

FY 2010-11 Budget Reduction Proposal February 15, 2011 Martha Rudolph Executive Director

Short Term Innovative Health Program Grant Fund Transfer FY 2010-11

Proposal Summary:

The Short Term Innovative Health Program Grant Fund is comprised of a portion of annual Tobacco Master Settlement Funds, which are appropriated on an annual basis to several programs across the state, as outlined in statute. The Short Term Innovative Health Grant program is required to make short-term grants, of no more than one fiscal year in duration, to fund innovative health programs designed to improve the health of Coloradans.

This request seeks to transfer funds from the Short Term Innovative Health Program Grant Fund (20Q) to the General Fund, to assist with statewide budget balancing in FY 2010-11. This requested \$3,177,902 transfer is in addition to the \$1,600,000 transfer included in HB 10-1323, based on Period 6 close data (January 15, 2011), and an anticipated fund balance of \$4,777,902. This additional fund balance is available as previous transfer estimates did not account for any unexpended and unencumbered funds from FY 2009-10 from the other Tier Two programs.

	FY 2010-11
Fund balance as of Period 6 close	\$4,992,115
Less Projected Mandatory Expenditures	(\$214,213)
Equals Proposed Projected End of Year Balance	\$4,777,902
HB 10-1323 Recommended Transfer as noted in both	(\$1,600,000)
OSPB and Legislative Council's December Forecast	
Balance After Transfer	\$3,177,902
Recommended Transfer	\$3,177,902
Balance after Transfer	\$0

For FY 2010-11 the mandatory expenditures include \$90,070 to the Primary Care Office at the Department and \$221,717 for the Department of Human Services and Department of Public Safety H.B. 07-1057, Juvenile Justice Family Advocate Program. This is a total of \$311,787. As of January 31, 2011, there has been \$97,574 of the above amounts expended, leaving a balance of \$214,213.

Impact of Recommended Reduction:

There will be no impact because of this increased transfer as such funds were slated to be transferred to the General Fund based on existing statute.

Current Statutory Authority or Needed Statutory Change:

There is no statutory change needed as 24-75-1104.5 (8)(a), C.R.S. already requires any remaining balance in this cash fund to be transferred to the General Fund at the end of FY 2010-11.



Martha Rudolph Executive Director

FY 2010-11 Balancing Proposal February 15, 2011

Medical Marijuana Cash Fund Transfer FY 2010-11

Proposal Summary:

Amendment 20 authorizes the use of medical marijuana to alleviate certain debilitating medical conditions. The Medical Marijuana Program Cash Fund is used to maintain the medical marijuana registry, accept and evaluate applications for medical marijuana use and for the issuance of identification cards. This proposal revises previously requested transfers from the Medical Marijuana Program Cash Fund (Fund 14V) to the General Fund. Based on revised beginning balance, revenue projections, and expenditures into and from the fund, it is anticipated that \$7,400,000 will be available to transfer, rather than the \$9,000,000 previously requested.

Requested FY 2010-11 Transfer	Aug 23, 2010	Feb 15, 2011
Projected Opening Balance	\$5,000,690	\$9,760,838
Projected Revenues	\$13,500,000	\$9,990,000
Less Projected Mandatory Expenditures	(\$8,479,415)	(\$12,324,563)
Equals Proposed Projected End of Year Balance	\$10,021,275	\$7,426,275
Recommended Transfer	\$9,000,000	\$7,400,000
Balance After Transfer	\$1,021,275	\$26,275

Impact of Recommended Reduction:

It is anticipated that utilizing or redirecting excess fund balance from the Medical Marijuana Cash Fund to the General Fund will not have a direct effect on the Department's operations.

Assumptions:

Revenue into the fund comes from a \$90 application fee paid by patients seeking a medical marijuana identification card. Anticipated revenue for this fund is higher than the projected expenditures, based on the anticipated number of applications for FY 2010-11 reaching 111,000. Utilizing this fund balance is not anticipated to impact program operations. Estimated FY 2010-11 expenditures are as follows:

- Program costs for FY 2010-11 are \$3,971,082 which includes personal services, operating expenses and indirect cost assessment. These figures include funding authorized via the 1331 supplemental S-1 approved by the Joint Budget Committee in June 2010, and S-3, BA-2 "Medical Marijuana Computer System" that was submitted January 3, 2011.
- Figures also include an adjustment of \$4,760,148 for deferred revenue.
- Finally, figures include the impact from three special bills passed during the 2010 session that require transfers of funds to other state agencies:
 - o HB 10-1284 allows the Department of Revenue to borrow up to \$1,000,000. These funds are shown as expenditures; the repayment of the funds is included in these calculations.
 - o HB 10-1388 included a \$3,000,000 transfer to the General Fund for FY 2010-11.
 - o SB 10-109 transfers \$593,333 to the Department of Regulatory Agencies to investigate physicians.

