's disease and related dementia programming. While the HAP contracts with partners and outside stakeholders to offer programs throughout the state, the HAP coordinates the Living Well (network) Coalition along with offering no-cost training for most if not all classes. HAP also maintains the statewide license at no cost to partners who offer classes to community members.
LEJ	4263	Arthritis Administration on Aging		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4264	Arthritis Chronic Pain Self Management		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4265	Administration on Aging Arthritis		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4271	Asthma-Federal	<p>We strengthen leadership and infrastructure by building partnerships to help position asthma control as a high priority for public health and health systems throughout the state. In addition, we expand access to the 6 EXHALE strategies outlined by the Centers for Disease Control and Prevention including: 1) Education on asthma self-management (AS-ME), 2) X-tinguishing smoking and exposure to secondhand smoke, 3) Home visits for trigger reduction and AS-ME, 4) Achievement of guidelines-based medical management, 5) Linkages and coordination of care across settings, 6) Environmental policies or best practices to reduce asthma triggers from indoor, outdoor, or occupational sources.</p>	<p>There are no asthma-focused private or non-profit organizations in Utah. The only local government asthma programs are funded through our program. The only payer in Utah that offers home-based asthma self-management education is University of Utah Health Plans (UUHP). All patient referrals with UUHP insurance are sent directly to their care management department to ensure efforts are not duplicated.</p>
LEJ	4273	Northeast Genomics Project		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4285	Worksite Lactation Accommodation	There is a federal law to provide lactation accommodations, however not all businesses have funding to create a private, comfortable space for women to pump or feed their babies. This funding significantly improved these environments.	There are no other funding sources or similar programs available to businesses for this purpose.
LEJ	4287	Physical Activity, Nutrition, Obesity - 1807	All of these interventions are policy-based, meaning making the healthy choice the easy choice. The underlying issue may be increasing intake of healthy foods, the policy is changing food service guidelines so that healthy foods are available.	Local health departments, and other nonprofits are directly involved in this program's funding as contractors and sub-recipients.
LEJ	4289	Student Vision Screenings	Vision screening has been shown to assist with improving academics and removing barriers to learning.	UDOH partners with the Utah Division of Services for the Blind and Visually Impaired to ensure vision screening occurs in all schools.



Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4290	Local Health Department Physical Activity, Nutrition, and Obesity Prevention Blk	This critical funding supports local health departments in working within their individual jurisdictions to make an impact on public health.	Local health departments may partner with community based organizations and local education agencies within their jurisdictions to create synergy around these important issues.
LEJ	4292	Nutrition Physical Activity, Obesity Tobacco Settlement	The underlying issue for childhood obesity has been and continues to be improving nutrition and increasing physical activity and preventing and managing related chronic conditions. Both of these staff positions focus their efforts on prevention.	None
LEJ	4295	Student Asthma Relief	By ensuring that schools have emergency inhalers available and are trained in their use, students with asthma can continue to learn in a safe school environment.	None

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4297	Centers for Disease Control and Prevention Obesity		
LEJ	4299	Domain 2 - School Health		
LEJ	4320	Local Health Department Violence And Injury Prevention Program Prevention Block		
LEJ	4321	Injury Prevention Maternal and Child Health	The majority of this funding is used to target the root causes of injury.	None
LEJ	4323	Violence And Injury Prevention Program Competitive Projects - Preventive Health Block Grant	LHD's are required to implement activities that address the root causes of injury.	None
LEJ	4324	National Violent Death Review	By identifying risks contributing to violent deaths.	None. This is the only surveillance system in Utah that collects data on these deaths. This data has been integral for suicide prevention efforts in Utah.

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4325	Child Fatality Review	By: 1) identifying and describing the prevalence of risk factors among deceased children by studying and reporting trends and patterns of child deaths in Utah. 2) Maximizing resources through interagency collaboration to identify and describe the service delivery of the involved systems (medical, human services, and law enforcement) to high-risk children, and make policy recommendations to improve the service systems to better meet the needs of all families involved with these systems. 3) Promoting effective prevention strategies to reduce the number of child deaths. 4) Referring issues and proposing strategies to appropriate organizations and agencies to promote education and prevention.	DCFS conducts a system review of child deaths of DCFS clients.
LEJ	4326	Utah Evidence-Based Falls Prevention		
LEJ	4327	Prescription Drug Overdose Death Prevention		
LEJ	4328	Community Injury Prevention	By targeting strategies to prevent risk factors or promote protective factor of injury.	None

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4329	Rape Crisis Center- Preventive Health Block Grant	The VIPP approaches sexual violence from a public health perspective - recognizing that primary prevention, including efforts to change cultural norms, behaviors, and practices - is essential to create a violence free community.	None
LEJ	4330	Rape Prevention Education	This grant requires VIPP to address the risk and protective factors of sexual violence through evidence-based strategies.	None
LEJ	4331	Rape Prevention - State	By targeting the root causes of sexual violence for prevention strategies.	None. VIPP is the only organization providing funding for the primary prevention of sexual violence.
LEJ	4332	Harold Rogers Prescription Drug Monitoring Program		

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>How does the program focus on treating the underlying issue?</b>	<b>What other entities (government, private, non-profit, etc.) perform</b>
LEJ	4334	Alcohol Epidemiology Capacity	Through collection of data on the risk factors of Utahns who excessively drink alcohol.	None
LEJ	4335	Council of State and Territorial Epidemiologists Substance Abuse Indicators		
LEJ	4342	Baby Your Baby Media Campaign		
LEJ	4345	Baby Your Baby Outreach-Medicaid	All Baby Your Baby Outreach activities focus on healthy pregnancy and early childhood messages.	None. Baby Your Baby is a public/private partnership with UDOH, KUTV and Intermountain Healthcare.
LEJ	4348	Baby Your Baby - Children's Health Insurance Program Title 21 Federal	Calls for CHIP and Medicaid are answered and navigated appropriately, so those eligible receive needed services.	None
LEJ	4349	Health Resource Center	Providing health resources and referrals to all Utahns, allowing them to receive appropriate services.	2-1-1, but not with the same knowledge of UDOH programs.
LEJ	4350	Violence Prevention Integration	By decreasing injury and violence related morbidity and mortality and increasing sustainability of VIPP efforts.	None

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4351	Violence Prevention Surveillance		
LEJ	4353	Spinal Cord and Brain Injury Fund Administration		
LEJ	4355	Drug Poisoning Prevention	Funding provides coordination of opioid overdose prevention efforts.	USAAPV+
LEJ	4357	Drug Abuse & Misuse Prevention		
LEJ	4357	Drug Abuse and Misuse Prevention		
LEJ	4358	Naloxone Jag		
LEJ	4359	Rescue Meds In School	The funding ensures that trained personnel are available in the event of a seizure emergency. It enables children with a seizure disorder to attend school.	None
LEJ	4360	Component 1 - Heart Disease		
LEJ	4361	Component 1 - Diabetes		
LEJ	4363	Component 2 - Heart Disease		
LEJ	4364	Component 2 - Diabetes		
LEJ	4370	Comprehensive Tobacco Centers for Disease Control and Prevention - Competitive Component		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4373	Tobacco Youth	<p>Mass-Reach Health Communication Interventions are considered a Best Practice and necessary for a comprehensive Tobacco Program. The way that TPCP ensures that the media is addressing the underlying issue is through formative testing of all media messaging by our independent program evaluator (RTI). This unit is used primarily to supplement the this media campaign and evaluation of the media program.</p>	<p>The Division of Substance Abuse and Mental Health, as well as private media companies have other prevention media campaigns such as Parents Empowered, though they do not address tobacco. Some national media companies such as Rescue do create tobacco media campaigns. The CDC and FDA run national tobacco media campaigns. In the past, TPCP has purchased ads from the CDC to run in Utah.</p>
LEJ	4375	Tobacco Media Campaign	<p>The TPCP works with our media vendor for placement that will ensure the media messaging is reaching Medicaid clients. As reported in the field above, the media campaign undergoes formative testing to ensure that the messaging is effective and reached the underlying issues of tobacco/vape users.</p>	<p>The Division of Substance Abuse and Mental Health, as well as private media companies have other prevention media campaigns such as Parents Empowered, though they do not specifically address Medicaid tobacco users. Some national media companies such as Rescue do create tobacco media campaigns which could be tailored for a Medicaid tobacco user audience. The CDC and FDA run national tobacco media campaigns but they are for the entire population and not specific to Medicaid users.</p>

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4377	Tobacco Tax - Restricted Revenue	This unit funds many of the activities that we do and require that our contractors do. All of our activities are evidence-based and based on CDC Best Practices for comprehensive tobacco programs. The underlying issue is preventing initiation of tobacco, and providing the tools for those who use tobacco to quit using. Our evaluation efforts ensure that all of our activities focus on those key areas and that they are effective.	There are some national organizations such as the American Heart Association who provides tobacco cessation classes, or other online tools that help people quit, but they are not Utah specific.
LEJ	4378	Comprehensive Tobacco Centers for Disease Control and Prevention	Based on the public health prioritization of population health strategies, TPCP focuses on evidence-based and evidence-informed strategies at the community and societal-level, which include public policy and systems improvements. These community and societal-level strategies will help to institutionalize prevention strategies, enhance sustainability, and reach more of the population than individual-level programs alone. With a strong focus on health equity the Tobacco Prevention and Control Program (TPCP) uses a comprehensive approach to prevent youth nicotine dependence, reduce commercial tobacco product use and eliminate tobacco related disparities among priority populations.	No. This grant is only awarded to State Tobacco Programs.



Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4379	Tobacco Settlement-State	This unit also funds many of the activities that we do and require that our contractors do. All of our activities are evidence-based and based on CDC Best Practices for comprehensive tobacco programs. The underlying issues are preventing initiation of tobacco, and providing the tools for those who use tobacco to quit using. In addition to this, this unit is used for enforcement activities. Our evaluation efforts ensure that all of our activities focus on those key areas and that they are effective.	The FDA does their own tobacco enforcement, but not in the way as required by Utah state statute or CDC Best Practice.
LEJ	4381	Cannabinoid Product Board	A department epidemiologist evaluates scientific studies related to the human use of cannabis and helps guide the CPB as it makes updates to its guidelines for treatment with cannabis.	Some medical cannabis program outside of Utah perform these reviews and develop guidelines. Some medical researchers have created guidelines.
LEJ	4382	Vaping/Lung Disease Education	The program focused on identifying the cause of EVALI and once that was determined, interventions occurred to directly prevent those who were using THC laced vaping pods.	UDOH had the infrastructure and expertise necessary to address this outbreak, particularly once it became an epidemic. Possibly DEA (Drug Enforcement Administration) could have addressed this issue.

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4387	Tobacco Prevention Non Lapsed	<p>Mass-Reach Health Communication Interventions are considered a Best Practice and necessary for a comprehensive Tobacco Program. The way that TPCP ensures that the media is addressing the underlying issue is through formative testing of all media messaging by our independent program evaluator (RTI). This unit, when available, is often used to supplement the media campaign.</p>	<p>The Division of Substance Abuse and Mental Health, as well as private media companies have other prevention media campaigns such as Parents Empowered, though they do not address tobacco. Some national media companies such as Rescue do create tobacco media campaigns. The CDC and FDA run national tobacco media campaigns. In the past, TPCP has purchased ads from the CDC to run in Utah.</p>

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4388	Quitline Sustainability	Decreasing tobacco use and dependence prevalence and consumption. Identifying disparities in tobacco cessation and tobacco use and dependence and addressing those barriers. Quitting smoking considerably reduces health risks. Smoking cessation improves well-being, including higher quality of life and improved health status, and reduces the risk of premature death.	The TPCP works closely with a research team at the University of Utah (HCI Center for HOPE) and with its independent evaluator (RTI International) to plan and conduct evaluations of interventions aimed at increasing quit attempts and local quit success for populations that are disparately affected by tobacco use. The Center for Health Outcomes and Population Equity (HOPE) focuses on bringing communities and researchers together to create long-term solutions to prevent cancer and improve health among underserved populations in the Intermountain West. As part of this work, the Center for HOPE has partnered with the TPCP and the Association for Utah Community Health (AUCH) to conduct a 5-year PCORI-funded sequential multiple assignment randomized trial (SMART) study that enlists community health centers (CHCs) in a test of interventions that connect CHC patients with Utah’s TPCP-funded quit services. Most insurance companies offer insurance coverage of cessation treatments.
LEJ	4391	Sexual Assault Prevention		
LEJ	4393	Primary Violence Prevention		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4394	Alzheimer's Statewide Education	Dementia and caregiver supports are necessary for mental health, economic and workforce stability among older adults. Encouragement and education to the community and healthcare providers on benefits of early diagnosis, treatment and symptoms assist with Medicare's Annual Wellness program and brain health screenings.	There is a high need for support in the aging field. There are multiple organizations involved with DOH's efforts through the Coordinating Council but each one fulfills unique responsibilities in conjunction with the ADRD State Plan. Contracted partners include: University of Utah Center for Alzheimer's Imaging, Care and Research to provide those diagnosed with dementia and their caregivers care consultations; The Alzheimer's Association, Utah Chapter to provide support groups and education to the community and to educate providers on dementia care practices, resources and billing codes; Comagine Health to provide physician education on the Mini-Cog® cognitive exam, billing codes and resources available for dementia; and a robust public awareness campaign currently contracted with iHeart Media.
LEJ	4396	Healthy Brain Initiative - Alzheimer's Association		

