

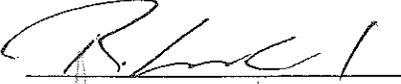
**Schedule 13**

**Funding Request for the FY 2018-19 Budget Cycle**

Department of Public Health and Environment

Request Title

**R-01 Addressing Critical Public Health Threats**

Dept. Approval By: 

Supplemental FY 2017-18

Change Request FY 2018-19

OSPB Approval By: 

Budget Amendment FY 2018-19

Summary Information	Fund	FY 2017-18		FY 2018-19		FY 2019-20
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
<b>Total</b>		\$9,812,657	\$0	\$9,869,759	\$318,941	\$326,578
FTE		49.2	0.0	49.2	3.7	4.1
<b>Total of All Line Items Impacted by Change Request</b>	GF	\$734,222	\$0	\$743,125	\$318,941	\$326,578
	CF	\$6,287,226	\$0	\$6,335,425	\$0	\$0
	RF	\$332,382	\$0	\$332,382	\$0	\$0
	FF	\$2,458,827	\$0	\$2,458,827	\$0	\$0

Line Item Information	Fund	FY 2017-18		FY 2018-19		FY 2019-20
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
<b>Total</b>		\$4,692,696	\$0	\$4,749,798	\$167,796	\$184,414
FTE		49.2	0.0	49.2	2.6	2.9
03. Laboratory Services -- Chemistry and Microbiology	GF	\$412,833	\$0	\$421,736	\$167,796	\$184,414
Personal Services	CF	\$2,533,030	\$0	\$2,581,229	\$0	\$0
	RF	\$152,706	\$0	\$152,706	\$0	\$0
	FF	\$1,594,127	\$0	\$1,594,127	\$0	\$0

<b>Total</b>		\$4,302,765	\$0	\$4,302,765	\$16,959	\$2,850
FTE		0.0	0.0	0.0	0.0	0.0
03. Laboratory Services -- Chemistry and Microbiology	GF	\$321,389	\$0	\$321,389	\$16,959	\$2,850
Operating Expenses	CF	\$2,937,000	\$0	\$2,937,000	\$0	\$0
	RF	\$179,676	\$0	\$179,676	\$0	\$0
	FF	\$864,700	\$0	\$864,700	\$0	\$0

	<b>Total</b>	<b>\$817,196</b>	<b>\$0</b>	<b>\$817,196</b>	<b>\$134,186</b>	<b>\$139,314</b>
05. Water Quality Control	FTE	0.0	0.0	0.0	1.1	1.2
Division, (C) Clean Water	GF	\$0	\$0	\$0	\$134,186	\$139,314
Program -- Water Quality	CF	\$817,196	\$0	\$817,196	\$0	\$0
Improvement	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0

CF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	If Yes, see schedule 4 fund source detail.
RF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
FF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
Requires Legislation?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
Type of Request?	Department of Public Health and Environment Prioritized Request				
Interagency Approval or Related Schedule 13s:	None				



### ***Cost and FTE***

- The Department requests \$318,941 General Fund and 3.7 FTE in FY 2018-19 and \$326,578 General Fund and 4.1 FTE for FY 2019-20 and beyond to address critical public health threats in the State Lab (Lab) and the Water Quality Control Division (WQCD). This will improve the Department's ability to sustain minimum levels of essential analytical testing, technical assistance, and response.

### ***Current Program***

- The Department conducts technical assistance and laboratory testing activities for a broad range of chemical contaminants to ensure safe drinking water and protect citizens from exposure to potentially hazardous chemicals present in the environment.

### ***Problem or Opportunity***

- The State Lab and Water Divisions have critical funding gaps in the two following areas: culture independent diagnostic tests (CIDT, foodborne illnesses) and Cyanotoxins in State waters.

### ***Consequences of Problem***

- If the Department does not receive the requested General Funds, the Department will not have the resources needed to protect citizens from foodborne, waterborne, and other diseases.
- Without the requested resources for CIDT, CDPHE anticipates having to divert other resources and staff within the Divisions from other activities such as inspections in the Water Division, and diagnostic testing for diseases such as influenza and Zika in the State Lab.
- Without resources dedicated to the emerging issue of Cyanotoxins, recreational and drinking water contamination could go undetected or there could be delays in response leading to serious illness or death for people and animals.

### ***Proposed Solution***

- Due to factors including emerging health concerns, changes in laboratory diagnostic services, and inflation of the cost of laboratory medical supplies, the Department requests General Fund support for personal services and operational funding to keep pace with the increasing Department need to protect public health and the environment in the following areas:
- \$171,848 General Fund and 2.4 FTE in FY 2018-19 and \$174,546 General Fund and 2.7 FTE in FY 2019-20 and beyond for CIDT.
- \$147,094 General Fund and 1.3 FTE in FY 2018-19 and \$152,033 and 1.4 FTE in FY 2019-20 and beyond for Cyanotoxin monitoring and response.



# COLORADO

## Department of Public Health and Environment

John W. Hickenlooper  
Governor  
Larry Wolk  
Executive Director

FY 2018-19 Funding Request | November 1, 2017

**Department Priority: R-01**  
**Request Detail: Addressing Critical Public Health Threats**

Summary of Incremental Funding Change for FY 2018-19	Total Funds	General Fund
Addressing Critical Public Health Threats	\$318,941	\$318,941

### **Problem or Opportunity:**

The Department requests \$318,941 General Fund and 3.7 FTE in FY 2018-19 and \$326,578 General Fund and 4.1 FTE for FY 2019-20 and beyond to address critical public health threats as currently supported by the State Lab (Lab) and the Water Quality Control Division (WQCD). This request will improve the Department's ability to sustain minimum levels of essential analytical testing, technical assistance, data management and response. Specifically, the Department has experienced an urgent public health need to support testing capabilities essential to infectious disease surveillance for emerging pathogens, recovery of bacteria associated with foodborne illness, and chemical analyses of water and environmental samples. The Department conducts technical assistance and laboratory testing activities for a broad range of chemical contaminants to ensure safe drinking water and protect citizens from exposure to potentially hazardous chemicals present in the environment. This request seeks funding to address two critical public health activities.

- Culture-Independent Diagnostic Tests (CIDT)** – The public health intervention steps that prevent large-scale outbreaks rely on the early detection of disease clusters. Obtaining a bacterial culture isolate is an essential step that must occur in order to establish disease clusters that enable a linkage to be made between ill patients and the source of their infections. There has been and will continue to be an increase in clinical microbiology lab instruments that provide a test result without the need for culture. Consequently, clinical laboratories no longer generate a bacterial isolate culture for referral to the State Lab. However, as per Board of Health Regulations in place since 2015 (6 CCR 1009-1, Regulation 3) these entities must submit any clinical material that yielded a positive test result to the Lab. This means that the burden of bacterial isolate recovery from the clinical sample in support of public health investigations has shifted to the Lab over the past several years.

CIDT is the first step in enteric and respiratory surveillance activities. If the Lab does not perform CIDT testing, public health will have no resulting organism to perform further characterization including antimicrobial and virulence susceptibility testing. This will prevent public health experts from identifying and resolving the root cause of foodborne or respiratory outbreaks. If CIDT testing is not performed, public health experts will not be able to identify the source in widespread foodborne outbreaks

In 2016, 16 customers submitted 123 samples with positive findings by CIDT; in FY 2016-17, 33 customers submitted 561 samples positive by CIDT that the Lab processed to obtain a bacterial culture isolate. The Department projects to receive 1,320 samples in FY 2017-18 and 1,584 in FY 2018-19, as more private labs move away from generating cultures. Since the increase of CIDT test samples, the Lab has not received any additional funding sources to support these activities. As a result, the nine exempt staff in the chemistry and microbiology programs have been required to work overtime every month over the past year in order to meet the current testing demand. The Lab requests \$171,848 General Fund and 2.4 FTE in FY 2018-19 and \$174,546 and 2.7 FTE in FY 2019-20 and beyond to manage and sustain the CIDT function.

- 2. Cyanotoxins in state waterways and public water supply reservoirs** - Excess nutrients deposited in state waterways have resulted in the growth of algal blooms and a rapid increase of algae in an aquatic system. Algal blooms represent a significant threat to the state's lakes and reservoirs because they can produce toxins called Cyanotoxins. Cyanotoxins are harmful, and even fatal to people and animals, especially children and dogs. Colorado has experienced significant algal blooms in Cherry Creek Reservoir and other water bodies across the state, some of which contained harmful Cyanotoxins. The CDPHE Lab successfully developed and validated two testing assays to detect Cyanotoxins in water samples for use to support a monitoring program. The Department does not currently have any additional resources available to test, monitor, and address issues related to Cyanotoxins in Colorado water bodies and would benefit from having a subject matter expert to lead efforts related to Cyanotoxins.

A national study by the EPA in 2012 found 40 percent of all lakes contained Cyanotoxins. Colorado has experienced significant algal blooms in water bodies across the state; however, very limited statewide data has been collected to help water managers understand the extent of the problem. The limited data collected over the last few years showed cyanotoxin levels exceeding the EPA's health advisories. This is significant because 78 percent of all Colorado lakes and reservoirs have a classification for actual or potential water supply use. There are approximately 100 reservoirs currently being used for drinking water in the state. Nearly all lakes and reservoirs have a recreation classification that allows swimming and fishing. The Department has data indicating some of these lakes and reservoirs are capable of producing large algal blooms, but it does not have the resources to monitor whether the blooms are placing the public at risk from harmful toxins.

The Department requests \$126,441 and 1.1 FTE Scientist III in the WQCD and 0.2 FTE Laboratory Technician II in the Lab for FY 2018-19 and \$152,033 and 1.2 FTE Scientist III in the WQCD and 0.2 FTE Laboratory Technician II in the lab for FY 2019-20 and beyond. This request includes a request for funds for operating costs across the two divisions of \$20,653 in FY 2018-19 and \$16,900 in FY 2019-20 and beyond.

***Proposed Solution:***

The Department requests \$318,941 General Fund and 3.7 FTE in FY 2018-19 and \$326,578 General Fund and 4.1 FTE for FY 2019-20 and beyond to address critical public health threats as currently supported by the State Lab (Lab) and the Water Quality Control Division (WQCD). Due to factors outside of the Department's control, namely Colorado population growth and new emerging health threats, the Department requests general fund support to bring personal services and operational funding to match the Department need. Specifically, the Department proposes the following solutions:

1. **Culture-independent diagnostic tests (CIDT)** – The Department requests an increase of \$171,848 General Fund and 2.4 FTE for FY 2018-19 and \$174,546 and 2.7 FTE for FY 2019-20 and beyond for the Lab Services Division to fund the CIDT testing function. Since the volume of test samples submitted to the Lab has increased from 123 tests in FY 2015-16 to 561 tests in FY 2016-17, the Lab does not have adequate staff to manage the sample load. The addition of 2.7 FTE will ensure that samples are correctly received and routed, cultured in a timely manner, tested, and analyzed for final results. This level of FTE can handle a sample load of approximately 1300 samples and will ensure that the Lab will not have to redirect resources from other critical lab and testing functions. This increase will ensure that the Lab will have the appropriate resources to manage increased CIDT and continue the active support required by the Disease Control and Environmental Epidemiology Division for the identification of disease clusters and the performance of outbreak investigations. See Appendix A for cost breakdown detail.
  
2. **Cyanotoxins in state waterways and public water systems** – The Department requests \$147,094 General Funds and 1.3 FTE in FY 2018-19 and \$152,033 and 1.4 FTE in FY 2019-20 and beyond. This request will fund 1.1 FTE Scientist III in the WQCD to build expertise and mitigate the risk of public exposure to harmful cyanotoxins and 0.2 FTE Laboratory Technician II in the Lab to complete analytical laboratory testing on water samples at the State Lab. Additionally, the Department requests operating funds to purchase tests, fund the lab costs for testing, and provide for the use and maintenance of boats and sampling equipment. The Department will use the requested funding to monitor high-risk lakes and reservoirs throughout Colorado that have the potential of exposing the public to dangerous levels of algal toxins. The funding will allow the Department to take appropriate actions when necessary to reduce public exposure, such as working with lake and reservoir managers on posting warning signs around recreational water bodies. See Appendix A for cost breakdown detail.

Please refer to attached Appendix A: Personal Services and Cost Detail to Address Critical Public Health Threats for details on position duties and a personnel services and operating cost analysis by division.

The proposed solution enhances the Department’s response to addressing critical public health threats in two key areas by:

- Ensuring that the State Lab has sufficient resources to manage increasing demand for tests across the state;
- Allowing the Department to dedicate resources to develop and implement more robust algal bloom monitoring to identify cyanotoxin risk in Colorado;

***Anticipated Outcomes:***

If the Department receives the requested General Funds to address critical public health threats in Colorado, the Department anticipates the following outcomes:

- The Lab will have the ability to provide the necessary level of testing for CIDT, and cyanobacterial toxin:
  - 1,300 CIDT tests will be performed
  - 70 Cyanotoxin tests will be performed – 30 directly submitted to the Lab from customers and 40 to monitor Cyanotoxins in 20 lakes/reservoirs in Colorado.

- The WQCD would be able to proactively detect and address Cyanotoxins, reducing the health risk to the public. Specifically, having a subject matter expert leading the initiative will allow development and implementation of a robust algal bloom monitoring program that will provide valuable data to drinking water providers that use reservoirs and lakes impacted by Cyanotoxins, and to all who recreate in and on Colorado reservoirs and lakes. Additionally, the Department’s target performance measure to effectively monitor algal blooms will include a sampling of 20 high risk lakes/reservoirs annually.
- Using the test results, the Department would be able to provide effective and accurate health risk communication regarding exposures to environmental contaminants

This request aligns with three goals in the Department’s 2016-2019 Strategic Plan. The request aligns with Goal 1: “Implement the plans supporting health and environmental priorities” and Goal 2: “Increase CDPHE’s efficiency, effectiveness, and elegance.” This request also directly aligns with Goal 5: “Prepare and respond to all emerging issues”.

Moreover, this request for the General Fund support for critical public health laboratory testing aligns with the Governor’s Vision 2018 Environment and Energy goal - “Protect Colorado drinking water and waterways.”

***Assumptions and Calculations:***

The Department requests \$318,941 General Fund and 3.7 FTE in FY 2018-19 and \$326,578 General Fund and 4.1 FTE for FY 2019-20 and beyond to address critical public health threats as currently supported by the State Lab (Lab) and the Water Quality Control Division (WQCD).

Please see the attached Appendix A – Personal Services and Cost Detail to Address Critical Public Health Threats, which provides an analysis of the FTE Calculations, the duties related to the FTE, and specific program costs.

R-01 Addressing Critical Public Health Threats  
Appendix A

**Summary of Expenses by Function**

		<b>FY 2018 - 19</b>	<b>FY 2019-20</b>
<b>CIDT</b>	Personal Services	\$ 154,889	\$ 171,696
	FTE	2.4	2.7
	FTE Operating Costs	\$ 16,959	\$ 2,850
	Program Operating Costs		
	<b>Total</b>	<b>\$ 171,848</b>	<b>\$ 174,546</b>
<b>Lab Services</b>	<b>2.7 FTE</b>	<b>\$ 171,848</b>	<b>\$ 174,546</b>
<b>WQCD</b>			
<b>Cyanotoxins</b>	Personal Services	\$ 126,441	\$ 135,133
	FTE	1.3	1.4
	FTE Operating Costs	\$ 5,653	\$ 1,900
	Program Operating Costs	\$ 15,000	\$ 15,000
	<b>Total</b>	<b>\$ 147,094</b>	<b>\$ 152,033</b>
<b>Lab Services</b>	<b>0.2 FTE</b>	<b>\$ 12,907</b>	<b>\$ 12,718</b>
<b>WQCD</b>	<b>1.2 FTE</b>	<b>\$ 134,186</b>	<b>\$ 139,314</b>
<b>GRAND TOTAL</b>		<b>\$ 318,941</b>	<b>\$ 326,578</b>

**Summary of Expenses by Division**

		<b>FY 2018 - 19</b>	<b>FY 2019-20</b>
Lab Services Division	Personal Services	\$ 167,796	\$ 184,414
	FTE	2.6	2.9
	FTE Operating Costs	\$ 16,959	\$ 2,850
	Program Operating Costs	\$ -	\$ -
	<b>Total</b>	<b>\$ 184,755</b>	<b>\$ 187,264</b>
Water Quality Control Division	Personal Services	\$ 113,533	\$ 122,414
	FTE	1.1	1.2
	FTE Operating Costs	\$ 5,653	\$ 1,900
	Program Operating Costs	\$ 15,000	\$ 15,000
	<b>Total</b>	<b>\$ 134,186</b>	<b>\$ 139,314</b>
<b>GRAND TOTAL</b>		<b>\$ 318,941</b>	<b>\$ 326,578</b>

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Appendix A

**FTE Calculation Assumptions:**

**Operating Expenses** -- Base operating expenses are included per FTE for \$500 per year. In addition, for regular FTE, annual telephone costs assume base charges of \$450 per year.

**Standard Capital Purchases** -- Each additional employee necessitates the purchase of a Personal Computer (\$900), Office Suite Software (\$330), and office furniture (\$3,473).

**General Fund FTE** -- New full-time General Fund positions are reflected in Year 1 as 0.9166 FTE to account for the pay-date shift. This applies to personal services costs only; operating costs are not subject to the pay-date shift.