Based on these expenditures, the program anticipates spending approximately \$12,324,563 in FY 2010-11 (including the deferred revenue adjustment). With \$9,990,000 in projected revenue along with the projected starting fund balance of \$9,760,838, the Department anticipates a fund balance of \$26,275 after the requested transfer to the General Fund.

Current Statutory Authority or Needed Statutory Change:

The Medical Marijuana Program is established in the State Constitution, Section 14 of Article XVIII. The Program is required via the constitution, and is placed at the Department of Public Health and Environment via Colorado State Statute. According to the State Constitution, section 14, Article XVIII, (i) the state health agency may determine and levy reasonable fees to pay for any direct or indirect administrative costs associated with its role in this program.

Statutory change will be needed to utilize the balance of the cash funds. According to statute, C.R.S., 25-1.5-106 (3) (a) (2010), all remaining funds not expended during the fiscal year shall remain in the fund and shall not be credited or transferred to the General Fund. Redirecting the cash fund balance from these fees would not immediately have an effect on the program.



Martha Rudolph
Executive Director

FY 2011-12 Balancing Proposal February 15, 2011

Amendment 35 Cash Fund Transfer to Health Care Policy and Financing

Proposal Summary:

This request proposes to transfer \$12,000,000 from the Amendment 35 programs at the Department of Public Health and Environment (CDPHE) to the Medical Premiums line at The Department of Health Care Policy and Financing (HCPF), to help balance the General Fund budget for FY 2011-12 only. This transfer will allow for the continued care of Colorado's citizens by funding the HCPF Medical Services Premium line. This request is in addition to the \$21,000,000 transfer that was presented in the November 1, 2010 budget request for FY 2011-12.

Summary of Proposal FY 2011-12	Total Funds	Cash Funds	Reappropriated Funds	FTE
DPHE – All Lines	(\$12,000,000)	(\$11,400,000)	(\$600,000)	(5.0)
Personal Services and Operating	(\$788,110)	(\$570,000)	(\$218,110)	(5.0)
Grant Lines	(\$11,211,890)	(\$10,830,000)	(\$381,890)	0.0

^{*} See Department's corresponding Schedule 13 for detail regarding specific line items

Summary of Proposal FY	Total Funds	Cash Funds	Reappropriated	FTE
2011-12			Funds	
HCPF – All Lines	(\$12,000,000)	(\$11,400,000)	(\$600,000)	0.0
Medical Services Premiums	(\$12,000,000)	(\$11,400,000)	(\$600,000)	0.0

^{*} See Department's corresponding Schedule 13 for detail regarding specific line items

Impact of Recommended Reduction:

The transfer will further reduce funding for health promotion and disease prevention grants; health disparities grants; and tobacco cessation and education grants at the statewide level; beyond what was submitted on November 1, 2010. However, the critical need to provide medical services (through HCPF) is an essential component of the State's budget.

This request will reduce CDPHE's personal services and operating expenses lines of each of the programs by \$788,110 and 5.0 FTE, and will reduce individual grant lines by \$11,211,890. The Department will work with advisory committees for each of the grant programs to ensure that the remaining funds are allocated to grants that will maximize the effective and efficient use of the moneys. Information regarding the individual grants and their respective purposes, along with a summary of the final requested funding for individual grant lines is shown below:

Name of	Table 1 - Purpose of Fund/Program
Fund/Program	
Prevention, Early	Money in the fund, after the required transfers for Breast and Cervical Cancer
Detection and	Screenings and Treatment, for Medicaid Disease Management and to the Office of
Treatment Fund	Health Disparities, is used to provide grants for screening and early detection of
(18N)	cancer, heart and pulmonary disease. Grants typically run in three year cycles. 16%
	of Amendment 35 tobacco tax revenues go to this fund on an annual basis.
Tobacco	This fund is used to reduce the initiation of tobacco use by children, promote
Education	cessation among all ages and reduce exposure to second hand smoke. The funds are
Program Fund	to be used for evidence based grant programs only. 16% of the annual Amendment
(18M)	35 tobacco tax revenue is currently deposited into this fund.
Breast and	The money comes from the Prevention, Early Detection and Treatment Fund. The
Cervical Cancer	funding is used to provide breast and cervical cancer screenings (i.e. mammograms,
Screening	pap smears) for eligible women. To be eligible for screenings under this program,
	women must be 40-64 years of age, at or below 250% of the Federal Poverty Level,
	uninsured or underinsured and lawfully present in the United States. 20% of the 16%
	of the annual Amendment 35 tobacco tax revenue that is deposited to the Prevention,
	Early Detection and Treatment Fund is appropriated for Breast and Cervical Cancer
	screenings and treatment. There is a limit of \$5 million per year on the appropriation.
Health Disparities	This fund is used to provide grants to local communities to improve the health status
Grant Program	of minority and ethnic populations impacted by health disparities. The funds are to
Fund (19F)	be used for evidence based grant programs only. 15% of the 16% of the annual
	Amendment 35 tobacco tax revenue that is deposited to the Prevention, Early
	Detection and Treatment Fund is deposited into this fund (2.4% of the total
	Amendment 35 revenue is deposited into the Health Disparities Grant Program
	Fund).