Appropriation	Unit	Program	How does the program focus on treating the underlying issue?	What other entities (government, private, non-profit, etc.) perform
LEJ	4397	Alzheimer State Plan	<p>ADRD is viewed as a national issue and many states are implementing programs to address ADRD, Utah was one of the first. Making brain health a priority and educating the community reduces stigma, increases awareness and assists in providing more supports for the affected community members.</p>	<p>There is a high need for support in the aging field. There are multiple organizations involved with DOH's efforts through the Coordinating Council but each one fulfills unique responsibilities in conjunction with the ADRD State Plan. Contracted partners include: University of Utah Center for Alzheimer's Imaging, Care and Research to provide those diagnosed with dementia and their caregivers care consultations; The Alzheimer's Association, Utah Chapter to provide support groups and education to the community and to educate providers on dementia care practices, resources and billing codes; Comagine Health to provide physician education on the Mini-Cog© cognitive exam, billing codes and resources available for dementia; and a robust public awareness campaign currently contracted with iHeart Media.</p>
LEJ	4398	Prevention Block Administration	<p>There is a focus on the social determinants of health and population level indicators.</p>	<p>None</p>
LEJ	4399	Parkinson's Disease Registry		

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>How does the program focus on treating the underlying issue?</b>	<b>What other entities (government, private, non-profit, etc.) perform</b>
LEK	1401	Medical Examiner	Underlying issue is statutorily mandated investigation of deaths as defined in 26-4-7	None.
LEK	1402	Medical Examiner Body Transportation	Underlying issue is statutorily mandated investigation of deaths as defined in 26-4-7	Funeral homes provide a portion of this service in rural areas.
LEK	1404	Office of the Medical Examiner Investigators	Underlying issue is statutorily mandated investigation of deaths as defined in 26-4-7	None.
LEK	1405	New Office of the Medical Examiner Building Equipment		
LEM	4259	Skin Cancer Donations		
LEO	3850	Opiate Overdose Response		
		<b>Grand Total</b>		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
5820	5820	Qualified Patient Enterprise Fund	0	0	0	319,500	1,837,700	\$ 2,254,890	\$ 2,828,356

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
2251	4339	Traumatic Brain and Spine Rehabilitation	242,300	168,100	95,600	189,800	258,800	\$ 352,500	\$ 352,500
2250	4354	Traumatic Brain Injury Fund	212,600	224,600	255,400	223,900	203,800	\$ 366,200	\$ 366,200
LXA	4452	Immunization Federal - Provider Vaccine	25,511,800	27,277,100	26,939,300	26,108,300	26,191,600	TBD - Estimates from Federal Partners not received yet	TBD - Estimates from Federal Partners not received yet
LLA	3811	Local Health Department General Fund Block Grant	2,137,500	2,137,500	2,137,500	2,137,500	2,137,500	\$ 2,137,500	\$ 2,137,500



Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEA	3102	Division GRAMA Clearing Acct	100	100	0	0	0		
LEA	3103	Administrative Clearing	0	88,500	352,500	0	0		
LEA	3105	Director's Office	299,300	528,600	485,800	504,400	525,700	\$ 520,500	\$ 579,500
LEA	3106	Division Support Services	236,500	289,300	255,400	256,200	298,800	\$ 308,100	\$ 309,200
LEA	3107	Lab Director's Office	306,400	375,900	426,800	424,500	487,400	\$ 360,433	\$ 469,700
LEA	3110	Laboratory Finance Office	301,000	325,800	347,100	326,600	388,900	\$ 389,473	\$ 392,100
LEA	3113	Operations & Maintenance - New Lab	680,200	753,900	883,900	838,000	856,000	\$ 883,900	\$ 883,900

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEA	3151	Utah Public Health Lab Non Lapsing Capital	26,900	349,100	349,300	341,800	372,200	\$ 182,761	\$-
LEA	3180	Lab Information Technology Projects	29,700	48,400	54,900	125,500	(43,100)	\$ 131,400	\$ 7,700
LEA	3182	Lab Epidemiology Projects	6,000	(13,300)	0	800	0		
LED	3210	Environmental Testing Administration	365,600	206,100	147,300	355,700	500,000	\$ 477,483	\$ 464,900
LED	3214	Chemistry Special Projects	26,900	600	300	(300)	0	\$-	\$-
LED	3215	Organic Chemistry	379,300	374,100	332,000	296,400	356,500	\$ 426,525	\$ 341,000
LED	3216	Radiation Chemistry	0	200	0	0	0	\$-	\$-
LED	3218	Environmental Microbiology	135,100	127,900	145,000	156,500	154,800	\$ 162,263	\$ 162,300
LED	3220	Inorganic Chemistry	395,300	364,400	355,500	371,000	373,800	\$ 399,881	\$ 379,600

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LED	3225	Metals/Radio Chemistry	305,000	322,400	343,000	255,800	227,300	\$ 249,929	\$ 244,700
LED	3235	Four Corner States Environmental Monitoring	746,200	849,200	696,900	856,400	205,700		
LED	3285	Forensic Toxicology Administration	75,800	132,300	47,300	71,100	36,400	\$ 54,822	\$ 74,300
LED	3286	Law Enforcement/Office of the Medical Examiner Toxicology	1,269,800	1,418,300	1,446,400	1,736,200	1,460,400	\$ 1,626,123	\$ 1,658,033
LED	3288	Motor Vehicle Death Legislation Funds	300	0	0	0	0	\$-	\$-
LED	3294	Coverdell Grant	25,200	3,500	19,500	39,000	46,400	\$ 80,301	\$ 80,301

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LED	3310	Laboratory Operations Administration	275,000	96,000	364,500	382,900	347,100	\$ 187,500	\$ 142,000
LED	3311	Lab Central Lab Support	16,600	48,800	21,200	47,000	162,200	\$ 53,945	\$ 46,700
LED	3312	Lab Central Supply Cleaning	3,100	200	900	7,900	(3,300)	\$ 5,900	\$ 5,900
LED	3330	Safety/Quality Assurance/Training	51,800	54,800	(3,100)	57,200	(6,900)	\$-	\$-
LED	3335	Specimen Processing	564,900	215,800	(36,000)	(35,800)	(34,300)	\$ (54,400)	\$ (55,000)
LED	3410	Newborn Screening Administration	284,900	1,040,100	1,037,100	1,059,600	1,034,100	\$ 749,712	\$ 750,000

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LED	3415	Newborn Screening Program	1,238,800	2,255,700	2,523,600	2,578,900	4,240,600	\$ 4,148,870	\$ 5,210,900
LED	3417	Newborn Screening Non-Lapsing	0	255,700	270,400	350,000	218,000	\$-	\$-
LED	3418	Centers for Disease Control and Prevention Grant For Implementation of Mucopolysaccharidosis type I, Pompe & X-linked adrenoleukodystrophy	0	0	0	261,900	283,600	\$ 25,200	\$ 25,200
LED	3421	Newborn Screening/Non-Department of Health Providers	1,920,100	1,730,100	1,489,700	1,241,300	164,600	\$ 165,000	\$ 165,000
LED	3422	Newborn Screening Info Systems	16,900	12,000	11,200	17,500	4,300	\$-	\$-
LED	3424	Severe Combined Immunodeficiency Newborn Testing	147,100	72,500	60,100	0	0	\$-	\$-

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LED	3425	Infectious Diseases Administration	46,300	116,700	213,600	290,300	253,200	\$ 289,880	\$ 339,300
LED	3426	Virus Isolation Projects	0	200	0	0	0	\$-	\$-
LED	3427	Immunology & Virology Testing	792,400	0	0	0	843,200	\$ 775,663	\$ 854,100
LED	3427	Immunology and Virology Testing	215,100	857,700	853,300	905,700	0	\$-	\$-
LED	3430	Bacteriology	33,700	162,500	188,500	226,400	113,900	\$ 101,450	\$ 111,600
LED	3442	Tuberculosis Federal	79,500	32,400	16,300	38,000	46,700	\$ 37,000	\$ 35,000

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LED	3443	Tuberculosis-General Fund	39,100	61,100	64,600	10,300	8,300	\$ 12,336	\$ 14,100
LED	3450	Molecular Testing	100,200	59,200	23,800	24,700	18,300	\$ 20,094	\$ 30,000
LED	3460	Pulsenet	0	94,800	108,700	132,100	73,000		
LED	3461	Lab Arboviral	35,800	133,400	17,900	89,800	11,700	\$-	\$-
LED	3462	Rabies	400	2,600	1,200	7,000	0	\$-	\$-
LED	3463	Lab Capacity	159,800	291,600	318,300	62,900	20,900	\$-	\$-

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LED	3464	Grant-National Antimicrobial Resistance Monitoring System	0	148,600	157,300	123,500	5,600	\$ 3,400	\$ 3,500
LED	3465	Lab Flu	82,500	90,600	85,000	89,100	400	\$-	\$-
LED	3466	Lab Capacity	24,500	0	0	198,200	1,953,200	\$ 2,261,400	\$ 2,261,400
LED	3466	Epidemiology, Laboratory Capacity - Lab Capacity	54,200	100	0	0	0	See above	See Above
LED	3467	Ebola Lab and Biosafety	179,700	121,700	113,800	21,500	0	\$-	\$-
LED	3468	Advanced Molecular Detection	57,300	102,800	132,600	137,000	11,000	\$-	\$-
LED	3469	Foodcore Lab	0	150,200	91,100	117,300	3,300	\$ 1,600	\$ 1,600



Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LED	3470	Healthcare Associated Infection & Antimicrobial Resistance Lab Capacity	0	38,000	88,300	102,100	7,700	\$-	\$-
LED	3471	Non-Flu Diagnosis & Testing	0	29,000	0	0	0	\$-	\$-
LED	3472	Ebola, Lab & Biosafety	0	11,000	45,100	0	0	\$-	\$-
LED	3473	Lab Arboviral	0	49,800	6,000	0	0	\$-	\$-
LED	3474	Zika Supplemental Pers	0	0	101,300	100	0	\$-	\$-
LED	3475	Epidemiology-Lab Capacity COVID-19 - Lab	0	0	0	0	13,100	\$ 252,500	TBD
LED	3490	Epidemiology Influenza Incidence Surveillance	32,200	49,600	55,800	52,300	57,300	\$ 55,000	\$ 55,000
LEE	3315	Environmental Lab Certification	335,400	403,100	503,700	495,000	449,700	\$ 455,534	\$ 506,880
LEE	3316	Blood/Alcohol Testing	4,700	4,300	4,900	400	0	\$-	\$-

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEE	3320	Clinical Laboratory Improvement Amendments Grant	127,500	125,600	146,000	164,300	186,900	\$ 160,700	\$ 199,600
LEH	3501	Immunization Prevention and Public Health Fund	137,300	2,726,500	1,461,600	64,100	0	\$-	\$-
LEH	3503	Local Health Emergency Fund	12,300	25,000	50,000	25,000	50,000	\$ 50,000	\$ 50,000
LEH	3505	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Treatment & Care	46,700	47,900	49,000	49,500	50,500	\$ 50,500	\$ 50,500
LEH	3506	Student Vaccination Exemption	0	0	26,100	21,500	24,500	\$ 25,000	\$ 25,000
LEH	3508	Hepatitis A Vaccine Support For 2017/2018 Outbreak	0	0	247,500	0	0	\$-	\$-
LEH	3510	Bureau of Epidemiology Administration	626,600	376,100	390,700	430,800	448,300	\$ 438,000	\$ 459,800
LEH	3511	Epidemiology Non-Lapsed	175,000	168,400	182,500	172,200	164,700	\$ 2,000	TBD
LEH	3512	Regional Epidemiologist	0	0	0	53,400	0	\$-	\$-

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3513	Human Immunodeficiency Virus Ryan White Part B Supplemental	597,000	470,800	2,458,400	1,421,600	1,647,100	\$ 987,300	\$ 1,000,000

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3517	Ryan White Title II	3,150,300	4,566,700	2,937,800	4,249,800	5,719,800	\$ 4,660,805	\$ 4,660,805

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3518	Ryan White Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Program Part B COVID-19 Response	0	0	0	0	18,200	\$ 132,000	TBD
LEH	3526	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Education	750,700	642,200	684,500	861,000	627,800	\$ 787,000	\$ 787,000
LEH	3527	Human Immunodeficiency Virus Prevention Category C Project	42,400	0	0	0	0	\$-	\$-

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3532	Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome Surveillance Federal	209,400	207,400	244,500	265,000	255,300	\$ 225,100	\$ 250,000
LEH	3537	Control & Prevention of Sexually Transmitted Diseases - H.B. 15	28,400	26,100	28,400	30,000	23,100	\$ 28,300	\$ 31,800
LEH	3538	STD Surveillance Network (Ssun) Sexually Transmitted Disease Surveillance	240,300	218,500	157,900	83,400	99,200	\$ 102,200	\$ 238,000

