(2,935,769)

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Department of Public Health DPH48500

Permanent Full-Time Positions

Fund	Actual FY 16	Actual FY 17	Governor Estimated FY 18	Original Appropriation FY 19	Governor Revised FY 19	Legislative FY 19	Difference Leg-Gov FY 19
General Fund	479	481	495	480	481	480	(1)
Insurance Fund	5	5	5	5	5	5	-

Budget Summary

Account	Actual FY 16	Actual FY 17	Governor Estimated FY 18	Original Appropriation FY 19	Governor Revised FY 19	Legislative FY 19	Difference Leg-Gov FY 19
Personal Services	34,814,486	33,873,646	34,038,823	34,180,177	33,342,324	33,270,303	(72,021)
Other Expenses	6,682,899	6,226,791	7,409,574	7,908,041	7,611,063	7,518,063	(93,000)
Other Current Expenses		· · · ·					
Children's Health Initiatives	2,228,871	-	-	-	2,935,769	-	(2,935,769)
Childhood Lead Poisoning	63,655	-	-	-	-	-	-
Children with Special Health							
Care Needs	978,884	-	-	-	-	-	-
Other Than Payments to Local Go	vernments	· · ·					
Community Health Services	1,801,585	1,836,832	1,655,483	1,900,431	1,478,104	1,866,646	388,542
Rape Crisis	610,838	539,966	546,942	558,104	546,942	546,942	-
Genetic Diseases Programs	235,516	-	-	-	-	-	-
Grant Payments to Local Governm	nents	·				I	
Local and District Departments of							
Health	4,367,839	4,083,916	4,144,588	4,144,588	4,171,461	4,144,588	(26,873)
School Based Health Clinics	11,597,078	10,914,012	10,618,232	11,039,012	9,973,097	10,743,232	770,135
Agency Total - General Fund	63,381,650	57,475,163	58,413,642	59,730,353	60,058,760	58,089,774	(1,968,986)
Needle and Syringe Exchange							
Program	455,105	459,414	459,416	459,416	459,416	459,416	-
Children's Health Initiatives	-	-	2,935,769	2,935,769	-	2,935,769	2,935,769
AIDS Services	4,857,414	4,766,247	4,975,686	4,975,686	4,975,686	4,975,686	-
Breast and Cervical Cancer							
Detection and Treatment	2,111,168	2,137,197	2,148,358	2,150,565	2,150,565	2,150,565	-
Immunization Services	32,728,049	34,000,473	40,897,959	48,018,326	47,107,827	48,018,326	910,499
X-Ray Screening and							
Tuberculosis Care	803,047	818,014	965,148	965,148	965,148	965,148	-
Venereal Disease Control	197,171	197,171	197,171	197,171	197,171	197,171	-
Agency Total - Insurance Fund	41,151,954	42,378,516	52,579,507	59,702,081	55,855,813	59,702,081	3,846,268
Total - Appropriated Funds	104,533,604	99,853,679	110,993,149	119,432,434	115,914,573	117,791,855	1,877,282

Account	Governor Revised FY 19	Legislative FY 19	Difference from Governor
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Policy Revisions

Return the CHI Account to the General Fund

Children's Health Initiatives

2,935,769

Account	Governor Revised FY 19	Legislative FY 19	Difference from Governor
Total - General Fund	2,935,769	-	(2,935,769)
Children's Health Initiatives	(2,935,769)	-	2,935,769
Total - Insurance Fund	(2,935,769)	-	2,935,769

Background

Historically, the majority of funding for the Children's Health Initiatives (CHI) account has been provided from the General Fund. In FY 17, it was moved from the General Fund to the non-appropriated Biomedical Research Trust Fund (\$2,339,428). The FY 18 and FY 19 Biennial Budget subsequently transferred the account to the Insurance Fund and provided \$2,935,769 for it in each fiscal year. This amount included a non-specified reduction of \$122,979 in both fiscal years from the Governor's original recommended biennial funding levels, and \$599,177 for grants to newborn regional and sickle cell disease treatment centers.

Governor

Transfer funding of \$2,935,769 to support CHI account from the Insurance Fund back to the General Fund.

Legislative

Do not return the CHI account to the General Fund.

Rollout SEBAC Attrition Savings to Agencies

Personal Services	(909,874)	(909,874)	-
Total - General Fund	(909,874)	(909,874)	-

Background

The FY 18 and FY 19 Biennial Budget assumed various savings as a result of 2017 SEBAC agreement. One of the components of the SEBAC Labor Management lapse in the biennial budget was attrition. Attrition savings are achieved by agencies actively managing the normal employee turnover in an agency. The Governor's FY 19 Revised Budget allocates \$75.1 million to various agencies to achieve savings related to attrition.

