HUMAN SERVICES

The Human Services function consists of the Department of Health and Human Services (DHHS), which includes the divisions of Health Care Financing and Policy, Aging and Disability Services, Health, Welfare and Supportive Services, Mental Health and Developmental Services, and Child and Family Services. This function also includes the Department of Employment, Training and Rehabilitation. For the 2013-15 biennium, The Executive Budget recommends the elimination of the Division of Mental Health and Developmental Services and the transfer of developmental services programs to the Aging and Disability Services Division, and the transfer of mental health programs to the Health Division, which is subsequently renamed the Division of Public and Behavioral Health.

The Executive Budget recommends General Fund support for the Human Services functional area totaling \$1.004 billion in FY 2014, which is an increase of 4.73 percent compared to FY 2013, and \$1.070 billion in FY 2015, which represents an additional increase of 6.62 percent from amounts recommended for FY 2014. The Governor recommends \$3.344 billion in FY 2014 from all funding sources, which is an increase of 11.87 percent over FY 2013 and \$3.771 billion in FY 2015, which represents an additional increase of 12.76 percent.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIRECTOR'S OFFICE

The Director's Office is responsible for coordinating all departmental programs, overseeing the department's budgets and providing technical assistance to the various divisions within the department. The following accounts are directly administered by the Director's Office: Administration; the Grants Management Unit; the Revolving Account for the Prevention and Treatment of Problem Gambling; the Fund for a Healthy Nevada; the Children's Trust account; the Indigent Supplemental account; Developmental Disabilities, and Consumer Health Assistance. The Director's Office also provides administrative assistance to the Office of the State Public Defender.

<u>ADMINISTRATION</u>

Due to the expiration of the federal Suicide Prevention grant in FY 2013, The Executive Budget recommends the Office of Suicide Prevention be supported by \$1 million in tobacco settlement funds and \$371,439 in General Funds over the 2013-15 biennium. The Governor also recommends the addition of two new positions, whose duties are performed by contract staff, and transferring the Office of Suicide Prevention from the Director's Office to the Division of Public and Behavioral Health.

The Governor recommends the elimination of \$241,970 in federal Health Information Technology (HIT) grant funds in FY 2015 due to the expiration of the grant. The HIT grant was awarded in February 2010, in accordance with the federal Health Information Technology for Economic and Clinical Health (HITECH) Act of 2009 to assist the state in developing the infrastructure and capacity for a statewide Health Information Exchange (HIE). When complete, the HIE will provide for the exchange of health-related information between patients and healthcare professionals electronically. The 2011 Legislature addressed the HITECH Act through the passage of Senate Bill 43. The expiration of federal HIT grant funds includes the elimination of four filled positions approved to support grant activities.

<u>The Executive Budget</u> recommends the transfer of a Health Program Specialist position from the Health Division's Community Health Services account to the Administration account since the position serves as a tribal liaison for the entire department.

GRANTS MANAGEMENT UNIT

The Grants Management Unit (GMU) was approved by the 2003 Legislature to consolidate grant programs into one account. The grant programs include: Family Resource Centers; Differential Response; Title XX Purchase of Social Services; Community Services Block Grant; Children's Trust Account; and Healthy Nevada Fund grants. In addition to these programs, the 2005 Legislature approved the Program for the Prevention and Treatment of Problem Gambling, which is administered by the GMU.

<u>Differential Response and Family Resource Centers</u>

Family Resource Centers (FRC) consist of neighborhood centers that provide a wide array of services and referrals to services for at-risk families to promote individual and family well-being. The 2007 Legislature approved funding to allow the FRC to assist with child welfare cases that do not warrant investigative action by child protective services agencies to enable those agencies to respond to more severe cases. These assessment services are referred to as the Differential Response (DR) program. Beginning in FY 2013, the 2011 Legislature approved the redirection of \$2.6 million in tobacco settlement funds to support the FRC and the DR program, which had previously been supported by a General Fund appropriation. The Executive Budget recommends \$2.7 million in tobacco settlement funds in each fiscal year of the 2013-15 biennium to continue support for the FRC and the DR program.

Healthy Nevada Funds

Revenue for the Fund for a Healthy Nevada is provided through a transfer from the Treasurer's Office of tobacco settlement funds received by the state pursuant to the Tobacco Master Settlement Agreement of 1998. The Governor recommends transfer funds of approximately \$20 million over the 2013-15 biennium from the Healthy Nevada Fund to the GMU to administer the funds and award grants, a 54.3 percent increase from the \$13 million approved for the 2011-13 biennium.

The 2013-15 biennium increase is primarily due to the redirection of tobacco funds during Fiscal Years 2009, 2010, and 2011, which reduced the funds available in FY 2012. Additionally, Senate Bill 421 approved by the 2011 Legislature, eliminated the Trust Fund for Public Health, which increased the total percentage of tobacco funds distributed to the Fund for a Healthy Nevada from 50 to 60 percent. The legislation (NRS 439.630) requires the DHHS Director to develop a spending plan for the allocation of tobacco settlement funds. The spending plan must consider the recommendations of the Grants Management Advisory Committee, the Nevada Commission on Aging, and the Nevada Commission on Services for Persons with Disabilities after conducting a statewide needs assessment.

<u>The Executive Budget</u> recommends the following Healthy Nevada Fund allocations from the GMU pursuant to the spending plan developed by the DHHS Director:

| Healthy Nevada Fund - Grants Management Unit | | | | | | | | | |
|--|---------|------------|------------|------------|----------|------------|--|--|--|
| Use Category | FY 2014 | | FY 2015 | | Biennium | | | | |
| | | Allocation | Allocation | | Total | | | | |
| Tobacco Cessation | \$ | 1,000,000 | \$ | 1,000,000 | \$ | 2,000,000 | | | |
| Wellness Grants | \$ | 4,600,000 | \$ | 4,600,000 | \$ | 9,200,000 | | | |
| Disability Grants | \$ | 1,300,000 | \$ | 1,300,000 | \$ | 2,600,000 | | | |
| Family Resource Centers | \$ | 1,300,000 | \$ | 1,300,000 | \$ | 2,600,000 | | | |
| Differential Response | \$ | 1,420,000 | \$ | 1,420,000 | \$ | 2,840,000 | | | |
| Administration | \$ | 381,042 | \$ | 395,734 | \$ | 776,776 | | | |
| Total HNF Allocations | \$ | 10,001,042 | \$ | 10,015,734 | \$ | 20,016,776 | | | |

Wellness grants of \$9.2 million over the 2013-15 biennium reflect the Governor's recommendation to continue Hunger, Immunization and Health Access grants at increased levels from FY 2013 grant awards, utilize tobacco funds to support the Office of Suicide Prevention and the Nevada 2-1-1 program, and establish new children's mental health programs. Disability grants are retained at current funding levels, and \$2 million is restored for tobacco cessation grants over the 2013-15 biennium.

Title XX Purchase of Social Services

This program was established in 1974 under Title XX of the federal Social Security Act to provide states with funds for a wide variety of social service programs. The funds support subgrants to state and non-state agencies. The Executive Budget recommends total expenditure authority of \$28.6 million over the 2013-15 biennium, which continues the level of authority approved for the 2011-13 biennium. The Governor recommends maintaining the Title XX grants to non-state agencies at \$1.1 million for each fiscal year of the 2013-15 biennium, which retains the same level of funding authorized for the 2011-13 biennium.

REVOLVING ACCOUNT FOR THE PREVENTION AND TREATMENT OF PROBLEM GAMBLING

The Program for the Prevention and Treatment of Problem Gambling was created by the 2005 Legislature to support the prevention and treatment of problem gambling. The program is funded through a transfer of an amount equal to \$2 for each slot machine subject to the quarterly slot license fee imposed by NRS 463.373. Since FY 2011, the Legislature has approved the redirection of \$1 of the \$2 fee to increase unrestricted General Funds.

<u>The Executive Budget</u> restores the use of revenue in this account, projected at approximately \$1.5 million in each fiscal year of the 2013-15 biennium, be used to support programs for the prevention and treatment of problem gambling.

CONSUMER HEALTH ASSISTANCE

The Office of Consumer Health Assistance was established by the 1999 Legislature within the Governor's Office. With the approval of Assembly Bill 519 by the 2011 Legislature, the Office of Consumer Health Assistance was transferred from the Governor's Office to the Department of Health and Human Services Director's Office and merged with the Office of Minority Health. The Office of Consumer Health Assistance is administered by the Consumer Health Advocate appointed by the Governor. The Office of Minority Health is managed by a Health Resource Analyst.

The Office of Consumer Health Assistance assists Nevada consumers in navigating the health care system to understand patient rights and responsibilities under various healthcare plans, including industrial insurance and Medicaid, and prescription drug programs. The office responds to and investigates complaints regarding healthcare plans and policies, resolves disputes between patients and hospitals, conducts and coordinates statewide educational outreach to increase awareness of and access to health care services. The mission of the Nevada Office of Minority Health is to improve the quality of health care services for members of minority groups.

The office has locations in Las Vegas and Elko, and is supported by a General Fund appropriation, Medicaid funding, hospital assessments, federal funds, and a transfer from the Workers' Compensation and Safety Fund. Federal funds awarded to the office during the current biennium has allowed the Office of Consumer Health Assistance to increase its assistance to Nevada consumers regarding the implementation of the Affordable Care Act (ACA) and the Silver State Health Insurance Exchange (SSHIX).

The Executive Budget recommends the elimination of federal funds transferred from the SSHIX totaling \$244,233 in FY 2015 and three positions and operating expenditures supporting SSHIX activities due the expiration of those funds. The Governor also recommends the elimination of UnitedHealth Settlement funds totaling \$99,148 in FY 2015 and the one position supporting those activities due to the expiration of the settlement funds.

INDIGENT SUPPLEMENTAL ACCOUNT

The Indigent Supplemental account provides reimbursement to Nevada counties for unpaid hospital charges for the medical treatment of indigent persons and reimbursement to hospitals for care provided to indigent persons who have been injured in motor vehicle accidents in Nevada. The Nevada Association of Counties administers the payment of claims from counties and hospitals with accounting assistance from the Director's Office. Claims are funded through property tax revenues equivalent to one-cent per \$100 of assessed value for reimbursement to counties indigent supplemental medical claims and a property tax levy of 1.5 cents on each \$100 of assessed valuation for reimbursement to hospitals for indigent accident medical claims. Since FY 2009, the Legislature has approved the redirection of tax proceeds in this account to increase unrestricted General Funds. The Executive Budget restores the use of tax proceeds in this account, projected at \$21 million in each fiscal year of the 2013-15 biennium, to reimburse indigent hospital care.

AGING AND DISABILITY SERVICES DIVISION

The Aging and Disability Services Division (ADSD) develops, coordinates and delivers a comprehensive support system of services, which allow Nevada's residents aged 60 and over and persons with disabilities to lead independent, meaningful and dignified lives. The Executive Budget recommends General Funds, prior to any funding changes due to reorganization efforts, of \$31.3 million in the 2013-15 biennium, an increase of \$1.5 million, or 4.9 percent, when compared to 2011-13 biennial appropriations of \$29.9 million. Currently, the division administers five budget accounts: Federal Programs and Administration; Community Based Services; IDEA Part C Compliance; Senior Rx and Disability Rx; and the Tobacco Settlement Program. Federal funding sources, such as Medicaid reimbursements and Administration for Community Living, are the largest funding sources for the division, but the division is also supported by General Funds and tobacco settlement funds.

CONSOLIDATION OF STATEWIDE DISABILITY SERVICES

The Governor recommends consolidating department-wide disability services within ADSD. To accomplish this, Developmental Services would transfer from the Division of Mental Health and Developmental Services (MHDS) and Early Intervention Services would transfer from the Health Division to ADSD. The ADSD currently administers a number of programs, which provide assistance to Nevadans with disabilities. The Executive Budget indicates that consolidating statewide disability services would create a continuum of disability services to serve persons at all stages of life within one state agency, creating operational and service delivery efficiencies.

Five budget accounts containing the service delivery components of disability service programs would be transferred to ADSD in their entirety as part of the consolidation.

The chart below shows the budgets, which would be transferred, along with the Governor's recommended total funding and staffing levels in the 2013-15 biennium.

| | FY 2014 | FY 2015 | FTE |
|---|-------------------|-------------------|--------|
| Budget Transferred from the Health Division | | | |
| Early Intervention Services | \$ 31,933,990 | \$ 35,691,398 | 170.62 |
| Budgets Transferred from MHDS | | | |
| Family Preservation Program | \$ 2,757,876 | \$ 2,859,604 | - |
| Rural Regional Center | \$ 15,588,888 | \$ 15,851,299 | 36.28 |
| Desert Regional Center | \$ 95,554,055 | \$ 103,164,090 | 303.11 |
| Sierra Regional Center | \$ 34,666,020 | \$ 36,186,058 | 67.04 |
| Totals | \$ 180,500,829 | \$ 193,752,449 | 577.05 |

SENIOR RX AND DISABILITY RX PROGRAMS

The Senior Rx and Disability Rx programs assist eligible low-income seniors and the disabled to obtain essential prescription medications. The program helps pay for Medicare Part D premiums, pays Medicare Part D gap (i.e., the "doughnut hole") costs and provides assistance for enrollees not eligible for Medicare. The Governor recommends total funding of \$10.2 million in the 2013-15 biennium, a 15.5 percent decrease from the 2011-13 biennium amount of \$12 million. The budget is recommending to be supported by tobacco settlement funding.

The Governor recommends additional Healthy Nevada Funds totaling \$2.5 million over the upcoming biennium to fund dental benefits for a subset of Senior Rx and Disability Rx program members. The Executive Budget indicates the costs of providing prescription drug benefits have decreased as a result of the Affordable Care Act, allowing funding to be redirected to support additional benefits for seniors and those with disabilities.

TOBACCO SETTLEMENT PROGRAM

The Tobacco Settlement Program budget is funded by tobacco settlement funding transferred from the Trust Fund for a Healthy Nevada. Funding is used to support Independent Living Grants, which enhance the lives of older Nevadans by promoting services that enable seniors to remain at home and avoid institutional placement. The Executive Budget recommends \$10.85 million in funding over the 2013-15 biennium, a \$1.04 million or 10.5 percent increase from the \$9.82 million approved by the 2011 Legislature.

FEDERAL PROGRAMS AND ADMINISTRATION

The Federal Programs and Administration budget is the primary administrative account for the division and provides funding for grants and resource development, maintains the Elder Rights program, and provides centralized fiscal services for the division. The Federal Programs and Administration account is primarily funded with federal funds.

The Governor recommends transferring funding totaling \$4.7 million and 30.51 administrative, fiscal and information technology positions into the Federal Programs and Administration account from various other MHDS and Health Division accounts as part of the statewide consolidation of disability services. In addition, The Executive Budget recommends \$427,082 in the 2013-15 biennium to support additional costs associated with the consolidation, including reclassifying a position, increasing the salaries of three unclassified positions and additional equipment, operating and relocation costs.

The Governor recommends additional General Funds of \$489,877 over the 2013-15 biennium to replace Civil Monetary Penalty funding to support the state Long-Term Care Ombudsman Program (LTCOP), which provides information and advocacy services to seniors in long-term care facilities. The Executive Budget indicates that the Centers for Medicare and Medicaid Services directed that Civil Monetary Penalty funding could no longer be used to support LTCOP program activities due to provisions included in the Affordable Care Act.

Over the 2013-15 biennium, the Governor recommends additional General Funds of \$33,968 to add a new Program Officer position for statewide coordination of the 150 volunteers who provide services for ADSD programs, including the State Health Insurance Assistance Program, Senior Medicare Patrol, Medicare Improvements for Patients and Providers Act and the Volunteer Long-Term Care Ombudsman Program. Additionally, \$87,902 in federal grant funding would be redirected from program activities to support the position.

COMMUNITY BASED SERVICES

Community Based Services provides community-based resources for seniors and people with disabilities who are ineligible for services through public entitlement programs, or for whom services do not otherwise exist. The Autism Treatment Assistance Program, Elder Protective Services, Homemaker, Communications Access, Independent Living, Personal Assistance Services and Traumatic Brain Injury program comprise Community Based Services. The Community Based Services budget account is funded with General Funds, tobacco settlement funds, federal funds and telephone surcharge funding received from the Public Utilities Commission.

The Governor recommends additional funding totaling \$3.6 million over the 2013-15 biennium, including \$2 million in General Funds and \$1.6 million in Healthy Nevada Funds, to increase the Autism Treatment Assistance Program caseload from 137 children to 341 children per month by the end of FY 2015.

The Executive Budget recommends additional General Funds of \$1.2 million over the 2013-15 biennium to increase caseload for the Independent Living Program from the FY 2013 legislatively approved 216 cases per year to 360 by the end of FY 2015 in order to comply with the federal Supreme Court Olmstead decision, which mandates reasonable wait times for disability services.

Community Based Services provides services to seniors at risk of institutionalization through two federally-funded Medicaid waivers: the Home and Community Based Waiver (HCBW), and the Assisted Living (AL) waiver. In addition, there is a state-funded equivalent to the HCBW, the Community Options for the Elderly (COPE) program. Each of these programs provides alternatives to nursing home placement. The scope of services also includes training for caregivers to support and enhance the skills of family and professional care providers for frail elders. The Governor recommends increased General Funds totaling \$493,486 over the 2013-15 biennium to add 117 waiver slots for the HCBW program. Seven Social Worker positions would be added to support the increase. The COPE caseload is recommended to decrease from the 96 waiver slots approved by the 2011 Legislature to 59 in FY 2014 and 61 in FY 2015. The chart below depicts the Governor's recommended caseload levels for the federally-funded HCBW and AL waiver programs and the state-funded COPE program.

| Per Month Caseload - Waiver Programs | | | | | | | | |
|--|-------------------------|---------------------|-----------------------|------|--|--|--|--|
| | FY 2013 | | | | | | | |
| | Legislature Approved | Governor Re Case | Change in Caseload | | | | | |
| Federally-Funded Waiver Programs | | FY 14 | FY 15 | | | | | |
| Home and Community Based Waiver ¹ | 1,713 | 1,771 | 1,830 | 117 | | | | |
| Assisted Living | 54 | 54 | 54 | 0 | | | | |
| Total | 1,767 | 1,825 | 1,884 | 117 | | | | |
| State-Funded Waiver Program | | | | | | | | |
| Community Options for the Elderly | 96 | 59 | 61 | (35) | | | | |

¹ The Waiver for Elderly in Adult Residential Care (WEARC) and the Community Home-Based Initiatives Program (CHIP) were combined to form the Home and Community Based Waiver (HCBW) program during the 2011-13 biennium.

IDEA PART C COMPLIANCE

The Individuals with Disabilities Education Act (IDEA) Part C Compliance Office serves as the lead state agency to ensure there is a statewide, comprehensive, coordinated, multidisciplinary, interagency system of early intervention services for infants and toddlers (ages 0-3) with developmental delays. The budget is supported with federal funds from the federal Department of Education (Part C of IDEA). Total funding recommended for the 2013-15 biennium is \$7.9 million, the same amount approved by the 2011 Legislature for the 2011-13 biennium.

DIVISION OF HEALTH CARE FINANCING AND POLICY

The mission of the Division of Health Care Financing and Policy (DHCFP) is to purchase and provide quality health care services to low-income Nevadans through the Medicaid and Nevada Check Up programs in the most efficient manner; to promote equal access to health care at an affordable cost; to restrain the growth of health care costs; and to maximize the receipt of federal revenue for the provision of health care programs.

The Executive Budget recommends total funding to support the division's programs in the amount of \$5.08 billion for the 2013-15 biennium, which is an increase of approximately \$1.11 billion when compared to the total amount of funding legislatively approved for the 2011-13 biennium. General Fund support is recommended to increase by \$105.5 million (10 percent) to \$1.16 billion over the 2013-15 biennium, compared to \$1.05 billion for the 2011-13 biennium.

The increase in General Fund support provides for projected caseload increases in the Medicaid budget totaling \$193.8 million over the 2013-15 biennium. The Medicaid caseload growth is attributed to annual caseload growth, implementation of the Affordable Care Act (ACA) and Medicaid expansion. The federal Patient Protection and Affordable Care Act commonly referred to as the Affordable Care Act or health care reform expands access to health insurance coverage to uninsured Americans by expanding both public and private insurance. The expansion is achieved primarily through mandating health insurance coverage; expanding Medicaid to cover adults with incomes at or below 138 percent of the Federal Poverty Level (FPL); and creating state-based exchanges to help individuals and small businesses purchase insurance.

INTERGOVERNMENTAL TRANSFER PROGRAM

The Intergovernmental Transfer (IGT) budget collects funds from other governmental entities to support three programs: Disproportionate Share Hospitals (DSH), Upper Payment Limit (UPL), and University of Nevada School of Medicine (UNSOM) Supplemental Payments. Funds are collected in the IGT budget and then transferred to Medicaid for use as state matching funds for these programs.

• <u>Disproportionate Share Hospital Program</u> – The DSH program provides payments to hospitals that have a disproportionate share of uncompensated costs due to services provided to indigents and the uninsured in comparison to other hospitals. The federal government provides a specific annual allotment of federal funds for each state; however, in order to receive these funds, states must provide matching funds. The IGT revenue in excess of the DSH match requirements is used to offset General Funds for other Medicaid expenditures.

The Governor's recommended budget continues the DSH program for the 2013-15 biennium as designed and approved by the 2003 Legislature through the enactment of Assembly Bill 482, which included provisions to establish a long-term methodology for distributing disproportionate share funding to qualifying hospitals. The 2009 Legislature, through the enactment of Senate Bill 382, eliminated the specific amounts of the intergovernmental transfers that must be paid by counties to the division to fund the non-federal share of the program beginning in 2011. The bill also eliminated the specific amounts that must be paid by the division to hospitals that serve a disproportionate number of low-income patients for their uncompensated costs associated with providing services to those patients.

<u>The Executive Budget</u> proposes participating hospitals will receive payments of approximately \$75.2 million for FY 2014 and \$72.6 for FY 2015. The counties benefit indirectly from these payments by approximately \$22.2 million for FY 2014 and \$21.4 million for FY 2015 when comparing the hospital DSH payments to the amount of the IGT payments. For the 2013-15 biennium, <u>The Executive Budget</u> estimates the IGT program will generate a benefit to the state of approximately \$24.6 million for FY 2014 and \$24.7 million for FY 2015. Federal DSH allotments are projected to decrease under the ACA, as the number of uninsured is expected to decrease.