Summary of Proposal FY 2011-12: CDPHE Grant Line Impacts	November 1 Request	Additional Reduction	February 15 Request
		Requested	
(1) Administration and Support, (B) Special Health	\$905,305	(\$381,890)	\$523,415
Programs, Health Disparities Grants			
(9) Prevention Services Division, (A) Prevention Programs,	\$8,734,104	(\$5,956,000)	\$2,778,104
(1) Programs and Administration, Cancer, Cardiovascular			
Disease, and Pulmonary Disease Grants			
(9) Prevention Services Division, (A) Prevention Programs,	\$3,661,660	(\$1,625,000)	\$2,036,660
(3) Chronic Disease and Cancer Prevention Grants			
Program, Breast and Cervical Cancer Screening			
(9) Prevention Services Division, (A) Prevention Programs,	\$8,795,358	(\$3,249,000)	\$5,546,358
(5) Tobacco Education, Prevention, and Cessation,			
Tobacco Education, Prevention, and Cessation Grants			

Assumptions: The following charts summarize individual cash fund balances for each of the funds potentially affected by this proposal.

Cash Fund Name	FY 2009-10 Expenditures	FY 2009-10 End of Year	FY 2010-11 End of Year	FY 2011-12 End of Year	FY 2012-13 End of Year
		Cash Balance	Cash Balance Estimate*	Cash Balance Estimate	Cash Balance Estimate
Health Disparities Cash Fund (19F)	\$5,722,020	\$3,665,430	\$535,427	\$0	\$0
Tobacco Education Cash Fund (18M)	\$27,207,592	\$2,625,483	\$1,167,266	\$190,375	\$0
Prevention, Early Detection and Treatment Fund (18N)	\$44,270,759	\$4,291,879	\$1,608,205	\$299,267	\$0

^{*}FY 2010-11 End of Year Cash Balance Estimates are actual available cash balances. The Schedule 9 shows liabilities (accounts payable) as part of the cash balance. These numbers differ from the fund balance by the amount of accounts payable that each program is anticipating at the end of FY 2010-11.

Fund	FY 10-11 FY 11-12 Year End Revenue		Obligations for FY 11-12	FY 11-12 Funds Available for	Requested Transfers	FY 11-12 Estimated
	Cash Balance	Forecast*	10111111	Transfer		Fund Balance
Columns	A	В	С	D		
Calculation	= C + D - E			= A + B - C		
19F	\$535,427	\$3,576,000	\$825,076	\$3,286,351	\$3,286,351	\$0
18M	\$1,167,266	\$23,400,000	\$6,618,297	\$17,948,969	\$17,758,594	\$190,375
18N	\$1,608,205	\$23,400,000	\$12,753,883	\$12,254,322	\$11,955,055	\$299,267
Total	\$3,310,898	\$50,376,000	\$20,197,256	\$33,489,642	\$33,000,000	\$489,642

^{*}All revenue forecast assumptions are per the June 2010 Legislative Council Revenue Forecast.

- 1. Projected expenditures of \$12,753,883 from the Prevention, Early Detection and Treatment Fund (18N) include:
 - a. Transfer to HCPF for Disease Management, \$2,000,000
 - b. Transfer to the Health Disparities Fund \$3,576,000
 - c. Transfer to Health Care Policy and Financing for Breast and Cervical Cancer Treatment \$1,215,340
 - d. Breast and Cervical Cancer Screening \$2,036,660
 - e. Personal Services, Operating, and Indirect \$1,147,779
 - f. Grants to continue a baseline program and maintain community infrastructure \$2,778,104.
- 2. Projected expenditures of \$6,618,297 from the Tobacco Education Fund (18M) include:
 - a. Personal Services, Operating and Indirect \$1,071,939
 - b. Grants to continue a baseline program and maintain community infrastructure \$5,546,358. These grants include potential funding of the Quitline. Specific funding for the Quitline will be determined by the review committee and recommended to the Board of Health for approval.
- 3. Projected expenditures of \$825,076 from the Health Disparities Fund (19F) include:
 - a. Personal Services, Operating and Indirect \$301,661.
 - b. Grants to continue a baseline program and maintain community infrastructure \$523,415.

Current Statutory Authority or Needed Statutory Change:

Statutory changes to 24-22-117 will be necessary to divert the revenues from the funds in FY 2011-12. Furthermore, a fiscal emergency will need to be declared in order for the funding to be transferred.

