

STATE OF COLORADO FY 2009-10 BUDGET REQUEST CYCLE: DEPARTMENT OF HEALTH CARE POLICY AND FINANCING

Schedule 13												
Change Request for FY 2009-10 Budget Request Cycle												
Decision Item FY 2009-10 <input checked="" type="checkbox"/>		Base Reduction Item FY 2009-10 <input type="checkbox"/>			Supplemental FY 2008-09 <input type="checkbox"/>			Budget Amendment FY 2009-10 <input type="checkbox"/>				
<b>Request Title:</b>		DPA - Ombuds Program Increase less Annualization of CSEAP Program Increase						<b>Dept. Approval by:</b>		John Bartholomew <i>JB</i>		<b>Date:</b> November 3, 2008
<b>Department:</b>		Health Care Policy and Financing			<b>OSP/B Approval:</b>			<i>John</i>		<b>Date:</b> 10-21-08		
<b>Priority Number:</b>		NP-10										
		1	2	3	4	5	6	7	8	9	10	
		Prior-Year Actual	Appropriation	Supplemental Request	Total Revised Request	Base Request	Decision/ Base Reduction	November 1 Request	Budget Amendment	Total Revised Request	Change from Base (Column 5)	
	Fund	FY 2007-08	FY 2008-09	FY 2008-09	FY 2008-09	FY 2009-10	FY 2009-10	FY 2009-10	FY 2009-10	FY 2009-10	FY 2010-11	
<b>Total of All Line Items</b>	<b>Total</b>	25,363	32,346	0	32,346	32,346	49	32,395	0	32,395	44	
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
	GF	12,682	16,173	0	16,173	16,173	25	16,198	0	16,198	22	
	GFE	0	0	0	0	0	0	0	0	0	0	
	CF	0	0	0	0	0	0	0	0	0	0	
	CFE/RF	0	0	0	0	0	0	0	0	0	0	
	FF	12,681	16,173	0	16,173	16,173	24	16,197	0	16,197	22	
<b>(1) Executive Director's Office; (A) General Administration, Workers' Compensation</b>	<b>Total</b>	25,363	32,346	0	32,346	32,346	49	32,395	0	32,395	44	
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
	GF	12,682	16,173	0	16,173	16,173	25	16,198	0	16,198	22	
	GFE	0	0	0	0	0	0	0	0	0	0	
	CF	0	0	0	0	0	0	0	0	0	0	
	CFE/RF	0	0	0	0	0	0	0	0	0	0	
	FF	12,681	16,173	0	16,173	16,173	24	16,197	0	16,197	22	
<b>Non-Line Item Request:</b>		None										
<b>Letternote Revised Text:</b>		None										
<b>Cash or Federal Fund Name and COFRS Fund Number:</b>		FF: Title XIX										
<b>Reappropriated Funds Source, by Department and Line Item Name:</b>		N/A										
<b>Approval by OIT?</b>		Yes: <input type="checkbox"/> No: <input type="checkbox"/>		N/A: <input checked="" type="checkbox"/>								
<b>Schedule 13s from Affected Departments:</b>		N/A										