Upper Payment Limit Program – The UPL program provides payments to county-owned hospitals. Federal Medicaid law allows states the option of making supplemental payments to qualifying hospitals (county or municipal hospitals) up to the Medicare upper payment limit. The intent is to preserve access to inpatient and outpatient hospital services for needy individuals by reimbursing hospitals that qualify for uncompensated or under-compensated care. Pursuant to interlocal agreements, counties make IGT payments to this budget to be used as state matching funds for the UPL program. Excess IGT revenue is used to offset General Funds for other Medicaid expenditures.

The Executive Budget recommends continuing the UPL program for the 2013-15 biennium. Participating hospitals will receive payments of approximately \$84.2 million in FY 2014 and \$98.7 million in FY 2015. The net benefit to counties (hospital payments less IGT payments) is approximately \$38 million for FY 2014 and \$44.6 million for FY 2015. The estimated net benefit for the state is approximately \$14.4 million for FY 2014 and \$19.8 million for FY 2015.

University of Nevada School of Medicine Program – During FY 2007, the division and the UNSOM entered into an agreement that provides supplemental payments to the UNSOM in recognition of the gap between Medicaid reimbursement and the average private insurance reimbursement for the same services (primarily outpatient services). The agreement is designed to recognize the higher cost of providing medical services in a teaching environment. The UNSOM provides the IGT revenue to be used as the state's match to receive federal Title XIX funds, which will be used (in combination) to make the supplemental payments. The 2011 Legislature approved the Governor's recommendation to restore the Graduate Medical Education (GME) program at the University Medical Center. The Executive Budget provides the necessary budget authority to pay the supplemental payments to UNSOM, approximately \$4.7 million in each year of the 2013-15 biennium and to continue the GME payments of approximately \$13.2 million in FY 2014 and \$14.5 million in FY 2015.

The budget, as recommended, expends all funding available for the 2013-15 biennium, and no unobligated reserve will remain for cash-flow purposes or unforeseen expenditure needs in the Medicaid or Nevada Check Up budgets.

HEALTH CARE FINANCING AND POLICY ADMINISTRATION

The Administration budget provides for the administrative staff and support services for the DHCFP, which includes administration, accounting, budgeting, personnel, rates, compliance, surveillance, utilization review, provider enrollment and information technology.

Implementation of the Affordable Care Act (ACA)

The Executive Budget recommends \$1.90 million (\$301,638 General Funds) in FY 2014 and \$1.43 million (\$168,029 General Funds) in FY 2015 to implement the Transformed Medicaid Statistical Information System (T-MSIS), used by the Centers for Medicare and Medicaid Services (CMS) to gather eligibility, enrollment, utilization, and expenditure data for the Medicaid and Check Up programs. The Executive Budget indicates that CMS requires this system be operational no later than January 2014.

The Executive Budget recommends \$10.03 million (\$2.09 million General Funds) in FY 2014 and \$2.60 million (\$650,373 General Funds) in FY 2015 for revisions to the Medicaid Management Information System (MMIS) to become compliant with ACA mandates, establish connectivity with the Health Information Exchange, and implement the Governor's cost sharing proposal for certain Medicaid participants.

The Executive Budget recommends \$425,129 (\$212,564 General Funds) in each year of the 2013-15 biennium for a contractor to perform federally required screening of new and existing Medicaid providers. State Medicaid agencies are required to check specific databases to verify the identification and eligibility of every associated officer, owner, and managing employee for every provider applicant, fiscal agent, and managed care entity prior to enrollment, as well as all ordering or referring physicians.

According to <u>The Executive Budget</u>, the ACA has prompted changes to the manner in which pharmaceutical reimbursement prices are established, which has resulted in the need for state or national surveys of retail pharmacy providers or other reliable data that reflects the actual or average acquisition cost as the basis for proposed reimbursement changes. <u>The Executive Budget</u> recommends \$100,000 (\$50,000 General Funds) in FY 2014 for contractors to conduct a dispensing fee survey and an ingredient cost survey for all outpatient pharmaceuticals to comply with the new procedures.

<u>The Executive Budget</u> recommends \$178,588 (\$87,122 General Funds) in FY 2014 and \$216,075 (\$104,959 General Funds) in FY 2015 to add three positions to support new programs, such as the Care Management Organization and health/medical homes programs, and to implement components of the ACA, including:

- One Administrative Services Officer II to serve as the business manager of the unit;
- One Program Officer I to investigate the eligibility and enrollment status of individuals during certain timeframes; and
- One Social Services Program Specialist II to monitor Managed Care Organizations and other contractors to ensure Medicaid clients have access to quality, accessible, and timely services.

New and Transferred Positions

Additionally, <u>The Executive Budget</u> recommends \$247,605 (\$120,652 General Funds) in FY 2014 and \$309,699 (\$150,365 General Funds) in FY 2015 for an additional five full-time equivalent (FTE) within the Administration account, not directly associated with the implementation of the ACA, including:

- One Administrative Assistant III to provide clerical support for the Information Services Unit;
- One Management Analyst II and one Management Analyst I to perform claims recovery, tracking, and accounting tasks associated with processing claims identified for payment recovery in the Payment Recovery Unit; and
- One Social Services Program Specialist II and one Administrative Assistant II to accommodate the anticipated increase in the number of fair hearing requests received by the Hearings Unit.

Additionally, <u>The Executive Budget</u> recommends transferring four information services positions from the Division of Welfare and Supportive Services (DWSS) to the DHCFP to support the information systems integration with the Check Up program portion of the eligibility engine. <u>The Executive Budget</u> also recommends transferring one Social Services Chief, dedicated to Check Up eligibility functions, to the DWSS.

<u>Medicaid Management Information System Replacement</u> – <u>The Executive Budget</u> recommends \$1.65 million (\$412,153 General Funds) in FY 2014 and \$1.90 million (\$475,230 General Funds) in FY 2015 to implement the second phase of the MMIS replacement project, including the addition of one Management Analyst III position and contracting with a consultant to assist with the development of the procurement of a new MMIS.

INCREASED QUALITY OF NURSING CARE

The Increased Quality of Nursing Care budget account was created in accordance with Assembly Bill 395 approved by the 2003 Legislature, which instituted a methodology that requires the division to establish a provider tax program encompassing all freestanding long-term care facilities (except those owned by the state) in Nevada. Assembly Bill 395 stipulates that funding received via the provider tax and used to match federal Title XIX funds must be applied to increasing reimbursement rates and cannot be used to replace existing state expenditures paid to long-term care facilities.

Historically, the provider tax has been an established uniform rate based on non-Medicare patient days, and the rate has been set at the equivalent of 6 percent of the total annual gross revenues. However, the tax rate was reduced to 5.5 percent during FY 2008 to comply with the Deficit Reduction Act (DRA), which placed restrictions on the use of provider taxes. According to The Executive Budget, the provider tax methodology was revised during FY 2012 in order to comply with federal requirements that the provider tax be uniform and generally distributive.

Based on the revisions to the provider tax methodology during the 2011-13 biennium, long-term care facilities receive a supplemental payment, rather than an enhanced per-bed day reimbursement rate. The Executive Budget indicates that the total state share available for supplemental payments will total \$32.2 million in FY 2014 and \$33.5 million in FY 2015. The legislation allows the division to use no more than 1 percent of the taxes collected to administer the provider tax program.

NEVADA CHECK UP

The Balanced Budget Act of 1997 created the Children's Health Insurance Program (CHIP) under Title XXI of the Social Security Act to enable states to initiate and expand health care coverage targeted to low-income and uninsured children. The Nevada Check Up program was approved as a stand-alone program that covers children ages birth through 18 years from families with incomes up to 200 percent of the federal poverty level. Eligible families pay quarterly premiums ranging from \$25 to \$80, based on their income level and family size. Services are provided under a managed care arrangement with participating Health Maintenance Organizations (HMO) in Clark and Washoe counties and on a fee-for-service basis in areas of the state where an HMO network does not exist. Enrollment in the program began in October 1998.

Overall total funding for the Nevada Check Up program is recommended to increase to approximately \$82.2 million for the 2013-15 biennium, which is an increase of approximately \$13.5 million compared to the total funding legislatively approved for the 2011-13 biennium. General Fund support is recommended at \$19.2 million over the 2013-15 biennium, which is an increase of \$394,446, or 2.1 percent, compared to the legislatively approved amount for the 2011-13 biennium.

Caseload Growth

The Executive Budget recommends reductions totaling \$878,158 (\$255,038 in General Funds) over the 2013-15 biennium for decreased costs associated with the projected caseload for the Check Up program. Check Up caseloads are projected to decrease by approximately 0.8 percent for FY 2014 over the projected caseloads for FY 2013 and by approximately 0.3 percent for FY 2015 over the projected caseloads for FY 2014 (refer to the table below).

| Check Up: Average Monthly Caseload | | | | | | | | |
|------------------------------------|---------|---------|--------|-----------|--------|-----------|--------|--|
| | | FY 2013 | % | FY 2014 | % | FY 2015 | % | |
| | FY 2012 | (Proj) | Change | (Gov Rec) | Change | (Gov Rec) | Change | |
| Growth w/o ACA | 21,316 | 20,981 | (1.6%) | 20,819 | (0.8%) | 20,756 | (0.3%) | |

Additionally, <u>The Executive Budget</u> provides approximately \$10.6 million (\$2.5 million in General Funds) over the 2013-15 biennium for increased costs associated with the projected caseload growth resulting from the implementation of the Affordable Care Act (ACA), as follows:

 Health Insurance Mandate – includes caseload growth due to the ACA mandate to have health insurance and includes those who are currently eligible for Check Up but not enrolled. Medicaid Eligible – includes children currently enrolled and children currently eligible but not enrolled in Check Up who will become Medicaid eligible as a result of the ACA. This caseload will transfer from the Check Up program to Medicaid.

The table below summarizes the projected caseload growth and costs for each fiscal year.

| Check Up: Annual Caseload Growth Due to ACA | | | | | | | | | |
|---|-----------|-----------|---------|-----------|---------|---------|-----------|----------|--|
| | FY 2014 | FY 2015 | | FY 2014* | | | FY 2015* | | |
| Decision Unit | (Gov Rec) | (Gov Rec) | GF | Fed Funds | Total | GF | Fed Funds | Total | |
| Insurance Mandate | 64,542 | 167,741 | \$1.7 | \$5.2 | \$6.9 | \$4.1 | \$13.3 | \$17.4 | |
| Medicaid Eligible | (20,011) | (122,815) | (\$0.4) | (\$1.2) | (\$1.6) | (\$2.9) | (\$9.2) | (\$12.1) | |
| Total | 44.531 | 44.926 | \$1.3 | \$4.0 | \$5.3 | \$1.2 | \$4.1 | \$5.3 | |

^{*} Dollars in millions

Provider Rate Increases

The Executive Budget includes mandatory rate increases in the Check Up account for HMOs, Rural Health Clinics (RHC), and pharmaceutical drugs; however, the increases are offset by projected caseload decreases, resulting in a reduction in the projected expenditures for the 2013-15 biennium. The Executive Budget recommends reducing expenditures by \$1.6 million (\$422,762 in General Funds) in the Check Up budget during the 2013-15 biennium for mandatory rate increases for providers.

The Governor recommends \$1.45 million (\$396,860 General Funds) in FY 2014 and \$1.51 million in FY 2015 (\$386,270 General Funds) in FY 2015 for rate increases for primary care physician services in the Check Up program. The ACA mandated and funded this rate increase for Medicaid providers through December 31, 2014, and the Governor's recommended budget proposes to extend the rate increase for Medicaid providers through FY 2015. The Governor recommends expanding the primary care provider rate increase to Nevada Check Up providers to create continuity between Medicaid and Check Up.

Transfer Check Up Staff

<u>The Executive Budget</u> recommends transferring the non-eligibility functions for Check Up, including the 3 positions responsible for the medical claims processing and benefit coverage, to the Administration account. <u>The Executive Budget</u> also recommends transferring the Check Up eligibility functions, including 22.51 positions, to the Division of Welfare and Supportive Services (DWSS), resulting in the centralization of eligibility functions within DWSS.

MEDICAID

Medicaid is the state-administered program for medical assistance established in 1965 through the passage of Title XIX of the Social Security Act. The Medicaid program purchases or provides medical services for persons who meet certain eligibility criteria. Medicaid covers three main groups of low-income people: parents and children, elderly, and disabled. Under federal Medicaid law, there are certain eligible groups and benefits that must be covered by states; however, states are given discretion and flexibility to determine the various categories of benefits and the eligible groups their Medicaid programs will cover. Nevada has adopted both optional eligibility groups and optional benefit packages to be covered under its Medicaid plan.

Overall funding for the Medicaid program is recommended to increase to approximately \$4.4 billion for the 2013-15 biennium, which is an increase of approximately \$1.1 billion when compared to the total funding legislatively approved for the 2011-13 biennium. General Fund support is recommended to increase to approximately \$1.1 billion for the 2013-15 biennium, which is an increase of \$94 million, or 9.4 percent, when compared to the General Fund support approved by the 2011 Legislature for the 2011-13 biennium.

Caseload Growth

<u>The Executive Budget</u> provides approximately \$331.6 million (\$122.4 million in General Funds) over the 2013-15 biennium for increased costs associated with the projected growth in caseload. Medicaid caseloads are projected to increase by approximately 3.6 percent for FY 2014 over the projected caseloads for FY 2013 and by approximately 3.4 percent for FY 2015 over the projected caseloads for FY 2014 (refer to table below).

| Medicaid: Average Monthly Caseload | | | | | | | | |
|------------------------------------|---------|---------|--------|-----------|--------|-----------|--------|--|
| | | FY 2013 | % | FY 2014 | % | FY 2015 | % | |
| | FY 2012 | (Proj) | Change | (Gov Rec) | Change | (Gov Rec) | Change | |
| Growth w/o ACA | 292,101 | 302,491 | 3.6% | 313,388 | 3.6% | 323,882 | 3.4% | |

Additionally, <u>The Executive Budget</u> includes approximately \$609.5 million (\$71.5 million in General Funds) over the 2013-15 biennium for increased costs associated with the projected caseload growth resulting from the implementation of the ACA and the expansion of Medicaid eligibility. The caseload growth results from the following:

- Health Insurance Mandate includes those who are currently Medicaid eligible, but not enrolled, who will enroll due to the ACA mandate to have health insurance.
- Previously Check Up Eligible includes children currently enrolled and children currently eligible, but not enrolled in Check Up who become Medicaid eligible due to the expanded income guidelines (up to 138 percent of the FPL) for Medicaid.
- Newly Eligible represents a new eligibility group that expands Medicaid to adults, aged 19-64, with incomes at or below 138 percent of the FPL. This group does not include pregnant women, which are an existing eligibility group.

The table below summarizes the projected annual caseload growth and costs for each year of the upcoming biennium.

| Medicaid: Annual Expanded Caseload Growth Due to ACA | | | | | | | | | |
|--|-----------|-----------|---------|-----------|---------|---------|-----------|---------|--|
| | FY 2014 | FY 2015 | | FY 2014* | | | FY 2015* | | |
| Decision Unit | (Gov Rec) | (Gov Rec) | GF | Fed Funds | Total | GF | Fed Funds | Total | |
| Health Insurance Mandate | 204,138 | 545,585 | \$16.0 | \$26.4 | \$42.4 | \$48.3 | \$84.1 | \$132.4 | |
| Previously Ck Up Eligible | 46,326 | 204,562 | \$2.0 | \$5.6 | \$7.6 | \$7.9 | \$23.0 | \$30.9 | |
| Newly Eligible | 282,610 | 865,872 | (\$0.6) | \$96.9 | \$96.3 | (\$2.1) | \$302.0 | \$299.9 | |
| Total | 553,074 | 1,616,019 | \$17.4 | \$128.9 | \$146.3 | \$54.1 | \$409.1 | \$463.2 | |

^{*} Dollars in millions

Provider Rate Increases

The Executive Budget recommends increasing expenditures by \$27.7 million (\$3.7 million in General Funds) in the Medicaid budget during the 2013-15 biennium for mandatory rate increases for providers. The mandatory Medicaid rate increases include free standing hospice, Federally Qualified Health Centers, Rural Health Clinics, Indian Health Services, and capitation payments for managed care organizations.

Extend ACA Rate Increases for Physicians

The Governor recommends \$41.83 million in FY 2014 and \$50.27 million (\$8.9 million General Funds) in FY 2015 to continue physician rate increases mandated by the ACA. Beginning on January 1, 2013, state Medicaid programs were required to pay for specific primary care services provided by physicians with a specialty designation of family medicine, general internal medicine, or pediatric medicine at a rate not less than 100 percent of the Medicare rate. The rate increases are 100 percent federally funded through December 31, 2014. The Governor recommends extending the rate increases through FY 2015.

Cost Sharing for Medicaid Recipients

The Governor recommends reducing expenditures by \$2 million (\$729,200 General Funds) in FY 2015 through the implementation of cost sharing with certain Medicaid patients. It appears that Temporary Assistance for Needy Families (TANF) and Child Health Assurance Program (CHAP) recipients would pay a co-pay for primary care physician services, reducing Medicaid expenditures by a corresponding amount. Expand Waiver Slots

The Governor recommends \$3.36 million (\$771,922 General Funds) in FY 2014 and \$10.37 million (\$2.05 million General Funds) in FY 2015 to expand the number of Medicaid waiver slots and related administration expenditures. According to The Executive Budget, the wait list and wait time would be reduced by increasing the number of waiver slots as follows:

- Adding an additional 125 waiver slots for the Mental Retardation and Related Condition (MRRC) waiver in each year of the 2013-15 biennium;
- Adding an additional 96 waiver slots for the Waiver for Persons with Physical Disabilities in each year of the 2013-15 biennium; and
- Adding an additional 60 waiver slots for the Community Home Based Initiative Program (CHIP) waiver for the frail elderly in each year of the 2013-15 biennium.

HEALTH DIVISION

The state Health Division administers four bureaus, plus the Early Intervention Services (EIS) program and an administrative section, to protect the health of Nevadans and visitors of the state. The division operates under the guidance of the seven-member, Governor-appointed State Board of Health to enforce health laws and regulations, promote public health education, investigate the causes of disease, and provide direct public health services in Nevada's rural counties.

The Executive Budget recommends total funding for the Health Division in the amount of \$319.3 million for the 2013-15 biennium of which \$14.5 million is General Fund appropriations. However, a reorganization is recommended for the Health Division, as discussed below in the Health Administration section, so the total funding recommended for the Health Division is not directly comparable to the total funding that was legislatively approved for the 2011-13 biennium. The EIS program is recommended to be moved into the Aging and Disability Services Division (ADSD), and the rest of the Health Division budgets are recommended to be combined with the Mental Health services budgets of the Mental Health and Developmental Services (MHDS) Division into a new Division of Public and Behavioral Health (DPBH). Therefore, the \$319.3 million is the total funding recommended in support of the Public Health programs of the new DPBH.

If the reorganization were not recommended by the Governor, total funding for the Health Division would be \$388.6 million over the 2013-15 biennium, compared to \$351.8 million legislatively approved for the 2011-13 biennium. Total General Fund appropriations recommended for the 2013-15 biennium would be \$73.1 million compared to \$54.7 million legislatively approved for the 2011-13 biennium. This 33.6 percent increase is attributable to recommended General Fund increases for EIS. Since the Governor recommends moving EIS to ADSD, the total recommended General Fund appropriations for the Public Health budgets of DPBH decrease sharply to \$14.5 million, as noted above.

Full-time equivalent (FTE) positions recommended in <u>The Executive Budget</u> for the Health Division total 559.97 for both FY 2014 and FY 2015. Total positions would be 740.59 in both years of the biennium without the reorganization. Again, the planned movement of the EIS budget to the ADSD affects the total recommended positions significantly.

RADIOLOGICAL HEALTH

The Radiological Health program protects health and safety and the environment by regulating sources of ionizing radiation. The program inspects and licenses radioactive material users and x-ray machines statewide, certifies mammography operators and inspects mammography machines, performs oversight at the closed low-level waste site near Beatty, conducts statewide radiological emergency response, and coordinates radon training and awareness activities.

<u>The Executive Budget</u> recommends total funding of \$2.7 million in each year of the 2013-15 biennium compared to actual funding of \$2.9 million in FY 2012 (excluding reserve balanced forward). The Governor recommends a reduction in reserves of \$86,882 in FY 2014 and \$76,156 in FY 2015 to purchase specialized radiation equipment and computer hardware and software.

The Governor recommends reducing transfers from the Low-Level Radioactive Waste Fund from the base year actual amount of \$93,573 to \$19,590 in FY 2014 and \$19,463 in FY 2015. This recommendation reduces funding to support a position in the Radiation Control account for minimal monitoring and oversight at the Beatty Low Level Radioactive Waste Site. All non-essential activities at the site will be postponed to ensure sufficient funding is maintained in the Low-Level Radioactive Waste Fund to respond to unforeseen mandatory repairs and/or a catastrophic event.

CHILD CARE SERVICES

The Child Care Services program is responsible for licensing and monitoring child care facilities caring for five or more children not licensed by local jurisdictions. Regulated facilities include child care centers, preschools, group care homes, institutions and outdoor youth programs. The program is also responsible for licensing, monitoring and providing technical assistance to family foster and group foster care homes also not licensed by other jurisdictions to reduce the risk of harm to children placed in care.

The 2011 Legislature approved the transfer of the Child Care Services program to the Health Division under the Bureau of Health Care Quality and Compliance. Child Care Services program to the Health Division under the Bureau of Health Care Quality and Compliance.

Finally, the Governor recommends total funding of approximately \$1.6 million in each year of the 2013-15 biennium, which includes General Funds of \$26,146 in FY 2014 and \$83,778 in FY 2015. Of the General Fund amounts, \$18,330 over the biennium is to support the program's share of the new online licensing system Technology Investment Request (TIR) that is described in the Health Facilities Hospital Licensing section. An additional \$34,152 is recommended in FY 2015 to fund a portion of a Child Care Facility Surveyor due to insufficient revenue from contracted services with the Division of Welfare and Supportive Services and licensing fees.