Expenditure Detail		FY 2018-19		FY 2019-20	
<b>Personal Services:</b>					
Classification Title	Monthly	FTE		FTE	
Laboratory Technician II	\$3,790	2.6	\$118,248	2.9	\$131,892 (Lab Division)
PERA			\$12,002		\$13,387
AED			\$5,912		\$6,595
SAED			\$5,912		\$6,595
Medicare			\$1,715		\$1,912
STD			\$225		\$251
Health-Life-Dental			\$23,782		\$23,782
<b>Subtotal Position 1, 2.9 FTE</b>		<b>2.6</b>	<b>\$167,796</b>	<b>2.9</b>	<b>\$184,414</b>
Classification Title	Monthly Salary	FTE		FTE	
Scientist III	\$6,076	1.1	\$80,203	1.2	\$87,494 (WQCD)
PERA			\$8,141		\$8,881
AED			\$4,010		\$4,375
SAED			\$4,010		\$4,375
Medicare			\$1,163		\$1,269
STD			\$152		\$166
Health-Life-Dental			\$15,854		\$15,854
<b>Subtotal Position 2, 1.2 FTE</b>		<b>1.1</b>	<b>\$113,533</b>	<b>1.2</b>	<b>\$122,414</b>
<b>Subtotal Personal Services</b>		<b>3.7</b>	<b>\$281,329</b>	<b>4.1</b>	<b>\$306,828</b>
<b>Operating Expenses:</b>					
		FTE		FTE	
Regular FTE Operating Expenses	\$500	4.0	\$2,000	5.0	\$2,500
Telephone Expenses	\$450	4.0	\$1,800	5.0	\$2,250
PC, One-Time	\$1,230	4.0	\$4,920	-	
Office Furniture, One-Time	\$3,473	4.0	\$13,892	-	
Other					
<b>Subtotal Operating Expenses</b>			<b>\$22,612</b>		<b>\$4,750</b>
<b>TOTAL REQUEST</b>		<b>3.7</b>	<b>\$303,941</b>	<b>4.1</b>	<b>\$311,578</b>
<i>General Fund:</i>		<i>3.7</i>	<i>\$303,941</i>	<i>4.1</i>	<i>\$311,578</i>
<i>Cash funds:</i>					
<i>Reappropriated Funds:</i>					
<i>Federal Funds:</i>					

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Appendix A

**Duties and FTE Totals**

Position	Division	Duties	Hours				
<b>Culture-Independent Diagnostic Tests</b>							
Laboratory Technician II	Lab	Clinical laboratories perform rapid molecular diagnostic tests to determine the cause of a patients illness. The State Public Health Laboratory is tasked with the recovery of pathogenic bacterial isolates from patient samples that tested positive in the clinical setting. These isolates are further characterized as part of public health surveillance to understand virulence mechanisms and drug resistance profiles circulating in the community and food-borne outbreaks. Submission of patient material for various food-borne pathogens is required by Board of Health Regulations.	5544	2.4	\$	154,889	2.7 \$ 171,696
				<b>2.4</b>	<b>\$</b>	<b>154,889</b>	<b>2.7 \$ 171,696</b>
<b>Cyanotoxins</b>							
Scientist III	WQCD	Outreach - Work with Colorado Parks and Wildlife, Data Analysis - Analyze water quality data to identify Harmful Algae Bloom potential and develop a ranked list of lakes / reservoirs, Risk Analysis - Research algae bloom monitoring programs across the country to ensure quality data monitoring efforts, Field Support - Conduct field sampling related activities.	2560	1.1	\$	113,533	1.2 \$ 122,414
Laboratory Technician II	Lab	Analysis of drinking and recreational water samples for detection of levels of harmful algal toxins. Assist with providing information to public with regard to cyanotoxin testing. Receipt, storing and extracting of cyanotoxin algal and water samples in a timely manner. Assist with reagent and analytical standard preparation for instrumental analysis by LC-MS/MS or ELISA testing. Proficiency on instrumental methods to act as backup analyst for continuity of operations and quick turn-around of cyanotoxin results when needed.	490	0.2	\$	12,907	0.2 \$ 12,718
<b>TOTAL</b>			<b>8594</b>	<b>1.3</b>	<b>\$</b>	<b>126,441</b>	<b>1.4 \$ 135,133</b>
				<b>3.7</b>	<b>\$</b>	<b>281,329</b>	<b>4.1 \$ 306,828</b>
<b>Total FTE by Positions</b>							
<b>Position</b>		<b>Total Hours</b>		<b>FTE Conversion: FY 2018-19</b>		<b>FTE Conversion: FY 2019-20</b>	
Laboratory Technician II		6034		2.6		2.9	
Scientist III		2560		1.1		1.2	
		<b>8594</b>		<b>3.7</b>		<b>4.1</b>	
<b>Total FTE by Division</b>							
<b>Division</b>		<b>Total Hours</b>		<b>FTE Conversion: FY 2018-19</b>		<b>FTE Conversion: FY 2019-20</b>	
Lab		6034		2.6		2.9	
WQCD		2560		1.1		1.2	
		<b>8594</b>		<b>3.7</b>		<b>4.1</b>	

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**Program Operating Costs**

<b>Cyanotoxins</b>				
	<b>Division</b>	<b>FY 2018-19 Total</b>	<b>FY 2019-20 Total</b>	
40 tests @ \$275 each	WQCD	\$ 11,000	\$ 11,000	
Sampling Supplies	WQCD	\$ 2,000	\$ 2,000	
Boat Maintenance	WQCD	\$ 2,000	\$ 2,000	
<b>Total</b>		<b>\$ 15,000</b>	<b>\$ 15,000</b>	

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**Test History and Projections**

Lab Services	FY 2015-16	FY 2016-17	Projected FY 2017-18	Projected FY 2018-19	Hours To Perform Test	total hours needed	FTE needed
<b>CIDT testing volume</b>	123	561	1320	1584	3.5	5544	2.7
<b>Cyanotoxins</b>	Test not available / applicable	Test not available / applicable	70	70	7	490	0.2
						6034	2.9

	FY 2015-16	FY 2016-17	Projected FY 2017-18	Projected FY 2018-19
<b>Total tests performed in the Chemistry and Microbiology Unit*</b>	40600	45765	54918	65902

\*The lab also performs over 800,000 newborn screening tests per year.

**Schedule 13**

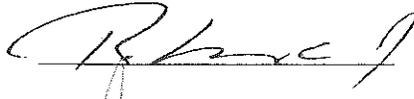
**Funding Request for the FY 2018-19 Budget Cycle**

Department of Public Health and Environment

Request Title

R-02 Man Therapy

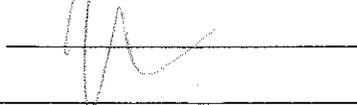
Dept. Approval By:



Supplemental FY 2017-18

Change Request FY 2018-19

OSPB Approval By:



Budget Amendment FY 2018-19

Summary Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20	
		Initial	Supplemental	Base Request	Change	Continuation
		Appropriation	Request		Request	
<b>Total</b>		\$539,007	\$0	\$547,007	\$400,000	\$400,000
FTE		2.6	0.0	2.6	0.0	0.0
<b>Total of All Line Items Impacted by Change Request</b>	GF	\$539,007	\$0	\$547,007	\$400,000	\$400,000
	CF	\$0	\$0	\$0	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0

Line Item Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20	
		Initial	Supplemental	Base Request	Change	Continuation
		Appropriation	Request		Request	
<b>Total</b>		\$539,007	\$0	\$547,007	\$400,000	\$400,000
FTE		2.6	0.0	2.6	0.0	0.0
09. Prevention Services Division, (D) Family and Community Health, (3) Injury, Suicide, and Violence Prevention -- Suicide Prevention	GF	\$539,007	\$0	\$547,007	\$400,000	\$400,000
	CF	\$0	\$0	\$0	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0

CF Letternote Text Revision Required?	Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/>	If Yes, see schedule 4 fund source detail.
RF Letternote Text Revision Required?	Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/>	
FF Letternote Text Revision Required?	Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/>	
Requires Legislation?	Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/>	
Type of Request?	Department of Public Health and Environment Prioritized Request			
Interagency Approval or Related Schedule 13s:	None			



### ***Cost and FTE***

- The Department requests \$400,000 in General Fund in FY 2018-19 and \$400,000 in General Fund in FY 2019-2020 to help reduce suicide deaths and attempts among Colorado men ages 25 to 64 by expanding the reach of the Man Therapy campaign and increasing the number of Colorado men ages 25 to 64 who visit [www.mantherapy.org](http://www.mantherapy.org).

### ***Current Program***

- Man Therapy is a website designed for working age men that aims to change the social norms around men's mental health, increase male help seeking behavior, and reduce the suicide rate among men ages 25 to 64 in Colorado.

### ***Problem or Opportunity***

- In 2015, Colorado recorded the highest number of suicide deaths to date (1,093 deaths and a rate of 20.9/100,000) and the ninth highest suicide rate in the U.S.
- Of the 1,093 suicide deaths in Colorado in 2015, 52.2 percent were among men ages 25 to 64, the highest number and rate of suicide deaths among any age and sex demographic.
- Man Therapy ([www.mantherapy.org](http://www.mantherapy.org)) is designed to address the high rate and burden of suicide among men ages 25 to 64 in Colorado measured directly by the number of monthly Colorado visitors to the website.
- Currently, there are an average of 761 monthly Colorado visits to [www.mantherapy.org](http://www.mantherapy.org), well below the Vision 2018 target of 4,167.

### ***Consequences of Problem***

- Inability to broadly disseminate Man Therapy media and messages in Colorado, resulting in fewer Colorado men becoming aware of the website and falling well below the goal of 4,167 monthly visits.

### ***Proposed Solution***

- The Department requests General Fund to expand the reach of Man Therapy and increase the number of Colorado men ages 25 to 64 who visit [www.mantherapy.org](http://www.mantherapy.org) by increasing advertising.
- Strategies will include statewide television, radio and digital media, and local media strategies in El Paso, Pueblo, Mesa, and Larimer counties, which are high burden areas of the state.
- Some data has been collected to evaluate the number of visits and visitor behavior on the website, and a larger ongoing evaluation is being performed by the Univ. of Maryland-Baltimore



# COLORADO

Department of Public Health and  
Environment

*John W. Hickenlooper*  
Governor  
*Larry Wolk*  
Executive Director

*FY 2018-19 Funding Request | November 1, 2017*

**Department Priority: R-02**  
**Request Detail: Man Therapy**

<b>Summary of Incremental Funding Change for FY 2018-19</b>	<b>Total Funds</b>	<b>General Fund</b>
Man Therapy	\$400,000	\$400,000

### ***Problem or Opportunity:***

The Department requests \$400,000 General Fund for FY 2018-19 and \$400,000 General Fund for FY2019-20 to help reduce suicide deaths and attempts among Colorado men ages 25 to 64 through the expanded reach of the Man Therapy campaign ([www.mantherapy.org](http://www.mantherapy.org)), and increase the number of Colorado men ages 25 to 64 who visit the website.

The number of suicides in Colorado and the suicide death rate have been increasing since 2009. In 2015, Colorado recorded the highest number of suicide deaths to date (1,093 deaths; a rate of 20.9/100,000). Colorado had the ninth highest suicide rate in the U.S. Of the 1,093 suicide deaths in Colorado in 2015, 52 percent were among men ages 25 to 64 (572 deaths; a rate of 38.8/100,000). Men ages 25 to 64 represent 27 percent of the Colorado population. Annually, working age men (ages 25 to 64) account for the highest number and rate of suicide deaths among any age and sex demographic. Further, research indicates men are far less interested in and likely to access traditional mental health services (American Psychological Association, 2003). While there is no evidence women experience higher rates of depression, men account for only one in 10 diagnosed cases of depression (Mental Health America, 2007), and research estimates that male depression goes 50 to 65 percent undiagnosed. Many men are resistant to asking for help, communicating inner feelings and forming groups around emotional issues (Davies and Waldon, 2004).

Based on these data, in 2012, the Department partnered with the Carson J Spencer Foundation (Denver-based non-profit) and Cactus (Denver advertising agency) to develop and launch Man Therapy ([www.mantherapy.org](http://www.mantherapy.org)), a website designed specifically for working age men that aims to change the social norms around men's mental health, increase male help-seeking behavior, and reduce the suicide rate among men in Colorado. The website includes a 20 question self-assessment designed to measure anger, anxiety, substance use, depression and suicide. The site also includes a large number of tools, tips and resources for men to seek help in a variety of venues and settings. The information is presented using humor, direct communication, and non-mental health or medical language. Resources include self-help tips, online tools, and information on local and national crisis services and local mental health services. While a variety of non-traditional services and self-help tips are included, traditional mental health and crisis services are also promoted and encouraged for men, and the site is designed to increase visitor knowledge and comfort with seeking traditional mental health services if and when necessary.

In 2011, a \$400,000 grant from the Anschutz Foundation provided the seed funding to build and launch [www.mantherapy.org](http://www.mantherapy.org). Since the website launch in 2012, small foundation grants and small amounts of Office of Suicide Prevention General Funds have been used for limited promotion using social media, small media buys like limited radio and bus advertisement runs, and through direct advertising via the dissemination of posters, coasters, business cards and other media materials throughout Colorado. These small infusions of funding have resulted in increased traffic to the website. There are not however, ongoing program funds available for large scale advertising via television, radio, and print and social media to increase the number of visitors to the website. Currently, there are an average of 761 visits to [www.mantherapy.org](http://www.mantherapy.org) from Colorado each month, which is well below the target of 4,167. The target is based on actual experience of visits during those times when the program had additional funding to promote the website. The Department set a target of 50,000 Colorado visits per year (or 4,167 monthly) by 2019 based on observed increases in web hits for other Department campaigns with similar monetary investments. Since 2015, website visits have gone down due to a decrease in funding and opportunities for direct promotion and media exposure. Without increased advertising and exposure, the program does not expect to reach its target number of monthly visits. Besides those small funding amounts, no State funding has been spent to enhance the Man Therapy campaign.

To date, the program has produced one 30-second television spot, three Man Therapy spots, a variety of billboard and bus poster designs, and a variety of taglines for electronic and social media. Materials for veterans, military, and first responder men have also been produced in the last year. Many Man Therapy promotional and advertising materials are available and ready, but the program lacks funding to disseminate the assets on a large scale and to targeted parts of the state.

***Proposed Solution:***

The Department requests \$400,000 General Fund for FY 2018-19 and \$400,000 General Fund for FY 2019-20 to help reduce suicide deaths and attempts among Colorado men ages 25 to 64 through the expanded reach of the Man Therapy campaign ([www.mantherapy.org](http://www.mantherapy.org)), and increase the number of Colorado men ages 25 to 64 who visit the website. The strategy will include television and radio buys, billboard and bus or bus shelter buys, ongoing digital media, and direct advertising using posters, business cards, coasters, stickers and other media materials. Funding will also be used to evaluate the number of visits and visitor behavior on the website.

The Department will place television ads statewide by partnering with Root Sports and Altitude Sports for purchases during Rockies, Avalanche and Nuggets games. Radio ads will run statewide through KOA radio during Rockies and Broncos games and through Altitude Sports Radio during Avalanche and Nuggets games. Digital media will include statewide reach via Facebook, Twitter, and other social media venues popular with working age men, and through paid search. Television, radio, billboards and bus buys will also target local markets in El Paso, Pueblo, Mesa, and Larimer counties. These counties carry a considerable burden of number and rate of suicide deaths among working age men in Colorado, and are counties of emphasis for the Department's Office of Suicide Prevention initiatives. Local partners in each county will help disseminate posters, coasters, stickers, and any other media materials county-wide to locations where men congregate, including workplaces.

The direct benefit of this solution is that more Coloradans will be exposed to Man Therapy messages, leading to more visits to [www.mantherapy.org](http://www.mantherapy.org). The target audience includes men ages 25 to 64 and others concerned about a man in their lives. By driving more visitors to the website, more Colorado men will be introduced to

messages and tools designed to change social norms around mental health, empowered to proactively engage in mental wellness activities, and/or act immediately if experiencing a mental health crisis.

Evidence from Australia, and more recently the state of Utah, illustrate the power of advertising to drive traffic to the website. Australia partnered with the Man Therapy team in 2013 to create and launch an Australian version of Man Therapy ([www.mantherapy.org.au](http://www.mantherapy.org.au)), which was accompanied by a nationwide advertising campaign. After initial launch, the Australian version temporarily drove more visits to the U.S. version of the site than Colorado visits.

In 2015, the state of Utah licensed Man Therapy and included advertising dollars, resulting in more visits to the website from Utah than Colorado in 2016. More recently, a May 2017 NBC News story on the suicide death of musician Chris Cornell referenced Man Therapy. In the week prior to the article, there were approximately 400 U.S. visits to the website per day. On May 20, there were 2,633 visits, followed by 1,266 visits on May 21, illustrating how media coverage and advertising drive traffic to the website.

CDPHE has a successful history with public awareness campaigns. Since 2013 CDPHE has been running an advertising campaign to promote the Colorado Quitline, a telephone service to help people quit smoking. Website traffic increases exponentially when the Program runs advertising. Without ads, the website receives approximately 4,000 unique website users to the Quitline website. When ads are running, 20,000 - 24,000 unique web users visit the site each month. This can translate into nearly 400-1,000 people each month who actually enroll in the Quitline to help them quit using tobacco. In order to improve awareness and knowledge of pregnancy-related depression among pregnant and postpartum women and their support systems, CDPHE ran a small pilot campaign for three months online in select Colorado counties. During the three-month campaign, CDPHE received more than 26,000 clicks to the website. While the campaign was running, the Colorado page of [Postpartum.net](http://Postpartum.net) received more than 15,000 visits and was the number one most visited state page on the website. By comparison, during the same time period the previous year, that page received just 2,070 visits and was the 15th most visited state page on that website.

If this request is not approved, the Department will continue to promote Man Therapy through local partners and at local conferences and events, but will not be able to promote the website broadly or on a larger scale. As a result, fewer Colorado men will be aware of the website and the program will not reach men who may be experiencing a mental health crisis.

CDPHE regularly engages in conversations with the Colorado Department of Human Services Office of Behavioral Health (OBH) regarding crisis services work. OBH supports the dissemination of Man Therapy materials within the crisis services system, and crisis resources are available to the Man Therapy audience. Man Therapy is a very different model than crisis services; however, it can be complementary. Man Therapy could drive men to engage with the crisis system and ask for help because it engages men who are the least likely to seek mental health services.

An evaluation of Man Therapy's impact on changes in the behavior of men interacting with the site is currently underway via a four-year Centers for Disease Control and Prevention funded study. Although results will not be available for another two years, visitor behavior and activity at [www.mantherapy.org](http://www.mantherapy.org) are tracked using Google Analytics, and are monitored monthly in Colorado. From 2012-2014, the Department collected more than 500 responses to a survey available at the website. Seventy-nine percent of respondents

were male, and 79 percent were ages 25 to 64. Eighty-three percent reported the website was easy to navigate, 79 percent reported the site was useful, 50 percent reported being more likely to seek professional help after visiting the site, and 80 percent reported they would recommend Man Therapy to a friend. Although not indicative of behavior change, these promising results illustrate the website is useful for that visit, suggesting it is important to find new and innovative ways to drive traffic to the site.

### ***Anticipated Outcomes:***

By increasing the amount and variety of advertising for Man Therapy in Colorado, the Department anticipates that it will meet or exceed the goal of 4,167 monthly Colorado visits to the website. This outcome is identified under the Vision 2018 goal to “. . . support the plans to reduce the impact on daily life of mental illness,” and Activity 2.1 - to “. . . provide targeted outreach, support and tools for working age men,” which is measured directly by the number of monthly Colorado visitors to [www.mantherapy.org](http://www.mantherapy.org). It is believed that more visits to the website will lead to more men engaging better in their overall mental wellness, and men feeling more empowered to seek help if dealing with mental health issues like anger, anxiety, substance abuse, depression, and/or suicidal thoughts. Long term, the Department anticipates more men will seek help prior to a crisis, resulting in fewer mental health issues escalating to crisis, and ultimately fewer men dying by suicide in Colorado.

Beyond tracking the number of visits to the website and analyzing website navigation and behavior via Google Analytics, the Department will assess long-term impact by examining death, hospitalization and emergency department suicide-related data, and data from the Behavioral Risk Factor Surveillance System on men ages 25 to 64. Because men 25 to 64 have the highest number and rate of suicide deaths in Colorado, decreasing the suicide rate among this population will decrease the overall suicide death rate in the state.

### ***Assumptions and Calculations:***

The Department calculated costs for FY 2018-2019, and beyond to increase the number of Colorado men ages 25 to 64 visiting [www.mantherapy.org](http://www.mantherapy.org).

