

STATE OF COLORADO FY 2011-12 BUDGET REQUEST CYCLE: DEPARTMENT OF HEALTH CARE POLICY AND FINANCING

Schedule 13 Change Request for FY 2011-12 Budget Request Cycle											
Decision Item FY 2011-12		Base Reduction Item FY 2011-12			Supplemental FY 2010-11			Budget Amendment FY 2011-12			
Request Title: Prenatal Plus Administration Transfer											
Department: Health Care Policy and Financing					Dept. Approval by: John Bartholomew			Date: November 1, 2010 10/20			
Priority Number: DI-8					OSPB Approval: <i>Pete</i>			Date: 10-21-10			
	Fund	1 Prior-Year Actual FY 2009-10	2 Appropriation FY 2010-11	3 Supplemental Request FY 2010-11	4 Total Revised Request FY 2010-11	5 Base Request FY 2011-12	6 Decision/ Base Reduction FY 2011-12	7 November 1 Request FY 2011-12	8 Budget Amendment FY 2011-12	9 Total Revised Request FY 2011-12	10 Change from Base (Column 5) FY 2012-13
Total of All Line Items	Total	22 174 977	22 209 332	0	22 209 332	23 704 184	(1 557)	23 702 627	0	23 702 627	0
	FTE	275 4	294 8	0 0	294 8	311 6	0 9	312 5	0 0	312 5	0 9
	GF	8 623 859	8 353 987	0	8 353 987	8 470 892	(779)	8 470 113	0	8 470 113	0
	GFE	0	0	0	0	0	0	0	0	0	0
	CF	1 298 469	1 772 650	0	1 772 650	2 336 641	0	2 336 641	0	2 336 641	0
	CFE/RF	1 198 271	537 864	0	537 864	470 299	0	470 299	0	470 299	0
	FF	11 054 378	11 544 831	0	11 544 831	12 426 352	(778)	12 425 574	0	12 425 574	0
(1) Executive Director's Office; (A) General Administration, Personal Services	Total	20 499 157	20 463 541	0	20 463 541	22 071 747	90 345	22 162 092	0	22 162 092	101 988
	FTE	275 4	294 8	0 0	294 8	311 6	0 9	312 5	0 0	312 5	0 9
	GF	7 927 142	7 614 607	0	7 614 607	7 748 954	44 421	7 794 375	0	7 794 375	50 243
	GFE	0	0	0	0	0	0	0	0	0	0
	CF	1 172 469	1 652 353	0	1 652 353	2 254 578	0	2 254 578	0	2 254 578	0
	CFE/RF	1 187 672	524 403	0	524 403	456 838	0	456 838	0	456 838	0
	FF	10 211 874	10 672 178	0	10 672 178	11 610 377	46 924	11 656 301	0	11 656 301	51 745
(1) Executive Director's Office; (A) General Administration, Operating Expenses	Total	1 567 165	1 626 785	0	1 626 785	1 513 431	21 104	1 534 535	0	1 534 535	11 018
	FTE	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0 0
	GF	642 384	680 628	0	680 628	662 186	10 552	672 738	0	672 738	6 509
	GFE	0	0	0	0	0	0	0	0	0	0
	CF	126 000	120 297	0	120 297	82 063	0	82 063	0	82 063	0
	CFE/RF	10 599	13 461	0	13 461	13 461	0	13 461	0	13 461	0
	FF	788 172	812 399	0	812 399	755 721	10 552	766 273	0	766 273	5 509

STATE OF COLORADO FY 2011-12 BUDGET REQUEST CYCLE: DEPARTMENT OF HEALTH CARE POLICY AND FINANCING

Schedule 13 Change Request for FY 2011-12 Budget Request Cycle											
Decision Item FY 2011-12	<input checked="" type="checkbox"/>	Base Reduction Item FY 2011-12	<input type="checkbox"/>	Supplemental FY 2010-11	<input type="checkbox"/>	Budget Amendment FY 2011-12	<input type="checkbox"/>				
Request Title:	Prenatal Plus Administration Transfer										
Department:	Health Care Policy and Financing			Dept. Approval by:	John Bartholomew			Date:	November 1, 2010		
Priority Number:	DI-8			OSPB Approval:				Date:			
		1	2	3	4	5	6	7	8	9	10
		Prior-Year Actual FY 2009-10	Appropriation FY 2010-11	Supplemental Request FY 2010-11	Total Revised Request FY 2010-11	Base Request FY 2011-12	Decision/Base Reduction FY 2011-12	November 1 Request FY 2011-12	Budget Amendment FY 2011-12	Total Revised Request FY 2011-12	Change from Base (Column 5) FY 2012-13
	Fund										
(1) Executive Director's Office; (B) Transfers to Other Departments, Transfer to Department of Public Health and Environment for Prenatal Plus Statistical Information (New Line Item)	Total	0	0	0	0	0	6,000	6,000	0	6,000	6,000
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	0	0	0	0	0	3,000	3,000	0	3,000	3,000
	GFE	0	0	0	0	0	0	0	0	0	0
	CF	0	0	0	0	0	0	0	0	0	0
	CFE/RF	0	0	0	0	0	0	0	0	0	0
	FF	0	0	0	0	0	3,000	3,000	0	3,000	3,000
(1) Executive Director's Office; (B) Transfers to Other Departments, Transfer to Department of Public Health and Environment for Enhanced Prenatal Care Training and Technical Assistance	Total	108,665	119,006	0	119,006	119,006	(119,006)	0	0	0	(119,006)
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	54,333	58,752	0	58,752	58,752	(58,752)	0	0	0	(58,752)
	GFE	0	0	0	0	0	0	0	0	0	0
	CF	0	0	0	0	0	0	0	0	0	0
	CFE/RF	0	0	0	0	0	0	0	0	0	0
	FF	54,332	60,254	0	60,254	60,254	(60,254)	0	0	0	(60,254)
Non-Line Item Request:	None.										
Letternote Revised Text:	None.										
Cash or Federal Fund Name and COFRS Fund Number:	FF: Title XIX										
Reappropriated Funds Source, by Department and Line Item Name:											
Approval by OIT?	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>	N/A: <input checked="" type="checkbox"/>								
Schedule 13s from Affected Departments:	Department of Public Health and Environment										