HEALTH STATISTICS AND PLANNING

The Health Statistics and Planning budget houses the state's Vital Records program. Total funding recommended is \$1.6 million in FY 2014 and \$1.8 million in FY 2015. The increase of 11.5 percent from the first year to the second is attributable to the increased vital records fees remaining in the budget account. The Health Division has submitted a bill draft request to change NRS 440 to permit the program to retain the vital records fees collected and eliminate General Fund support of the budget account. This was approved in concept by the 2011 Legislature, but the statutory change required was not processed. The Health Division projects to receive \$1.02 million per fiscal year in vital records fees.

The Governor recommends the addition of three positions to maintain the Web-Enabled Vital Records Registry System (WEVRRS). Recommended are one Statistician, one Program Officer, and one Administrative Assistant at a total cost of \$316,177 over the biennium. Numerous information technology upgrades and equipment upgrades are recommended, including an update to the software that runs WEVRRS (\$45,633 over the biennium), and software developer hours to upgrade the Electronic Birth and Death Registry modules (\$100,000 over the biennium). New cubicles, records shelving/vault storage and security glass for the customer service area are also recommended at a total cost of \$175,281 over the biennium.

EARLY INTERVENTION SERVICES

Early Intervention Services (EIS) works to identify infants and toddlers who have, or are at risk for, developmental delays. Early Intervention Services provides services to, and support for families with children who have developmental delays and helps facilitate the children's learning and individualized development.

<u>The Executive Budget</u> recommends total General Fund appropriations of \$27.4 million in FY 2014 and \$31.2 million in FY 2015. This is a 43 percent increase in General Fund support in FY 2014 over FY 2012 actual appropriations (\$19.7 million) with an additional 14 percent increase in FY 2015 over FY 2014. The main reason for this increase is that <u>The Executive Budget</u> annualizes the projected EIS caseload for FY 2013, inclusive of the waiting list. The base budget includes \$26.7 million for FY 2014 and \$27 million for FY 2015.

To fund intervention therapies for new children entering the program, the Governor recommends \$1.2 million for FY 2014 and \$4.6 million for FY 2015 funded entirely by General Fund appropriations. The Executive Budget indicates that the enhancement would fund services for 347 additional children (over the FY 2012 actual number) and 696 additional children in FY 2015. The actual number of children able to be served depends on which EIS service delivery model is planned for the upcoming biennium, the number of therapy providers able to be retained, and the capitated rate paid to community providers per child per month. By the end of FY 2014, 55 percent of the total caseload is expected to be served by community providers. At the end of FY 2015, that amount will increase to 75 percent of the total caseload.

In addition to the caseload enhancement, General Funds are recommended for autism assessment kits (\$30,334 over the biennium) and iPads to be used in rural case management, service coordination, and interpreting (\$13,244 over the biennium).

IMMUNIZATION PROGRAM

The purpose of the Immunization program is to prevent the occurrence of vaccine-preventable diseases in Nevada by promoting immunizations and providing vaccines to prevent the transmission of diseases. State-supplied vaccines are provided free of charge to all physicians, hospitals, and clinics that agree to meet the requirements of the program.

The Executive Budget recommends that transfers of federal Title XXI funds from the Nevada Check Up program increase from \$1.06 million in FY 2012 to \$1.34 million in both FY 2014 and FY 2015. The transfers of federal Title XXI funds provide for the purchase of vaccines for children who are enrolled in the Nevada Check Up program. General Fund appropriation included in the Immunization budget is used as state match for the Title XXI funds. The Executive Budget recommends \$1.02 million in state appropriations in both FY 2014 and FY 2015. The total recommended funding is \$5.9 million in FY 2014 and \$5.5 million in FY 2015.

The Governor recommends General Fund appropriations of \$500,000 in each fiscal year of the 2013-15 biennium to provide the pertussis (whooping cough) vaccine (Tdap) to mothers immediately after the birth of their babies. The funding is to prevent a pertussis outbreak in Nevada. State appropriations are recommended to offset budget cuts and policy changes at the federal level.

COMMUNICABLE DISEASES

The major objective of the programs comprising the Communicable Diseases budget is to reduce the incidence of HIV and AIDS in Nevada. The federal Ryan White CARE Act funds support efforts for those with HIV or AIDS. The federal funding is supplemented by pharmaceutical company rebates and State General Fund appropriations. Ryan White programs include the AIDS Drug Assistance Program (ADAP), the State Pharmacy Assistance Program (SPAP), and the Coordination of Benefits (COB) program. The SPAP and COB programs work to keep people on health insurance plans or cover the "donut hole" in drug insurance plans. The ADAP is the payor of last resort for those who earn 400 percent or less of the Federal Poverty Level and do not have insurance. The Executive Budget recommends total funding of \$16.3 million in both years of the 2013-15 biennium. Of that total, \$2.1 million per year represents State General Fund appropriations.

The Governor recommends \$1.85 million per year in pharmaceutical company rebate monies to increase "wraparound services" for persons with HIV/AIDS, including case management, drug regimen adherence, oral and mental health services, and enhancing health insurance premium support and cost sharing assistance to keep people on medical and prescription drug insurance. Total funding recommended for the Ryan White program is \$13 million in FY 2014 and \$12.9 million in FY 2015, funded by a combination of General Fund, federal Ryan White grant monies, and pharmaceutical rebate monies. Of that total, approximately \$8 million per year is federal Ryan White funding, with approximately \$1.8 million from General Fund appropriations.

HEALTH FACILITIES HOSPITAL LICENSING

The mission of the Health Facilities Hospital Licensing budget is to protect the health and welfare of the public through licensure, regulation, enforcement and education of various types of health facilities. The division also has an agreement with the Centers for Medicare and Medicaid Services to inspect facilities that receive Medicare and/or

Medicaid reimbursements, as well as laboratories that must conform to the Clinical Laboratory Improvement Amendments. The program also conducts complaint investigations regarding medical facilities and coordinates with other oversight bodies, such as the Board of Medical Examiners and the Board of Pharmacy.

The total recommended funding is \$14.9 million in FY 2014 and \$14.1 million in FY 2015 inclusive of reserve amounts of \$4.4 million in FY 2014 and \$4.5 million in FY 2015. The 2011 Legislature approved reserve amounts of \$1.5 million in FY 2012 and \$1.8 million in FY 2013. Additional federal grant funds were received in FY 2012 beyond what had been legislatively approved, although some of these grants will not continue in the upcoming biennium.

The Governor is recommending an on-line licensing system Technology Investment Request (TIR) to allow Nevadans to apply for and renew licenses, permits, and certificates, track application status, and pay fees. Funding of approximately \$1.4 million is recommended over the biennium to support the TIR, of which, approximately \$235,000 is General Fund. The costs will be allocated among six Health Division accounts: Radiation Control, Child Care Services, Consumer Health Protection, Health Facilities Hospital Licensing, Emergency Medical Services, and Marijuana Health Registry.

BIOSTATISTICS AND EPIDEMIOLOGY

The Biostatistics and Epidemiology budget account was approved by the 2011 Legislature to house personnel and programs from the Office of Epidemiology and the Office of Health Statistics and Surveillance. Disease surveillance efforts and public health statistical analysis expenditures are budgeted in this account. Total funding recommended is \$4.4 million in each fiscal year, with \$642,915 of that amount (7.3 percent) being state appropriations.

The Governor recommends one Senior Physician position be added to be funded by the federal Epidemiology and Lab Capacity grant. The new unclassified position will direct epidemiological investigations related to both public health and mental health. The total cost is \$322,620 over the biennium. Also, the Governor recommends adding two Health Program Specialists and one Information Technology Professional to administer the federal BioSense grant, which is a new revenue source for the Health Division. The grant is intended to improve the exchange of electronic public health information.

MATERNAL AND CHILD HEALTH SERVICES

The Maternal and Child Health Services program works to improve the health of women of childbearing age, infants, children and adolescents, including children with special health care needs, by promoting and providing health education, prevention activities, and access to health care services.

The Governor recommends total funding of \$9.1 million in FY 2014 and \$9.3 million in FY 2015, compared to FY 2012 actual funding of \$6.2 million. Total General Fund is recommended at \$1.1 million in each fiscal year of the biennium, compared to approximately \$880,000 recommended in FY 2012 and FY 2013 respectively. The increase in total funding is due to increases in several federal grants (Rape Prevention, Abstinence Education, Personal Responsibility Education, and Home Visiting), as well as fee increase in newborn metabolic screening fees.

The Governor recommends newborn metabolic screening fees be increased from \$71 to \$75 in FY 2014 and \$77 in FY 2015. The increase generates an additional \$139,387 in FY 2014 and \$250,025 in FY 2015. The increase will provide the Newborn Screening Program with funding to pay for metabolic and genetic disorders screening while also supporting the daily operating costs of the program. Also recommended is one new Administrative Assistant; however, another decision unit reduces an existing filled Health Program Specialist to half-time. The total amount of newborn screening fee revenue budgeted is \$3.1 million in FY 2014 and \$3.3 million in FY 2015.

Finally, the Governor recommends transferring the Office of Suicide Prevention from the Department of Health and Human Services Director's Office to the Maternal Child Health Services budget. This recommendation adds four full-time positions: a Statewide Suicide Prevention Coordinator, two Suicide Prevention Trainers and one Administrative Assistant. Total funding transferred is \$682,737 in FY 2014 and \$688,702 in FY 2015.

OFFICE OF HEALTH ADMINISTRATION

The Office of Health Administration provides support functions for the entire Health Division, including the State Board of Health. Programs include administration, accounting and fiscal management, information technology, and personnel.

The Governor recommends consolidating the Mental Health services budgets of the Division of Mental Health and Developmental Services (MHDS) with the Health Division to form a new Division of Public and Behavioral Health. With the exception of Early Intervention Services (EIS), which is recommended to transfer to the Aging and Disability Services Division (ADSD), all Health Division budgets remain in the new division. The Executive Budget transfers 11 accounting, information technology, and personnel positions from the Health Administration account to the ADSD to support the EIS program.

In consolidating the Health and Mental Health budgets, <u>The Executive Budget</u> recommends a new administrative structure. The Governor recommends four existing positions be reclassified as Deputy Division Administrator positions. This includes the reclassification of the existing Division Administrator, State Health Officer, and Deputy Administrator positions within Budget Account 3223, and the transfer and reclassification of the Community Health Nursing Manager position from the Community Health Services account.

The recommended reclassification of these positions results in a General Fund savings of \$131,405 over the 2013-15 biennium. In addition, the Governor recommends reclassifying an IT Professional III to an IT Manager II, due to the consolidation at a cost of \$19,688 over the biennium. Total recommended funding for this budget is \$7.1 million in FY 2014 and \$6.6 million in FY 2015.

<u>The Executive Budget</u> recommends the addition of four new Grants and Projects Analyst II positions to complete reporting, tracking, and auditing to satisfy federal grant requirements. This work is currently being completed by contract staff. The total cost of the positions is \$436,877 over the 2013-15 biennium and is funded by intra-agency indirect cost revenue.

The Governor recommends General Funds of \$100,000 each fiscal year to support the Mammovan. The 2011 Legislature approved \$175,000 in each fiscal year, which included \$75,000 in UnitedHealth Settlement funds, which are no longer available.

COMMUNITY HEALTH SERVICES

The Community Health Nursing program provides public health nursing in 14 of Nevada's rural and frontier counties with community health nursing clinics in 11 of the counties. In many cases, the state provides the nursing staff, while counties provide space and administrative staff. Essential public health nursing services include adult and child immunizations and Early Periodic Screening Diagnosis and Treatment (EPSDT) examinations. Family planning, cancer screening and identification and treatment of communicable diseases (e.g., tuberculosis and sexually transmitted diseases, including HIV) is also provided. Public health preparedness coverage and epidemiology assistance for 12 counties are also provided out of this account.

Total funding recommended for Community Health Services is \$3.4 million in FY 2014 and \$3.5 million in FY 2015 or \$6.9 million over the 2013-15 biennium. The 2011 Legislature approved \$8 million in total funding for the 2011-13 biennium. Of the total recommended funding, \$988,965 in FY 2014 and \$1 million in FY 2015 are General Fund appropriations. The decrease of approximately 14 percent in total funding is due, in part, to various federal grants that support this account being reduced or eliminated, including the Preventive Health Services block grant and transfers of Temporary Assistance for Needy Families (TANF) block grant funding from the Welfare Division. In addition, the charges assessed to counties for services provided by the program are budgeted to decrease by \$68,000 from the FY 2012 actual revenue.

As a result of the funding reductions, 3.25 vacant Community Health Nurse positions are recommended to be eliminated, for a total reduction in personnel costs of \$533,382 over the biennium. However, The Executive Budget recommends reallocating \$414,205 of the funding to support program-operating costs. The total General Fund savings from the position elimination is \$117,711 over the biennium. The Executive Budget recommends the addition of three Administrative Assistants for the Lyon County nursing clinics. The total cost of this enhancement is \$237,003 over the biennium, funded by a combination of service charges, county participation funds and State General Funds of which \$118,464 represents existing funds reallocated from programmatic activities.

Finally, the Governor recommends transferring one Health Program Specialist from this account to the DHHS Director's Office, since the position works as the tribal liaison. This transfer results in a reduction of \$165,679 in federal funds from this budget over the biennium.

EMERGENCY MEDICAL SERVICES PROGRAM

The Emergency Medical Services (EMS) program establishes and enforces standards for the provision of quality pre-hospital emergency medical care, the operation of ambulance services, certification of EMS personnel, licensure of attendants and the delivery of trauma care. The program also supports the emergency medical services system in all counties, except Clark County, by providing technical assistance, consultation and training to EMS managers and personnel. A registry of all persons certified in Nevada is maintained as part of the program activities. In addition, this program is responsible for implementation, monitoring and maintaining a database for out-of-hospital emergency care. The EMS budget is funded by licensure fees, State General Funds, and federal grants.

The Governor recommends General Fund appropriations of \$197,888 in FY 2014 and \$18,324 in FY 2015 to support the EMS portion of the online licensing system Technology Investment Request (TIR) that is described in the Health Facilities Hospital Licensing section. In addition, the Governor recommends federal grant revenues of \$61,505 in FY 2014 and \$62,275 in FY 2015 to support the maintenance and transmission expense of the Nevada Shared Radio System, which is maintained by the Nevada Department of Transportation (NDOT). The federal grant revenues will be received from the Public Health Preparedness program and transferred to NDOT.

MARIJUANA HEALTH REGISTRY PROGRAM

The Marijuana Health Registry program administers the provisions of the medical marijuana statutes (NRS 453A), which authorize patients with chronic or debilitating medical conditions, or their caregivers, to possess or cultivate marijuana for medical use. The Health Division administers the application and eligibility process, as well as renewals of eligibility. There is no General Fund in this budget; the recommended budget (\$1 million in FY 2014 and \$805,947 in FY 2015) is supported by application and eligibility fees, as well as Treasurer's Interest distributions. The funding recommended for the 2013-15 biennium is a 36.8 percent decrease from the funding approved by the 2011 Legislature for the current biennium. Total fee revenue recommended is \$539,105 in FY 2014, which is a 7.7 percent decrease from the FY 2012 actual amount of \$584,390. In FY 2015, fee revenue is budgeted to decrease to \$532,713, which is a decrease of 1.2 percent from FY 2014.

The Governor recommends transferring \$350,000 in FY 2014 and \$300,000 in FY 2015 to provide drug treatment services for parents of children in the child welfare system. The reserved fees are recommended to transfer to the Substance Abuse Prevention and Treatment Agency (SAPTA) budget within the Division of Mental Health and Developmental Services. For each fiscal year of the 2011-13 biennium, the 2011 Legislature approved the transfer of \$700,000 to SAPTA for assessment and drug treatment services.

DIVISION OF WELFARE AND SUPPORTIVE SERVICES

The Division of Welfare and Supportive Services (DWSS) is responsible for administering the delivery of cash grants and food stamps, enforcing child support, administering employment and training programs for welfare recipients, distributing child care funding, and determining eligibility for Nevada's Medicaid program.

Overall funding for the division is recommended by the Governor at approximately \$560.7 million, net of interagency transfers, (\$173.6 million in General Funds) for the 2013-15 biennium, an increase of approximately 9 percent when compared to the total funding approved by the 2011 Legislature for the 2011-13 biennium. The General Fund portion is recommended to increase by \$30.7 million, an increase of approximately 21.5 percent. The Executive Budget recommends General Fund support of \$83.7 million in FY 2014, representing an increase of \$12.3 million over the FY 2013 level. General Funds of \$89.8 million are recommended in FY 2015, representing an increase of \$18.4 million from FY 2012.

WELFARE AND SUPPORTIVE SERVICES ADMINISTRATION

The Welfare and Supportive Services Administration budget supports the administrative staff that provides oversight to various programs administered by the division and includes support resources utilized by and provided to the division field staff for the operation of the various programs under the division's jurisdiction.

<u>The Executive Budget</u> recommends total funding of \$586,103 (\$292,842 General Funds) in FY 2014 and \$810,761 (\$402,247 General Funds) in FY 2015 for seven new support staff and operating costs to provide administrative support for the increase in staff recommended for the Field Services account due to general caseload growth.

With regard to the implementation of the Affordable Care Act (ACA), <u>The Executive Budget</u> recommends total funding of \$402,879 (\$201,439 General Funds) in FY 2014 and \$752,039 (\$376,020 General Funds) in FY 2015 for eight new positions to support the increase in the Field Services staff related to the implementation of the ACA. Also with respect to the ACA, the Governor recommends \$4.5 million (\$356,105 General Funds) in FY 2014 and \$3.4 million (\$317,470 General Funds) in FY 2015 to complete the development, implementation, and ongoing operating costs of the division's eligibility engine system. The 2011 Legislature approved total funding of \$1 million in FY 2012 and \$13.9 million in FY 2013 (General Funds of \$494,838 over the 2011-13 biennium) for the development and implementation of the eligibility system, which determines individual eligibility for publicly subsidized health care programs. In order to comply with the ACA, the eligibility engine requires additional functionality and the ability to meet standards of quality and security.

To implement the Governor's recommendation to expand Medicaid to 138 percent of the Federal Poverty Level (FPL), <u>The Executive Budget</u> recommends funding of \$406,596 (half General Funds) in FY 2014 and \$554,329 (half General Funds) in FY 2015 to provide six administrative support staff and operating costs based on the projected increases in personnel in the Field Services account. The Governor also recommends the transfer in of ten positions and the transfer out of four positions over the biennium.

TEMPORARY ASSISTANCE FOR NEEDY FAMILIES

The Temporary Assistance for Needy Families (TANF) budget provides funding for cash assistance for eligible recipients, which is time limited; supports the employment and training programs and services administered by the division designed to help clients prepare for and find work; and provides a wide variety of support services for families and individuals to support and maintain self-sufficiency.

The Personal Responsibility Work Opportunity Act (PRWORA) of 1996 replaced the Aid to Families with Dependent Children (AFDC) program, an open-ended federal entitlement, with the TANF program. The federal funding to support the TANF program is now allocated to states in the form of a block grant that is capped and covers cash assistance, welfare employment and training, and the administrative costs associated with providing those services. The 1997 Legislature, with passage of Assembly Bill 401 and Senate Bill 356, enacted legislation to conform state laws to the PRWORA requirements and authorized a number of welfare reform initiatives unique to Nevada.

The PRWORA legislation requires states to continue contributing state funds equal to 80 percent of the amount spent in Federal Fiscal Year 1994 on welfare programs consolidated into TANF. The maintenance of effort (MOE) provisions require Nevada to continue to spend a minimum of approximately \$27.2 million in state funds each fiscal year on welfare-related programs. The 80 percent MOE can be reduced to 75 percent if work participation rates are met.

The Executive Budget recommends total funding (state and federal) to support the TANF budget in the amount of \$45.4 million (\$24.6 million General Funds) in FY 2014 and \$44.2 million (\$24.6 million General Funds) in FY 2015. The amount of General Funds recommended for the 2013-15 biennium is \$2.2 million less than the amount of General Funds appropriated for the 2011-13 biennium.

The federal block grant that is allocated to Nevada is projected at approximately \$44 million in each year of the 2013-15 biennium. The TANF block grant is allocated among the Welfare Division's TANF, Welfare Administration and Welfare Field Services budgets. The Executive Budget does not recommend any TANF Supplemental Grant Funds or TANF Contingency Funds for the 2013-15 biennium.

The division ended the 2009-11 biennium with a zero balance of unspent TANF funding. The division projects the balance of unspent TANF funding to increase to \$11.7 million by the end of the 2011-13 biennium. TANF-related expenditures recommended in The Executive Budget for cash assistance, eligibility and administration exceed available resources each year, which will deplete the reserve of unspent TANF funds to a projected level of approximately \$1.3 million by the end of the 2013-15 biennium.

TANF Caseloads

As shown in the table below, <u>The Executive Budget</u> projects a total of 28,349 average monthly recipients in FY 2014, for a decrease of 982 recipients compared to FY 2012. A total of 27,341 average monthly recipients is projected in FY 2015, resulting in a decrease of 1,008 recipients compared to FY 2014.

| | FY 2012 | FY 2013 | % | FY 2014 | % | FY 2015 | % |
|------------------------------|---------|-----------|--------|-----------|--------|-----------|--------|
| Caseload Type | Actual | Projected | Change | Projected | Change | Projected | Change |
| TANF Cash Assistance (cases) | 29,331 | 28,858 | -1.61% | 28,349 | -1.76% | 27,341 | -3.56% |

Cash Grants

The Executive Budget recommends retaining TANF cash assistance grants at their existing levels for the 2013-15 biennium. The monthly cash assistance grant for a three-person household is currently \$383 for a TANF recipient without a public housing allowance, and \$535 for non-needy caretakers. The cash assistance grants for recipients in the Kinship Care program are \$400 for a single child age 12 and under and \$462 for a child over the age of 12.

ASSISTANCE TO AGED AND BLIND

Assistance to the Aged and Blind is an option to the Supplemental Security Income (SSI) program established by Public Law 92-603. The federal SSI program replaced the state-run assistance programs for the aged, blind and disabled and established uniform payment amounts. The Social Security Administration (SSA) administers the program. Nevada has paid a state supplement to the aged and blind who live at home or in an adult group care facility since January 1, 1974. Nevada has never elected the option to supplement payments to the disabled. The purpose of the program is to provide supplemental income to low-income aged and blind individuals and provide adult group care facilities with supplements that enable individuals to avoid or defray institutionalization.