Project costs include purchasing statewide television and radio spots, digital media, local billboards, bus buys, and production and dissemination of project materials that include posters, stickers, coasters, business cards, and other media materials. Local efforts will focus on El Paso, Pueblo, Mesa, and Larimer counties. The Department’s Office of Suicide Prevention staff will work with Cactus, the Man Therapy project partner and advertising agency, to develop and implement an advertising strategy that will have the greatest impact and reach for the \$400,000 project budget. Based on the Department’s campaigns for tobacco cessation, pregnancy-related depression, and youth marijuana use prevention, a \$400,000 media budget has the potential to well exceed the Vision 2018 target for hits to the Man Therapy website. For example, the Department’s \$495,000 young adult tobacco campaign yielded 14,000 website hits a month when the campaign was running and 94 percent of that traffic can be attributed to the advertising. The selection and dissemination of media depend on real time costs for television and radio, availability of matched or donated television and radio spots, local cost of billboards and bus advertising, and development and management of digital media activity. Each year, the Department will dedicate \$260,000 for statewide media, which could include television, radio, and digital strategies. The specific media tactics that will be deployed each year will be determined in collaboration with media buyers to ensure that strategies meet the campaign objectives in the most efficient way possible based on the available budget.

Additionally, the Department will dedicate \$140,000 to implement a variety of media strategies in counties that have the highest suicide rates. In the first year of funding, an additional \$35,000 in media buys and campaign collateral will be placed in El Paso, Pueblo, Mesa and Larimer counties, which currently have the highest suicide rates in Colorado. In year two, , the Office of Suicide Prevention will determine which counties would benefit the most from additional media placement based on annual suicide rates among men ages 25 to 65.

Executing the strategy detailed above will result in an estimated 95,000 visits and 17 million impressions to [www.mantherapy.org](http://www.mantherapy.org) per year. No additional FTE are required, as existing Office of Suicide Prevention staff manage and oversee Man Therapy projects and priorities.

### **Research and Evidence-Based Policy Review:**

The Research and Evidence-Based Policy Team has reviewed Man Therapy through the Results First inventory process. At the time of the review, Man Therapy was categorized as a program that “Needs Additional Research” in the 2017 Results First Prevention Findings report<sup>1</sup>. However, the report does mention that the program is undergoing a rigorous evaluation. The evaluation design has a strong logic model and is considered rigorous because it randomizes participants to compare help seeking-behaviors between those who are directed to the Man Therapy site and those who receive other online resources related to this subject. Data on depression, anger, suicide ideation and behavior will be measured over time. The evaluation will track whether individuals seek therapy, increase positive interactions, reduce risky behaviors, and increase coping strategies. This data could serve as the foundation for a long-term impact study, which will be necessary to assess the program’s impact on mental health for an extended period of time. Funding from the state of Colorado will allow CDPHE to expand the program’s reach, collect evaluation data, allow the Department to continue to build the evidence for Man Therapy and Man Therapy resources, and begin data collection that can serve as the foundation for a future longer term study on the program’s impacts on the health and wellbeing of participants.

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<sup>1</sup> The Prevention Findings report can be accessed on the Research and Evidence-Based Policy Initiative Website <https://sites.google.com/state.co.us/rfpfs/colorado-results-first> under Colorado Results First, reports, at [https://drive.google.com/file/d/0B5\\_3yhvPtgh-Q0pnZmhLaD11NHc/view](https://drive.google.com/file/d/0B5_3yhvPtgh-Q0pnZmhLaD11NHc/view)

**Schedule 13**

**Funding Request for the FY 2018-19 Budget Cycle**

Department of Public Health and Environment

Request Title

R-03 SharePoint Upgrade

Dept. Approval By:



Supplemental FY 2017-18

Change Request FY 2018-19

OSPB Approval By:



Budget Amendment FY 2018-19

Summary Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20	
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$2,311,694	\$0	\$2,311,694	\$212,098	\$118,098
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items Impacted by Change Request	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$0	\$0	\$0	\$0	\$0
	RF	\$2,311,694	\$0	\$2,311,694	\$212,098	\$118,098
	FF	\$0	\$0	\$0	\$0	\$0

Line Item Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20	
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$2,311,694	\$0	\$2,311,694	\$212,098	\$118,098
	FTE	0.0	0.0	0.0	0.0	0.0
01. Administration and Support, (A) Administration -- Operating Expenses	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$0	\$0	\$0	\$0	\$0
	RF	\$2,311,694	\$0	\$2,311,694	\$212,098	\$118,098
	FF	\$0	\$0	\$0	\$0	\$0

CF Letternote Text Revision Required?	Yes	No	<input checked="" type="checkbox"/>	If Yes, see schedule 4 fund source detail.
RF Letternote Text Revision Required?	Yes	No	<input checked="" type="checkbox"/>	
FF Letternote Text Revision Required?	Yes	No	<input checked="" type="checkbox"/>	
Requires Legislation?	Yes	No	<input checked="" type="checkbox"/>	
Type of Request?	Department of Public Health and Environment Prioritized Request			
Interagency Approval or Related Schedule 13s:	None			



### ***Cost and FTE***

- The Department requests \$212,098 from Reappropriated Funds (from indirect cost recoveries) in FY 2018-19 and \$118,098 in FY 2019-20 and beyond to upgrade the Department's SharePoint (SP) platform to improve efficiency and effectiveness through automation.

### ***Current Program***

- The Department currently conducts much of its digital automation of administrative functions on the SP 2010 platform.
- SP has streamlined activities such as staff requests for travel and Division requests for contracts.
- Divisions also use SharePoint for programmatic activities to include document approval workflows, records management solutions, and data capture and display.

### ***Problem or Opportunity***

- The SharePoint (SP) intranet platform version has reached end-of-life, and requires an upgrade to function correctly and allow uninterrupted utilization of department-wide digital forms, records, and workflows.
- SharePoint will no longer have technical support in 2020.

### ***Consequences of Problem***

- The Department's SharePoint intranet will continue to slow down.
- Without an upgrade, the Department cannot support the existing content, workflows, data, and records management solutions housed in SP.
- The Department will miss opportunities to expand workflows, provide more efficient search features, and evaluate data for use in enhancing the customer experience.

### ***Proposed Solution***

- The Department requests \$212,098 Reappropriated Funds (from indirect cost recoveries) in FY 2018-19 and \$118,098 in FY 2019-20 and beyond to purchase 1,350 SharePoint Online (SPO) licenses for all Department employees.
- The Department will use the requested funding to upgrade licenses, migrate existing content, and configure settings and workflows on the new platform.



**COLORADO**  
Department of Public Health and  
Environment

John W. Hickenlooper  
Governor  
Larry Wolk  
Executive Director

FY 2018-19 Funding Request | November 1, 2017

**Department Priority: R-03**  
**Request Detail: SharePoint Upgrade**

<b>Summary of Incremental Funding Change for FY 2018-19</b>	<b>Total Funds</b>	<b>Reappropriated Funds</b>
SharePoint Upgrade	\$212,098	\$212,098

**Problem or Opportunity:**

The Department requests \$212,098 from Reappropriated Funds (from indirect cost recoveries) in FY 2018-19 and \$118,098 in FY 2019-20 and beyond to upgrade the Department's SharePoint platform to improve efficiency and effectiveness through automation. The SharePoint (SP) intranet platform version has reached end-of-life, and requires an upgrade to function correctly and allow uninterrupted utilization of department-wide digital forms, records, and workflows.

The Department currently conducts much of its digital automation of administrative functions on the SP 2010 platform. SP has streamlined activities such as staff requests for travel and Division requests for contracts. Divisions also use SharePoint for programmatic activities to include document approval workflows, records management solutions, and data capture and display. SP 2010 has reached end-of-life and will no longer have technical support in 2020. Without an upgrade, the Department cannot support the existing content, workflows, data, and records management solutions housed in SP. The Department will miss opportunities to expand workflows, provide more efficient search features, and evaluate data for use in enhancing the customer experience. The following includes specific examples of negative impacts the Department will experience without the upgrade:

- Network security vulnerabilities that risk making confidential information available to unauthorized parties
- A return to paper-based forms and manual routing for signatures
- A degradation in records management and document services solutions
- Continued struggles with a lack of resources to properly administer, configure, and design SP sites and features

Additionally, the aging software limits customer service in the following ways:

- Users cannot conduct business on a mobile device
- Current enterprise search features are underpowered, and customers spend extra time trying to find what they need
- Data visualizations cannot be displayed without the use of a third-party software

All Department staff currently benefit from SP through the implementation of automated workflow solutions for common administrative needs. Several Lean and Quality Improvement (QI) events identified

the SP platform as a solution to provide modern, electronic customer solutions to simplify and automate many daily processes. For example, the SP platform hosts the Department's Travel Authorization workflow that automates the routing of business travel requests from the traveler to the final approver. This eliminates the need to rout manual forms to multiple people for multiple signatures. The automated SP workflow is more efficient and allows authorization to be provided in fewer days.

The Department's procurement and contracting workflow provides another example of benefits through automation. This workflow builds both transparency and accountability into the process. Division customers can monitor where their documents are in the approval process. This provides valuable information needed for program planning. This monitoring option also reduces the number of calls and emails Procurement and Contracts Section (PCS) staff receive to check on the status of requests.

SP also played a vital role in the Department's Accreditation with the Public Health Accreditation Board (PHAB) in 2016. Using less than \$4,000 of contractor support, Department staff collaborated with the Minnesota State Health Department to design, develop, and implement a SP site. This site allowed for the collection and submission of over 100 measures and standards by CDPHE staff with metadata. A document collection system is one of the requirements for accreditation.

Public health accreditation is a voluntary process that measures the performance of a health department against a national set of evidence-based public health standards. Accreditation demonstrates the capacity for a health department to deliver the 3 core functions and the 10 essential public health services. Public health accreditation improves the service, value, and accountability of public health agencies, as well as enhances services that can lead to healthier people and a healthier community (improved health outcomes.) Additionally, accreditation creates funding opportunities where "accredited" health departments may receive funding advantages.

### ***Proposed Solution:***

The Department requests \$212,098 Reappropriated Funds (from indirect cost recoveries) in FY 2018-19 and \$118,098 in FY 2019-20 and beyond to purchase 1,350 SharePoint Online (SPO) licenses for all Department employees. The Department will use the requested funding to upgrade licenses, migrate existing content, and configure settings and workflows on the new platform.

The solution will positively impact service delivery to CDPHE staff in a few key ways:

- Mobile – the ability to conduct business on a mobile device
- Search – increased enterprise search functionality will result in less clicks for customers
- Applications - users can create an infinite variety of apps without learning or using technical programming language such as C#
- Users may log in remotely, eliminating the need for eVPN
- Greatly improved cross-browser compatibility with Microsoft Internet Explorer and Google Chrome
- Co-Authoring of Microsoft Word, Excel, and PowerPoint files
- Drag and drop functionality when uploading documents

With the updated platform, the Department could automate many existing processes, such as work order requests for building operations, and the Department's Official Function Form. Additional projects include:

- The Communications group's upgrade of the CDPHE intranet, as classic Google Sites lose

functionality in the next 12 months

- Disease Control and Environmental Epidemiology Division (DCEED) contract tracking solution

With the requested funding, the Department has opportunities to:

- Save \$90,000 per year through a Microsoft hosted solution, honoring OIT's Cloud First initiative (as OIT will not charge the Department for hosting its intranet on OIT's servers; but, these savings will only come about two years down the road)
- Enhance customer service by offering features on mobile devices, including cellular telephones and tablets
- Improve search features to save customer time when looking for forms and documents
- Continue successful collaborative projects such as development of a mechanism to track Performance Measures related to the State's national public health accreditation,
- Improve analytics features to provide information about usage and trends
  - With improved analytics, the Department can determine the amount of participation by active users and which features are being used most heavily to allow for continued improvements to customer service.
- Increase the speed of business processes resulting in increased customer satisfaction and taxpayer savings

Failure to update the SP platform would result in loss of the approximately 270 pages of content and over 10,000 current forms, documents, and records. This will negatively impact the Department's ability to provide quality services to customers and meet department strategic goals.

Use of an online platform provides the opportunity to expand the investment that has been developed over the last 5 years. The Department has achieved multiple successes with the current platform, including:

- Using it to consolidate all Department forms and policies into one location. Prior to SP, CDPHE employees struggled to locate current versions of CDPHE policies and forms on the old Microsoft Frontpage platform.
- Transparency in the contract routing process at CDPHE to allow for real-time interactions with customers that has reduced the need for phone calls and emails. Customers can view their requests as they move through the process.
- Designing, developing, and implementing automated, paperless business processes to save money.

As an example, automated Travel Authorization forms that used to take approximately 14 days to complete now typically take five days. Since staff cannot book airfare until internally approved, and since airfare is more expensive when booked closer to the departure date (sometimes as much as \$200 per flight)<sup>1</sup>, faster approvals result in lower fares. Additionally, the Department estimates that 45 minutes are saved per form and 1,101 forms are processed per year. This allows an additional 862 hours per year that staff can perform more mission critical activities. If it is assumed that the average salary cost across the Department is \$40 per hour, the automated form has saved an estimated \$34,480 each year over the last three years. At a cost of \$33,000 to build, the Department has achieved a 200% return on investment after three years.

The Department, coordinating with multiple OIT functional areas, conducted a comparison of features, functionality, costs, and viability of four different platforms: SPO, Google, Perceptive, and Salesforce. SPO was agreed upon as the preferred solution to meet the business requirements. Please refer to the resulting OIT Solution Validation Letter, included as Appendix A.

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<sup>1</sup><https://www.cheapair.com/blog/travel-tips/when-to-buy-airline-tickets-based-on-1-5-billion-airfares/>

This request aligns with Strategic Plan Goal #2: Increasing CDPHE's efficiency, effectiveness, and elegance. Offering services and performing work in a streamlined, systematic manner reduces errors and processing time, providing better results. This request aligns with ongoing strategies such as #8: modernizing data collection and dissemination, and #9: implementing quality improvement projects. SP has increased the Department's efficiency, effectiveness, and elegance by implementing automated and paperless processes, improving speed, and reducing the number of process steps.

### ***Anticipated Outcomes:***

The Department will measure the success of the proposed solution in four primary ways:

1. The number of unique daily site visitors will increase by 20% in the first 365 days.
  - o More unique daily site visitors means more CDPHE staff are using the intranet to do business: complete forms, get documents and templates, and find information on their own, without having to contact someone.
2. 0% downtime is expected for sites, pages, and features with this Microsoft-hosted solution.
3. The number of clicks required to find a form will be reduced from 5 or more to 3 or less.
4. Conducting quarterly customer service satisfaction surveys to gauge success of the upgraded SP tools.

This proposed solution aligns with the Department's 2<sup>nd</sup> Strategic Plan Goal of increasing efficiency, effectiveness, and elegance and strategies #8 and #9, modernizing data collection and dissemination, and implementing quality improvement projects, respectively.

This solution also links to the Governor's Vision 2018 dashboard under the Quality Government Services area:

- Allowing users to access documents, forms, and information via intranet sites that are available 24/7, on any device, without the need for eVPN, provides a modern business approach. In the Department's current model, many emails, phone calls, and paper forms are required for simple processes, wasting time and frustrating users.

The Department expects to save \$90,000 annually as SP servers are retired when intranet content is migrated to the new SPO servers hosted by Microsoft. NOTE: These savings will come about two years down the road, when OIT will no longer charge the Department to host its intranet on OIT's servers.

**Assumptions and Calculations:**

The Department requests \$212,098 Reappropriated Funds (from indirect cost recoveries) in FY 2018-19 and \$118,098 in FY 2019-20 and beyond to upgrade the Department's SharePoint platform to improve efficiency and effectiveness through automation. Please see the below table for cost details related to migrating the current content to an updated platform and the ongoing software licensing costs.

<b>SP Costs for FY 2018-19: Migration of existing content to SPO &amp; Annual Licensing</b>	
Set up the SPO environment and move existing content to the new location	\$ 85,000
Migration Tool Software	\$ 6,000
Secure a Branding Solution	\$ 3,000
License Costs - \$7.29 per month per user, for 1,350 users	\$ 118,098
<b>Total:</b>	<b>\$ 212,098</b>
<b>SP Costs for FY 2019-20 and beyond: Annual Licensing</b>	
License Costs - \$7.29 per month per user, for 1,350 users	\$ 118,098
<b>Total:</b>	<b>\$ 118,098</b>

**Schedule 13**

**Funding Request for the FY 2018-19 Budget Cycle**

Department of Public Health and Environment

Request Title

**R-04 Medical Marijuana Spending Authority Adjustment**

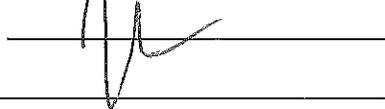
Dept. Approval By:



Supplemental FY 2017-18

Change Request FY 2018-19

OSPB Approval By:



Budget Amendment FY 2018-19

Summary Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20	
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$1,673,941	\$0	\$1,673,941	(\$166,268)	(\$166,268)
	FTE	18.6	0.0	18.6	0.0	0.0
Total of All Line Items Impacted by Change Request	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$1,673,941	\$0	\$1,673,941	(\$166,268)	(\$166,268)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0

Line Item Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20	
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$1,552,713	\$0	\$1,552,713	(\$284,888)	(\$284,888)
	FTE	18.6	0.0	18.6	0.0	0.0
02. Center for Health and Environmental Information, (C) Medical Marijuana Registry -- Personal Services	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$1,552,713	\$0	\$1,552,713	(\$284,888)	(\$284,888)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0

	Total	\$121,228	\$0	\$121,228	\$118,620	\$118,620
	FTE	0.0	0.0	0.0	0.0	0.0
02. Center for Health and Environmental Information, (C) Medical Marijuana Registry -- Operating Expenses	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$121,228	\$0	\$121,228	\$118,620	\$118,620
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0

CF Letternote Text Revision Required?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	If Yes, see schedule 4 fund source detail.
RF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
FF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
Requires Legislation?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
Type of Request?	Department of Public Health and Environment Prioritized Request				
Interagency Approval or Related Schedule 13s:	None				



# COLORADO

Department of Public  
Health & Environment

Priority: R-04  
Medical Marijuana Spending Authority Adjustment  
FY 2018-19 Decision Item

## ***Cost and FTE***

- The Medical Marijuana Registry (MMR) Program requests an on-going reduction of Personal Services Cash Fund spending authority in the amount of \$284,888, of which \$118,620 is requested to be transferred to the Operating appropriation which results in a net decrease of \$166,268 Cash Funds.

## ***Current Program***

- The Medical Marijuana Registry (MMR) program is constitutionally required to issue medical marijuana registration cards to eligible patients and provides customer service to approximately 88,000 patients, over 160 physicians, over 1,800 caregivers, and other medical marijuana stakeholders.
- Registrants currently pay a \$15 fee for their Medical Marijuana card.

## ***Problem or Opportunity***

- The MMR program has recently realized efficiencies including the implementation of the online Medical Marijuana Registration system (MMRS) and transferring customer service phone support in-house, which had previously been outsourced.
- A comprehensive analysis of salary costs indicates that the Personal Services line can be reduced by \$284,888 and still fully fund the Program's 18.6 FTE.
- Of those excess funds, the MMR program is requesting the transfer of \$118,620 to the Operating appropriation to fund annual maintenance for the new MMR computer system.

## ***Consequences of Problem***

- If spending authority realignment is not authorized, the MMR program will have excess and unnecessary personal services spending authority, for which it does not have supporting revenue.
- Without the requested transfer of spending authority to the Operating line, the program will be unable to meet MMRS online registration system maintenance costs.