Decision Item FY 2011-12 Amendment 35 Cash Fund Transfer to Health Care Policy and Financing Request Title:

Base Reduction Item FY 2011-12

Department: Priority Number:

Department of Public Health and Environment NP - 14

Dept. Approval by: V

Supplemental FY 2010-11

Date: 1/25/201,
Date: z/14/2011

Budget Amendment FY 2011-12

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	Fund	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 FTE GF GFE	43,959,922 34.2 222,440 0	28,800,880 39.2 175,589 0	0 0.0 0 0	28,800,880 39.2 175,589 0	53,767,977 39.2 170,446 0	(21,000,000) 0.0 0 0	32,767,977 39.2 170,446 0	(12,000,000) (5.0) 0 0	20,767,977 34.2 170,446 0	0 0.0 0 0
	CF CFE/RF FF	30,962,214 4,566,159 8,209,109	20,325,430 1,216,566 7,083,295	0 0 0	20,325,430 1,216,566 7,083,295	42,386,853 4,123,642 7,087,036	(18,313,649) (2,686,351) 0	24,073,204 1,437,291 7,087,036	(11,400,000) (600,000) 0	12,673,204 837,291 7,087,036	0 0
(1) Administration and Support, (A) Administration, Indirect Cost Assessment	Total FTE GF GFE CF CFE/RF	0.0 0 0 196,292 95,759	448,913 0.0 0 0 207,941 95,759	0 0.0 0 0 0	448,913 0.0 0 0 207,941 95,759	448,913 0.0 0 0 207,941 95,759	0 0.0 0 0	448,913 0.0 0 0 207,941 95,759	(42,716) 0.0 0 0 0 0 (42,716)	406,197 0.0 0 0 207,941 53,043	0 0.0 0 0
(1) Administration and Support, (B) Special Health Programs, Personal Services	Total FTE GF GFE CF CFE/RF	434,498 6.0 61,917 0 0 372,581	145,213 404,365 6.3 50,178 0 0 354,187	0 0.0 0 0 0 0	145,213 404,365 6.3 50,178 0 0 354,187	145,213 402,889 6.3 49,067 0 0 353,822	0 0.0 0 0 0	145,213 402,889 6.3 49,067 0 0 353,822	0 (135,219) (2.0) 0 0 0 (135,219) 0	145,213 267,670 4.3 49,067 0 0 218,603	0 0.0 0 0 0 0
(1) Administration and Support, (B) Special Health Programs, Operating Expenses	Total FTE GF GFE CF CFE/RF	0.0 6,931 0 0 21,237	6,931 0 0 28,907	0 0.0 0 0 0	35,838 0.0 6,931 0 0 28,907	65,838 0.0 6,931 0 0 58,907	0 0.0 0 0 0	65,838 0.0 6,931 0 0 58,907	0.0 0 0 0 0 (40,175)	25,663 0.0 6,931 0 0 18,732	E

Supplemental FY 2010-11

Amendment 35 Cash Fund Transfer to Health Care Policy and Financing Request Title:

Base Reduction Item FY 2011-12

Department:

Department of Public Health and Environment

Dept. Approval by:

Date:

Budget Amendment FY 2011-12

Priority Number:

Decision Item FY 2011-12

NP - 14 **OSPB Approval:** Date: 2 1 3 4 5 6 7 10 Total Decision/ Total Change Prior-Year Supplemental Revised Base Base November 1 Budget Revised from Base Actual Appropriation Request Request Request Reduction Request Amendment Request (Column 5) Fund FY 2009-10 FY 2010-11 FY 2010-11 FY 2010-11 FY 2011-12 FY 2011-12 FY 2011-12 FY 2011-12 FY 2011-12 FY 2012-13 (1) Administration and Total 4,076,396 712,713 0 712.713 3,591,656 (2,686,351) Support: (B) Special 905,305 (381,890)523,415 0 FTE 0.0 0.0 0.0 0.0 0.0 Health Programs, (1) 0.0 0.0 0.0 0.0 0.0 GF 0 0 n 0 Health Disparities 0 0 0 0 GFE 0 0 n Program, Health 0 CF 0 0 Disparities Grants CFE/RF 4,076,396 712,713 0 712,713 3,591,656 (2,686,351)905,305 (381.890)523,415 0 FF 0 0 (2) Center for Health Total 316.445 484,566 Ö 484.566 466,231 and Environmental 0 466.231 (40.000)426,231 0 FTE 0.0 0.0 0.0 0.0 0.0 Information, (A) Health 0.0 0.0 0.0 0.0 0.0 GF. 0 0 0 0 0 Statistics and Vital 0 GFE 0 0 0 Records, Operating CF 153,766 299,750 0 299,750 281,415 (40,000)0 281,415 241,415 0 Expenses CFE/RF 0 O 0 FF 162,679 184,816 0 184,816 184.816 O 184,816 184.816 0 (9) Prevention Services Division, (A) Prevention Total 1.847.227 0 1.678.324 1.678.324 1,706,818 0 1.706.818 (80.000)1,626,818 0 FTE Programs, (1) Programs 21.7 22.9 0.0 22.9 22.9 0.0 22.9 (1.5)21.4 0.0 and Administration, GF 153,592 118,480 0 118,480 114,448 0 114,448 114,448 0 GFE 0 Personal Services 0 0 CF 670,429 643,403 0 643,403 672,188 672,188 0 (80,000)592,188 0 CFE/RF 0 0 0 FF 916,441 1,023,206 0 916,441 920,182 0 920,182 920,182 0 (9) Prevention Services 1.007,239 Total 1,183,916 0 1,007,239 Division, (A) Prevention 1.067,239 0 1,067,239 (50,000)1.017,239 0 FTE 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 Programs, (1) Programs GF 0 0 0 0 and Administration, GFE 0 0 0 Operating Expenses CF 117,651 58,440 0 58,440 118,440 (50,000)0 118,440 ٥ 68,440 CFE/RF 0 FF 1,066,265 948,799 0 948,799 948.799 948,799 0 948,799 0 (9) Prevention Services 13,086,051 0 Total 6.957.799 6,957,799 12,858,159 (4,124,055)(5.956.000)8,734,104 2,778,104 0 Division, (1) Programs FTE 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 and Administration. 0.0 0.0 GF 0 0 0 0 0 0 0 0 Cancer, Cardiovascular GFE 0 0 Disease, and Pulmonary CF 13.086.051 (5,956,000) 6,957,799 0 6,957,799 12,858,159 (4,124,055)8,734,104 2,778,104 0 Disease Grants CFE/RF Ö 0 FF 0