The Executive Budget recommends additional General Funds of \$532,913 in FY 2014 and \$830,924 in FY 2015 to fund projected caseload increases in the Assistance to Aged and Blind account. The Executive Budget projects caseloads to increase over the FY 2012 level by 6.3 percent in FY 2014 and 9.6 percent in FY 2015. The Executive Budget does not recommend a state-funded increase in the amount of the supplement paid to eligible aged and blind individuals or a rate increase for group care operators. Total General Fund support is \$8.5 million in FY 2014 and \$8.8 million in FY 2015.

FIELD SERVICES

The Field Services budget provides for the salaries, operating expenses, and support costs for staff that determine eligibility for TANF, Food Stamp and Medicaid programs, as well as the staff that supports the employment and training programs administered by the division.

The Executive Budget recommends total funding of \$5.7 million in FY 2014 (\$2.8 million General Funds) and \$6.8 million in FY 2015 (\$3.4 million General Funds) primarily to provide additional field services staff and associated costs in order to accommodate the projected increases in caseloads related to the Supplemental Nutrition Assistance Program (SNAP), TANF, and Medicaid. The Executive Budget recommendation includes 84 positions in FY 2014 and an additional 30 positions in FY 3015, and ultimately provides 52 Administrative Assistants and 49 Family Services Specialists. In addition, to accommodate the increase in staffing, The Executive Budget recommends the addition of one new field office to be located in Southern Nevada.

The Executive Budget recommends \$5.4 million in FY 2014 (\$2.7 million General Funds) and \$11.2 million in FY 2015 (\$5.6 million General Funds) to provide additional field services staff and associated costs in order to accommodate the projected caseload increases associated with the implementation of the Affordable Care Act (ACA). With the implementation of the ACA, the number of Medicaid eligibility determinations are projected to significantly increase because individuals who previously were not eligible to receive Medicaid benefits will now be eligible under the ACA. In addition, with the additional new Medicaid eligibility determinations, there will be individuals who will also be eligible for SNAP and TANF benefits that historically had not applied for these benefits. As a result, The Executive Budget recommendation includes 86 new positions in FY 2014 and an additional 88 positions in FY 2015, including 90 Administrative Assistants, 65 Family Services Specialists, 10 Family Services Supervisors, and 2 Social Services Managers. In order to accommodate the increase in Field Services staff, The Executive Budget recommends two new field offices in Southern Nevada, one in each year of the 2013-15 biennium.

In addition to implementing the ACA, the Governor recommends expanding Medicaid eligibility for individuals with incomes up to 138 percent of the Federal Poverty Level (FPL). As a result, The Executive Budget recommends total funding of \$6 million in FY 2014 (\$3 million General Funds) and \$9 million in FY 2015 (\$4.5 million General Funds) for 97 new positions in FY 2014 and an additional 52 positions in FY 2015, in addition to 1 new field office and associated furnishings in Southern Nevada. The requested new positions include 103 Family Services Specialists, 32 Administrative Assistants, and 9 Family Services Supervisors.

CHILD SUPPORT ENFORCEMENT PROGRAM

The Child Support Enforcement program provides five basic services: locating absent parents, establishing parentage, establishing child support orders, collecting support payments, and enforcing private medical insurance. In Nevada, the Child Support Enforcement program is administered by the DWSS and jointly operated by the division and county district attorneys. The Child Support Enforcement budget is funded with a portion of the child support collections the state is allowed to retain, which are used to match Title IV-D funds. The state's share of collections supports all non-federal expenditures, and there are no State General Funds in the Child Support Enforcement budget.

The Executive Budget recommends total funding in support of the Child Support Enforcement program of \$37.7 million for the 2013-15 biennium, which is an increase of \$6.3 million compared to total funding of \$31.4 million approved by the Legislature for the 2011-13 biennium. The Governor recommends \$507,683 in FY 2014 and \$538,336 in FY 2015 for a Technology Investment Request (TIR) to conduct a formal feasibility study to fully identify Child Support Enforcement program requirements, consider potential alternate solutions, and estimated costs. The Executive Budget also recommends the transfer of \$1.94 million of county incentive funds in each year of the 2013-15 biennium from the Child Support Federal Reimbursement account to the Child Support Enforcement account to better allow the division to manage these funds. The Governor also recommends the transfer of eight positions, including associated revenues and expenditures of \$508,100 in FY 2014 and \$532,075 in FY 2015, from the Child Support and Enforcement account to the division's Administration account. These positions currently support multiple programs and the transfer will allow the division to ensure that the positions are appropriately cost allocated to all benefiting programs.

CHILD ASSISTANCE AND DEVELOPMENT

The Child Assistance and Development budget provides for all child care related expenditures for TANF recipients, former TANF recipients, non-TANF-eligible clients who are at risk of losing employment due to a lack of assistance with child care, and low-income non-TANF-eligible clients.

The Governor recommends total funding for the Child Assistance and Development account of \$70.8 million for the 2013-15 biennium, which is a decrease of \$6.5 million compared to total funding of \$77.3 million approved by the Legislature for the 2011-13 biennium. General Funds are recommended to remain flat when compared to the 2011-13 legislatively approved level of \$5.2 million over the biennium. General Funds in this account have historically been used to match federal grants and provide funding for a portion of the TANF block grant MOE requirement (\$2.6 million annually). The Governor recommends the General Fund appropriation in this account remain at the minimum MOE amount, with certified matching funds from outside entities being utilized in lieu of a hard-dollar cash match for other federal grants.

The Executive Budget recommends transferring one Accounting Assistant position and associated revenues and expenditures of \$83,987 over the 2013-15 biennium from the Child Assistance and Development account to the Field Services account to support the increased volume of calls made to the customer services unit. The Governor also recommends transferring one Accounting Assistant III position and associated revenues and expenditures totaling \$127,386 over the 2013-15 biennium from the Child Assistance and Development account to the Welfare Administration account.

ENERGY ASSISTANCE PROGRAM

The Energy Assistance program provides payments for eligible households, which can be applied to either the heating provider, the cooling provider or split between the two. Funding is provided through a combination of Low Income Home Energy Assistance (LIHEA) block grant funds and Universal Energy Charges established by the 2001 Legislature and collected from certain electric and gas utilities.

The Executive Budget recommends increases in funding from federal LIHEA grant funds of \$4.3 million in each year of the 2013-15 biennium, reflecting Nevada's anticipated share of the nationwide increase in available federal LIHEA program funds. In addition, The Executive Budget recommends increases in Universal Energy Charge funding of \$533,209 in FY 2014 and \$690,209 in FY 2015, based on projected increases in revenue by the Public Utilities Commission. The additional funding would primarily be used to provide assistance to 7,130 additional households in FY 2014 and an additional 7,415 households in FY 2015. The number of households served is projected to increase from the actual FY 2012 level of 20,484 to 32,300 in FY 2014 and 32,562 in FY 2015. However, the average annual assistance payment would decrease from the FY 2012 actual of \$636 to \$550. Additionally, due to the projected increase in LIHEA funding levels, The Executive Budget includes a base budget adjustment reinstating the traditional transfer of 5 percent of annual federal grant funding to the Housing Division. The 2011 Legislature approved suspending the transfer temporarily due to federal funding reductions.

DIVISION OF MENTAL HEALTH AND DEVELOPMENTAL SERVICES

The Governor recommends reorganizing the Mental Health services budgets of the Division of Mental Health and Developmental Services (MHDS) with the Health Division to create a new division - the Division of Public and Behavioral Health (DPBH). Each Mental Health budget account would remain intact, but would become part of the new, larger division. As noted, the Developmental Services budget accounts are recommended to move into the existing Aging and Disability Services Division (ADSD).

The programs within the current MHDS organizational structure are responsible for the development, administration, coordination and evaluation of state treatment and training programs for mentally ill and developmentally/intellectually disabled citizens, as well as individuals with substance abuse issues.

Without the proposed reorganization, the Governor recommends a total 2013-15 biennial MHDS budget of \$640.2 million compared to a 2011-13 legislatively approved budget of \$631.2 million. The recommended budget before the reorganization includes a decrease in General Fund appropriations of \$25 million, from \$418.3 million to \$389.7 million.

Also exclusive of the proposed reorganization, <u>The Executive Budget</u> recommends increasing the total number of legislatively approved positions from 1,553.69 to 1,617.39, a net increase of 63.70 positions. As part of the recommended reorganization, the Governor recommends transferring 7.51 positions from Mental Health accounts and 13 positions from Developmental Services accounts to the ADSD.

The Governor's recommendation to expand Medicaid eligibility to individuals who earn up to 138 percent of the federal poverty level under the Affordable Care Act (ACA), projects General Fund savings of \$24.3 million over the biennium based upon increased Medicaid enrollments and lower medication costs borne by the state. For the newly eligible Medicaid participants, the Federal Medical Assistance Percentage (FMAP) is 100 percent federal for both FY 2014 and FY 2015. In addition, the Governor projects \$2.5 million in General Fund savings by enrolling individuals who have been Medicaid eligible in the past but have failed to enroll. The savings related to the ACA occurs in the Mental Health budget accounts only. Reflected in the increase in Medicaid revenues is an increase in the FMAP rates from a blended rate of 58.86 percent in FY 2013 to 62.26 percent for FY 2014 and 63.54 percent for FY 2015.

MENTAL HEALTH AND DEVELOPMENTAL SERVICES ADMINISTRATION/INFORMATION SYSTEM

The Mental Health and Developmental Services (MHDS) Administration is responsible for overseeing the state's mental health, developmental services, and substance abuse policies and regulations; coordinating program development and operations statewide; establishing service and funding priorities; and maintaining fiscal responsibility. The divisional reorganization will move the administrative budget accounts within MHDS to the Division of Public and Behavioral Health (DPBH); the administrative needs of the Developmental Services accounts will be provided by Aging and Disability Services Division (ADSD). Recommended total funding for both MHDS Administration and Information System is \$21 million over the 2013-15 biennium, of which \$8.8 million is General Fund.

<u>The Executive Budget</u> recommends General Fund appropriations of \$141,372 for the biennium to support one additional first year psychiatric resident position, which will be located on the Southern Nevada Adult Mental Health Services (SNAMHS) campus. The Governor also recommends six new positions, the elimination of one position and combining four part-time positions to make two full-time positions. The Biostatistician II position is recommended to be funded with reductions to Community Mental Health Services (CMHS) block grant program costs. Additionally, <u>The Executive Budget</u> recommends the elimination of a Business Process Analyst II position, along with additional General Fund appropriations to purchase additional software and hardware.

The following table displays the recommended decision units that increase or decrease authorized full-time equivalent (FTE) positions. Transfers of existing positions are not displayed.

| Budget | Position Title | Purpose | FY 2014 Recommended Funding | FY 2015 Recommended Funding |
|-----------------------|------------------------------|--|---|-----------------------------------|
| A desirale treation | Management Analyst IV | Assist with the fiscal integration | 52,664 | 72,259 |
| Administration | Accountant Technician II | of the new Division | 40,574 | 56,233 |
| Administration | Biostatistician II | Evaluate programs and collect, report, interpret and evaluate mental health data | Funding for this po for FY 2014 and \$6 2015) comes from CMHS program co | 64,133 for FY a reduction to |
| Socia | Social Services Manager IV | To support revenue collection | 57,721 | 78,449 |
| Administration | Business Process Analyst III | and service delivery due to | 53,405 | 72,771 |
| | Program Officer III | Medicaid expansion | 47,689 | 65,261 |
| Information System | Business Process Analyst II | Eliminated position funds additional hardware and software purchases | 19,652 | 143 |
| Information | IT Tech V | Combines four part-time positions into two full-time | (9,375) | (11,227) |
| System | IT Tech V | positions | (1,554) | (4,674) |
| | NET FUNDING RECOMMEND | 260,776 | 329,215 | |

The Governor recommends General Fund appropriations of \$16,182 to fund the reclassification of two Business Process Analyst III positions to IT Professional III positions. Further, the Governor recommends \$16,746 in SAPTA block grant funds for the reclassification of an IT Professional III position to an IT Manager.

The Governor also recommends a one-shot appropriation of \$204,000 for the purchase of software to help implement MHDS technology policies.

SUBSTANCE ABUSE PREVENTION AND TREATMENT AGENCY

The Substance Abuse Prevention and Treatment Agency (SAPTA) is the designated single state agency for purposes of applying for and expending the federal Substance Abuse Prevention and Treatment (SAPT) block grant, issued through the Substance Abuse and Mental Health Services Administration. The agency plans and coordinates statewide substance abuse services delivery and provides technical assistance to programs and other state agencies, but does not provide direct substance abuse prevention or treatment services.

The Department of Health and Human Services (DHHS) has submitted a bill draft request (BDR) that would change the licensure and certification requirements for facilities that provide treatment for alcohol or drug abuse. Currently, facilities that receive funding from SAPTA are required to be certified by SAPTA and licensed by the Health Division. This BDR would expand licensure requirements to all such facilities, regardless of funding sources, and require the Health Division to provide certification at

the time of licensure. Since costs to provide certification would be absorbed by the Health Division, the Governor recommends reducing SAPTA's federal revenues by \$401,610 over the 2013-15 biennium.

In April 2012, the Audit Division of the Legislative Counsel Bureau completed an audit of SAPTA (LA 12-15), concentrating on the agency's subrecipient oversight activities. Based on the findings in the audit, the Governor recommends General Fund appropriations of \$121,681 for a Management Analyst II position to provide oversight and supervision of two positions within a new grant-monitoring group, which would be responsible for the timeliness and completion of audits of SAPTA's subgrantees. The Governor also recommends reducing Block Grant category expenditures of \$109,219 to fund a new Quality Assurance Specialist II position that would oversee the program monitoring for timeliness and follow-up by SAPTA staff.

The Governor recommends reducing General Fund appropriations for SAPTA by \$6.4 million over the 2013-15 biennium. The recommended reduction is based upon the projection that SAPTA service providers will receive direct reimbursement for serving clients newly eligible for Medicaid under the ACA.

FAMILY PRESERVATION PROGRAM

The Family Preservation Program provides assistance to low-income families caring for individuals with developmental disabilities in their homes. Additional General Fund appropriations of \$56,100 in FY 2014 and \$157,828 in FY 2015 are recommended to assist 45 low-income families statewide with monthly assistance payments of an additional \$374. The Governor also recommends the continued use of \$1.2 million of tobacco settlement revenue each year from the Healthy Nevada Fund. The Governor recommends total program funding of \$5.6 million over the biennium.

RURAL CLINICS PROGRAM

The Rural Clinics program provides mental health services to all age groups in Nevada's 14 rural counties through 8 full service clinics, 4 partial service clinics and 3 itinerant clinics.

As discussed in the overview section, due to expanded Medicaid eligibility, increases to the FMAP rate and medication cost decreases, the Governor recommends decreases in General Fund appropriations for Rural Clinics totaling \$4.1 million over the 2013-15 biennium. The decreases to budgeted appropriations are offset by additional federal Medicaid revenues.

The Governor recommends the addition of a Management Analyst II position and an Administrative Assistant II position to assist with the pharmacy patient assistance programs, which provide medications to individuals who cannot afford them. The Governor recommends General Fund appropriations of \$179,770 over the biennium for these positions.

NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES

Northern Nevada Adult Mental Health Services (NNAMHS) provides numerous outpatient services, including residential support services, group home placements and medication. At the Dini-Townsend Hospital, psychiatric and psychological services are provided to the seriously and chronic mentally ill population in Northern Nevada. The hospital can accommodate up to 70 patients, but is currently budgeted for 50, which includes 10 emergency beds in the Psychiatric Observation Unit (POU).

Due to expanded Medicaid eligibility, increases to the FMAP rate and medication cost decreases, the Governor recommends decreases in General Fund appropriations for NNAMHS totaling \$6.2 million over the 2013-15 biennium. The decreases to appropriations are offset by projected additional federal Medicaid revenues.

To meet projected caseload growth, the Governor recommends funding increases of \$1.2 million over the biennium for NNAMHS, nearly all of which is General Fund appropriations. The funds will provide for an additional part-time Psychiatric Caseworker II for the Mental Health Court in Northern Nevada, help support outpatient services and medication clinic caseload and Supported Living Arrangements caseloads.

Due to continued difficulty in hiring Psychiatrists as state employees, the Governor recommends eliminating three Senior Psychiatrists positions (2.02 FTE) and using these cost savings to hire contract Psychiatrists. The Governor also recommends contracting with a Psychiatric Nurse and an Administrative Assistant on a part-time basis to provide after-hours medical clearance to support the Psychiatric Assessment Services/Psychiatric Observation Unit and inpatient units to reduce inappropriate use of the emergency rooms. The Governor recommends \$136,674 in additional General Fund appropriations to fund these positions over the biennium.

Due to the Olmstead Decision, NNAMHS is required to place five youths that will return from out-of-state (as adults) in a community setting. To provide necessary mental health treatment and high levels of supervision to maintain a safe environment, the Governor recommends General Funds of \$1.7 million for the biennium to contract with providers for residential services.

SOUTHERN NEVADA ADULT MENTAL HEALTH SERVICES

Southern Nevada Adult Mental Health Services (SNAMHS) operates eight sites in Clark County and surrounding areas to provide outpatient services and psychiatric and psychological inpatient services to the seriously and chronic mentally ill, including the Rawson-Neal Psychiatric Hospital. The hospital has been approved for 289 beds, but has been budgeted for 190 beds, which includes 30 beds for the Psychiatric Observation Unit (POU).

Due to expanded Medicaid eligibility, increases to the FMAP rate and medication cost decreases, the Governor recommends decreases in General Fund appropriations for SNAMHS totaling \$16.5 million over the 2013-15 biennium. The decreases to appropriations are projected to be offset by additional federal Medicaid revenues.

The Governor recommends closing the Las Vegas downtown outpatient clinic and moving these services to the SNAMHS campus on West Charleston. Moving these services to the West Charleston campus is expected to allow SNAMHS to divert individuals from local hospital emergency rooms and provide quicker access to inpatient and outpatient psychiatric services by co-locating medical clearance and urgent care programs. A total of \$721,174 in operating expenditure savings are projected over the 2013-15 biennium. Savings are recommended to offset a portion of the \$1 million recommended to pay for two Senior Psychiatrists and two Accounting Assistants to staff increased caseload and operating hours. In addition to transferring current clinic staff to the hospital, the Governor recommends additional General Fund appropriations of \$600,000 to fund psychiatric services by University of Nevada School of Medicine residents outside of regular operating hours and for the proposed 24-hour Urgent Care Center.

The Governor recommends the elimination of a part-time Senior Psychiatrist position and a full-time Medical Program Coordinator position to continue funding of a contracted Statewide Psychiatric Medical Director. The Governor recommends funding this contract at \$672,858 for the biennium.

The Governor recommends \$825,106 in federal grant funds from the United States Department of Housing and Urban Development (HUD) for after care housing and treatment for 38 clients who would qualify for treatment under this program.

FACILITY FOR THE MENTAL OFFENDER – LAKE'S CROSSING CENTER

The Lake's Crossing Center provides statewide forensic mental health services in a maximum-security facility to mentally disordered offenders who are referred from the court system so their competency can be restored or who require mental health services in a secure setting. Lake's Crossing Center is Nevada's only facility for this purpose and, therefore, serves people from throughout the state. The facility has 56 beds with an additional 10 beds available in the annex (located at the Dini-Townsend Psychiatric Hospital).

Although the Governor recommends no changes to the number of staff employed by Lake's Crossing Center, additional General Fund appropriations of \$309,338 over the 2013-15 biennium are recommended to fund overtime, holiday and shift differential pay.

DEVELOPMENTAL SERVICES

The division provides an array of services to people with developmental disabilities and related conditions through three regional centers: Sierra Regional Center (SRC) in the Reno-Sparks area; Desert Regional Center (DRC) in Clark County and surrounding areas; and the Rural Regional Center (RRC) for the remainder of the state. The Governor recommends funding for developmental services (including the Family Preservation Program) during the 2013-15 biennium of \$306.6 million, a 9.3 percent increase over the 2011-13 legislatively approved total of \$280.6 million. The Governor recommends General Fund support of \$151.8 million for the 2013-15 biennium, a decrease of \$297,806 or 0.2 percent when compared to the General Fund support approved for the 2011-13 biennium. As noted in the overview for MHDS, these budgets are recommended to be transferred to the Aging and Disability Services Division.

To meet projected caseload growth the Governor recommends total funding increases of \$28.7 million over the biennium, of which \$16.2 million is General Funds. Included in these amounts is \$5.3 million in funding for 56 positions which are shown in the following table:

| Position Title | Location - Purpose | FY 2014 Recommended Funding | FY 2015 Recommended Funding |
|-------------------------------------|---|-----------------------------------|-----------------------------------|
| Training Officer II | | 54,308 | 76,540 |
| Management Analyst II | 1 | 52,249 | 73,704 |
| Accounting Assistant III (2) | | 56,457 | 96,597 |
| Administrative Assistant III (3) | 1 | 101,789 | 145,493 |
| Administrative Assistant II (2) | | 45,901 | 90,450 |
| Personnel Technician II | | 33,930 | 48,498 |
| Social Services Manager IV |] <u>.</u> | - | 74,716 |
| Auditor II | Desert Regional Center - Caseload Growth | 43,258 | 61,454 |
| Psychiatric Nurse II (2) | Cascidad Growth | 99,760 | 192,390 |
| Mental Health Counselor II | | 63,724 | 89,387 |
| Developmental Specialist IV (3) | | 154,807 | 266,822 |
| Developmental Specialist III (20) | | 606,631 | 1,258,263 |
| IT Professional II | | 48,413 | 68,442 |
| IT Professional III | | 52,249 | 73,704 |
| Health Information Director | | 63,724 | 86,746 |
| Developmental Support Tech III (10) | Desert Regional Center - | 278,409 | 476,063 |
| Mental Health Counselor II | Dual Diagnosis Clients | 47,748 | 67,461 |
| Developmental Specialist IV (3.51) | Sierra Regional Center - Caseload Growth | 89,778 | 198,576 |
| Total Recommended Expenditures | | 1,893,137 | 3,445,305 |

The Governor recommends a one-shot General Fund appropriation of \$938,119 (plus \$579,591 in federal Medicaid reimbursements) for a statewide case management system for the developmental services programs. The system is projected to satisfy federal and state mandates, provide cost savings and increase federal revenues, enhance business practices between private and public partnerships and decrease wait times for services as the population grows. Though the one-shot is recommended in the Desert Regional Center's budget, the new system is planned to be implemented statewide.