Schedule 13
Change Request for FY 2011-12 Budget Request Cycle

Decision Item FY 2011-12 Base Reduction Item FY 2011-12 Supplemental FY 2010-11 Budget Amendment FY 2011-12

Request Title: Prenatal Plus Administration Transfer
 Department: Public Health and Environment With Health Care Policy and Financing
 Priority Number: DI # 3 (See HCPF DI # 8)

Dept. Approval by: *[Signature]* Date: 10/14/10
 OSPB Approval: *[Signature]* Date: 10-25-10

	Fund	1	2	3	4	5	6	7	8	9	10
		Prior-Year Actual FY 2009-10	Appropriation FY 2010-11	Supplemental Request FY 2010-11	Total Revised Request FY 2010-11	Base Request FY 2011-12	Decision/Base Reduction FY 2011-12	November 1 Request FY 2011-12	Budget Amendment FY 2011-12	Total Revised Request FY 2011-12	Change from Base (Column 5) FY 2012-13
Total of All Line Items	Total	18,815,757	22,949,448	0	22,949,448	24,417,902	(110,933)	24,306,969	0	24,306,969	(113,006)
	FTE	85.8	84.6	0.0	84.6	84.1	(0.9)	83.2	0.0	83.2	(0.9)
	GF	2,368,699	2,374,305	0	2,374,305	2,558,333	0	2,558,333	0	2,558,333	0
	CF	5,269,958	7,319,724	0	7,319,724	7,802,855	0	7,802,855	0	7,802,855	0
	CFE/RF	3,028,554	1,312,039	0	1,312,039	1,616,619	(110,933)	1,505,686	0	1,505,686	(113,006)
	FF	8,148,546	11,943,380	0	11,943,380	12,440,095	0	12,440,095	0	12,440,095	0
	MCF	250,214	476,822	0	476,822	556,101	(110,933)	445,168	0	445,168	(113,006)
	MGF	100,556	129,983	0	129,983	211,399	(54,716)	156,683	0	156,683	(48,754)
	NGF	2,469,255	2,504,288	0	2,504,288	2,769,732	(54,716)	2,715,016	0	2,715,016	(48,754)
(1) Administration and Support; (A)	Total	2,337,971	6,531,678	0	6,531,678	7,088,063	(8,919)	7,079,144	0	7,079,144	(8,919)
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	460,272	511,770	0	511,770	588,613	0	588,613	0	588,613	0
	CF	1,318,190	2,250,677	0	2,250,677	2,463,310	0	2,463,310	0	2,463,310	0
	CFE/RF	559,509	640,921	0	640,921	810,775	(8,919)	801,856	0	801,856	(8,919)
	FF	0	3,128,310	0	3,128,310	3,225,365	0	3,225,365	0	3,225,365	0
	MCF	0	234,705	0	234,705	284,356	(8,919)	275,437	0	275,437	(8,919)
	MGF	0	50,123	0	50,123	100,884	(4,460)	96,424	0	96,424	(4,460)
	NGF	460,272	561,893	0	561,893	689,497	(4,460)	685,037	0	685,037	(4,460)
(1) Administration and Support; (A)	Total	67,762	116,631	0	116,631	139,328	(188)	139,140	0	139,140	(188)
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	9,160	8,830	0	8,830	11,523	0	11,523	0	11,523	0
	CF	41,788	40,744	0	40,744	48,307	0	48,307	0	48,307	0
	CFE/RF	16,814	12,801	0	12,801	16,333	(188)	16,145	0	16,145	(188)
	FF	0	54,256	0	54,256	63,165	0	63,165	0	63,165	0
	MCF	5,886	4,942	0	4,942	5,651	(188)	5,463	0	5,463	(188)
	MGF	3,738	1,483	0	1,483	1,992	(94)	1,898	0	1,898	(94)
	NGF	12,898	10,313	0	10,313	13,515	(94)	13,421	0	13,421	(94)

Schedule 13
Change Request for FY 2011-12 Budget Request Cycle

Decision Item FY 2011-12 <input checked="" type="checkbox"/>	Base Reduction Item FY 2011-12 <input type="checkbox"/>	Supplemental FY 2010-11 <input type="checkbox"/>	Budget Amendment FY 2011-12 <input type="checkbox"/>
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Request Title: Prenatal Plus Administration Transfer
 Department: Public Health and Environment With Health Care Policy and Financing
 Priority Number: DI # 3 (See HCPF DI # 8)