## ***Proposed Solution***

- The MMR program seeks to align spending authority with operational need.
- The Department requests a transfer of \$118,620 in spending authority from the Personal Services appropriation to the Operating appropriation to allow the program to fund annual maintenance for the new MMR system.
- In addition, the program requests an additional reduction of \$166,268 from the Personal Services appropriation.
- In order to fund program expenses, the MMR Program is exploring increasing the registration fee from \$15 to a cap of \$25.
- The fee will be reduced as needed to maintain compliance with statutory fund balance requirements.



# COLORADO

## Department of Public Health and Environment

John W. Hickenlooper  
Governor  
Larry Wolk  
Executive Director

FY 2018-19 Funding Request | November 1, 2017

**Department Priority: R-04**

**Request Detail: Medical Marijuana Spending Authority Adjustment**

<b>Summary of Incremental Funding Change for FY 2018-19</b>	<b>Total Funds</b>	<b>Cash Funds</b>
Medical Marijuana Spending Authority Adjustment	(\$166,268)	(\$166,268)

### **Problem or Opportunity:**

The Medical Marijuana Registry program seeks a decrease of \$166,268 in medical marijuana cash funds and a transfer of \$118,620 from the Personal Services Line to the Operating line in response to changing program needs.

The Medical Marijuana Registry (MMR) program has recently realized operational efficiencies, specifically the successful implementation of the online Medical Marijuana Registration system (MMRS) that went live 1/1/2017. As a consequence of implementation of the new system, the program has conducted an operational review and has identified opportunities to improve customer service while reducing costs.

Historically, the MMR program has contracted with a third party call center to answer customer support phone calls from registry stakeholders including patients, physicians, and caregivers. The call center contract was paid for out of the Personal Services Appropriation. For the current fiscal year the call center vendor proposed a drastic increase to the cost of the contract from \$90,000 to \$350,000. Through the operational review, the program was able to determine that it could bring the call center functions in-house, improve customer service, and realize a cost savings. The program discontinued the external call center contract as of July 2017.

The MMR program began taking customer support calls in-house in August 2017. Due to efficiencies from the new system, existing resources can be used to perform the customer service activities previously handled by the contracted call center. The Division has reassigned 3.1 FTE of the program's existing 18.6 FTE to the new in-house customer service phone support responsibilities; therefore, the Department can create the new call center without requesting additional FTE.

The analysis of personal service needs indicates that the program can reduce approximately \$284,888 from the current personal services appropriation. Of that \$284,888, the program is requesting a reduction of \$166,268 from the Personal Services line and a transfer of \$118,620 from the Personal Services line to the Operating line. The transfer will allow the program to fund annual maintenance costs for the new system.

***Proposed Solution:***

The MMR program is requesting a reduction of \$166,268 to the Personal Services appropriation and a transfer of \$118,620 from the Personal Services appropriation to the Operating appropriation in the Medical Marijuana Cash Fund. The transferred funds will be used to pay the recently implemented MMRS system maintenance costs.

An analysis of personal services costs has indicated that the program can reduce its Personal Services appropriation by \$284,888 and still maintain sufficient spending authority to enhance customer support. The implementation of in-house phone support is more cost effective and will enhance customer service. Internal customer support staff have full access to patient and physician records, email correspondence, and provide faster and more comprehensive customer service to patients and physicians. The third party call center had limited access to the electronic system and no access to patient and physician email correspondence with the Department, thus making the arrangement less efficient. Customer support inquiries are now streamlined through internal program operations which improve customer service, and reduce the duplication of customer requests through the third party call center. This links directly to the Department's strategic plan as it will lead to improved customer service by increasing efficiency, effectiveness, and elegance.

The transfer of 3.1 FTE to the in-house call center can be accomplished within existing FTE authority and allows for a reduction in spending authority. The requested transfer of \$118,620 will fund annual maintenance of the new system. Annual maintenance costs for the new system are \$118,620 and the current operating appropriation is insufficient to cover those costs.

The Department would like to note that the Medical Marijuana Program is exploring a fee increase over the next few months. The fee increase is being considered regardless of whether this request is approved. The Board of Health reduced the Medical Marijuana Registry application fee in January 2012 from \$90 to \$35 and again from \$35 to \$15 effective February 1, 2014 in order to reduce a significant cash fund surplus in the Medical Marijuana Program Cash Fund. The \$15 fee structure was to be in place until the cash fund surplus was within the statutory limit of 16.5%, at which time it was understood that the fee would be restored to a level that would sustain the costs to administer the Registry.

In addition to the fee reductions identified above, the medical marijuana cash fund surplus has been reduced over the past several years through the following actions:

- \$10 million transferred to the Medical Marijuana Research Grant Program (SB14-155),
- \$1,068,560 transferred to the Office of Information Technology (OIT) to support the development of the Department of Revenue's Caregiver Registry (SB14-015), and
- \$675,272 towards the development of a new Registry IT system in FY 2015-16.

Although program costs are projected to decrease, the program is now at a point that it needs to increase the MMR fee in order to sustain program operations. The Department is working with stakeholders and the Board of Health on this proposed fee increase. Current projections indicate that the fee needs to increase from \$15 to \$25 in order to sustain program expenditures. It should be noted that the fee was previously \$90.

***Anticipated Outcomes:***

If approved, the program will be able to maintain the necessary personnel in-house to provide customer service phone support, answering an average of 4,900 phone calls from customers per month. Additionally, stakeholders will have customer service phone support directly from program staff when they have registration questions or need technical support.

***Assumptions and Calculations:***

The Medical Marijuana Registry program seeks a decrease of \$166,268 in medical marijuana cash funds and a transfer of \$118,620 from the Personal Services Line to the Operating line in response to changing program needs.

The program projects that it can support ongoing personal services costs for its 18.6 FTE with \$1,267,825. The current Personal Services appropriation is \$1,552,713. The difference between the projected need and the current appropriation is \$284,888.

Of the \$284,888 surplus funding, the Department is requesting to transfer \$118,620 to the Operating line to fund annual maintenance costs for the new electronic medical marijuana system. The Department is requesting an on-going reduction of the remaining \$166,268 from the Personal Services line. The \$118,620 requested for maintenance of the new system is based on the actual maintenance cost in the contract.

Due to efficiencies from the new Medical Marijuana system, the program estimates that 3.1 FTE can be transferred from application processing to an in-house dedicated customer call center. The registry receives 4,900 calls per month or 245 calls per day. One FTE can answer approximately 80 calls in one day.

$3.1 \text{ FTE} \times 80 \text{ calls per FTE} = 248 \text{ calls answered per day}$ .  $248 \text{ calls per day} \times 20 \text{ days} = 4,960 \text{ calls per month}$ .

The Department is in the process of exploring a fee increase from \$15 to \$25. The basis of this fee increase is the projected costs for maintaining the program. The projected cost of the program is \$2,105,221 for 2018-19. See the attached schedule 9 for more detail. This includes personal services, operating, and indirect costs. If there are 88,000 registrants, a \$25 fee would generate \$2,200,000. This revenue would be sufficient to cover programmatic expenditures and allow a slight reserve for contingencies such as decreases in the number of applicants to the registry.

The Department is working with Stakeholders and the Board of Health on the proposed fee increase and hopes the new fee will be in place by March of 2018.

**Schedule 13**

**Funding Request for the FY 2018-19 Budget Cycle**

Department of Public Health and Environment

Request Title

R-05 Water Quality Improvement Fund Spending Authority

Dept. Approval By:



Supplemental FY 2017-18

Change Request FY 2018-19

OSPB Approval By:



Budget Amendment FY 2018-19

Summary Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20	
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
<b>Total</b>		\$817,196	\$0	\$817,196	\$732,804	\$732,804
FTE		0.0	0.0	0.0	0.0	0.0
<b>Total of All Line Items Impacted by Change Request</b>	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$817,196	\$0	\$817,196	\$732,804	\$732,804
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0

Line Item Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20	
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
<b>Total</b>		\$817,196	\$0	\$817,196	\$732,804	\$732,804
FTE		0.0	0.0	0.0	0.0	0.0
05. Water Quality Control Division, (C) Clean Water Program – Water Quality Improvement	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$817,196	\$0	\$817,196	\$732,804	\$732,804
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0

CF Letternote Text Revision Required?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	if Yes, see schedule 4 fund source detail.
RF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
FF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
Requires Legislation?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
Type of Request?	Department of Public Health and Environment Prioritized Request				
Interagency Approval or Related Schedule 13s:	None				



# COLORADO

Department of Public  
Health & Environment

Priority: R-05  
Water Quality Improvement Fund Spending Authority  
FY 2018-19 Change Request

## ***Cost and FTE***

- The Department requests a \$732,804 increase in the Water Quality Improvement Cash Fund spending authority for FY 2018-19 and beyond to fund water quality improvement projects across the state (for example, upgrading treatment processes, upgrading sewer lines).

## ***Current Program***

- The purpose of the Water Quality Improvement Fund is to improve water quality in Colorado by providing grant funds for water quality improvement projects that use civil penalties collected by the Water Quality Control Division from water quality violations.

## ***Problem or Opportunity***

- The Department's spending authority for this fund is not at an adequate level to fully utilize the fund balance in support of Colorado's Clean Water Program.
- Increasing the spending authority from \$817,196 to \$1,550,000 in FY 2018-19 and beyond will allow full utilization of the cash fund revenue and will increase the Department's ability to support water quality improvement projects throughout the state.
- The cash fund will have a \$2.1 million balance beginning in FY 2018-19.
- There is a roughly \$5.2 billion need for water quality improvement projects in the state, especially in small communities that often do not have adequate funding for necessary water quality upgrades.

## ***Consequences of Problem***

- Without an increase in spending authority, the Department will have less funding to assist with infrastructure projects that improve water quality throughout Colorado.
- This would result in a lost opportunity to improve water quality in communities across Colorado.
- The growing fund balance will violate the spirit of Senate Bill 98-194 which established limits to the amount of cash fund reserves state departments can maintain.

## ***Proposed Solution***

- The Department requests a \$732,804 increase in the Water Quality Improvement Cash Fund spending authority for FY 2018-19 and beyond to fund water quality improvement projects across the state.



# COLORADO

Department of Public Health and  
Environment

John W. Hickenlooper  
Governor  
Larry Wolk  
Executive Director

FY 2018-19 Funding Request | November 1, 2017

**Department Priority: R-05**

**Request Detail: Water Quality Improvement Fund Spending Authority**

<b>Summary of Incremental Funding Change for FY 2018-19</b>	<b>Total Funds</b>	<b>Cash Fund</b>
Water Quality Improvement Fund Spending Authority	\$732,804	\$732,804

### **Problem or Opportunity:**

The Department requests a \$732,804 increase in the Water Quality Improvement Cash Fund spending authority for FY 2018-19 and beyond to fund water quality improvement projects across the state. The Water Quality Improvement Fund provides funding for water quality improvement projects using civil penalties from water quality violations. The Department's spending authority for this fund is not at an adequate level to fully utilize the fund balance in support of Colorado's Clean Water Program. Increasing the spending authority from \$817,196 to \$1,550,000 in FY 2018-19 and beyond will allow full utilization of the cash fund revenue and will increase the Department's ability to support water quality improvement projects throughout the state.

The Water Quality Improvement Fund was created by House Bill 06-1337 (and amended by House Bill 11-1026). The purpose of the fund is to improve water quality in Colorado by providing grant funds for water quality improvement projects that use civil penalties collected by the Water Quality Control Division from water quality violations. Beginning in 2006, all civil penalties collected for violations of the water quality program requirements are deposited into this fund. Funds can be used for the following purposes:

- Stormwater management and best practices training;
- Projects that improve water quality in the community or water body which has been impacted by a water quality violation;
- Projects that plan, design, construct, or repair stormwater projects and wastewater facilities identified in the current fiscal year Water Pollution Control Revolving Fund Intended Use Plan; and
- The non-federal financial match for the current fiscal year's nonpoint source projects funded through a Clean Water Act Section 319 grant from EPA and approved by the Water Quality Control Commission.

The Water Quality Control Commission promulgates regulations necessary to administer the grants. Entities eligible to receive funding under the program include: governmental agencies, publicly owned water systems, private, not-for-profit public water systems, not-for-profit watershed groups, not-for-profit stormwater administrators and training providers, and private landowners impacted by water quality violations. Entities that pay a Colorado Water Quality Control Act civil penalty are prohibited from receiving a grant from the fund for a period of five years from the date of payment of the penalty.

Without an increase in spending authority, the program will be limited in the number of viable clean water projects it can fund. This would result in a lost opportunity to fund statewide water quality improvements. The division conducts an annual survey that identifies the 20-year stormwater and wastewater capital needs across the state. The 2017 Water Pollution Control Revolving Fund Survey identified 510 projects totaling \$5.2 billion. Many of Colorado's communities have aging infrastructure that will require improvements or replacement within the next decade. Project needs include upgrading outdated treatment processes, repairing and/or replacing sanitary sewer collection lines, force mains, lift stations, and other critical infrastructure related to managing sewer needs. Improving or replacing aging infrastructure is particularly difficult for smaller communities in Colorado. Smaller communities rarely have the financial resources to afford large infrastructure projects. Additionally, in light of declining energy and severance tax revenues, grant funding sources in Colorado have diminished, most notably, the small communities grant fund. With fewer grant opportunities available, the Department and communities will increasingly rely on the Water Quality Improvement Fund to make projects more affordable. As an example, Galeton Water and Sanitation District received a \$101,000 grant from the Water Quality Improvement Fund. Galeton is a small community located north east of Greeley and has a population of 103 citizens. The median household income is approximately \$32,000, which is considerably less than the state median household income of \$59,448. This means that the community does not have significant financial resources. The grant has afforded them the opportunity to move forward with a full design package that may have not been feasible otherwise.

In addition, the inability to access the fund balance also violates the spirit of Senate Bill 98-194 which established limits to the amount of cash funds state departments can maintain. Without the requested increase in spending authority, the fund balance will continue to grow past the allowable limit.

***Proposed Solution:***

The Department requests an increase of \$732,804 in the Water Quality Improvement Cash Fund spending authority for FY 2018-19 and beyond to fund water quality improvement projects across the state. With an increase in the spending authority for the Water Quality Improvement Fund, the Department can fund additional water quality improvement projects. These include wastewater infrastructure, stormwater best management practices, and nonpoint source reduction projects that aid in the reduction of pollution. As discussed in the previous section, the grant funds are of great benefit to smaller and economically disadvantaged communities in Colorado.

In addition, these projects align with the governor's five priorities that fulfill his Vision 2018 of "... a truly Healthy Colorado across our people, our economy, our communities and our environment." The projects will help address the Department's strategic goal of meeting water quality standards in lakes and streams throughout Colorado. The projects will also result in further protection of drinking water supplies, improved water quality in recreational areas in the state, and will improve the environment for aquatic wildlife. Projects funded through this program have ranged from improving effluent quality at the discharge point within a stream to replacing outdated collection lines that are known to leach.

Increasing the spending authority for the Water Quality Improvement Fund will not result in an increase in FTE. Existing staff have the capacity to absorb the workload around the additional grants.

If the spending authority for the Water Quality Improvement Fund is not increased, the Department will have less funding to assist with infrastructure projects that improve water quality throughout Colorado. Finally,

the growing fund balance will violate the spirit of Senate Bill 98-194 which established limits to the amount of cash fund reserves state departments can maintain.

### ***Anticipated Outcomes:***

By increasing the spending authority for the Water Quality Improvement Fund, the division will be able to double the amount of funding available for projects to include:

- Projects that improve the water quality in communities or water bodies which have been impacted by a water quality violation. These projects will reduce bacteria levels in highly used recreational waters in Colorado by the installation of best management practices for nonpoint source pollution and/or upgrading treatment processes which enhance the quality of effluent discharging to streams.
- Planning, design, construction, or repair of stormwater projects and domestic wastewater treatment facilities identified in the Water Pollution Control Revolving Fund Intended Use Plan. These projects will reduce pollution thereby protecting drinking water and fish throughout Colorado, by upgrading treatment and conveyance systems to enhance the quality of effluent at discharge points.
- Non-federal match funding for the nonpoint source projects. These projects will reduce pollution from abandoned mines and from agricultural areas across the state by implementing best management practices to control pollution.

The Water Quality Control Division tracks projects that are funded and will continue to track these projects in the future. Information tracked includes the type of project and expected water quality improvement that will be achieved by the project.

Increasing the spending authority for the Water Quality Improvement Fund is directly related to the Department's plan, vision, and goals as the fund is focused on improving water quality in Colorado's lakes and streams.

### ***Assumptions and Calculations:***

The Department's current Long Bill appropriation for this fund is \$817,196. The \$732,804 cash fund request will increase the spending authority to a total of \$1.55 million. This amount will allow the department to spend forecasted fund revenue while reducing built-up fund balance, as outlined in Tables 1 and 2 below. As illustrated in Table 2, estimated beginning cash balance for FY 2018-19 is \$2.1 million. The requested spending authority of \$1.55 million would represent an upper limit; therefore, the Department would base grant awards on annual forecasted revenues. Additionally, the Department would base annual expenditures to align with actual cash funds available.

Table 1 below outlines the Water Quality Improvement Fund's historical and projected revenues, transfers, and expenditures. Historically, actual revenues have exceeded expenditures, allowing for the use of the fund balance for other water quality projects.

In FY 2016-17, House Bill 16-1413 used \$1,208,007 of the fund balance to provide one-time relief for the Clean Water Programs' sectors. In FY 2017-18, House Bill 17-1285 authorized the transfer of \$809,107 from the Water Quality Improvement Fund balance to the Clean Water Programs' sectors. Finally, in FY 2017-18, House Bill 17-1306 designated a total of \$1,231,803 from the Water Quality Improvement Fund over three fiscal years to finance the testing for lead in public schools' drinking water.

**Table 1: History/Forecast – Water Quality Improvement Fund Revenue versus Expenditures**

	<b>FY 15</b>	<b>FY 16</b>	<b>FY 17</b>	<b>FY 18 (Forecast)</b>	<b>FY 19 (Forecast)</b>
<b>Revenue</b>	\$1,411,048	\$1,862,673	\$1,066,534	\$1,066,534	\$1,066,534
<b>Transfers per Legislative Requirement</b>	-	-	\$1,208,007	\$1,240,910	\$400,000
<b>Expenditure</b>	\$299,621	\$247,652	\$108,279	\$817,000	\$817,000

Table 2 below provides projected cash balances for FY 2018-19 and FY 2019-20, based on the existing spending authority for the Water Quality Improvement Fund. Additionally, please refer to Appendix A – Schedule 9 for 19T0 Water Quality Improvement Fund for a detailed history of the cash fund activities since FY 2014-15.

**Table 2: Cash Balance Projections**

<b>FY 2017-18 Estimated beginning cash balance</b>	\$3,141,130
<b>FY 2017-18 Projected expenditures:</b>	
<b>HB 17-1285 (CW Fee Bill)</b>	(\$809,107)
<b>HB 17-1306 (Lead in Schools Bill)</b>	(\$431,803)
<b>Current LB Appropriation</b>	(\$817,000)
<b>FY 2017-18 Projected Revenue</b>	\$1,066,534
<b>FY 2018-19 Projected Beginning Cash Balance</b>	\$2,149,754
<b>FY 2018-19 Projected Revenue</b>	\$1,066,534
<b>FY 2018-19 Projected Expenditures</b>	(\$817,000) (\$400,000)
<b>FY 2019-20 Projected Beginning Cash Balance</b>	\$1,999,288

Schedule 9A: Cash Funds Reports  
 Department of Public Health and Environment  
 FY 2017-18 Budget Request  
 Fund 19T0 - "Water Quality Improvement"  
 25-8-608, C.R.S.