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3545	Human Immunodeficiency Virus Ryan White Supplemental	1,761,600	852,800	1,812,300	1,590,200	471,300	\$ 1,374,346	\$ 1,374,346

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3550	Ryan White Drug Rebate	3,103,700	5,464,700	5,146,700	6,586,400	6,945,000	\$ 6,000,000	\$ 6,000,000
LEH	3555	Tuberculosis State	339,900	357,600	360,000	369,900	345,700	\$ 397,000	\$ 380,500
LEH	3560	Refugee Tuberculosis Wfs	78,600	83,900	87,800	85,600	97,900	\$ 84,500	\$ 85,000
LEH	3561	H.B. 430 Genital Mutilation	0	0	0	0	6,000	\$ 6,400	\$ 6,400



Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3562	Refugee Tuberculosis Wfs	1,536,600	1,177,300	852,100	730,100	572,000	\$ 444,200	\$ 500,000
LEH	3563	Refugee Mental Health - Salt Lake County Funding	186,500	215,000	186,400	136,300	129,200	\$ 219,800	\$ 221,700
LEH	3564	Refugee Mental Health	44,500	92,900	72,600	35,000	18,500	\$ 4,000	\$ 4,000
LEH	3567	Tuberculosis Elimination	248,200	241,900	241,000	305,200	151,700	\$ 175,800	
LEH	3570	Pandemic Flu Planning	104,400	0	0	0	0		
LEH	3570	Refugee General	0	99,500	67,500	74,800	57,700		
LEH	3572	Refugee Gen Federal	28,300	0	0	0	0		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3572	Refugee Pandemic Planning	0	38,500	15,000	0	0		
LEH	3584	Strengthening Surveillance of Hcv & Hbv Infections Grant	0	1,100	96,500	331,600	241,000		
LEH	3585	Human Immunodeficiency Virus Hepatitis	59,400	72,500	51,300	107,500	49,800		
LEH	3586	Viral Hepatitis Epidemiologic Profiles	0	28,100	5,100	0	0		
LEH	3587	Syringe Service Program	0	0	0	230,600	476,200		
LEH	3588	Fentanyl - Division of Substance Abuse and Mental Health	0	0	0	0	15,000		
LEH	3589	Comprehensive Syringe Exchange Plan	0	0	85,800	73,700	0		
LEH	3591	Sexually Transmitted Disease Federal Grant	514,200	503,800	407,600	644,900	415,300		
LEH	3704	Food and Drug Administration Po	4,100	2,100	(1,800)	4,500	200	\$ 2,100	\$ 2,100

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3706	Food Safety	401,900	436,600	438,900	448,200	454,800	\$ 453,500	\$ 458,600
LEH	3707	Summer Food	6,300	8,400	9,900	7,900	4,300		
LEH	3708	Utah Risk Factor Study	0	1,600	17,500	0	0		
LEH	3717	Environmental Public Health Track	777,300	729,300	778,200	787,700	759,300		
LEH	3721	Health Care & Other Facilities For Utah - National Electronic Disease Surveillance System	39,200	0	0	0	0		
LEH	3723	Centers for Disease Control and Prevention Bio Sense	173,500	239,900	220,600	217,800	43,600		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3725	Environmental Epidemiology	72,100	52,000	108,100	112,400	117,100	\$ 116,300	\$ 120,100
LEH	3734	Council of State and Territorial Epidemiologists Influenza Hospitalization Surveillance Project	119,400	174,400	173,600	238,500	340,900	\$ 459,700	\$ 275,400
LEH	3742	Hepatitis Testing & Treatment	0	0	0	0	43,800		
LEH	3742	Hepatitis Testing and Treatment	0	0	0	6,000	0		
LEH	3744	Task Force For Global Health Ecr Implementation	0	0	36,000	0	0		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3746	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Administration	0	0	0	0	400	\$ 9,389,148	\$ 9,510,457

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3747	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Epidemiology	0	0	0	0	0	\$ 3,859,694	\$ 9,955,742

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3749	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Utah Public Health Laboratory	0	0	0	0	249,200	\$10,800,638	\$18,616,156
LEH	3751	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Mobile Testing	0	0	0	0	1,600	\$ 1,414,041	\$ 3,050,579

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3755	Surv Atsor Appletree	162,200	159,800	215,900	170,900	253,000		
LEH	3758	Epidemiology-Lab Capacity - COVID-19	0	0	0	0	78,300		
LEH	3759	Cross-Cutting Outbreak Investigat, Resp & Reporting	0	0	0	37,700	2,300		
LEH	3760	Affordable Care Act Outbreak	78,100	74,700	6,600	0	0		
LEH	3761	Affordable Care Act Actc Elr	0	18,100	71,400	20,600	0		
LEH	3761	Health Information Systems - Pcv	308,600	0	0	0	0		
LEH	3762	Affordable Care Act Actc Elr	239,800	475,600	520,200	677,400	115,800		
LEH	3764	Legionella	0	0	0	55,500	21,700		
LEH	3765	Affordable Care Act West Nile Virus	76,700	0	0	0	0		
LEH	3765	Ep Arboviral	0	396,900	304,400	81,000	13,500		



Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3766	Affordable Care Act Foodcore	192,100	219,000	285,200	304,000	63,500		
LEH	3767	Affordable Care Act Healthcare Associated Infection	9,100	0	0	0	0		
LEH	3767	Epidemiology Healthcare Associated Infection Coordination/Prevention	0	189,900	46,500	4,600	0		
LEH	3772	Evaluation	8,000	82,500	8,000	0	0		
LEH	3773	Epidemiology Flu	79,000	61,100	64,400	74,600	14,500		
LEH	3774	Epidemiology Capacity	223,000	241,000	236,200	44,500	4,800		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3775	Epidemiology Capacity - Cap	29,600	38,400	238,900	378,300	1,943,200		
LEH	3776	Affordable Care Act Pcv13 Cap	1,700	0	0	0	0		
LEH	3777	Affordable Care Act Mcv	40,700	91,800	113,000	7,500	0		
LEH	3778	Affordable Care Act Cre	4,700	0	0	0	0		
LEH	3780	Ebola Healthcare Associated Infection Assessment	153,300	173,800	159,700	0	119,900		
LEH	3781	Ebola Healthcare Associated Infection Prevention	243,000	232,800	428,900	401,000	0		
LEH	3782	Crosscutting - Enhanced Evaluation	48,100	5,700	0	0	0		
LEH	3783	Epidemiology Healthcare Associated Infection	0	61,500	7,100	0	0		
LEH	3783	Healthcare Associated Infection Prevention Infrastructure Pcv	68,600	0	0	0	0		
LEH	3784	Enhanced Prion Surveillance	30,100	31,300	36,900	38,100	2,600		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3785	Epidemiology - National Electronic Disease Surveillance System	98,500	0	0	0	0		
LEH	3785	Healthcare Associated Infection State	0	43,100	67,600	95,100	116,900	\$ 107,200	\$ 119,600
LEH	3786	Mycotics	8,900	36,700	12,800	14,400	1,500		
LEH	3787	Prevent Infection & Reduce Inter-Individual Transmission	200	44,100	4,700	50,700	0		
LEH	3788	Advance Interoperability Thru Healthcare Information Technology	68,200	224,800	4,600	0	0		
LEH	3789	Epidemiology Electronic Case Reporting	1,300	0	0	0	0		
LEH	3790	Epidemiology Zika Registry	0	45,400	10,900	0	0		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	3791	Nonflu Respiratory Diseases	0	2,000	200	0	0		
LEH	3792	Epidemiology Healthcare Associated Infection	0	22,700	251,400	252,700	18,600		
LEH	3793	Ep Arboviral	0	10,200	123,300	0	0		
LEH	3795	Enhanced Evaluation Capacity	0	0	74,700	86,000	17,900		
LEH	3796	Healthcare Associated Infection Coordination, Prevention & Stewardship	0	0	328,700	309,700	49,600		
LEH	3797	Zika Supplemental	0	0	35,300	3,900	0		
LEH	3798	Zika Supplemental Personnel	0	0	96,800	(5,300)	0		
LEH	3799	Vaccine Preventable Disease Surveillance	0	0	0	79,700	26,800		
LEH	3820	Infertility Study	0	0	28,500	16,500	0		
LEH	4131	Utah Statewide Immunization Information System State	395,000	197,800	322,800	310,000	344,800	\$ 330,400	\$ 350,600

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	4133	Utah Statewide Immunization Information System Private Donations	71,800	236,900	235,200	149,600	193,000	\$ 450,000	\$ 410,000
LEH	4135	Utah Statewide Immunization Information System Prevention and Public Health Fund 2012 Capacity Building	3,000	0	0	0	0		
LEH	4136	Prevention and Public Health Fund 15 Interoperability	198,900	396,800	117,600	0	0		
LEH	4137	Utah Statewide Immunization Information System Enhancing System (Afix)	64,200	201,600	26,700	0	0		
LEH	4139	Utah Statewide Immunization Information System Supplemental	0	0	0	232,300	230,000	\$ 195,900	\$ 196,400

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEH	4451	Immunization Tsf	483,400	547,500	562,400	483,100	576,500		
LEH	4452	Immunization Federal	2,973,700	815,000	1,238,300	2,988,800	3,127,600		
LEH	4453	Prevention and Public Health Fund - Human Papillomavirus Vaccination	28,100	0	0	0	0		
LEJ	3800	Phc Crisis Response	0	0	0	100,600	47,700		
LEJ	3801	Phc Jurisdictional Recovery	0	0	0	77,900	181,100		
LEJ	3802	Phc Biosurveillance	0	0	0	825,200	614,300		
LEJ	3803	Phc Information Management	0	0	0	136,300	265,700		
LEJ	3804	Phc Countermeasures	0	0	0	418,900	169,300		
LEJ	3805	Phc Jurisdictional Recovery	0	0	0	75,000	16,500		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	3806	Utah Overdose Data To Action	0	0	0	0	1,737,700	\$ 3,831,181	\$ 3,831,181
LEJ	3814	Prescription Drug Data Quality Improvement	0	0	0	2,900	622,900		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	3815	Public Safety & Public Health Info Partnerships	0	0	0	34,900	155,800		
LEJ	3821	Utah Nonfatal Suicide Surveillance	0	0	0	0	79,700	\$ 146,985	\$ 146,985



Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	3825	Victims of Crime Public Awareness and Outreach	0	0	0	0	222,400		
LEJ	3830	Utah Produce Incentives/Double Up Food Bucks	0	0	0	0	237,600		
LEJ	3831	Utah Food Bucks	0	0	0	0	19,000		
LEJ	3840	Bewise Family Support (Association of State and Territorial Health Officials)	0	0	34,600	10,400	0		
LEJ	3841	Cancer Population Health Approaches	0	0	286,000	159,900	6,300		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	3852	Enhancing Surveillance of Opioid Mortality & Morbidity	0	0	227,100	533,600	40,500		
LEJ	3853	Falls Prevention (Prevention and Public Health Fund)	0	0	104,300	182,300	179,500		
LEJ	3854	Stop The Opidemic Campaign	0	0	233,300	166,700	0		
LEJ	3855	Opioid Overdose Death Reduction	0	0	104,400	174,900	603,600		
LEJ	3856	Opioid Misuse & Overdose Prevention	0	0	0	0	391,500		
LEJ	3856	Opioid Misuse and Overdose Prevention	0	0	900	93,700	0		
LEJ	3857	Traumatic Brain Injury State Partnership Program Partner State Funding	0	0	0	78,400	95,800		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	3858	Utah Drug Enforcement Administration 360 Program	0	0	0	500,000	0		
LEJ	3859	Essentials For Childhood	0	0	0	106,600	366,000		
LEJ	3860	Sudden Unexpected Infant Death	0	0	0	18,600	79,500		
LEJ	3861	Sudden Death In Youth Surveillance	0	0	0	8,900	9,400		
LEJ	3862	Opiate Abuse Prevention Pamphlet	0	0	0	7,800	1,500		
LEJ	4211	Health Promotion Administration State	235,400	226,800	250,300	250,500	256,800		
LEJ	4212	A Healthier You	12,800	0	0	0	0		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4213	Youth Risk Behavior Survey-Federal	48,800	73,900	49,300	88,800	79,700		
LEJ	4216	School Health Consultant	97,400	94,700	99,200	98,900	90,300		
LEJ	4217	Centers for Disease Control and Prevention School Health	126,500	27,700	0	0	0		
LEJ	4218	Health Promotion Activities	84,100	56,700	73,300	92,100	74,300		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4219	Improving Health Disabilities	0	116,900	145,100	143,100	137,800		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4220	WISEWOMAN (BeWise Program)	1,470,300	1,723,300	2,079,900	1,138,700	1,009,700	\$ 1,100,000	\$ 1,100,000

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4221	Breast & Cervical Cancer - State	508,300	490,800	499,500	531,700	502,600	\$ 500,000	\$ 500,000
LEJ	4222	Breast & Cervical Cancer - Federal	2,615,300	2,999,400	2,342,900	2,267,300	2,558,200	\$ 2,910,000	\$ 300,000