Dept. Approval by: _____ Date: _____
 OSPB Approval: _____ Date: _____

	Fund	1	2	3	4	5	6	7	8	9	10
		Prior-Year Actual FY 2009-10	Appropriation FY 2010-11	Supplemental Request FY 2010-11	Total Revised Request FY 2010-11	Base Request FY 2011-12	Decision/ Base Reduction FY 2011-12	November 1 Request FY 2011-12	Budget Amendment FY 2011-12	Total Revised Request FY 2011-12	Change from Base (Column 5) FY 2012-13
(1) Administration and Support; (A) Administration, S.B. 04-257 Amortization Equalization Disbursement	Total	872,322	1,824,646	0	1,824,646	2,204,048	(2,908)	2,201,140	0	2,201,140	(2,908)
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	116,162	134,762	0	134,762	182,281	0	182,281	0	182,281	0
	CF	539,200	651,555	0	651,555	764,176	0	764,176	0	764,176	0
	CFE/RF	216,960	198,220	0	198,220	258,368	(2,908)	255,460	0	255,460	(2,908)
	FF	0	840,109	0	840,109	999,223	0	999,223	0	999,223	0
	MCF	88,196	76,513	0	76,513	89,391	(2,908)	86,483	0	86,483	(2,908)
	MGF	30,199	14,954	0	14,954	31,514	(1,454)	30,060	0	30,060	(1,454)
	NGF	146,361	149,716	0	149,716	213,795	(1,454)	212,341	0	212,341	(1,454)
(1) Administration and Support; (A) Administration, S.B. 06-253 Supplemental Amortization Equalization Disbursement	Total	543,934	1,329,452	0	1,329,452	1,771,110	(2,120)	1,768,990	0	1,768,990	(2,120)
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	71,335	97,245	0	97,245	146,476	0	146,476	0	146,476	0
	CF	337,000	475,092	0	475,092	614,070	0	614,070	0	614,070	0
	CFE/RF	135,599	144,535	0	144,535	207,617	(2,120)	205,497	0	205,497	(2,120)
	FF	0	612,580	0	612,580	802,947	0	802,947	0	802,947	0
	MCF	47,467	55,791	0	55,791	71,832	(2,120)	69,712	0	69,712	(2,120)
	MGF	16,250	11,737	0	11,737	25,323	(1,060)	24,263	0	24,263	(1,060)
	NGF	87,585	108,982	0	108,982	171,799	(1,060)	170,739	0	170,739	(1,060)
(2) Center for Health and Environmental Information, (A) Health Statistics and Vital Records, Personal Services	Total	3,496,205	4,190,474	0	4,190,474	4,235,617	2,450	4,238,067	0	4,238,067	2,450
	FTE	53.1	68.9	0.0	68.9	68.4	0.0	68.4	0.0	68.4	0.0
	GF	0	0	0	0	0	0	0	0	0	0
	CF	2,366,048	3,143,972	0	3,143,972	3,155,408	0	3,155,408	0	3,155,408	0
	CFE/RF	3,550	3,550	0	3,550	3,550	2,450	6,000	0	6,000	2,450
	FF	1,126,607	1,042,952	0	1,042,952	1,076,659	0	1,076,659	0	1,076,659	0
	MCF	3,550	3,550	0	3,550	3,550	2,450	6,000	0	6,000	2,450
	MGF	1,608	1,775	0	1,775	1,775	1,225	3,000	0	3,000	1,225
	NGF	1,608	1,775	0	1,775	1,775	1,225	3,000	0	3,000	1,225
(2) Center for Health and Environmental Information, (B) Information Technology Services, Personal Services	Total	2,454,482	279,515	0	279,515	282,230	(14,607)	267,623	0	267,623	(15,145)
	FTE	20.1	1.8	0.0	1.8	1.8	0.0	1.8	0.0	1.8	0.0
	GF	0	0	0	0	0	0	0	0	0	0
	CF	160,855	72,028	0	72,028	71,928	0	71,928	0	71,928	0
	CFE/RF	2,006,152	202,338	0	202,338	210,302	(14,607)	195,695	0	195,695	(15,145)
	FF	287,475	5,149	0	5,149	0	0	0	0	0	0
	MCF	15,145	15,145	0	15,145	15,145	(14,607)	538	0	538	(15,145)
	MGF	6,860	7,573	0	7,573	7,573	(7,303)	270	0	270	(573)
	NGF	6,860	7,573	0	7,573	7,573	(7,303)	270	0	270	(573)

Schedule 13
Change Request for FY 2011-12 Budget Request Cycle

Decision Item FY 2011-12 <input checked="" type="checkbox"/>	Base Reduction Item FY 2011-12 <input type="checkbox"/>	Supplemental FY 2010-11 <input type="checkbox"/>	Budget Amendment FY 2011-12 <input type="checkbox"/>
Request Title: Prenatal Plus Administration Transfer			
Department: Public Health and Environment With Health Care Policy and Financing		Dept. Approval by:	Date:
Priority Number: DI # 3 (See HCPF DI # 8)		OSPB Approval:	Date:

	Fund	1	2	3	4	5	6	7	8	9	10
		Prior-Year Actual FY 2009-10	Appropriation FY 2010-11	Supplemental Request FY 2010-11	Total Revised Request FY 2010-11	Base Request FY 2011-12	Decision/ Base Reduction FY 2011-12	November 1 Request FY 2011-12	Budget Amendment FY 2011-12	Total Revised Request FY 2011-12	Change from Base (Column 5) FY 2012-13
(9) Prevention Services Division; (A) Prevention Programs; (1) Programs and Administration, Indirect Cost Assessment	Total	2,980,109	2,912,251	0	2,912,251	2,912,251	(1,502)	2,910,749	0	2,910,749	(1,502)
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	0	0	0	0	0	0	0	0	0	0
	CF	506,877	685,656	0	685,656	685,656	0	685,656	0	685,656	0
	CFE/RF	186	25,000	0	25,000	25,000	(1,502)	23,498	0	23,498	(1,502)
	FF	2,473,046	2,201,595	0	2,201,595	2,201,595	0	2,201,595	0	2,201,595	0
	MCF	186	1,502	0	1,502	1,502	(1,502)	0	0	0	(1,502)
	MGF	0	0	0	0	0	0	0	0	0	0
	NGF	0	0	0	0	0	0	0	0	0	0
(9) Prevention Services Division; (B) Women's Health - Family Planning, Personal Services	Total	1,251,739	1,185,085	0	1,185,085	1,205,539	(57,634)	1,147,905	0	1,147,905	(59,169)
	FTE	12.6	13.9	0.0	13.9	13.9	(0.9)	13.0	0.0	13.0	(0.9)
	GF	482,767	392,695	0	392,695	400,437	0	400,437	0	400,437	0
	CF	0	0	0	0	0	0	0	0	0	0
	CFE/RF	73,304	59,169	0	59,169	59,169	(57,634)	1,535	0	1,535	(59,169)
	FF	695,668	733,221	0	733,221	745,933	0	745,933	0	745,933	0
	MCF	73,304	59,169	0	59,169	59,169	(57,634)	1,535	0	1,535	(59,169)
	MGF	33,661	29,585	0	29,585	29,585	(28,817)	768	0	768	(29,585)
	NGF	516,428	422,280	0	422,280	430,022	(28,817)	401,205	0	401,205	(29,585)
(9) Prevention Services Division; (B) Women's Health - Family Planning, Purchase of Services	Total	4,811,233	4,579,716	0	4,579,716	4,579,716	(25,505)	4,554,211	0	4,554,211	(25,505)
	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	GF	1,229,003	1,229,003	0	1,229,003	1,229,003	0	1,229,003	0	1,229,003	0
	CF	0	0	0	0	0	0	0	0	0	0
	CFE/RF	16,480	25,505	0	25,505	25,505	(25,505)	0	0	0	(25,505)
	FF	3,565,750	3,325,208	0	3,325,208	3,325,208	0	3,325,208	0	3,325,208	0
	MCF	16,480	25,505	0	25,505	25,505	(25,505)	0	0	0	(25,505)
	MGF	8,240	12,753	0	12,753	12,753	(12,753)	0	0	0	(12,753)
	NGF	1,237,243	1,241,756	0	1,241,756	1,241,756	(12,753)	1,229,003	0	1,229,003	(12,753)

Please note that this Schedule 13 reduces the amount of the transfer to account for the PERA and 2% Personal Services reduction requests.

Non-Line Item Request: None

Letternote Revised Text for FY 2010-11: None

Letternote Text Requested for FY 2011-12: None

Cash or Federal Fund Name and COFRS Fund Number: None

Reappropriated Funds Source, by Department and Line Item Name: Health Care Policy and Financing, (1) Executive Director's Office, ((B) Transfer to Other Departments, Transfer to Department of Public Health and Environment for Enhance Prenatal Care and Technical Assistance

Approval by OIT? Yes: No: N/A:

Schedule 13s from Affected Departments: Health Care Policy and Financing

CHANGE REQUEST for FY 2011-12 BUDGET REQUEST CYCLE

Department:	Health Care Policy and Financing
Priority Number:	DI-8 (See also CDPHE DI-3)
Change Request Title:	Prenatal Plus Administration Transfer

SELECT ONE (click on box):

- Decision Item FY 2011-12
- Base Reduction Item FY 2011-12
- Supplemental Request FY 2010-11
- Budget Request Amendment FY 2011-12

SELECT ONE (click on box):

Supplemental or Budget Request Amendment Criterion:

- Not a Supplemental or Budget Request Amendment
- An emergency
- A technical error which has a substantial effect on the operation of the program
- New data resulting in substantial changes in funding needs
- Unforeseen contingency such as a significant workload change

Short Summary of Request:

Both the Department of Health Care Policy and Financing (HCPF) and the Department of Public Health and Environment (CDPHE) request that administration of the Medicaid program known as Prenatal Plus be transferred from CDPHE to HCPF starting in FY 2011-12. This request results in a small savings of \$1,577 total funds for the Department due to the impact associated with the statewide non-prioritized 2.0% Across the Board Personal Services Reduction that is incorporated within this Decision Item – without the 2.0% reduction incorporated, this request would have a net zero impact for the Department.