	Actual FY 2014-15	Actual FY 2015-16	Actual FY 2016-17	Appropriated FY 2017-18	Requested FY 2018-19	Projected FY 2019-20
<b>Year Beginning Fund Balance (A)</b>	<b>\$694,014</b>	<b>\$1,805,440</b>	<b>\$3,420,461</b>	<b>\$3,141,130</b>	<b>\$2,149,754</b>	<b>\$1,266,485</b>
Changes in Cash Assets	\$1,052,398	\$1,621,991	-\$249,752	-\$991,376	-\$883,269	-\$883,269
Changes in Non-Cash Assets	\$0	\$0	\$0	\$0	\$0	\$0
Changes in Long-Term Assets	\$0	\$0	\$0	\$0	\$0	\$0
Changes in Total Liabilities	\$59,029	-\$6,970	-\$29,580	\$0	\$0	\$0
<b>TOTAL CHANGES TO FUND BALANCE</b>	<b>\$1,111,426</b>	<b>\$1,615,021</b>	<b>-\$279,331</b>	<b>-\$991,376</b>	<b>-\$883,269</b>	<b>-\$883,269</b>
<b>Assets Total</b>	<b>\$1,871,747</b>	<b>\$3,493,738</b>	<b>\$3,243,986</b>	<b>\$2,252,610</b>	<b>\$1,369,341</b>	<b>\$486,072</b>
Cash (B)	\$1,871,747	\$3,493,738	\$3,243,986	\$2,252,610	\$1,369,341	\$486,072
Other Assets(Detail as necessary)	\$0	\$0	\$0	\$0	\$0	\$0
Receivables	\$0	\$0	\$0	\$0	\$0	\$0
<b>Liabilities Total</b>	<b>\$66,307</b>	<b>\$73,276</b>	<b>\$102,856</b>	<b>\$102,856</b>	<b>\$102,856</b>	<b>\$102,856</b>
Cash Liabilities (C )	\$66,307	\$73,276	\$102,856	\$102,856	\$102,856	\$102,856
Long Term Liabilities (Multi-year contract commitments)	\$0	\$0	\$0	\$0	\$0	\$0
<b>Ending Fund Balance (D)</b>	<b>\$1,805,440</b>	<b>\$3,420,461</b>	<b>\$3,141,130</b>	<b>\$2,149,754</b>	<b>\$1,266,485</b>	<b>\$383,216</b>
check	\$1,805,440	\$3,420,461	\$3,141,130	\$2,149,754	\$1,266,485	\$383,216
<b>Net Cash Assets - (B-C)</b>	<b>\$1,805,440</b>	<b>\$3,420,461</b>	<b>\$3,141,130</b>	<b>\$2,149,754</b>	<b>\$1,266,485</b>	<b>\$383,216</b>
<b>Change from Prior Year Fund Balance (D-A)</b>	<b>\$790,337</b>	<b>\$2,726,448</b>	<b>\$1,335,690</b>	<b>-\$1,270,707</b>	<b>-\$1,874,645</b>	<b>-\$1,766,538</b>
<b>Cash Flow Summary</b>						
Revenue Total	\$1,411,048	\$1,862,673	\$1,066,534	\$1,066,534	\$1,066,534	\$1,066,534
Fees (Fines)	\$1,399,345	\$1,837,610	\$1,030,051	\$1,030,051	\$1,030,051	\$1,030,051
<b>Non-Fee Sources:</b>	<b>\$11,703</b>	<b>\$25,063</b>	<b>\$36,483</b>	<b>\$36,483</b>	<b>\$36,483</b>	<b>\$36,483</b>
"Fees" set in Statute						
Settlements (e.g. MSA)						
Transfers of General Fund						
Special Taxes (e.g. Amendment 35)						
Donations						
Interest	\$11,703	\$25,063	\$36,483	\$36,483	\$36,483	\$36,483
Expenses Total	\$299,621	\$247,652	\$1,316,286	\$2,057,910	\$1,949,803	<b>\$1,949,803</b>
Cash Expenditures Round 1 (3-year granting cycle)	\$299,621	\$247,652	\$108,279	\$544,667	\$272,333	\$272,333
Cash Expenditures Round 2 (3-year granting cycle)				\$272,333	\$272,333	\$272,333

Schedule 9A: Cash Funds Reports  
 Department of Public Health and Environment  
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Cash Expenditures Round 3 (3-year granting cycle)					\$272,333	\$272,333
Transfer to the General Fund per HB16-1413			\$1,208,007			
Transfer to Cash Funds (Sectors)				\$809,107		
Transfer to Cash Funds (Lead Bill, 3-year bill that sunsets in FY20)				\$431,803	\$400,000	\$400,000
Change Request					\$732,804	\$732,804
Net Cash Flow	\$1,111,427	\$1,615,021	-\$249,752	-\$991,376	-\$883,269	-\$883,269

Schedule 9A: Cash Funds Reports  
 Department of Public Health and Environment  
 FY 2017-18 Budget Request  
 Fund 19T0 - "Water Quality Improvement"  
 25-8-608, C.R.S.

Cash Fund Reserve Balance	Actual	Actual	Actual	Estimated	Requested	Projected
	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20
Uncommitted Fee Reserve Balance (total reserve balance minus exempt assets and previously appropriated funds; calculated based on % of revenue from fees)	\$1,793,737	\$3,395,399	\$3,104,647	\$2,113,271	\$1,230,002	\$346,733
Target/Alternative Fee Reserve Balance (amount set in statute or 16.5% of total expenses)	\$49,437	\$40,863	\$217,187	\$339,555	\$321,717	\$321,717
<b>Excess Uncommitted Fee Reserve Balance</b>	<b>\$1,744,300</b>	<b>\$3,354,536</b>	<b>\$2,887,460</b>	<b>\$1,773,716</b>	<b>\$908,285</b>	<b>\$25,016</b>
<b>Compliance Plan (narrative)</b>	The Department is exploring options for fund balance management.					
<b>Cash Fund Narrative Information</b>						
Purpose/Background of Fund	The moneys in the water quality improvement fund are used for the following purposes: Improving the water quality in the community or water body impacted by the violation; Providing grants for storm water projects or to assist with planning, design, construction, or repair of domestic wastewater treatment works; or providing the non-federal match funding for Nonpoint Source projects under 33 U.S.C. sec. 1329.					
Fee Sources	Penalties for water quality violations.					
Non-Fee Sources	Interest income.					
Long Bill Groups Supported by Fund	(5) Water Quality Control Division, (C) Clean Water Program, Water Quality Improvement					

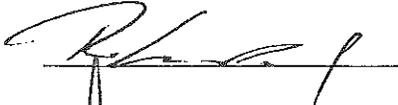
**Schedule 13**

**Funding Request for the FY 2018-19 Budget Cycle**

Department of Public Health and Environment

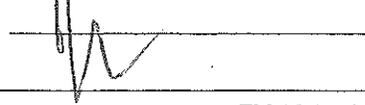
Request Title

**R-06 Recycling Resources Spending Authority**

Dept. Approval By: 

Supplemental FY 2017-18

Change Request FY 2018-19

OSPB Approval By: 

Budget Amendment FY 2018-19

Summary Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20	
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
<b>Total</b>		\$3,508,548	\$0	\$3,508,548	\$1,150,000	\$1,150,000
<b>FTE</b>		1.4	0.0	1.4	0.0	0.0
<b>GF</b>		\$0	\$0	\$0	\$0	\$0
<b>CF</b>		\$3,508,548	\$0	\$3,508,548	\$1,150,000	\$1,150,000
<b>RF</b>		\$0	\$0	\$0	\$0	\$0
<b>FF</b>		\$0	\$0	\$0	\$0	\$0

Line Item Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20	
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
<b>Total</b>		\$3,508,548	\$0	\$3,508,548	\$1,150,000	\$1,150,000
<b>FTE</b>		1.4	0.0	1.4	0.0	0.0
<b>GF</b>		\$0	\$0	\$0	\$0	\$0
<b>CF</b>		\$3,508,548	\$0	\$3,508,548	\$1,150,000	\$1,150,000
<b>RF</b>		\$0	\$0	\$0	\$0	\$0
<b>FF</b>		\$0	\$0	\$0	\$0	\$0

CF Letternote Text Revision Required?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	<b>If Yes, see schedule 4 fund source detail.</b>
RF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
FF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
Requires Legislation?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
Type of Request?	Department of Public Health and Environment Prioritized Request				
Interagency Approval or Related Schedule 13s:	None				



### ***Cost and FTE***

- The Department requests an increase of \$1,150,000 in spending authority for the Recycling Resources Economic Opportunity Fund (RREO) for FY 2018-19 and beyond to provide additional grants and rebates to develop Colorado's waste diversion infrastructure.

### ***Current Program***

- The state legislature passed the RREO Act of 2007, establishing a grant program to help create or expand existing recycling programs and a rebate program to reward Colorado businesses and organizations that are actively providing recycling services. In 2013 the legislature passed a bill that raised tipping fees that fund the RREO program to increase recycling efforts in the state.
- During FY 2016-17 The Department received an excess of grant applications as compared to the amount of cash funds available through the current spending authority of the RREO Fund.

### ***Problem or Opportunity***

- At the close of FY 2014-15, the total cash fund balance was \$1,226,045 and in FY 2015-16 it was \$1,596,012 for Fund 20Y0. Without additional spending authority, the fund balance will exceed \$4.1 million by the end of FY 2020 – 21.
- Current spending authority is about \$3.5 million. This request would increase it to \$4.65 million.

### ***Consequences of Problem***

- If the Department does not receive increased spending authority in the RREO Fund, it can only offer limited grant awards, further restricting the opportunity to enhance a potential increase in recycling efforts and activities in Colorado Communities.
- This prevents the Department from meeting the intent of the legislation, and funding viable projects with the available fund balance.
- Without increasing the spending authority to more appropriately align with projected revenues, more viable projects will remain unfunded, the fund balance will increase, and the Department will have to exercise restraint in promoting recycling and diversion efforts.
- This can increase Colorado's waste diversion rate, which is far below the national average.

### ***Proposed Solution***

- The Department requests an increase of \$1,150,000 in spending authority for the Recycling Resources Economic Opportunity Fund (RREO) for FY 2018-19 and beyond to provide additional grants and rebates to develop Colorado's waste diversion infrastructure.



# COLORADO

Department of Public Health and  
Environment

*FY 2018-19 Funding  
Request | November 1,  
2017*

*John W. Hickenlooper  
Governor  
Larry Wolk  
Executive Director*

***Department Priority: R-06  
Request Detail: Recycling Resources Spending Authority***

<b>Summary of Incremental Funding Change for FY 2018-19</b>	<b>Total Funds</b>	<b>Cash Fund</b>
Recycling Resources Spending Authority	\$1,150,000	\$1,150,000

## ***Problem or Opportunity:***

The Department requests an increase of \$1,150,000 in spending authority for the Recycling Resources Economic Opportunity Fund (RREO) for FY 2018-19 and beyond to provide additional grants and rebates to develop Colorado's waste diversion infrastructure. This increase establishes a spending authority consistent with the revenues collected in the RREO Cash Fund in FY 2015-16 and FY 2016-17. Please see the attached Appendix A – Schedule 9 for Fund 20Y0 which provides a summary of the fund's activities from FY 2015-16 to FY 2016-17 and projected cash fund activities and balances to FY 2020-21.

Colorado Revised Statute 25-16.5-106.7 establishes the Recycling Resources Economic Opportunity Program. The statute identifies that an advisory committee managed by the Department may award grants for the following purposes:

- Recycling, beneficial use, and reuse;
- Public-private partnerships that promote waste diversion, recycling, recycling markets, the beneficial use of discarded materials, or other recycling-related uses;
- Developing or expanding local economic infrastructure for the sustainable use of discarded materials;
- Providing local incentives to develop or expand markets for recycled products;
- Developing or expanding local recycling infrastructure;
- Undertaking sustainable resource education programs;
- Developing or implementing sustainable resource plans or programs for the use or collection of organic matter, household hazardous waste, electronic scrap material, or other discarded materials;
- Providing assistance in connection with the development or improvement of integrated waste management plans by local governments; and
- Reducing waste tire stockpiles.

During FY 2016-17, the Department received an excess of grant applications to the amount of cash funds available through the current spending authority of the RREO Fund. At the close of FY 2014-15, the total

cash fund balance was \$1,226,045 and in FY 2015-16, \$1,596,012. The fund balance will exceed \$4.1 million by the end of FY 2020-21 assuming that the spending authority remains static in the next three fiscal years.

Colorado Senate Bill (SB) 13-050 “Recycling Resources Economic Opportunity Fund” provided for a tiered increase to the portion of the tipping fee directed to the program. This tiered increase provides an explanation for the increase of the cash fund balance over several fiscal years. The tipping fee increased from \$0.07/cubic yard in calendar year (CY) 2013 to \$0.09/cubic yard in CY 2014, to \$0.11/cubic yard in CY 2015, \$0.14/cubic yard in CY 2016 and beyond. The legislative declaration within SB13-050 indicates the goal of the increase: “for the purpose of increasing recycling in the state.” The RREO fund received the final increase (\$0.14/cubic yard) in FY 2016-17 and could then gauge the impact to the fund revenue. Additionally, in 2016, the Department automated the reporting method by landfills to an on-line system versus paper submission. This update along with the static per cubic yard (\$0.14) fee allows the Department to more precisely project annual revenue for more accurate grant award planning.

Since 2007, when state statute established the RREO Program, grant projects have helped build enough capacity to ensure that 98% of the state's population has some type of access to recycling, either through a community drop-off center or via a curbside collection program. Moving forward at the current spending authority, the RREO program will have a challenge ensuring greater participation rates in recycling programs. The Department would like to see more substantial increases in the statewide waste diversion rates which could be accomplished with increased spending authority.

Currently, Colorado diverts waste at a rate of just short of 12% (when scrap metals are not included; when they are included in measuring this figure, Colorado’s waste diversion rate is 19%), which lags well behind the national average of 34%. Colorado Integrated Solid Waste and Materials Management Plan (Plan) identifies the expansion of recycling efforts as a key component in increasing waste diversion. Specifically, the Plan indicates:

- There is a clear need to prioritize regional planning initiatives and more funding should be dedicated to optimize material management in each of Colorado's waste sheds;
- The vast majority of the state has limited or no access to an organics collection service. There is a clear need to build infrastructure to capture and divert organics from the landfill. Waste audits consistently show that food and yard waste account for approximately one third of all the waste sent to landfills, and;
- A need to establish transfer stations in the more rural areas of the state.

***Proposed Solution:***

The Department requests an increase of \$1,150,000 in spending authority for the Recycling Resources Economic Opportunity Fund (RREO) for FY 2018-19 and beyond to provide additional grants and rebates to develop Colorado’s waste diversion infrastructure. Utilizing past cash fund balances and future revenue projections, the Department expects to more closely align its RREO grant program to annual revenues. With an increased cash fund spending authority, the Department may award approximately five to seven additional grants to more aggressively meet the recycling growth needs of the state. Please see Appendix B – Grant Application and Award Analysis for further insight to the community need for further RREO grants in Colorado.

The RREO program is the only state-funded grant program specifically designed to incentivize improvements to the state's waste diversion infrastructure. At its core, RREO provides grants and rebates to develop

Colorado's waste diversion infrastructure, focusing especially on capital expenses (the balers, the trailers, the buildings). Projects emphasize recycling, composting, beneficial reuse, source reduction, or anaerobic digestion.

If the Department does not receive increased spending authority in the RREO Fund, it can only offer limited grant awards, further restricting the opportunity to enhance a potential increase in recycling efforts and activities in Colorado Communities. This prevents the Department from meeting the intent of the legislation, and funding viable projects with the available fund balance.

### ***Anticipated Outcomes:***

The Department anticipates the use of RREO grant dollars to fund these key components. By funding more projects and expanding recycling efforts in Colorado, the Department will address the gap in expanding its recycling efforts. The Plan identifies waste diversion goals of:

- Statewide: 45% by 2036
- Front Range: 51% by 2036
- Rest of State: 15% by 2036

In recent years, the Department has allocated grant funds to regional planning studies focused on completing waste audits, infrastructure gap analysis, and coordinating stakeholders. The Department has funded nine regional studies so far, with another round of grants planned in FY 2017-18. Current projects include:

- RREO Program has funded several projects that focus on diverting organics from the landfill.
- In Pitkin County, the Department provided a grant to expand the food waste collection infrastructure and purchased a bagging system to more easily sell finished compost to the public and retailers.
- Eagle County currently has a project underway to establish a new compost facility.
- In a dedicated effort for outreach to rural communities, the RREO program is poised to assist small rural landfills who choose to close and instead establish a waste transfer station in its place. A Request for Applications to specifically allow grant funds to be spent on these types of projects has been developed.

With increased spending authority, the Department will fund approximately five to seven additional grants based on a five-year average of grant applications and awards.

The expansion and promotion of recycling efforts promote sound and strong environmental practices which align with Vision 2018 and Department strategic priorities # 6 and #7 by ensuring air and water quality is improved and protected by reducing pollution across Colorado.

Additionally, expanding recycling efforts has proven to stimulate the economy and create jobs. *The Economic Study of Recycling in Colorado* (November 2014) evaluated the economic impacts that the recycling, remanufacturing, and reuse (RRR) industry has on the State economy and found:

- The direct impact of the RRR industries totals \$8.7 billion
- The RRR industry impacts nearly 86,000 jobs in the state representing 2.7 percent of overall employment in Colorado
- This employment translates to over \$200 million in labor wages in the rural region, and greater than \$5 billion in the urban region.

- A total of \$267 million of recoverable recyclables are disposed in landfills annually, representing lost opportunities for economic growth.

### ***Assumptions and Calculations:***

The Department requests an increase of \$1,150,000 in spending authority for the Recycling Resources Economic Opportunity Fund (RREO) for FY 2018-19 and beyond. Please see the attached Appendix A – Schedule 9 for Fund 20Y0 which provides a summary of the fund’s activities from FY 2015-16 to FY 2016-17 and projected cash fund activities and balances to FY 2021-22. The Department utilized these projected cash fund balances to anticipate the level of spending authority that could sustain the current RREO Program grant awards. With an increase of \$1,150,000, the Department would maintain some fund balance over the next three fiscal years to support program costs in the event of a decline in revenue. The RREO Fund is exempt from the statutory reserve limits.

Additionally, please refer to Appendix B – Grant Application and Award Analysis for an insight to the planned utilization of the increased spending authority in FY 2018-19 and beyond. Through an analysis of the history of grant applications against the availability of grant awards, the Department anticipates that it can fund approximately five to seven additional grants per year for the RREO Program.

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Schedule 9A: Cash Funds Reports  
 Department of Public Health and Environment  
 FY 2017-18 Budget Request  
 Fund 20Y0 - "Recycling Resources Economic Opportunity Fund"  
 25-16-106.5 (1), C.R.S.