CAPITAL IMPROVEMENT PROJECTS

A total of \$4.6 million in bond funds are recommended for MHDS projects. Three projects at a cost of \$2.7 million are recommended for Lake's Crossing that include upgrading the security control room, replacing existing boilers, replacing the fire alarm system, upgrading the sprinkler system, replacing damaged and non-fire rated doors, reconstructing walls and smoke barriers, providing upgrades to the emergency exit lighting system and providing seismic upgrades to the mechanical, electrical and fire sprinkler systems. The Governor recommends replacing the HVAC units in buildings 1307, 1308, 1309 and 1310 at the Desert Regional Center and replacing the existing emergency generators with a new diesel generator at a total cost of \$1.6 million. The existing HVAC system in building 603 at the Sierra Regional Center is recommended for replacement at a cost of \$48,973. Finally, the Governor recommends \$240,266 for a project to study, evaluate and develop plans through construction documents to replace key components of the sewer lines at the West Charleston campus in Las Vegas, which houses SNAMHS, the Desert Regional Center and the Southern Nevada Child and Adolescent Services programs.

MHDS programs are also included in several statewide roofing, paving, fire and life safety, and Americans with Disabilities Act projects.

DIVISION OF CHILD AND FAMILY SERVICES

The Division of Child and Family Services (DCFS) provides a wide array of services to children and adolescents and is organized into three major program areas: Child Welfare Services, Children's Mental/Behavioral Health Services, and Juvenile Justice Services. The Executive Budget recommends total funds of \$461.1 million for the 2013-15 biennium, an increase of \$18.7 million, or 4.2 percent, when compared to the total funding approved by the 2011 Legislature for the 2011-13 biennium. The General Fund portion of the budget for DCFS is recommended to increase by \$11.6 million from the 2013-15 biennium, an increase of 5.2 percent when compared to the approved amounts for the 2011-13 biennium.

CHILD AND FAMILY SERVICES ADMINISTRATION

This account is the central administrative account of the division and contains the unclassified Administrator, the division's four unclassified Deputy Administrators, and central fiscal, accounting, and personnel staff. The recommended General Fund portion of the budget in FY 2014 is \$5.4 million, an increase of 7.5 percent compared to FY 2013. In FY 2015, the recommended General Fund totals \$5.6 million, a 3.4 percent increase from FY 2014.

<u>The Executive Budget</u> recommends various position transfers between the division's budgets to align position duties and responsibilities with the correct funding source and budget account.

UNITY/SACWIS

The UNITY/SACWIS budget represents the division's compliance with a federal mandate to automate foster care and adoption information systems. The Statewide Adoption and Child Welfare Information System (SACWIS) project, now referred to as Unified Nevada Information Technology for Youth (UNITY) began in FY 1995 with business process reengineering and became fully operational statewide in September 2003. The 2011 Legislature approved a \$3.9 million Technology Investment Request to enhance the management tools of the UNITY system; the project is expected to make the system more user-friendly, streamlined and capable of producing adequate management reports.

The recommended General Fund portion of the budget in FY 2014 is \$3.2 million, a decrease of 24 percent compared to FY 2013. In FY 2015 the recommended General Fund totals \$3.1 million, a 3.7 percent decrease from FY 2014. The Governor recommends \$920,614 over the 2013-15 biennium to replace computer hardware and associated software per the Enterprise Information Technology Services (EITS) recommended replacement schedule.

CHILD WELFARE INTEGRATION

Pursuant to Senate Bill 447 of the 2011 Legislative Session, the division is required to award block grants to counties whose populations are 100,000 or more (currently Clark and Washoe Counties) for the provision of child welfare services in those counties. The bill allows the counties that receive the block grants to use the money without restriction for child welfare services and without requirement to revert unspent money to the General Fund. The bill also requires the division to provide a categorical grant to the same counties for the cost of adoption assistance services within the counties. Senate Bill 447 further provides for a performance improvement plan to be implemented by the division, requiring each county and the division itself to submit improvement plans biennially to improve the safety, permanency and well-being of children in the agencies' care. An additional provision of the bill requires the division to administer an incentive program for the counties that provide child welfare services, and to make fiscal incentive payments based upon the counties' achievement of specific

goals for improvement proposed by the counties and approved by the division. The provisions regarding the fiscal incentive plan include a delayed implementation schedule, with all budgeted incentive plan funding to be provided to the county child welfare agencies during the 2011-13 biennium regardless of achievement of goals. However, beginning in FY 2014 the incentive payment awarded to the counties will be based on the percentage of completion of the goals established for FY 2013.

Washoe County Integration

This account was created in 2005 as part of the division's budget realignment process to isolate the costs of child welfare integration for Washoe County into a separate budget account. The recommended General Fund portion of the budget in FY 2014 is \$15.3 million, an increase of 7.1 percent compared to FY 2013. In FY 2015, recommended General Funds total \$15.8 million, an increase of 3.4 percent compared to FY 2014. The fiscal incentive portion of the recommended budget is \$1.8 million in each year of the 2013-15 biennium.

The Governor recommends \$2 million in FY 2014 and \$3.1 million in FY 2015 in General Funds and federal funds for projected caseload growth in adoption subsidies in Washoe County. As noted above, adoption assistance services are established as a categorical grant; any unspent categorical grant funds must be reverted to the State General Fund per Senate Bill 447.

Clark County Integration

This budget was established during the 2001-03 biennium to segregate costs related to the integration of child welfare services and was renamed Clark County Integration in the 2005 Legislative Session. The budget funds the continuation of child welfare integration for Clark County. The recommended General Fund portion of the budget in FY 2014 is \$45.1 million, an increase of 5.5 percent compared to FY 2013. In FY 2015, recommended General Funds total \$46.7 million, an increase of 3.6 percent compared to FY 2014. The fiscal incentive portion of the recommended budget is \$5.3 million in each year of the 2013-15 biennium.

The Governor recommends \$4.8 million in FY 2014 and \$8.2 million in FY 2015 in General Funds and federal funds for projected caseload growth in adoption subsidies in Clark County. As noted above, adoption assistance services are established as a categorical grant; any unspent categorical grant funds must be reverted to the State General Fund per Senate Bill 447.

RURAL CHILD WELFARE

Historically, this budget has contained funding for the placement costs of children in the division's care because of abuse, neglect or behavioral/emotional problems. Adoption subsidies for the rural region are also paid from this account to adoptive parents of special needs children. The recommended budget reflects foster care placement costs and subsidized adoption costs for the rural region. The General Fund appropriation for FY 2014 of \$6.2 million represents a 3 percent increase from General Fund support approved for FY 2013. For FY 2015, the recommended General Fund amount of \$7 million represents a 13.4 percent increase when compared to the FY 2014 amount.

General Funds and federal funding are recommended in The Executive Budget in the amounts of \$1.1 million in FY 2014 and \$1.7 million in FY 2015 to fund caseload increases in adoption subsidies, foster and specialized foster care placements and court jurisdiction foster care. The latter caseload was first established in FY 2012 with passage of Assembly Bill 350 by the 2011 Legislature, which provides that a juvenile court may continue to retain jurisdiction over a child from ages 18 until 21 if the child so requests. The bill further requires the agency that provides child welfare services to provide services and monetary payments to the child while under court jurisdiction.

The Executive Budget continues the allocation of child protective services' (CPS) costs to the rural counties with the recommendation of \$4.2 million in county reimbursements over the 2013-15 biennium. Rural county reimbursements for CPS were established in the 2011-13 biennium with the passage of Senate Bill 480 of the 2011 Legislative Session; Clark and Washoe Counties have historically funded the costs and provided CPS in their jurisdictions.

YOUTH ALTERNATIVE PLACEMENT

This budget provides support for the China Spring and Aurora Pines youth camps in Douglas County and the Spring Mountain youth camp in Clark County. County participation revenue is also continued in this budget and represents assessments collected from all counties, except Clark, for the operation of the China Spring and Aurora Pines youth camps. The Executive Budget recommends additional General Funds of \$1.3 million over the 2013-15 biennium to support the China Spring/Aurora Pines youth camps, reducing county assessments by the same amount.

JUVENILE CORRECTIONAL FACILITY

Summit View Youth Correctional Center (SVYCC) is a maximum-security youth correctional facility located near the Las Vegas urban center. Action taken during the 26th Special Session (2010) closed the facility and youth were transferred to the Nevada Youth Training Center (NYTC) in Elko, paroled to the Youth Parole Bureau, or transferred to local jurisdictions. The Executive Budget recommends the reopening of SVYCC in October 2013, with the transfer of up to 50 state correctional beds from NYTC. The request includes contract costs for a private vendor to operate the facility, plus start-up costs necessary to reopen SVYCC, for a total of \$5.1 million over the 2013-15 biennium. These costs would be funded by General Funds of \$1.4 million, and personnel and operating savings of \$3.7 million from the elimination of 29 positions at NYTC.

Additionally, <u>The Executive Budget</u> recommends the combining of SVYCC, NYTC, and Caliente Youth Center into a single Correctional Facilities budget. This proposal is cost neutral and is recommended to provide flexibility for the three juvenile correctional facilities. If approved, the combined budget would include General Fund support of \$37.5 million over the 2013-15 biennium.

CALIENTE YOUTH CENTER

The Caliente Youth Center is a co-educational juvenile residential correctional facility that serves youth between the ages of 12 and 18 and has a capacity of 140 youth. The Governor recommends General Funds of \$225,918 in FY 2014 for deferred maintenance costs for the campus buildings. Additionally, \$80,475 in General Fund appropriations are recommended to fund a new Food Service Cook position to provide adequate staffing levels in the food service department.

NEVADA YOUTH TRAINING CENTER

The Nevada Youth Training Center (NYTC) is a residential juvenile correctional facility for male youth between 12 and 18 years of age, located in Elko. As noted above, the Governor recommends transferring funding for 50 correctional beds to Summit View Youth Correctional Center (SVYCC), reducing the bed capacity at NYTC from 110 beds to 60 beds. Additionally, the Governor recommends General Funds of \$250,000 in FY 2014 for replacement of the facility's telephone system.

Youth Parole Services

The Nevada Youth Parole Bureau is charged with supervising post-incarcerated youth within their respective communities, and facilitating reintegration processes to assist the youth in adjusting to and prospering within their communities. Pursuant to Senate Bill 476 of the 2011 Legislative Session, The Executive Budget recommends continued county assessments for the costs of the Youth Parole Bureau, which represent \$5.7 million of the total \$11.4 million budget over the 2013-15 biennium.

NORTHERN NEVADA CHILD AND ADOLESCENT SERVICES

This budget provides a continuum of mental health services to emotionally disturbed children, adolescents and their families. The recommended General Fund portion of the budget in FY 2014 is \$3.2 million, an increase of 6.2 percent compared to FY 2013. In FY 2015, the recommended General Fund totals \$3.3 million, a 1.9 percent increase from FY 2014.

<u>The Executive Budget</u> recommends tobacco settlement funds totaling \$252,278 over the 2013-15 biennium to fund parent management training, with the goal of decreasing oppositional, aggressive and antisocial behavior in children; and to fund group treatment and assist children receiving wraparound services. General Funds of \$284,747 are recommended over the 2013-15 biennium for deferred maintenance projects on the Northern Nevada Child and Adolescent Services campus.

SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES

This budget provides a comprehensive continuum of behavioral health care services for emotionally disturbed children and adolescents from birth through 18 years of age. General Fund support is recommended to decrease from \$10.7 million in FY 2013 to \$9.9 million in FY 2014, a 7.7 percent decrease. For FY 2015, \$10.3 million is recommended, a 4.4 percent increase from FY 2014.

The Executive Budget recommends tobacco settlement funds totaling \$745,236 over the 2013-15 biennium to fund parent management training and a mobile crisis unit for Clark County. General Funds of \$115,147 are recommended over the 2013-15 biennium for deferred maintenance projects on the Southern Nevada Child and Adolescent Services campus. Additionally, the Governor recommends four new Psychiatric Nurse positions to comply with federal regulations on staffing ratios, a new Management Analyst position for the southern regional mental health services billing unit, and the conversion of two Mental Health Counselor positions from contractual staff to state positions.

DEPARTMENT OF EMPLOYMENT, TRAINING AND REHABILITATION

The Department of Employment, Training and Rehabilitation (DETR) serves all Nevada citizens by facilitating the training and stability of a qualified workforce that supports a growing and diverse economy, and enforces rules that protect citizens from workplace and personal discrimination.

The department is the lead state agency responsible for the administration of the Workforce Investment Act in Nevada, including serving as staff to the Governor's Workforce Investment Board, which oversees the state's workforce investment system, Nevada JobConnect. The department consists of the Director's Office and centralized administrative services, the Employment Security Division, the Rehabilitation Division, the Research and Analysis Bureau, the Information Development and Processing Division, and the Nevada Equal Rights Commission.

Funding for the department includes, but is not limited to, federal funds from the United States Departments of Labor and Education, the Social Security Administration, a surcharge of 0.05 percent of a capped portion of wages paid by Nevada employers, to support employment and training programs. General Fund appropriations are provided to the Equal Rights Commission to supplement contract payments from the federal Equal Employment Opportunity Commission. General Fund appropriations are also provided to the Vocational Rehabilitation program and to the Bureau of Services to the Blind and Visually Impaired, primarily to match federal Section 110 funding.

The Governor proposes to increase the department's General Fund appropriations for the upcoming biennium by \$279,697, or 3.8 percent, to \$7.7 million over the amounts appropriated by the Legislature for the 2011-13 biennium. Total recommended funding is \$339.5 million for the upcoming biennium, net of interagency transfers. In comparison, total funding legislatively approved for the 2011-13 biennium was \$333.7 million, net of interagency transfers.

<u>Unemployment Rates, Trust Fund Borrowing and Interest Payments</u>

Nevada's unemployment rate reached 14.5 percent in December 2010; however, it has declined to an average of 13.5 percent for 2011 and then 11.6 percent for 2012. These prolonged periods of high unemployment depleted Nevada's Unemployment Insurance (UI) Trust Fund resulting in the need to borrow from the federal government to pay UI benefits. Using General Fund appropriations, the Employment Security Division paid \$46.5 million in interest to the federal government on the UI Trust Fund loan for the 2011-13 biennium. To pay expected Trust Fund interest payments of \$31.2 million for the upcoming biennium, the Governor recommends a bill draft request (BDR) that will allow the Employment Security Division Administrator to impose a special assessment on employers to fund these interest payments until the loan is repaid. The Governor also recommends a second BDR that will allow the Employment Security Division to request the State Board of Finance to issue special obligation bonds of the state for the purpose of paying off the outstanding UI Trust Fund loan balance and provide the option to borrow funds towards moving the UI Trust Fund to full solvency. If the UI Trust Fund loan is paid off with the proceeds from the special obligation bonds, the special assessment revenues will be used to pay the bond interest only and a solvency assessment imposed on employers, provided for in the second BDR, would be used to pay the principal on the bonds. According to the latest monthly report provided by the Employment Security Division, the UI Trust Fund loan balance was \$676.6 million as of December 31, 2012. Based on current estimates, the department projects the loan balance will be \$285.1 million on June 30, 2015.

DETR ADMINISTRATIVE SERVICES

The Governor recommends transferring the Workforce Solutions Unit (WSU) from the Employment Security Division to the Administrative Services Division. The WSU will provide support, grant management and program analysis for the statewide Industry Sector Councils and serve as a liaison between the sector councils, the department, and other stakeholders to monitor the alignment of the department's workforce investment initiatives with the Governor's Office of Economic Development goals. Since the WSU provides services across the department, the Governor recommends changing the funding resources to operate the WSU (\$1.1 million) from federal funds to the department-wide cost allocation plan. Included in this recommendation is the transfer of five permanent positions and funding for intermittent positions.

INFORMATION DEVELOPMENT AND PROCESSING

The Governor recommends additional cost allocation revenues of \$712,800 over the biennium for contract services (Capgemini) to provide ongoing technical expertise for an additional 24 months after the implementation of the Nevada Unemployment Insurance modernization project (UInv). The recommended contract is expected to provide technical assistance and knowledge transfer regarding the new system architecture, design, and new programming languages that are yet to be fully developed within DETR's staff. Three contract maintenance technicians will assist DETR staff as needed to implement new UI requirements not part of the original Capgemini contract.

Also, due to the increased duties and responsibilities related to the implementation of UInv, the Governor recommends cost allocation revenues \$147,724 for a new IT Manager II position that will be responsible for IT security.

RESEARCH AND ANALYSIS

The Governor recommends cost allocation revenues of \$98,850 over the biennium to fund an intermittent Public Service Intern position.

The Governor also recommends cost allocation revenues of \$88,656 to enable the Research and Analysis Bureau to purchase a software subscription service from the Conference Board. Help Wanted OnLine (HWOL) provides access to economic data through a licensed software product, which would provide information on all help-wanted announcements posted on-line, allowing the agency to identify in-demand occupations at the state and local levels on a real-time basis.

Finally, due to reduced federal funding, the Governor recommends the elimination of a vacant Administrative Assistant II position, thereby reducing this budget by \$88,632 over the upcoming biennium.

NEVADA EQUAL RIGHTS COMMISSION

The Governor's recommended budget includes General Fund appropriations of \$25,868 over the 2013-15 biennium for additional building rent due to the Nevada Equal Rights Commission's (NERC) planned office relocation in Northern Nevada. Total recommended funding for NERC is \$1.4 million per fiscal year, of which approximately \$985,000 is General Fund.

REHABILITATION DIVISION

The Rehabilitation Division includes the Bureau of Vocational Rehabilitation (VR) and the Bureau of Services to the Blind and Visually Impaired (BSBVI), which provide vocational rehabilitation services leading to employment and independent living for persons who are disabled, blind or visually impaired. The division also includes the Bureau of Disability Adjudication, which makes medical determinations of eligibility for Social Security Administration disability benefit payment programs, and the Blind Business Enterprise (BEN) program, which provides funding and services for blind individuals seeking self-sufficiency through the opportunity to operate snack bars and vending operations in federal, state and municipal buildings statewide.

The Rehabilitation Division also includes the Client Assistance Program (CAP), which provides information on benefits and services under the Americans with Disabilities Act and the Rehabilitation Act and provides advocacy and mediation services to individuals statewide. However, effective November 9, 2012, the Governor transferred the program to a nonprofit entity, the Nevada Disability Advocacy and Law Center (NDALC). The transfer of this program to NDALC results in a recommendation to eliminate this budget account and two positions. DETR is passing through the federal funding that previously supported the CAP directly to NDALC to perform the same services.

The Governor recommends the merger of the Bureau of Services to the Blind and Visually Impaired budget account with the Vocational Rehabilitation budget account. Thirty positions would transfer to the Vocational Rehabilitation account if this recommendation were approved.

Federal Section 110 grant funds provide 78.9 percent (\$32.1 million) of the Governor's total recommended biennial funding (\$40.7 million) for the VR and BSBVI programs. The federal Section 110 grant program requires the state to provide matching support totaling 21.3 percent. To help satisfy this matching requirement, the Governor recommends \$5.7 million in General Fund appropriations for the biennium. The balance of the state's match is made through related expenditures provided by other state programs and resources.

The Governor recommends that the Carson City office of the Blind Business Enterprise program, Vocational Rehabilitation and Rehabilitation Administration relocate due to deferred maintenance issues. To pay for the costs of the move, the Governor recommends \$59,656 in cost allocation revenues, BEN reserves of \$15,054 and reductions in other expenditures of \$5,006.

The Governor recommends transferring the Office of Disability Employment Policy (ODEP) Chief position from the Rehabilitation Administration account to the Vocational Rehabilitation account. Currently this position performs business development functions as part of the larger DETR efforts in the areas of workforce and economic development. To fund personnel and other costs associated with the ODEP Chief, the Governor recommends reducing Vocational Rehabilitation case service expenditures by \$247,664 for the biennium. The Governor also recommends a total of \$18,717 for a salary and benefits increase for the unclassified ODEP Chief position.

The Governor recommends \$486,698 of federal Social Security revenues to hire an additional Senior Physician in each year of the biennium to reduce delays in the Disability Adjudication program. Additionally, the Governor recommends reducing Social Security funding by approximately \$2 million for the biennium due to the continued hiring freeze imposed by the Social Security Administration. Twenty-three currently vacant positions (20 Disability Adjudicators and 3 Administrative Assistants) will be eliminated for FY 2014; however, 9 of those Disability Adjudicator positions are recommended for reinstatement in FY 2015.

EMPLOYMENT SECURITY DIVISION

The Employment Security Division (ESD) is responsible for the administration of the Unemployment Insurance program and numerous state and federally funded workforce investment programs that connect Nevada employers with a skilled and qualified workforce.

The Governor recommends an additional \$5.1 million of Career Enhancement Program (CEP) expenditures, funded from reserves, over the biennium to support client participation in customized training programs recommended by industry sector councils, and programs such as Prisoner Reentry, Train Employees Now and Silver State Works. This recommendation increases total Client Services expenditures to \$5.5 million each year, 61.5 percent greater than actual FY 2012 expenditures of \$3.4 million.

As shown in the following table, the Governor recommends adding ten new positions, at a total biennial cost of \$1.2 million, funded with federal revenues and CEP wage assessments.

| Position Title | Section and Function | FY 2014 Recommended Funding | FY 2015 Recommended Funding |
|-----------------------------|--|-----------------------------------|-----------------------------------|
| Business Process Analyst I | F 1 10 11 11 | 51,649 | 68,168 |
| UI Representative II | Employment Security Integrity Unit to reduce fraud and | 38,881 | 51,726 |
| UI Representative II | improper payments | 38,881 | 51,726 |
| UI Representative IV | | 44,585 | 59,208 |
| Business Process Analyst I | Unemployment Insurance | 55,520 | 70,810 |
| Business Process Analyst I | Support Service Unit to provide technical, legal and policy | 55,520 | 70,810 |
| Business Process Analyst II | support | 59,837 | 76,150 |
| ESD Manager II | Northern Telephonic Intake Center supervision | 57,594 | 73,398 |
| ESD Program Specialist II | Workforce Investment Support Services for policy development | 58,677 | 73,267 |
| ESD Program Specialist II | and technical assistance | 58,678 | 73,268 |
| Total Recommended Funding | | 519,822 | 668,530 |

To accommodate fluctuating workloads for the Unemployment Insurance and Re-Employment and Eligibility Assessment programs, the Governor recommends funding of \$16.6 million to support approximately 147 intermittent positions over the biennium. Nineteen positions (\$1.1 million) would be funded by transfers from the ESD Special Fund and approximately 128 positions (\$15.5 million) would be funded by federal administrative cost allowance revenues. Actual expenditures incurred for intermittent workers totaled \$9.5 million in FY 2012.