General Description of Request:

HCPF and CDPHE request discontinuation of the Transfer to Department of Public Health and Environment for Enhanced Prenatal Care Training and Technical Assistance in the HCPF budget and discontinuation of the FTE at CDPHE. The funding and FTE would be reassigned to Personal Services and Operating Expenses in the HCPF appropriations. The exception would be creation of a new line item called Transfer to Department of Public Health and Environment for Prenatal Plus Statistical Information that would use \$6,000 to pay for data used to evaluate the effectiveness of the program

with data drawn by the Vital Records Section at CDPHE and prepared by the Health Statistics Section at CDPHE.

In FY 2010-11, HCPF provides \$119,006 total funds, before the 2% Personal Services Reduction, to CDPHE to administer a Medicaid only program for pregnant women who are at risk of delivering a low birth weight infant of five pounds and eight ounces or less at birth. This program provides counseling to the woman regarding her lifestyle, behavioral, and non-medical aspects of her life likely to affect her pregnancy. This approach complements the medical prenatal care that the woman also receives. The program is commonly known as Prenatal Plus, although the name in the HCPF budget for the administrative function of the program is Enhanced Prenatal Care Training and Technical Assistance.

The case management and medical expenses for these women are paid through the Medical Services Premiums line item in the HCPF budget. CDPHE receives funds from HCPF as Reappropriated Funds to administer the program through various providers. Beginning in FY 2011-12, this request would change the administrative funding so that \$113,006, reduced to \$111,449 after the Personal Services Reduction, would remain at HCPF and only \$6,000 would be transferred to CDPHE as Reappropriated Funds. But the amount would be restored to \$113,006 in FY 2012-13 after the Personal Services Reduction is annualized.

CDPHE has followed a model of direct oversight and close supervision of the various Prenatal Plus providers. The close supervision model has worked well for CDPHE, but the close supervision model is straining the limits of the funding available to CDPHE for this program. The two departments believe that HCPF can administer the program cost-effectively by using less direct supervision. HCPF manages most of the Medicaid programs through online instructions and by providing advice through telephone calls with the providers as needed. This has worked well for other Medicaid programs. Close range supervision is used by HCPF only when it becomes evident that a serious problem requires closer supervision.

Since all clients in the Prenatal Plus program are Medicaid clients, it is reasonable for HCPF to administer the program. The plans are for the current providers to continue to provide the counseling services to the women. On average, approximately 2,000 women participate in the Prenatal Plus program during a fiscal year, and this average number of clients has held steady for several years. Transitioning the administration of the program from CDPHE to HCPF would be the most efficient way to ensure that the program continues to meet the needs of the women who are at risk for delivering low birth weight infants.

At HCPF, the costs of the administration of Prenatal Plus would be incorporated into two budget line items. Those two line items are Personal Services and Operating Expenses. Personal Services costs would be \$90,345 total funds with \$44,422 General Fund in FY 2011-12 and \$101,988 total funds with \$50,243 General Fund in FY 2012-13. Personal Services would include salary, PERA, Medicare expenses, as well as Health, Life, and Dental Insurance and Short Term Disability Insurance as generally assigned. HCPF would use a General Professional IV class title and would seek staff with experience as a program manager/administer.

The Department is aware that CDPHE has included a reduction of \$1,557 related to the 2% statewide personal services reduction for FY 2011-12 in their corresponding request for the Prenatal Plus Administration Transfer. The Department requests that this reduction be taken out of its requested funding, as reflected in this request. In the event that this current request, DI-8, is not approved, the Department requests that this reduction be applied to its (1) Executive Director's Office; (B) Transfers to Other Departments, Transfer to Department of Public Health and Environment for Enhanced Prenatal Care Training and Technical Assistance line.

The Department is mindful of the limits on total FTE allocated to the entire Department. HCPF believes that managing the program will require more than 0.9 FTE. The Department will transfer the 0.9 FTE that is appropriated to CDPHE for the administration of the program. However, the Department will utilize vacancy savings in its FTE appropriation to cover additional duties related to the administration of the

program. Therefore, the Department will transfer funding consistent with 1.35 FTE into its personal services line item in FY 2011-12 and 1.40 FTE in FY 2012-13.

Operating Expenses would be \$21,104 total funds with \$10,552 General Fund in FY 2011-12 and \$11,018 total funds with \$5,509 General Fund in FY 2012-13. Operating Expenses would include the supplies, provision of computer hardware and software, office equipment of cubicle and chair, and basic telephone services that are standard items for all FTEs. However, the HCPF model also provides for statewide quarterly conference calls to reach all providers, and other operating costs which may include travel to provider sites, additional conference calls, and extra external assistance with program performance review and analysis. The Department believes that there may be additional operating costs associated with administration of the program, thus, the small amount of dollars listed as additional operating expenses.

Assistance from CDPHE would be needed by using information from the Vital Records database to obtain statistics on births as a method of tracking the effectiveness of the Prenatal Plus program under administration by HCPF. Program Managers at HCPF have determined, in consultation with CDPHE Health Statistics Section Director and staff that continued cooperation on this part of the Prenatal Plus program is in the best interests of both the clients and the state Departments. The Departments have also determined that information from the CDPHE statistical records can be provided to HCPF from CDPHE at a lower cost than was required to maintain a previously used program-specific database at CDPHE. Continuing to use data from CDHPE that has processes already in operation alleviates a need to recreate similar data elsewhere at HCPF. The CDPHE data costs would be \$6,000. This amount would be redirected from the previously used line item called Transfer to Department of Public Health and Environment for Enhanced Prenatal Care Training and Technical Assistance to a new line item in the HCPF appropriations to be called Transfer to Department of Public Health and Environment for Prenatal Plus Statistical Information.