July 2017	Actual FY 2014-15	Actual FY 2015-16	Actual FY 2016-17	Appropriated FY 2017-18	Projected FY 2018-19	Projected FY 2019-20	Projected FY 2020-21	Projected FY 2021-22
<b>Year Beginning Fund Balance (A)</b>	<b>\$277,735</b>	<b>\$1,226,045</b>	<b>\$1,596,012</b>	<b>\$1,183,584</b>	<b>\$1,767,773</b>	<b>\$1,444,777</b>	<b>\$1,024,597</b>	<b>\$688,902</b>
Changes in Cash Assets	\$1,516,816	\$194,112	-\$214,008	\$565,784	-\$503,010	-\$420,181	-\$335,695	-\$249,519
Changes in Non-Cash Assets	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Changes in Long-Term Assets	\$68,000	-\$68,000	\$0	\$0	\$0	\$0	\$0	\$0
Changes in Total Liabilities	-\$636,506	\$243,855	-\$198,420	\$18,405	\$180,015	\$0	\$0	\$0
<b>TOTAL CHANGES TO FUND BALANCE</b>	<b>\$948,310</b>	<b>\$369,967</b>	<b>-\$412,428</b>	<b>\$584,189</b>	<b>-\$322,996</b>	<b>-\$420,181</b>	<b>-\$335,695</b>	<b>-\$249,519</b>
<b>Assets Total</b>	<b>\$2,012,038</b>	<b>\$2,138,150</b>	<b>\$1,924,142</b>	<b>\$2,489,926</b>	<b>\$1,986,915</b>	<b>\$1,566,735</b>	<b>\$1,231,040</b>	<b>\$981,521</b>
Cash (B)	\$1,944,038	\$2,138,150	\$1,924,142	\$2,489,926	\$1,986,915	\$1,566,735	\$1,231,040	\$981,521
Other Assets(Detail as necessary)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Receivables	\$68,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Liabilities Total</b>	<b>\$785,993</b>	<b>\$542,138</b>	<b>\$740,558</b>	<b>\$722,153</b>	<b>\$542,138</b>	<b>\$542,138</b>	<b>\$542,138</b>	<b>\$542,138</b>
Cash Liabilities (C)	\$785,993	\$542,138	\$740,558	\$722,153	\$542,138	\$542,138	\$542,138	\$542,138
Long Term Liabilities	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Ending Fund Balance (D)</b>	<b>\$1,226,045</b>	<b>\$1,596,012</b>	<b>\$1,183,584</b>	<b>\$1,767,773</b>	<b>\$1,444,777</b>	<b>\$1,024,597</b>	<b>\$688,902</b>	<b>\$439,383</b>
check	\$1,226,045	\$1,596,012	\$1,183,584	\$1,767,773	\$1,444,777	\$1,024,597	\$688,902	\$439,383
<b>Net Cash Assets - (B-C)</b>	<b>\$1,158,045</b>	<b>\$1,596,012</b>	<b>\$1,183,584</b>	<b>\$1,767,773</b>	<b>\$1,444,777</b>	<b>\$1,024,597</b>	<b>\$688,902</b>	<b>\$439,383</b>
<b>Change from Prior Year Fund Balance (D-A)</b>	<b>\$948,310</b>	<b>\$369,967</b>	<b>-\$412,428</b>	<b>\$584,189</b>	<b>-\$322,996</b>	<b>-\$420,181</b>	<b>-\$335,695</b>	<b>-\$249,519</b>
<b>Cash Flow Summary</b>								
Revenue Total	\$3,742,134	\$2,930,317	\$3,994,719	\$4,074,332	\$4,155,538	\$4,238,367	\$4,322,853	\$4,409,029
Fee Revenue	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Non-Fee Sources:</b>	<b>\$3,742,134</b>	<b>\$2,930,317</b>	<b>\$3,994,719</b>	<b>\$4,074,332</b>	<b>\$4,155,538</b>	<b>\$4,238,367</b>	<b>\$4,322,853</b>	<b>\$4,409,029</b>
"Fees" set in Statute	\$2,228,075	\$2,916,772	\$3,980,660	\$4,060,273	\$4,141,479	\$4,224,308	\$4,308,794	\$4,394,970
Settlements (e.g. MSA)								
General Fund Transfers	\$1,500,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Special Taxes (e.g. Amendment 35)								
Donations								
Interest	\$14,059	\$13,545	\$14,059	\$14,059	\$14,059	\$14,059	\$14,059	\$14,059
Expenses Total	\$2,861,823	\$2,492,350	\$4,208,727	\$3,508,548	\$4,658,548	\$4,658,548	\$4,658,548	\$4,658,548
Cash Expenditures	\$2,861,823	\$2,492,350	\$4,208,727	\$3,508,548	\$3,508,548	\$3,508,548	\$3,508,548	\$3,508,548
Change Requests (If Applicable)	\$0	\$0	\$0	\$0	\$1,150,000	\$1,150,000	\$1,150,000	\$1,150,000
<b>Net Cash Flow</b>	<b>\$880,311</b>	<b>\$437,967</b>	<b>-\$214,008</b>	<b>\$565,784</b>	<b>-\$503,010</b>	<b>-\$420,181</b>	<b>-\$335,695</b>	<b>-\$249,519</b>





**Schedule 13**

**Funding Request for the FY 2018-19 Budget Cycle**

Department of Public Health and Environment

Request Title

R-07 Health Information Exchange

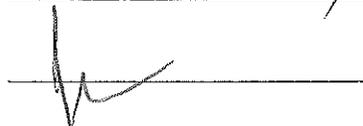
Dept. Approval By:



Supplemental FY 2017-18

Change Request FY 2018-19

OSPB Approval By:



Budget Amendment FY 2018-19

Summary Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20	
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$453,516	\$0	\$0	\$387,516	\$387,516
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items Impacted by Change Request	GF	\$453,516	\$0	\$0	\$387,516	\$387,516
	CF	\$0	\$0	\$0	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0

Line Item Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20	
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$453,516	\$0	\$0	\$387,516	\$387,516
	FTE	0.0	0.0	0.0	0.0	0.0
02. Center for Health and Environmental Information, (D) Health Data Programs and Information -- Health Information Exchange	GF	\$453,516	\$0	\$0	\$387,516	\$387,516
	CF	\$0	\$0	\$0	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0

CF Letternote Text Revision Required?	Yes	No	<input checked="" type="checkbox"/>	If Yes, see schedule 4 fund source detail.
RF Letternote Text Revision Required?	Yes	No	<input checked="" type="checkbox"/>	
FF Letternote Text Revision Required?	Yes	No	<input checked="" type="checkbox"/>	
Requires Legislation?	Yes	No	<input checked="" type="checkbox"/>	
Type of Request?	Department of Public Health and Environment Prioritized Request			
Interagency Approval or Related Schedule 13s:	None			



### ***Cost and FTE***

- The Department requests \$387,516 in General Fund for each of FY 2018-19, FY 2019-20 and FY 2020-21 to continue connecting providers to the Health Information Exchange.

### ***Current Program***

- The public health programs at the Department receive and disseminate public health data on disease, disabilities, and injuries.
- FY 2014-15 BA-01 “Health Information Exchange” secured funding to develop interfaces between non-Medicaid providers and the State’s Health Information Exchange to facilitate data sharing.
- To date, approximately 200 providers out of 621 have been connected to the Exchange.

### ***Problem or Opportunity***

- Many individual health care providers’ information technology systems are not fully integrated and rely on separate, often manual, data collection processes.
- Health Information Exchanges (HIE) enable providers, hospitals, laboratories, and other health care organizations to use approved standards to securely submit clinical information between providers and various state public health systems and programs.
- Integration with providers’ Electronic Health Records Systems (EHRs) through HIE allow for automatic and continuous reporting to public health organizations.
- The benefits of HIE include streamlined and simplified data, elimination of duplicate data entry for health providers, and an integrated information exchange between public health agencies at the local, state and federal level.
- Many health care providers are currently unable to quickly and easily share information with the Department’s data collection systems.

### ***Consequences of Problem***

- If the Department does not have accurate and timely data, public health is at risk.
- In many cases, health care providers enter data into their EHR, and are subsequently required to duplicate that data entry into the Department’s systems. Duplicate data entry is inefficient and can lead to errors.

### ***Proposed Solution***

- The requested \$387,516 General Fund will allow the Department to continue to work with additional providers to develop interfaces to the Health Information Exchange.
- This would allow roughly 150 more providers to be connected to the HIE.
- Continuing to integrate with HIE will facilitate the automatic, secure sharing of health information for the purposes of public health reporting.
- Accurate and timely data facilitates response to public health issues.



# COLORADO

Department of Public Health and  
Environment

*John W. Hickenlooper*  
Governor  
*Larry Wolk*  
Executive Director

*FY 2018-19 Funding Request | November 1, 2017*

**Department Priority: R-07**  
**Request Detail: Health Information Exchange**

<b>Summary of Incremental Funding Change for FY 2018-19</b>	<b>Total Funds</b>	<b>General Fund</b>
Health Information Exchange	\$387,516	\$387,516

### **Problem or Opportunity:**

The Department requests \$387,516 General fund for each year from FY 2018-19 through FY 2020-21 to continue to increase the availability and utility of health information across the State of Colorado.

Access to healthcare provider electronic health record (EHR) systems by local and state public health agencies greatly increases capacity for public health to monitor disease, disabilities, and injuries in real time. Currently, local and state public health agencies rely on separate, often manual, data collection processes for reportable diseases, cancer, and immunizations. Integration with EHRs through Health Information Exchange (HIE or the Exchange) will allow for automatic and continuous reporting to public health entities. Health Information Exchange systems enable providers, hospitals, laboratories and other health care organizations to use accepted standards to securely submit clinical information to various state public health systems and programs quickly, accurately, and in compliance with public health reporting requirements. For example, this information allows public health entities to quickly respond to disease outbreaks and limit their spread in the community. The continuation funding in this request will support development of additional interfaces to connect providers with the Exchange.

The benefits of HIE include streamlined and simplified data, elimination of duplicate data entry for health providers, and an integrated information exchange between public health agencies at the local, state, and federal level. HIE also ensures eligible professionals and hospitals can meet the Meaningful Use<sup>1</sup> program's public health reporting requirements. In order to meet the following Meaningful Use objectives, additional development is required to allow additional providers to interface to HIE thereby creating a bi-directional flow of information from the HIE to public health agencies:

- Electronic laboratory reporting of communicable diseases to the Colorado Electronic Disease Reporting System (CEDRS)

<sup>1</sup> The Health Information Technology for Economic and Clinical Health (HITECH) Act of 2009 authorizes the Centers for Medicare & Medicaid Services (CMS) to provide incentive payments to eligible professionals (EPs) and hospitals (EHs) who adopt, implement, upgrade, or demonstrate meaningful use of certified electronic health record (EHR) technology to achieve health care quality and efficiency goals. CMS outlines core and menu objectives intended to set a baseline for electronic data capture and information sharing.

Meaningful Use objectives:

1. Improve Quality, Safety, Efficiency
2. Engage Patients & Families
3. Improve Care Coordination
4. Improve Public and Population Health
5. Ensure Privacy and Security for Personal Health Information

- Syndromic surveillance reporting to Tri-County Health Department and Denver Health
- Cancer Case Reporting to the Colorado Department of Public Health and Environment (CDPHE) Cancer Registry
- Immunization reporting to the Colorado Immunization Information System (CIIS)

The requested funding will support creation of interfaces to develop the statewide HIE. The requested funds meet the state share requirements that are associated with the Department of Health Care Policy and Financing's (HCPF) 90% Federal matching funds from the Health Information Technology for Economic and Clinical Health Act (HITECH) portion of the 2009 federal American Recovery and Reinvestment Act (ARRA). The HITECH Act grants 90% Federal matching funds to state Medicaid agencies for projects that support statewide HIE. The requested funds will be used to create interfaces for entities that are not Medicaid providers and therefore cannot be funded with the 90% federal funding. HCPF requested the 10% match to the 90% federal funds in their FY 2014-15 R-5 budget request, "Health Information Exchange," for the items that impact Medicaid providers. CDPHE submitted BA-01 Health Information Exchange, to meet the state share requirement and provide connectivity for non-Medicaid providers. This current request from CDPHE reflects the cost to continue connecting non-Medicaid providers. Thus far, 200 clinics have been connected to HIE and an additional 421 clinics are currently waiting to be connected.

***Proposed Solution:***

The Department requests \$387,516 General fund for FY 2018-19 through FY 2020-21 to continue to increase the availability and utility of health information across the State of Colorado. The requested funding would allow the Department to continue improving the current infrastructure supporting the increasing volume of data reporting to Department registries via Health Information Exchange (HIE). This includes laboratory results, disease surveillance data, and immunization records from individual providers. Public health programs require standardized electronic reporting, and public health agencies must offer technical solutions to meet the demands of the healthcare provider and lab communities. The Department has identified HIEs as an effective gateway for electronic reportable condition reporting that offers scalable, repeatable solutions that improve efficiency and consistency. Using the funding authorized in FY 2014-15 BA-01 "Health Information Exchange" CDPHE has increased the number of non-Medicaid clinics reporting electronically through HIE, by approximately 200. This has eliminated the need for providers to manually enter data.

For health care providers within the Medicaid program, the Department of Health Care Policy and Financing (HCPF) has on-going funding through FY 2020-21 to match federal funds to connect Medicaid providers to the Exchange as requested in their FY 2014-15 R-5 budget request, "Health Information Exchange. CDPHE is requesting \$387,516 in General Fund for FY 2018-19, FY 2019-20, and FY 2020-21. This funding is requested to continue to connect non-Medicaid providers to the Exchange through the period of the federal funding. Note that while the CDPHE funding is considered state fair share, not directly eligible for a federal match, the HCPF funding was eligible for a 90% Federal/10% General Fund match.

Requested funding will continue to support contractor development of interfaces to HIE as well as to fund system maintenance. The contractors will be tasked with:

- Work with providers, hospitals and laboratories to develop the interfaces from their EHR systems to the HIE.
- Ensure data from the EHR system is converted properly to the format needed in CDPHE systems.
- Work with hospitals and Laboratories to provide onboarding, evaluating/validating incoming messages/data from new reporters and developing methodologies for automated case consolidation.
- Manage overall project coordination.

Health Information Exchanges are compliant with all federal laws, including health care privacy. HIE facilitates the dissemination of clinical data to different entities through secure and appropriate means. CDPHE will only receive information covered under the agency’s public health legal authority. There is no danger of having personal health information shared inappropriately within CDPHE.

If this request is not approved, duplicate data entry will continue across providers to meet CDPHE’s required incident reporting criteria. Additionally, CDPHE and other public health agencies may not have access to timely, accurate information necessary to protect public health. For example, lack of timely information may limit the Department’s ability to quickly respond to disease outbreaks and limit their spread in the community.

**Anticipated Outcomes:**

Improved HIE infrastructure and the ability for technical reporting will contribute to an increased number of providers and hospitals attesting to Meaningful Use across the state. This will improve and increase data capture and standardized electronic data feeds with uniform code sets, and improve efficiency and accuracy in public health reporting. Based on the success of previous efforts, the Department anticipates that an additional 150 providers will be on-boarded over the next three years if requested funding is approved, increasing the percentage of non-Medicaid providers connected to the Exchange from 32% (200/621) to 56% (350/621).

This request supports several goals stated in the ‘Modernize Data Collection and Dissemination’ strategy outlined in the Department’s strategic plan, including:

- Awareness
  - Goal 1: Implement the plans supporting the health and environment priorities
  - Goal 2: Increase CDPHE’s efficiency, effectiveness and elegance
  - Goal 5: Prepare and respond to all emerging issues

This request also indirectly supports the Governor’s Dashboard Health Goal of Increasing the Immunization Rates, specifically for kindergarten immunization rates for DTaP and MMR. Increasing the number of hospitals and clinics reporting immunizations directly to the Colorado Immunization Information System (CIIS) will aid in accurately tracking this measure and minimize provider burden.

**Assumptions and Calculations:**

The Department requests \$387,516 General fund for FY 2018-19 through FY 2020-21 to continue to increase the availability and utility of health information across the State of Colorado. The request is to continue funding for the HIE authorized in FY 2014-15 BA01 “Health Information Exchange”. The request is \$66,000 less than the 2014-15 request because server and gateway development costs are no longer needed. Below are the activities requiring on-going funding.

**Cost Summary**

<b>Cost</b>	<b>Year 1 costs</b>	<b>Year 2 costs</b>	<b>Year 3 costs</b>
Interface Development Contractors	\$327,000	\$327,000	\$327,000
Attestation System maintenance	\$60,516	\$60,516	\$60,516
<b>Total</b>	<b>\$387,516</b>	<b>\$387,516</b>	<b>\$387,516</b>

**Schedule 13**

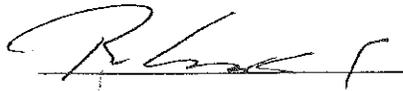
**Funding Request for the FY 2018-19 Budget Cycle**

**Department of Public Health and Environment**

Request Title

**R-08 1% Provider Rate Increase**

Dept. Approval By:



Supplemental FY 2017-18

Change Request FY 2018-19

OSPB Approval By:



Budget Amendment FY 2018-19

Summary Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20	
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$9,278,582	\$0	\$9,278,582	\$92,787	\$92,787
	FTE	0.0	0.0	0.0	0.0	0.0
Total of All Line Items Impacted by Change Request	GF	\$6,765,253	\$0	\$6,765,253	\$67,653	\$67,653
	CF	\$1,792,362	\$0	\$1,792,362	\$17,924	\$17,924
	RF	\$720,967	\$0	\$720,967	\$7,210	\$7,210
	FF	\$0	\$0	\$0	\$0	\$0

Line Item Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20	
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
	Total	\$9,278,582	\$0	\$9,278,582	\$92,787	\$92,787
	FTE	0.0	0.0	0.0	0.0	0.0
01. Administration and Support, (C) Local Public Health Planning and Support – Distributions to Local Public Health Agencies	GF	\$6,765,253	\$0	\$6,765,253	\$67,653	\$67,653
	CF	\$1,792,362	\$0	\$1,792,362	\$17,924	\$17,924
	RF	\$720,967	\$0	\$720,967	\$7,210	\$7,210
	FF	\$0	\$0	\$0	\$0	\$0

CF Letternote Text Revision Required?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	If Yes, see schedule 4 fund source detail.
RF Letternote Text Revision Required?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
FF Letternote Text Revision Required?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Requires Legislation?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Type of Request?	Department of Public Health and Environment Prioritized Request	
Interagency Approval or Related Schedule 13s:	None	



### ***Cost and FTE***

- The Department requests an increase of \$92,787 total funds, including \$67,653 General Fund, \$17,924 Marijuana Tax Cash Funds and \$7,210 Reappropriated Funds, for FY 2018-19 and beyond to account for a provider rate increase of 1.0 percent, which affects the Local Public Health Agencies in the state.

### ***Current Program***

- The Department provides grant funding to Local Public Health Agencies in counties around Colorado. Counties use those funds to strengthen the state of their public health, through means such as hiring new nurses and facility inspectors.
- For FY 2017-18, the Department was budgeted \$9,278,582 in Distributions to Local Public Health Agencies (Long Bill line item) that is eligible for the provider rate decrease.