Governor

Reduce funding for Personal Services by \$909,874 to reflect this agency's portion of the attrition savings.

Legislative

Same as Governor

Annualize FY 18 Budgeted Lapses

Other Expenses	(389,978)	(389,978)	-
Community Health Services	(33,785)	(33,785)	-
Rape Crisis	(11,162)	(11,162)	-
School Based Health Clinics	(420,780)	(420,780)	-
Total - General Fund	(855,705)	(855,705)	-

Background

The Governor's FY 19 Revised Budget allocates \$217.2 million in non-SEBAC lapses to various agencies.

Governor

Reduce funding by \$855,705 to reflect this agency's portion of the non-SEBAC lapses.

Legislative

Same as Governor

Reduce Funding for SBHCs

School Based Health Clinics	(645,135)	-	645,135
Total - General Fund	(645,135)	-	645,135

Background

School Based Health Centers (SBHCs) are comprehensive primary healthcare facilities located within or on the grounds of schools. They are licensed as outpatient facilities or hospital satellite clinics. Services they offer address medical, mental, and oral health needs of students in grades pre-K through grade 12.

Governor

Reduce funding by \$645,135 for SBHCs. This reflects the elimination of \$125,000 added to the FY 18 and FY 19 Biennial Budget for a new SBHC provider in East Hartford, and the reduction of an additional \$520,135 to the School Based Health Clinics account. This is a 5% reduction from FY 18 funding committed to existing providers by the agency totaling \$10,432,406.

Account	Governor Revised FY 19	Legislative FY 19	Difference from Governor	
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Legislative

Do not reduce funding.

Reduce Funding for Local and District Health Departments

Local and District Departments of Health	(463,496)	-	463,496
Total - General Fund	(463,496)	-	463,496

Background

Pursuant to CGS Sec. 19a-207a, each district department of health and municipal health department shall provide a basic health program that includes, but is not limited to, the provision of ten services for each community served. Services include the monitoring of health status to identify and solve community health problems and investigating and diagnosing health problems and health hazards in the community.

PA 09-3 SSS restructured the DPH per capita subsidy for local and district health departments by: (1) eliminating the per capita subsidy for part-time health departments, (2) providing a \$1.18 per capita subsidy for full-time health departments that serve at least 50,000 people (CGS Sec. 19a-245), and (3) providing a \$1.85 per capita subsidy for district health departments that serve at least 50,000 people and/or at least three municipalities (CGS Sec. 19a-202).

Governor

Reduce funding by \$463,496 for Local and District Health Departments. Total account funding of \$4,171,461 reflects a 10% decrease to Local and District Health Departments per capita formula funding, as required under statute (\$4,634,956).

Legislative

Do not reduce funding.

Reduce Funding for Community Health Centers

Community Health Services	(388,542)	-	388,542
Total - General Fund	(388,542)	-	388,542

Background

The FY 16 and FY 17 Biennial Budget transferred Community Health Center (CHC) funding of \$3,894,157 in both FY 16 and FY 17 from DPH's Community Health Services account to the Department of Social Services' Medicaid account. Due to net budgeting, \$1,550,000 was appropriated to DSS in each fiscal year to reflect this transfer, which assumed a federal reimbursement rate of approximately 60%. Pursuant to Section 402(b) of PA 15-5 JSS, \$422,327 in each fiscal year remained with DPH, so that the agency could continue to provide grants to CHCs.

After budget reductions, \$334,880 remained in FY 16 for CHC grants. The Community Health Center Association of Connecticut (CHCACT) received \$278,554 of this amount and Community Health Center, Inc. received \$56,326. A total of \$358,728 was available for CHC grants in FY 17 after budget reductions. CHCACT received \$298,392 and the Community Health Center, Inc. received \$60,336. The FY 18 and FY 19 Biennial Budget reduced the Community Health Services account by more than \$200,000 in both fiscal years and included targeted savings of \$33,785 in FY 18. CHCACT is anticipated to receive \$101,348 and the Community Health Center, Inc. is anticipated to receive \$20,493 from this account in FY 18.

Governor

Reduce funding by \$388,542 to reflect the elimination of grant funding to CHCACT and the Community Health Center, Inc. from the Community Health Services account.

Legislative

Do not reduce funding.