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4223	National Comprehensive Cancer Control	519,500	541,900	222,800	270,400	299,300		
LEJ	4225	Colorectal Screening-Federal	2,200	0	0	0	0		
LEJ	4226	Cancer Policy Implementation	7,300	0	0	0	0		
LEJ	4227	Cancer Koman Foundation	3,500	3,400	30,000	78,600	82,200	\$ 195,000	\$-
LEJ	4228	Cervical Cancer Education-State	16,000	16,000	15,700	15,400	15,000	\$ 15,000	\$ 15,000
LEJ	4229	Prostate Cancer Support	200	200	100	0	0		



Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4230	Diabetes/Hypertension Risk Factors - 1815	0	0	0	592,300	1,506,900		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4231	Cardio Vascular- Preventive Health Block Grant	0	73,500	97,100	121,500	140,300		
LEJ	4232	Cardio Vascular- Preventive Health Block Grant	0	7,600	0	0	0		
LEJ	4233	Association of State and Territorial Health Officials Cardiovascular Health Collaboration	0	0	32,600	59,800	32,700		
LEJ	4235	Sup Domain 3 - Heart Disease	149,800	0	0	0	0		
LEJ	4236	Heart & Stroke Risk Factors - 1815	0	0	0	584,500	0		
LEJ	4237	Centers for Disease Control and Prevention Heart Disease	260,300	423,100	509,300	121,200	0		
LEJ	4238	Eppicc 1305 Basic Component Physical Activity, Nutrition, and Obesity	104,500	0	0	0	0		
LEJ	4239	Domain 3 - Diabetes	71,400	58,600	60,400	100	0		
LEJ	4240	Domain 4 - School Health	37,700	40,800	33,400	(100)	0		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4241	Diabetes Control - Federal	130,200	0	0	0	0		
LEJ	4244	Sup Domain 4 - Diabetes	192,900	0	0	0	0		
LEJ	4245	Chc Basic - School	43,500	0	19,100	0	0		
LEJ	4247	Centers for Disease Control and Prevention Diabetes	159,000	328,900	422,500	113,900	0		
LEJ	4248	HealthInsight Diabetes Prevention (National Diabetes Prevention Program)	0	0	6,200	13,900	0		
LEJ	4249	Domain 4 - Heart & Stroke	80,000	66,600	89,800	1,500	0		
LEJ	4250	Epiic 1305 Basic	0	405,000	436,500	0	0		
LEJ	4252	Cancer Genomic Best Practices	367,800	308,500	336,400	318,100	185,800		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4255	Diabetes/Heart & Stroke With State & Local Strategies - 1817	0	0	0	604,100	244,300		
LEJ	4257	Cancer Management, Leadership & Coordination	28,000	31,600	0	0	0		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4260	Heart & Stroke/Diabetes With State & Local Strategies - 1817	0	0	0	471,700	1,584,000		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4261	Arthritis - Federal - Centers for Disease Control and Prevention	246,400	285,700	246,900	260,900	256,300	\$ 305,345	\$ 305,345
LEJ	4263	Arthritis Administration on Aging	47,200	0	0	0	0		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4264	Arthritis Chronic Pain Self Management	0	0	142,700	285,900	186,700	\$-	\$-

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4265	Administration on Aging Arthritis	0	218,500	384,100	94,000	2,300	\$-	\$-



Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4271	Asthma-Federal	548,600	579,400	497,600	496,900	517,500	\$ 550,000	\$ 550,000
LEJ	4273	Northeast Genomics Project	0	9,600	0	0	0		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4285	Worksite Lactation Accommodation	0	0	0	0	1,800		
LEJ	4287	Physical Activity, Nutrition, Obesity - 1807	0	0	0	597,100	838,300		
LEJ	4289	Student Vision Screenings	0	0	0	5,800	32,800		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4290	Local Health Department Physical Activity, Nutrition, and Obesity Prevention Blk	838,700	850,800	840,700	951,500	145,700		
LEJ	4292	Nutrition Physical Activity, Obesity Tobacco Settlement	117,100	134,800	143,100	162,300	158,700		
LEJ	4295	Student Asthma Relief	0	0	0	0	5,300		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4297	Centers for Disease Control and Prevention Obesity	221,900	228,800	228,300	0	0		
LEJ	4299	Domain 2 - School Health	77,000	67,200	71,500	0	0		
LEJ	4320	Local Health Department Violence And Injury Prevention Program Prevention Block	122,500	123,100	114,000	122,800	30,300		
LEJ	4321	Injury Prevention Maternal and Child Health	393,500	431,900	372,900	306,300	325,800		
LEJ	4323	Violence And Injury Prevention Program Competitive Projects - Preventive Health Block Grant	300,800	310,300	305,700	309,500	1,124,200		
LEJ	4324	National Violent Death Review	179,500	183,800	203,300	218,100	253,600		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4325	Child Fatality Review	10,000	13,100	10,000	8,800	8,900		
LEJ	4326	Utah Evidence-Based Falls Prevention	258,100	87,000	(900)	0	0		
LEJ	4327	Prescription Drug Overdose Death Prevention	146,200	0	0	0	0		
LEJ	4328	Community Injury Prevention	385,800	384,900	387,700	365,400	365,900		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4329	Rape Crisis Center- Preventive Health Block Grant	36,200	30,800	79,200	56,700	25,500		
LEJ	4330	Rape Prevention Education	360,600	450,100	646,300	383,600	659,300		
LEJ	4331	Rape Prevention - State	0	0	0	0	169,100		
LEJ	4332	Harold Rogers Prescription Drug Monitoring Program	0	19,300	195,000	275,700	77,900		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4334	Alcohol Epidemiology Capacity	0	65,900	140,000	114,700	121,500		
LEJ	4335	Council of State and Territorial Epidemiologists Substance Abuse Indicators	0	0	0	4,900	0		
LEJ	4342	Baby Your Baby Media Campaign	0	0	0	200	0		
LEJ	4345	Baby Your Baby Outreach-Medicaid	200,000	122,000	200,000	200,000	199,500	\$ 200,000	\$ 200,000
LEJ	4348	Baby Your Baby - Children's Health Insurance Program Title 21 Federal	79,300	107,900	95,800	95,800	118,400	\$ 120,000	\$ 120,000
LEJ	4349	Health Resource Center	238,200	321,300	252,100	262,400	258,700	\$ 260,000	\$ 260,000
LEJ	4350	Violence Prevention Integration	308,800	241,100	214,700	221,600	214,700		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4351	Violence Prevention Surveillance	80,600	6,700	0	0	0		
LEJ	4353	Spinal Cord and Brain Injury Fund Administration	24,400	24,100	24,700	11,800	14,100		
LEJ	4355	Drug Poisoning Prevention	456,600	259,900	222,100	231,800	240,700		
LEJ	4357	Drug Abuse & Misuse Prevention	0	0	0	0	1,234,700		
LEJ	4357	Drug Abuse and Misuse Prevention	367,700	1,474,800	2,032,200	2,933,500	0		
LEJ	4358	Naloxone Jag	20,000	0	0	0	0		
LEJ	4359	Rescue Meds In School	0	5,100	20,000	19,900	20,200		
LEJ	4360	Component 1 - Heart Disease	593,200	431,700	495,900	153,500	0		
LEJ	4361	Component 1 - Diabetes	1,397,400	1,282,300	1,071,800	350,000	0		
LEJ	4363	Component 2 - Heart Disease	1,214,900	1,159,200	1,071,600	319,100	0		
LEJ	4364	Component 2 - Diabetes	579,400	508,900	495,100	88,500	0		
LEJ	4370	Comprehensive Tobacco Centers for Disease Control and Prevention - Competitive Component	278,300	274,200	0	0	0		



Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4373	Tobacco Youth	24,100	41,800	28,600	57,900	118,600		
LEJ	4375	Tobacco Media Campaign	92,200	92,700	108,700	91,100	87,100		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4377	Tobacco Tax - Restricted Revenue	3,161,700	3,159,700	3,149,700	3,158,100	2,982,800		
LEJ	4378	Comprehensive Tobacco Centers for Disease Control and Prevention	994,500	1,000,000	994,800	914,900	1,072,700	\$ 1,047,005	\$ 1,256,406

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4379	Tobacco Settlement-State	3,841,000	3,738,900	3,578,100	3,860,500	3,507,200		
LEJ	4381	Cannabinoid Product Board	0	0	7,400	49,100	200		
LEJ	4382	Vaping/Lung Disease Education	0	0	0	0	75,000		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4387	Tobacco Prevention Non Lapsed	0	286,900	500,000	268,800	166,900		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4388	Quitline Sustainability	68,000	66,700	66,900	62,400	62,900	\$-	\$-
LEJ	4391	Sexual Assault Prevention	0	587,500	711,800	0	0		
LEJ	4393	Primary Violence Prevention	0	0	28,800	15,000	100		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4394	Alzheimer's Statewide Education	0	0	0	250,800	273,700		
LEJ	4396	Healthy Brain Initiative - Alzheimer's Association	0	25,000	0	0	0		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEJ	4397	Alzheimer State Plan	145,300	164,600	167,700	164,800	168,700		
LEJ	4398	Prevention Block Administration	56,800	59,800	97,000	117,300	101,400		
LEJ	4399	Parkinson's Disease Registry	200,000	200,700	100,100	97,500	103,500		

Appropriation	Unit	Program	Actuals (Total Funds)					Estimates	
			FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
LEK	1401	Medical Examiner	3,960,000	4,776,900	5,935,200	6,371,700	6,894,700	\$ 7,051,500	\$ 7,057,000
LEK	1402	Medical Examiner Body Transportation	528,200	537,500	642,900	648,700	822,300	\$ 926,100	\$ 660,000
LEK	1404	Office of the Medical Examiner Investigators	76,000	85,100	128,900	136,200	127,800	\$ 221,600	\$ 135,000
LEK	1405	New Office of the Medical Examiner Building Equipment	0	192,300	(8,200)	0	0	\$-	\$-
LEM	4259	Skin Cancer Donations	24,800	149,900	0	0	0	\$-	\$-
LEO	3850	Opiate Overdose Response	0	248,500	0	0	0	\$-	\$-
		<b>Grand Total</b>	<b>\$ 93,316,200</b>	<b>\$105,223,500</b>	<b>\$107,951,300</b>	<b>\$111,271,300</b>	<b>\$114,953,500</b>	<b>\$84,225,856</b>	<b>\$98,062,072</b>



Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
5820	5820	Qualified Patient Enterprise Fund	1,837,700	N/A	1	1	1	This is a new program in the Department

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
2251	4339	Traumatic Brain and Spine Rehabilitation	16,500	7%	0	0	0	
2250	4354	Traumatic Brain Injury Fund	-8,800	-4%	0	0	0	
LXA	4452	Immunization Federal - Provider Vaccine	679,800	3%	1	0	0	
LLA	3811	Local Health Department General Fund Block Grant	0	0%	0	0	0	

Appropriatio	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEA	3102	Division GRAMA Clearing Acct	-100	-100%	0	1	0	
LEA	3103	Administrative Clearing	0	N/A	0	0	0	
LEA	3105	Director's Office	226,400	76%	1	1	1	IN 2017, State Epidemiologist became partially funded in LEA and not just fully in LEH
LEA	3106	Division Support Services	62,300	26%	0	0	0	
LEA	3107	Lab Director's Office	181,000	59%	1	1	1	Increase in general fund appropriation
LEA	3110	Laboratory Finance Office	87,900	29%	0	0	0	
LEA	3113	Operations & Maintenance - New Lab	175,800	26%	1	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEA	3151	Utah Public Health Lab Non Lapsing Capital	345,300	1284%	1	1	1	Non lapsing authority
LEA	3180	Lab Information Technology Projects	-72,800	-245%	0	1	0	
LEA	3182	Lab Epidemiology Projects	-6,000	-100%	0	1	0	
LED	3210	Environmental Testing Administration	134,400	37%	0	0	0	
LED	3214	Chemistry Special Projects	-26,900	-100%	0	1	0	
LED	3215	Organic Chemistry	-22,800	-6%	0	0	0	
LED	3216	Radiation Chemistry	0	N/A	0	0	0	
LED	3218	Environmental Microbiology	19,700	15%	0	0	0	
LED	3220	Inorganic Chemistry	-21,500	-5%	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LED	3225	Metals/Radio Chemistry	-77,700	-25%	0	0	0	
LED	3235	Four Corner States Environmental Monitoring	-540,500	-72%	0	1	0	
LED	3285	Forensic Toxicology Administration	-39,400	-52%	0	1	0	
LED	3286	Law Enforcement/Office of the Medical Examiner Toxicology	190,600	15%	1	0	0	
LED	3288	Motor Vehicle Death Legislation Funds	-300	-100%	0	1	0	
LED	3294	Coverdell Grant	21,200	84%	0	1	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LED	3310	Laboratory Operations Administration	72,100	26%	0	0	0	
LED	3311	Lab Central Lab Support	145,600	877%	0	1	0	
LED	3312	Lab Central Supply Cleaning	-6,400	-206%	0	1	0	
LED	3330	Safety/Quality Assurance/Training	-58,700	-113%	0	1	0	
LED	3335	Specimen Processing	-599,200	-106%	0	1	0	
LED	3410	Newborn Screening Administration	749,200	263%	1	1	1	Newborn screening admin transferred from FHP to DCP