Decision Item FY 2011-12 Base Reduction Item FY 2011-12 Supplemental FY 2010-11 Amendment 35 Cash Fund Transfer to Health Care Policy and Financing Request Title:

Department:

Department of Public Health and Environment

Dept. Approval by:

Date:

Budget Amendment FY 2011-12

Priority Number:

NP - 14

OSPB Approval:

Date:

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		Prior-Year		Supplemental	Revised	Base	Base	November 1	Budget	Total Revised	Change
		Actual	Appropriation	Request	Request	Request	Reduction	Request	Amendment	Request	from Base
	Fund	FY 2009-10	FY 2010-11	FY 2010-11	FY 2010-11	FY 2011-12	FY 2011-12	FY 2011-12	FY 2011-12	FY 2011-12	(Column 5) FY 2012-13
(9) Prevention Services									, , 2011 (2	112011-12	1 1 2012-13
Division, (A) Prevention	Total	2,980,109	2,912,251	0	2,912,251	2,910,749	o	2,910,749	/4 0A AAA)	2 720 740	,
Programs, (1) Programs	FTE	0.0	0.0	0.0	0.0	2,310,749	0.0	2,910,749	(180,000) 0,0	2,730,749	(
and Administration,	GF	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Indirect Cost recoveries	GFE	0	ů.	ا مُ	ő	, o	0	٥	0	0 6	
	CF	506,877	685,656	ا م	685,656	685,656	0 0	685,656	(180,000)	ENE 656	. (
	CFE/RF	186	25,000	اةً	25,000	23,498	٥١	23,498	(100,000)	505,656 23,498	
	FF	2,473,046	2,201,595	اة	2,201,595	2,201,595	- 0	2,201,595			
(9) Prevention Services					2,201,000	2,201,000	<u> </u>	2,201,393	<u> </u>	2,201,595	
Division, (A) Prevention	Total	7,625,109	6,348,091	ol	6.348.091	6,348,091	0	6,348,091	(1,625,000)	4,723,091	
Programs, (3) Chronic	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Disease and Cancer	GF	0	0	0	0	Ö	o	0	0.0	0.0	0.0
Prevention Grants	GFE	0	0	0	0	ol	o l	ő	o	0	
Program, Breast and	CF	4,330,933	3,661,660	. 0	3,661,660	3,661,660	· ol	3,661,660	(1,625,000)	2,036,660	}
Cervical Cancer	CFE/RF	0	0	o	0	0	ol	0	0	0.000,000	1
Campaina	FF	3,294,176	2,686,431	0	2,686,431	2,686,431	o l	2,686,431	o o	2,686,431	
(9) Prevention Services										-,000,101	`
Division, (A) Prevention	Total	503,344	702,970	0	702,970	741,442	0	741,442	(120,000)	621,442	٠ (
Programs, (5) Tobacco	FTE	6.5	10.0	0.0	10.0	10.0	0.0	10.0	(1.5)	8,5	0.0
Education, Prevention,	GF	0	0	0	. 0	0	0	0	o o	Ó	
and Cessation, Personal	GFE	0	0	0	0	0	. 0	0	0 :	0	
Services	CF	503,344	702,970	0	702,970	741,442	0	741,442	(120,000)	621,442	(
	CFE/RF	0	0	0	0	0	0	0	0	0.	(
	FF	0	0	0	0	0	0	0	0	0	Ţ
(9) Prevention Services											
Division, (A) Prevention	Total	62,509	100,000	0	100,000	175,000	0	175,000	(100,000)	75,000	(
Programs, (5) Tobacco	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Education, Prevention,	GF	0	0	0	0	0	0	0	0	0	(
and Cessation,	GFE	0	0	0	0	0	0	0	0	0	ĺ
Operating Expenses	CF	62,509	100,000	0	100,000	175,000	0	175,000	(100,000)	75,000	(
	CFE/RF	0	0	0	0	0	0	0	0	0	(
	FF	0	0	0	0	0	0	0	0	0	(
(9) Prevention Services	W- A - 3	44 204 202	7 007 6 1	_							
Division, (5) Tobacco	Total	11,334,362	7,007,811	0	7,007,811	22,984,952	(14,189,594)	8,795,358	(3,249,000)	5,546,358	(
Education, Prevention,	FTE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
and Cessation, Tobacco	GF	0	0	0	0	0	0	0	0	0	(
Education, Prevention,	GFE	0	0	0	0	0	0	0	0	0	(
and Cessation Grants	CF	11,334,362	7,007,811	0	7,007,811	22,984,952	(14,189,594)	8,795,358	(3,249,000)	5,546,358	(
	CFE/RF	0	0	0	Ō	0	0]	0	0	O.	0
	FF	0	0	0	0	0	0	0	0	0	[C