### ***Problem or Opportunity***

- The Department seeks to address continued inflationary increases and to provide the same standard of support to Local Public Health Agencies.

### ***Consequences of Problem***

- Should this request not be funded, Local Public Health Agencies will be forced to continue to absorb cost increases, potentially inhibiting the ability to offer programs that improve the health of people in their counties.

### ***Proposed Solution***

- The Department requests an increase of \$92,787 total funds for the Local Public Health Agencies to address a 1.0 percent provider rate increase.



# COLORADO

Department of Public Health and  
Environment

John W. Hickenlooper  
Governor

Larry Wolk  
Executive Director

FY 2018-19 Funding Request | November 1, 2017

**Department Priority: R-08**  
**Request Detail: 1% Provider Rate Increase**

Summary of Incremental Funding Change for FY 2018-19	Total Funds	General Funds	Cash Funds	Reappropriated Funds
1% Provider Rate Increase	\$92,787	\$67,653	\$17,924	\$7,210

### **Problem or Opportunity:**

For FY 2018-19, the Governor's Office established a community provider rate increase of 1.0 percent, to include the Local Public Health Agencies (LPHAs) who receive grant funds from the Department of Public Health and Environment. The Local Public Health Agencies were added to the list of providers who would be affected by this 1.0 percent increase during a Joint Budget Committee meeting on March 13, 2015. Should this request not be funded, LPHAs will be forced to continue to absorb cost increases, potentially harming their ability to strengthen the state of the public health in counties around Colorado.

### **Proposed Solution:**

The Department requests an increase of \$92,787 total funds, including \$67,653 General Fund, \$17,924 cash funds (Marijuana Tax Cash Funds), and \$7,210 reappropriated funds for FY 2018-19 and beyond to account for a provider rate increase of 1.0 percent.

### **Anticipated Outcomes:**

With the increased funding, the Department would be able to partially offset some of the inflationary pressures of basic necessities that Local Public Health Agencies face.

### **Assumptions and Calculations:**

The Department based calculations on a 1 percent across the board rate increase for the following line item:

Line Item	Total Funds	General Fund	Cash Funds	Reappropriated Funds	Federal Funds
FY 2017-18 Distributions to Local Public Health Agencies	\$9,278,582	\$6,765,253	\$1,792,362	\$720,967	\$0
<i>1% Increase</i>	<i>\$92,787</i>	<i>\$67,653</i>	<i>\$17,924</i>	<i>\$7,210</i>	<i>\$0</i>
<b>FY 2018-19 Distributions to Local Public Health Agencies</b>	<b>\$9,371,369</b>	<b>\$6,832,906</b>	<b>\$1,810,286</b>	<b>\$728,177</b>	<b>\$0</b>

**Schedule 13**

**Funding Request for the FY 2018-19 Budget Cycle**

Department of Public Health and Environment

Request Title

R-09 Chronic Disease Spending Authority

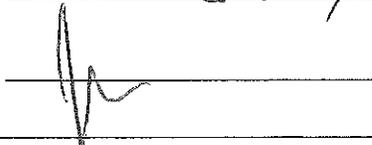
Dept. Approval By:



Supplemental FY 2017-18

  X   Change Request FY 2018-19

OSPB Approval By:



       Budget Amendment FY 2018-19

Summary Information	Fund	FY 2017-18		FY 2018-19		FY 2019-20
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
<b>Total</b>		\$19,849,456	\$0	\$19,849,456	(\$4,291,432)	(\$4,291,432)
FTE		0.0	0.0	0.0	0.0	0.0
<b>Total of All Line Items Impacted by Change Request</b>	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$19,849,456	\$0	\$19,849,456	(\$4,291,432)	(\$4,291,432)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0

Line Item Information	Fund	FY 2017-18		FY 2018-19		FY 2019-20
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
<b>Total</b>		\$19,849,456	\$0	\$19,849,456	(\$4,291,432)	(\$4,291,432)
09. Prevention Services Division, (B) Chronic Disease Prevention Programs --	FTE	0.0	0.0	0.0	0.0	0.0
Cancer, Cardiovascular, and Chronic Pulmonary Disease Grants	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$19,849,456	\$0	\$19,849,456	(\$4,291,432)	(\$4,291,432)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0

CF Letternote Text Revision Required?	Yes	<u>  X  </u>	No	<u>      </u>	If Yes, see schedule 4 fund source detail.
RF Letternote Text Revision Required?	Yes	<u>      </u>	No	<u>  X  </u>	
FF Letternote Text Revision Required?	Yes	<u>      </u>	No	<u>  X  </u>	
Requires Legislation?	Yes	<u>      </u>	No	<u>  X  </u>	
Type of Request?	Department of Public Health and Environment Prioritized Request				
Interagency Approval or Related Schedule 13s:	None				



***Cost and FTE***

- This request is for an ongoing reduction of \$4,291,432 in Amendment 35 cash funds from the Cancer, Cardiovascular, and Chronic Disease Prevention (CCPD) Grants line to align with anticipated revenue.

***Current Program***

- The CCPD Grants Program was created in 2005 by Amendment 35 to, “fund competitive grants to provide a cohesive approach to cancer, cardiovascular disease, and chronic pulmonary disease prevention, early detection and treatment in Colorado.)
- The Program works with and funds local public health departments, hospitals, universities and other community organizations across the state with a primary focus on prevention programs designed to increase screenings for chronic disease and build out the health system infrastructure to support chronic disease management.
- Historically the Program has awarded \$13 to \$15 million annually in grants to community organizations.

***Problem or Opportunity***

- During the years immediately following the implementation of the Affordable Care Act, various cancer screening programs funded by the CCPD fund reverted grant dollars back to the fund as the percentage of Coloradans covered by insurance increased.
- As a result of these reversions, the fund accumulated a significant fund balance.
- For FY 2016-17 and FY 2017-18, JBC staff increased spending authority to allow the CCPD Program to utilize the accumulated fund balance.
- The fund balance is anticipated to be spent by the end of FY 2017-18.

***Consequences of Problem***

- If the requested reduction is not approved, Long Bill spending authority will not be aligned with projected revenue.

***Proposed Solution***

- The Department requests a reduction to the appropriation to the Cancer, Cardiovascular Disease, and Chronic Pulmonary Disease Grants line item by \$4,291,432. This request will more closely align Long Bill spending authority with anticipated available funds.



# COLORADO

Department of Public Health and  
Environment

John W. Hickenlooper  
Governor  
Larry Wolk  
Executive Director

FY 2018-19 Funding Request | November 1, 2017

**Department Priority: R-09**  
**Request Detail: Chronic Disease Spending Authority**

<b>Summary of Incremental Funding Change for FY 2018-19</b>	<b>Total Funds</b>	<b>Cash Fund</b>
Chronic Disease Spending Authority	\$4,291,432	\$4,291,432

### **Problem or Opportunity:**

This request is for an on-going reduction of \$4,291,432 in Amendment 35 cash funds from the Cancer, Cardiovascular and Chronic Disease Prevention (CCPD) Grants line in the Prevention Services Division to match anticipated revenue.

The Cancer, Cardiovascular and Chronic Disease Prevention (CCPD) Grants Program was created in 2005 by Amendment 35 to, “fund competitive grants to provide a cohesive approach to cancer, cardiovascular disease, and chronic pulmonary disease prevention, early detection and treatment in Colorado.” (C.R.S. 25-20.5-302). The Program works with and funds local public health departments, hospitals, universities and other community organizations across the state.

Prior to 2015-16 the CCPD program awarded approximately \$13 to \$15 million annually in grant awards per year with the primary focus on secondary and tertiary prevention programs designed to increase screenings for chronic disease and build out the health system infrastructure to support chronic disease management. At the time the grants program began, over 18 percent of the state’s residents lacked health insurance and thousands more had inadequate coverage to support the delivery of prevention services. For this reason, there was a strong emphasis on advancing funding for safety net health care services for those who would otherwise go without screening. During the years immediately following the implementation of the Affordable Care Act, various cancer screening programs funded by the CCPD fund reverted grant dollars back to the fund as the percentage of Coloradans covered by insurance increased as hundreds of millions of new dollars for care and service became available to Colorado via the federal government. As a result, the fund accumulated a significant fund balance.

In response to the additional federal funds available for direct care, the CCPD Review Committee responsible for selecting priorities, identifying program strategies and identifying prevention and disease management activities to be funded, set a strategy to ensure the CCPD program moved away from gap filling services and used monies more for a population health benefit focus.

The CCPD Review Committee adopted a strategic framework that continues the direction of the FY 2015-16 through FY 2017-18 three year grant funding cycle and aligns with the Chronic Disease State Plan specifically focusing on three chronic disease domains:

1. Policy and Environmental Approaches: population-based strategies that transform communities to support health and make healthy behaviors easier and more convenient for people;
2. Health Systems Transformation: strategies that improve the use of quality clinical preventive services to prevent disease, and detect and manage chronic disease early; and
3. Community-clinical Linkages: strategies that ensure linkages between clinical or health care setting and effective, evidence-based community resources for people with chronic disease and those at risk for chronic disease.

For FY 2016-17 and FY 2017-18, JBC staff increased spending authority to allow the CCPD Program to spend down the accumulated fund balance. The Program took advantage of the opportunity presented by the fund balance and additional spending authority to increase grant awards for specific two-year projects. No additional funds were appropriated for administrative work for these enhanced grants as the additional administrative burden was absorbed by the current staff. The dollars supporting the elevated level of expenditures in the fund are anticipated to be spent by the end of FY 2017-18, and the CCPD program is expected to return to more historic grant award levels. This request is to reduce the appropriation to the Cancer, Cardiovascular Disease, and Chronic Pulmonary Disease Grants line item by \$4,291,432. This request will more closely align Long Bill spending authority with anticipated available funds.

#### ***Proposed Solution:***

This request is to reduce the appropriation to the Cancer, Cardiovascular Disease, and Chronic Pulmonary Disease Grants line item by \$4,291,432. This request will more closely align Long Bill spending authority with anticipated available funds.

#### ***Anticipated Outcomes:***

If the requested reduction is approved, Long Bill spending authority will be aligned with levels that can be supported by available funds. The budget request will more accurately reflect the anticipated revenue and expenditures.

#### ***Assumptions and Calculations:***

Table 1 illustrates the changes in the CCPD fund balance since FY 2014-15 as well as projections through FY 2018-19.

**Table 1**

Prevention Detection Treatment Fund (18N0)					
CCPD Cash Fund (Fund 18N0)	Actual	Actual	Actual	Projected	Projected
	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19
Beginning Fund Balance	\$967,723	\$7,354,625	\$9,978,811	\$5,764,922	\$1,684,385
Total Revenue	\$19,418,094*	\$23,302,399	\$23,188,476	\$23,272,699	\$23,134,000
Total Expenditures	\$13,031,191	\$20,678,214	\$27,402,365	\$27,352,531	\$23,061,099
Ending fund Balance	\$7,354,625	\$9,978,811	\$5,764,922	\$1,684,385	\$1,757,286

\*Revenue transfer to Health Disparities Grant fund recorded as a revenue offset for this year only. (\$3,413,315)

Assuming a targeted fund balance between \$1 million and \$2.5 million, the projected level of expenditures are anticipated to bring the fund balance into the target range at the end of FY 2017-18. Given the fluctuations of Amendment 35 Revenue and uncertainty with regards to the long-term trends, it has been estimated that a fund balance between \$1 million and \$2.5 million will give sufficient cushion in the event tobacco use declines and revenues are impacted accordingly. Given that revenues can fluctuate in relatively large amounts over a three year span, a sufficient cushion is important to ensure the fund can cover all expenditures obligated to the fund over a three year grant cycle. With the fund entering the targeted range, grant expenditures will need to return to historic levels and spending authority should be adjusted accordingly.

Current Grants spending authority FY 2017-18 = \$19,849,456  
 Requested reduction in Grants Spending Authority = \$4,291,432  
 Requested Grants Spending Authority for FY 2018-19 = \$15,558,024

The alignment of spending authority with expected available funds will enable the Long Bill to accurately reflect the expected spending on the grants program.

Schedule 9A: Cash Funds Reports  
 Department of Public Health and Environment  
 FY 2018-19 Budget Request  
 Fund 18N0 - "Prevention Detection Treatment Fund"  
 24-22-117 (2)(d)(l), C.R.S.

	Actual FY 2014-15	Actual FY 2015-16	Actual FY 2016-17	Appropriated FY 2017-18	Requested FY 2018-19	Projected FY 2019-20	Projected FY 2020-21
<b>Year Beginning Fund Balance (A)</b>	<b>\$967,723</b>	<b>\$7,354,625</b>	<b>\$9,978,811</b>	<b>\$5,764,922</b>	<b>\$1,684,385</b>	<b>\$1,757,286</b>	<b>\$1,372,605</b>
Changes in Cash Assets	\$5,650,618	\$4,683,870	-\$2,517,469	-\$4,079,832	\$72,901	-\$384,681	-\$384,681
Changes in Non-Cash Assets	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Changes in Long-Term Assets	\$0	\$0	\$705	-\$705	\$0	\$0	\$0
Changes in Total Liabilities	\$736,285	-\$2,059,684	-\$1,697,125	\$0	\$0	\$0	\$0
<b>TOTAL CHANGES TO FUND BALANCE</b>	<b>\$6,386,902</b>	<b>\$2,624,186</b>	<b>-\$4,213,889</b>	<b>-\$4,080,537</b>	<b>\$72,901</b>	<b>-\$384,681</b>	<b>-\$384,681</b>
<b>Assets Total</b>	<b>\$11,393,100</b>	<b>\$16,076,970</b>	<b>\$13,560,206</b>	<b>\$9,479,669</b>	<b>\$9,552,570</b>	<b>\$9,167,889</b>	<b>\$8,783,208</b>
Cash (B)	\$11,393,100	\$16,076,970	\$13,559,501	\$9,479,669	\$9,552,570	\$9,167,889	\$8,783,208
Other Assets (Detail as necessary)	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Receivables	\$0	\$0	\$705	\$0	\$0	\$0	\$0
<b>Liabilities Total</b>	<b>\$4,038,475</b>	<b>\$6,098,159</b>	<b>\$7,795,284</b>	<b>\$7,795,284</b>	<b>\$7,795,284</b>	<b>\$7,795,284</b>	<b>\$7,795,284</b>
Cash Liabilities (C)	\$4,038,475	\$6,098,159	\$7,795,284	\$7,795,284	\$7,795,284	\$7,795,284	\$7,795,284
Long Term Liabilities	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Ending Fund Balance (D)</b>	<b>\$7,354,625</b>	<b>\$9,978,811</b>	<b>\$5,764,922</b>	<b>\$1,684,385</b>	<b>\$1,757,286</b>	<b>\$1,372,605</b>	<b>\$987,924</b>
<b>Logical Test</b>	<b>TRUE</b>	<b>TRUE</b>	<b>TRUE</b>	<b>TRUE</b>	<b>TRUE</b>	<b>TRUE</b>	<b>TRUE</b>
<b>Net Cash Assets - (B-C)</b>	<b>\$7,354,625</b>	<b>\$9,978,811</b>	<b>\$5,764,217</b>	<b>\$1,684,385</b>	<b>\$1,757,286</b>	<b>\$1,372,605</b>	<b>\$987,924</b>
<b>Change from Prior Year Fund Balance (D-A)</b>	<b>\$6,386,902</b>	<b>\$2,624,186</b>	<b>-\$4,213,889</b>	<b>-\$4,080,537</b>	<b>\$72,901</b>	<b>-\$384,681</b>	<b>-\$384,681</b>
<b>Cash Flow Summary</b>							
Revenue Total	\$19,418,094	\$23,302,399	\$23,188,476	\$23,272,699	\$23,134,000	\$23,115,000	\$23,115,000
Fees							
<b>Non-Fee Sources:</b>	<b>\$19,418,094</b>	<b>\$23,302,399</b>	<b>\$23,188,476</b>	<b>\$23,272,699</b>	<b>\$23,134,000</b>	<b>\$23,115,000</b>	<b>\$23,115,000</b>
"Fees" set in Statute							
Settlements (e.g. MSA)							
Transfers of General Fund							
Amendment 35 Revenue	\$22,755,433	\$23,178,757	\$22,909,864	\$23,022,000	\$22,985,000	\$22,966,000	\$22,966,000
Donations							
Transfer of revenue to Health Disparities Grant Fund (19F0)	-\$341,331.0						
Account Payable Reversions			\$103,787	\$101,699			
Interest	\$75,975	\$123,642	\$174,825	\$149,000	\$149,000	\$149,000	\$149,000
<b>Expenses Total</b>	<b>\$13,031,191</b>	<b>\$20,678,214</b>	<b>\$27,402,365</b>	<b>\$27,352,531</b>	<b>\$23,061,099</b>	<b>\$23,499,681</b>	<b>\$23,499,681</b>
Cash Expenditures (includes enhanced grants to current Grantees)	\$13,031,191	\$13,890,589	\$15,676,374	\$15,446,210	\$15,451,760	\$15,451,760	\$15,451,760
Breast and Cervical Cancer Screening Program		\$3,317,499	\$4,440,437	\$4,603,021	\$4,603,021	\$4,603,021	\$4,603,021
Additional Grants via additional RFA			\$3,850,000	\$3,850,000	\$3,850,000		
Reduction Request					-\$4,291,432		
Transfer to Health Disparities Grant Fund (19F0, as an expenditure)		\$3,470,127	\$3,435,553	\$3,453,300	\$3,447,750	\$3,444,900	\$3,444,900
Change Requests (If Applicable)	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Net Cash Flow</b>	<b>\$6,386,903</b>	<b>\$2,624,185</b>	<b>-\$4,213,889</b>	<b>-\$4,079,832</b>	<b>\$72,901</b>	<b>-\$384,681</b>	<b>-\$384,681</b>

Schedule 9A: Cash Funds Reports  
 Department of Public Health and Environment  
 FY 2018-19 Budget Request  
 Fund 18N0 - "Prevention Detection Treatment Fund"  
 24-22-117 (2)(d)(I), C.R.S.