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LED	3415	Newborn Screening Program	3,001,800	242%	1	1	1	Newborn screening fully transferred from FHP to DCP
LED	3417	Newborn Screening Non-Lapsing	218,000	N/A	1	1	1	Non lapsing authority
LED	3418	Centers for Disease Control and Prevention Grant For Implementation of Mucopolysaccharidosis type I, Pompe & X-linked adrenoleukodystrophy	283,600	N/A	1	1	1	n/a
LED	3421	Newborn Screening/Non-Department of Health Providers	-1,755,500	-91%	0	1	0	
LED	3422	Newborn Screening Info Systems	-12,600	-75%	0	1	0	
LED	3424	Severe Combined Immunodeficiency Newborn Testing	-147,100	-100%	0	1	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LED	3425	Infectious Diseases Administration	206,900	447%	1	1	1	What appears to be a growth trend is really just increased budget for LabWare LIMS development costs. This is the Infectious Diseases admin unit, and all LabWare costs associated with Infectious Diseases as a whole go to this unit.
LED	3426	Virus Isolation Projects	0	N/A	0	0	0	
LED	3427	Immunology & Virology Testing	50,800	6%	0	0	0	
LED	3427	Immunology and Virology Testing	-215,100	-100%	0	1	0	
LED	3430	Bacteriology	80,200	238%	0	1	0	
LED	3442	Tuberculosis Federal	-32,800	-41%	0	0	0	



Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LED	3443	Tuberculosis-General Fund	-30,800	-79%	0	1	0	
LED	3450	Molecular Testing	-81,900	-82%	0	1	0	
LED	3460	Pulsenet	73,000	N/A	0	0	0	
LED	3461	Lab Arboviral	-24,100	-67%	0	1	0	
LED	3462	Rabies	-400	-100%	0	1	0	
LED	3463	Lab Capacity	-138,900	-87%	0	1	0	Unit's combined into one with activity code for grant activities.

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LED	3464	Grant-National Antimicrobial Resistance Monitoring System	5,600	N/A	0	0	0	Unit's combined into one with activity code for grant activities.
LED	3465	Lab Flu	-82,100	-100%	0	1	0	Unit's combined into one with activity code for grant activities.
LED	3466	Lab Capacity	1,928,700	7872%	1	1	1	Unit's were separated and are now combined and activities used to separate components and budgets.
LED	3466	Epidemiology, Laboratory Capacity - Lab Capacity	-54,200	-100%	0	1	0	See Line Above
LED	3467	Ebola Lab and Biosafety	-179,700	-100%	0	1	0	
LED	3468	Advanced Molecular Detection	-46,300	-81%	0	1	0	
LED	3469	Foodcore Lab	3,300	N/A	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LED	3470	Healthcare Associated Infection & Antimicrobial Resistance Lab Capacity	7,700	N/A	0	0	0	
LED	3471	Non-Flu Diagnosis & Testing	0	N/A	0	0	0	
LED	3472	Ebola, Lab & Biosafety	0	N/A	0	0	0	
LED	3473	Lab Arboviral	0	N/A	0	0	0	
LED	3474	Zika Supplemental Pers	0	N/A	0	0	0	
LED	3475	Epidemiology-Lab Capacity COVID-19 - Lab	13,100	N/A	0	0	0	
LED	3490	Epidemiology Influenza Incidence Surveillance	25,100	78%	0	1	0	
LEE	3315	Environmental Lab Certification	114,300	34%	0	0	0	
LEE	3316	Blood/Alcohol Testing	-4,700	-100%	0	1	0	

Appropriatio	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEE	3320	Clinical Laboratory Improvement Amendments Grant	59,400	47%	0	1	0	
LEH	3501	Immunization Prevention and Public Health Fund	-137,300	-100%	0	1	0	
LEH	3503	Local Health Emergency Fund	37,700	307%	0	1	0	
LEH	3505	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Treatment & Care	3,800	8%	0	0	0	
LEH	3506	Student Vaccination Exemption	24,500	N/A	0	0	0	
LEH	3508	Hepatitis A Vaccine Support For 2017/2018 Outbreak	0	N/A	0	0	0	
LEH	3510	Bureau of Epidemiology Administration	-178,300	-28%	0	0	0	
LEH	3511	Epidemiology Non-Lapsed	-10,300	-6%	0	0	0	
LEH	3512	Regional Epidemiologist	0	N/A	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3513	Human Immunodeficiency Virus Ryan White Part B Supplemental	1,050,100	176%	1	1	1	These funds are based on unspent funds from all states from the base formula award. It is a competitive grant and based on available funds from previous years awarded on demonstrated need from each state. Available funding can increase or decrease year over year.

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3517	Ryan White Title II	2,569,500	82%	1	1	1	This award is calculated by HRSA on a formula that accounts for HIV infections within each state. You will see fluctuations in the award due to the number of HIV cases reported for individuals living within Utah.

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3518	Ryan White Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Program Part B COVID-19 Response	18,200	N/A	0	0	0	
LEH	3526	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Education	-122,900	-16%	0	0	0	
LEH	3527	Human Immunodeficiency Virus Prevention Category C Project	-42,400	-100%	0	1	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3532	Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome Surveillance Federal	45,900	22%	0	0	0	
LEH	3537	Control & Prevention of Sexually Transmitted Diseases - H.B. 15	-5,300	-19%	0	0	0	
LEH	3538	STD Surveillance Network (Ssun) Sexually Transmitted Disease Surveillance	-141,100	-59%	0	1	0	



Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3545	Human Immunodeficiency Virus Ryan White Supplemental	-1,290,300	-73%	0	1	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3550	Ryan White Drug Rebate	3,841,300	124%	1	1	1	Pharmaceutical rebates depend on Part B eligible clients having health insurance. Since 2014 the Part B Program have worked diligently to increase the number of clients who are insured. This increase in the insured clients being served by the Program has influenced an increase in rebate revenue.
LEH	3555	Tuberculosis State	5,800	2%	0	0	0	
LEH	3560	Refugee Tuberculosis Wfs	19,300	25%	0	0	0	
LEH	3561	H.B. 430 Genital Mutilation	6,000	N/A	0	0	0	

Appropriatio	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3562	Refugee Tuberculosis Wfs	-964,600	-63%	0	1	0	
LEH	3563	Refugee Mental Health - Salt Lake County Funding	-57,300	-31%	0	0	0	
LEH	3564	Refugee Mental Health	-26,000	-58%	0	1	0	
LEH	3567	Tuberculosis Elimination	-96,500	-39%	0	0	0	
LEH	3570	Pandemic Flu Planning	-104,400	-100%	0	1	0	
LEH	3570	Refugee General	57,700	N/A	0	0	0	
LEH	3572	Refugee Gen Federal	-28,300	-100%	0	1	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3572	Refugee Pandemic Planning	0	N/A	0	0	0	
LEH	3584	Strengthening Surveillance of Hcv & Hbv Infections Grant	241,000	N/A	1	1	1	New Federal Grant Received end of 2017
LEH	3585	Human Immunodeficiency Virus Hepatitis	-9,600	-16%	0	0	0	
LEH	3586	Viral Hepatitis Epidemiologic Profiles	0	N/A	0	0	0	
LEH	3587	Syringe Service Program	476,200	N/A	1	1	1	New funding received 2018
LEH	3588	Fentanyl - Division of Substance Abuse and Mental Health	15,000	N/A	0	0	0	
LEH	3589	Comprehensive Syringe Exchange Plan	0	N/A	0	0	0	
LEH	3591	Sexually Transmitted Disease Federal Grant	-98,900	-19%	0	0	0	
LEH	3704	Food and Drug Administration Po	-3,900	-95%	0	1	0	

Appropriatio	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3706	Food Safety	52,900	13%	0	0	0	
LEH	3707	Summer Food	-2,000	-32%	0	0	0	
LEH	3708	Utah Risk Factor Study	0	N/A	0	0	0	
LEH	3717	Environmental Public Health Track	-18,000	-2%	0	0	0	
LEH	3721	Health Care & Other Facilities For Utah - National Electronic Disease Surveillance System	-39,200	-100%	0	1	0	
LEH	3723	Centers for Disease Control and Prevention Bio Sense	-129,900	-75%	0	1	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3725	Environmental Epidemiology	45,000	62%	0	1	0	
LEH	3734	Council of State and Territorial Epidemiologists Influenza Hospitalization Surveillance Project	221,500	186%	1	1	1	Increased Federal Award of Funds in 2019 and 2020
LEH	3742	Hepatitis Testing & Treatment	43,800	N/A	0	0	0	
LEH	3742	Hepatitis Testing and Treatment	0	N/A	0	0	0	
LEH	3744	Task Force For Global Health Ecr Implementation	0	N/A	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3746	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Administration	400	N/A	0	0	0	Costs originally being pushed to CARES through Dec 2020. In 2021, costs will increase to meet needs. For 2022, costs should decrease as needs decrease and this funding source is depleted.

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3747	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Epidemiology	0	N/A	0	0	0	Costs originally being pushed to CARES through Dec 2020. In 2021, costs will increase to meet needs. For 2022, costs should decrease as needs decrease and this funding source is depleted.



Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3749	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Utah Public Health Laboratory	249,200	N/A	1	1	1	Costs originally being pushed to CARES through Dec 2020. In 2021, costs will increase to meet needs. For 2022, costs should decrease as needs decrease and this funding source is depleted.
LEH	3751	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Mobile Testing	1,600	N/A	0	0	0	Costs originally being pushed to CARES through Dec 2020. In 2021, costs will increase to meet needs. For 2022, costs should decrease as needs decrease and this funding source is depleted.

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3755	Surv Atsor Appletree	90,800	56%	0	1	0	
LEH	3758	Epidemiology-Lab Capacity - COVID-19	78,300	N/A	0	0	0	
LEH	3759	Cross-Cutting Outbreak Investigat, Resp & Reporting	2,300	N/A	0	0	0	
LEH	3760	Affordable Care Act Outbreak	-78,100	-100%	0	1	0	
LEH	3761	Affordable Care Act Actc Elr	0	N/A	0	0	0	
LEH	3761	Health Information Systems - Pcv	-308,600	-100%	0	1	0	
LEH	3762	Affordable Care Act Actc Elr	-124,000	-52%	0	1	0	
LEH	3764	Legionella	21,700	N/A	0	0	0	
LEH	3765	Affordable Care Act West Nile Virus	-76,700	-100%	0	1	0	
LEH	3765	Ep Arboviral	13,500	N/A	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3766	Affordable Care Act Foodcore	-128,600	-67%	0	1	0	
LEH	3767	Affordable Care Act Healthcare Associated Infection	-9,100	-100%	0	1	0	
LEH	3767	Epidemiology Healthcare Associated Infection Coordination/Prevention	0	N/A	0	0	0	
LEH	3772	Evaluation	-8,000	-100%	0	1	0	
LEH	3773	Epidemiology Flu	-64,500	-82%	0	1	0	
LEH	3774	Epidemiology Capacity	-218,200	-98%	0	1	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3775	Epidemiology Capacity - Cap	1,913,600	6465%	1	1	1	Beginning in FY 2020, several units were combined into 3775.
LEH	3776	Affordable Care Act Pcv13 Cap	-1,700	-100%	0	1	0	
LEH	3777	Affordable Care Act Mcv	-40,700	-100%	0	1	0	
LEH	3778	Affordable Care Act Cre	-4,700	-100%	0	1	0	
LEH	3780	Ebola Healthcare Associated Infection Assessment	-33,400	-22%	0	0	0	
LEH	3781	Ebola Healthcare Associated Infection Prevention	-243,000	-100%	0	1	0	
LEH	3782	Crosscutting - Enhanced Evaluation	-48,100	-100%	0	1	0	
LEH	3783	Epidemiology Healthcare Associated Infection	0	N/A	0	0	0	
LEH	3783	Healthcare Associated Infection Prevention Infrastructure Pcv	-68,600	-100%	0	1	0	
LEH	3784	Enhanced Prion Surveillance	-27,500	-91%	0	1	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3785	Epidemiology - National Electronic Disease Surveillance System	-98,500	-100%	0	1	0	
LEH	3785	Healthcare Associated Infection State	116,900	N/A	0	0	0	
LEH	3786	Mycotics	-7,400	-83%	0	1	0	
LEH	3787	Prevent Infection & Reduce Inter-Individual Transmission	-200	-100%	0	1	0	
LEH	3788	Advance Interoperability Thru Healthcare Information Technology	-68,200	-100%	0	1	0	
LEH	3789	Epidemiology Electronic Case Reporting	-1,300	-100%	0	1	0	
LEH	3790	Epidemiology Zika Registry	0	N/A	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	3791	Nonflu Respiratory Diseases	0	N/A	0	0	0	
LEH	3792	Epidemiology Healthcare Associated Infection	18,600	N/A	0	0	0	
LEH	3793	Ep Arboviral	0	N/A	0	0	0	
LEH	3795	Enhanced Evaluation Capacity	17,900	N/A	0	0	0	
LEH	3796	Healthcare Associated Infection Coordination, Prevention & Stewardship	49,600	N/A	0	0	0	
LEH	3797	Zika Supplemental	0	N/A	0	0	0	
LEH	3798	Zika Supplemental Personnel	0	N/A	0	0	0	
LEH	3799	Vaccine Preventable Disease Surveillance	26,800	N/A	0	0	0	
LEH	3820	Infertility Study	0	N/A	0	0	0	
LEH	4131	Utah Statewide Immunization Information System State	-50,200	-13%	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	4133	Utah Statewide Immunization Information System Private Donations	121,200	169%	0	1	0	
LEH	4135	Utah Statewide Immunization Information System Prevention and Public Health Fund 2012 Capacity Building	-3,000	-100%	0	1	0	
LEH	4136	Prevention and Public Health Fund 15 Interoperability	-198,900	-100%	0	1	0	
LEH	4137	Utah Statewide Immunization Information System Enhancing System (Afix)	-64,200	-100%	0	1	0	
LEH	4139	Utah Statewide Immunization Information System Supplemental	230,000	N/A	1	1	1	Supplemental Federal Funding received in 2019 and 2020