Consequences if Not Funded:

If this request is not funded, there would be a danger that the Prenatal Plus program would have to be scaled back or the program might need to be discontinued altogether if a cost effective administration alternative could not be found. Because Prenatal Plus is a Medicaid program, it must serve all pregnant women referred to the program in order to continue to receive federal financial participation in Medicaid funding.

Calculations for Request:

Summary of Request FY 2011-12 - HCPF (After the 2% Personal Services Reduction)	Total Funds	General Fund	Federal Funds	FTE
Total Request	(\$1,557)	(\$779)	(\$778)	0.9
(1) Executive Director's Office, (B) Transfer to Other Departments, Transfer to Department of Public Health and Environment for Enhance Prenatal Care and Technical Assistance (after 2% Personal Services Reduction)	(\$119,006)	(\$58,752)	(\$60,254)	0.0
(1) Executive Director's Office, (A) General Administration, Personal Services	\$90,345	\$44,421	\$45,924	0.9
(1) Executive Director's Office, (A) General Administration, Operating Expenses	\$21,104	\$10,552	\$10,552	0.0
(1) Executive Director's Office, (B) Transfer to Other Departments, Transfer to Department of Public Health and Environment for Prenatal Plus Statistical Information (new line item)	\$6,000	\$3,000	\$3,000	0.0

Summary of Request FY 2011-12 – CDPHE Table A	Total Funds	Reappropriated Fund	FTE
Total Request	(\$110,933)	(\$110,933)	(0.9)
(1) Administration and Support; (A) Administration, Health, Life and Dental	(\$8,919)	(\$8,919)	0.0
(1) Administration and Support; (A) Administration, Short-term Disability	(\$188)	(\$188)	0.0
(1) Administration and Support; (A) Administration, S.B. 04-257 Amortization Equalization Disbursement	(\$2,908)	(\$2,908)	0.0
(1) Administration and Support; (A) Administration, S.B. 06-253 Supplemental Amortization Equalization Disbursement	(\$2,120)	(\$2,120)	0.0
(2) Center for Health and Environmental Information, (A) Health Statistics and Vital Records, Personal Services	\$2,450	\$2,450	0.0
(2) Center for Health and Environmental Information, (B) Information Technology Services, Personal Services	(\$14,607)	(\$14,607)	0.0
(9) Prevention Services Division; (A) Prevention Programs; (1) Programs and Administration, Indirect Cost Assessment	(\$1,502)	(\$1,502)	0.0
(9) Prevention Services Division, (B) Women's Health - Family Planning, Personal Services	(\$57,634)	(\$57,634)	(0.9)
(9) Prevention Services Division; (B) Women's Health - Family Planning, Purchase of Services	(\$25,505)	(\$25,505)	0.0

Impact of CDPHE PERA Adjustment and 2% Across the Board Personal Services Reduction not included in this Request, and reflected in HCPF NP-12 “CDPHE - Statewide PERA Adjustment”			
Summary of Request FY 2011-12 – CDPHE Table B (2% Personal Services Reduction and Statewide PERA Adjustment)	Total Funds	Reappropriated Funds	Row
One time Statewide PERA Adjustment related to (2) Center for Health and Environmental Information, (B) Information Technology Services, Personal Services ¹	(\$235)	(\$235)	A
One time 2% Across The Board Personal Services Reduction impact related to (2) Center for Health and Environmental Information, (B) Information Technology Services, Personal Services ²	(\$303)	(\$303)	B
Subtotal combined changes to (2) Center for Health and Environmental Information, (B) Information Technology Services, Personal Services	(\$538)	(\$538)	C (Row A+B)
One time Statewide PERA Adjustment related to (9) Prevention Services Division, (B) Women's Health - Family Planning, Personal Services ¹	(\$352)	(\$352)	D
One time 2% Across The Board Personal Services Reduction impact related to (9) Prevention Services Division, (B) Women's Health - Family Planning, Personal Services ²	(\$1,183)	(\$1,183)	E
Subtotal combined changes to (2) Center for Health and Environmental Information, (B) Information Technology Services, Personal Services	(\$1,535)	(\$1,535)	F (Row D+E)
Total combined changes due to 2% Personal Services Reduction and Statewide PERA Adjustment above	(\$2,073)	(\$2,073)	G (Row C+F)
Total CDPHE Request from Summary of Request FY 2011-12 – CDPHE Table A	(\$110,933)	(\$110,933)	H
Total including 2% Personal Services Reduction and Statewide PERA Adjustment	(\$113,006)	(\$113,006)	I (Row G+H)

1 - Statewide PERA Adjustments of (\$235) and (\$352) are included as part of HCPF NP-12 “CDPHE – Statewide PERA Adjustment”. Within that Change Request, the Department is absorbing an additional (\$57) for a total reduction of (\$644). The (\$57) is included as part of CDPHE NP-6 “Statewide PERA Adjustment”.

2 - 2% Across The Board Personal Services Reductions of (\$303) and (\$1,183) total (\$1,486). The Department is absorbing an additional (\$71) for a total reduction of (\$1,557). The (\$71) is included as part of CDPHE NP-2 “2% Personal Services Reduction”.