The Governor has recommended \$743,507 over the biennium for new and replacement equipment for ESD. Included in this recommendation is \$269,817 for 153 personal computers and laptops with related software and accessories, \$97,616 for 67 printers, \$128,000 for 4 scanners, \$53,593 for telephone system equipment and \$134,475 for chairs, furniture and modular work stations.

UNEMPLOYMENT INSURANCE MODERNIZATION PROJECT

Implementation of the Unemployment Insurance (UI) Modernization system, which is replacing the current 30-year-old UI contributions (tax) and benefit system used to process wage, contribution and benefit information, is scheduled for June 2013. For Phase II Implementation, the Governor recommends \$3.2 million of federal Reed Act dollars in FY 2014 to initiate the implementation and business transformation criteria identified in Phase I.

| | 2011-2012 Actual | 2012-2013 Work Program | 2013-2014 GOVERNOR RECOMMENDS | % Change | 2014-2015 GOVERNOR RECOMMENDS | % Change |
|---|---------------------|---------------------------|-------------------------------------|-------------|-------------------------------------|-------------|
| HUMAN SERVICES | | | | | | |
| HEALTH AND HUMAN SERVICES - DIRECTOR' | S OFFICE | | | | | |
| HHS-DO - ADMINISTRATION | 3,405,975 | 6,090,231 | 4,089,703 | -32.85 | 1,680,879 | -58.90 |
| GENERAL FUND | 1,300,361 | 1,292,319 | 1,122,289 | -13.16 | 1,196,527 | 6.61 |
| BALANCE FORWARD | -4,673 | 14,916 | | | | |
| FEDERAL FUND | 1,929,029 | 4,275,889 | 1,790,688 | -58.12 | 125,000 | -93.02 |
| INTERAGENCY TRANSFER | 225,123 | 271,833 | 347,794 | 27.94 | 359,352 | 3.32 |
| OTHER FUND | 8,527 | 235,274 | 828,932 | 252.33 | | |
| REVERSIONS | -52,392 | | | | | |
| HHS-DO - GRANTS MANAGEMENT UNIT | 24,939,749 | 26,186,852 | 28,956,122 | 10.58 | 28,979,539 | .08 |
| GENERAL FUND | 2,749,545 | 337,003 | 160,313 | -52.43 | 161,286 | .61 |
| BALANCE FORWARD | 66,641 | 40,000 | | | | |
| FEDERAL FUND | 18,659,774 | 18,828,132 | 18,219,376 | -3.23 | 18,224,026 | .03 |
| INTERAGENCY TRANSFER | 3,285,209 | 6,901,717 | 10,576,433 | 53.24 | 10,594,227 | .17 |
| OTHER FUND | 230,000 | 80,000 | | | | |
| REVERSIONS | -51,420 | | | | | |
| HHS-DO - PROBLEM GAMBLING | 745,880 | 1,361,786 | 2,054,491 | 50.87 | 1,959,002 | -4.65 |
| BALANCE FORWARD | 2,367 | 591,682 | | | 480,356 | -18.82 |
| OTHER FUND | 743,513 | 770,104 | 1,462,809 | 89.95 | 1,478,646 | 1.08 |
| HHS-DO - CHILDREN'S TRUST ACCOUNT | 492,163 | 759,841 | 746,875 | -1.71 | 782,660 | 4.79 |
| BALANCE FORWARD | 8,030 | 206,289 | 206,289 | -1.71 | 248,271 | 20.35 |
| OTHER FUND | 484,133 | 553,552 | | -2.34 | 534,389 | -1.15 |
| HHS-DO - INDIGENT SUPPLEMENTAL ACCOUNT | 19,250,596 | 21,173,334 | 21,014,650 | 75 | 21,014,650 | .00 |
| BALANCE FORWARD | -1,780,616 | 1,780,616 | | | | |
| OTHER FUND | 21,031,212 | 19,392,718 | 21,014,650 | 8.36 | 21,014,650 | |
| HHS-DO - HEALTHY NEVADA FUND | 2,755,784 | 10,145,641 | 10,001,042 | -1.43 | 10,015,734 | .15_ |
| OTHER FUND | 2,755,784 | 10,145,641 | 10,001,042 | -1.43 | 10,015,734 | .15 |
| HHS-DO - PUBLIC DEFENDER | 3,241,388 | 2,688,551 | 2,728,446 | 1.48 | 2,724,208 | 16 |
| GENERAL FUND | 1,150,156 | 1,158,235 | 1,089,095 | -5.97 | 1,088,264 | 08 |
| FEDERAL FUND | 214,856 | 58,267 | | -0.01 | 1,000,204 | 00 |
| INTERIM FINANCE | 214,000 | 501 | | | | |
| OTHER FUND | 1,939,432 | 1,471,548 | 1,639,351 | 11.40 | 1,635,944 | 21 |
| REVERSIONS | -63,056 | 1,47 1,040 | 1,000,001 | 11.40 | 1,000,044 | .21 |
| TOURISM - INDIAN COMMISSION | 213,167 | 192,937 | 193,885 | .49 | 196,732 | 1.47 |
| GENERAL FUND | 137,215 | 137,160 | | 5.88 | 147,549 | 1.60 |
| INTERAGENCY TRANSFER | 69,443 | 55,777 | | -12.75 | 49,183 | 1.07 |
| OTHER FUND | 6,994 | 55,777 | 40,004 | -12.73 | 49,103 | 1.07 |
| REVERSIONS | -485 | | | | | |
| IIII DO DEVELOPMENTA DIGARIA | E44.04= | 050 000 | 202 22= | 4.01 | 202 222 | 0.0 |
| HHS-DO - DEVELOPMENTAL DISABILITIES | 544,345 | 650,622 | | 1.94 | 663,230 | .00 |
| GENERAL FUND | 162,660 | 162,660 | | 2.01 | 165,926 | .00 |
| BALANCE FORWARD | -212 | 213 | | | | |
| FEDERAL FUND | 408,086 | 487,749 | 497,304 | 1.96 | 497,304 | |
| OTHER FUND | 385 | | | | | |
| REVERSIONS | -26,574 | | | | | |

| | 2011-2012 Actual | 2012-2013 Work Program | 2013-2014 GOVERNOR RECOMMENDS | % Change | 2014-2015 GOVERNOR RECOMMENDS | % Change |
|--|---------------------|---------------------------|-------------------------------------|-------------|-------------------------------------|-------------|
| HHS-DO - CONSUMER HEALTH ASSISTANCE | 1,280,665 | 1,862,191 | 1,719,041 | -7.69 | 1,177,668 | -31.49 |
| GENERAL FUND | 304,771 | 309,687 | 295,456 | -4.60 | 292,944 | 85 |
| BALANCE FORWARD | -58,067 | 80,239 | 80,239 | | | |
| FEDERAL FUND | 331,438 | 370,000 | 447,385 | 20.91 | 455,355 | 1.78 |
| INTERAGENCY TRANSFER | 228,234 | 584,121 | 557,524 | -4.55 | 87,643 | -84.28 |
| OTHER FUND | 569,818 | 518,144 | 338,437 | -34.68 | 341,726 | .97 |
| REVERSIONS | -95,529 | | | | | |
| TOTAL HEALTH AND HUMAN SERVICES - DIRECTOR'S OFFICE | 56,869,712 | 71,111,986 | 72,167,482 | 1.48 | 69,194,302 | -4.12 |
| GENERAL FUND | 5,804,708 | 3,397,064 | 2,978,297 | -12.33 | 3,052,496 | 2.49 |
| BALANCE FORWARD | -1,766,530 | 2,713,955 | 878,210 | -67.64 | 728,627 | -17.03 |
| FEDERAL FUND | 21,543,183 | 24,020,037 | 20,954,753 | -12.76 | 19,301,685 | -7.89 |
| INTERAGENCY TRANSFER | 3,808,009 | 7,813,448 | 11,530,415 | 47.57 | 11,090,405 | -3.82 |
| INTERIM FINANCE | | 501 | | | | |
| OTHER FUND | 27,769,798 | 33,166,981 | 35,825,807 | 8.02 | 35,021,089 | -2.25 |
| REVERSIONS | -289,456 | , , | , , | | , , | |
| AGING AND DISABILITY SERVICES | | | | | | |
| HHS-ADSD - TOBACCO SETTLEMENT PROGRAM | 4,383,932 | 5,435,811 | 5,422,841 | 24 | 5,432,024 | .17 |
| INTERAGENCY TRANSFER | 4,383,932 | 5,435,811 | 5,422,841 | 24 | 5,432,024 | .17 |
| HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION | 18,432,039 | 19,560,918 | 20,898,449 | 6.84 | 21,008,944 | .53 |
| GENERAL FUND | 3,999,650 | 4,043,511 | 3,273,342 | -19.05 | 3,250,110 | 71 |
| BALANCE FORWARD | 16,053 | 57,411 | | | | |
| FEDERAL FUND | 11,320,970 | 11,980,095 | 11,457,563 | -4.36 | 11,468,995 | .10 |
| INTERAGENCY TRANSFER | 2,323,497 | 2,716,939 | 5,792,610 | 113.20 | 5,914,905 | 2.11 |
| OTHER FUND | 865,520 | 762,962 | 374,934 | -50.86 | 374,934 | |
| REVERSIONS | -93,651 | | | | | |
| HHS-ADSD - SENIOR RX AND DISABILITY | 2,647,033 | 6,361,031 | 5,007,611 | -21.28 | 5,150,858 | 2.86 |
| GENERAL FUND | 43,603 | 43,396 | 100 | -99.77 | 100 | |
| BALANCE FORWARD | | | 50,000 | | 250,000 | 400.00 |
| INTERAGENCY TRANSFER | 383,882 | 546,689 | | | | |
| OTHER FUND | 2,228,971 | 5,770,946 | 4,957,511 | -14.10 | 4,900,758 | -1.14 |
| REVERSIONS | -9,423 | | | | | |
| HHS-ADSD - HOME AND COMMUNITY BASED SERVICES | 18,571,753 | 21,863,843 | 24,904,554 | 13.91 | 27,230,240 | 9.34 |
| GENERAL FUND | 12,053,662 | 9,664,778 | 11,027,267 | 14.10 | 13,020,715 | 18.08 |
| BALANCE FORWARD | 485,585 | 958,884 | 228,245 | -76.20 | 228,245 | |
| FEDERAL FUND | 484,445 | 567,719 | 403,379 | -28.95 | 403,379 | |
| INTERAGENCY TRANSFER | 6,110,029 | 9,064,682 | 7,309,312 | -19.36 | 7,585,731 | 3.78 |
| OTHER FUND | 1,315,072 | 1,607,780 | 5,936,351 | 269.23 | 5,992,170 | .94 |
| REVERSIONS | -1,877,040 | | | | | |
| HHS-ADSD - IDEA PART C | 4,445,269 | 5,524,018 | 3,972,105 | -28.09 | 3,972,105 | .00 |
| FEDERAL FUND | 4,445,269 | 5,522,518 | 3,972,105 | -28.07 | 3,972,105 | |
| INTERAGENCY TRANSFER | | 1,500 | | | | |

| | 2011-2012 Actual | 2012-2013 Work Program | 2013-2014 GOVERNOR RECOMMENDS | % Change | 2014-2015 GOVERNOR RECOMMENDS | % Change |
|--|---------------------|---------------------------|-------------------------------------|-------------|-------------------------------------|-------------|
| TOTAL AGING AND DISABILITY SERVICES | 48,480,026 | 58,745,621 | 60,205,560 | 2.49 | 62,794,171 | 4.30 |
| GENERAL FUND | 16,096,915 | 13,751,685 | 14,300,709 | 3.99 | 16,270,925 | 13.78 |
| BALANCE FORWARD | 501,638 | 1,016,295 | 278,245 | -72.62 | 478,245 | 71.88 |
| FEDERAL FUND | 16,250,684 | 18,070,332 | 15,833,047 | -12.38 | 15,844,479 | .07 |
| INTERAGENCY TRANSFER | 13,201,340 | 17,765,621 | 18,524,763 | 4.27 | 18,932,660 | 2.20 |
| OTHER FUND | 4,409,563 | 8,141,688 | 11,268,796 | 38.41 | 11,267,862 | 01 |
| REVERSIONS | -1,980,114 | | | | | |
| HEALTH CARE FINANCING & POLICY | 455.050 | | | | | |
| HHS-HCF&P - HIFA HOLDING ACCOUNT | 155,950 | | | | | |
| GENERAL FUND | 96,246 | | | | | |
| INTERAGENCY TRANSFER | 77,975 | | | | | |
| REVERSIONS | -18,271 | | | | | |
| HHS-HCF&P - INTERGOVERNMENTAL TRANSFER PROGRAM | 152,269,914 | 107,698,904 | 112,345,141 | 4.31 | 120,512,322 | 7.27 |
| BALANCE FORWARD | 22,470,043 | 529,220 | | | | |
| OTHER FUND | 129,799,871 | 107,169,684 | 112,345,141 | 4.83 | 120,512,322 | 7.27 |
| HHS-HCF&P - ADMINISTRATION | 80,456,838 | 141,248,635 | 131,583,263 | -6.84 | 122,936,238 | -6.57 |
| GENERAL FUND | 18,678,131 | 20,660,927 | 25,955,691 | 25.63 | 24,645,880 | -5.05 |
| BALANCE FORWARD | 214,023 | 1,669,757 | 969,317 | -41.95 | 1,113,505 | 14.88 |
| FEDERAL FUND | 61,077,689 | 116,266,321 | 101,969,703 | -12.30 | 94,618,152 | -7.21 |
| INTERAGENCY TRANSFER | 279,096 | 354,224 | 530,090 | 49.65 | 551,502 | 4.04 |
| OTHER FUND | 2,828,694 | 2,297,406 | 2,158,462 | -6.05 | 2,007,199 | -7.01 |
| REVERSIONS | -2,620,795 | | | | | |
| HHS-HCF&P - INCREASED QUALITY OF NURSING CARE | 27,724,611 | 31,360,392 | 30,947,740 | -1.32 | 32,204,514 | 4.06 |
| BALANCE FORWARD | -102,496 | 900,000 | 900,000 | | 900,000 | |
| OTHER FUND | 27,827,107 | 30,460,392 | 30,047,740 | -1.35 | 31,304,514 | 4.18 |
| HHS-HCF&P - NEVADA CHECK-UP PROGRAM | 35,980,293 | 34,829,761 | 40,852,569 | 17.29 | 41,376,943 | 1.28 |
| GENERAL FUND | 9,762,817 | 9,032,030 | 9,707,564 | 7.48 | 9,481,729 | -2.33 |
| FEDERAL FUND | 23,802,039 | 24,149,235 | 28,841,226 | 19.43 | 29,533,834 | 2.40 |
| INTERAGENCY TRANSFER | 628,203 | 72,299 | 184,724 | 155.50 | 179,727 | -2.71 |
| OTHER FUND | 1,787,234 | 1,576,197 | 2,119,055 | 34.44 | 2,181,653 | 2.95 |
| HHS-HCF&P - NEVADA MEDICAID, TITLE | 1,638,664,986 | 1,679,114,294 | 2,007,810,923 | 19.58 | 2,434,585,609 | 21.26 |
| GENERAL FUND | 506,794,541 | 489,621,665 | 516,658,618 | 5.52 | 573,737,679 | 11.05 |
| FEDERAL FUND | 923,674,030 | 1,024,575,558 | 1,318,866,576 | 28.72 | 1,679,132,573 | 27.32 |
| INTERAGENCY TRANSFER | 177,581,991 | 133,253,115 | 141,707,706 | 6.34 | 151,124,091 | 6.64 |
| OTHER FUND | 30,614,424 | 31,663,956 | 30,578,023 | -3.43 | 30,591,266 | .04 |
| HHS-HCF&P - HIFA MEDICAL | 468,851 | | | | | |
| FEDERAL FUND | 315,024 | | | | | |
| INTERAGENCY TRANSFER | 153,827 | | | | | |

| | 2011-2012 Actual | 2012-2013 Work Program | 2013-2014 GOVERNOR RECOMMENDS | % Change | 2014-2015 GOVERNOR RECOMMENDS | % Change |
|--|---------------------|---------------------------|-------------------------------------|-------------|-------------------------------------|-------------|
| TOTAL HEALTH CARE FINANCING & POLICY | 1,935,721,443 | 1,994,251,986 | 2,323,539,636 | 16.51 | 2,751,615,626 | 18.42 |
| GENERAL FUND | 535,331,735 | 519,314,622 | 552,321,873 | 6.36 | 607,865,288 | 10.06 |
| BALANCE FORWARD | 22,581,570 | 3,098,977 | 1,869,317 | -39.68 | 2,013,505 | 7.71 |
| FEDERAL FUND | 1,008,868,782 | 1,164,991,114 | 1,449,677,505 | 24.44 | 1,803,284,559 | 24.39 |
| INTERAGENCY TRANSFER | 178,721,092 | 133,679,638 | 142,422,520 | 6.54 | 151,855,320 | 6.62 |
| OTHER FUND | 192,857,330 | 173,167,635 | 177,248,421 | 2.36 | 186,596,954 | 5.27 |
| REVERSIONS | -2,639,066 | | | | | |
| HEALTH DIVISION | | | | | | |
| HHS-DPBH - RADIATION CONTROL | 2,549,562 | 3,953,093 | 4,020,249 | 1.70 | 3,853,809 | -4.14 |
| BALANCE FORWARD | -332,714 | 1,089,063 | 1,343,134 | 23.33 | 1,176,819 | -12.38 |
| FEDERAL FUND | 224,581 | 229,400 | 215,001 | -6.28 | 215,000 | 00 |
| INTERAGENCY TRANSFER | 112,807 | 133,896 | 59,590 | -55.50 | 59,463 | 21 |
| OTHER FUND | 2,544,888 | 2,500,734 | 2,402,524 | -3.93 | 2,402,527 | .00 |
| HHS-DPBH - LOW-LEVEL RADIOACTIVE WASTE FUND | 101,413 | 958,952 | 1,007,129 | 5.02 | 1,143,647 | 13.56 |
| BALANCE FORWARD | -200,838 | 815,396 | 848,865 | 4.10 | 985,383 | 16.08 |
| OTHER FUND | 302,251 | 143,556 | 158,264 | 10.25 | 158,264 | |
| HHS-DPBH - CANCER CONTROL REGISTRY | 582,705 | 1,323,643 | 1,201,284 | -9.24 | 1,242,135 | 3.40 |
| BALANCE FORWARD | 29,127 | 420,490 | 431,420 | 2.60 | 472,272 | 9.47 |
| FEDERAL FUND | 476,098 | 814,784 | 689,056 | -15.43 | 689,055 | 00 |
| OTHER FUND | 77,480 | 88,369 | 80,808 | -8.56 | 80,808 | |
| HHS-DPBH - HEALTH STATISTICS AND PLANNING | 904,349 | 1,498,264 | 1,600,057 | 6.79 | 1,784,146 | 11.51 |
| GENERAL FUND | | 519,243 | | | | |
| BALANCE FORWARD | -43,628 | 43,628 | 43,628 | | 227,172 | 420.70 |
| FEDERAL FUND | | 25,000 | | | | |
| INTERAGENCY TRANSFER | 838,444 | 292,270 | 423,837 | 45.02 | 424,382 | .13 |
| OTHER FUND | 109,533 | 618,123 | 1,132,592 | 83.23 | 1,132,592 | |
| HHS-DPBH - CONSUMER HEALTH PROTECTION | 1,538,162 | 2,201,252 | 2,329,154 | 5.81 | 2,268,826 | -2.59 |
| BALANCE FORWARD | -212,284 | 212,285 | 231,872 | 9.23 | 171,544 | -26.02 |
| FEDERAL FUND | | 127,631 | 276,615 | 116.73 | 276,615 | |
| OTHER FUND | 1,750,446 | 1,861,336 | 1,820,667 | -2.18 | 1,820,667 | |
| HHS-ADSD - EARLY INTERVENTION SERVICES | 24,349,892 | 27,782,827 | 31,933,990 | 14.94 | 35,691,398 | 11.77 |
| GENERAL FUND | 19,710,338 | 22,067,436 | 27,423,929 | 24.27 | 31,181,337 | 13.70 |
| FEDERAL FUND | 169,616 | 231,100 | 169,616 | -26.60 | 169,616 | |
| INTERAGENCY TRANSFER | 4,926,828 | 5,298,898 | 4,192,884 | -20.87 | 4,192,884 | |
| OTHER FUND | 147,561 | 185,393 | 147,561 | -20.41 | 147,561 | |
| REVERSIONS | -604,451 | | | | | |
| HHS-DPBH - IMMUNIZATION PROGRAM | 5,290,756 | 7,513,520 | 5,932,668 | -21.04 | 5,490,149 | -7.46 |
| GENERAL FUND | 579,739 | 524,567 | 1,024,567 | 95.32 | 1,024,567 | |
| BALANCE FORWARD | 279,863 | | | | | |
| FEDERAL FUND | 3,419,952 | 5,674,224 | 3,546,882 | -37.49 | 3,103,534 | -12.50 |
| INTERAGENCY TRANSFER | 1,063,192 | 1,314,729 | 1,361,219 | 3.54 | 1,362,048 | .06 |
| REVERSIONS | -51,990 | | | | | |