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEH	4451	Immunization Tsf	93,100	19%	0	0	0	
LEH	4452	Immunization Federal	153,900	5%	1	0	0	
LEH	4453	Prevention and Public Health Fund - Human Papillomavirus Vaccination	-28,100	-100%	0	1	0	
LEJ	3800	Phc Crisis Response	47,700	N/A	0	0	0	
LEJ	3801	Phc Jurisdictional Recovery	181,100	N/A	1	1	1	Program Description Doesn't Match Chart of Accounts
LEJ	3802	Phc Biosurveillance	614,300	N/A	1	1	1	Program Description Doesn't Match Chart of Accounts
LEJ	3803	Phc Information Management	265,700	N/A	1	1	1	Program Description Doesn't Match Chart of Accounts
LEJ	3804	Phc Countermeasures	169,300	N/A	1	1	1	Program Description Doesn't Match Chart of Accounts
LEJ	3805	Phc Jurisdictional Recovery	16,500	N/A	0	0	0	



Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	3806	Utah Overdose Data To Action	1,737,700	N/A	1	1	1	Federal Grant in this unit beginning in 2019
LEJ	3814	Prescription Drug Data Quality Improvement	622,900	N/A	1	1	1	Grant Began October 2018

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	3815	Public Safety & Public Health Info Partnerships	155,800	N/A	1	1	1	Funding began SFY 2019
LEJ	3821	Utah Nonfatal Suicide Surveillance	79,700	N/A	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	3825	Victims of Crime Public Awareness and Outreach	222,400	N/A	1	1	1	Funding began 2020
LEJ	3830	Utah Produce Incentives/Double Up Food Bucks	237,600	N/A	1	1	1	This is new funding. FY 2020 is the first full year of program implementation.
LEJ	3831	Utah Food Bucks	19,000	N/A	0	0	0	
LEJ	3840	Bewise Family Support (Association of State and Territorial Health Officials)	0	N/A	0	0	0	
LEJ	3841	Cancer Population Health Approaches	6,300	N/A	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	3852	Enhancing Surveillance of Opioid Mortality & Morbidity	40,500	N/A	0	0	0	
LEJ	3853	Falls Prevention (Prevention and Public Health Fund)	179,500	N/A	1	1	1	Funding began 2018
LEJ	3854	Stop The Opidemic Campaign	0	N/A	0	0	0	
LEJ	3855	Opioid Overdose Death Reduction	603,600	N/A	1	1	1	Funding began 2018
LEJ	3856	Opioid Misuse & Overdose Prevention	391,500	N/A	1	1	1	Funding began 2018
LEJ	3856	Opioid Misuse and Overdose Prevention	0	N/A	0	0	0	
LEJ	3857	Traumatic Brain Injury State Partnership Program Partner State Funding	95,800	N/A	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	3858	Utah Drug Enforcement Administration 360 Program	0	N/A	0	0	0	
LEJ	3859	Essentials For Childhood	366,000	N/A	1	1	1	Funding began 2018
LEJ	3860	Sudden Unexpected Infant Death	79,500	N/A	0	0	0	
LEJ	3861	Sudden Death In Youth Surveillance	9,400	N/A	0	0	0	
LEJ	3862	Opiate Abuse Prevention Pamphlet	1,500	N/A	0	0	0	
LEJ	4211	Health Promotion Administration State	21,400	9%	0	0	0	
LEJ	4212	A Healthier You	-12,800	-100%	0	1	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4213	Youth Risk Behavior Survey-Federal	30,900	63%	0	1	0	
LEJ	4216	School Health Consultant	-7,100	-7%	0	0	0	
LEJ	4217	Centers for Disease Control and Prevention School Health	-126,500	-100%	0	1	0	
LEJ	4218	Health Promotion Activities	-9,800	-12%	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4219	Improving Health Disabilities	137,800	N/A	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4220	WISEWOMAN (BeWise Program)	-460,600	-31%	0	0	0	



Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4221	Breast & Cervical Cancer - State	-5,700	-1%	0	0	0	
LEJ	4222	Breast & Cervical Cancer - Federal	-57,100	-2%	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4223	National Comprehensive Cancer Control	-220,200	-42%	0	0	0	
LEJ	4225	Colorectal Screening-Federal	-2,200	-100%	0	1	0	
LEJ	4226	Cancer Policy Implementation	-7,300	-100%	0	1	0	
LEJ	4227	Cancer Koman Foundation	78,700	2249%	0	1	0	
LEJ	4228	Cervical Cancer Education-State	-1,000	-6%	0	0	0	
LEJ	4229	Prostate Cancer Support	-200	-100%	0	1	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4230	Diabetes/Hypertension Risk Factors - 1815	1,506,900	N/A	1	1	1	This is new funding. FY 2020 is the first full year of program implementation.

Appropriatio	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4231	Cardio Vascular- Preventive Health Block Grant	140,300	N/A	0	0	0	
LEJ	4232	Cardio Vascular- Preventive Health Block Grant	0	N/A	0	0	0	
LEJ	4233	Association of State and Territorial Health Officials Cardiovascular Health Collaboration	32,700	N/A	0	0	0	
LEJ	4235	Sup Domain 3 - Heart Disease	-149,800	-100%	0	1	0	
LEJ	4236	Heart & Stroke Risk Factors - 1815	0	N/A	0	0	0	
LEJ	4237	Centers for Disease Control and Prevention Heart Disease	-260,300	-100%	0	1	0	
LEJ	4238	Eppicc 1305 Basic Component Physical Activity, Nutrition, and Obesity	-104,500	-100%	0	1	0	
LEJ	4239	Domain 3 - Diabetes	-71,400	-100%	0	1	0	
LEJ	4240	Domain 4 - School Health	-37,700	-100%	0	1	0	

Appropriatio	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4241	Diabetes Control - Federal	-130,200	-100%	0	1	0	
LEJ	4244	Sup Domain 4 - Diabetes	-192,900	-100%	0	1	0	
LEJ	4245	Chc Basic - School	-43,500	-100%	0	1	0	
LEJ	4247	Centers for Disease Control and Prevention Diabetes	-159,000	-100%	0	1	0	
LEJ	4248	HealthInsight Diabetes Prevention (National Diabetes Prevention Program)	0	N/A	0	0	0	
LEJ	4249	Domain 4 - Heart & Stroke	-80,000	-100%	0	1	0	
LEJ	4250	Epiic 1305 Basic	0	N/A	0	0	0	
LEJ	4252	Cancer Genomic Best Practices	-182,000	-49%	0	1	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4255	Diabetes/Heart & Stroke With State & Local Strategies - 1817	244,300	N/A	1	1	1	This is new funding as of FY19. FY 2019 was the first year of program implementation. However, funding code was updated to be 4260.
LEJ	4257	Cancer Management, Leadership & Coordination	-28,000	-100%	0	1	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4260	Heart & Stroke/Diabetes With State & Local Strategies - 1817	1,584,000	N/A	1	1	1	This is new funding. FY 2020 is the first full year of program implementation.

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4261	Arthritis - Federal - Centers for Disease Control and Prevention	9,900	4%	0	0	0	
LEJ	4263	Arthritis Administration on Aging	-47,200	-100%	0	1	0	



Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4264	Arthritis Chronic Pain Self Management	186,700	N/A	1	1	1	Funding began 2018

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4265	Administration on Aging Arthritis	2,300	N/A	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4271	Asthma-Federal	-31,100	-6%	0	0	0	
LEJ	4273	Northeast Genomics Project	0	N/A	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4285	Worksite Lactation Accommodation	1,800	N/A	0	0	0	
LEJ	4287	Physical Activity, Nutrition, Obesity - 1807	838,300	N/A	1	1	1	This is new funding. FY 2020 is the first full year of program implementation.
LEJ	4289	Student Vision Screenings	32,800	N/A	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4290	Local Health Department Physical Activity, Nutrition, and Obesity Prevention Blk	-693,000	-83%	0	1	0	
LEJ	4292	Nutrition Physical Activity, Obesity Tobacco Settlement	41,600	36%	0	0	0	
LEJ	4295	Student Asthma Relief	5,300	N/A	0	0	0	

Appropriatio	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4297	Centers for Disease Control and Prevention Obesity	-221,900	-100%	0	1	0	
LEJ	4299	Domain 2 - School Health	-77,000	-100%	0	1	0	
LEJ	4320	Local Health Department Violence And Injury Prevention Program Prevention Block	-92,200	-75%	0	1	0	
LEJ	4321	Injury Prevention Maternal and Child Health	-67,700	-17%	0	0	0	
LEJ	4323	Violence And Injury Prevention Program Competitive Projects - Preventive Health Block Grant	823,400	274%	1	1	1	
LEJ	4324	National Violent Death Review	74,100	41%	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4325	Child Fatality Review	-1,100	-11%	0	0	0	
LEJ	4326	Utah Evidence-Based Falls Prevention	-258,100	-100%	0	1	0	
LEJ	4327	Prescription Drug Overdose Death Prevention	-146,200	-100%	0	1	0	
LEJ	4328	Community Injury Prevention	-19,900	-5%	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4329	Rape Crisis Center- Preventive Health Block Grant	-10,700	-30%	0	0	0	
LEJ	4330	Rape Prevention Education	298,700	83%	1	1	1	Increase in Federal Grant Award in 2018 and 2020
LEJ	4331	Rape Prevention - State	169,100	N/A	1	1	1	New funding in 2020
LEJ	4332	Harold Rogers Prescription Drug Monitoring Program	77,900	N/A	0	0	0	



Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4334	Alcohol Epidemiology Capacity	121,500	N/A	0	0	0	
LEJ	4335	Council of State and Territorial Epidemiologists Substance Abuse Indicators	0	N/A	0	0	0	
LEJ	4342	Baby Your Baby Media Campaign	0	N/A	0	0	0	
LEJ	4345	Baby Your Baby Outreach-Medicaid	-500	0%	0	0	0	
LEJ	4348	Baby Your Baby - Children's Health Insurance Program Title 21 Federal	39,100	49%	0	1	0	
LEJ	4349	Health Resource Center	20,500	9%	0	0	0	
LEJ	4350	Violence Prevention Integration	-94,100	-30%	0	0	0	

Appropriatio	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4351	Violence Prevention Surveillance	-80,600	-100%	0	1	0	
LEJ	4353	Spinal Cord and Brain Injury Fund Administration	-10,300	-42%	0	0	0	
LEJ	4355	Drug Poisoning Prevention	-215,900	-47%	0	1	0	
LEJ	4357	Drug Abuse & Misuse Prevention	1,234,700	N/A	1	1	1	Funding began in 2020
LEJ	4357	Drug Abuse and Misuse Prevention	-367,700	-100%	0	1	0	
LEJ	4358	Naloxone Jag	-20,000	-100%	0	1	0	
LEJ	4359	Rescue Meds In School	20,200	N/A	0	0	0	
LEJ	4360	Component 1 - Heart Disease	-593,200	-100%	0	1	0	
LEJ	4361	Component 1 - Diabetes	-1,397,400	-100%	0	1	0	
LEJ	4363	Component 2 - Heart Disease	-1,214,900	-100%	0	1	0	
LEJ	4364	Component 2 - Diabetes	-579,400	-100%	0	1	0	
LEJ	4370	Comprehensive Tobacco Centers for Disease Control and Prevention - Competitive Component	-278,300	-100%	0	1	0	

Appropriatio	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4373	Tobacco Youth	94,500	392%	0	1	0	
LEJ	4375	Tobacco Media Campaign	-5,100	-6%	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4377	Tobacco Tax - Restricted Revenue	-178,900	-6%	0	0	0	
LEJ	4378	Comprehensive Tobacco Centers for Disease Control and Prevention	78,200	8%	0	0	0	FY21 was a shortened fiscal year. Unit 4388 funding was incorporated into Unit 4378 for the next 5 year cycle into 1 grant identified by 2 components. This was a determination from OSH. Each component requires a separate budget and workplan. Additional funding was also awarded to address a new requirement to fund an additional organization.