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			Cha	nge Request	for FY 2011-	12 Budget Re	equest Cycle	!			
Decision Item FY 2011-	·12	-	Base Reduction	1 Item FY 2011-	12 V	Supplement	al FY 2010-11	(mgm	Rudget Ams	endment FY 20°	11-12
Request Title:	Amendn	nent 35 Cash F	und Transfer to			cing			1	Aldinont i Lo	1 1 T da
Department:			lealth and Envir		Dept. Approv	-			Date:		
Priority Number:	NP - 14				OSPB Approv	∙al:			Date:		
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	Fund	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
Non-Line Item Request	:	None		<u> </u>				<u> </u>	<u> </u>		Ł
Letternote Revised Tex	t for FY 20	10-11:	None								
Letternote Text Reques											
(1) Administration and Su Indirect Cost Assessment		Administration,	tobacco-settlem	ent-supported pr ed to the Depart	ograms in this a	nd other departn	nents pursuant i	to Section 25-1-	bacco-settlemen 108.5 (5) C.R.S., 8 shall be from v	\$15,475 shall b	e from Medica
(2) Center for Health and Information, (A) Health St Operating Expenses			shall be from the Education Progr Treatment Fund Education Progr tobacco taxes in	Medical Marijua ams Fund create created in Secti ams Fund and the posed pursuant	ana Program Ca ed in Section 24- on 24-22-117 (2 ne Prevention, E to Section 21 o	sh Fund created -22-117 (2) (c) (l)) (d) (l), C.R.S., a arly Detection ar	in Section 25-1 i, C.R.S., \$118,4 and \$103,151 sl id Treatment Fit State Constituti	.5-106 (2), C.R.5 673 \$98,673 shall be from varidual and consist of re	Section 25-2-12' S., \$148,673 \$9: all be from the P ous sources of covenues from add as from this fund	8,673 shall be for revention, Early ash funds. The litional state ciga	om the Tobac Detection, and Tobacco arette and
Cash or Federal Fund N	lame and	COFRS Fund N						ication Programs	s Fund, Fund 18	NA.	
Reappropriated Funds				ne:	Health Dispariti	es Grant Progran	n Fund, Fund	19F, (9) Prevent	tion Services Div ties Grant Progra	ision; (A) Preve	ntion Program
Approval by OIT?	Yes:	No:	N/A: Ÿ		(1) Flogranis a	na Aunamananul	i, i ransier to th	e neam bispan	nes Grant mogn	ant rung	
Schedule 13s from Affe	cted Depa	rtments:	Health Care Pol	icy and Financin	g .						