| | 2011-2012 Actual | 2012-2013 Work Program | 2013-2014 GOVERNOR RECOMMENDS | % Change | 2014-2015 GOVERNOR RECOMMENDS | % Change |
|--|---------------------|---------------------------|-------------------------------------|-------------|-------------------------------------|-------------|
| HHS-DPBH - WIC FOOD SUPPLEMENT | 64,302,879 | 66,084,889 | 68,561,151 | 3.75 | 68,561,151 | .00 |
| FEDERAL FUND | 49,076,127 | 49,702,137 | 53,334,260 | 7.31 | 53,334,260 | |
| OTHER FUND | 15,226,891 | 16,382,752 | 15,226,891 | -7.06 | 15,226,891 | |
| REVERSIONS | -139 | | | | | |
| HHS-DPBH - COMMUNICABLE DISEASES | 15,704,842 | 14,571,419 | 16,346,531 | 12.18 | 16,346,686 | .00 |
| GENERAL FUND | 2,081,040 | 2,080,001 | 2,088,431 | .41 | 2,088,586 | .01 |
| BALANCE FORWARD | -2,190,725 | 2,190,796 | | | | |
| FEDERAL FUND | 10,830,534 | 9,038,921 | 11,149,850 | 23.35 | 11,149,850 | |
| OTHER FUND | 5,098,828 | 1,261,701 | 3,108,250 | 146.35 | 3,108,250 | |
| REVERSIONS | -114,835 | | | | | |
| HHS-DPBH - HEALTH FACILITIES HOSPITAL LICENSING | 8,103,648 | 14,785,199 | 14,938,043 | 1.03 | 14,123,236 | -5.45 |
| BALANCE FORWARD | -1,240,958 | 4,318,528 | 4,672,805 | 8.20 | 4,384,042 | -6.18 |
| FEDERAL FUND | 2,271,751 | 2,396,807 | 2,557,515 | 6.71 | 2,557,488 | 00 |
| INTERAGENCY TRANSFER | 983,207 | 1,154,243 | 1,619,971 | 40.35 | 1,093,954 | -32.47 |
| OTHER FUND | 6,089,648 | 6,915,621 | 6,087,752 | -11.97 | 6,087,752 | |
| HHS-DPBH - PUBLIC HEALTH PREPAREDNESS PROGRAM | 14,069,851 | 14,712,010 | 10,794,674 | -26.63 | 10,643,995 | -1.40 |
| FEDERAL FUND | 14,046,731 | 14,682,954 | 10,768,034 | -26.66 | 10,616,569 | -1.41 |
| INTERAGENCY TRANSFER | 13,084 | 21,556 | 15,141 | -29.76 | 15,927 | 5.19 |
| OTHER FUND | 11,500 | 7,500 | 11,499 | 53.32 | 11,499 | |
| REVERSIONS | -1,464 | | | | | |
| HHS-DPBH - BIOSTATISTICS AND EPIDEMIOLOGY | 4,331,949 | 5,425,331 | 4,361,189 | -19.61 | 4,388,240 | .62 |
| GENERAL FUND | 340,782 | 342,240 | 319,341 | -6.69 | 323,574 | 1.33 |
| FEDERAL FUND | 3,460,455 | 4,437,020 | 3,421,446 | -22.89 | 3,427,146 | .17 |
| INTERAGENCY TRANSFER | 452,644 | 600,903 | 570,945 | -4.99 | 588,063 | 3.00 |
| OTHER FUND | 78,938 | 45,168 | 49,457 | 9.50 | 49,457 | |
| REVERSIONS | -870 | | | | | |
| HHS-DPBH - CHRONIC DISEASE | 5,508,706 | 6,153,851 | 5,757,629 | -6.44 | 5,760,584 | .05 |
| BALANCE FORWARD | 8,491 | | | | | |
| FEDERAL FUND | 5,445,683 | 5,995,851 | 5,656,165 | -5.67 | 5,656,165 | |
| INTERAGENCY TRANSFER | 15,532 | 150,000 | 101,464 | -32.36 | 104,419 | 2.91 |
| OTHER FUND | 39,000 | 8,000 | | | | |
| HHS-DPBH - MATERNAL CHILD HEALTH SERVICES | 6,188,833 | 7,921,512 | 9,131,215 | 15.27 | 9,265,242 | 1.47 |
| GENERAL FUND | 881,541 | 879,181 | 1,069,798 | 21.68 | 1,077,958 | .76 |
| FEDERAL FUND | 2,944,622 | 4,720,912 | 4,371,210 | -7.41 | 4,356,327 | 34 |
| INTERAGENCY TRANSFER | 81,246 | 151,013 | 560,382 | 271.08 | 560,382 | |
| OTHER FUND | 2,412,570 | 2,170,406 | 3,129,825 | 44.20 | 3,270,575 | 4.50 |
| REVERSIONS | -131,146 | | | | | |
| HHS-DPBH - OFFICE OF HEALTH ADMINISTRATION | 5,500,513 | 8,322,491 | 7,075,004 | -14.99 | 6,566,256 | -7.19 |
| GENERAL FUND | 714,509 | 828,373 | 953,024 | 15.05 | 946,173 | 72 |
| BALANCE FORWARD | 565,229 | 1,765,795 | 2,578,620 | 46.03 | 2,198,468 | -14.74 |
| INTERAGENCY TRANSFER | 4,377,018 | 5,653,323 | 3,543,360 | -37.32 | 3,421,615 | -3.44 |
| | | | | | | |
| OTHER FUND | 75,000 | 75,000 | | | | |

| | 2011-2012 Actual | 2012-2013 Work Program | 2013-2014 GOVERNOR RECOMMENDS | % Change | 2014-2015 GOVERNOR RECOMMENDS | % Change |
|---|---------------------|---------------------------|-------------------------------------|-------------|-------------------------------------|-------------------|
| HHS-DPBH - COMMUNITY HEALTH SERVICES | 3,707,960 | 4,258,628 | 3,410,173 | -19.92 | 3,462,260 | 1.53 |
| GENERAL FUND | 1,083,651 | 1,064,232 | 988,965 | -7.07 | 1,043,120 | 5.48 |
| BALANCE FORWARD | 55,623 | | | | | |
| FEDERAL FUND | 762,673 | 656,000 | 645,000 | -1.68 | 645,000 | |
| INTERAGENCY TRANSFER | 841,982 | 1,215,541 | 727,889 | -40.12 | 725,821 | 28 |
| OTHER FUND | 1,158,144 | 1,322,855 | 1,048,319 | -20.75 | 1,048,319 | |
| REVERSIONS | -194,113 | | | | | |
| HHS-DPBH - EMERGENCY MEDICAL SERVICES | 1,186,528 | 965,376 | 1,050,719 | 8.84 | 894,030 | -14.91 |
| GENERAL FUND | 726,861 | 728,487 | 817,379 | 12.20 | 655,805 | -19.77 |
| BALANCE FORWARD | 629 | 50,010 | 1,435 | -97.13 | 1,435 | |
| FEDERAL FUND | 57,148 | 130,000 | 130,000 | | 130,000 | |
| INTERAGENCY TRANSFER | 173,199 | , | 61,505 | | 62,275 | 1.25 |
| OTHER FUND | 348,285 | 56,879 | 40,400 | -28.97 | 44,515 | 10.19 |
| REVERSIONS | -119,594 | 33,5.3 | .0,.00 | | , | |
| HHS-DPBH - MARIJUANA HEALTH REGISTRY | 911,820 | 1,572,528 | 1,040,702 | -33.82 | 805,947 | -22.56 |
| BALANCE FORWARD | 324,599 | 600,763 | 498,766 | -16.98 | 270,403 | -45.79 |
| OTHER FUND | 587,221 | 971,765 | 541,936 | -44.23 | 535,544 | -1.18 |
| HHS-DPBH - CHILD CARE SERVICES | 1,328,529 | 1,593,433 | 1,571,490 | -1.38 | 1,629,122 | 2.67 |
| | | | | -48.98 | | 3.67 220.42 |
| GENERAL FUND | 15,441 | 51,251 | 26,146 163 | | 83,778 163 | 220.42 |
| BALANCE FORWARD | -7,250 | 7,250 | | -97.75 | | |
| INTERAGENCY TRANSFER | 1,259,046 | 1,464,152 | 1,471,402 | .50 | 1,471,402 | |
| OTHER FUND REVERSIONS | 73,779 -12,487 | 70,780 | 73,779 | 4.24 | 73,779 | |
| HHS-DPBH - HEALTH FACILITIES-ADMIN PENALTY | 74,956 | 304,632 | 404,632 | 32.83 | 504,529 | 24.69 |
| BALANCE FORWARD | 12,404 | 304,632 | 304,632 | | 404,529 | 32.79 |
| OTHER FUND | 62,552 | 33 1,332 | 100,000 | | 100,000 | 020 |
| TOTAL HEALTH DIVISION | 166,237,853 | 191,902,850 | 192,467,683 | .29 | 194,425,388 | 1.02 |
| GENERAL FUND | 26,133,902 | 29,085,011 | 34,711,580 | 19.35 | 38,424,898 | 10.70 |
| BALANCE FORWARD | -2,952,432 | 11,818,636 | 10,955,340 | -7.30 | 10,292,230 | -6.05 |
| FEDERAL FUND | 93,185,971 | 98,862,741 | 96,930,650 | -1.95 | 96,326,625 | 62 |
| INTERAGENCY TRANSFER | 15,138,229 | 17,450,524 | 14,709,589 | -15.71 | 14,082,635 | -4.26 |
| OTHER FUND | 36,194,515 | 34,685,938 | 35,160,524 | 1.37 | 35,299,000 | .39 |
| REVERSIONS | -1,462,332 | ,,,,,,,, | ,,- | | ,, | |
| WELFARE AND SUPPORTIVE SERVICES | | | | | | |
| HHS-WELFARE - ADMINISTRATION | 29,060,118 | 56,210,692 | 40,551,951 | -27.86 | 39,369,258 | -2.92 |
| GENERAL FUND | 7,748,209 | 9,258,425 | 11,567,873 | 24.94 | 10,930,600 | -5.51 |
| BALANCE FORWARD | 512 | , , , , , | ,,- | | .,, | |
| FEDERAL FUND | 17,339,285 | 19,378,810 | 21,189,176 | 9.34 | 21,478,697 | 1.37 |
| INTERAGENCY TRANSFER | 3,871,575 | 27,400,070 | 7,322,845 | -73.27 | 6,467,541 | -11.68 |
| OTHER FUND | 308,014 | 173,387 | 472,057 | 172.26 | 492,420 | 4.31 |
| REVERSIONS | -207,477 | 110,001 | 712,001 | 2.20 | 702,720 | 7.01 |
| HHS-WELFARE - TANF | 46,623,442 | 48,659,084 | 45,431,131 | -6.63 | 44,228,088 | -2.65 |
| GENERAL FUND | 25,721,787 | 24,705,242 | 24,609,064 | -0.03 | 24,609,064 | -2.03 |
| FEDERAL FUND | 20,901,655 | 23,953,842 | 20,822,067 | | 19,619,024 | ₋ 5 70 |
| FLUERAL FUND | 20,901,000 | 23,933,042 | 20,022,007 | -13.07 | 19,019,024 | -5.78 |

| | 2011-2012 Actual | 2012-2013 Work Program | 2013-2014 GOVERNOR RECOMMENDS | % Change | 2014-2015 GOVERNOR RECOMMENDS | % Change |
|--|---------------------|---------------------------|-------------------------------------|-------------|-------------------------------------|-------------|
| HHS-WELFARE - ASSISTANCE TO AGED AND BLIND | 7,952,000 | 8,189,643 | 8,511,527 | 3.93 | 8,810,604 | 3.51 |
| GENERAL FUND | 7,887,442 | 8,189,643 | 8,511,527 | 3.93 | 8,810,604 | 3.51 |
| INTERAGENCY TRANSFER | 65,000 | | | | | |
| REVERSIONS | -442 | | | | | |
| HHS-WELFARE - FIELD SERVICES | 70,842,701 | 77,488,835 | 94,280,328 | 21.67 | 107,170,017 | 13.67 |
| GENERAL FUND | 26,889,839 | 27,282,749 | 36,449,572 | 33.60 | 42,900,741 | 17.70 |
| BALANCE FORWARD | 94,483 | 937 | | | | |
| FEDERAL FUND | 32,846,306 | 37,549,362 | 38,521,870 | 2.59 | 40,842,874 | 6.03 |
| INTERAGENCY TRANSFER | 11,204,847 | 12,621,017 | 19,284,221 | 52.79 | 23,401,336 | 21.3 |
| OTHER FUND | 24,484 | 34,770 | 24,665 | -29.06 | 25,066 | 1.63 |
| REVERSIONS | -217,258 | | | | | |
| HHS-WELFARE - CHILD SUPPORT ENFORCEMENT PROGRAM | 12,267,102 | 18,859,438 | 18,517,207 | -1.81 | 19,172,128 | 3.54 |
| BALANCE FORWARD | -935,635 | 3,637,496 | 2,182,018 | -40.01 | 2,705,705 | 24.00 |
| FEDERAL FUND | 7,634,092 | 10,004,865 | 10,474,586 | 4.69 | 10,193,300 | -2.69 |
| OTHER FUND | 5,568,645 | 5,217,077 | 5,860,603 | 12.33 | 6,273,123 | 7.04 |
| HHS-WELFARE - CHILD SUPPORT FEDERAL REIMBURSEMENT | 23,972,521 | 40,903,165 | 39,027,634 | -4.59 | 40,968,578 | 4.9 |
| BALANCE FORWARD | -4,671 | 152,826 | 152,826 | | 152,826 | |
| FEDERAL FUND | 23,958,013 | 40,722,298 | 38,855,627 | -4.58 | 40,796,573 | 5.0 |
| OTHER FUND | 19,179 | 28,041 | 19,181 | -31.60 | 19,179 | 0 |
| HHS-WELFARE - CHILD ASSISTANCE AND DEVELOPMENT | 41,881,151 | 39,301,777 | 35,322,146 | -10.13 | 35,450,303 | .36 |
| GENERAL FUND | 2,580,421 | 2,580,421 | 2,577,999 | 09 | 2,597,467 | .70 |
| BALANCE FORWARD | 97,623 | | | | | |
| FEDERAL FUND | 38,453,107 | 36,721,356 | 32,744,147 | -10.83 | 32,852,836 | .3 |
| INTERAGENCY TRANSFER | 750,000 | | | | | |
| HHS-WELFARE - ENERGY ASSISTANCE PROGRAM | 14,391,703 | 18,117,240 | 20,070,830 | 10.78 | 20,249,647 | .8 |
| FEDERAL FUND | 5,464,925 | 9,486,031 | 11,051,317 | 16.50 | 11,044,420 | 0 |
| OTHER FUND | 8,926,778 | 8,631,209 | 9,019,513 | 4.50 | 9,205,227 | 2.0 |
| TOTAL WELFARE AND SUPPORTIVE SERVICES | 246,990,738 | 307,729,874 | 301,712,754 | -1.96 | 315,418,623 | 4.5 |
| GENERAL FUND | 70,827,698 | 72,016,480 | 83,716,035 | 16.25 | 89,848,476 | 7.3 |
| BALANCE FORWARD | -747,688 | 3,791,259 | 2,334,844 | -38.42 | 2,858,531 | 22.4 |
| FEDERAL FUND | 146,597,383 | 177,816,564 | 173,658,790 | -2.34 | 176,827,724 | 1.8 |
| INTERAGENCY TRANSFER | 15,891,422 | 40,021,087 | 26,607,066 | -33.52 | | 12.2 |
| OTHER FUND | 14,847,100 | 14,084,484 | 15,396,019 | 9.31 | 16,015,015 | 4.0 |
| REVERSIONS | -425,177 | , , | , , | | | |
| MENTAL HEALTH AND DEVELOPMENTAL SEI | RVICES | | | | | |
| HHS-DPBH - SO NV ADULT MENTAL HEALTH SERVICES | 81,063,308 | 87,237,086 | 83,021,312 | -4.83 | 81,619,103 | -1.6 |
| GENERAL FUND | 74,353,953 | 74,956,332 | 70,664,943 | -5.73 | 64,534,912 | -8.6 |
| FEDERAL FUND | 5,610,981 | 6,258,156 | 5,782,603 | -7.60 | 5,782,603 | |
| INTERAGENCY TRANSFER | 2,661,942 | 5,718,279 | 6,300,292 | 10.18 | 11,028,114 | 75.0 |
| OTHER FUND | 250,637 | 304,319 | 273,474 | -10.14 | 273,474 | |
| REVERSIONS | -1,814,205 | | | | | |

| | 2011-2012 Actual | 2012-2013 Work Program | 2013-2014 GOVERNOR RECOMMENDS | % Change | 2014-2015 GOVERNOR RECOMMENDS | % Change |
|--|---------------------|---------------------------|-------------------------------------|-------------|-------------------------------------|-------------|
| HHS-DPBH - NO NV ADULT MENTAL HEALTH SVCS | 27,996,814 | 31,993,364 | 30,325,493 | -5.21 | 30,576,980 | .83 |
| GENERAL FUND | 26,418,705 | 26,605,748 | 24,752,631 | -6.97 | 22,821,146 | -7.80 |
| FEDERAL FUND | 1,411,825 | 2,057,954 | 1,580,849 | -23.18 | 1,585,983 | .32 |
| INTERAGENCY TRANSFER | 1,705,091 | 2,926,189 | 3,796,316 | 29.74 | 5,973,925 | 57.36 |
| OTHER FUND | 266,239 | 403,473 | 195,697 | -51.50 | 195,926 | .12 |
| REVERSIONS | -1,805,046 | | | | | |
| HHS-DPBH - MENTAL HEALTH INFORMATION SYSTEM | 1,572,773 | 1,771,512 | 2,674,254 | 50.96 | 2,714,509 | 1.51 |
| GENERAL FUND | 1,289,084 | 1,318,440 | 2,398,769 | 81.94 | 2,433,962 | 1.47 |
| FEDERAL FUND | 170,164 | 211,391 | 118,190 | -44.09 | 118,183 | 01 |
| INTERAGENCY TRANSFER | 237,474 | 241,681 | 157,295 | -34.92 | 162,364 | 3.22 |
| REVERSIONS | -123,949 | , | • | | • | |
| HHS-ADSD - FAMILY PRESERVATION PROGRAM | 2,511,784 | 2,756,006 | 2,757,876 | .07 | 2,859,604 | 3.69 |
| GENERAL FUND | 2,638,570 | 1,596,310 | 1,557,876 | -2.41 | 1,659,604 | 6.53 |
| INTERAGENCY TRANSFER | | 1,159,696 | 1,200,000 | 3.48 | 1,200,000 | |
| REVERSIONS | -126,786 | | | | | |
| HHS-ADSD - RURAL REGIONAL CENTER | 14,027,245 | 14,996,724 | 15,588,888 | 3.95 | 15,851,299 | 1.68 |
| GENERAL FUND | 8,296,726 | 7,958,242 | 8,528,063 | 7.16 | 8,528,974 | .01 |
| INTERAGENCY TRANSFER | 5,398,802 | 6,174,283 | 6,641,989 | 7.58 | 6,903,489 | 3.94 |
| OTHER FUND | 418,836 | 864,199 | 418,836 | -51.53 | 418,836 | |
| REVERSIONS | -87,119 | | | | | |
| HHS-DPBH - ADMINISTRATION | 7,075,803 | 7,724,040 | 7,727,483 | .04 | 7,839,891 | 1.45 |
| GENERAL FUND | 1,949,613 | 1,978,700 | 1,911,851 | -3.38 | 2,010,897 | 5.18 |
| FEDERAL FUND | 3,964,075 | 4,168,893 | 4,513,238 | 8.26 | 4,513,238 | |
| INTERAGENCY TRANSFER | 1,331,710 | 1,576,447 | 1,302,394 | -17.38 | 1,315,756 | 1.03 |
| REVERSIONS | -169,595 | | | | | |
| HHS-DPBH - SUBSTANCE ABUSE PREV & TREATMENT AGCY | 22,657,643 | 25,790,567 | 20,961,248 | -18.73 | 20,640,137 | -1.53 |
| GENERAL FUND | 9,509,326 | 9,532,651 | 6,648,372 | -30.26 | 6,384,016 | -3.98 |
| BALANCE FORWARD | -362,791 | 822,565 | 822,565 | | 815,810 | 82 |
| FEDERAL FUND | 12,371,411 | 13,998,677 | 13,057,777 | -6.72 | 13,057,777 | |
| INTERAGENCY TRANSFER | 1,173,946 | 1,179,337 | 350,000 | -70.32 | 300,000 | -14.29 |
| OTHER FUND | 282,535 | 257,337 | 82,534 | -67.93 | 82,534 | |
| REVERSIONS | -316,784 | | | | | |
| HHS-DPBH - ALCOHOL TAX PROGRAM | 889,104 | 1,520,755 | 1,654,321 | 8.78 | 1,772,107 | 7.12 |
| BALANCE FORWARD | -156,314 | 563,234 | 563,234 | | 654,321 | 16.17 |
| OTHER FUND | 1,045,418 | 957,521 | 1,091,087 | 13.95 | 1,117,786 | 2.45 |
| HHS-ADSD - DESERT REGIONAL CENTER | 82,397,072 | 87,761,603 | 95,554,055 | 8.88 | 103,164,090 | 7.96 |
| GENERAL FUND | 47,516,852 | 46,332,630 | 47,022,520 | 1.49 | 50,210,249 | 6.78 |
| INTERAGENCY TRANSFER | 37,448,627 | 38,500,499 | 45,126,680 | 17.21 | 49,548,986 | 9.80 |
| OTHER FUND | 2,436,875 | 2,928,474 | 3,404,855 | 16.27 | 3,404,855 | |
| REVERSIONS | -5,005,282 | | | | | |