Appropriatio	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4379	Tobacco Settlement-State	-333,800	-9%	0	0	0	
LEJ	4381	Cannabinoid Product Board	200	N/A	0	0	0	
LEJ	4382	Vaping/Lung Disease Education	75,000	N/A	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4387	Tobacco Prevention Non Lapsed	166,900	N/A	1	1	1	The Trend is based on available one-time allocated funds. The supplemental funds are marked priority spending.

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4388	Quitline Sustainability	-5,100	-8%	0	0	0	Unit 4388 funding was incorporated into Unit 4378 for the next 5 year cycle into 1 grant identified by 2 components. This was a determination from OSH. Each component requires a separate budget and workplan.
LEJ	4391	Sexual Assault Prevention	0	N/A	0	0	0	
LEJ	4393	Primary Violence Prevention	100	N/A	0	0	0	

Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4394	Alzheimer's Statewide Education	273,700	N/A	1	1	1	This is a new program that was not implemented until FY2019.
LEJ	4396	Healthy Brain Initiative - Alzheimer's Association	0	N/A	0	0	0	



Appropriation	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEJ	4397	Alzheimer State Plan	23,400	16%	0	0	0	
LEJ	4398	Prevention Block Administration	44,600	79%	0	1	0	
LEJ	4399	Parkinson's Disease Registry	-96,500	-48%	0	1	0	

Appropriatio	Unit	Program	FY 16 to FY 20 growth	% Growth	\$150,000	46%	Explain?	Agency Explanation of Trend
LEK	1401	Medical Examiner	2,934,700	74%	1	1	1	Chronic underfunding and growth in jurisdictional caseload as defined in statute.
LEK	1402	Medical Examiner Body Transportation	294,100	56%	1	1	1	Chronic underfunding and growth in jurisdictional caseload as defined in statute.
LEK	1404	Office of the Medical Examiner Investigators	51,800	68%	0	1	0	Chronic underfunding and growth in jurisdictional caseload as defined in statute.
LEK	1405	New Office of the Medical Examiner Building Equipment	0	N/A	0	0	0	
LEM	4259	Skin Cancer Donations	-24,800	-100%	0	1	0	
LEO	3850	Opiate Overdose Response	0	N/A	0	0	0	
		<b>Grand Total</b>	21,637,300	23%				

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
5820	5820	Qualified Patient Enterprise Fund	<p>(1) Open a bill file to change the name of the Cannabinoid Product Board to something like the Cannabis Research Review Board to better reflect what the Board does, (2) Explore an auto renewal option for cannabis licensees and provide recommendations for whether or not to pursue this option as well as cost implications by October 1, 2021, and (3) Propose new annual performance measures for the base budget by October 1, 2021.</p>	<p>Support - We support staff recommendations (1), (2), and (3).</p>

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
2251	4339	Traumatic Brain and Spine Rehabilitation	(1) Report by October 1, 2021 on the net impact to the program of implementing cost sharing. Include how much would need to be charged and to which clients in order to justify the cost of the cost sharing program. (2) Update performance measure targets from 40 to 80 for clients referred that receive a neuro-psych exam or MRI and from 60 to 100 for the number of community and professional education presentations and trainings.	(1) Oppose - The Division opposes this recommendation. As the TBI rehabilitation fund currently cost shares, and sees TBI rehabilitation fund as a payer of last resort. (2) Support - Increasing the target to 80 would be appropriate as a result of increased providers and rates for additional outreach. Increasing the target to 100 would be appropriate.
2250	4354	Traumatic Brain Injury Fund	Report by October 1, 2021 on potential revenue and other impacts to provide dedicated funding sources for the Traumatic Brain Injury Fund and the Pediatric Neuro-Rehabilitation Fund to replace the \$200,000 ongoing General Fund currently going to the Traumatic Brain Injury Fund under at least the following scenarios: (1) redirecting existing revenue sources going to the Spinal Cord and Brain Injury Rehabilitation Fund and (2) identifying new funding sources.	Support - The Division support this recommendation.
LXA	4452	Immunization Federal - Provider Vaccine		
LLA	3811	Local Health Department General Fund Block Grant		

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>Staff Recommendations, To Be Considered by Subcommittee in June</b>	<b>Agency Position?</b>
LEA	3102	Division GRAMA Clearing Acct		
LEA	3103	Administrative Clearing		
LEA	3105	Director's Office	Open a bill to close the following General Fund Restricted Accounts which have not had any revenues or expenditures since beginning in FY 2017: (1) Children with Cancer Support Restricted Account and (2) Children with Heart Disease Support Restricted Account.	Support - The Division supports this recommendation
LEA	3106	Division Support Services		
LEA	3107	Lab Director's Office		
LEA	3110	Laboratory Finance Office	Report by September 1, 2021 on the costs to replace core laboratory equipment on a reasonable schedule and some options to pay for it as well as a list of significant equipment purchased in the last three years and the funding sources used to buy the equipment.	Support - The Division supports this recommendation
LEA	3113	Operations & Maintenance - New Lab		

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>Staff Recommendations, To Be Considered by Subcommittee in June</b>	<b>Agency Position?</b>
LEA	3151	Utah Public Health Lab Non Lapsing Capital		
LEA	3180	Lab Information Technology Projects		
LEA	3182	Lab Epidemiology Projects		
LED	3210	Environmental Testing Administration		
LED	3214	Chemistry Special Projects		
LED	3215	Organic Chemistry		
LED	3216	Radiation Chemistry		
LED	3218	Environmental Microbiology		
LED	3220	Inorganic Chemistry		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LED	3225	Metals/Radio Chemistry		
LED	3235	Four Corner States Environmental Monitoring		
LED	3285	Forensic Toxicology Administration	The Department of Health shall report to the Social Services Appropriations Subcommittee by January 1, 2022 on any legal changes needed to allow for state laboratory staff to provide testimony via technology for court cases.	Support - The Division supports the recommendation of reporting to the Social Services Subcommittee by January 1, 2022 on any legal changes needed to allow for state laboratory staff to provide testimony via technology for court cases. The ability to more fully utilize technology based testimony would improve the efficiency of our workflow. Please note, currently the "Rules of Criminal Procedure" committee is in the midst of drafting change to rules to better allow (but non mandate) technology based testimony. This rule needs to approved by the Utah Supreme Court prior to implementation.
LED	3286	Law Enforcement/Office of the Medical Examiner Toxicology		
LED	3288	Motor Vehicle Death Legislation Funds		
LED	3294	Coverdell Grant		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LED	3310	Laboratory Operations Administration		
LED	3311	Lab Central Lab Support		
LED	3312	Lab Central Supply Cleaning		
LED	3330	Safety/Quality Assurance/Training		
LED	3335	Specimen Processing		
LED	3410	Newborn Screening Administration		



Appropriatio	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LED	3415	Newborn Screening Program	Report by October 1, 2021 on options regarding medically-required formula for Phenylketonuria (PKU) patients to: (1) investigate the possibility or impact of outreach to self-funded employer health insurance plans to cover medical formula, (2) status of request for proposal to establish a contract with a pharmacy to supply medical food (bulk purchasing is not a viable option), and (3) investigate and establish what the total serviceable market is.	Support
LED	3417	Newborn Screening Non-Lapsing		
LED	3418	Centers for Disease Control and Prevention Grant For Implementation of Mucopolysaccharidosis type I, Pompe & X-linked adrenoleukodystrophy		
LED	3421	Newborn Screening/Non-Department of Health Providers		
LED	3422	Newborn Screening Info Systems		
LED	3424	Severe Combined Immunodeficiency Newborn Testing		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LED	3425	Infectious Diseases Administration		
LED	3426	Virus Isolation Projects		
LED	3427	Immunology & Virology Testing		
LED	3427	Immunology and Virology Testing		
LED	3430	Bacteriology		
LED	3442	Tuberculosis Federal		

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>Staff Recommendations, To Be Considered by Subcommittee in June</b>	<b>Agency Position?</b>
LED	3443	Tuberculosis-General Fund		
LED	3450	Molecular Testing		
LED	3460	Pulsenet		
LED	3461	Lab Arboviral		
LED	3462	Rabies		
LED	3463	Lab Capacity		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LED	3464	Grant-National Antimicrobial Resistance Monitoring System		
LED	3465	Lab Flu		
LED	3466	Lab Capacity		
LED	3466	Epidemiology, Laboratory Capacity - Lab Capacity		
LED	3467	Ebola Lab and Biosafety		
LED	3468	Advanced Molecular Detection		
LED	3469	Foodcore Lab		

<b>Appropriatio</b>	<b>Unit</b>	<b>Program</b>	<b>Staff Recommendations, To Be Considered by Subcommittee in June</b>	<b>Agency Position?</b>
LED	3470	Healthcare Associated Infection & Antimicrobial Resistance Lab Capacity		
LED	3471	Non-Flu Diagnosis & Testing		
LED	3472	Ebola, Lab & Biosafety		
LED	3473	Lab Arboviral		
LED	3474	Zika Supplemental Pers		
LED	3475	Epidemiology-Lab Capacity COVID-19 - Lab		
LED	3490	Epidemiology Influenza Incidence Surveillance		
LEE	3315	Environmental Lab Certification		
LEE	3316	Blood/Alcohol Testing		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEE	3320	Clinical Laboratory Improvement Amendments Grant		
LEH	3501	Immunization Prevention and Public Health Fund		
LEH	3503	Local Health Emergency Fund		
LEH	3505	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Treatment & Care		
LEH	3506	Student Vaccination Exemption		
LEH	3508	Hepatitis A Vaccine Support For 2017/2018 Outbreak		
LEH	3510	Bureau of Epidemiology Administration		
LEH	3511	Epidemiology Non-Lapsed		
LEH	3512	Regional Epidemiologist		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3513	Human Immunodeficiency Virus Ryan White Part B Supplemental		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3517	Ryan White Title II		



Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3518	Ryan White Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Program Part B COVID-19 Response		
LEH	3526	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome Education		
LEH	3527	Human Immunodeficiency Virus Prevention Category C Project		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3532	Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome Surveillance Federal		
LEH	3537	Control & Prevention of Sexually Transmitted Diseases - H.B. 15		
LEH	3538	STD Surveillance Network (Sun) Sexually Transmitted Disease Surveillance	Report by September 24, 2021 on the following regarding gonorrhea in Utah: (1) what is currently being done to address the issue? (2) What has been the recent trend in Utah's infection rates? (3) what is the likely impacts and consequences to how many citizens based on our current gonorrhea rates? (4) recommendations for any additional steps and associated costs.	Support - The Division support this recommendation. The program only receives \$32,000 in state general fund appropriations associated with 2008 H.B. 15 Control and Prevention of Sexually Transmitted Diseases.  The federal grant is solely focused on enhanced sentinel surveillance - so preventing gonorrhea infectious is not an objective of the funding.

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3545	Human Immunodeficiency Virus Ryan White Supplemental		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3550	Ryan White Drug Rebate		
LEH	3555	Tuberculosis State		
LEH	3560	Refugee Tuberculosis Wfs		
LEH	3561	H.B. 430 Genital Mutilation		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3562	Refugee Tuberculosis Wfs		
LEH	3563	Refugee Mental Health - Salt Lake County Funding		
LEH	3564	Refugee Mental Health		
LEH	3567	Tuberculosis Elimination		
LEH	3570	Pandemic Flu Planning		
LEH	3570	Refugee General		
LEH	3572	Refugee Gen Federal		

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>Staff Recommendations, To Be Considered by Subcommittee in June</b>	<b>Agency Position?</b>
LEH	3572	Refugee Pandemic Planning		
LEH	3584	Strengthening Surveillance of Hcv & Hbv Infections Grant		
LEH	3585	Human Immunodeficiency Virus Hepatitis		
LEH	3586	Viral Hepatitis Epidemiologic Profiles		
LEH	3587	Syringe Service Program		
LEH	3588	Fentanyl - Division of Substance Abuse and Mental Health		
LEH	3589	Comprehensive Syringe Exchange Plan		
LEH	3591	Sexually Transmitted Disease Federal Grant		
LEH	3704	Food and Drug Administration Po		

Appropriatio	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3706	Food Safety		
LEH	3707	Summer Food		
LEH	3708	Utah Risk Factor Study		
LEH	3717	Environmental Public Health Track		
LEH	3721	Health Care & Other Facilities For Utah - National Electronic Disease Surveillance System		
LEH	3723	Centers for Disease Control and Prevention Bio Sense		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3725	Environmental Epidemiology		
LEH	3734	Council of State and Territorial Epidemiologists Influenza Hospitalization Surveillance Project		
LEH	3742	Hepatitis Testing & Treatment		
LEH	3742	Hepatitis Testing and Treatment		
LEH	3744	Task Force For Global Health Ecr Implementation		



Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3746	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Administration		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3747	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Epidemiology		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3749	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Utah Public Health Laboratory		
LEH	3751	Paycheck Protection Program and Health Care Enhancement Act - Enhancing Detection - Mobile Testing		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3755	Surv Atsor Appletree		
LEH	3758	Epidemiology-Lab Capacity - COVID-19		
LEH	3759	Cross-Cutting Outbreak Investigat, Resp & Reporting		
LEH	3760	Affordable Care Act Outbreak		
LEH	3761	Affordable Care Act Actc Elr		
LEH	3761	Health Information Systems - Pcv		
LEH	3762	Affordable Care Act Actc Elr		
LEH	3764	Legionella		
LEH	3765	Affordable Care Act West Nile Virus		
LEH	3765	Ep Arboviral		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3766	Affordable Care Act Foodcore		
LEH	3767	Affordable Care Act Healthcare Associated Infection		
LEH	3767	Epidemiology Healthcare Associated Infection Coordination/Prevention		
LEH	3772	Evaluation		
LEH	3773	Epidemiology Flu		
LEH	3774	Epidemiology Capacity		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3775	Epidemiology Capacity - Cap		
LEH	3776	Affordable Care Act Pcv13 Cap		
LEH	3777	Affordable Care Act Mcv		
LEH	3778	Affordable Care Act Cre		
LEH	3780	Ebola Healthcare Associated Infection Assessment		
LEH	3781	Ebola Healthcare Associated Infection Prevention		
LEH	3782	Crosscutting - Enhanced Evaluation		
LEH	3783	Epidemiology Healthcare Associated Infection		
LEH	3783	Healthcare Associated Infection Prevention Infrastructure Pcv		
LEH	3784	Enhanced Prion Surveillance		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3785	Epidemiology - National Electronic Disease Surveillance System		
LEH	3785	Healthcare Associated Infection State		
LEH	3786	Mycotics		
LEH	3787	Prevent Infection & Reduce Inter-Individual Transmission		
LEH	3788	Advance Interoperability Thru Healthcare Information Technology		
LEH	3789	Epidemiology Electronic Case Reporting		
LEH	3790	Epidemiology Zika Registry		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	3791	Nonflu Respiratory Diseases		
LEH	3792	Epidemiology Healthcare Associated Infection		
LEH	3793	Ep Arboviral		
LEH	3795	Enhanced Evaluation Capacity		
LEH	3796	Healthcare Associated Infection Coordination, Prevention & Stewardship		
LEH	3797	Zika Supplemental		
LEH	3798	Zika Supplemental Personnel		
LEH	3799	Vaccine Preventable Disease Surveillance		
LEH	3820	Infertility Study		
LEH	4131	Utah Statewide Immunization Information System State		



Appropriatio	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	4133	Utah Statewide Immunization Information System Private Donations		
LEH	4135	Utah Statewide Immunization Information System Prevention and Public Health Fund 2012 Capacity Building		
LEH	4136	Prevention and Public Health Fund 15 Interoperability		
LEH	4137	Utah Statewide Immunization Information System Enhancing System (Afix)		
LEH	4139	Utah Statewide Immunization Information System Supplemental		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEH	4451	Immunization Tsf		
LEH	4452	Immunization Federal		
LEH	4453	Prevention and Public Health Fund - Human Papillomavirus Vaccination		
LEJ	3800	Phc Crisis Response		
LEJ	3801	Phc Jurisdictional Recovery		
LEJ	3802	Phc Biosurveillance		
LEJ	3803	Phc Information Management		
LEJ	3804	Phc Countermeasures		
LEJ	3805	Phc Jurisdictional Recovery		

Appropriatio	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	3806	Utah Overdose Data To Action		
LEJ	3814	Prescription Drug Data Quality Improvement		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	3815	Public Safety & Public Health Info Partnerships		
LEJ	3821	Utah Nonfatal Suicide Surveillance		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	3825	Victims of Crime Public Awareness and Outreach		
LEJ	3830	Utah Produce Incentives/Double Up Food Bucks		
LEJ	3831	Utah Food Bucks		
LEJ	3840	Bewise Family Support (Association of State and Territorial Health Officials)		
LEJ	3841	Cancer Population Health Approaches		

Appropriatio	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	3852	Enhancing Surveillance of Opioid Mortality & Morbidity		
LEJ	3853	Falls Prevention (Prevention and Public Health Fund)		
LEJ	3854	Stop The Opidemic Campaign		
LEJ	3855	Opioid Overdose Death Reduction		
LEJ	3856	Opioid Misuse & Overdose Prevention		
LEJ	3856	Opioid Misuse and Overdose Prevention		
LEJ	3857	Traumatic Brain Injury State Partnership Program Partner State Funding		

<b>Appropriation</b>	<b>Unit</b>	<b>Program</b>	<b>Staff Recommendations, To Be Considered by Subcommittee in June</b>	<b>Agency Position?</b>
LEJ	3858	Utah Drug Enforcement Administration 360 Program		
LEJ	3859	Essentials For Childhood		
LEJ	3860	Sudden Unexpected Infant Death		
LEJ	3861	Sudden Death In Youth Surveillance		
LEJ	3862	Opiate Abuse Prevention Pamphlet		
LEJ	4211	Health Promotion Administration State		
LEJ	4212	A Healthier You		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4213	Youth Risk Behavior Survey-Federal		
LEJ	4216	School Health Consultant		
LEJ	4217	Centers for Disease Control and Prevention School Health		
LEJ	4218	Health Promotion Activities		



Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4219	Improving Health Disabilities		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4220	WISEWOMAN (BeWise Program)		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4221	Breast & Cervical Cancer - State		
LEJ	4222	Breast & Cervical Cancer - Federal		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4223	National Comprehensive Cancer Control		
LEJ	4225	Colorectal Screening-Federal		
LEJ	4226	Cancer Policy Implementation		
LEJ	4227	Cancer Koman Foundation		
LEJ	4228	Cervical Cancer Education-State		
LEJ	4229	Prostate Cancer Support		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4230	Diabetes/Hypertension Risk Factors - 1815		

Appropriatio	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4231	Cardio Vascular- Preventive Health Block Grant		
LEJ	4232	Cardio Vascular- Preventive Health Block Grant		
LEJ	4233	Association of State and Territorial Health Officials Cardiovascular Health Collaboration		
LEJ	4235	Sup Domain 3 - Heart Disease		
LEJ	4236	Heart & Stroke Risk Factors - 1815		
LEJ	4237	Centers for Disease Control and Prevention Heart Disease		
LEJ	4238	Eppicc 1305 Basic Component Physical Activity, Nutrition, and Obesity		
LEJ	4239	Domain 3 - Diabetes		
LEJ	4240	Domain 4 - School Health		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4241	Diabetes Control - Federal		
LEJ	4244	Sup Domain 4 - Diabetes		
LEJ	4245	Chc Basic - School		
LEJ	4247	Centers for Disease Control and Prevention Diabetes		
LEJ	4248	HealthInsight Diabetes Prevention (National Diabetes Prevention Program)		
LEJ	4249	Domain 4 - Heart & Stroke		
LEJ	4250	Epiic 1305 Basic		
LEJ	4252	Cancer Genomic Best Practices		

Appropriatio	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4255	Diabetes/Heart & Stroke With State & Local Strategies - 1817		
LEJ	4257	Cancer Management, Leadership & Coordination		



Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4260	Heart & Stroke/Diabetes With State & Local Strategies - 1817		

Appropriatio	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4261	Arthritis - Federal - Centers for Disease Control and Prevention		
LEJ	4263	Arthritis Administration on Aging		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4264	Arthritis Chronic Pain Self Management		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4265	Administration on Aging Arthritis		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4271	Asthma-Federal		
LEJ	4273	Northeast Genomics Project		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4285	Worksite Lactation Accommodation		
LEJ	4287	Physical Activity, Nutrition, Obesity - 1807		
LEJ	4289	Student Vision Screenings		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4290	Local Health Department Physical Activity, Nutrition, and Obesity Prevention Blk		
LEJ	4292	Nutrition Physical Activity, Obesity Tobacco Settlement		
LEJ	4295	Student Asthma Relief	(A) Delay the following request one year to 2022 and add (4) options and costs of expanding the program to more counties: Direct the Department of Health to provide (1) what specific savings were generated, (2) who received the savings, and (3) what the funding sources were for these savings for the asthma home based case management funding in Medicaid as part of its reports submitted to the Social Services Appropriations Subcommittee in October 2021 (motion passed at October 2020 meeting). (B) Report by October 1, 2021 with a prioritized list of potential actions to reduce the impacts of asthma statewide in Utah with estimated costs and benefits for each recommendation.	(A) Support - The Division supports this recommendation. Due to covid, LHDs were not able to serve as many clients in the Utah Asthma Home Visiting Program. Delaying the request will allow the UAP to have sufficient data to report on cost savings. Additionally, we support expansion opportunities to better serve those in Utah with asthma. Further discussion needs to include which counties will be selected for expansion. (B) Support - The Division supports this recommendation.

Appropriatio	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4297	Centers for Disease Control and Prevention Obesity		
LEJ	4299	Domain 2 - School Health		
LEJ	4320	Local Health Department Violence And Injury Prevention Program Prevention Block		
LEJ	4321	Injury Prevention Maternal and Child Health		
LEJ	4323	Violence And Injury Prevention Program Competitive Projects - Preventive Health Block Grant		
LEJ	4324	National Violent Death Review		



Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4325	Child Fatality Review		
LEJ	4326	Utah Evidence-Based Falls Prevention		
LEJ	4327	Prescription Drug Overdose Death Prevention		
LEJ	4328	Community Injury Prevention		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4329	Rape Crisis Center- Preventive Health Block Grant		
LEJ	4330	Rape Prevention Education		
LEJ	4331	Rape Prevention - State		
LEJ	4332	Harold Rogers Prescription Drug Monitoring Program		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4334	Alcohol Epidemiology Capacity		
LEJ	4335	Council of State and Territorial Epidemiologists Substance Abuse Indicators		
LEJ	4342	Baby Your Baby Media Campaign		
LEJ	4345	Baby Your Baby Outreach-Medicaid		
LEJ	4348	Baby Your Baby - Children's Health Insurance Program Title 21 Federal		
LEJ	4349	Health Resource Center	Report by September 24, 2021 on the pros, cons, and financial impact of (1) potentially adding a chat feature for Health's inbound call center and (2) charging the costs of the call center to the programs that use it.	Support - 1) The division supports the evaluation of pros and cons of adding a chat feature, 2) the division will evaluate expanding resources if this is an allowable activity and approved under grant funding.
LEJ	4350	Violence Prevention Integration		

<b>Appropriatio</b>	<b>Unit</b>	<b>Program</b>	<b>Staff Recommendations, To Be Considered by Subcommittee in June</b>	<b>Agency Position?</b>
LEJ	4351	Violence Prevention Surveillance		
LEJ	4353	Spinal Cord and Brain Injury Fund Administration		
LEJ	4355	Drug Poisoning Prevention		
LEJ	4357	Drug Abuse & Misuse Prevention		
LEJ	4357	Drug Abuse and Misuse Prevention		
LEJ	4358	Naloxone Jag		
LEJ	4359	Rescue Meds In School		
LEJ	4360	Component 1 - Heart Disease		
LEJ	4361	Component 1 - Diabetes		
LEJ	4363	Component 2 - Heart Disease		
LEJ	4364	Component 2 - Diabetes		
LEJ	4370	Comprehensive Tobacco Centers for Disease Control and Prevention - Competitive Component		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4373	Tobacco Youth	Report by October 1, 2021 on options to reduce the 7.8% non-compliance rate of retailers selling tobacco products to youth as well as the costs and likely impacts of each option. The report should also include how Utah's retailer non-compliance rate compares to other states.	Support - The Division supports this recommendation. We will work with our program evaluation staff and Research Institute Triangle, our independent evaluator who we are contracted with, to develop recommendations and impacts for the options identified.
LEJ	4375	Tobacco Media Campaign		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4377	Tobacco Tax - Restricted Revenue		
LEJ	4378	Comprehensive Tobacco Centers for Disease Control and Prevention	Report by October 1, 2021 in collaboration with local health departments on options to adjust the funding formula for FY 2023 to adjust for areas with higher smoking rates as well as shifting more existing funding sources to address the rates of electronic cigarette use and the pros and cons of that approach.	Support - The Division supports this recommendation. We feel like revisiting the funding formula periodically is a good idea. The current funding formula was created by local health officers with input from department staff.

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4379	Tobacco Settlement-State		
LEJ	4381	Cannabinoid Product Board		
LEJ	4382	Vaping/Lung Disease Education		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4387	Tobacco Prevention Non Lapsed		



Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4388	Quitline Sustainability		
LEJ	4391	Sexual Assault Prevention		
LEJ	4393	Primary Violence Prevention		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4394	Alzheimer's Statewide Education		
LEJ	4396	Healthy Brain Initiative - Alzheimer's Association		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEJ	4397	Alzheimer State Plan		
LEJ	4398	Prevention Block Administration		
LEJ	4399	Parkinson's Disease Registry		

Appropriation	Unit	Program	Staff Recommendations, To Be Considered by Subcommittee in June	Agency Position?
LEK	1401	Medical Examiner		
LEK	1402	Medical Examiner Body Transportation		
LEK	1404	Office of the Medical Examiner Investigators		
LEK	1405	New Office of the Medical Examiner Building Equipment		
LEM	4259	Skin Cancer Donations		
LEO	3850	Opiate Overdose Response		
		<b>Grand Total</b>		