Fund Nationally Recommended Tests in Newborn Screening Panel

Personal Services	48,750	-	(48,750)
Other Expenses	93,000	-	(93,000)
Total - General Fund	141,750	-	(141,750)
Positions - General Fund	1	-	(1)

Background

CGS Sec. 19a-55 requires that all newborns delivered in Connecticut are screened for selected genetic and metabolic disorders. Section 346 of PA 15-5 JSS increased the fee per infant screened, starting in FY 16, from \$56 to \$98. In 2017 the fee was increased

Account	Governor Revised FY 19	Legislative FY 19	Difference from Governor
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from \$98 to \$110 in the Governor's Executive Order Budget. Revenue generated from this fee is deposited into a separate, nonlapsing account, which is made available to DPH for newborn screening expenditures.

Pompe disease refers to an inherited disorder involving the buildup of glycogen in the body's cells. This accumulation in certain organs and tissues, especially muscles, impairs their ability to function normally. Mucopolysaccharidosis type I (MPS I) can negatively affect many different organs and tissues. People with severe MPS I experience a decline in intellectual function.

Governor

Provide funding of \$141,750 to expand the newborn screening panel to include two nationally recommended disorders that Connecticut does not currently screen for: Pompe Disease and MPS I. This cost, which includes support for one full-time Health Program Assistant I position, will be offset by revenues generated from increasing the newborn screening fee from \$110 to \$114.

Legislative

Do not provide funding.

Fund New School Based Health Center

School Based Health Clinics	-	125,000	125,000
Total - General Fund	-	125,000	125,000

Legislative

Provide funding of \$125,000 to support a new School Based Health Center.

General Fund Support for Behavior Analyst Licensure

Personal Services	23,271	-	(23,271)
Total - General Fund	23,271	-	(23,271)

Background

PA 17-2 JSS authorized the establishment of professional licensure for Behavior Analysts and a separate, non-lapsing account to contain licensure fee revenue (\$350 for the initial license and \$175 for annual renewal) to cover costs to DPH to implement licensure.

Governor

Provide funding of \$23,271 for a half-time Processing Technician to support Behavior Analyst licensure. Fee revenue will be redirected to the General Fund in concert with this change.

Legislative

Do not provide funding.

Current Services

TRICARE Reimbursement to Immunization Services

Immunization Services	(910,499)	-	910,499
Total - Insurance Fund	(910,499)	-	910,499

Background

The Department of Defense (DOD) voluntarily agreed to reimburse universal-coverage-vaccine states for children from military families that received vaccines through state, and not federal, resources between the end of December 2010 and June 2017. On 9/29/17, the DOD provided \$480,998.54 to DPH related to Tricare. This is approximately 35% of the total anticipated reimbursement to Connecticut of \$1,391,497.83. The Health and Welfare Fee assessment, which fully supports DPH's Immunization Services account, was reduced by this amount in the current fiscal year (FY 18). The total outstanding reimbursement amount of \$910,499 is anticipated to be received by the end of the current fiscal year. As such, the Immunization Services account may be reduced by this amount (\$910,499) in FY 19.

Governor

Reduce the appropriation for Immunization Services account by \$910,499 to reflect DOD TRICARE reimbursement.

Account	Governor Revised FY 19	Legislative FY 19	Difference from Governor
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Legislative

Do not reduce the Immunization Services account appropriation.

Fund Grants to Local and District Health Departments

Local and District Departments of Health	490,369	-	(490,369)
Total - General Fund	490,369	-	(490,369)

Background

See the write-up titled *Reduce Funding to Local and District Health Departments* under "Policy Revisions" for background on this account.

Governor

Provide funding of \$490,369 for per capita subsidies to local and district health departments, as required under existing statutes.

Legislative

Do not provide funding.

Budget Components	Governor Revised FY 19	Legislative FY 19	Difference from Governor
Original Appropriation - GF	59,730,353	59,730,353	-
Policy Revisions	(161,962)	(1,640,579)	(1,478,617)
Current Services	490,369	-	(490,369)
Total Recommended - GF	60,058,760	58,089,774	(1,968,986)
Original Appropriation - IF	59,702,081	59,702,081	-
Policy Revisions	(2,935,769)	-	2,935,769
Current Services	(910,499)	_	910,499
Total Recommended - IF	55,855,813	59,702,081	3,846,268

Totals

Positions	Governor Revised FY 19	Legislative FY 19	Difference from Governor
Original Appropriation - GF	480	480	-
Policy Revisions	1	-	(1)
Total Recommended - GF	481	480	(1)
Original Appropriation - IF	5	5	-
Total Recommended - IF	5	5	-