			Chang	e Request fo	Schedule 1: or FY 2011-12 E		est Cycle				·····
Decision Item FY 2011-12			Base Reduction	ase Reduction Item FY 2011.12 Supplemental FY 2010-11					Budget Amendment FY 2011-12		
Request Title:	DPHE -	Amendment 35	Cash Fund Tra	nsfer to Health	Care Policy and	financing	2010-11	THE	Dadget Aii	iendment Ff 201	1.12
Department:		are Policy and I			Dept. Approva		John Bartholi	onnew JB	Date:	February 15, 20	2/7/1
Priority Number:	NP-BA	(DPHE NP-14)	, allering		OSPB Approvi		l Is	and the same of th		14/2011	774
		1	2	3	4	5	6	7	8	9	10
	Fund	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 FTE GF GFE CF CFE/RF	2 877.822.564 0 0 762.936.068 0 343 695 933 3 917.255 1 767 273 308	3.106.858.127 0.0 700.606.422 161.444.485 339.633.220 7.595.243 1.897.578.757	0 0.0 0 0 0	3.106.858.127 0.0 700.606.422 161.444.485 339.633.220 7.595.243	3.101.279,542 0.0 1.079.820,226 161.444 485 307.745,803 3.334 253	0 0.0 (21,000,000) 0 18,313,649 2,686,351	3.101.279.542 0.0 1,058,820.226 161.444.485 326.059.452 6.020 604	0 0 0 (12.000.000) 0 11.400 000 600,000	3,101,279 542 0.0 1,046,820,226 161,444,485 337,459,452 6 620,604	0 0.0 0 0 0
(2) Medical Services		1791 213 308	1 037.570.757	0	1.897.578 757	1.548 934,775	0	1.548,934 775	0	1.548.934 775	0
Premiu ns^a	Total FTE GF GFE CF CFE/RF	2 877 822 564 0 0 762 936 068 0 343 695.933 3 917.255 1 767 273.308	3 106.858 127 0 0 700 606.422 161.444 485 339 633.220 7 595 243 1 897 578.757	0 0 U 0 0 0 0	3 106 858.127 0 0 700.606.422 161 444.485 339 633.220 7.595 243 1.897.578 757	3,101.279.542 0 0 1.079.820,226 161.444 485 307.745,803 3.334 263 1.548 934,775	0 0 0 (21.000.000) 0 18,313,649 2.686.351	3 101.279 542 0 0 1.058,820.226 161.444.485 326,059,452 6.020.604 1.548,934,776	0 0 0 (12,000,000) 0 11,400,000 600,000	3.101,279 542 0 0 1.046 820,226 161,444,485 337,459,452 6 620 604 1,548,934,775	0 0.0 0 0
Non-Line Item Request: Letternote Revised Text:		TODACCO CAUCAU	un Casii Fund ag	ninistered by th	Cash Fund adminis e Department of Pi f Public Health and	stered by the Dep	adment of Publ	ir Heelth and En	ironmont \$17	769 604 oball be fo	om the Detection and
Cash or Federal Fund Name	and COFR	S Fund Number:			parities Cash Fund		Education Cast	h Fund (18M) Pro	evention Early	Detection and Trea	atment Fund
Reappropriated Funds Source Approval by OIT?	e, by Depa Yes:		ltem Name: N/A: ₹								
Schedule 13s from Affected			Department of Pu	iblic Health and	Environment						



Martha Rudolph
Executive Director

FY 2011-12 Balancing Proposal February 15, 2011

Medical Marijuana Cash Fund Transfer FY 2011-12

Proposal:

Amendment 20 authorizes the use of medical marijuana to alleviate certain debilitating medical conditions. The Medical Marijuana Program Cash Fund is used to maintain the medical marijuana registry, accept and evaluate applications for medical marijuana use and for the issuance of identification cards. This proposal revises previously requested transfers from the Medical Marijuana Program Cash Fund (Fund 14V) to the General Fund. Based on revised beginning balance, revenue projections, and expenditures into and from the fund, it is anticipated that \$8,060,000 will be available to transfer, rather than the \$10,000,000 previously requested.

Requested FY 2011-12 Transfer	Nov 1, 2010	Feb 15, 2011
Projected Opening Balance	\$1,021,275	\$26,275
Projected Revenues	\$13,500,000	\$9,990,000
Less Projected Mandatory Expenditures	(\$2,243,957)	(\$1,946,929)
Equals Proposed Projected End of Year Balance	\$12,277,318	\$8,069,346
Recommended Transfer	\$10,000,000	\$8,060,000
Balance After Transfer	\$2,277,318	\$9,346

Impact of Recommended Reduction:

There is sufficient revenue to cover the cost of operating the program. Utilizing or redirecting the fund balance will not have a direct effect on the medical marijuana program.

Assumptions:

Revenue into the fund comes from a \$90 application fee paid by patients seeking a medical marijuana identification card. Anticipated revenue for this fund is higher than projected expenditures, based on the current rate of applications. Utilizing this fund balance is not anticipated to impact program operations. Estimated FY 2011-12 expenditures are as follows:

- Program costs for FY 2011-12 are estimated at \$1,825,163 which includes personal services, operating expenses and indirect cost assessment. The figures for FY 2011-12 include funding requested in:
 - o DI-1: Medical Marijuana for November 1, 2010;
 - o BA-1a: Medical Marijuana requested on January 3, 2011; and
 - o S-3, BA-2: Medical Marijuana Computer System requested on January 3, 2011.
- The Legislature also passed a special bill during the 2010 session that requires transfers of funds to other state agencies:
 - o SB 10-109 transfers \$121,766 to Department of Regulatory Agencies to investigate physicians for FY 2011-12.

Based on these expenditures, the program anticipates spending approximately \$1,946,929 in for FY 2011-12; significantly less than the anticipated \$9,990,000 in revenue that will be generated.

Current Statutory Authority or Needed Statutory Change:

The Medical Marijuana Program is established in the State Constitution, Section 14 of Article XVIII. The Program is required via the constitution, and is placed at the Department of Public Health and Environment via Colorado State Statute. According to the State Constitution, section 14, Article XVIII, (i) the state health agency may determine and levy reasonable fees to pay for any direct or indirect administrative costs associated with its role in this program.

Statutory change will be needed to utilize the balance of the cash funds. According to statute, C.R.S., 25-1.5-106 (3) (a) (2010), all remaining funds not expended during the fiscal year shall remain in the fund and shall not be credited or transferred to the General Fund. Redirecting the cash fund balance from these fees would not immediately have an effect on the program.