Cash Fund Reserve Balance	Actual	Actual	Actual	Estimated	Requested	Projected	Projected
	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
Uncommitted Fee Reserve Balance (total reserve balance minus exempt assets and previously appropriated funds; calculated based on % of revenue from fees)	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Target/Alternative Fee Reserve Balance (amount set in statute or 16.5% of total expenses)	\$2,150,147	\$3,411,905	\$4,521,390	\$4,513,168	\$3,805,081	\$3,877,447	\$3,877,447
<b>Excess Uncommitted Fee Reserve Balance</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Compliance Plan (narrative)</b>	<p>Per Section 24-75-402(2)(e)(IV), C.R.S., this fund is in compliance.</p> <p>The Cancer, Cardiovascular Disease and Chronic Pulmonary Disease (CCPD) program has a three year granting cycle and is currently in the first year of the most recent three year cycle. The CCPD grants program has initiated efforts to enhance current grantee awards over the next two years. In addition, there is a new Request for Application (RFA) that is in process that will fund additional grantees, that were not awarded in the previous RFA, over the next two years. The program anticipates granting an additional \$8 million over the next two years, FY 2016-17 and FY 2017-18, to address the high fund balance.</p>						
<b>Cash Fund Narrative Information</b>							
Purpose/Background of Fund	Moneys in the fund shall be annually appropriated by the General Assembly to the Prevention Services Division of the Department of Public Health and Environment for the Cancer, Cardiovascular Disease and Chronic Pulmonary Disease Prevention, Early Detection and Treatment Program.						
Fee Sources	None.						
Non-Fee Sources	Amendment 35 Tobacco Excise Tax funding.						
Long Bill Groups Supported by Fund	(9) Prevention Services Division , (B) Chronic Disease Prevention Programs, Cancer, Cardiovascular Disease, and Chronic Pulmonary Disease Program Administration and grants, (1) Administration and Support, (B) Office of Health Disparities, Personal Services, operating Expenses, and Health Disparities Grants						

**Schedule 13**

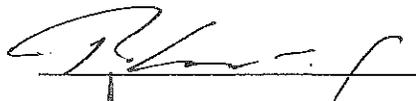
**Funding Request for the FY 2018-19 Budget Cycle**

Department of Public Health and Environment

Request Title

**NP-02 Cybersecurity Liability Insurance Policy**

Dept. Approval By:

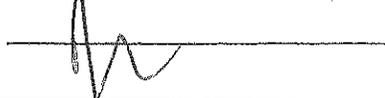


Supplemental FY 2017-18

  X  

Change Request FY 2018-19

OSPB Approval By:



Budget Amendment FY 2018-19

Summary Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20
		Initial Appropriation	Supplemental Request	Base Request	Change Request Continuation
<b>Total</b>		\$252,884	\$0	\$224,136	\$5,914 \$5,914
FTE		0.0	0.0	0.0	0.0 0.0
GF		\$0	\$0	\$0	\$0 \$0
CF		\$0	\$0	\$0	\$0 \$0
RF		\$252,884	\$0	\$224,136	\$5,914 \$5,914
FF		\$0	\$0	\$0	\$0 \$0

Line Item Information	Fund	FY 2017-18		FY 2018-19	FY 2019-20
		Initial Appropriation	Supplemental Request	Base Request	Change Request Continuation
<b>Total</b>		\$252,884	\$0	\$224,136	\$5,914 \$5,914
FTE		0.0	0.0	0.0	0.0 0.0
01. Administration and Support, (A) Administration -- Payment to Risk Management and Property Funds	GF	\$0	\$0	\$0	\$0 \$0
	CF	\$0	\$0	\$0	\$0 \$0
	RF	\$252,884	\$0	\$224,136	\$5,914 \$5,914
	FF	\$0	\$0	\$0	\$0 \$0

CF Letternote Text Revision Required?	Yes	No	<u>  X  </u>	If Yes, see schedule 4 fund source detail.
RF Letternote Text Revision Required?	Yes	No	<u>  X  </u>	
FF Letternote Text Revision Required?	Yes	No	<u>  X  </u>	
Requires Legislation?	Yes	No	<u>  X  </u>	
Type of Request?	Department of Public Health and Environment Non-Prioritized Request			
Interagency Approval or Related Schedule 13s:	Department of Personnel and Administration			



**Schedule 13**

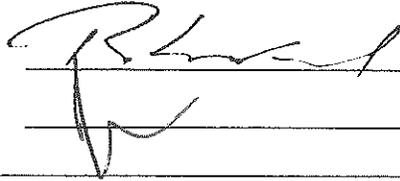
**Funding Request for the FY 2018-19 Budget Cycle**

Department of Public Health and Environment

Request Title

NP-03 OIT Operating System Suite

Dept. Approval By: \_\_\_\_\_



OSPB Approval By: \_\_\_\_\_

Supplemental FY 2017-18  
 Change Request FY 2018-19  
 Budget Amendment FY 2018-19

Summary Information	Fund	FY 2017-18		FY 2018-19		FY 2019-20
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
<b>Total</b>		\$130,025,035	\$0	\$131,819,945	\$74,072	\$91,196
FTE		351.0	0.0	353.1	0.0	0.0
Total of All Line Items Impacted by Change Request	GF	\$7,785,752	\$0	\$7,986,708	(\$5,136)	(\$5,136)
	CF	\$22,634,903	\$0	\$22,878,600	(\$75,873)	(\$75,873)
	RF	\$14,883,958	\$0	\$16,168,962	\$197,547	\$214,671
	FF	\$84,720,422	\$0	\$84,785,675	(\$42,466)	(\$42,466)

Line Item Information	Fund	FY 2017-18		FY 2018-19		FY 2019-20
		Initial	Request	Base	Change	Continuation
<b>Total</b>		\$2,311,694	\$0	\$2,311,694	(\$10,074)	(\$10,074)
FTE		0.0	0.0	0.0	0.0	0.0
01. Administration and Support, (A) Administration -- Operating Expenses	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$0	\$0	\$0	\$0	\$0
	RF	\$2,311,694	\$0	\$2,311,694	(\$10,074)	(\$10,074)
	FF	\$0	\$0	\$0	\$0	\$0

<b>Total</b>		\$8,901,463	\$0	\$10,166,482	\$218,843	\$235,967
FTE		0.0	0.0	0.0	0.0	0.0
01. Administration and Support, (A) Administration -- Payments to OIT	GF	\$1,799,304	\$0	\$1,911,891	\$0	\$0
	CF	\$0	\$0	\$0	\$0	\$0
	RF	\$7,102,159	\$0	\$8,254,591	\$218,843	\$235,967
	FF	\$0	\$0	\$0	\$0	\$0

<b>Total</b>		\$479,503	\$0	\$506,533	(\$123)	(\$123)
FTE		3.8	0.0	3.8	0.0	0.0
02. Center for Health and Environmental Information, (A) Administration and Support -- Program Costs	GF	\$35,412	\$0	\$62,442	\$0	\$0
	CF	\$167,063	\$0	\$167,063	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$277,028	\$0	\$277,028	(\$123)	(\$123)

02. Center for Health and Environmental Information, (B) Health Statistics and Vital Records -- Operating Expenses	<b>Total</b>	<b>\$456,869</b>	<b>\$0</b>	<b>\$456,869</b>	<b>(\$6,076)</b>	<b>(\$6,076)</b>
	FTE	0.0	0.0	0.0	0.0	0.0
	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$263,269	\$0	\$263,269	(\$584)	(\$584)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$193,600	\$0	\$193,600	(\$5,492)	(\$5,492)
<hr/>						
02. Center for Health and Environmental Information, (C) Medical Marijuana Registry -- Operating Expenses	<b>Total</b>	<b>\$121,228</b>	<b>\$0</b>	<b>\$121,228</b>	<b>(\$935)</b>	<b>(\$935)</b>
	FTE	0.0	0.0	0.0	0.0	0.0
	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$121,228	\$0	\$121,228	(\$935)	(\$935)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0
<hr/>						
02. Center for Health and Environmental Information, (D) Health Data Programs and Information -- Cancer Registry	<b>Total</b>	<b>\$1,202,637</b>	<b>\$0</b>	<b>\$1,204,622</b>	<b>(\$1,169)</b>	<b>(\$1,169)</b>
	FTE	10.2	0.0	10.2	0.0	0.0
	GF	\$213,828	\$0	\$215,813	\$0	\$0
	CF	\$0	\$0	\$0	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$988,809	\$0	\$988,809	(\$1,169)	(\$1,169)
<hr/>						
02. Center for Health and Environmental Information, (D) Health Data Programs and Information -- Birth Defects Monitoring and Prevention Program	<b>Total</b>	<b>\$1,461,054</b>	<b>\$0</b>	<b>\$1,461,054</b>	<b>(\$1,110)</b>	<b>(\$1,110)</b>
	FTE	12.6	0.0	12.6	0.0	0.0
	GF	\$123,073	\$0	\$123,073	\$0	\$0
	CF	\$153,700	\$0	\$153,700	(\$1,110)	(\$1,110)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$1,184,281	\$0	\$1,184,281	\$0	\$0
<hr/>						
03. Laboratory Services -- Director's Office	<b>Total</b>	<b>\$1,060,425</b>	<b>\$0</b>	<b>\$1,093,651</b>	<b>(\$7,455)</b>	<b>(\$7,455)</b>
	FTE	13.3	0.0	13.3	0.0	0.0
	GF	\$385,855	\$0	\$398,425	\$0	\$0
	CF	\$465,667	\$0	\$486,323	(\$7,455)	(\$7,455)
	RF	\$138,346	\$0	\$138,346	\$0	\$0
	FF	\$70,557	\$0	\$70,557	\$0	\$0
<hr/>						
04. Air Pollution Control Division, (A) Administration -- Program Costs	<b>Total</b>	<b>\$1,652,903</b>	<b>\$0</b>	<b>\$1,683,888</b>	<b>(\$19,041)</b>	<b>(\$19,041)</b>
	FTE	17.8	0.0	17.8	0.0	0.0
	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$1,462,015	\$0	\$1,493,000	(\$11,654)	(\$11,654)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$190,888	\$0	\$190,888	(\$7,387)	(\$7,387)
<hr/>						
05. Water Quality Control Division, (A) Administration -- Administration	<b>Total</b>	<b>\$1,986,533</b>	<b>\$0</b>	<b>\$1,997,659</b>	<b>(\$17,832)</b>	<b>(\$17,832)</b>
	FTE	19.4	0.0	19.4	0.0	0.0
	GF	\$485,895	\$0	\$495,629	(\$1,000)	(\$1,000)
	CF	\$442,134	\$0	\$443,526	(\$6,500)	(\$6,500)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$1,058,504	\$0	\$1,058,504	(\$10,332)	(\$10,332)

	<b>Total</b>	<b>\$2,318,376</b>	<b>\$0</b>	<b>\$2,318,376</b>	<b>(\$11,787)</b>	<b>(\$11,787)</b>
06. Hazardous Materials and Waste Management Division,	FTE	19.0	0.0	19.0	0.0	0.0
(A) Administration -- Program	GF	\$0	\$0	\$0	\$0	\$0
Costs	CF	\$1,544,675	\$0	\$1,544,675	(\$11,787)	(\$11,787)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$773,701	\$0	\$773,701	\$0	\$0
	<b>Total</b>	<b>\$856,338</b>	<b>\$0</b>	<b>\$868,304</b>	<b>(\$41)</b>	<b>(\$41)</b>
07. Division of Environmental Health and Sustainability -- Administration and Support	FTE	7.5	0.0	7.5	0.0	0.0
	GF	\$484,575	\$0	\$489,656	\$0	\$0
	CF	\$270,049	\$0	\$276,934	(\$41)	(\$41)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$101,714	\$0	\$101,714	\$0	\$0
	<b>Total</b>	<b>\$2,423,384</b>	<b>\$0</b>	<b>\$2,559,057</b>	<b>(\$3,009)</b>	<b>(\$3,009)</b>
07. Division of Environmental Health and Sustainability -- Environmental Health Programs	FTE	22.3	0.0	22.3	0.0	0.0
	GF	\$664,009	\$0	\$677,259	\$0	\$0
	CF	\$1,193,927	\$0	\$1,316,350	(\$3,009)	(\$3,009)
	RF	\$111,730	\$0	\$111,730	\$0	\$0
	FF	\$453,718	\$0	\$453,718	\$0	\$0
	<b>Total</b>	<b>\$841,511</b>	<b>\$0</b>	<b>\$841,511</b>	<b>(\$625)</b>	<b>(\$625)</b>
07. Division of Environmental Health and Sustainability -- Sustainability Programs	FTE	8.6	0.0	8.6	0.0	0.0
	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$248,790	\$0	\$248,790	(\$123)	(\$123)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$592,721	\$0	\$592,721	(\$502)	(\$502)
	<b>Total</b>	<b>\$3,508,548</b>	<b>\$0</b>	<b>\$3,508,548</b>	<b>(\$348)</b>	<b>(\$348)</b>
07. Division of Environmental Health and Sustainability -- Recycling Resources Economic Opportunity Program	FTE	1.4	0.0	1.4	0.0	0.0
	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$3,508,548	\$0	\$3,508,548	(\$348)	(\$348)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0
	<b>Total</b>	<b>\$114,350</b>	<b>\$0</b>	<b>\$114,350</b>	<b>(\$7)</b>	<b>(\$7)</b>
07. Division of Environmental Health and Sustainability -- Oil And Gas Consultation Program	FTE	0.9	0.0	0.9	0.0	0.0
	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$114,350	\$0	\$114,350	(\$7)	(\$7)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$0	\$0	\$0	\$0	\$0
	<b>Total</b>	<b>\$51,119,269</b>	<b>\$0</b>	<b>\$51,099,527</b>	<b>(\$11,842)</b>	<b>(\$11,842)</b>
08. Disease Control and Environmental Epidemiology Division, (A) Administration, General Disease Control and Surveillance -- Immunization Operating Expenses	FTE	0.0	0.0	0.0	0.0	0.0
	GF	\$1,377,808	\$0	\$1,358,066	\$0	\$0
	CF	\$1,691,461	\$0	\$1,691,461	(\$11,842)	(\$11,842)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$48,050,000	\$0	\$48,050,000	\$0	\$0

08. Disease Control and Environmental Epidemiology Division, (B) Special Purpose Disease Control Programs -- Sexually Transmitted Infections, HIV and AIDS, Operating Exp	<b>Total</b>	<b>\$4,556,289</b>	<b>\$0</b>	<b>\$4,556,289</b>	<b>(\$3,576)</b>	<b>(\$3,576)</b>
	FTE	0.0	0.0	0.0	0.0	0.0
	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$2,857,389	\$0	\$2,857,389	(\$3,576)	(\$3,576)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$1,698,900	\$0	\$1,698,900	\$0	\$0

08. Disease Control and Environmental Epidemiology Division, (B) Special Purpose Disease Control Programs -- Ryan White Act, Operating Expenses	<b>Total</b>	<b>\$22,604,132</b>	<b>\$0</b>	<b>\$22,604,132</b>	<b>(\$6,041)</b>	<b>(\$6,041)</b>
	FTE	0.0	0.0	0.0	0.0	0.0
	GF	\$1,451,065	\$0	\$1,451,065	\$0	\$0
	CF	\$5,600,967	\$0	\$5,600,967	(\$6,041)	(\$6,041)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$15,552,100	\$0	\$15,552,100	\$0	\$0

09. Prevention Services Division, (A) Administration -- Administration	<b>Total</b>	<b>\$2,671,020</b>	<b>\$0</b>	<b>\$2,700,601</b>	<b>(\$20,251)</b>	<b>(\$20,251)</b>
	FTE	31.7	0.0	31.7	0.0	0.0
	GF	\$398,076	\$0	\$418,609	(\$1,013)	(\$1,013)
	CF	\$612,617	\$0	\$621,665	(\$4,050)	(\$4,050)
	RF	\$15,029	\$0	\$15,029	\$0	\$0
	FF	\$1,645,298	\$0	\$1,645,298	(\$15,188)	(\$15,188)

09. Prevention Services Division, (B) Chronic Disease Prevention Programs -- Chronic Disease and Cancer Prevention Grants	<b>Total</b>	<b>\$6,808,400</b>	<b>\$0</b>	<b>\$6,808,400</b>	<b>(\$2,273)</b>	<b>(\$2,273)</b>
	FTE	37.3	0.0	37.3	0.0	0.0
	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$0	\$0	\$0	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$6,808,400	\$0	\$6,808,400	(\$2,273)	(\$2,273)

10. Health Facilities and Emergency Medical Services, (A) Operations Management - Administration and Operations	<b>Total</b>	<b>\$2,044,949</b>	<b>\$0</b>	<b>\$2,115,185</b>	<b>(\$6,811)</b>	<b>(\$6,811)</b>
	FTE	23.8	0.0	23.8	0.0	0.0
	GF	\$64,791	\$0	\$82,719	\$0	\$0
	CF	\$1,917,054	\$0	\$1,969,362	(\$6,811)	(\$6,811)
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$63,104	\$0	\$63,104	\$0	\$0

10. Health Facilities and Emergency Medical Services, (B) Health Facilities Program - Medicaid / Medicare Certification Program	<b>Total</b>	<b>\$9,596,763</b>	<b>\$0</b>	<b>\$9,794,588</b>	<b>(\$11,222)</b>	<b>(\$11,222)</b>
	FTE	109.3	0.0	111.4	0.0	0.0
	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$0	\$0	\$0	\$0	\$0
	RF	\$5,205,000	\$0	\$5,337,572	(\$11,222)	(\$11,222)
	FF	\$4,391,763	\$0	\$4,457,016	\$0	\$0

	<b>Total</b>	<b>\$927,397</b>	<b>\$0</b>	<b>\$927,397</b>	<b>(\$3,123)</b>	<b>(\$3,123)</b>
11. Office of Emergency	FTE	12.1	0.0	12.1	0.0	0.0
Preparedness and Response,	GF	\$302,061	\$0	\$302,061	(\$3,123)	(\$3,123)
(A) Operations Management -	CF	\$0	\$0	\$0	\$0	\$0
- Administration and Support	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$625,336	\$0	\$625,336	\$0	\$0

CF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	If Yes, see schedule 4 fund source detail.
RF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
FF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
Requires Legislation?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
Type of Request?	Department of Public Health and Environment Non-Prioritized Request				
Interagency Approval or Related Schedule 13s:	Office of Information Technology				



**Schedule 13**

**Funding Request for the FY 2018-19 Budget Cycle**

Department of Public Health and Environment

Request Title

NP-04 Annual Fleet Vehicle Request

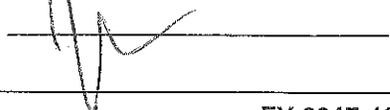
Dept. Approval By:



Supplemental FY 2017-18

Change Request FY 2018-19

OSPB Approval By:



Budget Amendment FY 2018-19

Summary Information	Fund	FY 2017-18		FY 2018-19		FY 2019-20
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
<b>Total</b>		\$366,216	\$0	\$369,636	\$72,252	\$72,252
FTE		0.0	0.0	0.0	0.0	0.0
<b>Total of All Line Items Impacted by Change Request</b>	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$260,165	\$0	\$263,585	\$43,351	\$43,351
	RF	\$72,861	\$0	\$72,861	\$18,063	\$18,063
	FF	\$33,190	\$0	\$33,190	\$10,838	\$10,838

Line Item Information	Fund	FY 2017-18		FY 2018-19		FY 2019-20
		Initial Appropriation	Supplemental Request	Base Request	Change Request	Continuation
<b>Total</b>		\$366,216	\$0	\$369,636	\$72,252	\$72,252
FTE		0.0	0.0	0.0	0.0	0.0
01. Administration and Support, (A) Administration -- Vehicle Lease Payments	GF	\$0	\$0	\$0	\$0	\$0
	CF	\$260,165	\$0	\$263,585	\$43,351	\$43,351
	RF	\$72,861	\$0	\$72,861	\$18,063	\$18,063
	FF	\$33,190	\$0	\$33,190	\$10,838	\$10,838

CF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	If Yes, see schedule 4 fund source detail.
RF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
FF Letternote Text Revision Required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
Requires Legislation?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	
Type of Request?	Department of Public Health and Environment Non-Prioritized Request				
Interagency Approval or Related Schedule 13s:	Department of Personnel and Administration				