Summary of Net Request for Health Care Policy and Financing (HCPF) for FY 2011-12	Total Funds
Net Amount that CDPHE no longer receives (See Row H, page 8.9)	(\$110,933)
HCPF receives for Personal Services (See Table, page 8.12)	\$90,345
HCPF receives for Operating Expenses (See Table, page 8.12)	\$21,104
Combined Changes for 2% Personal Services Reduction and Statewide PERA Adjustment (See Row G, page 8.9)	(\$2,073)
Net HCPF Request (See HCPF Schedule 13 for DI-8)	(\$1,557)

Summary of Request FY 2012-13 - HCPF	Total Funds	General Fund	Federal Funds	FTE
Total Request	\$0	\$0	\$0	0.9
(1) Executive Director's Office, (B) Transfer to Other Departments, Transfer to Department of Public Health and Environment for Enhance Prenatal Care and Technical Assistance	(\$119,006)	(\$58,752)	(\$60,254)	0.0
(1) Executive Director's Office, (A) General Administration, Personal Services	\$101,988	\$50,243	\$51,745	0.9
(1) Executive Director's Office, (A) General Administration, Operating Expenses	\$11,018	\$5,509	\$5,509	0.0
(1) Executive Director's Office, (B) Transfer to Other Departments, Transfer to Department of Public Health and Environment for Prenatal Plus Statistical Information (new line item)	\$6,000	\$3,000	\$3,000	0.0

Summary of Request FY 2012-13 - CDPHE	Total Funds	Reappropriated Fund	FTE
Total Request	(\$113,006)	(\$113,006)	(0.9)
(1) Administration and Support; (A) Administration, Health, Life and Dental	(\$8,919)	(\$8,919)	0.0
(1) Administration and Support; (A) Administration, Short-term Disability	(\$188)	(\$188)	0.0
(1) Administration and Support; (A) Administration, S.B. 04-257 Amortization Equalization Disbursement	(\$2,908)	(\$2,908)	0.0
(1) Administration and Support; (A) Administration, S.B. 06-253 Supplemental Amortization Equalization Disbursement	(\$2,120)	(\$2,120)	0.0
(2) Center for Health and Environmental Information, (A) Health Statistics and Vital Records, Personal Services	\$2,450	\$2,450	0.0
(2) Center for Health and Environmental Information, (B) Information Technology Services, Personal Services	(\$15,145)	(\$15,145)	0.0
(9) Prevention Services Division; (A) Prevention Programs; (1) Programs and Administration, Indirect Cost Assessment	(\$1,502)	(\$1,502)	0.0
(9) Prevention Services Division, (B) Women's Health - Family Planning, Personal Services	(\$59,169)	(\$59,169)	(0.9)
(9) Prevention Services Division; (B) Women's Health - Family Planning, Purchase of Services	(\$25,505)	(\$25,505)	0.0

Note: The above table does not include the 2% Personal Services Reduction and the Statewide PERA Adjustment annualizations for FY 2012 -13.

FTE Requests and Other Associated Expenses for HCPF			
FTE and Operating Costs			
Fiscal Year(s) of Request		FY 11-12	FY 12-13
<i>PERSONAL SERVICES</i>	Title:	General Professional IV	
Number of PERSONS / class title		2	2
Number of months <u>working in</u> FY 10-11, & 11-12		12	12
Number months <u>paid in</u> FY 10-11, & 11-12		11	12
Calculated FTE per classification		1.24	1.40
Annual base salary		\$56,796	\$56,796
Salary		\$70,285	\$79,514
Departmental Federal Indirect Cost		\$1,502	\$1,502
Health, Life, and Dental Insurance		\$10,281	\$11,607
Short Term Disability Insurance (Salary X .00177 as HCPF Cost)		\$124	\$141
PERA	10.15%	\$7,134	\$8,071
Medicare	1.45%	\$1,019	\$1,153
Subtotal Personal Services at Division Level		\$90,345	\$101,988
<i>OPERATING EXPENSES</i>			
Supplies @ \$500/\$500 for 2 people	\$500	\$1,000	\$1,000
Computer @ \$900/\$0 for 2 people	\$900	\$1,800	\$0
Office Suite Software @ \$330/\$0 for 2 people	\$330	\$660	\$0
Office Equipment @ \$3,473/\$0 (includes cubicle and chair) for 2 people	\$3,473	\$6,946	\$0
Telephone Base @ \$450/\$450 for 2 people	\$450	\$900	\$900
Quarterly Conference Calls with 4 per each fiscal year		\$8,000	\$8,000
Other Additional Operating Expenses		\$1,798	\$1,118
Subtotal Operating Expenses		\$21,104	\$11,018
GRAND TOTAL ALL COSTS		\$111,449	\$113,006

Cash Funds Projections:

No cash funds are used in this request.