Martha Rudolph Executive Director

FY 2011-12 Balancing Proposal February 15, 2011

Reduction to Tony Grampsas Youth Services, Master Settlement Funding

Proposal Summary:

The TGYS Program was created by the Legislature in 1994 in response to the "summer of violence" in order to provide State support for local programs to reduce youth crime, violence, child abuse, and other high-risk behaviors. At its peak, the TGYS Program spent \$9.2 million and served 85,000 individuals.

Results from the past five years have shown that Tony Grampsas programs are achieving statistically significant results for the majority of outcomes defined by the program. Highlights from the last two years include: increased school performance, increased life skills, decreased bullying, decreased alcohol/tobacco/marijuana use, improved progress towards achieving developmental milestones, increased positive parenting skills/practices, and increased self-esteem/self-efficacy.

The Department's November 1, 2010 FY 2011-12 Budget Request included \$3,841,617 for Tony Grampsas Youth Services (TGYS) to serve roughly 27,000 individuals in that fiscal year. This proposal seeks to reduce previously requested funding by \$1,887,747, from Tobacco Master Settlement Agreement funding, and requests this amount to be transferred to the General Fund for FY 2011-12 and ongoing.

Summary of Proposal FY 2011-12	Total Funds	Cash Fund	
Department Total	(\$1,887,747)	(\$1,887,747)	
(9) Prevention Services Division, (D) Prevention Partnerships, (2) Tony	(¢1 007 7 <i>1</i> 7)	(\$1,887,747)	
Grampsas Youth Services Program, Prevention Services Programs	(\$1,887,747)	(\$1,007,747)	

Impact of Recommended Reduction:

Decreased funding for the TGYS Program would decrease both the number of agencies providing services and the number of individuals who can access services through existing agencies. Assuming an average cost of \$142.28 per participant (\$3,841,617 / 27,000 participants = \$142.28). Reducing the grant program by \$1,887,747, equates to a reduction of 13,268 participants (\$1,887,747 / \$142.28 = 13,268).

While demand for TGYS dollars in local communities continually outpaces available funding, the Department recommends this request in order to balance the State's General Fund budget.

Assumptions:

Considering the Department's initial FY 2011-12 Budget Request of \$3,841,617 for this program, the proposed reduction of \$1,887,747 will result in a reduced allocation to Tony Grampsas Youth Services Programs of \$1,953,870. Assuming \$142.28 per participant, requested funding would be able to serve 13,733 participants.

Current Statutory Authority or Needed Statutory Change:

Statutory changes to 24-75-1104.5, C.R.S. and 25-20.5-201, C.R.S. will be needed to allow for an ongoing transfer from this cash fund to the General Fund.

Supplemental FY 2010-11

Reduction to Tony Grampsas Youth Services, Master Settlement Funding Request Title:

Base Reduction Item FY 2011-12

Department: Department of Public Health and Environment

NP - 15

Dept. Approval by OSPB Approval:

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Budget Amendment FY 2011-12

	Fund	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	3,986,075	3,841,275	0	3,841,275	3,841,617	o	3,841,617	(1,887,747)	1,953,870	(1,887,747	
	FTE	3.0	3.0	. 0.0	3.0	3.0	0.0	3.0	0.0	3.0	0.0	
	GF	0	0	0	0	0	0	0	0	0	(
	GFE	0	0	0	0	0	0	0	0	0	ε	
	CF	3,986,075	3,841,275	0	3,841,275	3,841,617	0	3,841,617	(1,887,747)	1,953,870	(1,887,747	
	CFE/RF	0	0	0	0	0	0	0	0	a	(
	FF	0	0	0	0	0	0	. 0	. 0	0		
(9) Prevention Services in Division, (D) Prevention	Total	3,986,075	3,841,275	o	3,841,275	3,841,617	. 0	3,841,617	(1,887,747)	1,953,870	(1,887,747	
Partnerships, (2) Tony	FTE	3.0	3.0	0.0	3.0	3.0	. 0.0	3.0	0.0	3.0	0.0	
Grampsas Youth	GF	0	0	0	. 0	0	0	0	0	0	(
Services Program,	GFE	0	0	0	. 0	0	0	O	0	0	(
Prevention Services	CF	3,986,075	3,841,275	0	3,841,275	3,841,617	0	3,841,617	(1,887,747)	1,953,870	(1,887,747	
Programs	CFE/RF	0	0	0	ō	0	0	0	0	0	(
	FF	0	0	[0	0	. 0	0 1	0	0	0	(

Non-Line Item Request:

Decision Item FY 2011-12

Priority Number:

None

Letternote Revised Text for FY 2010-11:

None None

Letternote Text Requested for FY 2011-12: Cash or Federal Fund Name and COFRS Fund Number:

Fund 100, Tobacco Master Settlement NA

Reappropriated Funds Source, by Department and Line Item Name:

Approval by OIT?

Yes: No:

N/A: 📝

Yes:

Schedule 13s from Affected Departments:

None