| | 2011-2012 Actual | 2012-2013 Work Program | 2013-2014 GOVERNOR RECOMMENDS | % Change | 2014-2015 GOVERNOR RECOMMENDS | % Change |
|--|---------------------|---------------------------|-------------------------------------|-------------|-------------------------------------|-------------|
| HHS-ADSD - SIERRA REGIONAL CENTER | 32,341,709 | 35,099,290 | 34,666,020 | -1.23 | 36,186,058 | 4.38 |
| GENERAL FUND | 19,120,517 | 18,629,896 | 16,887,415 | -9.35 | 17,397,239 | 3.02 |
| INTERAGENCY TRANSFER | 13,911,355 | 14,909,868 | 16,803,177 | 12.70 | 17,813,391 | 6.01 |
| OTHER FUND | 946,747 | 1,559,526 | 975,428 | -37.45 | 975,428 | |
| REVERSIONS | -1,636,910 | | | | | |
| HHS-DPBH - FACILITY FOR THE MENTAL OFFENDER | 8,647,036 | 8,693,455 | 9,098,568 | 4.66 | 9,222,225 | 1.36 |
| GENERAL FUND | 8,337,884 | 8,432,011 | 8,835,816 | 4.79 | 8,959,473 | 1.40 |
| INTERAGENCY TRANSFER | 250,000 | | | | | |
| OTHER FUND | 248,303 | 261,444 | 262,752 | .50 | 262,752 | |
| REVERSIONS | -189,151 | | | | | |
| HHS-DPBH - RURAL CLINICS | 10,740,133 | 12,705,541 | 12,089,971 | -4.84 | 12,126,023 | .30 |
| GENERAL FUND | 10,727,274 | 10,832,793 | 9,220,577 | -14.88 | 7,642,012 | -17.12 |
| FEDERAL FUND | 402,238 | 336,305 | 428,653 | 27.46 | 428,653 | |
| INTERAGENCY TRANSFER | 923,696 | 1,229,008 | 2,217,137 | 80.40 | 3,825,514 | 72.54 |
| OTHER FUND | 278,133 | 307,435 | 223,604 | -27.27 | 229,844 | 2.79 |
| REVERSIONS | -1,591,208 | | | | | |
| TOTAL MENTAL HEALTH AND DEVELOPMENTAL SERVICES | 291,920,424 | 318,049,943 | 316,119,489 | 61 | 324,572,026 | 2.67 |
| GENERAL FUND | 210,158,504 | 208,173,753 | 198,428,833 | -4.68 | 192,582,484 | -2.95 |
| BALANCE FORWARD | -519,105 | 1,385,799 | 1,385,799 | | 1,470,131 | 6.09 |
| FEDERAL FUND | 23,930,694 | 27,031,376 | 25,481,310 | -5.73 | 25,486,437 | .02 |
| INTERAGENCY TRANSFER | 65,042,643 | 73,615,287 | 83,895,280 | 13.96 | 98,071,539 | 16.90 |
| OTHER FUND | 6,173,723 | 7,843,728 | 6,928,267 | -11.67 | 6,961,435 | .48 |
| REVERSIONS | -12,866,035 | | | | | |
| CHILD AND FAMILY SERVICES | | | | | | |
| HHS-DCFS - COMMUNITY JUVENILE JUSTICE PROGRAMS | 3,938,830 | 5,610,974 | 4,780,970 | -14.79 | 4,667,203 | -2.38 |
| GENERAL FUND | 2,349,807 | 2,349,615 | 2,349,807 | .01 | 2,349,807 | |
| BALANCE FORWARD | 116,428 | 281,953 | 425,552 | 50.93 | 311,785 | -26.73 |
| FEDERAL FUND | 1,456,931 | 2,974,419 | 1,989,947 | -33.10 | 1,989,947 | |
| OTHER FUND | 15,664 | 4,987 | 15,664 | 214.10 | 15,664 | |
| HHS-DCFS - WASHOE COUNTY CHILD WELFARE | 28,328,060 | 30,029,090 | 30,347,081 | 1.06 | 31,443,643 | 3.61 |
| GENERAL FUND | 14,250,000 | 14,250,000 | 15,258,993 | 7.08 | 15,781,672 | 3.43 |
| FEDERAL FUND | 13,387,710 | 14,156,554 | 14,397,738 | 1.70 | 14,971,621 | 3.99 |
| INTERAGENCY TRANSFER | 690,350 | 922,536 | 690,350 | -25.17 | 690,350 | |
| OTHER FUND | | 700,000 | | | | |
| HHS-DCFS - CLARK COUNTY CHILD WELFARE | 78,444,217 | 81,400,060 | 83,206,842 | 2.22 | 86,691,251 | 4.19 |
| GENERAL FUND | 42,750,000 | 42,750,000 | 45,087,427 | 5.47 | 46,729,301 | 3.64 |
| FEDERAL FUND | 33,617,204 | 36,321,895 | 36,042,402 | 77 | 37,884,937 | 5.11 |
| INTERAGENCY TRANSFER | 2,077,013 | 2,328,165 | 2,077,013 | -10.79 | 2,077,013 | |
| HHS-DCFS - UNITY/SACWIS | 5,359,534 | 8,160,760 | 6,097,605 | -25.28 | 5,881,552 | -3.54 |
| GENERAL FUND | 3,113,990 | 4,204,177 | 3,194,196 | -24.02 | 3,074,842 | -3.74 |
| FEDERAL FUND | 2,221,307 | 3,705,651 | 2,620,642 | -29.28 | 2,529,907 | -3.46 |
| INTERAGENCY TRANSFER | 242,873 | 250,932 | 282,767 | 12.69 | 276,803 | -2.11 |
| REVERSIONS | -218,636 | | | | | |
| | | | | | | |

| | 2011-2012 Actual | 2012-2013 Work Program | 2013-2014 GOVERNOR RECOMMENDS | % Change | 2014-2015 GOVERNOR RECOMMENDS | % Change |
|--|---------------------|---------------------------|-------------------------------------|-------------|-------------------------------------|-------------|
| HHS-DCFS - CHILDREN, YOUTH & FAMILY ADMINISTRATION | 18,495,367 | 17,463,344 | 17,145,331 | -1.82 | 17,368,171 | 1.30 |
| GENERAL FUND | 4,935,433 | 5,016,962 | 5,390,675 | 7.45 | 5,575,276 | 3.42 |
| BALANCE FORWARD | 9,306 | 40,695 | | | | |
| FEDERAL FUND | 13,309,888 | 11,304,915 | 10,693,725 | -5.41 | 10,720,698 | .25 |
| INTERAGENCY TRANSFER | 641,440 | 1,035,772 | 1,013,431 | -2.16 | 1,024,697 | 1.11 |
| OTHER FUND | 55,379 | 65,000 | 47,500 | -26.92 | 47,500 | |
| REVERSIONS | -456,079 | | | | | |
| HHS-DCFS - YOUTH ALTERNATIVE PLACEMENT | 3,532,099 | 3,532,099 | 3,532,099 | .00 | 3,532,099 | .00 |
| GENERAL FUND | 1,534,481 | 1,534,481 | 2,184,481 | 42.36 | 2,184,481 | |
| OTHER FUND | 1,997,618 | 1,997,618 | 1,347,618 | -32.54 | 1,347,618 | |
| HHS-DCFS - JUVENILE CORRECTIONAL FACILITY | 1,464,282 | 1,472,940 | 18,811,515 | 1,177.14 | 20,027,051 | 6.46 |
| GENERAL FUND | 1,472,661 | 1,472,940 | 18,167,144 | 1,133.39 | 19,352,154 | 6.52 |
| INTERAGENCY TRANSFER | | | 639,297 | | 639,297 | |
| OTHER FUND | | | 5,074 | | 35,600 | 601.62 |
| REVERSIONS | -8,379 | | | | | |
| HHS-DCFS - CALIENTE YOUTH CENTER | 7,678,682 | 8,104,011 | | | | |
| GENERAL FUND | 7,777,466 | 7,856,110 | | | | |
| INTERAGENCY TRANSFER | 234,045 | 247,901 | | | | |
| REVERSIONS | -332,829 | | | | | |
| HHS-DCFS - VICTIMS OF DOMESTIC VIOLENCE | 2,923,761 | 4,248,440 | 3,767,543 | -11.32 | 4,109,606 | 9.08 |
| BALANCE FORWARD | -97,706 | 532,357 | 501,805 | -5.74 | 843,868 | 68.17 |
| OTHER FUND | 3,021,467 | 3,716,083 | 3,265,738 | -12.12 | 3,265,738 | |
| HHS-DCFS - RURAL CHILD WELFARE | 15,065,999 | 18,197,504 | 18,633,241 | 2.39 | 19,745,677 | 5.97 |
| GENERAL FUND | 5,752,175 | 6,002,881 | 6,180,868 | 2.97 | 7,010,260 | 13.42 |
| BALANCE FORWARD | -29,858 | 282,626 | 215,126 | -23.88 | 215,126 | |
| FEDERAL FUND | 6,496,609 | 7,117,959 | 7,894,136 | 10.90 | 8,177,180 | 3.59 |
| INTERAGENCY TRANSFER | 1,985,338 | 1,870,733 | 1,786,108 | -4.52 | 1,786,108 | |
| OTHER FUND | 2,378,779 | 2,923,305 | 2,557,003 | -12.53 | 2,557,003 | |
| REVERSIONS | -1,517,044 | ,, | ,, | | , , | |
| HHS-DCFS - CHILD WELFARE TRUST | 257,293 | 332,290 | 253,597 | -23.68 | 253,597 | .00 |
| BALANCE FORWARD | 16,108 | 5,019 | | | | |
| OTHER FUND | 241,185 | 327,271 | 253,597 | -22.51 | 253,597 | |
| HHS-DCFS - TRANSITION FROM FOSTER CARE | 1,103,487 | 1,947,752 | 1,814,096 | -6.86 | 1,701,700 | -6.20 |
| BALANCE FORWARD | 173,192 | 831,200 | 822,227 | -1.08 | 710,609 | -13.58 |
| OTHER FUND | 930,295 | 1,116,552 | 991,869 | -11.17 | 991,091 | 08 |
| HHS-DCFS - REVIEW OF DEATH OF CHILDREN | 65,811 | 338,306 | 333,653 | -1.38 | 344,404 | 3.22 |
| DALANCE FORWARD | 26 202 | 195,658 | 217 722 | 11 20 | 220 404 | 4.94 |
| BALANCE FORWARD | -26,383 | 195,056 | 217,733 | 11.28 | 228,484 | 4.94 |

| | 2011-2012 Actual | 2012-2013 Work Program | 2013-2014 GOVERNOR RECOMMENDS | % Change | 2014-2015 GOVERNOR RECOMMENDS | % Change |
|--|---------------------|---------------------------|-------------------------------------|-------------|-------------------------------------|-------------|
| HHS-DCFS - NEVADA YOUTH TRAINING CENTER | 7,316,411 | 9,445,011 | | | | |
| GENERAL FUND | 8,683,351 | 8,960,654 | | | | |
| BALANCE FORWARD | 12,266 | | | | | |
| INTERAGENCY TRANSFER | 329,213 | 438,226 | | | | |
| OTHER FUND | | 46,131 | | | | |
| REVERSIONS | -1,708,419 | | | | | |
| HHS-DCFS - YOUTH PAROLE SERVICES | 4,576,390 | 5,925,476 | 5,626,164 | -5.05 | 5,777,788 | 2.69 |
| GENERAL FUND | 2,714,118 | 2,729,054 | 2,791,820 | 2.30 | 2,867,632 | 2.72 |
| BALANCE FORWARD | -412,083 | 412,083 | | | | |
| OTHER FUND | 2,706,590 | 2,784,339 | 2,834,344 | 1.80 | 2,910,156 | 2.67 |
| REVERSIONS | -432,235 | | | | | |
| HHS-DCFS - NORTHERN NV CHILD & ADOLESCENT SERVICES | 7,231,286 | 7,750,565 | 7,784,895 | .44 | 8,018,288 | 3.00 |
| GENERAL FUND | 3,300,062 | 3,059,650 | 3,249,664 | 6.21 | 3,310,376 | 1.87 |
| INTERAGENCY TRANSFER | 3,928,327 | 4,614,881 | 4,384,266 | -5.00 | 4,559,227 | 3.99 |
| OTHER FUND | 23,053 | 76,034 | 150,965 | 98.55 | 148,685 | -1.51 |
| REVERSIONS | -20,156 | | | | | |
| HHS-DCFS - SOUTHERN NV CHILD & ADOLESCENT SERVICES | 21,061,541 | 24,857,612 | 24,089,123 | -3.09 | 25,273,724 | 4.92 |
| GENERAL FUND | 11,203,026 | 10,719,722 | 9,893,114 | -7.71 | 10,331,289 | 4.43 |
| FEDERAL FUND | | | 342,167 | | 342,167 | |
| INTERAGENCY TRANSFER | 10,786,551 | 13,343,411 | 12,872,291 | -3.53 | 13,607,154 | 5.71 |
| OTHER FUND | 574,788 | 794,479 | 981,551 | 23.55 | 993,114 | 1.18 |
| REVERSIONS | -1,502,824 | | | | | |
| TOTAL CHILD AND FAMILY SERVICES | 206,843,050 | 228,816,234 | 226,223,755 | -1.13 | 234,835,754 | 3.81 |
| GENERAL FUND | 109,836,570 | 110,906,246 | 113,748,189 | 2.56 | 118,567,090 | 4.24 |
| BALANCE FORWARD | -238,730 | 2,581,591 | 2,182,443 | -15.46 | 2,309,872 | 5.84 |
| FEDERAL FUND | 70,489,649 | 75,581,393 | 73,980,757 | -2.12 | 76,616,457 | 3.56 |
| INTERAGENCY TRANSFER | 20,915,150 | 25,052,557 | 23,745,523 | -5.22 | 24,660,649 | 3.85 |
| OTHER FUND | 12,037,012 | 14,694,447 | 12,566,843 | -14.48 | 12,681,686 | .91 |
| REVERSIONS | -6,196,601 | , , | | | , , | |
| EMPLOYMENT, TRAINING AND REHABILITATION | N | | | | | |
| DETR - ADMINISTRATION | 4,987,743 | 5,591,217 | 5,887,026 | 5.29 | 5,848,475 | 65 |
| BALANCE FORWARD | 9 | 351,191 | 351,192 | | 351,192 | |
| INTERAGENCY TRANSFER | 4,987,734 | 5,240,026 | 5,535,834 | 5.65 | 5,497,283 | |
| DETR - INFORMATION DEVELOPMENT AND PROCESSING | 10,086,774 | 12,387,223 | 13,746,267 | 10.97 | 12,934,167 | -5.91 |
| BALANCE FORWARD | -2,587 | 903,994 | 903,994 | | 703,994 | -22.12 |
| INTERAGENCY TRANSFER | 10,077,740 | 11,483,229 | 12,842,273 | 11.84 | 12,230,173 | -4.77 |
| OTHER FUND | 11,621 | | | | | |
| DETR - RESEARCH & ANALYSIS | 2,384,446 | 2,945,344 | 2,905,680 | -1.35 | 3,040,125 | 4.63 |
| BALANCE FORWARD | -15,428 | 287,332 | 287,333 | | 327,765 | |
| FEDERAL FUND | 1,483,175 | 1,127,375 | 1,333,247 | 18.26 | 1,364,927 | |
| INTERAGENCY TRANSFER | 916,699 | 1,530,637 | 1,285,100 | -16.04 | 1,347,433 | |
| | -, | ,,- | ,, | | , , , | |

| | 2011-2012 Actual | 2012-2013 Work Program | 2013-2014 GOVERNOR RECOMMENDS | % Change | 2014-2015 GOVERNOR RECOMMENDS | % Change |
|--|---------------------|---------------------------|-------------------------------------|-------------|-------------------------------------|-------------|
| DETR - EQUAL RIGHTS COMMISSION | 1,225,542 | 1,293,670 | 1,405,044 | 8.61 | 1,405,271 | .02 |
| GENERAL FUND | 996,409 | 930,078 | 984,944 | 5.90 | 985,171 | .02 |
| FEDERAL FUND | 362,800 | 361,950 | 418,900 | 15.73 | 418,900 | |
| OTHER FUND | 1,035 | 1,642 | 1,200 | -26.92 | 1,200 | |
| REVERSIONS | -134,702 | | | | | |
| DETR - REHABILITATION ADMINISTRATION | 1,095,516 | 1,468,665 | 1,321,254 | -10.04 | 1,441,564 | 9.11 |
| BALANCE FORWARD | -16,989 | 210,518 | 210,518 | | 231,605 | 10.02 |
| FEDERAL FUND | 51,827 | 340,680 | | | | |
| INTERAGENCY TRANSFER | 1,038,304 | 887,467 | 1,081,271 | 21.84 | 1,180,401 | 9.17 |
| OTHER FUND | 22,374 | 30,000 | 29,465 | -1.78 | 29,558 | .32 |
| DETR - DISABILITY ADJUDICATION | 15,032,706 | 18,792,365 | 15,873,821 | -15.53 | 17,097,687 | 7.71 |
| FEDERAL FUND | 15,032,382 | 18,792,365 | 15,873,821 | -15.53 | 17,097,687 | 7.71 |
| OTHER FUND | 324 | | | | | |
| DETR - VOCATIONAL REHABILITATION | 16,974,672 | 18,599,558 | 20,162,209 | 8.40 | 20,567,276 | 2.01 |
| GENERAL FUND | 2,153,669 | 2,137,179 | 2,838,308 | 32.81 | 2,873,050 | 1.22 |
| BALANCE FORWARD | 287,149 | 65,317 | 65,317 | | 65,317 | |
| FEDERAL FUND | 15,558,416 | 16,239,092 | 17,231,584 | 6.11 | 17,601,909 | 2.15 |
| INTERAGENCY TRANSFER | 144,274 | 157,970 | 27,000 | -82.91 | 27,000 | |
| REVERSIONS | -1,168,836 | | | | | |
| DETR - SERVICES TO THE BLIND & VISUALLY IMPAIRED | 4,363,220 | 4,741,185 | | | | |
| GENERAL FUND | 595,255 | 589,186 | | | | |
| BALANCE FORWARD | 58,190 | | | | | |
| FEDERAL FUND | 3,904,602 | 4,151,999 | | | | |
| INTERAGENCY TRANSFER | 8,307 | | | | | |
| REVERSIONS | -203,134 | | | | | |
| DETR - BLIND BUSINESS ENTERPRISE PROGRAM | 2,031,659 | 6,152,505 | 5,713,015 | -7.14 | 5,571,813 | -2.47 |
| BALANCE FORWARD | -279,281 | 3,808,706 | 3,402,075 | -10.68 | 3,260,873 | -4.15 |
| FEDERAL FUND | 825,134 | 838,752 | 825,134 | -1.62 | 825,134 | |
| OTHER FUND | 1,485,806 | 1,505,047 | 1,485,806 | -1.28 | 1,485,806 | |
| DETR - CLIENT ASSISTANCE PROGRAM | 178,286 | 201,471 | | | | |
| FEDERAL FUND | 178,286 | 201,471 | | | | |
| DETR - EMPLOYMENT SECURITY | 116,010,577 | 141,371,114 | 119,528,557 | -15.45 | 115,355,483 | -3.49 |
| BALANCE FORWARD | -2,726,742 | 10,682,696 | 8,211,238 | -23.14 | 6,549,948 | -20.23 |
| FEDERAL FUND | 83,310,376 | 91,714,798 | 80,659,555 | -12.05 | 80,659,550 | 00 |
| INTERAGENCY TRANSFER | 361,065 | 1,855,720 | 836,311 | -54.93 | 848,091 | 1.41 |
| INTERIM FINANCE | 22,552,947 | 26,000,000 | | | | |
| OTHER FUND | 12,512,930 | 11,117,900 | 29,821,453 | 168.23 | 27,297,894 | -8.46 |
| REVERSIONS | 1 | | | | | |
| DETR - EMPLOYMENT SECURITY - SPECIAL FUND | 8,186,315 | 19,217,540 | 8,049,212 | -58.12 | 4,361,831 | -45.81 |
| BALANCE FORWARD | -498,582 | 4,201,521 | 3,471,452 | -17.38 | 2,961,740 | -14.68 |
| FEDERAL FUND | 7,228,135 | 13,528,769 | 3,177,669 | -76.51 | | |
| OTHER FUND | 1,456,762 | 1,487,250 | 1,400,091 | -5.86 | 1,400,091 | |

| | 2011-2012 Actual | 2012-2013 Work Program | 2013-2014 GOVERNOR RECOMMENDS | % Change | 2014-2015 GOVERNOR RECOMMENDS | % Change |
|---|---------------------|---------------------------|-------------------------------------|-------------|-------------------------------------|-------------|
| TOTAL EMPLOYMENT, TRAINING AND REHABILITATION | 182,557,456 | 232,761,857 | 194,592,085 | -16.40 | 187,623,692 | -3.58 |
| GENERAL FUND | 3,745,333 | 3,656,443 | 3,823,252 | 4.56 | 3,858,221 | .91 |
| BALANCE FORWARD | -3,194,261 | 20,511,275 | 16,903,119 | -17.59 | 14,452,434 | -14.50 |
| FEDERAL FUND | 127,935,133 | 147,297,251 | 119,519,910 | -18.86 | 117,968,107 | -1.30 |
| INTERAGENCY TRANSFER | 17,534,123 | 21,155,049 | 21,607,789 | 2.14 | 21,130,381 | -2.21 |
| INTERIM FINANCE | 22,552,947 | 26,000,000 | | | | |
| OTHER FUND | 15,490,852 | 14,141,839 | 32,738,015 | 131.50 | 30,214,549 | -7.71 |
| REVERSIONS | -1,506,671 | | | | | |
| HUMAN SERVICES | | | | | | |
| GENERAL FUND | 977,935,365 | 960,301,304 | 1,004,028,768 | 4.55 | 1,070,469,878 | 6.62 |
| BALANCE FORWARD | 13,664,462 | 46,917,787 | 36,787,317 | -21.59 | 34,603,575 | -5.94 |
| FEDERAL FUND | 1,508,801,479 | 1,733,670,808 | 1,976,036,722 | 13.98 | 2,331,656,073 | 18.00 |
| INTERAGENCY TRANSFER | 330,252,008 | 336,553,211 | 343,042,945 | 1.93 | 369,692,466 | 7.77 |
| INTERIM FINANCE | 22,552,947 | 26,000,501 | | | | |
| OTHER FUND | 309,779,893 | 299,926,740 | 327,132,692 | 9.07 | 334,057,590 | 2.12 |
| REVERSIONS | -27,365,452 | | | | | |
| TOTAL FOR HUMAN SERVICES | 3,135,620,702 | 3,403,370,351 | 3,687,028,444 | 8.33 | 4,140,479,582 | 12.30 |
| Less: INTER-AGENCY TRANSFER | 330,252,008 | 336,553,211 | 343,042,945 | 1.93 | 369,692,466 | 7.77 |
| NET HUMAN SERVICES | 2,805,368,694 | 3,066,817,140 | 3,343,985,499 | 9.04 | 3,770,787,116 | 12.76 |