Assumptions for Calculations:

The Department of Health Care Policy and Financing assumes that:

- The federal financial participation rate is 50%. This rate is usual for most Medicaid administrative functions.
- Federal indirect costs use only federal funds with no State match. Federal indirect costs are based on previous experience of the federal indirect cost for the Prenatal Plus program administration.
- The program managers/administrators hired to fill the FTEs would be classed as General Professional IV.
- The 2% Personal Services Reduction will occur in FY 2011-12 but will not occur in FY 2012-13.
- Standard amounts would be reserved for PERA, Medicare expenses, Health, Life, and Dental Insurance, Short Term Disability Insurance, and any other additional expenses associated with the salary for the FTE.
- The Department has used the current best estimate for Health, Life, and Dental Insurance, as well as for Short Term Disability Insurance, but the Department is aware that these amounts may change slightly when Common Policies are determined by the Legislative Joint Budget Committee for FY 2011-12.
- Standard amounts, as listed on the FTE calculation spreadsheet, are used as part of the funding for the first fiscal year for ordinary operating expenses such as cubicles, furniture, computer hardware and software, and local telephone service.
- Departmental experience on statewide conference calls is based on the statewide calls related to development of the Hospital Provider Fee program at approximately \$2,000 per conference call for all listeners and multiplied by four to cover one conference call per quarter or four conference calls total during the fiscal year.

Impact on Other Government Agencies:

The Department of Public Health and Environment had previously received Reappropriated Funds from the Department of Health Care and Financing (HCPF) where the administrative funding originated in order to qualify for Medicaid federal funding as the single State agency to manage Medicaid funding. This request would transfer the

actual administration of Prenatal Plus to HCPF. However, a small amount of funding to cover CDPHE costs for providing Prenatal Plus statistical information to HCPF would still be needed by CDPHE. See also HCPF request NP-12 that corresponds to CDPHE request NP-6 for the Statewide PERA Adjustment that CDPHE has also included in their Prenatal Plus Administration Transfer request. Due to the timing of the Statewide PERA Adjustment decision, HCPF was not able to include the PERA adjustment in this request.

Summary of Changes in Funding for Department of Public Health and Environment (CDPHE) for FY 2011-12	
Changes	Reappropriated Funding
DPHE would no longer receive for administration of Prenatal Plus before 2% Reduction	(\$119,006)
DPHE would continue to receive for Prenatal Plus Statistical Information	\$6,000
2% Personal Services Reduction for FY 2011-12 for CDPHE	(\$1,557)
Transfer to HCPF for administration of Prenatal Plus from CDPHE	(\$111,449)
Net Change for DPHE	(\$113,006)

Summary of Changes in Funding for Department of Public Health and Environment (CDPHE) for FY 2012-13	
Changes	Reappropriated Funding
DPHE would no longer receive for administration of Prenatal Plus before 2% Reduction	(\$119,006)
DPHE would continue to receive for Prenatal Plus Statistical Information	\$6,000
Net Change for Transfer to HCPF for administration of Prenatal Plus from CDPHE	(\$113,006)

Cost Benefit Analysis:

Cost	Benefits
No additional funding, continue to use exactly the same amount as has been appropriated previously with adjustment for 2% Personal Services Reduction in FY 2011-12 only.	Administrative cost would remain within the appropriation funding limits.
	Relocates administration of Prenatal Plus to the State Medicaid agency because Prenatal Plus is a Medicaid only program.
	Would use cost effective communications methodologies of online instructions and conference call training sessions to provide efficient program administration.
	Allows stabilization of program for clients by making no major changes to program design, just administrative changes.

Implementation Schedule:

The FTE to manage/administer the Prenatal Plus program would be hired by July 1, 2011. Transition of the administration of the Prenatal Plus program would also begin July 1, 2011.

Statutory and Federal Authority:

25.5-5-309 (1), C.R.S. (2010) *The health care practitioner for each pregnant women who is enrolled for services pursuant to section 25.5-5-205 or who would be eligible for aid to families with dependent children pursuant to rules in effect on July 16, 1996, shall be encouraged to identify as soon as possible after such woman is determined to be pregnant whether such woman is at risk of a poor birth outcome due to substance abuse during the prenatal period and in need of special assistance in order to reduce such risk. If the health care practitioner makes such a determination regarding any pregnant woman, the health care practitioner shall be encouraged to refer such woman to any entity approved and licensed by the department of human services for the performance of a needs assessment. Any pregnant woman who is eligible for services pursuant to section 25.5-5-205 or who would be eligible for aid to families with dependent children pursuant to rules in effect on July 16, 1996, may refer herself for such a needs assessment.*

25.5-5-301 (3), C.R.S. (2010) *"Clinic services" also means preventive, therapeutic, or palliative items or services that are furnished to patients by county or regional health*

departments or local boards of health established pursuant to part 5 of article 1 of title 25, C.R.S., that are recommended for certification by the department of public health and environment as qualified to receive payments pursuant to this article and articles 4 and 6 of this title.

25-.5-5-302 (1), C.R.S. (2010) The state department shall utilize, to the extent possible and appropriate, county or regional health departments or local boards of health established pursuant to part 5 of article 1 of title 25, C.R.S., that are certified by the department of public health and environment as qualified to receive payments pursuant to this article and articles 4 and 6 of this title, and that meet the requirements and standards set forth in rules promulgated by the state board in the state department pursuant to section 25.5-4-104 to provide clinic services to patients who are children under age seven or patients who are pregnant women.

Performance Measures:

The Department has no specific performance measures related to administration of the Prenatal Plus program, but the Department believes that a well-managed and administered counseling and care coordination program for pregnant women will decrease the low birth weight rate for their infants, improve access to health care, increase better health outcomes for both the woman and the child as related to the concept of accountable care, and provide more cost effective services by achieving healthy births that will not result in serious long term health needs.